

Name: Medicine Roll no: \_\_\_\_\_ Date: March 17 2017

Each question carries one mark

Total marks 40

Pass marks 20

*[Signature]*

**Q:1**

For community acquired pneumonia, most common microorganism is:

- a. Adenovirus
- b. Influenza virus
- c. Klebsiella
- d. Streptococcus pneumoniae

**Q:2**

Commonest cell type of bronchogenic carcinoma is:

- a. Adenocarcinoma
- b. Large cell carcinoma
- c. Small cell carcinoma
- d. Squamous cell carcinoma

**Q:3**

A 45 years old male with six months history of gradually worsening cough with copious foul smelling sputum and low grade fever. Cough is worst early morning after waking up. He had pulmonary tuberculosis four years ago, but failed taking proper Anti Tuberculous treatment. On chest radiograph there is honey comb appearance in both lung fields. The most probable diagnosis is

- a. Bilateral Bronchiectasis
- b. Bilateral pleural effusion
- c. Chronic Bronchitis
- d. Emphysema

**Q:4**

Which of the following investigation is most appropriate to confirm the diagnosis in above mentioned case?

- a. Angiography
- b. Computed tomography scan
- c. Spirometry
- d. Ventilation perfusion scan

**Q:5**

Interstitial lung diseases are:

- a. Hypertrophic Lung diseases
- b. Infective lung diseases
- c. Obstructive Lung diseases
- d. Restrictive Lung diseases

**Q:6**

Hemopneumothorax is:

- a. Collection of air and blood in pleural cavity
- b. Collection of blood and pus in pleural cavity
- c. Destruction of lung parenchyma
- d. Second name of tension pneumothorax

Q:7

Nosocomial Pneumonia is:

- a. A new episode of pneumonia after 2 days of admission in hospital
- b. A new episode of pneumonia for which patient has to be admitted in hospital
- c. An old episode of pneumonia which get aggravated on admission in hospital
- d. None of the above

Q:8

A 70 year old female came to emergency room with c/o generalized weakness for one week. She started to have weakness in legs and later in arms. She is unable to stand for 2 days. She has no headache, backache or sphincter problems. She had a diarrheal illness about one month ago. On examination she has bilateral facial weakness with power 2-3/5 in limbs. She had hypotonia in all limbs with absent deep tendon reflexes and down going planters. Her most likely diagnosis is:

- a. A brain stem stroke
- b. Gullian barre syndrome
- c. Intracerebral hemorrhage
- d. Myopathy

Q:9

Which are the following is a cerebellar sign

- a. generalized weakness
- b. hypertonia
- c. clonus
- d. exaggerated deep tendon reflexes
- e. past pointing on finger nose test

Q:11

Speech is an important cortical function: the sensory speech area is located in

- a. temporal lobe
- b. pre-central sulcus
- c. pre-frontal cortex
- d. parietal lobe
- e. occipital lobe

Q:12

Multiple sclerosis is an important disabling disease. Following is true regarding multiple sclerosis:

- a. Affects both sexes equally between 20-40 years, has same incidence all over Europe
- b. Affects females more in age group 30-50 years, maximum incidence around tropics
- c. Females are affected more, is more common in Europe with peak incidence in 20-40 year
- d. It affects males more, more common in northern Europe and 20-40 is common age group

**Q:13**

A 70 year male visited clinic for c/o pain and numbness in both feet up to knees for 2 years. He is a known diabetic for 20 years. He is disturbed with paresthesias and cannot sleep well at night. The drug which is suitable for him to relieve pain include:

- a. Amlodipine'
- b. An angiotensin converting enzyme inhibitor (ACE inhibitor)
- c. High dose tricyclic antidepressant
- d. Pregabalin

**Q:14**

which of the following feature is common both in upper motor neuron and lower motor neuron lesion?

- a. hypertonia
- b. increased deep tendon reflexes
- c. clonus
- d. loss of power in muscle
- c. upgoing planter response

**Q:15**

A 23 years old lady c/o recurrent throbbing headaches for one year, the attack usually lasts for 2-3 days and is accompanied with nausea, vomiting and pain abdomen. vision is not impaired. clinically general and CNS examination is unremarkable. what is the most likely diagnosis?

- a. subarachnoid hemorrhage
- b. cerebral tumor
- c. cerebral infarction
- d. migraine
- c. tension headache

**Q:16**

45 year male is seen following a seizure. He has h/o fits for last 2 months. These are generalized tonic clonic fits with tongue bite on 2-3 occasions. He has headache but no h/o vomiting. Examination is within normal limits. Following statements is true for accurate diagnosis;

- a. Brain imaging is not required at all
- b. CT brain alone is sufficient
- c. Electroencephalography (EEG) alone is sufficient
- d. MRI brain and EEG together are needed

**Q:17**

45 years male seen for c/o right sided facial weakness for 2 days. He has pain around right ear for 3 days. No h/o headache, vomiting, fever, speech problems or limb weakness etc. examination revealed a lower motor neuron facial weakness in right side and rest of examination is within normal limits. He is not diabetic or hypertensive. He should be given which medication to improve his prognosis:

- a. Acyclovir
- b. Iv antibiotics
- c. Multivitamins
- d. Oral Steroids

4

Q:18

Which of the following features is found in Chronic Kidney Disease than in Acute Kidney Injury?

- a. Small kidneys
- b. Anemia
- c. Increased blood urea
- d. Proteinuria
- e. Hypertension

M2

Q:19

A person with chronic kidney disease (CKD) has GFR 50 ml/min. Which stage of CKD is this?

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

M2

Q:20

A 30 years old woman complains of generalized swelling and peri-orbital edema. Both lower limbs have pitting edema. 24 hours urine protein is 4 g. Serum albumin 2 g/dl. JVP is not elevated.

What is the clinical diagnosis?

- a. Congestive Cardiac Failure
- b. Nephrotic syndrome
- c. Chronic Renal Failure
- d. Hypothyroidism
- e. Lymphatic obstruction

M2

Q:21

Which of the following casts doubt on the diagnosis of diabetic nephropathy?

- a. Absence of diabetic retinopathy
- b. urine protein 1+
- c. Normal sized kidneys
- d. Hypertension

M2

Q:22

Which of the following is a simple and uncomplicated Urinary Tract Infection?

- a. UTI in pregnant woman
- b. UTI in immunocompromised patient
- c. UTI in young non-pregnant woman
- d. UTI in urinary tract obstruction
- e. UTI in 50 years old man

M2

Q:23

Hemodialysis is indicated at which level of GFR

- a. <25 ml/min
- b. <35 ml/min
- c. <15 ml/min
- d. <45 ml/min
- e. <55 ml/min

M2

Q:24

Which of the following features is NOT found in hypertension due to renal artery stenosis?

- a. Resistant hypertension
- b. Age > 60 years
- c. Presence of peripheral vascular disease
- d. Presence of ischemic heart disease
- e. Enlarged kidneys

M 2

Q:25

Which of the following is UNCOMMON feature of chronic kidney disease?

- a. Anemia
- b. Bone disease
- c. Hypotension
- d. Pruritus
- e. Neuropathy

M 2

Q:26

Which of the following features favors acute tubular necrosis in comparison to pre-renal azotemia

- a. Oliguria
- b. Blood urea mg/dl : Creatinine mg/dl ratio > 50
- c. Urine Na<sup>+</sup> > 40 mEq/l
- d. Urine osmolality > 500 mosmol/L
- e. Normal urine microscopy

M 2

Q:27

Which one of the following features speaks against the diagnosis of Nephrotic syndrome?

- a. Generalized edema
- b. Peri-orbital edema
- c. Hypertension
- d. Serum albumin 2 g/dl
- e. Urine protein 300 mg / 24 hours

M 2

Q:28

Which of the following features favor hypertension due to renal artery stenosis?

- a. Age > 40 years
- b. Female sex
- c. >2cm difference in size between two kidneys
- d. BP 150/90
- e. Genetic predisposition

M 2

Q:29

Oliguria is defined as

- a. <10 ml urine / 24 hours
- b. <100 ml urine / 24 hours
- c. <400 ml urine / 24 hours
- d. <1L urine / 24 hours
- e. <2L urine / 24 hours

M 2

Q:30

Chronic kidney injury is defined as Evidence of kidney damage persistent for MORI:  
THAN

- a. 2 weeks
- b. 3 months
- c. 1 year
- d. 2 year
- e. 5 years

M 2

Q:31

Commonest cause of chronic kidney disease is

- a. Diabetic mellitus
- b. Hypertension
- c. Chronic glomerulonephritis
- d. Polycystic kidney disease
- e. Renal stone disease

M 2

Q:32

Which of the following is NOT a feature of acute cystitis?

- a. Dysuria
- b. High grade fever with chills
- c. Pain in the lower abdomen
- d. Increased urinary frequency
- e. Urgency

M 2

Q:33

Which of the following therapeutic measures has proven value in the treatment or prevention of Acute Kidney Injury?

- a. Low dose dopamine
- b. Loop diuretic
- c. Mannitol
- d. Calcium Channel Blockers
- e. No therapeutic measure has definite proven value

M 2

Q:34

Which of the following features differentiates chronic kidney disease from acute kidney injury?

- a. Vomiting
- b. High blood urea
- c. Oliguria
- d. Evidence of renal osteodystrophy
- e. Encephalopathy

M 2

Q:35

Which of the statements is FALSE about hypertension?

- a. Primary hypertension accounts for more than 90% of all cases of hypertension
- b. Renal disease is the most common cause of secondary hypertension
- c. 1/3 of the world population is suffering from hypertension
- d. ACEIs are drug of choice in stage 5 chronic kidney disease due to hypertension
- e. Hypertension is an important risk factor for Ischemic Heart Disease

M 2

Q:36

Polyuria is a recognized feature of all of the following except

- a. Diabetes mellitus
- b. Diabetes insipidus
- c. Hypercalcemia
- d. Acute tubular necrosis
- e. Pre-renal azotemia

M 2

Q:37

A 45-year-old woman who has had slowly progressive renal failure begins to complain of increasing numbness and prickling sensations in her legs. Serum creatinine is 790  $\mu\text{mol/L}$  (8.9 mg/dL).

The woman's physician should now recommend

- a. a therapeutic trial of phenytoin
- b. a therapeutic trial of pyridoxine
- c. a therapeutic trial of cyanocobalamin
- d. initiation of renal replacement therapy
- e. neurological reference for nerve conduction studies

M 2

Q:38

Anuria is defined as

- a. No urine in 24 hours
- b. < 100 ml of Urine in 24 hours
- c. < 200 ml of urine in 24 hours
- d. < 300 ml of urine in 24 hours
- e. < 400 ml of urine in 24 hours

M 2

Q:39

A 70-year-old man with diabetes mellitus and hypertension has the following serum chemistries: Electrolytes (mmol/L): Na+138; K+5.0; Cl-106; HCO<sub>3</sub>-20 Glucose: 11 mmol/L (200 mg/dL) Creatinine: 176  $\mu\text{mol/L}$  (2.0 mg/dL).

All the following may contribute to worsening hyperkalemia EXCEPT

- a. propranolol
- b. indomethacin
- c. captopril
- d. digitalis
- e. amlodipine

M 2

Q:40

A 35 years old presents with muscle weakness. serum K<sup>+</sup> is 7.1 mmol/l. ECG shows tall tented T wave. which of the following measures reverse the cardiac toxicity of hyperkalemia but has no effect on serum K<sup>+</sup> levels?

- a. insulin and glucose
- b. calcium ressonium PR
- c. nebulized salbutamol
- d. calcium gluconate iv

M 2

Q 42 Which one is most effective initial treatment of idiopathic thrombocytopenic purpura

- a Steroids
- b Danazole
- c cyclophosphamide
- d Splenectomy
- e Platelets transfusion

M 2 II

Q 43 Which one of following test is not required in multiple myeloma

- a serum calcium
- b Bone marrow biopsy
- c serum electrophoresis for paraproteins
- d blood peripheral morphology
- e Urine for bence jon's protein

M 2 II

Q 44 which one of following malignancy has Good prognosis with treatment

- a Acute myloid leukemia
- b Acute lymphocytic leukemia
- c Non Hodgkin lymphoma
- d Hodgkin lymphoma
- e Multiple myeloma

- 80%

M 2 II

Q 45 Which one of following treatment is not required in acid peptic disease

- a Prokinetics → GERD
- b proton pump inhibitor
- c H-pylori eradication therapy
- d life style modification
- e Antacids

M 1

Q 46 Which one of the following is not feature of irritable bowel syndrome

- a Weight loss ✓ ?
- b increased frequency of stool
- c constipation
- d increased quantity of stool
- e Day time symptoms

M 1

Q 47 Which one of following is not complication of acute pancreatitis

- a) Illus
- b Acute respiratory distress syndrom
- c septicemia
- d Diarrhoea
- e Acute renal failure

Q 48 Which one of following is most effective treatment in hepatic encephalopathy

- a LV fluids
- b Antibiotic
- c Lactulose therapy
- d Endoscopy
- e Keeping patient N.P.O

Q 49 Wich one of following has increased risk of hepatocellular carcinoma

- a Acute hepatitis
- b Auto immune hepatitis
- c Primary billary cirrhosis
- d Heamochromatosis
- e Willison 's disease

Q 50 Which one of following is not complication of ulcerative colitis :

- A arthritis
- B primary sclerosing cholangitis
- C uveitis
- D hepato cellular carcinoma
- E hypercoagulable state (DVT)