

SURGICAL GASTROENTEROLOGY

PAPER-III

GIS/D/18/46/III

Time: 3 hours
Max. Marks:100

Important Instructions:

- *Attempt all questions in order.*
- *Each question carries 10 marks.*
- *Read the question carefully and answer to the point neatly and legibly.*
- *Do not leave any blank pages between two answers.*
- *Indicate the question number correctly for the answer in the margin space.*
- *Answer all the parts of a single question together.*
- *Start the answer to a question on a fresh page or leave adequate space between two answers.*
- *Draw table/diagrams/flowcharts wherever appropriate.*

Write short notes on:

1. a) Key elements of a randomized controlled trial. 3+4+3
b) How is blinding different from allocation concealment?
c) What do you understand by post-hoc analysis?
2. a) Evaluation of a patient with acute severe necrotizing pancreatitis presenting in the first 2 weeks of illness. 5+5
b) Outline the approach to such a patient with early onset organ failure.
3. a) Outline the evaluation of a patient with suspected Crohn's disease of the small bowel. 5+(3+2)
b) What are the indications for surgical management in such a patient and the possible surgical procedures?
4. Extralevator abdominoperineal excision: Outline the steps of the procedure, discuss its role and the pros and cons. 3+4+3
5. Management of a patient with familial adenomatous polyposis syndrome who has a cancer of the mid transverse colon. 10
6. Explain specificity, sensitivity, positive predictive value, negative predictive value and diagnostic accuracy in the context of using PET scan in patients with cancer gall bladder. 2+2+2+2+2
7. Outline the diagnosis and management of a patient with abdominal tuberculosis. 5+5
8. Outline the management options of a patient with mid-third rectal cancer rectum with a solitary metastasis in segments 5 & 6 of the liver. 10
9. Enhanced recovery after surgery (ERAS) protocols in the context of colorectal surgery. 10
10. a) Nerve supply to the rectum and anal canal. 4+(3+3)
b) Explain the sites of injuries and technique of avoiding injuries to these nerves during anterior resection.
