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GoldStandard Papers (FCPS-1)

Surgery & Allied

16 August 2022 (Night)

Recent Past Papers

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(Errors and omissions excepted)



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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)
- Each System covered in Each Day!
- 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)
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- is part of innate immunity----->NK cells
- In Parasitic infestation, blood will show:----->Eosinophils
- Hyperexcitability of neurons due to deficiency of----->Ca
- Pt. with breast malignancy has been radiotherapy now presented with swelling of the hand----->Lymphatic obstruction
- changes will be occur in hypoxia?----->Anaerobic glycolysis forming lactic acid
- Hydrocephalus has resulted in Pt. in enlargement of one lateral and 3rd ventricle. site of a blockage?----->Foramen Monro
- Visible intercostal pulsations notching of ribs on xray due to----->Post ductal coarctation of aorta
- tachy cardio, warm and moist skin pulse is irregular. Dx----->Hyperthyroidism
- Major stress hormone:----->Cortisol
- Superior pole of thyroid is ligated. Artery supplying this originates from?----->External carotid artery
- A type of adult hemoglobin?----->2 alpha 2 beta chains
- Pt. on total parental nutrition develop dry skin due to deficiency of----->Linoleic acid
- pain tingling sensation & numbness of thumb inability to oppose the thumb. Dx--->Carpal tunnel syndrome
- Bicuspid aortic valve associated with is Conditions ?----->Coarctation of aorta
- Medullary carcinoma spread via----->Lymphatics
- site of Bone marrow aspiration is----->Ilic crest
- Mother has cat and baby is at a risk of ----->Toxoplasmosis
- global Infectious cause of blindness is ?----->Chlamydia trachomatis
- MOA of cabergoline:----->D2 Agonist
- Loss of convergence & Accommodation with CN3 affected and unable to open eye, lesion in?----->Midbrain



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- Person having history of trauma on left upper arm he developed swelling in arm that was painful for 3 months. It was well circumscribed 4cm and on x-ray appear bright then it gradually decreased in one year. Most likely phenomenon:--->Metaplasia
- pain receptors are also stimulated for----->Freezing cold
- Premalignant lesion is ----->Erythroplakia
- Lower lip parasthesia occurs in----->Body fracture
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- frequent presentation of G6PD ----->Drug induce Hemolysis
- Inn Hemostasis role of endothelium----->Release of vWF
- Initiator followed by promoter causing carcinom----->cancer formation
- change characteristic of acute myocardial infarction----->Displacement of ST-segment
- proteinuria. Cause of edema----->Decreased colloid osmotic pressure
- common heart valve to get calcified?----->Aortic
- Protein digestion starts in?----->Stomach
- prostatic carcinoma spread to----->Vertebral plexus
- Anastomosis between superior mesenteric and inferior mesenteric?----->Marginal artery
- chorionic villous sampling at----->11 weeks
- occurs after modified radical mastectomy ?----->Lymphedema
- fracture of the left 10th rib. The organ injured is----->Spleen
- tb characteristic Microscopic finding ?----->Caseous Necrosis
- Prevalence definition----->new -----> old cases
- During prolonged surgery of 8 hours , core body temperature is monitored by?----->Probe in oesophagus



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- Cystoscope and endoscopesterilization is done which ----->Tyndilization
- Extensorcarpi radialis brevis nerve supply----->Radial nerve
- in Nephrotic syndrome occurs due to ?----->Hypoalbuminemia
- strongest Erythropoitin stimulant----->Hypoxia
- Fetal Hb has which characteristics----->Alpha and gamma chains
- one litre blood loss within 5 minutes will occur?----->Increased venous tone
- girl with vaginal bleeding. She is taller than her age. Mass felt in pelvic region----->Granulosa cell tumor
- use after surgery to sterilized endoscopic instrument?----->2% Glutaraldehyde
- Short acting B2 agonist----->Salbutamol
- diagnosis of asthma----->FEV1/FVC less than 65%
- In CLD and portal htn haematemesis occursis from----->Left gastric vein
- Basal bodies are derived from----->Centrioles
- Cut at anatomical snuff box with profuse bleeding due to----->Redial artery
- Hypospadiasis due to defect in----->Urogenital fold
- measure Renal plasma flow----->PAH
- primary source of energy for brain in starvation----->Ketones
- branch of anterior division of sacral plexus----->Tibial
- Bicarb max absorption in part of kidney along with H-----> secretion ----->PCT
- nerve does not leave pelvis?----->Nerve to piriformis
- MI six hours. Which investigation is most appropriateat this stage?----->Troponin-T
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-
- gum bleeding, menorrhagia, on/off nose bleeding. DX.?----->ITP
- true regarding malignant tumor----->Pleomorphism
- Short term memory loss occurs due to ----->Hippocampus
- The muscle involved in unlocking of knee----->Popliteus



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- type of shock in MI----->Cardiogenic Shock
- hemisection of the spinal cord at mid-thoracic level. Features----->Increased muscle tone and hyper-reflexia ipsilaterally
- depressed T wave, with prominent U wave. dx----->Hypokalemia
- Narrowest point in pediatric airway----->Cricoid
- During exercise Blood flow to non exercising skeletal muscle is Maintained by----->sympathetic Adrenergic stimulation
- A lady with primary amenorrhea, webbed neck and short height. What's your diagnosis ?----->Turner syndrome
- Regarding Opsonins ----->Fc portion of IgG and C3b
- lymphadenopathy with caseating granulomata in LN. dx----->TB adenitis
- The fracture of the shaft of the humerus will cause damage----->Profunda brachii artery
- Attachment of levator Ani to lateral wall of pelvis----->Obturator internus fascia
- Mechanism of action of local anesthesia is ?----->Block Na channels
- Closure of aortic and pulmonic valve----->Decrease ventricular pressure
- several foul smelling frothy stools per day. ----->Stool D/R
- Epidural hematoma due to vessel ruptured----->MCA
- Heparin Activate----->anti thrombin 3
- The lesser omentum free margin contains----->Portal vein, bile duct & hepatic artery
- The true positive is related to ?----->Sensitivity
- Grade 4 hepatic encephalopathy is caused by side effects of drugs?----->Paracetamol
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- Nasal furuncle bacteria is----->Staphylococcus



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- injury at neck of radius lost thumb abduction & opposition nerve involve----->Median nerve
- Ovarian carcinoma metastasizes early to----->Peritoneum
- Above 3 cm of gastroesophageal junction , cells of epithelium undergone a change. Dx----->Squamousto Columnar Metaplasia
- Confidence interval is calculated by?----->Mean & standard error
- Anterior division of MMA rupture will lead to bleeding in ?----->Extradural/Epidural space
- Nucleustractus solitarius & associated tract receives SVA & GVA via CN----->7,9,10
- Pernicious anemia may result due to ----->Cyanocobalamin
- splenomegaly, microcytic hypochromic anemia with Anisocytosis and Poikiloytosis. Failed response to Iron supplement. Dx----->Beta Thalassemia major
- is not oncogene and cause gene amplification----->Myc
- finding in TB----->Caseating Granuloma
- ICF = 28 liters, ECF = M liters, Plasma = 31liters Interstitial fluid will be:----->11L
- Spinal cord ends at in infant----->L3
- Short term function of AT2----->Vasoconstriction of arterioles
- Anemia small spherocytes. Test for diagnosis----->RBC survival study
- 40 week pregnancy with ARDS. Cause of ards is----->Amniotic embolism
- Which induce saliva production----->VIP
- scrotal mass.Transillumination test is positive. involves anatomical structures:----->Tunica vaginalis.
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-
- Effect of Digoxin may increase and cause Toxicity by ?----->Use of Non K----->sparing Diuretics
- Anterior 2/3rd of tongue pain sensation carried by nerve?----->Trigeminal nerve
- Nerve Supply of the vulva----->Pudendal nerve



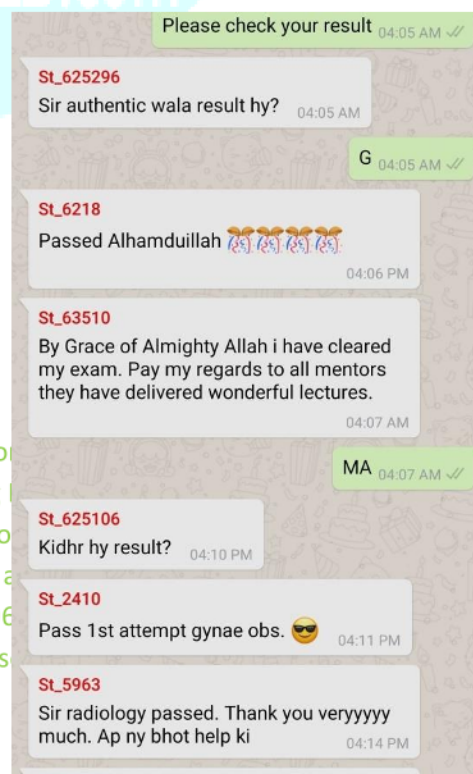
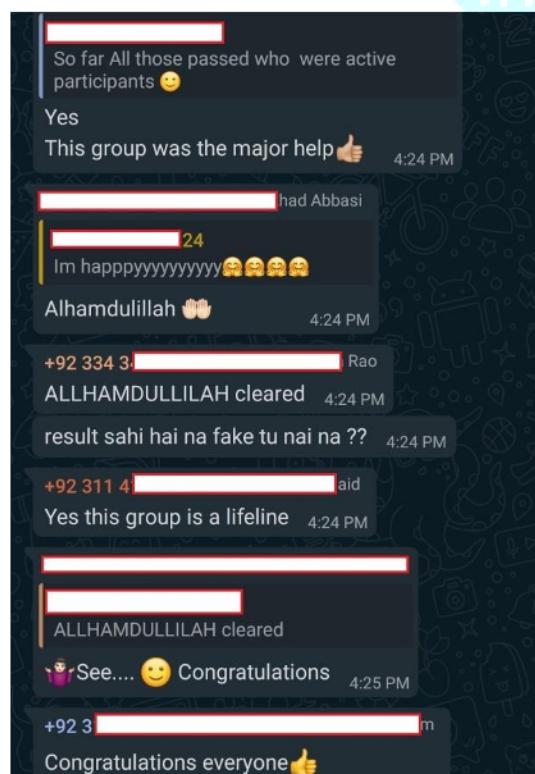
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- Ductus deferens ligated above the Ejaculatory duct, seminal fluid will contain?----
->Seminal and prostatic fluid without sperm
- Related to the hilum of lung posteriorly----->Vagus nerve
- Lymphatic drainage of glans penis and clitoris----->Deep Inguinal nodes
- ATT given in combination ?----->To avoid drug resistance
- related to Pt. of bronchial asthma?----->FEV1 < 65%
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■ Almost every student who joins our Online Classes Passes exam (Alhamduillah)

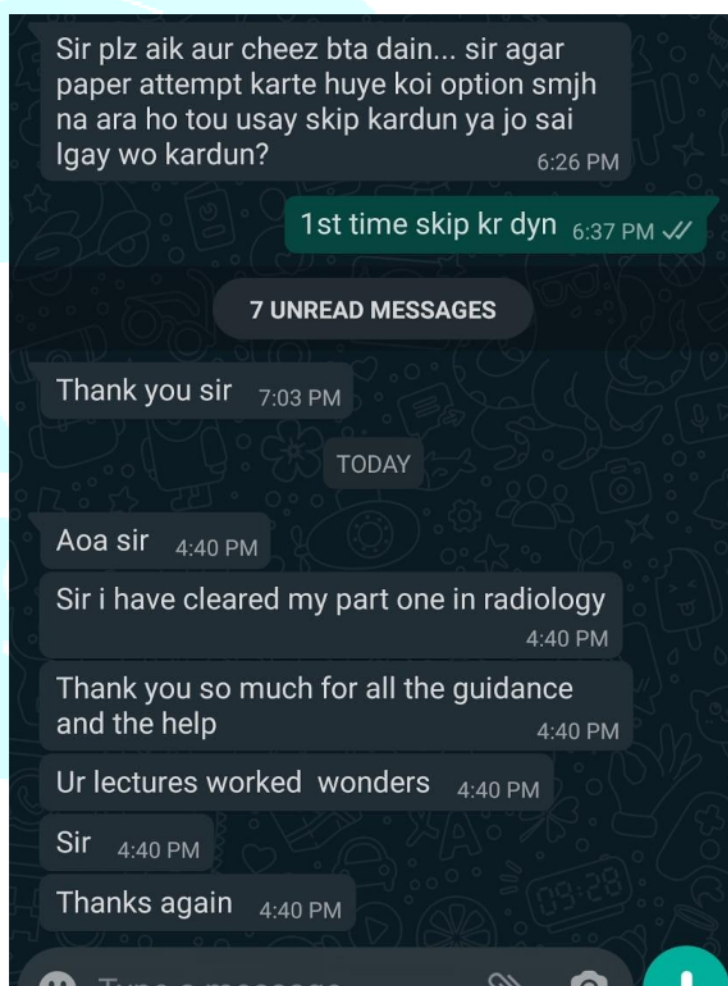
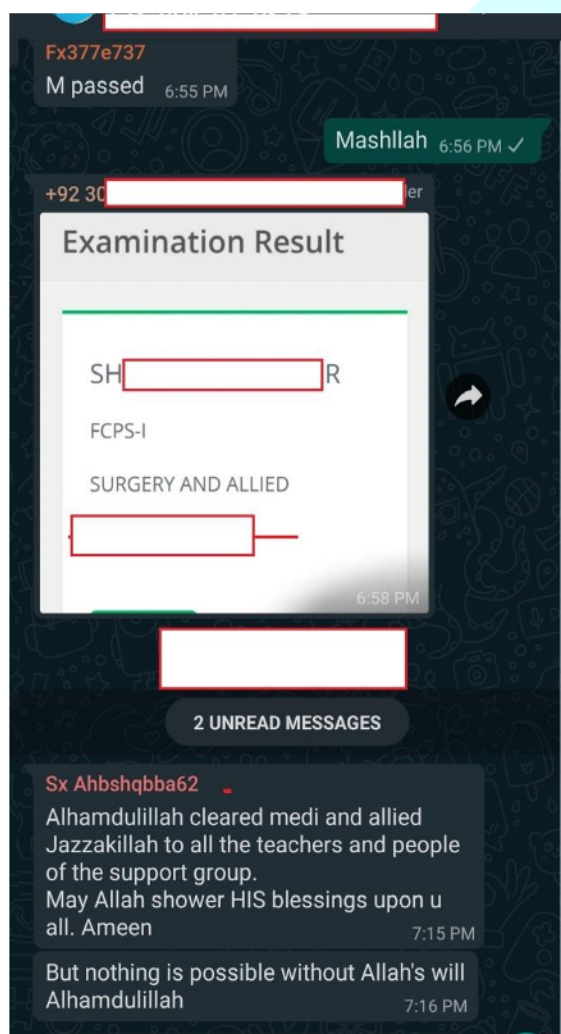
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 - FirstAid, BRS, snell anatomy, kaplan neuroanatomy etc.



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FCPS-1 NOVEMBER-2022

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February 2022 papers
(recent updated)

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GoldStandard FCPS 4th Edition V1 (Golden 13)

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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.

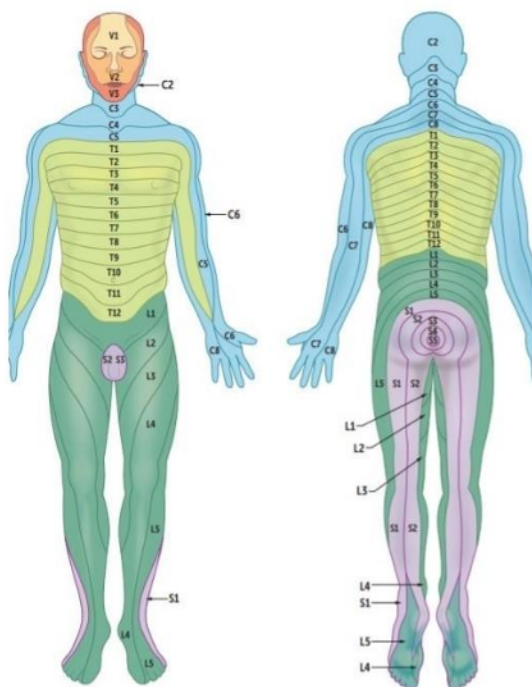




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- Superficial fascia of the scalp is mixture of → Loose areolar and adipose tissue
- The axillary sheath is a continuation of → Prevertebral fascia
- Thyroid gland moves with swallowing because it is enclosed in → Pretracheal fascia
- Trauma to one 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
dermatome of thumb	c6

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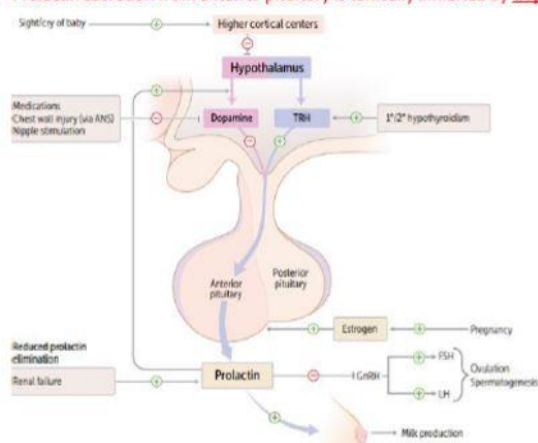
knee dermatome	I4
lower end of clavicle dermatome	c3-4
pain in calf and medial malleolus dermatome	I4





Prolectin

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
 - Prolectin release dopamine which inhibits prolectin
2. Release by sucking, voice of baby
3. Prolactin secretion from anterior pituitary is tonically inhibited by dopamine Prolectin.



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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, hypercucaguable state
- Most common cause of death in rheumatic fever → Myocarditis
- Commonly use Tri-cuspid valve
- 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 mitral 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

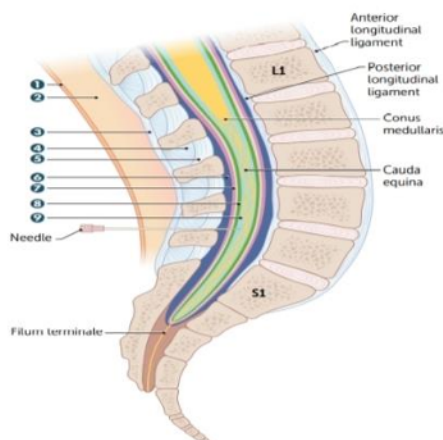
LUMBAR PUNCTURE

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

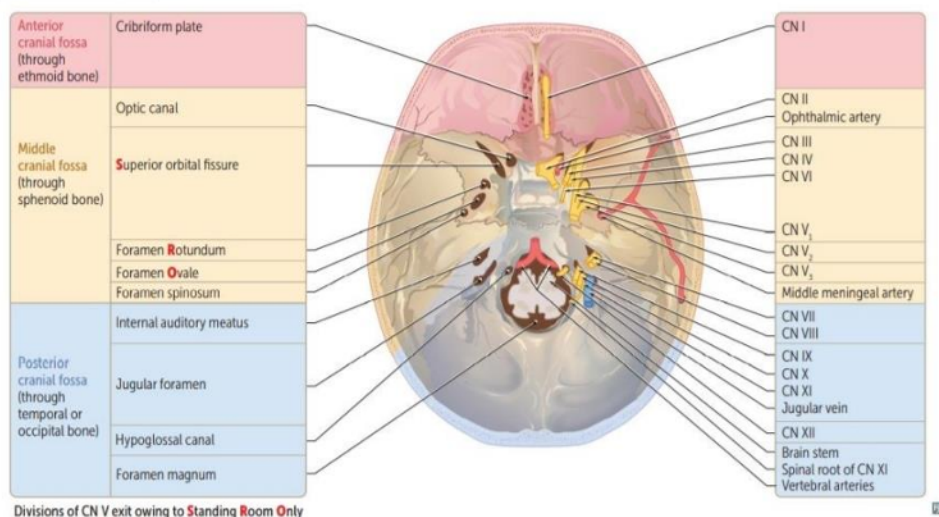




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HEAD AND NECK

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

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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

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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 granulosa 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 granulosa 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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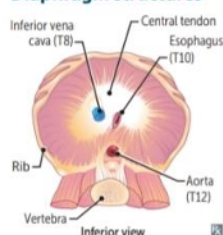




Thorax

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 doesn't 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
Pectoral 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





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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

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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

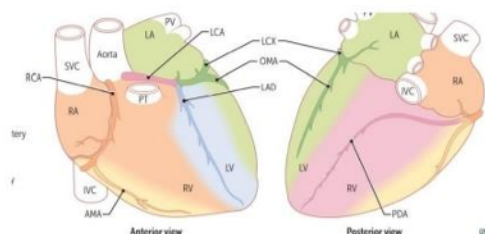


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MI ECG LEADS

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

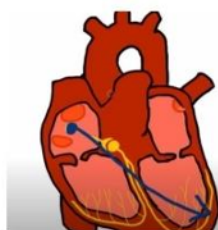
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Patient presented to ER with crushing chest pain for last 1 hour ON ECG there is ST segment elevation in lead II, III & avF what's the diagnosis	Inferior wall MI
ST segment elevation in lead II which artery effected	right main coronary
A man presents 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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