FINAL EXAM DECEMBER 2012 NATIONAL BOARD OF EXAMINATIONS

PAEDIATRIC SURGERY (PART-2/FINAL)

PAPER-I

Time		: 3 hours			
Max.	Marks	: 100			

PED SURG 2/D/12/29/I

Attempt all questions in order. Each question carries 10 marks.

1.	Enumerate the types of shock. Define systemic inflammatory response syndrome. Describe investigative approach in a neonate with suspected sepsis.	1+1+8
2.	Define disseminated intravascular coagulation (DIC). What are the common conditions that are associated with DIC? How is the diagnosis of DIC made on laboratory tests?	1+3+6
3.	Describe the endocrine and metabolic responses to surgery in a neonate? What are the effects of surgery on glucose metabolism?	7+3
4.	Describe the embryology of the branchial arches? Briefly discuss the defects of the second branchial cleft?	5+5
5.	Enumerate the complications of parenteral nutrition (PN)? Describe strategies to reduce PN-related cholestasis?	5+5
6.	What is Polymerase Chain Reaction? What are their clinical applications in pediatric surgery?	6+4
7.	Describe the mechanism of heat loss in a surgical neonate? What are the complications of hypothermia in neonates?	5+5
8.	What is patient controlled analgesia (PCA)? Describe its use in children citing its advantages and disadvantages?	4+3+3
9.	Enumerate the indications for intestinal transplantation in pediatric patients. Define post-transplant lymphoproliferative disorder.	5+5
10.	What are the maternal serum screening tests for trisomy-21? List the ultrasound markers for trisomy-21?	5+5

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PAPER - II

Time Max. N	/larks		ED SUR	G 2/D/12/29/II
		questions in order. tion carries 10 marks.		
	1.	Describe the evolution of empyema thoracis in children? Outline the investigations required to plan treatment? What are the treatment options in a child with empyema thoracis?		4+2+4
	2.	What are the indications for esophageal substitution in children? Describe the advantages and disadvantages of commonly performed esophageal substitution procedures?		3+7
	3.	Describe the clinical presentation, pathology and management of foregut duplication cysts.	I	3+3+4
	4.	Classify cystic lesions of the lung. What are the principles of management of these lesions?	F	4+6
	5.	Briefly describe the embryogenesis of cystic hygroma. What are the various treatment options of these lesions, giving advantages and disadvantage of each?		3+7
	6.	Enumerate the treatment option in a child with congenital hydrocephalus. What are the complications of ventriculoperitoneal shunts?		4+6
	7.	Enumerate the indications for antegrade colonic enema (ACE) procedure. What are the principles of this operation? What post-operative care is required in these children?		3+4+3
	8.	Describe the clinical presentation, investigations and principles of treatment of ovarian tumors in pre-pubertal girls?		2+4+4
ne:	9.	What are the common causes of portal hypertension in children? What is the treatment of acute variceal hemorrhage? Enumerate the types of porto-systemic shunts.	l	2+5+3
. * .	10.	Describe the diagnostic work up in an infant suspected to have extrahepatic biliary atresia? What are the factors that influence outcomes after hepatico-portoenterostomy?		5+5

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PAPER - III

Time Max. Marks	: 3 hours : 100	PED SURG	2/D/12/29/III
	questions in order. on carries 10 marks.		
1.	Describe the common urodynamic findings in a child value neuropathic bladder after spina bifida repair? What are principles of management in these children?		+6
2.	Define tumor lysis syndrome (TLS). What are the metaborchanges in TLS? What is the management of TLS?	olic 3	+4+3
3.	Describe the treatment options in a neonate with poster urethral valves giving advantages and disadvantages each. What are the factors that determine prognosis in the babies?	of	+5
4.	Classify ureteric duplication anomalies? How are th anomalies treated?	ese 5	5+5
5.	What are the types of stem cell transplantation? What are advantages and disadvantages of umbilical cord blood as source of stem cell transplantation?		i+5
6.	Define the criteria for advising surgery in unilateral per ureteric junction obstruction? What are the limitations various imaging modalities in determining significant obstruction?	of	3+4
7.	What are the causes of impalpable testis? Describe evaluation and treatment of a child with bilateral impalpatestes.		3+7
8.	Enumerate the newer surgical options for treatment vesico-ureteric reflux. Compare and contrast the treatments with the standard ureteric reimplantatechnique?	ese	5+5
9.	Classify disorders of sexual differentiation. Outline principle of management of salt-losing congenital adress, hyperplasia?		5+5
10.	Write the NWTS-staging for Wilm's tumor? Describe	the 5	5+5

principles of management of bilateral Wilm's tumor?