

1. A water sample was taken from a source that was supplying Nathiagali. On analysis it was declared unfit for human consumption on account of raised concentration of a chemical. What is the likely chemical which has resulted in making this water unfit?
  - A. Calcium
  - B. Chlorides
  - C. Iodine
  - D. Nitrite
  - E. Zinc
2. A dentist appointed in basic health unit reports an increased incidence of dental caries in the children of that area. What is the important preventive measure that he should suggest to the health authorities?
  - A. Boiling of water
  - B. Chlorination of water
  - C. Filtration of water
  - D. Fluoridation of water
  - E. Use of aquatabs in water
3. A well in a rural area was contaminated with an unhygienic source nearby. What is the disease more likely to be transmitted through drinking this well water?
  - A. Dental fluorosis
  - B. Goitre
  - C. Leishmaniasis
  - D. Trachoma
  - E. Typhoid
4. A family of four members in a village was using coal fire. One day they were brought to the hospital with memory loss, breathing difficulty and unconsciousness. What is the most probable diagnosis?
  - A. CO poisoning
  - B. CO<sub>2</sub> poisoning
  - C. Nitrogen dioxide poisoning
  - D. Nitrous oxide poisoning
  - E. Sulphur dioxide poisoning
5. A 30 years old woman had symptoms of vaginal itching and discharge. On examination she had white cheesy discharge adherent to walls of vagina with vaginal inflammation. The most likely causative organism is:
  - A. Candida albicans
  - B. HIV infection
  - C. Neisseria gonorrhoea
  - D. Treponema pallidum
  - E. Trichomonas vaginalis
6. STDs are on the rise all over the world. A young woman presented to a doctor in the emergency with bilateral conjunctivitis and high grade temperature. On examination she had swelling of eyelids and conjunctiva and copious purulent discharge. On laboratory smear diplococci were seen. What is the most likely diagnosis?
  - A. Gonococci
  - B. H. influenzae
  - C. Meningococci
  - D. Staphylococci
  - E. Streptococci
7. Disposal of waste in a proper manner is essential in preventing a large number of diseases. Which one of the following is a hygienic way of disposing solid waste and is more suitable if the waste contains more hazardous material and organic content?

- A. composting  
 B. dumping  
~~C.~~ incineration  
 D. Oxidation  
 E. sub grading
8. The two important waste disposal methods include sullage as well as sewage. What does sullage consist of?  
 A. Inorganic waste  
 B. Organic waste  
 C. Solid vegetable waste matter  
 D. Waste containing human excreta  
~~E.~~ Waste water from kitchen
9. Pakistan generates 0.5—2 kg hospital waste /bed/day. . What is the color code of plastic bag for disposing of microbial laboratory culture waste?  
 A. Black  
 B. Blue  
~~C.~~ Red  
 D. White  
 E. Yellow
10. The first and immediate step after disaster is classification of the injured. The treatment given to each injured depends on this classification. What is the approach of rapidly classifying the injured on the basis of severity of their injuries and likelihood of their survival with prompt medical intervention after disaster called?  
 A. Emergency care  
 B. First aid  
 C. Rehabilitation  
 D. Tagging  
~~E.~~ Triage
11. 8 October 2005 earthquake was a massive disaster that hit Pakistan. Several Governmental agencies as well as NGOs participated to combat the post disaster phase. What was the most important point they considered in order of preference?  
~~A.~~ Disposal of dead bodies  
 B. Disposal of solid waste  
 C. Provision of first aid  
 D. Provision of safe water and food  
 E. Prevention against infectious diseases
12. Several employees of a glass factory near Mansehra developed silicosis in the last one month. What is the most important control measure that you will recommend?  
 A. Improvement in personal hygiene  
 B. Pre-placement examination  
~~C.~~ Rigorous dust control  
 D. Substitution of some chemical  
 E. Xray chest of all workers monthly
13. The changes in the size of population are indicated by five stages of demographic transition. Pakistan is currently in which stage?  
 A. First stage  
 B. Second stage  
~~C.~~ Third stage  
 D. Fourth stage  
 E. Fifth stage
14. Amena, Gravida 2 with 32 weeks of gestation visited OPD for routine checkup. Her BP was found to be 170/95 mm Hg. What advise did the doctor give her to report immediately if she has:

- A. Backache
  - B. Lower abdominal pain
  - C. Swelling of feet
  - D. Tinnitus
  - E. Vomiting
15. A child of 1 year presents with muscle wasting, loss of subcutaneous fat with no signs of edema. His weight is below 60% of WHO standard. The mother gives history of not giving enough proteins and other nutrients to the child after six months of age. What is the likely diagnosis?
- A. Kwashiorkor
  - B. Marasmus
  - C. Marasmus & kwashiorkor
  - D. Protein deficiency
  - E. Vitamin B12 deficiency
16. A 28 years old lady having two kids wants to plan her family. On examination she is found to be anemic. She also gives history of ectopic pregnancy last year. Which is the best method of contraception for her ?:
- A. Copper T
  - B. Injectable contraceptives
  - C. Lippe's loop
  - D. Multi-load
  - E. Progestasert
17. A child aged 2 years presented with cough and difficulty in breathing. On examination the child had lower chest in drawing. According to IMNCI classification in which category will he be placed?
- A. Cough /cold only
  - B. No Pneumonia
  - C. Pneumonia
  - D. Severe pneumonia
  - E. Very severe disease
18. A 55-year-old female with chronic kidney disease (CKD) is undergoing her first hemodialysis session. During the session, she starts to feel nausea and complains of a headache. Her blood pressure is 150/90 mmHg. Which of the following is the most likely cause of her symptoms
- A. Hypokalemia
  - B. Dialysis disequilibrium syndrome
  - C. Hypercalcemia
  - D. Hypoglycemia
  - E. Fluid overload
19. A 45-year-old woman with a history of chronic NSAID use presents with fever, rash, and hematuria. She complains of generalized malaise and joint pain. Lab results show elevated eosinophils, increased creatinine, and BUN levels. Urinalysis reveals white blood cell casts. Which of the following is the most likely diagnosis
- A. Acute tubular necrosis
  - B. Post-streptococcal glomerulonephritis
  - C. Acute interstitial nephritis
  - D. Pre-renal azotemia
  - E. Nephrotic syndrome
20. What is the primary cause of hypernatremia
- A. Excessive sodium intake
  - B. Excessive water loss
  - C. Adrenal insufficiency
  - D. Hypothyroidism
  - E. Excessive water intake

21. A 14 years old patient presents with black coloured urine puffiness and oliguria. He had sore throat about two weeks ago. On examination pulse 80/min Blood pressure 160/100 and pedal edema. What is the likely diagnosis
- Henoch schonlein syndrome
  - IgA Nephropathy
  - Minimal change disease
  - Post streptococcal glomerulonephritis
  - SLE
22. A 40 year old male after head injury secondary to RTA sustained extradural hematoma which was managed by neurosurgeon. On third day of admission his electrolytes report  
Sodium: 125 mmol/L Potassium: 3.8 mmol/L calcium: 98 mmol/L  
What could be most likely cause of Hyponatremia
- Cerebral Metastasis
  - Hypoxemia
  - SIADH
  - Pulmonary infection
  - Hypothyroidism
23. A 46-year-old male with a history of obesity and physical inactivity presents with a 04-month history of polyuria, polydipsia, and weight loss  
His fasting blood glucose is 195 mg/dL HbA1c is 9%  
What would be the most appropriate initial management step for this patient
- Metformin 500 mg orally twice daily
  - Insulin glargine 10 units subcutaneously once daily
  - Lifestyle modifications (diet and exercise) alone
  - Gliclazide 30 mg orally twice daily
  - Pioglitazone 15 mg orally once daily
24. A 35-year-old female with a known history of Graves' disease presents to the emergency department with fever, palpitations, and altered mental status. On examination, she is found to have a heart rate of 140 bpm, a temperature of 39°C, and a blood pressure of 160/90 mmHg. Laboratory tests reveal elevated free T4 and suppressed TSH levels. Which of the following is the most appropriate initial management step for this patient
- Administer intravenous propranolol
  - Start oral methimazole
  - Administer intravenous hydrocortisone
  - Perform an urgent thyroidectomy
  - Start oral radioactive iodine therapy
25. A 45-year-old male with chronic kidney disease (CKD) presents with fatigue and generalized bone pain. Laboratory findings show elevated PTH, low calcium, and high phosphate levels. Which of the following is the most likely explanation for his elevated PTH
- Primary hyperparathyroidism
  - Secondary hyperparathyroidism
  - Tertiary hyperparathyroidism
  - Vitamin D deficiency
  - Familial hypocalciuric hypercalcemia
26. What is the primary cause of Sheehan's syndrome
- Traumatic brain injury
  - Postpartum hemorrhage
  - Infection
  - Autoimmune disorder
  - Pregnancy induced hypertension
27. Which of the following is the most common cause of primary adrenal insufficiency (Addison's disease)

- A. Congenital adrenal hyperplasia
  - B. Autoimmune adrenalitis
  - C. Adrenal haemorrhage
  - D. Infections (e.g., tuberculosis)
  - E. Pituitary adenoma
28. : A 52-year-old male with a history of chronic hypertension and diabetes mellitus is admitted to the hospital with signs of dehydration after several days of vomiting and diarrhea. On physical examination, he is hypotensive, tachycardic, and appears very lethargic. Lab results show elevated blood urea nitrogen (BUN) and creatinine levels. Urinalysis shows muddy brown casts. An ultrasound of the kidneys shows normal-sized kidneys with no evidence of obstruction. Which of the following is the most likely cause of the patient's renal injury
- A. Acute Glomerulonephritis
  - B. Acute Tubular Necrosis
  - C. Postrenal Obstruction
  - D. Chronic Pyelonephritis
  - E. Nephrotic Syndrome
29. Which one of the following is the drug of choice for the reduction of cerebral edema associated with cerebral infections because it has most potent anti-inflammatory action?
- A. Dexamethasone
  - B. Fludrocortisone
  - C. Mannitol
  - D. Methylprednisolone
  - E. Triamcinolone
30. Which one of the following is a contraindication to the use of oxytocin for induction of labour at term?
- A. Dead Fetus
  - B. Fetal Distress
  - C. Hypotonic uterine dysfunction
  - D. Prior history of low transverse C section
  - E. Twin gestation
31. A 60 years old man diagnosed with metastasized prostate cancer is started on depot preparation of goserelin. Which one of the following describes the mechanism of action of this drug?
- A. Blockade of gonadotropin receptors
  - B. Blockade of prostate testosterone receptors
  - C. Inhibition of aromatase enzyme
  - D. Inhibition of FSH and LH release
  - E. Inhibition of topoisomerase enzyme
32. A 25 years old pregnant female has asymptomatic bacteriuria. Which one of the following drugs given in a single dose can be effective in this condition?
- A. Cotrimoxazole
  - B. Erythromycin
  - C. Fosfomycin
  - D. Imipenem
  - E. Nitrofurantoin
33. Which one of the following adverse effects may be observed in 20% -30% of the patients taking Octreotide for more than six months?
- A. Hepatitis
  - B. Hypertension
  - C. Gallstones
  - D. Rash, Fever
  - E. Renal Failure

34. Which one of the following is the insulin preparation of choice in the treatment of diabetic ketoacidosis?
- A. Insulin Aspart
  - B. Insulin Glargine
  - C. Insulin Glulisine
  - D. NPH Insulin
  - E. Regular Insulin
35. A patient with type 2 diabetes is brought to the emergency with overdosage of antidiabetic medication. He is showing a picture of metabolic acidosis with raised plasma lactic acid levels. Which one of the following drugs is most likely cause of his symptoms?
- A. Acarbose
  - B. Metformin
  - C. Pioglitazone
  - D. Rapaglinide
  - E. Tolbutamide
36. Which of the following drugs if given in excessive amounts over long periods of time may result in a severely increased risk of infections and sepsis in the patient?
- A. Levothyroxine
  - B. Liotrix
  - C. Methimazole
  - D. Potassium iodide
  - E. Propranolol
37. Which one of the following statements is correct regarding minipills?
- A. Are absolutely contraindicated in postpartum period
  - B. Are associated with increased menstrual blood loss
  - C. Dose has to be taken on alternate days
  - D. Have adverse effects profile similar to combined oral pills
  - E. Less efficacious than combined oral pills
38. A 12-year-old boy develops hematuria two days after a sore throat. Light microscopy of the renal biopsy shows enlarged and hypercellular glomeruli. Electron microscopy reveals subepithelial "hump-like" deposits, and immunofluorescence demonstrates granular deposits of IgG, IgM, and C3 along the basement membrane. What is the most likely underlying pathogenesis of his condition?
- A. Deposition of anti-GBM antibodies
  - B. Circulating immune complex deposition
  - C. Mutations in collagen type IV
  - D. Alternative complement pathway activation
  - E. Deposition of IgA-containing immune complexes
39. A patient develops acute renal failure characterized by fever, rash, and eosinophilia one week after starting a course of antibiotics. Renal biopsy shows interstitial edema with numerous eosinophils and mononuclear infiltrates. Which type of hypersensitivity reaction is most consistent with these findings?
- A. Type I (Immediate)
  - B. Type II (Cytotoxic)
  - C. Type III (Immune Complex-Mediated)
  - D. Type IV (Delayed)
  - E. Type V (Stimulatory)
40. A 45-year-old patient presents with generalized edema and heavy proteinuria. A renal biopsy reveals diffuse thickening of the glomerular basement membrane without significant hypercellularity. Immunofluorescence shows granular deposits of IgG and C3 along the basement membrane. Electron microscopy reveals subepithelial immune complexes. Which of the following is the most likely diagnosis?

- A. Minimal Change Disease
  - B. Focal Segmental Glomerulosclerosis
  - C. Membranous Nephropathy
  - D. Membranoproliferative Glomerulonephritis
  - E. Acute Post-Streptococcal Glomerulonephritis
41. A 68-year-old man is diagnosed with prostatic adenocarcinoma confined to the prostate gland. His Gleason score is 8. Which of the following best describes the significance of this Gleason score?
- A. Low-grade tumor with excellent prognosis
  - B. Intermediate-grade tumor with moderate prognosis
  - C. High-grade tumor with poor prognosis
  - D. Indicates the tumor has metastasized
  - E. Reflects the tumor's response to hormonal therapy
42. Which of the following zones of the prostate gland is most commonly involved in benign prostatic hyperplasia leading to urinary obstruction symptoms?
- A. Peripheral zone
  - B. Central zone
  - C. Transitional zone
  - D. Periurethral zone
  - E. Anterior fibromuscular stroma
43. A 60-year-old male presents with hematuria and flank pain. Imaging reveals a mass in the upper pole of the left kidney. Histology shows clear cytoplasm tumor cells. Which paraneoplastic syndrome is most commonly associated with this type of renal cell carcinoma?
- A. Hypoglycemia due to insulin production
  - B. Polycythemia due to erythropoietin production
  - C. Cushing's syndrome due to ACTH production
  - D. Hypercalcemia due to PTHrP production
  - E. Hyponatremia due to ADH production
44. A 35-year-old woman presents with severe flank pain radiating to the groin. Imaging reveals a staghorn calculus occupying the renal pelvis. Which of the following types of renal stones is most likely responsible for this presentation?
- A. Calcium oxalate
  - B. Uric acid
  - C. Cystine
  - D. Magnesium ammonium phosphate
  - E. Calcium phosphate
45. A patient presents with high fever, flank pain, and dysuria. Urinalysis shows white blood cell casts. Which of the following organisms is the most common cause of acute pyelonephritis in otherwise healthy individuals?
- A. Staphylococcus saprophyticus
  - B. Klebsiella pneumoniae
  - C. Proteus mirabilis
  - D. Escherichia coli
  - E. Enterococcus faecalis
46. A 4-year-old child presents with an abdominal mass and hematuria. Genetic testing reveals a deletion on chromosome 11p13 affecting the WT1 gene. This child also has developmental abnormalities including aniridia and genitourinary malformations. Based on this presentation, which syndrome is the most likely associated with this tumor?
- A. Beckwith-Wiedemann Syndrome
  - B. Denys-Drash Syndrome
  - C. WAGR Syndrome
  - D. Li-Fraumeni Syndrome

## E. Von Hippel-Lindau Disease

47. A 65-year-old male presents with painless hematuria. Cystoscopy reveals a papillary growth within the urinary bladder. Biopsy of the lesion shows papillary fronds lined by transitional epithelium with varying degrees of nuclear atypia and mitotic activity. Which of the following histological features would most indicate progression to invasive carcinoma?
- Presence of squamous metaplasia
  - High nuclear-to-cytoplasmic ratio
  - Presence of lamina propria invasion
  - Increased mitotic figures at the epithelial surface
  - Loss of umbrella cells at the surface
48. A 70-year-old smoker presents with gross hematuria. A biopsy of the bladder mass reveals an exophytic tumor with finger-like projections. The tumor cells are high-grade with marked nuclear pleomorphism, and frequent mitoses, and are arranged in a disordered, haphazard fashion. Which of the following is the most appropriate description of this tumor?
- Low-grade papillary urothelial carcinoma
  - High-grade papillary urothelial carcinoma
  - Squamous cell carcinoma
  - Adenocarcinoma of the bladder
  - Urothelial carcinoma in situ
49. A 45-year-old woman presents with fatigue, cold intolerance, and amenorrhea. Physical examination reveals pale, dry skin and a delayed deep tendon reflex. Her past medical history includes a significant postpartum hemorrhage 10 years ago. Laboratory tests show low TSH, low ACTH, and low LH/FSH. Which of the following is the most likely diagnosis?
- Sheehan's syndrome
  - Addison's disease
  - Primary hypothyroidism
  - Polycystic ovary syndrome (PCOS)
  - Graves' disease
50. A 55-year-old male presents with bitemporal hemianopia and headache. MRI reveals a large sellar mass compressing the optic chiasm. Laboratory tests show elevated prolactin levels. Which of the following is the most likely type of pituitary adenoma?
- Prolactinoma
  - Corticotroph adenoma
  - Somatotroph adenoma
  - Gonadotroph adenoma
  - Thyrotroph adenoma
51. A 42-year-old woman presents with a painless thyroid nodule that has been gradually increasing in size over the past few months. Fine-needle aspiration biopsy reveals cells with nuclear grooves and intranuclear inclusions. Which of the following is the most likely diagnosis?
- Papillary thyroid carcinoma
  - Follicular adenoma
  - Medullary thyroid carcinoma
  - Anaplastic thyroid carcinoma
  - Hurthle cell carcinoma
52. A 30-year-old female presents with a painful, swollen thyroid gland and a low-grade fever following an upper respiratory tract infection. Laboratory tests show elevated ESR and low TSH with high free T4. The thyroid scan shows decreased uptake. Which of the following is the most likely diagnosis?
- Subacute granulomatous thyroiditis (De Quervain's thyroiditis)
  - Hashimoto's thyroiditis
  - Graves' disease
  - Riedel's thyroiditis



- E. Suppurative thyroiditis
53. A 40-year-old woman presents with weight gain, central obesity, facial rounding, and purple striae on the abdomen. Laboratory tests reveal elevated 24-hour urinary free cortisol and suppressed ACTH levels. An MRI shows an adrenal mass. Which of the following is the most likely cause of her condition?
- Adrenal adenoma
  - Pituitary adenoma
  - Ectopic ACTH production
  - Exogenous glucocorticoid use
  - Adrenal hyperplasia
54. A 25-year-old woman presents with abdominal bloating and pelvic discomfort. Ultrasound reveals a solid, cystic mass in the ovary. Serum markers show elevated CA-125. Histopathological examination reveals cells resembling fallopian tube epithelium. Which of the following is the most likely diagnosis?
- Serous cystadenocarcinoma
  - Mucinous cystadenoma
  - Dysgerminoma
  - Granulosa cell tumor
  - Teratoma
55. A 28-year-old male presents with a painless testicular mass. Serum tumor markers reveal elevated alpha-fetoprotein (AFP) and beta-human chorionic gonadotropin ( $\beta$ -hCG). Histopathology shows mixed germ cell tumor components. Which of the following is the most likely histologic subtype?
- Non-seminomatous germ cell tumor
  - Seminoma
  - Leydig cell tumor
  - Sertoli cell tumor
  - Testicular lymphoma
56. A 22-year-old woman presents with a firm, mobile breast lump that has been stable in size for the past year. Ultrasound shows a well-defined, solid mass with smooth borders. Which of the following is the most likely diagnosis?
- Fibroadenoma
  - Phyllodes tumor
  - Invasive ductal carcinoma
  - Fibrocystic changes
  - Intraductal papilloma
57. A 48-year-old woman presents with a newly discovered, firm, irregular breast mass. Mammography shows a spiculated lesion, and a core biopsy reveals invasive ductal carcinoma. Which of the following is the most significant prognostic factor in this patient?
- Lymph node involvement
  - Tumor size
  - Estrogen receptor status
  - HER2/neu status
  - Histologic grade
58. A 50-year-old woman with breast cancer undergoes a biopsy. Immunohistochemistry shows positive estrogen receptor (ER), positive progesterone receptor (PR), and HER2/neu overexpression. Which of the following prognostic markers is associated with a more favorable outcome?
- Positive estrogen receptor (ER) status
  - HER2/neu overexpression
  - High Ki-67 index
  - Lymphovascular invasion

- E. Negative progesterone receptor (PR) status
59. A 58-year-old man with a 15-year history of type 2 diabetes mellitus presents with progressive leg pain and ulcers on his feet that have been slow to heal. He has also noticed a decrease in sensation in his feet over the past few months. On examination, his feet are cool to the touch, and there is evidence of diminished peripheral pulses and decreased vibration sense. Which of the following complications is most likely contributing to his symptoms?
- Peripheral arterial disease (PAD)
  - Diabetic neuropathy
  - Diabetic retinopathy
  - Diabetic nephropathy
  - Charcot joint
60. A 45-year-old woman presents with persistent hypertension, muscle weakness, and fatigue. Laboratory investigations reveal hypokalemia, metabolic alkalosis, and an elevated serum aldosterone level with suppressed plasma renin activity. Imaging studies show a unilateral adrenal mass. Which of the following is the most likely underlying mechanism responsible for this patient's condition?
- Overproduction of cortisol due to adrenal hyperplasia
  - Increased secretion of aldosterone due to an adrenal adenoma
  - Ectopic aldosterone production from a non-adrenal tumor
  - Genetic mutation leading to constitutive activation of the mineralocorticoid receptor
  - Bilateral adrenal hyperplasia causing increased aldosterone secretion
61. The transplantation of human organs and tissues act was made in
- 1960
  - 1995
  - 2005
  - 2010
  - 2001
62. Hegar sign is present in
- Delivery
  - Pregnancy
  - UTI
  - Sodomy
  - Oposit to chadwicks sign
63. Sterility can occur in
- Male
  - Female
  - Both male and female
  - Sterile patient is capable of reproduction
  - Mumps is not the cause of starility
64. In artificial insemination homologues (AIH)
- Semen is of husband
  - Semen is of donor
  - Semen may be of husband or donor
  - Artificial insemination is of three types
  - Artificial insemination ion should be done in the absence of a nurse.
65. In virginity
- Hymen in intact
  - Hymen is Torn
  - Hymen may be intact or torn
  - Hymen is cribriform.
  - Labia minora hard, insensitive and blue in colour.

66. Sodom  
A. Not found in Pakistan  
B. Derives its name from the city of Sodom  
C. Offender is call passive agent  
D. Legalized in India  
E. Perinial abrasions never present
67. Abortion  
A. Expulsion of products of conception before six months of gestation  
B. At any periods of gestation before full term  
C. Before three months of gestation  
D. Female after abortion is not anaemic  
E. After abortion cervix is hard and closed
68. A boy with recurrent UTIs, who can't pass urine in single stream, can have  
a. Posterior urethral valves  
A. Horse shoe kidney  
B. Single kidney  
C. All of above  
D. None of above
69. The goal of management of D.M type1 is to maintain fasting sugar level between  
A. 110-140  
B. 80-120  
C. 70-80  
D. 120-150  
E. None of above
70. Which paremeters must be used in assesment of short stature  
A. Child's height  
B. Sibling's height  
C. Parent's height  
D. Mid parental height  
E. All of above
71. A 45 years old unmarried female presented in Surgical OPD having painless lump in right upper outer quadrant of breast for last 3 months gradually increasing in size. Examination reveals hard mass, immobile attached to deeper tissue. There is also a lump in right axilla. What is likely diagnosis?  
A. Traumatic fat necrosis  
B. Fibroadenoma  
C. Ca-breast  
D. Breast abscess  
E. Phylloides Tumor
72. A 45 years old female presented in surgical OPD having a lump in breast for 2 months. Lump is hard, fixed to deeper structures and non tender. There is also a lump in ipsilateral axilla. What is next step in management?  
A. Mammography  
B. Ultrasound breast  
C. Open biopsy  
D. FNAC  
E. MRI
73. A 30 years old male patient presented with infertility. When sperm ejaculate analysis was done it came to be azoospermia and when further investigated it was found that there is obstruction in the ejaculatory duct. Which hormonal essay is done in this case?  
A. Serum testosterone

- B. Serum prolactin  
 C. Luteinizing hormone  
 D. Prostate Specific antigen  
 E. Follicle stimulating hormone
74. A 70 years old male presented with hesitancy, intermittent urination & nocturia, his USG shows 40 grams prostate. What treatment you will advise to patient?  
 A. Urethral Catheterization  
 B. Anticholinergics Drugs  
 C. Alpha Blockage Drugs  
 D. TURP  
 E. Antibiotics
75. A 20 years old male presented with acute urinary retention. Urethral catheterization tried in emergency department but not successful. What will be next step of management?  
 A. Retrograde Urethrogram  
 B. Suprapubic Catheterization  
 C. Optical Urethrotomy  
 D. Urethroplasty  
 E. Laparotomy
76. A 60 Years old male presented with painless hematuria with passage of clots, he is also having irritative lower urinary tract symptoms, and he is smoker for the last 40 years. What is probable diagnosis?  
 A. Enlarged Prostate  
 B. Bladder Tumor  
 C. Bladder Stone  
 D. Urinary Tract Infection  
 E. Urethral stricture
77. A 30 years male old patient has a Road traffic accident half hour ago, he is presented in emergency department with gross haematuria, his B.P is 100/80, his pulse is 100/min. On examination he had bruise in his right flank. What will be next step of management?  
 A. Exploratory Laparotomy  
 B. CT Scan Abdomen + Pelvis  
 C. Blood Transfusion  
 D. Right Nephrectomy  
 E. X-ray erect abdomen
78. A 60 years old patient presented with Gross haematuria & his CT Scan showed right renal mass which is 4 cm & confined to kidney there is no lymph node involvement & no metastasis. What is the stage of the disease?  
 A. T<sub>1a</sub> NOMO  
 B. T<sub>2a</sub> NOMO  
 C. T<sub>1b</sub> NOMO  
 D. T<sub>2b</sub> NOMO  
 E. T<sub>3</sub> NOMO
79. A 30 years old male patient presented with 30 mm Renal pelvis stone. What treatment will you offer to patient?  
 A. ESWL  
 B. Conservative Treatment  
 C. PCNL  
 D. URS  
 E. Pyelolithotomy
80. Which of the following medications is commonly used in the medical management of miscarriage?

- A. Methotrexate
  - B. Mifepristone
  - C. Misoprostol
  - D. Progesterone
  - E. None of these
81. Which of the following is true regarding a missed miscarriage?
- A. Cervix is open with heavy bleeding
  - B. Fetal tissue is expelled immediately
  - C. Fetus is non-viable, but there are no symptoms of miscarriage
  - D. It usually occurs after 20 weeks of pregnancy
  - E. All of the above
82. Which of the following types of miscarriage is associated with an open cervix and passage of products of conception?
- A. Threatened miscarriage
  - B. Inevitable miscarriage
  - C. Missed miscarriage
  - D. Complete miscarriage
  - E. None of these
83. A patient presents with vaginal bleeding and abdominal pain at 10 weeks of pregnancy. On examination, the cervix is closed, and an ultrasound shows a non-viable fetus. What is the most likely diagnosis?
- A. Threatened miscarriage
  - B. Inevitable miscarriage
  - C. Missed miscarriage
  - D. Complete miscarriage
  - E. None of these
84. What is the most common cause of first-trimester miscarriage?
- A. Infections
  - B. Chromosomal abnormalities
  - C. Trauma
  - D. Maternal autoimmune disorders
  - E. None of these
85. Which of the following is NOT a risk factor for ectopic pregnancy?
- A. Pelvic inflammatory disease (PID)
  - B. Intrauterine device (IUD) usage
  - C. History of tubal surgery
  - D. Polycystic ovarian syndrome (PCOS)
  - E. None of these
86. A 28-year-old woman presents with lower abdominal pain, vaginal bleeding, and a positive pregnancy test. A transvaginal ultrasound shows an empty uterus. What is the next best step in the management?
- A. Serum  $\beta$ -hCG measurement
  - B. Immediate laparoscopy
  - C. Methotrexate administration
  - D. Dilation and curettage (D&C)
  - E. None of these

87. Which of the following treatments is appropriate for an unruptured ectopic pregnancy with low  $\beta$ -hCG levels and no cardiac activity?
- A. Methotrexate
  - B. Laparotomy
  - C. Salpingectomy
  - D. Expectant management
  - E. None of these
88. Which of the following is a contraindication for methotrexate therapy in the treatment of ectopic pregnancy?
- A. Serum  $\beta$ -hCG level  $>5000$  mIU/mL
  - B. Presence of fetal cardiac activity
  - C. Hemodynamically stable patient
  - D. Both a and b
  - E. All of the above
89. What is the main purpose of serial  $\beta$ -hCG measurements in a suspected case of ectopic pregnancy?
- A. To confirm intrauterine pregnancy
  - B. To assess the viability of the pregnancy
  - C. To monitor the resolution of ectopic pregnancy
  - D. To determine the appropriate timing for delivery
  - E. None of these
90. Which of the following is a common symptom associated with menopause?
- A. Amenorrhea
  - B. Hot flashes
  - C. Breast tenderness
  - D. Weight loss
  - E. None of these
91. Which hormone predominantly decreases during menopause?
- A. Progesterone
  - B. Follicle-stimulating hormone (FSH)
  - C. Estrogen
  - D. Luteinizing hormone (LH)
  - E. None of these
92. Hormone replacement therapy (HRT) in menopausal women is contraindicated in which of the following conditions?
- A. History of deep vein thrombosis (DVT)
  - B. Hot flashes
  - C. Low bone density
  - D. Premature ovarian insufficiency
  - E. None of these
93. A 52-year-old postmenopausal woman presents with vaginal bleeding. What is the most important next step in her management?
- A. Prescribe estrogen therapy
  - B. Pap smear
  - C. Endometrial biopsy
  - D. Ultrasound of the pelvis
  - E. None of these

94. Which of the following is a long-term health risk associated with menopause due to estrogen deficiency?
- A. Hypothyroidism
  - B. Osteoporosis
  - C. Hypertension
  - D. Type 1 diabetes
  - E. None of these
95. Which of the following is a major risk factor for endometrial cancer?
- A. Multiparity
  - B. Use of oral contraceptives
  - C. Obesity
  - D. Early menopause
  - E. None of these
96. What is the most common type of endometrial cancer?
- A. Clear cell carcinoma
  - B. Papillary serous carcinoma
  - C. Endometrioid adenocarcinoma
  - D. Mucinous carcinoma
  - E. None of these
97. Which hormone is most implicated in the development of endometrial cancer?
- A. Progesterone
  - B. Estrogen
  - C. Testosterone
  - D. Follicle-stimulating hormone (FSH)
  - E. None of these
98. In endometrial cancer staging, which stage involves spread beyond the uterus but confined to the pelvis?
- A. Stage I
  - B. Stage II
  - C. Stage III
  - D. Stage IV
  - E. None of these
99. Which genetic condition is associated with an increased risk of endometrial cancer?
- A. BRCA1 mutation
  - B. Lynch syndrome (Hereditary nonpolyposis colorectal cancer)
  - C. Turner syndrome
  - D. Down syndrome
  - E. None of these
100. Which of the following HPV strains are most commonly associated with cervical cancer?
- A. HPV 6 and 11
  - B. HPV 16 and 18
  - C. HPV 31 and 33
  - D. HPV 45 and 52
  - E. None of these
101. What is the most common presenting symptom of cervical cancer?
- A. Postcoital bleeding

- B. Pelvic pain
- C. Abdominal swelling
- D. Dysuria
- E. None of these

102. In cervical cancer staging, which stage involves extension beyond the uterus but not to the pelvic wall or lower third of the vagina?

- A. Stage I
- B. Stage II
- C. Stage III
- D. Stage IV
- E. None of these

103. Which of the following is the most common clinical feature of polycystic ovary syndrome (PCOS)?

- A. Hirsutism
- B. Amenorrhea
- C. Obesity
- D. Infertility
- E. None of these

104. Which hormone is typically elevated in patients with PCOS?

- A. Progesterone
- B. Luteinizing hormone (LH)
- C. Follicle-stimulating hormone (FSH)
- D. Estrogen
- E. None of these

105. Women with PCOS are at increased risk for which of the following conditions?

- A. Osteoporosis
- B. Endometrial cancer
- C. Breast cancer
- D. Hypothyroidism
- E. None of these

106. Which chromosomal abnormality is most commonly associated with complete hydatidiform moles?

- A. 69, XXX
- B. 69, XXY
- C. 46, XX or 46, XY (entirely paternal in origin)
- D. 47, XXX
- E. None of these

107. What is the treatment of choice for high-risk gestational trophoblastic neoplasia (GTN)?

- A. Surgical removal of the uterus
- B. Single-agent chemotherapy
- C. Multi-agent chemotherapy
- D. Radiation therapy
- E. None of these

108. Which of the following is TRUE about partial hydatidiform moles?

- A. They contain triploid chromosomal material



- B. They have a higher risk of developing into choriocarcinoma than complete moles
- C. They always present with vaginal bleeding
- D. Fetal parts are never present
- E. None of these

109. Which of the following is a known risk factor for developing a hydatidiform mole?

- A. Nulliparity
- B. Advanced maternal age
- C. Use of oral contraceptives
- D. Twin pregnancy
- E. None of these

110. Which imaging modality is considered the gold standard for diagnosing uterine fibroids?

- A. Pelvic X-ray
- B. Hysteroscopy
- C. Transvaginal ultrasound
- D. MRI of the pelvis
- E. None of these

111. Which of the following medications is commonly used to reduce the size of uterine fibroids before surgery?

- A. Progesterone
- B. Estrogen
- C. Gonadotropin-releasing hormone (GnRH) agonists
- D. Nonsteroidal anti-inflammatory drugs (NSAIDs) Answer: c) Gonadotropin-releasing hormone (GnRH) agonists
- E. None of these

112. Which of the following complications is associated with large uterine fibroids?

- A. Endometrial hyperplasia
- B. Ureteric compression and hydronephrosis
- C. Ovarian torsion
- D. Vaginal atrophy
- E. None of these

113. In uterovaginal prolapse, which part of the pelvic floor weakens, leading to the descent of pelvic organs?

- A. Endometrial tissue
- B. Uterine ligaments
- C. Pelvic diaphragm
- D. Round ligament
- E. None of these

114. What grading system is commonly used to classify the severity of pelvic organ prolapse?

- A. Bishop score
- B. POP-Q (Pelvic Organ Prolapse Quantification) system
- C. Apgar score
- D. Gleason score
- E. None of these

115. Uterovaginal prolapse is most commonly associated with:

- A. Nulliparity
- B. Multiple vaginal deliveries
- C. Cesarean sections
- D. Oophorectomy
- E. None of these

116. Which of the following is considered first-line medical therapy for mild to moderate endometriosis?

- A. Clomiphene citrate
- B. Nonsteroidal anti-inflammatory drugs (NSAIDs)
- C. Gonadotropin-releasing hormone (GnRH) agonists
- D. Oral contraceptive pills
- E. None of these

117. Which of the following antibiotics is the first-line treatment for bacterial vaginosis?

- A. Metronidazole
- B. Clindamycin
- C. Fluconazole
- D. Doxycycline
- E. None of these

118. Which of the following is a characteristic finding of bacterial vaginosis?

- A. Thick, white, curd-like discharge
- B. Frothy, greenish-yellow discharge
- C. Thin, greyish-white discharge with a fishy odor
- D. Blood-stained discharge
- E. None of these

119. Ovulatory problems are cause of infertility

- A. 30%
- B. 25%
- C. 20%
- D. 15%
- E. None of the above

120. Following investigation is done to determine tubal function in endometriosis p +

- A. Hysterosalpingography
- B. Laparoscopy and Dye test
- C. Doppler ultrasound
- D. Pelvic X-ray
- E. None of these

# Block L Key

## Women Medical College Abbottabad MCQs Response Sheet

Name: \_\_\_\_\_  
Subject: \_\_\_\_\_ Class: \_\_\_\_\_

Instructions: Shade circles with Blue/Black ink. Do not use color for shade, number & signature handover back the response sheet along with MCQs question paper after completing section 1

□ □ □ □

Date: \_\_\_\_\_

MAKE DARK MARKS



Properly fill only one best answer for each question  
Note: improper filling or two circles filled will be considered wrong

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Candidate Signature

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Examiner Signature

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