

Block N

1) In anterior interosseous nerve injury patient is unable to

- a) dorsiflex wrist joint
- b) adduct/abduct fingers
- b) make "OK" sign
- d) froment sign
- e) Thomas sign

2) In neonates CTEV is treated by

- a) ponseti casting
- b) pavlik harness
- c) surgery
- d) physiotherapy
- e) manipulation tapping

3) Ankylosing spondylitis affects

ans: Spine and sacroiliac joints

4) A 70-year-old woman present with

recurrent episode of parotid swelling.
She complains of difficulty in talking and
speaking and her eyes feel gritty on
waking in the morning. What is the single
most like diagnosis?

- a. Cl esterase deficiency
- b. Crohn's disease
- c. M u m p s
- d. Sarcoidosis
- e. Sjögren's syndrome

5) 28 year old man with lower back pain, diagnosis of ankylosing spondylitis suspected. Which investigation is useful:

- a: ESR
- b: Xray of sacroiliac joint
- c: HLA B27
- d: X-ray thoracic spine
- e: CT lumbar spine

6) 33 yr old teacher presented with a patch of vitiligo and pallor. On examination, there was loss of vibration sense. The test for it is?

- Coombs test
- Osmotic fragility test
- Serum folate test
- Serum B12 test
- RBC folate test

7) man sustained burns involving anterior chest wall and left arm

According to 'rule of nine' percentage of each upper limb is

- A. 6%
- B. 9%
- C. 12%
- D. 10%
- E. 18%

8.) What in burn patients is measured in "rule of nine"

- A. Depth
- B. Total body surface area

9.) A 11 yr old child presented with weight loss for 1 month, difficulty breathing for 1 week, he is wasted with lymphadenopathy, x ray shows wide mediastinum. CBC hb is 9, tlc is 12700, plt are 158000, LDH is five times normal. What is the likely diagnosis?

- A. CML
- B. Lymphoma
- C. ALL
- D. IM

E. Chronic malaria

10.)A patient presented with mid shaft fracture of humerus. Now can't extend the wrist, which nerve is responsible for this?

Median

Ulnar

Radial

Musulocutaneous

Axillary

11.)An asymptomatic patient erythematous well demarcated plaque on face since 3 weeks. The plaque fades away by steroids but relapses after stopping treatment dermatological examination show multiple symmetrical distributed dry indurated plaque on her forehead

Most likely diagnosis

A border line liperpsy

B border line lipermatous leprosy

C border line tuberculosis leprosy

D tuberculoid leprosy

E lapromatus leprosy

12.)which is part of sepsis 6 protocol

Steroids

Dvt prophylaxis

Vasopressors ct

13)patient with colicky pain abdomen multiple aur fluid levelson xray are characteristic of which sign

14)Onion peel appearance on radiograph is characteristic of:

A. Osteosarcoma

B. Chondroblastoma

C. Ewing's

D. Myeloma

E. GCT

15)A 35 years old man labor at form, comes to you with recurrent generalised pruritic scaly plaques since 1 year. His skin problem started from neck and gradually spread to the rest of body. Initially his condition improved when he was off his job and used topical treatment along with antihistamines. Since 4 weeks topical treatment is not giving him complete relief. His CBC , LFTs are normal. What is his diagnosis?

1) Allergic contact dermatitis

2) Irritant contact dermatitis

3) Atopic dermatitis

4) Photocontact dermatitis

5) Exfoliative dermatitis

16)48- year-old patient presented to her family physician complaining of pain all over her body for the past 4 month. She is also complaining of sleep disturbance and lethargy. On examination, the doctor finds multiple tender points that patient has including areas on her neck, elbow regions, and knees. Which is the most likely diagnosis in this patient?

a. Polymyalgia rheumatica

B Fibromyaigia

c. Polymyositis

d. Ankylosing spondylitis

e. Rheumatoid arthritis

17)14year old boy with swelling in left inguinal region has abdominal pain referring to lower back.

(most probably indirect inguinal hernia)

18)9 yr male dx with ankylosing spondylitis, txt: NSAIDS and exercise

A.Hurshsprung disease

B.muconium plug syndrome

C.Duodenal atresia

E.Cystic fibrosis

D.Pyloric stenosis

20.A 4 years old female has presented with history of fever and pallor. The patient is having dark skin colour with multiple café au lait spots on his trunk.

He is short stature and having polydactaly. His CBC shows Hb: 7.0 gm/dl, TLC: 3800, platelet of 70000 and retic count of 0.5, while His Hb F by acid elution method is 8%. What is the most appropriate diagnosis?

- a. Malaria
- b. Diamond Blackfan syndrome
- c. Fanconi Anemia
- d. Acquired Aplastic Anemia
- e. Bernard- Soulier Syndrome

21. A 7 years old girl presented with fatigue, difficulty in swallowing and joint pains for the last 2 months. O/E she has bluish violet discolouration of the eyelids and papules on proximal and distal interphalangeal joints. What is most likely diagnosis?

- A. Juvenile Dermatomyositis
- b. Myasthenia Gravis
- C. SLE
- d. GBS
- e. Tropical pyomitis.

23. 12 Years old girl presented with pain and stiffness of hand joints, has rash that crosses her nasal bridge and cheeks. She is also giving history of mouth ulcers. The investigation of choice

- a. Anti cardiolipin antibodies
- b. Anti nuclear antibodies
- c. Antibodies to Double stranded DNA
- d. Rheumatoid Factor
- e. Increased ESR

24. HLA DR 2, DR5 and DR8 in which type juvenile idiopathic arthritis:

- A. Polyarticular disease
- B. Oligoarticular disease
- C. Mono articular
- D. SLE
- E. Multisystem

27. A 3 year old child presented to OPD with complaint of difficulty in climbing stairs. On examination he has calf muscle hypertrophy and lordosis. What is the pattern of inheritance?

- A. Autosomal dominant
- B. Autosomal recessive
- c. Idiopathic
- D. X linked dominant
- e. X linked recessive

32. An elderly bedridden patient due to osteoarthritis had irrelevant speech for the past 3 wks. He had been using painkillers. He developed constipation 4 days ago and now has productive cough. His reason for irrelevant speech:

- Analgesic toxicity
- Frail elderly
- Depression

34. A 55 year old male smoker presented with tearing pain in the chest. On examination, his right side BP was 180/20 and left side 120/90. What is your diagnosis.

- A. Acute MI
- B. Pericarditis
- C. Aortic dissection.
- D. Pneumothorax

34. 50 year old post op patient with leg swelling and tenderness. US confirmed DVT. Best treatment?

- A. LMW heparin
- B. Aspirin
- C. IV fluids
- D. Antibiotics
- E. Compression stocking only

35. Aged man, Non healing ulcer for 3 months, red, indurated and erythematous.

All investigations are normal.

What is Dx?

36. Sepsis 6 protocol

50. A 20-year-old student has presented with Pallor. On Complete blood count his Hb is 9g/dl , MCV 60f1 and RBC count 5 million/mcl. What is the most likely diagnosis

A iron deficiency anemia

B 12 deficiency anemia

C thalassemia

D myelodysplasia

E myelofibrosis

51. A 52 yo gentleman presented with and discomfort since 2 months. u/s showed splenomegaly and Significantly enlarged paraaortic Lymph nodes ..what is the diagnosis...

Cml

Kalazar

Malaria

Gaucher disease

Lymphoma

52. A 27 year old school teacher presented to medical OPD with prescription slip of periphery doctor mentioning bilateral cervical lymphadenopathy . Appropriate next step

a) lymph node biopsy

b) detailed history and examination

c) ultrasound neck

d) FNAC

e) referral to ent opd

55. 25 yr old female with 5th month of gestation was referred by gynaecology with platelet count of 80,000/mcl for hematologic review.what is the dx

A.Itp

B.ttp

C.Gestational thrombocytopenia

D.aplastic

E.HELLP

56. A 23 year old football player has presented with fever, splenomegaly and pancytopenia for the last one month. Which among the following is the most likely diagnosis?

A) Sickle cell anemia

B) Megaloblastic anemia

C) Aplastic anemia

D) Acute Leukemia

E) Beta Thalassemia Major

64. 26 yr old college student presented with progressive pallor for 2 weeks. Also mildly anemic .

What could be the hematolgical cause?

A IDA

B Sideroblastic

C folate deficiency

D Immune hemolytic anemia

E : Aplastic anemia

85. A factory worker clean cut of tip of finger bone exposed management

A.Skin graft

B.Local flap

93. Presented to skin OPD with multiple scaly and oozy plaques. Largest 3-3cm and smallest 1.5-1.5cm with bilaterally symmetrical on both upper and lower limb. Ass with severe pruritis.

A. Discoid eczema

B. Guttate psoriasis

C. Pityriases rosacea

94. 9yr old 3 day hx of fever lethargy congested eyes

On ex multiple discreet vesicles on erythematous base and crusted papules on trunk

And erosion on palate

Options

Varicella

Measles

Infectious mononucleosis

Molluscum contagiosum

107. 28 year old man with lower back pain, diagnosis of ankylosing spondylitis suspected. Which investigation is useful:

- a: ESR
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108. A 57-year-old man who has late ankylosing spondylitis. What pulmonary feature might you see on his chest radiograph?

- a. Apical fibrosis
- b. Bilateral hilar lymphadenopathy
- c. Peripheral granulomas
- d. Basal fibrosis
- e. Increased pulmonary vasculation

109. 44-year-old woman is seen in the rheumatology clinic. She has been referred with Raynaud's phenomenon.

During the review of systems she mentions that her GP is organizing an endoscopy to investigate dyspepsia. On examination she is noted to have tight, shiny skin over her fingers. Which one of the following complications is she most likely to develop?

- a. Bronchiectasis
- b. Angiodysplasia
- c. Arterial hypertension
- d. Chronic kidney disease
- e. Pulmonary hypertension

110. A 57 years old female presented with a complaint of skin of hands felt tight and fingers turned blue. She also has difficulty in swallowing both solids and liquids. Which autoantibodies need to be assessed in this patient?

- a) anti DNAs
- b) anti centromere antibodies

117. Laboratory test for diagnosis of rheumatoid arthritis