

KGMC BLOCK O PRE-PROFF '24

1) Which of the following is a major Duke criterion for the diagnosis of infective endocarditis?

- a. Splinter hemorrhages
- b. Roth spots
- c. Osler nodes
- d. Janeway lesions
- E New Valvular Regurgitation

2) 5 yr old child has mass in anterior mediastinum ct chest is done

What is the most probable diagnosis?

- Ca lung
- Ca esophagus
- Schwannoma
- Teratoma
- Rhabdomyosarcoma

3) A 4 yr old girl otherwise healthy present to ER

with hx of exertional dyspnea. On examination systolic thrill in suprasternal notch and systolic murmur at right upper sternal edge radiating to neck. Surgery most appropriate at which gradient?

- a) 20-30mmHg b) 30- 40 mmhg c) 50-60 D) 60-80 e) 20-30

4) Newborn present with central cyanosis and loud single s2 .which of following congenital heart disease he is suffering from

- Tetralogy of Fallot
- Vsd
- Asd
- Transposition of great vessel

5) A patient with hypertension is complaint with his medication but he develop cough by using it.

What is that medication??

- 1. Diuretic
- 2 ACEI
- 3. Beta blockers
- 4. ARB
- 5. Calcium channel blocker

6) a 22 years old man present with 2 months history of productive cough and blood stained sputum. He is having low grade fever weight loss for the same period. He has a positive contact history for TB. What is the most specific test to diagnose?

- A: Mantoux test
- B: ESR
- C: X-ray chest
- D: CT scan chest
- E: sputum for AFB

7) A 2 year old boy with a sudden onset of dyspnea. When this happened he was eating peanuts. There are signs of respiratory distress, right side wheeze, x- ray chest shows right side hyperinflation. What is the diagnosis?

- A) foreign body aspiration
- B) CCF

- C) Acute Bronchiolitis
- D) Asthma
- E) Pneumonia

8) A 65 years old woman having recurrent chest infections because of post tuberculous bronchiectasis .which one is the best strategy to decrease the frequency of infections in her;

- a. antibiotics before procedure
- b. pneumococcal vaccination
- c. chest physiotherapy
- d. regular antibiotics
- e. influenza vaccination

9) A patient with hypertension is complaint with his medication but he develop cough by using it. What is that medication??

- 1.Diuretic
- 2 ACEI
- 3. Beta blockers
- 4. ARB
- 5. Calcium channel blocker

10) 36-year-old lady presented with 3 weeks' history of purulent foul smell sputum, fever, weight loss and anorexia. She has been treated for pneumonia with some antibiotic but partial Improvement. Her chest x ray shows a cavity with air fluid level in the right apex. Which one of the following is the most appropriate further investigation she needs?

- a. Sputum septic culture
- b. Sputum for AFB
- c. CT scan chest
- d. Bronchoscopy
- e. CBC & ESR

11) 45 yrs old women with history of rheumatic heart disease with palpitations and worsening dyspnea on exertion. She reports frequent episodes of orthopnea . Which physical examination finding is most likely to be associated with chronic mitral regurgitation.

- 1: loud opening snap
- 2:mid diastolic murmur
- 3: displaced apen beat
- 4:loud p2
- 5: paradoxical splitting of s2

12) A 6 yrs old child with recurrent history of resp tract infections ,poor weight gain and has pansystolic murmur at left lower sternal border wt the diagnosis ?

- a.ASD
- b.VSD
- c.aortic stenosis
- d. Coarctation of aorta
- e.PDA

13) A 13 years old boy presented with fever,joint pain,skin rash.his lab test show raised ESR,CRP. consider the suspicion of Rheumatic fever,which of the following echo findings would most likely be present?

- 1)Mitral regurgitation

- 2) Bicuspid aortic valve
- 3) Left ventricular hypertrophy
- 4) Pulmonary HTN
- 5) Tricuspid regurgitation

14) A years old boy known case of VSD present with fever, new onset murmur and splinter hemorrhages on nails, what is most likely causative organism?

- a) St. Viridans
- B) staph aureus
- C) H.influenza
- D) pseudomonas
- E) enterococcus fecalis

15) 70yr old hx of mitral valve prolapse with fever n fatigue ..blood culture reveal strep viridian which additional finding on echo would be associated with diagnosis of IE. 1. Mitral valve prolapse and regurgitation. 2. Mild aortic regurgitation. 3. Aortic valve calcification. 4. Perivalvular abscess. 5. Left atrial enlargement.

16) You are suspecting a 8 year old child has a para pneumonic pleura. You have sent a pleural effusion fluid culture. Which organism mostly commonly causes the problem.

- A) staph aureus
- B) mycobacterium TB
- C) mycobacterium Avium
- D) streptococcus pneumonia

17) New born cause severe cyanosis, respiratory distress and right sided aortic arch. What is the probable diagnosis?

- A) Truncus arteriosus
- B) Arterial Septal Defect
- C)Transportation of great arteries
- D)Total anomalous pulmonary venous return
- E)Tetrolgy of fallot

18) 65yr woman having recurrent chest infection bcoz of post TB brochiectasis. Best strategy for decreasing frequency of recurrent infection

- 1. Influenza vaccine
- 2. regular antibiotics
- 3. antibiotics before procedures
- 4. pneumococcal vaccine
- 5. chest physiotherapy

19) 32 weeker presents with systolic murmur and widened pulse pressure.What is your diagnosis?

- A.asd
- B.vsd
- C.tetralogy of Fallot
- D.transposition of great vessels
- E.Pda

20) A 70 years old male with mitral valve prolapse present with fever and fatigue. blood culture reveal strep viridan .which of the following additional finding on ECG would most likely associated with infective endocarditis. 1: left atrial enlargement 2: aortic valve calcification 3:perivalvular abscess. 4:mild aortic regurgitation. 5:mitral valve prolapse without regurgitation

21) A 4yr old girl presented to OPD with persistent cough and tachypnea. Her mother says that she is having episodes of cough and whistling sounds from chest since 6 months of age. On examination flaring of nostrils and chest examination shows wheezing with increased respiratory rate. 2 more siblings also have history of recurrent respiratory infection. Chest x-ray shows hyperinflation, flattening of diaphragm, narrow and elongated heart. CBC shows eosinophilia.. diagnosis will be

- TB
- Asthma
- Bronchiolitis
- Pneumonia
- Plural effusion

22) A 2 yr old boy sudden onset of respiratory distress.. mother narates child was playing with small blocks . He devolped distress. Chest x ray had unilateral hyperinflation
What is the best treatment modality

- Bronchoscopy
- Laryngoscopy
- IV antibiotics
- iV fluid
- CT

23) 70 year old man with history of mitral valve prolapse with fever and fatigue. Blood culture is positive for streptococcus viridians. What are the other finding for diagnosis of infective endocarditis..

- Aortic valve calcification
- Perivalvular abscess
- Mild aortic regurgitation
- Left atrial enlargement
- MVP without regurgitation

24) 2 yr girl present with recurrent episode of palpitation associated with sudden onset and termination . What is the 1st line treatment for acute episodes.

- a. Adenosine
- b. amiodarone
- c. propranolol
- d. metoprolol
- e. verapamil

25) 60yr old man having stable angina, started sublingual nitroglycerin find relief of chest pain. What is the mechanism by which it alleviates the symptoms?

- A- reducing overload by vasoconstriction
- B- dec preload and myocardial oxygen demand
- C- inc coronary blood flow directly
- D- dilating coronary arteires to reduce arteriosclerosis

26) Which of the following is a major Duke criterion for the diagnosis of infective endocarditis..

- A. Osler nodes
- B. Roth spots
- C. Splinter Hemorrhages
- D. New valvular regurgitation
- E. Janeway lesions

27) A 36 year old woman presented with 3 weeks history of purulent foul smelling sputum, fever, weight loss and anorexia. She has been treated for pneumoniae with antibiotics but with partial improvement. Chest x ray shows cavity with air fluid level. Which of the following investigation should be done for diagnosis?

- A. CT scan of chest
- B. Bronchoscopy
- C. Sputum for AFB
- D. Sputum for culture
- E. CBC and ESR

28) 16 year old lady diagnosed with rheumatic fever with carditis. With addition of antibiotics which of the following medication need to prevent further inflammations ... Option. A : prednisolone B : cyclosporine C: azathioprine

29) 12 year old child of rheumatic fever having movement disorder, what is the most appropriate term for his movement disorder associated with rheumatic fever

- A. ballism
- B. Sydenham chorea
- C. Athetosis
- D. Myoclonus

30) 40 yrs old male having 3cm lesion stage 1A lung cancer in right lower lobe. What is gold standard management in this case?

- A) segmentectomy
- B) thoracoplasty
- C) lobectomy
- D) wedge resection
- E) chemo radiation therapy

31) A 38 yr old man presents with worsening exercise tolerance, fatigue, and sensation of breathlessness when lying down. He also reports a frequent cough with blood tinged sputum. On examination he has accentuated first heart sound and an opening snap. What is the most likely underlying cause of his cough?

- A. Pulmonary embolism
- B. Bronchogenic CA
- C. Pulmonary hypertension
- D. Pulmonary effusion

32) 5 year old child having mass on anterior mediastinum. In which of the following mass presentation is on anterior mediastinum.

- 1. Teratoma
- 2. rhabdomyosarcoma
- 3. esophageal ca

- 4. lung ca
- 5. mesothelioma

33) A 20 yr old lady presented with two months history of low grade fever and Right sided chest pain which increases with inspiration. Clinical examination shows a pale and Wasted last with dull percussion note and decreased breath sounds on right side lower chest. Which one of the following is the most likely diagnosis?

- a: Pleural Effusion due to TB
- b : Hemothorax due to Bronchogenic Carcinoma
- c: Pleural Effusion due to mesothelioma
- d: Lung Abscess
- e: Pneumothorax due to TB

34) . A 22 yrs old man presented with 2 month history of productive cough with blood stained sputum He has low grade fever and weight loss for same duration which one of the following treatment is diagnostic??

- ESR
- Xray chest
- Sputum for AFB
- Sputum C/S
- Mantoux test

35) A 20 years old man who is known case of asthma presented to er with severe shortness of breath and sweating. He cannot speak bcz of shortness of breath. Heart rate 120/ min Respiratory rate 28 / min fever 98f . On auscultation few inspiratory and expiratory wheeze present . Which is most immediate management step

- 1.100 % oxygen
- 2.28% oxygen
- 3.iv antibiotics
- 4.iv steroids
- 5.ipratropium nebulization

36) A person develop chorea after strep A infection? Which is the specific name for that chorea?
Sydenham chorea

37) A 12 year old athletic boy presents with exertional dyspnea and a systolic murmur heard best at the left lower sternal border. What conditions most likely causing these symptoms?

- 1. Restrictive Cardiomyopathy
- 2. Hypertrophic Cardiomyopathy
- 3. Dilated Cardiomyopathy
- 4. Ventricular Septal Defect
- 5. Atrial Septal defect

38) Which of the following is major Duke criteria

- a) Roth spots
- b) Janeway lesions
- c) New valvular regurg
- d) Osler nodes
- e) Splinter hemorrhage

39) A 72 year old man presents with chest pain and shortness of breath. His physical examination is consistent with aortic stenosis. Which of the following investigation confirms the severity of

condition.

- A) Electrocardiogram
- B) Echocardiography
- C) Cardiac MRI
- D) Coronary angiography
- E) Chest X-ray

40) A 50 year old female diagnosed with infective endocarditis presented with dyspnea palpitations , high pitched decrescendo diastolic murmur at left sternal border . Which of the following symptom is least likely with chronic aortic regurgitation:

- Palpitation
- Dyspnea
- Hemoptysis
- Orthopnea
- Nocturnal angina

41) A 50 year old woman with a known diagnosis of mitral stenosis present with worsening dyspnea and ECG is performed to assess the severity her mitral valve disease which of the following echocardiographic finding suggest mitral valve stenosis ?

- Mitral valve area of 2.5 cm²
- Mitral valve area of 1.0 cm²
- Left atrial diameter of 40 mm
- Mean pressure gradient across mitral valve of 6 mmHg
- Tricuspid regurgitation

42) 7 yr old child present with recurrent respiratory tract infections. On examination his sinuses are tender to touch, there are bilateral crepitations on chest auscultation, apex beat is on the right side. What is the diagnosis?

- A. Foreign body aspiration
- B. Cystic fibrosis
- C. Primary ciliary dyskinesia
- D. Primary immunodeficiency
- E. Acquired immunodeficiency

43) 3 years old boy present to you with high grade fever and chills. Mother complains that his is having cough and not taking feeds in appropriate amounts . On examination there is diminished movements on left side of chest, increased vocal fremitus , dullness on percussion, bronchial breathing in left lower zone. WBC=18000/mm³. what is diagnosis

- Asthma
- Bronchiolitis
- TB

Pneumothorax

Bacterial pneumonia

44). A 7 year old child presents with Recurrent Respiratory tract infections . His sinuses are tender to touch and there are bilateral crepitations with apex beat displaced to the right. Which of the following is the most likely diagnosis?

- a) Cystic fibrosis
- b) Primary ciliary dyskinesia
- c) Foreign body
- d) Primary Immunodeficiency
- e) Acquired Immunodeficiency

45) 75 years old woman with severe mitral regurgitation presented with heart failure symptoms despite optimal medical therapy which of the following is most appropriate management

- a) cardiac desynchronisation therapy
- b) per cutaneous coronary intervention
- c) closed valvotomy
- d) mitral balloon valvuloplasty
- e) mitral valve replacement

46) A newborn child presented with dyspnea and respiratory distress. Chest x ray shows snowman and figure of 8 appearance. What is the diagnosis?

Tetralogy of Fallot

Transposition of great vessels

Transposition of the large vessels

VSD

ASD

47) Which of the following is least associated with infective endocarditis

- A. Pulsus paradoxus
- B. Clubbing
- C. Petechiae
- D. Roth spots

E. Jane way lesions

48) which is the initial investigation to assess severity of aortic regurgitation?

1)echo

2) ecg

3) valve surface area

4) cardiac mri

5)ct angiography

49) 5 years old boy having machinery murmur radiate to left infraclavicular region has ...

A tof.

B PDA.

C transposition of great arteritis

50) 60 year old man with hypertension for the last 10 years. Which of the following would be best to determine if there is end organ damage present?

Chest Xray

Fundoscopy

Holter monitoring

Serum creatinine + urinalysis

51) A 65 year old woman known case of aortic stenosis presents for routine follow up. Her echo cardiogram shows a peak gradient of 75 mm of hg across the aortic valve. Which of the findings of the echocardiograph are inconsistent with aortic stenosis

A) Left ventricular ejection fraction of 70%

B) Left atrial enlargement

C) Peak systolic velocity of 2m/s

D) Aortic valve area<1m²

E) Aortic valve area>2m²

52) A 32 weeker presents with systolic murmur and widened Pulse pressure . Which congenital anomaly :

a) Patent ductus arteriosus

b) Tetralogy of fallot

C) ventricular septal defect

- D) atrial septal defect
- E) transposition of great arteries

53) 12 year old boy of known rheumatic fever presented with dyspnea and respiratory distress. Echo shows valvular abnormality. which valve is most commonly affected in rheumatic fever

- A) aortic
- B) pulmonary stenosis
- C) mitral stenosis
- D) tricuspid regurgitation

54) a 75 years old women with severe mitral regurgitation develops heart failure despite optimal medical therapy. What is appropriate next step in management of MR

CRT

PCI

Mitral valve replacement

Mitral valve balloon valvuloplasty

55) A 50 years old male hypertensive presented to OPD for routine medical check up, BP 180/ 110. Which one of the following will indicate end organ damage?

- A. Loud S1
- B. Loud S2
- C. Anemia

56) 20 yr old came to emergency department after being hit by car 50 mins ago. He is in distress, pale, cold clammy periphery and in air hunger. HR 148/min, B/P 84/47, respiratory rate 36/min. Air entry is present bilaterally with engorged neck vein & large bruise on front of Central and right chest. On needle aspiration there is no free air. Dx?

Cardiac tamponade

Diaphragm rupture

Thoracic aorta rupture

Tension pneumothorax

Compression asphyxia

57) 40 years old patient lesion of 3cm Stage 1A Ca lung in right lower lobe, which of the following is gold std treatment option?

Segmentectomy

Thoracoplasty

Lobectomy

Chemoradiotherapy

Wedge resection

58)...A patient with severe mitral regurgitation and having heart failure,despite medical therapy what is the next step in management?

a. Balloon valvuloplasty

b. Valve replacement

c. CRT

d. PCI

e. Close valvotomy

59) . 72 year old man with chest pain, SOB on exertion. On physical examination patient has aortic stenosis. Which investigation to confirm severity?

A. Xray chest

B. Coronary angiography

C. Ecg

D. Echo

E. Cardiac MRI

60) Which of following findings on echo is more consistent with severe mitral regurg

Left atrial enlargement

Regurgitant jet >30%of left atrium volume

Regurgitant volume >60mlper beat

Mild pulmonary htn

Ejection fraction>60%

61) The newborn child with breathlessness and qrs elevation @ tricuspid atresia b patent ductus arteriosus c VSD d ASD e coarctation of aorta

NOTE:

KGMC preproff '24 was all repeated from the 2023's preproff for block O, hence we didn't bother to re-compile the very same mcq's.

Regards,

Rabia Khan Bangash