

20(2) FU / 056



Signature of the Invigilator:.....

Date:.....



FINAL EXAMINATION FOR MEDICAL DEGREES (2nd) – March 2019
FACULTY OF MEDICINE, UNIVERSITY OF JAFFNA, SRI LANKA
SURGERY – PAPER II

Date: 22.03.2019

Time allowed: 03 hours
(1.30 p.m. – 4.30 p.m.)

Please Answer all TEN questions

Index No:.....

Question No	Marks
01	
02	
03	
04	
05	
06	
07	
08	
09	
10	

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1. A 65 year old female patient was admitted to the surgical casualty ward with severe upper abdominal pain for 2 days. She had burning pain on and off for the last 6 months. She did not have right hypochondrial pain or shoulder tip pain or chest pain. She had fever for one day and slightest movement caused severe abdominal pain. She did not open bowel for 2 days but passed urine. She was taking diclofenac sodium tablets for osteoarthritis for one year. On examination she was lying still, dehydrated and febrile. Her pulse rate was 110/min, blood pressure was 90/60 mm Hg and her lungs were clear. Abdomen was not moving with respiration, tender and rigid. There was free fluid in the abdomen. Digital rectal examination was unremarkable.

1.1. What is the most likely diagnosis in this patient? (10 marks)

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1.2. Give reasons for your diagnosis. (25 marks)

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1.3. Name the investigation that will confirm your working diagnosis. (10 marks)

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1.4. Outline the initial management of this patient. (30 marks)

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1.5. Briefly describe the definitive management of this patient. (25 marks)

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2. A 65 year old male patient presented with a 2 cm lump in the left breast for 4 months duration.

2.1. List the clinical features of this lump that will support the diagnosis of a malignant breast lesion. (25 marks)

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2.2. How would you evaluate this patient to confirm the diagnosis of carcinoma of breast? (20 marks)

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Physical examination revealed enlarged axillary lymph nodes on the ipsilateral side.

2.3. Outline the management of the patient. (25 marks)

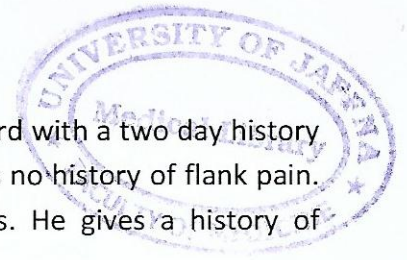
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2.4. What is the follow up management plan for this patient? (15 marks)

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2.5. What is the prognosis for this patient? (15 marks)

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3. A sixty five year old man is admitted to the surgery casualty ward with a two day history of painless heavy frank hematuria with occasional clots. He has no history of flank pain. He has no previous history of lower urinary tract symptoms. He gives a history of smoking twenty cigarettes per day for the past forty years.

3.1. What is the likely cause for hematuria in this patient? (10 marks)

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3.2. Mention the important points in physical examination of this patient. (30 marks)

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3.3. Are there any indications for catheterization in this patient? If yes, what type of catheter would you use? (20 marks)

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3.4. What are investigations would you do in this patient to find the cause for his hematuria? (20 marks)

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3.5. Outline the treatment for the diagnoses given above in 3.1. (20 marks)

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4. A 34 year woman was brought to the accident and emergency department after being knocked down by a motorcycle while crossing the road. She was conscious and alert on arrival. She complained of severe pain in her left thigh region and said was unable to stand following the accident.

4.1. How will you assess this patient? (30 marks)

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It was found that the left thigh is swollen and bruised with marked tenderness over the mid femur region.

4.2. What is the most likely diagnosis? (10 marks)

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4.3. What are the other important examinations you would carry out on the affected limb? (10 marks)

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4.4. What are investigations would you do for this patient? (20 marks)

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4.5. How will you treat this patient? (30 marks)

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5. 60 year old man presented with lower oesophageal growth with significant obstruction to solid and liquid diet for 3 weeks duration. After initial assessment and discussion in multi-disciplinary team meeting it was decided to do the oesophagectomy in this man.

5.1. How would you assess the nutritional status of this patient? (30 Marks)

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5.2. What are measures will improve the nutritional status of the above patient before surgery? (15 Marks)

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5.3. Mention the special investigations needed to be done in this patient to assess the fitness for the surgery? (10 marks)

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5.4. List 2 major ways of nutritional supplementation can be done in this patient? (10 marks)

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5.5. Give the advantages and disadvantages of each way mentioned above in 5.4. (20 marks)

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5.6. List 5 post-operative measures to prevent or reduce the generalized complication in this man? (15 marks)

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6. A 50 year old man presented with upper abdominal pain for last one week duration. He has the habit of alcohol intake for last 30 years and he developed multiple episodes of similar symptoms in the past for last 2 years. He has worsening pain with meals and he has the history of significant weight loss. He has no dyspeptic symptoms.

6.1. What is the most likely diagnosis? (15 marks)

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6.2. List 5 aetiological factors for the above mentioned condition? (15 marks)

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6.3. How would you confirm your diagnosis? (15 marks)

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6.4. List 5 possible complications that can occur due to the above mentioned condition in 6.1. in this man? (15 Marks)

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6.5. How do you manage this patient? (40 Marks)

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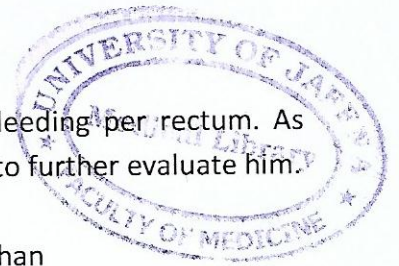
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7. A 71 year old retired salesman presented with a history of bleeding per rectum. As clinical features were suggestive of rectal cancer, it was decided to further evaluate him.

7.1. Mention two local causes for bleeding per rectum other than rectal cancer. (10 marks)

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7.2. List five features in the history which suggestive that the rectal cancer is the cause for his presentation. (15 marks)

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7.3. What investigation would you do to confirm the diagnosis of rectal cancer? (10 marks)

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7.4. How would you prepare him for the investigation you mentioned in 7.3.? (15 marks)

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7.5. Briefly describe the staging of rectal cancer. (25 marks)

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7.6. What investigation would you do to stage the local spread of the rectal cancer? (05 marks)

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After evaluation it was decided to do abdomino-perianal resection (APR) in this patient.

7.7. Mention the important aspect in the consent for the proposed surgery. (05 marks)

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7.8. List three complications of stoma. (15 marks)

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8. A 63 year old retired school teacher underwent total knee replacement for Osteoarthritis of right knee joint. She was discharged on post-operative day four. Two days after discharge she presented to the surgical emergency with swollen right lower limb. Clinical diagnosis of deep vein thrombosis was made.

8.1. Mention the features in the history and examination suggestive of deep vein thrombosis. (15 marks)

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8.2. How would you confirm your diagnosis? (10 marks)

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8.3. Briefly describe the initial aspect of management of this lady, after confirming the diagnosis of deep vein thrombosis. (20 marks)

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8.4. List three causative factors of deep vein thrombosis. (15 marks)

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8.5. Mention the life threatening sequelae of deep vein thrombosis. (10 marks)

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8.6. List the complications of anticoagulation therapy. (20 marks)

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While in the ward she has had an accidental fall and developed intra cranial hemorrhage. It was decided to withhold the anticoagulant therapy.

8.7. How would you prevent pulmonary thromboembolism after withholding the anticoagulant therapy? (10 marks)

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9. A 24 year old preschool teacher presented to the surgical outpatient clinic with goiter. She was clinically hypothyroid and had pressure symptoms. Neck examinations revealed a solitary nodule in the right lobe of thyroid gland.

9.1. Mention five features of hypothyroidism in the history. (15marks)

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9.2. What are the pressure symptoms the woman can have? (15 marks)

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9.3. Apart from the goiter what other aspects would you look in the examination of neck? (20 marks)

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9.4. How would you further evaluate this lady? (10 marks)

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On further evaluation it was found that she has papillary thyroid carcinoma with enlarged ipsilateral level IV lymph nodes.

9.5. Outline the management plan with reasons. (25 marks)

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9.6. Mention three complications of total thyroidectomy. (15 marks)

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10. A three year old boy has presented with pain and swelling of right knee for one day duration. He was unwell and refused to move the knee.

10.1. What is the probable diagnosis? (15 marks)

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10.2. What are investigations would you do in this boy to arrive at a diagnosis? (30 marks)

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10.3. What are the important aspects of the management of this child? (30 marks)

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10.4. What are the possible complications of the condition you mentioned above in 10.1. (25 marks)

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