

EXAMINATION FOR THE POST-GRADUATE DIPLOMA IN
OTO-RHINO-LARYNGOLOGY (D.L.O.) SEPTEMBER 1990.

Part II

Paper I — OTO-RHINO-LARYNGOLOGY

Time : Three hours.

Maximum : 75 marks.

Answer ALL the questions.

1. Describe the aetiology, pathology, symptoms, signs and management of glottic carcinoma. (18 marks)
 2. Discuss the aetiology, pathology and clinical features of cholesteatoma. Outline its surgical treatment. (18 marks)
 3. Write short notes on: (6 × 6½ = 39 marks)
 - (a) Oesophagoscopy.
 - (b) Rhinosporidiosis.
 - (c) Tonsillolith.
 - (d) Frontal mucocele.
 - (e) Nystagmus.
 - (f) Tuberculosis of the middle ear.
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OCTOBER 1991

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EXAMINATION FOR THE POST-GRADUATE DIPLOMA
IN OTO-RHINO-LARYNGOLOGY (D.L.O.),
OCTOBER 1991.

Part II

Paper I — OTO-RHINO-LARYNGOLOGY

Time : Three hours.

Maximum : 75 marks.

Answer ALL questions.

1. What are the different types of non-suppurative otitis media? Describe the aetiopathogenesis, clinical features and management of secretory otitis media. (25 marks)
 2. Discuss the aetiology, classification, clinical features and management of malignant tumours of the maxillary sinus. (25 marks)
 3. Write short notes on : (5×5=25 marks)
 - (a) Radical mastoidectomy.
 - (b) Vocal nodule.
 - (c) Atrophic rhinitis.
 - (d) Acute epiglottitis.
 - (e) Choanal atresia.
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APRIL 1993

[RS 269]

DIPLOMA IN OTO-RHINO-LARYNGOLOGY.

Part II

Paper I

OTO-RHINO-LARYNGOLOGY

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Discuss the benign and malignant tumours of the oesophagus. (25)
 2. Discuss the swellings of the head and neck. (25)
 3. Write short notes on : (5 × 10 = 50)
 - (a) Mucocoeles of the Ethmoid and Sphenoid Sinuses.
 - (b) Lenoire Syndrome.
 - (c) Franceschetti-Zwahlen Syndrome.
 - (d) Skin lesions of the Ear, Nose and Throat.
 - (e) Autoinflation.
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NOVEMBER 1993

[PR 509]

DIPLOMA IN OTO-RHINO-LARYNGOLOGY

Part II

Paper I -- OTO-RHINO-LARYNGOLOGY

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Describe the development and anatomy of middle ear. (25)
 2. Describe the mechanism of Deglutition. (25)
 3. Write short notes on : (5 × 10 = 50)
 - (a) Left recurrent laryngeal nerve.
 - (b) Claussen's Butterfly Chart.
 - (c) Phonation.
 - (d) Waldeyer's ring.
 - (e) Cerebro spinal fluid.
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APRIL 1999

[SG 1569]

Sub. Code : 3112

**DIPLOMA IN OTO–RHINO–LARYNGOLOGY
EXAMINATION.**

(Old Regulations)

Part II

Paper I — OTO–RHINO–LARYNGOLOGY

Time : Three hours

Maximum : 75 marks

Answer ALL questions.

1. Describe the aetio–pathology, clinical features investigations and treatment of lateral sinus thrombosis. (25)
 2. Give a detailed account of the causes, investigations and management of Laryngo tracheal stenosis. (25)
 3. Write short notes on : (5 × 5 = 25)
 - (a) Retropharyngeal abscess.
 - (b) Fess.
 - (c) Oroantral Fistula.
 - (d) Otitic barotrauma.
 - (e) Cochlear Implant.
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APRIL 1995

[SB 401]

DIPLOMA IN OTO-RHINO-LARYNGOLOGY.

(New Regulations)

**Paper III -- OTO-RHINO-LARYNGOLOGY INCLUDING
HEAD AND NECK ONCOLOGY AND ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Describe the etiology, signs and symptoms and classifications of Malignant growths in larynx. Mention the treatments. (25)
 2. Describe the signs and symptom investigations and treatment of lateral sinus thrombosis. (25)
 3. Short notes on : (5 × 10 = 50)
 - (a) Deep Neck space infections.
 - (b) Atrophic Rhinitis.
 - (c) Schneiderian Papilloma in Nose.
 - (d) Ossifying Fibromas.
 - (e) Carotid body tumour.
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APRIL 1997

(MP 362)

DIPLOMA IN OTO-RHINO-LARYNGOLOGY

(New Regulations)

Part II

**Paper III — OTO-RHINO-LARYNGOLOGY INCLUDING HEAD
AND NECK ONCOLOGY AND ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

**1 Describe the aetiology, signs and symptoms,
investigations and treatment of acute mastoiditis. (25)**

**Describe the aetiology, signs and symptoms,
investigations and treatment of nasopharyngeal carcinoma. (25)**

Write briefly on : (5 × 10 = 50)

- (a) Occult primary.**
 - (b) Malignant otitis externa.**
 - (c) Plummer-Vincent syndrome.**
 - (d) Elongated styloid process**
 - (e) Retropharyngeal abscess.**
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OCTOBER 1997

[MS 357]

DIPLOMA IN OTO-RHINO-LARYNGOLOGY

(New Regulations)

Part II

Paper III — OTO-RHINO-LARYNGOLOGY INCLUDING
HEAD AND NECK ONCOLOGY AND ENDOSCOPY

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. What is Stridor? How do you manage a child of 4 years brought to you with stridor? (25)
 2. What are the various membranous conditions in oral cavity and oropharynx? Describe the treatment of two common conditions. (25)
 3. Write briefly on : (5 × 10 = 50)
 - (a) Atrophic rhinitis
 - (b) Rhinosporidiosis
 - (c) Lateral wall of nose
 - (d) Labyrinthitis
 - (e) Endoscopic removal of metallic foreign body from cricopharynx.
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APRIL 1998

[SV 387]

DIPLOMA IN OTO-RHINO-LARYNGOLOGY.

(New Regulations)

Part II

**Paper III — OTO-RHINO-LARYNGOLOGY INCLUDING
HEAD AND NECK ONCOLOGY AND ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Describe the aetio-pathogenesis, clinical features, diagnosis and treatment of nasopharyngeal angiofibroma. (25)
 2. Enumerate the causes, investigations and management of bilateral abductor paralysis of the vocal cords. (25)
 3. Write briefly on : (5 × 10 = 50)
 - (a) Aural polyp.
 - (b) Rhinophyma.
 - (c) Citelli's abscess.
 - (d) Choanal atresia.
 - (e) AIDS in ENT.
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APRIL 1999

[SG 1573]

Sub. Code : 3116

**DIPLOMA IN OTO–RHINO–LARYNGOLOGY
EXAMINATION.**

(New Regulations)

Part II

**Paper II — OTO–RHINO–LARYNGOLOGY
INCLUDING HEAD AND NECK ONCOLOGY AND
ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Write an essay on the common causes of deafness in India. (25)
 2. Discuss the role of an Otolaryngologist in a case of unilateral proptosis of the Eye Ball. (25)
 3. Write briefly on : (5 × 10 = 50)
 - (a) Endolaryngeal microsurgery.
 - (b) Otomycosis.
 - (c) Thyroglossal Fistula.
 - (d) Bell's Palsy.
 - (e) Septal Abscess.
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OCTOBER 1999

[KA 1573]

Sub. Code : 3116

**DIPLOMA IN OTO-RHINO-LARYNGOLOGY
EXAMINATION.**

(New Regulations)

Part II

**Paper II — OTO RHINO-LARYNGOLOGY
INCLUDING HEAD AND NECK ONCOLOGY AND
ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Describe the etiopathology, clinical features management of malignant tumours of maxilla. (25)
 2. Describe the clinical features and management of laryngeo-tracheal trauma. (25)
 3. Write briefly on : (5 × 10 = 50)
 - (a) BERA
 - (b) Vidian nerve
 - (c) Wegeners granulomatosis
 - (d) C.S.F. Otorrhoea
 - (e) Hearing aid.
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MARCH 2000

[KB 1573]

Sub. Code : 3116

**DIPLOMA IN OTO–RHINO–LARYNGOLOGY
EXAMINATION.**

(New Regulations)

Part II

**Paper II — OTO–RHINO–LARYNGOLOGY
INCLUDING HEAD AND NECK ONCOLOGY AND
ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Write on AIDS in ENT. (25)
 2. Discuss the epidemiology, etiology, pathology, clinical features and management of nasopharyngeal malignancy. (25)
 3. Write short notes on : (5 × 10 = 50)
 - (a) Sleep apnoea syndrome
 - (b) Oesophagoscopy.
 - (c) Principles of radiotherapy
 - (d) Oro antral fistula
 - (e) Conservative laryngeal surgeries.
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SEPTEMBER 2000

[KC 1573]

Sub. Code : 3116

**DIPLOMA IN OTO-RHINO-
LARYNGOLOGY EXAMINATION.**

(New Regulations)

Part II

**Paper III -- OTO-RHINO-LARYNGOLOGY
INCLUDING HEAD AND NECK ONCOLOGY AND
ENDOSCOPY**

Time : Three hours

Maximum : 100 marks

Answer ALL questions.

1. Indicate the various classifications used in staging juvenile naso-pharyngeal angio fibroma. Describe the aetiopathogenesis, clinical features and management of the above condition. Enlighten the various options available to reduce intraoperative haemorrhage. (25)
 2. Describe the aetiopathogenesis, clinical features and management of a case of recurrent Rhino-sporidiosis of nasal cavity. Indicate the role of nasal endoscopy and cryo-surgery in its management. (25)
 3. Write briefly on : (5 × 10 = 50)
 - (a) Burkitt's lymphoma
 - (b) Eagle syndrome
 - (c) Sistrunk's operation
 - (d) Role of immunotherapy in head and neck malignancy
 - (e) Occult primary in head and neck malignancies.
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