

Month and year of exam. January-2017		New Regulation	
Course	MD	Time	2 hours
Discipline	Gastroenterology	Total marks	100
Part	Final	Pass marks	160
Paper	II (Two)		
Subject of the paper	Gastroenterology		
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use a separate answer script for each question.</li> </ul>		

Q.1. A 40 years old male presented with sudden onset pain right upper abdomen for 2 days with fever, anorexia and tender hepatomegaly.

(a) What are the possibilities?

(b) Give the plan of investigations.

(c) How will you manage the case?

Calculation of bilirubin, ALT, ALP, AST, GGT, PT, INR, CBC, UA, CXR, USG, ERCP, MRCP, CT scan, MRI, PET scan, etc.

Q.2. A 30 years old female presented with one year history of jaundice, itching, arthralgia. Physical findings are moderate icterus with hepatosplenomegaly.

(a) What are the possibilities?

(b) How will you investigate to reach the diagnosis?

(c) How will you treat the case?

PBC  
Autoimmune hepatitis  
PSC  
2nd. order liver disease  
Hemolysis due to one

Q.3. A 55 year old lady presented with ascites having no oedema.

(a) What are the possibilities?

(b) Discuss the plan of investigations to reach the diagnosis.

(c) Give the outline of management.

Ascites  
- Peritoneal TB  
- Dehydration  
- Peritoneal cancer  
- Spontaneous bacterial peritonitis  
- Metastatic disease  
- Nil  
- Nil  
- Nil  
- Nil

Q.4. Write short notes on:

(a) Gilbert's syndrome.

(b) Refractory ascites.

(c) Probe based confocal endomicroscopy.

(d) Indications of surgery in acute pancreatitis.

(e) Portal hypertensive biliopathy.



বঙ্গবন্ধু শেখ মুজিব মেডিক্যাল বিশ্ববিদ্যালয়  
Bangabandhu Sheikh Mujib Medical University

Month and year of exam: January-2017		New Regulation	
Course	: MD	Time	: 3 hours
Discipline	: Gastroenterology	Total marks	: 100
Part	: Final	Pass marks	: 60
Paper	: I (One)		
Subject of the paper	: Gastroenterology		
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use a separate answer script for each question.</li> </ul>		

Q.1. A 40 years old male presented with recurrent abdominal pain for three months and a lump in the right iliac fossa.

- What are the possibilities?
- How will you investigate the patient?
- How will you manage the case?

T.B  
lymphoma  
Colon  
carcinoma of colon  
Ad IP

Q.2. A 32 years old female presented with 3 months history of bloody diarrhea.

- What are the possibilities?
- Give your plan of investigations.
- How will you manage the case?

D. Bacillary  
Colon  
MSUC  
Colon P.B  
Lymphoma  
Pseudomonas  
e) Bifidobacterium

Q.3. A 45 years old male presented to you with history of dyspepsia, anorexia, lethargy and weakness for 3 months. He is moderately anaemic.

- What are the possibilities?
- How will you investigate the patient?
- Write down the plan of management.

Ca of stomach  
Ca of pancreas  
Ca of lymphoma  
Ca of colon

Q.4. Write short notes on:

- Bio-feed back
- Use of biologics in inflammatory bowel disease.
- Pseudomembranous colitis.
- Solitary rectal ulcer syndrome.
- Short bowel syndrome.



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Bangabandhu Sheikh Mujib Medical University

Month and year of exam, January-2017		Residency Program	
Course	: MD	Time	: 3 hours
Discipline	: GASTROENTEROLOGY	Total marks	: 100
Phase	: B	Pass marks	: 60
Paper	: I (One)		
Subject of the paper	: Gastroenterology		
Instructions	<ul style="list-style-type: none"><li>• Answer all questions.</li><li>• Each question of group-A carries 05 marks</li><li>• Each question of group-B carries 10 marks</li><li>• Use separate answer script for each group.</li></ul>		

**Group-A**

- Q.1. What are the causes of dysphagia? How will you diagnose and manage eosinophilic esophagitis?
- Q.2. Discuss the importance of taking duodenal biopsy in the diagnosis of gastroenterological diseases.
- Q.3. Discuss points favoring double balloon enteroscopy over capsule enteroscopy in evaluation and management of small gut diseases.
- Q.4. How will you assess complete healing of lesions in a case of Crohn's disease?
- Q.5. What are the complications of long term use of Proton Pump Inhibitors?
- Q.6. How will you manage a case of pancreatic ascites?
- Q.7. Define early gastric cancer? Discuss the diagnostic and therapeutic options with prognosis of early gastric cancer?
- Q.8. How will you differentiate intestinal tuberculosis from Crohn's disease?
- Q.9. What are the causes of rectal ulcer? How will you diagnose and manage a case of solitary rectal ulcer syndrome?
- Q.10. Give the outline of management of severe ulcerative colitis

**Group-B (Respiration)**

- Q.1. A 40 year old lady presented with retro-sternal chest pain; her cardiac evaluation is normal. How will you evaluate and manage such case?
- Q.2. A 36 year old man failed to heal peptic ulcer and eradicate Helicobacter pylori with first line triple therapy. How will you evaluate and treat him?
- Q.3. A 22 year lady presented with low grade fever for 3 months, with gross weight loss and a palpable mass in the right iliac fossa. Her colonoscopy is normal. What are the possibilities? How will you investigate and manage her?
- Q.4. A 36 year old female presented with ascites. What are the possibilities? How will you investigate and manage the case?
- Q.5. A patient of 43 years of age presented with recurrent abdominal pain, distention and vomiting. How will you evaluate and manage the patient?



Month and year of exam. July 2016		RESIDENCY PROGRAM
Course	: MD	Time ..... 3 hours
Discipline	: Gastroenterology	Total Marks ..... 100
Phase	: B	Pass Marks ..... 60
Paper	: II (Two)	
Subject of the Paper	: Gastroenterology	
Instructions	: Each question of group - A carries 05 marks. Each question of group - B carries 10 marks. Use separate answer script for each group.	

#### Group - A

- ~~Q.1.~~ How will you evaluate and treat pancreatic pseudocyst?
- ~~Q.2.~~ How will you assess the use of fluid and antibiotics in the management of acute pancreatitis?
- ~~Q.3.~~ How to manage recurrent pyogenic cholangitis?
- ~~Q.4.~~ On screening a 35 year pregnant lady was found to be HBsAg positive. What will be your management strategies? How will you counsel her?
- ~~Q.5.~~ What is the treatment and prognosis of auto-immune hepatitis?
- ~~Q.6.~~ Define intrahepatic cholestasis of pregnancy. How will you manage such a case?
- ~~Q.7.~~ How will you follow-up a post liver transplant patient?
- ~~Q.8.~~ What is portal hypertensive gastropathy? Give its management.
- ~~Q.9.~~ Write down the causes of chronic non-viral hepatitis. How will you manage a case of hemochromatosis?
- ~~Q.10.~~ What is Budd Chiari Syndrome? Write down the etiology and investigations for its diagnosis.

#### Group - B

- ~~Q.1.~~ A 45 year gentleman presented to you with an ultrasonography report of SOL in liver. How will you evaluate him clinically and by investigations? Discuss the treatment options when it is found to be malignant.
- ~~Q.2.~~ A 30 year male with jaundice for 3 weeks is found to be disoriented. How will you investigate and manage him?
- ~~Q.3.~~ A patient of chronic kidney disease is found to be anti HCV positive. How will you manage such a case?
- ~~Q.4.~~ A 45 years old obese male presented with a weight of 80 Kg, bright liver on ultrasonography. How will you evaluate and manage such a case?
- ~~Q.5.~~ A 19 year old pale looking girl with splenomegaly presented with severe upper abdominal pain. How will you evaluate and treat her?





Month and year of exam. July 2016		RESIDENCY PROGRAM
Course	: MD	Time ..... 3 hours
Discipline	: Gastroenterology	Total Marks ..... 100
Phase	: B	Pass Marks ..... 60
Paper	: I (One)	
Subject of the Paper	: Gastroenterology	
Instructions	: Each question of group - A carries 05 marks. Each question of group - B carries 10 marks. Use separate answer script for each group.	

**Group - A**

- ✓ Q.1. What do you mean by short bowel syndrome? How will you diagnose and manage short bowel syndrome?
- ✓ Q.2. What is intestinal pseudo-obstruction? Discuss the causes and management of pseudo obstruction.
- ✓ Q.3. How will you diagnose and manage a case of pseudo membranous colitis?
- ✓ Q.4. What are the causes of small bowel bacterial overgrowth? How the diagnosis of small bowel bacterial overgrowth is confirmed?
- Q.5. How will you diagnose chronic mesenteric ischemia?
- ✓ Q.6. How will you treat H.pylori infection in Bangladesh?
- ✓ Q.7. What do you mean by occult and obscure GI bleeding? How will you diagnose obscure GI bleeding?
- ✓ Q.8. Give the management plan of a refractory ulcerative colitis patient.
- ✓ Q.9. Mention the complications of gastroesophageal reflux disease (GERD). How will you manage Barret's oesophagus?
- ✓ Q.10. A 39 year old lady underwent small gut resection for stricture due to Chohn's disease. How will you follow up and manage the case after surgery.

**Group - B**

- Q.1. A 34 year old male presented with diarrhoea, oedema and skin lesions over the buttock. How will you evaluate and treat the case?
  - Q.2. A 50 year old male presented with recurrent attacks of bloody diarrhoea for last one year. He has a history of pelvic irradiation two years back. What are the possibilities and how will you manage such a case?
  - Q.3. A 60 year old male presented with history of gastric bypass surgery with vagotomy for peptic ulcer disease 12 years back. Recently he developed pain in upper abdomen with vomiting after meal. What are the possibilities and how will you proceed to investigate and manage the case?
  - Q.4. A 30 year old male presented with chronic diarrhoea for the last 3 years. Ba-follow through x-ray showed dilatation of the proximal jejunal loops. How will you investigate and manage such a case?
  - Q.5. A 58 year old man presented with vomiting after meal for 3 months with weight loss. What are the possibilities and how will you evaluate and treat him?
- Handwritten notes:*  
 - For Q.1: Crohn's colitis, celiac, distribution of...  
 - For Q.2: Crohn's colitis, radiation colitis, TB...  
 - For Q.3: Peptic ulcer disease, gastric cancer, duodenal ulcer...  
 - For Q.4: Crohn's disease, small intestine...  
 - For Q.5: Gastric cancer, chronic lymphoma, BB dilatation of proximal jejunum, TB...  
 - For Q.6: 1-4 hrs, 6-8 hrs, 10...



Month and year of exam. January'2017		Residency Program
Course	: MD	
Discipline	: Gastroenterology	Time ..... 3 hours
Phase	: B	Total marks .....100
Paper	: II (Two)	Pass marks .....60
Instructions	<ul style="list-style-type: none"><li>• Answer all questions.</li><li>• Each question of group-A carries 05 marks.</li><li>• Each question of group-B carries 10 marks.</li><li>• Use separate answer script for each group.</li></ul>	

**Group-A**

50

- Q.1. How will you manage intense itching in patients of obstructive jaundice?
- Q.2. How will you evaluate biliary sludge?
- Q.3. Discuss the diagnosis and management of Hydatid disease.
- Q.4. Discuss the causes and management of secondary biliary cirrhosis.
- Q.5. Mention the developmental anomalies causing acute pancreatitis with their management.
- Q.6. Discuss the diagnosis and management of Hepatorenal Syndrome.
- Q.7. Discuss the endoscopic management of chronic pancreatitis.
- Q.8. Discuss the role of EUS in diagnosis of pancreatic tumour.
- Q.9. How will you confirm the diagnosis of Klatskin tumour?
- Q.10. Discuss about pseudomyxoma peritonei?

**Group-B**

50

- Q.1. A 30 year old male presented with history of mild persistent jaundice since childhood. What are the possibilities? How will you confirm and treat the case?
- Q.2. A 42 year old female presented with progressive jaundice for 3 months. She has history of two operations for gall stone disease. What are the possibilities? How will you manage such a case?
- Q.3. A 50 year old man, a regular ethanol consumer presented with severe upper abdominal pain and mild jaundice. What are the possible causes? How will you manage him?
- Q.4. A 55 year old man taking Tab. Entacavir 0.5mg for CHB regularly for last 3 years. Recently he developed ascites and abdominal pain. What are the possible causes? How will you manage him?
- Q.5. A 40 year old man presented with mass in central abdomen. USG shows multiple enlarged lymph node and ascites. How will you proceed to diagnose and manage him?

Course	: MD	
Discipline	: Gastroenterology	Time ..... 3 hours
Phase	: B	Total marks ..... 100
Paper	: II (Two)	Pass marks ..... 60
Subject	: Gastroenterology	
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use separate answer script for each group.</li> </ul>	

#### Group-A

- Q.1. What are the types of motility disorders of esophagus? Mention the diagnostic tests and treatment modalities of achalasia cardia. 1+2+2
- Q.2. Define early gastric cancer. Mention the treatment options and prognosis of early gastric cancer. 2+2+1
- Q.3. Define subacute hepatic failure. Discuss the prognosis and management of such a case. 1+1+1
- Q.4. Write down the pathophysiology and management of stress ulcer. 2.5+2.5
- Q.5. Write down the management plan of IBD in pregnancy. 5
- Q.6. Write down the indication and contraindications of liver transplantation. 2.5+2.5
- Q.7. Discuss the differential diagnoses of a nodular lump in the right para-umbilical region. How will you diagnose and manage such a case? 1+2+3
- Q.8. Discuss the indications and recommendations for surveillance of HCC. 2.5+2.5
- Q.9. Discuss the complications of acute pancreatitis. 5
- Q.10. A 20 year male presented with jaundice and high fever for the last seven days. How will you investigate and manage the case? 2.5+2.5

#### Group-B

- Q.1. A 40 year female presented with ascites. What are the possibilities? How will you investigate her? 5+
- Q.2. A 40 year male presented with right upper abdominal pain for 6 months. Ultrasonography shows a space occupying lesion in the right lobe of liver. How will you investigate and manage the case? 5+
- Q.3. A 35 year old female, a known case of ulcerative colitis was on mesalazine 3.6 gm per day. She developed a flare up with bloody diarrhoea, 6-8 motions per day. She is on oral prednisolone 40 mg per day and azathiopurine 100 mg per day for one month with no significant improvement. How will you manage the case? 1
- Q.4. A 40 year old female presented with sudden, severe upper abdominal pain. What are the possibilities? How will you investigate and manage the case? 2+
- Q.5. A 25 year old female patient of thalassemia presented with chronic HCV infection (genotype-3). Discuss your plan of management. 1





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Bangabandhu Sheikh Mujib Medical University

Month and year of Exam: July 2015		Residency Program
Course	: MD	Time ..... 3 hours
Discipline	: Gastroenterology	Total marks .....100
Phase	: B	Pass marks .....60
Paper	: II (Two)	
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use separate answer script for each group.</li> </ul>	

**Group-A**

50

- Q.1. How will you manage a relapse of ulcerative colitis in pregnancy? 05
- Q.2. What are the dilemmas in diagnosing gastric tuberculosis? 05
- Q.3. How will you follow up a patient of colonic adenomatous polyp after polypectomy? ✓ 05
- Q.4. Discuss the management of tuberculosis in a patient of decompensated cirrhosis? ✓ 05
- Q.5. How will you manage intense itching in patients of obstructive jaundice? ✓ 05
- Q.6. What are the common causes of dysphagia in young adults? Shorty discuss the endoscopic management of achalasia cardia. 1+4=5
- Q.7. Briefly discuss the management of pill oesophagitis. 05
- Q.8. Discuss in short the investigations for carbohydrate malabsorption. 05
- Q.9. Discuss the role of MRCP in pancreatobiliary diseases. 05
- Q.10. Discuss the role Fecal Microbiota Transplantation (FMT) in gastrointestinal diseases. 05

**Group-B**

50

- Q.11. A patient of 35 years presented with recurrent attacks of abdominal pain. Double Balloon Enteroscopy shows ulcers and strictures at multiple sites of jejunum and ileum. How will you manage the case? 10
- Q.12. A prospective candidate for kidney transplantation is found to be HBsAg positive. How will you manage such a case? 10
- Q.13. A 55 year old male presented with loose stool and a lump in the right iliac fossa for three months. What are the possibilities? How will you investigate the case? 2+6=10
- Q.14. A 70 year old diabetic female patient with CKD on dialysis is found to be Anti-HCV positive, her serum ALT level is 123 U/L. How will you manage the case? 10
- Q.15. A 40 year lady presented with severe abdominal pain for last three days, she had similar attack 6 months back. How will you diagnose and manage the patient? 10





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Bangabandhu Sheikh Mujib Medical University

Month and year of Exam: July 2015		Residency Program
Course	: MC	Time ..... 3 hours
Discipline	: Gastroenterology	Total marks ..... 100
Phase	: B	Pass marks ..... 60
Pages	: 1 (One)	
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use separate answer script for each group.</li> </ul>	

Group-A

50

- Q1. Write down the management plan of hyponatremia in a case of decompensated cirrhosis of liver. 5
- Q2. Discuss the factors to be considered in the assessment of disease activity of ulcerative colitis. 5
- Q3. How will you diagnose and manage a case of pseudomembranous colitis. 2+3
- Q4. Define early gastric cancer. Mention the treatment options and prognosis of early gastric cancer. 1+2+3
- Q5. Define refractory ascites. Outline the different management options for refractory ascites in a cirrhotic patient. 2+3
- Q6. Write down the management plan of spontaneous bacterial peritonitis. 5
- Q7. What are the diagnostic criteria of autoimmune hepatitis? Discuss shortly the treatment options for autoimmune hepatitis. 2+3
- Q8. How will you diagnose and manage a case of Strongyloides stercoralis infection? 2+2+5
- Q9. Mention the complications of acute pancreatitis. What is the role of ERCP in acute pancreatitis? 2+3
- Q10. Write down the importance of EUS in the management of pancreaticobiliary disorders. 5

Group-B

50

- Q11. A young lady of 30 years presented with severe abdominal pain for 62 days. On examination she is found to have ascites. How will you investigate and manage the case? 5+5
- Q12. A man of 45 years presented with colicky abdominal pain with per rectal bleeding and arthritis. How will you manage the case? 10
- Q13. A 60 year old male having peptic ulcer surgery 20 years back presented with anorexia, weight loss and occasional vomiting. How will you evaluate and manage the case? 5+5
- Q14. A 30 year old male presented with generalized lymphadenopathy, fever, hepatomegaly and ascites. What are the possible differential diagnoses? How will you investigate the case? 4+5
- Q15. A 60 year old male presented with dull pain in right upper abdomen. Abdominal ultrasonography reveals a space-occupying lesion in liver. Write down your plan of management. 10



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Bangabandhu Sheikh Mujib Medical University

Month and year of exam.	January-2017	New Regulation	
Course	MD	Time	3 hours
Discipline	Gastroenterology	Total marks	100
Part	Final	Pass marks	60
Paper	II (Two)		
Subject of the paper	Gastroenterology		
Instructions	<ul style="list-style-type: none"> <li>All questions carry equal marks.</li> <li>Answer all questions.</li> <li>Use a separate answer script for each question.</li> </ul>		

Q.1. A 40 years old male presented with sudden onset pain right upper abdomen for 2 days with fever, anorexia and tender hepatomegaly.

(a) What are the possibilities?

(b) Give the plan of investigations.

(c) How will you manage the case?

- Acute cholecystitis  
 - Acute pancreatitis  
 - Acute hepatitis  
 - Acute cholangitis  
 - Acute gastritis

Q.2. A 30 years old female presented with one year history of jaundice, itching, arthralgia. Physical findings are moderate icterus with hepatosplenomegaly.

(a) What are the possibilities?

(b) How will you investigate to reach the diagnosis?

(c) How will you treat the case?

PBC  
 Autoimmune hepatitis  
 PSC  
 LAR  
 Chronic liver disease

Q.3. A 33 year old lady presented with ascites having no oedema.

(a) What are the possibilities?

(b) Discuss the plan of investigations to reach the diagnosis.

(c) Give the outline of management.

- Peritoneal TB  
 - Peritoneal lymphoma  
 - Peritoneal metastasis  
 - Peritoneal pseudocyst  
 - Malabsorption syndrome  
 - Malabsorption syndrome  
 - HIV & BIV  
 - CLF & DLV

Q.4. Write short notes on:

(a) Gilbert's syndrome.

(b) Refractory ascites.

(c) Probe based confocal endomicroscopy.

(d) Indications of surgery in acute pancreatitis.

(e) Portal hypertensive biliopathy.