

APRIL - 2001

[KD 054]

Sub. Code : 1759

M.Ch. DEGREE EXAMINATION

(Higher Specialities)

Branch VI — Surgical Gastroenterology and Proctology

(Revised Regulations)

**Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY CONTROVERSIES AND CURRENT
CONCEPTS**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Evaluate the merits and demerits of preoperation biliary drainage with reference to the pathophysiology and complications. (30)
2. Discuss the controversies and current status of interventional endoscopic treatment for pancreatic disorders and related complications. (30)
3. Write notes on : (4 × 10 = 40)
 - (a) Controversies in adjuvant therapy for gastric cancer
 - (b) Focal Nodular Hyperplasia of liver
 - (c) Pancreatic trauma
 - (d) Laparoscopic cysto-gastrostomy.

NOVEMBER - 2001

[KE 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY CONTROVERSIES AND CURRENT
CONCEPTS

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Discuss the current status of Trans-Hiatal resection in the treatment of carcinoma of lower third of oesophagus. (30)
 2. Discuss the medical and surgical management of gastro-intestinal tuberculosis. (30)
 3. Write notes on : (4 × 10 = 40)
 - (a) Adjuvant therapy in rectal cancer
 - (b) Nonoperative management of solid organ injuries
 - (c) Caroli's disease
 - (d) High perianal fistula.
-

MARCH - 2002

[KG 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology

**Paper III — SURGICAL GASTROENTROLOGY AND
PROCTOLOGY CONTROVERSIES AND CURRENT
CONCEPTS**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Discuss various techniques of pancreatico-enteric anastomosis after pancreatic resection. (30)
2. Discuss the role of D3 dissections, as advocated by the Japanese, in the management of gastric cancer. (30)
3. Write notes on : (4 × 10 = 40)
 - (a) Minimally invasive surgery for cancer.
 - (b) Non surgical management of hydatid disease.
 - (c) Endoscopic management of benign biliary stricture.
 - (d) Enteral versus parenteral nutrition.

APRIL - 2004

[KK 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY, CONTROVERSIES AND CURRENT
CONCEPTS

Time : Three hours

Maximum : 100 marks

Theory : Two hours and
Forty minutes

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

A. Essay :

(2 × 15 = 30)

(1) Discuss the relative role of sclerotherapy, surgical porta-systemic shunts and TIPS in the secondary prophylaxis of bleeding from gastro oesophageal varices based on published evidence.

(2) Evaluate the resectional and drainage procedures in the surgical treatment of chronic pancreatitis.

B. Write short notes on :

(10 × 5 = 50)

- (1) Biliary stenting in benign diseases.
- (2) Haemangioma of liver.
- (3) Surgery for GERD.
- (4) Mesorectal excision.
- (5) Laparoscopy in post operative adhesions.
- (6) Pancreatic ascites.
- (7) GIST.
- (8) Non operative management of upper GI bleeding.
- (9) Somatostatin and analogues in GI disorders.
- (10) Advantages of enteral nutrition.

AUGUST - 2004

[KL 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

**Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY, CONTROVERSIES AND CURRENT
CONCEPTS**

Time : Three hours

Maximum : 100 marks

**Theory : Two hours and
forty minutes**

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

I. Essay : (2 × 15 = 30)

1. Do you prefer classical Whipple's resection or Pylorus preserving Whipple in an operable carcinoma Head of pancreas? Give reasons.

2. Give your views of CBD stones – which approach, when?

II. Write short notes on :

(10 × 5 = 50)

- (1) Juvenile Polyposis Syndrome.**
- (2) Upper oesophageal sphincter.**
- (3) Portal Biliopathy.**
- (4) Roux Syndrome.**
- (5) Nesidioblastosis.**
- (6) Biliary stents.**
- (7) Sarfeh shunt.**
- (8) Pouchitis.**
- (9) Difficult Perineal Wound.**
- (10) Gastric Mucormycosis.**

FEBRUARY - 2005

[KM 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

**Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY, CONTROVERSIES AND CURRENT
CONCEPTS**

Time : Three hours

Maximum : 100 marks

**Theory : Two hours and
forty minutes**

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

I. Essay :

(2 × 15 = 30)

(1) Discuss the role of surgery in ulcerative colitis – current concepts and controversies.

(2) Discuss the various surgical approaches in the Management of carcinoma stomach with special reference to current concepts and controversies.

II. Write short notes on :

(10 × 5 = 50)

- (a) Laparoscopic choledocholithotomy**
- (b) Pre surgical management of hilar cholangiocarcinomas.**
- (c) Role of intraop ultrasound in liver surgery**
- (d) Management of recurrent pyogenic cholangitis. (R.P.C)**
- (e) Hepatoblastoma.**
- (f) Management of pancreatic pseudocysts current concepts and controversies**
- (g) Management of gastrinomas current concepts**
- (h) Management of early gallbladder cancer – current concepts**
- (i) Biliary injuries – delayed management.**
- (j) Surgical management of pancreatic necrosis.**

AUGUST - 2006

[KP 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

**Paper III — SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY, CONTROVERSIES AND CURRENT
CONCEPTS**

Time : Three hours

Maximum : 100 marks

**Theory : Two hours and
forty minutes**

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

I. Essay questions :

(1) Critically evaluate D1 and D2 gastrectomy in the curative treatment of operable gastric cancer. (20)

(2) Discuss the pathogenesis, manifestations, diagnosis and management of infection in acute pancreatitis. (15)

(3) Discuss the role of splenic preservation in Trauma (15)

II. Short notes :

(6 × 5 = 30)

(a) Pancreatic stenting.

(b) Postoperative analgesia.

(c) Evaluation of acute corrosive injuries of oesophagus.

(d) Postoperative pancreatic leak.

(e) Ectopic varices.

(f) Surgical Vs non-surgical methods of treatment of achalasia cardia.

FEBRUARY - 2007

[KQ 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION,

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

**Paper III — SURGICAL GASTROENTEROLOGY
RELATED TO HEPATO BILIARYS AND
PANCREATIC DISEASES**

Time : Three hours

Maximum : 100 marks

**Theory : Two hours and
forty minutes**

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

I. Essay :

- 1. Discuss the current management options in a case of hepatocellular Carcinoma in a Cirrhotic. (20)**
- 2. Discuss the merits and demerits of pre-operative drainage in malignant biliary obstruction. (15)**
- 3. Discuss the management of Pseudocyst of the pancreas. (15)**

II. Short notes

(6 × 5 = 30)

- (1) MRCP Vs. ERCP.**
 - (2) Corrosive gastric stricture management.**
 - (3) Asymptomatic Gall stone disease.**
 - (4) Surgery for morbid obesity.**
 - (5) Classification of Choledochal CYST.**
 - (6) Pouch-vaginal fistula.**
-

August-2007

[KR 054]

Sub. Code : 1753

M.Ch. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch VI — Surgical Gastroenterology and Proctology

**Paper III — SURGICAL GASTROENTEROLOGY
RELATED TO HEPATO BILIARYS AND
PANCREATIC DISEASES**

Time : Three hours

Maximum : 100 marks

**Theory : Two hours and
forty minutes**

Theory : 80 marks

M.C.Q. : Twenty minutes

M.C.Q. : 20 marks

Answer ALL questions.

I. Essay :

1. Critically evaluate non-surgical against surgical interventions in chronic pancreatitis and its complications. (20)

2. Discuss clinical features diagnosis and management of pyogenic liver abscess. (15)

3. Discuss the current concepts in the management of choledocholithiasis. (15)

II. Write Short notes on: (6 × 5 = 30)

(a) "Hanging technique" for liver resections.

(b) Chromogranin estimation.

(c) Liver transplanation in malignancies.

(d) Pancreaticopleural fistula.

(e) Preoperative biliary drainage.

(f) Chemotherapy associated steatohepatitis (CASH).

August 2008

[KT 054]

Sub. Code: 1753

M.Ch. DEGREE EXAMINATION

(Higher Specialities)

(Revised Regulations)

**Branch VI – SURGICAL GASTROENTEROLOGY AND
PROCTOLOGY**

**Paper III – SURGICAL GASTROENTEROLOGY RELATED
TO HEPATO BILIARY & PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three hours

Maximum: 100 Marks

ANSWER ALL QUESTIONS

Draw suitable diagrams wherever necessary.

I. Essays:

(2 x 20 = 40)

1. Discuss the role and status of non surgical methods in the treatment of hepatocellular carcinoma.
2. Discuss the management of pancreatic head mass.

II. Write short notes on:

(10 X 6 = 60)

1. Incidental gall bladder cancer detected at laparoscopic Cholecystectomy.
 2. Current role of ERCP in biliary surgery.
 3. Asymptomatic gall stones.
 4. Ectopic varices.
 5. Liver cell adenoma.
 6. Domino liver transplant.
 7. Pancreatic ascites.
 8. Postoperative pancreatic leak.
 9. Diagnosis of insulinoma.
 10. Liver transplantation in Hepato cellular carcinoma.
-

August 2009

[KV 054]

Sub. Code: 1753

M.Ch. DEGREE EXAMINATIONS

**(Super Specialities)
(Revised Regulations)**

Branch VI – Surgical Gastroenterology and Proctology

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATO BILIARY & PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three hours

Maximum: 100 Marks

ANSWER ALL QUESTIONS

Draw suitable diagrams wherever necessary.

I. Essays:

2 x 20 = 40 Marks

1. Discuss the current management options in hepato cellular carcinoma in a cirrhotic.
2. Discuss the evaluation of a cystic neoplasm of pancreas.

II. Write short notes on:

10 X 6 = 60 Marks

1. Asymptomatic gallstones.
2. Pseudocyst in chronic pancreatitis.
3. Diagnosis of insulinoma.
4. Anhepatic phase of liver transplantation.
5. Pancreatic ascites.
6. Gall bladder polyp.
7. Distal spleno-renal shunt.
8. Laparoscopic management of pancreatic necrosis.
9. Octreotide in GI surgery.
10. Surgical exposure of left hepatic vein.

February 2010

[KW 054]

Sub. Code: 1753

M.Ch. DEGREE EXAMINATIONS

**(Super Specialities)
(Revised Regulations)**

**Branch VI – Surgical Gastroenterology and Proctology
(Common to all candidates)**

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATO BILIARY AND PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three hours

Maximum: 100 Marks

ANSWER ALL QUESTIONS

Draw suitable diagrams wherever necessary.

I. Essays:

2 x 20 = 40 Marks

1. Discuss the pathophysiology, diagnosis and treatment of noncirrhotic portal fibrosis.
2. Discuss in detail aetiopathogenesis, pathology and treatment of tropical pancreatitis.

II. Write short notes on:

10 X 6 = 60 Marks

1. Grading of pancreatic injury.
2. Segment IV resection.
3. Central pancreatectomy.
4. Serous cystadenoma pancreas.
5. Radio frequency ablation of liver tumours.
6. Investigation of a pancreatic head mass.
7. Postoperative liver failure.
8. TACE.
9. Timing of surgery in biliary injuries.
10. Laparoscopic surgery in hydatid disease of liver.

August 2011

[KZ 054]

Sub. Code: 1753

**MASTER OF CHIRURGIAE (M.Ch.) DEGREE EXAMINATION
(SUPER SPECIALITIES)**

BRANCH VI – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**SURGICAL GASTROENTEROLOGY RELATED TO HEPATOBILIARY
AND PANCREATIC DISEASES**

Q.P. Code: 181753

**Time : 3 hours
(180 Min)**

Maximum : 100 marks

Answer ALL questions in the same order.

I. Elaborate on :

**Pages Time Marks
(Max.) (Max.) (Max.)**

- | | | | |
|--|----|----|----|
| 1. Describe the classification, clinical features and management of Choledochal cyst. | 11 | 35 | 15 |
| 2. Describe the pathology, clinical features and management of carcinoma head of pancreas. | 11 | 35 | 15 |

II. Write notes on :

- | | | | |
|---|---|----|---|
| 1. Haemosuccus pancreaticus. | 4 | 10 | 7 |
| 2. Hepatic adenoma. | 4 | 10 | 7 |
| 3. Gall bladder polyps. | 4 | 10 | 7 |
| 4. Management of pancreatic necrosis. | 4 | 10 | 7 |
| 5. OPSI. | 4 | 10 | 7 |
| 6. Retained CBD stones. | 4 | 10 | 7 |
| 7. Tumour markers in hepato-cellular carcinoma. | 4 | 10 | 7 |
| 8. Portal biliopathy. | 4 | 10 | 7 |
| 9. Budd-Chiari syndrome. | 4 | 10 | 7 |
| 10. Hepato pulmonary syndrome. | 4 | 10 | 7 |

[LB 054]

AUGUST 2012

Sub. Code: 1753

M.Ch – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

Paper – III SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES

Q.P. Code: 181753

Time : 3 hours
(180 Min)

Maximum : 100 marks

Answer ALL questions in the same order.

I. Elaborate on :

Pages (Max.)	Time (Max.)	Marks (Max.)
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- | | | | |
|--|----|----|----|
| 1. Discuss in detail the management strategy of a patient with Stage II Right Colon cancer with Solitary liver metastases in segment 7. | 16 | 35 | 15 |
| 2. Describe the Pre-operative workup of a Donor for Living Donor Liver Transplant (LDLT) and various techniques of harvesting the graft. | 16 | 35 | 15 |

II. Write notes on :

- | | | | |
|---|---|----|---|
| 1. Points for and against Pre-operative Biliary drainage. | 4 | 10 | 7 |
| 2. Evaluation of incidentally detected large cystic lesion in Pancreatic head region. | 4 | 10 | 7 |
| 3. Grading of Liver Trauma and indication for non-operative management. | 4 | 10 | 7 |
| 4. How to reduce morbidity in Liver resection in Cirrhotic. | 4 | 10 | 7 |
| 5. Primary Sclerosing Cholangitis and associated G.I. problems. | 4 | 10 | 7 |
| 6. Chronic Rejection in Transplant Surgeries. | 4 | 10 | 7 |
| 7. Anatomical aspects of Segmental Pancreatectomy. | 4 | 10 | 7 |
| 8. Incidentally detected Gallstones. How to approach? | 4 | 10 | 7 |
| 9. Indication for surgery in Broncho-Biliary Fistula. | 4 | 10 | 7 |
| 10. Etiology and rapid evaluation of Hemobilia. | 4 | 10 | 7 |

(LD 054)

AUGUST 2013

Sub. Code:1753

**M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY
Paper – III SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P.Code: 181753

Time: Three Hours

Maximum: 100 marks

I. Elaborate on:

(2X15=30)

1. Liver resection in hilar cholangiocarcinoma – indications, evaluation, preop planning, technique and complications.
2. Postoperative Biliary Injuries – Discuss the types, classification and management strategies.

II. Write notes on:

(10X7=70)

1. Transjugular Intrahepatic portosystemic shunts – Indications and technique.
2. Liver resection in cirrhotic liver – Factors governing the outcome.
3. Insulinoma – Evaluation and treatment options.
4. Malignant Cystic Tumours of Pancreas – Classification and treatment options.
5. Post transplant bilioenteric anastomosis – Types, complications and its management.
6. Laparoscopic CBD exploration – Describe the technique.
7. Preoperative portal vein embolization in hepatic resections – Indications, technique and outcome.
8. Portal Vein Resections in Pancreatic Cancer – Surgical Technique and survival benefits.
9. Discuss duodenum preserving pancreatic head resections.
10. Discuss the various strategies to improve the graft survival in liver transplantation.

[LF 054]

AUGUST 2014

Sub. Code: 1753

M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q. P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

Answer ALL questions in the same order.

I. Elaborate on:

(2 x 15 = 30)

1. Discuss the management of Post Pancreatectomy complications.
2. Compare Deceased Donor with Living donor liver transplantation.

II. Write notes on:

(10 x 7 = 70)

1. Transarterial therapies for Hepatocellular carcinoma
2. Borderline resectable pancreatic carcinoma
3. Primary prophylaxis for oesophageal varices
4. Future liver remnant
5. Partial cholecystectomy
6. Gall bladder perforation
- 7 . Parenchyma conserving Liver Resection
8. Cyst fluid biomarkers in Cystic lesions, Pancreas
9. Bilhemia
10. Mechanism of reperfusion injury.

M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P.Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: (2 x 15 = 30)

1. Discuss the optimization, conduct of and perioperative management of a Child-Pugh A cirrhotic patient scheduled to undergo Low Anterior resection for rectal carcinoma.
2. Discuss the management of Pancreatic injury sustained from Blunt abdominal trauma.

II. Write notes on: (10 x 7 = 70)

1. Bilio - enteric fistula.
2. Autoimmune pancreatitis.
3. Port site Infection.
4. Staging of Extra hepatic Cholangio Carcinoma.
5. Von – Meyenbergh complex.
6. Primary biliary stones.
7. Gallbladder cancer detected post Laparoscopic cholecystectomy.
8. Management of asymptomatic gallstones.
9. Gallbladder Polyp.
10. Acalculous cholecystitis.

M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P.Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. Describe the Pre-operative workup of a Donor for Living Donor Liver Transplant (LDLT) and discuss about right lobe liver graft.
2. Discuss the role of Splenectomy for conditions other than trauma.

II. Write notes on:

(10 x 7 = 70)

1. Associating Liver Partition and Portal Vein Ligation for Stage Hepatectomy (ALPPS).
2. Budd Chiari syndrome.
3. Current management of Pancreatic Pseudocysts.
4. HIFU (High intensity focused ultrasound).
5. Caudate lobe resection.
6. Asymptomatic gall stones.
7. Anhepatic phase of Liver Transplantation.
8. Milan's criteria and beyond.
9. Islet Cell Auto transplantation.
10. Radio Frequency Ablation.

M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P.Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: **(2 x 15 = 30)**

1. Discuss the various methods for Liver parenchymal transection.
2. Discuss the current indications and methods of surgical intervention in portal hypertension.

II. Write notes on: **(10 x 7 = 70)**

1. Mesenchymal hamartoma liver.
2. Portal venous embolization.
3. Liver first approach in colorectal liver metastases.
4. Pancreatic Intraepithelial Neoplasia.
5. Management of grade V liver Injury.
6. Severe Acute Pancreatitis.
7. Step up Approach in Pancreatic Necrosis.
8. Modified Sendai criteria.
9. Management of postoperative pancreatic fistula.
10. Laparoscopic Bile duct Injury classification of Strasberg.

M.Ch. – SURGICAL GASTROENTEROLOGY AND PROCTOLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P.Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. How to approach a 3cm HCC in a cirrhotic liver?
2. Discuss the management of pancreatic head mass.

II. Write notes on:

(10 x 7 = 70)

1. IPMN.
2. Management of gastrinomas- current concepts.
3. Central Pancreatectomy.
4. NCPF.
5. Tropical Pancreatitis.
6. Lymphangioma Pancreas.
7. Portal Biliopathy.
8. Hepatorenal Syndrome.
9. Non operative therapies for liver tumours.
10. Benign Space occupying lesions of the Liver.

M.Ch. – SURGICAL GASTROENTEROLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: **(2 x 15 = 30)**

1. Discuss the management of neuro endocrine tumors of Pancreas.
2. Discuss the controversies in Whipple's pancreatico duodenectomy.

II. Write notes on: **(10 x 7 = 70)**

1. Abnormal liver function test in the early post liver transplant period.
Discuss your approach.
2. Islet cell transplantation.
3. Prophylactic treatment of splenectomized patients.
4. Discuss the management of blunt pancreatic trauma.
5. Role of Neo adjuvant therapy for pancreatic cancer.
6. Amoebic versus pyogenic liver abscess.
7. Risk of malignancy in ultrasound detected gall bladder polyps.
8. Management of suspected CBD stones - algorithmic approach.
9. Cirrhosis and perioperative Liver decompensation.
10. Prevention of bile duct injury.

(LR 054)

**NOVEMBER 2020
(AUGUST 2020 SESSION)**

Sub. Code: 1753

M.Ch. – SURGICAL GASTROENTEROLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: (2 x 15 = 30)

1. Discuss mucinous cystic neoplasms of pancreas and management guidelines
2. Post cholecystectomy bile duct strictures

II. Write notes on: (10 x 7 = 70)

1. Groove pancreatitis
2. Intrahepatic stones
3. Xanthogranulomatous cholecystitis
4. Cholangitis-scoring and management
5. NASH
6. Intrahepatic cholangiocarcinoma
7. Hypersplenism
8. ALPPS procedure
9. Portopulmonary hypertension
10. Prophylactic cholecystectomy

(MCH 0821)

AUGUST 2021

Sub. Code: 1753

M.Ch. – SURGICAL GASTROENTEROLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: (2 x 15 = 30)

1. Evaluation and management of perihilar cholangiocarcinoma.
2. Discuss post whipple's complications and management options.

II. Write notes on: (10 x 7 = 70)

1. Pancreatic ascites.
2. Autoimmune pancreatitis.
3. Post Hepatectomy liver failure.
4. Biliary ascariasis.
5. Postpancreatectomy haemorrhage.
6. Borderline respectable pancreatic cancer.
7. ABO incompatible liver transplantation.
8. Caroli's disease.
9. Benign bile duct strictures.
10. Budd Chiari syndrome.

THE TAMIL NADU DR.M.G.R. MEDICAL UNIVERSITY

(MCH 0822)

AUGUST 2022

Sub. Code: 1753

M.Ch. – SURGICAL GASTROENTEROLOGY

**Paper III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY AND PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. Discuss in detail Classification and management of Bile duct injury and critically analyse delayed verses early repair.
2. Non selective shunts in Portal hypertension.

II. Write notes on:

(10 x 7 = 70)

1. Genetics of pancreatic ductal adeno carcinoma.
2. Tokyo guidelines for diagnosis of Cholangitis.
3. Microwave Ablation.
4. Post cholecystectomy diarrhoea.
5. Local Ablative therapy for locally advanced Pancreatic cancer.
6. Hannover classification of bile duct injury.
7. Radical Antegrade Modular Pancreatosplenectomy.
8. Role of Micro RNA in liver regeneration.
9. Technique of isolated Hepatic perfusion for extensive liver cancer.
10. Molecular Adsorbant recycling system.

THE TAMIL NADU DR.M.G.R. MEDICAL UNIVERSITY

(MCH 0124)

JANUARY 2024

Sub. Code: 1753

M.Ch. – SURGICAL GASTROENTEROLOGY

**PAPER III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY & PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. Elevation and management of Choledochal cyst.
2. Complications of chronic pancreatitis.

II. Write notes on:

(10 x 7 = 70)

1. BCLC staging in HCC.
2. IOUS in HBP Surgery.
3. Appleby procedure.
4. CUSA in liver surgery.
5. Post reperfusion syndrome.
6. Small for size syndrome.
7. Haemobilia.
8. Pancreatic duct disruption.
9. Pulmonary syndromes in liver disease.
10. IgG4 cholangitis.

THE TAMIL NADU DR.M.G.R. MEDICAL UNIVERSITY

(MCH 0225)

FEBRUARY 2025

Sub. Code: 1753

M.Ch. BRACH VI – SURGICAL GASTROENTEROLOGY

**PAPER III – SURGICAL GASTROENTEROLOGY RELATED TO
HEPATOBIILIARY & PANCREATIC DISEASES**

Q.P. Code: 181753

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. Pancreatic Cystic Neoplasms.
2. Bile duct injuries – Evaluation and management.

II. Write notes on:

(10 x 7 = 70)

1. Minimally Invasive Liver Resection.
2. Non-Alcoholic Fatty Liver Disease (NAFLD) and its surgical implications.
3. Contrast-enhanced ultrasound (CEUS) for hepato-pancreato-biliary (HPB) surgery.
4. Hepatotrophic factors.
5. Frantz tumor.
6. Haemosuccus pancreaticus.
7. Autoimmune pancreatitis.
8. Selective shunts for portal hypertension.
9. Intrahepatic cholangiocarcinoma.
10. Triangle operation.
