BDS THIRD PROFESSIONAL EXAMINATION 2007
GENERAL SURGERY
MODEL PAPER (MCQs)

Total Marks: 45                  Time Allowed: 45 Minutes
Total No. of MCQs: 45

1. After a swelling has been clinically defined, the most commonly advised investigation is:
   a) X-ray.  
   b) Ultrasound.  
   c) CT.  
   d) MRI.  
   e) FNAC  
   Key: b
   Topic: Surgical Principles.

2. Healing by first intention means:
   a) Using catgut.  
   b) Obtaining union between 2 edges of an incision without subsequent breakdown.  
   c) Immediate use of protective dressing.  
   d) Using staples.  
   e) A method whereby an ulcer heals.  
   Key: b
   Topic: Healing and Repair of Wound.

3. Nasopharyngeal carcinoma mostly arises from:
   a) Roof.  
   b) Posterior wall.  
   c) Anterior wall.  
   d) Fossa of rosemuller.  
   e) Lateral wall.  
   Key: d
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 487.

4. Branchial Cyst is best differentiated from cold abscess by:
   a) Flactuant.  
   b) Trans illumination.  
   c) Contains cholesterol crystal.  
   d) Contains sulphur granules.  
   e) Contains blood.  
   Key: c
   Topic: Neck Pathology.
   Ref: Bailey and Love, Page 700.

5. Highest incidence of nasopharyngeal cancer is in:
   a) Indian.  
   b) Pakistani.  
   c) American.  
   d) Chinese.  
   e) European.  
   Key: d
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 678.
6. Which form of actinomycosin is most common:
   a) Faciocervical.
   b) Thorax.
   c) Ileocecal.
   d) Liver.
   e) Spleen.
   **Key: a**
   Topic: Surgical Infections.
   Ref: Bailey and Love, Page 110.

7. Hepatitis-B vaccine produces best antibody response when given on:
   a) Glutei.
   b) Deltoid.
   c) Quadriceps.
   d) Equal at all sites.
   e) Abdominal muscles.
   **Key: b**
   Topic: Surgical Infections.
   Ref: Bailey and Love, Page 111.

8. In surgical profession, a patient has been infected by HIV positive doctor during which procedure:
   a) Endoscopy.
   b) Dental extraction.
   c) Abdominal surgery.
   d) Cardiac transplant.
   e) Renal transplant.
   **Key: b**
   Topic: Surgical Infections.
   Ref: Bailey and Love, Page 118.

9. Ideal steam sterilization of 121° with pressure of 151 lb/inch² should have hold time of:
   a) 10 min.
   b) 15 min.
   c) 30 min.
   d) 45 min.
   e) 55 min.
   **Key: c**
   Topic: Surgical Principles.
   Ref: Bailey and Love, Page 121.

10. Mask use in operation theatre:
    a) Protects patient from getting infection.
    b) Protects the doctor.
    c) Protects both doctor and patient.
    d) None is protected.
    e) Should not be used.
    **Key: b**
    Topic: Surgical Principles.
    Ref: Bailey and Love, Page 123.
11. A punched out edge is a characteristic of which type of ulcer:
   a) Tuberculosis.
   b) Rodent ulcer.
   c) Syphilitic.
   d) Non-specific ulcer.
   e) Malignant ulcer.

   **Key:** c
   **Topic:** Surgical Principles.
   **Ref:** Bailey and Love, Page 159.

12. Following facial injury nasal secretion can be differentiated from CSF rhinorrhoea on estimation of:
   a) Sodium.
   b) Glucose.
   c) Potassium.
   d) Chloride.
   e) Urea.

   **Key:** b
   **Topic:** Trauma.
   **Ref:** Bailey and Love, Page 609.

13. “CYSTIC HYGROMA” is:
   a) Lymphangiectaria.
   b) Cavernous haemangioma.
   c) Sebaceous cyst.
   d) Dermoid cyst.
   e) Haemangioma.

   **Key:** a
   **Topic:** Neck Pathology.
   **Ref:** Bailey and Love, Page 269.

14. Usual fluid requirement in burnt patient per Kg percent burn during first 24 hours is:
   a) 3-4 ml.
   b) 5-6 ml.
   c) 7-8 ml.
   d) > 10 ml.
   e) > 20 ml.

   **Key:** a
   **Topic:** Haemorrhage, Shock, Burns.
   **Ref:** Bailey and Love, Page 184.

15. In a patient with pneumothorax and circulatory collapse, the first action should be:
   a) Immediate X-ray chest.
   b) Oxygen inhalation.
   c) Insertion of chest drain / needle.
   d) Tracheostomy.
   e) Putting the patient on ventilator.

   **Key:** c
   **Topic:** Trauma Care.
   **Ref:** Bailey and Love, Page 775.
16. The most common indication for removal of sub-lingual salivary gland is:
   a) Sialoadenosis.
   b) Neoplasm.
   c) Ranula.
   d) Lymphoma.
   e) Stone.
   Key: c
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 663.

17. The major cause of death following road traffic accident is:
   a) Brain damage.
   b) Abdominal injury.
   c) Facial injury.
   d) Chest trauma.
   e) Fracture with fat embolism.
   Key: d
   Topic: Trauma Care.
   Ref: Bailey and Love, Page 772.

18. Cleft lip ideally repaired at:
   a) Soon after birth.
   b) 6 weeks-12 weeks.
   c) 10 weeks -24 weeks.
   d) 24 weeks-36 weeks.
   e) 1 year.
   Key: c
   Topic: Developmental Pathology.

19. Cleft palate repair is ideal at the age of:
   a) 6 months.
   b) 6-18 months.
   c) 12-24 months.
   d) 2½ years.
   e) 5 years.
   Key: b
   Topic: Developmental Pathology.

20. Dentigerous cyst develop around:
   a) Root.
   b) Gingival margin.
   c) Crown.
   d) Mandible.
   e) Gum.
   Key: c
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 597.
21. In tongue cancer, the site least affected is:
   a) Lateral margin.
   b) Ventral surface.
   c) Dorsal surface.
   d) Tip.
   e) Posterior portion.
   **Key:** c
   **Topic:** Oral and Maxillofacial Pathology.
   **Ref:** Bailey and Love, Page 640.

22. Ameloblastoma most commonly occurs around:
   a) Incisors.
   b) Premolars.
   c) Canine.
   d) Third molar.
   e) Second molar.
   **Key:** d
   **Topic:** Oral and Maxillofacial Pathology.
   **Ref:** Bailey and Love, Page 598.

23. Subconjunctival bleed with no posterior border indicates fracture of which bone:
   a) Maxilla.
   b) Mandible.
   c) Zygoma.
   d) Nasal.
   e) Skull.
   **Key:** c
   **Topic:** Trauma Care.
   **Ref:** Bailey and Love, Page 601.

24. The weakest part of mandible where fracture occurs:
   a) Neck of condyle.
   b) Angle of mandible.
   c) Canine fossa.
   d) At the infected wisdom tooth.
   e) Midline.
   **Key:** a
   **Topic:** Trauma Care.
   **Ref:** Bailey and Love, Page 602.

25. The most common fracture of face is that of:
   a) Mandible.
   b) Maxilla.
   c) Zygoma.
   d) Nasal bone.
   e) Orbital bone.
   **Key:** d
   **Topic:** Trauma Care.
   **Ref:** Bailey and Love, Page 604.
26. Gillies approach is for reduction of:
   a) Blow out fracture.
   b) Nasal bone fracture.
   c) Zygoma fracture.
   d) Mandibular fracture.
   e) Orbital bone.
   Key: c
   Topic: Maxillofacial Trauma.
   Ref: Bailey and Love, Page 606.

27. The danger area of face where from infection can spread directly to cavernous sinus includes:
   a) From below the eyes upto chin.
   b) Area around the lips.
   c) Area around lips including lower part of nose.
   d) Whole of the face.
   e) From maxillary sinus.
   Key: c
   Topic: Trauma Care.

28. Oral melanoma though rare commonly involves:
   a) Alveolus.
   b) Floor of mouth.
   c) Hard palate.
   d) Tongue.
   e) Soft palate.
   Key: c
   Topic: Oral and Maxillofacial Pathology.

29. Carcinoma of the lower alveolar ridge occurs around:
   a) Incisor.
   b) Canine.
   c) Molar.
   d) Angle of mandible.
   e) Per-molar.
   Key: c
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 641.

30. Sinus disease is best demonstrated by:
   a) CT scan.
   b) Plain X-ray.
   c) Tomography.
   d) Ultrasound.
   e) MRI.
   Key: a
   Topic: Oral and Maxillofacial Pathology.
   Ref: Bailey and Love, Page 609.
31. Sjogren’s syndrome is not accompanied with:
   a) Rheumatoid arthritis.
   b) SLE.
   c) Chronic active hepatitis.
   d) Primary biliary cirrhosis.
   e) An autoimmune condition.

   **Key:** c

   **Topic:** Oral and Maxillofacial Pathology.
   **Ref:** Bailey and Love, Page 669.

32. 80 percent of all salivary stones occurs in:
   a) Parotid.
   b) Sub-mandibular.
   c) Sub-maxillary.
   d) Minor salivary glands.
   e) Sub-lingual.

   **Key:** b

   **Topic:** Oral and Maxillofacial Pathology.
   **Ref:** Bailey and Love, Page 665.

33. Branchial cyst commonly arises from treatment of:
   a) First branchial cleft.
   b) Second branchial cleft.
   c) Third branchial cleft.
   d) Second branchial arch.
   e) Third branchial arch.

   **Key:** b

   **Topic:** Neck Pathology.
   **Ref:** Bailey and Love, Page 699.

34. In recurrent laryngeal palsy, the position of affected side vocal cord is:
   a) Full abduction.
   b) Full adduction.
   c) Paramedian.
   d) Lateral deviation.
   e) Medial deviation.

   **Key:** c

   **Topic:** Neck Pathology.
   **Ref:** Bailey and Love, Page 695.

35. The carotid body is a:
   a) Pressure receptor.
   b) pH receptor.
   c) Osmo receptor.
   d) Nemo-receptor.
   e) Schwannomas.

   **Key:** c

   **Topic:** Neck Pathology.
   **Ref:** Bailey and Love, Page 705.
36. Pain in the arm due to cervical rib is caused by:
   a) Compression of D₁ root.
   b) Compression of C₇ root.
   c) Muscle ischemia.
   d) Compression of brachial plexus.
   e) Phrenic nerve.
   **Key: c**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 702.**

37. Tubercular cervical lymphadenitis commonly affects:
   a) Posterior triangle nodes.
   b) Upper jugular nodes.
   c) Supra clavicular nodes.
   d) Sub maxillary nodes.
   e) Axilllry lymph nodes.
   **Key: b**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 704.**

38. Synthesis and liberation of thyroid hormone from thyroid is controlled by:
   a) Hypothalamus.
   b) Hippocampus.
   c) Anterior pituitary.
   d) Posterior pituitary.
   e) Basal ganglion.
   **Key: c**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 709.**

39. The suture that maintains strength for longest time is:
   a) Dexon.
   b) Vicryl.
   c) PDS.
   d) Chromic Catgut.
   e) Plain catgut.
   **Key: c**
   **Topic: Surgical Principles.**
   **Ref: Bailey and Love, Page 850.**

40. Neoplasma of laryngopharynx are most common in:
   a) Postcriocid region.
   b) Lateral wall.
   c) Piriform fossa.
   d) Aryepiglottic fold.
   e) Medial wall.
   **Key: c**
   **Topic: Oral and Maxillofacial Pathology.**
   **Ref: Bailey and Love, Page 89.**
41. A 20 year male presented with small swelling in front of neck in midline, swelling moves upward on protrusion of tongue. What is diagnosis:
   a) Thyroglossal cyst.
   b) Branchial cyst.
   c) Thyroid nodule.
   d) Sub-mental lymph node.
   e) Cystic hygroma.
   **Key: a**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 708.**

42. A 65 year female complains regurgitation of undigested food, few hours after meal, she also have progressive difficulty in swallowing, weight loss and swelling in the neck. What is your diagnosis:
   a) Achalasia.
   b) CA esophagus.
   c) Diffuse esophageal spasm.
   d) Pharyngeal pouch.
   e) Plummer Winson’s syndrome.
   **Key: d**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 684.**

43. Most common primary malignant thyroid tumour is:
   a) Papillary.
   b) Follicular.
   c) Anaplastic.
   d) Medullary.
   e) Lymphoma.
   **Key: a**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 726.**

44. Bones, stones, groans and moans relate to:
   a) Hyperparathyroidism.
   b) Hypoparathyroidism.
   c) Hyperthyroidism.
   d) Hypothyroidism.
   e) Phaeochromocytoma.
   **Key: a**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love, Page 736.**

45. Position of foramen caecum is:
   a) Pharynx.
   b) Nasopharynx.
   c) Junction of posterior 1/3 with anterior 2/3 of tongue.
   d) Centre of tongue.
   e) Tip of tongue.
   **Key: c**
   **Topic: Neck Pathology.**
   **Ref: Bailey and Love 24th Edition.**