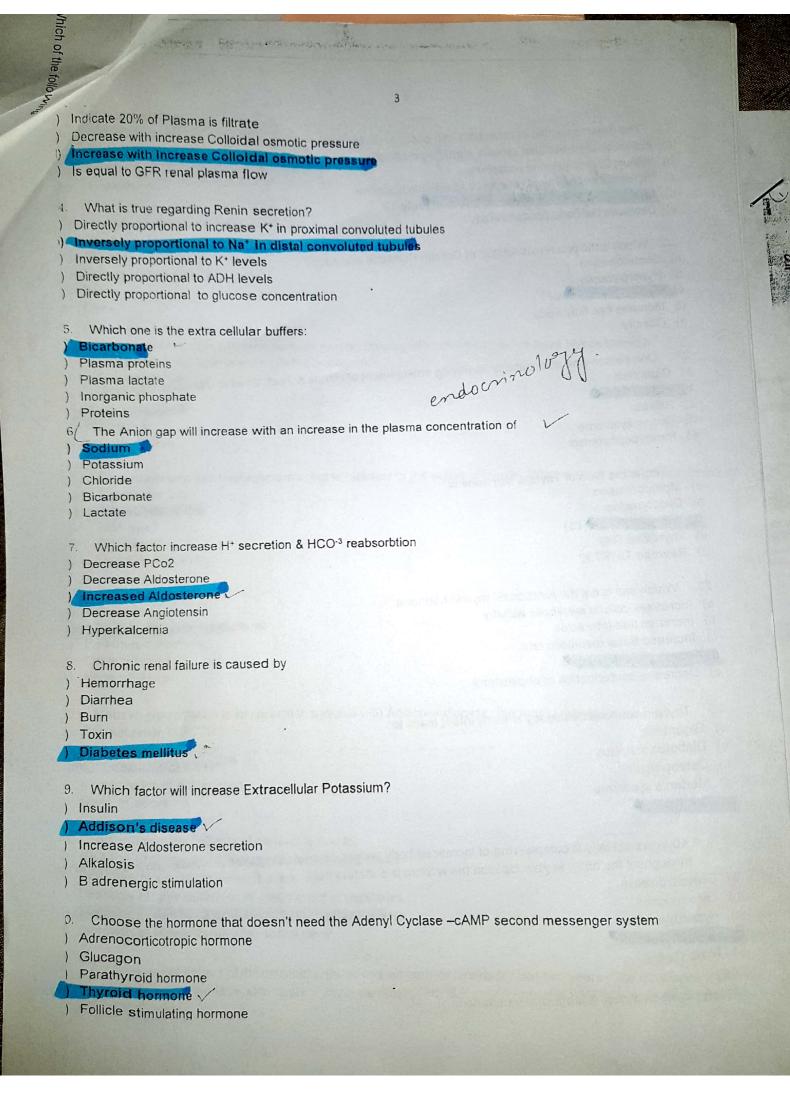
Physiology 1st term test 2nd year

(Kidney + Endocrinology)

- Saleem get injury due to which there is isosmotic reduction in ECF, by mistake hypotonic saline is infused to patient, What will happen to ICF & ECF volumes & osmolarities.
- ICF volume will be increased a)
- ECF volume will be increased 6)
- Both ICF & EFC volume be increased & osmolarities will be decreased
- Both osmolarities will be increased
- No change is osmolarities
- By which of the following substances total body water is measured
- a) Radioactive water (tritrium 3H2O).
- Radioactive 22Na
- c) 51Cr labeled RBCs
- d) Evans blue dye
- 1251—Iothalamate
- An elderly patient who had vomiting & diarrhea & was in coma on lab investigation, serum sodium con centration was 115mEq/L. This patient most likely has
- a) Hyponatremia Overhydration
- b) Hyponatremia dehydration
- c) Hypernatremia dehydration
- d) Hypernatremia Overhydration
- e) Diabetes inspidius
 - 4. The woman has plasma osmolarity of 300 mosmole/L urine osmolarity is 1200 mosmole/L, the correct diagnost
- a) Use of Diuretics
- b) Water deprivation
- c) Central diabetes inspidius
- d) Peripheral diabetes inspidius.
- e) Drinking large amount of distilled water
- Which one is not component of glomerular filtration barrier.
- a) Fenestrated capillary endothelium
- b) Macuadensa
- c) Basement membrane
- d) Podocytes
- e) Slit pores

Person who is having kidney stone which are causing urinary tract obstruction. Which of the follows se glomerular capillary on contic pressure se hydrostatic pressure in Bowman's capsule se net filtration pressure se renal flow essure changes lead to decreased GFR? i) Increase glomerular capillary on contic pressure increase glomerular capillary hydrostatic pressure :) Increase hydrostatic pressure in Bowman's capsule i) Increase net filtration pressure e) Decrease renal flow Net filtration pressure is 1) 30 mm Hg) 20 mm Hg 10 mm Hg 1) 5 mm Hg 3) 2 mm Hg Which Hormone causes afferent dilation & increased GFR i) Nor epinephrine)) Epinephrine) Prostaglandins i) Endothelium) Adrenaline Hyperkalemia causes increase in: i) Release of renine) Secretion of aldosterone :) Secretion of ADH i) Release of natriuretic hormone >) Production of angiotensis II 10. Chronic acidosis will has a) No effect on k+ excretion) k* excretion is increased due to inhibiting sodium chloride & water reabsorbtion _ ___ :) k+ secretion is decreased i) k+ excretion is decreased 3) decrease secretion of Nat 11. Major stimulus for ADH secretion is a) Decrease plasma osmolarity) Increase blood volume :) Increased blood pressure 1) Nausea 3) Alcohol 94% of Plasma osmolarity is due to 12. Sodium 3) Bicarbonate & chloride) Both a & b :) Albumin 1) 3) Glucose Which statement about filtration fraction is incorrect

3) Average about 0.2



- .a) Activation of intracellular protein signaling molecules
- b) Increased production of receptors
- c) Increased availability of receptors to act with hormone
- d) inactivation of some of receptors molecule
- 'e) Decrease hormone concentration
- Which is the protein stimulator of Growth Hormone secretion?
- a) Somatomedins
- b) Hyperglycemia
- c) Hypoglycemia
- d) Increase free fatty acids
- e) Obesity
- 23. One person who after puberty is having enlargement of Hands & Feet, What is this condition called
- a) Gigantism
- b) Acromegaly
- c) Rickets
- d) Conns syndrome
- e) Panhypopituitarism
- The active form of Thyroid hormone is
- a) Monidotyrosine
- b) Diidotyrosine
- Triiodothronine(T3)
- d) Thyroxine (T4)
- e) Reverse T3 (RT3)
- 25. Which one is not the function of thyroid hormone
- a) Increases cellular metabolic activity
- b) Increase free fatty acids
- c) Increase Basal metabolic rate
- d) Increase body weight
- e) Decrease concentration of cholesterol
- Thyroid hormone deficiency in early infant leads to: 26.
- a) Gigantism
- b) Diabetes insipidus
- c) Osteoporosis
- d) Marfan's syndrome
- e) Cretinism
- A 40 years old lady is complaining of increased body weight, Mental sluggishness, Oedematous appearance throughout the body, in your opinion the woman is suffering from
- a) Graves disease
- b) Throtoxicosis
- c) Hyperthyroidism
- d) Hypothyroidism
- e) Toxic Goitre
- A common clinical feature of myxodema is 28.

- D;M type I
- (k D;M type II
- 3) Diabetes inspidius
- 32. The active form of vit. D is?
- a) Calcitonin
- 1,24 Dihydroxycholecalciferol
- Parathyroid Hormone
- 1) Cholecalciferol
- :) None of above
- Melanin pigmentation is increased in patients with Addisons disease, the most probable reason is?
- 1) Dec secretion of ACTH
- i) Inc secretion of Cortisol
- :) Inc secretion of ACTH
- 1) Inc secretion of Aldosterone
- !) None of above
- 4. Anti inflammatory effects of cortisol is due to:
- i) Release of chemical substances from damaged tissue
-) Incrwase blood flow in damage area
- Leakage of large quantities of plasma out of capillaries
- I) Decrease movement of leukocytes to inflamed area
-) Ingrowth of fibrous tissue after some days
- A 35 years old patient of rheumatoid arthritis was on corticosteroids for last two years, She developed truckle obesity, moon like face, skin rashes, bone weakness, her B.P is 160 mm of Hg. What is your diagnosis?
-) Addison's disease

- Pheochromocytoma
-) Hyperthyroidism
-) Conns syndrome
- Hormone that stores carbohydrates, Lipids and Proteins in body is called
-) Growth hormone
-) Thyroid hormone
-) Cortisol
-) Insulin
-) PTH
- 7. How glucose enters in Skeletal muscle
-) Passive diffusion
-) Facilliated diffusion with GLUT4
- Primary active transport
-) Secondary active transport
-) Pinocytosis
- Which statement about Insulin is FALSE
- Promotes Glucose uptake and metabolism
- Storage of Glycogen in muscle
- Promotes conversion of excess glucose into fatty acids
- Promote Gluconeogensis
- Promotes fat synthesis & storage
- Urine examination of diabetic patient was examine, It was found to contain Ketone bodies. What do you think is most likely cause of formation of these ketone bodies?

Increase secretion of Insulin

Uncontrolled diabetes mellitus

Hypoglycemia

Protein synthesis

None of above

1. The major effect of Glucagon on Glucose metabolismis?

Increased Gluconeogenesis & Glycogenolysis in liver

Inhibition of insulin secretion

Inhibition of somatostatin secretion

Has effecton Adipose tissue

Develops insulin resistance

Glucagon follows which of the following signaling pathway for its cellular effects?

cAMP pathway (secondary messenger system)

cGMP pathway (secondary messenger system)

Inositol triphosphate pathway (secondary messenger system)

Tyrosin kinase pathway (enzyme linked)

None of above

Brain, Retina & germinal epithelium of Gonads use only neutrient for their required energy

Fatty acids

Triglycerides

Cholesterol

