



WOMEN MEDICAL COLLEGE, ABBOTTABAD
FINAL YEAR EXAM (Block N), 27 05 2024

Medicine -40

1) Palliative care addresses the following issues of a serious patients:

- a) Emotional aspect only
- b) Emotional, physical & spiritual aspect ✓
- c) Physiotherapy & spiritual therapy only
- d) Physical symptoms only
- e) To counsel the patient for curative treatment

2) In palliative care, Hospice is a program:

- a) that provides only the medical treatment to the patients
- b) that provides counseling & spiritual therapy only
- c) that has no effect on the patient management
- d) that gives care to the people who are near the end of life & have stopped treatment ✓
- e) that provides only the dietary support to the serious patients

3) A 45-year-old female patient with a history of chronic obstructive pulmonary disease (COPD) is scheduled for lung resection surgery. She is a former smoker. Which of the following preoperative assessments is essential for optimizing her perioperative management

- a) Pulmonary function tests (PFTs)
- b) Electrocardiogram (ECG)
- c) Complete blood count (CBC) ✓
- d) Liver function tests (LFTs)
- e) Renal function tests (RFTs)

4) A 25-year-old female presents with painless, enlarged lymph nodes in the cervical region. Biopsy reveals Reed-Sternberg cells. Which treatment is commonly used for Hodgkin Lymphoma

- a) Chemotherapy ✓
- b) Radiation therapy ✓
- c) Immunotherapy
- d) Bone marrow transplant
- e) Surgery

5) A 60-year-old male with B-cell lymphoma experiences rapid enlargement of lymph nodes, fever, and night sweats. Which treatment is commonly used for aggressive Non-Hodgkin Lymphoma

- a) Chemotherapy
- b) Immunotherapy
- c) Stem cell transplant
- d) Radiation therapy ✓
- e) Surgery

6) A 45-year-old male presents with painless, rubbery lymph nodes in the cervical region that have been progressively enlarging over the past 6 months. He also reports a recent onset of night sweats and unexplained weight loss. A biopsy of the lymph node is most likely to show which of the following

- a) Reactive hyperplasia
- b) Granulomatous inflammation
- c) Metastatic carcinoma
- d) Hodgkin's lymphoma ✓
- e) Non-Hodgkin's lymphoma

A patient undergoing chemotherapy for acute lymphoblastic leukemia presents with nausea, vomiting, and muscle cramps. Laboratory tests show hyperuricemia, hyperkalemia, hyperphosphatemia, and hypocalcemia. Which of the following is the most likely diagnosis

- a) Acute kidney injury unrelated to chemotherapy
- b) Electrolyte imbalance due to poor diet
- c) Tumor lysis syndrome due to chemotherapy ✓
- d) Metabolic acidosis from renal tubular acidosis
- e) Hypercalcemia of malignancy due to bone metastasis

Auer rods are found in

- a) Acute myeloid leukemia ✓
- b) Blast crises of chronic myeloid leukemia
- c) Acute lymphoblastic leukemia
- d) Hodgkins lymphoma
- e) Sideroblastic anemia

- 9) Reed Sternberg cells are diagnostic of
- Acute lymphocytic leukemia
 - Multiple myeloma
 - ☒ Hodgkin's lymphoma
 - Celiac disease
 - Chronic lymphocytic leukemia

10) 60 years old male presented with heaviness in left hypochondrium. On examination he had a huge firm mass upto the umbilicus, no lymph nodes. TLC count 140,000, Neut 80%, Lymphos 15%. MP slide - negative. normal on USG. What is the likely diagnosis

- Chronic lymphocytic leukemia (CLL)
- ☒ Chronic myeloid leukemia
- Mantle cell lymphoma
- Follicular lymphoma
- Hodgkins lymphoma

11) A 65-year-old female presents with fatigue, weight loss, and night sweats. On examination, she has lymphadenopathy and hepatosplenomegaly. Peripheral blood smear shows lymphocytosis with smudge cells.

- ☒ Chronic lymphocytic leukemia (CLL)
- Hairy cell leukemia
- Mantle cell lymphoma
- Follicular lymphoma
- E Hodgkins lymphoma

12) A 40 yr old female presented with 02 month history of lethargy and dysphagia for solid food. There is a history of weight loss or indigestion.

ON EXAMINATION: She has glossitis, and anemia. No other abnormality found on examination. Her Barium swallow showed stricture in esophagus. Her peripheral blood smear showed microcytosis, anisocytosis, poikilocytosis and hypochromia. What is the most likely diagnosis

- Thalassemia
- Sideroblastic anemia
- ☒ Plummer-Vinson syndrome
- Megaloblastic anemia
- Pernicious Anemia

13) A 35yr old male presented with jaundice and anemia. On work up Hb is 4.5g/dl, with increased reticulocytes count of 9%. Smear shows polychromasia. What test should be done to confirm diagnosis

- Hb electrophoresis
- Osmotic fragility test
- ☒ Coomb's test
- Bone marrow biopsy
- Abdominal Ultrasound

14) A 22yrs old female is known case of thalassemia trait. Which portion of hemoglobin will be the expected raised on HB electrophoresis

- ☒ Hb A2
- Hb A
- Hb F
- Hb S
- Hb Bart

15) A 75 yr old male presented with 06 month history of skin pigmentation, tingling sensations in the lower extremities, and weight loss. CBC: Hb 7.5 g/dl, WBC 3.2×10^9 , MCV 115, MCH 26, Platelets 320. Peripheral smear showed Macrocytosis and Hypersegmented neutrophils. Serum Ferritin: 200ng (Normal >27). What is the most likely diagnosis

- Iron deficiency Anemia
- Sideroblastic Anemia
- ☒ Megaloblastic Anemia
- Anemia of Chronic Disease
- Aplastic Anemia

16) A 14-year-old boy presents with recurrent episodes of joint swelling and pain, particularly in his knees after minor injuries or physical activity. He also reports easy bruising and prolonged bleeding after dental extractions. On examination, there is tenderness and swelling in multiple joints. What is the most likely diagnosis

- ☒ Hemophilia A
- von Willebrand Disease
- Disseminated Intravascular Coagulation (DIC)
- Factor XI deficiency
- Platelet function disorder

- 17) A 60-year-old female presents with a history of easy bruising, particularly on her arms and legs. She denies any history of significant bleeding episodes. Laboratory investigations reveal normal bleeding time, decreased platelet count, and increased megakaryocytes on bone marrow biopsy. What is the most likely diagnosis
- Von Willebrand disease
 - Hemophilia A
 - ☒ Immune thrombocytopenic purpura (ITP)
 - Thrombotic thrombocytopenic purpura (TTP)
 - Bernard-Soulier syndrome
- 18) A 14-year old boy presented with complaints of swelling left knee. He had history of post circumcision bleed in the past. His coagulation profile showed PT 12 sec, APTT 80sec, BT 3 minutes, platelet count normal. What is the most likely diagnosis
- factor XIII deficiency
 - Glanzman thrombasthenia
 - ☒ Hemophilia A
 - sickle cell disease
 - von willibrand disease
- 19) 14 year old girl presented with complaints of excessive bruising since childhood and menorrhagia since menarche. She has a family history of excessive bleed in her maternal aunt. Her coagulation profile showed BT >15min, PT 14sec, APTT 77sec. The most likely diagnosis is
- hemophilia A
 - hemophilia B
 - ☒ von willibrand disease
 - factor VII deficiency
 - Protein C deficiency
- 20) Which of the following medicines is commonly used as a first-line treatment for Rheumatoid Arthritis
- ☒ Methotrexate
 - Prednisone
 - ☒ NSAIDs
 - Sulphasalazine
 - Infliximab
- 21) Which of the following is a characteristic feature of Rheumatoid Arthritis
- Asymmetric joint involvement
 - ☒ Symmetric joint involvement
 - Oligoarticular involvement
 - Monoarticular involvement
 - Axial skeleton involvement
- 22) Which of the following medicines is a biologic agent used to treat Rheumatoid Arthritis
- Etanercept
 - ☒ Methotrexate
 - Prednisone
 - Hydroxychloroquine
 - Azathioprine
- 23) The specificity of Anti CCP in Rheumatoid Arthritis is:
- 65%
 - 75%
 - ☒ 85%
 - ☒ 95%
 - 100%
- 24) What is the typical trigger for Reactive Arthritis
- Genetic predisposition
 - Environmental factors
 - ☒ Previous infection
 - Joint trauma
 - Autoimmune disorder
- 25) Which of the following is the eye inflammation that can occur in Reactive Arthritis
- Episcleritis
 - ☒ Uveitis
 - Keratitis
 - Iritis
 - Scleritis

- Which of the following is a common finding on physical examination of Reactive Arthritis patients
- a) Joint deformity
 - b) Muscle weakness
 - c) Skin rashes
 - ☒ d) Enthesitis
 - e) Lymphadenopathy
- 27) Which of the following is a characteristic feature of Ankylosing Spondylitis
- a) Symmetric joint involvement
 - b) Asymmetric joint involvement
 - c) Oligoarticular involvement
 - d) Monoarticular involvement
 - ☒ e) Axial skeleton involvement
- 28) Which of the following genetic marker is associated with Ankylosing Spondylitis
- a) HLA-A
 - b) HLA-B
 - c) HLA-DR
 - d) HLA-DQ
 - ☒ e) HLA-B27
- 29) Which of the following medicines is most commonly used to treat Ankylosing Spondylitis
- ☒ a) NSAIDs
 - b) Corticosteroids
 - c) DMARDs
 - d) Biologic agents
 - e) JAK Inhibitors
- 30) What is the primary cause of Osteoporosis
- a) Hormonal imbalance
 - ☒ b) Vitamin D deficiency
 - c) Calcium deficiency
 - ☒ d) Aging and bone loss
 - e) Genetic predisposition
- 31) What is the name of a test used to measure the bone mineral density
- a) MRI (Magnetic Resonance Imaging)
 - b) CT (Computed Tomography)
 - ☒ c) DXA (Dual-Energy X-ray Absorptiometry)
 - d) X-ray
 - e) Bone scan
- 32) Which of the following medicines is commonly used to treat Osteoporosis
- a) Calcium supplements
 - b) Vitamin D supplements
 - c) Hormone replacement therapy
 - ☒ d) Bisphosphonates
 - e) Cox-2 Inhibitors
- 33) What is the name of the crystal deposits that form in joints and cause Gout
- a) Calcium pyrophosphate
 - b) Hydroxyapatite
 - ☒ c) Monosodium urate
 - d) Positively birefringent crystals
 - e) Cholesterol
- 34) What is the most common type of arthritis
- a) Psoriatic Arthritis
 - b) Rheumatoid Arthritis
 - c) Gout
 - d) Fibromyalgia
 - ☒ e) Osteoarthritis
- 35) Which of the following is a characteristic of Osteoarthritis
- a) Inflammation
 - b) Autoimmune disorder
 - ☒ c) Degenerative joint disease
 - d) Infectious disease
 - e) Congenital disorder

- 36) Which of the following medical treatment can be used in Osteoarthritis
- Hydroxychloroquine
 - Biologic agents
 - Sulphasalazine
 - Chondroitin sulfate & Glucosamine** ✓
 - Tumor Necrosis factor
- 37) A 30-year-old woman with a diagnosis of SLE presents with fatigue, fever, and a new-onset rash. Her laboratory tests show anemia, leukopenia, and thrombocytopenia. Which of the following is the most likely explanation for these findings?
- Acute SLE flare**
 - Chronic SLE with stable disease
 - Infection secondary to immunosuppression
 - Drug-induced lupus
 - Hematological malignancy
- 38) A 25-year-old male patient with SLE is being evaluated for renal involvement. He has hypertension and his urine analysis shows proteinuria and hematuria. Which of the following tests is most important for assessing his disease activity?
- Serum creatinine
 - Anti-double stranded DNA antibody titers** ✓
 - Complement levels (C3, C4)
 - Anti-Smith antibody
 - Urine protein/creatinine ratio
- 39) A 55-year-old woman presents with progressive weakness in her upper and lower limbs. On examination, she has difficulty rising from a chair and climbing stairs. Her muscle strength is reduced, especially in the proximal muscle groups. Which of the following conditions is most likely responsible for her symptoms?
- Polymyositis**
 - Dermatomyositis
 - Inclusion body myositis
 - Myasthenia gravis
 - Muscular dystrophy**
- 40) A 48-year-old man presents with a 6-month history of progressive weakness in his proximal muscles. He reports difficulty climbing stairs and getting up from a seated position. His family history is significant for similar symptoms. On physical examination, there is notable muscle atrophy in the proximal muscle groups. Which of the following is the most appropriate initial diagnostic test?
- Serum muscle enzyme levels (e.g., Creatine Kinase)**
 - Electromyography (EMG)
 - Muscle biopsy
 - Magnetic Resonance Imaging (MRI) of the affected muscles
 - Genetic testing**

Pediatrics = 27

- 41) Which one is not a risk factor for G6PD deficiency
- Quinine**
 - Primaquine
 - Sulpha methoxazole
 - Aspirin
 - None of the above
- 42) Heinz bodies are pathogenomic of
- Thalassemia
 - Sickle cell anemia
 - Spherocytosis
 - G6PD deficiency**
 - All of above
- 43) Which one is not a feature of intravascular hemolysis
- Anemia
 - Henoglobinuria
 - Hemosidrinuria ✓
 - Methemoglobinemia
 - All of above**
- 44) Which one is not a clinical feature of thalassemia
- Frontal bossing
 - Rash** ✓
 - Protruding teeth
 - Frequent fractures
 - Portuberant abdomen

- 45) Hair on end appearance is pathognomonic of
- Sickle cell disease
 - Hemophilia
 - ITP
 - Thalassemia
 - Spherocytosis
- 46) Which one is pathognomonic of thalassemia on blood smear
- Oval RBC
 - Heinz bodies
 - Target cells
 - Sickle cells
 - All of above
- 47) Pigmented gall stones are pathognomonic of
- Thalassemia
 - Spherocytosis
 - G6PD Deficiency
 - Sickle cell disease
 - All of above
- 48) Which one is diagnostic test of thalassemia
- Electrophoresis
 - Bone marrow biopsy
 - Gene defect on DNA analysis
 - Blood Smear
 - All of above
- 49) Which one is not used in treatment of thalassemia
- Splenectomy
 - Desferrioxamine
 - Defriprone
 - Repeated blood transfusion
 - None of above
- 50) Which drug can increase Hb F levels
- Desferrioxamine
 - Hydroxyurea
 - Folic acid
 - Vit c
 - None of above
- 51) RBC life span in sickle cell disease
- 100 days
 - 70-80 days
 - 30-40 days
 - 10-20 days
 - None of above
- 52) RBC life span in Spherocytosis
- 80-100 days
 - 40-50 days
 - 60-70 days
 - 10-20 days
 - None of above
- 53) Which one is inherited in X linked recessive manner
- G6PD deficiency
 - Spherocytosis
 - Sickle cell disease
 - Thalassemia
 - All of above
- 54) Which one is diagnostic of spherocytosis
- Electrophoresis
 - Blood smear
 - Osmotic fragility test
 - Enzymatic assay
 - All of above

55) Which one is not clinical feature of acute lymphoblastic leukemia?

- a. Lymphadenopathy
- b. Purpuric and petechial skin lesion
- c. **Weight gain**
- d. Hepatosplenomegaly
- e. Pallor

56) Henoch Schonlein purpura is associated with

- a. Jaundice
- b. Hyperglycemia
- c. **Abdominal pain**
- d. None of the above
- e. **All of the above**

57) SLE has following feature.

- a. Photosensitivity
- b. Oral / nasal ulcers
- c. Malar rash
- d. **All of above**
- e. None of the above

58) Duration of immunity for measles vaccines

- a. 1 year
- b. **Lifelong**
- c. 5 years
- d. 10 years
- e. Not known

59) H influenza type B vaccine protects against

- a. Croup
- b. Bronchiolitis
- c. **Acute Epiglottitis**
- d. UTI
- e. All of above

60) Weaning should be started at

- a. 3 months
- b. **6 months**
- c. 9 months
- d. 1 year
- e. At any age

61) Rickets can present with

- a. Squint
- b. Diarrhea
- c. Frequent UTI's
- d. **Delayed closure of fontanels**
- e. All of above

62) Which medication can cause rickets

- a. Cephalosporins
- b. NSAID
- c. **Anti convulsants**
- d. Anti-histamine
- e. All of above

63) Septic arthritis can be caused by

- a. S.Aureus
- b. S.Pneumonia
- c. N.gonorrhea
- d. H.Influenza
- e. **All of above**

64) Which one is not a feature of systemic onset arthritis

- a. **Age later than 10 years**
- b. Hepatomegaly
- c. Splenomegaly
- d. **Generalized lymphadenopathy**
- e. None of above

- 65) Gower's sign is pathognomic
- a. Myotonic dystrophy
 - b. Down's syndrome
 - c. ☒ Duchenne muscular dystrophy
 - d. Motor neuron disease
 - e. All of above

- 66) Frequent falls can be due to
- a. Arthritis
 - b. Rickets
 - c. Perthes disease
 - d. ☒ Muscular dystrophy
 - e. All of above

- 67) Which muscular dystrophy is inherited in both autosomal dominant and recessive manners
- a. Becker's muscular dystrophy
 - b. Duchenne muscular dystrophy
 - c. ☒ Fascial limb girdle muscular dystrophy
 - d. Emery dreifuss muscular dystrophy
 - e. None of above

Dermatology = 14

- 68) A 41-year-old man develops itchy, polygonal, violaceous papules on the flexor aspect of his forearms. Some of these papules have coalesced to form plaques. What is the most likely diagnosis?

- a. ☒ Lichen planus
- b. Scabies
- c. Lichen sclerosus
- d. Morphea
- e. Psoriasis

- 69) A 67-year-old man with a history of Parkinson's disease presents due to the development of an itchy, red rash on his neck, behind his ears and around the nasolabial folds. He had a similar flare up last winter but did not seek medical attention. What is the most likely diagnosis?

- a. Levodopa associated dermatitis
- b. ☒ Seborrhoeic dermatitis
- c. Flexural psoriasis
- d. Acne rosacea
- e. Fixed drug reaction to ropinirole

- 70) Which condition is commonly found in atopic dermatitis?

- a. ☒ Asthma
- b. Type 2 DM
- c. sleep apnea
- d. acne vulgaris
- e. Ichthyosis

- 71) A 29-year-old man presents due to the development of 'hard skin' on his scalp. On examination he has a 9cm circular, white, hyperkeratotic lesion on the crown of his head. He has no past history of any skin or scalp disorder. Skin scrapings are reported as follows: No fungal elements seen. What is the most likely diagnosis?

- a. ☒ Psoriasis
- b. Dissecting cellulitis
- c. Erythema
- d. Systemic lupus erythematosus
- e. Seborrhoeic dermatitis

- 72) In lichen planus the basal cells which are shrunken with an eosinophilic cytoplasm and with a pyknotic and fragmented nuclei are called?

- a. Tzanck cells
- b. ☒ Civatte bodies
- c. Donovan bodies
- d. Rushton bodies
- e. Langerhan cells

- What is the most common causative agent of erythema multiforme (EM)?

- a. Penicillin and sulphonamides
- b. Systemic lupus erythematosus
- c. ☒ HSV infection
- d. D.Malignancy
- e. E. Psoriasis

- 115) A 30 years old female operated for Para umbilical hernia on elective list. A Redivac drain was placed for any collection. When this drain should be removed
- a. After 24 hrs
 - b. 02 Days
 - c. 05 Days
 - ☒ d. 07 Days
 - e. No use of drain
- 116) A 20 years old female underwent excision biopsy for 2x2 cm left breast lump. Wound is stitched with proline O and stitch is removed on day 7. This wound is healed by
- ☒ a. 1" intension
 - b. 2" intension
 - c. Skin grafting
 - d. Tertiary intension
 - e. Flap application
- 117) An elderly male who is diagnosed a case of carcinoma of prostate with painful bony metastasis admitted indoor for pain management. Which of the following is more likely to help this patient?
- a) NSAIDs
 - b) Paracetamol
 - c) Tricyclic drugs
 - d) codein
 - ☒ e) Morphine
- 118) Which of the following is good indicator of tissue perfusion?
- a) pulse
 - b) blood pressure
 - ☒ c) urine output
 - d) CVP
 - e) GCS
- 119) A 25 years old female presented with history of flame burn 2 hrs ago. Examination revealed burned area involving both upper arms, front of chest, abdomen and head & neck. What is total body surface area involved
- a) 35 %
 - ☒ b) 45 %
 - c) 55 %
 - d) 25 %
 - e) 65 %
- 120) A 45 years old female having second degree burn brought to emergency room. Which of the following formula is used for fluid resuscitation?
- a) Curie
 - b) Barclays
 - ☒ c) Parkland
 - d) Wallace
 - e) Lund & Browder

- 4) Which skin condition often mimics atopic dermatitis and must be ruled of in differential diagnosis
- Erythema annular
 - Psoriasis**
 - Fixed drug eruptions
 - Rosacea ✓
 - Pytriasis Rosea
- 75) A 24-year-old woman presents due to a rash on her neck and forehead. She returned from a holiday in Cyprus 1 week ago and had her hair dyed 2 days ago. On examination there is a weepy, vesicular rash around her hairline although the scalp itself is not badly affected. What is the most likely diagnosis?
- Cutaneous leishmaniasis
 - Irritant contact dermatitis**
 - ✓ Allergic contact dermatitis
 - Syphilis
 - Photocontact dermatitis
- 76) A man presents with an area of dermatitis on his left wrist. He thinks he may be allergic to nickel. Which one of the following is the best test to investigate this possibility?
- ✓ Skin patch test
 - Radioallergosorbent test (RAST)
 - Nickel IgG levels
 - Skin prick test
 - Nickel IgM levels
- 77) A 34-year-old man presents to dermatology clinic with an itchy rash on his palms. He has also noticed the rash around the site of a recent scar on his forearm. Examination reveals papules with a white-lace pattern on the surface. Some isolated white streaks are also noted on the mucous membranes of the mouth. What is the diagnosis?
- Lichen planus**
 - Scabies
 - Lichen sclerosus
 - Morphea
 - Pityriasis rosea
- 78) What is the infective agent implicated in acne?
- Staphylococcus aureus
 - Streptococcus pyogenes
 - Staphylococcus epidermidis
 - ✓ Propionibacterium acnes
 - M. Canis.
- 79) How does lichen planus present clinically?
- Salmon coloured plaques with silvery scale
 - Pruritic, red, oozing rash with edema
 - Golden coloured crusts
 - Pruritic, purple, polygonal, planar papules and plaques**
 - Plaques with marginal activity and central clearing
- 80) Christmas tree distribution plaques occurs in which type of psoriasis
- Guttate**
 - Flexural
 - Erythrodermic
 - Pustural
 - Chronic psoriasis
- 81) Warts can be treated by all of the following except
- Laser
 - Cryotherapy
 - Electrocautery
 - Intra lesional steroids**
 - Surgery
- 82) A 5 year child presented to orthopedic O.P.D with deformed left leg.His Mother gave History of Flaccid paralysis with high grade fever 1 year back .What is probabale diagnosis?
- Congenital Talipes Equinovarus .
 - ✓ Congenital Talipes Valgus .
 - Septic arthritis of leg.
 - Post poli oparalysis of leg.**
 - Congenital dislocation of fort

Orthopedics = 12

- 83) A 15 years old male come to orthopedics' OPD with pain & swelling near the knee joint. On examination temperature is normal; swelling is distal part of femur, some movements of knee joint possible. Blood test normal. X-rays show radio destructive lesion distal femur
- Septic arthritis knee
 - Osteosarcoma**
 - Fracture distal femur
 - Giant cell tumor
 - Acute osteomyelitis
- 84) Two weeks old male child present to ortho OPD with deformity of feet. Both feet were inverted and plantar flexion is limited. Most probably diagnosis
- Congenital talipes calcaneo valgus
 - Congenital talipes equino varus**
 - Pes planus
 - Post polio paralysis of feet
 - Neurofibromatosis
- 85) A 1 year old female child was brought to orthopedic OPD. Parents' complaining of limping gait O/E right leg shorter than left leg. Right hip abduction is limited. Most probably diagnosis
- Congenital dislocation of hip**
 - Septic arthritis of hip
 - Fracture neck femur
 - Post polio paralysis of right leg
 - Tuberculosis of hip
- 86) A one day old female child was sent to ortho ward from labor room for orthopedic assessment of limbs. On examination Barlow's test is positive in both legs. What is the most probable diagnosis
- Fracture neck of femur
 - D.D.H**
 - CTEV
 - Proximal femoral focal defect
 - Septic arthritis of hip
- 87) A one day old female child was sent to ortho ward from labor room for orthopedic assessment of limbs. On examination Barlow's test is positive in both legs. What treatment is the best
- Surgery
 - Pavlick Harness**
 - Hip Spica
 - Traction
 - Bruce
- 88) A two day old male child present in ortho OPD. On examination his both feet are deformed and even plantar flexed. What will be the best treatment in this case
- Surgical correction of deformity
 - Serial casting of feet**
 - Treatment should wait till child is 1 year
 - Braces
 - Hip spica
- 89) A 13 years old girl presented with deformity of spine. On examination thoracic spine are curved laterally. On measurement the curve is 50°. What should be the treatment
- Observation
 - Surgical Stabilization
 - Braces**
 - None of above
 - Physiotherapy
- 90) A 70 years old male presented to orthopedic OPD with severe knee joint pain. On examination, it was found that he has Genu Varum; knees are swollen but skin colour is normal and movements are painful. There is marked reduction of joint space and osteophytes formation. What will be diagnosis;
- Rheumatoid arthritis
 - Ankylosing spondylitis
 - Osteoarthritis**
 - Fracture distal femur
 - ACL injury

- 91) A 40 years old lady presented with boutonniere (Buttonhole) deformity of index finger and swan neck deform of other fingers. Most probable diagnosis
- a. Osteoarthritis
 - b. **Rheumatoid arthritis**
 - c. SLE
 - d. Osteoporosis
 - e. Gout

- 92) A 40 years old lady presented with severe back pain for last 3 months. Pain worsens at night and not relieved with rest. On examination there is marked tenderness in lower thoracic spines slight weakness of both limbs. X-ray shows loss of disc space between T10 & T11. Most probable diagnosis

- a. Disc herniation
- b. **Tuberculosis of thoracic spine**
- c. Fracture of thoracic vertebra
- d. Kyphosis
- e. Acute phylogenetic infection

- 93) A 40 years old lady presented with severe back pain for last 3 months. Pain worsen at night and not relieved with rest. On examination there is marked tenderness in lower thoracic spine, slight weakness of both limbs. X-ray shows loss of disc space between T10 & T11. Most probable treatment in this case

- a. Spinal brace
- b. Debridement
- c. **ATT with debridement**
- d. Surgical stabilization
- e. Analgesics and rest

Psychiatry = 4

- 94) In mental state examination Mood assessment by mental health professional is called

- a. Assertive mood assessment
- b. Cognitive mood assessment ✓
- c. Subjective mood assessment
- d. Declarative mood assessment
- e. **Objective mood assessment**

- 95) If a patient has crystal clear understanding of his/her psychiatric illness, in mental state examination you will label his/her insight as

- a. Partial
- b. Incomplete
- c. **Present** ✓
- d. Absent
- e. Impartial

- 96) A 70 years old male diagnosed with chronic medical illness admitted in your ward, as a caring house physician, most important point considered while breaking bad news is

- a. Involve elder members of family
- b. Inform government
- c. Inform hospital staff
- d. **Inform key member of family** ✓
- e. Publish case first

- 97) A 34 years old female presented with pain which is experienced on most days of month for last 3 years, pain is generalized, all tests are clear, keeping in view psychological origin, what should be provisional diagnosis?

- a. Somatization disorder
- b. Hypochondriacal disorder
- c. **Somatoform autonomic dysfunction**
- d. **Persistent somatoform pain disorder**
- e. Undifferentiated somatoform disorder ✓

Gynecology = 2

- 98) A Multigravida with amenorrhea 9 months presented with anemia. What are the complication to be expected in labour?

- a. **APH**
- b. Shoulder dystocia
- c. Leaking membrane
- d. Stuck head
- e. Intra partum death

- 99) A 30 years old patient presented in OPD with anemia. her Hb is 8g/dl. her serum ferritin is 5. her POG is 34 wks? What is most likely diagnosis?

- a. **Iron deficiency anemia**
- b. Megaloblastic
- c. Aplastic anemia
- d. B. Thalassemia
- e. Pancytopenia

How much small intestine can be safely resected or bypass without deleterious effects

- 106) a) 25 %
b) 50 % ✓
c) 65 %
d) 75 %
e) 85 %
- 107) Which of the following fluids contain potassium
a) Normal saline
b) Ringer Lactate ✓
c) Dextrose saline
d) Dextrose water
e) None
- 108) A 30 years old female had 15 % burn involving both thighs. Examination revealed deep partial thickness burn. How this wound will heal if no intervention is done
a. Normal healing
b. No scarring
c. Hypertrophic scarring ✓
d. Keloid formation
e. Atrophic scar
- 109) A 30 years old female had 15 % burn involving both thighs. Examination revealed deep partial thickness burn. In how much time this wound will heal spontaneously
a. 1-2 WEEK
b. 2 WEEKS
c. 3-4 WEEKS ✓
d. 6-8 WEEKS
e. >8 WEEKS
- 110) A 35 years old male was operated for incision biopsy of right axillary lymph node. The procedure was uneventful, after 10 hours of procedure he developed bleeding from incision site. What is likely cause of this complication
a. 1° hemorrhage
b. 2° hemorrhage
c. Reactionary hemorrhage ✓
d. Non-surgical hemorrhage
e. Tertiary hemorrhage
- 111) A patient of 30 years female was operated for lap-Cholecystectomy in morning elective list. After 6 hours of surgery patient deteriorated vitally with pallor, pulse 130/min weak, BP- 80 systolic. What is the next step of management
a. Reassurance of patient
b. FAST Scan ✓
c. MRI
d. ERCP
e. Blood CBC
- 112) Informed consent must always be taken by:
a. Staff Nurse
b. House Officer
c. Surgeon Operating on Patient ✓
d. Medical Officer
e. Anesthetist
- 113) The maximum pressure for pneumoperitoneum during laparoscopic Cholecystectomy is
a. 10 mmHg
b. 15 mmHg ✓
c. 20 mmHg
d. 25 mmHg
e. 30 mmHg
- 114) During laparoscopy which of the following gas is used to create pneumoperitoneum
a. Air
b. CO₂ ✓
c. Oxygen
d. Nitrous oxide
e. Halothane

100)

The photosensitive material used in x-rays films consists of

- a. Cellulose
- b. Silver bromide ✓
- c. Zns
- d. Calcium tungstate
- e. None

Prime - 5

101)

Which of the following statements best describes Evidence-Based Medicine (EBM) and its related concepts?

- a. Evidence-Based Medicine (EBM) is the use of clinical expertise to determine the treatment for patients without considering research evidence.
- b. The steps of Evidence-Based Medicine include formulating a clinical question, searching for the best evidence, critically appraising the evidence, applying the evidence in practice, and evaluating the outcomes. (correct answer)
- c. Levels of evidence in EBM are not hierarchical and all types of evidence are considered equally reliable regardless of study design.
- d. EBM exclusively relies on randomized controlled trials (RCTs) and ignores other forms of evidence such as cohort studies, case-control studies, and expert opinion.
- e. EBM discourages the use of patient preferences and values in clinical decision-making.

102)

Which of the following statements best describes the components of clinical governance and the steps of a clinical audit?

- a. Clinical governance involves monitoring clinical performance, and clinical audit steps include setting standards and publishing results.
- b. Clinical governance focuses on financial management, and clinical audit steps are designing a study and publishing findings.
- c. Clinical governance includes risk management, clinical effectiveness, patient involvement, staff management, and information use; clinical audit steps are identifying a problem, setting criteria, collecting and analyzing data, implementing changes, and re-auditing.
- d. Clinical governance is about regulatory compliance, and clinical audit steps are formulating a hypothesis and conducting experiments.
- e. Clinical governance enhances healthcare reputation through marketing, and clinical audit steps involve conducting surveys and evaluating patient satisfaction.

103)

Which of the following statements accurately describes the concepts of patient safety and the types, etiology, and prevention of medical errors?

- a. Patient safety focuses solely on preventing medical errors by individual healthcare providers, without considering systemic factors.
- b. Types of medical errors include diagnostic errors, treatment errors, preventive errors, and other errors related to communication or system failures.
- c. The etiology of medical errors is limited to human errors such as lack of knowledge or skills, and does not involve system-related issues.
- d. Prevention of medical errors involves only the implementation of electronic health records (EHRs) to ensure accurate patient information.
- e. Patient safety concepts prioritize cost reduction over the quality and safety of patient care.

104)

What are the steps of the SPIKES model used for breaking bad news and counseling?

- a. Set the stage, Predict the patient's perception, Invite the patient's invitation, Know the patient's knowledge, Emphasize support, Summarize the information.
- b. Set the setting, Predict the patient's reaction, Involve the patient, Know the patient's perspective, Explore emotions, Summarize and strategize.
- c. Set the scene, Predict the patient's emotional response, Involve the patient, Know the patient's understanding, Explore emotions, Share a plan.
- d. Set the scenario, Predict the patient's expectations, Invite the patient's response, Know the patient's feelings, Explore emotions, Summarize the discussion.
- e. Stage the environment, Predict the patient's emotions, Initiate discussion, Know the patient's thoughts, Examine emotions, Summarize the plan.

105)

What is the primary focus of Evidence-Based Medicine (EBM)?

- a. Relying solely on clinical experience and intuition in medical decision-making.
- b. Incorporating patient preferences and values without considering research evidence.
- c. Integrating the best available research evidence with clinical expertise and patient values to make informed healthcare decisions.
- d. Following treatment guidelines based on expert opinions regardless of research evidence.
- e. Ignoring patient values and relying exclusively on statistical data in clinical practice.