MBBS 5th Prof. Date: 03/12/2024 EOSE-N (Foundation-3, Blood-3, MSK-3) Select the best answer from given choices by filling the circle in Scoring sheet as 1. Clinical governance is the system by which healthcare agencies continually monitor and improve the quality of Marks: 120

Write your Roll No. on Scoring sheet & Question Paper.

b. Resource management Professional regulation

Handling claims for clinical negligence

Audit alone.

Randomized controlled trials (RCTs)

Are not required to be based on the concept of equipoise . b. Always have a control arm that uses placebo

Are the 'gold standard' for determining efficacy and safety in clinical research d. Are always 'double blinded'

Double blinding is not necessary

Which of the following statement is incorrect about appraisal?

Encourages open informal dialogue
 Encourages discussion of personal development plan

Tests that competencies have been met against a predetermined standard d. Addresses concerns supportively

c. None of the above

Which stage of clinical audit process follows development of criteria and standard?

a. Search for literatureb. Data Analysis

c. Data collection

d. Implement necessary changes

e. All of the above

A patient's wound is not healing and appears to be worsening with the current treatment. The nurse first

a. Netifying the physician

b. Calling the wound care nurse

c. Changing the wound care treatment
 d. Consulting with another nurse

e. None of the above

Which of the following is not a characteristic of geriatric care?

a. Multidisciplinary approach

b. Focus on cure rather than care

Emphasis on functional independence

d. Attention to comorbidities

e. All of the above

Which of the following is considered a geriatric syndrome?

a. Hypertension

b. Frailty

Appendicitis C.

d. Migraine

e. All of the above

Which of the following is the most common cause of falls in elderly?

a. Visual impairment

b. polypharmacy

c. Neurological disorders

d. Environmental hazards

e. All of the above

The single best test to confirm iron deficiency is?

a. Serum iron

b. Serum ferritin

Transferrin saturation C.

Hematocrit levels d.

10. A patient has history of gut surgery which included partial gastrectomy 3 months back now presented with fatigue and shortness of breath on exertion. CBC done which showed hemoglobin of 10. What is the most probable cause of anemia in this patient?

a. Iron deficiency anemia

b. Folate deficiency anemia c. Vitamin b12 deficiency anemia

d. Anemia of chronic disorder

Pernicious anemia

A 23-year-old male presented with feeling low energy in body with tiredness all the times. CBC done which the of 9.1 with MCV of 65. WBC are slightly increased with high eosinophil count. Blood film showed micros a. Hookworm infestation the probable cause of anemia in this patient? Vitamin b12 thalassemia 12. Blood film of a patient shows macrocytosis with polkilocytosis and neutrophils with 6 lobes. What is the Folate deficiency d. Liver disease Iron deficiency 13. Which of the following parameters starts getting better earliest after starting iron supplements for iron deficiency anemia? Increase in reticulocyte count Feeling of well being Increase in ferritin 14. A 27-year-old female is presented with complaints of intermittent dysphagia. Examination showed marked pallor, angular cheilitis with glossitis. What initial treatment of the party has a party bear? pallor, angular cheilitis with glossitis. What initial treatment should be given to her? Esophageal dilatation Lsomeprazole Folic acid supplements 15. A 51-year-old male is investigated for exertional dyspnea diagnosed as having oron deficiency anemia. What Fecal occult blood test Colonoscopy CT abdomen Urine routine exam 16. Which one of the following is the earliest neurological manifestations of cobalamin deficiency? Parestnesia in lower limbs d. Dementia 13 psychosis 17. A pregnant female has work up for low hemoglobin. Labs showed Hb 10.2, MCV of 61 with normal platelets and RDW value. Total RBC count is also high. Patient is otherwise asymptomatic. What is the most probable cause of a. Iron deficiency anemia b. Beta thalassemia trait Beta thalassemia major d. Sideroblastic anemia Folate deficiency anemia 18. A 23 year old male has malaria which was treated with primaquine 4 days back. Now patient presented with jaundice and fatigue. Labs showed Hb of 8.1 with normochromic normocytic picture, bilirubin 4.1, ALT 24 and alkaline phosphatase 1.2. G6PD levels are normal. Peripheral film also showed bite cells. What is the probable diagnosis? a. Plasmodium falciparum b. mycoplasma G6PD deficiency anemia Hereditary spherocytosis Dubin johnsons syndrome 19. A 25-year-old female presented with weakness with anorexia and sore tongue for 3 months. Examination showed marked pallor with yellow sclera and smooth shine tongue with multiple white color patches on skin. Which test will confirm your suspected diagnosis? a. Peripheral blood smear b. Serum bilirubin Intrinsic factor antibodies Anti-parietal cell antibodies d. Serum folate levels 20. A patient with history of anemia and jaundice is investigated with a peripheral film which showed 3% fragmented RBC (schistocytes). Which of the following is not a cause of this abnormality? Hemolytic uremic syndrome Thrombotic thrombocytopenic purpura Mechanical heart valves G6PD deficiency 21. A 49 year old female is presented with burning sensation in both feet associated with ataxia for 2 weeks. Examination showed a pale looking female with smooth tongue with loss of vibration sense. Labs showed macrocytosis and hyper segmented neutrophils. What should be the treatment duration of this patient? 3 months 6 months 9 months

12 months Life long

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	2. A 25 year old male presented with weakness and epistaxis. CBC showed Hb 7.1, WBC count of 1200 and platelets lymphadenopathy. What is your diagnosis? a. Aplastic anemia b. Acute leukemia c. Myelolibrosis d. Hemolytic anemia
	C. Megaloblastic anemia 23. What is the most common cause of death in aplastic anemia? a. Sepsis
	Sepsis Bleeding Heart failure due to anemia Kidney failure
	e. Iron overload 24. A 43-year-old man presents to the emergency with a 4 week history of worsening abdominal discomfort and findings are Hb 18.9 WBC 9000, platelets 450,000, ALT of 84, AST of 107, and bilirubin Z.1. Doppler shows hepatic and the second
J	b. Cl abdomen C. Flow cytometry for CDSS and CD 59 d. Lupus autoconstant
	e. Erythropaictin levels 25. What is the first line treatment for mild SLE with joint and skin involvement? a. Hydroxychloroquine
	b. Methotrexate c. Prednisolone d. NSAIDS
	C. Azathioprino 26. Which Autoantibody is most specific for day.
	b. Anti Sci 70 c. Anti sis DNA
	d. Anti centromere
	27. A 45 year old female patient presents with proximal muscle weakness, helitope rash. And elevated CPK levels. a. Pulmonary embolism b. Interstrial lung disease c. Picural effusion d. Cardia: tamponade
П	e. ARDS 28. Which malignancy is most commonly associated with dermatomyositis? a. Colorectal Ca
ı	b. Ovarian Ca c. Lung Ca d. Breast Ca
	e. Thyroid Ca 29. A 16 years old patient, a known case of SLE presented with a history of right lower limb swelling, the limb is
	APLA workup was done which turned out to be positive. What should be the appropriate management of SLE with thrombosis?
	b. LMWH followed by warfarin c. Steroids d. Hydruxychloroquine
	e. Methotrexate 30. A32 year old female with SLE presents with confusion, seizures, and elevated anti-ds-DNA levels. What is the
1	next best step in her management? a Low dose aspirin h. Methotrexate
	c High dose steroids d. Hydroxychloroquine
	Avathioprine 31. Which of the following is the most common histological class of lupus nephritis ? a. Minimal mesangial lupus nephritis
	b. Mesangial proliferative lupus nephritis c. Diffuse proliferative lupus nephritis d. Advanced scierotic lupus nephritis
1	e. Rapidly progressive lupus nephritis 32. 25 years old female with 2 months history of progressive muscle weakness. She is unable to climb the stairs or
	comb her hair. She also has mild fatigue but denies any joint pain or skin rashes or weight loss. What is appropriate next investigation that will support the diagnosis?
	b. ESR c. CHC
	d. Nerve conduction Studies c. ALT

33. A 45 year old female patient presents with proximal muscle weakness, helitope rash. And elevated CPK levels.
What is the most small presents with proximal muscle weakness, helitope rash. And elevated CPK levels. What is the most appropriate next diagnostic step? Antibody panel (Anti Mi-2 and Anti Jo-1) Skin biopsy MRI of the muscle Repeat CPK 34. A 45-year-old male presented with complaints of neck pain associated with stiffness for 5 years. The pain is progressively worsening in intensity and duration and for the last 6 months he is unable to move his neck freely.

An x-ray of cervical spine showed complete fusion of the anterior and posterior elements and bilateral upper zone haziness in apices of lungs. What is the most probable diagnosis?

a. Rheumatoid arthritic Rheumatoid arthritis Ankylosing spondylitis Spinal TB e. Cervical spondylosis

35. A patient with history of uric acid stones has serum uric acid of 9.5mg/dl. He is started on allopurinol 100mg once daily. What should be the minimum target of uric acid in this patient? < 5 mg/dl c. < 6 mg/dl d. < 7mg/dl c. < 3mg/dl 36. A 36-year-old female diagnosed case of RA on methotrexate and HCQ with folic acid presented with painful mouth ulcers. Labs were done which are normal. What should be done? Stop methotrexate and start folinic acid Give iv steroids Stop hydroxychloroquine Stop methotrexate Increase the dose of folic acid 37. A 30-year-old female presented with a six months history of pain and swelling in her hands. Blood test were done which showed high positive RA factor and anti CCP with high titer ANA level. Which drug regime should be started initially? Methotrexate+ prednisolone b. methotrexate prednisolone Methotrexate plus sulphasalazine Sulphasalazine plus steroids A patient with RA presented with feeling more fatigued over the last 2 months. She is taking methotrexate and sulfasalazine for her rheumatoid arthritis. Examination showed splenomegaly and rheumatoid nodules. Labs were done which showed Hb 7.5, wbc, 2000 and platelets 75000. What is the most probable diagnosis? a. Felty's syndrome b. Aplastic anemia Iron deficiency anemia d. Methotrexate induced pancytopenia Sulphasalazine induced pancytopenia 39. Which of the following is the most common site involved in osteoarthritis? a. Hip b. Knee Hand d. Cervical spine Ankle 40. A 32-year-old male presented with complaints of pain in the right knee and left ankle joint for 3 days. Pain is worsened with active and passive movements. Patient is also taking eye drop for painful red eyes and is on ciprofloxacin for a suspected UTI. Examination showed plaques like lesions on both soles. What is the most likely diagnosis? a. Reiter's syndrome Gonococcal arthritis Stills disease Psoriatic arthritis 41. A 35-year-old male presented with pain and swelling in the joints of right hands. Examination showed tenderness in MCP, PIP and DIP Joints. There is also dystrophic hyperkeratosis of the finger nails. Which is the most likely diagnosis? a. Rheumatoid arthritis Psoriatic arthritis b. hemochromatosis C. d. sarcoidosis 42. Which of the following is the most common extraarticular manifestation of rheumatoid arthritis?

a. Sicca syndrome
b. Pleurisy
c. Pericarditis
d. Scleritis
e. Neuropathy

43. A 40 year old male represented with complaints of sudden onset of excruciating pain in left 1st tarsometatarsal joint after a lavish dinner. Joint fluid showed negatively birefringent crystals. What is the best initial treatment for him? a. b. Naproxen Prednisone Febuxostat Allopurinol 44. Which of the following is the most common cause of death in long standing rheumatoid arthritis? Sepsis Interstitial lung disease Cardiovascular disease d. Renal failure Lymphoma 45. A 39-year-old male presented with pain and swelling of small joints of hands is diagnosed as a case of rheumatoid arthritis. Which of the following is the initial long-term drug of choice for him Methotrexate b. NSAIDS Aspirin Celecoxib d. Naproxen Platelets in the wound form a hemostatic clot and release clotting factors to produce a. Fibrin b. Fibrinogen Fibroblast Thrombin 47. A patient suffers a deep, 6 cm wide thigh abrasion, which becomes infected. When he comes to hospital, the surgeon dresses the wound, planning to allow for healing by secondary intention. The resultant scar is likely to be Thin, and easily broken a. Thick and vascular b. Thick, avascular and resistant to trauma d. Of nominal thickness, but without sensation All of the above 48. Neurogenic shock is characterized by the presence of : a. Cool, moist skin
 b. Increased cardiac output Decreased peripheral vascular resistance Decreased peripheral vas
 Decreased blood volume 49. Correct statement about volume resuscitation in hemorrhagic shock include: a. Administration of large volumes of lactated Ringer's solution is complicated by increasing lactic acidosis b. Lactated Ringer's solution intravenously restores the extracellular fluid deficit-produced blood loss Lactate ions are readily excreted by the normal kidney
 Use of whole blood alone corrects hypovolemia more effectively than whole blood plus lactated Ringer's When lactated Ringer's solution is used to correct hypovolemia, decreased intravascular oncotic pressure 50. In the presence of acute blood loss, adequate pre-load to the heart is maintained initially by the a. Development of tachycardia Hormonal effects of angiotensin Hormonal effects of antidiuretic hormone 51. A patient has sustained trauma, and requires immediate surgery. The situation is dire. If the patient's stomach is full from a recent meal, the technique that will best protect the lungs against aspiration pneumonia is: a. Rapid sequence induction b. Nasogastric aspiration Preoperative ranitidine therapy d. Elevation of the head end 52. Safe dosage limits for local anesthetic are None of above a. Lignocaine: 40 ml of 2% b. Bupivacaine: 40 ml of 1% 53. The surgeon should be particularly concerned about which coagulation function in patient receiving and Ropivacine: 40 ml of 1% inflammatory or analgesic medication? a. APTT b. PT Reptilase time Bleeding time d. Thrombin time

the property converse with horomorphic property by the property of the propert a typical male had read traffic accident and waterned trauma to right him. It say stone, "git seed of non-fraction. There are no connected, What is the treatment of choice for this patient. I drive out printegers. transport fracture (143) his antroplacty Strictal traction According to the recommendation of the American college of surgeons committee of traums, which of the following parignly should be transported to a trauma center? It years and formally who lold is lose from a step ladder, with isolated hip fracture and normal with signs.
It years and hippelist with classed head injury and Clasgew come scale scare of L2. If you are full made assault virgin with stab wound to the back, normal with signs, and respiration distress. I was the relain barrendes (terrained) is motor reprise relation mith natural again and an apparent minima except abdominal wall contusion. 0, 0, 0 0.15.11 88. A 22 years old male is hospitalized with complex fracture of the femur. What is the initial emergency treatment. Debeldement intramedullary nail Plates and screws Wash and antibiotics External fixation 0, 0, 0 IL. 0.6.6 6.6.6 b, d, e 39. A 33 years old male involved in a street fight presents with bruises and deformity in the upper part of his leg. 5ray shows fracture of the neck of fibula. What is the single most associated nerve injury? Sciatic nerve Sural nerve Musculocutaneous nerve Lateral peroneal nerve 60. A 31 years old man underwent an operation where his hand was hanging outside the table. After the operation he had wrist drop and sensory loss over the dorsum of his hand. Which nerve was injured? a. Radial Ulnar b. Median C. d. Axillary 61. During psychiatric assessment the patient told that his neighbors are persistently talking about him. They are making planes against him. They are criticizing him. The psychiatrist also noted that the patient is talking with himself when he is alone and making gestures. This phenomenon is called as: a. Delusion b. Hallucination Illusion 62. During mental status examination, the patient told that some blasphemous ideas against the God and Propher intrude into his mind. He is trying to control and prevent these ideas but all in vain. This phenomenon exacertains further whenever he is performing his religious activities. He is very fearful and sad. He is thinking that the God will punish him for this satanic ideas. Which appropriate term is used for above mentioned ahenumenum? a. Delusions. b. Hallucination Illusions. C. Obsession d. Compulsion

54. Five days after an uneventful cholecystectomy, an asymptomatic middle aged woman is found to have serum sodium level of 120 meq/L, proper management would be Administration of hypertonic saline solution Restriction of free water Plasma ultrafiltration d. Hemodialysis Appressive diuresis with furosemide 55. Which of the following medications administered for hyperkalemia counteracts the myocardial effects lof potassium without reducing the serum potassium level?

a. Sodium polystyrene sulfonate (Kayexalate) b. Sodium bicarbonate 50% dextrose Calcium gluconate Insulin 56. 55 years old male had road traffic accident and sustained trauma to right hip. X-ray shows right neck of femur fracture. There are no comorbid. What is the treatment of choice for this patient Hemi arthroplasy Fixation of fracture Total hip arthroplasty C. Skeletal traction Non operative 57. According to the recommendation of the American college of surgeons committee of trauma, which of the following patients should be transported to a trauma center? 50 years old female who fell 8 feet from a step ladder, with isolated hip fracture and normal vital signs. 15 years old bicyclist with closed head injury and Glasgow coma scale score of 12. 23 years old male assault victim with stab wound to the back, normal vital signs, and respiratory distress. 3 years old infant passenger (restrained) in motor vehicle accident with normal vital signs and no apparent injuries except abdominal wall contusion. a,b,c B. a.c.d b,c,d D a,b,d a,c,d 58. A 22 years old male is hospitalized with complex fracture of the femur. What is the initial emergency treatment? a. Debridement b. Intramedullary nail Plates and screws d. Wash and antibiotics External fixation e. A. a,b,d B. a,c,d c,d,e D. b,d,e 59. A 33 years old male involved in a street fight presents with bruises and deformity in the upper part of his leg. Xray shows fracture of the neck of fibula. What is the single most associated nerve injury? Sciatic nerve Sural nerve b. Musculocutaneous nerve d. Lateral peroneal nerve 60. A 31 years old man underwent an operation where his hand was hanging outside the table. After the operation he had wrist drop and sensory loss over the dorsum of his hand. Which nerve was injured? a. Radial Ulnar b. 61. During psychiatric assessment the patient told that his neighbors are persistently talking about him. They are Median making planes against him. They are criticizing him. The psychiatrist also noted that the patient is talking with himself when he is alone and making gestures. This phenomenon is called as: Delusion Hallucination 62. During mental status examination, the patient told that some blasphemous ideas against the God and Prophet intended into his mind. He is today to control and property these ideas but all in vain. This phenomenon exacerbates b. buring mental status examination, the patient told that some blasphemous ideas against the God and Prophet intrude into his mind. He is trying to control and prevent these ideas but all in vain. This phenomenon exacerbates further whenever he is performing his religious activities. He is very fearful and sad. He is thinking that the God will punish him for this satanic ideas. Which appropriate term is used for above mentioned phenomenon? Delusions. Hallucination b. Illusions. Obsession Compulsion

63. During psychiatric interview a physically healthy individual is totally mute and not responding to any question? Offer that he can be interviewed next time if not comfortable now.

Offer that he can be interviewed in another place if not comfortable here.

Offer that he can be interviewed in written form or can communicate through gestures.

Offer that he can be interview by another doctor if not comfortable with him. Offer all above options one after another. 64. A young man rushes into emergency department with complaint that he has been suffering from heart attack and is about to die. He has palpitation, shortness of breath, tremors and profuse sweating. After proper assessment doctor assured him that your heart is ok and discharged him with some anxiolytics. He has very long history of similar problems with frequent consultations with frequent investigations with negative findings. What is the most probable diagnosis? Somatization disorder Somatoform pain disorder Somatoform autonomic dysfunction Hypochondriacal disorder e. Fibromyalgia
65. At which age will child develop pincer grasp?
a. 6 MONTHS
b. 9 MONTHS
c. 12 MONTHS
d. 15 MONTHS BOTHanb c. BOTH a n b

66. Measles vaccination done at which age?
a. 12 AND 18 MONTHS
b. 18 AND 20 MONTHS.
c. 9 AND 15 MONTHS
d. 6 N 12 MONTHS
e. 18 MONTHS
e. 18 MONTHS 67. At what age weaning should be start? a. 6 MONTHS b. 7 MONTHS c. 4 MONTHS d. 9 MONTHS e. 10 MONTHS 68. which of the following muscles are stance phase muscles?
a. Hamstring b. Quadricep Anterior tibial Peroneous longus None of the above d. 69. Waddling gait is due to
a. Gluteal muscle weakbness Paravertebral muscle weakness b. Obtruator nerve palsy Adductor muscle weakness d. Both anc 70. The most common cause of monoarthritis in children a. Tuberculosis arthritis b. Septic arthritis Osteosrthritis d. Rheumatoid arthritis 71. Sub periosteal erosions of middle phalanges at the radial aspect is characteristics of a. Gluteal muscle weakbness b. Paravertebral muscle weakness c. Obtruator nerve palsyd. Adductor muscle weakness e. Both a n c
72. Congenital hip dislocation is usually due to a. Short femur head b. Small femur neck Displacement of capital epiphysis d. Large acetabulum 73. All of the following are characteristics of duchence muscular dystrophy except; a. Both sexes are affected b. Pseudohypertrophy Death in 2nd decade d. Hereditar 74. The most common cause of scoliosis in children is a. Hemi vertebrae b. Marfan syndrome Post poliomyelitis Unequal limb length None of the above

86. A patient is suffering from vitamin k deficiency. Which of the coagulation factor will not be affected? In allergic reactions-Neutrophils - is increased. Lymphocytes b. Eosinophils d. Basophils e. All of the above 88. test is used to interpret hemolytic anemia. Schilling test b. Coombs test Genetic test None of the above d. All of the above 89. Half life of RBCS are а, 90 DAYS b. 120 DAYS 60 days 150 DAYS 100 DAYS 90. HB-electrophoresis should be done? b. 4 MONTHS 12 MONTHS d. 6 MONTHS 2 MONTHS 91. A 2-year-old infant is noted to have mild cyanosis who assumes a squatting position during long walking. He is noted to have increasing fussiness followed by increasing cyanosis, limpness, and unresponsiveness. The most a. Hypoplastic left heart
 b. Transposition of the Great Vessels Anomalous Pulmonary Venous Return d. Tetralogy of Fallot Aspiration with obstruction to air passages 92. A 20 year old male patient presents with right lumbar pain for the last one year. The pain increases in severity with water intake and reduces on urination. Ultrasound abdomen shows right renal hydronephrosis with marginally dilated renal pelvis. What is the likely diagnosis. a. Renal mass Renal Calculus Renal PUJ Obstruction Fungal Infection Diabetes Insipidus. 93. A G₅ P₄ with 36 weeks gestation comes with history of breathlessness and easy fatigability. On examination. She looks pale and her HB is 7 gm%. What is the most suitable way of correcting anemia? a. Parental Iron b. Oral Iron c. Blood transfusion
 d. Vitamin B¹⁷ injections e. All of the above 94. Anemia in pregnancy is defined as: a. Hb of <10.5 g/dl in 1st trimester
 b. Hb of <10 g/dl in 2nd and 3rd trimester Hb of <11 g/dl in 2nd and 3rd trimester d. Hb of <10.5 g/dl in 2nd an 3rd trimester e. None of the Above 95. The macrophages found in the epidermis are called: a. Merkel cells b. Keratinocytes Langerhans cells C. d. Melanocytes Basal cells 96. Which one of the following layers of the skin contain blood vessels? a. Basal layer b. Dermis c. Epidermis d. Subcutaneous tissue Stratum corneum 97. Which one of the following types of psoriasis occurs after sore throat? a. Plaque Psoriasis b. Scalp Psoriasis Nail Psoriasis C. d. Inverse Psoriasis e. Guttate Psoriasis

98. A 40 years old female patient with palmoplantar plaque psoriasis presents in the skin OPD with a flare up of he condition. On probing her, you find out that she is under severe emotional stress. Which one of the following is correct regarding her management?

a. Topical Steroids and emollients
b. Topical steroids and oral antihistamine
c. Topical Steroids and oral antihistamine Topical Steroids, oral antihistamine, emollients, anti-anxiety medication/stress management Anti-anxiety medication/Stress management Emollients and oral antihistamine 99. Which one of the following does not exacerbate psoriasis? Stress h. Infections Certain medications Certain foods 100. A 30 years old male patient, came to you with the complaints of thick yellowish greasy scales involving his scalp and beard area for 1 month. On examining the patient, you also find some crusting and scaling on his anterior eyelid margin. What will be your most likely diagnosis?

a. Seborrheic dermatitis Atopic dermatitis Contact dermatitis d. Psoriasis d. Psoriasis
 e. Allergic dermatitis
 101. A 9 months old baby presented to dermatology clinic with a generalized dry skin since birth which was very itchy in nature. The mother stated that the itching disturbed the baby's sleep and was aggravated with bathing and woolen clothes. What will be your most likely diagnosis? Seborrheic dermatitis Atopic dermatitis d. Contact dermatitis e. None of the above 102. A 37 years old female patient, housewife presents to you with itchy, scaly and fissured skin of the fingers of her both hands with burning sensation and pain since 2 weeks. What is your most likely diagnosis? Atopic eczema Irritant contact eczema Allergic contact eczema Psoriasis 103. Which one of the following bacterium is predominantly involved in the pathogenesis of acne? Staphylococcus aureus Propionibacterium acnes Streptococcus pyogenes E. coli Pseudomonas 104. A 24-year old unmarried woman has multiple nodulo-cystic, pustular and comedonal lesions on face, upper back and shoulders for 2 years. The drug of choice for her treatment would be: Azithromycin Doxycycline Erythromycin d. Isotretinoin Minocycline 105. Which of the following is not a treatment option for acne? Topical retinoids Topical antibiotics b. Oral immunosuppressants Oral retinoids Oral antibiotics 106. Acne can present as: Open and closed comedones a. b. Papules Pustules d. Nodules and cysts All of the above 107. Which one of these hormones trigger acne in adolescents? a. Androgens Estrogen b. Epinephrine Nor epinephrine 108. A 22 years old male patient presents to you with post-acne scarring. Which one of the following is the correct/Preferred treatment option for this condition? Topical retinoids Surgical correction Topical silicone gel CO2 Laser/Microneedling 109. Regarding bone densitometry, a T-score of -3.5 is defined as which of the following? Normal Bone Osteopenia b. Osteoporosis None of the above d. All of the above

Ulnar Nerve Musculocutaneous Nerve Radial Nerve d. None of the above 111. 60 years old female presented to ER complaining of severe pain in her Right Hip, unable to move and bear weight on it. Patient has history of fall on plain ground on her right side while walking. On examination her right lower limb is externally rotated and shortened. What is your provisional diagnosis? Head of femur fracture Inter trochanteric fracture of femur Neck of femur fracture Dislocation of hip joint None of the above 112. 25 years old driver presented to ER wit history of road traffic accident after a head on collision. GCS score is 13/15. Patient is complaining of severe pain in right hip. On examination right lower limb is shortened, adducted, flexed and internally retained. flexed and internally rotated. What is your provisional diagnosis? Shaft of femur fracture b. Inter trochanteric fracture of femur Anterior dislocation of hip joint d Posterior dislocation of hip joint None of the above 113. 20 years old has history of comminuted fracture around neck of fibula after road traffic accident. Thereafter patient has foot drop and decrease sensation in first web space dorsally. What is your diagnosis? a. Sciatic nerve injury b. Femoral nerve injury c. Common Peroneal nerve injury d. Superficial Peroneal nerve injury All of the above 114. What is the dominant blood supply to head of femur? a. Superficial femoral arteryb. Obturator artery Medial femoral circumflex artery Lateral femoral circumflex artery All of the above 115. 65 years old patient presented with pain in both knees more on right side for last 8 years. Pain worsens on activity and relieves with rest. No history of fever. Movement on knees is limited due to pain. Activities of daily living are affected. On examination there is joint line tenderness and both knees have Varus deformity. Laboratory reports are unremarkable. What is your diagnosis? Septic Arthritis b. Gouty Arthritis Rheumatoid Arthritis d. Osteoarthritis 116. 30 years old hypothyroid female patient presents with pain, numbness and paresthesias in first 3 digits of both None Of the above hands for last 06 months. Pain and paresthesias increases at night and awakens the patient from sleep. On examination there is atrophy of thenar eminence and weak grip of both hands. What is nerve entrapment and Cubital tunnel syndrome with ulner nerve entrapment b. Carpel tunnel syndrome with median nerve entrapment Goyun canal syndrome with ulnar nerve entrapment Thoracic outlet syndrome All of the Above 117. 67 years old female patient presented with history of fall on outstretched hand, complaining of painful dinner fork deformity of right wrist. X ray wrist shows distal radius fracture with dorsal comminution, dorsal angulation, dorsal displacement, radial shortening, and an associated ulnar styloid fracture, What is your diagnosis? a. Smith Fracture. b. Galeazzi Fracture Colles Fracture. Shaft of femur fracture All of the above 118. 18 years old presented to emergency room with history of basketball injury to 3rd finger. On eamination patient has painful swelling at distal interphalangeal joint (DIP) and lacks active DIP extention. What is most likely injury Mallet finger b. Fracture distal phalynx Fracture middle phalynx Dislocation PIP JOINT None of the above 119. 8 years old child presented with supra condyler humerus fracture to right arm. What is the most common nerve injury? Anterior interosseous branch of Median Nerve Posterior interosseous branch Radial Nerve Axillary Nerve None of the above 120. 20 years old patient has high grade fever with chills with painful swelling in right knee joint. Right knee is hot on palpation. TLC and neutrophil count is raised and ESR of 60. What is your diagnosis? a. Rheumatoid Arthritis Osteoarthritis Gouty Arthritis Septic Arthritis None of the above

which nerve is most at risk of damage from a midshaft humeral fracture? Ulnar Nerve h Musculocutaneous Nerve Radial Nerve None of the above 111. 60 years old female presented to ER complaining of severe pain in her Right Hip, unable to move and bear weight limb is externally rotated and shortened. What is your provisional diagnosis? Inter trochanteric fracture of femur Neck of femur fracture Dislocation of hip joint None of the above 112. 25 years old driver presented to ER wit history of road traffic accident after a head on collision. GCS score is 13/15. Patient is complaining of severe pain in right hip. On examination right lower limb is shortened, adducted, flexed and internally rotated. What is your provisional diagnosis? a. Shaft of femur fracture b. Inter trochanteric fracture of femur Anterior dislocation of hip joint Posterior dislocation of hip joint None of the above 113. 20 years old has history of comminuted fracture around neck of fibula after road traffic accident. Thereafter patient has foot drop and decrease sensation in first web space dorsally. What is your diagnosis? a. Sciatic nerve injuryb. Femoral nerve injury Common Peroneal nerve injury Superficial Peroneal nerve injury All of the above 114. What is the dominant blood supply to head of femur? Superficial femoral artery Obturator artery Medial femoral circumflex artery Lateral femoral circumflex artery All of the above 115. 65 years old patient presented with pain in both knees more on right side for last 8 years. Pain worsens on activity and relieves with rest. No history of fever. Movement on knees is limited due to pain. Activities of daily living are affected. On examination there is joint line tenderness and both knees have Varus deformity. Laboratory reports are unremarkable. What is your diagnosis?
a. Septic Arthritis
b. Gouty Arthritis Rheumatoid Arthritis Osteoarthritis None Of the above 116. 30 years old hypothyroid female patient presents with pain, numbness and paresthesias in first 3 digits of both hands for last 06 months. Pain and paresthesias increases at night and awakens the patient from sleep. On examination there is atrophy of thenar eminence and weak grip of both hands. What is nerve entrapment and diagnosis? Cubital tunnel syndrome with ulner nerve entrapment Carpel tunnel syndrome with median nerve entrapment Goyun canal syndrome with ulnar nerve entrapment Thoracic outlet syndrome All of the Above 117. 67 years old female patient presented with history of fall on outstretched hand, complaining of painful dinner fork deformity of right wrist. X ray wrist shows distal radius fracture with dorsal comminution, dorsal angulation, dorsal displacement, radial shortening, and an associated ulnar styloid fracture, What is your diagnosis? a. Smith Fracture. Galeazzi Fracture Colles Fracture. Shaft of femur fracture All of the above 118. 18 years old presented to emergency room with history of basketball injury to 3rd finger. On eamination patient has painful swelling at distal interphalangeal joint (DIP) and lacks active DIP extention. What is most likely injury a. Mallet finger Fracture distal phalynx Fracture middle phalynx Dislocation PIP JOINT None of the above 119. 8 years old child presented with supra condyler humerus fracture to right arm. What is the most common nerve injury? Ulnar Nerve Anterior interosseous branch of Median Nerve Posterior interosseous branch Radial Nerve Axillary Nerve None of the above 120. 20 years old patient has high grade fever with chills with painful swelling in right knee joint. Right knee is hot on palpation. TLC and neutrophil count is raised and ESR of 60. What is your diagnosis? a. Rheumatoid Arthritis b. Osteoarthritis Gouty Arthritis Septic Arthritis None of the above