**Surgery**

**2023– 2nd Edition**



**question bank**

 |

# الملف يحتوي على جميع أسئلة السنوات السابقة لجامعة مؤتة مقسم إلى 3 أقسام : 1) القسم الأول : امتحانات كاملة لجميع الدفع السابقة

# 2) القسم الثاني : أسئلة أخرى غير المذكورة في القسم الأول مقسمة كل دكتور لوحده وتحتوي فقط الأسئلة التي تخص محاضراته التي شرحها لهذه السنة(2019)

# 3) القسم الثالث : تقسيم أسئلة كل دكتور لوحده والأسئلة لمحاضرات لم يشرحها هذه السنة.

# \*\* الأهم هو القسم الأول والثاني...

# 

\*\* آخر تعديل على هذا الملف تم بتاريخ 1/7/2023

حيث تم إضافة نماذج امتحانات سنة  
2023

**بالتوفيق**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Content** | |  |
| **1** | **Final Exam 6th 2023 serotonin** | |  |
| **2** | **Final Exam 6th 2022 watan** | | **5- 16** |
| **3** |  | **Final Exam 4Th 2022 wareed** | **17- 27  28 - 48**  **49 - 68**  **69 – 86** |
| **4** |  | **Final Exam 6Th 2021 ihsan** |
| **5** |  | **Final Exam 4Th 2021 serotonin** |
| **6** |  | **Final Exam 6Th 2020 Wateen** |
| **7** | **Final Exam 4Th 2020 Watan** | | **87 - 101** |
| **8** | **Final Exam 4Th 2019 Ihsan** | | **102 - 113** |
| **9** | **Final Exam 2019 6th year** | | **114 - 119** |
| **10** | **Final Exam 2018 (Wateen) 4th year**  **By:** **Ammar Adaileh & Tareq Abu Lebdah** | | **120 - 125** |
| **11** | **Final Exam past years 201X(2017)** | | **126 - 132** |
| **12** | **Final Exam past years 201X(2016)** | | **132 – 139** |
| **13** | **Final Exam past years 201X**  **Q. of unknown origin** | | **140 - 156** |
| **14** | **Dr. bassam nshewat Q for his lectures** | | **157 - 166** |
| **15** | **Dr. Sa’ad Azzawi Q for his lectures** | | **167 - 178** |
| **16** | **Dr. Abdallah-Rawi** | | **179 - 187** |
| **17** | **Dr. Jameel Sawaqid Q for his lectures** | | **188 - 205** |
| **18** | **Dr. Salah Qaryoti** | | **206 - 208** |
| **19** | **Dr. bassam nshewat Q for Other lectures** | | **209 - 224** |
| **20** | **Dr. Sa’ad Azzawi Q for Other lectures** | | **225 - 227** |
| **21** | **Dr. Jameel Sawaqid Q for Other lectures** | | **228 - 255** |

**Serotonin 6th ( 2023)**

**1.Calorie needed : 30-35 kal/kg/day**

20- 25 , abu alhaj slide

**2. 50 YEARS OLD , managed with sulfasalazine , presented with pancolitis , the appropriate surgery is :** Pancolitis UC management Proctocolectomy with IPAA

**3. The most appropriate prognistic factor for soft tissue sarcoma :**

Grade

Histology

Age

**4. Hoarsness of voice is duo to injury of which muscle:**

Cricothyroid

**5. Patient presented with hematemesis and melena , the most appropriate next step in management is :**

Fluid resusitation

Upper endoscopy

Lower endoscopy

!!

**6. 26 yo female , bmi 52 , the appropriate bariatric surgery :**

Sleeve gastrectomy

Roex en y

Duodenal switch

The answer ??

**7. The posterior rectus sheath ends at the level of :**

Umbilicus

Arcuate line

**8. 46 yo female , with superficial spreading melanoma 2.2 mm on the shoulder , no lymph node enlargment :**

Wide local exision with 2 cm safety margin + sintenil lymph node biopsy

**9. The fastest route for giving blood transfusion :**

16 gauge in antecubital vein

18 gauge in antecubital vein

20 gauge in antecubital vein

18 gauge in cephalic vein

**10. Not a complication of massive blood transfusion :**

Hypercalcemia

Heperkalemia

Citrate toxicity

Hypothermia

**11. Wrong about femoral hernia :**

Located just below inguinal ligament

Treat only if symptomatic

More in females

More risk of strangulation

**12. All the following are fetures can be found on P/E of gastric cancer exept :**

Siter mary joseph nodule

Virchow node

Succession splach

Hepatomegaly

Pulsatile abdominal mass

**13. An indication for surgical exploration in infant with NEC :**

FIXED LOBE

PNEUMATOSIS INTESTINALIS

portal vein gas

Low platelts count

Bleeding per rectum

**14. The origin of left epiploic artery is :**

the splenic artery

**15. Patient ,in 35 years , have breast mass , er + , rr + , her - , treated for lung tuberculosis before 20 years**

What is the most appropriate management :

Breast conserving surgery + chemo

Breast conserving surgery + radio

Radical mastectomy + chemo

Radical mastectomy + radio

Radical mastectomy + hormonal therapy

**16. Most common cause of water intoxication in surgical patient :**

Post TURP

Exessive 5% dextrose n/S

PERITONEAL IRRIGATION

PREOPERATIVE COLONIC Wash

5 % dextrose

**17. One of the following carries a risk for choleylithiasis :**

Smoking

Crohns

Jejunal resection

Ibs

**18. Fistula in which organ causing most elctrolytes imbalance**

Gastric

Colon

Duodenum??

Esophagus

**19. Rapidly spreading erythema with subcuatenous crepetitus after insect bite:** Necrotizing fascitits

**20. FNA can't diagnose:** Hurthle cell tumor "It is a subtype of follicular carcinoma"

**21. Most common cause of burn causing sepsis ?** -Pseudomonas -s epidirmidis

**22.longitudinal muscle form an organ?**

Stomach ??

Duodenum

Jujenum

Ileum

Colon ??

**23. All about electrical burn true except ::**

Extensive skin burn

**24. Cytokines are??** Polypeptide

**25. Wrong statement :** cystic vein drain into IVC

**26. Patient with sweating and palpatation, her mother died from thyroid cancer, Next appropriate step:**

VMA Level

**27. Patient with marfanoid features and paroxismal hypertension ??** MEN2B

**28. Hypernatremia, hypokalemia and hypertension ??** conn's syndrome

**29. Secondary hyperparathyroidism??** low calcium, high PTH and high urinary calcium

**30.responsible for gastric secretion??** Vagus nerve

**31.\*\*stages of ulcers\*\***

**32. \*\*indication for hospital admission regarding the burns\*\***

**33. Skin Graft lives for 3 days because of :** inoculation

**34. About achalsia all the following false except :** LES can't relax

**35. Hypotensive patient comes with bright red blood per rectum**

**NG tube reveals brown blood ,Next step ?**

Upper endoscopy ((massive upper GI bleeding))

**36.which is not part of ranson critirea??** ALT

**37. The cause behinds thyroid storm post operative is:**

-untreated preoparative hyperthyroidism??

-Infection??

**38. All of the following decrease in hypovolemic shock except:**

SVR

**39. Calculate fluid for 50kg patient with burn, TBSA is 25%, for the first 8 hours**

لا تنسوا تقسموهن على ٢ عشان اول ٨ ساعات بده نصهن المريض

**40. Best thyroid cancer prognosis:** Papillary

**41. Wrong about follicular cancer:** it presents at older age in relation to papillary

**42.Long standing goiter leads to??** anaplastic thyroid cancer

**43. A pateint with treated lymphoma with radiotherapy presented with firm irregular midline neck mass :** it is malignant lesion due to radiation exposure but the choice was Malignant goiter

**44. Patient on OCPs presented with shock manifestations due to hepatic mass rupture The mass is:** Hepatic adenoma

**45. Greenish discharge from the breast:** duct ectasia

**46.multiple anal fissure??** chron’s disease

**47. Patient on warfarin need laparoscopic procedure next step?**

-Stop warfarin and do the procedure after 8-12 hrs

-Stop warfarin and do the procedure after 24 hra

stop warfarin start heparin and IV antibiotics

**48. most common site of esophgeal perforation ??**

posterior

**watan 6th ( 2022)**

1. **The most common cause of pyogenic liver abscess is:**
   1. Liver cirrhosis.

b. Peritonitis.

c. Secondary infected abdominal viscera.

d. Infection of liver hydatid cyst.

e. Cholangitis due to biliary obustruction

1. **The diagnosis of primary hyperparathyroidism is most strongly suggested by:**

a. Serum acid phosphatase above 120 IU/L

b. Serum calcium above 11 mg/dL

c. Urinary calcium below 100 mg/day

d. Serum alkaline phosphatase above 120 IU/L

e. Parathyroid hormone levels below 5 pmol/L

1. **The most common site of pressure ulcer**

a. Ischium

b. Greater trochanter..

c. Heel

d. Occiput

e. Sacral

1. **Wrong about thoracic trauma :-   
   a. Chest tube indicated in all traumatic pneumothorax**
2. **The best fluid used for replacement in class IV hypovolemic shock is/are**

a. Blood and blood products

b. Normal saline 0.9%NaCI.

c. Lactated Ringer.

d. Glucose saline 0.9%NaCI.

e. Glucose 5%.

**6. year-old woman presents to the emergency room complaining of the sudden onset of right upper abdominal pain. Her pain started after eating meat for lunch. She is nauseated and vomited twice at home. She denies diarrhea. Her temperature is37.6 C, blood pressure is 140/85 mm Hg, and pulse is 100/min. She appears anxious and distressed. She is not jaundiced. Abdominal examination reveals normal bowel sounds. While you are palpating under her right costal margin, the patient abruptly arrests her inspiration and pulls away because of sharp pain. Which of the following is the most appropriate next step in management?**

a. Upper Gl endoscopy

b. Ultrasound of the abdomen

c. MRl of the abdomen

d. CT of the abdomen

e. Plain abdominal radiograph

**7. Leiomyoma of the esophagus:**

Select one:

a. commonly presents with dysphagia

b. is more common in females

c. is usually multiple

d. is usually diagnosed with endoscopic

e. is usually located in the lower one-third of the esophagus

**8. A 34-year-old woman comes to the clinic because of fatigue, generalized weakness, and palpitations. Medical history is significant for hyperthyroidism and mild ophthalmopathy caused by Graves's disease. Before initiating therapy, the patient wants to know what she can expect in the future. In advising her about the prognosis, which of the following is the wrong statement?**

Grave's ophthalmopathy will resolve as thyroid hormone secretion is lowered

**9. A malignant mass 15 cm from the anal verge , the management should include**

a. Total proctocolectomy.

b. Total colectomy.

c. Anterior resection.

d. Abdominoperineal resection.

e. Left hemicolectomy

**10. An otherwise fit 57-old man developed fever of 39 degree Celsius 5 days after an open appendicectomy for acute appendicitis. There is a tender,reddened and fluctuant swelling at the medial end of the wound. What is the most appropriate initial action to take?**

a. Arrange a CT scan of the abdomen

b. Arrange an ultrasound scan of the wound and anterior abdominal wall

c. start patient on oral antibiotic

d. Open the wound and allow free drainage

e. Send off blood samples for a white cell count and culture

**11. A 52-year-old woman is hospitalized with acute upper gastrointestinal bleeding. Endoscopic examination reveals only a 2.5 cm ulcer in the area of the incisura angularis of stomach. The optimal operative treatment after failure of endoscopic management is / are**

a. Gastrotomy with oversewing of the bleeding site.

b. Distal gastrectomy including the area of ulceration.

c. Proximal gastric vagotomy and oversewing of the bleeding ulcer.

d. Truncalvagotomy, pyloroplasty, and oversewing of the bleeding ulcer.

e. Gastric bypass surgery.

**12. Incisional biopsy of a breast mass in a 35-year-old woman demonstrates a hypercellular fibroadenoma at the time of frozen section. Appropriate management of this lesion could include:**

a. Excision, postoperative radiotherapy, and systemic chemotherapy

b. Excision and postoperative radiotherapy

c. Modified radical mastectomy

d. Lumpectomy and axillary lymphadenectomy

e. Wide local excision with a rim of normal tissue

**13. Regarding sentinel lymph node surgery in breast cancer which of the following is true**

a. it is performed in all breast cancer

b. it has a high incidence of false negative rate

c. when positive axillary clearance is mandatory

d. axillary recurrence in negative sentinal node is high

e. Major concern is the development of lymphedema

**14. The adenoma -carcinoma pathway started on normal epithelium by :**

a. Loss/ Mutation of APC.

b. Loss of DNA méthylation.

c. Mutation of ras oncogene.

d. Loss of DCC gene.

e. Loss of p53 gene.

**15. During cell cycle, DNA replication occur in**

a. G1 phase

b. G2 phase

c. S phase

d. M phase

e. P phase

**16. Overwhelming post splenectomy sepsis:**

a. commonly occurs after splenectomy for trauma

b. doesn't occur if accessory spleens are present

c. Can be fatal within hours of onset.

d. is most common in elderly patients

e. most fatal cases occur 10 to 15 years after splenectomy

**17. Which of the following is not a risk factor for wound infection?**

a. prolonged operative time

b. prolonged preoperative hospitalization

c. Shaving the skin the night before surgery.

d. patients having upper respiratory tract infection

e. surgeon's hand scrub for 5 instead of 10 minutes

**18. Spontaneous closure is least likely in fistulae originating from**

a. colon

b. esophagus

c. pancreas

d. stomach

e. small intestine

**19. The procedure responsible for the largest number of esophageal perforations is:**

a. esophageal bougienage

b. esophageal sclerotherapy

c. flexible esophagoscopy

d. insertion of nasogastric tube

e. pneumatic dilatation

**20. Gastrointestinal Stromal Tumor (GIST) in the stomach characterized by all of the following EXCEPT**

a. Local excision of tumor is enough.

b. Lymph node clearance is necessary.

c. Large tumors may need gastrectomy.

d. imatinib(Gleevec) have been shown to be an effective treatment.

e. Tumors with high mitotic activity are more likely to metastasize

**21. What is the most important aspect of management of burn injury in the first 24 hours ?**

a. Fluid resuscitation

b. Dressing

c. Escharotomy

d. Antibiotics

e. Early skin grafting

**22. The most common location for a primary adenocarcinoma of the small intestine is:**

a. Duodenum.

b. Jejunum.

c. Ileum.

d. The distribution is roughly equal.

e. Never occur in the small intestine

**23. Orchidopexy is indicated for children with undescended testicle for all the following reasons except:**

a. Higher incidence of accompanying hernia.

b. Increased chance of testicular trauma.

c. Psychological factors.

d. development of malignancy.

e. Lower future fertility

**24. Regarding insulinoma, all are true except:**

a. It is one of the most common endocrine neoplasm of the pancreas.

b. It is evenly distributed throughout the pancreas.

c. Majority are sporadic.

d. It is characterized by whipple triad.

e. In most cases pancreatico- duodenectomy is the treatment of choice

**25. The complication of enteral nutrition includes all of the following except:**

a. Pharyngitis.

b. Pulmonary aspiration.

c. Venous thrombosis.

d. Hyperglycemia.

e. Tube blockage.

**26. Which of the following is the lease cause of iatrogenic pneumothorax?**

a. Transthoracic needle aspiration.

b. Subclavian vessel puncture.

c. Thoracocentesis.

d. Pleural biopsy.

e. Intercostal nerve block

1. **A 60 year old female is diagnosed with a GIST tumor in the proximal stomach invading the diaphragm and spleen. Which of the following is the correct management?**
2. imatinib
3. radical total gastrectomy
4. resection of proximal stomach, diaphragm and spleen
5. sunitinib
6. neoadjuvant chemoradiation followed by radical total mastectomy
7. **All the statements related to uncomplicated Meconium ileus are true except:-**
8. Usually this is due to hyperviscous meconium.
9. Soap-bubble appearance with few if any fluid levels.
10. The diagnosis of cystic fibrosis should be confirmed.
11. Urgent Bishop- koop enterostomy operation.

e.Intravenous hydration with water soluble contrast enemas

1. **Which of the following is the treatment of choice for a perforated duodenal ulcer in a 56‐year‐old man with a strong history of ulcer disease and signs of peritonitis after 12 hours?**
2. conservative management with nasogastric suction and intravenous fluids
3. vagotomy and pyloroplasty
4. omental patch repair and peritoneal lavage
5. highly selective vagotomy
6. partial gastrectomy
7. **Which factor is most important in deciding whether a pancreatic adenocarcinoma is resectable?**
8. tumour size
9. tumour invasion of the portal vein
10. metastatic disease
11. enlarged peripancreatic lymph nodes
12. serum CA19‐9 levels
13. **Which of the following factors is most likely to be associated with a significant risk of re bleeding from a duodenal ulcer?**
14. no further bleeding within 72 hours of the initial bleed
15. a clean based ulcer seen on endoscopy
16. age less than 50 years
17. a visible vessel with adherent clot seen on endoscopy
18. the patient is female
19. **A 39 year old woman has a 5 cm grade III breast cancer .twelve of 16 lymph nodes contain metastases. The estrogen and progesterone receptor is negative , and the HER2 is negative (non-amplified) . There is no evidence of systemic metastases on and bone scan . Following a total mastectomy and axillary clearance , the most likely follow up managment would be :**
20. .regular review , with reservation of chemotherapy for recurrent disease.
21. .adjuvant tamoxifen
22. Adjuvant chemotherapy alone .
23. Adjuvant chemotherapy and post mastectomy radiotherapy
24. Oophorectomy
25. **A 57 year old woman presented with bloody nipple discharge from a single duct.the most likely diagnosis is :**
26. fibrocystic change
27. Intraductal papilloma
28. ductal carcinoma in situ
29. mammary duct ectasia
30. lobular carcinoma in situ
31. **A 51 year old woman undergoes wide local excision and sentinel node biopsy for a 15 mm grade 2 invasive duct cancer , margins clear , nodes negative , oestrogen receptor positive , HER2 Positive (amplified) what adjuvant therapy should be offered?**
32. radiotherapy only
33. radiotherapy and endocrine therapy
34. radiotherapy , chemotherapy , targeted anti HER2 therapy and endocrine therapy heavy\_check\_mark:
35. chemotherapy , radiotherapy and endocrine therapy
36. Chemothetapy only
37. **extraintestinal manifestations of ulcerative colitis include the following except:**
38. pyoderma gangrenosum
39. iritis
40. sacroiliitis
41. sclerosing cholangitis
42. eczema
43. **which of the following is not treatment for liver metastases?**
44. arterial chemoembolization
    1. Ablation
45. laparoscopic resection
46. open resection
47. portal venous chemoembolization

**37.All of the following cause massive lower gi bleeding in neonate except:**

1. Peutz jegher
2. Juvenile polyp
3. Esophageal vaices due to portal hypertension
4. Necrotizing enterocolitis
5. Mickles diverticulum

**38. Hirschsprung disease true except :**

Decrease acetylecholinesterase

**39.All the following statements are true of infant with Anterior abdominal wall defects except:-**

A- It is associated with malrotation.

B- There is prolonged adynamic ileus following repair.

C- Staged procedure is performed by silo and delayed closure.

D- Myo-cutaneous mobilization flap as operative option.

E- The gastroschisis has a sac that may ruptures during delivery

**40.Regarding rectal prolapse in children, all are true except:**

A- May be associated with sacral agnesis.

B- May be the leading diagnosis for cystic fibrosis.

C-Should be differentiated from prolapsing rectal polyps.

D-First choice of management is usually by Thiersch operation.

E- Complicated by ulceration and rectal bleeding

**41.Regarding Meckel's diverticulum, which of the following statement is true:-**

A-It is a false diverticulum.

B-Resection of the incidental meckel's is indicated in all children.

C-Bleeding Meckel's can be diagnosed by Tc99, scan.

D-The diverticulum arises from the mesenteric side of the small bowel.

E-All Heterotopic tissue in the diverticulum is usually associated with massive bleeding

**42. 60 year old case with dx of intussusception what is the cause :**

metastatic Deposit.

**43.winging of scapula : Long thoracic nerve**

**44.post lab cholecystectomy presented after few days with Right upper quadrant pain , tachycardia , fever , crackles at the base of the lung what is the cause :**

1. **PE**
2. **Bile leak**

**45.Type of wound in Elective colectomy ? clean contaminated**

**46. If Pringles maneuver failed the cause of bleeding mostly?**

1. Capillary
2. hepatic artery
3. portal vein
4. hepatic vein

**. 47Pt with acute lower limb ischemia : Embolectomy + heparin**

**48.Pt with 3rd degree burn start complaining of pain of the affected limb and decreased pulses what is the management :**

1. Fasciotomy
2. Medial lateral escharotomy

**49. Pt with calcium level 14.5 , management ? Calcitonin**

**50.Wrong about Gallstone ileus ?**

1. Caused by fistula between gallbladder and ilium
2. Can be diagnosed by U/S

**51. Not used for management of Achalasia ?**

1. CCB
2. Sphincterectomy

**52.Pt wit Amputated finger with exposed bone what type of tissue reconstruction is used?**

1. Full thickness tissue
2. ….. Flap

**53. Characteristic of Men 2 ?**

1. Bilateral pheochromo
2. Bilateral medullary thyroid carcinoma and multifocal
3. Unilateral medullary thyroid carcinoma

**54.One is not correct about speech assessment of CLP pt : its done at age of 9 month**

**55.One is not correct about Surgical correction of CLP : it enhance facial bone growth**

**56.Wrong about Bcc – treated by radiation only**

**57.The most sensitive leg compartment for Compartment syndrome**

1. deep post
2. Anterior

**58Nerve may be affected with carotid endarterectomy**

1. hypoglossal (XIIth) nerve
2. Glossopharyngeal

**59. low pitched sound after neck surgery :**

1. Recurrent laryngeal nerve
2. Superior laryngeal

**60.Pt previously healthy --- 24 ca urine collection**

**61.Esophageal atresia without fistula , which is wrong ? Gas in intestine**

**62.Wrong about Acalculus cholecystitis -- managed conservatively**

**63.Carcinoid wrong ? 2nd mc**

**64.Gold slandered for dx of GERD -- ph monitoring**

**65.Doesn’t cause dysphagia ?**

1. Truncal vagotomy
2. Selective vagotomy

**66.What is used to know the level of Fistula ?**

1. Fistulogram
2. prope

**67.Most common cause of Spleen cyst ?**

1. Hydatid cyst
2. Bacterial
3. Congenital
4. Traumatic

**68. Iron burn on thigh , white dry skin what is the mx ? Excision**

**69.cancer of thyroglossal cyst :**

1. SCC
2. hurthle cell carcinoma

**70. question to calculate the affected body surface AREA in burn pt.**

**71. Transverse maxillary fx above root of teeth : Lefort 1**

* 1. **. Vascular liver lesion with increased alpha feto protein**  :

**HCC**

**73. A 36 year old woman presented to the clinic with a suspicious lump, confirmed on clinical examination Ultrasound and mammography reveal a benign appearing mass. What would be the most appropriate course of action?**

a. discharge from clinic

b. repeat imaging in 3 months c. repeat imaging in 3 years

c. core biopsy of the lesion✔

d. FNAC of the lesion

**74. You are describing the risks and benefits of tissue expansion to a parent whose child requires excision of a giant cell nevus from the occipital skull. Which one of the following is the key advantage of tissue expansion for this child?**

a. the number of general anesthetic procedures is minimized

b. the number of hospital clinic visits is reduced

c. the reconstruction can be completed more quickly

d. the defect is more likely to be closed directly using hair-bearing skin flap

e. there is minimal functional and aesthetic impact during the expansion process

**Wareed 4th – 2022**

1. **The diagnosis of primary hyperparathyroidism is most strongly suggested by:**

Select one:

a. Serum acid phosphatase above 120 IU/L

b. Serum calcium above 11 mg/dL

c. Urinary calcium below 100 mg/day

d. Serum alkaline phosphatase above 120 IU/L

e. Parathyroid hormone levels below 5 pmol/L

1. **A 30 year old male patient diagnosed to have obstructive shock one is false**

Select one:

a. Increased afterload.

b. Decreased cardiac output.

c. Increased pulmonary capillary pressure.

d. Increased jugular venous pressure

e. Increased preload.

1. **Most common cause of gastric outlet obstruction in adult nowadays is**

Select one:

a. peptic ulcer disease

b. gastric adenocarcinoma

c. gastric lymphoma

d. congenital band

e. gastric polyps

1. **Among the followings which is the least common complication of Crohn's disease Select one:**

a. intestinal obstruction

b. free perforation

c. entero cutaneous fistula

d. perianal abscess and fistulas

e. massive hemorrhage

1. **The most common location for a primary adenocarcinoma of the small intestine is:**

a. Duodenum.

b. Jejunum.

c. Ileum.

d. The distribution is roughly equal.

e. Never occur in the small intestine.

1. **A 24-year-old male, not known to have chronic medical illness, has vomited for several times with forceful retching then vomitus of fresh blood appears, the most likely diagnosis is:**

a. Peptic ulcer disease.

b. Vascular malformation.

c. Oesophageal varices.

d. Mallory- Weiss syndrome

e. Gastritis

1. **The drug of choice for clostridial myonecrosis is:**

a. Penicillin G.

b. Ampicillin.

c. Amikacin.

d. Cephalosporin.

e. Chloramphenicol.

1. **The most common complication after appendectomy is:**

a. Internal bleeding.

b. Pelvic abscess.

c. Wound infection.

d. Intestinal obstruction.

e. Incisional hernia.

1. **Currently, which of the following infectious illnesses is most likely to compromise patients following renal transplantation?**

a. E. coli sepsis.

b. Pneumococcal sepsis.

c. Candidiasis.

d. Aspergillosis

e. Cytomegalovirus.

1. **Which of the following takes part in the formation of the ano-rectal ring?**

a. Internal sphincter and external sphincter.

b. Deep part of external sphincter and puborectalis muscle.

c. Deep Part of external sphincter and internal sphincter.

d. Internal sphincter and puborectalis muscle.

e. Deep and subcutaneous parts of external sphincter.

1. **Postoperative third-space accumulation should be managed by**

a. Albumin.

b. Dextrose in water.

c. Fluid restriction.

d. 1/2 Normal saline with potassium supplements.

e. Normal saline.

1. **Fat absorption occurs primarily in the:**

a. Stomach.

b. First portion of duodenum.

c. Third portion of duodenum.

d. Jejunum.

e. Ileum.

1. **All the following conditions are known to have a familial pattern associated with a predisposition to cancer except one:**

a. Colonic polyposis

b. Breast cancer.

c. Peutz-Jeghers syndrome.

d. Gardner’s syndrome.

1. **All are true of diverticular disease of the colon except:**

a. It increases in frequency with increasing age.

a. Colonoscope is the diagnostic tool during acute attack of diverticulitis.

c. Colovesical fistula is a known complication.

d. Diverticulosis of colon is the most common cause of massive colonic hemorrhage.

e. elective resection is indicated after repeated episodes of diverticulitis.

1. **When a patient is seen with stab wound of the neck that has injured the left vertebral artery. The most frequent clinical finding is:**

a. Hemiparesis.

b. Hemiplegia.

c. Hemorrhagic shock.

d. Monocular blindness.

e. Stable hematoma.

1. **25 years old pregnant female present it to the emergency room with hypotension 60\30, tachycardia HR=150,  the most common ruptured aneurysm artery during pregnancy is:**

a. splenic artery

b. Celiac artery

c. hepatic artery

d. femoral artery

e. axillary artery

1. **Three days after a myocardial infarction with cardiogenic shock, a 75‐year‐old man develops abdominal pain and distension. The abdomen is slightly tender with reduced bowel sounds. A plain abdominal X‐ray shows distended small bowel without fluid levels. Blood tests reveal a metabolic acidosis. The most likely diagnosis is:**

a. perforated peptic ulcer

b. mesenteric ischaemia

c. pseudo‐obstruction of the colon

d. acute pancreatitis

e. diverticulitis

1. **Which of the following is the appropriate investigation in a patient presenting with a recent episode of right upper quadrant pain and a normal physical examination?**

a. abdominal CT scan

b. ERCP

c. plain X‐ray of the abdomen

d. upper abdominal ultrasound

e. cholescintigraphy

1. **A 48‐year‐old woman presents with thick greenish nipple discharge from both breasts. There is no palpable breast lump, although both nipples are slightly retracted. The patient does not take any medication. Mammogram and ultrasound do not show any evidence of cancer. The most likely diagnosis is:**

a. galactorrhoea

b. duct papilloma

c. mammary duct ectasia

d. fibroadenoma

e. lobular carcinoma in situ

1. **All the statements about the Hirschprung's disease are true except :-**

a. There are no ganglion cells in the myenteric plexus.

b. The dilated proximal bowel has no ganglion cells.

c. The entrocolitis is an important potential cause of mortality.

d. It may involve the small intestine.

e. Contrast enema identifies the transition zone

1. **The most specific symptom associated with pancreatic adenocarcinoma is:**

a. weight loss

b. painless jaundice

c. epigastric pain

d. right upper quadrant pain, jaundice and fever

e. back pain relieved by leaning forwards

1. **Which of the following is not a contraindication for bariatric surgery?**

a. severe cardiac disease

b. untreated major depressive disorder

c. inability to comply with nutritional changes and requirements

d. obstructive sleep apnoea

e. current alcohol dependence

1. **Right iliac fossa pain and nausea in a 62‐year‐old woman may be due to the following except:**

a. acute appendicitis

b. caecal cancer

c. urinary tract infection

d. Mittelschmerz pain

e. sigmoid diverticulitis

1. **The most aggressive biliary tumor with the shortest overall survival rate is:**

a. gallbladder cancer

b. biliary cystadenoma

c. hepatocellular cancer

d. Caroli’s disease

e. distal cholangiocarcinoma (dCCA)

1. **Chronic pancreatitis most often presents with:**

a. weight loss

b. steatorrhoea

c. diabetes mellitus

d. fractures

e. recurrent epigastric pain

1. **The massive rectal bleeding in children is due to:-**

a. Anal fissure.

b. Juvenile polyps.

c. Rectal prolapse.

d. Meckel's diverticulum.

e. Intussusception

1. **All the following are related to scrotal pathology except :-**

a. Primary vaginal hydrocele.

b. Torsion testis.

c. Epididmo orchitis.

d. Communicating hydrocele.

e. Bubonocele type of hernia.

1. **The symptoms of acute lower limb ischemia are the following ,Except**

a. Pain

b. Paresthesia

c. Pulselessness

d. Hyperthermia

e. Paralysis

1. **In obstructive jaundice coagulopathy is due to deficiency of the following clotting factors EXCEPT:**

a. Factor two

b. Factor seven

c. Factor eight

d. Factor nine نفس المبدأ

e. Factor ten

1. **Wrong about pheochromcytoma:**

A. 10% malignant

B. Most of it benign

C. 10% bilateral

D. Cause hypertension

E. Occur in MEN 1

1. **Most common cause of massive lower GI bleeding :**

A. Gastric ulcer

B. Diverticulosis

C. Duodenal ulcer

D. diverticulitis

1. **External oblique muscle and aponeurosis give rise to all of the following except**

A. conjoint tendon ..

B. lacunar ..

C. external spermatic fascia ..

D. inguinal ligament

1. **Wrong about salivary gland tumors :**

a.80% of parotid pleomorphic adenomas occur in the deep lobe.  
b.80% of parotid tumors are benign   
c.80% of parotid tumors are pleomorphic adenomas   
d.80% of salivary gland pleomorphic adenomas occur in parotid   
e.80% of untreated pleomorphic adenomas remain benign

1. **Which one of the following muscles forms a sling that suspends the palate from the cranial base and is critical muscle involved in venophlopharyngeal closure?**

a. Tensor veli palatini.

b. Levator veli palatini.

c. Palatopharyngeus.

d. Superior constrictor.

e. Palatoglossus.

1. **With a perforation of a duodenal ulcer which occurred 6 hours ago, which of the following features is least likely to be present?**

a. generalized abdominal tenderness and guarding

b. the bowel sounds are hyperactive

c. percussion over the liver may demonstrate resonance

d. the respiration is shallow and the abdominal muscles are held rigid

e. plain radiograph shows free gas under the diaphragm

1. **Cholangiocarcinoma is most commonly found:**

a. in the periphery of the liver

b. in the gallbladder

c. at the biliary confluence (Klatskin tumour)

d. in the distal bile duct

e. in the duodenum

1. **The common complication of the thyroglossal cyst is:-**

a. Haemorrhage.

b. Respiratory distress.

c. Infection.

d. Dysphagia.

e. Excessive salivation

1. **In response to antigen stimulation the secretory immune system in the gut is a major source of:**

a. IgA.

b. IgG.

c. Interleukin-4.

d. Interleukin-5.

e. Interleukin-6.

1. **The most common site of pressure ulcer :  
   a. Ischium b. Greater trochanter..**

**c. Heel d. Occiput e. Sacral**

1. **Wrong about thoracic trauma :-   
   a. Chest tube indicated in all traumatic pneumothorax**
2. **In splenectomy, the most characteristic finding in peripheral film is:-  
   a .decrease platelet count  
   b. lymphocytosis**

**c. presence of Howell-jolly body  
d.** **granulocytopenia**

1. **in hypersplenism , red cell turn over is :  
   a. increase bilirubin**

**b. increase haptoglobin**

**c. reticulocytosis**

**d. bone marrow hypoplasia  
e.**

1. **Wrong about the epidemiology of RTA !!?  
   a. most of the deaths occur 2 days after the accident**
2. **all are true about ulcerative colitis except:  
   a. Smoking is not associated with pathogenesis of the disease**
3. **The most specific pathological sign in ulcerative colitis:-  
   a. ulceration in mucosa and submucosa  
   b. crypt abscess  
   c. pseudopolyps  
   d. undermined ulcer  
   e. skip lesion**
4. **primary survey is :-  
   a. Identification of all life threatening injuries and stabilizing the patient**
5. **a hemodynamically stable patient suffer from a blunt trauma which caused 3 cm liver tear what is the most appropriate management :  
   a. laparoscopic suturing  
   b. exploration  
   c. conservative management**
6. **wrong about hydatid disease :-  
   a. intragastric rupture  
   b.** **torsion of hydatid of morgagni**
7. **someone with pyloric ulcer obstruction suffering from vomiting for 6 days which caused dehydration , the most important ion that should be replaced :  
   a. K  
   b. Cl  
   c. Na  
   d. hydrogen  
   e. bicarbonate**
8. **which of the following is wrong about perianal abscess :  
   a. aspiration of abscess is a good treatment**
9. **to preserve the anal continence the sacral nerves that should be preserved during surgery :  
   a. S2  
   b. S1   
   c. both S2 and S3 parasympathetic  
   d.** **two branch from s4**
10. **the wrong is :  
    a. the most common site of lymphoma in GI is jejunum**
11. **most common site of GIST ( gastrointestinal stromal tumor ) :  
    a. stomach**
12. **the least bacterial infection in appendicitis :-  
    a. s.aureus  
    b. E.coli  
    c. s.viridans  
    d. bacteriod  
    e. klebssiella**
13. **not types of distributive shock :  
    a. Cardiac tamponade**
14. **All are types of distributive shock except:  
    a. Tension pneumothorax**
15. **patient with injury (burn) of the dorsum of hand with visible tendons :  
    a. Mucocutaneous flap**
16. **which of the following is true :  
    a. Isolated cleft palate is more associated with chromosomal syndromes than cleft lip  
    b.** **cleft lip is more associated with chromosomal syndromes than Isolated cleft palate**
17. **patient uses silver nitrate for treatment of burn , the silver nitrate will cause :  
    a. hyponatremia  
    b. methemoglobinemia  
    c. neutropenia  
    d.** **hypernatremia**
18. **Most comman bariatric surgery that cause GASTROESOPHAGEAL REFLUX (GERD) :  
    a.** **sleeve gastrectomy\*  
    b. adjustable gastric banding  
    c.  Roux-en-Y gastric bypass  
    d. intragastric balloon  
      
    \*dr.nofal answer**
19. **wrong about Barrett's esophagus :  
    a. Intermittent dysphagia  
    b. early Esophagectomy  is a good choice**
20. **62 years old patient with dysphagia the best next step:  
    a. Chest CT  
    b. endoscopy**
21. **choose the wrong —>  
    a. superior parathyroid from 3rd branchial pouch**
22. **most common primary hepatic tumor:  
    a. hemangioma**
23. **choose the correct about the adrenal —>   
    a. right adrenalectomy is more dangerous than left**
24. **the nurse saw an ICU patient having a hand spasm it's associated with :  
    a. hypomagnesemia  
      
    \*\*no Hypocalcemia in the choices**
25. **which of the following is more medially :  
    a. hepatic artery  
    b. CBD  
    d. portal vein  
    c. common hepatic duct**
26. **factor doesn’t synthesized in liver —>   
    factor 8 and vonwillebrand factor**
27. **wrong about thyroid cancer —>   
    Psammoma bodies found in follicular cancer**
28. **Which of the followings contributes in Prothrombin complex Synthesis:  
    a. Ca**
29. **GCS :-**

**Eye opening 4**

**Confused 4**

**Withdrawal of pain 4   
So :  
a.11  
b.12  
c.13**

1. **Patient suffer from left upper limb, chest and face burn and his right upper limb is charred which of the following is correct :  
   a. TBSA is 36%   
   (ما حدا ذاكر الخيارات للاسف)**
2. **Patient with BCC on his eyelid which is the best managment :  
   a. radiotherapy   
   b.** **Curettage   
   c.** **Excision  
   d.** **Cryotherapy**
3. **A patient with skin cancer (maybe SCC) had an incomplete excision what is the next step :  
   a. redo a complete excision with safety margins   
   b. radiotherapy   
   c. Sentinel lymph node biopsy  
   d. Local 5-fluorouracil**
4. **Which of the following is wrong about Melanoma :  
   a. Superficial spreading most common subtype  
   b. majority of melanoma arise from premalignant nevi  
   c. High number of nevi associate with melanoma risk  
   d. UV radiation exposure  
   e. sun exposure is a risk**
5. **Cholesterol gallstone which is wrong :  
   a. white   
   b. radiopaque   
   c. round   
   d. single not multiple  
   e.** **friable**
6. **In Blow out orbital fracture the Radiographic finding is :  
   a. air   
   b. fluid   
   d. ethmoid bone fracture**

**6th year –2021**

1. The best fluid used for replacement in class IV hypovolemic shock is/are Select one:

a. Blood and blood products

b. Normal saline 0.9%NaCI.

c. Lactated Ringer.

d. Glucose saline 0.9%NaCI.

e. Glucose 5%.

2- 43-year-old woman presents to the emergency room complaining of the sudden onset of right upper abdominal pain. Her pain started after eating meat for lunch. She is nauseated and vomited twice at home. She denies diarrhea. Her temperature is37.6 C, blood pressure is 140/85 mm Hg, and pulse is 100/min. She appears anxious and distressed. She is not jaundiced. Abdominal examination reveals normal bowel sounds. While you are palpating under her right costal margin, the patient abruptly arrests her inspiration and pulls away because of sharp pain. Which of the following is the most appropriate next step in management? Select one:

a. Upper Gl endoscopy

b. Ultrasound of the abdomen

c. MRl of the abdomen

d. CT of the abdomen

e. Plain abdominal radiograph

3- Pyramidal fracture of the maxilla and the nasal bone is called ; Select one:

a. LeFort I fracture

b. LeFort II fracture

c. LeFort III fracture

d. Apical fracture

e. LeFort IV fracture

4- A patient who is a member of a known MEN1 family present with 2 cm mass in the head of the pancreas which of the following investigations in not indicated preoperatively Select one:

a. 24 hour urine catecholamine

b. Serum calcium

c. Parathyroid hormon level

d. Serum gastrin

e. Brain CT scan

5- Leiomyoma of the esophagus:

a. commonly presents with dysphagia

b. is more common in females

c. is usually multiple

d. is usually diagnosed with endoscopic

e. is usually located in the lower one-third of the esophagus

6- Which answer is true in crohns disease of the colon in contrast to ulcerative colitis: Select one:

a. Is not associated with increased risk of colon cancer

b. Seldom presents with daily hematochesia

c. Is usually segmental rather than continous

d. Has a lower incidence of perianal fistula

e. Non caseating granuloma present in all the histological specimens

7- A 56-year-old woman is noted to have a 1.5-cm breast mass, which on stereotactic core needle biopsy is diagnosed as invasive carcinoma. The surgeon is planning on a local tumor resection and sentinel lymph node assessment. Which of the following most accurately describes a sentinel lymph node?

Select one:

a. The surgical margins of an axillary dissection

b. A lymph node containing cancer métastasés

c. The lymph node that is most likely to become infected postoperatively

d. The first lymph node in the lymph node basin draining a tumor

e. The only lymph node that contains metastasis

8- The Best procedure to be done after an injury to leg associated with exposure of underlying bone and large area of skin loss is

Select one:

a. Pedicle flap

b. Split skin grafting

c. Full thickness grafting

d. primary intention

e. secondary intention

9- The radiological signs of strangulated intestinal obstruction are the following except: Select one:

a. Pneumatosis intestinale

b. mesenteric fluid accumulation

c. reduced mural enhancement

d. Sentinel loop

e. Gas in portal vein

10- A 63-year-old woman presents to the emergency department with postprandial RUQ pain, nausea, and emesis over the last 10 hours. The pain is persistent and radiates to her back. She is afebrile, and her abdomen is tender to palpation in the RUQ. Ultrasound examination demonstrates cholelithiasis, gallbladder wall thickening, and a dilated CBD measuring 12 mm. Laboratory studies reveal the following values: WBC count 14.000/mm3(HIGH), AST 220 U/L(HIGH), ALT 240 U/L(HIGH), alkaline phosphatase 385 U/L(HIGH), and direct bilirubin 4.0 mg/dL(HIGH). Which of the following is the most appropriate treatment at this time?

a. Provide pain medication in the emergency department and ask the patient to follow up in the clinic

b. Admit the patient to the hospital, provide intravenous hydration, and check hepatitis serology values

c. Admit the patient to the hospital and perform a laparoscopic cholecystectomy

d. Schedule the patient for laparoscopic cholecystectomy and liver biopsy

e. Admit the patient to the hospital, provide intravenous hydration, begin antibiotic therapy, and recommend ERCP

11- Systemic inflammatory response syndrome includes all of the following EXCEPT: Select one:

a. Respiratory rate more than 20 breaths/min

b. Temperature less than 36 °C

c. Heart rate more than 90 beats/min

d. pC02 less than 32 mm Hg

e. Systolic blood pressure less than 90 mm Hg

12- Down's syndrome in children with imperforate anus is most frequently associated with: Select one:

a. Perineal fistula

b. Rectourethral fistula

c. recto-bladder neck fistula

d. cloaca

e. imperforate anus with no fistula

13- The diagnosis of primary hyperparathyroidism is most strongly suggested by:

Select one:

a. Serum acid phosphatase above 120 IU/L

b. Serum calcium above 11 mg/dL

c. Urinary calcium below 100 mg/day

d. Serum alkaline phosphatase above 120 IU/L

e. Parathyroid hormone levels below 5 pmol/L

14- The primary survey in trauma:

Select one:

a. Aims to identify all injuries

b. Should be completed before instituting any treatment

c. It should not take more than ten minutes

d. Should be performed only once

e. may Includes AP X-rays of the c-spine, chest and pelvis

15- A 64-year-old woman undergoes breast-conserving surgery (a lumpectomy) for a 0.4-cm tumor. The axillary lymph nodes are negative. Which of the following is the next step in therapy? Select one:

a. Combined chemotherapy such as the AC regimen

b. A radical mastectomy

c. Axillary radiation

d. No further therapy and observation

e. Radiation theraov to the affected breast

16- The most common indication for surgery in chronic pancreatitis is:

Select one:

a. jaundice

b. pain

c. pseudocyst

d. gastric outlet obstruction

e. anorexia

17- All of the followings are true about oblique inguinal hernia EXCEPT:

Select one:

a. Directed forward.

b. Mostly occur in old age.

c. Can not reach the scrotum.

d. Direction of the reduction is backward

e. It lies lateral to inferior epigastric vessels

18- Which of the following is true regarding the incidence of Mickel's diverticulum?

Select one:

a. It is twice as common in females as in males

b. It commonly occur 2 feetaway from the ligament of Trietz

c. It is 2 cm long

d. It contains two main heterotopic mucosa-namely gastric and pancreatic

e. it is a false diverticulum

19- Polyhydramnios is frequently observed in all of the following conditions except: Select one:

a. Esophageal atresia

b. Duodenal atresia

c. Pyloric atresia

d. Hirshsprung's disease

e. Congenital diaphragmatic hernia

20- A 35-year-old electrician sustains contact with a 10,000-V line. He presents with fixed flexion of his right wrist with charring, a pulseless hand, and a tense forearm. After cardiopulmonary resuscitation, patient should undergo

Select one:

a. EMG

b. Intravenous infusion of mannitol

c. Decompressive fasciotomies

d. Amputation at proximal wrist

e. Observation

21- One of the followings is not true concerning hydatid disease of the livert

Select one:

a. sex and age has no relation to epidemiology

b. Echinococcus granulosus is the commonest species

c. surgery is the first choice in treating all sites of cysts.

d. Sanitation and vet. control is the denominator in epidemiology

e. Scolicidals are contraindicated in communicating cyst

22- A 34-year-old woman comes to the clinic because of fatigue, generalized weakness, and palpitations. Medical history is significant for hyperthyroidism and mild ophthalmopathy caused by Graves's disease. Before initiating therapy, the patient wants to know what she can expect in the future. In advising her about the prognosis, which of the following is the most accurate statement? Select one:

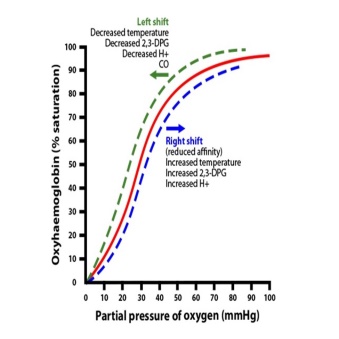
b. The thyroid will continue to increase in size with any nonsurgical treatment

c. Malignant degeneration of the thyroid gland is a common complication

d. Untreated patients are at increased risk for cardiac arrhythmias

e. Grave's ophthalmopathy will resolve as thyroid hormone secretion is lowered

23- Rightward shift of oxyhemoglobin dissociation curve occurs with:



Select one:

a. Hypothermia

b. acidosis

c. decrease in 2,3-diphosphoglycerate

d. hypocapnia

e. methemoglobinemia

24- A malignant mass 15 cm from the anal verge , the management should include Select one:

a. Total proctocolectomy.

b. Total colectomy.

c. Anterior resection.

d. Abdominoperineal resection.

e. Left hemicolectomy

25- Preoperative preparations for left hemicolectomy include all of the following EXCEPT :

a. Oral neomycin

b. Intravenous Cefuroxime 750 mg plus Metronidazole 500 mg

c. Low molecular weight heparin

d. Insertion of indwelling urinary catheter

e. Cross-matching of blood

26- Radio active iodine is part in treatment of which of the following thyroid conditions Select one:

a. anaplastic carcinoma

b. medullary carcinoma

c. hashimoto thyroiditis

d. papillary carcinoma

e. lymphoma

27- platelets storage for transfusion should be at

Select one:

a.10c

b. - 20c

c. 24 c

d. 4 c

e. 0 c

28- An otherwise fit 57-old man developed fever of 39 degree Celsius 5 days after an open appendicectomy for acute appendicitis. There is a tender,reddened and fluctuant swelling at the medial end of the wound. What is the most appropriate initial action to take?

Select one:

a. Arrange a CT scan of the abdomen

b. Arrange an ultrasound scan of the wound and anterior abdominal wall

c. start patient on oral antibiotic

d. Open the wound and allow free drainage

e. Send off blood samples for a white cell count and culture.

**29- Small bowel obstruction in an elderly female without external hernia or previous surgery is most likely caused by:**

a. small bowel neoplasm

b. Volvulus

c. gallstone ileus

d. abdominal abscess in crohns

e. obturator hernia

30- All are true about typical intercostals nerve except:

**The typical nerves (T3–6) supply only the thoracic wall.** **The atypical nerves are T-1, T-2, and T7–11**. They are considered atypical because in addition to innervating the thoracic wall, they also supply the brachial plexus (as is the case for T-1 and T-2) or the abdomen and peritoneum (as is the case for T7–11)

Select one:

a. Is a ventral ramus of a thoracic spinal nerve.

b. Lies in the majority of its course deep to the internal intercostals muscle.

c. Lies in the majority of its course in the subcostal groove

d. Supplies cutaneous branches to the skin of the back.

e. May supply abdominal wall skin.

31- A 30 year old male patient diagnosed to have Beck's triad, one is false

The Beck triad (ie, **hypotension; elevated systemic venous pressure, often with jugular venous distention; muffled heart sounds**) may occur in affected patients, especially from sudden intrapericardial hemorrhage.

Select one:

a. Increased afterload.

b. Decreased cardiac output.

c. Increased pulmonary capillary pressure.

d. Increased jugular venous pressure

e. Increased preload.

32- In cases of unexplained pleural effusion, one should consider all the following factors EXCEPT: Select one:

a. Mediastinal infection

b. Obstruction of the thoracic duct

c. Meigs syndrome

d. Acute pancreatitis

e. Tuberculosis

33- Full thickness skin grafts can be used in all of the following situations except ; Select one:

a. Defects of the lower eyelid

b. Defects on the nose

c. Reconstruction of the eyebrows

d. Large wounds

e. Defects on the face

34- All the followings are pathological features of crohns disease except:

Select one:

a. oedematous mucosa

b. enlarged mesenteric lymph nodes

c. mesenteric fat creeping

d. serosal involvement

e. caseating granuloma

35- All of the following are relative indications for surgical treatment of necrotizing enterocolitis except; Select one:

a. Fixed loop on plain abdominal film

b. Abdominal wall erythema

c. Palpable mass

d. Failure of medical management

e. free air on abdominal X-ray

36- A 45-year-old female presents with a 3-cm invasive ductal carcinoma. She has a palpable axillary lymph node which reveals cancer cells on cytology. The tumor is estrogen receptor negative. The most appropriate treatment is:

Select one:

a. Modified radical mastectomy

b. Radical mastectomy plus radiotherapy

c. Wide local excision, axillary node clearance and chemotherapy

d. Mastectomy and immediate reconstruction

e. Wide local excision, sentinel node biopsy plus tamoxifen

37- The parasympathetic nerve supply to the right colon is through:

Select one:

a.The vagus nerve.

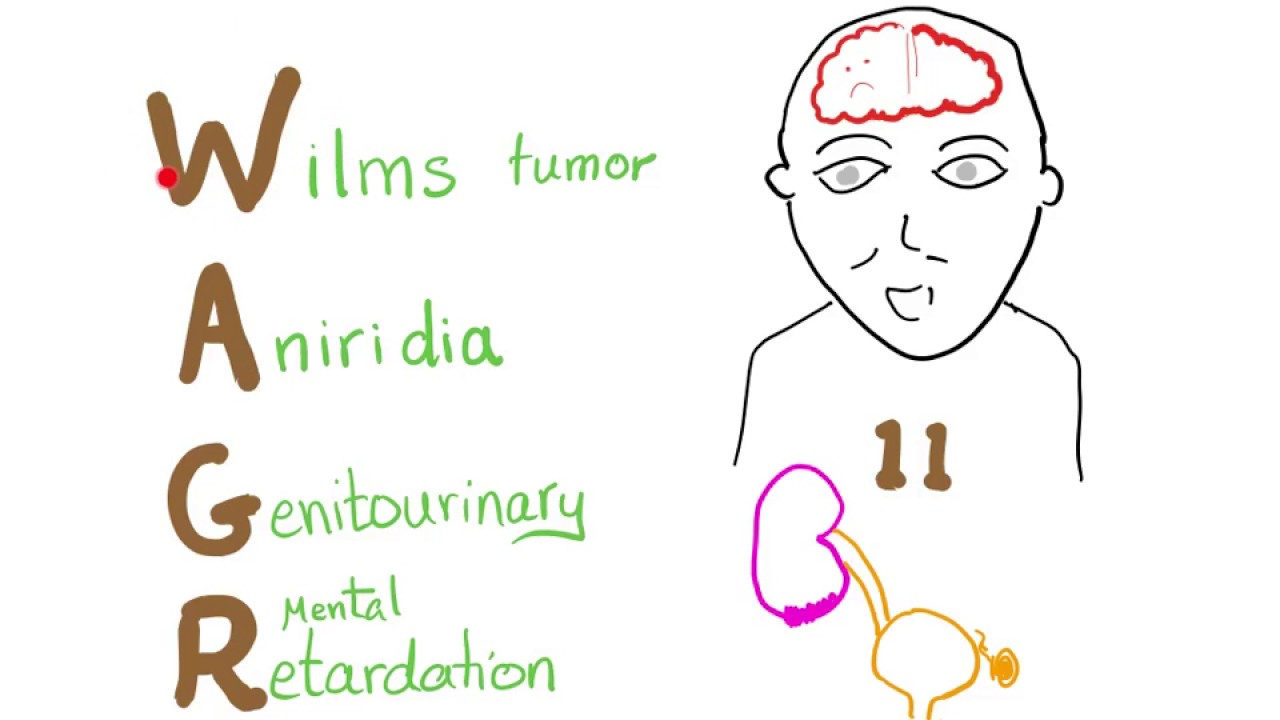
b. The nervi erigentes.

c. Pelvic splanchnic nerve S2.

d. Pelvic splanchnic nerve S 4.

e. Lesser splanchnic nerves.

38- Which of the following is not characteristic of WAGR syndrome?



Select one:

a. 30% risk of developing Wilm's tuour

b. Absence of the iris

c. Malformation of the genitourinary tract

d. Mental retardation

e. WT2 gene implicated

39- In the pathogenesis of strangulated hernia all the followings are true EXCEPT: Select one:

a. Impeded venous return.

b. Impaired arterial blood flow

c. Reversible

d. The sequestrated fluid in the hernial sac may increase mortality and morbidity

e. the epithelium affected last

40- Sever venous dysfunction is characterized by ankle hyperpigmentation, induration, and open leg ulcers. What is the correct term for this condition?

Select one:

a. Stasis ulcer

b. Postphlebitic state

c. Chronic venous insufficiency

d. Marjolin's ulcer

e. Deep vein thrombosis

41- Which of the following is not true about the arterial supply of the Thyroid: Select one:

a. The superior thyroid arises from the external carotid.

b. The inferior thyroid arises from the thyrocervical trunk.

c. The middle thyroid arises from the external carotid.

d. The thyroid ima artery arises from the brachiocephalic trunk.

e. The thyroid ima present in 10 % of population.

**42- which of the following best distinguish a benign from a Malignant chest wall tumor Select one:**

a. Tumor tenderness

b. Fixation

c. Bony involvement

d. Encapsulation

e. Vascular invasion

43- A 43 year-old male presented with Whipple triad, by computed tomography he had one cm lesion at the head of pancreas, the best surgical management would be : Select one:

a. Enucleation

b. Pancreaticoduodenectomy

c. Subtotal pancreatectomy

d. Distal pancreatectomy

e. Total pancreatectomy

44- A 52-year-old woman is hospitalized with acute upper gastrointestinal bleeding. Endoscopic examination reveals only a 2.5 cm ulcer in the area of the incisura angularis of stomach. The optimal operative treatment after failure of endoscopic management is / are : Select one:

a. Gastrotomy with oversewing of the bleeding site.

b. Distal gastrectomy including the area of ulceration.

c. Proximal gastric vagotomy and oversewing of the bleeding ulcer.

d. Truncalvagotomy, pyloroplasty, and oversewing of the bleeding ulcer.

e. Gastric bypass surgery.

45- A 64-year-old man with a history of diverticular disease is admitted to the surgical ward with suspected diverticulitis. He has been treated with antibiotics and intravenous fluids but is not improving after 24 hours. The next most appropriate step in the management is: Select one:

a. Flexible sigmoidoscopy

b. Total colonoscopy

c. Barium enema

d. Watch and wait

e. Abdominal CT

46- The relationship between small-cell and non-small cell lung cancers can be described by the following:

Select one:

a. They differ by histology, clinical behavior and cell of origin

b. Of all lung cancers, approximately 80% are non-small cell and 20% are small cell

c. Both cell types are predictably responsive to chemotherapy

d. The International Staging System can be applied to both tumor types

e. The majority of non-small cell cancer patients vs. the minority of small cell cancer patients are candidates for pulmonary resection

47- Regarding anatomy of the pancreas, select the wrong statement Select one:

a. The transverse colon is related to its anterior surface

b. The junction of the superior mesenteric with the splenic vein lies behind the head

c. The Aorta lies posterior to the body.

d. The tail is related to the left colic flexure

e. Located in retroperitonium except its tail.

48- Incisional biopsy of a breast mass in a 35-year-old woman demonstrates a hypercellular fibroadenoma at the time of frozen section. Appropriate management of this lesion could include:

Select one:

a. Excision, postoperative radiotherapy, and systemic chemotherapy

b. Excision and postoperative radiotherapy

c. Modified radical mastectomy

d. Lumpectomy and axillary lymphadenectomy

e. Wide local excision with a rim of normal tissue

49- Burns are classified by degrees from first to third. Which of these describes a third-degree burn? Select one:

a. Burned area is larger than 5 inches across

b. Burned area is on the face

c. Burned area covers 10% of the body

d. Burn extends through all the skin layers and tissue

e. Circumferential burn

50- The lower eyelid gets its sensory innervation from which one of the following nerve? Select one:

a. Zygomaticofrontal

b. Infraorbital

c. Infratrochlear

d. Nasociliary

e. Supraorbital

51- Regarding sentinel lymph node surgery in breast cancer which of the following is true Select one:

a. it is performed in all breast cancer

b. it has a high incidence of false negative rate

c. when positive axillary clearance is mandatory

d. axillary recurrence in negative sentinal node is high

e. Major concern is the development of lymphedema

52- The adenoma -carcinoma pathway started on normal epithelium by :

Select one:

a. Loss/ Mutation of APC.

b. Loss of DNA méthylation.

c. Mutation of ras oncogene.

d. Loss of DCC gene.

e. Loss of p53 gene.

53- When reviewing the histopathology report of a melanoma specimen, what is the single most important histologic prognostic factor for the patient?

Select one:

a. Mitotic count

b. Ulceration

c. Perineural invasion

d. Breslow thickness

e. Clark's level

54- During cell cycle, DNA replication occur in

Select one:

a. G1 phase

b. G2 phase

c. S phase

d. M phase

e. P phase

55- Overwhelming post splenectomy sepsis:

Select one:

a. commonly occurs after splenectomy for trauma

b. doesn't occur if accessory spleens are present

c. Can be fatal within hours of onset.

d. is most common in elderly patients

e. most fatal cases occur 10 to 15 years after splenectomy

56- The main presentation of wilm's tumor is

Select one:

a. Abdominal mass.

b. Hematuria.

c. Pain.

d. Hypertension.

e. Weight loss.

57- A 22-year old male who was involved in a motor vehicle accident as a driver and presented to the emergency department with active bleeding from the nose and hypotension. The most appropriate next step is:

Select one:

a. To take a full detailed history about the accident

b. To wait for the official police report

c. To resuscitate the patient with I.V fluids and control nasal bleeding

d. To obtain urgent CT scan of the head

e. To carry out full physical examination to exclude other injuries

58- Hypertension in a patient with a family history of medullary thyroid carcinoma is most often due to :

Select one:

a. Renal artery stenosis

b. Glomerulonephritis

c. Cushing's syndrome

d. Hyperparathyroidism

e. Pheochromocytoma

59- In primary survey, breathing in ABCD is affected by the followings except: Select one:

a. Tension pneumothorax

b. massive pneumothorax

c. open pneumothorax

d. Flial chest

e. Cardiac tamponade

60- Which of the following statement is true concerning epigastric hernias?

Select one:

a. peritoneal sac contaholoining abdominal viscera is common

b. other defects in the linea alba is not expected

c. Recurrent epigastric hernias after simple closure is very rare

d. painful midline abdominal mass frequently contain incarcerated small bowel

e. it lies in the midline between xiphisternum and umbilicus

61- The treatment of choice for basal cell carcinoma is

Select one:

a. Surgery

b. Cryosurgery

c. Cautery and curettage

d. Radiation therapy

e. chemotherapy

62- Non-surgical treatment of abdominal compartment syndrome is most likely to involve:

Select one:

a. Monitoring of intra-abdominal pressure once daily

b. Avoidance of muscle relaxants

c. Fluid resuscitation to a central venous pressure of 12 mm Hg

d. Nasogastric tube placement

e. Inotropic support to achieve a perfusion pressure of 60 mm Hg in the abdomen

63- Which of the following cranial nerves can be injured in an anterior fossa skull fracture? Select one:

a. I

b. Ill

c. V

d. VI

e. Vll

64- Which of the following is the best management of a multiloculated emppyema in the fibropurulent phase?

Select one:

a. CT-guided pigtail catheter drainage

b. rib resection and open (Eloesser flap) drainage

c. repeated thoracenteses

d. tube thoracostomy with instillation of fibrinolutics

e. vedio-assised thoracic surgery (VATS) with debridement and drainage

65- The segment of bowel is most frequently associated with intussusception; Select one:

a. Ileoileal

b. Colocolic

c. Ileocolic

d. Caecocolic

e. Jejunoileal

66- Which of the following is not a risk factor for wound infection? Select one:

a. prolonged operative time

b. prolonged preoperative hospitalization

c. Shaving the skin the night before surgery.

d. patients having upper respiratory tract infection

e. surgeon's hand scrub for 5 instead of 10 minutes

67- The complications chronic duodenal ulcer do not include

Select one:

a. Acute perforation

b. Acute hematemesis

c. Penetration into theposterior abdominal wall

d. Malignant transformation

e. pyloric obstruction

68- In patient with pectus excavatum, repair results in a significant improvement in Maximum voluntary ventilation Select one:

a. Diffusion capacity for carbon monoxide

b. FEV1

c. Heart rate

d. Maximum voluntary ventilation (physical exercise tolerance) e. Residual lung volume

69- Spontaneous closure is least likely in fistulae originating from: Select one:

a. colon

b. esophagus

c. pancreas

d. stomach

e. small intestine

70- Most common cause of gastric outlet obstruction in adult nowadays is

Select one:

a. peptic ulcer disease

b. gastric adenocarcinoma

c. gastric lymphoma

d. congenital band

e. gastric polyps

71- An 8-year-old boy presents to the emergency room after being struck in the face with a baseball. On examination, he has left periorbital ecchymosis and swelling with restricted upward gaze. He is vomiting and bradycardie. A CT scan reveals a minimally displaced orbital floor fracture. Which of the following is the most appropriate treatment?

Select one:

a. Reassurance and observation

b. Ophthalmology follow-up

c. Emergent operative reduction and orbital floor reconstruction

d. Elective operative reduction and orbital floor reconstruction within 7 days

e. Elective operative reduction and orbital floor reconstruction within 14 days

72- which of the following is true of testicular torsion?

Select one:

a. It is the most common cause of acute scrotum in an 8 -year old boy

b. In children it can be reliably diagnosed by ultrasonograghy

c. In neonates it is due to intravaginal torsion

d. Scrotal inflammatory change is a late sign associated with necrosis

e. Contralateral testicular fixation is rarely performed in case of unilateral torsior

73- A 68-year-old man is brought to the emergency ward with an acute abdomen. He is resuscitated and then taken to theatre for exploratory laparotomy. He is found to have a perforated sigmoid colon secondary to a mass with malignant features. The most appropriate surgical intervention is:

Select one:

a. Anterior resection

b. Subtotal colectomy

c. Extended left hemicolectomy

d. Abdominoperineal resection

e. Hartmann's procedure

74- A 58-year-old man presents with a 3-day history of worsening abdominal pain and vomiting. Abdominal x- ray reveals dilated loops of small bowel and air in the biliary tree. The most likely diagnosis is:

Select one:

a. Ascending cholangitis

b. Gallbladder cancer

c. Choledochal cyst

d. Gallstone ileus

e. Emphysematous cholecystitis

75- A 41 -year-old patient complains of shortness of breath and palpitations shortly after admission to the surgical ward from the emergency ward for management of acute cholecystitis. Observation shows sudden drop in blood pressure to 90/40 mmHg with accompanying tachycardia. On examination there is marked erythema around the intravenous cannula on the dorsum of the left hand. The most likely cause is:

Select one:

a. Septic Shock

b. Anaphylaxis

c. Pulmonary embolism

d. Acute adrenal failure

e. Cardiac tamponade

76- In infants with duodenal atresia, all of the following are true except:

Select one:

a. There is increased incidence of Down syndrome

b. It can be detected by prenatal ultrasound examination

c. It may occur in infants with situs inversus,malrotation,annularpancreas and anterior portal vein.

d. It is best treated by gastroenterostomy

e. There is high incidence of associated cardiac defects

77- A 34 year old male, a known case of ulcerative colitis, presented to the Emergency room with severe diarrhea, weakness, and his ECG showed Prolongation of the OT wave. This patient is suffering mainly from

Select one:

a. Hyponatremia

b. Hypokalemia

c. Metabolic Acidosis.

d. Hypernatremia

e. Hypermagnesaemia.

78- The procedure responsible for the largest number of esophageal perforations is: Select one:

a. esophageal bougienage

b. esophageal sclerotherapy

c. flexible esophagoscopy

d. insertion of nasogastric tube

e. pneumatic dilatation

79- Among the followings which is the least common complication of Crohn's disease Select one:

a. intestinal obstruction

b. free perforation

c. entero cutaneous fistula

d. perianal abscess and fistulas

e. massive hemorrhage

80- The most serious complication of an abdominal aortic aneurysm is:

Select one:

a. Thrombosis.

b. Distal emboli.

c. Retroperitoneal rupture.

d. Intraperitoneal rupture.

e. Pressure on adjacent structures.

81- The secondary palate consists of which one of the following structure?

Select one:

a. Premaxilla

b. Incisor teeth

c. Uvula

d. Anterior septum

e. Soft tissues of the lip

82- A plain abdominal radiograph may be pathognomonic for meconium ileus when disparate bowel loops are associated with

Select one:

a. Small bowie air-fluid levels with absence of gas in the rectum

b. Portal venous gas and free intra-abdominal air

c. Soap-bubbly appearance in the right lower quadrant and absence of small bowel air-fluid levels

d. Left upper quadrant speckled calcifications and distension of the stomach and duodenum

e. Dilated colon and intrascrotal calcifications

83- Appendectomy is usually performed as a part of which procedure?

Select one:

a. Gastroschisis

b. Congenital diaphragmatic hernia repair

c. Ladd's procedure

d. Laparotomy for meconium obstruction

e. Pull-through procedure for Hirshsprung's disease

84- One of the following extra-intestinal manifestation of Familial Adenomatous Polyposis can be used to screen affected families

if genetic testing is unavailable:

Select one:

a. Congenital hypertrophy of the retinal pigment epithelium.

b. Epidermoid cyst.

c. Pilomatrixoma.

d. Osteomas.

e. Desmoid tumors.

85- Gastrointestinal Stromal Tumor (GIST) in the stomach characterized by all of the following EXCEPT

Select one:

a. Local excision of tumor is enough.

b. Lymph node clearance is necessary.

c. Large tumors may need gastrectomy.

d. imatinib(Gleevec) have been shown to be an effective treatment.

e. Tumors with high mitotic activity are more likely to metastasize.

86- Which of the following is not a type of malignant melanoma?

Select one:

a. Superficial spreading

b. Acral lentiginous.

c. Nodular

d. Giant congenital pigmented naevus

e. Lentigo maligna

87- All the followings are true about the thyroglossal cyst EXCEPT:

Select one:

a. Painless swelling.

b. Cystic in consistency.

c. Moves up &amp; Down with swallowing

d. If infected, can form a thyroglossal fistula.

e. It is almost always lie in the midline

88- Complications following massive blood transfusion include except:

Select one:

a. DIC

b. hypocalcaemia

c. hypokalaemia

d. citrate toxicity

e. Hypothermia

89- The most serious type of lipoma is:

Select one:

a. Retroperitoneal type

b. Sub-periosteal type.

c. Intermuscular type.

d. Submucous type.

e. Subcutaneous

90- In stage 4S neuroblastoma,complete resolution of liver metastasis results from; Select one:

a. Radiotherapy

b. Chemotherapy

c. Surgery

d. Natural resolution

e. Hormonal therapy

91- Patient underwent left mastectomy with axillary clearance, after a few days she complains of protrusion of scapula. Which of the following muscles is involved?

Select one:

a. Latissimus dorsi.

b. Serratus posterior

c. Trapezius

d. Serratus anterior

e. Pectoralis major muscle.

92- Intra-abdominal hypertension is found when the intra-abdominal compartment pressure starts to rise over:

Select one:

a. 10 mmHg

b. 12 mm Hg

c. 15 mmHg

d. 20 mm Hg

e. 60 mm Hg

93- All of the following are true about perianal abscess EXCEPT:

Select one:

a. Infection starts in the anal gland in the intersphincteric space

b. The commonest organism is E-coli

c. Drainage is by cruciate incision under general anesthesia

d. Followed by fistula in 5% of cases

e. Most of those fistulae are low fistulae

94- The best investigation to determine stage of ca esophagus(Clinical staging) is: Select one:

a. Chest ct scan

b. Chest MRI

c. EUS (Esophageal ultrasound)

d. PET scan

e. Ba. Swallow

95- What is the most important aspect of management of burn injury in the first 24 hours ? Select one:

a. Fluid resuscitation

b. Dressing

c. Escharotomy

d. Antibiotics

e. Early skin grafting

96- Which of the following does not describe an acute midgut volvulus?

Select one:

a. Sudden onset of bilious vomiting

b. Blood per rectum

c. Double bubble sign of duodenal obstruction

d. Metabolic alkalosis

e. Shock

97- Gastrointestinal stromal tumors (GIST):

Select one:

a. occur most commonly in the duodenum

b. are almost always malignant

c. can be treated adequately with enucleation

d. Are often radioresistant

e. Spread mainly via the lymphatic

98- which of the following is not true regarding choledochal cyst?

Select one:

a. Choledochal cyst type I fusiform is the most common type

b. Choledochal cystis more common in females and Asians

c. More than two thirdsof cases are diagnosed in children less than 10 years of age

d. The majority of cases present with the classic triad of jaundice.right hypochondria! mass and pain

e. The malignancy risk is age related and mainly affects adults

99- All the followings are true regarding Achalasia except

Select one:

a. Due to Myenteric plexus degeneration.

b. Presents as intermittent dysphagia

c. Dysphagia starts with solid and fluid diet

d. Barium swallow shows rat tail appearance.

e. can be treated by surgical myotomy

100- perianal abcess 🡪exept : infection starts in the anal gland in intersphincteric space.

Surgery final exam - Serotonin 2021

**Q1) The proliferation phase of wound healing is characterized by all of the following except:**

a. Formation of new capillary buds

b. A macrophages are a key cells in this phase.

c. Deposition of collagen

d. Formation of granulation tissue

e. This phase lasts 6-21 days.

**Q2) Risk of a malignant transformation of colorectal polyp depends on the following except:**

a. Size.

b. Histopathology.

c. Duration.

d. Associated plyposis syndrome.

e. More in pedunculated polyp than sessile type.

**Q3) A 3-year-old child has a draining lesion in the lower third of the neck along the anterior border of the sternocleidomastoid muscle. the most likely diagnosis is:**

a. Atypical mycobacterial infection.

b. Thyroglossal duct sinus.

c. Second branchial cleft sinus.

d. Actinomycosis.

e. Epidermal inclusion cyst.

**Q4) Strangulated inguinal hernia; choose the best diagnostic sign of strangulation:**

a. Irreducibility.

b. Absence of impulse on cough.

c. Erver audible intestinal sounds.

d. Tense and tender hernia.

e. Large hernia size.

**Q5) The most common location for a primary adenocarcinoma of the small intestine is:**

a. Duodenum.

b. Jejunum.

c. Ileum.

d. The distribution is roughly equal.

e. Never occur in the small intestine.

**Q6) Gastrointestinal bleeding in childhood due to Meckel's diverticulum:**

a. Is secondary only to intestinal obstruction as a complication of Meckel's diverticulum.

b. Usually occur at the Meckel's where the feeding mesenteric artery erodes.

c. Is almost always heralded by antecedent signs and symptoms related to the Meckel's.

d. Is accurately diagnosed by arteriography with bleeding rates less than 0.5 ml/minute.

e. Occurs characteristically in children over 1 year.

**Q7) A 24-year-old male, not known to have chronic medical illness, has vomited for several times with forceful retching then vomitus of fresh blood appears, the most likely diagnosis is:**

a. Peptic ulcer disease.

b. Vascular malformation.

c. Oesophageal varices.

d. Mallory- Weiss syndrome

e. Gastritis

**Q8) Hereditary non-polyposis colorectal cancer characterized by of the following EXCEPT:**

a. Increased risk of ovarian, gastric and small intestinal cancers.

b. Accounts for about 5 — 10 % of all colon cancers.

c. Autosomal recessive condition caused by a mutation in DNA mismatch repair genes.

d. The lifetime risk of developing colorectal cancer is 80 %.

e. Mean age of diagnosis is 45 years.

**Q9) One of the following is a late complication of colostomy creation:**

a. Retraction.

b. Prolapse.

c. Ischemia.

d. Dermatitis.

e. Torsion of the bowel limb.

**Q10) 70-year-old woman presents with a worsening eczema-like rash overlying the areola and nipple. The rash does not itch. On examination a palpable mass can be felt under the rash. The diagnosis is:**

a. Dermatitis herpetiformis.

b. Benign eczema of nipple.

c. Paget's disease.

d. Phylloides tumor.

e. Mammary hemangioma.

**Q11) Which of the following is the best management of a multiloculated empyema in the fibropurulent phase?**

a. CT-guided pigtail catheter drainage.

b. rib resection and open (Eloesser flap) drainage.

c. repeated thoracenteses.

d. tube thoracostomy with instillation of fibrinolutics.

e. vedio-assised thoracic surgery (VATS) with debridement and drainage.

**Q12) The estimated blood loss in class Ill hypovolemic shock is:**

a. 1500-2000 cc blood.

b. 15-30% of total blood volume.

c. More than 40% of total blood volume.

d. 750-1500 cc blood.

e. Less than 15% of total blood volume.

**Q13) Estrogen receptor activity is clinically useful in predicting:**

a. The likelihood of development of osteoporosis

b. Response to hormonal manipulation.

c. Response to chemotherapy.

d. The presence of metastatic disease.

e. The presence of ovarian cancer.

**Q14) Which of the following nerve often gets damaged in fracture-dislocation of the orbital floor?**

a. Zygomatic nerve.

b. Infraorbital nerve.

c. Lacrimal nerve.

d. Supraorbital nerve.

e. Buccal nerve.

**Q15) Skin graft survival in the first 48 hours is dependent on:**

a. Random connection between host and donor capillaries.

b. Plasmatic imbibition.

c. Saline in dressing.

d. Development of new blood vessels.

e. Inosculation.

**Q16) A newborn with imperforate anus showed the presence of meconium in the urine. The next step is:**

a. Opening a colostomy.

b. A voiding cystourethrogram.

c. An intravenous urethrogram.

d. A perineal anoplasty.

e. An abdomino-perineal pullthrough.

**Q17) Post-operative pulmonary complications are most often due to:**

a. Hypercapnia.

b. Emphysema.

c. Atelectasis.

d. Thromboembolism.

e. Pulmonary hypertension.

**Q18) There is an emergent consensus that the surgical repair of congenital diaphragmatic hernia is best done:**

a. Urgently at the bedside, eliminating the risk of transporting an unstable neonate.

b. While on extracorporeal membrane oxygenation.

c. When the patient is on minimal ventilator settings.

d. Within the first 48 to 72 hours of life.

e. Repair is not mandatory, the mortality rate is just 5%.

**Q19) A 46-year-old man had a total thyroidectomy and excision of enlarged right jugular lymph nodes for papillary carcinoma. The operation was uncomplicated. Twelve hours after the operation he develops circumoral numbness and paresthesias in his fingertips, and he becomes very anxious. Vital signs are temperature 37.5°C, pulse 85/min, respirations 14/min, and blood pressure 130/90 mm Hg. Extremities are warm, with brisk capillary refill time. Additional physical examination is most likely to show which of the following:**

a. Hyporeflexia.

b. Deviation of the tongue to the left side.

c. Chvostek sign.

d. Babinski sign bilaterally.

e. A drooping left shoulder.

**Q20) Deep skin bums are treated with:**

a. Split thickness graft

b. Full thickness graft.

c. Amniotic membrane.

d. Synthetic skin derivatives.

e. Secondary intention.

**Q21) The drug of choice for clostridial myonecrosis is:**

a. Penicillin G.

b. Ampicillin.

c. Amikacin.

d. Cephalosporin.

e. Chloramphenicol.

**Q22) The high mortality rate for children with congenital diaphragmatic hernia is due to:**

a. Increased intra-abdominal pressure.

b. Persistent patent ductus arteriosus.

c. Failure of the collapsed lung to expand.

d. Mediastinal shift and impaired venous return.

e. Abnormal pulmonary vasculature.

**Q23) Patient had a biopsy from the lower end of the esophagus that revealed Columnar epithelium cells. The presence of these cells is called:**

a. Dysplasia.

b. Anaplasia.

c. Hyperplasia.

d. Metaplasia.

e. Normal.

**Q24) Orchidopexy is indicated for children with undescended testicle for all the following reasons except:**

a. Higher incidence of accompanying hernia.

b. Increased chance of testicular trauma.

c. Psychological factors.

d. development of malignancy.

e. Lower future fertility.

**Q25) In response to antigen stimulation the secretory immune system in the gut is a major source of:**

a. IgA.

b. IgG.

c. Interleukin-4.

d. Interleukin-5.

e. Interleukin-6.

**Q26) Regarding the diaphragm all are true except:**

a. Is attached to the sternum, costal cartilages, the psoas fascia, the transversalis fascia, and the vertebral bodies.

b. Is supplied by both the phrenic and intercostals nerves.

c. Increases the horizontal diameter of the chest on contraction.

d. Has an opening in the central tendon for the inferior vena cava.

e. Contracts during micturition.

**Q27) The main causes of hypokalemia include all of the following except:**

a. Excessive vomiting.

b. Diarrhea.

c. External alimentary fistulas.

d. Acidosis.

e. Pylori stenosis.

**Q28) Which of the following is not a typical cause of neonatal intestinal obstruction?**

a. Intussusception.

b. Meconium ileus.

c. Hirschsprung’s disease.

d. Jejunoileal atresia.

e. Incarcerated inguinal hernia.

**Q29) A patient who is a member of a known MEN1 family present with 2 cm mass in the head of the pancreas which of the following investigations in not indicated preoperatively?**

a. 24-hour urine catecholamine.

b. Serum calcium.

c. Parathyroid hormone level.

d. Serum gastrin.

e. Brain CT scan

**Q30) A 50-year-old male developed a painless chronic ulcer with indurated margins in the floor of the mouth. He has smoked for 25 years but his oral hygiene appeared good. The diagnosis is best made by:**

a. Swab for bacteriological examination

b. Sputum cytology.

c. Frozen section biopsy.

d. Incisional biopsy

e. Excisional biopsy.

**Q31) Which of the following statements is FALSE regarding gastroschisis?**

a. It is associated with malrotation.

b. There is a low incidence of associated anomalies.

c. There is a prolonged adynamic ileus following repair.

d. It is complicated by intestinal atresia in 10% to 15% of cases.

e. It is associated with chromosomal syndromes.

**Q32) The subdermal plexus forms the vascular basis for:**

a. Random flaps.

b. Axial flaps.

c. Musculocutaneous flaps.

d. fasciocutanous flaps.

e. Skin grafts.

**Q33) A 43-year-old woman presents to the emerge, room complaining of the sudden onset of right upper abdominal pain. Her pain started after eating meat for lunch. She is nauseated and vomited twice at home. She denies diarrhea. Her temperature is 37.6 C, blood pressure is 140/85 mm Hg, and pulse is 100/min. She appears anxious and distressed. She is not jaundiced. Abdominal examination reveals normal bowel sounds. While you are palpating under her right costal margin, the patient abruptly arrests her inspiration and pulls away because of sharp pain. Which of the following is the most appropriate next step in management?**

a. Plain abdominal radiograph.

b. Upper GI endoscopy.

c. Ultrasound of the abdomen.

d. CT of the abdomen.

e. MRI of the abdomen.

**Q34) The most common complication after appendectomy is:**

a. Internal bleeding.

b. Pelvic abscess.

c. Wound infection.

d. Intestinal obstruction.

e. Incisional hernia.

**Q35) Which of the following statements are true?**

a. Healing by primary intention results in minimum inflammation and the best scar.

b. Granulation, contraction and epithelialization are seen in healing by primary intention.

c. Tertiary intention involves immediate closure of the wound.

d. A crushed and contaminated wound is best suited for healing by primary intention.

e. Primary repair of all structures should be attempted in an untidy wound.

**Q36) The diagnosis of persistent cloaca in a female neonate is best established by:**

a. MRI study.

b. CT scan.

c. Cystoscopy and vaginoscopy.

d. Perineal inspection.

e. both CT and MRI.

**Q37) During initial fluid resuscitation, a burned child is more susceptible than an adult to which of the following:**

a. Hypoglycemia.

b. Hyperglycemia.

c. Hypophosphatemia.

d. Hyperphosphatemia.

e. Hypernatremia.

**Q38) A previously healthy 10-year-old boy presented with a 12-hour history of anorexia, vomiting and pain in the right iliac fossa. Examination revealed a rectal temperature of 38.3, a white count of 13.700/cmm and signs of localized peritonitis in the right lower quadrant. At operation, his appendix and caecum were normal. The Most likely cause of his illness is:**

a. Acute gastroenteritis.

b. Regional enteritis (Crohn's disease).

c. Meckel's diverticulitis.

d. Acute mesenteric lymphadenitis.

e. Deep iliac adenitis.

**Q39) Non-surgical treatment of abdominal compartment syndrome is most likely to involve:**

a. Monitoring of intra-abdominal pressure once daily.

b. Nasogastric tube placement.

c. Inotropic support to achieve a perfusion pressure of 60 mmHg in the abdomen.

d. Avoidance of muscle relaxants.

e. Fluid resuscitation to a central venous pressure 12 mmHg.

**Q40) Regarding over whelming post splenectomy infection which of the following is not true:**

a. S. pneumonia bacteria is most often responsible.

b. Children are at highest risk.

c. It is a life long pot splenectomy risk.

d. Incidence is equal in all spleenectomised patients regardless of the indication of splenectomy.

e. Prophylactic immunization is optimally given at least 2 weeks prior to elective splenectomy.

**Q41) Among the followings which is the least common complication of Crohn's disease?**

a. intestinal obstruction.

b. free perforation.

c. entero cutaneous fistula.

d. perianal abscess and fistulas.

e. massive hemorrhage.

**Q42) A 65-year-old man with a history of diverticular disease is admitted to the surgical ward with suspected diverticulitis. He has been treated with antibiotics and intravenous fluids but is not improving after 24 hours. The next most appropriate step in the management is:**

a. Total colonoscopy.

b. Flexible sigmoidoscopy.

c. Small bowel follow-through.

d. Abdominal CT.

e. Watch and wait.

**Q43) Which of the following statements about gastrointestinal bleeding in children is TRUE?**

a. Lesions proximal to the ligament of Treitz are the usual cause of gastrointestinal bleeding in children older than 1 year.

b. Upper gastrointestinal bleeding is ruled out by normal naso-gastric aspirate.

c. Meckel's diverticulum hill most frequent cause of massive lower gastrointestinal bleeding.

d. Bleeding is common with midgut volvulus but is rarely seen with intussusception.

e. Anal fissures are a rare cause of rectal bleeding in an infant.

**Q44) Currently, which of the following infectious illnesses is most likely to compromise patients following renal transplantation?**

a. E. coli sepsis.

b. Pneumococcal sepsis.

c. Candidiasis.

d. Aspergillosis

e. Cytomegalovirus.

**Q45) Factors associated with poor spontaneous entero-cutaneous fistula tract closure include the following except:**

a. Radiation at the site of the fistula.

b. long and tortuous fistula tract.

c. Inflammatory bowel disease.

d. Epithelization of the fistula tract.

e. Distal bowel obstruction.

**Q46) Hydatid cyst of the lung is best managed by:**

a. CT-guided percutaneous drainage, oral albendazole, delayed lobectomy.

b. CT-guided sclerosis, long-term albendazole suppression therapy.

c. intravenous clindamycin, thoracotomy, capitonnage.

d. oral albendazole, intravenous clindamycin, chest tube placement.

e. thoracotomy, evacuation of cyst sontents, parenchyma-sparing lung resection.

**Q47) Intra-abdominal hypertension is found when the infra-abdominal compartment pressure starts to rise over:**

a. 10 mm Hg.

b. 12 mm Hg.

c. 15 mm Hg.

d. 20 mm Hg.

e. 60 mm Hg.

**Q48) A 50-year-old woman sustains full-thickness circumferential burns to her entire left upper extremity, partial-thickness bums to the anterior surface of her entire left lower extreme and first-degree burns to her entire face (not scalp). What is the total body surface area (TBSA) of burn used to calculate her fluid requirements?**

a. 18%

b. 22%

c. 36%

d. 40%

e. 27%

**Q49) Which of the following statements about Hirschsprung’s disease is true?**

a. It is a congenital aganglionosis of the myenteric plexus.

b. Meconium passage is typical of the disease.

c. It leads to lack of relaxation of the non-innervated bowel.

d. The last 10 cm of the bowel proximal to the dentate line normally lacks plexuses.

e. Ultrashort disease is usually detected at birth.

**Q50) The most important risk factor for the development of breast cancer is:**

a. Advancing age.

b. BRCA1 and BRCA2 mutations.

c. Radiation exposure.

d. Early menarche.

e. Nulliparity.

**Q51) Treatment of incised clean wounds of less than 6 hours duration Should be:**

a. Primary closure.

b. Delayed primary closure.

c. Debridement.

d. Wound excision.

e. Dressing.

**Q52) Which of the following takes part in the formation of the ano-rectal ring?**

a. Internal sphincter and external sphincter.

b. Deep part of external sphincter and puborectalis muscle.

c. Deep Part of external sphincter and internal sphincter.

d. Internal sphincter and puborectalis muscle.

e. Deep and subcutaneous parts of external sphincter.

**Q53) Which one of the following classification systems of melanoma is based on micrometer reading regarding the depth of invasion?**

a. Clark's classification.

b. Breslow's classification.

c. TNM classification.

d. Morphologic classification.

e. Clinical classification.

**Q54) Regarding insulinoma, all are true except:**

a. It is one of the most common endocrine neoplasm of the pancreas.

b. It is evenly distributed throughout the pancreas.

c. Majority are sporadic.

d. It is characterized by whipple triad.

e. In most cases pancreatico- duodenectomy is the treatment of choice.

**Q55) A 54-year-old woman comes to clinic because of a mass in the right breast for 3 weeks. She has no previous history of breast problems. Her last menstrual period was 1 week ago, menarche was at age 12 and she had her first child at age 32. She has no history of any major medical illness. Her paternal aunt had breast cancer at age 75. On physical examination, she has a 1-cm mass in the upper outer quadrant of the right breast. The mass is firm and freely movable with indistinct. borders. There is minimal tenderness and skin dimpling over the mass. There is no nipple discharge and no axillary lymphadenopathy. The mammogram and breast ultrasound showed a solid tight breast mass. A biopsy shows cancer. Which of the following is the most likely histologic type of cancer causing these findings?**

a. Infiltrating ductal carcinoma.

b. Infiltrating lobular carcinoma.

c. Paget’s disease.

d. Medullary carcinoma.

e. Tubular carcinoma.

**Q56) Which of the following statements about inguinal hernias in infants is true?**

a. They are bilateral in 60% of the cases.

b. They are no commoner in premature infants than in term infants.

c. They require repair of the muscular floor of the canal.

d. If incarcerated they should not be reduced.

e. They can cause bowel obstruction or testicular injury if incarcerated.

**Q57) Patients with massive lower gastrointestinal bleeding:**

a. Should never have surgery until the precise site and cause of bleeding is identified.

b. Should have immediate colonoscopy as a first step in the management.

c. Should proceed directly to mesenteric angiogram.

d. Should be appropriately resuscitated as a first step in the management.

e. Should have radionuclide scan performed immediately, regardless of the amount of bleeding.

**Q58) According to Lauren System of gastric cancer, the diffuse type characterized by all of the following EXCEPT:**

a. Poorly differentiated with signet ring cells.

b. More hematogenous spread compared to intestinal type.

c. Poorer prognosis compared to intestinal type.

d. More proximal gastric cancer.

e. Decreased E-cadherin.

**Q59) Diabetic foot is characterized by all of the followings except:**

a. Peripheral ischemia.

b. Often painful ulcers.

c. Osteomyelitis.

d. Gas forming bacteria.

e. Charcot joints.

**Q60) Postoperative third-space accumulation should be managed by**

a. Albumin.

b. Dextrose in water.

c. Fluid restriction.

d. 1/2 Normal saline with potassium supplements.

e. Normal saline.

**Q61) Postgastrectomy late dumping syndrome, one is false:**

a. Symptoms of diaphoresis, palpitations, fatigue, and desire to lie down.

b. Symptoms begin 3 hours after meals.

c. Symptoms are due to rapid fluctuations in serum glucose levels.

d. It is cause by uncontrolled emptying of hypertonic fluid into small intestine.

e. Conversion to Roux en Y is sometimes indicated.

**Q62) Marjolin’s ulcer is recognized as a cancer arising from all of the following, except:**

a. Scar tissue.

b. Burns.

c. Wounds.

d. Fistula.

e. foreign body.

**Q63) A 30-year-old sustains a 25% TBSA burn injury. According to the Parkland formula, the initial IV fluid used for resuscitation therapy should be:**

a. Hypotonic saline.

b. Normal saline.

c. Ringer’s lactate.

d. 5% dextrose and water.

e. Colloid.

**Q64) Electrical injury may be classified as low or high voltage. The distinction between high and low voltage is at:**

a. <100 V.

b. <1000 V.

c. <10.000 V.

d. <100.000 V.

e. <5.000 V.

**Q65) Post total thyroidectomy complication in Euthyroid patient include the following except:**

a. Tetany.

b. Thyrotoxic crisis.

c. Hoarseness of voice.

d. Suffocation.

e. Myxedema.

**Q66) Fat absorption occurs primarily in the:**

a. Stomach.

b. First portion of duodenum.

c. Third portion of duodenum.

d. Jejunum.??

e. Ileum.

**Q67) The most common early complication post hemorrhoidectomy is:**

a. Bleeding per rectum.??

b. Urinary retention.

c. Infection.

d. Incontinence.

e. Stenosis

**Q68) Which of the following statements is FALSE regarding gastroschisis?**

a. It is associated with malrotation.

b. There is a low incidence of associated anomalies.

c. There is a prolonged adynamic ileus following repair.

d. It is complicated by intestinal atresia in 10% to 15% of cases.

e. It is associated with chromosomal syndromes.

**Q69) Radioactive iodine is part in treatment of which of the following thyroid conditions:**

a. Anaplastic carcinoma.

b. Medullary carcinoma.

c. Hashimoto thyroiditis.

d. Papillary carcinoma.

e. Lymphoma.

**Q70) The most common cause of pyogenic liver abscess is:**

a. Liver cirrhosis.

b. Peritonitis.

c. Secondary infected abdominal viscera.

d. Infection of liver hydatid cyst.

e. Cholangitis due to biliary obstruction.

**Q71) The most common source of gram-negative infection in a patient with septic shock is the:**

a. Biliary tract.

b. Tracheobronchial tree.

c. Small bowel.

d. Colon.

e. Urinary tract.??

**Q72) All of the following are accepted surgical indications for patient with lung abscess except:**

a. Failed medical treatment.

b. Serious hemorrhage.

c. Suspicion of cancer.

d. Unsuccessful drainage.

e. An abscess of 3 cm diameter.

**Q73) A 24-year-old male presented to the emergency room after a history of blunt abdominal trauma he was diagnosed with bleeding that mandate surgical intervention, all of the following are expected to be in this patient EXCEPT:**

a. Decreased cardiac output.

b. Increased heart rate.

c. Increased pulmonary artery occlusion pressure.

d. Increased systematic vascular resistance.

e. Decreased stroke volume.

**Q74) In most instances cholangiocarcinoma is:**

a. Idiopathic

b. Secondary to choledocholithiasis

c. Secondary to infection with Guardia lambila.

d. Secondary to sclerosing cholangitis.

e. Secondary to Ulcerative colitis.

**Q75) The most common type of congenital diaphragmatic hernia is caused by:**

a. A defect in the central tendon.

b. Eventration of the diaphragm in the fetus.

c. A defect through the space of Larrey.

d. An abnormally wide esophageal hiatus.

e. A defect through the pleuroperitoneal fold.

**Q76) One of the following is false about colonic function:**

a. Sodium is absorbed passively.

b. Chloride is absorbed passively.

c. Water is absorbed passively.

d. Absorption of glucose and vitamins can take place in the colon.

e. Generation of short chin fatty acids from dietary fiber fermentation.

**Q77) All are true about the typical rib except:**

a. Articulates with the vertebral bodies in two places.

b. Is attached to an intervertebral disc.

c. Bears three facets for articulation with the vertebral column.

d. Has a costal cartilage which articulates with the sternum by a synovial joint.

e. Is grooved superiorly by the costal groove.??

**Q78) Effects of obstructive jaundice include all of the following EXCEPT:**

a. Impaired T cell proliferation

b. Decreased neutrophil chemotaxis.

c. Defective bacterial phagocytosis.

d. Increase function of Kupffer cells.

e. Activation of complement system.

**Q79) Which one of the following muscles forms a sling that suspends the palate from the cranial base and is critical muscle involved in venophlopharyngeal closure?**

a. Tensor veli palatini.

b. Levator veli palatini.

c. Palatopharyngeus.

d. Superior constrictor.

e. Palatoglossus.

**Q80) All the following conditions are known to have a familial pattern associated with a predisposition to cancer except one:**

a. Colonic polyposis

b. Breast cancer.??

c. Peutz-Jeghers syndrome.

d. Gardner’s syndrome.

e. retinoblastoma.

**Q81) The commonest extranodal primary site for non-Hodgkin’s lymphoma is:**

a. Stomach.

b. Duodenum.

c. Rectum

d. Sigmoid colon.

e. Jejunum.

**Q82) Squamous cell carcinoma can clinically manifest as all of the following except:**

a. lesion commonly seen on head and neck areas.

b. Central ulceration in the nodules with bleeding, crusting and foul smell.

c. Involve mucosal surfaces.

d. May present as warts or eczematous lesions

e. Bleeding from old navous.

**Q83) Which of the following is most common after primary repair of esophageal atresia with distal trachea-esophageal fistula?**

a. Anastomosis leak.

b. Esophageal stricture.

c. Recurrent trachea-esophageal fistula.

d. Gastroesophageal reflux.

e. Tracheomalacia requiring aortopexy.

**Q84) All of the following conditions are associated with diarrhea except:**

a. Medullary thyroid carcinoma.

b. Carcinoid syndrome.

c. Zollinger-ellison syndrome.

d. Thyrotoxicosis.

e. Pheochromocytoma.

**Q85) The followings are clinical features of gallstone ileus except:**

a. Presence of air in the biliary tree.

b. Small bowel obstruction.

c. The stone is rarely seen on plain abdominal X ray.

d. The stone usually passes through sphincter of Oddi.

e. Previous history of bouts of cholangitis.

**Q86) All are true of diverticular disease of the colon except:**

a. It increases in frequency with increasing age.

a. Colonoscope is the diagnostic tool during acute attack of diverticulitis.

c. Colovesical fistula is a known complication.

d. Diverticulosis of colon is the most common cause of massive colonic hemorrhage.

e. elective resection is indicated after repeated episodes of diverticulitis.

**Q87) The anaphylactic shock is characterized by the following signs except:**

a. Hyperventilation.

b. Hypotension.

c. Tachycardia.

d. Pale cold extremities.

e. Oliguria.

**Q88) The complication of enteral nutrition includes all of the following except:**

a. Pharyngitis.

b. Pulmonary aspiration.

c. Venous thrombosis.

d. Hyperglycemia.

e. Tube blockage.

**Q89) A 35-year-old man presents with weight loss, diarrhea and abdominal pain. On examination he has aphthous ulcers in the mouth and a mass is palpable in the right iliac fossa. Blood tests reveal low serum B12 and folate. The most likely diagnosis is:**

a. Cecal cancer.

b. Ulcerative colitis.

c. Diverticular disease.

d. Crohn’s disease.

e. Appendicular cancer.

**Q90) The parotid duct is vulnerable to injury in lacerations of the face. Which one of the following correctly describes the location of the parotid duct in the face?**

a. Lies on the middle third of the line between tragus and middle of upper lip.?

b. Lies on the anterior third of a line between tragus and middle of upper lip.

c. Lies of the posterior third of a line between tragus and middle of upper lip.

d. Lies on the middle third of a line between tragus and angle of mouth.

e. Lies on the middle third of a line between tragus and middle of lower lip.

**Q91) All the following are true about fistula in ano except:**

a. It usually follows drainage perianal abscess.

b. Most of them are low type.

c. Most of them are intersphincteric type.

d. Posterior fistula have a straight tract according to Goodsall’s rule.

e. Most specific fistula are of granulomatous lesion.

**Q92) A patient who is a member of a known MEN1 family present with 2 cm mass in the head of the pancreas. Which of the following investigations is not indicated preoperatively?**

a. 24-Hour urine catecholamine.

b. Serum calcium.

c. Parathyroid hormone level.

d. Serum gastrin.

e. Brain CT scan.

**Q93) The coverings of the sac of oblique inguinal hernia do not include the:**

a. Skin and superficial fascia.

b. Deep scarpa’s fascia.??

c. External spermatic fascia.

d. Cremasteric muscle and fascia.

e. Internal spermatic fascia.

**Q94) How common is foot ulceration in the diabetic population?**

a. Between 1 and 5%.

b. Between 10 and 15%.

c. Between 15 and 20%.

d. Less than 1%.

e. 25%

**Q95) Which of the following polyp harbor the highest malignancy potential:**

a. 3 cm tubulovillous polyp in the descending colon.

b. 2 cm villous polyp in the ascending colon.

c. 4 cm hyperplastic polyp in the transverse colon.

d. 5 cm tubular polyp in the ascending colon.

e. 5 cm villous polyp in the descending colon.

**Q96) Which of the following statements is true concerning the biomechanics of penetrating injuries to the chest?**

a. The frontal areal of impact of a bullet is determined primarily by its caliber.

b. A high velocity gunshot wound creates a vacuum pulling clothin, bacteria, and other debris into the chest.

c. A hollow point bullet is associated with minimal penetration and will not penetrate the chest wall.

d. Stab wounds to the chest are associated with significant cavitation and tissue destruction.

e. A shotgun injury from 50 meters will cause extensive damage to the lung.

**Q97) Regarding sentinel lymph node surgery in breast cancer which of the following is true?**

a. It is performed in all breast cancer.

b. It has a high incidence of false negative rate.

c. When positive, axillary clearance is mandatory.

d. Axillary recurrence in negative sentinel node is high.

e. Major concern is the development of lymph oedema.

**Q98) Patient brought to the ER with BP of 130/80, pulse of 84, localizes to pain, opens eye to pain, produces incomprehensive sounds, will have a Glasgow Comma scale of:**

a. 7.

b. 8.

c. 9.

d. 10.

e. 11.

**Q99) Which of the following is the lease cause of iatrogenic pneumothorax?**

a. Transthoracic needle aspiration.

b. Subclavian vessel puncture.

c. Thoracocentesis.

d. Pleural biopsy.

e. Intercostal nerve block.??

**Q100) When a patient is seen with stab wound of the neck that has injured the left vertebral artery. The most frequent clinical finding is:**

a. Hemiparesis.

b. Hemiplegia.

c. Hemorrhagic shock.

d. Monocular blindness.

e. Stable hematoma.

**6th year 2020  
Done by : Ibrahim Ghayyadah , Tareq Abu-libdeh**

1. **The estimated blood loss in class II hypovolemic shock is :**
2. 750 - 1500 ml
3. 1500 – 2000 ml
4. More than 3000 ml
5. Less than 750 ml
6. 2000- 3000 ml
7. **All the statements related to Neuroblastoma are true Except:-**
8. Arises from neural crest tissue.
9. MRI shows the extension of the tumor intra neural canal.
10. Increased urinary VMA.
11. Pulmonary metastasis is uncommon.
12. Cancer cells in the bone marrow enough for diagnosis.
13. **Surgical management of perforated diverticular disease with faecal peritonitis includes:**
14. preoperative mechanical bowel preparation
15. Hartmann’s procedure and sigmoid end‐colostomy
16. preoperative barium enema to define the anatomy
17. anterior resection and primary colorectal anastomosis whenever possible
18. preoperative nasogastric feeding to optimize nutrition
19. **In pseudo obstruction all the followings are correct except :**
20. The name given to a group of disorders that cause impaired GI motility with partial or complete coordinated muscle contraction loss.
21. it could be acute or chronic condition
22. secondry pseudo obstruction is more common than primary
23. Spine fractures is one of the causes of secondry pseudo obstruction .
24. The usual management is resuscitation followed by explorative laparotomy
25. **All the statements regarding the obstructed hernia in a child are true except:**
26. Attempt reduction by using sedation and by Taxis.
27. Reduction should not be attempted pre operatively if Strangulated is suspected.
28. Immediate surgical operation is the first choice of management.
29. Delayed operation following successful reduction,to allow oedema of the sac to subside.
30. Torsion of an undescended testis may mimic the obstructed Hernia.
31. **Regarding rectal prolapse in children, all are true except:**
32. may associated with ectopic vesicae .
33. frequently associated with cystic fibrosis.
34. Differentiated from prolapsing rectal polyps.
35. May be presented with bleeding.
36. conservative treatment is useless
37. **A 60 year old female is diagnosed with a GIST tumor in the proximal stomach invading the diaphragm and spleen. Which of the following is the correct management?**
38. imatinib
39. radical total gastrectomy
40. resection of proximal stomach, diaphragm and spleen
41. sunitinib
42. neoadjuvant chemoradiation followed by radical total mastectomy
43. **Options of treatment in traumatic duodenal injury include the followings except:**
44. conservative management
45. primary closure
46. duodeno jejunostomy "Roux en y anastomosis
47. billroth II operation
48. whipple operation.
49. **The good prognosis regarding biliary atresia all the statements are true except:-**
50. Having surgery before 60 days of age .
51. Absence of portal hypertension.
52. Absence of fibrosis on liver biopsy.
53. Presence of cholengitis after surgery.
54. Clearing of jaundice after Kasai procedure.
55. **Amsterdam II criteria one is FALSE:**
56. Three or more family members with colorectal cancer or other associated cancers, one of whom is a first-degree relative of the other two
57. Three successive affected generations
58. At least one colorectal cancer diagnosed before the age of 50 years
59. Familial Adenomatous Polyposis excluded
60. Tumors verified by pathological examination
61. **A- 32- year old male presented to the emergency department 5 days after laparoscopic sleeve gastrectomy. He has not been quite well since, with epigastric pain, nausea, intermittent fevers and chills, and is unable to tolerate much oral intake. What investigation would be most helpful in the emergency department to diagnose his problem?**
62. gastroscopy
63. barium swallow
64. computed tomography
65. abdominal ultrasound
66. magnetic resonance cholangiopancreatography
67. **The best fluid replacement in case of class III hypovolemic shock is:**
68. Normal saline 0.9%
69. Lactated Ringer
70. Blood and blood products
71. Glucose saline 0.9%
72. Hypertonic saline 3%
73. **One of the followings is true in Crohn's disease:**
74. Is caused by Mycobacterium paratuberculosis.
75. Is more common in Asians than in Jews.
76. Tends to occur in families.
77. Is less frequent in temperate climates than in tropical ones.
78. Is improved by smoking.
79. **Which of the following is the most important initial step in management of a patient with acute pancreatitis?**
80. administer strong analgesia via an intravenous line
81. ensure the patient is given intravenous crystalloid fluid
82. determine the predicted severity by calculating the Glasgow score
83. commence broad‐spectrum antibiotics intravenously
84. arrange an urgent ERCP if the patient has a fever with rigours, cholestatic liver function tests and tenderness in the right upper quadrant
85. **All the statements related to Wilms' tumor are true Except:-**
86. Persistence of the varicocele when the child is supine.
87. May occur in Beckwith- Wiedemann syndrome.
88. Primary surgical resection followed by chemotherapy.
89. MRI shows the extension of the tumor to the intra-vascular.??????
90. Prevented cure when tumors are found in both kidneys.
91. **One day old newborn with nonbilious vomiting and failure to pass meconium, what is the diagnosis.**
92. Hypertrophic pyloric stenosis.
93. meconium ileus.
94. Congenital pyloric web.
95. malrotation.
96. Jejunal atresia.
97. **All the followings regarding Achalasia are true except :**
98. Both sexes are equally affected.
99. It is due to Myenteric plexus degeneration.
100. Intermittent dysphagia is prominent feature.
101. Barium swallow may be diagnostic.
102. can be treated by ballon dilatation
103. **All the statements related to uncomplicated Meconium ileus are true except:-**
104. Usually this is due to hyperviscous meconium.
105. Soap-bubble appearance with few if any fluid levels.
106. The diagnosis of cystic fibrosis should be confirmed.
107. Urgent Bishop- koop enterostomy operation.
108. Intravenous hydration with water soluble contrast enemas.
109. **Which of the following is the treatment of choice for a perforated duodenal ulcer in a 56‐year‐old man with a strong history of ulcer disease and signs of peritonitis after 12 hours?**
110. conservative management with nasogastric suction and intravenous fluids
111. vagotomy and pyloroplasty
112. omental patch repair and peritoneal lavage
113. highly selective vagotomy
114. partial gastrectomy
115. **The followings are among the preventive measures in surgical site infection except:**
116. prophylactic antibiotic is not necessary in thyroid surgery
117. hair removal just prior to surgery
118. prophylactic antibiotic given one hour befor surgery.
119. prophylactic antibiotic is not necessary in clean surgery using implants.
120. prophylactic antibiotics is enough in elective colonic surgery.
121. **All the followings are correct in damage control surgery except:**
122. multiple trauma patients are more liable to die from their intra operative metabolic failure than from failure to complete operative repair.
123. Those patients die from the triad of coagulopathy ,metabolic acidosis and hypothermia
124. The decision to apply damage control surgery is made on initial physiological status and assessment of internal injuries.
125. An important principle in damge control is control of hemorrhage ,prevention of contamination and protection from further injury.
126. Reoperation has to be done within 24 hours after 1st procedure.
127. **All of the following statements about the preparation and storage of blood components are true except?**
128. leukoreducion is needed for chronicly transfused patients.
129. Solutions containing citrate to prevent coagulation acts by binding calcium.
130. The shelf life of packed red blood cells preserved with CPDA -1 approximately   
     35 days at 4 C
131. There are a normal platelets in a stored blood at 4 C
132. The storage affect refrigerated blood by development of acidosis, hyperkalemia, and decreased intracellular 2,3DPG (diphosphoglycerate).
133. **All statements regarding orchidopexy are true except:-**
134. To repair an associated hernia.
135. Decrease the chance of malignant transformation.
136. Improve the spermatogenesis and future fertility.
137. Decrease the risk of direct violence to the testis.
138. Avoid the risk of torsion due to abnormal testis.
139. **Regarding choledochal cyst, all the statements are true except:-**
140. A cystic dilatation is seen in the common bile duct By ultra sound.
141. Bilobar caroli's disease is treatable only by Kasi procedure.
142. Excision with Roux-en-Y cholidocho-jejunostomy.
143. Hepato-imino-diacetic acid (HIDA) is used to demonstrate the communication of the cyst.
144. the (MRI) is an important pre- operative investigation.   
     **Which factor is most important in deciding whether a pancreatic adenocarcinoma is resectable?**
145. tumour size
146. tumour invasion of the portal vein
147. metastatic disease
148. enlarged peripancreatic lymph nodes
149. serum CA19‐9 levels
150. **According to Lauren System classification of gastric cancer the diffuse type has one of the following characteristic :**
151. Male predominance
152. More distal gastric tumor than proximal
153. Poorly differentiated, signet ring cells
154. Hematogenousspread
155. Increased E-cadhedrin
156. **Which of the following factors is most likely to be associated with a significant risk of re bleeding from a duodenal ulcer?**
157. no further bleeding within 72 hours of the initial bleed
158. a clean based ulcer seen on endoscopy
159. age less than 50 years
160. a visible vessel with adherent clot seen on endoscopy
161. the patient is female
162. **Curative surgery for high rectal tumor ( tumor is 13 cm from anal verge) with normal anal sphincter is :**
163. Anterior resection with mesorectal excision
164. Ultra low anterior resection with mesorectal excision
165. Abdominoperineal resection with permanent colostomy
166. Total proctocolectomy with permanent ileostomy
167. Abdominoperineal resection with permanent ileostomy
168. **An enlarged inguinal lymph node may result from primary pathology at the following sites EXCEPT:**
169. Anus
170. Big toe
171. TestiS
172. Scrotum
173. Buttocks
174. **You are planning a staged resurfacing of a 70% total body surface area burn. Which one of the following is correct?**
175. Split-thickness grafts initially obtain their nutrients through the process of inosculation.
176. Immune rejection is not a risk associated with cultured epidermal autografts.
177. Split-thickness grafts range in thickness from 5 to 30/10,000 of an inch.
178. Cultured epidermal autografts require 3 weeks to achieve a satisfactory cell expansion.
179. Split-thickness grafts have less secondary contraction than full-thickness grafts.
180. **which of the folowing is an epidermal cell responsible for increased skin uptake of melanin following sun exposure**
181. Merkel cell
182. Fibroblast
183. Langerhans cell
184. Melanocyte
185. Keratinocyte
186. **A 62-year-old postmenopausal woman with osteoporosis has a serum calcium level of 11.4 mg/dL, a serum phosphorus level of 2.0 mg/dL, and a 24-hour urine calcium excretion of 425 mg. Which of the following serum tests is most likely to establish the cause of her hypercalcemia?**
187. Chloride-phosphorus ratio
188. PTH-related polypeptide
189. Urine calcium clearance
190. Intact PTH level
191. A sestamibi scan
192. **Which of the following urine measurements help in the diagnosis of carcinoid syndrome:**
193. Ketone bodies
194. Metanephrine
195. VMA
196. Serotonin
197. 5-HIAA

1. **The clinical differential diagnosis of an ill defined mass with limited mobility in the breast include all of the following EXCEPT:**
2. Carcinoma
3. Fat necrosis
4. Plasma cell mastitis
5. Chronic breast abscess
6. Fibroadenoma
7. **The most dangerous complication after thyroid surgery is:**
8. Hypoparathyroid tetany
9. Hypothyroidism
10. Respiratory obstruction
11. Hoarseness of voice
12. Recurrence
13. **A 70 kg patient has sustained a high voltage electrical burn to the left lower limb and is admitted acutely to the burn center. A normal EKG was obtained on admission. Clinical observations are normal, but the involved limb is tense and painful, with intracompartmental pressures measured at 20 mm Hg. Urine output is 30 ml per hour but is colored dark brown. Which one of the following is correct?**
14. Urine output should be maintained above 75 ml per hour.
15. Bicarbonate and mannitol are contraindicated.
16. Fasciotomy is not indicated at present.
17. No further cardiac monitoring is required.
18. The urine discoloration indicates renal failure.
19. **In the initial 48 hours of acute pancreatitis all of the following are objective prognostic signs, EXCEPT:**
20. Hematocrite fall &gt;10%
21. Serum calcium level &lt; 8 mg %.
22. Serum proteins level &lt; 5 mg %.
23. PaO2 &lt; 60 mm Hg
24. Estimated fluid sequestration &gt; 6 ml .
25. **Regarding femoral hernia ONE of the following is CORRECT:**
26. Occurs only in women
27. Are the least dangerous variety of hernia
28. Lies medial to pubic tubercle
29. Usually lies below inguinal ligament
30. Most common hernia in females
31. **Gall stones are more common in persons having the following EXCEPT:**
32. Hemolytic Diseases
33. Crohns Disease
34. Truncal Vagotomy
35. Multiple Pregnancies
36. Hpoparathyroidism
37. **All of the following are true regarding chest injury EXCEPT:**
38. Tension pneumothorax is diagnosed and managed on clinical grounds
39. 500 cc haemothorax on initial drainage dictates thoracotomy
40. In flail chest, the major element of respiratory embarrassment is lung injury(contusion)
41. Success of managing lung contusion depends on early recognition
42. Traumatic pneumothorax always needs chest tube irrespective of its volume
43. **In total parenteral nutrition the recommended method to give the solution is through a:**
44. Central venous line
45. Peripheral arterial line
46. Nasogastric feeding tube
47. Peripheral venous line
48. Feeding jejunostomy tube
49. **A 22 Year old patient with a thermal injury is referred to you. The referring unit described the injury as a second degree burn. Which one of the following is correct regarding second-degree burns?**
50. Blistering is usually present.
51. Sensation is usually absent.
52. Capillary refill is rarely present.
53. The entire dermis is normally involved.
54. The skin appendages are completely destroyed.
55. **You see a 45 year old white patient in your office who has evidence of new onset, singledigit linear pigmented nail streak. You are concerned that this may be melanoma, and you perform a biopsy. With which melanoma subtype may this presentation be associated?**
56. Desmoplastic
57. Amelanotic
58. Ocular
59. Superficial spreading
60. Acral-lentiginous
61. **All of the following are causes of paralytic ileus, EXCEPT:**
62. Peritonitis
63. Abdominal trauma
64. Hypokalemia
65. Anemia
66. Excessive administration of ganglioblockers
67. **In era of COVID-19 with high patients load, one is FALSE :**
68. Risk reducing strategies as stoma rather than primary anastomosis
69. Treat all patient as being COVID-19 positive
70. Relay on laparoscopic procedure rather than open
71. Full personal protective equipment for all staff
72. Cholecystitis can be treated conservatively or by cholecystostomy
73. **A 65 year old woman undergoes breast conserving surgery ( a lumpectomy ) for a 0.4 cm tumor .the axillary lymph nodes are negative . which of the following is the next step in therapy ?**
74. No further therapy and observation
75. Combined chemotherapy such as the AC regimen
76. A redical mastectomy
77. Axillary radiation
78. **radiation therapy to the affected breast**
79. **A 40 years old lady with premenstrual breast pain , nipple discharge of variable color and the breasts are coarse nodular and tender , this lady probably has :**
    1. Acute mastitis
    2. duct ectasia
    3. Fat necrosis
    4. **Fibroadenosis of the breast**
    5. pagets disease of the breast
80. **Staging of breast cancer depends on the followings EXCEPT :**
81. a.size of the tumor
82. **b . character of nipple discharge**
83. presence of peau d orange sign
84. fixation to chest wall
85. ulceration of the over lying skin
86. **A 35 year old female presents with a 2.5 cm invasive ductal carcinoma . she has palpable axillary lymph node wich reveals cancer cells on cytology . the tumor is estrogen receptor negative . the most appropriate treatment is :**
87. redical mastectomy plus radiotherapy
88. wide local excision ,sentinel node biopsy plus tamoxifen
89. mastectomy and immediate reconstruction
90. **wide local excision ,axillary node clearance and chemotherapy**
91. modified radical mastectomy
92. **Signs in relation to the umbilics may be present in all of the followings EXCEPT:**
93. a.hemorrhagic pancreatits
94. portal hypertension
95. gastro intestinal malignancy
96. d.pilonidal sinus
97. **inflammatory bowel disease**
98. **A 75-year-old man complains of progressive dysphagia for 2 months. He has lost 4.5 kg in weight and can only tolerate a liquid diet esophageal cancer is suspected. Which of the following investigations is most likely to detect evidence of distant metastases from his cancer?**
99. upper endoscopy
100. endoscopic ultrasonography
101. **positron emission tomography ✔**
102. ultrasound with or without fine-needle aspiration of neck
103. CT scan
104. **A 36 year old woman presented to the clinic with a suspicious lump, confirmed on clinical examination Ultrasound and mammography reveal a benign appearing mass. What would be the most appropriate course of action?**
105. discharge from clinic
106. repeat imaging in 3 months c. repeat imaging in 3 years
107. **core biopsy of the lesion✔**
108. FNAC of the lesion
109. **A 39 year old woman has a 5 cm grade III breast cancer .twelve of 16 lymph nodes contain metastases. The estrogen and progesterone receptor is negative , and the HER2 is negative (non-amplified) . There is no evidence of systemic metastases on and bone scan . Following a total mastectomy and axillary clearance , the most likely follow up managment would be :**
110. .regular review , with reservation of chemotherapy for recurrent disease.
111. .adjuvant tamoxifen
112. Adjuvant chemotherapy alone .
113. Adjuvant chemotherapy and post mastectomy radiotherapy:heavy\_check\_mark::heavy\_check\_mark:
114. Oophorectomy
115. **A 57 year old woman presented with bloody nipple discharge from a single duct.the most likely diagnosis is :**
116. fibrocystic change
117. Intraductal papilloma:heavy\_check\_mark:
118. ductal carcinoma in situ
119. mammary duct ectasia
120. lobular carcinoma in situ
121. **A 51 year old woman undergoes wide local excision and sentinel node biopsy for a 15 mm grade 2 invasive duct cancer , margins clear , nodes negative , oestrogen receptor positive , HER2 Positive (amplified) what adjuvant therapy should be offered?**
122. radiotherapy only
123. radiotherapy and endocrine therapy
124. radiotherapy , chemotherapy , targeted anti HER2 therapy and endocrine therapy heavy\_check\_mark:
125. chemotherapy , radiotherapy and endocrine therapy
126. Chemothetapy only
127. **Which of the following is the proper management of a breast cyst with soft tissue element inside shown on us . Select one :** 
     1. Aspration and cytology examination
     2. Aspiration and follow up in 6 weeks :heavy\_check\_mark:
     3. Aspiration and reassurance
     4. Aspiration and schedule on an ordinary operative list .
     5. Schedule on a nearest operative list for excional biopsy .
128. **Right gastroepiploic artery is a direct branch of :**
     1. superior mesenteric artery
     2. splenic artery
     3. Celiac trunk
     4. hepatic artery
     5. gastroduodenal artery
129. **All the following statements are true of neonate with gastroschisis except :** 
     1. it is associated with malrotation
     2. there is prolonged adynamic ileus following repair
     3. staged procedure is performed by silo and delayed closure
     4. Myo-cutaneous mobilization flap as operative option
     5. the umbilical cord attached to the right side of the defect
130. **Familial Adenomatous Polyposis ( FAP ) , one is true :** 
     1. presence of more than 1,000 colorectal adenoma
     2. inherited as an autosomal recessive
     3. accounts for 1% or less of all colon cancer
     4. the risk of colorectal cancer is 80%
     5. congenital hypertrophy of the retinal pigment epithelium ( chrpe ) present in less than 5% of patients
131. **one statement is not true concerning the indications for inguinal hernia treatment :** 
     1. in elective surgery treating risk factors is a priority
     2. there is a direct correlation between the length of the time that the hernia is present and the risk of major complications .
     3. the morbidity and mortality associated with ergent operation due to hernia complications is a significantly greater than for elective repair of the identical hernia
     4. A truss one maintains a hernia in the reduced state , therefor , minimizing the risk of incarceration and strangulation
     5. hernioplasty sometimes pre-operatively determind as necessity choice
132. **Post total thyroidectomy complications in euthyroid patients include the followings except :**
     1. Tetany
     2. Hoarseness of voice
     3. Suffocation
     4. Thyrotoxic crisis
     5. myxedema
133. **Hepatic caudat lobe :**
134. drains directly into the inferior vena cava
135. represent sigment IV
136. is supplied by the left portal vein only
137. is supplied by right portal vein only
138. lies to the right of inferior vena cava
139. **You are asked to see an adult patient in the emergency room . On examination , the patient has a large burn to the left arm and thorax that involves almost all of the left upper limb and half anterior trunk . What is your estimate of burn extent ?**
140. 12%
141. 18%
142. 24%
143. 28%
144. 32%
145. **In wound dehiscence all are considered to be causes, except :**
146. anemia
147. Hypoalbuminemia
148. Ascites
149. chronic pulmonary disease
150. infection
151. **Which of the following describes a low risk SCC ?**
152. A tumor with depth of invasion of 4 mm
153. A recurrent tumor
154. A 2.5 cm diameter tumor
155. A tumor on the upper lip
156. A verrucous tumor subtype
157. **which segment of gastrointestinal tract is involving in the enterohepatic circulation in the bile salt :**
     1. duodenum
     2. proximal jejunum
     3. Terminal ileum
     4. Distal jejunum
     5. proximal ileum
158. **what is the embryonic origin of secondary palate ?**
159. Frontonasal prominence
160. Maxillary prominence
161. Medial nasal prominence
162. Lateral nasal prominence
163. Ophthalmic prominence
164. **50 years old patient with a 5 mm diameter pearly nodular lesion on the forehead which you suspect to be a BCC. it has well-defined borders and visibile telangiectasia . what peripheral excision margin should you see ?**
165. 2 mm
166. 4 mm
167. 12 mm
168. 8 mm
169. E 10 mm
170. **The following are features of the papillary thyroid carcinoma Except:**
171. multicentric and multifocal
172. spreads mainly by lymphatic
173. TSH dependent
174. among all thyroid cancers has the best prognosis
175. often occurs in elderly patients
176. **concerning thrombophlebitis all the following are correct except:**
177. there's usually in the  superficial vein
178. veins affected by varices or that canulated for transfusion are the usual victims of this condition
179. pain, redness, tenderness and hardness along the course of the involved veins are the usual  manifestations
180. spontaneous migratory thrombophlebitis may be a sign of visceral malignancy
181. pulmonary embolism is the usual sequel of this condition
182. **25 years old pregnant female present it to the emergency room with hypotension 60\30, tachycardia HR=150,  the most common ruptured aneurysm artery during pregnancy is:**
183. splenic artery
184. Celiac artery
185. hepatic artery
186. femoral artery
187. axillary artery
188. **Which transplant type best describes the transfer of tissues between unrelated members of the same species:**
189. autograft
190. xenograft
191. allograft
192. isograft
193. vascularized graft
194. **the most serious problem to consider with an electric burn is:**
195. shock
196. hypothermia
197. brain damage
198. cardiac dysrhythmia
199. associated with  flash burn
200. **for the following scenarios,  select the most appropriate peripheral surgical excision margin based on the current evidence.  Primary melanoma with breslow thickness of .9 mm:**
201. 1 mm
202. 5 mm
203. 1 cm
204. 2 cm
205. 3 cm
206. **hypocalcemia (  Total or ionized)  is encountered in surgical patients having the following except:**
207. acute  severe pancreatitis
208. total thyroidectomy
209. necrotizing fasciitis
210. obstructive jaundice
211. prolonged stomach Outlet obstruction
212. **all these  situations of acute appendicitis Harbor higher risk to develop diffuse peritonitis except:**
213. acute appendicitis in old age patients
214. acute appendicitis in immunocompromised patients
215. acute catarrhal appendicitis
216. free  lying pelvic appendix
217. previous abdominal surgery
218. **which one of the following represents a low-risk BCC:**
219. a 10 mm diameter BCC on the genitals
220. a 7 mm diameter BCC on the nasal tip
221. a 4 mmdiameter BCC on the hand with lymphovascular invasion
222. a 18 mm diameter BCC on the trunk
223. a 9 millimeter diameter micro nodular BCC on the thigh
224. **You are describing the risks and benefits of tissue expansion to a parent whose child requires excision  of a giant cell nevus  from the occipital skull. Which one of the following is the key advantage of tissue expansion for this child?**
225. the number of general anesthetic procedures is minimized
226. the number of hospital clinic visits is reduced
227. the reconstruction can be completed more quickly
228. the defect is more likely to be closed directly using hair-bearing skin flap
229. there is minimal functional and aesthetic  impact during the expansion  process
230. **32 years old woman comes to the clinic because of fatigue, generalized weakness,  And palpitations.  medical history is significant for hyperthyroidism and  Mild ophthalmopathy caused by Graves disease.  before initiating therapy, the patient wants to know what she can expect in the future. Advice and care about the  prognosis.  which of the following is the most accurate statement?**
231. Graves ophthalmopathy will resolve as thyroid hormone secretion is lowered
232. malignant degradation of the thyroid gland is a common complication
233. untreated patients are at increased risk for cardiac arrhythmias
234. thyroid will continue to increase in size with any non-surgical treatment
235. she will not be able to become pregnant
236. **Hepato cellular carcinoma is associated with the following except:**
237. bronchopleural fistula
238. secondary infection
239. hepatoma
240. spontaneous rupture
241. biliary fistula
242. **which of the following fistulas is most likely associated with metallic acidosis:**
243. gastric
244. small intestine
245. colon
246. pancreas
247. biliary
248. **a patient comes to the emergency department  following an assault,  an examination the following findings are present. Which of them is pathognomic of mandibular fracture?**
249. Malocclusion
250. mental nerve paresthesia
251. ecchymosis on the floor of the mouth
252. trismus
253. loose teeth
254. **73 years old man presents with cholangitis.  no previous history of any abdominal  operation.  the Definitive treatment should be:**
255. cholecystectomy and choledocholithotomy
256. ERCP and  sphincterotomy with a stone extraction
257. antibiotics therapy followed by  laparoscopic cholecystectomy
258. choledocholithotomy
259. ERCP, sphincterotomy with stone extraction and later consideration of cholecystectomy
260. **the treatment of  penetrating colon injury which of the following has the least influence in the development of intra-abdominal complication:**
261. Severe fecal contamination
262. use of Diverting colostomy
263. blood transfusion more than 4units/25 hours
264. delay in therapy after 8 hours
265. shock at admission
266. **peptic ulcer can occur at the following sites except:**
267. lower end of the esophagus
268. pyloric canal
269. duodenum bulb
270. Michael's diverticulum
271. jejunum
272. **clinical Features of abdominal compartment syndrome following multiple traumas patient include the following except:**
273. tachycardia
274. low urine output
275. elevated CVP
276. the elevated abdominal pressure can be measured by Foley's catheter
277. intra-abdominal pressure above 10 cm h2o is  diagnostic
278. **all the statements are true in the management of a child with caustic ingestion except:**
279. establish the patency of Airway
280. arrange endoscopy for esophagus is necessary within 24 to  48 hours. in every suspected case
281. perform esophagogram within two to three weeks after ingestion
282. insert nasogastric tube for gastric wash
283. perform chest and abdominal X-ray on arrival
284. **an 18 years old man has blunt abdominal trauma. is hemodynamically and neurogically stable.  because of increasing abdominal pain, CT scan was ordered and showed a 3 cm liver tear,  his hematocrit was 36% on admission,  dropped to 34% after 2 hours . most appropriate management now  would be:**
285. admit to ICU and observe
286. immediate laparotomy
287. immediate arteriography and possible embolization
288. aggressive fluid resuscitation ( 3-5 L of crystalloid in 30 minutes)
289. diagnostic peritoneal lavage
290. **what is the indication of surgical exploration in newborn baby with necrotizing  enterocolitis?**
291. subserosal gas in abdominal x-ray film
292. Presence of portal vein gas in x-ray film
293. clinical deterioration ( Progressive acidosis)
294. massive rectal bleeding
295. thrombocytopenia
296. **What is the following about  helicobacter pylori  is false:**
297. gram-positive bacteria
298. microaerophilic bacteria
299. reduce duodenal bicarbonate
300. increase gastrin level
301. decrease somatostatin release
302. **the Glasgow Coma Scale a patient who sustained a direct head trauma with the following parameters;  opening of the eyes to pain, localize pain and have inappropriate words replies is:**
303. 10
304. 11
305. 9
306. 8
307. 12
308. **which is unusual complication among the following in Crohn's disease?**
309. intestinal obstruction
310. perforation
311. entero cutaneous fistula
312. perianal suppuration
313. massive hemorrhage
314. **extraintestinal manifestations of ulcerative colitis include the following except:**
315. pyoderma gangrenosum
316. iritis
317. sacroiliitis
318. sclerosing cholangitis
319. eczema
320. **all the following are surgical options in treatment of bleeding esophagus varices except:**
321. esophageal transection and  suturing
322. TIPS
323. surgical  portacaval shunt
324. liver transplant
325. distal esophagotomy
326. **30 years old patient with ulcerative colitis is  brought to the emergency ward suffering with severe abdominal pain. diagnosis of toxic megacolon is  Made.  the most suitable surgical treatment is:**
327. proctocolectomy with ileostomy
328. subtotal colectomy and ileostomy
329. proctocolectomy with ileal pouch
330. Hartmann's procedure
331. transverse colostomy
332. **in acute cardiac tamponade,  all the following are correct except:**
333. it may occur after injuries of cardiac surgery
334. it produces a shock like state
335. the cardiac dullness is enlarged
336. the regular venous pressure is lowered down with collapsed neck veins
337. immediate Relief by aspiration or exploration must be done
338. **what was the main limitation of the original reconstructive ladder Concepts?**
339. that it did not include free tissue transfer
340. that the concept could only be  practiced by plastic surgeons
341. that it did not include dermal matrices or negative pressure therapy
342. that the reconstructive process was performed in a  stepwise manner
343. That primary closure was the first rung on the ladder
344. **which of the following is not treatment for liver metastases?**
345. arterial chemoembolization
346. ablation
347. laparoscopic resection
348. open resection
349. portal venous chemoembolization
350. **regarding  paraphimosis,  all of the statements are true except:**
351. the foreskin is not replaced after retraction
352. the preputial becomes light
353. a similar condition may occur as a complication of the plastibell clamp
354. the foreskin is ballooning during  micturition
355. The glans swells leading to pain and Vascular compromise

**4rth year – 2020**

1. **Three days after a myocardial infarction with cardiogenic shock, a 75‐year‐old man develops abdominal pain and distension. The abdomen is slightly tender with reduced bowel sounds. A plain abdominal X‐ray shows distended small bowel without fluid levels. Blood tests reveal a metabolic acidosis. The most likely diagnosis is:**

a. perforated peptic ulcer

b. mesenteric ischaemia

c. pseudo‐obstruction of the colon

d. acute pancreatitis

e. diverticulitis

1. **Which of the followings is the least used in the diagnosis of intra abdominal bleeding following blunt trauma**

a. repeated clinical exam.

b. DPL diagnostic peritoneal lavage

c. FAST

d. CT

e. MRI

1. **Regarding acute scrotum, all the statements are true except:-**

a. The diagnosis can be confirm by ultrasound with color Doppler.

b. urgent exploration is required if in doubt for diagnosis.

c. strangulated hernia required urgent surgery.

d. Epididmo-orchitis required exploration. ??

e. Testicular torsion is the commonest cause.

1. **All the statement are true in case of Congenital diaphragmatic hernia Except:-**

a. Result from failure of the pleuro-peritoneal canal.

b. Air entry is reduced on the affected side.

c. Flat abdomen on examination..

d. Avoid naso-gastric tube administration.

e. Avoid ambo- bag on respiratory resuscitation?

1. **Which of the following is the appropriate investigation in a patient presenting with a recent episode of right upper quadrant pain and a normal physical examination?**

a. abdominal CT scan

b. ERCP

c. plain X‐ray of the abdomen

d. upper abdominal ultrasound

e. cholescintigraphy

1. **The commonest cause of large bowel obstruction is:**

a. external hernia

b. sigmoid volvulus

c. neoplasm

d. adhesions

e. diverticular disease

1. **Most common site of Gastrointestinal Stromal Tumor (GIST) is :**

a. Stomach

b. Duodenum

c. Jejunum

d. Ileum

e. Rectum

1. **The common complication of the thyroglossal cyst is:-**

a. Haemorrhage.

b. Respiratory distress.

c. Infection. ?

d. Dysphagia.

e. Excessive salivation

1. **In inguinal lymphadenopathy you must look at all the following areas as possible primary cause except**

a. Lower limb

b. scrotum

c. testis

d. Lower abdominal wall

e. perineum

1. **A 3 days old baby has bile stained vomiting since birth,What is the most likely diagnosis.**

a. Congenital pyloric web.

b. Congenital hypertrophic pyloric stenosis.

c. Duodenal atresia.

d. Esophageal atresia.

e. Sliding type hiatus hernia.

1. **Commercially available screening tools for colorectal cancer in average risk population include all of the following EXCEPT:**

a. Colonoscopy

b. Fecal occult blood

c. Stool DNA testing

d. Double-contrast barium enema

e. CT colonography

1. **One of the following about post gastrectomy,Early Dumping Syndrome is false :**

a. Desire to lie down 15 minutes after meal

b. Symptoms caused by uncontrolled emptying of hypertonic fluid into small intestine

c. Patients suffer from acute intravascular volume depletion

d. Somatostatin analogue, may be of benefit

e. Most commonly encountered with Roux en Y reconstruction

1. **Regarding intussusception all the statements are true Except:-**

a. Palpable sausage shaped mass in the abdomen.

b. May be the presenting feature of intestinal lymphoma.

c. Urgent surgery is the best choice of treatment.

d. The red currant jelly stools are a frequent finding.

e. The diagnosis is confirmed by ultrasonography

1. **Regarding Infantile hypertrophy pyloric stenosis all are true,Except:-**

a. None bile stain vomiting.

b. Visible Peristalsis waves.

c. palpable olive like mass at the epigastric area.

d. Pyloroplasty is the operation of choice.

e. The ultra sound is the diagnostic means

1. **Plain radiographic findings suggestive of splenic injury include except:**

a. left lower rib fracture

b. left hemidiaphragm elevation

c. left lower lobe atelectasis,

d. Kehr's sign.

e. Left pleural effusion

1. **Regarding the midline pathology in the neck, all are true except:-**

a. Dermoid cyst.

b. Branchial cyst.

c. Plunging ranula.

d. Thyroglossal cyst

e. Ectopic thyroid

1. **A 48‐year‐old woman presents with thick greenish nipple discharge from both breasts. There is no palpable breast lump, although both nipples are slightly retracted. The patient does not take any medication. Mammogram and ultrasound do not show any evidence of cancer. The most likely diagnosis is:**

a. galactorrhoea

b. duct papilloma

c. mammary duct ectasia

d. fibroadenoma

e. lobular carcinoma in situ

1. **Most common site of metastasis in colorectal cancer is:**

a. Liver

b. Lung

c. Bone

d. Adrenal

e. Brain

1. **All the statements about the Hirschprung's disease are true except :-**

a. There are no ganglion cells in the myenteric plexus.

b. The dilated proximal bowel has no ganglion cells.

c. The entrocolitis is an important potential cause of mortality.

d. It may involve the small intestine.

e. Contrast enema identifies the transition zone

1. **The following pathological features seen in ulcerative colitis except**

a. The mucosa is edematous &amp; congested

b. undermind ulcer

c. crypt abscess

d. hyperplastic polyps.

e. coubble stone appearance

**one statement is true regarding Mallory-Weiss** **syndrome :**

a. It is one of the common causes of severe upper GI bleeding

b. it occurs as a complication of reflux esophagitis

c. the underlying pathology is defective Lower esophageal sphincter

d. It can be diagnosed by CXR up right position.

e. usually treated conservatively

1. **Shock is best described as :**

a. Inadequate tissue perfusion to vital organs

b. Inadequate tissue perfusion and oxygen delivery to vital organs

c. Systolic blood pressure less than 90 mmHg

d. Mean arterial pressure less than 60 mmHg

e. Central venous pressure less than 8 mmHg

1. **A 22‐year‐old gentleman undergoes a laparoscopic appendectomy for appendicitis. The operation is difficult and the appendix is found to be perforated and 200 mL of pus aspirated from the abdominal cavity. The patient cannot urinate easily postoperatively and requires a urinary catheter for 24 hours. He is kept on intravenous antibiotics for 3 days and then discharged home on a 5‐day course of oral antibiotics. Three days after discharge he goes to see his family doctor complaining of persistent diarrhea. Which one of the following is the most likely diagnosis?**

a. Resolving paralytic ileus

b. Prostatitis

c. Clostridium difficile enteritis

d. Leakage from the appendix stump

e. Urinary tract infection

1. **The most specific symptom associated with pancreatic adenocarcinoma is:**

a. weight loss

b. painless jaundice

c. epigastric pain

d. right upper quadrant pain, jaundice and fever

e. back pain relieved by leaning forwards

1. **One of the followings is not true concerning hydatid disease of the liver :**

a. sex and race has no relation to epidemiology

b. Echinococcus granulosus is the commonest species

c. The route of infestation is via oral route

d. surgery is the first choice in treating all sites of cysts.

e. Sanitation and vet. control is the denominator in epidemiology

1. **Which of the following is not a contraindication for bariatric surgery?**

a. severe cardiac disease

b. untreated major depressive disorder

c. inability to comply with nutritional changes and requirements

d. obstructive sleep apnoea

e. current alcohol dependence

1. **Abdominal tenderness can be pronounced in all of the following conditions except**

a. Perforated duodenal ulcer

b. Acute appendicitis

c. Acute cholecystitis

d. Diverticulitis

e. pelvic abscess

1. **Concernning malig. tumour of small intestine the followings are true except:**

a. As common as large bowel tumour.

b. 40% of the malignant tumours of small intestine are adenocarcinoma

c. similar to adenocarcinomas of the colon, it is mostly arises from premalignant adenomas.

d. occurs frequently in the proximal small bowel

e. synchronous malignant tumor is seen

1. **Cholangiocarcinoma is most commonly found:**

a. in the periphery of the liver

b. in the gallbladder

c. at the biliary confluence (Klatskin tumour)

d. in the distal bile duct

e. in the duodenum

1. **The following are causes of intestinal obstruction in the neonates except:-**

a. Meconium Ileus.

b. Hirschprung's disease.

c. Duodenal atresia.

d. Intussusception.

e. Colonic atresia

1. **One of the following is part of systemic inflammatory response:**

a. Temperature 37.8 Celsius

b. Heart rate 85 beat per minute

c. Temperature less than 36 Celsius

d. Respiratory rate 18 breath per minute

e. Urine output 0.5 ml per Kg per hour

1. **Right iliac fossa pain and nausea in a 62‐year‐old woman may be due to the following except:**

a. acute appendicitis

b. caecal cancer

c. urinary tract infection

d. Mittelschmerz pain

e. sigmoid diverticulitis

1. **With a perforation of a duodenal ulcer which occurred 6 hours ago, which of the following features is least likely to be present?**

a. generalized abdominal tenderness and guarding

b. the bowel sounds are hyperactive

c. percussion over the liver may demonstrate resonance

d. the respiration is shallow and the abdominal muscles are held rigid

e. plain radiograph shows free gas under the diaphragm

1. **The most aggressive biliary tumor with the shortest overall survival rate is:**

a. gallbladder cancer

b. biliary cystadenoma

c. hepatocellular cancer

d. Caroli’s disease

e. distal cholangiocarcinoma (dCCA)

1. **In necrotizing enterocolitis, all the statements are true Except:-**

a. Subserosal air on abdominal films.

b. The most common site is in the terminal ileum.

c. Pneumoperitonium.

d. Thrombocytopenia..

e. Always treated by laporatomy

1. **A 72‐year‐old woman presents with left iliac fossa pain and is found to have a fever and left iliac fossa peritonism. The most likely diagnosis is:**

a. left ureteric calculus

b. tubo‐ovarian abscess

c. irritable bowel syndrome

d. acute diverticulitis

e. sigmoid volvulus

1. **Chronic pancreatitis most often presents with:**

a. weight loss

b. steatorrhoea

c. diabetes mellitus

d. fractures

e. recurrent epigastric pain

1. **A- 52- year old male, who is known to have right inguinal hernia for the last 3 months, presented to the ER at 1:00 a.m. complaining of severe pain over the hernia for the last 3 hours associated with nausea, vomiting, generalized colicky abdominal pain. Physical examination showed severe tenderness over a right inguinal hernia which was tense and irreducible and with no cough impulse. The most likely diagnosis is:**

a. Intestinal perforation

b. Strangulated hernia

c. Obstructed hernia

d. Inflamed hernia

e. Incarcerated hernia

1. **The most common post-operative open appendectomy complication is :**

a. Surgical site infection

b. Enterocutaneous fistula

c. slipped ligature at the mesoappendix

d. Deep venous thrombosis

e. Portal pyaemia (pylephlebitis)

1. **The Glasgow Coma Scale (GCS) for patient who sustained a direct head trauma with the following parameters; opening of the eyes to verbal command, abnormal flexion in response to painful stimulus and have inappropriate words replies is :**

a. 10

b. 11

c. 9

d. 8

e. 12

1. **Left Gastroepiploic artery is a direct branch of :**

a. Superior mesenteric artery

b. Splenic artery

c. Celiac trunk

d. Hepatic artery

e. Gastroduodenal artery

1. **The massive rectal bleeding in children is due to:-**

a. Anal fissure.

b. Juvenile polyps.

c. Rectal prolapse.

d. Meckel's diverticulum.

e. Intussusception

1. **According to the Intercollegiate General surgery Guidance on COVID-19, in theater :**

a. Minimum number of staff

b. Appropriate personal protective equipment for all staff

c. Smoke evacuation for diathermy

d. Avoid positive pressure ventilation

e. Higher risk patients are intubated and extubated outside theatre

1. **Storage of platelets for transfusion should be at :**

a. 10 c

b. - 20c

c. 24 c

d. 4 c

e. 0 c

1. **The followings are possible presentation of GERD except:**

a. Laryngitis

b. Esophageal stricture which usually occurs at its middle 1/3

c. Dysplasia with malignant transformation

d. Pulmonary complications

e. Upper GI bleeding

1. **Regarding rectal prolapse in children, all are true except.**

a. Associated with sacral agnesis.

b. Can be the presenting sign for cystic fibrosis.

c. Differentiated from prolapsing rectal polyps.

d. Complicated by ulceration.

e. Presented by massive bleeding.

1. **Regarding gastroschiasis all are true except:-**

a. Emergency operation is required.

b. The defect is in the abdominal wall.

c. The bowels are thick and oedematous.

d. The umbilical cord out side its normal place.

e. Staged closure to avoid compartment syndrome.

1. **The statement regarding tracheo-oesphageal atresia with out Fistula are true except:-**

a. Excessive salivation.

b. Rattling respiration.

c. Abdominal distention.

d. Choking and cyanosis during feeding.

e. Abdominal x-ray shows no air in the stomach.

1. **Regarding anal fissure all are true except :**

a. A common cause of non-healing is persistent spasm of the internal anal sphincter muscle

b. Conservative treatment have a high success rate .

c. The most common location of anal fissure in women is midline posteriorly below dentate line

d. Few of patients with Crohn's disease will have an anal fissure as the first manifestation .

e. Fissurectomy is the surgical treatment of choice.

1. **All the following are related to scrotal pathology except :-**

a. Primary vaginal hydrocele.

b. Torsion testis.

c. Epididmo orchitis.

d. Communicating hydrocele.

e. Bubonocele type of hernia.

1. **Which segment of gastro-intestinal tract is involving in the entro-hepatic circulation in the bile salt:**

a. Duodenum

b. Proximal Jejunum

c. Terminal ileum

d. Distal jejunum

e. proximal ileum

1. **Which of the following is most common malignant Liver tumor**

a. Hepato cellular carcinoma

b. Secondary Liver metathesis

c. Cholangiocarcinoma

d. Hepatoblastoma

e. Angio-sarcoma

1. **Which one of the following is the correct resuscitation volume for a 95 kg patient with 42% TBSA burns (using the modified Parkland formula)? The patient had 3 L before arrival at the burn unit, and the burn occurred 4 hours ago.**

a. 1250 ml per hour for 4 hours, then 500 ml per hour for 16 hours

b. 1000 ml per hour for 8 hours, then 400 ml per hour for 16 hours

c. 1000 ml per hour for 4 hours, then 500 ml per hour for 16 hours

d. 1500 ml per hour for 4 hours, then 500 ml per hour for 16 hours

e. 750 ml per hour for 12 hours, then 580 ml per hour for 12 hours

1. **Which of the following is false about inhalation injury in burn patients?**

a. A chest x-ray obtained within 24 hours of injury is an accurate means of diagnosis.

b. Its presence characteristically necessitates administration of resuscitation fluids in excess of estimated volume.

c. When moderate or severe, it exerts a comorbid effect that is related to both extent of burn and the age of the patient.

d. It increases the prevalence of bronchopneumonia.

e. Prophylactic high-frequency ventilation reduces the occurrence of pneumonia and the mortality in burn patients with inhalation injury.

1. **The symptoms of acute lower limb ischemia are the following ,Except**

a. Pain

b. Paresthesia

c. Pulselessness

d. Cyanosis

e. Paralysis

1. **Concerning thrombophlebitis all of the following are CORRECT, EXCEPT:**

a. It occurs usually in the superficial veins

b. Veins affected by varices or that canulated for transfusion are the usual victims of this condition

c. Pain, redness, tenderness and hardness along the course of the involved vein are the usual manifestations

d. Spontaneous migratory thrombophlebitis may be a sign of visceral malignancy

e. Pulmonary embolism is the usual sequela of this condition

1. **When requesting imaging of a patient after an isolated mandibular fracture, which one of the following is true?**

a. A panoramic radiograph alone provides adequate views of the fractured mandible.

b. CT imaging is commonly required to confirm the fracture sites involved prior to stabilization.

c. CT is preferable for imaging in most cases.

d. The single best radiograph for mandibular screening is the panoramic view.

e. Imaging will confirm diagnosis of sensory nerve damage.

1. **All of the following are true about paraumbilical hernia ,EXCEPT**

a. It may close spontaneously

b. It can be multilobulated

c. Strangulation is common

d. Repair in the presence of ascites is contraindicated

e. More in common in Women

1. **In severe acute pancreatitis Ranson prognostic criteria include,values of the following EXCEPT:**

a. Serum Bilirubin

b. White blood cell count

c. Serum calcium

d. Blood glucose

e. Serum LDH

1. **Patient came to the ER following RTA, he can’t feel anything from the nipple down, the spinal injury is at what level?**

a. T4

b. T5

c. T6

d. T7

e. T11

1. **A 70 kg patient has sustained a high voltage electrical burn to the left lower limb and is admitted acutely to the burn center. A normal EKG was obtained on admission. Clinical observations are normal, but the involved limb is tense and painful, with intracompartmental pressures measured at 20 mm Hg. Urine output is 30 ml per hour but is colored dark brown. Which one of the following is correct?**

a. Urine output should be maintained above 75 ml per hour.

b. Bicarbonate and mannitol are contraindicated.

c. Fasciotomy is not indicated at present.

d. No further cardiac monitoring is required.

e. The urine discoloration indicates renal failure.

1. **The most commonly affected area of the heart in penetrating trauma is:**

a. coronary artery

b. Rt ventricle

c. Lt ventricle

d. Rt atrium

e. Lt atrium

1. **An 18 years old man has blunt abdominal trauma. He is haemodynamicaly and neurologically stable. Because of increasing abdominal pain a CT scan was ordered and showed 3cm liver tear. His hematocrit was 36% on admission dropped to 34% after 2 hours. The most appropriate management now would be**

a. admit to ICU &amp; observe

b. Immediate laparotomy

c. Immediate arteriography &amp; possible embolization ?

d. Aggressive fluid resuscitation [3-5 liters of crystalloids in 30 minutes]

e. Diagnostic peritoneal lavage

1. **Most common pituitary adenoma is the one secreting**

a. Growth hormone

b. A.C.T.H

c. F.S.H

d. Vasopressin

e. Prolactin

1. **The embryologic origin of the Primary palate is :**

a. Frontonasal prominence

b. Maxillary prominence

c. Medial nasal prominence

d. Mandibular prominence

e. Lateral nasal prominence

1. **Blood loss of 1000 ml can cause which class of hypovolemic shock:**

a. Class I

b. Class II

c. Class III

d. Class IV

e. Class V

1. **All of the following are manifestations of internal hemorrhage, EXCEPT:**

a. Progressive pallor

b. Progressive hypotension

c. Progressive bradycardia

d. Rapid respiration

e. Cold extremities

1. **When examining a patient with an abnormally thickened scar, what is the key factor that will differentiate a keloid from a hypertrophic scar?**

a. Elevation of the scar

b. Erythema within the scar

c. Growth beyond the original wound borders

d. A biopsy of the scar tissue is the only way to differentiate

e. The shape of the scar

1. **Which of the followings is the proper management of a breast cyst with soft tissue element inside shown on US.**

a. Aspiration and cytology examination

b. Aspiration and follow up in 6 weeks

c. Aspiration and reassurance

d. Aspiration and schedule on an ordinary operative list

e. Schedule on a nearest operative list for excional biopsy

1. **In obstructive jaundice coagulopathy is due to deficiency of the following clotting factors EXCEPT:**

a. Factor two

b. Factor seven

c. Factor eight

d. Factor nine

e. Factor ten

1. **The cardiac index for a 50 year-old patient with body weight (80kg), body surface area (2.5 m2) and cardiac output (4 L/min) is:**

a. 1.6

b. 0.05

c. 20

d. 10

e. 12.5

1. **Which of the following thyroid malignancy has the best prognosis:**

a. Medullary

b. Follicullar

c. Papillary

d. Lymphoma

e. Anaplastic

1. **Which one of the following is an advantage of using an autograft?**

a. Reduced duration of surgery

b. Good tolerance and incorporation

c. Avoidance of a donor site

d. Limitless tissue quantity

e. Reduced early morbidity

1. **Regarding femoral hernia ONE of the following is CORRECT:**

a. Occurs only in women

b. Are the least dangerous variety of hernia

c. Lies medial to pubic tubercle

d. Usually lies below inguinal ligament

e. Most common hernia in females

1. **Which of the following thyroid malignancy is part of MEN2?**

a. Papillary

b. Follicular

c. Medullary

d. Anaplastic

e. Lymphoma

1. **The most common site for distal metastasis of breast cancer is**

a. Liver

b. Lung

c. Bone

d. Brain

e. Soft tissues

1. **Causes of Failure of spontaneous closure of enter cutaneous fistula are the following, EXCEPT**

a. Distal obstruction

b. Underlining malignancy

c. Epithelization of the fistula lumen

d. Long and tortuous fistula tracked

e. Inflammatory bowel disease

1. **Gall stones are more common in persons having the following EXCEPT:**

a. Hemolytic Diseases

b. Crohns Disease

c. Truncal Vagotomy

d. Multiple Pregnancies

e. Hpoparathyroidism

1. **The most common hernia in women is:**

a. femoral hernia

b. obturator hernia

c. inguinal hernia

d. umbilical hernia

e. spigelian hernia

1. **Which statement is not true regarding of appendicular mass:**

a. It result due to delayed or mis-diagnosed acute appendicitis

b. The diagnosis is reached by clinical and imaging means

c. The standard treatment is the conservative Ochsner – Sherren regimen

d. Persistent of high fever in spite of medical treatment for 48 hrs, suggests abscess formation

e. Urgent appendicectomy is mandatory

1. **The commonest extranodal primary site for non-Hodgkin's lymphoma is:**

a. Esophagus

b. Stomach

c. Duodenum

d. Jejunum

e. Rectum

1. **All are associated with primary hyperparathyroidism EXCEPT:**

a. Renal stones

b. Osteitisfibrosacystica

c. Peptic ulcer disease

d. Pancreatitis

e. Diarrhea

1. **Which one of the following factors most frequently increases the risk of developing an SCC squamous cell carcinoma ?**

a. Fitzpatrick skin types I and II

b. Sun exposure

c. Arsenic and hydrocarbons

d. Human papilloma virus

e. Immune suppression after transplant surgery

1. **The usual early complications of acute pancreatitis is:**

a. Hyperglycemia

b. Hypovolemia Shock

c. ARDS

d. Hypocalcemia

e. Renal failure

1. **Clinical features of abdominal compartment syndrome following multiple trauma patient include the followings except**

a. tachycardia

b. low urine output

c. elevated CVP

d. The elevated abdominal pressure can be measured by folys catheter

e. Intra abdominal pressure above 10 cm H20 is diagnostic. ?

1. **Which one of the following is performed at the time of primary lip repair?**

a. Full rhinoplasty

b. Tip rhinoplasty

c. Palatoplasty

d. Primary alveolar bone grafting

e. Correction of a whistle tip deformity

1. **When reviewing the histopathology report of a melanoma specimen, what is the single most important histologic prognostic factor for the patient?**

a. Mitotic count

b. Ulceration

c. Perineural invasion

d. Breslow thickness

e. Clark’s level

1. **In breast abscess all are true EXCEPT**

a. Most common during lactation

b. Staph. Aureus bacteria is the dominant causative organism

c. It is usually ascending infection from the nipple

d. Lactating patients must be advised to stop milking or pump the affected breast

e. Early recognition and drainage is the treatment of choice

1. **Regarding inguinal hernia which of the following is not true**

a. In children it is more common on the right side

b. In elderly patients it is usually a direct hernia

c. Strangulation is more common in the direct hernia

d. When the hernia is sliding it may not be reduced completely

e. Herniorraphy include strengthening of the posterior wall of the inguinal canal

1. **A patient was diagnosed with cecal cancer, which of the following would use to follow up?**

a. CEA

b. CA19-9

c. CA125

d. BRAC1

e. BRAC2

1. **In total parenteral nutrition the recommended method to give the solution is through a:**

a. Central venous line?

b. Peripheral arterial line

c. Nasogastric feeding tube

d. Peripheral venous line

e. Feeding jejunostomy tube

1. **Staging of breast cancer depends on the followings EXCEPT**

a. Size of the tumor

b. Character of nipple discharge

c. Presence of peau d"orange sign

d. Fixation to chest wall

e. Ulceration of the over lying skin

1. **All are true of pheochromocytoma EXCEPT:**

a. It is a cause of sustained or paroxysmal hypertension

b. Majority are malignant tumors

c. Maybe part of MEN2

d. Measurement of urine VMA is part of the diagnostic workup

e. Extra adrenal origins are known sites

1. **A 25 years old pregnant female presented to the emergency room with hypotension (60/30).tachycardia (HR=150),the most common ruptured aneurysmal artery during pregnancy is:**

a. splenic artery

b. celiac artery

c. hepatic artery

d. femoral artery

e. axillary artery

1. **All the statements about massive blood transfusion are correct except:**

a. ABO incompatability gets more frequent

b. Induced hypothermia might cause cardiac arrest.

c. Hypocalcemia is significantly occured

d. Hyperkalemia is one of its metabolic complication.

e. Dilutional thrombocytopenia is a major cause of bleeding.

1. **Complications associated with acute pancreatitis include the following,EXCEPT**

a. Retro Peritoneal Hemorrhage

b. Splenic vein thrombosis

c. Hypoglycemia

d. Hypocalcemia

e. Left Pleural effusion

1. **Hereditary Pheochromocytoma can be associated with all the following except:**

a. Para thyroid hyperplasia

b. Multiple mucosal neuromas

c. Medullary carcinoma of thyroid

d. Neurofibromas

e. Gastrinomas

1. **In anal fissure all are true EXCEPT**

a. Most patients have high resting anal pressure

b. Occurs equally in both sexes

c. Majority are in midline posteriorly

d. Laterally situated fissure has no clinical significance

e. Chronic fissure is associated with sentinel pile

1. **Which one of the following most accurately defines whether primary or secondary healing occurs within a cutaneous wound?**

a. The mechanism of injury

b. The amount of tissue damage

c. The time healing takes to occur

d. The method of wound closure

e. How closely the wound edges are apposed

1. **Diabetic foot is characterized by the presence of the following EXCEPT**

a. Peripheral ischemia

b. Often painful ulcers

c. Osteomylitis

d. Gas forming bacteria

e. Charcot joints

**Final Exam 4Th 2019 Ihsan**

1. **Most common part injury in penetrating traum:**
2. Coronary artery
3. Right ventricle
4. Right atrium
5. left ventricle
6. Left atrium
7. **anuerysm rupture in pregnancy;**
8. Splenic artery
9. celiac artery
10. hepatic
11. Femoral
12. Axillary artery
13. **Somatostatine is secreted by:**
14. Parital cell
15. Cheif cell
16. G cell
17. D cell
18. S cell
19. **most common cause of bloody nipple discharge :**

intra ductal papilloma

1. **patient undergo bariatic surgery , after few days he come with tachycardia ,tachypnea and hypotention then tachycardia get worse ,proper diagnosis is:** 
   1. Bleeding
   2. Anastomic leak
2. **most common cause of bleeding per rectum in 50 years pt:**

colon cancer

في سؤالين كانه اللي فيه العمر خمسين اتوقع colon cancer

اللي فيه most common lower gi bleeding بكون diverticulosis

1. **Acute pancreatitis is associated with all of the following except;**
2. Decrease in hematocrit ??
3. Increase in hematocrit
4. Calcification
5. hyper parathyroid ??
6. E. Non of the above
7. **Most common organism causing overwhelming sepsis post splenectomy**
8. Coxeilla
9. E coli
10. Pneumococcus
11. Psuedomonas
12. **All of the following cause massive lower gi bleeding in neonate except:**
13. Peutz jegher
14. Juvenile polyp
15. Esophageal vaices due to portal hypertension
16. Necrotizing enterocolitis
17. Mickles diverticulum
18. **True about branchial cyst;**
19. Occure mainly in neonate ???
20. On midline of the neck
21. Between upper and middle third of anterior border of sternomastoid
22. Arise from 6th branchial cleft
23. Contain clear fluid
24. **Wrong about pheochromcytoma:**
25. 10% malignant
26. Most of it benign
27. 10% bilateral
28. Cause hypertension
29. Occur in MEN 1
30. **Wrong about insulinoma:** 
    1. Pancreaticoduodenoctomy
    2. Whipple triad
    3. Distributed evenly in the pancrease
    4. mainly sporadic
31. **Collar stud abscess?**

Tuberculous lymphadenitis

1. **Cardiac index ??**

=1.6

1. **Type of Collagen in wound healing ?**  
   Type 3
2. **Appendix in preschool?**
3. other causes of vomiting
4. risk of perforation
5. short omentum
6. -not developed omentum
7. **All symptoms in acute appendicitis are not common except**
8. - hypogastric pain shifted to RIF
9. - lower abdominal pain and right quadrant tenderness
10. - wbc > 16000
11. - soft stool
12. **Gastric carcinoma?**

High socioeconomic level

1. **Fap ?**
2. -100 % colon cancer
3. -100 polyp
4. - 15% of colon cancer
5. **humeral hypercalcemia**

lung

1. **volvulus occur everywhere except**
2. - stomach
3. - sigmoid
4. Ascending colon
5. - transverse colon ...
6. **وحدة شربت مادة تنضيف شو الاشي الي بصير معها بعد عدة أسابيع :**
7. Stricture
8. Perforation
9. carcinoma
10. **The procedure for Zenker diverticulum ?**
11. cervical esophagomyotomy
12. Diverticulectomy
13. ectomy for diverticulum
14. **First sign of PE:**

Dyspnea??!!

1. **Adenocarcinoma of esophagus:**

Barrett’s

1. **anaesthesia under the the nipple:**

T5

“Nipple supply by T4   
Area under the nipple by T5”

1. **Barrett esophagous staging ?**
2. Ct
3. Endoluminal ( endoscopic) ultrasound
4. Petscan
5. **Trauma leading to loss of sensation from the nipples below:**

T4

1. **most important cell in wound healing**

fibroblasts

1. **We excise fibroadenoma in this case except  :**
2. - age > 35
3. - family history
4. - pt wish
5. -size > 3 cm
6. **most common hernia in females:**

Inguinal

1. **Wrong about post splenectomy overwhelming sepsis:**
2. Higher risk in children
3. Immunization 2 weeks prior to elective splenectomy
4. Same risk indifferent of the cause of splenectomy ??
5. Most common cause is s.pneumonia
6. **all correct regarding inguinal hernia except**
7. associated with lipoma
8. Male 20 times affected more than female ??
9. First step in exploring strangulated hernia is relaesing content
10. **Which hernia is more likely to incarcerate:**
11. Umbilical
12. Femoral
13. Inguinal
14. Epigastric
15. Incisional
16. **y/o patient with history of constipation came to the ER with diarrhoea and fever and LIF pain:**

Diverticulitis

1. **Female patient with worsening eczema on the breast, nonitching....:**

Paget

1. **Highest risk for esophageal ca(Squamous cell carcinoma) :**
2. Barrett's esophagus
3. Smoking ...
4. **Female patient with vital signs....(tachycardia, fever...) and arrest inspiration when palpating RUQ (murphy +ve) what is your next step:**

U/S

1. **loss of 1000cc blood:**

class 2

1. **Wrong about divertucular disease :**
   1. low fiber is a predisposing factor ..
   2. 80% develop diverticulitis. 90 in sigmoid ..
   3. mc in europe but not in Africa and asia
2. **Cancer cells :**

Glucose

1. **least common complication of electrical:**

extensive skin damage

1. **Electrical burn depends on the following except:**
2. Site of burn
3. Resistance of tissues
4. Voltage
5. type of circuit??
6. Duration of contact
7. **Patient with history of bleeding per rectum اجى ب signs of shock:**

- Resuscitation, draw blood for cross match, colonoscopy

1. **rong about GS ileus :**

clay color stool ?

1. **Most common malignant liver ca :**

Mets

1. **Most common site of perforation in the esophagus ?!**
2. Lt pleural side?
3. Rt. Pleural Side ?
4. retropharyngeal
5. Posterior mediastinum?
6. Pericardium
7. **Cause of disfigurment in ear burn او هيك اشي** 
   1. Involvement of cartilage
   2. Fascial nerve
   3. Involvement of 8th nerve
   4. Infection
   5. Occlusive graft او هيك اشي
8. **All causes hypokalemia except:**
9. Post burn
10. Diuretics
11. Vomiting
12. Villous adenoma
13. Pyloric stenosis
14. **Blister —>**

wbc & plasma

1. **Patient with mass on the base of the neck on examination it was thyroid nodule with LNs, the patient had previous adrenalectomy, what is the most likely diagnosis:**
2. Medullary Ca
3. Papillary ca ....
4. **reactionary hemorrhage: Wrong about it :**
5. after 24 hours
6. Slipped ligature
7. Caused by infection ???
8. Caused by dislodging of clot
9. Usually needs reoperation
10. **follow up for colorectal CA**

CEA

1. **Most of gallbladder stones are**

asymptomatic ...

1. **pulsatile mass in abdomen :**

AAA

1. **Gas gangrene ? mortality after several weeks of burn :**

infections and silver sulphadiazine

1. **hydrofluric acids :**

ca bicarbonate

Calcium gluconate

1. **Vascularised lesion ,, lesion with intact vessels , the answer is :**

FLAP

1. **Most common cause of massive lower GI bleeding :**
2. Gastric ulcer
3. Diverticulosis
4. Duodenal ulcer
5. **All are sites for pressure ulcer except:**
6. Ischium ??
7. Greater trochanter..
8. Heel
9. Occiput
10. Sacral
11. **all true except :**

posterior anal f is straight in goodsalls rule

1. **Female with mobile breast mass:**

Fibroadenoma

1. **Painless anorectal condition:**
2. acute anal f ..
3. chronic anal fissure ..
4. second degree hemorrhoids
5. p. Faugx ..
6. **Eradication test for H.pylori ..**
7. Rapid urease breathing??
8. Endoscopy & culture
9. **Collar …. ?!!**

after collar incision..

1. **TB cervical LYmphadenopathy :**

viral lymphadenopathy

1. **Nonhodgkin lymphoma :**

Stomach

1. **Necrotising enterocolitis wrong:**
2. Pneumatisis intestinalis
3. Pneumoperitonium
4. Increased platelet count
5. Air in biliary tree
6. **bilious vomiting بطفل عمره شهر:**

Midgut volvuls

1. **Wrong regarding rectal prolapse :**

initial management involves theirsch procedure

1. **Patient with loss of weight diarrhea RIF pain....:**

Crohn's

1. **Wrong regarding testicular torsion :**

conservative and antibiotics

1. **Taxi driver with recurrant swelling 6cm above midline from anus aw hek ishi + discharge for the first time:**

Pilonidal abscess

1. **Prognosis of pancreatitis; all true except :**
2. amylase
3. paO2
4. age
5. **Patient with abdominal pain on x-ray -->**
6. intestinal obstruction and air in biliary tree
7. Gallstone ileus
8. **pt had thyroidectomy developed parasthesia around the lips post op .. w a36a vitals ... :**

positive chvoestk’s sign

**\*\* True about branchial cyst: مكرر**

1. Presents in neonatal period
2. Contains clear fluid
3. Present between upper and middle third of SCM
4. Arise from 6th branchial cleft
5. **All are risk factors for skin cancer except:**
6. multiple and typical mole..
7. family hx ..
8. sun exposure ..
9. chronic burn scar ..
10. hydrflueric acid exposure
11. **diaphragmatic hernia:**

😅😅😅

1. **pt diverticulitis بده الغلط :**

انه تعمل colonoscopy و هو مش stable

1. **External oblique muscle and aponeurosis give rise to all of the following except** 
   1. conjoint tendon ..
   2. lacunar ..
   3. external spermatic fascia ..
   4. inguinal ligament
2. **All are complications of massive bl transfusion except:**
3. Hypercalcemia
4. Hyperkalemia
5. Hypothermia
6. Citrate toxicity
7. **All are causes of intestinal obstruction in children except :**
8. Gastroschisis
9. meconium ileus
10. Anal malformation without fistula
11. **hirschsprung disease: wrong about it**
12. Emptying of barium after 24 hours
13. not occur in small intestine ???
14. Transition zone on barium enema
15. Proximal dilated part is ganglionic
16. Septic colitis is a cause of death

**\*\* Old patient with dysphagia zencker diverticulum manegement next step مكرر**

1. **Blood drainage of lower rectum and upper anal canal by :**

middle rectal vein

**\*\* Patient presented to the ER with massive bleeding per rectum and in-stable vital signs what’s your management: مكرر**

Resuscitations + fluid replacement + blood for cross match + nasogastric tube insertion..

1. **Wrong regarding sub mandibular gland :**

injury to buccal nerve

1. **skin graft not For each of the following except**
2. sc fat ?
3. exposed vessels
4. exposed muscle
5. **false about Hydatid disease ..**
6. Fecoral by egg
7. hair loss
8. Burn sign ...
9. **at OJ -->bleeding tendency due to lost clots factors except :**

NO. 8 clot factor

**Final surgery MCQ sixth year 2019**

**Head of department : Dr. nofal**

1. **Patient with prolonged diarrhea, weight loss, aphthus ulcer , RLQ pain :**

Chrons disease

1. **Least complication with ulcerative colitis :**

Fistula formation

1. **35 yr .Frozen section “sent during surgery “ for breast mass which revealed hyperplastic fibroadenoma , what to do :**

wide excision with rim of normal tissue

1. **Patient Post thyrodectomy with euthyroid, not complication :**

Thyrotoxicosis

1. **Not risk factor of colorectal carcinoma :**

Aspirin

1. **Thyroid tumor with Psamomma body and lymphatic metastasis :**

Papillay carcinoma

1. **Not risk factor for gallbladder cancer :**

I think hepatitis C

1. **Most common cause of death in pelvic fracture :**

Bleeding

1. **Case about roux en y complication First day HR 110 RR 22 BP 120/80 Second day RR 120 RR 25 Bb 120/80 (signs of pulmonary embolism) :**

Anastomosis Leak

1. **Most common arterial aneurism rupture in pregnancy :**

splenic artery

1. **Rupture of esophagus most common site :**

Posterior mediastinum

1. **Treatment of zenker diverticulum:**

Diverticulectomy

myotomy

1. **In penetrating wound of the heart whats the most commonly affected :**

Rt ventricle

1. **Wrong about salivary gland tumors :**

80% of parotid pleomorphic adenomas occur in the deep lobe.

1. **19 years old pt come with gunshot in his umbilicus and systolic BP 70 with tense abdominal distention next step:**

Exploration laparotomy

Keep on IV fluid till BP 90/70 then operate

FAST

DPL

1. **Patient on aspirin undergoing elective cholecystectomy what is the appropriate preoperative intervention:**

Stop aspirin for 7 days before surgery

Stop aspirin 2 days before surgery

Obtain platelet count

Obtain partial thromboplastin time

1. **Patient with cholecystitis admitted to hospital and given IV antibiotic started to have tachypnea and palpitation and marked erythema around the canula Dx:**

Anaphylaxis

septic shock

1. **Regarding burst abdomen :**

Pink serosanguinous fluid is usually the forerunner of this event.

Malnourished patients are at a particular risk

مش عارف بده بقية الخيارات وكان بده الغلط واتوقع كانت conservative mx

1. **In hypovoluemia whats wrong :**

increased peripheral vascular resistence

increased pulmonary artery pressure

metabolic acidosis

1. **In all of the following we do secondary closure except :**

explosive

crush

Early civillian trauma

dog bite

1. **Not a feature of acute pancreatitis :**

Increase in hematocrit

Drop in hematocrit

Calcification

1. **Hirschsprung disease true except :**

Decrease acetylecholinesterase

1. **Medullary carcinoma hormone association :**

Calcitonin

1. **For a patient with uncomplicated meconium ileus all of the following are true except:**

Urgent enterotmy

Iv rehydration with gastrographin enema

Mottling of meconium on AXR

Enterocolitis is a major complication

1. **Women with RUQ pain on us thickening of the gallbladder wall and dilatation of CBD >12 mm With cholelithiasis:**

Admission, iv fluid, antibiotics, recommend ERCP.

1. **For a patient with necrotizing enterocolitis, indications of surgery:**

Air in portal vein

Pneumatosis intestinalis

Bleeding per rectum

Stagnant loop sign on repeated abdominal x rays

Thrombocytopenia

1. **Orchidopexy, true except :**

Decreases the risk of future malignancy

Decrease the risk of violence to the testis

Decrease the risk of tortion

Improves future fertility.

1. **About wilms (or abdominal masses) true except:**

Always unilateral

1. **Regarding papillary carcinoma whats wrong :**

tsh dependent

can be focal or multifocal

lymphatic spread

in elderly

1. **Most common type of polyp :**

adenoma

1. **Peutz jegherz type of polyp :**

hamartoma

1. **Diagnosis of barret developed to adenocarcinoma and follow up its invasivness and thickness :**

Endoscopic and re do biobsy

Mri

Endoscopic US

Esophagectomy

CT double contrast

1. **Wrong regarding circumcision :**

foreskin ballooning during micturation

1. **Duodenal ulcer has been associated with the following except:**

A-Hyper parathyriodism

B-Carcinoid syndrome

C-Chronic obstructive pulmonary disease

D-Liver cirrhosis

E-Gastrinoma

1. **All of the followings may show signs in or around umbilicus except:**

A-Acute hemorrhagic pancreatitis.

B- Portal hypertension.

C- Patent vitello intestinal duct.

D-Gastro intestinal malignancy .

E- Chronic pancreatitis.

1. **Diarrhea is a feature associated with the following conditions except:**

A-Medullary carcinoma of thyroid

B-Insulinoma

C-Gastrinoma

D-Carcinoid syndrome

E-V.I.Poma

1. **blow out fracture of the orbit often presents with the following except:**

A. limitation of upward gaze in the affected orbit

B. limitation of lateral gaze in the affected orbit

C. infraobital anesthesia or hyperesthesia

D. enophthalmos

E. diplopia

1. **An 8- month old infant was brought by his mother for 3 cm strawberry hemangioma on the neck, she stated that the lesion appeared 3 weeks after birth and increased in size, the best management is:**

A. Systemic steroid therapy.

B. LASER

C. Surgical excision

D. Ebmolization

E. Observation

1. **which of the following is the best indicator of smoke inhalation injury?**

A.patient with 60% total body surface area burned as his clothes caught Fire .

B-.patient involved with blast steam heat C.patient with pulmonary embolus

D.patient burned with sooted nostrils and lips

E.patient found unconicious in a smoke filled room

1. **All the following statements are true of infant with Anterior abdominal wall defects except:-**

A- It is associated with malrotation.

B- There is prolonged adynamic ileus following repair.

C- Staged procedure is performed by silo and delayed closure.

D- Myo-cutaneous mobilization flap as operative option.

E- The gastroschisis has a sac that may ruptures during delivery.

1. **all the statements regarding the obstructed hernia in a child are true except:**

A-Attempt reduction by using sedation and manipulative Taxis.

B- Reduction should not be attempted pre operatively if strangulation is suspected.

C- Immediate surgical operation is the first choice of management.

D- Delayed operation following successful reduction,

E- Torsion of an undescended testis may mimic the obstructed hernia.

1. **Regarding rectal prolapse in children, all are true except:**

A- May be associated with sacral agnesis.

B- May be the leading diagnosis for cystic fibrosis.

C-Should be differentiated from prolapsing rectal polyps.

D-First choice of management is usually by Thiersch operation.

E- Complicated by ulceration and rectal bleeding.

1. **Regarding choledochal cyst, all the statements are true except:-**

A- Prenatal ultrasound can demonstrate choledochal cyst in utero.

B- Kasi procedure is the treatment of choice for caroli's disease.

C- Excision with Roux-en-Y hepatico-jejunostomy. is part of management

D- Hepato-imino-diacetic acid (HIDA) is used to demonstrate The communication of the cyst.

E- Choledochal cyst carries a risk of malignant degeneration.

1. **Regarding Meckel's diverticulum, which of the following statement is true:-**

A-It is a false diverticulum.

B-Resection of the incidental meckel's is indicated in all children.

C-Bleeding Meckel's can be diagnosed by Tc99, scan.

D-The diverticulum arises from the mesenteric side of the small bowel.

E-All Heterotopic tissue in the diverticulum is usually associated with massive bleeding

1. **Management of toxic megacolon :**

proctocolectomy with ileostomy (not ileal pouch bcz its emergency)

1. **Cancer involving lower third of rectum cancer and anal canal treatment:**

abdominal peritoneum resection

1. **wrong about fistula :**

surgery for low and high

1. **diverticulosis occur in all of following except :**

rectum

1. **inverted "U" sign in :**

sigmoid volvulus

1. **fe she el jwab focal nodular hyperplasia not risk of liver malignancy bs nseet so2al**
2. **used in staging of esophgeal cancer :**

endoscopic us ?

1. **not a choice for preoperative investigation for someone has men 1 :**

urin catecholamines

1. **fe so2al 3n dehydration with hypernatremic kan bdo wrong esh heek k2no el mohem el jawab el wrong .. urinary na > 20 !!! بكون اقل من 20**
2. **female drank lye , what might she have after 1 week :**

esophageal stricture

1. **wrong about Hereditary non polyposis colonorectal cancer :**

autosomal recessive

1. **patient had accident , what is best indicator of urethral injury :**

high riding prostate

1. **Wrong about acalculus cholycystitis:**

Conservative mangement

Seen in icu pt High mortality

1. **Carcinoid tumor what is wrong :**

Type of neuroendocrine

Secrete serotonin

If in base mx by hemiclectomy

If in apex >2 cm mx by appendectomy ,

characteristic symptoms after spreading to the liver

1. **prevention of secondary brain insult after head trauma eshe heek k2no :**

Keep o2 above 80

Keep co2 above 45

Avoid hyperglycemic food

1. **Wrong about paget disease :**

بما انه د. نوفل اللي كاتب ال breast ف عالاغلب هاي جوابها انه reflects the presence of under lining cancer in breast tissue (بده الغلط) لانه من ايام رابعة وهو يحكي انه Paget's مش invasion من كانسر جوا البريست بس بكون في increased risk of malignancy on the affected side

**Final Exam 2018 (Wateen)**

**1- most common complication of PU:**

bleeding

**2-most common extranodal involvement of non hodgkin :**

stomach

**3- most common site of adenocarcinoma of small intestine:**

duodenum

**4- wrong regarding diffuse type of gastric tumor :**

hemogenous spreading is the predominant.

**5- wrong regarding ranson criteria items:**

amylase more than 1000

**6- wrong regarding gastrinoma :**

most common site is head of panrease and duedenum ?????!!

**7- indication of barriatic surgery :**

more than 40 BMI without comorbidity

**8- carcinoid tumor wrong :**

always malignant ??!!!

**9- wrong regarding risk factors of gallstones:**

right hemicolectomy

**10- wrong regarding obstructive jaundice :**

increase activity of kuppfer cell ??!!! (سؤال كان غريب عجيب و خياراته اعجب )

**11- 60 year old female with epigastric pain and jaundice itching dark urine with minimal elevation of aminotransferase and 3 fold increase in Alkaline phosphatase, best intial investigation:**

ultrasonography

**12- true regarding hemangioma of liver:**

most common benign tumor of liver

**13- most common case associated with overwhilming sepsis after splenectomy :**

thalasemia (انفشخ المنطق بس هذا الجواب حسب الدكتور)

**14- most common congenital anomaly of spleen :**

accessory spleen

**15- Not disease of inguinoscrotal:**

Hydrocele of the Canal of Nuck (Female Hydrocele)

**16- true regarding Spiglian hernia :**

lateral to semilunaris line

**17- wrong regarding strangulated hernia :**

increase bowel sound

**18- Volvolus doesn't occur at :**

ascending colon (retroperitoneal)

**19- Clinical scenario of intestinal obstruction with bent inner tube sign at xray (dx: sigmoid volvulus ) what is the treatment :**

sigmoidoscopy and decompression of sigmoid colon

**20- Wrong about splenic abcess :**

DVT is risk factor

**21- 60 year old case with dx of intussusception what is the cause :**

metastatic deposits??!!!

**22- scenario of intussciption (ناسي بالضبط السؤال بحذافيره) what is wrong regarding that :**

hydrostatic reduction despite of shock (صلحوني شو الصيغة و شو كان السؤال و شو بده )

**23- most reliable sign of differentiation between indirect and direct :**

occlusive test ???!!!

**24- hematemesis following multiple episodes of vomiting with retching :**

Mallory wiess syndrome

**25- True regarding mesenteric ischemia :**

chronic ischemia is associated with postprandial abdominal pain

**26- most common cause of mesenteric ischemia :**

emboli ???!!!

**27- wrong regarding complications of ulcerative colitis :**

fistulas

**28- not associated with increase malignancy :**

peutz-jeghers syndrome

**29- 1-cm asymptomatic stone management:**

only observation

**30- wrong regarding hereditary non-polyposis :**

autosomal recessive

**31-not true regarding crohn's :**

cause massive gi bleeding

**31- not true regarding colon function :**

sodium is passively absorbed

**32- most likely pre cancerous lesion of following :**

5 cm villous polyp (other choices were smaller polyps , and 5cm tubular polyp which is less precancerous than villous type)

**33- anorectal ring formed of :**

deep part of external sphincter and puborectalis

**34- most common early complication of hemorrhoid :**

urine retention

**35- second step after occult blood positivity at screening of colorectal cancer :**

colonoscopy

**36- wrong regarding hemorrhoid :**

1st degree hemorrhoid can be easily diagnosed by inspection. ???!!!!

**37-wrong regarding fistula in ano :**

10% of perianal abcesses are complicated to fistula in ano (the true is 50% )

**38- wrong regarding late dumping :**

due to hyperosmolar materials at small intestine

**39- most common late complication of colostomy :**

parastomal hernia ???!!!

**40- True regarding leiomyoma of esophagus :**

found at lower third of esophagus

**41- wrong regarding achalasia :**

intermittent dysphagia

**42- true regarding caudate lobe : ???!!!!**

( choices : supplied only by right portal , supplied only by left portal , drain directly to inferior vena cava , right to inferior vena cava ,,,, ???? )

**43- most common presentation of benign small intestine tumor :**

incidental ???!!! (other choices : gi bleeding , small bowel obstruction , perforation , ..... ??? )

**44- parasympathetic innervation of left side of colon by :**

s2-s4

**45- most common cause of perforation of esophagus :**

instrumentation

**46- can't be differentiated between biliary colic and acute cholecystitis by :**

presence of nausea and vomiting

**47- Most common presentation of Meckel's diverticulum :**

Gi bleeding

**48- First management given for patient with lower gi bleeding :**

Resuscitation

**49- Why we prefer resection over the bypass in crohn's disease :**

because it decrease risk of malinancy ??!!

Thoracic surgery and traumatology & IV F&E :

**1- indication of thoractomy in throacic trauma :**

more than 200 cc blood obtained from chest tube every hour for 3 hours

**2- Tension pneumothorax wrong thing about it :**

we shoud do Chest xray before starting management

**3-hydatid cyst best treatment :**

thoractomy and resection of cyst sparing lung parynchema

**4- best treatment of embolism for lower limb:**

embolectomy with anticoagulation

**5- wrong regarding items of advanced ..... :**

tertiary survey ????!!! (مش متاكد ابدا منه )

**6- best initial diagnosis of spleenic injury :**

CT scan ????!!!! (شوكانت صيغته السؤال بالضبط ؟ )

**7- most relaible sign for grade 4 :**

defeciecy of sensorium ?!!

**8- blood lost at grade 3 :**

1500-2000 L

**9- wrong regarding hypovolemia :**

associated with high pulmonary occlussive pressure

**10- cause of normal anion gap metabolic acidosis:**

diarrhea

**11- hypocalcemia clinical manifestation :**

chovestic sign

**12- hypercalcemia cause ??? (السؤال كثير مش واضح )**

**13- wrong regarding management of lower limb crush trauma :**

closure of wound

**14- wrong about bad findings of head trauma :**

GCS 13-15 ??!!

**15-conservative therapy of severe venous dysfunction :**

compression stocking

**16- not feature of 6ps :**

hyperthermia

**17- one isn't indication of lung abcess drainage :**

less than 2 cm

**18-Not true regarding items of AMPLE :**

Alertness (it is allergy)

**19- All are manifestations of hypercalcemia except :**

diarrhea

**20- Wrong regarding hydatid disease of lung :**

treatment of choice is albendazol (شو الصيغة الدقيقة للسؤال ؟؟ )

**Lumps & ulcers: الاسئلة الي عليها علامة استفهام مشكوك في اجابتها**

**1- Ulcer over pressure points (head of 1st metatarasal , calcaneus ) :**

Neurogenic ulcer

**2- most common complication of Thyroglossal cyst :**

infection ??!

**3- most common cause of Primary parathyroidism :**

adenoma at one gland

**4- thyroid cancer can't be diagnosed by FNA**

:Follicular carcinoma

**5- Mammogram finding suggest carcinoma :**

fine microcalcification

**6- all of the following is usual finding at fibrocystic disease except :**

atypical cells ??!!! (because it is not a usual finding??)

**7- Sentinel lymphnode definition :**

first lymph node draining cancer

**8- wrong regarding salivary gland diseases :**

Sialogram can diagnose submandibular sialolithiasis

**9- most common malignancy of salivary gland :**

mucoepidermoid carcinoma

**10 – one is difference between cancer and ductectasia :**

Milk fistula ( other choices were nipple retraction, mass , age , bloody discharge )

**11- For diagnosis of patient with medullary carcinoma of thyroid :**

we order alfa fetoprotein

**Pediatric: الي عليها استفهام مش اكيد**

**1- disease cause massive bleeding in children:**

meckel's diverticulum

**2-true regarding diaphragmatic hernia :**

inventration of diaphragm need immediate surgery ???!!!

**3- billous vomiting at 3-4 weeks children dx:**

malrotation (other choices were pyloric hypertrophy , duedenal atresia ,hirschsprung disease )

**4- wrong regarding hirschsprung disease:**

may involve small intestine ??!!

**5-Wrong regarding Necrotizing enterocolitis :**

associated with thrombocytosis

**6-testicular torsion wrong :**

need coservative therapy like antibiotics and ابصر ايش

**Plastic: الي عليها استفهام مش اكيد**

**1- wrong regarding partial thickness graft :**

we can store it for more than 2 years

**2- full thickness graft wrong: ??!!!**

**3- most common cofactor associated with increase mortility within first 48 hours in patient with burn :**

inefficient resuscitation ???!!!

**4- Tissue we can put skin graft on it :**

subcutaneous

**5- true regarding friction burn complication (او شو الصيغة الاصح) :**

full thickness necrosis or something like that ???!

**6- wrong complication of electrical burn:**

compartment ??!

**7-True regarding squamous cell carcinoma:**

the most common cancer of skin

**8- not risk factor of malignancy of skin :**

multipe nevi ???!!

**9- worng regarding facial injuries :**

enophthalmous ( posterior displacement of eyes)

**Final Exam past years 201X(2017)**

**1- Medullary thyroid cancer :**

calcitonin

**2- Common cause of pyogenic liver abcess :**

biliary obstruction

**3- obstructive jaundice all factors defecient except:**

factor VIII

**4- Isolated lung contusion :**

OXYGEN SAT 90% Is not an indication for mechanical ventilation

**5- Indication for surgery in abscess all except:**

3 cm abccess

**6- treatment of multilocular empyema in fibropurulunt stage :**

VATS(video assited)

**7- all risk for skin cancer except:**

asbestosis

**8- most common liver malignancy :**

mets

**9- papillary thyroid false:**

elderly

**10- next step after clinical examination of varicose vein :**

Doppler US evaluation

**11- least cause of iatrogenic pneumothorax:**

intercostal nerve block

**12- wrong about insulinoma:**

most common surgery is whipple procedure ( pancreaticduedonectomy)

**13- Wrong about ulcerative colitis:**

cooble stone

**14- wrong about ulcerative:**

proctocolectomy

**15- hyperparathyroidism cause all except:**

gynecomastia

**16- Ulcer in Burn in 30% :**

curling

**17- hyperparathyroidism cause all except:**

diarrhoea

**18- Massive GI bleeding in children except:**

juvenile polyps

**19- Painful anal condition except:**

Anal polyp

**20- Reagarding fistula in ano wrong :**

high and low treated the same by fistulectomy

**21- Wrong rectal prolapse:**

first choice is therich

**22- anorectal ring consisit of :**

puborectalis , Deep external sphincter

**23- direct hernia wrong :**

strangulation is a common problem

**24 - lactation mastitis wrong :**

treatment incision and drainage under genral anasthesia

**25- breast mets:**

lumber spine

**26- complications of hydatid cyst except :**

intragastric repture

**27- all are benign breast masses except :**

paget disease

**28- pure cholestrol stone :**

radiopaque

**29- friction burn :**

neurovascular injury

**30- post surgical fluid all true except :**

Nacl in vomiting volume to volume

**31- prevention of gas gangrene :**

debridment of wound

**32- chemical burn:**

tap water

**33- managment of varicose vein :**

all of above (pneumatic pressure , elastic stocken , etc)

**34- least common cause of iatrogenic pneumothorax:**

blockeing of the intercostal nerve.

**35- enterocutanous fistula most common cause:**

iatrogenic

**36- failure of closure of enterocutanous fistula except:**

long tortous tract

**37- electrical burn most important :**

cardiac dysthymia

**38- volvulus not cant occur in :**

ascendening colon 39- Acute upper abdominal pain board like rigidity heart rate 110 bp: 100/50 diagnosis: perforated DU

**40- Next step for previous case :**

Chest x-ray

**41- blister consist of:**

plasma and WBC

**42- most common bacteria in bile :**

E-Choli

**43-Gall stone ilius wrong :**

pass through sphincter of oddi

**44- Choledocoenteric fistula between :**

gallbladdar and duodenum

**45- not mandatory in treatment of acute pancreatitis:**

antibiotics

**46- Hirshprung disease wrong :**

not occur in small intestine

**47- Colon cancer risk factor :**

high fat food  
**48-  Submandibular gland all except :**

surgical excision if stone is in proximal or distal in it's duct

**49- All are posterior neck masses except :**

Plunging ranula

**50- commonest site of ulcerative colitis :**

rectum .

**51- left colon cancer presentation except :**

Central Abdominal mass

**52- Wrong about role of 80 in salivary gland :**

80% of pleomorphic adenoma in deep lobe

**53- Intenstinal obstruction wrong :**

not always an indication for surgery

**54- Compartment syndrome wrong :**

hypercarbia

**55- Complication of blood transfusion except :**

DVT

**56- Most common artery responsible for UGIB :**

gastroduodenal

**57- Complication of massive blood transfusion except :**

hypokalemia

**58- inguinal Lymph drainage except :**

testis

**59- Intussuception not diagnosed by**

technicium-99

**60- All of this cause abdominal tenderness except :**

subphrenic abscess

**61- Regarading scroto-inguinal Wrong?**

Communicating hydrocele regress spontainously

**62- 1 month old infant bilous vomiting :**

midgut malrotation

**63- volvulus occur in all except :**

ascending colon

**64- wrong about branchial cyst :**

covered by lymphoid tissue

**65- Concerning diphragmatic hernia what is right :**

immediate managment in eventration of diaphragm

**66- Diagnoatic peritonial lavage :**

RBC < 500

**67- Most common complication of thyroglossal cyst :**

infection

**68- carcinoid syndrome cause the following except :**

Systemic hypertention

**69- Patient with constant moderate lower GI bleeding (100ml/h):**

colonoscopy

**70- most common cause of intestinal obstruction :**

adhesive band

**71- isolated cleft palate cause all except:**

teeth problem

**72- Incidental gallstone in a forty two years old female asymptomatic what to do :**

Observation

**73- boy with abdominal pain and anorexia and slight increase in temperature and after 1 week has RIF pain :**

Appendicular abcess

**74- What is the cofactor associated with increase mortality after burn :**

inhalational injury

**75- all of them are cancer of small intestine except :**Peutz Jagger syndrome

**76- In isolated water loss except :**

High sodium in urine

**77- one correct about appendicitis:**

Loss of Apetite ( Anorexia)

**78- all true about appendicitis except :**

shifting of pain is always present

**79- Basal skill fracture wrong :**

otorrhea rhinorrhea always a bad signs

**80- Head injury managment not include:**

not sure between 2 answers ("paco2 45" and "avoid hyperglycemia")

**81- Nectotizing enterocolitis wrong :**

thrombocytosis

**82- ranson criteria for prognosis except :**

bilirubin

**83- Pilonidal cyst wrong :**

it has an opening in visceral surface

**84- patient undergo cholycystectomy then had pain mild fever next step :**

not sure between ERCP or Abdominal Ultrasound

**85- Crushing injury wrong :**

primary closure of the wound

**86- Cause hypokalemia except:**

polycythemia

**87- Wrong about hemmorohid :**

2nd degree hemorrhoid return by finger

**88- thyroglossal cyst wrong :**

can not form a fistula

**89 - Primary survey except :**

not sure between corelation between the machnism and the injury , to find treatable injuries

**90- Therish graft wrong:**

only for autograft

**91- succesion splash for fluid in:**

stomach

**92- Diabectic Ulcer:**

usually painful

**93- peritonitis wrong:**

large clean wound heal  
more quickly than small wounds

**94- intestinal obstruction in neonate :**

Exomphulus

**95- Perforated Peptic Ulcer Except :**

surgery is the usual treatment after resuscitation , half of pateint has history oif pf

**96- Esophagial varices Except :**

ballon  
temponade for long term control

**97 - Acute Pancreatitis Except:**

infammatorty bowel disease

**98- About perianal abcess except :**

intersphintric abcess the most common

**99- Divertucolosis coli Except:**

Congenital

**100- all of the following is true except:**

posterior fistula are Straight

**Final Exam past years 201X(2016)**

**1-the largest nevi :**

conginital nevous

**2-one isn't from critirea for prognosis in pancreatitis :**

bilirubin

**3-positive transillumination in one cyst :**

cystic hygroma

**4-if a child get injured by unknown material what would u do ?**

1- 75% alcohol 2- water 3- alkaline agent .. i'm not sure what's the right answer

**5-the most serious complication in blood transfusion :**

ABO incompatibility

**6-breast nodule which doesn't excrete bloody dischage :**

adenofibroma

**7-motility dysphagia except:**

pseudo acalasia

**8-what treatment of parotid pleomorphic adenoma:**

superficial parotidectomy

**9- Among the followings which is not a complitcation in ulcertive colitis :**

intestinal obstruction

**10- metastasis and dustasia ishy one of the following isn't shared:**

mild fistula

**11- not a motility disorder of the esophagus :**

psuedoachalasia = Ca esophagus

**12- wrong about necrotizing enterocolitis :**

thrombocytosis

**13- acute appendix in child is dangerous because :**

short omentum

**14- Lung abscess in children doesn't cause by:**

functional esophageal disorder --> it is a disease of the middle age

**15- reiter's hernia :**

portion of circumference of the intestine in the sac

**16- not and indication of surgery in lung abscess :**

lesion > 3 cm ???

**17- not a cause of hypokaliemia :**

polycythemia

18-في سؤال عن ال perianal abscess والجواب كان )) except fistula will develop in 5%

**19.causes of massive bleeding children**

- meckel's

**20.hydrocele all except**

...sth canal of nuck

**21.most strangulation hernia..**

femoral

**22.about strangulated hernia except...**

can be reduce

**23.ulcer in burn...**

curling ulcer

**24.acute pancreatitis not prognostic ...**

bilirubin level

**25.acute appendicitis in children...**

short omentum

**26.cause of bile stain vomitus...**

mid gut volvulus

**28.volvulus occurs in all except>>>**

ascending colon

**29.intussusception all except ...**

use t33 in diagnosis

**30.hirschsprung disease wrong ...**

dilated segment aganglionic

**31.necrotizing enterocolitis all except**

thrombocytosis

**32.cause of death in pelvic fx...**

uncontrolled bleeding

**33.inguinal ln enlargement all except ..**

testis (twice)

**34.not routine in screening blood tx...**

CMV

**35.not in pheochromocytoma...**

constipation

**36.cause hypocalemia except..**

.polycythemia

**37.ulcerative colitis cause all except ...**

hyporkalemia

**38.not in crohn's ...**

pseudopolyps

**39.all complication of ulcerative colitis except ..**

.intestinal obstruction

**40.indication of surgery in ulcerative colitis...**

disease for 10 year

**41.all cause abdominal tenderness except...**

subphrenic abscess ???

**42.all can use x ray in diagnosis except ..**

ventral hernia ????

**43.all cause dysphagia except ....**

highly selective vagtomy>??

**44.treatment of parotid pleomorphic adenoma >>>>**

superficial parotidectomy

**45-most common cause of intstinal obstruction :**

adhesion

**46fast ultrasound is not accurate in :**

retroperitoneal structures

**47least to cause pnemothorax :**

block of the intercostal nerves

**48-richter hernia :**

when portion of circumference of the intestine in the sac

**49-Medullary carcinoma hormone >>>**

clcitonin

**50- one is malignant breast disease ?**

pagets disease

**51-most common site of small bowel adenocarcenoma ?**

duedenam

**52-DU bleeding ?**

gastroduodenal artery

**53- most common site where breast ca metastasis ?**

lumber vertebra

**54- case : female single nodule euthyroid what is the best diagnosis ?**

simple nodular goiter

**55-patient burn 25% BSA and develop duodenal ulcer this ulcer called?**

curling ulcer

**56-about DU all true except ?**

carcenoid formation

**57- in thyroid medullary ca which of the following will elevated ?**

calcetonin

**58- about thyroid papillary ca all true except ?**

associated with pancreatitis

**59- all true except ?**

platelet stored at 4c and used in 35 day

**60-in patient of pancreatic without complication which of the following not given to him?**

antibiotics

**61- some thing about management of lactating mastitis ??**

**62-cardiac trauma cause except :**

tracheal shift

**63- Most common complication of branchial cyst :**

infection

**64- wrong about acute Chalcolus cholecystitis :**

jaundice is a frequent sign

**65- Pheocromocytoma dose not cause :**

constipation

**66- gallstone ilies :**

the common site of obstruction is iliem and the fistula between gallbladder and the duodenum

**67- curling ulcer seen in burn**

**68- everted ulcer seen in** : Trauma , Rodent ulcer ????

**69- diverticuliosis is not common in :**

rectum

**70- wrong about Lactating mastitis :**

medical management leave antibioma

**71- Not benign breast ca :**

paget's

**72- 1ry parathyroid cause < except > :**

gynecomastia

**73- Most common site of breast ca mets :**

lumber

**74- chemical burn :**

irrigate with water

**75- in management of hydatid cyst :**

socolioside is contra indicated in comuicating cyst

**76- peptic ulcer not caused by :**

chushing

**77- diaphragmatic hernia :**

death mostly due to associated anomalies

**78- most common hernia to be strangulated :**

femoral

**79- Which of the following wrong about Ulcerative colitis :**

hyperkalemia

**80- Which of the following is wrong about hernia:**

Direct hernia can cause strangulation

**81- A question about the anatomy of the typical rib what is the wrong**

had superiority a groove for intercostal nerve

**83- A question about the anatomy of Diaphragm which one is the wrong :**

it contraction increase the horizontal diameter ???

**84- Most accurate and reliable monitor for the fluid Tx in brun pt :**

CVP

**85- What is wrong about chron's :**

psedopoylps

**86- Not a painful anal condition :**

anal polyp

**87- Tx of pancreatitis all true except :**

Antibiotics

**88- case Thyroid single nodule at examination:**

Simple multinodular

**89- One of the following doesn't drain to inguinal lymph nodes:**

tests

**90- Massive lower GI bleeding in pediatrics population:**

a. Meckel’s diverticulum

**91- Bilious vomiting in a 3-week-old child?: mid gut.**

Malrotation

**92- Most common site for small bowel adenocarcinoma:**

duodenum

**93- Most common cause of biliary stricture is :**

Iatrogenic

**94- A line from the tragus to the mid point of the upper lip is equivalent to the surface anatomy of the parotid gland duct**

**95- Which of the following is not a cause of dysphagia. except:**

Highly-selective Vagotomy

**96- One of the following is least likely to have tenderness prominent:**

Subphrenic abscess

**97.content of burn blister >**

air\plasma,???

**98.primary survey 1 is true >**   
deal with life threatening situations

**99.to avoid 2ndry insult of brain >**  
 co2(45)\O2>80\...?

**100. about causes of cardiogenic shock**

**101.different btwn ductectasia and malignancy >**

milk fistula ??

**102.full thickness graft > not on fatty tissue ??**

(جابهم بالاسماء التانيه wolfe,Theirsch فانتبهولهم )

**103.one is wrong >**

split graft can stay at 4temp for 4 weeks

**104.a cause of biliary vomiting >**

volvolus

**105.one is wrong >**

eventration diaphram is an emrgency

**106.most common type of eosophagial atresia >**

distal fistula with proximal atresia

**107.most important indecator for acute appendicitis >**

WBC's > 20000

**108.one is wrong about diabetic foot >**

painful ulcers

**109.one is wrong >**

post.anal fistula is strait

**Final Exam past years 201X**

**1) Which of the following is the most common precursor to the development of mediastinitis?**

**A. Dental abscess \***

**B. Orbital cellulitis**

**C. Infected sebaceous cyst on scalp**

**D. Maxillary sinusitis**

**E. Empyema necessitatis**

**2) All of the following statements regarding the chest tube are correct except:**

**A. It should be made of non-toxic material**

**B. Its size depends mainly on the amount of air or fluid to be drained \***

**C. It should not cause necrosis during prolonged insertion**

**D. It should be removed if it is stop draining**

**E. It should be soft enough to prevent laceration of intercostal vessels**

**3) Regarding Zinker's diverticulum (ZD), all of the following statements are true except:**

**A.Lump sensation is one of its presenting features**

**B.Most of the patients with ZD are in their sixties**

**C. On Barium swallow, it appears as a right-sided protrusion at the level of the posterior hypopharyngeal wall \***

**D.Endoscopy is generally unnecessary**

**E.Surgical results are best achieved with myotomy and diverticulectomy**

**4) The most frequent side effect observed after endoscopic thoracic sympathectomy is:**

**A.Recurrence**

**B.Gustatory sweating**

**C.Compensatory hyperhydrosis \***

**D.Severe dryness of the hands**

**E.Horner's Syndrome**

**5) The most frequent postoperative complication following open dorsal sympathectomy is:**

**A. Occurrence of pneumothorax \***

**B. Neuralgia**

**C. Dysthesias in the arm**

**D.Wound infection**

**E.Horner 's syndrome**

**6) What should be the optimal INR (International Normalized Ratio) in patients receiving long-term anticoagulant therapy and requiring emergency thoracotomy?**

**A.1.5 \***

**B.2**

**C.2.5**

**D. 3**

**E. 3.5**

**7) All of the following elements are regarded as causative factors for the thoracic outlet syndrome except:**

**A. Sympathetic chain \***

**B. Cervical rib**

**C. First Thoracic rib**

**D. Scalenus anticus muscle**

**E.Abnormal ligaments**

**8) In patients with mediastinal fibrosis, the most common physical finding is:**

**A. Recurrent laryngeal nerve palsy**

**B. Compression of the thoracic duct**

**C. Compression of the superior vena cava \***

**D. External compression of the bronchus**

**E. Pulmonary venous obstruction**

**9) All of the following statements regarding Morgagni hernia (MH) are incorrect except:**

**A. At presentation, it is generally bilateral**

**B. Asypmtomatic MH needs no treatment**

**C. Midsternotmoy is the surgical approach of choice**

**D. Ipsilateral thoracotomy is the recommended surgical approach**

**E.MH is best treated via laparotomy \***

**10) Radiotherapy is the treatment of choice in mediastinal:**

**A.Oat cell carcinoma**

**B. Seminoma**

**C. Lymphoma**

**D.Reticulum cell sarcoma**

**E. Adenocarcinoma**

**11) Chylothorax**

**a- is frequently seen after blunt chest trauma**

**b-usually requires ligation of thoracic duct**

**c-results in early symptoms**

**d-has 0.5-1 gm/ml protein content**

**e-rarely becomes infected**

**12) All of the following are characteristics of the thoracic duct except:**

**A- it takes its origin in the abdomen**

**B-it enters the chest through the esophageal hiatus \***

**C. In the neck, it is located behind the carotid sheet and jugular vein**

**D. It contains many valves to protect it against blood flow**

**E.Injury to the duct below T5 usually results into a right-sided**

**chylothorax**

**13) Which of the following is the least known complication of the Trans bronchial fine needle aspiration of mediastinal masses?**

**A. Pneumothorax**

**B Pneumopericardium**

**C. Hemothorax**

**D. Chylothorax**

**E. Pneumomedistinum**

**14) The single factor most predictive of survival in patients with a completely resected stage II non-small cell lung cancer is:**

**A .Adjuvant therapy**

**B.Number of metastatic N1 lymph nodes**

**C. Postoperative radiation therapy**

**D. T status (T1 versus T2)**

**E.Visceral pleural invasion**

**15) The only complete cartilaginous ring is:**

1. **Thyroid**
2. **Arytenoids**
3. **Cricoids \***
4. **Corniculate**
5. **3rd Tracheal ring**

**16) Recognized causes of dysphagia include all of the following except:**

1. **Iron deficiency anemia\***
2. **Pharyngeal pouch.**
3. **Barrett’s esophagus .**
4. **Myasthenia gravis.**
5. **EAchalasia**

**17) The proportion of patients developing lung cancer who have never smoked is:**

1. **10%\***
2. **20%**
3. **30%**
4. **40%**
5. **50%**

**18) A 44-year-old woman with hydropneumothorax and surgical emphysema in the neck mostly due to:**

1. **Tension pneumothorax**
2. **Spontaneous pneumothorax**
3. **Aortic dissection**
4. **Esophageal rupture \***
5. **Pericardial tamponade**

**19) Persistent bloody pleural effusions are usually due to :**

1. **Cancer \***
2. **Tuberculosis**
3. **Meig's syndrome**
4. **Nongranulomatous bacterial infections**
5. **Brucellosis**

**20) All of the following organs can be found in a Bochdalek hernia except:**

1. **Colon**
2. **Left kidney \***
3. **Omentum**
4. **Spleen**
5. **Stomach**

**21) A four year old patient is know to have ingested a sharp metallic foreign**

**body which was not seen on endoscopy. Which of the following**

**is contraindicated to localize an extra luminal foreign body?**

**A. Plain radiograph of the abdomen**

**B. Arteriography**

**C. Video fluoroscopy**

**D. CT**

**E. MRI \***

**22) All of the following are vascular effects of thoracic outlet compression except:**

1. **Subclavian bruit**
2. **Digital gangrene**
3. **Raynaud's syndrome**
4. **Subclavian venous thrombosis**
5. **Decreased venous arm pressure \***

**23) A 80-year old man with severe dysphagia has an 8 cm long mid esophageal cancer; Ct scan shows three liver metastases. The best palliative treatment for this patient is;**

1. **Brachytherapy**
2. **Chemotherapy**
3. **Endoscopic laser therapy**
4. **Stent placement \***
5. **Surgical bypass**

**24) Hemoptysis is associated with all the following EXCEPT**

**A. Mitral stenosis**

**B. Bronchiectasis**

**C. Pneumonia**

**D. Empyema \***

**E. Bronchogenic carcinoma**

**25) The test that BEST tells whether or not a catheter tip is in an intravascular position is**

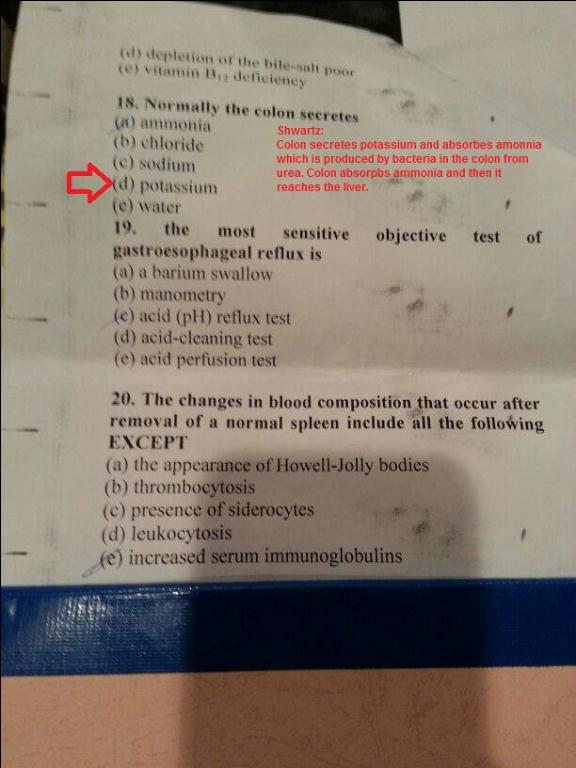
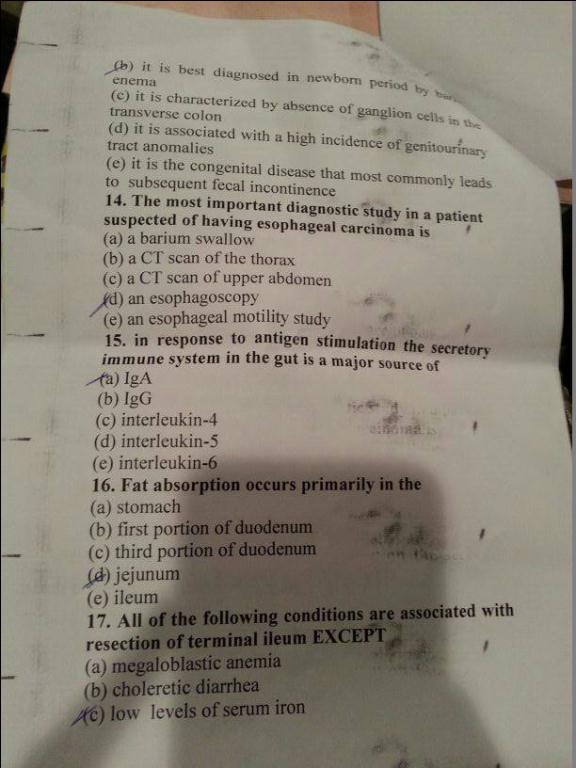
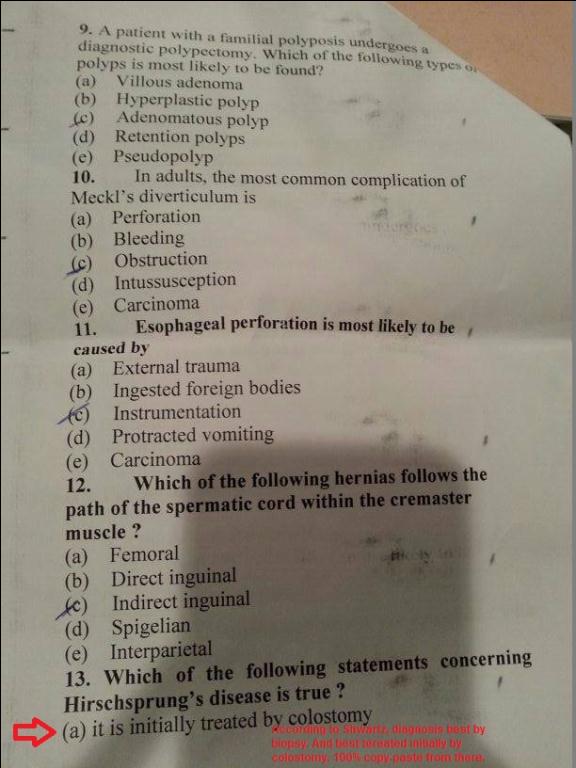
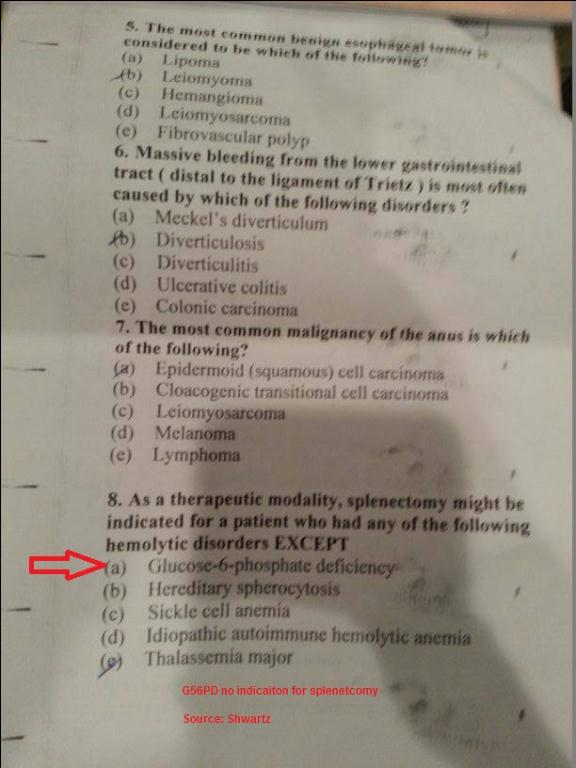
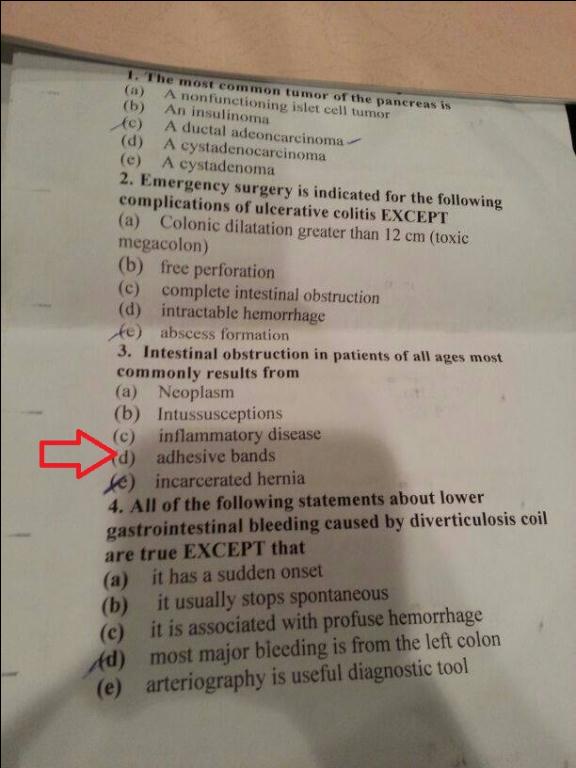
**A. Chest x4ay**

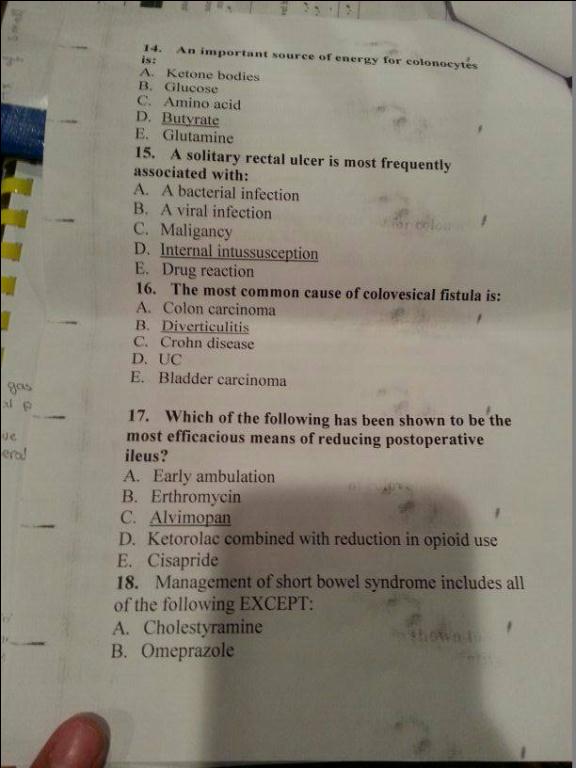
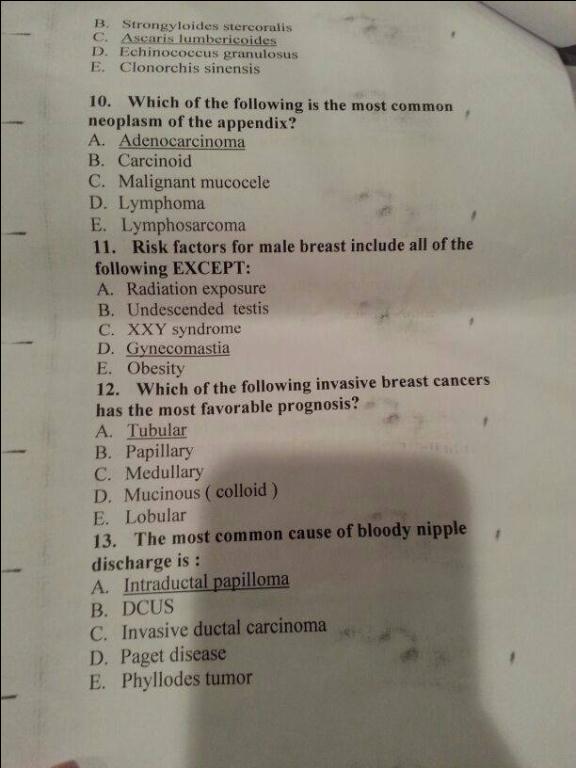
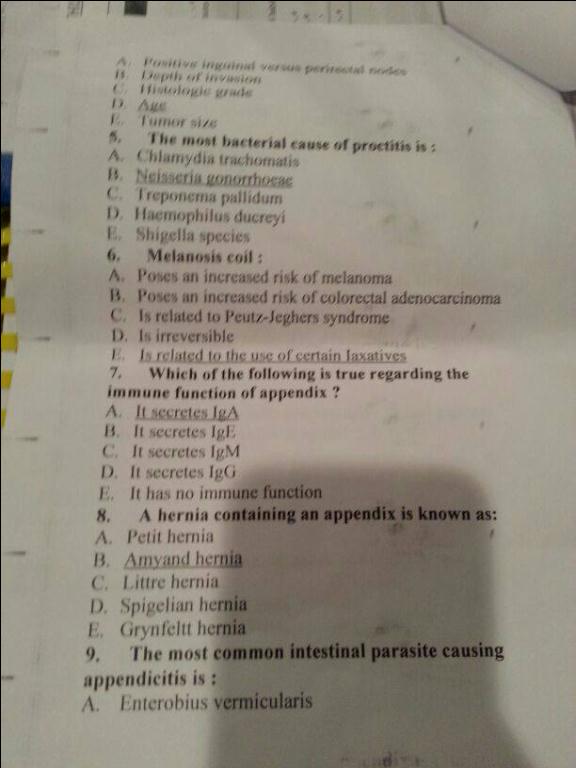
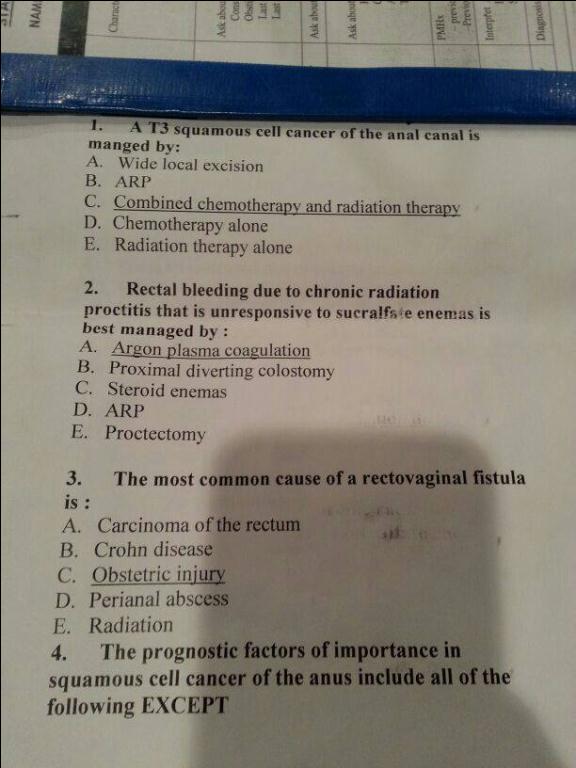
**B. Ultrasound**

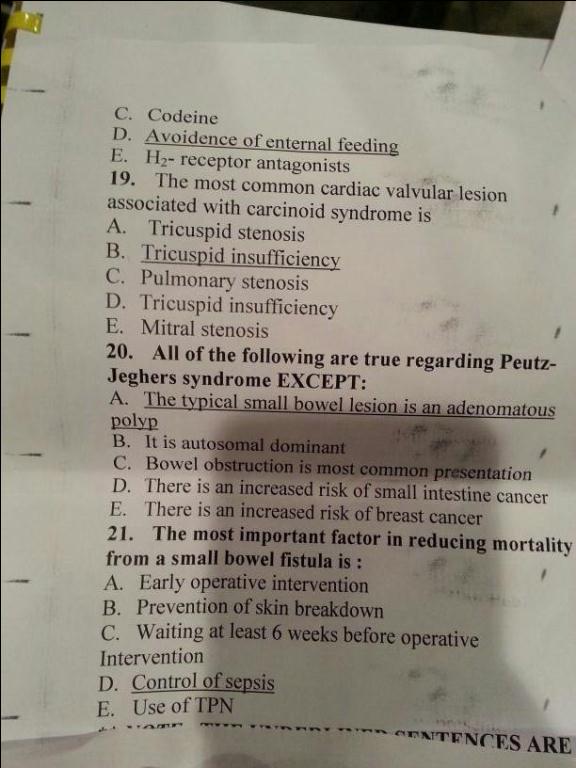
**C. Aspiration of blood \***

**D. Ability to flush easily**

**E. Ability to easily pass a guide wire**







Dr. Bassam

All of the following statements concerning bile acid are CORRECT, EXCEPT:

1. They are degradation product of old RBC
2. They are essential for digestion and absorption of fat and fat soluble vitamins
3. They stimulate peristaltic movements
4. They have antiseptic action
5. 95% of the secreted bile acids are reabsorpted mostly in the termonal ileum

The most dangerous complication after thyroid surgery is:

1. Hypoparathyroid tetany
2. Hypothyroidism
3. Respiratory obstruction
4. Hoarseness of voice
5. Recurrence

On plain X-ray of a patient with acute abdomen air is seen in the biliary tree; the likely diagnosis is:

1. Calcular obstructive jaundice
2. Gall stone ileus
3. Chronic pancreatitis
4. Mucocele of gall bladder
5. Viral hepatitis

A middle-aged female with right upper abdominal pain, fever, rigors and jaundice suggests the diagnosis of:

1. Viral hepatitis
2. Ascending cholangitis
3. Acute pancreatitis
4. Acute pyelonephritis
5. Mucocele of the gall bladder

ONE of the following is NOT used nowadays in the investigation of the biliary system:

1. Oral cholecystography
2. Ultrasonography
3. Intravenous cholangiography (IVC)????
4. CT scan
5. Endoscopic retrograde cholangiopancreatography (ERCP)

The most common biliary stone is:

1. Bile pigment stone
2. Calcium carbonate
3. Calcium oxalate
4. Mixed stones
5. Pure cholesterol stone

All of the following are possible complications of biliary stones, EXCEPT:

1. Obstructive jaundice
2. Ascending cholangitis
3. Intestinal obstruction
4. Acute pancreatitis
5. Gastric ulcer

Concerning carcinoma of the thyroid which ONE carries the best prognosis:

1. Papillary carcinoma
2. Follicular carcinoma
3. Lymphoma
4. Medullary carcinoma
5. Anaplastic carcinoma

All of the following are absolute indications for splenectomy, EXCEPT:

1. Massive tear of the spleen
2. Malaria
3. Congenital spherocytosis
4. Splenic abscess
5. Hydatid cyst of the spleen

The following conditions are associated with increase of gall stone formation, EXCEPT:

1. Multiparity
2. Obesity
3. Resection of terminal ileum
4. Ulcerative colitis
5. Hemolytic anemia

All of the following are indications for splenectomy, EXCEPT:

1. Congenital spherocytosis
2. Splenic abscess
3. Typhoid fever
4. Splenic hydatid cyst
5. Traumatic massive laceration

All of the following are manifestations of thyrotoxicosis, EXCEPT:

1. Weight loss in spite of good appetite
2. Palpitation
3. Excessive warm sweating
4. Preference for hot weather
5. Nervousness

Following splenectomy in a child having blood dyscrasia which ONE of the following drugs has to be given:

1. Tetanus toxoid
2. Antitetanic human immunoglobulin
3. Pneumococcal vaccine
4. Long term tetracycline therapy
5. Triple vaccine

The drug of choice in treatment of amebic hepatitis is:

1. Methicillin
2. Rifampicin
3. Mebendazole
4. Metronidazole
5. Omeprazole

All of the following can help in the diagnosis of hydatid disease of the liver, EXCEPT:

1. Stool examination
2. Indirect hemagglutination test
3. Ultrasonography
4. CT scanning
5. Casoni test

All of the following are manifestations of thyrotoxicosis, EXCEPT:

1. Exophtalmos
2. Pretibial myxedema
3. Preference for cold
4. Increased body weight
5. Excessive sweating

All of the following may be used in the treatment of thyrotoxicosis, EXCEPT:

1. Neomeracozole
2. Radio-active iodine
3. Surgery
4. Propanolol-inderal
5. Cyclophosphamide

The most dangerous immediate complication after thyroid surgery is:

1. Hypothyroidism
2. Hypoparathyroidism
3. Hoarseness of voice
4. Respiratory obstruction
5. Wound infection

Regarding abdominal pain, ONE is INCORRECT:

1. Pain an hour after meals suggest duodenal ulcer
2. Pain with vomiting after meals only occurs with pyloric stenosis
3. Epigastric pain early at night suggests hiatus hernia
4. Pain 15 minutes after meals suggests gastric ulcer
5. Biliary colic may radiate to the left side of abdomen

Regarding multinodular goiter ONE is CORRECT:

1. 10-15% of them will be malignant
2. Surgery is always advisable because of fear of malignancy
3. The main indication for surgery is pressure symptom or cosmetics
4. Giving L-thyroxin and inderal is the treatment of choice
5. Fine needle biopsy is contra-indicated because of possible bleeding

Splenectomy is beneficial in only ONE of the following:

1. Malaria
2. Pernicious anemia
3. Typhoid fever
4. Congenital spherocytosis
5. Myeloid leukemia

A 32-years-old female found accidentally to have asymptomatic multiple small gall bladder stones; the best action to be taken is:

1. Follow up and observation to have surgery when symptomatic
2. Cholecystostomy and removal of the stones
3. Lithotripsy by shock waves
4. Chemical dissolution of the stones
5. Cholecystectomy

The most common organ in which hydatid cyst arises is:

1. Lung
2. Liver
3. Spleen
4. Brain
5. Bone

The dietary element necessary for the formation of thyroid hormones is:

1. Iron
2. Iodine
3. Copper
4. Magnesium
5. Sodium

All of the following may be used in the treatment of thyrotoxicosis, EXCEPT:

1. Radioactive iodine
2. Carbamazole
3. Potassium perchlorate
4. Cyclophosphamide
5. Propranolol

All of the following are manifestations of thyrotoxicosis, EXCEPT:

1. Loss of weight in spite of good appetite
2. Preference for heat
3. Excessive sweating
4. Hyperkinetic movements
5. Pretibial myxedema

The malignant thyroid tumor that occurs in young ages, spreads mainly by lymphatics and has good prognosis is:

1. Papillary carcinoma
2. Medullary carcinoma
3. Follicular carcinoma
4. Lymphosarcoma
5. Anaplastic carcinoma

The manifestations of para-thyroid insufficiency that occurs after thyroid surgery starts usually:

1. Immediately after surgery
2. Few hours after surgery
3. 2-5 days after surgery
4. Two months after surgery
5. Six months after surgery

Concerning amebic liver abscess all of the following are CORRECT, EXCEPT:

1. Although most cases develop soon after an attack of amebic dysentery occasionally amebic abscess develops in a carrier who has not had overt dysentery
2. In 70% of cases the abscess is solitary and located in the upper part of the right lobe
3. Clinical picture simulates acute cholecystitis
4. Metronidazole 800mg tree times daily for 7-10 days may abort early cases
5. If medical treatment fails incision and drainage of the abscess must be done

Concerning hydatid cyst all of the following are CORRECT, EXCEPT:

1. It is the larval stage of the worm tinea echinococcus
2. The liver is the most common organ infected
3. The patient may remain symptom free for long time
4. Suppuration, rupture and death of the cyst are known sequela
5. Treatment of choice is by long term therapy with mebendazole

In extrahepatic biliary obstruction all of the following are TRUE,EXCEPT:

1. Elevated direct serum bilirubin
2. Prolonged protrombine time that does not respond to parenteral vitamin K administration
3. Clay-colored stool
4. Bile in urine
5. Increased serum alkaline phosphatase

The most common tumor found in the liver is:

1. Hemangioma
2. Hepato-cellular adenoma
3. Metastatic nodules
4. Cholangiocarcinoma
5. Hepatocarcinoma

Concerning amebic liver abscess all of the following are CORRECT, EXCEPT: (повтор)

1. Usually develops after an attack of amebic dysentery
2. Anemia, loss of weight, early complexion and fever are usually present
3. Most of the abscesses occur in the right lobe
4. Metronidazole (Flagyl) 800 mg tree times d aily for 7-10 days may abort early cases
5. If medical treatment fails surgical excision of the abscess must be done

All of the following stones may be found in the biliary tract, EXCEPT:

1. Pure cholesterol stone
2. Mixed stone
3. Cystine stone
4. Pigment stone
5. Calcium carbonate stone

Grossly enlarged spleen occurs in ONE of the following:

1. Typhoid fever
2. Sickle cell anemia
3. Rheumatoid arthritis
4. Chronic myeloid leukemia
5. Infective endocarditis

Which of the following is the most common cause of gynecomastia:

1. Liver failure
2. Hormonal therapy
3. Castration
4. Tumors
5. Idiopathic

The thyroid tumor which is may be associated with pheochromocytoma is:

1. Papillary carcinoma
2. Medullary carcinoma
3. Follicular carcinoma
4. Anaplastic carcinoma
5. Malignant lymphoma

All of the following are manifestations of thyrotoxicosis, EXCEPT: (повтор)

1. Loss of weight in spite of increased appetite
2. Preference for heat
3. Hyperkynetic movements
4. Pulse rate 120 per minute
5. Goiter

Gall stones may develop in ONE of the following disease:

1. Idiopathic thrombocytopenic purpura
2. Sickle cell anemia
3. Hemophilia
4. Congenital spherocytosis
5. Myelofibrosis

Concerning splenectomy only ONE of the following is TRUE:

1. Must be done in all splenic injuries in children
2. Contraindicated in congenital spherocytosis
3. Usually beneficial in patients with thalassemia minor
4. It is associated with an increased risk of infections in the young children
5. It is usual form of treatment of sickle cell anemia

The most serious immediate complication after thyroid gland surgery is:

1. Hypothyroidism
2. Hypoparathyroidism
3. Respiratory obstruction
4. Hoarseness of voice
5. Wound infection

Acute upper right abdominal pain with high fever, rigors and tinge of jaundice are manifestations of:

1. Ascending cholangitis
2. Acute biliary pain
3. Viral hepatitis
4. Mucocele of the gall bladder
5. Acute cholecyctitis

Gall stones may develop in ONE of the following disease:

1. Idiopathic thrombocytopenic purpura
2. Sickle cell anemia
3. Hemophilia
4. Congenital spherocytosis
5. Myelofibrosis

ALL of the following are features of myxedema, EXCEPT:

1. Hoarseness of voice
2. Pretibial myxedema
3. Pleural effusion
4. Menorrhagia
5. Deafness

ALL of the following statements concerning bile acids are CORRECT, EXCEPT:

1. They are degradation product of old RBC’s
2. They are essential for digestion and absorption of fat and fat soluble vitamins
3. They stimulate peristalsis movements
4. They have antiseptic action
5. All of the secreted bile acids are reabsorbed mostly in terminal ileum

**Regarding stones in the gallbladder,the correct answer is:**

1. pigment stones are the most common
2. Pigment stones are due increased excretion of polymerised conjugated bilirubin
3. Are not a risk factor for the development of gallbladder carcinoma
4. 90% of gallstones are radio-opaque
5. A mucocele of the gallbladder is usually treated by surgery

**The thyroid malignancy that have the best prognosis:**

1. Papillary
2. Medullary
3. Anaplastic

**Which thyroid condition is associated with MEN2:** Medullary carcinoma

**Wrong about carcinoid syndrome:**

Carcinoid syndrome can be diagnosed using analysis of urine for:  
“With a certain degree of clinical suspicion, the most useful initial test is the 24 hour [urine](http://en.wikipedia.org/wiki/Urine) levels of [5-HIAA](http://en.wikipedia.org/wiki/5-HIAA) (5-hydroxyindoleacetic acid), the end product of serotonin metabolism. Patients with carcinoid syndrome usually excrete >25 mg of 5-HIAA per day.”

**Wrong about papillary carcinoma of the thryoid:**

1. Occurs in the elderly
2. Multiple areas
3. TSH dependent

**A person with appendicitis was not diganosed. Therefore, he developed an appendicular abscess. All the following are correct except:**Appendicectomy is mandatory once symptoms disappear.

**Regarding post-operative pneumonia, all are true, except:**

1. Results from accumultation of traceo-bronchial secretions
2. Mostly due to gram –ve bacteria.
3. Prophylactic antibiotics can prevent it

**A solitary thyroid nodule in a 35 year-old euthyroid woman with a goiter is likely to be:**

Simple thyroid nodule

**DR. SA3D**

1. The best prophylactic measure against the gangrene following soft tissue injury is:
2. Early administration of antibiotics
3. Hyperbaric oxygen chamber therapy
4. Early adequate debridement of necrotic tissue
5. Early administration of anti-gangrene serum
6. Immobilization of the injured part
7. All of the following are causes of paralytic ileus, EXCEPT:
8. Peritonitis
9. Abdominal trauma
10. Hypokalemia
11. Anemia
12. Excessive administration of ganglioblockers
13. In massive blood transfusion which ONE is NOT a complication:
14. Acute congestive heart failure
15. Transmission of infections
16. Transfusion reactions
17. Hypercalcemia
18. Hyperkalemia
19. All of the following drugs may produce GI bleeding, EXCEPT:
20. Salicylates
21. Mg trisilicate
22. Steroids
23. Anticoagulants
24. Phenothiazines

*Answer: B. mg trisilicate is an antiacid.*

1. Regardless of age or sex the most common neck swelling is:
2. Lymph node enlargement???
3. Goiter
4. Thyroglossal cyst
5. Aneurysm of carotid artery
6. Salivary gland tumor
7. In elderly patient with a recent alteration of bowel habits and painless bleeding per rectum the likely diagnosis is:
8. Inflammatory bowel disease
9. Internal hemorrhoids
10. Diverticulosis coli
11. Large bowel carcinoma
12. Meckel’s diverticulum with heterotopic gastric mucosa
13. In all the following acute abdominal conditions vomiting is infrequent, EXCEPT:
14. Intra-abdominal bleeding
15. Perforated peptic ulcer
16. High small intestinal obstruction
17. Acute appendicitis
18. Volvulus of sigmoid colon
19. The first to be managed in multi-injured patient is:
20. Shock
21. Intracranial hematoma
22. Respiratory problems
23. Open fracture of long bones
24. Crushed contaminated wounds
25. In wound dehiscence all are considered to be causes, EXCEPT:
26. Anemia
27. Hypoalbuminemia
28. Ascites??
29. Chronic pulmonary disease
30. Chronic cough
31. Management of contaminated contused wound is best by:
32. Primary suturing
33. Dressing and antibiotics
34. Wound debridement, dressing daily, antibiotics and suturing later on
35. Primary excision and grafting
36. Tetanus toxoid and primary suturing
37. Swelling in the midline of the neck could be ONE of the following, EXCEPT:
38. Thyroglossal cyst
39. Dermoid cyst
40. Thyroid gland
41. Enlarged lymph node
42. Branchial cyst
43. Patient with hemorrhagic shock, the best i.v. solution to be given until blood is at hand is:
44. G/W 5%
45. G/W 10%
46. Ringer’s lactate
47. Albumin
48. Aminoacid solution

15. All are causes of melena, EXCEPT:

1. Esophageal varices
2. Bleeding duodenal ulcer
3. Aorto-duodenal fistula
4. Hematobilia
5. Hemorrhoids

1. All of the following are possible complications of blood transfusion, EXCEPT:
2. Congestive heart failure
3. Hyperkalemia
4. Hypercalcemia
5. Incompatibility
6. AIDS
7. Most common cause of abdominal pain in adolescent age is:
8. Volvulus
9. Intussusception
10. Appendicitis
11. Mesenteric adenitis
12. Cholecystitis
13. All of the following data are considered positive peritoneal lavage after blunt abdominal trauma, EXCEPT:
14. Amylase positive in the lavage fluid
15. Bile positive in the lavage fluid
16. Red blood cell count 100 000/ml
17. Albumin of 5 g/l
18. Gram stain positive for bacteria in the lavage fluid
19. All of the following are manifestations of paralytic ileus, EXCEPT:
20. Abdominal colic
21. Vomiting
22. Constipation
23. Abdominal distension
24. Dehydration
25. A recurrent painful swelling in the submandibular triangle at meal times is a characteristic of:
26. Stone in the duct of the submandibulary salivary gland
27. TB submandibular lymphadenitis
28. Branchial cyst
29. Thyroglossal cyst
30. Pharyngeal pouch
31. The most common cause of colonic obstruction is:
32. Adhesions
33. Diverticulitis
34. Cancer
35. Intussusception
36. Hernia
37. n acute bleeding from esophageal varices after resuscitation the treatment of choice is:
38. Intra-arterial vasopressin
39. Balloon tamponade
40. Endoscopic sclerotherapy
41. Portocaval shunt
42. Gastro-esophageal devascularization
43. Which of the following organisms is the cause of gas gangrene:
44. Clostridium botulinum
45. Clostridium welchi
46. Clostridium tetani
47. Ischerichia coli
48. Bacteroides fragilis

*Clostridium welchi = Clostridium perfringens*

1. Which of the following solutions is the best plasma expander:
2. 5% dextrose water
3. 0,9% NaCl
4. 0,45% NaCl
5. Gelfusine
6. 0,18% NaCl

Geflusine: Colloid.

1. All of the following are potential risks of massive blood transfusion, EXCEPT:
2. Acidosis
3. Impaired hemostasis
4. Hypokalemia
5. Citrate toxicity
6. Impaired oxygen delivery
7. A painless soft tissue mass particularly attached to skin with well defined slippery edge is:
8. Cystic hygroma
9. Cavernous hemangioma
10. Lipoma
11. Neurofibroma
12. Fibroma
13. All of the following conditions are commonly caused by streptococcal infections, EXCEPT: (повтор)
14. Cellulitis
15. Erysipelas
16. Furuncle (Boil)
17. Scarlet fever
18. Tonsillitis
19. The most common organ in which carcinoid tumor arises is:
20. Rectum
21. Coon
22. Small intestine
23. Appendix
24. Bronchus
25. Regarding crushed (war) wounds all of the following should be done, EXCEPT:
26. Good debridement
27. Washing the inside of the wound with normal saline
28. Giving good doses of broad spectrum antibiotics
29. Giving tetanus immunoglobulin
30. Primary wound closure
31. The most common neck swelling is:
32. Carotid body tumor
33. Sternomastoid tumoe
34. Enlarged lymph node
35. Cystic hygroma
36. Branchial cyst
37. Concerning Hodgkin’s lymphoma all of the following are correct, EXCEPT:
38. It occurs in both males and females but more in males
39. Children and old ages are the usual victims
40. It is uncommon in Negroes
41. It starts usually in extra-nodal tissues
42. Which of the following areas of the large bowel most frequently involved by amebiasis:
43. Rectum
44. Sigmoid
45. Cecum
46. Splenic flexure
47. Transverse colon
48. Which of the following antibiotics is the best treatment for pseudomembranous colitis:
49. Ampicillin
50. Flucloxacillin
51. Gentamycin
52. Vancomycin
53. Cefuroxime
54. All of the following are painful anal conditions, EXCEPT:
55. Anal fissure
56. Peri-anal abscess
57. Peri-anal hematoma
58. Third degree hemorrhoids
59. Thrombosed internal hemorrhoids
60. A 15-years-old patient presented with a painless rounded midline swelling of the anterior aspect of the neck that moves with deglutition and protrusion of the tongue is mostly having:
61. Sublingual dermoid
62. Cystic hygroma
63. Thyro-glossal cyst
64. Solitary nodule of the thyroid isthmus
65. Submental lymph node
66. Bleeding in hemophilic baby is best managed by giving:
67. Fresh whole blood
68. Fresh frozen plasma
69. Packed red cells
70. Platelet rich plasma
71. Cryoprecipitate

Precipitate that forms when soluble material is cooled, especially with reference to the precipitate that forms in normal blood plasma which has been subjected to cold precipitation and which is rich in factor VIII.

1. Which ONE of the following has the first priority in the management of multi-injured patient:
2. Severely contaminated contused wound
3. Compound fracture of both bones of the leg
4. Massive hemo-pneumothorax
5. Intracranial hematoma
6. Rupture of the spleen
7. Diseased or surgically resected terminal ileum will significantly reduced the absorption of ONE of the following:
8. Iron
9. Bile salts
10. Folic acid
11. Vitamin C
12. Calcium
13. Acute toxic dilatation of the colon is typically a complication of ONE of the following:
14. Perforated carcinoma of the colon
15. Amebic colitis
16. Ulcerative volitis
17. Large bowel obstruction
18. Ischemic colitis
19. Concerning Crohn’s disease, all of the following are CORRECT, EXCEPT:
20. It is a chronic transmural granulomatous inflammation
21. It involves the terminal ileum only
22. It commonly presents an abdominal mass, bloody diarrhea and anemia
23. Internal fistulation is common
24. Commonly associated with perianal suppuration
25. Regarding post-traumatic dislocation of the shoulder joint ONE of the following is CORRECT:
26. Anterior dislocation is uncommon
27. Posterior dislocation could be the result of electric shock injury
28. Axillary nerve is injured in almost 90% of cases
29. Open reduction is done immediately after the injury
30. Recurrent dislocation usually occurs in the elderly
31. The commonest cause of acute scrotal pain in a 12 years old child with no fever and normal urine analysis is:
32. Epididymitis
33. Orchitis
34. Varicocele
35. Torsion of testis
36. Hydrocele
37. The most dangerous type of wounds is the:
38. Incised
39. Lacerated
40. Penetrating
41. Crushed
42. Abrasion
43. The best prophylactic measure against gas gangrene following soft tissue injury is:
44. Early administration of antibiotics
45. Hyperbaric oxygen chamber therapy
46. Early adequate debridement of necrotic tissue
47. Early administration of anti-gas gangrene serum
48. Immobilization of the injured part
49. Which of the following is the most significant aid in diagnosis of acute abdominal conditions:
50. Ultrasonography
51. CT scanning
52. Selective angiography
53. Good history and physical examination
54. Laboratory investigations
55. Bloody diarrhea is caused by ALL of the following, EXCEPT:
56. Bacillary dysentery
57. Cholera
58. Colonic carcinoma
59. Ulcerative colitis

E. Shistosomiasis

1. Which of the following is considered as a poor prognostic indicator in upper gastrointestinal bleeding:
2. A presentation of melena rather than hematemesis
3. Young age
4. Chronic rather than acute ulcer
5. Duodenal rather than gastric ulcer
6. Female sex
7. **With acute cholecystitis,one of the following may be true:** 
   1. Gallstones must be present to have jaundice
   2. It is better to operate after one week
   3. Commonly leads to suppurative cholangitis
   4. Leucocytosis is infrequent
   5. it is possible to do cholecystectomy in the 1st 72 hours\*
8. **In the pathology of ulcerative colitis all are true except**
   1. mucosa & submucosa are mainly involved
   2. The rectum is almost always involved
   3. 10% patients have terminal ileal disease
   4. intestinal fistulae are common\*
   5. The serosa is usually normal
9. **metastasis to bone is common with the following malignant tumours except :**
10. Thyroid gland
11. Breast
12. Prostate
13. Rectum\*
14. e.kidney
15. **complications of Blood transfusion include the following except :**
16. a.urticaria
17. b.hypokalaemia\*
18. c.hepatitis C
19. d. hypotension
20. e.jaundice
21. **All are advantages of autologous blood transfusion except:** 
    1. Fully compatible
    2. No transfusion reaction
    3. can be stored for 5 weeks
    4. No need to cross-match
    5. No risk of contamination of blood\*
22. **The most common site for adenocarcinoma of the small intestine is:**
23. Dudoenum
24. Jeujunum
25. Proximal ileum
26. Distal ileum
27. At the ileocecal junction.
28. **Wrong about achalasia:**
29. Equal in males and females
30. **Wrong about blood transfusion:**
31. Massive blood transfusion is replacing 50% of the patient’s blood in 36-48 hours.
32. **Wrong about blood transfusion:**
33. Hyperkalemia
34. Hypocalcemia
35. Fever is mostly due to leukocyte reaction
36. To avoid complications, it must be over 12 hours (Yes… the option was 12 hours).
37. **All of the following can be transmitted via blood transfusion, except:**
38. HIV
39. HBV
40. Sarcoidosis
41. **Wrong about ulcerative colitis:**A. Commonly causes enteroenteric fistula
42. **Wrong about Crohn’s disease:**
43. More common In Jews than Asians.
44. **All of the following favor the formation of gallstones except:**
45. Crohns disease
46. Hypoparathyroidism
47. **Wrong about wound healing:**
48. Cytokines are responsible for regulating fibrosis
49. Maximum tensile strength is reached over 6 months.
50. **Wrong about Barret’sesophagous:**
51. Change to intestinal epithelium
52. The process is reversible
53. **Which of the following is least used in diagnosis in abdominal trauma:**
54. FAST
55. DPL
56. X-ray
57. MRI
58. **Wrong about retroperitoneal injury?**
59. DPL is useful.
60. Repeat clinical examination.
61. Exploration is most commonly chosen.
62. Regions II and III can be observed
63. **All can be complications of liver hydatid cyst, except:**
64. Hepatoma
65. Bronchopleuralfistual
66. Secondaries
67. **True about hydatid disease:**
68. It is endemic in europe and the USA.
69. It incidence is unrelated to sex and race.
70. **We can know the following information from a barium enema in ulcerative colitis, except:**
71. Short colon
72. Loss of mucosal haustrations of the large bowel.
73. **About Mallory-Weiss syndrome:** 
    * Treatment can be supportive - Can be a cause of massive upper GI bleeding

**DR. ABDALLAH ALRAWI**

1. **Inguinal lymph nodes drain the following sites, EXCEPT:**

# Testis

## Perineum

1. Buttocks
2. Feet
3. Scrotum
4. Soft cystic brilliantly translucent swelling at the side of the neck appearing at birth or early infancy is:
5. Pharyngeal pouch
6. Branchial cyst
7. Carotid body tumor
8. Cystic hygroma
9. Sternomastoid tumor
10. Concerning torsion testicles all of the following are TRUE, EXCEPT:
11. The condition is rare in normal fully descended testicles
12. The highest incidence is between 10 and 25 years of age
13. The condition stimulates strangulated inguinal hernia or epididimoorchitis
14. Acute straining during defecation or lifting heavy weight is an axciting cause
15. Treatment consists of exploration of the affected side only
16. Undescended testicle is commonly associated with:
17. Direct inguinal hernia
18. Hypospadia
19. Indirect inguinal hernia????
20. Paraphymosis
21. Femoral hernia
22. In strangulated inguinal hernia during childhood which of the following is TRUE:
23. The pain is of low intensity and gradual onset
24. Local tenderness is mild
25. The cause is adhesions at the neck of the sac
26. The incidence of strangulation is lower the older is the child
27. Immediate operation must be done even the hernia reduced by sedation
28. Concerning nephroblastoma (Wilm’s tumor) all the following are TRUE, EXCEPT:
29. Arising from embryonic nephrogenic tissue, so it is a mixed tumor
30. Originally it is situated in one pole of the kidney, and bilateral cases occasionally are seen
31. The most common presentation is a progressively enlarging abdominal mass noticed by the parents
32. Progressive deterioration of general health, anemia and pyrexia are common manifestations
33. The tumor spreads mainly by lymph to the para-aortic lymph nodes
34. In cases of torsion testis all are TRUE, EXCEPT:
35. Orchidopexy of the affected side only
36. Undescended testis is more liable for torsion
37. Orchidopexy of both testis must be done
38. It affects young age males
39. Clinically it simulates acute epididymoorchitis
40. Intussusception is a cause of all of the following, EXCEPT:
41. A mass in the abdomen
42. Abdominal colic
43. Frequency of micturition
44. Passage of blood per rectum
45. Intestinal obstruction
46. The most common cause of minimal bleeding per rectum in children is:
47. Volvulus neonatorum
48. Necrotising enterocolitis
49. Fissure in anus
50. Hemorrhagic disease
51. Polyp
52. All of the following are causes of non bile stained vomiting, EXCEPT:
53. Feeding problem
54. Gastro-esophageal reflux
55. Pyloric stenosis
56. Duodenal atresia
57. Hidden infection (meningitis)
58. Regarding Meckel’s diverticulum all of the following are CORRECT, EXCEPT:
59. It is an acquired diverticulum resulting from an increased intraluminal pressure
60. It is situated usually 2-3 feet proximal to ileo-cecal junction
61. It may be silent, discovered incidentally during laparatomy
62. It may cause intestinal obstruction
63. It nay cause frank bleeding per rectum
64. Concerning undescended testicle, all of the following are TRUE, EXCEPT:
65. The testis may be incompletely descended or in an ectopic site
66. The condition may be unilateral or bilateral
67. In neglected bilateral cases sterility usually occurs
68. The affected testis is more liable to trauma, torsion and malignancy
69. In unilateral cases surgical treatment has to be done just after puberty hhh
70. After difficult labor the newly born infant found to have a huge mass in one side of his neck which is softly cystic, partially compressive and brilliantly translucent; this infant has:
71. Sternomastoid tumor
72. Branchial cyst
73. Cystic hygroma
74. Pharyngeal pouch
75. Cervical rib
76. In metastatic involvement of inguinal lymph nodes the primary lesion may be ONE of the following, EXCEPT:
77. The lower limb
78. Scrotum
79. Skin below the level of the umbilicus
80. Testis
81. Lower half of the anal canal
82. The newly born regurgitates its entire first and every feed, pours saliva almost continuously. There are manifestation of:
83. Imperforated anus
84. Congenital diaphragmatic hernia
85. Atresia of duodenum
86. Atresia of the esophagus
87. Meckel’s diverticulum
88. Concerning hypertrophic pyloric stenosis of infants all of the following are CORRECT, EXCEPT:
89. Manifestations starts usually 3-4 weeks after birth
90. Bile stained projectile vomiting is the presenting symptom in all cases
91. A visible peristalsis after feeding may be seen passing from the left to right across the upper abdomen
92. Constipation and loss of weight are usually present
93. Surgery is the treatment of choice
94. A previously healthy 8 months old boy started to suffer from repeated abdominal pain, vomiting and red currant jelly stool; he should be regarded to have:
95. Volvulus neonatorum
96. Intussusception
97. Gastroenteritis
98. Meconium ileus
99. Meckel’s diverticulitis
100. Circumcision is contra-indicated in babies with:
101. Long prepuce
102. Phimosis
103. Hypospadia
104. Hemophilia
105. Recurrent balanitis
106. A softly cystic partially compressible and brilliantly translucent swelling at the side of the neck in a newly born is (повтор)
107. Sternomastoid tumor
108. Pharyngeal pouch
109. Laryngocele
110. Cystic hygroma
111. Carotid body tumor

20. The commonest cause of acute scrotal pain in a 12-years-old child with no fever and normal urine analysis is:

1. Epididimitis
2. Orchitis
3. Varicocele
4. Torsion of testicle
5. Hydrocele

21. A newly born presented with persistent bile stained vomiting. Straight, erect abdominal radiograph showed “double bubble” appearance in the upper abdomen. This infant has:

1. Meconium ileus
2. Duodenal atresia
3. Imperforated anus
4. Hypertrophic pyloric stenosis
5. Congenital intussusception
6. The most common presentation of Meckel’s diverticulum in children is:
7. Frank rectal bleeding
8. Acute diverticulitis
9. Intussusception
10. Perforation of the diverticulum
11. Volvulus of small intestine
12. An 8 months male baby presented with sudden crying with flexion of his legs to abdomen and vomiting. Few hours later he passed bloody diarrhea with mucus. The pathological diagnosis is:
13. Gastroenteritis
14. Food poisoning
15. Intussusception
16. Meckel’s diverticulum
17. Acute appendicitis
18. A 13 years old boy presented with a rounded painless swelling in the midline of the anterior aspect of his neck that moves with deglutition and with protrusion of the tongue is mostly having:
19. A solitary thyroid isthmus nodule
20. Sublingual dermoid cyst
21. Thyro-glossal cyst
22. Carotid body tumor
23. Chondroma of the thyroid cartilage

|  |
| --- |
| **Potato body tumor:** a firm nodular mass in the neck, usually a carotid body tumor (chemodectoma). |

1. A previously healthy 8 months boy started to suffer from repeated abdomunal pain, vomiting, and red current jelly stool should be regarded to have:
2. Volvulus neonatorum
3. Intussusception
4. Gastroenteritis
5. Meconium ileus
6. Meckel’s diverticulitis
7. Regardless of age or sex the most common neck swelling is:
8. Lymph node enlargement
9. Goitre
10. Thyroglossal cyst
11. Aneurysm of carotid artery
12. Salivary gland tumor
13. A newly born baby with continuos salivation and regurgitation, his first and every feed accompanied with coughing and cyanosis has:
14. Duodenal atresia
15. Esophageal atresia
16. Congenital hypertrophic pyloric stenosis
17. Volvulus neonatorum
18. Diaphragmatic hernia
19. **Common causes of acute abdominal pain in children.**
    1. Cholecystitis.
    2. Meckels diverticulum.
    3. Mesenteric ischemia.
    4. Mesenteric adenitis.
    5. Volvulus neonatorum.
20. **Regard infantile hypertrophic pyloric stenosis, all true except.**
    1. Double- bubble view on plain x-ray.
    2. May result in a metabolic alkalosis.
    3. May result in hypokalemia.
    4. Treated surgically by pyloromyotomy.
    5. Palpable olive like mass on the epigastric region.
21. **Regard abdominal masses in children, all true except.**
22. Appendicular mass often treated conservatively.
23. Sausage shaped like mass, with red currant jelly stool.
24. Tense loop of bowels, with bile stained vomiting.
25. Gallbladder tumor, as palpable right subcostal mass.
26. The commonest is fecal impaction.
27. **The true statement concerning scrotal swelling in children.**
28. A hydrocele usually has multiple septae.
29. Needle drainage of a hydrocele usually provides long term resolution.
30. Inguinal hernia in a child is treated by herniorrhaphy.
31. Orchitis can be always treated by orchidopexy.
32. A hydatid cyst of Morgagni is a small cystic remnant at the upper Pole of the testis.
33. **The following are differential diagnosis of midline neck swelling.**
    1. Sub mental lymph node.
    2. Laryngocele.
    3. Branchial cyst.
    4. Submandibular cystic hygroma.
    5. Carotid body tumor.
34. **Regard branchial cyst, all true except.**
    1. May be confused with nodal metastasis.
    2. Is treated by aspiration.
    3. Is derived from ectoderm of the second branchial pouch.
    4. Is lined with squamous epithelium and contains cholesterol crystals.
    5. May complicated with branchial fistula.
35. **The following statements are true except.**
    1. Duodenal atresia is treated by duodeno-duodenostomy.
    2. Duodenal atresia is commonly associated with Downs syndrome.
    3. Meconium ileus occurs in approximately 50% of children with cystic fibrosis.
    4. Neonatal intestinal obstruction is characterized by bilious vomiting, abdominal distension and failure to pass meconium.
    5. Ano- rectal atresia is more common in boys than girls.
36. **Concerning esophageal atresia, all true except.**
    1. The most freguent type is a proximal oesophageal atresia with a distal

Tracheo-oesophageal fistula.

* 1. There is a high incidence of associated anomalies.
  2. It may be associated with maternal polyhydromnios.
  3. Treated involves a right thoracotomy and anastomosis of oesophagus.
  4. It effects 1/100 live birth.

1. **Which one is true from the following statement.**
   1. Infantile hypertrophic pyloric stenosis is the commonest cause Of non-bilious vomiting in infants.
   2. In equivocal cases of infantile hpertrophic pyloric stenosis, Where a pyloric tumor is not palpable, a barium meal is the only Investigation of choice.
   3. Infantile hypertrophic pyloric stenosis should be treated by immediate Emergency laparotomy.
   4. Intussusception occurs most frequently in the (2-3) year age group.
   5. Ileo-ileal is the most frequent type of intussusception.
2. **The following statement are true except.**
3. In gastroschisis there is no peritoneal sac and the eviscerated bowel Is exposed to amniotic fluid during intra uterine life.
4. Surgery for testicular torsion is an absolute surgical emergency.
5. Failed regression of the omphalo-mesenteric(vitelline)duct, Result on Meckel`s diverticulum.
6. A contrast enema in Hirschsprung`s disease to identifies the transition Zone between the ganglionic and aganglionic segment.
7. The aganglionic segment is the dilated proximal part of the bowel.
8. **Wrong about rectal prolapse:**
9. Can be the first presentation of cystic fibrosis
10. Can be associated with myelomeningocele
11. Can be associated with ectopic visica
12. The best first management is Thierch operation.
13. Can be easily differentiated from tip of intussuception.   
    Answer: D. Thierch operation is for rectal prolpase, yes. However, it is NOT the FIRST management.
14. **About necrotizing enterocolitis**
15. **Wrong about torsion of testicles:**
16. Surgery can be delayed up to 6 weeks.
17. **Wrong about diaphragmatic eventration:**A. All require treatment.
18. The Cause of death is due to lung hypoplasia.
19. …
20. **Regarding congentialdiaphargmatic hernia:**
21. Bochedalak hernia is on the right.
22. Morgagni is postero-lateral…
23. **A child with confirmed esophageal atresia with no distal tracheoesophagealfistual, select the correct answer:**AXR will show gaseless abdomen.
24. **Thyroglossal duct cysts:**
25. Can be deviated from the medline.
26. Tract can contain thyroid tissue.
27. Moves upward with portrusion of the toungue and swallowing.
28. ???

**Dr. Jameel**

1. Which of the following i.v. solution has almost the same electrolytes like plasma:

# Dextrose 5%

1. Dextran 40
2. Normal saline
3. Dextrose saline
4. Ringers lactate
5. Breast cancer is least associated with ONE of the following:
6. Positive family history of breast cancer
7. Late first pregnancy
8. Multiparity
9. Hard fibroadenoma
10. Fibrocystic disease
11. Fibroadenoma may be associated with ONE of the following breast diseases:
12. Fibrocystic disease of breast
13. Intraductal papilloma
14. Duct ectasia
15. Galctocele
16. Medullary carcinoma
17. Nipple discharge can be a manifestation of all of the following, EXCEPT:
18. Fibrocystic disease
19. Duct ectasia
20. Fibroadenoma???/
21. Breast carcinoma
22. Intraductal carcinoma
23. In extradural hematoma all are TRUE, EXCEPT:
24. History of head injury
25. Lucid interval
26. Convulsions or hemiplegia of the contralateral side
27. Dilatation of the ipsilateral pupil
28. The source of bleeding is one of the scalp vessels
29. In breast abscess the commonest causative bacteria is:
30. Staphylococcus????
31. Streptococcus
32. Pneumococcus
33. Tuberculous bacilli
34. Bacteroids
35. All of the following are causes of hypercalcemia, EXCEPT:
36. Acute pancreatitits
37. Hyperparathyroidism
38. Hypervitaminosis D
39. Sarcoidosis
40. Milk alkali syndrome
41. The scalp hematoma that takes the shape of the underlying skull bone and with time it may give a false impression of a depressed fracture is:
42. Subcutaneous hematoma
43. Subgaleal hematoma
44. Intramuscular hematoma
45. Sub-epicranial hematoma
46. Extradural hematoma
47. Major extracellular cation is:
48. Na – Sodium
49. K – Potassium
50. Mg – Magnesium
51. Hco3 – Bicarbonate
52. Cl – Choride
53. A 40-years-old lady with premenstrual breast pain, nipple discharge of variable color and the breasts are coarse nodular and tender; this lady probably has:
54. Acute mastitis
55. Duct ectasia
56. Fat necrosis
57. Fibroadenosis of the breast
58. Paget’s disease of the breast
59. A 35-years-old man involved in road traffic accident presented to you in deep coma, pin pointed pupils. High fever and spastic rigidity of both upper and lower limbs; this man has:
60. Frontal lobe injury
61. Extradural hemorrhage
62. Subdural hemorrhage
63. Brain stem injury

Cerebellar injury

1. Bleeding from the nipple may occur in all of the following, EXCEPT:
2. Fibroadenoma
3. Fibrocystic disease
4. Duct ectasia
5. Intraductal papilloma
6. Intraductal carcinoma
7. A 35-years-old lady with a painless hard mass in her breast; the first step to be done is:
8. Total body CT scanning
9. Excisional biopsy
10. Fine needle aspiration for cytology
11. Incisional biopsy
12. Broad spectrum antibiotics and follow up
13. All of the following are manifestations of hypokalemia, EXCEPT:
14. Increased peristaltic movements
15. Severe skeletal muscle weakness
16. Confusion and drowsiness
17. ECG changes
18. Tendon reflexes are weak or absent
19. All the following are painful anal and perianal conditions, EXCEPT:
20. Third degree hemorrhoids
21. Acute anal fissure
22. Ischio-rectal abscess
23. Perianal hematoma
24. Perianal abscess
25. The cause of death in established tetanus is:
26. Septic shock
27. Heart failure
28. Renal failure
29. Respiratory failure
30. Pulmonary embolism
31. In acute anal fissure all are TRUE, EXCEPT:
32. Presents with severe anal pain
33. Anal spasm is a frequent finding
34. Usually preceded by an episode of constipation
35. Most of cases presents with severe bleeding per rectum???
36. Lateral sphincterotomy is the treatment of choice
37. Concerning fistula in anus all are possible causes, EXCEPT:
38. Inflammatory bowel disease
39. After perianal abscess
40. Trauma????????
41. Tuberculosis
42. Meckel’s diverticulum
43. All of the following may cause metabolic acidosis, EXCEPT:
44. Diabetes mellitus
45. Renal failure
46. Hemorrhagic schock
47. Pyloric obstruction????//
48. Ulcerative colitis

1. Which ONE of the following needs urgent surgical treatment:
2. Brain concussion
3. Brain stem laceration
4. Compound fracture of the vault of the skull
5. Linear fracture of the vault of the skull
6. Compound fracture of the skull base
7. In a patient with obstructive jaundice bleeding tendency is due to:
8. Low platelet count
9. Thromboasthenia
10. Vitamin K defeciency
11. Hypofibrinogenemia
12. Hypoalbuminemia
13. The treatment of acute breast abscess is:
14. Intravenous antibiotics for one week
15. Repeated needle aspiration
16. Incision and drainage under general anesthesia
17. Localized incision
18. Simple mastectomy
19. The most common site of carcinoma of the colon is:
20. Descending colon
21. Splenic flexure
22. Recto-sigmoid
23. Cecum
24. Transverse colon
25. All of the following can be felt during per-rectum digital examination, EXCEPT:
26. Chronic anal fissure
27. Rectal carcinoma
28. Second degree hemorrhoids
29. Prostate in males
30. Cervix of uterus in females
31. The following are more liable to develop breast carcinoma, EXCEPT:
32. Females with positive family history of breast carcinoma
33. Nulliparous women
34. Women with long standing fibrocystic disease of breast
35. Females who have first child at an early age
36. Females who have first child above thirty
37. A painless transparent cystic swelling in the floor of the mouth is known as:
38. Sublingual dermoid
39. Ranula
40. Lymphangioma
41. Hemangioma
42. Dentigerous cyst
43. Scalp hematoma that takes the shape of the underlying bone is: (повтор)
44. Subcutaneous
45. Subgaleal
46. Subperiostal
47. Extradural
48. Subdural
49. Concerning pleomorphic adenoma of the salivary glands all of the following are TRUE, EXCEPT:
50. It is usually of slow growth rate
51. Most commonly it arises in the submandibular salivary gland
52. Although it is a benign tumor simple enucleation of the tumor may result in multi-centric recurrence
53. After many years a few pleomorphic adenomas will exhibit malignant change
54. Superficial parotidectomy is the ideal treatment of cases arising in the parotid gland
55. On rectal examination the anus is tightly closed and patient resists attempted rectal exam; you suspect:
56. Internal piles
57. External piles
58. Anal fissure
59. Fistula in anus
60. Carcinoma of rectum
61. The best management of a breast lump in a 42-years-old lady is:
62. Follow up with close observation to see changes in size
63. Antibiotics and follow up to rule out infection
64. Hormonal therapy if patient is post menopausal
65. Fine needle aspiration biopsy as first step
66. Simple mastectomy because of a fear of malignancy
67. Regarding Padget’s disease of the breast ONE is CORRECT:
68. It is a sort of chronic eczema of the nipple
69. It is usually bilateral
70. It is a malignant disease of breast
71. Needs long treatment with steroid ointment
72. Associated with nipple retraction in early stages??????
73. Regarding hemorrhoids which ONE is CORRECT:
74. Usually present by pain and bleeding per rectum
75. Bleeding hemorrhoids must be managed by surgical incision
76. Recurrence is uncommon after proper surgical excision???
77. IS best diagnosed by per rectum examination to feel the hemorrhoids
78. Surgery is the only effective and curable treatment
79. All of the following are common clinical features in cases of severe hyperntaremia, EXCEPT:
80. Dry mucous membranes
81. Hypothermia
82. Delirium
83. Tachycardia
84. Hypotension
85. All of the following are common features of hypocalcemia, EXCEPT:
86. Numbness and circumoral tingling
87. Slow tendon reflexes
88. Carpopedal spasm
89. Abdominal cramps
90. Prolonged S-T interval in ECG ????

1. Hemorrhage occurring 7 to 10 days after surgery is called: (повтор)
2. Capillary hemorrhage
3. Reactionary hemorrhage
4. Primary hemorrhage
5. Secondary hemorrhage
6. Venous hemorrhage
7. All of the following are manifestations of internal hemorrhage, EXCEPT:
8. Progressive pallor
9. Progressive hypotension
10. Progressive bradycardia
11. Rapidrespiration
12. Cold extremities
13. All of the following may cause acidosis, EXCEPT:
14. Shock
15. Diabetes mellitus
16. Cardiac arrest
17. Pyloric obstruction
18. Acute renal failure
19. The daily insensible water loss from skin and lungs in healthy adult is:
20. 500 ml
21. 900 ml
22. 1500 ml
23. 2000 ml
24. 2500 ml
25. Scalp hematoma which is small, very painful and tend is:
26. Subgaleal
27. Subcutaneous
28. Subpericranial
29. Intramuscular
30. Epidural

1. During superficial parotidetomy ONE of the following nerves may be injured:
2. The third cranial nerve - oculomotor
3. The fifth cranial nerve – trigeminal
4. The seventh cranial nerve – facial
5. The ninth cranial nerve – glossopharyngeal
6. The eleventh cranial nerve – accessory
7. Concerning carcinoma of the breast all of the following are CORRECT, EXCEPT:
8. It is more common in the Western countries
9. It is more common in nulliparous and in women who have their first pregnancy after thirty
10. It is more common in women with positive history of breast carcinoma
11. Those arising during pregnancy or lactation have better outcome
12. Women having long standing fibrocystic disease of breast are more liable to develop breast carcinoma than normal
13. The number of the breast lobes and in turn the number of the duct orifices at the nipple is:
14. 2-3
15. 5-7
16. 9-11
17. 15-20
18. 25-30
19. Blood stained discharge from one orifice of the nipple is a characteristic of:
20. Early menarche
21. Lactation
22. Pregnancy
23. Intra-ductal papilloma
24. Fibroadenoma
25. All of the following are manifestations of hypokalemia, EXCEPT: (повтор)
26. Listlessness and slurring of speech
27. Drowsiness
28. Muscular hypertension with hyper-reflexia
29. Slugging or absent intestinal movements
30. Depressed S-T segment in ECG
31. The most common tumor of the parotid gland is:
32. Pleomorphic adenoma
33. Adenolymphoma
34. Mucoepidermoid tumor
35. Adenoid cystic carcinoma
36. Adenocarcinoma
37. All of the following are possible candidates to develop breast carcinoma, EXCEPT:
38. Nulliparous women
39. Females with positive family history of breast carcinoma
40. Females with fibrocystic disease of breast
41. Females whose first child birth is above thirty
42. Females with fat necrosis of the breast
43. Unilateral retraction of the nipple may occur in all of the following, EXCEPT:
44. Duct ectasia
45. Fibroadenoma
46. Intraductal adenoma
47. Development occurring at the time of puberty
48. Chronic breast abscess
49. In head injury all of the following are TRUE, EXCEPT:
50. Skull X-ray is a useful method of showing the site of skull fracture
51. CT scan is an excellent method of showing intracranial injuries and lesions
52. Hyperventilation is an excellent method of reducing the intracranial pressure
53. Patient with Glasgow coma scale of 14 carries a bad prognosis
54. Extradural hematoma mat produce contralateral hemiparesis
55. Choose the appropriate answer –in a patient with a brain tumor:
56. Skull X-ray may show the tumor site clearly
57. intracranial pressure is one of the manifestations Raised
58. CSF study is manditory
59. Epilepsy is a constant feature
60. Hemiparesis is always a feature

1. The major intracellular cation is:
2. Sodium
3. Potassium
4. Magnesium
5. Iron
6. Bicarbonate
7. All of the following are causes of hypokalemia, EXCEPT:
8. Ulcerative colitis
9. Villous adenoma of the rectum
10. Acute renal failure
11. Small intestinal fistula
12. Ileostomy
13. Recurrent painful swelling at the submandibular region during mastication usually indicates:
14. Plunging ranula
15. Stone in the duct of the submandibular salivary gland
16. Tuberculous cervical lymphadenitis
17. Brancial cyst
18. Thyroglossal cyst
19. Acute bleeding in hemophilic patient is best treated by giving: (повтор)
20. Large dose of vitamin E
21. Platelets concentrate
22. Fresh whole blood
23. Cryoprecipitate

Fresh frozen plasma

*Why? Because cryoprecipitate contains factor VIII…*

1. ALL of the following drugs may produce bleeding, EXCEPT:
2. Salicylates
3. Magnesium trisilicate
4. Steroids
5. Anticoagulants
6. Phenothiazines

1. Causes of hypercalcemia include ALL of the following. EXCEPT:
2. Multiple myeloma
3. Medullary carcinoma of the thyroid
4. Sarcoidosis
5. Squamos cell carcinoma of the lung

E. Milk alkali syndrome

1. Causes of gynecomastia include ALL of the following, EXCEPT:
2. Liver cirrhosis
3. Bronchogenic carcinoma
4. Testicular atrophy
5. Digitalis therapy
6. Hyperparathyroidism
7. **All of the following are true about shock intrauma patient except:-**
8. Any patient who is cool and tachycardic is in shock until proved otherwise.
9. Any shocked patient is considered hypovolaemic on the initial examination.
10. Consider non-haemorrhagic shock in injury above the diaphragm.
11. Initial normal BP and haematocrite does not exclude shock.
12. The initial I.V. fluid administration of choice is Dextran\40

.

1. **In coparison to extradural haematoma , a subdural haematoma has the following true fact:-**
2. Speed of bleeding is faster.
3. Less sereous.
4. Occurs more in the younger age group.
5. Associated more with brain injury.
6. Needs a higher magnitude of trauma
7. **All of the following are among RANSON Criteria of severity of acute pancreatitis except:-**
8. Serum L.D.H. >350 IU / L
9. Arterial PaO2 <60 mm Hg
10. Serum amylase > 1000 IU / dL
11. AST [ SGOT] >250
12. Age 55 years

1. **All of the following are true about salivery tumours except**
2. Most of them are benign
3. The parotid gland is the main site
4. most of them are pleomorphic adenoma
5. 1\2 of the submandibular salivery gland tumours are malignant
6. Adenoid cystic carcinoma is the commonest malignant tumour
7. **All of the following are true about fistula in ano except;**
8. Most of them are low type
9. Operations on high fisulae may end up with faecal incontince as a complication
10. Posterior fisulae are straight according to Goodsall`s rule
11. Most specific fistula are of graulomatous lesion
12. It usually follows perianal abscess
13. **All of the following are true about the anatomy of the anal canal except:-**

A-The dentate line surgically demarcates the somatic and visceral parts

B-The somatic part is skin devoid of its appendages

C-Anal glands lie in the intersphincterc plane and open into the crypts of Morgagni

D-Anorectal ring is made of puborectalis muscle and all the components of the external sphincter

E-Superior rectal [haemorrhoidal] vein drains into inferior mesenteric vein

1. **-In comparison to Extradural haematoma , a Subdural haematoma has the following:-**
2. A-Speed of bleeding is faster.
3. B-Less serious.
4. C-Occurs more in the younger age group.
5. D-Associated more with brain injury.
6. E-Needs a higher magnitude of trauma
7. **Which of the following is a contraindication to insertion of a NGT{Nasogastric tube}:-**
   1. A-Extradural haematoma.
   2. B-Subdural haematoma.

C-Fracture base of skull.

* 1. D-Rupture stomach.
  2. E-Rupture duodenum.

**65. The preferable initial volume replacement therapy in the multiply injured patients is :-**

* 1. 2 L .of Ringer Lactate.
  2. 2 L. of normal saline.
  3. Fully crosshatched blood.
  4. Noncrossmatched blood.
  5. Colloids.

1. **Which of the following statements is correct in a patient whose A.B.G. is ; 7.19 mm Hg , HCO3; 15..5 mmol / l . BE :-- 10 mmol/ l :**

A- Has respiratory acidosis

B- metabolic acidosis

C- respiratory and metabolic acidosis

D- metabolic acidosis with respiratory alkalosis

E- The reading is incompatible with life

1. **All of the following are true about ano-rectal injury except ;**
   1. A-All above the dentate line require colostomy and primary full thickness closure
   2. B-Below dentate line injury ; Debridement and drainage is enough
   3. C- Plain X-ray and procto-sigmoidoscopy is essential for diagnosis
   4. D- Rectal stump irrigation has no value in reducing the incidence
   5. of sepsis
   6. E- All gun shot transpelvic rectal injury require laparotomy.

1. **The rate of flow of intravenous fluid is proportional to :-**
   * 1. Size of the vein
     2. Size of the canula
     3. Length of the canula
     4. Volume loss of the patient
     5. Ejection fraction of the patient
2. **On TRIAGE decision scheme, all of the following should be sent to a trauma centre before assessing anatomy of injury except;-**
3. R.R. ; >29
4. Systolic B.P. < 90
5. Revised Trauma Score ; > 11
6. G.C.S.; < 14
7. Pediatric Trauma Score ; < 9-
8. **All of the following are some of the high – risk group of children of having an occult intracranial injury who should have immediate brain C.T. scan except**

A-Difficult to bring the child to an awake state

B-Irritable child

C-Bulging fontenelle

D-Age less than 3 months

E- Vomiting twice in less than one hour

1. **All of the following are true about breast conserving surgery**

**treating early breast cancer except**

* + 1. It entails, lumpectomy, segmentectomy or quadrantectomy
    2. Axillary clearance is a must as a recent trend
    3. The breast should receive postoperative radiotherapy
    4. It has a higher local recrrence rate than radical surgery
    5. The 5-year survival is the same as with radical surgery

**71. All of the following are true about loco-regional recurrence of breast cancer**

**Except:**

* 1. 10% of women treated for early breast cancer will have local

or regiona recurrence

* 1. Extensive intraductal component of intraductal carcinoma is a

very high risk factor for recurrence

* 1. About 1/3 of local recurrence is not amenable to treatment
  2. 1/2 of local recurrence are associated with distant metastasis
  3. Patients with local recurrence after breast conserving surgery have the same

5year survival like those treated with mastectomy

**72. Which of the following is not a cause of hypocalaemia:**

1. Pyloric stenosis.
2. Villous adenoma.
3. Uretro-colic anastomosis.
4. Addison’s disease.
5. The osmotic diuresis of diabetes mellitus.

**73. All are true in management of malignant melanoma except:-**

1. Biopsy is usually incisional.
2. Surgery is the primary effective method of treatment of stage [1]+[2].
3. Prophylactic lymph node dissection should be avoided
4. It is unpredictably radio resistant
5. Chemotherapy may give a response up to 40%

**74. Which of the following contributes least in reducing the incidence of**

**locoregional recurrence of an excised mobile rectal cancer:**

* 1. Total mesorectal excition [TME]
  2. Radiotherapy + [ TME ]
  3. High ligation technique
  4. High volume of rectal cancer surgery on one specialist
  5. Sharp dissection of the specimen
     + 1. **All of the following are indications to remove a cystic lesion in the breast except:**   
          Halo sign.
       2. **Wrong about fibrocystic disease?**  
          Most commonly in the lower outer quadrant of the breast.
       3. **Breast cancer most commonly metastasizes to?**

1. Liver
2. Brain
3. Lungs
4. Bone
5. Soft tissues
   * + 1. **Wrong about perianal abscess:**
6. Digital rectal examination is necessary in some condition
7. Incision and drainage
8. Lateral ones are of NO clinical significance.
   * + 1. **Which of the following conditions is pre-malignant:**
9. Juvenile polyp
10. Hamartmotos polyp
11. Adenmoatous polyp
    * + 1. **All of the following cases can cause hypocalcemia, except:**
12. Post-thryoid surgery
13. Hypoparathyroidism
14. Prlonged pyloric obstruction
15. ???? I can not remember the answer…

* *Regarding prolonged pyloric obstruction: it causes recurrent vomitting> metabolic alkalosis> Alkalosis decreases ionized calcium so it causes hypocalceima.*
  + - 1. **All cause isotonic fluid loss, except:**

1. Diuretics
2. GI losses
3. Fever
   * + 1. **A 60 yo male patient with a recent change in bowel habit presented with blood and mucus with stool. On examination, second degree hemorroide were found. What will you do next?**
4. Give him treatment for hemorroides and send him home.
5. Total colonoscopy
6. Sigmoidoscopy and hemorroidectomy
7. Can complicate to a fistula
   * + 1. **Wrong breast abscess:**
8. Most common organism is staph. Auresu
9. Lactating women should be advised to stop **milking** the affected breast.
10. Commonly occurs during lactation???
    * + 1. **During breast examination, you found a mass that is hardly moveable, differential diagnosis include all of the following** except:
11. Malignancy
12. Fat necrosis
13. Firbroadenoma
    * + 1. **All of the following are used in staging breast cancer, except:**
14. Ulcertion of the skin
15. Peau-du-orange

**34- All 0f the following are true about the use of MRI in breast cancer**

A-Its sensitivity is 100%

B-It accurately defines multicentric lesions

C-Identifies the occult primary in patients with axillary metastasis

+ D-Inferior to mammography in defining the extent of invasive lobular carcinoma

E-Increases the number of patients trated by mastectomy that otherwise could be managed by lumpectomy and radiotherapy

**DR. SALA7 EL QARYOTI**

The most important step in early management of extensive burns is:

1. Management of burn shock by i.v. fluids and analgesics
2. Immediate grafting
3. Antibiotic administration
4. Burn dressing
5. Tetanus toxoid

40-years-old patient presented to E.R. with 10% thickness burns is best treated by:

1. Admission to hospital + 2 liters i.v. R/L daily
2. Admission to hospital + i.v. fluids + antibiotics
3. Dressing + outpatient follow up
4. Immediate excision + grafting
5. Admission to hospital + i.v. fluid + blood transfusion

The main step in the early management of extensive burn is:

1. Giving antibiotics
2. Giving tetanus toxoid
3. Giving i.v. fluids and analgesics
4. Immediate grafting
5. Insertion of nasogastric tube

All of the following features are common in the early period after severe burns, EXCEPT:

1. Hypotension
2. Tachycardia
3. Oliguria
4. Low hematocrit value
5. Confusion

A 20-years-old patient arrived at the accident and emergency department with a burn involving the whole right lower extremity. The surface area involved will be:

1. 10%
2. 7%
3. 18%
4. 9%
5. 36%

If the whole skin of one of the lower extremities is burnt the percentage of burn is:

1. 9%
2. 18%
3. 27%
4. 36%
5. 50%

The most important step in the early management of extensive burns is: (повтор)

1. Prevention of burn shock by giving i.v. fluids and analgesics
2. Giving tetanus toxoid
3. Antibiotics administration
4. Immediate split thickness grafting
5. Dressing ofthe burn area

The most important step in the early management of extensive burn is:

1. Prevention of burn shock by giving I.V. fluids and analgesics
2. Giving tetanus toxoid
3. Antibiotics administration
4. Immediate split thickness grafting
5. Dressing of the burnt area

The most important step in early management of extensive burn is:

1. Management of burn shock by I.V. fluids and analgesics
2. Immediate grafting
3. Antibiotic administration
4. Burn dressing
5. Tetanus toxoid

Sebaceous cyst may arise in all of the following sites, EXCEPT:

1. Scalp
2. Face
3. Scrotum
4. Palm of the hand
5. Back of the trunk

**Wrong about skin grafts:**At 4 degrees, skin grafts can be stored up to 8 weeks.

**Wrong about clift palate?**

* Can be diagnosed in intrauterine life starting from 12 weeks of gestation???
* Is more common in females???

**A 60 year old male patient weighing 50 Kg stustained burns to 30% of his body. He presented to you in the ER 4 hours after he was burnt. What is the amount of fluid that you will give him immediately?**

Some of the options were: 3,000 ml\ 1,500 ml\ 2,000 ml

**True about malignant melanoma:**

Tumor thickness is better for prognosis than invasiveness of the tumor.

**Wrong about maxillofaical injuries:**

The maxilla is the most commonly injuries facial bone.

**True about treatment of clift palate:**The soft palate should be long enough to prevent NASAL SPEECH.

**All are requirments before surgery of clift lip, except:**

1. Weight > 10 pounds
2. Hb 10
3. WBC < 10,000
4. 10 weeks of orthodental management

**A patient underwent surgery which caused a 2X2 cm defect in the nasolabial area, what is the best method of management:**

1. Wolfe graft
2. Theirch graft
3. Skin flap

**Comparison between split and full thickness skin grafts: . سؤال مباشر.**

**Dr. bassam nshewat Q for Other lectures**

All of the following arteries contribute in the blood supply of the stomach, EXCEPT:

1. Celiac
2. Hepatic jjjj
3. Splenic
4. Gastroduodenal
5. Superior mesenteric

Concerning chronic duodenal ulcer all are TRUE, EXCEPT:

1. It is more common in males than females
2. Pain usually occurs two hours after meals
3. Vomiting is rare unless stenosis has occurred
4. Increased high fasting gastric secretion is usual
5. Malignant change occurs in 5-10% of this ulcer

In the initial 48 hours of acute pancreatitis all of the following are objective prognostic signs, EXCEPT:

1. Hematocrite fall > 10%
2. Serum calcium level < 2 mg%
3. Serum proteins level < 5 mg%
4. PaO2 < 8mm Hg
5. Estimated fluid sequestration > 6,0 ml

The most common cystic swelling of the pancreas is:

1. Hydatid cyst
2. Dermoid cyst
3. Cystadenoma
4. Pancreatic pseudocyst
5. Congenital cysts

Clinical presentation of chronic pancreatitis may include all of the following, EXCEPT:

1. Jaundice
2. Pain in the abdomen
3. Diabetes mellitus
4. Weight gain
5. Mal absorption

30-years-old male patient presented with gastric outlet obstruction and vomiting; all are clinical findings, EXCEPT:

1. Hypochloremic metabolic alkalosis
2. Constipation and loss of weight is common
3. Succussion- splash is present
4. Dehydration
5. Hypochloremic metabolic acidosis

All of the following are considered to be bad prognostic signs in acute pancreatitis, EXCEPT:

1. Old age
2. PaO2 5.0
3. Serum calcium 5 mg%
4. Leukocytosis more than 20 000/ml
5. Blood urea 25 mg%

All of the following are indications for surgical treatment of peptic ulcer, EXCEPT:

1. Perforation
2. Failure of medical treatment
3. Gastric outlet obstruction
4. Hyperacidity
5. Recurrent massive bleeding

Regarding diabetic foot all of the following are TRUE, EXCEPT:

1. Correction of an associated anemia or pulmonary disease improves the condition of the foot
2. Diabetes has to be controlled by insulin therapy
3. Amputation is required once bone is infected
4. Sympathectomy has a major role in the management
5. Antibiotics against aerobes and anaerobes are to be given

Patients with diabetic foot, all are causes for the condition, EXCEPT:

1. Unnoticed trauma
2. High blood sugar
3. Altered immunity of the patient
4. Infection
5. Ischemia of the lower limb

The best method to diagnose peptic ulcer disease is:

1. Barium meal
2. Upper gastro-intestinal endoscopy
3. Ultrasonography
4. Labelled RBCs
5. CT scanning of the upper abdomen

The best radiological examination to diagnose perforated peptic ulcer is:

1. Barium swallow
2. Barium meal
3. Gastrographin meal
4. Chest X-ray standing
5. Technecium scanning

All of the following arteries share in the blood supply of the stomach, EXCEPT:

1. Celiac artery
2. Splenic artery
3. Hepatic artery
4. Left gastric artery
5. Superior mesenteric artery

A two-years-old child with oblong cystic swelling in the inguinal canal that moves downward pull of the testis has:

1. Indirect inguinal hernia
2. Direct inguinal hernia
3. Encysted hydrocele
4. Vagial hydrocele

A three-months-old infant found to have a right inguinal hernia, the best management is:

1. Re-examination every month until it disappears spontaneously
2. Application of a truss
3. Surgical treatment when he is six months old
4. Surgical treatment when he is one year old
5. Surgical treatment as soon as possible

Concerning torsion testicle all of the following are TRUE, EXCEPT:

1. The highest incidence is between 40 and 50 years of age
2. Although acute straining is a predisposing factor some cases occur during sleep
3. Clinically it simulates epididimo-orchitis or strangulated inguinal hernia
4. The condition develops more commonly in the incompletely descended testicles
5. After dealing surgically with the affected side exploration and fixation of the opposite side should be done

Concerning anal fissure all of the following are TRUE, EXCEPT:

1. It is a longitudinal mucosal tear or ulcer in the upper half of the anal canal
2. Constipation is an important predisposing factor
3. Pain during a half to one hour after defecation is an important leading symptom
4. It is usually situated in the midline posteriorly
5. Lateral sphincterotomy is now the ideal treatment of the chronic fissure

All of the following predispose to the development of cancer colon and rectum, EXCEPT: (повтор)

1. Familial polyposis coli
2. Ulcerative colitis
3. Villous adenoma
4. Hamartomatous polyp
5. Adenomatous polyp

Regarding pancreatic cysts and pseudo-cysts ONE is correct:

1. Are the same things
2. Are different on clinical examination
3. Cause a swelling above umbilicus
4. Cause a swelling below umbilicus
5. Aspiration is a treatment of choice

Regarding femoral hernia ONE of the following is CORRECT:

1. Occurs only in women
2. Are the least dangerous variety of hernia
3. Lies medial to pubic tubercle
4. Usually lies below inguinal ligament
5. Transilluminates

Regarding perforated duodenal ulcer ONE is CORRECT:

1. There is always history of peptic ulcer disease
2. Generalized abdominal rigidity is an early sign
3. May present with pain in right iliac fossa
4. Pyrexia is an early sign
5. Diagnoses only when plain abdominal X-ray shows gas under diaphragm

All of the following may present with acute abdomen, EXCEPT:

1. Hemophilia
2. Diabetes mellitus
3. Sickle cell anemia
4. Pernicious anemia
5. Mediterranean fever

The symptoms of epigastric hernia usually resemble those of ONE of the following:

1. Angina pectoris
2. Gall stone
3. Hiatus hernia
4. Peptic ulcer
5. Diverticular disease of the colon

Regarding anular pancreas which ONE is TRUE:

1. All cases present in new born infants
2. Frequently present with pancreatitis
3. Usually present with duodenal obstruction
4. It is best treated by resection of the annular portion
5. Associated with risk of adenocarcinoma

In the management of infected diabetic foot all of the following are CORRECT, EXCEPT:

1. Diabetes is controlled by one of the hypoglycemic drugs
2. The limb has to be elevated on one or two pillows
3. Antibiotics against aerobes and anaerobes should be given
4. Any associated blood, chest or heart disease causing tissue hypoxia should be managed
5. If amputation is required conservative one is usually adopted

49. In enlarged inguinal lymph nodes the primary lesion may be ONE of the following sites, EXCEPT: (повтор)

1. Lower limb
2. Skin of the abdominal wall below the level of the umbilicus
3. Testis
4. Lower half of the anal canal
5. Scrotum

Concerning hypertrophic pyloric stenosis of infants all of the following are CORRECT, EXCEPT: (повтор)

1. Bile free projectile vomiting is the presenting symptom in all cases
2. Following feeding a peristaltic wave may be seen passing from left to right across the upper abdomen
3. The hypertrophied pylorus can be felt under the liver like an olive
4. Loss of weight and constipation are usually present
5. These manifestations start to appear one or two days after birth

The complication of peptic ulcer that needs immediate surgical treatment is:

1. Perforation
2. Penetration
3. Bleeding
4. Stenosis
5. Suspicion of malignancy

Concerning carcinoma of the stomach all of the following are signs of advanced stage of the disease, EXCEPT:

1. The mass is clinically palpable
2. Severe hematemesis
3. Ascitis
4. Involved left supraclavicular lymph node
5. Liver involvement with jaundice

A 60-years-old female presented with irreducible tender swelling below and lateral to the pubic tubercle. She most likely has:

1. Strangulated direct inguinal hernia
2. Strangulated indirect inguinal hernia
3. Strangulated femoral hernia
4. Saphena varix
5. Obturator hernia

A 30-years-old healthy male complaining of upper abdominal discomfort. On examination he had a small swelling in the middle between the umbilicus and xiphisternum. HE most likely had:

1. Umbilical hernia
2. Paraumbilical hernia
3. Spigelian hernia
4. Epigastric hernia
5. Morgagni hernia

Which of the following simulates clinically torsion of the testicle: (повтор)

1. Encysted hydrocele
2. Communicated hydrocele
3. Varicocele
4. Acute epididymo-orchitis
5. Indirect inguinal hernia

Regarding indirect inguinal hernia in children all of the following are TRUE, EXCEPT:

1. Right side is more common the left one
2. Boys are affected much more than the girls
3. Incarceration occurs more often in smaller babies
4. Operative correction is delayed till the child is one year of age
5. Inguinal truss is nowadays not used in the management

Regarding undescended testicle all of the following are TRUE, EXCEPT:

1. It is usually associated with a hernial sac
2. It is more liable for torsion than the normally descended testicle
3. Neglected bilateral cases are associated with decreased spermatogenesis
4. Orchiopexy does not reduce the risk of malignant degeneration
5. Surgical correction should be done around the age of puberty

Perforated peptic ulcer is usually conformed by: (повтор)

1. Peritoneal lavage
2. Emergency gastroscopy
3. Plain X-ray of the chest in standing position
4. Barium meal
5. Abdominal ultrasonography

Concerning femoral hernia all of the following are TRUE, EXCEPT:

1. The hernial sac passes through the femoral ring
2. The femoral vein lies lateral to the hernial neck
3. It is not liable for irreducibility and strangulation as it has a wide neck
4. When large, it can be missed as an inguinal hernia
5. It may not give positive expansive cough impulse

In chronic gastric ulcer all the following are TRUE, EXCEPT:

1. Usually affects patients of more than 40 years old
2. Commonly occurs at the lesser curvature of the stomach
3. Symptomatic relief by H2-blockers is an indication of healing of the ulcer
4. Endoscopic biopsy must be done to exclude malignancy
5. Patients may have normal of low values of maximal acid output

A smooth oval cystic swelling associated with the spermatic cord that moves downwards with gentle traction upon the testis is:

1. Irreducible indirect inguinal hernia
2. Varicocele
3. Encysted hydrocele
4. Communicated hydrocele
5. Vaginal hydrocele

In gastric carcinoma the following are TRUE, EXCEPT:

1. Adenocarcinoma is the commonest malignant tumor of the stomach
2. Patients with pernicious anemia and blood group A have an increased incidence of the disease
3. Anorexia and weight loss are commonest manifestations
4. Chemotherapy is a good adjuvant to radical surgery for early tumors
5. Metastases to bone are uncommon

Complications of duodenal ulcer include all of the following, EXCEPT:

1. Perforation
2. Penetration
3. Massive bleeding
4. Obstruction of pylorus
5. Malignant change

87. All of the following share in the blood supply of the stomack, EXCEPT:

1. Celiac artery
2. Superior mesenteric artery
3. Splenic artery
4. Common hepatic artery
5. Left gastric artery

Concerning hypertrophic pyloric stenosis of infants all of the following are CORRECT, EXCEPT:

1. Symptoms start usually three to six weeks after birth
2. Forcible projectile bile stained vomiting is the usual presenting symptom
3. The hypertrophied pylorus can be felt like an olive in the right hypochondrium
4. Loss of weight and constipation are usual
5. Surgery is treatment of choice

Serum alpha-fetoprotein is raised in ONE of the following tumors:

1. Malignant teratoma of the testis
2. Carcinoma of the prostate
3. Malignant lymphoma
4. Carcinoma of the breast
5. Carcinoma of the sigmoid colon

Concerning congenital hypertrophic pyloric stenosis all the following are TRUE, EXCEPT:

1. Non-bilious projectile vomiting is the most common
2. Visible peristalsis may be seen passing from left to right across the upper abdomen
3. An olive-size mass can be felt in the right hypochondrium
4. Constipation and loss of weight are usually present
5. The usual management is by antispasmodics, laxatives and correction of water and electrolytes disturbances

Regarding indirect inguinal hernia in children ALL of the following are TRUE, EXCEPT:

1. Right side is more common than the left side
2. Boys are affected much more than girls
3. Incarceration occurs more often in small babies
4. Operative correction is delayed till the child is one year old
5. Inguinal truss is nowadays not used in the management

Regarding undescended testicle ALL of the following are TRUE, EXCEPT:

1. It is usually associated with a hernial sac
2. It is more liable for torsion that the normally descended testicle
3. Bilateral cases are associated with decreased spermatogenesis
4. Orchiopexy does not reduce the risk of malignant degeneration
5. Surgical correction should be done around the age of puberty

The most common pancreatic cyst is:

1. Dermoid cyat of the pancreas
2. Hydatid cyst of the pancreas
3. Pancreatic pseudocyst
4. Pancreatic cystadenoma
5. Congenital cystic disease of the pancreas

Concerning hypertrophic pyloric stenosis of infants, ALL of the following are CORRECT, EXCEPT:

1. Bile free projectile vomiting is the presenting symptom in all cases
2. Following feeding a peristalsis wave may be seen passing from left to right across the upper abdomen
3. The hypertrophied pylorus can be felt under the liver like an olive
4. Loss of weight and constipation are usually present
5. These manifestations start to appear one to two days after birth

Perforated peptic ulcer is usually confirmed by:

1. Peritoneal lavage
2. Emergency gastroscopy
3. Plain X-ray of the chest in the standing position
4. Barium meal
5. Abdominal ultrasonography

In ALL of the following acute abdominal conditions vomiting is NOT frequent, EXCEPT:

1. Acute pancreatitis
2. Perforated peptic ulcer
3. Ruptured ectopic pregnancy
4. Volvulus of sigmoid colon
5. acute appendicitis

Acu Concerning femoral hernia ALL of the following are TRUE, EXCEPT:

1. The hernial sac passes through the femoral rng
2. The femoral vein lies lateral to the hernial neck
3. It is not liable for irreducibility and strangulation as it has a wide neck
4. When large it can be missed as an inguinal hernia
5. It may not give positive expansive cough impulse

In chronic gastric ulcer the following are TRUE, EXCEPT:

1. Usually affects the patient of more than 40 years of age
2. Commonly occurs at the lesser curvature of the stomach
3. Symptomatic relief by H2 blockers is an indication of healing of the ulcer
4. Endoscopic biopsy must be done to exclude malignancy
5. Patients may have normal or low values of maximal acid output

Concerning chronic duodenal ulcer ALL are TRUE, EXCEPT:

1. It is more common in males than females
2. Pain usually occurs two hours after meals
3. Vomiting is rare unless stenosis has occurred
4. Increased night fasting gastric secretion is usual
5. Malignant change occurs in 5-30% of this ulcer

115. Concerning congenital hypertrophic pyloric stenosis ALL of the following are TRUE, EXCEPT:

1. Non-billious projectile vomiting is the most common presenting symptom
2. Visible peristalsis may be seen passing from left to right across the upper abdomen
3. An olive-size mass can be felt in the right hypochondrium
4. Constipation and loss of weight are usually present
5. The usual management is by antispasmodic, laxatives and correction of water and electrolytes disturbances

116. In the initial 48 hours of acute pancreatitis ALL the following are objective prognostic signs, EXCEPT:

1. Hematocrite fall > 10% points
2. Serum calcium level < 8 mg%
3. Serum proteins level < 5 mg%
4. PaO2 < 60 mm Hg
5. Estimated fluid sequestration > 6, 000 ml.

119. The following drugs are used in the management of peptic ulcer disease, EXCEPT:

1. Famotidine
2. Sucralfate
3. Omeprazole
4. Anticholinergic drugs

E. Salazopyrin

**99- The most important factor in the etiology of bed sores is ?**

a. Mal-nutrition.

b. Prolonged pressure. \*\*

c. Anemia.

d. Immune deficiency.

e. Atherosclerosis

**34-Which of the following statements about diffuse esophageal spasm true?**

a- Chest pain due to esophageal spasm is readily differentiated from angina pectoris

of cardiac origin.

b- Bouts of esophageal obstruction and regurgitation of food are characteristic.

c- No psychiatric disorders present.

d- During manometric assessment, unless the patient is having pain there may be no

detectable multiphasic, high-amplitude, simultaneous esophageal contractions.\*

e- The treatment of choice is a long esophagomyotomy from the aortic arch to the

esophagogastric junction.

**35- The appropriate indication for esophageal manometry in the**

**followings is:**

a. To assess result of antireflux surgery

b. T0 establish the diagnosis of acid reflux.

c. screen test for motility esophageal disorders.

d. preoperative evaluation of patient considered for anti reflux surgery.\*

e. initial test for unexplained chest pain.

**48- Which one of the following statements regarding the risk of cancer in the**

**context of ulcerative colitis is true**

a- after 10 years of active disease, the risk of cancer approximates 20% .

b- after 10 years of active disease, the risk of cancer approximates 2% to 3%

c- The risk of colon cancer in ulcerative colitis is identical to controls

d- after 20 years of disease activity, the risk of colon cancer approximates 80%

e- after 20 years of disease activity,the risk of colon cancer may be as much as12%\*

**97- In the management of a crushed wound of the foot, all of the following measures**

**are appropriate EXCEPT**

a. Wound debridement

b. Irrigation with normal saline

c. Anti- tetanus prophylaxis

d. Primary wound closure\*\*

e. Elevation of the affected limb

**94- All of the following may be signs of orbital fractutres, EXCEPT:**

* 1. Ecchymosis around the eye.
  2. Diplopia.
  3. Numbness of the lower eyelid, side of the nose, and upper lip.
  4. Anesthesia to the chin. \*\*\*
  5. Pain with extraocular muscles movements.

**89- The initial management of a laboratory worker who was involved in chemical burn injury by an acid is:**

* 1. Cleaning the area by alkaline solution.
  2. I.V infusion of Na-bicarbonate.
  3. Application of silver-sulphadiazine cream.
  4. Application of Iodine solution
  5. Irrigation by water. \*\*

**51- The most common level for foreign body entrapment in a normal esophagus is:**

a- Cricopharyngeal region

b- Carina

c- Lower esophageal sphincter

d- Thoracic inlet

e- Upper esophageal sphincter

**96- With regard to wound healing, which one of the following statements is**

**CORRECT?**

a. Collagen content reaches a maximum at approximately 2 weeks after injury

b. Monocytes are essential for normal wound healing\*\*

c. In chronic wounds, inflammation phase ends early.

d. The function of the monocytes in wound healing is limited to phagocytosis of bacteria

and debris

e. Tensile strength of the wound depends mainly on collagen content.

**45- Which of the following statement is true concerning excessive**

**scarring processes?**

a- keloids occur randomly regardless of gender or raceH

b- hypertrophic scars and keloid are histologically different

c- keloids tend to develop early and hypertrophic scars late after the surgical injury

d- simple re excision and closure of a hypertrophic scar can be useful in certain

situation\*

e- Both keloid & hypertrophied scar outgrow wound area.

1. **The most important factor in the etiology of bed sores is ?**
2. a. Mal-nutrition.
3. b. Prolonged pressure. \*\*
4. c. Anemia.
5. d. Immune deficiency.
6. e. Atherosclerosis

**Best method to diagnose CA head of pancreas?**

**A 60 yo male patient presented with a history of weight loss, increased fatigability, enlarged left supraclaivicular lymph nodes, and non-specific enlargement\swelling\mass?? In the epigastrium. What is the first next diagnostic method?**Answer is either CT or upper GI endoscopy.

**What is the enviormental factor that is most significantly related to pancreatic cancer:**Either smoking or alcoholism. Some students that the doctor mention smoking as the cause. Alcoholism, on the other hand, is said to be only a cause of pancreatitis. ???

**The answer is “Smoking”. Source: Dr. Bassam.**

**Wrong about umbilical hernia:**

Can heal spontaneously

Can be multicentric\multifocal\ multi-something???

Is likey to strangulate

Ans: ()

**Wrong about inguinal hernia:**

Direct hernia is more likely to herniate then inguinal hernia.

**All of the following can be tumors that arise in the pancreas, except:**

Insulinoma

Gastrinoma

????

????

**All are conditions related to the umbilicus, except:**

Dilated veins

Discoloration

Hernia

Pilonidal sinus

????

*All correct?*

**Wrong about diverticular disease:**

Can be a cause of massive GI bleeding

Is an acquired condition

Related to low fiber diet

Ans: (B)

Dr. Sa’ad Azzawi Q for Other lectures

1. A patient had appendectomy for perforated appendix, few days later he had diarrhea with tenesmus; the most likely cause is:
2. Enterocolitis
3. Adhesive intestinal obstruction
4. Pelvic abscess???
5. Mesenteric lympadenitis
6. Paralytic ileus
7. The length of the esophagus in adults is:
8. 15 cm
9. 25 cm
10. 30 cm
11. 40 cm
12. 50 cm
13. Concerning carcinoma of the esophagus all of the following are TRUE, EXCEPT:
14. It occurs usually in elderly ages
15. Progressive dysphagia is a common symptom
16. Common sites are in the middle and lower third?????
17. Squamos cell carcinoma is the commonest type
18. Usually it is associated with good prognosis
19. All of the following are features of isolated esophageal atresia, EXCEPT:
20. Excessive salivation
21. Inability to pass nasogastrial tube
22. Distended abdomen
23. Pneumonia
24. Cyanotic attacks after feeding
25. A 14-years-old boy started to complain of central abdominal pain, nausea, anorexia and slight rise of temperature. One week later he developed a tender mass in the right iliac fossa. Most probably he has:
26. Carcinoma of the cecum
27. Ileo-cecal tuberculosis
28. Appendicular mass
29. Intussusception
30. Fecal impaction
31. In appendicitis during pregnancy which ONE is CORRECT:
32. May present with right upper quadrant or right flank pain
33. Should be treated initially by antibiotics to avoid operation
34. Occurs more frequently in pregnant than in non pregnant women
35. Appendectomy is associated with 80% of abortion
36. Maternal mortality is about 20%
37. In acute appendicitis which ONE is CORRECT:
38. Localized right iliac fossa tenderness is most reliable site
39. Vomiting usually precedes pain
40. WBC and RBC in urine will rule out the diagnosis
41. In elderly patient with cardiac disease should be treated non-operatively
42. If diarrhea is present the diagnosis is excluded
43. In a patient with severe hypovolemic shock all of the following are common clinical features, EXCEPT:
44. Tachycardia
45. Sweating
46. Hyperpyrexia
47. Pallor
48. Hypotension
49. Concerning achalasia of the esophagus all of the following are TRUE, EXCEPT:
50. It occurs more in women about forty years of age
51. There is progressive dysphagia but with periods of remissions and relapses
52. Regurgitation and aspiration pneumonia are common
53. Barium swallow shows massive dilatation of the esophagus above a smoothie narrowed lower end
54. Treatment of choice is by giving antispasmodics and antibiotics
55. A 17-years-old female had undergone appendectomy for perforated appendicitis one week ago, presented with anorexia, swinging fever, ill looking and diarrhea with tenesmus. She is most likely has:
56. Subphrenic abscess
57. Pelvic abscess
58. Gastroenteritis
59. Intussusception
60. Subacute intestinal obstruction

1. Concerning carcinoma of the esophagus ALL are TRUE, EXCEPT:
2. It occurs in males more than in females
3. It is squamous cell carcinoma except its lower few centimeters where it is adenocarcinoma
4. Dysphagia is an important leading symptom
5. Barium swallow usually reveals massive dilatation above the tumor
6. Esophagoscopy is usually diagnostic

12. Motility disorders of esophagus include all the following excep

a. achlasia

b. pseudo achalasia\*

c. nutcracker esophagus

d.difuse esophageal spasm

e. idiopathic pseudo obstruction.

13. In Achalasia all are present except

a. Aperistaltic esophagus

b. Failure of LES relaxation

c. Elevated LES pressure\*

d. Increased esophageal pressure than gastric pressure

e. Male & Females equally affected

**Dr. Jameel Sawaqid Q for Other lectures**

**38-All 0f the following are true regarding the management of anal fissure except**

A-Glyceryl trinitate[ 0.2% ] 2-3 times as topical application is used for acute and chronic fissures with a success rate of 50%-85%

B-Botulinum toxin injection into the internal sphincter is used

for the chronic fissure with a success rate of 65-85%

C-Topical 2% diltiazem [Ca channel blocker ] is effective in 50% of cases

\* D-Surgical closed lateral internal sphincterotomy for the failed medical

treatment is the treatment of choice

1. In obstructive jaundice all of the following are TRUE, EXCEPT:
2. Increased serum alkaline phosphotase
3. Increased serum direct bilirubin
4. Increased urinary bilirubin
5. Increase in urine urobilinogen
6. Increased fat content of stool
7. Histologically carcinoma of the colon is usually:
8. Basal celled carcinoma
9. Squamos celled carcinoma
10. Transitional celled carcinoma
11. Well to moderately differentiated adenocarcinoma
12. Columnar celled carcinoma
13. All of the following are pre-malignant lesions as regarding colo-rectal carcinoma, EXCEPT:
14. Familial polyposis of colon
15. Ulcerative colitis
16. Villous papilloma
17. Hamartomatous polyp
18. Adenomatous polyp
19. The most useful screening for colon cancer is:
20. Sigmoidoscopy
21. Colonoscopy
22. Test for occult blood in stool?????
23. Level of carcinoembryonic antigen
24. Barium enema
25. Concerning carcinoma of the colon, all of the following are TRUE, EXCEPT:
26. Although most patients are above 60 years of age, younger ages are not immune
27. Usually it is either well or moderately differentiated adenocarcinoma
28. Right colon is affected more than left
29. Recent changes of bowel habit and rectal bleeding are early manifestations
30. Barium enema or colonoscopy must be done in all cases
31. All of the following are pre-malignant lesions in carcinoma of colon and rectum, EXCEPT:
32. Ulcerative colitis
33. Familial polyposis of colon
34. Villous adenoma
35. Hamartomatous polyp
36. Adenomatous polyp

88. In elderly patient with a recent alteration of bowel and painless bleeding per rectum the likely diagnosis is:

1. Inflammatory bowel disease
2. Internal hemorrhoids
3. Diverticulosis coli
4. Large bowel carcinoma
5. Meckel’s diverticulum with heterotopic gastric mucosa

**1--Which of the following is a constant finding in all patients with cardiac temponade**

a-Congested neck veins

b-Hypotension

c-Muffled heart sounds

d-Pulsus paradoxicus

\* e-Kussmaul`s sign ; Increased venous pressure on every inspiration of spontaneous breathing

**3- Spine immobilization is indicated in prehospital trauma patient who**

**has sustained an injury from a mechanism having the potential to cause a spine injury and who has at least one of the following excep**

a) altered mental status

b) evidence of intoxication

c) a distracting painful injury "such as a long extremity fracture"

d) neurologic deficits

\*e) spine pain-free or tenderness on palpation

**4-Which of the following is the most potential life threatening conditions**

a-Bronchial tear

b-Aortic disruption

c-Myocardial contusion

d-Flail chest

\* e-Tracheal injury

6-All of the following are true about solitay cold nodules of the thyroid except

a]15-20% of them are malignant

b]50% are part of mutinodular goitre

c]30% are simple adenomas or benign cysts

d]FNA is not diagnostic in all malignancy of the thyroid

\* e] The initial management is lobectomy

**7-All of the following are true about thyrotoxicosis**

A]It is mandatory to isotope scan the thyroid in toxic nodular goitre before surgery

B]Toxic nodular goitre affects the heart rather than the eye

C]It is essential to have a control over thyrtoxicosis before surgery

\* D]Rapid surgical or radioactive ablation of thyroid comfortably improves exophthalmos

E]The response rate to medical treatment is around 50%

**9-All are true about gas gangrene except**

A-Clostridium Perfringes [Welchii] is recovered from 80% of

cases

B-Muscle is affected from origin to insertion

C-It is a preventable infection

D-Although the patient is toxic remains mentally clear

\* E-Proper antibiotics can prevent gas gangrene

**10-The most common cause of ascending cholangitis is:**

A-Ca. head of the pancrease

\*B-Impacted stone in the common bile duct

C-cholangiocarinoma

D-Periampullary tumour

E-Extrahepatic biliary stricture

**1- All of the following are true about blood transfusion except :.-**

A-Full blood crosshatching takes 45 minutes.

B-Type specific {Saline crosshatching } takes 10 minutes.

\* C-Uncross matched type O is preferable over uncross matched type specific blood.

D-O-ve is needed only to child bearing age females .

E- Saline crosshatched blood is the first choice in life threatening situation.

**2-In traumatic rupture of the thoracic aorta , the most significant sign in CXR film is:-**

\* A-Widened mediastinum

B-Deviated esophagus{NGT}.

C-Apical pleural cap.

D-Elevated Rt. Main bronchus.

E-Prominent aortic knuckle.

**34-All of the following are true about shock in trauma patient except:-**

A-Any patient who is cool and tachycardic is in shock until proved otherwise.

B-Any shocked patient is considered hypovolaemic on the initial examination.

C-Consider non-haemorrhagic shock in injury above the diaphragm.

D-Initial normal BP and haematocrite does not exclude shock.

\* E-The presence of shock in an injured does not demand the immediate presence of a qualified surgeon.

**5-All of the following signs of different classes of shock are correct except :-**

\* A-CLASS I : Tachycardia + Low diastolic pressure.

B-CLASS II : Tachycardia + Narrow pulse pressure.

C-CLASS III : All signs of shock ; Low BP,Tachycardia, High resp rate, Low urinary

Output, Deteriorated level of conseousness .

D-CLASS IV : Mental status is markedly depressed.

E-More than 50 % Blood loss : Comatosed , No BP or pulse.

**7-All of the following are contraindications to insertion of Foley’s catheter in trauma patient except :-**

A-Blood at the external urethral meatus.

B-Scrotal haematoma.

C-Perineal haematoma.

D-Dislocated prostate.

\* E-Fracture pelvis.

**8-All of the following are correct about adult orotracheal intubations in the multiply injured patient except :-**

A-No hyper flexion or extension of the neck.

B-By laryngoscope the tongue is pushed to the left .The tube is inserted through the

Right angle of the patient’s mouth.

C-No over inflation of the endotracheal cuff.

\* D-CXR is confirmative in assessing the position of the tube

E-Auscultation of chest and abdomen does not always ascertain tube position.

**10-Which of the following is not true in assessing the patient during the primary survey:-**

A= Airway

B= Breathing

C= Circulation.

D= Disability.

\* E= Endocrine

**11-All of the following are true about duodenal injury except :-**

A- Blood aspirate from a nasogastric tube may suggest the diagnosis.

B- Persistent or rising serum amylase level may indicate the injury.

C-Gastrograffin and double contrast C.T. studies are confirmatory tests.

D-Pyloric exclusion operation is most effective diversion technique in severe cases.

\* E-According to site of injury ; 3rd part injury is considered a severe one.

**12-All of the following are true about splenorrhaphy except:-**

A-Can manage about 75% of splenic injury both in adults and children.

B-Requires complete mobilization of the spleen.

C-Hilum is approached through the gastrosplenic ligament.

D-It includes; absorbable mattress sutures over Teflon patches, coagulation,

Wrapping, and segmental resection.

\* E-Wrapping can control all bleeding vessels except the hilar`s.

**15- All of the following are true about supra-renal aortic injury except ;**

A- May need thoracotomty to have a control over the aorta

B- Resuscitation then takes priority over the repair

C- Distal control is mandatory

D-Gastric ,duodenal , and pancreatic injuries are likely associates

\* E- Repair of the aorta takes priority over sealing intestinal perforation

**16. Which of the following is not a definitive airway:**

a) orotracheal intubation

b) nasotracheal intubation

c) tracheostomy

\*d) nasopharyngeal airway

e) surgical crico thyroidotomy

**17 . In trauma; All of the following are causes of electromechanical**

**disassociation ((E.M.D.)) except:**

a) cardiac temponade

b) tension pneumothorax

c) ruptured heart

d) severe hypotension

\* e) shock lung

**18 - .All of the following are clinical presentation of patients with blunt**

**thoracic aortic injury except**

a) severe intrascapular pain

b) hoarseness of voice

c) upper extremity hypertension

"pseudocoarctatation syndrome"

d) diminished femoral pulses

\* e) systolic murmur best heard at the apex of the heart

**19 - . Spine immobilization is indicated in prehospital trauma patient who**

**has sustained an injury from a mechanism having the potential to**

**cause a spine injury and who has at least one of the following except**

a) altered mental status

b) evidence of intoxication

c) a distracting painful injury "such as a long extremity fracture"

d) neurologic deficits

\*e) spine pain-free or tenderness on palpation

**20- . All of the following contribute to a significant decrease in liver**

**injury related mortality except**

a) management of juxtavenous injuries with packing

b) Adopting Damage Control techniques

c) adopting a non-operative policy irrespective of the

severity of injury on C.T. scan

d) the use of selective arteriography with transcather embolization

to manage arterial bleeding

\*e) the use of retrocaval shunts

**21- . All of the following are critical factors in deciding to adopt a**

**Damage Control Policy in the severely injured patient except**

a) PH < 7.3

b) temperature < 35 c

c) coagolopathy "non mechanical bleeding"

d) operating time > 90 minutes

\* e) massive transfusion : 5-10 units

**22- All of the following are errors in Damage Control technique except**

a) packing the 4 quadrants before evacuation of all blood

b) failure to irrigating out gastrointestinal contamination

\* c) trying to stop small bleeder

d) choosing a more aggressive approach when a simple one can do

1. **All of the following are indications for mechanical ventilation**

**except**

a) PaO2 : 60 mm Hg or less on room air in a previously healthy

patient

b) PaCO2 : 45 mm Hg or more on room air in a previously healthy

patient

c) PaCO2 of 40 mm Hg with respiration rate of 40 / min

d) PaCO2of 65 mm Hg in a young adult who is using his accessory

muscles in addition for respiration

\* e) PaO2 of 60 mm Hg on room air in an adult patient with chronic

lung disease

**24- All of the following are true about duodenal injury except:**

a) has a delayed diagnosis but blood aspirate through N.G tube

may suggest duodenal injury

b) Persistently or rising serum amylase level may indicate the injury

c) gastrograffin and double contrast C. T. studies are confirmatory tests

d) pyloric exclusion operation is the most effective diversion technique in severe cases

\*e) according to the site; 3rd part injury is considered a severe one

**25-All of the following are true about traumatic cardiac temponade except**

a]Suggested by BECK S TRIAD and KUSSMAUL S SIGN

b]{EMD} Electromechanical dissociation in the absence of hypovolaemia and tension pneumothorax suggests cardiac temponade

c]Unresponsiveness to resuscitative efforts should initiate pericardiocentisis

d]Patients with positive pericardiocentisis require open thoracotomty and inspection of the heart

\*e]Blood in the pericardial doesn’t clot

**26. All of the following are true about Renal injury except:**

a) 85% can be managed nonoperatively

b) dynamic C.T. scan provides more accurate information

than I.V.P.

c) proximal control over the Renal Pedicle saves

a lot of nephrectomy

\*d) Gerota's capsule should be the first step of exploration

e) stitching the Renal Parenchyma should be water tight

**27. Which of the following measures, is correct in prevention**

**of fat embolic syndrome**

a) systemic anticoagulation achieving a p.t.t. greater

than 50 seconds

b) i.v. administration of alcohol

c) prophylactic administration of steroid

\* d) maintaining a serum albumin value greater than 3 gm/100mls:

the day immediately following injury

e) prophylactic positiive\_end\_expiratory pressure ventilation

**28. All of the following are acceptable maneuvers to stop**

**bleeding from a fractured pelvis**

a) using external fixators

b) using pelvic binders

c) arteriography and embolization

d) bilateral ligation of internal iliac arteries

\*e) exploration of the # site and arrest of

bleeding points

**31- All are true about cervical esophagus injury except:**

a] Difficult to diagnose b] Combined oesophagoscopy and oesophagography have an accuracy of nearly 100%

c] < 12 hours of injury , it can be primarily repaired and drained

d] > 12 hours of injury needs pharyngostomy and oesophagostomy

\* e] Generally has a good prognosis

**32-All are true about the use of mannitol in the head injured patients except**

A-It is an osmotic diuretic

B-Does not cross the brain barrier

C-The dose is 250\_500 ml of 20% sol. Given i.v over 30 min

\* D-Can be safely given to all head injured patients

E-Continuous recording of intra cranial pressure is the appropriate conjunction

**33-All of the following are true about interventional angiography in trauma except**

1. Angiography is more accurate in diagnosing injury than exploration
2. Angiography and transcatheter embolization is the treatment of choice for bleeding from a fracture pelvis
3. Angiography and embolization is successful in over 85% of selected cases of solid organ injury
4. Angiography may detect venous injury that may heal spontaneusly which otherwise may bleed substantially if the overlying haematoma is unroofed on exploration

\* E- Angiography accurately grades the severity of injury

**34-Which of the following major angiographic findings is definitive of arterial injury in trauma patients**

\* A- Extravasation of contrast with declining density

B- Narrowing of the arterial contrast column

C-Dilatation of the column

D-Occlusion of the vessel

E-Intraluminal filling defect

**36-All OF the following cause dislodgement of the initial plug in the traumatized vessel resulting in contineous blood leak except**

A-Pushing up the BP

B-Overzealous volume replacement

C-Vasodilatation

D-Haemodilution

\*E-Vessel retraction

**37-All of the following are true about [ I & II – Grade ] liver injury except**

A-They are less than 3 cm parenchymal depth laceration

B-Usually treated conservatively in the I.C.U.

C-If the patient is haemodynamicly unstable , other organs are injured

\* D-If the patient remains stable there is no need for another C.T.

E-Bilomas ,hepatic necrosis , arterial aneurysms ,arterio-venous fistula are recognized complications

**38-All of the following are true about [ III , IV , V-Grade ] liver injury except**

A-They are all haemodynamicly unstable either initially or later on

B- > 3 cm laceration depth or >10 cm parenchymal haematoma is .III-grade injury

\* C-4 adjacent segments laceration of one lobe is IV – grade injury

D-Juxta-hepatic venous injury is V-grade injury

E-Supra renal and supra hepatic I.V.C. clamping and Pringle`s maneuver is superior to Atrio-venous shunting in managing hepatic and juxta-hepatic bleeding

**39-All are true in regard of the management of the following severe venous injury except**

A-Suprarenal I.V.C. must be repaired

B-Infrarenal I.V.C. can be ligated

C-Rt. Renal vein if ligated should be followed by nephrectomy

\*D-Lt Renal vein if ligated close to the I.V.C. should be followed by nephrectomy

E-All iliac veins can be ligated

**40-All of the following are true about I.V.C. injury except**

A-50% die before reaching the hospital

B-Up to 50% 0f those reaching the hospital die of exsanguinations

C-Those who are still actively bleeding at the time of laparotomy and those with retohepatic caval injury are less likely to survive

D-Only the retro hepatic and intrapericardial segments are likely to be injured by blunt trauma

\* E-50% of the gunshot cause damage to the I.V.C.

**41-All of the following are true about portal vein injury except**

A-It is the most fatal of all vascular injury

B-Initial management requires; packing , cross clamping of the aorta above the celiac and below the renal vessels before unroofing of the overlying haematoma

C-Laceration of the suprapancreatic portion needs saphenous venous graft

\* D-Ligation of the vein is not permissible even if the hepatic artery is intact

E-Associated devastating injury is always anticipated

**42-All of the following are true in regard of the colloid versus crystalloid controversy in resuscitation except**

A-Colloids are more costly

B-Colloids are appropriate to be used in conjunction with crystalloids when blood products are not immediately available

C-Hydroxyethyl starch [HES ] reduces reperfusion injury through reducing the toxic oxygen – derived radicals

D-Albumin is associated with increased risk of death by having a negative inotropic effect and anticoagulant activity

\* E-Crstalloids are not the preferred fluid therapy

**43-Which of the following is the least priority investigation in a stable patient suffered a transmediastinal bullet injury**

A-CXR

B-Tracheobronchogram

C-Echocardiogram

D-Oesophagogram

\*E-Aortogram

**44-All of the following are true about the argument of re-exploring the abdomen for a possible occult sepsis few days following abdominal surgery in a multiply injured patient with MOD**

A-US and C.T scans detect only significant pockets

B-Re-exploration is positive in 60% of cases

C-Re-exploration is almost lethal

\* D-Pockets not detected by US or CT scan can be managed by antibiotics

E- Gut ischaemia cannot be detected except by exploration

**45-Seat belt injury in children are at greatest risk of**

A-Colonic perforation

\*B-Small bowel injury

C-Thoracolumber vertebral injury

D-Bladder rupture

E-IVC injury

**46-All of the following are true about penetrating neck injury except**

A-Unless the patient has massive haemorrhage Zone I and III are not explored

B-Zone II vascular ijury dictates exploration

C-Laryngo-tracheal injury necessitates laryngotracheoscopy for possible expectant treatment

D-Oesophageal injury demands oesophagoscopy/ swallow for possible conservative management

\* E-Pulsatile haematoma in any zone of the neck is not necessarily a candidate for exploration

**47-All of the following are causes of severe coagulopathy [Nonmechanical bleeding ] in multitrauma patients except**

A-Massive blood loss

B-Shock

C-Hypothermia

D-Transfusing packed red cells

\*E-Transfusing fresh whole blood[24-48 h old ]

**48-In the severely injured larynx patient, after attention to the possible cervical injury the most appropriate procedure to secure an airway in the ER is**

* A-Tracheostomy

B-Needle catheter cricothyroidomy

C-Nasotracheal intubation

D-Orotracheal intubation

E-Nasopharyngeal airway

**49-Cryoprecipitate contains the following factors**

\* A- I , V , VIII , XI , XII , XIII

B- I , V , VIII , XI , XII

C- I , V , VIII , XII , XIII

D- I , VIII , XI , XIII

E- I , V , VIII , XII , XIII

.

50-Primary repair is an option for all of the following injuries except

A-Knife wound to the right colon

\* B-Gunshot to the rectum

C-Gunshot to thetransverse colon and spleen

D-Knife to the sigmoid colon

E-Gunshot to the descending colo

**51-All of the following are true in regard of splenic injury except**

A-Nonoperative management is more successful in children than in adults

B-CT scan determines the presence of injury

C-CT scan does not always address the longitudinal splenic fracture

\* D-CT is a good predictor of coexisting abdominal injury

E-Absence of contrast extravasation on splenic arteriogram is agood predictor of

Successful nonoperative management

**52-A patient presented with upper G.I bleeding was diagnosed of having haemobilia**

**following a seat belt ijury 6 weeks earlier the next step of choice would be**

A-Expectant treatment

B-Exploration and ligation of hepatic artery

C-Liver resection

\*D-Arteriography and embolization

E-Debridement and direct attack of the offending vessel

**43-Which of the following is not true about the management of acute supurative[toxic] cholangitis**

A-The initial treatment requires rapid high-dose multiple broad-spectrum antibiotic therapy and fluid resuscitation

B-In minority of cases with renal and liver impairment biliary drainage is strongly indicated percutanously or naso-biliary

C-Having failed [B-above] open choledochotomy is madatory to have free flow of bile

\* D-It is necessary to clear the whole tree of stones

E-Open choledochotomy has a mortality of 25%

**44-Which of the following is not true in regard of antithrombin iii [ATIII]**

A-It is the most important natural anticoagulant protein

B-Neutralizes thrombin and factors IXa and Xa

C-Patients with > 50% [AT III ] deficiency are heparin resistant

D-Patients above [In C ] are treated with [AT iii] concentrate

\* E-Fresh frozen plasma is not a substitute to [ATIII] concentrate

1. **In a patient with a seat belt injury. The most likely organ to be injured is:**
2. Spleen
3. Liver
4. Kidney
5. Intestine
6. ???
7. **Wrong about choledocholithiasis:**
8. The stones are most commonly secondary
9. The stones are painful
10. Cause obstructive jaundice
11. Commonly cause gallstone ileus.
12. **Regarding diffuse axonal injurty:**
13. deceleration injury
14. Cause vegetative state
15. Likely to be fatal

Ans: (C) (90% vegetative form) (Rarely kills)

1. **In which one of the following conditions, it is contraindicated to insert a NG tube:**Bleeding from the nose with double ring sign
2. **True about thrombophlebitis:**
3. Fever
4. Ischemia of the limb
5. Tender cord-like structure.
6. **Wrong about diabetic foot:**
7. Painful condition???
8. Commonly associated with charcto’s joint
9. **All of the following are indications for admission of a patient with a gallbladder problem, except:**
10. Pain > 6 hours
11. Fever
12. Right upper quadrant tenderness
13. On US, fibrosis of gallbladder wall and stones.
14. **All of the following can be differentiate using AXR, except:**
15. Small v.s. large bowel obstruction
16. Partial v.s. complete obstruction
17. Proximal v.s. distal small intestinal obstruction
18. Dynamic v.s. adynamic obstruction
19. **Dermoid cysts:**- Most commonly around the orbit and the mout???

* Not attached to skin???

1. **Bleeding duodenal ulcer is from which artery?**A. Right gastric

b. Right gastroepiploic

C. Gastroduodenal

D. ???

\

1. **All are places that peptic ulcer can occur in, except:**
2. Stomach
3. Duodenum
4. Lower esophagous
5. Mickel’s diverticulum
6. Terminal ileum
7. **After a car accident, patient presented to ER with blood pressure of 90/60, distended neck-veins, heart sounds couldn’t be assessed because of crepitations of the left lung. What are you going to do next?**
8. CXR
9. US
10. Pericardiocentesis
11. ….

Ans: (C) (He has cardiac tamponade?)

**17 - Which of the following is not true about Hypernephroma ?**

A - It is adenocarcioma

B - Accounts for 75% of renal tumours.

C - Canon-ball lung deposits can be the first extrarenal spread.

\* D - Treatment of those confined to kidney is by nephrectomy within Gerota’s fascia.

E - Radiotherapy may make prognosis worse.

**18 - Which of the following not true about branchial cyst:**

A - Protrudes from beneath the anterior border of the upper 1/3 of the sternomastoid.

\* B - Always transilluminates.

C - The presence of cholesterol crystals in the aspirate confirms the diagnosis.

D - Excision entails following its track as far as the pharyngeal wall.

E - Hypoglossal and spinal accessory nerves are at risk during its removal.

**20 - All of the following are complications of ionizing radiation except:-**

A - Skin pigmentation and ulcer squamous cell carcinoma.

B - Lung fibrosis.

C - Glomerular fibrosis with malignant renal hypertention.

D - Bowel perforation, adhesion and fistula formation.

\* E - Destruction of mature sperms

**21 - All are true in regard of malignant melanoma except:-**

A - The superfiscial spreading is the most common.

B - Lentigo-maligna melanoma is the least common least malignant.

C - Nodular melanoma is the most malignant.

\* D - Amelanotic melanoma carries a very good prognosis.

E - Tumour thickness {BRESLOW} is a better measure of prognosis than

{CLARK’S} level.

**23-All of the following are true about thyroid cysts except**

A-Purely cystic , less than 4 cm are never malignant

B-Make about 10-20% of cold nodules

C-30% in females and 10% in males are malignant

D-They are mostly colloid degeneration or degeneration in a follicular adenoma

\* E-[FNA] is usually diagnostic

**24-All are true about acute mediastinitis except:-**

A- 90 % is of oesophageal origin

B-Pain simulates myocardial infarction

\* C-All of the patients have subcutaneous emphysema or pneumomediastinum

**25-Which of the following is untrue in regard of a spontaneous pneumothorax:-**

A-15-30 years old males are affected most

B-Majority are idiopathic

\*C-Never causes tension pneumothorax

D-Recurrent and chronic cases need pleurodesis

E-High incidence is reported in patients with Marfan s Syndrome

**27-Which of the following mortality correlation is false according to**

**RANSON CRITERIA In acute pancreatitis**

A- Up to 2 : 2% mortality

B- Up to 4 : 15%

C- Up to 6 : 40%

D- Up to 8 : 80%

E- Up to 10 : 100%

**28-All of the following are removed in radical neck dissection except**

A-Sternocleidomastoid muscle

B- Spinal accessory nerve

C- Internal jugular vein

D- Lower pole the parotid gland

E- Hypoglossal nerve \*

**3-All of the following are true about solitay cold nodules of the thyroid except**

a]15-20% of them are malignant

b]50% are part of mutinodular goitre

c]30% are simple adenomas or benign cysts

d]FNA is not diagnostic in all malignancy of the thyroid

\* e] The initial management is lobectomy

**4-All of the following are true about Hydatid disease except**

\* a] <50% are located in the liver

b] >25% are located in the lung

c] 25% 0f those who have it in the liver have one in the lung

d] 40% of those who have it in the lung have one in the liver

e] 25% of the cysts die , calcify and dont need treatment

**5-All of the following are causes of ANERGY except**

a]Defective [ T]& [B} lymphocytes

\*a b]Decreased number of suppressor T.cells

c]Malnutrition

d]Chemotherapy

e]Severe infection

**6-All of the following are true about Barrett`s oesophagus except**

a]The absence of intestinal metaplasia excludes Barrett`s oesophagus

b]About 1% 0f them will develope adenocarcinoma per year

c]Acid reflux is the main cause but many of them are asymptomatic

\* d]Anti-reflux surgery does abolish the potential of developing malignancy

e]Lazer ablation of the metaplastic mucosa is the treatment of choice

**10. All of the following can be responsible for anastomotic stenosis except**

of the gut except:

a) excessive inversion

b) inadequate stoma

c) ischaemia

d) circular staples

\*e) single layer anastomosis

**11. All of the following are true about fever of unknown origin**

except

a) most common malignancy causing it is lymphoma, biliary, pancreatic and Renal malignancy

b) most common infection causing it is T.B. and hepato bilialy infection

c) on laparotomy; Biopsy and culture should be taken from the liver spleen,   
mesenteric, retroperitoneal L. Nodes, omental and mesenteric fat

d) 2/3 of cases will benefit from the exploration by

laparoscopy or laparotomy

\*e) therapeutic trial of aspirin corticosteroids, or

antibiotics should be tried first

**12 - In A.R.D.S., arterial O2 saturation is maintained above 90% by all of the following except:-**

A - Increasing FiO2’ .

B - Use of PEEP.

C - Increasing tidal volume.

D - Increasing the mean airway pressure.

\* E - Increasing the ventilatory rate.

**14 - Which of the following is not true in regard of I.T.P.**

A - 75% of children regress spontaneously.

B - 60 - 80% of adults benefit from splenectomy.

\* C - Splenectomy is strongly indicated in the acute phase of I.T.P.

D - IgG transfusion may be needed prior to platelet concentrate transfusion.

E - Response to steroids predicts good response to splenctomy.

**15 - In splenic abscess all of the following are true except:-**

A - caused by infected embolus.

B - The primary is usually typhoid and paratyphoid.

C - As a rule open drainage is the course.

\* D - Splenectomy is equally successful.

E - Can be managed by guided percutanous drainage.

**16 - Empyema in the fibrinopurulent stage (3-5 days) is best managed by:-**

A - Repeated thoracocentesis

B - Tube thoracostomy

C - Tube thoracostomy and instillation of fibrinolytics.

D - Thoracostomy with debridement and drainage.

\* E - Thoracoscopy with debridement and drainage.

**30-Allof the following are true about necrotizing fascitis**

A-Mainly due to gram +ve organism

B-Follows minor trauma or infection

C-Resembles gas gangrene

D-Management is , by Debridement , crystalline penicillin, amino glycosides

and clindamycin

\* E-Hardly needs blood volume replacement

**31-All are true about gas gangrene except**

A-Clostridium Perfringes [Welchii] is recovered from 80% of

cases

B-Muscle is affected from origin to insertion

C-It is a preventable infection

D-Although the patient is toxic remains mentally clear

\* E-Proper antibiotics can prevent gas gangrene

**32-All are true about naevi except**

A-Commonly appear during childhood and adolescence

B-Congenital naevi may undergo malignant change even during childhood

\* C-Naevi on palms , soles and genitalia are prone to become malignant

D-Naevi are almost always benign prior to puberty

E-Surgical excision is the only acceptable treatment when needed

**37-The most common cause of anal stenosis is**

 A-Hemorrhoidectomy

B-Bowen`s disease

C-Fistulectomy

D-Chronic laxative abuse E-Radiation

**Thank you**