

SURG ORTHO RADIO 2.0 Test

Dr. Zainab Vora

1. A 65-year-old man was originally admitted 5 days ago for peritonitis due to a perforated peptic ulcer, for which he underwent surgical repair. A large-bore, right internal jugular venous catheter was placed during the operation. Minutes after catheter removal, the patient develops acute-onset shortness of breath and cough. On examination, he appears in respiratory distress. In addition to high-flow oxygen supplementation, the patient should be immediately placed in which of the following positions?

- A. Left lateral decubitus**
- B. Prone**
- C. Right lateral decubitus**
- D. Semi-recumbent**

2. Which of the following is the best investigation to calculate ejection fraction of the heart?

A. Thallium MPI

B. 18-FDG PET

C. Cardiac MRI

D. Pyrophosphate scan

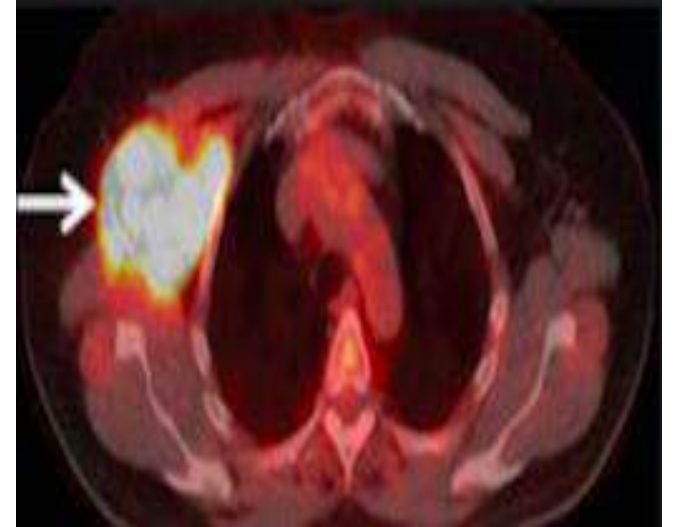
3. A 42-year-old woman comes to the office for evaluation of a mass at her right wrist. The patient first noticed swelling in her wrist a few months ago after spending a week knitting blankets for her family. Medical conditions include hyperlipidemia and rheumatoid arthritis. The mass is firm, mobile, and nontender to palpation, and it transilluminates on penlight examination. Which of the following is the most likely diagnosis in this patient?

- A Epidermoid cyst
- B. Ganglion cyst
- C. Lipoma
- D. Rheumatoid nodule



4. All are true about the image shown here except:

- A. Produces 3D functional imaging data
- B. Better contrast resolution than MRI
- C. High radiation exposure
- D. Used to detect tumor recurrence in brain tumors



5. A: 34-year-old man comes to the office due to erectile dysfunction. A palpable plaque is present on the dorsal side of the penis approximately halfway between the glans and the pubis. The testes are normal with no scrotal erythema or skin ulceration. Which of the following is the most likely diagnosis?

A. Genital warts

B. Penile cancer

C. Peyronie disease

D. Systemic sclerosis

6. A 40-year-old man comes to the emergency department due to worsening right lower abdominal pain that radiates to the right groin area. Two weeks ago, he was treated for furunculosis of the right thigh. The patient has a history of type 1 diabetes mellitus and takes insulin. Abdominal examination shows tenderness on deep palpation in the right lower quadrant without rebound or guarding. No masses are palpated. Bowel sounds are present. Extension of the right hip increases pain, and flexion decreases pain. Which of the following is the likely diagnosis?

- A. Acute appendicitis**
- B. Psoas abscess**
- C. Small bowel obstruction**
- D. Acute pancreatitis**

7. A 4-month-old girl is diagnosed with a febrile urinary tract infection. A voiding cystourethrogram is shown in the image. Which of the following is the most likely cause of this infant's presentation?

- A. Congenital short intravesical ureter length
- B. Damage to the rectovaginal septum
- C. Obstruction due to a renal stone
- D. Presence of a posterior urethral valve



8. Which of the following statements is true regarding retrosternal goitres?

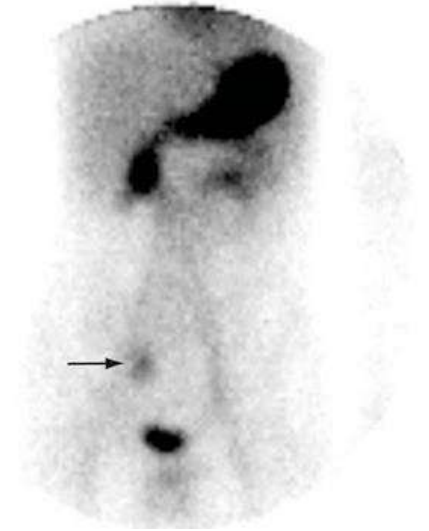
- A. Operated only if patient is symptomatic**
- B. Almost always operated by a midline sternotomy**
- C. Majority of the goitres derive their blood supply from mediastinal vessels**
- D. CT/MRI has to be done routinely in all patients**

9. Patient had difficulty in walking upstairs. When he was made to bear weight on right lower limb, the left-sided pelvis dropped down but when he was standing on the left lower limb, the right-sided pelvis moved up. Which of the following is the likely lesion?

- A. Right superior gluteal nerve palsy**
- B . Left superior gluteal nerve palsy**
- C . Right inferior gluteal nerve palsy**
- D . Left inferior gluteal nerve palsy**

10. An infant is brought to the OPD when mother notices brown stools. The child looks normal. A radionuclide study is performed which shows a finding. What is the diagnosis?

- A. Acute appendicitis
- B. Intussusception
- C. Meckel's diverticulum
- D. Malrotation



11. A 28-year-old man comes to the office for evaluation of a left testicular mass. The mass has been present for 2 months and has increased in size. He has had no pain in the affected testis or weight loss. Scrotal ultrasound reveals a solid, hypoechoic 5-cm left testicular mass. What is the next best step in management of this patient?

- A. Antibiotics and reexamination in 1 month**
- B. Fine-needle aspiration cytology**
- C. Radical inguinal orchiectomy**
- D. Transscrotal biopsy**

12. 30-year-old woman comes to the office due to pain over the lateral side of the right wrist for the last 4 days. She is 6 weeks postpartum from her first child, and the pain is most severe when she lifts the infant from the crib. With the hand in a fist and the fingers closed over the thumb, passive adduction of the wrist reproduces the pain. Which of the following is the most likely diagnosis in this patient?

- A. De Quervain tendinopathy**
- B. Flexor carpi radialis tenosynovitis**
- C. Osteoarthritis of first metacarpophalangeal joint**
- D. Scaphoid fracture**

13. A 48-year-old woman comes to the hospital for laparoscopic cholecystectomy for gallstones. In preparation for the surgery, general anesthesia with endotracheal intubation is administered. Immediately after a needle is placed into the intraperitoneal space and CO₂ gas insufflation is performed, severe sinus bradycardia and transient atrioventricular block is noted. Which of the following is the most likely cause of the observed intraoperative finding in this patient?

- A. CO₂ gas embolization**
- B. Inadequate anesthesia**
- C. Peritoneal stretching**
- D. Systemic CO₂ absorption**

14. A delayed intravenous urogram of the patient is shown. What is the most likely diagnosis?

- A. Staghorn calculus**
- B. Putty Kidney**
- C. Pelviuretric junction obstruction**
- D. Renal Cyst**



15. A 25-year-old male presented to the emergency department after a motor vehicle accident. The patient was conscious but complained of severe abdominal pain and tenderness upon palpation. The physician noted bruising and swelling in the abdominal area. Further evaluation revealed the findings shown below. What would be the best management of the same?

- A. Emergency laparotomy**
- B. Observation**
- C. CECT**
- D. eFAST**



16. A 54-year-old woman underwent surgery for breast carcinoma last year. She now presents to her oncologist with painless swelling involving her left arm, which started a few weeks 2 ago. Upon examination, the affected arm appears swollen and feels heavy, with visible thickening of the skin. There is no warmth, redness, or tenderness. What is the most likely diagnosis?

- A. Lymphedema
- B. Lymphangiosarcoma
- C. Venous thrombosis
- D. Cellulitis



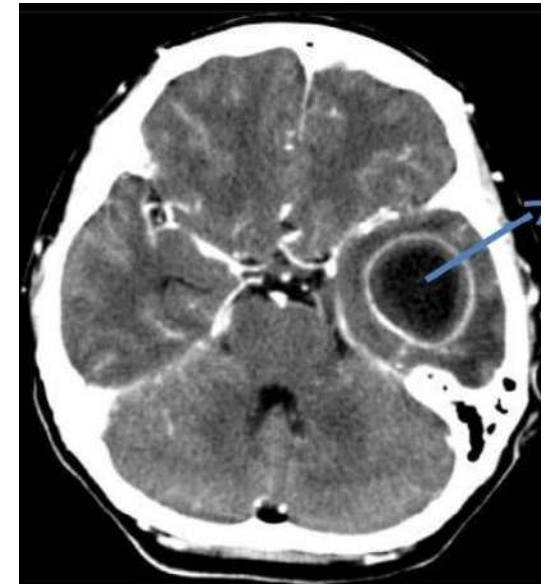
17. A 75-year-old male after a fall in bathroom and the pelvic X-ray is shown below. What will be the position of the left lower limb?

- A. Shortened and internally rotated**
- B. Shortened and abducted**
- C. Extended, abducted and externally rotated**
- D. Abducted and internally rotated**



18. A patient presents to emergency department with chronic ear discharge and head ache with ear pain. CT revealed the following findings. What is the most probable diagnosis

- A. Temporal abscess
- B. Frontal abscess
- C. Cerebellar abscess
- D. Subdural abscess



19. 76-year-old man is admitted to the coronary care unit for cardiac catheterization which shows 70% left main coronary artery stenosis, 90% proximal left anterior descending artery stenosis. Antiplatelet agents are stopped, and the patient is continued on a heparin drip in preparation for coronary artery bypass surgery the next day. Five hours after the catheterization, his blood pressure is 75/60 mm Hg and pulse is 120/min and regular. He complains of some generalized weakness and back pain but denies chest pain, shortness of breath. On physical examination, he appears diaphoretic and clammy. Neck veins are flat. The right groin arterial puncture site is mildly tender, without any swelling or bruits. He receives 1000 mL of normal saline with symptomatic improvement. His repeat ECG is unchanged from the initial ECG at presentation. Which of the following is the most appropriate next step in managing this patient?

- A. CT scan of the abdomen and pelvis
- B. Troponin T and CK-MB levels
- C. Nasogastric tube placement
- D. Transthoracic echocardiogram

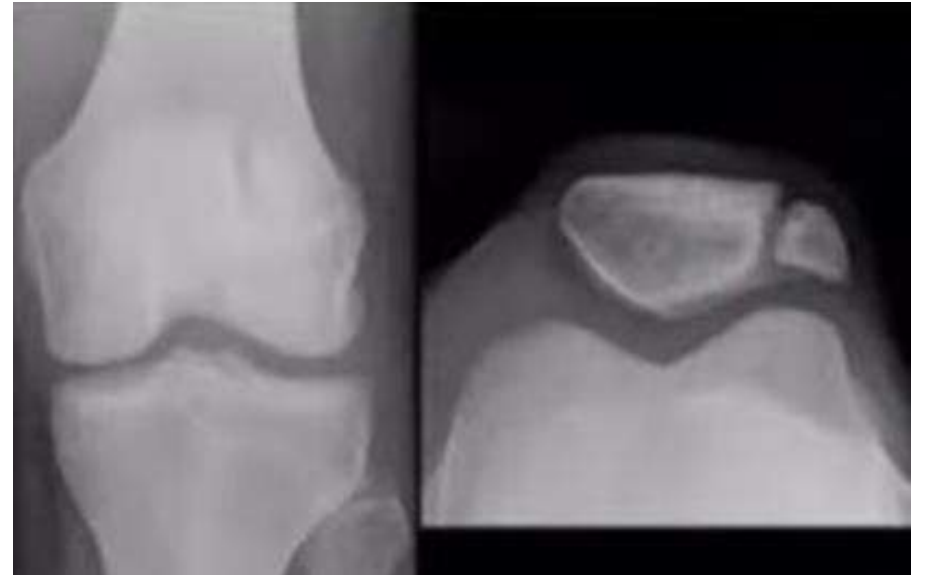
20. Identify the type of knot seen in the image given below:

- A. Half hitch knot
- B. Reef knot
- C. Surgeon's knot
- D. Granny knot



21. Shown below is an X ray of a patient with history of a chronic knee pain. True statement concerning the X ray shown would be:

- A. Avulsion fracture; cylinder cast
- B. Avulsion fracture; interfragmentary nailing
- C. Avulsion fracture; wire fixation
- D. Bipartite patella; X ray other knee



22. While performing emergency laparotomy for an unstable RTA case with blunt abdominal trauma, the surgeon notices a hematoma around the left kidney. What will be the next step in the management of this patient?

- A. Single-shot intravenous pyelography
- B. Contrast-enhanced computed tomography
- C. eFAST
- D. Direct renal exploration

23. A 64-year-old man with a history of coronary artery disease and peripheral vascular disease undergoes coronary artery bypass surgery. His postoperative course is complicated by hypotension, which is treated successfully with intravenous fluids; however, a few hours later, he experiences severe abdominal pain followed by bloody diarrhea. Abdominal examination shows normal bowel sounds, with no significant guarding or focal tenderness. The venous lactic acid level is elevated. An abdominal CT scan is ordered. Which of the following areas will most likely show abnormal findings?

- A. Ascending colon**
- B. Hepatic flexure**
- C. Jejunum**
- D. Splenic flexure**

24. A 35-year-old female, known case of depression, presents to you with colicky pain abdomen. Lab evaluation reveals raised PTH, high calcium and low phosphate. What is the best test for localization of abnormality?

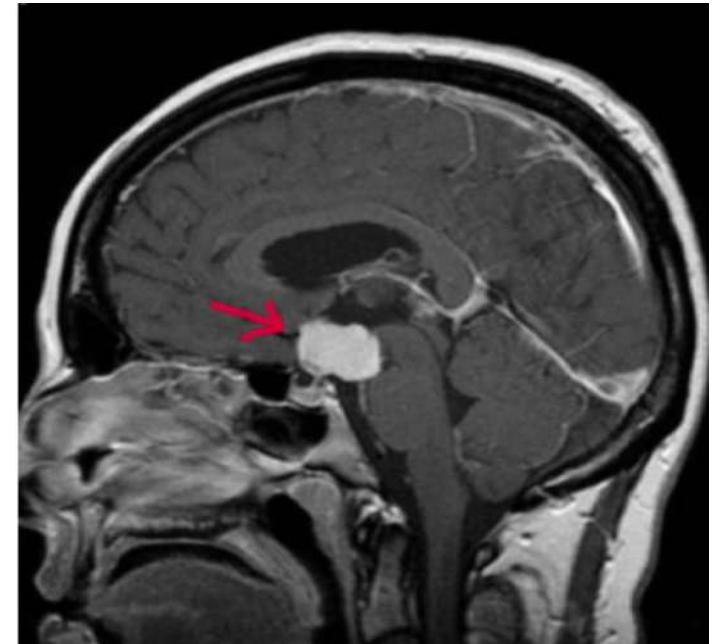
- A. USG neck**
- B. CECT neck**
- C. Tc99 Sestamibi**
- D. Sestamibi SPECT**

25. 40 year old female presents with jaundice and pain abdomen. LFT reveals raised bilirubin and GGT. USG reveals scleroatrophic GB with impacted calculi in GB with dilated CDB. What is the next step of management?

- A. Cholecystectomy**
- B. ERCP**
- C. PET scan**
- D. MRCP**

26. A 10-year-old child presents to the emergency with sudden onset of vision loss in the bilateral temporal fields. What is the probable diagnosis based on the given below?

- A. Pituitary adenoma
- B. Craniopharyngioma
- C. Rathke cleft cyst
- D. Pituitary apoplexy



27. 27-year-old primigravida at 8 weeks gestation is found to have a thyroid nodule during her initial prenatal visit. She has fatigue and frequent nausea with vomiting. Serum TSH is normal. Ultrasound of her thyroid reveals a 1.5-cm hypoechoic nodule in her right thyroid lobe with irregular margins, internal microcalcifications, and internal vascularity. Which of the following is the next most appropriate step in management of this patient?

- A. Fine-needle aspiration biopsy**
- B. MRI of the neck**
- C. Radionuclide scan**
- D. Reassurance and follow-up after delivery**

28. A 35-year-old trumpet blower presents with a neck swelling. What is the likely diagnosis?

- A. Laryngocele
- B. Thyroglossal cyst
- C. Brachial cleft cyst
- D. Carotid body tumor



29. A 22-year-old woman comes to the OPD for evaluation of new-onset foot pain. The pain is located at the heel and is most pronounced when she gets up from sitting after a long period of time. The patient is a soccer player. In addition, she enjoys running. Physical examination of the foot shows a moderately high arch with no discoloration or deformity. Direct pressure to the bottom of the heel elicits sharp pain, but mediolateral squeezing of the heel causes no discomfort. Which of the following is the most likely etiology of the patient's foot pain?

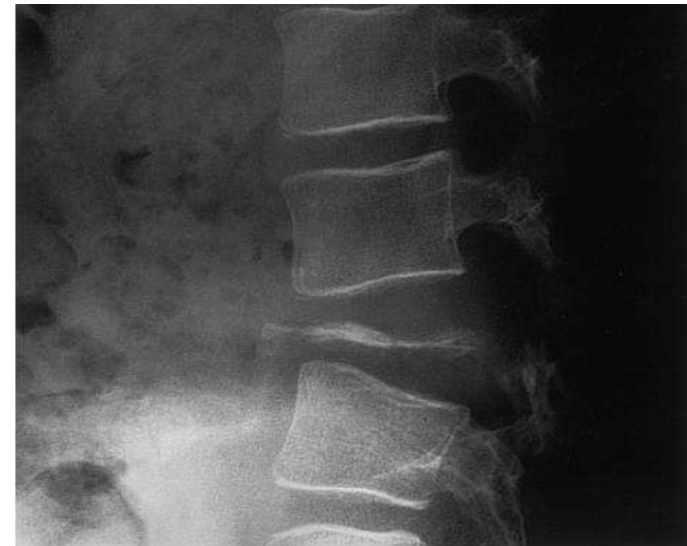
- A. Entrapment of the posterior tibial nerve
- B. Increased foot compartment pressures
- C. Stress fracture
- D. Inflammation of the plantar aponeurosis

30. 22-year-old soccer player comes to the emergency department for evaluation of a knee injury. During practice earlier that day, the patient felt her knee buckle when planting her right foot to kick the ball. Other players on the field recalled hearing an audible pop as she fell to the ground. On physical examination, the right knee is grossly swollen with limited range of motion due to pain. She is guarding on examination and has increased anterior translation of the tibia on the femur as compared to the contralateral side. Which of the following is the most likely diagnosis in this patient?

- A. Anterior cruciate ligament injury**
- B. Posterior cruciate ligament injury**
- C. Meniscal injury**
- D. Medial collateral ligament injury**

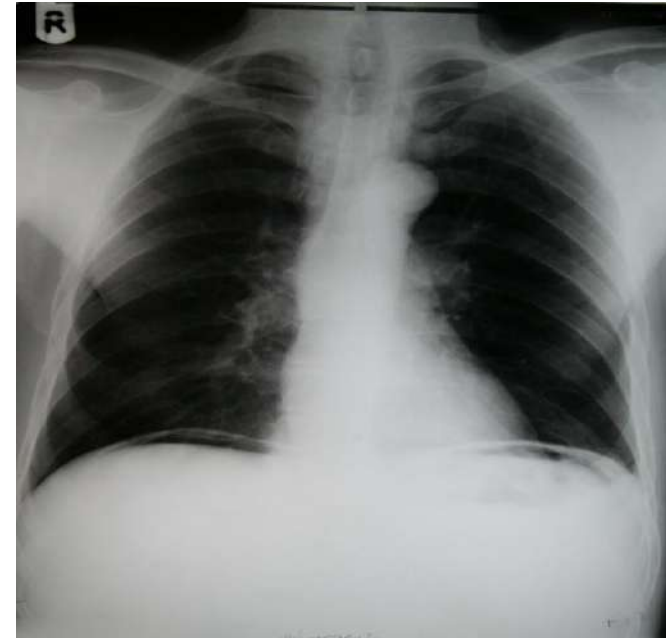
31. 6-year-old boy is brought to the OPD for evaluation of back pain. The pain has been constant for the last 2 weeks and keeps the patient from playing with his friends. He wakes up several times nightly to void and has had episodes of incontinence as the leg pain prevents him from walking to the bathroom. Which of the following is the most likely diagnosis in this patient?

- A. Langerhans cell histiocytosis**
- B. Ewing sarcoma**
- C. Mccune Albright syndrome**
- D. Mccune Albright syndrome**



32. All of the following could be the cause of the following X-ray finding except:

- A. Duodenal ulcer perforation
- B. Post laparoscopy
- C. Chilaiditi syndrome
- D. Acute intestinal obstruction



33. 29-year-old man comes to the emergency department with persistent vomiting and abdominal pain for the last 24 hours. The pain is crampy, diffuse, and getting worse. He had a normal bowel movement 3 days ago and has no diarrhea. His abdomen is distended with hyperactive bowel sounds. Percussion reveals tympany, and the patient is diffusely tender to palpation. There is no rebound tenderness or guarding. X-ray is shown below. Which of the following historical findings would most likely be seen in this patient?

- A. Appendectomy 6 months ago
- B. Fatty food intolerance
- C. High alcohol consumption
- D. Occasional black or tarry stool



34. A 3-month-old baby presents to you with jaundice. USG of the liver shows the following abnormality. What is the best investigation to confirm the diagnosis?

- A. Tc99m sulfur colloid scan
- B. Intra-operative cholangiography
- C. MIBG
- D. MRCP



35. On performing a doppler examination you would observe a monophasic flow in all of the following vessels, except:

- A. Femoral artery**
- B. Carotid artery**
- C. Umbilical artery**
- D. Femoral veins**

36. 13-year-old boy is seen in the OPD for persistent right knee pain. Height is at the 75th percentile, and weight is at the 95th percentile. The patient walks with a limp with the right foot pointed laterally. There is no tenderness, erythema, or swelling around the right knee. The anterior and posterior drawer tests are normal. Range of motion of the right hip is limited, and the knee points laterally upon passive hip flexion. Which of the following is the most likely diagnosis in this patient?

- A. ACL tear
- B. Osgood-Schlatter disease
- C. Osteoid osteoma of the proximal femur
- D. Slipped capital femoral epiphysis

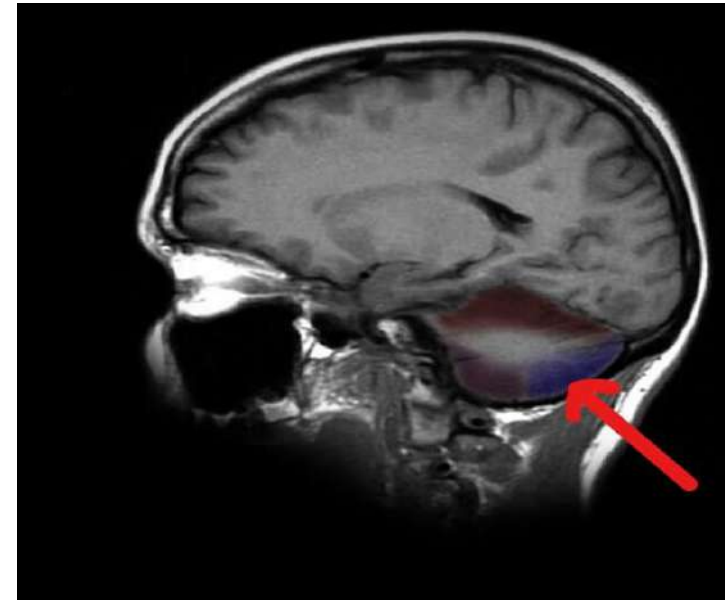
37. 18-year-old football player is brought to the emergency department due to persistent pain following a hard tackle. The patient had just caught a pass when he was tackled from the front, with the opponent landing all his weight on the patient's abdomen. Immediately afterward, he began to experience abdominal discomfort and nausea. Blood pressure is 92/64 mm Hg, pulse is 118/min, and respirations are 24/min. The abdomen is mildly distended and tender to palpation diffusely. Chest x-ray and pelvic x-ray are normal. eFAST is shown below. Further evaluation of this patient is most likely to reveal which of the following?

- A. Abdominal aortic tear**
- B. Pancreatic transection**
- C. Diaphragmatic tear**
- D. Splenic laceration**



38. Identify the labelled structure?

- A. Occipital lobe
- B. Pons
- C. Cerebellum
- D. Lentiform nucleus



39. A 5-year-old child presents with short stature. Xray reveals normal bone mineral density, and is given below. Identify the diagnosis:

- A. Rickets**
- B. Scurvy**
- C. Osteopetrosis**
- D. Achondroplasia**



40. A neonate with antenatal detected hydronephrosis presents to you for USG. This is the image that is seen now. What will you do next?

- A. DMSA scan
- B. DTPA scan
- C. IVP
- D. Captopril DTPA scan



41. Which of the following is false regarding imaging in the primary survey of a trauma patient?

- A. Hemodynamically unstable patient should not be sent for CT scan
- B. All patients should have chest X-ray PA view
- C. X-ray of the pelvis, chest and eFAST is an adjunct in primary survey
- D. X-rays in primary survey may also be done in pregnant women

42. A 52-year-old female patient present with 4 cm diameter diagnosed breast cancer lesion with ipsilateral axillary and contralateral supraclavicular lymphadenopathy as shown below. As per AJCC system, patient belongs to which stage of breast cancer?

- A. T4a N3c M1**
- B. T4b N1 M1**
- C. T4b N3c M0**
- D. T4c N1 M0**

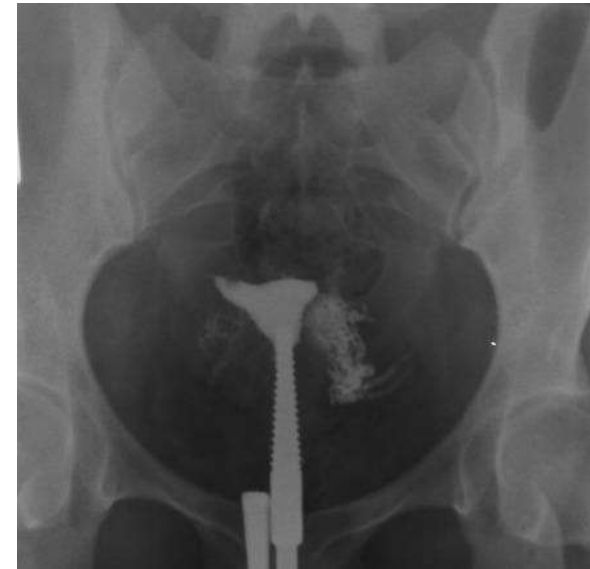


43. A 20-year-old man was stabbed in the chest during a street fight. Blood pressure is 90/58 mm Hg, pulse is 124/min, and respirations are 30/min. The patient is in severe respiratory distress. Breath sounds are present on the left and absent on the right. Heart sounds are normal. The neck veins are distended. The patient becomes obtunded during examination. Which of the following is the best next step in management?

- A. Emergency thoracotomy**
- B. Endotracheal intubation**
- C. Needle thoracostomy**
- D. Pericardiocentesis**

44. Identify the investigation:

- A. Hysterosalpingography
- B. Laparoscopy
- C. Hysteroscopy
- D. Saline infusion hysteroigraphy



45. 25-year-old man comes to the OPD with pain over the intergluteal region. The pain has been present for several weeks and makes him uncomfortable when he sits at his desk at work. He has also noticed intermittent swelling with mucoid discharge, which recently became blood-tinged. The patient has no fever or chills. Bowel movements are regular and he has no urinary symptoms. Examination shows a tender mass near the tip of the coccyx that drains mucoid fluid with pressure. Which of the following is the most likely diagnosis?

- A. Folliculitis**
- B. Hidradenitis suppurativa**
- C. Perianal Crohn disease**
- D. Pilonidal disease**

46. A 2-month-old infant is brought to the OPD with a parietal swelling present since birth. An X-ray was ordered and is shown below. What is the likely diagnosis?

- A. Cephalhematoma
- B. Subgaleal hematoma
- C. Encephalocele
- D. Caput Succedaneum



47. 23-year-old college student is brought to the emergency department by his friends due to severe retrosternal and upper abdominal pain. The patient was out with his friends drinking alcohol and celebrating the end of final exam week. An hour before arrival, he had several episodes of emesis, which is when he began experiencing the pain. Temperature is 38.3 C (101 F), blood pressure is 95/56 mm Hg, pulse is 120/min, and respirations are 30/min. Cervical lymph nodes are not enlarged, but there is palpable crepitus in the suprasternal notch. Which of the following is the most likely cause of this patient's current condition?

- A. Alcohol-induced pancreatitis**
- B. Aspiration pneumonitis**
- C. Esophageal perforation**
- D. Mallory-Weiss syndrome**

48. A patient was found to have a mass arising from the antrum of the stomach which involves the head of the pancreas and metastasis to the right lobe of the liver. How will you manage this patient?

- A. Palliative gastrojejunostomy followed by chemotherapy
- B. Radical gastrectomy
- C. Whipple's procedure
- D. Gastrectomy with right hepatectomy

49. Arrange in ascending sequential order of HU (from low to high):

- 1. Fat**
- 2. Bone**
- 3. Air**
- 4. Soft tissue**
- 5. Contrast**

-
- A. 1-2-3-4-5**
 - B. 2-3-4-5-1**
 - C. 3-1-4-5-2**
 - D. 3-1-5-4-2**

50. A patient was brought to the ER following a road traffic accident. On examination, the patient opens his eyes to a painful stimulus, speaks inappropriate words, and withdraws his limbs to a painful stimulus. What is his GCS score?

A. 8

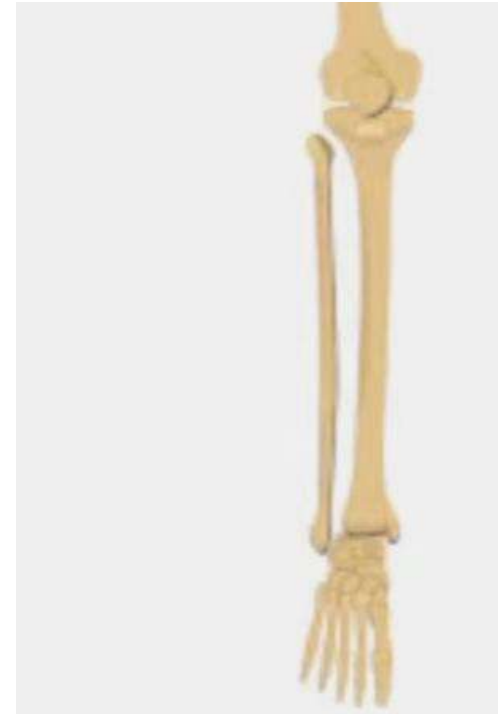
B. 9

C. 10

D. 7

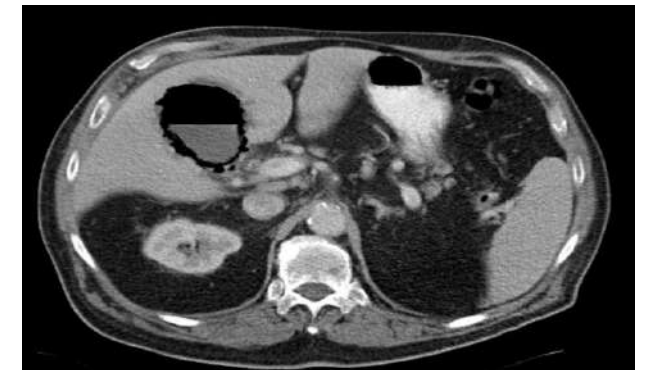
51. Fracture at which site in leg will cause failure of dorsiflexion of foot?

- A. Lateral malleolus
- B. Proximal tibia
- C. Proximal fibular neck
- D. Tibial shaft



52. 75-year-old woman comes to the emergency department due to fever, chills, abdominal pain, nausea, and vomiting for the past 2 days. Medical issues include type 2 diabetes melitus, hypertension, obstructive sleep apnea, and coronary artery disease. There is marked tenderness over the epigastrium and right upper quadrant with guarding. Bowel sounds are decreased. CECT abdomen is shown below. Which of the following additional intervention is most appropriate in the management of this patient?

- A. Delayed cholecystectomy prior to the hospital discharge
- B. Elective cholecystectomy 2 weeks after complete recovery
- C. Urgent cholecystectomy
- D. Percutaneous Cholecystostomy



53. What is the likely diagnosis?

- A. ABC
- B. Osteosarcoma
- C. Chondroblastoma
- D. GCT



54. 8-month-old boy is brought to the emergency department due to respiratory distress. Severe cough and wheezing began an hour ago while the patient was playing at his cousin's house. Chest radiograph is shown in the image below: Which of the following is the most likely cause of this patient's symptoms?

- A. Anaphylaxis
- B. Asthma
- C. Bronchiolitis
- D. Foreign body aspiration



55. Radiologically, pulmonary plethora is indicated by all of the following except:

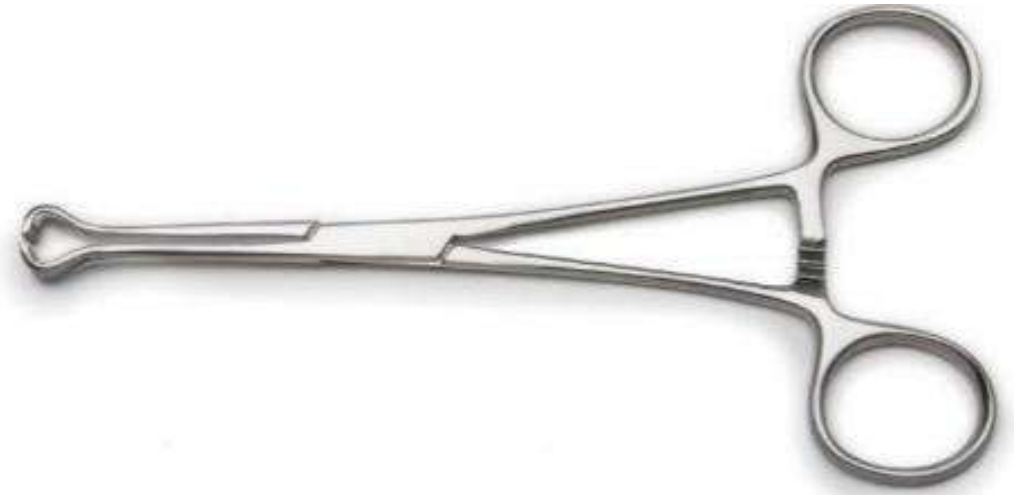
- A. Descending pulmonary artery diameter >16 mm**
- B. Kerley B lines**
- C. Diameter of peripheral arteries > accompanying bronchiole**
- D. More than 6 blood vessels in outer 1/3rd**

56. Identify the true statement:

- A. IOC for knee ligaments is NCCT
- B. Gold standard for meniscal injury is MRI
- C. Bone marrow edema is best seen on FLAIR sequence
- D. MRI is the IOC for spinal cord injury

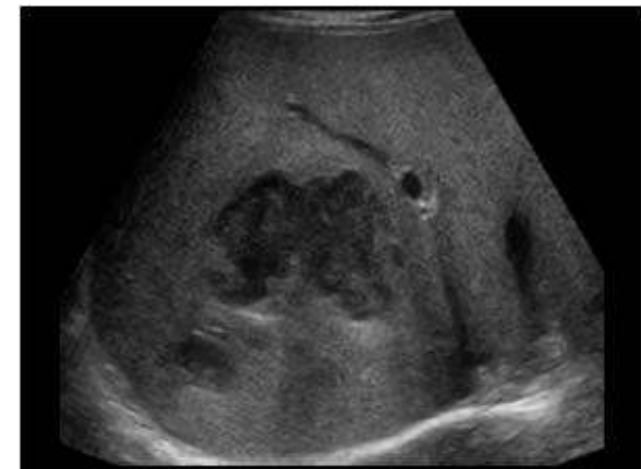
57. Identify the instrument shown in the image below:

- A. Allis Forceps
- B. Sponge holder
- C. Babcock forceps
- D. Doyen Retractor



58. 36-year-old man comes to the emergency department due to a week of progressive right upper quadrant abdominal pain, malaise, anorexia, and fever. Three months ago, he returned from a vacation in Nepal, where he hiked in the mountains. During his trip, the patient had several self-resolving episodes of diarrhea. He also had unprotected sexual intercourse with a woman he met during the trip. The patient drinks 1 or 2 cans of beer daily but stopped after his recent symptoms began. CECT and USG abdomen is shown below. Which of the following is the most likely cause of this patient's condition?

- A. Alcohol-induced liver inflammation**
- B. Gonococcal perihepatitis**
- C. Protozoal infection**
- D. Tapeworm infection**



59. A 3-day postpartum mother comes in the hospital with history of pain, red, fluctuant, 2 cm mass in the breast. USG shows fluid collection. What will you do in the management of this patient?

- A. Antibiotics and follow-up after 3days**
- B. Incision and Drainage**
- C. Hot fomentation**
- D. Empty the breasts every 3 hours**



60. What should be the treatment for the pathology as shown in the given image?

- A. Incision and drainage**
- B. Sclerotherapy**
- C. Radiotherapy**
- D. Excision**



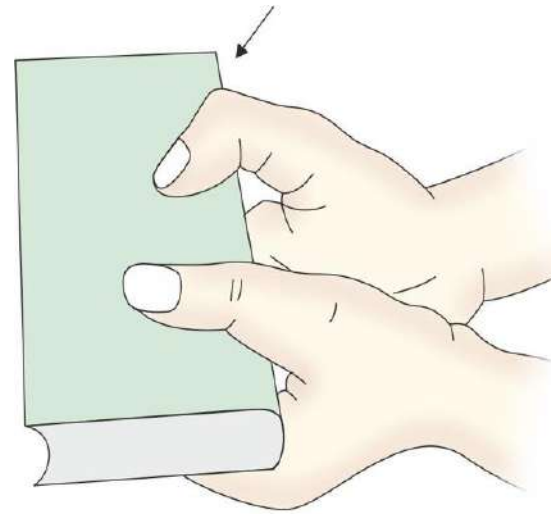
61. All of the following are signs for median nerve injury except:



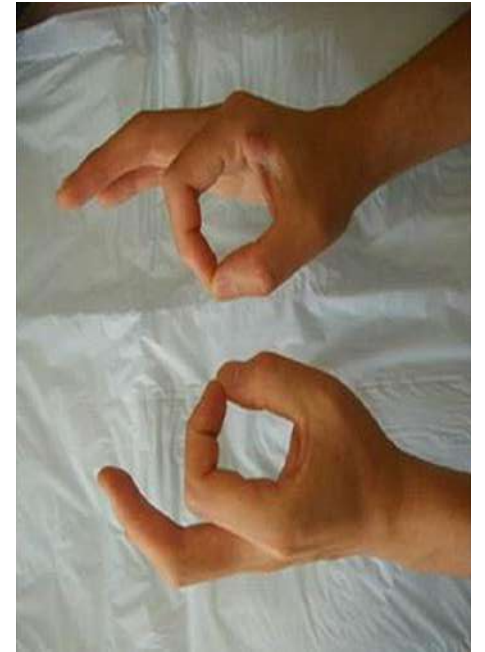
A.



B.



C.



D.

62. Patient with history of tachyarrhythmias is on implantable cardioverter defibrillator. He develops shock. Best method to know the position and integrity of ICD is:

A. CECT

B. MRI

C. USG

D. Plain radiograph

63. A 54-year-old woman comes to the ED due to left wrist pain 3 days after a fall where she landed forcefully on her left palm. Physical examination shows left wrist tenderness with maximal tenderness at the dorsoradial wrist lateral to the tendon of the extensor pollicis longus. Xray is shown below. This patient should be monitored closely during treatment due to which of the following potential complications?

- A. Malunion
- B. Fat embolism
- C. Nerve injury
- D. Osteonecrosis



64. A lady was incidentally diagnosed with a 0.5 cm solid mass in her Gall Bladder on USG as shown. What is the next step in the management?

- A. Reassure the patient and follow up
- B. Laparoscopic Cholecystectomy
- C. Open Cholecystectomy
- D. CECT Abdomen



65. 16-year-old boy is brought to the emergency department with abdominal pain. The patient has had similar episodes over the past 3 weeks following cricket matches, but these episodes resolved shortly afterward with rest. The abdomen is soft, nontender, and nondistended. There is scrotal erythema and edema; the right hemiscrotum is tender to palpation. The pain is worsened when the scrotum is elevated, and the scrotum does not transilluminate. Which of the following is the most likely cause of this patient's symptoms?

- A. Epididymitis**
- B. Incarcerated inguinal hernia**
- C. Testicular hematoma**
- D. Testicular torsion**

66. Identify the correct statements -

- 1. Proper functioning of an ICD tube is checked by presence of continuous air bubbles coming out of the underwater drain**
- 2. A green cannula is the minimum size recommended for adult trauma patients**
- 3. 14Fr Foley catheter is used in female patients and patients who have had urethral surgery or who have strictures**
- 4. NG tube is measured from ala of the nose to the ear lobule to the xiphisternum.**

A. 1,2,3,4

B. 2,3

C. 1,2,3

D. 2,3,4

67. A newborn baby presents with continuous dribbling of saliva and choking while feeding. CXR is shown here. Identify the type of TEF:

A. A

B. B

C. C

D. E



68. Identify the condition and the instrument:

- A. Tibia fracture, ilizarov fixator
- B. Femoral fracture, spanning fixator
- C. Tibia fracture, spanning fixator
- D. Periarticular fracture of knee, spanning fixator



69. A 74-year-old man presented with low back pain that was radiating to his legs. On examination of the spine, a palpable step was felt in the lumbosacral region. The CT of the spine is given below. What is the likely diagnosis?

- A. Spondylosis**
- B. Spondylolisthesis**
- C. Disc prolapse**
- D. Spondylitis**



70. A 4-hour-old boy is evaluated in the nursery for routine newborn care. The patient was born at 38 weeks gestation via spontaneous vaginal delivery to an 18-year-old woman who did not receive prenatal care or take prenatal vitamins. A soft mass inferior to the umbilical stump is 1.4 cm in diameter and covered by skin. The mass increases in size when the infant cries and reduces into the abdominal cavity with gentle pressure. Which of the following is the best next step in management of this patient's mass?

- A. Abdominal ultrasound**
- B. Immediate surgery**
- C. Observation only**
- D. Topical silver nitrate**



71. A 35-year-old female presents with pain abdomen on post-op day 5 following laparoscopic cholecystectomy. USG shows a collection in the RUQ. What is the next step?

A. ERCP

B. MRCP

C. USG guided pigtail catheter

D. Re-explore and T-tube insertion

72. Roentgen is a unit of:

- A. Radioactivity
- B. Absorbed dose
- C. Radiation exposure
- D. Equivalent dose

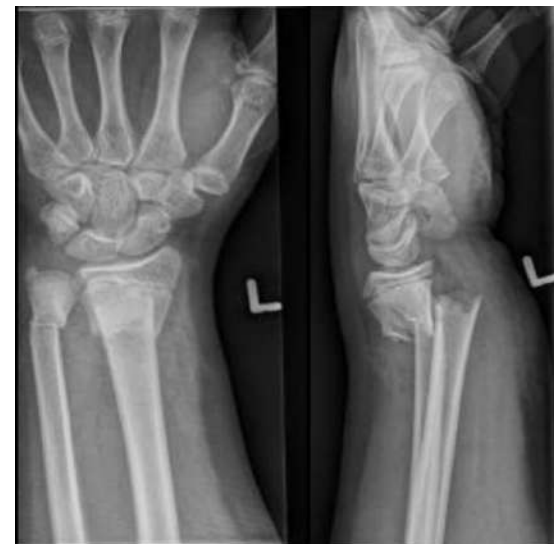
73. 65-year-old man comes to the office due to a several month history of difficulty swallowing and frequent coughing during meals. His wife reports that his breath odor has changed and his voice sounds 'gurgly.'" Barium swallow is shown below. Which of the following mechanisms leads to the development of this patient's condition?

- A. Abnormal cellular proliferation**
- B. Acid reflux**
- C. TB**
- D. Motor dysfunction**



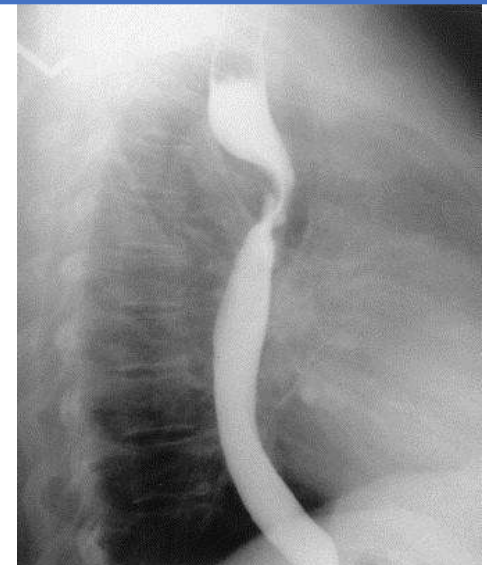
74. A 45-year-old man comes to the emergency department due to left wrist pain after a fall. The patient was walking in his house when he tripped over a rug and landed on his outstretched hand. Medical history is notable for celiac disease, hypertension, and hypothyroidism for which he takes appropriate daily medications. X-ray of the left wrist is shown below. Which of the following is the most significant risk factor for bone fracture in this patient?

- A. Age
- B. Celiac disease
- C. Hypertension
- D. Hypothyroidism



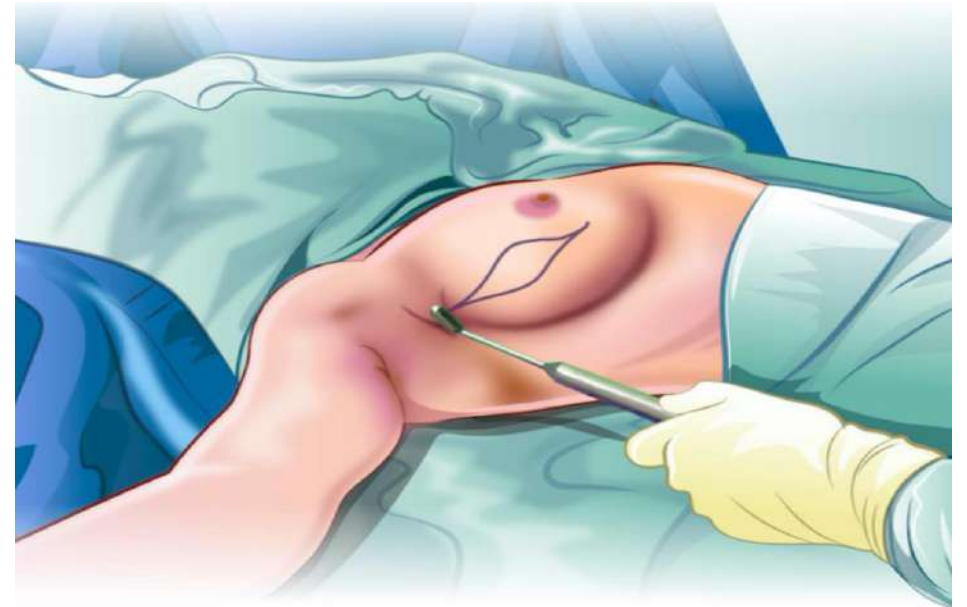
75. A 45-year-old male patient presents to their primary care physician with a complaint of dysphagia. He reports that he experiences a sensation of food getting stuck in his throat when he eats. He also reports some mild chest discomfort with exertion. The patient has a history of Down syndrome and congenital heart disease. Barium swallow is shown here. Which imaging modality should be performed next?

- A. Chest X-ray**
- B. Manometry**
- C. UGIE**
- D. Computed tomography angiography**



76. In which of the given cases is this procedure usually performed?

- A. MRM in node negative patients
- B. MRM in node positive patients
- C. BCT in node negative patients
- D. BCT in node positive patients



77. 55-year-old hypertensive male with acute chest pain, loss of consciousness, diaphoresis with unequal pulses in bilateral upper limbs. What is the best investigation in the emergency setting to reach the diagnosis?

A. TEE

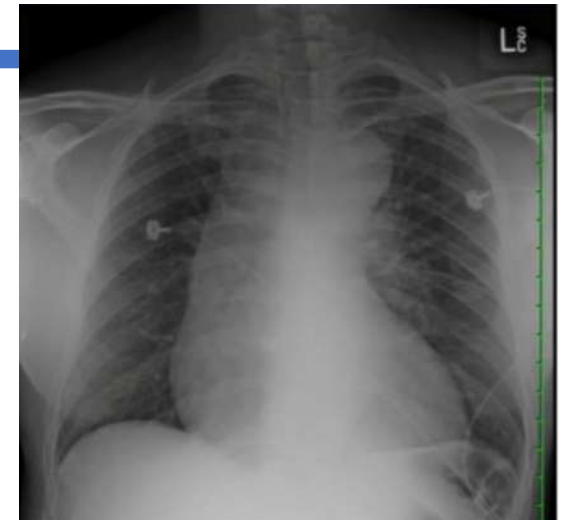
B. MRI

C. Cardiac enzymes

D. Xray

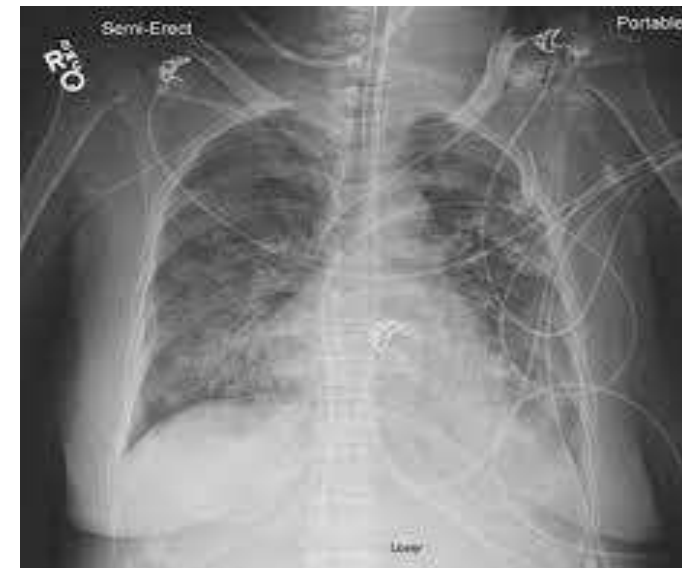
78. 78-year-old man is brought to the emergency department due to an episode of syncope while working in his garden. He has chest and neck pain that developed just prior to the syncopal episode. Temperature is 37.3 C (99.2 F), blood pressure is 144/92 mm Hg on the right arm and 142/90 mm Hg on the left arm, and pulse is 109/min ECG shows sinus tachycardia, voltage criteria for left ventricular hypertrophy, and no ST-segment or T-wave changes. Chest x-ray is shown. A bedside transthoracic echocardiogram shows a small pericardial effusion. Which of the following is the best next step in management of this patient?

- A. Antibiotics, fluid resuscitation, and admission to intensive care unit
- B. Beta blockers, anticoagulation, and admission to intensive care unit
- C. CT angiography
- D. Immediate emergency pericardiocentesis



79. A 66-year-old woman with warfarin induced bleeding receives IV vitamin K, 4 U PRBCs and 4U FFP. 4h later, she begins to complain of shortness of breath. Vitals T - 39°C, RR 35/min, SpO2 84% on RA, and BP 88/52 mm Hg. Exam revealed B/L crackles and the patient was intubated for respiratory failure. CXR is as shown in the picture. What is the likely diagnosis?

- A. Anaphylaxis**
- B. TACO**
- C. TRALI**
- D. Aspiration**



80. All are true about the muscle whose function is tested in the below shown test except:

- A. Inserts into the lesser tubercle of the humerus**
- B. Primary function is external rotation**
- C. Arises from the subscapularis fossa**
- D. Supplied by a branch of the posterior cord of the brachial plexus**



81. A 35-year-old female with Raynaud's phenomenon and tightening of skin of face and extremities presents with dyspnea and bilateral basal rales. What is the next best step?

- A. HRCT chest**
- B. 2D ECHO**
- C. PFT**
- D. MRI Chest**

82. 61-year-old man comes to the OPD due to chronic left knee pain. The pain is worse when he first gets out of bed in the morning and is associated with mild stiffness. On examination, the left knee has a small effusion and mild pain over the medial and lateral joint lines. There is no clicking or locking of the knee, but crepitus is present with range of motion. The patient is able to bear weight without pain and the joint is stable to varus and valgus stress. X-ray of the knee is shown in the image below: Which of the following is the most appropriate initial treatment for this patient's knee pain?

- A. Methotrexate**
- B. Corticosteroid injection of the knee**
- C. Knee replacement surgery**
- D. Quadriceps strengthening exercises**



83. All of the following is true about brachytherapy except:

- A. More effective in carcinoma cervix**
- B. Better than teletherapy for Large & Bulky tumor**
- C. Deliver higher dose of radiation to tumor**
- D. Less damage to normal tissue**

84. 40-year-old man is brought to the emergency department after a motor vehicle collision. Blood pressure is 130/84 mm Hg and pulse is 102/min. Abdominal palpation shows fullness and tenderness in the suprapubic region. There is no blood at the urethral meatus, and digital rectal examination reveals a normal prostate. Focused Assessment with Sonography for Trauma reveals no intraperitoneal free fluid. Pelvic x-ray reveals fracture of the left pubic ramus. A Foley catheter is placed without resistance with immediate return of bloody urine. Emergency CT scan of the abdomen and pelvis is performed. Which of the following injuries is most likely to be seen on CT scan in this patient?

- A. Anterior bladder wall rupture**
- B. Bladder dome rupture**
- C. Left ureteral injury**
- D. Urethral rupture**

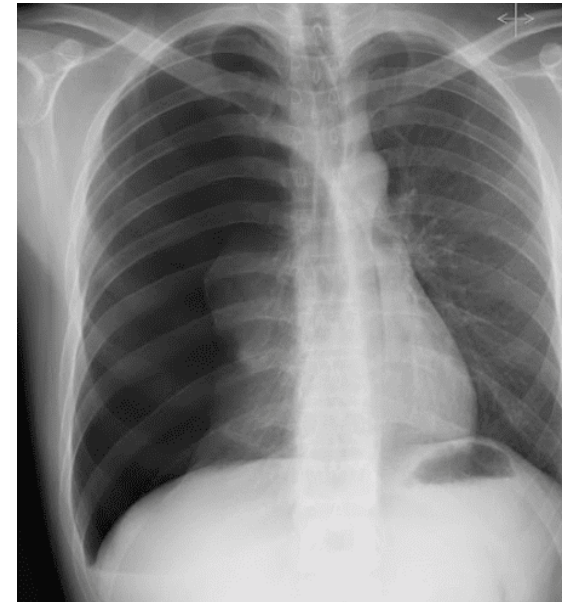
85. A 30-year-old female came to the OPD with complaints of backache. On examination, her eyes and pinna revealed blackish discoloration. What is the likely diagnosis?

- A. DISH**
- B. Fluorosis**
- C. Alkaptonuria**
- D. Ankylosing spondylitis**



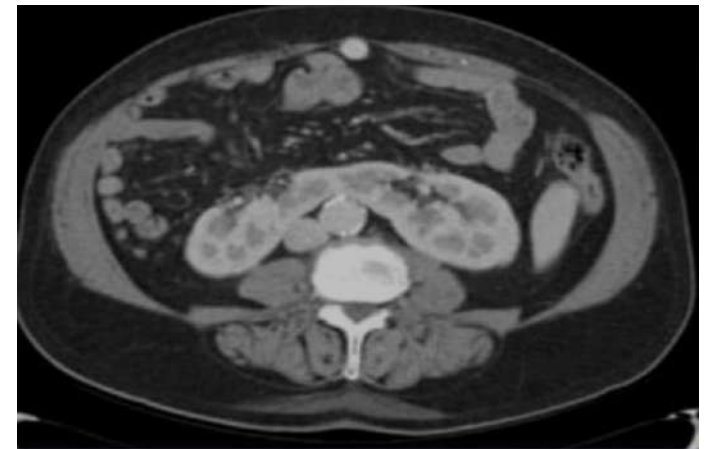
86. A 25-year-old male patient presented with sudden onset breathlessness and a sharp pain in his chest after a road traffic accident. His BP is 85/69mm Hg and HR is 110bpm. The chest X-ray is given below. What is the next step for this patient?

- A. eFAST
- B. Insert iv cannula and start iv fluids
- C. Right Needle thoracostomy
- D. Left needle thoracostomy followed by ICD



87. A 47-year-old woman comes to the office due to fever, dysuria, and abdominal pain. The patient has had several urinary tract infections since her teens but has no other medical concerns. Physical examination shows mild suprapubic discomfort. Urinalysis demonstrates pyuria and many bacteria. CT scan of the abdomen is shown in the image below: Which of the following structures has most likely limited the proper ascent of the anomalous organ seen on CT scan?

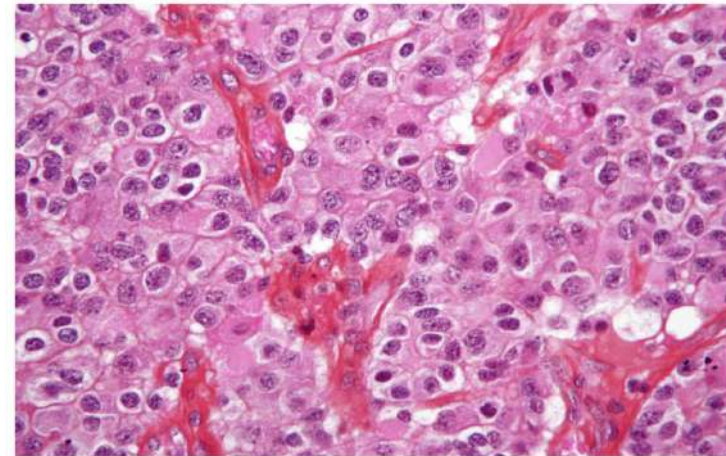
- A. Inferior mesenteric artery
- B. Inferior vena cava
- C. Persistent urachus
- D. Superior mesenteric artery



88. 26-year-old man with a history of seizure disorder and medication nonadherence is hospitalized after a generalized tonic-clonic seizure. A witness reports that the patient lost consciousness and fell to his right side; the seizure lasted about 2 minutes. Evaluation in the emergency department reveals a low serum level of his prescribed antiepileptic drug, levetiracetam, and a displaced right femur fracture. Levetiracetam is restarted and the patient undergoes intramedullary nailing of the fracture with no intraoperative complications. The next day the patient is noted to be confused. Temperature is 37.2 C (99 F), blood pressure is 142/86 mm Hg, pulse is 102/min, and respirations are 28/min. Oxygen saturation is 90% while breathing room air. On physical examination, the patient is disoriented but has no focal weakness or sensory loss. There are no skin rashes or hematoma at the surgical site. CT pulmonary angiography shows bilateral scattered ground-glass opacities but no filling defects within the pulmonary vasculature. Which of the following is the most likely cause of this patient's current condition?

89. A 40-year-old male patient is being evaluated for a suspected brain tumor. A biopsy is obtained whose image has been shown below. Which of the following is the most probable diagnosis based upon the biopsy findings?

- A. Pilocytic astrocytoma**
- B. Glioblastoma multiforme**
- C. Medulloblastoma**
- D. Oligodendroglioma**



90. A 46-year-old male presented to the clinic with a persistent cough, fatigue, weight loss, and night sweats. Xray of the patient is as given below. What is the most likely diagnosis?

- A. Streptococcus pneumoniae infection**
- B. Mycobacterium tuberculosis infection**
- C. Carcinoma lung**
- D. Sarcoidosis**



91. 59-year-old woman comes to the office for routine visit. She reports no symptoms. Physical examination shows a firm, nontender mass in the right upper quadrant. The remainder of the examination is within normal limits. Abdominal CT scan is shown in the image below. What is the likely diagnosis?

- A. Calcified hydatid cyst**
- B. Porcelain GB**
- C. Renal calculus**
- D. Splenenculus**



92. A woman presented to the clinic with heavy, painful menses that have worsened over the past year. On pelvic examination the uterus is enlarged and tender. MRI scan of the patient's abdomen revealed a finding similar to the image given below. What is the most likely diagnosis?

- A. Polyps**
- B. Leiomyoma**
- C. Adenomyosis**
- D. Endometrial hyperplasia**



93. Match the following images:



A. Venous ulcer

B. Marjolin ulcer

C. Arterial ulcer

D. Trophic ulcer

A. 1-C, 2-D, 3-B, 4-A

B. 1-D, 2-C, 3-A, 4-B

C. 1-C, 2-D, 3-A, 4-B

D. 1-D, 2-C, 3-B, 4-A

94. 42-year-old woman reports bloating with mild, diffuse abdominal discomfort 4 days after undergoing an elective cholecystectomy. She has not passed gas since the surgery. Perioperatively, she received antibiotics, morphine for pain, and metoclopramide for nausea. Physical examination shows a distended, tympanic abdomen with decreased bowel sounds. There is mild, diffuse tenderness but no rebound or guarding. Which of the following is most likely contributing to this patient's current condition?

- A. Impaction of a gallstone in the ileum
- B. Metoclopramide
- C. Morphine
- D. Postoperative adhesions

95. Identify the correct scenario:

- 1. Loss of sensations over the root of penis after lap hernia repair-Ilioinguinal nerve**
 - 2. Hyperesthesia of tongue after parotid surgery-Auriculotemporal nerve**
 - 3. Diaphragm palsy after thymoma resection-Phrenic nerve**
 - 4. Loss of sensations over the lateral gluteal region after hernia mesh repair-LCNT**
-

Options;

- A. 1,2,3,4**
- B. 1,2,3**
- C. 1,3**
- D. 2,3,4**

96. A 23-year-old man comes to the emergency department after injuring his right shoulder during a basketball game. He was trying to block a shot when his abducted and externally rotated arm was forced backward by an opposing player. Plain film x-ray of the right shoulder is shown below. If left untreated, which of the following is the most likely complication of this patient's injury?

- A. Inability to extend fingers**
- B. Winging of scapula**
- C. Numbness of the medial 2 fingers**
- D. Shoulder abduction weakness**



97. A patient presents to the emergency room with symptoms of fever, increased respiratory rate, elevated heart rate, and low blood pressure. The physician suspects the patient may have SIRS. Which of the following is not a criteria for SIRS?

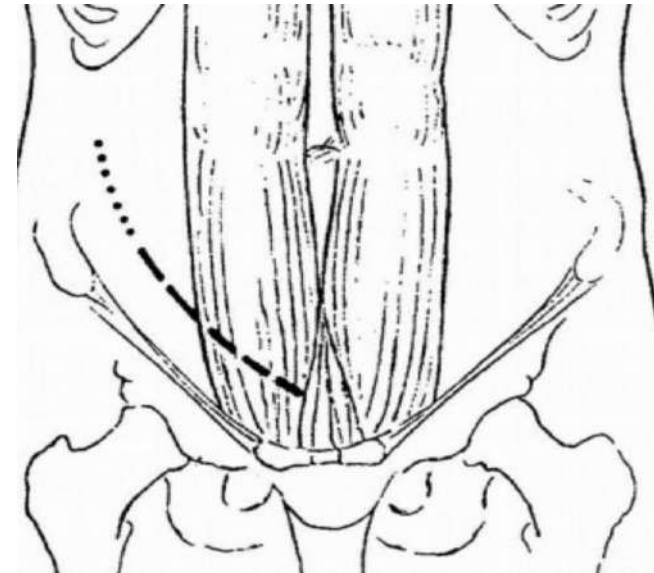
- A. Systolic blood pressure <90 mmHg**
- B. Temperature >38 degree Celsius or <36 degree Celsius**
- C. Respiratory rate >20 bpm**
- D. Heart rate >90 min**

98. 59-year-old man comes to the office for a postoperative follow-up. He underwent a partial (distal) gastrectomy for a perforated peptic ulcer 3 weeks ago. For the last 10 days, he has had intermittent abdominal cramps and diarrhea. Symptoms begin 25-30 minutes after eating and are associated with nausea, weakness, palpitations, lightheadedness, and diaphoresis. The patient has no symptoms overnight, and there is no associated fever or weight loss. What is the likely diagnosis?

- A. Dumping syndrome
- B. Refeeding syndrome
- C. Tumor lysis syndrome
- D. SIBO

99. Identify the incision shown below:

- A. Gibson incision
- B. Kocher incision
- C. Maylard incision
- D. Mercedes Benz incision



100. A 35-year-old man comes to the office due to a progressive increase in breast size over the past 6 months. Genitourinary examination reveals a 1-cm nodule in the right testis. The examination is otherwise normal. Laboratory results are as follows

LH: 3 U/L (normal 6-23 U/L)

FSH: 2 U/L (normal 4-25 U/L)

Testosterone: 270 ng/dL (normal: 300-1,000 ng/dL)

Estradiol: 115 pg/mL (normal: 20-60 pg/mL)

B-hCG: undetectable

Alpha-fetoprotein: undetectable

Which of the following is the most likely diagnosis in this patient?

A. Choriocarcinoma

B. Leydig cell tumor

C. Seminoma

D. Yolk sac tumor

Thank You

SURG ORTHO RADIO 2.0

Test

Dr. Zainab Vora

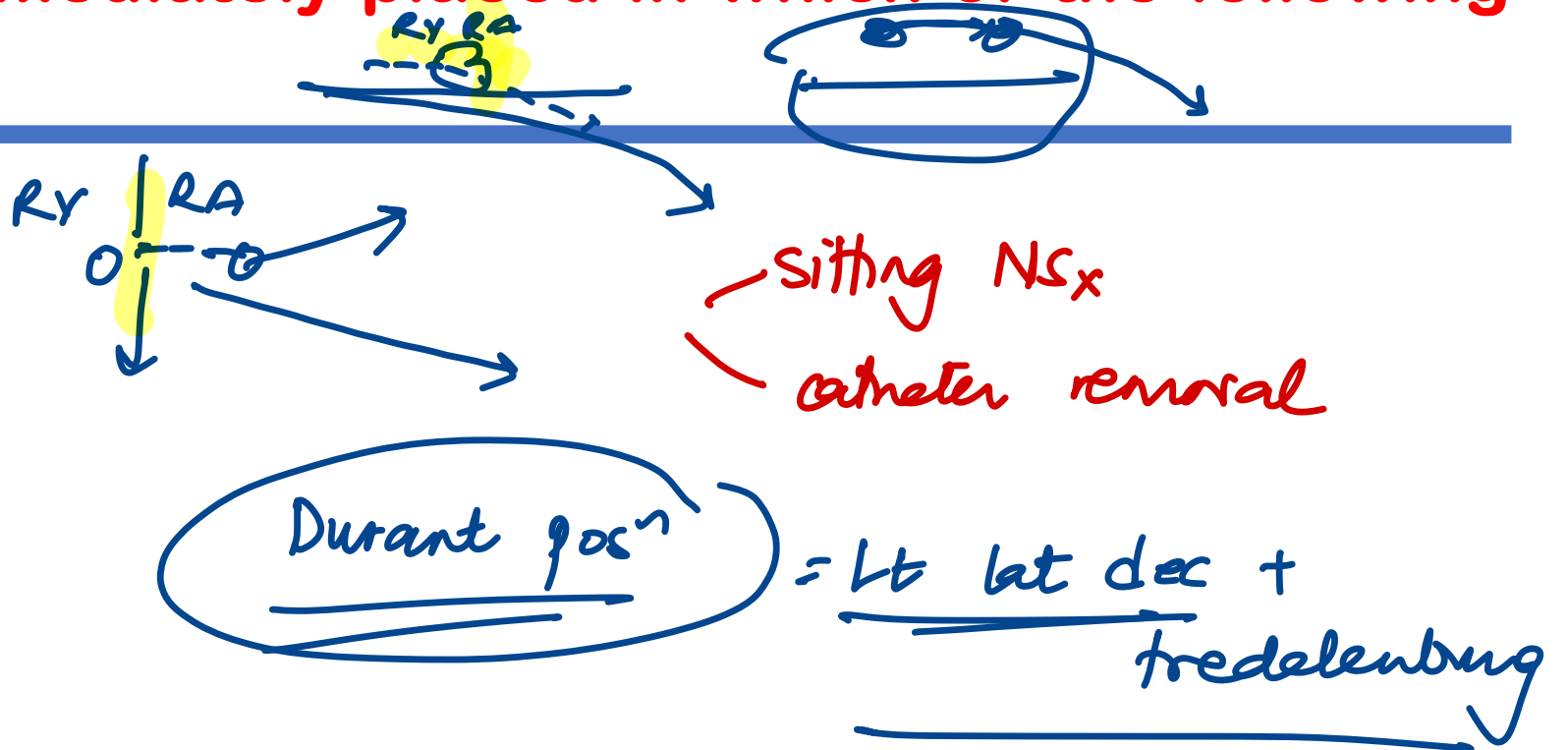
1. A 65-year-old man was originally admitted 5 days ago for peritonitis due to a perforated peptic ulcer, for which he underwent surgical repair. A large-bore, right internal jugular venous catheter was placed during the operation. Minutes after catheter removal, the patient develops acute-onset shortness of breath and cough. On examination, he appears in respiratory distress. In addition to high-flow oxygen supplementation, the patient should be immediately placed in which of the following positions?

A. Left lateral decubitus

B. Prone

C. Right lateral decubitus

D. Semi-recumbent



2. Which of the following is the best investigation to calculate ejection fraction of the heart?

A. Thallium MPI

B. 18-FDG PET — 100% - viability

C. Cardiac MRI

D. Pyrophosphate scan

ischemia
imaging

Perfusion

• Th-201

• Tc⁹⁹-sestamibi

• Tc⁹⁹-tetrofosmin

ischemia: COLD SPOT

Infarct

Tc⁹⁹-pyrophosphate

infarct:

HOT SPOT

ventricular fn

ECGD
(MC)

MUGA
scan

MRI

IOC

best

3. A 42-year-old woman comes to the office for evaluation of a mass at her right wrist. The patient first noticed swelling in her wrist a few months ago after spending a week knitting blankets for her family. Medical conditions include hyperlipidemia and rheumatoid arthritis. The mass is firm, mobile, and nontender to palpation, and it transilluminates on penlight examination. Which of the following is the most likely diagnosis in this patient?

A. Epidermoid cyst - sebaceous cyst ⊙ punctum

B. Ganglion cyst - communicates EJT - resolves spontaneously

C. Lipoma x x

D. Rheumatoid nodule x x



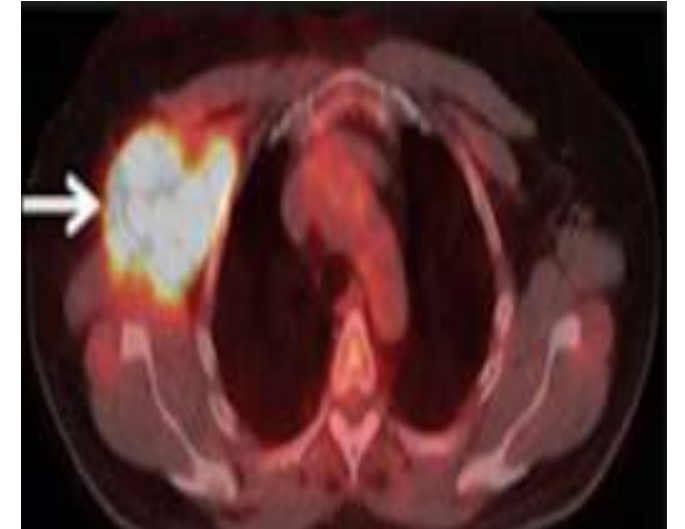
4. All are true about the image shown here except:

A. Produces 3D functional imaging data

~~B. Better contrast resolution than MRI~~

C. High radiation exposure

D. Used to detect tumor recurrence in brain tumors



vs RT necrosis / scar
brain: physiological

PET-CT
✓ ✓

5. A 34-year-old man comes to the office due to erectile dysfunction. A palpable plaque is present on the dorsal side of the penis approximately halfway between the glans and the pubis. The testes are normal with no scrotal erythema or skin ulceration. Which of the following is the most likely diagnosis?

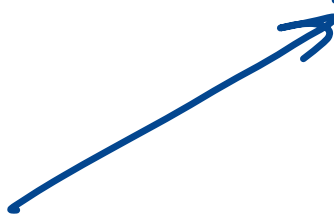
A. Genital warts

B. Penile cancer

C. Peyronie disease

D. Systemic sclerosis

IgG4-RD



6. A 40-year-old man comes to the emergency department due to worsening right lower abdominal pain that radiates to the right groin area. Two weeks ago, he was treated for furunculosis of the right thigh. The patient has a history of type 1 diabetes mellites and takes insulin. Abdominal examination shows tenderness on deep palpation in the right lower quadrant without rebound or guarding. No masses are palpated. Bowel sounds are present. Extension of the right hip increases pain, and flexion decreases pain. Which of the following is the likely diagnosis?

Psoas sign

A. Acute appendicitis

B. Psoas abscess

C. Small bowel obstruction

D. Acute pancreatitis

7. A 4-month-old girl is diagnosed with a febrile urinary tract infection. A voiding cystourethrogram is shown in the image. Which of the following is the most likely cause of this infant's presentation?

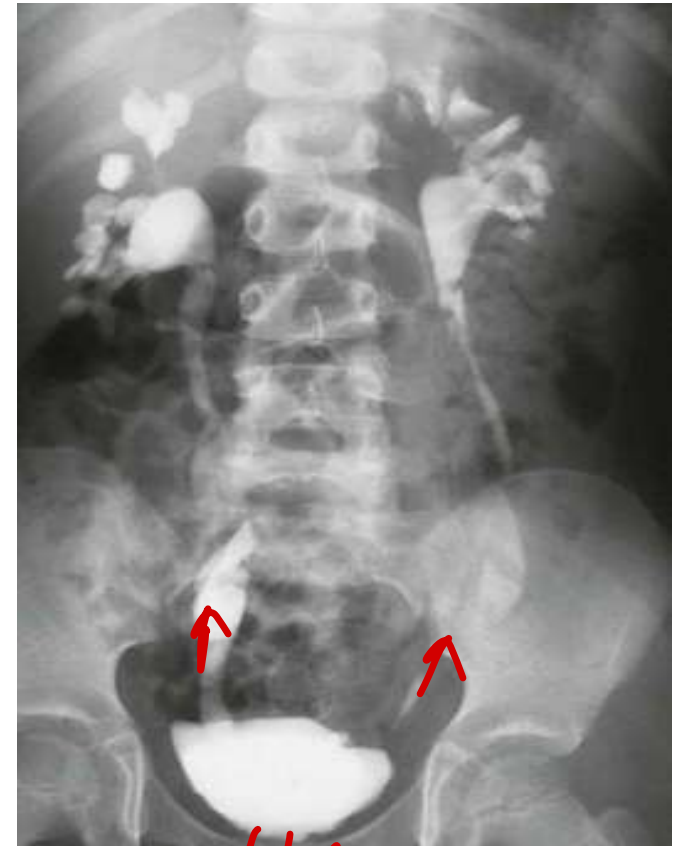
A. Congenital short intravesical ureter length

B. Damage to the rectovaginal septum

C. Obstruction due to a renal stone

D. Presence of a posterior urethral valve (PUV)

VUR



PUV

8. Which of the following statements is true regarding retrosternal goitres?

A. Operated only if patient is symptomatic

B. Almost always operated by a midline sternotomy ^{neck} ~~xx~~

C. Majority of the goitres derive their blood supply from mediastinal vessels ~~xx~~

~~D. CT/MRI has to be done routinely in all patients~~

9. Patient had difficulty in walking upstairs. When he was made to bear weight on right lower limb, the left-sided pelvis dropped down but when he was standing on the left lower limb, the right-sided pelvis moved up. Which of the following is the likely lesion?

A. Right superior gluteal nerve palsy

B. Left superior gluteal nerve palsy

C. Right inferior gluteal nerve palsy

D. Left inferior gluteal nerve palsy

D O L I
- -

RT

GL medius - GT

10. An infant is brought to the OPD when mother notices brown stools. The child looks normal. A radionuclide study is performed which shows a finding. What is the diagnosis?

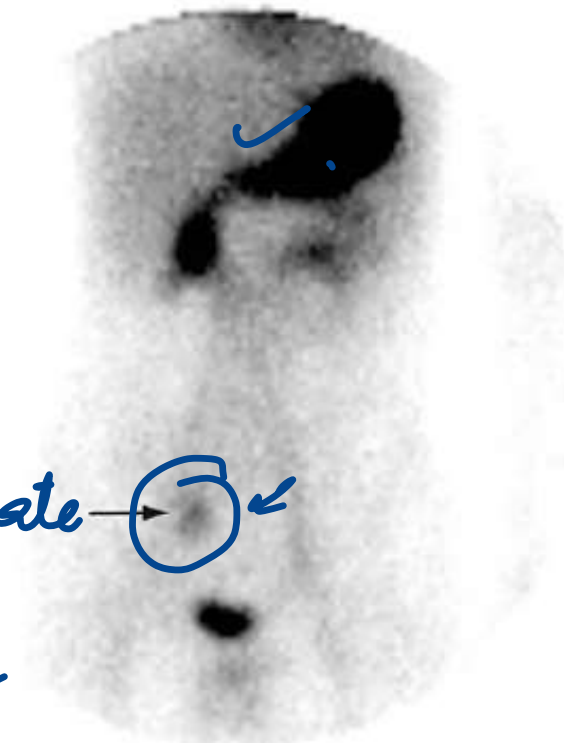
A. Acute appendicitis *x*

B. Intussusception *x*

C. Meckel's diverticulum

D. Malrotation *x*

Tc^{99m} -pertechnetate → 
↓
Stomach



11. A 28-year-old man comes to the office for evaluation of a left testicular mass. The mass has been present for 2 months and has increased in size. He has had no pain in the affected testis or weight loss. Scrotal ultrasound reveals a solid, hypoechoic 5-cm left testicular mass. What is the next best step in management of this patient?

A. Antibiotics and reexamination in 1 month

B. Fine-needle aspiration cytology

C. Radical inguinal orchiectomy

D. Transscrotal biopsy

HIRO
↳ Best for T staging

E. Tumor markers
Initial To : USC⁺

12. 30-year-old woman comes to the office due to pain over the lateral side of the right wrist for the last 4 days. She is 6 weeks postpartum from her first child, and the pain is most severe when she lifts the infant from the crib. With the hand in a fist and the fingers closed over the thumb, passive adduction of the wrist reproduces the pain. Which of the following is the most likely diagnosis in this patient?

A. De Quervain tendinopathy

. Finkelstein test

B. Flexor carpi radialis tenosynovitis

C. Osteoarthritis of first metacarpophalangeal joint

D. Scaphoid fracture

13. A 48-year-old woman comes to the hospital for laparoscopic cholecystectomy for gallstones. In preparation for the surgery, general anesthesia with endotracheal intubation is administered. Immediately after a needle is placed into the intraperitoneal space and CO2 gas insufflation is performed, severe sinus bradycardia and transient atrioventricular block is noted. Which of the following is the most likely cause of the observed intraoperative finding in this patient?

- A. CO2 gas embolization *xx*
- B. Inadequate anesthesia *xx*
- C. Peritoneal stretching
- D. Systemic CO2 absorption *xx*

vagal discharge
transient bradycardia

14. A delayed intravenous urogram of the patient is shown. What is the most likely diagnosis?

A. Staghorn calculus



B. Putty Kidney



C. Pelviuretric junction obstruction

D. Renal Cyst



15. A 25-year-old male presented to the emergency department after a motor vehicle accident. The patient was conscious but complained of severe abdominal pain and tenderness upon palpation. The physician noted bruising and swelling in the abdominal area. Further evaluation revealed the findings shown below. What would be the best management of the same?

A. Emergency laparotomy

B. Observation X

C. CECT X

D. eFAST X

Penetrating

- unstable
- GSW
- perit breach
- evisceration
- impaled object
- rectal bleeding

-OT



16. A 54-year-old woman underwent surgery for breast carcinoma last year. She now presents to her oncologist with painless swelling involving her left arm, which started a few weeks 2 ago. Upon examination, the affected arm appears swollen and feels heavy, with visible thickening of the skin. There is no warmth, redness, or tenderness. What is the most likely diagnosis?

A. Lymphedema

B. Lymphangiosarcoma

C. Venous thrombosis \times

D. Cellulitis \times

~ yrs
} pain, erythema

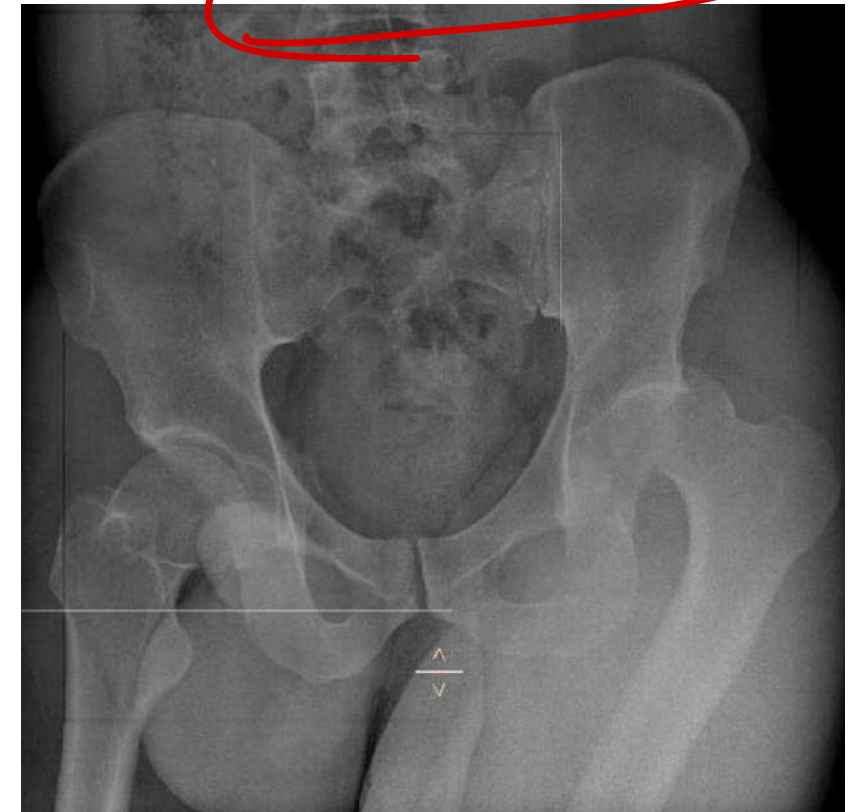


17. A 75-year-old male after a fall in bathroom and the pelvic X-ray is shown below. What will be the position of the left lower limb?

Post dislocⁿ

FADIR

- ~~A. Shortened and internally rotated~~
- ~~B. Shortened and abducted~~
- ~~C. Extended, abducted and externally rotated~~
- ~~D. Abducted and internally rotated~~



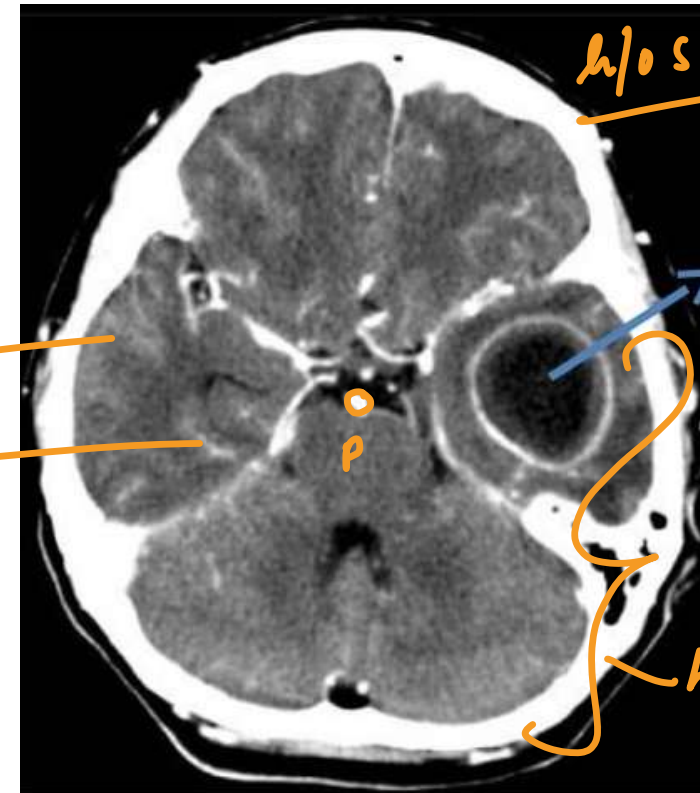
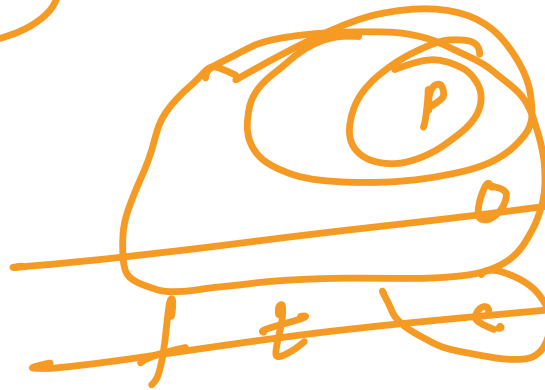
18. A patient presents to emergency department with chronic ear discharge and head ache with ear pain. CT revealed the following findings. What is the most probable diagnosis

A. Temporal abscess

B. Frontal abscess

C. Cerebellar abscess

D. Subdural abscess



h/o sinusitis

h/o CSOM

19. 76-year-old man is admitted to the coronary care unit for cardiac catheterization which shows 70% left main coronary artery stenosis, 90% proximal left anterior descending artery stenosis. Antiplatelet agents are stopped, and the patient is continued on a heparin drip in preparation for coronary artery bypass surgery the next day. Five hours after the catheterization, his blood pressure is 75/60 mm Hg and pulse is 120/min and regular. He complains of some generalized weakness and back pain but denies chest pain, shortness of breath. On physical examination, he appears diaphoretic and clammy. Neck veins are flat. The right groin arterial puncture site is mildly tender, without any swelling or bruising. He receives 1000 mL of normal saline with symptomatic improvement. His repeat ECG is unchanged from the initial ECG at presentation. Which of the following is the most appropriate next step in managing this patient?

RP Hematoma!

Hypotensive shock

A. CT scan of the abdomen and pelvis

B. Troponin T and CK-MB levels X

C. Nasogastric tube placement X

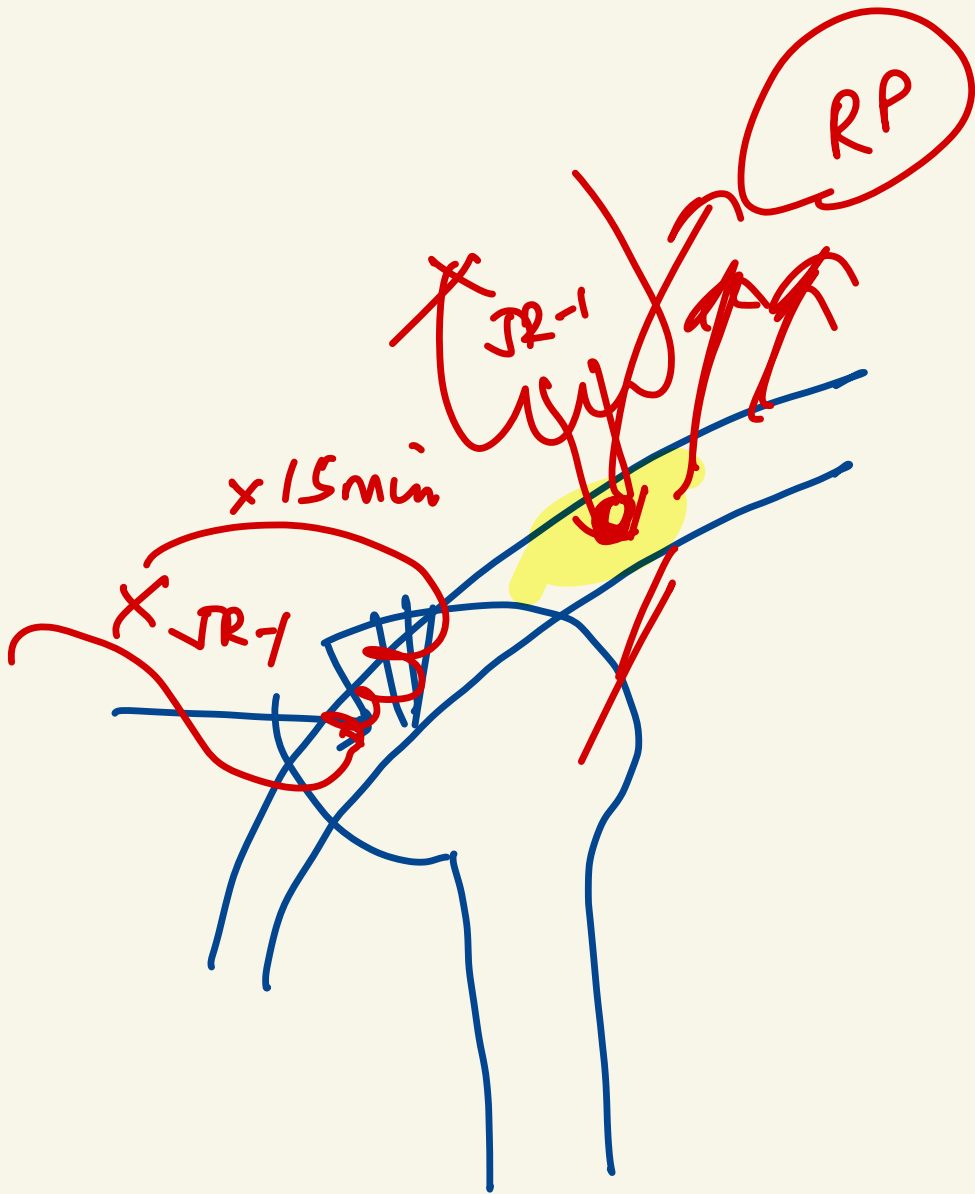
D. Transthoracic echocardiogram X

Ⓢ transmade

PsA fem A
AVC

+ back pain

femoral art puncture
RP hematoma



20. Identify the type of knot seen in the image given below:

A. Half hitch knot

B. Reef knot

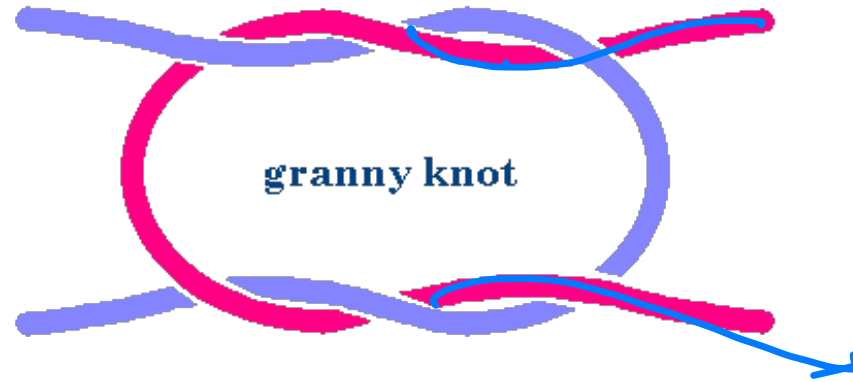
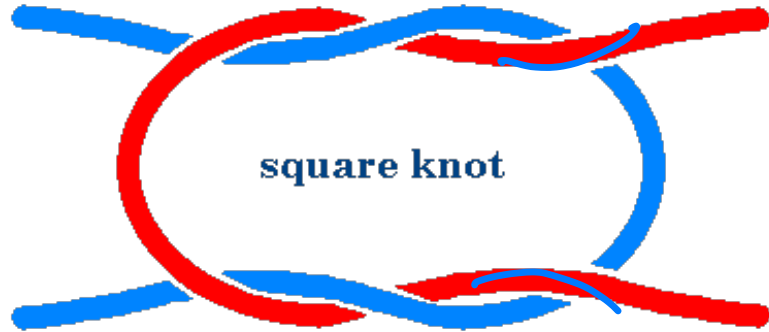
C. Surgeon's knot

D. Granny knot



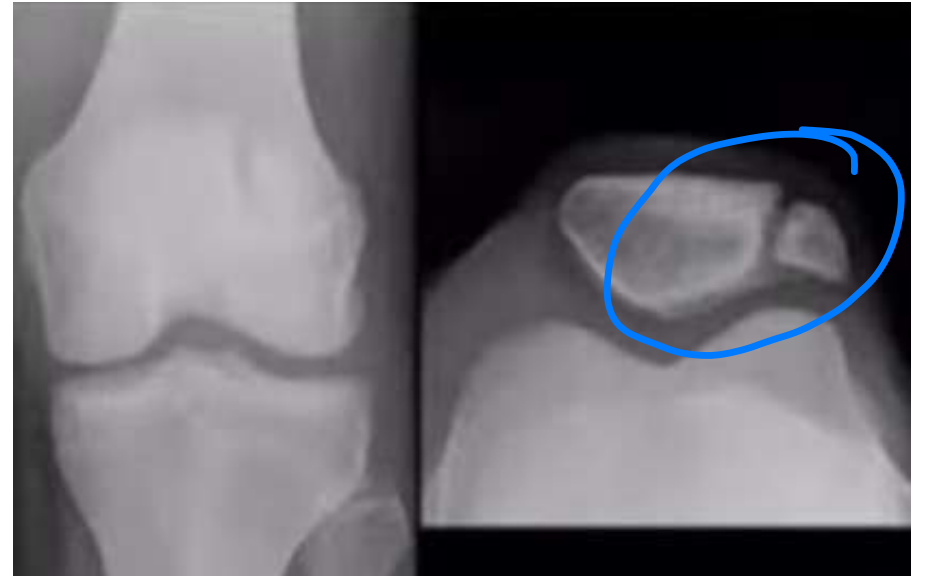


Half-hitch



21. Shown below is an X ray of a patient with history of a chronic knee pain. True statement concerning the X ray shown would be:

- A. Avulsion fracture; cylinder cast
- B. Avulsion fracture; interfragmentary nailing
- C. Avulsion fracture; wire fixation
- D. Bipartite patella; X ray other knee



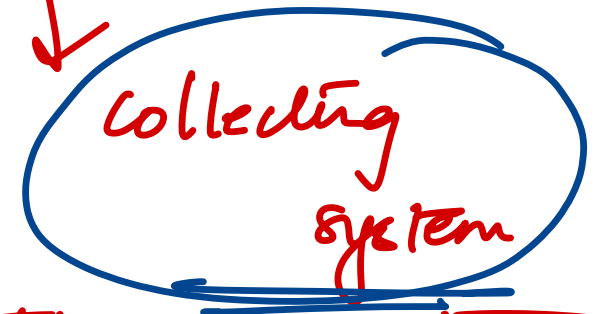
22. While performing emergency laparotomy for an unstable RTA case with blunt abdominal trauma, the surgeon notices a hematoma around the left kidney. What will be the next step in the management of this patient?

A. Single-shot intravenous pyelography

B. Contrast-enhanced computed tomography → stable

C. eFAST ~~xx~~

D. Direct renal exploration



ju contrast → 10-15 min
xray



- Sx

renal trauma

Stable → IOC: CECT

Unstable (OT) :

Single shot IVP

23. A 64-year-old man with a history of coronary artery disease and peripheral vascular disease undergoes coronary artery bypass surgery. His postoperative course is complicated by hypotension, which is treated successfully with intravenous fluids; however, a few hours later, he experiences severe abdominal pain followed by bloody diarrhea. Abdominal examination shows normal bowel sounds, with no significant guarding or focal tenderness. The venous lactic acid level is elevated. An abdominal CT scan is ordered. Which of the following areas will most likely show abnormal findings?

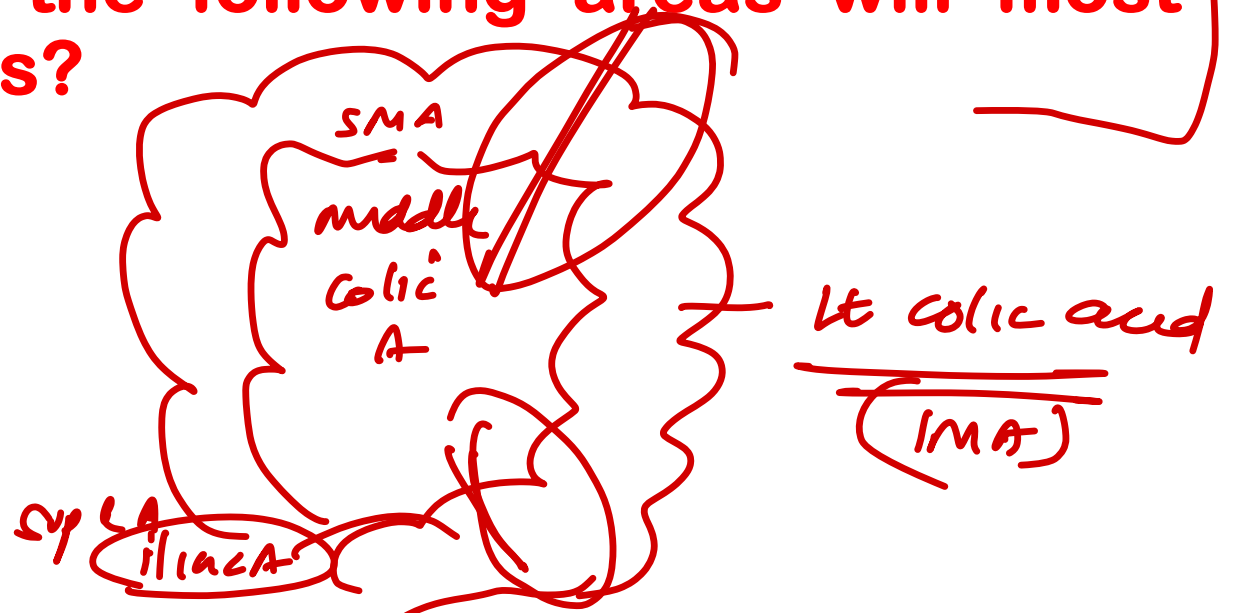
A. Ascending colon X

B. Hepatic flexure X

C. Jejunum X

D. Splenic flexure

Griffith pt



24. A 35-year-old female, known case of depression, presents to you with colicky pain abdomen. Lab evaluation reveals raised PTH, high calcium and low phosphate. What is the best test for localization of abnormality?

A. USG neck

B. CECT neck

C. Tc99 Sestamibi

D. Sestamibi SPECT

1° PTH

SPECT

> Tc 99m

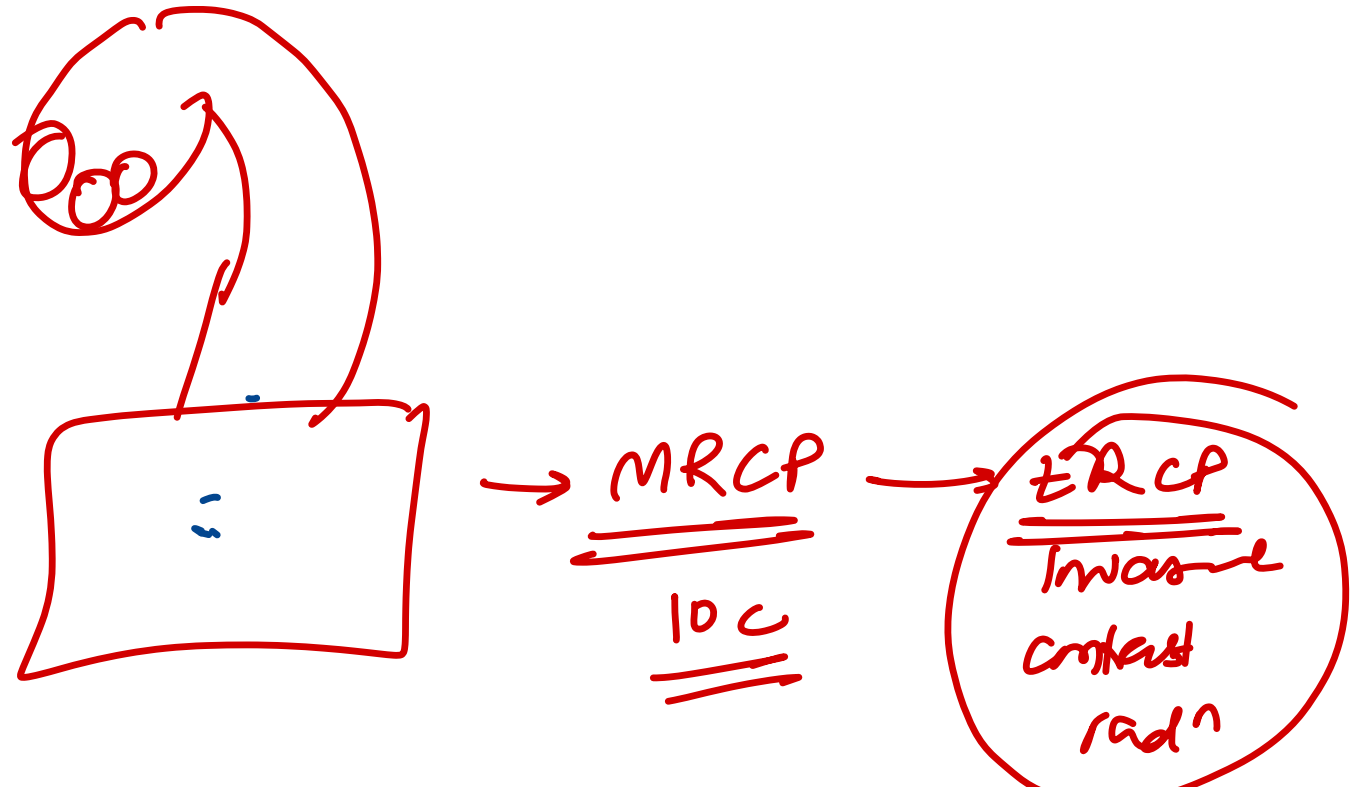
25. 40 year old female presents with jaundice and pain abdomen. LFT reveals raised bilirubin and GGT. USG reveals scleroatrophic GB with impacted calculi in GB with dilated CDB. What is the next step of management?

A. Cholecystectomy

B. ERCP ~~x~~

C. PET scan ~~x~~

D. MRCP



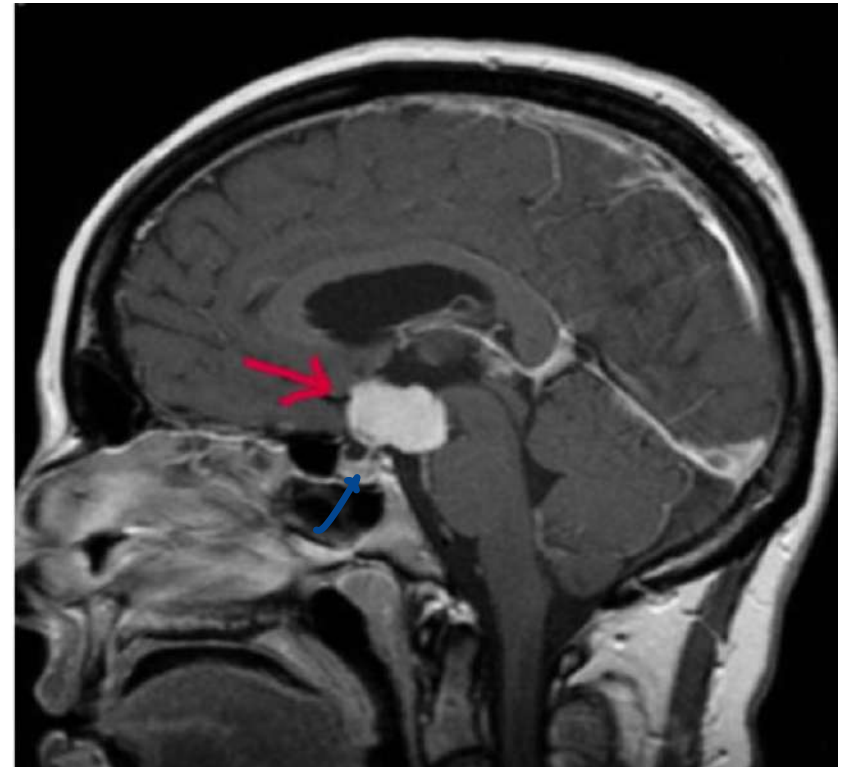
26. A 10-year-old child presents to the emergency with sudden onset of vision loss in the bilateral temporal fields. What is the probable diagnosis based on the given below?

A. Pituitary adenoma^x

B. Craniopharyngioma

C. Rathke cleft cyst^x

D. Pituitary apoplexy



27. 27-year-old primigravida at 8 weeks gestation is found to have a thyroid nodule during her initial prenatal visit. She has fatigue and frequent nausea with vomiting. Serum TSH is normal. Ultrasound of her thyroid reveals a 1.5-cm hypoechoic nodule in her right thyroid lobe with irregular margins, internal microcalcifications, and internal vascularity. Which of the following is the next most appropriate step in management of this patient?

A. Fine-needle aspiration biopsy

FNAC

B. MRI of the neck ✗

C. Radionuclide scan ✗

D. Reassurance and follow-up after delivery ✗



FNAC

x Bx

TRADS



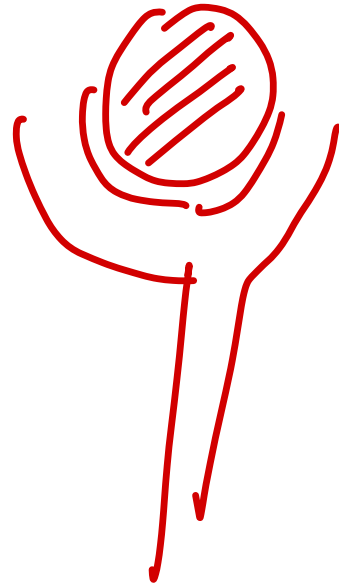
28. A 35-year-old trumpet blower presents with a neck swelling. What is the likely diagnosis?

A. Laryngocele

B. Thyroglossal cyst ✗

C. Brachial cleft cyst ✗

D. Carotid body tumor ✗



29. A 22-year-old woman comes to the OPD for evaluation of new-onset foot pain. The pain is located at the heel and is most pronounced when she gets up from sitting after a long period of time. The patient is a soccer player. In addition, she enjoys running. Physical examination of the foot shows a moderately high arch with no discoloration or deformity. Direct pressure to the bottom of the heel elicits sharp pain, but mediolateral squeezing of the heel causes no discomfort. Which of the following is the most likely etiology of the patient's foot pain?

- A. Entrapment of the posterior tibial nerve
- B. Increased foot compartment pressures
- C. Stress fracture → pain throughout
- D. Inflammation of the plantar aponeurosis

Mulder sign

Morton Neuroma

30. 22-year-old soccer player comes to the emergency department for evaluation of a knee injury. During practice earlier that day, the patient felt her knee buckle when planting her right foot to kick the ball. Other players on the field recalled hearing an audible pop as she fell to the ground. On physical examination, the right knee is grossly swollen with limited range of motion due to pain. She is guarding on examination and has increased anterior translation of the tibia on the femur as compared to the contralateral side. Which of the following is the most likely diagnosis in this patient?

A. Anterior cruciate ligament injury

B. Posterior cruciate ligament injury

C. Meniscal injury

D. Medial collateral ligament injury

Imimed hemarthrosis

31. 6-year-old boy is brought to the OPD for evaluation of back pain. The pain has been constant for the last 2 weeks and keeps the patient from playing with his friends. He wakes up several times nightly to void and has had episodes of incontinence as the leg pain prevents him from walking to the bathroom. Which of the following is the most likely diagnosis in this patient?

A. Langerhans cell histiocytosis

B. Ewing sarcoma

C. Mazabraud syndrome

D. McCune Albright syndrome

FD + myxomas

FD + precocious puberty

post pit

LCH

Hand Shaker

Christian

DI

calvarial lesions exophthalmos



32. All of the following could be the cause of the following X-ray finding except:

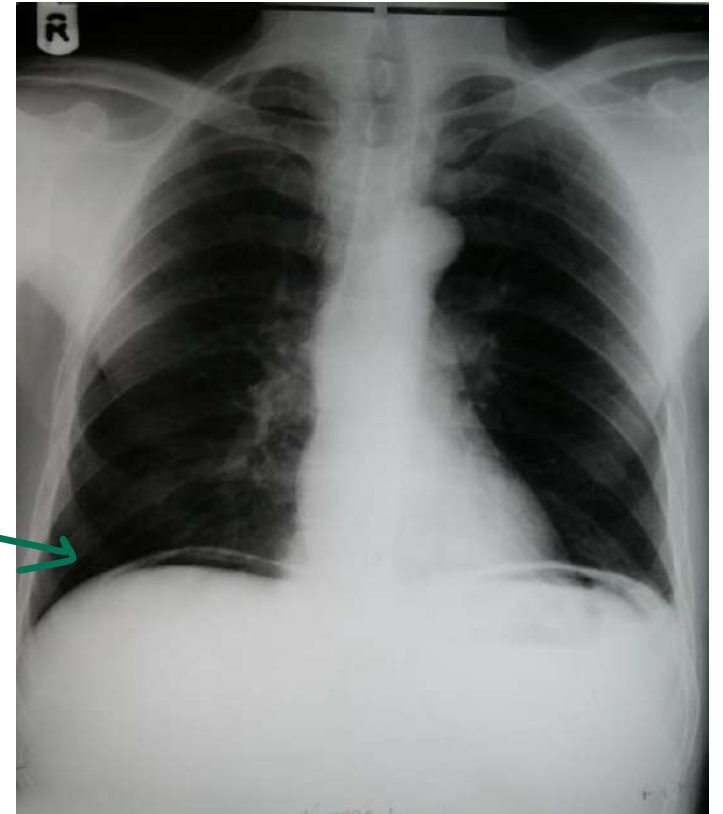
A. Duodenal ulcer perforation

B. Post laparoscopy

C. Chilaiditi syndrome

D. Acute intestinal obstruction

perforate





33. 29-year-old man comes to the emergency department with persistent vomiting and abdominal pain for the last 24 hours. The pain is crampy, diffuse, and getting worse. He had a normal bowel movement 3 days ago and has no diarrhea. His abdomen is distended with hyperactive bowel sounds. Percussion reveals tympany, and the patient is diffusely tender to palpation. There is no rebound tenderness or guarding. X-ray is shown below. Which of the following historical findings would most likely be seen in this patient?

A. Appendectomy 6 months ago

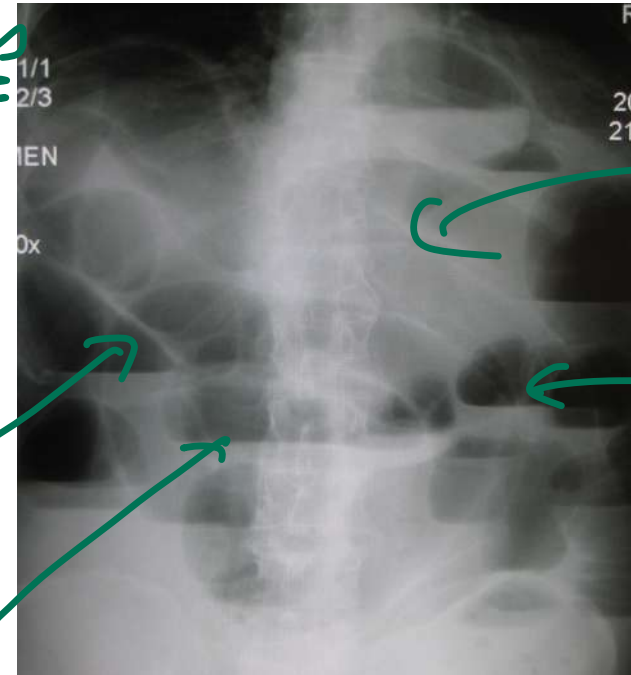
B. Fatty food intolerance

C. High alcohol consumption

D. Occasional black or tarry stool

mech: adhesions

SBO



34. A 3-month-old baby presents to you with jaundice. USG of the liver shows the following abnormality. What is the best investigation to confirm the diagnosis?

A. Tc99m sulfur colloid scan

B. Intra-operative cholangiography

C. MIBG

D. MRCP



Triangular cord sign

IOG
ERBA
HIDA → rule out
Caroli disease

35. On performing a doppler examination you would observe a monophasic flow in all of the following vessels, except:

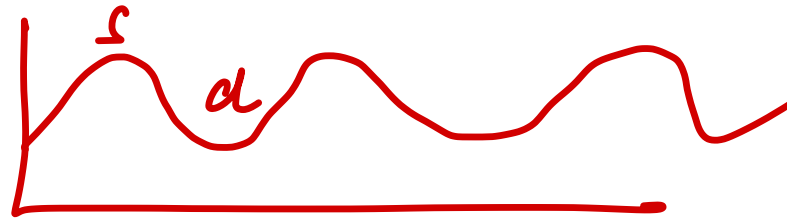
~~A. Femoral artery~~

-triphasic

B. Carotid artery

C. Umbilical artery

D. Femoral veins



↳ monophasic pulsatile

36. 13-year-old boy is seen in the OPD for persistent right knee pain. Height is at the 75th percentile, and weight is at the 95th percentile. The patient walks with a limp with the right foot pointed laterally. There is no tenderness, erythema, or swelling around the right knee. The anterior and posterior drawer tests are normal. Range of motion of the right hip is limited, and the knee points laterally upon passive hip flexion. Which of the following is the most likely diagnosis in this patient?

A. ACL tear ✗

B. Osgood-Schlatter disease ✗

C. Osteoid osteoma of the proximal femur ✗

D. Slipped capital femoral epiphysis

adolescent obese



SCFE

37. 18-year-old football player is brought to the emergency department due to persistent pain following a hard tackle. The patient had just caught a pass when he was tackled from the front, with the opponent landing all his weight on the patient's abdomen. Immediately afterward, he began to experience abdominal discomfort and nausea. Blood pressure is 92/64 mm Hg, pulse is 118/min, and respirations are 24/min. The abdomen is mildly distended and tender to palpation diffusely. Chest x-ray and pelvic x-ray are normal. eFAST is shown below. Further evaluation of this patient is most likely to reveal which of the following?

A. Abdominal aortic tear

RP bleed

B. Pancreatic transection *XX*

C. Diaphragmatic tear *XX*

D. Splenic laceration



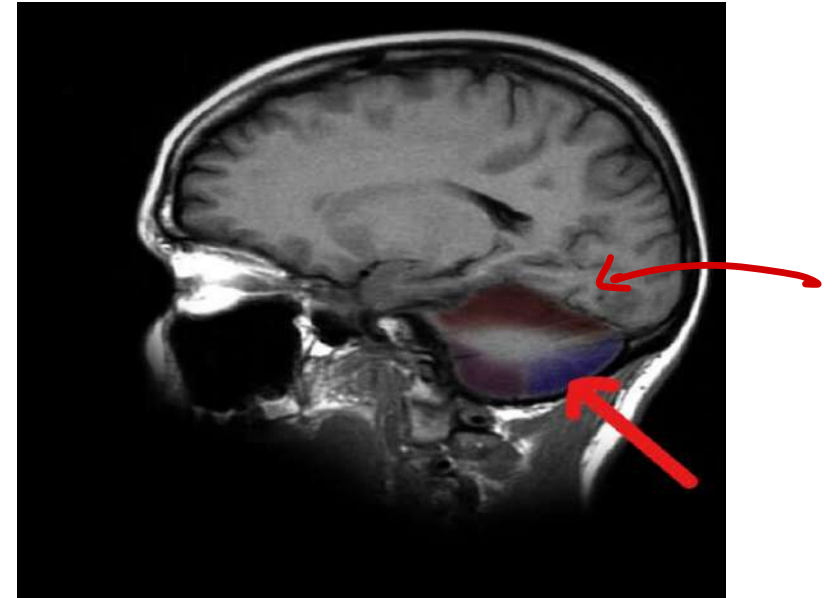
38. Identify the labelled structure?

A. Occipital lobe

B. Pons

C. Cerebellum

D. Lentiform nucleus



39. A 5-year-old child presents with short stature. Xray reveals normal bone mineral density, and is given below. Identify the diagnosis:

A. Rickets

B. Scurvy

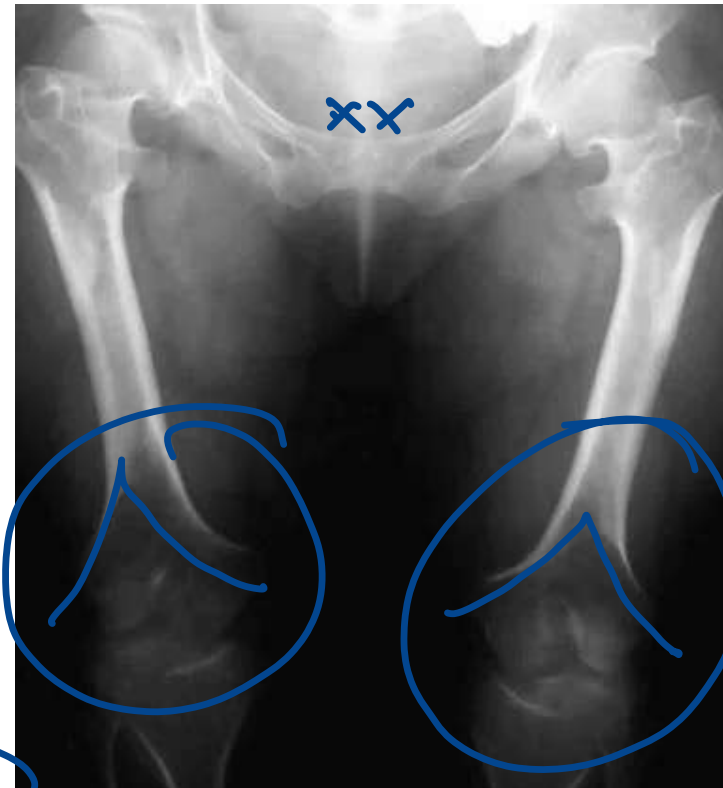
C. Osteopetrosis

D. Achondroplasia

vit b
Ca²⁺
collagen ↓
osteoid matrix (↓)
↑ bone density

Cherron sign

Irreg metaph



40. A neonate with antenatal detected hydronephrosis presents to you for USG. This is the image that is seen now. What will you do next?

A. DMSA scan

- static - scan

B. DTPA scan

10c

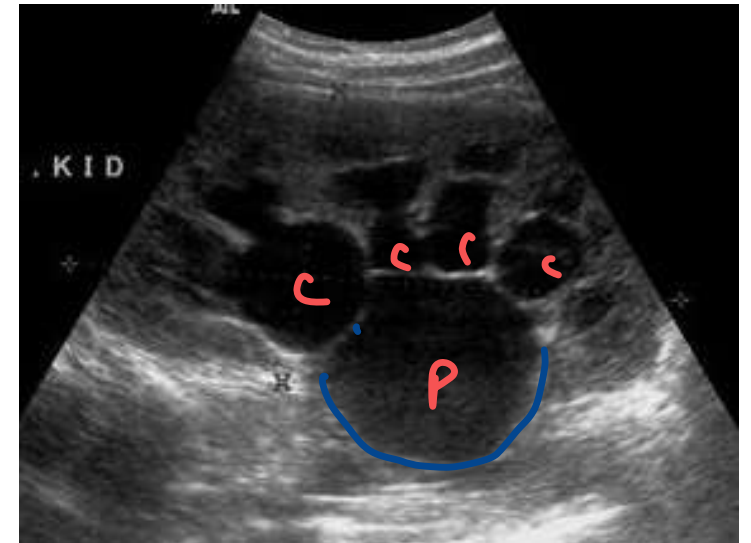
partial (vs) complete

C. IVP

D. Captopril DTPA scan

ACE (-)

→ Renal artery stenosis



Obstruction

PVJD

41. Which of the following is false regarding imaging in the primary survey of a trauma patient?

A. Hemodynamically unstable patient should not be sent for CT scan (F)

B. All patients should have chest X-ray PA view

AP view



C. X-ray of the pelvis, chest and eFAST is an adjunct in primary survey

D. X-rays in primary survey may also be done in pregnant women

42. A 52-year-old female patient present with 4 cm diameter diagnosed breast cancer lesion with ipsilateral axillary and contralateral supraclavicular lymphadenopathy as shown below. As per AJCC system, patient belongs to which stage of breast cancer?

A. T4a N3c M1

~~B. T4b N1 M1~~

C. T4b N3c M0

D. T4c N1 M0

M1



43. A 20-year-old man was stabbed in the chest during a street fight. Blood pressure is 90/58 mm Hg, pulse is 124/min, and respirations are 30/min. The patient is in severe respiratory distress. Breath sounds are present on the left and absent on the right. Heart sounds are normal. The neck veins are distended. The patient becomes obtunded during examination. Which of the following is the best next step in management?

A. Emergency thoracotomy *xx*

B. Endotracheal intubation *xx*

C. Needle thoracostomy

D. Pericardiocentesis *xx*

*tension
Rt pneumothorax*

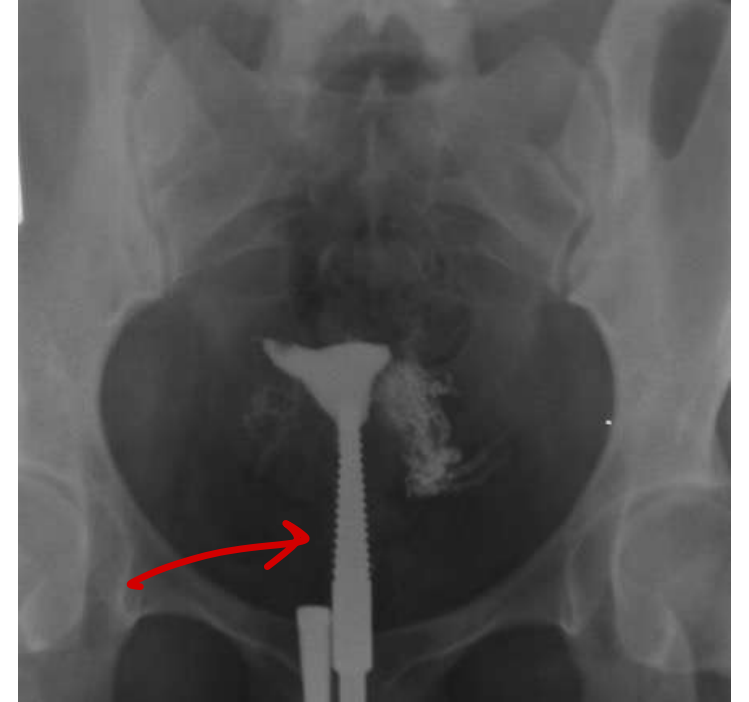
44. Identify the investigation:

~~A. Hysterosalpingography~~

B. Laparoscopy X

C. Hysteroscopy X

D. Saline infusion hysterography X



45. 25-year-old man comes to the OPD with pain over the intergluteal region. The pain has been present for several weeks and makes him uncomfortable when he sits at his desk at work. He has also noticed intermittent swelling with **mucoïd discharge**, which recently became blood-tinged. The patient has no fever or chills. **Bowel movements are regular** and he has no urinary symptoms. Examination shows a **tender mass near the tip of the coccyx** that drains **mucoïd fluid with pressure**. Which of the following is the most likely diagnosis?

A. Folliculitis

B. Hidradenitis suppurativa XX

C. Perianal Crohn disease

D. Pilonidal disease

46. A 2-month-old infant is brought to the OPD with a parietal swelling present since birth. An X-ray was ordered and is shown below. What is the likely diagnosis?

~~A. Cephalhematoma~~

B. Subgaleal hematoma ~~xx~~

C. Encephalocele ~~xx~~

D. Caput Succedaneum ~~xx~~

fluid



47. 23-year-old college student is brought to the emergency department by his friends due to severe retrosternal and upper abdominal pain. The patient was out with his friends drinking alcohol and celebrating the end of final exam week. An hour before arrival, he had several episodes of emesis, which is when he began experiencing the pain. Temperature is 38.3 C (101 F), blood pressure is 95/56 mm Hg, pulse is 120/min, and respirations are 30/min. Cervical lymph nodes are not enlarged, but there is palpable crepitus in the suprasternal notch. Which of the following is the most likely cause of this patient's current condition?

A. Alcohol-induced pancreatitis

B. Aspiration pneumonitis ~~xx~~

C. Esophageal perforation

D. Mallory-Weiss syndrome

hematemesis
mucosal ulcer?

48. A patient was found to have a mass arising from the antrum of the stomach which involves the head of the pancreas and metastasis to the right lobe of the liver. How will you manage this patient?

unresectable

~~A. Palliative gastrojejunostomy~~ followed by chemotherapy

B. Radical gastrectomy ~~xx~~

C. Whipple's procedure ~~Ca pancreas~~

D. Gastrectomy with right hepatectomy

50. A patient was brought to the ER following a road traffic accident. On examination, the patient opens his eyes to a painful stimulus, speaks in inappropriate words, and withdraws his limbs to a painful stimulus. What is his GCS score?

A. 8

~~B. 9~~

C. 10

D. 7

$$\begin{array}{c} \underline{E} \\ 4 \\ 3 \\ \textcircled{2} \\ 1 \end{array} + \begin{array}{c} \underline{V} \\ 5 \\ 4 \\ \textcircled{3} \\ 2 \\ 1 \end{array} + \begin{array}{c} \underline{M} \\ 6 \\ 5 \\ \textcircled{4} \\ 3 \\ 2 \\ 1 \end{array}$$

51. Fracture at which site in leg will cause failure of dorsiflexion of foot?

A. Lateral malleolus

B. Proximal tibia

C. Proximal fibular neck

D. Tibial shaft

steppage gait



52. 75-year-old woman comes to the emergency department due to fever, chills, abdominal pain, nausea, and vomiting for the past 2 days. Medical issues include type 2 diabetes melitus, hypertension, obstructive sleep apnea, and coronary artery disease. There is marked tenderness over the epigastrium and right upper quadrant with guarding. Bowel sounds are decreased. CECT abdomen is shown below. Which of the following additional intervention is most appropriate in the management of this patient?

- A. Delayed cholecystectomy prior to the hospital discharge
- B. Elective cholecystectomy 2 weeks after complete recovery
- C. Urgent cholecystectomy
- D. Percutaneous Cholecystostomy



Acute cholecystitis
+
multiorgan failure
Tokyo

53. What is the likely diagnosis?

A. ABC ~~x~~

B. Osteosarcoma ~~x~~

C. Chondroblastoma ~~x~~

~~D. GCT~~



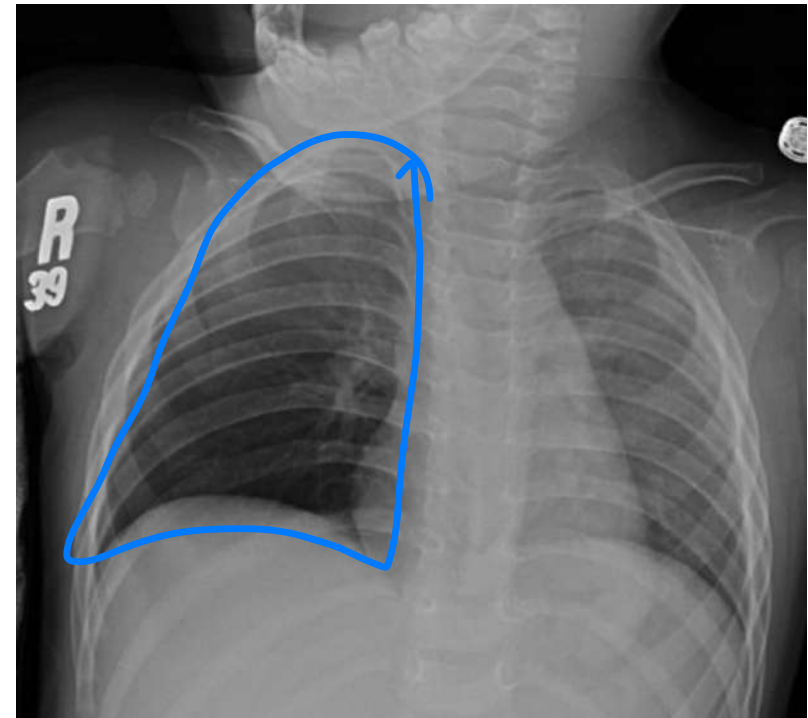
54. 8-month-old boy is brought to the emergency department due to respiratory distress. Severe cough and wheezing began an hour ago while the patient was playing at his cousin's house. Chest radiograph is shown in the image below: Which of the following is the most likely cause of this patient's symptoms?

A. Anaphylaxis

B. Asthma

C. Bronchiolitis

~~D. Foreign body aspiration~~



55. Radiologically, pulmonary plethora is indicated by all of the following except:



A. Descending pulmonary artery diameter >16 mm

B. Kerley B lines

p. edema



C. Diameter of peripheral arteries > accompanying bronchiole

D. More than 6 blood vessels in outer 1/3rd

56. Identify the true statement:

A. IOC for knee ligaments is NCCT MRI

B. Gold standard for meniscal injury is ~~MRI~~ arthroscopy.

C. Bone marrow edema is best seen on ~~FLAIR~~ sequence

~~D. MRI is the IOC for spinal cord injury~~

STIR

57. Identify the instrument shown in the image below:

A. Allis Forceps

B. Sponge holder

C. Babcock forceps

D. Doyen Retractor



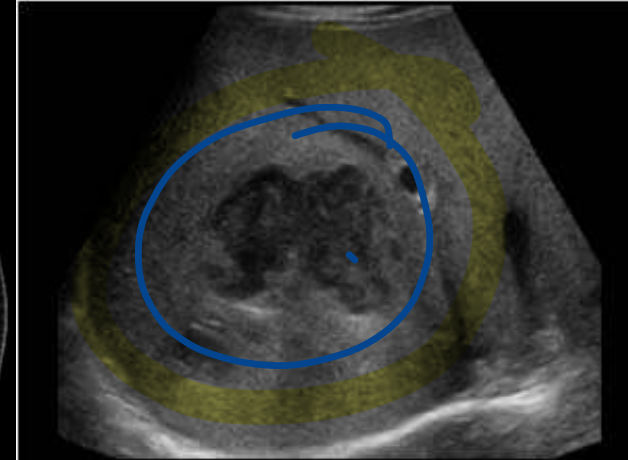
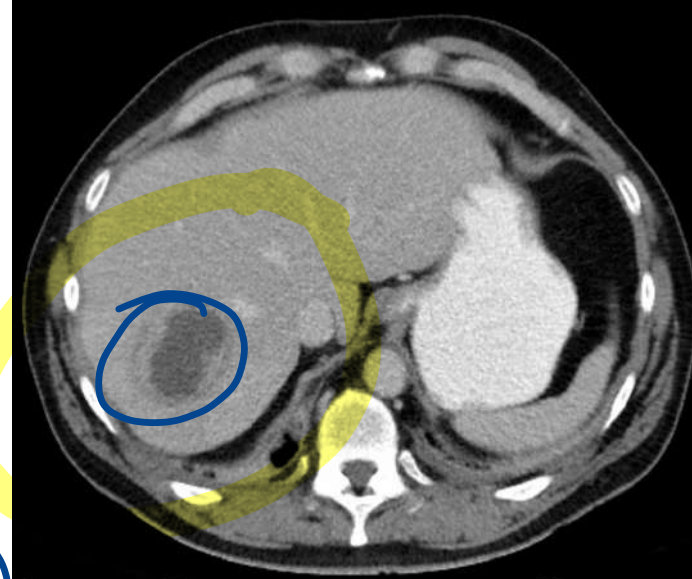
58. 36-year-old man comes to the emergency department due to a week of progressive right upper quadrant abdominal pain, malaise, anorexia, and fever. Three months ago, he returned from a vacation in Nepal, where he hiked in the mountains. During his trip, the patient had several self-resolving episodes of diarrhea. He also had unprotected sexual intercourse with a woman he met during the trip. The patient drinks 1 or 2 cans of beer daily but stopped after his recent symptoms began. CECT and USG abdomen is shown below. Which of the following is the most likely cause of this patient's condition?

A. Alcohol-induced liver inflammation ^{XX}

B. Gonococcal perihepatitis X *violin string*

~~C. Protozoal infection~~

D. Tapeworm infection - *Hydatid*



(23)

abscess liver

59. A 3-day postpartum mother comes in the hospital with history of pain, red, fluctuant, 2 cm mass in the breast. USG shows fluid collection. What will you do in the management of this patient?

A. Antibiotics and follow-up after 3 days

mastitis

~~B. Incision and Drainage~~

~~C. Hot fomentation~~

~~D. Empty the breasts every 3 hours~~

breast abscess



60. What should be the treatment for the pathology as shown in the given image?

A. Incision and drainage ~~xx~~

B. Sclerotherapy ~~xx~~

C. Radiotherapy ~~xx~~

D. Excision



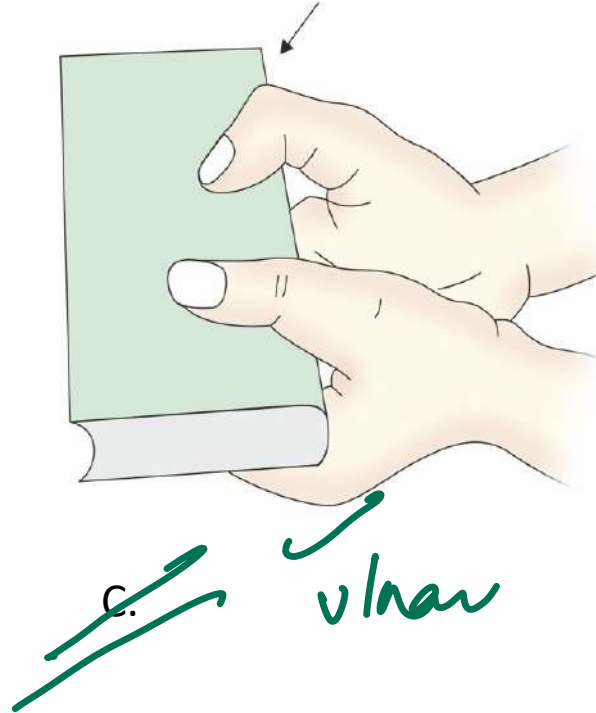
61. All of the following are signs for median nerve injury except:



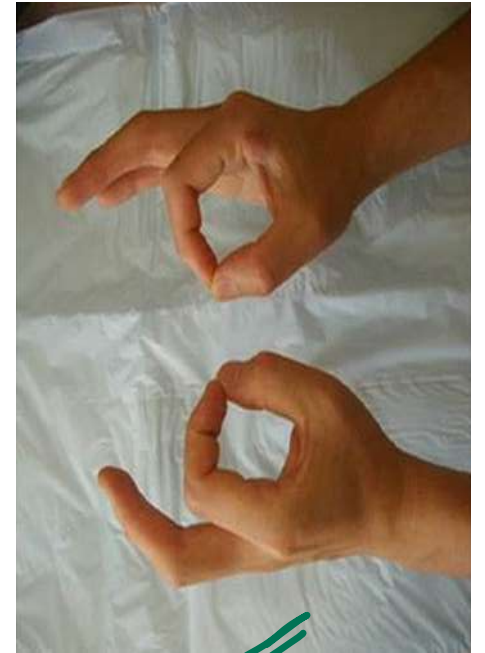
A.



B.



C.



D.

62. Patient with history of tachyarrhythmias is on implantable cardioverter defibrillator. He develops shock. Best method to know the position and integrity of ICD is:

A. CECT ✗

B. MRI ✗

C. USG ✗

D. Plain radiograph

63. A 54-year-old woman comes to the ED due to left wrist pain 3 days after a fall where she landed forcefully on her left palm. Physical examination shows left wrist tenderness with maximal tenderness at the dorsoradial wrist lateral to the tendon of the extensor pollicis longus. Xray is shown below. This patient should be monitored closely during treatment due to which of the following potential complications?

A. Malunion ~~X~~ Nonunion

B. Fat embolism ~~X~~ — long bones ~~MISC~~

C. Nerve injury ~~X~~

~~D. Osteonecrosis~~ AN

FLUTS



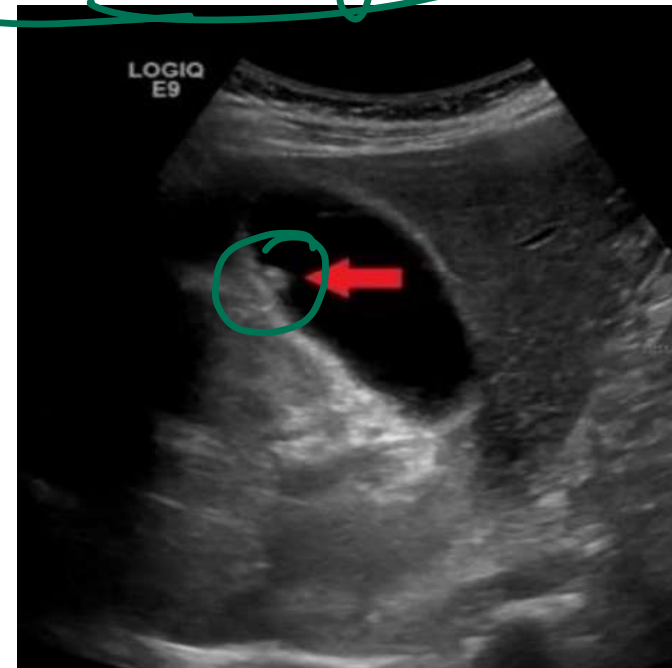
64. A lady was incidentally diagnosed with a 0.5 cm solid mass in her gall Bladder on USG as shown. What is the next step in the management?

A. Reassure the patient and follow up

B. Laparoscopic Cholecystectomy \rightarrow
 $>1\text{cm}$

C. Open Cholecystectomy

D. CECT Abdomen



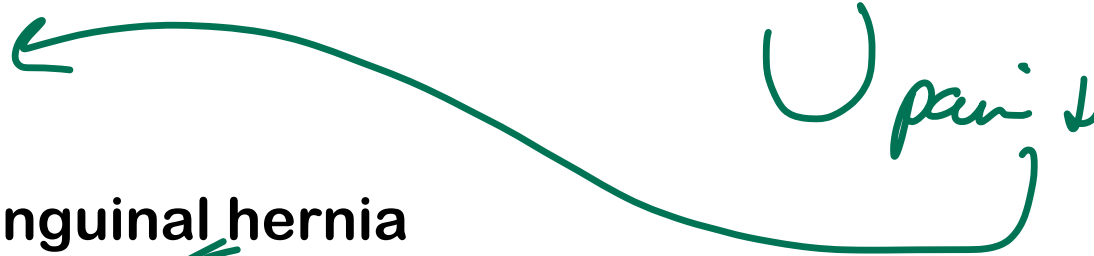
65. 16-year-old boy is brought to the emergency department with abdominal pain. The patient has had similar episodes over the past 3 weeks following cricket matches, but these episodes resolved shortly afterward with rest. The abdomen is soft, nontender, and nondistended. There is scrotal erythema and edema; the right hemiscrotum is tender to palpation. The pain is worsened when the scrotum is elevated, and the scrotum does not transilluminate. Which of the following is the most likely cause of this patient's symptoms?

A. Epididymitis

B. Incarcerated inguinal hernia

C. Testicular hematoma

~~D. Testicular torsion~~



66. Identify the correct statements -

1. Proper functioning of an ICD tube is checked by presence of continuous air bubbles coming out of the underwater drain ~~xx~~

~~2.~~ A green cannula is the minimum size recommended for adult trauma patients 15G

~~3.~~ 14Fr Foley catheter is used in female patients and patients who have had urethral surgery or who have strictures

4. NG tube is measured from ala of the nose to the ear lobule to the xiphisternum. tip

→ bronchopleural f }

A. 1,2,3,4

~~B. 2,3~~

C. 1,2,3

D. 2,3,4

16Fr - adult ☐

67. A newborn baby presents with continuous dribbling of saliva and choking while feeding. CXR is shown here. Identify the type of TEF:

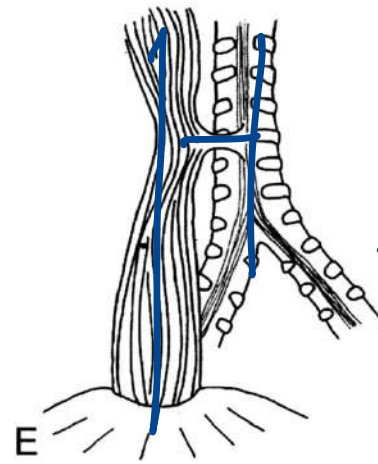
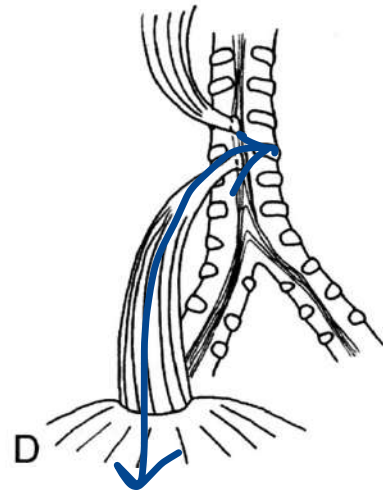
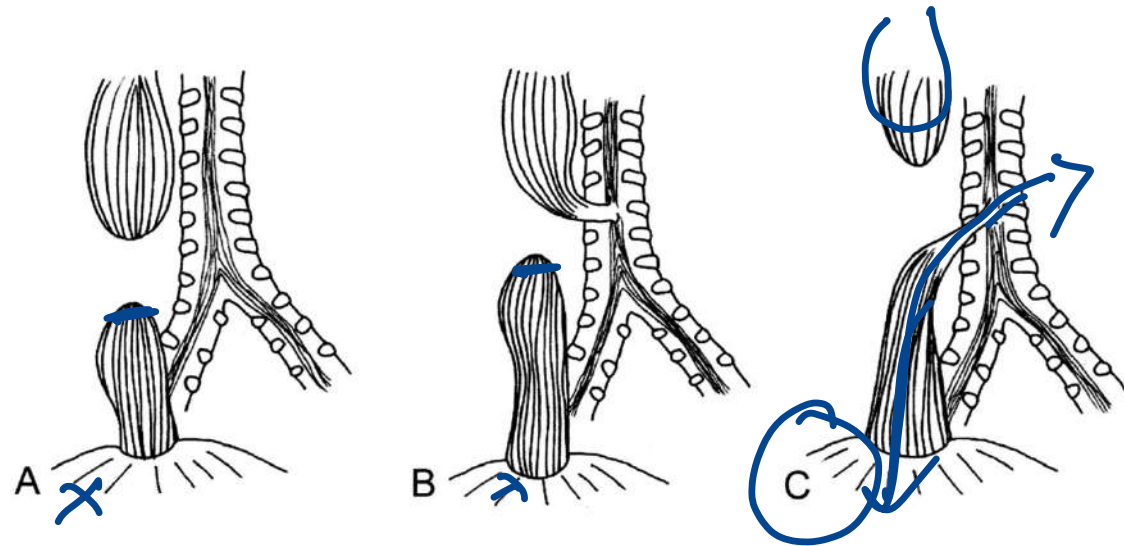
A. A

B. B

C. C

D. E

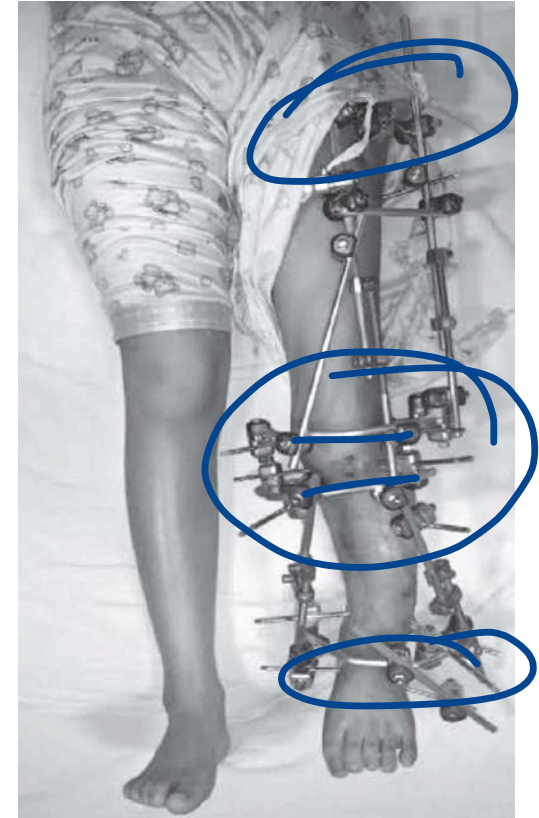




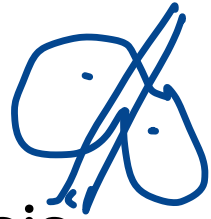
H type

68. Identify the condition and the instrument:

- A. Tibia fracture, ilizarov ~~fixator~~
- B. Femoral fracture, spanning fixator
- C. Tibia fracture, spanning fixator
- D. Periarticular fracture of knee, spanning fixator



69. A 74-year-old man presented with low back pain that was radiating to his legs. On examination of the spine, a palpable step was felt in the lumbosacral region. The CT of the spine is given below. What is the likely diagnosis?



A. Spondylosis

B. Spondylolisthesis

C. Disc prolapse X

D. Spondylitis X X



70. A 4-hour-old boy is evaluated in the nursery for routine newborn care. The patient was born at 38 weeks gestation via spontaneous vaginal delivery to an 18-year-old woman who did not receive prenatal care or take prenatal vitamins. A soft mass inferior to the umbilical stump is 1.4 cm in diameter and covered by skin. The mass increases in size when the infant cries and reduces into the abdominal cavity with gentle pressure. Which of the following is the best next step in management of this patient's mass?

- A. Abdominal ultrasound ~~xx~~
- B. Immediate surgery ~~xx~~
- C. Observation only
- D. Topical silver nitrate ~~xx~~

Reducible umb hernia



71. A 35-year-old female presents with pain abdomen on post-op day 5 following laparoscopic cholecystectomy. USG shows a collection in the RUQ. What is the next step?

A. ERCP ✗

B. MRCP ✗

C. USG guided pigtail catheter

D. Re-explore and T-tube insertion ✗

Bile leak



USG



72. Roentgen is a unit of:

A. Radioactivity ✘

B. Absorbed dose ✘

~~C. Radiation exposure~~

D. Equivalent dose ✘

Radiation Units

Entity	SI Unit	Conventional Unit
<u>Radioactivity</u>	Becquerel	Curie ($1\text{Ci} = 3.7 \times 10^{10} \text{Bq}$)
<u>Exposure</u>	C/kg	<u>Roentgen</u> ($1\text{R} = 2.5 \times 10^{-4} \text{C/kg}$)
Absorbed dose	Gray ($1\text{Gy} = 100\text{Rad}$)	Rad
Air Kerma		
<u>ABG RAD</u>		
Equivalent dose	<u>Sievert</u> ($1\text{Sv} = 100\text{Rem}$)	<u>Rem</u>
Effective dose	<u>Sievert</u>	<u>Rem</u>

73. 65-year-old man comes to the office due to a several month history of difficulty swallowing and frequent coughing during meals. His wife reports that his breath odor has changed and his voice sounds 'gurgly.'" Barium swallow is shown below. Which of the following mechanisms leads to the development of this patient's condition?

A. Abnormal cellular proliferation

B. Acid reflux

C. TB

D. Motor dysfunction



74. A 45-year-old man comes to the emergency department due to left wrist pain after a fall. The patient was walking in his house when he tripped over a rug and landed on his outstretched hand. Medical history is notable for celiac disease, hypertension, and hypothyroidism for which he takes appropriate daily medications. X-ray of the left wrist is shown below. Which of the following is the most significant risk factor for bone fracture in this patient?

A. Age ^x

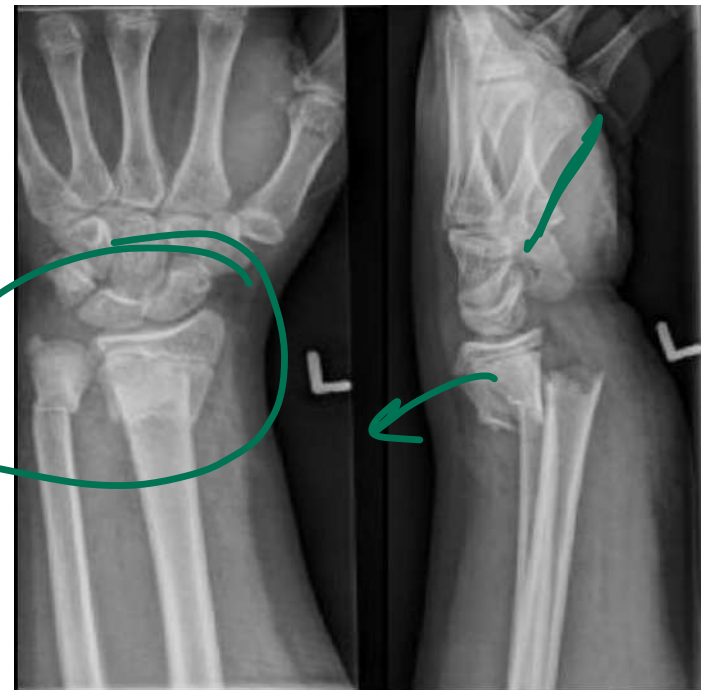
B. Celiac disease

C. Hypertension ^x

D. Hypothyroidism ^x

osteopenia

Hyperthyroidism



75. A 45-year-old male patient presents to their primary care physician with a complaint of dysphagia. He reports that he experiences a sensation of food getting stuck in his throat when he eats. He also reports some mild chest discomfort with exertion. The patient has a history of Down syndrome and congenital heart disease. Barium swallow is shown here. Which imaging modality should be performed next?

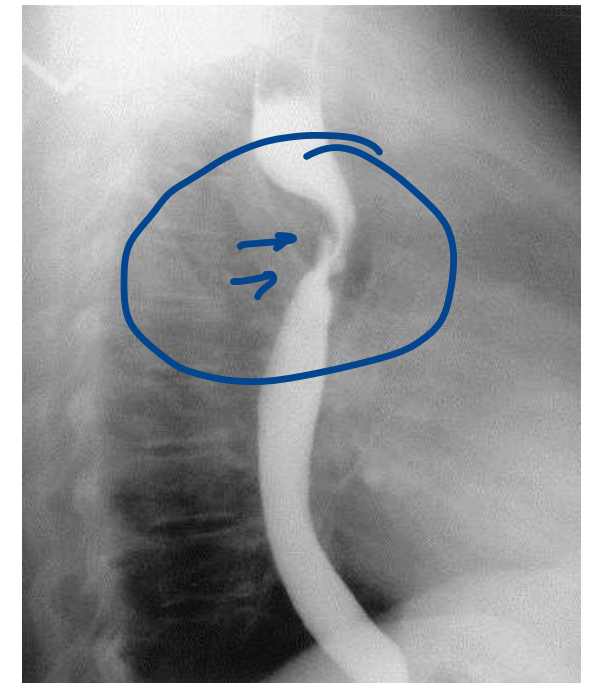
A. Chest X-ray

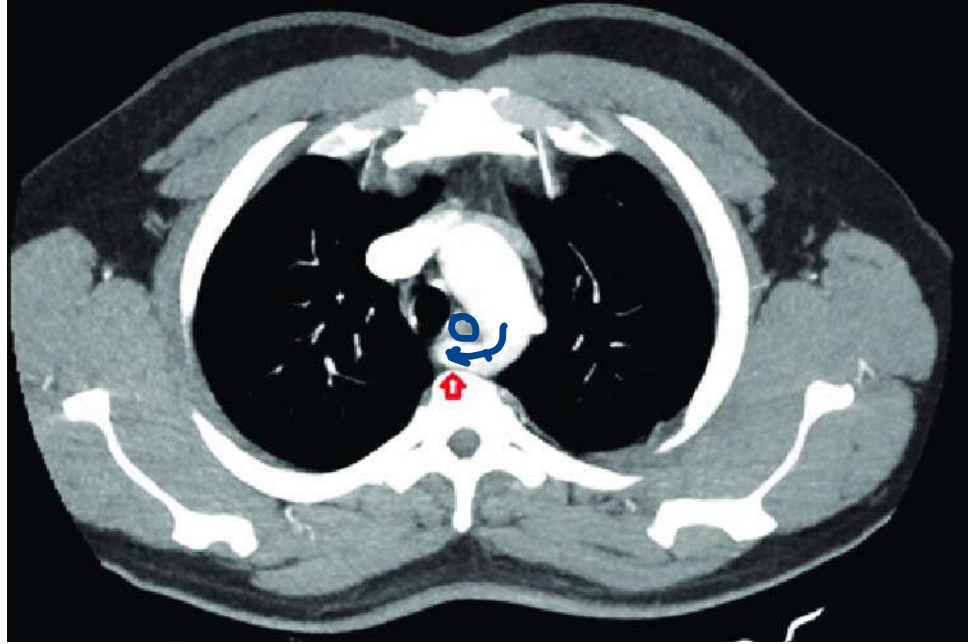
B. Manometry

C. UGIE

D. Computed tomography angiography

Dysphagia lesions





76. In which of the given cases is this procedure usually performed?

A. ~~MRM~~ in node negative patients

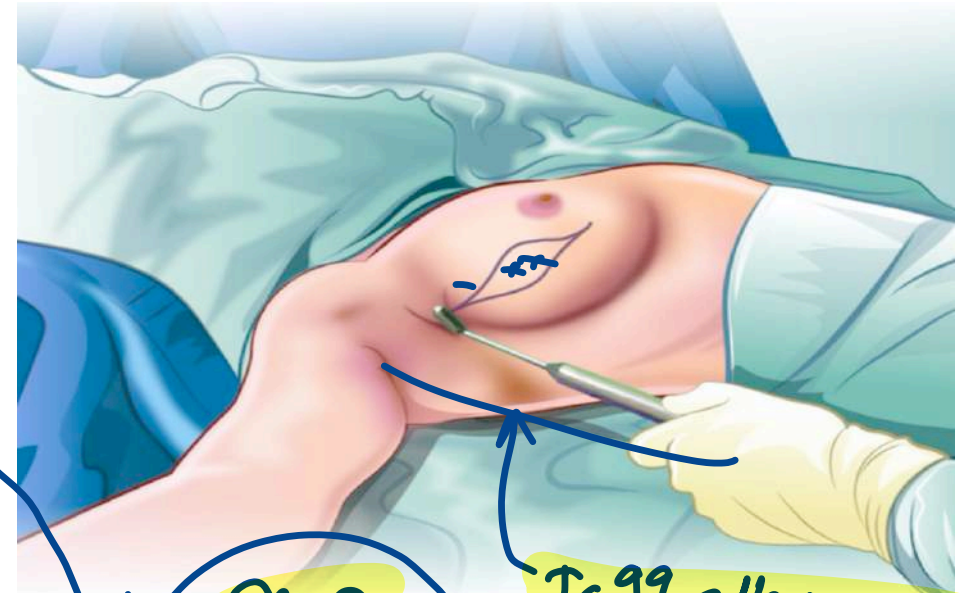
ALND

B. ~~MRM~~ in node positive patients

C. BCT in node negative patients

D. BCT in node positive patients

ALND



SLB

Tc 99 albumin

Gamma probe

77. 55-year-old hypertensive male with acute chest pain, loss of consciousness, diaphoresis with unequal pulses in bilateral upper limbs. What is the best investigation in the emergency setting to reach the diagnosis?

A. TEE

AD - unstable

B. MRI

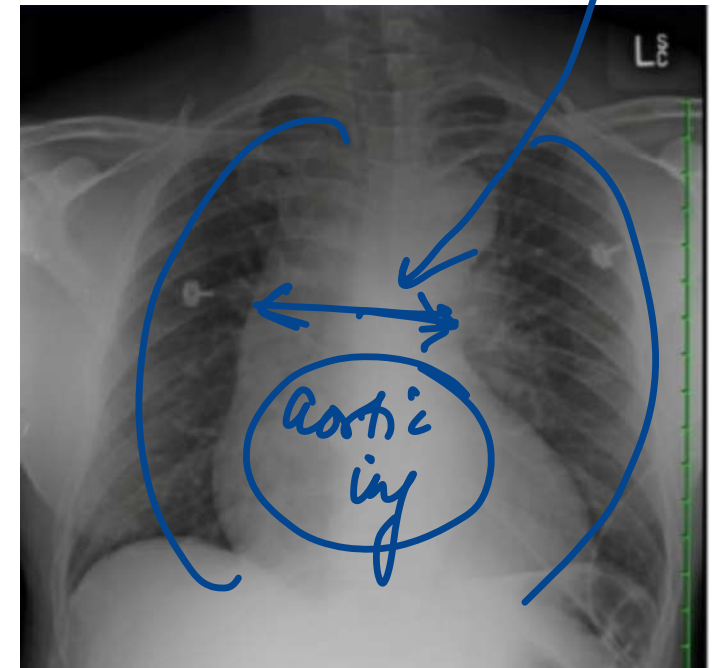
stable ETT

C. Cardiac enzymes

D. Xray

78. 78-year-old man is brought to the emergency department due to an episode of syncope while working in his garden. He has chest and neck pain that developed just prior to the syncopal episode. Temperature is 37.3 C (99.2 F), blood pressure is 144/92 mm Hg on the right arm and 142/90 mm Hg on the left arm, and pulse is 109/min. ECG shows sinus tachycardia, voltage criteria for left ventricular hypertrophy, and no ST-segment or T-wave changes. Chest x-ray is shown. A bedside transthoracic echocardiogram shows a small pericardial effusion. Which of the following is the best next step in management of this patient?

- A. Antibiotics, fluid resuscitation, and admission to intensive care unit ~~XX~~
- B. Beta blockers, anticoagulation, and admission to intensive care unit ~~XX~~
- C. CT angiography ~~XX~~
- D. Immediate emergency pericardiocentesis ~~XX~~



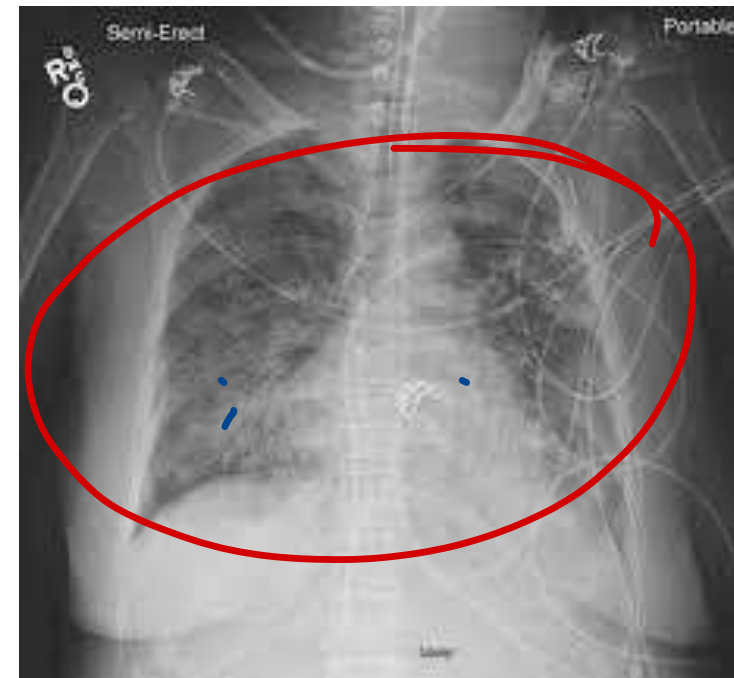
79. A 66-year-old woman with warfarin induced bleeding receives IV vitamin K, 4 U PRBCs and 4U FFP. 4h later, she begins to complain of shortness of breath. Vitals T - 39°C, RR 35/min, SpO2 84% on RA, and BP 88/52 mm Hg. Exam revealed B/L crackles and the patient was intubated for respiratory failure. CXR is as shown in the picture. What is the likely diagnosis?

A. Anaphylaxis

B. TACO → (x) crackles ↑JVP

~~C. TRALI~~

D. Aspiration



80. All are true about the muscle whose function is tested in the below shown test except:

A. Inserts into the lesser tubercle of the humerus

B. Primary function is external rotation

X ADIR

C. Arises from the subscapularis fossa

D. Supplied by a branch of the posterior cord of the brachial plexus



81. A 35-year-old female with Raynaud's phenomenon and tightening of skin of face and extremities presents with dyspnea and bilateral basal rales. What is the next best step?

~~A. HRCT chest~~ 10C
1LD

B. 2D ECHO _x

C. PFT _x

D. MRI Chest [^]

Scleroderma

CREST



82. 61-year-old man comes to the OPD due to chronic left knee pain. The pain is worse when he first gets out of bed in the morning and is associated with mild stiffness. On examination, the left knee has a small effusion and mild pain over the medial and lateral joint lines. There is no clicking or locking of the knee, but crepitus is present with range of motion. The patient is able to bear weight without pain and the joint is stable to varus and valgus stress. X-ray of the knee is shown in the image below: Which of the following is the most appropriate initial treatment for this patient's knee pain?

- A. Methotrexate ~~X~~
- B. Corticosteroid injection of the knee ~~X~~
- C. Knee replacement surgery ~~X~~
- D. Quadriceps strengthening exercises

DA

NSAID



83. All of the following is true about brachytherapy except:

A. More effective in carcinoma cervix ✓✓

~~B. Better than teletherapy for Large & Bulky tumor~~

C. Deliver higher dose of radiation to tumor ✓✓

D. Less damage to normal tissue ✓✓



84. 40-year-old man is brought to the emergency department after a motor vehicle collision. Blood pressure is 130/84 mm Hg and pulse is 102/min. Abdominal palpation shows fullness and tenderness in the suprapubic region. There is no blood at the urethral meatus, and digital rectal examination reveals a normal prostate. Focused Assessment with Sonography for Trauma reveals no intraperitoneal free fluid. Pelvic x-ray reveals fracture of the left pubic ramus. A Foley catheter is placed without resistance with immediate return of bloody urine. Emergency CT scan of the abdomen and pelvis is performed. Which of the following injuries is most likely to be seen on CT scan in this patient?

~~A. Anterior bladder wall rupture~~ ^{EPBR}

B. Bladder dome rupture

C. Left ureteral injury ~~XX~~

D. Urethral rupture ~~XX~~

rs

IPBR ~~XX~~



85. A 30-year-old female came to the OPD with complaints of backache. On examination, her eyes and pinna revealed blackish discoloration. What is the likely diagnosis?

A. DISH

B. Fluorosis

C. Alkaptonuria

D. Ankylosing spondylitis



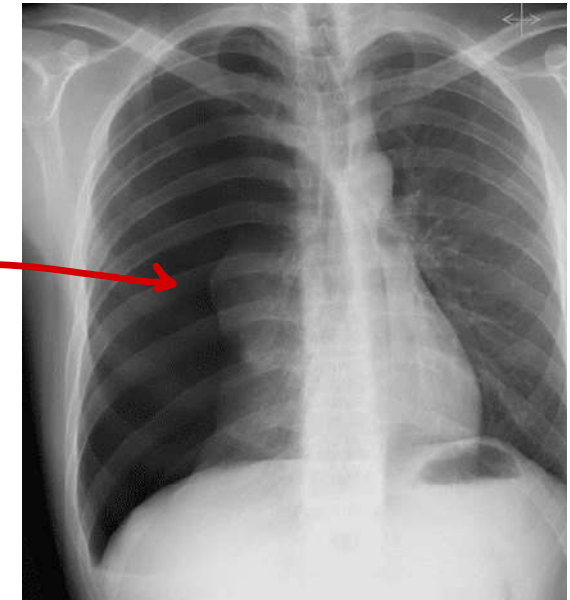
86. A 25-year-old male patient presented with sudden onset breathlessness and a sharp pain in his chest after a road traffic accident. His BP is 85/69mm Hg and HR is 110bpm. The chest X-ray is given below. What is the next step for this patient?

A. eFAST ^C

B. Insert iv cannula and start iv fluids ^C

C. Right Needle thoracostomy ABCDE

D. Left needle thoracostomy followed by ICD _{xx}



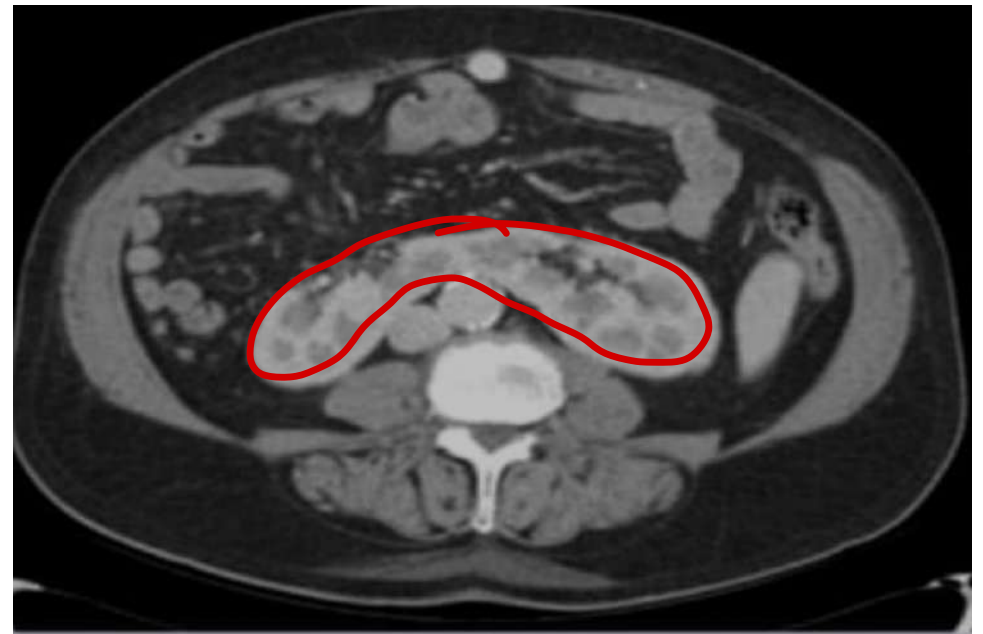
87. A 47-year-old woman comes to the office due to fever, dysuria, and abdominal pain. The patient has had several urinary tract infections since her teens but has no other medical concerns. Physical examination shows mild suprapubic discomfort. Urinalysis demonstrates pyuria and many bacteria. CT scan of the abdomen is shown in the image below. Which of the following structures has most likely limited the proper ascent of the anomalous organ seen on CT scan?

~~A. Inferior mesenteric artery~~

B. Inferior vena cava

C. Persistent urachus

D. Superior mesenteric artery



88. 26-year-old man with a history of seizure disorder and medication nonadherence is hospitalized after a generalized tonic-clonic seizure. A witness reports that the patient lost consciousness and fell to his right side; the seizure lasted about 2 minutes. Evaluation in the emergency department reveals a low serum level of his prescribed antiepileptic drug, levetiracetam, and a displaced right femur fracture. Levetiracetam is restarted and the patient undergoes intramedullary nailing of the fracture with no intraoperative complications. The next day the patient is noted to be confused. Temperature is 37.2 C (99 F), blood pressure is 142/86 mm Hg, pulse is 102/min, and respirations are 28/min. Oxygen saturation is 90% while breathing room air. On physical examination, the patient is disoriented but has no focal weakness or sensory loss. There are no skin rashes or hematoma at the surgical site. CT pulmonary angiography shows bilateral scattered ground-glass opacities but no filling defects within the pulmonary vasculature. Which of the following is the most likely cause of this patient's current condition?

- a. Aspiration pneumonitis *xx*
- b. Cardiogenic pulmonary edema *xx*
- c. Drug-induced hypersensitivity reaction *xx*
- d. Fat embolism

Long bone #

Confused
Dyspnea

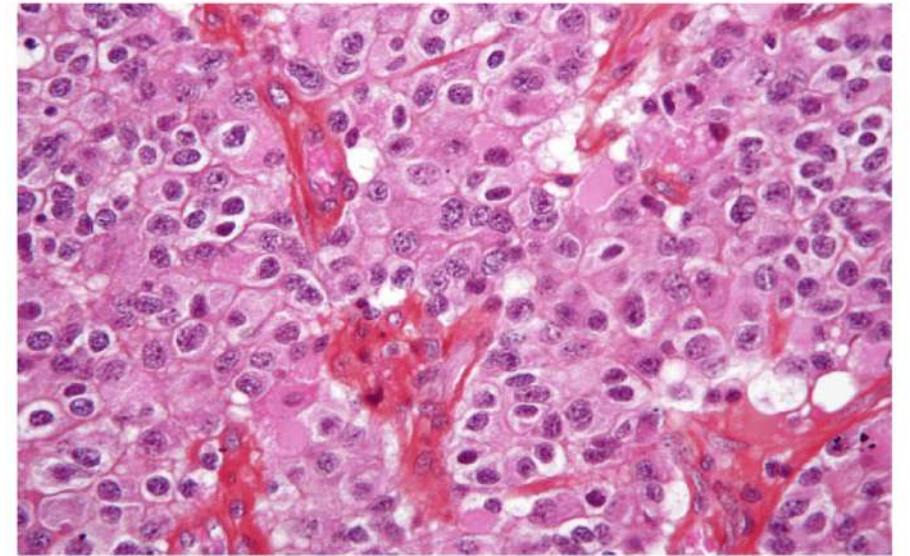
no petechiae

89. A 40-year-old male patient is being evaluated for a suspected brain tumor. A biopsy is obtained whose image has been shown below. Which of the following is the most probable diagnosis based upon the biopsy findings?

- A. Pilocytic astrocytoma
- B. Glioblastoma multiforme
- C. Medulloblastoma

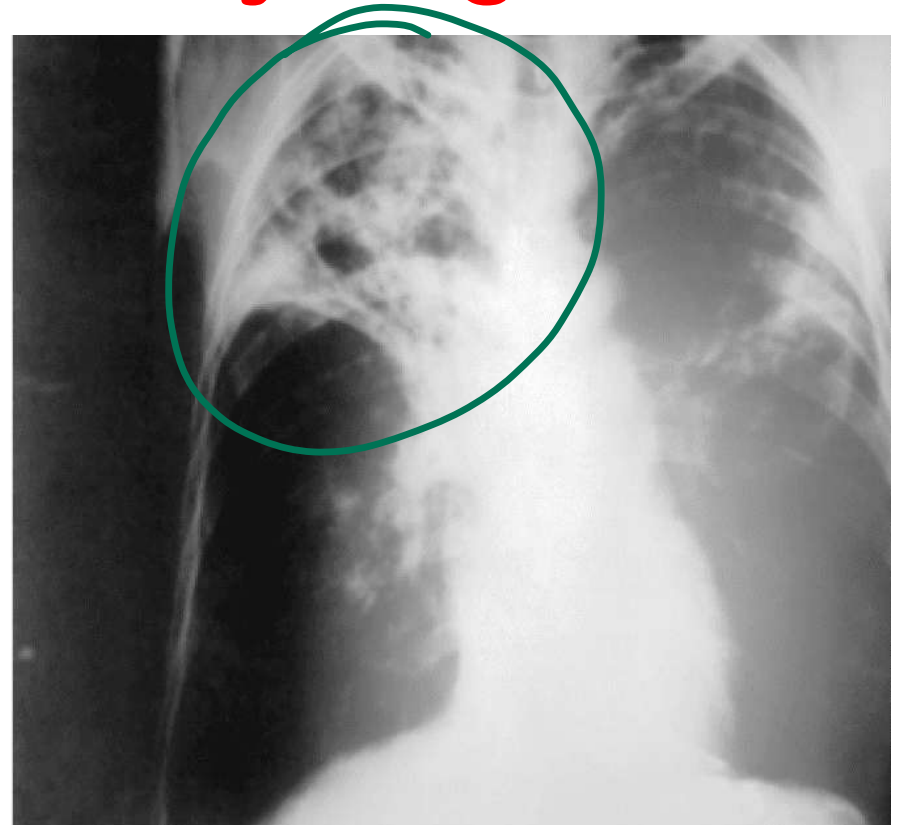
D. Oligodendroglioma

fried egg



90. A 46-year-old male presented to the clinic with a persistent cough, fatigue, weight loss, and night sweats. Xray of the patient is as given below. What is the most likely diagnosis?

- A. Streptococcus pneumoniae infection
- B. Mycobacterium tuberculosis infection
- C. Carcinoma lung
- D. Sarcoidosis



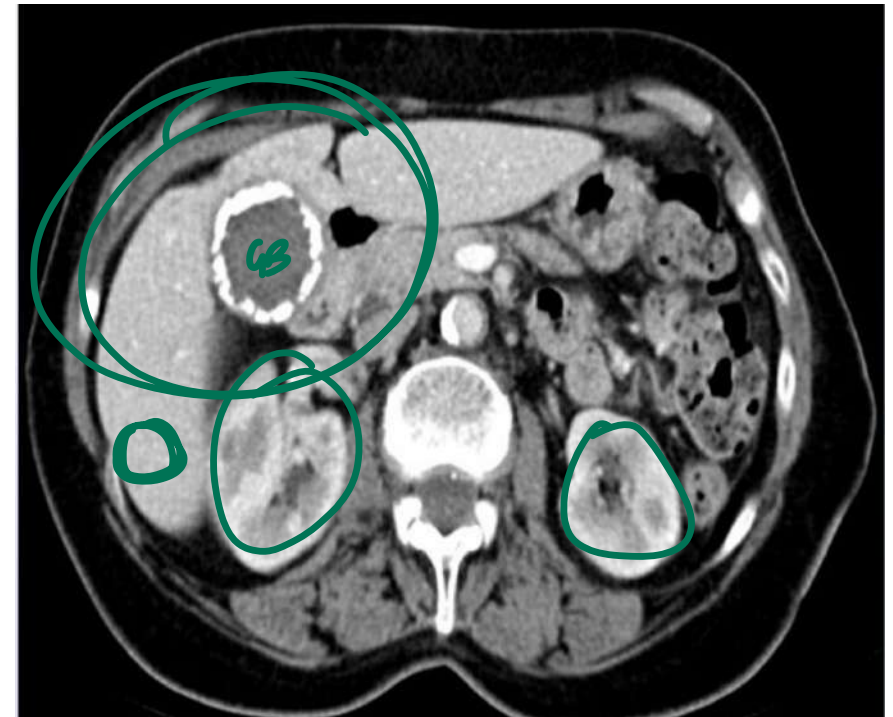
91. 59-year-old woman comes to the office for routine visit. She reports no symptoms. Physical examination shows a firm, nontender mass in the right upper quadrant. The remainder of the examination is within normal limits. Abdominal CT scan is shown in the image below. What is the likely diagnosis?

A. Calcified hydatid cyst ←

~~B. Porcelain GB~~

C. Renal calculus

D. Splenunculus xx



92. A woman presented to the clinic with heavy, painful menses that have worsened over the past year. On pelvic examination the uterus is enlarged and tender. MRI scan of the patient's abdomen revealed a finding similar to the image given below. What is the most likely diagnosis?

A. Polyps

B. Leiomyoma

C. Adenomyosis

D. Endometrial hyperplasia



93. Match the following images:



- A. Venous ulcer
- B. Marjolin ulcer
- C. Arterial ulcer
- D. Trophic ulcer

A. 1-C, 2-D, 3-B, 4-A

B. 1-D, 2-C, 3-A, 4-B

C. 1-C, 2-D, 3-A, 4-B

~~D. 1-D, 2-C, 3-B, 4-A~~

94. 42-year-old woman reports bloating with mild, diffuse abdominal discomfort 4 days after undergoing an elective cholecystectomy. She has not passed gas since the surgery. Perioperatively, she received antibiotics, morphine for pain, and metoclopramide for nausea. Physical examination shows a distended, tympanic abdomen with decreased bowel sounds. There is mild, diffuse tenderness but no rebound or guarding. Which of the following is most likely contributing to this patient's current condition?



paralytic ileus

A. Impaction of a gallstone in the ileum

B. Metoclopramide

C. Morphine

D. Postoperative adhesions

electrolyte imbalance

↑ bowel sounds

95. Identify the correct scenario:

1. Loss of sensations over the root of penis after lap hernia repair-Ilioinguinal nerve ✓

2. Hyperesthesia of tongue after parotid surgery-
~~Auriculotemporal nerve~~ Lingual N

3. Diaphragm palsy after thymoma resection-Phrenic nerve (T)

4. Loss of sensations over the lateral gluteal region after hernia mesh repair-LCNT

Options;

A. 1,2,3,4

B. 1,2,3

C. 1,3

D. 2,3,4

MC

96. A 23-year-old man comes to the emergency department after injuring his right shoulder during a basketball game. He was trying to block a shot when his abducted and externally rotated arm was forced backward by an opposing player. Plain film x-ray of the right shoulder is shown below. If left untreated, which of the following is the most likely complication of this patient's injury?

- A. Inability to extend fingers
- B. Winging of scapula
- C. Numbness of the medial 2 fingers
- D. Shoulder abduction weakness

axillary N ^{ML →}



97. A patient presents to the emergency room with symptoms of fever, increased respiratory rate, elevated heart rate, and low blood pressure. The physician suspects the patient may have SIRS. Which of the following is not a criteria for SIRS?

White THIR

~~A. Systolic blood pressure <90 mmHg~~

~~B. Temperature >38 degree Celsius or <36 degree Celsius~~

~~C. Respiratory rate >20 bpm~~

~~D. Heart rate >90 min~~

SIRS –2 or more +:

Core Temperature $<36^{\circ}\text{C}$ or $> 38^{\circ}\text{C}$

HR $>90\text{bpm}$

RR $>20/\text{min}$ or $\text{P}_{\text{co}_2} <32 \text{ mmHg}$

WBC count $>12,000 /\mu\text{L}$, $<4000/\mu\text{L}$, 10% bands

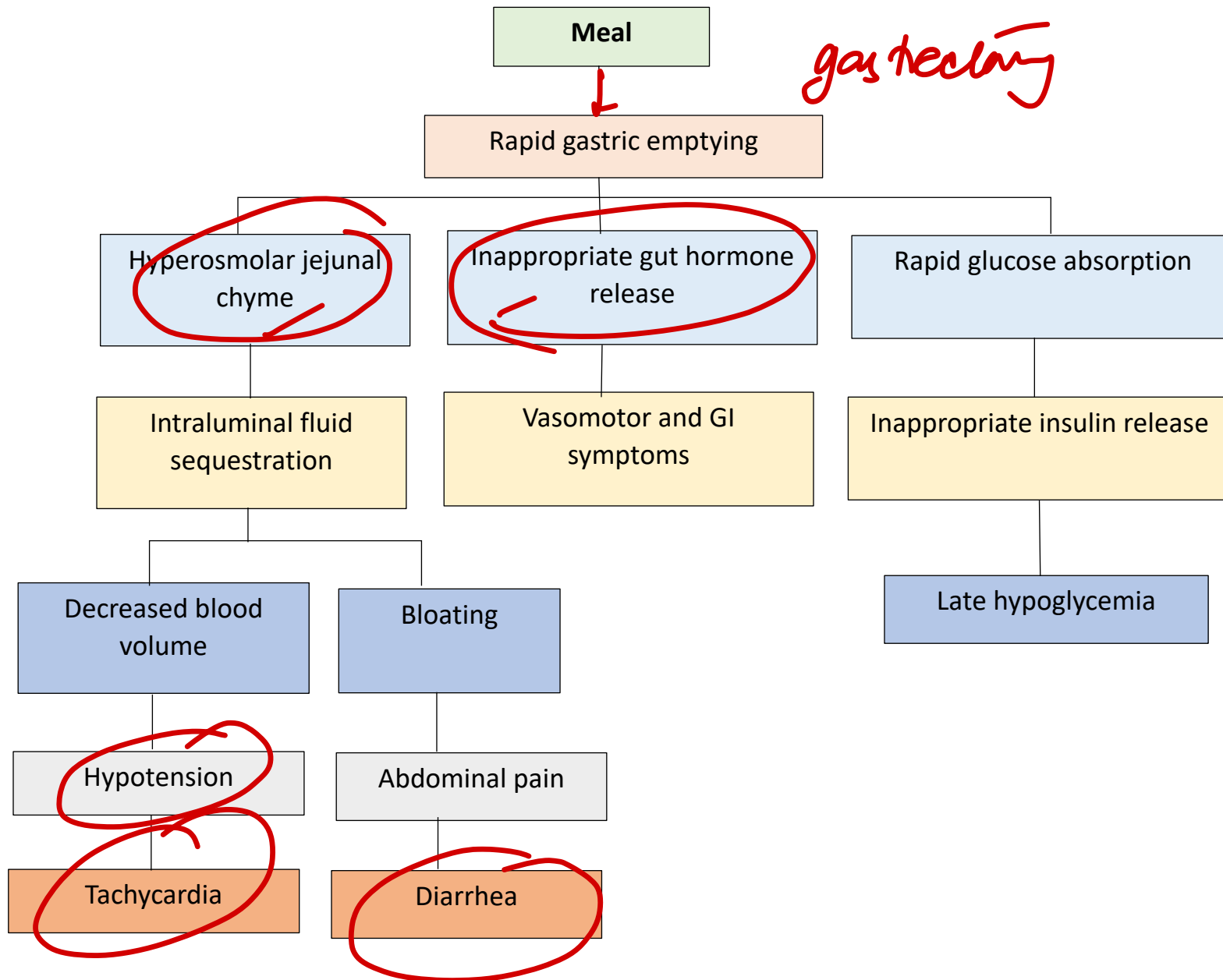
98. 59-year-old man comes to the office for a postoperative follow-up. He underwent a partial (distal) gastrectomy for a perforated peptic ulcer 3 weeks ago. For the last 10 days, he has had intermittent abdominal cramps and diarrhea. Symptoms begin 25-30 minutes after eating and are associated with nausea, weakness, palpitations, light-headedness, and diaphoresis. The patient has no symptoms overnight, and there is no associated fever or weight loss. What is the likely diagnosis?

A. Dumping syndrome

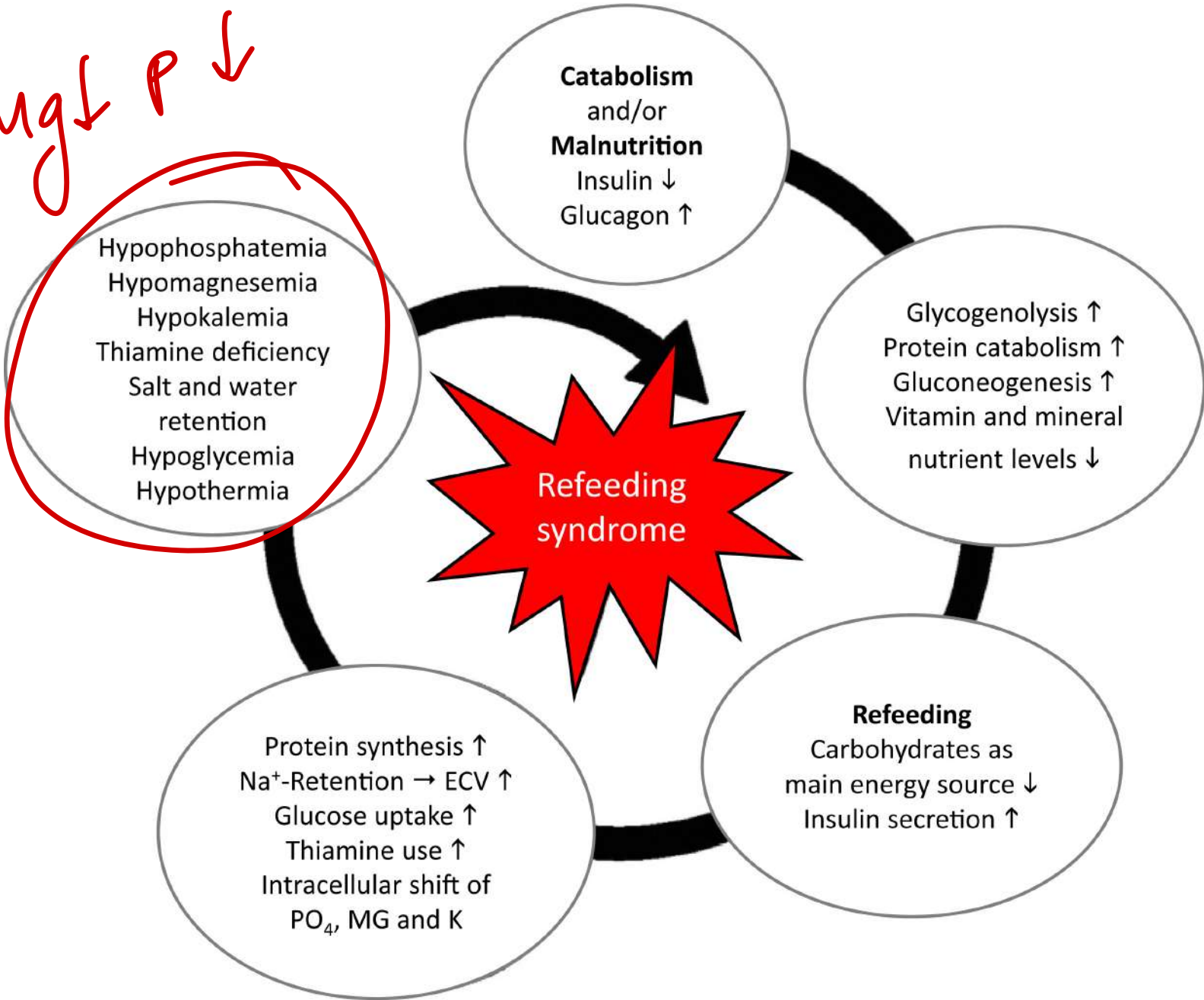
B. Refeeding syndrome

C. Tumor lysis syndrome X

D. SIBO malabsorption X



K ↓ Mg ↓ P ↓



99. Identify the incision shown below:

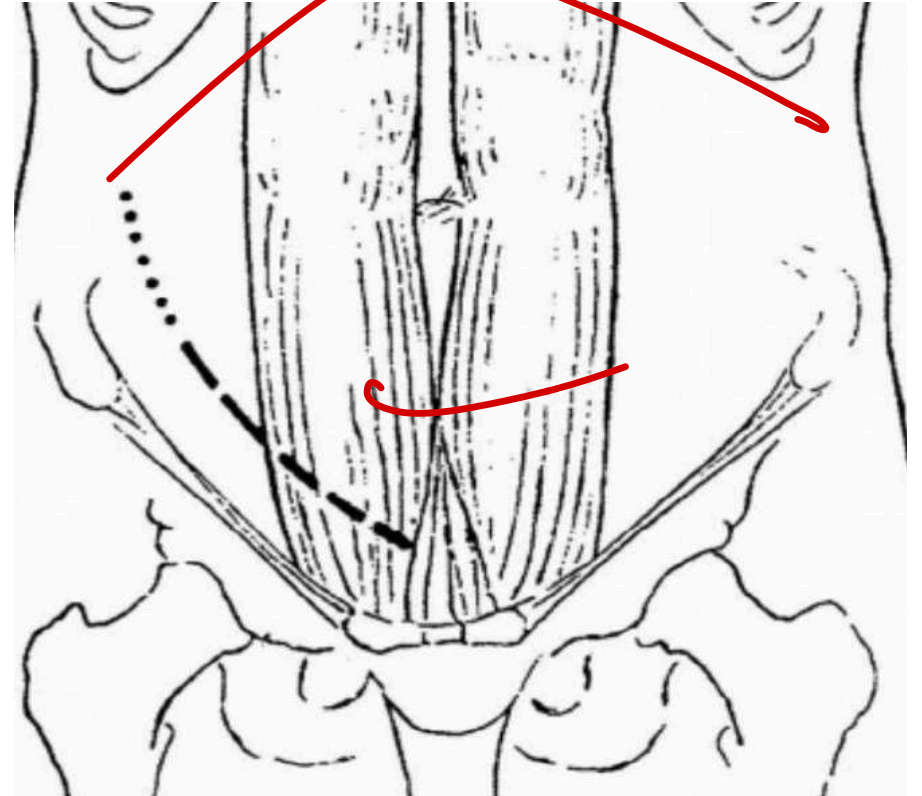
INIC

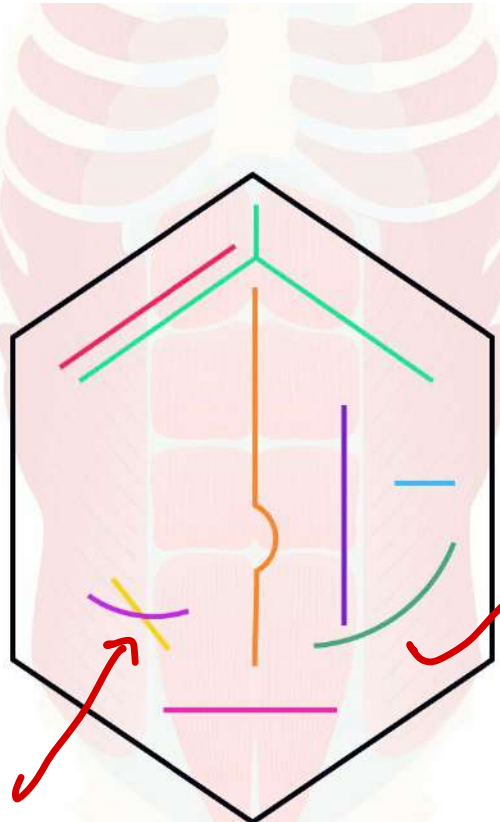
~~A. Gibson incision~~

B. Kocher incision ✗

C. Maylard incision ✗

D. Mercedes Benz incision



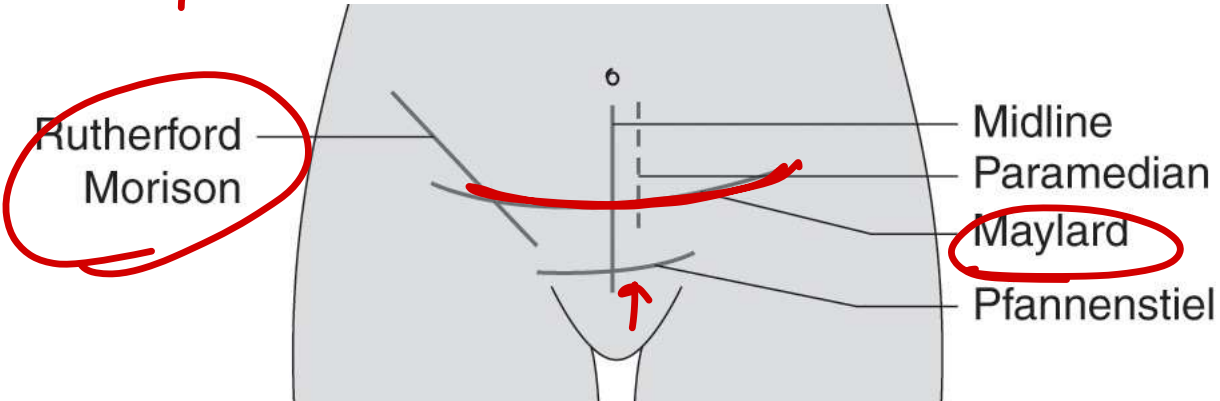


- KOCHER (OPEN CHOLECYSTECTOMY)
- 'MERCEDES BENZ' (LIVER TRANSPLANT)
- MIDLINE LAPAROTOMY (INTRA-ABDOMINAL ACCESS)
- PARAMEDIAN (INTRA-ABDOMINAL ACCESS)
- TRANSVERSE (STOMA CLOSURE/FORMATION)
- RUTHERFORD-MORRISON (KIDNEY TRANSPLANT - R/L)
- GRIDIRON (OPEN APPENDIECTOMY)
- LANZ (OPEN APPENDIECTOMY)
- PFANNENSTIEL (GYNAECOLOGICAL, OBSTETRIC)

muscle splitting

skin crease

Rutherford - muscle cutting



100. A 35-year-old man comes to the office due to a progressive increase in breast size over the past 6 months. Genitourinary examination reveals a 1-cm nodule in the right testis. The examination is otherwise normal. Laboratory results are as follows

LH: 3 U/L (normal 6-23 U/L)

FSH: 2 U/L (normal 4-25 U/L)

Testosterone: 270 ng/dL (normal: 300-1,000 ng/dL)

Estradiol: 115 pg/mL (normal: 20-60 pg/mL)

β-hCG: undetectable

Alpha-fetoprotein: undetectable

Which of the following is the most likely diagnosis in this patient?

A. Choriocarcinoma ✗

~~B. Leydig cell tumor~~ —————

C. Seminoma ✗

D. Yolk sac tumor ✗

estrog ↑
—————
—————

Thank You
