## **National Board of Examinations**

Question Paper Name :DrNB Surgical Gastroenterology Paper 2Subject Name :DrNB Surgical Gastroenterology Paper 2Creation Date :2022-12-22 19:38:29Duration :180Share Answer Key With Delivery Engine :NoActual Answer Key :No

## **DrNB Surgical Gastroenterology Paper2**

**Group Number:** 1 Group Id: 3271871354 **Group Maximum Duration:** 0 180 **Group Minimum Duration: Show Attended Group?:** No **Edit Attended Group?:** No **Group Marks:** 100 Is this Group for Examiner?: No **Examiner permission: Cant View Show Progress Bar?:** No

## **DrNB Surgical Gastroenterology Paper2**

**Section Id:** 3271871357

Section Number: 1

Section type: Offline

Mandatory or Optional: Mandatory

Number of Questions to be attempted: 10

Section Marks: 100

**Enable Mark as Answered Mark for Review and** 

**Clear Response:** 

Yes

**Maximum Instruction Time:** 0

Sub-Section Number: 1

**Sub-Section Id:** 3271871361

**Question Shuffling Allowed:** No

Is Section Default?: null

Question Number: 1 Question Id: 32718712592 Question Type: SUBJECTIVE Consider As

Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction

Time:0

**Correct Marks: 10** 

Please write your answers in the answer booklet within the allotted pages as follows:-

Question Number	Answer to be attempted within	Question Number	Answer to be attempted within
Q. 1	Page 1-5	Q. 6	Page 26-30
Q. 2	Page 6-10	Q. 7	Page 31-35
Q. 3	Page 11-15	Q. 8	Page 36-40
Q. 4	Page 16-20	Q. 9	Page 41-45
Q. 5	Page 21-25	Q. 10	Page 46-50

- 1. a) Significance and management of sludge in gall bladder. [4]
- b) Isolated focal thickening of wall of gall bladder. [3]
- c) Significance of knowing classes of biliary injury: Stewart-Way vs Strassberg. [3]

Question Number: 2 Question Id: 32718712593 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

- a) Papillary neoplasia of the biliary tract. [3]
- b) Malignancy associated with choledochal cyst: pre and post surgery. [4]

c) Asymptomatic CBD stones. [3]

Question Number: 3 Question Id: 32718712594 Question Type: SUBJECTIVE Consider As

Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

a) Principles of management of potentially resectable hepatocellular carcinoma. [5]

b) Considerations in the management of HCC in patients ineligible for transplant with no

macrovascular invasion. [5]

Question Number: 4 Question Id: 32718712595 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

Describe the steps of recipient hepatectomy in a patient of end stage cirrhosis with portal hypertension. How do you tailor your techniques according to different difficult situations faced during the surgery? State the principles of anaesthesia management during the surgery. [4+3+3]

Question Number: 5 Question Id: 32718712596 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

Describe the etiopathogenesis, clinical features, diagnosis and management approach to a patient of pancreatic exocrine insufficiency. [2+2+3+3]

Question Number: 6 Question Id: 32718712597 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

a) Screening a dead donor for pancreas retrieval. [4]

b) Serous cystadenoma of pancreatic head. [3]

c) Pancreas divisum. [3]

Question Number: 7 Question Id: 32718712598 Question Type: SUBJECTIVE Consider As

Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

a) Borderline resectable pancreatic cancer. [3]

b) VIPoma. [3]

c) Prediction of severity of acute pancreatitis with stress on biological markers. [4]

Question Number: 8 Question Id: 32718712599 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time:0

**Correct Marks: 10** 

a) Describe the molecular pathogenesis of exocrine pancreatic cancer. [4]

b) Give an account of familial risk factors and screening of high risk patients. [3+3]

Question Number: 9 Question Id: 32718712600 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

a) Central pancreatectomy. [3]

b) Duodenum preserving pancreatic head resection. [4]

c) Debate whether cholecystectomy should be a part of pancreatico duodenectomy. [3]

Question Number: 10 Question Id: 32718712601 Question Type: SUBJECTIVE Consider As

Subjective: Yes Calculator: None Response Time: N.A Think Time: N.A Minimum Instruction

Time: 0

**Correct Marks: 10** 

Give an account of "pushing the boundaries in liver transplantation" over the last 10 years. [10]