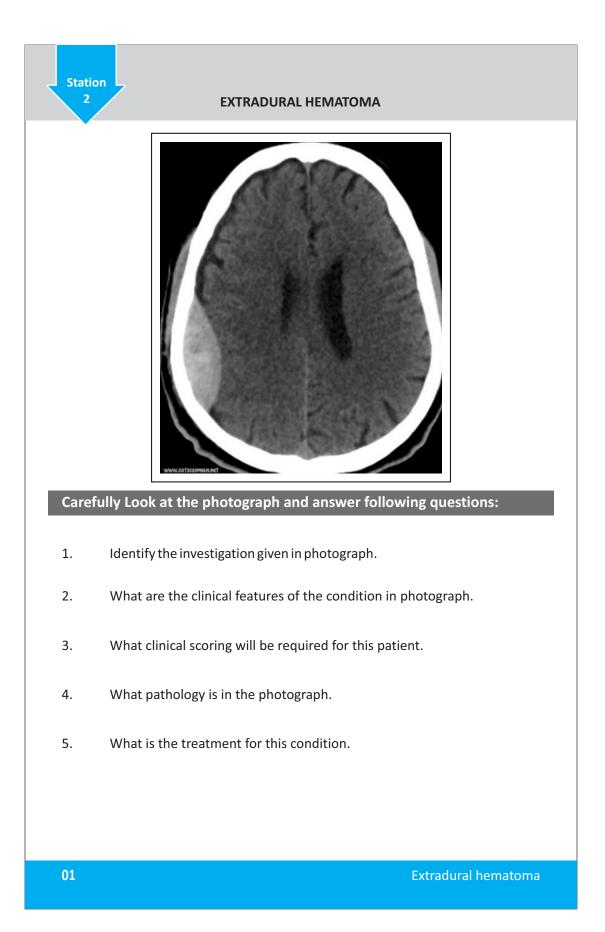
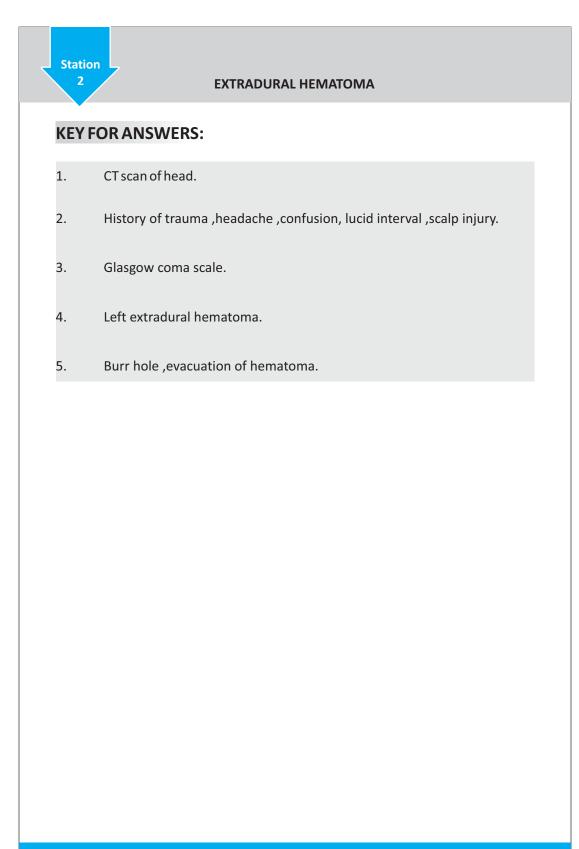
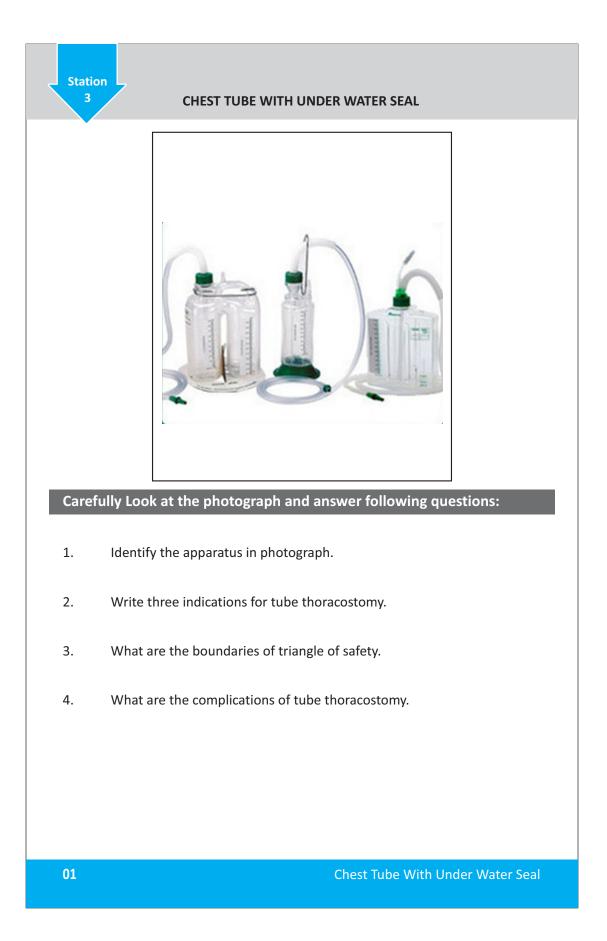
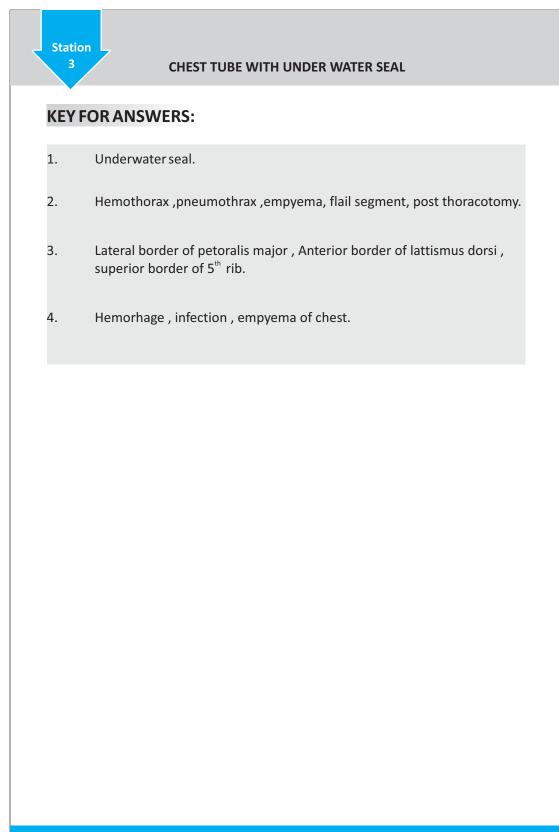


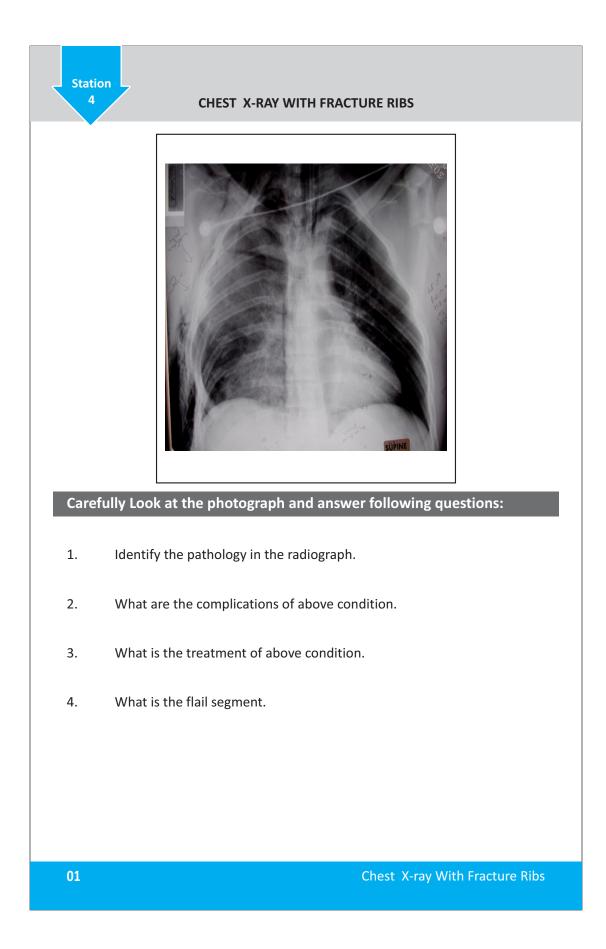
Static 1	DIABETIC ULCER		
KEY	KEY FOR ANSWERS:		
1.	Ulcer at the lateral border of sole of foot.		
2.	It is the ratio of systolic blood pressure at ankle and arm. Normal ABPI > 0.9 Ischemic Limb ABPI < 0.9 In claudication ABPI 0.8-0.6 In critical ischemia < 0.5		
3.	Examination of peripheral pulses and neurological examination.		
4.	X-ray of foot and random blood sugar.		
5.	Surgical debridement and regular dressings.		
01	Diabetic Ulcer		



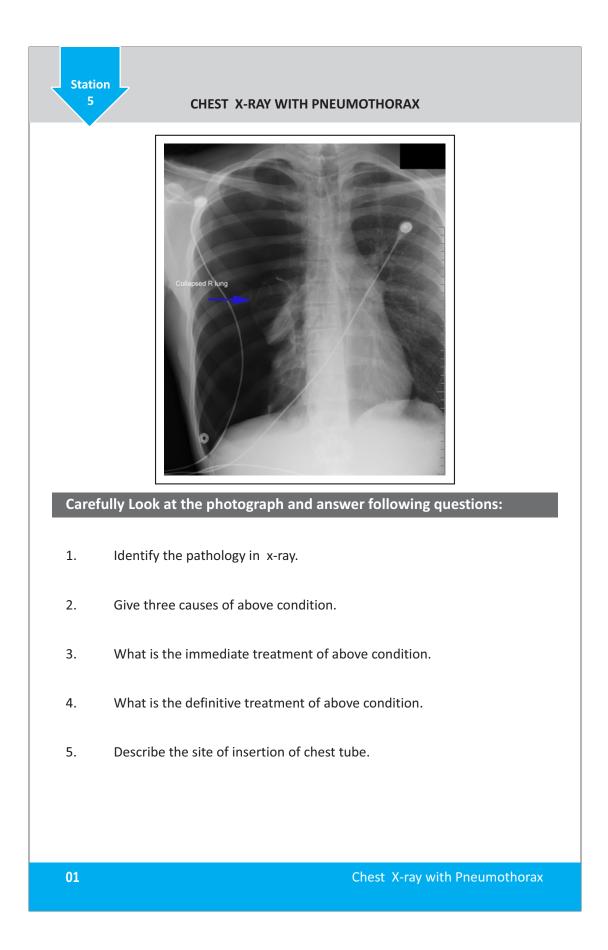


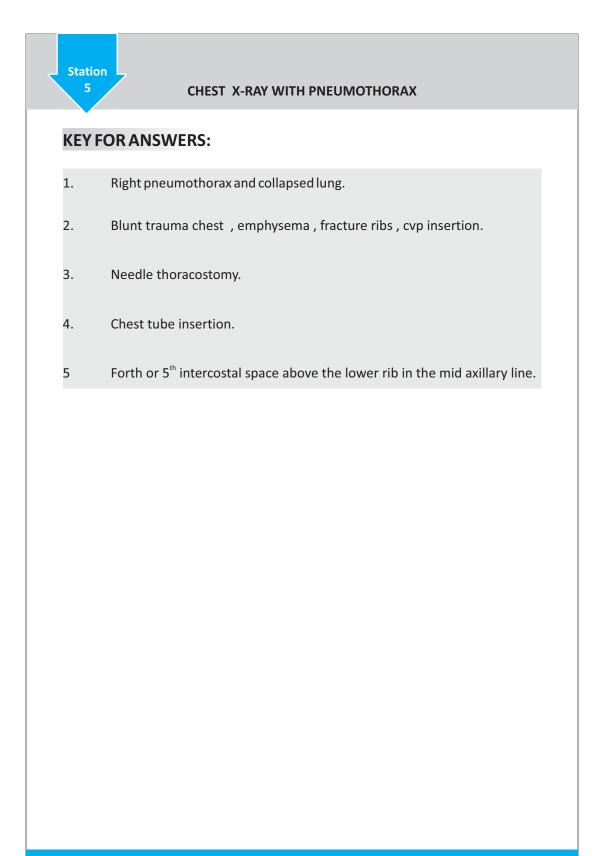


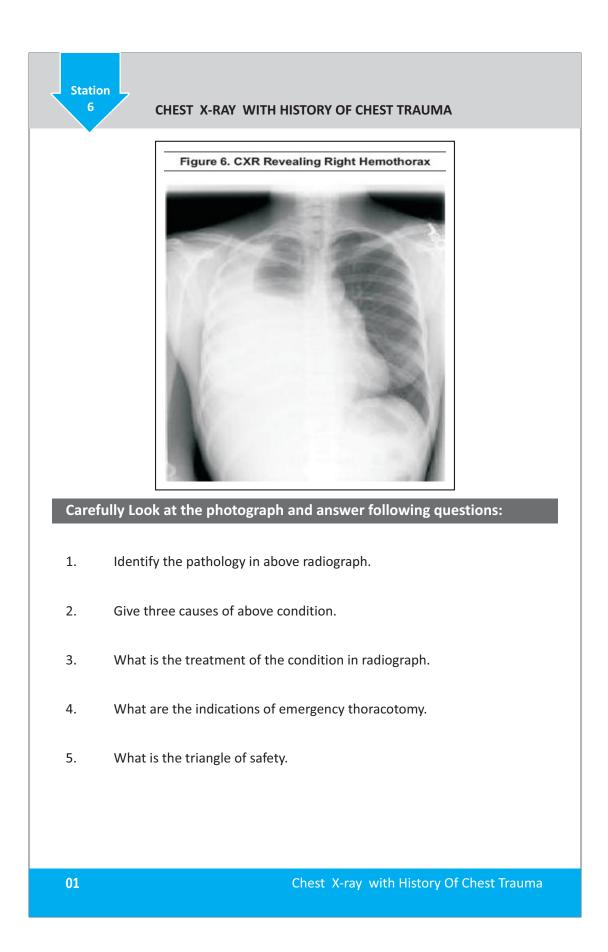


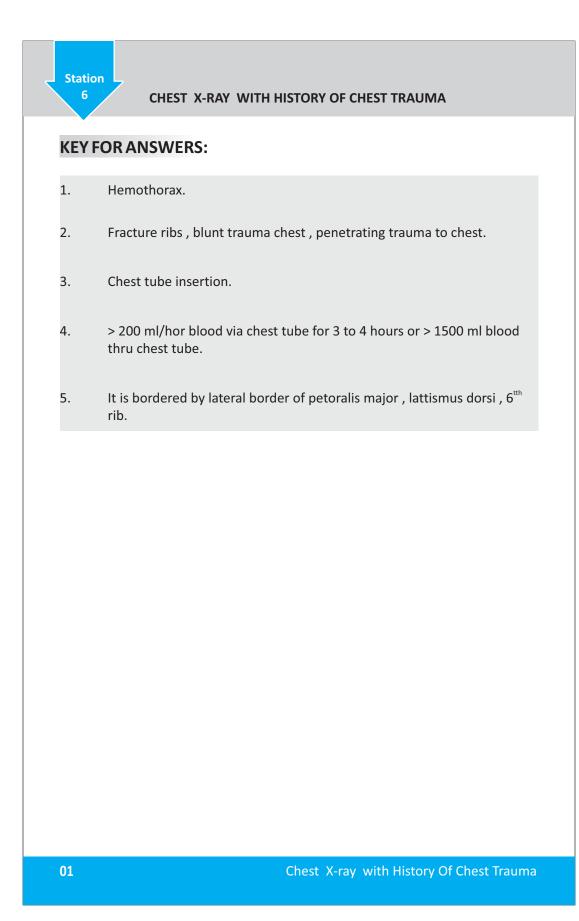


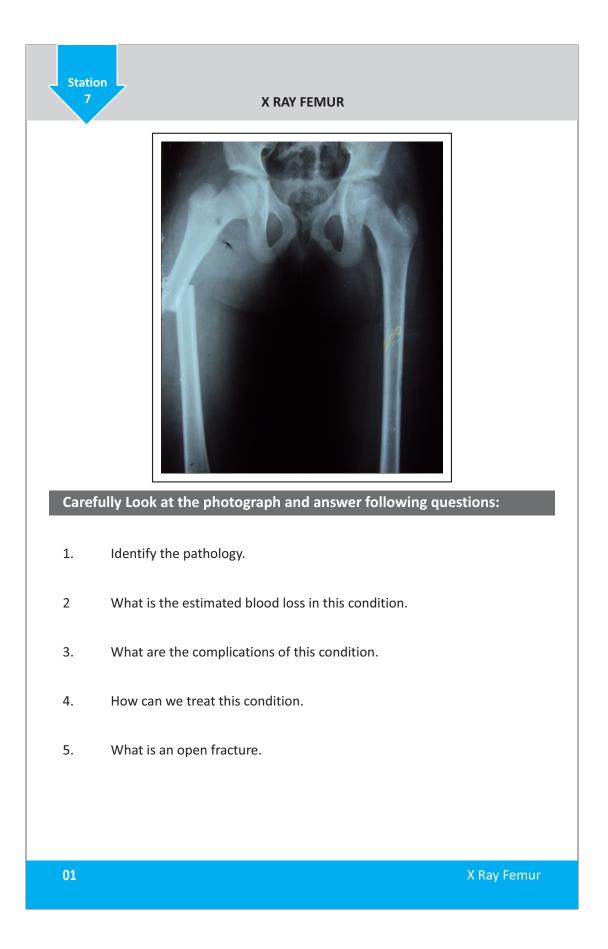
Station 4	CHEST X-RAY WITH FRACTURE RIBS		
KEY FC	KEY FOR ANSWERS:		
1.	Multiple right rib fractures.		
2.	Pulmonary contusions , pneumothorax , hemothorax.		
3.	Chest tube insertion and analgesia.		
	When fracture of multiple ribs occurs at two sites , a segment of broken nonstarates paradoxied movement on repiration is called flail segment.		
5.	Chest tube and positive pressure ventilation.		
01	Chest X-ray With Fracture Ribs		

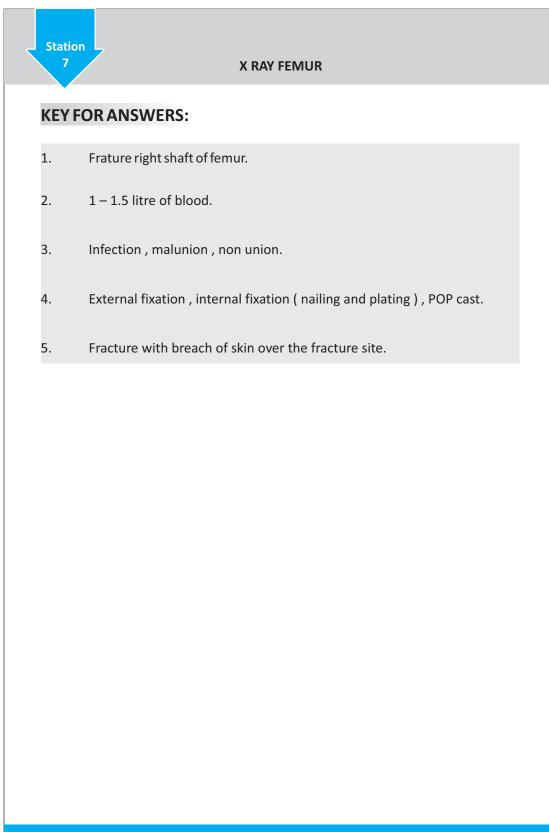




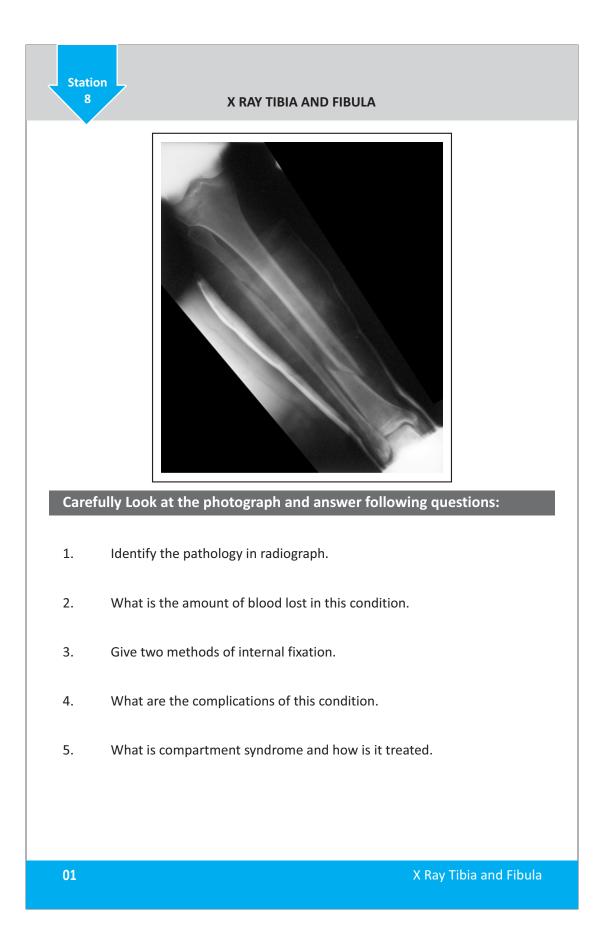


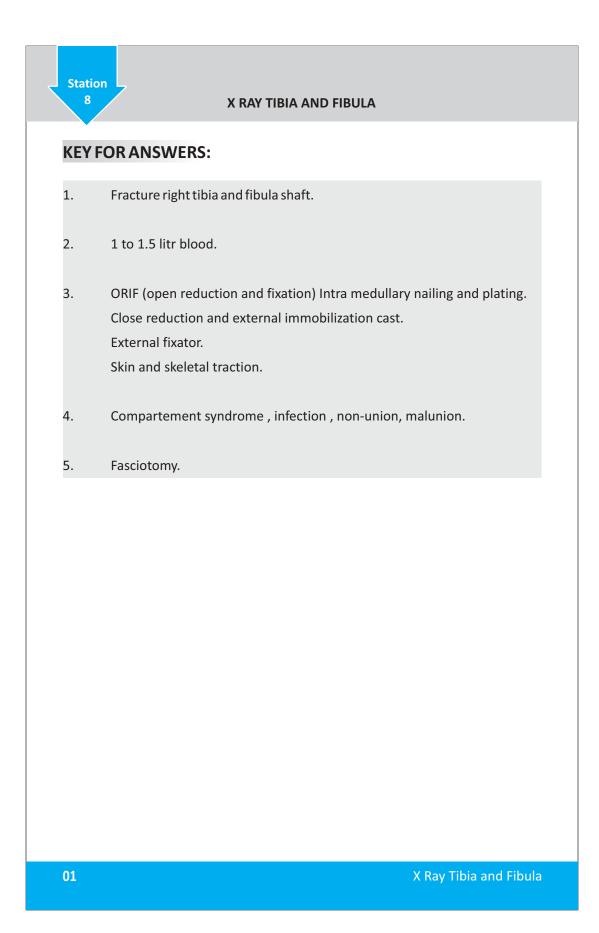


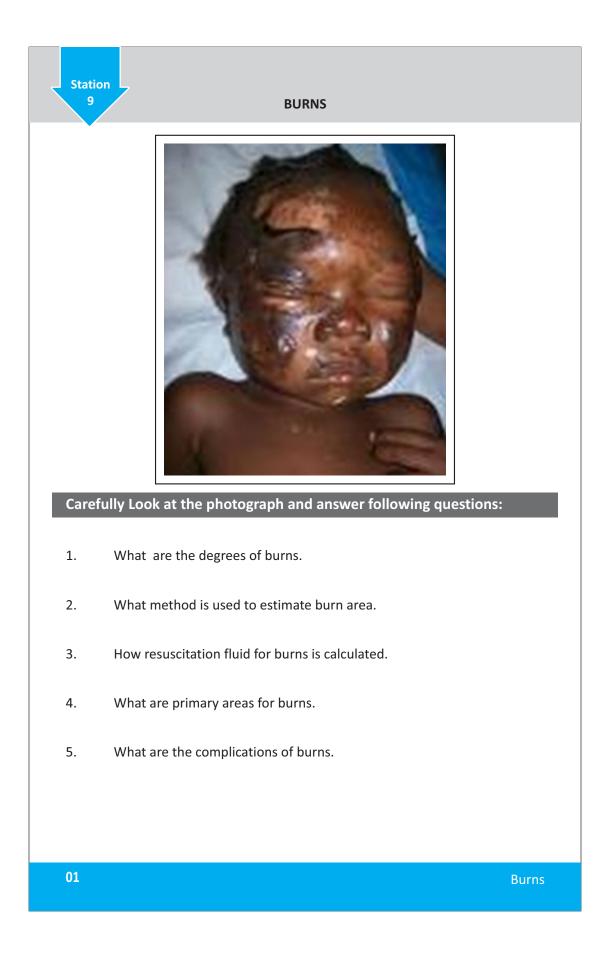




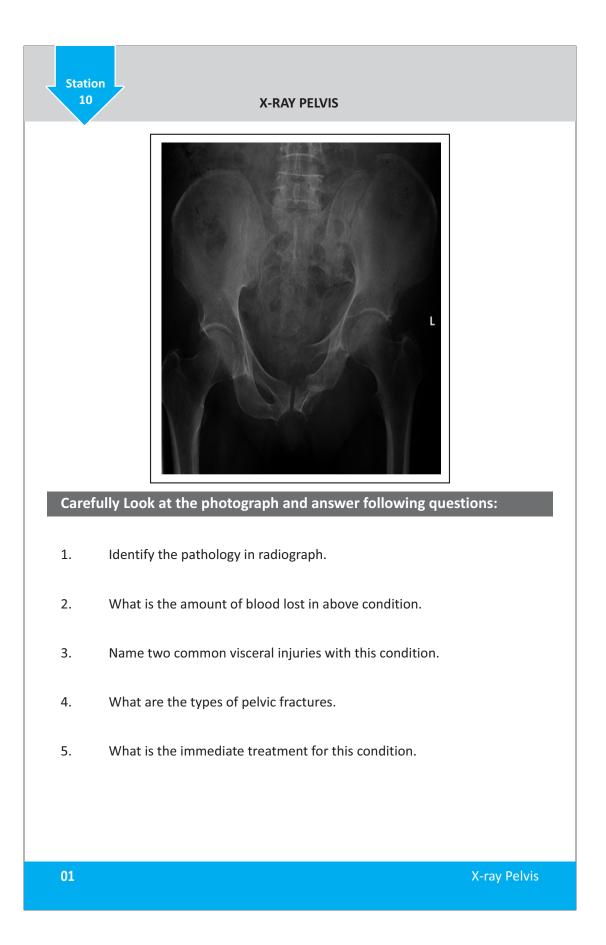
X Ray Femur

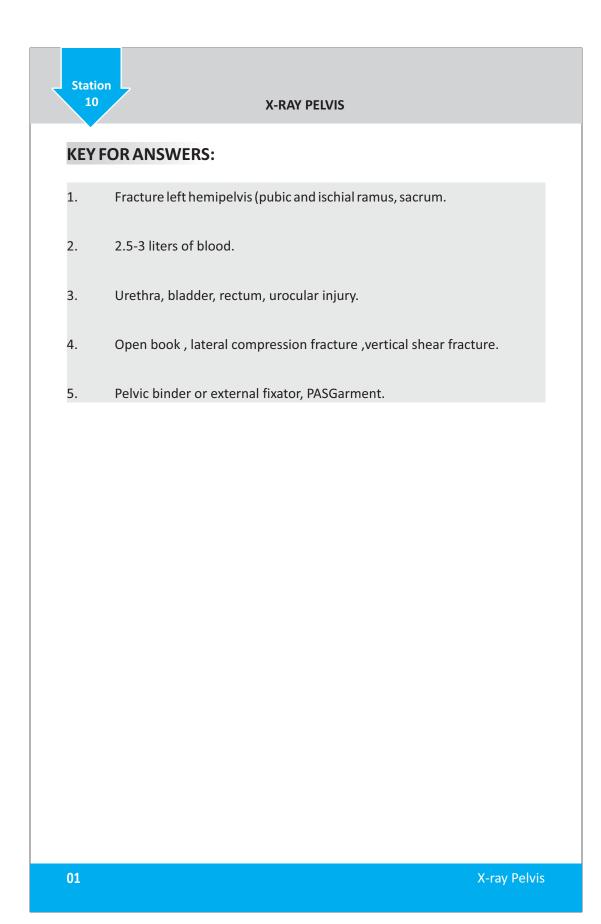


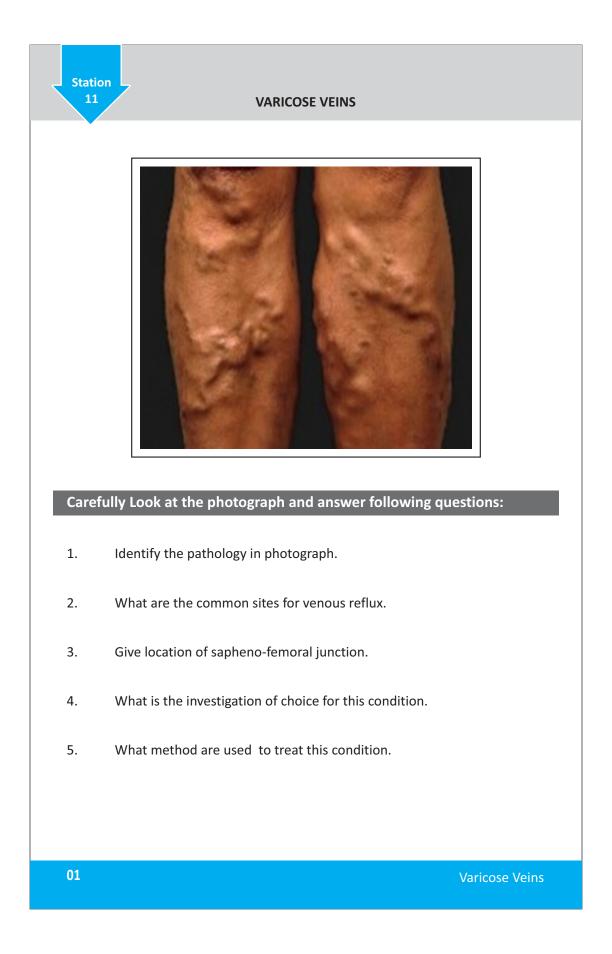


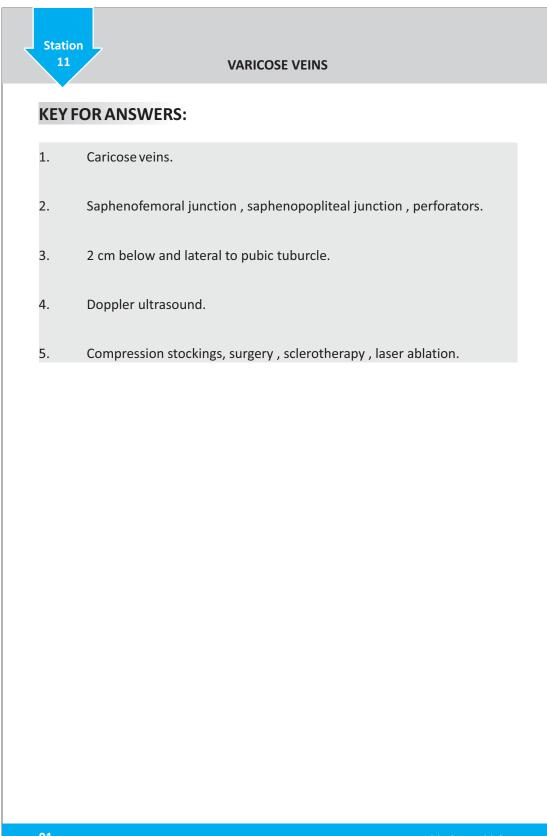


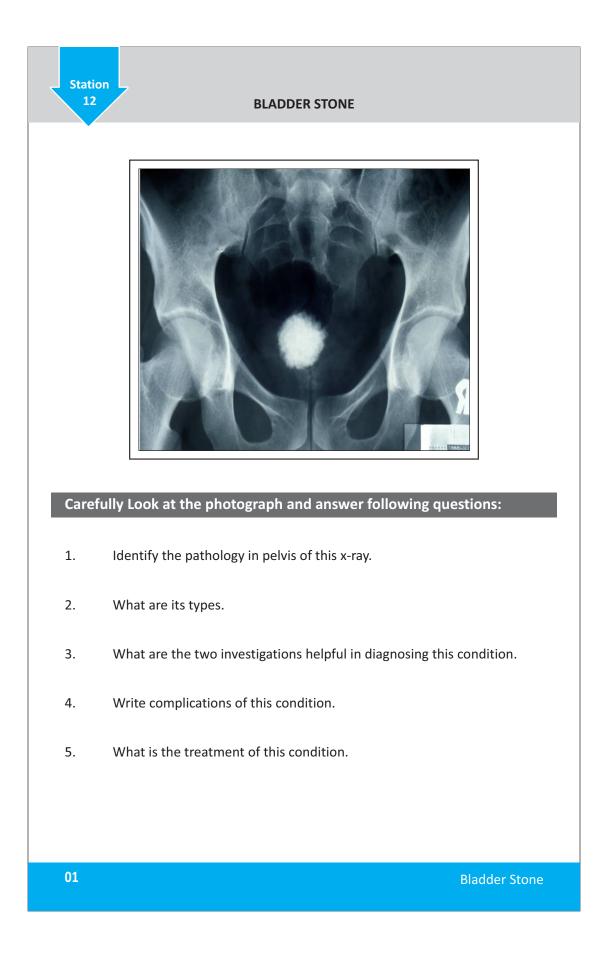
Statio 9	BURNS		
KEY	KEY FOR ANSWERS:		
1.	Three degrees first degree, 2 <sup>nd</sup> degree, 3 <sup>rd</sup> degree.		
2.	Rule of nine.		
3.	Parkland formula. Total fluid: 4ml x body weight in kg x % body area burn. ½ fluid in first 8 hours. ½ fluid in next 16 hours.		
4.	Hands , face ,perineum ,feet.		
5.	Inhalational injury, infection, fluid loss, renal faliure, contractures.		
01		Burns	

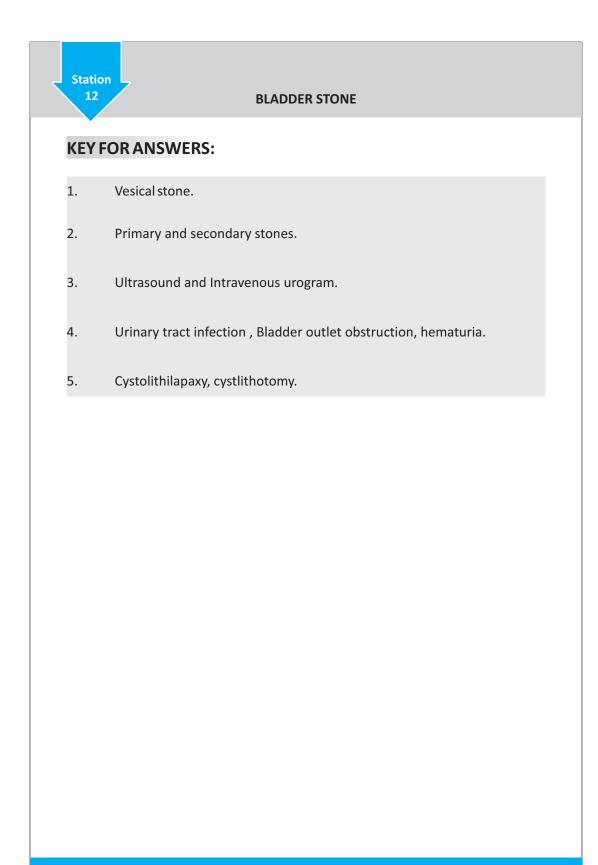


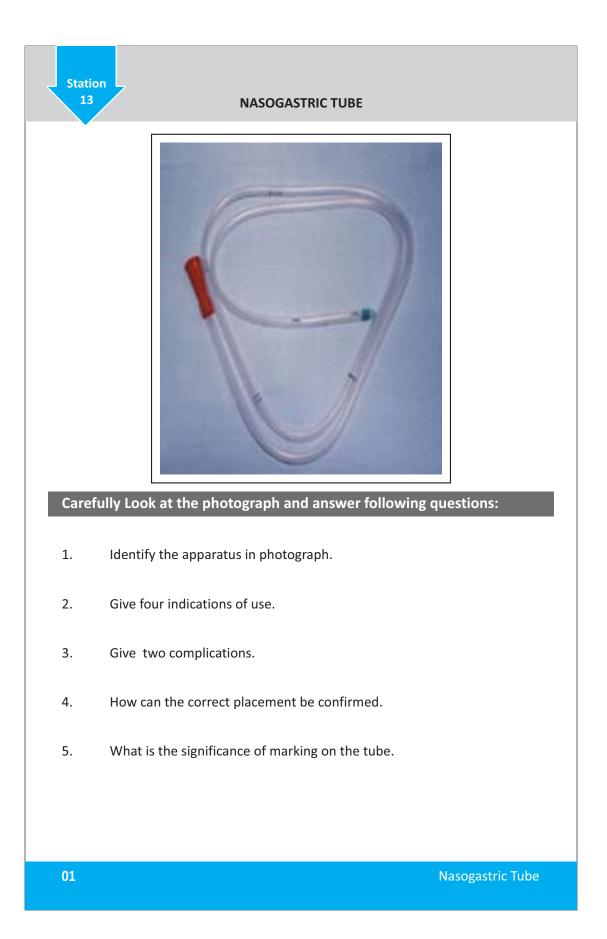


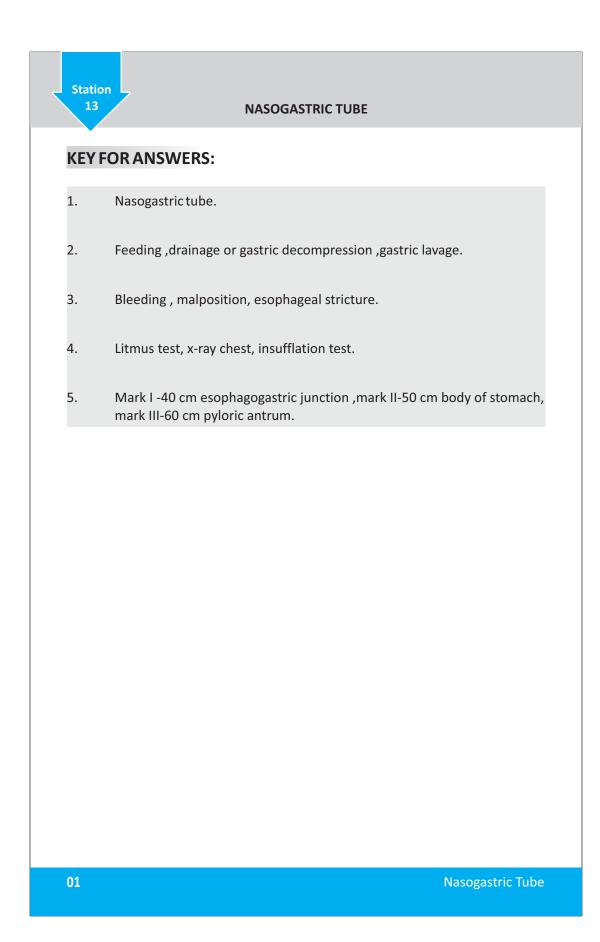


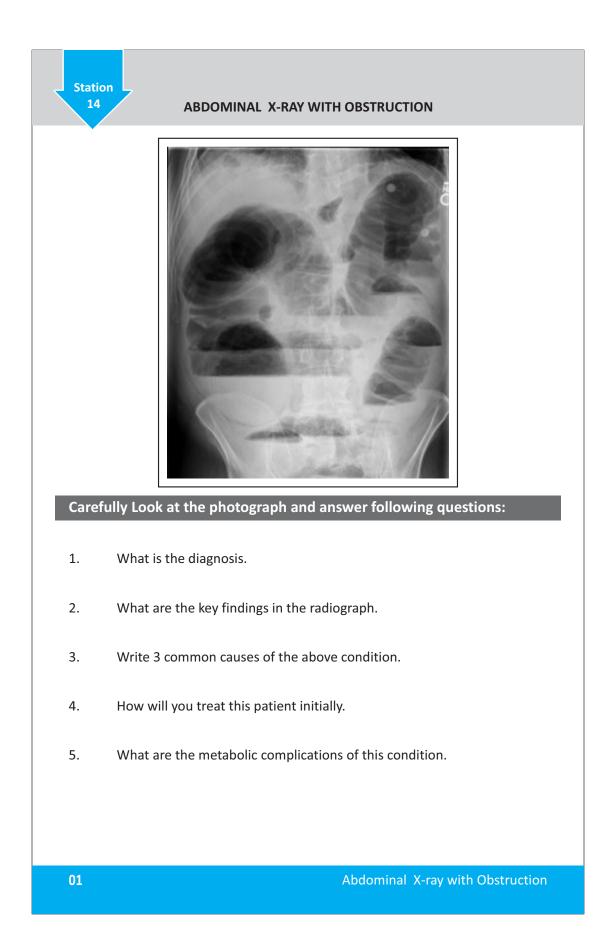


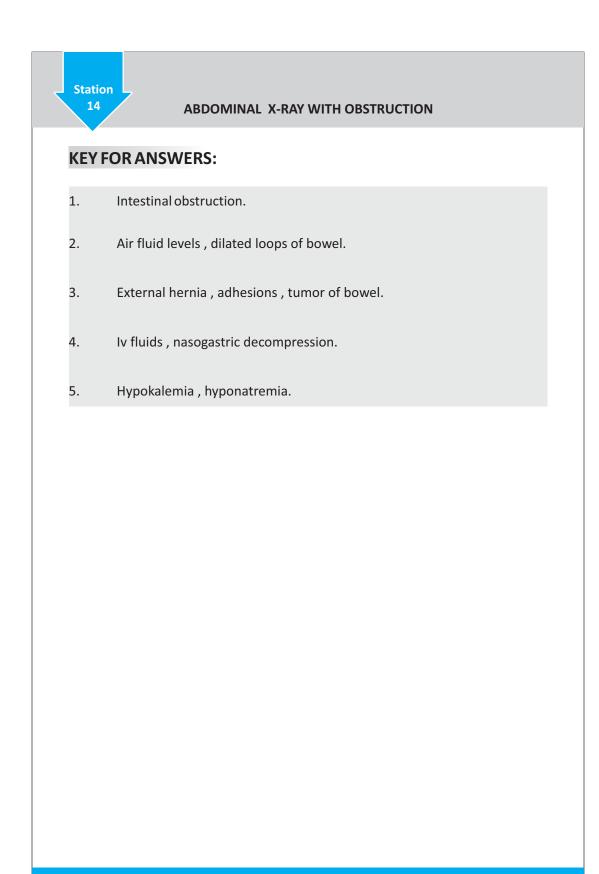


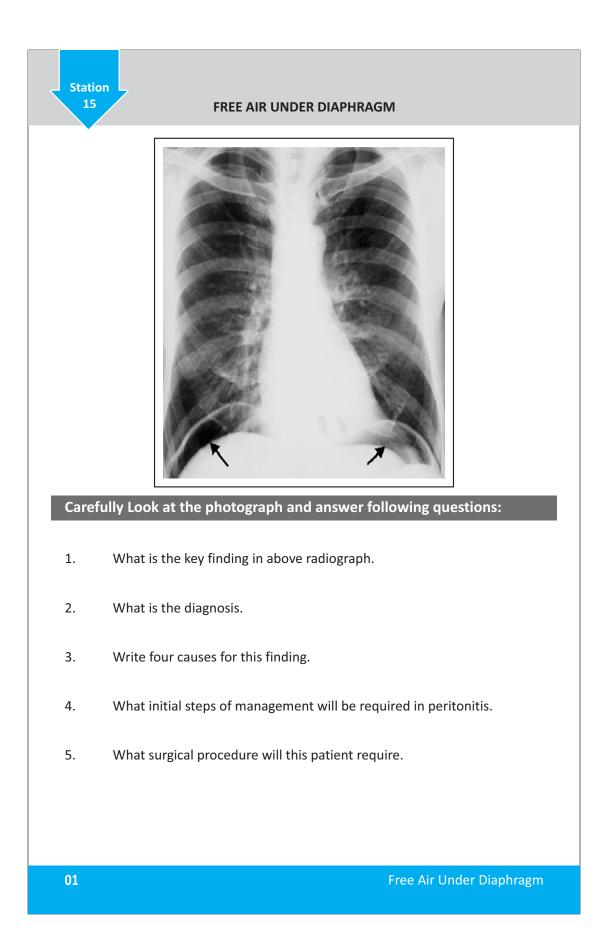




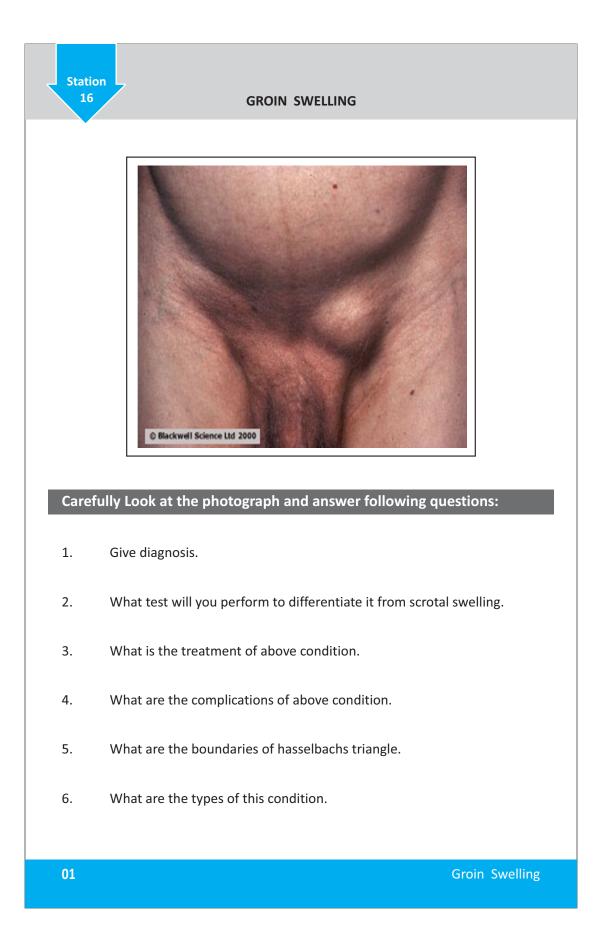


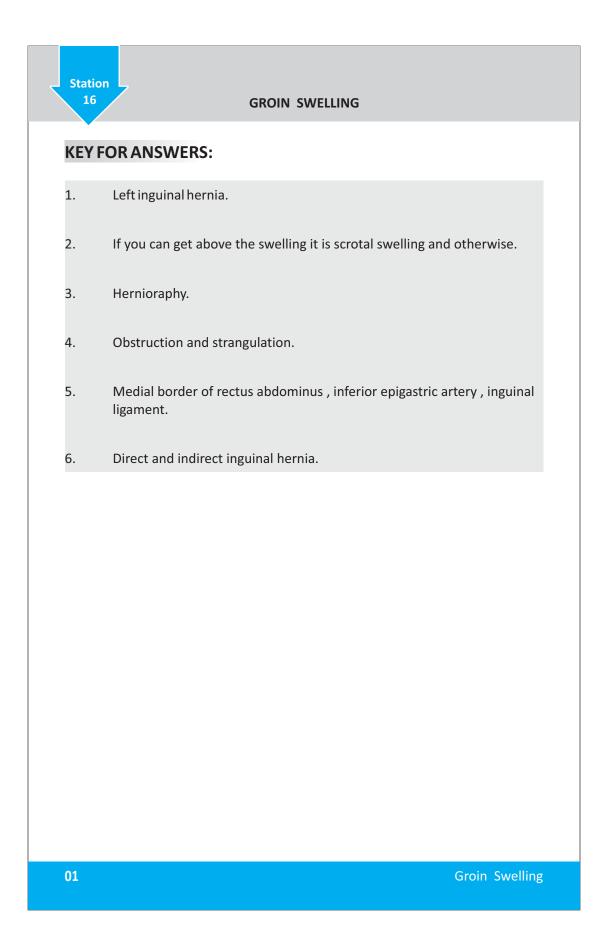


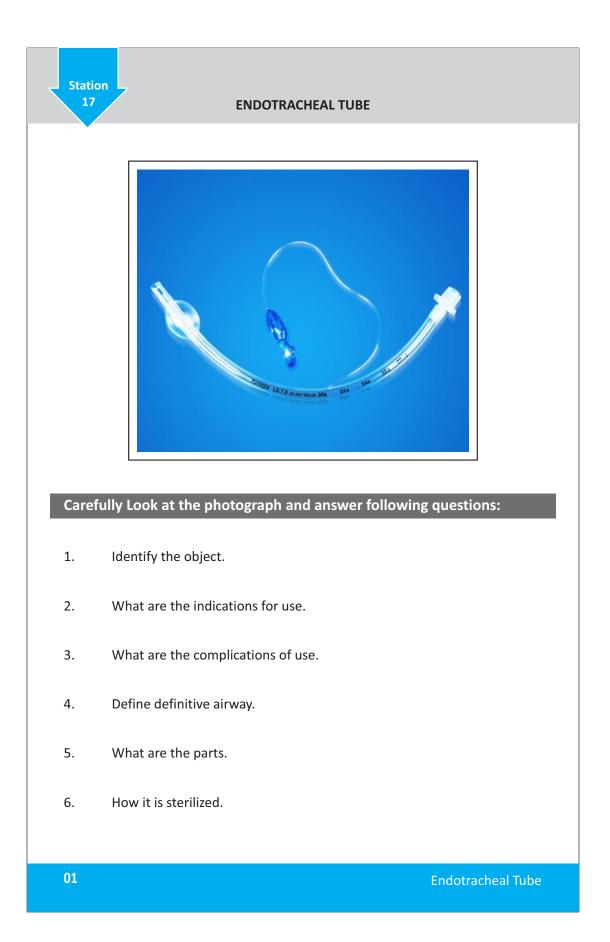


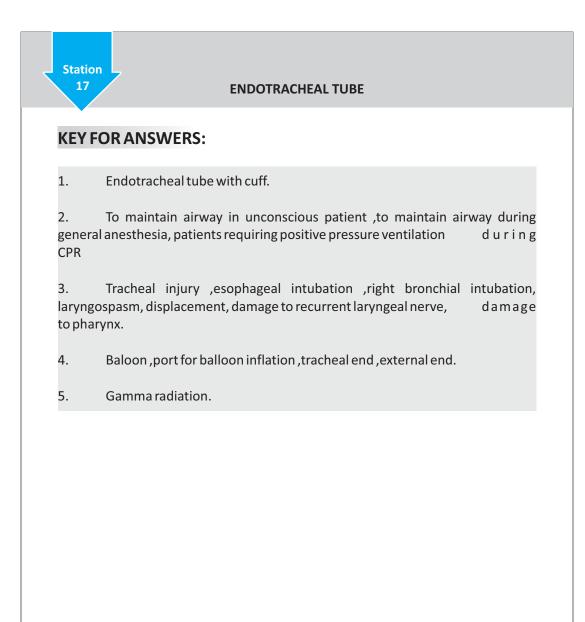


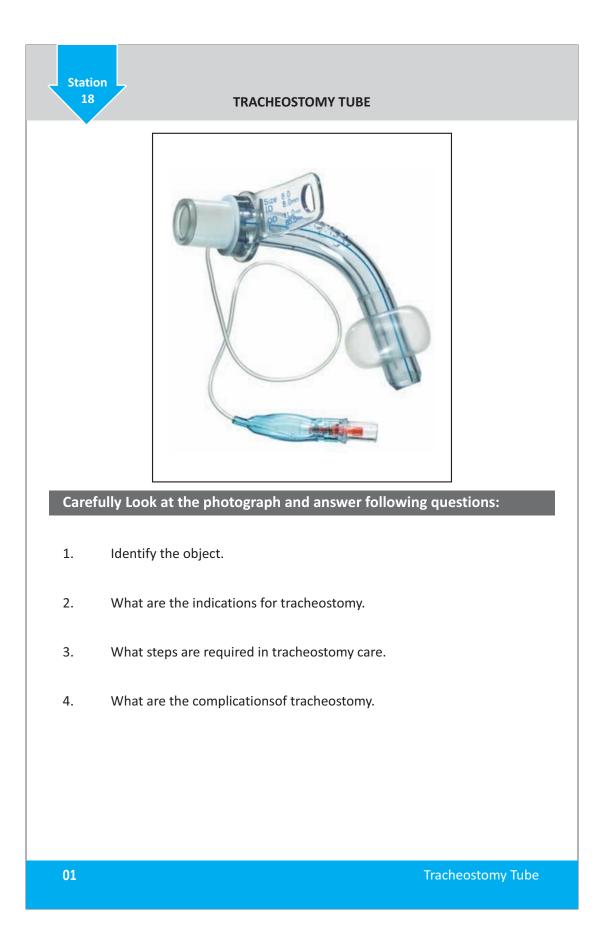
Stati 15				
KEY	KEY FOR ANSWERS:			
1.	Free air under diaphragm.			
2.	Perforation of hollow viscera. Duodenum, stomach, small or large bowel.			
3.	Visceral perforation, Post laporotomy or laproscopy Penetrating injury to abdomen.			
4.	NPO. IV fluids. IV antibiotics. Nasogastric decompression.			
5.	Laporotomy and corrective procedure.			
01	Free Air Under Diaphragm			

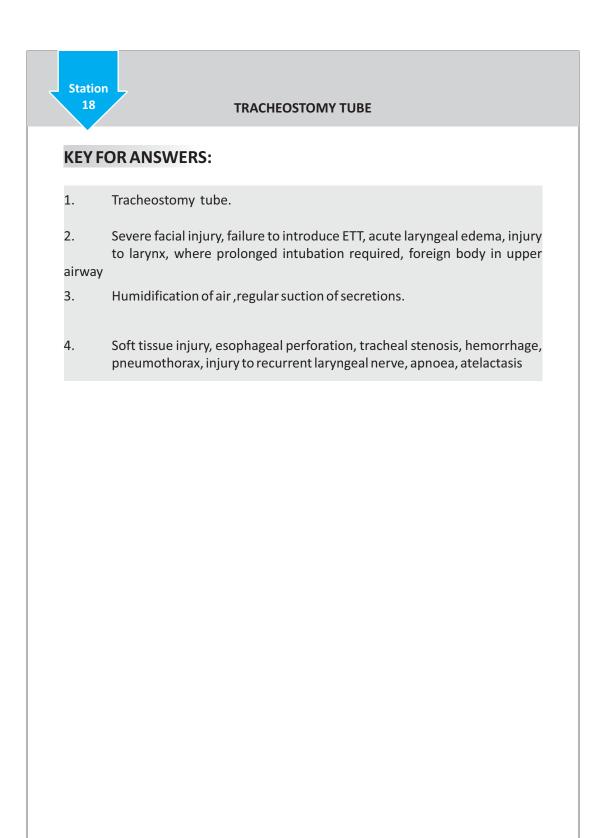


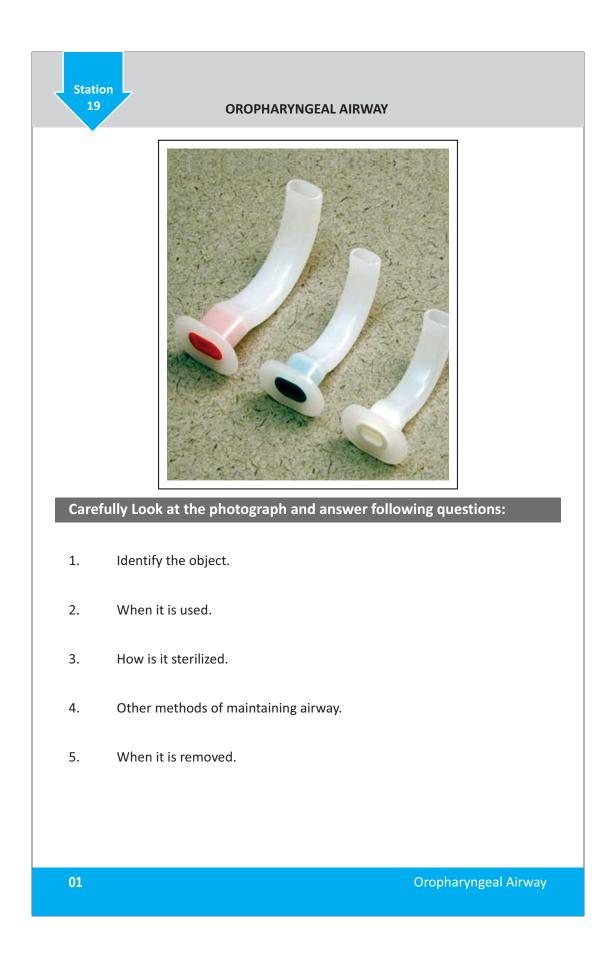


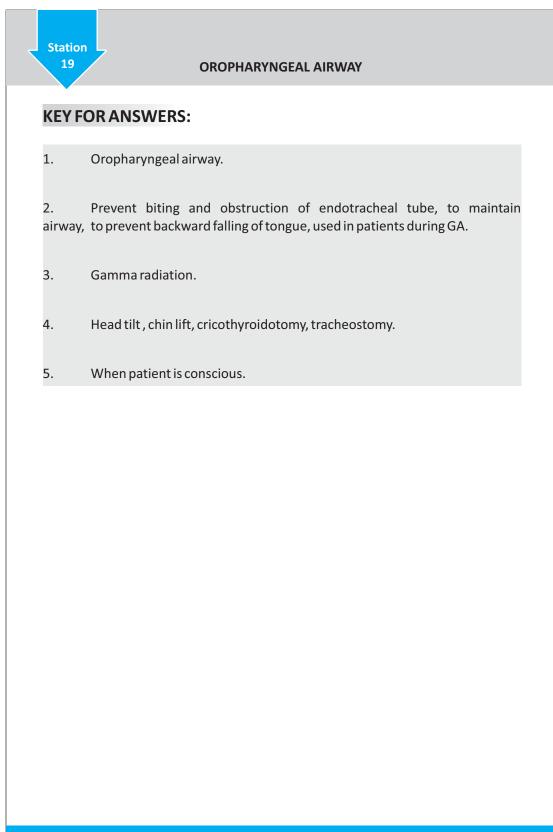


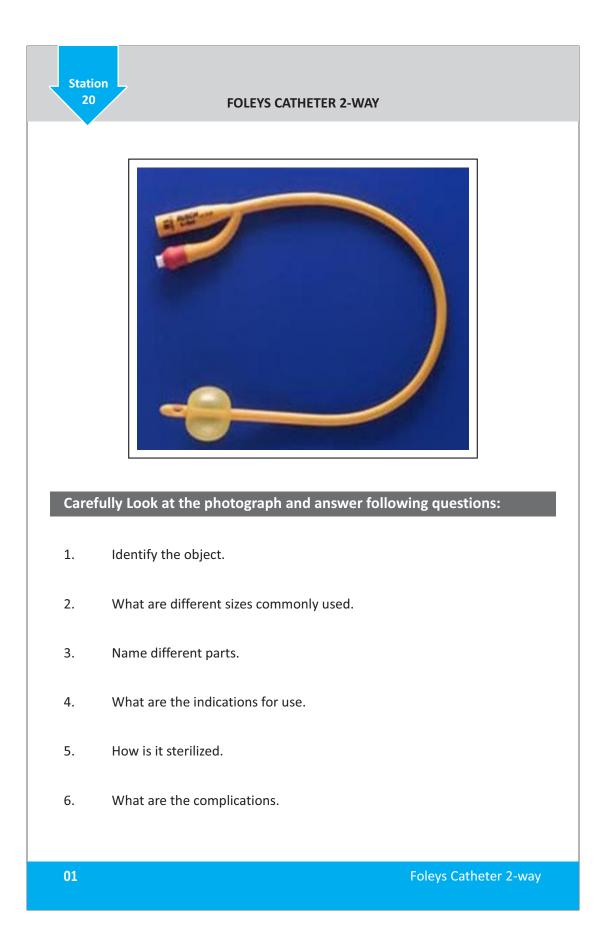




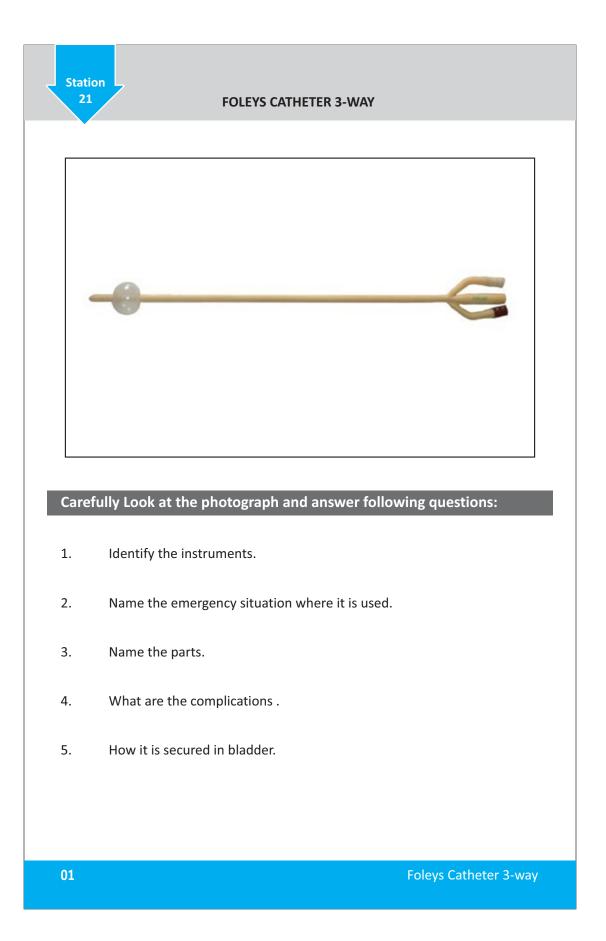


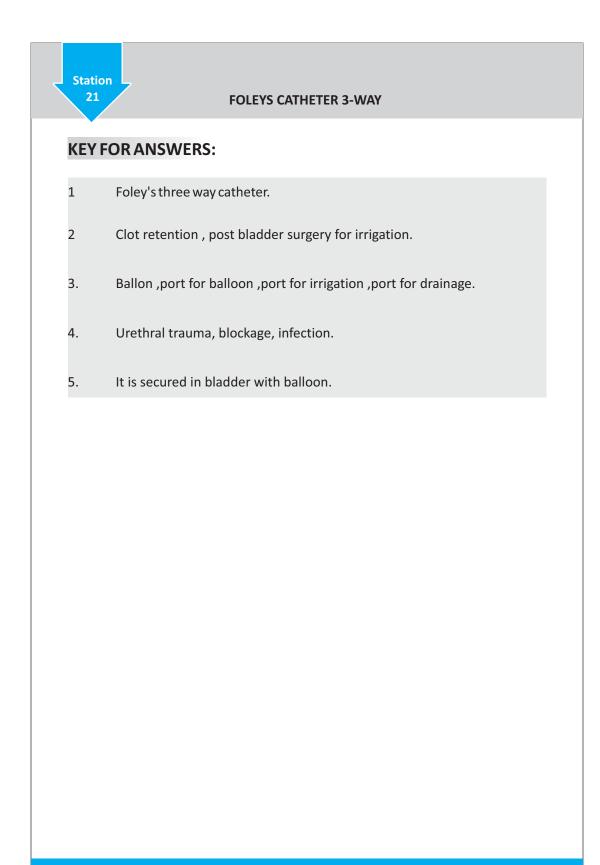


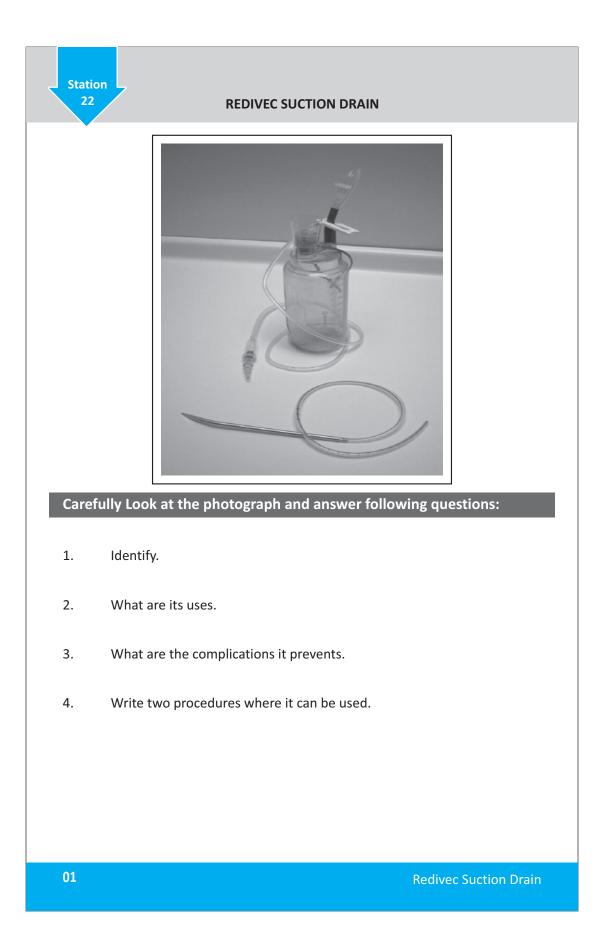


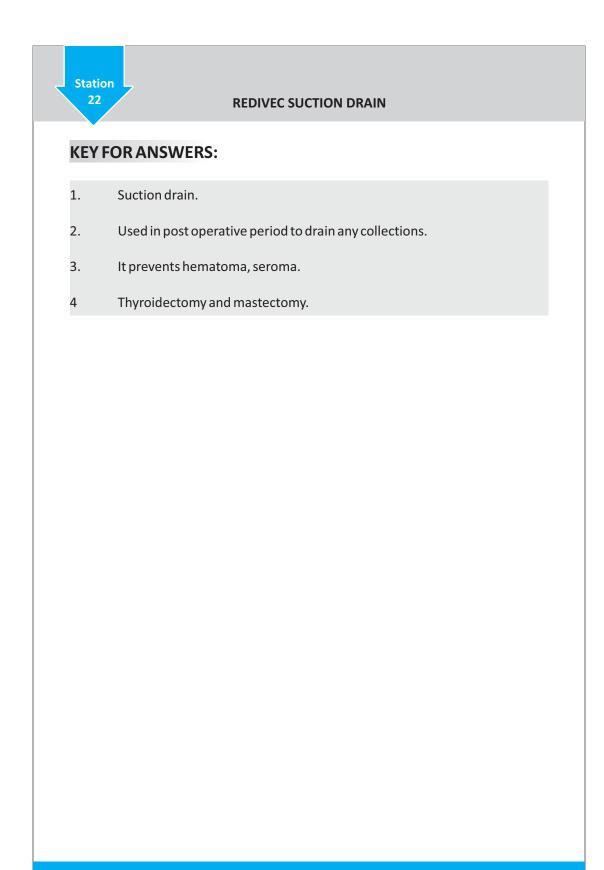


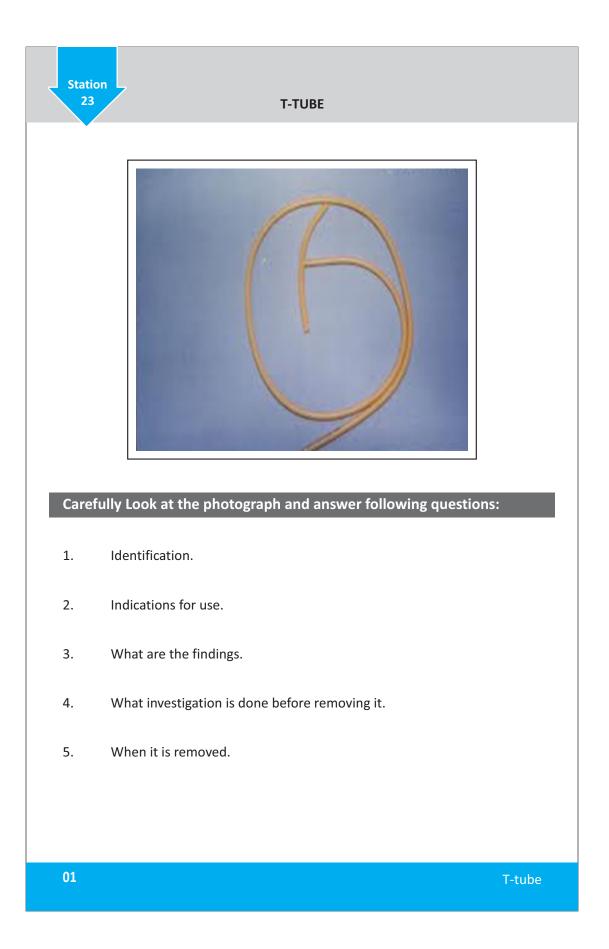
Statio 20	FOLEYS CATHETER 2-WAY		
KEY F	KEY FOR ANSWERS:		
1.	Foley's catheter.		
2.	14, 16, 18, 20, 22, 24 fr.		
3.	Balloon , port for injecting fluid in balloon, port for urine drainage.		
investi	Medical indications unconscious patient, intravesical chemotherapy, to are residual urine, to monitor urine output, to collect urine for gation Surgical indications urinary retention, bladder surgery, pelvic y, renal failure.		
5.	Gamma radiation.		
6.	Infection, urethral trauma.		

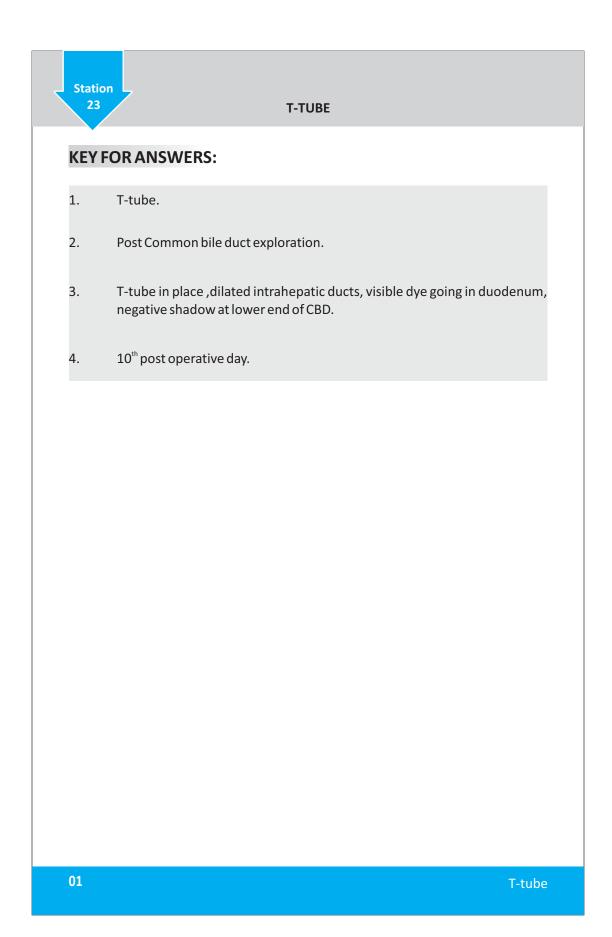


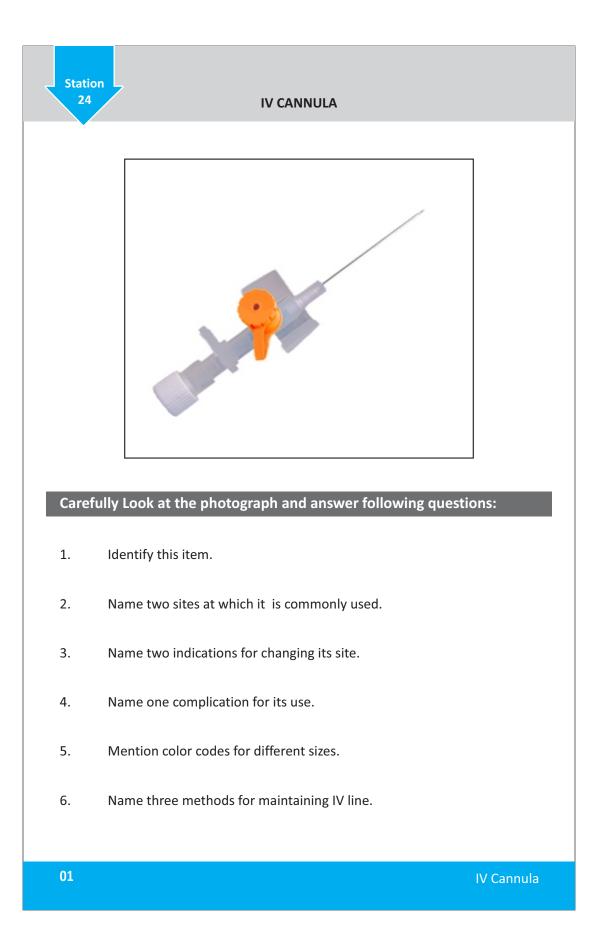


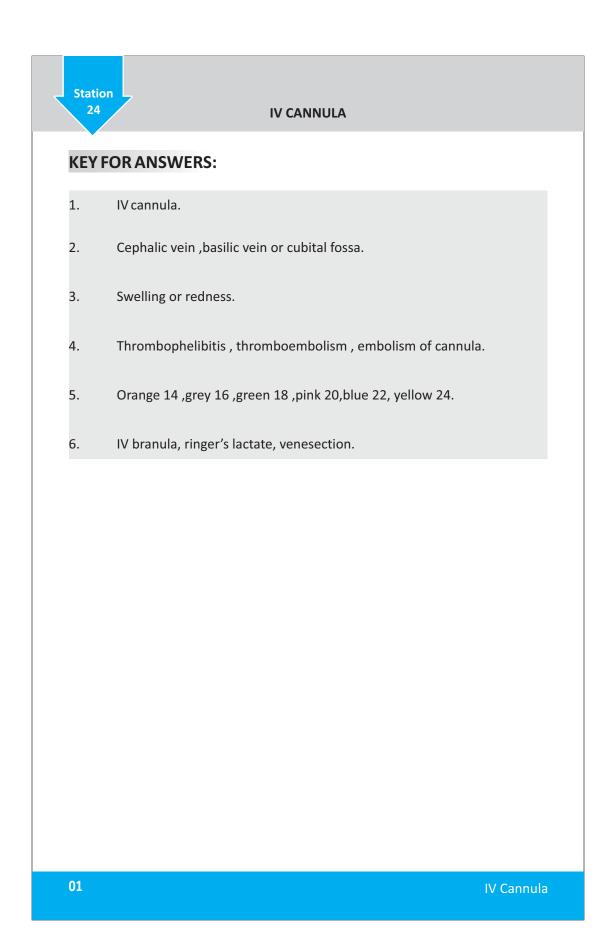


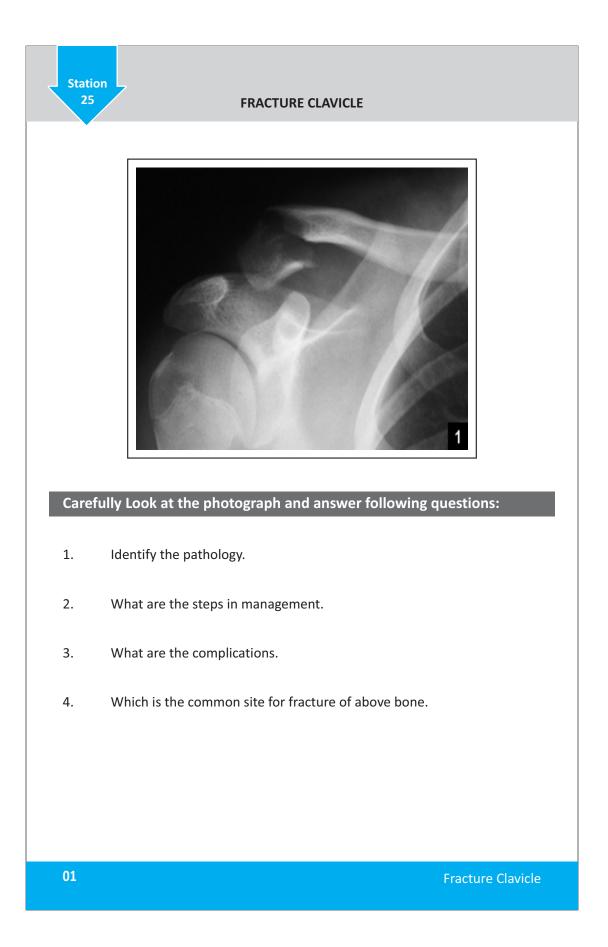




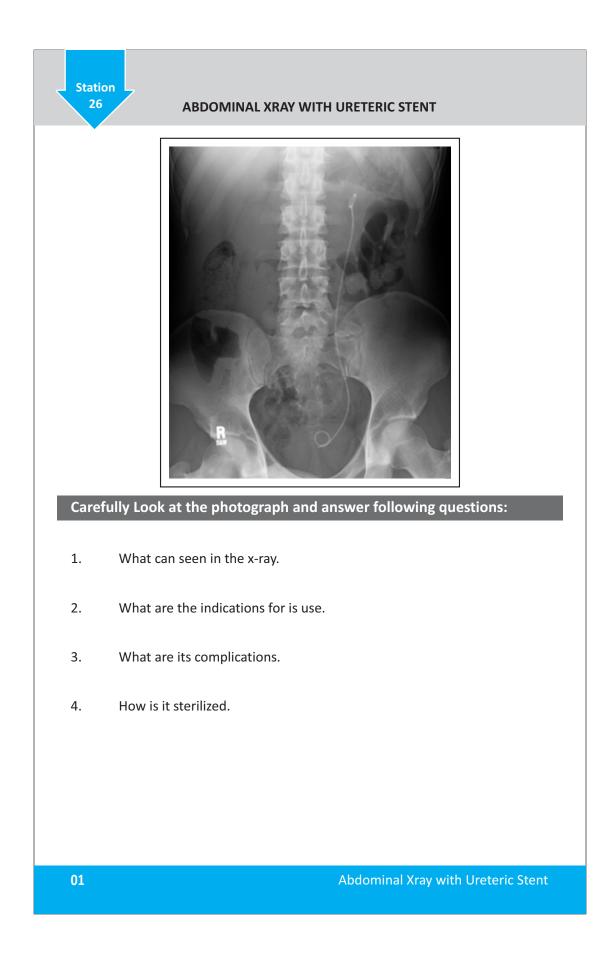


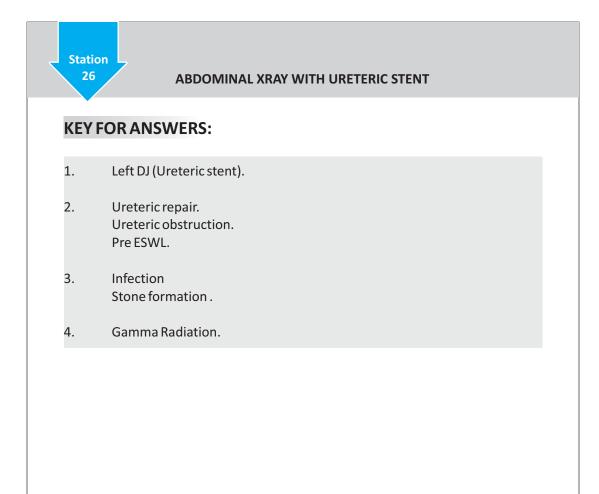


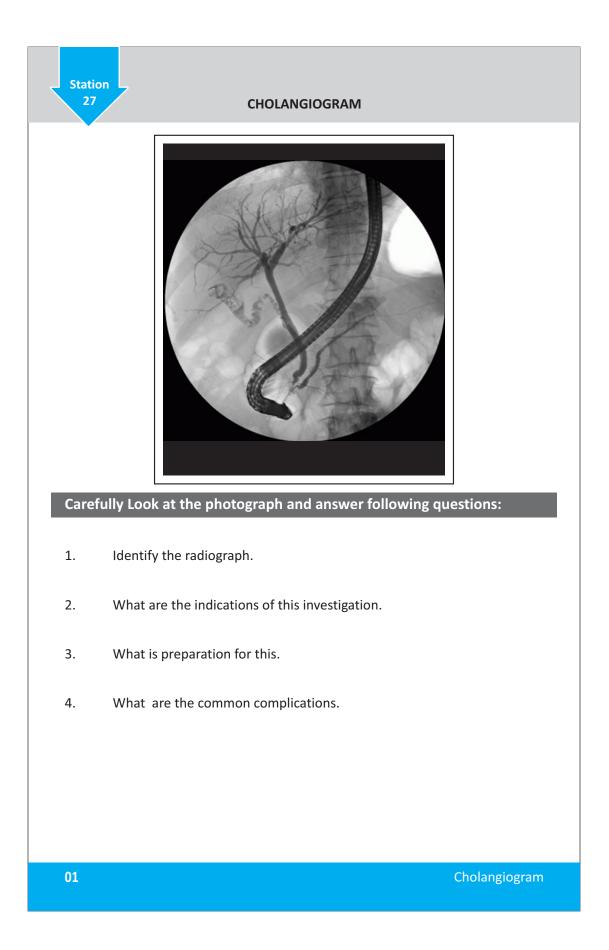


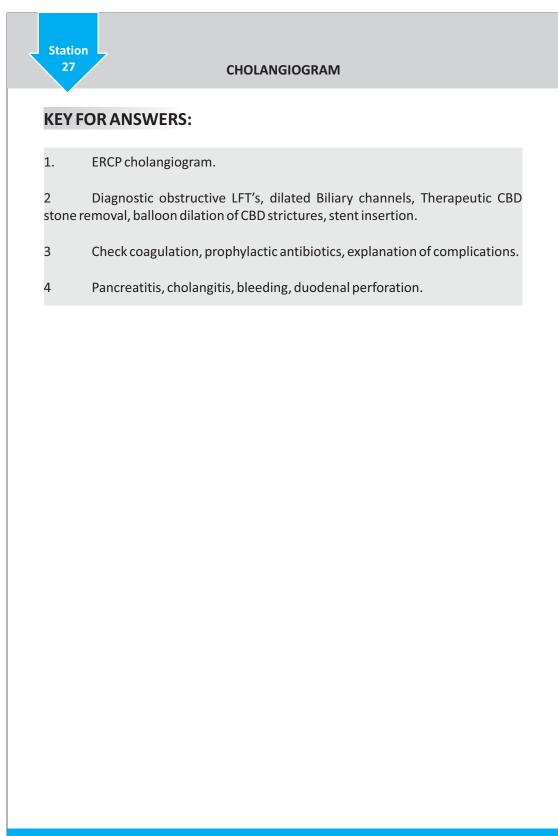


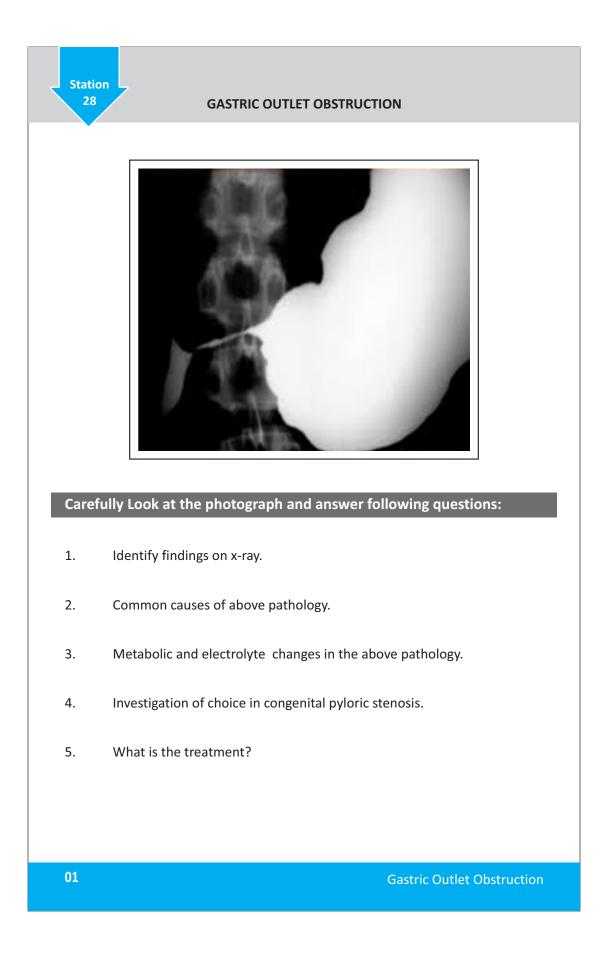
Statio 25	FRACTURE CLAVICLE	
KEY FOR ANSWERS:		
1.	Fracture of Right clavicle.	
2.	Analgesia. Collar and cuff sting for 8 weeks. Internal fixation.	
3.	Non Union. Mal-union. Shoulder stiffness. Injury to subclavian vein or brachial plexus.	
4.	At junction of the middle and outer 1/3.	
01	Fracture Clavicle	



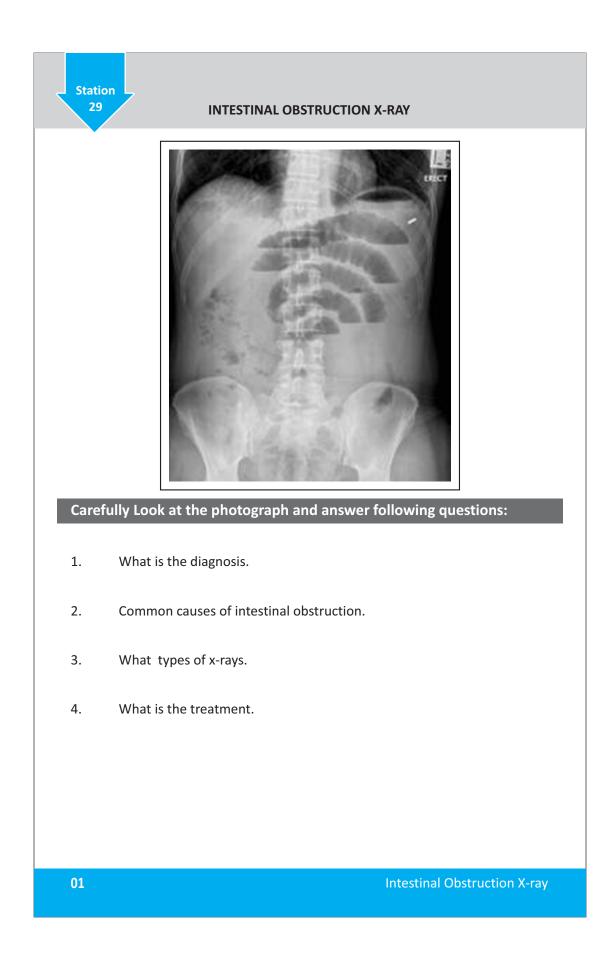


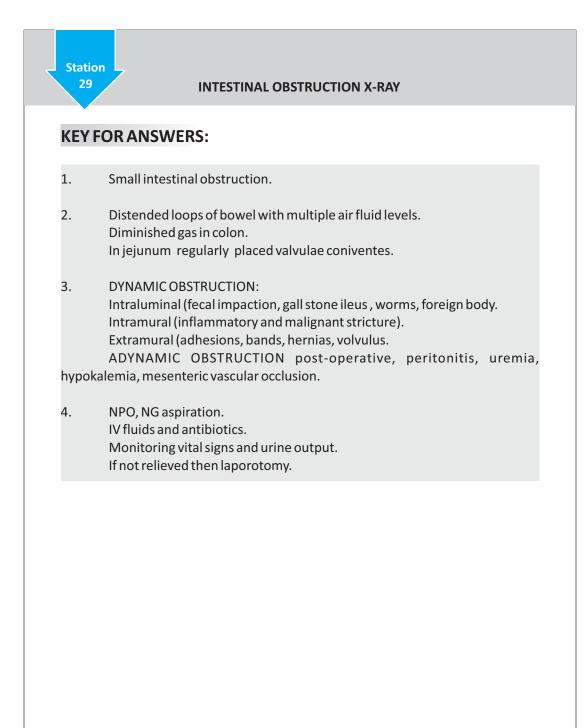


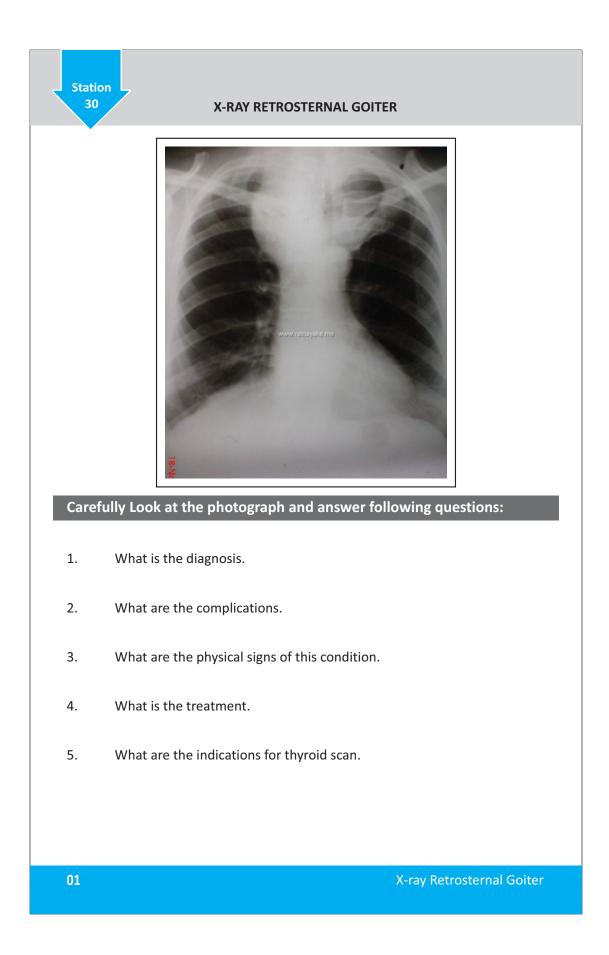


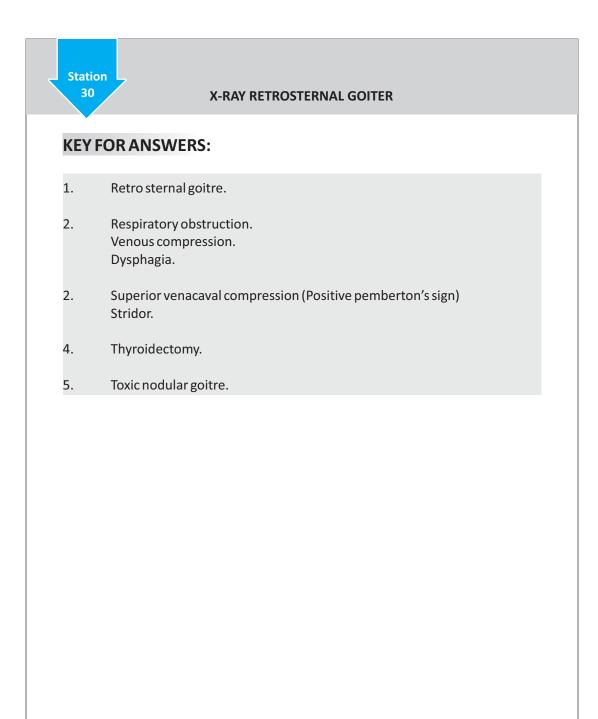


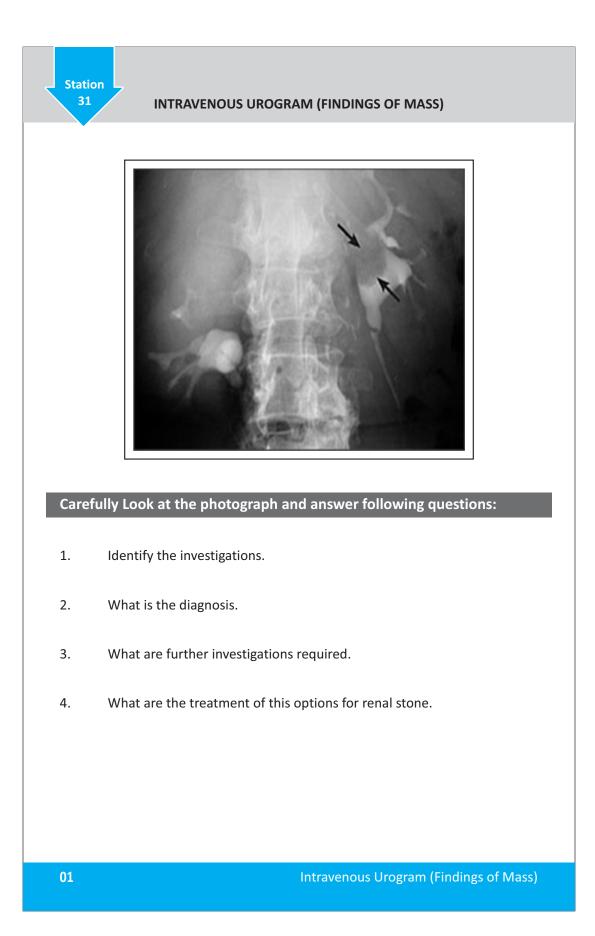


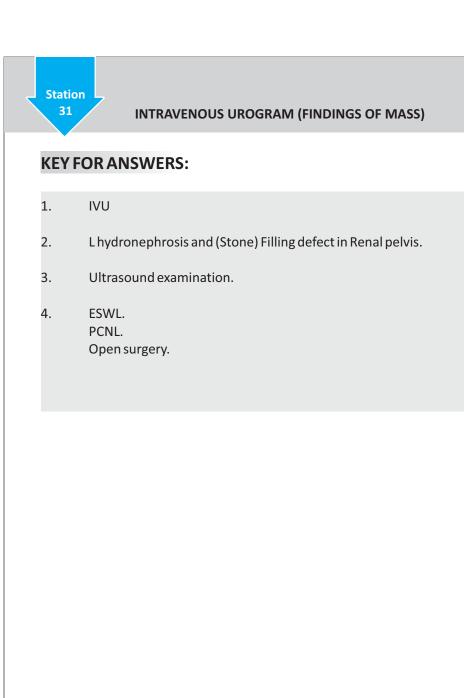


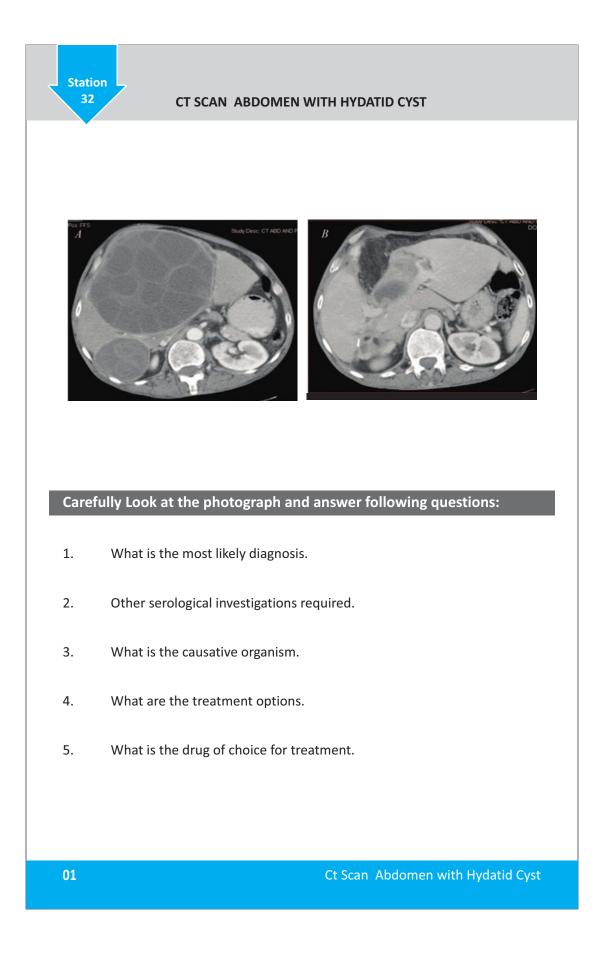


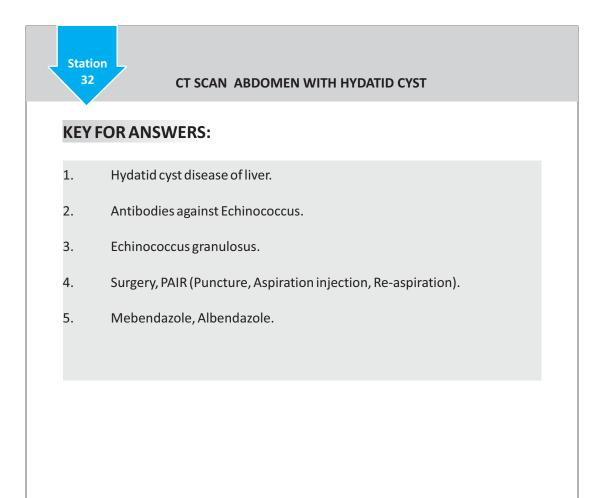


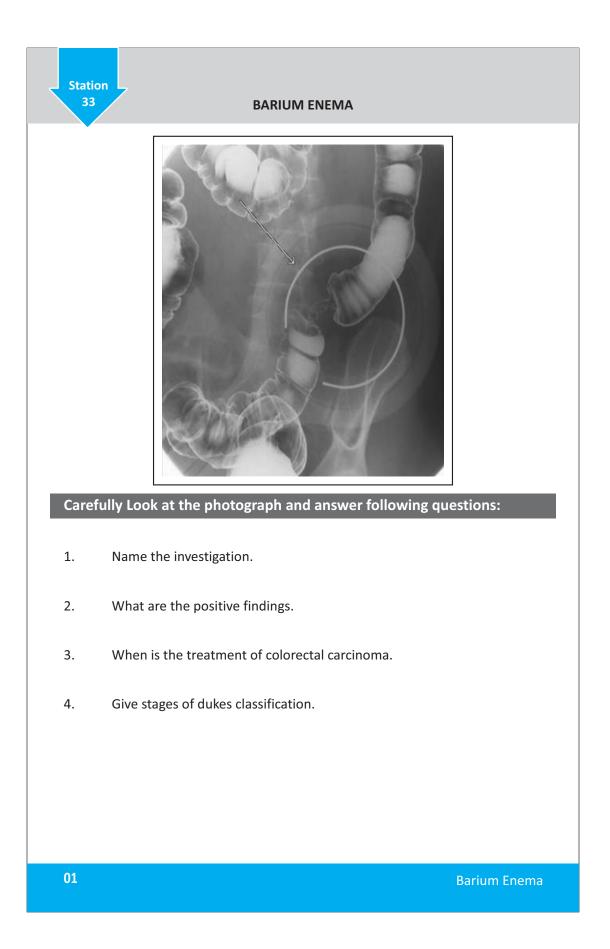


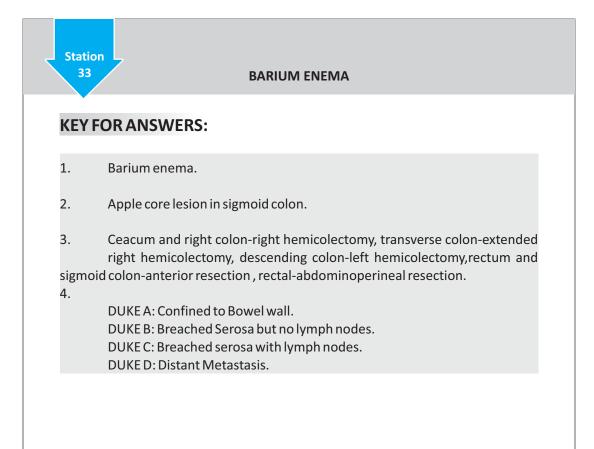


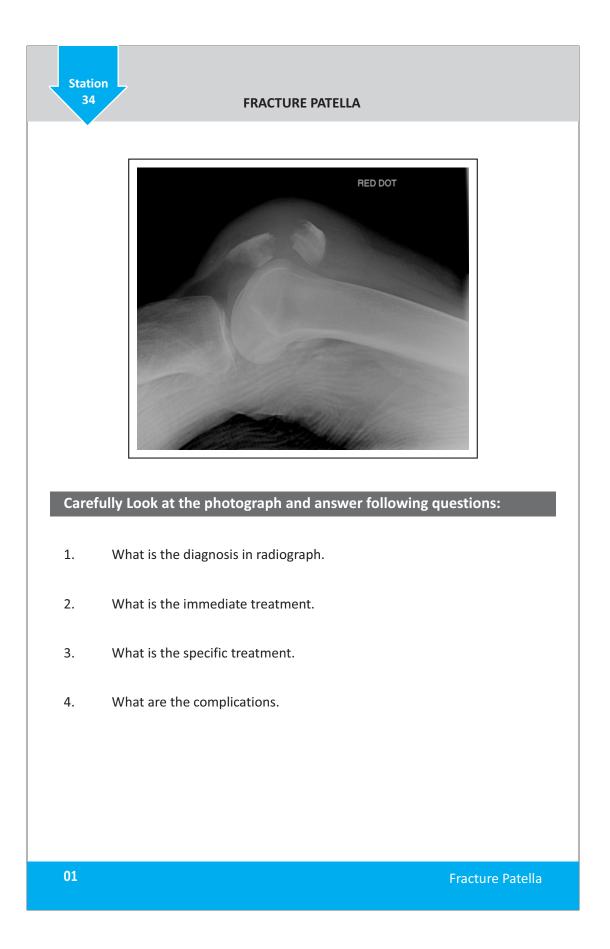


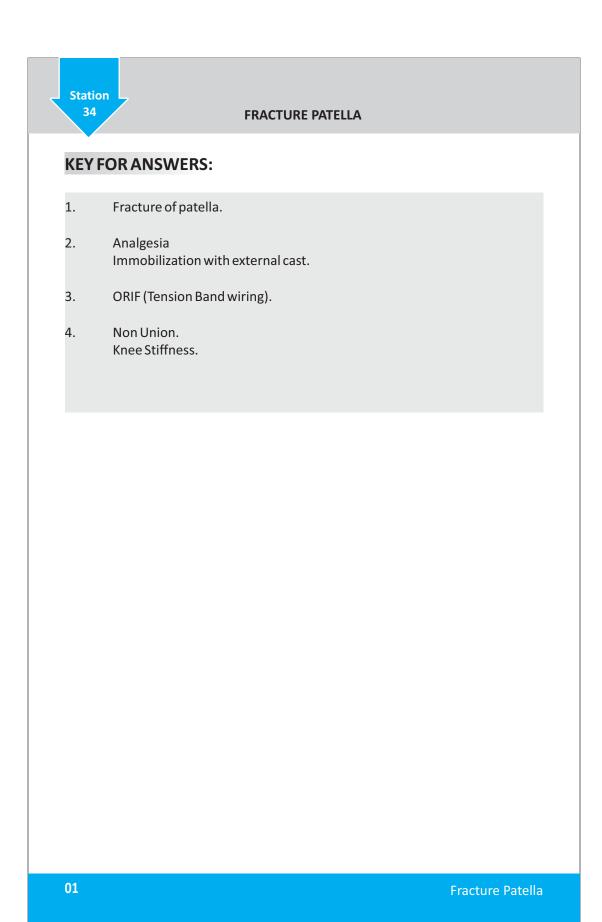


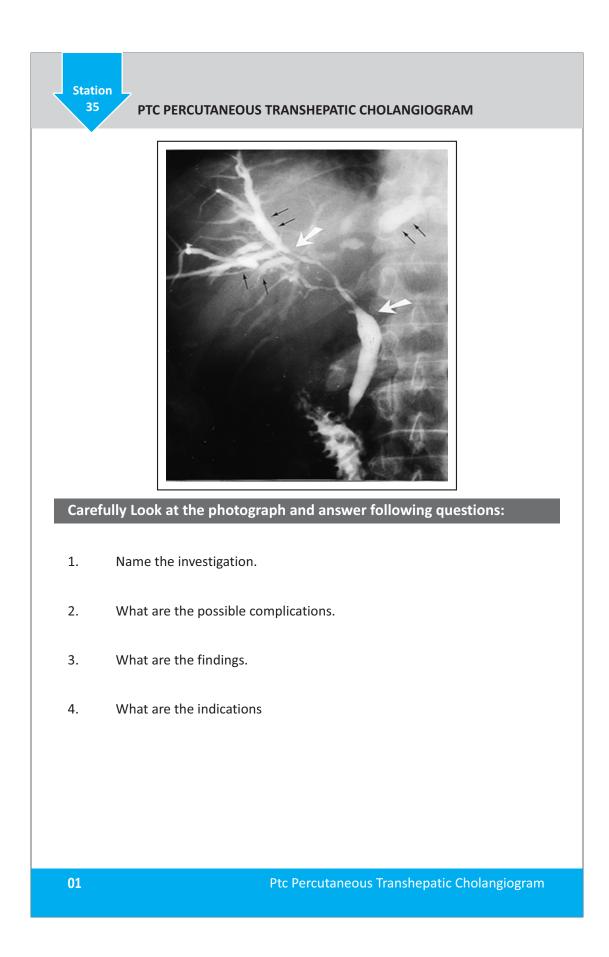












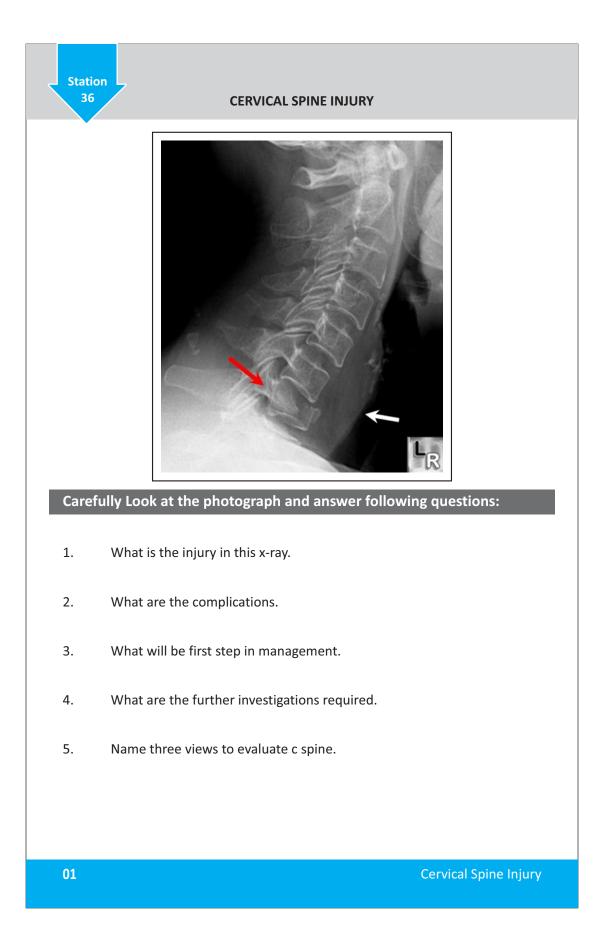
## PTC PERCUTANEOUS TRANSHEPATIC CHOLANGIOGRAM

## **KEY FOR ANSWERS:**

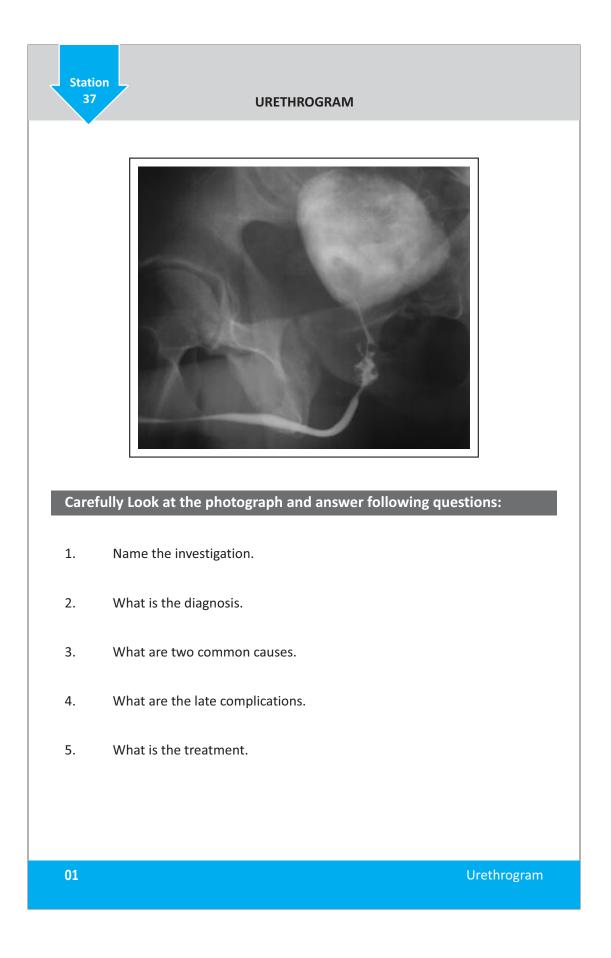
Station 35

- 1. Percutaneous transhepatic cholangiogram.
- 2. Hemorrhage, bile peritonitis, cholangitis, septicemia.
- 3. Upper extent of malignant stricture of CBD.

4. DIAGNOSTIC : obstructive pattern of LFT's, stricture CBD THERAPEUTIC: removal of stones, to drain biliary system, to place CBD stent.

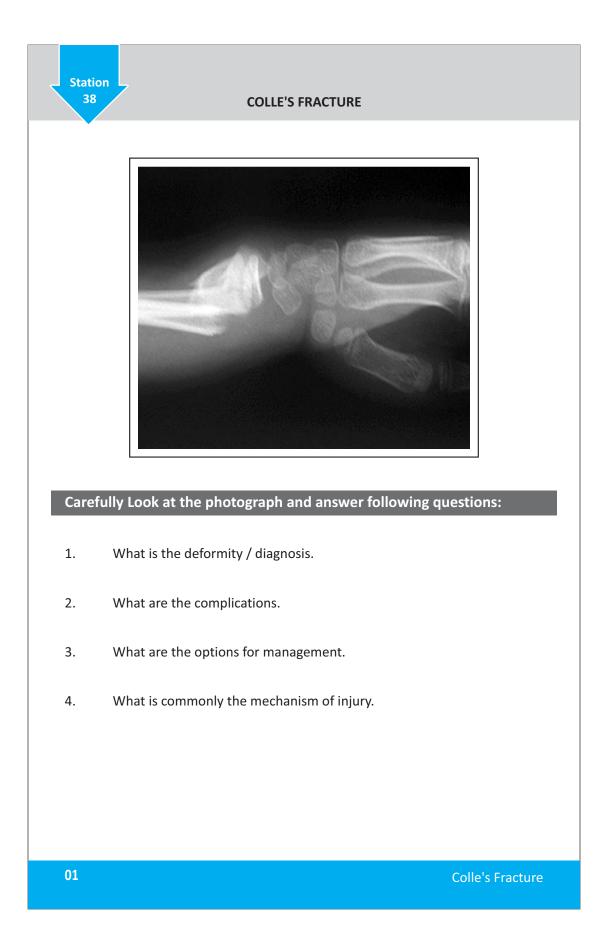


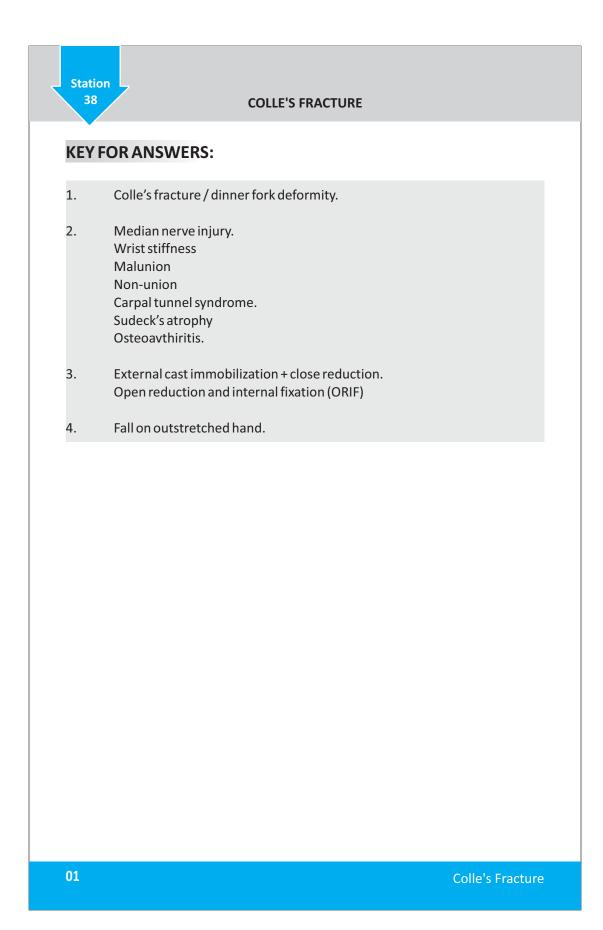


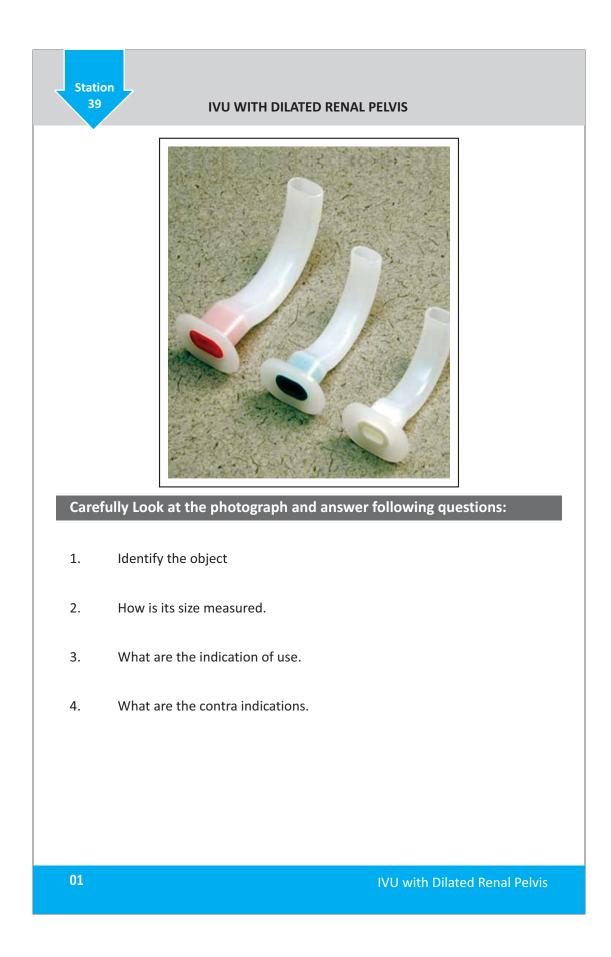


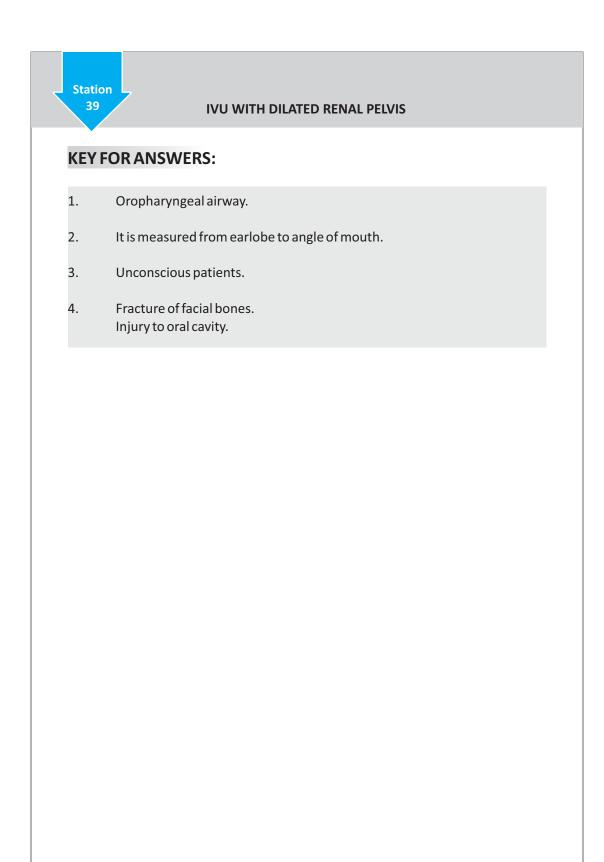
	URETHROGRAM			
KEY FOR ANSWERS:				
1.	Urethrogram.			
2.	Stricture urethra.			
3.	Trauma Infection.			
4.	Bladder outlet obstruction. UTI Bladder Stone			
5.	Internal urethrotomy.			

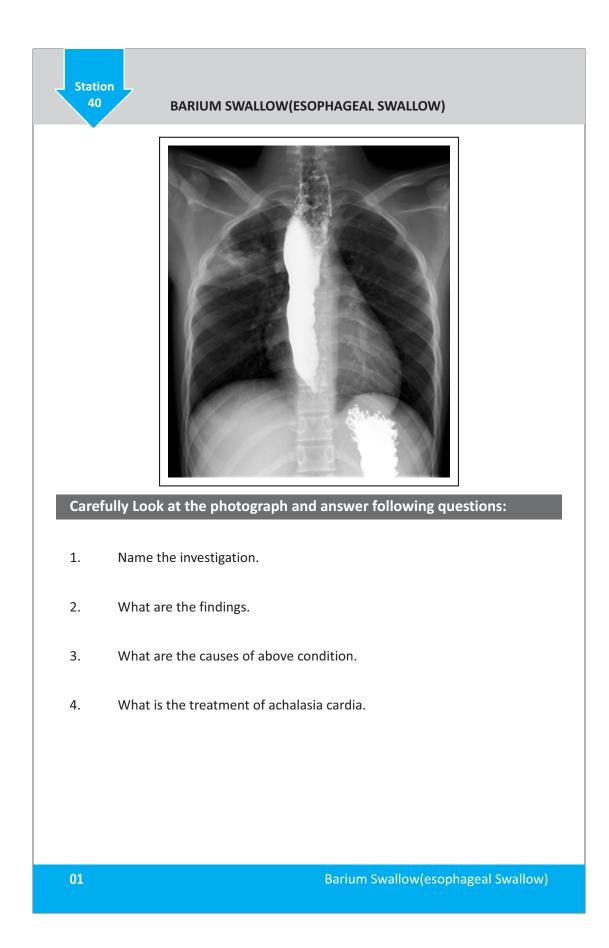
Urethrogram

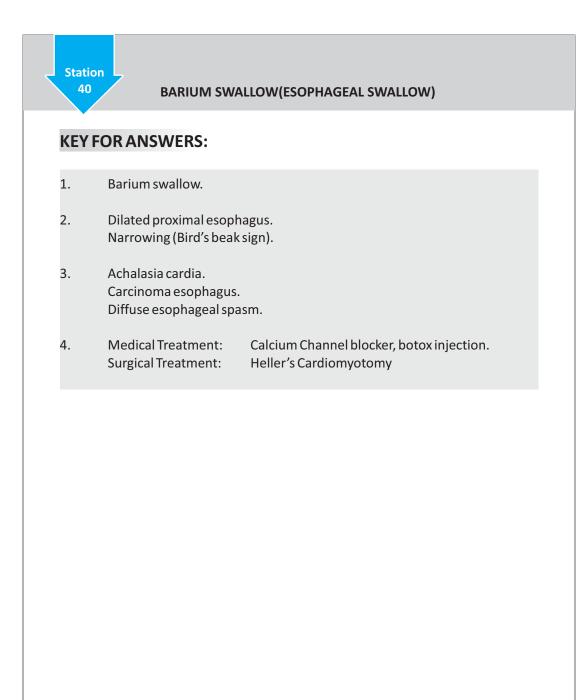


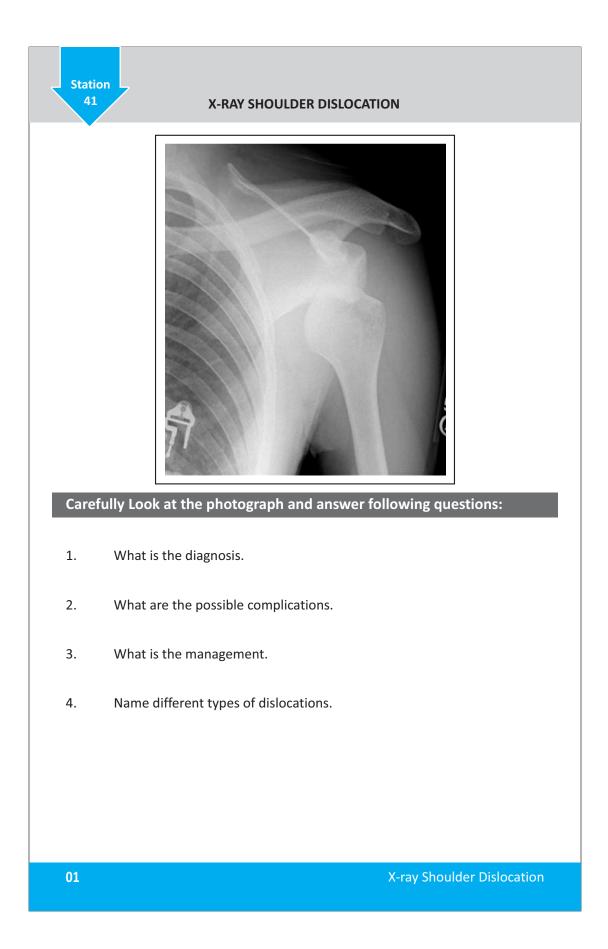


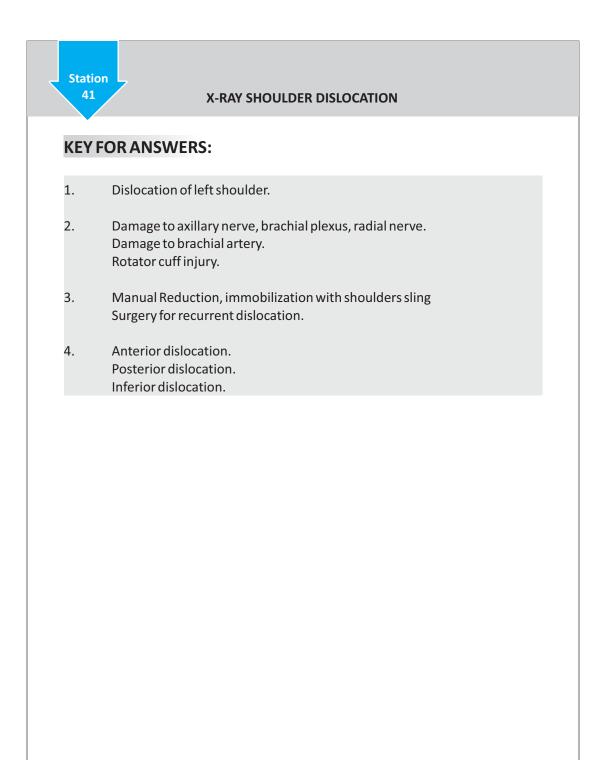


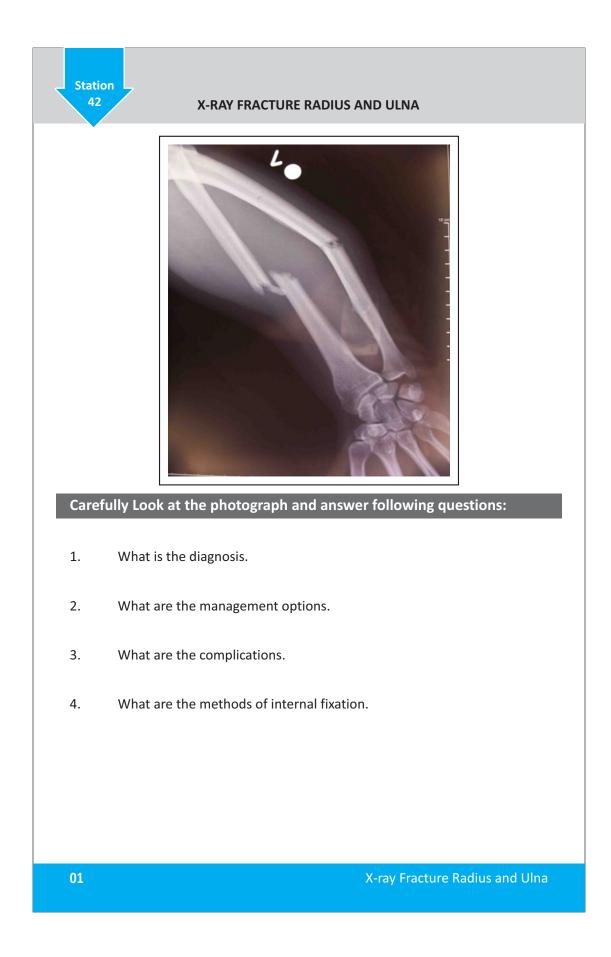


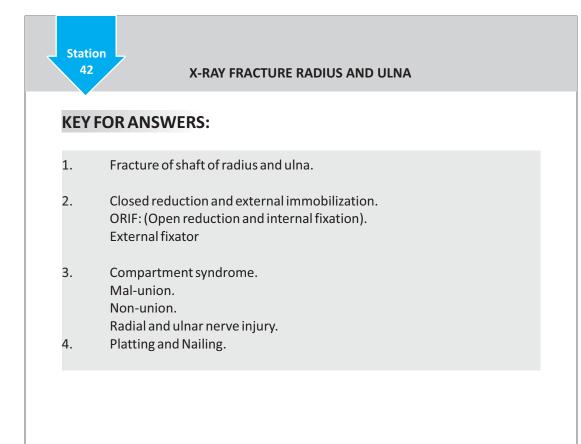


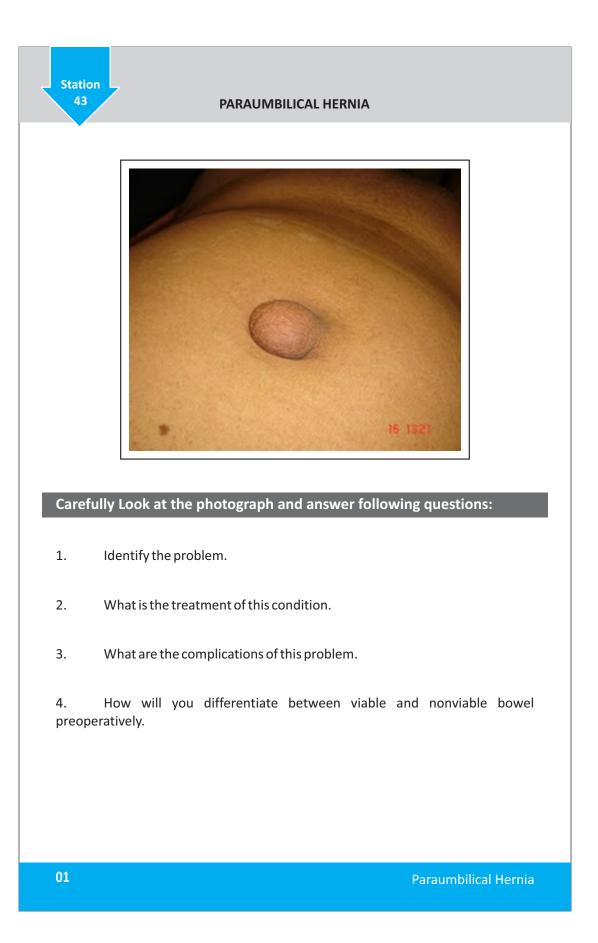


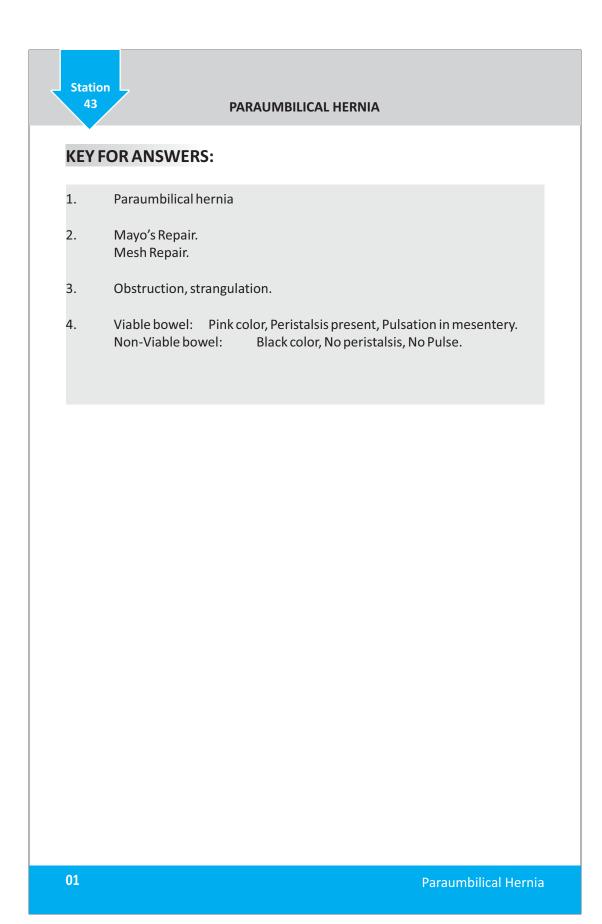


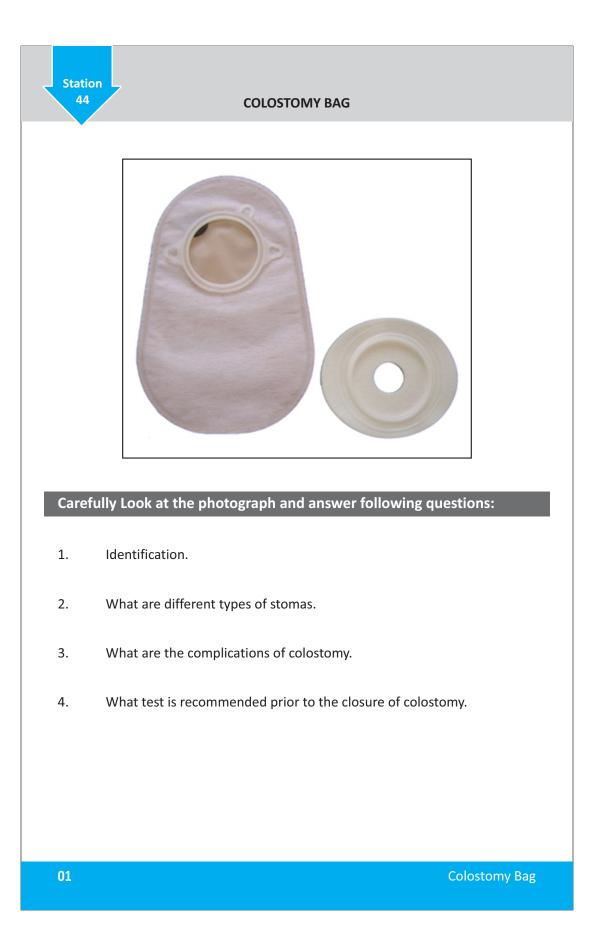


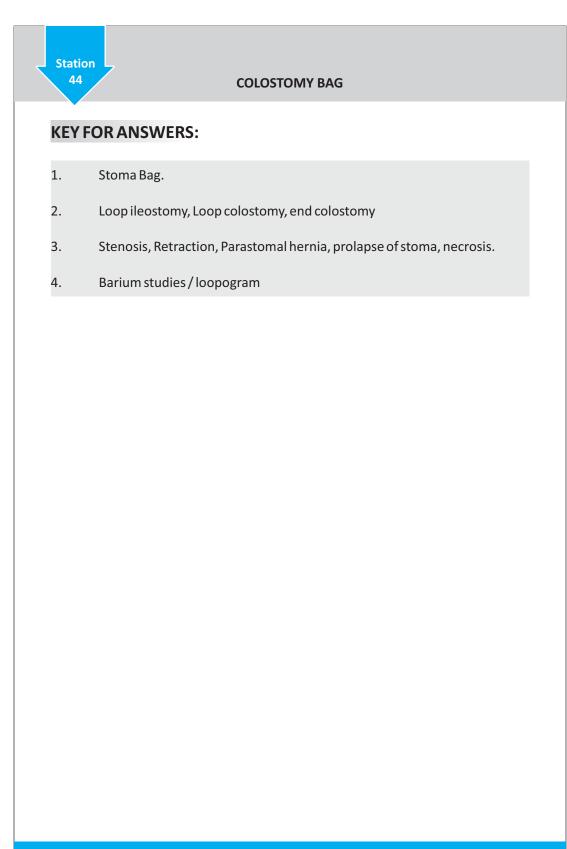


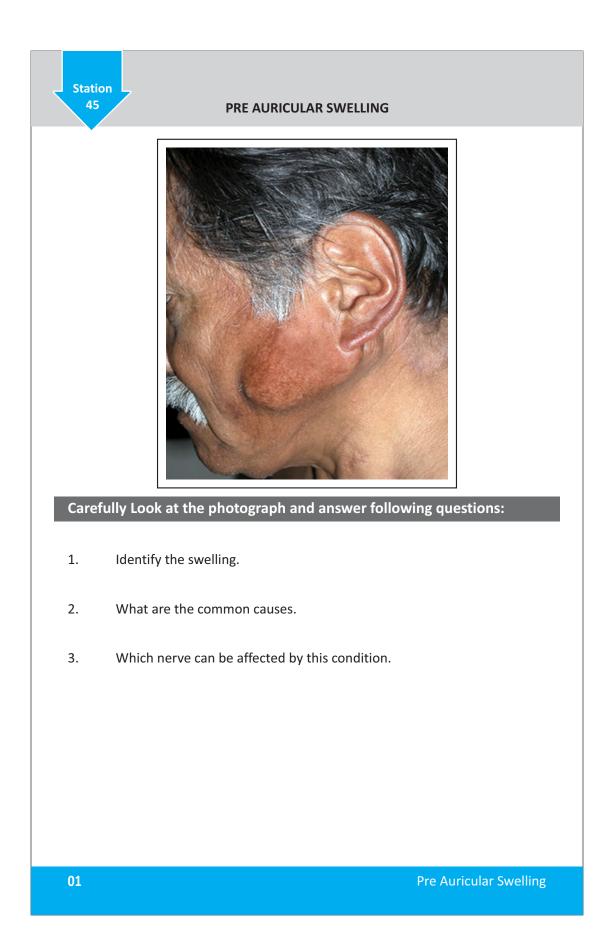


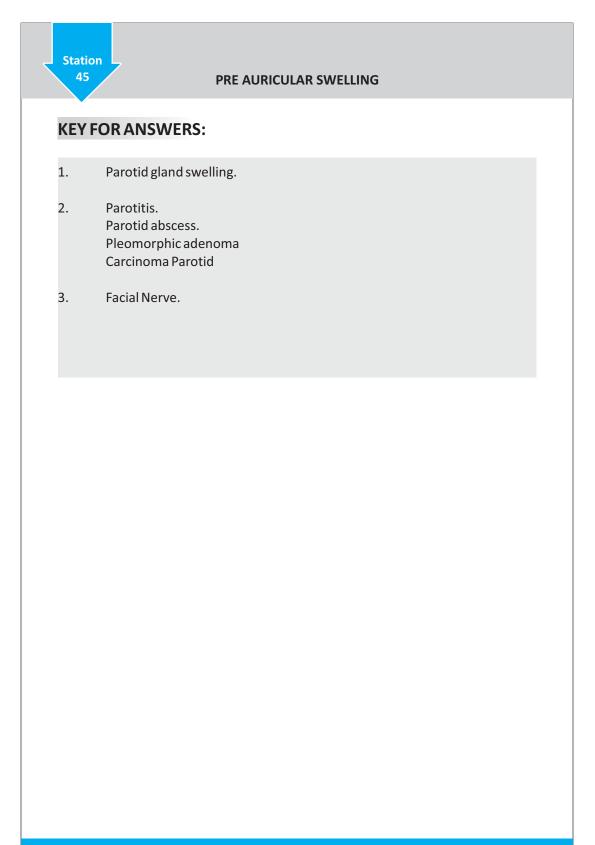




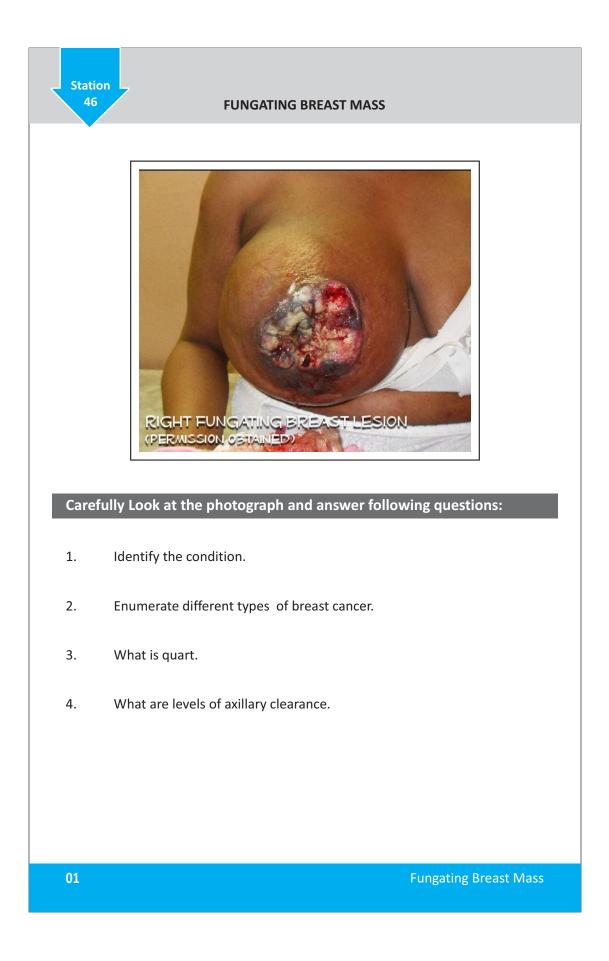


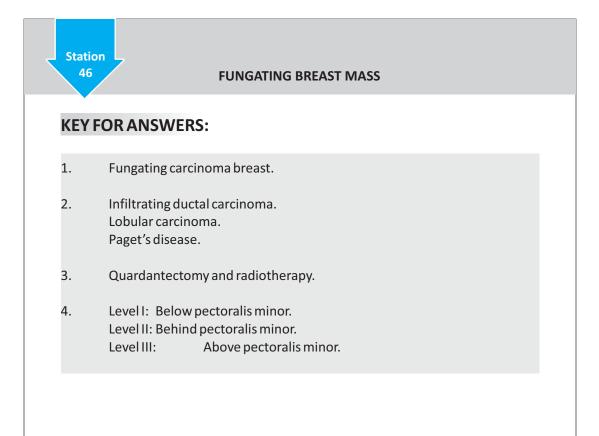


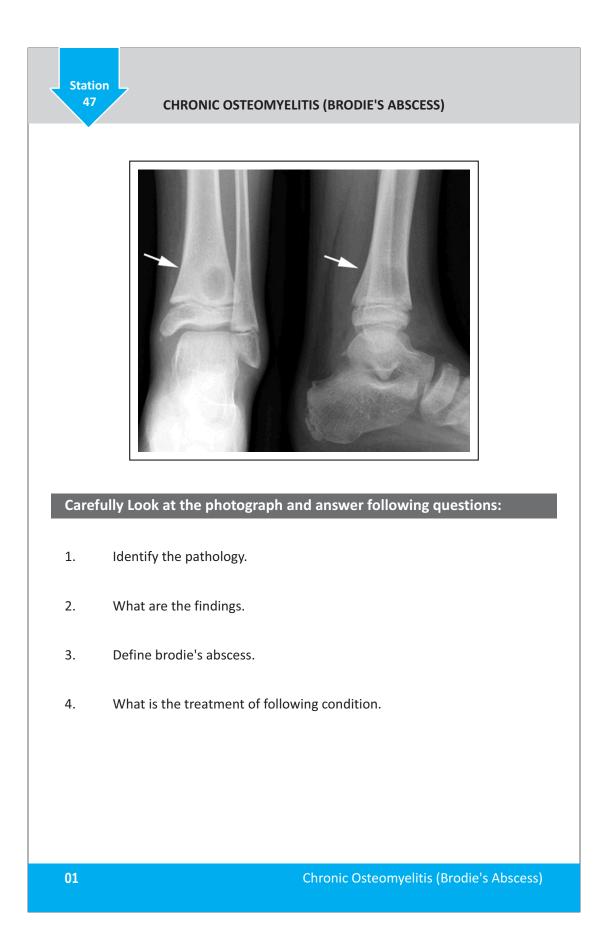




Pre Auricular Swelling







## CHRONIC OSTEOMYELITIS (BRODIE'S ABSCESS)

## **KEY FOR ANSWERS:**

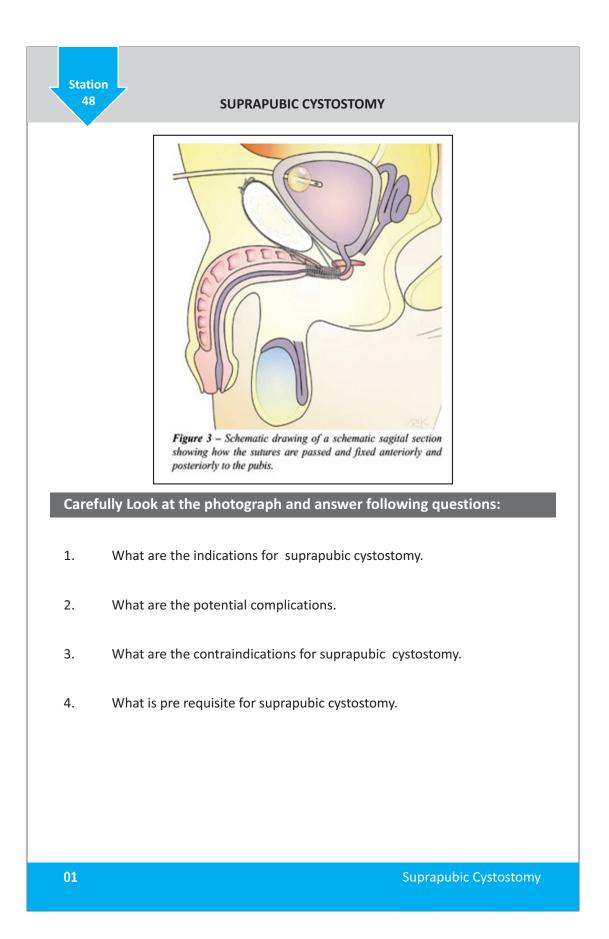
Station 47

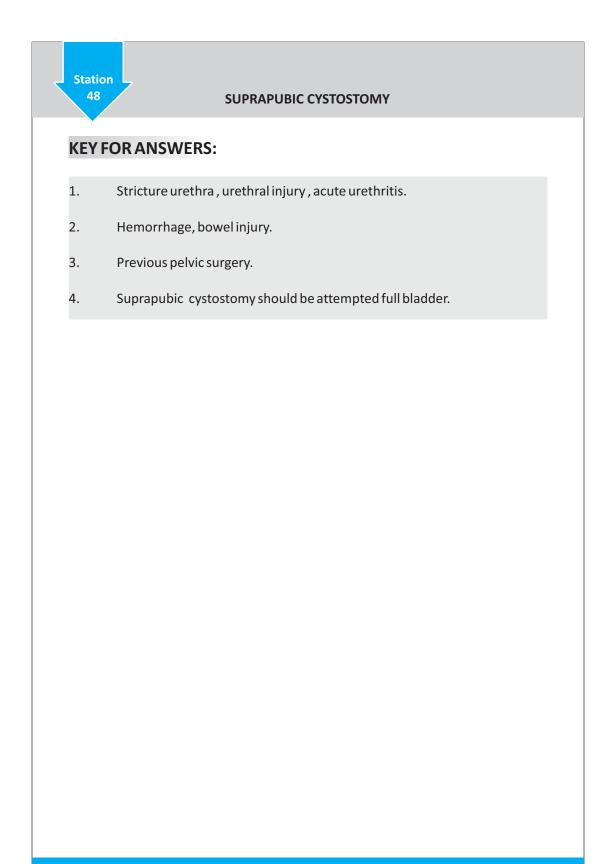
1. Brodie's abscess.

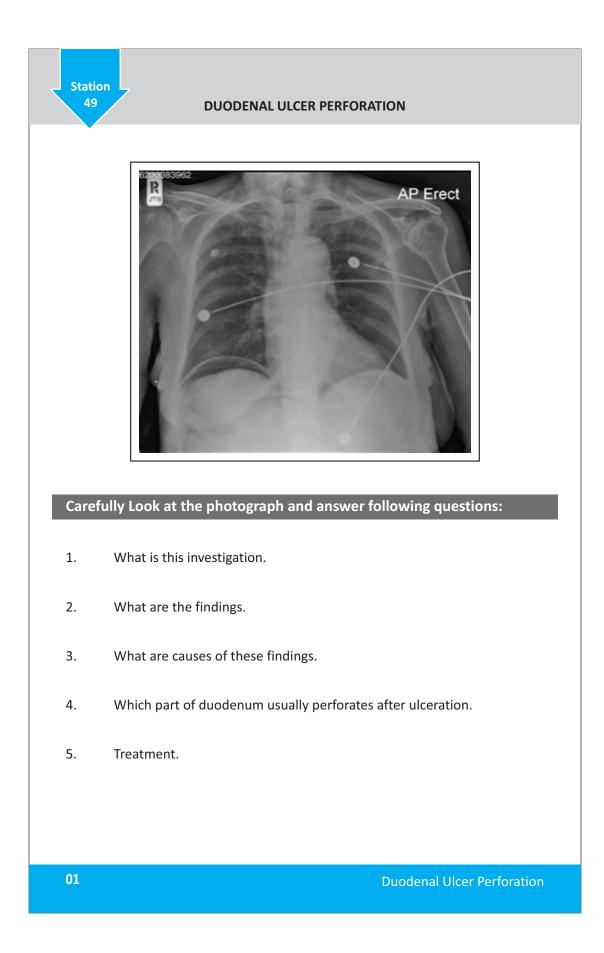
2. Band of sclerosis surrounding central lucent area.

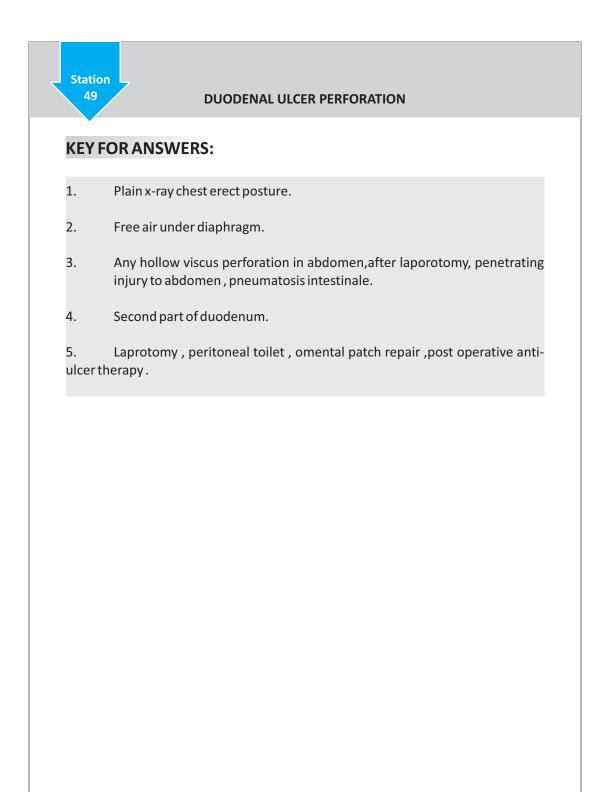
3. It is a chronic abcess walled off in sclerotic bone.it is aroughly spherical region of bone destruction ,filled with pus or connective tissue , usually in metaphyseal region of long bones and caused by staphylococcus aureus or staph. Albus

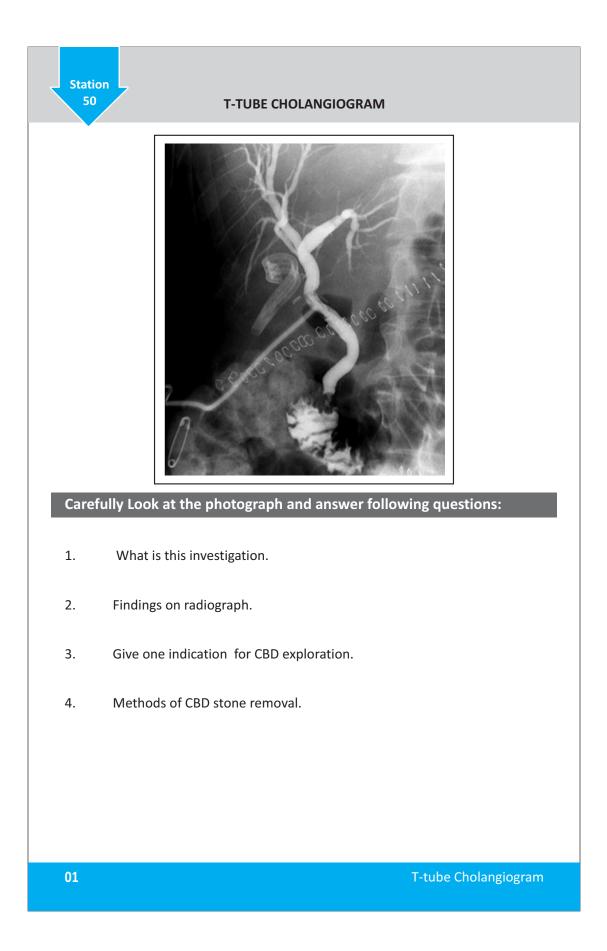
4. Excise all dead tissue ,take deep cultures, give appropriate antibiotics, reconstruct limb.

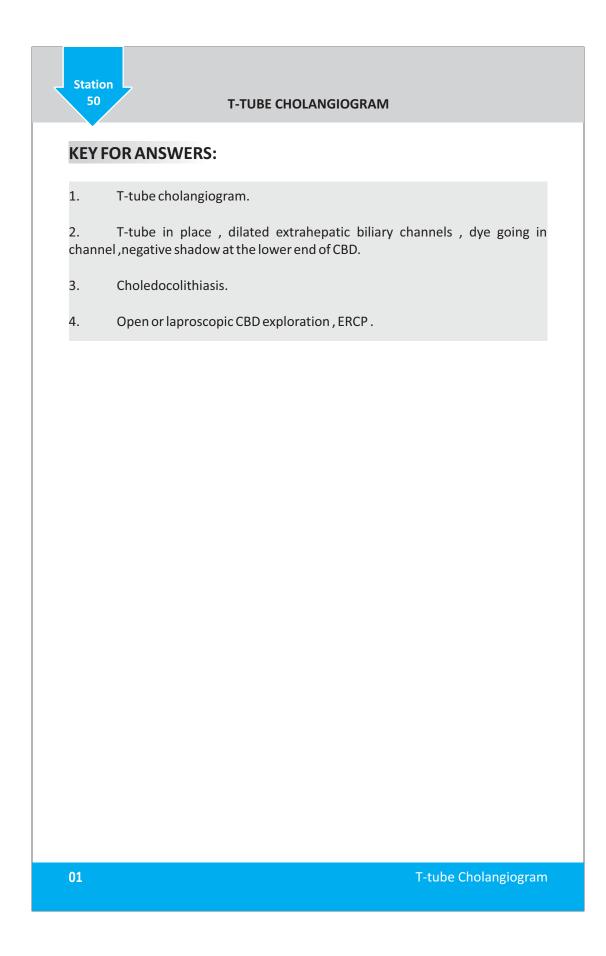


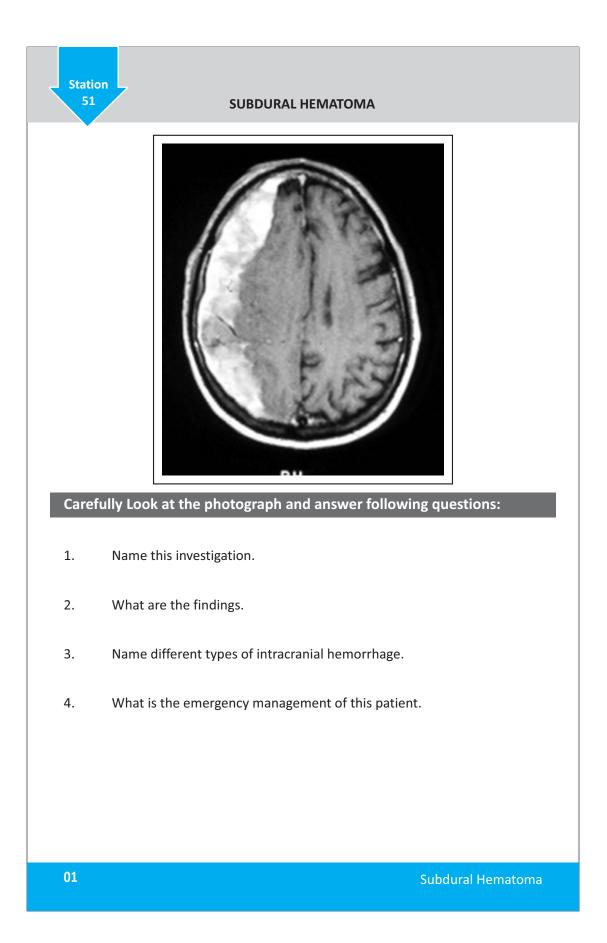


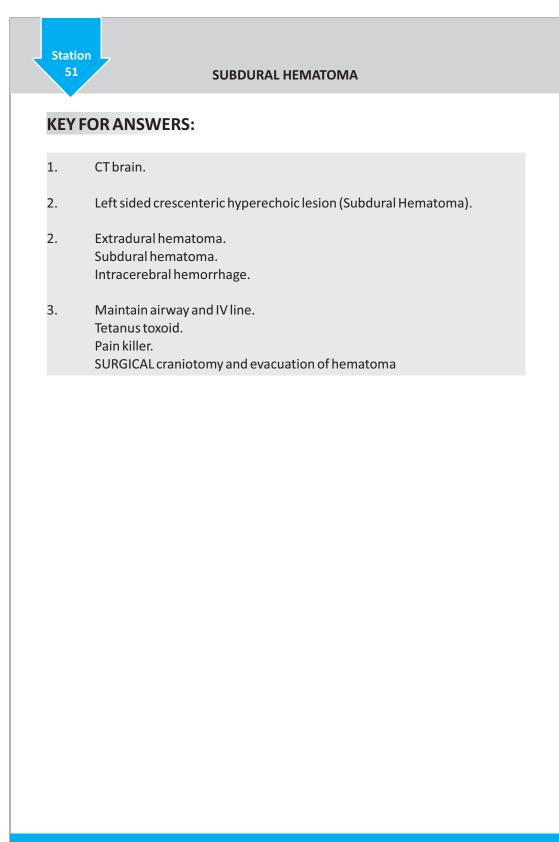


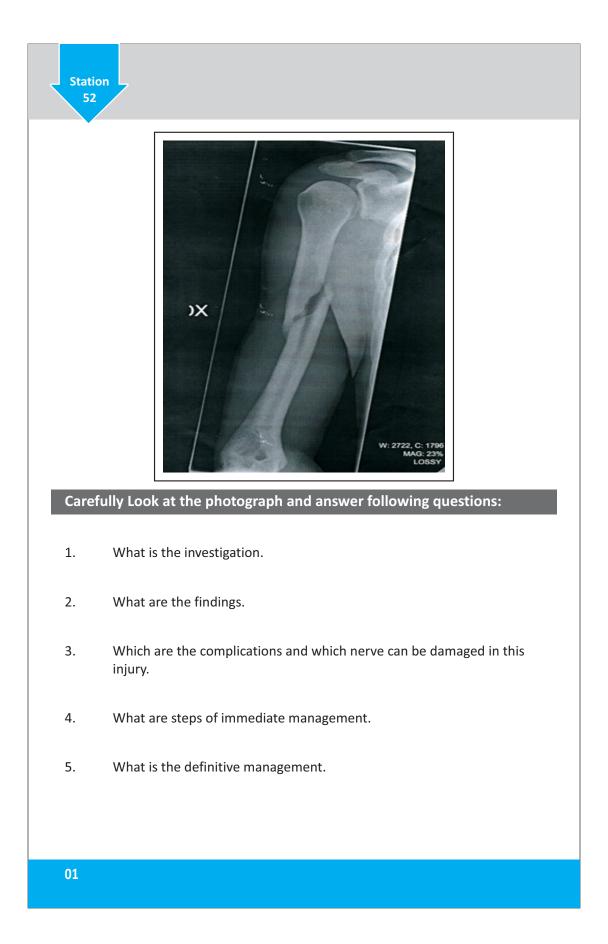




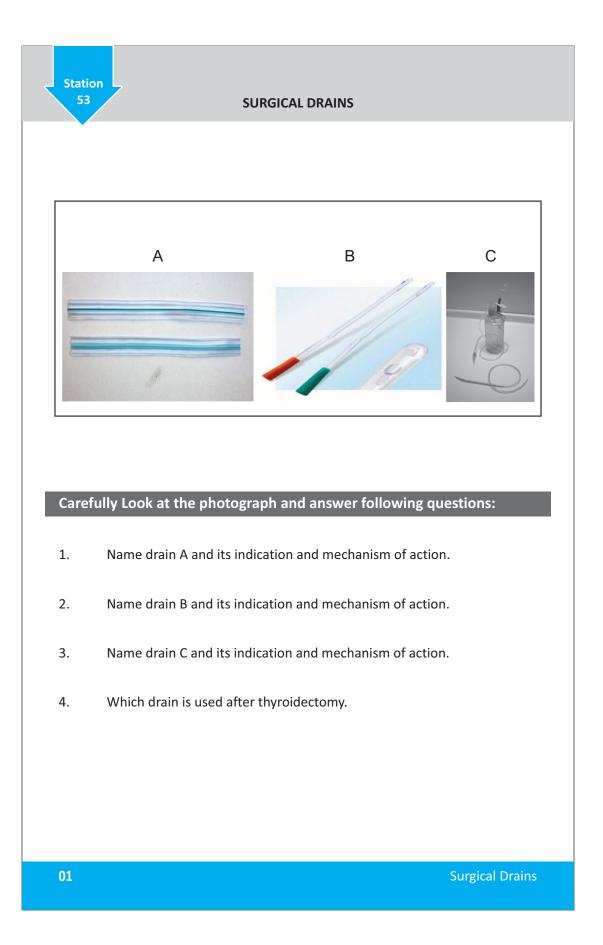




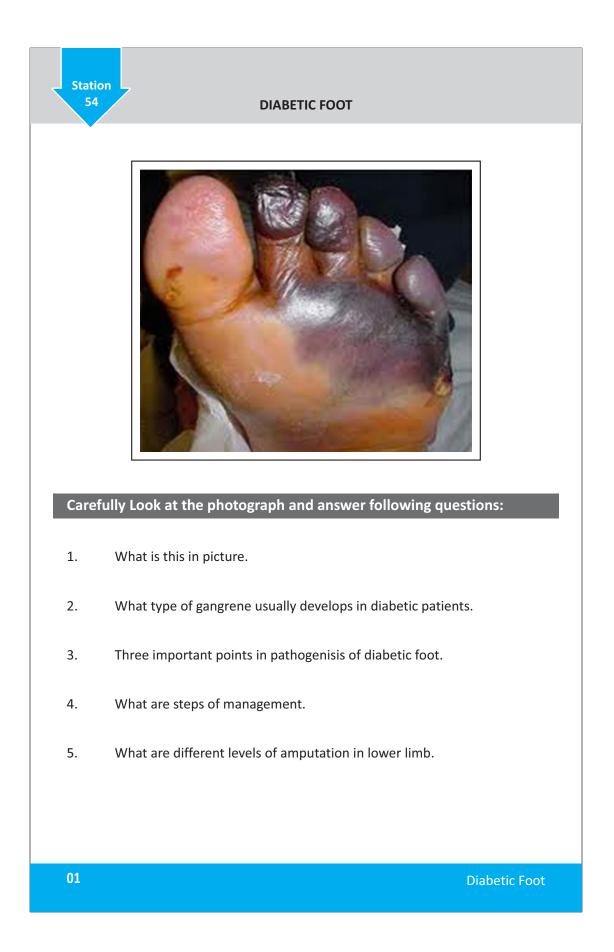


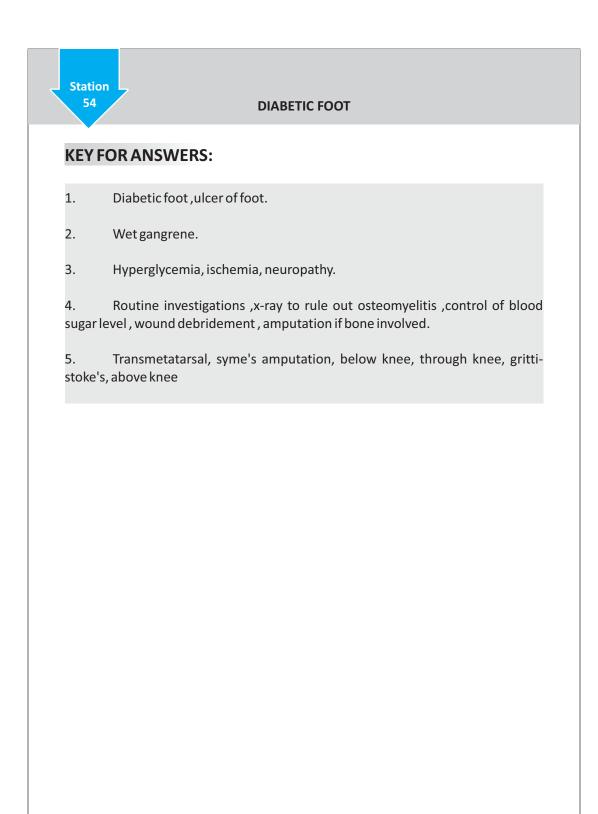


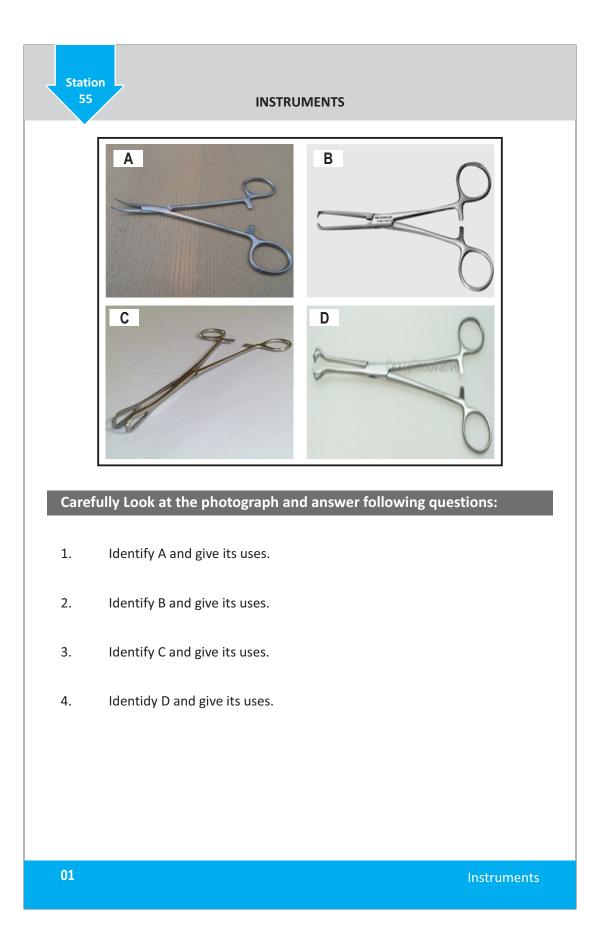
Statio 52	
KEY	FOR ANSWERS:
1.	X-ray arm Ap view.
2.	Spiral fracture of humerus with a small piece of bone visible.
3.	Radial nerve injury Shoulder stiffness Avascular necrosis of humeral head.
3.	Tetanus toxoid Immobilization of fracture U-slab cast .
4.	Hanging cast Internal fixation(ORIF) by plating / Nailing.

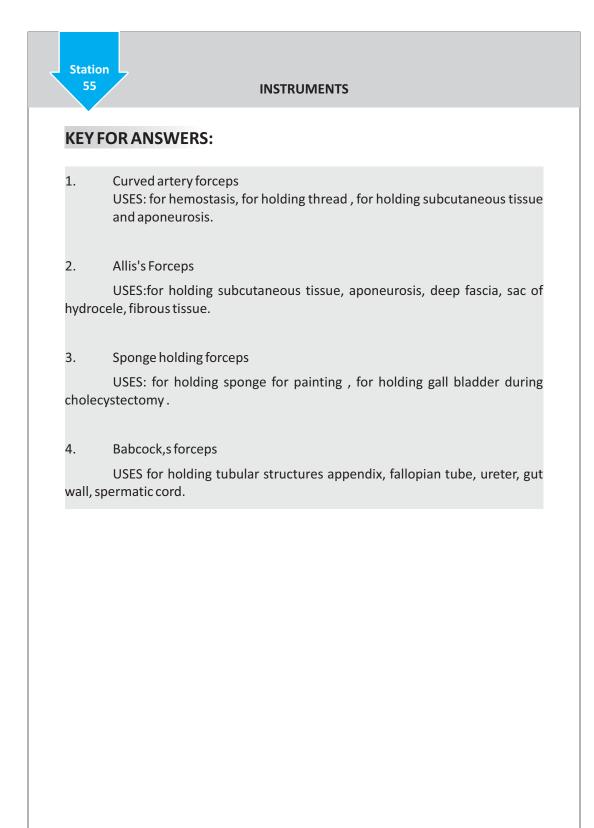


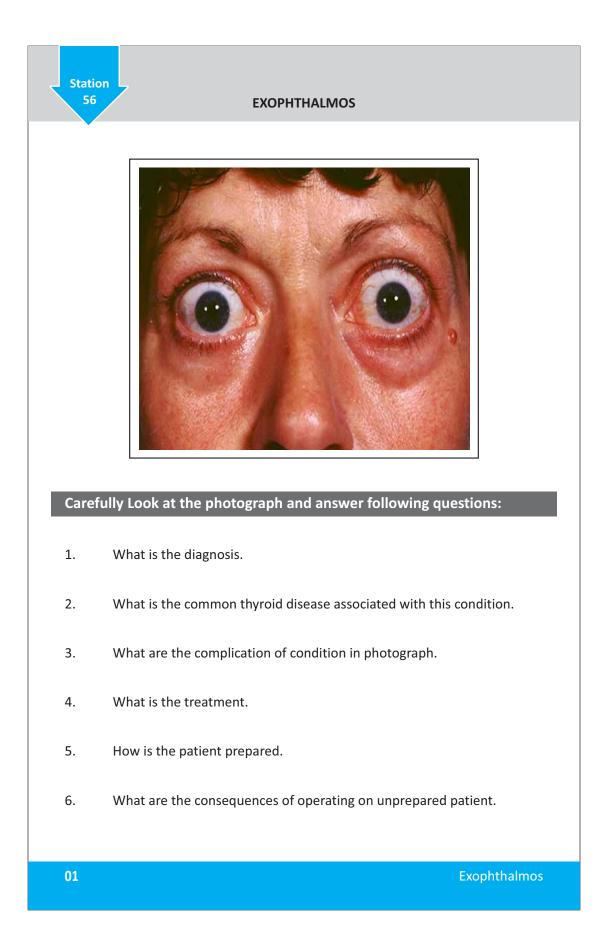
Statio 53	n	SURGICAL DRAINS	
KEY F	ORANSWER	5:	
1.		ain Placed in abdomen after peritonitis. Multichannel drain.	
2	B-nelaton drain INDICATIONS: MECHANISM:	Placed in abdomen after laporotmy.	
3.	C- Redivac sucti INDICATION: MECHANISM:	After thyroidectomy and mastectomy	
4	Redivac drain		



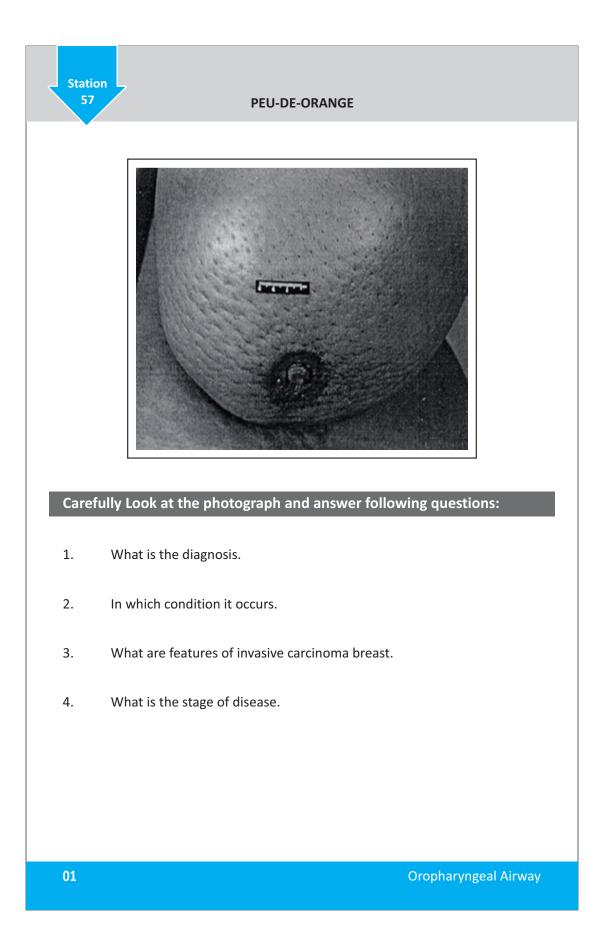


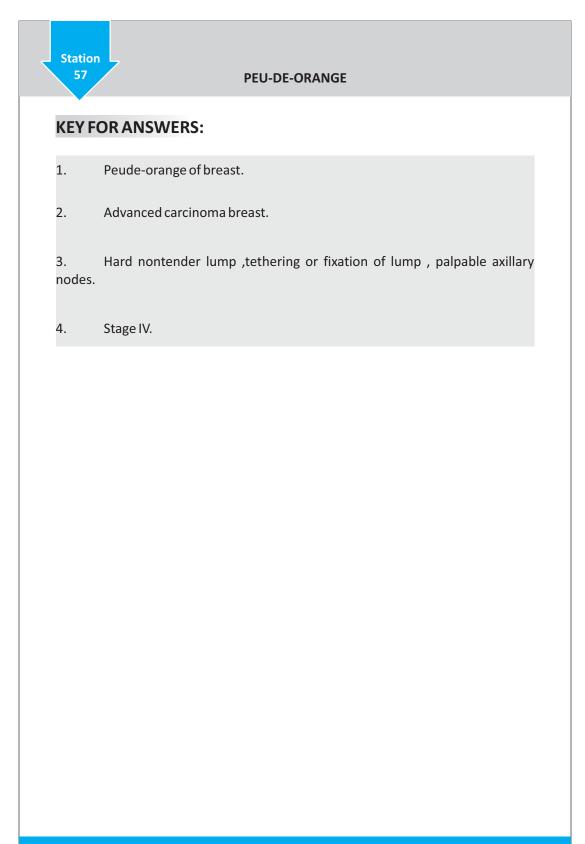


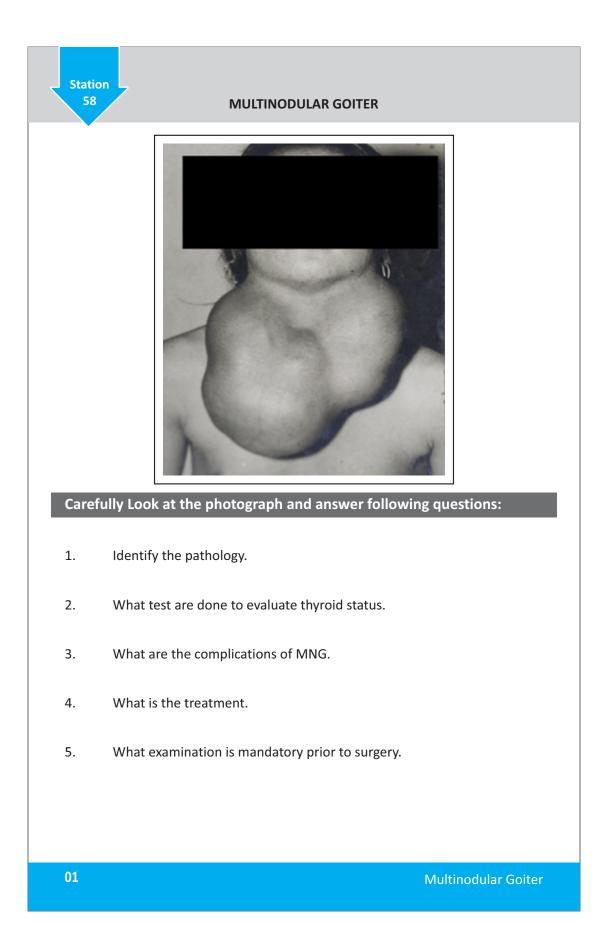


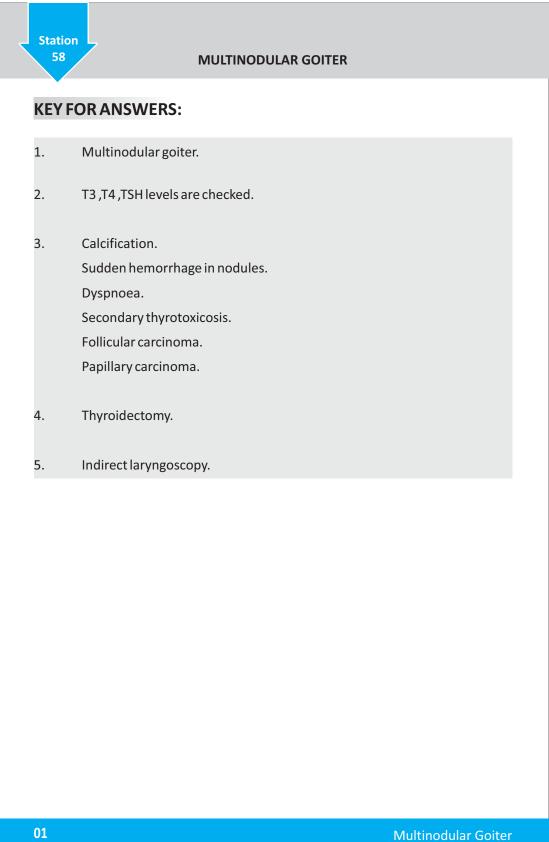


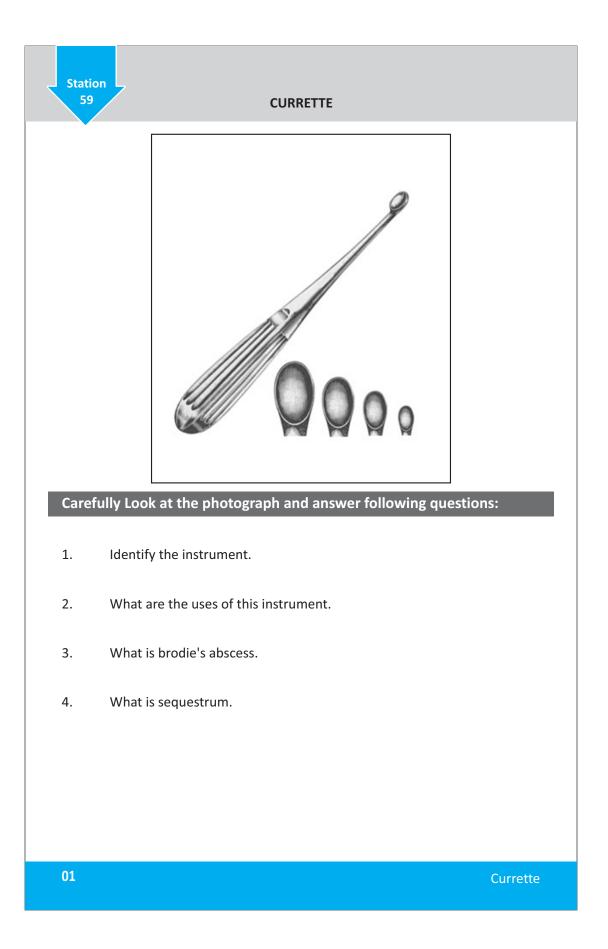
Station 56	EXOPHTHALMOS
KEY FO	OR ANSWERS:
1.	Exophthalmos due to hyperthyroidism.
2.	Grave's disease.
3.	Keratitis. Corneal ulcer Conjunctivis. Chemosis. Optic nerve damage. Blindness.
4.	Large goiter and age > 45 – subtotal thyroidectomy. Small goiter and age, 45- radioiodine and antithyroid drugs.
5.	Patients is treated by antithyroid drugs and radioiodine ablation.
6.	Thyroid crisis, Bleeding.
01	Exophthalmos

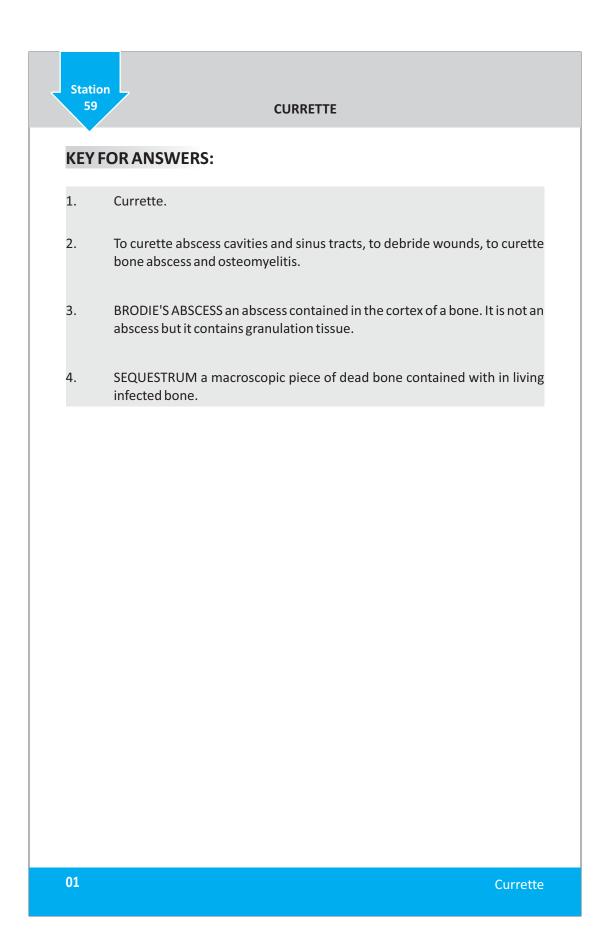


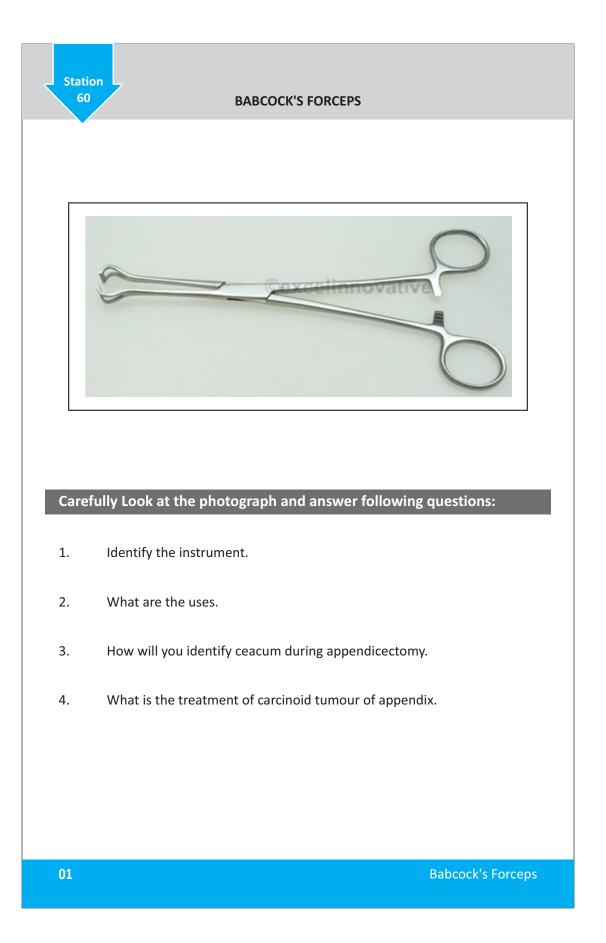




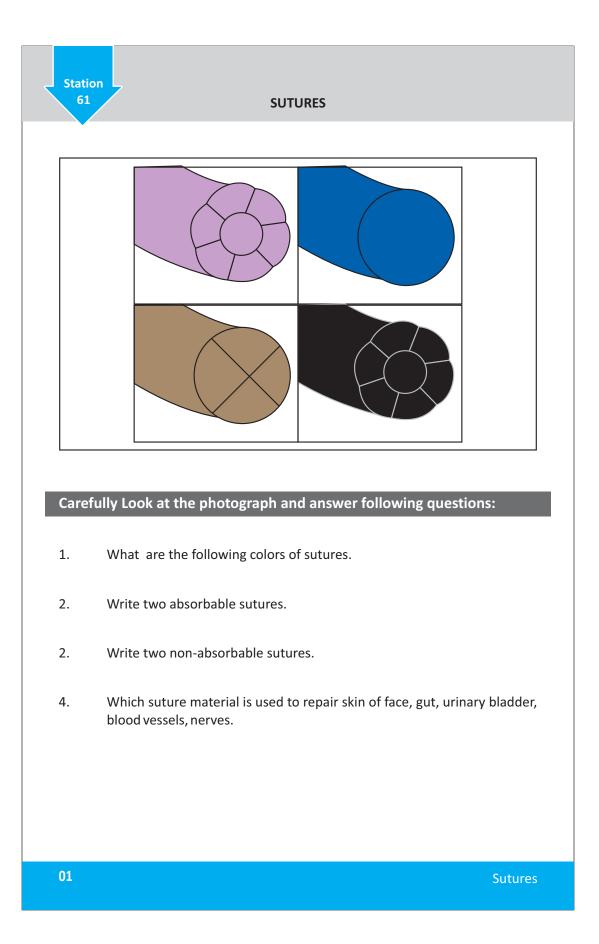






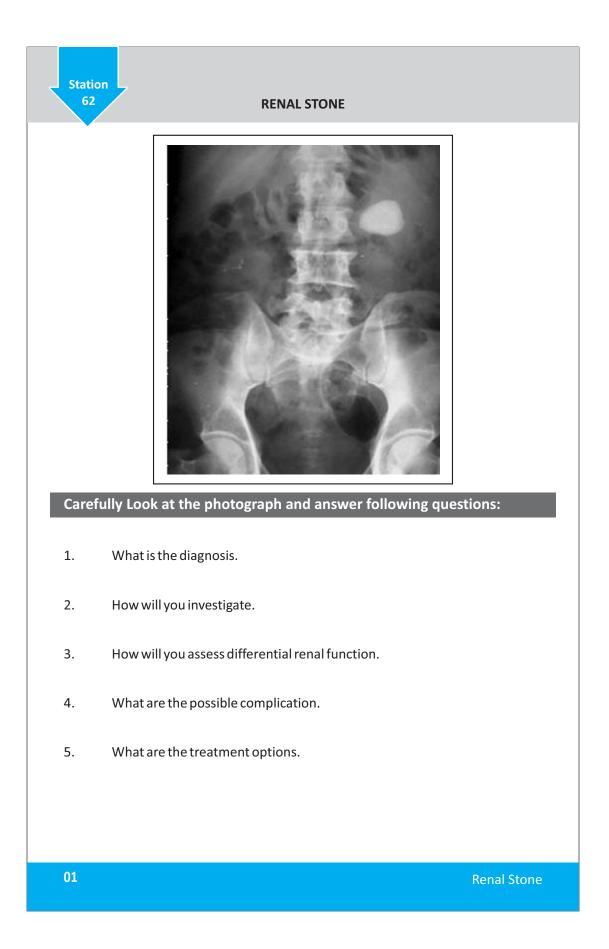


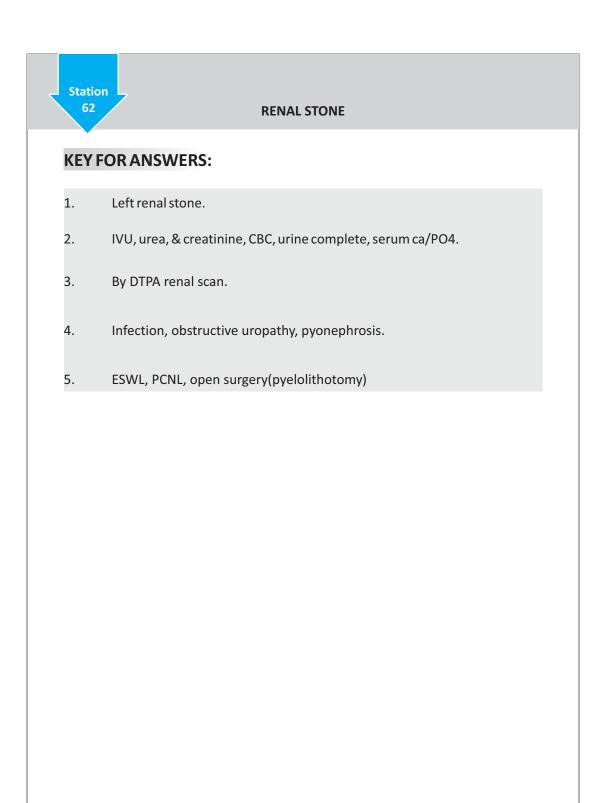
Station 60	BABCOCK'S FORCEPS
KEY FC	DR ANSWERS:
1.	Babcock's forceps.
2. cord.	To hold tubular structures like appendix ,gut , ureter ,to hold spermatic
3. attache	Colon is more whitish than ileum, by presence of taenia coli, appendix may be visible attached to it, it is the most lateral structure, no omentum is d to appendix.
4	If < 1cm—appendicectomy , if > 2 cm right hemicolectomy , if at the base of appendix—right hemicolectomy.
01	Babcock's Forceps

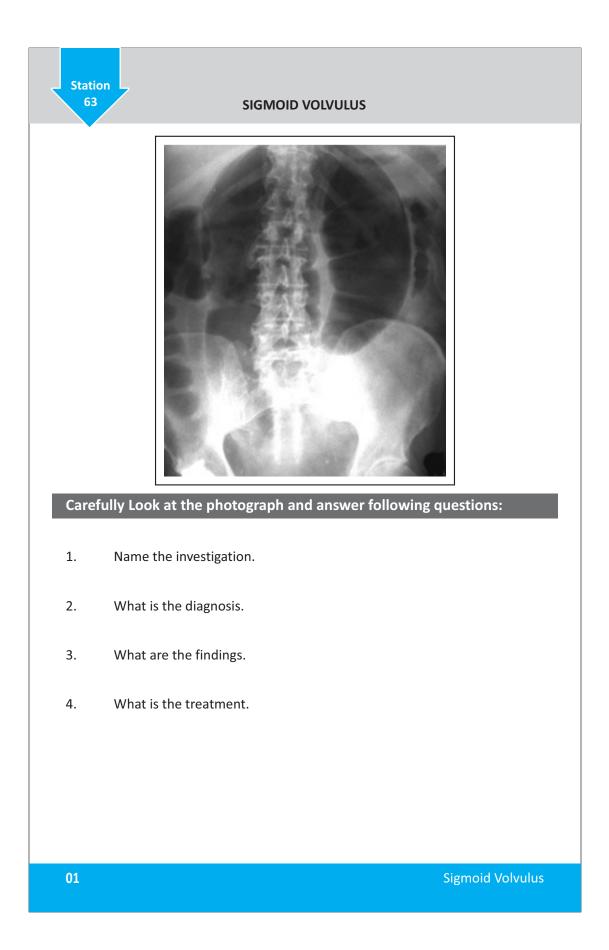


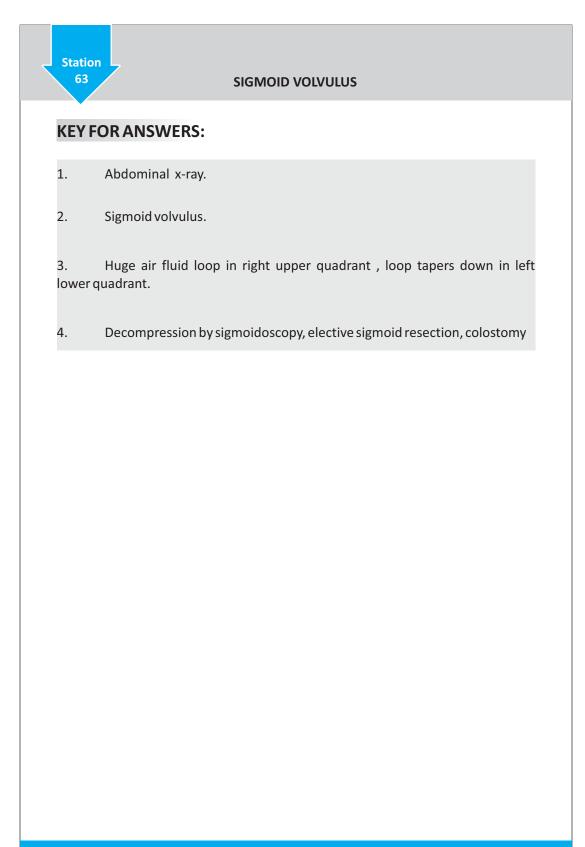
Statio	SUTURES		
KEY FOR ANSWERS:			
1.	Blue – prolene, violet-vicryl, brown-chromic catgut, black-silk.		
2.	Catgut, vicryl.		
3.	Silk , prolene.		
4. catgut	Skin of face-prolene4/0, 5/0, gut-vicryl 2/0, urinary bladder-vicryl or no 1, blood vessels-prolene 4/0, nerves- prolene 6/0.		

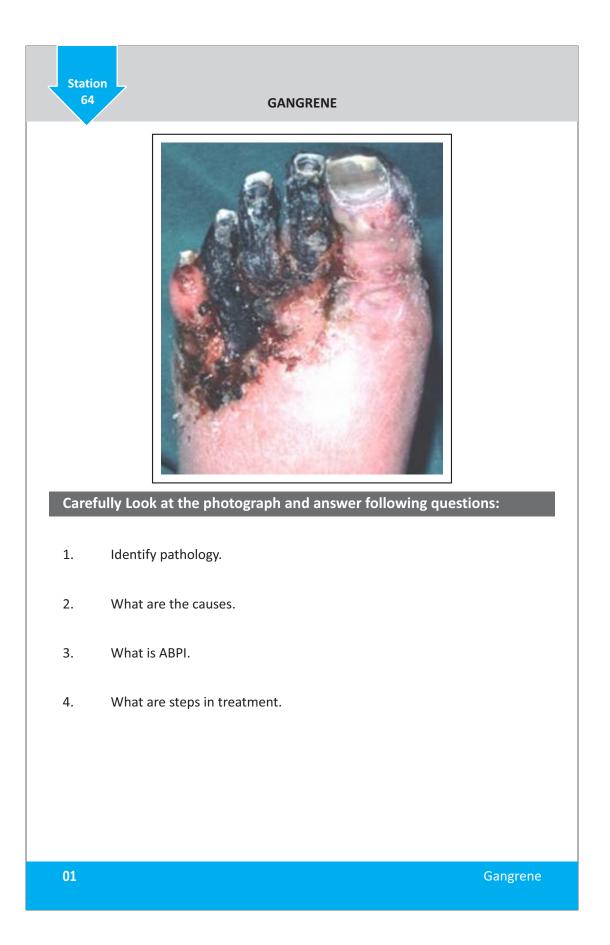
**Sutures** 











## GANGRENE

## **KEY FOR ANSWERS:**

1. Gangrene.

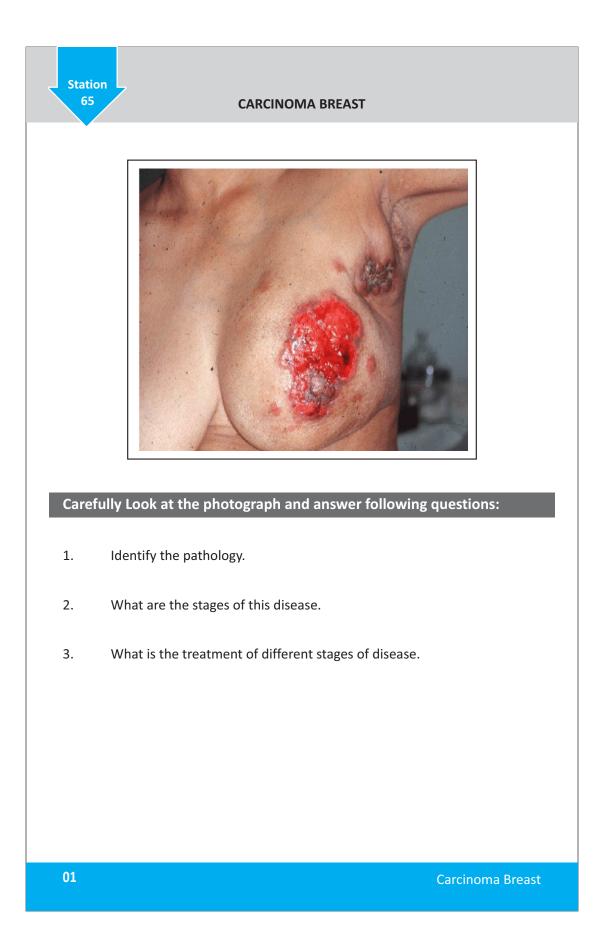
Station 64

2. ARTERIAL OBSTRUCTION: thrombosis, embolism, arteritis, buergers disease, intrarteria injection. VENOUS OBSTRUCTION: gas gangrene, poisonous gangrene, trauma.

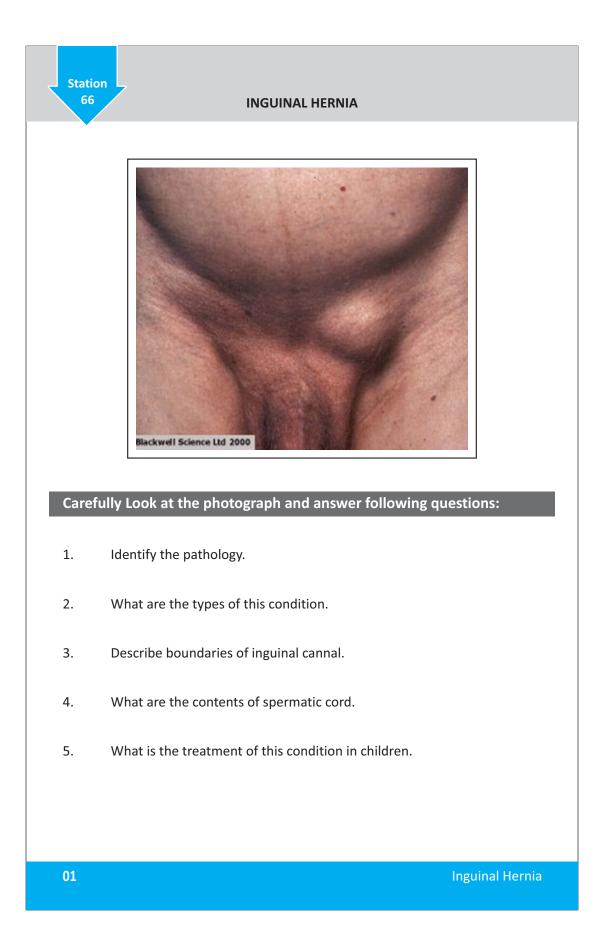
 It is the ratio of systolic pressure at the ankle to that in arm. Normally it is about 1.0, < 0.9 some degree of arterial obstruction, <0.3 suggests necrosis.

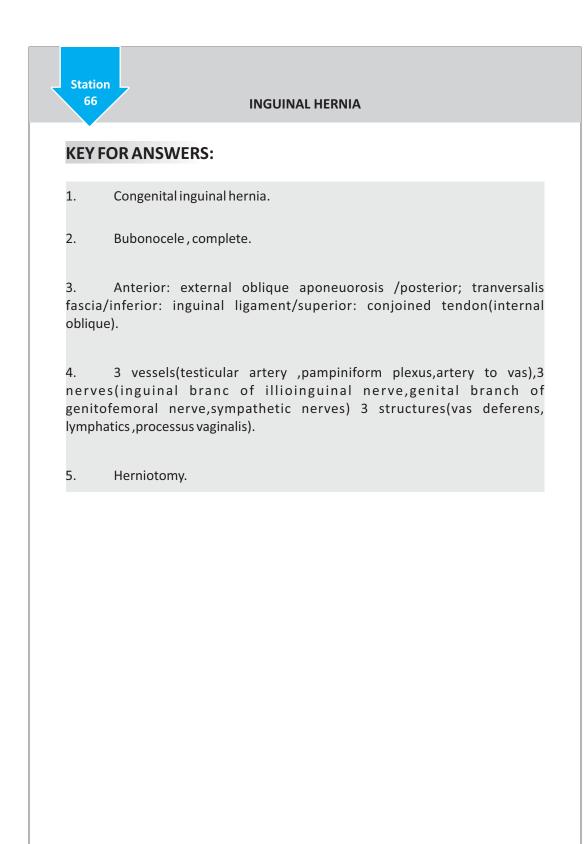
4. Treat the cause, antibiotics, debride dead tissue, revascularization by angioplasty or surgery.

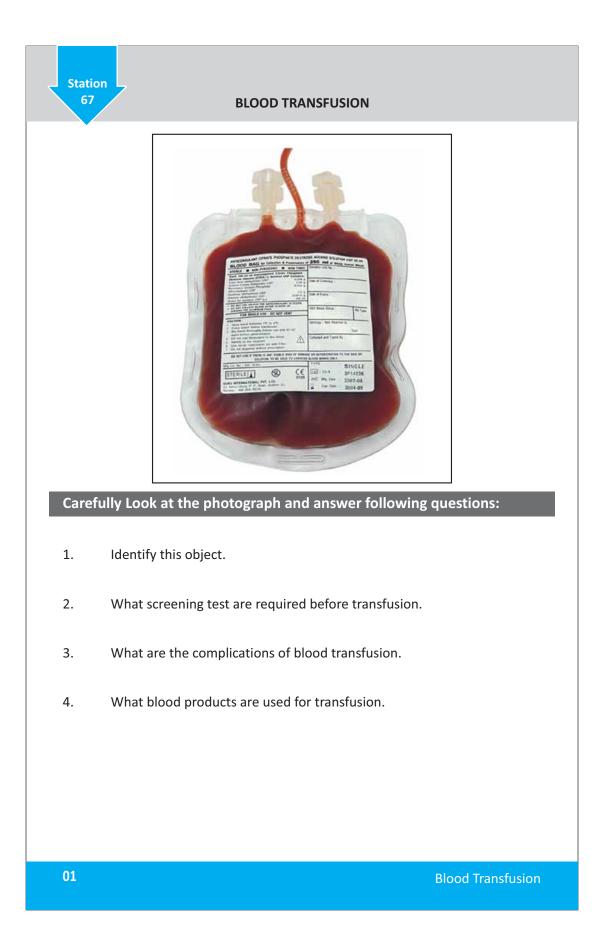
Gangrene

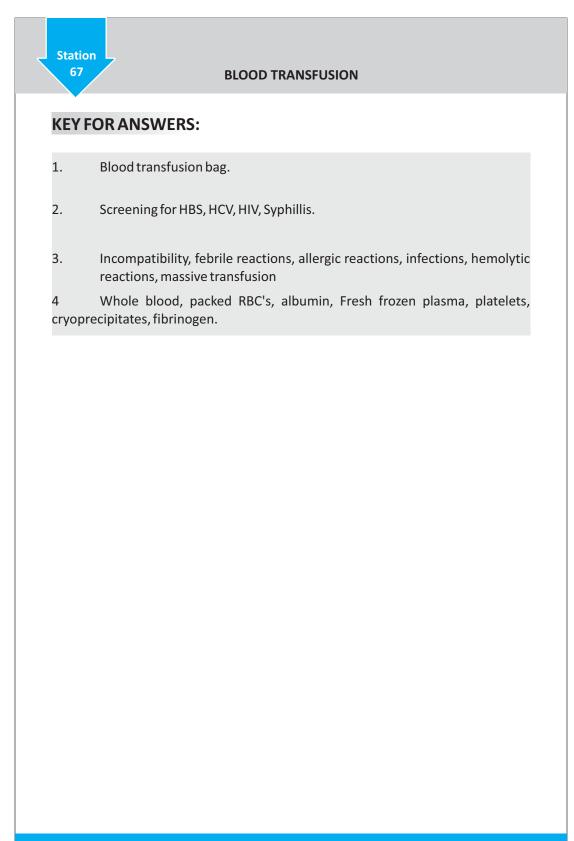


Statio 65				
KEY	KEY FOR ANSWERS:			
1.	Carcinoma breast.			
2.	STAGE 1: lump <5 cm,no nodes palpable. STAGE II lump <5 cm and mobile nodes palpable STAGE III lump >5 cm fixed to skin, Fixed nodes, Peudeorange, Arm edema. STAGE IV distant metastasis.			
	STAGE I and II: Wide local excision and axillary node sampling/clearance ified radical mastectomy and axillary node sampling/clearance vant hormonal and chemotherapy,.radiotherapy. STAGE III chemotherapy / radiotherapy / surgery. STAGE IV local palliation / radiotherapy / chemotherapy			
01	Carcinoma Breast			

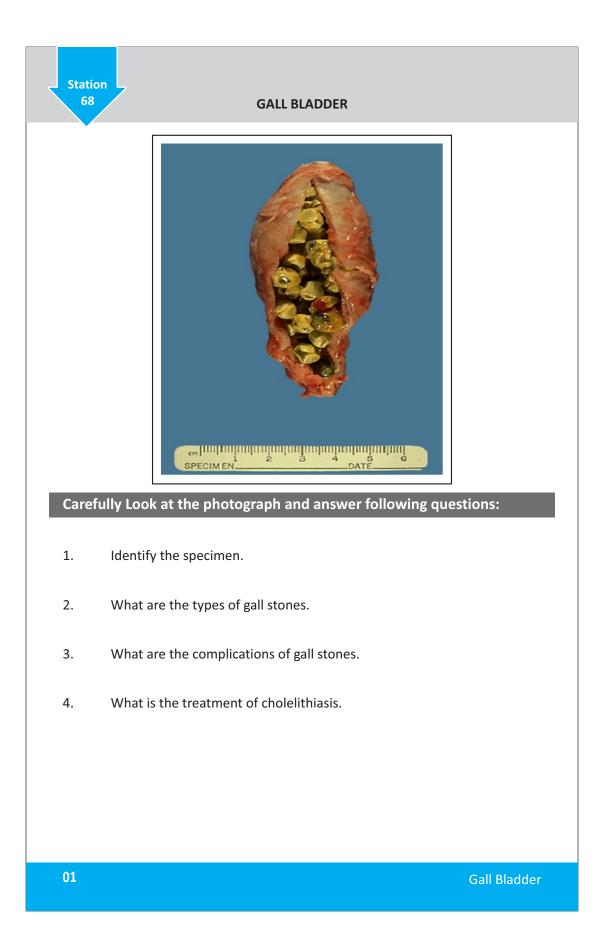


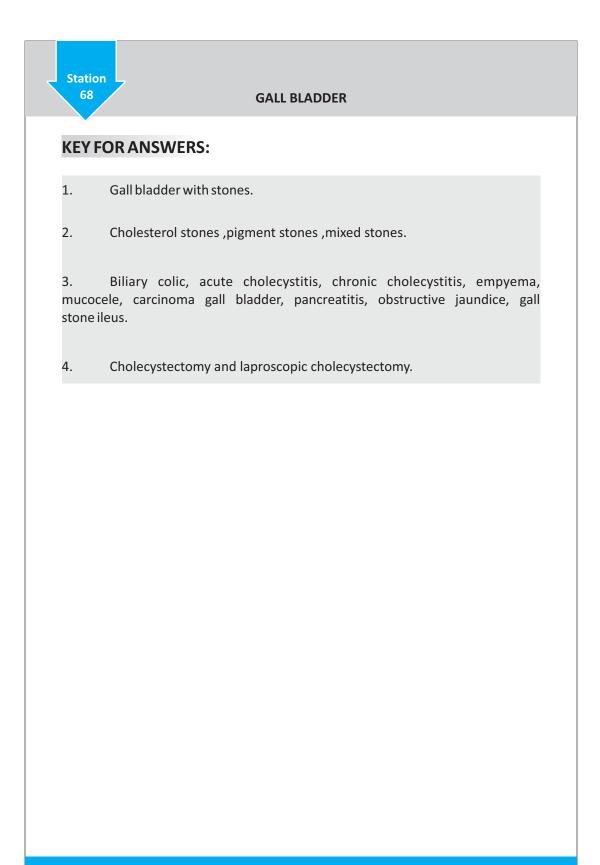


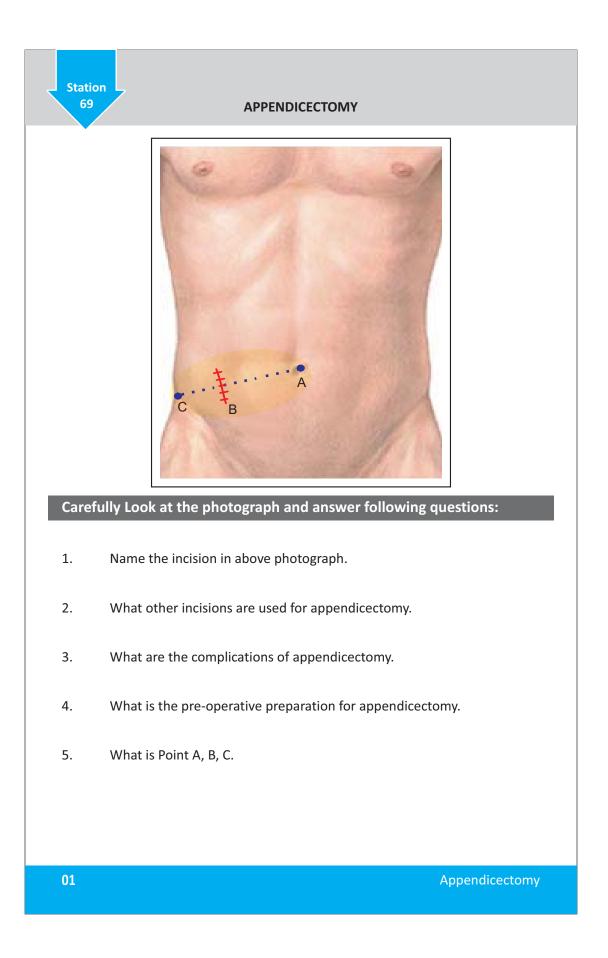


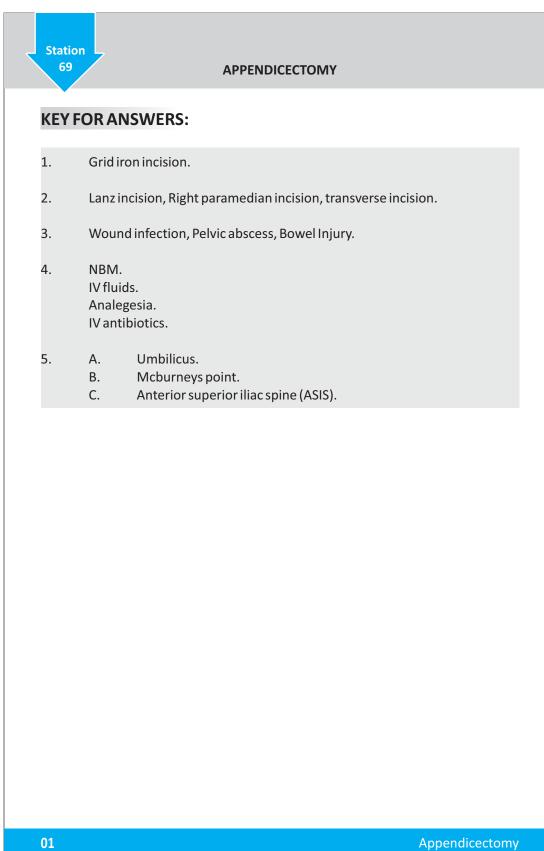


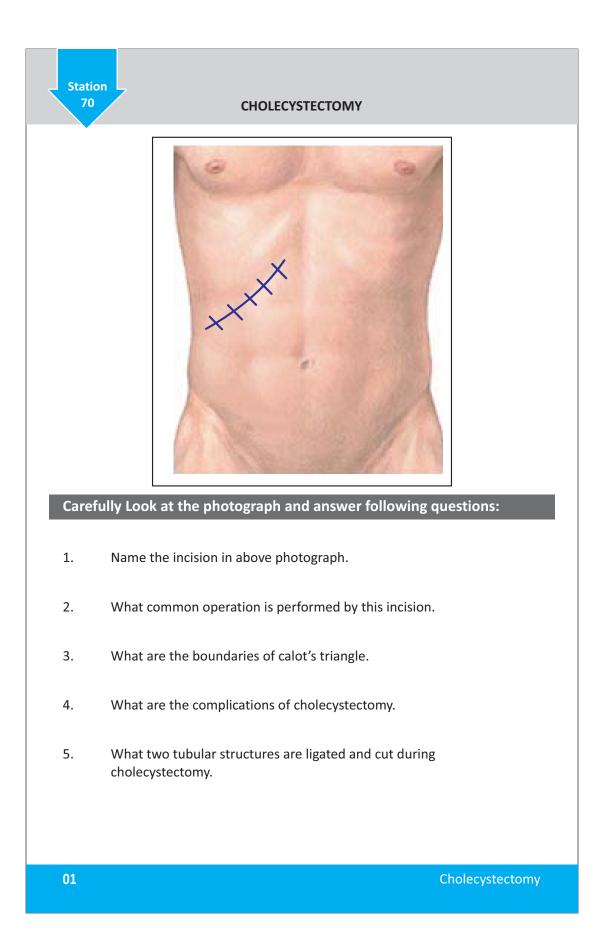
**Blood Transfusion** 

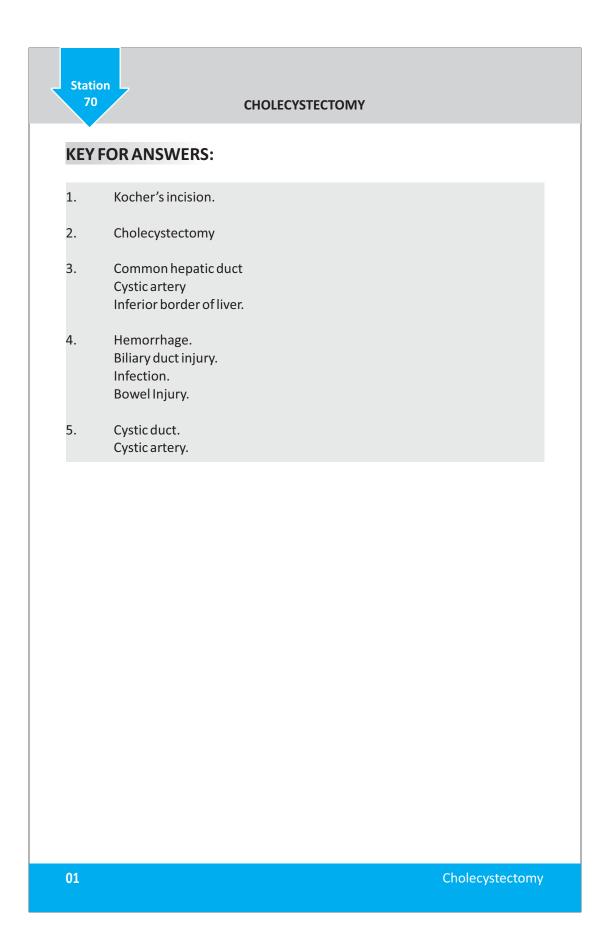


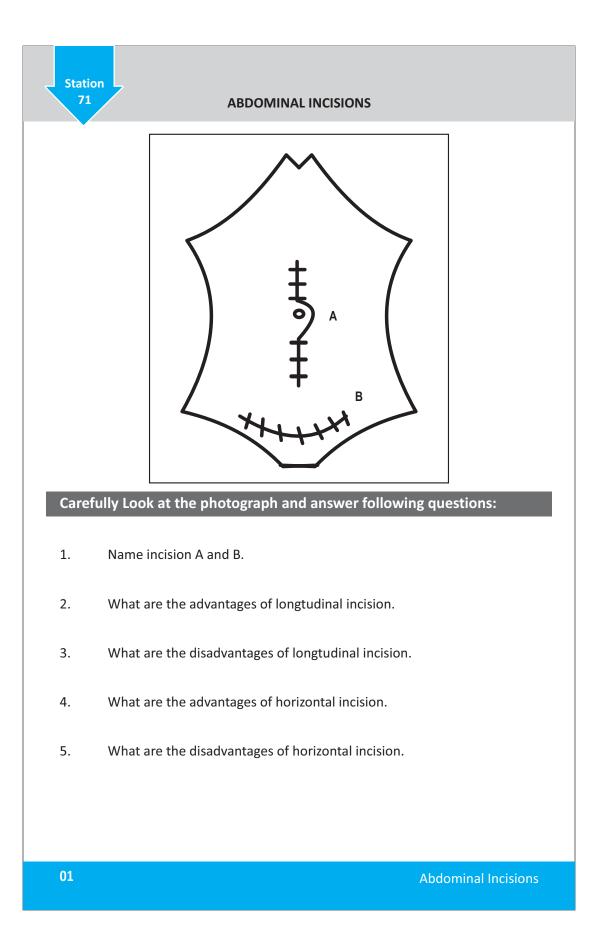


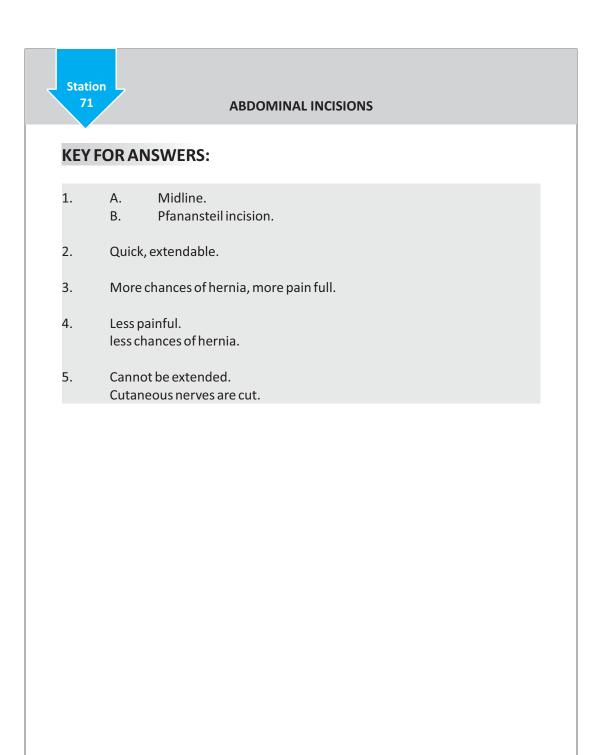




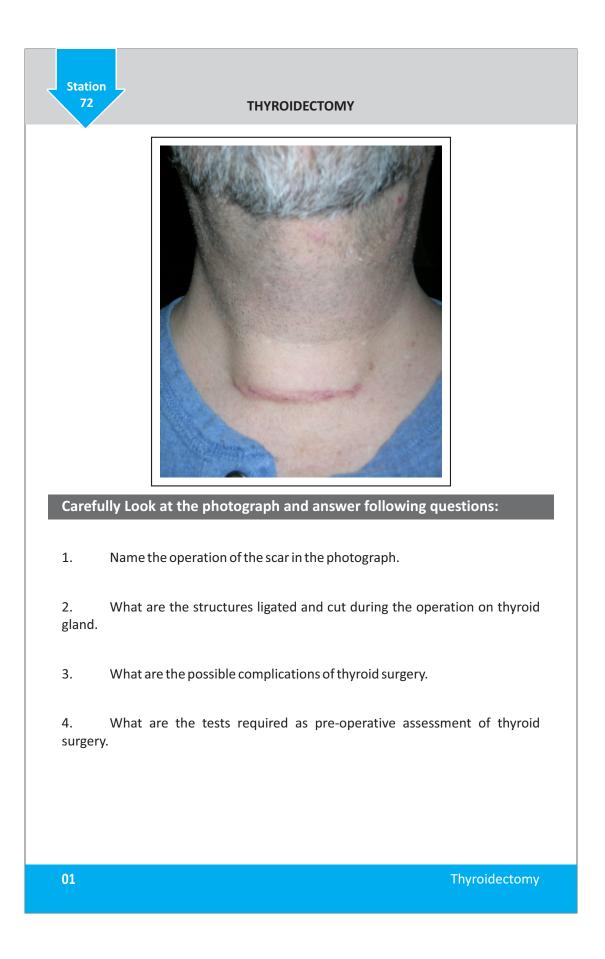




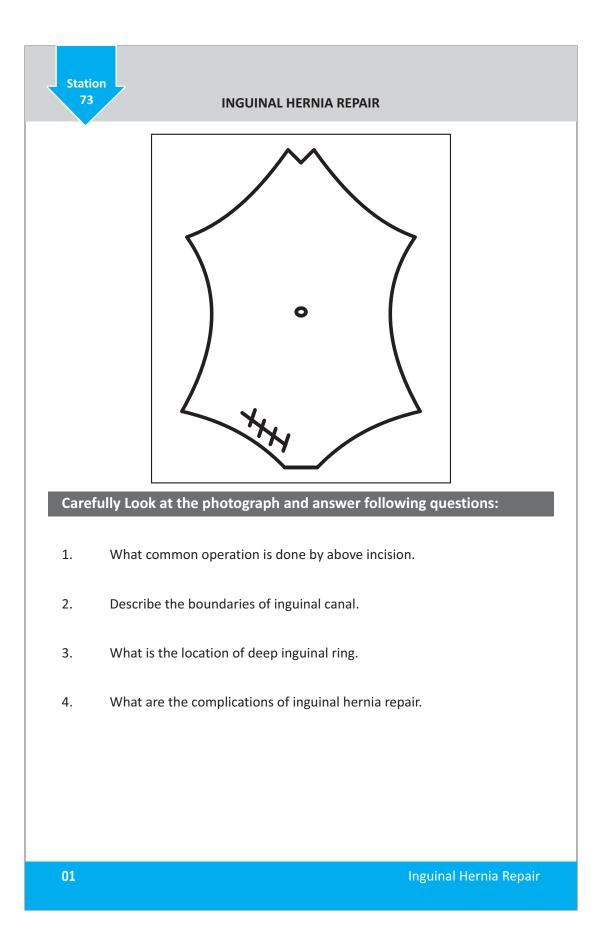




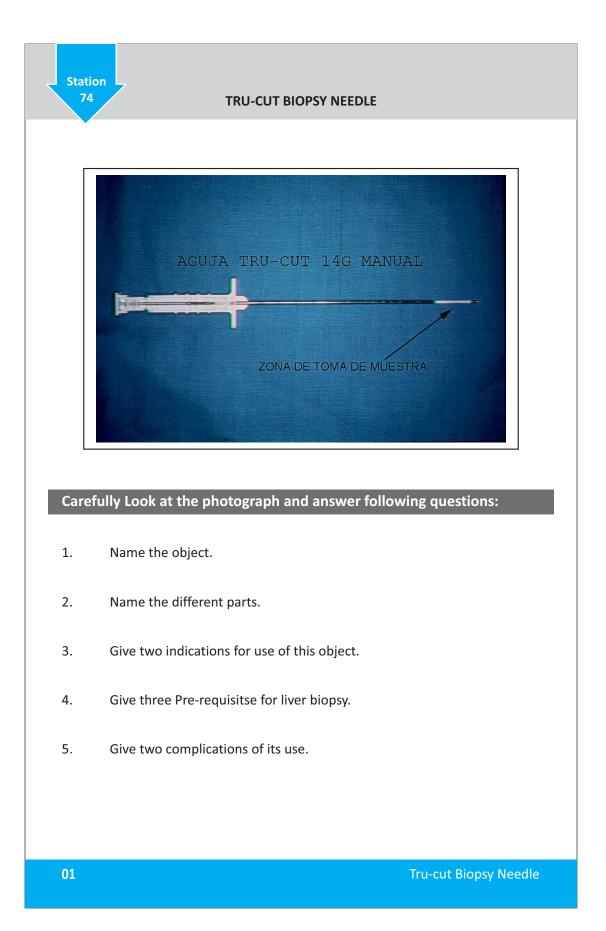
Abdominal Incisions

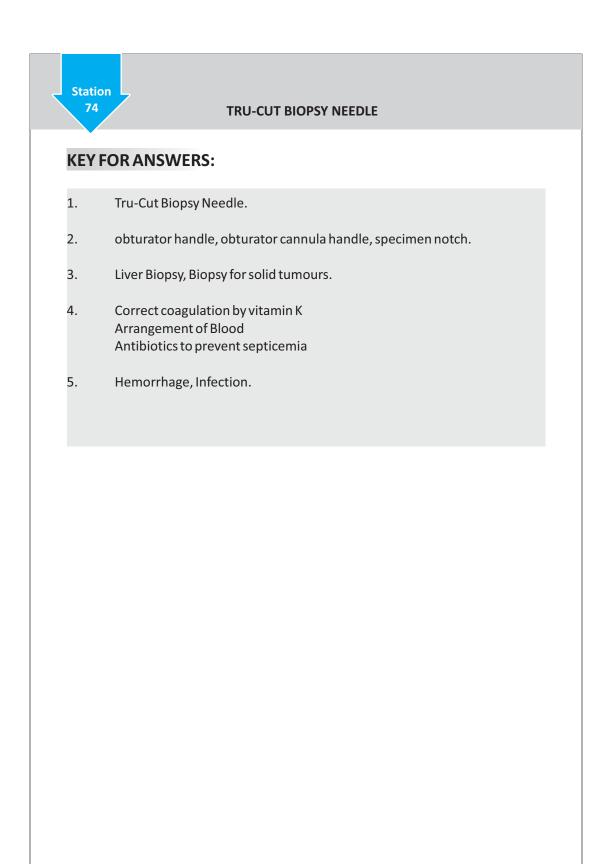


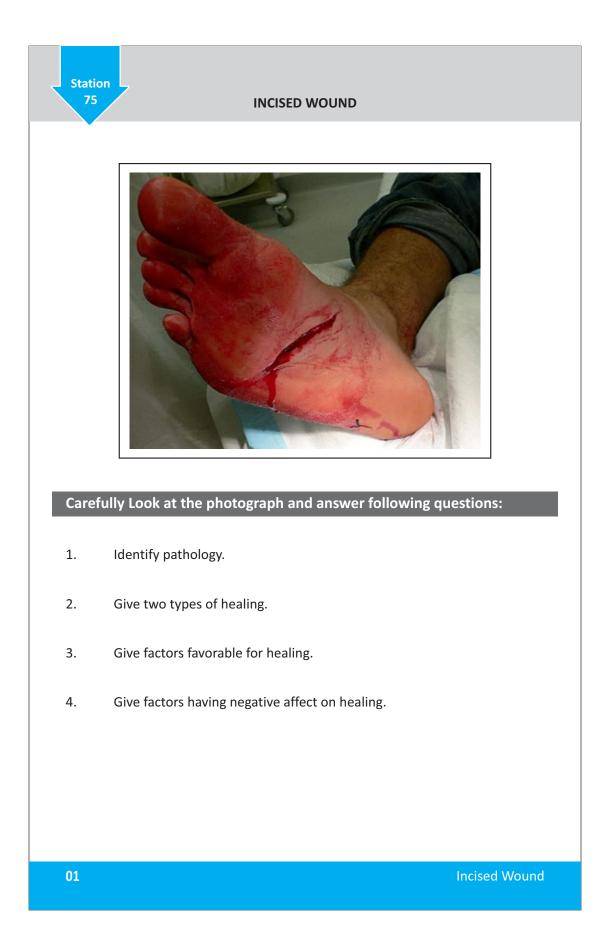
Statio 72					
	THYROIDECTOMY				
KEY	KEY FOR ANSWERS:				
1.	Thyroidectomy.				
2.	Superior thyroid artery and vein. Inferior thyroid vein.				
3.	Hemorrhage. Recurrent laryngeal nerve injury. Superior laryngeal nerve injury. Hypocalcemia. Thyroid crisis. Hypothyroidism. Keloid formation.				
4.	Thyroid function test. Thyroid ultrasound. FNAC. Indirect laryngoscopy.				
01	Thyroidectomy				

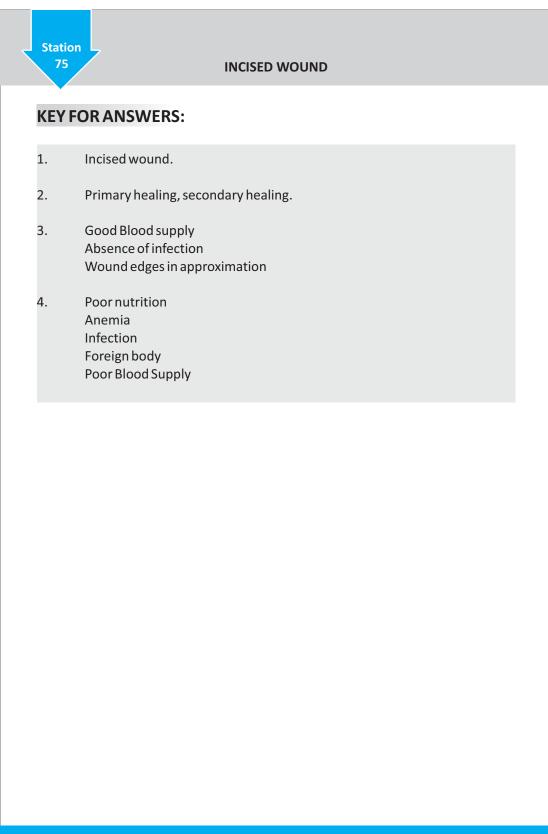


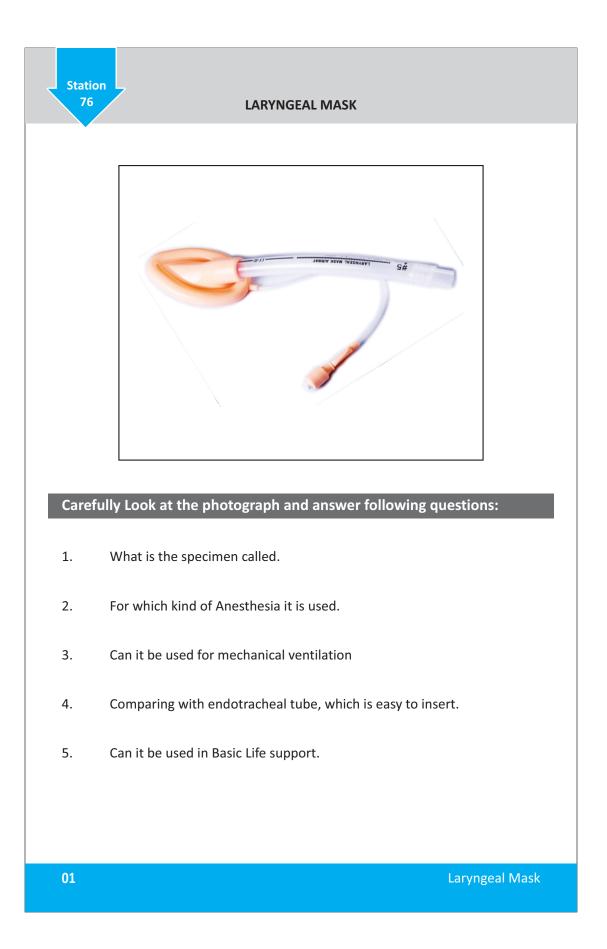
Statio 73	on	INGUINAL HERNIA REPAIR						
KEY	KEY FOR ANSWERS:							
1.	Inguinal hernia repair.							
2.	ANTERIOR: POSTERIOR: SUPERIOR: INFERIOR:	External oblique. Fascia transversalis. Conjoint tendon. Inguinal ligament.						
3.	1cm above mid inguinal point.							
4.	Infection Hemorrhage Groin Pain Injury to blood Injury to vas	supply of testis						
01			Inguinal Hernia Repair					

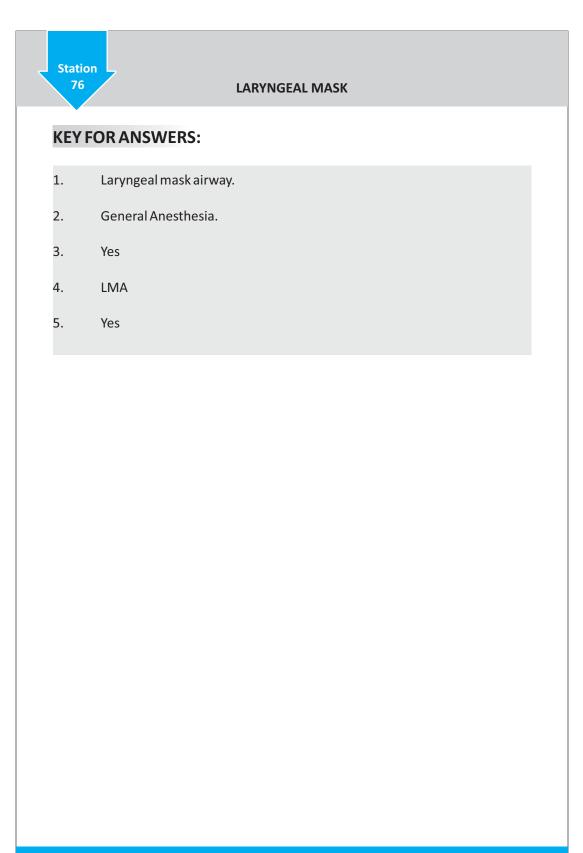


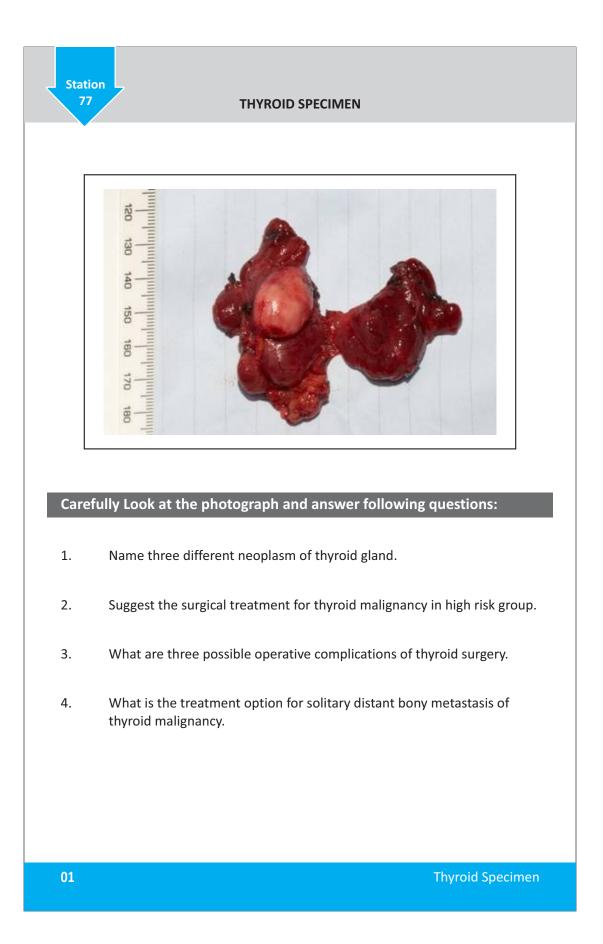


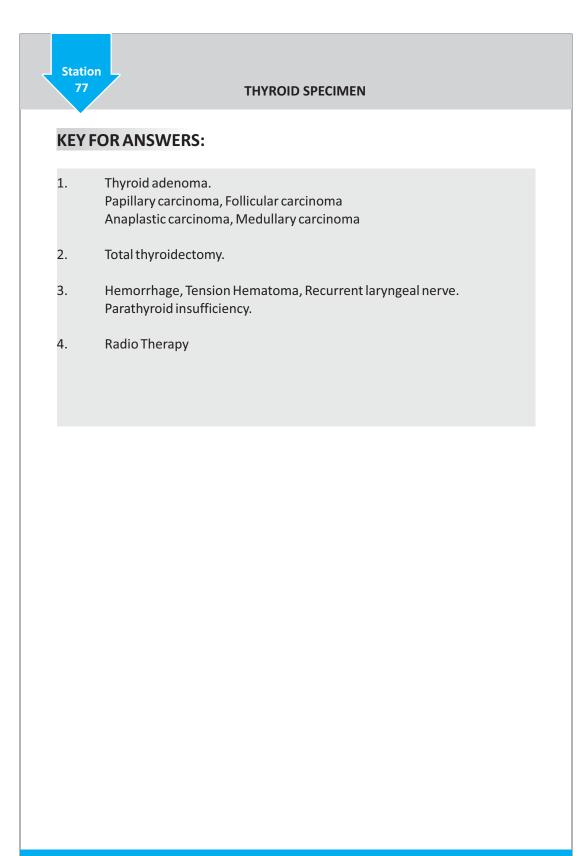


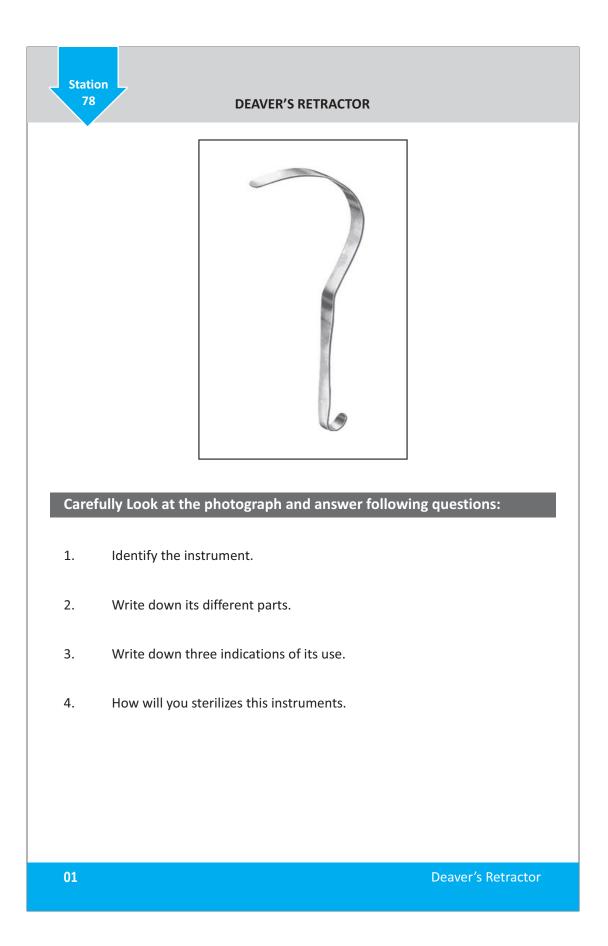


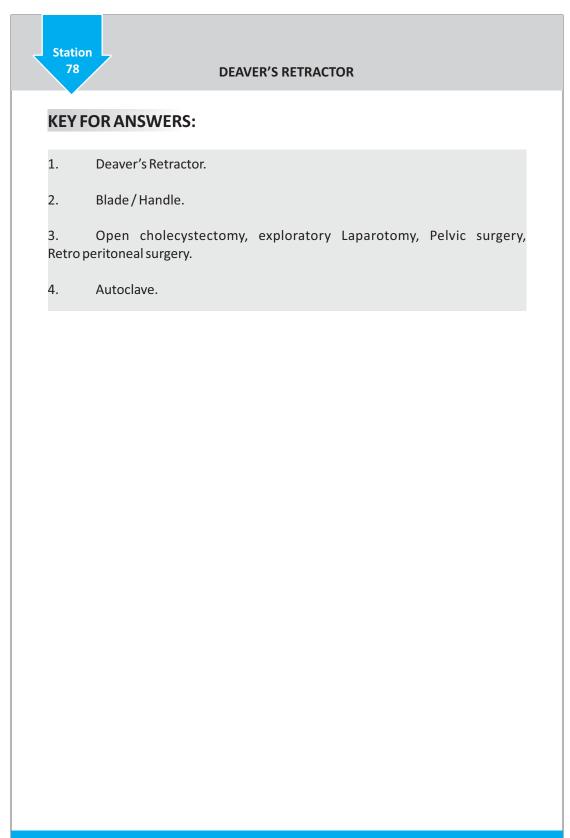




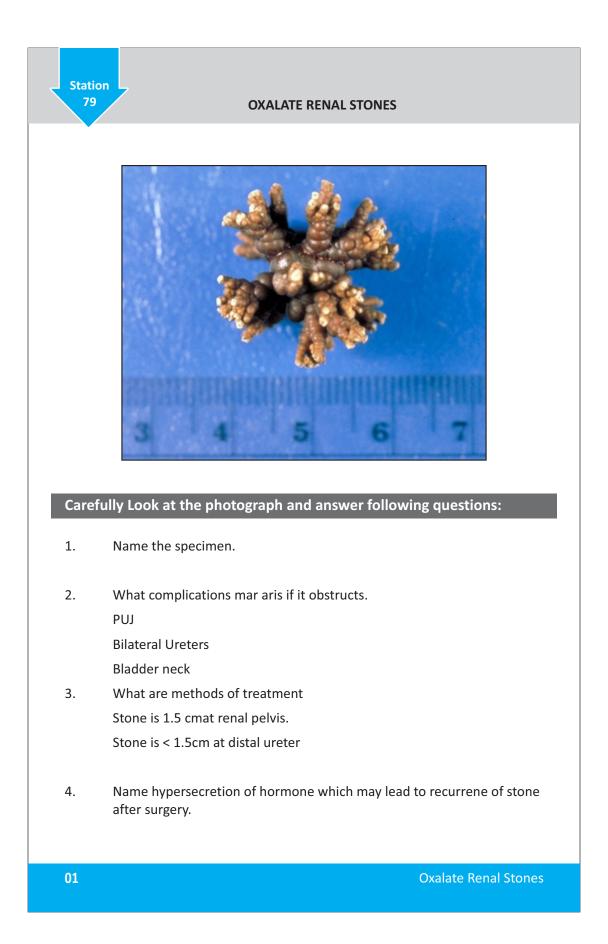


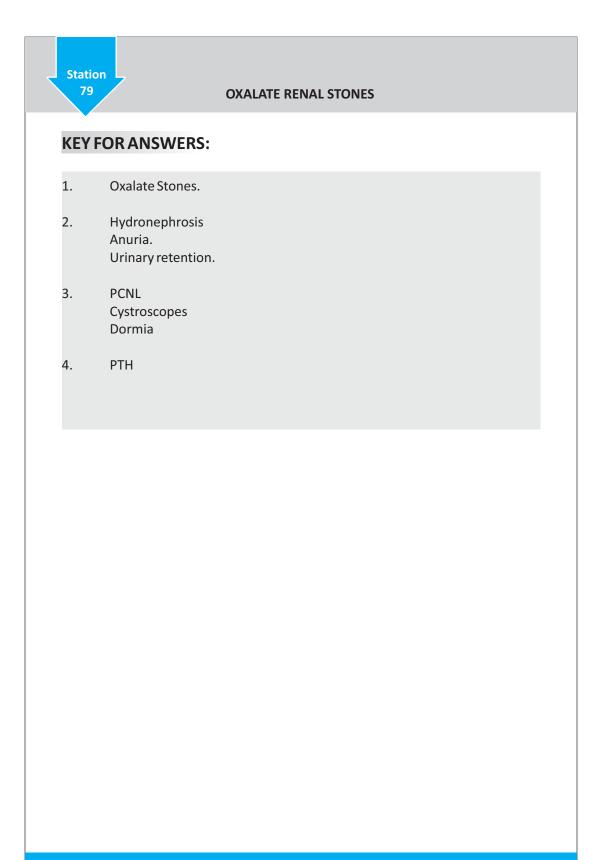


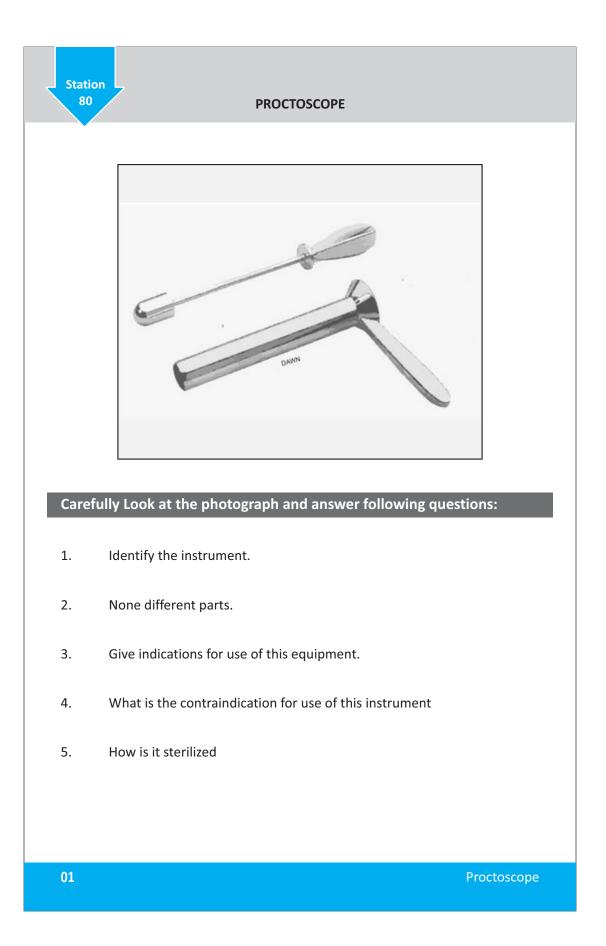


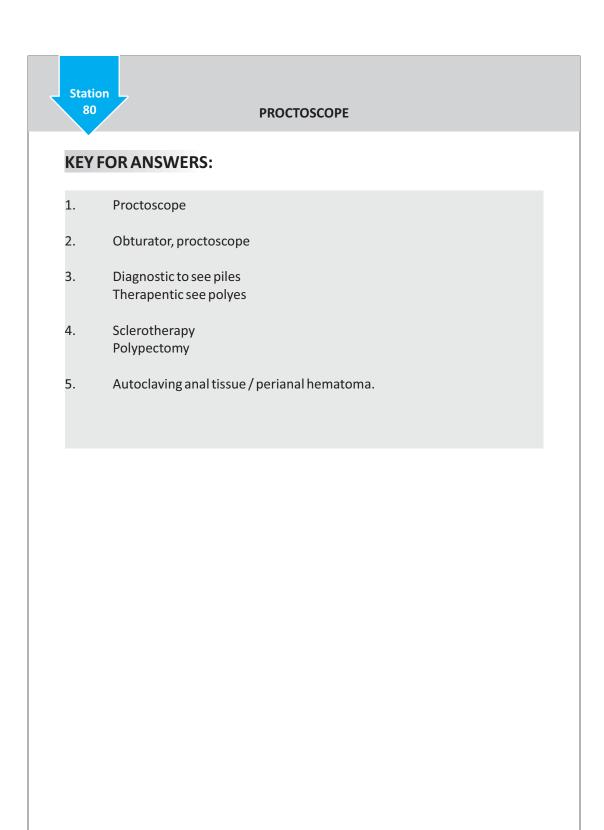


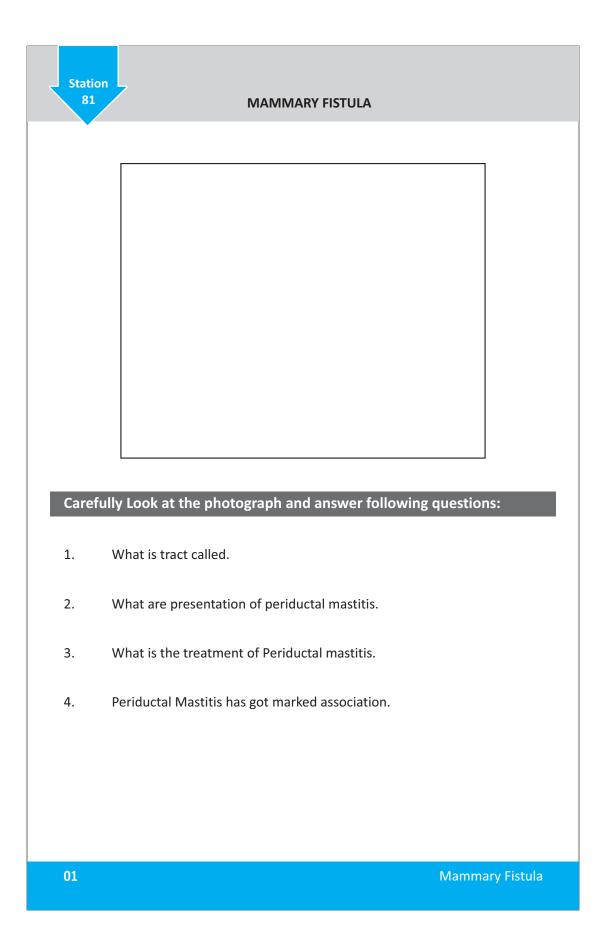
Deaver's Retractor

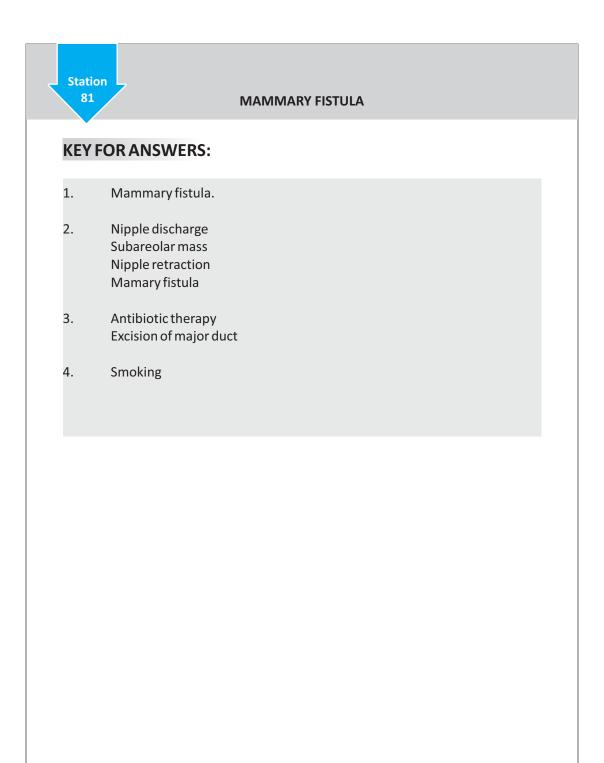


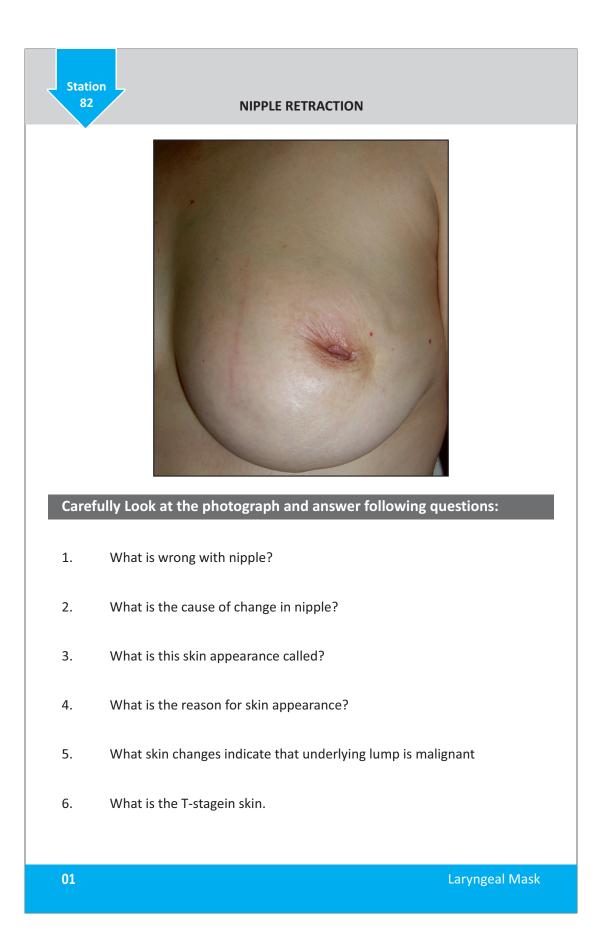


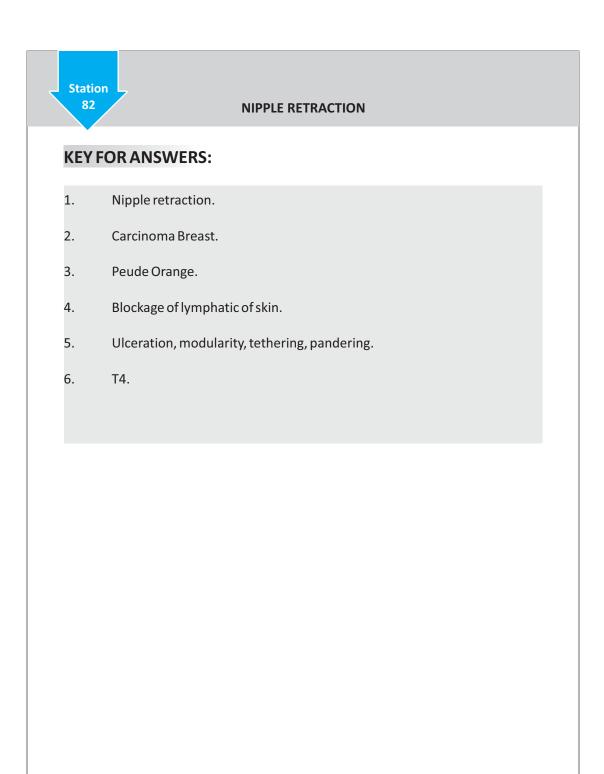


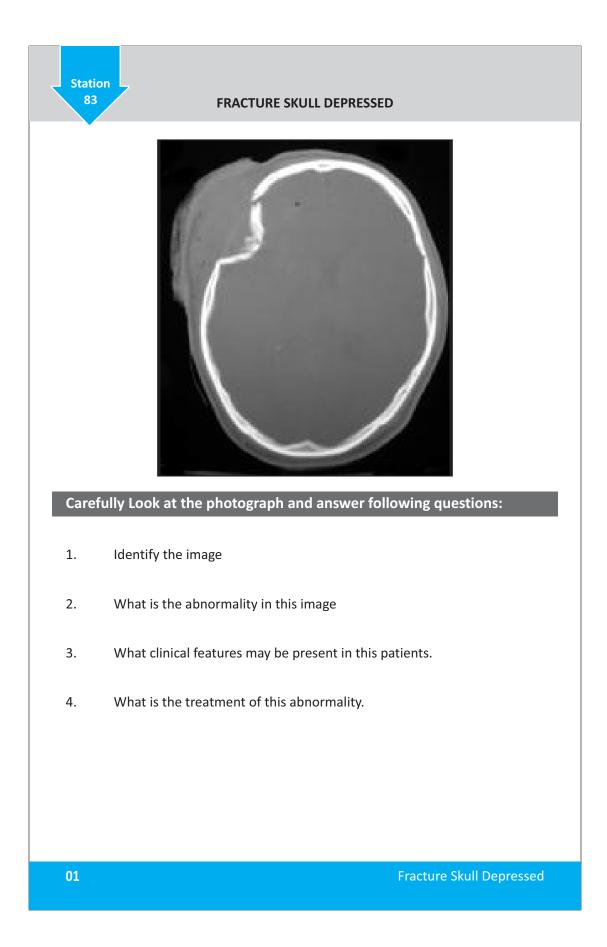


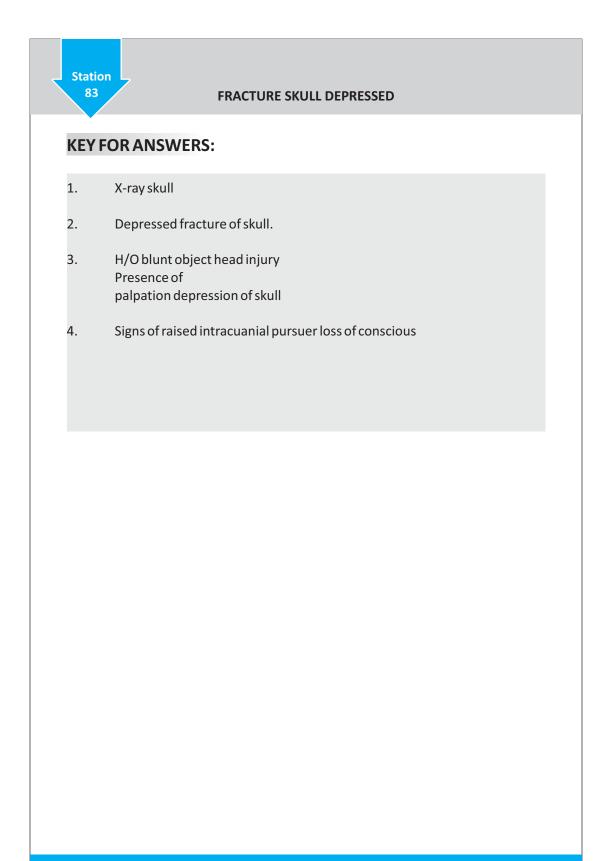


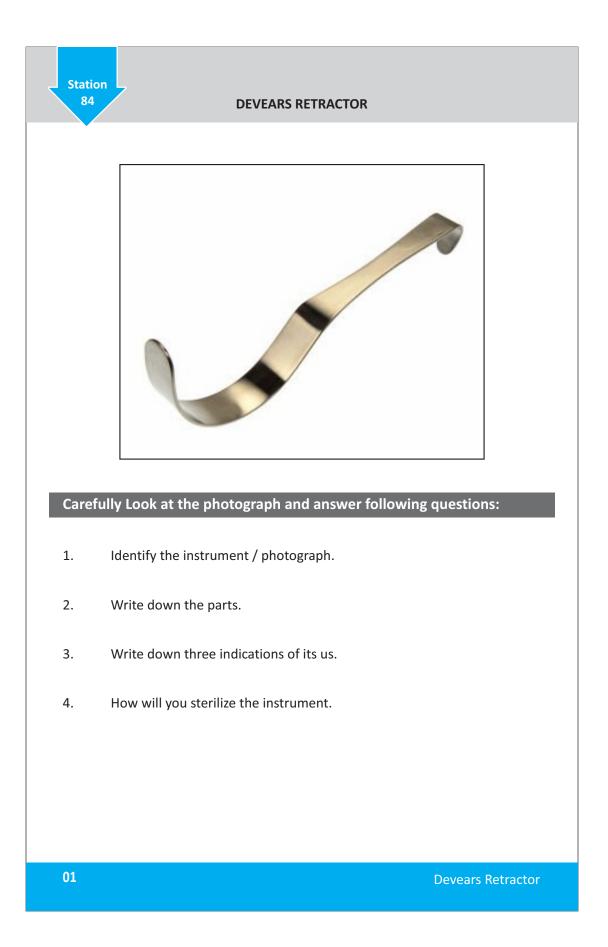


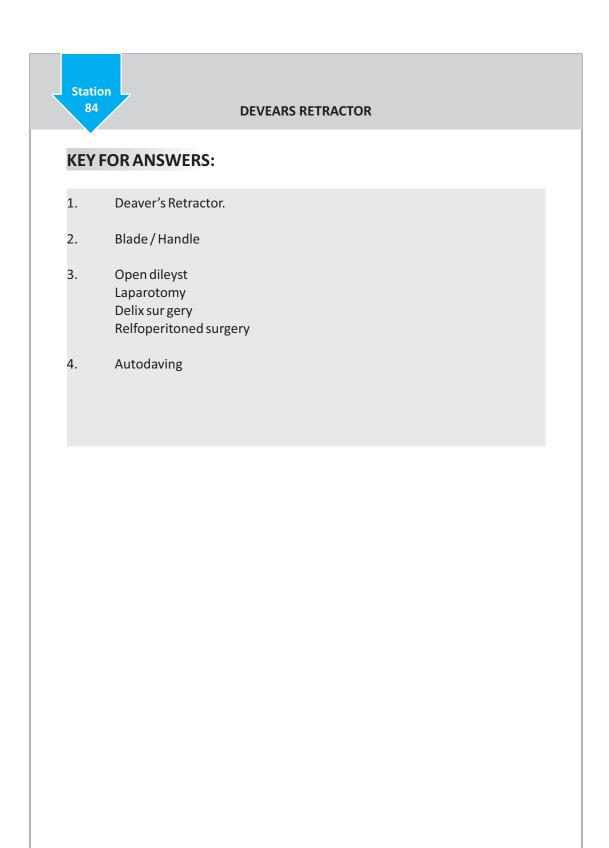


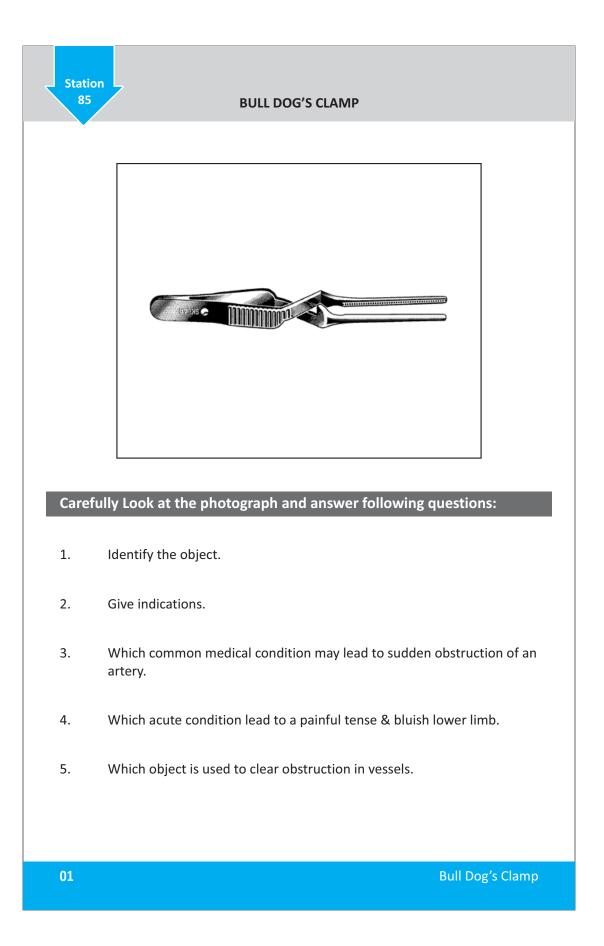


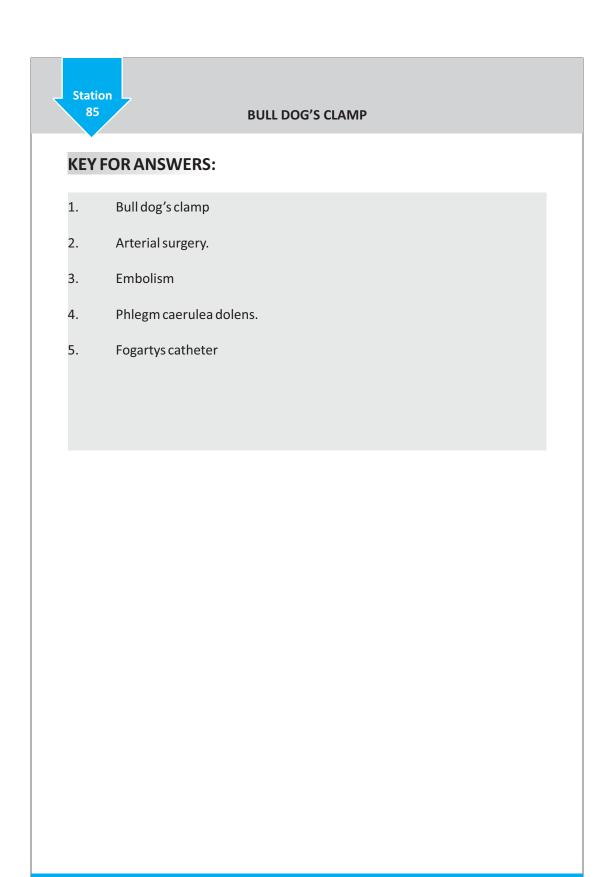


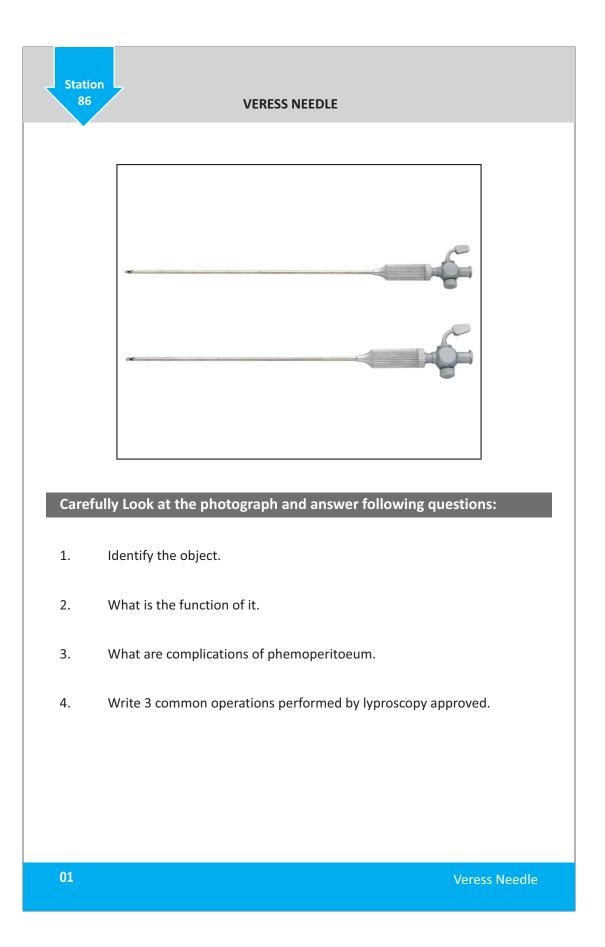


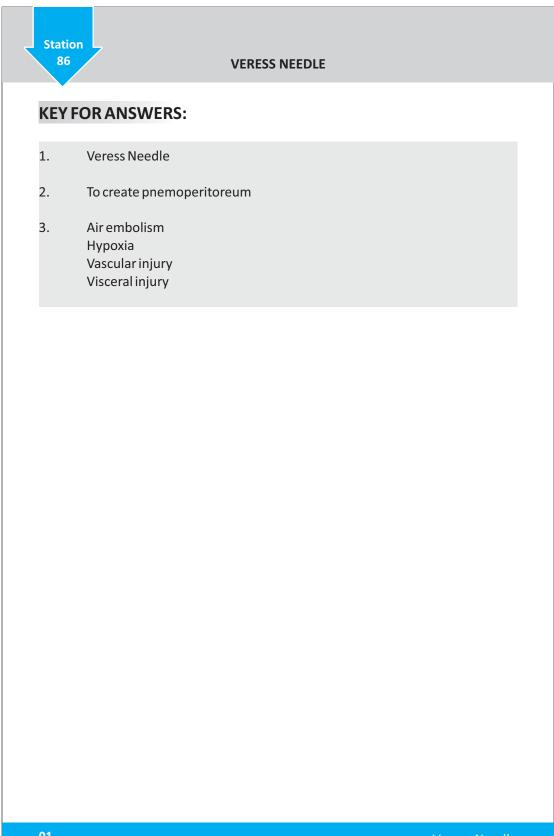




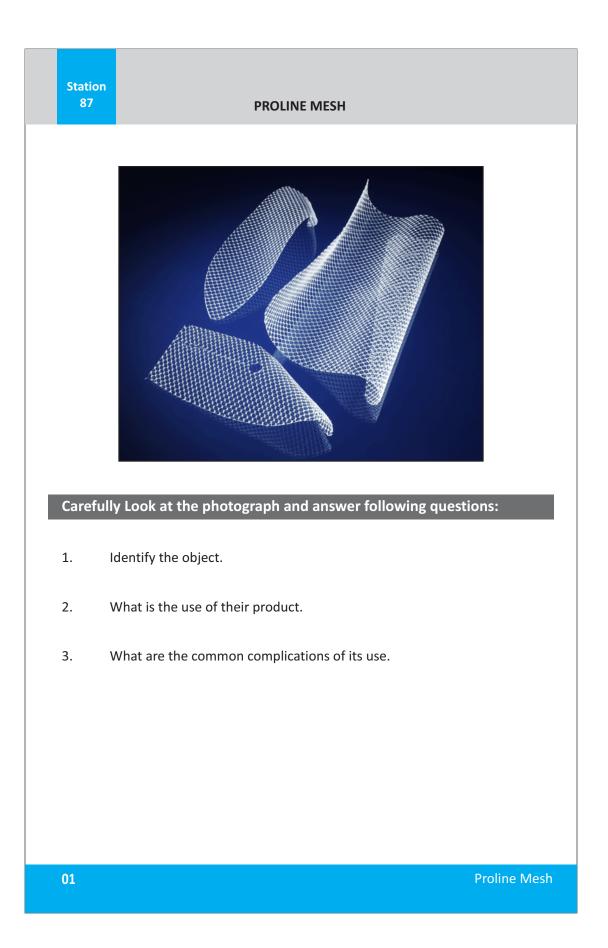


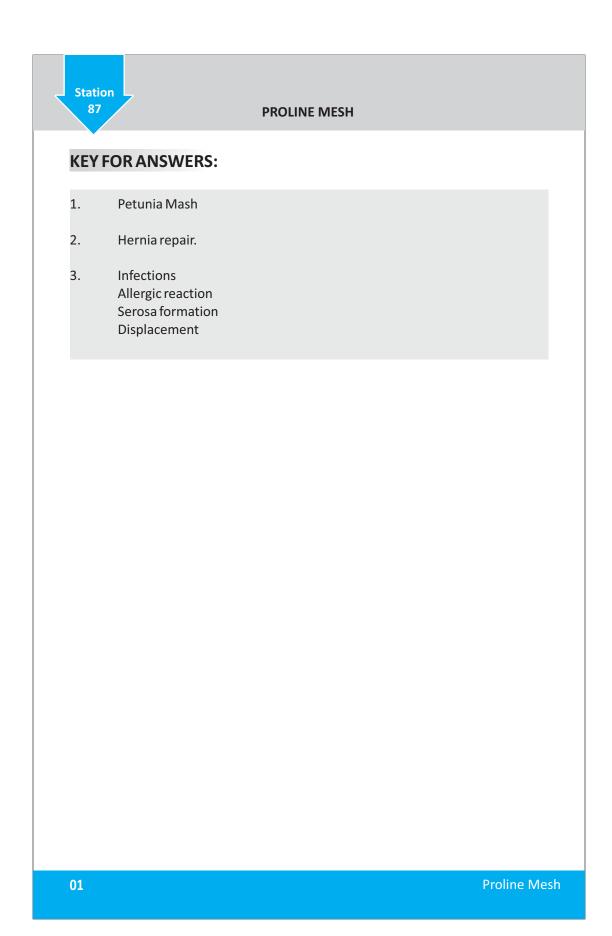


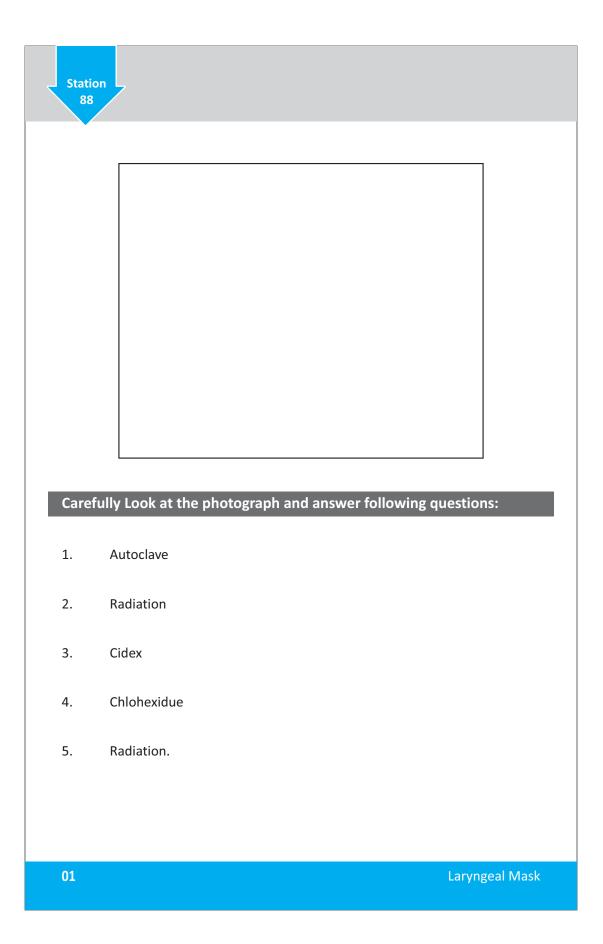




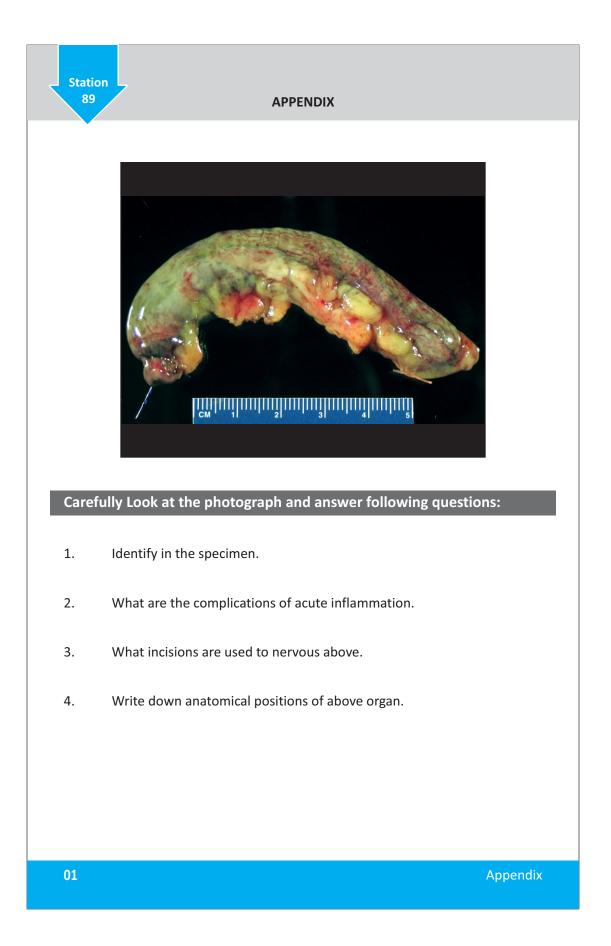
Veress Needle

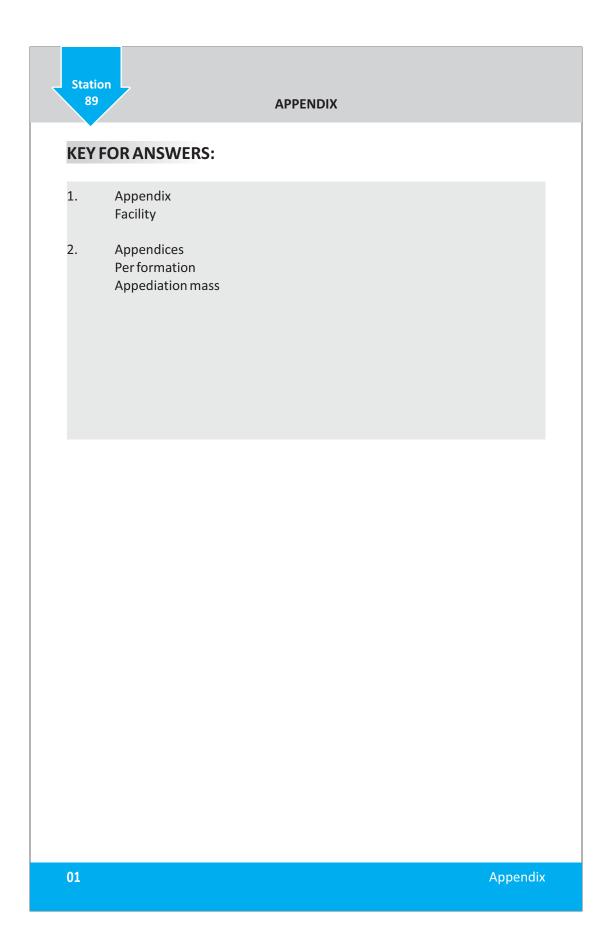


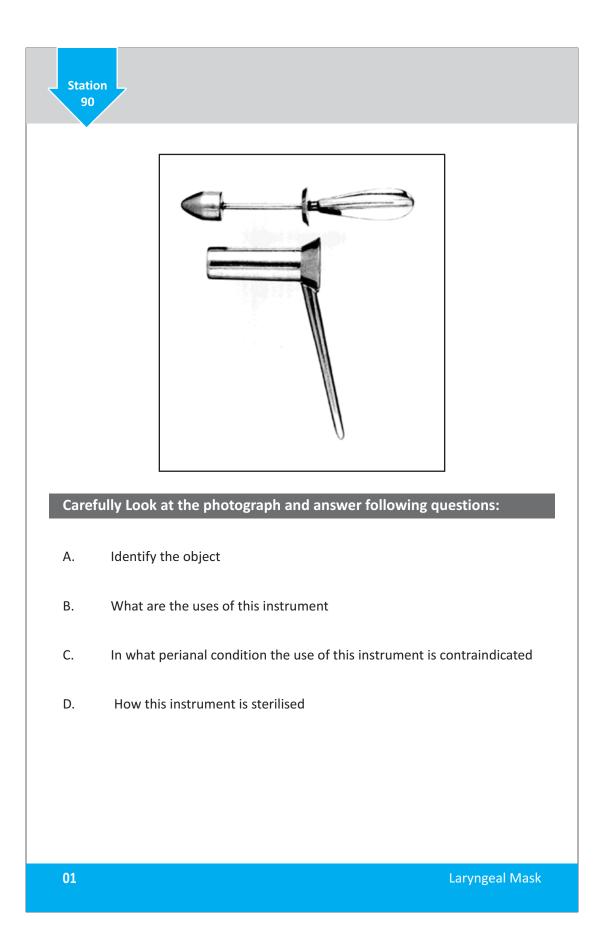


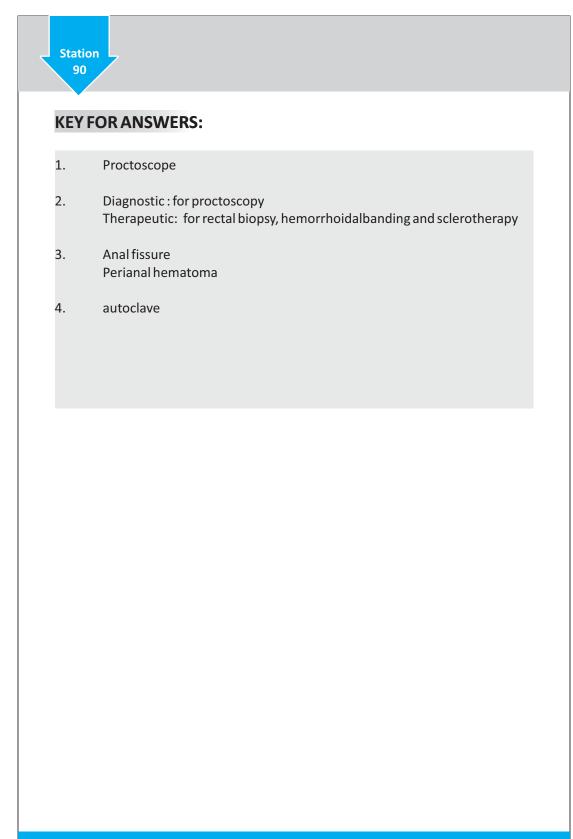


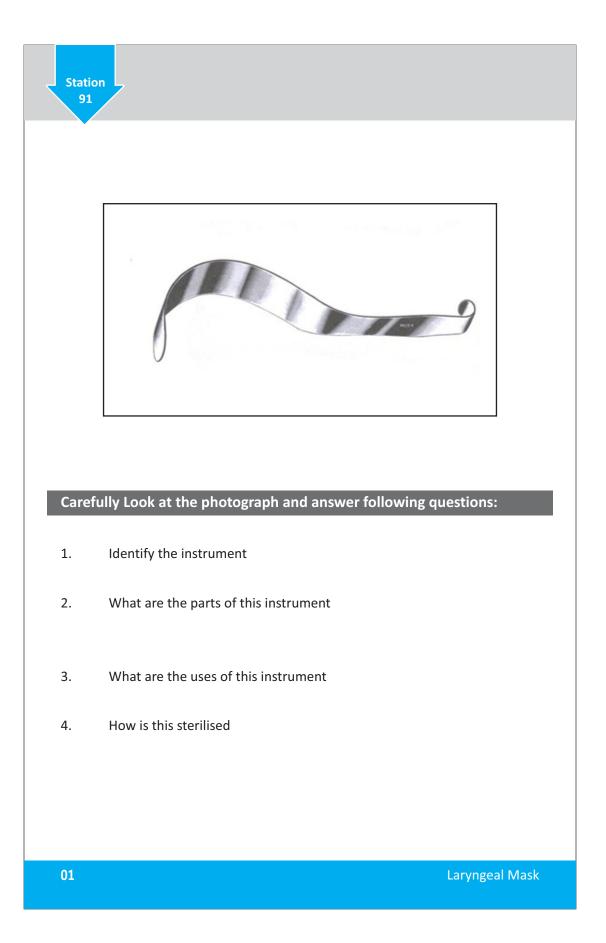
Station 88	7		
KEY FO	R ANSWERS:		
01			Incised Wound

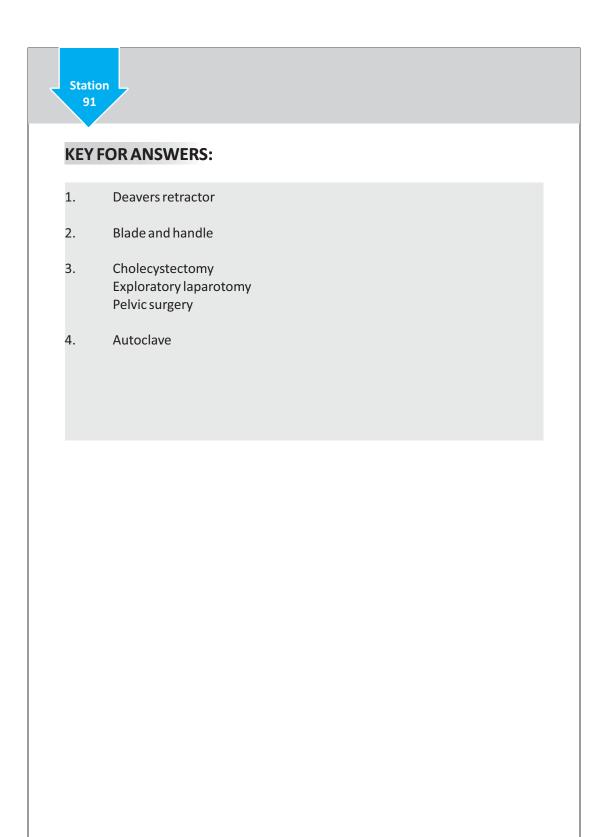




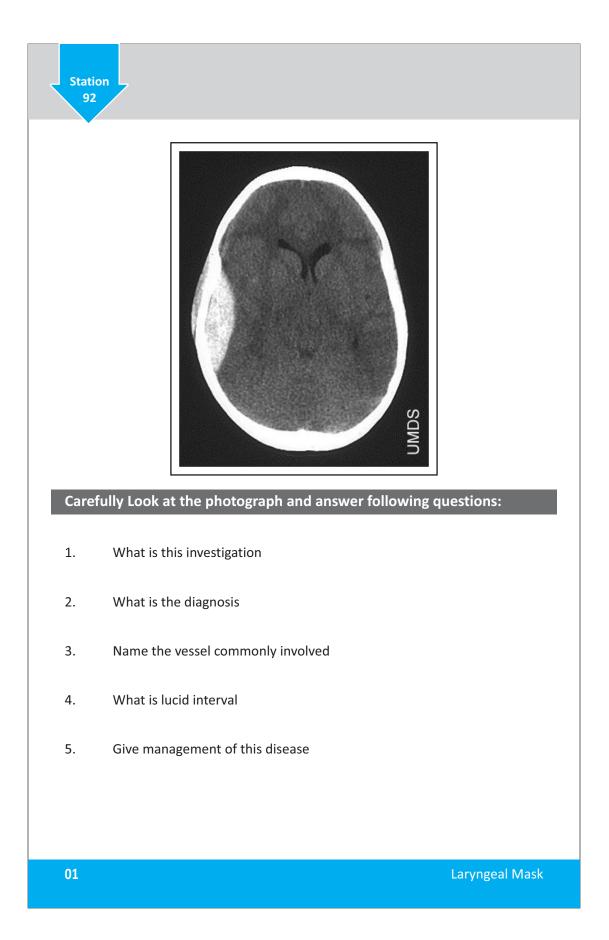


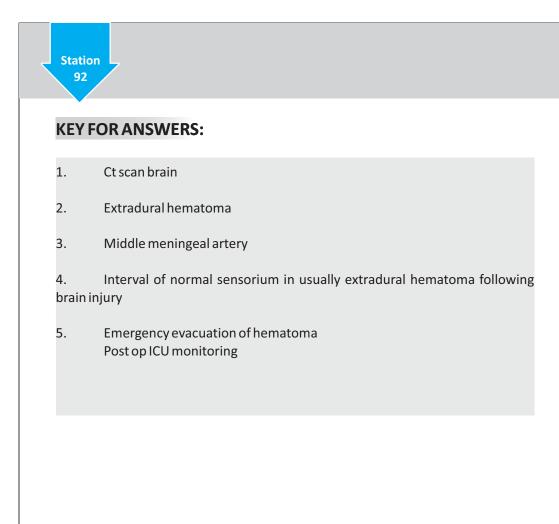


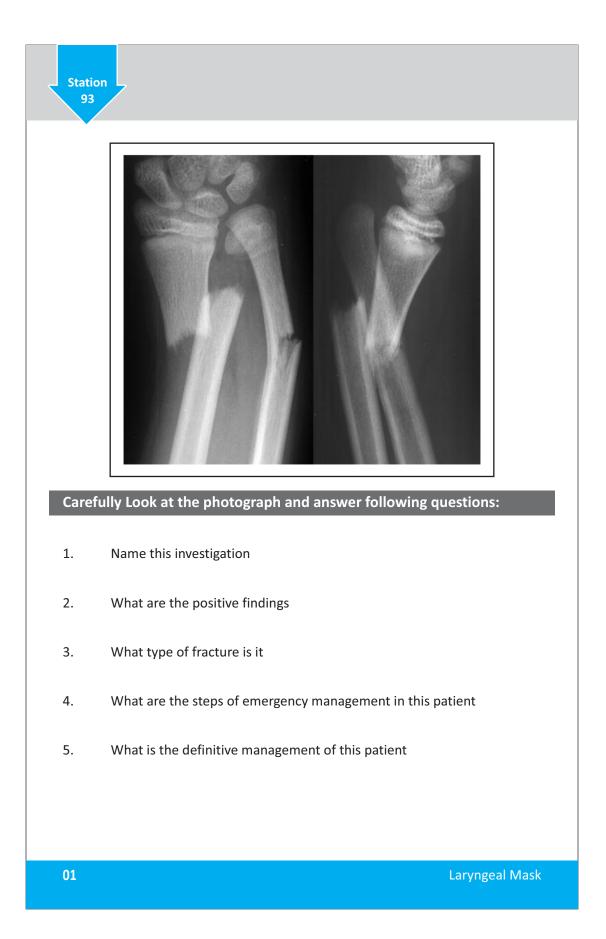




Incised Wound

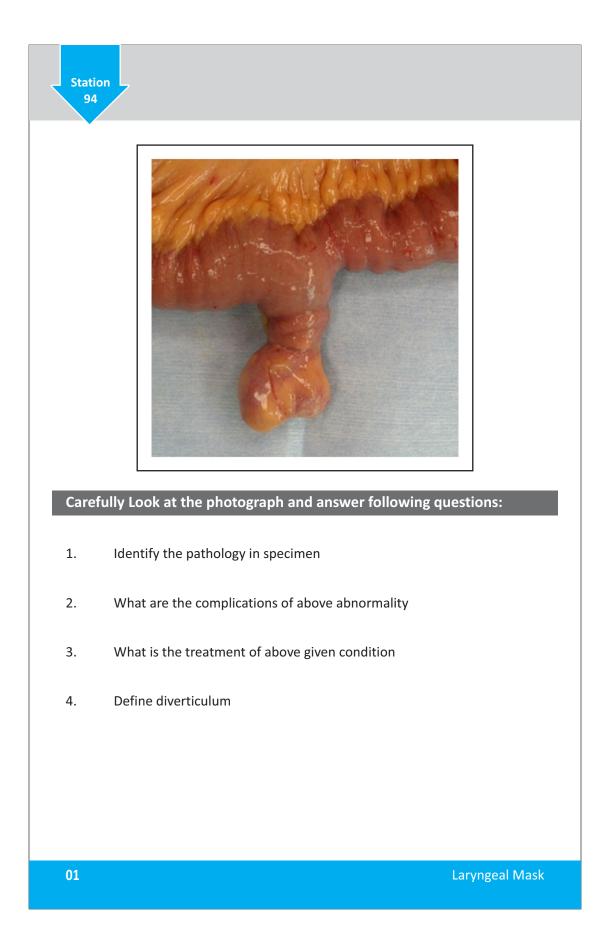


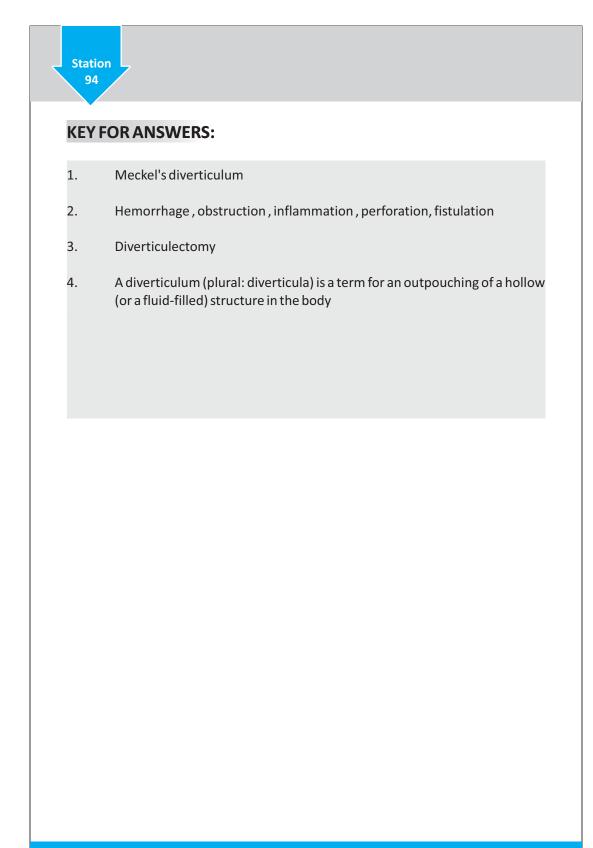


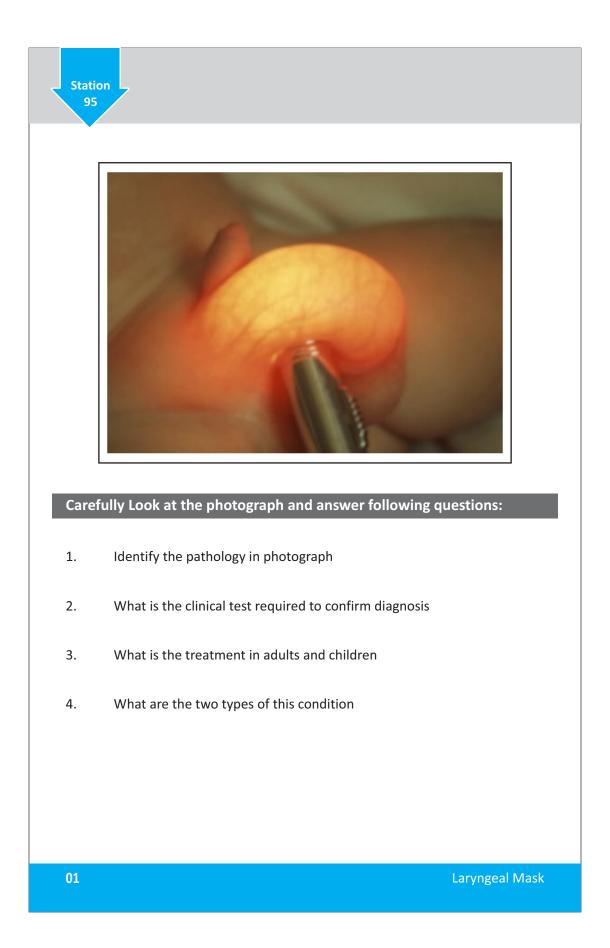


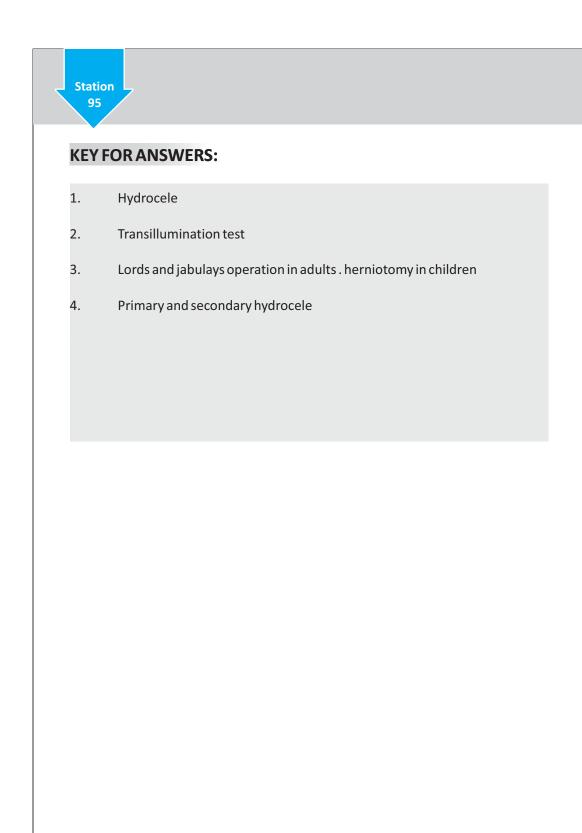
## **KEY FOR ANSWERS:**

- 1. Radiograph of ulna and radius AP and lateral
- 2. Fracture distal radius and ulna
- 3. Communited fracture of radius and oblique fracture of ulna
- 4. Splint / immobilization , analgesia , resuscitation if in shock
- 5. Internal fixation with DCP of ulna and radius











42 year male presented with right renal colic. He had following x-ray of abdomen



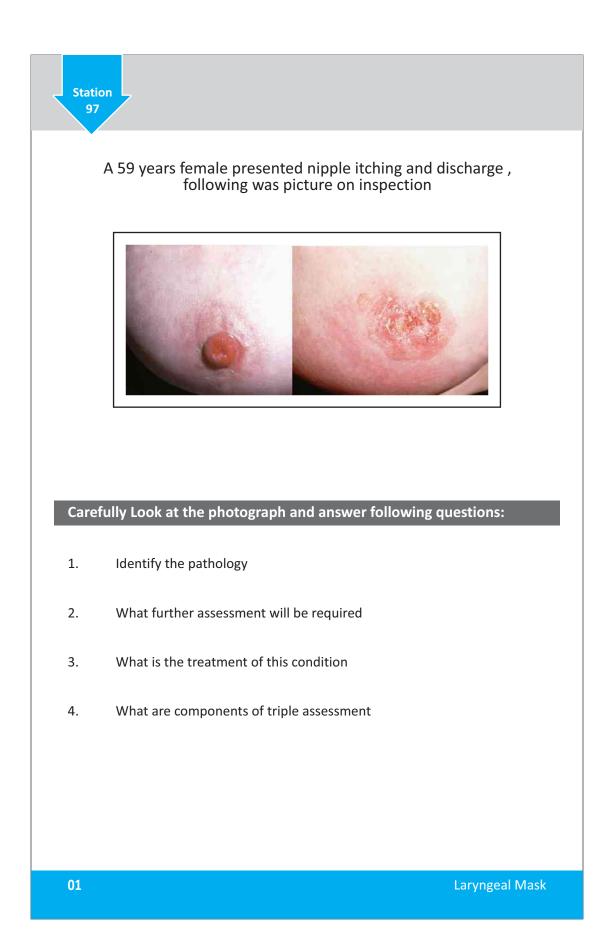
## Carefully Look at the photograph and answer following questions:

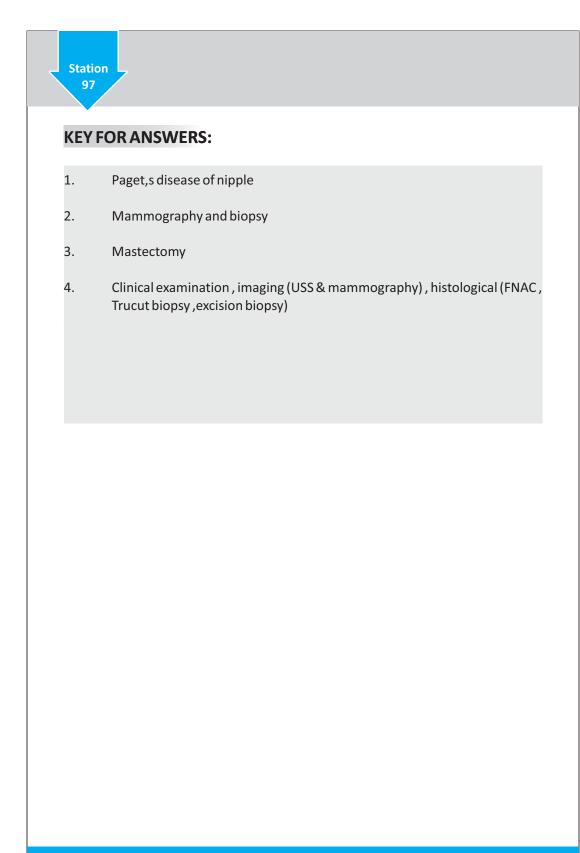
- 1. What are the findings in X-ray
- 2. What further investigations will be required
- 3. What is the initial management
- 4. What are different methods of definitive management
- 5. What are the complications of this condition

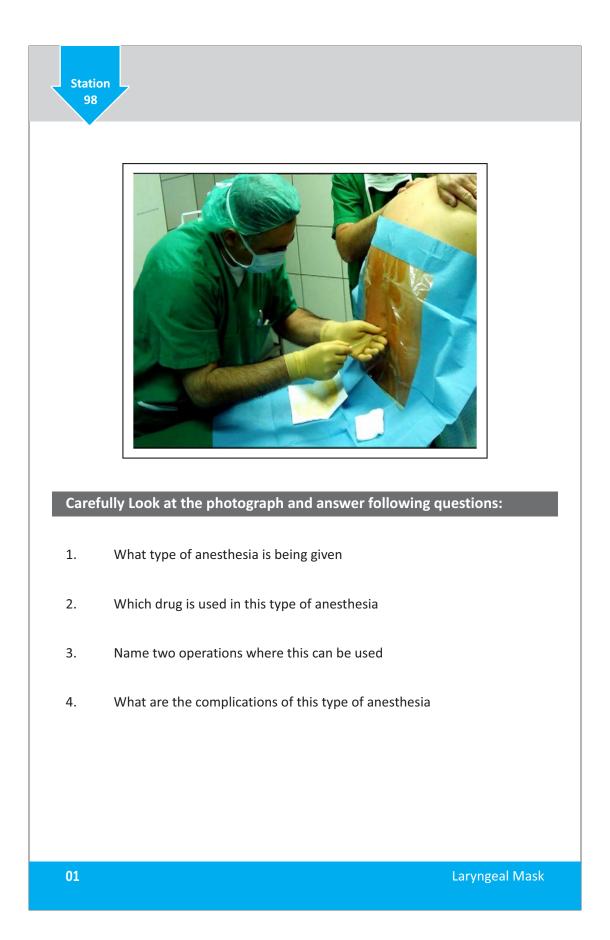


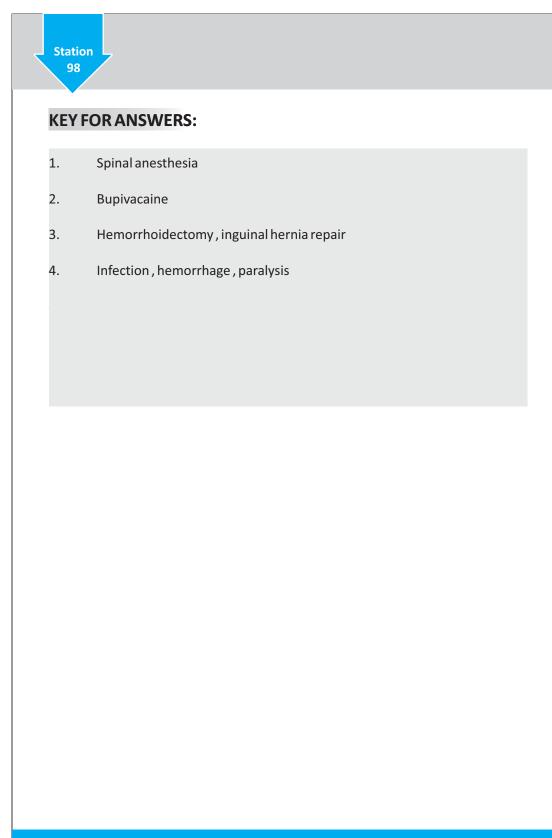
## **KEY FOR ANSWERS:**

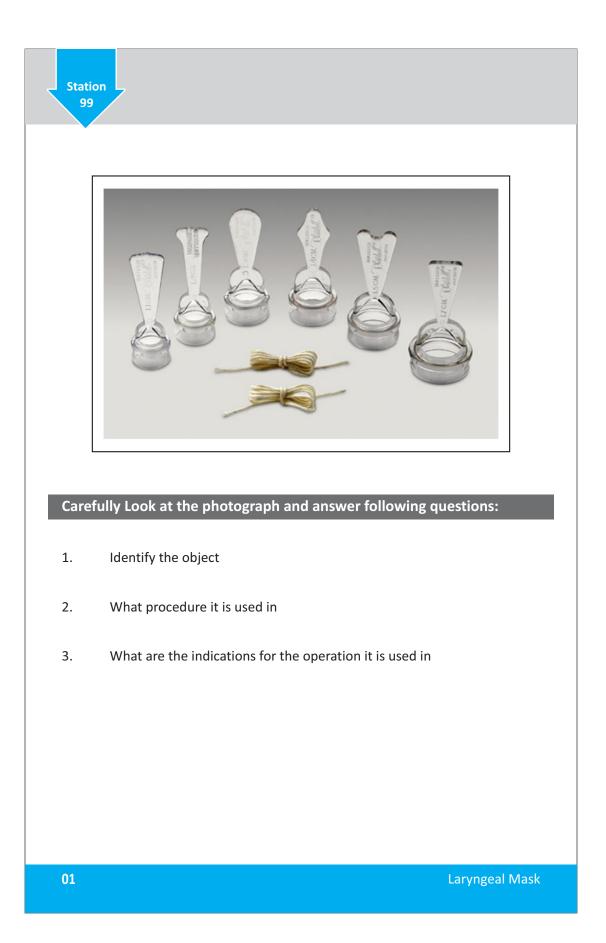
- 1. Opacity in right renal area
- 2. USS ,IVU , urine complete , CBC
- 3. IV fluids , analgesia , antibiotics
- 4. Surgery , ESWL , endoscopic removal PCNL
- 5. Hematuria, infection, obstruction, renal parenchymal damage

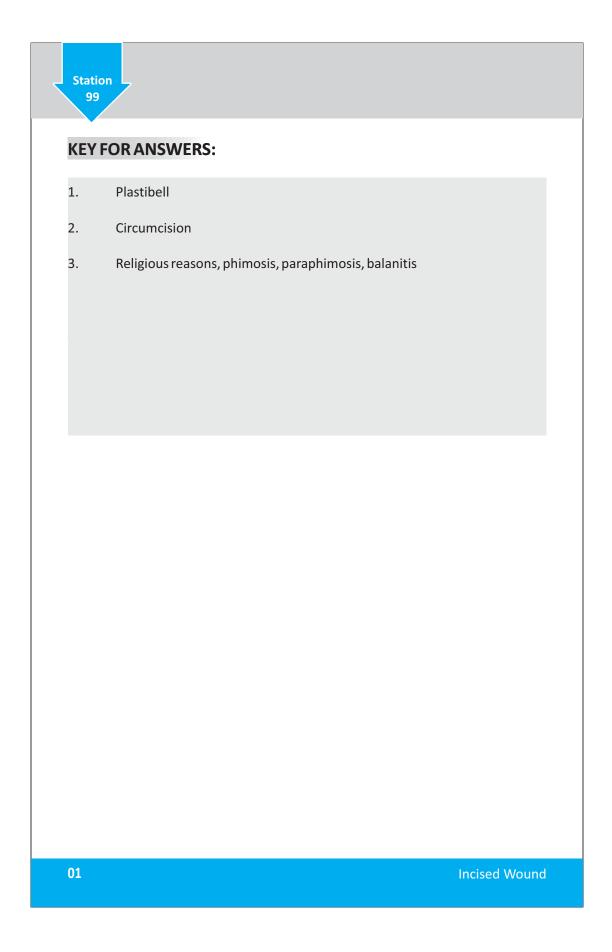


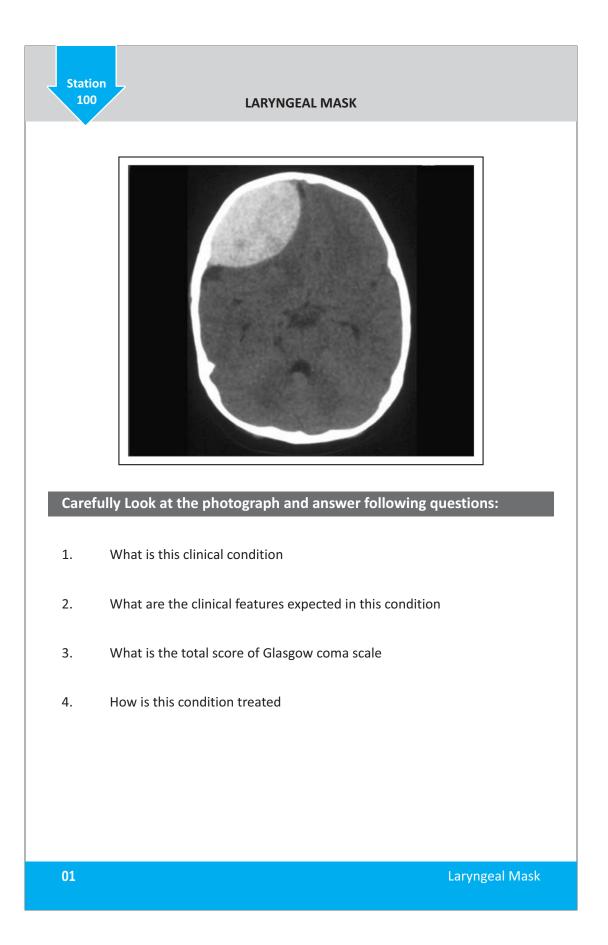


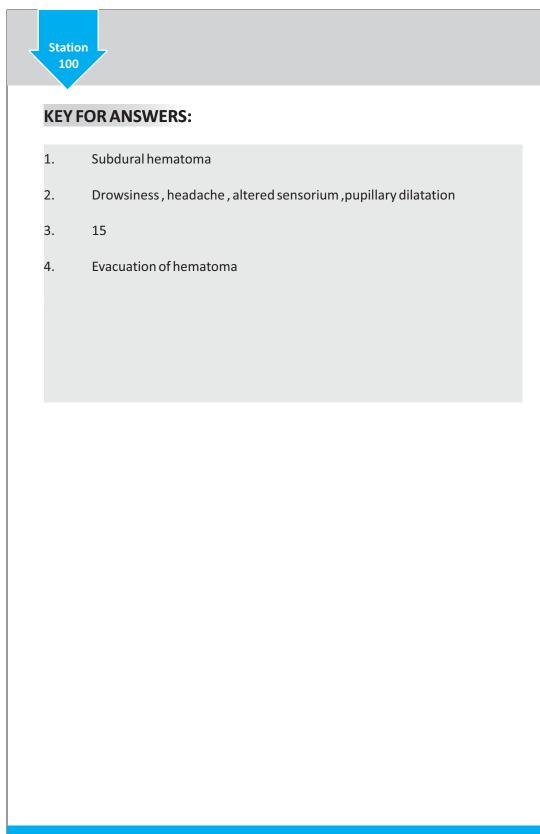


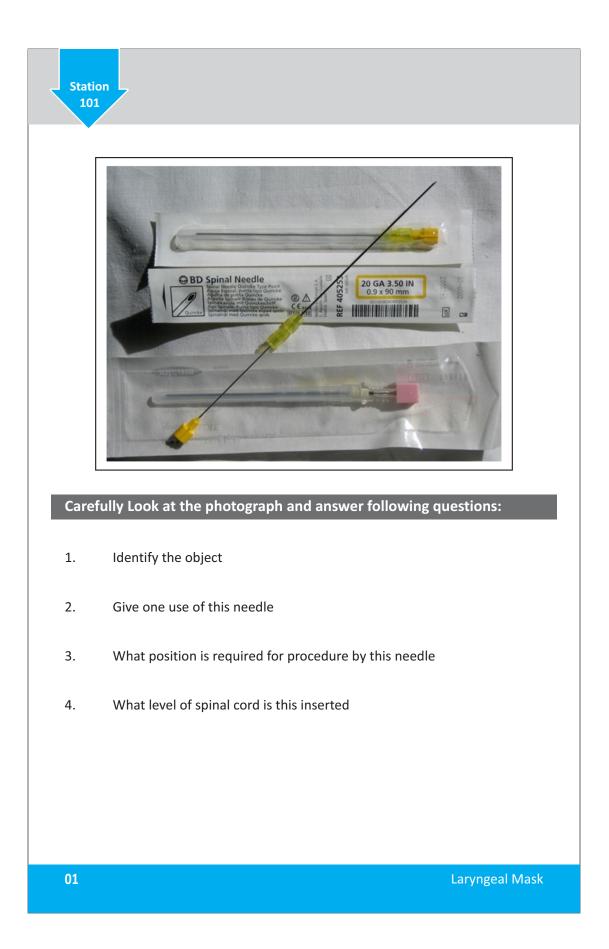


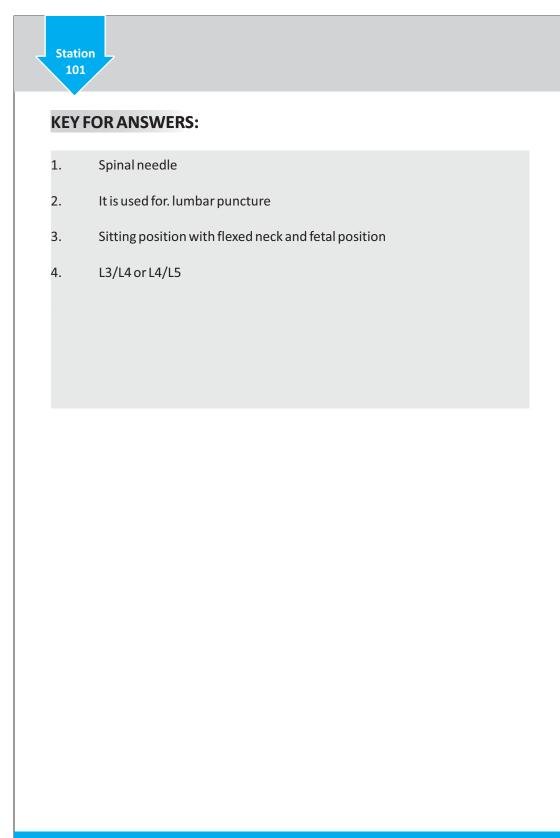


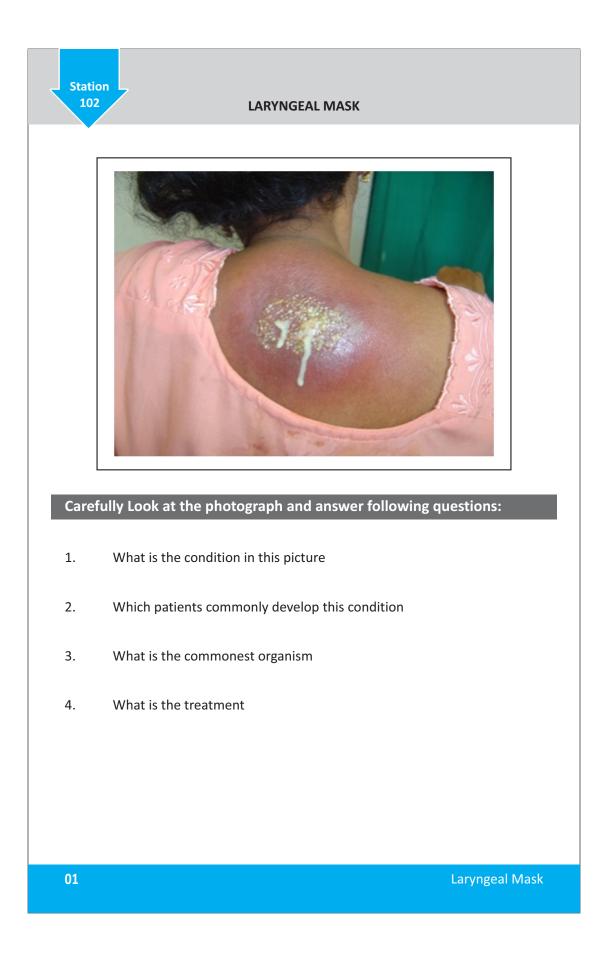










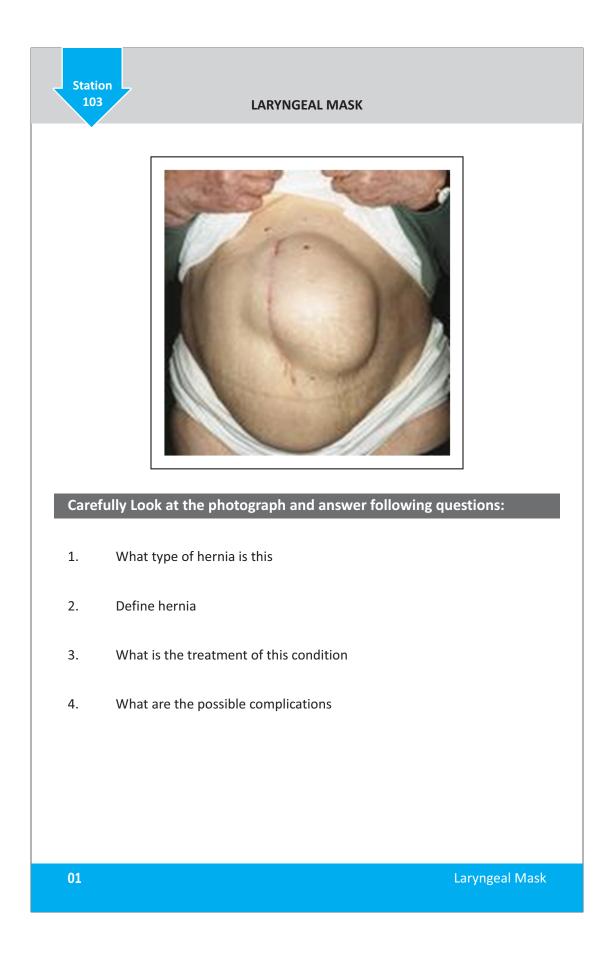


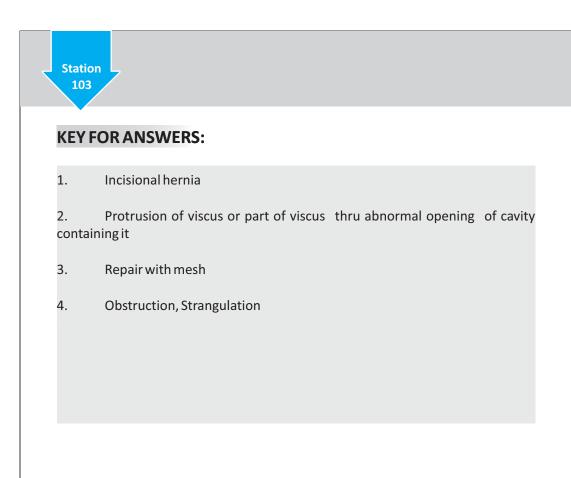


1. Carbuncle

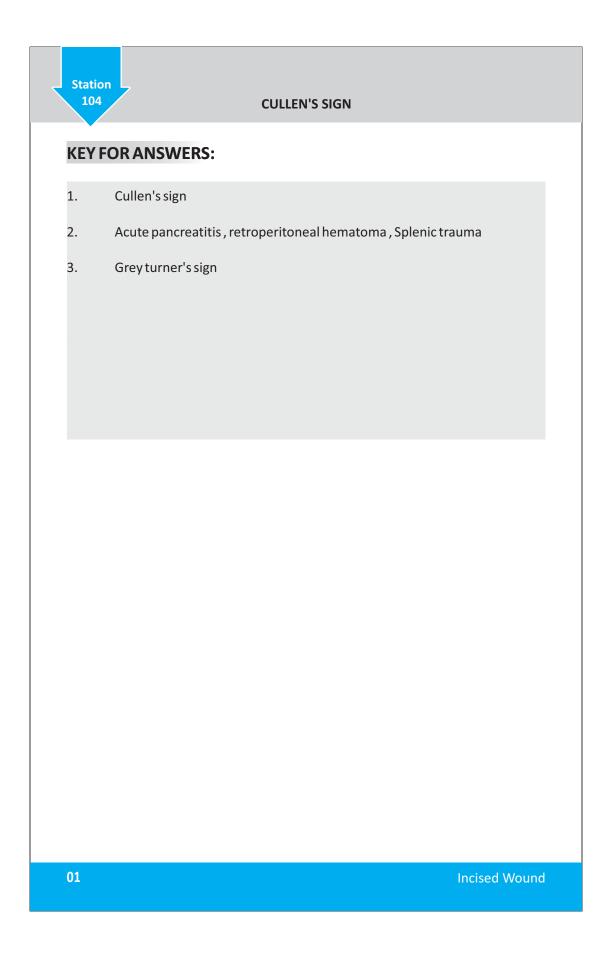
Station

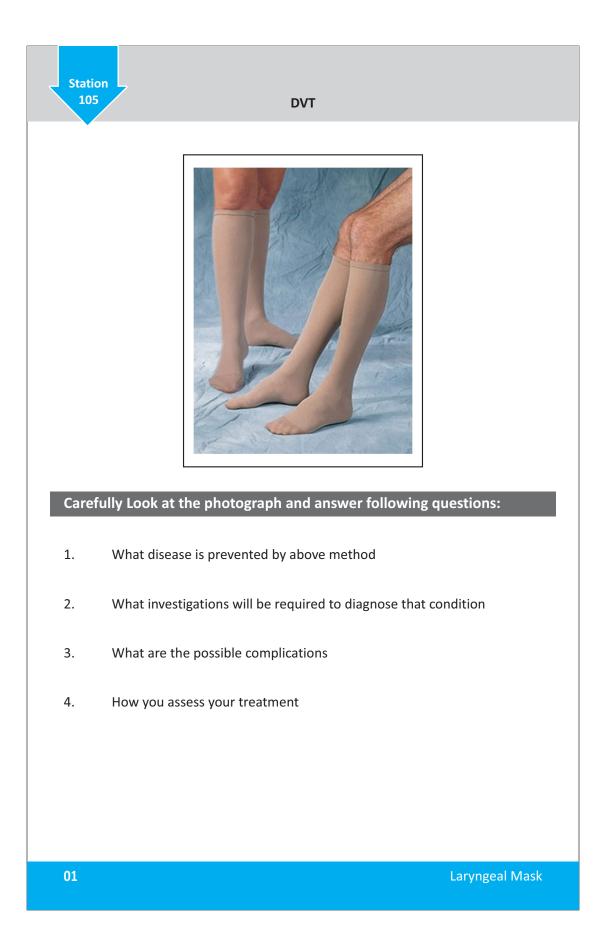
- 2. Diabetic patients commonly suffer from this
- 3. Staphylococcus is the commonest organism
- 4. Wide excision and drainage Antibiotics

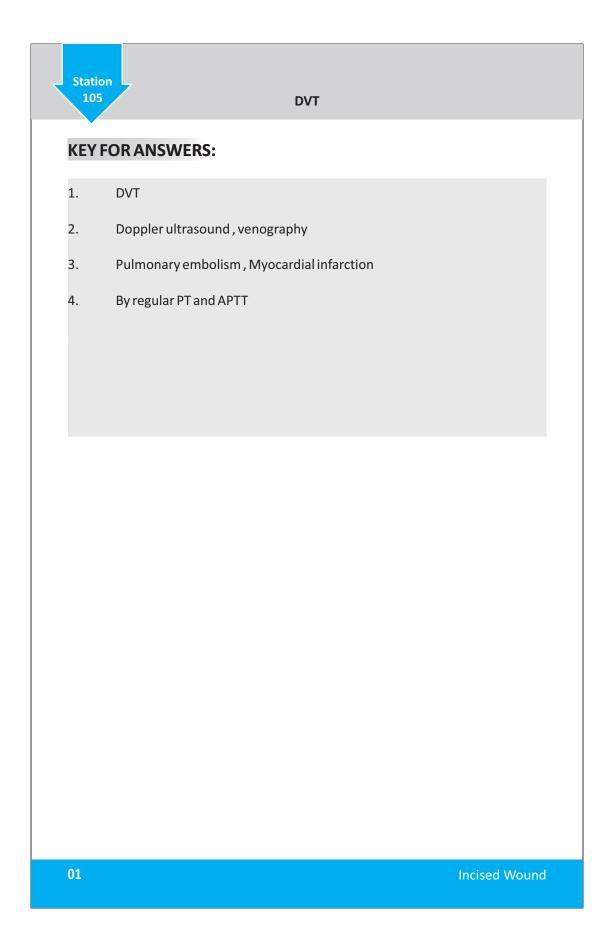


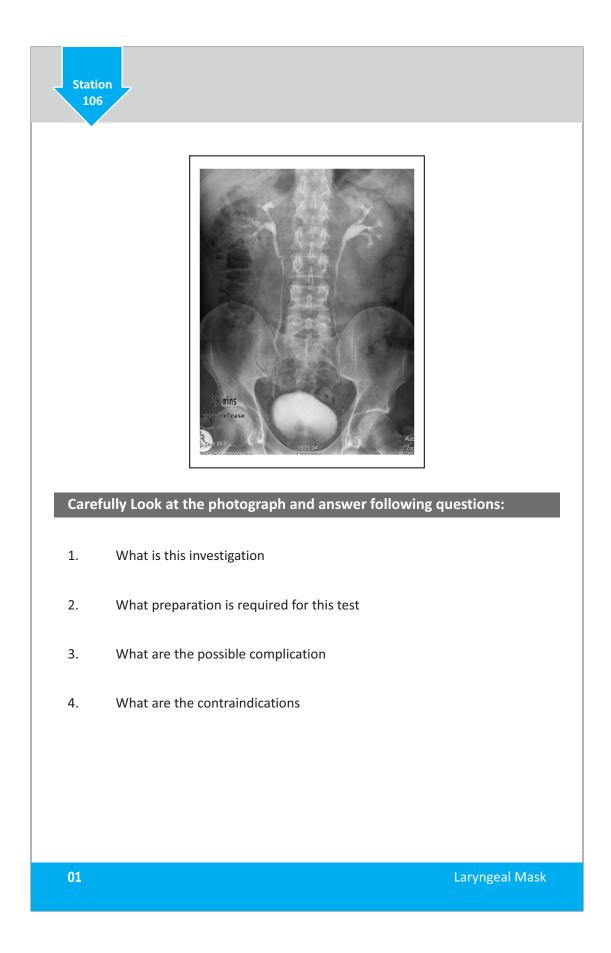








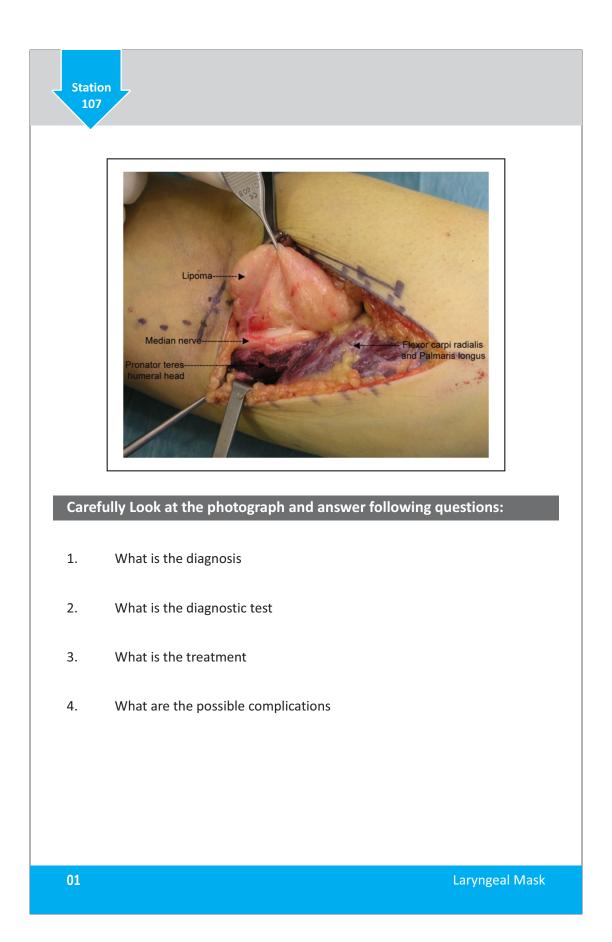


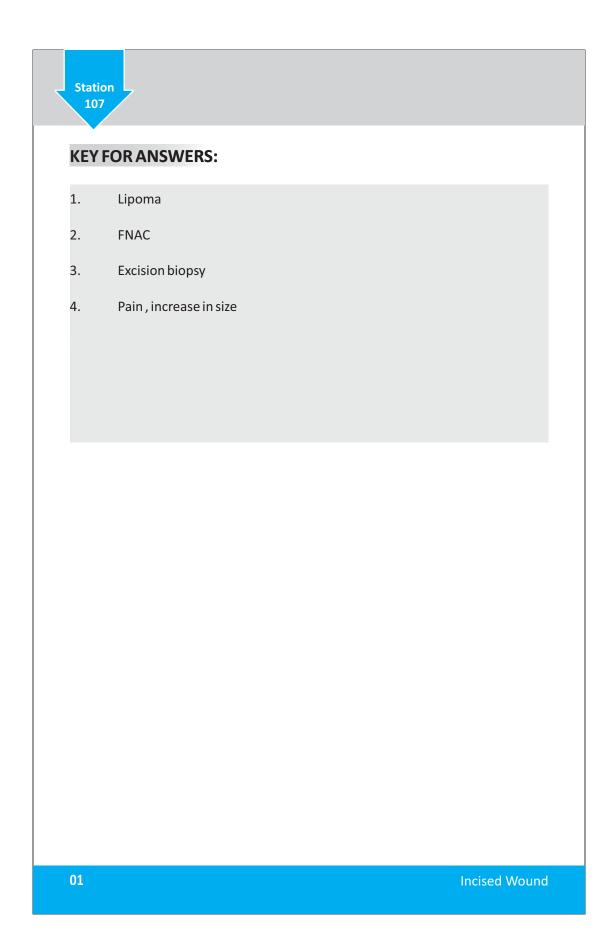


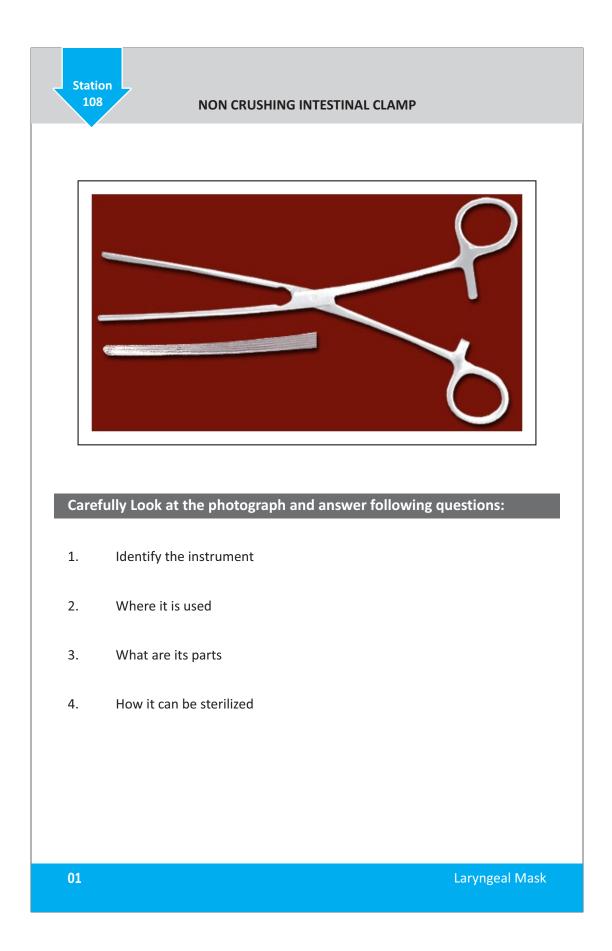


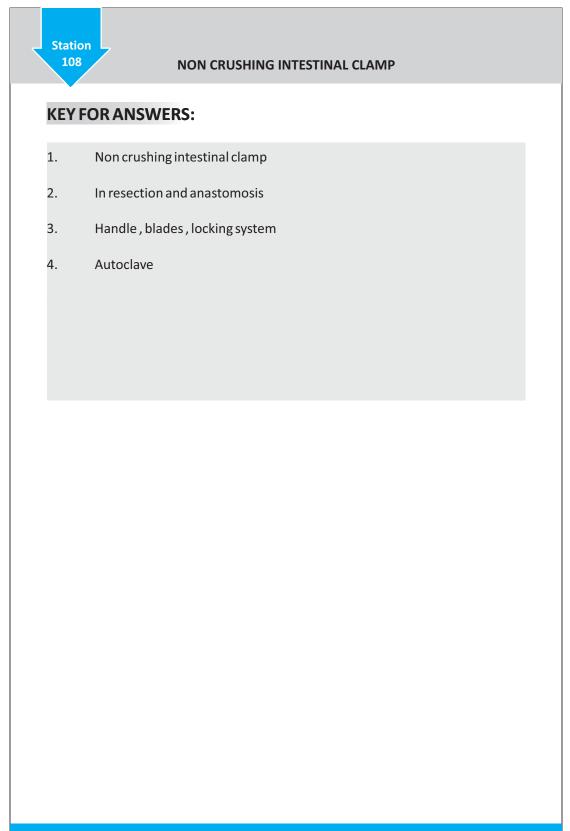
## **KEY FOR ANSWERS:**

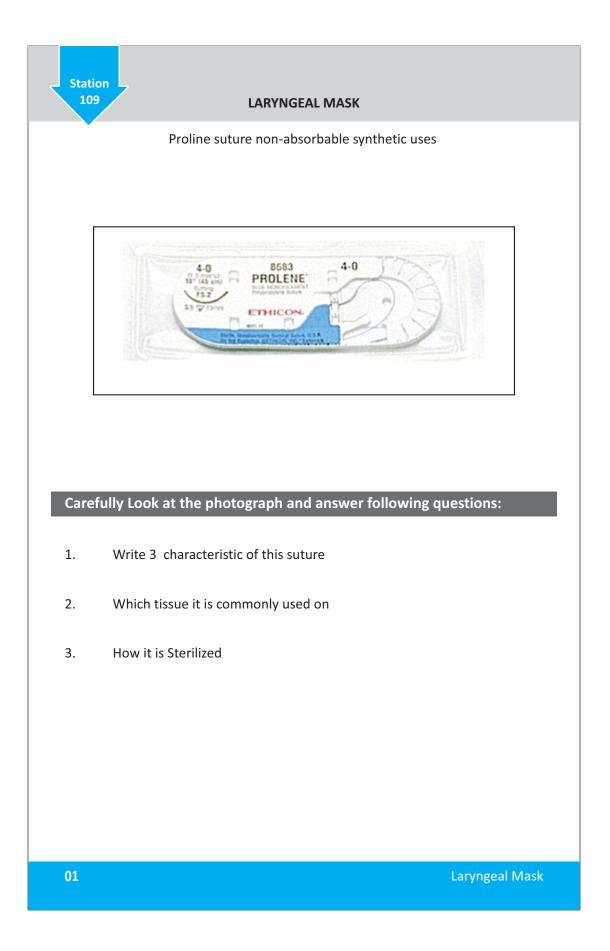
- 1. Intravenous urogram
- 2. NPO for 12 hours , laxatives
- 3. Anaphylactic reaction
- 4. Renal failure



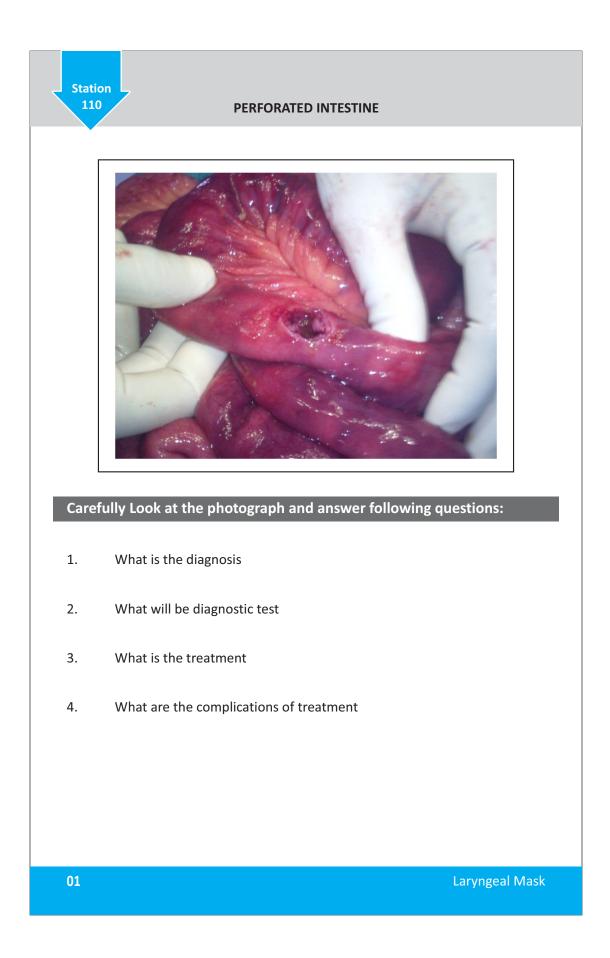


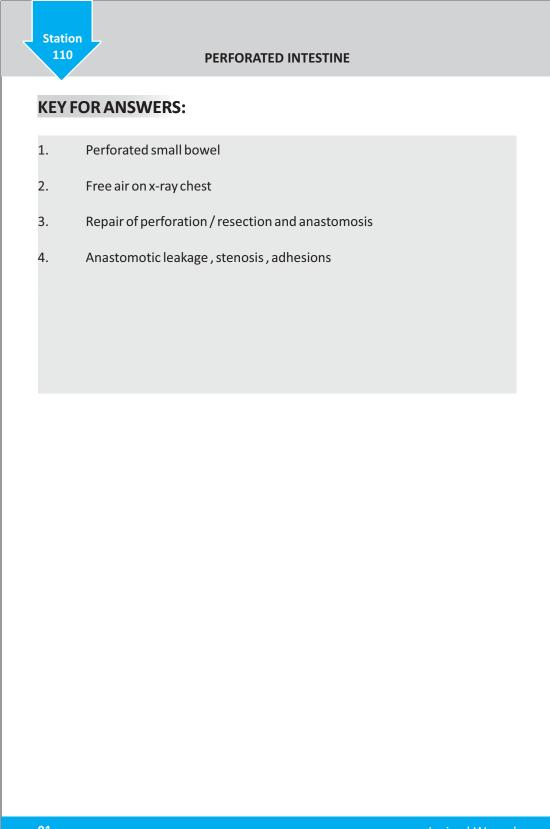


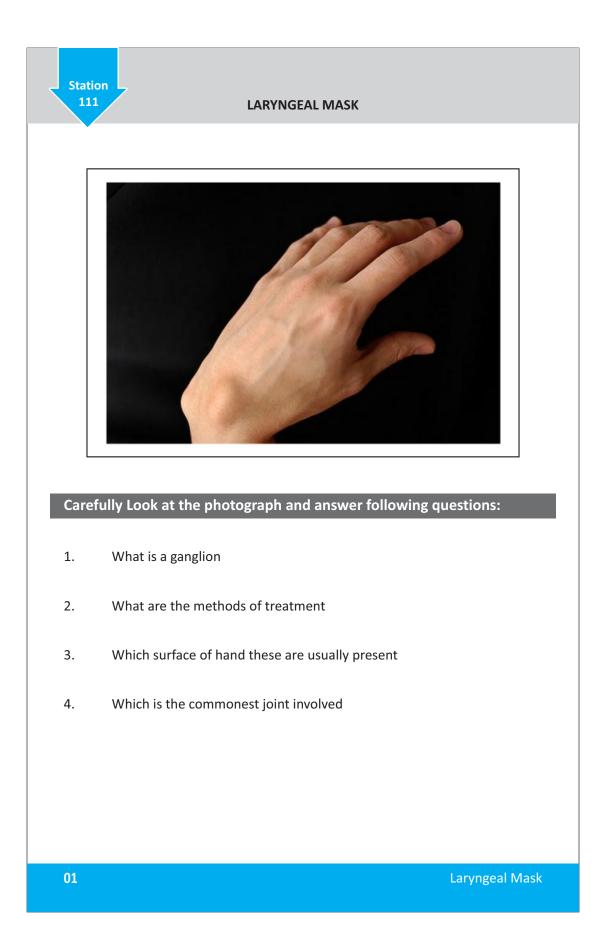


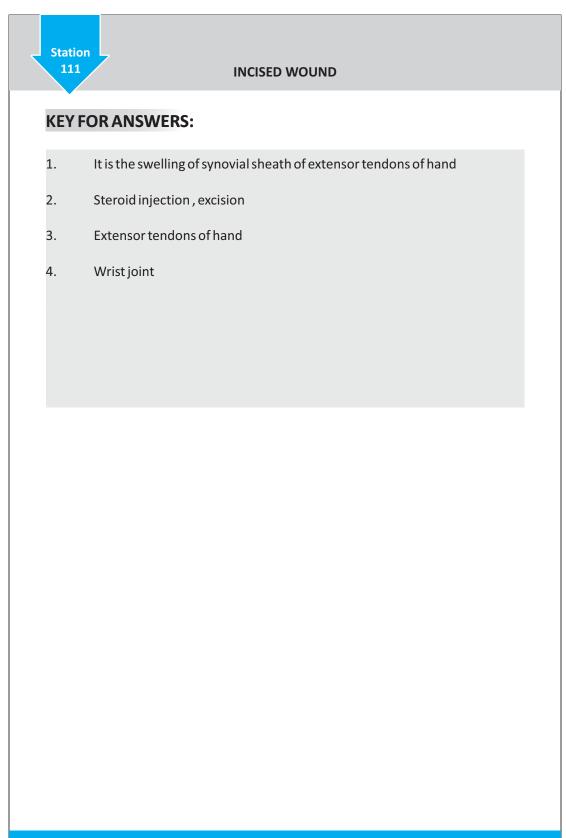


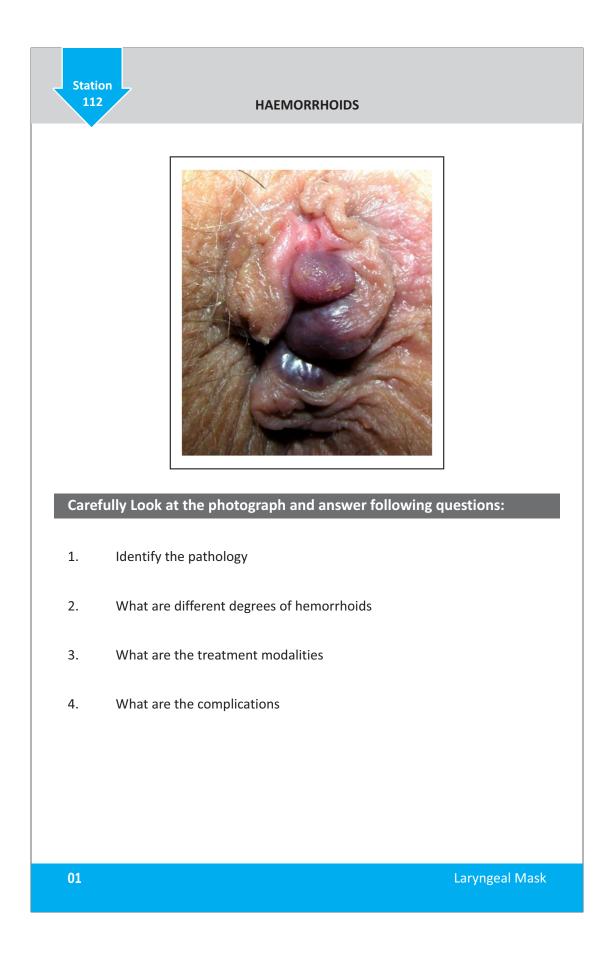


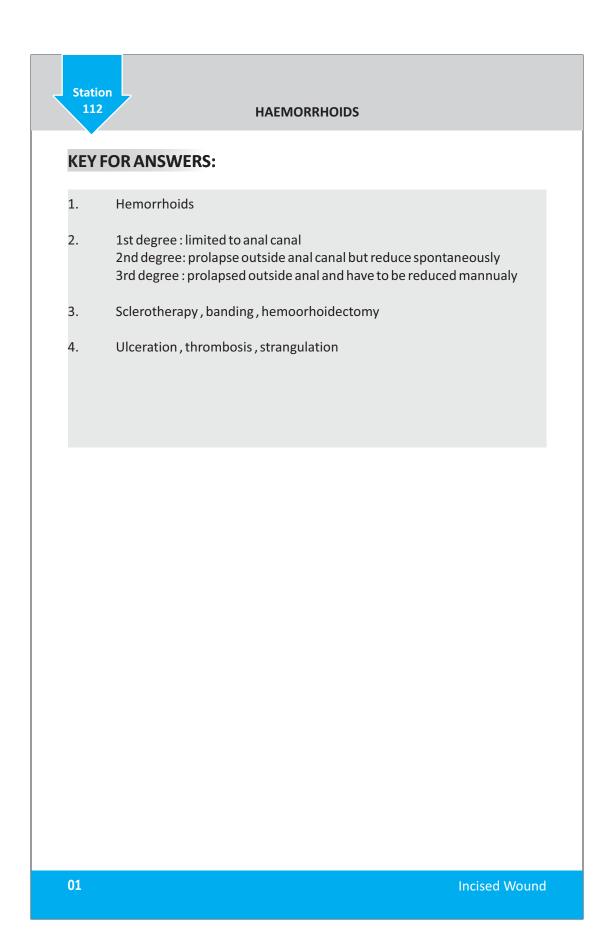


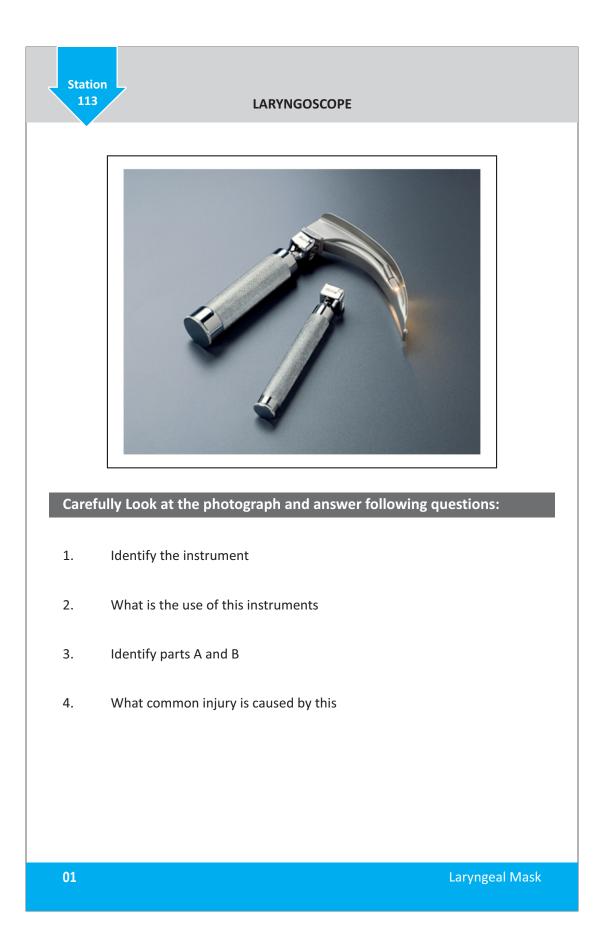


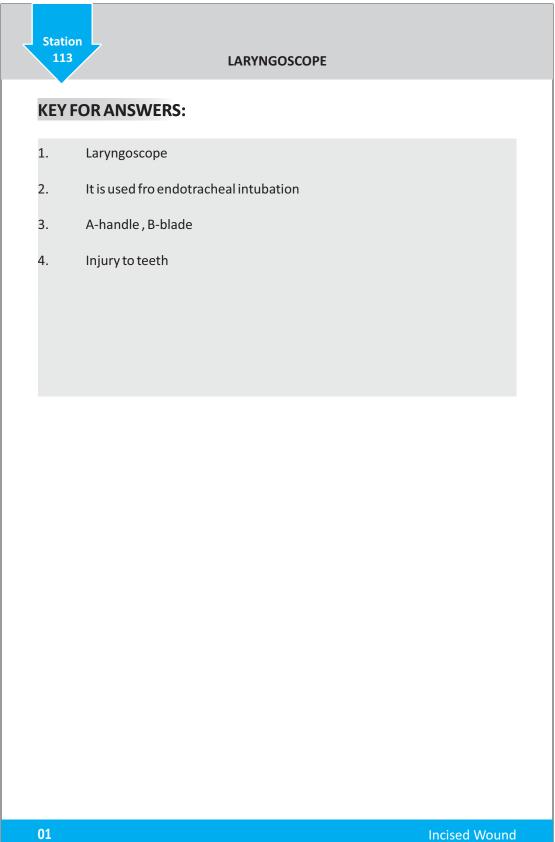


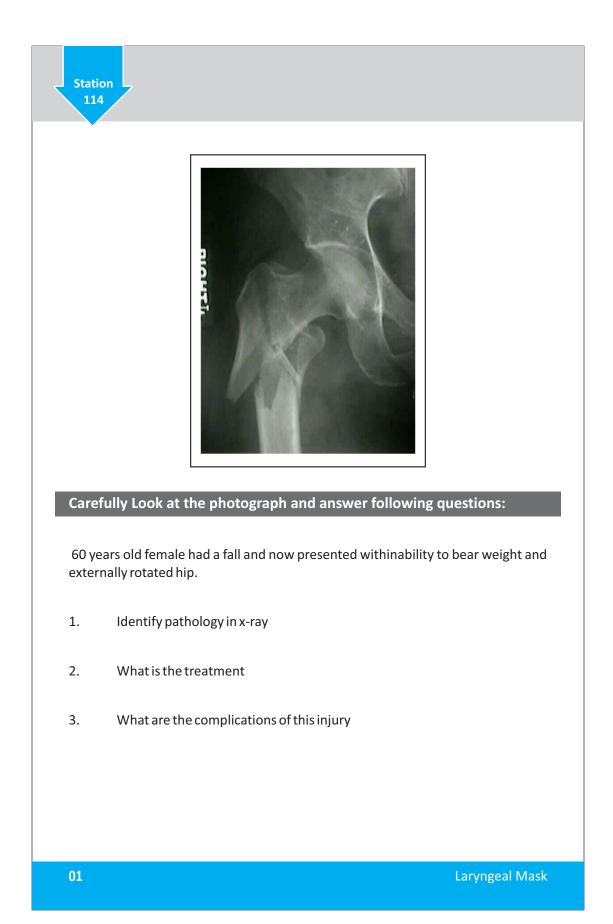




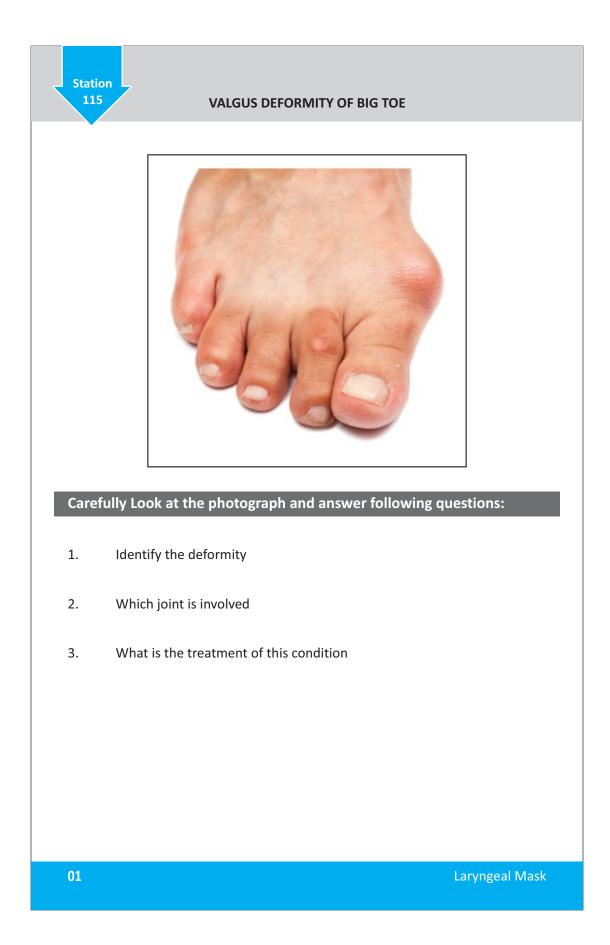


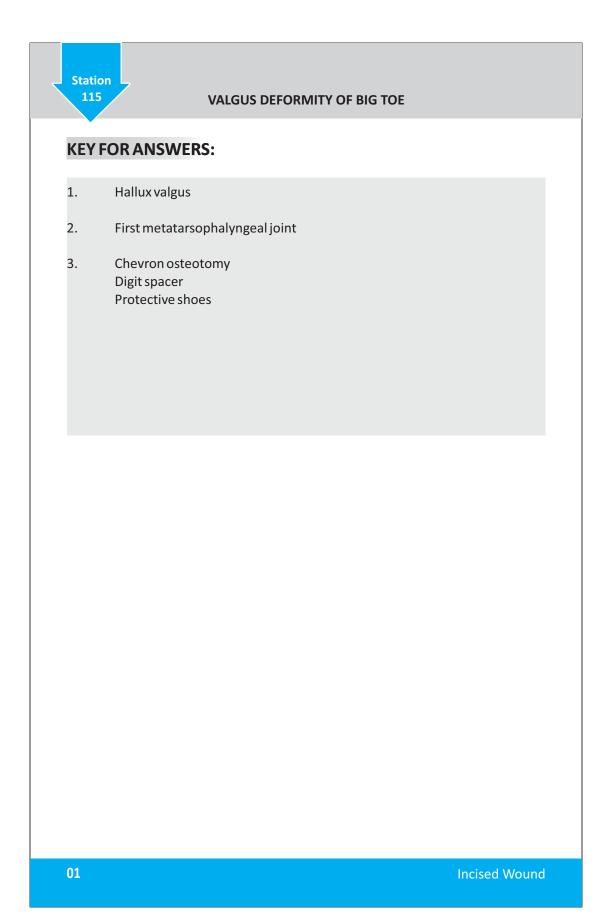


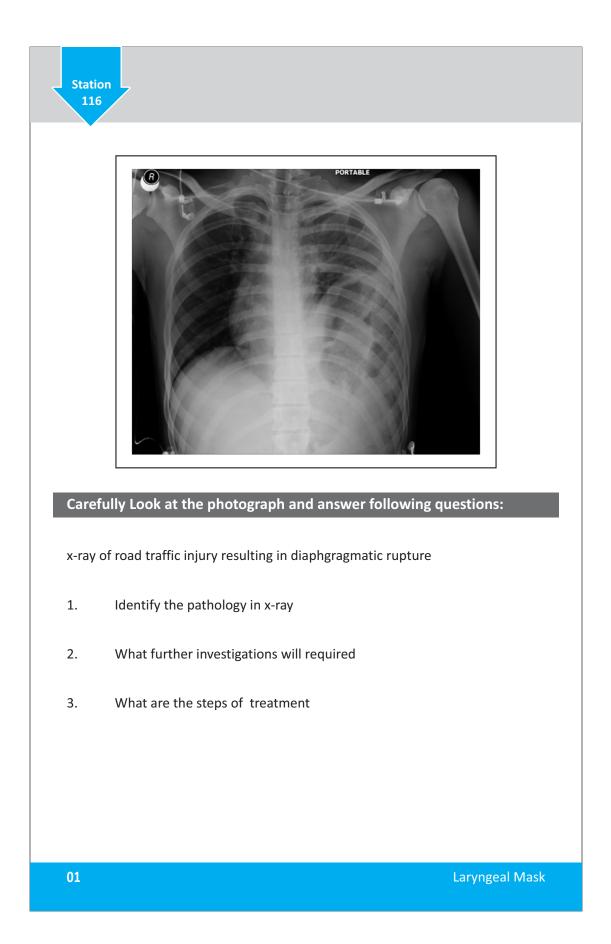




- 1. Right trochanteric fracture
- 2. DHS Intmedullary hip screw Skin traction
- Non-union Mal-union Limb shortening Valgus deformity Hemorrhage Infection

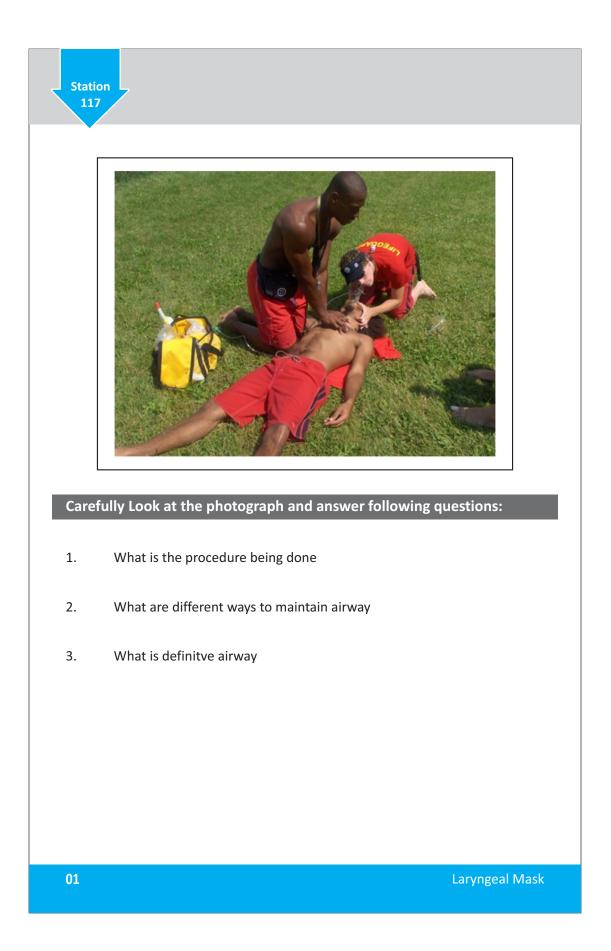


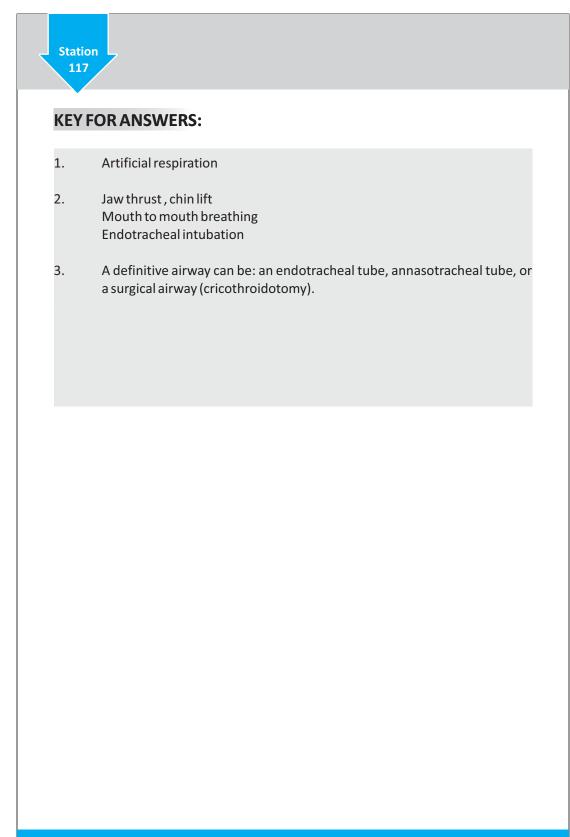


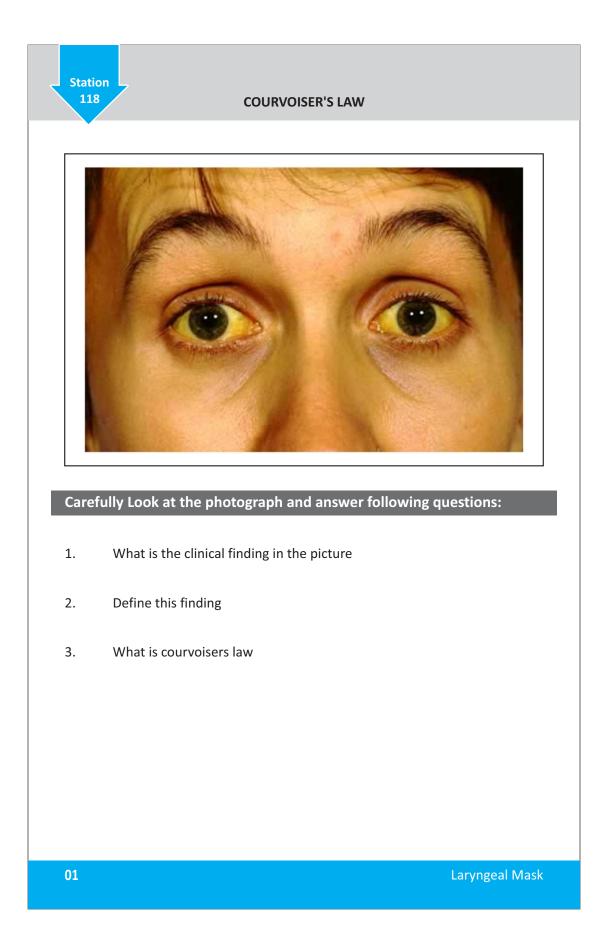


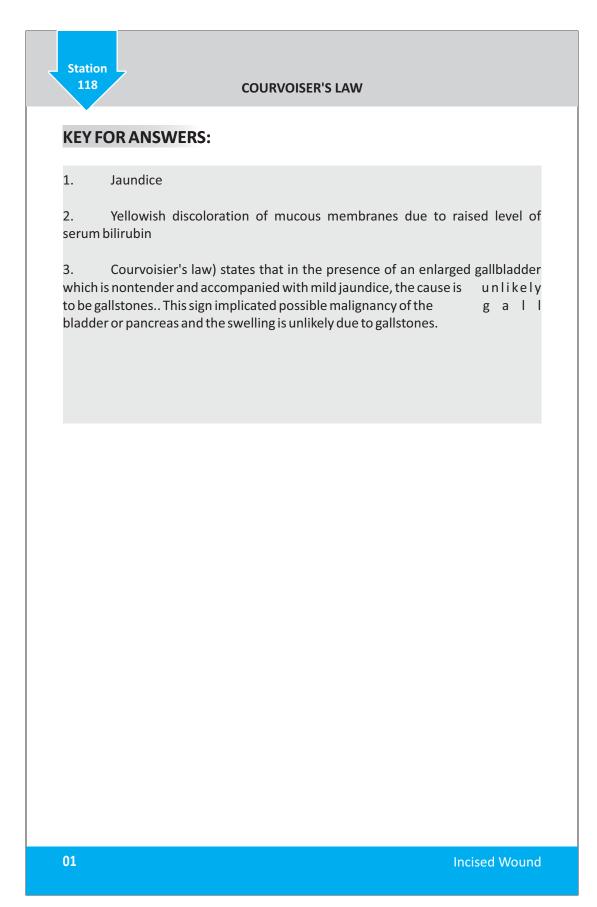


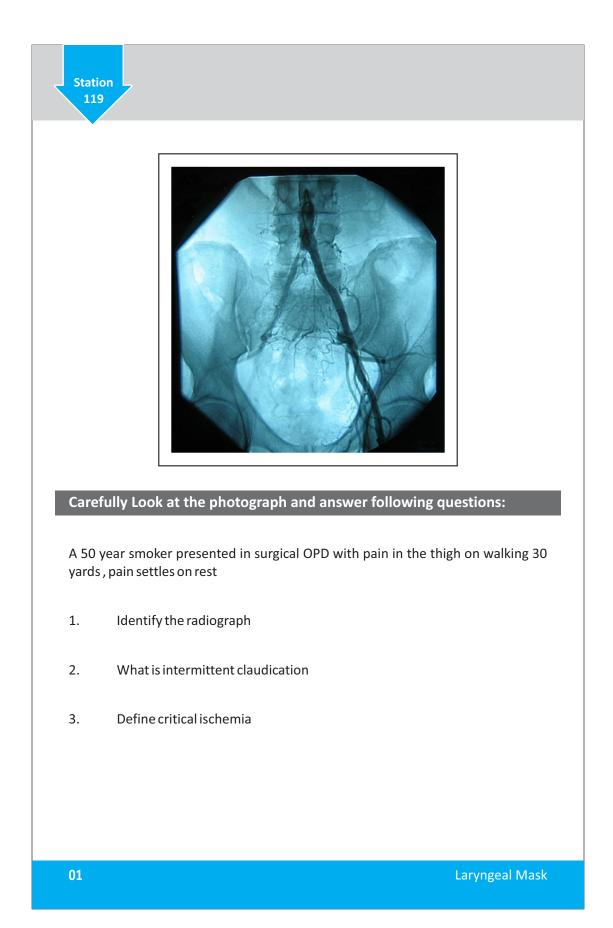
- Abdominal contents in left hemithorax Mediastinal shift to right Diaphragmatic rupture
- 2. CT scan abdomen and chest
- 3. NG tube , NPO , laporotomy



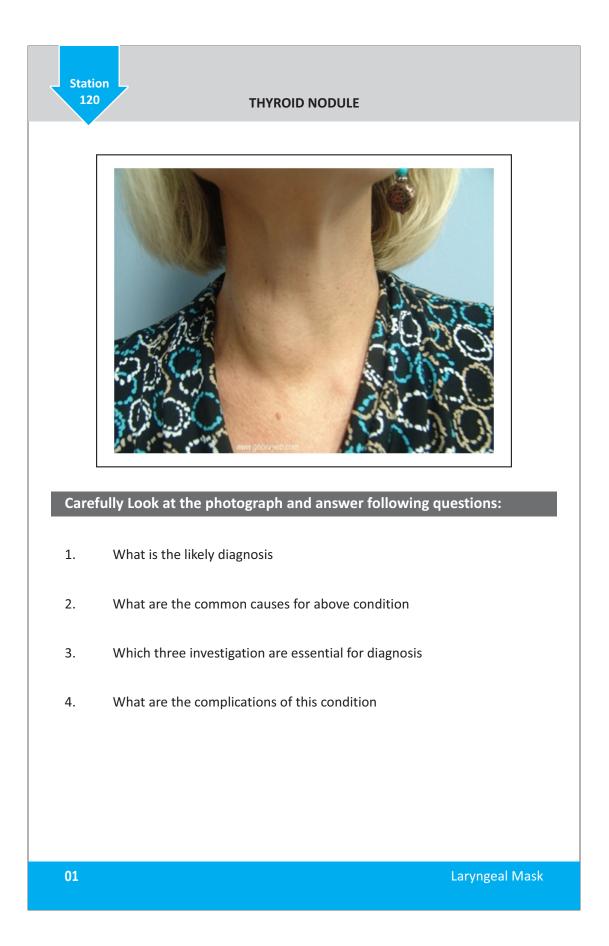




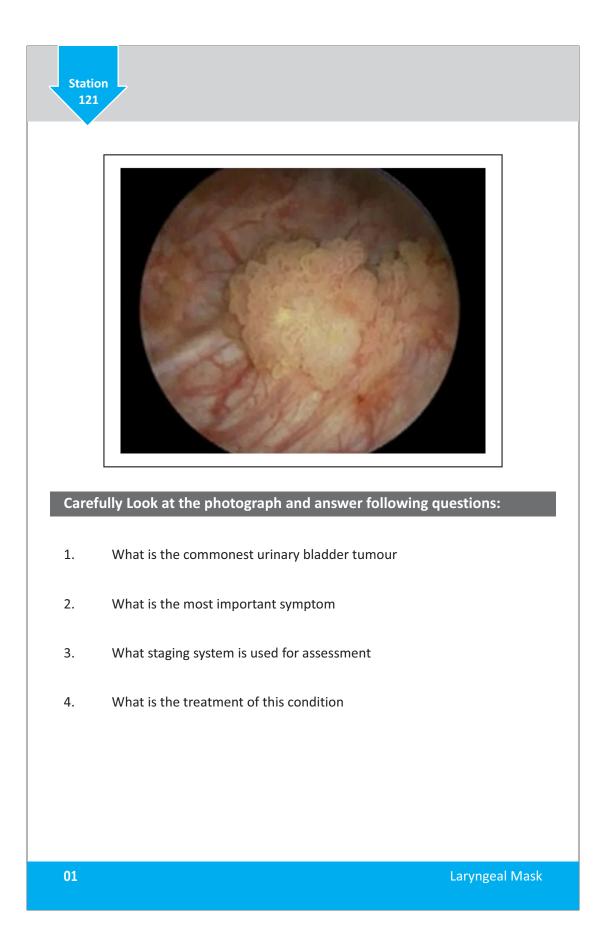


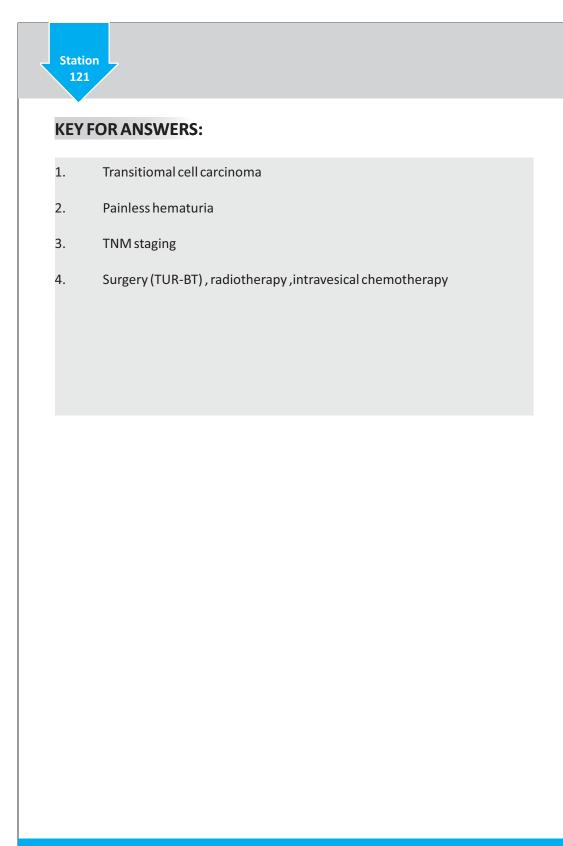


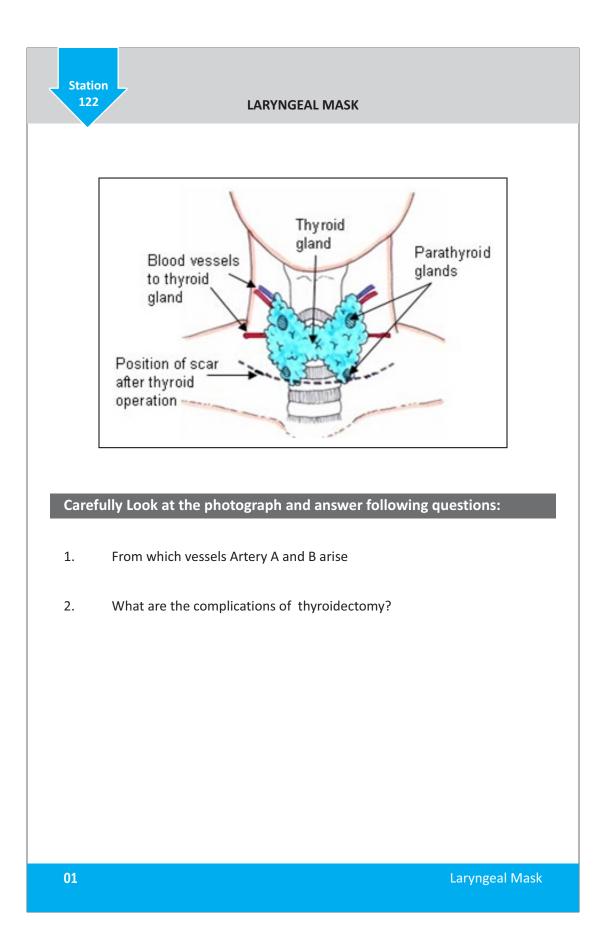
Station 119	7		
KEY FO	R ANSWERS:		
01			Incised Wound



Statio						
120	THYROID NODULE					
KEY	KEY FOR ANSWERS:					
1.	STN (solitary nodule of thyroid) right lobe					
2.	Adenoma Cyst Carcinoma Toxic nodule MNG					
3.	Thyroid function tests FNAC Ultrasound thyroid					
4.	Hyperthyroidism due to toxic nodule Malignancy Hemorrhage in cyst					
01	Incised Wound					

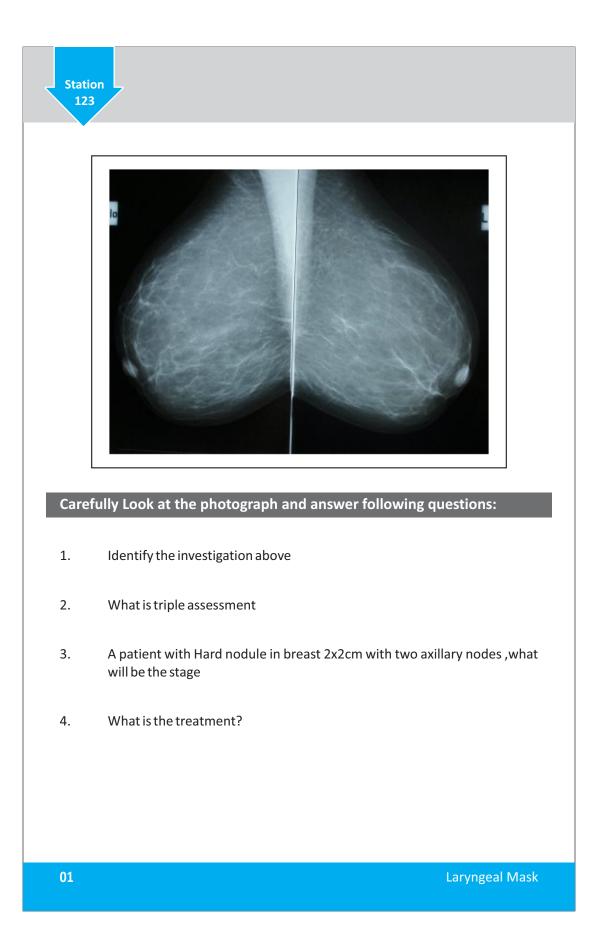




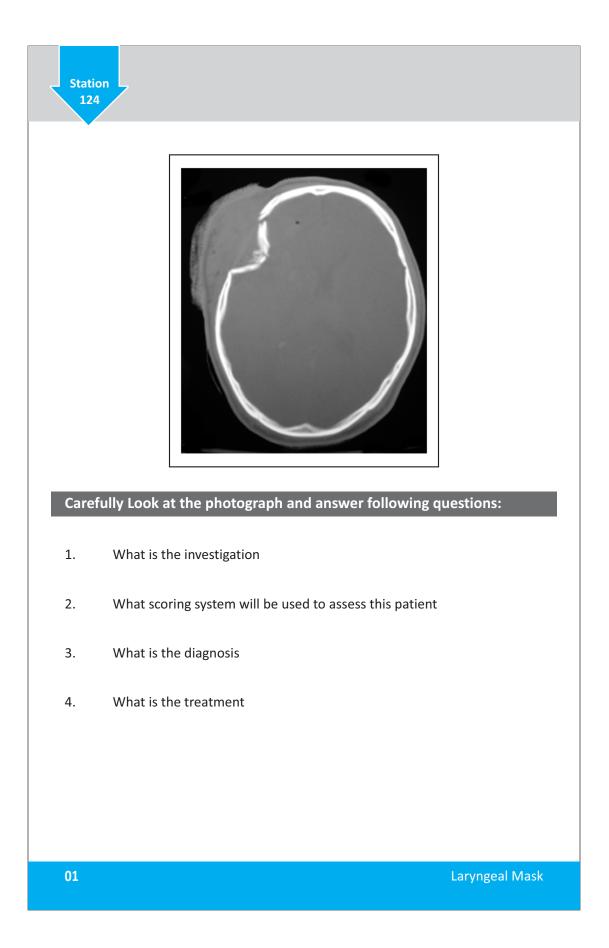


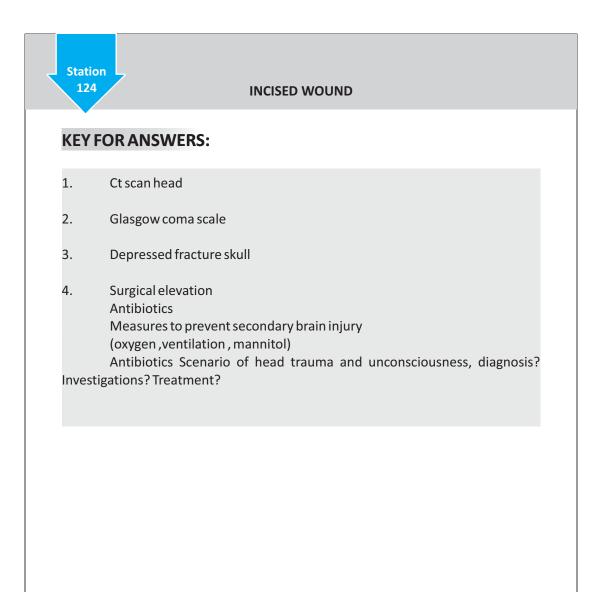


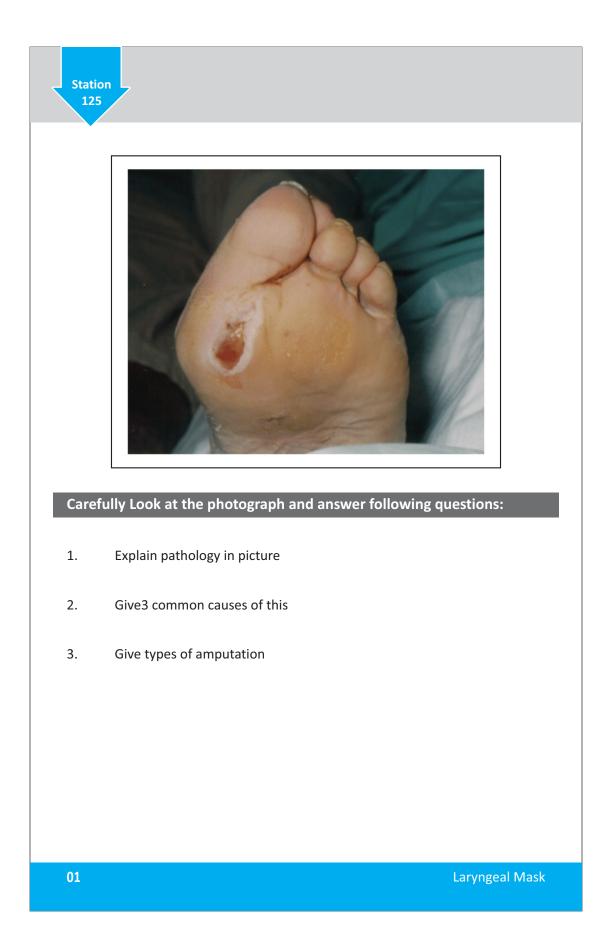
- 1. A is superior thyroid artery and branch of external carotid artery B is inferior thyroid artery and branch of thyrocervical trunk
- 2. Following are complications:
- 1. Hypothyroidism/Thyroid insufficiency in up to 50% of patients after ten years
- 2. Laryngeal nerve injury in about 1% of patients, in particular the recurrent laryngeal nerve: Unilateral damage results in a hoarse voice. Bilateral damage presents as laryngeal obstruction after surgery and can be a surgical emergency. Recurrent Laryngeal nerve injury may occur during the ligature of the
- inferior thyroid artery.
- Hypoparathyroidism temporary (transient) in many patients, but permanent in about 1-4% of patients
- 4. Anesthetic complications
- 5. Infection
- 6. Stitch granuloma
- 7. Chyle leak
- 8. Haemorrhage/Hematoma (This may compress the airway, becoming life-threatening).
- 9. Surgical scar/keloid
- 10. Removal or devascularization of the parathyroids.
- 11. Thyroid storm in operations performed for hyperthyroidism



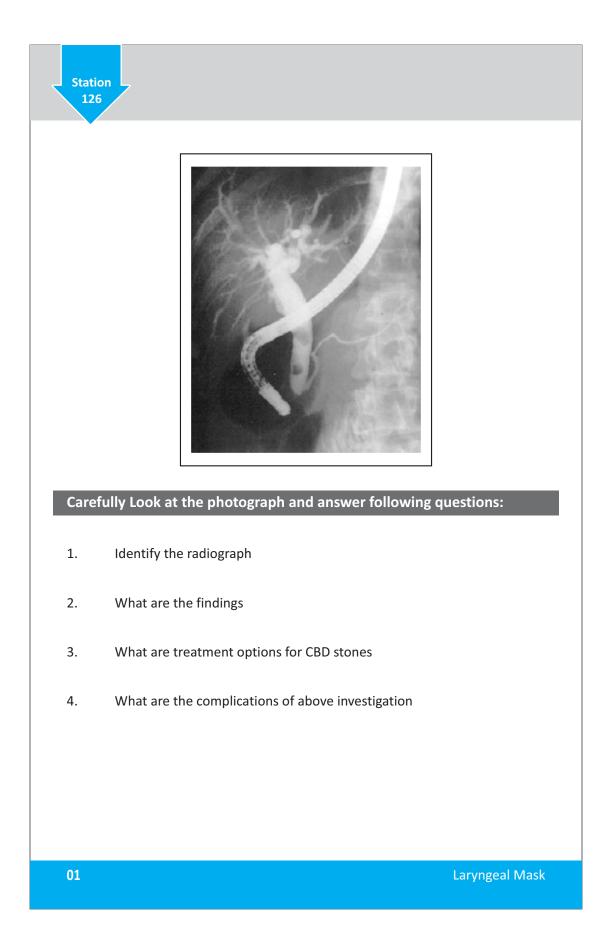
Station 123	
KEY F	OR ANSWERS:
1.	Mammography
2.	Clinical exam , imaging (ultrasound/mammography), FNAC /trucut
3.	T2 N2 M0
4. radioth	Modified radical mastectomy and axillary clearance , chemotherapy and herapy





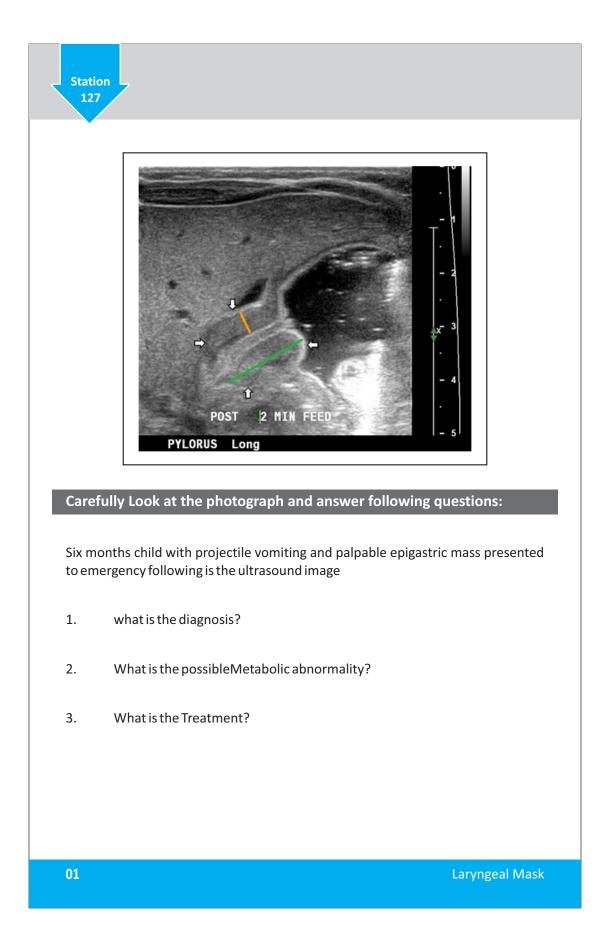


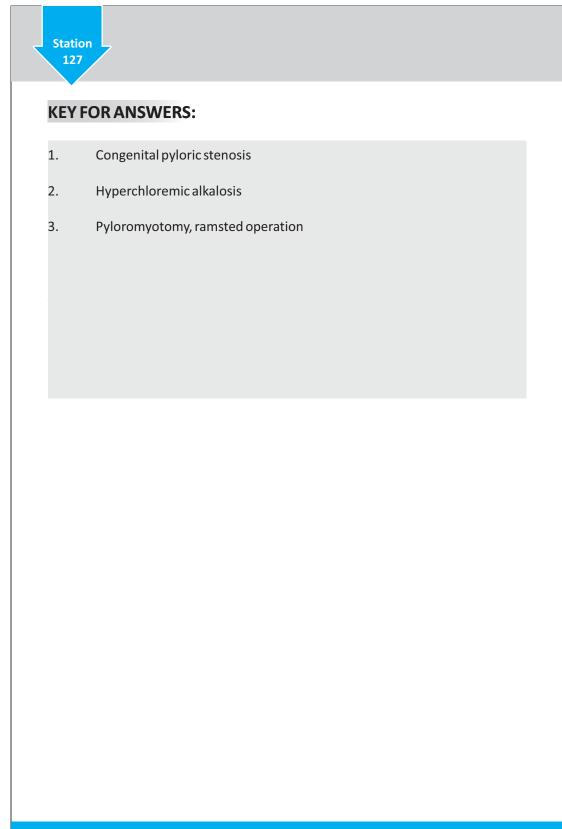
Station 125	7		
KEY FO	R ANSWERS:		
01			Incised Wound

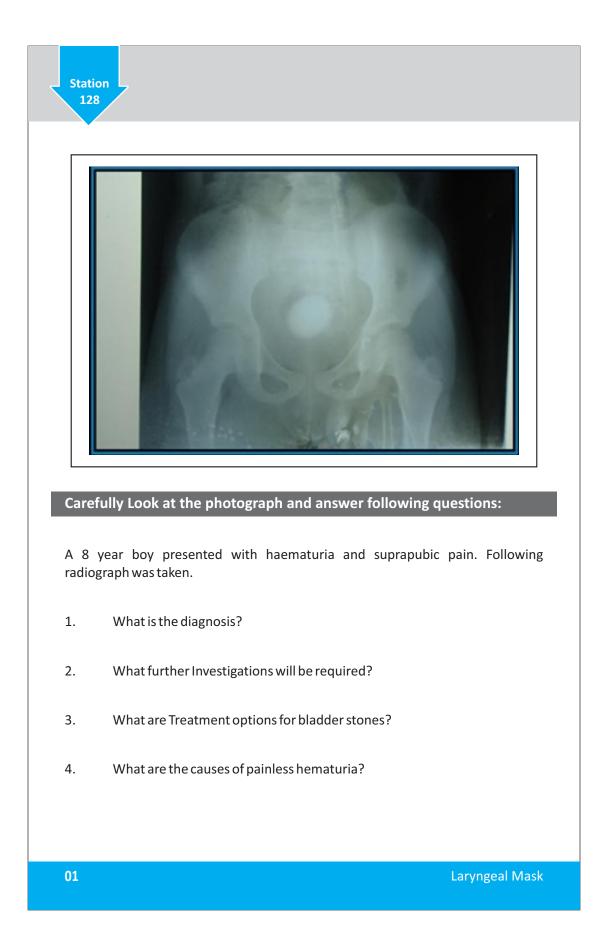


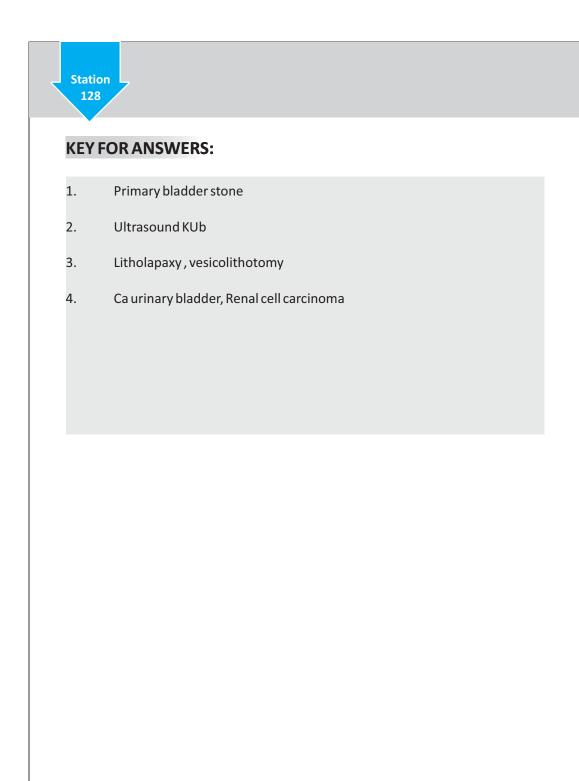


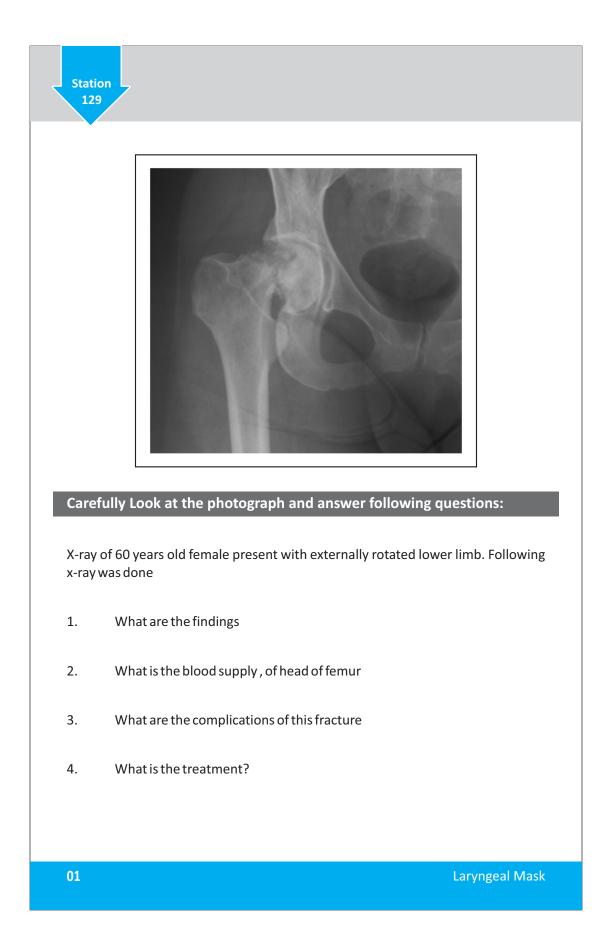
- 1. ERCP
- 2. ERCP showing dilated common bile duct with stones
- 3. ERCP , open CBD exploration , Percutaneous removal
- 4. Pancreatitis, hemorrhage, duodenal perforation, cholangitis













## **KEY FOR ANSWERS:**

1. Right subcapital fracture neck of femur

2. 3 vessels (1) foveal vessels (2) retinacular vessels (3) trochanteric vessels

3. Avascular necrosis , limb shortening, non union, malunion, stiffness , medical problems

4. Right hemiarthroplasty

