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Surgery & Allied

16 August 2022 (Morning)

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FCPS-1 November-22 Revision Course

- FCPS November-22 **GUESS Papers** with quick system revision!
- MCQs From 2009 to August-2022 (12 Years past papers system wise)
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- GET **PDF** of Recent **August-22 Papers**
- Quick Review of Theory (HIGH YIELD) with Pastpaper discussion.
- Live **interactive** classes (questions can be asked during class)
- Time: 9:30pm
- Class duration: 2.5 Hrs Daily

Starting Date: 3rd November

Fee: 1200rs

Seats: 20 Only*

Topic 1	CVS SYSTEM
Topic 2	RESPIRATORY SYSTEM
Topic 3	RENAL SYSTEM
Topic 4	ENDOCRINE
Topic 5	RENAL SYSTEM
Topic 6	GIT SYSTEM
Topic 7	HEMATOLOGY
Topic 8	NEUROANATOMY

Past Papers Included

Medicine & Allied 15 th August (Night)
Medicine & Allied 16 th August (Evening)
Medicine & Allied 16 th August (Night)
Medicine & Allied 17 th August (Morning)
Medicine & Allied 17 th August (Evening)
Pathology 15 th August (Morning)
Anesthesia 15 th August (Morning)
Radiology 15 th August (Evening)
Surgery & Allied 16 th August (Evening)
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- fracture of medial epicondyle of the elbow. nerve involve---->Ulnar nerve
- Lymphatic drainage of breast upper outer lateral quadrant---->Anterior axillary
- Anaphylactic shock, when compared to hypovolemic shock, has---->Cardiac output higher than normal
- Site of liver biopsy---->7th Intercostal space midaxillary
- The structure which arches over the root of left lung---->Arch of aorta
- regarding parathyroid gland---->Covered by pretracheal fascia
- clara cells present?---->Terminal bronchioles
- Live attenuated vaccine---->TB BCG
- hysterectomy for uterine fibroid. structure to have ligated is---->Ureter
- Pyogenic meningitis organism---->Streptococcus pneumoniae
- Structure behind Ovarian Fossa---->Ureter
- uterine bleeding. Vaginal US uterine thickness=30mm. dx?---->Endometrial ca
- pain in chest is not related to respiration. cause---->Myocardium
- technique for detection of variations in DNA sequence and Gene expression is---->Microarray
- conditions causes Precocious puberty?---->Estrogen secreting tumor
- structure is functional for mesonephric duct---->Ductus deferens
- PO2 30%. type of hypoxia ---->Hypoxic hypoxia
- thick loops and less mesentery fat, long vasa recta, arcade artery with few arcades. Structure is---->Jejunum
- Increases salivary secretions---->Acetylcholine
- During hysterectomy care should be done for ureter---->Passes behind broad ligament
- pituitary hormone is inhibited by hypothalamus?---->Prolactin
- hydrocephalus. most common cause---->Aqueductal stenosis
- The Pyogenic osteomyelitis is the characteristic of ?---->Brodie's abscess



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- Aspirin poisoning antidot---->Bicarbonateiv
- scnerio of megaloblastic anemia. which is the causative parasite ?---->Diphyllobothrium latum
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- houston valves are---->Transverse valves of colon
- cystic fibrosis dx---->Sweattest
- autosomal dominant disease?---->PKD
- abnormal presenceof valine residue at position number6 of beta chains. Dx---->Hemoglobin S
- Internal body environmentis mainly maintained by?---->Negative feedback
- Peripheral nerve covered by---->Epineurium
- Pt. with atrophy of thenar muscles nerve involved---->Median
- How apoptosis occurs---->Cell shrinkage ----> DNA fragmentation
- Salbutamol Mechanism of Action---->Relax bronchial smooth muscle by stimulating B2 receptors
- After lifting the lower edge of the lobe of submandibular gland, the surgeon showing an important structure for hemostasis---->Facial artery
- Aspirin inhibiting platelets aggregation by blocking pathway?---->ThromboxaneA2in platelets
- injury to lateral side of knee pain. Ligament involve---->Tibial collateral lig
- Rigor mortis occurs due to ---->Dec ATP
- radial artery injured due to ---->Scaphoid
- thyrocervical trunk---->Gives suprascapularartery
- Pain receptors are ?---->Free nerve endings
- In which blood group No blood Agglutinins are present---->AB---->
- Taste sesations carried by---->VPM
- Onset of certain mechanisms to bring back parametersto a set point---->Negative feedback



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- DOC for migraine---->Sumatrpian
- The Medial quadrant of breast drain into ?---->Internal thoracic lymph nodes
- cervical lymph nodes drain---->Internal and external iliac lymph nodes
- Max serum concentration in adults is ?---->IgG
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- Tumor suppressor gene is correct ?---->APC for colon cancer
- normally has the most prominent prepotential---->Sinoatrial node
- has clubbing and splinter hemorrhages in his nails.. Lab for ---->Blood culture
- A 55-year-old male Pt. presented to the dental OPD with the complaint of acute dental pain of lower teeth, on examination dentist revealed penetrating dental caries affecting the right mandibular molar. nerve should most suitably be anesthetized before the treatment?---->Inferior alveolar
- Cancer caused by---->Oncogene
- High output cardiac failure and cardiomyopathy occur in deficiency of---->thiamine
- Axilla bullet injury will damage---->Dorsal root section
- swelling is just below the hyoid bone and move with the protrusion of tongue. Dx---->Thyroglossal cyst
- Hook of hamate injury would damage ---->Ulnar nerve
- strongest Erythropoietin stimulant---->Hypoxia
- will decrease chances of edema ?---->Arteriolar constriction
- rupture of anterior cruciate ligament will result instability of tibia over femur. direction of instability is---->Anterior
- Mallory bodies are made up of---->Intermediate filaments
- Localized malignant tumor---->Ameloblastoma
- Largest cell in blood vessel---->Monocytes
- after Menopause presented with heavy bleeding Dx?---->Endometrial carcinoma
- Acute Pyogenic Osteomyelitis, commonly caused by---->Staph Aureus



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- Rerred pain from ureteric colic is felt in the groin due to the ---->Ilioinguinal.
- tumoris least likely to metastasize?---->Basal cell carcinoma
- corneal defects and lens prolapsed . dx---->Potter's syndrome
- Choronic hepatitis caused by---->HBV
- eversion sprain while playing. The ligament involved is---->Deltoid ligament
- Post ganglionic sympathetic nervefibers are ?---->Adrenergic
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- Medial side of knee lymphatic drainage---->Vertical group of inguinal LN
- A Post renal transplant pt presented with pneumonia not respondingto antibiotics, dx---->Pneumocystis jeruvecii
- IV fluid which increase ECF and Decrease ICF---->5% dextrose
- The First Heart sound is produced due to?---->Isovolumic contraction
- Chronic smoker Mucus secretory Glands findings---->Glands hyperplasia
- The middle meningeal artery is direct branch of artery?---->Maxillary artery
- Chlamydia causes disease ?---->Lymphgranuloma venearum
- Lymph drainage of carcinoma cervix ?---->Internal ----> external iliac
- Appendicis epiploicae are present in ---->Sigmoid colon
- On novobiocin there is clearance of 10mm. organism is haemolytic gram positive cocci.---->S Saprophyticus
- Steroids taken for three months and stopped suddenly whatwill happen---->Suppression of adrenal cortex
- marker of Ovarian CA ?---->CA125
- thick mucoid jelly like sputum. Dx---->Klebsiella
- hypertelorism with oblique palpebral fissure and ectropion on eyelid---->Crouzon syndrome
- Maple syrup urine disease caused by decrease---->Alpha ketoacid dehydrogenase
- SquamousCell Bladder carcinoma organism---->Schistosoma haematobium



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- damage to right side of linea alba Vessel leading to profuse bleeding is damaged?---->IVC
- white muscle example---->Gastrocnemius
- Best way to monitor for prognosis of ca colon---->CEAlevels
- gluteus medius is supplied by---->Superior gluteal artery
- neurotransmitter lies between dorsal root ganglion and pain inhibitory fibers---->Enkephalin
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- Most appropriate about Salivary flow Is---->Increase by nucleus present between pons and medulla
- flesh colored lesion with elevated rolled edge dx
- Tb antibodies are ---->Cell bound
- Aspirin MOA---->Thromboxain A2 Pathway
- .Third degree uterine prolapse due to---->Uterosacral ligament
- body ache with rased esr blood show monoclonal bands. Dx---->Multiple myeloma
- yellow draining abscesses from jaw organism---->Actinomycosis
- creatine level raised, urea raised pericardial friction. Common complication---->Uremic pericarditis
- feature of C. Botulinum is?---->inhibits release of ACH
- MOA of cabergoline---->D2 Agonist
- received radiation now scarring and ulceration. Dx---->Endarthritis obliterans
- V/Q Increase causes ---->Change in composition of alveolar gas
- A gardener with a round calcified enhancing lesion in lowerlobe of right lung. ---->Aspergillosis
- Metastasis of malignancy is because of ?---->Down-regulation of E-cadherin
- unable to lift her arm and comb her hair. loss of over head abduction ---->Serratus anterior



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- Green discharge from the site of the infected wound blood test showed gram-negative rod non-lactose fermenting organism is the culprit for infection?---->Pseudomonas
- lady on steroids since 12 years came for tooth extraction. First to treat ---->Hyperglycemia
- Thrombus formation triad is---->Blood stasis, endothelial damage, hypercoagulability
- Dust cells are the ?---->Alveolar macrophages
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- past history of heart disease. On autopsy thick myocardium. ?---->Coxsackie B virus
- Diagnosed Case of uremia, what will be deranged---->Increased BUN
- Tear drainage is into lacrimal sac via---->Puncta & Canaliculus
- Sentinel lymph node dissection is helpful to confirm the ?---->metastasis
- Level of cricoid cartilage in infant?---->C4
- The Mononuclear phagocyte are derived from---->Bone marrow
- 18th day of cycle. endometrial phase is---->Secretory phase
- Greater and lesser sac can communicate via---->Epiploic foramen
- nick on right side of hepatoduodenal ligament structure will be damaged?---->Bile duct
- gut which has thick loops and less mesentery fat, long vasa recta, arcade artery with few arcades. ---->Jejunum
- the most prominent prepotential---->Sinoatrial node
- organism Falciparum malaria is ?---->Amoeboid protozoa
- Localized malignant tumor---->Ameloblastoma
- When low dose Thiazide diuretic given to a cardiac pt to---->Decrease cardiac output
- PEEP increase upto 10% will cause---->Pneumothorax



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- side effect of theophyllin?---->Vomiting
- Growth of lobules & Alveoli is by---->Progesterone
- The anatomical location of Stenson's ductis---->Buccal space
- Pulsation of the femoral artery is felt at ?---->Mid inguinal point
- External anal sphincter is supplied by---->Podental nerve
- Anterior division of MMA rupture will lead to bleeding in ?---->Extradural space
- Best pulmonary function test for the asthma is---->FEV-1
- lost maximum amount of blood from---->Vein
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- sense of temperature loss but pain sensation intact lesion of---->Dorsal Root lesion
- wasting of small hand muscles but thenar muscles are spared . Segment involved---->C8 -T1 segment
- Creatinine clearance in mild renal failure ?---->60-80%
- Placenta is a barrier---->Barrier between maternal and fetal blood
- warfarin antidote---->Vit K
- The attachment liver with anterior abdominal ventral mesentery wall is through---->Falciform ligament
- most suitable cells for HLA typing---->WBC
- swelling at preauricular region biopsy needed. which to prefer---->Fine needle aspiration biopsy
- cleft palate and congenital birth defects she give history of taking drug for acne. Cause is---->Retinoic acid
- measure Renal plasma flow?---->PAH
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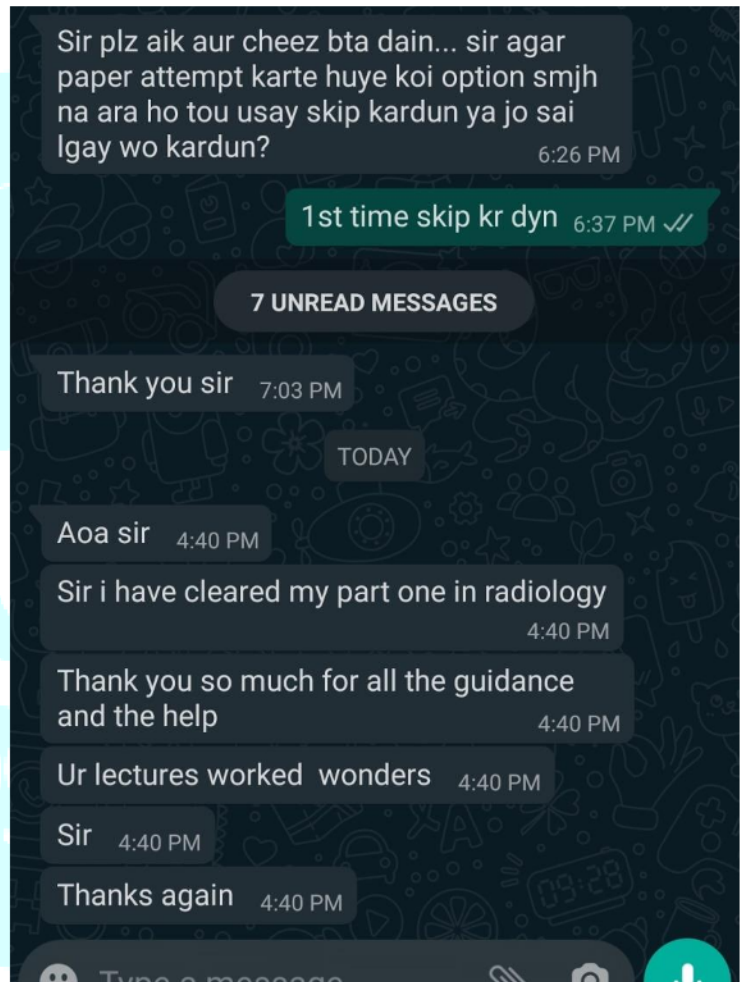
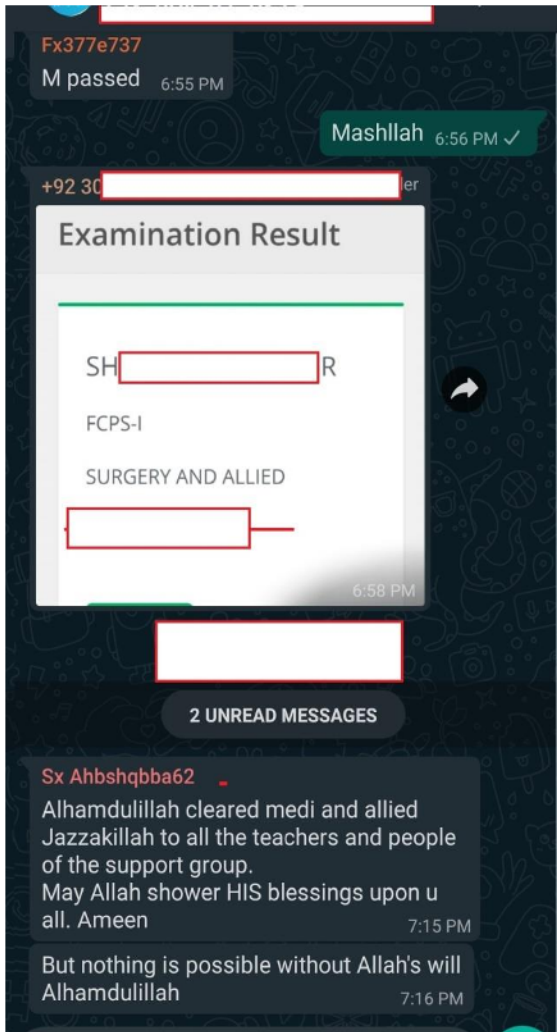
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 - FirstAid, BRS, snell anatomy, kaplan neuroanatomy etc.



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GoldStandard FCPS 4th Edition V1 (Golden 13)

Table of Content

1. CVS SYSTEM	Page#5
2. ENDOCRINE SYSTEM	Page#33
3. RENAL SYSTEM	Page#69
4. RESPIRATORY SYSTEM	Page#89
5. GIT SYSTEM	Page#113
6. Hematology	Page#145
7.	
8. ANATOMY	
a. UPPER LIMB	Page#169
b. LOWER LIMB	Page#200
c. THORAX	Page#225
d. NEUROANATOMY	Page#233
e. HEAD AND NECK	Page#270
f. ABDOMEN PELVIS	Page#281
g. Histology	Page#292
h. General Anatomy	Page#294
9. PHARMACOLOGY	Page#298
10. MICROBIOLOGY	
a. Bacteriology	Page#301
b. Virology	Page#309
c. Fungi	Page#3011

NOTE:

1. MCQs should be covered in retrograde fashion
2. All students who have ordered book will receive November papers in PDF as well via whatsapp (Do them first)
3. All written in **tabular** form or in **points** form are pastpapers
4. Each and every word from this book is from pastpapers (Except UPPER/LOWER LIMBS that has bit of explanation)
5. Students are highly advised to take Last Minute revision course starting in last 10 days of EXAMS (All points and systems will be covered 3 hr class daily)
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If you have less time first do PDF files sent by us, then open each topic just CRAM TABULAR PASTPAPERS, then open each system and cram MISC 2019-2021 papers of all systems after completing those start MISC 2009-2021 of from system one.

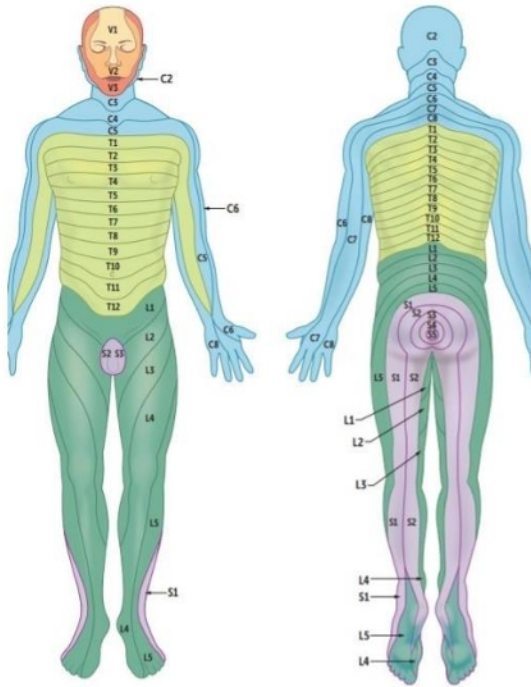




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- Superficial fascia of the scalp is mixture of → Loose areolar and adipose tissue
- The axillary sheath is a continuation of → Prevertebral fascia
- Thyroid gland moves with swallowing because it is enclosed in → Pretracheal fascia
- Trauma to one kidney without the perforation of Gerota fascia, the blood goes to → Inferiorly to the pelvis
- True regarding the posterior triangle of neck is → Roof formed by investing layer of deep cervical fascia

DERMATOMES



C2	Posterior half of skull
C3	High turtleneck shirt Diaphragm and gallbladder pain referred to the right shoulder via phrenic nerve ✓ C3, 4, 5 keeps the diaphragm alive
C4	Low-collar shirt
C6	Includes thumbs ✓ Thumbs up sign on left hand looks like
T4	✓ At the nipple ✓ T4 at the teat pore
T7	✓ At the xiphoid process 7 letters in xiphoid
T10	✓ At the umbilicus (belly button) Point of referred pain in early appendicitis
L1	✓ At the Inguinal Ligament
L4	✓ Includes the kneecaps Down on ALL 4's
S2, S3, S4	✓ Sensation of penile and anal zones S2, 3, 4 keep the penis off the floor

GREAT TOE	L4
LITTLE TOE	S1
KNEE	L4
NIPPLE	T4
UMBILICUS	T10
RING AND LITTLE FINGER	C8 RING, T1 LITTLE
THUMB	C6

anal area dermatome	s3-4
dermatome of lateral wrist	c6
dermatomy of thumb	c6

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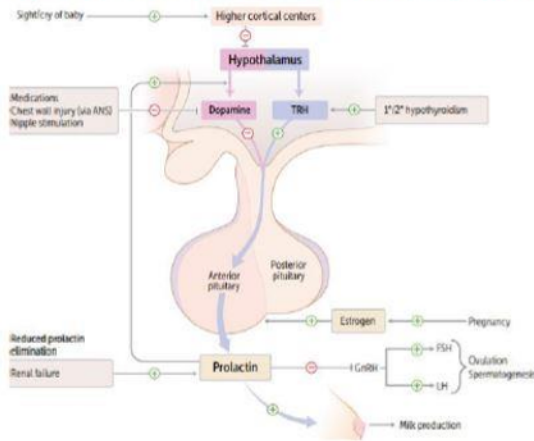
knee dermatome	l4
lower end of clavicle dermatome	c3-4
pain in calf and medial malleolus dermatome	l4





Prolactin

1. Stimulates milk production in breast; inhibits ovulation in females and spermatogenesis in males by inhibiting GnRH synthesis and release (thus LH, FSH release).
 - Hypothalamus -> Decr GnRH secretion -> Decr FSH/LH -> Decr estradiol in females, Decr testosterone in males
 - Alveolar Cells of Breast Ducts -> Milk production and release -> Lactation
 - Prolactin release dopamine which inhibits prolactin
2. Release by sucking, voice of baby
3. Prolactin secretion from anterior pituitary is tonically inhibited by dopamine Prolactin.



PAST PAPERS

Potent stimulus for prolactin release is?	Suckling reflex of baby
A 9-month pregnant presents with complaints of lactation (milky discharge). This is likely due to	Prolactin
Secretion of milk in mammary gland is due to	Prolactin
During lactation, ovulation is inhibited because of inhibition of GnRH by?	Prolactin
hormone of the anterior pituitary is under direct inhibitory control of hypothalamus?	Prolactin
During lactation, ovulation is inhibited because of inhibition of GnRH by?	Prolactin



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ENDOCARDITIS

- Nonbacterial endocarditis is seen in → Neoplasms, hypercuaguable state
- Most common cause of death in rheumatic fever → Myocarditis
- Commonly use Tri-cuspaed valvule
- common in IV-drug users
- Libman-Sack Endocarditis occurs in → SLE
- DOC is benzethins pencilline if allergic give genta+vanco
- Correct Infective endocarditis sequence
Damage valve, Thrombus, Bacteremia, Perforation (VT-BP)

Bacterial endocarditis

Acute—*S aureus* (high virulence). Large vegetations on previously normal valves. Rapid onset.

Subacute—viridans streptococci (low virulence). Smaller vegetations on congenitally abnormal or diseased valves. Sequela of dental procedures. Gradual onset.

Tricuspid valve endocarditis is associated with IV drug use (don't "tri" drugs). Associated with *S aureus*, *Pseudomonas*, and *Candida*. *S bovis* (*galloyticus*) is present in colon cancer, *S epidermidis* on prosthetic valves.

PAST PAPERS

Non thrombotic bacterial endocarditis is frequently associated with?	Terminal neoplasm
A known case of rheumatic mitrai stenosis developed fever, lassitude body ache after tooth extraction. O/E splinter haemorrhages and splenomegaly was noted Subacute endocarditis is suspected. Most likely organism on blood culture would be?	Strep viridans
Most common heart valve affected in diseases is	Tricuspid
Female pt. has valvular heart disease, such pt. are at risk of developing infective endocarditis, which organism is commonly responsible	streptococcus viridians
On Examination there are skin spots and nail bed hemorrhages on both hands & a Grade-4 Diastolic Murmur, past history is unremarkable. Patient is most likely suffering from	Infective Endocarditis
Developed fever, lassitude body ache after tooth extraction. Most likely organism on blood culture would be	Strep viridians
Infective endocarditis Patient is allergic to penicillin give medication	Vancomycin + gentamicin
School teacher who after death was diagnosed as a case of endocarditis and lymphocytic infiltration of cardiac tissues	Coxsackie virus



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True about CSF	Slightly acidic than plasma
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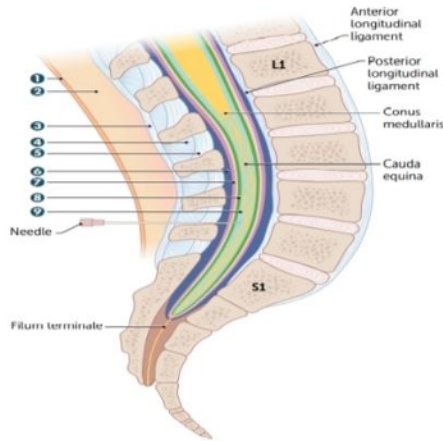
LUMBAR PUNCTURE

In adults, spinal cord ends at lower border of L1-L2 vertebrae. Subarachnoid space (which contains the CSF) extends to lower border of S2 vertebra. Lumbar puncture is usually performed between L3-L4 or L4-L5 (level of cauda equina).

Goal of lumbar puncture is to obtain sample of CSF without damaging spinal cord. To **keep** the cord **alive**, keep the spinal needle between **L3 and L5**.

Needle passes through:

- 1 skin
- 2 fascia and fat
- 3 supraspinous ligament
- 4 interspinous ligament
- 5 ligamentum flavum
- 6 epidural space (epidural anesthesia needle stops here)
- 7 dura mater
- 8 arachnoid mater
- 9 subarachnoid space (CSF collection occurs here)



Past papers

During LP after crossing flavum at L3, L4 the needle touches which structure first	Epidural space
Ideal site for lumbar puncture is	Below L4
Regarding Epidural space extension	Foramen magnum to S2
Site of Epidural anaesthesia for patient undergoing Vaginal hysterectomy is	Sacral hiatus
Spinal cord is suspended in dura by	Denticulate ligament
Structure most likely pierced by needle during lumbar puncture is	Ligamentum flavum
Which of the following structure is pierced in paramedian approach	Ligamentum flavum
The most common site of spinal anesthesia is?	Subarachnoid
Subarachnoid space ends at the level of	S2-S3
Cauda equina:	Anterior & posterior roots of spinal cord from L1 to L5

Note:

Herniation between L4-L5 affect which spinal segment?	Lumbar
Between L4 and L5 disc herniation, which spinal nerve will be affected	L5
Herniation between L4-L5 affect which spinal segment	L4

Centers of Brain

- Vomiting centre located in → Medulla
- Cough centre is present in → medulla
- Respiratory centre located in → Medulla oblongata

Past papers

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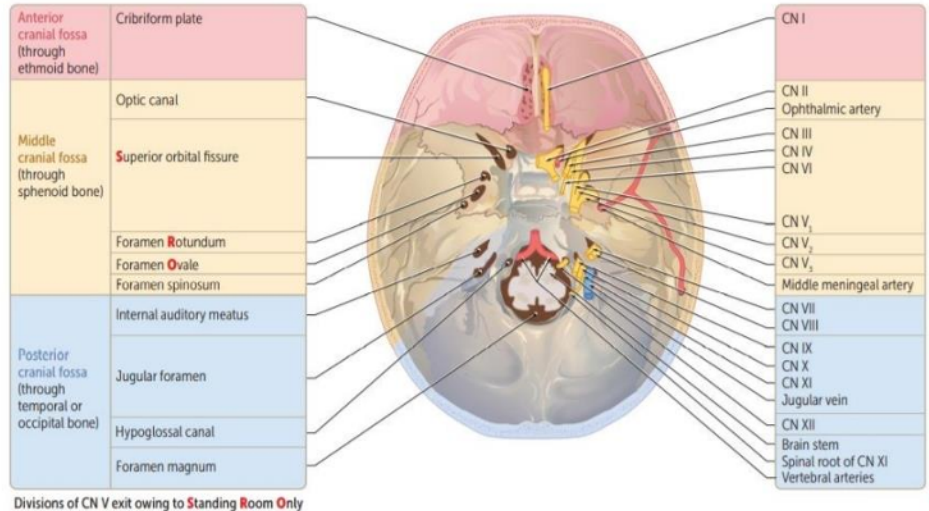




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HEAD AND NECK

Foramin of Skull



Anterior cranial Fossa (ethmoid bone)	Cribriform plate	CN 1
Middle Cranial Fossa (sphenoid bone)	Optic Canal	CN2 Ophthalmic artery, central retinal vein
	Superior orbital fissure	CN2,4,6 CN 5-V1
	Foramen rotundum	CN5-V2 → maxillary branch of trigeminal nerve
	Foramen ovale	CN5-V3 → mandibular branch of trigeminal nerve
	Foramen spinosum	Middle meningeal artery
Posterior Cranial Fossa (temporal or occipital bone)	Internal auditory meatus	CN7, 8
	Jugular foramen	CN 9,10,11 Jugular vein
	Hypoglossal canal	CN12
	Foramen magnum	Brain stem Spinal root of CN 12 Vertebral arteries

Pastpapers

270/314



Accessory meningeal artery enters through which foremen----->Ovale
Accessory nerve passes through which foramen----->Jugular foramen
Foramen Rotundum damaged which structure will be severed----->Maxillary branch of trigeminal nerve.
Lesion below foramen Ovale causes paralysis of----->Lower part of face/Jaw
Mandibular branch of Trigeminal nerve passes through----->Foramen ovale
Middle meningeal artery in the----->Foramen Spinosum
Nerve in foramen Ovale damaged nerve supply of which part will be affected----->Lower face
Vagus nerve passes through----->jugular foramen





FSH & LH

LH

Luteinizing Hormone in males acts on = Leydig cells

1. **Luteinizing** hormone acts on = **Leydig** cells to produce **Testosterone**
2. Function of LH before ovulation is=Convert most of the granuloosa cells into lutein cells

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FSH

3. **FSH** acts on =**Sertoli** cells to do **Spermatogenesis** → Related to Azoospermia
[**LighT** is **FaSt**]

 - Development of seminiferous tubules
 - Convert testosterone into estradiol
 - Helps in maturation of follicles
 - Inhibited by **INHIBIN**

Spermatogenesis is stimulated by	FSH and testosterone
LH act through:	cAMP
Hormone causing increase release of testosterone:	Luteinizing hormone
LH act on which testicular cells mostly	Leydig cells

Function of sertoli cells	help in spermiogenesis
A tall man with normal external genitalia married but no kids. Semen analysis showed azospermia. Most likely cause may be in	Sertoli cell
Sertoli cells produce	MIF (Mullerian inhibitory factor)
Married man with azospermia. Investigation of choice is	Serum FSH + LH

Function and development of seminiferous tubule requires=FSH and androgen
 Testosterone converted to estradiol by which hormone= FSH
 Conversion of testosterone to 17-beta estradiol in granuloosa cells occurs by the influence of= FSH

Before Ovulation maturation of follicles occur by action of FSH

Maturation of follicles Hormone responsible is FSH mainly and LH partly.

GnRH from hypothalamus release FSH and LH by pituitary

Which hormone stimulates release of FSH and LH	GnRH
During lactation, amenorrhea occurs due to	Inhibition of GnRH

The Sertoli cells also secrete inhibin Which stop FSH secretion

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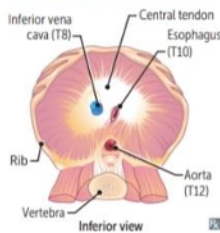




Thorax

Diaphragm

Diaphragm structures



Structures perforating diaphragm:

- At T8: IVC, right phrenic nerve
- At T10: esophagus, vagus (CN 10; 2 trunks)
- At T12: aorta (red), thoracic duct (white), azygos vein (blue) ("At T-1-2 it's the red, white, and blue")

Diaphragm is innervated by C3, 4, and 5 (phrenic nerve). Pain from diaphragm irritation (eg, air, blood, or pus in peritoneal cavity) can be referred to shoulder (C5) and trapezius ridge (C3, 4).

Number of letters = T level:

T8: vena cava (IVC)

T10: (O)esophagus

T12: aortic hiatus

I ate (8) ten eggs at twelve.

C3, 4, 5 keeps the diaphragm alive.

Other bifurcations:

- The Common Carotid bifurcates at C4.
- The Trachea bifurcates at T4.
- The abdominal aorta bifurcates at L4.

ESOPHAGUS [All are pastpapers]

Oesophagus starts at level of:	Cricoid cartilage
Esophagus narrowest at:	Cricopharyngus
Esophagus constricted at:	Where crossed by arch of aorta

Breast [All are pastpapers]

Regarding breast:	15-20 lactiferous ducts
In a female major breast duct terminate into terminal ducts from terminal ducts it forms:	Lactiferous sinus
Terminal duct in breast form:	Lobule
Breast lies on:	Pect major

LYMPHATICS OF BREAST [All are pastpapers]

Pectoral group of axillary nodes drain:	Major part of the breast
Breast CA involving lateral part of breast drain by:	Ant pectoral group
Upper lateral quadrant of breast is drained by which grp of nodes:	Anterior axillary lymph node
Lymph drainage from nipple of breast is to:	Anterior axillary nodes
Inner medial lower quadrant of breast doesnt drain into	Inf phrenic
Lymph node of inner breast drains into all except:	Inf phrenic nodes
Breast Medial / Lower compartment does not:	Inferior phrenic lymph nodes
Medial quadrant of breast drain into?	Internal thoracic nodes
Pectrol lymph nodes drain maximum:	Major part of breast
Lateral side of breast drains into:	Pectoral lymph nodes
Lateral quadrants of breast drain into which nodes?	Pectoral nodes.
Lymphatic drainage from nipple of breast is:	Ant axillary lymph node
Breast outer quadrant:	Pectoral (anterior) group





Graves Disease

Hyperthyroidism

Graves disease



Most common cause of hyperthyroidism. Thyroid-stimulating immunoglobulin (IgG, can cause transient neonatal hyperthyroidism; type II hypersensitivity) stimulates TSH receptors on thyroid (hyperthyroidism, diffuse goiter), dermal fibroblasts (pretibial myxedema), and orbital fibroblasts (Graves orbitopathy). Activation of T-cells → lymphocytic infiltration of retroorbital space → ↑ cytokines (eg, TNF-α, IFN-γ) → ↑ fibroblast secretion of hydrophilic GAGs → ↑ osmotic muscle swelling, muscle inflammation, and adipocyte count → exophthalmos **A**. Often presents during stress (eg, pregnancy). Associated with HLA-DR3 and HLA-B8.

Histology: tall, crowded follicular epithelial cells; scalloped colloid.

PAST PAPERS

57/314

A pt with exophthalmos and other hyperthyroid features and positive anti-thyroid antibodies is suggestive of	Graves disease
Exophthalmus is due to:	Inc TSI
Most common cause of hyperthyroidism:	Graves disease
Hyperthyroid, goiter and exophthalmos:	Graves disease
common cause of hyperthyroidism?	Grave's disease
What will increase in graves disease	t3
Graves ophthalmopathy:	Optic nerve compression
Vitamin D deficiency is associated with Ophthalmopathy in patients with Graves' hyperthyroidism	

Key lympho, antibody

Hypothyroidism

Hashimoto thyroiditis

Also called chronic autoimmune thyroiditis. Most common cause of hypothyroidism in iodine-sufficient regions. Associated with HLA-DR3, ↑ risk of primary thyroid lymphoma (typically diffuse large B-cell lymphoma).

Findings: moderately enlarged, **nontender** thyroid. May be preceded by transient hyperthyroid state ("Hashitoxicosis") due to follicular rupture and thyroid hormone release.

Serology: ⊕ antithyroid peroxidase (antimicrosomal) and antithyroglobulin antibodies.

Histology: Hürthle cells **A**, lymphoid aggregates with germinal centers **B**.

Postpartum thyroiditis—mild, self-limited variant of Hashimoto thyroiditis arising < 1 year after delivery.

A 40-year known Hypothyroidism female was referred to endocrinologist for a mass in neck. FNAC shows increased lymphocytes and serology was advised. What is the most probable cause?	Hashimoto thyroiditis
Female with neck swelling hypothyroid dr orders some immunologic tests?	Hashimoto thyroiditis
Female swelling in front of neck. Hypothyroid Dr orders some immunological test. What is the diagnosis?	Hashimoto thyroiditis
Diagnosis for hashimotos	Antimicrosomal and anti-thyroglobulin

A 40-year known Hypothyroidism female was referred to endocrinologist for a mass in neck. FNAC shows increased lymphocytes and serology was advised. What is the most probable cause

Hashimoto

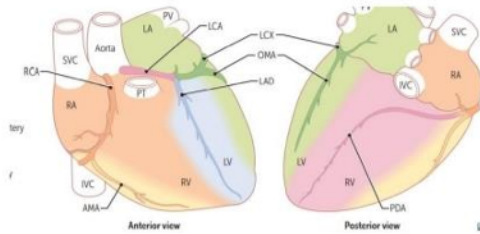


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MI ECG LEADS

INFARCT LOCATION	LEADS WITH ST-SEGMENT ELEVATIONS OR Q WAVES
Anteroseptal (LAD)	V ₁ -V ₂
Anterolateral (distal LAD)	V ₃ -V ₄
Anterolateral (LAD or LCX)	V ₅ -V ₆
Lateral (LCX)	I, aVL
Inferior (RCA)	II, III, aVF
Posterior (PDA)	V ₇ -V ₉ , ST depression in V ₁ -V ₃ with tall R waves



PAST PAPERS

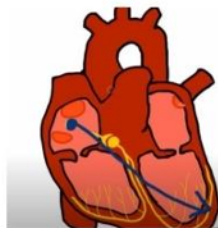
Inferior wall MI occurs due to blockage of	Right coronary artery
Post 1/3 of interventricular septum is damaged due to MI. Artery involved is?	Right coronary artery
Inferior wall MI occurs due to blockage of which artery?	Right marginal
MI of posterolateral surface of heart. Vessel involved is	Left circumflex
ECG changes in lead V4 indicated involvement of which vessel	LAD
Infarction of apex of heart, vessel thrombosed will be	LAD
The circumflex artery supplies	Left atrium and left ventricle
Infarct in the lower segment of heart	LCX
ECG shows changes in leads II, III and avF. Diagnosis	Inferior wall MI
ST elevation in lead II, which artery involved	RCA

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Patient presented to ER with crushing chest pain for last 1 hour ON ECG there is ST segment elevation in lead II, III & AVF what's the diagnosis	Inferior wall MI
ST segment elevation in lead II which artery effected	right main coronary
A man presents to ER with ST depressions in II, III and avF and was advised angiography. The Most likely culprit artery is	RCA
Artery involved in inferior wall MI	Right marginal
Patient having ST elevation in Lead 2 and complete heart block vessel involved	RCA

NOTE: AXIS deviation



Left axis deviation on ECG is seen in	Rt ventricular myocardial damage
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