

Sikkim Public Service Commission

Main Written Examination for the Post of Specialist (ENT)

Main Paper

Time Allowed : 3 Hrs.

Maximum Marks : 300

INSTRUCTIONS TO CANDIDATES

Read the following instructions carefully before answering the questions :-

1. **IMMEDIATELY AFTER THE COMMENCEMENT OF THE EXAMINATION, YOU SHOULD CHECK THAT THIS TEST BOOKLET DOES NOT HAVE ANY UNPRINTED OR TORN OR MISSING PAGES OR ITEMS ETC. IF SO, GET IT REPLACED BY A COMPLETE TEST BOOKLET.**
2. Please note that it is the candidate's responsibility to fill in the Roll Number carefully and without any omission or discrepancy at the appropriate places in the **OMR ANSWER SHEET** for MCQ. Any omission/discrepancy will render the Answer Sheet liable for rejection.
3. **Use only Black Ball Point Pen to fill the OMR sheet**
4. Do not write anything else on the OMR Answer Sheet except the required information.
5. **This Test Booklet is divided into three sections. Section A - MCQ mode, Section B - Short answer & Section C - Long answer questions.**
6. **All items from Section A carries 2 marks each, MCQ type questions has to be marked in the OMR sheet provided. Section B consists of short answer type questions of 100 marks & Section C long answer type questions of 150 marks, which has to be written separately in the Answer sheet provided.**
7. Before you proceed to mark in the Answer Sheet (OMR), you have to fill in some particulars in the Answer Sheet (OMR) as per given instructions.
8. After you have completed filling in all your responses on the Answer Sheet (OMR) and the examination has concluded, you should hand over the Answer Sheet (OMR) to the Invigilator only. You are permitted to take away with you the Test Booklet.
9. **Marking Scheme**
THERE WILL BE NEGATIVE MARKING FOR WRONG ANSWERS MARKED BY A CANDIDATE IN THE OBJECTIVE TYPE QUESTION PAPERS.
 - (i) There are four alternatives for the answer to every question. For each question for which a wrong answer has been given by the candidate, one-third of the marks assigned to that question will be deducted as penalty.
 - (ii) If a candidate gives more than one answer, it will be treated as a wrong answer even if one of the given answers happens to be correct and there will be same penalty as above to the question.
 - (iii) If a question is left blank. i.e., no answer is given by the candidate, there will be no penalty for that question.

DO NOT OPEN THIS TEST BOOKLET UNTIL YOU ARE ASKED TO DO SO

Section A

Multiple Choice Question: -

(2x25=50)

- 1) The First visceral cleft give all of the following except.
 - A) Outer layer of the tympanic membrane.
 - B) The auricle.
 - C) The external auditory canal.
 - D) The fibrous layer of the tympanic membrane
- 2) Greisinger's sign means
 - A) Pain over the tempromandibular joint
 - B) Pain in the eye
 - C) Pain and tenderness over the posterior part of the mastoid.
 - D) Pain and tenderness over the auricle
- 3) On ear examination a red mass is seen behind the tympanic membrane which blanches on compression by pneumatic otoscope. This sign is called
 - A) Griesinger's sign
 - B) Schwartz sign
 - C) Brown's sign
 - D) Moor's sign
- 4) Malignant otitis externa is
 - A) Truly malignant disease eroding the external canal
 - B) Is most commonly seen in elderly uncontrolled diabetics
 - C) Staphylococcus aureus is the causative organism
 - D) None of the above
- 5) The following organisms are involved in acute otitis media except
 - A) Streptococcus pneumonia
 - B) Hemophilus influenza
 - C) Pseudomonas aeruginosa
 - D) Morexella cararrhalis

- 6) A positive Kernig sign means
- A) Reflex flexion of the hips and knees when the neck is flexed
 - B) Inability to extend the knee completely when the hip is flexed on the abdomen
 - C) Inability to do rapid alternating movement
 - D) None of the above
- 7) In a case of cholesteatoma, severe spontaneous vertigo with Nausea and vomiting is suspicious of
- A) Circumscribed peri-labyrinthitis
 - B) Diffuse serous labyrinthitis
 - C) Extradural abscess
 - D) Petrositis
- 8) Conductive deafness in longitudinal temporal bone fracture may be due to:
- A) Rupture of the tympanic membrane
 - B) Ossicular disruption.
 - C) None of the above.
 - D) Both a and b
- 9) After mastoidectomy operation, facial nerve paralysis was observed after recovery from anesthesia,
- A) Steroids and follow up are only required.
 - B) Immediate surgical exploration is needed.
 - C) Surgical exploration is made after electro diagnostic tests.
 - D) Giving steroids and removing the ear pack is usually successful.

- 10) The following have an ototoxic effect except
- A) Gentamycin
 - B) Frusemide
 - C) Amoxicilline
 - D) Quinine
- 11) An infant with bilateral choanal atresia presents with
- A) Secretory otitis media
 - B) Respiratory distress.
 - C) Epistaxis
 - D) Stridor.
- 12) On histopathological examination, the most diagnostic cells of rhinoscleroma are
- A) Monocytes
 - B) Russel's bodies
 - C) Miculicz cells
 - D) Lymphocytes
- 13) Tuberculosis affects which part of the nasal septum
- A) Both cartilaginous and bony
 - B) Cartilaginous
 - C) Never affects the septum
 - D) Bony portion
- 14) Saddle nose may be due to the following except:
- A) Overresection of septal cartilage
 - B) Syphilis.
 - C) Septal abcess.
 - D) Rhinoscleroma.

- 15) The nasopharynx takes its sensory nerve supply from
- A) Trigeminal nerve
 - B) Glossopharyngeal nerve
 - C) Vagus nerve
 - D) None of the above
- 16) The earliest and commonest complication of diphtheria is
- A) Heart failure
 - B) Palatal paralysis.
 - C) Laryngeal obstruction
 - D) Acute nephritis
- 17) The Fossa of Rosenmuller is the common site for
- A) Angiofibroma
 - B) Lipoma
 - C) Adenoid
 - D) Nasopharyngeal carcinoma.
- 18) All of the following are precancerous lesions except
- A) Plummer Vinson syndrome
 - B) Leukoplakia
 - C) Adult solitary papilloma of the larynx
 - D) Juvenile multiple papillomatosis of the larynx
- 19) The only abductor muscle in the larynx is:
- A) Sternothyroid muscle
 - B) Lateral cricoarynoid muscle
 - C) Cricothyroid muscle.
 - D) Posterior cricoarynoid muscle

- 20) Classical triad of chronic tonsillitis include all, except
- A) Flushing of ant. tonsillar pillar
 - B) Cheese test positive
 - C) Tonsillar hypertrophy
 - D) Non tender cervical lymphadenopathy
- 21) The cricothyroid muscles has its nerve supply from
- A) The external laryngeal nerve
 - B) The internal laryngeal nerve
 - C) The recurrent laryngeal nerve
 - D) None of the above.
- 22) The causative organism of acute epiglottitis is
- A) Streptococcus pneumoniae
 - B) Hemophilus influenza
 - C) Staph aureus
 - D) Moraxella catarrhalis.
- 23) The aim of Heimlich's Manoeuvre is to
- A) Move the larynx from side to side to assess for laryngeal click.
 - B) Apply a sudden subdiaphragmatic upward thrust to produce artificial cough.
 - C) Forward pull of the mandible to clear the upper airway
 - D) None of the above is true.
- 24) A foreign body in the bronchus
- A) Is lodged in the left bronchus more than the right bronchus.
 - B) Mostly seen in adults
 - C) Chest x ray is recommended
 - D) None of the above.

25) "Trotter's Triad" comprises of all except.

- A) SN hearing Loss.
- B) Neuralgia
- C) Neck Nodes
- D) Otitis media with effusion.

Section B

Short answer type questions

(10 x 10=100)

(Attempt any 10)

1. Draw a levelled diagram of lateral wall of nose.
2. Fistula Test
3. Malignant otitis externa
4. Nasal myiasis
5. Oral submucous fibrosis
6. Bell's Palsy
7. Referred Otolgia
8. Importance of Head and Neck & PNS CT scan in FESS.
9. Short Increment Sensitive Index (SISI)
10. Rhinolalia Aparta
11. Adenoid facies
12. Reinke's oedema
13. Tubercular laryngitis
14. Role of pedicle flaps in head & neck surgery

Section C

Long answer type questions:

(5x30=150)

(Attempt any five)

1. What is Meniere's disease. Describe the etiopathogenesis, clinical presentation, diagnosis and treatment.
2. Discuss the clinical features and management of Glottic malignancy.
3. Discuss the basic mechanism of allergy and different tests for allergy.
4. Discuss theories of origin, investigation & management of nasopharyngeal angiofibroma.
5. What is LASER? Discuss its application in E.N.T.
6. What is deaf mutism? Discuss its etiopathogenesis, early recognition by newer technique and rehabilitation.
7. Describe indications of Tracheotomy, its classification, complications and management of complications.
8. What is "Ossiculoplasty"? Describe in detail material, type and recent trends in its surgery.