

KHYBER MEDICAL COLLEGE PESHAWAR
(EXAMINATION SECTION)
INTERNAL EVALUATION EXAMINATION
BLOCK-N
FINAL YEAR MBBS (Held on 25-Nov-2024)

Class No: _____

Max Marks: 120

Time Allowed: 120 Minutes

- Note: Attempt ALL MCQ's.
- Use only blue / black pen. Possession / use of mobile phones and other electronic accessories are strictly prohibited.
 - Response sheets without roll numbers will be cancelled. Student's result will be declared "Under Report" if (i) MCQ question paper is not returned back along with response sheet or is tampered by the student (ii) The roll number is not written on the said paper

1.	A 70-year-old woman with VWD type 1 is taking aspirin for arthritis. She presents with a history of easy bruising and prolonged bleeding after minor cuts. Which of the following is the most likely explanation for her increased bleeding tendency?		
	A Aspirin is causing a decrease in the number of platelets.	B Aspirin is causing a decrease in the production of platelets.	C Aspirin is causing a decrease in the production of VWF.
	D Aspirin is interfering with the function of platelets.	E Aspirin is interfering with the function of VWF.	
2.	An 8 years old child has presented with anemia and bleeding from nose and gums. Child is severely anemic with petechial rash on the body. There is no lymphadenopathy or visceromegaly. Peripheral smear shows pancytopenia. Of the following, the MOST accurate reflection of active erythropoiesis of the bone marrow is		
	A hemoglobin concentration	B mean corpuscular volume (MCV)	C packed cell volume (PCV)
	D reticulocyte count	E reticulocyte index	
3.	A 60-year-old patient presents with joint pain and stiffness that primarily affects the large weight-bearing joints, such as the knees and hips. The symptoms worsen with activity and improve with rest. X-rays show joint space narrowing and peri-articular sclerosis. Which of the following is the most likely classification for this patient's joint disease?		
	A Ankylosing spondylitis	B Gout	C Osteoarthritis
	D Psoriatic arthritis	E Rheumatoid arthritis	
4.	A 55-year-old woman presents with a rash on her face and hands, along with weakness in her shoulder and hip muscles. She also complains of difficulty swallowing and shortness of breath. On examination, she has a heliotrope rash on her eyelids and a scaly erythematous rash on her hands. She has symmetric proximal muscle weakness, including the neck and shoulder muscles. Laboratory tests reveal an elevated creatine kinase level and positive anti-Mi-2 antibodies. What is the most likely diagnosis for this patient?		
	A Dermatomyositis	B Gullian Barre Syndrome	C Inclusion body myositis
	D Lambert-Eaton myasthenic syndrome	E Polymyositis	
5.	A 5 years old boy with normal mile stones presented with difficulty in school-related activities (e.g., getting to the bus, climbing stairs, reciprocal motions during activities). On examination he has a waddling, wide-based gait with hyper lordosis of the lumbar spine. The child has problem getting up from the sitting or supine position. He crawls up his legs to achieve an upright position. A diagnosis of Duchene muscular dystrophy is considered. what test is used to confirm this diagnosis		
	A CPK	B EMG	C muscle biopsy
	D (PCR) assay	E US of the affected muscles	
6.	A 15 years old girl is admitted for anaemia work up. She does not have splenomegaly and lymphadenopathy. The mean corpuscular volume of the patients is 90 fl and the reticulocyte production index is low. Which one of the following is the most likely cause of her anemia?		
	A Aplastic Anaemia	B Iron deficiency Anaemia	C Siderblastic Anaemia
	D Thalassemia	E Vit B12 Deficiency	
7.	A 7 days old neonate has presented with bleeding from mouth, umbilicus and blood in the stool. There are bruises on the body. Bleeding time = 4 minutes; PT > 60 seconds; APTT > 60 seconds. SGPT = 30 u/l; Hb = 10 g/dl; TLC = 9000/mm ³ ; Platelet count = 250,000/mm ³ CRP negative. D-Dimers normal, ALT is normal. The most likely diagnosis is		
	A DIC	B Haemophilia	C Platelet Function Disorder
	D Severe Liver Disease	E Vitamin K Deficiency	
8.	A 10 months old infant's mother main concern is that she cannot hold her neck as yet. On examination she is floppy, poor neck hold, cannot bear weight, cannot raise her head when lying prone. Her knee jerk is elicitable. What content of your history would help you the most in reaching to the diagnosis in this infant?		
	A Developmental, immunization and social history.	B Developmental, immunization and nutritional history	C Prenatal, birth and developmental history
	D Prenatal, birth and immunization history	E Prenatal, birth and nutritional history.	

9. Being a doctor in a hospital, you have to break the news to a patient's family that the patient has cancer. Which of the following is the most appropriate way to start the conversation?				
A	"I have some bad news about your loved one."	B	"I'm afraid that I have some difficult news to share with you."	C "I'm afraid that your loved one has a terminal illness."
D	"I'm here to talk to you about your loved one's diagnosis."	E	"I'm sorry to say that your loved one has cancer."	
10. A patient comes to your unit with a laceration to Lower limb, sustained in an altercation, with a sharp object. Which one of the following most accurately defines whether primary or secondary healing occurs within the cutaneous wound?				
A	How closely the wound edges are apposed	B	The amount of tissue damage	C The mechanism of injury
D	The method of wound closure	E	The time healing takes to occur	
11. A 46-year-old businessman presented to the office of psychiatrist with complaints of low mood, worse in the morning, early morning waking with pessimistic thoughts, suicidal ideations and loss of interest in every aspect of life. His symptoms developed four (04) months ago after witnessing a road traffic accident. Further history revealed no hypervigilance, nightmares and flashbacks. What is the most likely diagnosis?				
A	Post-traumatic stress disorder	B	Major depressive disorder	C Generalized anxiety disorder
D	Acute and transient psychotic disorder	E	Panic disorder	
12. A 35 year old man comes to a clinic with Koilonychia and Dysphagia. After taking blood sample and examine it under the microscope, there was Pökiliocytosis and Anisocytosis. Which type of anemia does this patient have?				
A	Megaloblastic anemia	B	Microcytic Hypochromic anemia	C Microcytic hyperochromic anemia
D	Normocytic normochromic anemia	E	Sideroblastic anaemia	
13. A 75-year-old woman with advanced cancer is admitted to the hospital with shortness of breath. She is told that she has only a few weeks to live. What is the most important goal of her care at this time?				
A	To prolong her life	B	To relieve her symptoms	C To make her comfortable
D	To help her prepare for death	E	To cure her cancer	
14. Mr. Naeem, a 75-year-old man, presents with a low-energy hip fracture. He has a history of chronic glucocorticoid use for his rheumatoid arthritis. Based on the scenario, which of the following interventions is most appropriate for the management of osteoporosis in Mr. Naeem?				
A	Bisphosphonate therapy	B	Calcium supplementation	C Teriparatide therapy
D	Vitamin D supplementation	E	Weight-bearing exercises	
15. 16 year old female presented to the skin OPD having hypo-pigmented macules affecting the neck and upper trunk. KOH preparation is suggestive of fungal infection, what is the most likely diagnosis?				
A	Candidiasis	B	Mellassezia furfur	C Tinea nigra
D	Tinea Manum	E	Trichophyton Rubrum	
16. A 50-year-old woman presents with progressive muscle weakness over the past year. She has difficulty getting up from a sitting position, climbing stairs, and lifting objects. On examination, she has symmetric proximal muscle weakness. Laboratory tests reveal an elevated creatine kinase level and positive anti-HMGCR antibodies.				
A	Dermatomyositis	B	Immune-mediated necrotizing myopathy	C Inclusion body myositis
D	Paraneoplastic syndrome	E	Polymyositis	
17. A 30-year-old patient presents with recurrent episodes of acute joint pain, redness, and swelling in the big toe. The pain is excruciating and often wakes the patient up at night. Laboratory tests reveal normal serum uric acid levels. Which of the following is the most likely classification for this patient's joint disease?				
A	Gout	B	Osteoarthritis	C Psoriatic arthritis
D	Rheumatoid arthritis	E	Systemic lupus erythematosus	
18. Mrs. Ambreen, a 55-year-old woman with long-standing rheumatoid arthritis, has been experiencing worsening joint pain, swelling, and morning stiffness. Her symptoms are poorly controlled despite the use of nonsteroidal anti-inflammatory drugs (NSAIDs). Which of the following is the most appropriate next step in the management of Mrs.Ambreen rheumatoid arthritis?				
A	Administration of intra-articular corticosteroid injections	B	Initiation of disease-modifying antirheumatic drugs (DMARDs)	C Prescription of oral corticosteroids
D	Recommendation of physical therapy and exercise	E	Referral for joint replacement surgery	
19. The most likely diagnosis in an infant 15 months age with anemia poor weaning having Hemoglobin 8 gm/dl, MCV 49 fl, MCH 16 pcg, retic count 1.5 % and without hepatosplenomegaly is				
A	Anemia due to folate deficiency.	B	Beta Thalassemia major.	C Hereditary spherocytosis.
D	Iron deficiency anemia.	E	Normocytic normochromic anemia	

20. A 3 years old child has presented with mild pallor. Child is mildly anemic, without purpura lymphadenopathy or lymphadenopathy. He has a hemoglobin concentration of 10 gm/dL and marked microcytosis and hypochromia on peripheral smear. On Hb electrophoresis Hb A2 is 5 %; serum ferritin level is 130 ng/ml.
- | | | |
|---------------------------------|---|--------------------------|
| A anemia due to chronic disease | B β-thalassemia minor | C iron deficiency anemia |
| D Sickle cell anemia | E sideroblastic anemia | |
21. A 35-year-old woman presented with pain in her dorsal spine for the last one year. She is running low grade fever and loss of appetite. She is feeling progressive weakness in both her lower limbs. On exams there is short khyphotic deformity at mid dorsal spine. Her distal neurology is 4/5. X-rays shows collapse of D8/D9 vertebrae. Her hb is 7.9 and esr 65. What is the most appropriate treatment?
- | | | |
|---|-----------------------------|--|
| A Anterior debrima and cage reconstruction | B Anterior spinal fixation | C Continue on Anti Tuberculous Therapy |
| D Posterior spinal instrumentation | E Wide laminectomy at D8/D9 | |
22. 42 year old male presented to the skin opd with 3 years history of oral erosions and ulcerations. Now for the last 6 months the patient has developed flaccid blisters affecting the trunk and limbs, there is no associated symptom, on Histopathology of one of the blister shows intra epidermal split. What is the most likely diagnosis?
- | | | |
|----------------------------------|-----------------------------|----------------------------|
| A Bullous pemphigoid | B Bullous SLE | C Dermatitis herpatiformis |
| D Epidermolysis bullosa aquisita | E Pemphigus Vulgaris | |
23. A 4 days old newborn with home delivery, has presented with bleeding per rectum and has been labelled as hemorrhagic disease of the newborn. Which of clotting factors group is commonly affected.
- | | | |
|--------------------------|--------------------------------|---------------------------|
| A factor I, V, VIII, XI | B factor II, VII, IX, X | C factor III, IV, VI, XII |
| D factor IV, V, VI, VIII | E factor VIII, XI, XII, XIII | |
24. Mr. Amjad, a 60-year-old man, presents with chronic joint pain and stiffness in the hands and feet. He mentions that his symptoms are usually worse in the morning and improve with activity. Laboratory tests reveal the presence of rheumatoid factor. Based on the scenario, which of the following autoimmune arthritis conditions is most likely in Mr. Amjad?
- | | | |
|-------------------------------|--------------------------------------|----------------------|
| A Ankylosing spondylitis (AS) | B Psoriatic arthritis (PsA) | C Reactive arthritis |
| D Rheumatoid arthritis | E Systemic lupus erythematosus (SLE) | |
25. A 40-year-old patient presents with joint pain, stiffness, and swelling that affect both the skin and joints. She is suffering from swelling of her right ring finger. Laboratory tests reveal elevated levels of C-reactive protein. Which of the following is the most likely classification for this patient's joint disease?
- | | | |
|------------------------------|------------------------|------------------|
| A Ankylosing spondylitis | B Gout | C Osteoarthritis |
| D Psoriatic arthritis | E Rheumatoid arthritis | |
26. A malnourished child was brought to out-patient department of Paediatric. The age of the child is 2 years weight is 6 kg. On Z-score he is -3. While taking history what will help you the most to reach to a conclusion about his current dietary status or routine food intake.
- | | | |
|-----------------------------------|---------------------------------|---------------------------|
| A Amount of weaning diet | B 24 hour dietary recall | C Content of weaning diet |
| D Timings and number of servings. | E Weaning age of the child | |
27. You are doing round with your consultant. He examines a patient of Non Hodgkins Lymphoma. He asks you about international prognostic index criteria. Which one of the following is NOT in the international prognostic index for Non Hodgkins Lymphoma?
- | | | |
|-------------------------------|----------------------|---------------------------|
| A Age | B LDH levels | C Lymphocyte Count |
| D Number of extra nodal sites | E Performance status | |
28. A 24 years old runner presents with toe deformities, and you observe a fixed flexion deformity at the distal interphalangeal joint (DIP) of the fourth toe. The patient mentions chronic friction and calluses on the top of the toe. What condition is this consistent with?
- | | | |
|---------------------|-------------------|--------------|
| A Claw toe | B Hallux valgus | C Hammer toe |
| D Mallet toe | E Stress Fracture | |
29. 6 years old baby presents with irritability and fever for last 1 day. On examination her right thigh is tender and swollen. She looks febrile. X-rays of involved femur looks normal. which of the following is most common organism responsible for acute Osteomyelitis?
- | | | |
|---------------------|------------------------------|-----------------------|
| A H. influenza | B Mycobacterium tuberculosis | C Staph aureus |
| D Staph epidermidis | E Streptococcus pyogenese | |

30. A 4-year-old boy is referred because he began limping yesterday and when he woke this morning, he refused to walk on his right lower extremity. He was apparently in good health until yesterday afternoon, when his mother noticed that he seemed to be limping on the right side at the grocery store. Later that evening, his limp became more obvious and he complained of pain in his right knee. This morning he woke complaining of right knee pain and refused to walk. They called their pediatrician who evaluated him and referred him for a possible infection in the right knee. The past history reveals that 2 weeks ago he had a fever and cough that lasted for 5 days
- A Legg-Calvé-Perthes disease B osteomyelitis C Reactive arthritis/slipped capital femoral epiphysis
D septic arthritis E **transient synovitis**
31. A 23 years female presented to the spine outpatient department with low grade fever, night sweats, weight loss and low back pain. She was treated by General practitioner with ATT for 6 months with no improvement. She has new onset paraplegia and MR shows collapse of D12 and L1 with epidural abscess. The most appropriate treatment option is:
- A **Anterior debridement, fusion and anterior instrumentation** B Anti-tuberculosis medication and physiotherapy C Lumbar corset and analgesia
D Posterior instrumentation E Posterior spinal fusion with tri cortical iliac Crest graft
32. 12 year old child referred by the cardiologist to the skin OPD for some cutaneous skin lesions, he is a known case of Rheumatic heart disease. What is the most likely cutaneous manifestation of this condition?
- A Erythema multiforme B Erythema nodosum C Erythema annulare centrifugum
D **Erythema Marginatum** E Erythema Migrans
33. A 5yr old boy presented with history of recurrent pain in joints for last 10 months. It started with fever and pain in left shoulder 10 months back. A similar episode occurred again a couple of months later this time involving the Right wrist and Lt ankle, treated with NSAIDs – improved over a week. After an interval of 2 months he developed acute pain in right hip joint and was investigated. Lab results: Hb 8%, microcytic hypochromic anemia, WBC 6500/cu mm, normal platelets. Retic count 4% ESR 25mm, rest tests normal. X ray right hip showed an osteolytic area at upper end of femur. Similar area at the lower end of tibia on left side. No relevant family history. O/E: malnourished, anemic, no Lymphadenopathy, joints normal, no restriction of movements. Soft tissue swelling over left ankle and right wrist but joints not involved. Liver 3cm firm nontender. Spleen 2cm firm. Other system examination normal. What is the most probable diagnosis
- A Acute lymphoblastic leukemia B Juvenile idiopathic arthritis C Post infectious arthritis
D Reactive arthritis. E **Sickle cell disease**
34. A nurse is giving medication to a patient. Which of the following is the most important step to take to prevent medication errors?
- A Administer the medication by the correct route. B **Check the patient's identification bracelet twice.** C Confirm the medication order with the prescriber.
D Document the medication administration accurately. E Rinse the patient's mouth with water after administering the medication
35. A 4 years old child has presented with bleeding from nose and petechial rash on the body. He has recently been diagnosed as Acute idiopathic thrombocytopenic purpura. Of the following, the LEAST likely feature of acute immune thrombocytopenia (ITP) is
- A A preceding viral infection B Isolated thrombocytopenia C Increased number of megakaryocytes in the bone marrow
D **Isolated splenomegaly** E Mucocutaneous bleeding
36. A 6 years old boy has presented with petechial rash on the body and history bleeding from nose for 4 days. There was history of common cold 8 days back. Child is active and afebrile. There are petechiae and few bruises on the body. Rest of physical examination is normal. Complete blood count shows. Hb=10 g/dl, TLC=8000/cumm, platlet count= 25000/cumm. The most likely diagnosis is.
- A Acute Leukemia B Aplastic anemia C Haemophilia
D Henoch Schonelin purpura. E **Idiopathic thrombocytopenic purpura**
37. 6 year old male brought by her parents to the skin OPD with the history of multiple hypo-pigmented macules affecting the cheeks areas on examination there is mild scaling over it, It is asymptomatic, What is the most likely diagnosis?
- A **Dicoid eczema** B **Pityriasis alba** C Post inflammatory hypopigmentation
D Tinea faciae E Vitiligo
38. A 65-year-old man presents with a 5-year history of progressive muscle weakness and difficulty walking. He has had falls due to tripping over his feet. On examination, he has asymmetric weakness, with the distal muscles being more affected than the proximal ones. He has weakness of the quadriceps and wrist extensors. His reflexes are diminished. Laboratory tests reveal an elevated creatine kinase level. What is the most likely diagnosis for this patient?
- A Dermatomyositis B **Inclusion body myositis** C Lambert-Eaton myasthenic syndrome
D Polymyositis E Undifferentiated Myositis

A

39 A 35 year old female referred from the Rheumatology department with mild itching generalized redness and scaling over the body. Her medical history was significant for the Rheumatoid arthritis for which she is taking oral steroids and methotrexate. Cutaneous examination shows large crusted and scaly plaques on her hands elbows buttocks thighs and feet, her nails were thickened and dystrophic. What is the most likely cause of the erythroderma in this case?

- A Drugs B Eczema C Erythroderma of unknown origin
D Norwegian scabies E Psoriasis

40 A 3 years old female child has presented with anemia. She is stunted and hyperpigmented with multiple caféauait spots on the body. She has triphalangeal thumb on right hand. Hb=6 gm/dl, TLC=30000/cmm, Platelet count= 36000/cmm. The most likely diagnosis is

- A Bernard-Soulier Syndrome B congenital A megakaryocytic Thrombocytopenia C Fanconi anemia
D Glanzmann Thrombasthenia E thrombocytopenia with Absent Radii (TAR) Syndrome

41 25 year old female presented to the ER department with fever and widespread erosions and blisters involving the trunk and acral parts. Oral and genital mucosa are also involved. Patient is also having history of medication for the joint pains. What is the most likely diagnosis?

- A Erythema multiforme minor B erythema multiforme major C Fixed drug eruptions
D Lichenoid drug eruption E Steven Johnson syndrome

42 A 60-year-old woman, presents for a routine check-up. She mentions that her mother had a hip fracture in her 70s. Based on her risk factors, which of the following interventions is most appropriate for the prevention of osteoporosis in her?

- A Bisphosphonate therapy and lifestyle modifications B Calcium supplementation and estrogen replacement therapy C Parathyroid hormone (PTH) analog therapy
D Selective estrogen receptor modulator (SERM) therapy E Weight-bearing exercises and vitamin D supplementation

43 A 30-year-old G2P1 presents at 20 weeks' gestation to enroll for prenatal care and complains of frequent fatigue. Routine prenatal laboratory tests reveal a hemoglobin concentration of 8 g/dl. A peripheral smear and red cell indices are consistent with hypochromic, microcytic cell changes. What is the most appropriate next investigation?

- A Hb Electrophoresis B Serum ferritin C Serum Iron
D Total iron binding capacity (TIBC) E Transferrin saturation

44 Mrs. Khadija, a 40-year-old woman with rheumatoid arthritis, is on treatment with methotrexate and a tumor necrosis factor (TNF) inhibitor. She develops a persistent low-grade fever, fatigue, and weight loss. Laboratory tests reveal elevated liver enzymes and positive anti-nuclear antibodies. Which of the following complications, Mrs. Khadija most likely experiencing?

- A Caplan's syndrome B Drug-induced lupus-like syndrome C Felty's syndrome
D Rheumatoid lung disease E Rheumatoid vasculitis

45 10 year old boy brought by his parents to the skin OPD having fever sore throat and malaise. On examination there is wide spread vesicles affecting the face, trunk and limbs, There is also erosion on the palatal mucosa. What is the most likely diagnosis?

- A Chicken pox B Hand foot and mouth disease C Herpes zoster
D Measles E Rubella

46 An 80-year-old man with heart failure is admitted to the hospital for shortness of breath and is also taking treatment for high blood pressure and diabetes. Which of the following is the most important risk factor for falls in this patient?

- A Age B Heart failure C High blood pressure
D Diabetes E Medications

47 46 year old female known psoriatic patient presented to the skin OPD having generalized erythema and scaling affecting almost all over the body. She has recently been switched to a new antihypertensive medication by the physician. What is the most appropriate medicine for this patient?

- A Acitretin B Azathioprine C Cyclophosphamide
D Hydroxychloroquine E Methotrexate

48 30 years old man sustained fracture left humerus after road traffic accident .On examination in emergency, he was having closed fracture humerus with wrist drop. What is the most likely cause of wrist drop.

- A Extensor tendon injury B median and ulnar entrapment in fracture site C Median nerve injury
D Pseudoparalysis of tendon due to pain E Radial nerve injury

49	An 18 month old child was brought to OPD with complaints of poor appetite to semisolid/solid food and irritability with breath holding spells. The child is bottle fed with cow's milk. On examination the child is pale, irritable, there is no lymphadenopathy and no purpuric spots on the bod. Abdominal examination shows no visceromegaly. Laboratory investigation shows Hb = 8.5 gm/dl, TLC = 9000/mm ² , Platelet count = 180 x 10 ³ /L. MCV = 58 fl, MCH = 16 pg. What is the most likely diagnosis?					
	A	Aplastic anemia	B	Iron deficiency anemia	C	Iron deficiency anemia
	D	Sickle cell anemia	E	Sickle cell anemia		
50	You have been assigned the duty of supervising a clinical audit session in a medical unit where it has been observed that the number of hospital-acquired infections has increased. Which of the following is the most important outcome of such a clinical audit?					
	A	Improved patient care	B	Improved staff morale	C	Increased efficiency
	D	Increased research output	E	Reduced costs		
51	A 15 years old boy presented with aplastic anaemia. Most of the cases of bone marrow aplasia are idiopathic but there are some known causes. Which one of the following is a well recognised cause of aplastic anaemia?					
	A	Cytomegalo virus infection	B	G6PD deficiency	C	Hepatitis virus infection
	D	H2 receptor blockers	E	Omeprazole		
52	A 10 yr girl with severe pain & swelling in left knee and ankle joint she also complains of fever, low grade with no rigors, more in evening since one month. She has stiffness in these joints after inactivity and has poor sleep quality. On examination she is pale, spleen is 2cm soft non tender, liver not palpable. Left knee, left ankle, Proximal Inter-Phalangeal joint of right middle and ring finger and left middle finger were swollen. Tenderness in these joints present. Hb 9, WBC 4600, PLT 1.5 lacs, ESR 25, peripheral smear exam normal, PT/APTT normal. CRP 42, S. Ferritin 310, RF positive, ANA positive, anti dsDNA negative. The bad prognosis in this scenario is predicted by.					
	A	ANA	B	Anti dsDNA	C	Involvement of small joints
	D	RF	E	Splenomegaly		
53	Mr. Ibrahim, a 35-year-old man, presents with lower back pain and stiffness that has been gradually worsening over the past few months. He experiences stiffness in the morning that improves with activity. He also reports occasional eye redness and pain. Laboratory tests reveal the presence of HLA-B27 antigen. Based on the scenario, which of the following arthritic conditions is most likely in Mr. Ibrahim?					
	A	Ankylosing spondylitis (AS)	B	Enteropathic arthritis	C	Psoriatic arthritis (PsA)
	D	Reactive arthritis	E	Rheumatoid arthritis		
54	A 30 years old lady presented with two months history of fever and lethargy. She is pale on examination and has splenomegaly. She has investigations requested and peripheral blood smear is to hand. It shows: Increased number of neutrophils, band cells, myelocytes, basophils, eosinophils and platelets. What is the most likely diagnosis?					
	A	Acute lymphoblastic leukemia	B	Acute myeloid leukemia	C	Chronic myelocytic leukemia
	D	Chronic lymphocytic leukemia	E	Hairy cell leukemia		
55	37 year old female refereed by a gynecologist to the skin OPD for the cutaneous lesions. The patient is having facial erythema along with the oral erosions and hair loss for the last 6 months. What is the most specific investigation can be done in the above mentioned condition?					
	A	ANA	B	Anti dsDNA	C	Anti-La
	D	Anti-Ro	E	Anti-smith		
56	An eighteen years old girl presented with platelets count of 98,000. She is otherwise well. She had recent febrile illness and was prescribed some medications which she does not remember. Which of the following drugs can cause thrombocytopenia?					
	A	Aspirin	B	Oral penicillin	C	Omeprazole
	D	Sulfonamide	E	Steroid		
57	A 35 year old man sustains a gunshot injury for which he undergoes an exploratory laparotomy with gut resection for multiple perforations in his small bowel. Postoperatively he develops short bowel syndrome. What would be the remaining length of the small intestines by definition for him to develop this syndrome?					
	A	< 25 cm	B	<50 cm	C	<100 cm
	D	<150 cm	E	<150 inches		
58	A 35 year old lady suffering from hypothyroidism, taking regular thyroxin. Her BMI is 40. She underwent lap cholecystectomy. After recovery, although she was breathing spontaneously her oxygen saturation level was between 85-90%. She was administered oxygen using a non-rebreathing mask. Regarding the administered oxygen which one of the following is correct?					
	A	5L/min	B	10L/min	C	12L/min
	D	15L/min	E	20L/min		

You are assisting in an exploratory laparotomy; the patient is obese with thick fatty skin. Which type of suturing is used to evert the wound edges? You are assisting in an exploratory laparotomy; the patient is obese with thick fatty skin. Which type of suturing is used to evert the wound edges?

- | | | | | | |
|---|--------------------|---|--------------------|---|---------------------|
| A | Continuous sutures | B | Vertical mattress | C | Horizontal mattress |
| D | Skin Staples | E | Apply steri strips | | |

60 A 10 years old boy has headaches since 8 months. On examination he has a weight of 40kg, height of 130cm, BP of 120/ 82 mm Hg BMI. His systemic examination is normal. You are asked to comment on his BP. What parameters are needed for finding the BP centile on a centile chart

- | | | | | | |
|---|---|---|---|---|---|
| A | BMI for different age groups | B | Height centile for different age groups | C | Weight centile for different age groups |
| D | weight and height Both centile for different age groups | E | Only age groups are considered | | |

61 A 30-year-old sustains a 25% TBSA (Total Burns Surface Area) burn injury. According to the Parkland formula, what should be the initial IV fluid used for resuscitation therapy?

- | | | | | | |
|---|-------------------|---|------------------|---|------------------|
| A | 5% Dextrose Water | B | Colloids | C | Hypotonic Saline |
| D | Normal Saline | E | Ringer's Lactate | | |

62 A 7-year-old child has multiple bruises on her extremities and nasal bleeding of 3 days duration; There is no past or family history of bleeding or bruising. She had a mild respiratory tract infection 2 weeks before; physical examination was normal apart from multiple ecchymoses and petechiae. Of the following, the NEXT most suitable diagnostic step is

- | | | | | | |
|---|-----------------------------|---|------------------|---|----------------------|
| A | Antinuclear antibody titer | B | Clotting time. | C | Complete blood count |
| D | Partial thromboplastin time | E | Prothrombin time | | |

63 A 20 years old butcher is admitted with bleeding from the gums and rectum and petechiae. Which of the following is the most likely causative agent?

- | | | | | | |
|---|---------------------|---|------------------|---|---------------|
| A | Crimeon Congo Virus | B | Hantavirus | C | Marburg Virus |
| D | Rift Valley Virus | E | Ross River Virus | | |

64 What does the acronym "ERAS" stand for in the context of medical protocols for surgical procedures?

- | | | | | | |
|---|---|---|--|---|---|
| A | Early Rehabilitation and Anesthesia Strategy | B | Enhanced Recovery After Surgery | C | Efficient Recovery and Anesthetic Support |
| D | Expedited Rehabilitation and Surgery Assistance | E | Efficient Responsive Administration in Surgery | | |

65 A 3 years old child has presented with 2 weeks history of fever, 1 week history of bleeding from nose. On examination there is generalized lymphadenopathy, petechial rash. Abdominal examination shows hepatosplenomegaly. Hb = 6 g/dl, TLC = 85000/mm³, platelet count = 20,000/mm³. The most likely diagnosis is

- | | | | | | |
|---|-------------------|---|--------------------------|---|---------------|
| A | Acute Leukemia | B | Acute Leukemia | C | Evan Syndrome |
| D | Thalassemia major | E | Infectious mononucleosis | | |

66 A 2 years child with fever and refusal to walk for two days. He complains of pain and points to his right lower extremity. There is a recent history of an URTI about two weeks ago, but no recent trauma. The pain is not known to migrate. On examination Temperature 39.5, Pulse 120, Respiratory rate 18, BP 100/50, SpO₂ 100% in room air. Weight on 10th centile, height 50th centile. He is thin appearing and refuses to walk. He is not fussy and nontoxic. Lying in a hospital bed with his right lower extremity externally rotated, abducted, and motionless. He has severe discomfort with minimal internal and external rotation of the right hip despite attempts to distract him. Laboratory studies: • WBC 20,000, 8% lymphocytes, 2% monos, platelet count 265,000. ESR 45. Hip radiographs show widening of the acetabular space on the right. What further investigation will you plan?

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|---|---------------------------------------|---|-------------------|---|---------------------------|
| A | Arthrocentesis microscopy and culture | B | ANA | C | Blood culture sensitivity |
| D | CRP | E | Rheumatoid factor | | |

67 A 75-year-old woman with a history of hypertension, diabetes, and chronic obstructive pulmonary disease (COPD) is scheduled for a total hip replacement. Which of the following is the most important factor to consider when assessing her fitness for surgery?

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|---|---------------|---|----------------|---|-------------------|
| A | Age | B | Comorbidities | C | Functional status |
| D | Mental status | E | Social support | | |

68 Mr. Majid, a 45-year-old man with SLE, presents with new-onset seizures and altered mental status. Imaging studies reveal multiple areas of increased signal intensity on T2-weighted MRI images. Which of the following complications, Mr. Majid most likely experiencing?

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|---|---------------|---|--------------------|---|-----------------|
| A | Depression | B | Lupus cerebritis | C | Lupus Psychosis |
| D | Toxoplasmosis | E | Viral Encephalitis | | |

69 A 45 years old man with severe necrotising pancreatitis is started on total parenteral nutrition through a central line. Soon after placement of the central venous line he starts complaining of shortness of breath. What is the most likely cause?

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|---|--------------|---|------------------|---|-----------|
| A | Pneumothorax | B | Asthma | C | Pneumonia |
| D | Fat Embolism | E | Pleural effusion | | |

70 An 11 year old boy presents with 4 days history of fever, pain and swelling in joints, along with shortness of breath. Two days ago, his right knee was painful and swollen, but today it's his right ankle and left knee. T- 38.2, P 160, RR 32, BP 100/60, a holosystolic murmur 3/6 heard at apex with radiation to axilla. His left knee and right ankle are red, swollen, tender and warm. He has limited range of motion but can flex his knee 30 degrees passively. He has limited subtalar motion. ESR 110, CRP 9.5, and a chest x-ray with cardiomegaly present. ECG reveals a prolonged PR interval. ASO titer is 754. Diagnosis of acute rheumatic fever is made. Justify diagnosis of this patient with RF as a first episode of the disease.

- | | | | | | |
|---|---|---|--|---|--|
| A | two major or three minor criteria along with evidence of antecedent GAS | B | two major or three minor criteria along with no evidence of antecedent GAS | C | Three major and four minor criteria with no evidence of antecedent GAS infection |
| D | Two major and four minor criteria with evidence of antecedent GAS | E | Three major and two minor criteria along with evidence of antecedent GAS infection | | |

71 A 3 years old child with diagnosis Beta Thalassemia major, getting regular blood transfusions on monthly basis needs opinion on iron chelation. Iron chelation in this child should be started At serum Ferritin level of

- | | | | | | |
|---|-------------|---|--------------|---|-------------|
| A | > 150 ng/ml | B | > 1000 ng/ml | C | > 250 ng/ml |
| D | > 550 ng/ml | E | > 750 ng/ml | | |

72 An 8-year-old boy complains of severe pain in bilateral wrist and ankle joint. History is of fever, diarrhea, and abdominal pain for 5 days. A week later he developed arthralgia of the bilateral sacroiliac, wrist, and ankle joints. His temp is normal, Pulse 115, and BP 110/70. O/E swelling and tenderness of left ankle joint and, tenderness on motion and pain over the bilateral wrist and left sacroiliac joints. Hb12.8 g/dl, WBC 21,860/mm3, PLT 573,000/mm3, ESR 74 mm/hr., CRP 3.97. ANA negative. Urinalysis revealed pyuria, but culture was negative. Aspirate revealed severe inflammation, but gram staining and culturing of this synovial fluid gave negative results. The stool culture was positive for salmonella. X ray: only soft tissue swelling. What is the most probable diagnosis?

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|---|-------------------------------|---|--|---|-------------------------|
| A | juvenile idiopathic arthritis | B | Reactive and post infectious arthritis | C | Rheumatic joint disease |
| D | Septic arthritis | E | Gout | | |

73 A 30-year-old G2P1 presents at 20 weeks' gestation to enroll for prenatal care and complains of frequent fatigue. Routine prenatal laboratory tests reveal a hemoglobin concentration of 8 g/dl. A peripheral smear and red cell indices are consistent with hypochromic, microcytic cell changes. What is the most appropriate next investigation?

- | | | | | | |
|---|------------------------------------|---|------------------------|---|------------|
| A | Hb Electrophoresis | B | Serum ferritin | C | Serum Iron |
| D | Total iron binding capacity (TIBC) | E | Transferrin saturation | | |

74 Two days ago, a 45-year-old man suffered a deep laceration to his right lower extremity. He presented to the emergency room where the wound was cleaned and primarily closed. At present, what is the predominant cell type within the healing wound?

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|---|-------------|---|-------------|---|-------------|
| A | Fibroblasts | B | Histiocytes | C | Macrophages |
| D | Neutrophils | E | Platelets | | |

75 35 year old male presented to the skin OPD with intensely itchy papules and Paulo-vesicles predominantly affecting the extensors of the limbs, on examination there are grouped vesicles present on the extensor aspect of the limbs. Histopathology of one of the lesion shows sub-epidermal split. What is the most likely diagnosis?

- | | | | | | |
|---|--------------------------------|---|--------------------|---|--------------------------|
| A | Bullos SLE | B | Bullous pemphigoid | C | Dermatitis herpatiformis |
| D | Epidermolysis bullosa aquisita | E | Pemphigus Vulgaris | | |

76 A 12 months old bottle fed infant has presented with anemia, and malnutrition. Which on peripheral smear is labelled as megaloblastic anemia. Which of the following nutrition in an infant is usually associated with megaloblastic anemia?

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|---|--------------------|---|--------------------------------|---|--------------------|
| A | Breast feeding. | B | Buffalo milk feeding. | C | Cow' milk feeding. |
| D | Goat milk feeding. | E | Lactose- free formula feeding. | | |

77 A 45 years old man is brought to the emergency unattended, in unconscious state. The patient requires an urgent laparotomy, the surgical team has concerns about the consent. Criteria for treating a patient without Informed Consent

- | | | | | | |
|---|---|---|--|---|--|
| A | Patient does not have adequate Decision-Making Capacity | B | No surrogate decision maker or legal document is available | C | Situation is true emergency with threat to life or limb. |
| D | All of the above. | E | None of the above | | |

78 20 year old male referred by the physician to the dermatologist having targeted lesions predominantly affecting the acral parts, there is also hemorrhagic crusting over the lips. What is the most common causative organism responsible for the above mentioned condition?

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|---|------------------|---|-----------------|---|-----|
| A | Cocksackie virus | B | Cytomegalovirus | C | EBV |
| D | HBV | E | Herpes simplex | | |

- 79 A 7 years old child has presented with pallor, fatigability. Father has history of splenectomy in childhood. There is no past history of blood transfusion or hospitalization. Urine color is normal. She is moderately anemic, mildly icteric, with splenic enlargement of 5 cm. Peripheral smear shows normocytic, normochromic anemia with retic count of 15 %. What can be the most likely diagnosis?
 A Hereditary spherocytosis B iron deficiency anemia C Paroxysmal Nocturnal Haemoglobinuria
 D Sickle cell anemia E Thalassemia major
- 80 Which of the following model of breaking bad news in hospital settings is most commonly used in front of patients?
 A Beneficence and Non-Maleficence B SBAR protocol C SOAP format
 D SPIKES E SWOT
- 81 40 year old known uncontrolled diabetic and obese patient referred by the endocrinologist to the skin OPD having cutaneous lesions. On examinations the patient is having hyper-pigmented velvety plaques predominately affecting the flexors area. What is the most likely diagnosis?
 A Acanthosis Nigricans B Candidal Intertrigo C Diabetic Dermopathy
 D Flexural psoriasis E Seborrheic Dermatitis
- 82 Mrs. Hunaiza, a 55-year-old woman, presents with bone pain, muscle weakness, and frequent fractures. She has a history of malabsorption due to celiac disease. Laboratory tests reveal low serum levels of calcium and phosphate. Based on the scenario, which of the following interventions is most appropriate for the prevention and management of osteomalacia in Mrs. Hunaiza?
 A Bisphosphonate therapy and weight-bearing exercises B Commercially available fortified milk and physical therapy C Phosphate supplementation and parathyroid hormone (PTH) analog therapy
 D Protein supplements E Vitamin D supplementation and dietary modifications
- 83 Electrical injury may be classified as low or high voltage. The distinction between high and low voltage is at
 A 100 V B 1000 V C 10,000 V
 D 100,000 V E None of the above
- 84 Mr. Bilal, a 60-year-old man with long-standing rheumatoid arthritis, presents with sudden onset chest pain and shortness of breath. EKG shows sinus tachycardia. Echo shows dilated and hypokinetic ventricles. Laboratory tests reveal elevated cardiac enzymes. Which of the following complications of rheumatoid arthritis is Mr. Bilal most likely experiencing?
 A Rheumatoid vasculitis B Felty's syndrome C Sjögren's syndrome
 D Caplan's syndrome E Rheumatoid myocarditis
- 85 You are a general practitioner caring for a hypertension patient. The patient is currently taking an ineffective medication in controlling his blood pressure. You want to find the best evidence to help your patient. Which of the following resources would be the best place to start your search for evidence?
 A A clinical practice guideline B A patient preference survey C A randomized controlled trial
 D A systematic review E A textbook on hypertension
- 86 A 33 years old drug addict is admitted to your ward. He is malnourished with Hb Of 7 and MCV of 104. He had Echo done with no evidence of endocarditis. B12 and folate levels sent and results awaited. What differentiates folate deficiency from B12 deficiency?
 A Anaemia B Glossitis C Lethargy
 D Muscle weakness E Neurological symptoms
- 87 What is the primary purpose of the WHO Surgical Safety Checklist in the operating room?
 A To eliminate the need for pre-operative patient assessments B To ensure the surgical procedure is performed by a senior surgeon. C To expedite surgical procedures by skipping certain safety steps
 D To improve communication and teamwork among surgical teams E To reduce the need for post-operative monitoring
- 88 Mr. Farhan, a 50-year-old man with rheumatoid arthritis, has been on long-term treatment with methotrexate. He presents with shortness of breath, cough, and chest pain. Chest imaging reveals interstitial lung disease. Which of the following complications of rheumatoid arthritis is Mr. Farhan most likely experiencing?
 A Caplan's syndrome B Felty's syndrome C Rheumatoid lung disease
 D Rheumatoid vasculitis E Sjögren's syndrome
- 89 25 year old male patient referred by the rheumatologist to the skin OPD having cutaneous lesions for the last one year, on examination the patient is having annular plaques effecting predominantly the extensors of the limbs and trunk, with scaling over it. Nail examination shows yellow discoloration and nail pitting. What is the most likely diagnosis?
 A Discoid eczema B Pityriasis Rubra Pilaris C Pityriasis Rosea
 D Psoriasis E Tinea corporis

90	Who should explain the surgical procedure to the patient during the informed consent process?		
	A Surgeon	B Anesthesiologist	C Registered nurse
	D Hospital administrator	E None of the above	
91	A 45 years old woman, otherwise fit and healthy, trapped in the house after a fall and fracture neck of femur and unable to move for 24 hours has been brought to the hospital. While she is very exhausted and in pain which one of the following are true about her metabolic status?		
	A Glucose would now be absorbed from the Liver	B Glucose would now be absorbed from the muscles	C The process of gluconeogenesis would now be responsible for providing energy
	D Glycogenolysis uses protein to produce glucose	E All of the above.	
92	A 12-year-old female presents with a left thoracic rib prominence. Physical exam shows absent abdominal reflexes in the upper and lower quadrants on the left side, but present on the right. The clinical presentation is consistent with a left thoracic curve with abnormal abdominal reflexes. What is the next step in management?		
	A Anterior and posterior spinal fusion with instrumentation	B Bracing with a thoraco-lumbar-sacral orthosis	C Magnetic resonance imaging (MRI)
	D Observation with repeat radiographs in 6 months	E Posterior spinal fusion with instrumentation	
93	Mrs. Anjuman, a 30-year-old woman with systemic lupus erythematosus (SLE), presents with fatigue, joint pain, and a butterfly-shaped rash across her cheeks and nose. Laboratory tests reveal low complement levels and positive anti-dsDNA antibodies. Which of the following is the most appropriate treatment option for Mrs. Anjuman's SLE?		
	A Biologic agents	B Corticosteroids	C Disease-modifying antirheumatic drugs (DMARDs)
	D Nonsteroidal anti-inflammatory drugs (NSAIDs)	E Plasmapheresis	
94	A 26-year-old woman was brought to the emergency department with episodes of hyperventilation, palpitation, sweating and apprehension with fear of about to die. Her physical examination and relevant lab investigations including ECG, Echocardiogram and TFTs were within normal limit. What is the most likely diagnosis?		
	A Generalized anxiety disorder	B Social anxiety disorder	C Panic disorder
	D Major depressive disorder	E Mania with psychotic features	
95	A 17 years old boy was admitted to the medical ward with fever and weight loss. He was diagnosed with acute lymphoblastic leukemia. His father meets you and ask about the prognosis. Which one of the following is not a good prognostic factor in a patient with acute lymphoblastic leukemia		
	A Age 4 to 10 years old	B Chromosomal Number- Hyperploidy	C Expression of ZAP-70
	D Gender- Female	E Immunophenotype- Mature B cells	
96	A 7 year boy presented to emergency department with history of swelling of left knee for last 2 days associated with feverhis parents deny any hx of trauma...he is unable to bear weight on the left side...on examination his left knee is swollen with erythematous skin you are suspecting knee joint septic arthritis...which of the following is the most cheap ,noninvasive and operator dependant investigation that can help you to know about the collection		
	A CT scan	B MRI	C PET scan
	D ultrasound local	E x ray ap lateral view	
97	A 40-year-old woman has been complaining of severe back pain for the past 2 years. She has seen multiple doctors, but all of her tests have come back normal. She is convinced that she has a serious back injury, but she is unable to provide any evidence to support her belief. She has become increasingly withdrawn and depressed, and she has difficulty sleeping. What is the most likely diagnosis?		
	A Chronic fatigue syndrome	B Conversion disorder	C Depressive disorder
	D Hypochondriasis	E Somatization disorder	
98	18 years old gentleman presents with non-healing wound on right tibia for the last 2 years. He is known case of Rheumatoid arthritis for which he has been taking oral steroids. X-rays show involucrum and sequestra. Lab shows high ESR. Which of following would be most appropriate antibiotic?		
	A Gentamicin	B Amoxicillin	C Erythromycin
	D Linzolid	E Metronidazole	
99	A 50-year-old woman presents to the doctor with a history of easy bruising and bleeding gums of 2 weeks duration. Her platelet count is 10,000/ μ L (normal range: 150,000-400,000/ μ L). Which of the following is the most likely diagnosis?		
	A Dengue fever	B Disseminated intravascular coagulation (DIC)	C Heparin-induced thrombocytopenia (HIT)
	D Idiopathic thrombocytopenic purpura (ITP)	E Thrombotic thrombocytopenic purpura (TTP)	

100	A patient comes to your clinic with complaints of toe deformities and discomfort when wearing shoes. Upon examination, you notice a flexion deformity at the proximal interphalangeal joint (PIP) and hyperextension at the metatarsophalangeal joint (MTP) of the second toe. What is the most likely diagnosis?				
	A	Claw toe	B	Hallux valgus	C Hammer toe
	D	Mallet toe	E	Stress Fracture	
101	A 6 month old infant has presented with anemia having Haemoglobin 6 gm/dl, Mean corpuscular volume (MCV)= 49 fl, Mean corpuscular hemoglobin (MCH) =16 pg and with hepatosplenomegaly. The most likely diagnosis is				
	A	Anemia due to folat deficiency.	B	Beta Thalassemia major	C Hereditary spherocytosis
	D	Iron deficiency anemia	E	Iron deficiency anemia	
102	40 year old male presented to the ER department having mucosal ulcerations, ocular and genital erosions. On examination there are erosions affecting the genital, oral and ocular mucosa. Patient has recently taken some new medications 2 weeks back. Which of the following Drug can be the culprit for the above mentioned condition?				
	A	Azithromycin	B	Cetirizine	C Ibuprofen
	D	Omeprazole	E	Paracetamol	
103	A 40 years old lady presented with lethargy and palor 4 months. She has no hepatosplenomegaly or lymphadenopathy or sternal tenderness. She had series of investigations done including bone marrow examination. Bone Marrow aspirate shows 15% myeloblasts and reduced erythropoiesis. What is the most likely diagnosis?				
	A	Acute Myeloid Leukemia	B	Acute Lymphocytic Leukemia	C Chronic Myeloid Leukemia
	D	Myelodysplastic syndrome	E	Myelofibrosis	
104	A 38-year-old patient has been on treatment for major depression disorder for the last 12 years and now presented with racing thoughts, elated mood, irrational and increased talking and beliefs he has been given the supernatural powers. What is the most probable diagnosis?				
	A	Bipolar disorder current episode, depressive	B	Bipolar disorder current episode, manic	C Bipolar disorder current episode, mixed
	D	Manic episode with psychotic features	E	Manic episode without psychotic features.	
105	Rheumatoid Arthritis is a chronic systemic autoimmune disease caused by IgM cell-mediated immune response against soft tissues, cartilage, and bone. Patients present with insidious onset of morning joint stiffness, polyarthropathy, subcutaneous nodules, with progressive hand and wrist deformity. A 50 year old lady known case of rheumatoid arthritis on antirheumatic drugs presented to you with deformities involving both hands. On examination her DIP is flexed while the PIP is hyperextended. this deformity is known as				
	A	boutounniere deformity	B	claw finger	C hallux valgus deformity
	D	swan neck deformity	E	trigger finger	
106	A 35 years old gentleman is going for bone marrow transplant. However His Hb is 5. He needs to build up his Hb quickly to get ready for the transplant. He has read about Graft versus Host disease on the internet. How can be Graft Versus Host Disease best avoided in this situation?				
	A	Getting close relatives to donate blood	B	Irradiating the blood components before transfusion	C Replacement by crystalloids
	D	Transfusing fresh whole blood	E	Transfusion of paked Red Cells	
107	Mr. Adnan, a 40-year-old man, presents with joint pain, swelling, and redness in his knee. He recently had a gastrointestinal infection. Laboratory tests reveal negative rheumatoid factor and HLA-B27 antigen. Based on the scenario, which of the following arthritic conditions is most likely in Mr. Adnan?				
	A	Ankylosing spondylitis (AS)	B	Enteropathic arthritis	C Psoriatic arthritis (PsA)
	D	Reactive arthritis	E	Rheumatoid arthritis	
108	Mrs. Nawal, a 50-year-old woman with SLE, has been experiencing fever, cough and dyspnea. She presented to emergency department and requires 5 litres of oxygen to maintain her saturations. Imaging studies reveal the consolidation and presence of pleural effusion. ECG and Echo are normal. Which of the following complications of SLE is Mrs. Nawal most likely experiencing?				
	A	Lupus cerebritis	B	Lupus myocarditis	C Lupus nephritis
	D	Lupus pericarditis	E	Lupus pneumonitis	
109	A 28-year-old woman, presents with joint pain and swelling in her fingers and toes. She also has pitting and discoloration of her nails. She has a history of psoriasis with scaly plaques on her elbows and knees. Laboratory tests reveal negative rheumatoid factor. Based on the scenario, which of the following arthritic conditions is most likely in her?				
	A	Ankylosing spondylitis (AS)	B	Enteropathic arthritis	C Psoriatic arthritis (PsA)
	D	Reactive arthritis	E	Rheumatoid arthritis	
110	A pregnant radiographer is assigned to perform a chest x-ray on a patient. Which of the following actions would best protect the radiographer from radiation exposure?				
	A	Ask another radiographer to perform the procedure	B	Stand behind the wall during the exposure	C Use a remote control to activate the x-ray beam
	D	Wear a lead apron and thyroid shield	E	all of the above	

Professional
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111	A 31-year old male has been screened for a familial blood disorder. The results show hemoglobin of 9.5 g/dL and smear displays few target cells. Hemoglobin electrophoresis shows a mild increase in HbA2. What is the appropriate diagnosis?				
	A	Heterozygous β -thalassemia	B	Homozygous β -thalassemia	C Normal variant
	D	Silent carrier α -thalassemia	E	Trait α -thalassemia	
112	Septic arthritis occurs most frequently in adults; however, the most serious sequelae from infection occur in children, especially if a hip joint is involved which of the following is the most common microorganism responsible for neonatal septic arthritis				
	A	heamophilus influenza	B	salmonella	C staph aureus
	D	staph epidermidis	E	streptococcus	
113	A 3 months old baby brought by nother to orthopedic opd with click around the hip. Baby was born full term NVD. Which one is not a risk factor for DDH?				
	A	Breach presentation	B	Female sex	C Foot deformity
	D	Multiparity	E	Oligohydromniaa	
114	A 22-year-old patient with a thermal injury is referred to you. The referring unit described the injury as a second degree burn. Which one of the following is correct regarding second-degree burns?				
	A	Blistering is usually present.	B	Capillary refill is rarely present.	C Sensation is usually absent.
	D	The entire dermis is normally involved.	E	The skin appendages are completely destroyed.	
115	A 3 year old child has history of Recurrent episodes of pain in chest legs and abdomen and recurrent pyrexia. He is pale, mildly icteric. Abdominal examination shows liver 2.5 cm, spleen not palpable. Hemoglobin= 8 g/dl; TLC= 15000/mm3; Platelet count= 400,000/mm3; Retic count 20 %. SBR is 4 mg/dl which is mostly indirect. The most likely diagnosis is				
	A	Acute Leukemia	B	iron deficiency anemia	C Sickle cell anemia
	D	Thalassemia major	E	Thalassemia intermedia	
	A 30 years old lady presented with pallor, fatigue and dyspnoes. Physical examination shows pallor of the conjunctiva, angular cheilosis and kiolonychia. Which one of the following is NOT expected on the laboratory findings?				
	A	High serum tranferrin	B	Low Iron: total iron binding capacity ration	C Low total iron binding capacity
	D	Low serum ferritin	E	Low transferring saturation	
	A 30-year-old G2P1 presents at 20 weeks' gestation to enroll for prenatal care and complains of frequent fatigue. Routine prenatal laboratory tests reveal a hemoglobin concentration of 8 g/dl. A peripheral smear and red cell indices are consistent with hypochromic, microcytic cell changes. What is the most appropriate next step in management?				
	A	Folate supplementation	B	Recombinant erythropoetin	C Supplemental iron given orally
	D	Supplemental iron given intravenously	E	Transfusion with packed red cells	
	Mrs. Aneela, a 45-year-old woman, presents with joint pain, swelling, and morning stiffness in multiple joints. She also experiences fatigue and occasional low-grade fever. Laboratory tests reveal the presence of an antibody directed against double-stranded DNA. Based on the scenario, which of the following autoimmune arthritis conditions is most likely in Mrs. Aneela?				
	A	Ankylosing spondylitis (AS)	B	Psoriatic arthritis (PSA)	C Reactive arthritis
	D	Rheumatoid arthritis	E	Systemic lupus erythematosus (SLE)	
	What is the best way to avoid per-operative errors and adverse events during elective surgical operations?				
	A	Follow the ATLS protocols	B	Follow the WHO Surgical Safety Checklist	C Follow the NICE Guidelines
	D	Follow the AHA Guidelines	E	Follow the best clinical decision	
	A pregnant woman with fever, chills, and sweating is brought to the clinic. The woman has a history of malaria. The woman's temperature is 38 degrees Celsius. What is the most appropriate treatment?				
	A	Artesunate-mefloquine	B	Chloroquine	C Doxycycline
	D	Quinine	E	Sulfadoxine-pyrimethamine	