

National Board of Examinations

Question Paper Name : DrNB Vascular Surgery Paper3
Subject Name : DrNB Vascular Surgery Paper3
Duration : 180
Total Marks : 100
Display Marks: No

Maximum Instruction Time : 0

Question Number : 1 Question Id : 32718741125 Consider As Subjective : Yes

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 55-year-old diabetic with chronic kidney disease (CKD) on hemodialysis through left IJV permanent tunneled catheter with multiple access failure at both upper limbs is symptomatic with thrombus at Superior Vena Cava (SVC).

- What are the possible causes of SVC thrombosis, and symptoms of SVC syndrome? [3]
- How do you evaluate this patient? [3]
- What are the management options for this patient? [4]

Question Number : 2 Question Id : 32718741126 Consider As Subjective : Yes

A 22-year-old athletic male presents with acute upper limb swelling and cyanosis after heavy weight lifting. Duplex shows axillo subclavian vein thrombosis.

- What is the underlying mechanism? [3]

- b) What are the steps in acute management? [3]
- c) When do you proceed to first rib resection/venolysis? [4]

Question Number : 3 Question Id : 32718741127 Consider As Subjective : Yes

A 65-year-old woman presents with Crawford type II thoraco-abdominal aortic aneurysm (TAAA) (6.2 cm). She has COPD and CKD.

- a) What factors influence the choice of open vs branched/fenestrated endovascular repair? [4]
- b) How do you reduce the risk of spinal cord ischemia perioperatively? [3]
- c) What are the strategies to maintain renal and visceral perfusion during repair? [3]

Question Number : 4 Question Id : 32718741128 Consider As Subjective : Yes

A 70-year-old male, known case of peripheral vascular disease, claudicant on medical management, presented with a sudden onset left lower limb pain, absent pulses from popliteal artery, cold foot with diminished sensation in left foot.

- a) What is the diagnosis? [2]
- b) How do you manage this patient? [4]
- c) Role of vasculomimetic stents in P2, P3 segments with evidence. [4]

Question Number : 5 Question Id : 32718741129 Consider As Subjective : Yes

A 60-year-old woman with a femoropopliteal stent presents with sudden calf pain and paraesthesia. Duplex shows acute thrombosis of the stent.

- a) What are risk factors for in-stent thrombosis leading to Acute limb ischemia (ALI)? [3]
- b) Indications and contraindications for catheter-directed thrombolysis in this setting. [3]
- c) How would you plan re-intervention to prevent recurrent thrombosis? [4]

Question Number : 6 Question Id : 32718741130 Consider As Subjective : Yes

A 68-year-old diabetic male presents with non-healing forefoot ulcer and rest pain. CTA shows long segment occlusion of anterior tibial artery from its origin with reconstitution distally. Antegrade wiring has failed.

- a) What are the indications for attempting retrograde tibial access in this patient? [2]
- b) Which tibial vessel would you choose for retrograde puncture and why? [3]
- c) Explain the recanalization techniques in chronic total occlusion. [5]

Question Number : 7 Question Id : 32718741131 Consider As Subjective : Yes

A 68-year-old male presents with a transient ischemic attack (TIA) and carotid imaging showing 80% stenosis of the right Internal carotid artery (ICA).

- a) How soon after the index event should carotid endarterectomy (CEA) be performed? [3]
- b) Carotid interventions for symptomatic carotid stenosis with evidence. [4]
- c) Compare outcomes of CEA and carotid artery stenting (CAS) in symptomatic patients. [3]

Question Number : 8 Question Id : 32718741132 Consider As Subjective : Yes

A 70-year-old hypertensive male smoker, is found to have a 6.2 cm infrarenal abdominal aortic aneurysm (AAA) on CT angiography. Imaging also reveals a horseshoe kidney (HSK) with its isthmus crossing anterior to the aneurysm and multiple anomalous renal arteries.

- a) What are the challenges of AAA repair in the presence of a horseshoe kidney? [3]
- b) What are the surgical options in open repair? [4]
- c) How do you decide between open vs endovascular aneurysm repair EVAR? [3]

Question Number : 9 Question Id : 32718741133 Consider As Subjective : Yes

A 70-year-old patient with iliac occlusion and contralateral iliac aneurysm undergoes hybrid robotic iliac exposure with endovascular stent placement.

- a) What is the role of robotics in hybrid vascular procedures? [3]
- b) How does robotic exposure improve access for endovascular interventions? [3]
- c) Discuss cost-effectiveness and future trends in hybrid robotic vascular surgery. [4]

Question Number : 10 Question Id : 32718741134 Consider As Subjective : Yes

A 62-year-old man on hemodialysis through a brachiocephalic arterio-venous fistula presents with prolonged bleeding from puncture sites.

- a) How do you evaluate this patient? [4]
- b) Why is the cephalic arch a common site for venous outflow stenosis in brachiocephalic fistulas? [2]
- c) What is the first-line management - endovascular versus open? [4]