KHYBER MEDICAL UNIVERSITY, PESHAWAR	PAPER CODE
Exam Roll No.: THIRD PROFESSIONAL MBBS ANNUAL EXAMINATION 20	
Name: BLOCK I (CVS AND RESPIRATORY)	C
Max. Marks: 120	
Time Allowed: 120 min.  Note: • Attempt all questions. Select the best answer from given choices. Handover response sheet along with questions. Select the best answer from given choices. Handover response sheet along with questions and properties of more than one option shall not be considered.	estion paper after attempting
A LICE RILLE / RI ACK ink only. Do not use RED Color. Filling of more than one option shall be	
Contusions and abrasions of the chest and abdomen, Fracture ribs, Rupture of Internal organs are	signs seen in
a. Traumatic Asphyxia b. Mechanical Asphyxia c. Hanging d. Diowning	
2. Which of the following is specific antidote for Digitalis Polsoning?	
a. Novocain b. Benzene c. Quinine d. Azithromycin e. None of the above	
3. Paradoxical respiration is seen in: a. Prowning b. Flail chest c. Laceration of lung d. Pneumothorax e. Traumatic a	sphyxia
a. Drowning b. Flail chest C. Laceration of lung	
4. Ladder-rung tears are seen in: a Aorta h Carotids c. Esophagus d. Lungs e. Trachea	
a, Aorta	
Absolute proof of drowning is:     Cutis anserine    b. Emphysema aquosum	e. Wet clothes
de chis alle the design female 18 years old with history of psychiatric illness, was brought for au	utopsy examination. The
doctor examined it and declared it an antemortem hanging. Which of the following option below it	s best to rule out
antemortem hanging?	
d Petechiae hemorrhage	e. Salivary Dribbling
	pen in color. Death in this
Offensive rotten eggs smell was noted upon opening of the body. Post mortem invitely is blosh as	en in colore decimal
type of scenario will most probably be due to?  2. Carbon dioxide poisoning b. Carbon monoxide poisoning c. Chlorine gas poisoning	
a, Carbon dioxide poisoning	
a latinist begins the body is been suspended from a remarkable height with a ligature on neck le	ading to instant death by
enusing bangman's fracture, which of the following option below is best to describe such a rectar	e?
a Dislocation of C5 vertebra b. Fracture of C2 vertebra c. Fracture of C3 vertebra	
d. Freeture of transverse process e. Spondylolisthesis of C2 over C3	
On which area of respiratory system netechial hemorrhages can be observed in drowning.	of trachea
a Alveoli b. Bronchiole c. Bronchi d. Sub piedral tissues	of tracines
10. What is the usual position of knot in case of typical hanging?  C. Left side of neck d. Occiput e. Rig	tht side of neck
Behind ear b. Chin c. Left side of neck d. Occiput e. Rig 11. Myocardial infarction occurs when there is blockage or more in the lumen of one or	more of the main coronary
arteries. a. 60% b. 65% c. 70% d. 75% e. 80	%
12. The commonest cause of death in case of drowning is	<b>-</b>
a Hypoxic Hypoxia. b. Stagnant Hypoxia. c. Histolytic Hypoxia. d. Alloxic Typoxia.	e. Anoxia.
13. When more than two person overpower an individual, it is called:	e. Burkin
A	ncidence of CHD is:
14. Students of 4th year of Medical College are doing research of this restaurch of the heart disease. They have observed that risk factor which is most significantly associated with the interest of the state of the heart disease. They have observed that risk factor which is most significantly associated with the interest of the state of the	icial factors
a. Decreased Physical activity b. Hypertension c. Smokeless tobacco d. Alcoholism e. So  15. A 49 years old black African male smoker with positive family history of hypertension presented w	
15. A 49 years old black African male smoker with positive family matery of the particular case headache. His blood pressure was 140/90 mg hg. The modifiable risk factor in this particular case	is:
Enmily history (1. ampkille C. Of	i.C
a. Male sex b. African race c. Farmy history a. on the sex b. African race c. Farmy history a. On the sex b. African race c. On the sex b. African race c. On the sex	most likely to be common in
he given situation?	
CA Propoblis d. Cystic Fibrosis e. Elliphyselli	ia
a. Tuberculosis B. Asthma C. CA Biolicinus  17. A 10 years old boy presented with high grade fever, chills, aches, cough and generalized weakness	s. He was diagnosed as a
case of influenza. The most dreaded complication is:	
a. Encephalitis b. Pneumonia c. Toxic shock syndrome d. Reye's syn	drome
a La Lundhul hamarchagar	and and the standard of
4.2. A 26 year old nationt presented to you with chronic inflammatory disorder of the airways associa	ted with episodes of
wheezing, breathlessness, chest tightness and coughing. What is the most likely common diagnost	SIST
h Tuberculosis c. Cystic fibrosis d. CA Bronchus e. E.	mphysema
19. Which strain of the influenza virus/viruses is usually responsible for flu Pandemics?	una R & C
a. Type B b. Type D c. Type A d. Type C e. T	ype B & C
20. A person aged 40 years, working as a laborer in grain market for the last 25 years presented with	was
of respiratory infections in the last 1 year. X-ray showed pulmonary fibrosis. The likely diagnosis of a Tuberculosis b. Farmer's lung c. Silicosis d. Silicotuberculosis e. B	was: Jaggassosis
a. Tuberculosis b. Farmer's lung c. Silicosis d. Silicotuberculosis e. B	- PD 0330313

The state of the D. Desturate is force.
21. The host/hosts of the B. Pertussis is/are:  a. Humans b. Poultry c. Human & Cats d. Pigs  22. A male patient presents to OPD with complaints of change in voice for the last 2 years. There is history of voice is also a chronic smoker. Indirect laryngoscopy shows a Vocal Cord Polyp involving anterior one third of the right to of t
a. Humans b. Poultry c. Human & Cats d. Pigs
22. A male patient presents to OPD with complaints of change in voice for the law a
is also a chronic smoker. Indirect laryngoscopy shows a Vocal Cord Polyo in a Years, There's Cows
the best treatment option?
the best treatment option?  a. Microlaryngoscopy b. Reassurance c. Speech therapy d. Steroids e. Voice Rest persistent and progressive Flexible .Endoscopy shows a fungating, ulcerative lesion involving anterior one third of the right cord. What is the most likely diagnosis in this case is.?  a. Arytenoid granuloma b. Cord papilloma c. Squamous cell carcinoma years.
a. Microlaryngoscopy  b. Reassurance  c. Speech therapy  d. Steroids  e. Voice Rest  vocal cord. What is the most likely diagnosis in this case is.?  a. Arytenoid granuloma  b. Cord papilloma  c. Squamous cell carcinoma vocal cord  d. Vocal cord.
possistent and progressive Florible Endersons shows a few partitions complaining of change in the Police of the Po
persistent and progressive residue. Endoscopy snows a rungating, ulcerative lesion is
Today and things and those many diagnosis in this case is.
a. Arytenoid granuloma b. Cord papilloma c. Squamous cell carcinoma vest in one third one third.
e. Vocal cord nodule
a. Arytenoid granuloma b. Cord papilloma c. Squamous cell carcinoma vocal cord e. Vocal cord nodule  24. A 25 years old lady has presented to OPD for follow up visit after total thyroidectomy with complaints of cough while drived most likely diagnosis in this case? a. Laryngeal trauma b. Sub glottis stenosis c. Vocal cord nodule d. Vocal cord palsy  25. A 16 year old boy in respiratory distress has brought to emergency room by his parcets.
water and change in voice. On examination indirect larvingoscopy shows the complete complete the complete compl
most likely diagnosis in this case?
a. Laryngeal trauma b. Sub plottis steposis c. Vocal and the distribution of the distr
a. Laryngeal trauma  b. Sub glottis stenosis  c. Vocal cord nodule  d. Vocal cord palsy  neck. On examination the swelling is increasing gradually and his saturation is decreasing. What is the most appropriate life  a. Laryngeal trauma  b. Sub glottis stenosis  c. Vocal cord nodule  d. Vocal cord palsy  e. Vocal cord dedense in this tory of fire arm injury in the most appropriate life  a. Endotracheal intubation  b. IV steroids  c. Oxygenation inhalation  d. Observation  d.
neck On examination the curelling is increasing a little emergency room by his parents with the examination the curelling is increasing a little emergency room by his parents with the examination the curelling is increasing a little emergency room by his parents with the emergency room by h
rick. On exhibition in each setting is increasing gradually and his saturation is decreased with history of fire and the saturation is decreased.
Saving intervention in case? What is the most injury intervention in case?
26. A middle age high school teacher has presented to outpatient clinic for change in voice after thyroid surgery. Her indirect a. Cricothyroid b. Lateral Cricoarytenoid c. Posterior Cricoarytenoid d. Thyroarytenoid d. Thyroarytenoid d. Thyroarytenoid a. Special content of the condition of the
laryngoscopy is normal, the doctor reassured her about the condition. What is it
a. Cricothyroid  b. Lateral Cricoarytenoid  c. Posterior Cricoarytenoid  d. Thyroarytenoid  d. Thyroarytenoid  high grade fever for the last two days. The patient has difficulty in breathing as well. X Ray Neck lateral view shows the state of the condition. What is the most likely muscle involved in this case?  e. Vocalis  sign. What is the most likely diagnosis in this case?
27. A 15 years old male patient presents to emergency room with complete d. Thyroarytenoid d. Thyroarytenoid
high grade fever for the last two days. The patient has difficulty in the threat e. Vocalis
sign. What is the most likely diagnosis in this case?
a. Epiglottitis D. Laryngotracheobronchitis C. Laryngot M. I.
a Detail in Ingellianty
e. Retropharyngeal Abcess  28. During teaching about informed consent to medical students, a student asks, "what should we do if a patient does not fully  a. Ask another medical professional to explain the price."
understand the risks and benefits of a medical procedure 21
a. Ask another medical professional to explain the risks and benefits to the patient
b. Convince the patient that the procedure is safe, regardless of their concerns
d. Provide the necessary information in a simplified manner and ensure the patient to understands before proceeding  e. Proceed with the procedure, the patient consent is not necessary if they signed the formation in the procedure of the proced
e. Proceed with the procedure, the project of the patient to understands before proceeding
e. Proceed with the procedure, the patient consent is not necessary if they signed the form  29. What is the primary role of leadership in good is all they signed the form
3. To distante estate and process of leadership in medical education?
C. To focus cololings in the second s
30. Which of the following is a key aspect of effective management in the specific of the following is a key aspect of effective management in the following is a key
a. Avoiding any changes to the state of critetive managment in medical education?
b. Discouraging innovation and creativity among educators
d Micromone
a collaboration
31. "Patients with chronic migraines receiving mindfulness-based therapy experience a reduction in the frequency and intensity of headaches"? In the context of the PICO criteria, "P" stands for:
a. Patients with chronic migraines
d. Reduction in headache fragues was discontinuous. Beduction in headache fragues was discontinuous.
d. Reduction in headache frequency and intensity  b. Mindfulness-based therapy c. Patients without chronic migraines c. Patients without chronic migraines c. Patients without chronic migraines
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as  a. Academic dishapachy. b. Academic integrity. d. Placing.
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as  a. Academic dishonesty  b. Anonymity  c. Academic integrity  c. Patients without chronic migraines  e. Conventional migraine treatment  d. Plagiarism  e. Wrongful assumption
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d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption 33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty  b. Anonymity  c. Academic integrity  d. Plagiarism  e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?
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d. Reduction in headache frequency and intensity  2. The act of presenting someone else's work or idea as own is considered as  a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?  a. Arrhythmogenic right ventricular dysplasia b. Dilated cardiomyopathy e. Restrictive cardiomyopathy  d. Hypertrophic cardiomyopathy  34. A 40-year-old female presents with a history of chronic cough, dyspnea, and wheezing she are activated as constants.
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?  a. Arrhythmogenic right ventricular dysplasia b. Dilated cardiomyopathy  b. Dilated cardiomyopathy  c. Patients without chronic migraines e. Conventional migraine treatment d. Plagiarism e. Wrongful assumption d. Plagiarism e. Wrongful assumption examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation. b. Dilated cardiomyopathy c. Patients without chronic migraines e. Conventional migraine treatment d. Plagiarism e. Wrongful assumption examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation. b. Dilated cardiomyopathy e. Restrictive cardiomyopathy e. Restrictive cardiomyopathy c. Hypertensive heart disease c. Onventional migraine treatment d. Plagiarism e. Wrongful assumption e. Wrongful assumption e. Wrongful assumption c. Patients without chronic migraines e. Conventional migraine treatment
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d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?  a. Arrhythmogenic right ventricular dysplasia b. Dilated cardiomyopathy  c. Hypertensive heart disease  d. Hypertrophic cardiomyopathy  34. A 40-year-old female presents with a history of chronic cough, dyspnea, and wheezing. She reports worsening symptoms during the night and after exposure to cold air or strong odors. On physical examination, there are diffuse wheezing and prolonged expiration. Which of the following medications is the most appropriate initial treatment for her condition?  A 40-year-old female presents with a history of chronic cough, dyspnea, and wheezing. She reports worsening symptoms during the night and after exposure to cold air or strong odors. On physical examination, there are diffuse wheezing and c. Oral bronchodialaters  d. Sodius d.
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?  a. Arrhythmogenic right ventricular dysplasia b. Dilated cardiomyopathy c. Hypertensive heart disease  d. Hypertrophic cardiomyopathy  34. A 40-year-old female presents with a history of chronic cough, dyspnea, and wheezing. She reports worsening symptoms during the night and after exposure to cold air or strong odors. On physical examination, there are diffuse wheezing and colored prolonged expiration. Which of the following medications is the most appropriate initial treatment for her condition?  a. Home oxygen thereto patent presents with sudden chest pain, shortness of breath, and chromoglycate e. Theophyllines
d. Reduction in headache frequency and intensity  32. The act of presenting someone else's work or idea as own is considered as a. Academic dishonesty b. Anonymity c. Academic integrity d. Plagiarism e. Wrongful assumption  33. A 70-year-old female presents with gradually worsening exertional dyspnea, orthopnea, and lower extremity swelling. On examination, there is elevated jugular venous pressure, hepatomegaly, and bilateral crackles on lung auscultation.  Echocardiography reveals dilated cardiac chambers and decreased ejection fraction. What is the most likely diagnosis?  a. Arrhythmogenic right ventricular dysplasia b. Dilated cardiomyopathy  34. A 40-year-old female presents with a history of chronic cough, dyspnea, and wheezing. She reports worsening symptoms during the night and after exposure to cold air or strong odors. On physical examination, there are diffuse wheezing and prolonged expiration. Which of the following medications is the most appropriate initial treatment for her condition?  a. Home oxygen therapy b. Inhaled steroids c. Oral bronchodialaters d. Sodium chromoglycate e. Theophyllines c. Hoppyllines c. Patients without chronic migraines e. Conventional migraine treatment d. Plagiarism e. Wrongful assumption e. Wrongful as
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Page 2 of 8

	PAPER CODE		
36. A 30-year-old male, previously healthy has no significant medical history. On present the present the previously of the previously	, presents with sudden-onset	pleuritic chest pain and	I dyspnea. He is a non-smoker and ds and hyperresonance on the left
has no significant medical history. On p	onysical examination, there is	ט פנופטיפט טופטנוו ייטטווי	us and hyperresonance on the re-
side of the chest. Which of the following a. Acute bronchitis b. Pleural effusion		nonary embolism	e. Pulmonary hypertension
<ul> <li>a. Acute bronchitis</li> <li>b. Pleural effusion</li> <li>37. A 60-year-old male smoker presents w</li> </ul>			
37. A 60-year-old male smoker presents w	Ath sudden crusning chest pa	n radiating to his left at	ofirming the diagnosis in this
his blood pressure is 160/90 mmHg. V	vnich of the following enzyme	s is most specific for cor	mirming the diagnosis in this
patient?	L CK NAD	Tananala I	
a. Creatine kinase (CK)		. Troponin I	
d. Lactate dehydrogenase (LDH)	e. Aspartate aminotransfer		
38. A 45-year-old female with a history of			
accessory muscles to breathe. What i			e asthma exacerbation?
a. Albuterol/ipratropium nebulization	b. Inhaled corticosteroids	c. Montelukast	
d. Oral prednisone	e. Theophylline		
39. A 55-year-old man with a history of h	ypertension complains of inte	rmittent claudication in	his left leg. Physical examination
reveals decreased femoral pulses and a. Chronic venous insufficiency b. Dec			
	p vein thrombosis	. Peripheral artery disea	se (PAD)
	oliteal artery entrapment synd	rome	
40. A 65-year-old male presents with a c	nronic cough, weight loss, feve	er and occasional haeopt	isis of three months duation. Chest
ray reveals a cavitary lesion in the b. Lung cancer	right upper lobe. Which of the		
	c. Tuberculosis	d. Bronchiectasi	s e. Pneumonia
41. A 70-year-old woman presents with	progressive dyspnea, orthopne	ea, and paroxysmal noctu	irnal dyspnea. On examination,
there is an elevated jugular venous pa. Pericarditis b. Aortic stenosis	c. Heart failure	on lung auscultation. Wh	at is the most likely diagnosis?
	with chronic cough sputum n	d. Mitral regurgitation	e. Coronary artery disease
<ol> <li>A 50-year-old male smoker presents irreversible airflow obstruction. Whi</li> </ol>	at is the most likely diagnosis?	roduction, and wheezing	. Pulmonary function tests reveal
a. Asthma b. Ch	ronic obstructive pulmonary d	(CODD)	-24
a. Bronchiolitis obliterans			c. Pulmonary fibrosis
43. A 45-year-old obese woman with a	history of hypertension comple	ins of intermittent nelvis	e. Lung cancer
monitoring reveals episodes of supr	aventricular tachycardia Whic	nof the following manage	ations and dizziness. Holter
	termine termine termine	To the following maneu	vers can be used to terminate the
a. Carotid sinus massage b. Co	oughing c. Cold water imn	nersion d. Deep breath	ing o Volcelus
44. A 35-year-old Female tailor present	s with sudden-onset pleuritic c	hest pain and dyspnea SI	ing e. Valsalva maneuver
and the state of t	cely diagnosis?		ic is a smoker and is taking oral
a. Pneumonia b. Pneumothorax	c. Costochondritis	d. Pleuritis	e. Pulmonary embolism
45. A 65-year-old male with a history o	f hypertension and diabetes pr	esents with sudden-onset	-1-1-4 11 1
	.00 mmg. and an irrent i i co	an of the bood charge - l-	fe i i ii
marction. Which of the following f	nedications should be administ	ered within the first three	hours to improve outcomes?
D. Dipyridailiole	C. Departing of Streng	OVIDACO - Ti	
46. A 50-year-old smoker with a histor	y of dyslipidemia presents with	sudden-onset, severe, te	aring chest pain that radiates to
the back. Which of the following is a. Acute myocardial infarction	the most likely diagnosis?		
d. Gastroesophageal reflux disease	<ul> <li>b. Aortic dissection</li> <li>e. Peptic ulcer disease</li> </ul>	c. Pulmonary embolism	
	cute chest pain that radiates to	Li-1-6	Charles and the second
47. A 45-year-old man presents with a revealed T wave inversions in from	tal leads, and Troponin Lwas no	nis left arm and jaw. He i	s diaphoretic and anxious. His ECG
a. Aortic dissection b. Gastroesc	phageal reflux disease	c. Stable angina	ring is the most likely diagnosis?
d. Prinzmetal angina e. <u>Unstable</u>		c. Stable angina	
48 Which of the following option is co		onchiectasie?	
a. Antibiotics b. Bronchoo		antiblotics and bronchod	lakasa
	o definitive cure	antibiotics and bronchod	lators
49. According to modified Jone's Crite		of the following are mine	or critosia?
a. Fever, Arthralgia, +ve acute phase re	eactants and Prolonged P-R inte	erval in FCG	citeriar
b. Fever, Arthritis, Prolong P-K Interva		c. Fever, Sore throat, Ar	throlain and mind can
d. Arthralgia, Prolong PR interval in EC		raised FSR	thraigia and raised CRP
e. Fever, Erythema Marginatum, Subc			
50. A 9 months old baby brought to t			mination nationalis F Alice of Land
and has hepatomegaly. On Preco	rdium examination, you hear a	abnormal heart sound	You advised and ECHO and it
showed Ventricular Septal Defect			
	Ejection Systolic Murmur	c. Mid Diastolic Murmi	
	Machinery Murmur	S. ITHE PIESCOIL MUTHIC	
51. A 10 months old child has been d		ala. You want to counsel +	he mother about danger sizes
Which of the following can be the		mar row want to confisel (	ne mother about danger signs.
	b. Vomiting, diarrhea a	nd cough c Reluctant t	o feed, vomiting and cough
a. Fever above 101 °C and vomiting			o reed, vomiting and cough is, cough and diarrhea
<ul> <li>d. Reluctant to feed, lethargic and co</li> </ul>	IIVUISIOIIS	e. Convuision	a, cough and diamited

PAPER CODE C  a. H. Influenzae type b b. E. Coli c. Group B strentosceri et Strent Avecas
a. H. Influenzae type b b. E. Coli c. Group B streptococci d Steph Aurous
53. The heroditage is b. E. Coli c. Group B streptococci d. Staph Aureus e. Streptococci
Down Sind Sind Sind Sind Sind Sind Sind Sin
54 Regarding Bronshieliste Egarding Bronshieliste Cystic ru
a. Antiviral agents must be given to all patients b. Sedatives have beneficial role c. Mostly symptomatic.
55. Neonatal Screening for cystic fibrosis is done by  a. Chest X – ray by March 2018.
in the anatomy museum, the model human lungs was those on the table at first allowed the control childride
56. In the anatomy museum, the model human lungs was there on the table, at first glance you noticed a depression or notch on a left Notch to the left lung. The notch is called as:
a. Left Notch b. Pulmonary Notch
A 32-years old patient who weight 275 IB comes to the dected office. On the surface of the
locate the apex of the heart:
a. At the level of the sternal angle d. In the right fifth intercostal space  b. In the left fourth intercostals space  c. In the left fifth intercostals space
a. In the right fifth intercostal space
30 year old mountaineer presented to a hospital. In a mountainous area 12 hours after assending to 4 con-
the second of the way had all the medical and the second of the second o
of the following is the most likely diagnosis with an ovugen saturation of 050% of room siz 3
b. Cerbral edema c Mountain sickness d Bulmonass edema
e. pulmonary embolism
59. A young hiker started climbing the mountain with great enthusiasm. After some time he became breathless. Hyperventilation
can read to which of the following?
a. Metabolic acidosis b. Metabolic Alkalosis c. Pulmonary edema d. Respiratory acidosis e. Respiratory alkalosis
60. A 60-year-old patient with a history of recurrent heart attacks is prescribed an anti-PCSK9 drug. How does this medication
work
a. By blocking the absorption of dietary cholesterol b. By increasing the production of HDL
c. By inhibiting the degradation of LDL receptors  d. By inhibiting the release of VLDL
By inhibiting the removal of LDL from blood stream
A patient narrates his history to the physician in OPD of experiencing muscle pain while taking statins for about one year. A
medical student present in OPD asks his teacher about the cause -effect relationship between statins and muscle pains. The
physician explains that statins may result in which one of the following?
a. Cause depletion of myoglobin in muscle tissues b. Increase free radicals in muscle tissues
c. Inhibit the production of CoQ in muscle tissues d. interfere with actin-myosin filaments function in muscle tissues
e. Interfere with iron levels of myoglobin in muscle tissues
62. A 48 year old man with family history of IHD is having increased level of LDL. He is asked by his doctor to lower the level of
LDL. What is the role of LDL in the pathogenesis of atherosclerosis?
a. Transform into lipid laden foam cells b. Reduces the risk of IHD c. Mobilize smooth muscle cells
d. Helps in the formation of fibrous cap e. Increased HDL levels
63. Pneumonia is an infection that inflames the in one or both lungs. The infected parts may fill with fluid or pus,
causing cough, fever, chills, and difficulty breathing.
a. Bronchi <u>b. Alveoli</u> c. Pleura d. Trachea e. Diaphragm
64. The most common cause of secondary hypertension is
a. Renal disease b. Pheochromocytoma c. Coarctation of aorta d. Pregnancy e. Stress
65. Which type of cardiomyopathy is more common in young people and involves the replacement of heart muscle cells by fatty
and fibrous tissue, increasing the risk of arrhythmia and sudden cardiac death?
a. Dilated cardiomyopathy b. Hypertrophic cardiomyopathy c. Restrictive cardiomyopathy
d. Arrhythmogenic right ventricular dysplasia e. Takotsubo cardiomyopathy
66. Which of the following plasma biochemical marker is the most sensitive of myocardial cell damage
a. Aspartate aminotransferase b. CK-MB c. Lactate dehydrogenase d. Myoglobin e. Troponin 1  67. A 45 year old male patient was admitted in hospital for hip fracture. He suddenly developed dyspnea & chest pain. On
examination his lower leg was swollen & showed deep vein thrombosis on Doppler study. What is the most likely diagnosis?
a. Acute pronchius b. Emphysemb
-68. Dead space increases in which of the following?  e. Hypertension d. Hypotension e. Bronchoconstriction
a lung collance D. Pullionally edellia C. Hypertension
59. Which of the following is the best parameter for diagnosis of asthma?  69. Which of the following is the best parameter for diagnosis of asthma?  6. Republication of the above the following is the best parameter for diagnosis of asthma?
a Pronchoccony () Full blood Could E. Nolle of the above
a. FFV1/FVC b. ABG c. Brunchoscopy  70. A female infant is born prematurely at 28 weeks' gestation. Shortly after birth she developed signs of dyspnea, cyanosis and place of the line Momentage Disease is made. Which of
tachypnea. She is placed on ventilator for assisted breatning, and a diagnosis of Hyaline Methodate Disease is meet
the following is the most probable cause of this syndromer
a, Bronchopulmonary dysplasia b. Lack of fetal pullionary maturity and deficiency and deficiency
c. Interventricular brain hemorrhage d. Necrotizing enterocolitis e. Patent ductus arteriosus

Page 4 of 8

71. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure	
71. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  71. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  71. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  71. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  72. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  73. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  74. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  75. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  76. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  77. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  78. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  79. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  79. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  79. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure  79. A 59-year-old man experiences sudden severe chest pain that radiates to his back. On physical examination his blood pressure chest pain that radiates his back pain that radiates his back.  79. A 59-year-old man experiences	
71. A 33 70 is 170/110 mmHg and puisas pass most likely occurred in his aorta?	
c. Vasculius	
a content	
a. Aneuryand  a. Aneuryand  pseudomonas aeruginosa  Pseudomonas aeruginosa  Pseudomonas aeruginosa  A 5-years-old boy is brought to the GP with complaints of fever, runny nose and productive cough for the last 10 days.  Complete blood picture revealed marked lymphocytosis. Culture of nasopharyngeal swab yielded no growth on blood agar  Complete blood picture revealed marked lymphocytosis. Culture of nasopharyngeal swab yielded no growth on blood agar  Complete blood picture revealed gram  Like the possible pathogen for the disease?	
72. A 5-years-old boy is brossed marked lymphocytosis. Culture of hasopriary rigeal swab yielded no growth on blood agar	
72. A 5-years-old boy is brought to the object of the obje	
- What coiling be the bossible barriegon in the	
negative pleonics b. Chlamydia c. Haemopinios invocation that resolves with rest. The patient most probably	
negative pleomorphic bacteria. What costs are negative pleomorphic bacteria by the negative pleomorphic bacteria. What costs are negative pleomorphic bacteria by the negative pleomorphic by the negative pleomorphic bacteria by the negative pleomorphic bacteria by the negative pleomorphic bacteria by the negative pleomorphic by the nega	
Acute coronary synutonic	
a unstable angina	
74. A 40-years-old hypertensive presented to rise the patient is cold and clammy. ECG is done which revealed 51 segment elevation. The	
74. A 40-years-old hypertensive presented to detect to cold and clammy. ECG is done which revealed ST segment elevation. The and blood pressure is 80/60 mm Hg. The patient is cold and clammy. ECG is done which revealed ST segment elevation. The and blood pressure is 80/60 mm Hg. The patient is cold and clammy. ECG is done which revealed ST segment elevation. The and blood pressure is 80/60 mm Hg. The patient is cold and clammy. ECG is done which revealed ST segment elevation. The and blood pressure is 80/60 mm Hg. The patient is cold and clammy. ECG is done which revealed ST segment elevation. The	
diagnosis of Myocardia information diagnosis of Myo	
this patient?	
a. Creatinine kinase  b. Lactate derivations  condition which  lesions. The ESR was raised and diagnosis of rheumatic fever with rheumatic heart disease was made. In this condition which  lesions. The ESR was raised and diagnosis of rheumatic fever with rheumatic heart?  c. Cumma	ı
lesions. The ESR was raised and diagnosis of rheumatic level with the lesion in heart?	
	nσ
a. Anitskow body  76. A-60-years old man was brought to pulmonology OPD with history of persistent cough with industrial the last 5 months, and an increase in gobiet cells with lymphocytic infiltration. What is the likely	.0
shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of breath and wheeze. Patient gave history of smoking 15 cigarettes per day. The needed approach by shortness of the sh	
diagnosis in this case?	
a. Asthma b. Bronchiectasis c. Bronchogenic carcinoma d. Chronic bronchitis e. Emphyseina  77. Gastrointestinal tuberculosis is characterized by abdominal pain and diarrhea accompanied by more generalized symptoms  78. Gastrointestinal tuberculosis is characterized by abdominal pain and diarrhea accompanied by more generalized symptoms  79. Gastrointestinal tuberculosis is characterized by abdominal pain and diarrhea accompanied by more generalized symptoms	of
fever and weight loss. What is the most common site affected by this disease.  d. Rectal Region e. Antral end of stomach  a. lleocecal region b. First part of Duodenum c. Jejunum d. Rectal Region e. Antral end of stomach	,
and are all box had road traffic accident, trauma to spinal cord and resultant loss of autonomic and motor removes	
the level of injury. What is the most common type of shock encountered in the level of injury. What is the most common type of shock encountered in the level of injury.	
a. Anaphylactic b. Cardiogenic c. Hypovoletnic d. Heart one year. He is retired from construction business. There	2
79. A 66-years-old man presented with increasing dyspited for the past one years are rails on auscultation in both lungs. Sputum cytology showed no atypical cells only ferruginous bodies. These findings are	
most likely suggestive of prior exposure to which of the following environmental agents:	
a. Arsenic b. Asbestos crystals c. Beryllium. d. Fumes with iron particles. e. Silica dust.	
80. Which of the following is one of Jone's major criteria? a. Flevated CRP b. Elevated ESR c. Fever d. Pancarditis e. Previous RF	
a. Elevated CRP b. Elevated ESR c. Fever d. Pancarditis e. Previous RP 81. A 41-year-old female presents with recurrent severe headaches and increasing visual problems. Physical examination reveals	;
her blood pressure to be 220/150. Her symptoms are most likely to be associated with:	
a. Medial calcific sclerosis b. Arteriosclerosis obliterans c. Hyperplastic arteriolosclerosis	
d. Hyaline arteriolosclerosis e. Thromboangiitis obliterans  82. A 72 year old woman presents to your clinic with a complaint of an acute onset of right side headache. She also has acute and	d
progressive vision deficit in her right eye. You promptly admit her to the hospital, requesting a biopsy of her distal right	
temporal artery. What histologic features do you suspect will be present in the pathology report?	
a. A "lumpy-bumpy" pattern of immunoglobulin deposition in the basement membrane by immunofluorescent stain	
b. A linear pattern of immunoglobulin deposition in the basement membrane by immunofluorescent stain c. Fibrinoid necrosis and PMN infiltration d. Granulomata and giant cells e. Cystic medial necrosis	
83. A factor that stimulates the proliferation of smooth-muscle cells and also relates to the pathogenesis of atherosclerosis is	
a. Platelet-derived growth factor β c. Interleukin 1 d. Interferon α	
e. Tumor necrosis factor  84. A 10-year-old girl develops subcutaneous nodules over the skin of her arms and torso 3 weeks after a bout of acute	
pharvneitis, one maintests choremonn movements and pegins to complain of!-!-!-!	
movement. A friction rub is near a on adscutation of the criest. Which of the following serum laboratory findings is most	
Characteristic of the disease affecting this patient;	
d. Flevated C reactive protein e. Elevated antistreptolysin O level	
85. A 45-year-old man was rushed to the hospital following a large transmural	
the left ventricle. The develops on diogethe shock, which of the following microscopic findings is most likely to be present in	
this area 4 days following the onset of his chest pain?  a. Fibroblasts and collagen deposition  b. Capillary proliferation and macrophages	
c. Myofiber necrosis with neutrophils  d. Granulomatous inflammation  e. Perivascular lymphocytic infiltrates	
c. renvascular lymphocytic innitrates	

PAPER CODE C	Radial
PAPER CODE C  86. A 48 year old man suffers the sudden onset of severe tearing pain in his mid-upper back. His blood pressure is 210/120	, madioi
pulses are markedly unequal in intensity. The most likely diagnosis is:	
a. Thromboangiitis obliterans b. Coarctation of the aorta c. Acute myocardial infarction	
	lay art
a so a seld was developed mysecretical inforction. Coronary artery angiography demonstrates thrombus of left circumstances.	lex art
J FO 700/ atomosis of provimal circumtley and LAD What COMBILATION CONTINUE has a second continue and the first transfer and transfer and the first transfer and the first transfer and the first transfer and transfer and transfer and the first transfer and transfer	
a. Ventricular fibrillation b. Pericarditis and rupture c. Aneurysms d. Embolisation of thrombus	
a. Verticular infinitation	
and A 57 years old man complains of long-standing respiratory distress due to occupational asbestos exposure. On examin	iation
he does not have fever, palpable lymph nodes or abnormal lung findings. Which one of the following is likely to be foun	d on
chest radiograph?	
a. Pulmonary vascular prominence b. Pleural blebs c. Enlarged right ventricle	
d. Acute bronchopneumonia e. Diffuse interstitial pulmonary fibrosis with irregular or linear opacities	
89. After a hemicolectomy to remove a colon carcinoma, a 53-year-old man develops respiratory distress. He is intubated a	nd
receives mechanical ventilation with 100% oxygen. Three days later, his arterial oxygen saturation decreases. A chest	
radiograph shows increasing opacification in all lung fields. A transbronchial lung biopsy specimen shows hyaline memb	anes
lining distended alveolar ducts and sacs. Which of the following most likely represents the fundamental mechanism	
underlying these morphologic changes?	
a. Reduced production of surfactant by type II alveolar cells b. Disseminated intravascular coagulation	
c. Aspiration of oropharyngeal contents with bacteria d. Leukocyte-mediated injury to alveolar capillary endothelium	
e. Release of fibrogenic cytokines by macrophages	
90. One day after moving into a new apartment, a 25-year-old man experiences acute onset of fever, cough, dyspnea, head	
and malaise. The symptoms subside over several days when he visits a friend in another city. On the day of his return he	
the physician. There are no remarkable findings on physical examination. A chest radio graph also is unremarkable. Which	h of
the following is most likely to produce these findings?	
a. Antigen-antibody complex formation b. Attachment of antibodies to basement membrane c. Generation of prostaglandins d. Release of histamine e. Release of leukotrienes	
c. Generation of prostaglandins  d. Release of histamine e. Release of leukotrienes  1. A 58-year-old smoker presents with weight loss and cough. Physical exam reveals a mild lid lag on the left and a pinpoint	
pupil, scattered rhonchi throughout all lung fields that clear with coughing, and an increased anteroposterior diameter. I	lacad
on these findings, you suspect the patient has:	asea
a. A Pancoast tumor b. A thoracic outlet syndrome c. The superior vena caval syndrome	
d. Obstructive lung disease without primary cancer e. Obstructive lung disease with metastatic cancer from another primary	site
92. What does the ECG shows in prinzmetal angina	3.1.0
a. ST segment elevation b. ST segment depression c. Absent p wave d. Prolonged PR interval e. B and C	
93. Which of the following is a complication of atherosclerosis that can occur anywhere in the body?	
a. Aneurysm b. Arrhythmia c. Angina d. Asthma e. Arthritis	
94. Which of the following is a common clinical complication of untreated infective endocarditis?	
a. Diabetes mellitus b. Lung cancer c. Myocardial infarction d. Osteoporosis e. Stroke	
95. A 60 years old female comes to the hospital with complaints of fever, headache and jaw pain. The pain is intense along the	ie
course of the superficial temporal artery. What will be the most likely diagnosis?	
a. Churg Strauss syndrome b. Giant cell arteritis c. Kawasaki disease d. Poly arteritis nodosa	
e. Wegener's granulomatosis	
96. Haemophilus influenzae is an important cause of upper respiratory tract infections and sepsis in children. There are six	
encapsulated strains of H. influenzae based on distinct polysaccharide antigens on their capsular surfaces. What is the me prominent strain accounting for the majority of cases of invasive disease?	ost
<ul> <li>a. H influenzae Type a</li> <li>b. H influenzae Type b</li> <li>c. H influenzae Type c</li> <li>d. H influenzae Type d</li> <li>e. H influenzae Type p</li> <li>occurs in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs, whereas reactivation lesions usually occur in the lower lobes of lungs.</li> </ul>	e e
apices. The parenchymal exudative lesion and the draining lymph nodes together represents which of the phenomenon?	the
a. Caseation Necrosis b. Erythema Nodosum c. Ghon complex d. Scrofula e. Tubercle	
98. Tuberculosis can spread to any tissue of the body and cause signs and symptoms accordingly. One such entity is Scrofula.	
Which of the following statement best defines scrofula?	
a. Caseous granuloma in lung tissue  b. Involvement of cervical lymph nodes by tuberculosis	
c. Involvement of bone marrow with tuberculosis  d. Involvement of gastrointestinal tract by tuberculosis	
e. Necrosis of mesenteric lymph nodes due to tuberculosis	
99. A young 20-years-old girl, with large full thickness burns was brought to emergency. What is the most common type of sl	
gg. A young 20-years on girl, with an getter than 1990 of Si	IOCK
she is prone to develop?  a Aparhylactic b. Cardiogenic c. Hypovolemic d. Neurogenic e. Obstructive	
a. Anaphylactic b. Cardiogenic c. Hypovolemic d. Neurogenic e. Obstructive  100.A 67-year-old man presents with sudden left leg pain, absence of pulses, and a cold limb. His past medical history is significant to a real legislic analysis. Which of the following is most likely assessed in the control of the control o	
for coronary artery disease and a small aortic aneurysm. Which of the following is most likely responsible for development	icant
for coronary artery disease and a small dorde sites years and a small dorder site years	it of
a cold limb in this patient?  b. Arterial thromboembolism  c. Cardiogenic shock	
- Acute myocardial infarction b. Arterial thomasermousting	
d. Deep venous thrombosis e. Ruptured aortic aneurysm	

		I AI LIVE	ODL		
101.Which of the following	ng is NOT considered to	o be a diffuse alvec	olar hemorrhage	syndrome?	
a. Microscopic polyangitis	b. Goodpast	ure's syndrome	c. Hyperser	isitivity pneumoni	tis
d. Systemic scleroderma	ė. ANCA-ass	ociated granuloma			
102.The morphologic fea	tures of diffuse interst	itial (restrictive) dis	seases of the lun	g include:	
a. Alveolar filling by lymp		Atrophy of bronchi		c. Honeycoi	mbing of lung
d. Proliferation of type I		Proliferation of alve			
103.A 26-year-old man is	rushed to the emerge	nonceration or aive	tolal capillaries	ound to the chest	during a fight. His
temperature is 37°C	(08 6°E) respirations	ancy room arter sus	railing a grap w	uro is 90/50 mm H	g. A chest X-ray shows air in
the right played ena	so Which of the fellow	ire 35 per minute,	and blood press	nested complication	on of pneumothorax arising in
the right pleural spa	ce. which of the follow	ing pulmonary cor	iditions is the ex	pected complication	on or price means
this patient?	I of I d			d Emmuom	e. Pyothorax
a. Atelectasis	b. Chylothorax	c. Diffuse alv	eolar damage	d. Empyema	tmost he was discharged
104.A 63-year-old man p	resented to emergence	y department with	atrial fibrillation	. After getting trea	itment, he was discharged
home on warfarin to	prevent atrial thromb	us formation. Whi	ch of the followi	ng is the best test	o monitor the anti-coagulant
effect of warfarin?					
<ul> <li>a. Activated partial thror</li> </ul>	mboplastin time b.	Bleeding time	c. Fibrin de	gradation product	5
d. Fibrinogen levels	e.	Prothrombin time			I il i Mhich
105.A 38-year-old femal	e patient with arrhythr	nia was prescribed	a drug which is	known as Class III a	intiarrhythmic agent. Which
of the following is the	he most likely prescribe	ed drug?			
a. Amiodarone	b. Bisoprolol	c. Digoxin		Quinidine	e. Verapamil
106.A 57-year-old man	with a history of hypert	ension is diagnose	d with prinzmeta	al angina. Which of	the following drugs is
contraindicated in t					
a Bisoprolol h Dilt	iazem c Isosorbid	le dinitrate	d. Nifedipii	ne e. '	/erapamil
107 A 60-year-old man	come to the emergency	with dizziness and	d palpitations. He	e woke up this mor	ning with an intermittent
nounding consistion	in his chest. He hecam	ne light-headed and	had to sit down	i to avoid passing o	ut. The patient was diagnosed
with a cardiac arrhy	thmia and started on a	drug known to pro	olong the QT inte	erval. However, the	OLUB IZ 9220CIATED MITH O
lower incidence of	torsade de nointes that	n other OT-prolong	ing agents. Which	h of the following	medications was most likely
used in this patient		Total Cr present			<b>7</b>
	Independent C	Lidocaine	d. Procaina	amide e	Verapamil 🕌
400 4 CO	es petient same to OPD	for checkup Inves	tigation revealed	d high triglyceride l	evel and low HDL. Doctor
advised him linid lo	wering drug After two	days the patient ca	ame back with fl	ushing and dyspep	sia. The drug responsible for this
condition is	Weiling arag. Airer two	days in a panant			
	b. Ezetimib.	c. Gemfibro	zil. d.	. Niacin e.	Simvastatin
100 A FO year old man	recently diagnosed wit	h exertional angina	started treatme	nt with verapamil,	one tablet daily. Which of the
109.A 59-year-old man	ind smooth muscle Ca <sup>2+</sup>	channels is most li	kely the main sit	e of action of this t	ii uB i
a. Ligand-gated channe	ols in cell membranes	b. 9	Store Store-oper	ated channels in m	itochondria
c. Voltage-gated chann	ols in the sarconlasmic		Voltage- gated cl	nannels in cell men	nbranes
	1 . 11	eticulum			
	1 1 - 1 - amanes	anay donartment w	vith a 3-day histo	ory of worsening sh	ortness of breath and a
		vesto is 18 breaths	/min. Physical e	Kallilliation reveals	Dilaccial palities,
1 1 1 1 1 1 1	Aire Laboratory studios	are unremarkable	except for an el	evateu serum crea	Citilite of Tro IIIP) at (passing)
valvular apnormali	of the following medic	ations is most appr	opriate to mana	ge this patient's co	ndition?
a. Amlodipine	D. Puroserniue	ve heart failure, co	ndition that may	facilitate the appe	earance of toxicity include
111.In a patient receivi	b. Hypernatremia	c. Hypocalc	emia C	I. Hypomagnesemi	a e. All of the above
a. Hyperkalemia 112.The primary mecha	D. Hypernaticina	nrevents coagulat			
=112.The primary mecha	anism by which hepari	ore IV and XI h	Direct inhibition	of prothrombin to	thrombin conversion
a. Activation of antithro	ombin iii to innibit racto	ion of antithrombi	n III mediated in	hibition of factor X	a and thrombin
c. Direct factor Xa inhib		ion of antitinomon	i ili ilicalatea ili		
e. Inhibition of factors >	(Ila and XIIIa	t dame aboutd	he avoided here	use of a risk of ha	rming the fetus?
e. Inhibition of factors > 113.If a patient is pregr	ant, which of the follo	Wing drugs should	d. Niacin	e discondition of the	. Pravastatin
	h Ezotimine C	Fenomorate	u. Macin		. 11000000
114 Which of the follow	ving is an important eff	ect of chronic ther	apy with loop u	Elevation of nulr	monary vascular pressure
a. Decreased urinary ex	cretion of calcium b.	. Flevation of ploof	piessure	c. Elevation of pun	nonary vascalar pressure
		Teratogenic actio	n in pregnancy		and stones A saroful workup
115 A 50-year-old man	has a history of freque	nt episodes of ren	al colic with calc	ium-containing re	nal stones. A careful workup concentrations of calcium salts in
the tubular urine T	he most useful diureti	c agent in the trea	tillelit of recurr	Citt Calciain stones	
Chloribalidana	b. Diazoxide c.	Ethacrynic acid	d. Manni	tol e. Spiron	olactone
a. Chiorthalluone	· -ling treatme	ent for tuberculosis	s experienced a	change in urine co	olor to red after two months of
116.A 4U-year-old patie	he following drugs is t	he most probable	cause of this sid		
therapy. Which of t	ne following drugs is c nlazid c. Pyrazina	mide d.	Rifampicin	e. Strept	omycin
a. Ethambuto b. Isor	ilaziu c. ryi aziila				

PAPER CODE C

disseminated military tuberculosis. He is started on conventional 6 month regimen of anti-tuberculosis diagnosed loss and had normal visual acuity. Two month later at following and bulline Anti TB DRUG. The causative drugs acts on Mycobacterium Tuberculosis by which of the following causes the activation of DNA dependent RNA Polymerase

a. Inhibition of Arabinosyl Transferases

d. Inhibition of 30 S Ribosomal subunit

b. Inhibition of 30 S Ribosomal subunit

c. Inhibition of Arabinosyl Transferases

d. Inhibition of JNA dependent RNA Polymerase

inflammatory effects of corticosteroids

a. Theophylline

b. Zafirlukast

c. Salbutamol

a. Azithromycin

b. Levofloxacin

c. Linezolid

d. Moxifloxacin

e. Futicasone

a. Bromohexine

b. Codeine

c. Diphenhydramine

d. Guaiphenesin

e. Nascopine