

SURGERY ARCHIVE

WOUND AND ULCER

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- 1. 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) Surgeon's hand scrub for 5 instead of 10 minutes

Correct Answer: D) Surgeon's hand scrub for 5 instead of 10 minutes

- 2. Type of wound in elective colectomy?
- A) Clean
- B) Contaminated
- C) Clean-contaminated
- D) Infected

Correct Answer: C) Clean-contaminated

- 3. The proliferation phase of wound healing is characterized by all of the following except:
- A) Formation of new capillary buds
- B) Macrophages are key cells in this phase
- C) Deposition of collagen
- D) Formation of granulation tissue

Correct Answer: B) Macrophages are key cells in this phase

- 4. 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

Correct Answer: A) Healing by primary intention results in minimum inflammation and the best scar



- 5. 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

Correct Answer: A) Primary closure

- 6. 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

Correct Answer: E) Foreign body

- 7. Wound dehiscence: all are considered to be causes, except:
- A) Anemia
- B) Hypoalbuminemia
- C) Ascites
- D) Chronic pulmonary disease
- E) Infection

Correct Answer: D) Chronic pulmonary disease

- 8. 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

Correct Answer: C) Growth beyond the original wound borders



- 9. 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

Correct Answer: E) How closely the wound edges are apposed

- 10. Type of Collagen in wound healing?
- A) Type 1
- B) Type 2
- C) Type 3
- D) Type 4

Correct Answer: C) Type 3

- 11. Collar stud abscess?
- A) Actinomycosis
- B) Tuberculous lymphadenitis
- C) Abscess of the throat
- D) Cat-scratch disease

Correct Answer: B) Tuberculous lymphadenitis

- 12. Most important cell in wound healing?
- A) Platelets
- B) Macrophages
- C) Fibroblasts
- D) Neutrophils

Correct Answer: C) Fibroblasts

هاد الجواب من قوقل ، حسب حكي الدكتورمن المحاضره الجواب macrophage



- 13. Wrong regarding management of lower limb crush trauma:
- A) Early antibiotic therapy
- B) Closure of wound
- C) Debridement
- D) Tetanus prophylaxis

Correct Answer: B) Closure of wound

- 14. Prevention of gas gangrene:
- A) Debridement of wound
- B) Primary suturing
- C) Use of antibiotics
- D) Dressing and cleaning

Correct Answer: A) Debridement of wound

- 15. Peritonitis wrong:
- A) Large clean wound heals more quickly than small wounds
- B) Infection can lead to septic shock
- C) Delayed diagnosis can worsen prognosis
- D) Early surgical intervention is crucial

Correct Answer: A) Large clean wound heals more quickly than small wounds

16. Management of contaminated contused wound is best by:

- A) Primary suturing
- B) Dressing and antibiotics
- C) Wound debridement, dressing daily, antibiotics and suturing later on
- D) Primary excision and grafting
- E) Tetanus toxoid and primary suturing

Correct Answer: C) Wound debridement, dressing daily, antibiotics and suturing later on



17. Regarding crushed (war) wounds all of the following should be done, EXCEPT:

- A) Good debridement
- B) Washing the inside of the wound with normal saline
- C) Giving good doses of broad-spectrum antibiotics
- D) Giving tetanus immunoglobulin
- E) Primary wound closure

Correct Answer: E) Primary wound closure

- 18. Most dangerous type of wound is the:
- A) Incised
- B) Lacerated
- C) Penetrating
- D) Crushed
- E) Abrasion

Correct Answer: D) Crushed

- 19. Wrong about wound healing:
- A) Cytokines are responsible for regulating fibrosis
- B) Maximum tensile strength is reached over 6 months
- C) Collagen is the primary structural protein involved in wound healing
- D) Inflammatory phase is crucial for normal wound healing

Correct Answer: A) Cytokines are responsible for regulating fibrosis

- 20. 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

Correct Answer: D) Primary wound closure



- 21. 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

Correct Answer: B) Monocytes are essential for normal wound healing

- 22. Which of the following statements is true concerning excessive scarring processes?
- A) Keloids occur randomly regardless of gender or race
- 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 situations
- E) Both keloid and hypertrophic scar outgrow the wound area

Correct Answer: B) Hypertrophic scars and keloid are histologically different

- 23. The following are among the preventive measures in surgical site infection except:
- A) Prophylactic antibiotic is not necessary in thyroid surgery
- B) Hair removal just prior to surgery
- C) Prophylactic antibiotic given one hour before surgery
- D) Prophylactic antibiotic is not necessary in clean surgery using implants
- E) Prophylactic antibiotics are enough in elective colonic surgery

Correct Answer! D) Prophylactic antibiotic is not necessary in clean surgery using implants



24. Systemic inflammatory response syndrome includes all of the following EXCEPT:

- A) Respiratory rate more than 20 breaths/min
- B) Temperature less than 36 °C
- C) Heart rate more than 90 beats/min
- D) pCO2 less than 32 mm Hg
- E) Systolic blood pressure less than 90 mm Hg

Correct Answer! E) Systolic blood pressure less than 90 mm Hg

- 25. Diabetic foot is characterized by all of the following except:
- A) Peripheral ischemia
- B) Often painful ulcers
- C) Osteomyelitis
- D) Gas forming bacteria
- E) Charcot joints

Correct Answer: B) Often painful ulcers

- 26. 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%

Correct Answer: B) Between 10 and 15%

- 27. Regarding diabetic foot all of the following are TRUE, EXCEPT:
- A) Correction of an associated anemia or pulmonary disease improves the condition of the foot
- B) Diabetes has to be controlled by insulin therapy
- C) Amputation is required once bone is infected
- D) Sympathectomy has a major role in the management
- E) Antibiotics against aerobes and anaerobes are to be given

Correct Answer: D) Sympathectomy has a major role in the management



- 28. Patients with diabetic foot, all are causes for the condition, EXCEPT:
- A) Unnoticed trauma
- B) High blood sugar
- C) Altered immunity of the patient
- D) Infection
- E) Ischemia of the lower limb

Correct Answer: D) Infection

- 29. The management of infected diabetic foot, all of the following are CORRECT, EXCEPT:
- A) Diabetes is controlled by one of the hypoglycemic drugs
- B) The limb has to be elevated on one or two pillows
- C) Antibiotics against aerobes and anaerobes should be given
- D) Any associated blood, chest, or heart disease causing tissue hypoxia should be managed

Correct Answer: A) Diabetes is controlled by one of the hypoglycemic drugs

- 30. Wrong about diabetic foot:
- A) Painful condition
- B) Commonly associated with Charcot's joint
- C) Associated with peripheral neuropathy
- D) Commonly leads to amputations

Correct Answer: A) Painful condition

- 31. Pt with acute lower limb ischemia:
- A) Embolectomy + heparin
- B) Immediate amputation
- C) Conservative management with bed rest
- D) Surgical bypass surgery

Correct Answer: A) Embolectomy + heparin



- 32. Severe venous dysfunction is characterized by ankle hyperpigmentation, induration, and open leg ulcers. What is the correct term for this condition?
- A) Stasis ulcer
- B) Postphlebitic state
- C) Chronic venous insufficiency
- D) Marjolin's ulcer

Correct Answer: C) Chronic venous insufficiency

- 33. The symptoms of acute lower limb ischemia are the following, except:
- A) Pain
- B) Paresthesia
- C) Pulselessness
- D) Hyperthermia

Correct Answer!D) Hyperthermia

- 34. Symptoms of acute lower limb ischemia are the following, except:
- A) Pain
- B) Paresthesia
- C) Pulselessness
- D) Cyanosis
- E) Paralysis

Correct Answer! D) Cyanosis

- 35. True about thrombophlebitis:
- A) Fever
- B) Ischemia of the limb
- C) Tender cord-like structure
- D) Gangrene of the affected area

Correct Answer: C) Tender cord-like structure



- 37. All are sites for pressure ulcer except:
- A) Ischium
- B) Greater trochanter
- C) Heel
- D) Occiput
- E) Sacral

Correct Answer: A) Ischium

- 38. Ulcer over pressure points (head of 1st metatarsal, calcaneus):
- A) Neurogenic ulcer
- B) Venous ulcer
- C) Arterial ulcer
- D) Pressure ulcer

Correct Answer: A) Neurogenic ulcer

- 39. The most important factor in the etiology of bed sores is:
- A) Malnutrition
- B) Prolonged pressure
- C) Anemia
- D) Immune deficiency
- E) Atherosclerosis

Correct Answer: B) Prolonged pressure



- 1- Type of ulcer surrounded by pigmentation above the medial malleolus with everted edges, next step:
- A) Ultrasound
- B) Biopsy
- C) Wound culture
- D) MRI

Correct Answer: B) Biopsy

- 2-Incorrect about cell recruitment in wound healing:
- A) Platelets Macrophages PMNs Lymphocytes Fibroblasts
- B) Platelets PMNs Macrophages Fibroblasts Lymphocytes
- C) Platelets PMNs Lymphocytes Macrophages Fibroblasts
- D) Platelets PMNs Macrophages Fibroblasts Endothelial cells

Correct Answer: A) Platelets — Macrophages — PMNs — Lymphocytes — Fibroblasts

- 3- A 67-year-old patient has a 2.5 cm Basal Cell Carcinoma (BCC). What is the best treatment option?
- A) Radiotherapy
- B) MOHs surgery
- C) Excision with safe margin
- D) Topical chemotherapy

Correct Answer: B) MOHs surgery



Mini-OSCE

A. What you see Diabetic foot

B. What is the 5 major lines for manegment

1- Mtabolic care: Measure blood sugar if high control it

2- Microbial care: Empirical antibiotics + tissue culture

3- Wound care: Simple dressing, If pus drainage, Sluffed tissue (necrotic) debridement, Amputations

4-Vascular care: Improve blood circulation, Doppler for narrowing Vessels, Bypass, graft

5- Mechanical care: Medical shoes, Try to avoid pressure, Try to avoid trauma

- What is the exact site of this ulcer?
- under the first MTP joint, planter surface of right

foot

- Mention two modalities of treatment?
- wound care (frequent dressing), metabolic care (sugar control)

• Floor is?

Granulation tissue (healty)



- 1. 70 years old female patient, bedridden with an ulcer in the lumbar region. What is the Dx?
- Pressure ulcer
- 2. What is the management?
- Split thickness graft
- Full thickness graft
- Primary intention
- Secondary intention
- Flap reconstruction







1. A 60 year old male patient was this ulcer as seen in this photo.the most helpful diagnostic aid is:

- a.Blood suger
- b.Arterial doppler
- c.X ray leg d.c/s
- e. Venous doppler

answer: e. Venous doppler



- 2. A 60 year old male patient was this ulcer as seen in this photo.the following treatment steps are helpful exc...
- a.Rest in bed
- b.Bed foot elevation
- c.Sclerotherapy
- d. Treating incompetent perforaters e. Skin graft

answer: a. Rest in bed

- 3. Type of ulcer is:
- a) Ischemic ulcer
- b) Diabetic ulcer
- c) Venous ulcer

answer: c) Venous ulcer



What is the diagnosis?

- 1.varicosity
- 2. Lipodermatos clerosis
- 3.venous ulcer
- 4.increased venous pressure
- 5. Lipodermatosclerosis + increased venous pressure



answer: 5. Lipodermatosclerosis + increased venous pressure



- 1. The most likely diagnosis?
- **1.BCC**
- 2.SCC
- 3.Melanoma

answer:1. BCC

2. the best for diagnosis? excisional biopsy



- Gold standered method for diagnosis: excisional biopsy
- Routes of spread: lymphatic / local



- What is your spot diagnosis?
- SCC
- What is the surgical management?
- Mohs surgery



- •Spot diagnosis:
- a) SCC
- b) BCS
- c) Malignant melanoma

answer: c) Malignant melanoma





- 1. Name the nerve in this picture?
 - 1. Saphenous nerve
 - 2. Deep fibular nerve
 - 3. Tibial nerve
 - 4. Sciatic nerve
 - 5. Common fibular nerve

answer: Saphenous nerve

2. One statment is right about the vein?
Originates anterior to the medial malleolus
Originates posterior to medial malleolus
Originates from femoral vein on medial side of leg
Originates anterior to lateral malleolus

answer: Originates anterior to the medial malleolus

Pic of lesion on the forehead, ulcerated, pigmented, 3 cm, not rised

Diagnosis?

BCC

How to diagnose it?

Excisional biopsy

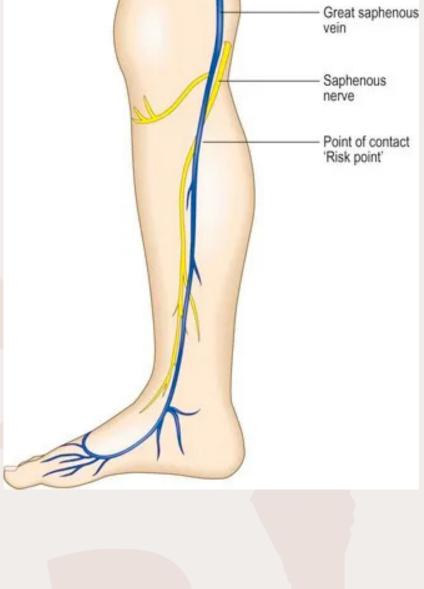
Rout of spread by?

Just local spread

• Tt?

Mohs surgery





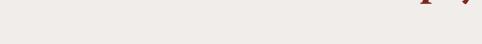


- 1. What is the diagnosis?
- Squamous cell carcinoma
- Basal cell carcinoma
- Pleomorphic adenoma

Answer: SCC

- 2. Gold standard diagnostic method for this case is:
- Incisional biopsy
- Excisional biopsy
- Head and neck CT
- Soft tissue MRI
- FNA

answer: • Incisional biopsy



Patient with DM, HbA1C 13:

1. Top Differential Diagnosis:

Necrotizing fasciitis

2. Main Step in Management:

Urgent surgical debridement

3. Complications if Not Managed Properly:

Sepsis, multi-organ failure, death

4. Name of Drain and Its Type:

Penrose drain (passive)





