62. A 46-year-old man recently diagnosed with a duodenal ulcer started a treatment that include ralfate. Which of the following mechanisms most likely mediates the therapeutic efficacy of the drug in the patient's disease? b. Exerting a bactericidal effect against Helicobacter Pylori Acting as a barrier to acid by binding to necrotic ulcer tissue d. Reaction with gastric hydrochloric acid to form salt and water . Inhibiting hydrochloric acid secretion e/Stimulating bicarbonate secretion by antral parietal cells 63. A 45-year-old woman presented to her physician because of a 2-week history of painless diarrhea usually occurred during meals. After physical examination, lab tests, and colonoscopy, a diagnosis of irritable bowel syndrome was made, and the woman was prescribed an appropriate therapy that included loperamide. Direct activation of which of the following receptors most likely mediated the therapeutic effect of the drug in this patient? € 5-HT3 serotonergic b. Alpha-2 adrenergic c. M3 cholinergic d. Mu opioid e. Nn cholinergic 64. A 51-year-old male presents with dysphagia and diagnosed with achalasia. Endoscopy shows a mass located in the middle third of the esophagus that extends into adjacent lung tissue. What would the biopsy most likely reveal? a. A mass composed of benign cartilage b. A mass composed of benign smooth-muscle cells Infiltrating groups of cells forming glandular structures d. Infiltrating sheets of atypical squamous cells forming keratin pearls e. Sheets of lymphoid cells 65. A 35-year-old lady visits the OPD complaining of pain on upper right side of her abdomen. Recently she was dieting and had rapidly lost weight. Which type of gall stones are found in such patients commonly? a. Pigment stone b. Calcium stones c_Cholesterol stones d. Mixed stones e. Bilirubin stones 66. A 70-year-old male patient was admitted with severe abdominal pain. He is hypertensive and suffered myocardial infarction 4 years ago. What is the cause the most likely cause of ischemic bowel disease in this patient? a. Angiodysplasia b-Atherosclerosis c. Hypercoagulable states d. Radiation e. Thrombosis 67. A 45-year-old lady visits the OPD with complaints of pain in the upper abdomen on and off for the last 2 years. She was previously diagnosed with Hashimoto's Thyroiditis. Endoscopy reveals an antral sparing gastritis. Which morphological lesion is suggestive of this disease? b. Diffuse mucosal atrophy Hyperplastic gland بعر d. Intestinal metaplasia e. Lymphoplasmacytic infiltrate in lamina properia 68. A 22-year-old female presents with frequent episodes of diarrhea with symptoms free interval of 3 to 4 weeks. Colonoscopy reveals ulcerations and cobblestone appearance of the ascending colon. Which microscopic feature is diagnostic of this disease? a. Apthous ulcers b. Cryptitis c. Crypt abscess d. Granuloma e. Lymphoplasmacytic infiltrate 69. A 65-year-old man with a history of alcohol abuse has had hematemesis for the past day. Physical examination reveals mild jaundice, spider angiomas, and gynecomastia. He has mild pedal edema and a massively distended abdomen. Which of the following factors is most likely to be responsible for hematemesis in this man? a. Congestive heart fallure b. Hepatopulmonary syndrome c. Hyperbilirubinemia d, Portosystemic shunts e. Splanchnic arterial vasodilation 70. A patient presented with fever, vomiting and pain in right upper quadrant. His liver function tests are elevated and has high WBC count. Ultrasound shows a 2 cm round, echogenic lesion in right lobe of liver. What is the most likely diagnosis? Bacterial hepatitis. b. Cholangiocarcinoma c. Focal nodular hyperplasia d. Hepatoma - Introduction Supplement 71. Your patient is a 10 year old boy with bloody diarrhea for the past 2 days accompanied by fever upto 40°C and vomiting. Blood culture and stool culture from the boy revealed Gram-negative rod that formed colorless colonies on EMB agar. Which one of the following bacteria is the most likely cause of this infection? a. Halicobacter pylori b. Proteus mirabilis c. Salmonella enterica d. Shigella dysenteriae e. Vibrio cholera 72. The larvae of certain nematodes migrate through the lungs and cause pneumonitis characterized by cough or wheezing. Infection by which one of the following nematodes is most likely to cause this clinical picture? b. A.Lumbericoides E.vermicularis عر d. T.spiralis e. T.trichura 73. A 7 years old child complaining of itching in the perianal area at night for the last few days. He is suspected to have infection with, a. Entamoeba histolytica b. Giardia lambia Schistosoma mansoni d. Entrobius vermicularis e. Diphyllobothrium latum 74. A 53-year-old man visits emergency department with complaint of hematemesis for last 3 hours. On physical examination, he has a temperature of 35.9°C, pulse of 112/min, respirations of 26/min, and blood pressure of 90/45 mm Hg. He has a distended abdomen with a fluid wave, and the spleen tip is palpable. What liver disease is most likely to be present in this a. Cholangiocarcinoma. b. Cirrhosis. c. Eulminant hepatitis. d. Hepatitis A infection. e. Wilson disease 75. Amongst diseases causing inflammatory bowel disease, Which of the following feature is associated with only Chron's disease? a. Bloody diarrhea. b. Ulcer formation. c. Stricture formation. d. Involvement of colon. e. Anemia. 76. Which of the following condition is most commonly associated with adenocarcinoma of the esophagus? b. Barrett's esophagus c. Nitrosamines d. Plummer Vinson syndrome e. Smoking 77. Which of the following viral infections can result in chronic carrier state? c. HDV 78. A 32-year-old male was admitted with the complaints of loss of appetite, low grade fever and fatigue for the past one month. There was history of a dental procedure at a local clinic few months back. Serology for Hepatitis B surface antigen was negative, but his Liver function tests were markedly deranged. Keeping in mind the window period for Hepatitis B virus letronidazok > Liver Abscess Scanned with CamScanner

PAPER CODE D

/ infection which	PAPER CODE	D	
infection, which out of the following a. Hepatitis B surface antibody	g serological markers if positive	will help you in diagnosis?	
A. Hepatitis B surface antibody d. Hepatitis B core antigen	o. Repatitis B e antigen	c. Hepatitis B e antibod	dy
79. A 9-year-old sid	e, Hepatitis B core antibody		•
 A 9-year-old girl presented with ext abdominal bloating. Stool sent for re 	remely foul smelling, watery dia	rrhea for the past 3 days, prece	eded by severe nausea an
			ganisms. Which out of the
e III	Priose the trophozoite on stool r	outine examination?	garrier or the
5. Four nucle	C. Ingested Food matter	d laneau d 000	e. None of the above
80. Which out of the following is the ta	pe worm having freshwater fish	as the second intermediate ho	et in their life and 2
D. IGCIIIO SOR	inata c. Diphyllobothrium	n latum d. Echinococci	is granularie
e. All of the above			-
81. A 40 years male presented to OPD v	with complaints of malaise letha	rev and loss of annotite for the	1
history of dental extraction from a right hypochondrium. Lab investigation	oad side quack. On examination	the patient has well an enlarge	last 8 months. He has
right hypochondrium. Lab investigat	tion shows that the nationt has	ited boostities Which of the four	na slight tenderness in th
features on liver biopsy will confirm	chronic hepatitis	mai nepatitis. Which of the foll	owing morphological
a. Apoptotic hepatocytes b. Balloon o		Councilmon hadian	
82. A 24 years old male college student	presented to emergency denot	. Councilman bodies e.Gro	ound glass hepatocytes
examination the patient has paller a	and is tender in right humanhand	ment with complaint of right u	pper quadrant pain. On
examination the patient has pallor a hepatitis is the most probable diagon	osis in this sass. Which are affer	ium. There is a history of heav	y alcohol intake. Alcoholic
hepatitis is the most probable diagn case?	osis in this case. Which one of fo	ollowing morphological feature	is the most likely in this
a. Apoptotic hepatocytes	h Constalate Land		
d. Lymphocytes in the portal tract	b. Ground glass hepatocytes	c. Lobular disarray	
83. A 45 year old fisherman presented w	e. Mallory bodies		
83. A 45 year old fisherman presented y	vith abdominal pain and chronic	diarrhea. His peripheral blood	smear revealed
megaloblastic anaemia and stool R/I	revealed characteristic oval sha	sped eggs with a lid like opercu	lum at one end. What is
the most likely parasite responsible a. Diphyllobothrium latum b. Ecl			
		Echinococcus multilocularis	
d. Hymenolepis nana e. Ta	enia Saginata		
84. A 23 year old man with a history of t	ravel in forest area has chronic a	bdominal discomfort and diarr	rhea. Stool examination
reveal motile pear snaped organisms	s. What is the most probable dia	gnosis?	
a. Amebiasis b. Bacterial dysentery	c. Cholera 🔥	Giardiasis e. Irritable bow	vel syndrome
85. A histopathologist received the spec	imen of intestinal biopsy of a 56	years old patient who was ope	rated for acute abdomen.
The Histopathologist observes that t	here is atrophy and sloughing of	surface epithelium and coagula	ative necrosis of
muscularis propria. Which one of the a. Mucosal ischemic infarction b. Mu			V
e. Transmucosal ischemic infarct	iral ischemic infarction C.	Subserosal ulcers d. Subr	nucosal ischemia
	bundands of polyne lister the i-	****	
 In Peutz Jeghers syndrome, there are network enclosing glands lined by no 	e numbreus of polyps ining the in	testinai mucosa. They are comp	posed of fibromuscular
apt description for these lesions?	irmai intestinai epitnelium with i	idifierous gobiet cells. Which o	t the following is the most
a. Fibromuscular adenoma b. Hamarto	mas s Musinous sust ada	nome d Tubulanada	
	The state of the s		
87. A 30 year old patient complaints of s	udden onset severe epigastric pa	in which radiates to the back.	the pain is relieved by
leaning forwards. Laboratory investig			nase, amylase and lipase.
Leukocyte count is also increased. W	, ,		2 A 10 A
a. Acute Cholecystitis b. Acute pancr			e. Pancreatic pseudocyst
88. A 12 years old female patient was bro			
examination, the patient was anemic			
segmented eggs and eggs with active	iy motile knabditilorm larvae wi	thin the egg shell membrane. V	What is the most probable
cause?	and a large description of the second	landa sama di Tarata di	
		lepsis nana d. Taeniasis	e. Trichuris trichiura
89. A 44 years patient with a BMI of 28 K Total Bilirubin			us has following LFTs:
Total Billrubin	0.7 mg/dl	(<1.1)	
ALT	94 U/L	(< 42)	
	54 0/2	(***2)	
ALP	145 U/L	(85- 307)	
la l			
Albumin	46 g/L	(35-50)	
What is the most likely explanation for the	ese changes?		J
a. Primary Biliary Cirrhosis	b. Primary Sclerosing Cholang	tis c. Hemochromat	orie
d. Non-alcoholic fatty liverdisease	e. Wilsons disease	tis c. Hemocinomat	.0313
		anue and loss of apposite for th	a last Consulty Cl. 1
90. A 58-year-old female has experienced a total bilirubin concentration of 7.8 r	rap/dl. AST of 1011/1 ATT of 220	Letus, and loss of appetite for the	of activity Allegation
shows piecemeal necrosis of hepatoc	utes at the limiting place with	cort, and alkaline phosphatase of	in 6lbrata in the
tracts. These findings are most typica	for?	rtai ribrosis and a mononuclear	intitrate in the portal
a. Congestive heart failure b. Choledoch		d. Hemochromatosis	o HCV infanta
bishyllo U (anot (Mention	C. LIAV Intection	a. nemochromatosis	e_HCV infection
Dichalle y South Control	- -		-

afebrile. There is marked to abdominal ultrasound scan	enderness of the right us shows calculi within the	pper quadrant.	The liver span is nor	mal. Her body mass in	dex is 33. An
patient's gallbladder is rem					
following mechanisms is re	sponsible in developme	ent of her diseas	ie?	,	
 a. Antibody-mediated RBC lysis 	_b-Ascaris lumbricoi			per secretion of chole	sterol
d. Hepatocyte infection by HBV	e. Ingestion of food	is rich in fat			
92. A 14 years old male is foun	d to have multiple almo	st 120 colonic p	olyps and few almos	t 3 stomach polyps on	colonoscopy and
endoscopy respectively. His	s grandfather died of co	lonic adenocare	inoma. He has also s	ome vision problem. V	What syndrome
he is likely suffering from?					222-5
a. Juvenile polyposis	b. Peutz-Jeghers po	lyposis	c. Heriditary nonpole	yposis colorectalcance	r/HNPCC
Familial adenomatous polypo	sis/FAP		e. Irritable bowel svi	ndrome	
93. A 65years old female prese	nts with complaint of b	lood and mucus	in stools with on any	off diarrhan Endason	py of small
power reveal skip resions w	ith sharply demarcated	deep ulcers sur	rounded by normal l	onking mucoes Micros	convenie
transmulai initaliiniation w	ith epitheloid granulom	nas along with co	ypt abscess and disto	ortion.These are the ch	naracterisctic
mungs of:					
	cerative colitis c.	Celiac disease	d. Tropical s	prue e. Micro	oscopic collitis
94. A 13 months old baby has o	on off watery diarrhea si	ince the start of	weaning at 6 months	. What single serologic	cal marker
and deppet title linely die	enosis in this patient?				
95. A young patient presented	phidot IgM	Tissue transglut	aminase antibody	d. p- ANCA	e. Typhidot IgG
95. A young patient presented process. Biopsy of gastric m	with chronic gastritis al	ong with megalo	blastic anemia .His s	erum B12 and folate le	vels are in
process. Biopsy of gastric m	fundur antweit	The most likely f	indings in biopsy wo	ıld be:	
a Atrophic mucosa of body and b. Noncaseating Granulomas in	the body mysess	inal metaplasia			
d. Eosinophils in antral and bod		Dense inflamma	ition in antral mucosa	with visible H.pylori	
96. A 65 years old male smoker					hanges
 A 65 years old male smoker by pink oncocytic cells with 	dense underlying lympi	eo parotio tumo	r. Histological examin	ation of biopsy reveal	papillae lined
diagnosis?	Tense anderlying lympi	nopiasmacytic ir	filtrate in stroma. W	hich of the following is	most likely
a. Pleomorphic adenoma	b-Warthin tumor				_
d. Mucoepidermoid carcinoma	a Branchageste ad-	nocarcinoma	id/low grade neuroe	ndocrine tumor	
TO TO YEAR-OLD WOMAN NEASO	inte with a 2 manual Line		l discomfort and deal		
pallor but no evidence of ja 6.7 g/dL. A barium swallow	undice. Laboratory stud	lies disclose a mi	crocytic byposhromi	stools. Physical exami	nation shows
6.7 g/dL. A barium swallow diffusely infiltrating maligna	radiograph reveals a "le	eather bottle" ap	pearance of the stor	anemia, with a hemor	globin level of
diffusely infiltrating malignations likely diagnosis?	ant cells, many of which	are "signet ring"	cells, in the stomach	wall Which of the fall	ination shows
a. Fungating adenocarcinoma	- h C		The storinger	wan. Which of the follo	owing is the
e. Menetrier disease			. Gastric lymphoma	d-Linitis plastica	
98. A 45 year old man presente	with malaise anorogia	and			
Blood examination shows n Serum Copper and Iron are	narked elevation of ALT	and vomiting to	emergency room. The	physician notices sligh	t iaundice
act of the copper and Iron are	normal Historial		T/ALT ratio being 2.5.	Alkaline phosphatase is	s near normal.
or the following diseases m	ost likely accounts for the	sese findings?	Mallory bodies in her	atocytes. Liver damage	from which
a. Biliary circhosis b. Vir	ral hepatitis	Alcoholic hepatii			
99. A 30 year old married wom contraception for the last 4 within normal limits. Ultras	an presents to gynaecole	PRV OPD for rout	is d. Hemochron	natosis e. Wilson':	s disease
within normal limits allow	years. She reports slight	discomfort in the	ne checkup. She is ta	king Oral Contraceptive	e Pills for
contraception for the last 4 within normal limits. Ultras a. Hepatocellular carcinoma e. Echinococcus granulosus cyst	ound shows a space occ	upying lesion. Sh	e is physically fine on	um. Alpha protein level	is essentially
e. Echinococcus granularus	a. Repatic adenoma	c. Angiosa	rcoma	ici wise. This lesion is m	ost likely
100.A 26 year old malnourished				patic amediasis	
100.A 26 year old malnourished taking further history, she h shows abscess. Most likely a. E. coli b. Klebsiella sp.	as had diarrhea for 2	licine OPD with r	nild abdominal discon	nfort in Right hyposhe-	
shows abscess. Most likely	cause of this liver absens	eks. Ultrasound	abdomen shows space	e occupying lesion Bion	drium. On
a. E. coli b. Klebsiella sp.	e. Entamoeba histoly	tica		Bresion, Blop	sy specimen
101.A 25 year old man had been with constipation, rectal ble fossa . Stools examination f	n experiencing intermitte	ent diarrhan whi	Acute hepatitis	e. Echinococcus gran	Oulosus suu
with constipation, rectal ble fossa . Stools examination f higher lesions. Which of the	eeding, and passage of m	ucus. On physic	n, over years, progre	ised to severe diarrhea.	Alternation
fossa . Stools examination f higher lesions. Which of the a. Celiac Disease b. Cri	alls to reveal parasites. C	colonoscopy dem	onstrator inflammation	domen is tender over the	he left illine
102.A 35 years old female was a	admitted in bossissis	lirschprung Dise	ase d. Tropical son	10	
Elective laproscopic surgery	y of her gall bladder was	evere pain in rigi	it hypochondrium . Ul	tracound e-Ulcerativ	e colitis
Elective laproscopic surgent mentions ROKITANSKY -AS a. Acute cholecystitis	CHOFF sinuses in his repu	done and specim	en was sent for histor	athology Tr	stones.
Elective laproscopic surgery mentions ROKITANSKY -AS a. Acute cholecystitis 103.A 70 years old lady who is compare involved with no metas a T2N1M0 b. J1N2M0	ronic cholecystitis	Acute pages are ch	aracteristic of?	The Histopat	hologist
are involved with no motor	ase of colon cancer. On l	plopsy, her canse	d. Acute hepat	tis o.ch	
a TZNIMO b. JINZMO	tasis. What is the TNM st	age of her colon	r has invaded the mus	icularis propria Turnic h	epatitis
	C. 12N2M0	d. T2N1M1	Cancery	rwo pe	ricolic nodes
			e. T2N	0M0	
	^	Page 7 of 8			
	\$ (3)			•	
	→		·		
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DrMs afridi

PAPER CODE D
104.A 32 year old woman presents with complaints of several months of burning substernal chest pain exacerbated by large
meals, cigarettes and caffeine. Her symptoms are worse when she lies on her back, especially while sleeping at night. Antacids
often improve her symptoms. This patient is at risk for which of the following conditions?
a. Cardiac ischemia b. Columnar metaplasia of distal esophagus c. Esophageal web
d. Leiomyoma of the esophagus E. Mallory Weiss lesion in the esophagus
105.Postmortem appearance of a fatal alkaline ingestion might include:
a. Erosion with hemorrhagic exudate b. Coagulation necrosis c. Yellow discoloration of skin
d Liquefactive necrosis e. Perforation of the gastrointestinal tract
106.Dead body of a young female was brought for autopsy. There was no evidence of any injury on external examination. On
inquiry from the relatives, they gave history of ingestion of a crystalline salt, followed by vomiting of bloody matters, and
death in about twenty minutes. The probable cause of death in this case is poisoning due to:
a. Arsenious oxide b. Calomel .s. Carbolic acid d. Corrosive sublimate e. Oxalic acid
107. Tremors in Hatter's shake are:
T. Coarse and intentional b. Coarse and involve hands c. Coarse and unintentional
d. Fine and Intentional e. Fine and involve hands
108.Chemical agent added to the specimen of vomitus of a suspected case of acute copper poisoning for confirming diagnosis is:
a. Ammonium hydroxide b. Calcium hydroxide c. Lithium hydroxide d. Potassium hydroxide
e. Sodium hydroxide
109.On autopsy examination red velvety appearance of stomach is seen in:
a: Chronic arsenic poisoning b. Chronic copper poisoning c. Chronic lead poisoning
6. Chronic absence positions and chronic stabilium poisoning
throat, esophagus, abdomen, naving dysphagua
and hematemesis, and was suspected to be a case of poisoning. Opon farcher elemented when ingested. Which poison was has the ability to extract water from tissue, liberate heat, and causing coagulation necrosis when ingested. Which poison was
ingested by the natient?
A COULD DOUGLE C. Halland Strate
A THE PROPERTY OF THE PROPERTY
111. Three young males from silk industry ingested some powder accidently. All well reported to the and cherry red appearance wherein two were severe symptomatic with headache, anxiety, agitation, arrhythmias, tachypnea and cherry red appearance wherein two were severe symptomatic with headache, anxiety, agitation, arrhythmias, tachypnea and cherry red appearance
wherein two were severe symptomatic with headache, anxiety, agreement, arrively, agreed to mild while third person had mild symptoms only. What could be the functional deformity in the third person leading to mild
x symptoms only?
a Anemia b. Hypernatremia c. Hypochiornydria c. Hypochiornydria
a. Anemia b. Hypernatremia c. Hypochlorhydria d. Hypokalemia c. Hy
On examination, there was dark brown stammy and a
condition? a. Aniline dye b. Carbon dioxide c. Hydrochloric acid d. Phosphine c. Phosphorus b. Carbon dioxide c. Hydrochloric acid d. Phosphine c. Phosphorus
113. A group of travelers had a visit to Kumrat. A lady of middle age was salestic was burning there, the fatal period was
113.A group of travelers had a visit to Kumrat. A lady of middle age was suddenly round dead of the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was camp.
recorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and the phenomena by which accorded as 2 to 10 minutes and 2 minutes and
considered as best sample for community of considered as best sample for considered as best sample
A. DIUUU
accepted with irritation, itching and painful busices, their
bruise. What is the most likely causative agent in this cases
a Cabrus precatorius b. Calotropis procera c. Cioton agricultura
115. "Punctate basophilia" is diagnostic feature of: (a) Chronic arsenic poisoning (b) Chronic mercury poisoning (c) Chronic antimony poisoning
a. Chronic arsenic poisoning d. Chronic phosphorus poisoning d. Chronic phosphorus poisoning d. Chronic phosphorus poisoning
11. The venitus and stool are luminous in dark in:
a. Acute arsenic poisoning b. Acute mercury poisoning
the share bosts poisoning e. Acute lead poisoning
117. Smokey green color of urine is observed in poisoning due to: a Oxalic acid b. Carbolic acid c. Arsenic d. Mercury e. Phosphorus
a Oxalic acid b. Calabata analytic of death is about:
a. Carbolic acid b. Oxalic acid c. Arsenic d. Mercury e. Thallium
119 Phossy jaw is seen in:
a. Chronic cannabis poisoning. Chronic lead poisoning.
d. Chronic file cut y possession as antidote in poisoning due to:
a. Opiates Jr. Hydrocyanic acid c. Paracetamol d. Barbiturates e. Methyl alcohol

CODEC
PAPER CODE C PAPER C PA
After a thorough stuff social demographic characteristics of a population habits even after lapse of 2 years, education against support of the smokers was population. Upon assessing the population habits even after lapse of 2 years, education against support of the smokers was noted.
results?
Reinforcement an knowledge of cultures c. Knowledge of belief d. Required devotion
a Appropriate methods
35, The Write has defined in addressing the medical 5 thought the community, region, and/or nation they have a
mandate to serve, which of the following to the
a Media b Medica (Chools a Dallis)
36. A 15-year-old girl presented with 7 days here
recently completed a 2 week course of antibiotics (analgesic) and antibiotics, and palate. Which one of the following is the
healthy with redness on sides of tones.
most likely diagnosis? a. Aphthous ulcers b. Xerostomia b. Xerostomia c. Herpes simplex d. Herpes simpl
a Aphthous ulcers b Xerostomia o Candidiasis d. Herpes simples e. Bacterial overgrowth 37. A 48-year-old lady presented with 6 months' history of dysphagia predominantly following full grant for occult blood is looks very pale, otherwise she is vitally stable. Her Hb is 8.44m/dl and serum ferritin 9.4ngm/ml, her stool for occult blood is
37.) A 48-year-old lady presented with 6 months' history of dysphagis predserum ferritin 9.4ngm/ml, her stool for occult blood is
37. A 48-year-old lady presented with 6 months' history of dysphagis predominantly 10.50mg/ml, her stool for occult blood is looks very pale, otherwise she is vitally stable. Her Hb is 8.4gm/dl and serum ferritin 9.4ngm/ml, her stool for occult blood is positive. Which one of the following is the most likely diagnosis?
Many West West Street
a. Rende esophagitis O. Acute Rastritis C. No.
e. Gastric Peptic ulcer a. Gastric Peptic ulcer b. A 25-year-old man presented with 2 months' history of watery loose motion, upper abdominal pain and blotting mostly after meals. His stool routine examination shows already and among cysts. His one younger sister is on gluten free diet advised by a
A 25-year-old man presented with 2 months' history of watery loose motors. His one younger sister is on gluten free diet advised by a meals. His stool routine examination shows glardia and ameba cysts. His one younger sister is on gluten free diet advised by a meals. His stool routine examination shows glardia and ameba cysts. His one younger sister is on gluten free diet advised by a
meals. His stool routile examination shows glardia and arried to be considered first?
gastroenterologist. Time i of the following diagnosis need to
hadominal point, full pecc and well-time
39. A 67-year-old man presented with 3 months' history of upper abdomains and weight loss. He has been treated for dyspepsia with proton pump inhibitors for the last 3 years. He is pale and cachexic with stable vital signs. His Hb is
for dyspepsia with proton pump inhibitors for the last 3 years. He most likely diagnosis? 8.6gm/di, stool for occult blood positive. Which one of the following is the most likely diagnosis? C. CA esophagus d. CA stomach
a. Plummer Wilson's syndrome b. Helicobacter pylori infection c. CA esophagus d. CA stomach c. CA duodenum
AM A 30 Id I de la contraction de la con
about 7 he weight in this diversity. Which one of the following is the supplicit initial investigation?
C Rarium Iolium
(4D A 35 years old may be a least suith blood and mucus for the last 2 months. Has been treated with motor ideal
Ciprofloracin for sufficient sine but with temporary improvement it it is low grade fever and weight less of the second supplies the second suppli
Which one of the fellowing is the most appropriate investigation for diagnosis?
a. Barlum follow through b. Stool for occult blood c. Capsule endoscopy d. CT scan abdomen Colonoscopy
A S8-year-old man who is a case of chronic hepatitis C, presented with abdominal distention, anorexia and weight loss.
Examination shows tense ascites and few distended veins on the abdomen around the umbilicus. Ultrasound shows shrunken liver with a hypoechoic lesion. Which of the following is the next appropriate investigation for his diagnosis?
a. CT scan abdomen by Serum alpha fetoprotein c. Upper GI endoscopy d. Stool for occult blood
e. nepatitis Cantilla
Control of the contro
distention, pain and fever for the last 3 weeks. Clinical examination shows fullness in the flanks, tender abdomen and positive shifting duliness. Which one of the following is the most appropriate test for diagnosis of her present illness?
and the present limess?
Production RF
A 23-year-old girl is good-in-in-order
months. On examination, she is pale looking, vitally stable, and normal systemic examination. She is reluctant from local examination. Which one of the following is the most likely diagnosis?
and initiation. Which one of the fell of t
d. Perianal ristula
43. A 47-year-old obese lady presented with several distribution of the control o
the back. She received multiple analgesics and proton pump inhibiters in the periphery with partial improvement. On examination, she is tender in the right hypochondrium and epigratrium.
examination, she is tender in the standard in the periphery with partial improvement. On
or about 5-7mm with normal gallbladder walls and epigastrium. Oftrasound abdomen shows multiple tiny gallstones
a. Acute cholecystitis b. Acute cholengists
46 A 35-year old overweight man was found back.
A 35-year old overweight man was found having an ALT of 156U/L(NR-25-40) on routine medical checkup. His Hepatitis C
antibodies and HbsAg tests were negative. Which one of the following should be the next most appropriate investigation in
Ultrasound abdomen b. Serum connectors
Serum lipid profile • e. Alpha fetoproteia C. Serum ceruloplasmin
7. A 62-year-old female presents with dysphants
7. A 62-year-old female presents with dysphagia, postprandial epigastric pain, and breathlessness when eating. She is evaluated for treatment. X-ray erect chest shows 40% of the story of
disposis?
A A A A A A A A A A A A A A A A A A A
Stomach volvulus Westpostite lightly
Stormach Volvulus

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typerchloremic, hypokalemic metabolic acidosis Hypochloremic, hypokalemic metabolic acidosis Hypochloremic, hypokalemic metabolic acidosis	
A patient with gastric outlet obstruction and prolonged Hypochloremic, hypokalemic metabolic acidosis Hypochloremic, hypokalemic metabolic acidosis a Hypochloremic, hyperkalemic metabolic atkalosis a Hypochloremic, hyperkalemic metabolic acidosis a Hypochloremic, hyperkalemic metabolic acidosis and Hypochloremic, hyperkalemic metabolic acidosis and Hypochloremic, hypokalemic metabolic alkalosis and Hypochloremic metabolic alkalosis and	
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e Hypochloremic, hypokalemic metabolic acidosis e Hyponatremic, hypokalemic metabolic acidosis for 2 davs He has no significant past medical history, and pis of small bowei with positive for free air fluid les for 2 davs He has no significant past medical history. Adhesions d Crohn disease e Gallstone ii Adhesions Adhesions Adhesions Adhesions Adhesions Adhesions Adhesions e Hyponatremic history is general to the metabolic acidosis and the hyponatremic history is general to the metabolic acidos	Ppenders ting
for 2 days. He has no significant past intentional dillated and the form of Crohn disease	rel. The most
Malignancy M	is the next
When obtaining the state mass in the library and Albandarola	
an ultrasound show	Metronidatel
which alcohol with alcohol with alcohol which and normation but tender to	THE SUbsection
Aspiration S1. A 70-year-old male with no significant medical problem is afebrile and normateristic observation to palpation S1. A 70-year-old male with no significant medical problem is a febrile and no other laboratory abnormality pain, nausea, and vomiting for the last 48 hours. He is afebrile and he has no other laboratory abnormality pain, nausea, and vomiting for the last 48 hours. His WINC is 15, and he has no other laboratory abnormality pain, nausea, and vomiting for the last 48 hours. His WINC is 15, and he has no other laboratory abnormality pain, nausea, and vomiting for the last 48 hours. His WINC is 15, and he has no other laboratory abnormality pain, nausea, and vomiting for the last 48 hours. He is afebrile and normateristics of the palpation of the last 48 hours. He is afebrile and normateristics of the laboratory abnormality pain, nausea, and vomiting for the last 48 hours. He is afebrile and normateristics of the laboratory abnormality pain, nausea, and vomiting for the last 48 hours. He is afebrile and normateristics of the last 48 hours. He is afebrile and normateristics of the last 48 hours. He is afebrile and no other significant finding quadrant of the abdomen without peritonitis. His WINC is 15, and he has no other significant finding quadrant of the abdomen without peritonitis. His will be proved the last 48 hours. He is afebrile and normal he is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and normal head of the last 48 hours. He is afebrile and	es. An Illean
pain, nausea, and abdomen without peritonitis. His Will peritones in it and no other significant finding	s. What is the
the state of the s	and pest
step?	
a. Order another abdominal scholgram to confirm acute Lot Order LFTs(liver function test) to confirm acute cholecystics Lot Order LFTs(liver function test) to confirm acute cholecystics Intravenous fluids	
Ditiate antibiotics that cover the usual gut flora and star cholecystectomy	
Admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient and put the patient on list for laparoscopial admit the patient of laparoscopial admit the patient and patient and patient and patient admit the patient admit t	
e. Consult interventional radiology for a percutaneous cholecystostomale, an ultrasound showed an inciden S2. During workup for symptomatic cholelithiasis in a 50-year-old male, an ultrasound showed an inciden	tal mass in the
the space of the s	ne lamina propria T1
gallbladder. After laparoscopic endicetystectomy, pathology this patient? Tumor, Which of the following is the best management for this patient? Tumor, which of the following is the best management for this patient?	
Tumor. Which of the following is the best management for this well as periportal lymph node dissection a. Counseling for extended resection of the gallbladder fossa as well as periportal lymph node dissection a. Counseling for extended resection for 5 years	addisia.
d. Serial annual dictasound examination of fedical	additional pathology
to be a bistory of positive billion and anorexia that is now localized to	the right in
On examination, he has tenderness medial and superior to the anterior superior iliac spine. Which	of the following
	owing explains
h Inflammation of the visceral peritoneum	
c. Localized pain is unequivocal for perforation C. Localized pain is unequivocal for perforation	•
Indication of the parietal parity parity	
54. A 28-year-old man is admitted to the emergency department complaining of pain in the umbilical	region that moves to the
ainte ille a face authich is a corroborative sign of acute appendicitis?	_
Referred pain in the right side with pressure on the left (Roysing) sign b. Increase of pain with	th testicular elevation
C. Relief of pain in lower shdomen with extension of thigh	
d. Relief of pain in lower abdomen with internal rotation of right thigh e. Hyperanesthesia in	the right lower abdomen
55. The diagnosis is more likely to be ulcerative colitis rather than Crohn's disease because at the pr	evious operation?
a. All layers of the bowel wall were involved b. There was evidence of fistula formation	
The serosa appeared normal on inspection, but the colon mucosa was extensively involved Skip lesions were noted e. The preoperative GI series showed a narrowing string like strices.	
5. To appropriately the string like string	cture in the ileum (string sign)
a. Chest CT, abdomen CT, pelvic MRI b. Chest x-ray, abdomen and pelvis CT, PET/CT	•
a. Chest CT, abdomen CT, pelvic MRI b. Chest x-ray, abdomen and pelvis CT, PET/CT C. Chest x-ray, abdomen and pelvis CT WAbdomen CT, pelvic MRI, PET/CT	
Chest x-ray, abdomen and pelvis CT, pelvic MRI, PET/CT	
An important distinguishing feature of Crohn disease when compared to ulcerative colitis is:	
	1 I I I I I I I I I I I I I I I I I I I
The presence of pyoderma gangrenosum e. The presence of arthritis	c. Perianal disease
	i saisa undar
58? A 68-year-old man has perianal mucus and pain. Physical examination reveals a posterior fist	ula. On examination under
anesthesia, you discover the fistula crosses the internal and deep external anal sphincters with	th a small underlying auscess
cavity. Which is the most appropriate treatment at this time?	
a. Fistulotomy using electrocautery over the entire fistula tract	
b. Division of the internal sphincter using electrocautery and placement of seton encircling the en	cternal sphincter
- Divorting COLOSTOMY II. ANTIDIOTICS DRIV P. Anal adve-	
Ed Vests old boy bresented with level hausea and banner and suspect bin	of Acute Viral Hepatitis. Which
O) [III] [DIIDWING	
c. HAV IgG d. SGPT	e. S. Albumen
Coline disease is associated with exposure to	= - (₹* · · ·
C Wheat	e. Meat
a. Rice	
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