



THE SUPERIOR COLLEGE, LAHORE

Roll No

FINAL PROFESSIONAL MBBS

SEND UP EXAMINATION 2020

MEDICINE - II

Instructions

1. All MCQ's are to be attempted on the paper and returned to the invigilator within 45 Minutes after you have received the question paper.
2. Any cuttings or overwriting in answering the objective part will not be accepted and no marks will be given even if the answer is correct.
3. Write your Roll No. only on the perforated portion of the title page.

1. The typical lesions in scabies are
 - a) Pustules
 - b) Burrows
 - c) Wheals
 - d) Patch
2. A 60 years old diabetic male developed multiple painful, erythematous nodules filled with pus on his legs and trunk. What is the likely diagnosis
 - a) Folliculitis
 - b) Furuncles
 - c) Carbuncle
 - d) Ecthyma
3. What is the typical lesion of psoriasis ?
 - a) Clear fluid Vesicles
 - b) Pustules and ulcers
 - c) Macules
 - d) Erythematous lesions with silvery scales
4. Folliculitis is the infection of
 - a. Sebaceous glands
 - b. Hair follicles
 - c. Sweat glands
 - d. Adipose tissue
5. Auto immune destruction of hair follicle leading to shedding of hairs is the feature of
 - a. Androgenetic alopecia
 - b. Alopecia areata
 - c. Scarring alopecia
 - d. Psoriasis
6. In Acne vulgaris commonly used drug is
 - a. Amoxicillin
 - b. Ciprofloxacin
 - c. Terbinafine
 - d. Doxycycline

7. *Thought broadcast* is typically a symptom of?
- Body dysmorphic disorder
 - Depression
 - Hypomania
 - Paranoid Schizophrenia
8. An 12 year old student complains of lack of interest in studies for last 6 months. He has frequent quarrels with his parents and has frequent headaches. The most appropriate clinical approach would be to:
- Leave him as normal adolescent problem
 - Rule out an oppositional defiant disorder
 - Rule out depression
 - Rule out migraine
9. A 40 year old female came to the OPD with complaints of depressed mood, insomnia, loss of appetite and lack of interest in day to day activities for the past 1 year. These symptoms appeared after loss in a business deal 1 year ago. Which is correct regarding the management?
- Antidepressants should be given based on the side effect profile
 - Combination therapy with 2 or more antidepressants is required
 - No treatment is required as it is due to loss in a business deal
 - Tricyclic antidepressants should be the first-line medicines
10. Treatment of alcohol dependence is by all except?
- Acamprosate
 - Disulfiram
 - Flumazenil
 - Naltrexone
11. A 25 year old female presents with 2 year history of repetitive, irresistible thoughts of contamination with dirt associated with repetitive hand washing. She reports these thoughts to be her own and distressing; but is not able to overcome them along with medications. She is most likely to benefit from which of the following therapies?
- Assertiveness training
 - Exposure and response prevention
 - Sensate focusing
 - Systematic desensitization
12. All of the following are associated with better prognosis in schizophrenia, except:
- Acute onset
 - Being married
 - Late onset
 - Negative symptoms
13. A 22 years old student presents with dark colored urine like "black tea" followed by swelling of eyelids, malaise, anorexia and weakness. She reports having had an infection at the site of skin piercing 4 weeks previously, for which she was prescribed some antibiotics. Urinalysis shows protein 3+ and blood 3+. What is most likely diagnosis?
- Acute interstitial nephritis
 - Hemolytic- uremic syndrome
 - IgA nephropathy
 - Post-streptococcal glomerulonephritis

14. A 58 years old woman presents with lethargy, confusion and vomiting. She has been taking paracetamol for arthritis and a diuretic for management of hypertension. On examination, her BP is 160/90 mmHg and she is confused. Blood tests reveal urea 55 mg/dl , creatinine 3.7 mg/dl, and serum potassium is 6.2 mmol/L. what is most likely diagnosis?
- a) Hypertensive encephalopathy
 - b) Intracranial metastases
 - c) Opiate intoxication
 - d) Uremic encephalopathy
15. Amino acids are almost completely reabsorbed from the glomerular filtrate via active transport in the,
- a) Collecting duct
 - b) Distal tubule
 - c) Loop of Henle
 - d) Proximal tubule
16. In controlling the synthesis and secretion of aldosterone , which of the following factor is least important?
- a. Adrenocorticotrophic hormone (ACTH)
 - b. Angiotensin II
 - c. Concentration of plasma Na
 - d. Renin
17. The effect of antidiuretic hormone (ADH) on the kidney is to?
- a) Increase the diameter of renal artery
 - b) Increase the excretion of Na^+
 - c) Increase the excretion of water
 - d) Increase the permeability of the distal nephron to water
18. The glomerular filtration rate will increase if;
- a) Circulating blood volume increases
 - b) The afferent arteriolar resistance increases
 - c) The efferent arteriolar resistance decreases
 - d) The plasma protein concentration decreases
19. Potassium (K^+) excretion is markedly influenced by;
- a) Aldosterone
 - b) All of the above
 - c) Amount of Na^+ delivered to tubules
 - d) Rate of tubular secretion of H^+
20. A 63 years old patient is admitted to ward with generalized edema. After investigations, diagnosis of nephrotic syndrome due to membranous glomerulonephritis is made. Diuretic and statin treatment is commenced. Which of the following is the other most important step?
- a) High protein diet
 - b) Intravenous albumin
 - c) Prophylactic antibiotics
 - d) Prophylactic LMW Heparin

21. A 60 y F diabetic since 10 years, on oral hypoglycemic agents brought in emergency with lethargy and altered sensorium. On physical exam, BP: 120/80 sitting, 105/65 lying down, T 39C, no focal neurologic finding or neck rigidity. Na: 134 meq/L, K: 4.0 meq/L, HCO₃: 25 meq/L, Blood glucose: 900 mg/dL, BUN: 84 mg/dL and Creatinine: 3.0 mg/dL. What is the most likely cause of this patient's coma?
- a) Diabetic ketoacidosis
 - b) Hyperosmolar coma
 - c) Inappropriate ADH
 - d) Bacterial meningitis
22. A 19-year-old with Type 1 DM is taking 30 units of NPH insulin each morning and 15 units at night. Because of persistent morning glycosuria with some ketonuria, the evening dose is increased to 20 units. This worsens the morning glycosuria, and now moderate ketones are noted in urine. The patient complains of sweats and headaches at night. Which of the following is the most appropriate next step in management?
- a) Increase the evening dose of insulin
 - b) Increase the morning dose of insulin
 - c) Obtain blood sugar between 2:00 and 5:00 A.M
 - d) Oral GTT
23. A 30-year-old nursing student presents with confusion, sweating, hunger, and fatigue. Blood sugar is noted to be 40 mg/dL. The patient has no history of diabetes mellitus, although her sister is an insulin-dependent diabetic. The patient has had several similar episodes over the past year, all occurring just prior to reporting for work in the early morning. On this evaluation, the patient is found to have high insulin levels and a low C peptide level. Which of the following is the most likely diagnosis?
- a) Reactive hypoglycemia
 - b) Early diabetes mellitus
 - c) Factitious hypoglycemia
 - d) Lab error
24. A 30-year-old woman has cervical fat pad, purple striae, and hirsutism. What is the most likely cause?
- a) Cushing's disease
 - b) Acromegaly
 - c) Prolactin-secreting adenoma
 - d) TSH-secreting adenoma
25. A 50-year-old female obese patient with BMI of 34 Kg/m² and a family history of diabetes mellitus has Fasting blood glucose on two occasions as 130 mg/dL and 145 mg/dL. She is asymptomatic, and physical exam shows no abnormalities. Which of the following is the treatment of choice?
- a) Observation
 - b) Medical nutrition therapy
 - c) Insulin
 - d) Oral hypoglycemic agent

26. A 28 year married female recently diagnosed as Graves' disease plans to have children and is currently using no contraception. Which of the following treatment options you will consider in whom remission from Graves' disease is possible?
- Propylthiouracil
 - Radioactive iodine
 - Thyroid surgery
 - Iodized salt
27. A 40-year-old alcoholic male is being treated for tuberculosis, but he has not been compliant with his medications. He complains of increasing weakness and fatigue. He appears to have lost weight, and his blood pressure is 80/50 mmHg. There is increased pigmentation over the elbows. Cardiac exam is normal. Which of the following is the best next step in evaluation?
- CBC with iron and iron-binding capacity
 - Early morning serum cortisol and cosyntropin stimulation
 - Blood cultures
 - Oral GTT
28. A 25-year-old woman is admitted for hypertensive crisis. In the hospital, blood pressure is labile and responds poorly to antihypertensive therapy. The patient complains of palpitations and apprehension. Her past medical history shows that she developed hypotension during an operation for appendicitis. Hct: 49% (37-48), WBC: 11×10^3 mm (4.3-10.8), Plasma glucose: 160 mg/dL (75-115) Plasma calcium: 11 mg/dL (9-10.5). Which of the following is the most likely diagnosis?
- Renal artery stenosis
 - Essential hypertension
 - Pheochromocytoma
 - Insulin-dependent diabetes mellitus
29. Some times spurious laboratory test results confuse the diagnosis of a patient. Which of the following can lead to falsely decreased level of hemoglobin.
- Increased lipid concentration in blood
 - Increased white blood cell count
 - Acute cholestatic jaundice
 - Sample from vein getting i/v fluids
30. Which of the following person is a universal blood recipient depending upon ABO blood groups?
- Blood Group "AB-Negative"
 - Blood Group "AB-Positive"
 - Blood Group "O-Negative"
 - Blood Group "O-Positive"
31. A 50 years old man presented with aplastic anemia. Which of the following medicines is not a likely cause of his disease?
- Anti Thyroid medicines
 - Chloramphenicol
 - Indomethacin
 - Prednisolone

32. A patient presented with anemia along with few months history of tingling paraesthesia of limbs, loss of ankle reflexes and vibration sensation. On eye examination there are also features suggestive of optic atrophy. Which of the following is likely cause of patient's anemia?
- a) Folic acid deficiency
 - b) Intrinsic factor deficiency
 - c) Iron deficiency
 - d) Vitamin B 12 deficiency
33. Which of the following is not a condition that may lead to thrombocytopenia?
- a) Dengue fever
 - b) Hypersplenism
 - c) Patient taking Heparin
 - d) Post splenectomy
34. A 42 years female has 6 months history of fatigue which is now associated with pain and swelling in both wrists and knees since 8 weeks. Clinically, the metacarpophalangeal joints of both hands and wrists are warm and tender with limitation of movements. There is no alopecia, photosensitivity, rash or kidney disease. What is the most likely diagnosis?
- a) Systemic Lupus Erythematosus.
 - b) Rheumatoid Arthritis.
 - c) Reactive arthritis.
 - d) Chronic fatigue syndrome.
35. A 65 year old man has fever & swollen painful left knee since 2 days with history of abrasion several days back while he fell down in the restroom. Clinical examination reveals swollen, red & warm left knee. Arthrocentesis showed turbid fluid with severe leukocytosis but no crystals found in the aspirate. What is the most likely diagnosis?
- a) Acute septic arthritis.
 - b) Gonococcal arthritis.
 - c) Pseudogout.
 - d) Reactive arthritis.
36. Cytoplasmic anti-neutrophil cytoplasmic antibodies (cANCA) are strongly associated with which condition?
- a) Autoimmune hepatitis.
 - b) Goodpasture's syndrome.
 - c) Polyarteritis nodosa.
 - d) Wegener's granulomatosis.
37. Which one of the following is least associated with SLE?
- a) Anti-nuclear antibodies.
 - b) Anti-Sm antibodies.
 - c) Elevated anti-dsDNA titres in active disease.
 - d) Elevated C3 and C4 levels.

38. A 65 year old, obese man comes to you for the evaluation of knee pain for many years but recently become worse. He also complains of pain and swelling in 2nd and 3rd DIP joints. On examination you hear crepitation on moving his knee joints but there is no swelling, warmth and redness. Laboratory tests are unremarkable. What is the most likely diagnosis?
- a) Gout.
 - b) Osteoarthritis.
 - c) Psoriatic arthritis.
 - d) Pseudogout.
39. A 30 years old female patient is brought into emergency with suspected poisoning. Activated charcoal is considered to be administered. Which of the following poisons is considered as a contraindication for the gastric lavage?
- a) Methanol
 - b) Petroleum distillates
 - c) Phenobarbital
 - d) Salicylates
40. In a patient of shock, which of the following medicines have strongest positive inotropic action if administered?
- a) Adrenaline
 - b) Dobutamine
 - c) Nor-adrenaline
 - d) Vasopressin