

BLOCK K PREPROFFS

| | | |
|----|--------------------|-----|
| 1. | GIT PATHOLOGY | 425 |
| 2. | GIT PHARMACOLOGY | 442 |
| 3. | GIT MEDICINE | 452 |
| 4. | GIT SURGERY | 465 |
| 5. | FORENSIC MEDICINE | 467 |
| 6. | COMMUNITY MEDICINE | 473 |
| 7. | MICROBIOLOGY | 481 |
| 8. | PEADS | 486 |
| 9. | LIVER PATHOLOGY | 487 |

1. PATHOLOGY

PAPER WMC

1. A 14 years old male is found to have multiple almost 120 colonic polyps and few almost 3 stomach polyps on coloscopy and endoscopy respectively. His grandfather died of colonic adenocarcinoma. He has also some vision problem. What syndrome he is likely suffering from?

- Juvenile polyposis
- Peutz - Jeghers polyposis
- Hereditary non polyposis colorectal cancer/ HNPCC
- Familial adenomatous polyposis/FAF
- Irritable bowel syndrome

2. There is a well circumscribed tumor having nests of monomorphic cells with salt and pepper chromatin incidentally found in gastrointestinal tract of a patient operated for another reason. The most common likely site of this tumor in GIT is.

- Stomach
- Biliary tract
- Rectum
- Appendix
- Liver

3. A 65 years 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 epithelioid granulomas along with crypt abscess and distortion. These are the characteristics findings of?

- Crohn's disease
- Ulcerative colitis
- Celiac disease
- Tropical sprue
- Microscopic colitis

4. A 13 months old baby has on off watery diarrhea since the start of weaning at 6 months. What serological marker would support the likely diagnosis in this patient?

- Serum amylase
- TyphidotIgM
- Tissue trans glutaminase antibody
- P - ANCA
- TyphidotIgG

5. A polyp resected from colon of 11 year old male mucocutaneous freckles has a lobulated contour with Christmas tree like appearance. On microscopy stroma of polyp is resected by arborizing network of smooth muscles with complex glands in between. What type of polyp this?

- Hyperplastic polyp
- Juvenile polyp
- Villous adenoma
- Inflammatory polyp
- Peutz-jeghers polyp

6. A young patient presented with chronic gastritis along with megaloblastic anemia. His serum B12 and folate levels are in process. Biopsy of gastric mucosa has been seen. The most likely findings in biopsy should be.

- a. 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

7. A 65 years old male smoker presents with right sided parotid tumor. Histological examination of biopsy reveals papillae lined by pink oncolytic cells with dense underlying lymphocytic infiltrates in stroma. Which of the following is most likely diagnosis?

- a. Pleomorphic adenoma
- b. Warthin tumor
- c. Carcinoid/ low grade neuroendocrine tumor
- d. Mucoepidermoid adenocarcinoma
- e. Bronchogenic adenocarcinoma

8. Which of the following are the characteristics of right sided colon tumor?

- a. It is not found in HNPCC patients in contrast of left sided colon cancers
- b. It doesn't differ significantly from left sided colon cancer in clinical presentation
- c. Late presents as metastasis in bone and always moderately differentiated adenocarcinoma
- d. Early presents with abdominal discomfort, change in bowel habits and obstruction as constricting mass and shows range of differentiation in history
- e. Late presents with iron deficiency anemia as exophytic mass and mucinous or poorly differentiated in microscopy

9. A 54 year old man with a long history of indigestion after meal and heart burn presents with upper abdominal pain. He was treated with proton pump inhibitors for gastroesophageal reflux e years previously. An endoscopic biopsy of the lower esophagus shows glandular metaplasia. He is at increased risk of developing which of the following disease of the esophagus?

- a. Achalasia
- b. Adenocarcinoma
- c. Candidiasis
- d. Plummer Vinson syndrome
- e. Varices

10. A 30 years old male presents with dementia demeballism and dearranged their enzymes. On further evaluation its abdominal ultrasound shows cirrhosis of liver. His viral serology is negative. What is the most likely next ending in this patient?

- a. Periodic acid schiff stain shows red cytoplasmic granules in hepatocytes
- b. Kayser heisher rings in cornea
- c. Highly increased alpha feto proteins
- d. Anti mitochondrial antibodies in blood
- e. Central cyanosis

11. A 30 year old married woman presents to gynaecology OPD for routine check up. She is taking oral contraceptives pills for contraception for the last r years. She reports slight discomfort in the right hypochondrium. Alpha protein levels is essentially within normal limits. Ultrasound shows space occupying lesion. She is physically fine otherwise. This lesion is most likely

- a. Hepatocellular carcinoma
- b. Hepatic adenoma
- c. Angiosarcoma
- d. Hepatic amebiasis
- e. Echinococcus granulosus cyst

12. A 65 years old woman dies of metastatic liver at autopsy shows a multinodular vascular tumor that histologically is composed of anastomosing channels lined by anaplastic endothelial cells. The Liver parenchyma between tumor nodules appears normal. The histopathologist gives a preliminary diagnosis of angiosarcoma of the liver. Which of the following risk factors is associated with this form of liver cancer?

- a. Cirrhosis
- b. Hemochromatosis
- c. Exposure of vinyl chloride
- d. Hepatitis B viral infection
- e. Oral contraceptive use

13. A 60 yrs old lady presents with a small swelling at the angle of jaw for last two years which is painless. On exam it is non tender and palpated as discrete mass . Surgeon wants to excise the lesion but he is worried about the facial nerve that may get damaged during the excision. What is most likely the diagnosis?

- a. Saladenitis
- b. Warthin tumor
- c. Parotitis
- d. Papillary cystadenoma
- e. Pleomorphic adenoma

14. A 35 years old female was admitted in hospital for severe pain in right hypochondrium. Ultrasound revealed gall stones. Elective laproscopic surgery of her gallbladder was done and specimen was sent for histopathology. The histopathologist mentions ROSITASKY - ASCHOFF sinuses in his report. These are characteristics of?

- a. Acute cholecystitis
- b. Chronic cholecystitis
- c. Acute pancreatitis
- d. Acute hepatitis
- e. Chronic Hepatitis

15. During the pathogenesis of pancreatitis which enzyme after activation from its proenzymes and clotting, kinin and compliment systems?

- a. Phospholipase
- b. Trypsin
- c. Elastase
- d. Alpha amylase
- e. Lipase

16. An outbreak of acute hepatitis in this month of July and August is traced to the mixing of sewage with drinking water. The patients had jaundice, arthralgias and low grade fever. Transaminases were markedly raised. None of the patients died during the outbreak, both were pregnant females. What is the likeliest cause of this outbreak?

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

17. A diabetic patient with raised ALT has steatosis and parenchymal inflammation with Mallory bodies on biopsy of liver. The most likely findings in biopsy are of.

- a. Chronic Hepatitis
- b. Acute hepatitis
- c. Steatohepatitis
- d. Autoimmune hepatitis
- e. Drug induced hepatitis

18. A department of pathology reviews pathology reports of colorectal adenomas over the past 15 years and correlates them with clinical data. What set of factors is the most likely to correlate with the risk of developing colorectal carcinoma?

- a. Polyp size, histologic size , severity of dysplasia
- b. Polyp size and anatomic location
- c. Patient age , polyp size
- d. Polyp size and gender of patient
- e. Patient age and histologic type

19. A 70 years old lady who is in case of colon cancer. On biopsy her cancer has invaded the muscularis propria two paracolic nodes are involved with no metastasis. What is the TNM stage of her Colon cancer?

- a. T2N1M0
- b. T1N2M0
- c. T2N2M0
- d. T2N1M1
- e. T2N0M0

20. A patient develops anemia and weight loss and abdominal discomfort. On questioning the patient is a known case of chronic gastritis. Which of the following type of malignancy is most strongly associated with this patient condition?

- a. Gastric lymphoma
- b. Intestinal type of gastric adenocarcinoma
- c. Diffuse type of gastric adenocarcinoma
- d. Squamous type of oesophageal carcinoma
- e. Adenocarcinoma of esophagus

21. A 50 year old man was a history of alcohol abuse is found to have elevated liver enzymes. A liver biopsy shows the microscopic features of fatty change (steatosis). If the patient abstains from further drinking, this condition will most likely evolve into which of the following?

- a. Acute hepatitis
- b. Chronic Hepatitis
- c. Complete regression
- d. Hyperplastic nodules
- e. Malignant degeneration

22. A 54 year old woman complaints of burning pain in her epigastrium and vomiting a few days after she started taking medication for her rheumatoid arthritis. Which of the following forms of gastritis would most likely be found in this patient?

- a. Acute gastritis
- b. Chronic antral gastritis
- c. Chronic fundal gastritis
- d. Hypertrophic gastritis
- e. Lymphocytic gastritis

23. 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. Antacid 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

24. A 40 year old woman presents with a 2 months history of burning epigastric meals . The pain can be revealed with antacids or food. The patient also reports a recent history of tarry stools. She denies taking aspirin or NSAIDs. Laboratory studies show a microcytic hypochromic anemia. Gastroscopy reveals a bleeding mucosal defect in the antrum measuring 1.5 cm in diameter. An endoscopic biopsy shows that the lesion lacks mucosal lining cells and is composed of amorphous, cellular debris and numerous neutrophils. Which of the following is the most likely important factor in the pathogenesis of this patient's disease?

- a. Achlorhydria
- b. Acute aschemia
- c. Autoimmunity
- d. Gastrinoma
- e. Helibacter pylori infection

25. A 60 year old man presents to his physician because of progressive dysphagia, first to solid and then to liquids. Endoscopy reveals a large founding mass 2 cm above the gastroesophageal junction. Biopsy of the mass shows that the glands have extended into muscular layer and contain large hyperchromatic nuclei. A diagnosis of esophageal adenocarcinoma is made. Which of the following conditions can result in the development of this lesion?

- a. Esophageal rings
- b. Esophageal webs
- c. Reflux esophagitis
- d. Scleroderma
- e. Sliding haital hernia

26. A WINDOW period in the hepatitis B serology means?

- a. When hepatitis B antigen disappear but hepatitis B antibody has not appeared yet
- b. When hepatitis B antigen disappear but hepatitis c antibody is not appeared yet
- c. When hepatitis B,C antigen disappear but hepatitis c antibody has not appeared yet
- d. When HBV DNA disappears but hepatitis B surface antibody has not appeared yet
- e. When hepatitis B antigen disappear but hepatitis c antibody has not appeared yet

27. In the intestines the fibrosis and bands is caused by which of the following disease.

- a. Typhoid
- b. Tuberculosis
- c. Ulcerative collitis
- d. Acute aschemic colitis
- e. Amebic colitis

28. All are causes of acute pancreatitis except

- a. Alcohol
- b. Insect bite
- c. Gall stones
- d. Biliary structure
- e. Mumps

29. Gastric carcinoma most commonly affects which region

- a. Body
- b. Gastroesophageal area
- c. Pylorus
- d. Antrum
- e. Lesser curvature

30. Which of the following is most sensitive and specific antibody for Celiac disease.

- a. IgG anti-gliadin antibodies
- b. IgG anti endomysial Antibodies
- c. IgG anti reticulin antibodies
- d. IgA anti endomysial Antibodies
- e. IgM anti reticulin antibodies

GMC 2023

1. A peptic ulcer in a sore that forms where the lining of the stomach or duodenum (the first part of the small intestine. has been eaten away by stomach acids or digestive juices in addition to Helicobacter pylori infection of the stomach, what in the most common cause of peptic ulcer?

- a. Consuming very spicy foods
- b. Cigarette smoking
- c. Modgrate use of alcohol
- d. Use of nonsteroidal anti-inflammatory drugs (NSAIDs).
- e. None of the above

2. Typhoid disease usually involves which of the following

- a. Jejunum
- b. Duodenum
- c. Rectum
- d. Ileum
- e. Colon

3. Risk factors for the development of colorectal cancer involves

- a. Colonic polyps
- b. IBD
- c. Age >50 years
- d. Low fibre diet
- e. All of the above

4. Most common tumour of biliary system is

- a. CA gall bladder
- b. Cholangiocarcinoma
- c. Ampullary carcinoma
- d. CA head of pancreas
- e. Hepatocellular carcinoma

5. Benign causes of gastric outlet obstruction involved all except

- a. Peptic ulcer disease
- b. Gastric polyps
- c. Pyloric stenosis
- d. Pancreatic pseudocysts
- e. Worm infestation

6. Most common symptom for Gall stone is

- a. Pain RHC
- b. Vomiting
- c. Constipation
- d. Jaundice
- e. Fever

7. Majority of Gall Stones are:

- a. Cholesterol stones
- b. Pigment stones
- c. Brown pigment stones
- d. Mixed stones
- e. Both a and c

8. Jaundice in viral Hepatitis can be classified under

- a. Congenital hyperbilirubinemia
- b. Haemolytic
- c. Hepatocellular
- d. Obstructive
- e. None of the above

9. Pathogenesis of cholesterol gallstones include except

- a. Cholesterol deposition
- b. Bile stasis
- c. Low bilirubin concentration
- d. High bilirubin concentration
- e. Dehydration

10. Hepatitis A in children can progress to;

- a. Liver cirrhosis
- b. Persistent cholestatic jaundice
- c. Hepatorenal syndrome
- d. Megaloblastic anemia
- e. Viral myocarditis

11. A 60-year-old female with persistent GERD underwent endoscopy. On OGD there was suspicion of Barrett's esophagus so a biopsy was taken. Biopsy showed low grade dysplasia on histopathology. The patient is at greatest risk for which of the following

- a. Squamous cell carcinoma
- b. Adenocarcinoma
- c. Peptic stricture
- d. Pernicious anemia
- e. None of the above

12. Which of the following type of gastritis is associated with pernicious anemia?

- a. Diffuse antral Gastritis
- b. Environmental metaplastic atrophic gastritis (EMAG).
- c. Collagenous colitis
- d. Autoimmune metaplastic atrophic gastritis (AMAG).
- e. None of the above

13. Which one of the following conditions commonly predisposes to colonic carcinoma ?

- a. Ulcerative colitis
- b. Crohn's disease
- c. Diverticular disease
- d. Ischemic colitis
- e. IBS

14. Which of the following is most commonly associated with adenocarcinoma of the oesophagus?

- a. Achalasia cardia
- b. Barrett's oesophagus
- c. Chronic smoking
- d. Plummer vinson syndrome
- e. Lynch Syndrome

15. Which of the following would be the best morphological feature to distinguish ulcerative colitis from Crohn's disease?

- a. Diffuse distributions of pseudopolyps
- b. Mucosal edema
- c. Crypt abscesses
- d. Lymphoid aggregates in the mucosa
- e. None of the above

16. In which of the following conditions of malabsorption, an intestinal biopsy is diagnostic?

- a. Tropical sprue
- b. Celiac disease
- c. Whipple's disease
- d. Lactose intolerance
- e. IBS

17. Upper GI endoscopy and biopsy from lower esophagus in a 48-year-old lady with chronic heart burn shows presence of columnar epithelium with goblet cell. The feature is most likely consistent with?

- a. Dysplasia
- b. Hyperplasia
- c. Carcinoma in-situ
- d. Metaplasia
- e. Anaplasia

18. Most common mechanism of GERD?

- a. Gastritis
- b. Hiatus Hernia
- c. Hypotension at lower esophageal sphincter
- d. Transient decrease in pressure at LES
- e. Varice

19. A patient with cirrhosis is at risk for developing complications. Which condition is most serious and potentially life threatening?

- a. Ascites
- b. Oesophageal varices.
- c. Gastric ulcer.
- d. Hepatomegaly.
- e. Peripheral edema

20. Bilirubin which is insoluble in water is called?

- a. Conjugated bilirubin.
- b. Direct bilirubin
- c. Indirect bilirubin,
- d. Unconjugated bilirubin
- e. Urobilinogen

21. A 50 years old patient came to hospital with diagnosed case of peptic ulcer. Which of the following is most common site for peptic ulcer?

- a. Cecum
- b. Duodenum
- c. Esophagus.
- d. Ileum
- e. Pancreas.

22. A 65 year old male patient was diagnosed with Gastric carcinoma. His biopsy report findings are diffuse infiltrative type (Linitis plastica. gastric cancer typically composed of signet ring cells. The gastric wall is thickened with partial loss of rugal folds but no prominent mass is present. Which of the following mutation is key step in development of this type of Gastric carcinoma?

- a. APC mutations
- b. E-cadherin loss
- c. CDKN2A mutation
- d. TGF-beta mutation
- e. Wnt pathway

23. A 50 year old lady was diagnosed with gastric carcinoma having metastasis in ovaries at the time of diagnosis. The biopsy report showed numerous signet ring cells. What is this metastatic gastric carcinoma in ovaries called?

- a. Krukenberg tumor
- b. Lobular carcinoma
- c. Pouch of douglas tumor
- d. Sister Mary Joseph nodule
- e. Virchow node

24. Which of the following is the most powerful prognostic indicator of gastric cancer?

- a. Barret's esophagus
- b. CDH1 mutation
- c. Depth of invasion.
- d. H. pylori gastritis
- e. Peptic ulcer disease

25. Risk factor for alcoholic liver disease is

- a. Cirrhosis
- b. Hepatitis C infection
- c. Hormones
- d. Obesity
- e. Regular intake of alcohol

26. High risk transmission for HCV

- a. Breast feeding
- b. Fomite transmission
- c. Needle stick injury
- d. Sexual transmission
- e. Vertical transmission

27. Toxic megacolon is a complication of which of the following?

- a. Alcoholic liver disease
- b. Crohn disease
- c. Hepatitis B
- d. irritable bowel syndrome
- e. Ulcerative colitis

28. Granulomas are present in which of the following?

- a. Crohn disease
- b. Hepatitis A
- c. Hepatitis C
- d. Liver cirrhosis
- e. Ulcerative colitis

29. Crohn disease is also known as:

- a. Granulomatous disease
- b. Terminal ileitis
- c. Irritable bowel syndrome
- d. Intestinal perforation
- e. Toxic megacolon

30. Which of the following part of the intestine a involved in Ulcerative colitis?

- a. Colon and rectum
- b. Duodenum
- c. From mouth to anus
- d. Ileum
- e. Small intestine

31. Skin lesions are present in which of the following?

- a. CA colon
- b. Cirrhosis of liver
- c. Crohn disease
- d. Hepatitis A
- e. Ulcerative colitis

32. Choose the incorrect: Hepatitis D virus (HDV).

- a. Is directly causing acute hepatitis
- b. Co-infection with hepatitis B virus (HBV).
- c. Super infection in HBs antigen positive patient
- d. Combined with HBV is a cause of fulminant hepatitis
- e. No vaccine can prevent HDV infection.

33. Hepatotropic viruses are.

- a. A, B and C
- b. A, B, C and D
- c. A, B, C, and E
- d. None of the above
- e. A, B, C, E, and cytomegalo virus

34. Microscopic examination of a histopathology slide shows Mikulicz Aschoff sinuses, the site of biopsy is

- a. Liver
- b. Stomach
- c. Gall bladder
- d. Small intestine
- e. Rectum

35. Most common cause of peptic ulcer disease in a 28 yrs male patient is

- a. Helicobacter pylori infection
- b. NSAIDs
- c. Zollinger ellison syndrome
- d. Cigarette smoking
- e. Eosinophilic gastritis

KGMC 2023

1. In which of the malabsorption causing disease , biopsy is diagnostic for :

- a. Celiac disease
- b. Cystic fibrosis
- c. Whipple disease
- d. Tropical sprue
- e. Lactose intolerance

2. 50 years male diagnosed with stage III colonorectal carcinoma involving only regional lymph nodes with no distant metastasis. Which gene is expected to have mutated in first step of adenoma carcinoma sequence

- a. APC
- b. KRAS
- c. P53
- d. P16

3. Mallory weis syndrome refers to occurrence of hemetamesis as a result of:

- a. Esophageal varices
- b. Peptic ulcer
- c. Gastritis
- d. Mucosal tears at gastroesophageal junction**
- e. Iatrogenic perforation

4. Diffuse intramural thickening with thickening and fibrosis .linitis plastica) is a morphological feature of which type of carcinoma?

- a. Colon
- b. Small intestine
- c. Esophagus
- d. Stomach**
- e. Appendix

5. A 5 years old boy was brought to emergency department with sewere epigastroc pain saliva drooling from mouth herefuses to drink water mother says that she saw him drinking liquid which is used to open drains histopathological finding in his esophagus is :

- a. Eosinophilic esophagitis
- b. Barret esophagus
- c. Chemical esophagitis**
- d. Esophageal varices

6. 70 years old lady presented with difficult swallowing and 9 kg weight loss in the past few months . Endoscopy reveals irregular narrowing of the lower third of esoghagus. Biopsy reveals atypical cuboidal cells around the glands . What's ur diagnosis??

- a. Adenocarcinona**
- b. Esophageal stricture
- c. Scleroderma
- d. Squamous cell carcinoma

7. 50 year old man presentng with nausea for 5 years, physical exam no abnormal fnding. He undergoes upper GI endoscopy and a small area of gastric fundal mucosa has loss of rugal folds. Biopsies taken and microscopic reveal well

diferentated adenocarcinoma. Mucosa of upper GI fve years back

showed patern of chronic infammaton.gastrits).

Which one was the most likely risk factor

- a. Inherent APC mutation
- b. H Pylori infection**
- c. Chronic alcohol
- d. Chronic use of nsaid

8.-----

9. A 39 year old man is having a routine physical examination because of history of colon cancer in his family he has no abdominal tenderness or masses and active bowel sounds are present . However his stool is possitive for occult blood. Colonoscopy is performed . there are 7 polyps found in ascending colon. 3 of these are small 0.5cm pedunculated tubular adenomas.3 are 1 cm tubulovillvous adenomas and 1 is 2cm sessile villous adenoma. In the cecumContaining a focus of well differentiated adenocarcinoma.Which of the following is most likely diagnosis?

- a-PTEN associated syndrome**
- b-Chronic ulcerative colitis
- c-HNPCC
- d-Adenomatous polyposis coli**
- e-Peutz jehgers syndrome

10. Diffuse type of adenocarcinoma show mutation in which gene

- a. CDH-1 - Ecadherin**
- b. APC
- c. KRAS
- d. p16/INK
- e. Beta catenine

11. The most common malignant tumor of stomach is:

- a Lymphoma
- b. Gist
- C. Adenocarcinoma**
- d Carcinoid tumor
- e Angiosarcoma

12. The Mallory-Weiss syndrome refers to the hematemesis occurring as a result of

- a. Esophageal varices
- b. Peptic ulcer
- c. Gastritis
- d. Mucosal laceration

13. Diffuse intramural thickening (leukoplakia) on histological examination, is the feature of which cancer

- a. Stomach
- b. Intestine
- c. Esophagus
- d. Colon

14. A 60-year-old man in state of disorientation brought to ER in coma. He was emaciated with distended abdomen, jaundice, ascites and enlarged liver and spleen. Liver biopsy confirms liver cirrhosis. Which blood test would define this condition?

- a. Alkaline transferase
- b. Alkaline phosphatase
- c. Ammonia
- d. Bilirubin
- e. Urea nitrogen

15. A 50-year-old man with persistent nausea with 5 years of vomiting. Upper GI endoscopy shows gastric fundal mucosa and loss of rugal folds. There was no abnormal abdominal findings. Biopsy shows well-differentiated adenocarcinoma. A 6 years ago his biopsy shows chronic gastritis. Which of the following is the most common cause!!!

- a. Chronic alcohol intake
- b. Vit B12 deficiency
- c. Chronic H.pylori infection
- d. NSAIDs use
- e. chronic H. pylori infection]

16. A 43-year-old lady presents with a general discomfort and increasing tightness in the skin of her face. She reports intermittent pain in the tips of her fingers when exposed to cold. Her fingers and hands are edematous. She is ANCA and antibodies SCL-70 positive. What are gonna be the GIT manifestations in Patient.

- a. Adenocarcinoma of esophagus
- b. Dysphagia

- c. Rupture of the esophagus
- d. Esophageal varices
- e. Sq cell CA of esophagus.

17. Most common location of carcinoid.

- a. Duodenum
- b. Terminal ileum
- c. Appendix
- d. All parts are equally involved
- e. Colon

18. A 45-year-old man with haematemesis died of hypovolemic shock. The distal esophagus that was removed at autopsy shows dilated and tortuous veins, esophageal varices, in the submucosa. Which of the following best characterized pathogenesis of lesion?

- a. Gastroesophageal reflux of acid
- b. Malignant transformation of glandular metaplasia
- c. Motor disorder of distal esophagus
- d. Portal hypertension
- e. Retching

19. 50-year-old man with hemoptysis dies of hypovolemic shock. He has esophageal varices and bleeding esophagus. It is the complication of which disease.

- a. GERD
- b. Hepatitis
- c. Portal hypertension
- d. Esophageal rupture
- e. Esophageal fistula portal hypertension

20. Histologic hallmark of Barrett esophagus is

- a. Columnar epithelium
- b. Cuboidal epithelium
- c. Goblet cells
- d. Parietal cells
- e. Squamous epithelium

21. Menetrier disease is characterized by

Ans- Excessive Mucosal hypertrophy associated with protein loss

22. With respect to the enterohepatic circulation of bile, where are the majority of bile salts reabsorbed?

- a. Duodenum b. Proximal jejunum
c. Terminal ileum d. Colon e. Caecum

23. Cherry tumor in the rectum of a child is called?

- a. Hyperplastic polyp b. Inflammatory polyp
c. Juvenile polyp d. Pseudopolyp
e. Pedunculate polyp

24. 17 year old Celiac disease boy . Laboratory findings show nothing.

Intestinal biopsy shows

- a. Crypt abscess b. Villous atrohy
c. Giant cell d. Eosinophilic infiltration

NWSM 2023

1. Three week after a meal at a restaurant, a 30 year old male develop malaise .He has mild scleral jaundice, fatigue and loss of appetite. His symptoms abate over the next three weeks. On returning the cafe he found that it has been closed by the health department . Which of the following laboratory test finding he is most likely to have?

- a . Hepatitis B surface antibody
b . Hepatitis D IgM antibody
c . Hepatitis C antibody
d . Hepatitis A IgM antibody
e . Hepatitis B core antibody

Q2. A 27 year old pregnant woman presents with constipation and bright red blood coating her stools. On examination, two bluish tender spongy masses are found protruding from the anus. These do not reduce spontaneously. What is the most likely diagnosis in this case.?

- a. Fissure in ano b. Hemorrhoids
c. Perianal hematoma d. Rectal polyp
e. Rectal prolapsed

3. A 76 year old man with a history of right hemicolectomy 3 years ago presented with worsening colicky abdominal pain associated with vomiting and abdominal distension off and on for last four months. On examination, abdomen is distended with no tenderness, rebound or guarding. Bowel sounds are tinkling. What is the most probable diagnosis?

- a. Adhesive bowel obstruction/diseases
b. Crohn's disease
c. Intussusception
d. Intra-abdominal abscess
e. Sigmoid Volvulus

4. Which one of these enzyme appear earlier and persist longer in intra and extra hepatic obstruction?

- a. ALP (alkaline phosphatase)
b. ALT
c. AST
d. GGT(gamma glutamyl transferase)
e. 5'N(5' nucleotidase)

5. From the last 6 days, a previously healthy 38-year-old woman has become increasingly obtunded. She has scleral yellow discoloration. She is afebrile and has a blood pressure of 110/55 mm Hg. Laboratory investigations reveal a prothrombin time of 38 seconds (with a control of 13), an ALT level of 1854 U/L, AST level of 1621 U/L, and serum albumin concentration of 1.8 g/dL. Which of the following additional serum laboratory test findings would you most likely expect to be present?

- a. Hepatitis C virus antibody
b. Increased alkaline phosphatase level
c. Increased amylase level
d. Increased ammonia level
e. Positive antinuclear antibody

6. A 50-year-old female has experienced gradually increasing malaise, Jaundice, and loss of appetite for the last 5 months. She has a total bilirubin concentration of 6.8 rag/dL, AST of 189 U/L, ALT of

200 U/L, and alkaline phosphatase of 36 U/L. A liver biopsy shows piecemeal necrosis of hepatocytes at the limiting plate with portal fibrosis and a mononuclear infiltrate in the portal tracts. These findings are most cal for?

- a. Congestive heart failure
- b. Choledocholithiasis
- c. HAV infection
- d. Hemochromatosis
- e. HCV infection

7. A 49 year old woman has a history of peptic ulcer disease for which she has been treated with proton pump inhibitors. She has had nausea and vomiting for the past 2 months. Upper GI endoscopy reveal 3 circumscribed, round smooth lesions in the gastric body from 1 to 2 cm in diameter. Biopsies were taken and microscopically show the lesions to consist of irregular glands that are cystically dilated and lined by flattened parietal and chief cells. What is the most likely diagnosis?

- a. Fundic glands polyps
- b. Gastric adenomas
- c. Hyperplastic polyps
- d. Hypertrophic gastropathy
- e. Inflammatory polyps

8. A 40 years old male presented with epigastric pain and GERD symptoms. He states that his pain relives with food intake and aggravates with fasting. He has a past history of positive H. Pylori for which he has taken treatment. Ultrasound abdomen is normal. What is the most probable diagnosis?

- a. Gastric Ulcer
- b. Duodenal Ulcer
- c. Cholecystitis
- d. Pancreatitis
- e. OCA colon

9. A 55-year-old man with hypertension and recurrent atrial fibrillation, presented to the ER with history of abdominal pain and bloody diarrhea, colonoscopy revealed hemorrhages and edematous mucosa with slight discoloration. What is the most likely diagnosis?

- a. Pseudomembranous colitis
- b. Ischemic colitis

- c. Ulcerative colitis
- d. Bacterial Dysentery
- e. Irritable bowel syndrome

10. Eman 2 years old girl seen in Paediatric OPD with hx of Chronic diarrhea for the last 6 months. Her stools are bulky and foul smelling with no mucous or blood in it. On examination her weight is on 0.4th centile and there is gaseous abdominal distension with no visceromegaly. What is ther most likely diagnosis

- a. Chronic non specific diarrhea
- b. Celiac disease
- c. Hirschprung disease
- d. Inflammatory bowel disease
- e. Lactose intolerance

11. A 47-year-old woman presents to your clinic with a three-month history of dysphagia. There is no history of drastic weight loss and the patient experiences symptoms when swallowing solids but not liquids. Which of the following is not an obstructive cause of dysphagia?

- a. Pharyngeal carcinoma
- b Esophageal web
- c. Retrosternal goiter
- d. Peptic stricture
- e. Myasthenia Grave's

12. After experiencing malaise and increasing icterus for 6 weeks, a 42-year-old male comes to you for care. You find that he has the following serum serologic test results: negative HAV IgM, positive HBsAg, positive hepatitis core IgM antibody, negative HCV antibody. You are most confident to advise him that?

- a. All serologic test results will become negative in a year.
- b. Complete recovery without sequelae is most probable
- c. Donating blood a month before is the source of his infection.
- d. There is a significant risk for development of fulminant hepatitis.
- e. There is significant risk for development of hepatocellular carcinoma.

13. Over the past 4 days, a previously healthy 38-year-old woman has become increasingly obtunded. She has scleral icterus. She is afebrile and has a blood pressure of 110/55 mm Hg. Laboratory investigations reveal a prothrombin time of 38 seconds (with a control of 13), an ALT level of 1854 U/L, AST level of 1621 U/L, and serum albumin concentration of 1.8 g/dL. Which of the following additional serum laboratory test findings would you most likely expect to be present?

- a. Hepatitis C virus antibody
- b. Increased alkaline phosphatase level
- c. Increased amylase level
- d. Increased ammonia level
- e. Positive antinuclear antibody

14. A 3 month old child is brought by his parents to a GP with complaints of loose motions and nappy rash. Mother says baby was breast fed for 40 days and then switched to cow milk. O/E the child looks alert but irritable and not dehydrated. You order stool for reducing substances which comes out positive. The diagnosis of lactose deficiency is made. What would be the probable cause of it

- a. Congenital lactase deficiency
- b. Primary lactase deficiency
- c. Secondary lactase deficiency due to diarrhea induced by cow milk
- d. Cellac disease
- e. Immunodeficiency

15. A 48-year-old man has increasing abdominal girth and icterus. Serum laboratory findings include a total bilirubin concentration of 5.2 mg/dL, direct bilirubin of 4.2 mg/dL, alkaline phosphatase of 95 U/L, aspartate aminotransferase (AST) of 300 U/L, alanine aminotransferase (ALT) of 158 U/L, total protein concentration of 6.4 g/dl, and albumin concentration of 2.2 g/dL. The prothrombin time is 18 seconds (control, 12 seconds). The blood ammonia level is 105 micromol/L. The most likely cause for these findings is?

- a. Acute hepatitis A infection
- b. Alcoholic liver disease
- c. Choledocholithiasis
- d. Metastatic adenocarcinoma
- e. Primary biliary cirrhosis

16. 40-year-old female presented with chronic diarrhea from last 5 months. There is associated per rectal bleed and mild abdominal pain. The Patient gives history of frequent tenesmus. Conoscopy performed which showed continuous inflammation of rectal mucosa with ulcer formation but no skip lesions. What is the probable Diagnosis?

- a. Ulcerative colitis
- b. Crohn's disease
- c. Amoebic dysentery
- d. Ca colon
- e. Pseudo-membranous colitis

17. A 68 years old man presented with constipation and marked abdominal distension. Abdominal film shows a dilated 'inverted U loop of bowel with fluids level at both ends. What is the diagnosis?

- a. Sigmoid volvulus
- b. Intussusception
- c. Pyloric Stenosis
- d. Small bowel obstruction
- e. Ulcerative colitis

18. A fifty year old man, hypertensive with a history of ischemic heart disease and recently treated for the episodic atrial fibrillation, presented to the ER with sudden onset of severe abdominal pain for the last 6 hours. The pain is generalized and continuous and associated with vomiting on and off. On examination the patient is conscious, bp 100/70 mm hg, pulse of 150 bpm, irregularly irregular, abdomen is non distended and slight tender what is the most likely diagnosis?

- a. Perforation of small bowel
- b. Acute gut ischemia
- c. Irritable bowel disease
- d. Rectus sheath abscess
- e. Paralytic ileus

19. Which is the most appropriate choice below which reflects the mandate (functions) of an international agency called The United Nations Development Fund (UNDP):

- a. Works to implement Primary health care
- b. Works for health and welfare of mother & child,
- c. Plays an important role in protection of archeological heritage of the world.
- d. Works to eradicate poverty and reduce inequities through sustainable development model**
- e. Works for environmental protection by promoting forestation, recycling and regulations to reduce environmental pollution

20. Which of the following is the most common cause of duodenal ulcers?

- a. ONSAIDS
- b. Helicobacter pylori**
- c. Alcohol abuse
- d. Chronic corticosteroid therapy
- e. Zollinger-Ellison syndrome

21. Human parasites include various protozoa and worms. Which one of the following parasites is a common cause of diarrhoea in humans and some animals?

- a. Giardia lamblia**
- b. Leishmania donovani
- c. Pneumocystis jirovecii
- d. Toxocara cati
- e. Toxoplasma gondii

22. The following Chronic conditions is least likely to be seen in association with cholelithiasis in a 38-year-old female?

- a. Adenocarcinoma of the gallbladder
- b. Crohn disease
- c. Chronic hepatitis B**
- d. Obesity
- e. Hemolytic anemia

23. A 48-year-old male presents with colicky right upper quadrant pain. He has had nausea for the past 2 days. His temperature is now 38.8°C. His white blood cell (WBC) count is 11,200//xl, with a differential count of 71 segmented neutrophils, 9 band cells, 13 lymphocytes, and 7 monocytes per 1130 WBCs. These findings are most typical for

- a. Acute hepatitis A
- b. Acute cholecystitis**
- c. Adenocarcinoma of the gallbladder
- d. Extrahepatic biliary atresia.
- e. Primary sclerosing cholangitis

24. All of the following are alarm symptoms in gastroesophageal reflux disease (GERD) except:

- a. Odynophagia
- b. Halitosis**
- c. Recurrent vomiting
- d. Occult or gross gastrointestinal bleeding
- e. Anemia

25. A fifty-year-old man, hypertensive with a history of ischemic heart disease and recently treated for the episodic atrial fibrillation, presented to the ER with sudden onset of severe abdominal pain for the last 6 hours. The pain is generalized and continuous and associated with vomiting on and off. On examination the patient is conscious, bp 100/70 mm hg, pulse of 150 bpm, irregularly irregular, abdomen is non-distended and severely tender, what is the most likely diagnosis?

- a. Peptic ulcer disease
- b. Irritable bowel disease
- c. Paralytic ileus
- d. Acute gut ischemia**
- e. Perforation of small bowel

26. A 26 year old boy presents with bloody diarrhoea, abdominal pain and weight loss. Barium follow through reveals 'cobble stoning and multiple strictures in small bowel. Keeping these findings what is likely diagnosis?

- a. Crohn's disease
- b. Diverticulosis
- c. Intussusception
- d. Sigmoid Volvulus
- e. Ulcerative colitis

27. A 49-year-old male experiences increasing ascites, and a liver biopsy demonstrates diffuse portal tract bridging fibrosis and nodular regeneration of liver cells. There is no hepatocyte necrosis and no cholestasis. Within the areas of fibrosis, bile duct proliferation and mononuclear cell inflammatory infiltrates can be seen. These findings are most characteristic for

- a. Alcoholic hepatitis
- b. Acute viral hepatitis
- c. Acetaminophen toxicity
- d. Cirrhosis
- e. Chronic passive congestion

28. A 65-year-old woman with diabetes, hypertension, coronary artery disease, gastroesophageal reflux disease, and ongoing use of alcohol and tobacco, presents with several months of increasing substernal chest discomfort predominantly when swallowing solid food. Recently, even liquids are becoming problematic. She has not noted blood in her stool or melena, weight loss, or change in her energy level. Laboratory studies are normal. What is the most likely cause of her dysphagia?

- a. Esophageal cancer
- b. Peptic esophageal stricture
- c. Achalasia
- d. Zenker diverticulum
- e. Polymyositis

29. Which of the following is the most important predictor of whether a patient with viral hepatitis will develop chronic liver disease with progression to cirrhosis?

- a. The presence of chronic inflammatory cells in the portal tract

- b. The degree to which hepatic transaminase enzymes are elevated
- c. The length of time that hepatic enzymes remain elevated
- d. The specific form of hepatitis virus responsible for the infection
- e. The presence of inflammatory cells in the sinusoids on a liver biopsy

30. A 61-year-old male has had ascites for the past year. After a paracentesis with removal of 1 L of slightly cloudy, serosanguinous fluid, physical examination reveals a firm, nodular liver. Laboratory findings include positive serum HBsAg and presence of hepatitis B core antibody. He has a markedly elevated serum c-fetoprotein (AFP) level. Which of the following hepatic lesions is he most likely to have?

- a. Autoimmune hepatitis
- b. Hepatocellular carcinoma
- c. Massive hepatocyte necrosis
- d. Marked steatosis
- e. Wilson disease

KMC 2023

1: A 60 year old male patient underwent OGD for persistent dyspnea and weight loss , an exophytic lesion was found along the lesser curvature of the stomach. Which of the following is the most common malignancy of the stomach?

- a. Adenoacarcinoma
- b. Angiosarcoma
- c. Lymphoma
- d. Gastrointestinal stromal tumor
- e. Squamous cell carcinoma

2: A 34 years old male is brought to the emergency with profuse blood stained vomitus . What is the commonest cause of such vomiting world wide?

- a. Arterio-venous malformations in stomach
- b. Cirrhosis of the liver
- c. Oesophageal varices
- d. Peptic ulcers disease
- e. Zollinger Ellison syndrome

3: A 45 year old alcoholic man presented with mass in epigastrium which is fluctuant . 4 weeks ago, he had presented with pain epigastrium radiating to the back . What condition is he suffering from now?

- a. Pancreatic abscess
- b. Pancreatic pseudocyst**
- c. Pancreatic carcinoma
- d. Pancreatic ascites
- e. Pancreatic aneurysm

4: Inflammatory bowel disease (IBD) includes both crohn disease and ulcerative colitis. IBD is a relapsing and remitting condition characterized by chronic inflammation at serious sites in the Git resulting in diarrhea and abdominal pain. Which of the following is indicative of crohn disease but not ulcerative colitis?

- a. Diarrhea is always presents
- b. Gross rectal bleeding is always presents
- c. Inflammation is confined to mucosa except in severe cases
- d. Inflammation is uniform and diffuse
- e. Rectum is often spared**

5: The room criteria specify that symptoms that characterize IBS must have been present for the previous e months. Which of the following is one of the criteria for diagnosing irritable bowel syndrome?

- a. Abdominal pain 3 or more weeks prr day**
- b. Flatulence
- c. Gastroesophageal reflux
- d. Nausea
- e. Pain with defecation

6: A 39 years old female patient presents to OPD with Severe itching on hands and feet and fatigue. On examination, there is jaundice. Laboratory investigations reveal increased levels of bilirubin, alkaline phosphatase, and positive IgG anti mitochondrial antibodies . What is the most likely diagnosis in this case?

- a. Extra hepatic biliary tract obstruction

- b. Alcoholic hepatitis
- c. Viral hepatitis
- d. Primary biliary cirrhosis**
- e. Carcinoma of the liver

7: A 14 years old female patient presents with signs symptoms of jaundice and Liver failure. On examination it was found that patient had choreiform movements of the arms. Ophthalmic examination showed greenish brown ring at the periphery of of corneas.what is the most likely diagnosis in this case?

- a. Alpha 1 antitrypsin deficiency
- b. Budd - chairi syndrome
- c. Primary biliary cirrhosis
- d. Whipped's disease
- e. Wilson disease**

8: In peutz jeghers syndrome, there are hundreds of polyps lining the intestinal mucosa. They are composed of fibromuscular network enclosing glands lined by normal intestinal epithelium with numerous goblet cells. Which of the following is the most apt description for these lesions?

- a. Fibromuscular adenoma
- b. Hamartomas**
- c. Mucinous cyst adenoma
- d. Tubular adenoma
- e. Villous adenoma

9: A histopathologist received esophageal biopsy of a 38 years old patient with complaints of bloating and acid reflux. The microscopic examination of biopsy specimen revealed basal zone hyperplasia with elongation of lamina propria, papillae and by Inflammatory infiltrates that contains eosinophils . What is the most probable diagnosis in this case?

- a. Barret esophagus
- b. Boerhaave syndrome
- c. Mallory weiss syndrome
- d. Reflux esophagitis**
- e. Viral esophagitis

10: A 55 years old patient presents to OPD with complaints of abdominal pain, diarrhea and bleeding per rectum. Diagnosis of carcinoid syndrome was made. Which cells in the intestines are the precursor of carcinoids?

- a. Enterocytes
- b. Goblet cells
- c. Neuroendocrine cells
- d. Paneth cells
- e. Stromal cells look

11: Autoimmune gastritis is a chronic inflammatory disease characterized by immune destruction of gastric parietal cells of the corpus and fundus of stomach. Which other condition is most often associated with autoimmune gastritis?

- a. Hashimoto thyroiditis
- b. Helibacter pylori infection
- c. Menetrier disease
- d. Peptic ulceration of Duodenum
- e. Trichobezoars

12: Dermatitis herpetiformis is a chronic, intensely itchy, blistering skin manifestation of gluten - sensitive enteropathy, commonly known as Celiac disease. Pathogenesis of dermatitis frequently involves the formation of an antibody to epidermal tissue trans glutaminase. Which of the most likely immunoglobulin that triggers immunologic reactions resulting in lesion formation?

- a. IgA
- b. IgM
- c. IgG
- d. IgD
- e. IgE

13: Celiac disease is an immune mediated gastrointestinal disease produced by the ingestion of dietary gluten in genetically susceptible individuals. What is the most common combination of human leukocyte antigen (HLA) class II molecules that binds preferentially to the deamidated gluten peptides for onward presentation to the helper T cells?

- a. HLA -DQ2 or HLA -DQ8
- b. HLA-DR2 or HLA -DR8
- c. HLA-DR2 or HLA-DR8
- d. HLA -DP2 or HLA-DR2
- e. HLA -DP8 or HLA-DP8

14: Life cycle of Diphylobothrium latum involves two intermediate hosts including copepods and fish with human as a definitive host . Which of the following infective stage of the parasite is responsible for initiating infection in the human host?

- a. Coracidia
- b. Cysticercosis
- c. Plerocercoid larvae
- d. Proceroid larvae
- e. Miracidium

15: A 15 years old female presented to OPD with complaints of bloody diarrhea and lower abdominal pain. The rectal biopsy shows inflammatory changes limited to mucosa and sub mucosa and crypt abscess . What is the most probable diagnosis?

- a. Acute appendicitis
- b. Acute ileitis
- c. Carcinoma stomach
- d. Crohn's disease
- e. Ulcerative colitis

16: A 25 years old female presented to OPD with complaints of bloody diarrhea with mucus, lower abdominal cramps and fever. Biopsy of the terminal ileum revealed transmural inflammation and non caseating granulomas. Which one of the following is the most probable diagnosis?

- a. Acute appendicitis
- b. Acute ileitis
- c. Carcinoma appendix
- d. Crohn's disease
- e. Ulcerative colitis

17: A 24 years old male college student presented to emergency department with complaint of right upper quadrant pain. On examination the patient has pallor and is tender in right hypochondrium. There is a history of heavy alcohol intake . Alcoholic hepatitis is the most probable diagnosis in this case. Which one of following morphological feature is the most likely in this case?

- a. Apoptotic hepatocytes
- b. Ground glass hepatocytes
- c. Lobular disarray
- d. Lymphocytes in the portal tract
- e. Mallory bodies

18: A 30 years old female presented to emergency with complaints of profuse vomiting and epigastric pain . On examination there is severe epigastric tenderness. There have been episodes of vomiting in the past. The gastric biopsy shows foci of acute and chronic inflammation with lymphoid follicles and intestinal metaplasia. What is the most probable diagnosis in this case?

- a. Acute gastritis
- b. Carcinoma stomach
- c. Chronic gastritis
- d. Hour glass stomach
- d. Malt lymphoma

19: A 45 years old female presented to OPD with complaints of low grade fever and lethargy. There is previous history of dental extraction and cholecystectomy. On examination there is profound jaundice and tenderness in the right hypochondrium .Lab investigation show HBsAg is positive. Which one of the following is true regarding hepatitis B virus?

- a. Double standard DNA virus
- b. RNA virus
- c. Single standard DNA
- d. Prion
- e. Virus having double standard RNA

20: A 40 years male presented to OPD with complaints of malaise , lethargy and loss of appetite for the last 8 months . He has history of dental extraction from a road side quack . On examination the patient has yellow sclera and slight tenderness in the right hypochondrium. Lab investigation shows that the patient has viral hepatitis. Which of the following morphological features on liver biopsy will confirm chronic Hepatitis.

- a. Apoptotic hepatocytes
- b. Balloon cells
- c. Cellular blebs
- d. Councilman bodies
- e. Ground glass hepatocytes

2. GIT PHARMACOLOGY

PAPER WMC

1. Which of the following drug irreversibly inhibits H+ K+ ATPase enzyme and is used in the treatment of peptic ulcer?

- a. Cimetidine
- b. Sucralfate
- c. Misoprostol
- d. Omeprazole
- e. Bismuth sulphate

2. Which macrolide is indicated in H pylori induced peptic ulcer treatment in triple therapy?

- a. Erythromycin
- b. Clarithromycin
- c. Azithromycin
- d. Roxithromycin
- e. Telithromycin

3. Which histamine H2 blocker has most marked inhibitory affect on microsomal cytochrome P-450 enzyme?

- a. Ranitidine
- b. Famotidine
- c. Cimetidine
- d. Roxatidine
- e. Omeprazole

4. In peptic ulcer, an acids are now primarily used for.

- a. Prompt pain relief
- b. Ulcer healing
- c. Preventing ulcer relapse
- d. Control of bleeding from ulcer
- e. Reduced side effects

5. Which gastro-prokinetic drug produces extra pyramidal side effects.

- a. Domperidone
- b. Metoclopramide
- c. Cisapride
- d. Ondansetron
- e. Promethazine

6. The effective antiemetic for controlling cisplatin induced vomiting is.

- a. Prochlorperazine
- b. Metoclopramide
- c. Domperidone
- d. Ondansetron
- e. Promethazine

7. Which of the following drug belongs to osmotic laxative?

- a. Caster oil
- b. Lactulose
- c. Magnesium sulphate
- d. Liquid paraffin
- e. Bisacodyl

8. The most possible laxative for a patient of irritable bowel disease with spastic constipation is.

- a. Dietary fiber
- b. Liquid paraffin
- c. Bisacodyl
- d. Senna
- e. Caster oil

9. Which of the following drugs belongs to mixed amoebicidal?

- a. Emetine
- b. Chloroquine
- c. Secnidazole
- d. Ketoconazole
- e. Paromomycin

10. Most serious effect seen with emetine when used as anti amebic agent is?

- a. Sinusitis
- b. Alopecia
- c. Acne vasgaris
- d. Cardiac arrhythmias
- e. Trigeminal neuralgia

11. The following precaution should be advised to the patient while prescribing metronidazole?

- a. To avoid driving
- b. To get leukocyte count every month
- c. To avoid fatty/fried food
- d. To avoid milk products
- e. To get avoid alcoholic beverages

12. Mebendazole is most effective against which of the following microorganisms/parasite.

- a. Entamoebahistolytica
- b. Entrobivirusvermicularis
- c. Plasmodium falciparum
- d. Yersinia pestis
- e. Leishmaniadonovani

13. Which of the following drug among anthelmintics can cause corneal opacities?

- a. Albendazole
- b. Niclosamide
- c. Ivermectin
- d. Piperazine
- e. Pyrantepamoate

14. What is true about human interferon alpha

- a. It is used to treat HIV infection
- b. It is used to treat Kaposi sarcoma in AIDs patients
- c. It is curative for hepatitis B
- d. It is curative for hepatitis A
- e. It is active orally

15. Which of the following drugs orally used for treatment of hepatitis C infection along with interferon alpha.

- a. Lamivudine
- b. Ribavirin
- c. Amantadine
- d. Metronidazole
- e. Tenofovir

16. Drugs which undergo high degree of first pass metabolism.

- a. Have low oral Bio availability
- b. Have greater therapeutic effects
- c. Are primarily excreted in bile
- d. Are contraindicated in liver Disease
- e. Have zero order kinetics of elimination

GMC 2023

1. A 68-year-old patient with cardiac failure is diagnosed with ovarian cancer. She is started on cisplatin but becomes nauseous and suffers from severe vomiting. Which of the following medications would be most effective to counteract the emesis in this patient without exacerbating her cardiac problem?

- a. Droperidol.
- b. Dolasetron
- c. Dronabinol
- d. Ondansetron
- e. Prochlorperazine

2. A 45-year-old woman is distressed by the dissolution of her marriage. She has been drinking heavily and overeating. She complains of persistent heartburn and an unpleasant, acid like taste in her mouth. The clinician suspects gastrointestinal reflux disease and advises her to raise the head of her bed 6 to 8 inches, not to eat for several hours before retiring, to avoid alcohol, and to eat smaller meals. Two weeks later, she returns and says the symptoms have subsided slightly but still are a concern. The clinician prescribes

- a. An antacid such as Aluminum hydroxide.
- b. An anti-anxiety agent such as alprazolam
- c. Dicyclomine
- d. Esomeprazole
- e. Tetracycline

3. Which of the following agents interferes with most of the cytochrome P450 enzymes and, thus, leads to many drug-drug interactions?

- a. Cimetidine
- b. Famotidine.
- c. Ondansetron.
- d. Omeprazole
- e. Sucralfate

4. A couple celebrating their fortieth wedding anniversary is given a trip to Peru to visit Machu Picchu. Due to past experiences while traveling, they ask their doctor to prescribe an agent for diarrhea. Which of the following would be effective?

- a. Amoxicillin
- b. Famotidine
- c. Loperamide
- d. Lorazepam
- e. Omeprazole

5. A 48-year-old immigrant from Mexico presents with seizures and other neurologic symptoms. Eggs of *Taenia solium* are found upon examination of a stool specimen. A magnetic resonance image of the brain shows many cysts, some of which are calcified. Which one of the following drugs would be of benefit to this individual?

- a. Albendazole
- b. Diethylcarbamazine
- c. Ivermectin
- d. Niclosamide
- e. Pyrantel pamoate

6. A 56-year-old man from South America is found to be parasitized by both schistosomes and *Taenia solium*, the pork tapeworm. Which of the following anthelmintic drugs would be effective for both infestations?

- a. Albendazole
- b. Ivermectin
- c. Mebendazole
- d. Niclosamide
- e. Praziquantel

7. Identify the mucosal protective agent from the given anti-peptic ulcer drugs?

- a. Sodium bicarbonate
- b. Aluminum hydroxide
- c. Famotidine
- d. Bismuth subcitrate
- e. All of the above

8. The only agent among the following that selectively blocks gastric M1-muscarinic receptors, thereby inhibiting stomach secretions

- a. Pirenzepine
- b. Olanzapine
- c. Magnesium trisilicate
- d. Clozapine
- e. Cyclosporine

9. For the effective treatment of Hepatitis C, other than interferon and ribavirin, two drugs (protease inhibitors) that directly inhibit HCV virus are?

- a. Boceprevir and ribavirin
- b. Telaprevir and ribavirin
- c. Pegylated interferon and boceprevir
- d. Pegylated interferon and telaprevir
- e. Boceprevir and Telaprevir

10. A female patient who is being treated for chronic hepatitis B develops nephrotoxicity while on treatment. Which is the most likely medication she is taking for HBV treatment?

- a. Entecavir
- b. Tebivudine.
- c. Lamivudine.
- d. Adefovir.
- e. Both c & d

11. Extrapramidal symptoms (EPS) have been associated with which of the following drug?

- a. Metoclopramide.
- b. Alprazolam.
- c. Aprepitant.
- d. Loperamide
- e. Misoprostol

12. Which one of the following best describes the mechanism of action of ribavirin?

- a. Inhibits viral aspartate protease
- b. Inhibits viral DNA polymerase
- c. Inhibits viral RNA polymerase
- d. Inhibits viral reverse transcriptase
- e. Prevent integration of viral genome

13. Drug of choice for echinococcosis treatment

- a. Albendazole
- b. Iodoquinol
- c. Piperazine
- d. Niclosamide
- e. Saramin

14. The following helminthic disease can be treated by albendazole but not by mebendazole

- a. Hookworm infestation
- b. Threadworm infestation
- c. Trichuriasis
- d. Neuracystercosis
- e. Nematodes

15. The primary role of sulfasalazine in ulcerative colitis is:

- a. Suppression of enteroinvasive pathogens
- b. Control of acute exacerbations of the disease
- c. Maintenance of remission
- d. Both band c
- e. None of the above

16. A 39 year old carpenter has taken 2 bottles of liquor from the local shop After about an hour he develops confusion, vomiting and blurring of vision. He has been brought to the emergency department. He should be given

- a. Naloxone
- b. Diazepam
- c. Flumazenil
- d. Ethyl Alcohol
- e. Atropine

KGMC 2023

1. Antiviral drugs have revolutionized treatment of viral hepatitis and AIDS. Some of them have dual antiviral activity against HIV and HBV. Identify one such among following:

- a. Enfuvirtide
- b. Adefovir
- c. Entecavir
- d. Ribavirin
- e. Emtricitabine

2. A young patient with HCV infection currently using interferon alpha and ribavirin and presented with progressive pallor and fatigability. Investigation revealed hb=10 GM/DL, platelet count =255000/ml³ and TLC count was 9000ml³. Diagnosis of anemia caused by ribavirin was made. This is explained by which of the following pathophysiology?

- a. Iron deficiency
- b. B12 deficiency
- c. Hemolysis
- d. Folic acid deficiency
- e. Bone marrow suppression in hemoglobin levels and other blood cell counts

3. Drug induced jaundice is a common cause of morbidity and mortality. Drugs to avoid in pts with deranged liver func?

- a. Streptomycin
- b. Ethanol
- c. Capriomycin
- d. Rifampicin
- e. Amikacin

4. A 40 yrs old male with type 1 diabetes has bloating and abdominal distension, he is diagnosed with gastroparesis. what is the prokinetic of choice for him

- a. Esomeprazole
- b. Cimetidine
- c. Leuprolide
- d. Metaclopramide
- e. Renitidine

5. Patient with hepatic coma after investigation his ammonia level was high, what should we use to bring ammonia level down

- a. Lactulose
- b. Aluminum hydroxide
- c. Bisacodyl
- d. Magnesium hydroxide

6. A 58 year old male from south America is infected with schistosomes and tenia solium

Choice of drug

- a. Albendazole
- b. Mebendazole
- c. Praziquantal
- d. Ivermectin

7. PPI use as first choice although it has short half life and one dose daily because of ..

- a. Zero order kinetics
- b. Irreversibly block receptors.
- c. Prodrug.
- d. High efficacy.
- e. Slow excretion

8. A 50 years old labour presented to doctor with history of diarrhoea, chest pain and abdominal discomfort. Doctor prescribed him H2 blocker to take at night the reason for that is

- a. H2 blockers act only at night
- b. Labour can take the drug easily at night
- c. Acetylcholine secretion increases during sleep
- d. Gastric and acetylcholine secretion increases after dinner
- e. Nocturnal gastric acid secretion increases

9. Which of the following increases mucosal defence of stomach.

- a. Cimetidine
- b. Sucralfate

- c. Omeprazole
- d. Pirenzepine
- e. Mesoprostol

10. Drug regimen used in Triple therapy :

- a. Lansoprazole+clarithromycin +Amoxicillin
- b. Omeprazole+CBS+Tetracycline
- c. Cimetidine+metronidazole+tetracycline
- d. Penicillin + NSAID

11. Drug induced vomiting..... **ONDANSETRAN** - Ondansetron is a serotonin receptor antagonist that can help to prevent nausea and vomiting caused by chemotherapy, radiation therapy, and other medications .

12. A 45 yr old female patient presents with ulcerative colitis. She was put on aminosalicylate having azo bond between two aminosalicylic acid molecules. The compound is:

- a. Rowasa
- b. Pentasa
- c. Lialda
- d. Sulphasalazine
- e. Olsalazine

13. A 25 yrs old patient with IBS presented with constipation. She was put on lubiprostone, a prostaglandin analogue. It treats constipation by?

- a. Inc Na rich fluid secretion
- b. Directly inc the motility time of small intestine.
- c. Stimulates type 2 chl channels in intestines
- d. Inc colonic transit time
- e. Inc gastric acidity

NWSM 2023

1. A 59 year old woman suffering from chronic constipation routinely self administered milk of magnesia (magnesium hydroxide) daily. Which of the following actions most likely mediated the laxative effect of the drug

- a. Formation of bulky emollient gel
- b. Inhibition of cholecystokinin release
- c. Lubrication of fecal material
- d. Retention of water in vessels by osmosis
- e. Stretching of intestinal wall

Q2. A 58 year old alcoholic man suffering from hepatic cirrhosis was admitted to the hospital because of drowsiness and disorientation in the time and place . Further exams lead to portal system encephalopathy Which of the following drug would be appropriate to eliminate toxic enteric products in this patient

- a . Lactulose
- b . Loperamide
- c . Omeprazole
- d . Ranitidine
- e . Sucralfate

Q3. A 24-year-old woman in her second trimester of pregnancy complained of constipation at a routine prenatal visit. The physician instructed the woman to maintain bowel function by drinking plenty of water, increasing bulk in the diet with vegetables, and taking a laxative daily. Which of the following laxatives would be most appropriate for this patient?

- a. Bisacodyl
- b. Castor oil
- c. Docusate
- d. Magnesium hydroxide
- e. Senna

4. A 61-year-old man with newly diagnosed lung cancer was scheduled to receive his first course of chemotherapy. A prophylactic antiemetic treatment was planned that included ondansetron. Which of the following brain regions represent a site of the antiemetic action of the drug?

- a. Locus ceruleus
- b. Medial forebrain bundle
- c. Nucleus accumbens
- d. Nucleus tractus solitarius
- e. Putamen

5. A 58-year-old alcoholic man suffering from hepatic cirrhosis was admitted to the hospital because of drowsiness and disorientation in time and place. Further exams led to the diagnosis of portal-systemic encephalopathy. Which of the following drugs would be appropriate to eliminate toxic enteric products in this patient?

- a. Lactulose
- b. Loperamide
- c. Omeprazole
- d. Ranitidine
- e. Sucralfate

6. A 13 year old school girl comes to pediatrician complaining of bloating, weight loss, pain abdomen and diarrhea. She also looks pale and has lack of interest in concentrating in academic activities. The doctor is sure she has parasitic infestation. He deworms her and prescribes a supplement. Which supplement he must prescribe?

- a. Folic acid
- b. Fron
- c. Neurobion
- d. Probiotics
- e. Vit C

7. A 43-year-old man suffering from heartburn had been using antacid preparations as needed. Which of the following best describes the mechanism of action of antacids?

- a. Binding to necrotic ulcer tissue
- b. Inhibition of pepsin and hydrochloric acid secretion
- c. Reaction with hydrochloric acid in the stomach lumen
- d. Reaction with pepsin in the stomach lumen
- e. Stimulation of bicarbonate secretion by epithelial cells

8. A 6-month-old infant presents with diarrhea and vomiting for the past 24 hours. The infant appears lethargic, has sunken eyes, and decreased urine output. What is the most appropriate next step?

- a. Prescribe oral rehydration solution (ORS) and advise a follow-up appointment
- b. Administer intravenous fluids and refer to a pediatric specialist
- c. Recommend over-the-counter anti-diarrheal medication
- d. Order stool culture and initiate empiric antibiotic treatment
- e. Provide home care instructions and reassurance

9. A 46-year-old man recently diagnosed with a duodenal ulcer started a treatment that included daily Sucralfate. Which of the following mechanisms most likely mediates the therapeutic efficacy of the drug in the patient's disease?

- a. Acting as a barrier to acid by binding to necrotic ulcer tissue
- b. Exerting a bactericidal effect against *Helicobacter pylori*
- c. Inhibiting hydrochloric acid secretion
- d. Reacting with gastric hydrochloric acid to form salt and water
- e. Stimulating bicarbonate secretion by antral parietal cells

10. A patient presents with severe abdominal pain and a "burning" sensation in the upper abdomen. Endoscopy reveals several benign ulcers in the antral mucosa of the stomach. Which of the following drugs is most likely to provide the fastest albeit probably the briefest relief of the discomfort with just a single dose?

- a. Antacids
- b. Belladonna alkaloids
- c. H₂ blockers
- d. Misoprostol
- e. Propantheline

11. An 18-year-old man traveling on vacation noted some mild abdominal cramps and three or four unformed stools over the past 24 hours. No blood was seen in the stool. Which of the following drugs would be appropriate to treat the patient's diarrhea?

- a. Bismuth subsalicylate
- b. Magnesium sulfate
- c. Metoclopramide
- d. Sucralfate
- e. Vancomycin

12. A patient has severe gastroesophageal reflux disease (GERD). In addition to providing some immediate symptom relief, for which we will prescribe usually effective doses of an OTC

combination antacid product, we want to suppress gastric acid as fully as possible. Which of the following drug is most likely to meet that criterion?

- a. Atropine
- b. Calcium carbonate
- c. Cimetidine
- d. Esomeprazole
- e. Misoprostol

13. A physician is treating a patient with dysentery caused by *Shigella* infection. The patient's travel history indicates recent travel to a developing country. What is the most appropriate treatment for this patient?

- a. Prescribing antibiotics based on local antibiotic resistance patterns
- b. Administering a broad-spectrum antiviral medication
- c. Advising bed rest and increased fluid intake only
- d. Recommending a vaccine for long-term protection
- e. Performing a surgical procedure to remove the infected intestine

14. We have two patients. One requires suppression of emesis caused by an anticancer drug that causes a high incidence and severity of vomiting (a highly emetogenic drug). Another patient has severe diabetic gastroparesis and gastroesophageal reflux, which requires relief. Which drug would be most suitable for both indications (assuming no specific contraindications)?

- a. Diphenoxylate
- b. Dronabinol
- c. Loperamide
- d. Metoclopramide
- e. Ondansetron

15. 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?

BLOCK K PREPROFFS

- a. 5-HT₃ serotonergic
- b. Alpha-2 adrenergic
- c. M₃ cholinergic
- d. Mu opioid
- e. Nn cholinergic

16. A 61-year-old woman with newly diagnosed ovarian cancer was scheduled to receive her first course of chemotherapy. A prophylactic antiemetic medication was planned. A drug from which of the following classes would be most appropriate to include in the antiemetic therapy of this patient?

- a. Adrenergic agonists
- b. Dopaminergic agonist
- c. GABAergic agonists
- d. Muscarinic antagonists
- e. Serotonergic antagonists

17. A 45-year-old woman had been self-medicating for heartburn. The preparation she was using was a combination of magnesium hydroxide and aluminum hydroxide. Which of the following reasons best explains why many antacid preparations on the market contain a combination of these two antacids instead of a single product?

- a. To achieve a bactericidal effect on *Helicobacter pylori*
- b. To avoid antacid overdose toxicity
- c. To avoid interaction with other drugs given concomitantly
- d. To decrease the occurrence of constipation or diarrhea
- e. To facilitate gastric emptying

18. During your on call, you are bleeped to see an 80 year old woman on the ward who has not opened her bowels for the last 4 days. She is not known to have a history of constipation. On examination her observations are within normal range, the abdomen is soft and there is mild discomfort at the left iliac fossa. Bowel sounds are present and on PR examination the rectum is empty. You consult your registrar who asks you to prescribe osmotic laxative. What is the most appropriate treatment.

- a. Ispaghula Husk
- b. Docusate sodium
- c. Lactulose
- d. Senna
- e. Methylcellulose

19. A 57-year-old man complained to his physician of epigastric pain that was stronger at night and was temporarily relieved by food. Upper gastrointestinal endoscopy showed two small gastric ulcers, and a urease breath test was positive for *Helicobacter pylori* infection. The physician prescribed a triple therapy with omeprazole, clarithromycin, and metronidazole for 14 days, followed by omeprazole daily for 6 weeks. Which of the following statements best explains why this drug regimen is the first-line therapy for *H. pylori*-associated ulcers?

- a. Clarithromycin greatly enhances the bactericidal activity of omeprazole
- b. Metronidazole greatly enhances the bactericidal activity of omeprazole.
- c. Omeprazole is rapidly bactericidal against *H. pylori*.
- d. The regimen almost completely eliminates the risk of ulcer recurrence.
- e. The regimen can cure the ulcer in up to 70% of cases.

20. A 70-year-old woman complained to her physician of obstinate constipation. The physician prescribed a laxative that acts in the colon by absorbing water into the fecal contents, thus promoting peristalsis about 1 or 2 days after administration. Which of the following drugs was most likely prescribed?

- a. Castor oil
- b. Docusate
- c. Magnesium sulfate
- d. Methylcellulose
- e. Sodium phosphate

KMC 2023

1: A 35 years old lady, having 1 month gestational amenorrhea, presented with hyperemesis gravidarum. Initially, she was treated with meclizine, but did not respond to it. Which of the following drugs will be the best option to treat her?

- a. Dimenhydrinate
- b. Itopride
- c. Levosulpiride
- d. Metoclopramide
- e. Ondansetron

2: A 55 years old man was presented with osteoarthritis and constipation. To prevent NSAIDs induced peptic ulcer in this patient, which of the following drugs will be preferred?

- a. Aluminum containing antacid
- b. Aluminum and magnesium containing antacids
- c. Itopride
- d. Misoprostol
- e. Sucralfate

3: A 45 years old man was diagnosed with peptic ulcer disease and used lansoprazole. By which of the following mechanism, lansoprazole works?

- a. Block H2 receptors
- b. Block proton pump irreversibly
- c. Block proton pump reversibly
- d. Increase blood supply of GI mucosa
- e. Neutralize acid

4: A 56 years old man with chronic dyspepsia is using antacid. Which of the following is true about antacid ?

- a. Aluminum containing antacid cause diarrhea
- b. Antacid increase blood supply of stomach
- c. Magnesium containing antacids cause constipation
- d. Magnesium containing antacids cause diarrhea
- e. Sodium containing antacids cause constipation

5: A 66 years old lady was diagnosed with chronic Hepatitis C. She is non-cirrhotic . Which of the following is the best combination of drugs to treat this patient?

- a. Adefovir and ribavirin
- b. Sofosbunin and adefovir
- c. Sofosbuvir and lamivudine
- d. Sofosbuvir and velpatasvir
- e. Velpatasvir and adefovir

6: A 57 years old lady was diagnosed with chronic Hepatitis C . She was treated with interferon and ribavirin. What is the most important adverse effect usually reported with interferon?

- a. Anaphylactic shock
- b. Bone marrow suppression
- c. Diarrhea
- d. Dryness of mouth
- e. Hemolytic anemia

7: A 34 years old man was a drug abuser and used injectable drugs . He was diagnosed with co-infection of hepatitis B and HIV. What is the best drug to treat this patient?

- a. Efavirenz
- b. Entacavir
- c. Delavirdine
- d. Maraviroc
- e. Tenofovir

8: A 38 years old lady, who had a history of severe motion sickness and is now planning for a trip to northern area for summer vacation. What will be the best drug to prevent motion sickness and vomiting of this patient?

- a. Domperidone
- b. Levosulpiride
- c. Metoclopramide
- d. Ondansetron
- e. Scopolamine

9: A 14 year old boy presented with ascaris lumbricoides (common round worm) infestation. prescribes mebendazole . What is the mechanism of action of this drug?

- a. Block voltage gated calcium channels
- b. Inhibit microtubule polymerization
- c. Induce muscle contraction
- d. Inhibit oxidative phosphorylation
- e. Open chloride ion channels

10: A 22 year old man presented to emergency department with acute diarrhea. He is prescribed bismuth sub salicylate. What is the mechanism of this drug?

- a. Acts through adsorption
- b. Anti cholinergic effect
- c. Slowing intestinal peristalsis
- d. Stimulation of enteric nerves
- e. Stimulation of micro receptors in myenteric plexus

11: A 24 year old man presented with disease and hepatic amoebic abscess . He is advised which of the following drugs which is activated to toxic intermediates by the pyruvate ferredoxin oxidoreductase enzyme presents in the parasite?

- a. Diloxanide furoate
- b. Emetine
- c. Iodoquinol
- d. Metronidazole
- e. Paromomycin

12: A 42 year old woman with diarrhea predominant irritable bowel syndrome presented to physician for treatment. The physician suggested an exercise regimen, dietary modification, and a bulk laxative. What is the most likely mechanism of action of this agent?

- a. Gel formation in the intestine
- b. Neuro modulation of the S3 nerve root
- c. Non absorbable salt
- d. Osmotic laxative
- e. Stimulation of the cholinergic nervous system

13: A 31 year old woman presented to the clinic for follow up of her abdominal pain . The pain has been occurring for a couple of years but has worsened recently. She is often constipated and then will have periods of diarrhea. Her pain does usually improve after a bowel movement. After multiple negative tests , the diagnosis of constipation predominant irritable bowel syndrome is made. What is the most suitable drug for this patient?

- a. Infliximab
- b. Metoclopramide

- c. Ondansetron
- d. Sulfasalazine
- e. Tegaserod

14: A 21 years old male presented to the clinic with 6 weeks of painful, bloody stool. Flexible sigmoidoscopy revealed erythema and pseudopolyps . Which of the following drugs used for ulcerative colitis has both anti inflammatory and antibacterial properties?

- a. Azathioprine
- b. Cyclosporine
- c. Sulfasalazine
- d. Mesalamine
- e. Olsalazine

15: A 25 year old pregnant woman presented OPD with high grade fever and pain abdomen. She developed these symptoms after eating street food. The doctor diagnosed her with enteric fever . What is the most suitable drug for this patient?

- a. Azithromycin
- b. Choloramphenicol
- c. Ciproflaxacin
- d. Cefixime
- e. Linezolid

16: A 20 year young boy was diagnosed with typhoid fever and treated with ciproflaxacin but did not respond. The diagnosis was reconfirmed by blood culture and physician labeled him as a resistant case to ciproflaxacin. What is the drug of choice in Fluoroquinolone resistant typhoid?

- a. Azithromycin
- b. Choloramphenicol
- c. Ciproflaxacin
- d. Cefixime
- e. Linezolid

17: A 17 years old boy presented with acute jaundice. His investigations showed deranged LFTs and Hepatitis B surface antigen positive. Regarding the treatment for acute hepatitis B what is the best answer?

- a. Antiviral therapy
- b. Supportive/symptomatic treatment
- c. Vaccination
- d. No treatment required
- e. Vitamin k therapy

18: You are Posted as medical officer in accident & emergency department of KTH . A patient came with history of glass particles ingestion and complaining of pain abdomen with vomiting. What would be the first Line of treatment in this condition?

- Furosemide
- Hyoscine
- Paracetamol
- Purgative**
- Sucralfate

19: A case of chronic poisoning was reported to the medical unit of. Tertiary care hospitals . The patient presented with insomnia, headache, halitosis, tunnel vision, pink disease, Danbury tremor, and poisonous erethism. History from the patient revealed that he was taking a volatile liquid as a treatment advised being part of folk medicine. If such poison is presented in acute form then which of the treatment is of prime importance?

- Gastric lavage only
- Gastric lavage with albumin**
- Gastric lavage with calcium carbonate
- Gastric lavage with diluents
- Gastric lavage with universal antidote

3. GIT MEDICINE

PAPER WMC

1. A 58 year old woman is brought to the emergency department 4 hours after vomiting blood and experiencing bloody stools. The patient was diagnosed with alcoholic cirrhosis w years ago . The patient subsequently goes into shock and expires. Which of the following is most likely underlying cause of hematemesis and hematochezia in the patient?

- Alcoholic hepatitis
- Ischemia of the gastric mucosa
- Mallory weiss syndrome
- Peptic ulcers disease
- Portal hypertension**

2. A 58 year old woman presents with 2 months 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 stomach. Microscopic examination shows diffusely infiltrating malignant cells, many of which a "signet ring" cells in the stomach wall. Which of the following is the most likely diagnosis?

- Foundating adenocarcinoma
- Gastric leiomyosarcoma
- Gastric lymphoma
- Linitis plastica**
- Menetrier disease

3. A 56 year old obese female presents to ER after being found unconscious by her daughter. Paramedics report that the female is found in stuporous condition covered with vomit. On arrival at ER , she is clammy and her BP is 85/50 mmHg . Her serum amylase is raised . Which of the following is the most likely cause of hypertension?

- Alpha cell tumor of pancreas
- Ectopic pancreas
- Acute hemorrhagic pancreatitis**
- Pancreatic adenocarcinoma
- Cystic fibrosis

4. A 45 years old man presents with malaise, anorexi , and Vomiting to emergency room. The physician notices slight jaundice. Blood examination shows marked elevation of ALT and AST with AST/ALT ratio of 2.5. alkaline phosphatase is near normal. Serum copper and iron are normal. Histopathologist reports show Mallory bodies in hepatocytes. Liver damage from which of the following diseases most likely accounts these findings?

- Biliary cirrhosis
- Viral hepatitis
- Alcoholic hepatitis**
- Hemochromatosis
- Wilson's disease

5. A 65 years old male presents with complaints of right upper quadrant pain. He was diagnosed HCV 20 years back. He also gives a history of ill health, fever, decreased appetite and fatigue. Biopsy specimen shows presence of bile and atypical lymphocytes. Apart from CT scan and other tests which tumor markers you will order to support your diagnosis?

- a. Beta HCG
- b. Carcino- embryonic antigen
- c. Alpha feto protein
- d. CA-125
- e. CA - 15

6. A 25 year old man had been experiencing intermittent diarrhea which, over years, progressed to severe diarrhea, alternating 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 higher lesions. Which of the following is the most likely diagnosis?

- a. Celiac disease
- b. Crohn disease
- c. Hirschprung disease
- d. Tropical sprue
- e. Ulcerative colitis

7. A 10 year old boy complaints of intermittent abdominal pain. Endoscopy fails to demonstrate peptic ulcer or chronic gastritis. The clinician suspects that the patient may have a heterotopic rest of gastric mucosa that is producing enough acid to cause ulceration of adjacent mucosa. Which of the following is the most likely diagnosis?

- a. Ectopic pancreatic tissue
- b. Meckel's diverticulum
- c. False diverticulum
- d. Appendicitis
- e. Cancer of cecum

8. A 60 yrs old lady presents with a small swelling at the angle of jaw for last two years which is painless. On exam it is non tender and palpated as discrete mass . Surgeon wants to excise the lesion but he is worried about the facial nerve that may get damaged during the excision. What is most likely the diagnosis?

- a. Saladenitis
- b. Warthin tumor
- c. Parotitis
- d. Papillary cystadenoma
- e. Pleomorphic adenoma

9. A 42 year old obese woman presents with severe abdominal pain that radiates to the back . There is no history of alcohol or drug abuse. The blood pressure is 90/45 mmHg, respiration are 32 per minute and pulse is 100 per minute. Physical examination shows abdominal tenderness, guarding, and rigidity. An x ray film of the chest shows a left pleural effusion. Laboratory studies reveal elevated serum amylase (650U/L) and lipase (675 U/L) , and hypocalcemia (7,8 mg/dL). Which of the following is the most likely diagnosis?

- a. Acute cholecystitis
- b. Acute pancreatitis
- c. Alcoholic hepatitis
- d. Chronic Hepatitis pancreatitis
- e. Dissecting aorta aneurysm

10. A 27 year old woman presents with a 9 months history of bloody diarrhea and crampy abdominal pain. Three weeks ago. She noticed that her left knee was swollen, red and painful. Her temperature is 38C (101F) abdominal palpation reveals tenderness over the left lower quadrant. Laboratory studies show moderate anemia with a hemoglobin level of 9.3 g/dl. Microscopic examination of the stool reveals numerous red and white blood cells. A diffusely red, bleeding, friable chronic mucosa is visualized by colonoscopy. The colon is subsequently removed which of the following is the most likely diagnosis?

- a. Adenocarcinoma

- b. Carcinoid tumor
- c. Crohn disease
- d. Pseudomembranous colitis
- e. Ulcerative colitis

11. A 2 years old symptomatic child has increased serum ALT and raised serum direct/conjugate bilirubin levels since birth. Diagnosis is?

- a. Crigler - Najjar syndrome I
- b. Crigler - Najjar syndrome II
- c. Gilbert syndrome
- d. Dubin Johnson syndrome
- e. Rotor syndrome

12. A WINDOW period in the hepatitis B serology means?

- a. When hepatitis B antigen disappear but hepatitis B antibody has not appeared yet
- b. When hepatitis B antigen disappear but hepatitis c antibody is not appeared yet
- c. When hepatitis B,C antigen disappear but hepatitis c antibody has not appeared yet
- d. When HBV DNA disappears but hepatitis B surface antibody has not appeared yet
- e. When hepatitis B antigen disappear but hepatitis c antibody has not appeared yet

13. A 22 year old woman from India presents with a 1 week history of fever, malaise and nausea. The patient is 6 months pregnant. Physical examination reveals jaundice and right upper quadrant pain. Result of laboratory studies include serum bilirubin of 5.2 mg/dl (60% conjugated) , AST of 400U/L , ALT of 492 U/L , alkaline phosphatase of 470 U/L , anti-HAV antibodies negative. HBsAg negative, and IgM anti hepatitis E virus (anti- HEV) antibodies positive. The patient is at risk for which of the following?

- a. Diabetes mellitus
- b. Fulminant liver failure
- c. Pulmonary thromboembolism
- d. Renal failure
- e. Sclerosing cholangitis

14. A 48 year old female diagnosed to have Achalasia. Which of the following drug treatment is recommended for her.

- a. Heller cardiomyotomy
- b. Oral PPIs
- c. Oral sucralfate
- d. Pneumatic dilatation
- e. Oral Nifedipine

15. A 28 year old male diagnosed to have chronic Hepatitis B (HBV Viral load 250000 IU , ALT 5) which of the following medicine is prescribed for the treatment of hepatitis B;

- a. Ribavirin
- b. Adefovir
- c. Teldivadine
- d. Tenofovir
- e. Entecavir

16. A 30 year old staff nurse note an accidental needle stick injury from a hepatitis B patient. Which of the following plan will you recommended for her.

- a. Hepatitis B vaccination
- b. Hepatitis B immunoglobulins
- c. Wait and observe
- d. Hepatitis A and B vaccination
- e. Hepatitis B vaccination+ Immunoglobulins

17. Which of the following investigation is initially recommended for the diagnosis of achalasia in a 35-year old female.

- a. Chest X ray
- b. Endoscopic ultrasound
- c. Barium swallow
- d. CT scan chest
- e. Echo

18. A 25 years old obese male patient presented with deranged LFTs as under.

**S, BIL. 0.7 mg/dl (0.4 - 1 mg / dl)
ALK . PO4 . 245 (150-350)
ALT . 124 (25-40)
Hep B&C . negative
What is the most likely cause?**

- a. Primary biliary cirrhosis
- b. Non - alcoholic fatty liver disease/ NAFLD**
- c. Chronic viral hepatitis
- d. Autoimmune hepatitis
- e. Hepatocellular carcinoma

19. A 60 years old HCV positive patient for last 10 years with compensated cirrhosis presented with 5 months history of abdominal pain, ascites, generalized weakness and weight loss. His alpha fetoprotein levels are. 450 ng/mL (normal values. 0-40 ng/mL) what will be the most likely diagnosis

- a. Esophageal varices
- b. Acute pancreatitis
- c. Ca pancreas
- d. Hepatocellular carcinoma**
- e. Non cirrhotic portal hypertension

20. A 50 year old female presented with 8 months history of lethargy, weakness, jaundice and pruritus. On examination she has jaundice, xanthelasma and hepatomegaly. Her anti mitochondrial antibodies/AMA test is positive. What is the likely diagnosis.

- a. Chronic viral hepatitis
- b. Primary biliary cirrhosis**
- c. Autoimmune hepatitis
- d. Wilson disease
- e. Hemochromatosis

21. Which of the following is the gold standard test for patients suffering from gastroesophageal reflux disease.

- a. Upper GI endoscopy
- b. Barium swallow
- c. CT scan with oral contrast
- d. 24 hrs pH monitoring**
- e. LES manometry

22. A 45 year old male presents with chronic abdominal pain, bloating, and irregular bowei habits for the past 6 months . The pain is relieved after

passing stool. The patient reports no significant weight loss or rectal bleeding. Physical examination and relevant laboratory tests shows no abnormalities. Based on the provided information. What is the most common diagnosis.

- a. Diverticulitis
- b. Irritable bowel syndrome**
- c. Celiac disease
- d. Colorectal cancer
- e. Crohn disease

23. A 34 year old male diagnosed to have H pylori associated peptic ulcer disease on upper GI endoscopy and biopsy. Which of the following is the first line treatment for him;

- a. PPI+ clarithromycin+ Metronidazole
- b. PPI + bismuth salts + clathromycin
- c. PPI + levofloxacin + Amoxicillin
- d. PPI + Amoxicillin + metronidazole
- e. PPI + Amoxicillin+ clarithromycin**

24. A 40 years old male patient presented with pain of right hypochondrium and Vomiting with high degree fever . He is jaundiced and tender in right hypochondrium. Most likely diagnosis in this case is;

- a. Cholangitis**
- b. Cholelithiasis
- c. Liver abscess
- d. Pancreatitis
- e. Both a &b

25. A 20 years old male patient presented with pain right hypochondrium plus high grade swinging pyrexia from the last one week. He has bloody diarrhea for e days which has responded to antibiotics. Most likely diagnosis is;

- a. Hydrated live disease
- b. Cholangitis
- c. Amoebic liver Abscess**
- d. Pyogenic liver Abscess
- e. None of the above

26. A 50 years old female patient has presented with pain in right hypochondrium with vomiting with 5 kg weight loss. On examination the patient is jaundiced and has a soft mass in right hypochondrium. Most likely diagnosis is;

- a. Mucocele of gall bladder
- b. Carcinoma of pancreas
- c. Acute hepatitis
- d. Gastric outlet obstruction
- e. Emphyema of gall bladder

27. A middle aged male patient presented to OPD for follow up after resection of colon carcinoma 3 months back. Which of the following should be advised to check for recurrence of tumor?

- a. MRI
- b. CT scan
- c. Ultrasound
- d. Carcino-embryonic level
- e. Barium swallow

28. First line investigation to detect Liver disease is

- a. ERCP
- b. MRCP
- c. CT Scan
- d. MRI scan
- e. Ultrasound

29. Barium swallow can help in diagnosis of all of the following lesions except

- a. Narrowing of lumen
- b. Space occupying lesions
- c. Anatomical distortion
- d. GORD
- e. Pharyngeal pouch

30. Which of the following is most sensitive and specific antibody for Celiac disease.

- a. IgG anti-gliadin antibodies
- b. IgG anti endomysial Antibodies
- c. IgG anti reticulin antibodies
- d. IgA anti endomysial Antibodies
- e. IgM anti reticulin antibodies

GMC 2023

1. Scoring system used for diagnosis of acute appendicitis

- a. Glasgow score
- b. Ranson score
- c. Alvarado score

2. A 50 year old male, known hypertensive, history of Ischaemic disease, recently episode of Atrial fibrillation presented with sudden onset of abdominal pain in last 6 hours, generalized and continuous pain BP 100/70 Pulse 150/min, irregularly most likely clinical diagnosis

- a. Angiodysplasia
- b. Mesenteric Ischaemia
- c. inflammatory Bowel disease
- d. Myocardial infarction
- e. Pancreatitis

3. A 3-years-old male child presented in outpatient department with history of bulky, greasy and foul smelling stool for the last one year. On examination, patient is under weight, pale with clubbing of digits and having distended abdomen. The most likely diagnosis,

- a. Lactose intolerance
- b. Celiac disease
- c. Inflammatory bowel disease
- d. Acrodermatitis enteropathica
- e. Giardiasis

4. A 9-months-old infant was rehydrated in emergency department with Normal saline 30ml/kg in one hour and 70ml/kg in next 5 hours. The most likely clinical presentation was;

- a. Restless and irritable
- b. Lethargic
- c. Slow skin pinch
- e. Seizure

5. What is the predominant route of transmission for HEV infection?

- a. Person-to-person contact
- b. Consumption of contaminated drinking water
- c. Vertical transmission from mother to child
- d. Parenteral route of infection
- e. Transmission by blood transfusion

6. A 45 year old man comes to your office for a follow up unit. One year ago, he was diagnosed with hereditary hemochromatosis after routine blood work found elevated ferritin and genetic testing revealed he had a C282Y/H630 genotype. He has been treated by phlebotomy with one unit of blood removed every week for the past year. His most recent laboratory results include the following Hemoglobin 120 g/l, Hematocrit 36%, Serum ferritin 50 ng/ml, Serum iron 100 ug/dl, Serum total IBC 260 mg/dl. What is the most appropriate next step in his Therapy?

- a. Phlebotomy 1 unit every 3 months
- b. A low Iron diet
- c. Phlebotomy 1 unit every 2 weeks until the hemoglobin concentration is less than 10.0g/dL
- d. Liver biopsy to assess hepatitis overlaid
- e. Phlebotomy 1 unit every 2 weeks until the serum iron level is less than 20 ug/Dl

7. A 6 year old Asian man with chronic HAV and cirrhosis referred to your clinic He is not currently on HBV treatment. A recent abdominal ultrasound did not show any suspicious lesion in the liver its laboratory values are as follows AST AS UA, ALT 34 UA, HBeAg negative, theAb positive, HBV DNA 3000 / 13. Total bilirubin 1 mg/dL What is the most appropriate recommendation at this time

- a. A liver biopsy to assess for inflammation
- b. An abdominal MRI
- c. Initiating antiviral treatment with tenofovir
- d. Holding antiviral treatment for now and monitor Liver function tests every 6 months
- e. Treatment with interferon

8. A 60 year old patient presented with history of progressive dysphagia which is both for solids and liquids There is a history of foul-smelling vomiting A manometric study was advised based on barium swallow. The manometry showed absent peristalsis and increased lower esophageal sphincter pressure. What is the most likely diagnosis?

- a. Diffuse esophageal spasm
- b. Esophageal carcinoma
- c. Achalasia cardia
- d. Scleroderma
- e. None of the above

9. A 30 year-old patient with known ulcerative colitis presented with acute flare of the disease due to non compliance of therapy which was severe in intensity. He was put on tab mesalamine 800 mg TDS and i/v prednisolone at a dose of 1 mg/kg/day On 6 day there was no response to treatment as evaluated by Truelove and witts criteria. Patient is otherwise hemodynamically stable. What will you do next?

- a. Pan colectomy
- b. Start on I/v cyclosporin
- c. Double the dose of steroids
- d. Add azathioprine to above treatment
- e. None of the above

10. Which of the test is done to detect latent tuberculosis?

- a. Smear staining
- b. Nuclear acid amplification
- c. Culture
- d. Mantoux test
- e. All of the above

11. A 60 year old woman was presented with chronic NSAID use for osteoarthritis of her knees is admitted to Hospital for hematemesis. On physical examination her vital signs are as follows: Temp 37.5, BP 90/50 Heart rate 130. Respiratory rate 17/min She is resuscitated and EGD was performed. A large 4 cm ulcer noted in antrum with oozing of blood. Which of the following is most appropriate next step in management?

- a. No endoscopic therapy, start PPI drip
- b. Send the patient to interventional radiology for further therapy
- c. Dual endoscopic therapy and PP drip for 72 hrs
- d. Billroth 1 gastric surgery
- e. None of the above

12. A 60 year old patient was admitted in hospital for pneumonia. He was put on antibiotics and while recovering from pneumonia he suddenly developed pain abdomen, watery diarrhea and fever. His labs are as follows: Hb 10.5, TLC 25000, Creatinine 1.9, ALT 56, CRP positive. What is the most appropriate investigation to evaluate the cause of diarrhea in this patient?

- a. Stool R/E
- b. Fecal calprotectin level
- c. Clostridium difficile toxin B assay in stool
- d. Sigmoidoscopy with biopsy
- e. None of the above

13. A 39 year old woman presents in OPD with one month history of nausea and vague pain epigastrium that is worst after meal. She denies weight loss, vomiting, dysphagia, hematemesis and rectal bleeding. She is taking contraceptives and occasional ibuprofen for headaches. Physical examination revealed mild tenderness in epigastrium. She was advised to stop ibuprofen and started on pantoprazole. She returns to OPD after 8 weeks but her symptoms are not changed. What is the best therapeutic test?

- a. Endoscopy with random biopsy
- b. H. pylori serology and treatment if positive
- c. H. pylori stool antigen testing and treatment if positive
- d. Empirically treat H. pylori
- e. None of the above

14. A 16 year old female presented to emergency department with sudden onset of profuse watery diarrhea followed by vomiting. On examination she is

conscious but dehydrated with BP of 80/60mmHg and feeble pulse. Investigations show urea 140mg/dl and creatinine 2.6mg/dl, rest of the baseline investigations are normal. What should be the immediate step in management?

- a. Intravenous antibiotics
- b. Intravenous fluid replacement
- c. Oral rehydration solution
- d. Oral fruit juices
- e. Hemodialysis

15. A 30 year old male was admitted with high grade continuous fever, malaise, arthralgia and loose stool for 6 days. On examination his temperature is 100 F, pulse 78/min and has splenomegaly. CBC shows leucopenia. On the basis of above information we are suspecting enteric fever. What next investigation will you do to confirm your diagnosis?

- a. Blood culture
- b. Stool culture
- c. Widal test
- d. Ultrasound abdomen
- e. Urine culture

16. What is best used for detecting small or healing ulcers?

- a. Abdominal CT
- b. Barium radiography
- c. Endoscopy
- d. MRI
- e. Urea breath test

17. A patient develops hepatic encephalopathy. Which clinical manifestation is most common with this condition?

- a. Altered level of consciousness
- b. Decreased tendon reflex
- c. Hypertension
- d. Hypotension
- e. Increased urine output

18. A 40-year-old male patient presented with jaundice, fever & abdominal pain. He also complained of vomiting and nausea. The provisional diagnosis of Liver abscess due to hydatid cysts is being considered Which of the following investigation will most likely help you in making a diagnosis?

- a. Blood complete picture
- b. Flow cytometry
- c. Immunohistochemistry
- d. Radiologic finding
- e. Stool culture

19. What is the most common symptom associated with chronic HCV infection?

- a. Abdominal pain with or without ascites
- b. Asymptomatic
- c. Dark stool
- d. Fever with or without jaundice
- e. Jaundice

20. A 50-year-old male patient presents with abdominal pain, constipation, and rectal bleeding, He has a family history of colon cancer. What is the most likely diagnosis?

- a. Colorectal adenoma
- b. inflammatory bowel disease
- c. Colorectal carcinoma
- d. Hemorrhoids
- e. Diverticulitis

21. A 70-year-old male patient presents with weight loss, fatigue, and diarrhea. Imaging studies reveal a large mass in the colon with metastases to the liver. What is the most appropriate treatment for this patient?

- a. Endoscopic mucosal resection
- b. Surgical resection of the tumor
- c. Palliative chemotherapy
- d. Radiation therapy
- e. Observation only

22. Which of the following symptoms is commonly associated with bacterial enterocolitis?

- a. Fever
- b. Joint pain
- c. Headache
- d. Dry cough
- e. Blurred vision

23. A 14 years male came to OPD with symptoms and signs of malabsorption. He is suspected celiac disease. To confirm it which of the following is most appropriate?

- a. Full blood count serum ferritin/and vit-D level
- b. Tissue transglutaminase antibodies
- c. family history of celiac disease
- d. Tissue transglutaminase antibodies followed by small intestinal endoscopic biopsy histopathology examination
- e. Antigliadin antibodies

24. 45 years male patient's liver biopsy shows Onion skin appearance the diagnosis is

- a. Liver cirrhosis
- b. Cholangio carcinoma
- c. Primary Sclerosing cholangitis
- d. NASH
- e. hepatocellular carcinoma

25. Diagnostic test for Wilson's disease is

- a. Antimitochondrial antibodies
- b. Glucose intolerance
- c. Liver biopsy
- d. Serum copper level
- e. Serum ceruloplasmin

KGMC 2023

1 A 45 yr old pt with HCV related chronic liver disease. .No cirrhotic, no baseline mutation. suggest treatment.

- a. Paretaprevir / interferon/ ladipasver
- b. Ladipasvir/sofosbuvir/ voxilaprevir
- c. Glecaprvir/pebrentasvir
- d. Velapatasvir / ribavirin
- e. Ritonavir / dasabusvir / velapatasvir

2. A 40 years old man presented with HCV related liver cirrhosis. Upper GI endoscopy shows multiple columns of esophageal varices. No history of variceal bleeding. What would be the appropriate treatment?

- a. IV Propranolol
- b. IV terlipressi
- c. IV pindolol
- d. Oral somatostation
- e. Oral carvedilol

3. A 50 year old man with a history of chronic hepatitis related cirrhotic liver presented to OPD with hematemesis and syncopal attack. Which of the following will be the first line management for him?

- a. IV Propranolol
- b. Iv novapressin
- c. IV terlipressin
- d. Oral somatostatin
- e. Oral Propranolol

4. A pt came, who is wasted, pale and has watery consistency stools with RBCS and anti-inF cells. Most appropriate initial test?

- a. stool culture
- b. barium follow through
- c. anti-tissue transglutaminase
- d. CT abdomen with contrast
- e. Lower GI endoscopy

5. history of on and off diarheao for 1 year with pallor , wight loss. No history of blood in urine.stool RE shows rbc or any other inflammatory cells . Next appropriate step for examination is

- a. Stool culture
- b. Lower gi endoscopy
- c. Ct with contrast
- d. Barium swallow

6. A 56 year old patient using analgesics for osteoarthritis for a long time. Now presented with dull pain in upper abdomen and occasionally blood stained vomit. Looks pale, no weight loss' Hb= 6.8gm%

What is investigation for his diagnosis?

- a. Abdominal ultrasound

b. Lower GI endoscopy

- c. Upper GI endoscopy
- d. Stool for occult blood
- e. Peripheral smear

7. 22yrs old nurse who is HBSAG positive for the last 1 yr. Her last ALT is 134 U/l. And PCR for HBV shows 20,000 copies/ml. Treatment regime?

- a. Conventional interferon
- b. Tenofovir 300 mg OD
- c. Ribavirin 400 mg thrice daily
- d. Supportive therapy only
- e. Sofosuvir with daclatasvir

8. A 35 years old lady thats known case of systemic lupus erythmatosis prrsented with vague abdominal pain mostle after meals. No loose motion, She has been treated with anti spasmodics' ppi but showed no respnce. Her lab investigation and abd u/s are innocclusive . What is the diagnosis

- a. Mesenteric ishchemia
- b. Peptic ulcer disease
- c. Chronic pancreatitis
- d. Chronic cholecystitis
- e. Chronic peritonitis

9. 23 year women presented with 2 months history of diarrhea occasionally with blood and mucus. She has received ciprofloxacin and metronidazole for sufficient time but no response. Abdominal ultrasound and barium studies are normal. Stool RE shows Neutrophils, RBCs and few cysts of Ent Ameba histolytica but no trophozoites. Which one of the following will be the most appropriate further investigation?

- a. Stool for occult blood
- b. Carcinoembryonic antigen
- c. Lower GI endoscopy
- d. CT scan abdomen
- e. Ultrasound abdomen

10. A 44 yr old obese man presented to opd with c/c of recurrent burning pain in epigastrium which is made worse at night and after meal. He smokes 10 cigrates per day. O/E there is tenderness on deep palpation in epigastrium. What is the most likely diagnosis?

- a. Ischemic heart disease
- b. Reflux esophagitis
- c. Peptic ulcer disease
- d. Cirrhosis

11. A 35 yrs old lady who is a known case of SLE presents with recurrent vague pain mostly after the meals. No complain of lose motion. She has been treated with anti-spasmodics and proton pump inhibitors but invain. Her labs and U/S are inconclusive.

Most likey diagnosis?

- a. Chr cholecystitis
- b. Chr panctratitis
- c. Peptic ulcer disease
- d. Mesenteric ischemia
- e. Chronic peritonitis

12. A 17 yr old boy come is suffering from hepatitis and vomiting for the last 5 days . He come with the blood streak vomit and retrosternal chest pain .what is the most likely diagnosis

- a. Peptic ulcers disease
- b. Acute esophageal bleeding
- c. Bleeding disorder
- d. Malorry Weis syndrome

13. A 56 yrs old man presented with Abdominal diattention. Clinical Examination shows everted umblicus and fluid thrill. His serum Albumin is 3.4, urea is 4.3, creatinine is 1.2 and SAAG 1.7.

Ultrasound abdomen shows normal size ecogenic liver with huge ascites.

Whats the cause of his ascites.

- a. chronic liver disease
- b. Chr liver disease

- c. Tuberculous abdomen
- d. Underlying malignancy
- e. Hypialbuminemia

14. 43 year lady presented with vomiting and upper abdominal pain that radiate to back . Temperature was 99.

Tender abdomen . Tlcs raise ultrasound show chollilithiasis with gall bladder wall thickness.

- a. Aproprate investigation .
- b. Serum amylase.
- c. Serum lipase.
- d. Upper git endoscopy.
- e. Ct. Mri cholangiopancreatography.

15. 10 yrs old girl presented with eatibg disorder of PICA. She has been given Anti-helmenthes by the local GP. What's the next treatment approach.

- a. Ferrous sulphate
- b. Folic acid
- c. B-12
- d. Pyridoxine
- e. Vitamin C

16. A 13 month old girl is being seen for hepatitis A exposure. The exposure was from contaminated strawberries. Not received hepatitis A vaccine. Currently asymptomatic. Exposure occurs less than 2 weeks ago. Appropriate therapy,

- a. Hepatitis A vaccine
- b. Hepatitis B vaccine
- c. Interferon
- d. Intra muscular Immunoglobulin
- e. Rebavar,,

17. A 4 year old child presented with loose motion an vomiting for 2 days.no blood in stool.he has sunken eyes and skin come back vary slowly.he is

- a. Sever dehydration
- b. Moderate dehydration
- c. Mild dehydration
- d. No dehydration

NWSM 2023

Q 1. A thirty year old unmarried presented to the ED with pain pari umbilical region shifting to RIF continuous pain and no radiation . Her dates are late by one week . It is associated with nausea anorexia and vomiting. On the examination the patient is pale tachycardia with bp 90/66 mm of Hg . On abdominal examination there is slight distended abdomen with tenderness all over abdomen there is a marked guarding rigidity on RIF and pelvis region. Which is most important test to perform

- a . Urine pregnancy test
- b . Virology
- c . Serum electrolytes
- d . Urinalysis
- e . C reactive protein level

2. A thirty-year-old unmarried, presented to the ED with pain peri-umbilical region shifting to RIF, continuous pain and no radiation. Her dates are late by one week. Its associated with nausea, vomiting and anorexia. On examination the patient is pale tachycardia, with a bp of 90/60mm of hg. On abdominal examination there is slight distended abdomen with tenderness all-over abdomen, there is marked guarding and rigidity on the RIF and pelvis region. What is the most important test to perform?

- a. Urine pregnancy test
- b. Virology
- c. Serum electrolytes
- d. Urinalysis
- e. C-reactive protein level

3. A 60-year-old woman with depression and poorly controlled type 2 diabetes mellitus complains of episodic vomiting over the past 3 months. She has constant nausea and early satiety. She vomits once or twice almost every day. In addition, she reports several months of mild abdominal discomfort localized to the upper abdomen. The pain sometimes awakens her at night. She has lost 5 lb of weight. Her diabetes has been poorly controlled (glycosylated hemoglobin recently was 9.5). Current

medications are glyburide, metformin, and amitriptyline. Her physical examination is normal except for mild abdominal distention and evidence of a peripheral sensory neuropathy. Complete blood count, serum electrolytes, BUN, creatinine, and liver enzymes are all normal. Gallbladder sonogram is negative for gulistones. Upper endoscopy and CT scan of the abdomen are normal. What is the best next step in the evaluation of this patient's symptoms?

- a. Barium esophagography
- b. Scintigraphic gastric emptying study
- c. Colonoscopy
- d. MR cholangiography
- e. Small bowel biopsy

4. Your read a report in a patient's medical notes who you suspect has inflammatory bowel disease. The reports reads 'there is cobble stoning of the terminal ileum with the appearance of rose thorn ulcers. These finding are suggestive of Crohns disease. Select the most likely investigation that this report was derived from:

- a. Sigmoidoscopy
- b. Barrium Follow Through
- c. Abdominal CT
- d. Abdominal US
- e. Colonoscopy

5. A 30-year-old pregnant woman presents with diarrhea, nausea, and abdominal cramps. She is concerned about the potential risks to her unborn baby. What is the most appropriate advice for this patient?

- a. Begin antibiotic treatment immediately to prevent complications
- b. Increase fluid intake and monitor for signs of dehydration
- c. Avoid all food and fluid intake until symptoms resolve
- d. Refer to an obstetrician for further evaluation and management
- e. Perform a stool culture to confirm the diagnosis

6. 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
- c. Biliary hypersecretion of cholesterol
- d. Hepatocyte infection by HBV
- e. Ingestion of foods rich in fat

7. A 40-year-old male comes to the casualty department with marked hematemesis. On physical examination, he has a temperature of 35.9°C, pulse of 112/min, respiration rate of 26/min, and blood pressure of 100/50 mm Hg. He has a distended abdomen with a fluid thrill, and the spleen tip is palpable. Which of the following liver diseases is most likely to be present?

- a. Cirrhosis
- b. Cholangiocarcinoma
- c. Fatty change
- d. HAV infection
- e. Massive hepatic necrosis

8. A 40-year-old male comes to the casualty department with marked hematemesis. On physical examination, he has a temperature of 35.9°C, pulse of 112/min, respiration rate of 26/min, and blood pressure of 100/50 mm Hg. He has a distended abdomen with a fluid thrill, and the spleen tip is palpable. Which of the following liver diseases is most likely to be present?

- a. Cirrhosis
- b. Cholangiocarcinoma

- c. Fatty change
- d. HAV infection
- e. Massive hepatic necrosis

9. 1. A thirty-year-old unmarried, presented to the ED with pain peri-umbilical region shifting to RIF, continuous pain and no radiation. Her dates are late by one week. Its associated with nausea, vomiting and anorexia. On examination the patient is pale tachycardia, with a bp of 90/60mm of hg. On abdominal examination there is slight distended abdomen with tenderness all-over abdomen, there is marked guarding and rigidity on the RIF and pelvis region. What is the most important test to perform?

- a. Urine pregnancy test
- b. Virology
- c. Serum electrolytes
- d. Urinalysis
- e. C-reactive protein level

KMC 2023

1: A patient aged 30 years presented to a GP with 7 days history of watery diarrhea and now with pursed lip breathing and confusion. What is the most likely diagnosis in this patient?

- a. Acute tubular necrosis
- b. Black water fever
- c. Cholera
- d. Hepatitis encephalopathy
- e. Hypovolemic shock

2: A 70 years patient was recently diagnosed with ascites and yellow discoloration of the sclera presented to a GP with altered consciousness. The GP after initial management suspected which of the following?

- a. Hepatitis encephalopathy
- b. Subdural Hematoma
- c. Stroke
- d. Hemolytic jaundice
- e. Congestive cardiac failure

3: A five years old girl is brought to OPD, with complaints of fever, pain abdomen, vomiting, loss of appetite and yellowish discoloration since last r days. On examination she is febrile jaundiced, having hepatomegaly of 4 cm below right costal margin and tender right hypochondrium. 7 days back her younger brother was treated for jaundice. Hepatitis B & C workup by ICT is negative. ALT is 1500, ALP is 70 and serum bilirubin is 16 mg/dl, how will you confirm the diagnosis?

- Ultrasound abdomen
- Hepatitis B and C by ELISA
- Hepatitis B and C by PCR
- Anti hepatitis A IgM
- Anti hepatitis A IgG

4: A 4 days old baby girl born to G3P2 mother, presented with jaundice since her first day of life. Mother's blood group is O-ive and baby blood group is A+ive. On examination, baby is pale and icteric. Her total S bilirubin is 27 mg /dl , indirect bilirubin is 25.5mg/dl. The most likely cause of jaundice in this baby is

- ABO blood group incompatibility
- Both ABO and Rh incompatibility
- G6PD deficiency
- Physiological jaundice
- Rh incompatibility

5: A 3 year old child presented to OPD with history of loose stools and vomiting for the past two days . On examination his temperature is 99F . He is lethargic, unable to drink and his skin pinch goes back very slowly. How will you manage this patient?

- Plan A for rehydration, zinc,oral antibiotics
- Plan B for rehydration, zinc, oral antibiotics
- Plan B for rehydration and zinc
- Plan C for rehydration, zinc, oral antibiotics
- Plan C for rehydration and zinc

6: A 58 years old woman os brought to the emergency with sudden onset pain in the abdomen for the last two hours. The pain is agonizing in

nature and she has a history of NSAIDS use for her arthritis. Peptic ulcer perforation is suspected, what investigation would be diagnosed in this situation?

- Serum amylase levels
- Urea breath test
- Ultrasound of the abdomen
- Upper GI endoscopy
- X ray chest pA view

7: A 45 years old male presents to the OPD with the complaint of dyspnea. On careful questioning he admits that he has lost some weight. On examination, a pillar is noted. Rest of the examination is unremarkable. Routine tests show that his hemoglobin is 9 g/dl. What is the most appropriate next investigation?

- Ultrasound of abdomen
- CT scan abdomen and pelvis
- Upper GI endoscopy
- .H pylori antigen
- Urea breath test for H pylori.

8: A 37 year old woman has had 3 days of increasing epigastric pain, nausea and fever. She is tender in the right upper quadrant of abdomen. Investigations reveals a WBC of 17×10^9 , a CPR of 25 mg/l and an aspartate transaminase of 67 IU/L . What is the single most appropriate investigations?

- Abdominal X ray
- CT scan of abdomen
- Upper abdominal ultrasound scan
- OGD
- Magnetic resonance cholangiopancreatography

9: A 70 year old man presented with severe abdominal pain that radiates to the back. All of the following investigations will help in diagnosis except?

- Abdominal X ray
- Abdominal ultrasound
- Serum alpha feto protein
- Serum amylase
- Total leukocytes count

10: A 55 years old male presents with features of obstructive jaundice. He also report weight loss of 7 kgs in the last 2 months. On CT scan, the CBD is dilated till the lower end and the main pancreatic duct is also dilated. Pancreas is normal . What is most likely diagnosis?

- Choledocholithiasis
- Carcinoma gall bladder
- Hilar cholangiocarcinoma
- Periampullary carcinoma
- Hepatoma

11: A 30 old male is presented with bleeding per rectum for the last two years. It is bright red at the end of defecation, separate from motions occasionally it accompanies itching. Which of the following is fits into diagnosis?

- Fissure -en-Ano
- Hemorrhoids
- Rectal prolapse
- Solitary rectal ulcer
- Carcinoma rectum

12: A 60 old man with established cirrhosis had a surveillance ultrasound scan. It showed a 2 cms focal Liver lesion. AFP levels were normal. What is the most appropriate next step?

- Contrast enhanced CT scan
- Liver transplant referral
- Repeat AFP at 6 weeks
- Repeat USS at 6 weeks
- Ultrasound guided liver biopsy

13: A 60 year old man with established cirrhosis underwent a six monthly surveillance ultrasound scan (USS). It showed a suspicious focal Liver lesion. A subsequent contrast CT scan of abdomen confirmed a 2.5 CMS focal lesion in the liver. Serum alpha Fetoproteins were raised at 200 ng/ml . A previous AFP and USS were normal 6 months earlier. What is the most appropriate next step?

- Liver transplant referral

- PET scan
- Repeat scan at 6 weeks
- Repeat AFP in y months
- Ultrasound guided liver biopsy

14: A 70 years old patient complaints of weight loss, low grade fever, lethargy and weakness for the last 6 months. It was found that patient has altered bowel habits i.e alternating diarrhea and constipation.abdominal examination shows vague mass in right lower abdomen and slight pain . Stool R/E shows occult blood. What is the diagnosis in this case?

- Colorectal carcinoma
- Erythroplakia
- Haemorrhoids
- Meckel's diverticulitis
- Pancreatitis

15: A 30 year old patient complaints of sudden onset severe epigastric pain which radiates to the back. The pain is revealed by learning forwards . Laboratory investigations show elevated levels of serum bilirubin, Alaine transaminase, amylase and lipase. Leukocyte count is also increased. What is the most likely diagnosis in this case?

- Acute cholecystitis
- Acute pancreatitis
- Acute viral hepatitis
- Chronic cholecystitis
- Pancreatic pseudocyst

4. GIT SURGERY

PAPER WMC

1. A 22 years old married female presented with pain RIF and rebound tenderness is positive. Most likely diagnosis is;

- Ureteric stone
- Acute appendicitis
- Pelvic inflammatory disease
- Ectopic pregnancy
- Intestinal obstruction

2. Which of the following investigations should be performed for multiple perianal fistula?

- a. Ultrasound
- b. CT scan
- c. MRI
- d. Fistulogram
- e. Biopsy

3. A 45 years old female presented in surgical OPD having bleeding P/R with defecation for few days which is bright red. She also gives history of constipation and something coming out during defecation that reduce spontaneously. What is likely diagnosis

- a. Hemorrhoids
- b. Fistula in Ano
- c. Anal fissure
- d. Anal carcinoma
- e. Colorectal cancer

GMC 2023

1. A 30 year, old female undergoes Appendectomy for acute appendicitis. Histopathology shows 1 cm carcinoid tumour at the tip of the appendix most appropriate further management is

- a. Right hemicolectomy
- b. Right hernicelectomy with chemotherapy.
- c. Chemotherapy alone
- d. No further treatment
- e. Radiotherapy

KGMC 2023

1. 30 years old man has stab wound injury on abdomen. He was operated during op the dctr on small intestine doc find 1cm circumscribed submucosal mass in ileum. When lesion was resected on gross it has yellow tan cut surface. On microscopy it has cells with round nuclei and small round granules . Immumohistochemical staining shows antibodies against chromogranin cytoplasm. What is the most likely lesion pt is suffering from?

2. An upward dislocation of the cardia comes in which level hiatal hernia :

- a. I
- b. LI
- c. LII
- d. IV
- e. morgagnis

3. The most common complication following open splenectomy;

- a. Pancreatitis
- b. Left lower lobe atelectasis
- c. Pleural effusion
- d. Wound infection
- e. Acute gastric dilatation

4. Investigation of choice for gall stones.

- a. Xray abdomen
- b. U/s abdomen
- c. Ct abdomen
- d. Mrcp
- e. Ercp

5. A 40yrs female with preumbilical swelling presented. On examination lump is reducible and peri umbilical region cough pulse is positive. Suggest the best treatment

- a. Hernioplasty
- b. Herniotomy
- c. Hernioorophy
- d. Abdominal belt
- e. Ansaid

6. common side for intraperitoneal abscess

- a. Subphrenic
- b. Sub hepatic
- c. Paracolic
- d. Pelvic
- e. Retropelvic

KMC 2023

1: A 36 year old female, mother of 3, presented with complaints of pain on defecation for the last 4 months. She does not give any history of fever, cough and constipation in past. However, she had multiple episodes of acute watery diarrhea and pain in RIF . Examination is otherwise insignificant except for anal fissure at 6 o'clock and an oral ulcer. What is the most appropriate treatment option in this case?

- a. Treat anal fissure with GTN QID
- b. Put the patient on list for lateral internal anal sphincterotomy
- c. Perform anal advancement flap
- d. Refer to gastroenterologist for colonoscopy
- e. Excise the ulcer and biopsy

2: A 30 old male presented with rectal prolapse. He was advised surgery. He was told that in the procedure rectal mucosa will be stripped circumferentially and the muscles will be plicated . Which of the following fits into description?

- a. Thiersch operation
- b. Goodsall's ligation
- c. Delorme's operation
- d. Altermier' s procedures
- e. Sutured rectopexy

5. FORENSIC MEDICINE

PAPER WMC

4. Capsaicin and capsin are the active principles of which of the following vegetable poison.

- a. Capsicum
- b. Croton tiglium
- c. Calotropis gigantea
- d. Procera
- e. Plumbago rosea

5. Phossy jaw, an osteomyelitis of the jaw with multiple sinuses discharging foul smelling pus occur in which poisoning;

- a. Acute iodine poisoning
- b. Chronic iodine poisoning
- c. Chronic phosphorus poisoning
- d. Bromide poisoning
- e. Acute phosphorus poisoning

6. Fatal dose of phosphorus poisoning is.

- a. 120 mg
- b. 100 mg
- c. 10 mg
- d. 180 mg
- e. 80 mg

7. Antacid for phosphorus poisoning is.

- a. 0.5 sol of potassium permanganate
- b. 1% sol of copper sulfate
- c. 5% sol of potassium permanganate
- d. EDTA
- e. No Antacid for phosphorus poisoning

8. Rain drop pigmentation of skin is seen in.

- a. Chronic lead poisoning
- b. Chronic arsenic poisoning
- c. Acute lead poisoning
- d. Acute arsenic poisoning
- e. Copper poisoning

9. Red velvety appearance of stomach is seen in the postmortem finding of the following poisoning.

- a. Lead poisoning
- b. Mercury poisoning
- c. Arsenic poisoning
- d. Copper poisoning
- e. Antimony poisoning

10. Antidote of acute arsenic poisoning is.

- a. Freshly precipitated hydrated ferric oxide
- b. Copper sulfate
- c. Potassium permanganate
- d. Sodium thiosulfate
- e. Inj dime dimercaprol

11. Fatal dose of lead acetate is.

- a. 5 grams
- b. 20 gms
- c. 15 gms
- d. 25 gms
- e. 0.5 gms

12. Anemia with pamtate basophilia is seen in.

- a. Plumbism
- b. Arsenic poisoning
- c. Iodine poisoning
- d. Acute lead poisoning
- e. Phosphorus poisoning

13. Fatal dose of copper.

- a. 10 kg of copper sub acetate
- b. 15 gms of copper sulphate
- c. 15 kg of copper sub acetate
- d. 10 gms of copper sulphate
- e. 20 kg of copper

14. Postmortem finding of stomach in oxalic acid poisoning.

- a. Red velvety mucosa
- b. Contain brown gelatinous liquid due to acid hasmatin
- c. Punctate basophilia
- d. Garlicky odour
- e. Luminous stomach contents

15. Act of disfigurement comes under the.

- a. Section 336- A
- b. Section 320
- c. Section 336- B
- d. Section 326 B
- e. Section 497

16. Fatal dose of sulphuric acid is.

- a. 10 to 15 ml
- b. 3 to 5 ml
- c. 30 to 40 ml
- d. 6 to 8 ml
- e. 1 ml

17. Following is mostly used in 'Vitriolage' .

- a. Organic acid
- b. Hydrocyanic acid
- c. Caustic potassium
- d. Mineral acids
- e. Ammonia

GMC 2023

1. Which of the following diagnostic tests is commonly used to detect bacterial enterocolitis?

- a. Magnetic resonance imaging (MRI).
- b. Computed tomography (CT. scan
- c. Blood culture
- d. Stool culture
- e. Urine analysis

2. Rigor Mortis last longer in poisoning due to

- a. Arsenic
- b. Antimony
- c. Mercury
- d. Thallium
- e. Lead

3. Gastric lavage is contraindicated in corrosive poisoning as it causes

- a. Aspiration
- b. Embolism
- c. Perforation
- d. Stroke
- e. Stricture formation

4. The predominant symptoms in acute arsenic poisoning is

- a. Changes in voice
- b. Cerebral irritation
- c. Hypothermia
- d. Hyperthermia
- e. Rice water stools

5. Raindrop appearance of the skin is seen in chronic poisoning due to

- a. Arsenic
- b. Lead
- c. Mercury
- d. strychnine
- e. Thallium

6. A person was brought by police from the railway platform. He is talking irrelevant. He has a dry mouth with hot skin, dilated pupil, staggering gait and slurred speech the most probable diagnosis

- a. Alcohol intoxication
- b. Carbamate poisoning
- c. Organophosphorus poisoning
- d. Datura poisoning
- e. Capsicum poisoning

7. A middle aged man presents with paresthesia of hands and feet Examination reveals presence of "Mees" lines in the nails and raindrop pigmentation in the hands, the most likely causative toxin for the above mentioned symptom is

- a. lead
- b. Arsenic
- c. Thallium
- d. Mercury
- e. Copper

8. A house wife ingests a rodenticide white powder accidentally. She is brought to hospital where the examination. shows generalized, flaccid paralysis and an irregular pulse Electrocardiogram shows multiple ventricular ectopics generalized changes with ST-T. Serum potassium is 2.5mEq/L. The most likely ingested poison is

- a. Barium carbonate
- b. Super warfarins
- c. Zinc phosphide
- d. Lead
- e. Arsenic

9. A middle aged woman swallowed 50 ml of solution used for photographic purposes. The quantity was 300 mg in 2 minutes she became unconscious. The whole of the body was slightly convulsed, the pupils were dilated she had frothing the pulse was weak and she died within 20 minutes. The most possible solution is?

- a. Phosphorus
- b. Carbolic acid
- c. Potassium cyanide
- d. Arsenic
- e. Mercury

10. After skin contamination the patient passed into coma with miosis and finally acute nephritis. The poison responsible is

- a. Oxalic acid
- b. Nitric acid
- c. Carbolic acid
- d. Sulphuric acid
- e. Hydrocyanic acid

11. In case of food borne botulism the toxin is:

- a. Formed in the canned food before consumption
- b. Formed in the mouth
- c. Formed in the duodenum"
- d. Formed in the colon
- e. Formed in the stomach

12. "Red Velvety Stomach is seen in a death due to

- a. Acute mercury poisoning
- b. Acute copper poisoning
- c. Acute lead poisoning
- d. Acute Arsenic poisoning
- e. Acute phosphorus poisoning

13. The following should be avoided in neutralization of acid present in the stomach in acid poisoning

- a. Water
- b. Milk
- c. Weak Alkali
- d. Milk with magnesium oxide
- e. All of above

14. Castor oil is a following kind of poison

- a. Irritant
- b. Deliriant
- c. Inebriant
- d. Narcotic
- e. Corrosive

15. The fatal dose of croton seeds is

- a. One
- b. Four
- c. Ten
- d. Fifty
- e. Hundred

16. The active principle in ratti seeds is

- a. Crotin
- b. Ricin
- c. Cannabinol
- d. Abrin
- e. Paracetamol

KGMC 2023

1. Salt of mercury having corrosive action is.

- a. Mercuric chloride
- b. Mercuric iodide
- c. Mercurous chl
- d. Organic salts of mercury
- e. Oxides of mercury

2. Hypocalcemia is the symptom of _____poison

- a. Carbolic acid
- b. Oxalic acid
- c. Nitric acid
- d. Sulphuric acid
- e. Hydrocyanide

3 The antidote of choice in acute copper poisoning is

- a. atropine
- b. BAL and EDTA
- c. BAL EDTA or pencillinamine
- d. Freshly precipitated hydrated ferric oxide
- e. Universal antidote

4.Perforation of stomach is common in case of ingestion

- a.HCL
- b. H2SO4
- c. HNO3
- d. None

5. Inhalation of ammonia vapours causes sudden collapse and death due to:

- a. Gaging
- b. Ligature strangulation
- c. Suffocation
- d. Mugging

6. X ray of long bone of 5 years old boy presented with complain of dry belly ache show transverse opaq band at end what is diagnosis .

- a. Acute copper poisoning
- b. Acute lead poisoning
- c. Acute arsenic poisoning
- d. Chronic lead poisoning
- e. Chronic copper poisoning

7. Antidote of choice in HCN poisoning and its cynides:

- a. BAL
- b. CuSO4
- c. Methylene blue 1%
- d. EDTA
- e. Vinegar

8. The organ having highest concentration of arsenic in acute arsenic poisoning is;

- a. Kidney
- b. Liver
- c. Muscles
- d. Nails
- e. Skin

9. Osteomyelitis of the jaw bone is seen in the chronic poisoning with :

- a. Arsenic
- b. Phosphorous
- c. Carbolic acid

10. The earliest and most consistent sign in the chronic lead poisoning is :

- A. Anaemia and punctate basophilic cells
- b. Facial circumoral pallor
- c. Lead encephalopathy
- d. Lead line
- e. Wrist Drop

11. Punctate basophilia is the toxic effect of

- a. Lead
- b. Mercury
- c. Copper
- d. Arsenic

12. Antidote for phosphorous poisoning is :

- a. Activated charcoal
- b. British anti-lewisite
- c. Freshly prepared hydrated ferric oxide
- d. KMNO₄
- e. Sodium Thiosulphate

13. Hypocalcemia occurs in poisoning of

- a. Acetic acid
- b. Hydrochloric acid
- c. Hydrofluoric acid
- d. Nitric acid
- e. Sulphuric acid

14. Mercuric lens in case of chronic mercury poisoning is due to

- a. Brown discoloration of anterior capsule of lens
- b. Brown discoloration of posterior capsule of lens
- c. Discoloration of lens
- d. Grey discoloration of anterior capsule of lens
- e. Grey discoloration of posterior capsule of lens

15. Punctate basophilia is the toxic effect of lead on

- a. Cori cycle
- b. Krebs cycle
- c. Electron transport chain
- d. Porphyrin metabolism

NWSM 2023

1. Vomiting is least likely in acute poisoning caused by

- a. Carbolic acid
- b. Oxalic acid
- c. Nitric acid
- d. Phosphorus
- e. Sulphuric acid

2. Gigantin is the active principle of

- a. Calotropis
- b. Capsicum
- c. Colocynth
- d. Croton tiglium
- e. Marking nut

Q3. The most corrosive toxic poison for respiratory tract is

- a. Caustic potash
- b. Hydrochloric acid
- c. Nitric acid
- d. Oxalic acid
- e. Sulphuric acid

4. Marking nut is also called as:

- a. Calotropis
- b. Claviceps purpurea
- c. Croton tiglium
- d. Ricinus communis
- e. Semecarpus acardium

5. "Christison's saying" is about:

- a. Arsenic
- b. Carbolic acid
- c. Mercury
- d. Oxalic acid
- e. Thallium

6. Erethism is a feature observed in:

- a. Chronic alcohol poisoning
- b. Chronic lead poisoning
- c. Chronic antimony poisoning
- d. Chronic arsenic poisoning
- e. Chronic mercury poisoning

7. The poison which causes baldness on scalp and lateral two third of eye brows is:

- a. Aluminium
- b. Arsenic
- c. Mercury
- d. Oxalic acid
- e. Thallium

8. "Punctate basophilia" is diagnostic feature of:

- a. Chronic antimony poisoning
- b. Chronic arsenic poisoning
- c. Chronic mercury poisoning
- d. Chronic phosphorus poisoning
- e. Plumbism

9. "Red velvety appearance of gastric mucosa is found in:

- a. Acute antimony poisoning
- b. Acute arsenic poisoning
- c. Acute lead poisoning
- d. Acute mercury poisoning
- e. Acute phosphorus poisoning

10. Tetraethyl pyrophosphate (TEPP) is one of the:

- a. Cardiac poisons
- b. Deliriant poisons
- c. Organophosphorus poisons
- d. Somniferous poisons
- e. Spinal poisons

11. "Surma" is:

- a. Lead acetate
- b. Lead carbonate
- c. Lead oxide
- d. Lead sulphide
- e. Lead tetroxide

12. The corrosive poison which is used to differentiate gold from other metals is:

- a. Acetic acid
- b. Carbolic acid
- c. Nitric acid
- d. Oxalic acid
- e. Sulphur acid

13. Hatter's shake is observed in:

- a. Chronic antimony poisoning
- b. Chronic arsenic poisoning
- c. Chronic mercury poisoning
- d. Chronic phosphorus poisoning
- e. Plumbism

14. The corrosive poison which is used to erase writing in attempt of forgery is:

- a. Caustic potash
- b. Nitric acid
- c. Oxalic acid
- d. Phenol
- e. Sulphur acid

15. "Mee's line" on the nails is seen in:

- a. Chronic antimony poisoning
- b. Chronic mercury poisoning
- c. Chronic phosphorus poisoning
- d. Plumbism
- e. Thallium poisoning

16. Smokey green color of urine is observed in poisoning due to:

- a. Arsenic
- b. Carbolic acid
- c. Mercury
- d. Oxalic acid
- e. Phosphorus

17. The most toxic corrosive poison for respiratory tract is:

- a. Caustic potash
- b. Hydrochloric acid
- c. Nitric acid
- d. Oxalic acid
- e. Sulphur acid

18. "Gigantin" is the active principle of:

- a. Calotropis
- b. Capsicum
- c. Colocynth
- d. Croton tiglium
- e. Marking nut

19. Vomiting is least likely in acute poisoning caused by:

- a. Carbolic acid
- b. Nitric acid
- c. Oxalic acid
- d. Phosphorus
- e. Sulphuric acid

KMC 2023

1: You are working as institutional medical officer in an emergency department of tertiary care hospital. A washer men presented with irritation, itching and blisters. There were eczematous eruptions of the surrounding skin resembling a bruise. What is the most likely causative agent in this case?

- a. Earbus precatorius
- b. Calotropis procera
- c. Croton tiglium
- d. Plumbago rosea
- e. Semecarpus anacardium

2: In a dental OPD, a doctor examined a patient with history of toothache with foul smelling. On examination there was swelling of jaw with loosening of teeth, necrosis of the gums with multiple foul smelling discharging sinuses. What is the most likely cause in this condition?

- a. Arsenic poisoning
- b. Cocaine poisoning
- c. Dhatura poisoning
- d. Opium poisoning
- e. Phosphorus poisoning

3: A dead was presented to a department of Forensic Medicine, KMC, Peshawar for postmortem examination, where in autopsy report revealed blue line gums, ulceration of GIT wall, on X-ray lead line was recorded, and bone marrow hyperplasia was also noted. What is fatal period in poisoning of all such cases?

- a. 12-24 hours
- b. 1-2 days
- c. 2-3 days
- d. 3-4 days
- e. 4-5 days

4: A dead body to autopsy room KMC, Peshawar. Upon examination it had bitter almond like smell, cherry red color postmortem lividity, cyanosed face, tightly clenched jaw, and hemorrhages on the serosal surfaces. In such cases, spleen is considered to be best sample for chemical analysis. What would be the possible findings by the chemical analyzer in such poisoning case?

- a. Decrease number of RBCs
- b. Degenerated RBCs
- c. Increase number of RBCs
- d. Normal RBCs
- e. Ruptured RBCs

5: You are posted as casualty medical officer in a district Headquarter hospital. A patient was received with headache as the only symptom. He brought some sample of a poison which was identified to be potassium cyanide. Cyanide is ineffective in which of the following conditions?

- a. Have low acid in stomach
- b. Have hyperacidity

c. Low dose

d. No acid in stomach (achlorhydria)

e. Obese persons

6: A group of travelers had a visit to Kumrat. A lady of middle age was suddenly found dead on one side of the valley in her camp. The crime scene shows that she was in a closed space and some plastic was burning there, the fatal period was recorded as 2 to 10 minutes and the phenomena by which death occurred was cytotoxic anoxia. Which specimen would be considered as best sample for confirmation of the poison?

- a. Blood
- b. Liver
- c. Lungs
- d. Spleen
- e. Urine

7: A child of 5 years belonging to a farmer family presented to the emergency department with abdominal pain, vomiting, diarrhea, and bleeding per rectum. In order to decrease the toxicity procedure of gastric lavage was performed which extracted small reddish brownish seeds from the stomach. What can be most common manner of death in such poisoning?

- a. Accidental
- b. Homicidal
- c. Pending
- d. Suicidal
- e. Undetermined

8: A child of two years presented to the emergency and accident department for ingestion of an accidental poison from dressing table of her elder sister with signs and symptoms of convulsion, muscle irritability, and Accoucheur's hand. In addition, hypocalcemia positive Chvostek's sign, metabolic acidosis and renal failure was also recorded. Which poison can cause such a condition of the child?

- a. Acetic acid
- b. Carbonic acid
- c. Magnesium sulphate
- d. Oxalic acid
- e. Zinc sulphate

9: A dead body brought to the autopsy room, KMC by the local police. History given to the duty medico-legal officer was of poisoning. On examination, there is dark brown staining and garlic odour of the stomach. What is the most likely poison in this condition?

- a. Aniline dye
- b. Carbon dioxide
- c. Magnesium sulphate
- d. Oxalic acid
- e. Zinc sulphate

Phosphorus

6. COMMUNITY MEDICINE

PAPER WMC

1. The centralization principle of management science has brought about the existence of central sterile services department (CSSD) in large hospitals. The significance of CSSD is .

- a. To bring advancement in medical science to provide betterment of humanity
- b. To help the doctors to develop leadership qualities and human relationship abilities
- c. To bring efficiency and economy in the centralization of sterilization of syringes activity in one location for use all over the hospital
- d. To help nonmedical staff to learn administration skills
- e. To help medical professionals to develop management attitudes.

2. A hospital is a vital organization and stands unique and incomparable to any other organizations. Which of the following is considered an important part of new hospital plan for aesthetics and access and to utilize the potential to capture or avoid natural energy?

- a. Provision for disasters
- b. Functional requirements
- c. Future expansion
- d. Environmental impact analysis
- e. Citing and orientation

3. Which of the following is determined by calculating death after 24 hours of hospital admissions.

- a. Gross death ratio
- b. Random death ratio
- c. On the spot death rates
- d. Net death rate
- e. Chronic death rate

4. This approach to health promotion is based on the assumption that humans are national division markers. This approach relies heavily upon providing information about the risks and benefits of certain behaviors.

- a. Behavior change approach
- b. Community development approach
- c. Biomedical approach
- d. None of these

5. Which of the following is the best source for building cells and structures in children.

- a. Meat
- b. Egg
- c. Milk
- d. Fish
- e. All of above

6. The burden of disease is measured by.

- a. Disability adjusted life years
- b. Physical Quality of life years
- c. Health Adjusted life years
- d. All of the above
- e. Life expectancy

7. MDG stands for.

- a. Medical Development Group
- b. Millennium development goals
- c. Master development goals
- d. Management development goals
- e. None of the above

8. In sustainable development goal-3 , the target of maternal mortality reduction by 2030 is.

- a. 170 per 100,000 live births
- b. 70 per 100,000 live births
- c. 40 per 100,000 live births
- d. 30 per 100,000 live births
- e. 10 per 100,000 live births

9. The first referral level In health care system is.

- a. Subcentre
- b. Primary health center
- c. District hospital
- d. Teaching hospitals
- e. Answer not known

10. A village has a total of 100 under five children measles vaccine coverage in this age group is 60 % (Assuming 100% efficacy) . Following the occurrence of a measles case in a child after a visit outside, twenty -six children developed measles. The secondary attack rate of measles is

- a. 25%
- b. 40%
- c. 50 %
- d. 66%
- e. 100%

11. The minimum number of antenatal visits during the entire period of pregnancy should be.

- a. Two
- b. Four
- c. Five
- d. Three
- e. Ten

12. Primordial prevention of myocardial infarction is all except

- a. Maintenance of normal body weight
- b. Regular physical activity
- c. Change in nutritional habits
- d. Screening for hypertension
- e. Answer not known

13. Which among the following is not a manpower requirement for a primary health center (PHC)?

- a. Medical Officer _MBBS
- b. Dental surgeon
- c. Laboratory technician
- d. Pharmacist
- e. Answer not known

14. Which of the following is an important and common specimen for the microscopic detection of malaria parasites in humans?

- a. Stool
- b. Sputum
- c. Blood
- d. Urine
- e. Spinal fluid

15. The ultimate objective of a health management information system is to improve health through

- a. Evidence- based decision making
- b. Providing management tool
- c. Option appraisal
- d. Quality control
- e. None of above

16. Electronic medical record system refers to

- a. Completing accurate data about patient care
- b. Information of a patient treatment plan
- c. Health information exchange in place between facilities
- d. All above
- e. None above

17. The ultimate objective of financial medels for health systems should target

- a. Reducing out of pocket expenditure
- b. Reducing Government spending on health
- c. Increasing out of pocket expenditure
- d. Increasing Gov seindi of health
- e. None of the above

18. _____ refers to the way in which citizens , civil society organization, an other stakeholders hold government public officials, and other actors accountable for their actions and decisions.

- a. Corporate accountability
- b. Political accountability
- c. Social accountability
- d. Media accountability
- e. Government accountability

19. Which of the following is the most common route of transmission for enteric infection.

- a. Inhalation airborne droplets
- b. Sexual contact
- c. Contact with contaminated surfaces or objects
- d. Ingestion of contaminated food or water
- e. Direct skin to skin contact

20. Methods of prevention of hepatitis A

- a. Primary prevention
- b. Clean water supply
- c. Vaccination
- d. Reducing contact with infected person
- e. All of the above

GMC 2023

1. A community health worker is conducting a survey to determine the prevalence of anemia in a village. She randomly selects 200 women of childbearing age and tests their hemoglobin levels. She finds that 40 women have anemia. What is the prevalence of anemia in the village?

- a. 02%
- b. 04%
- c. 10%
- d. 20%
- e. 40%

2. In a city of 500,000 people with no old cases of TB, 2000 people were diagnosed with tuberculosis in a year. What is the incidence rate/1000 population during that year?

- a. 0.4 per 1000
- b. 4 per 1000
- c. 40 per 1000
- d. 400 per 1000
- e. 4000 per 1000

3. In which of the following circumstances the prevalence of a disease in a population will increase all else being constant?

- a. If population in which disease is measured increases
- b. If recovery of the disease is faster
- c. If secondary attack rate falls
- d. If survival time of disease increases
- e. If the incidence rate falls

4. In an epidemiological context, what is the population at risk?

- a. A group of people participating in a study that may be harmful to them
- b. Group of people who are not diseased but susceptible to disease
- c. Population group with highest attributable risk of disease
- d. Population group with highest relative risk of disease
- e. The proportion of population that engages in risky behavior

5. Chernobyl tragedy is an example of:

- a. Continuous epidemic
- b. Modern epidemic
- c. Point source epidemic
- d. Propagated epidemic
- e. Slow epidemic

6. A village water supply is contaminated with industrial waste for a long time, resulting in increased number of chemical poisoning cases for past many years. What type of epidemic is this?

- a. Continuous epidemic
- b. Modern epidemic
- c. Point source epidemic
- d. Propagated epidemic
- e. Slow epidemic

7. Which indicator shows the risk of developing a disease

- a. Case fatality rate
- b. Incidence rate
- c. Period prevalence
- d. Point prevalence
- e. Recovery rate

8. Population at risk is used as a denominator for calculation of a rate. Which of the following rates uses population at risk as denominator?

- a. Generation time
- b. Incidence rate
- c. Point prevalence
- d. Proportional mortality ratio
- e. Standardized mortality ratio

9. An expert in the field of public health is required to estimate the magnitude of iodine deficiency disorders. He will use this information for planning purposes. Which rate would he calculate for this?

- a. Case fatality
- b. Incidence
- c. Prevalence
- d. Proportionate mortality
- e. Total mortality

10. A new disease of respiratory system affected a large proportion of population over a wide geographic area including many continents in 2019. What this kind of disease spread is called?

- a. Epidemic
- b. Sporadic
- c. Pandemic
- d. Endemic
- e. Opportunistic

11. An LHV in a BHU of a remote area examined a primigravida at 22 weeks have proper antenatal assessment and to prevent complications of pregnancy induced hypertension. The first level referral should be to

- a. BHU
- b. DHQ
- c. Specialized maternity clinic
- d. Teaching hospital
- e. THQ

12. A woman traveled a long way from a remote village & came to a population welfare center/family planning center She had enough money but was very tired on account of traveling. When she went inside, she found a male doctor dealing with the clients. She decided to go back. The most likely reason for this decision is lack of

- a. Acceptability
- b. Affordability
- c. Accessibility
- d. Efficacy
- e. Effectiveness

13. In a poor community, there is high prevalence of acute diarrhea cases. The best method for preventing this health problem in the long run is

- a. Anti-diarrheal drugs
- b. Immunization against cholera and typhoid
- c. Living in mosquito proof zone
- d. Provision of sanitary latrine
- e. Use of fresh vegetables

14. True about viral hepatitis B s

- a. No vaccine available.
- b. Transmit by fecal route
- c. Transmit by fomite
- d. Transmit by reuse of infected syringes
- e. Transmits by oral route

15. AS COVID-19 pandemic was spreading in many countries. Researchers wanted to calculate the risk of acquiring COVID-19 for population. Which rate would he calculate for this?

- a. Case fatality
- b. Cause specific mortality
- c. Incidence
- d. Prevalence
- e. Proportionate mortality

16. For providing quality health services, community participation plays an essential role. To ensure maximum community participation, which level of health care system should be strengthened?

- a. Higher level referral facility
- b. Primary health care
- c. Second level referral facility
- d. Secondary health care
- e. Tertiary health care

17. To suit the rural situation in Pakistan the lady health visitor introduced a homemade fluid for oral rehydration What does this represent?

- a. Appropriate technology
- b. Community participation
- c. Equality
- d. Equity
- e. Suitability

18. Being assigned responsibility for something that you have done or something you are supposed to do?

- a. Responsibility
- b. Morality
- c. Punctuality
- d. Accountability
- e. Respectfulness

KGMC 2023

1. Authority responsible for overseeing the health care system of Pakistan:

- a. Ministry of health b. WHO
c. PMDC d. Pakistan medical association

2: How many inpatient beds does a rural health center have depending on size of catchment population

- a- 20 to 30 B- 10 to 20
c- 30 to 40 D- 40 to 50
e. No inpatient beds

3. The major challenge faced by health care system in rural areas of Pakistan is

- a. High cost of health services
b. Insufficient medical facilities
d. Lack of government support
e. Resistant cultural system

4. Which initiative aims to improve maternal and child health in Pakistan?

- a. Benazir income support program
b. National growth program
c. Mother child nutrition program
d. Lady health workers program
e. Sehat saholat program

5. Which of the Organization provides technical support to the Pakistan health sector :

- a. By providing free health care service to all citizens
b. By improving price controls on medical treatments
c. By initiating income generating activities
d. By relying solely on foreign aid
e. Thru the sehat saholat programme and other such health insurance schemes

6: Which organisation provide technical assistance to health sector of Pakistan

- a. WHO B. Pmdc
c. Pakistan medical association
d. Pakistan health ministry
e. World health ministry

7. How does the government address the health care affordability issues in Pakistan.

- d. Pentose phosphate pathway
e. Porphyrin metabolism

8. How does the government address the issue of healthcare inequality in Pakistan.

- a. By implementing targeted health programs for marginalized community.
b. By relying solely on foreign aid for funding.
c. By providing free health care services to citizen of Pakistan.
d. By providing free healthcare to women and children.
e. Through Benazir income support program.

9. How does Pakistan address its healthcare financing?

- a. Charging high fee
b. Implementing public private partnership services
c. National health care insurance.
d. Only through foreign funding

10. What is primary goal of social accountability?

- a. Profit maximization
b. Environmental sustainability
c. Stakeholder engagement
d. Cost reduction
e. Market dominance

11. Which component of communication channel is known as mechanism of assessing what has happened after communication has occurred in health education?

- a. Source b. Message c. Receiver
d. Channel e. Effort and feedback

12. What is the person or a group for whom the communication is intended in evaluating a health education programme known as :

- a. Source b. Message
c. Channel d. Receiver
e. Facilitator

NWSM 2023

1. The International Labour Organisation (ILO) is a United Nations Agency which sets international labour standards, develops policies and devises programs promoting decent work for all labourers, social protection and work opportunities for all.

Choose the most appropriate option regarding ILO:

- a. It was founded in 1950
- b. Its headquarter is in Washington, USA
- c. This is the only tripartite agency of UN**
- d. Only developed nations can become its members
- e. It provides compensation to labourers in case of accidents at work

Q2. Choose the most appropriate option that represents first and second steps of Planning cycle: Establishment of objectives, goals (fixing priority)

- a. Analysis of health situation.
- b. Analysis of health situation. Establishment of goals**
- c. Analysis of health situation. Programming and Implementation
- d. Planning cycle is used for proper implementation & evaluation of any health program
- e. Assessment of Resources. Evaluation

3. On the community level among the following health determinants of the population is directly related to the structure of the medical care system?

- a. Biological and genetic determinants
- b. Social determinants
- c. Access to health services**
- d. Behavioral determinants
- e. Economic determinants

4. An internee in parasitology rotation is giving a lecture on vectors that they are organisms which transfer infectious agent from infectious animal to human beings. The vectors are usually

- a. Arthropods**
- b. Invertebrates
- c. Parrots
- d. Snails
- e. Vertebrates

5. A medical researcher working on parasitology is giving a lecture on sexual and asexual cycles of parasites. The asexual cycle of the parasite occurs in which host?

- a. Accidental host
- b. Definitive host
- c. Intermediate host**
- d. optional host
- e. Rare host

6. In a densely populated urban area, a significant number of children suffer from malnutrition and stunted growth due to lack of access to nutritious food. This situation is indicative of an inadequate achievement of which SDG target?

- a. End preventable deaths of newborns and children under 5**
- b. Reduce non-communicable diseases and promote mental health
- c. Achieve universal health coverage, including financial risk protection
- d. Strengthen implementation of the Framework Convention on Tobacco Control
- e. End the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases

7. People of an urban slum wanted to have a specialist doctor, proper roads, restaurant, safe water supply and proper sanitation. The health department recommended provision of safe water & sanitation system to be provided first. The other community demands were deferred for the time being because of lack of funds. This action of Health department is known as:

- a. Decision making
- b. Judicial management
- c. Prioritization of goals**
- d. Management of objectives
- e. Systematic Management

8. Reduced number of components/functions of PHC have been recommended for developing countries because several developing countries are finding it difficult to implement all the components of primary health care. This recommendation is known as "GOBI FFF". The international health organization that has recommended GOBI FFF initiative is known as:

- a. World Health Organisation (WHO)
- b. Food & Agriculture Organisation (FAO)
- c. United Nations Children's Fund (UNICEF)
- d. International Labour Organisation (ILO)
- e. United Nation Educational, Scientific & Cultural Organisation (UNESCO)

9. A local government in a low-income country wants to reduce the burden of dysentery in their community. What is the most cost-effective strategy for achieving this goal?

- a. Implementing a mass vaccination campaign for all residents
- b. Building a state-of-the-art hospital for dysentery treatment
- c. Promoting handwashing and proper sanitation practices
- d. Distributing free over-the-counter medications to the population
- e. Focusing on genetic modification of the local population's immune system

10. When dealing with organizational aspects in a healthcare organization, the healthcare administrator's role is crucial. The administrator is expected to manage various stakeholders, uphold ethical standards, and promote efficient operations. Which of the following actions should the administrator prioritize?

- a. Avoid any interactions with the general public.
- b. Prioritize personal interests over patient care.
- c. Collaborate with government officials to cut costs.
- d. Ensure transparency and accountability in all actions.

e. Make decisions without considering patient feedback.

11. Various factors are included in the context of health planning & management. These comprise Human & financial resources, skills and time. These factors can be appropriately classified as:

- a. Goals
- b. Targets
- c. Resources
- d. Objectives
- e. Input variables

12. Which is the most appropriate choice below which reflects the mandate (functions) of an international agency called The United Nations Development Fund (UNDP):

- a. Works to implement Primary health care
- b. Works for health and welfare of mother & child,
- c. Plays an important role in protection of archeological heritage of the world.
- d. Works to eradicate poverty and reduce inequities through sustainable development model
- e. Works for environmental protection by promoting forestation, recycling and regulations to reduce environmental pollution

13. In a specific middle-income country, efforts to combat HIV/AIDS and other diseases as part of the MDGs faced challenges. Stigma, limited access to healthcare, and lack of awareness hindered progress. What was a significant factor contributing to the inability to meet this MDG target?

- a. Absence of community-based organizations
- b. Lack of education on disease transmission
- c. Inadequate funding for healthcare infrastructure
- d. Limited availability of antiretroviral medications
- e. Stigmatization of affected individuals and reluctance to seek treatment

14. In a rural area of Pakistan, a high number of women are still experiencing complications during childbirth and inadequate access to skilled health care professionals. This situation highlights

challenges in achieving which SDG target in Pakistan?

- Reduce maternal mortality
- End preventable deaths of newborns and children under 5
- Reduce non-communicable diseases and promote mental health
- Achieve universal health coverage, including financial risk protection
- Ensure universal access to sexual and reproductive health care services

KMC 2023

1: A 40 years old Chinese man with cirrhosis due to hepatitis C is worried about the risk of hepatocellular cancer (HCC) after reading a newspaper report. He seeks an earlier outpatient appointment to discuss irritable bowel syndrome (IBS).

- 0.1 % per year
- 1% per year
- 3-5% per year
- 7-9% per year
- > 10% per year

2: A lady is concerned that she might get hepatitis B from her husband as her husband is recently been diagnosed as acute hepatitis B. What is the best option for preventing her from hepatitis B infection?

- Acute immunization against hepatitis B
- Intravenous immunoglobulins against hepatitis B
- Prophylactic adefovir
- Avoidance of sexual contact
- Use of condoms

3: The hospital is an integral part of a social and medical organization. Which of the following key function is also performed by hospital along with preventive, promotive and curative services?

- Charity services
- Lobbying
- Media projection
- Revenue generation
- Research

4: A health care system is an organization of people, institutions and resources that delivers care services to meet the health needs of target populations.

Which of the following is the key pillar of health systems building blocks as chalked out by WHO?

- Health care delivery system
- Media projection
- Nutritional counseling
- Rehabilitation
- Social research

5: Reduction in morbidity and mortality rates is used as an indicator to assess the extent of any public health problem. What type of indicator is this?

- Outcome
- Impact
- Strategic
- Process
- Input

6: HMIS serves to provide information to health workers for improving health service delivery. What is the basic information provided by HMIS?

- Staff workload in relation to facility establishment
- Quality of health service provision
- The number of medical conditions seen by health facilities
- Utilization of drugs and their proper use
- Lack of interest

7: Decentralization is one of the principles in health management information system(HMIS) . What does this imply?

- Stake holders should have access to patient records
- The administration and management shifted to provincial level
- Data collection tools should be developed by community members
- Data entry should be done at district level
- Data output should be developed at provincial level

8: The 3rd health policy of Pakistan aimed to reform the country health sector by preventing diseases and promoting health according to the health for all principles of Aima Ata Declaration. When was the Pakistan's third and so far , the last national health policy launched?

- a. In 1981
- b. In 1991
- c. In 2001
- d. In 2011
- e. In 2021

9: In September 2015, the development agenda termed as "2030 agenda for sustainable development goals" was adopted by UN general assembly. In the new development agenda termed as SDGs, how many goals were set?

- a. 10 goals
- b. 17 goals
- c. 25 goals
- d. 30 goals
- e. 37 goals

10: The millennium developmental goal no: 4 was to reduce child mortality. What was the target set for developing countries including Pakistan to reduce under 5 child mortality by 2015?

- a. To reduce MMR 10/100 live births
- b. To reduce MMR 20/1000 live births
- c. To reduce MMR 30/1000 live births
- d. To reduce MMR 42/1000 live births
- e. To reduce MMR 52/1000 live births

11: In MDGs , 8 goals , 20 targets and 60 indicators were set to be achieved during 2000 to 2015 . Pakistan failed to achieve it's targets including targets set to improve maternal health and reduce child mortality. What was the target set for Pakistan to reduce under maternal mortality ratio (MMR) by 2015?

- a. To reduce MMR by 50/100,000/live births
- b. To reduce MMR by 100/100,000 live births
- c. To reduce MMR by 140/100,000/ live births
- d. To reduce MMR by 200/100,000/ live births
- e. To reduce MMR by 300/1000 live births

12: In millennium development goals 8 priority areas were focused including mental health, child health and infectious diseases. What was the time line set for MSGs to achieve it's targets?

- a. From 1990 to 2000
- b. From 1990 to 2005
- c. From 2000 to 2010
- d. From 2000 to 2015
- e. From 2010 to 2020

13: The millennium declaration was adopted by the UN general assembly in September 2000 when the UN members states and the development partners set Millennium development goals. How many goals were set in millennium development goals?

- a. 5 goals
- b. 6 goals
- c. 7 goals
- d. 8 goals
- e. 9 goals

7.MICROBIOLOGY

PAPER WMC

1. 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 shows abscess. Most likely cause of this liver Abscess is;

- a. E coli
- b. Klebsiella sp
- c. Entamoebahistolytica
- d. Acute hepatitis
- e. Echinococcus granulosus cyst

2. Biopsy of primary liver tumor reveals adenocarcinoma. Which of the following parasite is caused of this?

- a. Ascaris lumbricoides
- b. Opisthorchissinensis
- c. Giardia lamblia
- d. Entamoeba histolytica
- e. Echinococcus granulosus

3. Which of the following protozoa parasites can be spead to humans by biting a sandfly?

- a. Entamoeba histolytica
- b. Plasmodium falciparum
- c. Trichomonas vaginalis
- d. Leishmania donovani
- e. Clostridium

4. Which of the following pathogens is a common cause of bacterial enteric infections.

- a. Influenza virus
- b. Rotavirus
- c. Candida albicans
- d. Salmonella enterica
- e. Giardia lamblia

5. Which one is the most common organism to cause diarrhea

- a. Entamoeba histolytica
- b. Shigella
- c. Salmonella
- d. Rotavirus
- e. E. coli

6. Which one is the most commonest organism of acute diarrhea.

- a. Entamoeba histolytica
- b. Shigella
- c. Salmonella
- d. Rotavirus
- e. E. coli

GMC 2023

1. A mother brings her four year old child to a doctor with a complaint of intense perianal itching. Despite being fed properly, he has not gained weight for the last few months. The likely condition is

- a. Ancylostomiasis
- b. Ascariasis
- c. Enterobiasis
- d. Filariasis
- e. Scabies

2. All of the following involved in the life cycle of Echinococcus granulosus except

- a. Dog
- b. Sheep
- c. Camel
- d. Man
- e. Cat

3. A female Ascaris can be identified on which basis?

- a. Curved posterior end.
- b. Common cloacal aperture.
- c. Presence of post anal papillar.
- d. Straight posterior end
- e. Two spicules found at the posterior end

4. Which of the following protozoal infection in endemic region is responsible for Liver abscess formation?

- a. Amebiasis
- b. Histoplasmosis
- c. Mycobacterial infection
- d. Salmonella typhi

e. Staphylococcus aureus

5. Diphylllobothriasis is caused by eating

- a. Raw fish
- b. Raw fruits
- c. Raw meat
- d. Raw milk
- e. Raw vegetables.

6. Enterobius vermicularis is commonly known as?

- a. Flatworm
- b. Fish worm
- c. Hook worm
- d. Pinworm
- e. Tapeworm

7. Which of these is a symptom of pinworm infection?

- a. Nausea
- b. Paranoia
- c. Intense itching
- d. Diarrhea
- e. Abdominal pain

8. Which type of pneumonia is caused by Ascaris lumbricoides?

- a. Bacterial pneumonia
- b. Fungal pneumonia
- c. Loeffler's pneumonia
- d. Mycoplasma pneumonia
- e. Viral pneumonia

9. Which of the following is NOT a common bacterial cause of enterocolitis?

- a. Salmonella
- b. Shigella
- c. Escherichia coli
- d. Vibrio cholerae
- e. Staphylococcus aureus

KGMC 2023

1. The following factors associated with virulence of H.pylori chronic infection except

- a. Mucous
- b. Flagella
- c. Urease
- d. Toxins
- e. Adhesions

2. Mees line of hyperkeratosis are a feature of

- a. Chronic arsenic poisoning
- b. Chronic lead poisoning
- c. Chronic mercury poisoning
- d. Chronic phosphorous poisoning
- e. Chronic copper poisoning

3. Basillary dysentery causative agent,

- a. Campylobacter
- b. E.coli
- c. Rota virus
- d. Salmonella
- e. Shigella

4. Enterobiasis is human parasitic infestation which is caused by which of the following.

- a. Enterobiasis hookworms
- b. Pinworms.
- c. Filarial .
- d. Platyhelminthes.
- e. Round worm

5. Ascariasis is a human parasitic contagious infestation. The route of transmission of the infestation is ?

- a. Ingesting infective eggs.
- b. Ingesting larva
- c. Thru blood transfusion
- d. Thru sand-fly bite
- e. Thru skin

6. A 24 year old man attended his friend wedding 2 days back and developed fever from one day and loose motions with blood and mucus which is the most likely diagnosis

- a. E coli dysentery
- b. Ameobic dysentery
- c. Shigella dysentery
- d. Giardia enterocolitis
- e. Rota virus enteritis

NWSM 2023

1. A male patient comes to A &E who is HIV positive . He is complaining of loss of appetite ,anorexia, and flatulence. The doctor is suspecting worm infestation. He orders a full blood count done , what is going to be low in full blood count

- a . Ferritin
- b . Heamoglobin
- c . Neutrophils
- d . Platelets
- e . While blood cells

Q 2. A patient has Entamoeba histolytica infestation he undergoes a pelvic ultrasound which shape ulcer in the muscularis layer of the intestine will be ?

- a . Funnel
- b . Flask
- c . Rectangular
- d . Square
- e . Triangular

Q 3. A doctor is specializing in parasitology he is giving leacture and he is saying that unicellular organisms are called protozoa . What are multicellular parasites called?

- a . Amoeba
- b . Metazoa
- c . Sporozoa
- d . Scistosoma
- e . Sarcodina

Q4. A parasitologist is teaching 4rth year mbbs students about Cestodes they are hermaphrodites and have gravid uterus segment at the far end . What does gravid uterus segment contains?

- a . Eggs
- b . Merazoites
- c . Sperms
- d . Trophozoites
- e . Zoits

5. A 24 years old hiker presents respiratory system , including coughing , chest pain and dyspena. Imagining shows a well defined cystic lension in the lung . Serogical tests reveals positive antibodies against Echinococcus. What is the most likely diagnosis

- a . Lung cancer
- b . Lung abscess
- c . Tuberculosis
- d . Pulmonary embolism
- e . Pulmonary hydatid cyst

6. A lab technician is explaining Nernatodes to his lab fellows, He is saying that a certain nematode is found both in soil and human beings. Which nematode is this?

- a. Ascaris
- b. Entrobilus
- c. Necator
- d. Strongyloides
- e. Trichuris

7. A male patient comes to A&E who is HIV positive. He is complaining of loss of appetite, anorexia and flatulence. The doctor is suspecting worm infestation. He orders a full blood count to be done, what is going to be low in full blood count?

- a. Ferritin
- b. Hemoglobin
- c. Neutrophils
- d. Platelets
- e. White blood cells

8. A 40 year old female comes to the doctor complaining of anorexia, weight loss and pain in upper right quadrant. On abdominal ultrasound there is a lesion in the liver which looks like an abscess. Which microorganism might be involved in causing liver abscess?

- a. Entamoeba Histolytica b. Giardia lamblia
c. Listeria monocytogenes d. S. aureus
e. S. mutans

9. A physician orders a stool examination for worm infestation, pathologist is looking for trophozoites and cysts. Cysts are passed intermittently, how many stool specimens should be collected?

- a. One b. Two c. Three
d. Four e. Five

10. The life cycle of a parasite begins with filariform larvae entering the feet of human beings and then migrating to lungs. Which parasite is this?

- a. Ameba b. Protozoa c. Sarcodina
d. Sporozoa e. Strongyloides

11. A 42-year-old veterinarian complains of weakness, fatigue, and anemia. Laboratory tests show elevated eosinophil count and liver function abnormalities. Imaging reveals multiple cystic lesions in the liver. Which parasite is associated with this condition?

- a. Taenia solium
b. Fasciola hepatica
c. Trichinella spiralis
d. Toxoplasma gondii
e. Echinococcus granulosus

12. A microbiologist is teaching medical students about sexual and asexual cycles of parasites. The individual in which the sexual cycle of the parasite occurs is called as?

- a. Accidental Host b. Definitive Host
c. Intermediate Host d. Occasional Host
e. Temporary Host

13. A pathologist under ultrasound guidance captures eggs of Schistosoma hematobium in the wall of urinary bladder of the patient who has hematuria as the presenting complaint. Which carcinoma is related to infestation with Schistosoma hematobium?

- a. Gall bladder b. Liver c. Renal
d. Spleen e. Urinary bladder

14. A pathologist is lecturing house officers about parasitic infestations. He tells them that definitive host of trematodes is human beings, which animal living in fresh water is the intermediate host?

- a. Ants b. Flies c. Fish
d. Snails e. Ticks

15. A doctor asked the laboratory to do stool examination, the pathologist reported tapeworm tapeworm is the most common in the world? infestation in the sample. Which

- a. Diphylobothrium latum
b. Entamoeba histolytica
c. Hymenolepis nana
d. Schistosoma hematobium
e. Strongyloides stercoralis

16. Human parasites include various protozoa and worms. Which one of the following parasites is a common cause of diarrhoea in humans and some animals?

- a. Giardia lamblia
b. Leishmania donovani
c. Pneumocystis jirovecii
d. Toxocara cati
e. Toxoplasma gondii

17. 5 years old Atif is seen in emergency department with history of loose stools and vomiting for the last 3 days. His stool is watery and foul smelling but there is no blood in it. On examination he is mildly dehydrated but is otherwise normal. What is the most likely organism for causing these symptoms?

- a. Compylobacter b. E.Coli
c. Giardia Lambia d. RotaVirus
e. Shigella

18. A 10 year old patient comes to the physician. The doctor suspects worm infestation and orders a stool examination. The eggs in the stool are oval and have a lid like opening or operculum at one end. Which cestode has this egg?

- a. Ascaris lumbricoides
- b. Diphylobothrium latum
- c. Entameba histolytica
- d. Hymenolepis nana
- e. Strongyloides stercoralis

19. A 24-year-old hiker presents with respiratory symptoms, including coughing, chest pain, and dyspnea. Imaging shows a well-defined cystic lesion in the lung. Serological tests reveal positive antibodies against Echinococcus. What is the most likely diagnosis?

- a. Lung cancer
- b. Lung Abscess
- c. Tuberculosis
- d. Pulmonary embolism
- e. Pulmonary hydatid cyst

20. A parasitologist is teaching 4 year MBBS students about Cestodes that they are hermaphrodites and have a gravid uterus segment at the far end. What does the gravid uterine segment contains?

- a. Eggs
- b. Merozoites
- c. Sperms
- d. Trophozoites
- e. Zoits

21. A doctor is specializing in parasitology, he is giving a lecture, and is saying that unicellular microorganisms are called protozoa. What are multicellular parasites are called?

- a. Amoeba
- b. Metazoa
- c. Sporozoa
- d. Scistosoma
- e. Sarcodina

22. A patient has Entamoeba histolytica infestation, he undergoes an abdomino pelvic ultrasound, which shape ulcers in the muscularis layer of intestine will be there?

- a. Funnel
- b. Flask
- c. Rectangular
- d. Square
- e. Triangula

KMC 2023

1: A 20 year old nomad presents with right upper abdominal discomfort for the last one year .

Examination reveals non tender enlarged liver .

Ultrasonography reveals a multi loculated cyst with floating membrane inside. The diagnosis in this case would be

- a. Hydatid liver disease
- b. Hemangioma of liver
- c. Amoebic liver Abscess
- d. Pyogenic liver Abscess
- e. Polycystic liver disease

2: A 14 years old patient was brought from a local village with bloody diarrhea. It was found that many other people from the same vicinity had the same symptoms. On microscopic examination of stool , four nucleated cysts were found. What is the most probable diagnosis?

- a. Acute gastroenteritis
- b. Amoebic dysentery
- c. Bacillary dysentery
- d. Cholera
- e. Giardiasis

3: A 51 years old patient was brought to OPD with complaints of abdominal pain and diarrhea for one day. On examination, the patient was anemic and had tenderness in abdomen. stool examination by routine microscopy revealed segmented eggs and eggs with actively motile rhabditiform larvae within the egg shell membrane. What is the most probable cause?

- a. Ancylostoma duodenale
- b. Ascaris lumbricoides
- c. Hymenolepis nana
- d. Taeniasis
- e. Trichuris trichiura

4: A young male working in agricultural lands developed itching lesions on feet. He also develops cough and slight hemoptysis. Stool examination shows RBCs . What can be the possible cause in this case?

- a. Ascariasis
- b. Allergic cough
- c. Ankylostomiasis
- d. Enterobiasis
- e. Pneumonia

5: A 7 years old male child complaints of pruritus on buttocks. The itching is in night time. It was noted that many children in the school had similar complaints. What is the most useful diagnostic test in this case?

- a. Blood complete picture
- b. Scotch tape test**
- c. Stool for ova detection
- d. Stool for occult blood
- e. String test

6: A 30 years old man with a history of travel in forest area has chronic abdominal discomfort and diarrhea. Stool examination reveal motile pear shaped organisms. What is the most probable diagnosis?

- a. Amebiasis
- b. Bacterial dysentery
- c. Cholera
- d. Giardiasis**
- e. Irritable bowel syndrome

7: A young woman with a history of chronic dysentery complaints of pain right hypochondrium . Which of the following protozoa spreads extra-intestinal through blood in this case?

- a. Entamoeba coli
- b. Entamoeba dispar
- c. Entamoeba histolytica**
- d. Giardia lamblia
- e. Isopora beli

8: Life cycle of Diphylobothrium latum involves two intermediate hosts including copepods and fish with human as a definitive host . Which of the following infective stage of the parasite is responsible for initiating infection in the human host?

- a. Coracidia
- b. Cysticercosis
- c. Plerocercoid larvae**
- d. Proceroid larvae
- e. Miracidium

9: A 45 year old fisherman presented with abdominal pain and chronic diarrhea. His peripheral blood smear revealed megaloblastic anemia and stool R/E revealed characteristic oval shaped eggs

with a lid like operculum at one end . What is the most likely parasite responsible for this condition?

- a. Diphylobothrium latum**
- b. Echinococcus granulosus
- c. Echinococcus multilocularis
- d. Hymenolepis nana
- e. Taenia saginata

8. PEADS

1. Esophageal atresia can occur as a part of VACTER group of anomalies . what does TE stands for .

- a. Thoracic empyema
- b. Trachea- esophageal fistula**
- c. Tetralogy of Fallot
- d. Talipes eqvinoaus
- e. Therapeutic Equivalence

2. 8 month old baby reported by his mother to have several episodes of colic pain and bloody stool. No abdominal finding except slight tender and anemia. Diagnose

- a. Intestinal atresia
- b. Intestinal adhesion
- c. Meckel diverticulum**
- d. Hirschsprung disease
- e. Pyloric stenosis

3. 3 yr old boy with chest pain and dysphagia presents with salivation and sweating. Mother said he had ingested cleansing liquid. abdominal examination is normal and mild anemia is there. Whats the diagnosis?

- a. Barret esophagitis
- b. Reflux esophagitis
- c. Chemical esophagitis**
- d. Esonophilic esophagitis
- e. Hyaline sclerosis

4. A 3 days old neonate born after 32weeks of gestation have yellow skin , physical examination is unremarkable . What is increased in neonatal serum.

- a. Unconjugated bilirubin**
- b. Alt
- c. Conjugated bilirubin
- d. Galactosyltransaminase

9. LIVER PATHOLOGY

1. A 60 kg oldman ,presented to opd with a hx of taking 2 packs cigarettes,5 cups of coffee and 6 cups of beer ,on examination he has tender addomin wd a palpable liver feeling 2cm below lower margin of costal cartilage,on biopsy he has macrovescicular steatohepatitis ,if he restrain himself ,what would be the result

- a. Progress to cirrhosis
- b. Progress to acute hepatitis
- c. To HCC
- d. Remain unchanged
- e. Revert to normal

2. A 54 year old woman presented with a long history of chronic hepatitis B infection, upper GI bleed.

Firm nodular liver on physical examination. Lab findings are Albumin =2.5g/dl.3.5-5.5g/dl..what additional findings most likely to be present

- a. Caput medusae
- b. Diminished deep tendon reflex
- c. Papilledema
- d. Splinter haemorrhages
- e. Distended jugular vein

3. A study of hepatic injury is undertaken. Patient with fulminant hepatic failure on biopsies are found to have microscopic evidence of ballooning hepatocyte degeneration, bridging necrosis and minimal inflammation. Which is most likely to cause this pattern of hepatic damage?

- a. Alpha-1 antitrypsin deficinecy
- b. Ingestion of large doses of acetaminophen
- c. Chronic alcohol abuse
- d. Hep. C viruse infection
- e. Wilson's disease

4. A prev healthy 38 yr woman has become lthargic and sleepy since past r days. On phy Examination she has jaundice and asterixis. She is afebrile wirh Bp 110/55. Labs show serum ALT 1854 U/L AST 1621 U/L . 20-45 U/L. serum Ammonia levels were raised. HbsAg positive. Dagnosis?

- a. Acute fumulant failure
- b. Liver cirrhosis
- c. Portal HT
- d. Subacute fumulitant failure
- e. Hepatic encephalopathy

5. 40 year old female came to opd with complain of abdominal pain fatigue malais with history of rehumatic arthritis and hepatitis A vaccination. Her ALT level 150 and billirubin level 5.1 and positive ANA .What is diagnosis?

- a. Fulminant hepatic failure
- b. Cirrhosis...
- c. Hepatitis A
- d. Hepatitis
- e. Autoimmune hepatitis

6. Usualy how many weeks after hepatitis C infection anti hepatitis C by Eliza become positive

- a. 1-4
- b. 4-8
- c. 8-12
- d. 12-16
- e. Greater than 16 weeks

7. Ground Glass hepatocyte is morphological characteristics of:

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

8. A 15 yrs old complains of 2 months history of abdominal pain , fever ,yellow eyes and skin physical examination showed tremors of hands , uncoordinated movements and mild jaundice. Ophthalmic examination showed kayser fleisher rings . Which of the following is likely an inborn error of metabolism:

- a. Copper
- b. Iron
- c. Lead
- d. Magnesium
- e. Mercury

9. Transmitted by feco-oral route and causes severe illness in pregnancy

- a. Hep A
- b. Hep B
- c. Hep C
- d. Hep D
- e. Hep E

10. The virus having the highest mortality worldwide

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