

M.B.B.S. FINAL PROF. PART- II EXAMINATION, JANUARY-2013**GENERAL MEDICINE****PAPER FIRST****[Time allotted: Three hours]****[Max Marks: 60]**

Notes: Attempt all questions. Question should be answered as per the sequence given in the question paper.
Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions – separate sheet given

($\frac{1}{2} \times 24 = 12$)

Q. 2. Problem based question:

($1+2+3+3+1=10$)

A 24 years old pregnant female presented to the emergency with progressive dyspnoea on exertion of 2 months duration, associated with palpitation and oedema feet, during the third trimester of pregnancy. She also gives history of joint pains during childhood.

- What is your diagnosis?
- What is the differential diagnosis?
- How will you manage this patient?
- What will be your advice during delivery?
- If patient develops atrial fibrillation during follow up what should be your treatment advice?

Q. 3. What are the causes, clinical features, investigations and management of chronic renal failure? ($1+2+1+4=8$)

Q. 4. Write short notes on:

($4 \times 3 = 12$)

- Beri Beri
- Metabolic Syndrome
- Complications of typhoid fever

Q. 5. Write in brief treatment of following conditions:

($3 \times 6 = 18$)

- Falciparum Malaria
- Myxedemic coma
- SLE
- Diabetic ketoacidosis
- Megaloblastic anaemia
- Acute left heart failure

M.B.B.S. FINAL PROF. PART- II EXAMINATION, JANUARY-2013**GENERAL MEDICINE****PAPER FIRST - MCQ****Time allotted for MCQ – 25 minutes****Set - B****Q. 1. Multiple Choice questions (Encircle the single best response)****(½ x 24=12)**

1. Most common neoplasm seen in AIDS:
- Kaposi sarcoma
 - Carcinoma lung
 - Lymphoma
 - Hepatocellular carcinoma
2. S_1 is variable in all EXCEPT:
- Left BBB
 - Atrial fibrillation
 - Complete heart block
 - Multiple ectopics
3. Polyuria with low fixed specific gravity is seen in which of the following?
- Diabetes mellitus
 - Diabetes insipidus
 - CRF
 - Compulsive water drinking.
4. Lipid synthesis is promoted by:
- Cortisol
 - Growth hormone
 - Adrenalin
 - Insulin
5. Megaloblastic anaemia is seen in all EXCEPT:
- Amoxycilline
 - Phenytoin
 - Pyrimethamine
 - Trimethoprim
6. Nephrocalcinosis is seen in all EXCEPT:
- Cystic disease of kidney
 - Medullary sponge kidney
 - Hyperparathyroidism
 - Vitamin D intoxication
7. Major portion of glomerular filtrate is absorbed in:
- Collecting duct
 - Distal convoluted tubule
 - Loop of Henle by active process
 - Proximal segment by active reabsorption of Na^{++}
8. Toxic shock syndrome is caused by:
- Staphylococcus
 - Streptococcus
 - E. Coli
 - Pseudomonas
9. Congenital Rubella is associated with which of the heart disease?
- ASD
 - PDA
 - TOF
 - VSD
10. Anginal pain and syncope are most likely to be associated with:
- Aortic stenosis
 - Mitral stenosis
 - Mitral regurgitation
 - Tricuspid regurgitation
11. Which of the following is necessary for co-enzyme A synthesis?
- Ascorbic acid
 - Biotin
 - Pantothenic acid
 - Pyridoxine
12. Minimal change glomerulo-nephritis progress to:
- Focal GN
 - Focal sclerosis
 - Membranous GN
 - Mesangio-proliferative GN
13. Prominent V-wave in JVP suggests:
- Mitral stenosis
 - Pulmonary stenosis
 - Pulmonary hypertension
 - Tricuspid regurgitation
14. Drug of choice in PSVT is:
- Adenosine
 - Amiodarone
 - Lignocaine
 - Quinidine
15. Vitamin B₁₂ is absorbed in:
- Colon
 - Duodenum
 - Ileum
 - Stomach
16. Which is NOT seen in Cushing syndrome?
- Hypoglycemia
 - Hypocalcemia
 - Hypertension
 - Psychosis

P.T.O.

17. Which is first to appear in Rheumatoid arthritis?

- a. Symptoms of joint inflammation
- b. Signs of joint inflammation
- c. Acute antibodies to rheumatoid arthritis
- d. Radiological features

18. All of the following is seen in Felty's syndrome EXCEPT:

- a. Rheumatoid arthritis
- b. Neutropenia
- c. Nephropathy
- d. Splenomegaly

19. Which one is NOT a Jones major criteria?

- a. Carditis
- b. Chlorea
- c. Erythema marginatum
- d. Elevated acute phase reactant

20. K-Cells are present in:

- a. Stomach
- b. Duodenum
- c. Ileum
- d. Colon

21. Which of the following is NOT a counter regulatory hormone to insulin?

- a. Growth hormone
- b. Cortisol
- c. Adrenalin
- d. Thyroxin

22. Decrease serum iron and decreased total iron binding is seen in:

- a. Iron deficiency
- b. Anaemia of chronic Disease
- c. Thalassemia
- d. Sideroblastic anaemia

23. Which of the following is seen in acute glomerulonephritis?

- a. Microscopic haematuria
- b. Macroscopic haematuria
- c. Granular cast
- d. WBC cast

24. All are present in scurvy EXCEPT:

- a. Parafollicular hyperkeratosis
- b. Purpura
- c. Scurvic rosary
- d. Haemarthrosis

M.B.B.S. FINAL PROF. PART- II EXAMINATION, JANUARY-2013**GENERAL MEDICINE****PAPER SECOND****[Time allotted: Three hours]****[Max Marks: 60]**

Note: Attempt all questions. Question should be answered as per the sequence given in the question paper.
Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions – separate sheet given

($\frac{1}{2} \times 24 = 12$)

Q. 2. Problem based question:

($2+3+5=10$)

A 70 years old male presents in the emergency with unconsciousness. His left half of the body is paralyzed. He is a smoker, diabetic and hypertensive.

- a. What is the differential diagnosis?
- b. What investigations are required?
- c. What is the management?

Q. 3. Discuss clinical features, investigations and treatment of hepatic coma.

($3+3+2=8$)

Q. 4. Write short notes on:

($4 \times 3 = 12$)

- a. Snake bite
- b. Acute pancreatitis
- c. Panic disorder

Q. 5. Write briefly about:

($3 \times 6 = 18$)

- a. Scabies
- b. Status Epilepticus
- c. Stem cell therapy
- d. Heat stroke
- e. Tension Pneumothorax
- f. Tubercular Meningitis

M.B.B.S. FINAL PROF. PART- II EXAMINATION, JANUARY-2013**GENERAL MEDICINE****PAPER SECOND - MCQ****Time allotted for MCQ – 25 minutes****SET - D**

Q. 1. Multiple Choice questions (Encircle the single best response)

(½ x 24=12)

1. SLE like reaction may be due to: *SLE like*
 - a. Hydrolazine *Hydro*
 - b. Paracetamol
 - c. Rifampicin
 - d. Frusemide
2. Ramipril can cause all EXCEPT:
 - a. Angioedema
 - b. Hyperkalemia
 - c. Cough
 - d. Headache
3. In tubercular meningitis what is NOT seen in CSF?
 - a. Low pressure
 - b. High protein
 - c. Low glucose
 - d. Lymphocytosis
4. Which is NOT a sign of liver failure?
 - a. Palmer erythema
 - b. Subcutaneous nodule
 - c. Spider nevi
 - d. Testicular atrophy
5. Hypothyroidism is common in:
 - a. Iodine deficiency
 - b. Copper excess
 - c. Selenium deficiency
 - d. Iron excess
6. Drug contraindicated in HOCN is:
 - a. Verapamil
 - b. Propranolol
 - c. Digoxin
 - d. None of the above
7. Diabetic neuropathy is:
 - a. Mononeuritis
 - b. Polyneuropathy
 - c. Autonomic
 - d. All of the above
8. Hyperkalemia is treated by:
 - a. Calcium gluconate
 - b. Sodium bicarbonate
 - c. Potassium binding resin
 - d. All of the above
9. All are used in treatment of acute pancreatitis EXCEPT:
 - a. IV fluids
 - b. Antibiotics
 - c. Analgesics
 - d. Nasogastric feed
10. Colon cancer is common in people taking:
 - a. High fibre diet
 - b. Low fibre diet
 - c. High fat diet
 - d. High protein diet
11. Which is NOT immediate cause of sudden death?
 - a. Ventricular fibrillation
 - b. Septicemia
 - c. Acute pulmonary embolism
 - d. Asystole
12. All are TRUE for right ventricular infarction EXCEPT:
 - a. Hepatomegaly
 - b. Ascites
 - c. Normal JVP
 - d. Nocturia
13. All are vitamin K dependent factors EXCEPT:
 - a. Factor II
 - b. Factor VII
 - c. Factor IX
 - d. Factor III
14. Diarrhea is caused by all EXCEPT:
 - a. Diabetes
 - b. Carcinoid
 - c. Hyperthyroidism
 - d. Hypercalcemia
15. Vanillyl mandelic acid is increased in urine in:
 - a. Cushing's syndrome
 - b. Carcinoid
 - c. Pheochromocytoma
 - d. Addison's disease
16. QRS duration is more than 12 seconds in:
 - a. Bundle branch block
 - b. Mobitz I
 - c. Mobitz II
 - d. Sick sinus syndrome

P.T.O.

17. Cardiogenic shock in acute myocardial infarction occurs when myocardial damage is by more than:

- a. 10%
- b. 20%
- c. 30%
- d. 40%

18. Most characteristic symptom in pheochromocytoma is:

- a. Swelling
- b. Weight loss
- c. Labile hypertension
- d. Orthostatic hypotension

19. All are TRUE about syndrome X EXCEPT:

- a. Hyperglycemia
- b. Hypoinsulinemia
- c. Hypertriglyceridemia
- d. Obesity

20. In severe mitral stenosis all are seen EXCEPT:

- a. Wide A₂-OS distance
- b. Long diastolic inurmur
- c. Reduced mitral valve area
- d. Pulsatile liver

21. Gum hypertrophy is seen in all EXCEPT:

- a. Phenytoin
- b. AML
- c. Both
- d. None

22. In anaphylactic shock adrenaline is given by:

- a. IV route
- b. Orally
- c. Sub-cutaneous
- d. Intramuscular

23. All are used in atrial arrhythmia EXCEPT:

- a. Digoxin
- b. Lignocain
- c. Amiodarone
- d. Verapamil

24. Deafness may be due to:

- a. Streptomycin
- b. INH
- c. Rifampicin
- d. Ethambutol

h/b
M.B.B.S. FINAL PROF. PART- II EXAMINATION, APRIL - 2013
GENERAL MEDICINE
PAPER FIRST

[Time allotted: Three hours]**[Max Marks: 60]**

Note: Attempt all questions. Question should be answered as per the sequence given in the question paper.
Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions – separate sheet given

($\frac{1}{2} \times 24 = 12$)

Q. 2. Problem based question:

(2+4+4=10)

A 50 years old male presented with breathlessness on lying down, swelling over feet and pain in right upper abdomen for last 3 days. Last year he was treated for acute myocardial infarction. He was also found to have diabetes and hypertension.

- a. Describe the clinical condition and clinical features.
- b. Pathophysiology of the clinical condition.
- c. Management of the condition.

Q. 3. Write causes, approach, investigation and management of Cushing's disease.

(8)

Q. 4. Write short notes on:

(4 x 3 = 12)

- a. Complications/sequelae of tuberculous meningitis
- b. Complications of enteric fever
- c. Differential diagnosis of diastolic murmur in mitral area.

Q. 5. Write briefly about:

(3 x 6 = 18)

- a. Lathyrism
- b. Jones Criteria
- c. Endemic dropsy
- d. Hyponatraemia
- e. Cysticercosis
- f. Polycystic kidney disease

M.B.B.S. FINAL PROF. PART- II EXAMINATION, APRIL - 2013
GENERAL MEDICINE
PAPER FIRST - MCQ

Time allotted for MCQ – 25 minutes

Set – A

Q. 1. Multiple Choice questions (blacken the correct response in the OMR sheet provided) ($\frac{1}{2} \times 24=12$)

1. Biochemical change in Addison disease include:
 - a. Hyponatremia
 - b. Hypokalemia
 - c. Hyperglycemia
 - d. Hyperaldosternism
2. Clinical features of diabetic autonomic neuropathy include all EXCEPT:
 - a. Fixed heart rate
 - b. Erectile dysfunction
 - c. Gastatory sweating
 - d. Bronchospasm
3. Following is seen in Grave's disease EXCEPT:
 - a. Ophthalmoplegia
 - b. Digital clubbing
 - c. Lymphadenopathy
 - d. Pretibial myxoedema
4. Normal anion gap metabolic acidosis is caused by:
 - a. Cholera
 - b. Starvation
 - c. Ethylene glycol poisoning
 - d. Lactic acidosis
5. Hypoglycemia is seen in all EXCEPT:
 - a. Insulinoma
 - b. Glucagonoma
 - c. Addison disease
 - d. Liver failure
6. Relative Bradycardia occurs in:
 - a. Rheumatic fever
 - b. Tuberculosis
 - c. Leptospirosis
 - d. None of the above
7. Palateal patechia develop in:
 - a. Streptococcal pharyngitis
 - b. Typhoid fever
 - c. Scarlet fever
 - d. Infectious mononucleosis
8. Leishmania Donovanii multiplies in:
 - a. Neutrophils
 - b. Eosinophils
 - c. Macrophages
 - d. Red blood cells
9. Renal biopsy in hepatorenal syndrome reveals:
 - a. Normal biopsy
 - b. Acute tubular necrosis
 - c. Membranous nephropathy
 - d. Immune complex nephritis
10. Pulsus Paradoxus is found in:
 - a. Cardiac temponade
 - b. Severe asthma
 - c. Tension pneumothorax
 - d. All of the above
11. Acute cor pulmonale occurs in:
 - a. Massive pulmonary embolism
 - b. COPD
 - c. Pneumconiosis
 - d. Kyphoscoliosis
12. Fluorosis is characterized by:
 - a. Lacy brown appearance of teeth
 - b. Brittle teeth
 - c. Sclerosis of bone
 - d. All of the above
13. WBC cast are seen:
 - a. Interstitial nephritis
 - b. Acute tubular necrosis
 - c. Prostate disease
 - d. None of the above
14. Feature of glumerulonephritis include:
 - a. Haematuria
 - b. Oliguria
 - c. Hypertension
 - d. All of the above
15. ECG changes in hypothermia is:
 - a. Depression of ST segment
 - b. Flattening or inversion of T wave
 - c. Presence of U wave
 - d. All of the above
16. Acute respiratory acidosis occurs in:
 - a. COPD
 - b. Cervical cord lesion
 - c. Severe kyphosclerosis
 - d. None of the above

17. Rash in measles appears on:

- a. 1st day
- b. 2nd day
- c. 3rd day
- d. 4th day

18. Stress produces increase secretion of:

- a. ACTH
- b. Growth hormone
- c. Cortisol
- d. All of above

19. Gynaecomastia is NOT caused by:

- a. Spermalactone
- b. Ketoconazole
- c. Digoxin
- d. Aminophylline

20. Beck's triad includes:

- a. Neck vein distension
- b. Hypotension
- c. Silent heart
- d. All of the above

21. In rheumatoid arthritis characteristic joint involvement is:

- a. Spine
- b. Knee
- c. Metacarpophalangeal joint
- d. Hip joint

22. Microcytic hypochromic anaemia is seen in all EXCEPT:

- a. Lead poisoning
- b. Thalassemia
- c. Iron deficiency anemia
- d. Fanconi anaemia

23. Which of the following is seen in acute glomerulonephritis?

- a. Microscopic haematuria
- b. Macroscopic haematuria
- c. Granular cast
- d. WBC cast

24. All are present in scurvy EXCEPT:

- a. Parafollicular hyperkeratosis
- b. Purpura
- c. Scurvic rosary
- d. Haemarthrosis

M.B.B.S. FINAL PROF. PART- II EXAMINATION, APRIL - 2013
GENERAL MEDICINE
PAPER SECOND

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all questions. Question should be answered as per the sequence given in the question paper.
Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions – separate sheet given (½ x 24=12)
- Q. 2.** Problem based question: (2+3+5=10)
A 40 years old chronic alcoholic admitted with history of haematemesis and malena followed by loss of consciousness. Examination revealed icterus, pedal oedema, severe pallor, tachycardia, hypotension and ascitis. Neurologically patient was comatose and responding only to painful stimuli. There were no localizing signs.
- What steps should be taken in the emergency to stabilize the patient?
 - What investigations are required?
 - Discuss the management.
- Q. 3.** Discuss aetiology, pathogenesis, investigations and management of pyogenic meningitis. (2+2+2+2 =8)
- Q. 4.** Write short notes on: (4 x 3 =12)
- Organophosphorus poisoning
 - Heat stroke
 - Obsessive compulsive disorder
- Q. 5.** Write briefly about: (3 x 6 =18)
- HLA
 - Scabies
 - Pneumothorax
 - Peptic ulcer therapy
 - Bell's palsy
 - DOTS

M.B.B.S. FINAL PROF. PART- II EXAMINATION, APRIL - 2013
GENERAL MEDICINE
PAPER SECOND – MCQ
SET- A

Time allotted for MCQ – 25 minutes

Q. 1. Multiple Choice questions (blacken the correct response in the OMR sheet provided) (½ x 24=12)

1. All are used in bronchial asthma EXCEPT:
 - a. Salbutamol
 - b. Morphine
 - c. Aminophylline
 - d. Steroids
2. Bronchial asthma is best diagnosed by:
 - a. Wheeze
 - b. Dyspnoea & cough
 - c. FEV₁ values
 - d. Demonstration of reversible obstruction
3. All of the following statements about emphysema are true, EXCEPT:
 - a. Breathlessness is the characteristic presenting symptom
 - b. Diffusion rate of carbon monoxide is reduced
 - c. Restrictive pattern on pulmonary function tests is seen
 - d. Long term bronchodilator therapy does not improve lung function
4. Which of the following is NOT a complication of bronchiectasis?
 - a. Lung abscess
 - b. Lung cancer
 - c. Amyloidosis
 - d. Empyema
5. Investigation of choice for interstitial lung disease is:
 - a. Chest X- Ray
 - b. HRCT
 - c. Gallium – 67 DTPA Scan
 - d. MRI
6. Most common cause of empyema is:
 - a. Bronchopleural fistula
 - b. Tubercular pneumonia
 - c. Bacterial pneumonia
 - d. Pleurisy
7. Low glucose in pleural effusion is seen in all, EXCEPT:
 - a. Dressler syndrome
 - b. Empyema
 - c. Malignant pleural effusion
 - d. Rheumatoid arthritis
8. Investigation of choice for dysphagia for solids:
 - a. Barium swallow
 - b. Endoscopy
 - c. X-Ray chest
 - d. CT Scan
9. All are TRUE regarding Plummer Visnon syndrome, EXCEPT:
 - a. Oesophageal web
 - b. Predisposes to malignancy
 - c. Koilonchia
 - d. Common in elderly males
10. Peptic ulcer is associated with all EXCEPT:
 - a. Cirrhosis
 - b. Zollinger Ellison syndrome
 - c. Primary hyperparathyroidism
 - d. Pernicious anaemia
11. Stress ulcers seen in burns are:
 - a. Curling ulcer
 - b. Cushing ulcer
 - c. Medency ulcer
 - d. Rodent ulcer
12. Commonest site of peptic ulcer is:
 - a. 1st part of duodenum
 - b. 2nd part of duodenum
 - c. Distal 1/3rd part of stomach
 - d. Pylorus of the stomach
13. Risk factors for carcinoma stomach include all of the following, EXCEPT:
 - a. Blood group A
 - b. Atrophic gastritis
 - c. Duodenal peptic ulcer
 - d. Partial gastrectomy
14. Most common site for carcinoma stomach is:
 - a. Antrum
 - b. Fundus
 - c. Lesser curvature
 - d. Greater curvature
15. Raised serum amylase levels are used to diagnose:
 - a. Autoimmune disease
 - b. Degenerative disease
 - c. Acute cholecystitis
 - d. Acute pancreatitis

16. Conjugated hyperbilirubinemia is seen in:

- a. Gilbert syndrome
- b. Griggler Najjar syndrome
- c. Breast Milk Jaundice
- d. Dubin Johnson syndrome

17. The first virological marker following acute infection with HBV is:

- a. HBs Ag
- b. Anti HBs Ag
- c. IgM anti HBc Ag
- d. Anti HBe Ag

18. Micronodular cirrhosis is commonly seen in all, EXCEPT:

- a. Chronic Hepatitis B
- b. Alcoholic Liver disease
- c. Haemochromatosis
- d. Chronic extrahepatic biliary cirrhosis

19. Normal portal venous pressure is:

- a. 3 – 5 cms saline
- b. 5 – 10 cms saline
- c. 10– 15 cms saline
- d. 15 – 20 cms saline

20. UMN lesion is characterized by:

- a. Weakness and spasticity
- b. Fasciculations
- c. Rigidity
- d. Localized muscle atrophy

21. Most common cause of cerebrovascular accident is:

- a. Embolism
- b. Arterial thrombosis
- c. Venous thrombosis
- d. Haemorrhage

22. All of the following drugs are used for managing status epilepticus EXCEPT:

- a. Phenytoin
- b. Diazepam
- c. Thiopentone sodium
- d. Carbamezapine

23. In Parkinsonism what is NOT present?

- a. Tremors at rest
- b. Past pointing
- c. Akinesia
- d. Rigidity

24. In TB meningitis CSF findings includes all of the following, EXCEPT:

- a. Raised protein
- b. Low sugar
- c. Low chloride
- d. High RBC count

Roll No.

Paper Code: 405

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEB./MARCH - 2014

GENERAL MEDICINE

PAPER – FIRST

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given

($\frac{1}{2} \times 24 = 12$)

Q. 2. Give Reasons:

(1 x 6 = 06)

- Why Formoterol and salmeterol are preferred now in management of chronic bronchial asthma?
- Why is Calcium gluconate given in the management of severe hyperkalemia?
- Why does exophthalmos occur in Graves disease?
- Why is Digoxin used in patients with chronic atrial fibrillation?
- Why is CD4 count done in a newly diagnosed patient with HIV disease?
- How does Ferritin differentiate between causes of microcytic hypochromic anemia?

Q. 3. Fill in the blanks:

(1 x 6 = 06)

- Petechial rash in a patient with meningitis suggestsas the cause of the meningitis.
-phenomenon is a common symptom in systemic sclerosis (scleroderma) due to.....
- Pellagra is a result of the deficiency ofvitamin and it's daily requirement is
- Causes of microcytic hypochromic anemia includeand
- The dose of streptokinase in acute myocardial infarction isunits and is given withintime.
- Hemoglobinuria is a symptom ofhemolysis and it is seen in disorder/disease.

Q. 4. Write in brief about:

(2 x 6 = 12)

- Clinical features of tetanus.
- Indications and doses of thrombolytic therapy in acute MI.
- Antibiotic therapy of pyogenic meningitis- drugs, doses, duration.
- Prophylactic treatment of rheumatic fever.
- Causes of hyponatremia.
- Clinical features of Addison's disease.

Q. 5. (i) Enumerate the complications of long standing Diabetes Mellitus Type II. Write the clinical features, diagnostic tests, treatment and prevention strategy of diabetic nephropathy.

(06)

Q. 5. (ii) Problem based question:

(1 x 6 = 06)

A 30 year old male comes to the clinic with history of low grade fever (documented) for 3 months, associated with cough, intermittent diarrhea and weight loss of 10 kg. He is unmarried and has history of unprotected sexual contact on a number of occasions over the past few years. He is non-diabetic, and has no past history of TB. He has noticed whitish patches on his tongue with soreness and recently has also complained of pain and difficulty in swallowing. He agrees to undergo HIV testing and tests positive.

- What findings on physical examination would be suggestive of HIV disease?
- What would be your interpretation of his dysphagia?
- Which opportunistic infections could be responsible for his pulmonary symptoms?
- Which of them is most likely?
- What is the drug for prophylaxis of above infections in this patient?
- What are the indications for starting antiretroviral therapy in this patient?

Q. 6. Write short notes on:

(2 x 6 = 12)

- Management of hypothyroidism.
- Complications of severe falciparum malaria
- Management of severe acute asthma.
- Atrial fibrillation
- Indications of dialysis
- Plasma osmolality – its calculation and importance

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEB./MARCH - 2014**GENERAL MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET- B****Q. 1. Multiple Choice questions ((Darken the single best response in OMR sheet) (0.5 x 24=12)**

1. The feature strongly suggestive of acute pyelonephritis is:
 - a. Frequent micturition
 - b. WBC casts in urine
 - c. Pyuria
 - d. Dysuria
2. Antibiotics are indicated in all of the following EXCEPT:
 - a. Cholera
 - b. Shigellosis
 - c. Non-typhoidal salmonellosis
 - d. Campylobacter enteritis
3. The drug of choice for methicillin resistant staphylococcus aureus infection is:
 - a. Meropenem
 - b. Piperacillin-tazobactam
 - c. Cefazolin
 - d. Vancomycin
4. The initial dose of I.V. artesunate for treatment of severe falciparum is :
 - a. 1.2 mg/kg stat
 - b. 2.4 mg/kg stat
 - c. 3.6 mg/kg stat
 - d. 4.8 mg/kg stat
5. Choose the true statement about anti-tuberculosis drugs:
 - a. Ethambutol causes hepatotoxicity.
 - b. Pyridoxine administration prevents isoniazid associated neuropathy.
 - c. Rifampicin can cause arthralgias.
 - d. Pyrazinamide can lead to decrease in uric acid levels.
6. All of the following statements about diagnosis of TB are true EXCEPT:
 - a. Interferon gamma release assays are now recommended for diagnosis of tuberculosis especially in extrapulmonary TB.
 - b. Sputum smear examination has low sensitivity but high specificity.
 - c. Sputum cultures are more sensitive for diagnosis of TB.
 - d. Raised ESR has low specificity for diagnosis of TB.
7. Which is the best screening test for diagnosis of Systemic Lupus Erythematosus?
 - a. Rheumatoid factor.
 - b. Antinuclear antibody.
 - c. Anti-dsDNA.
 - d. Anti-Sm.
8. All of the following are recommended for long term use as disease modifying antirheumatoid drugs EXCEPT:
 - a. Hydroxychloroquine
 - b. Methotrexate
 - c. Sulfasalazine
 - d. Oral steroids
9. Choose the correct statement about Gout
 - a. The first joint to be involved is the ankle joint.
 - b. The confirmatory test for gout is examination of joint fluid for urate crystals.
 - c. Uric acid is always elevated in patients with gout.
 - d. None of the above.
10. Choose the correct statement about BMI classification of nutritional status:
 - a. The normal BMI is 18.5 to 27.0 kg/m²
 - b. Severe undernutrition is BMI < 17 kg/m²
 - c. Overweight is defined as BMI > 27 kg/m²
 - d. Severe undernutrition is BMI < 16 kg/m²
11. All of the following are causes of nephrotic syndrome EXCEPT:
 - a. Diabetes mellitus.
 - b. Membranous nephropathy
 - c. Amyloidosis
 - d. Post-streptococcal glomerulonephritis.
12. Microalbuminuria is defined as 24 hour protein excretion of:
 - a. < 0.03 g /day.
 - b. 0.03- 0.3 g/day.
 - c. >0.5 g/day
 - d. None of the above.
13. Choose the correct statement about urine examination:
 - a. RBC casts are suggestive of glomerulonephritis.
 - b. Fatty casts are seen in nephrotic syndrome
 - c. Broad casts are seen in chronic renal failure.
 - d. All of the above.
14. All of the following are true with respect to hypokalemia EXCEPT:
 - a. It is one of the commonest electrolyte disturbances in hospitalised patients.
 - b. Alkalosis is often associated with hypokalemia.
 - c. It is associated with presence of tall T waves in ECG.
 - d. It can occur with use of beta2 agonists like salbutamol.
15. All of the following are AIDS defining illnesses EXCEPT:
 - a. Pneumocystis jirovecii pneumonia.
 - b. Cryptosporidium diarrhea.
 - c. Oral candidiasis
 - d. CNS toxoplasmosis
16. The following are clinical features of hypothyroidism EXCEPT:
 - a. Sinus bradycardia.
 - b. Pretibial myxedema.
 - c. Delayed tendon reflexes.
 - d. Dry skin

P.T.O.

17. Following drugs are used in the treatment of hyperthyroidism EXCEPT;
 - a. Carbimazole.
 - b. Saturated solution of potassium iodide
 - c. Propranolol.
 - d. Ornidazole.
18. Cotrimoxazole is used to prevent which of the following opportunistic infections in HIV patients?
 - a. Cryptosporidium diarrhea.
 - b. Oral candidiasis.
 - c. Pneumocystis jirovecii pneumonia.
 - d. Mycobacterium intracellulare infection.
19. Clubbing is associated with all of the following EXCEPT.
 - a. Infective endocarditis
 - b. Bronchiectasis
 - c. Bronchogenic carcinoma
 - d. Emphysema
20. Rheumatic fever is classically associated with :
 - a. Chronic arthritis
 - b. Migratory polyarthritis
 - c. Monoarthritis
 - d. Periarticular involvement
21. The following features are suggestive of right heart failure EXCEPT:
 - a. Pedal edema
 - b. Raised jugular venous pressure
 - c. Hepatomegaly
 - d. Splenomegaly
22. The treatment of ventricular tachycardia in a patient with a BP of 80 mm systolic is :
 - a. Intra Venous amiodarone
 - b. Intra Venous beta-blockers
 - c. Intra Venous calcium blockers
 - d. Immediate DC cardioversion.
23. Unstable angina is characterized by all EXCEPT:
 - a. Frequent or worsening (crescendo) angina
 - b. Angina associated with minimal exertion
 - c. Angina at rest
 - d. Relieved by antacids
24. All of the following are common causes of community acquired pneumonia EXCEPT:
 - a. Streptococcus pneumoniae
 - b. Streptococcus pyogenes
 - c. Hemophilus influenzae
 - d. Mycoplasma pneumoniae

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEB./MARCH - 2014
GENERAL MEDICINE
PAPER – SECOND

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given

(½ x 24 = 12)

Q. 2. Give Reasons:

(1 x 6 = 06)

- a. Why Ringer's lactate is I.V. fluid of choice in management of cholera?
- b. Why is Prothrombin time estimated as a test of liver function?
- c. Why is Spirometry an essential investigation in diagnosis and management of bronchial asthma?
- d. Why is Lactulose given in the management of hepatic encephalopathy?
- e. Why is Pralidoxime given in patients with organophosphate poisoning?
- f. Why is Paracetamol not effective in management of heat stroke?

Q. 3. Fill in the blanks:

(1 x 6 = 06)

- a. The CSF glucose level is betweenand normally% of the plasma glucose level.
- b. Serum copper isin patients of Wilson's disease and may be demonstrablein their cornea.
- c. A patient with type I respiratory failure will have Oxygen andCarbon dioxide in blood.
- d. Huntington's chorea and Hemochromatosis have autosomalpattern of inheritance.
- e. Parkinsonism is characterised by and
- f. Chlamydial infection is treated withor

Q. 4. Write in brief about:

(2 x 6 = 12)

- a. Stevens-Johnson syndrome.
- b. Hepatitis E.
- c. Treatment of herpes zoster.
- d. Silicosis.
- e. X-linked inheritance.
- f. Tension pneumothorax.

Q. 5. (i) Enumerate the causes of paraplegia. Outline the diagnostic workup of a patient with paraplegia. Describe treatment of Pott's spine and complications of paraplegia.

(1+2+2+1=06)

Q. 5. (ii) Problem based question:

(1 x 6 = 06)

A 45 year old female from a poor family presented with history of fatigue and dyspnea on exertion. She has no history of abnormal blood loss. She is a vegetarian with low intake of leafy vegetables. She is pale on examination with prominent pigmentation on knuckles, her vitals are normal, and she has no organomegaly. Her hemogram shows a Hemoglobin of 7 g/dl, MCV of 102 fl, and normal leucocyte and platelet count. The peripheral smear shows oval macrocytes and hypersegmented polymorphs.

- a. What are the abnormalities on investigations and their significance?
- b. What additional findings on physical examination would you evaluate?
- c. What are the common causes for this type of anemia?
- d. What additional laboratory investigation may help in establishing the specific diagnosis of this anemia?
- e. Depending upon the cause, what is the treatment for this type of anemia?
- f. How would you document response to this treatment in the first week after starting treatment?

Q. 6. Write short notes on:

(2 x 6 = 12)

- a. Treatment of Helicobacter pylori.
- b. Patterns of abnormalities in spirometry.
- c. Types of shock.
- d. Complications of acute pancreatitis.
- e. Medical management of portal hypertension.
- f. Features of UMN lesion.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEB./MARCH - 2014**GENERAL MEDICINE
PAPER – SECOND (MCQ)****Time allotted for MCQ – 25 minutes****SET - B****Q. 1. Multiple Choice questions ((Darken the single best response in OMR sheet)****(½ x 24=12)**

1. Acute pancreatitis can cause the following complications EXCEPT:
 - a. Hypoxia.
 - b. Hypercalcemia.
 - c. Hypocalcemia
 - d. Hyperglycemia
2. Guillian-Barré syndrome is characterized by which of the following?
 - a. Sensory loss on trunk
 - b. Albumino-cytologic dissociation in CSF
 - c. Normal deep tendon reflexes
 - d. Early sphincter involvement
3. Neurotoxic features are seen in India with the bites of which of the following snakes?
 - a. Kraits and Russell's Viper
 - b. Cobras and Kraits
 - c. Cobras and Russell's Viper
 - d. Cobras, Kraits and Russell's Viper
4. Acute respiratory distress syndrome by definition is characterized by the presence of the following EXCEPT:
 - a. Hypoxemia
 - b. Bilateral infiltrates
 - c. Raised left atrial pressure
 - d. Impaired lung compliance
5. The characteristics of autosomal recessive inheritance are the following EXCEPT:
 - a. Males and females are equally likely to be affected.
 - b. On average the recurrence risk in an unborn sibling of an affected individual is ¼.
 - c. Most affected individuals have parents with normal phenotypes.
 - d. In a rare autosomal recessive disease, it is likely that the parents of the affected individual are not related.
6. The following features in a patient with loss of consciousness suggest a diagnosis of seizure rather than syncope EXCEPT:
 - a. Aura.
 - b. Tongue-bite
 - c. Rapid recovery
 - d. Post-ictal amnesia
7. Selected patients with ischemic stroke can benefit from thrombolytic therapy with recombinant tissue plasminogen activator if this drug is given within:
 - a. Less than 6 hours after onset of stroke
 - b. Less than 3 hours after onset of stroke
 - c. Less than 12 hours after onset of stroke
 - d. None of the above
8. Insertion of a nasogastric tube is contraindicated in:
 - a. Corrosive poisoning
 - b. Kerosene poisoning
 - c. Both of the above
 - d. None of the above
9. The specific antagonist in a patient with benzodiazepine poisoning is:
 - a. Activated charcoal
 - b. Flumazenil
 - c. N-acetylcysteine
 - d. Naloxone
10. Pralidoxime therapy is indicated in :
 - a. Organophosphate poisoning.(e.g. chlorpyrifos)
 - b. Carbamate poisoning.(e.g. propoxur)
 - c. Organochlorine poisoning.(e.g. DDT)
 - d. All of the above
11. The following are features of amoebic liver abscess EXCEPT:
 - a. Preceding history of dysentery may be absent
 - b. Abscess is usually in the left lobe of liver
 - c. Fever and abdominal pain are usual symptoms
 - d. Jaundice is rare
12. The following definitions are true EXCEPT:
 - a. Macule: a flat circumscribed area of altered color
 - b. Papule: discrete elevation of skin which may be altered in color
 - c. Vesicle: fluid filled blister which is several centimeters in diameter
 - d. Plaque: raised area of skin with a flat top
13. All of the following viruses can cause chronic liver disease EXCEPT:
 - a. Hepatitis B
 - b. Hepatitis C
 - c. Hepatitis D
 - d. Hepatitis A
14. All of the following are true with respect to H.pylori infection EXCEPT:
 - a. Infection with H. pylori is more common in the western countries
 - b. 90% of patients with duodenal ulcer and 70% of patients with gastric ulcer are infected with H. pylori
 - c. It produces the enzyme urease
 - d. It is a risk factor for gastric cancer
15. Peripheral signs which suggest chronicity of liver disease include all EXCEPT:
 - a. Spider telangiectasias
 - b. Palmar erythema
 - c. Jaundice
 - d. Testicular atrophy
16. Flapping tremor can be seen in all EXCEPT:
 - a. Hepatic encephalopathy
 - b. Hypercapnia and CO₂ narcosis in a patient with COPD
 - c. Uremic encephalopathy.
 - d. Hypoxic encephalopathy

P.T.O...

17. Management of a patient with cardiac arrest secondary to ventricular tachycardia/ventricular fibrillation includes all EXCEPT:

- a. Adrenaline
- b. Cardioversion
- c. Lignocaine
- d. Atropine

18. Portal hypertension can manifest as all of the following EXCEPT:

- a. Splenomegaly
- b. Ascites
- c. Caput medusae
- d. Raised JVP

19. All of the following are RNA viruses EXCEPT:

- a. Hepatitis C
- b. Hepatitis D
- c. Hepatitis E
- d. Hepatitis B

20. The following are true with respect to schizophrenia EXCEPT:

- a. It may be associated with impairment of consciousness and loss of orientation.
- b. The first rank symptoms are auditory hallucinations, broadcasting, controlled feelings, delusional perception.
- c. Negative symptoms include blunt affect, apathy, social isolation.
- d. Antipsychotics are effective against the positive symptoms of schizophrenia.

21. All the following conditions are consistent with autosomal dominant pattern of inheritance EXCEPT:

- a. There is no skipping of generations
- b. Males and females are equally affected
- c. Affected individual has an affected parent
- d. About $\frac{1}{4}$ of offspring of an affected individual are affected.

22. All the following conditions can cause genital ulceration in a male EXCEPT:

- a. Chancroid
- b. Syphilis
- c. Gonorrhea
- d. Lymphogranuloma venereum.

23. Short acting β_2 agonists include all EXCEPT:

- a. Salmeterol
- b. Salbutamol
- c. Sotalol
- d. Terbutaline

24. Fluids used in the management of hypovolemic shock can include all of the following EXCEPT:

- a. Normal saline
- b. Hydroxyethyl starch
- c. Ringer's lactate
- d. 5% dextrose

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2015
GENERAL MEDICINE
PAPER – FIRST

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given ($\frac{1}{2} \times 24 = 12$)

Q. 2. Give Reasons why: (1 x 6 = 06)

- a. Pulsus paradoxus is seen in cardiac tamponade.
- b. Addison's disease is associated with hyperpigmentation.
- c. Hypothyroidism is associated with weight gain.
- d. Dextrose-insulin drip is given in hyperkalemia.
- e. Erythropoietin is given in chronic renal failure.
- f. Entrapment neuropathies are seen in rheumatoid arthritis.

Q. 3. Problem based question: (1+2+1+1+1= 06)

A 44 year old male patient presents with constipation, cold intolerance, husky voice and coarse, dry skin.

- a. What is the most likely diagnosis?
- b. What are the cardiac manifestations of this disease?
- c. What investigations would you order in this case?
- d. How would you treat this case?
- e. How would you monitor your treatment?

Q. 4. Write in brief: (2 x 6 = 12)

- a. Causes of acute interstitial nephritis.
- b. Relative contraindications to thrombolytic therapy.
- c. Complications of typhoid fever.
- d. Neurological disorders due to Vitamin B₁₂ deficiency.
- e. Extra-articular complications of rheumatoid arthritis.
- f. Management of hyperkalemia.

Q. 5. Structured question: (2+2+2 = 06)

(i) Discuss the aetiopathogenesis, clinical features and management of cerebral malaria.

(ii) Discuss management of Diabetic-Ketoacidosis. (06)

Q. 6. Write short notes on: (2 x 6 = 12)

- a. Causes of nephrotic syndrome.
- b. Differentiation between osteomalacia and osteoporosis.
- c. Treatment of chronic myeloid leukemia.
- d. Diagnosis of Rheumatoid arthritis.
- e. Indications for haemodialysis.
- f. Causes of secondary hypertension.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2015
GENERAL MEDICINE
PAPER – FIRST (MCQ)

Time allotted for MCQ – 25 minutesSET - D**Q. 1** Multiple Choice questions (Darken the single best response in OMR sheet)**(0.5 x 24 = 12)**

1. Microscopic hematuria is a characteristic feature of:
 - a. Renal amyloidosis
 - b. Multiple myeloma
 - c. Infective endocarditis
 - d. Urinary tract infection
2. Hyperkalemia is treated by all EXCEPT:
 - a. Dextrose insulin infusion
 - b. Sodium bicarbonate
 - c. Calcium gluconate
 - d. Magnesium sulphate
3. Which one is not a feature of hyperthyroidism?
 - a. Diarrhea
 - b. Weight loss
 - c. Pretibial myxoedema
 - d. Cold intolerance
4. Reverse splitting of second heart sound is heard in:
 - a. LBBB
 - b. RBBB
 - c. Complete heart block
 - d. Pericardial effusion
5. A nosocomial infection comes from:
 - a. Insect
 - b. Rodent
 - c. Tropical region
 - d. Medical facility
6. Drug used for radical cure of malaria is:
 - a. Chloroquine
 - b. Primaquine
 - c. Artesunate
 - d. Artemether
7. Hookworm infestation leads to:
 - a. Iron deficiency anemia
 - b. Megaloblastic anemia
 - c. Hemolytic anemia
 - d. Dimorphic anemia
8. Calcium pyrophosphate dihydrate crystal deposition occurs in:
 - a. Reiter's disease
 - b. Pseudogout
 - c. Juvenile arthritis
 - d. Reactive arthritis
9. Hypervitaminosis D may lead to:
 - a. Metastatic calcification of the soft tissues
 - b. Diarrhea
 - c. Hyperphosphatemia
 - d. Excessive sleep
10. Subacute combined degeneration of cord occurs due to:
 - a. Tryptophan deficiency
 - b. Vitamin B12 deficiency
 - c. Valine deficiency
 - d. Isoleucine deficiency
11. Which of the following is not a cause of nephrotic syndrome?
 - a. Sarcoidosis
 - b. SLE
 - c. Diabetes mellitus
 - d. Dengue
12. RBC casts are seen in:
 - a. Acute pyelonephritis
 - b. Acute glomerulonephritis
 - c. Analgesic induced nephropathy
 - d. Chronic renal failure
13. Metabolic acidosis is compensated by:
 - a. Respiratory alkalosis
 - b. Respiratory acidosis
 - c. Metabolic alkalosis
 - d. None of above
14. Hypercalcemia is treated by all EXCEPT:
 - a. Rehydration with normal saline
 - b. Bisphosphonates
 - c. Forced diuresis
 - d. Potassium replacement
15. Kimmelsteil Wilson bodies are a feature of:
 - a. Diabetic nephropathy
 - b. Analgesic nephropathy
 - c. Membranoproliferative glomerulonephritis
 - d. Diabetes insipidus
16. Which of the following is seen in Cushing's syndrome?
 - a. Centripetal obesity
 - b. Hypotension
 - c. Hyperpigmentation
 - d. Low serum cortisol
17. Thrombolytic therapy is generally given in acute myocardial infarction within :
 - a. 1 hour
 - b. 6 hours
 - c. 18 hours
 - d. 24 hours

18. The drug of choice for paroxysmal atrial tachycardia is:

- a. Verapamil
- b. Digoxin
- c. Amiodarone
- d. Adenosine

19. HIV virus is:

- a. Rotavirus
- b. Retrovirus
- c. Rhinovirus
- d. Coronavirus

20. Massive splenomegaly is seen in:

- a. Acute myeloid leukemia
- b. Chronic myeloid leukemia
- c. Chronic lymphatic leukemia
- d. Acute lymphatic leukemia

21. Megaloblastic anemia occurs due to all EXCEPT:

- a. Folate deficiency
- b. Methotrexate
- c. Sulfonamides
- d. Aspirin

22. Anti-CCP antibodies are characteristic of:

- a. Rheumatoid arthritis
- b. SLE
- c. Dermatomyositis
- d. Gouty arthritis

23. Looser's zones are characteristic of:

- a. Osteomalacia
- b. Osteoporosis
- c. Paget's disease
- d. Hypoparathyroidism

24. Obesity refers to:

- a. BMI>23
- b. BMI>25
- c. BMI>28
- d. BMI>30

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2015
GENERAL MEDICINE
PAPER – SECOND

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given

(½ x 24 = 12)

Q. 2. Give Reasons:

(1 x 6 = 06)

- a. Upper half of face is spared in upper motor neuron type of facial nerve involvement.
- b. Constricted pupil is seen in Horner's syndrome.
- c. Coffee ground vomitus is seen in hematemesis.
- d. Glucose-6-Phosphate dehydrogenase level is estimated before giving Primaquine.
- e. Hypotonia is seen in cerebellar lesions.
- f. Patients with COPD deteriorate with continuous oxygen therapy.

Q. 3. Problem based question:

(1 x 6 = 06)

A 65 year old male patient presents with history of chronic productive cough brought on by changes of posture with often copious sputum with recurrent hemoptysis. Examination shows clubbing and numerous coarse crackles over bases.

- a. What is the most likely diagnosis?
- b. Enumerate two causes of the most likely diagnosis?
- c. What is the differential diagnosis?
- d. Name two important complications of this disease.
- e. Name two important investigations for confirmation of diagnosis.
- f. What are the modalities of treatment for this disease?

Q. 4. Write in brief:

(2 x 6 = 12)

- a. Bipolar disorder.
- b. Transient ischemic attack.
- c. Tension pneumothorax.
- d. Tropical sprue.
- e. Complications of ulcerative colitis.
- f. Treatment of heat stroke.

Q. 5. (i) Describe the aetiopathogenesis, clinical features and management of acute viral hepatitis.

(2+2+2= 06)

(ii) Discuss the approach to a case of hypovolemic shock.

(06)

Q. 6. Write short notes on:

(2 x 6 = 12)

- a. CSF findings in pyogenic bacterial meningitis.
- b. Causes of haemoptysis.
- c. Complications of pneumonia.
- d. Systemic causes of coma.
- e. Clinical grading of hepatic encephalopathy.
- f. Gene therapy.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2015
GENERAL MEDICINE
PAPER – SECOND (MCQ)

Time allotted for MCQ – 25 minutes

SET - D

Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet)

(0.5 x 24 = 12)

1. Pralidoxime is used in the treatment of:
 - a. Organophosphorus poisoning
 - b. Carbamate poisoning
 - c. Organochloride poisoning
 - d. Aluminium phosphide poisoning
2. Warm extremities and bounding pulses are usually present in all EXCEPT:
 - a. Septic shock
 - b. Anaphylactic shock
 - c. Cardiogenic shock
 - d. Neurogenic shock
3. In diabetic ketoacidosis, arterial blood pH is:
 - a. > 7.45
 - b. Between 7.35 to 7.4
 - c. Between 7.4 to 7.45
 - d. < 7.35
4. Lead poisoning causes:
 - a. Microcytic anemia
 - b. Normocytic normochromic anemia
 - c. Macrocytic anemia
 - d. All of above
5. Solar ultraviolet radiation causing skin cancers is an example of:
 - a. Ionising radiation
 - b. Non-ionising radiation
 - c. Chemical mutagens
 - d. None of above
6. Dysthymia refers to:
 - a. Episodes of elevated mood
 - b. Particularly chronic low-grade depression
 - c. Episodes of lowered mood
 - d. Obsessive thoughts
7. Pinpoint pupils are seen in all EXCEPT:
 - a. Morphine poisoning
 - b. Pontine hemorrhage
 - c. Organophosphorus poisoning
 - d. Aluminium phosphide poisoning
8. Superior oblique muscle is supplied by:
 - a. 3rd cranial nerve
 - b. 4th cranial nerve
 - c. 5th cranial nerve
 - d. 6th cranial nerve
9. An inverted brachioradialis jerk occurs with the lesion at:
 - a. C₅ or C₆
 - b. C₄
 - c. T₁
 - d. C₇
10. Which of the following is not a cause of exudative pleural effusion?
 - a. Tuberculosis
 - b. Rheumatoid arthritis
 - c. Congestive heart failure
 - d. Mesothelioma
11. Which of the following is not a feature of bronchiectasis?
 - a. Chronic productive cough
 - b. Haemoptysis
 - c. Koilonychia
 - d. Halitosis
12. Which of the following is not correct about Mantoux test?
 - a. Read after 24 hours
 - b. Uses 10 tuberculin units
 - c. Positive when induration >10mm
 - d. False positive reactions in those who had BCG
13. Sarcoidosis is associated with all EXCEPT:
 - a. Erythema nodosum
 - b. Superficial lymphadenopathy
 - c. Hypocalcaemia
 - d. Cardiac arrhythmias
14. Gluten containing foods are avoided in:
 - a. Coeliac disease
 - b. Ulcerative colitis
 - c. Hirschsprung's disease
 - d. Crohn's disease
15. Tenesmus is a feature of:
 - a. Infective colitis
 - b. Rectal carcinoma
 - c. Irritable bowel syndrome
 - d. All of above
16. Hemolytic jaundice is characterized by:
 - a. Unconjugated hyperbilirubinemia with bilirubinuria
 - b. Unconjugated hyperbilirubinemia without bilirubinuria
 - c. Conjugated hyperbilirubinemia with bilirubinuria
 - d. Conjugated hyperbilirubinemia without bilirubinuria
17. Target lesions are seen in:
 - a. Pityriasis versicolor
 - b. Pityriasis alba
 - c. Erythema multiforme
 - d. Chancroid

18. Lupus vulgaris is a form of:

- a. Skin tuberculosis
- b. Pemphigus
- c. Leprosy
- d. Eczema

19. Which of the following viruses is associated with fulminant hepatic failure in pregnant women?

- a. Hepatitis A virus
- b. Hepatitis B virus
- c. Hepatitis C virus
- d. Hepatitis E virus

20. Mallory bodies are classically seen in:

- a. Alcoholic liver disease
- b. Chronic hepatitis C
- c. Chronic hepatitis B
- d. Budd Chiari syndrome

21. Hepatitis B is considered chronic if

- a. HBcAb IgG is present beyond 6 months
- b. HBcAb IgM is present beyond 3 months
- c. HBsAg is present beyond 6 months
- d. None of the above

22. Imipramine is useful in treatment of:

- a. Depression
- b. Schizophrenia
- c. Obsessive compulsive disorder
- d. Anxiety neurosis

23. Auditory hallucinations are typical of:

- a. Schizophrenia
- b. Reactive depression
- c. Endogenous depression
- d. Hysterical neurosis

24. The usual karyotype in Klinefelter's syndrome is:

- a. 47XXY
- b. 45XO
- c. 46XX
- d. 46XY

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2015
GENERAL MEDICINE
PAPER – SECOND

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given

($\frac{1}{2} \times 24 = 12$)

Q. 2. Give Reasons :

(1 x 6 = 06)

- a. Ringer's lactate is I.V. fluid of choice in management of cholera.
- b. Prothrombin time is estimated as a test of liver function.
- c. Adrenaline is used as drug of choice in anaphylactic shock.
- d. Tubercular lesions are commonly seen in upper lobes.
- e. Spirometry is an essential investigation in diagnosis and management of bronchial asthma.
- f. Pontine bleed is associated with pin point pupils.

Q. 3. Problem based question:

(2+2+2 = 06)

A 50 year old woman is admitted with hematemesis of 2 days duration and unconsciousness. She has no past history of jaundice but has icterus and hepatomegaly on examination.

- a. Enumerate the signs that are important in making a clinical diagnosis.
- b. Enumerate the investigations that need to be performed.
- c. Highlight the difference in the treatment if this lady had a past history of jaundice and had a liver span of 5 cm at presentation.

Q. 4. Write short notes on:

(3 x 4 = 12)

- a. Management options in chronic renal failure
- b. Stepwise approach to the management of asthma
- c. Clinical features of organo phosphorus poisoning.
- d. Lepra reaction

Q. 5. Structured question:

(i) Enumerate the causes of paraplegia. Outline the diagnostic workup of a patient with paraplegia.

Give treatment of Pott's spine and enumerate complications of paraplegia.

(1+2+2+1= 06)

(ii) Enumerate the various causes of pleural effusion and treatment of Empyema.

(3+3 = 06)

Q. 6. Write briefly;

(3 x 4 = 12)

- a. Flow chart of the investigation of a patient with suspected pulmonary thromboembolism.
- b. Complications of first line anti tubercular drugs.
- c. Treatment algorithm of status epilepticus.
- d. Investigations of a case with urinary tract infection.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2015
GENERAL MEDICINE
PAPER – SECOND (MCQ)

Time allotted for MCQ – 25 minutes**Set - B****(0.5 x 24 = 12)****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet)**

1. Which is not a feature of neurotoxic snake bite?
 - a. Ptosis
 - b. Respiratory failure
 - c. Quadriparesis
 - d. Hemiplegia
2. How many blood cultures should be taken in a case with sepsis?
 - a. Atleast one
 - b. Atleast two
 - c. Atleast one at the peak of fever
 - d. Number varies with the severity of sepsis
3. All maybe used in the management of cardiogenic shock EXCEPT:
 - a. Nitrates
 - b. Dobutamine
 - c. Intra-aortic balloon pulsation
 - d. Aspirin
4. All the features are seen in Parkinsonism EXCEPT:
 - a. Bradykinesia
 - b. Rigidity
 - c. Tremors
 - d. Broad-based gait
5. All parameters in CSF suggest pyogenic meningitis EXCEPT:
 - a. Increased proteins
 - b. Increased sugar
 - c. Increased polymorphs
 - d. Increased pressure
6. Guillaine Barre syndrome is characterized by:
 - a. Ascending paralysis
 - b. Descending paralysis
 - c. Hemiplegia
 - d. Monoplegia
7. A 74 year old patient presents 10 days after experiencing an episode of shingles. She now complains of persistent pain in that area. You make a diagnosis of post-hepatic neuralgia. Which of the following is the single best treatment?
 - a. Oral Acyclovir
 - b. Gabapentin
 - c. Oral hydrocortisone
 - d. Acyclovir cream topically
8. Fever with chills and rigors is characteristic of:
 - a. Malaria
 - b. Filaria
 - c. Typhoid
 - d. Tuberculosis
9. Whole blood clotting time is important for which type of snake bites?
 - a. Hematotoxic
 - b. Neurotoxic
 - c. Hepatotoxic
 - d. Nephrotoxic
10. The preferred investigation in presumptive diagnosis of pulmonary embolism is:
 - a. Lung scan
 - b. Bronchoscopy
 - c. CT Thorax
 - d. Doppler
11. Cortical sensations are mediated by the:
 - a. Parietal lobe
 - b. Frontal lobe
 - c. Temporal lobe
 - d. Occipital lobe
12. Sensations are spared in all of the following neurological disorders except those involving:
 - a. Neuro-muscular junction
 - b. Muscles
 - c. Peripheral nerves
 - d. None of the above
13. Which of the following is not a cause of cirrhosis?
 - a. Alcoholism
 - b. Hepatitis B virus
 - c. Hepatitis A virus
 - d. Alpha-1 antitrypsin deficiency
14. Which is not an indication of liver transplantation?
 - a. Fulminant hepatic failure
 - b. Hepatocellular carcinoma
 - c. Cryptogenic cirrhosis
 - d. Alcoholic hepatitis
15. Globus hystericus is:
 - a. Difficulty in swallowing
 - b. Pain during swallowing
 - c. Sensation of lump in throat
 - d. Sensation of bulging eyeballs
16. Schilling test is done for evaluating the cause of:
 - a. Megaloblastic anemia
 - b. Folate deficiency
 - c. Cobalamin deficiency
 - d. Malabsorption
17. Symptoms suggestive of acute intestinal obstruction are all EXCEPT:
 - a. Abdominal pain
 - b. Vomiting
 - c. Constipation
 - d. Fever
18. Which is an example of occupational lung disease?
 - a. Asbestosis
 - b. Byssinosis
 - c. Bagassosis
 - d. All of the above
19. Severity of pneumonia is assessed by:
 - a. Light's criteria
 - b. Child-Pugh score
 - c. CURB-65
 - d. APACHE score

20. To classify as transudative or exudative, all parameters are required in pleural fluid EXCEPT:

- a. Protein
- b. LDH
- c. Cell count
- d. ADA

21. All are risk factors for asthma EXCEPT:

- a. Genetic predisposition
- b. Atopy
- c. Passive smoking
- d. None of the above

22. Vesicles and bullae are seen on the skin in:

- a. Pemphigus
- b. Steven Johnson's syndrome
- c. Herpes zoster
- d. All of the above

23. Trembling, sweating and palpitations in a young female are most likely suggestive of:

- a. Anxiety
- b. Depression
- c. Poisoning
- d. Hypothyroidism

24. All of the following are treatment modalities for high-altitude pulmonary edema EXCEPT:

- a. Hyperbaric oxygen
- b. Nifedipine
- c. Hypobaric oxygen
- d. Shifting to lower altitude

Regn. No.

Paper Code: 407

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2015
GENERAL MEDICINE
PAPER – FIRST

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given

(½ x 24 = 12)

Q. 2. Give Reasons:

(1 x 6 = 06)

- a. Malaria generally causes anaemia.
- b. Cannon waves are seen in JVP in complete heart block.
- c. Diabetic ketoacidosis is generally not seen in type 2 diabetes mellitus.
- d. Rate of correction of hyponatremia is kept below 10meq/l in 24 hours.
- e. Hypocalcemia is generally seen in chronic renal failure.
- f. Pulse deficit is seen in atrial fibrillation.

Q. 3. Problem based question:

(0.5+1.5+1+1+1+1 = 06)

A 55 year old male, who is a known diabetic and hypertensive presents with sudden acute retro sternal chest pain associated with profuse sweating. Examination shows thready pulse with cold and clammy skin.

- a. What is the most likely diagnosis?
- b. What are the differential diagnoses?
- c. What ECG changes do you expect in this case?
- d. What other investigations would you do?
- e. What are the short term complications?
- f. Outline the treatment modalities for this case.

Q. 4. Write short notes on:

(3 x 4 = 12)

- a. Amoebic dysentery
- b. Hypervitaminosis A
- c. Megaloblastic Anemia.
- d. Incretins

Q. 5. Structured question:

(i) Discuss the aetiopathogenesis, clinical features and management of diabetic ketoacidosis.

(2+2+2 = 06)

(ii) Enumerate causative organisms and Duke's criteria of infective endocarditis.

(3 + 3 = 06)

Q. 6. Write in brief about:

(3 x 4 = 12)

- a. Chronic complications of Diabetes mellitus.
- b. Contraindications to renal transplantation.
- c. Common arrhythmias in acute myocardial infarction.
- d. Causes of hypothyroidism.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2015
GENERAL MEDICINE
PAPER – FIRST (MCQ)

Time : allotted for MCQ – 25 minutes

Set - A

Q. 1 Multiple Choice questions (Darken the single best response in OMR sheet)

(0.5 x 24=12)

1. Urinalysis shows RBC casts; likely source is:
 - a. Kidney
 - b. Ureter
 - c. Bladder
 - d. Urethra
2. All are features of haemolytic uremic syndrome, EXCEPT:
 - a. Hyperkalemia
 - b. Anaemia
 - c. Renal microthrombi
 - d. Neuropsychiatric disturbances
3. Metabolic changes associated with excessive vomiting includes the following:
 - a. Metabolic acidosis
 - b. Hyperchloremia
 - c. Hypokalemia
 - d. Decrease in bicarbonates
4. Addison's disease is characterized by all EXCEPT:
 - a. Hyperglycemia
 - b. Hypotension
 - c. Hyperkalemia
 - d. Hyponatremia
5. Massive Splenomegaly doesn't occur in:
 - a. CML
 - b. Portal hypertension
 - c. Tropical Splenomegaly
 - d. Enteric fever
6. Which of the following is not arthropod-borne disease?
 - a. Malaria
 - b. Filariasis
 - c. Dengue
 - d. Endemic dropsy
7. Bisferiens pulse best felt in:
 - a. Carotid
 - b. Brachial
 - c. Abdominal aorta
 - d. Radial
8. CPK MB is a marker of injury to:
 - a. Pancreas
 - b. Liver
 - c. heart
 - d. Prostate
9. Jones criteria: All of the following are true EXCEPT:
 - a. Erythema Nodosum
 - b. Carditis
 - c. Erythema marginatum
 - d. Arthritis
10. Most common endocrine disorder associated with vitiligo in the elderly is:
 - a. Addison's disease
 - b. Diabetes
 - c. Hypothyroidism
 - d. Pernicious anemia
11. Increased osmotic fragility is a feature of:
 - a. Sickle cell anemia
 - b. Hereditary spherocytosis
 - c. G-6PD deficiency
 - d. Thalassemia
12. Water hammer pulse is seen in all EXCEPT:
 - a. AS
 - b. AR
 - c. MR
 - d. PDA
13. All are seen in cardiac tamponade EXCEPT:
 - a. Pericardial rub
 - b. Prominent y decent
 - c. Pulsus paradoxus
 - d. Electrical alternans
14. All are true about adult polycystic kidney disease, EXCEPT:
 - a. Autosomal dominant inheritance
 - b. Hypertension is rare
 - c. Can be associated with cysts in liver, lungs and pancreas
 - d. Pyelonephritis is common
15. Dialysis patients are prone to develop:
 - a. Lead toxicity
 - b. Iron toxicity
 - c. Aluminium toxicity
 - d. Zinc toxicity
16. All the features are seen in Cushing's syndrome EXCEPT:
 - a. Hypoglycemia
 - b. Hypertension
 - c. Frank psychosis
 - d. Hypokalemia
17. Which of the following is genetically determined disease?
 - a. Thrombocytopenia
 - b. Haemophilia
 - c. Polycythemia
 - d. Megaloblastic Anaemia
18. Which of the following drug commonly causes aplastic anemia?
 - a. Prednisolone
 - b. Penicillin
 - c. Minocycline
 - d. Chloramphenicol
19. Step ladder fever is characteristic of:
 - a. Malaria
 - b. Filariasis
 - c. Typhoid
 - d. Tuberculosis

P.T.O. ...

20. Pulses paradoxus is seen in:

- a. COPD
- b. HOCM
- c. Constrictive pericarditis
- d. Severe TR

21. The most common cause of Sudden Cardiac Death in athlete is:

- a. HOCM
- b. CAD
- c. Coronary abnormality
- d. Idiopathic ventricular tachycardia

22. Cardiac tamponade: JVP findings is:

- a. Prominent x decent
- b. Prominent y decent
- c. V-y collapse
- d. a=v

23. Commonest cause of Constrictive Pericarditis in India is:

- a. Metastasis
- b. Uremia
- c. Tuberculosis
- d. Idiopathic

24. Functional unit of kidney is:

- a. Neuron
- b. Nephron
- c. Ganglion
- d. Proton

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016
GENERAL MEDICINE
PAPER – FIRST (SAQ)

[Time allotted: Three hours]**[Max Marks: 60]****Note:** Attempt all Questions.

Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given (½ x 24 = 12)
- Q. 2. Give reasons for:** (1 x 6 = 06)
- a. Elevated bilirubin levels in cases of malaria.
 - b. Loss of 'a' waves in JVP.
 - c. Collapsing character of pulse in AR.
 - d. Purification of water not used in prevention of Dengue fever.
 - e. Metabolic bone disease in CKD.
 - f. Hyponatremia in CHF.
- Q. 3. Problem based question:** (1+2+3 = 06)
- A 30 year old patient who is a known case of valvular heart disease presented with sudden onset of breathlessness.
- a. What is the most likely diagnosis?
 - b. Enumerate the investigations that need to be performed.
 - c. How will you treat this case?
- Q. 4. Write short notes on:** (3 x 4 = 12)
- a. Microcytic hypochromic Anemia
 - b. Pellagra
 - c. Management of hypercalcaemia.
 - d. Diagnosis of Visceral Leishmaniasis.
- Q. 5. Structured question:**
- (i) Enumerate causes and management of AKI. (3+3= 06)
 - (ii) Enumerate clinical features of Grave's disease. (06)
- Q. 6. Write in brief about:** (3 x 4 = 12)
- a. Opportunistic Infections in HIV.
 - b. Polycythemia Vera.
 - c. Joint deformities in Rheumatoid arthritis.
 - d. Hyperglycemic Hyperosmolar syndrome.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016**GENERAL MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET - C****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24 = 12)**

1. Micro albuminuria is characterized by-24-h excretion in urine of protein:
 - a. 300-3500 mg/day
 - b. 30-300mg/day
 - c. <30mg/day
 - d. >3500mg/day
2. Which of the following is not a cause of postrenal ARF?
 - a. Ureteric calculi
 - b. Prostatic hypertrophy
 - c. Hepatorenal syndrome
 - d. Neurogenic bladder
3. Kimmelstiel Wilson modules are characteristically seen in:
 - a. RPGN
 - b. Analgesic nephropathy
 - c. Diabetic nephropathy
 - d. Amyloidosis
4. Mitral valve prolapse is characterized by:
 - a. Early systolic murmur
 - b. Mid systolic murmur
 - c. Late systolic murmur
 - d. Pansystolic murmur
5. Infective endocarditis may manifest with all EXCEPT:
 - a. Splenomegaly
 - b. Microscopic hematuria
 - c. Hepatomegaly
 - d. Roth's spots
6. Wide and fixed splits of 2nd heart sound is characteristic of:
 - a. ASD
 - b. VSD
 - c. PDA
 - d. Co-arcuation of aorta
7. Tetralogy of fallot is characterized by all EXCEPT:
 - a. VSD
 - b. LV hypertrophy
 - c. Aortic overriding of VSD
 - d. Obstruction to RV outflow
8. S3 is heard in all EXCEPT:
 - a. Pregnancy
 - b. Ventricular failure
 - c. AS
 - d. MR
9. Sinus bradycardia is caused by all EXCEPT:
 - a. Amiodarone
 - b. Amlodipine
 - c. Myxoedema
 - d. Digoxin
10. Low volume pulse is present in all EXCEPT:
 - a. Anemia
 - b. Shock
 - c. Hypovolemia
 - d. Myocarditis
11. Pretibial Myxedema is a feature of:
 - a. Hypothyroidism
 - b. Thyroiditis
 - c. Graves disease
 - d. Thyrotoxicosis factitia
12. Microvascular complications of diabetes are all EXCEPT:
 - a. Retinopathy
 - b. Peripheral arterial disease
 - c. Neuropathy
 - d. Nephropathy
13. In ADA criteria for diagnosis of Diabetes Mellitus, fasting plasma glucose level should be:
 - a. ≥ 120 mg/dl
 - b. ≥ 126 mg/dl
 - c. ≥ 130 mg/dl
 - d. ≥ 140 mg/dl
14. Mosquitoes are vectors in the following diseases:
 - a. Visceral Leishmaniasis
 - b. African Trypanosomiasis
 - c. Leptospirosis
 - d. Bancroftian filariasis
15. The following are recognized causes of eosinophilia EXCEPT:
 - a. Malaria
 - b. Churg-strauss syndrome
 - c. Drug Hypersensitivity
 - d. Toxocariasis
16. Blast cells percentage for diagnosis of acute Leukemia using WHO criteria:
 - a. 20%
 - b. 10%
 - c. 30%
 - d. None of the above
17. Hypochromic microcytic anemia is a recognized finding in:
 - a. Hemolytic anemia
 - b. Hypothyroidism
 - c. Primary sideroblastic anemia
 - d. Rheumatoid arthritis

18. Disease modifying anti rheumatic drugs (DMARD) in rheumatoid arthritis includes all except:
- Sulphasalszine
 - Naproxen
 - Azathioprine
 - D-penicillamine
19. Extra articular manifestations of rheumatoid arthritis include
- Peripheral neuropathy
 - Cutaneous ulceration
 - Pericardial and pleural effusion
 - All of above
20. Recognised causes of potassium depletion includes all EXCEPT:
- Metabolic alkalosis
 - Corticosteroid treatment
 - Cardiac failure
 - Spironolactone therapy
21. The rate of correction of plasma sodium concentration in chronic asymptomatic hyponatremia should not exceed:
- 5 mmol/L/day
 - 10 mmol/L/day
 - 15 mmol/L/day
 - 20 mmol/L/day
22. Hypocalcemia may manifest with all EXCEPT:
- Carpopedal spasm
 - Stridor
 - Convulsions
 - hypotonia
23. Niacin deficiency may manifest with all EXCEPT:
- Dermatitis
 - Foot drop
 - Diarrhoea
 - Dementia
24. In obesity BMI is:
- $>15\text{kg/m}^2$
 - $>20\text{kg/m}^2$
 - $>25\text{kg/m}^2$
 - $>30\text{kg/m}^2$

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016**GENERAL MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET - D****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24 = 12)**

1. Wide and fixed splits of 2nd heart sound is characteristic of:
 - a. ASD
 - b. VSD
 - c. PDA
 - d. Co-arctation of aorta
2. Tetralogy of fallot is characterized by all EXCEPT:
 - a. VSD
 - b. LV hypertrophy
 - c. Aortic overriding of VSD
 - d. Obstruction to RV outflow
3. S3 is heard in all EXCEPT:
 - a. Pregnancy
 - b. Ventricular failure
 - c. AS
 - d. MR
4. Sinus bradycardia is caused by all EXCEPT:
 - a. Amiodarone
 - b. Amlodipine
 - c. Myxoedema
 - d. Digoxin
5. Low volume pulse is present in all EXCEPT:
 - a. Anemia
 - b. Shock
 - c. Hypovolemia
 - d. Myocarditis
6. Pretibial Myxedema is a feature of:
 - a. Hypothyroidism
 - b. Thyroiditis
 - c. Graves disease
 - d. Thyrotoxicosis factitia
7. Microvascular complications of diabetes are all EXCEPT:
 - a. Retinopathy
 - b. Peripheral arterial disease
 - c. Neuropathy
 - d. Nephropathy
8. In ADA criteria for diagnosis of Diabetes Mellitus, fasting plasma glucose level should be:
 - a. $\geq 120\text{mg/dl}$
 - b. $\geq 126\text{mg/dl}$
 - c. $\geq 130\text{mg/dl}$
 - d. $\geq 140\text{mg/dl}$
9. Mosquitoes are vectors in the following diseases:
 - a. Visceral Leishmaniasis
 - b. African Trypanosomiasis
 - c. Leptospirosis
 - d. Bancroftian filariasis
10. The following are recognized causes of eosinophilia EXCEPT:
 - a. Malaria
 - b. Churg-strauss syndrome
 - c. Drug Hypersensitivity
 - d. Toxocariasis
11. Blast cells percentage for diagnosis of acute Leukemia using WHO criteria:
 - a. 20%
 - b. 10%
 - c. 30%
 - d. None of the above
12. Hypochromic microcytic anemia is a recognized finding in:
 - a. Hemolytic anemia
 - b. Hypothyroidism
 - c. Primary sideroblastic anemia
 - d. Rheumatoid arthritis
13. Disease modifying anti rheumatic drugs (DMARD) in rheumatoid arthritis includes all except:
 - a. Sulphasalsazine
 - b. Naproxen
 - c. Azathioprine
 - d. D-penicillamine
14. Extra articular manifestations of rheumatoid arthritis include:
 - a. Peripheral neuropathy
 - b. Cutaneous ulceration
 - c. Pericardial and pleural effusion
 - d. All of above
15. Recognised causes of potassium depletion includes all EXCEPT:
 - a. Metabolic alkalosis
 - b. Corticosteroid treatment
 - c. Cardiac failure
 - d. Spironolactone therapy
16. The rate of correction of plasma sodium concentration in chronic asymptomatic hyponatremia should not exceed:
 - a. 5 mmol/L/day
 - b. 10 mmol/L/day
 - c. 15 mmol/L/day
 - d. 20 mmol/L/day
17. Hypocalcemia may manifest with all EXCEPT:
 - a. Carpopedal spasm
 - b. Stridor
 - c. Convulsions
 - d. Hypotonia

18. Niacin deficiency may manifest with all EXCEPT:

- a. Dermatitis
- b. Foot drop
- c. Diarrhoea
- d. Dementia

19. In obesity BMI is:

- a. $>15\text{kg/m}^2$
- b. $>20\text{kg/m}^2$
- c. $>25\text{kg/m}^2$
- d. $>30\text{kg/m}^2$

20. Micro albuminuria is characterized by-24-h excretion in urine of protein:

- a. 300-3500 mg/day
- b. 30-300mg/day
- c. $<30\text{mg/day}$
- d. $>3500\text{mg/day}$

21. Which of the following is not a cause of postrenal ARF?

- a. Ureteric calculi
- b. Prostatic hypertrophy
- c. Hepatorenal syndrome
- d. Neurogenic bladder

22. Kimmelstiel Wilson modules are characteristically seen in:

- a. RPGN
- b. Analgesic nephropathy
- c. Diabetic nephropathy
- d. Amyloidosis

23. Mitral valve prolapse is characterized by:-

- a. Early systolic murmur
- b. Mid systolic murmur
- c. Late systolic murmur
- d. Pansystolic murmur

24. Infective endocarditis may manifest with all EXCEPT:

- a. Splenomegaly
- b. Microscopic hematuria
- c. Hepatomegaly
- d. Roth's shots

M.B.B.S. FINAL PROF. PART-II EXAMINATION, MAY - 2016
MEDICINE
PAPER – FIRST (SAQ)

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given (½ x 24 = 12)
- Q. 2. Give Reasons:** (1 x 6 = 06)
- Serum G6PD levels are estimated before giving primaquine.
 - Megaloblastic anemia occurs due to vit-B12 deficiency.
 - Nephrotic syndrome leads to swelling of body.
 - Rate of correction of hyponatremia is kept below 10 meq/L in 24 hours.
 - Losing extra weight helps in achieving glycemic control in obese patients with diabetes mellitus.
 - Low salt intake is recommended for management of hypertension.
- Q. 3. Problem based question:** (1+2+3 = 06)
- A 65 year old male who is a known diabetic and hypertensive presents with retrosternal discomfort for last 8 months. The discomfort occurs on exertion and is relieved by taking rest.
- What is the most likely diagnosis?
 - Enumerate the investigations that need to be performed.
 - How will you treat this case?
- Q. 4. Write short notes:** (3 x 4 = 12)
- Microcytic hypochromic anemia
 - Criteria for diagnosis of Rheumatoid arthritis.
 - Management of hyperkalemia.
 - Subclinical hypothyroidism.
- Q. 5. Structured question:**
- Write the clinical features and management of cerebral malaria. (3+3 = 06)
 - Enumerate the causes and treatment of Acute glomerulonephritis. (3+3 = 06)
- Q. 6. Write in brief:** (3 x 4 = 12)
- Diagnosis of hemolytic anemia.
 - Treatment of gout.
 - Clinical features of vitamin A deficiency.
 - Hypoglycemic coma.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, MAY - 2016**MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET- A****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24=12)**

1. Thrombolytic therapy is generally given in acute myocardial infarction upto:
 - a. 1 hour
 - b. 6 hours
 - c. 18 hours
 - d. 36 hours
2. Reverse splitting of second heart sound is heard in:
 - a. LBBB
 - b. RBBB
 - c. Complete heart block
 - d. Congestive cardiomyopathy
3. The drug of choice for paroxysmal atrial tachycardia is:
 - a. Verapamil
 - b. Digoxin
 - c. Amiodarone
 - d. Adenosine
4. Libman sacks endocarditis is seen in:
 - a. SLE
 - b. Rheumatoid arthritis
 - c. Wegener's granulomatosis
 - d. Polyarteritis nodosa
5. Which one is NOT a cause of secondary hypertension?
 - a. Hypothyroidism
 - b. Renal artery stenosis
 - c. Coarctation of aorta
 - d. Addison's disease
6. ECG may show characteristic J waves in:
 - a. Hypothermia
 - b. Hypokalemia
 - c. Sea water drowning
 - d. Metabolic alkalosis
7. In diabetic ketoacidosis, arterial blood pH is:
 - a. > 7.45
 - b. From 7.35 to 7.4
 - c. From 7.41 to 7.45
 - d. < 7.35
8. Iron deficiency anemia leads to:
 - a. Koilonychia
 - b. Hepatosplenomegaly
 - c. Interstitial fibrosis
 - d. Alopecia
9. Hyperparathyroidism is associated with:
 - a. Hypocalcaemia
 - b. Chvostek's sign
 - c. Hyperglycemia
 - d. Renal stones
10. Hypercalcemia is treated by:
 - a. Rehydration with normal saline
 - b. Bisphosphonates
 - c. Forced diuresis
 - d. All of the above
11. Kimmelsteil Wilson bodies are a feature of:
 - a. Diabetic nephropathy
 - b. Analgesic nephropathy
 - c. Membranoproliferative glomerulonephritis
 - d. Alcoholic liver cirrhosis
12. Megaloblastic anemia occurs due to all EXCEPT:
 - a. Folate deficiency
 - b. Methotrexate
 - c. Sulfonamides
 - d. Aspirin
13. Antibodies for HIV after infection can be detected after:
 - a. 2 to 8 weeks
 - b. 3 months
 - c. 6 months
 - d. 9 months
14. Drug used for radical cure of malaria is:
 - a. Chloroquine
 - b. Primaquine
 - c. Artesunate
 - d. Mefloquine
15. Metabolic alkalosis refers to:
 - a. pH range of 7.35 to 7.45
 - b. Ingestion of excessive alkaline antacids
 - c. Excessive loss of bicarbonates
 - d. pH below 7.35
16. Which one of following is NOT a cause of nephrotic syndrome?
 - a. Sarcoidosis
 - b. Malaria
 - c. Minimal change disease
 - d. Hypokalemia
17. Small sized kidneys are seen in:
 - a. Chronic pyelonephritis
 - b. Renal amyloidosis
 - c. Diabetic nephropathy
 - d. Multiple myeloma
18. Boutonniere's deformity is seen in:
 - a. SLE
 - b. Rheumatoid arthritis
 - c. Gouty arthritis
 - d. Psoriatic arthritis

19. Colchicine is the drug of choice for:

- a. Reactive arthritis
- b. Rickets disease
- c. Acute gouty arthritis
- d. Rheumatoid arthritis

20. Hypothyroidism is associated with all EXCEPT:

- a. Constipation
- b. Pretibial myxoedema
- c. Cold intolerance
- d. Weight gain

21. Treatment of hyperkalemia does not include:

- a. Dextrose insulin infusion
- b. Calcium gluconate
- c. Magnesium sulfate
- d. Hemodialysis

22. All are features of addison's disease EXCEPT:

- a. Hypotension
- b. Hyperpigmentation
- c. Weakness
- d. Hyperglycemia

23. Diabetes insipidus occurs due to deficiency of:

- a. Antidiuretic hormone
- b. Glucagon
- c. ACTH
- d. TSH

24. Capillary microaneurysms are seen in:

- a. Hypertensive retinopathy
- b. Diabetic retinopathy
- c. Cavernous hemangioma
- d. Chronic liver disease

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016
GENERAL MEDICINE
PAPER – SECOND (SAQ)

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.

Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given ($\frac{1}{2} \times 24 = 12$)
- Q. 2.** Give Reasons: (1 x 6 = 06)
- Lactulose is given in the management of hepatic encephalopathy.
 - Adrenaline is used as drug of choice in anaphylactic shock.
 - Tubercular lesions are commonly seen in upper lobes.
 - Spirometry is an essential investigation in diagnosis and management of bronchial asthma.
 - Heat stroke results in high temperature.
 - Pontine bleed is associated with pin point pupils.
- Q. 3.** Problem based question: (1+2+1+1+1= 06)
- A 25 years old male presented with progressive weakness of both lower limbs associated with paraesthesia over last 4 days. He had an episode of diarrhea a week back which subsided by its own. He also complained of difficulty in handling the oral secretion. His bowel, bladder control was intact.
- What is the most probable diagnosis?
 - Give subtypes of the diagnosis.
 - Enumerate clinical features of the diagnosis.
 - If CSF is done in this patient, what will be the probable findings?
 - Outline management of the case.
- Q. 4.** Write short notes on: (3 x 4 = 12)
- Renal replacement therapy.
 - Classification of seizures.
 - Extra intestinal manifestations of inflammatory bowel disease.
 - Treatment of Amoebic liver abscess.
- Q. 5.** Structured Question:
- Enumerate etiopathogenesis, clinical features & complications of chronic viral hepatitis and medical management of hepatitis B. (1+2+2+1= 06)
 - Enumerate the clinical features and medical management of tension pneumothorax. (06)
- Q. 6.** Write in brief about: (3 x 4 = 12)
- Courvoisier's law.
 - Typical findings of CSF in pyogenic meningitis.
 - Diagnostic criteria of Multiple sclerosis.
 - Anemia in chronic kidney disease

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016
GENERAL MEDICINE
PAPER – SECOND (MCQ)

Time allotted for MCQ – 25 minutes**SET - B****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24=12)**

1. Signs of meningeal irritation is seen commonly in the following conditions EXCEPT:
 - a. Subarachnoid hemorrhage
 - b. Bacterial Meningitis
 - c. Cerebral malaria
 - d. Viral Encephalitis
2. Fixed and dilated pupils may be seen in the following EXCEPT:
 - a. Mid brain lesions
 - b. Impending brain death
 - c. Opiate poisoning
 - d. Atropine poisoning
3. Lower motor neuron facial palsy is characterized by:
 - a. Uniform involvement of one half of face
 - b. Sparing of upper part of face
 - c. Failure to close both eyelids
 - d. Sparing of lower half of face
4. High steppage gait is seen in:
 - a. LMN disease
 - b. Aging
 - c. Dystonia
 - d. Sensory ataxia
5. Cerebellar disorder is characterized by all of the following EXCEPT:
 - a. Kinetic tremor
 - b. Ataxia
 - c. Hypertonia
 - d. Nystagmus
6. A young patient with dysphagia more for liquids than solids; He regurgitates food often at night. Radiography shows a parrot beak appearance. Likely diagnosis is:
 - a. Achlasia cardia
 - b. CA oesophagus
 - c. Zenker's diverticulum
 - d. Diffuse esophageal spasm
7. Toxic megacolon is most commonly associated with:
 - a. Ulcerative colitis
 - b. Crohn's disease
 - c. Whipple's disease
 - d. Reiter's disease
8. Alpha-1 antiproteinase deficiency leads to:
 - a. Chronic bronchitis
 - b. Emphysema
 - c. Pneumonia
 - d. Bronchiectasis
9. Dullness of chest percussion may not be seen in:
 - a. Haemothorax
 - b. Pleural effusion
 - c. Pneumothorax
 - d. Pneumonia
10. LMN lesion may produce the following abnormal movements:
 - a. Convulsions
 - b. Myoclonus
 - c. Fasciculation
 - d. Chorea
11. Ranson's criteria for prognosis in acute pancreatitis include all EXCEPT:
 - a. WBC > 16,000 cells /cumm
 - b. Age over 55 years
 - c. AST > 250 U/ 100 ml
 - d. S -Amylase > 350 I.U
12. Which of the following structures have been implicated in the generation of sleep?
 - a. Brain stem Reticular formation
 - b. Mid brain
 - c. Subthalamus
 - d. Basal forebrain
13. Lack of insight is not a feature of:
 - a. Panic disorder
 - b. Schizophrenia
 - c. Mania
 - d. Reactive psychosis
14. Clubbing is not seen in:
 - a. Cyanotic heart disease
 - b. Bronchiectasis
 - c. Ulcerative colitis
 - d. Mitral stenosis
15. Appreciation of an object without it being present actually is:
 - a. Illusion
 - b. Delusion
 - c. Hallucination
 - d. Delirium
16. Intestinal perforation in typhoid occurs in:
 - a. 1st week
 - b. 2nd week
 - c. 3rd week
 - d. 4th week
17. All of the following are features of raised intracranial tension EXCEPT:
 - a. Headache
 - b. Projectile vomiting
 - c. Diplopia
 - d. Neck rigidity

P.T.O...

18. Mallory-weiss syndrome is because of :

- a. Esophageal varices
- b. Gastric ulcer
- c. Tear in mucosa at gastro-esophageal junction
- d. Tear in gastric mucosa

19. Gluten free diet is the treatment of:

- a. Coeliac disease
- b. Giardiasis
- c. Intestinal amoebiasis
- d. Crohn's disease

20. All of the following are features of emphysema EXCEPT:

- a. Barrel shaped chest
- b. Displaced trachea
- c. Decreased air entry
- d. Polycythemia

21. Which hepatitis virus has worst prognosis in pregnancy?

- a. HBV
- b. HCV
- c. HEV
- d. HAV

22. UMN lesion is characterized by:

- a. Weakness & Spasticity
- b. Fasciculations
- c. Rigidity
- d. Localized muscle atrophy

23. Cell type in Zollinger-Ellison Syndrome is:

- a. Enterochromaffin
- b. Islet D cells
- c. Islet A cells
- d. Duodenal G cells

24. Amphoric bronchial breathing is audible in:

- a. Consolidation
- b. Asthma
- c. Cavity
- d. Bronchopneumonia

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016
GENERAL MEDICINE
PAPER – SECOND (MCQ)

Time allotted for MCQ – 25 minutes**SET - C**

- Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24=12)**
1. Toxic megacolon is most commonly associated with:
 - a. Ulcerative colitis
 - b. Crohn's disease
 - c. Whipple's disease
 - d. Reiter's disease
 2. Alpha-1 antiproteinase deficiency leads to:
 - a. Chronic bronchitis
 - b. Emphysema
 - c. Pneumonia
 - d. Bronchiectasis
 3. Dullness of chest percussion may not be seen in:
 - a. Haemothorax
 - b. Pleural effusion
 - c. Pneumothorax
 - d. Pneumonia
 4. LMN lesion may produce the following abnormal movements:
 - a. Convulsions
 - b. Myoclonus
 - c. Fasciculation
 - d. Chorea
 5. Ranson's criteria for prognosis in acute pancreatitis include all EXCEPT:
 - a. WBC > 16,000 cells /cumm
 - b. Age over 55 years
 - c. AST > 250 U/ 100 ml
 - d. S -Amylase > 350 I.U
 6. Which of the following structures have been implicated in the generation of sleep?
 - a. Brain stem Reticular formation
 - b. Mid brain
 - c. Subthalamus
 - d. Basal forebrain
 7. Lack of insight is not a feature of:
 - a. Panic disorder
 - b. Schizophrenia
 - c. Mania
 - d. Reactive psychosis
 8. Clubbing is not seen in:
 - a. Cyanotic heart disease
 - b. Bronchiectasis
 - c. Ulcerative colitis
 - d. Mitral stenosis
 9. Appreciation of an object without it being present actually is:
 - a. Illusion
 - b. Delusion
 - c. Hallucination
 - d. Delirium
 10. Intestinal perforation in typhoid occurs in:
 - a. 1st week
 - b. 2nd week
 - c. 3rd week
 - d. 4th week
 11. All of the following are features of raised intracranial tension EXCEPT:
 - a. Headache
 - b. Projectile vomiting
 - c. Diplopia
 - d. Neck rigidity
 12. Mallory-weiss syndrome is because of:
 - a. Esophageal varices
 - b. Gastric ulcer
 - c. Tear in mucosa at gastro-esophageal junction
 - d. Tear in gastric mucosa
 13. Gluten free diet is the treatment of:
 - a. Coeliac disease
 - b. Giardiasis
 - c. Intestinal amoebiasis
 - d. Crohn's disease
 14. All of the following are features of emphysema EXCEPT:
 - a. Barrel shaped chest
 - b. Displaced trachea
 - c. Decreased air entry
 - d. Polycythemia
 15. Which hepatitis virus has worst prognosis in pregnancy?
 - a. HBV
 - b. HCV
 - c. HEV
 - d. HAV
 16. UMN lesion is characterized by:
 - a. Weakness & Spasticity
 - b. Fasciculations
 - c. Rigidity
 - d. Localized muscle atrophy
 17. Cell type in Zollinger-Ellison Syndrome is:
 - a. Enterochromaffin
 - b. Islet D cells
 - c. Islet A cells
 - d. Duodenal G cells
 18. Amphoric bronchial breathing is audible in:
 - a. Consolidation
 - b. Asthma
 - c. Cavity
 - d. Bronchopneumonia

19. Signs of meningeal irritation is seen commonly in the following conditions EXCEPT:
- Subarachnoid hemorrhage
 - Bacterial Meningitis
 - Cerebral malaria
 - Viral Encephalitis
20. Fixed and dilated pupils may be seen in the following EXCEPT:
- Mid brain lesions
 - Impending brain death
 - Opiate poisoning
 - Atropine poisoning
21. Lower motor neuron facial palsy is characterized by:
- Uniform involvement of one half of face
 - Sparing of upper part of face
 - Failure to close both eyelids
 - Sparing of lower half of face
22. High steppage gait is seen in:
- LMN disease
 - Aging
 - Dystonia
 - Sensory ataxia

23. Cerebellar disorder is characterized by all of the following EXCEPT:
- Kinetic tremor
 - Ataxia
 - Hypertonia
 - Nystagmus
24. A young patient with dysphagia more for liquids than solids; He regurgitates food often at night. Radiography shows a parrot beak appearance. Likely diagnosis is:
- Achlasia cardia
 - CA oesophagus
 - Zenker's diverticulum
 - Diffuse esophageal spasm

M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY/ MARCH - 2016**GENERAL MEDICINE
PAPER – SECOND (MCQ)****Time allotted for MCQ – 25 minutes****SET - D****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24=12)**

1. Which of the following structures have been implicated in the generation of sleep?
 - a. Brain stem Reticular formation
 - b. Mid brain
 - c. Subthalamus
 - d. Basal forebrain
2. Lack of insight is not a feature of :
 - a. Panic disorder
 - b. Schizophrenia
 - c. Mania
 - d. Reactive psychosis
3. Clubbing is not seen in:
 - a. Cyanotic heart disease
 - b. Bronchiectasis
 - c. Ulcerative colitis
 - d. Mitral stenosis
4. Appreciation of an object without it being present actually is:
 - a. Illusion
 - b. Delusion
 - c. Hallucination
 - d. Delirium
5. Intestinal perforation in typhoid occurs in:
 - a. 1st week
 - b. 2nd week
 - c. 3rd week
 - d. 4th week
6. All of the following are features of raised intracranial tension EXCEPT:
 - a. Headache
 - b. Projectile vomiting
 - c. Diplopia
 - d. Neck rigidity
7. Mallory-weiss syndrome is because of :
 - a. Esophageal varices
 - b. Gastric ulcer
 - c. Tear in mucosa at gastro-esophageal junction
 - d. Tear in gastric mucosa
8. Gluten free diet is the treatment of:
 - a. Coeliac disease
 - b. Giardiasis
 - c. Intestinal amoebiasis
 - d. Crohn's disease
9. All of the following are features of emphysema EXCEPT:
 - a. Barrel shaped chest
 - b. Displaced trachea
 - c. Decreased air entry
 - d. Polycythemia
10. Which hepatitis virus has worst prognosis in pregnancy?
 - a. HBV
 - b. HCV
 - c. HEV
 - d. HAV
11. UMN lesion is characterized by:
 - a. Weakness & Spasticity
 - b. Fasciculations
 - c. Rigidity
 - d. Localized muscle atrophy
12. Cell type in Zollinger-Ellison Syndrome is:
 - a. Enterochromaffin
 - b. Islet D cells
 - c. Islet A cells
 - d. Duodenal G cells
13. Amphoric bronchial breathing is audible in:
 - a. Consolidation
 - b. Asthma
 - c. Cavity
 - d. Bronchopneumonia
14. Signs of meningeal irritation is seen commonly in the following conditions EXCEPT:
 - a. Subarachnoid hemorrhage
 - b. Bacterial Meningitis
 - c. Cerebral malaria
 - d. Viral Encephalitis
15. Fixed and dilated pupils may be seen in the following EXCEPT:
 - a. Mid brain lesions
 - b. Impending brain death
 - c. Opiate poisoning
 - d. Atropine poisoning
16. Lower motor neuron facial palsy is characterized by:
 - a. Uniform involvement of one half of face
 - b. Sparing of upper part of face
 - c. Failure to close both eyelids
 - d. Sparing of lower half of face
17. High steppage gait is seen in:
 - a. LMN disease
 - b. Aging
 - c. Dystonia
 - d. Sensory ataxia
18. Cerebellar disorder is characterized by all of the following EXCEPT:
 - a. Kinetic tremor
 - b. Ataxia
 - c. Hypertonia
 - d. Nystagmus

19. A young patient with dysphagia more for liquids than solids; He regurgitates food often at night. Radiography shows a parrot beak appearance. Likely diagnosis is:

- a. Achlasia cardia
- b. CA oesophagus
- c. Zenker's diverticulum
- d. Diffuse esophageal spasm

20. Toxic megacolon is most commonly associated with:

- a. Ulcerative colitis
- b. Crohn's disease
- c. Whipple's disease
- d. Reiter's disease

21. Alpha-1 antiproteinase deficiency leads to:

- a. Chronic bronchitis
- b. Emphysema
- c. Pneumonia
- d. Bronchiectasis

22. Dullness of chest percussion may not seen in:

- a. Haemothorax
- b. Pleural effusion
- c. Pneumothorax
- d. Pneumonia

23. LMN lesion may produce the following abnormal movements:

- a. Convulsions
- b. Myoclonus
- c. Fasciculation
- d. Chorea

24. Ranson's criteria for prognosis is acute pancreatitis include all EXCEPT:

- a. WBC > 16,000 cells /cumm
- b. Age over 55 years
- c. AST > 250 U/ 100 ml
- d. S -Amylase > 350 I.U

M.B.B.S. FINAL PROF. PART-II EXAMINATION, MAY - 2016**MEDICINE****PAPER – SECOND (SAQ)****[Time allotted: Three hours]****[Max Marks: 60]****Note:** Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given**(½ x 24 = 12)****Q. 2. Give Reason:****(1 x 6 = 06)**

- a. Haematemesis occurs in portal hypertension
- b. Clubbing occurs in lung abscess
- c. Anuria occurs in shock
- d. Sparing of upper half of face occurs in supranuclear facial palsy
- e. Tension pneumothorax is life-threatening
- f. Neck rigidity occurs in meningitis

Q. 3. Problem based question:**(2+2+2= 06)**

A 50 year old female presents with joint pain affecting 6 small joint areas (sparing the distal inter-phalangeal joints) since 1 year with morning stiffness of 1 hour duration.

- a. Enumerate the various deformities that are expected in this lady.
- b. Enumerate the investigations that need to be performed for diagnosing and monitoring the disease.
- c. Enumerate the drugs that may be used in this patient.

Q. 4. Write short notes on:**(3 x 4 = 12)**

- a. Abnormal movements of body
- b. Child-Pugh score
- c. Clinical features of aluminium phosphide poisoning
- d. Psoriasis

Q. 5. Structured Question:

(i) Discuss the etiopathogenesis, clinical features and management of chronic obstructive airway disease. **(06)**

(ii) Briefly describe the clinical features, investigations and treatment of tuberculous meningitis. **(06)**

Q. 6. Write in brief about:**(3 x 4 = 12)**

- a. Deep vein thrombosis
- b. Neurogenic shock
- c. Spontaneous bacterial peritonitis
- d. Evaluation of acute pancreatitis

M.B.B.S. FINAL PROF. PART-II EXAMINATION, MAY - 2016**MEDICINE****PAPER – SECOND (MCQ)****Time allotted for MCQ – 25 minutes****SET - B****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet)****(0.5 x 24=12)**

1. The molecular abnormality in CML is because of:
 - a. Translocation 9, 11
 - b. Translocation 11, 15
 - c. Translocation 9, 22
 - d. Deletion 13
2. Pneumatocele is most commonly seen in:
 - a. Pneumococcal Pneumonia
 - b. Staphylococcal Pneumonia
 - c. H. Influenzae Pneumonia
 - d. Viral Pneumonia
3. Specific test for syphilis is:
 - a. Weil felix test
 - b. VDRL test
 - c. Mantoux test
 - d. Widal test
4. Copper-red hyperpigmentation is caused by the following anti-leprosy drug:
 - a. Dapsone
 - b. Rifampicin
 - c. Clofazamine
 - d. Minocycline
5. Chromosomal studies can be performed by:
 - a. Peripheral blood
 - b. Amniotic fluid
 - c. Bone marrow
 - d. All of the above
6. Which one of following is transmitted in autosomal recessive manner?
 - a. Huntington's disease
 - b. Myotonic dystrophy
 - c. Wilson's disease
 - d. Duchenne's muscular dystrophy
7. Lithium is mostly used in the prophylaxis of:
 - a. Hysterical conversion reaction
 - b. Schizophrenia
 - c. Bipolar MDR
 - d. Anxiety neurosis
8. Target lesions are typically seen in:
 - a. Erythema nodosum
 - b. Erythema multiforme
 - c. SLE
 - d. Rheumatoid arthritis
9. All of the following are features of raised intracranial tension EXCEPT:
 - a. Headache
 - b. Projectile vomiting
 - c. Diplopia
 - d. Neck rigidity
10. Mallory-Weiss syndrome is because of:
 - a. Esophageal varices
 - b. Gastric ulcer
 - c. Tear in mucosa at gastro-esophageal junction
 - d. Tear in gastric mucosa
11. The commonest form of intracranial neoplasm is:
 - a. Meningioma
 - b. Acoustic neuroma
 - c. Glioma
 - d. Angioma
12. Which is true for Klinefelter's syndrome?
 - a. Normal male
 - b. Hypoplastic uterus
 - c. Has uterus, vagina and one fallopian tube
 - d. 46 XXY
13. Gluten free diet is the treatment of:
 - a. Coeliac disease
 - b. Giardiasis
 - c. Intestinal amoebiasis
 - d. Crohn's disease
14. Which one of the following causes iron deficiency anaemia?
 - a. Hookworm
 - b. Tapeworm
 - c. Pinworm
 - d. Liver fluke
15. Myasthenia gravis is usually associated with:
 - a. Hyperparathyroidism
 - b. Thymoma
 - c. Thyroid adenoma
 - d. Thyroid carcinoma
16. Following are the causes of exudative pleural effusion EXCEPT:
 - a. Tuberculosis
 - b. Malignancy
 - c. Pneumonia
 - d. Congestive heart failure
17. Risus sardonicus is a feature of:
 - a. Myasthenia gravis
 - b. Bell's palsy
 - c. Tetanus
 - d. Rabies
18. Horner's syndrome is not characterized by:
 - a. Miosis
 - b. Ptosis
 - c. Mydriasis
 - d. Decreased sweating

19. Which of the following drugs can cause Parkinsonism?

- a. Barbiturates
- b. Phenothiazines
- c. Sulphonamides
- d. Thiazides

20. All of the following are features of emphysema EXCEPT:

- a. Barrel shaped chest
- b. Displaced trachea
- c. Decreased air entry
- d. Polycythemia

21. Lower motor neuron facial palsy is characterized by:

- a. Uniform involvement of one half of face
- b. Sparing of upper part of face
- c. Failure to close both eyelids
- d. Sparing of lower half of face

22. Mask like face is seen in:

- a. Disseminated sclerosis
- b. Parkinsonism
- c. Motor neuron disease
- d. Cerebral stroke

23. The venom of cobra is:

- a. Hematotoxic
- b. Neurotoxic
- c. Hepatotoxic
- d. Nephrotoxic

24. Treatment of withdrawal tremor of alcohol is:

- a. Chlorpromazine
- b. Naloxone
- c. Diazepam
- d. Propranolol

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2017**MEDICINE
PAPER – FIRST (SAQ)****[Time allotted: Three hours]****[Max Marks: 60]****Note:** - Attempt all Questions.

Draw suitable diagrams wherever necessary.

Q. 1. Multiple choice questions- separate sheet given**($\frac{1}{2} \times 24 = 12$)****Q. 2.** Give Reasons:**(1 x 6 = 06)**

- a. Absence of 'a' wave in JVP in atrial fibrillation.
- b. Use of beta-blockers in acute myocardial infarction patients.
- c. Prolonged aPTT in Hemophilia A.
- d. Relative polycythemia in Dengue hemorrhagic fever.
- e. Presence of RBC casts in urine in AKI.
- f. Presence of Tamm-Horsfall proteins in urine.

Q. 3. Problem based question:**(1+1+1+1+2 = 06)**

A 65- year-old hypertensive male patient presented with complaints of severe retrosternal pain with profuse sweating of 2 hours duration.

- a. What is the most likely diagnosis?
- b. Enumerate possible complications in this case.
- c. Enumerate the investigations that need to be performed.
- d. What are the ECG findings expected in this case?
- e. How will you treat this case?

Q. 4. Write short notes:**(3 x 4 = 12)**

- a. Pharmacotherapy in obesity
- b. Reiter's syndrome
- c. Hypocalcemia
- d. Diagnostic tests for malaria

Q. 5. Structured question:

(i) Clinical features and management of acute kidney injury.

(3+3 = 06)

(ii) Diagnosis of infective endocarditis.

(06)**Q. 6.** Write in brief:**(3 x 4 = 12)**

- a. Hypoglycemia
- b. Diabetic retinopathy
- c. Treatment of Chronic myeloid leukemia
- d. High anion gap acidosis

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2017**MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET- D****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet) (0.5 x 24=12)**

1. Microcytic hypochromic anemia is seen in all except:
 - a. Iron deficiency
 - b. Sideroblastic anemia
 - c. Thalassemia
 - d. Sickle cell anemia
2. Hemoglobinuria is seen in all except:
 - a. Mismatched blood transfusion
 - b. Paroxysmal nocturnal hemoglobinuria
 - c. Snake bite
 - d. Hereditary spherocytosis
3. Polycythemia vera is suspected in men if hematocrit is more than:
 - a. 40%
 - b. 43%
 - c. 46%
 - d. 52%
4. Philadelphia chromosome is positive in:
 - a. Chronic myeloid leukemia
 - b. Acute myeloid leukemia
 - c. Myelofibrosis
 - d. Acute lymphoblastic leukemia
5. All are manifestations of hypothyroidism except:
 - a. Constipation
 - b. Weight gain
 - c. Heat intolerance
 - d. Carpal tunnel syndrome
6. Alkaline phosphatase level is increased in all except:
 - a. Multiple myeloma
 - b. Rickets
 - c. Hyperparathyroidism
 - d. Osteomalacia
7. For diagnosis of diabetes mellitus, fasting blood sugar should be more than:
 - a. 100 mg/dl
 - b. 110 mg/dl
 - c. 116mg/dl
 - d. 126 mg/dl
8. Wernicke's encephalopathy is characterized by all except:
 - a. Global confusion
 - b. Ophthalmoplegia
 - c. Ataxia
 - d. Cogwheel rigidity
9. Subacute combined degeneration of spinal cord occurs due to deficiency of:
 - a. Vitamin B1
 - b. Vitamin B6
 - c. Folic acid
 - d. Vitamin B12
10. Following are the features of pheochromocytoma except:
 - a. Hypertension
 - b. Palpitations
 - c. Headache
 - d. Wheezing
11. Addison's disease is characterized by all except:
 - a. Hypotension
 - b. Hypoglycemia
 - c. Hyperkalemia
 - d. Weight gain
12. For radical cure of malaria, the drug used is:
 - a. Chloroquine
 - b. Primaquine
 - c. Quinine
 - d. Mefloquine
13. All are features of nephrotic syndrome except:
 - a. Proteinuria
 - b. Hypercholesterolemia
 - c. Anasarca
 - d. Decreased fibrinogen level
14. Sterile pyuria is characteristically seen in:
 - a. Renal tuberculosis
 - b. Acute pyelonephritis
 - c. Neuroblastoma
 - d. Wilm's tumour
15. Dialysis can reverse all except:
 - a. Hyperkalemia
 - b. Pericarditis
 - c. Neuropathy
 - d. Pulmonary oedema
16. Water hammer pulse is seen in:
 - a. Aortic stenosis
 - b. Aortic regurgitation
 - c. Mitral stenosis
 - d. Aortic stenosis and aortic regurgitation
17. Drug useful in acute myocardial infarction are all except:
 - a. Nifedipine
 - b. Aspirin
 - c. Metoprolol
 - d. ACE-inhibitors

18. All of the following are ECG changes in hypokalemia except:
- U wave
 - ST segment sagging
 - T wave flattening
 - QT interval prolongation
19. Ankylosing spondylitis is associated with:
- HLA-B8
 - HLA-B27
 - HLA-DR3
 - HLA-DW4
20. Which of the following drugs is not used for acute gout?
- NSAIDS
 - Colchicine
 - Allopurinol
 - Glucocorticoids
21. Lupus pernio is seen in:
- Tuberculosis
 - SLE
 - Polyarteritis nodosa
 - Sarcoidosis

22. Rapid infusion of insulin causes:
- Hyperkalemia
 - Hypokalemia
 - Hypernatremia
 - Hyponatremia
23. Metabolic alkalosis is seen in all except:
- Vomiting
 - Hyperkalemia
 - Liddle's syndrome
 - Bartter's syndrome
24. Tetany is seen in:
- Respiratory alkalosis
 - Respiratory acidosis
 - Metabolic acidosis
 - Hyperkalemia

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2017
MEDICINE
PAPER – SECOND (SAQ)

[Time allotted: Three hours]

[Max Marks: 60]

Note: Attempt all Questions.
 Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given ($\frac{1}{2} \times 24 = 12$)
- Q. 2. Give Reason:** (1 x 6 = 06)
- Why is muscle tone increased in upper motor neuron lesions.
 - Why does hematemesis occurs in cirrhosis of liver.
 - Why is there ascitis in cirrhosis.
 - Why are stools clay coloured in obstructive jaundice.
 - Why do COPD patients have polycythemia.
 - Why do we give atropine in organophosphorus poisoning.
- Q. 3. Problem based question:** (1 x 6 = 06)
- A 50 years old male, chronic alcoholic, consumes 500 ml of whisky per day for twenty years presented with pain in abdomen, right hypochondrium followed by distension of abdomen and altered behavior. He has a history of one episode of hematemesis six months back following which he was asymptomatic.
- What could be the diagnosis?
 - What could be the cause of his pain abdomen?
 - What else we need to ask in history to reach to the diagnosis we made in 'a'.
 - What investigations we need to do in this case?
 - How will we manage this case right now?
 - What further advise will we give at the time of discharge?
- Q. 4. Write short notes on:** (3 x 4 = 12)
- Dysphagia
 - GBS
 - Snake bite
 - ARDS
- Q. 5. Structured Question:**
- Discuss etiopathogenesis, clinical features and management of community acquired pneumonia. (06)
 - Discuss the management of Acute Pancreatitis. (06)
- Q. 6. Write in brief about:** (3 x 4 = 12)
- Major depressive disorder.
 - Indications and contraindications of lumbar puncture.
 - Adverse effects of first line anti-tubercular drugs.
 - Differential diagnosis of fever with right hypochondrial pain with enlarged tender liver.

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY - 2017**MEDICINE****PAPER – SECOND (MCQ)****Time allotted for MCQ – 25 minutes****SET - D****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet)****(0.5 x 24=12)**

1. Chronic active hepatitis is most reliably distinguished from autoimmune hepatitis by the presence of:
 - a. Extra hepatic manifestations
 - b. Hepatitis B surface antigen
 - c. Anti dsDNA antibody
 - d. Characteristic liver histology
2. Which of the following structures have been implicated in the generation of sleep?
 - a. Brain stem Reticular formation
 - b. Mid brain
 - c. Subthalamus
 - d. Basal forebrain
3. A person who laughs one minute and cries the next without any clear stimulus is said to have:
 - a. Incongruent affect
 - b. Euphoria
 - c. Labile affect
 - d. Split personality
4. Appreciation of an object without it being present actually is:
 - a. Illusion
 - b. Delusion
 - c. Hallucination
 - d. Delirium
5. Amphoric bronchial breathing is audible in:
 - a. Consolidation
 - b. Asthma
 - c. Cavity
 - d. Broncho pleural fistula
6. Alpha-1 antitrypsin deficiency leads to:
 - a. Chronic bronchitis
 - b. Emphysema
 - c. Pneumonia
 - d. Bronchiectasis
7. Which hepatitis virus has worst prognosis in pregnancy?
 - a. HBV
 - b. HCV
 - c. HEV
 - d. HAV
8. UMN lesion is characterized by:
 - a. Weakness & Spasticity
 - b. Fasciculations
 - c. Rigidity
 - d. Localized muscle atrophy
9. H. pylori is known to cause all of the following except:
 - a. Gastric ulcer
 - b. Duodenal ulcer
 - c. Gastric lymphoma
 - d. Fundal atrophic gastritis
10. Signs of meningeal irritation is seen commonly in the following conditions except:
 - a. Subarachnoid hemorrhage
 - b. Bacterial Meningitis
 - c. Cerebral malaria
 - d. Tubercular meningitis
11. True about type I respiratory failure is:
 - a. Decreased $P_a O_2$
 - b. Decreased $P_a CO_2$
 - c. Increased $P_a CO_2$
 - d. Increased Carboxyhaemoglobin
12. Lower motor neuron facial palsy is characterized by:
 - a. Uniform involvement of one half of face
 - b. Sparing of upper part of face
 - c. Failure to close both eyelids
 - d. Sparing of lower half of face
13. High steppage gait is seen in:
 - a. LMN disease
 - b. Aging
 - c. Dystonia
 - d. Sensory ataxia
14. Lower motor neuron lesions are associated:
 - a. Flaccid paralysis
 - b. Hyperactive stretch reflex
 - c. Spasticity
 - d. Muscular in-coordination
15. Fixed and dilated pupils may be seen in the following except:
 - a. Mid brain lesion
 - b. Impending brain death
 - c. Opiate poisoning
 - d. Atropine poisoning

16. The usual mode of Death in Opiate Poisoning is:

- a. Renal failure
- b. Hepatic Encephalopathy
- c. Respiratory Depression
- d. MI

17. Dullness of chest percussion may not seen in:

- a. Haemothorax
- b. Pleural effusion
- c. Pneumothorax
- d. Pneumonia

18. In scabies, lesions formed are:

- a. Vesicle
- b. Bullae
- c. Excoriation
- d. Crust

19. Which of the following drugs can cause Parkinsonism?

- a. Barbiturates
- b. Phenothiazines
- c. Sulphonamides
- d. Thiazides

20. Toxic megacolon is most commonly associated with:

- a. Ulcerative colitis
- b. Crohn's disease
- c. Whipple's disease
- d. Reiter's disease

21. All of the following are true about temporal arthritis except:

- a. Polymyalgia Rheumatica
- b. Anemia
- c. Low ESR
- d. Sudden blindness

22. Best test for small intestine malabsorption of carbohydrates is:

- a. Lundh meal test
- b. Shilling test
- c. D-Xylose test
- d. Follacin test

23. Which of the following is genetically determined disease?

- a. Thrombocytopenia
- b. Haemophilia
- c. Polycythemia
- d. Megaloblastic Anaemia

24. The venom of cobra is:

- a. Hematotoxic
- b. Neurotoxic
- c. Hepatotoxic
- d. Nephrotoxic

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2017**MEDICINE
PAPER – FIRST (SAQ)****[Time allotted: Three hours]****[Max Marks: 60]****Note:** Attempt all Questions.

Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given (½ x 24 = 12)
- Q. 2.** Give reasons for: (1 x 6 = 06)
- Cannon waves in JVP.
 - Absence of 'P' waves in ECG.
 - Giving Nitroglycerine in acute myocardial infarction.
 - Low haptoglobin levels in hemolytic anemia.
 - Hypercoagulability in APLA syndrome.
 - Metabolic alkalosis in vomiting.
- Q. 3.** Problem based question: (1+2+3 = 06)
- A 30 year old hypertensive male patient presented with sudden onset of breathlessness and sweating. Blood pressure was 220/120 mm Hg at presentation.
- What is the most likely diagnosis?
 - Enumerate the investigations that need to be performed.
 - How will you treat this case?
- Q. 4.** Write short notes on: (3 x 4 = 12)
- Tetany
 - Secondary prophylaxis of rheumatic fever
 - Diabetic nephropathy
 - Cushing's syndrome
- Q. 5.** Structured question:
- Describe the clinical features and management of hyperkalemia. (3+3 = 06)
 - Discuss the diagnosis of multiple myeloma. (06)
- Q. 6.** Write in brief: (3 x 4 = 12)
- Rapidly progressive glomerulonephritis
 - Thyroid crisis
 - Thiamine deficiency
 - Clinical presentation of enteric fever

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2017**MEDICINE****PAPER – FIRST (MCQ)****Time allotted for MCQ – 25 minutes****SET- B**

- Q. 1. Multiple choice questions (Darken the single best response in OMR sheet) (0.5 x 24 = 12)**
- Secondary polycythemia is seen in all **except**:
 - Chronic cor pulmonale
 - Smoking
 - High altitude
 - Cyanotic congenital heart disease
 - Leucocyte alkaline phosphatase is increased in all **except**:
 - Myeloid metaplasia
 - Polycythemia vera
 - Chronic myeloid leukemia
 - Myelofibrosis
 - Hung up ankle jerk is typical of:
 - Hypomagnesemia
 - Hypothyroidism
 - Addison's disease
 - Hyponatremia
 - Capillary microaneurysms are typically seen in:
 - Vitamin A deficiency
 - Diabetic retinopathy
 - Hypertension
 - Infective endocarditis
 - Diabetic ketoacidosis is characterized by all **except**:
 - Severe dehydration
 - Increased serum bicarbonate
 - High blood glucose
 - Ketonuria
 - The amino acid associated with atherosclerosis is:
 - Alanine
 - Lysine
 - Homocysteine
 - Cysteine
 - Vitamin B₆ deficiency is associated with all of the following **except**:
 - Penicillamine
 - Isoniazid
 - Alcohol
 - Cyclosporine
 - Acrodermatitis enteropathica is associated with:
 - Iron deficiency
 - Zinc deficiency
 - Copper deficiency
 - Magnesium deficiency
 - Step ladder pattern of fever is seen in:
 - Malaria
 - Dengue fever
 - Kala-azar
 - Enteric fever
 - Dysmorphic RBCs in urine suggest:
 - Renal tuberculosis
 - Glomerular disease
 - Pyelonephritis
 - Coagulopathy
 - Shrunk kidneys are seen in all **except**:
 - Fanconi's syndrome
 - Chronic glomerulonephritis
 - Chronic pyelonephritis
 - Benign nephrosclerosis
 - All are indications for dialysis **except**:
 - Hyperphosphatemia
 - Hyperkalemia
 - Severe metabolic acidosis
 - Pulmonary oedema
 - Pulsus bisferiens is best felt in:
 - Femoral artery
 - Carotid artery
 - Brachial artery
 - Radial artery
 - ST elevation is seen in all of the following conditions **except**:
 - Constrictive pericarditis
 - Myocardial infarction
 - Acute pericarditis
 - Ventricular aneurysm
 - Major criteria of rheumatic fever are all **except**:
 - Fever
 - Carditis
 - Arthritis
 - Chorea
 - All of the following are diagnostic criteria of SLE **except**:
 - Thrombocytosis
 - ANA
 - Anti-dsDNA
 - Proteinuria > 500 mg/day
 - Anti-CCP antibodies are useful in diagnosis of:
 - Gouty arthritis
 - Scleroderma
 - Psoriatic arthritis
 - Rheumatoid arthritis
 - Gout can be precipitated by all **except**:
 - Salicylates
 - Thiazide diuretics
 - Ethanol
 - Pyrazinamide

19. High anion gap is seen in all **except**:

- a. Diarrhoea
- b. Diabetic ketoacidosis
- c. Starvation
- d. Lactic acidosis

20. Hypokalemia is seen with:

- a. Addison's disease
- b. Metabolic acidosis
- c. Furosemide
- d. Amiloride

21. Chvostek's sign is seen in:

- a. Hypokalemia
- b. Hyponatremia
- c. Hypocalcemia
- d. Hypermagnesemia

22. Macrocytic anemia occurs in all **except**:

- a. Copper deficiency
- b. Fish tapeworm infestation
- c. Vit B₁₂ deficiency
- d. Folic acid deficiency

23. Reticulocytosis is seen in all **except**:

- a. Vitamin B₁₂ deficiency
- b. Hemolytic anemia
- c. Paroxysmal nocturnal hemoglobinuria
- d. Nutritional anemia

24. All are clinical manifestations of sickle cell anemia **except**:

- a. Leucopenia
- b. Bone pain
- c. Leg ulcers
- d. Acute abdominal pain

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2017**MEDICINE
PAPER – SECOND (SAQ)****[Time allotted: Three hours]****[Max Marks: 60]**

Note: Attempt all questions.
Draw suitable diagrams wherever necessary.

- Q. 1.** Multiple choice questions- separate sheet given ($\frac{1}{2} \times 24 = 12$)
- Q. 2.** Give reasons for: (1 x 6 = 06)
- Hyperacusis in Bell's palsy
 - Ptosis in Horner's syndrome
 - Obstructive hydrocephalus in tuberculous meningitis
 - Increased GGT in alcoholic liver injury
 - Reduced albumin levels in chronic liver disease
 - Low protein levels in transudative pleural effusion
- Q. 3.** Problem based question: (1+1+1+1+2= 06)
- A 60 year-old male who is a known case of emphysema presented with sudden onset of right sided chest pain associated with severe breathlessness.
- What is the most probable diagnosis?
 - What will be the clinical findings?
 - How will you investigate this case?
 - What will be the arterial blood gas findings?
 - Outline treatment of the case.
- Q. 4.** Write short notes on: (3 x 4 = 12)
- Wernicke's aphasia.
 - Features of Upper motor neuron lesion
 - Celiac sprue
 - Scabies
- Q. 5.** Structured question:
- Enumerate clinical features and management of hepatic encephalopathy. (3+3 = 06)
 - Enumerate the clinical features and medical management of acute pulmonary embolism. (3+3 = 06)
- Q. 6.** Write in brief about: (3 x 4 = 12)
- Treatment of neurocysticercosis
 - Down's syndrome
 - Datura poisoning
 - Obsessive compulsive disorder

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2017**MEDICINE****PAPER – SECOND (MCQ)****Time allotted for MCQ – 25 minutes****SET - B****Q. 1. Multiple Choice questions (Darken the single best response in OMR sheet)****(0.5 x 24=12)**

1. Dhatura poisoning is not characterised by:
 - a. Dilated pupils
 - b. Dry hot skin
 - c. Rise in temperature
 - d. Diarrhea
2. Which of the following is not a feature of schizophrenia?
 - a. Abnormal motor behaviour
 - b. Delusions
 - c. Hallucinations
 - d. Suicidal tendency
3. Which of the following is not true about bipolar disorder?
 - a. Aetiology largely genetic
 - b. Relapsing mood disturbance
 - c. Periods of both depressed and elevated mood
 - d. Clomipramine is drug of choice
4. ECG may show characteristic J waves in:
 - a. Acute mountain sickness
 - b. Heat stroke
 - c. Hypothermia
 - d. High altitude pulmonary oedema
5. Warm peripheries are seen in all **except**:
 - a. Septic shock
 - b. Neurogenic shock
 - c. Anaphylactic shock
 - d. Cardiogenic shock
6. Sudden excruciating headache is seen in:
 - a. Hysteria
 - b. Subarachnoid hemorrhage
 - c. Tension headache
 - d. Epilepsy
7. Upper motor neuron lesions manifest with all **except**:
 - a. Exaggerated deep tendon jerks
 - b. Spasticity
 - c. Extensor plantars
 - d. Fasciculations
8. Which is pathognomonic for motor neuron disease?
 - a. Pseudo hypertrophy
 - b. Fasciculations
 - c. Bladder bowel involvement
 - d. Sensory loss
9. Commonest location of hypertensive hemorrhage is:
 - a. Subcortical white matter
 - b. Putamen
 - c. Hippocampus
 - d. Brainstem
10. Features of cerebellar dysfunction include all **except**:
 - a. Hypertonia
 - b. Ataxia
 - c. Dysarthria
 - d. Nystagmus
11. Turner's syndrome is characterised by all **except**:
 - a. Webbed neck
 - b. XO pattern
 - c. Short stature
 - d. Mental retardation
12. The stigmata of chronic liver disease include all **except**:
 - a. Testicular atrophy
 - b. Gynecomastia
 - c. Parotid gland atrophy
 - d. Spider nevi
13. Anti tissue transglutaminase antibodies are helpful in diagnosis of:
 - a. Ulcerative colitis
 - b. Celiac disease
 - c. Crohn's disease
 - d. Primary biliary cirrhosis
14. Which of the following is not a feature of Irritable bowel syndrome?
 - a. Rectal bleeding
 - b. Abdominal pain
 - c. Constipation
 - d. Bloating
15. Rapid urease test is done for diagnosis of:
 - a. Tropical sprue
 - b. Helicobacter pylori infection
 - c. Lactose intolerance
 - d. Whipple's disease

16. Characteristics of Plummer Vinson syndrome include all **except**:

- a. Glossitis
- b. Macrocytic anemia
- c. Oesophageal web
- d. Koilonychia

17. Autoimmune hepatitis is associated with all **except**:

- a. ANCA
- b. ANA
- c. Anti-LKM antibodies
- d. Antibody to soluble liver antigen

18. Target lesions are seen in:

- a. Psoriasis
- b. Erythema multiforme
- c. Erythema nodosum
- d. Scabies

19. Koebner phenomenon is seen in:

- a. Leprosy
- b. Psoriasis
- c. Lichen planus
- d. Exogenous dermatitis

20. Pneumatocoele is characteristically seen in:

- a. Emphysema
- b. Staphylococcal pneumonia
- c. Pneumococcal pneumonia
- d. Bronchiectasis

21. Exudative pleural effusion is seen in following **except**:

- a. Cirrhosis
- b. Tuberculosis
- c. Mesothelioma
- d. Rheumatoid arthritis

22. All of the following hormonal levels are increased in small cell carcinoma of lung **except**:

- a. Calcitonin
- b. ACTH
- c. Atrial natriuretic peptide
- d. Growth hormone

23. Silicosis is associated with:

- a. Mesothelioma
- b. Tuberculosis
- c. Bronchogenic carcinoma
- d. Sarcoidosis

24. The drug of choice for anaphylactic shock is:

- a. Antihistaminics
- b. Adrenaline
- c. Steroids
- d. Intravenous fluids

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY/FEBRUARY- 2018

MEDICINE

PAPER – FIRST (MCQ SET-C)

[Time allotted: Three hours]

[Max Marks: 60]

Q. 1. Multiple choice questions (Darken the single best response in OMR sheet)

(0.5 x 24=12)

1. Serum alkaline phosphatase is increased in:
 - a. Multiple myeloma
 - b. Pagets disease
 - c. Hypothyroidism
 - d. Hypoparathyroidism
2. Tufting of terminal phalanges is seen in:
 - a. Hypothyroidism
 - b. Hyperparathyroidism
 - c. Pregnancy
 - d. Chronic kidney disease
3. Hypercalcemia is seen in all **except**:
 - a. Sarcoidosis
 - b. Bronchogenic carcinoma
 - c. Hypothyroidism
 - d. Lithium toxicity
4. Japanese encephalitis is caused by:
 - a. Retrovirus
 - b. Arbovirus
 - c. Enterovirus
 - d. Cytomegalovirus
5. Anti-dsDNA is diagnostic of:
 - a. SLE
 - b. Rheumatoid arthritis
 - c. Gouty arthritis
 - d. Psoriatic arthritis
6. All are cardio-selective beta blockers **except**:
 - a. Bisoprolol
 - b. Metoprolol
 - c. Labetalol
 - d. Atenolol
7. Malaria is transmitted by the bite of:
 - a. Female anopheles
 - b. Aedes aegypti
 - c. Culex fatigans
 - d. Sandfly
8. Megaloblastic anemia can be caused by:
 - a. Fish tapeworm
 - b. Dwarf tapeworm
 - c. Roundworm
 - d. Threadworm
9. Nephrotic syndrome is characterised by all **except**:
 - a. Proteinuria
 - b. Hypercholesterolemia
 - c. Anasarca
 - d. Hypernatremia
10. Chvostek sign is present in:
 - a. Hyponatremia
 - b. Hypoglycemia
 - c. Hypocalcemia
 - d. Hypokalemia
11. All are used in hyperkalemia **except**:
 - a. Calcium gluconate
 - b. Glucose with insulin
 - c. Sodium carbonate
 - d. Spironolactone
12. Chloride responsive alkalosis is present in all **except**:
 - a. Recurrent vomiting
 - b. Diuretics
 - c. Cushing's syndrome
 - d. Post hypercapnia
13. Renal vein thrombosis is most commonly associated with:
 - a. Membranous nephropathy
 - b. Diabetic nephropathy
 - c. Minimal change disease
 - d. Post streptococcal glomerulonephritis
14. Which of the following drugs may precipitate gout?
 - a. Isoniazid
 - b. Pyrazinamide
 - c. Rifampicin
 - d. Streptomycin
15. The commonest degenerative joint disease is:
 - a. Osteoarthritis
 - b. Gouty arthritis
 - c. Psoriatic arthritis
 - d. Rheumatoid arthritis
16. Pulsus bisferiens is seen in:
 - a. Aortic stenosis
 - b. Mitral stenosis
 - c. Cardiac tamponade
 - d. Aortic stenosis & aortic regurgitation
17. Wide and fixed splitting of second heart sound is present in:
 - a. VSD
 - b. ASD
 - c. Hypertension
 - d. Mitral stenosis
18. Giant 'a' waves in JVP occur in:
 - a. Tricuspid stenosis
 - b. Tricuspid regurgitation
 - c. Aortic stenosis
 - d. Aortic regurgitation
19. Drug of choice in PSVT is:
 - a. Amiodarone
 - b. Lignocaine
 - c. Quinidine
 - d. Adenosine
20. Gout is a disorder of:
 - a. Purine metabolism
 - b. Pyrimidine metabolism
 - c. Ketone metabolism
 - d. Protein metabolism
21. HLA DR-4 is associated with:
 - a. Reiter's syndrome
 - b. Gout
 - c. Rheumatoid arthritis
 - d. Osteoarthritis
22. Pel Ebstein fever is characteristic of:
 - a. Hodgkin's disease
 - b. Enteric fever
 - c. Scrub typhus
 - d. Leptospirosis
23. Paroxysmal nocturnal hemoglobinuria may be characterized by all of following **except**:
 - a. Thrombosis
 - b. Pancytopenia
 - c. Increased LAP score
 - d. Increased LDH
24. Normal anion gap metabolic acidosis is seen in all **except**:
 - a. Diarrhoea
 - b. Hyperalimentation
 - c. Renal tubular acidosis
 - d. Lactic acidosis

MEDICINE PAPER – FIRST

Note: Attempt all questions.
Draw suitable diagrams wherever necessary.

Q. 2. Give reasons for:

(1 x 6=06)

- a. Narrow S2-OS interval in severe mitral stenosis.
- b. Prescribing benzathine penicillin in rheumatic fever.
- c. Difficulty with balance in patients with Vitamin B12 deficiency.
- d. Presence of dysmorphic RBCs in urine in acute glomerulonephritis.
- e. Presence of microscopic hematuria in infective endocarditis.
- f. Polyuria in diabetes mellitus.

Q. 3. Problem based question:

(1+1+1+1+1+1=06)

A 55-year-old male smoker, comes to the emergency with severe breathlessness of sudden onset. On examination, his blood pressure is 220/130 mmHg.

- a. What is the most probable diagnosis?
- b. What is the differential diagnosis?
- c. Enumerate important physical findings in this case.
- d. What investigations will help in the diagnosis?
- e. Outline the treatment for this case.
- f. What advice you will give at the time of discharge?

Q. 4. Write short notes on:

(3 x 4=12)

- a. Management of acute gouty arthritis
- b. Clinical findings of Cushing's syndrome
- c. Management of cerebral malaria
- d. Diabetic nephropathy

Q. 5. Structured questions:

- (i) Discuss the aetiology, clinical features and management of acute kidney injury.
- (ii) Discuss the clinical features, investigations and treatment of hyperthyroidism.

(2+2+2=06)

(2+2+2=06)

Q. 6. Write in brief about:

(3 x 4=12)

- a. Thiamine deficiency
- b. Clinical features of hypocalcemia
- c. Complications of enteric fever
- d. Diagnosis of amoebiasis

M.B.B.S. FINAL PROF. PART-II EXAMINATION, JANUARY/FEBRUARY- 2018**MEDICINE****PAPER – SECOND (MCQ SET - B)****[Time allotted: Three hours]****[Max Marks: 60]****(0.5 x 24=12)****Q. 1. Multiple choice questions (Darken the single best response in OMR sheet)**

1. A young patient presenting with massive hematemesis is found to have splenomegaly. The most likely source of the bleeding is:
 - a. Gastric ulcer
 - b. Duodenal ulcer
 - c. Oesophageal varices
 - d. Malaria
2. Early sign of hepatic encephalopathy is:
 - a. Asterixis
 - b. Alternate constriction and dilation of pupil
 - c. Seizures
 - d. Psychosis
3. Crack nut esophagus is seen in:
 - a. Carcinoma of esophagus
 - b. Cardiospasm
 - c. Achalasia cardia
 - d. Barrett's esophagus
4. Triad of gall stones, diabetes and steatorrhea is seen in:
 - a. Gastrinoma
 - b. Somatostatinoma
 - c. VIPoma
 - d. Glucagonoma
5. Serum amylase levels are raised in all except:
 - a. Acute pancreatitis
 - b. Perforation of stomach
 - c. Strangulated small intestine
 - d. Acute appendicitis
6. Pyramidal tract involvement with absent ankle jerk is seen in:
 - a. Motor neuron disease
 - b. SACS-subacute combined degeneration
 - c. Lathyrism
 - d. Tabes dorsalis
7. Most common cause of subarachnoid hemorrhage is:
 - a. Hypertension
 - b. Aneurysm
 - c. AV malformation
 - d. Bleeding disorder
8. Anterior cerebral artery thrombosis is characterized by:
 - a. Urinary retention
 - b. Contralateral lower limb weakness
 - c. Hemi-anaesthesia of opposite side of face
 - d. Hemianopia
9. Drug of choice for myasthenia gravis is:
 - a. Gallamine
 - b. Succinylcholine
 - c. Pyridostigmine
 - d. Permethrin
10. Punch drunk state is associated with:
 - a. Parkinsonism
 - b. Alcoholism
 - c. Chorea
 - d. All of the above
11. The commonest site of hypertensive bleed is:
 - a. Cerebellum
 - b. Putamen
 - c. Thalamus
 - d. Pons
12. Upper motor neuron facial palsy is characterized by:
 - a. Uniform involvement of one half of face
 - b. Sparing of upper part of face
 - c. Failure to close both eyelids
 - d. Sparing of lower half of face
13. Example of disorder of sex chromosomes is:
 - a. Marfan's syndrome
 - b. Testicular feminization syndrome
 - c. Klinefelter's syndrome
 - d. Down's syndrome
14. In Turner's syndrome, which of the following is not present?
 - a. Short stature
 - b. Webbed neck
 - c. Widely spaced nipples
 - d. Mental retardation
15. Increase in alpha-fetoprotein is seen in:
 - a. Hepatoblastoma
 - b. Neuroblastoma
 - c. Angiosarcoma
 - d. Thymoma
16. Lateral medullary syndrome is associated with:
 - a. Ipsilateral loss of pain and temperature
 - b. Contralateral loss of vibration
 - c. Contralateral loss of pain and temperature
 - d. Ipsilateral hemiplegia
17. Visual cortex is supplied by:
 - a. Anterior cerebral artery
 - b. Middle cerebral artery
 - c. Posterior cerebral artery
 - d. Common carotid artery
18. All circulate in the blood except:
 - a. HBsAg
 - b. HBcAg
 - c. Anti HBc
 - d. HBeAg
19. AST/ALT > 1 is seen in:
 - a. Non-alcoholic steatohepatitis
 - b. Alcoholic hepatitis
 - c. Wilson disease
 - d. All of the above
20. Extra-parenchymal causes of respiratory failure are all except:
 - a. Cardiac tamponade
 - b. Cervical spine trauma
 - c. Myasthenia gravis
 - d. Pneumothorax
21. True about MDR-TB:
 - a. Sputum smear positive after 5 months
 - b. Clinical deterioration despite treatment
 - c. Culture positive after 3 months
 - d. All of the above
22. True about ECG in pulmonary embolism:
 - a. Right ventricular strain
 - b. S1Q3T3 pattern
 - c. Sinus tachycardia
 - d. Any of the above
23. Acute hepatitis B infection is diagnosed by:
 - a. IgM anti-HBc
 - b. IgM anti-HBs
 - c. IgG anti-HBc
 - d. IgG anti-HBs
24. Councilman bodies are seen in:
 - a. Wilson disease
 - b. Acute viral hepatitis
 - c. Alcoholic hepatitis
 - d. Autoimmune hepatitis

MEDICINE PAPER – SECOND

Note: Attempt all questions.
Draw suitable diagrams wherever necessary.

Q. 2. Give reasons why:

(1 x 6 = 06)

- a. Octreotide is given in the management of upper gastrointestinal bleeding.
- b. Pralidoxime is used in the management of organophosphorus poisoning.
- c. Hemoptysis occurs in pulmonary tuberculosis.
- d. Foot drop is seen in leprosy.
- e. Lump is palpated in the right iliac fossa in abdominal tuberculosis.
- f. Pupil is dilated in 3rd nerve palsy.

Q. 3. Problem based question:

(1+2+1+1+1=06)

A 65 years old male presented with fever for 4 days followed by altered behavior and 3 episodes of generalized tonic clonic seizures. On examination, he is drowsy (E2V3M4), has equal sized pupils and no focal deficit; however, neck stiffness is appreciable.

- a. What is the most probable diagnosis?
- b. Give etiologies of the diagnosis.
- c. Enumerate the investigations to be performed in such a case.
- d. If lumbar puncture is done in this patient, what will be the probable findings?
- e. Outline management of the case.

Q. 4. Write short notes on:

(3 x 4=12)

- a. Shifting dullness
- b. Cauda equine syndrome
- c. Laboratory diagnosis of inflammatory bowel disease
- d. Type 2 respiratory failure

Q. 5. Structured questions:

(i) Enumerate the clinical features and management of a case with snake bite.

(3+3 = 06)

(ii) Enumerate the causes, clinical features, investigations and management of pleural effusion.

(1+2+2+1=06)

Q. 6. Write in brief about:

(3 x 4=12)

- a. Glasgow Coma Scale
- b. Post streptococcal glomerulonephritis
- c. Radiation injury
- d. Electroconvulsive therapy