

To be filled by the candidate)

Booklet S. No. _____

Roll No. (In figures) _____

Roll No. (In words) _____

Name of the Candidate : _____

Father's Name : _____

Center of Examination : _____

Total No. of Questions : 50

Paper Code-2613

**Name of Examination- Senior Resident/Specialist Tutor Entrance 2026
Specialty-Otorhinolaryngology**

Time Allowed : 90 Minutes

Maximum Marks : 200

IMPORTANT NOTE:

- (i) OMR Answer Sheet will be supplied by the Examination Centre Superintendent for answering the questions.
- (ii) Use **Blue/Black Ink/ Ball Pen only**, to darken the appropriate circle in the OMR Answer Sheet.
- (iii) Darken one circle deeply for each question in the OMR Answer Sheet, as faintly darkened circle might be rejected by the Optical Scanner.
- (iv) Darkening of more than one circle shall be rejected by the scanner. **Over-writing, cutting, erasing or use of White Fluid is not allowed.**
- (v) Before dealing with the question paper, fill-up the required information with Blue/Black Ball Pen correctly both in the Question Booklet and in the OMR Answer Sheet.
- (vi) Do not fold the OMR Answer Sheet nor put any mark here and there to avoid rejection by the Optical Scanner.
- (vii) Write Roll. No. carefully on the OMR Answer Sheet and darken the appropriate circle properly.
- (viii) **Each question carries Four Marks while 1 mark shall be deducted for each incorrect response.**
- (ix) **Use of Calculator is not allowed.**
- (x) **No over-writing, cutting, erasing or use of white fluid is allowed.**
- (xi) Rough work be done on the sheet(s) at the end.
- (xii) **MOBILE TELEPHONES (EVEN ON SWITCH-OFF MODE) AND SUCH OTHER ELECTRONIC DEVICES ARE NOT ALLOWED INSIDE THE EXAMINATION HALL.**
- (xiii) The question paper-booklet will be retained by the candidate after the entrance test is over.

Q1. The inferior tympanic artery supplying the middle ear is a branch of:

- (a) Postauricular artery
- (b) Caroticotympanic artery
- (c) Ascending pharyngeal artery
- (d) Facial artery

Q2. The average size of the footplate of the stapes is:

- (a) 1.41×2.99 mm
- (b) 1.50×4.11 mm
- (c) 1.22×2.13 mm
- (d) 1.30×1.75 mm

Q3. Which test is similar to the Carhart test but incorporates rest periods during testing?

- (a) Olson–Noffsinger test
- (b) Owen test
- (c) Rosenberg one-minute test
- (d) Green modified tone decay test

Q4. Ear muffs and ear plugs provide attenuation in the range of:

- (a) 5–10 dB
- (b) 10–20 dB
- (c) 20–40 dB
- (d) 40–50 dB

Q5. Cochlear microphonics originate from:

- (a) Auditory nerve
- (b) Cochlear nucleus
- (c) Stria vascularis
- (d) Hair cells

Q6. A 47-year-old male presents with vertigo. ENG shows right-beating nystagmus with left ear down and left-beating nystagmus with right ear down. This finding is suggestive of:

- (a) Multiple sclerosis
- (b) Viral labyrinthitis
- (c) Positional alcohol nystagmus
- (d) Benign paroxysmal positional vertigo

Q7. ENG in a 23-year-old female with unsteadiness reveals anterior internuclear ophthalmoplegia. This is suggestive of:

- (a) Acoustic neuroma
- (b) Ménière disease
- (c) Multiple sclerosis
- (d) Subarachnoid hemorrhage

Q8. Repetition of spoken words by a child is termed:

- (a) Echolalia
- (b) Repetitive verbalization
- (c) Echolia
- (d) Apraxia

Q9. The intermediate and deep layers of the lamina propria together form the:

- (a) Vocal fold
- (b) Membranous vocal fold
- (c) Vocal ligament
- (d) Fibroblastic layer

Q10. LEOPARD syndrome—associated congenital deafness is also associated with:

- (a) Blue iris
- (b) Elevated sweat chloride
- (c) Ocular hypertelorism
- (d) Mitral insufficiency

Q11. A 4-year-old child with a cochlear implant presents with otitis media with effusion for 3 months. The appropriate management is:

- (a) Myringotomy with ventilation tube insertion
- (b) Myringotomy alone
- (c) High-dose antibiotics
- (d) Observation only

Q12. In middle fossa approach surgery for acoustic neuroma, the anterior limit of dissection is the:

- (a) Greater superficial petrosal nerve
- (b) Arcuate eminence
- (c) Middle meningeal artery
- (d) Facial nerve

Q13. The greater and lesser wings of the sphenoid are separated by the:

- (a) Superior orbital fissure
- (b) Foramen spinosum
- (c) Foramen ovale
- (d) Inferior orbital fissure

Q14. In minimal nerve excitability testing, a side-to-side difference of how many milliamperes suggests facial nerve degeneration?

- (a) 1 mA
- (b) 2 mA
- (c) 3.5 mA
- (d) 4.5 mA

Q15. Cavernous sinus thrombosis involves which cranial nerves?

- (a) III, IV, V₂
- (b) II, III, IV, V₁
- (c) III, IV, V₁, V₂
- (d) III, IV, V₁, VI

Q16. The thymus develops from the:

- (a) Ventral aspect of third pharyngeal pouch
- (b) Dorsal aspect of third pharyngeal pouch
- (c) Ventral aspect of fourth pharyngeal pouch
- (d) Dorsal aspect of fourth pharyngeal pouch

Q17. Palatoplasty using anteriorly and posteriorly based unipedicle mucoperiosteal flaps is called:

- (a) Oxford procedure
- (b) Von Langenbeck procedure
- (c) Millard procedure
- (d) Schweckendick procedure

Q18. The third most abundant serum immunoglobulin that interferes with microbial adherence is:

- (a) IgA
- (b) IgD
- (c) IgE
- (d) IgM

Q19. The triad of apical lung tumor, vocal cord paralysis, and Horner syndrome is known as:

- (a) Bourneville syndrome
- (b) Bornier syndrome
- (c) Pancoast tumor
- (d) Forney syndrome

Q20. The average distance from incisor teeth to the esophageal hiatus is:

- (a) 28 cm
- (b) 38 cm
- (c) 42 cm
- (d) 49 cm

Q21. The floor of the orbit is formed by the maxilla, zygoma, and:

- (a) Lacrimal bone
- (b) Sphenoid bone
- (c) Orbital process of palatine bone
- (d) Frontal bone

Q22. Decompression surgery for malignant exophthalmos involving ethmoidectomy and removal of the floor of frontal sinus was described by:

- (a) Kronlein
- (b) Sewell
- (c) Naffziger
- (d) Hirsch

Q23. A patient with headache, vomiting, gait disturbance, papilledema, and positional nystagmus most likely has:

- (a) Cerebellar glioma
- (b) Meningioma
- (c) Chiari malformation
- (d) Cerebrovascular accident

Q24. A patient develops polyuria (>250 mL/hour) with low urine specific gravity 18 hours after pituitary surgery. Initial treatment includes:

- (a) Desmopressin
- (b) Propranolol
- (c) Hydrocortisone
- (d) Demeclocycline

Q25. The second most common cerebellopontine angle tumor is:

- (a) Glioma
- (b) Aneurysm
- (c) Epidermoid
- (d) Meningioma

Q26. Which of the following drugs is ototoxic?

- (a) Busulfan
- (b) Melphalan

- (c) Ifosfamide
- (d) Carboplatin

Q27. The most common complication of endoscopic sinus surgery is:

- (a) Orbital emphysema
- (b) Epiphora
- (c) CSF leak
- (d) Synechiae

Q28. Which antibiotic has been shown to be beneficial in aphthous stomatitis?

- (a) Vancomycin
- (b) Clindamycin
- (c) Erythromycin
- (d) Tetracycline

Q29. The most common source of parapharyngeal space infection is:

- (a) Teeth
- (b) Tonsils
- (c) Mastoid
- (d) Floor of mouth

Q30. Taste buds are absent in:

- (a) Fungiform papillae
- (b) Foliate papillae
- (c) Filiform papillae
- (d) Filiform and foliate papillae

Q31. Onion-skin appearance on mandibular X-ray in an 18-year-old male suggests:

- (a) Ameloblastoma
- (b) Odontogenic carcinoma
- (c) Ewing sarcoma
- (d) Odontoma

Q32. A child scheduled for tonsillectomy has recently received oral polio vaccine. The appropriate management is:

- (a) Delay surgery for 6 weeks
- (b) Do not delay surgery
- (c) Delay surgery for 2 weeks
- (d) Delay vaccination until after surgery

Q33. Prevertebral soft tissue thickness at C2 level is considered abnormal if it exceeds:

- (a) 1 mm
- (b) 3 mm
- (c) 5 mm
- (d) 7 mm

Q34. Barium swallow showing esophageal dilatation, aperistalsis, and failure of LES relaxation suggests:

- (a) Diffuse esophageal spasm
- (b) Scleroderma
- (c) Achalasia cardia
- (d) Barrett esophagitis

Q35. Best investigation for suspected esophageal perforation due to foreign body is:

- (a) Motion radiography
- (b) Endoscopic ultrasound
- (c) Air-contrast esophagography
- (d) Water-soluble contrast esophagography

Q36. Loss of sensation at the base of tongue with aspiration is due to lesion at:

- (a) Foramen magnum
- (b) Jugular foramen
- (c) Hypoglossal canal
- (d) Carotid canal

Q37. Constrictor muscles of the pharynx are supplied by the:

- (a) Descendens hypoglossi
- (b) Accessory nerve
- (c) Vagus nerve
- (d) Ansa hypoglossi

Q38. A parotid mass showing increased focal uptake on radionuclide scan suggests:

- (a) Warthin tumor
- (b) Acinic cell carcinoma
- (c) Adenoid cystic carcinoma
- (d) Mucoepidermoid carcinoma

Q39. A salivary gland tumor arising from intercalated duct cells is:

- (a) Adenoid cystic carcinoma
- (b) Adenocarcinoma
- (c) Acinic cell carcinoma
- (d) Mucoepidermoid carcinoma

Q40. Deep upper jugular and lateral retropharyngeal lymphadenopathy is most commonly associated with carcinoma of:

- (a) Tongue
- (b) Buccal mucosa
- (c) Upper gingiva
- (d) Upper lip

Q41. The most important route of spread of supraglottic carcinoma is:

- (a) To pre-epiglottic space
- (b) To base of tongue

- (c) To pyriform sinus
- (d) To esophagus

Q42. Medullary carcinoma of thyroid associated with pheochromocytoma and parathyroid hyperplasia is:

- (a) MEN 2A
- (b) MEN 2B
- (c) Familial non-MEN MTC
- (d) Sporadic MTC

Q43. The most common site of deep hemangiomas in head and neck is:

- (a) Omohyoid space
- (b) Masseter muscle
- (c) Supraclavicular region
- (d) Submandibular space

Q44. A cyst arising from enamel organ before development of dental tissues is called:

- (a) Primordial cyst
- (b) Eruption cyst
- (c) Dentigerous cyst
- (d) Radicular cyst

Q45. In Grade II Sade retraction of tympanic membrane, there is:

- (a) Simple retraction
- (b) Adhesive otitis media
- (c) Middle ear atelectasis
- (d) Retraction touching incus

Q46. The theory of cholesteatoma formation involving retraction pocket deepening due to negative pressure is:

- (a) Epithelial invasion theory
- (b) Invagination theory
- (c) Basal cell hyperplasia theory
- (d) Funnel theory

Q47. During stapedectomy, if a footplate fragment enters the vestibule, the correct management is to:

- (a) Abandon surgery
- (b) Retrieve using a small hook
- (c) Drill and remove fragment
- (d) Proceed without intervention

Q48. Nasal smear showing mast cells with few eosinophils is typical of:

- (a) Allergic rhinitis
- (b) Rhinitis medicamentosa
- (c) Non-allergic eosinophilic rhinitis
- (d) Vasomotor rhinitis

Q49. The risk of malignant transformation of inverted papilloma is approximately:

- (a) 1%
- (b) 5%
- (c) 10%
- (d) 20%

Q50. Vocal cord biopsy showing acanthosis, parakeratosis, hyperkeratosis without dyskeratosis is suggestive of:

- (a) Carcinoma in situ
- (b) Verrucous carcinoma
- (c) Pseudoepithelial hyperplasia
- (d) Pachyderma laryngitis

Answer Keys

- Q1.** (c) Ascending pharyngeal artery
- Q2.** (a) 1.41×2.99 mm
- Q3.** (a) Olson–Noffsinger test
- Q4.** (c) 20–40 dB
- Q5.** (d) Hair cells
- Q6.** (c) Positional alcohol nystagmus
- Q7.** (c) Multiple sclerosis
- Q8.** (a) Echolalia
- Q9.** (c) Vocal ligament
- Q10.** (c) Ocular hypertelorism
- Q11.** (a) Myringotomy with ventilation tube insertion
- Q12.** (a) Greater superficial petrosal nerve
- Q13.** (a) Superior orbital fissure
- Q14.** (c) 3.5 mA
- Q15.** (d) III, IV, V₁, VI
- Q16.** (a) Ventral aspect of third pharyngeal pouch
- Q17.** (b) Von Langenbeck procedure
- Q18.** (a) IgA
- Q19.** (c) Pancoast tumor
- Q20.** (b) 38 cm
- Q21.** (c) Orbital process of palatine bone
- Q22.** (c) Naffziger
- Q23.** (a) Cerebellar glioma
- Q24.** (a) Desmopressin
- Q25.** (d) Meningioma
- Q26.** (d) Carboplatin
- Q27.** (d) Synechiae

- Q28.** (d) Tetracycline
- Q29.** (b) Tonsils
- Q30.** (c) Filiform papillae
- Q31.** (c) Ewing sarcoma
- Q32.** (b) Do not delay surgery
- Q33.** (b) 3 mm
- Q34.** (c) Achalasia cardia
- Q35.** (d) Water-soluble contrast esophagography
- Q36.** (b) Jugular foramen
- Q37.** (c) Vagus nerve
- Q38.** (a) Warthin tumor
- Q39.** (c) Acinic cell carcinoma
- Q40.** (a) Tongue
- Q41.** (a) To pre-epiglottic space
- Q42.** (a) MEN 2A
- Q43.** (b) Masseter muscle
- Q44.** (a) Primordial cyst
- Q45.** (d) Retraction touching incus
- Q46.** (b) Invagination theory
- Q47.** (a) Abandon surgery
- Q48.** (d) Vasomotor rhinitis
- Q49.** (c) 10%
- Q50.** (d) Pachyderma laryngitis

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