

M.B.B.S. THIRD PROFESSIONAL PART-I EXAMINATION, JANUARY-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. In which of the following conditions would you most likely experience sneezing and a runny nose?
 - a. Sinus infection
 - b. Allergic rhinitis
 - c. Pharyngitis
 - d. Tonsillitis
2. The cilia in the nasal cavity help to:
 - a. Smell odors
 - b. Move mucus and debris
 - c. Warm the air
 - d. Absorb oxygen
3. A 25-year-old patient complains of ear fullness and fluctuating hearing loss associated with episodes of vertigo. What is the most likely diagnosis?
 - a. Acoustic neuroma
 - b. Labyrinthitis
 - c. Meniere's disease
 - d. Otosclerosis
4. Which of the following is a surgery for otosclerosis?
 - a. Stapedectomy
 - b. Myringoplasty
 - c. Mastoidectomy
 - d. Tympanoplasty
5. Which of the following is a common symptom of a nasal foreign body in a child?
 - a. Chronic cough
 - b. Unilateral nasal discharge and nasal block
 - c. Recurrent epistaxis
 - d. Fever
6. The presence of a "clear, watery" nasal discharge is most often seen in which condition?
 - a. Acute bacterial rhinosinusitis
 - b. Allergic rhinitis
 - c. Chronic rhinosinusitis
 - d. Nasal polyps
7. In which condition would you expect to see a "cobblestone" appearance of the posterior pharyngeal wall and nasal mucosa?
 - a. Chronic rhinosinusitis
 - b. Rhinophyma
 - c. Acute bacterial sinusitis
 - d. Allergic rhinitis
8. Which of the following is the most likely cause of ear pain associated with chewing?
 - a. Otitis externa
 - b. Temporomandibular joint (TMJ) disorder
 - c. Acute otitis media
 - d. Cholesteatoma
9. The classic triad of Meniere's disease includes all of the following except:
 - a. Vertigo
 - b. Tinnitus
 - c. Progressive sensorineural hearing loss
 - d. Conductive hearing loss
10. A 40-year-old woman presents with episodes of vertigo triggered by head movement, lasting for seconds, and associated with no hearing loss. The most likely diagnosis is:
 - a. Meniere's disease
 - b. Benign paroxysmal positional vertigo (BPPV)
 - c. Acoustic neuroma
 - d. Labyrinthitis
11. What is the most common cause of chronic nasal obstruction and mouth breathing in children?
 - a. Foreign body
 - b. Adenoid hypertrophy
 - c. Allergic rhinitis
 - d. Deviated nasal septum
12. Which structure in the nose is responsible for increasing the surface area for air filtration and humidification?
 - a. Nasal turbinates
 - b. Nasal vestibule
 - c. Nasal septum
 - d. Olfactory epithelium
13. Which of the following conditions can result in conductive hearing loss?
 - a. Acoustic neuroma
 - b. Presbycusis
 - c. Otosclerosis
 - d. Meniere's disease
14. Which of the following is a common risk factor for mucormycosis?
 - a. Immunocompromised states (e.g., diabetes mellitus, organ transplantation)
 - b. Use of antibiotics
 - c. Viral infections like the common cold
 - d. Exposure to loud noises
15. What is the first-line treatment for mucormycosis?
 - a. Oral antifungal therapy (e.g., fluconazole)
 - b. Topical antifungal agents
 - c. Surgical debridement along with intravenous antifungal therapy (e.g., amphotericin B)
 - d. Steroid therapy
16. What is the primary cause of Noise-Induced Hearing Loss (NIHL)?
 - a. Chronic ear infections
 - b. Exposure to loud sounds or noise
 - c. Aging
 - d. Genetic mutation
17. Which of the following is Subjective test of hearing?
 - a. PTA
 - b. Tympanometry
 - c. BERA
 - d. ASSR
18. Which of the following is symptom of Obstructive Sleep Apnea (OSA)?
 - a. Daytime sleepiness
 - b. Unable to concentrate
 - c. Snoring with choking or gasping episodes during sleep
 - d. All of the above
19. Which of the following is commonly used as a diagnostic tool for Obstructive Sleep Apnea (OSA)?
 - a. Blood gas analysis
 - b. Polysomnography (sleep study)
 - c. Chest X-ray
 - d. MRI of the brain
20. Which of the following is a characteristic feature of the audiogram in a patient with Noise-Induced Hearing Loss (NIHL)?
 - a. A flat hearing loss across all frequencies
 - b. A notch in the high-frequency range (typically around 4000 Hz)
 - c. Bilateral low-frequency hearing loss
 - d. An equal loss at all frequencies

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

- Q.2. Give reasons:** (5x2=10)
- Why weber lateralizes to worse hearing ear in conductive hearing loss.
 - Temporalis fascia is preferred for graft in tympanic membrane repair
 - Thyroid swelling moves with deglutition
 - Why saddle nose deformity is more common after SMR surgery as compared to septoplasty
 - Why Mucormycosis more common in uncontrolled diabetics.
- 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** (4x6=24)
- Vocal cord nodules
 - Bell's Palsy
 - Hearing Aids
 - Adenoid hypertrophy
- Q.5. Structured questions:** (2x10=20)
- Discuss etiology, signs and symptoms and management of Ethmoidal polyps.
 - Discuss etiology, signs and symptoms, and treatment of Recurrent Tonsillitis in children.
- Q.6. Draw a labelled diagram of** (4x4=16)
- Lateral wall of nose
 - Tympanic membrane
 - Indirect laryngoscopy
 - Triangles of neck
