GENERAL SURGERY 2
final exam

Doctor 2020

Special thanks to 👏🏻

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General Surgery 2

GENERAL

1. Which of the following prophylactic antibiotics is used before inguinal hernia repair with mesh?

a. 3rd gen cephalo
b. 1st gen cephalo
c. Quinolone
d. Vancomycin
e. Broad spectrum

Ans: B

2. Which of the following is deficient in stored blood?

a. Factor II
b. Factor VII
c. Factor VIII
d. Factor IX
e. Factor X

Ans: C

3. Patient with normal PT and prolonged PTT, the defect in?

a. Extrinsic pathway
b. Intrinsic pathway
c. Platelets
d. Common pathway

Ans: B

4. Which of the following need platelets transfusion?

a. Platelets < 10k no bleeding
b. Platelets > 100k no bleeding
c. Platelets < 50k with minor procedure

Ans: A

5. Target blood sugar before the surgery in critically ill patients?

a. 80-100
b. 100-120
c. 140-180
d. 200-250
e. >250

Ans: C

6. Which of the following regarding antibiotics for SSI is not true?

a. Should be given before incision
b. A dose or two may be needed
c. Antibiotic prophylaxis is not given in hernioplasty

Ans: C

7. Which of the following is used in a patient with coagulopathy?

a. Packed RBCa
b. Fresh Frozen Plasma
c. Cryoprecipitate

Ans: B

8. Which of the following statements is NOT CORRECT?

a. Packed RBC is used to correct coagulopathy
b. Fresh frozen plasma has a 2-year shelf life

Ans: A

8. The best method to give supplements in massive transfusion?

a. 1:1:1
b. 2:1:1
c. 2:2:1

Ans: A

9. What is the best modality to detect osteomyelitis?

a. MRI
b. CT
c. MRI and CT
d. Bone biopsy
e. Bone scan

Ans: D

10. Which of the following is used to detect Mets in neuroblastoma?

a. MRI
b. CT scan
c. MIBG

Ans: C

11. All of the following are true about antibiotic prophylaxis EXCEPT?

A. Bacteroides are aerobic, spore-forming rods
B. Cellulitis is most commonly caused by Streptococcal

Ans: A

12. Most common adverse effect per unit of blood transfused?

A. Hepatitis B
B. Hepatitis C
C. Febrile reaction
D. Transfusion-Associated Circulatory Overload

Ans: C

13. A Patient comes with GI bleeding. What is the FIRST best thing to do?

A. Endoscopy
B. IV Fluid resuscitation

Ans: B

14. Which of the following is the most important prognostic factor in colorectal cancer?

A. TNM staging
B. Grade

Ans: A

GI

1. What differentiates the mechanical bowel obstruction from paralytic ileus?

a. Colicky abdominal pain
b. Obstipation
c. Air fluid level
d. Vomiting
e. Abdominal distention

Ans: A/C mostly A

2. A patient with LLQ pain, tenderness, and fever, CBC showed leukocytosis. He was diagnosed with diverticulitis, Hinchy class 1. What is the best next step?

a. Percutaneous drainage
b. Antibiotics that cover gram negatives and anaerobes.
c. Colectomy
d. Colonoscopy

Ans: B

3. The risk of malignancy is highest in which of the following?

a. Tubular adenomatous polyp
b. Villous adenomatous polyp
c. Hamartoma
d. Hyperplastic polyp
e. Pseudopolyps

Ans: B

4. All of the following are from the boundaries of Hesselbach's triangle EXCEPT?

a. Inguinal ligament
b. Rectus abdominis
c. Inferior epigastric vessels
d. External oblique
e. None

Ans: D

5. Which of the following forms the free border of the lesser omentum?

a. IVC
b. Portal triad
c. Left gastric artery
d. Splenic artery
e. Common hepatic artery

Ans: B

6. Courvoisier's sign indicates?

a. Obstructive malignancy
b. Hepatitis
c. Pancreatitis
d. Cholecystitis
e. Gallbladder stones

Ans: A

7. ERCP is used mainly for?

a. Stone extraction
b. Diagnostic only
c. Cholecystectomy
d. Pancreatic imaging only

Ans: A

8. Which of the following is a specific complication of Roux-en-Y bypass surgery?

a. GERD
b. Dumping syndrome
c. Infection
d. Gastric Leak

Ans: B

9. Least important feature indicating malignancy for colonic polyps?

A. Shape
B. Site
C. Number
D. Pathological Type
E. Size

Ans: A

10. Which of the following is the most specific regarding IPMN?

A. It has communication with the pancreatic duct.
B. strauma ovarii
C. branched is more malignant than the main duct type
D. It happens more in young females

Ans: A

11. An old patient with painless jaundice and palpable RUQ mass, which of the following is a raised suspicion?

a. Pancreatic cancer
b. Gallbladder stones
c. Ulcerative colitis

Ans: A

12. Which of the following is considered an osmotic laxative?

A. Lactulose
B. Bisacodyl
C. Senna
D. Psyllium

Ans: A

13. Which of the following is true about Familial Adenomatous Polyposis (FAP)?

A. Caused by an APC gene mutation on chromosome 7
B. 20% of cases are not familial
C. Few polyps in the rectum, hundreds in the colon

Ans: B/C

14. A patient who had a hemorrhoidectomy came to the emergency department the night after surgery, and he said that he didn't pass urine. What is the best next thing to do?

A. Review analgesics
B. Increase oral intake
C. Give furosemide 40 mg
D. Blood test and check the KFT

Ans: A

15. Which test is used to detect non-acid reflux in GERD?

a. Barium swallow
b. 24 hr pH monitoring
c. Endoscopy
d. 24 hr pH-impedance

Ans: D

16. Which of the following is a feared complication of pseudomembranous colitis?

a. Toxic megacolon.

Ans: A

17. A patient with a long-standing U.C that involves his whole colon, which of the following is he at increased risk for?

a. Colorectal cancer
b. Perforation

Ans: A

18. What is the most dangerous complication of a hernia in a child if left untreated?

a. Strangulation
b. Perforation

Ans: A

19. For a Patient with grade IV hemorrhoid, what is the best thing to do?

a. Conservative management only
b. Stapled hemorrhoidopexy
c. Conventional Hemorrhoidectomy
d. Sclerotherapy

Ans: C

20. A Patient came to the ER with abdominal guarding and free air under the diaphragm. What is the most likely cause?

a. Perforated viscus
b. Pancreatitis
c. Cholecystitis

Ans: A

21. Overwhelming Post-Splenectomy Infection, it increases the risk for?

a. Viral
b. Severe bacterial sepsis
c. Fungal
d. Parasite

Ans: B

22. Indirect hernia passes through which of the following structures?

a. Deep inguinal ring
b. Superficial ring
c. Hesselbach's triangle
d. Femoral Area

Ans: A

23. Most common etiology of cryptoglandular perianal fistula?

a. Perianal abscess
b. Anal fissure
c. Crohn's disease
d. Malignancy

Ans: A

24. A patient had surgery with spinal anesthesia; post-operatively, he had bradycardia, warm skin, but normal cardiac output. Which of the following may be the cause?

a. Decreased sympathetic tone
b. Sepsis
c. Cardiogenic shock

Ans: A

25. Regarding rectal prolapse and intussusception, which of the following statements is false?

A. In rectal prolapse, a tongue blade can be inserted next to the protruding mass
B. They can be differentiated based on clinical symptoms
C. Prolapse of the intussusception through the anus is a grave sign
D. Prolapse of the intussecptum is associated with systemic toxicity
E. All of the above

Ans: A

26. Patient came to the ER after an accident with a grade 3 laceration splenic injury on CT scan, but he was hemodynamically stable. Which of the following is the best next step?

A. Splenic artery embolization.
B. Observation and antibiotics.
C. Observation.
D. Laparotomy
E. Put him on mechanical ventilation, as he may need surgery

Ans: C

27. RTA patient stable, with splenic injury grade 1. What is the next step?

A. Observation and monitoring
B. Immediate surgery
C. Give pneumococcal vaccine
D. Put him on mechanical ventilation if he needs surgery later

Ans: A

28. A young patient with a history of Crohn's disease with terminal ileal disease for 5 years is referred to by gastroenterology because of abdominal pain and distention for 5 months, and he lost 15 kg (weight 70 kg), with no change in diarrhea frequency. What is the cause:

A. Acute exacerbation of Crohn's disease
B. Terminal ileal abscess
C. Terminal ileal stricture
D. Ileo Colic Fistula

Ans: C

29.All of the following conditions can cause rectal bleeding with tenesmus, EXCEPT:

A. Ulcerative colitis
B. Radiation proctitis
C. Rectal adenoma
D. Complex Perianal fistula

Ans: D

30. All of the following are true about postoperative acute appendicitis, except?

A. Diarrhea may be due to an abscess
B. Give metronidazole and another ceftriaxone for 3 days

Ans: B

31. Patient in 50s, previously healthy, with small bowel obstruction and hemoglobin 9, diagnosis?

A. Sigmoid volvulus
B. Crohn's flare
C. Cecal adenocarcinoma

Ans: C

32. Linitis plastica is considered to be which of the following types of cancer?

A. Diffuse-type gastric cancer
B. Intestinal-type gastric cancer
C. Lymphoma

Ans: A

33. Patient with A. Fib on warfarin, he stopped warfarin to do surgery, presented to ER with a sudden onset of abdominal pain, increased post-prandial, most likely cause?

A. Embolus in a non-diseased celiac artery
B. Embolus in non-diseased SMA
C. Non-occlusive mesenteric ischemia

Ans: B

34. All of the following are true about the pathophysiology of abdominal compartment syndrome except?

A. Increased SVR
B. Decreased urine output
C. Increased preload

Ans: C

35. All of the following can happen due to increased abdominal pressure in laparoscopic surgery except?

A. Increased cardiac output
B. Decreased venous return

Ans: A

37. Which of the following is a true diverticulum?

A. Cecal diverticulum
B. Epiphrenic diverticulum
C. Sigmoid diverticulum
D. Zenker's diverticulum
E. Duodenal diverticulum

Ans: A

PLASTIC

1.IL-1 (Interleukin-1) is secreted by which of the following cells?

a. Fibroblast
b. Endothelial cells
c. Neutrophils
d. Collagen

Ans: B or C?

2. Which of the following is wrong according to the third-degree burn?

a. More painful than second degree
b. Less sensitivity

Ans: A

3. Melanomas originate from which of the following cells?

a. Superficial keratinocytes
b. Hair follicles
c. Neural crest cells
d. Apocrine gland cells

Ans: C

4. All of the following are true about early Escharotomy except?

a. Less risk of sepsis
b. Early mobilization
c. Less hospital stay
d. Less blood loss

Ans: D

5. The most common causative organism of sepsis in burn patients is?

a. Group A streptococcus
b. Pseudomonas

Ans: B

6. All of the following about the function of the skin are true except?

a. Barrier
b. Immunological
c. Vitamin E production
d. Thermoregulation

Ans: C

7. Which of the following is the name of the disease that causes necrotizing skin infection in the perineal area?

A. Fournier's gangrene
B. Gas gangrene
C. Ludwig angina

Ans: A

8. Which of the following is NOT CORRECT regarding 3rd degree burn?

a. Heals in 4 weeks
b. It case eschar
c. Painless

Ans: A

9. An Infant with a red lesion on his upper eyelid affecting his vision, best next step?

a. Observe
b. Beta blocker
c. Laser
d. Surgical excision

Ans: B

10. Most appropriate time to repair a cleft palate?

a. At birth
b. 3 months
c. 1 year
d. 4 years
e. 5 year

Ans: C

11. Which of the following regarding cleft palate surgery is true?

A. Cleft palate and cleft alveolar should be repaired at the same time
B. Medical treatment is initially used for secretory otitis media
C. Early treatment of a cleft lip leads to maxillary problems
D. Repair of cleft lip and palate takes place at the preschool age.
E. Speech problem is independent of the fixation of the cleft palate

Ans: B

12. Which of the following is true regarding melanoma?

A. Nodular melanoma is the most common type
B. It most commonly affects the scalps of males and the backs of females
C. It most commonly affects the lower limbs in males? (Not sure of the rest)
D. The 10-year survival rate is 88% for Breslow thickness <1mm
E. Melanoma in situ has a 95% survival rate

Ans: E

13. Which of the following is the most common cancer following immunosuppression after transplant surgery?

A. Lymphoproliferative
B. Skin cancer
C. kaposi sarcoma
D. Renal cell cancer

Ans: B

14. Which of the following is true about wound healing?

A. The goal of wound healing is to decrease the inflammatory and proliferative phases
B. The mechanism of the wound affects wound healing
C. In 3 weeks, the wound reaches 50% of its tensile strength
D. Collagen gradually increases for up to 2 years, but the wound only reaches 80% of the strength of uninjured tissue
E. Tensile strength is the force required to reopen the wound

Ans: D

15.All of the following are true about a full-thickness skin graft compared with a split-thickness skin graft, EXCEPT:

A. It has better sensation
B. It undergoes less secondary contraction after healing
C. It requires a well-vascularized recipient bed
D. It has a higher chance of graft take

Ans: D

16. All of the following statements about wound management are true, EXCEPT:

A. Direct closure is indicated only when the skin is tension-free
B. Primary closure is necessary for all wounds
C. Dirty or infected wounds are usually left open initially
D. Contaminated wounds may require delayed primary closure

Ans: B

17. Regarding wound healing, which of the following statements is WRONG?

A. Healing by secondary intention usually gives a result as good as a skin graft
B. Healing by secondary intention is the same as healing by fibrosis

Ans: A

18. Regarding fluid resuscitation in major burns, which of the following statements is TRUE?

A. Colloids are not the preferred initial fluid in the first 4 hours
B. Over-resuscitation is not harmful
C. Children are hospitalised with 5% TBSA
D. First-degree burns are calculated in the Parkland formula
E. Hemoglobin is the best indicator of fluid resuscitation

Ans: A

PEDIATRICS

1. Which of the following is wrong about esophageal atresia?

a. The stomach appears gasless or with minimal air on ultrasound
b. It can be visualized as a hypoechoic shadow at the level of vertebra
c. Rarely diagnosed antenatally

Ans: C

2. Which of the following needs a serial abdominal US for Wilms tumor?

a. Recurrent abdominal pain
b. Recurrent UTI
c. Beckwith-Wiedemann syndrome

Ans: C

3. Not used for the initial management of congenital diaphragmatic hernia for a 35-week infant?

a. ECMO
b. Surfactant
c. High oscillation ventilation
d. Ventilation where CO2 is above the normal range
e. Nitric oxide

Ans: B

4. A child came to the ER with his parents. On exam, he had an abdominal mass and high urine VMA/HVH. Which of the following is the best differential diagnosis?

a. Neuroblastoma
b. Hepatoblastoma
c. Wilms tumor

Ans: A

5. Regarding VUR, which of the following is the best investigation to look for renal scar, stenosis, and to assess the kidney function?

a. MAG 3
b. MCUG
c. DMSA

Ans: C

6. An 8-year-old child came to the ER and swallowed a button battery. On X-ray, it has been found in the esophagus. What is the best next step?

a. Immediate Endoscopy
b. Follow up
c. Wait until it goes to the stomach

Ans: A

7. Which of the following is not a sign of progression in NEC (necrotizing enterocolitis)?

a. High CRP
b. Portal venous gas
c. Thrombocytopenia
d. Metabolic acidosis
e. Pneumatosis Intestinalis

Ans: A

8. Why should we be careful in the examination of patients with suspected Wilm's Tumor?

a. Catecholamine release
b. Tumor rupture or hemorrhage
c. Renal vein thrombosis

Ans: B

9. A 7-year-old child came in with a chronic cough. The parent denied the foreign body aspiration, but X-ray showed unilateral atelectasis ….. Which of the following differentials should be kept in mind?

a. Chronic foreign body aspiration
b. Esophinicilic esophagitis
c. Pneumonia
d. Croup

Ans: A

10. Most specific sign for detecting malrotation on Ultrasound?

a. SMA and SMV inversion
b. Cecum in the Right upper quadrant
c. The presence of jejunal loops below and to the left of the pyloric sphincter

Ans: B

11. What is the most common location where a coin is stuck in the esophagus after a child swallows it?

a. Cricopharangeus
b. Mid esophagus at the level of the aortic arch
c. Gastroesophageal junction
d. Diaphragm crura

Ans: A

CARDIOTHORACIC

1. A trauma patient presented to the ER with hypotension, tachycardia, decreased breath sounds on the right side, hyper-resonant chest, and distended neck veins. What is the best next step?

a. Chest tube
b. Thoracotomy
c. Needle thoracotomy

Ans: C

2. Which of the following is not found in tension pneumothorax?

a. Tracheal shift
b. Hypotension
c. Tachycardia
d. Hyperresonant chest
e. Collapsed neck veins

Ans: E

3. Which of the following needs urgent repair in a thoracic aortic aneurysm regardless of the size?

a. Mild abdominal discomfort
b. Growing aneurysm >0.5 cm/year
c. Aneurysm size of 4.5 cm

Ans: B

4. A 58-year-old patient experiences fatigue and dyspnea. An echocardiogram showed aortic stenosis, the valve area was 0.8 cm, best next step to do?

a. Observe
b. TAVR
c. SAVR
d. Balloon dilation Valvuloplasty

Ans: C

5. A young patient and IV drug user presents with a femoral abscess. Examination showed a holosystolic murmur best heard at the left sternal border on 4th intercostal space. The most likely cause is?

A. Tricuspid regurgitation
B. Aortic stenosis
C. Mitral regurgitation
D. Aortic regurgitation
E. Tricuspid stenosis

Ans: A

6. Female presents with phlemasia cerula dolens, best next step to do?

A. Systemized Heparin
B. Local Urokinase
C. Venous thrombectomy

Ans: C

ENDOCRINE

1. The most common malignant tumor of the submandibular gland is?

a. Mucoepidermoid
b. Adenoid cystic tumor
c. Pleomorphic tumor
d. Acinic cell Carcinoma

Ans: B

2. A 60-year-old male was treated for papillary thyroid carcinoma (4.5 cm). Which of the following should be done after it?

a. Chemotherapy
b. Radioactive iodine for thyroid tissue ablation
c. No need for adjuvant therapy

Ans: B

3. Which of the following is a triad for primary hyperparathyroidism?

a. Hypercalcemia, hypophosphatemia, hyperparathyroidism
b. Hypocalcemia, hyperphosphatemia, hyperparathyroidism
c. Normal calcium, high phosphate, hyperparathyroidism

Ans: A

4. In the excision of pleomorphic adenoma, why is performing enucleation contraindicated?

a. Risk of recurrence
b. Facial nerve injury
c. Cosmesis
d. Hemorrhage

Ans: A

5. Which of the following is used to detect vascularity and solidity of a thyroid mass?

a. US with Doppler
b. Mri
c. Ct scan

Ans: A

6. Difference between papillary thyroid cancer in (sth 2015) and recently?

A. Anaplastic, medullary
B. Lymphoma, Sarcoma
C. Hurthle cell, medullary
D. Follicular, oncocytic

Ans: A,D?

7. A 37-year-old patient with hypercalcemia and kidney stones, with normal kidney function. The most likely cause is?

a. Familial hypocalciuric hypercalcemia
b. Primary hyperparathyroidism
c. Secondary hyperparathyroidism
d. Tertiary hyperparathyroidism
e. Psuedohypoparathyroidism

Ans: B

8. Which of the following is an Immediate complication after thyroid surgery?

a. Recurrent laryngeal nerve injury
b. Tracheal stenosis
c. Hypothyroidism

Ans: A

9. Which of the following is true about preoperative management of pheochromocytoma?

A. Alpha blockers, then Beta blockers
B. Beta blockers only

Ans: A

Breast

1. Which of the following breast imaging modalities has the highest sensitivity for screening for high-risk patients?

a. US
b. Mammogram
c. MRI

Ans: B/C mostly C

2. A 45-year-old woman presents with a 3 cm breast mass and ipsilateral matted lymph nodes. The oncologist is determining the stage of her breast cancer. What is the stage?

a. Stage I
b. Stage II
c. Stage III
d. Stage IV

Ans: C

3. Female patient with invasive ductal carcinoma, ER+, HER -, negative lymph node, best next step?

a. Wide local excision only
b. Modified Radical mastectomy with lymph node dissection
c. Wide local excision with SLN
d. Endocrine therapy

Ans: C

4. Which of the following is the most common long-term complication following an axillary lymph node dissection and mastectomy for breast cancer?

A. Lymphedema
B. Seroma
C. Hematoma

Ans: A