

**CARDIO THORACIC SURGERY**

**PAPER-II**

Time: 3 hours  
Max. Marks:100

CTS/J/19/04/II

**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) Classification of dissection of aorta. 2+4+4  
b) Management of acute type A dissection.  
c) Antegrade cerebral perfusion.
2. a) Enumerate various diseases requiring single ventricle repair. 3+7  
b) Ten Commandments of Fontan circulations and their utility in current era.
3. a) Enumerate various coronary artery anomalies in transposition of great arteries. 3+7  
b) Discuss diagnosis and management of anomalous right coronary artery from left coronary sinus.
4. a) Define ideal prosthetic heart valve. 2+8  
b) Discuss various treatment process for delaying degeneration in bio prosthetic valves.
5. a) Define Truncus Arteriosus. 2+3+5  
b) Classification of Truncus Arteriosus.  
c) Management strategies for Truncus Arteriosus.
6. a) Define Coarctation of aorta. 1+4+5  
b) Clinical manifestation of Coarctation of aorta.  
c) Management of Coarctation of aorta.
7. a) SYNTAX score. 2+3+5  
b) SYNTAX II score.  
c) Instantaneous wave-free Ratio (iFR) and its role in management of coronary artery disease.

**P.T.O.**

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|-----|---|-----|
| 8.  | a) Etiopathogenesis and clinical features of post myocardial infarction ventricular septal defect (Post MI VSD).                    | 5+5 |
|     | b) Technique of surgical repair of anterior post MI VSD.  |     |
| 9.  | a) Classification of cardiac tumours.   | 6+4 |
|     | b) Clinical features and diagnosis of left atrial myxoma.   |     |
| 10. | a) Etiopathogenesis and classification of tricuspid regurgitation.  | 5+5 |
|     | b) Enumerate various techniques used for surgical management of tricuspid valve repair and give their advantages and disadvantages. |     |

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