

Archive Rouh ENT

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Prepared By

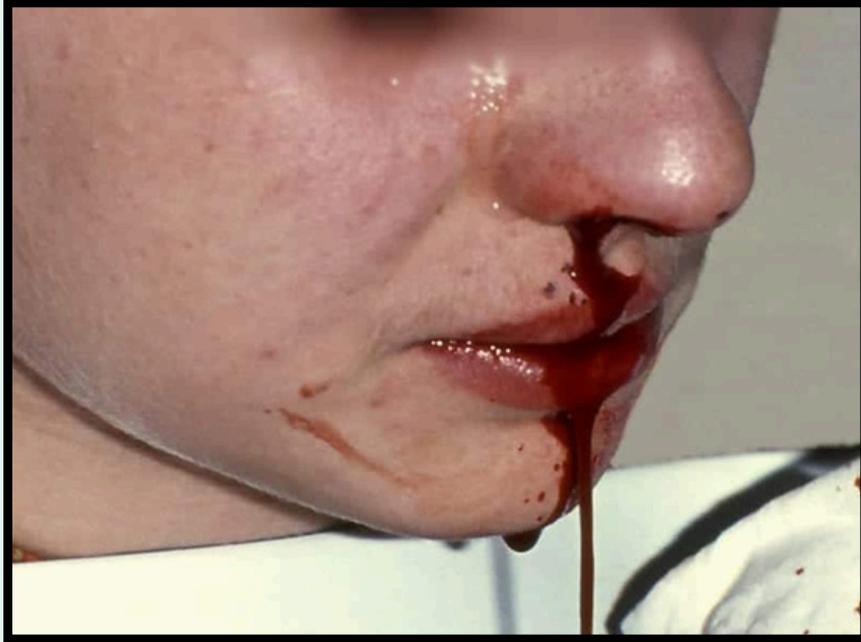
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Epistaxis



1) 62 years old female presented with severe bleeding , obvious in oropharynx , what is mostly the site of bleeding?

- A) little area
- B) kisselbalch area
- C) floor of the nose
- D) posterior nasal cavity

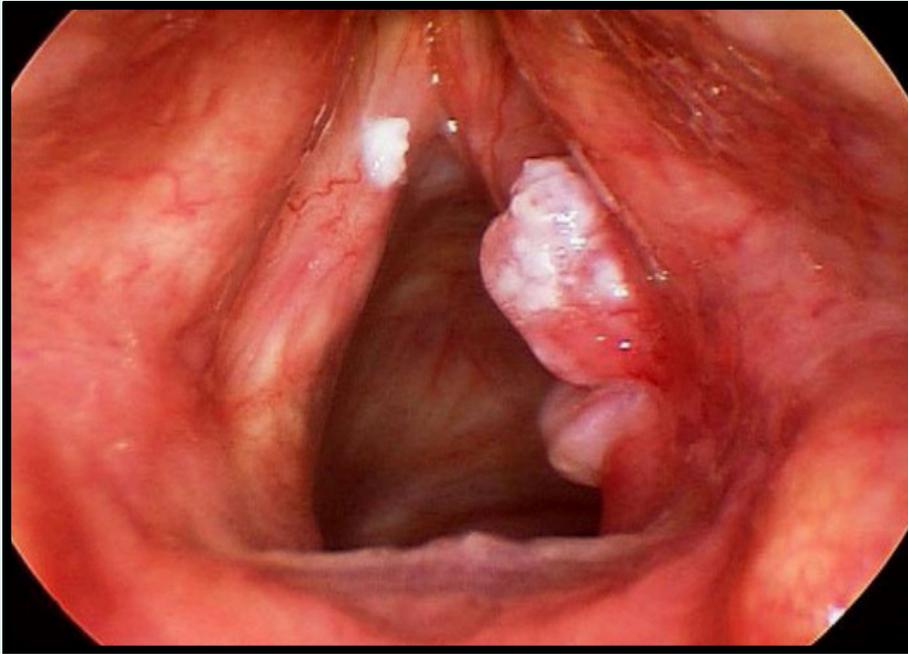
Answer: D

2) If the bleeding continue after 20 min of pressure and the dot of bleeding is not visible, she is tachycardic with no sign of volume depletion , what is your next step ?

- A) continuous pressure and send to home
- B) cautherazation
- C) posterior packing
- D) ligation
- E) Topical Vasoconstrictors

Answer: C

Laryngeal cancer



3) A 57-year-old man with a 40-pack-year smoking history has hoarseness for 3 months. What is the most likely diagnosis?

- A) Recurrent respiratory papillomatosis
- B) laryngeal cancer
- C) Contact granuloma of the vocal process
- D) Candidal laryngitis
- E) Vocal fold polyp

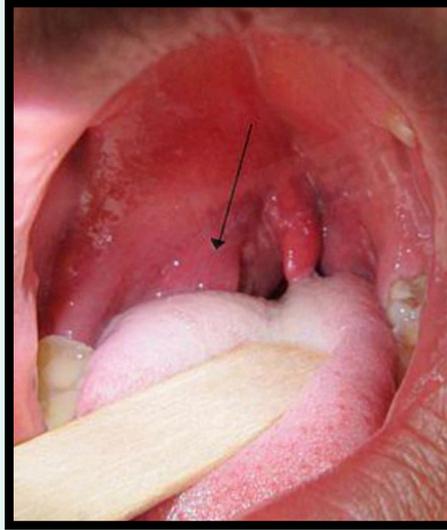
Answer: B

4) The same patient's lesion appears suspicious for malignancy on office endoscopy. What is the next best step to establish the diagnosis and plan treatment?

- A) Start a proton-pump inhibitor trial and recheck in 6 weeks
- B) Oral antibiotics and voice therapy
- C) Direct laryngoscopy with biopsy
- D) PET-CT whole body
- E) Contrast CT of the neck as the only study

Answer: C

Tonsillitis and Adenoiditis



5) A 27-year-old presents with fever, severe sore throat, trismus, and unilateral soft-palate bulging with uvular deviation. What is the most likely diagnosis?

- A) parapharyngeal abscess
- B) Peritonsillar abscess
- C) Retropharyngeal abscess
- D) Acute epiglottitis

Answer: B



6) A patient presents with fever, sore throat, and a physical examination showing a beefy red pharynx with tonsillar exudates. What is the 1st line treatment if the patient doesn't have penicillin sensitivity?

- A) clindamycin
- B) azithromycin
- C) amoxicillin

Answer: C



7)Based on the clinical photograph, what is the most common presenting symptom in this child?

- A) Hyponasal speech
- B) Stridor
- C) Dysphagia
- D)Hoarseness

Answer:A

8)5 years old Child is candidate for adenoidectomy, what is the relative contraindication ?

- A)age below 6 years
- B)bifid uvula with hyper nasal speech
- C)choanical obstruction
- D)OME

Answer: B

Stridor



9)32 female with hoarseness in voice , what is your diagnosis?

- A)vocal cord nodule
- B)vocal cord edema
- C)vocal cord polyps

Answer:A

10)What is your management?

- A)surgery
- B)speech therapy
- C)stop smoking

Answer:B

otitis media



11) What is the fibrous part that extended obliquely backward and downward in malleus?

- A) anterior malleolar fold
- B) posterior malleolar fold
- C) manubrium of malleus
- D) pars tensa
- E) annulus ring

Answer:C

12) Child with AOM for 4 days, now he is anxious and has post auricular pain, fever, headache, Redness and swelling behind ear, what is your next step?

- A) give antibiotics and discharge
- B) IV antibiotic and Temporal imaging

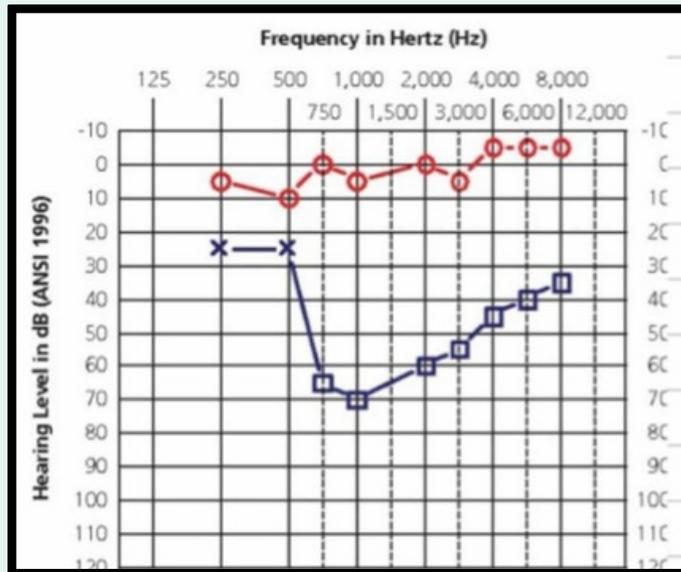
Answer:B

Hearing assessment and hearing loss

13) 40 years old female with episodic vertigo lasting for 20-40 min, aural fullness and tinnitus in right ear, head impulse test is normal, neurological examination between attack is normal, what do you think audiogram will be show?

- A) bilateral SNHL
- B) unilateral down sloping low frequency SNHL
- C) unilateral up sloping low frequency SNHL
- D) unilateral CHL
- E) normal hearing threshold

Answer:C

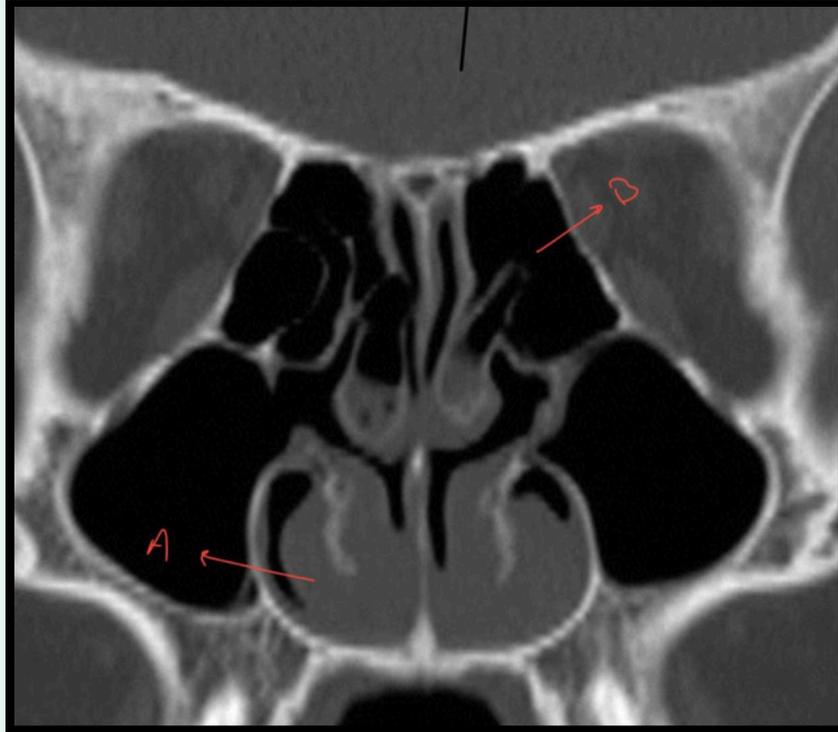


14) Which is the best next step to evaluate this patient's asymmetric unilateral SNHL?

- A) High-dose oral corticosteroids for 2 weeks
- B) CT temporal bone without contrast
- C) MRI of the internal auditory canals/cerebellopontine angle with contrast
- D) Immediate stapedectomy
- E) Observation and repeat audiogram in 1 year

Answer:C

Rhinosinusitis



15) 23 years old male with nasal obstruction, One is true regarding this sinus:

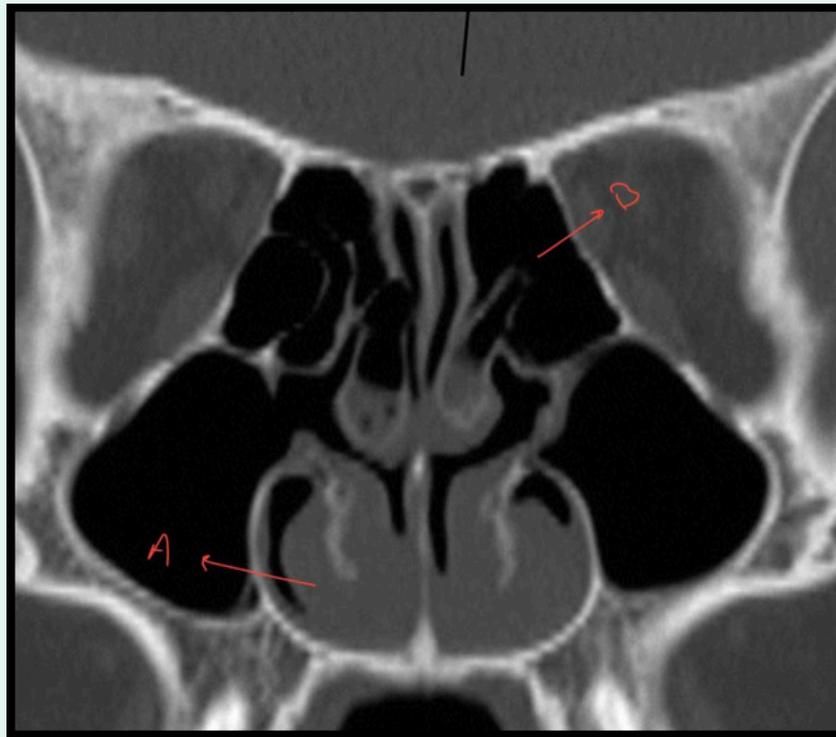
- A) A is pylocele
- B) B is frontal sinus
- C) this view helpful to see inferior and middle concha
- D) Shows severe nasal deviation
- E) endoscopy shows nasal polyps

Answer: C

16) What is your based diagnosis?

- A) nasopharyngeal fibroma
- B) allergic rhinitis
- C) CRSw polyps
- D) acute bacterial rhinosinusitis
- E) Nasal septum deviation

Answer: B



17)What is your next step ?

- A) skin prick and drug history inquiry
- B) intranasal corticosteroid
- C) culture and antibiotics
- D)FESS

Answer:A

18)4) A56 years old male Patient presented with mass arise from lateral pharyngeal wall, causing epistaxis, facial pressure, nasal obstruction and facial parasthesia, which favours more malignancy than inflammatory condition ?

- A) smoking history
- B) cranial nerve damage
- C) allergic history
- D)facial pain
- E)period >8 weeks

Answer:B

Vertigo

19) Patient came with severe nausea, vomiting and vertigo lasting for 24 hours, no hearing loss, eye deviate to left when head turning to right, nystagmus horizontal unidirectional, what is your management ?

- A) vestibular suppressant and anti emetic for short term
- B) long term vestibular suppressant
- C) corticosteroids
- D) Epley maneuver

Answer:A

Sinonasal tumors

20) There is resectable squamous cell carcinoma arise from maxillary sinus, no nodal mets or invasion, what is your next step?

- A) radiotherapy alone
- B) biopsy then radiotherapy
- C) surgical resection with adjuvant radiotherapy
- D) FESS
- E) chemotherapy

Answer:C