CARDIOTHORACIC SURGERY

PAPER - II

CTH/D/15/4/II

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.	Fontan operation with specific reference to: a) Indications b) Modifications & types c) Late outcomes	3 3 4
2.	Off Pump Coronary Artery Bypass Surgery (OPCAB): a) Provide evidence base for its use. b) Relative & absolute contraindications. c) Mechanical and Pharmacological adjuncts used in OPCAB.	4 2 2+2
3.	Heart failure: a) Types and aetiology b) Pharmacotherapy c) Mechanical devices as Bridge to recovery	4 3 3
4.	Atrial Fibrillation: a) Patho-physiological basis. b) Cox-Maze 3 procedure. c) Energy sources. d) Minimally Invasive techniques.	3 3 2 2
5.	How to differentiate: a) Restrictive Versus Constrictive Physiology. b) Mild to moderate aortic stenosis versus severe low gradient AS. c) Flow limiting Versus non flow limiting coronary stenosis. d) Early LV Dysfunction from normal L V in mitral registration.	3 3 2 2
6.	Cardiac Tumors: a) Types and Prevalence b) Presentation in infancy c) Management of the commonest tumour in infancy	2+1 3 4
		P.T.O.

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7.	 a) Aortic Valve Conservation. b) Repair Versus replacement in ischaemic mitral regurgitation. c) Indications of emergent surgery in infective endocarditis. 	4 3 3
8.	Cononary Artery Disease: a) Class I indications for PCI (Percutaneous Coronary Intervention) b) PCI versus CABG in Diabetics – current evidence c) Why is LIMA to LAD considered a gold standard and reasons for its good results & high patency?	3 4 3
9.	Transposition of great arteries: a) Morphology, b) Embryological basis and c) Management beyond 3 months.	3 2 5
10.	 a) Indications of heart transplantation. b) Techniques described for heart transplantation. c) Immuno suppression therapy following heart transplantation. 	2 4 4
