

MCQs

- Write Your Roll No. on Scoring sheet & Question Paper.
- Select the best answer from given choices by filling the circle in Scoring sheet as

(Neurosciences-3, GIT-3 & Multisystem-3)

Time: 120 min

Marks: 12

- Which of the following cerebrospinal fluid (CSF) findings is most suggestive of bacterial meningitis?
 - ☒ Elevated protein, low glucose, and neutrophilic pleocytosis
 - Elevated protein, low glucose, and neutrophilic pleocytosis
 - Normal protein, normal glucose, and lymphocytic pleocytosis
 - Low protein, high glucose, and mononuclear cells
 - Elevated protein and lymphocytic pleocytosis
- What is the most common pathogen causing bacterial meningitis in adults?
 - ☒ Haemophilus influenzae type B
 - Streptococcus pneumoniae
 - Neisseria meningitidis
 - Listeria monocytogenes
 - pneumoniae
- Which of the following vaccines is routinely used to prevent meningococcal meningitis?
 - Pneumococcal conjugate vaccine (PCV13)
 - ☒ Haemophilus influenzae type B (Hib) vaccine
 - Meningococcal conjugate vaccine (MCV4)
 - Bacille Calmette-Guérin (BCG) vaccine
 - Haemophilus influenzae type C (Hib) vaccine
- What is the most common complication of bacterial meningitis in survivors?
 - ☒ Cerebral infarction
 - Sensorineural hearing loss
 - Hydrocephalus
 - Chronic headache
 - Migraine
- Which of the following statements regarding tuberculous meningitis (TBM) is correct?
 - ☒ CSF glucose is usually elevated in TBM.
 - TBM is characterized by a rapid onset and progression of symptoms.
 - Cranial nerve palsies are a common clinical finding in TBM.
 - ☒ TBM does not require corticosteroids as part of treatment.
 - TBM does require corticosteroids as part of treatment.
- Which of the following tests is most sensitive for diagnosing viral meningitis?
 - ☒ Gram stain of CSF
 - CSF polymerase chain reaction (PCR) for viral pathogens
 - ☒ CSF glucose concentration
 - India ink preparation
 - Glucose concentration
- Which of the following is a hallmark feature of meningitis caused by Cryptococcus neoformans?
 - ☒ Purpuric skin rash
 - Positive India ink stain in CSF
 - Rapid response to penicillin therapy
 - Lymphocytosis with low CSF opening pressure
 - All of the above
- Which of the following signs is most specific for meningitis?
 - Photophobia
 - ☒ Kernig's sign
 - Fever with headache
 - Vomiting
 - Loss of motion
- Which of the following is the most common type of migraine?
 - ☒ Migraine with aura
 - Migraine without aura
 - Chronic migraine
 - Basilar-type migraine
 - None of the above

- a 32-year-old woman experiences recurrent headaches preceded by visual disturbances, including flashing lights and zigzag patterns. The headaches are unilateral, throbbing, and associated with vomiting. She reports a family history of similar symptoms. Question: What is the most appropriate acute treatment for her headaches?
- Paracetamol
 - Sumatriptan
 - Propranolol
 - Topiramate
 - Disprin
21. A 40-year-old man reports a history of migraines. He experiences headaches twice a week despite regular use of NSAIDs and triptans. He also takes medications daily to prevent attacks but still has frequent headaches. Question: What is the next best step in managing this patient?
- Increase triptan dosage
 - Switch to erenumab
 - Assess for medication overuse headache
 - Add gabapentin
 - All of the above
22. A 50-year-old man with a history of hypertension and migraines presents with severe unilateral headache and vision loss in one eye. He denies any aura or other neurological symptoms. His blood pressure is 180/110 mmHg. Question: What is the most appropriate action?
- Start triptan therapy
 - Evaluate for hypertensive emergency and secondary causes of headache
 - Prescribe NSAIDs and follow up in 2 weeks
 - Diagnose as migraine and start CGRP antagonist therapy
 - Prescribe NSAIDs and follow up in 7 weeks
23. Which of the following is the most common type of dementia in the elderly?
- Frontotemporal dementia
 - Vascular dementia
 - Alzheimer's disease
 - Lewy body dementia
 - None of the above
24. Which neurotransmitter is most significantly decreased in Alzheimer's disease?
- Dopamine
 - Serotonin
 - Acetylcholine
 - Glutamate
 - None of the above
25. Which of the following genetic mutations is most strongly associated with early-onset familial Alzheimer's disease?
- APOE $\epsilon 4$ allele
 - Presenilin-1 (PSEN1)
 - Microtubule-associated protein tau (MAPT)
 - TDP-43
 - Presenilin-3 (PSEN3)
26. Which of the following is a key feature that differentiates dementia with Lewy bodies (DLB) from Alzheimer's disease?
- Memory impairment as an early symptom
 - Rapidly progressive motor decline
 - Visual hallucinations and fluctuating cognition
 - Severe aphasia
 - Rapidly progressive motor increase
27. Which diagnostic test is considered essential for ruling out reversible causes of dementia?
- Brain MRI
 - Serum vitamin B12 and folate levels
 - Electroencephalogram (EEG)
 - CSF tau protein levels
 - None of the above
28. Which of the following best describes the pathological hallmark of Alzheimer's disease?
- Alpha-synuclein aggregates in the substantia nigra
 - Beta-amyloid plaques and neurofibrillary tangles
 - Tauopathy confined to the frontal lobes
 - Vascular infarcts in cortical and subcortical regions
 - Beta-amyloid plaques
29. Which class of medications is most commonly used for the symptomatic management of Alzheimer's disease?
- NMDA receptor antagonists
 - Dopamine agonists
 - Acetylcholinesterase inhibitors
 - Monoamine oxidase inhibitors
 - All of the above
30. Which of the following clinical features is most consistent with frontotemporal dementia (FTD)?
- Early onset of memory loss
 - Prominent language disturbances or behavioral changes
 - Visual hallucinations
 - Gait disturbance and falls
 - Early memory loss

10. Which neurotransmitter plays a critical role in the pathophysiology of migraines?
 - a. Dopamine
 - ☒ b. Serotonin
 - c. Acetylcholine
 - d. GABA
 - e. All of the above
11. A 36-year-old woman reports episodic, throbbing headaches lasting 4–72 hours, associated with nausea and photophobia. Which of the following diagnostic criteria confirms migraine without aura?
 - a. Unilateral pain, nausea, and dizziness
 - ☒ b. Headache lasting less than 4 hours with nausea
 - c. Headache lasting 4–72 hours with two of the following: unilateral pain, pulsating quality, moderate/severe intensity, or aggravation by activity
 - d. Bilateral tension-like headache lasting for more than 7 days
 - e. Headache lasting less than 12 hours with nausea
12. Which of the following is a first-line treatment for acute migraine attacks?
 - ☒ a. NSAIDs
 - b. Beta-blockers
 - c. Antidepressants
 - d. Antiepileptics
 - e. None of the above
13. A 45-year-old man experiences a severe headache accompanied by visual disturbances. He sees shimmering zigzag lines (scintillating scotoma) that resolve before the headache begins. What type of migraine is this?
 - ☒ a. Migraine with aura
 - b. Hemiplegic migraine
 - c. Ophthalmoplegic migraine
 - d. Hemiplegic without migraine
 - e. Migraine without aura
14. Which medication is considered most effective for preventing frequent migraines?
 - ☒ a. Propranolol
 - b. Ibuprofen
 - c. Sumatriptan
 - d. Topiramate
 - e. All of the above
15. Which of the following is NOT a common trigger for migraines?
 - a. Stress
 - b. Skipped meals
 - ☒ c. Antihypertensive medications
 - d. Hormonal fluctuations
 - e. Hypertension
16. A 35-year-old woman reports daily use of over-the-counter pain medications for her migraines, leading to increased headache frequency. What is the likely diagnosis?
 - ☒ a. Chronic migraine
 - b. Medication overuse headache
 - c. Hemiplegic migraine
 - d. Tension-type headache
 - e. Body pain
17. Which of the following is a contraindication for using triptans in acute migraine management?
 - ☒ a. Hypertension
 - b. Ischemic heart disease
 - c. Migraine with aura
 - d. Migraine without aura
 - e. Chronic migraine
18. Which monoclonal antibody targets the calcitonin gene-related peptide (CGRP) pathway in migraine prevention?
 - ☒ a. Erenumab
 - b. Etanercept
 - c. Rituximab
 - d. Trastuzumab
 - e. None of the above
19. A 28-year-old woman presents with recurrent, severe, unilateral headaches lasting 24 hours. She describes the pain as throbbing and reports associated nausea and photophobia. She mentions that the headaches worsen with physical activity. Examination and imaging are normal. Question: Based on the diagnostic criteria, what is the most likely diagnosis?
 - ☒ a. Cluster headache
 - ☒ b. Migraine without aura
 - c. Tension-type headache
 - d. Subarachnoid hemorrhage
 - e. All of the above

31. Which of the following is the most significant risk factor for developing dementia?
- Age
 - Hypertension
 - APoE $\epsilon 2$ allele
 - Gender
 - All of the above
32. Which of the following cognitive screening tools is commonly used to assess for dementia?
- Glasgow Coma Scale (GCS)
 - Mini-Mental State Examination (MMSE)
 - Montreal State Examination (MSE)
 - Cortuson Imaging Protocol
 - Non-Montreal Imaging Protocol (NAMI)
33. Which of the following test is used for prognosis in both acute and chronic liver disease?
- Prothrombin time
 - Albumin
 - AST levels
 - Bilirubin
 - APTT
34. Which of the following test is used to differentiate between acute and chronic liver disease?
- Albumin levels
 - PT
 - APTT
 - AST levels
 - Bilirubin levels
35. Which of the following is the most reliable sign of presence of ascites?
- Fluid thrill
 - Shifting dullness
 - Splenomegaly
 - Auscultation
 - Percussion
36. A patient with acute liver failure has encephalopathy which is monitored by ICP monitor. It shows high intracranial pressure. What is the first line treatment to reduce ICP in liver failure?
- Hyperventilation
 - Mannitol
 - Hypothermia
 - Hyperosmotic saline
 - Propofol
37. A 26-year-old female with acute liver failure due to paracetamol poisoning has progressed to grade 4 encephalopathy. She was intubated, and neurologists want an invasive ICP monitoring. Her labs showed platelets of 30,000 INR 3.1, fibrinogen 45. Which of the following blood products should be given before placing an ICP monitor?
- Cryoprecipitate
 - Platelets
 - FFPS
 - Factor 7a
 - All the above
38. A 53-year-old male with HCV related cirrhosis undergoes screening endoscopy and noted to have large esophageal varices with no signs of recent bleeding. What should be the most appropriate next step?
- Repeat endoscopy 6 months
 - Propranolol
 - Repeat endoscopy 1 year
 - Band ligation
 - None
39. Which of the following is initial treatment for bleeding esophageal varices?
- Sclerotherapy
 - Band ligation
 - TIPS
 - Surgical shunting
 - Embolization
40. 43-year-old man with decompensated liver cirrhosis presented with massive hematemesis and melena. You have resuscitated the patient and give him terlipressin with other supportive treatment. Patient continues to have new episodes of bleeding. Endoscopy is not available at the time. What should be your next management step?
- Call to surgery for shunting
 - Balloon tamponade
 - Continue the same treatment
 - Vitamin K injection
 - IV Tranexamic acid

31-year-old man with decompensated cirrhosis presented with difficulty in sleeping at night with loss of appetite and confusion for 3 days. His attendants tell you that he has diarrhea for the last 5 days. What should you do next appropriate step?

- a. Give zolpidem
- b. Give lactulose
- c. Give neomycin
- d. Hydrate the patient

42. A 10-year-old boy presents with severe proteinuria, hypalbuminemia, generalized edema and hyperlipidemia and the following is most likely the diagnosis?

- a. Diabetic nephropathy
- b. Focal segmental glomerulosclerosis
- c. Lupus nephropathy
- d. Minimal change disease

43. A 5-year-old boy is diagnosed with poststreptococcal glomerulonephritis was admitted to the hospital. One day after admission his clinical state has not improved. Severe oliguria has developed, his serum creatinine has continued to rise, and his glomerular filtration rate has decreased by 50%, since his admission to the hospital. Which of the following is most likely the diagnosis?

- a. Alport syndrome
- b. Membranoproliferative glomerulonephritis
- c. Membranous glomerulonephritis
- d. Rapidly progressive glomerulonephritis

44. A 50-year-old male with end stage renal disease presented with fatigue, shortness of breath on exertion and increasing pallor. His labs are as follow, Hb 7gm/dl, TLC 7000, serum ferritin is normal. What is the most effective treatment for his anemia?

- a. Iron (intravenous)
- b. Folic acid
- c. Erythropoietin
- d. Iron (oral)
- e. Oral vit b12

45. A 12-year-old boy presents with 2 weeks history of pain in knee joints associated with fever, swelling pain in the abdomen and rash over buttock area. Urinalysis showed proteinuria and hematuria. The most likely diagnosis is:

- a. Post streptococcal glomerulonephritis
- b. Henoch-schönlein purpura
- c. Minimal change disease with peritonitis
- d. Urinary tuberculosis
- e. Sub-acute bacterial endocarditis

46. A 23-year-old girl presented with left loin pain and hematuria. Her mother was hypertensive and died of stroke at the age of 54. On examination she had palpable kidneys. blood pressure was 170/100. Serum creatinine was 2.3 mg/dl. The most likely diagnosis is:

- a. Adult polycystic kidney disease
- b. Left ureteric stone
- c. Acute nephritis
- d. IgA nephropathy
- e. Alport syndrome

47. How many types of dialysis are there?

- a. 2
- b. 3
- c. 5
- d. 4
- e. 1

48. All of the following increase the likelihood of abdominal pain, except

- a. diabetes, organ transplant
- b. chemotherapy
- c. fracture humerus
- d. AIDS
- e. sickle cell anemia

49. Which of the following is the cause of Primary Headache

- a. infection
- b. intracranial hemorrhage
- c. CO poisoning
- d. tension
- e. tumor

50. Different psychological responses to stress include

- a. Anxiety
- b. Anger and aggression
- c. Irritability
- d. Apathy and depression
- e. Cognitive impairment

51. Warning signs in case of respiratory diseases, that require immediate attention are all, except
- Dry cough
 - Altered mental status,
 - Hyperoxia,
 - Cyanosis
 - Stridor
52. Which one of the following substance has more tendencies to cause dependence syndrome?
- Tobacco
 - Cannabis
 - Ecstasy (MDMA)
 - Alcohol
 - Benzodiazepine
53. Which one of the following substances has more tendencies to cause social harm?
- Cannabis
 - Ice (Methamphetamine)
 - Cocaine
 - Heroin
54. A 40 years old patient presented in OPD with forgetfulness, confusion, loss of coordination and tachycardia. He is using substances for the last many years. The psychiatrist told the students that this may be a case of Wernicke-Korsakoff syndrome due to thiamine deficiency. Which one of the following substances can cause such disease?
- Cannabis
 - Alcohol
 - Heroin
 - Methamphetamine (Ice)
 - Cocaine
55. A patient presented in OPD with complaints of severe craving for substance, rhinorrhea, lacrimation, body aches, loose motions and abdominal cramps. On examination he is having anemia and tachycardia. He is has a long history of using substances. What is the most probable diagnosis?
- Acute opioids intoxication
 - Acute withdrawal state
 - Acute cannabis intoxication
 - Cannabis withdrawal state
 - Acute cocaine intoxication
56. Regarding the prevalence of OCD, what is the male to female ratio?
- 1:2
 - 1:1
 - 2:1
 - 3:1
 - 1:3
57. A patient presented in psychiatry OPD with complaints of intrusive thoughts persistently regarding the existing of the God. Whenever he is praying in mosque then obscene thoughts intrudes into his mind which is usually sexually oriented about the people standing in the front row. He tries to avoid and resists such thoughts but such efforts are ineffective. He is very fearful that he will lose his faith. This phenomenon is called as:
- Obsessional ruminations
 - Obsessional doubts
 - Obsessional impulses
 - Obsessional thoughts
 - Obsessional rituals
58. Which one of the following is the drug of choice for the treatment of OCD?
- Imipramine
 - Clomipramine
 - Amisulpride
 - Nortriptyline
 - Dothiepin
59. Which one of the following behavioral therapy can be used for the treatment of the OCD?
- Systematic desensitization
 - Cue exposure therapy
 - Exposure and response prevention
 - Bi feedback
 - Contingency management
60. A teacher is very angry after argument on a minor issue with his wife. He rushes out from home and closes the door with loud noise. After reaching his class he is very irritable and punishes students severely on minor issues. Which defense mechanism has been used in this scenario?
- Denial
 - Displacement
 - Projection
 - Regression
 - Reaction formation

- Which one of the following is not a predisposing factor for the post-traumatic stress disorder?
- a. Female gender
 - b. Previous history of trauma
 - c. Low I.Q.
 - d. Old age

62. 10 year child presented with fits and altered state of consciousness, father being treated as pulmonary tb, c/sf turbid protein 1500mg/dl, glucose 35mg/dl, Mostly lymphocytes what will be the most likely diagnosis?

- a. Viral meningitis.
- b. Acute bacterial meningitis
- c. Malaria
- d. Tuberculous meningitis

63. Valproic acid effect on newborn?

- a. Cleft lip and palate
- b. Neural tube defect
- c. Hypertension
- d. Stroke
- e. Limb Agnesis

64. 9 Year old with low grade fever and GTC fits. She also had history of fits 4 months back, BSR, ELECTROLYTES, CSF analysis all are normal. Now the child is afebrile and well. Diagnosis is:

- a. Epilepsy
- b. Encephalitis
- c. Meningitis
- d. Febrile convulsion
- e. None of the above.

65. A girl with history of black out in class notified by teacher. Her EEG was done which was abnormal. What is the most likely diagnosis?

- a. Absence seizures
- b. Grand mal epilepsy
- c. Partial complex seizure
- d. Complex seizures.
- e. Both a & b.

66. Treatment of choice for absence seizures are:

- a. Phenytoin.
- b. ethosuximide
- c. phenobarbital
- d. Valproic acid
- e. Carbamazepine

67. Mother pregnant again, she has already one baby with neural tube defect. She wants to know risk of NTD in the current pregnancy?

- a. Same as general population.
- b. 10%
- c. Alpha fetoprotein is low in NTD.
- d. 2 to 3 %
- e. 20%

68. 2 year old child presented with history of high grade fever with fits which is generalized tonic clonic which is more than 15 mins after fits child was clinically improved and active and alert which is your most likely diagnosis:

- a. Meningitis
- b. Simple febrile convulsion
- c. Complex febrile convulsion
- d. Epilepsy
- e. Encephalitis

69. Status epilepsy is defined as:

- a. Fits more than 10 mins.
- b. Fits more than 15 mins.
- c. Fits more than 5 mins
- d. Fits more than 20 mins.
- e. Fits more than 30 mins.

70. Chronic diarrhea is defined as:

- a. Diarrhea, which persists for more than 1 week with infectious etiology.
- b. Diarrhea, which persists for more than 1 month with non-infectious etiology.
- c. Diarrhea, which persists for more than 3 months with non-infectious etiology.
- d. Diarrhea, which persists for more than two weeks with non-infectious etiology.
- e. Diarrhea, which persists with history of loose motion and abdominal pain. On examination, he is failure to thrive, anemic and has abdominal distension his anti-transglutaminase anti-bodies are positive. Which of the following is the most appropriate diagnosis.

71. A 2 year old child presented with history of loose motion and abdominal pain. On examination, he is failure to thrive, anemic and has abdominal distension his anti-transglutaminase anti-bodies are positive. Which of the following is the most appropriate diagnosis.

- a. Inflammatory bowel disease.
- b. Tuberculosis
- c. Irritable bowel disease
- d. Celiac disease
- e. None of the above

72. A previously well, 8 year-old boy presents with 3 days, history of nausea, anorexia, fever, yellowing of eyes, and abdominal pain. O/e he is febrile, icteric and raised sit. What will your most appropriate diagnosis?
- Hepatitis c
 - Hepatitis b
 - Hepatitis d
 - Hepatitis a
 - Hepatitis e
73. A year-old boy with chronic diarrhoea with history of apple fruit juices intake, no fat and stool contain food particles.
- Colic disease
 - Irritable bowel disease
 - Toddler's disease
 - Viral diarrhoea
 - Infective diarrhoea
74. A 2 year child year presents with painless rectal bleeding, how to diagnose?
- Rbc scan
 - Usg abdomen
 - Barium scan
 - Both b & c
 - Meckel scan
75. Infant with jaundice with increased conjugated bilirubin and white clay colour stools. No fever diagnosis?
- Hepatitis a
 - Biliary atresia
 - Hepatitis c
 - Hepatitis b
 - None of the above.
76. 6 weeks old with projectile vomiting hypochloremic metabolic alkalosis. $K 2.2$, Low urinary chloride. Diagnosis?
- Barter syndrome
 - Pyloric stenosis
 - Cystic fibrosis
 - Gillman syndrome
 - None of the above.
77. Skin pinch go slowly/eager to drink innce?
- Severe dehydration
 - No dehydration
 - Mild dehydration
 - Moderate dehydration
 - Some dehydration
78. A baby on cow milk with dry scaly skin with desquamation?
- Vitamin b deficiency
 - Vitamin a deficiency
 - Protein calorie malnutrition
 - None of the above.
 - IG A
79. Which immunoglobulin is abundant in colostrum?
- IG A
 - IG M
 - IG E
 - IG G
 - IG A AND IG G
80. A 4 year old year with bilateral pedal edema has weight 75% of expected weight for her age, most likely?
- Marasmus
 - Nephrotic syndrome
 - Kwashiorkor
 - All
 - None of the above.
81. Karyotyping of down syndrome shows?
- Trisomy 18
 - Trisomy 13
 - Trisomy 15
 - Trisomy 21
 - None of the above.
82. A patient with hypotonia and brush field spots. Diagnosis?
- Turner syndrome
 - Down syndrome
 - Klinefelter syndrome
 - None of the above
 - All of the above.
83. Cleft lip cleft palate, rocker bottom feet, microcephaly, polydactyly, diagnosis?
- Edward syndrome
 - Patau syndrome
 - Down syndrome
 - Turner syndrome
 - Klinefelter syndrome

84. A child with rash sparing mouth area on groin axilla with lymphadenopathy, fever and red tongue.
- Kawasaki disease.
 - Scarlet fever.
 - measles
 - Typhoid fever
 - None of the above.
85. Affected mother transmit to all offspring but affected father cannot pass on the disease to his offspring, what is pattern of genetic transmission?
- Autosomal dominant
 - mitochondrial
 - x-linked dominant
 - x-linked recessive.
 - Autosomal recessive
86. A Mother has brought a 4 year old boy for dysuria. You want to screen him for urinary tract infection. Which one of the following results is most specific for UTI?
- positive red cells
 - positive Proteins
 - positive Nitrites
 - positive cast
 - low specific gravity
87. Which one of the following investigations is most specific to confirm Urinary tract infection?
- Urine Dipstick
 - Urine Culture
 - Urine RE
 - Renal Ultrasound
 - Clinical history
88. Which of the following urine culture result is confirmatory for UTI?
- Mixed Growth of 105 organisms
 - Single colony growth of 105 organisms
 - Single colony growth of 104 organisms
 - Single colony growth of 103 organisms
 - Single colony growth of 102 organisms
89. A 33 year old man is hit by a car. He loses consciousness but is found to be fine by the paramedics. When awaiting doctor reviews in the casualty he suddenly becomes comatose. What is the most likely diagnosis?
- subarachnoid hemorrhage
 - subdural hemorrhage
 - intracerebral hemorrhage
 - extradural hemorrhage
 - primary hemorrhage
90. During the secondary survey of a trauma patient, it becomes apparent that there is depressed skull fracture. You must decide if this change the management plan for this patient in any way. Select the most correct statement regarding skull fracture.
- Depressed fracture are those in which the level of consciousness absent
 - Compound fracture are those in which the skull is fracture and the underlying is been dislocated
 - Any bone fragment displaced more than 1 cm inward should be surgically elevated
 - Drainage of CSF fluid via the ear, nose require surgical treatment
 - Most skull fracture require surgical treatment
91. A 60 year old patient is brought to emergency 10 minutes after being involved in a motor vehicle collision. On arrival, he is breathing spontaneously, non-cyanotic and no signs of external injury. He makes some incomprehensible sounds. He grabbed your hand with his right hand. What is the Glasgow coma scale of this patient?
- 8
 - 9
 - 10
 - 11
 - 14
92. A 22 year old male is brought to A&E with history of RTA. He has severe lower back pain. Examination shows weakness and decreased pain and temperature sensation in both legs. Fine touch, vibration, pressure and sensation are intact. He is immobilized and his airway breathing and circulation are normal. Which of the following is most appropriate next step in management of his injury?
- Immediate surgery
 - CT scan of spine
 - IV steroids
 - MRI spine
 - Watchful observation
93. Cleft lip repair is commonly performed
- between 1 and 3 months of age
 - between 3 and 6 months of age
 - between 12 and 15 months of age
 - between 6 and 9 months of age
 - between 9 and 12 months of age

94. A 9 month old child is brought to the emergency room with an irreducible firm swelling which descends into the scrotum when the child is crying. On examination, both testicles are palpable in the scrotum. What is the most appropriate management strategy?
- Neurosurgery
 - Emergency laparotomy
 - Elective herniotomy
 - Emergency herniotomy + orchiectomy
95. All of the following are true regarding management in acute appendicitis, EXCEPT:
- Abdominal ultrasonography has a poor diagnostic accuracy
 - The Olsen-Sherron regime is the treatment of choice
 - Laparoscopy has a value as a diagnostic tool
 - None of the above
96. A 35 year old man has known ulcerative colitis. Which of the following is an indication for total proctocolectomy?
- Occasional bouts of colic and diarrhea
 - Severe toxic megacolon
 - Toxic megacolon
 - Colitis
97. A 79 year old retired singer states that he is sometimes aware of a lump on the left side of his neck and that he hears gurgling sounds during swallowing. He sometimes regurgitates food during eating. What is the likely diagnosis?
- Carcinoma of the esophagus
 - Foreign body in the esophagus
 - Plummer-Vinson (Kelly-Paterson) syndrome
 - Zimmer's (pharyngoesophageal) syndrome
98. The standard initial therapy for acute sigmoid volvulus is:
- Laparotomy to reduce the volvulus and replace the sigmoid colon to its normal position
 - IV neostigmine
 - Colonoscopy
 - Resectomy
99. In a patient with gastroesophageal reflux disease (GERD), which of the following patient is LEAST likely to require 24 hour pH monitoring?
- The patient who presents with heartburn
 - The patient with severe symptoms not responding adequately to drugs
 - The patient in whom surgery is planned for GERD
 - The patient who is on a research trial evaluating the results of antireflux surgery
100. Which of the following LEAST predisposes to the development of esophageal carcinoma?
- Smoking
 - Alcohol
 - Deficiency of vitamin B6
 - Intestinal metaplasia in the lower part of the esophagus
101. A 42 year old woman is admitted to the emergency department with severe colicky pain, vomiting, and abdominal distention. She has not passed stools or flatus for 48 hours. X-rays of the abdomen confirm the presence of small bowel obstruction. What is the most likely cause of small bowel obstruction in this patient?
- Adhesions
 - Crohn's disease
 - Ulcerative colitis
 - Gallstone ileus
102. A 33 year old woman is noted to have a Meckel's diverticulum when she undergoes an emergency appendectomy. The diverticulum is approximately 60 cm from the ileocecal valve and measures 2.3 cm in length. What is the most common complication of Meckel's diverticulum among adults?
- Intestinal obstruction
 - Perforation
 - Ulceration
 - Carcinoma
103. A 79 year old man has had abdominal pain for 4 days. An operation is performed, and a gangrenous appendix is removed. The stump is inverted. Why does acute appendicitis in elderly patients and in children have a worse prognosis?
- The appendix is retrocecal
 - The appendix is in the pelvic position
 - The omentum and peritoneal cavity appear to be less efficient in localizing the disease in these age groups
 - The appendix is longer in these age groups

- 12 year old boy complains of pain the lower abdomen (mainly on the right side). Symptoms commenced 12 hours before admission. He had noted anorexia during this period. Examination revealed tenderness in the right iliac fossa, which was maximal 1 cm below Mc Burney's point. In appendicitis, where does the pain frequently commence?
- In the right iliac fossa and remains there
 - In the back and moves to the right iliac fossa
 - In the umbilical region and moves to the right iliac fossa
 - In the right flank
105. A 25 year old male who has undergone hemorrhoidectomy for bleeding P/R is unable to pass urine 6 hours after surgery
- He should be catheterized to prevent straining
 - He should be encouraged to pass urine in the bed pan
 - After removing the rectal pack he should be allowed to stand next to running Tap and void
 - A fine red rubber tube should be used to empty the bladder
106. A fistula-in-ano is termed high or low reference to
- The anal verge
 - The anorectic ring
 - The dentate line
 - The cuboidal epithelium of the anal canal
 - Sacrum
107. The most common site for colorectal malignancy is
- Sigmoid
 - Cecum
 - Rectum
 - Ascending colon
 - None of above
108. Partial rectal prolapse in infants and children should be treated by:
- Excision of the prolapsed mucosa after applying Goodsall's ligature
 - Thiersch operation
 - Surgery by the abdominal approach
 - Conservative treatment (Digital reposition, dietary advice, treatment the diarrhoea / dysentery)
109. Submucous injection of 5% phenol in almond oil
109. Infections that require operative treatment include all of the following except:
- Abscess of the hip
 - Empyema
 - Infected ascites
 - Necrotizing fascitis of the thigh
 - Vascular graft infection
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111. A 60 year old alcoholic is admitted to the hospital with a diagnosis of acute pancreatitis. Upon admission, his white blood cell (WBC) count is 21,000. His lipase is 500, blood glucose is 180 mg/dL, lactate dehydrogenase (LDH) is 400 IU/L, and aspartate aminotransferase (AST) is 240 IU/dL. Which of the following is TRUE?
- The patient is expected to have a mortality rate of less than 5%
 - The patient's lipase level is an important indication of prognosis
 - This patient requires immediate surgery
 - A venous blood gas would be helpful in assessing the severity of illness in this patient
 - A serum calcium level of 6.5 mg/dL on the second hospital day is a bad prognostic sign
112. A 35 year old man is admitted with systolic blood pressure (BP) of 60 mm Hg and a heart rate (HR) of 150 bpm following a gunshot wound to the liver (Fig. 1-1). What is the effect on the kidneys?
- They tolerate satisfactorily ischemia if hypothermia is present.
 - They undergo further ischemia even though urine output exceeds 1500 mL/d.
 - They can become damaged, even though urine output exceeds 1500 mL/d.
 - They are affected and cause an increased creatinine clearance.
 - They are prevented from further damage by vasopressor.
113. A 35 year old professional dancer presents with a well-defined, tense, smooth mass in the upper outer quadrant of the left breast. She states that the mass becomes larger just before onset of her periods. Aspiration yields a clear yellow fluid and the mass disappears. The most likely diagnosis is:
- Fibrocystic disease of the breast
 - Carcinoma in a cyst
 - Lipoma
 - Galactocele

114. Which one of the following is not part of management of a patient with hyperparathyroidism.
- Hydration with intravenous normal saline
 - Steroids
 - Exploration of the neck for parathyroidectomy
 - Parathyroid scan
 - Vitamin D
115. Mrs. A. 40 requires cholecystectomy. Preanesthetic check is unremarkable except for a history of intake of diuretics for hypertension, and regular use of oral contraceptives. The LEAST useful step of perioperative anesthesia management is:
- Total leukocyte count estimation
 - Serum potassium estimation
 - Use of perioperative heparin
 - Continued intake of antihypertensive on the morning of surgery
 - Echocardiography preoperatively
116. As compared to indirect inguinal hernias, femoral hernias are typically:
- Larger
 - Associated with more symptoms even while uncomplicated
 - Less likely to strangulate
 - Are more laterally placed
 - None of above
117. Regarding bone densitometry, a T-score of -3.5 is defined as which of the following?
- Normal bone
 - Osteopenia
 - Osteoporosis
 - Abnormal bone
 - None of the above
118. Which nerve is most at risk of damage from a midshaft humeral fracture?
- Median Nerve
 - Ulnar Nerve
 - Musculocutaneous Nerve
 - Radial Nerve
 - Nerve Of the above
119. Which of the following is part of the definition of hyperemesis gravidarum?
- Vomiting that persists for the entire pregnancy
 - Vomiting upon arising more than five days per week
 - Vomiting that appears after the 20th week of pregnancy
 - Severe nausea and vomiting with weight loss greater than 5% of pregnancy body weight
 - None of the above
120. Which of the following factors is protective against endometrial hyperplasia?
- Obesity
 - Tamoxifen
 - Oral contraceptive pills (ocps).
 - Early menarche or late menopause
 - Unopposed exogenous estrogen therapy