

# :ALL SUBJECTS:

## FINAL YEAR CHAPTER WISE QUESTIONS 2008-2018 (WBUHS)

by



**Medical-Junction**  
Taking the lead for medical greatness

### About Us

Medical-Junction is an online based medical community maintained by medical professionals. We provide all sorts of medical facilities for better knowledge. Our aim is to give free access to all these medical kinds stuffs to our members.

[CLICK ON THE LOGO TO VISIT OUR FACEBOOK, YOUTUBE AND WEBSITE](#)



## CONTAINS↓

☞ a. Recent MaRks DistRibutions → **1 TO 4 PAGE**

☞ b. QUESTIONS PAPERS OF WBUHS

### 1. MEDICINE

Years	Page
2018	<b>5</b>
2017	<b>7</b>
2016	<b>9</b>
2015	<b>11</b>
2014	<b>13</b>
2013	<b>15</b>
2012	<b>17</b>
2011	<b>19</b>
2010	<b>21</b>
2009	<b>23</b>
2008	<b>25</b>

### 3. OBSTETRICS & GYNAECOLGY

Years	Page
2018	<b>49</b>
2017	<b>51</b>
2016	<b>43</b>
2015	<b>55</b>
2014	<b>57</b>
2013	<b>59</b>
2012	<b>61</b>
2011	<b>63</b>
2010	<b>65</b>
2009	<b>67</b>
2008	<b>69</b>

### 2. SURGERY

Years	Page
2018	<b>27</b>
2017	<b>29</b>
2016	<b>31</b>
2015	<b>33</b>
2014	<b>35</b>
2013	<b>37</b>
2012	<b>39</b>
2011	<b>41</b>
2010	<b>43</b>
2009	<b>45</b>
2008	<b>47</b>

### 4. PAEDIATRIC

Years	Page
2018	<b>71</b>
2017	<b>72</b>
2016	<b>73</b>
2015	<b>74</b>
2014	<b>75</b>
2013	<b>76</b>
2012	<b>77</b>
2011	<b>78</b>
2010	<b>79</b>
2009	<b>80</b>
2008	<b>81</b>

# Recent Marks Distributions of WBUHS

## ♥ medicine

### A. 📖 Theory examination 120 marks

(2 paper ➤ 1st paper 60 marks + 2nd paper 60 marks)

Medicine Paper I
1. Cardiology
2. G I System
3. Genitourinary
4. Deficiency Disorder
5. Tropical
6. Rheumatology
7. Genetics and Immunology

Medicine Paper II
1. Respiratory System
2. Endocrinology
3. Haematology
4. Infections Including HIV
5. Neurology
6. Psychiatry
7. Dermatology and STD

### Questions in Both Papers:

1) Group-A Long Question (Basic & Allied)	1	= 10 Marks
2) Group-B Long Question- clinical problem	1 out of 2	= 10 Marks
3) Group-C Short Question	5 out of 7	= 5 x 4 =20 Marks
4) Group-D Short Notes	5 out of 7	= 5 x 4 =20 Marks
Total		= 60 Marks

### B. 🧪 Practical Examination = 100 Marks [60+30+10]

1. One long Case = 60 (Marks History Taking = 15 Marks + Demonstration = 30 + Marks Discussion = 15 Marks)
2. One Short Case = 30 Marks
3. Spot Cases 2 Subjects to be given 5+5 = 10 Marks

### C. 🗣️ Oral Examination = 20 Marks

1. Instrument = 5
2. Flying Oral Emergency = 5
3. Chest, X-ray = 5
4. ECG, CT = 5

### D. Internal Assessment = 60 Marks (theory 30 + practical 30)

**TOTAL 300 MARKS IN MEDICINE**

# ♥ surgery

## A. Theory examination 120 marks (2 paper ➤ 1st paper 60 marks + 2nd paper 60 marks)

<b>Surgery Paper II:</b>	
1.	<b>General Surgery including venous, arterial &amp; lymphatic diseases.</b>
2.	<b>Genitourinary System.</b>
3.	<b>Endocrinology</b>
4.	<b>Anaesthesiology</b>
5.	<b>Radiology &amp; Radiotherapy</b>
6.	<b>Dental Surgery</b>
7.	<b>Special Surgery – Paediatric Surgery, Cardio-Vascular Surgery, Neurosurgery, Plastic Surgery and Traumatology</b>

<b>Surgery Paper I:</b>	
1.	<b>General Surgery</b>
2.	<b>Gastro-intestinal including Colo-rectal surgery. Abdominal Wall &amp; Hernia, Hepatobiliary System, Pancreas, Spleen, Peritoneum Retroperitonent.</b>
3.	<b>Breast</b>
4.	<b>Head Neck surgery</b>
5.	<b>Orthopaedics</b>

### Questions in Both Papers:

1) Group-A Long Question (Basic & Allied)	1	= 15 Marks
2) Group-B Long Question- clinical problem	1 out of 2	= 15 Marks
3) Group-C Short Notes	3 out of 5	= 3 x 5 =15 Marks
4) Group-D Short Question	3 out of 5	= 3 x 5 =15 Marks
<b>Total</b>		<b>= 60 Marks</b>

## B. Practical Examination = 100 Marks [60+30+10]

1. One long Case = 60 (Marks History Taking = 15 Marks + Demonstration = 30 + Marks Discussion = 15 Marks)
2. One Short Case = 30 Marks
3. Spot Cases 2 Subjects to be given 5+5 = 10 Marks

## C. Oral Examination = 20 Marks

## D. Internal Assessment = 60 Marks (theory 30 + practical 30)

**TOTAL 300 MARKS IN SURGERY**

Medical-Junction  
Taking the lead for medical greatness

# ♥ Obstetrics & Gynaecology

**A. Theory examination 80 marks** (2 paper ➤ 1st paper 40 marks + 2nd paper 40 marks)

Paper I ⇨ Obstetrics & Social Obstetrics

Paper II ⇨ Gynaecology, FW & Demography

Questions in Both Papers:

<b>1) Group-A Long Question (Basic &amp; Allied)</b>	1	= 10 Marks
<b>2) Group-B Long Question- clinical problem</b>	1 out of 2	= 10 Marks
<b>3) Group-C Short Notes</b>	2 out of 4	= 2 x 5 =10 Marks
<b>4) Group-D Brief answer type</b>	2 out of 4	= 2 x 5 =10 Marks
<b>Total</b>		= 40 Marks

**B. Practical Examination = 50 Marks** [30+20]

1. One long case = 30
2. One Short case = 20

**C. Oral Examination = 30 Marks**

1. Instrument, Operation (only outline) and steps of minor operations =5
2. 6 Specimen = 5
3. X-Ray (only in Gynecology Table) & USG films (Only reading) = 5
4. Problems and recent advances = 5
5. Delivery Notes = 5
6. Obstetrics maneuvers = 5

**D. Internal Assessment = 40 Marks** (theory 20 + practical 20)

Medical-Junction  
Taking the lead for medical greatness  
**TOTAL 200 MARKS IN OBSTETRICS & GYNAECOLOGY**

# ♥ PAEDIATRICS Including NEONATOLOGY

## A. Theory examination 40 marks

1) Group-A Long Question (Basic & Allied)	1	= 10 Marks
2) Group-B Short answer type	2 out of 3	= 2 x 5 =10 Marks
3) Group-C Short Notes	3 out of 4	= 3 x 4 =12 Marks
4) Group-D Short problem based question	1	= 8 Marks
<b>Total</b>		<b>= 40 Marks</b>

## B. Practical Examination = 30 Marks [20+10]

1. One long case = 20 marks
2. One short case = 10 marks

## C. Oral Examination = 10 Marks [5+5]

1. X- rays ( Paediatric), other images (CT, USG, MRI) = 5 marks
2. ECG, charts, instruments = 5 marks

## D. Internal Assessment = 20 Marks (theory 10 + practical 10)

TOTAL 100 MARKS IN PAEDIATRICS including NEONATOLOGY

**Medical-Junction**  
Taking the lead for medical greatness

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Enumerate the causes of mites. Write in short evaluation and treatment of ascites. 2+4+4

**Group-B**

2. a) How to approach to a 35 years old female patient suffering from multivulvuler rheumatic heart disease come to emergency with severe breathlessness. Outline the management strategy of such a patient. 6+4

**or**

b) A young male patient is having low grade fever, anorexia nausea for several days, followed by yellowish discolouration of eyes and high coloured urine. What is the probable diagnosis? How will you investigate the case? How will you manage the ease? 2+4+4

**Group-C**

3. Write short notes on (**any five**): 5x4

- |  |   |
|--|---|
| a) Diagnostic criteria of Rheumatic fever. | e) Post Kala-azar dermal Leishmaniasis. |
| b) Purpuric rash.                          | J) G-6PD deficiency.                    |
| c) Hyperpigmentation.                      | g) Cardiac tamponade.                   |
| d) Korsakoff psychosis.                    |   |

**Group D**

4. Answer in brief on any five of the following: 5x4

- |  |   |
|--|---|
| a) Hypercalcemia.  | e) Dermatological manifestation of HIV. |
| b) Classification of Lupus Nephritis.                    | f) HLA-B27.                             |
| c) Obstructive Sleep apnea.                              | g) Chronic Lead poisoning.              |
| d) Extraarticular manifestation of Rheumatoid arthritis. |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss causes, clinical features and management of Guillain-Barré syndrome 2+6+2

**Group-B**

2. a) A 44 years female presented with palpitation, weight loss, and fatigue for last 2 months with a progressive swelling in anterior part of neck for last one month. What is your diagnosis? Discuss the investigation and management. 2+4+4

**or**

b) A 60 years old diabetic patient came in the emergency in unconscious state. Discuss the differential diagnosis. How you will investigate the case. 5+5

**Group-C**

3. Answer in brief on **any five** or the following: 5x4

- |                                   |                            |
|-----------------------------------|----------------------------|
| a) Obsessive compulsive disorder. | e) Myxedema coma.          |
| b) Leptospirosis.                 | f) Cranial Nerve palsy.    |
| c) Treatment of osteoporosis.     | g) Hepatic encephalopathy. |
| d) Anaemia in CKD.                |                            |

**Group-D**

4. Write short notes on (**any five**): 5x4

- |                                      |                                       |
|--------------------------------------|---------------------------------------|
| a) Amyotrophic lateral sclerosis.    | e) Clinical feature of schizophrenia. |
| b) Rheumatic chorea.                 | f) Adrenal crisis.                    |
| c) Complication of Dengue fever.     | g) Treatment of atrial fibrillation.  |
| d) Toxic epidermal necrolysis (TEN). |                                       |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Enumerate the causes of dysphagia. How will you clinically differentiate between them? Describe barium swallow appearance of oesophagus in different causes of dysphagia. 2+4+4

**Group-B**

2. a) How to approach a 40 years old female patient suffering from diarrhoea since last 1 year? Outline the management strategy of such a patient? 6+4

**or**

b) A 32 year old female presents herself in OPD with fever, joint pain, pallor since last 2 months. What are the possibility and how you will investigate and treat her? 3+4+3

**Group-C**

3. Write short notes on **any five**: 5x4

- |  |                     |
|--|---------------------|
| a) BCR-ABL fusion gene.                    | e) Gait disorders.  |
| b) Anaphylactic hypersensitivity reaction. | f) Pellagra.        |
| c) Steatorrhoea.                           | g) Troponin T test. |
| d) Pyuria.                                 |                     |

**Group-D**

4. Answer in brief on **any five** of the following: 5x4

- |   |  |
|---|--|
| a) Hyperkalemia.  | e) Characteristics of autosomal recessive disorders. |
| b) Extra-hematological features of megaloblastic anaemia. | f) Anti-cyclic citrullinated peptide antibody.       |
| c) Arsenic poisoning.                                     | g) Vertical transmission of Hepatitis B.             |
| d) Urinary findings of proliferative lupus nephritis.     |  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. How haemoglobin is synthesized? What are functions of haemoglobin? What is the importance of Peripheral blood smear examination and its normal values? How will you investigate a case of haemolytic anaemia?

3+2+2+3

**Group-B**

2. a) A 31 years old woman complained of sudden onset right sided chest pain with shortness of breath. The pain made worse by deep breath and coughing. Breathlessness persisted and she was rushed to emergency. How will you proceed to arrive at a diagnosis? How will you manage?

5+5

**or**

b) A 35 year old female complains of weight loss with good appetite, tremor and palpitation. What is probable diagnosis? How do you confirm the diagnosis? Discuss the management.

1+3+6

**Group-C**

3. Answer in brief on **any five** of the following:

5x4

a) Manic depression.

e) Feature of Psoriatic skin rash.

b) Management of neurotoxic snake bite.

f) Treatment of CML.

c) Treatment of malaria in pregnancy.

g) Haemophilia.

d) Clinical features of Parkinson disease.

**Group-D**

4. Write short notes on **any five**:

5x4

a) Cardiac biomarker.

e) Ankylosing spondylitis.

b) Lepra reaction.

f) Diagnosis of HIV infection.

c) Treatment of Thyrotoxic crisis.

g) Scabies.

d) Gestational diabetes.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define cirrhosis of liver. Enumerate the stigma of chronic liver disease. Enumerate the complications of chronic liver disease. How will you manage a patient of severe haematemesis due to portal hypertension? 2+2+2+4

**Group-B**

2. a) A 50 year old diabetic patient has been brought to the emergency room in a comatose condition. How do you differentiate the different causes? Briefly outline the management of diabetic ketoacidosis. 5+5

**or**

b) A young male patient has been admitted with high fever with chill and rigor since last 5 days and has become drowsy since last night. What is the likely diagnosis and how will you manage the patient? 2+8

**Group-C**

3. Write short notes on (*any five*): 5x4

- |                                |   |
|--------------------------------|---|
| a) Urinary casts.              | e) Atypical angina.   |
| b) Delusion.                   | f) Clinical features differentiating small and large bowel diarrhoea. |
| c) Hypovitaminosis D.          | g) Management of organophosphorus poisoning.                          |
| d) Iodine deficiency disorder. |   |

**Group-D**

4. Answer in brief on *any five* of the following: 5x4

- |  |                  |
|--|------------------|
| a) Post exposure prophylaxis of Hepatitis B. | e) Pneumothorax. |
| b) Diagnostic criteria of S.L.E.             | f) Vitiligo.     |
| c) H. pylori infection.                      | g) Clubbing.     |
| d) Dengue shock syndrome.                    |                  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the aetiopathogenesis, diagnosis and management of acute bacterial meningitis. 3+3+4

**Group-B**

2. a) A 65 year old male presents with cough and intermittent haemoptysis. Enumerate the differential diagnosis and outline the management of this case. 3+7

**or**

- b) A 38 year old man presented with painless lump on the right side of his neck. This is present for about 2 months and seems to be enlarging. He has lost about 4 kg. weight during this period. Simultaneously he has noticed generalised itching and night sweat. How will you proceed to arrive at a diagnosis? What are the differential diagnosis? Outline the management of most probable diagnosis. 4+3+3

**Group-C**

3. Answer in brief on **any five** of the following: 5x4

- |  |  |
|--|--|
| a) Thrombotic thrombocytopenic purpura.  | e) Anxiety neurosis.                           |
| b) Medical treatment of Graves' disease. | f) Gestational diabetes.                       |
| c) Stevens- Johnson syndrome.            | g) Acute Respiratory Distress Syndrome (ARDS). |
| d) MDR TB.                               |  |

**Group-D**

4. Write short notes on (**any five**): 5x4

- |   |                        |
|---|------------------------|
| a) Arterial Blood Gas (ABG) analysis.                 | d) Cardiac biomarkers. |
| b) Leptospirosis.                                     | e) Ptosis.             |
| c) Paraneoplastic syndrome in bronchogenic carcinoma. | f) HAART.              |
|   | g) Chorea.             |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define heart failure. Enumerate the causes of left heart failure. How will you diagnose and treat a case of left heart failure? 2+2+6

**Group-B**

2. a) A 36 years female presents with low grade fever, arthralgia of multiple joints, red rashes in cheeks and swelling of both legs. How will you evaluate the case? Outline the management of most probable diagnosis. 7+3

**or**

b) A 30 year alcoholic male presents with severe pain in epigastrium and vomiting. What are likely causes? How will you approach to diagnose and treat the case? 3+7

**Group-C**

3. Write short notes on (*any five*): 5x4

- |                                      |   |
|--------------------------------------|---|
| a) Treatment of enteric fever.       | e) Adverse effects of corticosteroids.          |
| b) Tropical splenomegaly.            | f) Polyarteritis nodosa.                        |
| c) Aortic dissection.                | g) Principles of management of acute poisoning. |
| d) Amoebic liver abscess management. |   |

**Group-D**

4. Answer in brief on *any five* of the following: 5x4

- |   |   |
|---|---|
| a) Treatment of chronic duodenal ulcer. | e) Bone manifestation of chronic renal failure.     |
| b) Treatment of Hansen's disease.       | f) Irregular pulse.                                 |
| c) Hyperkalaemia.                       | g) Clinical & ECG features of complete heart block. |
| d) Proteinuria.                         |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**



**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define stroke. Enumerate risk factors of stroke. Outline the management of acute ischaemic stroke. 2+3+5

**Group-B**

2. A 16 year boy presents with low grade fever, cough and expectoration for 7 days and is having deep breathing with pain abdomen for one day. He has history of weight loss with polyuria for the past three months. On examination he is slightly disoriented and dehydrated. Explain the clinical condition and discuss your management protocol. 3+7

**or**

b) A 65 year old male patient, chronic smoker, presented with cough, fever and respiratory distress. What are probable causes? What investigations would help your diagnosis? How will you manage this patient? 2+4+4

**Group-C**

3. Answer in brief on **any five** of the following: 5x4

- |                       |   |
|-----------------------|---|
| a) Management of ITP. | e) Serological markers of Hepatitis B.          |
| b) Scabies.           | f) Pseudogout.                                  |
| c) Bell's palsy.      | g) Management of acute severe bronchial asthma. |
| d) Bipolar disorders. |   |

**Group-D**

4. Write short notes on (**any five**): 5x4

- |   |  |
|---|--|
| a) Gastrointestinal infections in HIV diseases. | e) Insulin sensitizer.                       |
| b) Management of diabetic retinopathy.          | f) Blood picture of Iron deficiency anaemia. |
| c) Management of hemoptysis in a young patient. | g) Hypercalcaemia.                           |
| d) Skin manifestations of SLE.                  |  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What is acute coronary syndrome? How do you manage a case of acute myocardial infraction in a 65 years old hypertensive patients? 3+7

**Group-B**

2. a) Discuss diagnosis and management of a case of 15 years old boy presenting with severe breathlessness, puffiness of face with hypertension and active urinary sediments on urine analysis. 4+6

OR

b) A male patient aged 22 years has been admitted due to sudden onset of convulsion with fever and jaundice of 5 days prior to admission. What are the possibility? How routine and specialised test will help you to arrive at a diagnosis? 4+3 +3

**Group-C**

3. Answer in brief on **any five** of the following: 5x4

- |                                   |  |
|-----------------------------------|--|
| a) Complication of ascites.       | e) Management of organophosphorus poisoning. |
| b) Management of mitral stenosis. | f) Heat stroke.                              |
| c) Indications of dialysis.       | g) Beriberi.                                 |
| d) Treatment of Herpes Zoster.    |  |

**Group-D**

4. Write short notes on **any five** of the following: 5x4 = 20

- |                                       |                                 |
|---------------------------------------|---------------------------------|
| a) Myasthenia gravis.                 | e) Treatment of osteoarthritis. |
| b) Drug treatment of Kalaazar.        | f) Biology of Aging.            |
| c) Recurrent urinary tract infection. | g) Anion gap.                   |
| d) X-Linked disorders.                |                                 |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. define Pneumonia. Classify Pneumonia. How will you treat a case of community acquired Pneumonia? 2+3+5

**Group-B**

2. a) What is status epilepticus. Describe the management of status epilepticus. 3+7

OR

- b) Enumerate the cases of generalized lymphadenopathy. How will you proceed to diagnosis a case of lymphadenopathy? 3+7

**Group-C**

3. Write brief on *any five* of the following: 5x4

- |                             |   |
|-----------------------------|---|
| a) Treatment of CML.        | d) Classification of Diabetes mellitus. |
| b) Stages of HIV infection. | f) Universal Prophylaxis.               |
| c) Myxoedema Coma.          | g) Megaloblastic anaemia.               |

**Group-D**

4. Write short notes on *any five* of the following: 5x4

- |                                |   |
|--------------------------------|---|
| a) Coin lesion in chest X-ray. | e) transient Ischaemic Attack (T/A).        |
| b) Dementia.                   | f) Sheehan's Syndrome.                      |
| c) C-reactive protein.         | g) Acute complication of blood transfusion. |
| d) Steven Johnson Syndrome.    |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define heart failure. Describe its pathophysiology. Outline the management of acute left ventricular failure.

2+4+4

**Group-B**

2. a) A 60 years old diabetic patient on insulin therapy was brought to casualty department with history of sudden onset altered level of consciousness. What are the likely possible here? How will you approach this case?

3+7

**OR**

b) How do you approach in a 60 years old male patient presenting with chronic diarrhoea mixed blood with evidence of malabsorption for last 6 months?

10

**Group-C**

3. Answer in brief on **any five** of the following:

5x4 = 20

Fluid replacement therapy in acute diarrhoea.

Dengue shock syndrome.

Hypogonadism.

Laboratory diagnosis of Rheumatic Arthritis

Prognostic parameters of acute pancreatitis.

Treatment of vivax hypertension .

**Group-D**

4. Write short notes on **any five** of the following:

5x4 = 20

Asymptomatic bacteriuria.

Anorexia nervosa.

Vitamin D toxicity.

Enumerate drugs in treatment of gout.

Diagnosis of atrial fibrillation.

Hepatorenal syndrome.

Urticaria..

**Medical-Junction**  
 Taking the lead for medical greatness

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe in brief the management of Acute severe asthma in an adult patient. 10

**Group-B**

2. a) A man aged 33 years presents with severe haematemesis. What may be the likely causes? How will you proceed to diagnose the case? 4+6

**OR**

b) An older patient is admitted with acute stroke. What may be the important causes? Outline the management strategy in 1<sup>st</sup> 24 hours. 3+7

**Group-C**

3. Write brief on *any five* of the following: 5x4 = 20

- |                                       |                                |
|---------------------------------------|--------------------------------|
| a) Clinical features of Parkinsonism. | e) Bitot's spot.               |
| b) Microcytic anaemia.                | f) Manic depressive psychosis. |
| c) Extensor Planter response.         | g) Management of ITP.          |
| d) Management of leprosy.             |                                |

**Group-D**

4. Write short notes on *any five* of the following: 5x4 = 20

- |  |                          |
|--|--------------------------|
| a) Anti malarial drug in Falciparum Malaria. | e) Diabetic retinopathy. |
| b) DDP-4 inhibitors.                         | f) Bronchiectasis.       |
| c) HIV-Post exposor prophylaxis.             | g) Microalbuminuria.     |
| d) Addisonian crisis.                        |                          |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. define unstable Angina. How will you examine, investigate and management a case of unstable Angina in a 50 years old patient? 2+8

**Group-B**

2. a) Discuss the clinical and laboratory approach to a case of ascites. 5+5

**OR**

b) Discuss how you will approach a case of fever with polyarthritis with skin rash of about 2 weeks duration in a young female? 10

**Group-C**

3. Answer in brief on **any five** of the following: 5x4

- |                               |                                    |
|-------------------------------|------------------------------------|
| a) Henoch-Schonlein Purpura.  | e) Vitamin D deficiency.           |
| b) Proton-pump inhibitors.    | f) Dwarfism.                       |
| c) Solitary pulmonary nodule. | g) Diuretics in clinical practice. |
| d) Micro-albuminuria.         |                                    |

**Group-D**

4. Write short notes on (**any five**): 5x4

- |   |   |
|---|---|
| a) Pulsus-Paradoxus.                          | e) Treatment of uncomplicated falciparum malaria. |
| b) Bone-change in chronic renal failure.      | f) Neurotoxic snake bite.                         |
| c) Management of ruptured esophageal varices. | g) Cytokines.                                     |
| d) Laboratory diagnosis of Kala-azar.         |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define respiratory failure. Discuss the management of acute exacerbation of chronic obstructive lung disease. 3+7=10

**Group B**

2. a) A man aged 70 years presented with lower GI. bleeding. What may be the likely causes? How will you proceed to come to a diagnosis? 4+6=10

OR

b) A young patient presents in the emergency with unconsciousness and deep breathing. He has a history of weight loss and polyuria. Discuss how will you manage the case? 10

**Group C**

3. Write in brief on *any five* of the following: 4x5=20

- |   |  |
|---|--|
| a) Hypertonia.  | d) Vesicular skin eruptions.             |
| b) Clinical presentations of neurological tuberculosis. | e) Clinical features of hyperthyroidism. |
| c) Tropical Sprue.                                      | f) Anxiety neurosis.                     |
|   | g) Causes of haemolytic anaemia.         |

**Group D**

4. Write short notes on (*any five*): 4x5=20

- |                                       |   |
|---------------------------------------|---|
| a) Management of Pyogenic Meningitis. | e) Causes of hyponatremia.              |
| b) Common AIDS defining conditions.   | f) Diagnosis of Diabetic neuropathy.    |
| c) Stevens Johnson Syndrome.          | g) Management of Depression in elderly. |
| d) Management of-Migraine.            |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define heart failure. Enumerate the clinical features of different types of heart failure. 2+8

**Group B**

2. (a) A 55-year old female has come to the Emergency with acute precordial chest pain. How do you proceed to diagnose the case? 10

OR

(b) A 30-year old male has come to the Emergency with severe epigustic pain and vomiting. How do you proceed to diagnose the case? 10

**Group C**

3. Answer in brief *any five* of the following: 5x4

- |   |  |
|---|--|
| a) Drug therapy of Acute Peptic Ulcer.  | e) Niacin: Deficiency symptoms.          |
| b) Serum ascites-albumin gradient.      | f) Differential diagnosis of Mumps.      |
| c) Anion Gap: Definition and relevance. | g) Ascariasis: Diagnosis and management. |
| d) Hirsutism: Definition and causes.    |  |

**Group D**

4. Write short notes on *any five* of the following: 5x4

- |  |   |
|--|---|
| a) Corrigan's sign.                    | e) Vasculotoxic snake bite.                                       |
| b) Raynaud's phenomenon.               | f) Refractory ascites.  |
| c) Wide split of S2 (2nd heart sound). | g) Extra intestinal manifestations of Inflammatory Bowel Disease. |
| d) Anaemia in C.K.D.                   |   |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the etiology, clinical features and management of a case of GB syndrome. 3+3+4

**Group B**

2. a) What are the poor prognostic clinical features of acute severe asthma? How will you manage such a patient? 3+7

**OR**

b) A man aged 50 years is losing weight for sometime, what may be the possible causes? How will you proceed for diagnosis? 3+7

**Group C**

3. Write in brief on **any five** of the following: 5x4

- |   |                           |
|---|---------------------------|
| a) Management of chronic myeloid leukaemia. | e) HAART treatment.       |
| b) Non-Ketotic hyper-osmolar diabetic coma. | f) Tropical eosinophilia. |
| c) Hypercalcaemia.                          | g) MDR tuberculosis.      |
| d) Chemoprophylaxis of malaria.             |                           |

**Group D**

4. Write short note on **any five** of the following: 5x4

- |                               |                                  |
|-------------------------------|----------------------------------|
| a) Bell's palsy.              | e) Nosocomial pneumonia.         |
| b) Tetany.                    | f) Generalised anxiety disorder. |
| c) Amoebic liver abscess.     | g) Lepra reaction.               |
| d) Dengue haemorrhagic fever. |                                  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group  
 Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the causes, clinical features and diagnostic features of Acute Pericarditis. 4+3+3

**Group-B**

2. a) A 14-years old male was admitted in the emergency with History of Weight loss and polyuria. He was having deep breathing. How will you manage this patient? 2+8

**OR**

- b) A 15 years old female presented with a history of fever, Arthralgia and rashes. Discuss the differential diagnosis and management plan. 5+5

**Group-C**

3. Attempt **any five** question write in brief: 5x4

- |                                      |   |
|--------------------------------------|---|
| a) Management of Status Epilepticus. | e) UTI- aetiology and management.           |
| b) Gene therapy.                     | f) Signs and symptoms of Thyrotoxicosis.    |
| c) Indication of dialysis.           | g) Significance of 'a' waves in Neck veins. |
| d) Complication of cirrhosis.        |   |

**Group-D**

4. write short notes on **any five** of the following: 5x4

- |  |  |
|--|--|
| a) Diabetic foot.                        | e) Management of organophosphorus poisoning. |
| b) Complication of mitral regurgitation. | f) DMARDs in Rheumatoid Arthritis.           |
| c) Differential diagnosis of meningitis. | g) Management of LVF.                        |
| d) Hemiplegia in young.                  |  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group  
 Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the aetiology, management and complication of status epilepticus. 3+4+3

**Group B**

2. Discuss the treatment of hyperosmolar, non-ketotic coma. Describe its complications. 6+4

**OR**

Describe the cause of "Pancytopenia". How will you manage a case of Aplastic Anaemia. 6+4

**Group-C**

3. Attempt **any five** question: 5x4

- |  |                               |
|--|-------------------------------|
| a) Addison's disease.                          | e) Causes of Goitre.          |
| b) Bony complication of Sickle cell disease.   | f) Diagnostic work up of SLE. |
| c) Complication of Tetanus.                    | g) Drug and kidney.           |
| d) Management of Community acquired Pneumonia. |                               |

**Group-D**

4. Write short note on **any five**: 5x4

- |   |                                    |
|---|------------------------------------|
| a) Sign: of cortico-spinal tracts lesion. | e) Low back ache in female.        |
| b) Side effect of steroid.                | f) Anti Platelet agent.            |
| c) Causes of Papilloedemia.               | g) Diagnostic work up of Polyuria. |
| d) Treatment of Hyperkalemia.             |                                    |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

Discuss the aetopathogenesis, clinical features and treatment of Acute Rheumatic fever. 3+4+3

**Group B**

A 32 years female present with high rise of temperature, haematuria and right sided flank pain. Discuss how would you proceed to arrive at a diagnosis. Give its management plan for medical causes. 4+6

**OR**

A 40 years alcoholic male presents with severe pain in the epigastrium. When are the likely causes and how would you proceed to arrive at diagnosis? Give in management plan. 2+4+4

**Group-C**

3. Write in brief on **any five** the following: 5x4

- |  |   |
|--|---|
| a) Radiological features of mitral stenosis. | e) Management of neurotoxic snake bite.   |
| b) Spontaneous bacterial peritonitis.        | f) Dengue shock syndrome.                 |
| c) Genetic mutation.                         | g) Management of acute variceal bleeding. |
| d) Psoriatic arthropathy.                    |   |

**Group-D**

4. Write short notes on (**any five**) of the following: 5x4

- |  |  |
|--|--|
| a) Corrigan's Sign.                              | e) Drug induced liver disease.               |
| b) Acute adverse reactions of blood transfusion. | f) Renal manifestation of SLE.               |
| c) Clinical features of pericardial effusion.    | g) Management of organophosphorus poisoning. |
| d) Beriberi.                                     |  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group  
 Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Draw a diagram of myoneural junction. Discuss pathogenesis, clinical features, diagnosis and management of a disease of myoneural junction. 3+5+2

**Group-B**

2. a) A 50 years old male presents with loss of weight. What are the possible causes? How will you approach the case to arrive at a diagnosis? 3+7

**OR**

b) A 60 years old diabetic patient has been brought to casualty department in unconscious state. What are the possible causes? How will you approach the case to arrive at a diagnosis? 3+7

**Group-C**

3. Write in brief on **any five** of the following: 5 x 4

- |  |  |
|--|--|
| a) Management of acute severe bronchial asthma.              | e) Lepra reaction.   |
| b) Clinical features of 3 <sup>rd</sup> Cranial nerve palsy. | f) Management of Cerebral malaria.                           |
| c) Manic depression (Bipolar disorder).                      | f) Aetiology and clinical features of megaloblastic anaemia. |
| d) Gastrointestinal manifestation of HIV infection.          |  |

**Group-D**

4. Write short notes on (**any five**): 5 x 4

- |                                      |  |
|--------------------------------------|--|
| a) 'DOT' in tuberculosis.            | e) Non-Thrombocytopenic purpura.                           |
| b) Myxoedema coma.                   | f) Generalised anxiety disorder.                           |
| c) Wernicke's-Korsakoff syndrome.    | g) Non-metastatic complications of bronchogenic carcinoma. |
| d) Aetiology of Parkinson's disease. |  |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Medicine**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the pathogenesis, complications and management of *Falciparum malaria*. 2+3+5

**Group B**

2. a) What are the clinical and laboratory (including ECG) features of acute myocardial infarction? Discuss its management in the first six hours. 2+3+5

**OR**

- b) What are the causes of secondary hypertension? Discuss the treatment and complications of malignant hypertension. 3+4+3

**Group-C**

3. Answer in brief (*any five*) of the following: 5x4

- |  |                                    |
|--|------------------------------------|
| a) Treatment of UTI in female.                                   | d) Clinical features of vitamin A. |
| b) Extra-intestinal manifestation of inflammatory bowel disease. | e) Management of viper snake bite. |
| c) Diagnostic criteria of SLE.                                   | f) Anaphylaxis.                    |
|  | g) Tropical sprue.                 |

**Group-D**

4. Write short notes on (*any five*) of the following: 5x4

- |                                      |                                |
|--------------------------------------|--------------------------------|
| a) Aetiology of acute renal failure. | e) Total parenteral nutrition. |
| b) Management of Typhoid fever.      | f) Modified Jone's Criteria.   |
| c) Exudative ascites.                | g) Innate immune system.       |
| d) Causes of Hyponatremia.           |                                |

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Medicine**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Enumerate respiratory function tests. Name three obstructive and three restrictive lung diseases. How will you differentiate obstructive and restrictive lung diseases by respiratory function tests? 5+3+2

**Group B**

2. a) Discuss risk factors for acute stroke. What are the steps in the management of patient with acute ischemic stroke? 5+5

**OR**

b) Discuss the clinical and laboratory features of hypothyroidism. How will you manage myxoedema coma? 5+5

**Group C**

3. Write briefly on the following (*any five*): 5x4

a) Idiopathic thrombocytopenic purpura (ITP).

e) Clinical features of lepromatous leprosy.

b) Treatment of Status epilepticus.

f) Vitiligo.

c) Opportunistic infections in an AIDS patient.

g) Management of a patient with depression.

d) DOTS therapy.

**Group D**

4. Write short notes on *any five* of the following: 5x4

a) Etiology of peripheral neuropathy.

e) Secondary syphilis.

b) Eosinophilia.

f) Management of septic shock.

c) Kidney involvement in diabetes mellitus (DM).

g) Clinical features of Parkinsonism.

d) Anorexia nervosa.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A 40 years old man presents with a nonhealing ulcer over the lower part of his inferior extremity. What are the causes? How will you investigate the case? What are the surgical considerations of diabetic foot ulcer? (No operative details). 3+7+5

**Group B**

2. A 25 years old female, recently married, presents with sudden pain over the right lower abdomen. How will you take up the case to come at a diagnosis? Outline the management of acute appendicitis (No operative details). 10+5

**OR**

b) What are the causes of intra abdominal lump in the region of epigastrium? Discuss the management of Hydatid cyst of the liver. 5+10

**Group-C**

3. Write short notes on (any three) of the following: 3x5

- a) Diagnostic peritoneal Lavage.
- b) Colostomy.
- c) Molecular subtypes of Breast carcinoma.
- d) Intussusception.
- e) Amoebic Liver Abscess.

**Group-D**

4. Answer in brief on any three of the following: 3x5

- a) Myositis ossificans.
- b) Fracture patella.
- c) Complications of colles' fracture.
- d) Pathological fracture.
- e) Giant cell tumour.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the different forms of Renal Calculi? Discuss the clinical presentation and its management of a stone in the Renal pelvis. 5+10

**Group B**

2. a) What is ANDI to classify benign lesions of the Breast? Discuss the management of discharge from the nipple. 7+8

**OR**

b) Classify Thyroid neoplasm. Discuss the management of solitary thyroid nodule. 3 cm in size of 30 years old female. 5x10

**Group-C**

3. Answer in brief on any three of the following: 3 x 5

- a) Lucid interval.
- b) Thyroid storm.
- c) Ranula.
- d) E.R.C.P.
- e) Testicular torsion.

**Group-D**

4. Write short notes on (any three): 3 x 5

- a) PSA.
- b) Brachytherapy.
- c) Biomarkers.
- d) Triage.
- e) Regional anesthesia

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe the signs, symptoms, prevention and treatment of tetanus. 15

**Group-B**

2. Answer **any one** of the following:

- a) Discuss the investigations of a 50 years old male presented with obstructive jaundice and palpable gall bladder. Give outline of management of patient. How will you prepare liver for operation if needed? 5+5+5
- b) Discuss the pathophysiology of acute intestinal obstruction. How will you manage a case of intussusception? 5+10

**Group-C**

3. Write short notes on **any three**: 3 x 5

- a) Sentinel node biopsy.
- b) Alvarado score.
- c) Parotid abscess.
- d) Mesenteric cyst.
- e) Gastrinoma (ZE syndrome).

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

- a) Volkman's ischaemic contracture.
- b) Pathological fracture.
- c) Congenital talipes equinovarus.
- d) Radial nerve injury due to fracture.
- e) Perthes disease.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the causes of haemoperitoneum and its management. 5+10

**Group-B**

2. Answer **any one** of the following:

- a) What are the clinical features of renal cell carcinoma? How will you investigate and treat a case of renal cell carcinoma? 8+4+3
- b) Discuss the clinical features, investigations and management of Pheochromocytoma. 4+5+6

**Group-C**

3. Answer in brief on **any three** of the following: 3 x 5

- a) Myocutaneous flap.
- b) Autotransfusion.
- c) PCNL.
- d) Subdural haemorrhage.
- e) Complications of spinal anaesthesia.

**Group-D**

4. Write short notes on **any three** of the following: 3 x 5

- a) Tongue ulcers.
- b) Pulmonary embolism.
- c) DVT.
- d) ABPI.
- e) Ludwig's angina.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Classify haemorrhage. Discuss briefly the management of haemorrhagic shock. Mention complications of blood transfusion. 5+5+5

**Group-B**

2. Answer **any one** of the following:

a) A 50 year old man presents with alternate constipation and diarrhoea. He has a lump in left iliac fossa. How would you investigate and diagnose the case. Outline the treatment of such case. 6+4+5

b) A 45 year old man presented with a recently discovered lump in the epigastrium with rapidly developing anorexia, asthenia, anaemia and increasing vomiting. How would you investigate to arrive at diagnosis? Outline the management of the case. 8+7

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

a) Hydatid cyst of liver.

b) Pancreatic pseudocyst.

c) Femoral hernia.

d) Liver abscess.

e) Marjolin's ulcer.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

a) Carpal tunnel syndrome.

b) Tardy ulnar nerve palsy.

c) Supra condylar fracture of humerus.

d) Giant cell tumour.

e) Trendelenberg test for hip joint.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

2. Enumerate the causes of painless haematuria. Discuss the investigation and treatment in a patient of 65 years presented with painless haematuria. 5+5+5

**Group-B**

3. Answer **any one** of the following:

a) Classify thyroid cancer. Discuss the management of F.N.A.C. proved follicular neoplasm of (R) lobe of thyroid in a lady of 45 years. 5+10

b) What are the aetiologies of pancreatitis? How will you investigate and treat a case of acute pancreatitis? 5+5+5

**Group-C**

3. Answer in brief on **any three** of the following: 3 x 5

a. Epidural anaesthesia.

b. Venous ulcer lower leg.

c. Spina bifida.

d. MEN syndrome.

e. Principle of skin grafting.

**Group-D**

4. Write short notes on **any three** of the following: 3 x 5

a. Bleeding from gum.

b. Hydrocephalus.

c. Post burn contracture.

d. Ionising radiation.

e. Hamartoma.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe the biological process of wound healing. What are the factors affecting wound healing? Treatment options for presternal keloid. 5+5+5

**Group-B**

2. Answer **any one** of the following:

a. A 45 yrs. old gentleman presents with intractable anaemia and a painless lump in the right iliac fossa for 3 months duration. How would you investigate the case to confirm the diagnosis. Briefly outline a comprehensive management of the problem. 8+7

b. A 50 year old male patient comes to you with painless progressive jaundice and on clinical examination the gall bladder is palpable. How would you investigate the patient to come to a diagnosis? Describe the preoperative preparations of jaundiced patient. 10+5

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

a. Ludwig's angina.

b. Oestrogen and progesterone receptors.

c. Types of anorectal abscess.

d. Appendicular lump.

e. MODS.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

a. Ring sequestrum.

b. Exostosis of bone.

c. Volkmann's ischaemic contracture.

d. Pathological fracture.

e. Ideal amputation stump.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Classify goitre. How will you investigate and treat a 50 yrs. old man with a clinically discrete nodule of 3 cm diameter in right lobe of thyroid. 5+5+5

**Group-B**

2. Answer **any one** of the following:

- a) Classify renal injury. Discuss clinical features and management of a patient having injury to left kidney following blunt trauma in left loin. 4+5+6
- b) Discuss the clinical features, complications and management of undescended testis. 2+4+9

**Group-C**

3. Answer in brief on **any three** of the following: 3 x 5

- a) Breast abscess.
- b) Meconium ileus.
- c) Basal cell carcinoma.
- d) Premalignant conditions of penile carcinoma.
- e) Acute pancreatitis.

**Group-D**

4. Write short notes on **any three** of the following: 3 x 5

- a) Glasgow Coma Scale.
- b) Radiofrequency ablation of tumours.
- c) Tension pneumothorax.
- d) Epulis.
- e) Complications of spinal anaesthesia.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Classify shock. Discuss the patho-physiology and management of septic shock. 3+6+6

**Group-B**

2. Answer **any one** of the following:

a) Describe the clinical features, investigations and management of carcinoma of stomach. 4+4+7

b) A 50 years male patient presents with bleeding per rectum. How will you investigate and manage the patient? 7+6

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

a) Breast Biopsy.

b) Incarcerated Hernia.

c) Blood Substitutes.

d) Volvulus Neonatorum.

e) Amoebic Liver Abscess.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

a) Fractures occurring due to fall on outstretched hand.

b) Osteochondroma.

c) Greenstick fracture.

d) Fracture of Patella.

e) Spine Bifida.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the clinical features, investigation and treatment of Thyrotoxicosis. 5+5+5

**Group-B**

2. Answer **any one** of the following:

- a) Describe the pathophysiology of BHP. Mention the medical and surgical management of BHP. 6+4+5  
b) Classify testicular tumours. Discuss investigation necessary to plan the treatment for a suspected testicular tumour. What are the treatment options available? 5+5+5

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

- a) Paget disease of nipple.  
b) Electric burns.  
c) Dentigerous cyst.  
d) Lucid interval.  
e) Fistula in ano.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

- a) Penile carcinoma.  
b) Muscle Relaxant.  
c) Flail Chest.  
d) Epidural Anaesthesia.  
e) Compartment Syndrome.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss assessment of Burn wound. Write in short pathophysiology of Burn injury. How would you treat 30% burn in 50 kg. body weight female patient. 3+6+6

**Group-B**

2. Answer **any one** of the following:

a) Classify colonic tumours. How will you manage a 60 years old man presenting with fresh bleeding per rectum? 5 + 10

b) Describe the clinical features, diagnosis and management of Choledocholithiasis. 4+4+7

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

a. Causes and treatment of metabolic acidosis.

b. venous ulcer.

c. Fourier's gangrene.

d. Anorectal Malformation.

e. Torticollis.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

a. Volkmann's ischaemic Contracture.

b. Ewing's tumour.

c. Core needle biopsy.

d) Colles Fracture.

e) Bone graft.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define Hydronephrosis. Discuss the causes and management of unilateral hydronephrosis. 2+5+8

**Group-B**

2. Answer **any one** of the following:

a) Describe Lymphatic drainage of breast. Mention the risk factors of breast carcinoma. How to manage a 52 year old female patient with locally advanced breast carcinoma? 4+3+8

b) A 50 year old gentleman presented with painless hematuria. What may be the possible causes? How would you investigate the case? Give an outline of the management. 5+5+5

**Group-C**

3. Write short notes on (**any three**) of the following: 3 x 5

a) Cleft lip.

b) Thyroglossal Cyst.

c) Spinal Anaesthesia.

d) Types of Skin graft.

a) Role of ERCP in obstructive Jaundice.

**Group-D**

4. Answer in brief on **any three** of the following: 3 x 5

a) Oral submucous fibrosis.

b) Wax bath.

c) Subdural haematoma.

d) Intussusception.

e) Marjolin's ulcer.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the types of haemorrhage? What are the methods of determining acute blood loss? How would you treat haemorrhage? 3+6+6

**Group-B**

2. Answer **any one** of the following:

a) Middle aged patient presented with a big tense cystic lump in the upper abdomen following an attack of acute abdomen. How would you investigate the patient and plan the management? 8+7

b) What are the causes of benign biliary strictures? Discuss management of retained stone in common bile duct. 5+10

**Group-C**

3. Write short notes on (**any two**) of the following: 2 x 5

a) Post-operative pain management.

b) Creating Pneumoperitoneum in Lap. Surgery (procedures only).

c) Burst Abdomen.

d) Decubitus ulcer.

**Group-D**

4. Answer in brief on **any five** of the following: 5 x 5

a) Fracture clavicle.

b) Tennis Elbow.

c) Supra condylar fracture of Humerus.

d) Dupytren's contracture.

e) Ruptured Tendoachilles.

f) Mallet finger.

g) Pyogenic Osteomyelitis.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. (a) Classify Thyroid Neoplasms. Write clinical features, investigations and management of papillary carcinoma of the Thyroid gland (A lady of 25 years old). 3+4+3+5

**OR**

(b) A 40 years old gentleman presented with bilateral knobby Renal Lump in the abdomen. How do you investigate and treat such a patient (Operation details not required). 7+8

**Group-B**

2. Write short notes on (*any three*): 5x3

- a) Breast Biopsies.
- b) Causes of Haematuria.
- c) Antegrade Pyelography.
- d) Stress gastritis.
- e) P.S.A.

**Group-C**

3. Write short notes on (*any three*): 5x3

- a) Paraphimosis.
- b) Lucid interval.
- c) Chest Drain.
- d) Torsion of Testes.
- e) Tissue Expansion.

**Group-D**

4. Write short notes on (*any three*): 5x3

- a) Anaesthetic monitoring devices.
- b) Radiotherapy in treatment of Carcinoma Breast.
- c) Ameloblastoma.
- d) Transluminal U.S.G.
- e) Short Wave Diathermy.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define and classify wound. Discuss factors influencing wound healing. Write in brief management of Diabetic ulcer affecting foot, in a middle aged man. 4+5+6

**Group-B**

2. Answer **any one** of the following:

a) A forty five years old lady presents with acute upper abdominal pain. Discuss the differential diagnosis and management of such a patient. 7+8

b) Enumerate the common causes of intestinal obstruction in an infant. Write the clinical features, investigations and management of intussusception in a 7 months old child. 3+4+3+5

**Group C**

3. Write short note on **any two**

(a) Pre-operative preparation of case of obstructive Jaundice.

(b) Epigastric Hernia.

(c) D.V.T.

(d) Active immunisation against Tetanus.

**Group D**

4. Write in brief on **any five** of the following

Trigger finger.

Ewing's Tumour.

Mechanism of fracture patella.

Brodie's Abscess.

Carpal tunnel syndrome.

Shoulder dislocation.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. (a) Classify Carcinoma of Breast. How will you investigate and manage a case clearly Carcinoma of Breast in a 40 years old lady? 4+5+6

**OR**

(b) Classify renal neoplasms. How will you diagnose and manage a case of renal Cell Carcinoma? 4+5+6

**Group B**

2. Write short notes on (*any three*): 5x3

- a) Flail chest.
- b) Post operative Pyrexia.
- c) Brain Death.
- d) Split thickness skin graft.
- e) Omphalocele.

**Group C**

3. Write short note: on *any three*:

- a) Retrosternal goitre.
- b) Parotid abscess.
- c) Alvarado Score of Acute Pancreatitis.
- d) T.U.R P.
- e) Oxalate stone.

**Group-D**

4. Write than note: on *any three*

- a) Wax bath.
- b) Epulis.
- c) M.R.I. scan in Surgery.
- d) Radiation Dermatitis.
- e) Spinal Anaesthesia.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are coagulation factors? Write in detail about the mechanism of hemostasis. 5+10

**Group-B**

2. Answer **any one** of the following:

a) What are the all causes of upper GI bleed? How will you manage acute variceal bleeding? 8+7

b) What are the causes of obstructive jaundice? Write about the management of carcinoma head of pancreas? 5+10

**Group C**

3. Write short note on (**any two**): 2x5

- a) Hemangioma.
- b) Carotid body tumour.
- c) Bronchial sinus.
- d) Carcinoid tumour.

**Group-D**

4. Write in brief on **any five** of the following: 4x5

- a) Exostosis.
- b) Brown tumour.
- c) Ewing's sarcoma.
- d) Spondylolisthesis.
- e) Bone scan.
- f) TB spine.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Answer **any one** or the following:

- a) What are the functions of thyroid? Write in detail about clinical features, investigations and treatment of hyperthyroidism. 3+4+4+4
- (b) Give differential diagnosis of scrotal swelling. Write in detail about management of testicular tumour. 5+10

**Group B**

2. Write short note on (**any three**): 3x5

- a) Ectopia vesicae.  
b) Neurofibromatosis.  
c) Paget's disease of nipple.  
d) Fistula in ano.  
e) Varicocele.

**Group C**

3. Write short note on (**any three**): 3x5

- a) Subdural hematoma.  
b) Muscle relaxant.  
c) I<sup>14</sup> scan.  
d) Congenital hypertrophic pyloric stenosis.  
e) Lumbar puncture.

**Group-D**

4. Write short notes on (**any three**): 3x5

- a) Ludwig's angina.  
b) Meningomyelocele.  
c) Empyema thoracis.  
d) Referred pain.  
(e) Patent ductus arteriosus.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define and classify wounds. Discuss various factors influencing wound healing. Discuss in brief management of "Diabetic foot". 5+5+5

**Group-B**

2. Answer any one of the following:

a) A middle aged male patient presents with an epigastric lump. Discuss the differential diagnosis. How would you investigate to come to a diagnosis? 8+7

b) What are the causes of weeping umbilicus? Discuss the problems related to vitello-intestinal duct and their remedy. 5+5+5

**Group-C**

3. Write short notes on (*any two*): 2 x5

a) Arteriovenous fistula.

b) Basal Cell Carcinoma.

c) Pre operative preparation of a patient of Pyloric stenosis.

d) Auto transfusion.

**Group-D**

4. Write in brief on *any five* of the following: 5 x 4

a) Myositis ossification.

b) Pathological fracture.

c) Carpal tunnel syndrome.

d) Fracture neck femur - types and complications.

e) Aetiopathogenetic of acute osteomyelitis.

f) Spina bifida.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A 35 years old lady presents with a Solitary thyroid nodule in right lobe. How would you come to a diagnosis and manage such a patient? 8+7

OR

b) Classify kidney tumours. Mention different modes of presentation of Renal Adeno Carcinoma. Outline the management of such a patient. 3+5+7

**Group-B**

2. Write short notes on (*any three*): 3 x 5

- a) Salivary Calculi.
- b) Fournier's gangrene.
- c) Breast abscess.
- d) MEN. syndrome.
- e) Complications of undescended testis.

**Group-C**

3. Write short notes on (*any three*): 3 x 5

- a) Anorectal malformations.
- b) Extradural haematoma.
- c) Cardiopulmonary resuscitation (CPR).
- d) MRI.
- e) Complications of Radiotherapy.

**Group-D**

4. Write in brief on *any three* of the following: 3 x 5

- a) Fat embolism.
- b) Odontoma.
- c) Short wave diathermy.
- d) Tension pneumothorax.
- g) Hypokalemia.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Surgery**  
**Paper: I**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define and classify shock. How will you assess and treat a case of haemorrhagic shock ? Mention the complications of blood transfusion. 2+2+5+3+3

**Group-B**

2. Answer any one of the following questions:

a) Enumerate the causes of bleeding per rectum. Mention how it is diagnosed. Outline the management for bleeding haemorrhoids. 5+5+5

b) What are the causes of obstructive jaundice? How do you establish the diagnosis? Discuss the various options in the management of choledocholithiasis. 5+5+5

**Group-C**

3. Write short notes on (*any two*): 2 x 5

a) Methods of sterilisation.

b) Biochemical abnormality in Pyloric Stenosis.

c) Universal precaution.

d) Nipple discharge.

**Group-D**

4. Write briefly on (*any five*): 5 x 4

a) Frozen shoulder.

b) Complication of supracondylar fracture of humerus.

c) Sequestrum.

d) Volkman's contracture.

e) Talipes equinus.

f) Bladder problem in spinal paraplegia.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Surgery**  
**Paper: II**

**Full Marks: 60**  
**Time: 2½ hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. a) Enumerate the causes of haematuria. How will you confirm the diagnosis? What will you do for a patient diagnosed to have carcinoma of the urinary bladder? 5+5+5

OR

b) Discuss the pathogenesis of multinodular goitre. Mention the complications of such a goitre. How do you manage such a patient? 5+5+5

**Group-B**

2. Write short note on (*any three*): 3x5

- a) Venous ulcer.
- b) Epididymal cyst.
- c) Tetany.
- d) Thyroglossal cyst.
- e) Dermoid cyst.

**Group-C**

3. Write short notes on (*any three*): 3x5

- a) Exomphalos.
- b) Skin grafting.
- c) Spinal anaesthesia.
- d) Double contrast enema.
- e) Brachytherapy.

**Group-D**

4. Answer briefly on (*any three*): 3x5

- a) Dental cyst.
- b) Flail chest.
- c) Glasgow coma scale.
- d) Therapeutic use of ultrasound.
- e) Patent ductus arteriosus.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A lady comes with history of 8 month amenorrhoea, on examination fundal height was found to be of 24 week size – What are the possibilities? Give an outline of diagnosis and management of intra-uterine Foetal Death (IUFD) 2+4+4

**Group-B**

2. Define PPH. What are the causes of PPH? How do you manage a case of atonic PPH immediately after vaginal delivery? 2+3+5

**Group-C**

3. Write short notes on (*any tow*) of the following: 2x5

- a) Plane of pelvic dimension.
- b) Medical management of ectopic pregnancy.
- c) MgSO<sub>4</sub> (Magnesium Sulphate) therapy in eclampsia..
- d) Apgar score

**Group-D**

4. Answer brief *any tow* of the following: 2x5

- a) Once caesarean section in not always caesarean section - Justify
- b) Routine ultrasonography USG examination in second trimester 18-20 weeks, to all pregnant mother is mandatory - Justify
- c) Supplementation of folic acid is necessary in all pregnancy - Justify
- d) All labours should be monitored by partograph – Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the common cause of lower abdominal lump in women of reproductive age group? How will you differentiate clinically between ovarian and uterine lump? Enumerate the common epithelial ovarian tumours. 3+4+3

**Group-B**

2. A women aged 35 years came to OPD with the complain of something coming down per vagina. What are different diagnosis and distinguishing features of these condition? Discuss the different treatment options available for second degree vagino-uterine prolapse? 2+4+4

**Group-C**

3. Write short notes on (*any tow*) of the following: 2x5

- Puberty menorrhagia.
- Complication of ovarian tumour.
- definition and causes of secondary amenorrhoea.
- tubal factors of infertility.

**Group-D**

4. Answer brief *any tow* of the following: 2x5

- Carcinoma cervix is a preventable malignancy - Justify
- Post-menopausal bleeding per vagina should always be investigate - Justify
- Different types of menstrual abnormalities may be associated with leiomyomas - Comment
- Three swab test differentiates the different urinary fistulas - Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. How do you diagnose pre-eclampsia? What are its complications? 5+5

**Group-B**

2. Define abortion. Give its classification. How do you differentiate between threatened abortion and inevitable abortion? Briefly outline the management of missed abortion. 2+2+3+3

**Group-C**

3. Write short notes on *any two*: 2 x 5

- Non-stress test.
- Amniotic fluid.
- Puerperal sepsis.
- Neonatal resuscitation at birth.

**Group-D**

4. Answer in brief on *any two* of the following: 2 x 5

- Active management of third stage of labour should be routinely practised – justify
- Injection Betamethasone should be given to all women with pre-term labour – justify
- Follow up is necessary after evacuation of Hydatidiform mole – comment
- All antenatal mothers should be screened for diabetes mellitus – justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define ovulation. What are the symptoms and signs of ovulation? How would you investigate the female factors in a case of infertility? 1+4+5

**Group-B**

2. What are the causes of post-menopausal bleeding? How would you proceed to investigate such a case? 4+6

**Group-C**

3. Write short notes on *any two* of the following: 2 x 5

- a) Perineal body.
- b) Dermoid cyst of ovary.
- c) Progesterone-only pill.
- d) Normal semen report.

**Group-D**

4. Answer briefly on *any two* of the following: 2 x 5

- a) Ovarian malignancy is often diagnosed late – Comment
- b) Upper reproductive tract infection is a sequale of lower reproductive tract infection – Comment
- c) Use of injectable contraception's or IUCD are important contraceptives for our country – Justify
- d) Laparoscopy is mandatory for evaluation of female infertility – Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define intra-uterine fetal death (IUFD). What are its causes? How do you diagnose such a case? 1+4+5

**Group-B**

2. A primigravida, 28 year, presents with vaginal bleeding at 34 weeks of gestation. What are its causes? How will you investigate such a case? Outline its management. 2+3+5

**Group-C**

3. Write short notes on *any two* of the following: 2 x 5

- Use of Misoprostol in Obstetrics.
- Placenta succenturiata.
- Routine examination of newborn at birth.
- Vulval haematoma.

**Group-D**

4. Answer in brief on *any two* of the following: 2 x 5

- Early diagnosis of ectopic pregnancy prevents surgical intervention – Justify
- Oral iron supplementation during pregnancy is necessary – Comment
- Perinatal mortality and morbidity is higher in breech delivery – Comment
- All post – caesarean section mothers do not require caesarean section as a mode of Termination of subsequent pregnancy.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define metrorrhagia. What are its causes? How would you proceed to manage a patient aged 45 years having metrorrhagia? 1+3+6

**Group-B**

2. Enumerate two common varieties of benign epithelial tumours of ovary. Discuss the diagnosis and management of benign ovarian tumour. 1+4+5

**Group-C**

3. Write short notes on *any two* of the following: 2 x 5

- a) Causes of secondary dysmenorrhoea.
- b) PAP smear from cervix.
- c) Different methods of tubectomy.
- d) Gartner's duct cyst.

**Group-D**

4. Answer briefly *any two* of the following: 2 x 5

- a) Husband's semen analysis is the first investigation to evaluate a case of infertility - Justify
- b) Surgical treatment for genital prolapse is decided after considering age and reproductive wishes of the patient – Comment
- c) Dysfunctional uterine bleeding is a diagnosis of exclusion – Justify
- d) Syndromic approach is effective for managing reproductive tract infection – Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the varieties of twin pregnancy? Enumerate the maternal and fetal complications of twin pregnancy. How would you diagnose twin pregnancy? 2+4+4

**Group-B**

2. What are the causes of bleeding per vagina in the first trimester of pregnancy? Discuss the diagnosis of hydatidiform mole. Write in short its management. 2+4+4

**Group-C**

3. Write short notes on *any two* of the following: 2 x 5

- a) Haematological changes in pregnancy.
- b) Battledore placenta.
- c) Complications in Intra-uterine fetal death.
- d) Benefits of breast feeding.

**Group-D**

4. Answer briefly *any two* of the following: 2 x 5

- a) Iron therapy is essential during pregnancy – Justify
- b) Partograph is a suitable method to monitor labour – Comment
- c) Active management of third stage of labour should be done in all cases – Justify
- d) Eclampsia is preventable to a large extent – Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define post-menopausal bleeding. What are the causes of post-menopausal bleeding? Give an outline of its management. 1+4+5

**Group-B**

2. A 15 year old girl complains of amenorrhoea with periodic pain in lower abdomen. How would you proceed to diagnose the case? What will be the management of such a case? 5+5

**Group-C**

3. Write short notes on (*any two*) of the following: 2 x 5

- a) Vaginal trichomoniasis.
- b) Uterine polyp.
- c) Lymphatic drainage of uterine cervix.
- d) Tubercular endometritis.

**Group-D**

4. Answer briefly *any two* of the following: 2 x 5

- a) Healthy ovaries should be preserved in hysterectomy done for benign diseases in women aged less than 45 years – Comment
- b) Oral contraceptive pills have non-contraceptive benefits – Comment.
- c) Laparoscopy is more informative than HSG in evaluation of female infertility – Justify
- d) Diagnosis of ovarian cancer is usually delayed – Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A primigravida at 34 weeks of gestation with vaginal bleeding attends hospital emergency. Enumerate the possible causes. How will you diagnose it? What will be the management of such case? 2+4+4

**Group B**

2. Define normal labour. What are the different stages of labour? How will you monitor the progress of labour? What precautions are taken during delivery of head in vertex position? 2+2+4+2

**Group C**

3. Write short note on (*any two*): 2x5

- a) Retained placenta.
- b) Long Uterine Segment.
- c) Apgar Score.
- d) Vulva hematoma.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Maternal mortality is mostly preventable - Justify
- b) All pregnant women should undergo routine ultrasound in 2nd trimester (18-12) week - Justify
- c) Screening for HIV infection should be done on all pregnant women - Justify
- d) External cephalic version still has got a place in the management of breech presentation - Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the different types of genito-urinary fistula? What are its cause? How will you diagnose a case of V.V.F.? 2+4+4

**Group-B**

2. What is dysmenorrhoea? How will you differentiate between primary and secondary dysmenorrhoea? How will you treat a case of primary dysmenorrhoea? 1+4+5

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Support of the pelvic organs.
- b) Mucinous cystadenoma.
- c) Contraindications of OCP.
- d) Causes of primary amenorrhoea.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) laparoscopy is essential in gynaecological practice - Comment
- b) Male partner should be investigated first to evaluate an infertility couple - Justify
- c) Vaginal bleeding in post-menopausal women should always be investigate - Justify
- d) There is no appropriate method for screening carcinoma of ovary - Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Enumerate the causes of bleeding per vagina in early months of Pregnancy. Discuss the diagnosis of molar pregnancy and its management. 2+4+4

**Group-B**

2. Discuss the diagnosis & complications of twin pregnancy. Enumerate briefly the management of twin pregnancy in labour. 3+3+4

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Obstetric outlet.
- b) Partogram.
- c) Cord prolapse.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) All post caesarean section Pregnancy cases may not be delivered by caesarean section again-Give reasons.
- b) Magnesium sulphate is the drug of choice in the treatment of Eclampsia - Justify
- c) Active management of third stage of labour should be done in all cases - Justify
- d) Prophylactic Iron therapy should be given to all pregnant women - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What are the causes of menorrhagia. Discuss the management of uterine fibroid. 4 + 6

**Group-B**

2. What are the causes of Infertility in female partner. Discuss the methods of detection of ovulation & how to induce ovulation. 2 +4 +4

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Cervical erosion.
- b) Dermoid cyst of ovary.
- c) Cryptomenorrhoea.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Non-contraceptive use of male condoms - Discuss.
- b) Role of Laparoscopy in diagnosis & management of Endometriosis.
- c) Methods of choice of second trimester M.T.P. Justify the methods.
- d) Tumour Marker has great prognostic value in ovarian malignancy - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A primigravida of 36 weeks of gestation was admitted with convulsions and a blood pressure of 160/110 mm of Hg. What is your provisional diagnosis? How will you manage this case? 2+3+5

**Group-B**

2. Define intrauterine foetal death. Enumerate the causes of intrauterine foetal death. Outline it's management. 2+3+5

**Group-C**

3. Write short note on (*any two*): 2x5

- External Cephalic Version.
- Retained Placenta.
- Maternal Complications of multifetal pregnancy.
- Cardiovascular changes in normal pregnancy.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- All cases of placenta praevia should be delivered by caesarean section - Comment
- Forceps is losing its place to ventouse as a method of instrumental delivery - Comment
- Routine ultrasonography in all asymptomatic low risk pregnant women is not recommended - Justify
- Vaginal delivery in breech presentation is more dangerous than in vertex presentation - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the supports of uterus. Enumerate the etiological factors for Pelvic organ Prolapse. Outline the management of procidentia in a post menopausal lady. 4+3+3

**Group-B**

2. A 45 years old lady with a lower abdominal lump complains of pelvic pain. Who are the possible causes? Briefly outline the management of such a case. 3+7

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Trichomonal Vaginitis.
- b) Submucous myoma.
- c) Progesterone only Pill (POP).

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Cervical Screening can effectively reduce Cancer Cervix - Justify
- b) The scope of laparoscopic surgery is enhancing - Comment
- c) Combined oral Contraceptive is the best Contraceptive option for newly married couple - Justify
- d) Age of the patient should be considered before undertaking hysterectomy for benign conditions.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A multi gravida carrying 32 weeks of gestation comes to O&G Emergency with the c/o painful bleeding per vagina. Mention the diagnosis and outline the management in short. 4+6

**Group-B**

2. Define Recurrent Abortion. Outline the investigations in such a case. 2+8

**Group-C**

3. Write short note on (*any two*): 2x5

a) Bishop's Score.

b) Physiological Anaemia of Pregnancy.

c) Induction of Labour.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

a) How antenatal care can reduce maternal mortality in our country.

b) HIV testing should be done in all pregnant woman - Justify

c) Episiotomy reduces many of the gynaecological disorder - Clarify it

d) Pre-eclampsia is not preventable always whereas Eclampsia is always preventable - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define Menorrhagia. What are its causes? How would you manage a case of Menorrhagia due to fibroid uterus? 2+2+6

**Group-B**

2. Define secondary infertility. What are the causes of secondary infertility? Outline the investigation of such a case. 2+4+4

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Imperforate Hymen.
- b) Emergency Commotion.
- c) Ovarian causes of Secondary Amenorrhoea.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Any case of post-menopausal bleeding should be carefully investigated - Justify
- b) Indications of 'Dilatation Curettage' operation should not be neglected - Mention the discuss the indication.
- c) Analyse the importance of Diagnostic Laparoscopy.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A primigravida is admitted at 34 weeks pregnancy with bleeding per vagina. How will you investigate and manage such a case? 4+6

**Group-B**

2. A multigravida is admitted at 32 weeks pregnancy with a haemoglobin value of-4 gm%. Discuss investigation and management of such a ease. 3+7

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Screening for Down's syndrome in pregnancy.
- b) Non-stress test.
- c) Polyhydramnios.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) All pregnant women should be given iron and folic acid - Comment
- b) All pregnant women should undergo ultrasound in second trimester - Justify
- c) All women should be advised about early breast feeding - Why?
- e) injection betamethasone should be given to all women with preterm labour - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Enumerate causes of menorrhagia in a forty year old women. Discuss management of such a case with fibroids. 3+7

**Group-B**

2. Discuss investigation of a couple with primary infertility. Describe drugs used for ovulation induction. 5+5

**Group-C**

3. Write short note on (*any two*): 2x5

- Cervical erosion.
- Methods of 1<sup>st</sup> trimester MTP.
- Post coital contraceptive.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- All married women should undergo PAP smear examination - Justify
- Good counselling can increase contraceptive acceptance - How?
- All women with bilateral tubal block on hysterosalpingography should undergo diagnostic laparoscopy - Justify
- Prolapse of uterus is preventable - How?

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. A primigravida had assisted delivery with outlet forceps. She started severe vaginal bleeding four hours after child birth. Enumerate the causes of this bleeding. How will you manage such a patient? 2+8

**Group-B**

2. A primigravida aged 30 years attends your clinic at 32 weeks of gestation with breech presentation. How will you manage the case till birth of the baby? What injury may occur to the mother and the baby during vaginal breech delivery? 5+5

**Group-C**

3. Write short note on (*any two*): 2x5

- Face presentation.
- Daily foetal movement count beyond 36 weeks of pregnancy.
- Partogram.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- All pregnant women should be offered screening for HIV infection in early pregnancy – Justify
- Magnesium sulphate is the drug of choice in the treatment of eclampsia - Justify
- Active management of third stage of labour should be done in all cases - Justify
- Maternal mortality is mostly avoidable - Comment

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Name the cervical premalignant lesions. How do you screen these lesions? Describe the FIGO staging of carcinoma of cervix. 2+3+5

**Group-B**

2. What are the types of urinary incontinence? A primipara aged 22 years who had forceps delivery following prolonged delivery, complains of continuous leakage of urine per vaginum which started about 7 days after childbirth. Mention the likely cause and your methods to diagnosis of the condition. 5+1+4

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Pelvic part of ureter.
- b) Dermoid cyst of ovary.
- c) Complications of intra uterine contraceptive device.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Hormone replacement therapy should be advised in all post menopausal women - critically evaluate
- b) Laparoscopy is a better procedure than hystero-salpingography in evaluation of infertility - Justify
- c) Method of your choice for second trimester medical termination of presume (MTP) - Justify your choice
- d) Chemotherapy is the mainstay of treatment in chorio-carcinoma of uterus - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Obstetrics & Gynaecology**  
**Paper: I**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define Pre-eclampsia. What are the diagnostic criteria? What are immediate and remote complications? Outline a protocol of management of Eclampsia with Magnesium Sulphate. 2+2+3+3

**Group-B**

2. Define habitual abortion. How will you investigate a patient with history of habitual abortion? Briefly outline the treatment of cervical incompetence in pregnancy. 2+5+3

**Group-C**

3. Write short note on (*any two*): 2x5

- a) Lower Uterine Segment.
- b) Vulval Haematoma.
- c) Non-Stress test.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

- a) Prenatal counselling is a must - Justify
- b) External Cephalic Version has got a place in management of breech presentation - Critically evaluate
- c) Misoprostol has almost replaced other drugs for pregnancy termination (MTP) - Comment
- d) Twin pregnancy is a high risk pregnancy - Justify

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Obstetrics & Gynaecology**  
**Paper: II**

**Full Marks: 40**  
**Time: 2 hrs.**

*Use separate answer scripts for each group*  
*Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Define post menopausal bleeding. What are the causes? How you will arrive at a diagnosis in a case of post menopausal bleeding? 1+4+5

**Group-B**

2. Define secondary amenorrhoea. What are the pathological causes of secondary amenorrhoea? Mention the investigations necessary for diagnosis of PCOS. 1+4+5

**Group-C**

3. Write short note on (*any two*): 2x5

a) Lymphatic drainage of cervix.

b) LNG -IUS.

c) Solid tumours of ovary.

**Group-D**

4. Answer briefly *any two* of the following: 2x5

a) Justify the place of H.S.G. in the workup protocol of infertility.

b) Early diagnosis of ovarian cancer is still not possible - Give reasons.

c) Male partner should be investigated first in a case of infertility - Give reasons.

d) Selection of cases must be meticulous before prescribing HRT - Justify.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2018**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss the process of vitamin D absorption and metabolism. Mention the clinical and radiological features of Vitamin deficient Rickets. 5+5

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) 'Warm chain' in New born.
- b) Differentiation of Jitteriness from convulsion in Neonate.
- c) Clinical features and management of Acute Bronchiolitis in 6 months old infant.

**Group-C**

3. Write short notes on (*any three*) of the following: 3 x 4

- a) Baby of days old, mother having chickenpox
- b) MMR vaccine.
- c) Febrile convulsion.
- d) Indications of renal biopsy in Nephrotic syndrome.

**Group-D**

4. A two year old child presented in the emergency room with history of sudden onset of difficulty in breathing. What is the probable diagnosis? How will you diagnose and manage such case? 2+6

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2017**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe the functions of the different parts of a nephron. Mention the laboratory diagnosis of Nephrotic Syndrome. 7 +3

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

a) Late onset of Neonatal sepsis.

b) Developmental milestones of a normal child of one year.

c) Management of Hypothermia in Neonate.

**Group-C**

3. Write short notes on (*any three*) of the following: 3 x 4

a) Management of foreign body in Respiratory tract.

b) Initial steps of resuscitation of a new born.

c) IPV.

d) Features of HIV in children.

**Group-D**

4. A three year old boy has been brought to the emergency with convulsion persisting for more than 30 minutes. 2+6

a) What is the probable diagnosis?

b) Outline the management of such a patient.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2016**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe the functions of the different parts of a nephron. Mention the laboratory diagnosis of Nephrotic Syndrome. 7 +3

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Late onset of Neonatal sepsis.
- b) Developmental milestones of a normal child of one year.
- c) Management of Hypothermia in Neonate.

**Group-C**

3. Write short notes on (*any three*) of the following: 3 x 4

- a) Management of foreign body in Respiratory tract.
- b) Initial steps of resuscitation of a new born.
- c) IPV.
- d) Features of HIV in children.

**Group-D**

4. A three year old boy has been brought to the emergency with convulsion persisting for more than 30 minutes. 2+6

- a) What is the probable diagnosis?
- b) Outline the management of such a patient.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2015**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Name the common causes of generalised oedema in children. Describe the pathophysiology of oedema in children. 2+8

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

a) Phototherapy in neonates.

b) Write your plan of feeding of a premature very low birth weight new born baby.

c) Developmental milestones achieved at 9 months of age.

**Group-C**

3. Write short notes on (*any three*) of the following: 3 x 4

a) M.M.R vaccine.

b) Kangaroo mother care.

c) Skeletal changes in Rickets.

d) Treatment of infected Scabies.

**Group-D**

4. A 3 year old child presented in emergency room with history of fever and cough for 3 days and respiratory distress for one day. Enumerate the common differential diagnosis for the case. How will you approach the case to arrive at a definite diagnosis? 3+5

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2014**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe the formation and circulation of CSF in brain. Describe the clinical features of raised intracranial pressure of a 6 years old child. Give an outline of treatment of such a patient. 3+3+4

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Hypoglycemia in neonate.
- b) Haemorrhagic disease of new born.
- c) Enumerate the vaccines that can be given to an unimmunized 2 years old child.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Modified Jones Criteria.
- b) Pneumatocele.
- c) Common causes and laboratory diagnosis of iron deficiency anaemia in children.
- d) Causes and clinical features of hyponatremia.

**Group-D**

4. A 6-year-old girl child is admitted with hematuria, moderate oedema and headache. Mention the possible differential diagnosis. How will you evaluate such a case to reach to a definite diagnosis? 2+6

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2013**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Pathophysiology of large VSD and the future changes in haemodynamics if remain untreated. Mention the complications of VSD. Outline the treatment of VSD with CCF. 5+3+2

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Kangaroo Mother Care.
- b) Clinical features and laboratory investigation of Dengue fever in children.
- c) Neonatal Sepsis screening.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Utility of growth chart.
- b) Rabies Prophylaxis.
- c) Miliary tuberculosis in children
- d) Pulse polio immunization.

**Group-D**

4. A 4 years old child prescribed with h/o lever for 7 days and recurrent convulsion for last two days and headache. How will you proceed for diagnosis clinically and by laboratory investigations? 4 + 4

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2012**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Discuss briefly the synthesis of Thyroid hormones. Outline the clinical features and treatment of Cretinism. 5+3+2

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5
- a) Management of Cyanotic Spell in Tetralogy of Fallot.
  - b) Prevention of Hypothermia in Newborn.
  - c) Diagnosis of Rheumatic Arthritis.

**Group-C**

3. Write short notes on (*any three*): 3 x 4
- a) Pulsus-Paradoxus.
  - b) Complications of acute glomerulonephritis.
  - c) Biochemical change in Rickets.
  - d) Milestones of development in a one year old child.

**Group-D**

4. A 4 years old child presented with pallor, fever, gum bleeding and 1.5 cm. palpable spleen. Mention the diagnostic possibility and investigations to confirm diagnosis. 3+5=8

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2011**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Describe formation, circulation, absorption and composition of C.S.F. of a normal child. Give outline of management of Tubercular Meningitis of 2 years old child. 1<sup>1/2</sup>+1<sup>1/2</sup>+1<sup>1/2</sup>+1<sup>1/2</sup>+4

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Bell's palsy.
- b) Kangaroo-mother carer.
- c) Sepsis screen of newborns.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Laboratory diagnosis of Acute Glomerulonephritis.
- b) Febrile convulsion.
- c) Diet of one year old infant.
- d) Head-circumference.

**Group-D**

4. A two years old child has presented with fever for 20 days. Examination revealed some pallor, hepato-splenomegaly and purpuric spots all over the body. 5+3

- a) Write the differential diagnosis.
- b) Suggest investigations to reach the final diagnosis.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2010**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Outline the Metabolism of iron in the body. Compare the laboratory findings of iron deficiency Anemia and Thalassemia. 4+6

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Breast milk versus Cow's milk.
- b) Developmental milestones of one year old child.
- c) Urinary findings of acute post streptococcal glomerulonephritis.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Transient Tachypnea of new born.
- b) Clinical presentation and management of Acute Bronchiolitis.
- c) OPV versus IPV.
- d) Photo Therapy.

**Group-D**

4. A seven year old with History of exchange transfusion in neonatal period, presents with Haematemesis . Physical examination is unremarkable except for splenomegaly (6 cm).

What is your differential Diagnosis? Describe the steps to the management of this child. 1+7

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2009**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. Give an outline of bilirubin metabolism. Describe the underlying mechanism for physiological jaundice in the new-born. 6+4

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Causes of failure of breast feeding?
- b) Routine care of newborn in the delivery room.
- c) Clinical features and treatment of scabies in children.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Rheumatic chorea.
- b) Laboratory evaluation of ascites of a child.
- c) Tuberculin test.
- d) Vascular purpura.

**Group-D**

4. A four years old child has been brought to the emergency with convulsion persisting for more than 30 minutes. How you will diagnose the case? Briefly narrate the management of the case.

**THE WEST BENGAL UNIVERSITY of HEALTH SCIENCES**  
**M.B.B.S. 3<sup>rd</sup> Professional Part –II Examination, 2008**

**Subject: Paediatrics including Neonatology**

**Time: 2 hrs.**

**Full Marks: 40**

*Use separate answer scripts for each group  
Attempt all questions. The figures in the margin indicate full marks.*

**Group-A**

1. What is glomerular filtration? How it is affected in acute Post streptococcal glomerulonephritis? Describe the underlying pathogenic mechanism for the clinical picture of acute PSGN? 1+3+6

**Group-B**

2. Write briefly on the following (*any two*): 2 x 5

- a) Give an outline of the clinical features of neonatal sepsis.
- b) Describe briefly the Complications of low birth weight (LBW) babies.
- c) Write in short the indications and complications of phototherapy.

**Group-C**

3. Write short notes on (*any three*): 3 x 4

- a) Dietary management of severe Protein Emergency Malnutrition (PEM).
- b) Congenital hypothyroidism.
- c) Clinical features of pyogenic meningitis in children.
- d) Complications of Ventricular Septal Defect (VSD).

**Group-D**

4. A 4 years old boy was presented at the emergency room with acute onset of cough and respiratory distress. He has no fever. His father also suffers from recurrent episodes of similar problem. The child was admitted three times with similar complications in the preceding one year. What is your most probable diagnosis? How will you manage the condition? 1+7