## GOMAL MEDICAL COLLEGE, MTI, D.I.KHAN

	MCQs Wi	ritten Test 3 <sup>rd</sup> YEAR MBBS (Blo	ock-I)			Date: 21st September, 2022 Roll No.
	Please end	ircle the correct answer with blu	_ ie/black pen			Paper ID: GREEN
	TIME AL	LOWED: 02-HOUR'S				TOTAL MARKS: 120
	Note: At	tempt ALL questions from the	nis section. Select	ONE be	st answer. Each	question carries 01 mark.
		ear old boy is seen in the pediatr				
		d a specimen is forwarded to the s influenza from this patient?	laboratory. Select	the culture	medium which w	ill be most appropriate to isolate
		Blood agar	1	41	MacCankovagas	
		Chocolate agar			MacConkey agar	
		Deoxy-cholate citrate agar		e)	Nutrient agar	
		gram stain reagent acts as a more	lant to bind the Stair	to the bac	teria?	
		Acetone-alcohol	- Christian		Lugols iodine	
	b)	Crystal violet			Safranin	
	(2	Gram's iodine				
		rear-old man is referred to x-ray as				
		ecurrent chronic chest infections. C	D/E, clubbing was ob			st likely diagnosis?
		Bacterial endocarditis		,	Mesothelioma	
		Bronchiectasis Fibrosing alveolitis		er	Pulmonary TB	
		year-old man working in coal mine	develops dyspnea	The dyspne	as is gradually wor	rening so much so that he has to
		. On chest x-ray there were diffus				
		his disease is true?		and show		ar pattern. Willen or the tonowing
	-	Ferruginous bodies on biopsy		et	Reduced Complia	nce
	b)	Normal Peak expiratory flow rate	9		Silica is the causa	
	c)	Obstructive pattern of lung disea	ise			
		of the following is a cause of cong	estive heart failure?			
		Coronary Artery Disease			Emphysema	
		Asthma		e)	Hypertension	
		Smoking	d by inflammation o	f branchi di	uo to smoking?	
'		respiratory disease is characterize Emphysema	ed by inflammation o		Bronchiectasis	
		Chronic Bronchitis			CA Lung	
		Asthma		٠,	Citcong	
		cears old man had severe pain in l	eft side of chest rad	iating towa	rds left arm. Hispa	ain was associated with exertion.
		ne was a diagnosed case ofhyperte				
	a)	Atherosclerosis		d)	Stable angina	
		Myocardial infarction		e)	Unstable angina	
		Prinzmetal angina	December 100			
		ears old man is diagnosed as a case		rditis. This r	nan is also anIV dr	ug abuser. What can be the most
(		use of infective endocarditis in this	spatientr	۸۱	Strantagaggie ha	úte
		Staphylococcus aureus Staphylococcus epidermidis			Streptococcus bo Mycobacterium	VIS
		Streptococcus viridans		C) .	iviycobacteriam	
		does the ECG shows in prinzmetal	angina?			
		ST segment elevation	3.0	d)	Prolonged PR inte	erval
		ST segment depression			B and C	
	,	Absent p wave				
(	Q#10: The n	nost common cause of secondary h	rypertension is			
	at	Renal disease		c)	Coarctation of ao	
	b)	Pheochromocytoma			Pregnancy	e) Stress
C	(#11: A 48	years old man with family history	of IHD is having incr	eased level	of LDL. He is aske	d by his doctor to lower the level
0	I LDL. Wha	is the role of LDL in the pathogen	esis of atherosciero	sis.	11-1 I- N <b>f</b>	-N
	a)	Transform into lipid laden foam o	ells			ation of fibrous cap
	ь)	Reduces the risk of IHD		ej	Increases HDL lev	reis
_	c)	Mobilize smooth muscle cells	role			
C		is the benefit of increased HDL lev	reis .	٠ ٦)	Found in egg yolk	rs and animal fat
	a)	Reduces hypertension  Mobilezes cholesterol from ather	omas	e)	Help to stabilize	
	1.5			٠,	The second of	
_	C)	Reduces MI rears old man is brought to hospital	al emergency with so	evere left si	ided chest painrag	liating towards left arm and neck
U L	e is diagnos	sed as a case of MI. what is the first	at effect on cardiac n	nuscle.	, ,	and the state of t
-	a)	Increased production of ATP		d)	Cessation of card	liac myocyte aerobic glycolysis
	- b)	Accumulation of lactic acid		e)	Both A and B	
	· c)	Loss of contractility	•			

also pre	. 30 years old female presenting with ir sent on mucous membrane of oral cav	the Chast X-ray shows to	ilate	ral hilar lymphadellopatily.	Bronchoscopic biopsy
shows n	on-caseating granuloma with giant cells	. What will be the most li	kely	diagnosis in this case:	
	a) Fungal infection		a)	SIIICOSIS	
	b) Interstitial pneumonitis		e)	Tuberculous	
	c) Sarcoidosis				
Q#15: V	which disease is caused by thermophilic	bacteria in heated water	rese	rvolr? Mushroom workers lung	
	a) Air conditioner lung			Pigeon breeders lung	
	b) Cheese workers lung	The state of the s	e)	Pigeon breeders rung	
0445	c) Farmers lung				
	hat is the most common cause of death	in sarcoidosis?		Pneumoconiosis	
	a) Asbestoses		d)		
	b) Cor pulmonale		e)	Tuberculosis	
	c) Pneumonia	***************************************	1	La sales last four months If	he is not treated, this
Q#17: A	c) Prieumonia 56 year old man has persistent raised b	lood pressure of 175/110	mm	ng for the last lew months.	
	risk for which of the following conditio	n?		Pulmonary passive congestio	n
	a) Giant cell myocarditis		a)	Pulmonary passive congestion	
	b) Hyperplastic arteriosclerosis		e)	Tricuspid insufficiency	<b>*</b>
	c) Polyarteritis nodosa				f the following best
Q#18: A	45 year old man has chest pain after jog	ging for 15 minutes. The	pair	is relieved after rest. Which o	
describe	this patient's state?				
	a) Arrhythmia			Stable angina pectoris	
	o) Myocardial Infarction		e)	Unstable angina pectoris	1 7 - 1
	c) Prinzmetal's angina				On achocardingraphy.
Q#19: A	35 year old patient presents with high	grade fever, malaise and	wea	kness for the last one month.	Oil Echocal dioBraphy)
there are	multiple masses on valves of right hear	rt. What is the most prob	able	diagnosis?	
ā	) Acute infective endocarditis		d)	Pericarditis	1247-
t	) Cardiomyopathy		e)	Sub-acute infection endocard	iitis
Ċ	) Myocarditis.				
Q#20: A 7	0 year old man presents with bilateral	pneumonia suspected of	legi	onella pnuemophila infection.	Legionella antigen will
	ed in which of the following?		•		
а	) Blood		c)	Sputum	
b	) Serum		d)	Sweat	e) Urine
0.424 - 144	the after fallering are suppressed of sh	oumatic boart disease?			
Q#21: Wn	ich of the following are symptoms of rh	of broath	-11	Joint swelling, generalized pa	in and abdominal nain
	Chest pain, swelling, and shortness	oi breatii	d)		
	Coughing, rash, and sweating		e)	Fever, rash, repeated jerky m	ovements.
	Muscle cramps, weakness, and sore				
Q#22: The	aortic opening in diaphragm transmits	all of the following exc	ept:		
а	Deseing thoracic		c)		CM configura
b	Thoracic duct		d)	Azygos Vein e) Non	e of the above
O#23: Whi	ch heart valve has two cusps?				
	Aortic		d)	Pulmonary and Aortic	
	Mitral Valve		e)	None of the above	-
,	The second secon		. 1		
c)	Pulmonary valve		hac	a cyanosis & hilateral wheeze	an auscultation. He has
Q#24: 60 y	ear old male smoker has difficulty of b	reatning on walking. He	1105	act four months. What is hest	treatment option for
	ed with bronchodialators on & off and	multiple hospitalization	s in i	ast lew months. What is best	ticatinent option to
	in long term?			and the state of t	
a)	Salbutamol		d)		TOT)
b)	Steroid		e)	Long term oxygen therapy (I	.101)
ci.	Montal cast				
0#35. 20 4	ear female productive cough and feve	for last month. She has	loss	of weight and has been takin	g multiple course of
Q#25; 20.96	ut no benefit. What should be the bes	t test for her diagnosis?		-	
			d)	ESR, CBC	
,	CXR (PA)		e)	CBC. SET. CT. Chest	
b)	Spirometer		-1		
c)	Sputum AFB + Gene Xpert				nd pressure?
Q#26: 50 ve	ar old diabetic male has blood measu	re of 150/100. What is	best	medication to control his bloc	ou pressurer
a)	Calcium Channel Blocker		c)	Illiaziue didi etics	
h.i	Pota Blocker		d)	ACE & ARB	e) Aldomet
0427:00	eeks after having a prosthetic head va	lve, a patient develons	infed	tive endocarditis. What is the	e most likely causative
	eks after having a prosthetic head va	, a pasient acronops			
organism?	Sila North Carl		<u>~1</u>	Staphylococcus epidermidis	
a)	Streptococcus Viridans		c)		e) E. Coli
b)	Staphylococcus Aureus		d)		
0#28- Whic	h of the following is responsible for e	asily depolarization pha	ise o	f myocardial action potential	r .
	Rapid sodium influx		d)	Filliny of bornesia.	
a)			e)	Slow calcium influx	
b)			٠,		
c)	Slow sodium efflux		0.1		
2#29: Which	part of ECG complex corresponds with	th the closure of mitra	valv	e?	
	P. wave		C)	1. Wave	V
•	QRS complex		d)	ST. segment	e) U. wave
b)	QIO COMPIEX				

1/			
1			
Q#30: A 42	year old man is diagnosed as having HTN. Secondary causes o	f HTI	N have been excluded. What is the most appropriate
initial drug	therapy?		
	ACE Inhibitor	d)	Methyldopa
	Diuretics	e)	Prazosin (Alpha blockers)
	Nitrates		and Which down is used for sate
control?	nt presented with fast head rate of more than 100 beats/ min	utes	, ECG shows SV1, Which drug is used for rate
	Atropine	d	Dopamine
	Adrenalins		Acetyl choline
	B. blockers	C)	Macry and me
Q#32: 57 ye	ear old female patient had bilateral DVT, now presented with	sudd	en chest onset of shortness of breath. ECHO shows
dialated RV	with free wall hypokinesia. What is the most probable diagno	sis?	*
	Pulmonary embolism	d)	Pneumonia
	Acute MI	e)	Pulmonary HTN
c)			Section College College Control of the College
Q#33: 54 ye	ear old man presented to ER with 15 minutes history of crushle	ng ce	entral chest pain. Which of the following rises 1
	yocardial infection.	d)	LDH
	CK. Mg Troponin	e)	AST
c)	Myoglobin	- /	
	ays old baby girl is noted to become cyanotic while feeding. V	Vhic	n congenital heart defect is most common in 2 days
old infant?		1,110	
a)	ASD	c)	PDA
- b)	VSD		TOF e) Coarctation of aorta
Q#35: A pa	tient undergoing Anti- Tuberculosis drug therapy for last 2	mor	oths. He is complaining of Orange-Pink discoloration of
	of the following drugs is responsible for it?		
а)	Rifampicin.	d)	Ethambutol.
b)	Isoniazid.	e)	Streptomycin.
c)	Pyrazinamide.		the second second second second
Q#36: A 54-	year-old patient is implanted with an artifi cial cardiac pac	ema	ker. Which of the following conductive tissues of the
	defective function that required the pacemaker?		Products Char
	Atrioventricular (AV) bundle	d)	
•	AV node	e)	Moderator band
C)	Sinoatrial (SA) node year-old woman presents with a tumor confi ned to the po:	steri	or mediastinum. This could result in compression of
	following structures?		
	Trachea	d)	Arch of the azygos vein
-,	Descending aorta	e)	Phrenic nerve
•	Arch of the aorta		
Q#38: Volum	e of air taken in expelled out by maximum inspiration and ex	xpira	ation is:
	Total lung capacity	d)	Functional Residual Capacity
b)	Vital Capacity	e)	None of these
c)	Tidal Volume		
Q#39: In orde	er to pursue the research, which of the following is required	first	?
	Developing a research design	d)	Formulating a research hypothesis
	Formulating a research question	e)	Formulating a Sampling method
	Deciding about the data analysis procedure		
Q#40: Gold s	tandard (best) study design to establish cause and effect rela	ation	ship between variable s is
a)	Experimental study design	d)	Cross sectional
b)	Case report	e)	Case series
- c)	Survey		h = f=11=1==2
	ant Mesothelloma is most commonly associated with which	ort	Ashastasis
	Allergy	c) d)	Asbestosis Immunodeficiency e) Silicosis
b) i	Anthracosis		
2#42: A 17 '	Year old patient comes with the history of upper respire	atory	y tract infection, pleural effusion and positive cold
gglutination	test. Clinical diagnosis is a typical pneumonia. What is the n	nost	likely diagnosis?
a)	ever	a)	PSITTACOSIS
b) (	egionnaire's disease	e)	Tularemia
c) (	Mycoplasma Pneumonia	dela	ender and decreases with prope position. The child
Q#43: 1 year	old child has inspiratory high pitched stridor increases w	nun i	to has been established. How would you council the
leeps well ar	d there is no feeding problem. The diagnosis of laryngom	iaiau	id has been established, flow would you could the
arents?	and the second s	d)	CT neck
a) T	ake consent for tracheostomy	1.0	MRI
	rescribe iv antibiotics	e)	
	leassurance s old unvaccinated child presented with severe odynor	nhan	ia, fever and toxic look. On examination there is
#44: 4 year	s old unvaccinated child presented with severe boyno er both tonsils extending beyond the confines of tonsils.	The '	child recently started to develop respiratory distress.
	beat tensile extending beyond the conlines of torisis.	1116	cilia (cecitify states to consider
eck examina	tion showing bilateral jugolo digastric lymph nodes. Most p	c)	Faucial Diphtheria
a) A	cute follicular tonsilitsi	4	Loukomia ol Trauma
F) 1	fineant anging		

Procedure t	ors old female child having recurrent pront there is decreased breath sound on rigo treat this condition is?	neumonia and cough, tht side with consolid	. S lati	he has vague history of inhal on on x ray chest FB right br	ation of peanut. On the conchus is suspected.
a) b)	Esophagoscopy Bronchoscopy	c)		Direct laryngoscopy Thoracotomy	a) (aparetem)
			, 	- shild become and the same	e) Laparotomy
showing nar	ers old child has cough and fever for the las rrowing of subglottic area. What is most pr Pneumonia	obable diagnosis is?			ray neck AP view
b)	FB bronchus		•	Bronchitis	
•	Croup	e)	)	Epiglottitis	
Q#47: 3 ye examination	ars old child presented to emergency wind the child is sitting and leaning forward	ith high grade fever, I. He is in inspiratory	dr	ooling of saliva dysphagia and	l very toxic look. On
	s and the specialogic for this condition is	,		and of the track lateral view	ationing flighting sign
, a)	Streptococcus pneumonia	d)		Staph aureus	
c)	Haemophilus influenza type b E choli	e	)	Moraxala cataralis	
		mont with some			
his conditio		y chest pa view has at	ele	ctasis of right lower lob. What	e. The child has been could be the cause of
a)	Low immunity	d	)	Foreign body bronchus	
(a.	Environmental cause	e	)	Mucous plug	
Q#49: Whic	Congenital anomaly			_	
a)	h of the following statements is true regar Both the AV and Semilunar valves remain	ding isometric contrac	ctic	on phase of the cardiac cycle?	
b)	and Schilldhar valves remail	n open. d	)	Both the AV and Semilunar val-	ves remain closed. •
c)	Only the semilunar valves remain open		)	LV diastolic volume increases	
Q#50: Whic	n of the following is not measured with di	rect spirometer?			
ره.	inspiratory Capacity		١	Inspiratory Reserve Volume	
b)	Functional Residual Capacity			Expiratory Reserve Volume	
C)					
antihynerte	years old lady presented to you with dry considering few months back. Which of the	ough. On labinvestiga	tio	ns there was hyperkalemia. She	was started on some
	nsive drug few months back. Which of the Chlorthalidone	given drugs might be	re	sponsible for it?	
	Furosemide	d	1)	Enalapril	
c)		е	:)	Metoprolol	
Q#52: Whic	h of the following are common side effect	s ofveranamil2			•
(ك	Dry cough and hyperkalemia		i)	Gingival hyperplasia	
b)	Second degree AV block and diarrhea			Skin rash, hypotension	
c)	First degree AV block and constipation		•	- The state of the	
Q#53; All 01	the following are true regarding digoxin,	except			
h)	It inhibits Na/k ATPase It has narrow therapeutic index	d	(k	The second party	ent to digoxin toxicity
c)	It has very small volume of distribution	, e	≘)	Both c and d	,
	years old man was started on some ant onstipation and blurred vision. Which one	i-arrhythmic deux Af			
retention, co	onstipation and blurred vision. Which one	of the following drug	ter	starting drug he presented w	ith dry mouth, urinary
a)	Disopyramide	or the following drug.	,3 11 d)	Lidocaine	e for it?
b)	Quinidine		e)	Mexiletine	
c)	Procainamide		,	, and the second	
Q#55: Which	n one of the following is true regarding di	goxin?			
a)	Digoxin should be used cautiosly when given with betablockers		c)	Digoxin should be used cautio	sly when given with
b)				diltiazem	
	when given withverapamil		d)	B The state of the	
Q#56: A 50 \	ears old asthmatic lady presented with a	rrhythmine Which	e)	All of the above	
this patient.	years old asthmatic lady presented with a	irriyumnas.wnich on	e c	of the following anti arrhythmic	should be avoided in
a)	Quinidine		۵۱	Diagram	
b)	Procainamide		c) d)	Disopyramide	
Q#57: Which	one of the following drug should not be	given incombination	u) wi	Propafenone	e) Mexiletine
a)	Paracétamol		c)	Clarithromycin	
	Omeprazole		d)		a) Chlasses
Q#58: Lidoca	aine is particularly used for treatinga:		~,	Silderiani	e) Chloroquine
a)	atrial flutter:		d)	ventricular tachycardia	
	Atrial fibrillation		e)	all of above	
c)	paroxysmal supraventricular tachycardia	a .	•		
Q#59: Which	one of the following is drug of choice fo	r treating prinzmetal	an	gina?	
ر اه	Deta blockers			ranolazine	
	amlodipine		٩,	adonosino	e) magnesium sulfate
		ed with myalgias. Wh	ich	lab investigations would you o	do specificallyin
a) b)	Blood complete picture	grand at	c)	Renal function tests	
b)	Fasting lipid profile		d)	Fasting blood sugar	e) T3,T4,TSH

161: 40 years old male	e taking niacin for hyperlipidemias. Now	he presente	ed with cutaneous flush	and pruritis. Whichmedicine
will you advise film to	ke prior to niacin to decrease flush?			
a) celecoxib b) aspirin			sertraline	
c) codeine		e)	vitamin E	
The state of the s	in taking levothyroxine is now started or	n chalestyran	oine Which is the best t	timing for levothyroxineto
be administered to this p	patient?	renoiestyran	1 (1)	
	can be given together.	d)	Levothyroxine 1 to 2 h	rs before cholestyramine or 4
b) Each drug o			to 6 hrs after cholesty	ramine
c) Cholestyrar	mine 15 min before levothyroxine	e)	All of above are correct	:t
a) Inhaled sho	wing is used for quick relief in bronchiala ort acting Beta 2 agonist		Inhaled ipratropium	
b) Inhaled salr		d) e)	Cromolyn	
c) Oral monte		<b>C</b> )	Cromony	
	wing statement is not true?			
a) Overdose o	of theophylline can lead to seizures and	c)	Theophylline has narro	ow therapeutic index
arrythmias		d)	5 lipoxygenase is inhib	ited by zileuton
b) Omalizuma	b has become drug of choice for asthma	e)	Both b and d	eness of voice. Which
drug may be responsible	using anti asthmatic drugs for thelast ma	any years nov	w presented with noons	5,,555
	ort acting beta 2 agonist	d)	Inhaled corticosteroids	s
b) Inhaled sale		e)	Cromolyn	
c) iv corticost	eroids			
Q#66: Chances of periph	neral neuropathy during anti TB therapyca	an be decrea	sed by by starting vitamin B 6	with anti th therapy
	ose of isoniazid to half	d)	reducing duration of to	reatment
	ay dose of isoniazid	e)	reducing duration of the	
c) by giving Zi	nc g are second line anti TB drugs EXCEPT:			
a) Clofazamin		d)	Para aminosalicylic aci	d
b) Capreomyc		e)	Ethionamide	
c) Cycloserine	2			
Q#68: Average Fatal dos	e for Cannabis Poison is	٦١.	OF hours	
a) 12 hours		d) e)	05 hours 06 hours	
b) 20 hours		٠,	00 110415	
c) 02 hours Q#69: Which of the follo	wing is cardiac Poison?			
a) Carboxalic	acid	d)	Copper sulphate	
b) Benzene		e)	Mercury	
c) Digitalis pur	rpurea	ومام ممادات ال	ath in rospiratory system	m?
Q#70: Which among the	following is the common natural cause o	or suaaen de: d)	Both a and b	
a) Pulmonary	embolism	e)	None of the above	
b) Stroke			,	
c) TB	wing is specific antidote for Digitalis Pois	oning?		
a) Novocain		d)	Azithromycin	
b) Benzene		e)	None of the above	
c) Quinine		المنا المالية المالية	Points	
	then at least three successive ribs are fra	ctured at c)	Points.	
a) 03		d)		e) 05
b) 02				
	mplication of rib fracture in chest traum	a is	 Infection	
a) Fail chest	net.	e)	None of the above	
b) Aortic steno				
c) Asthma	f ribs move inward injuring the underlyin	ng structures	in violence du	ring cardiac injuries.
a) Direct	nos more inverse my	d)	Accidental Injuries	
b) Indirect		e)	None of the above	
c) Both direct a	and indirect			
1#75: Nobbing fractures a	are found inBables.		<b></b>	
a) Cyanotic		c)	Battered	e) None of above
b) Malnourishe		d)	New born	e) None of above
#76: Which of the follow	ring cardiac poison is used in roadside ro	obbery?		
a) Cannabis		c)	Oleander	a) Maraury
b) Digitalis		d)	Dhatura	e) Mercury
#77: Which of the follow	ring is the common natural cause of sud	den death?		
a) Coronary arti	ery disease	a)	Asthma	
b) Dissecting an		e)	None of the above	
c) Both a and b		neko (UIIk	n in the neek Obligue	Incomplete is seen in
	ngue, Dribbling of saliva and ligature ma	arks (High uj c)	Drowning	modificie is seen in
a) Hanging		d)	Gagging	e) Strangulation
b) Throttling		57	-00 0	

. 9	gature marks con	in the neck below the t		c)	Drowning		
	a) Hanging						e) Strangulation
	1. T			d)	Gagging		1
O#80: Th	e mechanical and	xic death caused by co	striction of the nec	k by the	hand occluding the	air passages	nom outside.
Q1100. 111	a) Smothering	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,	-	-	e) Throttling
		1 -		d)	Drowning		
0404.4.5	55	le comes for follow-up	checkup after 4 days	s of the p	oost myocardial infa	rction. Which	h of the following
Q#81: A 5	os years old rema vill be still raised l	le comes for follow-up	CHECKUP GITO				
	viii be stiii raised i a) CK-MB	III tills caser		c)	Cardiac Troponin		-) Total CV
	-) ACT			d)	LDH		e) Total CK
		with known case of chr	onic obstructive lun	g disease	presents to medica	al emergency	with severe
Q#82: A 5	ou years old man	with known case of chroal blood gas sample wa	s taken, revealing th	ne follow	ing: pH=7.08, PCO2	=80mmHg, H	ICO3= 23 mEq/L.
What we w	or breath. Arten our most probab	al blood gas sample wa	3 (diceri)				
vviiat us y	) This is a clinic	al picture compatible v	ith acute metabolic	acidosis	i <b>.</b>		
h	<ul> <li>This is a clinic</li> </ul>	al picture compatible v	ith acute respirator	y acidos	15.		
c	<ul> <li>This is a clinic</li> </ul>	al picture compatible v	ith chronic respirat	or acido:	515.		
	I) This is a clinic	al nicture compatible w	ith chronic metabo	lic acido:	515.		
е	) This is a clinic	al picture compatible v	ith hypocarbic patio	ent from	hypoventilation		
		iable Risk factors of cor	onary artery disease	c. c)	Race		
	) Age			d)	Family history		e) Hypertension
OH94-14/1-	) Gender	ng is a Dietary change	advocated by WHO				
U#84: WN	) Poduction in 1	ng is a Dietary change of fat intake to 20-30 perc	ent of caloric	c)	increase in use or a	ait	
a	intake	ier inrave to 50-20 hetr	E. A. O. Cuiorio	d)	Increase use of alc	ohol in daily	diet
Ь	) A docrosso in	complex carbohydrate	consumption	e)	Increase use of ref	ined sugar	
O#85: The	chest X-rays and	sputum analysis for th	e early detection of	f tubercu	losis constitute whi	ch one of the	e following?
a a	Primary preve	ention		d)	Medical freatment	,	
-	) Secondary pre			e)	Primordial prevent	tion	
c)	Tertiary preve	ention					
Q#86: The	best strategy for	the control of pulmon	ary Tuberculosis as	recomm	ended by WHO is:		
	BCG vaccination		•	d)	Proper disposal of	sputum	
b)	) Chemoprophy	laxis with INH		e)	Awareness		
c)	Early case det	ection and prompt trea	atment				-flatania an
	occupational wor	وجود والخزير المحموم ومورد والمرا					
Q#87: An o	occupational wor	ker presented with cor	nplaints of shortnes	ss of brea	ath on exertion. He	gave history	or being man
industry de	saling with snare	parts such as gas kit as	nd brakes: he also g	ave histo	ath on exertion. He ory of smoking for a	bout five yea	ars. His X-ray chest
industry de	saling with snare	parts such as gas kit an earance / honey combi	nd brakes: he also g	ave histo	ory of smoking for a	bout five yea	ars. His X-ray chest
industry de	ealing with spare ground glass app	parts such as gas kit as	nd brakes: he also g	ave histo thirds o	ory of smoking for a If the lung fields. W	bout five yea	ars. His X-ray chest
industry de showed a g suffers from	ealing with spare ground glass app	parts such as gas kit as	nd brakes: he also g	ave histo thirds o	ory of smoking for a of the lung fields. W Siderosis	bout five yea	ars. His X-ray chest
industry de showed a g suffers from a) b)	ealing with spare ground glass appo m? Silicosis Anthracosis	parts such as gas kit as	nd brakes: he also g	ave histo thirds o	ory of smoking for a If the lung fields. W	bout five yea	ars. His X-ray chest
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industry de showed a g suffers from a) b) c)	ealing with spare ground glass apport? Silicosis Anthracosis Asbestosis	parts such as gas kit al earance / honey combi	nd brakes; he also g ng in the lower two	ave histo thirds o d) e) et for th	ory of smoking for a If the lung fields. W Siderosis Byssinossis e last 25 years pre	hat is the like	ars, His X-ray chest ely condition that h
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0#94: A three years old male child was brought to ER with the complains of high grade fever for two dayswith breathing difficulty. O/E patient is having 103 F fever toxic looking with inspiratory & expiratory stridor, suprasternal recession and painful swallowing. All of the following are correct except d) Admit the patient to intensive care unit a) Incidence is increased since 1998 after vaccination e) Mist therapy has no role b) Drug of choice is ceftriaxone c) Airway should be secured by passing endotracheal Q#95: A 6 weeks old baby presented to OPD with a history of runny nose, cough and low grade fever fortwo days. Since morning he is reluctant to feed and having breathing difficulty. There is no history of allergy or asthma in the family. O/E baby is tachypnelc with R/R of 100/min, nasal flaring and chest indrawing. Fine crepitations are heard all over the chest sometimes accompanied by rhonchi. What is the most likely diagnosis? c) Bronchiolitis a) Asthma e) Pneumothorax d) Croup b) Bronchitis Q#96: Parents brought their 2 years old child to E/R with complaints of low grade fever, barking coughand breathing difficulty. O/E patient is having R/R of 45/min with chest indrawing and inspiratory stridor. The patient was diagnosed as a case of viral croup. Regarding the management of this child allare correct except d) Steroids are usually effective a) Acyclovir is the drug of choice e) Severe cases may require intubation and ventilation Racemic epinephrine nebulization decreases respiratory distress c) Sedatives are not indicated Q#97: A 4 years old child brought to ER with the complaints of noisy breathing, cough and breathing difficulty. Family history of eczema is positive. O/E child is afebrile with tachypnea-bilateral wheezes and chest indrawing. X ray chest shows hyperinflation. What is the most likely diagnosis? a) Bronchiolitis e) Acute bronchitis d) Asthma b) Aspiration pneumonia Whooping cough Q#98: Parents brought their 2 years old child to OPD because he developed fever, cough and noisy breathing. The child is having recurrent chest infection starting in infancy. He is also having history offrequent offensive loose stools, with failure to thrive. Regarding the diagnosis all are false except d) Cystic fibrosis a) Asthma e) Pulmonary TB Whooping cough b) Aspiration pneumonia Q#99: An eight years old child was brought to the ER. She developed headache, vomiting and fits followed by unconsciousness. On examination she was afebrile comatose with no neck stiffness. Her BPin upper limb was 150/100 mmHg and lower limb it was 80/60 mmHg. There is ejection systolic murmur radiating to the back. Chest X-ray shows a normal heart size, prominent descending aorta, rib notching, ECG shows left ventricular hypertrophy. What is the most likely diagnosis? d) Rheumatic carditis a) Essential hypertension e) Coarctation of aorta b) Tetralogy of Fallot c) Aortic stenosis Q#100: An eight months old male baby was brought to the hospital with the complain's of blue discoloration of lips and face during crying sometimes associated with breathlessness. O/E he was having central cyanosis. The baby was irritable and breathless. He was also having digital clubbing. Thereis ejection systolic murmur at upper left sternal edge radiating to the back. ECG shows right ventricular hypertrophy. What is the most likely diagnosis? d) Patent ductus arteriosus a) Transposition of great arteries e) AV canal defect b) Tricuspid atresia c) Tetralogy of Fallot Q#101: A 56year old male patient of lung cancer develops hoarseness of voice. This symptom is attributable to tumor invasion of: d) Trachea e) Vagus nerve b) Recurrent laryngeal nerve c) Sympathetic chain Q#102: Which of the following causes Farmer's lung? Grain dust a) Asbestos Silica b) Coal dust c) Cotton fiber dust Q#103: Which of the following are the most predominant cells in Asthma? Monocytes a) Basiphils b) Eosinophils Neutrophils c) Lymphocytes Q#104: Which of the following enzyme will be raised, within 1 hour of the acute MI? a) Alkaline phosphatase LDH Troponin T b) AST c) CK-MB Q#105: Which among the following are seen in atherosclerosis? Foam cells a) Acanthocytes Macrophages b) Basophils c) Burr cells Q#106: Which of the following condition is related to smoking? Poly arteritis a) Thrombongitic migrants Poly arthritis e)Takayasu's arteritis b) Thrombongitic obiterans

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O#107: A	45 year old male patient was adm	sitted in hospital for hip fractu	re. He suddenly developed of	dyspnea & chest pain on
examinati	on his lower leg was swollen & show	wed deep vein thrombosis on D	poppler study. What is the mid	ost likely diaBuosis;
a	) Acute bronchitis	a,	Hospital acquired price in	, initia.
t	) Emphysema	e)	Pneumothorax	
C	) Fat embolism			e month. His lymph node
Q#108: A	15 year old boy presented with pro	oductive cough and bilateral lyi	nphagenopathy since last on	enosis?
	owed caseous necrosis rimmed by e	pithelioid cells and lymphocyte	Tuberculosis	<b>6</b>
	) Cat scratch disease	e)		
	) Leprosy	ε,	Wegner's grandiomictosic	
0#100- 4	) Sarcoidosis 25 year old football player collaps	ad in the ground while playing	football & died On autops	v the cause of death was
found out	to be due to Hypertrophic card	iomyonathy Which of the fo	llowing is the most commo	on cause of hypertrophic
cardiomy	pathy causing sudden death in you	ng athletes?	noving is the most comme	
	) Amyloidosis	d)	Genetic mutations	
	) Coxsackie virus		Hemochromatosis	
	Cardio-toxic drugs			
	e most common cause of dilated ca	ardiomyopathy is;		
	Down syndrome			
	) Fabry disease	d)	G6PD deficiency	
c'	Glycogen storage disease	, e)	Viral myocarditis	
Q#111: A	50 years old female comes to the ho	ospital with complaints of fever	, headache and jaw pain. The	e pain is intense along the
course of t	he superficial temporal artery. Wha	at will be the most likely diagno	osis?	
	Churg Strauss syndrome.	d)	Poly arteritis nodosa.	
	Giant cell arteritis.	e)	Wegener's granulomatosis	i .
c)	Kawasaki disease.			
Q#112: A	70 years old man came to hospit	tal with arterial biopsy report	. Biopsy finding shows elast	ic lamina fragmentation,
lymphocyt	es infiltrates and multinucleated gia	ant cells. What will be the most	: likely diagnosis?	
	Kawasaki disease	d)	Takayasu arteritis	
b)	Polyarteritis nodosa	e)	Wegeners granulomatosis	
c)	Temporal arteritis			
Q#113: Wh	ich disease shows microscopic find			
a)	Gaint cell arteritis	d)	Takayasu arteritis	
b)	Kawasaki disease	e)	Wegeners granulomatosis	
	Polyarteritis nodosa			
Q#114: Wh	ich of following is not present usua			
	Angina pectoris	d)		
•	Chronic IHD	e)	Sudden Cardiac Death	
c)	Coaction Of Aorta			
	w much percentage of Conroy arter			
	60%	d)		
	30%	e)	20%	
c)				
-	nt myocardial infraction common i		Young male	
	Infants	d)	Young male  None of the above	2.75
	Old age with diabetes mellitus	e)	Notice of the above	100
	Young female	1 - 6	2.	
	most sensitive and specific biomai		Lipid Profile	
	C Reactive Protein	d)		
	Creatinine Kinase	e)	Торошит	
	Lactate Dehydrogenase			
	t of myocardial infraction occurs in		Left Marginal Branches Of	Circumflex Conroy Artery
•	Left Anterior Descending Artery	d)		Circuitilex Control Artery
	Left Circumflex Conroy Artery	e)	Right Conroy Artery	
c)	Left Main Conroy Artery			
Q#119: Mod	lifiable risk factors in ischemic hea		Maria di Santa	
a)	Age	d)		
	Genetic Abnormalities	e)	Old Age	
c)	Gender		and the state of the state of CO	F found Hole a diaman
(#120: A 42	years old patient admitted in ch	est ward having complain of	productive cough with 100	i lever, ne is a diagnosed
	umonia. Doctor advises sputum s	specimen collection for invest	tigation. When is the best t	time for the nurse to the
	ollect the specimen?			
a)	After breakfast.			
b)	After lunch.			
c)	After dinner.			
d)	Bed time.			
e)	Early morning			