

KGMC Preproff  
paper I

1.

A patient with restlessness, anxiety and a sense of suffocating. Cough was prominent and produced pink, tinged, frothy sputum. Pulse was thready and fast 120 bpm. Bp was 90/45 mmhg. And rales were audible at the lung bases. Which of the following drugs was most likely induced in the immediate medical treatment of the patient.

A. Hydrochlorothiazide.

B. Amiloride.

C. mannitol.

D. Epinephrine.

2:

A 59 year old man recently diagnosed with exertional angina started treatment with Verapamil OD. Which of the following cardiac  $SMCa+2$  channel is most likely to be main site of action of the drug.

A. Ligand gated channels in cell membrane.

B. Store store operated channels in mitochondria.

C. Voltage gated channels in cell membrane.

D. Ligand gated channels in sarcoplasmic reticulum.

Prevent entry of Calcium into cell by blocking L-type calcium channel

3:

A 68 year old man recently diagnosed with stage C heart failure started a treatment with metoprolol, Losartan, Furosemide and Digoxin. Which of the following molecular actions most likely mediated the positive inotropic action of Digoxin?

A. Closing of calcium channels in cardiac cell membrane.

B. Increase release of calcium from the Sarcoplasmic reticulum store during systole.

C. Activation of Na/K-ATPase.

D. Activation of Ca-Na exchanger in cardiac cell membrane.

E. Opening of K channel in cardiac cell membrane.

4.

A 68 year old man was diagnosed with systolic heart failure with mild reduced ejection fraction and Normal sinus rhythm at rest. A treatment with Captopril was started. Which of the following actions most likely mediated the therapeutic effect of Captopril in the patient.

A. Increase cardiac Contractility.

B. Reduction of Angiotensin mediated vasoconstriction in kidneys.

C. Reduction of preload and afterload.

D. Stimulation of bradykinin metabolism.

5.

A 50 year old woman diagnosed recently with systolic heart failure started a treatment with metoprolol and Captopril. Which of the following is likely to occur?

A. Hypercalcemia

B. Hyperkalemia

C. Hypervolemia



D. Hypokalemia

E. E. Hybernatemia.

6.

A 35 year old woman in her 29th week of gestation was having a positive direct coomb's test during a routine prenatal visit. Two months later she became pregnant, she was diagnosed with stage 1 hypertension and started antihypertensive therapy. The drug she most likely used was?

A. Captopril.

B. Propranolol .

C. Nifedipine.

D. Prosazin.

E. Methyldopa

7.

A 47 year old man was with a Hx of HTN had been taking Hydrochlorothiazide for 1 month but his Bp was not controlled despite adherence to medicine, and nonpharmacologic measures. The pt was also trying to quit smoking without success. The physician decided to add a 2nd drug ti the therapeutic regimen that could help the pt as an adjustment to smoking cessation program. Which of the following drug was prescribed?

A. Minoxdil

B. Propranolol

C. Nifedipine

D. Clonidine

E. E. Hydralazine

8.

A 60 year old man reported to his Dr that for past 2 days he felt dizzy and faint when he stood up rapidly. The man had Hx of essential HTN that was poorly controlled with Losartan and hydrochlorothiazide. One week earlier he was diagnosed with prostate hyperplasia and the physician added a new drug to the therapy. Which of the following most likely caused this adverse effect

A. Proponolol

B. Minoxidil

C. Hydralazine

D. Prazosine

E. Medthyl dopa

9.

A 57 year old obese woman had LDL Of 350mg/dl. Normal<130mg/dl. Despite 3 months of therapy with Lovastatin. The Dr adds drug that increase elimination of bile acids. What is the drug.

A. Cholestyramine

B gemfibrozil

C atorvastatin

D niacin

E ezetimibe

10- A 60 year old patient come to emergency dept with acute heart failure and pulmonary edema, BP was 110/70. Which diuretic help him the most.

A Furosemide

B Thiazides

C Indapamide



D Spironolactone  
E mannitol

11- A 60 year old lady with BP 160/100 non diabetic, needs which diuretic first line treatment.

- A) furosemide
- B) thiazides**
- C) spironolactone

12- a 16 year old boy had cough, dyspnea and wheezy chest after he came from the riding stable. His symptoms after sometimes slightly worsened and was taken to emergency .

Recommend best drugs

- A. Inhaled fluticasone
- B. Inhaled albuterol**
- C. IV propranolol
- D. Oral theophylline
- E. Oral montelukast

13-A pt with cardiac disease complaints of asthma attack on and off. which drugs to be used in such pt for alleviation of asthma:

Theophylline

Ipratropium

Salmeterol

**Corticosteroids**

Albuterol

14-Which drug is used for activation of histone deacetylase(HDAC), to reverse resistance offered to anti inflammatory action of corticosteroids.

- A. **theophylline**
- B. zafirlukast
- C. salmeterol
- D. Albuterol.

15-Cromolyn is used in asthma b/c

- A. COX2 inhibitor
- B. Block adenosine receptor in bronchial smooth muscle
- C. **inhibit degranulation of mast cell**
- D. block mRNA for IL-2

16 .A 60 year old patient came to emergency dept with acute congestive heart failure and pulmonary edema , bp is 110 /70 .. which diuretics is preferred..

**Furosemide**

thiazide,

indapamide,

spironolactone,

mannitol...

17... 40 year male with mitral valve stenosis , need root canal treatment left premolar , antibiotics given prophylactically and patient is penicillin allergic ...

Drug use for prophylaxis...

- A. Meropenam.



- B. amoxicillin
- C. penicillin
- D. cefaxime
- E. clarithromycin...

18. Baby hearing loss, during 2nd trimester infected with urinary infection injectable antibiotics for teratogenic effect is given..

- A. ampicillin
- B. ticarcillin
- C. piperacillin.
- D. gentamycin
- E. cefixime...

19. Pseudomembranous colitis is side effect associated with

- a. Incomplete use of narrow spectrum
- b. complete use of narrow spectrum
- c. drug combination
- d. prolonged and frequent use of broad spectrum antibiotic
- e. use of broad spectrum when needed only

Not everyone taking broad spec antibiotics encounter Pseudomembranous colitis!

20) streptogramins are combination of

- A) quinupristin and dalbavipristin

26) a 25-years-old man working in roofing industry presented to his physician with complaint of dyspnoea and chronic dry cough. Chest X-ray revealed pulmonary hyperinflation with "honey comb" appearance and calcified parietal pleural plaques. What is the most likely diagnosis?

- A) anthracosis
- B) asbestosis
- C) byssinosis
- D) farmer's lung

E) E) silicosis

27) a pottery industry worker developed symptoms of tuberculosis. The likely condition which developed in tuberculosis was,

- A) anthracosis
- B) asbestosis
- C) byssinosis
- D) byssinosis

E) E) silicosis

28) a farmer was harvesting wheat in month of June when suddenly began to wheeze and felt difficulty in breathing. The farmer had never experienced this episode before. What is the most likely cause of this wheeze,

- A) allergic asthma
- B) bronchial asthma
- C) chronic sinusitis
- D) emotional stress
- E) nocturnal asthma



29) asthma is a long term medical condition that cause breathing difficulties , the characteristic feature of persistent asthma is,

- A) airway inflammation
- B) family history
- C) exercise induced
- D) lifestyle factors
- E) urbanization

30) an undergraduate college's administration was interested in knowing how many students were day scholars and how many were hostelites. They gathered the data. How should they summarise and display the data.

- A) area chart
- B) bar chart
- C) histogram
- D) line diagram
- E) scatter diagram

31) a student was writing an abstract for research paper for publication. Which of the following subheading is not included in an abstract.

- A) conclusion
- B) discussion
- C) introduction
- D) method
- E) result

32) 60 years old man with no other major clinical illness has an episode of M.I . Doctor advised him to change life style which should include daily exercise and change his diet. A reduction level of the which of the following serum laboratory test would best indicate success of his diet and exercise

- A) Ca
- B) cholesterol
- C) glucose
- D) potassium
- E) renin

33) an experiment studies early atheroma development, lipid streaks on arterial wall were examined microscopically and biochemically to determine their cellular and chemical constituents and factors promoting their formation. Early lesion show increased attachment of monocyte to endothelium . The monocytes migrate subendothelial and convert into macrophages , these macrophages transform into foam cells. Which of the following is.....

- A) c reactive protein
- B) homocysteine
- C) lipoprotein
- D) oxidized LDL
- E) VLDL

34) a study is conducted involving persons with LDL cholesterol level above 160 mg/dl. They are found to have increased LDL deposited in their arteries , as a consequence arterial lumen at branch point is decreased in size. Which is pathologic change that develops initially in these areas of arterial narrowing

- A) vasculitis
- B) intimal thickening
- C) lymphocytes infiltration
- D) platelet aggregation
- E) smooth muscle hypertrophy



35) atheromatous plaque secretes growth factor PDGF. Which of the following is responsible for release of factor

- A) fibroblasts
- B) lymphocyte
- C) macrophages**
- D) smooth muscle cells

41. A 15 year old boy have polyarthritis, fever, and cardiac murmur. Diagnosed with Rheumatic fever. Laboratory result most compatible with diagnosis?

- a. Blood culture positive for streptococcus pyogenes during this stage
- b. Throat culture positive for streptococcus pyogenes during this stage
- c. Gram stain of joint fluid show gram positive cocci in chain
- d. ASO assay positive**
- e. ESR normal

42. A 33 year old man smoked 2pack cigarettes per day since teenage. Painful thrombosis of superficial vein of lower leg for 1 month and episodes during which his fingers become blue and cold. Chronic poorly healing ulceration of feet. One toe become gangrenous and is amputated. Histologically at resection margin, acute and chronic vasculitis involving medium sized arteries with segmental involvement Diagnosis?

- a. Aortic dissection
- b. Buerger disease**
- c. Microscopic polyangiitis
- d. Syphilis
- e. Takayasu arteritis

43. A 55 year old woman, surgically treated in hospital for past 3 weeks. Examined on one morning round had swollen right leg,tender to palpitation posteriorly but not warm .This condition result from which Vascular complication?

- a.VT**
- b.septicemia
- c.septic emboli
- d.cellulitis
- e.infarction

44.A 10 year old has sore throat,no cough,tonsillar exudate ,temperature 38.3°C, fever from 3 weeks.Throat culture shows group A beta hemolytic streptococcus. On follow up child is afebrile,pulse 85/min,respiration 18/min,BP 95/50.On auscultation diastolic mitral murmur audible, diffuse rales over both lungs.Overnext 2 days several episodes of atrial fibrillation accompanied by acute left ventricular failure.which pathologic changes occurring in child's heart is cause of left ventricle failure? a.

- a. amyloidosis
- b. fibrinous pericarditis
- c.mitral valve fibrosis
- d.myocarditis**
- e.Tamponade

45. A 55 year old woman with increased prominence of unsightly dilated superficial veins of both lower legs for past 5 years. Physical examination shows 37°C temperature, pulse 70/ min,respiration 14/min,BP 125/85. No pain,swelling or tenderness of either leg. Diagnosis is varicose veins. What complication because of her condition?

- a.atrophy of lower leg muscles
- b.hypokalemia
- c.renal failure
- d.gangrenous necrosis of lower leg



**e. stasis dermatitis with ulceration**

46: Tetralogy of Fallot, patient examined before surgery to determine predictors that correlate with severity of disease. A subset of patients found to have severe congestive heart failure, poor tolerance and decrease arterial oxygen saturation level which presents a worse clinical presentation for these patients

**(a) degree of pulmonary stenosis**

- b) diameter of tricuspid valve
- c) presence of ASD
- d) thickness of left ventricle
- e) vsd

47: a 55 yr old woman with dilated superficial veins of both lower legs for past 5 yrs. physical examination shows 37°C temperature pulse 70/min respiratory rate 14/min bp 125/84 no pain, swelling or tenderness of either leg. diagnosis is varicose veins. what complication bc of her condition?

- A) atrophy of lower leg muscles
- b) hypokalemia
- c) renal failure
- d) gangrenous necrosis of lower leg

**e) stasis dermatitis with ulceration**

48: 45 yr old experience crushing chest pain after arriving at work one morning. next 4 hrs pain persists and radiate to left arm with sweating dyspnea but wait to complete his 8 hrs shift which elevated serum level detect diagnosis

- a) ALT
- b) AST
- c) CK MB**
- d) serum reactive protein

49: A clinical study is performed that includes a group of subjects whose systematic blood pressure are bw 145/95 & 164/105. They are found to have increased cardiac output and peripheral vascular resistance renal examination shows no abnormal finding and CT scan of abdomen shows no mass. normal level of serum creatinine and urea nitrogen. takes no medication. diagnosis of essential hypertension was made. which laboratory finding is present

**a) decreased urinary sodium excretion**

- b) elevated plasma renin
- c) hypokalemia
- d) increased urinary catecholamines
- e) lack of ACE

50: A Infant is noted to have cyanosis during 1st week of life, overriding aorta, vsd, right ventricle thickening and pulmonary stenosis which defect he has

- a) ASD
- b) VSD
- c) tetralogy of Fallot**
- d) pulmonary stenosis
- e) essential hypertension

51) A 50-year-old man has sudden onset of substernal chest pain that radiate to the neck. On physical examination he is afebrile but has tachycardia, hypertension and hyperventilation. No cardiac murmurs were heard on auscultation, emergency coronary angiography shows a thrombotic occlusion of left circumflex artery in area of 50-70% narrowing of proximal circumflex and anterior descending

artery . Which of the following complication of this disease is most likely to occur with hour of these events

**Opt: ventricular fibrillation**

52) 74-year-old woman on 30th postoperative day after hysterectomy of uterine carcinoma suddenly became dyspneic and diaphoretic with chest pain, palpitation and feeling of panic after being ambulatory . Which of the following postoperative pulmonary complication is most likely to develop

**Pulmonary embolism**

53) 32-year-old male has hemoptysis along with pleuritic chest pain. His temperature is 37.5° . He has lost 6kg in 5 months X- ray reveals bilateral and predominant upper lobe infiltration with cavitation and sputum. On light microscope examination shows epithelioid cells with necrotic debris , wbc count 6340/ $\mu$ l. Which of the following histologic finding is most likely to be present in his sputum.

**TB.. sputum staining with ZN stain or culture in LJ medium positive for Mycobacterium tb**

*The hemoptysis suggests that the granulomas have eroded enough parenchyma and involved a bronchus. A granulomatous reaction is typical for Mycobacterium tuberculosis.*

54) a 30 year old man progressively decrease the oxygen saturation . He is intubated and placed on ventilator. He dies 3 days later. An autopsy of distal lung shows pink hyaline membrane, thickened interstitial, many macrophages but few neutrophils . Which of the following pulmonary disease most likely complicated his cause

**ARDS**

Q56) 61 yrs old having cardiac arrest, cardiac pulmonary resuscitative measures low. Admitted to hospital. He is intubated. He has aspiration of gastric content and next 12 days develops non productive cough and fever 37.5C. Chest radiograph reveals 4cm diameter mass with air fluid level in right lung. A sputum gram stain reveals mix flora. What condition is he suffering from?

**A) lung abscess**

B)chronic bronchitis

C)bronchiectasis

D)atelectasis

E) squamous cell carcinoma

*A Lung abscesses can result from aspiration of oropharyngeal or nasopharyngeal contents, where bacterial organisms as part of normal flora can be picked up and transported to the lungs. The straighter bronchus to the right lung is more likely to conduct aspirated material. With septicemia, multiple abscesses are more likely to be present.*

Q57) 23 yrs old admitted to emergency dept. suffers from severe dyspnea, afebrile, absent breath sound over entire lung. Chest X-ray showing pulmonary atelectasis of entire lung.

What condition is he suffering from?

A) aspiration of foreign body

B) pulmonary embolism

C) squamous cell carcinoma

**D) penetrating chest trauma**

E) bronchiectasis

Q58) 49 yrs old woman has respiratory difficulty for past 7 years. She is a non smoker, is afebrile, and normotensive. Her lungs are hyper resonant. Chest radiograph shows flattening of diaphragm. She also suffers from alpha 1-anti trypsin deficiency. What's the condition?

A) sarcoidosis





- B) bronchiectasis
- C) intestinal fibrosis
- D) atelectasis
- E) panacinar emphysema

Q59) 79 yrs old man has very high dyspnoea without cough. He is afebrile. Breath sounds reduced in all lung fields. Chest CT scan shows dense bright, right pleural mass on left lung. Microscopic biopsy reveals spindle cuboidal cells invade adipose tissues. Which pollutant is responsible for this?

- A) asbestos
- B) bird dust
- C) silica
- D) cotton fibre
- E) coal dust

Q60) 40yrs old has very high fever, productive cough with yellow sputum. Diffuse rales in lung fields. Patchy infiltrate in all lung fields that is 4cm round are of consolidation in left upper lobe that has air fluid level. Neutrophils are also present.

- A) staphylococcus aureus
- B) aspergillus niger
- C) mycobacterium tuberculosis
- D) mycobacterium pneumonia
- E) adenovirus

*Pulmonary abscesses typically have an air-fluid level. More virulent bacterial organisms such as Staphylococcus aureus are likely to cause such a complication of a bronchopneumonia. Googled*

61) a 50-years old male tailor developed increased shortness of breath, fever, weight loss and night sweats for past 4 months. He was non smoker. On physical examination his temperature was 37.6°C. Fine rales are auscultated on all lung fields. A transbronchial biopsy is performed that microscopically shows numerous small pulmonary interstitial noncaseating granulomas. Which of the following is most likely diagnosis?

- A) histoplasmosis
- B) adenocarcinoma in situ
- C) sarcoidosis
- D) interstitial pneumonitis
- E) tuberculosis

62) A 44 years old woman, non-smoker has had a fever and cough for the past 4 days. She doesn't have hemoptysis. She has not experienced weight loss, malaise, nausea, vomiting. In physical examination her temperature is 37.6°C. There are decreased breath sound over the right upper lung. A chest radiograph reveals a 6 cm area of infiltrates in right upper lobe she is given a course of antibiotic therapy but her cough persists. A month later her x-ray now reveals a 3 cm peripheral mass in right upper lobe. Which one of the following neoplasms is most likely to be present in this woman?

- A) squamous cell carcinoma
- B) small cell anaplastic carcinoma
- C) adenocarcinoma
- D) mesothelioma
- E) carcinoid tumor

*Peripheral lung cancers (adenocarcinoma and large cell carcinoma) show less of an association with smoking than central cancers (small cell and squamous cell carcinoma).*

63) a 70-year-old woman is referred to an emergency with pain in upper right chest. A chest radiograph shows right upper lobe opacification and bony destruction of the right first rib. Microscopy of the biopsy

showed polygonal tumor cells arranged in nests and sheets with pleomorphic, hyperchromatic nuclei and moderate amount of eosinophilic cytoplasm. Cytoplasmic keratinization and intercellular bridges were present. Which of the following conditions is most likely to be present?

- A) bronchopneumonia
- B) bronchiectasis
- C) bronchogenic carcinoma
- D) sarcoidosis
- E) tuberculosis

64) the major morphological changes seen in chronic bronchitis include,

- A) leukocyte infiltration
- B) decreased goblet cell number
- C) smooth muscle hypertrophy
- D) increased mucosal gland depth (Reid index)
- E) Reid index of 0.4

65) what is the main complication of primary tuberculosis?

- A) formation of Ghon complex
- B) miliary pulmonary TB
- C) tuberculous bronchopneumonia
- D) lung abscess
- E) atelectasis

66) chronic bronchitis is characterized by,

- A) increased size of goblet cells
- B) leukocytes infiltration
- C) mucous gland hypertrophy
- D) smooth muscle hypertrophy
- E) caseating granuloma

67) A 62-year-old man is a smoker with 10 years history of cough productive of copious mucopurulent sputum. Over the past six months, he has developed progressive dyspnea. Physical examination shows bilateral pedal edema and enlarged liver. A chest radiograph shows bilateral pleural effusions. The patient is intubated and placed on a ventilator due to low oxygen saturation. He dies 7 days later. At autopsy which of the following microscopic findings is most likely to be characteristic of his underlying pulmonary disease?

- A) infiltrate of eosinophils
- B) extensive interstitial fibrosis
- C) granulomas in bronchovascular distribution
- D) carcinoma filling lymphatic spaces
- E) hypertrophy of bronchial submucosal glands

68) A 48-year-old man, a non-smoker has experienced 4-kg weight loss over the past 3 months. He developed a low grade fever and cough with mucoid sputum production and after 2 weeks, he noticed blood streaked sputum. On physical examination, his temperature is 37.7°C. There are bilateral crackles in the left upper lobe on auscultation of chest. Chest CT scan shows a 3-cm left upper lobe nodule. Laboratory studies show hemoglobin, 13.5 gm/dl and WBC count, 7890/μl. Which of the following in his sputum is most likely to be present.

- A) acid fast bacilli
- B) branching septate hyphae
- C) Charcot-Leyden crystals
- D) foreign body giant cells
- E) gram negative bacilli



69) A 65-years-old man has a prolonged history of smoking for the past 7 years , he has had a cough productive of copious amount of mucoid sputum for past 3 months at a time. He has had repeated episodes of pneumonia. His last episode of pneumonia is complicated by pneumonia and brain abscess, and he dies. At autopsy, his bronchi microscopically demonstrate mucous gland hypertrophy . Which of the following conditions is most likely to explain his clinical course?

- A) small cell carcinoma
- B) bronchiectasis
- C) chronic bronchitis
- D) bronchial asthma
- E) centrilobular emphysema

70) in COPD, where in the lung is primary center of obstruction?

- A) large bronchi
- B) Large bronchioles
- C) mucus gland
- D) small bronchi and bronchioles
- E) trachea

71) breathlessness during early phase of asthma is due to,

- A) increased mucus secretion
- B) reversible bronchoconstriction
- C) fluid accumulation in the alveoli
- D) hyperinflation of alveoli
- E) inflammation of bronchi

72) which statement about the difference between LBTI( latent tuberculosis) and TB is true?

- A) tubercle bacilli are in the body with only with TB disease
- B) persons with LBTI cannot spread TB bacteria to others
- C) sputum smear and cultures are positive with LBTI and not with TB disease
- D) LBTI is the source of infection to other persons
- E) LBTI is a terminal stage of disease as compare to TB disease

73) all of the following Play a role in the pathophysiology of COPD except,

- A) chronic inflammation from repeated exposure to noxious particles and gases
- B) an imbalance between proteinases and anti-proteinases
- C) inflammation which is mainly mediated through eosinophils and mast cells
- D) oxidative stress
- E) impairment of normal protective and repair mechanism lungs

74) A 8 year-old girl presented with painful swallowing for last 24 hrs, child is febrile and has developed inspiratory stridor since last night. The child refuse to lay down with continuous drooling of saliva . Child cry is muffled. What is your most likely diagnosis?

- A) acute laryngitis
- B) acute laryngotracheobronchitis
- C) acute tonsillitis
- D) epiglottitis
- E) acute pharyngitis

75) a 3 years male child presented to emergency with short history of foreign body inhalation.

child is mildly in distress . What will be your management option,

- A) antibiotics
- B) racemic adrenaline nebulization
- C) ventolin nebulization
- D) bronchoscopy



E) esophagoscopy

76. 5 years old girl biphasic stridor .mother say same complain from last 2 yrs .she was having endotracheal intubation after rta

Bacterial infections

Viral

**Subglottal stenosis**

Imune deficiency

77. 5 yrs old girl breathing difficulty inspiratory stridor .biopsy show juvinile laryngeal pappilomatosis .causative agent is

EBV

**HPV11**

HPV 13

VZV

78. Adult male went to ent opd with complain of difficulty in breathing, pain in swallowing, blood in sputum .diagnosed as laryngeal tb

.which site is commonly involved

Anterior larynx

**Posterior larynx subglottis**

Supraglottis anterior

commisure

79. An adult male pt present to ENT OPD with hoarseness of voice and painful swelling with cough associated with blood staining in sputum. On biopsy from larynx it was diagnosed as

TB of larynx. Which part of larynx mostly affects

**Posterior**

Anterior

Sub glottis

Ant commisure

Supra glottis

80. A 3 year old boy present to ER with sudden acute respiratory distress with spasmodic cough, cyanosis and using accessory respiratory muscles is probably due to

Acute folliculitis

Foreign body inhalation

Adenoid hypertrophy

Vocal cord nodule

**Vocal cord polyps**

81. diabetic person , pallor , bluish right foot, irregular pulse ... what could be the underlying disease?

**a. peripheral arterial disease**

b. DVT

c. rupture baker cyst

d. right sided diabetic foot

82: ECG shows ST elevation on V3 V4 V5 leads . ejection fraction is 31% ..

**a. acute anterior wall MI**

b. acute post wall MI

c. inferior wall MI

d .acute pericarditis



e. acute myocarditis

83: chest pain radiating to neck and shoulder , vomiting , palpitations, ST elevation in lead II III avf with prolong PR interval..

- a. acute anterior wall MI
- b.inferior wall MI**
- c.unstable angina
- d. myocarditis
- e. pericarditis

84. 2 months old baby having omega shaped epiglottis and reductant mucosa of supra glottis

Laryngomalacia (birth defect) googled!

85 . fever, large joint pain , pan systolic murmur radiating to left axis.

- a. mitral stenosis
- b.rheumatic fever**
- c. rheumatic heart disease

85)a 75 year old diabetic man presented with severe ,pain, pallor and bluishness in Right foot and leg for last 5 days .his pulse is irregularly irregular and bp of 100/70 .which one is most likely caused of symptoms.

- A) peripheral arterial disease**
- B)deep vein thrombosis.
- C) Ruptured backer's cyst
- D)right side diabetic foot
- E)gouty arthritis

86)35 year old lady who is on treatment for rheumatic fever heart disease and prosthetic wall.presented with sudden onset of right sided weakness.examination shows right hemiplegia.which one is diagnosis

- A. Hemorrhagic stroke
- B. Ischemic stroke**
- C. Viral encephalopathy
- D. Basal meningitis
- E. Subarachnoid hemorrhage

87.a 50 year old hypertensive man presented to basic health unit with chest pain which radiat to neck and Left shoulder for last 2 hours.he has sweating and vomiting twice.his bp is 150/90.which one of the following is the appropriate management of step before referring him to the care centre.

- A . Iv analgesic
- B. Immediate chewable aspirin**
- C. Immediate antihypertensive
- D. Iv Omeprazole
- E. Iv nitrates

88.a 37 year old man who is known case of rhematic heart disease with prosthetic value presented with bleeding gums.he is taking warfarin 7.5 mg for last 2 years.his bp is 110/70.his prothrombin time was prolong with an INR of 4.5.what will be appropriate management step.

- A. Iv tranexamic acid
- B. Stop warfarin immediately**
- C.iv fresh frozen plasma.
- D.reduce warfarin dose
- E.conservative approach



INR < 5 .. stop warfarin

INR 5 – 20 .. Vit K

INR > 20 .. Four factor complex (II, VII, IX, X)

89. a 55 year old hypertensive man develop chest pain on climbing stairs which get relieved by rest for one mint. the pain radiat to his arm and neck .bp is 150/90 with normal resting ECG. WHAT should be advised at time of pain to the patient.

- A. Chewable aspirin.
- B. Sublingual capatopril
- C. Sublingual nitrates
- D. Take rest
- E. ruvastatin.

90. a 37 year old lady who is 2 days post natal presented with shortness of breath which increases in lying position her bp is 120/70mmhg and bilateral edema feet. her jvp is raised and ascultation revealed fine crackles on her back of chest. what is diagnosis.

- A. Postpartum glomerunephritis.
- B. Postpartum pericarditis.
- C. Postpartum cardiomyopathy
- D. Postpartum myocarditis.
- E. Eclampsia

91. A 67-year-old man who is known case of chronic obstructive pulmonary (COPD) presented with bilateral edema feet and raised JVP. His jugular venous pressure

echocardiography shows pulmonary arterial hypertension and tricuspid regurgitation. Which one of the following is the most likely diagnosis?

- a. Acute exacerbation of COPD
- b. Cor pulmonale
- c. Cardiomyopathy
- d. Type 2 respiratory failure
- e. Type 1 respiratory failure.

92. A 25-year-old man presented with on and off headache and features of anxiety for the last 2 months. His father is hypertensive and taking medication. His blood pressure is 150/95 and heartbeat 95/min. Which one of the following is the most appropriate decision regarding his management?

- a. Lifestyle modifications only
- b. Salt restrictions only
- c. Avoid high fat diet
- d. Start antihypertensive drugs
- e. All the above

93. A 67-year-old hypertensive man presented with



bilateral pitting edema feet and legs. He has no history of shortness of breath or cough. He is taking amlodipine 10 mg once daily for his blood pressure. His urine, and blood tests are normal. Which one of the following is the most likely cause of his edema?

- a. Hypertensive nephropathy
- b. Ischemic heart disease
- c. Drug induced pedal edema
- d. Deep vein thrombosis
- e. Congestive cardiac failure.

94. A 37-year-old man presented with 1 hour history of sudden onset right sided chest pain and severe shortness of breath. He has a history of pulmonary tuberculosis. Examination shows right side hyper resonant percussion note and absent breath sounds. Which one of the following is the most appropriate immediate management approach?

- a. Nebulization of ipratropium bromide
- b. Salbutamol nebulization
- c. Intravenous steroids
- d. Intravenous antibiotics
- e. Needle aspiration

95. A 45-year-old lady with 5 years past history of pulmonary tuberculosis presented with 2 years on and off productive cough with copious amount of sputum. She has occasionally blood in the sputum as well. On examination, there were bilateral coarse crepitations mostly on the upper parts of the chest. Which one of the following is the most likely diagnosis?

- a. Chronic obstructive pulmonary disease
- b. Allergic asthma
- c. Pulmonary embolism
- d. Bronchiectasis
- e. Bronchogenic carcinoma.

96. A 16-year-old boy presented with history of shortness of breath and chest discomfort while playing football. He has been treated by the ENT doctor for acute rhinitis and sinusitis on multiple times. His father who is a smoker had inferior wall myocardial infarction. Physical examination revealed no signs except mild congestion of the throat. Which one of the following is the most likely diagnosis?

- a. Angina pectoris
- b. Acute sinusitis
- c. Acute bronchitis
- d. Acute rhinitis
- e. Episodic asthma

97. Deaths which are not preceded or are only preceded for a short period, a day or two, by morbid symptoms are called,

- a. Accidental deaths
- b. Natural deaths
- c. Sudden deaths
- d. Suicidal deaths
- e. Unnatural deaths



98. A middle aged woman presented with Nausea, tachycardia, diarrhoea, vomiting, breathlessness and drowsiness. There is history of procuring abortion by use of some plant root by Dai 24 hours ago. The most likely diagnosis is:

- a. **Oleander poisoning**
- b. Digitalis poisoning
- c. Conium poisoning
- d. Opium poisoning
- e. Nicotine poisoning

99. The cardiac poison which can be recovered from burnt bodies is:

- a. Aconite
- b. Cerbera thevetia
- c. Cerbera odollum
- d. Digitalis
- e. **Nerium odorum**

100. Specific antidote for digitalis poisoning is:

- a. EDTA
- b.  $\text{KMnO}_4$
- c. Neriodorein
- d. **Novocaine**
- e. Tannic acid.

101. Le facies sympathies is seen in

- A. drowning
- B. **hanging**
- C. mugging
- D. strangulation

E. Throttling

102. An autopsy of an asphyxiant death shows congested face with multiple petechiae and blood from nose and ears. The cause of these is:

- \*Blockage of carotid artery
- \***Blockage of jugular vein**
- \*Respiratory airways blockage
- \*respiratory pathology
- \*carotid sinus compression

103. Microscopic findings in brain and lungs were ischemic red neurons, swelling of alveolar lining cells, albuminous fluid in alveoli, thickening of the alveolar septa and formation of hyaline membrane. Most probable diagnosis is

- A. dry drowning
- B. immersion syndrome
- C. **near drowning syndrome**
- D. wet drowning
- E. submersion of unconscious

104. In case of suicidal hanging, common cause of death is

- A. asphyxia by airway obstruction
- B. vasovagal shock
- C. cerebral congestion





- D. fracture/dislocation of c2-c3
- E. **neurovascular bundle compression**

105. emphysema aquosum is seen in

- A. bomb blast injury
- B. drowning**
- C. electrocution
- D. hanging
- E. poisoning

106. sure sign of wet drowning is

- A. cutis anserina
- B. Hemorrhage in middle ear
- C. fine leathery cupious froth**
- D. washer women feet
- E. water in stomach

107. adduction fracture of hyoid occurs in

- A. hanging
- B. ligature strangulation**
- C. throttling
- D. bandsola
- E. mugging

108. A dead body brought for autopsy there were bruising and abrasion around mouth and nose with tearing of frenulum of lips all other signs of asphyxial death are present. The most probable cause of asphyxia in this case is

- A. Burking
- B. mugging
- C. Smothering**
- D. Throttling
- E. Strangulation

109. Trachea is occluded by force of

- A. 3.5kg
- B. 15 kg**
- C. 2kg.
- D. 5kg
- E. 7kg

110. In basic analysis of SWOT "S" stands for

- A. Strength**
- B. Solution
- C. Selection
- D. Situation
- E. Satisfaction.

*SWOT stands for Strengths, Weaknesses, Opportunities, and Threats*

111) at each stage in process of communication there is a possibility of interference .

- A) sender
- B) receiver
- C) environmental
- D) nonverbal



E) barrier

112) which of the Following ethical requirement most met by a researched notifying proposed participation

- A) respect of justice
- B) respect of privacy (not sure)**
- C) respect of autonomy
- D) respect of intelligence
- E) respect of information

113) a 5 years boy with 6 hours fever , neck hyperextended position , saliva drooling out

- A) strep pharyngitis
- B) RSV bronchiolitis
- C) RSV viral
- D) acute epiglottitis**
- E) community acquired pneumonia

114) a child diagnosed with VSD .

Acute appendectomy ,.....

How to prepare for operation

- A) i.v before and after sugery
- B) i.v glucose solution
- C) monitoring of b.p**
- D) angiography before surgery
- E) stopping his cardiac medication

115) child came to peads OPD with blurring of vision and headache b.p 160/100 pulse regular , bounding in upper limb and feeble in lower limb

Diagnosis

- A) essential b.p
- B) coarctation of aorta**
- C) renal b.p
- D) endocrine b.p
- E) brain tumor

116) dysmorphic baby having multi gravid and complete AV canal defect Diagnosis?

- A) turner's syndrome
- B) down syndrome**
- C) Williams syndrome
- D) allagile syndrome
- E) klinefilter syndrome

117) patient with multigravida and pharyngitis , cyanosed, no improvement on oxygen therapy

What are treatment options

- A) i v prazosin infusion ( not sure abt drug name)
- B) i.v endothelin infusion
- C) i.v dextrose infusion
- D) blood culture**
- E) aspirated gastric culture

118) a 4-year-old baby developed respiratory distress syndrome , choking observed by elder sister . On examination dyspnea, recession and wheezing.

- A) acute epiglottitis
- B) acute asthma



- C) acute cramp
- D) pneumonia
- E) foreign body

119) 2 year-old baby brought to ER in mid night having low grade fever from 2 days, runny nose, barking cough, stidor and respiratory disease.

- A) acute epiglottitis
- B) acute asthma
- C) acute cramp.... If it's croup then it is the **correct** option
- D) pneumonia
- E) foreign body

*Acute epiglottitis →Bacterial, NO COUGH, high grade fever, inspiratory stridor, Dysphagia and drooling due to dysphagia.. baby will be of 2 to 7 years*

*Croup →Viral, BARKING COUGH, low grade fever, inspiratory stridor.. baby will be of 3 monts to 3 years*

120) confirmation of acute streptococcal pharyngitis

- A) antibody test
- B) rapid antigen reaction
- C) throat swab culture
- D) blood culture
- E) aspirated gastric culture

Solved by Kmcites:

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