- 1. Hellotrope rash is the characteristic of following disease
 - a. Systemic lupus erythmatosis
 - b. Dermatomyositis
 - c. Systemic sclerosis
 - d. Sjogren syndrome
 - e. Polymyelgia reuhmatica
- 2. All of the following are characteristics of System Lupus Erythmatosis except
 - a. Malar rash
 - b. Discoid rash
 - c. Photosensitivity
 - d. Joint pain
 - e. Heliotrope rash
- 3. A two-year-old child presented with thin-walled vesicle which soon ruptured resulting in honey color crust on face...what is the diagnosis
 - a. Folliculitis
 - b. Furucle
 - c. Cabucle
 - d. Impetigo
 - e. Herpes simplex
- 4. 23-year-old patient presents with erythmatous scaly plaques on extensor surfaces of knee and elbow. on examination there silvery scaly plaques and and on removal of scales pin point bleeding spots are revealed (auspitz's sign positive). What is the diagnosis
 - a. Lichen plannus
 - b. Psoriasis
 - c. Eczema
 - d. Erythema multiforme
 - e. Pityriasis rosea
- 5. A patient presents with pruritic papule on volar surface of wrist and legs. On examination there are purple polygonal plane papule. What is the diagnosis
 - a. Psoriasis
 - b. Lichen plannus
 - c. Allergic contact dermatitis
 - d. Papular drug rash
 - e. Eczema
- 5. A patient presented to ER with purpric macules and targetoid lesion with blistering with more then 30 percent of body surface area involvement the patient is known case of epilepsy & there is recent history of commencement of carbamazepine drug. What is the diagnosis
 - a. Erythema multiforme
 - b. Steven's johnson syndrome
 - c. Toxic epidermal neurolysis
 - d. Drug rash
 - e. Systemic lupus erythmatosis

- 7. A patient presents with blistering formation in oral cavity ang skin on examination the blisters are flaccid easily ruptured nikolsky sign is positive. What is your diagnosis
 - a. Bullous pemphigoid
 - b. Bullous impetigo
 - c. Pemphigus vulgaris
 - d. Dermatitis herpetiformis
 - e. Bullous drug eruption
- 8. A known case of celeic disease presented with intensely pruritic vesicles on knees elbows and buttocks. Biopsy shows sub epidermal blistering &a diagnosis of dermatitis herpetiformis is made. What is the drug of choice in this case..
 - a. Topical steroid
 - b. Systemic steroids
 - c. Azotioprin
 - d. Dapson
 - e. Non of the above
- 9. Which one of the following drugs is contra indicated in psoriasis
 - a. Topical steroid
 - b. Systemic steroids
 - c. Azotioprin
 - d. Acetretin
 - e. Non of the above
- 10. What is the causative organism in warts
 - a. Human papilloma virus
 - b. Human herpes virus
 - c. Herpes simplex virus
 - d. Molluscum virus
 - e. Non of the above
- 11. All of the following are the causes of erythroderma except
 - a. Psoriasis
 - b. Eczema
 - c. Crusted scabies
 - d. Lichen plannus
 - e. Non of the above
- 12. A known case of HIV AIDS presents with red purple papule and nodule on face and chest. Wathin starry silver stain reveal bacilli bartonella henselae.what is the diagnosis
 - a. Kaposi sarcoma
 - b. Bacillary angiomatosis
 - c. Cherry angioma
 - d. Molluscum contagiosum
 - e. Non of the above
- 13. You review a 40-year-old mechanic who presents with joint pains. For the past two months he has noticed intermittent pain, stiffness and swelling of the joints in his hands and feet. The stiffness tends to improve during the day but the pain tends to get worse. You order some blood tests (taken during an acute attack) which are reported as follows: Rheumatoid factor: Negative

Anti-cyclic citrullinated peptide antibody: Positive

Uric acid 0.3 mmol/l (0.18 - 0.48) ESR 41 mm/hr

What is the most likely diagnosis?

- a. Reactive arthritis
- b. Ankylosing spondylitis
- c. Gout
- d. Osteoarthritis
- e. Rheumatoid arthritis
- 14. A 71-year-old male undergoes an ultrasound scan for an acutely painful right knee associated with swelling. An ultrasound scan conforms the presence of an effusion and states the 'double contour' sign was observed. Join aspiration showed negative birefringent crystals. What is the most likely diagnosis?
 - a. Jaccoud's arthropathy
 - b. Gout
 - c. Septic arthritis
 - d. Haemarthrosis
 - e. Osteoarthritis



- 15. A 40-year-old woman who is known to have systemic lupus erythematosus is reviewed with an exacerbation of wrist pain. Which one of the following is the most useful marker for monitoring disease activity?
 - a. C-reactive protein
 - b. C2 levels
 - c. Anti-nuclear antibody titres
 - d. Anti-dsDNA titres
 - e. Anti-Sm titres
- 16. A 24-year-old nulliparous female with a history of recurrent deep vein thrombosis presents with shortness of breath. The full blood count and clotting screen reveals the following results:

12.4 g/dl Platelets 137,000 WBC 7500 PT 14 secs APTT 46 secs

What is the most likely underlying diagnosis?

- a. Third generation oral contraceptive pill use
- b. Protein C deficiency
- c. Antithrombin III deficiency
- d. Antiphospholipid syndrome
- e. Activated protein C resistance
- 17. What is Clinical Governance?
 - a. An effective way to handle complaints
 - b. A healthcare policy for patient satisfaction
 - c. Accountability to improve the quality of services
 - d. The government policy for controlling the hospitals
- 18. In a standard practice to avoid medications error what percentage of our prescriptions must be clinically reviewed by our pharmacist?
 - a. 25%
 - b. 50%
 - c. 75%
 - d. 100%
- 19. A young boy presented to Emergency department with acute abdominal pain, low grade fever, and vomiting, His CBC showed leukocytosis and a diagnosis of acute appendicitis was made, he was scheduled for an urgent operation for fear of perforation. What is the best word to describe the probability of perforation here
 - a. Hazard
 - b. Incident
 - c. Injury
 - d. Risk
- 20. A clinical incident is an event or circumstance resulting from health care which could have, or did lead to unintended harm to a person, loss or damage, and/or a complaint. (Deviation from standard of care and safety), all of the below options are the examples of causes except
 - a. Medication error
 - b. Documentation error
 - c. Therapeutic equipment failure
 - d. Theft incident in the hospital parking
- 21. Which of the following best defines patient safety in healthcare?
 - a. Ensuring patient receive the correct medication
 - b. Maintaining a clean and organized hospital environment
 - c. Preventing harm to patients during health care delivery
 - d. Providing emotional support to the patients and their families
- 22. Mentzer index is a useful tool to differentiate iron deficiency anemia from B-thalassemia. It is calculated as
 - a. Mcv/Hct
 - b. Rbs count/Mcv
 - c. RBC count/Mcv
 - d. Mcv/RBC count
- 23. Direct coombs test detects
 - a. Antibodies on platelets surface
 - b. Antigens attached to rbc surface
 - c. Antibodies attached to rbc surface
 - d. Antibodies in the serum
- 24. A 30 year old man presented with 3 months history of fever and weight loss. O/E there is palpable right axillary lymph nodes and hepatosplenomegaly. P/smear shows leucopenia but no blast cells. Next best step in management is ?
 - a. Tuberculin skin test
 - b. Lymph node biopsy
 - c. Ct chest and abdomen
 - d. Pet (positron emission tomography)



- 25. A 18 year girl was brought to hospital with petechiae and non traumatic bruises with history of polymenorhagia. O/E there is no lymphadenopathy, no hepatosplenomegaly, no history of anticoagulants and CBC is normal. Most likely diagnosis is ?
 - a. Haemophilia
 - b. Leukemia
 - c. Sepsis/dic
 - d. Von-willibrand disease
- 26. A 37 year old male presented with fatigue, angular stomatitis and lower limb weakness. Hb and serum ferritin level is normal while serum B12 levels are awaited. On blood film most probable finding will be
 - a. Anisocytosis
 - b. Macrocytosis
 - c. Blast cells
 - d. Microcytosis
- 27. A 3 year boy with post-circumcision bleeding, no history of fever or anticoagulant drugs. Labs are awaited. Meanwhile the best management after dressing and pressure packing to stop bleeding is ?
 - a. Blood transfusion
 - b. I/v tranexamic acid
 - c. Factor viii infusion
 - d. Factor x infusion
- 28. A 25 year male from Topi started on treatment for plasmodium Vivax malaria, few days later he came with jaundice and anemia. Blood film shows Heinz bodies, LDH is high, retic counts are 3%, indirect bilirubin is 12 mg/dl and direct bilirubin is 1 mg/dl. What is the most likely diagnosis?
 - a. Sepsis and DIC
 - b. Hereditary spherocytosis
 - c. G6PD deficiency
 - d. Sickle cell anemia
- 29. A 30 year old male presented with history of fever anemia and weight loss. He is an I/V drug abuser. O/E he is febrile, tachycardiac, Chest is clear and there is early systolic murmur at mitral area Labs are awaited, what is the most likely diagnosis?
 - a. Pulmonary TB
 - b. HIV sero-conversion
 - c. Sub acute bacterial endocarditis
 - d. Malignant disease processes
- 30. A 30 year male was brought with non-traumatic haemarthrosis of right knee. Rest of examination is normal. Labs are as follow CBC- normal PT- normal APTT- prolonged

What is the most likely diagnosis?

- a. Warfarin disease
- b. Von-willibrand disease
- c. Christmas disease
- d. Factor viii deficiency
- 31. Lady diagnosed case of ITP came to medical consultation because she is worried for her low platelet count of 50000 (150000-450000). Currently she has no fever or coagulopathy. BP- 120/80, Pulse 70/min. What is the best management plan for her?
 - a. Reassure her, no treatment yet required
 - b. Prednisolone 1mg/kg for 21 days
 - c. I/v immunoglobulins
 - d. D) low dose rituximab
- 32. A 45 year old male presented with massive splenomegaly with no hepatosplenomegaly and lymphadenopathy. CBC shows Hb 11g/dl, WBC 70000 and platelets 200,000. What is the most likely diagnosis?
 - a. Chronic malaria
 - b. Chronic myeloid leukemia
 - c. Myelofibrosis
 - d. Visceral leishmaniasis
- 33. A 18 year boy, farmer, presented with lethargy and early fatigue. CBC shows Hb-11 g/dl, RBC 5.52, Mcv 55 fl, platelets 220000, WBC 6300, serum ferritin 800 ng/ml (12-300). What is the most likely diagnosis?
 - a. Iron deficiency anemia
 - b. Sideroblastic anemia
 - c. Thalassemiac trait
 - d. Lead poisoning



- 34. A 26 year old female diagnosed with unprovoked DVT. Her thrombophilia screen is performed. What abnormality is most likely expected?
 - a. Lupus anticoagulant excess
 - b. Protein c excess
 - c. Protein s excess
 - d. Factor v laden mutation
- 35. Most common inherited bleeding disorder is
 - a. Haemophilia A
 - b. Haemophilia B
 - c. Anti thrombin III disease
 - d. Von-willibrand disease
- 36. A 65 year male presented with fever since 3 months, weight loss and night sweats. CBC is normal . O/E there is right cervical lymphadenopathy , no hepatosplenomegaly and no petechiae/bruises. What is most likely diagnosis?
 - a. Acute lymphoblastic leukaemia
 - b. Aplastic anemia
 - c. Viral fever
 - d. Extra pulmonary tb
- 37. A 24 years male with one week history of fever and sore throat. Blood film shows leucopenia and thrombocytopenia with normal Hb levels. O/E there is generalized lymphadenopathy and hepatosplenomegaly. Most probable diagnosis is
 - a. Acute drug reaction
 - b. Acute viral fever
 - c. Lymphoma
 - d. Storage disease
- 38. hemolytic anemia is suggestive if
 - a. Serum heptoglobin level is high and retic count is low
 - b. Heptoglobin low and retic count high
 - c. Both heptoglobin and retic count are high
 - d. Both heptoglobin and retic count are low
- 39. Clotting factors deficiency can cause?
 - a. Petechiae and bruises
 - b. Splenic infarcts
 - c. Polymenorhagia
 - d. Intra cerebral bleed
- 40. Elective splenectomy is indicated in?
 - a. Sickle cell anemia
 - b. Hereditary spherocytosis
 - c. Acute leukemia
 - d. Splenomegaly
- 41. lead poisoning can cause anemia with?
 - a. Microcytosis and basophilic stippling
 - b. Macrocytosis and basophilic stippling
 - c. Microcytosis and heinz bodies
 - d. Macrocytosis and heinz bodies
- 42. Vitamin B12 deficiency causes macrocytic anemia with?
 - a. Tear drop cells
 - b. Hyper segmented neutrophils
 - c. Smudge cells
 - d. Howell jolly bodies
- 43. Which one of the following features is least commonly seen in drug-induced lupus?
 - a. Glomerulonephritis
 - b. Arthralgia
 - c. Myalgia
 - d. Malar rash
 - e. Pleurisy
- 44. An autoantibody screen reveals that a patient is positive for anti-Jo 1 antibodies. What is the most likely underlying diagnosis?
 - a. Limited cutaneous systemic sclerosis
 - b. Mixed connective tissue disease
 - c. Dermatomyositis
 - d. Polymyositis
 - e. Diffuse cutaneous systemic sclerosis



- 45. Perinuclear antineutrophil cytoplasmic antibodles (pANCA) are most strongly associated with which condition?
 - a. Goodpasture's syndrome
 - b. Churg-Strauss syndrome
 - c. Polyarteritis nodosa
 - d. Wegener's granulomatosis
 - e. Autoimmune hepatitis
- 46. A 68-year-old female presents with a two week history of Intermittent headaches and letharay. Blood tests reveal the following: ESR 67 mm/hr What is the most likely diagnosis?
 - a. Polymyalgia rheumatica
 - b. Cluster headaches
 - c. Polyarteritis nodosa
 - d. Migraine
 - e. Temporal arteritis
- 47. Which of the following findings is not typical in a patient with antiphospholipid syndrome?
 - a. Prolonged APTT
 - b. Thrombocytosis
 - c. Recurrent venous thrombosis
 - d. Recurrent arterial thrombosis
 - e. Livedo reticularis
- 48. A 31-year-old female with a history of SLE gives birth following a 39 week pregnancy. The newborn is noted to be bradycardich one of the following autoantibodies are associated with congenital heart block?
 - a. Anti-Ro
 - b. Anti-Sm
 - c. Anti-RNP
 - d. Anti-ds DNA
 - e. Anti-Jo 1
- 49. A 45-year-old woman is referred to rheumatology outpatients with a 4month, History of joint pains, myalgia and generalised lethargy. An autoantibody Screen reveals she is ANA positive and antirhonucleoprotein positive. The creatine kinase is elevated at 525. What is the most likely diagnosis?
 - a. Systemic lupus erythematous
 - b. Mixed connective tissue disease
 - c. Polymyositis
 - d. Dermatomyositis
 - e. CREST syndrome
- 50. Which one of the following is least recognised as a risk factor for developing osteoporosis?
 - a. Multiple myeloma
 - b. Rheumatoid arthritis
 - c. Long-term phenytoin therapy
 - d. Chronic renal failure
 - e. Diabetes mellitus
- 51. A 68-year-old female presents with a two week history of intermittent headaches and letharay. Blood tests reveal the following: ESR 67 mm/hr What is the most like diagnosis?
 - a. Polymyalgia rheumatica
 - b. Cluster headaches
 - c. Polyarteritis nodosa
 - d. Migraine
 - e. Temporal arteritis
- 52. A 69-year-old man presents with an acute episode of gout on his left first metatarsal-phalangeal joint. What is the most likely underlying mechanism?
 - a. Sedentary lifestyle
 - b. Decreased renal excretion of uric acid
 - c. Increased endogenous production of uric acid
 - d. Starvation
 - e. Too much protein in diet
- 53. A 50-year-old man with no past medical history is investigated for ongoing back pain. He is found to have a vertebra collapse secondary to osteoporosis. What is the most appropriate test determine the cause of his osteoporosis?
 - a. Thyroid function tests
 - b. Prostate specific antigen
 - c. Oestrogen level
 - d. Prolactin level
 - e. Testosterone level

5	54.	Which one of the following features is least typical of Dolymyalgia rheumatica?	
		a. Elevated creatinine kinase	
		b. Low-grade fever	
		c. Morning stiffness in proximal limb muscles	
		d. Polyarthralgia	
		e. Anorexia	
5		Which of the following structures requires homeostasis of blood glucose even during starvation for proper functioning?	
n de T		a. Renal medullae	
		b. Liver parenchyma	
		c. Lung alveoli	
		d. Intestinal mucosa	
		e. Spleen	
5	6.	How much percentage of our total caloric requirements should be fulfilled from proteins?	
		a. 10%	
	١١	b. 20%	
		c. 30%	
		d. 40%	
		e. 50%	
5	7. 1	A 40 yrs aged female patient underwent cholecystectomy for her gall stones. She shifted to ward after surgery but drain attached to her abdomen, is filled with blood. Her Hb is 7 gm % after surgery. Which of the following is grade of her	
		complication?	
	t) . II	
	(
		i. IV	
		e. V	
58	8. /	A 45 years obese lady shifted to surgical ward from operation theatre after cholecystectomy. She is breathing	
		pontaneously but she is hypoxemic. How much oxygen should be immediately administered to bring her saturation to	
		normal?	
		. 2L/MIN	
		. SL/MIN	
		. 10 L/MIN	
		. 15L/MIN . 20L/MIN	
50		n which of the following surgeries, Rose's position is used?	
33		Cholecystectomy	
		Gastrectomy	
	c.	가 보면, "PRANG 3: 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	
	d.	다른 얼마를 바꾸 부터졌다. 그는 다른 사람들은 그들은 얼마를 가는 것이 없는 것이다. 그런 그는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이다.	
	e.		
60.		hich of the following suture material is completely absorbed in 60-90 days?	
	a.	Catgut	
	b.	PDS	
	c.	Prolene	
	d.	Silk	
	e.	Vicryl	
61.	W	hich of the following is the basis of laparoscopic surgery over traditional surgery?	
	a.	Economical	
	b.	Less wound infection	
	c.	Less bleeding	
		Less stitches	
	e.	Less tissue trauma	
62.	W	hich of the following are common indicators for TPN therapy?	
	a.	Coma, citrate toxicity	
		Bowl surgery	
	c.	Renal failure, prolonged ileus	
	d.	Hepatic failure, hypermetabolic state	
	e.	Gastrocutaneous fistule	
		· 프로프로 프로프로 National Part (1975-1987) - 1. 2017 (1987-1987) - 1. 2017 (1987-1987-1987-1987-1987-1987-1987-1987-	

63. Keeping in view ERAS (enhanced recovery after surgery) protocols, what should be maximum period of nill per orally

before elective suregry?

a. 24 hrsb. 20 hrsc. 15 hrsd. 10 hrse. 4 hrs

- 64. A 85 years old male patient has decreased his intake of animal protein and increased his intake of whole grain toast, cereal and salads over the past 12 months. Which of the following micronutrient deficiencies is he at risk for?
 - a. Chromium
 - b. Folate
 - c. Magnesium
 - d. Selenium
 - e. Zinc
- 65. 45 years aged lady presented with history of burns in kitchen while cooking. Out of stress she started to run and by the time relatives were able to stop fire, her whole back got burns.

What percent TBSA you expect, she would have

- a. 20%
- b. 18%
- c. 9%
- d. 36%
- 66. 30 years aged male working in coal mines got burns after blast there. The patient was rushed to burns ER by rescue personnel. You were called to come and assess him What will be your first step in management
 - a. Assess according to ATLS protocol
 - b. Assess for Inhalational injuries
 - c. Assess his Oxygen saturation
 - d. Assess his burns size and depth
- 67. 4 years aged child got burns with with hot milk after immersion in to hot pot. The child was immediately rescued and rushed to burns ER. What type of burns you expect from history?
 - a. First degree burns
 - b. Second degree burns
 - c. Third degree burns
 - d. Fourth degree burns
- 68. Middle aged male got electric burns and was brought to the emergency department. After giving first aid treatment, the patient was resuscitated with IV funds and mannitol How will you Assess that the patient is adequately resuscitated
 - a. Patient vitals
 - b. Urine output
 - c. Capillary refill
 - d. Patient gross appearance
- 69. Middle aged female got burns while trapped in the kitchen. The patient TBSA burnt was calculated and was 24% What is single most important prognostic factor?
 - a. Patient's age
 - b. Patient's gender
 - c. TBSA burns
 - d. Inhalational injury
- 70. A 20-year-old pregnant woman presents with anemia and a history of heavy menstrual bleeding. What additional investigation would help confirm iron deficiency as the cause
 - a. Bone marrow biopsy
 - b. Hemoglobin electrophoresis
 - c. Serum ferritin levels
 - d. Serum vitamin B12 levels
- 71. A 30-year-old pregnant woman presents with anemia, and the CBC shows a microcytic, hypochromic picture. What additional investigation can help differentiate between iron deficiency anemia and thalassemia trait
 - a. Hemoglobin electrophoresis
 - b. Reticulocyte count
 - c. Serum ferritin levels
 - d. Serum iron levels
 - e. Serum vitamin B12 levels
- 72. A 30 years old male patient presented with severe headache and increased blood pressure. Which imaging modality is most appropriate for further investigation.
 - a. Ct brain
 - b. Ct PNS.
 - c. MRI brain
 - d. X-ray skull
 - e. X-ray neck

- 73. A neonate is found to have petechial spots all over body with gum bleeding and hematuria after a full term normal vaginal delivery. CBC showing normal Hb and WBC with platelet count of 10,000/mm3. Peripheral smear examination is normal. Mother did not have any major problem during pregnancy and has no h/o any autoimmune thrombocytopenia or other autoimmune disease and having a platelet count of 1,70,000/mm3. What urgently to be done?
 - a. Platelet administration (random)
 - b. Administer mother's platelet
 - c. Steroids
 - d. High dose IVIg
 - e. HPA matched platelet transfusion
- 74. Commonest inherited cause of thrombosis in Caucasians is:
 - a. Protein S deficiency
 - b. Factor V leiden mutation
 - c. Anti thrombin III deficiency
 - d. Protein C deficiency
- 75. A patient with sickle cell anemia should avoid the following:
 - a. Swimming
 - b. Dehydration
 - c. Pneumococoal immunization
 - d. Early antibiotics for respiratory infection
- 76. A 7 year old girl was found to have a Hb of 7.8 gm/dL with reticulocyte count of 0.8%. Peripheral Smear showed microcytic hypochronic anemia. Hb A2 and Hb F levels were 2.4% and 1.3% respectively. Serum iron and TIBC were 15 mgm/dL and 420 mgm/dL repectively. The likely diagnosis is:
 - a. IDA b.
 - b. B thalassemia minor
 - c. Sideroblastic anemia
 - d. Anemia of chronic inflammation
- 77. A patient present with increased serum iron, decreased TIBC, increased percentage saturation and increased S. Ferritin. Most likely diagnosis is:
 - a. Anemia of chronic disease
 - b. Sideroblastic anemia
 - c. Iron deficiency anemia
 - d. Thalassemia major
- 78. Direct Coomb's test may be positive in:
 - a. Immediate post transfusion
 - b. Thalassemia major
 - c. Hereditary spherocytosis
 - d. PNH
- 79. A 6-month-old untransfused child presented with lethargy, failure to thrive and looking pale. CBC is showing Hb of 5.6, MCV-58 fl and peripheral blood picture showing microcytic hypochromic red cells, target cells and anisopoikilocytosis. Hb HPLC is showing Hb F of 100%. The most likely diagnosis is:
 - a. A thalassemia b. β thalassemia c. B thalassemia major d. HPF
- 80. The most common cause of beta thalassemia is:
 - a. Point mutation b. Insertion c. Deletion d. All are equally distributed
- 81. A neonate is born with a large cephalohematoma after full term normal vaginal delivery. His screening coagulogram is showing Normal PT and platelet count with prolonged APTT. There is no family h/o any bleeding. The preferred next course of action would be:
 - a. Despropressin
 - b. Collect sample for specific factor assay and give FFP
 - c. Recombinant factor VIII as hemophilia A is most likely
 - d. Transfer to specialist
- 82. A child of 5 years of age presented with severe anemia, reticulo cytopenia, febrile illness associated with typical cutaneous emptions, arthralgia and arthritis. BM showed giant pronormoblast. Most likely etiological agent in this condition is:
 - a. Hepatitis B virus infection
 - b. CMV infection
 - c. Parvovirus B 19 infection
 - d. Inherited marrow failure syndrome
- 83. For very severe aplastic anemia, ANC should be:
 - a. < 200/mm3
 - b. < 500/mm
 - c. <1000
 - d. <1500

- 84. Which of the following statements is correct about post-splenectomy infection?
 - a. Prophylaxis with oral penicillin 250 mg is recommended for life
 - b. Patient should not travel to malaria endemic area
 - c. Inactivated vaccines are not useful in preventing infections
 - d. Patients should be monitored for viral infections particularly herpes
- 85. A 10 years old girl presented with bruises and fever for the last two weeks. On examination she is pale however there is no Hepatosplenomegaly or lymphadenopathy. Her Hb is 6gm/dL TLC 2700 Platelets count 90000. The most important investigation to reach the diagnosis is:
 - a. Bone marrow aspiration
 - b. Retic count
 - c. PT/APTT
 - d. Bleeding time
 - e. Factor VII Assay
- 86. A 5 year old boy came to OPD with complaints of joint swelling after minor trauma. Mother gives history of prolonged bleeding from circumcision site. His platelet count is 170000 PT 12 Seconds and APTT is 65 Seconds. What is your diagnosis.
 - a. ITP
 - b. Platelets function defect.
 - c. Von willibrand disease.
 - d. hemophilia
 - e. Vitamin k defeciency.
- 87. A hemoglobin and hematocrit is obtained from a 12-month-old who came to his pediatrician's office for a checkup. Which of the following best describes the normal (average) hemoglobin concentration at 1 year of age?
 - a. 17 g/dL b. 15 g/dL c. 12 g/dL d. 10 g/dL
- 88. A 12-year-old child presents to the pediatric intensive care unit in shock with evidence of disseminated intravascular coagulation. Blood culture reveals lancet-shaped, gram-positive cocci in pairs. You suspect S pneumoniae infection. Which of the following underlying diseases places them at increase risk for invasive pneumococcal infection in terms of incidence and severity?
 - a. underlying liver disease b. sickle cell disease c. valvular cardiac disease d. cystic fibrosis
- 89. A 3-year-old girl is seen in the emergency department for bruising. Her family denies fever or weight loss but states she had a "cold" 3 weeks ago. She is afebrile and the remaining vital signs are normal. She is happy and playful and has generalized ecchymoses and petechiae. 54. What should be the first test you obtain?
 - a. Bone marrow aspirate
 - b. Neiserria meningitidis latex assay of the cerebrospinal fluid
 - c. Rickettsia rickettsiae serology
 - d. Complete blood count and differential
- 90. While working in Paediatric OPD you often come across with children having limping on/off. Which of the following is the most common cause of limp in children?
 - a. Septic arthritis
 - b. Transient synovitis
 - c. Osteomyelitis
 - d. Legg-Calvé-Perthes disease
- 91. A 10-year-old boy presents with pain and swelling in his right knee for two weeks. He also has fever, malaise, and weight loss. His blood tests show elevated white blood cell count, erythrocyte sedimentation rate, and C-reactive protein. What is the most likely diagnosis?
 - a. Juvenile idiopathic arthritis
 - b. Rheumatic fever
 - c. Osteosarcoma
 - d. Osteomyelitis
- 92. A 6-year-old girl complains of pain in her left hip that radiates to her thigh and knee. She walks with a limp and prefers to rest her hip in a flexed and externally rotated position. Her hip range of motion is limited and painful. X-ray shows a flattened and irregular femoral head. What is the most likely diagnosis?
 - a. Slipped capital femoral epiphysis
 - b. Developmental dysplasia of the hip
 - c. Legg-Calvé-Perthes disease
 - d. Congenital coxa vara

- 93. A 14-year-old boy presents with sudden onset of severe groin pain after twisting his left leg while playing soccer. He is unable to bear weight on his left leg and his hip is fixed in a flexed and internally rotated position. X-ray shows displacement of the femoral head from the femoral neck. What is the most likely diagnosis?
 - a. Slipped capital femoral epiphysis
 - b. Developmental dysplasia of the hip
 - c. Legg-Calvé-Perthes disease
 - d. Congenital coxa vara
- 94. A 4-year-old boy presents with painless bowing of his legs. His parents report that he was born prematurely and had rickets as an infant. He has normal growth and development otherwise. His serum calcium, phosphorus, and alkaline phosphatase levels are normal. Xray shows widening and cupping of the metaphyses of the long bones. What is the most likely diagnosis?
 - a. Nutritional rickets
 - b. Renal rickets
 - c. Vitamin D-dependent rickets type 1
 - d. Vitamin D-resistant rickets type 2
- 95. A 12-year-old girl presents with pain and stiffness in multiple joints, especially in the morning. She also has low-grade fever, rash, and lymphadenopathy. Her blood tests show positive antinuclear antibody (ANA) and rheumatoid factor (RF). What is the most likely diagnosis?
 - a. Juvenile idiopathic arthritis
 - b. Systemic lupus erythematosus
 - c. Kawasaki disease
 - d. Henoch-Schönlein purpura
- 96. A 7 years old boy came to OPD with difficulty with rising up from sitting position. Examination reveals hypertrophy of calf muscles with trendelenburg gait. The most likely diagnosis is
 - a. Becker Muscular dystrophy
 - b. Duschene muscular dystrophy.
 - c. Myotonic muscular dystrophy
 - d. Cerebral Palsy
 - e. Myasthenia Gravis.
- 97. A 5-year-old male presents to the emergency department with 24 hours of progressive limp and lowgrade fever. His mother reports that he was running on the grass in the front yard 2 days ago and fell, subsequently complaining of shin pain on the left side. Examination reveals a tender, swollen left knee. The patient is holding the knee in flexion and refuses to move it.
 - a. An elevated CRP
 - b. Abnormal Xray
 - c. An elevated ESR
 - d. Elevated WBC count
- 98. You are assessing a child for development who prefer to use his right hand to pick objects, runs and beggining to climb objects. Says about 15 words and can feed himself with spoon. The developmental age of this child is most consistent with.
 - a. 10 months
 - b. 15 months
 - c. 18 months
 - d. 24 months.
- 99. During your morning round in general pediatric rotation, a 4th year MBBS Junior xolleague ask you about the normal development of fine motor skills. In normal fine motor development. A.Copying a triangle
 - a. Drawing a triangle
 - b. Copying a circle.
 - c. Drawing a Circle.
- 100. The mother of a 2-year-old girl wonders if her daughter's motor skills are age appropriate. Which of the following is a motor skill that most 2-year-olds have attained?
 - a. stands on one foot for 10 seconds
 - b. climbs stairs using alternating feet
 - c. pedals a tricycle
 - d. builds a tower of 8-10 cubes
- 101. When an individual is suffering from body dysmorphic disorder the symptoms include:
 - a. Having unnecessary invasive procedures
 - b. Becoming obsessionally concerned about imagined or minor physical defects in their appearance
 - c. Feelings of hopelessness
 - d. All of the above

- 102. Somatoform disorders include which of the following:
 - a. Conversion disorder
 - b. Somatization disorder
 - c. Hypochondriasis
 - d. All of the above
- 103. In somatoform disorders the sufferer sometimes believes they have physical deficits or symptoms that are significant and threatening. However, in most cases there is little or no medical justification for these beliefs. Such cognitive biases are termed
 - a. Cognitive dissonance
 - b. Hypochondriac biases
 - c. Interpretation biases
 - d. Overt reaction biases

104. The World Health Day is celebrated on

- a. 1st March
- b. 7th April
- c. 6th October
- d. 10th December

105. Which imaging modality is considered the gold standard for diagnosing spinal tuberculosis?

- a. X-ray
- b. Magnetic resonance imaging (MRI)
- c. Computed tomography (CT) scan
- d. Ultrasound

106. In the management of spinal tuberculosis, which of the following medications is considered the cornerstone of antitubercular therapy (ATT)?

- a. Rifampicin
- b. Ciprofloxacin
- c. Amoxicillin
- d. Metronidazole

107.In poliomyelitis, which part of the nervous system is primarily affected?

- a. Central nervous system (CNS)
- b. Peripheral nervous system (PNS)
- c. Autonomic nervous system (ANS)
- d. Enteric nervous system (ENS)

108. Which of the following is a complication associated with poliomyelitis affecting the musculoskeletal system?

- a. Aseptic meningitis
- b. Encephalitis
- c. Contractures and skeletal deformities
- d. Cardiac arrhythmias

109. Which of the following is the first point of contact of patients with practioners in health care system of Pakistan?

- a. THQ
- b. RHC
- c. DHQ
- d. Tertiary Care Hospital

110. Which of the following is not a part of the EBM triad?

- a. Research based Evidence
- b. Health Legislation
- c. Clinical Expertise
- d. Patient's values

111. What is the first step in the 5A Framework of Evidence based Medicine?

- a. Acquire the Evidence
- b. Appraise the Evidence
- c. Ask the question
- d. Apply the Evidence

112.11-year-old thalassemia patient who undergoes multiple transfusion during hospital stay. The medical records department finds the documentation lacking. Who should be send to complete the file.

- a. Consultant of the said department
- b. medical officer who sent blood request
- c. RN who administered blood
- d. house officer rotating in the ward

- 113. Six-month-old baby is referred by pediatrician with complaint of decrease hip movement. O/E there is decrease hip reduction and hip is reducible. Which of following should be advised
 - a. X ray hip
 - b. Ultrasound hip
 - c. MRI hip
 - d. Ct scan pelvis
- 114. Which of the following is most common organism causing osteomyelitis in 23 years old male
 - a. Streptococcus pneumoniae
 - b. Staphylococcus aureus
 - c. Pseudomonas aeruginosa
 - d. Salmonella
- 115. Which of the following deformity is not seen in clubfoot
 - a. Equinus
 - b. Plantarflexion
 - c. Adduction
 - d. Cavus
- 116.28 years old male presented with history of fever. He had tibia plating 2 weeks back. O/E there is discharge from incision site Which of the following is best option
 - a. Antibiotics
 - b. Daily Dressing
 - c. Debridement+ Culture Sensitivity of Pus + Antibiotics
 - d. Debridment + Antibiotics
- 117.A Young boy 15 year of age presented with "R" knee swelling & Pain. On examination it is tender, limited range of motion. What is the single best test to do?
 - a. Aspiration cytology
 - b. Gram stain
 - c. Culture and sensitivity
 - d. None of the above
- 118.A young man presented with "L" knee pain & swelling with analysis on aspirate found rhomboid shaped crystals. What is most likely diagnosis.
 - a. Pseudogout
 - b. Gout
 - c. Septic arthritis
 - d. None of the above
- 119.A 15-year-old boy is brought to the clinic by his mother who is concerned that he has a mark overlying his lumber spine.

 On examination, the boy has a patch of hair overlying his lumber spine and a birth mark at the same location. Lower liminar neurological examination is normal. What is the most likely cause?
 - a. Spin bifida occulta
 - b. Spondylolisthesis
 - c. Myelocele
 - d. None of the above
- 120.A young man with spinal deformity presented with pain in lover back with radiculopathy. On examination there is decreased sensation on lateral aspect of right leg, unable to dorsiflex his big toe. Which nerve root is compressing at Lumber region
 - a. L4-L5
 - b. L5-S1
 - c. L3 L4
 - d. None of the above