

Under Graduate Students MCQ's Bank Gen. Surgery

- 1. Gold standard investigation for screening of breast carcinoma in patients with breast implant:**
 - a. MRI
 - b. USG
 - c. Mammography
 - d. CT Scan

- 2. Absent parathyroid, thymic aplasia with immuno-deficiency and cardiac defects are features of:**
 - a. Autoimmune polyglandular syndrome
 - b. Pendred syndrome
 - c. Di-George syndrome
 - d. Lesch-Nyhan syndrome

- 3. Indication for surgery in a case of adrenal incidentaloma:**
 - a. Size >5 cm
 - b. Bilateral adrenal metastasis
 - c. Functional tumor
 - d. All of the above

- 4. All are true about amoebic liver abscess except:**
 - a. Metronidazole is mainstay of treatment
 - b. Multifocal abscess can not be treated by aspiration
 - c. More common in left side
 - d. More common in female

- 5 False about hepatic adenoma:**
 - a. Chances of malignancy in 10% cases
 - b. Rupture in 20% cases
 - c. Hepatic architecture is maintained
 - d. Most patients are symptomatic

- 6 Okuda staging contains all except:**
 - a. Bilirubin
 - b. Tumor size
 - c. Ascites
 - d. AFP

- 7 All of the following are true regarding epitheloid hemangioendothelioma except:**
 - a. Most common in males
 - b. Liver transplantation is treatment of choice
 - c. Associated with vinyl chloride
 - d. Factor VIII staining is used for diagnosis

- 8 In orthotropic liver transplantation, which is the best way to get bile drainage in donor liver?**
 - a. Donor bile duct with recipient bile duct or Roux-en-Y choledochojejunostomy
 - b. Donor bile duct with duodenum of recipient
 - c. Donor bile duct with jejunum of recipient
 - d. External drainage for few days followed by choledochojejunostomy

- 9 Which of the following causes minimal porto-hepatic compromise?**
 - a. Non-selective shunts
 - b. TIPSS
 - c. Distal splenorenal shunt
 - d. Sclerotherapy

- 10. Sclerotherapy failure is defined as:**
 - a. Unresponsiveness to consecutive 2 energy sclerotherapies
 - b. Unresponsiveness to consecutive 3 energy sclerotherapies
 - c. Remnant bleeding even after sclerotherapy for successive 2 hospital admissions
 - d. Failure to heal after a single treatment

- 11. The obstruction of two or more major hepatic veins is seen in:**
 - a. Budd-Chiari syndrome
 - b. Reye's syndrome
 - c. Rotor syndrome
 - d. Crigler-Najjar syndrome

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12. **False about brown pigmented stones:**

- a. Associated with disorders of biliary motility and associated bacterial infection
- b. More common in Caucasians
- c. Soft and earthy in texture
- d. High content of cholesterol and calcium palmitate

13 **Contraindications of laparoscopic cholecystectomy is:**

- a. Coagulopathy
- b. Obstructive pulmonary disease
- c. End stage liver disease
- d. All of the above

14 **In a male after laparoscopic cholecystectomy, specimen is sent for histopathology which shows carcinoma gallbladder stage IB. Appropriate management is:**

- a. Conservative and follow up
- b. Extended cholecystectomy
- c. Excision of all port sites
- d. Radiotherapy

15. **A patient of post-cholecystectomy biliary stricture has undergone an ERCP three days ago. Following this, she has developed acute cholangitis. The most likely organism is:**

- a. Escherichia coli
- b. Bacillus fragilis
- c. Streptococcus viridians
- d. Pseudomonas aeruginosa

16. **Strasburg's class 'B' bile injury means:**

- a. Bile leak from a minor duct
- b. Occlusion of a branch of biliary tree
- c. Injury of bile duct not in communication with CBD
- d. Circumferential injury to major bile ducts

17. **Which is not true about PBC?**

- a. No increase in risk of hepatocellular carcinoma
- b. Often asymptomatic
- c. Elevated IgM
- d. Positive anti-mitochondrial antibody

18. **Destruction of fat in acute pancreatitis is due to:**

- a. Lipase and trypsin
- b. Secretin
- c. Lipase and elastase
- d. Cholecystokinin and trypsin

19. **All are true about chronic pancreatitis except:**

- a. Characterized by irregularities of pancreatic ducts, duct strictures and areas of dilatation
- b. 60–80% will give history of acute episodes
- c. CT scan showing pancreatic calcification is diagnostic of chronic pancreatitis
- d. Serum amylase is always raised

20. **All are true about IPMN except:**

- a. Always involves main pancreatic duct
- b. Involvement of head is most common form
- c. Men and women are equally affected
- d. Patients can experience acute pancreatitis

21. **Which is not autosomal dominant?**

- a. HNPCC
- b. FAMMM
- c. PJS
- d. Ataxia-Telangiectasia

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22. **All are true about Frantz tumor except:**

- a. Seen in young females
- b. Vimentin and CD 56 is positive
- c. Indolent tumor with <15% incidence of metastasis
- d. Chromogranin is positive

23. **Not a boundary of gastrinoma triangle:**

- a. Junction of 2nd and 3rd part of duodenum
- b. Junction of 3rd and 4th part of duodenum
- c. Junction of head with body of pancreas
- d. Junction of cystic duct with common bile duct

24. **Which of the following is not true about polycystic disease of pancreas?**

- a. Associated with liver and renal cyst
- b. 50% associated with VHL syndrome
- c. Surgical intervention is required in most because of features of chronic pancreatitis
- d. Lining of cyst wall is cuboidal

25. **Not true about Bochdalek hernia:**

- a. Seen on right side
- b. Associated with hypoplasia of lung
- c. Associated with hiatus hernia
- d. Pericardial cyst is a differential diagnosis

26. **A female patient has dysphagia, intermittent epigastric pain. On endoscopy, esophagus was dilated above and narrow at the bottom. Treatment is:**

- a. PPI
- b. Esophagectomy
- c. Dilatation
- d. Heller's cardiomyotomy

27. **All of the following statements about Zenker's diverticulum are true except:**

- a. Acquired diverticulum
- b. Lateral X-rays on barium swallow are often diagnostic
- c. False diverticulum
- d. Out pouching of the anterior pharyngeal wall just above the cricopharyngeus muscle

28. **T-staging of esophagus is best done by:**

- a. EUS
- b. CT
- c. MRI
- d. PET

29. **Investigation of choice for esophageal rupture is?**

- a. Dynamic MRI
- b. Rigid esophagoscopy
- c. Barium contrast swallow
- d. Water soluble low molecular weight contrast swallow

30. **True about Schatzki's ring:**

- a. Has skeletal muscle
- b. Located at lower esophagus
- c. Causes dysphagia
- d. Contain all layers of esophagus

31. **H. pylori infection is associated with development of which malignancy:**

- a. MALTomas
- b. Atherosclerosis
- c. Sarcoma
- d. Gastrointestinal stromal tumor (GIST)

32. **The vessel which needs to be ligated in a patient with bleeding peptic ulcer is:**

- a. Gastroduodenal artery
- b. Superior pancreatico-duodenal artery
- c. Left gastric artery
- d. Left gastroepiploic artery

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33. **A male executive, 50 years of age is seen in seen in casualty with hypotension and hematemesis. There is previous history suggestive of alcohol intake of 100 ml daily. The blood loss is around 2 litres. Most probable diagnosis is:**
- a. Gastritis
 - b. Duodenal ulcer
 - c. Mallory-Weiss tear
 - d. Esophageal varices
34. **All are true about Dieulafoy's lesion except:**
- a. Angiographic embolization is the preferred treatment
 - b. Endoscopic treatment can be given
 - c. Pulsation of artery causes ulceration
 - d. Submucosal artery
35. **True about gastric stump carcinoma:**
- a. Enterogastric reflex is the cause
 - b. Prognosis good after surgery
 - c. It is always adenocarcinoma in nature
 - d. Diffuse type is only variety
36. **Acute lung injury (ALI) is characterized by all except:**
- a. PaO₂/FiO₂ <200 mm Hg
 - b. Bilateral interstitial infiltrates
 - c. PCWP <18 mm Hg
 - d. Normal left atrial pressure
37. **Bastio surgery for refractory LV hypertrophy is:**
- a. Patch repair
 - b. MR repair
 - c. Ventriculectomy
 - d. Ventriculoplasty
38. **Coronary graft is most commonly taken from:**
- a. Femoral vein
 - b. Saphenous vein
 - c. Axillary vein
 - d. Cubital vein
39. **The most common location of hypertensive intracranial hemorrhage is:**
- a. Subarachnoid
 - b. Basal ganglia
 - c. Cerebellum
 - d. Hippocampus
40. **Common site for extradural hemorrhage:**
- a. Frontal
 - b. Temporo-parietal
 - c. Occipital
 - d. Brainstem
41. **You are a surgeon posted at CHC. A patient of head injury comes to you with rapidly deteriorating sensorium and progressive dilatation and fixation of pupil. Neurosurgeon and CT scan is not available. You decide to make a burr hole to emergently relieve the intracranial pressure. Which of the following sites will you choose?**
- a. In the temporal region contralateral to the side of pupillary dilatation
 - b. In the midline if both pupils are equal or it is not known which side dilated first
 - c. In the left temporal region if no localizing sign is found
 - d. Refer to higher centre if both pupils are equal or it is not known which side dilated first
42. **Which among the following is a not a primary brain injury?**
- a. Cortical lacerations
 - b. Brainstem herniation
 - c. Diffuse axonal injury
 - d. Brainstem contusion

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43. **A patient present with unilateral painful ophthalmoplegia. Imaging revealed an enlargement of cavernous sinus on the affected side. The likely diagnosis is:**
- a. Gradenigo syndrome
 - b. Cavernous sinus thrombosis
 - c. Tolosa-Hunt Syndrome
 - d. Orbital Pseudotumor
44. **Most common site of brain metastasis:**
- a. Brainstem
 - b. Cerebellum
 - c. Cerebral cortex
 - d. Thalamous
45. **In the reconstruction following excision of previously irradiated cheek cancer, the flap will be:**
- a. Local tongue
 - b. Cervical
 - c. Forehead
 - d. Pectoralis major myocutaneous
46. **Local anesthetics cannot be used at the site of infection because it causes:**
- a. Spread of infection
 - b. Lowered efficiency
 - c. Both
 - d. None
47. **Pelvic exenteration is known as:**
- a. Miles Operation
 - b. Lyods operation
 - c. Finch operation
 - d. Brunschwigs operation
48. **No man's land in palm corresponds:**
- a. Zone I
 - b. Zone II
 - c. Zone III
 - d. Zone IV
49. **Moures sign is seen in:**
- a. Carcinoma
 - b. Appendicitis
 - c. Varicose vein
 - d. Pancreatitis
50. **Topical mitomycin C is used in :**
- a. Basal skull carcinoma
 - b. Tracheal stenosis
 - c. Skull base osteomyelitis
 - d. Angiofibroma

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Answer key

1.A

2.C

3.D

4.C

5.C

6.D

7.A

8.A

9.D

10.A

11.C

12.B

13.D

14.B

15.A

16.B

17.A

18.A

19.D

20.A

21.D

22.D

23.B

24.C

25.A

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26.D

27.D

28.A

29.D

30.B

31.A

32.A

33.B

34.A

35.A

36.A

37.C

38.B

39.B

40.B

41.C

42.B

43.C

44.C

45.A

46.C

47.D

48.B

49.A

50.B