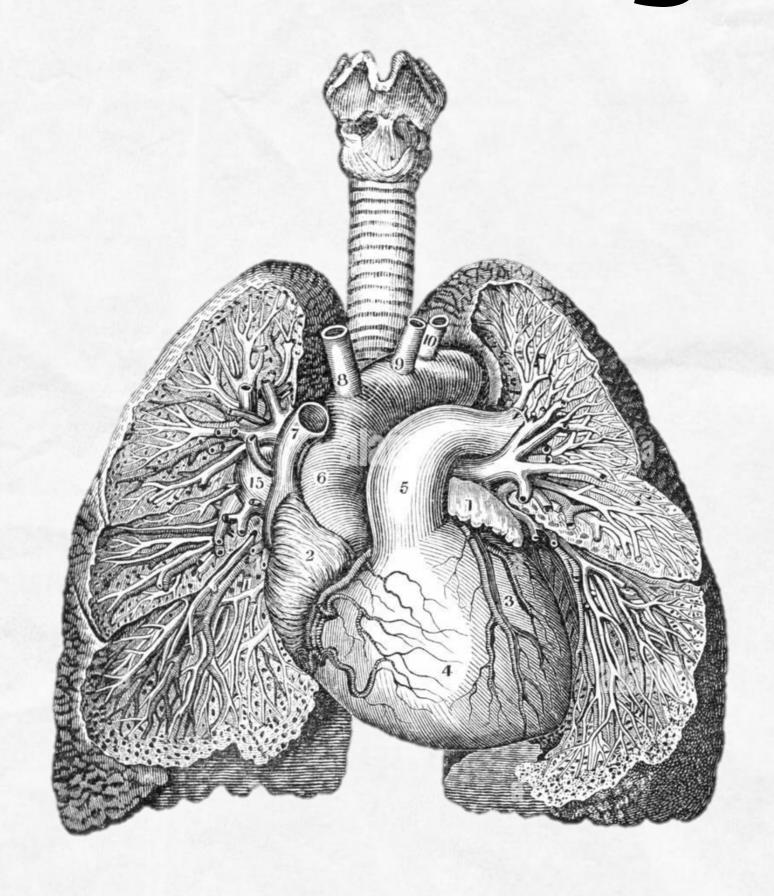
# General surgery



Cardio-thoracic rotation - Past papers

Done by: Malek Abu Rahma

### 1. Which of the following is the most appropriate statement regarding chest trauma:

- A) 25% of trauma mortalities are related to the chest.
- B) most patients with chest trauma will end up needing a thoracotomy.
- C) tracheal and bronchial trauma are repaired via a median sternotomy.
- D) continuous bleeding of 50 ml/hr requires a thoracotomy.

**ANSWER: A** 

#### 2. All are causes of persistent decrease in CO after cardiac surgery except:

- A) poor myocardial function
- B) cardiac tamponade
- C) Hypovolemia
- D) Bleeding
- E) Alkalosis

**ANSWER: E** 

#### 3. PVD?

- A) most have intermittent claudication
- B) asx have same survival rate as general population
- C) rest pain and intermittent claudication have different natural hx
- D) Normal ABI excludes significant disease

**ANSWER: C** 

#### 4. What is true about fetal circulation?:

- A) Functional closure of foramen ovale occurs within 24hrs
- B) Ductus arteriosus continues to shunt blood from Rtto Lt after birth
- C) Umbilical artery is a branch of common iliac artery (it's a branch of internal iliac)
- D) the pulmonary artery resistance decreases after closure of the ductus arteriosus
- E) Low O2 tension is associated with closure of PDA

**ANSWER: D** 

#### 5. Wrong about CHD:

- A) In TOF: VSD and RVH
- B) In TOF: pulmonary artery stenosis and overridingaorta.
- C) TOF is due to aorticopulmonary membrane defect

**ANSWER: C** 

- 6. Which factor is the most associated with symptomatic PVD:
- A) HTN
- B) DM

**ANSWER: B** 

- 7. Not part of the SIRS criteria:
- A) Temperature < 36
- B) HR >90
- C) WBC > 12000 or < 4000
- D) RR>8 or PaCO2 >23mmHg
- E) Cell bands > 10%

**ANSWER: D** 

- 8. Pt has inappropriate words, open eyes in response to painful stimulus, flex limbs in response to painful stimulus. Find his GCS:
- A)9
- B)8
- C) 7

**ANSWER: A** 

#### 9. Wrong about compartment syndrome:

- A) Fasciotomy of all affected compartments
- B) Absent pulse is an early sign

**ANSWER: B** 

#### 10. wrong about critical limb ischemia

- A) mostly are revascularized
- B) worse prognosis than intermittent claudication
- C) amputation is occasionally the only choice
- D) Majority ends with amputation, or become severely diseased in 12 months follow up

**ANSWER: D** 

#### 11. most malignant feature in lung cancer:

- A) no change on CXR after 5 months
- B) speculated appearance

**ANSWER: B** 

#### 12. most common lung cancer:

- A) metastases
- B) small cell carcinoma in smokers
- C) squamous cell carcinoma in smokers
- D) bronchogenic adenoma
- E) peripheral adenocarcinomas in non-smokers

**ANSWER: A** 

- 13. Which of the following has the greatest impact on the physiology of tetralogy of Fallot?
- A) The size of the ASD.
- B) The size of the VSD.
- C) The degree of pulmonary stenosis.
- D) The amount of aortic overriding.

**ANSWER: C** 

- 14. Which of the following are the most frequent complications of intra-aortic balloon counter pulsation?
- A) Stroke.
- B) Limb ischemia.
- C) Arrhythmias.
- D) Aortic thrombosis

**ANSWER: B** 

- 15. A 55-year-old woman gives a history of tiredness, aching, and a feeling of heaviness in the left lower leg for the past 3 months. These symptoms are relieved by leg elevation. She is also awakened frequently by calf and foot cramping, which is relieved by leg elevation, walking, or massage. On physical examination there are superficial varicosities, nonpitting edema, and a slightly painful, 2 cm. diameter superficial ulcer 5 cm. above and behind the left medial malleolus. What is the most appropriate diagnosis?
- A) Isolated symptomatic varicose veins.
- B) Superficial lymphatic obstruction.
- C) Deep venous insufficiency
- D) Arterial insufficiency
- E) E. Incompetent perforating veins

ANSWER: C\*

- 16. Revasculirization surgery is indicated in all of the following cases except:
- A) Claudication
- B) ischemic neuropathy
- C) rest pain
- D) ulcer
- E) gangrene

17. "definitive" to show transection of (forgot the vessel) after trauma?

- A) CT
- B) CXR
- C) aortogram/angiogram

**ANSWER: A** 

#### 18. Lymphedema, false:

- A) filariasis is the most common cause of lymph edema worldwide
- B) lymphedema praecox is most common primary lymphedema
- C) best viewed by lymphogram
- D) weight loss can help to improve lymphedema in obese pt
- E) all cases must be managed surgically

**ANSWER: E** 

#### 19. What supports the use of synthetic valve over biological valve:

- A) A patient with thrombophilia
- B) 30 year old female willing to get pregnant
- C) 70 year old co morbid male
- D) 30 year old healthy male

**ANSWER: D** 

- 20. most common etiology of thoracic aortic aneurysm:
- A) HTN
- B) Atherosclerosis
- C) Cystic medial necrosis
- D) Marfan

#### 21. most common pericardial tumor is:

- A) Metastatic bronchogenic cancer
- B) Lymphoma
- C) mesothelioma

**ANSWER: A** 

#### 22. which of the following is true regarding venous circulation:

- A) Muscle contraction play no role in venous return
- B) The common iliac veins has valves
- C) The greater saphenous vein joins the femoral vein to become the common femoral vein
- D) In healthy person, venous pressure increases with walking
- E) The perforating veins in the leg directs the flow from the deep to superficial system

**ANSWER: D** 

- 23. A 68 year old man sustains a myocardial infarct resulting from thrombotic occlusion at the origin of the left circumflex artery. Cardiac catheterization demonstrates that the patient has a left dominant coronary circulation. In which of the following areas of the heart has ischemic necrosis most likely occurred?
- A) Apex of left ventricle and anterior portion of septum
- B) Lateral left ventricular wall and posterior portion of septum
- C) Lateral wall of the left ventricle only
- D) Posterior portion of the septum only
- E) Right ventricular wall

**ANSWER: B** 

#### 24. The following patient is best treated with coronary artery bypass grafting (CABG):

- A) A 60-year-old man with class II angina, 75% proximal right coronary artery lesion, and normal ventricular function.
- B) A 60-year-old man with unstable angina, three-vessel disease, and an ejection fraction of 35%.
- C) A 60-year-old non-diabetic man with class III angina symptoms and focal discrete lesions in the midright coronary artery and mid-left circumflex artery.
- D) A 60-year-old man with diabetes, class IV angina, 75% mid left anterior descending and 75% proximal right coronary artery obstruction, and left ventricular ejection fraction of 60%.
- E) A 60 year old man, non-diabetic, with isolated 40% mid left main stem disease

- 25. Which of the following has the highest relative risk of developing Venous Thromboembolism:
- A) Oral contraceptive use.
- B) Heterozygous carrier of FVL.
- C) Antiphospholipid syndrome.
- D) Prothrombin gene mutation.
- E) Heterozygous protein C deficiency

**ANSWER: C** 

- 26. Which of the following does not describe intermittent claudication?
- A) Is elicited by reproducible amount of exercise.
- B) Abates promptly with rest.
- C) Is often worse at night.
- D) May be an indication for bypass surgery.
- E) May improve with time

**ANSWER: C** 

- 27. A patient undergoes left pneumonectomy for lung ca. 5 days after the surgery, he has fever and cough with copious amount of sputum. CXR showed air fluid level in the post-pneumonectomy space. What is the best next step?
- A) Pleural fluid analysis and culture
- B) Chest drainage
- C) Thoracotomy
- D) Sputum cultures and start antibiotics

**ANSWER: A** 

- 28. acute lower limb ischemia (The embolus was in the common femoral artery and the patient presented with weak sensation of 5 hour-duration.) best management:
- A) IV heparin
- B) Embolectomy
- C) Aorto-femoral bypass
- D) femero-femoral bypass

#### 29. Wrong about DVT:

- A) pt needs admission before starting the treatment
- B) pt may have PE without any symptoms
- C) It's important to assess whether it was provoked or Unprovoked
- D) Level of DVT affects your management
- E) You should not delay treatment till you do the u/s

**ANSWER: A** 

#### 30. Most common cause of death at site of accident is:

- A) Vascular injury
- B) Thoracic injury
- C) CNS injury

**ANSWER: A** 

- 31. Sepsis with organ failure and persistent hypotension is the definition of:
- A) Septic shock
- B) SIRS
- C) Severe sepsis
- D) MODS

**ANSWER: A** 

#### 32. P50 for a male with normal [Hb]:

- A) 15 mmHg
- B) 25 mmgh
- C) 35 mmgh
- D) 40 mmgh

#### 33. Female with DVT. Wrong about treatment:

- A) admission
- B) she may have PE without signs
- C) level of DVT determination would affect the management
- D) need to determine whether it is provoked or unprovoked
- E) good treatment reduce recurrence and post thrombotic syndrome

**ANSWER: A** 

- 34. Clinical picture of pneumothorax (RTA, SOB, patent airway, hyper resonance and decreased breath sounds on right). What is the most appropriate next step?
- A) Needle thoracotomy
- B) Intubation and ventilation
- C) IV access
- D) CXR
- E) Lavage

**ANSWER: A** 

- 35. the complication with worst prognosis of aortic stenosis:
- A) congestive heart failure
- B) syncope
- C) angina

**ANSWER: A** 

- 36. The congenital coronary lesion most likely to cause death in infancy is:
- A) Coronary artery fistula.
- B) Origin of the left coronary artery from the pulmonary artery.
- C) Origin of the right coronary artery from the pulmonary artery.
- D) Congenital coronary aneurysm...

- 37. The atrial septal defect (ASD) most commonly associated with partial anomalous pulmonary venous return (PAPVR) is:
- A) Sinus venosus defect.
- B) Ostium primum defect.
- C) Complete atrioventricular (AV) canal defect.
- D) Coronary sinus defect.

**ANSWER: A** 

- 38. phlegmasia alba dolens, false:
- A) require treatment with LMWH
- B) absent distal pulses
- C) limb is blue in color

**ANSWER: C** 

- 39. Most likely ASD type with partial anomalous pulmonary venous return:
- A) coronary sinus venous
- B) septum secondum
- C) septum premium
- D) AV canal malformation

**ANSWER: A** 

- 40. Most likely sign indicating pneumothorax:
- A) weak lung sounds
- B) dull percussion note
- C) shift of mediastinum to same side
- D) crepitations

**ANSWER: A** 

#### 41. Popliteal artery aneurysm, true:

- A) 70% bilateral
- B) most common peripheral anurysm?
- C) likely to present with compression on near nerve and vessels
- D) most commonly present with pregnancy
- E) if pt have abdominal aortic aneurysm he has 50% risk of having popliteal aneurysm

**ANSWER: B** 

#### 42. doesn't improve claudication:

- A) Exercise
- B) Smoking cessation
- C) Aspirin
- D) Bypass
- E) Angioplasty

**ANSWER: C** 

#### 43. PDA all true except:

- A) Associated with maternal rubella
- B) Decreased murmur sound is a bad prognostic factor
- C) LV hypertrophy precedes RV hypertrophy
- D) Most cases closes spontaneously in the neonatalperiod
- E) One third die at age of 40 if not corrected

**ANSWER: C\*** 

#### 44. all are true about mediastinal masses except:

- A) Thymoma is associated with muscle weakness usually
- B) Most common mediastinal masses are metastatic tumors
- C) Thymoma is a posterior mediastinal mass

**ANSWER: C** 

#### 45. which of the following least likely to cause middle mediastinal mass:

- A) Neuroblastoma
- B) Lymphoma
- C) Thymoma
- D) Ganglionblastoma

**ANSWER: D** 

#### 46. regarding lung cancer all are true except:

- A) Concomitant radiotherapy and chemotherapy are the main treatment for stage 3b and 4
- B) Surgery offers the best hope for cure especially in early stages
- C) Overall 5-year survival is 65%
- D) In small cell type chemotherapy is the main stay
- E) Neoadjuvant chemotherapy is helpful in advanced cases

**ANSWER: C** 

# 47. If appropriately utilized, supervised exercise programs for patients with peripheral vascular disease can help achieve which of the following?

- A) Gradual improvement in ankle brachial index.
- B) Improve collateral circulation.
- C) Increased walking distance.
- D) Clinical benefit in patients with claudication and rest pain but not in patients presenting with tissue loss.
- E) Reduces the need for long term antiplatelet therapy.

**ANSWER: C** 

# 48. Pancoast tumors are located in the apex of the lung and involve through tissue contiguity the apical chest wall and/or the structures of the thoracic inlet. Which one of the Following statements regarding Pancoast tumor is correct?

- A) Pancoast tumor account for 25% of all bronchogenic carcinomas
- B) Squamous cell carcinomas account for two third of all pancoast tumours
- C) Pancoast tumours are by definition T2 tumors
- D) Induction chemo-radiotherapy is the standard of care for any potentially resectable Pancoast tumor
- E) Surgery for pancoast tumour is associated with 50% mortality rate

#### 49. Regarding Pneumothorax all are true EXCEPT:

- A) Closed pneumothorax is relatively common and may not be Clinically significant
- B) In tension pneumothorax air can only escape via the bronchial tree
- C) In tension pneumothorax there may be tracheal deviation towards the contralateral lung
- D) There may be an increase of 40 mmHg in intrapleural pressure on the affected side
- E) Tension pneumothorax is usually diagnosed by CXR

**ANSWER: E** 

#### 50. All of the following are true regarding lymphedema EXCEPT:

- A) Lymphedema praecox denotes primary lymphedema, while secondary lymphedema is also termed lymphedema tarda.
- B) Primary lymphedema has a marked female predominance.
- C) The most common world-wide cause of secondary lymphedema is filariasis.
- D) Lymphoscintigraphy is a reliable diagnostic tool for lymphedema.
- E) Methods of treatment include manual lymphatic drainage, compression devices, and surgery.

**ANSWER: A** 

#### 51. Tetralogy of Fallot consists of all of the following features EXCEPT:

- A) ASD.
- B) VSD.
- C) Dextroposition of the aorta.
- D) Pulmonary stenosis.
- E) Right ventricular hypertrophy

**ANSWER: A** 

52. 67 years old female came complaining of pain in the left calf that is triggered by walking. The pain come usually after walking a distance about 700m.On examination she was found to have chronic ulcer necrosis of the distal toes with blackish discoloration of the left foot. How would you describe the condition of this patient?

- A) Acute lower limb ischemia: viable category
- B) Acute lower limb ischemia: threatened category
- C) Acute lower limb ischemia: irreversible category
- D)Critical limb ischemia
- E) Neurogenic claudication

**ANSWER: D** 

#### 53. All of the following decrease peripheral vascular resistance except:

- A) Anaphylactic shock
- B) Cardiogenic shock
- C) septic shock
- D)adrenal insufficiency
- E) neurogenic shock

**ANSWER: B** 

54. A patient comes to the ER after motor vehicle accident his Bp 60/30, HR 168, Confusion and lethargy, capillary refill > 6sec. How much blood did he loose?

- A)15-30%
- B)30-35%
- C) More than 40%
- D)20-25%
- E)5-10%

**ANSWER: C** 

55. Clinical picture of pneumothorax (RTA, SOB, patent airway, hyper resonance and decreased breath sounds on right). What is the most appropriate next step?

- A) Needle thoracostomy
- B) Intubation And Ventilation
- C) IV access
- D)CXR
- E) Lavage

**ANSWER: A** 

56. Patient presented to the ER after gunshot wound, on PE weak pulse pressure, distended JVP, muffled heart sounds, and pulsus paradoxus, Dx?

- A) Cardiac Tamponade
- B) Pneumothorax
- C) Cardiogenic shock

**ANSWER: A** 

\$7. 67-year-old male with 40 pack years smoking presented with 1 month of rest pain and necrotic toes, he has a history of type 1 diabetes, he mentioned limited exercise tolerance on 200-300 yards with claudication pain, which of the following is the most informative test:

A)ABPI

B)CT angiogram

C) Doppler ultrasound

**ANSWER: B** 

58. female patient with left hip and buttock pain with walking that is relieved with rest, PE showed diminished left femoral pulse and absent popliteal pulse, intact right side arterial pulses, what artery is affected?

A) Left popliteal artery

B) Left deep femoral artery

C) Left common iliac artery

D)Abdominal aorta

E) Left superficial femoral artery

**ANSWER: C** 

59. A case of a diabetic patient who's been a smoker for 40 years, she presented with intermittent pain that comes after walking 500m distance, what is the only best management option?

A) Risk factor modification

B) Doppler

C) CT Angio

D)Endovascular stent

**ANSWER: A** 

#### 60. Which of the following is false about coarctation of the aorta?

A) there is posterior systolic murmur between scapulas

B) absent femoral pulses

C) left arm pressure is higher compared to right arm

D)peripheral cyanosis

E) lower blood pressure in legs

**ANSWER: C** 

## 61. Patient has limb ischemia, which of the following ulcers is more likely to develop

- A) shallow on the gaiter area and pigmented
- B) deep puncture wound on toe
- C) deep punched out with minimal granulation tissue and minimal fibrosis, and skin
- A) necrosis
- D)Painless punched out on the heels

**ANSWER: C** 

62. Most common significant long term complication of DVT:

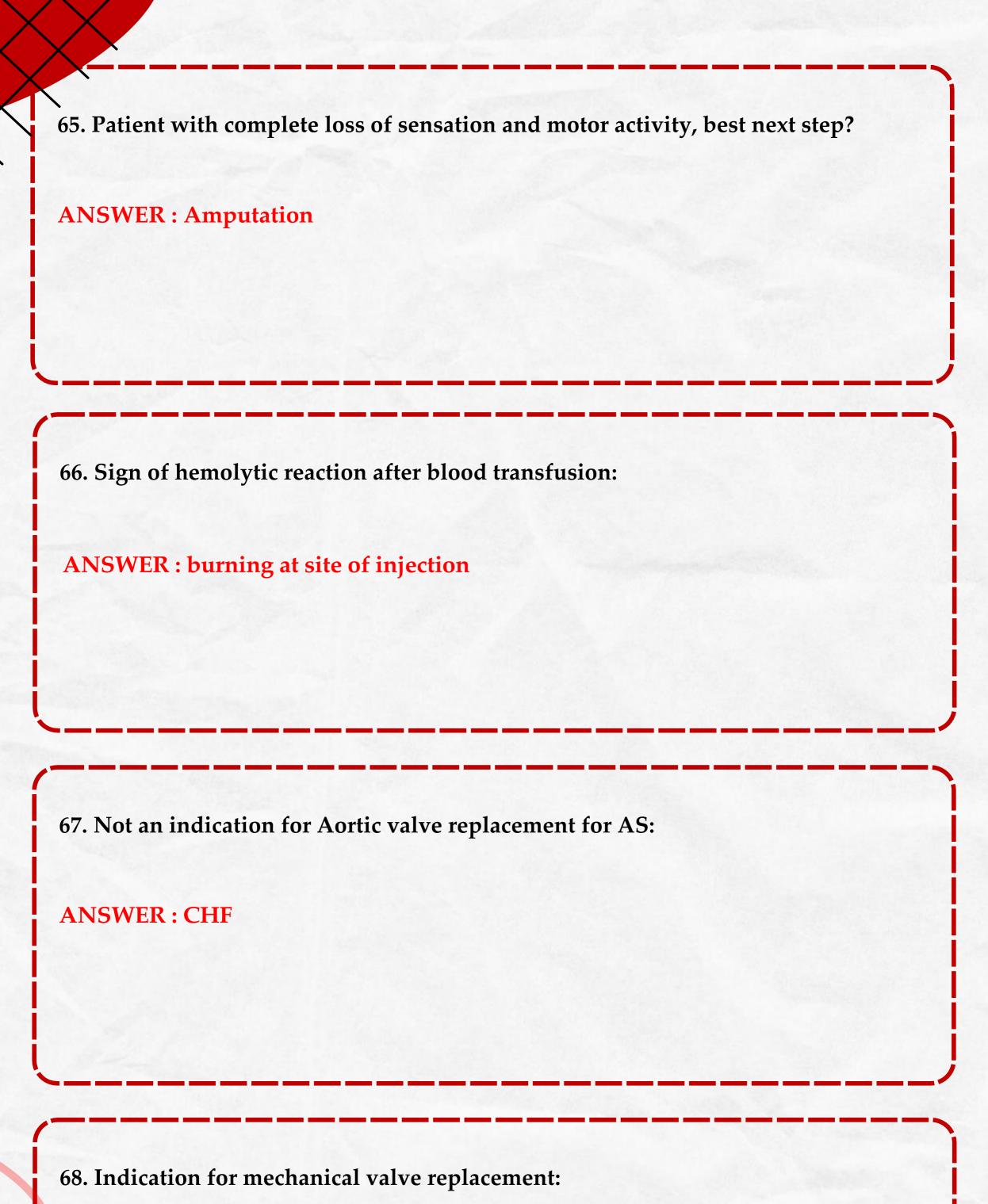
**ANSWER: Pulmonary Embolism** 

63. Wrong about intermittent claudication:

**ANSWER:** worse at night

64. Not caused by tension pneumothorax:

**ANSWER**: decreased central venous pressure



ANSWER: 45 yr. old

69. Not an effect of massive blood transfusion: **ANSWER: Hypercalcemia** 70. Not a complication of coarctation of aorta: **ANSWER: Pulmonary vascular disease** 71. The atrial septal defect (ASD) most commonly associated with partial anomalous pulmonary venous return (PAPVR) is: **ANSWER: Sinus venosus defect.** 72. Sign of early sepsis:

**ANSWER: Vasodilation** 

73. Late sign of tension pneumothorax: **ANSWER: Cyanosis** 74. Wrong about sepsis: ANSWER: You can delay the administration of antibiotics till 3 hours 75. A case of decreased breathing sounds, shifted trachea, tachycardia and hypotension. What is the diagnosis? **ANSWER:** Tension pneumothorax

76. True about Dominant Right coronary artery:

ANSWER: gives PDA branch and supplies AV node

77. requires immediate intervention?

**ANSWER**: transposition of great vessel

78. Fatal condition?

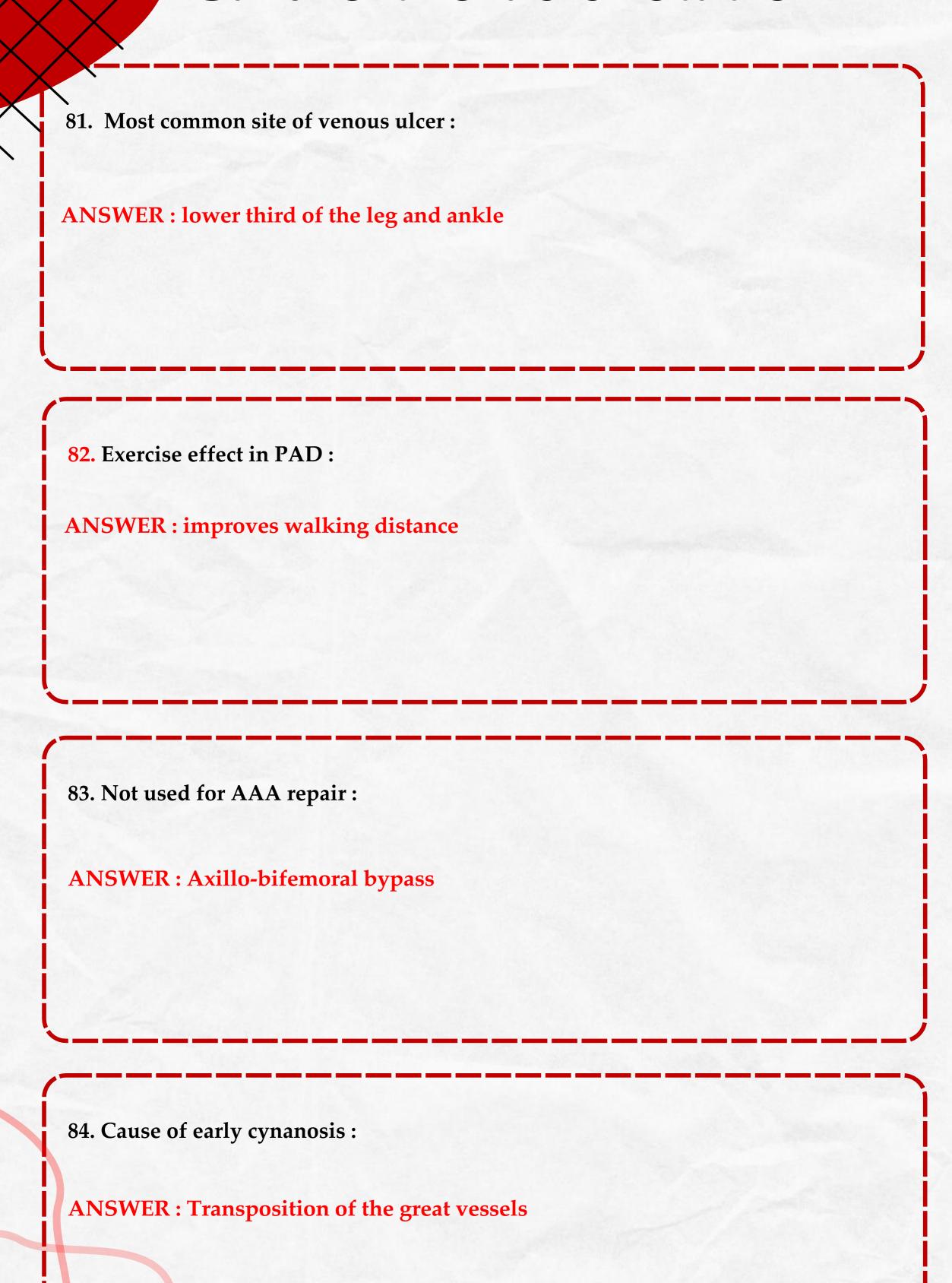
**ANSWER**: left coronary from pulmonary

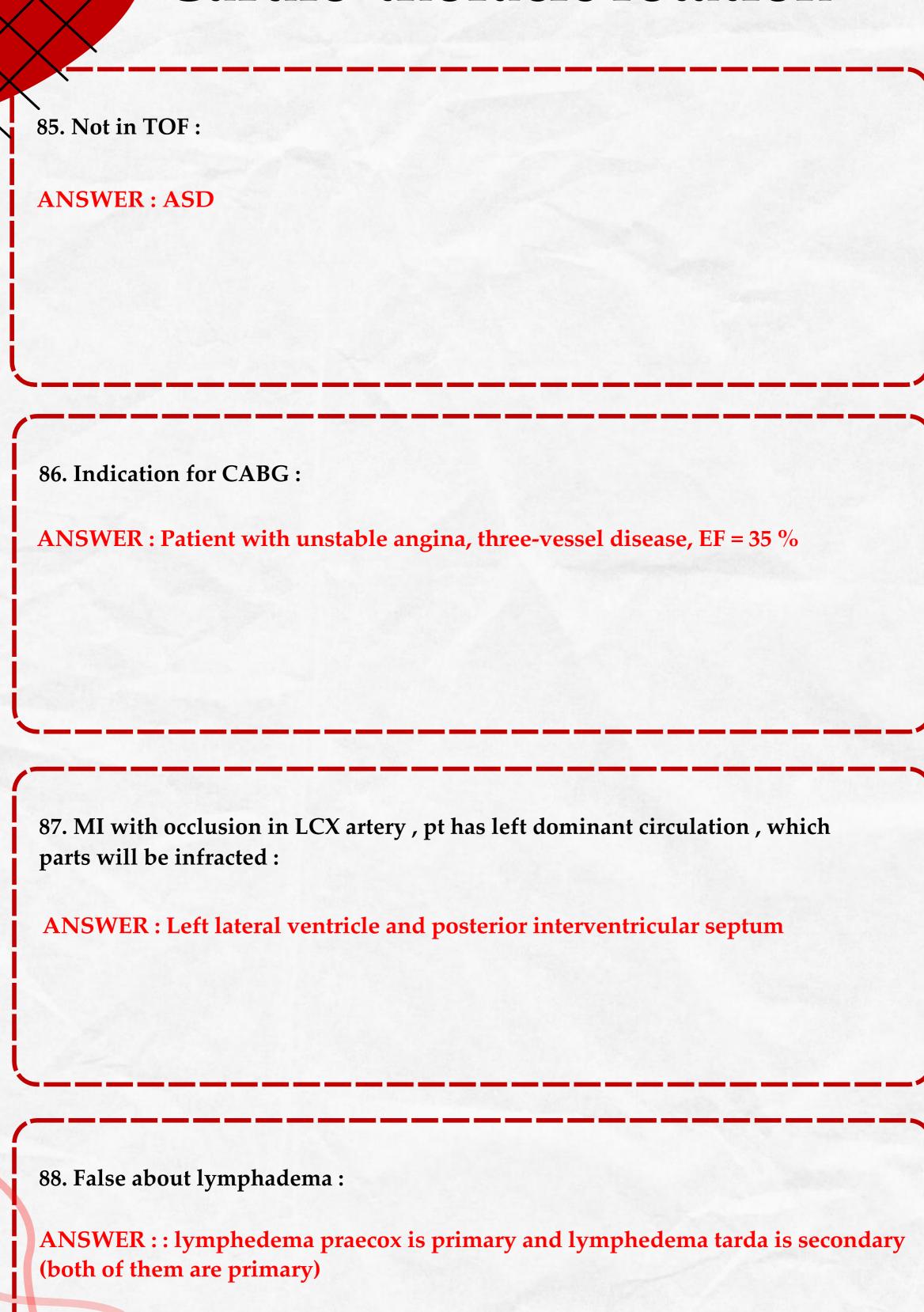
79. PDA dependent heart defect?

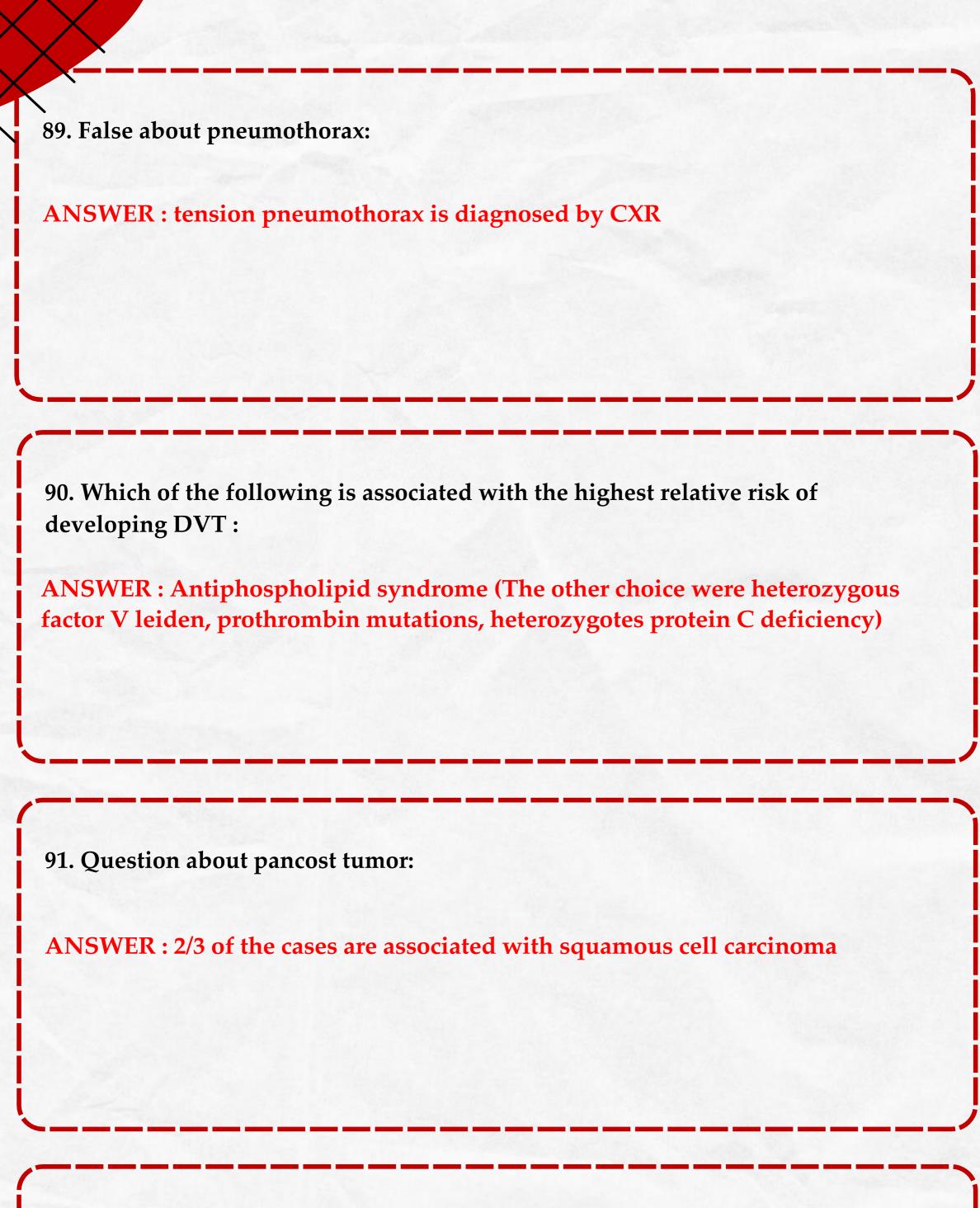
**ANSWER: PGE1** 

80. There was a question about lower limb amputation but I can't remember the details.

ANSWER: start rehabilitation as soon as possible







92. Most common congenital heart defect:

**ANSWER:: Membranous VSD** 

93. Closure of foramen primum by union of: **ANSWER:: Septum primum with AV cushions** 94. Patient lost 1700 ml of blood: ANSWER: Class III shock (lost 30 - 40 % of blood volume) 95. Trauma patient presented to the ER first step? **ANSWER: Secure airways** 96. true about claudication:

ANSWER: The pain is reproducible and due to ischemia

97. false about pneumothorax: ANSWER: tracheal deviation toward the affected side 98. false about pneumothorax: **ANSWER**: collapsed neck veins 99. after CVA elective surgery must be delayed to how long: **ANSWER:** 6 weeks 100. Acute limb ischemia, mx?

**ANSWER: Embolectomy** 

101. venous ulcer, no signs of infection, mgt is?

**ANSWER: Compression dressing** 

102. Long term complication of DVT?

**ANSWER: Stasis ulcer** 

103. most important investigation for PAD presented with intermittent claudication is:

**ANSWER: CTA** 

لا تنسوني من صالح دعائكم

Malek Abu Rahma

The End
Good Luck