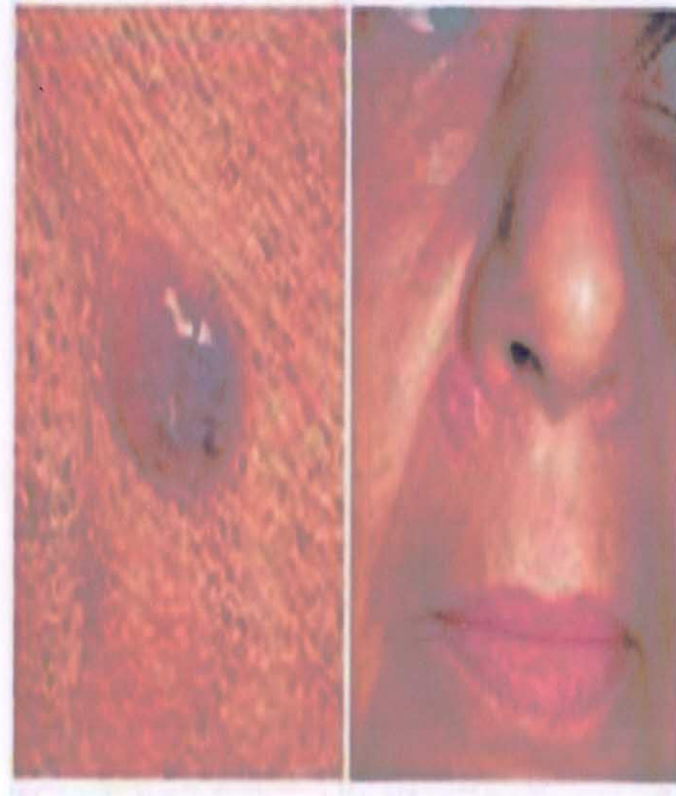


MODULE -1

- 60 year old male patient presented with pigmented ulcerated lesion of 2 years duration at the region of nasolabial fold of the face on the right side of 1.5cm. Ulcer is having raised & rolled out edge which is pigmented.

1. Diagnosis?
2. Pre-disposing factor?
3. Why is it called rodent ulcer?
4. Treatment of choice?



1. Basal cell carcinoma.
2. UV light; arsenical compounds; coal tar; Aromatic hydro carbons; infra red rays exposure.
3. Long standing ulcers erode deep into the face destroying bone & exposing nasal cavity; nasal sinuses; the eye; & even the brain hence it is called rodent ulcer.
4. Mohs' micrographic surgery

MODULE -2

- 45 year old male patient presents with painless swelling in the right cheek region. Swelling is about 4x3 cm size, irregular in shape. It raises the right ear lobe. Swelling is bimanually not palpable.
1. What is the most probable diagnosis?
 2. What is the most important differential diagnosis?
 3. What is the nerve most commonly involved?
 4. What is the commonest swelling in this gland?



1. Parotid swelling
2. Pre auricular lymph nodes
3. Facial nerve
4. Pleomorphic adenoma

MODULE-3

- 15 year old girl presented with a swelling in front of the neck below the hyoid bone of about 2x2 cm. Swelling moves up & down with deglutition. There is movement with protrusion of tongue.
1. What is the most probable diagnosis in this case?
 2. Other midline swellings, in front of the neck?
 3. What is the treatment?
 4. Name five trans-illuminant swellings in the body?



1. Thyroglossal cyst
2. Dermoid cyst; thyroid swellings; retro sternal/ plunging goitre.
3. Sistrunk's operation
4. Hydrocephalus, meningocele, meningo myelocele; ranula; hydrocoele; epididymal cyst; varicocele.

MODULE-4

- 40 year old male patient presents with a midline firm swelling in the epigastrium of 2.5cms which is associated with pain after a large meal which is relieved by lying down. Patient has bloating & occasional nausea & vomiting. Swelling is not reducible.

1. What is the most probable diagnosis?
2. What are the differential diagnosis?
3. What are the complications?
4. What is the investigation of choice?



1. Epigastric hernia
2. Lipoma; neuro fibroma; fibroma; divarication of rectus; gall bladder mass.
3. Incarceration & strangulation
4. Ultrasonography abdomen