

⁸Block Q OSPE 19/12/2024

1. Cancer of head of pancreas

A. Name the procedure

B. What structures remove

C. anastomosis done in this procedure

2. The patient underwent cholecystectomy 10 days back

..now he has fever abdominal distention and bile leakage from the ports

A) most common cause of Bile leak

² investigations

Management

3.

Scanned with CamScanner

Station 43

Questions ;

1. Name this instrument.
2. Demonstrate the technique of its use.
3. Enumerate at least two indications for its use.
4. Enumerate at least two complications associated with its use



4. A 30 years old man came with chief complaints of fever, abdominal pain, which is radiating to back, and nausea. He has a history of gall stones.

What is the most likely diagnosis

What are the investigations required

What are the 3 complications

5. Hydrocephalus pic

Types of hydrocephalus

Causes of hydrocephalus

Presenting features

6. 5 year old child with 2 days history of fever presented with inability to stand or walk ..child is active and alert .random glucose= 120 CSf findings: glucose = 90 baki bhul gae

1 _ diagnosis?

2_ investigations

3_ treatment

7. Last station 20 Block Q

Hepatitis B counselling for a pregnant lady

(Transmission to baby, drugs should be given or not, risk factors, mother Tx, baby Tx, sexual transmission, C/section or NVD)

8. 1.Diagnosis of biconcave lesion in brain ct (epidural hematoma)

2.cause

3 .this is present in which location (parieto-occipital region)

4.treatment (craniotomy)

9. Pschairy stationDepression def , symptoms , time to label it as depression ,treatment 1 non pharmacological and pharmacological Affect and Mood definition

10. Logbook - Paediatrics

Ask questions related to the history of the case recorded in the logbook (Enteric Fever)

11. A 30 year old patient is diagnosed with Ca pancrease the doctor has admitted him for surgery.

What is the name of this surgical procedure?

How will u council this patient diagramatically.

12. Ascites Examination

13. 50 years old women painless swelling in breast no axillary lymph node

Diagnosis

Investigations

Risk factors

14. Surgery station# Breast CA

A 55 years old lady complains of 3cm lump in the breast.no history of nipple discharge.Hard immobile.axillary lymph nodes not palpable.

Most probable diagnosis?

Investigations?

Risk factors?

Mastectomy types?

15. *Mini Mental Status Examination*

Psychiatry Station

16. h

Bell's palsy picture jo hamara shayad pehly bhi aa chuka hai ospi mein

Qs were;

what are the findings?

which nerve palsy?

and enlist 3 causes ?



● Whipple procedure

- Hydrocephalus
- Depression def type duration management
- Lumber puncture dig use management complications
- Aur ak cerebellar sign
- Hepatitis b viva
- Gait in peads
- LOWER LIMB EXAMINATION.

25 year old man presented with nausea vomiting and high fever .he had passed red colour clots in stool and had massive splenomegaly

What is diagnosis

What is causative agent

Way of transmission

Incubation period

And treatment of this disease

20.12.2024

1. Intercative st. Subarachnoid hemorrhage.

Causes, Investigations, treatment

2. Appendectomy;

Indications, steps of procedure (types of incisions) and complications.

3. Psychiatry_ viva about schizophrenia (def, signs and symptoms positive and negative symptoms)treatment.

4. Psychiatry_ history taking(from OCD patient) make diagnosis and pharmacological treatment.

5. (case was of ectopic pregnancy_ mimicing appendicitis).

(Scenario of young married female presented to opd with complaints of pain on right iliac fossa. Tachycardia and hypotension.

What are your three differentials

What is your most specific differential

How will you manage this patient)

6. HCV counselling in a pregnant lady. She wants to know about medical management, whether she can breastfeed or not. Tell her about what drugs are safe, what vaccinations should be done and what should be the mode of delivery

7. Abdominal examination.

8. Mastectomy counselling

9. Motor examination of upper limbs and lower limbs

10. Peads viva; febrile seizures

11. Abdominal examination in a 7 years old girl presenting with abdominal distention with relevant examination.

12. Scenario; celiac disease

13. A patient comes to you with history of upper limb trauma due to fall .There's sensory loss in little and ring finger with wasting of dorsal web space

1) what's the pathology in picture

2)what causes this pathology?

3)at which anatomical level this pathology happens?

4)what are the investigations to confirm the diagnosis?

5)How will you treat it?



14. History of fever, weight loss and night sweats, takes unpasteurised milk (diagnosis is brucellosis)

15. Picture of palmar erythema, DDs, 3 causes of palmar erythema. 2 lab findings.

16. 1. Name 2 ligaments prone to injury during splenectomy

2. Complications of splenectomy

What 3 vaccinations done prior to splenectomy.

17. Nasogastric tube.

Identify, indications and complications.

18. Child with history of diarrhea and weight loss for 1 year, reduced Hb, was on ATT but not responding. Diagnosis was Celiac Disease.

19. CT scan. Identify (hemorrhagic stroke)

Causes, single most important step in management, most common systemic problem associated with this ?

20. Log book station.

23rd Dec_ Ospe Q

1. lower limb ke sensory examination.

2. Typhoid fever ka scenario ta jis me person went into shock, had blood clots in stool and splenomegaly.

Organism

Route

Investigations

Treatment

Prevention ka sir ne poucha

3. Interactive station (Claw hand pic)

.. What are the causes?

Site of damage of ulnar nerve?

How will you diagnose?

If a patient comes with a sharp knife injury and ulnar nerve deformity, how will you proceed? To which sir said if its due to sharp object, we repair the nerve. (Repeat)

4. *5 years old with generalized tonic clonic seizures. Diagnosis and management.*

5. *Abdominal examination complete steps*
6. *Diarrhea classification according to IMNCl and management*
7. *Upper limb examination both sensory and motor*
8. *CT abdomen with cysts in it, cyst types, management*
9. *Surgery viva about cyst, types, causative organism of hadatid cyst, organism types, where cyst forms in the body and management?*
10. *Surgery viva Acute pancreatitis causes, diagnosis, management*
11. *Psychiatry viva, anxiety disorder definition, types, treatment one pharmacological and one non pharmacological*
12. *Psychiatry station, suicide risk assessment*
13. *Paeds logbook and questions about the history taken in logbook*
11. *Enteric fever scenario, causative organism, differential diagnosis, management*
14. *Another station of abdominal examination*
15. *Nasogastric tube, indications, harms, ?*

16. Bell's palsy picture, diagnosis, nerve involved, causes of injury and treatment?

17. Last station: a 40 year old man has ulcerative colitis since a long time now he has developed pruritis and jaundice . His LFTs are abnormal . What is the diagnosis?

What investigations will you do?

What treatment will you give?

24.12.2024

1. Any random cranial nerve examination and check for cerebellar Gait (peds)

2. Pt with epigastric pain, projectile vomiting containing no bile after eating containing food contents. Succussion splash is positive. He has good health otherwise. Diagnose it. 2 causes of this. What is metabolic abnormality associated with it. 3 investigation.

3. 35 year old woman with history of vision loss and presents with difficulty walking. She has increased tone in lower limb with exaggerated reflexes.

Diagnosis: (2)

Investigations (2)

Drugs (2)

4. 2 year old presented to ED with hx of cough, fever for last one month. On exam, grunting extention of

upper and lower limb present. She responds to pain only. DIAGNOSE IT. GCS level. Investigate it.

5. Examination of cerebellar signs

6. Somatoform disorder and everything related to it

6. Examination of abdomen. 2 causes of splenomegaly.

7. Farmer with cattle contact and unpasteurized milk drinking. Cbc report given. Diagnose it.

Confirmatory investigations. Standard Agglutination Test (SAT)

ELISA (IgM, IgG, IgA)

Blood Culture

PCR (Polymerase Chain Reaction)

Bone Marrow Culture

Coombs Test

Rose Bengal Test Treatment doxycycline and rifampin.

Other names for brucellosis? Malta fever. Gastric

fever. 4 nam hai koi. 2ndry prevention of brucesllosis? Boil milk before use and use gears when animal contact

8. Logbook station and viva on febrile fits. Types, definition, treatment, counsel the parents for not letting fever be high for long, and don't let child near water, fire or road incase seizures precipitate.

9. A 35-year-old male presents to the clinic with complaints of abdominal discomfort, nausea, dizziness, and rapid heart rate occurring 30 minutes after meals. He underwent gastrectomy for peptic ulcer disease.

Diagnose it (dumping syndrome), 2 types of it (Early Dumping: Symptoms occur 10–30 minutes after eating (fluid shifts).

Late Dumping: Symptoms occur 1–3 hours after eating (hypoglycemia due to insulin surge).

Dietary modifications? Eat small, frequent meals.

Avoid high-sugar and high-carbohydrate foods.

Increase protein and fiber intake.

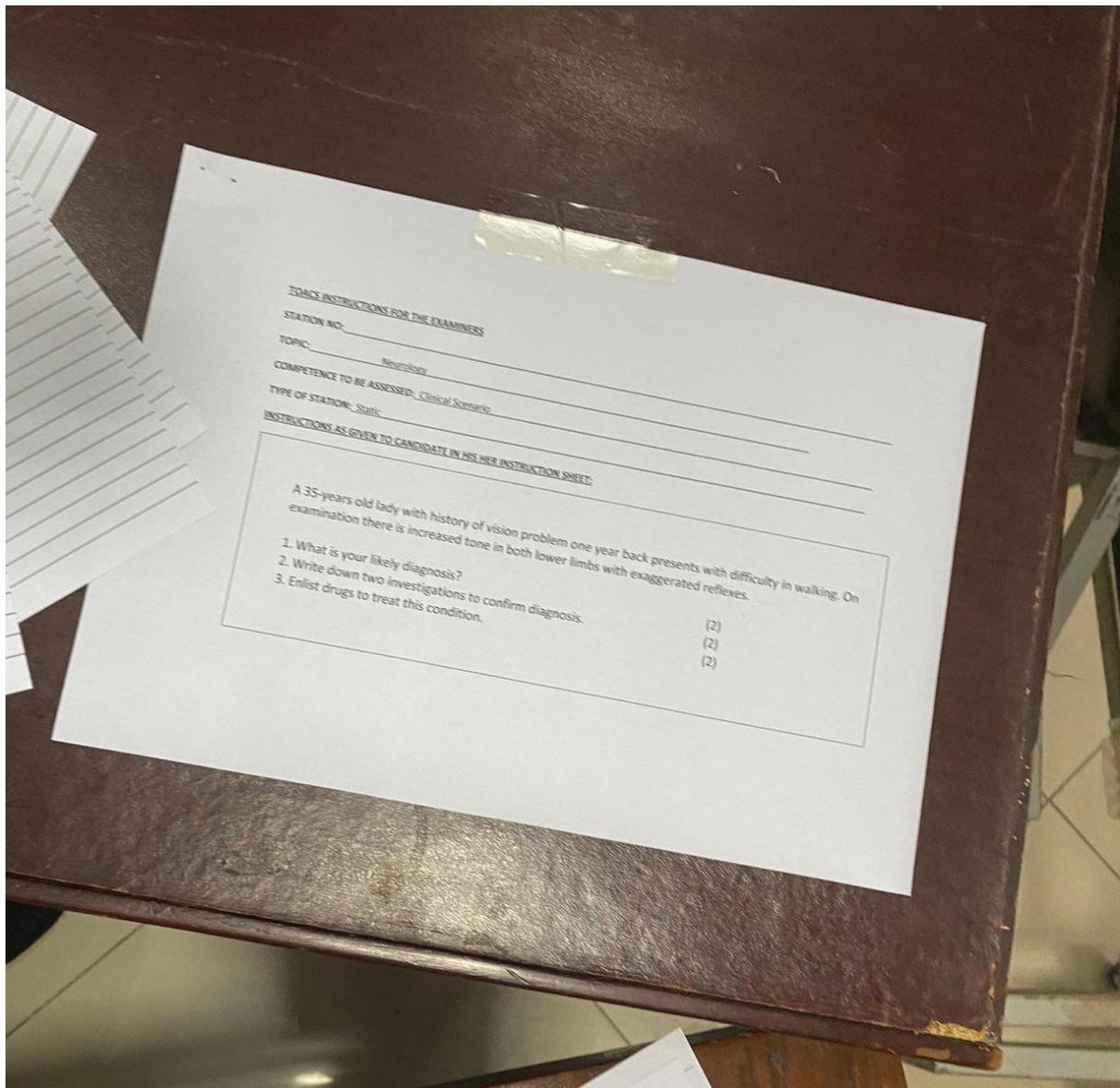
Avoid drinking liquids with meals; drink between meals.

Lie down after eating to slow gastric emptying.

10. Examination of upper limb sensory and motor (medicine)

: 11. Hydrocephalus repeated station. Types management signs of Hydrocephalus (sunset sign aur Frontal bossing mat bhulna) treatment. Causes of communicating Hydrocephalus. Treatment

12. 6 Causes of hereditary hyperbilirubinemia

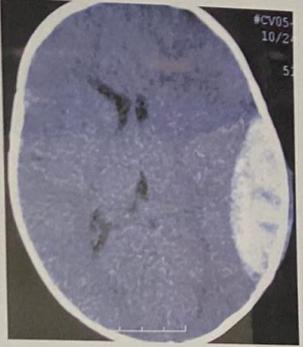


PROCEDURE INSTRUCTION FOR CANDIDATES
 STATION NO: _____
 TOPIC: Spinal Diseases
 TIME ALLOWED: Five Minutes
 DESCRIPTION OF THE TASK TO THE CANDIDATES
 (Information and instructions)

This is CT brain of 52 years old man who sustained injury to skull in a road traffic accident.

Questions:

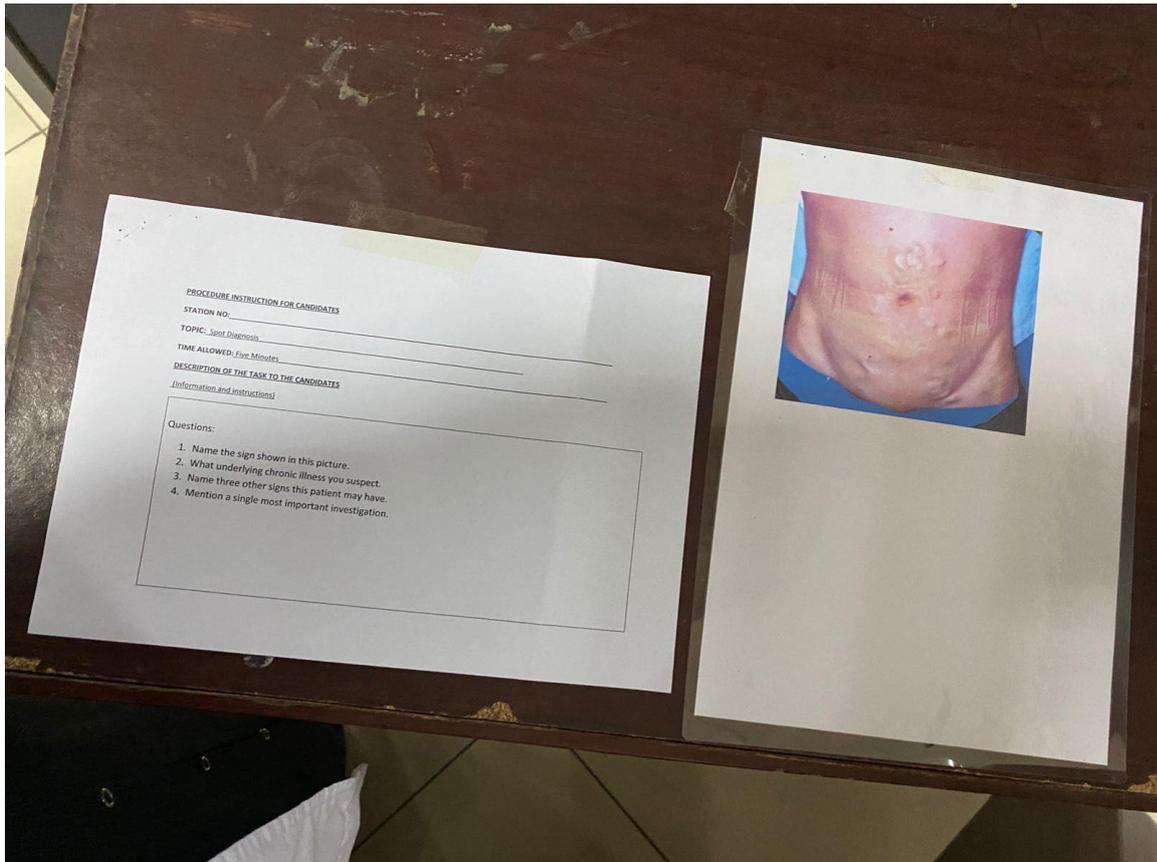
1. What are abnormal findings on CT scan?
2. What is likely diagnosis?
3. Which artery is involved during injury causing this condition?



Final Year MBBS Exam 2025
 24/12/2024 Tuesday

<p>Static Station</p>	<p>A 2 years old female child presented to emergency department with a history of cough and fever for the last one month. On examination she is grunting, has developed extension of upper and lower limb and is responsive to pain only.</p> <p>Question:</p> <ol style="list-style-type: none"> 1. Give most likely diagnosis? (1) 2. What is her GCS? (3) 3. How will you investigate? (2)
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No: _____



STATION 14: 16
Interactive
A 45-year-old male presents to the clinic three weeks after undergoing a partial gastrectomy for peptic ulcer disease. He reports episodes of abdominal cramping, nausea, sweating, and dizziness, particularly after meals.

1. What is the most probable diagnosis?
2. Different type of your diagnosis?
3. What dietary modifications would you recommend to this patient?

PROCEDURE INSTRUCTION FOR CANDIDATES

STATION NO: _____

TOPIC: Clinical Scenario _____

TIME ALLOWED: Five Minutes

DESCRIPTION OF THE TASK TO THE CANDIDATES

(Information and instructions)

A 60 years-old man known case of Chronic liver disease secondary to chronic Hepatitis C viral infection presented to ER with fever, abdominal pain and distension for the last 6 days. On examination there is pallor, B.P is 100/70 mmHg. Abdominal examination revealed distended and tender abdomen.

1. What is your likely diagnosis? (2)
2. What investigations would you suggest? (2)
3. What treatment should be given to patient? (2)

STATION 10 (1.5)

Static

A 24 years old boy presented with dysphagia and recurrent chest infection. Observe this picture and answer the questions given below

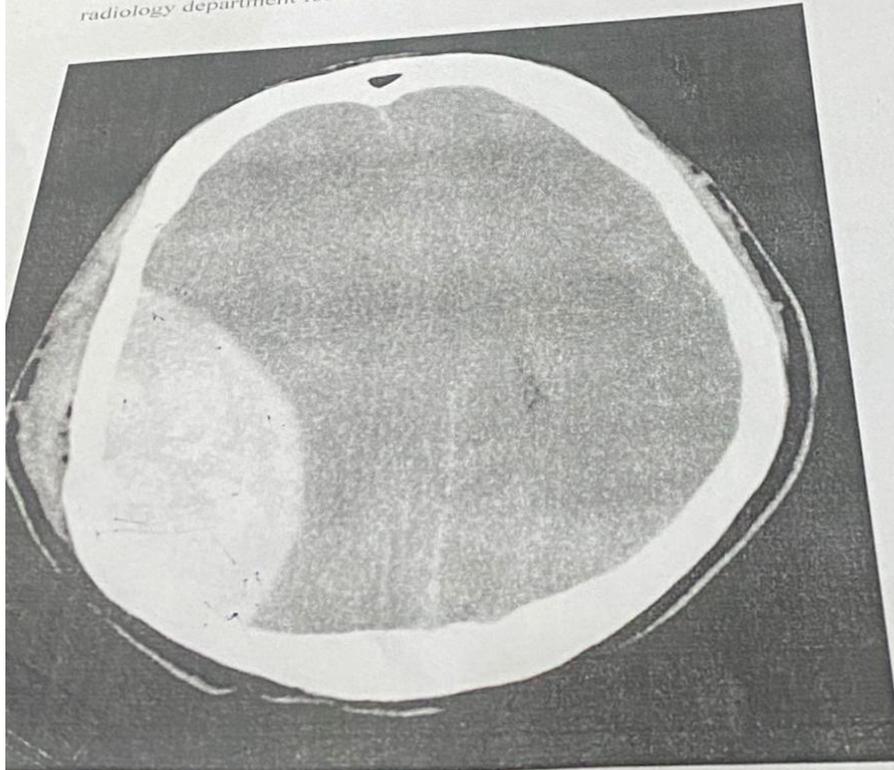
- 1: What is this investigation called?
- 2: What are the findings?
- 3: What is diagnosis?
- 4: What is differential diagnosis?
- 5: What is the treatment of this condition?



2. What is the most common cause in this case? (01 marks)
3. What is the location of hematoma in this case? (01 marks)
4. How you will manage this patient? (02 marks)

TOACS
STATION 2 (STATIC)

A 15-year-old boy was hit on the temple with a baseball and he became unconscious. After about ten minutes, he regained consciousness, but he soon became lethargic, and over the next two hours, he was stuporous. His pupils were unequal. Intra cranial hemorrhage was suspected. He was shifted to the radiology department for an urgent CT scan brain which shows:



What is the most appropriate Diagnosis

(02 marks)

36. A 25-year old man reports spending several hours each day checking and rechecking whether he has locked his doors and turned off the stove. Despite knowing that these behaviours are irrational. He feels compelled to perform them repeatedly to reduce his anxiety. What is the most probable diagnosis.

- A. Generalized anxiety disorder**
- B. Post stress traumatic disorder (PSTD)**
- C. Obsessive compulsive disorder (OCD)**
- D. Social anxiety disorder**

E. Panic disorder

7

Q A 44-year-old man presented with chronic diarrhea. Over the past 5 years, the patient experienced intermittent bouts of watery diarrhea associated with fatigue and a 15-kg weight loss. Past medical history included a perianal fistula, which required surgery 5 years ago. He denied use of antibiotics or nonsteroidal anti-inflammatory drugs before the onset of his symptoms. On presentation, vital signs were within the normal range. Physical examination showed a pale appearance, hyperactive bowel sounds, and mild lower-extremity edema.

1. Enumerate three differential diagnosis? *IBD, IBS, Crohn's*
2. Enlist three investigations? *ESR, CRP, CBC*