76. Which of the following condition is most commonly associated with adenocarcinoma of the esophagus? a. Alcoholism 77. Which of the following viral infections can result in chronic carrier state? J. HCV a. HAV c. HDV

d. HEV e. HGV

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

infection, which out of the follow	ving serological markers if positive v	vill help you in diagnosis?	
a. Hepatitis B surface antibody d. Hepatitis B core antigen 79. A 9-year-old girl presented with	b. Hepatitis B e antigen	c. Hepatitis B e antibody	
d. Hepatitis B core antigen	e, Hepatitis B core antibody		- In- Andrews
Jest old Put bi escured Milli	extremely rour smelling, watery diar	rrnea for the past 3 days, preced	ded by severe nausea and
following features will halp you	or routine examination revealed pea	ar shaped flagellated motile org	anisms. Which out of the
	diagnose the trophozoite on stool roclei c. Ingested Food matter		e. None of the above
80. Which out of the following is the			
	saginata c. Diphyllobothrium		
e. All of the above	, Dipinyinosotimian	Tiotain a. Ecimiococca.	Brunaiosus
81. A 40 years male presented to Of	D with complaints of malaise, letha	rgy and loss of appetite for the	last 8 months. He has
	a road side quack. On examination		
	igation shows that the patient has v	riral hepatitis. Which of the follo	owing morphological
features on liver biopsy will conf			
a. Apoptotic hepatocytes b. Ballo			
82. A 24 years old male college stud	(a)		
	or and is tender in right hypochonds		
case?	agnosis in this case. Which one of fo	bilowing morphological reature	is the most likely in this
a. Apoptotic hepatocytes	h Ground glass henatocytes	c Lobular disarray	
d. Lymphocytes in the portal tract		c. Lobaldi disarray	
83. A 45 year old fisherman present	THE ACT OF THE PARTY AND ADDRESS OF THE PARTY ADDRESS OF THE PARTY ADDRESS OF THE PARTY AND ADDR	diarrhea. His peripheral blood	smear revealed
	R/E revealed characteristic oval sha		
the most likely parasite responsi	ble for this condition?		
a. Diphyllobothrium latum b		Echinococcus multilocularis	
d. Hymenolepis nana e		les Comerciales de Los conto	
84. A 23 year old man with a history			rhea. Stool examination
	isms. What is the most probable dia ery c. Cholera	. Giardiasis e. Irritable bow	vel syndrome
85. A histopathologist received the			
The Histopathologist observes t	nat there is atrophy and sloughing of	f surface epithelium and coagula	ative necrosis of
muscularis propria. Which one of	of the following is the most likely diag	gnosis in this case?	
a. Mucosal ischemic infarction	. Mural ischemic infarction c.	Subserosal ulcers d. Sub	mucosal ischemia
e. Transmucosal ischemic infarct		-ttiral They are as a	and of fiber museules
86. In Peutz Jeghers syndrome, then	by normal intestinal epithelium with	ntestinal mucosa. They are com	of the following is the most
apt description for these lesions		numerous gobiet cens. winch o	if the following is the most
	nartomas c. Mucinous cyst ad	d. Tubular ader	noma e. Villous adenom
87. A 30 year old patient complaints			
leaning forwards. Laboratory in	vestigations show elevated levels of	serum bilirubin, Alaine transami	inase, amylase and lipase.
Leukocyte count is also increase	d. What is the most likely diagnosis	in this case?	
a. Acute Cholecystitis b. Acute p	ancreatitis c. Acute Viral Hepa	titis d. Chronic cholecystitis	e. Pancreatic pseudocys
88. A 12 years old female patient w	as brought to OPD with complaint of	abdominal pain and diarrhoea	for one day. On
examination, the patient was an	emic and had tenderness in abdome	within the egg shell membrane	What is the most probable
segmented eggs and eggs with a cause?	actively motile knabaltilorii larvae v	vicinii tile egg silen membrane.	wildt is the most probable
a. Ancylostoma duodenale	Ascaris lumbricoides c. Hymen	olepsis nana d. Taeniasis	e. Trichuris trichiura
89. A 44 years patient with a BMI of	28 Kg/m2 who is a known patient o		
Total Bilirubin	0.7 mg/dl	(<1.1)	
trooms yno one baladorat	THE RESIDENCE IN THE REAL PROPERTY.	(- 12)	COLUMN TANKS OF THE PARTY OF TH
ALT	94 U/L	(< 42)	The State of the S
ALP	145 U/L	(85-307)	at all at the fall of the
	45	(35-50)	ment of the state of the state of
Albumin	46 g/L	(33-30)	MARKET MARKET ST
What is the most likely explanation	for these changes?	-VELTAL INC.	Voltage of the Years
a. Primary Biliary Cirrhosis	Primary Sclerosing Cholar	ngitis c. Hemochroma	atosis
d. Non-alcoholic fatty liver disease			
	enced gradually increasing malaise,		
	of 7.8 rag/dL, AST of 19U/L, ALT of 22 patocytes at the limiting plate with p		
tracts. These findings are most		portar ribrosis and a monoridate	a. minerate in the portar
The same of the sa			

c. HAV infection

a. Congestive heart failure b. Choledocholithiasis

d. Hemochromatosis

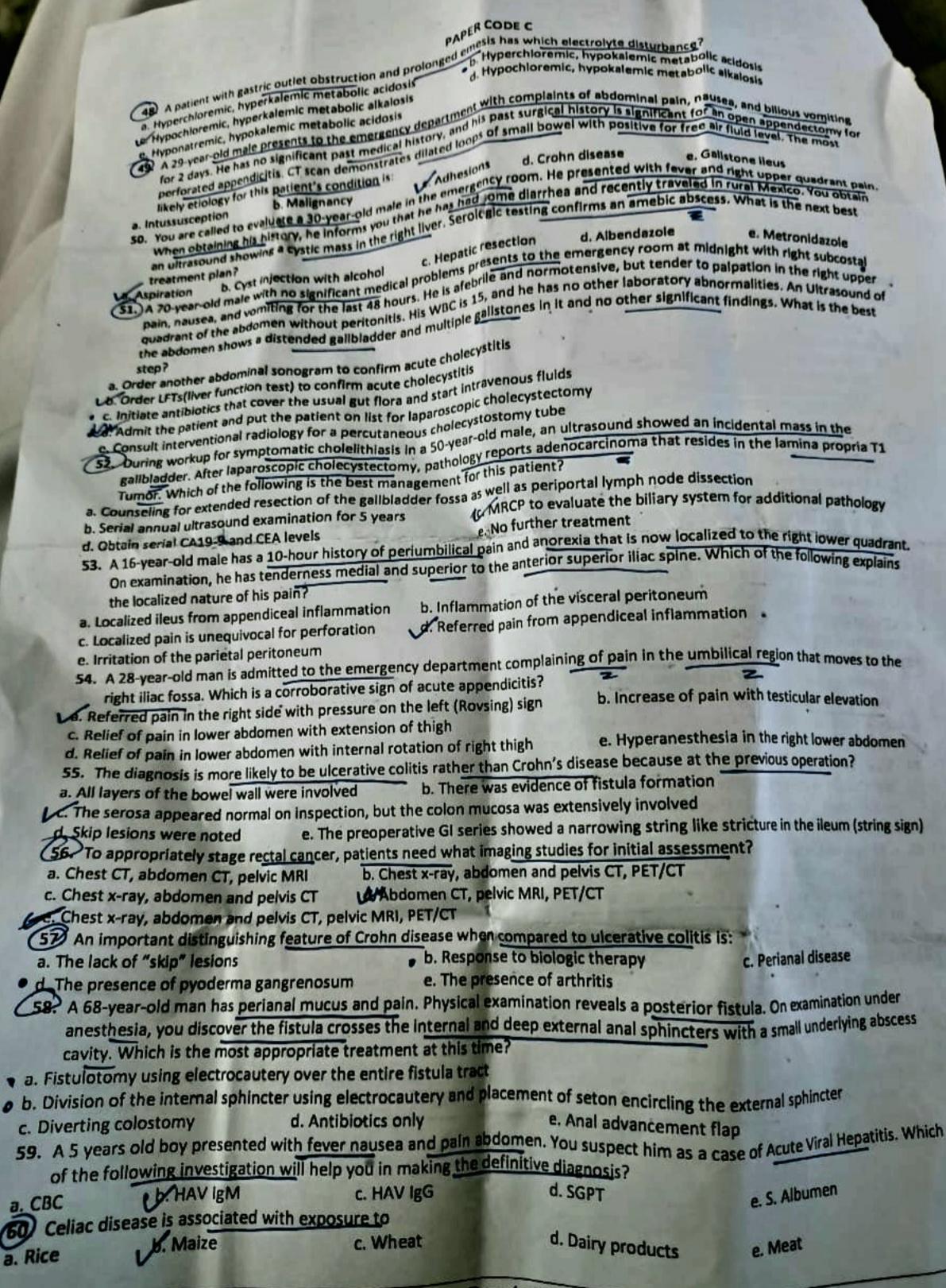
e\_HCV infection

- 91. A 54-year-old woman has had colicky right upper quadrant pain and nausea for the past week. On physical examination, she is afebrile. There is marked tenderness of the right upper quadrant. The liver span is normal. Her body mass index is 33. An abdominal ultrasound scan shows calculi within the lumen of the gallbladder, and the gallbladder wall appears thickened. The patient's gallbladder is removed by laparoscopic cholecystectomy; and shows faceted yellow colored calculi. Which of the following mechanisms is responsible in development of her disease? a. Antibody-mediated RBC lysis b-Ascaris lumbricoides within bile ducts
- d. Hepatocyte infection by HBV c. Biliary hyper secretion of cholesterol e. Ingestion of foods rich in fat
- 92. A 14 years old male is found to have multiple almost 120 colonic polyps and few almost 3 stomach polyps on colonoscopy and endoscopy respectively. His grandfather died of colonic adenocarcinoma. He has also some vision problem. What syndrome a. Juvenile polyposis
- b. Peutz-Jeghers polyposis c. Heriditary nonpolyposis colorectalcancer/HNPCC d. Familial adenomatous polyposis/FAP
- 93. A 65years old female presents with complaint of blood and mucus in stools with on and off diarrhea. Endoscopy of small bowel reveal skip lesions with sharply demarcated deep ulcers surrounded by normal looking mucosa. Microscopy reveals transmural inflammation with epitheloid granulomas along with crypt abscess and distortion. These are the characterisctic a. Crohns disease
- b. Ulcerative colitis c. Celiac disease 94. A 13 months old baby has on off watery diarrhea since the start of weaning at 6 months. What single serological marker e. Microscopic collitis a. Serum amylase
- b. Typhidot IgM c. Tissue transglutaminase antibody 95. A young patient presented with chronic gastritis along with megaloblastic anemia . His serum B12 and folate levels are in e. Typhidot IgG process. Biopsy of gastric mucosa has been taken. The most likely findings in biopsy would be:
- Atrophic mucosa of body and fundus only with intestinal metaplasia
- b. Noncaseating Granulomas in the body mucosa c. Dense inflammation in antral mucosa with visible H.pylori d. Eosinophils in antral and body mucosa
- e. Glandular hyperplasia in antral mucosa with regenerative changes 96. A 65 years old male smoker presents with right sided parotid tumor. Histological examination of biopsy reveal papillae lined by pink oncocytic cells with dense underlying lymphoplasmacytic infiltrate in stroma. Which of the following is most likely a. Pleomorphic adenoma
- b. Warthin tumor d. Mucoepidermoid carcinoma c. Carcinoid/low grade neuroendocrine tumor e. Bronchogenic adenocarcinoma
- 97. A 58-year-old woman presents with a 2-month history of abdominal discomfort and dark stools. Physical examination shows pallor but no evidence of jaundice. Laboratory studies disclose a microcytic, hypochromic anemia, with a hemoglobin level of 6.7 g/dL. A barium swallow radiograph reveals a "leather bottle" appearance of the stomach. Microscopic examination shows diffusely infiltrating malignant cells, many of which are "signet ring" cells, in the stomach wall. Which of the following is the
- a. Fungating adenocarcinoma 

  b. Gastric leiomyosarcoma e. Ménétrier disease c. Gastric lymphoma d Linitis plastica
- 98. A 45 year old man presents with malaise, anorexia and vomiting to emergency room. The physician notices slight jaundice. Blood examination shows marked elevation of ALT and AST with AST/ALT ratio being 2.5. Alkaline phosphatase is near normal. Serum Copper and Iron are normal. Histopathological reports show Mallory bodies in hepatocytes. Liver damage from which a. Biliary cirrhosis b. Viral hepatitis
- 99. A 30 year old married woman presents to gynaecology OPD for routine checkup. She is taking Oral Contraceptive Pills for contraception for the last 4 years. She reports slight discomfort in the right hypochrondrium. Alpha protein level is essentially a. Hepatocellular carcinoma
- within normal limits. Ultrasound shows a space occupying lesion. She is physically fine otherwise. This lesion is most likely e. Echinococcus granulosus cyst d. Hepatic amebiasis
- 100.A 26 year old malnourished female presents to medicine OPD with mild abdominal discomfort in Right hypochondrium. On taking further history, she has had diarrhea for 2 weeks. Ultrasound abdomen shows space occupying lesion. Biopsy specimen
- 101.A 25 year old man had been experiencing intermittent diarrhea which, over years, progressed to severe diarrhea, alternating c. Entamoeba histolytica. with constipation, rectal bleeding, and passage of mucus. On physical examination, the abdomen is tender over the left iliac fossa . Stools examination fails to reveal parasites. Colonoscopy demonstrates inflammation limited to the rectum, with no a. Celiac Disease
- 102.A 35 years old female was admitted in hospital for severe pain in right hypochondrium. Ultrasound revealed gall stones. Elective laproscopic surgery of her gall bladder was done and specimen was sent for histopathology. The Histopathologist a. Acute cholecystitis
- 103.A 70 years old lady who is case of colon cancer. On biopsy, her cancer has invaded the muscularis propria. Two pericolic nodes d. T2N1M1 e. T2N0M0

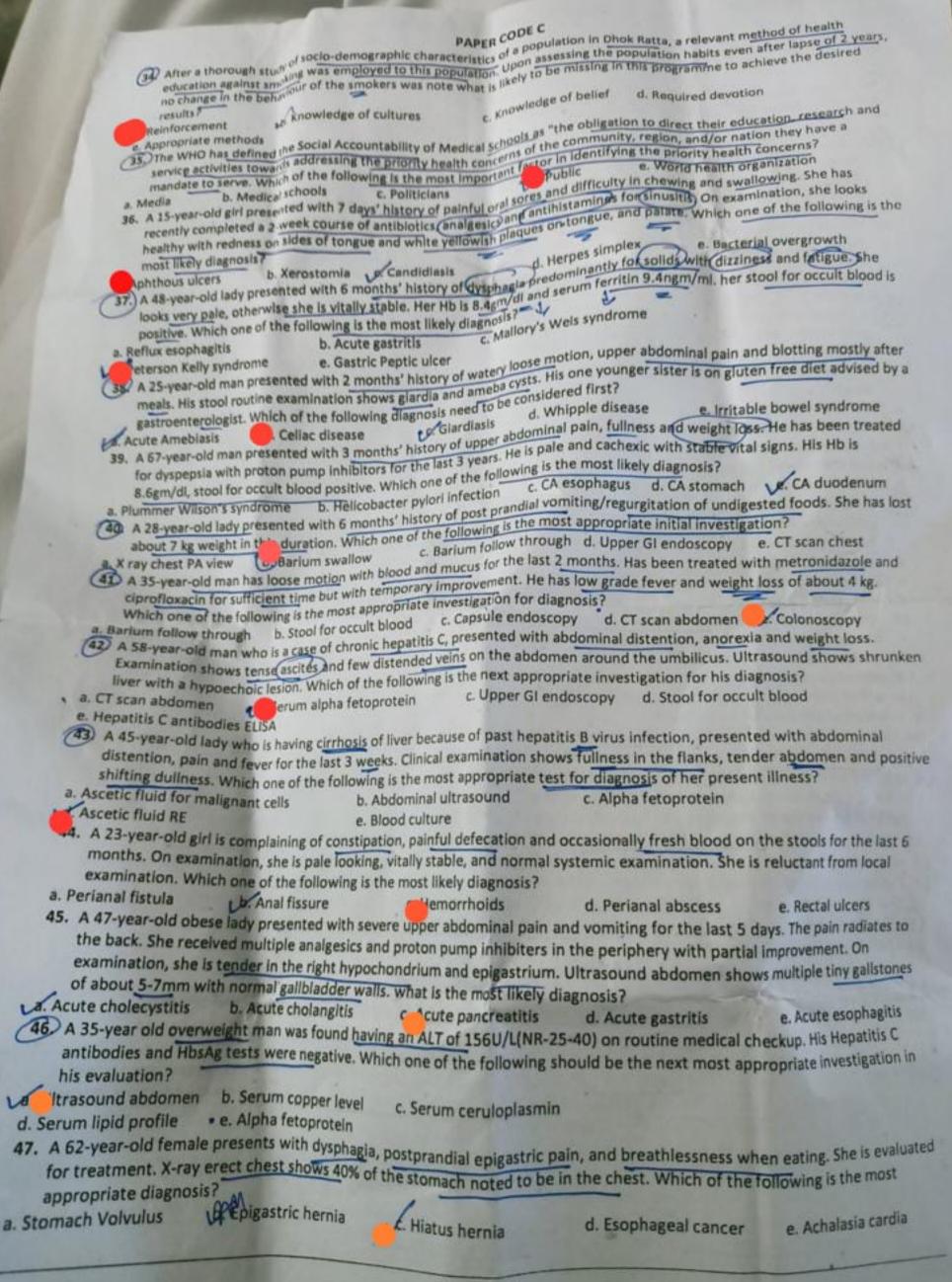
104.A 32 year old woman pr	resents with complaints of several mor	nths of burning substernal ches	t pain exacerbated by large
	affeine. Her symptoms are worse when		Willie Siceping of mgile. Allege
	ptoms. This patient is at risk for which		c. Esophageal web
a. Cardiac ischemia	b. Columnar metaplas		c. Esophagean wes
d. Leiomyoma of the esoph			
	ce of a fatal alkaline ingestion might inc		kin
a. Erosion with hemorrhagi		is c. Yellow discoloration of s	KIII
d Liquefactive necrosis	e. Perforation of the g		n external examination On
106.Dead body of a young	female was brought for autopsy. There	was no evidence of any injury o	ting of bloody matters, and
inquiry from the relati	ves, they gave history of ingestion of a	in this case is poisoning due to:	ting of bloody matters, and
	minutes. The probable cause of death	d. Corrosive sublimate	e. Oxalic acid
di / ii buii di d	b. Calomel Carbolic acid	d. Corrosive subminate	C. Oxalic dela
107. Tremors in Hatter's sh	b. Coarse and involve hands	c. Coarse and unintentiona	
a. Coarse and intentional	e. Fine and involve hands	c. coarse and dimiteritions	
d. Fine and intentional	to the specimen of vomitus of a suspec	rted case of acute copper poison	ing for confirming diagnosis is:
		ithium hydroxide d. Potassi	um hydroxide
a. Ammonium hydroxide	b. Calcium nyuroxide C. L.	icinam nyarozao	
e. Sodium hydroxide	ion red velvety appearance of stomach i	is seen in:	
		c. Chronic lead poisoning	
d. Chronic mercury poison	o Chronic thallium noisoning		
	antad to the Emergency Department wit	th pain in mouth, throat, esophag	gus, abdomen, having dysphagia
		ng linon further examination, it	Was icicalca miner
has the ability to extr	ract water from tissue, liberate heat, and	d causing coagulation necrosis wh	en ingested. Which poison was
ingested by the patie	ent?		
	· · · · · · · · · · · · · · · · · · ·	oxide d. Sodium hydroxi	de e. Thallium sulfate
		accidently All were reported to	the Emergency Department,
while third person h	ad mild symptoms only. What could be t	he functional deformity in the th	ru person reading to mile
X symptoms only?		A theokalamia	e Hyponatremia
/ a Anemia b. Hype		Water siven to the duty Medi	co-legal officer was of poisoning.
112.A dead body brough	t to the Autopsy room, by the local policere was dark brown staining and garlic oc	dour of the stomach. What is the	most likely poison in this
On examination, the	ere was dark brown stalling and game		
condition? a. Aniline dye b. Carl	bon dioxide c. Hydrochloric acid	d. Phosphine	r. Phosphorus
113.A group of travelers	s had a visit to Kumrat. A lady of middle a	ge was suddenly found dead on or	re, the fatal period was
camp. The crime so	ene shows that she was in a closed space minutes and the phenomena by which do	eath occurred was Cytotoxic Anoxi	a. Which specimen would be
recorded as 2 to 10	minutes and the phenomena by which do		
considered as best	sample for confirmation of the poison?  c. Lungs  d. Spleen	e. Urine	
A G. DIOOC		ency department of a tertiary care	hospital. A wasner-men
assessed with irr	itation, itching and painful blisters, mere v	vere eczematous eruptions of the	surrounding skin resembling a
bruise. What is the	e most likely causative agent in this case:		e. Semecarpus anacardium
a Fabrus precatorius	b. Calotropis procera	sildiii	
115."Punctate basoph	ilia" is diagnostic feature of: soning b. Chronic mercury poisoning	c. Chronic antimony poisoning	g
a. Chronic arsenic pois	s poisoning e. Chronic lead poisoning		
116 The vomitus and	stool are luminous in dark iii.		
a. Acute arsenic poiso	ning b. Acute mercury poisoning	c. Acute antimony poisoning	
A sute phosphorus	noisoning e. Acute lead poisoning		
	lor of urine is observed in poisoning due to:	Mercury e. Phosphorus	
a Oxalic acid b. C	ing" about rapidity of death is about:		
a. Carbolic acid b. C	oxalic acid c. Arsenic d. I	Mercury e. Thallium	
119 Phossy jaw is see	en in:	c. Chronic phosphorus poison	ing.
a. Chronic cannabis p	ooisoning. b. Cilionic alcohol poisoning.	c. cilionic phosphia	
A CONTRACTOR OF THE CONTRACTOR	ne should be given as antidote in poisoning d	lue to:	Aethyl alcohol
a. Opiates	Hydrocyanic acid c. Paracetamol	d. Barbiturates e. r	Methyl alcohol
a. Opiaces			

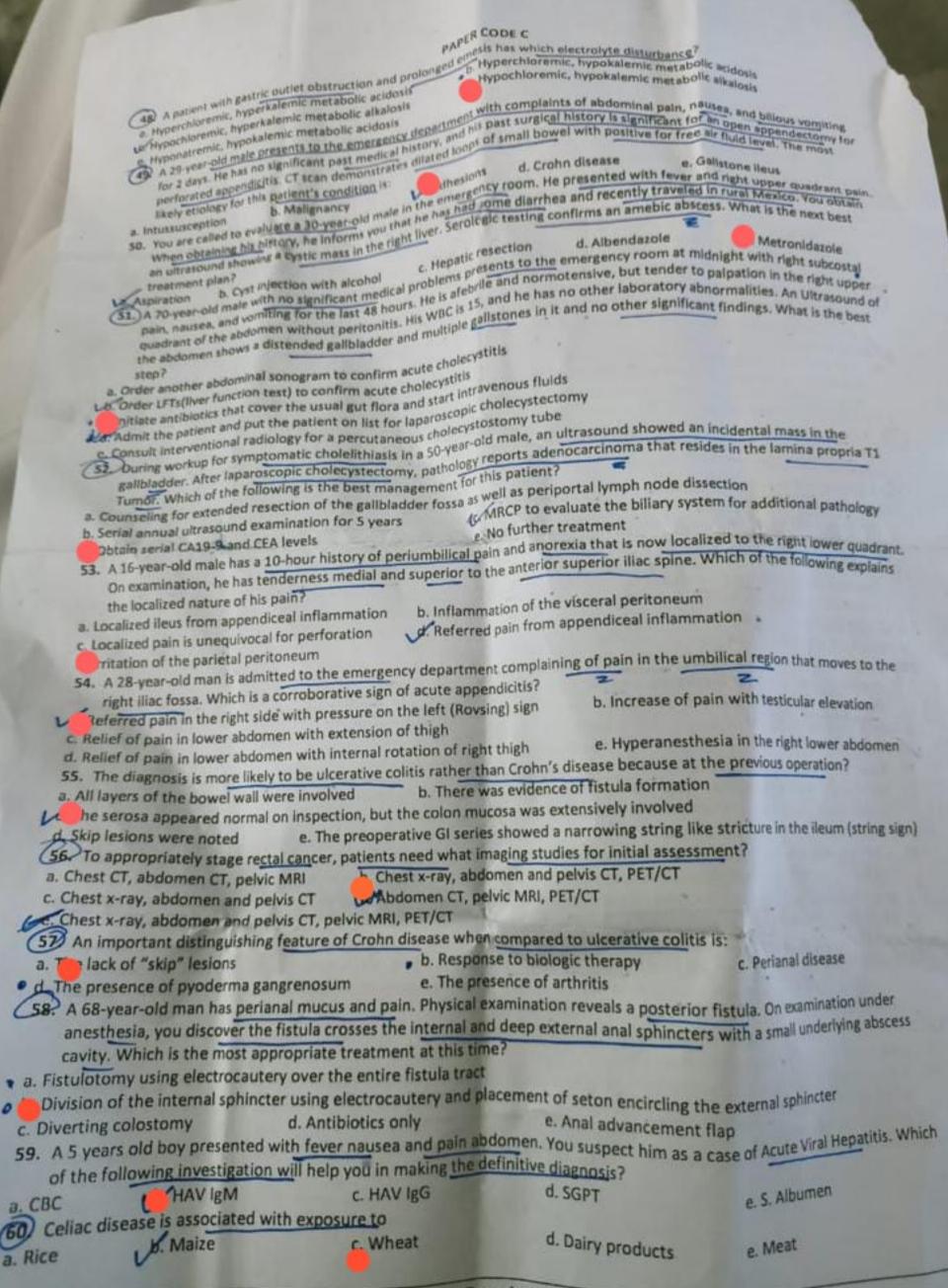
	PAPER Coppulation in Dhok Ratta, a relevant method to paper of 2 years,
After a thorough study of socio-demographic charac	teristics of a population in Dhok Ratta, a relevant method of a population in Dhok Ratta, a relevant method of a period of a population habits even after lapse of 2 years, teristics of a population habits even after lapse of 2 years, teristics of a population habits even after lapse of 2 years, teristics of a population habits even after lapse of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population habits even after lapse of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population habits even after lapse of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of a population in Dhok Ratta, a relevant method of 2 years, teristics of 2 yea
education against smillour of the smokers was note	what is likely to
results 7 Anowledge of cultures	edical schools as "the obligation to direct their education, research and edical schools as "the community, region, and/or nation they have a lith concerns of the community the priority health concerns?  If what is like the community of their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education, research and edical schools as "the obligation to direct their education they have a little concerns" and schools as "the obligation to direct their education they have a little concerns" as "the obligation to direct their education they have a little concerns" as "the obligation to direct their education they have a little concerns as "the obligation to direct their education they have a little concerns" as "the obligation to direct their education they have a little concerns as "the obligation to direct their education they have a little concerns" as "the obligation to direct their education they have a little concerns as "the obligation to direct their education they have a little concerns" as "the obligation to direct their education they have a little concerns as "the obligation to direct their education they have a little concerns" and "the obligation to direct their education they have a little concerns and "the obligation to direct their education they have a little concerns" and "the obligation they have a little concerns and "
e. Appropriate methods the Social Accountability of M	edical schools as "the obligation to direct their education they have a self-based of the community, region, and/or nation they have a although the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community, region, and/or nation they have a self-based of the concerns?  Ith concerns of the community is self-based of the concerns?  Ith concerns of the community is self-based of the concerns?  Ith concerns of the community is self-based of the concerns?  Ith concerns of the concerns o
service activities towards addressing the priority her	t Important factor while e. World health organization
mandate to serve. Whit schools c. Politicians	sores and difficulty in chewing and swallow
a. Media	aliful oral sores and difficulty in chewing and swallowing. She has aliful oral sores and difficulty in chewing and swallowing. She has aliful oral sores and difficulty in chewing and swallowing. She has aliful oral sores and difficulty in chewing and swallowing. She has aliful oral sores and difficulty in chewing and swallowing. She has aliful oral sores and difficulty in chewing and swallowing, she looks aliful oral sore on tongue, and palate. Which one of the following is the aliful of the same of the following is the adordinantly following with dizziness and fatigue. She adordinantly following the same stool for occult blood is
recently completed a 2 week course of antibiotics a	allowish plaques or torio
healthy with redness on storigue and write y	d. Herpes simplex e. Bacterial overgrowth d. Herpes simplex e. Bacterial overgrowth dizziness and fatigue. She
most likely diagnostic b. Xerostomia o Candidiasi	redominantivin 9.4ngm/ml, her stool for occult blood is
37.) A 48-year-old lady presented with 6 months' history	e. Bacterial overgrowth  d. Herpes simplex  e. Bacterial overgrowth  d. Herpes simplex  e. Bacterial overgrowth  dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fatigue. She  of dysphagia predominantly fol solids with dizziness and fa
looks very pale, otherwise she is vitally stable. Her H positive. Which one of the following is the most likel  Beflux esophagitis  b. Acute gastritis	y diagnosis?  C: Mallory's Wels syndrome
positive. Which one	Mailory
a. Reflux esophagitis  e. Gastric Peptic ulcer	loose motion, upper abdominal pain and blotting mostly after
A 25-year-old man presented with 2 months' history	of watery loose motion, upper abdominal pain and blotting mostly after of watery loose motion, upper abdominal pain and blotting mostly after of watery loose motion, upper abdominal pain and blotting mostly after of watery loose motion, upper abdominal pain and blotting mostly after of watery loose motion, upper abdominal pain and blotting mostly after of water loose water lo
meals. His stool routine examination shows glardia a gastroenterologist. Which of the following diagnosis  Acute Amebiasis  b. Celiac disease	and amedia considered first
gastroenterologist. Which of the following diagnosis	need to be to d. Whipple disease e. Irritable bowel syndrome ardiasis of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and cachexic with stable vital signs. His Hb is
Acute Amebiasis . b. Celiac disease	of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain, fullness and weight loss. He has been treated of upper abdominal pain and upper abdominal pain abdominal pain and upper abdominal pain and upper abdominal pain and upper abdominal pain and upper abdominal pain abdominal pain and upper abdominal pain and upper abdominal pain and upper abdominal pain abdominal pain and upper abdominal pain and uppe
39. A 67-year-old man presented with 3 months installed	3 years. He is the most likely diagnosis?
a Plummer Wilson's syndrome b. Helicobacter pylori	f post prandial vomiting/regurgitation of undigested foods. She has lost
A 28-year-old lady presented with 6 months' history of	of post prandial vomiting/regurgitation of undigested foods. She has lost collowing is the most appropriate initial investigation?  Fium follow through d. Upper GI endoscopy e. CT scan chest
about 7 kg weight in this duration. Which one of the	rium follow through d. Upper GI endoscopy e. CT scan chest
X ray chest PA view (b) Barium swallow with blood and m	nucus for the last 2 months. Has been treated with metronidazole and provement. He has low grade fever and weight loss of about 4 kg.
A 35-year-old man has loose motion with temporary in	provement. He has low grade fever and weight loss of about 4 kg. estigation for diagnosis?
Which one of the following is the most of	Cancille endorseent der Ld-
Tollow through h Studies	aracontod with sheep-i
A 58-year-old man who is a case of chronic hepatitis co	ins on the abdomen around the umbilicus. Ultrasound shows shrunken the next appropriate investigation for his diagnosis?
lives with a shows tense ascites and few distended ve	the next appropriate investigation for his diagnosis?
a. CT scan abdomen b. Serum alpha fetoprotein	c. Upper GI endoscopy d. Stool for occult blood
e. Hepatitis C antibodies ELISA	The second secon
A 45-year-old lady who is having circhosis of liver becau	se of past hepatitis B virus infection, presented with abdominal
distention, pain and fever for the last 3 weeks. Clinical	examination shows fullness in the flanks, tender abdomen and positive
Shifting duliness tage	appropriate test for diagnosis of her present illness?
a. Ascetic fluid for malienant cells b. Abdominal u	trasound c. Alpha fetoprotein
e. Blood culture	
44. A 23-year-old girl is complaining of constipation, painfu	defecation and occasionally fresh blood on the stools for the last 6
examination, she is pale looking, vitally state	le, and normal systemic examination. She is rejuctant from local
examination. Which one of the following is the most like	ely diagnosis?
a. Perianal fistula . Anal fissure c. Hem	orrhoids d Perianal abscess e Rectal ulcers
45. A 47-year-old obese lady presented with severe upper a	bdominal pain and vomiting for the last 5 days. The pain radiates to
the back. She received multiple analgesics and proton p	ump inhibiters in the periphery with partial improvement. On
CAGITITION SILE IS TENDER IN the right hypochondelium	and a state of the
of about 3-7mm with normal galloladder walls, what is t	he most likely diagnosis?
a. Acute cholecystitis b. Acute cholangitis c. Acute	
46 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 and	the following should be the next most appropriate investigation in
his evaluation?	the following should be the next most appropriate investigation in
W. Ultrasound abdomen b. Serum copper level c. Serum	NAME OF TAXABLE PARTY.
c. Serun	ceruloplasmin
d. Serum lipid profile • e. Alpha fetoprotein	
47. A 62-year-old remaile presents with dysphagia, postprane	lial epigastric pain, and breathlessness when eating. She is evaluated
IDI LI CALITICITA A TOTAL TOTAL OF THE STATE	ch noted to be in the chest. Which of the following is the most
appropries and a second	CITIOLES CO. S. T. C.
- Liveling the College Stric hernia	hernia d. Esophageal cancer e. Achalasia cardia
V Hiatu:	hernia d. Esophageal cancer e. Achalasia cardia



A A

62) A	87) B (1) C
63) D	88) A (13) E
64) C	89) D (B) C
65) C	90) E (114) E
66) B	91) C (115) E
67) D	92) D (16) D
68) D	
69) D	93) A (118) B
70) A	94) C (19 C
71) D	95) A (20 C
72) B	96) B [PAPAL (C)
737 D	97) D (34) A (5) D (5) A
79) B	98) C 35 €
75) C	99) B (37) E (S4) A
76) B	(M) ( 38) B (SS)
777 C	(1) E (39) D (50) E
78) E	100 R (40)
79) d	111 0
80) C	WILL R
81) E	10C) D (30)
82)E	106) E (45) BA (61)
83) A	107) A (46) A (67)
84) D	108) EA (97) C
85) B	
86) B	
	110) D (49) C





negative, but his Liver function tests were markedly deranged. Keeping in mind the window period for Hepatitis B virus

77. Which of the following viral infections can result in chronic carrier state?

c. HDV

a. Alcoholism Barrett's esophagus c. Nitrosamines

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

d. HEV

d. Plummer Vinson syndrome

e. Smoking

e. HGV

infection, which out of the	following serological markers if positive	we will help you in diagnosis?	
	b. Hepatitis B e antigen	c. Hepatitis B e antibo	ndu
d. Hepatitis B core antigen	a Manatitie Deserved	TO THE PARTY OF TH	1000
	with extremely foul smelling, watery of sent for routine examination revealed population you diagnose the trophozoite on stool	diarrhea for the past 3 days, pre	ceded by severe nausea are preparations. Which out of the
D. F	Dur nuclei c Ingested Food matter	d toward took	15.50
80. Which out of the following	g is the tape worm having freshwater fis	d. Ingested RBCs	e. None of the above
	aenia saginata Diphyllobothri	um latum d Echiposes	ost in their life cycle?
e. All of the above			cus granulosus
right hypochondrium. Lab features on liver biopsy wil	to OPD with complaints of malaise, letter from a road side quack. On examination investigation shows that the patient has a confirm chronic hepatitis	on the patient has yellow sclera s viral hepatitis. Which of the fo	And the second second
82. A 24 years old male college examination the patient had hepatitis is the most probactase?	Balloon cells creellular blebs e student presented to emergency departs as pallor and is tender in right hypochon ble diagnosis in this case. Which one of	ortment with complaint of right	and almost all the state of the
a. Apoptotic hepatocytes	b. Ground glass hepatocyt	es c. Lobular disarray	
d. Lymphocytes in the portal tra	Mallory bodies		
megaloblastic anaemia and	esented with abdominal pain and chron	ic diarrhea. His peripheral bloo	d smear revealed
the most likely parasite res	stool R/E revealed characteristic oval s ponsible for this condition?	haped eggs with a lid like oper	culum at one end. What is
Diphyllobothrium latum			
d. Hymenolepis nana		c. Echinococcus multilocularis	
	story of travel in forest area has chronic	abdominal discomfort and dis-	adam continue
reveal motile pear shaped of	organisms. What is the most probable d	iagnosis?	rrnea. Stool examination
a. Amediasis b. Bacterial dy	sentery c. Cholera	Giardiasis a Irritable be	wel syndrome
the histopathologist obser	the specimen of intestinal biopsy of a 5 wes that there is atrophy and sloughing o one of the following is the most likely di	of years old patient who was op	erated for acute abdomen
a. Mucosal ischemic infarction			omucosal ischemia
e. Transmucosal ischemic infarc	t		THE COLUMN STATE OF THE CO
86. In Peutz Jeghers syndrome, network enclosing glands lie apt description for these les	there are hundreds of polyps lining the ned by normal intestinal epithelium with signs?	intestinal mucosa. They are con numerous goblet cells. Which	nposed of fibromuscular of the following is the mos
	Hamartomas c. Mucinous cyst a	denoma d Tubular ad-	
87. A 30 year old patient complete leaning forwards. Laborator Leukocyte count is also increase.	aints of sudden onset severe epigastric y investigations show elevated levels of eased. What is the most likely diagnosis	pain which radiates to the back serum bilirubin, Alaine transam in this case?	The pain is relieved by ninase, amylase and lipase.
88. A 12 years old female patier examination, the patient wa segmented eggs and eggs w cause?	nt was brought to OPD with complaint of as anemic and had tenderness in abdome with actively motile Rhabditiform larvae of the complaint of th	of abdominal pain and diarrhoea	for one day. On
Ancylostoma duodenale	b. Ascaris lumbricoides c. Hymer	nolepsis nana d. Taeniasis	e. Trichuris trichiura
Total Bilirubin	All of 28 Kg/m2 who is a known patient of		itus has following LFTs:
Total bilirubin	0.7 mg/dl	(<1.1)	
ALT	94 U/L	(< 42)	
ALP	145 U/L	(05 203)	
The state of the s	145 U/L	(85- 307)	
Albumin	46 g/L	(35-50)	
What is the most likely explanati a. Primary Biliary Cirrhosis Non-alcoholic fatty liver diseas	Primary Sclerosing Cholar se e. Wilsons disease		
a rotal pilli dolli concentratio	perienced gradually increasing malaise, on of 7.8 rag/dL, AST of 19U/L, ALT of 22 f hepatocytes at the limiting plate with p	O II/I and alkaling phosphatase	AFREITH ATT

d. Hemochromatosis

HCV infection

c. HAV infection

tracts. These findings are most typical for?

a. Congestive heart failure b. Choledocholithiasis

104.A 32 year old woman present	s with complaints of several month	hs of burning substernal chest p	pain exacerbated by large
meals, cigarettes and carreine	e. Her symptoms are worse when s	the fellowing and distance	ville steeping at mgnt. Antaci
	. This patient is at risk for which of		Facabaggal wab
a. Cardiac ischemia	Columnar metaplasia		Esophageal web
d. Leiomyoma of the esophagus			
	fatal alkaline ingestion might inclu		
a. Erosion with hemorrhagic exuc		c. Yellow discoloration of skir	1
	e. Perforation of the ga		SAUDO DE LA CAMADA DE COMPENSADA DE COMPENSA
inquiry from the relatives, th	e was brought for autopsy. There we sey gave history of ingestion of a cry tes. The probable cause of death in	ystalline salt, followed by vomition this case is poisoning due to:	ng of bloody matters, and
Arsenious oxide b. Cald	omel	d. Corrosive sublimate	e. Oxalic acid
107. Tremors in Hatter's shake ar	e:		
a. Coarse and intentional	b. Coarse and involve hands	Coarse and unintentional	
d. Fine and intentional	e. Fine and involve hands		process and the second second
108.Chemical agent added to the Ammonium hydroxide e. Sodium hydroxide	b. Calcium hydroxide c. Lith	ed case of acute copper poisonin nium hydroxide d. Potassiur	g for confirming diagnosis is: n hydroxide
109.On autopsy examination re-	d velvety appearance of stomach is	seen in:	
Chronic arsenic poisoning	b. Chronic copper poisoning	c. Chronic lead poisoning	
i at t and antender	e. Chronic thallium poisoning		-b-d basing durahagia
and hematemesis, and was has the ability to extract was	to the Emergency Department with suspected to be a case of poisoning ater from tissue, liberate heat, and o	tinon further examination, it is	n ingested. Which poison was
wherein two were severe s	opper arsenate  Ik industry ingested some powder acceptance of the symptomatic with headache, anxiety d symptoms only. What could be the	ccidently. All were reported to the	Emergency Department, ea and cherry red appearance
X symptoms only?	emia Hypochlorhydria	<ol> <li>d. Hypokalemia e.</li> </ol>	Hyponatremia
a. Anemia b. Hypernatro  112.A dead body brought to th  On examination, there wa	emia Hypochlorhydria e Autopsy room, by the local police. s dark brown staining and garlic odo	Water siven to the duty Medico	legal officer was of poisoning, ost likely poison in this
condition?		d Dharabina	hosphorus
camp. The crime scene sh	oxide c. Hydrochloric acid i visit to Kumrat. A lady of middle age lows that she was in a closed space ar tes and the phenomena by which dea e for confirmation of the poison?	was suddenly found dead on one	side of the valley in her the fatal period was Which specimen would be
considered as best sample	oungs d. Spleen	e. Urine	
a. Blood b. Lives		cy department of a tertiary care ho	spital. A washer-men
	itching and paintui busters. There we	re eczematous eruptions of the sur	Tounding skill resembling a
bruise What is the most	likely causative agent in this case.		e. Semecarpus anacardium
- reheur procestorius b.	Calotropis procera C. Croton digin	um d. Flambago rosco	
115."Punctate basophilia" is	b. Chronic mercury poisoning	c. Chronic antimony poisoning	
a. Chronic arsenic poisoning		and the property of the second	
d. Chronic phosphorus poiso 116. The vomitus and stool a	re luminous in dark in:		
a. Acute arsenic poisoning	6. Acute mercury poisoning	c. Acute antimony poisoning	
a	ne e. Acute lead poisoning		
117.Smokey green color of t	acid c. Arsenic d. M	ercury e. Phosphorus	
118."Christison's saying" ab	out rapidity of death is about:	ercury e. Thallium	
a. Carbolic acld Oxalic a 119.Phossy jaw is seen in:	CIO TELEFORMINI STATE		
a. Chronic cannabis poisonir	A CHIDING ICOG POISONING	c. Chronic phosphorus poisoning	
120.N – acetylcysteine shou a. Opiates & Hydroc	IIQ DE BIAGU DE BULLIAGUE IN PROPERTIES AND	e to: d. Barbiturates e. Me	thyl alcohol