Rehman Medical College

Ketaserin

Metoclopramide Ondansetron MBBS 4th Prof. EOSE-K Roll No: 19-Date: 21/11/2023

М	CQs		GIT & Hepatobiliray-2		
-	Meite	your Roll No. on So		Time: 2hrs	Martin
•			Biven choices by filling the circle in Se	oring about	Marks: 11
1.					
	ECG. V	Which of the following	is receiving chemotherapy for Ca- Breast. of receiving anti-emetics she developed QT- drugs is she receiving for prophylaxis of vom	She has been given a prolongation & torsad	enti-emetics for le-de-pontes on
	b.	Corticosteroids	Tot propriylaxis of vom	iting?	37
	ď.		е		
100	e.	Ondansetron			
2.	а.	Domperidone	urgery received damage to the gastric innerval of the following would be most helpful in fac	tions of vagus nerve, ca liitating gastric motility	using delay in
	ь.	Famotidine			
	C.	Hydroxyzine Misoprostol	a		
		Omenravole			Section and and
3.	Which	erly woman with a reco urn. She is currently tal of the following choice	ent history of myocardial infarction is seeking a king several medications, including aspirin, sim is should be avoided in this patient.	medication to treat he evastatin, metoprolol a	er occasional nd Lisinoprii.
		Calcium carbonate Calcium citrate	The second secon		
	c.		THE RESERVE THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN CO		
	d.	Ranitidine	I G Der Berger Hill A. David T. B. C. D. C.	reamfort he was diaa	gnosed as a
4.	case or	Mesalamine	with bloody diarrhea, Abdominal pain and di th could be prescribed for her to cure his symp	toms	14
	b. c.	Omeprazole Octreotide	a		
	ď.	Aprepitant	d omeprazole by his physician for some gastric p	roblem. The action of	omeprazole
5.	Q. A 64-ve	ar-old man is prescribed	domeprazole by his physician for some gostile p		
٠.	depend	s upon:			
	h	Competitive manoritors	of enzyme		
6	Which o	one of the following drug	with H ₂ receptor antagonist psine triphosphatase as is given to the patient of cirrhosis to prevent to its given to the patient of cirrhosis to prevent	t the encephalopathy:	
100					
		Ketanserin Lactulose	С		
	4 1	ansoprazole		h has caused abortio	n. Which of
4 ,	e. L	pregnant lady was pres	scribed a drug for epigastric discomfort which trointestinal problems is contraindicated in p	regnancy?	4
7. /	he follow	ring medications for gast	Jonnesana P.		
		icium carbonate cusate	е		
	- Ear	notidine			
- 0.04	e. Mis	oprostoi 	hydrochloric acid secretion in the stomach	15:	
			A Line Marchael Addition of the Control of the Cont		
	Hyps	cine compound	C		
_	Lanco	ncazole			
			La Jacobi La Recordada	. I flow dishable or	estroneresis
e.	Misop	rostol	is an appropriate drug for gastroesophage	eal reflux, diabetic go	asu operesis,
Out of	the follo	Wing Willer one of cur			
evere	emesis Devame	thasone			
Ø.	Dipheno	xvlate			

d

	10. W	hich	of the following day			coloration of	the tongue	100
		a.	of the following drug has Amoxicillin	s been known to	cause ais	Coloracion of	the tongue.	1
		b,	Bismuth compounds					The same of
		Ç.	Lamondina	b				
	/2023	0,	Omeprazole	D				4
	11. W	hich	Ranitidine	Fork Un	228W			anelbla for
	m	etab	of the following drugs	may inhibit the	hepatic	microsomal	P450 enzyme res	ourside for warfar
		a.	Cimetidine	21-14				
		b.	Ethanol	- roomillinie				
		ç,	Phenobarbitone	а				
		a.	Phenytoin					
	12. A	45-v	Rifampicin	· · · · · · · · · · · · · · · · · · ·	(B) w(.c)	aloda paysett	Hills I american	
	H	e wa	ear-old male presents wit s prescribed other medic	in neart burn and	abdomin	al distress. He	was diagnosed as	case of peptic ulce
		a.	Gynecomastia	mes along with th	meudine	. Which could	be side effect of th	is medicine?
		b.	Fever				and the selling and	
		ç.	Rash	a				
		a.	Stimulant of p450 Heart burn	ď				
	13. A	pati	ent with severe coop	e adminent to tox				03.0%
			ent with severe COPD wa The sucralfate forms a ba	arrier on the surf	. He was	put on sucraits	ete for the treatme	nt of stresss related
	d				ice or uice	er against rick	& pepsin action. I	ne parrier is formed
		a.	Sucralfate physically con	unteracts of HCL			THE PARTY OF THE PARTY	
		О.	Negatively charged sucr Sucraifate inhibits the se	ose sulfate binds	to positive	ely charged pro	teins on the base o	fulcer
		***	Sucralfate increases the	ecretion or err				
		e.	Sucraltate increases the	secretion of provi	and and inc		b	
	14. la	n cas	e of hill journey, antimoti	on sickness dries	are best	dministered a	te subsuce	
		d.	ont's before start of loui	nev			A Detail of the Park of the Park	
		D.	At the first feeling of me Immediately after com	otion sickness		d	She is currently made	DOUBLETTEET .
		ď	One hour before comm	encing journey		are entirette	mointagement to	110 (2001)
			Twelve hours before co	mmancing lauren				
	15.	۱72-	year-old man who is know	m patient of arthri	tis develo	ps epigastric di	scomfort. A medica	officer prescribes
			ntacids. Antacids are nov Control of bleeding from		or:		- 11,000	onicei prescribes
		b	. Preventing ulcer relapse	n uicer				mane A & S
			Promot pain relief		d		Sider Hilling Sylica	rahi lig suita
		d	. Suppress HCL secretion				The second	214. 4
	16	Whic	. Ulcer he ling	ting the covers co.	estan di		and the second second	
1	10.	and C	h drug has utility in inhibit il tract, as well as in the tr	eatment of acrom	eraly?	irrnea of hormo	one secreting tumor	s of the pancreas
S. Park		a	Octreotide					
100 (1)			Leuprolide					Personal Address
T 17			Bromocriptine Sertraline	•				in thomas
44			Apartrazolo					
3//	17. A	25	vear old man had been	experiencing into	ermittent	diarrhea which	, over years, progr	essed to severe
N IF	ď	iarrh	ea. alternating with cons	tipation, rectal pi	eeding. a	ng passage of n	nucus On physical	twa-min-sti at
7.15	- 21	oon	en is tender over the	lett iliac tossa.	Stoots ex	camination fail	to reveal naracit	ne Colonossos
7.0	de	mon	strates inflammation lim	ited to the rectur	n continu	ous with the co	ion and no skip lesio	ns. Which of the
	10	lowi	ng is the most likely diag Celiac Disease	nosist				
7		h.	Crohn Disease					
1			Hirschprung Disease		е			
			Tropical sprue					
			Illegestive colitie	average and a per	er) Servera			- John Schiller
	18. Exp	lorat	ory laparotomy of a pa	tient with an acc	ite abdor	nen demonstra	tes a several foot lo	ing loop of small
			e with a dark red-to-bro ds abruptly on both th					
	lesio	on er	ids abruptly on both th	e distal and prox	imai eogo	es. Willes of all	c romowing chagnios	
	this	app	arance?	alan				
		a. /	denocarcinoma of the c	01011		d 🍘		
		٠. ر	rohn disease Ilcerative colitis					
			abanda hawal dicasco					
	1.7	-	A considerate				ata fleet to collds ar	d then to liquids.
			uberculosis old man presents to his y reveals a large fungat	physician becau	se of pro	gressive dyspire	al lunction. Biopsy o	f the mass shows
15	Fodo	year	v roynals a large fungat	ing mass 2cm ab	ove the	astroesophage	voerchromatic nucl	el. A diagnosis of
	that	the	old man presents to his y reveals a large fungat glands have extended i al adenocarcinoma is n	into muscular la	yer and c	ing conditions	can result in the de	velopment of this
	unat	1200	al adenocarcinoma is m	nade. Which of t	ne follow	mg containens		
	locion							
	1111111111	Fe	ophageal rings					
	g.	53	ophageal webs					
	D.	GE	RD.					
	ç	50	eroderma	С				
		SI	ding hiatal hernia					
	c.	311	711.0 ····					

s year old man develops peri-umblical pain which then shifted to the right iliac lossa. On physical as year old man develops peri-umblical pain which then shifted to the right iliac lossa. On physical as year old man develops peri-umblical pain which then shifted to the right iliac lossa. On physical as year old man develops peri-umblical pain which then shifted to the right iliac lossa. On physical pain which then shifted to the right iliac lossa. On physical pain which old man develops peri-umblical pain which then shifted to the right iliac lossa. On physical pain which then shifted to the right iliac lossa. On physical pain which then shifted to the right iliac lossa. On physical pain which then shifted to the right iliac lossa is positive. following is the most likely diagnosis? a. Acute Appendicitis Diverticulitis b. Hemorrhoids а c. **Pancreatitis** d. Pyelonephritis 21. A 57 year old woman with anemia is found to have a decreased Vitamin B12 level. Antibodies to intrinsic factor are Identified. Levels of all other vitamins are within normal limits. Which of the following is most likely to be a. Duodenal ulcer b. Ulcerative colitis Dietary Vit. B12 deficiency d d. Autoimmune gastritis e. Angiodysplasia 22. A 32 year old woman presents with complaints of several months of burning substernal chest pain exacerbated by large meals, cigarettes and caffeine. Her symptoms are worse when she lies on her back, especially while sleeping at night. Antacids often improve her symptoms. This patient is at risk for which of the following conditions? a. Cardiac ischemia Columnar metaplasia of distal esophagus b Esophageal web Leiomyoma of the esophagus 23. A patient develops anemia and weight loss and slight abdominal discomfort. On questioning, the patient is a known case of chronic gastritis. Which of the following type of malignancy is most strongly associated with this patient's condition? Gastric lymphoma b. Intestinal type of gastric adenocarcinoma b e. Adenocarcinoma or desophagus

24. A patient presents to a physician complaining of recurrent episodic diarrhea, triggered by eating too much or description of the presents of the states that "he turns as red as a beet and starts wheezing" during these episodes.

25. A patient presents to a physician complaining of recurrent episodic diarrhea, triggered by eating too much or drinking alcohol. His wife states that "he turns as red as a beet and starts wheezing" during these episodes. d. Squamous type of pesophageal carcinoma Which of the following would be the most likely cause of his symptoms? Carcinold tumor e. Superior vena cava syndrome
25. A 10 year old boy complains of intermittent abdominal pain. Endoscopy fails to demonstrate peptic vicer or chronic gastritis. The clinician suspects that the patient may have a heterotopic rest of gastric mucosa that is chronic gastritis. The clinician suspects that the patient may have a heterotopic rest of gastric mucosa that is chronic gastritis. The clinician suspects that the patient may have a heterotopic rest of gastric mucosa that is producing enough acid to cause ulceration of adjacent mucosa. Which of the following is the most likely diagnosis? Primary TB Ectopic pancreatic tissue Meckel's diverticulum diagnosis? e. Cancer of the cecum

26. A 65 year old man presents to a physician because of a palpable mass immediately above the left clavicie

(Virchow's node). Blopsy of the mass demonstrates metastatic adenocarcinoma in a lymph node. Which of the

following organs should be most strongly suspected as containing the primary tumor?

a. Bladder

b. Large hours! b a. Large bowel d b. Liver Stomach Pancreas 27. Major site of Peptic Ulcer is: a. Ileum b b. Duodenum 28. The granulomas of Crohns's disease are differentiated from granulomas of tuberculosis due to: a. Presence of caseation b. Absence of caseation b 29. Which of the following is a major predisposing factor for the development of pseudomembranous colitis? c. Presence of giant cells d. Presence of lymphocytes Young age b. Malnutrition Antibiotic use d. Refined diet C e. Obesity

A A Sye	r old boy presents with abdom	quadrant. His temperature is 102F and pulse is 119. A laparant quadrant. His temperature is 102F and pulse is 119. A laparant pulse is 119. A laparant quadrant. His temperature is 102F and pulse is 119. A laparant quadrant. His temperature is 102F and pulse is 119. A laparant quadrant. His temperature is 102F and pulse is 119. A laparant quadrant his examined by
and th	in shifted to the right lower	noved. What will be observe
	thologist?	25.17.00
	Lymphocytic infiltrate	
		danis proprié
C.	Neutrophilic Infiltrate in must	digita b. ch.
a.	Perforation of the appendic	
	Adhesions s another name for aphthous u	licer?
si. What	Leukoplakia	
	Erythropiakia	٠
ě.	Bed sore	d
ď	Canker sores	toma mass and fistulas are the teatures
0.	Oral candidiasis	on, fibrosis, serositis, granuloma mass and fistulas are the features of
32. Deep	icers, marked lymphoid reect	
э.	Ulcerative colitis Crohns disease	
-	total and animal animals	b
	Majabsorbtion syndrome	U
	Colorectal carcinoma	te :
		d
b.	Basal cell carcinoma	
C.	Adenoma	and individuals is:
ď	Musloous carcinoma	of the oral cavity in immunocompromised individuals is:
· c	nest common fungal infection	OI FUA FILL CALLED
34. The n	Thrush (candidiasis)	
	Blastomycosis	a
,	Histoplasmosis	i-umbilical pain which then shifted to the right iliac fossa. On physical C rectally and rebound tenderness in right iliac fossa is positive. Which of the ils?
à	Mucormycosis	which then shifted to the fossa is positive. Which of the
ě	Coccidiologinycone	-umblical product tenderness in its
15. A 65	year old man perature is 38	Clectand and the
		ist:
	ALL LIVE FOR THE STATE OF THE S	
,	Hemorrhoids	at 2 level. Antibodies to most likely to be
9	Pancreatitis	have a decreased Vitamin of the following is most
	Pyelonephritis with anemia	is found to within normal limits.
	year old woman of all other	Atamuna are
36. A3	dentified. Levels of all dated with this condition? Clated with this condition?	is found to have a decreased Vitamin B12 level. Antibodies to intrinsic factor distance within normal limits. Which of the following is most likely to be
	. Door selve colitis	The second secon
	. Ulcerativit. B12 deliciency	shootmally bulky, from On bloosy small
-	Dieta mune gastritis	containts of passage of distention and fisture is the most likely
9	Anglodysplasia to OPD	with the companorexis, abdomans lamins propris. What
7 0	ald man presents in led	with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormally bulky, frothy, greasy, yellow with the complaints of passage of abnormal passage of abnorma
37. A 4	yes a days accompanies	with distances
stoc	is found to be	
Inte	nede?	а
CLER	3100 C (1) C	u
	a. Whippie sprue b. Tropical sprue	
	d. Giardiasis	in polistan is
	d. Giardiasis e. Cholera or cause of acute pancreatiti a. NSAIDs abuse a. NSAIDs abuse	I In Comment
	or cause of acute parter	b?
	or cause of abuse a. NSAIDS abuse b. Obstruction of CBD due to be obstruction benefitis	0 31014
38. Ma	Obstantion of Co.	towning towning to characteristic or
38. Ma	h Obsulocation	and with reduced calcium teres
38. Ma	b. Infective hepatitis	ALABAM WILLIAM
38. Ma	b. Obstitute hepatitis c. Infective hepatitis d. Gastritis	the back associated with
38. Ma	b. Obstitute hepatitis c. Infective hepatitis d. Gastritis Malabsorption s. Malabsorption	ting to the back associated with
38. Ma	b. Obstative hepatitis c. Infective hepatitis d. Gastritis e. Malabsorption e. Malabsorption e. stric pain (knife like) radiate	ting to the back associated with
ao Foi	c. Infective in a constitution d. Gastritis e. Malabsorption e. Malabsorption (knife like) radiate pain (knife like) radiate	ting to the back associated with
ao Foi	c. Infective in a constitution d. Gastritis e. Malabsorption e. Malabsorption (knife like) radiate pain (knife like) radiate	ting to the back associated more and the back as
ao Foi	c. Infective in a constitution d. Gastritis e. Malabsorption e. Malabsorption (knife like) radiate pain (knife like) radiate	a ditatations of pancreatic ducts an
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis	and variable dilatations of pancreatic ducts an
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis	and variable dilatations of pancreatic ducts an
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis	and variable dilatations of pancreatic ducts an
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis enchymal fibrosis reduced to	and variable dilatations of pancreatic ducts and
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis enchymal fibrosis reduced to phological features of whice	and variable dilatations of pancreatic ducts an
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis enchymal fibrosis reduced to prohological features of white a. Acute pancreatitis a. Acute pancreatitis	number and size of acini and variable dilatations of pancreatic ducts at the of the following conditions?
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis renchymal fibrosis reduced to phological features of white a. Acute pancreatitis b. Acute pancreatitis chronic pancreatitis	number and size of acini and variable dilatations of pancreatic ducts at the following conditions?
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis renchymal fibrosis reduced to phological features of white a. Acute pancreatitis b. Acute pancreatitis chronic pancreatitis	b
39. Epi	c. Infective in a constraint of the constraint o	number and size of acini and variable dilatations of pancreatic ducts at the following conditions?
39. Epi	d. Gastritis e. Malabsorption gastric pain (knife like) radiate a. Acute pancreatitis b. Gastritis c. Acute Cholecystitis d. Cholelithiasis e. Hepatitis enchymal fibrosis reduced to prohological features of white a. Acute pancreatitis a. Acute pancreatitis	number and size of acini and variable dilatations of pancreatic ducts at the following conditions?

41. Condition in which call bladder to the	dudth for all and and
41. Condition in which gall bladder is filled	with trank pus is called.
h Maranast e santa	
	C C
	C
42. Inflammation	The second secon
42. Inflammation of gall bladder due to ga a. Cholelithlasis	il stones is called as.
b. Acute calculous Chalamatic	# 1 1 C 1 7 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C
CHONE Chalacustisis	h
u. Choledocholishinsis	b
e. Cholangitis	
43. Most carcinomas of the gall bladdes as	•
P. adenocarrinoma	
d Dustal adaptati	
d. Ductal adenocarcinoma e. Adenosquamous carcinoma	D
44. Pigment gall stones are composed of	
a. Calcium salts of unconjugated h	iliada
b. Calcium and cholesterol	
c. Uric acid	a
d. Magnesium Ammonium Phosph	ate
e. Cysteine	
a. AST	ic) which one of the following test of LFTs is likely to be raised
b. ALT	
C. Alkaline phosphatase	h
c. Alkaline phosphatase d. Nucleotidase	U
e. Gamma glutamyl transferase	0.00
46. Transmission of Hepatitis A is almost ex	clusively be
a. Blood transfusion	
b. Intravenous drug abuse	
d. Sexual transmission	C C
e. Transplacental transmission	C
e. Transplacental transmission 47. The serological finding of hepatitis B vin a. Hepatitis B surface antigen b. Hepatitis B e antigen	us in window period is
a. Hepatitis B surface antigen	C
b. Hepatitis B e antigen	parties and the same of the sa
d. Hepatitis B surface antibody IgG	
e HBV DNA	
48. Cause of unconjugated billrubin emia is	C
a. Hemolytic anemia	a?
b. Billary tract obstruction	the hardward histories through and making provided with latter At
d. Hepatitis	NAME OF THE PARTY
a Cirrhosis	inths of July and August is traced to the mixing of sewage with drinking Iglas and low-grade fever. Transaminases were markedly raised. None
49. An outbreak of acute hepatitis in arthra	oths of July and August is traced to the mixing of sewage with drinking iglas and low-grade fever. Transaminases were markedly raised. None se. Only two patients died during the outbreak, both were pregnant is outbreak?
of the patients developed chronic disea of the patients developed chronic disea females. What is the likeliest cause of thi	is outbreak?
• HAV	b
h HEV	
c. HBV	
e. HCV	which enzyme after activation from its proenzyme form can activate mpliment systems?
50. During the pathogenesis of Pantreatitis of other enzymes and clotting, Kinin and co	mpliment systems?
a linase	
b. Phospholipase	C
c. Trypsin	· ·
d. Elastase e. Alpha amylase	
51 A At-was-old man is found in an obtunde	d state and taken to the hospital. On admission physical examination
he is icteric. His abdomen is enlarged with	a state and taken to the hospital. Of scan shows extensive intraperitoneal
	g/dL, total bilirubin 4.8 mg/dL, AST of 563 U/L, ALT 317 U/L, alkaline i micromol/L. A liver biopsy is performed and microscopically
A STATE OF THE PARTY OF THE PAR	neutronning inflittates, negationale nectors, collections, collections, and
evtensiva macrovesicular steatosis. Which	of the following is the most likely diagnosis?
a. Autoimmune hepatitis	
h Scierosing cholangitis	
c. Alcoholic hepatitis	
d. Hepatitis B virus Infection	
e. Diabetes mellitus	C

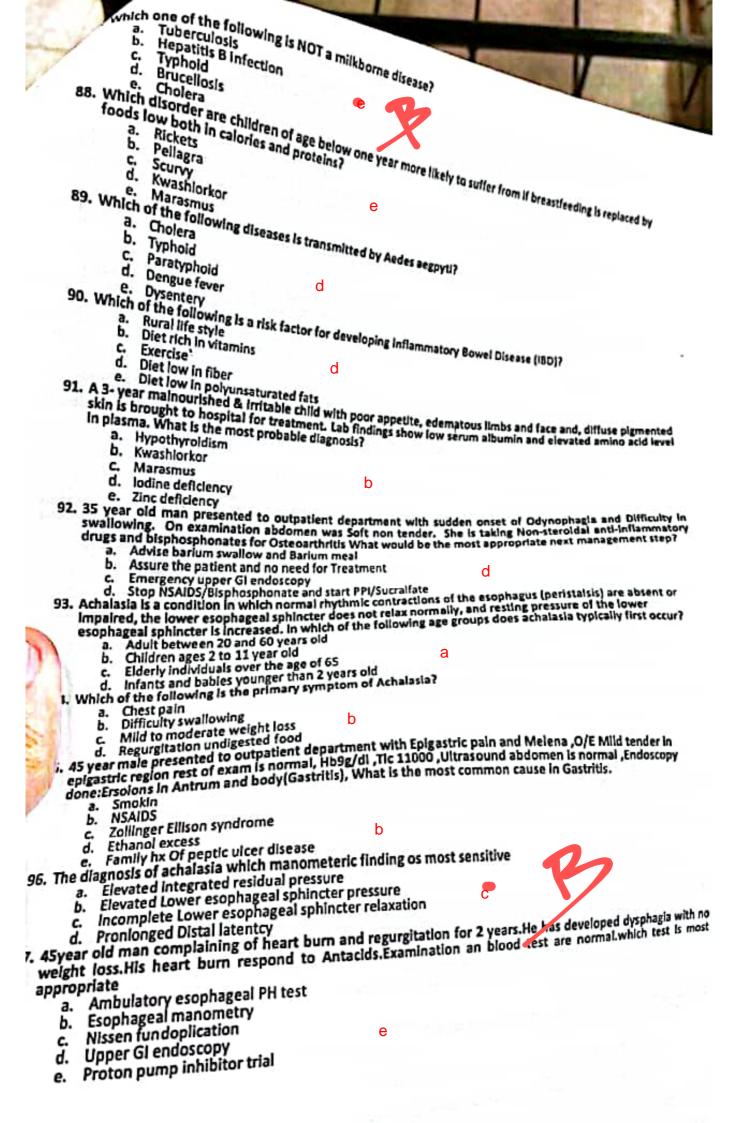
growing, painless salivary gland mass composed of epithelial and myoepithelial cells with a sindromyxoid stroma is most likely a:

Asidromyxoid stroma is most likely a:

Anong Mucoepidermoid Carcinoma Pleomorphic adenoma b. Sialadenitis b c. Acinic cell carcinoma d. Malignant mixed tumor 53. Most common benign tumor of the liver is: Cavernous hemangioma ь. Liver adenoma C. Cyst Fibrotic nodule d. a e. Upoma 54. Histopathological characteristics of a duodenal biopsy showing villous atrophy and crypt hyperplasia with intraepithelial lymphocytosis with positive tissue transglutaminase antibodies is most likely a case of: b. Celiac disease Whipple's disease d. Lactase deficiency b Cystic fibrosis 55. Bacillus Cereus food poisoning is caused by: Hamburger а. b. . Reheated Rice Fish d. Canned meat Milk 56. Diagnostic test of E-Coil for fecal contamination of water is is: a. Mackonkeys media EMB agar growth Blood agar Gram staining e. Acid fast stainin 57. Most common tumor of salivary gland is? Warthin tumor Oncocytoma Mucoepidermoid carcinoma Adenocarcinoma Pleomorphic adenoma 58. Which type of necrosis caused by alkali burn? Coagulative necrosis b. Caseous necrosis Fat necrosis е Granuloma formation 59. After skin contamination, the patient passed into coma with miosis and finally acute nephritis what is the polson? Carbolic acid ь. Citric acid a Hydrocyanic acid Nitric acid 60. Greenish color urine is seen in which of the following? Carbolic acid а b. Hydrochloric acid Nitric acid Oxalic acid Sulphuric acid 61. Vitrolage is punishable under which section of PPC? a. 320 A 320 B b. е 333 A 336 A 336 B 62. In which of the following cells basophilic stippling is seen a. Neutrophils Eosinophils RBCs Basophils d. **Piatelet** 3. In which chronic poisoning punctate basophilia are seen? Alcohol Arsenic Cocaine d Lead Mercury

	-	Irani	AND DESCRIPTION OF THE PARTY OF
100	in while	Arsenic Case, ston	nach mucosa gives red velvety appearance?
-	b.	Copper	mucosa gives
1	C.	Lead	over led Ashar
	d.	Mercury	a and appears
	·- · · · ·	Zinc	auce)
65.	in which	h chronic not	
	a,	Arsenic Poisoning H	atter's shakes are seen?
	0.	Copper	-tters shakes
	ç	Lead	are seen?
66	Dr G.	Thallium Jaw Is seen in which c Arsenic Dhatura Lead	d
٠٠,	Priossy	Jaw Is so	
	a,	Arsenia en in which -	L. S.
	b.	Dhate	Mronic poisons
	C.	Lead	oning?
	d.		
		· HUKDAA	d
67,	Which	Thallium	
	2	Coison gives a gardia	
	, h	Thallium Poison gives a garlic sn Chlorine Bromine	iell on examinate
	٥.	Bromine	amnation?
		riuorina	
	d,	lodine	е
68	ur.e.	Phosphorous	
U.	AAUICH	lead deposition !	
	a.	Lead chromatin in chro	nic poisonine
	b.	Lead subscesses	nic poisoning results in formation of blue lines in the gingival margin?
	C.	Lead sulphide	of other lines in the gingival margin?
	d.	Lead lodide	
			C
69.	· oueni	Farma to	Oozing of blood from swollen bitten part, there is spreading of cellulitis with might be bitten by which snake?
	hemon	hages from sally with	oozing of blood from swollen bitten part, there is spreading of celiulitis with might be bitten by which snake?
	a.	Cohra	might be bitten by which content part, there is spreading of celiulitis with
	b.	Elapids	and shake!
	c.	Sea snake	
	d.	Scorpion	е
	e.	Viners	
70.	Which	of the following toxins o	omes from the castor oil seed?
	a.	rid opinie	orites from the tastor off seed?
	b.	Digitalis	d
		Nicotine	u
		Ricinus	
900	е.	Strychnine	
71.	Sympto	ms of which vegetable p	oolson resembles that of viper bite?
	a.	Abrus precatorius Croton tiglium	
	6.	Capsicum	a
	4	Semecarous anacardium	
	0.	Ricinus communis	to a second for a second to the hides and for
72.	The lui	e from which of the follo	owing plant is used by tanners for removing hair from the hides and for
	deador	izing them	
		Ahrus precatorius	?
	b.	Calotropis procera	
		Capsicum annum Plumbago rosea	
	d.	Semecarpus anacardium	to the take of human liver?
	Lacorat	on or rupture of liver ma	unly occur in which lobe of human liver?
/3.			
	b.	Left lobe	С
		Right lobe	
	d.	Quadrate lobe	the following stone should follow after situational analysis?
1	e.	og health planning cycle,	which out of the following steps should follow after situational analysis?
	Kegarui	Implementation	
	h	Monitoring	d
		Cualuation	
を使った	4 1	cetablishing objectives	
	e. 5	etting priorities	
100	Which of	it of the following WHO	organizational regions includes Pakistan?
15.50	Control of the Contro	MANAGEM PRIDIT	
-	h V	lestern Pacific region	
-0.7		(-lean region	0
1	4 E	ctorn Mediterranean res	ion .
1. 1	e. So	uth East Asian region	

		ling health delivery system of Pakistan, at which level out of the following does a basic health Unit e medical services to the community?
76.	Regard	ling health delivery system of Pakistan, at which level out of the following does "
	provid	e medical services to the community?
	a,	Tehsil
	b.	District
		Union Council
	e.	Small city Large city of the following is an indicator for improvement of maternal health according to Millennium pment Goals (MGDs)?
77,	Which	of the following is an indicator for improvement of maternal health account
	Develo	pment Goals (MGDs)?
		Prevalence of underweight children
	b.	Condom use rate
	•	Proportion of higher attended by skilled health personnel
	d.	Under-five mortality rate
	e.	Under-five mortality rate Infant mortality rate Infant mortality rate Average Bed Occupancy (ABO) in a hospital is divided by Average Bed availability (ABA), what do with the second se
78.	When	Average Bed Occupancy (ABO) in a hospital is divided by Average
	get?	
	a.	Admission rate
	b.	Throughput
		Turn Over Period
	d.	Bed Occupancy Rate
	e.	Average length of stay of the following is NOT a recommended trait for hospital administrators? Ability to manage conflicts
79.	Which	of the following is NOT a recommended trait for no specific
	***	capital to menable sammen.
	b,	Ability to forecast C?
	Ç.	Ability to englet all languations
	d.	Ability to synthesize diverse information Ability to delegate ling health economic evaluation, when both costs and benefits of an intervention are expressed in what is this analysis called?
	_ е.	Ability to delegate when both costs and benefits of an inter-
80.	Regard	ing health economic evaluation, when both
	money	Controller and ale
	a.	Cost utility analysis Cost-effectiveness analysis
	-	Control minimum analysis
	ç	Cost-happing tasks
	u.	Costing which one of the following
81	Once t	Cost-minimization analysis Cost-benefit analysis Costing the National Health Policy of Pakistan is approved by the cabinet, which one of the following tasks Immediately afterwards?
•	follows	Immediately afterwards?
	а.	Designing of healthcare Projects
	b.	Evaluation of Policy
	c.	Formulation of five-year plan
	d.	Public Sector Development Programs (PSDP) Public Sector Development Programs (PSDP)
	e.	Request to lander is NOT a high-risk group for risk
82.	Which	immune compromised individuals
	h	Surgeons
		Tohacco smoxers
	ď.	Percutaneous drug abusers
	e.	Percutaneous drug abusers Homosexuals out of the following statement is TRUE regarding hepatitis C virus infection? It is a water borne disease
83.	Which	out of the following statement
-		
	b.	There is no vaccine available against milk It can easily spread through breast milk It can easily spread through breast milk It can easily spread through breast milk
	ç.	tt can easily spread through breast mile It can easily spread through breast mile Initial infection is always followed by severe symptoms Initial infection is always followed by severe symptoms Initial infection is always followed by severe symptoms Initial infection by Ascaris lumbricoides? It has no association with hepatic cancer to the following statement is NOT TRUE regarding infection by Ascaris lumbricoides? Infection rates are high in children
	o.	the has no association with hepatic cancer is NOT TRUE regarding infection by Ascaria
	which	out of the following statement of the following
54.	2.	out of the following state in children Infection rates are high in children It may contribute to growth retardation in children
	h.	It may continue and host parasite tolerance
		That's is this is the second of the second o
	d.	It is prevalent in South Africa only It is prevalent in South Africa only Man is the only reservoir Man is the following are at a higher risk of developing severe dysentery? Obese children
0.747	6.	of the following are at a higher risk of the following are at a higher risk of
85.	Who	Obese children
		United WIVES
	c.	Adult young much beaut fed
	d.	Infants who are not breast fed
	e.	Infants who are not prease red Pregnant women one of the following is likely to challenge effective health communication? Use of audiovisual aids
	Court Liber S	
86.		
86.		Coochack
86.	6.	Feedback Homozengus audience
86.	6.	Feedback



98. Regarding Patient who are diagnosed as irritable bowel syndrome, 10% patient has a history interes enteritis. Which of the following is the strongest risk factor for Post infectious IBS a. Age older than 60 years Depression c. Female sex d. Prolonged duration of initial illness d e. Use of antibiotics 99. 52 year old women present for elevated serum liver values. She is found to have positive serum antimitrochondrial antibodies test positive. Which of the following serum blood test should be followed to assess her treatment response a. Alanine transaminase test b. Alkaline phosphatase test Aspartate aminotransferase test Billirubin test e. Prothrombin test 100. 60 year old man with primary scierosing cholangitis was recently found to have evidence of cirrhosis and portal hypertension. Which of the following complication is associated with this stage of liver disease Accelerated atherosclerosis Fat soluble vitamin deficiency d c. Nephrolithiasis d. Renal Insufficiency e. Seizures disorders 101. 35 year old man has chronic hepatitis B.He is asymptomatic and he is brother is also hepatitis b positive. There is family history of hepatocellular carcinoma. Physical examination is normal , Blood test , ALT: 20u/l.HBsag positive.lgG anti HBc positive.Anti hbe positive.Ati HBe positive.HBV DNA 2000lu/ml.Ultrasound: Normal .What will you advise? a. Perform liver blopsy b. Perform liver ultrasound 6 monthly c. Prescribe peg interferon d. Prescribe Lamiyudine 102. 28 year old man presented with bloody diarrhea (4-6) episode for Sweeks.Colonoscopy finding show Inflammation around appendix sigmoid colon and rectum. Rest of the colon is normal Biopsy show chronic active colitis. What is the likely diagnosis? a. Infectious colitis b. Ischemic colitis d Microscopic colitis d. Ulcerative colitis 103. A 20 years old male college student who smokes two packs of cigarettes per day presents with severe epigastria pain, and duodenal ulcer is suspected. The most appropriate initial step in diagnosis and a. Measure paseure gastric and levels
b. Obtain an H. pylori urease breath test
c. Order upper gastrointestinal endoscopy
d. Order upper gastrointestinal radiographic study
e. Tell him to stop smoking and prescribe an H2 blocker
e. Tell him to stop smoking and prescribe an H2 blocker
104. The treatment of choice for a 40 year old man who is found on endoscopy and blopsy to have a gastric management is to: lymphome would be; a. Subtotal gastrectomy b. Radiotherapy Subtotal gastrectomy and radiotherapy 105. A 60 year old man presents with dysphagia and pain on swallowing both solids and liquids. A barium meal shows gross diletation of the esophagus with a smooth narrowing at the lower end of the esophagus. What is the single most likely cause of dysphagia? a. Achalasia b. Myasthenia gravis c. Esophageal carcinoma а Esophageal web 106. A 35 years old female presented with abdominal pain, distention and vomiting. She has history of high grade fever for the last one week. On abdominal examination, there is generalized tenderness and rigidity. What is the most likely diagnosis? a. Peritonitis caused by perforation of duodenal ulcer
b. Peritonitis caused by perforation the appendix
c. Peritonitis caused by typhoid perforation of small bowel d. Intestinal obstruction Acute pancreatitis 107. All of the following are signs of peritonitis except a. Tenderness on palpation b. Rigidity c. Absence of abdominal movements with respiration d. Increased bowel sounds d Severe abdominal pain on asking the patient to cough

os. A 45 y	t is in shock and the above on i	NSAIDS presented in a	mergency with severe abdominal pain and O/E, ler. What is the most probable diagnosis?
a.	Gastritis	is distended and tend	er. What is the severe abdominal pain and O/E.
D.	ACULE Cholecustisis		the most probable diagnosis?
C.	Perforated pentic uleas		AL 1973 T. 198
u.	Pancreatitie	С	
e.	Myocardial infarction		
us. The n	ext diagnostic test in a joundier	ed nations	
a.	Computed tomography.	a patient when pitras	onography suggests common duct dilatation is:
О.	Biliary scintigraphy		the state of the s
7	Endoscopic retrograde chlangi	Opancreatography	
ě.	Intravenous cholangiography (IVC)	c?
10. When	Percutaneous transhepatic chi.	angiography (PTC)	
indica	iting poor progneric le with acut	te pancreatitis, sizns pr	resent on admission or development within 48 h
3.	ating poor prognosis include all of Arterial Po2<60 mmHg	of the following except	a series of admission of development within 48 h
~ -b-	-Change in blood was		•
C.	Change in hematocrit from 42 t	from 20 mg/dL to 30 m	g/dL C
a.	Leukocyte count 25 000 /	to 30 percent	
/ Y	ear old churt protection	tructive laundice chal	angitis and palpable abdominal mass is suspected
to na	ve a choledochal cyst on ultrasor intravenous cholangiography	nography. The best sub	saguest legestlessies is
•	WINDS CHAIRMANN AND AND AND AND AND AND AND AND AND		seducit investigation is
c.	Endoscopic retrograde cholang	lography	
	Magnetic resonance cholangion	pancreatography	С
c.	Hida Scan		
112. A 3 m	nonth old child presents with his	tory of recurrent chalac	gitis and jaundice. Imaging studies reveal a
segme	ental dilatation of intrahepatic du	icts with intrahenatic st	rgitis and jaundice. Imaging studies reveal a tones and bile lobes. The most likely diagnosis is:
5	Polycystic disease of liver		tones and one loves. The most interpretagnosis is:
č.	Primary sclerosing cholangitis Caroll's disease		
d.	Primary biliary cirrhosis	С	
e.	Cirrhosis		
113. An	elderly, diabetic male present wit	h abdominal pain and f	ever, ultrasound shows a large liver abscess.
		most likely to be the car	use?
	Staphylococcus aureus Streptococcus pyogenes		
C.	Escherichia coli	е	-
d.	. Candida albicans	7/	
114 4 20	. Pseudomonas		
dilat	dice with itching. Biochemistry sh tation with stones. The likely diagr Budd-Chiarl syndrome		er with rigors, right upper quadrant pain and ructive nature. CT scan shows intrahepatic ductal
b	 Primary sclerosing cholangitis 		
C.	Primary biliary cirrhosis	b	
	. Caroli's disease		
115 Eate	. Simple cystic disease	organisms such as view	es, bacteria and parasites. Viral gastroenteritis is
an in	fection caused by a variety of virt	uses that results in von	es, bacteria and parasites. Viral gastroenteritis is niting or diarrhea. Which of the following
•.	require medical attention	on complication, especi	ally among the young and elderly, and may
b.	In general, the symptoms begin	5-6 days following lofe	ection with the virus and may last 20 days,
	depending on which virus cause	s the illness.	retion with the virus and may last 20 days.
ä	The main symptoms of viral gast Rotaviruses are the rarely cause	troenteritis are mild di	arrhea and nauros
116. Hepat	titis means inflammation of the I	iver Dationts with at	From Found Children.
nema	tology	racents with the	mong infants and young children. following conditions should be referred to
b.	Active hepatitis A		and the second of the second o
	Asymptomatic liver disease Elevated alfa-fetoprotein.		
e.	Abnormal liver tests.		
	ra.4 19 00-41		y