GOMAL MEDICAL COLLEGE, MTI, D.I.KHAN

Name of Stud Please encircle t	he concertais wer wan blue/black pen		Date: 30 th May, 2024 Roll No Paper ID: BLUE	
Time Allowed: 0	2 HRS		Total Marks: 120	
Note: Attempt A	ALL questions from this section. Select ONE best answer.	Each	question carries 01 mark.	
	has complete bile duct obstruction which of the following	g does	s not occur?	
	Triglyceride absorption	d)		
	Vitamin K absorption	(e)	All of the above	
	Cholesterol synthesis he following is the most appropriate initial test for the eva	luatio	on of obstructive inundice?	
	HIDA scan	c)	-	
	Ultrasound scan		PTC e) ERCP	
	he following organism is commonly isolated from bile?		-,	
a)	Escherichia coli	<u>d)</u>	Pseudomonas SPP	
b)	Clostridium SPP	(e)	Enterococcus SPP	
	Bacteroides fragilis			
	he following conditions is sufficient to cause cholangitis wit			
	Bacteria in bile		None of the above	
	Complete duct obstruction	e)	Any of the above	
	Bacteria in bile with bile obstruction Id female presents with acute onset of abdominal distension	n na	in nausan and vamilting the has no	
	es. She has no abdominal or inguinal hernias on examination			
bowel with air f	luid levels and pneumobilia. The obstruction is most likely a	at whi	ch site?	
	Pylorus		Ileocecal valve	
b)	Duodenum		Colon	
	Jejunum			
	he following statements is true regarding spontaneous bact			
a)	The diagnosis can be made clinically	(Antibiotic therapy is reserved for patients	
ы	without paracentesis Infection is most commonly polymicrobial	۵١	with +ve findings on ascitic fluid culture	
5)	infection is most commonly polymicrobial	0.00	Gram -ve enteric bacteria often present None of the above	
O#7: A 32 years	old male with third-degree internal hemorrhoids underwei			
	and was discharged home. What is the commonest postope			
hemorrhoidecto		iative	complication after	
	Urinary retention	ď١	Peri-rectal abscess	
	Bleeding		Anal fissure	
	Fecal incontinence	٠,	And history	
	he following is the most common cause of massive colonic	bleed	ing?	
a)			Ischemic colitis	
	Ulcerative colitis		Infectious colitis	
	Diverticulosis	•		
Q#9: A 35 year o	old lady presented with sudden severe abdominal pain which	h was	s generalized in nature and radiating to	
the back . She is having asymptomatic gall stones for the last 4 years. On clinical examination she is having cold clammy				
skin, BP is 90/60	. Abdomen is distended, tense and tender all over while bo	wel s	ounds are absent. What is your most	
likely diagnosis?				
a)	Acute cholecystitis	(d)	Biliary colic	
b)	Acute pancreatitis		Acute gastritis	
c)	Perforated duodenal ulcer		0	
Q#10: A 75 yrs old male presented with history of altered bowel habits and per rectal bleeding for the last few months.				
Which of the fol	lowing is the most appropriate investigation to make a diago	nosisi	?	
	Stool for occult blood.		Upper Gl endoscopy	
b)	Proctoscopy		Barlum follow through	
c)	Colonoscopy			

Q#11: A 26 years old lady presented with abdominal pain for the few months. She is also giving history of on and off abdominal distension and vomiting associated with episode of pain. What is the most appropriate investigation to reach over the diagnosis? d) CT Scan abdomen (a) Ultrasound abdomen e) Barium studies b) Xray abdomen c) Blood complete picture with ESR Q#12: A 42-year-old woman attends the emergency department with severe epigastric pain after eating fish and chips. The pain resolves after 2h. Her temperature is 37.2°C. She has no abdominal tenderness and all blood investigations are within the normal range. Which is the single most likely diagnosis? Biliary colic d) Pancreatitis (b) Cholangitis e) Perforated gallbladder c) Cholecystitis Q#13: Which of the following virus is less likely to cause chronic liver disease? a) Hepatitis B virus d) Hepatitis D virus b) Hepatitis A virus (e) HIV virus c) Hepatitis C virus Q#14: A 9 months old infant was rehydrated in emergency department with Normal saline 30ml/kg in one hour followed by 70ml/kg in 5hrs. The most likely clinical presentation was; a) Restless and irritable d) Skin pinch goes back slowly b) Thirsty e) Seizures (c) Lethargic Q#15: A 3 years old male child presented with a history of chronic diarrhea for the last one year. Stool are greasy and foul smelling. On examination, he is wasted, pale with clubbing of fingers and distended abdomen. The investigation of choice is; a) Stool microscopy b) Complete blood count c) Jejunal biopsy Q#16: A 50-year-old male presents with hematemesis and melena. He has a history of chronic alcohol abuse and cirrhosis. Endoscopy reveals dilated, tortuous veins in the distal esophagus with signs of recent bleeding. What is the most likely cause of his symptoms? a) Esophageal stricture. d) Mallory-Weiss tear. (b) Esophageal varices . e) Peptic ulcer disease. c) Gastric cancer. Q#17: A 30-year-old female presents with epigastric pain, nausea, and vomiting. She reports a history of recurrent similar episodes, often triggered by fatty meals. Lab tests show elevated serum amylase and lipase levels. Imaging reveals gallstones obstructing the cystic duct. What is the most likely diagnosis? a) Acute gastritis. d) Pancreatic cancer. e) Peptic ulcer disease. (b) Cholecystitis. c) Gastro esophageal reflux disease (GERD). Q#18: What is the most common symptom of intestinal ascariasis? c) Headache. (a) Abdominal pain. d) Joint pain. e) Skin rash. b) Cough. Q#19: Which organ is commonly affected by migration of Ascaris larvae? c) Kidneys. (a) Brain. e) Lungs. d) Liver. b) Heart. Q#20: A child is presented with dark colored urine and clay colored stools, which among the following ould be the cause of this condition? **Hepatitis C** a) Autoimmune Hepatitis Obsttuctive jaundice b) Hepatitis A c) Hepatitis B Q#21: A 45 years male comes to the ER room with complaints of acute abdominal pain with migratory thrombophlebitis. Which among the following will be the probable diagnosis? Chronic relapsing pancreatitis

a) Acute pancreatitis

Acute appendicitis
Carcinoma pancrease

e) Diabetes mellitus

Q#22: A 40 year	old women presents to the medical especialist with pain	in rig	ht upper quadrant of abdomen.A
positive result fo	r which of the following is substances would most strong	gly sug	gest gallstones disease as a possible
cause of her abd			Burketon (
(a)')	Bilirubin		Protein
b)	Glucose	e)	Urea
c)	Nitrate		
Q#23: Carcinoma	a Colon metastasized first to	٠.	hamph nodes
a)	Heart		lymph nodes
b)	Kidneys	e)	lungs
(1)	liver	rina (O/E splenomegaly and stool test
Q#24: A woman	liver presnt with high grade fever with chills and cola colour u	iiiie. V	S/E spicinomogal,
revealed cresent	t shaped gametocyte in blood, cause is .		Hydatid cyst
<u>a</u>)	Leishmaniasis		Kala azar
	Plasmodium falciparum	•	
c)	Glardiasis		
Q#25: Zollinger	Ellison syndrome associated with which of these:		Increased glucagon
a)	Decrease gastrin Increased insulin	e)	Gastritis
			ducose occurs
O#36: A patient	Peptic ulcer disease has Increased hepatic glycogen with normal structure of	liver a	nd no increase in serum glucose occars
ofter giving fruc	tose, which enzyme will be deficient?		allianco
alter giving nac	Fructokinase	흿	Glucokinase Fructose 6 phosphate
b)	Glucose 6 phosphate	(e)	Fructose & phosphate
c)	Hexakinase		is found to have mildly elevated liver
O#27: A 55 year	Hexakinase old male alcoholic presents with symptoms of liver disea	se and	weals abnormal clear spaces in the
enzymes. A liver	old male alcoholic presents with symptoms of liver diseases biopsy examined with a routine hematoxylin and eosin states which of the following is most like	dy cau	se of this:
cytoplasm of mo	ost of the nepatocytes. Which of the form	d)	Steatosis
a)	Hemosiderin	e)	Cirrhosis
b)	Lipochrome	•	
(C)	Lipofuscin		•
Q#28: What typ	e of Inflammation is typically seen in ulcerative colitis?	d) S	erosal inflammation
a)	Transmural inflammation	e) G	ranulomatous inflammation
b)	Submucosal inflammation	-,	
(1)	Mucosal and submucosal inflammation	alagy	of ulcerative colitis?
auga, Which of	the following findings is most characteristic of the morph	(h	Continuous mucosal involvement
(A)	Cobblestone appearance	۵,	starting from the rectum
b)	Skip lesions	-1	Fistula formation
	- 1 - 604		Fistula formation
C)	common complication of long-standing ulcerative colitis?	,	to the terminal flour
Q#30: What is a	Small bowel obstruction	d)	Strictures in the terminal ileum
具	Small bower obstruction	e)	Malabsorption syndrome
(P)	Fistula formation		
c)	Colorectal carcinoma	weigh	t loss. Endoscopy shows segmental
Q#31: A 35-year	Colorectal carcinoma -old woman presents with diarrhea, abdominal pain, and nation with skip lesions. Biopsies show transmural inflammation with skip lesions. Biopsies and diagnosis of Crohn's dise	nation	and lymphold aggregates. What
areas of Inflamm	nation with skip lesions. Biopsies show transfer of Crohn's dise	ease?	
Lustal findin	a would most strongly support a single	c)	Granulomas in the biopsy
(a)	Continuous Inflammation from the	d)	Crypt abscesses
	rectum to the cecum	-1	Villous atrophy
b)	Preudonolyps		Liber Colonoscopy reveals a large,
A CO VOZ	r-old man presents with rectal bleeding and a change in the sigmoid colon. Histopathological examination	n bow	habits. Colombady,
Q#32: A 60-year	In the signal colon. Histopathological examination	or t	to Handag bost describes this type of
exophytic mass	the significant and desmoplastic stromal reaction. Wh	ich of	the following best deserves
infiltrating the m	In the sigmoid colon. Histopathological examination ouscularis propria and desmoplastic stromal reaction. Wh		and the same
carcinoma?		d)	Mucinous carcinoma
(3)	Adenocarcinoma	e)	Medullary carcinoma
b)	Squamous cell carcinoma		
c)	Small cell carcinoma		

Q#33: Hepatitis A virus is a member of which of the following families of	of virus:	
a) Hepadnaviridae	d	Deltaviriuae
Picornaviridae	(é	Hepeviridae
c) Flaviviridae		
Q#34: Which type of hepatitis is lethal in pregnancy?		
a) Hepatitis A	d	
Hepatitis B	(e) Hepatitis E
c) Hepatitis C		
Q#35: A liver bigpsy in a patient with autoimmune hepatitis typically sh	nows:	
Macrovesicular steatosis	d) Cholestasis
b) Interface hepatitis	6	None of the above
c) Granuloma	6	
Q#36: What is the role of liver biopsy in thr diagnosis of autoimmune h	onatitic	2
a) To differentiate between autoimmune hepatitis and p	rimary	billary cholangitis
(c) To assess the presence of Hepatocellular Carcinoma		
c) To assess the extent of liver fibrosis and inflammation		
d) To measure hepatic iron concentratione) None of the above		
Q#37: Autoimmune hepatitis primarily affects which demographic? a) Elderly men		
b) Young women	(d)) Middle-aged men
c) Children under 5	e)	None of the above
Q#38: Hepatitis A is most commonly transmitted through which of the a a) Contaminated blood product		
Feco-oral route		Respiratory secretions
c) Needle sharing	e)	None of the above
Q#39: Which serological marker is indicative of an acute hepatitis E infe		
a) Anti-HEV IgG		
Anti-HEV IgM		Anti-HCV
c) HBsAg	e)	IgE
Q#40: Which of the following is most commonly associated with Type 1		
a) Anti-LKM1 antibodies	autoin	mune hepatitis?
b) Anti-SLA/LP antibodies	(a)	Anti-mitochondrial antibodies
c) Anti-Smooth Muscle Antibodies (SMA)	ej	None of the above
Q#41: Risk factor for alcoholic liver disease is		
(a) Cirrhosis	41	Observe
b) Hepatitis C infection		Obesity
c) Hormones	6)	Regular intake of alcohol
Q#42: Diphyllobothriasis is caused by eating		
(a) Raw fish	d)	Paus mettle
b) Raw fruits	•	······································
c) Raw meat	٠,	Raw vegetables
Q#43: Enterobius vermicularis is commonly known as?		
a) Flatworm	a	Pinworm
b) Fish worm		
c) Hook worm	(۲	Tapeworm
Q#44: High risk transmission for HCV is		
a) Breast feeding	al.	Covered
b) Fomite transmission		Sexual transmission
(c)) Needle stick injury	e)	Vertical transmission

Q#45: What is the most common symptom associated with chronic I	HCV infection?
Abdominal pain with or without ascites	d) Fever with or without Jaundice
Asymptomatic	e) Jaundice
	•
c) Dark stool	
Q#46: Which of these is a symptom of pinworm infection?	d) Diarrhea
a) Nausea	(e) Abdominal pain
b) Paranola	
c) Intense itching Q#47: A 56 year old woman presents with nausea, vomiting and 4	months of weight loss. Endoscopy is performed and
Q#47: A 56 year old woman presents with nausea, vomiting and 4 shows an erythematous area with ill-defined borders. Biopsy	is performed and shows poorly differentiated
shows an erythematous area with ill-defined bolders by	st likely gene lost in this malignancy?
adenocarcinoma with signer ring type morphoso	d) Her2
a) CDH1	e) PTEN
E - Cadherin	Agrees gastrectomy. She also has
c) FAP c) FAP 448: A 30 year old woman is found to have a diffuse type gastric of the second secon	arcinoma and undergoes gastreeton,
mass in bilateral ovaries. What is this tumor called?	d) Melanoma
a) Carcinoid Tumor	e) Tubular adenocarcinoma
(b) Krukenberg tumor	e) lubulai assirs sar
The state of the s	•
c) Lobular cardinoma Q#49: Which of the following is a risk factor for gastric adenocarcin	d) NSAID use
a) Autoimmune gastritis	(e) Peptic ulceration of stomach
b) Bile reflux into stomach	
c) Fundic gland polyp	ise, enisodic watery diarrhea and mild weight loss
Q#50: A 39 year old man presents to a general physician with mala for the past 3 months. On upper GI endoscopy, there was duodena for the past 3 months. The histographological section showed p	I podularity. Biopsy is taken with the clinical
for the past 3 months. On upper GI endoscopy, there was duodens	pear shaped micro-organisms on the mucosal surface
cuspicion of cellac disease. The histopania	
of small intestinal villi. What is the diagram	H) I Helicopacter Pylori IIII
a) Celiac disease	e) Normal duodenal biopsy
b) Duodenal Amebiasis	
c) Duodenal Giardiasis Q#51: Which of the following is a characteristic feature of alcohol	ic liver disease (ALD)?
Q#51: Which of the following is a characteristic leading of disease	d) Hypoglycemia
a) Decreased seruii territii too	(e) Macrovesicular steatosis on liver biopsy
b) Elevated serum alpha-fetoprotein	
c) Elevated serum iron levels Q#52: Which of the following dietary factors is thought to be asso	ociated with an increased risk of diverticulosis?
Q#52: Which of the following dietary factors is thought to be	(i) Low fiber intake
a) High calcium intake	e) Low fat intake
b) High fiber intake	
c) High fluid Intake	development of familial adenomatous polyposis (FAP)?
c) High fluid intake c) High fluid intake Q#53: Which genetic mutation is commonly associated with the	d) SMAD4 gene mutation
(at) APC gene mutation	e) TP53 gene mutation
L) BRAE gene mutation	
c) KRAS gene mutation Q#54: Which of the following diagnostic tests is commonly used	to detect Helicobacter pylori infection in patients with
OHEA. Which of the following diagnostic tests is commonly used	to detect helicopassa Py
Q#54; William of the same	d)_ Endoscopy
gastritis? a) Blood test	(e) Stool antigen test
b) Blopsy	(e) stoor and
c) Breath test	the stage for human.
c) Breath test Q#55: In life cycle of diphyllobothrim lattum which stage is infec	Plerocercoid larva
a) Coracidium Larve	e) Procercoid larva
b) Embryotic egg	6) 11000
c) Egg	
C) = 55	

Q#56: Blood tes	t which confirmatory test is used to confirm the presen	so of a	etive henetitis C Infection?
a)	ALT test	CE OI at) IgG Antibody
_	HCV genotyping		
	HCV RNA PCR	e)	Liver biopsy
•			
at night. The ch	old child presents to the pediatric clinic with complain	its of in	tense itching around the anus, especially
the parents me	ild's parents also report noticing small, white, thread-li	ke worr	ns in the child's stool. On further inquiry,
are reported to	ntion that the child has been experiencing disturbed sle be generally good, but the family lives in close quarter for the child's symptoms?	eep due	to the itching. The child's hygiene habits
likely diagnosis	for the child's symptoms?	rs with	several other relatives. What is the most
	Giardiasis	d)	Roundworm infection
b)	Hookworm infection		Tapeworm infection
③	Pinworm infection		
Q#58: Which of	the following organisms is responsible for amoebic dyse	entery?	
(1)	Entamoeba histolytica	d)	
	Giardia lamblia		Bonnen.
c)	Plasmodium falciparum	e)	Trichomonas vaginalis
Q#59: A 40-yea	r-old factory worker presents to the emergency de-		
difficulty swallo	r-old factory worker presents to the emergency departm	nent wit	h complaints of severe abdominal pain,
liquid on his fac	wing, and vomiting blood. He reports working with indu	strial ch	emicals and accidentally splashed a
esophagus. Wh	te and swallowed a small amount. Upon examination, the lich of the following is the most likely cause of his sympton.	ere are	severe burns around his mouth and
(a)	Hydrochloric acid		
	Sulfuric acid		Acetic acid
	Nitric acid	e)	Phosphoric acid
		!	H. I.
with plants in I	ar-old gardener is brought to the emergency room after and services. He complains of intense burning pain in his manner. On examination, those are created	accident	ally ingesting a substance while working
abdominal cra	mps. On examination, there are erosions and ulcerat	ioutn ar	nd throat, accompanied by vomiting and
evidence of hy	pocalcemia. Which of the following substances is most lik	ions in	nis oral cavity. Laboratory tests show
a)	Hydrochloric acid		
	Sulfuric acid		Acetic acid
c)	Nitric acid	e	Oxalic acid
Q#61: A 45-ye	ear-old man is brought to the emergency department	after in	gesting a household design
and because to p	c a corrosive aikali. He complains of severe throat pain, d	difficulty	swallowing and abda
On examination	n, he has drooling, odynophagia, and evidence of chemic	cal burn	s around his mouth. He are a service is
and distressed.	Which of the following postmortem findings would most	t likely b	e observed in this case?
a)	Superficial mucosal erosion in the		Grayish-white necrosis of the
	stomach	-,	esophageal mucosa
b)	Blackened esophageal mucosa with	d)	Hemorrhagic gastritis with erosions
	ulceration	(e))	Perforation of the small intention
Q#62: A 50-ye	ar-old woman is brought to the emergency department b	by ambu	lance after ingesting a large supption of
AcRetable acid	in an apparent suicide attempt. She presents with sevi	ere abd	ominal nain naucoa and warniting On
examination, S	he appears pale and diaphoretic, with signs of dehydration	on. Whic	ch of the following postmortem findings
would most lik	ely be observed in this case?		0,
a) b)	Hemorrhagic gastritis with erosions	d)	Cherry-red discoloration of the lips & oral
Õ	Superficial mucosal erosion in the esophagus Yellowish discoloration of the skin and sclera	-1	mucosa
	r-old child is brought to the hospital, the parents report	e)	Graylsh-white necrosis of the gastric mucosa
and developm	ental delays. A blood test confirms elevated lead levels, p	romntin	g further investigation and intermediate,
Which of the fo	ollowing is a potential source of lead exposure for the chil	d?	6 runtier investigation and intervention.
<u> </u>	Regular consumption of seafood		Drinking tap water from a well
b)	Exposure to secondhand smoke		Attending daycare with strict hygiene
c)	Playing outdoors in a rural area	-,	protocols
	The second secon		Laia

Q#64: A 35-year-old man presents to the emergency department with symptoms of mercury poisoning, He complains of headache, abdominal pain, and difficulty breathing. On examination, he is tachypneic and has a metallic taste in his mouth. Immediate medical intervention is initiated, but despite efforts, the patient's condition deteriorates rapidly. Which of the following postmortem findings would most likely be observed in this case? d) Grayish-white necrosis of the gastric mucosa a) Yellowish discoloration of the skin & sclera Blackened mucosa and ulceration of the Cherry-red discoloration of lips & oral mucosa b) gastrointestinal tract c) Pulmonary edema and congestion Q#65: A forensic expert is tasked with examining the body of a hiker who was found dead in a remote area. The circumstances suggest a possible snakebite as the cause of death. During the autopsy, the pathologist uncovers several key findings. Which of the following postmortem appearances would most likely be observed in a case of fatal snakebite? (d) Ecchymosis and edema around the bite site a) Hemorrhagic gastritis with erosions e) Perforation of the small intestine b) Superficial mucosal erosion in the esophagus Grayish-white necrosis of esophageal mucosa Q#66: Which of the following findings would be most indicative of a postmortem diagnosis of powder glass ingestion? (c) Presence of sharp, glass-like particles a) Hemorrhagic gastritis with erosions embedded in the gastrointestinal mucosa Superficial mucosal erosion in the Yellowish discoloration of the skin & sclera esophagus e) Perforation of the small intestine Q#67: A case involving a fatal injury sustained during a physical altercation. The victim was found with multiple blunt force injuries, and one of the injuries involves trauma to the abdomen, specifically the spleen. Which of the following injuries to the spleen is commonly associated with blunt force trauma? d) Hematoma a) Laceration (e) Contusion b) Avuision c) Penetration Q#68: Which of the following substances is commonly used in vitriolage attacks? d) Acetic acid (a)) Sulfuric acid e) Phosphoric acid b) Hydrochloric acid Q#69: A 32-year-old man is brought into the emergency department by his coworkers. They report that he suddenly fell unconscious at work after complaining of severe abdominal pain and vomiting. Upon examination the man is found to have a garlic-like odor on his breath, and his vomitus contains blood. His skin appears pale and clammy. His coworkers mention that he works in a pesticide manufacturing plant. Which of the following is this man suspected to have? d Sulphur poisoning a) Carbon monoxide poisoning e) Lead poisoning b) Cyanide poisoning Phosphorus poisoning Q#70: What is a common postmortem appearance associated with phosphorus poisoning? Cyanosis of the lips and nails a) Pink discoloration of the skin (e) Greenish discoloration of the abdomen b) Cherry-red lividity of the skin c) Yellow discoloration of the sclera Q#71: Which of the following organs is most commonly affected in fatal cases of phosphorus poisoning? d) Brain (a) Liver Heart b) Lungs Q#72: Q14. Which of the following findings is often observed in the kidneys during postmortem examination in cases of c) Kidneys

copper poisoning?

 a) Renal calculi b) Tubular necrosis

(c) Glomerular sclerosis

d) Cortical atrophy

e) Hydronephrosis

Q#73: What is a characteristic feature of the central nervous system in cases of severe carbolic acid poisoning?

a) Cerebral edema

b) Cerebral hemorrhage

(c) Basal ganglia calcification

d) Focal demyelination

e) Ischemic necrosis

Q#74: A 35-year-old male is brought to the emergency room after accidentally ingesting a chemical substance at his workplace. He was found unconscious by his colleagues near a spilled container. On examination, he appears pale and diaphoretic. He is hypotensive with a heart rate of 120 beats per minute. There is evidence of severe oral and oropharyngeal burns. What is the most likely cause of his condition?

- a) Hydrochloric acid poisoning
- Sulfuric acid poisoning
- c) Nitric acid poisoning

d) Acetic acid poisoning

Phosphoric acid poisoning

Q#75: Chernobyl tragedy reminds us of severe massive explosion of nuclear reactor and release of nuclear radiations. What kind of epidemic is this?

- (a) Point source epidemic
- b) Propagated epidemic
- c) Modern epidemic

- d) continuous epidemic
- e) secular epidemic

Q#76: In late 1950s, 10,000 children were born with severe deformities such as phocomelia. A study was done with forming two groups of mothers, one who gave birth to deformed babies, other who gave birth to normal babies and mothers were inquired about exposures in pregnancy. What type of study design is this?

(a) Cross sectional-sectional study

d) Experimental study

b) Case control study.

e) Quasi experimental study

c) Cohort study

Q#77: A study is planned to be done to compare efficacy of Aldomet vs Labetalol In controlling raised blood pressure in pregnant women with pre-eclampsia. What is the gold standard study design for this type of research?

a) Cross sectional-sectional study

d) Randomized control trial

b) Case control study.

e) Quasi experimental study

(c) Cohort study

Q#78: A study was done to see the effect of sun exposure on skin among two groups of football players. One group of players selected who used sunscreen, another group selected who did not use sunscreen. Latter both groups were compared for incidence of skin damage. What type of study design is this?

- (a) Cross sectional-sectional study
- d) Clinical trial

b) Case control study.

e) Quasi experimental study

c) Cohort study

Q#79: What is best study design to study rare exposure?

- a) Cross sectional-sectional study
- (b) Case control study.

d) Experimental study Quasi experimental study

c) Cohort study

Q#80: A study was conducted to see the effect of earthquake on exacerbation of cardiovascular disease related mortality. Taking disaster as natural intervention and similar people living in non-disaster-stricken area as controls. What type of study design is this?

a) Cross sectional-sectional study

(d) Ecological study

b) Case control study.

e) Quasi experimental study

c) Cohort study

Q#81: Which of the following statements is true regarding the t-test?

- a) It is used to compare means of two groups
- b) It is used to compare variances of two independent groups
- (c) It is used to compare co efficient of variance of two related groups
- d) It is used to compare variances of two related groups
- e) It is used to compare standard deviation of two related groups

Q#82: If a new effective treatment for a non-communicable disease is initiated and all other factors remain the same, which of the following is most likely to happen.

- a) Prevalence will not change
- b) incidence will not change
- c) incidence and prevalence both will change
- d) incidence and prevalence both will not change
- (e) incidence will change

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A CTOSS-S	ectional study conducted in a comm	nunity finds that out of	f 1000	individ	uals surveyed, 20	0 have been
Q#83: A Closs	hypertension. What is the prevalen					
diagnosed with	0.02	ce of hypertension in t	d)	2	100/	
ര്	0.2	1000/126	e)	20	1000	
•	0.5	1 /290	٠,			
C)	the suitable one talled alternate hyp	nothesis if researcher v	vants 1	o comp	are heights in inc	thes of German
Q#84: What is	h Pakistani adult males?	octricals in researcher t		,		
adult males wit	There is a difference between the r	mean height of the two	groui	os		
a)	There is no difference between the	mean height of the tw	vo gro	ups		
	The mean height of group 1 is grea	ter than the mean help	tht of	group 2		
(4)	The median height of group 1 and	mean of group 2 both	are sai	me.		
۵)	There is difference between modal	heights of two groups				
	a Z-test typically used in biostatistic					
al	When the sample size is small					
a) b)	When the population standard dev	lation is known				
c)	When comparing median of two in	dependent groups				
4)	When comparing variances of two	Independent groups				
	When the population standard dev	lation is not known				
O#86: Which	of the following factors does affect p	revalence?				
	Duration of the disease				conomic status	
	Age of the population		e)	Severi	ty of symptoms	
	Gender distribution					
	-Square test is used to analyze which	h type of data?				
	Continuous data			Ratio o		
	Categorical data		e)	Interva	al data	
	Ordinal data					
Q#88: Which	of the following statements about so	atter diagram is true?				
16	Scatter diagram are only used for o	displaying categorical d	ata			
6 1	Scatter diagram are effective for sh	nowing relationships be	tweer	n two co	ontinuous variabi	es
\sim	Scatter diagram are used exclusive	ly in qualitative research	ch			
d)	Scatter diagram are best suited for	displaying the distribu	ition o	f a singi	e variable	
e)	Scatter diagram cannot Identify tre	ends or patterns in data			data la blactatisti	rs?
	of the following is a common metho	d for visually presentin	g cate	Line gr	ranh	
	Scatter plot			Pie chi	*	
	Histogram		e,	rie chi	art	
c)	Box plot	th DEN confidence leve	l wha	t stater	ment is correct?	
Q#90: When i	nterpreting a confidence interval wi	th 95% confidence leve	e lies	within t	he Interval	
a)	There is a 95% chance that the tru	e population paramete	e Inte	rval	are miter var	
	There is a 5% chance that the sam	d to be within the inte	rval			
 c) The population mean is guaranteed to be within the interval d) There is a 95% chance that the true sample statistics lies within the interval 						
d) There is a 95% chance that the true sample statistics has within the interval (e) There is a 5% chance that the sample mean lies outside the interval						
Q#91: Which of the following best describes regression analysis in biostatistics?						
Q#91: Which	A method used to determine caus	ation between variable	25			
a)	A technique for predicting the value	ue of one variable base	d on t	he valu	e of another vari	able
0)	A process of summarizing data usi	ing descriptive statistic	5			
(C)	A method exclusively used in qual	itative research				
a) -\	A technique for calculating probab	ilities in experiments				
e)	value of the correlation coefficient r	epresents a perfect po	sitive	linear re	elationship between	een two
	value of the correlation coefficient	cpi cocinto a por ioti po				
variables?	10		d)	0.0		
	1.0 0.5		-,	0.8		
	0.7					
C	0.7					

Q#93: A 45-yea	r-old male patient complains of recurrent abdominal pa	in, espe	cially after meals. He reports a history
of occasional he	eartburn and bloating. After diagnostic tests confirm the	presenc	e of a peptic ulcer, the physician
	te pharmacological therapy. Which of the following drug	gs is the	most appropriate choice for the initial
^	f this patient's peptic ulcer? Omeprazole	۵۱.	Prodeirolone
	Acetaminophen		Prednisolone Metformin
c)		e)	Metformin
	ar-old woman presents to the clinic with complaints of	waton	diarrhea and abdominal cramps for the
past two days.	She reports no fever or blood in her stool but mentions r	watery recent to	avel abroad. Considering her symptoms.
the physician d	ecides to prescribe an antidiarrheal agent. Which of the	followin	ng drugs would be the most appropriate
choice for mana	eging her acute diarrhea?		,, ,,
a)	Acetaminophen	d)	Metformin
	Diphenhydramine	e)	Omeprazole
	Loperamide		
Q#95: A 55-yea	ar-old male patient presents to the clinic with complaints	s of fatig	ue, loss of appetite, and jaundice. Upon
treatment enti-	ation, the physician diagnoses him with chronic hepatitis	s C infect	tion. Considering the available
chronic hepatit	ons, which of the following drugs is a direct-acting antivir	ral (DAA)	commonly used in the management of
	Ribavirin	-41	Safashinda
	Interferon alpha		Sofosbuvir All of the above
	Ledipasyir	e)	All of the above
	of the following drugs is commonly used for the treatmen	nt of nen	atic ulcers by reducing gastric acid
secretion?	die	it of pep	the dicers by reducing gastric acid
a)	Acetaminophen	d)	Prednisolone
b)	Ibrufen	e)	Interferon
	Ranitidine		
Q#97: Which o	of the following drug is not used for motion sickness?		
a a	7.03	d)	Promethazine
•	Cinnarizine	Ø	Metocloperamide
c)	Cyclizine		
Q#98: Metocic	pramide blocks Apomorphine induced vomiting, produc	ces musc	cle dystonia and increases prolactin
release, indicat		α	
	Anticholinergic action		Antidopaminergic action
	Antihistaminic action	e)	Antiadrenergic action
	Anti 5- HT3 action		D-1
enisodes are 2-	ars old female presented with Abdomen pain for last 6 n 3 times in a week for the last 3 months. Increased Stool	Fragues	Pain was infrequent initially but pain
history of weigh	nt loss, fever, blood in stools and fatty stools. What is th	o likely d	licanosis?
instory or weigh	Celiac Sprue		Ulcerative Colitis
8	Crohn's Disease		Diverticulitis
c)	Irritable Bowel Syndrome	-	Diverticultus
	ear-old woman is brought to the emergency departmen	nt after in	ngesting a large quantity of assists in a
	She is conscious but complains of ringing in her ears,		
	sis shows pH 7.50, PaCO2 25 mm Hg, and HCO3- 18 mE		
treatment for t		-q/ L. ***	ide is the most appropriate initial
	Intravenous fluids and electrolytes	d)	Activated charcoal
	Gastric lavage	e)	
	Hemodialysis	٠,	Sociality bicar bornate
	ear-old man is admitted to the hospital with severe	asnirin	noisoning. He presents with confusion.
	osis, and signs of acute renal failure. His serum salice		
	vith intravenous fluids, activated charcoal, and alk	•	
	nues to deteriorate. What is the next best step in mana		
	Administering N-acetylcysteine	-) Administering flumazenil
6)	Initiating hemodialysis		Performing gastric lavage
c)	Providing supportive care in the ICU		,
٠,			

	of the following drugs is most commonly associated wi	th dos	e-c	lependent hepatotoxicity?
(a)	Paracetamol (Acetaminophen)		•	Metformin
b)	Amoxicillin		e)	Amlodipine
c)	Ibuprofen			
0#103: Which	drug is a known cause of idiosyncratic hepatotoxicity, p	articul	arly	associated with anti-tuberculosis
treatment?				
	Rifampin		d)	Streptomycin
Ã	Isoniazid	(e)	Pyrazinamide
9	Ethambutol			
O#104: A 30 v	ear patient diagnosed a case of gastric ulcer. He is taking	medic	ati	on for treatment of ulcer. Which of the
following anti-	ulcer drug having anti-androgenic effects?			
	Sucralfate.	d	I)	Clarithromycin
_) Cimetidine.	е)	Amoxicillin
	Metronidazole.			
O#105: A patie	ent with hepatic encephalopathy, which one of the follow	ving dr	ug i	is of proven benefit in the treatment of
hepatic enceph				
	Levodopa	ď		Branched chain amino acid
(b)	Bromocriptine.	e)) 1	Tetracycline.
c)	Keto analogues of essential amino acids.			
Q#106: A 45 ye	ear old man with duodenal ulcer was treated with a comb	oinatio	n o	f drugs intended to heal the mucosal
damage and to	eradicate H.pylori. Which of the following antibacterial of	drug is	use	ed commonly to eradicate intestinal H
pylori.?				
	Cefazolin.			lindamycin.
Ю	Ciprofloxacin	e)	٧	ancomycin
c)	Clarithromycin.			
Q#107: Amoeb	a causes amoebic dysentery and hepatic cyst in our body	. Whic	:h o	of the following is drug of choice for
	epatic amebiasis?			tt as alla a
	Albendazole			linocycline
	Metronidazole	e)	0	rnidazole
c)	Clarithromycin	-1		hantavisity while on treatment
Q#108: A fema	le patient who is being treated for chronic hepatitis B dev	elops r	iep	nrotoxicity wille on treatment.
Which is the m	ost likely medication she is taking for HBV treatment?	٦,		mivudine
(9)	Adefovir			lbivudine
	Cidofovir	٤)	16	ibivadine
c)	Entecavir			
Q#109: Which	one is the property of interferon?	۹)	W	eekly administration of pegalyted
a)	Oral bloavailability< 1%	u,		erferon
	Administered as SC and IV	(el)		of the above
c)	Half-lives 1-4 hours			
Q#110: A 40 year old male presents to his physician with fatigue, joint pains and abdominal discomfort. On examination he is jaundiced and mildly tender in right hypochondrium. Laboratory tests show deranged liver function tests and his				
he is Jaundiced	and mildly tender in right hypochondrium. Laboratory tes	ts snov	v a	eranged liver function tests and his
serum ferritin le	vel is raised. What is the most likely diagnosis?	٩)	Deli	mary biliary cholangitis
	Acute hepatitis			lson's disease
	Autoimmune hepatitis		4411	son s disease
c)	Hemochromatosis or old lady presents in emergency with high grade fever, at	ndomir	al i	nain and diarrhea for one week. On
examination she	ls febrile and has faint rose colored rash on upper body. S	She is c	liag	nosed as having enteric fever. What
	on of choice for enteric fever?			al audeura
	Blood culture			ol culture
	Bone marrow culture	e) :	010	ol routine investigation
c)	Complete blood count			

Q#112: A 50	year old female with history of cirrhosis secondary	to chro	onic hepatitis presents in emergency with
homatomorie	and molena. On examination she has signs of shock.	Cause o	of hematemesis is suspected to be variceal
bleeding and	initial resuscitation is done in emergency. What me	dication	n is given in emergency to reduce portai
hypertension?			
	ACE inhibitors	(d) Octreotide
•	Carvedilol	6	e) Omeprazole
	Furosemide		
04112. A 25 W	ar old man presents to General physician with fatigue.	nausea	and yellow discoloration of sclera which
	are On examination he is laundiced and has tender of	niarged	IVEL HIS IMPORTED A COST
liver enzymes	and positive anti- HAV (hepatitis A) antibodies. What is	tne mod	16 Of fratistilission of trope and
a)	Animal or insect bite	/ C	recal-oral route
•	Contaminated blood and blood	ď	Respiratory (droplet) transmission
Q2	products		Sexual transmission
3.5	products	-	
Q#114: A 35 ye	ear old male presents to physician with three month hist	tory of t	ourning epigastric pain are a second
pain is worse a	fter taking meals. He denies any history of co-morbiditie	es and n	nedication use. He is diagnosed with
peptic ulcer di	sease. What next step will you follow in his management	t/	Test and treat H. Pylori infection
	Dietary modification	a)	Treat H. pylori infection empirically
	Give antacids	e)	Treat H. pylori illection empires.
(c)	Give proton pump inhibitors		and to amorganov with hematemesis
Q#115: A 50 ye	ear old male with history of cirrhosis secondary to Hepat	itis B pr	esents in emergency with nembership
and malana for	one day On examination his blood pressure is 80/60mmHg.	pulse is	feeble and he is pale. Tod di conspersion
variceal bleeding	g and initial resuscitation is done in emergency. What investiga	ation will	Ultrasound abdomen
•	Barium studies	<u>a</u>	X-ray erect abdomen
•	Bronchoscopy	ej	A-lay erect abdome
c)	Upper GI endoscopy	tita thra	a weeks after a meal at a fast food cafe.
Q#116: A 21 y	ear old male develops malaise, fatigue and loss of appeting dark color urine. On examination, he has scleral ict	torus an	d right upper quadrant tenderness. Lab
He noted pass	ing dark color urine. On examination, he has scieral ict serum ALT of 458 IU/L and total bilirubin is 3.9 mg/dl. Hi	s symnt	oms decrease over the next 3 weeks. On
studies shows	finds that the fast food cafe has been closed by the c	ity heal	th department. Which of the following
returning, he i	inds that the fast food cale has been closed by the c	aty near	
serological test	results is most likely to be positive in this patient?	ASS	Anti-HAV antibody
	Anti HBS antibody		Anti-HAV antibody Anti HEV antibody
	Anti-HDV antibody		,
c)	Anti HCV antibody arrold boy is diagnosed with acute gastroenteritis. On e	xamina	tion he appears miserable but alert, has
	bases and reduced skin turger HIS DUISE IS 10	u/min ar	d blood pressure is do do immig.
sunken eyes, dr	y mucous memoranes and reduced skill to get the following is dration solution (ORS) offered to him. Which of the following is	is the mo	st appropriate next step?
	the standard fruit luice of lemonage to elicoura	ige viai i	IIIakc
	a succession tube should be passed and oral renydration	non solu	tion given through that
0)	He should receive an intravenous fluid bolus with 10–20	mL/kg	of 0.9% saline
	He should be given intravenous antibiotics.		
a) -\	None of the above		
e)	the predominant route of transmission for HEV infection	17	
Q#118: What is	Person-to-person contact		rtical transmission from mother to child
В	Consumption of contaminated drinking	d) Pai	renteral route of infection
		e) Tra	nsmission by blood transfusion
0#119: Which o	water of the following agents is recommended for primary prop	hylaxis (or large esophageal valles and accord
decrease both	ortal flow and intrahepatic resistance?		Propranolol
(a)	Prazosin		Simvastatin
ъ)	Isosorbide mononitrate	-,	

Q#120: Being assigned responsibility for something that you have done or something you are supposed to do?

a) Responsibility

b) Morality c) Punctuality (d) Accountability

e) Respectfulness