

**Q1- An elderly patient on aspirin presented with sudden severe intractable pain mainly in upper abdomen, patient looks ill, diaphoretic with rapid shallow breathing and weak thread pulse with marked hypotension. The surgeon on call make diagnosis of peritonitis.**

- A. What is type of peritonitis in this patient ? and what is cause of shock?**
- B. Enumerate the possible abdominal signs ,**
- C. How to investigate and treat this patient?**

**Q2- A male, 35 years old, presented to the Emergency Room with sudden severe abdominal pain, he had history of appendectomy 1 year ago.**

- A- What are the cardinal symptoms of intestinal obstruction?**
- B- What are the most common cause of intestinal obstruction in this patient?**
- C- Enumerate Initial management steps for this patient?**
- D- Mention three types of strangulated obstruction?**

**Q3- A 34 year old male complaining from discharge 3 cm anterolateral to the anal verge.**

- A-what is the differential diagnosis?**
- B-how you further assess the patient?**

**Q4- Female, 33 Years old, presented with history of frequent bowel motion, abdominal cramps, with weight loss for the last 3 months. Her sister diagnosed with caeliac disease and kept on gluten free diet. She visited a physician and IBS is considered a possibility. Her Hb 8.5 ,Ferittin is low, blood film showed iron deficiency anemia. What is the main suggestive diagnosis? How can you manage her?**

**Q5- A male, 35 years old, presented to the Emergency Room with sudden severe abdominal pain, he had history of appendectomy 1 year ago.**

- E- What are the cardinal symptoms of intestinal obstruction?**
- F- What are the most common cause of intestinal obstruction in this patient?**
- G- Enumerate Initial management steps for this patient?**
- H- Mention three types of strangulated obstruction?**

**Q6- 66 year old male admitted to the emergency department with abdominal distension and repeated vomiting for the last 3 days. examination showed a dehydrated patient with fever. supine X-ray showed an opaque shadow in the right iliac fossa and air in the gall bladder.**

**A: what's the provisional diagnosis?**

**B: what are the management options ?**

**Q7- A 18-year-old female complains of generalised colicky abdominal pain for about 6 h. She feels unwell, has vomited a couple of times and is anorexic. The pain has shifted to the right iliac fossa. On examination she has pyrexia of 38°C, is tender over the right iliac fossa with rigidity and has rebound tenderness.**

**A- Enumerate differential diagnosis.**

**B- Preoperative investigations.**

**Q8- A 34 year old male complaining from discharge 3 cm anterolateral to the anal verge.**

**A-what is the differential diagnosis?**

**B-how you further assess the patient?**

**Q9- What are the clinical features of acute appendicitis?**

**Q10- What are the complications may be seen after appendicectomy ?**

**Q11- How dose colonic carcinoma spread ?**

**Q12- What are the clinical features of carcinoma of the colon ?**

**Q13- what are the preoperative preparations for elective splenectomy?**

**Q14- Enumerate the types of malignant tumors of small bowel and discuss one type?**

**Q15-Write about indications of surgery in peptic ulcer disease?**

**Q16--Write briefly on the investigations of patient with hydatid cysts disease.**

**Q17- Write briefly on the clinical features of acute appendicitis .**

**Q18- Write briefly on clinical features and investigations of colonic tumors.**

**Q19- Enumerate the main lines of treatment for a patient with a diarrhea predominant IBS?**

**Q20- Enumerate factors precipitating hepatic encephalopathy in patient with liver cirrhosis.**

**Q21- Enumerate the indications for surgery in ulcerative colitis?**

**Q22- Write briefly about mesenteric cyst in term of definition, classification and clinical presentations?**

**Q23- Define hemorrhoids, causes, degrees, and lines of treatment?**