Sikkim Public Service Commission

Main Written Examination for the Post of General Duty Medical Officer Paper III

Surgery, Gynaecology & Obstetrics

Time Allowed: 3.00 Hrs.

Maximum Marks: 300

INSTRUCTIONS TO CANDIDATES

Read the following instructions carefully before answering the questions :-

- 1. IMMEDIATELY AFTER THE COMMENCEMENT OF THE EXAMINATION, YOU SHOULD CHECK THAT THIS TEST BOOKLET DOES NOT HAVE ANY UNPRINTED OR TORN OR MISSING PAGES OR ITEMS ETC. IF SO, GET IT REPLACED BY A COMPLETE TEST BOOKLET.
- Use only Black Ball Point Pen to fill the OMR sheet.
- Do not write anything else on the OMR Answer Sheet except the required information.
- This Test Booklet contains two sections, Section A (Surgery) & Section B (Gynaecology & Obstetrics) of 150 marks each of MCQ & Conventional paper.
- Question No. 1 of each section consists of 50 multiple choice questions of 2 marks each.
 Candidates are required to attempt all of them on the OMR sheet provided.
- 6. Question No. 2 of each section contains 10 short answer type question of 4 marks each. Candidates are required to attempt ANY 5 of these questions. Question No. 3 of each section contains 4 Long Answer type question of 15 marks each. Candidates are required to attempt ANY 2 of these questions from each sections.
- Candidates are required to attempt Question No. 2 and Question No. 3 of each Section in a separate Answer Book provided, clearly marking the answer book as SECTION-A & SECTION-B.

8. Marking Scheme

THERE WILL BE NEGATIVE MARKING FOR WRONG ANSWERS MARKED BY A CANDI DATE IN THE OBJECTIVE TYPE OUESTION PAPERS.

- (i) There are four alternatives for the answer to every question. For each question for which a wrong answer has been given by the candidate, one-third of the marks assigned to that question will be deducted as penalty.
- (ii) If a candidate gives more than one answer, it will be treated as a wrong answer even if one of the given answers happens to be correct and there will be same penalty as above to the question.
- (iii) If a question is left blank. i.e., no answer is given by the candidate, there will be no penalty for that question.

DO NOT OPEN THIS TEST BOOKLET UNTIL YOU ARE ASKED TO DO SO

SECTION-A (Surgery)

Q.No.1. Multiple Choice Questions 50x2=100

- 1. Which of the following is not a test for varicose veins?
 - A. Schwartz test
 - B. Fegan's test
 - C. Pemberton test
 - D. Modified Perthe's test
- 2. The inter pectoral lymph nodes are called?
 - A. Delphian nodes
 - B. Irish Nodes
 - C. Rotter's Nodes
 - D. Sister Mary Joseph's Nodes
- 3. An 'Onion Peel' appearance on CT is suggestive of
 - A. Chondroma
 - B. Ewing's sarcoma
 - C. Plasmacytoma
 - D. Osteosarcoma
- 4. Virchow's triad is characterized by
 - A. Stasis
 - B. Endothelial injury
 - C. Hypercoagulability
 - D. All of the above

6.	All of the following make up Alvarado Score except	to the telesconstant of the
	A. Anorexia	
	B. Left shift of Neutrophils	
	C. Iliopsoas sign	
	D. Right lower quadrant pain	
7.	'Double-bubble' Sign on X-ray is characteristic of	
	A. Duődenal atresia	zistere pooli il
	B. Jejunal atresia	
	C. Meconium Ileus	
	D. Pyloric stenosis	D. Slein threon
8.	Orphan Annie eye Nuclei is seen in	pin le unicensida
	A. Papillary carcinoma thyroid	
	B. Medullary carcinoma thyroid	
	C. Anaplastic carcinoma thyroid	
	D. Follicular carcinoma thyroid	
	3	

The Most common cause of small bowel obstruction

A. Malignancy

B. Crohn's disease

C. Post-operative adhesions

D. Incarcerated Hernia

	B. Focused abdominal sonography for t	rauma
	C. Fast assessment with sonography for	trauma
	D. Fast assignment with sonography and	d tomography(Computed)
	Table 4 and the control of the contr	
10.	Which organisms is responsible for Gas	Gangrene?
	A. Cl. Botulinum	An of the fullments make up to un
	B. Cl. Difficile	
	C. Cl. Perfringens	
	D. Cl. Tetani	
11.	Shock is clinically best assessed by	
	A. Pulse	
	B. Blood pressure	
	C. Urine Output	
	D. Skin turgor	
12.	Which colour of triage is given highest	priority
	A. Red	
	B. Green	
	C. Yellow	
	D. Black	

FAST stands for

A. Focused assessment for sonography for trauma

13.	Solubility of Cholesterol in Bile is determined by		
	A. Cholesterol, calcium, Bilirubin		
	B. Cholesterol, Bile Salts, Lecithin		
	C Dila Calta Chalastaral Dilimbia		
	D. Calcium, Cholesterol, Bile salts		
14.	The most common cause of Atrial septal defect is		
	A. Sinus venous defect		
	B. Ostium Primum defect		
	C Ostium Secundum Defect		
	D. Combined primum and Secundum defect		
15.	Which is not a component of Systemic Inflammatory re	sponse synd	rome
	[SIRS]		
	A. Temperature	. 10	
	B. WBC Count		
	C. Blood Pressure		
	D. Heart rate		
	Ande-Bachin index is		
16.	A clean incised wound heals by		
	A. Primary intention		
	B. Secondary intention		

C. Excessive scarring

D. None of the above

18.	In which of the tumours Alpha feto Protein	is elevated
	A. Choriocarcinoma	
	B. Neuroblastoma	
	C. Hepatocellular carcinoma	
	D. Seminoma	
10	Best investigation for bone metastasis is	
19.		
	A. MRI	
	B. CT	
	C. Bone Scan	
	D. X-ray	
20.	Normal value of Ankle Brachial index is	
	A. 0.8	
	B. 1	
	C. 1.2	
	D. 0.3	

Most common Nosocomial infection

A. Surgical site infection

C. Urinary tract infection

B. Respiratory tract infection

D. Skin and soft tissue infection

17.

- 21. Drug used for sclerotherapy of Varicose Veins are all except
 - A. Ethanolamine Oleate
 - B. Polidocanol
 - C. Ethanol
 - D. Sodium tetradecyl Sulphate
- 22. Most common tumour of parotid gland
 - A. Warthin's
 - B. Pleomorphic adenoma
 - C. Adenocarcinoma
 - D. Hemangioma
- 23. Triple assessment for Ca Breast includes
 - A. History, Clinical examination and mammogram
 - B. History, Clinical examination and FNAC
 - C. USG. Mammogram and FNAC
 - D. Clinical examination, Mammogram and FNAC
- 24. Barrett's oesophagus is diagnosed by
 - A. squamous Metaplasia
 - B. Intestinal Metaplasia
 - C. Squamous dysplasia
 - D. intestinal dysplasia

25.	Risk factor for adenocarcinoma oesophagus
	A. Barrett's Oesophagus

- B. Corrosive injury
- C. Achalasia Cardia
- D. All of the above

26. The consistently largest artery of stomach is

- A. Right gastric
- B. Left gastric
- C. Right Gastroepiploic
- D. Left Gastroepiploic

27. Highly selective vagotomy preserves

- A. Nerves of Latarjet
- B. Nerves of Kuntz
- C. Nerves of Mayo
- D. None of the above

28. Root of Mesentery is how long?

- A. 5 cms
- B. 15 cms
- C. 25 cm
- D. 35 cms

Commonest presentation of carcinoma reci	tum is
A. Diarrhoea	
B. Constipation	
C. Bleeding PR	
D. Feeling of incomplete defecation	
)
Haemorrhoids that have to be reduced mar	nually are?
A. Grade I	comi sol f.S.
B. Grade II	
C. Grade III	
D. Grade IV	
Jeen's Disease is also known as	
D. Aliai Fissure	
	A. Diarrhoea B. Constipation C. Bleeding PR D. Feeling of incomplete defecation Haemorrhoids that have to be reduced man A. Grade I B. Grade II

29. Constricting type of colonic carcinoma is seen in

A. Left colon

B. Right colon

D. Caecum

C. Transverse colon

33.	Treatment of strangulated Hernia is
	A. Observation
€.	B. Immediate surgery
	C. Manual reduction

- D. Analgesics
- 34. Hesselbach's triangle is bounded by the following except
 - A. Rectus Abdominis muscle
 - B. Transverse Abdominis Muscle
 - C. Inferior Epigastric artery
 - D. Inguinal Ligament
- 35. Kehr's Sign is seen in
 - A. Splenic injury
 - B. Liver injury
 - C. Renal Injury
 - D. Mesenteric Hepatoma
- 36. Portal triad is not formed by
 - A. Hepatic artery
 - B. Hepatic vein
 - C. Bile duct
 - D. Portal vein

38.	Mercedes Benz or Seagull Sign is seen in
	A. CBD Stones
	B. Renal Stones
	C. Gall stones
	D. Hydatid Cyst
39.	Grey turner sign is seen in
	A. Acute pyelonephritis
*	B. Acute cholecystitis
	C. Acute Pancreatitis
	D. Acute peritonitis
	HIS .
40.	Commonest presentation of Wilm's tumour is
	A. Hematuria
	B. Abdominal Lump
	C. Hydronephrosis
	D. Pain in Abdomen

37. Vitamin to be corrected in obstructive jaundice is

A. Vitamin K

B. Vitamin C

C. Vitamin D

D. Vitamin B12

41.	Thimble bladder is seen in	
	A. Schistosomiasis	
	B. Neurogenic Bladder	
	C. Tuberculosis	
	D. Ectopia vesicle	
42.	Lentiform OR lens-shaped hyper dense lesion on CT scan is se	en in
	A. Extradural Hematoma	
	B. Subdural Hematoma	
	C. Sub-arachnoid Hematoma	
	D. None	
43.	Most commonly used resuscitation formula in burns patient is	
	A. Wallace	
	B. Brooke's	
	C. Parkland	
	D. Barclay's	
44.	Air Embolism in Neurosurgery is most commonly seen in whi	ch position
	A. Sitting	
	B. Supine	

C. Trendelenburg

D. Left Lateral

- 45. Most commonly injured organ in underwater explosion is
 - A. Tympanic membrane
 - B. GIT
 - C. Lung
 - D. Liver
- 46. Toxic Megacolon is seen in
 - A. Carcinoma colon
 - B. Ulcerative colitis
 - C. Amoebic colitis
 - D. Gastrocolic fistula
- 47. Pulled up Caecum is seen in
 - A. Carcinoma colon
 - B. Carcinoid tumor
 - C. Ileocaecal Tuberculosis
 - D. Regional Enteritis
- 48. Inhalational agent of choice in children is
 - A. Isoflurane
 - B. Desflurane
 - C. Halothane
 - D. Sevoflurane

49.	Bruising over mastoid process following trauma is .		
	A. Battle sign		
	B. Boas sign		
	C. Courvoisier's sign		
	D. Ten Horn sign		
50.	Colour of fluorescein staining in corneal ulcer is		
	A. Yellow		
	B. Blue		
	C. Green		
	D. Royal Blue		
			54-20
Q.No	.2. Write short notes on any five of the following	.	5x4=20
I.	Raynaud's disease		
II.	Raynaud's disease Pre malignant lesions of the oral cavity		
	Pre malignant lesions of the oral cavity		
II.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast		
II.	Pre malignant lesions of the oral cavity		
II. III. IV.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast Rodent Ulcer		
II.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast		
II. III. IV.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast Rodent Ulcer		
II. IV. V.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast Rodent Ulcer Pheochromocytoma Normal wound healing		
II. III. IV.	Pre malignant lesions of the oral cavity Lymphatic drainage of breast Rodent Ulcer Pheochromocytoma		

- IX. Renal tuberculosis
- X. Fournier's Gangrene

Q.No.3. Explain in detail any two of the following.

2x15=30

- Classify Thyroid Cancers. Explain the clinical features, etiopathogenesis and management of Papillary Carcinoma of Thyroid.
- II. Write down the differential diagnosis of leg ulcers. Describe etiopathogenesis and management of diabetic ulcer.
- III. Describe etiology, clinical features, classification, investigation and treatment of gastric cancer.
- IV. Lower gastrointestinal bleeding.

SECTION-B (Gynaecology & Obs.)

Q.No.1. Multiple Choice Questions

50x2=100

- Foetal sex can be determined at which age?
 - A. 14 weeks
 - B. 16 weeks
 - C. 18 weeks
 - D. 20 weeks
- 2. Folic acid supplementation reduces the risk of?
 - A. Neural tube defect
 - B. Toxaemia of pregnancy
 - C. Down's syndrome
 - D. Placenta previa
- 3. Ligamentum teres is formed after
 - A. Obliteration of umbilical vein
 - B. Obliteration of the ductus venous
 - C. Obliteration of ductus arteriosus
 - D. Obliteration of the hypogastric artery
- 4. The clotting factor which is not increased in pregnancy?
 - A. Factor2
 - B. Factor7
 - C. Factor10
 - D. Factor11
- 5. The term placental sign denotes?
 - A. Alteration of FHR on pressing the head into the pelvis
 - B. Spotting on the expected date of period in early months of pregnancy
 - C. Permanent lengthening of the cord in third stage of labour
 - D. Slight gush of bleeding in third stage of labour

e.	Earliest detection of pregnancy by ultrasound is b
	A. Gestational sac
	B. Foetal node
	C. FSH
	 D. Foetal skeleton
	Ideal number of antenatal visits should be
	A. 6 to 8
	B. 7 to 9

- 8. Vaccine absolutely contraindicated in pregnancy
 - A. Hepatitis-B
 - B. Cholera vaccine
 - C. Rabies

D. 12 to 14

- D. Yellow fever
- 9. Following are the indications of early clamping except
 - A. Preterm delivery
 - B. Post-dated pregnancy
 - C. Birth asphyxia
 - D. Maternal diabetes
- 10. Living ligature of the uterus is
 - A. Endometrium
 - B. Middle layer of myometrium
 - C. Inner layer of myometrium
 - D. Perimetrium

- All of the following drugs are effective in cervical ripening during pregnancy except
 - A. Prostaglandin E2
 - B. Oxytocin
 - C. Progesterone
 - D. Misoprostol
- 12. Lochia in correct order is
 - A. Rubra, serosa, alba
 - B. Serosa, rubra, alba
 - C. Alba, serosa, rubra
 - D. Alba, mucosa, Serosa
- 13. In comparison to breast milk, colostrum has higher content of
 - A. Carbohydrates
 - B. Fat
 - C. Sodium
 - D. Potassium
- 14. Contraceptive method of choice in lactating mothers
 - A. Barrier method
 - B. Progesterone only pill
 - C. Oral contraceptive pills
 - D. Lactational amenorrhoea
- 15. All are the complications of formula fed baby over human milk fed baby except:
 - A. Necrotizing enterocolitis
 - B. Otitis media
 - C. Hypocalcemia
 - D. Vitamin K deficiency

- 16. The cause of postpartum blues is
 - A. Decreased estrogen
 - B. Decreased progesterone
 - C. Increased prolactin
 - D. Decreased estrogen and progesterone
- 17. Most common cause of first trimester abortions?
 - A. Chromosomal abnormalities
 - B. Syphilis
 - C. Rhesus isoimmunisation
 - D. Cervical incompetence
- A women presents with amenorrhoea of two months duration, lower abdominal pain, facial pallor, fainting and shock. Diagnosis is
 - A. Ruptured ovarian cyst
 - B. Ruptured ectopic pregnancy
 - C. Threatened abortion
 - D. Septic abortion
- 19. Snowstorm appearance is seen in USG of
 - A. Hydatiform mole
 - B. Ectopic pregnancy
 - C. Anencephaly
 - D. None of the above
- 20. Most common site of metastasis of choriocarcinoma in pregnancy
 - A. Lungs
 - B. Brain
 - C. Spine
 - D. Liver
- 21. Hydatiform is a disease of
 - A. Amnion
 - B. Chorion
 - C. Uterus
 - D. Udecidua

- 22. A positive Stallworthy sign is suggestive of
 - A. Twin pregnancy
 - B. Breech presentation
 - C. Vesicular mole
 - D. Low lying placenta
- 23. Placenta previa is characterized by all expect
 - A. Painless bleeding
 - B. Causeless bleeding
 - C. Recurrent bleeding
 - D. Presents after first trimester
- 24. In Bishop score everything is included except
 - A. Effacement of cervix
 - B. Dilatation of cervix
 - C. Station of head
 - D. Interspinal diameter
- 25. In ectopic pregnancy decidua is shed as
 - A. Decidua vera
 - B. Decidua basalis
 - C. Decidua capsularis
 - D. Decidua rubra
- 26. In which of the following heart disease maternal mortality during pregnancy is highest
 - A. Coarctation of aorta
 - B. AS
 - C. MS
 - D. Eisenmenger syndrome

- 27. Which of the following pelvic structure support the vagina except-
 - A. Perineal body
 - B. Pelvic diaphragm
 - C. Levator Ani Muscle
 - D. Infundibulopelvic ligament
- 28. Maximum function of corpus luteum occur-
 - A. At ovulation
 - B. Before ovulation
 - C. Days after ovulation
 - D. 8-9 Days after ovulation
- 29. Following are the features of inhibin except-
 - A. Non-steroidal water soluble protein
 - B. Secreted by Graafian follicle
 - C. Stimulates FSH secretion
 - D. Increase secretion of inhibin occur in PCOD
- 30. The cut-off point of serum Estrogen level for the diagnosis of ovarian failure-
 - A. 10 pg/ml
 - B. 20 pg/ml
 - C. 30 pg/ml
 - D. 40 pg/ml
- 31. All of the following associated with PCOD except
 - A. Ovarian carcinoma
 - B. Endometrial carcinoma
 - C. Insulin resistance
 - D. Osteoporosis

- 32. Rokitansky Kuster Hauser syndrome is associated with-
 - A. Ovarian agenesis
 - B. Absent fallopian tube
 - C. Vaginal atresia
 - D. Bicornuate uterus
- 33. First sign of puberty is
 - A. Breast budding
 - B. Growth spurt
 - C. Menarche
 - D. Pubic & axillary hair growth
- 34. Clue cells are seen in
 - A. Bacterial vaginosis
 - B. Candidiasis
 - C. Trichomoniasis
 - D. Gonorrhea
- 35. Strawberry vagina seen in -
 - A. Candidiasis
 - B. Bacterial vaginosis
 - C. Trichomonas vaginalis
 - D. Herpes
- 36. Postpartum vesicovaginal fistula best repaired after-
 - A. At 6 week
 - B. At 8 week
 - C. At 3 months
 - D. At 6 months
- 37. Kegel exercise should be begin
 - A. Immediately after delivery
 - B. 24 hours after delivery
 - C. 3 weeks after delivery
 - D. 6 weeks after delivery

38.	According to WHO criteria minimu	um normal sperm count is
	B. 15 million/ml	
	C. 40 million/ml	
	D. 60 million/ml	
39.	Best investigation to assess tubal pa	atency-
	A. HSG	
	B. Laparotomy	
	C. Laparoscopic chromotubation	
	D. Rubin test	

- 40. Pearl index indicates-
 - A. Malnutrition
 - B. Population
 - C. Contraception failure
 - D. Low birth weight
- 41. Rise in body temperature after ovulation is due to-
 - A. FSH
 - B. LH
 - C. Estrogen
 - D. Progesterone
- 42. Red degeneration in uterine fibroid is most common in
 - A. First trimester
 - B. Second trimester
 - C. Third trimester
 - D. Puerperium
- 43. All of following drugs decrease vascularity of fibroid except -
 - A. GnRH agonist
 - B. Danazol
 - C. Mifepristone
 - D. Clomiphene citrate

- 44. Pain in endometriosis correlates withA. Depth of invasion
 B. CA 125
 C. Multiple sites
 D. Stage of disease
- All of the following are known risk factor of endometrial carcinoma except A. Obesity
 - B. Family history
 - C. SE of HRT
 - D. Early menopause
- 46. All are seen in gestational diabetes except:
 - A. Previous macrosomic baby
 - B. Obesity
 - C. Malformation
 - D. Polyhydroamnios
- 47. 30 Year old primi female with 36 week of pregnancy with BP160/110 and urinary albumin is 3+ and platelet count 80000/cmm. What will be the management except?
 - A. MgSO₄
 - B. Enalapril
 - C. Labetalol
 - D. Urgent LSCS
- 48. Earliest sign of MgSO₄ toxicity:
 - A. Cardiac arrest
 - B. Anuria
 - C. Respiratory depression
 - D. Depression of deep tendon reflex

- Anti-tubercular drug contra indicated in pregnancy:
 - A. Rifampicin
 - B. INH
 - C. Streptomycin
 - D. Ethambutol
- 50. Non immune hydrops foetalis is seen in all of the following condition except:
 - A. Parvovirus
 - B. Rh-incompatibility
 - C. Chromosomal anomaly
 - D. Thalassemia

Write short notes on any five of the following. 4x5=20 Q.No.2.

- Write a short note on Hyperemesis gravidarum
- Discuss the Management of Transverse lie. II.
- Enumerate the causes of AUB III.
- Describe the Causes of secondary infertility IV.
- Write a short note on Screening of Ca. cervix V.
- Write a short note of nulliparous prolapse VI.
- Write a note on Postpartum intrauterine contraceptive device VII.
- Write in brief about Methods of 2nd trimester abortion and the prerequisites VIII.
 - What are the OCO's available in National Family Welfare Programme and IX. other OCP's available in the market?
 - How will you manage the case of PPH?

- Define Hypertensive disorder of pregnancy (HDP). Give classification of HDP and management of eclampsia.
- II. Answer the questions given below:
 - a. Mention all the type of genital tract infections with their causative organisms.
 - b. Elaborate the sexually transmitted infections. How will you manage a case of HIV positive pregnant woman in labour?
- III. What are the different methods of permanent sterilization in female? Explain Modified Pomeroy's method of minilap sterilization and Laparoscopic sterilization.
- IV. Define anaemia in pregnancy. Classify and write the management of the patient with severe anaemia at term pregnancy.