National Board of Examinations

Question Paper Name :	DrNB Surgical Gastroenterology Paper
Subject Name :	DrNB Surgical Gastroenterology Paper
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DrNB Surgical Gastroenterology Paper1

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Group Number :	1
Group Id :	327187465
Group Maximum Duration :	0
Group Minimum Duration :	180
Show Attended Group? :	No
Edit Attended Group? :	No
Break time :	0
Group Marks :	100
Is this Group for Examiner? :	No

DrNB Surgical Gastroenterology Paper1

Section Id :	327187468
Section Number :	1
Section type :	Offline

Mandatory or Optional : Mandatory

Number of Questions: 10

Number of Questions to be attempted: 10

Section Marks: 100

Enable Mark as Answered Mark for Review and

Clear Response:

Yes

Sub-Section Number: 1

Sub-Section Id: 327187472

Question Shuffling Allowed: No

Question Number: 1 Question Id: 3271873171 Question Type: SUBJECTIVE

Correct Marks: 10

Discuss Achalasia Cardia:

- a) Etiopathogenesis. [2]
- b) Management. [5]
- c) Latest Chicago classification for motility disorders. [3]

Question Number: 2 Question Id: 3271873172 Question Type: SUBJECTIVE

Correct Marks: 10

a) List the early and late complications of a patient who has undergone transhiatal esophagectomy for carcinoma esophagus following neoadjuvant chemoradiotherapy. [2+2]

b) Outline the management of the early and late complications. [3+3]

Question Number: 3 Question Id: 3271873173 Question Type: SUBJECTIVE

Correct Marks: 10

For a patient who has accidental ingestion of an acidic corrosive agent.

- a) Discuss the presentation. [3]
- b) Investigation and early management. [3+4]

Question Number: 4 Question Id: 3271873174 Question Type: SUBJECTIVE

Correct Marks: 10

a) Discuss the lymphatic drainage of the stomach in relation to the management of a patient with

a 5 cm diameter mid-body adenocarcinoma of the stomach. [4]

b) Describe the components of the different types of a D2 gastrectomy for a patient with

carcinoma stomach and discuss the evolution of D2 gastrectomy on the basis of the evidence

generated by different studies. [3+3]

Question Number: 5 Question Id: 3271873175 Question Type: SUBJECTIVE

Correct Marks: 10

a) Discuss various esophageal substitutes. [5]

b) How to choose an esophageal replacement? [3]

c) Routes available for esophageal replacement. [2]

Question Number: 6 Question Id: 3271873176 Question Type: SUBJECTIVE

Correct Marks: 10

a) Outline the Surviving Sepsis Guidelines 2016. [5]

b) Mention the changes in the latest Surviving Sepsis Guideline. [5]

Question Number: 7 Question Id: 3271873177 Question Type: SUBJECTIVE

Correct Marks: 10

a) Discuss the evaluation and management of a patient with a 1.5 cm duodenal polyp adjacent to

the papilla of Vater. [3+3]

b) If histopathology of the polyp shows low grade or high grade dysplasia, how will your approach

change. [4]

Question Number: 8 Question Id: 3271873178 Question Type: SUBJECTIVE

Correct Marks: 10

Discuss the evaluation and management of a 35-year-old patient with haemodynamic instability

presenting to the emergency with upper gastrointestinal haemorrhage. [5+5]

Question Number: 9 Question Id: 3271873179 Question Type: SUBJECTIVE

Correct Marks: 10

- a) What is the impact factor of a journal signify and how is it calculated? [4]
- b) Describe the various levels of evidence. [3]
- c) What is odds ratio, relative risk and hazard ratio? [3]

Question Number: 10 Question Id: 3271873180 Question Type: SUBJECTIVE

Correct Marks: 10

Discuss the importance of 'Prehabilitation' and 'ERAS' protocol in today's surgical era. [5+5]