

M.B.B.S. THIRD PROFESSIONAL PART-I EXAMINATION, MARCH-2025

OTORHINOLARYNGOLOGY (E.N.T.)

[Time allotted: Three hours]

SET-A

[Max Marks: 100]

Q. 1. Multiple choice questions (Darken the single best response in OMR sheet. Time allotted 20 minutes) (20 x 01= 20)

1. Which of the following is a common cause of nasal obstruction?
 - a. Ca maxilla
 - b. Deviated nasal septum
 - c. Rhinosporidiosis
 - d. Atrophic rhinitis
2. The Eustachian tube connects the middle ear to which of the following?
 - a. Nasal cavity
 - b. Nasopharynx
 - c. Larynx
 - d. Sinus cavity
3. In which condition would you expect to see a perforated tympanic membrane with purulent ear discharge?
 - a. Acute suppurative Otitis media
 - b. Otitis externa
 - c. Otosclerosis
 - d. Serous otitis media
4. The nasal mucosa is lined with which type of epithelium?
 - a. Stratified squamous epithelium
 - b. Simple cuboidal epithelium
 - c. Ciliated pseudostratified columnar epithelium
 - d. Transitional epithelium
5. Which of the following is NOT a function of the nasal sinuses?
 - a. Lightening the weight of the skull
 - b. Moistening the air
 - c. Producing mucus
 - d. Aiding in speech resonance
6. Which of the following is most commonly responsible for anterior epistaxis (nosebleeds)?
 - a. Sphenopalatine artery
 - b. Facial artery
 - c. Anterior ethmoidal artery
 - d. Kiesselbach's plexus
7. The nasal cycle refers to:
 - a. The alternation of airflow between the left and right nostrils
 - b. The process of mucus production
 - c. The movement of cilia in the nasal mucosa
 - d. The time taken for the olfactory senses to recover
8. Which of the following is NOT a typical characteristic of allergic rhinitis?
 - a. Sneezing
 - b. Clear nasal discharge
 - c. Nasal congestion
 - d. Fever
9. The primary treatment for a patient diagnosed with nasal polyps is:
 - a. Systemic corticosteroids
 - b. Antibiotics
 - c. Nasal decongestants
 - d. NSAIDs
10. Which of the following is a known risk factor for the development of nasal and sinus cancers?
 - a. Chronic exposure to second-hand smoke
 - b. Chronic allergic rhinitis
 - c. Nasal polyps
 - d. Exposure to industrial chemicals like formaldehyde
11. What is the most likely cause of a unilateral, foul-smelling nasal discharge in a 2 years old child?
 - a. Foreign body
 - b. Acute bacterial sinusitis
 - c. Chronic rhinosinusitis
 - d. Allergic rhinitis
12. The most common cause of acute otitis media in children is:
 - a. Streptococcus pneumoniae
 - b. Haemophilus influenzae
 - c. Staphylococcus aureus
 - d. Moraxella catarrhalis
13. The most common cause of chronic otitis media is:
 - a. Viral infections
 - b. Bacterial infections
 - c. Fungal infections
 - d. Allergies
14. The Rinne test in a patient with conductive hearing loss will show:
 - a. Negative result (bone conduction > air conduction)
 - b. Positive result (air conduction > bone conduction)
 - c. No change in hearing
 - d. No lateralization of sound
15. The term "tinnitus" refers to:
 - a. Ear discharge
 - b. Ringing or buzzing in the ears
 - c. Hearing loss
 - d. Ear pain
16. Which of the following is NOT typically associated with Meniere's disease?
 - a. Vertigo
 - b. Tinnitus
 - c. Hearing loss
 - d. Nasal congestion
17. Conductive hearing loss is seen in which of the following
 - a. Otosclerosis
 - b. Noise induced hearing loss
 - c. Acoustic neuroma
 - d. Presbycusis
18. Which of the following is the most common cause of sensorineural hearing loss in the elderly?
 - a. Otosclerosis
 - b. Presbycusis
 - c. Acoustic trauma
 - d. Meniere's disease
19. The Weber test in a patient with conductive hearing loss typically shows sound lateralizing to which ear?
 - a. The normal ear
 - b. The diseased ear
 - c. Both ears equally
 - d. No lateralization
20. The most common parotid gland tumour is
 - a. Warthin tumour
 - b. Adenoid cystic Carcinoma
 - c. Pleomorphic adenoma
 - d. Hemangioma

OTORHINOLARYNGOLOGY (E.N.T.)

Note: Attempt all questions in sequence.
Draw suitable diagrams (wherever necessary)

- Q.2. Give reasons:** (5x2=10)
- Why weber is lateralized to worse hearing ear in conductive hearing loss
 - Temporalis fascia is preferred for graft in tympanic membrane repair
 - Thyroid swelling moves with deglutition
 - Why danger area of face called so
 - Why Submandibular gland swelling is bimanually palpable
- Q.3. Problem based question:**
- A 20 year old patient presented with severe left ear pain in ENT opd. He gave history of foul smelling, blood stained ear discharge and decreased hearing since 3 months. He also complained of fever and nausea since 2 days. (2+4+4=10)
- What is likely diagnosis
 - What are sign and symptoms of this condition?
 - How will you investigate and manage this patient?
- Q.4. Short notes on:** (4x6=24)
- Vocal cord nodules
 - Ethmoidal polyps
 - BERA
 - Mucormycosis
- Q.5. Structured questions:**
- Discuss etiology, signs and symptoms and management of Ca Maxilla. (10)
 - Discuss etiology, sign symptoms, investigations and treatment of otosclerosis. (10)
- Q.6. Draw a labelled diagram of:** (4x4=16)
- Anterior Neck triangles
 - Septum of nose
 - Tympanic membrane
 - Indirect laryngoscopy
