



B-9002

Seat No. _____

Second Year Physiotherapy Examination

March - 2021

General Surgery : Paper - 1

(General Surgery & Orthopaedics)

(Old Course)

Time : Hours]

[Total Marks : 50

Instruction : Write each section in separate answer book.

SECTION -I (General Surgery)

- 1** Write long essay : (any **two**) **20**
- (a) Define shock. Classify shock and describe in detail about septicemia shock.
 - (b) Cervical lymphadenopathy : Causes and diagnosis.
 - (c) Causes and examinations of lower limb ulcers.
- 2** Write short essay : (any **two**) **10**
- (a) Squamous cell carcinoma
 - (b) Factors affecting wound healing.
 - (c) Universal precautions.
- 3** Write short notes : (any **five**) **10**
- (1) Lipoma
 - (2) Abscess
 - (3) Methods of Haemostasis
 - (4) Difference between Benign and Malignant swelling.
 - (5) Personal Protection Equipment (PPE)
 - (6) Metabolic Acidosis.
- 4** M.C.Q. **10**
- (1) All are true following a major burn injury, except
 - (A) Fluid requirements are greater within the first two hours of injury.
 - (B) Pulmonary edema can occur even if the lungs have not been injured.
 - (C) Prophylactic antibiotics should be given on admission.
 - (D) Pain is initially worse in less severely burnt area.

- (2) The tensile strength of wound starts and increases after
 (A) Immediate suture of wound (B) 3-4 days
 (C) 7 – 10 days (D) After 6 weeks
- (3) In compensated stage of shock, all are normal except
 (A) Urine output (B) Conscious level
 (C) Pulse rate (D) Blood pressure
- (4) The margin of ulcer grow per day is
 (A) 1 mm (B) 2 mm
 (C) 3 mm (D) 4 mm
- (5) In prolonged severe vomiting are occurred except
 (A) Metabolic acidosis (B) Aciduria
 (C) Renal failure (D) Cheyne-stokes respiration
- (6) Reactionary Haemorrhage occur
 (A) After 24 hours (B) After 48 hours
 (C) Within 24 hours (D) After 7 days
- (7) Best way to prevent Gas gangrene is :
 (A) Immunoglobulin (B) Hyperbaric Oxygen
 (C) Proper wound debridement (D) Anti gas gangrene serum
- (8) Wound heals by contraction and epithelization is:
 (A) Primary intension (B) Secondary intension
 (C) Tertiary intension (D) Delayed primary intension
- (9) Most common malignancy found in Marjolin's Ulcer is
 (A) Squamous cell carcinoma
 (B) Basal cell carcinoma
 (C) Malignant fibro histiocyoma
 (D) Malignant melanema
- (10) Most common site for Basal cell carcinoma is :
 (A) Face (B) Neck
 (C) Trunk (D) Extremities

SECTION-II (Orthopaedics)

- 5** Long essay (any two) **20**
- (i) Describe the clinical features, classification, management and complications of scaphoid fracture.
- (ii) Describe the clinical features, classification, management and complications of calcaneum fracture.
- (iii) Describe the clinical features, classification, management and complications of colle's fracture.

- 6 Short essay : (any two) 10**
- (i) Compartment syndrome
 - (ii) Pelvis fracture
 - (iii) Nonunion of fracture
- 7 Write in short : (any five) 10**
- (i) radial nerve palsy
 - (ii) talus fracture
 - (iii) fracture healing
 - (iv) horners syndrome
 - (v) external fixator
 - (vi) Ilizarov fixator
- 8 M.C.Q. (No options) 10**
- (1) All of the following factors facilitates non union except :
 - (A) Hematoma formation (B) Periosteal injuries
 - (C) Absence of nerve supply (D) Chronic infection
 - (2) Compound fracture is :
 - (A) Fracture with artery involvement
 - (B) Fracture with nerve involvement
 - (C) Fracture with muscle involvement
 - (D) Fracture with skin involvement
 - (3) Radial nerve palsy is common in :
 - (A) Proximal humerus fracture (B) Elbow dislocation
 - (C) Shaft humerus fracture (D) Shoulder dislocation
 - (4) Guillotine amputation is :
 - (A) Amputation above level of fracture
 - (B) Amputation at fracture level
 - (C) Planned amputation
 - (D) Amputation through joint
 - (5) Jones fracture is
 - (A) 2nd metatarsal fracture (B) 3rd metatarsal fracture
 - (C) 5th metatarsal fracture (D) 4th metatarsal fracture
 - (6) Following fracture avascular necrosis is common :
 - (A) tibia fracture (B) femur shaft fracture
 - (C) scaphoid fracture (D) cuboid fracture

- (7) Common cause of compartment syndrome is
(A) tight bandaging (B) Fracture
(C) Snake bite (D) burns
- (8) Aviator astralgus fracture is :
(A) calcaneum fracture (B) talus fracture
(C) acetabulum fracture (D) pelvis fracture
- (9) Fat embolism is common in :
(A) calceneum fracture (B) shaft humerus fracture
(C) ptoximal humerus fracture (D) shaft femur fracture
- (10) Volar barton fracture is fracture of :
(A) lower radius (B) lower ulna
(C) head of radius (D) olecranon
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