

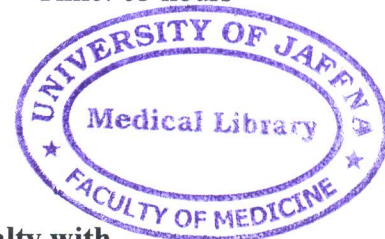
UNIVERSITY OF JAFFNA, SRI LANKA  
FINAL EXAMINATION FOR MEDICAL DEGREES–NOV 2015  
SURGERY Paper II

Date: 27.11.2015

Time: 03 hours

ANSWER ALL THE QUESTIONS

Answer each question in separate answer book



**Part A**

- 1      **A 56 year old man presented to the surgical casualty with sudden onset of severe upper abdominal pain lasting for one day. He had severe burning epigastric pain associated with meals for the last six months. He was on treatment with diclofenac sodium for osteoarthritis for one year. On admission he was ill looking , lying still on supine position, febrile and was tachycardic. He had a tender rigid epigastrium.**
- a      List three possible differential diagnoses. (15 Marks)
  - b      Mention the important physical sign to confirm the most possible cause for his presentation (10 Marks)
  - c      What is the investigation that will support your most possible diagnosis? (10 Marks)
  - d      Outline the initial steps in the management of this patient. (30 Marks)
  - e      What is the definitive management of this patient? (15 Marks)
  - f      List the possible complications that he can develop. (20 Marks)
- 2      **A 40 year old female patient presented with right sided lower abdominal pain of 2 days duration. Prior to this she had pain in upper abdomen for one day. She also had mild fever and loss of appetite. On examination she was febrile and had a tender mass in right iliac fossa.**
- a      Give three possible differential diagnoses for this patient's condition with expected clinical findings. (35 Marks)
  - b      What is the most likely diagnosis in this patient and explain why (15 marks)
  - c      Enumerate the investigations that you will request. (20 marks)
  - d      How will you manage this patient? (30 marks)

## Part B

3

**A forty two year-old gentleman presented with recurrent episodes of pain and bloating of upper abdomen for 1½ years. The patient had suffered from an attack of acute pancreatitis 1½ years back. Thereafter, he had continued to have exacerbations of upper abdominal pain every 2-3 months and was hospitalized and was kept nil orally and treated with IV fluids. His abdominal x-ray shows calcification across the L1 spinal level. Answer the following questions.**

- a What is the most possible diagnosis here? (10 Marks)
- b List the etiological factors for your diagnosis? (15 Marks)
- c What do you understand by the term of 'classic triad' regarding the above disease? (10 Marks)
- d Give the other important clinical features of this man? (10 Marks)
- e How will you investigate? (15 Marks)
- f Enumerate the management principles of your diagnosis? (25 Marks)
- f List the possible complication that he may develop? (15 Marks)

4

**45 year old woman presented with lump in her right breast of 3 weeks duration**

- a List the important information you would ask in her history. (15 Marks)
- b Give the examination finding of this lady, which would suggest a malignant lump in her right breast? (15 Marks)
- c How do you investigate this woman? (15 Marks)
- d Clinically she has a 6 cm lump in her right breast on the upper outer quadrant and biopsy reveals invasive ductal carcinoma. Discuss the management of this condition (35 Marks)
- e How will you follow up this woman after the initial management? (20 Marks)



Part C

5

A 72 year old retired school teacher underwent Anterior Resection for moderately differentiated adenocarcinoma of upper rectum and was admitted to Intensive Care Unit for post-operative care. On the 4th post-operative day she developed low grade fever with pain and swelling of the left calf. She was suspected to have Deep Vein Thrombosis in left lower limb.

- a How would you confirm the diagnosis? (10 Marks)
- b What possible risk factors for deep vein thrombosis you identified in this lady? (10 Marks)
- c Outline the management of this woman. (40 Marks)
- d Mention the complications of treatment. (10 Marks)
- e Mention how you would prevent the Deep vein thrombosis? (15 Marks)
- f What is post-thrombotic syndrome? (10 Marks)
- g On the second day of anticoagulation therapy she developed intracerebral haemorrhage. Mention the management option to prevent Pulmonary Thromboembolism in this lady, after she developed intracranial haemorrhage (05 Marks)

6

A previously healthy 5-week old boy born at 39 weeks of gestation following an uncomplicated pregnancy is brought to the surgical emergency ward with 3day history of forceful vomiting after feeding. On physical examination, a distinct 1-cm mass is palpable in the epigastrium.

- a What is the most likely diagnosis? (10 Marks)
- b Mention the investigation which would help to confirm the diagnosis. (10 Marks)
- c Describe the acid-base imbalance you would expect in this child on admission. (20 Marks)
- d Discuss the initial management of this child. (40 Marks)
- e What is the definitive management of this condition? (10 Marks)
- f Mother of the baby is worrying about feeding of the child after the surgery. What advice would you give her about the feeding of the child after surgery? (10 Marks)



**Part G**

- 10 a** **A 7 year old boy presented to the casualty ward with the history of foreign body (FB) ingestion two hours ago.**
- i) What is the commonest FB in the upper gastro intestinal (GI) tract in Sri Lanka (05 Marks)
  - ii) What FB ingestion which needs emergency management (05 Marks)
  - iii) Give an appropriate investigation on this patient (05 Marks)
  - iv) What methods are available to remove FBs from the upper GI tract (05 Marks)
  - v) Name 2 complications that could occur from the FB in the upper GI tract. (10 Marks)
- b Write short notes on the following.**
- i) Corneal ulcers. (15 marks)
  - ii) Blunt trauma to the orbit. (15 marks)
- c Write short notes on the benefits and methods of post operative pain relief. (35 Marks)**

