

MIZORAM PUBLIC SERVICE COMMISSION

**TECHNICAL COMPETITIVE EXAMINATIONS FOR RECRUITMENT TO THE POST OF
GRADE-II OF MIZORAM HEALTH SERVICE (SPECIALIST SUB-CADRE)
UNDER HEALTH & FAMILY WELFARE DEPARTMENT,
GOVERNMENT OF MIZORAM. OCTOBER, 2022**

**PAPER - III (TECHNICAL)
GENERAL SURGERY DEPARTMENT**

Time Allowed : 3 hours

Full Marks : 200

All questions carry equal marks of 2 each.

Attempt all questions.

1. Reflux esophagitis is prevented by-
 - (a) Long intra-abdominal esophagus
 - (b) Increased intra-abdominal pressure
 - (c) Right crus of diaphragm
 - (d) Increased intra-thoracic pressure
2. Best test to diagnose gastro-esophageal reflux disease and quantify acid output is-
 - (a) Esophagogram
 - (b) Endoscopy
 - (c) Manometry
 - (d) 24 hr pH monitoring
3. In Barrett's esophagus true is-
 - (a) Metaplasia
 - (b) Peptic stricture
 - (c) Para-esophageal hernia predisposes
 - (d) Squamous carcinoma
4. Mallory Weiss syndrome is partial thickness rupture, occurs at-
 - (a) Gastric cardia
 - (b) Esophagus mucosa
 - (c) Gastro-esophageal junction
 - (d) Gastro-duodenal junction
5. Heller's operation is done for-
 - (a) Achalasia cardia
 - (b) Pyloric stenosis
 - (c) Peptic ulcer
 - (d) CA Esophagus
6. During esophagoscopy, the area in the esophagus mostly perforated is-
 - (a) At the aortic arch
 - (b) Mid esophagus
 - (c) At cricopharyngeus muscle
 - (d) At esophago-gastric junction
7. Artery to bleed in duodenal ulcer hemorrhage-
 - (a) Splenic artery
 - (b) Gastroduodenal artery
 - (c) Left gastric artery
 - (d) Superior mesenteric artery
8. Surgery of choice for chronic duodenal ulcer is
 - (a) Vagotomy + antrectomy
 - (b) Total gastrectomy
 - (c) Truncal vagotomy + pyloroplasty
 - (d) Highly selective vagotomy

9. Dumping syndrome is due to-
- (a) Diarrhoea
 - (b) Presence of hypertonic content in small intestine
 - (c) Vagotomy
 - (d) Reduced gastric capacity
10. Duodenal blow out following Billroth gastrectomy most commonly occurs on which day-
- (a) 2nd day
 - (b) 4th day
 - (c) 6th day
 - (d) 12th day
11. Commonest site of peptic ulcer perforation
- (a) Anterior aspect of the 1st part of duodenum
 - (b) Posterior aspect of the 1st part of duodenum
 - (c) Greater curvature of the stomach
 - (d) Anterior aspect of 2nd part of duodenum
12. What complication commonly occurs in anterior duodenal ulcer-
- (a) Bleeding
 - (b) Penetration
 - (c) Perforation
 - (d) Stricture formation
13. The most sensitive test to detect GI bleeding is-
- (a) Selective angiography
 - (b) Radiolabelled Erythrocyte scanning
 - (c) I131 Fibrinogen studies
 - (d) Stool for occult blood
14. Commonest cause of pyogenic liver abscess-
- (a) Biliary sepsis
 - (b) Biliary colic
 - (c) Appendicitis
 - (d) Sigmoid diverticulitis
15. Diagnosis of Hydatid disease is by-
- (a) Biopsy
 - (b) X-ray
 - (c) Casoni test
 - (d) Serum examination
16. Child's criteria include all EXCEPT-
- (a) Bilirubin
 - (b) Nutrition
 - (c) Albumin
 - (d) Encephalopathy
17. A surgeon excises a portion of liver to the left of the attachment of the falciform ligament. The segments that have been resected are-
- (a) Segment 1 to 4
 - (b) Segment 1 and 4b
 - (c) Segment 2 and 3
 - (d) Segment 2 to 4
18. Budd Chiari syndrome is due to thrombosis of-
- (a) Infra renal IVC
 - (b) Renal part of IVC
 - (c) Superior mesenteric vein thrombosis
 - (d) Hepatic veins
19. Liver biopsy is done through 8th ICS mid-axillary line to avoid-
- (a) Lung
 - (b) Pleural cavity
 - (c) Sub-diaphragmatic space
 - (d) Gall bladder
20. Which one of the following is not a treatment of gastroesophageal variceal hemorrhage-
- (a) Sclerotherapy
 - (b) Sengstaken tube
 - (c) Transjugular intrahepatic portocaval shunt
 - (d) Gastric freezing
21. The Couinaud's segmental nomenclature is based on the position of the-
- (a) Hepatic veins and portal vein
 - (b) Hepatic veins and biliary ducts
 - (c) Portal vein and biliary ducts
 - (d) Portal vein and hepatic artery

22. Vascular inflow occlusion of the liver is by-
- (a) Clamping the hepatic artery
 - (b) Occluding the portal vein
 - (c) Clamping the hepatic vein
 - (d) The Pringle manoeuvre
23. Normal portal vein pressure is-
- (a) <3 mmHg
 - (b) 3-5 mmHg
 - (c) 5-10 mmHg
 - (d) 10-12 mmHg
24. True about Choledochal cyst is-
- (a) Always extrahepatic
 - (b) Treatment is cystojejunostomy
 - (c) Excision is ideal treatment
 - (d) Drainage is treatment of choice
25. The commonest site of obstruction in Gall stone ileus is-
- (a) Proximal ileum
 - (b) Distal ileum
 - (c) Ileocecal junction
 - (d) Transverse colon
26. 'Charcot' triad is-
- (a) Fever, pain, vomiting
 - (b) Fever, stone, jaundice
 - (c) Fever, pain, jaundice
 - (d) Gall stone, vomiting, jaundice
27. 5 days after CBD surgery there is a small leak. What will be the best treatment-
- (a) Ultrasound guided aspiration
 - (b) ERCP and stenting
 - (c) Re-exploration and hepaticojejunostomy
 - (d) Re-exploration and primary repair
28. Most common site of cholangiocarcinoma-
- (a) Distal biliary duct
 - (b) Hilum
 - (c) Intrahepatic duct
 - (d) Multifocal
29. All are component of Saint's triad EXCEPT-
- (a) Renal stones
 - (b) Hiatus hernia
 - (c) Diverticulosis coli
 - (d) Gall stones
30. Most common cause of biliary stricture is-
- (a) CBD stone
 - (b) Trauma/ Iatrogenic
 - (c) Asiatic cholangitis
 - (d) Congenital
31. After exploration of CBD, the T-tube is removed on which of the following days-
- (a) 3rd post-op day
 - (b) 4th post-op day
 - (c) 12th post-op day
 - (d) 6th post-op day
32. Cholesterol gall stones are due to-
- (a) Decreased motility of Gall bladder
 - (b) Hypo-secretion of bile salts
 - (c) Hypercholesterolemia
 - (d) All of the above
33. A retained stone impacted in distal CBD is seen on T-tube cholangiogram. What is the best management of stone-
- (a) Dissolution therapy
 - (b) Operative removal
 - (c) Endoscopic sphincterotomy and stone extraction
 - (d) No active treatment is required
34. Most common type of choledochal cyst-
- (a) Type 1
 - (b) Type 2
 - (c) Type 3
 - (d) Type 6

35. A fifty year old woman presents with two year history of recurrent abdominal pain with radiation to her back. Pain is severe and refractory to simple analgesics. Ultrasound and CECT confirm the diagnosis and show a dilated pancreatic duct. Which of the following is the likely recommended surgical procedure of choice-
- (a) Whipple's procedure (b) Longitudinal pancreatico-jejunostomy
(c) Vagotomy with antrectomy (d) Vagotomy and gastrojejunostomy
36. 'Chain of lakes' appearance seen in-
- (a) Acute pancreatitis (b) Chronic pancreatitis
(c) Carcinoma pancreas (d) Strawberry gall bladder
37. Which of the following is the most common site for carcinoma of pancreas-
- (a) Head (b) Ampulla
(c) Body (d) Tail
38. The following condition is indicative of surgery in acute pancreatitis-
- (a) Acute fluid collection (b) Persistent pseudocyst pancreas
(c) Pancreatic abscess (d) Infective pancreatic necrosis
39. Incidence of malignancy is maximum in-
- (a) Villous adenoma (b) Juvenile polyps
(c) Hyperplastic polyps (d) Tubular adenoma
40. In children most common type of polyp is-
- (a) Juvenile polyp (b) Solitary polyp
(c) Familial polyposis (d) Multiple adenomatous polyp
41. Most important prognostic factor for colorectal carcinoma is-
- (a) Site of lesion (b) Stage of lesion
(c) Age of patient (d) Lymph node status
42. Carcinoma of right colon presents as-
- (a) Anemia (b) Alternate constipation and diarrhoea
(c) Bleeding PR (d) Presents with obstruction
43. A patient comes with rectal carcinoma situated 6 cm above dentate line with no nodal metastasis. Treatment of choice will be-
- (a) Anterior resection (b) Abdomino-perineal resection
(c) Radiotherapy (d) Hartman's procedure
44. Which is not a feature of pilonidal sinus-
- (a) Branching tracts are common (b) Recurrence is uncommon
(c) Bony involvement is uncommon (d) Seen in drivers
45. Rectal polyps usually present with-
- (a) Obstruction (b) Perforation
(c) Bleeding (d) Malignant change
46. 25 year old patient presented with mass in right iliac fossa. Which after laparotomy was found to be carcinoid of 2.5 cm in diameter. What will be the next step in management?-
- (a) Segmental resection (b) Appendectomy
(c) Right hemicolectomy (d) Do yearly 5 HIAA assay

47. A 25 year old man presents with 3 days history of pain in the right lower abdomen and vomiting. Patient's general condition is satisfactory and clinical examination reveals a tender lump in the right iliac fossa. The most appropriate management in this case would be-
- (a) Immediate appendectomy (b) Exploratory laparotomy
(c) Oschner Sherren regimen (d) External drainage
48. A patient gives chronic history of diarrhea and blood in stool presents with multiple fistulae in the perineum and multiple strictures in small intestine. The diagnosis is-
- (a) Crohn's disease (b) Radiation enteritis
(c) Ulcerative colitis (d) Ischaemic bowel disease
49. Transmural inflammation with skip lesions in colon are characteristic of-
- (a) Regional ileitis (Crohn's disease) (b) Ischemic colitis
(c) Ulcerative colitis (d) Non specific colitis
50. Pseudomembranous colitis is caused by-
- (a) Cl. perfringens (b) Cl. Difficile
(c) Cl. Oedematus (d) Sl. Septicum
51. A blood stained discharge from the nipple indicates-
- (a) Breast abscess (b) Fibroadenoma
(c) Duct papilloma (d) Fat necrosis of breast
52. A 25 year old female complains of discharge of blood from a single duct in her breast. The most appropriate treatment is-
- (a) Radical excision (b) Microdochoectomy
(c) Radical mastectomy (d) Biopsy to rule out carcinoma
53. Use of tamoxifen in carcinoma of breast patients DOES NOT lead to the following side effects-
- (a) Thromboembolic events (b) Endometrial carcinoma
(c) Cataract (d) Cancer in opposite breast
54. All of the following are used for reconstruction of breast EXCEPT-
- (a) Transverse rectus abdominis myocutaneous flap (b) Latissimus dorsi myocutaneous flap
(c) Pectoralis major myocutaneous flap (d) Transversus rectus abdominis free flap
55. Triple assessment for carcinoma 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
56. Risk factors for Ca. breast are all EXCEPT-
- (a) Nulliparity (b) Multiparity
(c) Family history (d) BRCA1 mutation
57. Breast cancer which is multicentric and bilateral-
- (a) Ductal (b) Lobular
(c) Mucoid (d) Colloid
58. 'Peau D' orange appearance of the mammary skin is due to-
- (a) Intra-epithelial cancer (b) Sub-epidermal cancer
(c) Lymphatic permeation (d) Vascular embolization

59. Secondary deposits from carcinoma breast is commonest in-
- (a) Lung
 - (b) Liver
 - (c) Brain
 - (d) Bone
60. All of the following are associated with Thyroid storm, EXCEPT-
- (a) Surgery for thyroiditis
 - (b) Surgery for thyrotoxicosis
 - (c) Stressful illness in thyrotoxicosis
 - (d) I131 therapy for thyrotoxicosis
61. Complications of total thyroidectomy include all EXCEPT-
- (a) Hoarseness
 - (b) Airway obstruction
 - (c) Hemorrhage
 - (d) Hypercalcemia
62. Hypoparathyroidism following thyroid surgery occurs within-
- (a) 24 hours
 - (b) 2-5 days
 - (c) 7-14 days
 - (d) 2-3 weeks
63. In postoperative room after thyroid surgery, patient developed sudden respiratory distress, dressing was removed and it was found to be slightly blood stained and wound was bulging. What will be the first thing to be done-
- (a) Tracheostomy
 - (b) Cricothyroidotomy
 - (c) Laryngoscopy and intubation
 - (d) Remove the stitch and take the patient to O.T
64. Recurrent laryngeal nerve is in close association with-
- (a) Superior thyroid artery
 - (b) Inferior thyroid artery
 - (c) Middle thyroid vein
 - (d) Superior thyroid vein
65. Lymph node metastasis commonest in which carcinoma thyroid-
- (a) Follicular
 - (b) Papillary
 - (c) Anaplastic
 - (d) Medullary
66. All of the following regarding papillary carcinoma thyroid is true EXCEPT-
- (a) Multicentric origin
 - (b) Secondaries to lymph nodes
 - (c) Slowly growing
 - (d) Bony metastasis in early stage
67. Most common cause of thyroiditis is-
- (a) Reidl's thyroiditis
 - (b) Sub acute thyroiditis
 - (c) Hashimoto's thyroiditis
 - (d) Viral thyroiditis
68. Which of the following is TRUE-
- (a) Colloid goiter mostly presents as hyperthyroidism
 - (b) Thyroid storm, the clinical features are primarily due to increased thyroxine
 - (c) Excess calcium intake can lead to hyperthyroidism
 - (d) Goiter more than 5 percent of population is endemic goiter
69. Complications of therapy with radioactive iodine includes-
- (a) Thyroid malignancy
 - (b) Hypothyroidism
 - (c) Leukemia
 - (d) All of the above
70. Treatment of choice in cold nodule of thyroid-
- (a) Subtotal thyroidectomy
 - (b) I131
 - (c) Wait and watch
 - (d) Hemithyroidectomy

71. What will be the diagnosis of Siama, who is 45 year old male with history of chronic smoking and pain in lower limb due to blockage of femoral artery-
- (a) Thromboangitis obliterans (b) Atherosclerosis
(c) Embolism (d) Arteritis
72. Which one is NOT true regarding Buerger's disease-
- (a) Men are usually involved (b) Occurs below 50 years of age
(c) Smoking is predisposing factor (d) Veins and nerves are never involved
73. A patient presented with local gigantism of the leg and increased pulsations of the lower limb veins. Most probable diagnosis is-
- (a) Tumor
(b) AV fistula
(c) Varicose veins
(d) Incompetence of the saphenofemoral junction
74. Allen's test is useful in evaluating-
- (a) Thoracic outlet compression (b) Presence of cervical rib
(c) Integrity of palmar arch (d) Digital blood flow
75. Intermittent claudication is defined as-
- (a) Pain in muscle at rest only (b) Pain in muscle on first step
(c) Pain in muscle on exercise only (d) Pain in muscle on last step
76. Preferred material for femoro-popliteal bypass-
- (a) Dacron (b) PTFE
(c) Saphenous vein (d) Gortex
77. Lumbar sympathectomy is indicated in-
- (a) Intermittent claudication (b) Varicose ulcer
(c) Buerger's disease (d) Raynaud's disease
78. Fogarty's catheter is used for-
- (a) Drainage of urinary bladder (b) Parenteral hyperalimentation
(c) Removal of embolus from blood vessels (d) Ureteric catheterization
79. Virchow's triad includes all of the following EXCEPT-
- (a) Venous stasis (b) Injury to veins
(c) Blood hypercoagulability (d) Venous thrombosis
80. Post operative pulmonary thromboembolism is seen in all, EXCEPT-
- (a) Tall and thin man (b) Obese male
(c) Pregnant female (d) Estrogen therapy
81. DVT, investigation of choice is-
- (a) Doppler (b) Plethysmography
(c) Venography (d) X-ray
82. Brodie-Trendelenburg test is positive in-
- (a) Sapheno-femoral incompetence (b) Perforator competence above knee
(c) Deep vein incompetence (d) Perforator competence below knee

83. Surgery in varicose veins is NOT attempted in presence of-
- (a) Deep vein thrombosis
 - (b) Multiple incompetent perforators
 - (c) Varicose veins with leg ulcer
 - (d) All of the above
84. Injection sclerotherapy for varicose veins is by using-
- (a) 3% Normal saline
 - (b) Absolute alcohol
 - (c) 70% alcohol
 - (d) Ethanolamine oleate
85. A 60 years old male has been operated for carcinoma of caecum and right hemicolectomy has been done. On the fourth post-operative day, the patient develops fever and pain in the legs. The most important clinical entity one should look for is-
- (a) Urinary tract infection
 - (b) Intravenous line infection
 - (c) Chest infection
 - (d) Deep vein thrombosis
86. Which among the following is the most common neoplasm of salivary gland-
- (a) Pleomorphic adenoma
 - (b) Adenocystic carcinoma
 - (c) Mucoepidermoid
 - (d) Mixed tumor
87. Most common tumor of parotid gland is-
- (a) Squamous cell carcinoma
 - (b) Pleomorphic adenoma
 - (c) Adenolymphoma
 - (d) None of the above
88. Treatment of choice for pleomorphic adenoma
- (a) Superficial parotidectomy
 - (b) Radical parotidectomy
 - (c) Enucleation
 - (d) Radiotherapy
89. A Warthin's tumor is-
- (a) An adenolymphoma of parotid gland
 - (b) A pleomorphic adenoma of parotid
 - (c) A carcinoma of the parotid
 - (d) A carcinoma of submandibular salivary gland
90. Commonest salivary gland to get stones-
- (a) Parotid
 - (b) Submandibular
 - (c) Minor salivary gland
 - (d) Sublingual
91. In surgery of submandibular salivary gland, nerve NOT involved-
- (a) Hypoglossal
 - (b) Glossopharyngeal
 - (c) Facial
 - (d) Lingual
92. Which of the following is NOT a landmark for facial nerve during parotid surgery?-
- (a) Digastric muscle
 - (b) Inferior belly of omohyoid
 - (c) Tragal pointer
 - (d) Retrograde dissection of distal branch
93. Which of the following group constitute Frey's syndrome-
- (a) Hyperhidrosis, enophthalmos and miosis
 - (b) Anhidrosis, enophthalmos and miosis
 - (c) Redness and sweating over the auriculotemporal during meal
 - (d) Pain over the distribution of the auriculotemporal nerve during meal
94. One of the following is an example of painless midline swelling-
- (a) Branchial cyst
 - (b) Thyroglossal cyst
 - (c) Cystic hygroma
 - (d) Carotid body tumor

- 95.** The commonest site of Branchial cysts is-
- (a) Upper 1/3rd of the SCM
 - (b) Lower 1/3rd of the SCM
 - (c) Upper 2/3rd of the SCM
 - (d) Lower 2/3rd of the SCM
- 96.** In the management of thyroglossal cyst-
- (a) Central portion of hyoid excised
 - (b) Sternothyroid muscle dissected
 - (c) Isthmusectomy with subtotal thyroidectomy
 - (d) Strap muscle of neck are dissected
- 97.** Structures preserved in radical dissection of the neck-
- (a) Internal jugular vein
 - (b) Sternomastoid
 - (c) Submandibular gland
 - (d) Vagus nerve
- 98.** Sistrunk's operation is used in-
- (a) Parotid tumor
 - (b) Branchial cyst
 - (c) Thyroglossal cyst
 - (d) Branchial fistula
- 99.** Adson's test is positive in-
- (a) Cervical rib
 - (b) Cervical spondylosis
 - (c) Cervical fracture
 - (d) Cervical dislocation
- 100.** Radical dissection of neck includes all EXCEPT-
- (a) Cervical lymph nodes
 - (b) Sternocleidomastoid
 - (c) Phrenic nerves
 - (d) Internal jugular vein

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