

PAPER CODE B

33. A 60 years old female known diabetic presented to ENT OPD with history of severe pain in the left ear, she was diagnosed as malignant otitis externa. What is the treatment of choice?
 a. Antibiotics **b. Antibiotics and aural toilet** c. Radiations d. Chemoradiation e. Chemotherapy
34. A 60 years old lady visited ENT OPD with complaints of hard of hearing. On examination doctor advised her suction clearance both ears for wax. What is the combination of ear wax:
 a. Secretions of sebaceous and ceruminous glands b. Desquamated epithelial debris, secretions of ceruminous glands
 c. Secretions of sebaceous glands, Dirt and hair, Desquamated epithelial debris
d. Secretions of sebaceous and ceruminous glands, Desquamated epithelial debris, Dirt and hair
 e. Secretions of ceruminous glands, desquamated epithelial debris
35. A 28 years old school bus driver presented to ENT ward in evening with episodes of vertigo on positional change since last night. What is the commonest cause of vertigo?
 a. Meniers disease b. Labyrinthitis **c. Benign paroxysmal positional vertigo** d. Vestibular neuronitis e. Ototoxicity
36. A one year old child having stridor which increases on crying, direct laryngoscopy shows elongated epiglottis, curled upon itself (omega shaped) and short aryepiglottic folds. What is your diagnosis?
 a. Congenital vocal cord paralysis b. Laryngeal web **c. Laryngomalacia** d. Laryngeal cyst e. Laryngocele
37. A 17 years male present to ENT OPD with antrachonal polyp, what is the treatment of choice for antrachonal polyp?
a. Antibiotics b. Steroids **c. Endoscopic sinus surgery** d. Caldwell -luc operation e. Intranasal polypectomy
38. A 5 years child presented with hoarseness of voice and difficulty in breathing with inspiratory stridor. It was diagnosed as juvenile laryngeal papillomatosis. Which virus is most commonly involved in this disease?
a. EBV **b. HPV 11** c. CMV d. VZV e. Herpes simplex virus
39. A male adult patient came with the complaints of swelling in front of the left ear for 2 months. On examination, it was non tender, mobile, firm in consistency and with no facial palsy. Rest of the neck examination was unremarkable. What is your most probable diagnosis?
 a. Hemangioma of the parotid b. Lipoma c. Warthine tumor d. Parotid cyst **e. Pleomorphic adenoma**
40. An adult patient presented with painful swelling at the tip of the nose and fever for 2 days. On examination, nasal vestibule was erythematous with edema and tender on touch. It was diagnose as nasal furunculosis? Which one the following statement is correct answer regarding the pathogen involved for this condition?
 a. Streptococcus viridian **b. Staphylococcus aureus** c. Pneumococcus d. E coli e. Proteus
41. A 35 years old man gives history of unilateral clear discharge from nose for the last 6 months which increase on bending head forward, we are suspecting CSF rhinorrhea. Which of the following laboratory test is specifically recommended?
 a. CSF sugar b. Serum electrolytes c. Serum albumin **d. B2 transferin** e. Blood sugar
42. An adult male presented to ENT department having nasal obstruction and unilateral conductive hearing loss, on nasal swab showing Ebstein bar virus in the report. Which of the tumor is related to this virus?
 a. Carcinoma of tongue **b. Nasopharyngeal carcinoma** c. Postcricoid growth d. Parotid tumour e. Supraglottic tumours
43. A 07 years old child with laryngeal diphtheria presented to emergency department having severe stridor. What is immediate treatment plan?
 a. Start IV antibiotics b. Throat swab for c/s & microscopy c. Removal of membrane d. Starting antitoxin
e. Secure airways (tracheostomy)
44. A 60 years old male patient is complaining of swelling in right side posterior triangle of neck. He is also having right sided nasal obstruction and ear fullness. Chances of nodal metastasis to posterior triangle are highest in cancer of:
 a. Buccal mucosa b. Hard palate c. Paranasal sinuses **d. Nasopharynx** e. Glottis
45. A 4 year old child presents with bleeding and foul smell from right side of nose. He also gets purulent discharge from the same side. The likely diagnosis is:
 a. Septal deviation with right maxillary sinusitis b. Unilateral choanal atresia c. Antrochoanal polyp
d. Foreign body e. Hematoma
46. A 25 years male patient is complaining of nasal obstruction for last 7 years despite continuous use of a nasal spray. Which of the following drugs is linked with rhinitis medicamentosa?
 a. Intranasal steroid spray b. Ipratropium bromide **c. Xylometazoline** d. Cocaine e. Antihistamine
47. A 40 years old male patient is having left sided facial weakness and vesicles around left ear. In Ramsay Hunt syndrome, which of the following ganglion is involved?
 a. Scarpa's b. Spiral **c. Geniculate** d. Stellate e. Cervical
48. A 30 years old female presented To OPD Complaining of vertigo for 02 days. It lasts for about 30 seconds and has no associated hearing loss. In episodic positional vertigo which of the following test is used?
 a. Caloric test **b. Dix-hallpike manoeuvre** c. Rotation test d. Electronystagmography e. Tympanometry
49. A 9 years old patient presented with complain of regurgitation of fluid through nose for last 7 days. He had history of an infection in the past. What infection is responsible for this palatal palsy in this patient?
 a. Acute tonsillitis b. Infectious mononucleosis **c. Diphtheria** d. Vincents angina e. Acute membranous tonsillitis
50. A 2 years old male child presented to emergency department with barking cough difficulty in breathing, malaise and fever for 2 days. He was having biphasic stridor associated with cynosis and recession of suprasternal and intercostal spaces. It was diagnosed as laryngotracheobronchitis. Which virus is most likely responsible for this disease?
 a. Parainfluenza type 11 **b. Parainfluenza type 1** c. Respiratory syncytial virus type A
 d. Respiratory syncytial virus type B **e. Rhinovirus**

51. A 25 years old female patient presented with foul smelling right ear discharge and hearing loss for 3 years. On examination, there is posterior superior marginal perforation of tympanic membrane. Which radiological investigation you would like to perform?
 a. X ray mastoid b. MRI **c. CT scan of the temporal bone** d. MR angiography e. CT angiogram
52. A 20 years old man came to ENT OPD with fever & increasing sore throat with dribbling of saliva & trismus for only 2 days. On examination, the right tonsil is hyperemic, pushed medially & forward and no response to antibiotics. Rapid relief can be obtained by :
 a. Short course of radiotherapy b. Assurance & rest c. Antidiphtheric serum **d. Incision & drainage**
 e. Broad spectrum antibiotics
53. A 3 years old boy presented to the emergency department with sudden acute respiratory distress, with spasmodic cough, cyanosis & using accessory respiratory muscles is most probably due to :
 a. Acute follicular tonsillitis **b. Foreign body inhalation** c. Adenoid hypertrophy d. Vocal cord nodule e. Vocal cord polyp
54. A patient came with the painful neck swelling and fever after extraction of the first right lower molar tooth 5 days before. On examination, there was firm to hard painful swelling in the submental and submandibular region with drooling of saliva and trismus. He was having difficulty in breathing for one day. What is your most probable diagnosis?
 a. Submandibular sialadenitis b. Submandibular sialolithiasis c. Submandibular lymphadenitis
d. Ludwig's angina e. Parotitis
55. A 30 year old patient was diagnosed as case of Menier's disease. Which statement is correct regarding the symptoms of this condition?
 a. Conductive hearing loss, tinnitus and vertigo **b. Sensorineural hearing loss, tinnitus, vertigo and fullness in ear**
 c. Conductive hearing loss, tinnitus and fullness in the ear d. Sensorineural hearing loss and tinnitus
 e. Conductive hearing loss and vertigo
56. A patient was diagnosed as Ludwig's angina. Transcervical incision from right angle of the mandible to left is given and pus was taken for culture and sensitivity test. The most common bacteria isolated in the culture is:
 a. Staph Aureus b. Pneumococcus **c. Streptococcus viridian** d. B proteus e. Bacteroids
57. A male adult patient presented to Emergency department with severe right ear pain and blister in the ear canal and face for 2 days. It was diagnosed as Herpes zoster oticus. The blisters are forming along the branches of the following nerve
a. Facial nerve b. Vagus nerve c. Glossopharyngeal nerve d. Trigeminal nerve e. Accessory nerve
58. A 60 years old male known Diabetic patient presented to ENT OPD with sudden onset of severe pain and enlargement of right parotid gland, and was diagnosed as acute suppurative parotitis, usual route of infection in this case?
 a. Infections in External auditory canal **b. Through Stensen's duct** c. Through Wharton's duct
d. Infection in teeth e. Infection in parotid lymph nodes
59. An adult patient comes to the OPD with history of hoarseness for the past 1 month. After a detailed history we will proceed with the examination. Which of these is vital for diagnosis?
 a. Lymph node examination **b. Laryngeal crepitus** c. Cranial nerve examination **d. Indirect laryngoscopy**
 e. Oral cavity examination
60. A patient comes to OPD with history of hoarseness for the past 10 months. After a detailed history and examination he was diagnosed as having bilateral vocal asthenia. Which of these is the most important part of treatment?
 a. Antibiotics b. Analgesics c. Steam inhalation **d. Speech therapy** e. Bed rest
61. A forty years old male patient is suspected of having pleomorphic adenoma of sublingual gland. The most important presenting symptom of the patient would be:
 a. Pain in sublingual region b. Fever **c. Swelling in sublingual region** d. Lymph node enlargement e. 12th Nerve palsy
62. A forty five years old male patient is diagnosed as squamous cell carcinoma of one centimeter on right lateral border of tongue. The best treatment option for him will be:
a. Surgery b. Radiotherapy c. Chemotherapy d. Surgery + Radiotherapy e. Surgery + Chemotherapy
63. A sixty year old smoker presented with hoarseness of voice. Direct laryngoscopy was done and biopsy was taken from a growth arising from the tight vocal cord. Tissue has been sent to histopathologist. The most likely expected report would be:
 a. Adenocarcinoma **b. Squamous cell carcinoma** c. Adenoid cystic carcinoma d. Mucoepidermoid carcinoma
 e. Lymphoma
64. A man is suspected of having BPPV. The most common symptom for his diagnosis will be:
a. Vertigo b. Vertigo + hearing loss **c. Vertigo in a particular position** d. Vertigo in any position e. Vertigo + Tinnitus
65. A thirty year old lady is undergoing surgery for a problem in submandibular space. The nerve which is most likely to at risk for injury could be:
 a. Inferior alveolar nerve b. Facial nerve **c. Lingual nerve** d. Vagus nerve e. Accessory nerve
66. A young boy has been diagnosed as having allergic rhinitis. The most likely clinical finding on anterior rhinoscopy would be:
 a. DNS **b. Congested nasal mucosa** c. Pale nasal mucosa d. Septal swelling e. Septal perforation
67. A child of three years presents in the ENT department with history of facial trauma two days back. The child is having nasal obstruction. He is also complaining of pain in nose and has high grade fever as well. The most likely diagnosis is:
 a. Septal haematoma **b. Septal abscess** c. Nasal bone fracture d. Adenoid e. Septal perforation
68. A young male presented in ENT ward with headache, vomiting and high grade fever. Medical record shows right CSOM. What will be the investigation of choice for him in emergency?
a. CT scan brain/temporal bone b. MRI c. Ear swab d. Audiogram e. CBC

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69. A young female has conductive deafness and tinnitus in her right ear. Clinical suspicion is otosclerosis. What audiological investigation is most reliable in her diagnosis?
 a. Tympanogram b. BERA c. Otoacoustic emission **d. Audiogram showing Carhart's notch** e. Tuning fork test
70. A patient is brought in ENT ward with choking, coughing and cyanosis. Inhaled foreign body is likely to be lodged in:
a. Right main bronchus b. Left main bronchus c. Trachea d. Hypopharynx e. Valleculae
71. A 20 year old girl has had ear disease for the past 10 years. She came to the emergency with fever and abscess in the neck over the sternocleidomastoid muscle. What is the name of this abscess?
 a. Citelli's abscess b. Luc's abscess c. Parapharyngeal abscess **d. Bezold's abscess** e. Retropharyngeal abscess
72. A 40 year old female presented to the OPD with salivary gland swelling. Which investigation would you recommend to diagnose salivary gland calculi?
 a. Fine needle aspiration cytology b. Orthopantomogram OPG **c. Sialography** d. MRI Scan e. CT Scan
73. A 50 year old hypertensive patient was brought to the emergency department with profuse epistaxis, on examination, the bleeding point could not be localized anteriorly, the best method to stop the bleeding is:
 a. Anti hypertensive medication b. Anterior nasal packing **c. Posterior nasal packing** d. Tranexamic acid
 e. Electric cautery
74. A patient presented with painless bilateral parotid swelling for the long time. Fine needle aspiration cytology shows non caseating granulomatous disease. The most likely diagnosis is:
 a. Tuberculosis b. Syphilis **c. Sarcoidosis** d. Wegners granulomatosis e. Cat scratch disease.
75. A patient 6 years of age presented with bilateral parotid swelling for the last 1 week. He is running high grade fever and on examination there is a diffuse enlargement of the parotid gland bilaterally. The glands are extremely tender. The patient is reluctant to take food and the disease is contagious. The most probable diagnosis is:
a. Mumps b. Bacterial sialadenitis c. Chronic sialadenitis d. Sialolithiasis e. Parotid cyst
76. A 20 years old male presented with sore throat and high grade fever for the last 2 days. On examination there are multiple ulcers on both tonsils, petechial hemorrhages on the soft palate and hepatosplenomegaly. The most probable diagnosis is:
 a. Aphthous ulcer b. Agranulocytosis c. Diphtheria **d. Infectious mononucleosis** e. Vincents angina
77. A 55 years old female presented with progressive enlarging painless swelling in the left parotid region for the last 01 year. FNAC shows pleomorphic adenoma. The operation of choice in this patient is:
 a. Midline transmandibular approach **b. Radical parotidectomy** **c. Superficial parotidectomy**
 d. Superficial parotidectomy and post operative radiotherapy e. Total conservative parotidectomy
78. A 55 years weak, emaciated female presented with progressive dysphagia for solids for the last 03 month, Barium swallow shows narrow and irregular esophageal lumen with rat tail appearance. Investigations confirm squamous cell carcinoma of upper third esophagus. The treatment of choice for this patient is:
 a. Chemotherapy b. Laser surgery **c. Radiotherapy** d. Surgery e. Surgery + Radiotherapy
79. A 15 years old female presented with right side nasal obstruction for the last 06 months. No history of epistaxis present. Anterior rhinoscopy shows mucoid nasal discharge and on posterior rhinoscopy, there is smooth, grayish, globular mass in the nasopharynx. The most probable diagnosis is:
a. Antrochoanal polyp b. Angiofibroma c. Ethmoidal polyps d. Hypertrophic turbinate **e. Inverted papilloma**
80. A 17 years old female presented with sore throat, fever and difficulty in swallowing for the last five days. On throat examination the tonsils are swollen, congested with multiple cervical lymphadenopathy. We are suspecting Infectious mononucleosis. The most diagnostic test for confirmation is:
 a. Bone marrow aspiration b. Full blood count **c. Paul bunnell monospot test** d. Throat swat test e. FNAC
81. A 02 years old child is brought in emergency with fever and difficulty in swallowing for the last two days, followed by difficulty in breathing. On examination the patient has got retropharyngeal abscess. Retropharyngeal space communicates directly with:
a. Para pharyngeal space b. Pertonsillar space c. Submandibular space d. Parotid space e. Visceral space
82. A 40 years old man presented with hoarseness of voice and swelling in the neck for the last 01 year. On examination there is soft, non tender and reducible swelling in the upper part of left side of neck which increases in size on Valsalva manure. The most probable diagnosis is:
 a. Brachial cyst b. Dermoid cyst **c. Laryngocoele** d. Lipoma **e. Pharyngeal pouch**
83. Nine years old child brought by her mother to Otolaryngology clinic giving history of behavioral changes like watching TV with loud sound and doesn't respond to a slow voice calling him from behind for the last 8-10 months. Her hearing was satisfactory before that. On otoscopy, both the tympanic membranes are retracted, dull looking appearance and there is no tenderness on palpation. What is the most likely diagnosis?
 a. Acute otitis media b. Chronic otitis media c. Chronic mastoiditis **d. Otitis media with effusion** e. Otitis externa
84. 40 years old male patient came through OPD with history of dysphagia especially for liquids for the last 4 years. There is regurgitation of undigested food while he is sleeping. Sometimes, he is also having normal swallowing. Barium swallow shows dilated oesophagus with rat-tail appearance. What is the most likely diagnosis?
a. Cardia achalasia b. Pharyngeal pouch c. Oesophageal stricture d. Oesophageal cancer e. Hypopharyngeal cancer
85. 2 months old male child having difficulty in breast feeding while putting him to the right breast. He is all right on opposite side. The possible reason would be:
 a. Cleft palate b. Enlarged adenoids **c. Left side choanal atresia** d. Laryngo-malacia e. Right side choanal atresia
86. 25 years old male patient presented in OPD with the history of midline neck swelling for the last 3-4 years. The swelling moves with deglutition and tongue protrusion. What is the most likely diagnosis?
 a. Dermoid cyst b. Branchial cyst c. Goitre **d. Thyroglossal duct cyst** e. Pharyngeal pouch

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87. A 35 years old male athlete was involved in contact sport. During his recent rugby match, he received a sharp blow to his right temporal bone. He was rushed off the field and to the emergency department. O/E, patient had developed a right facial paralysis, but rest of examination was normal. The attending surgeon planned him for facial nerve decompression. which segment of facial nerve carries a high risk of involvement in this case and should be decompressed immediately:
 a. Intracranial segment ✓ b. Labyrinthine segment c. Meatal segment **d. Tympanic segment** e. Vertical segment
88. A 2-year-old boy presents with rapid onset of noisy breathing and drooling. On examination the child is pyrexial, appears distressed and has marked stridor
 a. Asthma b. Croup (acute laryngotracheal bronchitis) c. Respiratory papillomatosis **d. Acute epiglottitis** ✓
 e. Inhaled foreign body
89. A 30-year-old school teacher presents with hoarseness. He is a non smoker. Laryngoscopy reveals bilateral symmetrical ovoid lesions on the anterior third of the vocal cords
 a. Chronic Laryngitis ✓ **b. Vocal cord nodule** c. Reinke's edema d. Vocal cord granuloma e. Vocal cord palsy
90. A 37 year old complains of persistent hoarseness. She has had a multiple previous ITU admissions for brittle asthma. Laryngoscopy reveals a benign looking red swelling on the right vocal cord.
 a. Chronic Laryngitis b. Vocal cord nodule ✓ **c. Vocal cord granuloma** d. Reinke's edema e. Vocal cord palsy
91. In grading the trachoma, trachoma inflammation follicular (TF) stage is defined as the presence of:
 a. Five or more follicles on upper limbus b. Five or more follicles all around the limbus
c. Five or more follicles on upper tarsal conjunctiva d. Three or more follicles on upper tarsal conjunctive
 e. Five or more follicles on lower tarsal conjunctiva
92. A young patient with vernal catarrh presents with dimness of vision. On examination he is having Astigmatism with best corrected VA 6/12 in both eyes. On retinoscopy there is scissor reflex and while looking down Munson's sign is positive. What can be the cause of his decreased vision.
 a. Keratoglobus **b. Keratoconus** ✓ c. Corneal nebula d. Corneal leucoma e. Acute hydrops
93. A 67-year old man experienced sudden loss of vision in the left eye three hours ago. His best-corrected visual acuity is 6/6 in the right eye and perception of light in the left eye. The right pupil responds to light directly but not consensually. The left pupil responds to light consensually but not directly. Fundus shows greyish white appearance with cherry red spot. What is your most probable diagnosis?
 a. Central retina vein occlusion **b. Central retinal artery occlusion** ✓ c. Rhegmatogenous retinal detachment
 d. Diabetic maculopathy e. Optic disc cupping
94. A young boy having history of head injury presents with Bilateral protrusion of eye balls. Conjunctiva is chemosed. There is bruit on the globe and he complains of tinnitus. The most probable cause can be:
 a. Sub dural haematoma ✓ **b. Bleed in 3rd ventricle** ✓ c. Carotid artery Aneurysm **d. Carotid cavernous fistula**
 e. Tolosa hunt syndrome
95. In case of age related macular degeneration all are true except:
 a. There is reduction in central vision b. Fluorescein angiography is useful in diagnosis c. OCT is useful in diagnosis
d. Argon laser photocoagulation is the treatment of choice ✓ e. Anti VEGF is treatment of choice
96. Which one of the following has the major role in refraction of the normal eye?
 a. Tear film **b. Cornea** ✓ c. Lens d. Vitreous e. Aqueous humour
97. In case of entropion all are true except:
 a. Cicatricial pemphigoids b. Conjunctival scarring ✓ **c. Facial nerve palsy** ✓ d. Congenital e. Acute spastic
98. To measure the power of intraocular lens, which instrument is used:
 a. B scan b. Slit lamp c. Perkins tonometer **d. A scan** ✓ e. Diodo laser
99. All of the following can cause proptosis except:
 a. Optic nerve tumor b. Orbital cellulitis c. Orbital varix **d. Orbital blowout fracture** ✓ e. Rhabdomyosarcoma
100. The image in indirect ophthalmoscopy is:
 a. Erect, virtual & magnified b. Erect, real & magnified **c. Inverted, real and magnified** ✓
 d. Inverted real and minimized e. Inverted, virtual and normal
101. The presence of Keyser Fleischer ring is pathognomonic of:
 a. Keratoconus b. Pterygium c. Malignant melanoma of ciliary body **d. Wilson's disease** ✓ e. Siderosis bulbi
102. Right homonymous hemianopia is a visual field defect found in the:
 a. Tumours of pituitary gland b. Right Cavernous sinus thrombosis **c. Lesions of left geniculate body** ✓
 d. Lesions of right geniculate body e. Lesions of optical chiasma
103. Retinoscopy is performed for:
 a. Visualization of retina b. Visualization of intra ocular lens ✓ **c. Objective measurement of the refractive error of patient** ✓
 d. Subjective measurement of refractive status of the patient e. Localization of hole in retinal detachment
104. All of these diagnostic tests are useful in evaluating a patient with retained magnetic intraocular foreign body except:
 a. B Scan b. X ray c. CT Scan **d. Electrophysiology** ✓ e. Vitreous tap
105. After 48 hours of cataract extraction operation, a patient complained of ocular pain and visual loss. On examination, this eye looked red with ciliary injection, corneal oedema, absent red reflex and hypopyon. The first suspicion must be:
 a. Secondary glaucoma b. Anterior uveitis ✓ **c. Bacterial endophthalmitis** ✓ d. Choroidal detachment e. Retinal detachment

PAPER CODE D

77. 20 years old male presented with painful swelling on the upper eyelid margin for the last two days. Lesion is red and edematous and tender to touch. What is the most likely diagnosis?
 a. Chalazion b. Lipoma **c. Stye** d. Dermoid cyst e. Cyst of zeiss
78. A high myope patient presents with sudden loss of vision in his right eye. He gives history of photopsia and floaters in the recent past. On examination he is having right RAPD and on funduscopy there is no red reflex and retina appears grey and mobile. What is your diagnosis?
 a. Exudative retinal detachment b. CHOROIDAL detachment **c. Rhegmatogenous retinal detachment**
 d. Non Rhegmatogenous detachment e. Cicatricial retinal detachment
79. A 45-year-old man presented with gradual decrease of vision for the last few months. According to him his vision in the right eye is more decreased as compared to the left eye. He first started to feel it when he bumped into the objects. His vision is 6/12 OD and 6/6 OS. IOP is 19mmhg OD and 16mmhg OS. There is a deep anterior chamber and on fundus examination CD 0.6 OD and 0.5 OS. The most likely next investigations to reach the diagnosis are?
 a. Visual Fields and OCT Optic disc **b. Visual Fields and HRT** c. Visual Fields and CCT
 d. OCT Optic disc and HRT e. CCT and Gonioscopy
80. A 40-year-old female comes to the outdoor with complaints of frontal headache and decrease of vision while reading and sewing. She can see perfectly from a distance. What is the most likely diagnosis?
 a. Astigmatism b. Emmetropia **c. Hyperopia** d. Myopia **e. Presbyopia**
81. A premature low birth weight baby is brought to eye OPD with the complaint of whit pupillary reflex in both eyes. He was kept in incubator, under high tension oxygen for 02 weeks. What can be the probable diagnosis?
 a. Retinoblastoma b. Bil congenital glaucoma c. Persistent hyperplastic primary vitreous
d. Retinopathy of prematurity e. Toxocariasis
82. A 50 years old hypertensive patient had sudden loss of vision in right eye 3 months back. At that time he was diagnosed to be having ischemic central retinal vein occlusion. Now he presents with severe pain and redness in his right eye. His pupil is midly dilated and right eye IOP is 35mmHg and left eye IOP is 16mmHg. What is your diagnosis?
 a. Acute congestive glaucoma b. Phacolytic glaucoma c. Acute anterior uveitis **d. Neovascular glaucoma**
 e. Ocular hypertension
83. A 60 years old male patient had history of cataract surgery in the camp one week ago. His vision is 6/36 in the operated eye. With Pinhole vision becomes 6/9. On slitlamp examination you see four interrupted very tight stitches causing indentation of peripheral cornea. cornea is clear, lens in place and good fundus view. What is the cause of decrease of vision in this patient?
 a. Wound dehiscence b. Infection **c. Biometry error** **d. With the rule astigmatism** e. Against the rule astigmatism
84. A young lady wearing -02 contact lenses develops redness, pain, watering and dimness in her right eye. On examination her cornea is hazy having central opacity. What can be the most probable cause of her problem?
 a. Fungal ulcer **b. Allergic conjunctivitis** c. Acanthamoebic corneal ulcer d. Acute hydrops e. Acute anterior uveitis
85. A 60 year old woman presented with the complaint of decreased far vision. According to her few months back she was using reading glasses but she was now able to read Quran Pak without near glasses. Her vision is RE 6/60 and LE 3/60. What is the most likely diagnosis?
 a. Posterior Subcapsular Cataract b. Glaucoma **c. Nuclear Cataract** d. Polar Cataract e. Cortical Cataract
86. A 30 years old former presents with a history of trauma to the left eye with a leaf 5 days ago. Now he presents with pain, photophobia and redness of the eye. On examination he has grey white lesion on the cornea with fluffy margins and hypopyon. What would be the most likely pathology?
 a. Anterior uveitis b. Bacterial Conjunctivitis **c. Fungal keratitis** d. Viral keratitis **e. Bacterial keratitis**
87. A 30 years old man gets injured with the blast of UPS battery. He gets splashes on the face and eyes. He cannot open his eyes and has got severe burning and photophobia. What can be the best treatment on site?
 a. Antibiotic eye drops b. Steroid eye drops **c. Copious wash with tap water** d. Topical anaesthetic eye drops
 e. Oral NSAIDs
88. A 8 years old girl received a tennis ball trauma to her eyes. The blunt trauma to the eye commonly results in:
 a. Anterior subcapsular cataract Posterior subcapsular c. Blue dot cataract d. Morgagnian cataract e. Senile cataract
89. Aphakic patient wearing glasses of +10.00 diopters. Magnification of the retinal image is:
 a. 8% b. 10% c. 15% **d. 20%** **e. 33%**
90. A 35 years old man presented with photophobia, pain and decreased vision in his right eye. Pupil was miotic. Intraocular pressure was 15mm Hg. The eye was diffusely red especially around the limbus. There were ++ cells, flare and KPs in anterior chamber. The best line of treatment is:
 a. Topical steroids b. Topical steroids and topical antihistamines **c. Topical steroids and cycloplegics**
 d. Non steroidal anti inflammatory drugs **e. Oral antibiotics**
91. A 30 years old male presented to ENT OPD with history of intense itching, discomfort in the right ear, on ear examination he has a white mass in external auditory canal and look like a wet piece of filter paper, meatal skin was red and edematous. What is the most probable diagnosis?
 a. Cholesteatoma b. Malignancy **c. Otomycosis** d. Foreign body e. Otitis externa
92. A 10 years old boy known presented to ENT OPD with severe pain in the right ear, on examination he has vesicles on tympanic membrane, meatal skin, concha and post auricular groove also he has facial nerve palsy on right sides. What is the most probable diagnosis?
 a. Bell's palsy b. Otitis externa hemorrhagica **c. Herpes zoster oticus** d. Malignant otitis externa e. Otitis media

59. Regarding compound hypermetropic astigmatism which one is true:
 a. Can be treated with spherical & cylindrical convex lenses
 b. Can be treated with only convex cylindrical lens
 c. Can be treated with convex spherical & concave cylindrical lenses
 d. Can be treated with concave spherical & convex cylindrical lenses
 e. Can be treated with concave cylindrical lens only
60. Regarding primary hyphaema after a non penetrating blunt injury all are true except:
 a. It doesn't clot
 b. It can cause raised intra ocular pressure
 c. It absorbs by itself within a week
 d. It always needs A/C was for improvement of vision
 e. It leads to corneal staining if IOP is raised
61. Ectopia lentis can be associated with all except:
 a. Homocystinuria
 b. Buphthalmous
 c. Marfan's syndrome
 d. Voght koyanagi Harada's syndrome
 e. Weill marchesani syndrome
62. Simple hypermetropia can be treated by all except:
 a. Glasses
 b. Contact lenses
 c. Keratophakia
 d. Radial keratotomy
 e. LASIK
63. Retinitis pigmentosa can be associated with all except:
 a. Bone spicule pigmentation
 b. Night blindness
 c. Open angle glaucoma
 d. Bitot's spot
 e. Waxy pale colour of optic nerve head
64. Scleritis is a sight threatening condition which can be associated with all except:
 a. Eye pain or tenderness
 b. Photophobia
 c. Watery discharge from eye
 d. Purulent discharge from eye
 e. Associated with systemic auto immune diseases
65. In case of ptosis (drooping of the eyelid) all are true except:
 a. It is associated with 3rd N. palsy
 b. It can be associated with Horner's syndrome
 c. It can be caused by large upper lid tumour
 d. It can be associated with Marcus Gunn phenomenon
 e. It can be caused by facial nerve palsy
66. In case of dry eyes all are true except:
 a. There is gritty or burning sensation
 b. Red & watery eyes
 c. Can be due to sjogren's syndrome
 d. Can be due to rheumatoid arthritis
 e. Can cause keratoconus
67. In case of malignant melanoma of the choroid all of the following are true except:
 a. It is the most common primary malignant intraocular tumour
 b. It can best be diagnosed by B - Scan
 c. It can cause rhegmatogenous retinal detachment
 d. MRI can be used to help in diagnosis
 e. It can cause serous or exudative retinal detachment
68. A newborn baby is having severe bilateral purulent conjunctivitis, the most common causative organisms for ophthalmia neonatorum in this age are all except:
 a. Neisseria gonorrhoeae
 b. Staphylococcus aureus
 c. Staphylococcus Aeruginosa
 d. Herpes simplex virus
 e. Ocular mycosis
69. All are true in case of Atropine eye drops except:
 a. It can cause hyperthermia
 b. It can induce glaucoma
 c. It can break anterior synechiae
 d. It can stabilize blood ocular barrier
 e. It reduces ocular pain in anterior uveitis
70. All of the following are associated with spring catarrh except:
 a. Giant papillae
 b. Keratoconus
 c. Itching & watering
 d. Tarsal follicles
 e. Corneal plaque
71. A 60 years old hypertensive comes with severe headache and decreased vision in right eye. On examination his VA in right eye is 6/36 and left eye is 6/12. He is having bilateral flame shaped retinal hemorrhages in both eyes along with hard exudates and scattered cotton wool spots. His Right optic nerve head is swollen with surrounding hges. What can be the diagnosis?
 a. Grade IV hypertensive retinopathy
 b. Hypertensive retinopathy with right optic neuritis
 c. Proliferative hypertensive retinopathy
 d. Ischaemic optic neuropathy
 e. Papilloedema
72. A male patient was complaining of continuous redness of both eyes, foreign body sensation and frequent loss of lashes. On examination the lid margins were hyperemic, and the lashes were matted with yellow crusts which left painful ulcers on removal. What is the most probable diagnosis?
 a. Trichiasis
 b. Meibomianitis
 c. Blepharitis
 d. External hordeolum
 e. Contact dermatitis
73. A 40 years old patient has epiphora. On lacrimal irrigation from the lower punctum, saline and puss gets out from the upper punctum. The best treatment is
 a. Systemic and local antibiotics
 b. Probing of the nasolacrimal duct
 c. Dacryocystectomy
 d. Incision and drainage
 e. Dacryocystorhinostomy
74. A 20 years old male presents with gradual loss of vision in his right eye. On examination there is right posterior subcapsular cataract. Aqueous shows mild cellular reaction, small and scattered K.Ps. There is mild colour difference between two eyes. VA right eye 6/60 and left eye 6/6. His IOP is 14 mmHg both eyes. What is the most likely diagnosis?
 a. Anterior uveitis
 b. Fuchs uveitis syndrome
 c. Intermediate uveitis
 d. Posterior uveitis
 e. Chronic uveitis
75. A 35 years old man presents sudden deterioration of vision in right eye. He gives history of paraesthesia in both hands for the last few months. He also gives history of diplopia off and on in the recent past. His symptoms used to get worse after hot bath and physical activity. Ocular examination shows 3/60 VA in right eye and 6/9 VA in left eye. He has RAPD and defective colour vision in right eye. What is your diagnosis?
 a. Retinitis pigmentosa
 b. Optic neuritis
 c. Pituitary tumour
 d. Behcet's syndrome
 e. Ischaemic optic neuropathy
76. A 25 years old man had whip lash injury to his neck. Few months later he comes with the complaint of slight drooping of his right eyelid. On examination he has mild ptosis and Anisocoria with right pupil smaller in size, it is most probably
 a. Argyll Robertson pupil
 b. Adie's pupil
 c. 3rd Nerve palsy
 d. Horner's syndrome
 e. Traumatic mydriasis of left eye

a. Secondary glaucoma b. Anterior uveitis c. Bacterial endophthalmitis d. Choroidal detachment e. Retinal detachment

46. A female patient 50 years old, diabetic since 5 years presented with sudden marked drop of vision of the left eye. On examination, the right fundus was normal, the left fundus showed edema of the optic disc, retinal hemorrhages, hard and soft exudates and dilated tortuous veins. What is the more likely cause?

- a. Non proliferative diabetic retinopathy
- b. Pre proliferative diabetic retinopathy
- c. Left central vein occlusion
- d. Left central artery occlusion
- e. Left Papilledema

47. Risk factors for primary open angle glaucoma are all except:

- a. Family history
- b. Retinitis pigmentosa
- c. Ectopia lentis
- d. Diabetes
- e. High myopia

48. Swimming pool conjunctivitis is caused by:

- a. Chlamydia trachomatis
- b. Adenovirus
- c. Picorna virus
- d. Gonococcus
- e. Herpes zoster

49. Proliferative diabetic retinopathy is characterized by:

- a. Microaneurysms
- b. Hot exudate
- c. Cotton wool Spots
- d. Posterior sub capsular cataract
- e. Neovascularization

50. About chemical injury of the eye all of the following are true except:

- a. Alkali burn is more severe than acid burn
- b. Limbal ischaemia means poor prognosis
- c. Vitamin C is indicated
- d. Symblypharon can be a possible complication
- e. Sympblepharon can be a possible complication

51. All of the following are side effects of oral acetazolamide except:

- a. Paresthesia
- b. Renal stones
- c. Steven Johnson's syndrome
- d. Aplastic anemia
- e. Frequent urination

52. Regarding optic nerve, all are true except:

- a. Intra canalicular part is longest
- b. Intraocular part is the shortest
- c. It has got a central cavity called cup
- d. It represents the blind spot in visual field
- e. Its damage leads to afferent pupillary defect

53. Dysthyroid eye disease can cause which one of the following complications

- a. Retinal detachment
- b. Choroidal detachment
- c. Macular hole
- d. Restrictive myopathy
- e. Anisocoria

54. Yoke muscle of the right superior oblique is:

- a. Left inferior oblique
- b. Left medial rectus
- c. Left inferior rectus
- d. Left lateral rectus
- e. Left superior oblique

55. All of the following can be used to decrease the power of extra ocular muscle during squint surgery except:

- a. Muscle recession
- b. Tenotomy
- c. Myotomy
- d. Muscle resection
- e. Faden's stitch

56. Adherent leucoma is a condition of cornea in which:

- a. Cornea is opaque & attached to vitreous
- b. Cornea is opaque & attached to conjunctiva
- c. Cornea is opaque & attached to eye lids
- d. Cornea is opaque & is attached to iris
- e. Cornea is opaque & is attached to anterior lens capsule

57. All of the following can be present in acute anterior uveitis (non granulomatous) except:

- a. Keratic precipitates (KP)
- b. Aqueous flare
- c. Koeppe's nodules
- d. Miosis
- e. Cells in aqueous humour

58. All of the following can be the cause of cataract except:

- a. Steroids drops
- b. Sympathomimetic drops
- c. Radiations
- d. electrical shock to the face
- e. Systemic metabolic disease

All are correct