

M.B.B.S. THIRD PROFESSIONAL PART – II EXAMINATION, FEBRUARY-2025**GENERAL MEDICINE****PAPER - FIRST****[Time allotted: Three hours]****SET - A****[Max Marks: 100]****Q. 1. Multiple choice questions (Darken the single best response in OMR sheet. Time allotted 20 minutes) (20 x 01 = 20)**

1. Critical Phase in Dengue is associated with
 - a. Decrease in capillary permeability and increase in hematocrit
 - b. Increase in capillary permeability and increase in hematocrit
 - c. Decrease in capillary permeability and Decrease in hematocrit
 - d. Increase in capillary permeability and Decrease in hematocrit
2. PCP Prophylaxis in HIV Patient is indicated when
 - a. TLC more than 20000
 - b. CD4 count less than 50.
 - c. Total Neutrophil count more than 5000
 - d. CD4 count less than 200
3. Which of the following is FALSE regarding CURB-65 scoring?
 - a. Blood Urea Nitrogen >19mg/dl
 - b. Confused mental status
 - c. Respiratory Rate <20 breaths/min
 - d. Systolic BP <90mmHg
4. Knuckle Pigmentation is closely associated with which type of Anemia?
 - a. Vitamin B12 Deficiency Anemia
 - b. Iron deficiency Anemia
 - c. Anemia of Chronic Disease
 - d. Lead Poisoning
5. Philadelphia Chromosome (t 9:22) is associated with Malignancy?
 - a. Acute Lymphocytic Leukemia
 - b. Acute Myelocytic Leukemia
 - c. Chronic Lymphocytic Leukemia
 - d. Chronic Myeloid Leukemia.
6. First line treatment for the chronic phase of CML?
 - a. Imatinib Mesylate
 - b. Nintedanib
 - c. Tocilizumab
 - d. Methotrexate
7. Conversion of Calcidiol to Calcitriol take place in
 - a. Kidney
 - b. Liver
 - c. Spleen.
 - d. Bone.
8. Casal's Necklace or Collar rash is skin manifestation of which vitamin Deficiency?
 - a. Vitamin B1
 - b. Vitamin B3
 - c. Vitamin B12
 - d. Vitamin C
9. Which is the most specific antibody in Rheumatoid Arthritis?
 - a. RA factor
 - b. Anti-dsDNA.
 - c. Anti CCP
 - d. Anti-Ro
10. Which of the following is **NOT** a conventional DMARDs?
 - a. Leflunomide
 - b. Silver
 - c. Sulfasalazine
 - d. Methotrexate
11. Microalbuminuria is defined as albumin in urine
 - a. <30mg/day
 - b. >30mg/day to <300mg/day
 - c. >300mg/day to <900mg/day.
 - d. <3 grams/day.
12. Which of the following is **NOT** an absolute indication of Hemodialysis?
 - a. Serum Creatinine >5mg/dL.
 - b. Resistant Hyperkalemia
 - c. Fluid overload refractory to Diuretics
 - d. Uremic Encephalopathy.
13. Which of the following is **NOT** true for Nephrotic Syndrome?
 - a. Hyperlipidemia
 - b. Hyperalbuminemia
 - c. Massive Proteinuria
 - d. Lipiduria
14. Which of the following is **NOT** a micro-vascular complication of diabetes mellitus?
 - a. Nephropathy
 - b. Retinopathy
 - c. Peripheral arterial disease
 - d. Neuropathy
15. WHO criteria for the diagnosis of Diabetes Mellitus
 - a. Fasting plasma Glucose >100 mg/dl
 - b. Random Plasma Glucose >140 mg/dl
 - c. Random Plasma Glucose >200 mg without the classical sign
 - d. HbA1C >6.5
16. Which of the following is not the feature of Hypothyroidism?
 - a. Weight Gain
 - b. Oligomenorrhea
 - c. Pericardial Effusion
 - d. Cold intolerance
17. Hypertensive Emergency defined as
 - a. BP>180/110 mmHg without Target organ damage
 - b. BP>180/110 mmHg with Target organ damage
 - c. BP>220/130 mmHg without Target organ damage.
 - d. BP>220/130 mmHg with Target organ damage
18. Which of the following drug found to have mortality benefit in Chronic Heart failure with reduced ejection fraction?
 - a. Diuretics
 - b. Digoxin
 - c. Nitrates
 - d. Beta Blocker.
19. Earliest marker to rise in Myocardial infarction?
 - a. Trop I
 - b. CK MB
 - c. LDH
 - d. Aspartate aminotransferase
20. Watson's water hammer pulse found in
 - a. Aortic Stenosis
 - b. Mitral Regurgitation
 - c. Ventricular septal defect
 - d. Aortic Regurgitation

GENERAL MEDICINE PAPER - FIRST

Note: Attempt all questions in sequence.
Draw suitable diagrams (wherever necessary)

- Q. 2. Give reasons why:** (5 x 2 = 10)
- a. Hypothyroidism is associated with non-pitting type of edema.
 - b. Sulfonylureas causes weight gain.
 - c. Primaquin is given in treatment of falciparum malaria.
 - d. Spironolactone is to be avoided in Chronic Kidney Disease
 - e. Iron and calcium supplementation should not be taken together
- Q. 3. Problem based question:** (2+2+2+2+2=10)
- A 21 year old boy presented to the emergency with chief complain of pain in abdomen from the last 6 hours. His vitals were BP- 122/76 mmHg, PR- 102/min, RR- 18/min, Spo2- 98% on room air. His RBS was found to be 586mg% and on urine dipstick test, it was moderately positive for Ketone bodies. On ABG, his PH was 7.26, HCO₃ – 14mmol/L, PaCO₂- 26 and PaO₂ – 102.
- a. What is the diagnosis of the above case?
 - b. Outline its line of management?
 - c. Enumerate 2 microvascular and 2 macrovascular complications of diabetes
 - d. Write the WHO criteria for diagnosis of diabetes mellitus
 - e. Enumerate two acute complications of diabetes mellitus
- Q. 4. Write briefly on:** (4 x 6 = 24)
- a. Community acquired pneumonia
 - b. Nephrotic syndrome
 - c. Thyrotoxicosis
 - d. Chronic myeloid leukemia (CML)
- Q. 5. Structured question:** (2 x 10 = 20)
- (i) Define pyrexia. Write the causes of hepatosplenomegaly. How will you manage a case of chronic hyper-reactive splenomegaly? (2+2+2+4 =10)
- (ii) Define diabetes mellitus. According to WHO, what are the types of diabetes mellitus. What is the pathophysiology and management of gestational diabetes mellitus? (2+4+2+2 =10)
- Q. 6. Answer in brief about:** (4 x 4 =16)
- a. Metabolic syndrome
 - b. Causes of acute kidney injury
 - c. Peripheral signs of aortic regurgitation
 - d. Scrub typhus
