

# MEGA COLLECTION OF RECALL QUESTIONS.1999\2000\ 2001\2002\2003\2004\ 2005\2006\2007\2008

MCQ 2001 May RECALL QUESTIONS  
MEDICINE

1. In which of the following diabetic ketoacidosis most commonly presents with

1. Undiagnosed IDDM
2. Undiagnosed NIDDM
3. Known IDDM when stopped Insulin
4. Known IDDM with foot infection

2. Which is correct for NIDDM

1. Genetic factor is more important in IDDM than NIDDM
2. They will never require insulin
3. 10-20% of IDDM need hypoglycaemic agents
4. Abdominal fat is the risk factor for NIDDM

3. Papillary necrosis Except

1. Analgesic nephropathy
2. Alcohol Nephropathy
3. Medullary sponge kidney
4. Diabetis

4. Picture – girl Acne and hirsutism on the face. Presented for the first time

1. Antibiotics
2. Antibiotics and retinoids
3. steroids cream
4. antiandrogen(Danazol)
5. cyproterone acetate

5a. Picture with 3 lesions- with raised border

1. Granuloma annulare
2. Erythema multiforme
3. picture –AMC book – lesion on the face
4. Mycosporum canis

5. What is not true about parkinsons disease

1. can stop while walking involuntary
2. tremor at sleeping
3. rest tremor
4. affect one side more than the other
6. Mycoplasma pneumonia not true

1. severe cough

2. high fever
3. pleuratic paing]

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211

Recall Paper AMC MCQ EXAM OCT 1999

Surgery

1. A young patient present with a lump in the arm. You are unsure about its nature. What do you ask to help to establish your diagnosis? Choice what is the best response?
  - A. Is it painful?
  - B. Is there any lump in other side of the body?
  - C. Is there any change of bowel habit?
  - D. What do you think cause of the lump?
  - E. How long it present?
2. What is the common cause of bone tumour in the pelvis of young adult?
  - A. Metastatic Tumor
  - B. Osteoma
  - C. Osteosarcoma
  - D. Chondroma
  - E.
3. What is the common cause amaurosis fugax (transient mononuclear vision)?
  - A. Stenosis of internal carotid artery?
  - B. Giant cell arteritis
  - C. Vertebral artery occlusion
  - D. Embolism to middle cerebral artery.
  - E.
4. A women developed tinnitus and sensory neural deafness decreased sensation in trigeminal area. What is the most likely cause?
  - A. Acoustic neuroma.
  - B. Brain stem infarction.
  - C. Vestibular neuritis.
  - D. Vasculitis.
  - E. Meningioma.
5. What is true about carcinoma of lip?
  - A. Usually in upper lip.
  - B. Usually squamous cell in origin.
  - C. Metastasis to cervical lymph node.
  - D. Exclusively occur in men.

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158

AMC MCQ recall-paper October 2001

Medicine

1. A 18 yrs old lady came with hypertension. She has a history of enuresis up to 13 years. WOF is the most likely diagnosis?
  - a) Reflux nephropathy
  - b) Hypertension
  - c)

2. Erythema nodosum can occur in all of the following condition except

- a) streptococcal infection
- b) TB
- c) Rheumatic fever
- d) SLE
- e) Leprosy

3. A picture of scalp with hairless round area

- a) Tinea capitis

4. A picture of hand with scaly shiny things on it

- a) Psoriasis

5. How can we monitor heparin?

- a) INR
- b) APTT (activated partial thromboplastin time)
- c) Fibrinogen

6. A pt with von Willbrand's disease . What is the most likely she has

- a) Prolonged bleeding time

7. A 62 yr old man has a long history of COPD and dyspnoea, blood gas showed pCO<sub>2</sub> 68 mm Hg pO<sub>2</sub> 60 mmHg. He was given 28% O<sub>2</sub> therapy. After an hour the blood gas showed 7.37, pO<sub>2</sub> 80mm of Hg and pco<sub>2</sub> 40 mm of Hg but the pts clinical condition didn't improved. WOF IS NEXT THERAPY

- a) Bronchodilator
- b) Hydrocortisone
- c) Intubations and ventilation

8. ABOUT AMYLOIDOSIS all of them are associated except

- a) Leprosy
- b) TB
- c) Multiple myeloma

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102

MAY 2006

3. PT comes to u with dec breathing sounds on the right middle lobe and consolidation and dullness in percussion

- 1 Bronchiectasis
- 2 PL effusion
- 3 pulmonary collapse
- 4 Peumothorax

9. Picture of Psoriasis Anthology book and ask about the RX

- 1 topical steroid
- 2 oral steroid

Erythromycin

4intralesional steroid

11. Patient with dilated pupil and history of pain in the eye with nausea and vomiting

- 1 apply topical acetazolamid
- 2 Topical pilpcarpine
- 3 check the eye to look for foreign body
- 4 apply atropine

12. an old male C/o of short history of malaise anorxia when he was in a short trip to Balli His wife think he is jundised now he C/o chills and inc bilirubin, inc A L P sligh inc in AST AND ALT the diagnosis is

- a1 cholangitis
- 2 viral hepatitis
- Malaria

16. An old man with chronic renal failure. His MCV count is of (80-90) it falls even after some time when he is started erythropoietin therapy when he stopped he became also anaemic what is this due to?

- 1 Iron def. anaemia
- 2 bone marrow fibrosis
- 3 folic acid def
- 4 red cell atypia

24. You are called to solve a fight between head nurse and a psychiatric patient. On your arrival the patient tells you that he should be allowed to remove the IV line as he has private insurance & you being a doctor would understand this because you will also have private insurance you wouldn't be like these nurses who are without private insurance. What is the patient trying to do

- 1 regression
- 3 projection
- splitting

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49

AMC MCQ 2005B2

Recall, Adelaide, 'Version alter, off handwritten original'

1. 4 days after Normal Vaginal Delivery came with 38°C fever,
  - a. Unsutured vaginal tear.
  - b. DVT
  - c. Endometritis
  - d. Mastitis
  - e. Breast Engorgement
2. Which one is normal in new born
  - a. fever
  - b. HR less than 70
  - c. Breast enlargement
3. Best to know gestational age
  - a. US at about 8 wks
  - b. US at about 18 wks
4. Common side effect of olanzepine
  - a. Neutropenia
  - b. Hypotension
  - c. Sexual dysfunction
  - d. Weight gain
  - e. Parkinsonism
5. Treatment of trigeminal neuralgia
  - a. Carbamazepine
  - b. Nortriptyline
6. Not in MS
  - a. 3rd heart sound
  - b. calcification
7. 38wks gestation, in labour with some complain (cant remember properly), PV done, next step.

- a. PV
  - b. CTG
  - c. CS
8. A pregnant woman of 32 weeks of gestation will report to the hospital for all of the reasons except,
- a. show
  - b. rupture membrane
  - c. profuse bleeding
  - d. blurring vision with ankle edema

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1

AMC MCQs from Web

PSYCHIATRY

1. A lady with a previous divorce now comes to you with a seductive behaviour
- a. Narcissistic
  - b. Histrionic
  - c. Borderline
2. In Australia bush fires are common either accidentally or some people lighting fire deliberately. Which is true regarding pyromaniacs?
- a. Done for notoriety or publicity
  - b. To hide their acts
  - c. As they like to play with fire
  - d. Set fire and get panic attacks
  - e. For satisfaction
3. Depersonalization may occur in
- a. Schizophrenia
  - b. Ecstatic religious experience
  - c. Depression
  - d. Post traumatic disorder
  - e. All of the above
4. A middle aged lady present to you with nausea dyspepsia abdominal distension. She had a past history of going to many doctors and being treated for many disorders. She has been treated by a rheumatologist for aches and pains, cardiologist for her palpitations and gave her propranolol without improvement, a neurologist for her epilepsy. On examination you find a tense anxious woman in spite of her daily dose of benzodiazepine. There are scars from appendectomy and hysterectomy operations. What is the most appropriate diagnosis?
- a. Munchausen syndrome
  - b. Conversion disorder
  - c. Hypochondriasis
  - d. factitious disorder,
  - e. Neurotic anxiety
5. Many psychopharmacologic substances are lipophilic the advantage is
- a. better absorbed with meals
  - b. promptly binds with free fatty acids
  - c. more resistant to be metabolized by the liver
  - d. they pass rapidly to the brain and to the blood
  - e. a drug which has a long life and needs to be given once a day daily

## July 2005 AMC MCQ Recall Topics

### PICTURES

1. Kaposi's sarcoma x 2 on arm – most likely cause of cough and dyspnoea in the patient?  
Pneumocystis carinii pneumonia
2. Radiograph Colles fracture – what is an important step in assessment of this fracture?  
Assessment and documentation of median nerve function
3. Radiograph Colles fracture – after reduction and casting, patient complains of paraesthesia and swelling of fingers and hand, what is the most appropriate next step in management?  
Split cast along both sides
4. Lower limb cellulitis in a diabetic man, no ulceration. What is the most appropriate antibiotic combination in this patient?  
a) Flucloxacillin and penicillin b) flucloxacillin and gentamycin c) ampicillin, gentamycin, metronidazole
5. Ulcerated nodular skin lesion on the dorsum of hand with variegated pigmentation, notably arcs of melanin surrounding central nodule. What is the most likely diagnosis?  
Malignant skin lesion
6. Hand showing a swan neck deformity on index finger. Which of the following is true?  
This deformity is more likely to be found in rheumatoid arthritis than osteoarthritis
7. Completely round clearing in the hair of a child. No satellites. What is the most likely diagnosis?  
Tinea capitis
8. Two skin lesions, only one in focus. Erythematous macular lesion, lichenified with silvery keratin scaling. Clearly defined borders. What is the most likely diagnosis?  
Psoriasis

### TOPICS

1. Jaundice, elevated ALT, sore throat, atypical lymphocytes in young student. What is the most likely diagnosis?  
Viral Hepatitis
2. Young student complains of malaise. On examination no jaundice, cervical lymphadenopathy and investigations reveal mildly elevated ALT. What is the most likely diagnosis?  
Infectious mononucleosis
3. Young medical student with scleral icterus, mildly elevated bilirubin, mostly unconjugated and no significant history. otherwise fine What is the most likely diagnosis?  
Gilbert's syndrome
4. 65 year old man complains of lethargy. On examination pale and splenomegaly present. FBC and diff shows anaemia with elevated WCC (predominantly lymphocytic). What is the most likely diagnosis?  
a) CLL b) CML d) lymphoma
5. Elderly lady complains of lethargy. On examination pale and glossitis present. FBC and diff show anaemia with macrocytosis and segmented monocytes nucleus and reduced PLT What is the most likely diagnosis?  
Pernicious anaemia
6. Which of the following conditions is not associated with erythema nodosum?  
Rheumatic fever
  
7. Which of the following results would be inconsistent with a diagnosis of neural tube defect?  
Decreased AFP
8. What is the most appropriate test to monitor eradication of H. pylori one week after commencement of triple therapy?  
Urea breath test
9. Elderly man complains of non bilious vomiting on a background history of treated duodenal

ulcers. What is the most likely cause of his vomiting?

Sequelae of chronic duodenal ulceration

10. Which of the following is characteristic of carpal tunnel syndrome?

Pain at night along lateral 2.5 fingers

11. Carpal tunnel syndrome in pregnancy, which of the following is true?

Rarely requires surgical intervention

12. Patient with wasting of all small muscles of one hand including thenar ones. Where is the site of the lesion?

Brachial plexus

13. Patient with symmetrical distal wasting of small hand muscles bilaterally. What is the most likely diagnosis?

Syringomyelia

14. Which nerve is most likely to be involved in spiral fracture of the humerus?

Radial nerve

15. Which nerve is most likely to be involved in anterior dislocation of the shoulder?

Axillary nerve

16. What is the best choice for pain relief during reduction of a dislocated shoulder?

Fentanyl and midazolam

17. Which of the following regarding narcotic analgesics is true except?

In general, morphine is safer than pethidine

18. Define incidence.

Number of new cases in a period of time

19. After cardiovascular diseases, what is the next most common cause of death in the general Australian population?

Malignancy

20. In a patient with a molar pregnancy, what is the most important component of her follow up with regards to possible malignancy?

Serial hCG estimation

21. Which of the following is true regarding managing chest pain?

No thrombolysis with a normal ECG and cardiac enzymes

22. Which of the following drugs is least likely to cause serotonin syndrome in a patient on a SSRI?

Moclobemide ?? Other options are:

L-tryptophan

Citalopram

Amitriptyline

23. Working as a pathologist, reviewing the results of a woman after an episode of vaginal bleeding. Findings – endometrial hyperplasia, US shows empty uterus, elevated hCG. Considering the female patient has been discharged into the community, what is the most appropriate next step in management?

Recall patient immediately, arrange for laparoscopy

24. What is the least likely diagnosis for right iliac fossa pain in a woman at 17 weeks gestation?

Ectopic pregnancy

25. GCS score estimation – withdraws to pain, incomprehensible speech, eye opening to pain.  
8

26. Find the PA-aO<sub>2</sub> given FiO<sub>2</sub>=0.21 and PO<sub>2</sub>=68 and PCO<sub>2</sub>=40 (alveolar arteriolar oxygen tension difference).



32 from  $PAO_2 = FiO_2 \times 760 - 47 - (PaCO_2/0.8)$  and gradient =  $PAO_2 - PaO_2$

27. Regarding the Mental Health Act, which of the following is true?

May save lives in the mentally ill

28. Regarding splenectomy in patients with spherocytosis, which of the following is false?  
Persistence of anaemia
29. Hyperpigmented man with small testes and diabetes. What is the diagnosis?  
Haemochromatosis
30. What is the most appropriate test for diagnosing haemochromatosis?  
Ferritin (liver biopsy is NOT a given option)
31. Child vomiting, electrolyte derangement high K low Na and low Cl. What is the most likely diagnosis?  
Congenital adrenal hyperplasia
32. Child with vomiting and diarrhoea. Which electrolyte abnormality is most likely to cause convulsions?  
Hypernatraemia
33. Child seizing occasionally. Characteristic folding over whilst watching television. What is the diagnosis?  
Infantile spasm
34. Elderly man with symptoms and signs of small bowel obstruction. What is the most appropriate IV fluid for replacing losses?  
Hartman's solution
35. Male patient complains of retroorbital headache that awakens him during the night accompanied by watering nasal mucosa and tearing from one eye. Which of the following medications will be appropriate for use in this patient?  
Methysergide
36. In cardiopulmonary resuscitation, which of the following signs is the best indicator of successful resuscitation?  
Reversal of pupillary changes
37. Which of the following organisms is most likely to cause diarrhoea from a patient with recent travel history to Indonesia?  
ET E. coli
38. A patient with recent travel history to Nairobi complains of cyclical fevers. Which of the following investigations will be most useful in reaching a diagnosis?  
Examination of thick peripheral blood film
39. A child complains of a clean laceration on his scalp. Has not been vaccinated. What is the most appropriate management?  
DTP vaccine
40. A man who is grandiose, arrogant, little empathy for others, considers himself special. What is the most likely psychological disorder in this man?  
Narcissist
41. What is the treatment of choice for migraine?
42. a patient presents with distal weakness and atrophy of small muscles of both hands/  
syringomyelia
43. which of the following is most appropriate for EDC?  
a. Sonography at 8 weeks

#### Recall Questions 18 July 2005

- 1- Oestrogen and Progesterone, as oral contraceptives where do they function?  
a) Endometrium b) Ovaries c) Hypophysis d) Hypothalamus
- 2- Mental Health Act  
a) Same in every state b) Restricts liberty c) Saves lives
- 3- X- Ray of wrist showing Smith's fracture, initial management?  
a) Plaster elbow and wrist b) Plaster wrist & hand c) ORIF d) Check median nerve

4- Same X- Ray, it was put in plaster, patient feels pins & needles, management?  
a) Release distal part of the plaster b) Remove plaster c) Pain relief, send her home

5- Picture of lesions on dorsal hand (blisters), cause of his pneumonia?  
a) Strep. Pneumonia b) Listeria c) Mycoplasma d) ?

6- Hypnagogic hallucinations occur in?  
a) Schizophrenia b) Delirium c) Normal sleep

7- Patient with vertigo and tinnitus, no deafness, diagnose?  
a) Meniere b) Vestibular neuritis c) Acoustic neurinoma

8- Baby was delivered with forceps, not moving one arm, diagnose?  
a) Erb's palsy

9- Picture of a man arms raised (AMCQ book)  
a) Retrosternal pressure b) Cervical rib c) Subclavian steal

10- Young man wakes up with pain behind one eye, pain spreads to same side of his head, lasts one hour, diagnose?  
a) Migraine b) Cluster headache c) ?

11- Which is not characteristic of Rheumatic Fever?  
a) Erythema nodosum

12- Malignant cells in ascitis, what other symptom would you expect?  
a) Supraclavicular lymph node enlargement

13- Young man had MVA, opens his eyes to stimuli .....  
What blood levels would you expect to find?  
Answers included five different O2, CO2 and pH levels

14- Lady is HIV positive, which statement is correct?  
a) She has a life long disease

15- Which of the medications below would cause a serotonin syndrome when used together with SSRI(except)?  
a) Tryptophan b) Olanzapine c) Meclobomide d)halopridol

16- Man has a recently darkened skin, lethargy. Ferritin, Iron, AST and ALT levels are elevated, diagnose?(what is the best diagnosis? a)ferritin level b)serum Iron c)TIBC  
a)Haemachromatosis

17- Young man has neck rigidity, headache, fever. CSF results: Protein: N, Glucose: lower end of normal range, also PMN cells, diagnose?  
a) TB meningitis b) Viral meningitis c)bacterial meningitis

18- 24 yr old pregnant, P2 G1, 38 weeks and she is in labour. She is 150cm tall. On exam, her pelvis looks small but cervix is 4cm dilated, next management?  
a) Pelvimetry b) U/S c)Caesarian d) Trial of vaginal delivery

19- Reason for UTI in pregnancy?  
a) Dilated ureter b) Dilated ureter&calices c) Immune deficiency

20- Which statement is correct regarding Hyperkalemia?

a) Calcium gluconate given to reverse ECG changes occurred due to Hyperkalemia

21- A few Qs regarding facial oedema, proteinuria, haematuria and differential diagnoses between Nephrotic synd, AGN, etc.

22- Old lady with unilateral headache, tenderness, ESR elevated, treatment?

a) Aspirin b) NSAID c) Prednisone (15)25mg d) Prednisone 75mg

23- For what age group is mammography most useful?

a) <35 yrs b) 35-50 c) 50-65 d) All ages

24- Boy with a small clean cut to his scalp, he is not immunised, management?

a) Toxoid b) Clean, send home c) Immunglobulin d) Toxoid & Immunglobulin

25- Picture of Dupuytren contracture, location of the lesion?

a) Distal flexors b) Digital extensors c)?

26- Facial nerve damage is most likely to occur in(except)?

a) Parotitis b) Parotid Ca c) Temporal fracture d)?

27- All expected in Post splenectomy except?

a) Normal life span of erythrocytes

b) persistent anaemia c) positive osmolarity fragility test

28- Child sits unsupported, can weight bear with support, how old is he?

a) 7 months b) 5 months c) 9 months d) 11 months

29- Patient with exacerbation of COPD, in respiratory failure. O<sub>2</sub> given at 28L/min, ABG: O<sub>2</sub>: 48 CO<sub>2</sub>: 58. Next management?

a) Mechanical ventilation b) Stop O<sub>2</sub>, repeat ABG in 30 min.

30- She had 3 miscarriages from first partner, 2 miscarriages from second partner. Most likely cause?

a) Chromosomal abnormality b) Cervical incompetence c)?

31- 50 yr old man with Hx of Duodenal Ulcer, lost weight, pale. Most likely cause?

a) Duodenum Ca b) Gastric Ca c)?

32- Picture of scalp, area of hair loss, psoriasis-like appearance, diagnose?

a) Alopecia areata b) Psoriasis c) Trichotillomania d) Tinea Capitis

33- A few Qs re differentiation of hepatic and gallbladder diseases

34- Q re neurosyphilis

a) tabbes dorsalis

35- Picture of large goitre in which condition does the surgery required?

a) airway constriction

36- Values of osmolality and sodium in urine and plasma given, differential Dx between SIADH and D Insipidus

MCQ Exam – 18th July 2005

RECALL QUESTIONS

Pictures –

1 SU Q-19 (AMC) book –

Man presented with a neck swelling and a feeling of dizziness when reaches upwards – Retrosternal goitre (venous obstruction from the extension of goitre)

2 On the dorsum of hand 2cm irregular margin, skin lesion, black brown

– malignant melanoma of skin

3 Two brownish – red large (2cm) size lesion with ceratosis – back of a young man – Kaposi sarcoma

– suggestive of AIDS (HIV)

4 Hair loss on the scalp of a child

– Alopecia Capitis

5 Two lesions with scaly lesions over – look like silvery scales

– Psoriasis?

6 Index finger – extruded and flared at distal Interphal joint – what is the lesion? (Trigger finger)

• Nerves or tendon affected

• Flexion or extension deformities

• More in RA than osteoarthritis

7 A diabetic man with severe redness of one lower limb with some hair follicles infection – whole leg below knee to ankle – cellulitis with infection. Not sensitive to any drug – treatment – many options:

• Flucloxacillin & penicillin

• Gentamycin & ampicillin & metronidazole

• Amoxicillin

• Ampicillin & Gentamycin

8 An old woman fell on her out-stretched hand – X-ray – wrist.

Diagnosis – Colle's #

9 (Same picture in 2nd paper)

Patient complains of severe pain and swelling of fingers and redness – immediate management?

• Repeat X-ray

• Refer to the nearest GP

• Review after 24 hrs

• Split both sides of the plaster

• Antibiotics

10 Patient with fever, pleuritic pain – dull on percussion (R) side, bronchial breath sounds on (R) side. Most consistent with

– Consolidation (R) lung.

11 Picture of a lady with large swelling neck – visible as multiple nodules

– Multinodular goitre.

All the pictures probably from 'the Anthology of Medical Conditions' (AMC publication)

12 Confused patient in ED after the trauma assess the level of consciousness

– Glasgow Coma Scale

13 Patient with Wernicke's encephalopathy – treatment options

– IV thiamine & glucose infusion

14 In a hypertensive patient – thrombolytic therapy. Investigation most important

PT, APTT, FBC.

INR, Bleeding time

15 Nephrology – 1 question

16 Which condition will lead to chronic hepatitis?

– Hepatitis C

17 Liver disease – ALT/AST/bilirubin elevated. Patient with fever. Dark urine – most suggestive of?

– Acute Hepatitis B

18 Haemochromatosis – most favourable diagnostic test

Eg. Ferritin, TIBC

Serum transferrin binding

Prothrombin time

19 A man had bike accident – fractured end of tibia, 3 cm over the skin – pierced (compound #).

Most appropriate treatment

– TT & immunoglobulin & Antibiotics

20 2 yr old child fell down – with minor lacerations on scalp – no H/O immunisation – what will you do?

- Give DPT

21 5 yr old child with severe diarrhoea convulsion – cause?

- Hyponatraemia = Na<sup>+</sup> 165

22 6 wk child with forceful vomiting, mild dehydration. Electrolysis Na<sup>+</sup> 119, K<sup>+</sup> 7.5, Cl<sup>+</sup> 110.

Likely diagnosis

– Cong: adrenal hyperplasia

23 7 yr old child with morning headache and vomiting for 3 months – last six weeks he had ataxia family H/O migraine and school epidemic of chicken pox – possible diagnosis?

- Posterior fossa tumour

24 2 yr old child with severe cough, recurrent resp: infection. Failure to thrive – what test is important?

- Sweat Chloride Test

25 6 month old infant brought with funny turns, sudden flexion of upper and lower limbs – for 1 week

– Infantile spasm

26 2 yr old child with wheezing on one side of lung for two days – investigation

- Inspiratory and expiratory lung x-rays

27 A child – rolls from side to side, sits for some time without support, grasp things with palm – assess the age – development

3, (7), 10 1 yr – 18 months

28 New born baby – first step in resuscitation – on the baby?

- Pharyngeal suction, naloxone injection. Intubation, oxygen mask, nasal suction

29 A child can't see writing on the board – in the class but can use computer. What is he suffering from?

- Hypermetropia, Astigmatism, Myopia. Cataract, Presbyopia

30 21 yr old lady returned from Bali, after holidays, with diarrhoea with no blood – Diagnosis?

- Toxigenic E. Coli

31 A medical intern from other country, colleagues noticed yellowish discolouration of her eyes – she has no other symptoms – Probable diagnosis

• Early Hepatitis

• Mild jaundice

• Iron deficient: anaemia

• Acute Hepatitis B

32 Patient with H/O snake bite – no bit mark – no symptoms of poisoning

• Send him back home – nothing wrong

• Observation for 24hrs

• Open the area, apply tourniquet in tight, antibiotics

• Inject polyvenom

33 A case of temporal arteritis – Management?

34 Otosclerosis

• Appearance of tympanic membrane

• Narrow eustachian tube

• Deafness

• Ménière's disease

35 A boy with fever, pain and swelling of (R) knee – pain at upper end of tibia – mobility of the knee joint affected.

? septic arthritis

? osteomyelitis

36 Question about Reiter's disease

37 One case of growth & development retardation

- X-ray wrist and other investigation

38 19 yr old boy – height and weight m..... with BP 150/76

- Check BP 24 hours
- Blood test
- Check the BP cuff size
- Antihypertensive treatment

39 Lady with weakness of small muscles and of forearm bth hands. Diagnosis is?

- Vertebrobasilar artery
- Multiple sclerosis
- Syringomyelia
- Bilateral ulnar nerve palsy
- Meulievs disease

40 Dislocation of shoulder –

- what is the Anaesthetic used to correct this dislocation

41 Spiral # midshaft of humerus which structure affected

- Radial nerve

42 Paralysis of small muscles of hand, wrist flexion affected (except ....., interossei, hypothenar)

- ulnar nerve injury above wrist

43 Carpal tunnel syndrome

- surgery usually not required

44 For major surgery – antibiotic is given-

)• 1 hour before operation (

- time of incision
- 12 hours after operation
- 24 hours before operation

45 Undescended testis – bring down this testis and fix

- Orchiopexy

46 Inguinal swelling that disappear when lying down

- direct inguinal hernia

47 Breast engorgement in a male baby (new born – 2 days)

- normal condition

48 Fistula is – correct description?

49 A man with claudication (calf) pain, forced to stop after 100 metres – investigation

- Arteriography
- Doppler method
- X-ray

50 Ca – don't metastasise to brain

- Ca prostate

51 WOF Ca mostly metastasise to bone?

Ca Stomach

Breast

Bladder

Rectum

Oesophagus

52 Patient with mastalgia – failed conservative treatment. WOF to be considered –

Bromocriptine, danazol, oestrogen, combine OCP, progesterone

53 3 month old boy with recurrent sticky eye since birth – 1st time responded to antibiotic – what is the diagnosis

- Chlamydia infection
- Gonorrhoea infection
- Cong: duct blockage
- Herpes infection

54 Sensory supply to ant: 2/3 of tongue:-

Trigeminal N; IXth CN

Facial N; IIIrd CN

55 A patient with duodenal ulcer after treatment for eradication of H-plori – most accurate test to prove eradication?

Endoscopy – biopsy

Urease test, serology, breath test

56 A newborn developed cyanosis and breathing problem. What is the cause?

- Fallot's tetralogy – VSD
- Pul: hypertension
- Transposition of GA

57 How will you differentiate – finding in ASCITES with large ovarian tumour

58 Diabetic man with ulcer sole of foot (toe). Associated with

- Venous ulcer
- Arterial supply decreased
- Peripheral neuropathy

59 Patient with tension Pneumothorax – Large bore needle in the 2nd space anteriorly

60 Side effect of depo-provera – Except?

61 Contraceptive effect (action) of microgynon-30

62 One question about CTG

63 40 year old man came with H/O. Mother had colorectal Ca – advise for him – he is scared ? Do colonoscopy for him

® serum Na<sup>+</sup> and changes with (64 Patient with urine osmolality –

SIADH

Diabetes insipidus

Hyperlipidaemia – Adrenalhyperplasia

65 Child with H/O no day fever and rashes on face – what investigation to be done

Throat swab, Urinalysis

Blood culture, Antibiotic treatment ?

66 18 year old female with hypertension and history of enuresis. Her 2 sisters have the same problem – Diagnosis?

- vesico – ureteric reflux

67 A male with grandiose sense of self-importance and preoccupied with fantasies of power – not sympathetic to others –

- narcissistic personality

68 A patient with suicidal ideas – WOF will cause his safety least likely?

Unemployment, poor

Plan for suicide

No relationship with others

Possessing a gun

69 Mammography is benefitted mostly by which group?

- 35 - 45 yrs old
- post menopausal over 65 yrs
- 50 – 64 yrs
- unmarried young ladies

70 Bloody discharge from the nipple

- duct ectasia
- Intraductal papilloma
- Breast abscess
- Intraductal carcinoma

71 A lady with H/O 3 abortions at 8 – 10 wks period – no other abnormalities detected – had abortion now at 10 wks gestation – what is most likely cause –

- retroverted uterus
- fetal infection
- pelvic infection
- foetal abnormalities
- cervical incompetence

72 A women with greenish mucopurulent discharge from vagina – WOF condition except?

- Trichomonase vaginatis
- Cegtomegatovirus
- Ca cervix
- Vag: Bacteriodosis

73 25 year old lady – found to have 3 ovarian cysts – of less than 5cm size – asymptomatic, not pregnant. Best plan of management –

- Short course contraceptives
- Laprotomy for removal
- US exam after 4 weeks
- Tumour marker

74 Question about placenta previa – associated ?

- H/O bleeding at 26 and 30 (32) weeks

75 Patient in lithotomy position – injection given (pudental block) which muscle involved (affected)

76 Couple adopted a baby with Down's Syndrome – chances of recurrence of Down's Syndrome in future his mother ?

- 0
- at least 2%
- 10%
- 25%
- 50%

77 Anorexia nervosa

- secondary amenorrhoea

78 A child 2 years with multiple new bone ossification in different sites

- non-accidental injury

79 Qs about mental heatlh act

80 Child jittery and fitting at home – management

81 Schizophrenia

82 Polycystic ovarian disease – true

- can be cured by multiple cyst removal by laparotomy
- associated with LA: FSH ratio of >3:1
- treated with chomiphene citrate always
- only occur in obese women
- causes hirsulism due to peripheral androgen production

83 Immature defence mechanism

84 CSF findings – 50-100 lymphocytes, protein 1.1gm, glucose normal

- viral infection

85 Hypertension, thrombosis – treatment?

- Warfarin
  - Aspirin
  - ACE inhibitors
  - Calcium channel blockers
- 86 Serotonin syndrome – causing drugs – least likely?

- Meclobemide
- L. Tryptophan
- Citalopram
- Clonipramine
- Haloperidol

87 Dejar phenomena is a psychiatric finding – in WOF this phenamin is seen other than psychiatric disorder

- porphyria, tenporal lobe trauma, frontal lobe trauma, alcoholism

88 Patient with hypertension and weakness of (R) arm and hemparassis

- site of lesion in brain

89 45 year old lady with confound, firm, discrete, mass in the breast

- fibroadenomia, fibrocystic mass, Ca breat, breast abscess

90 Vesicular mole

91 Old women – using pessary (vaginal) for a long period – what will be the complication

92 30 year old woman – FT, contractions + ruptured membrane, Cx 4 cm dilated, well effaced. Head at high level. Vag: exam reveal short pelvic ..... How will you manage the case?

- Start oxytocin drip
- Observation for – 12 hours
- Caesarian section

93 Which vitamin is deficient in breast milk?

94 About leukaemia in an old aged man

95 Absolute contraindication of OCP?

- C/- liver disease
- Hyperlipidaemia
- Migraine with H/O thromboembolism
- Thrombophlebitis
- Hypertension

96 A woman 16 wks gestation with hypertension, slightly creatinine and urinalysis shows proteinuria +++ most likely cause

- Pre-eclampsia
- She can continue preg: without complication
- Pre-existing renal disease
- Essential HT, acute nephritis

97 Women with gestational diabetes – management?

98 Question about dementia

99 Acid-base balance

100 Mesenteric arterial occlusion

101 Ulcerative colitis

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TOTAL QUESTIONS RECALLED=157/250

PICTURES=8

PEADIATRICS=28

PSYCHIATRY=17

OBS & GYNAE=35

MEDICINE=44

SURGERY=25

NOTE.:THERE R SOME QUESTIONS OF WHOM I DO NOT REMEMBER ALL OPTIONS...SO U CAN LOOK FOR THEM

PICTURES

1.PIC with plaques on it.

A.PSORIASIS

2.PIC of scalp showing a patch of hair loss.some crusting,redness,broken hair

A.ALOPECIA AERATA

B.TINEA CAPITIS

C.PSORIASIS

3.PIC of a lesion on dorsum of hand

A.KERATOCANTHOMA

B.INFECTED SEBACEOUS CYST

C.MALIGNANCY

4. PIC of streptococcal cellulitis. Treatment

- A. PENICILLIN
- B. FLUCLOXACILLIN AND AMPICILLIN

5. PIC of swan neck deformity. WHAT IS TRUE

- A. MORE IN RHEUMATOID ARTHRITIS AS COMP TO DEGENERATIVE OSTEOARTHRITIS
- B. IT IS ALMOST ALWAYS ASSOCIATED WITH ULNAR DEVIATION
- C. CAUSED BY RUPTURE OF DISTAL EXTENSOR TENDON
- D. CAUSED BY RUPTURE OF PROXIMAL FLEXOR TENDON

6. PIC of displaced colles fracture management

- A. PLASTER IMMOBILIZATION FOR ATLEAST 10 WEEKS
- B. CLOSE REDUCTION????

7. PIC of diffuse swelling in thyroid gland MOST LIKELY

- A. THYROTOXICOSIS
- B. MUTINODULAR GOITRE

8. PIC OF SKIN LESIONS MOST LIKELY ASSOCIATED WITH

- A. STREPTOCOCCAL PNEUMONIA
- B. LEGIONELLA PNEUMONIA
- C. MYCOPLASMA PNEUMONIA
- D. TUBERCULOSIS

## SURGERY

1. Which nerve is likely injured in spiral fracture of humerus

- A. ULNAR NERVE
- B. RADIAL NERVE
- C. MEDIAN NERVE

2. In uncomplicated mucosal hemorrhoids EXCEPT

- A. FRESH BLEEDING
- B. MUCOUS DISCHARGE
- C. PRURITIS ANI
- D. PERIANAL PAIN

3. The most common cause of bloody discharge from nipple is

- A. BREAST CA
- B. INTRADUCTAL PAPILLOMA
- C. TRAUMA

4. WOF is not related to breast cancer

- A. CONTRALATERAL BREAST CA
- B. FAMILY HISTORY
- C. UTERINE CA
- D. ARTIFICIAL MENOPAUSE

5. CORRECT about mammography

- A.PAINLESS
- B.CAN DETECT BETTER THAN SELF EXAMINATION

6.MAMMOGRAPHY is mostly helpful for

- A.WOMEN OVER 35 YRS
- B.50 -60 YRS
- C.LESS THAN 30 YRS
- D.WITH FAMILY HISTORY OF BREAST CANCER

7.The most likely for a male who is 22yrs old having an inguinoscrotal swelling which disappears on lying down

- A.VARICOCELE
- B.SAPHENA VARIX
- C.LYMPHOMA
- D.DIRECT INGUINAL HERNIA

8.In management of compound fracture of tibia and fibula MOST CORRECT is

- .A.IF NO CONTAMINATION DEBRIDEMENT IS UNNECESSARY
- B.EXTERNAL FIXATION
- C.ANTI TETANUS PLUS ANTIBIOTICS
- D.DEBRIDEMENT AND INTERNAL FIXATION

9.A fistula is

- A.OPENING BETWEEN TWO EPITHELIAL SURFACES

10.FASCIAL nerve palsy LEAST likely in

- A.ACOUSTIC NEUROMA
- B.MASTOIDITIS
- C.BASE OF SKULL FRACTURE
- D.CHRONIC PAROTITIS

11.Immediate management of tension pneumothorax

- A.INTERCOSTAL TUBE DRAINAGE
- B.WIDE BORE NEEDLE AT 2ND INTERCOSTAL SPACE ANTERIORLY
- C.ENDOTRACHEAL TUBE

12.An old man c./o colicky abd pain which has become generalized now,o/e bowel sounds r absent,on p/r reddish tinge on fingerMOST LIKELY

- A.DIVERTICULOSIS
- B.CA RECTUM
- C.MESENTERIC ARTERY OCCLUSION

13.A pt mother has colon cancer at 65 yrs,he is 45 yrs old.he thinks he also has colon cancer.WOF IS TRUE

- A.HE WILL HAVE ANNUAL COLONOSCOPIES FROM 50 YRS ONWRDS
- B.HE SHOULD HAVE FECAL OCCULT BLOOD TESTING TWO YEARLY
- C.BARIUM ENEMA
- D.HE SHOLUD HAVE COLONOSCOPY
- E.REASSURANCE

14.IN intestinal obstruction what is correct

- A.2000 ML OF HARTMAN SOL BEFORE OPERATION
- B.2000 ML HARTMAN SOL DURING OPERATION
- C.5%DEXTROSE WATER BEFORE OPERATION

15. A pt has undergone craniotomy his electrolytes r  
Na 168 , serum osmolality 200 ml MOST LIKELY  
A. SIADH  
B. DIABETES INSIPIDUS  
C. WATER INTOXICATION

16. A pt is admitted in hospital has electrolytes  
Na 117, Cl 86, K 3.2, serum osm 900  
A. DI  
B. SODIUM DEPLETION  
C. SIADH

17. In intestinal surgery when to give antibiotics  
A. ONE DAY BEFORE SURGERY  
B. DURING SURGERY  
C. WHEN ABDOMEN IS CLOSED  
D. 2 HRS BEFORE SURGERY

18. Acute pain in abdomen LEAST LIKELY  
A. MYOCARDIAL INFARCTION  
B. PERFORATED DUODENAL ULCER  
C. ACUTE APPENDICITIS  
D.

19. Unilateral exophthalmus MOST LIKELY  
A. CA MAXILLARY ANTRUM  
B. THYROTOXICOSIS  
C. INJURY IN EYE????

20. Commonest cause of diarrhea in bed ridden patients  
A. FECAL IMPACTION  
B. CA RECTUM

21. A woman has h/o tingling at night in her right hand o/e flexion is weak there is wasting of  
abductor pollicis MOST LIKELY  
A. CARPEL TUNNEL SYNDROME  
B. ULNAR NERVE WEAKNESS

22. Postoperative pt who was underwent surgery on hip ???/ is now complaining of unilateral  
weakness. u have diagnosed a nerve compression. MOST LIKELY CAUSE IS  
A. FLEXOR HALLUCIS LONGUS WEAKNESS  
B. SOLEUS  
C. TIBIALIS POSTERIOR

23. A pt came with trauma o/e ipsilateral pupil is dilated, bradycardia, BP I (I am not sure) MOST  
LIKELY  
A. SUBDURAL HEMATOMA  
B. EXTRADURAL HEMATOMA  
C. SUBARACHONOID HEMORRAGE  
D

24. AOF is true regarding gall bladder stones EXCEPT  
A. THEY R MOSTLY RADIO LUCENT  
B. SINGLE STONE IS MOSTLY OF CHOLESTEROL  
C. MOSTLY ASYMPTOMATIC

D.PIGMENT STONES R HEMOLYTIC  
E.STONE AT CBD CAUSES SEPSIS OF GALL BLADDER

25.PT h/o vomiting ,some wt loss.has past h/o duodenal ulcer.MOST LIKELY  
A.ACHALASIA CARDIA  
B.CA DUODENUM

## MEDICINE

### ENT

1.About nasopharyngeal carcinoma MOST LIKELY  
A.BENIGN BUT LOCALLY DESTRUCTIVE  
B.ASSOCIATED WITH EBV ANTIBODIES

2.Otosclerosis MOST LIKELY  
A.BLUIISH TINGE ON TYMPANIC MEMBRANE  
B.SENSORINEURAL DEAFNESS  
C.NORMAL TYMPANIC MEMBRANE

3.PT with acute onset of vertigo,tinnitus no hearing loss.MOST LIKELY  
A.MENEIRE DISEASE  
B.VESTIBULAR NEURONITIS  
C.ACUTE LABYRYNTITIS  
D.ACOUSTIC NEUROMA

4.A child comes 3yr old h/o room strats moving in a circle and then he falls down .MOST CORRECT STATEMENT IS  
A.EEG WILL BE CONFIRMATORY  
B.START PHENYTOIN  
C.BENIGN POSITIONAL VERTIGO W/C IMPROVES WITH AGE.

### LIVER.MOST OF MCQS WERE FROM LIVER

5.Diagnostic test for hemochromatosis  
A.SERUM FERRITIN  
B.SERUM IRON  
C.SERUM TRANFERRIN SATURATION

6.A man has h/o impotence,cirrhosis.His father died b/c of same cirrhosis.RULE OUT  
A.HEMOCHROMATOSIS  
B C D ????

7.A woman came with c/o pain in epigastrium last evening.today morning she passed dark color urine.her lfts r deranged ,alk po4 is markedly increased.MOST LIKELY  
A.BILIARY COLIC  
B.ACUTE PANCREATITIS  
C.CHOLEDOCHOLITHIASIS

8.Student 18 yr old is feeling vague has icteric eyes.o/e bibirubin is increased.rest of the examination is normal.MOST LIKELY  
A.GILBERT SYNDROME

- B. HEPATITIS A
- C. HEPATITIS B

9. A woman had cholecystectomy 3 months ago now she is having right upper quadrant pain. MOST LIKELY

- A. STONE LEFT AT CBD

10. Hepatitis likely to become chronic

- A. HEP A
- B. HEP C
- C. HEP B
- D. HEP E

MCQS FROM OTHER MISC. TOPICS

11. Hyperkalemia immediate NEXT STEP

- A. GIVE SALBUTAMOL
- B. CA RESONIUM
- C. DIALYSIS
- D. CALCIUM GLUCONATE
- E. GLUCOSE AND INSULIN

12. ORG involved in food poisoning

- A. E COLI
- B. STAPH AUREUS
- C. SALMONELLA

13. A pt sedative overdose what is typical blood picture

- A. PH 7.35 PO2 70 PCO2 80
- B. PH 7.1 PO2 70 PCO2 80

14. Which tumor never metastasize to brain.

- A. BREAST CA
- B. LUNG CA
- C. PANCREATIC CA
- D. PROSTATE CA

15. A bisexual man has several mouth ulcers, arthritis, sausage fingers. also has h/o diarrhea. MOST LIKELY

- A. BEHCET DISEASE
- B. REITER DISEASE
- C. RHEUMATOID ARTHRITIS
- D. ANKOLYSING ARTHRITIS
- E. PSORIATIC ARTHRITIS

16. A man has h/o unilateral headache, mostly occurs in morning. h/o lacrimation. DRUG OF CHOICE

- A. ERGOTAMINE
- B. PROPRANOLOL
- C. CARBAMAZEPINE
- D. ATROPINE

17. Postsplenectomy hereditary spherocytosis. AOF is true EXCEPT

- A. OSMOTIC FRAGILITY
- B. ANEMIA PERSISTENCE
- C. NORMAL LIFE SPA OF RBC
- D. PRESENCE OF SPHEROCYTES IN PERIPHERAL BLOOD

18. Alcoholic ketoacidosis EXCEPT  
A. NORMAL ANION GAP

19. A pt is brought to ER he is confused, ataxic, nystagmus, diplopia, ... has h/o alcohol. MOST LIKELY  
A. ALCOHOLIC HALLUCINOSIS  
B. WERNICKE ENCEPHLOPATHY

20. Treatment of wernicke encephopathy with low plasma sugar  
A. THIAMINE  
B. THIAMINE WITH GLUCOSE  
C. IV 5% GLUCOSE  
D. VIT B1

21. Ankylosing spondylitis LEAST ASSOCIATED  
A. AORTIC INCOMPETENCE  
B. SERO -VE ARTHRITIS

22. A middle aged woman has c/o mouth ulcers, morning stiffness of joints... it gets better with day....???? MOST LIKELY  
A. SLE  
B. RHEUMATOID ARTHRITIS

23. Alveolar exchange difference  
PaO<sub>2</sub>=?  
PaCO<sub>2</sub>=?  
Inspiratory O<sub>2</sub>=?  
A. 9  
B. 12.....????

24. B/L weakness of hand muscles  
A. MULTIPLE SCLEROSIS  
B. ULNAR NERVE LESION  
C. SYRINGOMYELIA

25. Weakness of all muscles unilateral in hand  
A. SYRINGOMYELIA  
B. ?????

26. PT with atrial fibrillation what is CORRECT  
A. WARFARIN SHOULD BE GIVEN  
B. RISK OF STROKE????

27. Diff between hemolytic anemia and anemia due to chronic blood loss  
A. DECREASED HAPTOGLOBIN  
B. POLYCHROMASIA

28. Question on alpha 1 deficiency  
27. Amourosis fugax CORRECT  
A. IPSILATERAL INTERNAL CAROTID ARTERY STENOSIS

29. Opening snap in mitral stenosis denotes  
A. DIMINISH WITH ATRIAL FIBRILLATION  
B. DUE TO VALVE MOBILITY

30. A child with suspicion of meningitis, LP lymphocytes increased,???? MOST LIKELY

- A. ECHO VIRUSES
- B. BACTERIAL

31. Polycythemia and cor pulmonale MOST LIKELY ASSOCIATED WITH

- A. TUBERCULOSIS
- B. BRONCHIACTASIS
- C. EMPHYSEMA

32. A man with h/o flaccid paralysis of lower limb over a week. o/e reflexes r diminished, decrease sensation of touch,???? MOST LIKELY

- A. ACUTE POLYMYOSITIS
- B. ACUTE POLYNEUROPATHY

33. Amyloidosis can complicate all EXCEPT

- A. TUBERCULOSIS
- B. LEPROSY
- C. MULTIPLE MYELOMA
- D. CHRONIC ACTIVE HEPATITIS.
- E. RHEMATOID ARTHRITIS

34. A pt came with fever, o/e lymphadenopathy, splenomegaly, on blood report abnormal lfts, atypical lymphocytes r present MOST LIKELY

- A. INFECTIOUS MONONUCLEOSIS

35. A female h/o enuresis, 2 sisters also have same problem MOST LIKELY

- A. HORSE SHOE KIDNEY
- B. HEREDITARY NEPHRITIS
- C. VESICoureteric REFLUX

36. Heparin is measured by

- A. PT
- B. APTT

37. BEST method of detecting H PYLORI eradication

- A. UREA BREATH TEST

38. In management of COPD recent improvement in health is due to

- A. HOME OXYGEN THERAPY

39. ROLE OF T LYMPHOCYTES

29. Indicator of good prognosis in asthma

- A. INCREASING PULSUS PARADOXUS
- B. DECREASING INTENSITY OF WHEEZING

C.INCREASING PaO<sub>2</sub> and decreasing PACO<sub>2</sub>

40.CO<sub>2</sub> retention is associated with EXCEPT

- A.HYPERTENSION
- B.CYANOSIS
- C.INCREASE MUSCLE TONE

41.ULCER at third metatarsal in DM MOST LIKELY

- A.ISCHEMIC
- B.NEUROPATHY
- C.INFECTION

42.A girl has c/o colicky abdominal pain associated with diarrhea,tenesmus.MOST LIKELY

- A.IRRITABLE BOWEL DISEASE
- B.CROHN DISEASE

43.What is true regarding myocardial infarction

- A.THROMBOLYTICS ARE NOT GIVEN IF ECG IS NORMAL

44.A woman has c/o depression,wt loss,constipation.o/e

serum Ca increased,serum PO<sub>4</sub> normal,urine calcium increased,serum urea and creatinine deranged.MOST LIKELY

- A.PARATHYROID ADENOMA
- B.RENAL FAILURE
- C.METASTATIC DISEASE

#### PAEDIATRICS

1.A mother came with complain that her child is not feeding properly,is not gaining weight and is mostly drowsy.O/E child has bilateral cataracts,is unable to gain enough weight.most likely

- a.Galactosemia
- b.Phenylketonuria
- c.G6PDH
- d ,e ??

2. A 9 days old infant with h/o forceful vomiting for 2 days.The electrolytes are:

Na 125mmol/l  
K 7.7mmol/l  
CL 80mmol/l  
HCO<sub>2</sub> 18mmol/l  
MOST LIKELY

- A.PYLORIC STENOSIS
- B.CONGENITAL ADRENAL HYPERPLASIA
- C.DUODENAL ATRESIA
- D.GORD

3.A mother came with 6 weeks old infant h/o repeated non forceful vomiting.o/e there is weight loss most likely

- A.PYLORIC STENOSIS
- B.CONGENITAL ADRENAL HYPERPLASIA
- C.OESOPHAGEAL ATRESIA
- D.GORD

4. A mother came with a 6 weeks old infant who has h/o repeated vomiting after meals. o/e there is no weight loss. rest examination is normal. What is correct.

- A. DO CHEST XRAY
- B. NO RADIOLOGICAL INVESTIGATION IS NEEDED.
- C. BLOOD CULTURE
- D. URINE CULTURE

5. Parents have one child with phenylketonuria. What is the chance of their another child of having phenyl ketonuria

- A. 1 IN 2 REGARDLESS OF SEX
- B. 1 IN 4 REGARDLESS OF SEX
- C. AS IN GEN POPULATION
- D. 1 IN 2 IF IT'S A GIRL
- E. 1 IN 2 IF IT'S A BOY.

6. A mother came with 3 yr old child h/o bleeding after stool on toilet paper. o/e fecal masses r palpable. there is anal fissure. Next immediate step

- A. LAXATIVE HIGH FIBRE DIET
- B. REASSURANCE IT IS NORMAL VARIANT
- C. APPLICATION OF ANNUSOL CREAM ON FISSURE
- D. ABD XRAY

7. Child with type 1 DM mother calls u on phone and says he is not feeling well. blood glucose is 1.1 mmol. What is immediate next step

- A. GIVE HIM HIS INSULIN
- B. HIGH CHO DIET
- C. GIVE HIM GLUCOTHON??? RUB IT ON GUMS
- D. CALL AMBULANCE
- E. GLUCAGON

8. School going child cannot see blackboard .He can easily see computer and uses it daily. Most likely

- A. MYOPIA
- B. HYPERMETROPIA
- C. AMBYLOPIA
- D. STRABISMUS

9. A baby with apnoea first line treatment

- A. O<sub>2</sub> BY MASK
- B. ASPIRATION OF PHARYNX
- C. INTUBATE
- D. E??

10. A mother with a baby of Down syndrome wants to know future risks other than congenital heart diseases EXCEPT

- A. OESOPHAGEAL ATRESIA
- B. CONDUCTIVE DEAFNESS
- C. LEUKEMIAS
- D. HYPOTHYROIDISM
- E. EPILEPSY

11. A child came o/e periorbital edema, ascites proteinuria +++ all is true EXCEPT

- A. MOSTLY HAS GOOD PROGNOSIS
- B. TREATMENT OF CHOICE IS HYDROCORTISONE.

C.IF BIOPSY IS DONE IT WILL SHOW MOSTLY GLOMERULOSCLEROSIS.  
D.IS ASSOCIATED WITH PNEUMOCOCCAL PERITONITIS.

12.3 YR child can do

- A.HOP ON ONE LEG
- B.DRESS WITHOUT SUPERVISION.
- C.DRAW A RECOGNISABLE MAN
- D.CLIMB STAIRS.

13.A child can sit unsupportedly,can stand with support and plays with toys around him and can roll over by himself.Age

- A.10 MONTHS
- B.7 MONTHS
- C.6 MONTHS
- D.11 MONTHS
- E .12 MONTHS

14.6 week old infant on routine examination one testis is not palpable.Next step

- A.REVIEW IN 6 WEEKS
- B.REVIEW IN 6 MONTHS
- C.REVIEW IN 2 YRS
- D.URGENT SURGICAL REFERENCE FOR ORCHIDOPEXY

15.A child with h/o vomiting mostly in morning,it is associated with headache.o/e there is ataxia.Most likely

- A.MIDDLE CRANIAL FOSSA TUMOUR
- B.POST CRANIAL FOSSA TUMOUR.
- C.OPTIC GLIOMA
- D.NEUROBLASTOMA

16.A 6 months old baby h/o repeated jerks mostly multiple in a day.During jerks arms r flexed and limbs r drawn up.There is decline in milestones as well.MOST LIKELY

- A.PETIT MAL EPILEPSY
- B.INFANTILE COLIC
- C.INFANTILE SPASM
- D.BENIGN SPASMS

17.All is true about Tourette syndrome EXCEPT

- A.IN THIS THERE R MULTIPLE VOCAL AND MOTOR TICS.
- B.CORPORALIA IS SEEN IN LESS THAN 10%
- C.IT IS NOT DISTRESSING FOR PATIENT.
- D.TICS OCCUR SEVERAL TIMES IN A DAY
- E.ALWAYS START LESS THAN 18 YRS

18.A 3 yr old child has mild dirty wound on his scalp.Treatment of choice

- A.TETANUS TOXOID
- B.TETANUS IMMUNOGLOBIN
- C.DTP
- D.PENICILLIN

19.A 7 yr old child fell from tree now he has c/o fever,pain in knee.o/e there is tenderness in upper part of tibia.MOST LIKELY

- A.SEPTIC ARTHRITIS
- B.OSTEOMYELITIS
- C.FRACTURE TIBIA

D.FRACTURE PATELLA

20.Unilateral undescended testis in a child is associated with

- A.INFERTILITY
- B.DIRECT INGUINAL HERNIA
- C.MALIGNANCY
- D.HYDROCELE
- E.VARICOCELE

21.10 week old child with persistent unilateral discharge.treated with antibiotics.but it is still recurring

- A.GONOCOCCUS
- B.CHLAMYDIA
- C.NASOLACRIMAL DUCT OBSTRUCTION
- D.FOREIGN BODY.

22.What is normal for a infant.

- A.FEMALE WITH ENLARGED CLITORIS
- B.MALE WITH ENGORGED BREAST

23.An 8 yr old child o/e wt is 48 kg w/c is more than 98 percentile.height is 140 cm which is more than 90 percentile.otherwise is normal.WOF IS CORRECT.

- A.ADVANCED BONE AGE
- B.INCREASED BLOOD SUGAR LEVEL
- C.PRIMARY HYPERALDOSTERONISM
- D.THYROTOXICOSIS

24.A boy came with h/o persistent cough and wheeze from one day.Two of the family members have also got cough.FIRST INVESTIGATION

- A.CHEST X RAY
- B.SPUTUM EXAMINATION
- C.FULL BLOOD COUNT
- D.CHEST XRAY IN FULL INSPIRATION AND EXPIRATION

25.A 8 week old child h/o persistent cough.o/e wheeze and fine crepitations.BEST DIAGNOSTIC TEST

- A.CXR
- B.SWEAT CHLORIDE TEST
- C.BLOOD CULTURE
- FULL BLOOD COUNT

26.Mother of 18 months old child says that the child is not babbling.audiological assesment was done when he was 10 months old what is next step

- A.REASSURANCE
- B.REPEAT HEARING TEST
- C.ARRANGE AUDIOMETRY
- D.

27.A baby born at term collapsed in cot after 10 days o/e central cyanosis no peripheral pulses,no murmur.most likely

- A.FALLOT TETROLOGY
- B.PULMONARY HYPERTENSION
- C.PDA
- D.LEFT HYPOPLASTIC HEART DISEASE
- E.TRANSPOSITION OF GREAT VESSELS

28. A newborn is born by forceps delivery. He is unable to move his forearm MOST LIKELY  
A. ERBS PALSY  
B. FRACTURE HUMERUS

PSYCHIATRY

1. Immature defence mech

- A. HUMOR
- B. ALTRUISM
- C. ANTICIPATION
- D. PROJECTION
- E. REPRESSION

2. Parents have adopted a girl. She has SCH. They want to know the risk of their own daughter of having SCH.

- A. less than 2 %
- B. NIL
- C. 40%
- D. 17%
- E. 2.6%

3. Female throws bottles on people. How would you differentiate SCH from Delirium

- A. DURATION OF SYMPTOMS
- B. LEVEL OF CONSCIOUSNESS
- C. INSIDIOUS ONSET

4. SSRI can be caused by all drugs except

- A. L-TRYPTOPHAN
- B. FLUOXETINE
- C. HALOPERIDOL
- D. CLONAZEPAM
- E. MOCLEBEMIDE

5. A man has h/o grandiose ideas . MOST LIKELY

- A. BORDERLINE PERSONALITY
- B. NARCISSISTIC PERSONALITY
- C. HYPOMANIA
- D. DRUG EFFECT

6. Prodromal features of SCH

- A. IDEAS OF REFERENCE
- B. HALLUCINATION
- C. LEVEL OF CONSCIOUSNESS

7. A good prognostic factor in SCH

- A. PRESENCE OF AFFECTIVE DISORDER
- B. LACK OF PPT FACTORS
- C.

8. MENTAL HEALTH ACT. WHAT IS TRUE

- A.MAY BE LIFE SAVING
- B.SIMILAR IN EVERY STATE

9.A bank manager was robbed 3 weeks ago.WOF MOST LIKELY

- A.IRRITABILITY AND OUT BURST OF ANGER
- B.DEPRESSION
- C.PANIC ATTACK

10.Hypnagogic hallucination what is TRUE

- A.DELUSION
- B.SCH
- C.IT CAN HAPPEN IN NORMAL SLEEP
- D.ALCOHOLISM

11.In mental disorders people mostly have violence.Who r affected most by this violence

- A.PARENTS
- B.SIBLINGS
- C.STRANGERS
- D.THEMSELVES

12.A patient with suicide risk all is imp EXCEPT

- A.ANY RECENT SUICIDAL PLAN
- B.POOR FAMILY SUPPORT
- C.UNEMPLOYMENT

13.Proverb explanation is done in assessment of

- A.DYSTHYMIA
- B.SCH
- C.DEMENTIA
- D.ANXIETY

14.Woman 35 yr old h/o she feels detached from her husband.She has 2 children and is living in rented home she cannot afford to go for holidays.has h/o menorrhagia her hb was given???Next step

- A.REFER HER TO PSYCHIATRIST
- B.SEND HER TO MARRIAGE COUNCILOR
- C.REFER HER TO GYNAECOLOGIST
- D.ADVISE HER TO HAVE HOLIDAYS
- E.HAVE A INTERVIEW WITH HER HUSBAND

15.A woman comes she is concerned about her husband.he is very detached from her,he is getting up earlier than his usual time.APPROPRIATE TREATMENT

- A.BEZO DIAZEPINES
- B.COGNITIVE BEHAVIOR THEARPY
- C.REFER TO PSYCHOTHEARAPIST.

16.In panic attack except

- A.OCCUR IN BOTH MALES AND FEMALES
- B.AVIDANCE OF SPECIFIC FACTORS IS RECOMMENDED DURING TRAETMENT.

17.De ja vu is found in

- A.FRONTAL LOBE TUMORS
- B.TEMPORAL LOBE TUMORS
- C.PARIETAL LOBE TUMORS

GYNAECOLOGY & OBSTETRICS

1.COC work at level of

- A.OVARY
- B.HYPOTHALAMUS
- C.PITUITARY
- D.ENDOMETRIUM
- E.CERVICAL MUCUS

2.The most appropriate OCP for a 24 yr old on phenytoin is

- A.MICROGYNON 30
- B.MICROGYNON50
- C.DIANE 35
- D.CLOMIPHENE

3.Depoprovera has all s/e EXCEPT

- A.ALTERED MENSTRUAL CYCLE LEADING TO AMENORHEA
- B.DEPRESSION
- C.HYPERTENSION
- D.WEIGHT GAIN

4.COC decreases risk EXCEPT

- A.DECREASE RISK OF COLON CANCER
- B.DECREASES RISK OF CEREBROVASCULAR DISEASES
- C.DECREASE RISK OF ENDOMETRIAL CANCER
- D.DECREASE RISK OF OSTEOPOROSIS
- E.DECREASE RISK OF OVARIAN CYSTS

5.Absolute c/I for OCPS

- A.SUPERFICIAL THROMBOPHELEBITIS
- B.MIGRAINE WITH AURA
- C.VARICOSE VEINS
- D.

6.Ovarian tumor o/e there is

- A.SHIFTING DULLNESS Laterally
- B.DULLNESS ANTERIORLY AND RESONANCE Laterally
- C.RESONANCE ANTERIORLY

7.A woman with mastalgia.Not responding to conventional treatment.Next step

- A.BROMOCRIPTINE
- B.OCPS
- C.DANAZOL

8.21 year old c/o abd pain .Imp was 2 weeks ago.on usg there r 3mm,4mm,2.2cm cystic structures.What is next step in management

- A.REPEAT USG IN 4 WEEKS
- B.LAPROSCOPY AND DRAIN CYST
- C.OCP
- D.IGNORE FINDINGS

9.A pregnant female presents to u at 38 weeks with 1000ml blood loss.WOF is not related to placental abruption

- A.FETAL DEATH
- B.TENSE UTERUS
- C.BP180/110

D.FETAL HEAD HIGH UP AND FREELY MOBILE  
E.NORMAL PULSE RATE

10.Anti D should be given to Rh-ve mother in w/c situation

- A.BETWEEN 28 TO 34 WEEKS
- B.MUST BE GIVEN WITHIN 72 HRS OF DELIVERY
- C.SHOULD BE GIVEN TO ALL MOTHERS.

11.26 yr old primigravida,ht 150cm,at 35 weeks.is in labour.In your assessment pelvis is reduced,cervix is 4 cm dilated.head is at station 0.What is your mx

- A.CONTINUE TRIAL OF LABOUR
- B.INDUCE WITH OXYTOCIN
- C.XRAY PELVIMETRY
- D.CSECT

12.Effect of progesterone in pregnancy

- A.DILATATION OF URETERS
- B.DILATATION OF CALYCES
- C.DILATATION OF URETERS AND CALYCES.

13.28 YR old primigravida at 16 weeks with BP 180/90 PROTEIN IN URINE+++most likely

- A.PREECLAMPSIA
- B.ESSENTIAL HTN
- C.PRE EXISTING RENAL DISEASE.

14.With regard to carpel tunnel in pregnancy WOF is true

- A.RARELY REQUIRES SURGERY
- B.SEVERE PAIN IN THENAR EMINENCE.

15.About twin delivery ,after the delivery of first u will do all except

- A.PALPATE ANOTHER BABY
- B.PER VAGINAL EXAMINATION
- C.DO A EXTERNAL CEPHALIC VERSION
- D.LOOK ANY BLOOD COME OUT
- E.IF PAIN DOES NOT START INDUCE HER WITH OXYTOCIN.

16.About oxytocin

- A.IT HAS ANTI DIURETIC EFFECT
- B.

17.A lady is 8 week pregnant.She has c/o vaginal bleeding o/e os is open o/e uterus is 12weeks in size.What is true in management

- A MEASURE HCG REGULARLY UNTIL IT BECOMES NEGATIVE.

18.A woman at 18 weeks is complaining of abdominal pain LEAST likely

- A.ACUTE APPENDICITIS
- B.ECTOPIC PREGNANCY
- C.INEVITABLE ABORTION

19.A woman has come in her second pregnancy.In her previous pregnancy she delivered baby weighing 4 kg and it was a difficult delivery and baby has a fracture clavicle.Y ou should do all EXCEPT

- A.INDUCTION OF LABOUR AT 37-38 WEEKS
- B.DO C SECT AT TERM
- C.CARE OF DM IS IMP AFTER 20-30 WEEKS ONLY.

20. A 19 yrs old primigravida at 36 weeks with hyperreflexia, htn, edema might be expected to have all elevated EXCEPT

- A. LIVER ENZYMES
- B. URIC ACID
- C. CREATININE
- D. PLATELETS
- E. BUN

21. A postmenopausal woman used to have withdrawal bleeding but not any more. LIKELY CAUSE

- A. OVARY
- B. UTERUS
- C. PITUITARY
- D. HYPOTHALAMUS

22. All of following could be the cause of greenish yellow vaginal discharge EXCEPT

- A. TRICHOMONAS VAGINALIS
- B. BACTERIAL VAGINOSIS
- C. CA CERVIX
- D. FOREIGN BODY
- E. CHLAMYDIAL URETRITIS

23. Primary dysmenorrhea AOF r used in treatment EXCEPT

- A. PROSTAGLANDIN INHIBITORS
- B. INDOMETHACIN
- C. BROMOCRIPTINE.
- D. OCP

24. Secondary ovarian tumor r mostly due to

- A. CA COLON
- B. CA STOMACH

25. A woman has complain of Postmenopausal bleeding. o/e ovarian mass is present. D&C shows endometrial hyperplasia. MOST LIKELY

- A. CYST
- B. TERATOMA
- C. GRANULOSA CELL TUMOR

26. A pt at 26 weeks has herpes simplex. What is management EXCEPT

- A. C-SECTION AT TERM.
- B. GIVE HER ACYCLOVIR
- C. PRESENCE OF HS PRECLUDES VAGINAL DELIVERY AT TERM

27. A pregnant female at 26 weeks .her daughter has fever and red cheeks. What is TRUE

- A. CHECK MATERNAL RUBELLA ANTIBODY
- B. DO HER COUNCILING REGARDING DISEASE.
- C. DO BLOOD TESTS ON DAUGHTER.

28. Recurrent abortion. MOST LIKELY

- A. ANTICARDIOLIPIN ANTIBODY

29. Spontaneous abortion at 6-10 weeks. MOST LIKELY

- A. CHROMOSOMAL ABNORMALITY

30. A woman has h/o recurrent abortion at 6-10 weeks. MOST LIKELY

- A. CERVICAL INCOMPETENCE

B.FETAL ANOMALY  
C.POOR DIET

31.USG at 6-10 weeks is done for all EXCEPT  
A.INEVITABLE ABORTION  
B.CONGENITAL MALFORMATION

32.NTD AOF is correct EXCEPT  
A.GIVE FOLIC ACID IN PREGNANCY  
B.LOW ALPHA FETO PROTEIN

33.A woman has inevitable abortion,histopathology shows decidualization.NEXT STEP  
A.REASSURANCE  
B.READMIT FOR HYSTERCROMY  
C.DO AGAIN D& C  
D.READMIT FOR LAPROSCOPY

34.Anorexia nervosa EXCEPT  
A.ANEMIA  
B.AMENOHEA  
C.LAUNGO HAIR???

35.A young girl came with abdominal pain o/e there are 2mm,4mm,2.2cm cysts.NEXT STEP  
A.REPEAT USG IN 6 WEEKS  
B.LAPROSCOPIC ASPIRATION OF CYST  
C.LAPROTOMY  
D.REASSURANCE  
PAPER COMPILED BY: AYESHA MALIK  
PAPER : JULY 2005C

TOTAL QUESTIONS RECALLED=157/250

PICTURES=8  
PEADIATRICS=28  
PSYCHAITRY=17  
OBS & GYNAE=35  
MEDICINE=44  
SURGERY=25

NOTE.:THERE R SOME QUESTIONS OF WHOM I DO NOT REMEMBER ALL OPTIONS...SO U CAN  
LOOK FOR THEM

PICTURES

1.PIC with plaques on it.  
A.PSORIASIS

2.PIC of scalp showing a patch of hair loss.some crusting,redness,broken hair  
A.ALOPECIA AERATA  
B.TINEA CAPITIS  
C.PSORIASIS

3.PIC of a lesion on dorsum of hand  
A.KERATOCANTHOMA  
B.INFECTED SEBECOUS CYST

### C.MALIGNANCY

4.PIC of streptococcal cellulitis.Treatment

A.PENICILLIN

B.FLUCLOXACILLIN AND AMPICILLIN

5.PIC of swan neck deformity.WHAT IS TRUE

A.MORE IN RHEUMATOID ARTHRITIS AS COMP TO DEGENERATIVE OSTEOARTHRITIS

B.IT IS ALMOST ALWAYS ASSOCIATED WITH ULNAR DEVIATION

C.CAUSED BY RUPTURE OF DISTAL EXTENSOR TENDON

D.CAUSED BY RUPTURE OF PROXIMAL FLEXOR TENDON

6.PIC of displaced colles fracture manegement

A.PLASTER IMMOBILIZATION FOR ATLEAST 10 WEEKS

B.CLOSE REDUCTION????

7.PIC of diffuse swelling in thyroid gland MOST LIKELY

A.THYROTOXICOSIS

B.MUTINODULAR GOITRE

8.PIC OF SKIN LESIONS MOST LIKELY ASSOCIATED WITH

A.STREPTOCOCCAL PNEMONIA

B.LEGIONELLA PNEUMONIA

C.MYCOPLSMA PNEUMONIA

D.TUBERCULOSIS

### SURGERY

1.Which nerve is likely injured in spiral fracture of humerus

A.ULNAR NERVE

B.RADIAL NERVE

C.MEDIAN NERVE

2.In uncomplicated mucosal hemmorids EXCEPT

A.FRESH BLEEDING

B.MUCOUS DISCHARGE

C.PRURITIS ANI

D.PERIANAL PAIN

3.The most common cause of bloody discharge from nipple is

A.BREAST CA

B.INTRADUCTAL PAPILLOMA

C.TRAUMA

4.WOF is not related to breast cancer

A.CONTRALATERAL BREAT CA

B.FAMILY HISTORY

C.UTERINE CA

D.ARTIFICIAL MENOPAUSE

5. CORRECT about mammography

- A. PAINLESS
- B. CAN DETECT BETTER THAN SELF EXAMINATION

6. MAMMOGRAPHY is mostly helpful for

- A. WOMEN OVER 35 YRS
- B. 50 -60 YRS
- C. LESS THAN 30 YRS
- D. WITH FAMILY HISTORY OF BREAST CANCER

7. The most likely for a male who is 22yrs old having an inguinoscrotal swelling which disappears on lying down

- A. VARICOCELE
- B. SAPHENA VARIX
- C. LYMPHOMA
- D. DIRECT INGUINAL HERNIA

8. In management of compound fracture of tibia and fibula MOST CORRECT is

- A. IF NO CONTAMINATION DEBRIDEMENT IS UNNECESSARY
- B. EXTERNAL FIXATION
- C. ANTI TETANUS PLUS ANTIBIOTICS
- D. DEBRIDEMENT AND INTERNAL FIXATION

9. A fistula is

- A. OPENING BETWEEN TWO EPITHELIAL SURFACES

10. FASCIAL nerve palsy LEAST likely in

- A. ACOUSTIC NEUROMA
- B. MASTOIDITIS
- C. BASE OF SKULL FRACTURE
- D. CHRONIC PAROTITIS

11. Immediate management of tension pneumothorax

- A. INTERCOSTAL TUBE DRAINAGE
- B. WIDE BORE NEEDLE AT 2ND INTERCOSTAL SPACE ANTERIORLY
- C. ENDOTRACHEAL TUBE

12. An old man c./o colicky abd pain which has become generalized now, o/e bowel sounds r absent, on p/r reddish tinge on finger MOST LIKELY

- A. DIVERTICULOSIS
- B. CA RECTUM
- C. MESENTERIC ARTERY OCCLUSION

13. A pt mother has colon cancer at 65 yrs, he is 45 yrs old. he thinks he also has colon cancer. WOF IS TRUE

- A. HE WILL HAVE ANNUAL COLONOSCOPIES FROM 50 YRS ONWRDS
- B. HE SHOULD HAVE FECAL OCCULT BLOOD TESTING TWO YEARLY
- C. BARIUM ENEMA
- D. HE SHOULD HAVE COLONOSCOPY
- E. REASSURANCE

14. IN intestinal obstruction what is correct

- A. 2000 ML OF HARTMAN SOL BEFORE OPERATION
- B. 2000 ML HARTMAN SOL DURING OPERATION
- C. 5% DEXTROSE WATER BEFORE OPERATION

15. A pt has undergone craniotomy his electrolytes r  
Na 168 , serum osmolality 200 ml MOST LIKELY  
A. SIADH  
B. DIABETES INSIPIDUS  
C. WATER INTOXICATION

16. A pt is admitted in hospital has electrolytes  
Na 117, Cl 86, K 3.2, serum osm 900  
A. DI  
B. SODIUM DEPLETION  
C. SIADH

17. In intestinal surgery when to give antibiotics  
A. ONE DAY BEFORE SURGERY  
B. DURING SURGERY  
C. WHEN ABDOMEN IS CLOSED  
D. 2 HRS BEFORE SURGERY

18. Acute pain in abdomen LEAST LIKELY  
A. MYOCARDIAL INFARCTION  
B. PERFORATED DUODENAL ULCER  
C. ACUTE APPENDICITIS  
D.

19. Unilateral exophthalmus MOST LIKELY  
A. CA MAXILLARY ANTRUM  
B. THYROTOXICOSIS  
C. INJURY IN EYE????

20. Commonest cause of diarrhea in bed ridden patients  
A. FECAL IMPACTION  
B. CA RECTUM

21. A woman has h/o tingling at night in her right hand o/e flexion is weak there is wasting of  
abductor pollicis MOST LIKELY  
A. CARPEL TUNNEL SYNDROME  
B. ULNAR NERVE WEAKNESS

22. Postoperative pt who was underwent surgery on hip ???/ is now complaining of unilateral  
weakness. u have diagnosed a nerve compression. MOST LIKELY CAUSE IS  
A. FLEXOR HALLUCIS LONGUS WEAKNESS  
B. SOLEUS  
C. TIBIALIS POSTERIOR

23. A pt came with trauma o/e ipsilateral pupil is dilated, bradycardia, BP I (I am not sure) MOST  
LIKELY  
A. SUBDURAL HEMATOMA  
B. EXTRADURAL HEMATOMA  
C. SUBARACHNOID HEMORRAGE  
D

24. AOF is true regarding gall bladder stones EXCEPT  
A. THEY R MOSTLY RADIOLUCENT  
B. SINGLE STONE IS MOSTLY OF CHOLESTEROL

- C.MOSTLY ASYMPTOMATIC
- D.PIGMENT STONES R HEMOLYTIC
- E.STONE AT CBD CAUSES SEPSIS OF GALL BLADDER

25.PT h/o vomiting ,some wt loss.has past h/o duodenal ulcer.MOST LIKELY  
A.ACHALASIA CARDIA  
B.CA DUODENUM

#### MEDICINE

##### ENT

1.About nasopharyngeal carcinoma MOST LIKELY  
A.BENIGN BUT LOCALLY DESTRUCTIVE  
B.ASSOCIATED WITH EBV ANTIBODIES

2.Otosclerosis MOST LIKELY  
A.BLUIISH TINGE ON TYMPANIC MEMBRANE  
B.SESORINEURAL DEAFNESS  
C.NORMAL TYMPANIC MEMBRANE

3.PT with acute onset of vertigo,tinnitus no hearing loss.MOST LIKELY  
A.MENEIRE DISEASE  
B.VESTIBULAR NEURONITIS  
C.ACUTE LABYRYNTITIS  
D.ACOUSTIC NEUROMA

4.A child comes 3yr old h/o room strats moving in a circle and then he falls down .MOST CORRECT STATEMENT IS  
A.EEG WILL BE CONFIRMATORY  
B.START PHENYTOIN  
C.BENIGN POSITIONAL VERTIGO W/C IMPROVES WITH AGE.

#### LIVER.MOST OF MCQS WERE FROM LIVER

5.Diagnostic test for hemochromatosis  
A.SERUM FERRITIN  
B.SERUM IRON  
C.SERUM TRANFERRIN SATURATION

6.A man has h/o impotence,cirrhosis.His father died b/c of same cirrhosis.RULE OUT  
A.HEMOCHROMATOSIS  
B C D ????

7.A woman came with c/o pain in epigastrium last evening.today morning she passed dark color urine.her lfts r deranged ,alk po4 is markedly increased.MOST LIKELY  
A.BILIARY COLIC  
B.ACUTE PANCREATITIS  
C.CHOLEDOCHOLITHIASIS

8.Student 18 yr old is feeling vague has icteric eyes.o/e bibirubin is increased.rest of the examination is normal.MOST LIKELY

- A.GILBERT SYNDROME
- B.HEPATITIS A
- C.HEPATITS B

9.A woman had cholecystectomy 3 months ago now she is having right upper quadrant pain.MOST LIKELY

- A.STONE LEFT AT CBD

10.Hepatitis likely to become chronic

- A.HEP A
- B.HEP C
- C.HEP B
- D.HEP E

MCQS FROM OTHER MISC.TOPICS

11.Hyperkalemia immediate NEXT STEP

- A.GIVE SALBUTAMOL
- B.CA RESONIUM
- C.DIALYSIS
- D.CALCIUM GLUCONATE
- E.GLUKOSE AND INSULIN

12.ORG involved in food poisoning

- A.E COLI
- B.STAPH AUREUS
- C.SALMONELLA

13.A pt sedative overdose what is typical blood picture

- A.PH 7.35 PO2 70 PCO2 80
- B.PH 7.1 PO2 70 PCO2 80

14.Which tumor never metastasize to brain.

- A.BREAST CA
- B.LUNG CA
- C.PANCREATIC CA
- D.PROSTATE CA

15.A bisexual man has several mouth ulcers ,arthritis,sausage fingers.also has h/o diarrhea.MOST LIKELY

- A.BEHCET DISEASE
- B.REITER DISEASE
- C.RHEUMATOID ARTHRITIS
- D.ANKOLYSING ARTHRITIS
- E.PSORIATIC ARTHRITIS

16. A man has h/o unilateral headache,mostly occurs in morning.h/o lacrimation.DRUG OF CHOICE

- A.ERGOTAMINE
- B.PROPRANOLOL
- C.CARBAMAZEPINE
- D.ATROPINE

17.Postsplenectomy hereditary spherocytosis.AOF is true EXCEPT

- A.OSMOTIC FRAGILITY
- B.ANEMIA PERSISTENCE
- C.NORMAL LIFE SPA OF RBC
- D.PRESENCE OF SPHEROCYTES IN PERIPHERAL BLOOD

18. Alcoholic ketoacidosis EXCEPT  
A. NORMAL ANION GAP

19. A pt is brought to ER he is confused, ataxic, nystagmus, diplopia, ... has h/o alcohol. MOST LIKELY  
A. ALCOHOLIC HALLUCINOSIS  
B. WERNICKE ENCEPHLOPATHY

20. Treatment of wernicke encephopathy with low plasma sugar  
A. THIAMINE  
B. THIAMINE WITH GLUCOSE  
C. IV 5% GLUCOSE  
D. VIT B1

21. Ankylosing spondylitis LEAST ASSOCIATED  
A. AORTIC INCOMPETENCE  
B. SERO -VE ARTHRITIS

22. A middle aged woman has c/o mouth ulcers, morning stiffness of joints... it gets better with day....???? MOST LIKELY  
A. SLE  
B. RHEUMATOID ARTHRITIS

23. Alveolar exchange difference  
PaO<sub>2</sub>=?  
PaCO<sub>2</sub>=?  
Inspiratory O<sub>2</sub>=?  
A. 9  
B. 12.....????

24. B/L weakness of hand muscles  
A. MULTIPLE SCLEROSIS  
B. ULNAR NERVE LESION  
C. SYRINGOMYELIA

25. Weakness of all muscles unilateral in hand  
A. SYRINGOMYELIA  
B. ??????

26. PT with atrial fibrillation what is CORRECT  
A. WARFARIN SHOULD BE GIVEN  
B. RISK OF STROKE????

27. Diff between hemolytic anemia and anemia due to chronic blood loss  
A. DECREASED HAPTOGLOBIN  
B. POLYCHROMASIA

28. Question on alpha 1 deficiency  
27. Amourosis fugax CORRECT  
A. IPSILATERAL INTERNAL CAROTID ARTERY STENOSIS

29. Opening snap in mitral stenosis denotes  
A. DIMINISH WITH ATRIAL FIBRILLATION  
B. DUE TO VALVE MOBILITY

30. A child with suspicion of meningitis, LP lymphocytes increased, ??? MOST LIKELY  
A. ECHO VIRUSES  
B. BACTERIAL

31. Polycythemia and cor pulmonale MOST LIKELY ASSOCIATED WITH  
A. TUBERCULOSIS  
B. BRONCHIACTASIS  
C. EMPHYSEMA

32. A man with h/o flaccid paralysis of lower limb over a week. o/e reflexes r diminished, decrease sensation of touch, ??? MOST LIKELY  
A. ACUTE POLYMYOSITIS  
B. ACUTE POLYNEUROPATHY

33. Amyloidosis can complicate all EXCEPT  
A. TUBERCULOSIS  
B. LEPROSY  
C. MULTIPLE MYELOMA  
D. CHRONIC ACTIVE HEPATITIS.  
E. RHEMATOID ARTHRITIS

34. A pt came with fever, o/e lymphadenopathy, splenomegaly, on blood report abnormal lfts, atypical lymphocytes r present MOST LIKELY  
A. INFECTIOUS MONONUCLEOSIS

35. A female h/o enuresis, 2 sisters also have same problem MOST LIKELY  
A. HORSE SHOE KIDNEY  
B. HEREDITARY NEPHRITIS  
C. VESICOURTERIC REFLUX

36. Heparin is measured by  
A. PT  
B. APTT

37. BEST method of detecting H PYLORI eradication  
A. UREA BREATH TEST

38. In management of COPD recent improvement in health is due to  
A. HOME OXYGEN THERAPY

39. ROLE OF T LYMPHOCYTES  
29. Indicator of good prognosis in asthma  
A. INCREASING PULSUS PARADOXUS

- B.DECREASING INTENSITY OF WHEEZING
- C.INCREASING PaO<sub>2</sub> and decreasing PACO<sub>2</sub>

40.CO<sub>2</sub> retention is associated with EXCEPT

- A.HYPERTENSION
- B.CYANOSIS
- C.INCREASE MUSCLE TONE

41.ULCER at third metatarsal in DM MOST LIKELY

- A.ISCHEMIC
- B.NEUROPATHY
- C.INFECTION

42.A girl has c/o colicky abdominal pain associated with diarrhea,tenesmus.MOST LIKELY

- A.IRRITABLE BOWEL DISEASE
- B.CROHN DISEASE

43.What is true regarding myocardial infarction

- A.THROMBOLYTICS ARE NOT GIVEN IF ECG IS NORMAL

44.A woman has c/o depression,wt loss,constipation.o/e

serum Ca increased,serum PO<sub>4</sub> normal,urine calcium increased,serum urea and creatinine deranged.MOST LIKELY

- A.PARATHYROID ADENOMA
- B.RENAL FAILURE
- C.METASTATIC DISEASE

#### PAEDIATRICS

1.A mother came with complain that her child is not feeding properly,is not gaining weight and is mostly drowsy.O/E child has bilateral cataracts,is unable to gain enough weight.most likely

- a.Galactosemia
- b.Phenylketonuria
- c.G6PDH
- d ,e ??

2. A 9 days old infant with h/o forceful vomiting for 2 days.The electrolytes are:

Na 125mmol/l  
K 7.7mmol/l  
CL 80mmol/l  
HCO<sub>2</sub> 18mmol/l  
MOST LIKELY

- A.PYLORIC STENOSIS
- B.CONGENITAL ADRENAL HYPERPLASIA
- C.DUODENAL ATRESIA
- D.GORD

3.A mother came with 6 weeks old infant h/o repeated non forceful vomiting.o/e there is weight loss most likely

- A.PYLORIC STENOSIS
- B.CONGENITAL ADRENAL HYPERPLASIA
- C.OESOPHAGEAL ATRESIA

D.GORD

4.A mother came with a 6 weeks old infant who has h/o repeated vomiting after meals.o/e there is no weight loss.rest examination is normal.What is correct.

- A.DO CHEST XRAY
- B.NO RADIOLOGICAL INVESTIGATION IS NEEDED.
- C.BLOOD CULTURE
- D.URINE CULTURE

5.Parents have one child with phenylketonuria.What is the chance of their another child of having phenyl ketonuria

- A.1IN 2 REGARDLESS OF SEX
- B.1 IN 4 REGARDLESS OF SEX
- C.AS IN GEN POPULATION
- D.1 IN 2 IF IT'S A GIRL
- E.1 IN 2 IF IT'S A BOY.

6.A mother came with 3 yr old child h/o bleeding after stool on toilet paper.o/e fecal masses r palpable.there is anal fissure.Next immediate step

- A.LAXATIVE HIGH FIBRE DIET
- B.REASSURANCE IT IS NORMAL VARIANT
- C.APPLICATION OF ANNUSOL CREAM ON FISSURE
- D.ABD XRAY

7.Child with type 1 DM mother calls u on phone and says he is not feeling well.blood glucose is 1.1 mmol.What is immediate next step

- A.GIVE HIM HIS INSULIN
- B.HIGH CHO DIET
- C.GIVE HIM GLUCOTHON???RUB IT ON GUMS
- D.CALL AMBULANCE
- E.GLUCAGON

8.School going child cannot see blackboard .He can easily see computer and uses it daily. Most likely

- A.MYOPIA
- B.HYPERMETROPIA
- C.AMBLYLOPIA
- D.STRABISMUS

9.A baby with apnoea first line treatment

- A.O2 BY MASK
- B.ASPIRATION OF PHARYNX
- C.INTUBATE
- D E??

10.A mother with a baby of Down syndrome wants to know future risks other than congenital heart diseases EXCEPT

- A.OESOPHAGEAL ATRESIA
- B.CONDUCTIVE DEAFNESS
- C.LEUKEMIAS
- D.HYPOTHYROIDISM
- E.EPILEPSY

11.A child came o/e periorbital edema, ascites proteinuria +++ all is true EXCEPT

- A.MOSTLY HAS GOOD PROGNOSIS

B.TREATMENT OF CHOICE IS HYDROCORTISONE.  
C.IF BIOPSY IS DONE IT WILL SHOW MOSTLY GLOMERULOSCLEROSIS.  
D.IS ASSOCIATED WITH PNEUMOCOCCAL PERITONITIS.

12.3 YR child can do

- A.HOP ON ONE LEG
- B.DRESS WITHOUT SUPERVISION.
- C.DRAW A RECOGNISABLE MAN
- D.CLIMB STAIRS.

13.A child can sit unsupportedly,can stand with support and plays with toys around him and can roll over by himself.Age

- A.10 MONTHS
- B.7 MONTHS
- C.6 MONTHS
- D.11 MONTHS
- E .12 MONTHS

14.6 week old infant on routine examination one testis is not palpable.Next step

- A.REVIEW IN 6 WEEKS
- B.REVIEW IN 6 MONTHS
- C.REVIEW IN 2 YRS
- D.URGENT SURGICAL REFERENCE FOR ORCHIDOPEXY

15.A child with h/o vomiting mostly in morning,it is associated with headache.o/e there is ataxia.Most likely

- A.MIDDLE CRANIAL FOSSA TUMOUR
- B.POST CRANIAL FOSSA TUMOUR.
- C.OPTIC GLIOMA
- D.NEUROBLASTOMA

16.A 6 months old baby h/o repeated jerks mostly multiple in a day.During jerks arms r flexed and limbs r drawn up.There is decline in milestones as well.MOST LIKELY

- A.PETIT MAL EPILEPSY
- B.INFANTILE COLIC
- C.INFANTILE SPASM
- D.BENIGN SPASMS

17.All is true about Tourette syndrome EXCEPT

- A.IN THIS THERE R MULTIPLE VOCAL AND MOTOT TICS.
- B.CORPORALIA IS SEEN IN LESS THAN 10%
- C.IT IS NOT DISTRESSING FOR PATIENT.
- D.TICS OCCUR SEVERAL TIMES IN A DAY
- E.ALWAYS START LESS THAN 18 YRS

18.A 3 yr old child has mild dirty wound on his scalp.Treatment of choice

- A.TETANUS TOXOID
- B.TETANUS IMMUNOGLOBIN
- C.DTP
- D.PENICILLIN

19.A 7 yr old child fell from tree now he has c/o fever,pain in knee.o/e there is tenderness in upper part of tibia.MOST LIKELY

- A.SEPTIC ARTHRITIS
- B.OSTEOMYELITIS

- C.FRACTURE TIBIA
- D.FRACTURE PATELLA

20.Unilateral undescended testis in a child is associated with

- A.INFERTILITY
- B.DIRECT INGUINAL HERNIA
- C.MALIGNANCY
- D.HYDROCELE
- E.VARICOCELE

21.10 week old child with persistent unilateral discharge.treated with antibiotics.but it is still recurring

- A.GONOCOCCUS
- B.CHLAMYDIA
- C.NASOLACRIMAL DUCT OBSTRUCTION
- D.FOREIGN BODY.

22.What is normal for a infant.

- A.FEMALE WITH ENLARGED CLITORIS
- B.MALE WITH ENGORGED BREAST

23.An 8 yr old child o/e wt is 48 kg w/c is more than 98 percentile.height is 140 cm which is more than 90 percentile.otherwise is normal.WOF IS CORRECT.

- A.ADVANCED BONE AGE
- B.INCREASED BLOOD SUGAR LEVEL
- C.PRIMARY HYPERALDOSTERONISM
- D.THYROTOXICOSIS

24.A boy came with h/o persistent cough and wheeze from one day.Two of the family members have also got cough.FIRST INVESTIGATION

- A.CHEST X RAY
- B.SPUTUM EXAMINATION
- C.FULL BLOOD COUNT
- D.CHEST XRAY IN FULL INSPIRATION AND EXPIRATION

25.A 8 week old child h/o persistent cough.o/e wheeze and fine crepitations.BEST DIAGNOSTIC TEST

- A.CXR
- B.SWEAT CHLORIDE TEST
- C.BLOOD CULTURE
- FULL BLOOD COUNT

26.Mother of 18 months old child says that the child is not babbling.audiological assesment was done when he was 10 months old what is next step

- A.REASSURANCE
- B.REPEAT HEARING TEST
- C.ARRANGE AUDIOMETRY
- D.

27.A baby born at term collapsed in cot after 10 days o/e central cyanosis no peripheral pulses,no murmur.most likely

- A.FALLOT TETROLOGY
- B.PULMONARY HYPERTENSION
- C.PDA
- D.LEFT HYPOPLASTIC HEART DISEASE
- E.TRANSPOSITION OF GREAT VESSELS

28. A newborn is born by forceps delivery. He is unable to move his forearm MOST LIKELY  
A. ERBS PALSY  
B. FRACTURE HUMERUS

#### PSYCHIATRY

1. Immature defence mech

- A. HUMOR
- B. ALTRUISM
- C. ANTICIPATION
- D. PROJECTION
- E. REPRESSION

2. Parents have adopted a girl. She has SCH. They want to know the risk of their own daughter of having SCH.

- A. less than 2 %
- B. NIL
- C. 40%
- D. 17%
- E. 2.6%

3. Female throws bottles on people. How would you differentiate SCH from Delirium

- A. DURATION OF SYMPTOMS
- B. LEVEL OF CONSCIOUSNESS
- C. INSIDIOUS ONSET

4. SSRI can be caused by all drugs except

- A. L-TRYPTOPHAN
- B. FLUOXETINE
- C. HALOPERIDOL
- D. CLONAZEPAM
- E. MOCLEBEMIDE

5. A man has h/o grandiose ideas . MOST LIKELY

- A. BORDERLINE PERSONALITY
- B. NARCISSISTIC PERSONALITY
- C. HYPOMANIA
- D. DRUG EFFECT

6. Prod

MCQ 2006 March, Brisbane

1 After a carotid massage the patient's heart rate goes down 50%. WOF

- a. VT
- b. SVT
- c. atrial fibrillation
- d. Atrial flutter

2 A 52 yr old obese, male with a BMI of 31, complains of a nocturnal cough .It's a dry cough, worse after eating. Also has a H/O URTI. The most likely possibility..

- a. Postnasal drip
- b. Chronic bronchitis
- c. Asthma
- d. GORD

3. A 25 yr old construction worker suffers from an L5-L4 disc prolapse after lifting a heavy object at work. The best Investigation

- a. CT
- b. Myelogram
- c. MRI
- d. Ultrasound

4. ECG. The diagnosis

- a. COPD
- b. cardiomyopathy
- c. RBBB

5. Which of the following is an indication for thrombolysis.

- a. RBB
- b. LBB

6.A man develops bilateral,small muscle wasting of the hands with loss of pain but no loss of touch. ( dissociated sensory loss).WOF could be the cause?

- a. syringomyelia
- b. MND
- c. Transverse myelitis
- d. Gullien –Barre

7. A 69 yr old patient suffers unilateral osteoarthritis of the hip.On which side should the supportive walking stick be used.

- a. Stick on the contralateral side
- b. Stick on the ipsilateral side

8. A 9 month old male child, presents with vomiting and diarrhea. He has also passed blood stained stools and is suffering from dehydration.(7%). The initial investigation

- a. ELISA
- b. stool culture
- c. Laparotomy
- d. Air contrast enema

9. A 31 yr old primipara with 10 weeks amenorrhea , comes with no medical, surgical or psychiatric problems. Which of the following positive tests will decide a change in her management.

- a. HIV
- b. Rubella
- c. CMV
- d. Syphilis
- e. Blood sugar level

10. Cystic Fibrosis is diagnosed in a 5 week old child. What would you discuss in regards to genetic counselling with the parents about the fate of a second pregnancy.

- a. There is a 1;4 chance of development of CF.
- b. There is a 1;4 chance of child being a carrier
- c. There is a 1;2 chance of being normal
- d. Prevalence in the community is 1 :2500, Incidence in the gene is 1:25, Every child born to this couple has a 1:4 chance of being affected

11 A 42 yr old man,has a 65 yr old mother who has recently been diagnosed with colon cancer. What advice would you give him.

- a. Faecal occult blood testing for 2 yrs
- b. Colonoscopy after 50yrs
- c. Sigmoidoscopy after 50 yrs
- d. Sigmoidoscopy and colonoscopy after 45 yrs of age

12. A patient presents 4 weeks post acute pancreatitis, and their Serum Amylase is still raised. What is the most likely DX

- a. Cholelithiasis
- b. chronic pancreatitis
- c. pancreatic duct obstruction
- d. pseudo pancreatic cyst

13. What is the most commonest complication of ERCP

- a. haemorrhage in the duodenum
- b. duodenal perforation
- c. pancreatitis

14. Routine Ct scan on a 62 yr old male,shows an AAA of 6.3 cms.The next step in MX.

- a. Angiogram and angioplasty
- b. Repeat CT in 6 months
- c. US
- d. Anti- hypertensives

15. A 24 yr old male on a routine insurance examination shows an increase of urine protein ( 2+) but no other significant findings.What is the initial management?

- a. IVP
- b. US renal
- c. Repeat testing of an early morning urine sample.

16. Which nerve is responsible for impaired extension of the wrist.

- a. Median n
- b. Radial n
- c. Ulnar n
- d. Post interosseous n
- e. Ant interosseous n

17. A 65 yr old male patient with a history of MI , was treated with a stent and is currently taking CLOPIDOGREL. He suffers a femoral artery aneurysm.What is the initial MX?

- a. Stop clopidogrel
- b. tight band application

c. Artery repair

18. What is the long term outcome in a patient with an Antisocial personality disorders?

- a. 75 % end up in jail
- b. 50 % return to normal
- c. 25 % die in jail
- d. 30 commit suicide

19. The commonest complication of drug toxicity with anti psychotics on day1/2?

- a. Akathisia
- b. Dyskinesia
- c. Dystonia
- d. Chorea

20. Breast feeding as a means of contraception includes all the following benefits, except.

- a. affective upto 6 months
- b. Baby not allowed to go on solid foods
- c. Failure rate more then 3 per 100 women years

21. A young male, a machine tool operator, complains of restriction of movement and pain in the dorsum of the hand .OE there is a tender palpable swelling on the dorsum of the hand. What is the initial investigation.

- a. D diamer
- b. Venogram
- c. US dopler
- d. XRY

22. A 9yrs old boy initatied a fire after lighting a match. He suffers sever burns of the face ,with blackening ( soot ) on the facial area. What is the initial MX.

- a. intubation

23. A young man presents with 15% burns.What is the fluid replacement for the next 24hrs?

24. A 62 yr old man presents with vertigo, horners syndrome ,vomiting and ataxia. What is the site of lesion?

- a. a.Ant cerebral artery
- b. b perforating artery
- c. c.Vertebra artery
- d. d.MCA

25. A 21 yr old lady previously normal patient complains of Trigeminal neuralgic pain, with numbness of the left half of upper lip. No previous neurological deficeits prior to onset.What is the DX?

- a. MS

26. A patient presents with a pnemothorax..What is the initial management?

27. A male presents with diplopia and photophobia. Pupils are normal and reflexes are intact. What could be the cause?

- a. DM

28. What is the best investigation for the detection of gallbladder pathology?

- a. US
- b. ERCP
- c. CT scan

29. A child presents with clinical features of URTI. He is allergic to penicillin. What is the treatment of choice?

- a. a.roxythromycin
- b. b.cephalexin
- c. c.augmentin

30. A 36yr old women comes with the complaint of stress incontinence? What would you advise her?

- a. Pelvic floor exercises

31. A 43yr old female patient presents with a painless 2cm lump in the left upper quadrant of the left breast. What is the initial investigation.

- a. FNAC
- b. Local biopsy
- c. Mastectomy

32. A young male presents with the complaints of tinnitus, vertigo and deafness. What is the possible diagnosis.

- a. Menniers disease
- b. Accoustic neuroma
- c. meningioma

33. A 4yr old child presents with history of ASOM. .It was treated with penicillian. The child returns after 4 days with no improvement.What is the management.

34. 12 hour old newborn baby presents with difficulty in breathing and cynosis. No murmurs are present. Xray shows pulmonary plethora .What is the possible diagnosis?

- a. TGA
- b. PDA
- c. VSD
- d. ASD

35. In a patient with a mid radial fracture. Which nerve is damaged?

36. A photo of HSC. What is the diagnosis?

37. There were 2 questions in which the Glasgow coma scale has to be calculated.

38. A question 8 lines long .The diagnosis is infantile spasm.

39. A CT scan of the brain showing a round low density lesion. What is the diagnosis.

40.What is the initial management of Hyperkalemia?

41. In a patient with 15% burn injury what solution would be used?

- a. Hartmanns solution
- b. Normal saline
- c. 4% dextrose

42. A 42 yr old male patient complains of erectile dysfunction. What is the management?( no drugs were listed)

- a. Pressure method
- b. Female masturbation
- c. Manipulation of the breast

43. A 25 yr old primigravida presents with 12wks amenorrhoea. On examination the uterus is 15 weeks in size. Which of the following could be the cause?

- a. twin pregnancy
- b. molar pregnancy
- c. Miscalculated LMP

44. A patient presents with pre eclampsia fits. What is the initial management.

- a. C section
- b. magnesium sulphate
- c. induce labour

45. In a patient on HRT? Where do they act?

- a. ovary
- b. endometrium
- c. pituitary
- d. hypothalamus

46. A near term pregnant woman presents to the emergency department after being physically abused by her partner. She was struck on the abdomen. What would be the management?

- a. after a normal CTG send the patient home
- b. keep her for 24hrs observation
- c. immediate c/s

47. A question on Paget's disease

48. 27y woman presents with a 2cm breast lump noticed while showering. What is the initial management?

- a. FNAC
- b. US
- c. CT

49. most accurate investigation of bile duct

- a. US
- b. CT
- c. ERCP

50. What is the most common cause of death in a child suffering from burns?

- a. sepsis
- b. renal failure
- c. respiratory failure

51. An obese woman with HT and diabetes comes for advice regarding pregnancy. On a urine examination, she tested positive for sugar. What advice would you give her?

- a. An OGTT with advice on controlling her diabetes.
- b. A change of life style.
- c. she should not get pregnant at all.

52. A 42 yr old male with a history of surgery, 5 days post-op suddenly collapses. What could be the cause?

- a. PE
- b. atelectasia

53. A 35 yr old male who was involved in a car accident and suffered a fracture of the femur. He had surgery a week ago and is suddenly becoming disorientated and believes that people are trying to kill him. What is the cause?

- a. fat embolism

54. There were a few questions on asthma therapy. The use of preventers and also how to manage an acute attack in a child and in an adult.

55. A child presents with a pansystolic murmur and cyanosis in childhood. What could be the cause?

56. A patient presents in the emergency department with pneumothorax. Where should the needle be inserted?

- a. 3rd mid clavicular
- b. 5th axillary

57. A photo showing a perianal fistula. What symptom would be associated with this lesion?

- a. pain on defecation
- b. blood on stool
- c. discharge

58. A photo of varicocele. What condition is commonly associated with it?

- a. renal ca
- b. testicular ca

59. A 42 yr old patient undergoes an MRI and by chance an adrenal mass of small dimensions is found. On further hormonal investigations no abnormality was found. What is the management?

- a. Surgery
- b. reassurance
- c. after 6 months a repeat CT scan

60. A fat young boy presents for a routine check-up. On measuring the BP high readings are obtained. What is the management?

- a. 24Hr BP monitoring
- b. check cuff size, and recheck the BP with an adult cuff
- c. prescribe anti-hypertensive medications

61. A 2yr old child presents with short stature and hyperflexibility and mental retardation.What could be the cause?

a. thyroid

62. A question on kawasaki disease

63. A 34 yr old male patient presents with history of an injury involving a rusty nail and gravel.Not previously immunised.What would be the management?

a. TT+immunoglobulin + antibiotics

64. In a pt with a suspected snake bite ...what would you not do?

65. In a pregnant diabetic patient, which of the following conditions are seen more commonly in comparison to a normal pregnancy?

a. a macrosomia

b. b hydramniotic

66. A patient wanted to know her chances of having a down syndrome baby. After a maternal serum test the following results were obtained.

Down 1: 200

spina bifida 1: 400

what will you advise .

a. termination

b. amniocentesis

c. US

67. A 23 yr old primi who is 28wks pregnant comes with the history of contact with a patient suffering from rubella .What would you advise?

a. us

68. What is the best diagnostic test for haemochromocytosis.( please know all the biochemical results for diagnosis of this condition,as this question is often repeated in different forms)

a. transferrin saturation

b. Liver biopsy

69 A chest X ray showing diffused lesions.What is the diagnosis?

a. a broncolitis

b. b pneumonia

70 . A 45 yr old patient presents with 3rd nerve palalysis without any changes in the ocular reflexes.What is the cause?

a. DM

71. A pregnant women presents with vaginitis .She has a prior history of a miscarriage. How do you manage the patient?

a. immediate treatment

b. b recheck at 28wks and treatment

72. A photograph of an SCC on the face.

72. A photograph of a HUCHINGSON freckle

73. A photograph of a bcc

74. What is the investigation of choice in a patient with a doubtful submandibular cyst?.

75. A 7y boy presents with a cyst ...cant remember the location. What is the management. The same question appears again but the patient is 17yrs.

76. A question on the physical examination of scabies in a child

O&G

1. A 22 nulliparous woman comes for routine first antenatal visit at 12 weeks amenorrhoea. On examination, the uterus was found to be 15 weeks gestation. What would be the likely cause?

- a. twin pregnancy
- b. acute polyhydramnious
- c. incorrect dates
- d. macrosomia

2. A woman had a quick normal 6-hour labour and delivery to a healthy baby. A couple of days later she lost 800mls of blood after passing a large clot and is pale and tachypnoea. She was found to have a boggy uterus and a fundal height 2cm above the umbilicus. What would you do immediately?

- a. dilatation and curettage of retained products
- b. give prostaglandin into uterine muscle
- c. give i.m syntometrine
- d. start her on antibiotics
- e. intravaginal prostaglandin

3. A nulliparous woman came for routine antenatal at 12 weeks. A week later, her cervical smear came back as CIN3. What is the next course of investigation?

- a. Hysterectomy
- b. Colposcopy and biopsy
- c. Colposcopy and LLETZ excision
- d. Perform abortion

4. A 16-week multipara was found to have bacterial vaginosis at routine care. She had a previous premature delivery at 34 weeks, she has no symptoms, and everything is fine. What treatment will you give?

- a. metronidazole
- b. wait till 28 weeks
- c. tetracycline
- d. vaginal pessaries

5. A woman presents with foul smelling green vaginal discharge and a smear was taken. The smear was found to have gram-positive rods and cells that were stuck together as "clue" cells. What do you think she has?

- a. trichomoniasis
- b. bacterial vaginosis

6. A 37-year-old woman asks for contraception, as she would still like to have children in future. She has children from previous relationship and is now in a new relationship. She is a smoker. What method would you recommend?

- a. OCP

- b. IUCD with nor ethisterone
  - c. Depo Provera
  - d. Mini pill
7. A woman with CIN3. What advise you will not give her?
8. A 42-year-old woman with 6 months history of menorrhagia with the bleed lasting 8 days every month. Management?
- a. dilation and curettage
  - b. hysteroscopy
  - c. US for endometrial thickness
  - d. OCP
9. A primigravida woman whose labour was progressing normally was given epidural pain relief, suddenly the foetal heart rate drops to 100 pm and?2 sustained deceleration. What could be the cause?
- a. maternal hypotension
  - b. foetal hypoxia
  - c. foetal cord compression
10. A primigravida in labour with irregular pain and contractions, the cervix was 4 cm dilated on admission. She was examined four hrs later and her cervix was still 4cm. What will be the next management?
- a. set up an oxytocin drip
  - b. do caesarean
  - c. give analgesia
  - d. rupture the membranes
11. What can be found in association with a choriocarcinoma?
- a. adenocarcinoma
  - b. mucinous cystadenoma
  - c. a metastatic choriocarcinoma of the ovary
  - d. leiomyosarcoma
12. Breast-feeding provides good contraceptive. What is not correct?
- a. birth in the last 6 months
  - b. baby should be breast fed with no supplementation
  - c. night feeding compulsory
  - d. no menstrual periods after lochia
  - e. intercourse is not more than once a week
13. What advise would you give about premature ejaculation?
- a. pull woman's nipples
  - b. grab base of scrotum
  - c. woman on the top
14. A 34-year-old woman wants to know what is her chance of having a baby with neural tube defect as her sister has just given birth to a child with the problem. What will you tell her?
- a. chorionic villi sampling at 16 weeks
  - b. she has 50% chance of having child with defect
  - c. maternal serum test with US
  - d. no problems

1. What is the finding in ECG for Hyperkalaemia?

- a) Peaked P wave and prolonged P R interval

Wide

- b) QRS complex
- c) Presence of U wave.
- d) Bigemini
- e) Inverted T wave.

2. Which of the following is not matched?

- a) Promiscuity CA cervix
- b) Coeliac disease & lymphoma
- c) EBV & Nasopharyngeal carcinoma
- d) Schistosomiasis & bladder cancer
- e) Nickel & liver ca

3. Where you can hear mitral stenosis murmur best?

- a) 2nd left inter costal space.
- b) Left lower sternal border
- c) At the apex.
- d) Rt. Lower sternal border
- e) Mid axillary line.

4. A man has developed headache (cluster headache) what is the acute stage Management?

- a) Ergotamin
- b) 100% O<sub>2</sub>
- c) Paracetamol
- d) NSAID
- e) Relaxation

5. Which one of the following indicates carrier state of Hepatitis B?

- a) HbsAG
- b) HbsAB
- c) HbcAG
- d) HBeAB

6. A man has presented with prominent a wave raised JVP and also 4th heart sound what is the Dx?

- a) Myocardial infarction
- b) Pulmonary embolism
- c) Infective endocarditis
- d) Heart failure

7. A 45 yrs. Old man past history of peptic ulcer disease presented with haematemesis on gastroscopy one shaggy ulcer was found. Histology was negative. What will you do next?

- A) Antacid
- B) Omeprazol
- C) Breath test for H. Pylory.
- D) I/V fluid.
- e) Antibiotic

8. A 16 yrs. Old boy brought to emergency with rope around his neck. Several pornographic

magazine were found around him at home, What can it be?

- a) Suicidal attempt.
- b) Autoerotic asphyxia.
- c) Frotturism

9. a woman with history of anencephalic baby come for antenatal visit. How much of folic acid you will advice her to take every day?

- a) 4-5mg./day
- b) 10mg./day
- c) .4 -.5 mg./day
- d) Increased intake of green leafy vegetables daily.
- e)

10. For antenatal care to prevent neural tube defect when and how long to offer folic acid?

- a) 3month before conception until ist. trimester
- b) From conception to whole of the pregnancy.
- c) From one month before pregnancy to full period of pregnancy
- d) 1 month before pregnancy up to ist. trimester.

11. A businessman afraid of traveling of air, he feels nauseated, palpitation, sweating and dizziness while he leaves his home. He always wanted to be at home. What is the diagnosis?

- a) Social phobia
- b) Agoraphobia
- c) Panic attack with agoraphobia
- d) Personality disorder

12. A rescuer while working get burned about 45% of his body from a patrol tank blast. He was rushed to hospital. He was coughing out carbonaceous material. His vital signs were stable. What will you do next?

- a) Give O2
- b) Intubate
- c) Iv fluid
- d) Do ABG to see wheathere intubation is warranted
- e) Ad minister antibiotics

13. A 65 yrs. Old with history of COPD found unconscious by his neighbor. During transportation to hospital he received 10lit O2 by mask. At the emergency he is unarousable What could be his ABG ?

- a) Pco2 75% Po2 55% P.H. 7.45
- b) Pco2 100% Po2 60% P.H. 7.15
- c) Pco2 90% Po2 89% P.H. 7.50
- d) Pco2 40% Po2 60% P.H. 7.36 ?

14. One child accidentally took 20 iron tab.He is brought in hospital. What could not be his signs & symptoms?

- a) Abdominal pain
- b) Signs & symptoms can develop after 24 hours.
- c) Cerebellar ataxia
- d) Hepatic failure
- e) He can develop signs & symptoms within 4 hours.

15. In Lead poisoning you may not find which of the following?

- a) Anemia
- b) Neuropathy
- c) Deafness
- d) Abdominal pain
- e) Inflammation of liver

16. 8 yrs. old boy took 25 tab. of Imipramin and presented to your sugary after an hour, before calling to the poisoning center what you will you next?

- a) Vomiting with ippicahe
- b) Measure imipramine level
- c) Activated charcoal
- d) I/V fluid
- e) Dialysis

17. Which of the drugs cannot be prescribed together?

- a) Lithium carbonate & Carbamezum
- b) Lithium carbonate & Sertrelline
- c) Lithium carbonate & Clonazepine

18. A middle aged man presented with central abdominal pain radiating to the back. During the attack he becomes hypotensive , after 6 hours he returns to normotensive. This is happening for last 6 months, what can be the cause?

- a) Acute pancreatitis
- b) Leaking aneurysm
- c) Ureteric calculus
- d) Mesenteric ischemia
- e) Mesenteric adenitis

19. A patient on a routine examination found to have a 5cm. mass on the upper pole of right kidney, what you will do next?

- a) USG
- b) Laparotomy
- c) Rescan after 6 weeks time
- d) CT guided biopsy
- e) Reassure

20. A patient were taking allupurinol, atenolol, diclophenac sodium, frusemide, simvastatin, rimipril ,slow K+ and also aspirin. Now he presents with oliguria. What could be reason for his oliguria?

- a) K + rimipril + atenolol
- b) Aspirin + atenolol + frusemide
- c) Slow K + diclophenac sodium + Frusemide
- d) Slow K + diclofenac sodium + atenolol
- e) Rimipril + frusemide + atenolol

21. You been asked to deliver lecture in a seminar regarding retardation of child development, you will say.....

- a) My child does not roll over from back to front at the age of 4 months of age
- b) My child do not smile at 2 months of age
- c) My child do not sit at 5 months of age
- d) My child does not have dentition at 10 months of age
- e) My child does not stand at 11 months of age

22. In a diabetic keto-acidosis patient which of the following causes for hyperkalaemia ?

- a) acute renal failure
- b) lack of insulin
- c) Acidosis
- d) infection
- e) lack of glucose

23. A 10 months old baby, she was on cow's milk formula, she is very reluctant to take solids. Her wt. Is on 25th percentile, ht. Is on 50th percentile. What will you advice.....

- a) Change to a different cow's milk formula
- b) Offering solids prior to cow's milk formula
- c) Give her nutritional supplement like multivit, polyjoule etc.
- d) Give her breast milk
- e) Give her only solids

24. A middle aged man has flashes of light and shimmering. It resolves without any significance. After 4 days symptoms returned and he completely lost his vision in one eye over a period of 6 hours. What could be the DX?

- a) Retinal artery thrombosis
- b) Macular degeneration
- c) Carotid artery disease
- d) Retinal & macular detachment
- e) Vertebrovascular artery insufficiency

25. What are the features of vertebrovascular artery insufficiency?

- a) Ipsilateral blindness
- b) Amareousis fugues
- c) Diplopia, nystagmus, ataxia and visual disturbances
- d) Contralateral hemiplegia & horner's syndrom

26. Which of the following is the feature of Labyrinthitis?

- a) Vertigo
- b) Hyperemic eardrum
- c) Nystagmus

- d) Otorrhoea
- e) Hypotension

27. A lady had a MVA 6 months before. Now she presents with pain in her Rt. Arm and hand with disturbed sensation. Her biceps and triceps jerks are normal. Muscle power is 6/6 in biceps and 6/5 in triceps respectively. Other tests were normal, What could be the cause of her situation?

- a) Spinal cord injury
- b) Fracture in the cervical vertebra
- c) Multiple sclerosis
- d) Intervertebral disc protrusion
- e) Spinal artery thrombosis

28. A man has undergone treatment for carcinoma of lungs. Now he presents with pain alongside his left arm and hand, what could be the cause?

- a) Paraneoplastic neuropathy
- b) Ca involving brachial plexus
- c) Multiple sclerosis
- d) Disc prolapse
- e) Motor neuron disease

#### OBSTETRICS & GYNECOLOGY

1. About Bartholin cyst which one is correct?(MAY 2001)

- A. most commonest cause is Staphylococcus Aureus
- B. maybe due to gonococcus
- C. usually treated by antibiotics
- D. usually recovers spontaneously
- E. treated by marsupialization

2. During uterus contraction, what happens to placenta blood supply?(MAY 2001)

- A. it reduces
- B. it ceases
- C. it increases
- D. unchanged
- E.

3. A 28 year old lady 16 weeks pregnant, G3P0 with 2 previous second trimester miscarriage with no uterus contraction or severe pain, is concerned about her pregnancy, except from reassurance what is the best preventive management?(MAY 2001)

- A. Sulbutamol
- B. observation
- C. cervical stitch
- D. Amniocentesis in 15-17 weeks, looking for fetal abnormality
- E. complete bed rest between 16 to 28 weeks

4. In a slightly obese 54 year old lady who has been menopausal 3 years ago and still does not

have hotflush what is the main reason for her not having the symptom? (MAY 2001)

- A. she has enough progesterone hormone that prevents hotflush symptoms
- B. She converts androstenedione to estrone
- C. she converts androstenedione to estradiol
- D. she has androgens in fat tissues which prevents hot flush symptoms
- E. obese women have more FSH that prevents hotflush

5. What is the risk of a 38 yr old lady having a baby with Down syndrome? (MAY 2001)

- A. 1:50
- B. 1:100
- C. 1:200
- D. 1:500
- E. 1:1000

6. A 39 weeks pregnant lady (G1P0) with normal antenatal care admits to the ward with contractions started at 1am with interval of every 4-5 min.

Cervix is 2 cm dilated and effacement is complete. Fetus is in LOA presentation (left occiput anterior). In which situation Obstetric consultation opinion is needed? (MAY 2001)

- A. 5 am, cervix fully dilated, membrane broken, contractions 5 min still 2 cm above ischial spines.
- B. 5 am cervix 3 cm, membrane broken, contractions 5 min
- C. 5 am cervix 3 cm, membrane not ruptured, contractions become weak and irregular
- D. 5 am cervix 3 cm, membrane not ruptured, contractions every 5 min
- E. 8 am, cervix 5 cm, membrane ruptured, contractions every 3 min

7. In a 32 year old lady with mastalgia, which did not respond to conservative management, what will you offer as a next step in management? (MAY 2001)

- A. bromocriptine
- B. Medroxy progesterone for 10 days from day 14 to day 24 each cycle
- C. clomiphene citrate
- D. Danazol
- E. combined contraceptive pills

8. Which of the following is not a benefit of taking combined oral contraceptive pills? (MAY 2001)

- A. reduction in incidence of menorrhagia
- B. reduction in incidence of benign breast disease
- C. reduction in incidence of pelvic inflammatory disease
- D. reduction in incidence of cervical cancer
- E. reduction in incidence of ovarian cancer

9. A lady complains of depression, breast tenderness and low mood related to her periods. Which one of the followings is useful to confirm that she has premenstrual syndrome? (MAY 2001)

- A. low estradiol level
- B. slightly increase in prolactin level
- C. chart her symptoms for 3 months
- D. increase in progesterone level
- E. respond to antidepressant treatment

10. A 28 year old girl complains of hirsutism and irregular periods. 17-hydroxyprogesterone is normal and DHAS (dehydroepiandrosterone sulphate) is slightly increased. She also has increased ratio of LH/FSH. What is your diagnosis? (MAY 2001)

- A. prolactinoma
- B. primary ovarian failure
- C. polycystic ovary
- D. cervical cancer
- E. endometriosis

11. A lady is going to do laparoscopy because of infertility. During discussion about the risk of the procedure, what advice will you give to the patient, except? (MAY 2001)

- A. Because you can see the surface and do biopsy, laparoscopy is the efficient diagnostic method for polycystic ovary disease
- B. Because CO<sub>2</sub> gas can not be fully removed, she may experience some shoulder tip pain
- C. It may cause rupture of internal organs
- D. It is a diagnostic tool for endometriosis
- E. Infection is very rare and nearly always the result of unnoticed bowel damage.

12. Which one of the following is not related to hyperprolactinaemia? (MAY 2001)

- A. amenorrhea
- B. dry vagina
- C. galactorrhea
- D. osteoporosis
- E. increased libido

13. Which one of the following indicates ovarian tumor rather than ascites? (MAY 2001)

- A. shifting dullness
- B. abdominal distension
- C. dull anteriorly and tympany laterally
- D. dull laterally and tympany anteriorly
- E. tympany all over abdomen

14. Which of the following is not a tumor marker for gynaecological cancer? (MAY 2001)

- A. BCA1
- B. CA125
- C. AFP
- D. B-hCG
- E. inhibin

15. A 54 year old lady who has 3 children complains of need to void many times during the day and passing small amount of urine after micturition. What is her diagnosis? (MAY 2001)

- A. stress incontinence
- B. urge incontinence
- C. overflow incontinence
- D. she will pass urine while running or jumping
- E. she can lose large amount of urine

16. Which one of the following is the main predisposing factor of asymptomatic urinary tract infection in a pregnant woman? (MAY 2001)

- A.pressure of enlarged uterus on bladder
- B.low immune system during pregnancy
- C.dilatation of ureter and calyces due to progesterone
- D.change of flora in perineal area during pregnancy
- E.high level of oestrogen increase urinary tract obstruction which predispose to infection

17.Which of the following is not correct ?(MAY 2001)

- A.Full breast feeding is a good method of contraception in the first 6 months after child birth
- B.innitial menstruation after delivery is usually anovulatory
- C.bromocriptine may provoke ovulation
- D.progesterone is better than combined pills for contraception if she is breast fed
- E.progesterone increase milk production

18.What is true in bronchial asthma in pregnancy?(MAY 2001)

- A.Do not cause more bronchospasm
- B.beta blockers should be used for treatment
- C.steroids should not be used
- D.it can cause premature labour
- E.salbutamol should not be used for treatment

19.Which of the following is not true about oral contraceptive pills?(1997)

- A.it reduces the incidence of benign breast disease
- B.it reduces the incidence of endometrial cancer
- C.it reduces the incidence of ovarian cancer
- D.it reduces the plasma concentration of lipids
- E.it reduces the incidence of iron deficiency anaemia

20.Which of the following is protective factor in breast cancer?(1997)

- A.nulliparus
- B.early menarche
- C.late menopause
- D.first child under the age of 34
- E.breast feeding

21.What is your plan of management in a 30 weeks old pregnant lady who has a asymptomatic streptococcus B infection?(1997)

- A. treat the patient with penicillin immediately
- B.do not treat because 25% of women are carriers
- C.treat for doxycycline till the end of pregnancy and during labour
- D.It is part of normal flora which does not need treatment
- E.treat with IV penicillin during labour

22.A woman that in her previous pregnancy had a child affected by anencephaly is pregnant again.With respect to management of this pregnancy which of the following is not correct?(1997)

- A.amniocentesis at 18 weeks
- B.CVS at 11 weeks
- C.ultrasound at 11 weeks to look for malformations
- D.ultrasound at 11 weeks looking for nuchal thickness
- E.maternal screening at 16 weeks

23. A 36 year old primigravida is worried about Down`s syndrome .Which of the following investigations is the most specific and at the same time has the lowest risk for the foetus?(1997)

- A. maternal screening at 16 weeks gestation
- B. amniocentesis at 18 weeks
- C. CVS at 12 weeks
- D. ultrasound at 11 weeks looking for nuchal thickening
- E. cordocentesis at 24 weeks

24. A 48 year old woman had a CIN lesion removed 10 years ago and has recently had hysterectomy but has her ovaries left. Which of the following is not true about her?(May 1997)

- A. she will need to do vaginal smear every 2 years
- B. she will enter menopause sooner or at normal age
- C. she will not need progestrone in her HRT
- D. women with this type of operation have less chance of getting ovarian cancer
- E. oestrogen therapy will be beneficial for her when she enters menopause

25. A 52 year old woman that has had hysterectomy and post-operative DVT ,comes to see you complaining of hot flushes. Which of the following treatment do you recommend?(May 1997)

- A. combined oral contraceptive pill
- B. oestrogen transdermal patches ,50 microgram
- C. low dose oestrogen therapy per os
- D. oestrogen and progestrone transdermal patches
- E. progestrone therapy only

26. A 26 nulliparus woman who has recently married and wants to have children comes to you complaining of severe menorrhagia .On examination, you find that her uterus was completely deformed by uterine fibroids and that her uterus can be felt just under her umblicus, and haemoglobin is decreased by 4 gram%. Which of the following would you recommend?(May 1997)

- A. total hysterectomy
- B. open myomectomy after controlling her anaemia
- C. give 3 months therapy with gonadotropin agonists, then do an open myomectomy
- D. do a transcervical myomectomy
- E. prescribe her the oral contraceptive pill

27. A young woman with infertility is recommended to do laparoscopy. She comes to GP office looking for information about laparoscopy.

All the following are true except?(May 1997)

- A. it is a good way to diagnose endometriosis
- B. pain in shoulder is common post operatively
- C. you can not find or diagnose polycystic ovary disease
- D. there is a risk for damage to aorta or vena cava which can lead to death
- E. minimal risk of damage to the internal organs rather than laparotomy

28. A 50 year old woman whose last period was 2 years ago, comes with 3 days painless vaginal bleeding .What is the most likely diagnosis?

(May 1997)

- A. early stage of cervical cancer

- B. endometrial cancer
- C. occasional follicular hypertrophy
- D. vaginal atrophy
- E. anovulatory cycles

29. Regarding endometrial ablation all is true except? (May 1997)

- A. difficult to operate if the uterus is bigger than 10 cm
- B. cause amenorrhea in 40-60% of the patients
- C. oestrogen without progesterone can be used postop
- D. it is safer to use roller ball
- E. hospital stay is usually short

30. A 18 year old female who has had multiple partners during the last few years, presents with profuse vaginal discharge. Which of the following investigations is not correct? (May 1997)

- A. request HIV test
- B. take lower endocervical swab for gonorrhoea
- C. take posterior fornix swab for chlamydia
- D. treat sexual partner
- E. send cervical smear for cytology

31. A 28 year old (G2,P1) woman who previously had a normal vaginal delivery, is currently 37 weeks pregnant and is admitted for induction of labour due to pre-eclampsia. The baby is in longitudinal lie, cephalic, not engaged. At this time, you rupture the membrane and put the patient on oxytocin infusion. With the first uterine contractions the foetus becomes bradycardic, 60 beats per minute. What is the next step of management? (May 1997)

- A. do caesarean section promptly
- B. do abdominal CTG (cardiotocography)
- C. do vaginal examination
- D. observe mother, check mother's vital signs
- E. increase oxytocin dose to accelerate delivery

32. After 10 hours of obstructive labour, a woman delivered her baby by caesarian section. 3 days later she developed fever of 37.9°C.

Which of the following is the least likely cause for fever in this lady? (May 1997)

- A. urinary tract infection
- B. wound haematoma
- C. deep vein thrombosis
- D. endometrial infection
- E. engorgement of the breasts

33. A mother brings her 4 year old girl with intermittent yellow vaginal discharge. In the examination you find that the vulva is structurally normal except that it is a little red and there is sign of scratching, the girl tends to put her hand to the area. What is the most likely diagnosis? (May 1997)

- A. foreign body
- B. candidial infection
- C. gardenella vaginitis

- D. syphilis
- E. sexual abuse

34. Regarding Chlamydia infection during pregnancy, all are true except? (May 1997)

- A. erythromycin can be given if she is allergic to doxycycline
- B. can be treated with doxycycline
- C. treat with erythromycin
- D. sulphonamides should not be given
- E. cefotaxime is usually added to treatment

35. A 30 weeks pregnant woman presents with proteinuria 8g/24 h. Her blood pressure is 180/125 mmHg and she has no oedema.

All of the following are true in her treatment except? (May 1997)

- A. give her betamethasone
- B. caesarian section within 48 hours in all cases
- C. Mg-sulphate IV and other sedative drugs
- D. start Labetolol
- E. continuous CTG cardiotocography

36. A woman who has had a troublesome delivery of a 4kg baby in the past, is now 33 weeks pregnant with breech presentation.

You should do all the following except? (May 1997)

- A. do x-ray for pelvimetry
- B. caesarian section if the baby is more than 4 kg
- C. if the baby is less than 3.8 kg, you can try a normal delivery if it is in frank or complete breech presentation
- D. do ultrasound to measure fetal size and position
- E. do external version

37. A 25 year old married man comes with the complaint of infertility. You advise him to do semen analysis, the result is as follows:

volume: 2 ml, number: 950,000 per ml, abnormal morphology: 86%, motility: 10%. What advice is best appropriate for him? (May 1997)

- A. he has slightly reduced fertility
- B. give him testosterone and review him after 3 months
- C. intracytoplasmic sperm injection will probably result a successful pregnancy
- D. IVF will result in pregnancy in 20%
- E. insemination by transvaginal method

38. All of the following can cause congenital deafness EXCEPT? (May 1997)

- A. rubella infection during second trimester
- B. gentamycin treatment during pregnancy
- C. cytomegalovirus infection during pregnancy
- D. sulphonamides can cause deafness during third trimester
- E. trimethoprim can cause deafness during first trimester

39. A woman in 37th weeks of pregnancy presents with vaginal bleeding. In exam, you notice that she has lost approximately 900 ml

of blood, her blood pressure is 130/80 mmHg, uterus is tender and there is no fetal heart rate. Her haemoglobin is 68. Management

includes all of the following EXCEPT? (May 1997)

- A. ultrasound to see if fetus is alive
- B. anticoagulation profile test
- C. if RH negative, give immunoglobulin to mother
- D. blood transfusion and immediate surgery
- E. start oxytocin transfusion for induction of labour

## OBSTETRICS & GYNAECOLOGY

### 1. CORRECT ANSWER: D

The Bartholin's glands are mucus secreting glands located bilaterally on the labia majora just external to the hymenal ring. The duct can become obstructed and lead to an enlarged Bartholin's cyst. Most of the time it will resolve by itself, but sometimes it may get infected, forming a Bartholin's abscess, which then needs surgical drainage like any other abscess. Adjunct antibiotic therapy is only recommended when the drainage is cultured for Neisseria gonorrhoea, which is in 10% of the time. Abscesses that seem refractory to simple surgical drainage need antibiotics that cover Staphylococcus aureus. (Blueprints in Obs & Gyn, p98)

### 2. CORRECT ANSWER: A

### 3. CORRECT ANSWER: B

It should be noted that about 30-40% of perinatal death occurs in pregnancies which terminate between 20 and 28 weeks, incompetent cervix being a major contributor. Occasionally, the condition results from surgical procedures such as cone biopsy, cervical amputation or Manchester repair. Classically, there is a history of mechanical dilatation of the cervix, followed by one or more spontaneous abortions after the 14th week in which pain has not been a feature. Transvaginal cerclage between the 14th and 20th weeks of gestation is the usual procedure in case of cervical incompetence. If it fails, usually because there is insufficient vaginal cervix for ligation, transabdominal cerclage can be done. After 32 weeks, conservative treatment with bed rest, sedation, mild Trendelenburg position, and perhaps progesterone is usual. Chromosomal abnormalities are the main cause of first trimester abortions. (Beischer Obstetrics, p 187-188)

### 4. CORRECT ANSWER: B

After menopause, a change in the ratio of oestradiol: oestrone occurs, oestrone becoming the dominant circulating oestrogen. Any circulating oestrogen is synthesized in the peripheral fat by aromatization of androstendione, derived mainly from the adrenal glands with some from the ovarian stroma. (Llewellyn-Jones, p 319)

### 5. CORRECT ANSWER: C

Incidence of Down syndrome according to maternal age is 1 in 800 births between 30-34 years old and 1 in 260 births between 35-39. (Beischer Obstetrics, p679)

6.CORRECT ANSWER:C

This lady is in her first stage of labour.In general,a cervical dilatation rate of more than 1 cm/hour will result in spontaneous delivery,less than 0.5 cm/hour usually means Caesarian section unless improved by oxytocin which needs Onstetrition review.Contractions must continues progressively ,any delay or irregularity needs further investigation.(beischer Obstetrics,p395-397)

7.CORRECT ANSWER:D

Danazol, a progestogen derived from testosterone, is effective in treatment of endometriosis and menorrhagia and has been used with considerable success in patients with breast pain and discomfort due to fibrocystic disease .Progesterone is also used in treatment of mastalgia ,but its effectiveness is not confirmed.Bromocriptine has many side effects ,so is used if no other treatment is useful.(Gynaecology illustrated,David McKay,p133)

8.CORRECT ANSWER:D

The benefits of taking combined oral contraceptive pills are: excellent contraception, reduced dysmenorrhoea,reduced iron-deficiency anaemia , reduced menstrual loss , reduced benign breast disease, reduced functional ovarian cysts , reduced ovarian and endometrial cancer , reduced pelvic inflammatory disease

The cervical carcinoma incidence is not decreased .It appears to be slightly increased ,but this is probably due to the increased sexual activity and not to the ingestion of the contraceptive pill.(Annotated MCQ book,p322)

9.CORRECT ANSWER:C

The diagnosis of PMS is made after evaluating the periodicity of the physical and mood symptoms,ascertaining that there is a symptom-free period after menstruation and ensuring that the symptoms can not explained by some other illness.The suspected diagnosis should be confirmed by asking the woman to complete a daily record of symptoms over three menstrual cycles.(Llewellyn-jones ,p229)

10.CORRECT ANSWER:C

Polycystic ovarian syndrome is a functional derangement of the hypothalamo-pituitary ovarian axis associated with anovulation. Clinical features are oligomenorrhoea,hirsutism and obesity.A relatively steady state of gonadotropins and sex steroids exists.LH:FSH ratio increased ,oestradiol levels are similar to those in the early follicular phase.Adrenal glands produce elevated levels of DHAS.(Gynaecology,D. McKay,p94-95)

11.CORRECT ANSWER:A

Diagnosis of polycystic ovary is made on clinical grounds ,following by ultrasound to see multiple ovarian cysts and also measurement of LH:FSH ratio. Laparoscopy and biopsy is not indicated nor diagnostic.Laparoscopy is indicated in infertility investigation looking for patency of fallopian tubes.Also, it can be done in conditions like salpingitis,early tubal pregnancy and investigating vague abdominal pain.Sterilisation,division of adhesions,oophorectomy,ovarian cystectomy, salpingectomy and salpingostomy,laparoscopically assisted vaginal hysterectomy,colposuspension and vaginal vault suspension for vault prolapse.Complications include:perforation of viscus,hemorrhage,rarely infection because of bowel

damage, and post operation pain in shoulder tip because of phrenic nerve irritation. complications are more frequent with operative laparoscopy than with purely diagnostic one. (Gynaecology, D. McKay, p85)

12. CORRECT ANSWER: E

Most common cause of hyperprolactinoma is microadenoma of the pituitary gland, other causes include: hypothyroidism, administration of dopamine depleting agents. The woman with hyperprolactinoma develops oestrogen deficiency, with menstrual disturbances (usually amenorrhoea), dry vagina and often reduction of her libido. If hyperprolactinaemia persists, osteopenia and perhaps osteoporosis will result. In 30% of women inappropriate milk secretion (galactorrhea) occurs. (Llewellyn-Jones, p221-222)

13. CORRECT ANSWER: C

An experienced examiner will recognise an ovarian tumor by finding midline swelling. A fluid thrill may be elicited from an ovarian cyst, and ascites and tumor may coexist, but as a rule the distinction should be easily made. With ascites there is resonant over the top of the swelling and dull over the flanks.

With ovarian cyst percussion note is dull over the top of swelling and resonant in the flanks. (Gynaecology, D. McKay, p 257)

14. CORRECT ANSWER: E

15. CORRECT ANSWER: B

It is necessary to distinguish between stress incontinence and detrusor instability since their treatment is different. In stress incontinence, urine appears just after efforts like coughing, laughing, running. This leakage is attributed to some displacement of bladder neck so that it cannot respond normally to a sudden increase in intraabdominal pressure. The cause is likely to be a pelvic floor weakness as a result of parturition and/or oestrogen deficiency. Urge incontinence is defined as a desire to void urine before the bladder contains 50 ml of urine and that is because of detrusor instability. There is usually history of enuresis in childhood and weak bladder even before pregnancies. In difficult cases, urodynamic assessment must be done to distinguish these two diagnoses. (Gynaecology, D. McKay, p317)

16. CORRECT ANSWER: C

Pregnancy is a predisposing factor for urinary tract infection mainly because of the increased stasis within the urinary tract as a consequence of dilatation of the ureters and the renal pelvis. Significant bacteriuria in pregnancy is important for a number of reasons. Clinical pyelonephritis will develop in one-third of these women, obstetric complications are more common in these groups like spontaneous abortion, hypertension, preeclampsia and perinatal loss. Also established chronic pyelonephritis may happen in these women that needs investigation in puerperium. (Obstetrics, Beischer, p373)

17. CORRECT ANSWER: E

For the woman who is breast feeding, the best way of family planning is low dose progestrone pills (minipill). If she is fully breast feeding, she is unlikely to ovulate because of the inhibition of ovulation by elevated level of prolactin. This is only reliable for about 10-12 weeks, and within first 6 months, there is 5%

chance of ovulation if she menstruate. Since the combined pill reduces both milk output and total energy content it is contraindicated in the lactating women. Bromocriptine is usually prescribed for those who do not want to breast feed, because it inhibits prolactin secretion so may cause ovulation to happen. (Obstetrics, Beischer, p563)

18. CORRECT ANSWER: D

There is no uniform pattern of asthma disease in pregnancy but in general there is a tendency to improve. There is also little evidence of any effect of asthma on pregnancy unless there are prolonged episodes of hypoxia which can contribute to spontaneous abortion, intrauterine growth retardation, premature labour and stillbirth. Management of asthma in pregnancy is similar to the non-pregnant state including oxygen, nebulized beta sympathomimetics, oral and inhalational corticosteroids. (Obstetrics, Beischer, 341)

19. CORRECT ANSWER: D

The benefits of taking oral contraceptive pills are reducing iron deficiency anaemia, decreasing rate of benign breast disease and also ovarian and endometrial cancers, but progesterone increases cholesterol level. (Annotated MCQ)

20. CORRECT ANSWER: E

Among the risk factors for breast cancer are: nulliparous, early menarche, late menopause, first child after age of 34, obesity, previous breast cancer and positive family history. Breast feeding is a protective factor for breast cancer. (blueprints in Obs & Gyn, p239)

21. CORRECT ANSWER: E

This gram positive coccus is present in vagina at some time during pregnancy in approximately 10-25% of women, it often can also be isolated from the rectum in such women. Serotyping suggests a sexual mode of transmission. Premature labour and premature rupture of membranes are common in these women and in the baby there are 2 main syndromes: 1) early onset septicemia and pneumonia, often presenting as an idiopathic respiratory distress in premature babies, and 2) late onset after the first week of life presents with lethargia, anorexia, jaundice and meningitis. If mother is symptomatic, she should be treated antepartum, if not, IV penicillin must be given in labour and the baby should be treated after birth. (Obstetrics, Beischer, p306-307)

22. CORRECT ANSWER:

Neural tube defect occurs in 2-5 pregnancies per 1000. Prenatal screening method is by measuring the alpha-fetoprotein (AFP) level in the blood at the 16th gestational week. If the serum level is more than 2.5 times the median for the week of pregnancy, the test is repeated. If it is raised in the second sample, ultrasound will be done, to rule out multiple pregnancies which is another cause of high AFP. Then amniocentesis is made to measure amniotic AFP. Ultrasound at 11 weeks can also show fetal malformations in most centres.

23. CORRECT ANSWER: D

Incidence of Down syndrome diagnosed by amniocentesis is approximately 1 in 200 at 37 years and 1 in 70 at 40 years. Because of the increase of

incidence with age ,prenatal screening is helpful especially in older age groups.In more than 90% of cases there is trisomy 21 and translocation or mosaicism is found in the remainder.The main element in diagnosis is biochemical screening between 15 and 17 weeks (lowered serum AFP and oestriol,raised HCG'),followed by ultrasound which not only excludes errors in dates ,multiple pregnancies and other anomalies,but also can provide positive clues,like nuchal thickening which is quite specific.Invasive diagnostic tests like amniocentesis or chorionic sampling are not usually undertaken ,because of the risk to the pregnancy.(Beischer,p166-167)

24.CORRECT ANSWER:D

Following hysterectomy for CIN,6-monthly smears should be done for the first year and,thereafter ,every 2 years as abnormal cells may be found in the upper vagina signifying vaginal CIN.There exists data to the effect that up to 20%of women aged 40-45 experience ovarian failure within 3 years of hysterectomy.This can be prevented by hormone replacement therapy.Women who had hysterectomy in the past will benefit from oestrogen patch without need for progestrone.The question of bilateral oophorectomy of normal ovaries at the time of hysterectomy is contentious.It is not usually done in women under age of 45,but some gynaecologists perform it in older women.The reason is that if ovaries are left,1 in 1000 women will develop ovarian carcinoma ,also there is no function for ovaries after menopause. (Llewellyn-jones OBS &GYN ,p233)

25.CORRECT ANSWER:B

Hot flushes may begin in the months before the menopause ,but are worse after it,reaching a peak incidence 1-2 years after the menopause. Approximately,one third of climacteric women experience no or mild symptoms,one-third have moderate symptoms but usually do not seek medical advice and one-third have severe disabling symptoms.The hot flushes may persist for a number of years after the menopause.Hot flush is caused by lack of oestrogen in body.History of deep vein thrombosis or pulmonary thrombo-embolism which occurred during pregnancy or when on the oral contraceptive pills or with anti-thrombin III deficiency,presence of factor V Leiden or other thrombophilia defects,is a contraindication to HRT. A past history of thrombo-embolism without such histories is not a genuine contraindication,but transdermal ,percutaneous or implants are preferred , to minimise oestrogen exposure to the liver.(Llewellyn-jones,p319-320,McKay GYN,p417)

26.CORRECT ANSWER:B

Fibroid is the gynaecological term for a leiomyoma of the uterus.It develops in the myometrium and is not capsulated .It is the commonest tumor found in women especially after 35 years of age.Most women,describe a history of increasing menstrual bleeding and there are some complications like torsion of its pedicle,cystic degeneration ,irregular bleeding and dysmenorrhoea and rarely sarcomatous change.Small asymptomatic fibroids need not be treated.Hysterectomy is the treatment of choice in older women who are symptomatic,but in those who wish to be pregnant,myomectomy can be done,which is through the uterine wall.Medical treatment with GnRH may give reduction in size in 6 months,but rapid return to normal size follows cessation of this expensive therapy.There is little place to use GnRH in those who need

myomectomy.(McKay,GYN,p215-217)

27.CORRECT ANSWER:E

Laparoscopy is used for investigation of infertility,to look for tube patency.It is not a diagnostic tool for polycystic ovary disease,which is usually diagnosed clinically.There is increased risk of internal organ damageLaparoscopy does not decrease risk of organ damage.

28.CORRECT ANSWER:D

The differential diagnosis of postmenopausal bleeding includes:atrophic vaginitis(60-80%),exogenous oestrogen/HRT(15-25%),endometrial carcinoma(10%),uterine and cervical polyps(2-12%),endometrial hyperplasia(5-10%).The older the patient,the more likely to have endometrial carcinoma.(blueprint of OBS& GYN,p216)

29.CORRECT ANSWER:C

This technique is used for treatment of menorrhagia .By ablating the basal layer of endometrium ,the endometrial regeneration is prevented and menorrhagia is cured.Before the procedure,the cavity of the uterus is inspected with a hysteroscope.Many gynaecologists prescribe Danazol or GnRH analogue before the operation to reduce endometrial thickness.So the smaller the uterus ,the better the outcome.Roller ball is used commonly in most places,but laser or loop resection can be used,as well.Copmlications include,perforation of uterus(1%) ,fluid overload due to absorption of sodium and glycin and amenorrhea in 35-60% of women.The benefits of endometrial ablation are that it is less invasive and painfull than hysterectomy ,the woman is in hospital for 1-2 days rather than 7-10 days and it is less expensive.Oestrogen is never used to treat menorrhagia.(Llewellyn-jones OBS& GYN ,p226)

30.CORRECT ANSWER:C

Most cervical infections occur in sexually active women,and usually follow a sexually transmitted organism aquired from asymptomatic male partner.It is currently thought that chlamydial infection causes 50-65%,gonorrhea 15-30% and in the remainder the cause is unclear,usually multibacterial.Laboratory tests should be made,urethral and cervical swabs for gonorrhea and chlamydia (vaginal swab is not accurate) . Partners must be treated as well.Cervical smear (pap smear) should be done in any sexually active woman and should be repeated every 2 years,if the result is normal.(Llewellyn-jones, p 288)

31.CORRECT ANSWER:C

Preeclampsia is an indication for induction of labour,but it should be noted that there are contraindications when there is evidence of cephalo-pelvic disproportion,abnormal,eg breech presentation,unstable lie,fetal distress,placenta previa or vasa previa,as there is risk of cord prolapse. Oxytocin should be stopped when there is fetal bradycardia.Prolapse of the umbilical cord occurs with a frequency of approximately 0.1-1 % its occurrence increased when there is a poorly fitting part or no engagement at the time of induction.So the first step in this woman is to do vaginal exam to look for cord prolapse as a cause of fetal distress.(OBS,Beischer,p458)

32. CORRECT ANSWER: E

Like any other operation, caesarian section has some complications including infection (abdominal wall, uterus, urinary tract, chest), thromboembolism, ileus, haemorrhage and wound dehiscence. Breast engorgement commonly occurs on the third or fourth day. Hormonal activity causes an increase in blood flow to the breasts and a sudden increase in milk production. Tension in the breasts increase, with resulting obstruction to the venous and lymphatic vessels and interference with the flow of milk along the ducts. It can also occur at any time during lactation. Pyrexia may signify infection, possibly mastitis. (OBS, Beischer, p492, 618)

33. CORRECT ANSWER: A

34. CORRECT ANSWER: B

In some centres, up to 20% of women have cervical and/or urethral chlamydial infection. It is 10-15 times more common than gonococcus. The obstetrical significance of this infection is unclear, but a relationship to premature labour and premature rupture of membranes is probable. 30-40% of the babies of women with chlamydial infection will become infected. The infection responds to tetracycline, doxycycline or erythromycin, however during pregnancy doxycycline is contraindicated. Usually treatment with penicillin or ceftriaxone or cefotaxime to cover gonococcal infection is advised. (Beischer OBS, p 306)

35. CORRECT ANSWER: B

This woman has severe pregnancy induced hypertension or pre-eclampsia, that is blood pressure higher than 170/110 mmHg or presence of marked proteinuria. It affects about 1% of primigravida. Treatment is, admit her to hospital, measure blood pressure every 4 hours. Do urine protein test twice daily. She needs to be treated with IV antihypertensives, like hydralazine and MG sulphate to prevent seizure. Caesarian section can be done if fetus is in distress, which is controlled by cardiotocography and ultrasound. Before the 32nd week of pregnancy the objective is to keep the fetus in utero until the 35th week if it is possible. (OBS and GYN, Llewellyn-Jones, p126-127)

36. CORRECT ANSWER: E

The frequency of breech presentation falls as pregnancy advances. At the 30th week of pregnancy 15% of the fetuses are breech, by 35th week the proportion falls to 6% and by term to 3%. If the fetus is found to be breech, external cephalic version can be done only after 35-37 weeks. The main morbidities with breech presentation are: intracranial haemorrhage, asphyxia, and fracture of the humerus, femur or clavicle. Because of the risks mentioned, many of the breech presentations are delivered by elective caesarian section. The success of vaginal delivery of breech depends on the size of baby and maternal pelvis, which can be assessed by pelvimetry and ultrasound. If the fetus is less than 3800 g and has extended legs with flexed head, vaginal delivery can be tried. (OBS & GYN Llewellyn-Jones, p 164, 170)

37. CORRECT ANSWER: C

Male infertility is the cause of infertility in couples in 30-40 % of cases. Standards for a normal seminal specimen have been developed by the WHO. 3 samples should be examined before a prognosis is made. In a normal analysis, there is >2 ml semen, and more than 2 million sperms per ml, with >50% motility and >30% normal morphology. Oligospermia is when sperm count is less than 20 million per ml, severe oligospermia defined as less than 5 million sperm per ml, and azoospermia is when there is very little abnormal sperm. If azoospermia or severe oligospermia is diagnosed, blood level of FSH should be checked. A raised level (3 times the normal upper limit) indicates testicular failure. If FSH level is normal, testicular biopsy is sometimes made. Absolute infertility is diagnosed if azoospermia and high FSH level are found. Severe infertility is diagnosed if severe oligospermia is found. Relative infertility is diagnosed if the sperm count is between 5 and 20 million per ml. Treatment with testosterone or clomiphene is used in nonsevere oligospermia. Sometimes IVF is another alternative. In severe oligospermia, the rate of pregnancy in couple is very very low, intra cytoplasmic sperm injection is a method of treatment if spermatozoa can be recovered. So, in this man with severe oligospermia, the best method is intracytoplasmic sperm injection.  
(OBS & GYN, Llewellyn-jones, p251-254)

38. CORRECT ANSWER: E

Since the advent of mass immunization against rubella, this has become uncommon cause of congenital infection. Fetal infection is uncommon when maternal infection is after 20th week of gestation. Presentation in newborn include growth retardation, cataract, congenital heart disease, deafness and bone lesions. Cytomegalovirus is the commonest congenital infection 1%, but usually asymptomatic. With severe involvement, the common features are microcephalus, intracranial calcification, hepatosplenomegaly, and jaundice. The mortality rate is 20-30%, with the majority of survivors having mental retardation, cerebral palsy, deafness and visual impairment. About 10% of asymptomatic affected newborns become deaf later in life. Some drugs are teratogenic, if they used during pregnancy. Aminoglycosides can cause deafness, and their usage is forbidden during pregnancy. Sulphanomides can cause kernicterus in baby if they used in third trimester that high bilirubin level can cause deafness in newborn. Trimethoprim is a relative safe antibiotic during pregnancy.  
(OBS, Biescher, p662, 105-110)

39. CORRECT ANSWER:

In which of the following condition, both the spouses should give consent?  
a) surgical procedure for sterility (in each of them)

- b. for an elective surgical procedure on their child
- c. in aborting their baby

2. A pt comes to ur office and tells u his intentions to kill his wife and her lover. What do u do?

- a. keep confidentiality and don't tell anyone about his decision
- b. tell the patient that u ought to inform his wife
- c. contact ur own lawyer to announce to his wife and her lover
- d. tell the legal council to inform his wife and lover

3. Entering a lab, u saw a dead body fallen with some petechiae and lacerations around his mouth. what do u do?

- a. immediately take some samples for future investigations.
- b. inform the coroner immediately
- c. begin to do some procedures on other employees
- d. move the dead body to a safer place to avoid others contact with it

4. You should inform the authorities about which of the following?

- a. if ur colleague is in sexual relationship with one of her patients
- b. if she hears voices in the absence of any auditory stimulus
- c. if she drinks alcohol heavily

5. which is not an indication for bariatric surgery?

- a. an obese pt without satisfactory response to dieting
- b. an obese with high level of cholesterol
- c. an obese whose arthritis hasn't responded to other treatments
- d. an obese with HTN

6. A pt with cough and asterexis. most probable cause?

- a. hepatic encephalopathy
- b. CCF
- c. uremia

7. Immediate change due to elimination of measles:

- a. decrease in money expenditure for admitting patient with sequelae of measles.
- b. no further need to vaccinate against measles
- c. decreases surveillance.

8. which is useful in the study of morbidity?

- a. case control
- b. cohort
- c. cross sectional

A 52 yr old obese, male with a BMI of 31, complains of a nocturnal cough. It's a dry cough, worse after eating. Also has a H/O URTI. The most likely possibility..

- a. Postnasal drip
- b. Chronic bronchitis
- c. Asthma
- d. GORD

3. A 25 yr old construction worker suffers from an L5-L4 disc prolapse after lifting a heavy object at work. The best investigation

- a. CT

- b. Myelogram
- c. MRI
- d. Ultrasound

4. ECG. The diagnosis

- a. COPD
- b. cardiomyopathy
- c. RBBB

5. Which of the following is an indication for thrombolysis.

- a. RBB
- b. LBB

6. A man develops bilateral, small muscle wasting of the hands with loss of pain but no loss of touch. (dissociated sensory loss). WOF could be the cause?

- a. syringomyelia
- b. MND

2. A pt comes to ur office and tells u his intentions to kill his wife and her lover. What do u do?

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A man 56 yrs old, had a swollen knee. The aspiration shows cloudy fluid, neutrophils and no bacteria on microscopy and culture. What is the most likely diagnosis?

- a- Septic arthritis
- b- Reiter's
- c- Gout
- d- Rheumatoid arthritis
- e- Osteoarthritis

Osteoarthritis is:

- a- ESR is increased or decreased
- b- Night stiffness
- c- Calcium pyrophosphate crystals are found in synovial fluid
- d- Sodium aurothiomalate can be used in treatment
- e- Serum calcium is increased

Brain stem aneurysm:

- a- Papilloedema

Which of following would least likely be associated with primary hypothyroidism?

- a- 72 yrs old woman with a large multinodular goitre
- b- 9 yrs old boy, short and retarded
- c- 28 yrs old woman with 3 yrs of menorrhagia
- d- 16 yrs old girl anovulatory cycles
- e- 2 yrs old boy with jaundice and constipation

Photo of penis (held with no gloves!). Little round lesions for six weeks itching. What is the diagnosis?

- a- Fleas
- b- Scabies
- c- Mosquito bites
- d- Syphilis
- e- Lympho Granuloma venereum

(J Type)

With regards to colorectal carcinoma which is correct?

- a- Over 50% of cancers detected with screening are Dukes A
- b- Flexible sigmoidoscopy picks up more than 40%
- c- Faecal occult blood testing is good screening for the population
- d- 20% will be missed by faecal occult blood because the cancer is not bleeding at the time
- e- Most of the cancers do not arise from villous adenomata

A patient with years of being unwell presents with a creatinine of 1.2mmol/l and high urea. He is vomiting and is anaemic. All the following are true, except:

- a- Minimal change glomerulonephritis
- b- Membranous glomerulonephritis
- c- Diffuse proliferative glomerulonephritis
- d- Focal glomerulonephritis
- e- Hypertensive nephropathy

Cerebral infarction:

- a- Homeis syndrome with increased sweating

- b- Papilloedema with optic neuritis
- c- Pain and sensation loss on the same side of the body
- d- Quadriplegia with anterior or middle cerebral artery infarct
- e- Unilateral blindness with anterior circulation

A 52 yrs old male patient has ischaemic type chest pain for three hours and has a normal ECG:

- a- If the ECG is normal, he does not have a cardiac problem
- b- He should have an exercise stress test immediately
- c- Thrombolytics are usually not indicated
- d- Heparin and IV nitrates are indicated
- e- Wait for any treatment until cardiac enzymes are back

(J Type)

Regarding a serum lipid profile and diet, what is true?

- a- Red wine improves LDL/HDL ratio
- b- Olive oil will increase the LDL/HDL ratio
- c- Positive energy balances increase LDL
- d- 100-300g of fish per week will have no effect on plasma or membranes
- e- An increase in dietary saturated fatty acids will increase VLDL

(J Type)

Regarding the treatment of pager's disease, the following is/are true:

- a- Patient should be given calcitonin
- b- Diphosphonates are indicated
- c- Cortisol
- d- May need chemotherapy
- e- 1000mg calcium everyday

Treatment of chronic renal failure:

- a- Antacid syrups can help
- b- Oral phosphate binding agents halt progress of bone disease
- c- All patients will have symptomatic bone disease
- d- Uraemic patients need to be dialysed
- e- Hyperkalaemia can only be treated with dialysis

In regards to polycythemia rubra Vera which is correct:

- a- Can be caused by obstructive sleep apnoea
- b- Erythropoietin levels are high
- c- Iron deficiency is common, so iron supplement should be given
- d- ESR is increased
- e- Clinical cyanosis may be difficult to detect

(J Type)

In a patient with known aortic stenosis good left ventricular function and clinical presentation with CCF. Which of the following drugs are contraindicated?

- a- Quinidine
- b- Verapamil
- c- Beta blocker
- d- Diuretics
- e- Digoxin

(J Type)

In which of the following conditions you be likely to see cannon a-waves?

- a- Atrial fibrillation
- b- Ventricular extra-systoles
- c- Complete heart block
- d- Incupid incompetence
- e- Aortic stenosis

(J Type)

A patient with mitral stenosis due to rheumatic fever is congestive cardiac failure; the following is/are true:

- a- Surgical mitral valve plasty might improve the situation
- b- ACE inhibitors may be indicated
- c- Right heart failure is rare
- d- Angiography should be done before operation
- e- Ejection fraction 30. Patient needs treatment

Pulmonary hypertension and cor-pulmonate are frequency secondary to:

- a- Emphysema
- b- Bronchiectasis
- c- Pneumothorax
- d- Cadiomyopathy
- e- Sarciodosis

A 60 years old woman with long history of smoking presented with dyspnoea. On examination there were basal crepitations. FEVI and FVC were both severely reduced but the ratio (not given but calculated) was 80%. Fibro sing alveolitis

- b- Interstitial lung disease
- c- Bronchogenic carcinoma
- d- Decreased lung compliance
- e- Asthma

A 30 years old man with visual disturbance can hear properly but has diplopia when looking down out and laterally

- a- Carotid artery aneurysm
- b- Cerebelo pontive angle tumor
- c- Acoustic neuroma
- d- Horner's syndrome

How do you differentiate between obstructive and restrictive lung disease?

- a- Prolonged expiratory flow rate
- b- Use of intercostals muscles
- c- Movement of the upper part of the thorax
- d- Inspiratory crepitations
- e- Increased residual volume

Ptosis may be found in each of the following conditions except:

- a- Cluster headache (Horton's syndrome)
- b- Following cervical sympathectomy
- c- Posterior artery communication aneurysm
- d- Myasthenia gravis

e- Bell's (facial nerve) palsy

The defect in visual fields most commonly associated with a pituitary tumour is:

- a- Crossed homonymous hemianopia
- b- Central scotoma
- c- Bitemporal hemianopia
- d- Total blindness in one field
- e- Peripheral concentric constriction and enlargement of the blind spot

Cardiac diseases known to be associated with sudden death include all of the following except:

- a- Coronary artery disease
- b- Prolonged QT syndrome
- c- Hypertrophic obstructive cardiomyopathy
- d- Mitral stenosis
- e- Aortic stenosis

The commonest arrhythmia associated with thyrotoxicosis is:

- a- Sinus tachycardia
- b- Atrial Fibrillation
- c- Atrial flutter
- d- Atrial ectopics
- e- Ventricular ectopics

A 35 years old housewife presents with headache, extreme muscular weakness, polyuria and polydypsia and two episodes of carpopedal spasm. On examination she has a blood pressure of 190/115mmHg and proteinuria. Initial screening blood tests show random glucose 7.2mmol/L, sodium 158mmol/L, potassium 30.mmol/L. The most likely diagnosis is:

- a- Pancreatic insufficiency
- b- Diabetes insipidus
- c- Adrenocortical adenoma
- d- Renal failure
- e- Hypoparathyroidism

The diagnosis for the patient in Question 40 is likely to be confirmed by measuring:

- a- Dexamethasone suppression test
- b- Urinary vanillyl mandic acid
- c- Plasma renin
- d- Plasma cortisol
- e- Glucose tolerance

The most common cause of secondary hypertension is:

- a- Drugs
- b- Coarctation of the aorta
- c- Primary aldosteronism
- d- Renal abnormalities
- e- Elevated catecholamines

The most common cause of normocytic anemia is:

- a- acute hemorrhage
- b- Chronic inflammation
- c- Malignancy
- d- Hemolysis
- e- Liver disease

The most cause of chronic bacterial orchitis is:

- a- Tuberculosis
- b- Syphilis
- c- Leptospirosis
- d- Staphylococcus aureus
- e- Pseudomonas sp

A 35 years old woman whose pre-pregnancy body mass index was 35.0 kg/m<sup>2</sup>, is found to have glucosuria (3+) and a random capillary blood glucose level of 12.0mmol/L in the second trimester of her pregnancy. An oral glucose tolerance test confirms diabetes mellitus. Her first pregnancy results in intra-uterine fetal death at 37 weeks gestation. The most likely treatment will be:

- a- A diet in which total energy intake is restricted severely
- b- Insulin
- c- No long term follow up, since the risk of non insulin dependent diabetes is negligible
- d- Appetite suppressants
- e- Oral hypoglycemic agents

A 46 years old woman with a body mass index of 38 presents with a 2 weeks history of severe headache, blurring of vision and nausea which followed a course of tetracyclines for a lower respiratory infection. The significant abnormality on examinations is papilledema. The probability diagnosis is:

- a- Cerebral glioma
- b- Temporal arteritis
- c- Gravitational headache
- d- Benign intracranial hypertension
- e- Cerebral abscess

Diverticular disease of the colon is:

- a- Associated with hypertrophy of circular smooth muscle
- b- Most prominent in the right half of colon
- c- Often complicated by carcinoma
- d- Usually congenital in origin
- e- Not associated with any of the above

In a cerebrovascular accident, hemorrhage and thrombosis may be clearly distinguished on which of the following points?

- a- Sequence of the clinical features
- b- Degree of loss of consciousness
- c- Description of onset
- d- Presence of headache
- e- None of the above

In which of the following is ascites usually present on clinical examination?

- a- Left ventricular failure
- b- Cirrhosis of the liver
- c- Intra-abdominal Hodgkin's disease
- d- Nephrotic syndrome
- e- Carcinoma of the uterus

The 'opening snap' of mitral stenosis:

- a- Denotes valve mobility
- b- Disappears if atrial fibrillation occurs
- c- Is usually best heard at the apex?

- d- Replaces the third heart sound
- e- Is really a closing snap?

The notifiable communicable disease that is most commonly reported in Australia is:

- a- Hepatitis A
- b- Salmonella infections
- c- Gonorrhoeae
- d- Rubella
- e- Syphilis

Which of the following organisms is highly resistant to amoxicillin?

- a- Haemophilus influenzae
- b- Streptococcus pyogenes
- c- Escherichia coli
- d- Klebsiella
- e- Staphylococcus aureus

Which commonly arises in a solar keratoses?

- a- Malignant melanoma
- b- Squamous carcinoma
- c- Basal cell carcinoma
- d- Kerato-acanthoma
- e- Sarcoma

A 30 years old woman has a history of one week of sweats and fevers. Yesterday she had right sided pleuritic chest pain. Questioning reveals a long history of recurrent mouth ulcers episodic joint pains in the hands, photosensitive skin eruptions on the face and Raynaud's phenomenon.

A most likely diagnosis:

- a- Systemic Lupus Erythematosus (SLE)
- b- Atypical pneumonia
- c- Dermatomyositis
- d- Hepatitis C
- e- Rheumatoid arthritis

Where there is immunodeficiency, bacterial infections characteristically involve of the following except?

- a- Skin
- b- Respiratory system
- c- Sinuses
- d- Joints
- e- Gastrointestinal system

A 65 yrs old woman presents with recent onset of severe right sided headaches associated with soreness of the scalp. Three days prior to admission she developed blurring of vision in the right eye. On examination she has a visual acuity of less than 6/60 in the right eye and early swelling of the right optic disk. Which of the following is the most appropriate next step?

- a- Bed rest and analgesics
- b- Pilocarpine 2% eyes drops hourly
- c- Prednisolone 60mg daily
- d- Cerebral CT scan
- e- Urgent craniotomy

All but one of the following are recognised features of hypertrophic obstructive cardiomyopathy. The exception is:

- a- Sudden death
- b- A large pressure gradient between sub aortic and lower ventricular chambers in ventricular systole
- c- Sometimes autosomal dominant inheritance
- d- Q waves in anterior ECG leads
- e- Eosinophilia

A patient presents with worsening early morning headache and early papilloedema and is considered to have raised intracranial pressure. Which

Of the listed features, if presents, would also be characteristic of this diagnosis?

- a- Nuchal rigidity
- b- Tachycardia
- c- Marked loss of visual acuity
- d- Third cranial nerve palsy
- e- Herniation of the cerebellar tonsils through the tentorium cerebelli

Lower than normal renin levels may occur in association with:

- a- Addison's disease
- b- Pregnancy
- c- Beta block ace
- d- Diuretic therapy
- e- Malignant hypertension

A 55 yrs old housewife complains of persistent widespread pains in the bones getting worse over the course of 6 months. The differential diagnosis includes all except one of the following. The one exception is:

- a- Osteomalacia
- b- Multiple myeloma
- c- Osteoporosis
- d- Hyperparathyroidism
- e- Paget's disease

A moderately obese man, aged 65 years, presents with a history of pain and mild swelling of the left knee for the past four months. The only relevant past history is of transient cerebral ischemic attacks being managed by aspirin, 300mg daily. Full blood count and renal function are normal but the serum urate is 0.51mmol/L. He suffered from a single episode of podagra four years previously. Which of the following statements is correct?

- a- The current attacks of arthritis is probably osteoarthritis
- b- His 24 hour urinary uric excretion is probably elevated
- c- Allupurinol should be used to reduce his serum uric acid level to normal
- d- A reduction of aspirin dosage to 100mg daily will lead to a fall in the serum urate level
- e- If uric acid reduction were required, it would be better to prescribe sulphinpyrazone than allupurinol to a patient already receiving aspirin

Characteristically, type A viral hepatitis:

- a- Is a DNA virus infection often associated with seafood poisoning
- b- Has an incubation period of three months
- c- Carries a greater risk of fulminant hepatic failure in young compared with old patients

- d- Often presents with headache plus right hypochondrial pain and tenderness
- e- Can progress to chronic active hepatitis if cholestasis is prolonged

Which of the listed drugs has the potential to induce life threatening cardiac arrhythmias when taken in overdose?

- a- thioricazine
- b- Haloperidol
- c- Lithium
- d- Fluphenazine
- e- Levodopa

Which of the following adverse effects is best associated with use of flucloxacillin?

- a- Phototoxicity
- b- Interstitial nephritis
- c- Cholestatic hepatitis
- d- Agranulocytosis
- e- Acute hemolytic anemia

Hirsutism is recognized side-effect of treatment with all excepts one of the following agents. Which is the exception?

- a- Progestogens
- b- Psoralens
- c- Minoxidil
- d- Trimethoprim
- e- Diazoxide

During the first 4 hours after an overdose of paracetamol, a patient will develop:

- a- Hypoglycemia
- b- Hyperventilation
- c- Increased serum ALT and AST
- d- Pin-point pupils
- e- None of the above

The ECG changes in left ventricular hypertrophy typically include all of the following but one. The exception is:

- a- ST elevation in lead
- b- Tall R waves in leads V5 and V6
- c- Deep S waves in leads V1 and V2
- d- Left axis deviation
- e- T waves inversion in lead a VL

A 55 years old man with a 30 pack/year smoking history presents with a history of angina of effort. With respect to potential drug therapy, which one of the following statements is covered?

- a- verapamil and nifedipine would each reduce myocardial rate and contractility
- b- Glyceryl trinitrate transdermal patches should be worn for 24 hours and then replaced
- c- The predominant mechanism of action of glyceryl trinitrate is peripheral arterial vasodilatation and a reduction in cardiac after-load
- d- Beta blockers are indicated as prophylactic therapy for exercise induced but not vasospastic angina
- e- Beta blockers and calcium channel blockers could each precipitate asthma

Which of the listed anti arrhythmic drugs is the drug of choice in most cases of Supraventricular tachycardia (including nodal tachycardia)?

- a- Digoxin
- b- Quinidine
- c- Flecainide
- d- Verapamil
- e- Propranolol

In a patient with severe asthma, which of the features listed would be the most ominous?

- a- Arterial PO<sub>2</sub> 50mmHg
- b- Arterial PCO<sub>2</sub> 50mmHg
- c- FEV<sub>1</sub> 0.8 litres
- d- Very loud wheezes
- e- Respiratory rate of 20 per minutes

An elderly man has been hospitalized for one week because of severe and worsening Parkinson's disease. He is found in bed tachypnoeic, tachycardic and responsive only to painful stimuli. Pulmonary examination reveals diffuse wheezes and crackles in the right lung field posteriorly and absent breath sounds in the left lung field. Which of the following conditions is most likely to be responsible for this patient's deterioration?

- a- Massive pulmonary embolism
- b- Pulmonary oedema after acute myocardial infarction
- c- Aspiration pneumonia with unilateral bronchial obstruction
- d- Spontaneous pneumothorax
- e- Tracheoesophageal fistula

All except one of the following statements are characteristic of ventricular septal defect of the heart. The exception is:

- a- It produces a left to RIGHT SHUNT
- b- It can be diagnosed by cardiac ultrasound
- c- It is associated with a continuous murmur throughout systole and diastole
- d- It is one of commonest congenital heart lesions
- e- It is associated with a step up in oxygen saturation in the right ventricle

All of the following except one typically produce keratin scales.

The one exception is:

- a- Squamous cell carcinoma
- b- Solar keratoses
- c- Psoriasis
- d- Pityriasis versicolor
- e- Basal cell carcinoma

A 75 yrs old woman, previously in good health, presents with a history of painless jaundice of 2 weeks duration. There is a distended gall bladder revealed by ultrasound examination. What is the most likely cause?

- a- Chronic Pancreatitis
- b- Alcoholic cirrhosis
- c- Gall stones
- d- Carcinoma of the pancreas
- e- Acute Cholecystitis

In diabetic neuropathy you can find each of the following except:

- a- Bradycardia
- b- Urine retention
- c- Impotence
- d- Diarrhoea at night
- e- Foot ulcer

In suspected acute MI what is the criteria for thrombolytic therapy?

- a- T inversion
- b- ST depression/elevation???
- c- New LBBB
- d- New RBBB
- e- Q waves

A 55 yrs old woman was found unconscious in her house. She has a dilated pupil. What is the cause?

- a- overdose
- b- Brain infarct
- c- Subdural hematoma
- d- Subarachnoid hemorrhage
- e- Coma

Antidote for heparin is:

- a- Protamine sulphate
- b- Vitamin K
- c- Fresh frozen plasma

In heparin induced thrombocytopenia which of the following is typically seen?

- a- Petechial purpura on the skin
- b- Thrombosis
- c- Joint bleeding
- d- Hematuria
- e- Ecchymosis

All of the following can cause renal papillary necrosis except:

- a- Liver disease
- b- Medullary sponge disease
- c- Sickle cell disease
- d- Diabetes mellitus
- e- Analgesic nephropathy

Opening snap indicates:

- a- Mitral Valve mobility
- b- Atrial fibrillation cause disappearance of the opening snap
- c- Replaces S3
- d- Best heard at 2nd right intercostals space
- e- Remains unaltered despite progression of disease

In a man from overseas, his chest x-ray reveals silent tuberculosis. PPD skin test is 10 in. treatment of choice is:

- a- Sputum culture
- b- Observation
- c- Triple therapy
- d- Isoniazid

e- Isoniazide and ethambutal

In infectious mononucleosis:

- a- Incubation period is 4-5 days
- b- Is seen more in patients with AIDS
- c- Incubation period is 14-21 days

In asthma, which is the most important factor in diagnosing its severity?

- a- Decreased PEY
- b- Increased diurnal variability
- c- Decreased diurnal variability

A man returning from an overseas trip has Diarrhoea and vomiting for 2 weeks, salmonella was isolated. What is the next step in management?

- a- Ampicillin
- b- Repeat stool culture
- c- Trimethoprim-sulphamethoxazole
- d- Only observation
- e- Metronidazole

All of the following are side effects of Prednisolone except:

- a- Hirsutism
- b- Lymphopenia
- c- Leucocytosis
- d- Osteoporosis
- e- Weight gain

Polycythemia rubra vera:

- a- Contraction of plasma
- b- Expansion of plasma volume

Which of the following is correct regarding the overdose of TCA?

- a- In a mixed overdose with TCA's and benzodiazepines flumazenil is contraindicated

All of the following are features of Parkinson's disease except:

- a- Postural reflexes lost
- b- Can begin unilaterally
- c- Tremor gets worse during sleep
- d- Cogwheel rigidity
- e- Able to stop while walking

A patient presents with impaired sensation on the medial aspect of the hand, 4th and 5th fingers of the hand are flexed. Where is the lesion?

- a- Ulnar nerve at the elbow
- b- Ulnar nerve at the wrist
- c- Radial nerve damage at the wrist
- d- Medial nerve damage at the wrist
- e- Radial nerve damage at the elbow

A patient presents with moderate hemiparesis of legs and arms, no dysphasia, face appears normal. Where is the lesion most likely to be?

- a- Cerebral cortex

b- Internal capsule

All of the following are features of thyrotoxicosis except:

- a- Wasting of small muscles of the hand
- b- Fine tremor of hands
- c- Irritability
- d- Weight loss
- e- Wide pulse pressure

Which of the following is the most common cause of ketoacidosis?

- a- Cessation of insulin in IDDM
- b- Undiagnosed IDDM
- c- Undiagnosed NIDDM
- d- Adrenal failure
- e- Infection

In paracetamol poisoning the involvement of which organ is most important?

- a- Renal injury
- b- Hepatic injury
- c- Brain injury
- d- Stomach injury

A 70 yrs old woman complains of fatigue Blood picture:

- a- Autoimmune haemolytic anemia
- b- Pernicious anemia
- c- Anemia of chronic disease
- d- Anemia due to silent gastrointestinal bleeding
- e- Leukaemia (CML)

A patient has massive ascitis and in the fluid malignant cells are found. Which of the following is a possible finding?

- a- Splenomegaly
- b- Hepatomegaly
- c- Supraclavicular
- d- On digital rectal examination, nodules can be palpated

In bronchial asthma, which is the best indicator of good treatment?

- a- FEVI
- b- ABG
- c- Decreased RV
- d- PEFV

Which category of woman will benefit the most from a mammography?

- a- Age 35-50 years
- b- Age 50-65 years
- c- Age >65 years
- d- Woman with first degree relative with breast cancer
- e- Woman with breast cancer

Regarding unilateral undescended testis, which of the following is most commonly associated?

- a- Malignancy
- b- Varicocele
- c- Inguinal hernia
- d- Hydrocele
- e- Torsion of the testis

All of the following would be expected after splenectomy for spherocytosis, except?

- a- Transient Leucocytosis
- b- Persistence of anemia
- c- Same osmotic fragility
- d- Persistence of spherocytosis
- e- Normal life span of the erythrocytes

A 50yrs old man came to the emergency room, presenting with 3 days vomiting followed by periumbilical pain. On examination, his abdomen is distended and bowel sounds are absent. Abdominal x-ray shows multiple air-fluid levels. Hb 180 g/L, Which of the following is the best fluid management for this man?

- a- 2000 ml of 4% dextrose in 0.5% NaCl preoperatively
- b- 2000 ml of 4% dextrose in 4.5% NaCl during the operation
- c- 2000 ml of Hartmann's solution preoperatively
- d- 2000 ml of Hartmann's solution during the operation
- e- 2000 ml of 5% dextrose

All of the following are risk factors for breast cancer, except:

- a- Early artificial menopause
- b- First pregnancy after 35 yrs of age
- c- Early menarche
- d- No breast feeding
- e- Cancer of the other breast

A diabetic patient with an ulcer at the head of the 2nd metatarsal on the sole of the foot. Which of the following would be the most likely cause?

- a- Microvascular
- b- Diabetic neuropathy
- c- Infection
- d- Varicose veins
- e- Hyperglycaemia

Hutchinson's melanotic freckle. Which of the following is not correct? (Scorbutic ketatosis)

- a- Mostly occurs in the elderly
- b- Mainly occurs in covered parts of the body
- c- Malignant
- d- Irregular
- e- Irregular colour (from black to brown)

A female had mastalgia for the last 1 year. Conservative treatment has not worked. How would you manage this patient?

- a- Bromocriptine
- b- Danazole

- c- Clomiphene
- d- OCP
- e- NSAID's

A middle aged female complains of morning Diarrhoea and cramps. On examination there are no remarkable findings. The most likely diagnosis:

- a- Irritable bowel disease
- b- Ca colon
- c- Crohn's disease
- d- Ulcerative colitis

A diabetic person presents with a red & swollen leg, from the ankle to the knee. What is most likely responsible for this?

- a- Clostridium welchii
- b- Group A streptococcus
- c- Group B streptococcus
- d- Staphylococcus
- e- Thrombophlebitis

All are true about gallstones, excepts:

- a- Usually asymptomatic
- b- Stone in the bile duct presents with clinical sepsis
- c- Usually radiolucent

A 35 yrs old woman having severe sudden abdominal pain throughout the night wakes up and passes dark urine in the bathroom. She immediately goes to see the doctor. Investigation shows:

- Bilirubin – 5 times normal
- Alkaline phosphates – 3 times normal
- AST & ALT – 4 times normal
- S. amylase – 2 times normal

What is the most likely diagnosis?

- a- Acute cholelithiasis
- b- Acute Cholecystitis
- c- Ca gallbladder
- d- Acute choledocholithiasis

All are true in regards to scaphoid fracture, except?

- a- There is pain/tenderness in the anatomical snuff box
- b- Necrosis of the distal fragment can occur
- c- Treat even if initial x-ray are normal
- d- X-ray changes may be seen after 2 weeks

Photography 5: X-ray showing colleens fracture. An elderly person sustained a fall on an outstretched hand. What is true?

- a- Median nerve function should be assessed
- b- The plaster cast is not suitable to correct the fracture in the elderly
- c- Immediate internal fixation
- d- Plaster case from below elbow to MCP joint, for at least 10 weeks

The most appropriate OCP for a 24 yrs old woman taking phenytoin is:

- a- Microgynon 30
- b- Microgynon 50
- c- Clomiphene

d- Oestrogen 85 micrograms

Depo provera can cause all the following, except:

- a- Mild hypertension
- b- Amenorrhoea after the 3rd injection
- c- Fertility problems for 6-12 months after stopping the treatment
- d- Menstrual irregularities
- e- Weight gain

All of the following are true about neural tube defect, except:

- a- Decrease the alpha fetoprotein
- b- Polyhydramnios
- c- Folic acid prophylaxis can decrease the risk of neural tube defects
- d- There is a 4% chance of neural tube defect in the 2nd pregnancy

D % C is indicating in which of the following?

- a- Postmenopausal bleeding

A 9 day old baby with projectile vomiting and dehydration with k 7.1, Na 125, Cl 80, & HCO<sub>3</sub> 20. What is your diagnosis?

- a- Pyloric stenosis
- b- Galactosemia
- c- Sepsis
- d- Hypoglycaemia
- e- Congenital adrenal hypertrophy

An 8 week old baby presents with unilateral sticky eye. Similar episode before, was treated with antibiotics for 3 days and resolved. What is the most likely diagnosis?

- a- Gonococcal conjunctivitis
- b- Allergic conjunctivitis
- c- Inadequate antibiotic treatment
- d- Decrease IgA A in the tears
- e- Blocked tear duct

An 8 year old boy presents with photophobia, irritability & stiffness. Lumbar puncture findings show 50 neutrophils, 100 lymphocytes, proteins normal, and glucose normal. Which is the most likely diagnosis?

- a- Tuberculosis meningitis
- b- H. Influenza
- c- Echo virus
- d- E. coli
- e- HSV encephalitis

A 4 year old child presents with sudden onset of cough, unilateral wheeze and decreased respiratory movement on one side. There is no family history of atopy. What is the most appropriate management?

- a- Chest x-ray
- b- Full blood examination
- c- CT of chest
- d- Ultrasound
- e- Inspiratory & expiratory chest x- ray

A 5 months old baby unwell for a week is noticed by his parents to have episodes of leaning forward and shaking his arms. His parents are concerned, because he is not responding as he used

to. What is the likely cause?

- a- Infantile spasm
- b- Febrile seizures
- c- Breath holding spells
- d- Infantile myoclonic seizures
- e- Petit mal epilepsy

A 2 years old child presents with cough for 2 months. On examination you find clubbing, wheezing and crackles. What is your management?

- a- Prescribe antibiotics
- b- Perform a chloride sweat test
- c- Prescribe oral corticosteroids

A mother notices a lump in the right groin of her 2 years old son, which disappeared after a few hours. Despite a thorough examination you are unable to discover anything. The most appropriate management would be?

- a- Reassurance & send home
- b- Admission into hospital for surgery
- c- Request the mother to bring the child to you immediately when the lump reappears again
- d- Review after 1 week

A full term infant girl is transferred to the postnatal ward when aged 1 hour. On arrival she is noticed to have cyanosed hand & feet. On examination you find the responsive and cries lustily on handling. The respiratory rate is 40/min and the lungs & heart are clinically normal. Which of the following is correct?

- a- The infant has probably had a convulsion
- b- The infant's rectal temperature should be checked
- c- The infant has early signs of respiratory distress
- d- Oxygen should be given
- e- An immediate chest x-ray should be arranged

An 8 years old boy was stung by a bee. He had difficulty breathing and facial oedema. What is the best treatment?

- a- Adrenaline 1:1000IM
- b- Adrenaline S.C.
- c- Antihistamine iv
- d- Hydrocortisone
- e- Intravenous fluids

All of the following can cause short stature, except:

- a- Psychosocial deprivation
- b- Obesity
- c- Congenital adrenal hyperplasia
- d- Hypothyroidism
- e- Turner syndrome

A 2 week old baby gained 200 grams/week since birth. The mother complains that the child vomits mild soon after feeding, otherwise okay. What will you do?

- a- Reduce the time between feeds
- b- Shorten the duration of feedings
- c- Give Water before feeding with milk
- d- Endoscopy
- e- Urine microscopy

A 10 year old child, 139 cm tall, is brought to the doctor by his parents. His parents are concerned

and say, "He had been a fatso forever". What could be associated with this?

- a- Height for age is always more
- b- Elevated TSH
- c- Insulin resistance

70 yrs old man, smoking 90-pack/year now with sign of respiratory alkalosis. PH=7.38 (N 7.35-7.45) PO<sub>2</sub>=48, PCO<sub>2</sub> 68. What will confirm that he has compensatory respiratory alkalosis?

- a- Low PO<sub>2</sub>
- b-
- c- Low Po<sub>2</sub>, high PCO<sub>2</sub> and normal PH
- d- High CO<sub>2</sub>
- e- Heavy smoker

What is immature defence mechanism?

- a- Suppression mature
- b- Denial neurotic
- c- Intro-fecion
- d- Projection
- e- Sublimation

Woman pregnant, with oedema of the ankle and the hand, hypertension, ascites, baby born with jaundice and bilateral cataract. Previous baby has similar condition:

- a- ABO- incompatibility
- b- Acute glomerulonephritis
- c- Rubella embryopathy
- d- Galactosemia
- e- Retrolental fibroplasia

Regarding mammography what is most correct:

- a- Has higher detection rate of breast lump than self-examination
- b- Can differentiate between cyst and solid mass USG
- c- Has more benefit in pre-menopausal than post-menopausal woman

Which of the following drugs is least likely teratogenic?

- a- Phenytoin
- b- Danazol
- c- Stilloestrobeol
- d-
- e- Corticosteroids

What will least likely produce intrauterine deafness?

- a- Phenytoin
- b- Birth weight less than 1500gms
- c- Kernicterus
- d- Microcephaly

X-ray wrist with Cole's fracture. What is correct treatment?

- a- Immobilisation for 10 weeks

- b- Reductio and immobilisation is correct treatment
- c- Check medianus
- d- Internal fixation

Regarding cluster headache all of the following is correct except:

- a- Every day and/or day and night same time
- b- More in man than woman
- c- Pain
- d- Awake patient 4 – 6 hrs after sleep
- e- Vomiting

Woman 35 yrs old has sharp jaw pain, loss of sensation in trigeminal area:

- a- Trigeminal neuralgia
- b- Multiple sclerosis

Regarding Seminoma what is correct:

- a- Occurs in childhood, locally metastasis, radiosensitive
- b- Occurs in childhood, distant metastasis, radiosensitive
- c- Occurs in young male, locally metastasis, and radioresistant
- d- Occurs in young male, distant metastasis, radiosensitive
- e- Occurs in old man, distant metastasis, radioresistant

A baby with a 4 months history of unilateral discharge, few polymorphonuclear cells.....

- a- Gonococcal infection
- b- Chlamydia infection
- c- Blocked tear duct
- d- Antibiotics prescribed for short period

All of the following is true in pulmonary embolism except:

- a- Increased second heart sound
- b- Syncope
- c- Dyspnea
- d- Pleural rub
- e- Bronchial breath sound

Man has polyuria. What is most common finding in diabetes mellitus?

- a- Weight loss regardless of increased appetite
- b- Dysuria
- c-
- d-
- e- Sugar craving

70 yrs old lady, on Digoxin 0.25, Hydrochlorothiazide. She fell dizzy, now presents with arrhythmia 220/min pulse 110/min? K 3.1, urea ^ (high).....

- a-
- b- Continue Digoxin + hydrochlorothiazide and add Furosemide
- c- Stop Digoxin
- d- Stop Digoxin + KCI
- e- Do Cardioversion

9 yrs old girl, occasionally headache. Vomiting before breakfast. Child is otherwise well:

- a- Migraine
- b- Hydrocephalus
- c- Medulloblastoma

Implantation of fertilized egg will most likely occur at:

- a- 8 days
- b- 5 days
- c- 10 days
- d- 20 days
- e- 5 weeks

Patient with ileocolostomy, what is lost in highest concentration before and after operation?

- a- Bicarbonate
- b- Calcium
- c- Kalium
- d- Sodium
- e- Potassium

3 and ½ years old boy came on teacher and parent request. Teacher complained that child is aggressive toward other kinds in childcare, poorly concentrate: parents said that they could not cope with child. When child is left alone in your room he is quietly playing with toys, without any above-mentioned problem.

What is most likely?

- a- Attention Deficit Disorder
- b- Opponent defiance
- c- Poor parenting
- d- Normal variant

9 yrs old girl truanting from the school, playing arcade games. When interviewed she is tearful, and she has insomnia.....

- a- Anorexia nervosa
- b- Attention deficit disorder
- c- Anxiety separation disorder
- d- Conduct disorder

Mother of 15 year old girl phoned you to discuss her daughter behaviour. She refuses to eat meal with a family, exercise more than before, refuse to take Benzodiazepines prescribed by her GP.

What will be your advice?

- a- Tell her that girl has anorexia nervosa and needs hospitalization
- b- Familiar meeting as part of initial assessment
- c- She has exercised dependency, which has excellent prognosis

Man with Supraventricular tachycardia. Ventricular beat? Atrial beat?

- a- Verapamil
- b-
- c- Cardioversion

What is best day-to-day estimation of Digoxin therapy?

- a- Apex beat
- b- Radial pulse

Polycythemia rubra Vera. All of there following is true except:

- a- Elevated erythropoietin

- b- Sleep apnoea can cause it
- c- Plasma contracted
- d- Clinically hard to recognise

Estimation of suicidal attempt:

- a-
- b- Privacy Act forbid giving information to family members regarding suicide
- c- Removing fire arms from house doesn't mean much because of inevitability.....

30 yrs old woman with 3 yrs old child, regular cycles she can't be pregnant although coitus usually in the middle of the cycle. Most likely cause is:

- a- Hyperprolactinemia
- b- Inefficient luteal phase
- c- Tube disruption – PID
- d- Seminal vesicle anomalies

Woman with C I N 3

- a- Cervical biopsy preceded by colposcopy

Photo. Picture of small ulcer surrounding by black deposit patient had colostomy:

- a- Squamocellular carcinoma
- b- Metastatic deposit
- c- Pyoderma gangrenosum
- d- Diathermic burn

Malignant cells in gross ascites. What is least likely to find?

- a- Palpable left supraclavicular node
- b- Palpable liver
- c- Palpable spleen
- d- Perirectal lymph node

Diabetic woman, on therapy with ACE, asking you for advice regarding her possible pregnancy:

- a- Stop ACE change for Aldomet
- b- Continue ACE

Child, 4 yrs old, only breast feed, most likely cause of anemia is:

- a- Iron deficiency anemia

Pancreatitis can be caused by all of the following except:

- a- Mumps
- b- Smoking
- c- Alcohol
- d- Islet cell tumour
- e- Gall stone

What matching pair is correct?

- a- Anticardiolipin antibodies – intrauterine growth retardation

- b- Lupus anticoagulant – pulmonary embolism thrombosis
- c- Anti Ro antibody – heart block
- d- Platelet count <100.000 – foetal intracerebral Haemorrhage

Newborn, cyanotic, cyanosis completely disappeared after giving him 100% O2.

- a- Lung disease
- b- Methemoglobinemia
- c- Tetralogy Fallot

70 yrs old woman losing weight, pain in hands. She has hypercalcemia in blood. Most important to distinguish between malignancy or hyperparathyroidism is:

- a- Elevated serum Ca
- b- Elevated alkaline phosphates
- c- Elevated hyper parathyroid hormone

Man with acute respiratory distress involved in car accident, trachea shifted to the right no breathing on the left:

- a- Pneumothorax
- b- Haemato pneumothorax
- c- Tension pneumothorax
- d- Flail chest

Man involved in car accident subcutaneous emphysema on the neck

- a- Rupture of diaphragm
- b- Rupture of trachea

Newborn, couple hours after delivery, resp. distress. ? Abdomen empty, no breathing on the left

- a- Left pneumothorax
- b- Diaphragmal hernia

Man had craniotomy. Lab:.....Urine osmolarity 805

- a- Water intoxication
- b- S I A D S- may be
- c- Diabetes insipidus

Old man with a recurrent hemoptysis and cough.....

- a- Recurrent pulmonary emboli
- b- Chronic bronchitis
- c- Teleangiectasis
- d- Bronchiactasis /TB /pneumonia / Neoplasm

Sucking pneumothorax, what is management?

- a- Tight air dressing

Man three attack of gout in left knee. Now present with a pain and swollen right knee, what is Rx?

- a- Indomethacin in the first 24 hours
- b- Allopurinol in the first 24 hours
- c- Hydrocortisone 100mg in the knee
- d- Colchicine in the first 24 hours

What will decrease uptake to iodine on scintigraphy?

- a- Hashimoto's thyroiditis
- b- Subacute thyroiditis

Small boy 2yrs, with wheezing, cough, symptoms started after his older brother birthday party:

- a- Spiral CT of thorax
- b- Indirect laryngoscopy
- c- Bronchoscopy + direct laryngoscopy

Woman normal pregnancy, normal delivery, stillborn baby. The most likely explanation is:

- a- Unexplained intra-uterine hypoxia
- b- Cord accident during delivery

Old lady sudden sharp abdominal pain with abdominal distension, long history of constipation, no stool or flatus passed today:

- a- Superior mesenteric embolus
- b- Sigmoid carcinoma
- c- Diverticulosis

Prodromal symptom of SCH:

- a- Ideas of reference
- b- Dysfunctional parenting
- c- Unemployment

Diabetic woman depressed. What will be most ominous sign in prognosis?

- a- Alcohol abuse
- b- Decreased level of HbA1c

A man with a long standing rheumatic arthritis, Hb reduced MCV – normal ferritin increased 3x.....

....

- a- Anemia of chronic disease
- b- Iron deficiency anemia

Woman second pregnancy, first child has spina bifida, and she wants advice regarding her next pregnancy. All of the following is true except:

- a- Preconceptual intake of folate and thiamine will not increase risk
- b- Amniocentesis at 11 weeks
- c- Ultrasound at 11 weeks to check Nuchal thickness

Young couple, advice regarding sterility. Your advice them IVF all of the following except:

- a- Regular anovulatory cycles
- b-  $< 1.000.000$  spermatozoid in ejaculate in 6 times

Young girl monospot test +-ve, clinical picture of infectious mononucleosis. What is your next step?

- a-
- b- Antibiotics
- c- Paracetamol and bed rest

Mother HBsAg +-ve, newborn, what is correct Rx?

- a- Normal immunoglobulin
- b- Hepatitis B immunoglobulin + hepatitis B vaccine

50yrs old woman with enlarged spleen, moderate generalized lymphadenopathy. Most likely is:

- a- Chronic lymph. Leukaemia
- b- Hodgkin disease

Best method to visualize biliary tract is:

- a- Ultrasound
- b- E R C P
- c- X-ray

What is not feature of subdural haematoma?

- a- Bradycardia
- b- Hypotension
- c- Lucid intervals

Characteristic of genitor-urethral tract in pregnancy is:

- a- Dilatation of ureter
- b- Dilatation of ureter and calyces due to progesterone
- c- Reduced incidence of infection

Regarding post operative management of pain:

- a- Pethidine is better than morphine
- b- Older people require lower dose because they are more sensitive
- c- Pethidine should not be repeated more than every 4 hours
- d- Pethidine is given by calculating mg/kg of body weight
- e- Pethidine has longer duration than morphine

Woman had baby with neural tube defect/spina bifida. She wants advice regarding her next pregnancy. All is correct except:

- a-
- b- Preconceptual intake of thiamine is important in prevention of NTD/SB
- c- She will have low amniotic alpha – fetoprotein
- d- Environmental and social factors are important

Patient with Helicobacter pylorus infection. He had 1 week treatment. What is simple test to check eradication?

- a- Complement test
- b- Serologic test
- c- Urea breath test
- d- Endoscopy
- e- Histological test

Patient with Wernicke's encephalopathy. What is appropriate Rx?

- a- 50 ml 50% dextrose
- b- Immediate glucagon injection
- c- Immediate glucose injection
- d- Thiamine injection followed by glucose infusion

Erythema nodosum is associated with all of the following except:

- a- Rheumatic fever
- b- Tuberculosis
- c- B-haemolytic streptococcus infection
- d- Streptococcus viridans infection
- e- Rheumatic arthritis

Amyloidosis can occur in all of the following except:

- a- Chronic active hepatitis
- b- Leprosy
- c- Multiple myeloma
- d- Tuberculosis
- e- Renal failure

Short stature in adulthood is associated with all of the following except:

- a- Congenital adrenal hyperplasia
- b- Turner's syndrome
- c- Premature puberty
- d- Obesity
- e- Psycho-social deprivation

Uncomplicated haemorrhoids are associated with all of the following except:

- a- Discharge with mucus
- b- Blood
- c- Pain
- d- Protruding lump (bulging mass)
- e- Pruritus ani

Young woman primigravida, 17 weeks pregnant, lower & sharp abdominal pain. Could be all of the following except?

- a- Red degeneration of fibroid
- b- Ectopic pregnancy
- c- Ruptured ovarian cyst
- d- Acute appendicitis

Man was exposed to bank robbery 3 weeks ago.....

- a- Denial
- b- Insight and hallucination
- c- Self- defence
- d- Irritability, outburst of anger

The risk of colonic cancer will be highly increased with:

- a- Diverticulosis
- b- Crohn's disease
- c- Post irradiation colitis
- d- Familial Melanosis coli
- e- Ulcerative colitis

70 yrs old man present with fatigue. On psychical exam, slight pallor.

Blood: Hb 96, MCV 118, WBC decreased, Platelet low

Peripheral blood picture show few hyper-segmented polymorphonuclear cells.

- a- Autoimmune haemolytic anemia

- b- Pernicious anemia
- c- Anemia of chronic disease
- d- Fe deficiency anemia

Regarding Rosacea what is correct:

- a- Acneiform pustules
- b- Topical corticosteroids will help
- c- Diet has role in aetiology
- d- Rhinophyma is not associated with the disease
- e- Sunlight exposure helps in the treatment

Woman are scheduled for laparoscopy. She is concerned about that so you should tell her all of the following except:

- a- It is life threaten particularly if vena cava is damaged although risk is very small – may be
- b- Small amount of CO<sub>2</sub> will be residual after procedure so she can experience abdominal tenderness and shoulder tip pain
- c- Although it is not standard procedure polycystic ovarium sy, can be easily diagnosed by laparoscopy
- d- Rupture of intestine
- e-

I thing B, because first part of statement is true, small amount of CO<sub>2</sub> will be residual in abd. After laparoscopy but second part: abd. tenderness and shoulder tip charac, of ruptured ectopic pregnancy

Regarding oral contraception all of the following is true except:

- a- Reduced incidence of Fe anemia
- b- Decreased triglycerides
- c- Reduced pelvic inflammatory disease
- d- Incidence of endometrial carcinoma

A man had injury sharp pain and knee effusion playing soccer a month ago. He pause for month and start to play again. Now presented with pain in the knee that is often locked, give away and he can't extend his leg:

- a- Displaced fracture of Patel
- b- Rupture of anterior cruciate ligament
- c- Rupture of medical collateral ligament
- d- Medial meniscus

Woman on hormone replacement therapy have hot flushes, headache, she can't sleep. She has been now prescribed Progesterone for the first 12 days (or 15) of each month. All her symptoms will improve except:

- a- Hot flushes
- b- Dry vagina
- c- Sleep
- d- Increased incidence of endometrial carcinoma
- e- Osteoporosis

All of the following are features of pulmonary embolism except:

- a- Pleuritic rub
- b- Dyspnoea
- c- Bronchial breathing

Patient punctured his finger in first digital crease level. Patient has on passive stretching:

- a- Midpalmar abscess
- b- Tendosynovitis

Patient from car accident came in ER. he has been treated for his injuries but soon later, he start bleeding from multiple puncture siestas a part of investigation for his bleeding, you will do all of the following except:

- a- Platelet count
- b- Fibrinogen
- c- Platelet aggregate study
- d- Prothrombin time and A P T T?
- e- Degradation fibrin

Which of the following statements is/are true concerning metastatic cancer in the liver?

- a- Squamous cell cancer in the head and neck region commonly metastatic to liver
- b- In Australia gastrointestinal cancer more commonly metastatic to liver than does any other malignancy.
- c- Once metastatic disease has been diagnosed in the liver the condition cannot be cured by surgical operation.
- d- Average life-expectancy for a patient with diagnosed metastases in the liver without treatment is in the order of 2-3 years.
- e- Carcinoma embryonic antigen titre is a useful diagnostic test for all metastatic liver cancer.

Indicators of a poor prognosis in acute pancreatitis include -

- a- Marked initial elevation of serum amylase
- b- Arterial pO less than 60 mmHg
- c- Serum calcium concentration less than 1.8 mmol/L
- d- Haematocrit increase greater than 10%
- e- Urea greater than 10mmol/L

Pancreatic cancer is associated with a poor prognosis because -

- a- It is a rapidly growing tumour
- b- It has usually spread beyond the pancreas at the time of presentation.
- c- It seldom arises before the age of 70 years
- d- It is associated with anorexia and weight loss tendering the patient unfit for surgery
- e- the presence of jaundice indicates that the cancer is incurable

Of the following malignant tumours indicate which two are most likely to respond favourably to treatment with chemotherapeutic agents.

- a- Squamous carcinoma of lung
- b- Chondrosarcoma
- c- Wilm's tumour
- d- Teratoma of testis
- e- Glioblastoma

Which of the following statements is/are correct about cancer?

- a- The most common site for gastric cancer is the fundus of the stomach.
- b- Previous hepatitis B infection is recognised as a predisposing factor Hepatoma.
- c- Cancer of the bile duct is most common in Southeast Asia.

- d- There is a causal relationship between Diverticular disease and colon cancer.
- e- Pipe smoking is a risk factor in cancer of the floor of the mouth.

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Sympathectomy may be expected to improve-

- a- Intermittent claudication
- b- Rest pain
- c- Ischemic ulceration
- d- Varicose ulceration
- e- Deep vein thrombosis

A 72 years old non-diabetic man presents with a three year history of intermittent claudication and a four week history of severe rest pain in his left lung. On examination there are no pulses below the common femoral pulse, the big toe demonstrates superficial ulceration and gangrene. He should -

- a- Have an angiogram to assess suitability for bypass grafting
- b- Have an amputation to the toe with primary wound closure
- c- Have an amputation of the toe with secondary wound closure
- d- Have a lumbar sympathectomy
- e- Be placed on bed rest and given beta blockers

Which of the following is/are true of varicose veins?

- a- They are usually related to saphenofemoral incompetence
- b- They can often be effectively treated by Sclerotherapy
- c- The long saphenous vein should always be stripped
- d- There is often an inherited predisposition
- e- They often commence during pregnancy

Which of the following is/are correct for peripheral vascular disease?

- a- Patients with claudication usually progress to threatened limb
- b- An absent dorsalis pedis pulse is invariably indicative of vascular disease
- c- An upper abdominal bruits is usually associated with renal artery stenosis
- d- 50% or more of patients presenting with lower limb claudication have ischemic heart disease
- e- Is more common in patients with analgesic nephropathy

Raynaud's disease is a condition in which -

- a- Small arterioles go into spasm when exposed to cold conditions
- b- Capillaries tend to dilate in the extremities
- c- Young women are affected more commonly
- d- Fingers are affected more commonly than toes
- e- Sympathectomy may be expected to give permanent relief

Typical features of a large arterio-venous fistula are -

- a- Decreased pulse pressure
- b- Bradycardia
- c- Dilated local veins
- d- A bruit over the fistula
- e- Left ventricular hypertrophy

A 50 years old male smoker presents with a history of right calf claudication at 100 meters. He has a good right femora pulse but no pulses distally. Which of following would you advice as initial management?

- a- Stop smoking
- b- Regular walking
- c- Check fasting glucose and lipids

- d- Femoro-popliteal bypass
- e- Laser angioplasty

Which of the following blood tests is/are indicators of nutritional status?

- a- Albumin
- b- Transferrin
- c- Retinol binding globulin
- d- C-reactive protein
- e- Pre-albumin

Which of the following is/are true of total parenteral nutrition?

- a- It is best delivered via a jugular vein catheter
- b- It requires phosphate replacement to avoid hypophosphataemia
- c- It is superior to enteral feeding, even if the gastrointestinal tract is available
- d- May cause hyperglycaemia
- e- Requires biochemical monitoring

Which of the following is/are true of enteral feeding?

- a- can be delivered via a Percutaneous gastrostomy tube
- b- Can cause aspiration pneumonia
- c- May cause osmotic diarrhoea
- d- Is cost-effective nutritional support
- e- Should never be used post-operatively

<http://www.aippg.net/forum/posting.php?mode=reply&t=69347>

A 25 year old male is delivered to the A & E department by ambulance after a high speed motor vehicle accident in which he has sustained blunt trauma to the head, face and chest. He is unconscious and cyanosed with pulse 120 and BP 90 systolic gurgling sounds accompany his shallow, laboured and rapid respiratory efforts. There is much blood around the nose and mouth. Which of the following do you require first to initial resuscitation?

- a- Intercostal tube, underwater seal drainage apparatus, minor surgical instrument pack
- b- Large calibre intravenous cannulae, IV fluid administration set and colloid solution
- c- Oropharyngeal airway, light, suction, oxygen mask
- d- Tracheostomy tube, suction, minor surgical instruments pack
- e- Endotracheal tube, laryngoscope, suction, ventilator

Which of the following are the common modes of presentation of blunt abdominal trauma?

- a- A shocked patient with involuntary guarding on abdominal examination
- b- The patient presents with hypovolaemic shock and no source of blood loss can be found in the chest, the extremities or the soft tissue of the trunk.
- c- The patient has a rising blood and a falling pulse rate, and signs of altered consciousness.
- d- The patient has board-like rigidity of the abdomen from the time of the accident and a chest x-ray taken in the upright posture shows free gas under the diaphragm.
- e- A shocked patient has fractures of the lower ribs

A 30 year old man arrives at hospital 40 minutes after being involved in a motor vehicle accident. He has already received 1000 mls of plasma substitute during transport. He is unconscious and responds only to pain. There are no focal neurological signs. There is stridor, intercostal retraction and no evidence of pneumothorax pulse rate is 140/min. blood pressure is 70 mmHg. Systolic and the abdomen is rapidly distending. There is a right femoral shaft fracture and there is ischaemia of the lower right leg. Before proceeding to operating theatre for laparotomy. This patient needs -

- a- CT scan
- b- Peritoneal lavage
- c- Rapid transfusion

- d- Adequate airway
- e- Right femoral angiography

A young man presents after a motor vehicle accident with clinical evidence of head injury, unconsciousness, tension pneumothorax, hypotension and expanding abdomen, select the three highest priorities from the following options -

- a- Blood volume replacement
- b- CT scan of the head
- c- Chest x-ray
- d- Application of MAST suit
- e- Decompression of pneumothorax

<http://www.aippg.net/forum/posting.php?mode=reply&t=69347>

After total thyroidectomy -

- a- Bilateral vocal cord paralysis is common
- b- Acute haemorrhage in the neck wound is life-threatening because of resulting hypovolaemia
- c- Transient hypocalcaemia may occur
- d- Tracheostomy is often required because of tracheomalacia
- e- Long-term maintenance thyroxine therapy should begin six months after operation

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Ulcerative colitis e-recurrent episodes of attack jaundice e- high alkaline phosphates- What is your diagnosis?

- a- Cholelithiasis
- b- Sclerosing cholangitis
- c- Primary biliary cirrhosis

Snake bite no bleeding -

- a- Close observation for 24 hours
- b- Hospitalization and antivenom
- c- Tourniquet apply
- d- Cut & free bleeding from puncture site

Rest pain Awake from sleep sweet 377 -

- a- Ischaemic pain
- b- Claudication distance (for muscle pain)

Sudden severe backache pain -

- a- Leaking aneurysm

40 yrs old two days severe pain in his scrotum -

- a- Acute Epididymitis
- b- Torsion
- c- Tumour
- d- Hydrocele

A young adolescent present with sudden severe pain -

- a- Needs surgery

Most appropriate for shape size & function of the urinary system -

- a- Ultrasound
- b- IVU
- c- Renal scan

After pelvic injury blood in the urethral ureatus -

- a- Urethro-graphy

Pneumathorax-

- a- Inter costal tube
- b- Intubation
- c- 20 cc bore needle drainage

AMC MCQ- October 2003

Gold Coast

Pictures:

1. Thyroid scan. Cold lesion. Which symptoms would you expect?

- A. Symptoms of thyrotoxicosis
- B. Single lump on the neck
- C. Myxedema

2. CT scan of the head. Old man was brought to the ED by daughter. She told that his speech became slurry and uncomprehensive recently.

- A. Cerebral tumour
- B. Cerebral haemorrhage
- C.

3. X-ray of the wrist. Scaphoid bone fracture.

- A. Plaster immobilisation including a thumb and a wrist
- B. Plaster immobilisation including a thumb, a wrist and elbow
- C. It will result in avascular necrosis of distal pole
- D. Internal fixation is best treatment because of malunion
- E. Crepe bandage from elbow to the wrist

4. Abdominal X-ray.

- A. Early small bowel obstruction
- B. Late small bowel obstruction
- C. Early large bowel obstruction
- D. Late large bowel obstruction

5. ECG. An old lady complains of palpitations. BP=90/70. 150 pulse rate and Atrial flutter?

- A. Verapamil
- B. Lignocaine
- C.
- D. Amiodarone

6. ECG. 38 year-old male complains of sever central chest pain.

- A. Acute inferior MI
- B. Left ventricular ischemia

Questions:

1. Pemphigus vulgaris. What is correct?

- A. Can not be in oral cavity
- B. Associated with malignancy
- C. Bullars on the nuckles
- D. Intra-dermal lesion

2. Which of the following is a mature defense mechanism

- A. Humour
- B. Pseudo-altruism
- C. Irritability and aggressiveness
- D. Projection

3. Which one of the following is not associated with scaling

- A. Solar keratosis
- B. Discoid eczema
- C. Squamous cell carcinoma
- D. Basal cell carcinoma
- E. Pityriasis versicolor

4. In which of the following conditions topical steroids are not useful

- A. SLE
- B. Atopic dermatitis
- C. Psoriasis
- D. Perioral dermatitis

5. Eczema in infant. What is true?

- A. Mostly presented as a nappy rash
- B. Ig E are not detected

6. Hepatitis C is common, except

- A. South-East Asian origin
- B. Homosexuals
- C. Renal dialysis

7. In epidemiological studies related to schizophrenia (SCH), the point-prevalence means:

- A. Current cases of SCH in a certain population group
- B. Previous cases of SCH in a certain population group

8. Use of ACE inhibitors, except

- A. Acute MI
- B. One of the first choices in the treatment of essential hypertension
- C. Hypertension in DM
- D. Aortic stenosis
- E. Cardiac failure

9. Mycoplasma pneumonia

- A. Caused by mycoplasma p... (not pneumonea)
- B. Often associated with headache and tonsillitis
- C. Usually diagnosed by culture

10. Infective endocarditis, what is correct

- A. Commonly caused by Staph aureus
- B. Can be diagnosed without murmurs
- C. Enterococcus is a cause for IV drug users
- D. Atrial endocardium is mostly affected

11. What is initial cardiac changes in the first hours of the newborn, except

- A. Closure of the venous arteriosus
- B. Increase right ventricular presurre
- C. Closure of the ductus arteriosus
- D. Increased pulmonary pressure from right ventricular pressure

Normally, functional closure of the ductus arteriosus occurs by about 15 hours of life in healthy

infants born at term. This occurs by abrupt contraction of the muscular wall of the ductus arteriosus, which is associated with increases in the partial pressure of oxygen (PO<sub>2</sub>) coincident with the first breath.

At birth, placental blood flow ceases and lung respiration begins. The sudden drop in right atrial pressure pushes the septum primum against the septum secundum, closing the foramen ovale. The ductus arteriosus begins to close almost immediately, and may be kept open by the administration of prostaglandins

A. Circulatory Adjustments at birth:

Increasing uptake of oxygen by lungs (first and subsequent breaths) induces a vasoconstriction of ductus venosus and ductus arteriosus

Aeration of the lungs at birth is associated with

1. a dramatic fall in pulmonary vascular resistance due to lung expansion.
2. a marked increase in pulmonary blood flow (thus raising the left atrial pressure above that of IVC)
3. a progressive thinning of the walls of the pulmonary arteries (due to stretching as lungs increase in size with first few breaths)

The first breath: ... the pulmonary alveoli open up:

... pressure in the pulmonary tissues decreases

... Blood from the right heart rushes to fill the alveolar capillaries

... Pressure in the right side of the heart decreases

... Pressure in the left side of the heart increases as more blood is returned from the well-vascularized pulmonary tissue via the pulmonary veins to the left atrium

12. Carcinoma of the nasopharynx:

- A. Locally destructive lesion
- B. Presence of EBV antibodies
- C. Not sensitive to radiotherapy
- D. Response well to chemotherapy
- E. Related mostly to lymphoma

13. 6 year-old boy with progressive flaccid paralysis and a history of immunisation according to his age. What is correct?

- A. Post vaccination poliomyelitis
- B. Peripheral myopathy

Acute flaccid paralysis is the term used in public health programs to identify suspected patients with paralytic disease consistent with acute poliomyelitis. It is characterized by rapid onset of weakness of limbs, often with weakness of respiratory muscles and difficulty in swallowing, progressing to maximum severity within 1- 10 days. In some developing countries the incidence of acute flaccid paralysis remains high despite decrease in the proportion of virologically confirmed poliomyelitis(2). Paralytic disease due to enteroviruses other than poliovirus occurs sporadically and is usually less severe than poliomyelitis. Most cases are due to enterovirus 70 to 71(3) or to coxsackie virus A7. Gullian-Barre syndrome is also associated with entero-virus infections. Polio like illness has been observed in some young adult cases of acute hemorrhagic conjunctivitis caused by enterovirus 70, during epidemics. Mumps virus may occasionally be associated with transverse myelitis and Gullian-Barre syndrome and present with acute flaccid paralysis. In certain

circumstances oral polio-vaccine (OPV) can cause acute flaccid paralysis. The risk of developing polio-myelitis after OPV is estimated at 1 case per 2.5 million doses administered.

14. 38 year-old men, dressed colourfully came to the store and behave oddly. He was taken to the police station, he was singing, I love you...

- A. SCH
- B. Mania
- C. Schizoid personality disorder

Schizoid personality disorder (SPD) is a personality disorder characterized by a lack of interest in social relationships, a tendency towards a solitary lifestyle, secretiveness, and emotional coldness.[1] SPD is reasonably rare compared with other personality disorders. Its prevalence is estimated at less than 1% of the general population

15. Student girl has just failed examination. She noticed that she feels weird, down, can not concentrate. Thought disorder was not recognised during testing.

- A. SCH
- B. Bipolar disorder, type 2
- C. Antisocial personality disorder

16. Montoux test is positive in all of the following, except?

- A. Millitary Tb
- B. Active tuberculosis
- C. Completed antiTB therapy
- D. Healed TB

17. Newly delivered mother was tested with positive HBsAg, your next step in management

- A. Give to the newborn Vaccination and Immunoglobulins
- B. Only immunoglobulins
- C. Only vaccination
- D. Reassure the mother

18. Regarding Mullerian Agenesis, which is not true?

- A. It is an X-link recessive condition
- B. Normal breast development
- C. Normal pubic hair development
- D. Under developed ovaries
- E. IVF procedure might be successful with surgery

19. Case of 12 months boy with a history of breast feeding . Just started solid food. What is haematological findings

- A. Hypochromic microcytic anaemia
- B. Hypochromic normocytic anaemia
- C. Macrocytic anaemia

20. 150 cm lady 38 weeks, cervix is fully effaced, open 4cm, station 0. Your management

- A. CS
- B. Trial labour
- C. US

21. Subclavian steal syndrome. What is correct?

- A. Proximal Subclavian artery obstruction
- B. Distal Subclavian artery obstruction
- C. Vertebral Art. Obstruction

Subclavian steal phenomenon (SSP) refers to subclavian artery steno-occlusive disease proximal to the origin of the vertebral artery and is associated with flow reversal in the vertebral artery.

22. 5 days after appendectomy, patient complains of t=38, mucoid diarrhea

- A. Pelvic abscess
- B. Bowel obstruction

23. Suicidal patient. All of the following questions have to be asked, except:

- A. Ask about financial status
- B. Ask to contact his GP
- C. Ask about history of SCH
- D. Ask about previous suicidal attempts

24. HIV patient came to your practice and told you that he wants to die. Your response

- A. Ask more questions about the content of his statement
- B. Discuss the value of life
- C. Discuss euthanasia

25. 72 year old lady had an operation because of colon cancer. After 1 week she complains of dysuria, pneumouria. What is a diagnosis:

- A. Colovesicular fistular
- B. UTI
- C. Crohns disease

26. All of the following symptoms of the Wernicer encephalopathy, except:

- A. Ataxia
- B. Nystagmus
- C. Tongue Fasciculations

- D. Ophthalmoplegia
- E. Lack of consciousness

27. A bisexual man with urethritis, mouth ulcers, arthralgia, large crusty plaque on the palm and sole. What's your diagnosis?

- A. Reiter's disease
- B. Behcet's disease
- C. AIDS
- D. Rheumatoid arthritis
- E. Ankylosing spondylitis

The symptoms of Behçet's disease are believed to be caused by an over-active immune system which, without any apparent infections, produces recurrent outbreaks of inflammation in small blood vessels. Common symptoms include mouth ulcers, sore genitals and eye inflammation, and arthritis in older patients, mostly painful but not life-threatening conditions

Symptoms of reiters disease generally appear within 1-3 weeks but can range from 4-35 days from the onset of the inciting episode of the disease.

The classical presentation is that the first symptom experienced is a urinary symptom such as burning pain on urination (dysuria) or an increased need to urinate (polyuria or frequency). Other urogenital problems may arise such as prostatitis in men, and cervicitis, salpingitis and/or vulvovaginitis in women.

Diagnosis revealed that the rash on the bottom of this individual's feet, known as keratoderma blennorrhagica, was due to Reiter's syndrome'-CDC/ Dr. M. F. Rein.

The arthritis that follows usually affects the large joints such as the knees causing pain and swelling with relative sparing of small joints such as the wrist and hand.

Eye involvement occurs in about 50% of men with urogenital reactive arthritis and about 75% of men with enteric reactive arthritis. Conjunctivitis and uveitis can cause redness of the eyes, eye pain and irritation, and blurred vision. Eye involvement typically occurs early in the course of reactive arthritis, and symptoms may come and go.

Roughly 20 to 40 percent of men with reactive arthritis develop penile lesions called balanitis circinata (circinate balanitis) on the end of the penis. A small percentage of men and women develop small hard nodules called keratoderma blennorrhagica on the soles of the feet, and less often on the palms of the hands or elsewhere. In addition, some people with Reactive Arthritis develop mouth ulcers that come and go. In some cases, these ulcers are painless and go unnoticed. Some people suffer serious gastrointestinal problems similar to those of Crohn's Disease

28. 41 weeks of gestation, antenatal checkup, not in labour. What would you recommend, except?

- A. US
- B. Xray pelvimetry
- C. Do volumetric measurement of amniotic fluid
- D. Vaginal examination

29. A young girl who wants to have earring pierced on the umbilical area, on examination was able to palpate the spleen 1cm below the left subcostal area. On lab examination, haematology and biochem are normal. Liver and pancreas were both normal on ultrasound. What would you advise the patient.

- A. Reassure and repeat investigation in 3 months
- B. Repeat ultrasound in 4 weeks
- C. Reassure
- D. Arrange for splenectomy

29. 60 year old lady with 4 years of menopause. Seeks advise regarding HRT. Which investigation would you do? Except

- A. Plasma FSH
- B. Plasma Oestrogen
- C. Bone density
- D. Lipid profile

30. What is true about gastrin, except?

- a. Closes the lower oesophageal sphincter
- b. Secreted by the cell in pyloric antrum

31. Newborn with ht and wt (50 percentile) and head circumference is 23cm (2 percentile) what is true?

- a. Head size will catch up with in 2 years
- b. Intellectual ability will catch up in 5 years

32. What is the best way to reduce cervical CA?

- a. vaccination with HPV
- b. use of condom in non marital sexual relationship
- c. improve pap smear technique
- d. provide other better technique for early detection

33. All of the following cancers will give hepatic metastasis, except?

- a. Pancreas
- b. Breast
- c. Stomach
- d. Kidneys

34. Old lady complaint about carpal tunnel syndrome. What is the best indication that can be taken through history taking

- a. Pain wakes her up at night
- b. Increase sensitivity in thenar area

35. Indication of primary ovarian failure

- a. Increase FSH
- b. Increase LH
- c. Low oestrogen

d. Androgen

36. Carbon monoxide poisoning, except

a. Hydrocephalus

38. Which one of the following is not associated with malignancy

A. Actinic keratosis

B. Dermatomyositis

C. Acanthosis nigricans

D. Erythema multiforme

Erythema multiforme is a skin condition of unknown etiology, but some authors suggest that the disease is mediated by deposition of immune complex (mostly IgM) in the superficial microvasculature of the skin and oral mucous membrane that usually follows an antecedent infection or drug exposure. It varies from a mild, self-limited rash (E. multiforme minor) to a severe, life-threatening form (E. multiforme major, or Stevens-Johnson syndrome) that also involves mucous membranes.

Dermatomyositis is a connective-tissue disease that is characterized by inflammation of the muscles and the skin. Its cause is unknown, but it may result from either a viral infection or an autoimmune reaction. Up to 50% of the cases may be a paraneoplastic phenomenon, indicating the presence of cancer.

Actinic keratosis (also called solar keratosis, or AK) is a premalignant condition of thick, scaly, or crusty patches of skin. It is most common in fair-skinned people who are frequently exposed to the sun, because their pigment isn't very protective. It usually is accompanied by solar damage. Since some of these pre-cancers progress to squamous cell carcinoma, they should be treated.

When skin is exposed to the sun constantly, thick, scaly, or crusty bumps appear. The scaly or crusty part of the bump is dry and rough. The growths start out as flat scaly areas, and later grow into a tough, wart-like area.

Which is right about contraception failure rate.

A. Combined oral contraceptive pills- 1%

B. Progestogen-only contraceptives-2%

C. Intrauterine contraceptive devices with progestogen-2%

D. Withdrawal- 2-3%

E. Ovulation method-2-3%

37. What is true about Mirena

A. Reduce the incidence DVT

B. Infrequent amenorrhoe

C. Reduces the bleeding compared to the normal menstration

38. Gilbert's syndrome?

A. Always leads to liver cirrhosis

B. Glucuronyl transferase

C. Unconjugated bilirubin

39. 68 year old lady became confused. Na 165 - increased, Urine osmolarity 205 - lower level of the

normal range. What is the diagnosis

- A. Cardiac failure
- B. Diabetes insipidus
- C. SIADH
- D. Renal failure
- E. Water intoxication

42. What is a possible cause of death in 1 - 16 years group in Australia

- A. Malignancy
- B. Accidents
- C. Non-accidental injury

43. Blood test shows HBs Ag (+), Hbe Ag (+). What is true?

- A. Indicates the acute hepatitis

44. Which of the following gives the higher chance of colon cancer development

- A. Gardner syndrome
- B. Meta... polyps
- C. Ulcerative colitis duration of 2 years
- D. Juvenile polyps

45. What is least associated with sexual life of 65 year old women

- A. Decrease lubrication
- B. Recurrent vaginitis
- C. Decrease orgasmic potential
- D. Vaginal atrophy
- E. Relaxing of pelvic muscle

46. Patient has been diagnosed with depression, came to see your for advice. What would you tell the patient regarding SSRI and TCA

- A. SSRI can affect sexual life with addiction
- B. TCA affect sexual life and cause addiction
- C. SSRI affect sexual life without addiction
- D. TCA and SSRI can both affect sexual life causing addiction

47. Unilateral undescended testes in child is associated with:

- A. Carcinoma
- B. Inguinal hernia
- C. Torsion
- D. Hydrocele
- E. Varicocele

48. 7 year old boy with tics presents with an oral repetitive facial movements and blinking which is worse while he is watching TV or at rest. He had previous respiratory infection. What is the most probable diagnosis?

- A. Tonic-clonic seizure
- B. Myoclonic Seizure
- C. Normal blinking
- D. Habitual Tic
- E. Sydenham chorea

49. Lymphatic drainage of the lower anal canal (below the dentate line) is through

- A. Para aortic nodes
- B. Superficial inguinal node
- C. Deep inguinal node
- D. Pelvic nodes lateral

49. A Child with a lump in the posterior triangle of the neck. On examination, the lump was soft, fluctuated and transilluminated. Which of the following is the most likely cause?

- A. Brachial cyst
- B. Cystic hygroma
- C. Thyroglossal cyst

50. A 5 year old boy presents with extremely painful ears. The eardrums are red and protruding. Which of the following is correct?

- A. Tetracycline is the drug of choice
- B. If the ear-drum ruptures spontaneously, it will provide pain relief
- C. Antihistamine can improve the drainage

51. 3 year old girl with erythematous area on the upper lid, lid oedema, normal eye movement, congestion of conjunctiva. What is the correct treatment?

- A. IV flucloxacillin and cephalosporin
- B. Topical gentamycin
- C. Topical corticosteroid

52. Which of the following is not used for hyperkalemia?

- A. Resonium A
- B. Magnesium
- C. Bicarbonate
- D. Insulin
- E. Dialysis

53. One of the following is compatible with normal male genitalia?

- A. 46XY with gonadal agenesis
- B. 46XY with mother taking Cyproterone citrate at 8 week pregnancy

- C. 46XX with 17-alpha Hydroxylase
- D. 46XY with androgen resistance

Cyproterone acetate is an antiandrogen, i.e. it suppresses the actions of testosterone (and its metabolite dihydrotestosterone) on tissues. It acts by blocking androgen receptors which prevents androgens from binding to them and suppresses luteinizing hormone (which in turn reduces testosterone levels). Its main indications are prostate cancer, benign prostatic hyperplasia, priapism, hypersexuality and other conditions in which androgen action maintains the disease process. Due to its anti-androgen effect, it can also be used to treat hirsutism, and is a common component in hormone therapy for male-to-female transgendered people

17-hydroxylase (17-OH) deficiency syndrome is a rare genetic disorder of steroid biosynthesis causing decreased production of glucocorticoids and sex steroids and increased synthesis of mineralocorticoid precursors. Reduced or absent levels of both gonadal and adrenal sex hormones result in sexual infantilism in 46,XX females and ambiguous genitalia in 46, XY males

54. Two hours after delivery of a normal newborn baby boy. Apgar scale 5-7, developed dyspnea and cyanosis. On examination, abdomen is scaphoid in shape.

- A. Meconium aspiration
- B. Diaphragmatic hernia

56. In which indication Tissue plasminogen activator (tPA) is indicated?

- A. All second infarcts
- B. All anterior wall infarcts
- C. All inferior wall infarcts
- D. Some selected anterior wall infarcts
- E. Non ST elevation

57. Rosacea which is correct

- A. Acneform rash
- B. Associated with alopecia
- C. Oral contraceptive pills may cause the condition
- D. Response to steroids

58. A patient with ascitic fluid showed malignant cells. What could be expected to be found?

- A. Palpable supraclavicular lymph node
- B. Hepatomegaly
- C. Palpated nodules per rectum
- D. Splenomegaly

59. Lady came with episodes of unilateral facial pain and residual sensory loss over that area. What is the possible cause?

- A. Trigeminal neuralgia
- B. Multiple sclerosis
- C. Horner's Syndrome
- D. Facial nerve palsy

60. Acute pancreatitis causes, except?

- A. Mumps
- B. Islet cell tumor of the pancreas
- C. Hyperlipidaemia
- D. Alcohol
- E. Gall stones

61. Commonest cause of small intestinal obstruction in adults in Australia?

- A. Adhesion

62. For recurrent duodenal ulcer with triple therapy, what is the least complicated investigation?

- A. Urea breath test
- B. Hydrogen breath test
- C. Biopsy and histology
- D. Serological test
- E. Culture

63. A 40 year old woman develop severe epigastric pain at night. The next morning, she notice having a dark coloured urine. Investigation revealed her billirulin is increased, alkaline phosphatase is increase 3x, transaminase 2x increase, amylase increase 2x. what is the possible diagnosis?

- A. Acute pancreatitis
- B. Acute cholecystitis
- C. Choledocholithiasis
- D. Acute Hepatitis

64. When pregnancy goes beyond 42 weeks AOG, all the following would be expected, except?

- A. Cephalo pelvic disproportion
- B. Intrauterine growth restriction
- C. Meconium aspiration syndrome
- D. Intrapartum fetal distress
- E. Shoulder dystocia

65. What is most common cause of jaundice in the late stage of pregnancy, in Australia?

- A. Acute cholecystitis
- B. Choledocholithiasis
- C. Cholestasis
- D. Gall stone
- E. Acute Hepatitis

66. What is the first sign of puberty in boy?

- A. Size of testis
- B. Size of penis
- C. Axillary hair growth
- D. Pubic hair growth

67. A 60 year patient presents with congestive heart failure. Was commenced on captoril and long term use of chlorthiazide due to hypertension. What would you expect?

- A. K increased
- B. K decreased
- C. Na decreased
- D. Cholesterol increased
- E. Na increased

68. 3 weeks after bank robbery, what would you expect?

- A. Outburst of anger and irritability

69. A 68 year old elderly lady patient on oral warfarin due to mechanical heart valve replacement. She had pause menopausal bleeding one week later. What is the least likely cause?

- A. Endometrial CA
- B. Endometrial polyps
- C. Cervical malignancy
- D. Atrophic vaginitis
- E. Due to oral anticoagulation

70. 13 year old girl presents with 2-3 menstruation after puberty from 12 year of age. They lasted nearly 10 days. All of the following could be done except?

- A. Menstruation would become regular later on
- B. Can regulate with combined OCP
- C. Curettage is not necessary at this age
- D. Needs clomiphene if she wishes to get ovulation
- E. Needs iron supplement

71. A 26 year old primigravida, height 150cm, at 35 weeks of gestation and in labor. In your assessment, pelvis is reduced, cervix is fully effaced, 4 cm dilated and at station 0. What is your management?

- A. Xray pelvimetry
- B. CS
- C. Continue trial labor
- D. IV Syntonium

72. Primary lactose intolerance, all of the following are true except?

- A. Failure to increase glucose in serum > 100mg/L after 50g.
- B. Common in Asian community
- C. Steatorrhoea
- D. Normal villi in small intestine

73. Unilateral exophthalmos is associated with:

- A. Thyrotoxicosis
- B. Tumor in the maxillary antrum

- C. Carcinoma of the lungs
- D. Adenoma of the lacrimal gland

74. Most common presenting feature of testicular neoplasm?

- A. Testicular swelling
- B. Hydrocele
- C. Testicular pain
- D. Gynaecomastia

75. Child with facial periorbital oedema, abdominal distention and ascitis, proteinuria +++ and no haematuria. What is not correct?

- A. 90% of this disorder respond to steroids
- B. Pneumococcal peritonitis is a possible cause
- C. Biopsy will show focal glomerulosclerosis in the majority of cases
- D. Needs penicillin prophylaxis

76. Twin pregnancy following introduction of two fertilised ovum in IVF. All is true, except?

- A. Acute polyhydramnios
- B. Premature labour
- C. PIH
- D. Anaemia if haematinics not taken
- E. Assymetrical growth of twins

77. An old ambulant lady presents with urine retention. No pain, bladder up to the level of umbilicus.

- A. Chronic urine retention
- B. Acute urine retention
- C. UTI

78. Patient with a history heart burns and associated treatment for 5 years presents with dysphagia only to solid food. What is possible cause?

- A. achalasia
- B. Oesophageal carcinoma
- C. Stomach carcinoma
- D. Oesophageal varices

79. Mammogram- a circular opacity with regular border at the periphery of the breast shadow. US-cystic translucent mass. What should be done next?

- A. Tru-cut biopsy
- B. Needle aspiration
- C. Simple mastectomy
- D. Radical mastectomy
- E. Modified mastectomy

80. Previously healthy young female patient is at 3 weeks of post partum period. She develops

dyspnoea, syncope with a wave on JVP and 4th heart sound over the left sternal border. Your diagnosis is massive pulmonary embolism. What are other findings?

- A. Normocytic Hypochromic anemia
- B. ABG shows hypoxia and hypercapnia
- C. Chest X-ray shows consolidation

81. A 30 year old patient presents with intermittent painful swelling of the upper neck. It is at the upper third of the anterior border of the sternocleidomastoid muscle, fluctuate on palpation, Possible diagnosis

- A. Brachial cyst
- B. Thyroglossal cyst
- C. Submandibular salivary gland obstruction

82. Which of the following will benefit most from splenectomy

- A. Chronic ITP
- B. Myelofibrosis
- C. Hepatic hypersplenism
- D. Hereditary spherocytosis

83. Which of the following that will give the greatest certainty at to the diagnosis of pulmonary embolism?

- A. Chest X-ray: Normal; Perfusion scan: Normal; Ventilation Scan: abnormal
- B. Chest X-ray: Normal; Perfusion scan: Abnormal; Ventilation Scan: abnormal
- C. Chest X-ray: Abnormal; Perfusion scan: Normal; Ventilation Scan: abnormal
- D. Chest X-ray: Consolidation; Perfusion scan: Normal; Ventilation Scan: abnormal
- E. Chest X-ray: Normal; Perfusion scan: Abnormal; Ventilation Scan: normal

84. All of the following joints are involved in RA when compared to OA

- A. Sternoclavicular joint
- B. Temporomandibular joint
- C. Metacarpophalangeal joints
- D. Carpometacarpal joints of the thumb

85. Rheumatic fever arthritis most typical findings?

- A. Heals without deformities
- B. Affects only small joints
- C. Affects small and large joint equally
- D. Confined to one joint

86. 54 year old patient complaints of diarrhea for the past 3 months. Which is least likely the cause?

- A. Campylobacter Jejuni
- B. Ca of the colon
- C. Giardia lamblia

- D. Chronic use of laxative
- E. Inflammatory bowel disease

87. What is the best indication of thyroid malignancy?

- A. Compression of the trachea
- B. Compression of the oesophagus
- C. Stridor
- D. Pemberton's sign
- E. Recurrent laryngeal nerve involvement

88. Chronic liver disease in cirrhosis. All of the following could be the features, except?

- A. Perioral telangiectasis
- B. Palmar erythema
- C. Dupuytren's contracture
- D. Ascitis
- E. Xanthomas

89. Small boy 2 year old found in the bush, suspected snake bite on the leg. All of the following would be related to snake bite , except?

- A. Application of the tourniquet on the affected leg.
- B. Snake venom can produce...

90. Post operative patient. Potassium 2.7 (3.5-5 mmole/L). The patient was given 2L of IV infussion, 2L loss from nasogastric tube, urine output is 700ml. What is your next fluid management in the next 24hrs?

- A. 2L Hartman sol + 1L NSS + 50 mmole KCl
- B. 3L Hartman sol + 2L NSS + 100 mmole KCl
- C. 2L 5% dextrose sol + 3L NSS + 100 mmole KCl
- D. 2L Hartman sol + 2L NSS + 50 mmole KCl
- E. 2L Hartman sol + 3L NSS + 50 mmole KCl

91. Which of the following movement is first lost in degenerative disease of the hip?

- A. Flexion
- B. Extension
- C. Rotation
- D. Abduction
- E. Adduction

92. 18 months old child not babbling, mother concerned and has audiological assessment at the age of 10 months. What is the next step?

- A. Arrange audiometry
- B. Repeat hearing test
- C. Reassure mother

93. Photo of the leg with chronic venous ulcer. What is the least appropriated management?

- A. Topical antibiotics
- B. Ointment with contains enzymes
- C. Apply bandage and use of stockings
- D. Keep leg elevated

94. Child has sleep terror for 12 months. Parents are concerned and want your advice. What is true?

- A. Tell them that you don't have enough experience in this area and will be referred to Paediatrician or Psychiatrist
- B. It is associated with sleep disorder
- C. Often positive family history

95. A 2 year old boy has abdominal distension and failure to thrive. Mother claims that her son has been having large and offensive bowel motions. Which investigation would you do?

- A. Sweat test
- B. Duodenal biopsy
- C. Abdominal xray

96. All of the following are beneficial in the treatment of acute asthma in adult, except?

- A. Oral corticosteroid during acute attack
- B. Inhaled salbutamol and oral theophylline
- C. Let the patient be involved in the management plan
- D. Inhaled salbulamol

97. Retrograde blood flow into the left vertebral artery can be due to obstruction of:

- A. Internal carotid artery
- B. Proximal subclavian artery
- C. Distal subclavian artery

98. Diabetic patient developed ulcer on the foot. Most likely cause is ?

- A. Neuropathic ulcer
- B. Atherosclerosis
- C. Infection
- D. Microvascular disease

99. CT scan of the abdomen, patient is vomiting. What is the possible cause except?

- A. Cyst of spleen
- B. Pancreatic cyst
- C. Ascites
- D. Mesenteric cyst
- E. Acute gastric dilatation

100. Myasthenia gravis, what is correct?

- A. Thymectomy is only indicated for thymoma
- B. EMG can always positive
- C. Some does not have antibody
- D. Anticholinergic drug is the treatment

101. A seven week old baby is brought to you by his mother. She complaint that the baby had been vomiting intermittently since birth. On examination you find no abnormalities except for some weight loss. What is your probable diagnosis?

- A. UTI
- B. Pyloric stenosis
- C. Phenylketonuria
- D. DI
- E. GORD

102. A chest xray of a child, shows consolidation on lower right side of the lungs. What is your diagnosis?

- A. Streptococcal pneumonia
- B. Mycoplasma pneumonia
- C. TB
- D. Aspergillus pneumonia
- E. Viral pneumonia

103. A pregnant woman presents to you at 38 weeks of gestation with 1000ml of blood loss and lower abdominal pain. Which of the following is not associated with abruptio placenta?

- A. Foetal death
- B. Tense uterus
- C. Foetal head is high up
- D. BP is 180/110
- E. Normal pulse rate

104. What is the most common cause of bleeding from the nipple of the breast?

- A. Intraductal papilloma
- B. Ductal CA
- C. Paget's disease
- D. Mastitis

105. Which vitamin will be deficient in a breast fed baby?

- A. Vitamin A
- B. Vitamin K
- C. Vitamin D
- D. Vitamin B12
- E. Vitamin E

106. 54 year oldman with sudden onset of left sided weakness without dysphasia. What is the possible diagnosis?

- A. Right middle cerebral art
- B. Internal carotid artery occlusion
- C. Epilepsy
- D. Hypertensive hemorrhage in the area of the internal capsule

107. The patient present in emergency department with BP 90/50, pulse rate 98 min and CVP is 0.5 water. What is the possible cause?

- A. Cardiac arrest
- B. Hypovolemic shock
- C. Bowel obstruction
- D. Pancreatitis

108. ECG of inferior infarction – ST elevation on Leads II III and aVf

109. 12 months baby what can he do, except?

- A. Transfer object from one hand to the other
- B. Can grasp object with thumb and index finger
- C. Can walk without support
- D. Can sit without support

110. 36 months old child what can do

- A. Hop on one leg
- B. Draw a triangle
- C. Can say a complete sentence
- D. Draw 4 parts of human body

111. Anti-D immunoglobulin should be given to a negative mother in which of the situation:

- A. Must be given within 24 hours of delivery
- B. Anti-D in the second trimester reduce the chance of immune reaction
- C. Should be given to all mothers with Rh- blood group

112. Picture. An old man with a skin lesion on the domain of the hand for 1 year without any changes.

- A. Squamous cell carcinoma
- B. Ruptured agio...
- C. Malignant melanoma
- D.

113. A child developed seizures. What is your management?

- A. Phenobarbital and propranolol
- B. Diazepam IV

114. A soccer player presents with weakness of dorsiflexion of the foot

with a normal ankle and knee jerk. What is the possible cause?

- A. L4
- B. L5
- C. Popliteal nerve
- D. Common peroneal nerve

115. In regards to the nosocomial infections, all can be true, except:

- A. Staff with active infection should not be allowed to deal directly with patients
- B. Staff members who are carriers of staphylococcus aureus in their nose should not be allowed to work with patients
- C. Staff members should wash their hands between dressing
- D. Staff members should have a prophylactic antibiotics policy

116. Infant baby developed fever and subsided. After couple of days, mother noted a maculopapular rash over the trunk. What is your diagnosis?

- A. Roseola
- B. Mumps
- C. Rubella
- D. Measles
- E. Scarlet fever

117. Which drug can reverse the effect of heparin?

- A. Vitamin K
- B. Protamine Sulphate

118. In which of the following condition managing hypertension has been proven as a preventing factor?

- A. TIA
- B. Ischemic stroke
- C. Coronary artery disease
- D. Congestive heart failure
- E. Atherosclerosis

119. A diabetic patient is taking insulin in the morning before meal intermediate acting and short acting insulin. Also taking the same IA and SA insulin before evening meal. He complains of sweating at night. What alteration in insulin doses needs to be done?

- A. Reduce dose of IA insulin in the morning
- B. Reduce dose of SA insulin in the morning
- C. Reduce dose of IA insulin in the evening
- D. Reduce dose of SA insulin in the evening
- E. Increase dose of IA insulin in the morning

120. A 70 year old lady presented to the emergency department with an episode of memory loss and blurring vision. What is likely the diagnosis?

- A. Vertebral artery occlusion
- B. Carotid artery stenosis
- C. Embolus in arteria cerebri media
- D. Global amnesia
- E. Epilepsy

121. A young man comes to you dressed as a female and complaining about problems with his sexual identity from childhood. He has always felt like a woman and has been cross-dressing on several occasions. Which one of the following is correct?

- A. Transsexualism
- B. Transvestism
- C. Homosexual
- D. Schizophrenia
- E. Personality disorder

122. Serotonin syndrome can occur by using SSRI's with all the following drugs, except?

- A. Moclobemide
- B. L. Tryptophan
- C. Citalopram
- D. Clomipramine
- E. Dextromethorphan

Which of the following will cause SEROTONIN syndrome if given together with SSRI like Fluoxetine EXCEPT?

- a.L-tryptophan
- b.Haloperidol
- c.Moclobemide
- 'd. Chlorpromazine
- e.Citalopram

"The serotonin syndrome is a hypersotonegic state which is a very dangerous and a potentially fatal side effect of serotonergic enhancing drugs which can have multiple psychiatric and non-psychiatric symptoms. This is a toxic condition which requires heightened clinical awareness in order to prevent, recognize, and treat the condition promptly. Promptness is vital because, as we just mentioned, the serotonin syndrome can be fatal and death from this side effect can come very rapidly. The suspected cause of that increase is the introduction of the new selective serotonergic enhancing agents in clinical practice - the SSRIs. This disorder, brought on by excessive levels of serotonin, is difficult to distinguish from the neuroleptic malignant syndrome because the symptoms are so similar. The neuroleptic malignant syndrome is a serious condition brought on by the use of the neuroleptic drugs.

"The symptoms of the serotonin syndrome are: euphoria, drowsiness, sustained rapid eye movement, overreaction of the reflexes, rapid muscle contraction and relaxation in the ankle causing abnormal movements of the foot, clumsiness, restlessness, feeling drunk and dizzy, muscle contraction and relaxation in the jaw, sweating, intoxication, muscle twitching, rigidity, high body temperature, mental status changes were frequent (including confusion and hypomania - a "happy drunk" state), shivering, diarrhea, loss of consciousness and death.

"The serotonin syndrome is generally caused by a combination of two or more drugs, one of which

is often a selective serotonergic medication. The drugs which we know most frequently contribute to this condition are the combining of MAOIs with Prozac (this should also include the other SSRIs) or other drugs that have a powerful effect upon serotonin, ie, clomipramine (Anafranil), trazadone (Deseryl), etc. The combination of lithium with these selective serotonergic agents has been implicated in enhancing the serotonin syndrome. The tricyclic antidepressants, lithium, MAOIs, SSRIs, ECT (electric shock treatment), tryptophan, and the serotonin agonists (fenfluramine) all enhance serotonin neurotransmission and can contribute to this syndrome. Anything which will raise the level of serotonin can bring on this hyperserotonergic condition. The optimal treatment for the serotonin syndrome is discontinuation of the offending medication or medications, offer supportive measures, and wait for the symptoms to resolve. If the offending medication is discontinued, the condition will often resolve on its own within a 24 hour period. If the medication is not discontinued the condition can progress rapidly to a more serious state and become fatal.

123. Parents and a 5 months old infant are anxious about attacks of stiff tonic jerks with drawing up the legs on the abdomen, which occurs during day time for several weeks now and some decline in milestones. What is your diagnosis?

- A. Febrile seizures
- B. Infantile spasms
- C. Benign infantile convulsions
- D. Intussusception
- E. Urinary tract infection

124. Haemochromatosis is best diagnosed by:

- A. Serum Ferritin increase
- B. Serum iron increase
- C. Increase concentration of haemoglobin
- D. FBC
- E. Ultrasound of the liver

125. Polymyalgia Rheumatica

- A. Distal limb muscle aching
- B. Increase muscle CPK
- C. There are fatigue fever and depression
- D. ESR normal
- E. Giant cell arthritis

126. Patient with Cirrhosis includes all of the following signs, except?

- A. Generalised pigmentation
- B. Bilateral abdominal varicosis
- C. Peri-oral telangiectasia
- D. Jaundice and palmar erythema
- E. Dupuytren's contracture

127. A 25 year old witnessed an armed bank robbery. Which of the following is most likely to present?

- A. Erotic memories of the events

- B. A brief psychotic reaction
- C. Visual hallucination of the events
- D. Irritability and outburst of anger
- E. Hypersomnia

128. A girl has a dog phobia. Her boyfriend owns a big German shepherd. She comes to see you for advice. Which of the following is initially advised.

- A. Tactfully suggest her that she should tell her boyfriend to choose between her and the dog.
- B. She should suggest to her boyfriend to buy a smaller dog and cat
- C. She should take alprazolam tablet before she visits her boyfriend
- D. Tell her the fear usually disappears at a later age.
- E. Advise her to buy a book about German shepherd and look at the photos.

129. What is the percentage of detection of Duke stage A1 colonic carcinoma after screening with faecal blood test?

- A. <3%
- B. 15%
- C. 25%
- D. 50%
- E. 75%

130. A 13 year old boy is below the 3rd percentile for height (his height is equal to 50th percentile for nine year old). Which of the following is the best prognostic sign for him to reach the normal adult height?

- A. Bone age equal to 13 years
- B. Bone age equal to 9 years
- C. Bone age equal to 15 years
- D. Weight more than 5th percentile for his age
- E. Weight equal to the 90th percentile for his age

131. A triple antigen immunisation, what is a contra indication?

- A. Child HIV positive
- B. Child on steroid therapy
- C. Viral infection with 39 degrees C
- D. Previous immunisation with mild reaction

132. Coarctation of aorta in 4 year old child, what is true?

- A. Rib notching in Xray
- B. Volume of femoral pulse less than brachial pulse
- C. It leads to right ventricular hypertrophy
- D. Difference between right and left radial pulse
- E. Continuous machinery murmur

133. A 50 year old woman complains that she believes her husband of 20 years will die of cancer though he is perfectly healthy. She also believes she was a member of a secret service organisation. On examination she appeared to be normal and her pre-morbid personality was normal. When

asked about her beliefs she became withdrawn and had evasive and vague answers. What is the diagnosis?

- A. Delusional disorder
- B. Paranoia
- C. Schizophrenia
- D. Organic mental disorder
- E. Dementia

134. PHOTO of anus of a young female. The picture showed a small swelling bluish in color on one side of the anus. The patient complains of severe pain and been present for 24hours. What is the best treatment?

- A. Hemorrhoidectomy under anaesthesia
- B. Soak on warm saline
- C. Internal sphincterectomy
- D. Send her home and examine her tomorrow
- E. Local anaesthesia and incision

135. Raynaud's phenomenon is seen in all of the following, except

- A. SLE
- B. Rheumatoid arthritis
- C. Scleroderma
- D. Ankylosing spondylitis

136. In puerperal depressive psychosis with suicidal tendencies, agitation and insomnia, which is more correct?

- A. ECT is the treatment of choice
- B. Social isolation is a major risk
- C. Always fatal
- D. Seen in 25% of mothers
- E. Reassure and tell her it is normal

137. 4 day-old child with central cyanosis and lack of peripheral pulses

- A. TOF
- B. Transposition of great vessels with VSD
- C. ASD

138. 36 y old women with history of fever for a month and arthralgia and facial flushing was brought to ED with a temperature of 37. After several hours she developed T=38. Possible diagnosis

- A. SLE
- B. Sepsis

139. A young women presents with headache with mild neck stiffness. CSF is cloudy with increased WCC, predominantly neutrophiles; protein > 1 g, glucose reduced. Possible diagnosis?

- A. Bacterial meningitis
- B. Viral meningitis

- C. Herpes simplex
- D. TB meningitis

140. A young woman present with antinatal bleeding. What is the indication of placenta previa.

- A. Abdomenal pain with bleeding
- B. Tender uterus

141. A child with continues heart murmur

- A. PDA
- B. VSD
- C. TOF
- D. ASD

142. Peptic ulcer disease after treatment of NSAIDs with urea breath test negative. What is the best management?

- A. Triple therapy
- B. Omeprazole long term therapy
- C. Ranitidine long term therapy
- D. Reassurance

143. A child with skin rash and muscle weakness:

- A. Dermatomyositis
- B. Myasthenia gravis
- C. Psoriasis

144. Which of the following diseases is least likely to be transmitted through blood transfusion?

- A. Hepatitis A
- B. Hepatitis B
- C. Renal dialysis
- D. CMV
- E. Aedes mosquito bites

145. Which of the following hepatitis has similarity with hepatitis E

- A. Hepatitis A
- B. Hepatitis B
- C. Hepatitis C
- D. Hepatitis D

146. Which part of the limbic system is responsible for AFFECT?

- A. Amygdala
- B. Thalamus

147. Antiphospholipids antibodies:

- B. Infection
- C. Ischemic stroke
- D. SLE
- E.

148. ECG- A lady with biventricular heart failure, ischemic heart, taking nitrates, digoxin 0.125mg and captopril. What would you do next after the above ECG?

- A. Stop all meds and reassess medications after 12 hours
- B. Increase digoxin to 0.25mg
- C. Increase captopril

149. ECG with pace marker

150. Picture of rupture of the long head of bicep. See AMC book surgery

151. Chest Xray 46 year old man with history of URTI. He has been cough at night and in the morning with mild yellowish sputum.

- A. Bronchitis
- B. TB
- C. Sarcoidosis
- D. Brochiectasis
- E. Pulmonary fibrosis

152. Cardiac catheter Superior and inferior vena cava – normal pressure. Right Aorta increase, right ventricle increase and pulmonary artery increase.

- A. Continuous murmur
- B. Murmur at L sternum goes to 4th intercostal

153. Antenatal check up of a lady at 39 weeks of gestation with transverse lie. All of the following can be done, except?

- A. C/S
- B. External version
- C. Vaginal examination
- D. U/S
- E. Await for normal occurrence (labor)

154. Soccer player kicking the ball... positive drawer sign. What is the diagnosis?

- A. Rupture of median meniscus
- B. Rupture of the anterior knee cap

155. Which one of the following is the common side effect of Atypical antipsychotic drug?

- A. Weight gain
- B. Hypertension
- C. Hypotension
- D. Headache

156. Which of the is not a part of parkinsonism?

- A. Hyperreflexia
- B. Muscle weakness
- C. Rigidity
- D. Shuffle gait

157. Lady with history of insomnia for few months, irritability and weight loss. She and her husband are working and had a lot of expenses including hire purchase. They can't afford to go for holiday.

- A. Refer to Psychiatrist
- B. Refer to social worker

158. Surgery at the cervical area of the neck... Two hours later, patient starts to have dyspnea.

- A. Concealed hemorrhage
- B. Collapse of diaphragm

159. What is the least important factor in the hierarchy of the evidence base medicine?

- A. Cohort study
- B. Case study
- C. Systemic review
- D. Survey study

160. Pituitary tumor, except

- A. Nasal visual defect

161. Which the of following are susceptible to osteoporosis, except?

- A. Anorexia nervosa
- B. 36 year old menopausal woman
- C. corticosteroid

162. All of the following surgical procedure will need prophylactic antibiotic, except?

- A. Fundoplication
- B. Valvuloplasty

163. A case of Coeliac disease, except

- A. Fe deficiency
- B. Serum and red cell folate deficiency
- C. Vitamin B12 deficiency

164. Case- Patient is going for surgical procedure for colon CA. Just before surgery was known to be taking aspirin. What would you do?

- A. Discontinue aspirin and reschedule 10 days later
- B. Carry on with surgery with vitamin k injection as part of premedication
- C. Carry on with surgery with protamine sulphate as part of premedication
- D. Stop aspirin and give heparin IV and carry on with surgery

165. A female patient arrived in emergency department with ABG – pH is increase, PO<sub>2</sub> and PCO<sub>2</sub> are reduced. Which of the following is not associated with this picture?

- A. Severe liver disease
- B. Pulmonary infection
- C. Sepsis
- D. Sedative overdose

166. Which of the following is the most commonly associated presentation of cardiac tamponade?

- A. Increase JVP with neck engorgement

167. Which of the following is true in relation to fetal monitoring

- A. loss of beat to beat variability for 5 sec indicates fetal hypoxia and immediate delivery is indicated

168. Which of the following is the most serious condition?

- A. Tension pneumothorax
- B. Spontaneous pneumothorax
- C. Hemopneumothorax
- D. Dissecting aneurism

169. Patient with history of haemoptysis about 1000ml and melena. What is your management?

- A. Immediate surgery
- B. Endoscopy
- C. Irradicate H. pylori

170. School age child present with headache and a transient hemiplegia. What is possible cause?

- A. Migraine
- B. Medulloblastoma

171. Which of the following disease does not produce fetal abnormality after maternal exposure?

- A. CMV
- B. Toxoplasmosis
- C. Rubella
- D. Hepatitis
- E. Rota virus

Recall questions October 2003 (S.S)

172. ECG with new right bundle branch block and irregular p waves. Question: Young male recently had a business trip, now presents with shortness of breath. What is the most likely diagnosis indicated by the ECG.

a. Pulmonary embolism

173. Patient post operative. Nasogastric drainage 2 litre, urine output 500ml and surgical drain 600ml. Received 2 litre IVI fluids. Biochemistry: Sodium 134; Potassium 3.0; Chloride normal. What fluid would be required over the next 24 hours?

- a. 2 l Saline + 1 l 5% Dextrose water + 50 mmol KCL
- b. 2 l Saline + 3 l 5 % Dextrose water + 100 mmol KCL

174. Antidote for heparin

- a. Protamin Sulfate
- b. Vit K

175. Adult man 4 weeks ago had flu-like illness, since then coughing mostly at night and in the morning with yellow sputum. CXR given with a lesion in the right upper lobe.

- a. bronchitis
- b. pulmonary TB

176. 55 yr old man. TB when he was young. Now ulcer on lateral aspect of tongue for 6 weeks. Smokes for many years. Teeth and gingiva in good condition. Most likely cause.

- a. squamous CA
- b. TB
- c. Aphthous ulcer
- d. Stomatitis

177. Young man post MVA with chest contusion. Most likely cause for distended neck veins:

- a. tension pneumothorax
- b. cardiac tamponade

178. Which of the following injuries will cause rapid death if not treated immediately?

- a. pneumothorax
- b. ruptured spleen
- c. torn aorta

179. Splenectomy will be most beneficial in

- a. chronic ITP

180. In children with ITP

- a. usually history of viral illness
- b. raised ASOT

181. Most common cause of death in children

- a. accidents
- b. malignancies

182. Thyroid scan with increased uptake in one lobe. What is this patient most likely to present with?

- a. thyrotoxicosis
- b. myxoedema
- c. palpable mass

183. Regarding Polyhydramnios which of the following is not true

- a. common in IVF

184. First sign of puberty in boys

- a. enlargement of testis
- b. growth spurt
- c. enlargement of penis
- d. pubic hair

185. ECG of rapid AF with patient low BP and poor consciousness. What is your first action?

- a. cardioversion

186. ECG with anterolateral MI and atrial flutter. Patient already received oxygen and aspirin. What will you give next?

- a. t-pa
- b. amiodarone
- c. verapamil

187. Elderly woman on GTN patch, digoxin and calcium channel blocker. Presents with signs of cardiac failure. ECG given showing complete heart block. What do you do

- a. stop all medication and review in 12 hours
- b. cardiovert
- c. give frusemide 20 mg IVI

188. Middle aged woman presents with one episode of haematemesis. Otherwise healthy. On endoscopy a single duodenal ulcer is seen with signs of a recent bleed. Rapid urease test is negative. What to do?

- a. suture over ulcer
- b. omeprazole IVI
- c. omeprazole IVI + Clarythromycin + metronidazole
- d. ranitidine + Clarythromycin + metronidazole

189. What is the least inconvenient test for H.Pilori

a. Urease breath test

There were 10 ECG questions

There were 2 CT heads, one abdo CT and 1 thyroid scan

Good Luck

Brisbane

191. Which of the following doesn't cause SSRI's syndrome?

a. Haloperidol

192. WOF does not cause congenital defect?

b. Hep C

c. Toxoplasma

d. Siphilis

e. Rotavirus

193. Female with rosacea associated with:

a. Achne form

b. Abscess

c. Malaria rash

194. Olazepine, side effects:

a. Headache

b. Sexual dysfunction

195. Antidot for headache

a. Protamine

196. Female with Helicobacter Pylori. What is the simplest and least complicated way of diagnosis?

a. Urea Breath test

197. Female, pre-operative situation on warfarin previously and currently. Next step for the operation?

a. Change/stop warfarin and put on heparin

b. Stop warfarin

c. Keep/continue warfarin in smaller dosage

198. Male, diagnosed with carcinoma of the stomach is admitted for elective surgery. On history he is found to take aspirin 150 mg daily. What will you do?

a. Stop aspirin and do surgery

- b. Give protamine and do surgery
- c. Stop aspirin and postpone surgery after 1 week

199. Picture

A plain upright abdominal X-Ray showing fluid levels mainly on the left upper quadrant area

- a. Early obstruction of the small intestines
- b. Late obstruction of the small intestines
- c. Late obstruction of the large intestines
- d. Early obstruction of the large intestines
- e. Gold stone ileus

200. Hemochromatosis. Which is the finding?

- a. Increase of saturation of transferrin
- b. Increased ferritin

201. Male, diagnosed with thyroid carcinoma. What is the feature most likely?

- a. Paralysis of cranial 7-th nerve
- b. Dysphagia
- c. Paralysis of recurrent laryngeal nerve

202. What is the most important feature in a history of an asthmatic patient?

- a. Past history of intubation because of bronchospasm
- b. History of taking steroid

203. Question about Guillain-Barré Syndrome

204. What is the least likely IV blood transfusion?

- a. Hep A
- b. Hep B
- c. Cytomegalovirus

205. Male, Neck vein inflated, shock, trauma

- a. Pericarditis
- b. MI
- c. Hemopneumothorax

206. The eleventh cranial nerve is motor which one of the following?

- a. Sternocleidomastoid and trapezius ( soft palate and pharynx)

207. CT scan Picture of a brain, transversal section. Male, head trauma with nothing just bruise on the frontal lobe. No other symptoms. What is the diagnosis?

- a. Subdural haemorrhage
- b. Extradural haemorrhage

208. Male can not dorsiflex and..... foot. Pain in the knee. MCQ 2000 Oct

- a. Absent ankle jerk
- b. Weakness of dorsiflexion

209. Picture, Mammogram with a tumour over 5 cm. What is the next appropriate step?

- a. Needle aspiration
- b. Total Mastectomy

210. Female, married with 3 kids. No problems in the family. Too much suffering from

- a. Talk to the husband
- b. Advice to have a holiday
- c. Depression

211. Picture, X-Ray, child

- a. Klebsiella Pneumonia
- b. Streptococcal Pneumonia

212. Picture, ulcer of the leg. Least likely?

- a. Topical Antibiotics

213. Asthma

- a. Do not give oral corticosteroids for every attack

214. Picture of the right hand- ulnar, radius. Insignificant defect on the ulnar close to the joint with scapular.

- a. Non-union

215. Male, was prescribed SSRI. Comparison with TCA's. Patient worry to have adverse effect such as sexual dysfunction and to be addicted to it. Your advice is:

- a. SSRI can give sexual dysfunction, but there are no known addiction

216. ECG-s

- a. Left block
- b. Atrial fibrillation
- c. Ventricular tachycardia with anterior MI
- d. Hyperkalaemia....Pulmonary embolism
- e. Complete block
- f. Pericarditis
- g.

- h.
- i.
- j.

217. Picture, X-Ray

- a. TB

218. In a patient with massive ascities. Which one is possible to find?

- a.
- b.

219. Parkinson disease. What is a feature?

- a. Hyperreflexia

220. Female, on OCP. She forgot to take a pill in a specific time. 12 hrs later she took a tablet. 3 days later she found blood spotting. What is your suggestion to her?

- a. Continue OCP
- b. Do a test to eliminate pregnancy
- c. Do a test to prove pregnancy

221. Baby with presentation of transverse lie.

222. Talassemia

223. Jaundice in male adult. What is likely cause?

- a. Conjugated bilirubin
- b. Unconjugated bilirubin
- c. Hemolysis

224. Twins. Non- identical

- a. Acute polyhydramnious
- b. Chronic polyhydramnious

225. Twins, identical. Feature you can find.

- a. Acute polyhydramnious

226. Rh- factor to give to mother

- a. Best given at 2-nd trimester
- b. Within 24 hrs

227. Elderly woman not a cause of dyspareunia

- a. atrophic vaginitis
- b. HPV
- c. Relaxed pelvic muscles
- d. Endometrial Ca

228. Woman with an Obsessive Compulsive Disorder. She has symptoms for a year. What is the likely cause of the disease?

- a. Px develop schizophrenia
- b. Follows a course of remission ....
- c. Can develop psychosis
- d. Px becomes suicidal

229. Glaucoma- most characteristic feature:

- a. hazy cornea
- b. photosensitivity

230. Cause of Helicobacter Pylori . What is the simplest and least inconvenient management?

- a. urea breath test

231. ACE & diuretics

- a. GFR
- b. Na<sup>+</sup>
- c. K<sup>+</sup>

232. Dx? Mx? T4 T3 TSH

233. PaCO<sub>2</sub> Pa O<sub>2</sub> Dx? Mx?

234. Pulmonary embolism

## 2007

1. A picture of Dupuytren contracture. Cause:

- A. Use of chronic vibrating tools
- B. Chronic alcoholism

My ans: A, but i think the correct one would be B.

2. Picture of Bowen disease from Anthology. Dx?

3. Picture of perianal haematoma. Mn?

My ans: Incision and drainage.

4. Features of complex partial seizure given. Rx?

My ans: Carbamazepine

5. A 60 yo man, commercial driver has had a recent stroke. He has left hemiparesis and left homonymous hemianopia. What advice you will give him regarding driving in the future?

- A. never drive again
- B. Have an occupational driving test done

6. A sudanese boy came to you after administration of Co-timoxazole with the complaints of pallor and increasing darkness of colour of urine. his reticulocyte count was 8%. His Coomb's test was negative, no family history and on electrophoresis Type A hb was detected. What is the Dx?

- a. Hereditary Spherocytosis
- b. G6PD def
- c. Autoimmune HA
- d. Sickle cell anaemia
- e. thalassaemia

7. What is the use of Psychodynamic psychotherapy in Australia?

- A. Phobia
- B. Anxiety disorder
- C. schizophrenia
- D. OCD

8. A boy came with fever and pain in the right leg. he hardly moves the leg and does not allow you to move it either. He refuses to carry weight on that leg. What could be the dx?

- A. Septic arthritis of hip
- B. OM of femur
- C. D. E. could be excluded easily

My ans: A

9. one of your colleague is taking anti psychotic medication for her own psychiatric illness. what should be your advice to her??

- A. she should refrain from seeing pt. until she is asymptomatic
- B. she should take specialist review
- C. you should contact the medical advisory board

10. What is the most common association of childhood obesity in Australia?

- A. Above average height
- B. Hypercholesterolaemia
- C. DM
- D. cataract

11. What will be the first S/S when a plaster is too tight?

- A. Pain
- B. Change of colour

- C. Swelling
- D. Stiffness

12. which nerve regenerates most after traumatic laceration?

- A. ulnar n.
- B. Median n.
- C. Digital n.
- D. sciatic n
- E. Common peroneal n.

13. A patient came with 12 hr H/O severe vomiting. Pain in upper abdomen which is now constant in the epigastrium. There is rigidity and guarding in the abdomen. Dx?

- A. ac. pancreatitis
- B. Perforated DU
- C. perforated GU

14. A pt came with an ill defined mass in the RIF and loose watery stools. He has fever and has lost 6 kgs of weight recently. Dx?

- A. Crohn disease
- B. Meckel diverticulitis
- C. UC
- D. Ca large gut

15. Most common S/S assoc. with ca rectum?

- A. altered bowel habit and tenesmus

16. A patient came with a pus discharging bead at 5 o'clock position at the anal verge. on probing there was a track discovered which extended in the rectum for 15 cm. (these were the exact words). DX?

- A. Crohn dis
- B. Ankylostomiasis
- C. Ca rectum
- D. Haemorrhoids

17. A badly injured patient who takes anti psychotics is on the verge of collapse. but he is violent and refuses all treatment. what do you do?

- A. restrain him and treat

18. A patient opens his eyes to pain, withdraws to painful stimulus and is unable to answer any questions. What is his GCS?

- A. 7-9
- B. 10-12
- C. 3-5
- D. 13-15

19. An old man who suddenly collapsed was unconscious for three minutes following which he recovered fully. 5 ECG rhythm strips given. Which could possibly explain his situation?

- A. 1st deg. HB
- B. 2nd deg HB
- C. VF
- D. Complete HB
- D. LBBB

20. One ECG which has digitalis effect on it. DX?

(I tell you it is not easy to pick up the ECG's. Even if you know all the points and know how it looks like, they show you ECGs which hardly resemble the copybook description. So, look at as many real ECG's as you can.)

21. That old disturbing question on drug combinations causing anuria:

- A. Ramipril, NSAID and frusemide
- B. Simvastatin, NSAID and frusemide
- C. Ramipril, NSAID and slow IV K+

22. A violent patient is most dangerous to:

- A. nurses
- B. doctors
- C. relatives
- D. carers

My ans: A

23. A typical ques: Pic of anterior dislocation of shoulder. Where will be the cutaneous anaesthesia?

On the lateral aspect of deltoid

(I think the one who was the least serious about the exam, could even manage to get this one pinned.)

24. What is the lymphatic drainage of anal canal below dentate line?

- A. Sup. ing. nodes
- B. deep ing. nodes

25. A typical CXR of lobar consolidation. What is the org?

- A. strep pneumoniae

26. A child came with pallor, drooling of saliva and stridor. What will be your initial management?

- A. Admit to hospital
- B. Give O2
- C. Give antibiotics
- D. Do cricothyriodotomy

(note: the option of intubation was not there!!)

26. Another old authentic typical ques.: A burn patient with soot in the throat and singeing of nasal hair etc etc. Mn?

My ans: intubate

27. A man came with ipsilateral horner's syn., cerebellar S/S, dissociated sensory loss. (I could diagnose the case as having lateral medullary syndrome). which artery is involved?

- A. Ant communicating artery
- B. Post. cerebral artery
- C. Post inf. cerebellar artery
- d. ant. spinal artery

28. What is the mechanism of TIA when there is carotid stenosis?

- A. Embolism from the artery
- B, transient spasmodic occlusion of the artery
- C. Transient hge following increase in carotid artery pressure

My ans: B not sure though

29. Another repeated ques. (and confusing as well!!): Which org does not cause lung abscess"

- A. Staph aureus
- B. P. carinii
- C. M. pneumoniae
- D. M. TB

30. A man fell from height and was complaining low back pain. no other abnormality. What is the inv you do?

- A. X ray spine
- B. MRI spine
- C. CT spine
- D. Nothing needed

31. S/S of thyrotoxicosis: (I read this topic very carefully, but that did not help to avoid confusion in the hall. they are so cheeky!!!)

- A. coarse tremor
- B. Wasting of the small muscles of hand
- C. Narrowing pulse pressure
- D. widening of pulse pressure

32. a child came shortly after birth when there was a murmur heard at the left sternal border. This was systolic in timing. 3 months later he was lying down in hospital bed with URTI and there was no murmur. What could be the murmur?

My ans: venous hum

33. A child came with a systolic murmur which radiated to the back and to the axilla. Femoral pulse was weak. Dx?

- A. CoA
- B. VSD
- C. AS

34. Most common cause of intestinal obstruction in Australian community? (I think this was the only ques I found from the AMCQ book that everybody reads so intently!!)

35. A child came with pain and redness and swelling of one eye. He had fever and was (probably) vomiting. I could diagnosis it as orbital cellulitis. Mn?

- A. Ceftriaxon IV
- B. Ampicillin + Gentamicin IV
- C. Cefuroxime + metronidazole

36. Intense photophobia, pain. Pupillary reaction was normal. Dx?

- a. acute glaucoma
- b. iritis
- c. conjunctivitis

My ans: B, not sure

37. Another straightforward ques on iritis: pain, photophobia, hazy cornea, injected conjunctiva etc. Dx?

38. CSF reading showed as following:

Lymphocyte: 12\*10<sup>6</sup>

RBC 256\*10<sup>5</sup>

Glucose normal

prot. increased.

the pt had mild neck stiffness.

DX?

- a. TB
- b. Viral
- c. SAH

39. A woman came at 17 weeks of pg with lab reports showing that there is a 1:50 chance of getting a Down's syndrome baby. She does not want a Down baby. She asking for your management. what do you do?

- A. terminate
- B. do amniocentesis
- C. do usg to exclude Down's
- D. reassure

40. Best way to measure the EDD?

- A. 8 wk clinical ex
- B. 8 wk USG
- C. 18 wk Clinical ex
- D. 18 wk USG?
- E. Late trimester uterine height

(pretty straightforward, isn't it?)

41. A woman came G1P2 with previous delivery of a 4200 gm baby at 42 wks with shoulder dystocia. what do you do this time?

- A. Induce at 38 wks
- B. Induce prematurely
- C. do x-ray pelvimetry at term
- D. CS

42. regarding shoulder dystocia, which is correct?

- A. It is not assoc. with maternal DM
- B. Arrest occurs at pelvic inlet
- C. Increased possibility if epidural anaesthesia given
- D. Most cases can be resolved by hyperflexing the fetal thighs onto the abdomen.
- E Erb's palsy (C8-T1) is a complication

all i know is the root value for Erb's palsy given was wrong.

43. An 18 yo girl came to you for contraceptive advice. she has decided to commence on sexual activity but has not yet chosen her partner. what advice do you give her?

- A. CoC
- B. IUCD
- C. CoC + Condom
- D. barrier methods

my ans: C

44. A mother of two child comes to you for contraceptive advice. You prescribe microgynon 30. She again comes and tells you that she experiences bleeding twice a month. one with 2 days duration and another for 5 days. what will be your next step?

my ans: Continue microgynon 30

45. an incidentaloma was found on one of the adrenals which measured 5 mm. What do you do?

- A. ignore
- B. ask to come 6 wk later
- c. ask to come 6 months later

46. A picture of a man protruding his tongue. It showed wasting on the right side. What will be correct for this.

- A. Left sided lesion and tongue veers to left
- B. left lesion-tongue veers to right
- C. right lesion and tongue veers to right
- D. right lesion and tongue veers to left

47. An x-ray of large gut showing obstruction. Cause?

I thought adhesion. but I can bet that was not from Anthology.

48. When two rescuers available, what is true regarding CPR?

- A. 15:2 should be the compression rate
- B. response should be checked every 2 min
- C. chest compression should be on mid chest
- D. There should be 2.5 cm chest compression each time.

I wrote A (as was in Murtagh. But heard afterwards that recent protocol has changed -pls. check)

50. An infant was brought who was vomiting from birth. He was pale, dehydrated and not gaining weight. What is most likely to find?

- A. Lump
- B. Distension
- C. Anuria

51. A COPD pt was administered O<sub>2</sub>. After sometime he was found unconscious. What could be the blood picture like?

- A. PaCO<sub>2</sub> 100 mmHg, PaO<sub>2</sub> 82mmHg, PH 7.22
- A. PaCO<sub>2</sub> 75 mmHg, PaO<sub>2</sub> 72mmHg, PH 7.32
- A. PaCO<sub>2</sub> 28 mmHg, PaO<sub>2</sub> 100mmHg, PH 7.52
- A. PaCO<sub>2</sub> 45 mmHg, PaO<sub>2</sub> 50mmHg, PH 7.22

some General advice (or experience sharing in that sense:)

1. it is no joke out there. If you don't have enough hospital experience, don't simply take a chance. Get prepared.
2. The trend has changed. AMCQ and Anthology ain't gonna be enough. Don't rely on them too much. but don't neglect them either.
3. Do previous ques. My seniors advised me to do that. but some said there isn't much repeat from prev. ques. I didn't do them too well. Even if you don't get repeats, you'd get questions from those topics. So.....don't experiment!!! just work out those previes.
4. I got at least a dozen ECG's. It pays off to prepare for them. Look at hospital tracings, not the copybook ones. they don't help.
5. I had a few pictorial questions. But 80% of them (or, I guess even more!!!) were unseen. Alas! Anthology!!!
6. Do OHCM and Murtagh. They are the key books. Do Hull as well, but selected chapters only. If you have time, go to the other books.

And at last, please pray for all of us who sat march 2007. You have at least one friend amongst them.

for more, write to me: [doctoramit27@yahoo.com](mailto:doctoramit27@yahoo.com)

.Which of the following conditions is not associated with erythema nodosum

A, pneumonia b. rheumatic fever c. yersenia d. sarcoidosis

2. a patient with parotid carcinoma will have which of the following

a. drooping of lower eyelid b. drooping of the angle of mouth

c ? d?

3. a picture of a man with the tongue deviated to right. The question was which side is the lesion and to which side is the tongue deviated.

4. a man with difficulty in extending the wrist and fingers. All other movement and sensations are normal. Reflexes normal. What is the lesion?

- a.radial n 2.ulnar n 3.median n 2.posterior interosseous nerve
- 5.condition which typically produce profuse watery discharge per rectum to the level to produce electrolyte imbalance.  
a.colonic polyp b. pelvic abscess c.carcinoma.
- 6.in a study the mean of the systolic BP of the patients under the study was 115.standard deviation was 15.this means that 95% of the patients under the study had a BP between  
a.100-130 b.85-145 c.90-100
- 7.coma scale
- 8.a lady with history of pain and stiffness of joints for a few weeks.while playing golf she had sudden onset of pain and swelling in calf.what is the diagnosis  
a.ruptured popliteal bursa b.spontaneous haematoma c.achilles tendonitis
- 9.which is not a feature of temporal arthritis.  
a.amyotrophic lateral sclerosis b.headache c.iritis d.shoulder muscle pain
- 10.cause of TIA in carotid stenosis
- 11.cause of amaurosis fugax  
a.temporal arteritis b.carotid stenosis c.infarct
- 12.picture. funduscopy .which is the likely lesion
- 13.the best method of diagnosing the exact date of gestation.
- 15 a child presented with undescended testis at 6 weeks. What will you do  
a.do an immediate orchidopexy  
b. wait till 4 years and then do orchidopexy  
c. encourage the mother to massage the inguinal region to 'milk down' the testis and review after 2 months  
d. review after 6 months
- 16.undescended testis is most frequently associated with  
a.neoplasm b.inguinal hernia c.torsion
- 17.picture of cellulites of leg. Treatment
- 18.a man was treated for cellulites of leg with antibiotics. After few days he presented with hypotension and tachycardia.his leg was dusky in colour and crepitus was present.what is the immediate management.  
a.continue antibiotics  
b.wound debridement  
c.hyperbaric oxygen  
d.antitoxin
- 19.picture of chronic venous ulcer. Management.
- 20.a 4 year old child with lacerated wound after falling on garden bed. He has taken dtpa at 2 and 4 months. After that no vaccination was given. What will you do  
a.give antibiotics b.give immunoglobulins c.give dtpa and Ig  
d.dtpa and booster after 2 months e.give dtpa
- 21.management of severe compound fracture of tibia and fibula.
- 22.a woman with pain and stiffness of metacarpophalangeal and proximal interphalangeal joints. She has malar rash. What is the initial management  
a.NSAID b.steroids c.methotrexate
- 23.a patient with pain and swelling around the knee. Aspirated fluid (microscopy) contains neutrophils. No organisms or crystal found. Diagnosis?  
a.septic arthritis b.gout c.rheumatoid arthritis d? e?
- 24.two darkish brown spots was found on the leg of a lady on examination. She did not notice any change in appearance of those spots for the past years. What is the diagnosis  
a.benign junctional naevi b.melanoma c.???spots d?
- 25.a smoker with an indurated ulcer on the tongue. The ulcer margins are white. He has caries tooth.

a.sq carcinoma of the tongue

b syphilitic ulcer

26 typical presentation of reiters syn.

27.which of the following drug combinations are contraindicated?

(the drug names were given and I don't remember the choices. I think the answer was SSRI and TCA)

28.a patient with anal fistula. Internal opening in rectum and external opening at 5 o'clock position.what is the most common underlying lesion

a.crohn's disease b.anal gland infection

29.a patient given radiotherapy for ca cervix. Now presents with bloody diarrhea.

a.proctitis b.rectovaginal fistula c.metastatic carcinoma

30.lower part of the anal canal drains into which lymph nodes

a.superficial inguinal b.deep inguinal c.paraaortic

31.a patient presents with severe epigastric pain, vomiting and hypotension.

a.pancreatitis b.cholecystitis c.perforated duodenal ulcer

32.ultrasonography is best used for the diagnosis of which condition in a jaundiced patient.

a.gall stones b dilated bileduct c.cholecystitis d.ca liver

33.a pregnant lady presents at 26 weeks with hydrops fetalis. Which investigation will help you in the management

a.coomb's test (?? Direct or indirect) b.IgM and Ig G for parvovirus

(there were 3 questions of hydrops fetalis. Sorry I don't remember them)

34.treatment for mastalgia

a.danasol b progesterone c.ocp

35.which if the most important factor for osteoporosis in women

a.menopause in 40 years

b.BMI <20 C.?

36. a17 year old girl presented with amenorrhea. Her height and physical appearance are normal for her age. What will be the cause

a. mullerian agenesis b.ovarian agenesis c.ovarian dysgenesis

c.pituitary failure d.hypothalamic dysfunction

37.(long question and choices) the time interval between onset of growth spurt and menarche

38. CTG for 30 min given heart rate 145, baseline variability 5bpm, no acceleration, no decelerations,

a.normal a.abnormality due to fetal sleep c.abnormal and requires immediate cs. d. abnormal and scalp ph. e.some abnormality present and requires close observation.

39.a long question about when to start folic acid and how long to take it to prevent neural tube defect.

40.most accurate method of diagnosing down's syndrome

a.maternal serum examination at 16 weeks

b.maternal seum and nuchal thickness at 11 weeks

c?

41.what is the most important adverse effect of GA over epidural anaesthesia in normal labour?

a.maternal hypotension

b.thiopentone has direct respiratory depressant action on foetus

c.increase bleeding

42.most common site of insertion of intercostals tube in pneumothorax

43.most important diagnostic feature of achalasia

44.the most common presenting feature of a patient with duodenal stricture secondary to duodenal ulcer.

- a.vomting one hour after each meal
  - b.vomioting of large amounts 2-3 times a day
  - c.? d?
- 45.all of the following occurs in the first few days of neonatal life except.
- a.increase in right ventricular pressure
  - b.closure of ductus venoses
  - c.closure of ductus arterioses
  - d.decreased flow through foramen ovale
- 46.what is true about portwine stain
- a.will regress spontaneously b.will not regress spontaneously and might increase in later life
  - c. treat immediatly because of high potential to turn malignant
  - d?
- 47.which of the following conditions doesnt cause neck stiffness
- a.meningitis b.pneumonia c.tetanus d.botulism e.SAH
48. PICTURE of an adult man. Center of the umbilicus is red. Erythema of the surrounding skin.
- A.omphalitis B.obstructed paraumbilical hernia c.necrotising faciitis
  - d.herpes zoster e.?
- 49.a drug was introduced which decreased the fatality of the disease but doesnt bring about complete cure of the disease.this means
- a. incidence of the disease decrease. B.prevalence decrease
  - incidence increase prevalence increase. Both increase.

# 2000

AMC RECALL EXAM OCTOBER 2000

## MEDICINE

1. Hepatitis C in Australia mainly spread by

- 1. heterosexual
- 2. homosexual
- 3. intravenous drug users
- 4.blood products
- 5.

2. Anterior uveities most commonly seen in

- 1. Rheumatoid Arthritis
- 2. SLE
- 3. Ankylosing spondilitis
- 4. .

3. Women presented with bleeding. She has a family history of bleeding (brother, father).

- 1. Haemophylia
- 2. Deficiency XII
- 3. Von Willebrand's disease
- 4. .
- 5. .Christmas disease

4. Patient – pulmonary embolism

1. cyanosis
2. tachycardia
3. hypotension
4. haemoptysis
- 5.

5. Granuloma Anulare

1. premalignant
2. itch
3. irregular raised edge
4. oral antifungal treatment
- 5.

6. HLA typing most useful in

1. Renal Transplantations
2. Cardiac transplantations
3. .
4. .
5. .

6. For organ donation how to diagnose brain death

1. No EEG recording

- 2.
- 3.
- 4.
- 5.

7. Myelofibrosis

1. tear drop cells
2. .
3. .
4. .
5. .

8. Young man – Ferritin slightly elevated,

1. Acute blood loss
2. Haemoglobinopathy
3. .
4. .
5. .

9. Which does not transmit HIV

1. Cryoprecipitate
2. .
3. .
4. .
5. .

10. Woman taking progesterone complains of a headache in the afternoon. Paracetamol did not help.

1. stop progesterone
2. start ergotamine

3. Relaxation method

4. .

5. .

11. Numbness of mouth . which nerve leision

1. VII

2. V

3. II

4. .

5. .

12.

12. Woman (old) , history of tremor- increase when reach for an object. Treatment

1. propranolol

2. levedopa and carbidopa

3. .

4. .

5. .

13. Parkinsonism

1. loss of postural reflexes

2. .

3. .

4. .

5. .

14. women present with

1. cervical spondilosis

2. .

3. .

4. .

5. .

15. Which arthritis heals completely

1. Rheumatic fever

2. Rheumatiod arthritis

3. .

4. .

5. .

16. What type of renal calculi seen if urine is acidic

1. oxalate

2. uric acid

3. .

4. .

5. .

17. How to confirm gout

1. check synovial fluid for crystals

2. .

3. .

4. .

5. .

18. Asthmatic patient – which is not a proper management

1. taking prednisolone for every attack
- 2.
- 3.
- 4.
- 5.

19. Red painful eye dilated pupil

1. Glucoma
2. .
3. .
4. .
5. .

20. bulging eardrum –what is true

1. spontaneous rupture relives pain.
2. .
3. .
4. .
5. .

21. Spont. Pneumothorax

1. needle aspiration
2. .
3. .
4. .
5. .

22. Patient had a fall from a roof. BP –reduced, RR- increased

- 1.
- 2.
- 3.
- 4.
- 5.

23. In duodenal ulcer – not seen

1. Anorexia
2. .
3. .
4. .
5. .

24. cellulitis

1. group A streptococci
2. .
3. .
4. .
5. .

25. SLE

1. > 90% patients has DNA antibodies
2. > 50% has renal involvement
3. .
4. .

5. .

26. Patient with Rheumatic fever developed a new murmur- lower end of the sternum

1. Aortic regurgitation
2. Pulmonary regurgitation
3. Rupture of
- 4.
- 5.

27. Patient with a carotid stenosis > 80%

1. with out surgery her chances of having a stroke in next 3 months is more
2. .
3. .
4. .
5. .

28. Phenytoin and warrfarin

1. if serum level –half of the needed therapeutic dose then double the dose
2. .
3. .
4. .
5. .

29. Hypercalcemia occurs eccept

1. chronic pancreatitis
2. .
3. .
4. .
5. .

30. In Australia –why women live longer than men

1. genetics and biological reasons
2. use of more medicare
3. men are more violent
4. .
5. .

31. In Digoxin toxicity seen eccept

1. nodular rytham
2. ventricular trachycardia
3. Atrial tachycardia
4. .
5. .

32. woman with R haemiparesis and loss of vision in the L eye

1. left anterior
2. left middle
4. middle cerebral

- 4.
- 5.

33. 70 years old woman –with 3 week history of confusion. Increased Phosphate, increased calcium.

1. paget disease

2. renal failure

3. .

4. .

5. .

34. Pituitary tumor

1. Bitemporal hemianopia

2. .

3. .

4. .

5. .

35. Emphysema – not true

1.

2.

3.

4.

5.

36. ITP

1. Extensor surfases

2. Splenomegaly

3. Rash

4. Haemorrhage –fundoscopy

5. .

37. Mycoplasma Pneumonia

1. wrong antibiotic

2. .

3. .

4. .

5. .

38. Pressure gradient more than 50

1. you do surgery

2. .

3. .

4. .

5. .

39. Obstructive cardiomyopathy . RX

1.

2.

3.

4.

5.

40. All causing hypoglycemia except

1. Prolactin inducing tumour

2. .

3. .
4. .
5. .

41. Meningitis complication except

1. Cephalohematoma
2. .
3. .
4. .
5. .

42. 34 year old women got 4-5 patches on the head

1. scraping under KOH
2. .
3. .
4. .
5. .

43. Pleural effusion in TB

1. lymphocytosis
2. reduced sugar
3. transudate
4. .
5. .

44. man developed a rash on palms and the soles . Anal -----

1. second syphilis
2. yaws
3. .
4. .
5. .

45. Atopic eczema except

1. use soap and water
2. .
3. .
4. .
5. .

46. Pulmonary Embolism

1. Tachypnoea
2. Cyanosis
3. Hypotension
4. .
5. .

47. In gross Ascites

1. cannot palpate liver
2. .
3. .
4. .
5. .

48. In kernicterus

1. Increased in total bilirubin
2. Increased in unconjugated bilirubin
3. Increased in conjugated bilirubin
4. .
5. ,

49. Obstructive cardiomyopathy RX

- 1.
  - 2.
  - 3.
  - 4.
  - 5.
50. All causing hypoglycemia except

1. prolactin inducing tumour
2. .
3. .
4. .
5. .

51. Meningitis complication except

1. cephalohaematoma
2. .
3. .
4. .
5. .

52. L5 L4 affected

1. absent knee jerk
2. absent ankle jerk
- 3.
- 4.
- 5.

53. Acromegaly Ix

1. Oral and GH
2. .
3. .
4. .
5. .

54. All the following anomalies are corrected surgically except

1. Fallot's tetralogy
2. patent ductus
3. VSD
4. Transposition of great vessels
5. .

55. Man present with a ureteric colic and brought a sample of urine which contained blood and asks for pethidine. On examination NAD. Urine sample contains blood.

Rx.

1. take a another urine sample for blood

2. give him pethidine

3. .

4. .

5. .

56. patient presents with (night time) paresthesia and waisting of thenar muscles

1. carpal tunnel syndrome

2. ulnar nerve

3. .

4. .

5. .

57. to reduce staph. Infections

1. Rx all the carries

2. .

3. .

4. .

5. .

58. ACE inhibitors

1.increase afterload

2. increase preload

4. decrease afterload

5. decrease preload

5.

59. WOF cross the blood brain barrier

1. lipid soluble

2. low molecules

3. .

4. .

5. .

60. Patient Rx with warfarin now present with loss of consciousness.

1. extradural haematoma

2. subdural haematoma

3. .

4. .

5. .

61. Vascular dementia

1.

2.

3.

4.

5.

62. Diabetic patient taking morning and evening doses. He wakes up at night with sweating

1. reduce evening dose

2. .

3. .

4. .

5. .

63. woman with ulcerative colitis

1. SCLEROSING CHOLANGITIS

2.

3.

4.

5.

6. Women presented with bleeding. She has a family history of bleeding (brother, father).

6. Haemophilia

7. Deficiency XII

8. Von Willbird

9. .

10. .Christmas disease

64. same pt. going for surgery give

1. give factor VIII

2.

3.

4.

5.

65. "De ja vu" experience in

1.

2.

3.

4.

5.

#### Paediatrics

66. (overweight )Boy aged 12 years presents with a limp.

1. Perths disease

2. Slipped upper femoral epiphysis

3. .

4. .

5. .

67. Most common cause of bleeding in childhood

1. anal fissure

2. hemorrhoids

3. .

4. .

5. .

68. Child present with morning vomiting . She also have headaches.

1. Migraine
2. Medulloblastoma
3. .
4. .
5. .

69. Iron deficiency anaemia in a 4 year old most common cause

1. diet mainly milk
2. increased consumption of fruit juices
3. .
4. .
5. .

70. Child (7 years) presents with a high temperature and with a sore throat. He cannot swallow.

1. Intubation
2. Antibiotics
3. .
4. .

71. What age a child can talk with short sentences and follow simple commands.

1. 18 months
2. 2 years
3. 3 years
4. .
5. .

72. Increased HBS2 found in

1. Iron deficiency anaemia
2. B thalassemia
3. Sickle cell
4. .
5. .

73. Febrile convulsions

1. last less than 15 min
2. 30% family history
3. .
4. .
5. .

74. 7 year old boy refused to go to school

1. separation anxiety
2. sign of mental retardation
3. .
4. .
5. .

75. Speech delay after a period normal speech ,. Other aspects of development were normal.

1. deafness
2. mental retardation

3. autistic

4. .

5. .

76. Child with a swollen eye lid. Eye movements are ok.

1. B heam.strep. A

2. B heam.strep. B

3. .

4. .

5. .

77. what is dangerous

1.rash on buttocks

2.bruise on the cheek

3.

4.

5.

78. cerebral palsy

1.

2.

3.

4.

5.

79. Pain in the knee

1. acute osteomyelitis

2. .

3. .

4. .

5. .

80. 3 months old baby with purulent discharge from eye. Increased neutrophils.

1.gonococcal

2.duct stenosis

3.chlamydia

4.

5.

81. In a 12 month old which spontaneously closures

1.VSD

2.ASD

3.

4.

82. 2 year old child marked failure to thrive and history of dyspnoea and cough and wheeze.

1. sweat chloride

2. antigliadin antibodies

3. .

4. .

5. .

83. Lymphadenopathy and fever

1. Infectious mononucleosis

2. .
3. .
4. .
5. .

84. Haemophilia

- 1.
- 2.
- 3.
- 4.
- 5.

85. Pain , pallor, screaming

1. Intussuception
2. .
3. .
4. .
5. .

86. 11 year old with torsion of the testes

1. surgical exploration
- 2.
- 3.
- 4.
- 5.

87. child with a foreign body in her nose

1. removal under GA
- 2.
- 3.
- 4.
- 5.

88. History of vomiting

1. pyloric stenosis
2. .
3. .
4. .
5. .

89. When mother comes girl was watching the TV

1. panic attack
2. .
3. .
4. .
5. .

90. ---month old don't babble

1. Audiogramme
2. .
3. .
4. .
5. .

91. Lactating women eating a well balanced diet. What is the deficient

1. Vit c
2. Vit K
3. Vit D
- 4.
- 5.

93. Most common cause of loss of consciousness except

1. petit mal
- 2.
- 3.
- 4.
- 5.

94. Child with 20% of burn -Rx. Except

1. skin graft
2. .
3. .
4. .
5. .

94. Serous otitis media

- 1.
- 2.
- 3.
- 4.
- 5.

SURGERY

1. After appendectomy. There is a swelling. Rx.

1. Remove the sutures
2. .
3. .
4. .
5. .

2. Picture varicocele

3. Picture Pyloric obstruction-(Xray). Hx of vomiting. Initial Rx.

1. .9% Nacl
2. Hartman Solution
3. 5% dextrose
4. 5% dextrose and N.saline

5. Same patient (Q. 3) how much K+ need for the next 24 h

1. less than 50 mmol
2. more than 50 mmol
3. 50 mmol
4. .
5. .

6. Picture Xray of the hand- Rx scaphoid fracture

- 1.
- 2.
- 3.
- 4.
- 5.

7. Complication of colles fracture

1. non union
2. mal union
3. .
4. .
5. .

8. Picture –leg- blue black –discoloration

1. Venous hypertention
2. Clostridium Welchii
3. .
4. .
5. .

9. Pt. admitted with a crush injury to his lower abdomen and pelvis. On examination he has fresh blood at the external urethral meatus.

1. Pass a catheter
2. Excretion urethrogram
3. Arrange urethroscopy
4. Urethrography
5. .

9. Picture with a mammogram and ultrasound of the breast.

1. cyst
2. .
3. .
4. .
5. .

10. which one of the following associated with a family history

1. Follicular carcinoma
2. Medullary carcinoma
3. Thyroiditis
4. .
5. .

11. Patient presents with severe vomiting – with emphysema. Cause

1. esophageal rupture
2. .
3. .
4. .
5. .

12. Picture- woman with a red patch on her face

1. haemangioma

2. teleangiectasis
3. .
4. .
5. .

13. extra orbital cellulitis.

1. flucloxacillin
2. .
3. .
4. .
5. .

14. Hx. Of a snake bite. On examination a scratch mark only. No other symptoms. Rx.

1. Observe
2. .
3. .
4. .
5. .

15. Gas Gangrene

- 1.
- 2.
- 3.
- 4.
- 5.

16. hemiplegic man with incontinence Rx.

1. insert a permanent catheter.
2. .
3. .
4. .
5. .

17. A man with uncomplicated first degree haemorrhoids

1. High fiber diet
2. Emergency surgery

GYN/OBS

1. Pregnant women – how to diagnose that she will have a premature delivery after another 4 weeks.

1. cervix measure 3.8 cm long
2. external os one finger open but internal os closed
3. cervix firm and 5 cm long
4. .
5. .

2. Twin pregnancy

- 1.
- 2.
- 3.
- 4.
- 5.

3. Pregnant woman aborting at 17 weeks. Least likely

1. ectopic pregnancy
2. .
3. .
4. .
5. .

4. woman –36 weeks preg. Complains of abdominal pain. Pulse rate increased. What is not seen

1. BP increased
2. .
3. .
4. .
5. .

6. FH rate –CTG

1. less than 5 variation
2. .
3. .
4. .
5. .

6. 16 yr old girl . with breast budding sparse axillary, pubic hair. Which investigation is least likely

1. CT-head
2. Pelvic ultrasound
3. FSH
4. LH
5. Prolactin level

7. Ovarian stimulating is least likely

1. Human menopausal hormone
2. HCG
3. Clomiphene
4. GH analogue
5. GnRh analogue

8. Couple want to get pregnant. Best way for them to find the time of ovulation

1. progest
2. LH urine level every day
3. Basal temperature
4. .
5. .

9. What is the best way to prevent cervical cancer in Australia

1. increase colposcopic clinic and Rx CIN I
2. cervical smear more available
3. develop a vaccine against human papilloma virus
4. .
5. .

10. Puerperal psychosis

1. >50% get
2. .

- 3. .
- 4. .
- 5. .

11. Endometrial ablation. Except

- 1. Eostrogen alone therapy not enough
- 2. .
- 3. .
- 4. .
- 5. .

12. PV bleeding for 2 days started OC pills.

- 1. continue oc
- 2. .
- 3. .
- 4. .
- 5. .

13. Girl -high prolactin level. TSH normal. Found pituitary adenoma size 1.8 cm 3 cm extending to chiazma. What is your first initial management

- 1. bromocriptine
- 2. .
- 3. .
- 4. .
- 5. .

14. 68 yr. Woman recently started on warfarin and Pv bleeding. All true except

- 1. bleeding because cervical cancer
- 2. .
- 3. .
- 4. .
- 5. .

15. Twin pregnancy- should not do

- 1. External cephalic version
- 2. .
- 3. .
- 4. .
- 5. .

16. In a older women malodour discharge- all true except

- 1. foreign body
- 2. .
- 3. .
- 4. .
- 5. .

17. not true-

- 1. ACE should not give in pregnancy
- 2. .
- 3. .
- 4. .
- 5. .

18. 34/52 preg. All Rx true except

1. Corticosteroid should be given
2. .
3. .
4. .
5. .

19. Breast feeding and OCP

- 1.
- 2.
- 3.
- 4.
- 5.

20. Woman with Cystic fibrosis want to get pregnant what advise can be given

1. can deliver
2. should not encourage to get pregnant
- 3.
- 4.
- 5.

21. Recurrent Candidiasis. Which drug is not useful.

1. Metronidazole
2. .
3. .
4. .
5. .

22. In which case IVF useful – all true except

- 1.
- 2.
- 3.
- 4.
- 5.

23. OCP –which effect is seen with progesterone only pill as compared with eostrogen

1. low density lipid .....
2. .
3. .
4. .

24. woman pregnant with her 2nd child . 1st pregnancy baby bw 4.5 kg and during the birh fractured the clavicle. Ix.

1. 3hr glucose tolerance test
2. test urine for glucose. Ketone
3. .
4. .
5. .

25. Painless dilatation of bladder

1. chronic retention
2. pregnancy
3. .
4. .
5. .

26. pregnant woman eating a balanced diet- what supplement need

1. Zn
2. Ca
3. Vit c
4. .
5. None of the above

27. In Ectopic pregnancy rupture at 14/52 likely in located in

1. .isthmus
2. .cervix
3. .abdomen

28. Mammography screening program-

1. detect small cancers early
2. .
3. .
4. .
5. .

29. Hypertensive patient well controlled with ACE. She wanted to get pregnant. What advise you would give

1. Continue ACE
2. Rx with methyldopa and diuretics
3. .
4. .
5. .

30. What is the contraceptive pill for a woman who takes phenytoin

1. Microgynon 30
2. Microgynon 50
3. Diane
- 4.
- 5.

Psychiatry

1. What is "TESTAMENTARY CAPACITY"

1. ABLE TO MAKE A WILL
2. Able to give evidence in a court
3. .
4. .
5. .

2. Couple wants to get pregnant. But concerned because grandmother has bipolar disorder. What advise

1. not to get pregnant
2. Refer to genetic study
3. <10%
4. .
5. .

3. Dejavu seen in temporal lobe epilepsy

- 1.
- 2.

- 3.
- 4.
- 5.

4. Obsessive compulsive disorder associated with

1. hypochondriasis
2. paranoid
3. dementia
4. .
5. .

5. Social phobia

- 1.
- 2.
- 3.
- 4.
- 5.

6. Serotonin Syndrome

- 1.
- 2.
- 3.
- 4.
- 5.

7. man wears women's clothes

1. transsexualism
2. .
3. .
4. .
5. .

8. Man presents with impotence what is least likely to be given as an initial treatment

1. Viagra
2. .
3. .
4. .
5. .

9. Negative symptoms in schizophrenia

1. blunted affect
2. catatonia
3. delusion
4. .
5. .

10. Cannabis

1. increases with ingestion
2. less likely to have withdrawal symptoms
3. .
4. .
5. .

11. HIV Dementia

1. toxoplasmosis
2. .lymphomaa
3. .
4. .
5. .

12. Woman acting and appearance – seductive

1. histrionic personality
2. hypomania
3. .
4. .
5. .

13. Vascular Dementia

- 1.
- 2.
- 3.
- 4.

14. Bulimia nervosa

- 1.
- 2.
- 3.
- 4.
- 5.

15 ADHD –cause

1. not known
- 2.

15. Maternal blue

1. > 50%

16. For new antidepressant drug trial what is required

1. permission and ethical clearance
2. .

17. difference between psychosis

1. sensory loss
2. .

MCQ Recall Paper October 2000

MEDICINE

1. All of the following are true about duodenal ulcer, EXCEPT:

- a) Hunger pain
- b) Loss of appetite
- c) Weight gain
- d) Relapse and remissions
- e) Reversed by antacids

2. A patient presents with a history of 2 episodes of Left eye blindness, Right hemiplegia, and transient speech difficulty, which lasted 20 minutes each. Which is the most possible site of obstruction?

- a) Left middle cerebral artery
- b) Right middle cerebral artery
- c) Left anterior cerebral artery
- d) Right anterior cerebral artery
- e) Posterior cerebral artery

3. In which disease is anterior uveitis most commonly associated?

- a) Reiter's disease
- b) Ankylosing spondylitis
- c) Syphilis
- d) Gout
- e) Rheumatoid arthritis

4. Which is the most common mode of transmission in Hepatitis C infection?

- a) IV drug users
- b) Homosexual active males
- c) Heterosexual
- d) Vertical Transmission
- e) ?

5. Mycoplasma pneumoniae infection has which of the following characteristics, EXCEPT:

- a) Cough is unusual
- b) Pleural effusion is a characteristic feature
- c) ESR is always high
- d) Very severe headache
- e) Responds to tetracycline treatment

6. A patient present with Haematuria. About 24 hours ago he had a sore throat. Which is the most likely diagnosis?

- a) IgA nephropathy
- b) Post-streptococcal glomerulonephritis
- c) Membranous glomerulonephritis
- d) Nephrotic syndrome
- e) Acute pyelonephritis
- f) Acute pyelonephritis

7. Which of the following is true about Tuberculous Pleural Effusion ?

- a) Blood stained always
- b) Acid-fast bacilli are always found
- c) Most likely cells are lymphocytes
- d) It is transudate
- e) Glucose is normal or decreased

8. Acute attacks of asthma can best be treated with:

- a) Inhaled Salbutamol
- b) Oral steroids
- c) Inhaled steroids
- d) Oral theophylline
- e) PEFV measured at home

9. A young man present with Pleuritic chest pain and cough. On percussion there is dullness over the right base. There are no breath sounds in the right lower zone, but

bronchial breathing is noted in the right middle zone. Which is the most likely diagnosis?

- a) Right lower lobe consolidation
- b) Right lower lobe collapse
- c) Pleural effusion
- d) Right pneumothorax
- e) Left tension pneumothorax

10. All of the following are true about Emphysema, EXCEPT:

- a) Clubbing is present
- b) Distant heart sounds
- c) Diffusion capacity is decreased
- d) Total lung capacity is increased
- e) Hyperinflation of the lungs

11. Photosensitivity is present in:

- a) Amiodarone treatment
- b) SLE
- c) Niacin deficiency
- d) Thiamine deficiency
- e) ?

12. In a patient with massive ascites, all are possible findings except:

- a) Hepatomegaly
- b) Shifting dullness
- c) Eversion of umbilicus
- d) Dullness to percussion
- e) ?

13. Which of the following drugs can give Nephrotoxicity?

- a) Gentamycin
- b) Gold
- c) Digoxin
- d) Sulphonamides
- e) Mefanamic acid

14. A 65 year old woman became confused. Laboratory findings were; Calcium 4.8, increased Calciuria, decreased Phosphate. Which is the most likely diagnosis?

- a) Malignancy (osteolytic metastases)
- b) Primary hyperthyroidism
- c) Idiopathic hypercalcaemia/hypercalciuria
- d) Paget's disease
- e) Multiple myeloma

15. Papillary necrosis is caused mostly by;

- a) Diabetes
- b) Alcohol
- c) Analgesic nephropathy
- d) Medullary sponge kidney
- e) Sickle cell crisis

16. In a patient with acidic urine, which are the most commonly found stones?

- a) Uric acid
- b) Cystine
- c) Calcium oxalates
- d) Calcium carbonate

e) Xanthine

17. In patients with chronic renal failure:

- a) Most patients develop osteoporosis
- b) Bone dystrophy is present
- c) ?
- d) ?
- e) ?

18. In rheumatic fever arthritis, which is the most typical finding?

- a) Heals without deformities
- b) Affects small joints equally as large ones
- c) Is confined to one joint
- d) ?
- e) ?

19. Which of the following drugs most commonly cause prolonged QT interval?

- a) Digoxin
- b) Procainamide
- c) Quinidine
- d) Propranolol
- e) ?

20. A woman presents with dark colour urine, pruritus and jaundice. Blood examination shows a mild increase in alkaline phosphatase, high AST and ALT. Which is the most likely diagnosis?

- a) Viral hepatitis
- b) Acute fatty liver
- c) Cholangitis
- d) Biliary obstruction with cholestasis
- e) Cholecystitis

21. Which of the following is true regarding Phenytoin?

- a) Should be given three times daily
- b) It will decrease the effect of Warfarin
- c) It will increase the effect of OCP
- d) If given in combination with other drugs, the therapeutic dose should be halved
- e) ?

22. Statistically women live longer than men. Which is the reason for this?

- a) Females have a genetic advantage
- b) Women use the medical system more often than men
- c) Men have more stressful jobs than women
- d) Men drive more aggressively
- e) Women have less accidents

23. Treatment of hypertension is a proven factor in preventing:

- a) TIA
- b) Ischaemic stroke
- c) Coronary artery disease
- d) Congestive cardiac failure
- e) Atherosclerosis

24. A patient with CRF and hypertension was dialysed. His BP improved after dialysis but he still had 2 episodes of high blood pressure. Which is now the initial step in your

management?

- a) Decrease protein in his diet
- b) Ideal weight should be reached
- c) Give Frusemide
- d) Give anti-hypertensive therapy prior to dialysis
- e) Give anxiolytics prior to dialysis

25. Hepatitis BV has never been found in which of the following blood products:

- a) Fresh frozen plasma
- b) Cryoprecipitate
- c) Whole blood
- d) Erythrocytes
- e) White blood cells

26. In a woman with splenomegaly, WCC 33,000 and tear drop poikilocytes, which is the most likely diagnosis?

- a) CML
- b) CLL
- c) Hodgkin's disease
- d) Acute lymphoma
- e) Myelofibrosis

27. A woman, whose father and brother are haemophilic, has bleeding tendency. She has a history of haemarthrosis and prolonged bleeding associated with dental procedures. Which is the most likely diagnosis?

- a) Haemophilia
- b) Christmas disease
- c) Von Willebrandt's disease
- d) Factor XII deficiency
- e) Factor IX deficiency

28. Which of the following are true regarding Atopic Eczema?

- a) Soap and water are helpful
- b) It is a contraindication for immunization
- c) Flexure surfaces are commonly involved
- d) Positive family history of asthma and hay fever
- e) Moisturizing agents are helpful

29. Which of the following is a feature of Parkinson's disease?

- a) Loss of postural reflexes
- b) Hyperreflexia
- c) Atactic gait
- d) Resting tremor
- e) Muscle weakness

30. A diabetic patient is taking insulin twice a day. Before breakfast a combination of L/A and S/A and in the evening one dose of L/A. He complains of sweating in the morning. What alteration in insulin doses needs to be done?

- a) Reduce dose of L/A in the morning
- b) Reduce dose of S/A in the morning
- c) Reduce dose of L/A in the evening
- d) Increase dose of L/A in the evening
- e) Increase dose of L/A in the morning

31. Which is the most specific antibody in SLE?

- a) dsDNA
- b) ANA
- c) Anti Ro
- d) Anti La
- e) Anti LKM

32. A 24 year old student complains of 12 days of fever, malaise and sore throat. On examination he has white tonsillar exudates, generalized lymphadenopathy, maculopapular rash on palms and soles and excoriating lesions around the anus. Which is the most likely diagnosis?

- a) Glandular fever
- b) Syphilis
- c) Pemphigus
- d) Stevens Johnson syndrome
- e) ?

33. Which of the following is true regarding granuloma annulare?

- a) Irregular raised margins
- b) Is pre-malignant
- c) Caused by sun exposure
- d) Is autosomal recessive
- e) ?

34. A school teacher presents with patches of hair loss on scalp. Skin of the affected area is shiny. All of the following are possible treatment except:

- a) Nystatin ointment
- b) Metronidazole
- c) Ketoconazole
- d) Griseofulvin
- e) Nystatin cream

35. Which is the most important finding for the diagnosis of gout?

- a) Finding birefringent crystals
- b) Increased neutrophil count
- c) Increased serum uric acid
- d) Increased urinary acid
- e) ?

36. In a patient with T8 pain and spastic paresis of lower limbs, which is the most likely diagnosis:

- a) Herpes zoster
- b) Spinal cord compression
- c) Syringomyelia
- d) Multiple sclerosis
- e) ?

37. Digoxin is indicated in all of the following except:

- a) Atrial fibrillation
- b) Atrial flutter
- c) Atrial tachycardia
- d) Nodal rhythm
- e) SVT due to AV nodal recovery

38. In a 30 year old patient with iron deficiency but no history of bleeding and whose ferritin level is elevated, which is the next investigation?

- a) Gastroscopy
- b) Colonoscopy
- c) Bone Marrow aspiration
- d) Sigmoidoscopy
- e) Haemoglobin electrophoresis

39. An overweight patient has had an episode of bulk diarrhoea with steatorrhoea. He has a history of drinking alcohol for many years. Which of the following is the most useful investigation?

- a) IV pancreatography
- b) Endoscopic pancreatography
- c) Abdominal X-ray
- d) Ultrasound
- e) Faecal fat analysis

40. A young woman who takes oral contraceptive pills, complains of headaches over the last 3 weeks. The frequency of headaches is five days per week. The headaches improve in the afternoon and during the weekend. Which is the most appropriate management?

- a) Stop OCP
- b) Relaxation techniques
- c) Ergotamine
- d) Methysergide
- e) Sumatriptan

41. Which of the following is the commonest organism that gives cellulitis?

- a) Group A streptococcus
- b) Group B streptococcus
- c) Staphylococcus aureus
- d) E Coli
- e) ?

42. All of the following can cause glucose intolerance, except:

- a) Pituitary tumour
- b) Thyrotoxicosis
- c) Acromegaly
- d) Pheochromocytoma
- e) Pancreatitis

43. Which of the following is the most common complication of Infectious Endocarditis?

- a) Mitral stenosis
- b) Rupture of chordae tendineae
- c) Aortic stenosis
- d) Tricuspid stenosis
- e) Aortic regurgitation

44. A woman present with tremor of the hands. Which of the following is correct?

- a) Disappears when she looks at her hands
- b) Treatment of choice is Propranolol
- c) Is present when she is on the phone
- d) Disappears when she sleeps
- e) Benztropine is helpful

45. A 35 year old policeman suffers from ulcerative colitis, and is treated with Sulfasalazine. He drinks 60g of alcohol per day. Laboratory investigations show: serum bilirubin 18mmol/l; increased alkaline phosphatase, GGT and SGOT. The most likely

diagnosis is:

- a) Fatty liver
- b) Alcoholic cirrhosis
- c) Biliary stones
- d) Sclerosing cholangitis
- e) Cholestasis

46. Demential symptoms in an HIV positive patient can be due to all of the following EXCEPT:

- a) AZT side effects
- b) Interferon side effects
- c) Toxoplasmosis infection
- d) AIDS dementia
- e) Non-Hodgkin lymphoma

47. A patient with rheumatoid arthritis on long-term treatment with naproxen, came complaining of fatigability over the past week. Lab analysis shows decreased Hb, Normal MCV, raised TIBC and ferritin. Which is the most appropriate diagnosis?

- a) Anaemic due to blood loss from GIT
- b) Anaemia of the chronic disease
- c) Iron deficiency anaemia
- d) B12 deficiency
- e) ?

48. A lesion of spinal cord at L4/L5 level produces:

- a) Loss of foot dorsiflexion
- b) Absent ankle jerk
- c) Loss of sensation of the medial aspect of calf and thigh
- d) Absent knee jerk
- e) Absence of sensation on the sole of foot

49. The most common cause of neck stiffness is:

- a) Meningitis
- b) Botulism
- c) Phenothiazine toxicity
- d) Tetanus
- e) Pneumonia

50. A patient present with headache and neck stiffness over a 4 week period. All of the following are possible except:

- a) Extradural haematoma
- b) Subdural haematoma
- c) Lumbar puncture should be done
- d) Urgent CT scan should be done
- e) ?

51. Which of the following will decrease the gradient in hypertrophic cardiomyopathy?

- a) Digoxin
- b) Verapamil
- c) ACE inhibitors
- d) Prazosin
- e) Propranolol

52. Which of the following is true regarding aortic stenosis?

- a) Sudden death is possible

- b) Gradient of over 50% requires surgery
- c) Angina suggest coexistent coronary artery disease
- d) Doppler ultrasound is not accurate in diagnosis
- e) Echocardiography may be used for diagnosis

53. A patient present with headache, prominent supra orbital ridges, prognathism, wide teeth spacing, thick spade like hands and seborrhoeic, coarse, oily skin. Which of the following is the best investigation to establish a diagnosis?

- a) Insulin + glucose test
- b) X-ray of the pituitary fossa
- c) Cranial CT scan or MRI scan
- d) Serum T4 + PRL + growth hormone test
- e) Oral glucose tolerance test + GH

54. A pregnant lady present with a widely split S2, cardiomegaly, systolic murmur best heard at pulmonary area and a diastolic murmur in tricuspid area. Which is the most likely diagnosis?

- a) Atrial septal defect
- b) PDA
- c) VSD
- d) Pulmonary stenosis
- e) Aortic stenosis

55. A 45 year old woman about to undergo cholecystectomy, has a history of bleeding tendency, increased bleeding time, but a normal platelet count. Which of the following are indicated prior to surgery?

- a) Vitamin K
- b) Factor VIII concentrate
- c) Fibrinogen
- d) Fresh frozen plasma
- e) ?

56. Which type of bilirubin can cross the blood brain barrier?

- a) Unconjugated
- b) Conjugated
- c) Biliary salts
- d) ?
- e) ?

57. A 28 year old female presented with a history of hypertension. Which of the following tests is best for assessing the structure and function of her kidneys?

- a) IV pyelogram
- b) Renal ultrasound (Doppler)
- c) Renal X-ray
- d) CT scan
- e) MRI

58. In a paraplegic patient suffering from overflow incontinence, which is the best management?

- a) Continuous catheterisation
- b) Suprapubic catheterisation
- c) Intermittent self-catheterisation
- d) Permanent cystostomy

59. A patient present with bilateral temporal hemianopia. Where is the lesion?

- a) Pituitary fossa
- b) Optic chiasm
- c) Parietal lobe
- d) Temporal lobe
- e) Optic nerve

## SURGERY

1. Picture: A young female with a bright red area of rash on her right cheek measuring approx. 5cm x 2cm. Which of the following is the most likely diagnosis?

- a) Angiosarcoma
- b) Hutchinson melanotic freckle
- c) Cellulitis
- d) Strawberry haemangioma
- e) Solar keratosis

2. Picture 1: A mammograph showing a radio-opaque mass with round, clear margins, and approximately 4cm in diameter.

Picture 2: An ultrasonograph showing the same mass as radiolucent and with a size of 5cm x 5cm.

The diagnosis is:

- a) fibroadenoma
- b) cyst
- c) Fat necrosis
- d) Lipoma
- e) Carcinoma of the breast

3. Picture: A patient with a given history of a fall on his outstretched hand) lesion is shown on X-Ray (scaphoid fracture). Which is the most appropriate management:

- a) Open reduction and internal fixation
- b) Plaster including wrist and distal interphalangeal thumb for at least 6 months
- c) Plaster including wrist and distal interphalangeal thumb joints for at least 3 weeks.
- d) Plaster including wrist and elbow joints for at least 6 weeks
- e) Plaster including wrist and elbow joints for at least 3 weeks.

4. Picture: left testis with tortuous swelling above and behind. Which of the following is the diagnosis:

- a) Teratoma
- b) Varicocele
- c) Seminoma
- d) Epididymal cyst
- e) Hydrocele

5. Picture: Barium meal showing obstructed stomach outlet (most probably diagnosis to be interpreted as 'Pyloric Stenosis'). This patient presented with severe vomiting. Which of the following fluids should be given:

- a) Normal saline
- b) Dextrose 5%
- c) Hartman's solution
- d) Plasma expanders
- e) Ringer's lactate

6. Picture: Same case as in Qs. 5 above (no new picture was given). How much K+ should be given:

- a) 5mmol KCl
- b) 25mmol KCl
- c) 50mmol KCl
- d) More than 50mmol KCl
- e) Does not need K<sup>+</sup>

7. Picture: The picture shown is the same as Figure 45 on Page 262 of the AMCQ Book, 1997 Edition (this picture is given in the explanatory commentary to Surgery Qu No 130 and the commentary on page 262 is titled SU-C130). What is the condition?

- a) Chronic deep venous insufficiency
- b) Arterial ulcer
- c) Raynaud's phenomenon
- d) Raynaud's disease
- e) ?

8. A 35 year old female came with complaint of waking up during the night with pain in her hands accompanied by a burning sensation (pins and needles). Examination of her Right hand shows thenar wasting. Which of the following is the diagnosis?

- a) Carpal tunnel syndrome
- b) Cervical spondylosis
- c) Cervical rib
- d) Apical tumor of the lung
- e) Brachial plexus injury

9. A young female patient after bouts of vomiting presents with suprasternal emphysema, severe epigastric pain and epigastric guarding and mild dyspnoea. Which of the following is the most probable diagnosis?

- a) Rupture of the stomach
- b) Rupture of the oesophagus
- c) Rupture of the diaphragm
- d) Ruptured mediastinum
- e) Ruptured pleura

10. A 35 year old man came with an acute painful eye with conjunctival injection. Examination shows a hazy cornea with fixed dilated pupil. Which is the most probable diagnosis?

- a) Iritis
- b) Glaucoma
- c) Foreign body
- d) Trachoma
- e) Conjunctivitis

11. In a patient who has wasting of the small muscles of the hand with thenar sparing, which nerve is injured?

- a) Median
- b) Radial
- c) Ulnar
- d) Lower branch of the brachial plexus
- e) T1

12. The commonest complication of Colles fracture is:

- a) Malunion
- b) Non-union
- c) Sympathetic dystrophy
- d) Compartment syndrome
- e) Carpal tunnel syndrome

13. In a 32 year old man with 1st degree haemorrhoids, which bleeds occasionally, which is the most appropriate treatment?

- a) Band ligation
- b) High fibre diet
- c) Sclerosing therapy
- d) Anal dilatation (Lord's procedure)
- e) Sphincterotomy

14. In a patient presenting with a perforated peptic ulcer, all of the following are correct, except:

- a) Patient remembers exactly the moment of rupture
- b) Back pain
- c) Vomiting
- d) Board-like abdominal rigidity
- e) Guarding

15. Regarding pancreatic pseudocyst, which is the most correct statement:

- a) It is lined with squamous epithelium
- b) It can resolve spontaneously
- c) It arises in the first 24 hours after an episode of acute pancreatitis
- d) It has a connection with the pancreatic duct
- e) It drains in the stomach

16. After falling from 6m high scaffolding, a patient presents with pelvic injuries and blood at the external urinary meatus. Which is the most appropriate management?

- a) Cystoscopy
- b) Urethroscopy
- c) IVP
- d) Suprapubic catheterisation
- e) Urethrography

17. A 35 year old woman has a painless bladder up to the level of her umbilicus. Which is the correct diagnosis?

- a) Acute urinary retention
- b) Chronic urinary retention
- c) Pregnancy
- d) Neurogenic bladder with incontinence
- e) ?

18. A middle aged man present with severe shock (BP 80/60, HR 120/min), back pain and slight abdominal guarding. Which of the following is the most likely diagnosis?

- a) Acute pancreatitis
- b) Acute myocardial infarction
- c) Leaking aortic aneurysm
- d) Perforated peptic ulcer
- e) Acute cholecystitis

19. A seamstress which working pierced the proximal interphalangeal crease of her left index finger with a needle. On examination the whole finger was swollen and she experiences pain upon extending the finger. Which of the following is the most likely diagnosis?

- a) Cellulitis
- b) Tenosynovitis
- c) Palmar fascial abscess

- d) Osteomyelitis
- e) Carpal tunnel syndrome

20. HLA is done for transplantation in Australia. For which of the following is HLA assessment most commonly and widely used?

- a) Kidney transplant
- b) Liver transplant
- c) Brain transplant
- d) Heart transplant
- e) Lung transplant

21. A patient presents one week after appendicectomy with high fever and a red fluctuating swelling on the medial aspect of the wound. Which is the most appropriate management?

- a) Release suture to prevent sinus formation
- b) Drain the abscess
- c) Give broad spectrum antibiotics
- d) Abdominal CT
- e) Abdominal X-ray

22. A patient wakes up during the night with severe bilateral calf pain. He has to get out of bed and walks around for a while to relieve the pain. The most likely diagnosis is:

- a) Ischaemic pain
- b) Rest pain
- c) Muscle cramps
- d) Intermittent claudication
- e) Sciatic pain

23. Which of the following symptoms in a patient's limb is an unequivocal indication for urgent intervention?

- a) Pain
- b) Pallor
- c) Paraesthesia
- d) Temperature
- e) Loss of sensation

24. In a lesion between L4 and L5, which of the following will occur?

- a) Loss of ankle reflex
- b) Loss of knee reflex
- c) Impossible dorsiflexion
- d) Loss of sensation along the medial aspect of the calf
- e) Loss of sensation along the lateral aspect of the calf

25. In case of an emergency, you can safely give a blood transfusion with:

- a) Blood group O Rh negative
- b) Blood group O Rh positive
- c) Blood group AB Rh +ve
- d) Blood group AB Rh -ve
- e) Blood group A Rh +ve

26. A young male walks into your surgery complaining of severe ureteric colic. Apparently a sample of urine that he has brought with him is blood stained. He requests a shot of pethidine to relieve his pain. What is your next step?

- a) Give him 50mg pethidine IV to relieve his pain
- b) Give him 100 mg IM to relieve his pain

- c) Ask for a fresh urine sample
- d) Send him an urgent IVP
- e) Arrange hospital admission

27. A 40 year old male present with an acute onset of pain and swelling of the left testicle over the last 2 days. Which of the following is the most likely diagnosis?

- a) Varicocele
- b) Acute epididymitis
- c) Testicular torsion
- d) Teratoma
- e) Spermatocele

28. A patient is brought with a flail chest and haemothorax. His BP is 90/40 mmHg and HR is 140/min. What is your initial management?

- a) Endotracheal intubation
- b) Nasogastric tube
- c) IV fluids
- d) Wide bore chest drain
- e) Immediate thoracostomy

29. For a 65 year old female with TIA, who was diagnosed as having 85% stenosis of the carotid artery, which is the most correct statement?

- a) Aspirin is the best treatment
- b) Endarterectomy will decrease by more than 50% the chance of stroke
- c) Endarterectomy is contraindicated (there is a 70% chance of death within 30 days)
- d) Do nothing as she is going to die anyway
- e) ?

30. A young woman present with a solitary nodule in the anterior triangle of the neck. Histological examination reveals normal thyroid cells. Which if the following is the most likely diagnosis?

- a) Aberrant thyroid tissue
- b) Thyroid malignancy
- c) Normal lymph node
- d) Hashimoto's thyroiditis
- e) ?

31. Which of the following is hereditary?

- a) Papillary carcinoma of thyroid
- b) Follicular carcinoma of thyroid
- c) Medullary carcinoma of thyroid
- d) Anaplastic carcinoma of thyroid
- e) Grave's disease

32. In a young person with a left sucking wound of the chest, which is the most appropriate management after managing the airway, pulse and circulation?

- a) Debridement and closure of the wound
- b) Pressure bandage
- c) Large bore drainage tube
- d) Needle thoracotomy
- e) Open thoracotomy

33. Ischaemic pain is suggested by all the following except;

- a) Pain in the thigh on walking
- b) Pain in the calf on walking

- c) Localized ankle pain
- d) Pain on walking relieved by rest
- e) Rest pain

34. A 65 year old man present with fever of 40C and chills 6 hours after urethral instrumentation. Which if the following is the most likely cause?

- a) Acute pyelonephritis
- b) Suppurative urethritis
- c) Gram negative bacteraemia
- d) Ruptured bladder
- e) Cystitis

35. In a patient with splenectomy and spherocytosis which will be the most probable finding?

- a) Leucocytosis
- b) Increased number of platelets
- c) Hepatomegaly
- d) Number of spherocytes is below normal
- e) Fragility test remains positive

36. All of the following symptoms are present in an extradural haemorrhage except:

- a) Bradycardia
- b) Hypotension
- c) Focal neurological signs
- d) Dilated pupil
- e) ?

37. What would be the best reason to make a screening program more available to the public?

- a) Possibility of early diagnosis
- b) It is required for research purposes
- c) It improves the treatment's prognosis
- d) Specialised treatment is available
- e) It can lower the death rate from the disease

38. Hypercalcaemia will be present with all the following findings except;

- a) Lytic bone lesions
- b) Hypercalcinosis
- c) Diarrhoea
- d) Depression
- e) Hypercalciuria

39. Which of the following electrolytes is lost after ileostomy:

- a) Na
- b) Cl
- c) HCO<sub>3</sub>
- d) K
- e) Ca

40. Which is the best indicator for the depth of a burn:

- a) Anaesthesia of the wound
- b) Increased blistering
- c) Oozing is seen in deep burns
- d) Scalds are prone to deeper burning

e) ?

41. A woman present with an ulcer on the lower third of the medial side of her left leg. All of the following are appropriate treatments except:

- a) Compression stockings
- b) Bed rest with the elevation of the leg
- c) Local antibiotics
- d) ?
- e) ?

42. Regarding clostridial myonecrosis:

- a) Gas is always present on X-ray
- b) Surgical excision is a part of the treatment
- c) Hyperbaric oxygen will invariably reduce the need for surgery
- d) ?
- e) ?

43. Best management of a major trauma would be:

- a) Debridement of the necrotic tissue
- b) Proper apposition of the sutured skin flaps
- c) Use of antibiotics
- d) Use of proper surgical techniques
- e) ?

44. All of the following can be done to reduce nosocomial infections except:

- a) Staff with active infection should not be allowed to deal directly with the patients
- b) Staff members who are carriers of Staphylococcus aureus in their noses should not be allowed to work with the patients
- c) Staff members should wash their hands between dressing
- d) Staff members should have prophylactic antibiotics policy
- e) ?

#### OBSTETRICS AND GYNECOLOGY

1. A 17 year old girl was commenced on OCP (microgynon 30). She had two periods in the first month, one lasted 2 days and the other one lasted 4 days. What would you advise her?

- a) Change over to Microgynon 50
- b) Continue on Microgynon 30 for another 2 months
- c) Stop OCP and use some other form of contraception
- d) Use POP (Progesterone only Pill)
- e) ?

2. A 25 year old female present with galactorrhoea and amenorrhoea. On CT scan there was a pituitary adenoma that was 3mm from the optic chiasm, but there was no visual disturbance. Prolactin level was 1000. Which will be the most appropriate management?

- a) Trans-frontal surgery
- b) Trans-nasal surgery
- c) Bromocriptine
- d) Clomiphene
- e) Oestrogen 85 micrograms

3. The most appropriate OCP for a 24 year old woman on Phenytoin is:

- a) Microgynon 30
- b) Microgynon 50
- c) Diane 35
- d) Clomiphene
- e) Oestrogen 85 micrograms

4. A woman gave birth to a baby 2 months ago. She has decided to breast feed the baby and is asking for a contraceptive method with a failure rate less than 2%. She wants to have another baby after 12 months. You will advise her all of the following except:

- a) POP
- b) Depo Provera
- c) Combined OCP
- d) IUCD (intro-uterine device)
- e) Breastfeeding will provide the best contraception and thus she doesn't need another contraceptive method.

5. For the treatment of infertility, to induce ovulation, you will give all of the following except:

- a) Beta-hCG
- b) Human menopausal gonadotrophin
- c) Clomiphene Citrate
- d) GnRH agonist + hCG
- e) Gonadotrophin releasing hormone

6. A pregnant woman is 34 weeks of gestation present with ante-partum haemorrhage (about 100 ml). She is in shock. You diagnose abruptio placentae. All of the following findings are possible except:

- a) Tender uterus
- b) Shock out of proportion with the bleeding
- c) BP 180/110 mmHg
- d) Head high in the pelvis (not engaged)
- e) Dead foetus

7. A woman present 3 days after she gave birth to a baby complaining of irritability and tearfulness. Which of the following is correct?

- a) Postpartum blues predisposed to postpartum psychosis
- b) More than 50% of women suffer from postpartum blues
- c) She requires anti-psychotic medication
- d) She requires ECT
- e) Postpartum blues last for at least 3 months

8. A 30 year old woman is in labour for 8 hours. Despite rupture of the membranes the cervix is still dilated at 4cm. Obstructed labour is diagnosed. All of the following are true EXCEPT:

- a) Oedema of the anterior lip of the cervix
- b) Face presentation (mento-anterior)
- c) Foetal head is palpable 1cm above the ischial spine
- d) Foetal head is palpable 4cm in abdomen, vertex is 1cm below the ischial spine
- e) Foetal tachycardia (168/min)

9. In twin pregnancy, after delivery of the first twin you will do all of the following EXCEPT:

- a) Vaginal examination
- b) External version if the second twin is breech
- c) Oxytocin infusion if contractions don't start
- d) Check foetal heart rate

e) Check position of the second twin

10. A pregnant female came to see you for her first antenatal check. She has a good balanced diet. What would you recommend for her as dietary supplements?

- a) Calcium
- b) Vitamin B12
- c) Phosphorus
- d) Iron
- e) None of the above

11. A 13 year old girl is brought to you by her mother. The girl has slightly developed breast, sparse axillary hair, but she has never menstruated. She is shy and does not allow you to examine her genitalia. All of the following tests are appropriate, EXCEPT:

- a) Chromosomal analysis
- b) Prolactin levels
- c) CT scan
- d) Pelvic ultrasound
- e) FSH levels

12. A couple came to you for IVF. She is 22 years old and he is 26 years old. All of the following are indications for IVF, EXCEPT:

- a) Husband is azoospermic
- b) She has anovulatory cycles with normal levels of FSH, LH and prolactin
- c) They have not been able to conceive for two years
- d) Bilateral obstructed tubes
- e) Endometriosis diagnosed a few months ago

13. A couple comes to you for advice. The husband's mother has bipolar disorder. They want to know what are the chances for their baby to inherit the disorder. What would be your advice?

- a) Less than 10%
- b) They should not conceive because the chance is too high for the baby to have the same disorder
- c) They should have chromosomal analysis done to determine if they carry the gene
- d) Amniocentesis should be done at Wk 16 of pregnancy to determine to see if the foetus is affected
- e) ?

14. Which is the most reliable test to determine the time of ovulation:

- a) Progesterone levels from the 21st day (in a 28 day cycle)
- b) Serial urinary LH levels
- c) Self assessment of cervical mucus changes
- d) Body temperature charting
- e) Estimation of FSH levels

15. A woman came to you 2 years after her menopause asking for something to relieve her postmenopausal symptoms. You decide to give her combined HRT: Oestrogen for 28 days and progesterone for the last 12 days of the cycle to oppose the action of oestrogen. You are going to explain to her the effects of progesterone, which are all of the following, except:

- a) She will have pre-menstrual like symptoms
- b) She will have withdrawal bleeding every month
- c) Progesterone will oppose the action of oestrogen on the endometrium
- d) Progesterone will potentiate the action of oestrogen in increasing HDL levels
- e) Progesterone will augment the action of oestrogen for prevention of osteoporosis

16. A 16 weeks pregnant female comes to see you for her first antenatal check up. She tells you that she had previously given birth to a baby, who was 4.8kg at birth; she had a difficult labour, the baby was forceps delivered and had a broken clavicle, and she suffered multiple vaginal lacerations. How would you manage her in this pregnancy?

- a) Urine examination for glucose, ketones and proteins
- b) 2 hours serum glucose test
- c) Glucose tolerance test
- d) Ultrasound pelvimetry
- e) Abdominal X-ray in the last trimester

17. A 26 weeks pregnant female came to see you, complaining of slight vaginal bleeding and uterine contractions. Which of the following is an indication of pre-term labour?

- a) Raised AFP (alpha-feto proteins) levels
- b) Ruptured membranes, with closed cervix
- c) Cervix of normal length, internal os closed, external os admits one finger
- d) Foetal fibronectin at the cervix
- e) ?

18. A 17 weeks pregnant female has acute right iliac fossa pain. Which is the least likely cause of this pain?

- a) Pyelonephritis
- b) Red degeneration of a fibroid
- c) Ectopic pregnancy
- d) Acute appendicitis
- e) Torsion of an ovarian cyst

19. Which of the following CTG patterns indicate foetal distress?

- a) Accelerations with foetal movements
- b) Early decelerations with uterine contractions
- c) A beat to beat variability < 5 beats/min
- d) Decelerations when the foetus is sleeping
- e) Accelerations on sound stimulation

20. Regarding endometrial ablation, all of the following are true EXCEPT:

- a) 30-60% of women will be amenorrhoeic
- b) Oestrogen alone can be given safely as HRT
- c) 15% of women will need to repeat the procedure or have a hysterectomy
- d) The basal layer of endometrium is destroyed
- e) It is one of the treatments for dysfunctional uterine bleeding

21. A young obese female, with hirsutism, oligomenorrhoea and irregular periods was found to have endometrial hyperplasia (benign) on curettage. All of the following are appropriate treatments, EXCEPT:

- a) Progesterone from 14th to 21st day of each cycle
- b) Diane35
- c) Clomiphene citrate on the 4th and 9th days of the menstrual cycle
- d) Progesterone + oestrogen (OCP)
- e) Oestrogen alone

22. A 65 year old female was prescribed Warfarin recently for atrial fibrillation. Now she presents after a brief period of vaginal bleeding. Which is the least likely cause for this?

- a) Endometrial carcinoma
- b) Cervical carcinoma
- c) Atrophic vaginitis

d) Anticoagulant therapy

23. Which of the following measures would have the most dramatic impact on preventing and reducing the mortality from cervical carcinoma?

- a) Usage of condom in cases of extramarital intercourse
- b) Papilloma virus vaccine
- c) Improving pap smears
- d) Improving screening methods for early detection
- e) Making colposcopy more available

24. In a pregnant female with multiple pregnancy you will advise all of the following EXCEPT:

- a) More frequent antenatal checking
- b) Iron and folic acid supplements
- c) More frequent Ultrasonograms
- d) Give a corticosteroid injection at 34 weeks of pregnancy, as she has an increased chance of pre-term labour
- e) Induced delivery before term

25. A 26 weeks pregnant female had a BP of 140/90mmHg on her first antenatal visit. Four weeks later the blood pressure was 140/100. Which of the following is contraindicated:

- a) ACE inhibitors
- b) Methyldopa
- c) Labetolol
- d) ?
- e) ?

#### PAEDIATRICS

1. A 6 week old baby presents with unilateral eye discharge since birth. A pathology result shows polymorphonuclear cells. Which is the most likely diagnosis:

- a) Gonococcal infection
- b) Chlamydial infection
- c) Syphilitic infection
- d) Imperforated lacrimal duct
- e) Herpetic infection

2. Which of the following will resolve spontaneously in 30% of newborns?

- a) Small VSD in a year old
- b) PDA in a 3 year old
- c) Coarctation of aorta in a pre-term baby
- d) ASD in an 8 month old baby
- e) Congenital heart block

3. A 5 year old girl has headaches and morning vomiting for 3 weeks. She is well otherwise. Which is the most likely cause:

- a) Migraine
- b) Medulloblastoma
- c) Sinusitis
- d) Hydrocephalus
- e) Wilson's disease

4. All of the following are correct about atopic eczema in children, EXCEPT:

- a) It is very itchy
- b) Usually involves flexor surfaces
- c) Topical steroids are helpful

- d) First episode in early childhood
- e) It is a contraindication for DTP vaccination

5. A 2 years old boy has purulent unilateral nasal discharge and occasional bleeding, for 2 weeks. He has had a course of antibiotics with no improvement. On examination he is very irritable and doesn't allow you to examine his nostrils. What is your further management?

- a) Repeat course of antibiotics
- b) Topical antibiotics
- c) Carefully examine his nose under general anaesthesia
- d) Refer him to an ENT specialist
- e) Change the antibiotics

6. Which is the most common cause of death in a child with beta-thalassemia:

- a) Cardiac failure
- b) Renal failure
- c) Hepatic failure
- d) Infection
- e) Haemorrhage

7. All of the following are false regarding cerebral palsy, EXCEPT:

- a) 90% progress to severe mental retardation
- b) 80% of the children have an IQ of 70
- c) Is frequently associated with Down Syndrome
- d) 70% will have moderate handicap
- e) 10% will improve

8. A 2 year old boy is brought to you by his parents. He doesn't speak as he should for his age, but his hearing is adequate. When he was 1 year old he could babble a few words. Which of the following is your further management?

- a) Arrange audiometry
- b) Check the hearing system
- c) Check his development
- d) ?
- e) ?

9. Regarding febrile convulsions, which of the following is true:

- a) There is always a family history
- b) Commonly occur between 3-5 years
- c) Focal seizures are present
- d) Usually last less than 15 minutes
- e) Most will develop epilepsy later in life

10. A 3 year old girl presents with 3cm x 3cm erythematous area on the upper eyelid, the oedema, congestion of conjunctiva and normal eye movement. Which is the correct treatment:

- a) IV flucloxacillin and cephalosporin
- b) Topical chloramphenicol
- c) Topical steroids
- d) Surgical intervention
- e) Topical gentamycin

11. The most common cause of iron deficiency in Australian children is:

- a) GIT bleeding
- b) Lack of fresh fruit and vegetables

- c) Malabsorption
- d) Recurrent infections
- e) Cow's milk diet

12. Which of the following is the cause of kernicterus in children:

- a) total bilirubin
- b) Conjugated bilirubin
- c) Haptoglobin
- d) Cholestasis
- e) ?

13. A 3 year old boy present with fever (38.0C), difficulty in breathing and difficulty in swallowing fluids. Which is the most appropriate management?

- a) Prepare for intubation or tracheostomy
- b) Treatment with oral penicillin
- c) Nebulised Salbutamol
- d) Reassure mother and send her home
- e) Examine throat

14. A 7 years old boy fell from a tree. After 7 days he present with pain and swelling of one knee, and fever of 38C. Which is the most likely diagnosis?

- a) Acute leukaemia
- b) Osteomyelitis
- c) Osteogenic sarcoma
- d) Perthe's disease
- e) Still's disease

15. A fully breast-fed baby, from a mother on a healthy balanced diet, can suffer from which vitamin deficiency?

- a) Vit A
- b) Vit B complex
- c) Vit C
- d) Vit D
- e) ?

16. A 5 year old child present with extremely painful ears. The eardrums are red and protruding. Which of the following is correct?

- a) tetracycline is the treatment of choice
- b) Broad spectrum antibiotics should be administered as ear drops
- c) If the eardrums ruptured spontaneously, it will provide immediate pain relief
- d) Tympanotomy will lead to life long ear discharge
- e) Antihistamines can improve the drainage of the middle ear

17. At what age can a normally developed child speak simple phrases and understand simple verbal commands?

- a) 1 year
- b) 2 years
- c) 3 year
- d) 4 years
- e) 5 years

18. The most common cause of rectal bleeding in a child is:

- a) Intussusception
- b) Gastroenteritis
- c) Fissure in ano

- d) Meckel's diverticulum
- e) Haemorrhoids

19. A mother brought her 12 year old child with hip pain and limping. He is in the 19th percentile of weight. Which is the most likely diagnosis?

- a) Hip arthroses
- b) Perthe's disease
- c) Transient synovitis
- d) Slipped upper femoral epiphysis
- e) Tuberculosis

20. In a boy weighing 4 kg, who suffered 20% burns, you will do all of the following, EXCEPT:

- a) Skin graft
- b) Fluid replacement of 1500ml over the first 24 hours
- c) Assessment of depth by examining for pain sensation
- d) IV narcotics for pain relief
- e) Urinary catheterisation

21. A previously well 12 year old girl, while she was watching TV, had a sudden attack of difficult breathing. All the examinations were normal and she was not dyspnoeic anymore. Which would be the most probable diagnosis?

- a) Asthma
- b) Panic attack
- c) Pneumothorax
- d) Epilepsy
- e) Ketoacidosis

22. A 12 year old boy presents to the emergency department with a 4 hour history of severe Right testicular pain, with an acute onset. On examination the scrotum is swollen and extremely tender. Which is the most appropriate management?

- a) Surgical exploration of the scrotum
- b) Confine him on antibiotics and scrotal support (elevation)
- c) Do a urine ward examination
- d) No treatment, only observe
- e) Reassure and send him home

23. Which is the most common form of epilepsy that occurs between 4-10 years old?

- a) Infantile spasm
- b) Myoclonic attacks
- c) Breath-holding attacks
- d) Petit mal seizures
- e) ACTH dependent seizures

24. A 3 year old presents with persistent cough. On examination he has rhonchi and crepitations. He also has diarrhoea and has lost weight. Which would be the most correct management?

- a) Treat empirically with antibiotics
- b) Do a sweat X-ray
- c) Abdominal ultrasound
- d) Full blood examination
- e) ?

25. A child present with scattered bruises all over his body. He is well otherwise. Which of the following is the most correct management?

- a) Admit the patient to the ward, contact social work department and other authorities
- b) Give IV antibiotics
- c) Reassure the parents and send the child home
- d) Do a full blood examination
- e) Do a clotting profile

26. A child is brought to you after being bitten by a snake two hours ago. The child is well except a small scratch on the lateral aspect of his Right leg. Which is the most appropriate next step?

- a) Observe him for 24 hours
- b) Admit him and give polyvalent anti-snake venom immediately
- c) Reassure and send him home
- d) Clear the wound with antiseptic and start antibiotics
- e) Do clothing profile and give anti-snake venom

27. All of the following are complications of meningitis except:

- a) Hydrocephalus
- b) Cerebral abscess
- c) Subdural haematoma
- d) Subarachnoid haematoma
- e) Subdural effusion

#### PSYCHIATRY

1. All of the following can be a cause of psychosis in a HIV positive patient except:

- a) Toxoplasma infection
- b) Zidovudine therapy
- c) Non-Hodgkin lymphoma
- d) AIDS itself
- e) Interferon therapy

2. Which of the following is correct regarding "Baby Blues"?

- a) Is present in more than 50% of women
- b) Is associated with breastfeeding
- c) Predisposes to post-partum psychosis
- d) ?
- e) ?

3. Which of the following is correct regarding OCD (Obsessive Compulsive Disorder)?

- a) It is associated with borderline personality disorder
- b) It is associated with acute myocardial infarction
- c) It is associated with substance abuse
- d) It is associated with epilepsy
- e) It is associated with dementia

4. Which of the following is most commonly associated with bulimia nervosa?

- a) Morbid obesity
- b) Hyperkalaemia
- c) Depression
- d) Female gender

e) Improvement with dietary advice

5. Which of the following are well known causes of ADHD (Attention Deficit Hyperactivity Disorder)?

- a) Fragile X syndrome
- b) ?
- c) ?
- d) ?
- e) ?

6. Which of the following is a negative symptom of schizophrenia?

- a) Auditory hallucinations and delusions
- b) Blunt affect
- c) Visual hallucinations
- d) Catatonia
- e) Thought disorder

7. A 16y old female is brought to you after attempted suicide. She is reluctant to take any drug, as are her legal guardians. What would you do?

- a) Admit her to hospital (involuntary admission)
- b) ?
- c) ?
- d) ?
- e) ?

8. Testamentary capacity means

- a) Fitness to plead in court
- b) Capacity to make a valid will
- c) No mental disorder is present
- d) Capacity to swear an oath on the Bible
- e) Not responsible for criminal actions in the past

9. In a patient who comes to you complaining of impotence, you advise all of the following except:

- a) Trial of Viagra
- b) Take a good history of his sexual behaviour
- c) Explain to him that this happens to a certain percentage of the male population
- d) Find out whether he has any cardiac or endocrine conditions
- e) Find out whether he is taking any drugs which can cause the problem

10. If you want to do a trial of a new drug, which of the following is essential?

- a) Use a placebo group as control
- b) Ask the Helsinki Human Rights Commission for permission to test it on humans
- c) Ensure the patients are financially compensated for loss of time due to trial procedures
- d) Obtain permission from the Medical Ethics Committee
- e) ?

11. All of the following can cause serotonin syndrome except:

- a) Haloperidol
- b) L tryptophan
- c) Clonazepam
- d) Moclobemide
- e) Dextromorphan

12. In which of the following conditions will you find "déjà vu" ?

- a) Occipital lobe tumour
- b) Temporal lobe tumour
- c) Korsakoff's syndrome
- d) Raised intracranial pressure
- e) Frontal lobe tumour

13. A lady came to you looking for counselling after her second marriage break-up. She was severely depressed and anxious but very seductive during the interview. She was very suggestive when she was talking about her previous sexual relationships. Her behaviour is most probably due to:

- a) Borderline personality
- b) Histrionic personality
- c) Antisocial personality
- d) Dependent personality
- e) Substance abuse

14. All of the following psychoses are fully reversible except:

- a) Mania
- b) Factitious disorder
- c) Severe sensory deprivation
- d) Amphetamine abuse
- e) ?

15. Panic disorder without agoraphobia:

- a) Is more frequent in men
- b) Is more frequent in women
- c) Is equally frequent in men and women
- d) Starts in the 20s
- e) Patients should avoid trigger factors

# 2002

MCQ (OCTOBER 2002)

1. Ascites fluid containing malignant cells. Which of the ff. is the most likely associated clinical findings.

- a. supraclavicular mass
- b. nodules palpated per rectum
- c. hepatic mass

2. Hypercalcemia is a complication of all of the ff. except:

- a. hyperthyroidism
- b. excessive intake of vit. D
- c. intake of calcium carbonate for peptic ulcer
- d. Bronchogenic carcinoma
- e. chronic calcific pancreas

3. In infant earliest clinical findings of congestive cardiac failure is:

- a. oedema of the ankle
- b. enlarged liver
- c. ascites

4. 23 year old woman came to you for the first time for paps smear. Result is squamous metaplasia of the cervix. Which of the ff. will be your next step.

- a. it is a precursor for carcinoma, so you should do colposcopy and cervical biopsy.
- b.

5. An old man presents with abdominal cramps, low grade fever, left iliac colic and dysuria, abdominal rigidity, left rebound tenderness, diarrhoea. What is the most likely diagnosis:

- a. UTI
- b. renal colic
- c. diverticulitis
- d.

6. 22 year old woman who have a 3cm mass in the vaginal introitus, 3cm. anterolateral from the opening, this is most likely a remnant of;

- a. wolffian duct
- b. mullerian duct
- c. Bartholin duct
- d. abscess

7. An infant who presents with cough, fever. Chest x-ray revealed a round opacity in the middle lobe. Which Antibiotic will you use:

- a. crystalline penicillin
- b. gentamycin
- c. amoxicillin/clavulanic acid
- d. tobramycin

8. An angry agitated patient was brought to you by his wife. When you ask him, what is the problem he said I love you you.. Ilove you sweety.

- a. factitious disorder
- b. histrionic personality
- c. somatisation
- d. mania

9. Increased peripheral pulse pressure is caused by the following except:

- a. a-v malformation
- b. Paget disease
- c. ASD
- d.

10. The following are true regarding fluids except:

- a. isotonic 0.9% NaCl = 150 mmol/l Na ; 150 mmol/l Cl
- b. Hartmann solution = Na 135 mmol; calcium 2 mmol and some potassium
- c. Isotonic solution 4% dextrose in 1/5 isotonic saline 30 mmol Na and Cl and 40g/L dextrose
- d. Isotonic 5% dextrose contains 300 mmol/L (50g) dextrose
- e. Regarding the K in Hartmann sol., 1 liter in 24 hours is enough for the daily requirement of potassium

11. Gynecomastia is a side effect of the following drugs except:

- a. digoxin
- b. furosemide
- c. cimetidine
- d. methyl dopa

12. Anticholinergic side effect of antipsychotic drugs can be treated with;

- a. Physostigmine
- b. Benhexol
- c.

13. Unwanted antiadrenergic side effect of anti psychotic drug

- a. akathisia
- b. inhibit ejaculation
- c. constipation
- d. hypotension

14. Paracetamol toxicity

- a. Renal impairment
- b. Hepatic impairment
- c. cardiac failure

15. Which of the following drugs is not helpful in acute asthmatic attack:

- a. inhaled salbutamol
- b. theophylline
- c. Na cromoglycate (Intal)
- d. terbutaline

16. Hypertensive patient treated with captopril and chlorothiazide diuretic you can expect the following side effect:

- a. reduced potassium
- b. reduced sodium
- c. decreased GFR

17. Neonatal jaundice

- a. yellow sclera is the first manifestation
- b. conjugated bilirubin cause kernicterus
- c. jaundice in the first 24 hours is physiological
- d. can be treated in most cases by phototherapy only

18. In mini mental examination, patient was ask to draw a pentagon. What is the area in the brain that is being tested?

- a. non-dominant temporoparietal lobe
- b. dominant temporoparietal lobe
- c. frontal lobe
- d. parietal lobe

19. In relation to the bone complication in chronic renal failure;

- a. associated with osteoporosis
- b. osteomalacia and osteitis fibrolytica cystica

20. Which of the ff. dses. least likely to be transmitted from the mother to the baby during childbirth:

- a. Hepatitis B
- b. HIV
- c. Gonorrhoea
- d. syphilis
- e. herpes simplex

21. Unilateral Undescended testis is associated with :

- a. carcinoma
- b. infertility
- c. torsion
- d. inguinal hernia

22. facial nerve paralysis can cause by the ff. except:

- a. chronic parotitis
- b. parotid gland tumour
- c.

23. Initial treatment for a patient with diabetic ketoacidosis:

- a. High dose Intravenous insulin
- b. Isotonic intravenous solution
- c. Subcutaneous rapidly acting insulin
- d. Sodium Bicarb.

24. Insulin dependent diabetic patient found unconscious, what is your management:

- a. Blood collection and 25ml. 5% dextrose iv
- b. urine glucose test
- c. intravenous insulin
- d.

25. Squash player was hit by the ball in the eye. On examination  $\frac{1}{4}$  of his anterior chamber is filled with blood. What is your management?

- a. Ophthalmic antibiotic and eye pad
- b. admit to hospital and strict bed rest
- c. send him home

26. The ff. are associated with reduced risk of breast cancer except:

- a. artificial early menopause
- b. uterine carcinoma
- c. early menarche
- d. first baby at 35 years of age

27. Which of the ff. investigations is the most specific and at the same time has the lowest risk for the foetus to detect trisomy 21;

- a. triple screening at 16-18 weeks
- b. ultrasound at 11-12 weeks of gestation to measure nuchal fold thickening
- c. alpha feto protein
- d. chronic villous biopsy at 9-11 weeks

28. A young woman with infertility, recommend to undergone laparoscopy. She comes to you for advice about laparoscopy. All of the ff. are true except:

- a. good for diagnosing endometriosis
- b. pain in the shoulder is common complication
- c. risk for damage to aorta or vena cava which can lead to death
- d. diagnose polycystic ovarian syndrome

29. Acute anterior uveitis is most commonly associated with:

- a. rheumatoid arthritis
- b. ankylosing spondylitis
- c. Sjogren's syndrome
- d. reiters dse.

30. 22 year old man comes to see you because of colicky abdominal pain. The sample of urine which he has brought with him is blood stained. He is asking you to give him pethidine injection for pain relief. Examination of the abdomen is normal. What is the next most appropriate step?

- a. send him home
- b. give him pethidine and reassess
- c. examine a fresh urine sample

31. Which group of women will mostly benefit from mammography screening

- a. all patient > 35 year old
- b. with family history of breast cancer
- c. women using oral contraceptive
- d. all patients between 55-65 year old

32. Painless jaundice in pregnancy is due to?

- a. acute cholecystitis
- b. cholestasis

c. gall stone

33. A 60 year old patient presents with congestive cardiac failure and was commenced on Captopril and long term use of chlorothiazide due to hypertension will result in:

- a. K increased
- b. K decreased
- c. Na decreased
- d. increase cholesterol
- e. Na increased

34. TB pleural effusion you can find the ff. except:

- a. decreased glucose
- b. exudate
- c. polymorphonuclear cells
- d. predominantly monocytes

35. In Hep. C which of the ff. have a low prevalence of hep c antibodies:

- a. Homosexuals
- b. I.V. drug users
- c. hemodialysis patients

36. Which type of thyroid malignancy is family history important?

- a. Papillary
- b. medullary
- c. follicular
- d. anaplastic

37. In a patient with supraventricular tachy. with sys. BP of 70mmhg. and chest pain. What is the management?

- a. Cardioversion
- b. verapamil
- c. adenosine
- d. sotalol

38. A lady with renal failure, what is the investigation of choice to differentiate Acute and Chronic renal failure?

- a. renal ultrasound
- b. level of Calcium
- c. level of K
- d. urinalysis

39. Multi-infarct dementia is characterised by:

- a. Memory loss of recent event
- b. loss of cognitive functions rapidly
- c. Early impairment of intellectual ability
- d. more common in female

40. Which of the ff. drugs will not cause interaction:

- a. digoxin and cimetidine
- b. digoxin and warfarin
- c. verapamil and beta blockers
- d. ACE and diurectics
- e. thephylline and erythromycin

41. The ff. is characteristics of Emphysema except:

- a. Clubbing
- b. increased total lung capacity
- c. Fev1 decreased
- d. loud P2

42. 65 year old woman was prescribed warfarin recently because of atrial fibrillation. Which of the ff. are correct in regards to warfarin:

- a. aspirin will increase bleeding tendency
- b. stop warfarin and give vit k inj before a dental procedure

43. Elderly lady (68yr.old) on oral warfarin due to mechanical heart valve replacement. She has postmenopausal bleeding week later. What is the least likely cause?

- a. Endometrial Ca
- b. Endometrial Polyp
- c. Cervical Malignancy
- d. Atrophic vaginitis
- d. due to oral anticoagulation

44. A 16 year old girl brought to you by her mother because she did not menstruate. But in the last 6 months breast devt. and axillary hair were noticed. What do you tell the mother?

- a. Reassure the mother that she will menstruate in the next 12- 24 months
- b. She has Turners synd.
- c. Pituitary tumour

45. A nurse with superficial burns on the forearm that never heals in spite of your treatment. She seems to be deliberately meddling with wound. When confronted she admit to it. What is your next step?

- a. Refer to Psychiatrist
- b. Refer to dermatologist
- c. Give antibiotics and send her home

46. Anterior uveitis is most commonly associated with:

- a. Ankylosing spondylitis
- b. Rheumatoid arthritis
- c. SLE
- d. Reiters dse.

47. Young officer who has IDDM was found unconscious in his office. What should you do?

- a. Take blood sample and give IV dextrose
- b. Give subcutaneous insulin
- c. Test urine for glucose

48. Girl with bleeding tendency. Her Father and brother had the same problem. What is your diagnosis?

- a. Haemophilia A
- b. Von Willebrand dse.
- c. ITP

49. A patient with supraventricular tachycardia with hypotension (70mmhg sys.) and about to loose consciousness. What is your management?

- a. Cardioversion
- b. adenosine
- c. verapamil
- d. sotalol

50. Most common Lung Carcinoma in Non smoker?

- a. Squamous cell Ca
- b. Epithelioma
- c. Adenocarcinoma
- d. Bronchogenic Carcinoma

51. Young adult was bitten by a bee brought to you by his mates. He is hypotensive and has respiratory distress. What would you do first?

- a. I.V. Adrenalin
- b. I.V. fluids
- c. O2 by mask
- d. Antihistamine

52. Staghorn Calculus is associated with except:

- a. Hyperuricemia
- b. Hypercalcemia
- c. UTI
- d.

53. Unilateral Exophthalmos is associated with:

- a. Thyrotoxicosis
- b. tumour in the maxillary antrum
- c. Carcinoma of the lungs
- d. adenoma of the lacrimal gland

54. A 23 year old female comes for OCP. Two months ago she was having two periods per month. After taking microgynon 30, she gets one period for 4 days and one for 2 days. What is your advice?

- a. Continue microgynon 30
- b. microgynon 50
- c. Progesterone

d.

54. In dizygotic Twin pregnancy is associated with the ff. complications except:

- a. Acute polyhydramnios
- b. anaemia
- c. one foetus is smaller than the other
- d.

55. Baby was delivered by forceps. During routine exam. you noticed his left arm is not moving. What is the cause?

- a. Erbs palsy
- b. Sepsis
- c.

56. What is not a risk factor for developing a breast cancer?

- a. early artificial menopause
- b. endometrial cancer
- c. cancer of the other breast
- d. family history
- e. first pregnancy after 35 years of age

57. A woman G2, P1 presents to you on the first antenatal visit. Her first baby was born 4.5 kg. and suffered from fractured clavicle during delivery. What is your next step?

- a. OGTT
- b. Ultrasound
- c.

58. A pregnant woman 17 weeks gestation have a right sided lower abdominal pain? Which of the following is the unlikely cause?

- a. Acute appendicitis
- b. Ectopic pregnancy
- c. Ovarian cyst
- d. fibroid

59. In an emergency a patient with uncontrollable bleeding which of the ff. blood group can you give?

- a. group O, Rh (+) blood
- b. group O, Rh (-) blood
- c. group, packed red cells
- d. whole plasma

60. A patient had appendectomy, 5 days post op. he developed a fever 39 C. and tenderness on the incision site. What is the possible cause?

- a. Wound infection
- b. Atelectasis
- c. Embolism
- d. Haematoma

61. Dysphagia can be caused by the ff. conditions except:

- a. Achalasia
- b. Oesophageal varices
- c. Carcinoma of the oesophagus
- d.

62. All of the ff. are found in extradural haematoma except?

- a. Bradycardia
- b. Pupillary dilatation
- c. Hypotension
- d. Alteration of level of consciousness

63. What is the commonest complication of Colle's fracture?

- a. Malunion
- b. Non- union
- c. Compartment syndrome
- d. Carpal tunnel syndrome

64. Serotonin syndrome with antidepressant drug is associated with :

- a. fluoxetine and sertraline
- b.
- c.

65. A 5y/o boy brought to you by his mother due to extremely painful ears and a fever. The tympanic membrane is red and bulging. What is your management?

- a. Broad spectrum antibiotics should be administered in the form of ear drops
- b. Perforation of the membrane will relieve the pain
- c. topical steroids should be prescribed

66. A 7 year old boy falls from a tree. After a few days he complained of fever, knee pain and tenderness. What is your diagnosis?

- a. Osteomyelitis
- b. Stills dse.
- c. Osteogenic sarcoma
- d. Perthes dse.

67. A 18 month old baby who could babble very rarely. The mother is worried about it. Your Examination findings is normal. What is your next step:

- a. Arrange for an audiogram
- b.
- c.

68. Which of the following Dses. will benefit most from Splenectomy?

- a. Myelofibrosis
- b. Chronic ITP
- c. Acute leukaemia
- d. Haemolytic anaemia

69. What is true about Nephrotic synd. in childhood?

- a. Respond to Steroids
- b. Post strep. is the usual cause

70. X-ray of scaphoid fracture: What is the management?

- a. Open reduction and internal fixation
- b. Posterior slab
- c. Plaster including the wrist and distal interphalangeal thumb joint for at least 6 weeks
- d. Plaster including the wrist and distal interphalangeal thumb joint for at least 3 weeks

71. A lady while sewing pierced her proximal interphalangeal crease of her left index finger. On examination the whole finger was swollen and she is experiencing pain when extending the finger. Which is the most likely diagnosis?

- a. Cellulitis
- b. Tenosynovitis
- c. Palmar fascial abscess
- d. osteomyelitis
- e. carpal tunnel syndrome

72. A 40 y/o man presents with an acute onset of pain and swelling of his left testicle over the last 2 days. Which of the ff. is the most likely diagnosis?

- a. varicocele
- b. Acute epididymitis
- c. testicular torsion
- d. teratoma
- e. teratoma

73. Hypercalcemia is associated with all of the ff. findings except:

- a. Hyper calcinosis
- b. diarrhoea
- c. depression
- d. hyper calciuria
- e. lytic bone lesions

74. A patient present to you with an ulcer on the lower third of the medial malleolus of the right leg. All of the ff. are appropriate treatment except:

- a. Compression stockings
- b. bed rest with the leg elevated
- c. topical antibiotics
- d.

75. A 5 y/o boy has headache and morning vomiting for several weeks. No other significant findings. What is the most likely cause:

- a. Migraine
- b. Medulloblastoma
- c. Sinusitis
- d. hydrocephalus

76. A boy was found lying on the ground with a scratch on his right leg, a brown snake was found nearby, he is well. What is the most appropriate next step:

- a. Admit him and give polyvalent anti venom
- b. Reassure the mother and send him home
- c. Admit him and observe for 24 hours

77. A young male presents with pleuritic chest pain and cough. On percussion there is dullness of the right lung base. There are no breath sounds in the right lower zone, but bronchial breathing is noted in the right middle zone. Which of the ff. is the most likely diagnosis:

- a. Tension pneumothorax
- b. pleural effusion
- c. Pneumonia
- d. R lower lobe collapsed

78. Controlling hypertension is a proven factor in preventing:

- a. TIA
- b. Ischaemic stroke
- c. Coronary artery dse.
- d. Congestive cardiac failure

79. Which of the ff. is the commonest organism in cellulitis:

- a. Group A Streptococcus
- b. Group B Streptococcus
- c. Staph. aureus

80. The ff. dses. can cause glucose intolerance EXCEPT:

- a. prolactin adenoma of pituitary gland
- b. Hyperthyroidism
- c. Acromegaly
- c. Pheochromocytoma
- e. cushing syndrome

81. 18 month old infant noticed by his parents to have a very fast heart rate last for 20 mins. heart rate was about 250-300/min. What would you do?

- a. Beta blocker
- b. verapamil
- c. cold water stimulation
- d. digoxin
- e. reassurance

82. Most important indication for immediate thyroidectomy is:

- a. swallowing difficulty
- b. compression on the trachea

- c. cosmetic reason
- d. future malignancy

83. 4 Weeks infant (delivered at full term) noticed to have recurrent vomiting after feeding, otherwise normal. He gain 200 gm/week in the last two weeks. What is your advise.

- a. FBC exam
- b. Radiological investigation is unnecessary
- c. decrease duration of feeding
- d.

84. Rosacea is associated with

- a. acneiform eruption
- b. respond to steroids
- c. cause by Strep.

85. (Photo) Barium enema in a young child showing dilatation of the distal colon with constriction below it.

- a. acquired megacolon
- b. ulcerative colitis
- c. Hirschsprung dse.
- d. crohns dse.

86. (Photo) of Keratoacanthoma what is your management:

- a. wide local excision
- b. local excision
- c. excision of lymph node draining

87. Primigravida in labour at 39 wks gestation with transverse lie. What is your management?

- a. External cephalic version
- b. wait and see
- c. caesarean section

88. Woman with mastalgia. conservative management failed. What is your next management?

- a. Danazol
- b. Bromocriptine
- c. oestrogen

89. (Photo) CT scan of abdomen with multiple hepatic cysts. What is the most like diag.

- a. Hydatid cyst
- b. secondary metastasis
- c. pancreatic pseudocyst

90. 22 year old woman primigravida 16 weeks gestation came in the emergency room due to crampy abdominal pain. Vaginal exam. shows 1.5 cm dilation of the external os , elongated cervix with minimal bleeding. What do you do?

- a. D & C

- b. Salbutamol
- c. Admit and observe

91. Young lady primigravida with mild pre-eclampsia and you requires to induced labor. Cervix is Bishop 2. What is your next management?

- a. PGE1 insert into the posterior fornix of the vagina and ARM after 4hours
- b. PGE2 insert into the vagina and ARM after 12 – 24 hours
- c. caesarean section

92. (Photo) of seborrheic keratoses (MCQ book fig. 15 page 57). What is your management?

- a. Observe only
- b. Chemotherapy
- c. Radiotherapy
- d. cauterize

93. Young patient undergone thyroidectomy, he was prepared medically to be euthyroid before sub total thyroidectomy. One day post op. he developed high fever 39 C. What is the probable cause?

- a. Atelectasis
- b. Thyroid crisis
- c. wound infection

94. Previously healthy young patient. 3 weeks post partum she developed dyspnea and syncope. Prominent a wave on JVP, 4th heart sound was heard over the left sternal border. What is your probable diagnosis?

- a. Viral pericarditis
- b. massive P.E.
- c. M.I.
- d.

95. Cluster headache all are true except:

- a. continuous headache for 24 hours

96. A moderately depressed woman she is being treated with sertraline. What do you advise her

- a. Depression will be relieved immediately
- b. Depression will be relieved in 4 weeks
- c. Advice avoidance of sunlight because of photosensitivity

97. In a patient with jaundice. What is the most important purpose of ultrasound?

- a. Check for gall stone
- b. Dilated duct

98. What is the most important risk factor for Osteoporosis

- a. 40 year old menopausal woman

b. 40 cigarettes per day

99. A man had a binge drinking a week ago. He developed headache, slurred speech. On physical exam. you noticed spider naevi and increase extensor plantar reflex. What is the probable diagnosis?

- a. Hepatic encephalopathy
- b. Subdural haematoma
- c. Korsakoff psychosis

100. Post traumatic Stress synd. is associated with except:

- a. Women abuse by their spouse
- b. Age and sex affect their vulnerability

101. H. Pylori is associated with the ff. except:

- a. gastric ulcer
- b. duodenal ulcer
- c. gastroesophageal reflux
- d. peptic ulcer

102. A patient with good job and he is very successful. His behaviour has dramatically changed and become good during the day and at night he goes to the street and do some crimes. What is the probable diagnosis?

- a. depersonalization
- b. conversion
- c. multiple personality
- d. schizoform
- e. schizophrenia

102. Antibiotic for prophylaxis against infective Bacterial endocarditis is least likely to be given:

- a. Appendicitis
- b. Reduction of simple fracture
- c. tonsillectomy

103. Hyper-immunoglobulin for post infectious prophylaxis is given for all except:

- a. Hepatitis A
- b. Varicella
- c. Mumps
- d. Hepatitis B
- e. Rubella

104. Which of the ff. will benefit most from Splenectomy:

- a. Myelofibrosis
- b. Chronic Idiopathic Thrombocytopenic purpura
- c. Hepatic hypersplenism

105. Which of the ff. will augment the liability for violence behaviour:

- a. history of violence behaviour
- b. Alcohol abuse
- c. Demographic prediction

106. A 3 years old boy presents with persistent cough. On examination he has rhonchi and crepitations. He also has diarrhea and he lost weight. Which would be the most correct management:

- a. Do a Na sweat test
- b. Do chest x-ray
- c. Abdominal ultrasound
- d. Full blood examination

107. Hep C V. can be transmitted least likely by one of these blood products:

- a. Fresh frozen plasma
- b. Whole blood
- c. Packed RBC
- d. Albumin
- e. platelets

108. The ff conditions are painless during sexual intercourse except

- a. urethral caruncle
- b. cervicitis
- c. cervical polyp
- d. urinary tract infection

109. Bartholin's abscess

- a. usually caused by staph. Aureus
- b. may even caused by gonocococcus

110. During endoscopy, a pin point bleeder is noted in the base of an gastric ulcer. What is the best option.

- a. injection with adrenaline
- b. gastrectectomy
- c. vagotomy
- d. give H2 antagonist

111. The following are the causes of short stature except:

- a. IUGR
- b. Obesity
- c. Hypothyroidism
- d. GH deficiency

112. Reduced chest movement on the left with increased conduction of breath sounds and intensified vocal fremitus

- a. lobar pneumonia left lung
- b. pleural effusion left lung
- c. pneumothorax left chest
- d.

113. A 50 yr old woman was hit by a tennis ball on the left breast while playing tennis.. 2 weeks later she was seen by you with a lump in the left breast. What is your next move?

- a. treat her as fat necrosis of the breast
- b. reassure her that the lump will eventually resolve by itself

- c. rule out malignancy of the breast
- d. excision of the lump

114. Which option is the least helpful in treating paracetamol poisoning within 8 hrs of ingestion of the drug?

- a. oral N-acetyl cysteine
- b. iv N-acetyl cysteine
- c. give activated charcoal
- d. gastric lavage
- e. peritoneal lavage

115. the following conditions contribute to glucose intolerance except

- a. pheochromocytoma
- b. cushings syndrome
- c. prolactin producing adenoma of the pituitary
- d. hyperthyroidism

116. Which is the following that will give the greatest certainty as to the diagnosis of pulmonary embolism

- a. CXR: normal; perfusion scan: abnormal; ventilation scan: normal
- b. CXR: normal; " normal " abn.
- c. CXR consolidation; " abn. " normal
- d. CXR consolidation; " normal " normal

117. A patient with vertigo and tinnitus but no hearing loss. The most probable cause

- a. acute labyrinthitis
- b. meinier's disease
- c. vestibular neuritis
- d. acoustic neuroma

118. All of the following joints are involved in rheumatoid arthritis when compared to osteoarthritis

- a. sternoclavicular jn
- b. temporomandibular jn
- c. metacarpophalangeal jn
- d. carpometacarpal jn of the thumb

119. When a pt with haemochromatosis and established cirrhosis is treated with phlebotomy all of the following are reversed except

- a. hepatic carcinoma
- b. skin pigmentation
- c. diabetes

120. In the transmission of gp B streptococcus from mother to fetus all are true except

- a. it is a cause of UTI in pregnancy
- b. penicillin given during pregnancy can eradicate the organism
- c. ....transmission rate

121. A 80 kg man with 15% burns comes to the emergency dept. which of the IVF is best suitable:

- a. 2lt isotonic saline and 3 lt hartman's solution
- b. 2lt of blood and 3lt of hartman's
- c. 2lt of isotonic and 3lt of blood

122. In treatment of acetaminophen poisoning all of the following are effective when given within 8 hrs except

- a. methionine
- b. iv N acetyl cystiene
- c. oral N acetyl cystiene
- d. charcoal.
- e. peritoneal dialysis

123. In acid burns which of the following is the best initial management:

- a. rinse with copious amount of water
- b. neutralise with alkali

124. All of the following are true regarding bulbar palsy when compared to pseudobulbar palsy

- a. cranial nerve abnormalities
- b. presence of emotional liability
- c.

125. Right homonymous hemianopia caused by lesion in :

- a. right occipital lobe
- b. left optic radiation
- c. left optic nerve

126. All of the following are true of Mycoplasma pneumonia except:

- a. pleuritic pain is characteristic
- b. insidious onset
- c. headache
- ` d.cough

127. In colles fracture the distal fragment is displaced

- a. dorsally and backwards
- b. ventrally and backwards
- c.

128. In a patient with palpable gallbladder and jaundice which of the following is most likely

- a. gallstone in cystic duct
- b. gall stone in the common bile duct
- c. the cause of the above problem is not stones

129. In a patient diagnosed with sjogren's syndrome which is not true

- a. dry eyes are a presenting symptom
- b. steroids can cure most cases
- c. can be secondary to other connective tissue diseases

# 1999

Medicine

Type 'A' questions

CARDIOVASCULAR DISEASE

1. A patient with acute myocardial infarction used heparin; which of the following methods is used for monitoring:
  - a. BT
  - b. PT
  - c. ARTT
  - d. INR
  - e. Fibrinogen
  
2. A patient has a mitral valve stenosis – all of the following signs are correct EXCEPT:
  - a. AF
  - b. S 1 increased
  - c. Palpitation increased S 2 in apex
  - d. S 3
  - e. Presystolic murmur
  
3. In a patient with myocardial infarction was found a new systolic murmur on examination. Cardiac ejection fraction was 55%. Which of the following is MOST probable cause:
  - a. Aortic regurgitation
  - b. Papillary muscle dysfunction
  - c. Mitral valve stenosis
  - d. Papillary muscle rupture
  - e. Tricuspid valve regurgitation
  
4. A young woman has hypertension with fibrosing stenosis of renal artery (60%) which of the following is the MOST appropriate treatment:
  - a. Renal artery angioplasty
  - b. ACE Inhibitors
  - c. Antihypertensives
  - d. Diuretics
  - e. Arteries dilation drugs
  
5. An obese patient with diabetes mellitus is under anti-hypertension treatment. His blood pressure is 160/100mmHg on examination. Which of the following is your INITIAL consideration for this patient:
  - a. Decreased protein in his diet
  - b. Concurrent hypertensive therapy
  - c. Give diuretics
  - d. Control sugar intake in the diet
  - e. Ideal weight
  
6. At which level of cholesterol you consider to give lipid-lowering statins (eg, simvastatin, pravastatin)
  - a. 6 mmol/l
  - b. 5.5 mmol/l
  - c. 5 mmol/l
  - d. 4.5 mmol/l
  - e. 4 mmol/l

7. Patient with coronary heart disease and xanthoma along the Achilles tendons. Which of the following is THE MOST LIKELY diagnosis:

- a. Familial hypercholesterolaemia
- b. Familial combined hyperlipidaemia
- c. Remnant removal disease
- d. Hypolipoproteinaemia

8. Which of the following examination supports the diagnosis of pulmonary thromboembolism:

- a. Chest PA X-rays
- b. Pulmonary Doppler
- c. Blood gas
- d. Pulmonary ventilation perfusion mismatched on pulmonary scan
- e. Lung function measurement

Contagious diseases

9. Which of the following is the MOST COMMON characteristic of pleura effusion of TB:

- a. Glucose decreased or absent
- b. Monocyte
- c. Blood stained
- d. Protein <2g
- e. Find TB bacillus

10. Which following group is the MOST at RISK OF HIV infection:

- a. Heterosexual
- b. Homosexual
- c. Intravenous drug user
- d. Blood transfusion
- e. Haemophilias

11. Which of the following group is LEAST LIKE of infection of HIV:

- a. Heterosexual
- b. Blood Transfusion
- c. Homosexual
- d. Haemodialysis
- e. Haemophiliacs

13. A farmer has suddenly had undulant fever for 2-3 days with abruptly headache severe myalgia, jaundice and petechial rash on the skin; liver and spleen enlargement. Which of the following is the diagnosis:

- a. Brucellosis
- b. Yellow fever
- c. Leptospirosis
- d. Malaria
- e. Anthrax

14. Dengue fever, all followings are correct EXCEPT:

- a. Arbovirus
- b. Mosquito transmission
- c. Children get least severe illness
- d. There is no specific treatment
- e. Air droplet infection

15. A patient with mycobacteria infection which of the following is most appropriate treatment
- cotrimoxazole
  - tetracycline
  - Amoxicilline
  - Metronidazole
  - Erithromycin

#### Emergencies

16. What is compatible with critical illness:
- Increased cortisol , increased TSH
  - Both cortisol and TSH decreased
  - Increased cortisol, decreased TSH
  - Decreased cortisol, increased TSH
  - Normal cortisol, increased TSH

#### ENDOCRIN DISEASE

17. A 65 year old man has 'bulk" diarrhoea with "oil". He drinks alcohol for many years . Which of the following is your investigation
- IV pancreagraph
  - Endoscopy pancreagraph
  - Abdominal X-ray
  - Ultrasound
  - Enema

18. For an elderly man, which above following blood sugar level need further investigation
- 5 mmol/l
  - 5.5 mmol/l
  - 6 mmol/l
  - 6.5 mmol/l
  - 7 mmol/l

19. Side effective of corticosteroids including all the following EXCEPT
- Lymphocytosis
  - Lymphopenia
  - Hirsutism
  - Osteoporosis
  - Weight gain

20. A patient has headache, prominent supraorbital ridge prognathism teeth spacing increased, thick spade-like hands and seborrhoea and coarse oily skin. Which of the following is BEST investigation to establish diagnosis:
- Insulin-glucose
  - X-ray of pituitary test
  - Cranial CT scan or MRI scan
  - SERUM T4+PRL+growth hormone level
  - Oral glucose tolerance test (OGTT)

21. Which following patient is LEAST LIKELY to suffer primary hypothyroidism:
- 65 year old female with goitre
  - 35 year old female with depression
  - 28 year old female with 3 years menorrhagia
  - 18 year old boy with relative less age

e. 32 year female with anaemia unresponsive to iron, B 12 and folate

22. Patient has a single lump on one side of the thyroid, all following situations suggest malignant EXCEPT

- a. Single nodule
- b. US showed a solid nodule
- c. Thyroid scan show "HOT" lump
- e. Associated with increased serum thyroglobulin
- f. Associated with hoarseness

#### DESEASE INVOLVING EYE

23. Uveitis is MOST COMMONLY found in which of the following diseases:

- a. Reiter's disease
- b. Rheumatoid arthritis
- c. Ankylosing spondylitis
- d. Sjogren's syndrome
- e. Psoriasis

24. \_\_\_\_\_

- a. An infection of frontal sinuses
- b. Thyrotoxicosis
- c. Neoplastic lesion in lamina cribrosa
- d. Nasopharyngeal tumour invading the orbit
- e. Glaucoma

#### GASTROINTESTINAL DISEASE

25. Eradication of HELICOBACTER PYLORI for duodenal ulcer:

- a. Increase ulcer healing rate
- b. Influence relapse rate
- c. Decrease rate of gastric lymphoma
- d. Decrease local gastritis
- e. Decrease cimetidine dosage

26. A young patient comes from overseas with diarrhoea, no blood. Temperature 37.9C, stool examination showed few Salmonellas. What is your management:

- a. Observation and repeat stool examination 3 days later
- b. Broad spectrum antibiotic like amoxicillin
- c. Trimethoprine plus sulphasalazine
- d. Cotrimoxazole plus trimethoprim
- e. Reassure

27. Which of the following is MOST RELATED to adenoma/carcinoma of the colon:

- a. Aspirin can caused
- b. Low fibre diet
- c. Saturated fat more than the unsaturated fat in the diet
- d. Alcohol
- f. Smoking

28. A 28-year-old policeman on sulphasalazin therapy for ulcerative colitis, Right hypochondrial pain. SGPT and alk, phosphatase increased, bilirubin mild increased, SGOT normal and liver aminotransferase enzymes normal (?) which of the following is THE MOST LIKELY diagnosis:

- a. Primary biliary cirrhosis
- b. Side effect of sulphasalazin
- c. Sclerosing cholangitis
- d. Cholangitis
- e. Acute viral hepatitis

29. Patient with supposed hepatoma. Which of the following questions is MOST helpful for diagnosis:

- a. Present liver cirrhosis
- b. Alcohol liver disease
- c. Acute hepatitis
- d. Cholangitis
- e. Family history of liver hepatoma

30. Ascitis

- a. \_\_\_\_\_
- b. Bilateral abdominal varicosis
- c. Peri-oral teleangiectasia
- d. Jaundice and palmar erythema
- e. Dupytren's contracture

#### HAEMATOLOGICAL DISEASE

31. In anaemia patient with increased transferrin. All of the following is correct EXCEPT:

- a. Increased serum ferritin
- b. Decreased serum ferritin
- c. Increased total iron binding capacity
- d. Increased transferrin
- e. Decreased serum iron

32. An anaemic patient with increased transferrin. All following are correct EXCEPT:

- a. Thalassemia major
- b. Chronic disease
- c. Iron deficiency
- d. Sideroblastic anaemia
- e. Haemolysis

33. Which of the following is typically occurring in heparin – induced thrombocytopenia:

- a. Joint bleeding
- b. Petechial purpura on the skin
- c. Thrombosis
- d. Haematuria
- e. Ecchymosis

34. In haemolytic anaemia, all is correct EXCEPT:

- a. Increased urobilinogen
- b. Serum urobilin
- c. Erythrocyte count
- d. Decreased MCV
- e. Increased serum iron

35. A 67 year-old alcoholic man has backache, ESR 120mm/h. Which of the following is MOST LIKELY diagnosis:

- a. Multiple sclerosis
- b. Acute lymphatic leukaemia
- c. Hodgkin disease

- d. Non-Hodgkin disease
- e. Multiple myeloma

36. A patient with splenomegaly 12cm below ribs. There was no lymph node enlargement. Leucocytes 33000, decrease in erythrocytes, leukocytosis. What is the diagnosis:

- a. Chronic granulitic (?) leukaemia
- b. Myelofibrosis
- c. Hodgkin disease
- d. Non-Hodgkin disease
- e. Acute lymphoma

37. A 67 year-old patient with long standing alcoholism. Lab: HB 9.8; ESR 120; leukocytes 10000 and left shift. Which of the following is diagnosis:

- a. Viral hepatitis
- b. Multiple myeloma
- c. Iron deficiency anaemia
- d. Fatty liver

38. A 28 year-old female with long standing alcoholism, history of bowel irritation. Lab: HB 9.8; MCV 110. Which is the MOST LIKELY diagnosis:

- a. Whipple's disease
- b. Colorectal carcinoma
- c. Coeliac disease
- d. Irritative bowel syndrome
- e. Ulcerative colitis

#### IMMUNOLOGICAL DISEASE

39. A 74 year-old women have polymyalgia rheumatica. What is CHARACTERISTIC:

- a. Distal limb muscle aching
- b. Increased muscle CPK
- c. There is fatigue, fever and depression
- d. ESR normal
- e. Giant cell arthritis

#### NEUROLOGICAL DISEASES

40. Left homonymous hemianopia. Where is the lesion:

- a. Right temporal lobe
- b. Left optic nerve
- c. Optic chiasm
- d. Right optic radiation
- e. Right occipital cortex
- f.

41. A 64 year-old patient suddenly had face, arm and leg weakness on the same side of the body. No sensory loss or loss of consciousness, where is lesion:

- a. Middle cerebral artery
- b. Carotid artery occlusion
- c. Hypertensive disease local in the internal capsule
- d. Infarction in the putamen
- e. Aneurism of the sinus cavernosum

42. All following signs are present in Parkinson disease EXCEPT:

- a. Loss of postural reflexes
- b. Myoclonus

- c. Decreased reflexes
- d. Muscle weakness
- e. Broad wide gait

43. Upper motor neuron damage – all can occur EXCEPT:

- a. Hyperreflexia in arm
- b. Spasticity of the extensor muscles of the leg
- c. Proximal muscle weakness
- d. Absent abdominal reflexes
- e. Ankle clonus

44. A 35 year-old female with facial pain, associated sensory delicate, no trigger zone.

What is the diagnosis:

- a. Trigeminal neuralgia
- b. Ramsay – Hunt syndrome
- c. Bell's palsy
- d. Multiple sclerosis
- e. Tolosa – Hunt syndrome

45. These are all phenytoin side effects EXCEPT:

- a. Nystagmus
- b. Osteomalacia
- c. Stimulate osteoporosis
- d. Lymphoma
- e. Deafness

46. Patient 64 year-old, suddenly occurred hemiparesis and paralysis of soft palate and Horner's syndrome on the same side of the body. Where is the lesion:

- a. Middle cerebral artery
- b. Carotid artery occlusion
- c. Vertebro-basilar artery
- d. Giant cell arteritis
- e. Subclavian steal syndrome

#### RESPIRATORY DISEASES

47. A 55 year-old patient has blood pressure 200/130mmHg. His left kidney is small and urine tests and kidney functions are normal. What is your NEXT investigation:

- a. Intravenous pyelography
- b. Retrograde
- c. Renal CT scan
- d. Renal scan

48. \_\_\_\_\_ and O<sub>2</sub> \_\_\_\_\_ was given \_\_\_ O<sub>2</sub> therapy 4 hour later \_\_\_\_\_ showed PO<sub>2</sub> 68 mmHg, and PCO<sub>2</sub> 40 mmHg. What is your next therapy:

- a. Reduce O<sub>2</sub> concentration and do blood gas analysis after 30min
- b. Give bronchodilators
- c. Hydrocortisone
- d. Intubation and ventilation
- e. Antibiotics injection

49. Patient has sudden dyspnea. Physical examination found left upper chest respiratory movements increased. In left lower part percussion dullness and decreased respiratory sounds. What is the diagnosis:

- a. Atelectasis
- b. Pneumonia
- c. Pleural effusion
- d. Pulmonary thrombosis
- e. Pneumothorax

50. Which of the following is the MOST consistent with the diagnosis:

- a. Oat cell carcinoma-blubbing
- b. Pneumonia-hyperresonance + decreased chest wall movements
- c. Emphysema-bilateral alveolitis + clubbing
- d. Fibrosing alveolitis-widespread respiratory
- e. Asthma-prolonged expiration with wheeze

#### RENAL DISEASES

51. A young patient has haematuria and proteinuria with respiratory infection. There is no hypertension. He has similar situation before. The diagnosis is:

- a. Nephrotic syndrome
- b. Streptococcal glomerulonephritis
- c. IgA nephropathy
- d. Acute pyelonephritis
- e. Membranous nephropathy

52. Post-operative third day serum Na 165mmol/l and urine Osmo is 250 (normal 50 – 1000). The MOST LIKELY cause is:

- a. Thiazide diuretic dose is too high
- b. Diabetes mellitus
- c. Diabetes insipidus
- d. SIADH
- e. Acute renal failure

53. Staghorn calculi can be found in the entire following situation EXCEPT:

- a. Recurrent pyelonephritis
- b. Immobilisation
- c. Idiopathic hypercalciuria
- d. Primary hyperparathyroidism

AMC 23RD OCTOBER 1999

MCQ PAPER I

PAEDIATRICS

p.s : the following is a reconstruction of the essence only of the question and answer ( stem and answer options) . The great majority of the actual exam questions were very much longer in the form detailed clinical case histories.

R.?? = repeated questions and when

R.T = repeated topic only

R.AMCQ = repeated question from "Annotated MCQ" book

35Type 'A'question:

Behavioural problem

1 A 7 yr with enuresis . What is the most likely cause?

- a. UTI
- b. Family disorder

- c. O.M
- d. Vesico -ureteric reflux
- e. Ectopic ureters

CVS:

2 A 6 yr boy found to have a systolic murmur on the left sternal border. His weight is on the 3rd centile. What is your advice to his parents?

- a. That he has Atrial Septal Defect
- b. That he has Ventricular Septal Defect
- c. That he should be referred to a cardiologist
- d. That the murmur will remit spontaneously
- e. That surgery is essential to correct his condition

Emergencies:

3 WOF is the most likely cause of meningitis in the 4 y.o child?

- a. E.coli
- b. Haemophilus influenzae
- c. Adeno-virus
- d. N. Meningitidis
- e. Strep. Pneumoniae

4 A 3 y.o child ingested washing detergent . What is the most appropriated initial action

- a. Give the child milk to drink
- b. Urgent endoscopy
- c. Induce vomiting by ipecac
- d. Gastric lavage
- e. Induce osmotic diarrhoea by mannitol

GIT

5 Jaundice 5 days after birth is most likely due to

- a. Physiological deficiency of glucoronyl transferase
- b. Physiological excessive destruction of the RBCs
- c. Iso-immunization
- d. Biliary duct atresia
- e. Breast milk jaundice

6 A 2 y.o presented with chronic constipation. AXR shower heavy faecal loading of the colon . P/R was uneventful. What is the most appropriated next step?

- a. Double contract barium enema
- b. Rectal biopsy
- c. Anal dilation
- d. AXR
- e. Laxatives

7A child brought in by his mother b/o vomiting. His weight is within normal centiles for his age. WOF is the most PPROPRIATE?

- a. Urine microscopy and culture
- b. Advise the mother to make the milk formula thicker
- c. Dilute his milk with water
- d. Give him less milk
- e. Check the strength of the milk formula

8 WOF is most likely cause of mouth ulcers in children?

- a. Aphthous ulcer
- b. Behcet's syndrome
- c. Herpes simplex

- d. Herpes Zoster
- e. Self inflicted

Haemo

9 A young boy presents with widespread petechial rash . Otherwise well Blood film shows the following : Hb 10w , WCC 10w, Platelets 50x10<sup>9</sup> (150-400x 10<sup>9</sup>)

WOF is the most likely cause?

- a. TIP
- b. Salicylate overdose
- c. Anaphylactoid purpura
- d. Haemophilia
- e. Von willebrand's Disease

Malignancies:

10 5 yo presented with a mass in the left lower abdominal quadrant. Otherwise , he is well.

What is the most likely cause?

- a. Neuroblastoma
- b. Acute leukaemia
- c. Nephroblastoma (Wilm's tumour)
- d. Hodgkin's disease
- e. Non-hodgkin lymphoma

11 A child discovered a lump in the lower posterior triangle of the neck . O/E the lump fluctuated and transilluminated. Its consistency was soft. What is the most likely cause?

- a. Branchial cyst
- b. Carotid body tumour
- c. Enlarge lymphnode
- d. Thyroglossal cyst
- e. Cystic hygroma

Neonatology:

12 A full term neonate was born at 30/4, 1500 g was noticed to be cyanosed on the hands and feet . O/E the infant was responsive and jittery on handling. The respiratory rate is 40/min and lung and heart are clinically normal . WOF is correct?

- a. The infant most probably has a convulsion
- b. O<sub>2</sub> should be given
- c. Blood sugar level should be checked
- d. Blood calcium level should be checked
- e. The infant's rectal temperature should be checked

Neurology:

13 All the following are true about cerebral palsy except:

- a. Epilepsy occurs in less than 50% of the patients
- b. Feeding difficulties are common
- c. Majority develop mental handicap (IQ less than 70%)
- d. Spastic diplegia is the most common type
- e. Is associated with intellectual disability

Resp:

14. A 1 year-old boy was brought to you c/o fever. O/E. you find his temp. to be 37.5°C with widespread bilateral wheezing on chest auscultation. Two family members just recovered from upper respiratory tract infection. The MOST LIKELY cause is:

- a. Acute bronchiolitis
- b. Croup.
- c. Asthma

- d. Pneumonia
- e. Inhaled foreign body

AMC EXAM 25 OCTOBER 1999  
MCQ PAPER II  
OBS & GYN

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R. AMCQ = Repeated questions from "Annotated MCQ" book

30 Type 'A' Questions:

### OBSTETRICS

Antenatal Care:

1. All the following may be reason for admitting a pregnant woman EXCEPT:

- a. Show (bleeding)
- b. Headache, visual disturbances and abdominal pain
- c. Rupture of membranes
- d. Painful contractions
- e. Contractions at intervals of 1/5 – 6 minutes

Bleeding in Pregnancy:

2. A woman presented with vaginal bleeding at 8/40 of her pregnancy. Blood loss was estimated as 1L. O/E her BP is 90/60, pulse is 130/1'. The fetus is dead. All the following is relevant to her treatment EXCEPT:

- a. Resuscitate her with I/V fluids under CVP control
- b. Do U/S to check ectopic pregnancy
- c. Order a coagulation profile
- d. Do U/S to check placenta praevia
- e. Insert a urinary catheter

3. You were called to the maternity wing for a 34 yrs old woman G5 P4 who has delivered earlier in the same day. She was bleeding bright red blood from her vagina. The uterus was small and contracted and the placenta and membranes were intact. The MOST LIKELY cause of her bleeding is:

- a. Uterine atony
- b. Retained products of conception
- c. Laceration of the genital tract (uterus, cervix and vagina)
- d. Coagulopathy
- e. Uterine rupture

CIG:

4. WOF is true about CIG

Genetic Counselling:

5. A woman has a child with Spina Bifida. She is pregnant again and asks your advice



about this pregnancy. You may advise her to do all the following EXCEPT: (R.T. 3/9)

- a. Amniocentesis at 16-18 weeks
- b. U/S at 16 weeks to detect any fetal malformation
- c. U/S at 12 weeks for anencephaly
- d. U/S at 11-12 weeks to measure the Nuchal Fold
- e. Triple or quadruple test at 16 weeks

Malpresentation:

6. A 33y.o woman is seen during routine antenatal visit. O/E she is 156cm tall, at 31/40 weeks with breech presentation. WOF is MOST appropriate?

- a. Ask her to return again after 2 weeks
- b. Order X-ray pelvimetry
- c. Arrange for external cephalic version at 34-36/40
- d. Prepare the patient and do external cephalic version after 30min

PIN:

7. A 34y.o, G2 P1 presents at term with mild pre-eclampsia and a Bishop score of 4. WOF is INCORRECT in her management?

- a. Rupture the membranes
- b. Rupture the membranes then put up Syntocinon infusion
- c. Put up Syntocinon infusion in Hartman's solution
- d. Apply prostaglandin PE2 -intra-vaginally
- e. Apply prostaglandin PE-2 intra-vaginally

Pregnancy Plus:

8. A 28y.o, G2 P1 is Rh-ve is currently 8 weeks pregnant, She didn't have any problem with 1st child because he was also Rh-ve. However, the baby needed phototherapy because of liver immaturity. WOF is MOST APPROPRIATE in the management of her present pregnancy?

- a. indirect coomb's test
- b. Amniocentesis at 36-37 weeks of gestation to determine fetal bilirubin level
- c. Delivery at 34-37/40
- d. U/S at 20-30/40 to look for hydrops fetalis

9 A 30 yrs pregnant woman also suffer from asthma . WOF is true?

- a. Should not be treated by b-agonists in the 3rd trimester b/c their tocolytic effects
- b. Should not be treated by corticosteroids
- c. Does not get more frequent bronchospasm
- d. Will need caesarean section at 36-37 wks of gestation
- e. May need more frequent b-agonists during the pregnancy than before

10 A 8 wks pregnant woman comes into contact with a child who was recently diagnosed with Rubella. All of the following is true EXCEPT

- a. Give her anti-rubella specific IG
- b. If infection occurs the fetus may suffer from microcephaly, hearing loss and cardiac abnormalities
- c. Order IgG and IgM antibodies
- d. Repeat testing for IgG and IgM at 14-16/40 even if initial test was (-)
- e. Vaccinate her against rubella

11 WOF is the most likely cause of painless jaundice in pregnancy?

- a. Cholestasis
- b. Fatty liver of pregnancy
- c. Hyperemesis gravidarum

- d. Acute hepatitis
- e. Cholelithiasis

#### GYNAECOLOGY

Bleeding in non-pregnant

12 a 42 yo woman on O/C come to see you b/o mid-cycle spot bleeding. What is the most likely cause?

- a. Reduced oestrogen level
- b. Cervical ectropion(erosion)
- c. Cervical intra-epithelial neoplasia
- d. Endocervical cancer
- e. Atrophic vaginitis

Cervix

13 WOF is the best treatment for cervical cancer stage 11B

- a. Cone biopsy
- b. Total hysterectomy
- c. Total hysterectomy followed by chemotherapy
- d. Chemotherapy alone
- e. Radiotherapy

Contraception

14 A 32 yrs woman falls pregnant despite using an IUD, She consult you . WOF is correct?

- a. Copper cause congenital malformations
- b. The pregnancy should be terminated because copper is very harmful to mother and fetus
- c. IUD is associated with 405-50% increased incidence of ectopic pregnant
- d. IUD cause pelvic inflammatory disease
- e. Vaginal examination should be conducted and the IUD removed under U/S guidance if the thread is found

Hormones:

15 A 50 yr woman has been on tamoxifen fro 5 yrs breast cancer . Present with mid –cycle vaginal bleeding . What is the most likely cause?

- a. Metastases from the breast
- b. Endometrial cancer
- c. Endometrial hyperplasia
- d. Endometrial hypoplasia because of tamoxifen
- e. Decreased oestrogen level because of tamoxifen

16 The OCP has all the following effects EXCEPT

- a. Reduce iron deficiency anaemia
- b. Improve serum lipids profile
- c. Reduce the incidence of endometriosis
- d. Reduce benign breast
- e. Reduce the incidence of ectopic pregnancy

17 All of the following are true about Depo-provera EXCEPT

- a. decrease the incidence of thrombo-embolism
- b. Decrease the incidence of ectopic pregnancy
- c. May delay pregnancy after depo-provera is ceased
- d. May cause weight gain
- e. They do not affect glycaemic control in diabetics

18 AbsoluteC/I to OCP

- a. Smoking
- b. Migraine with hemiplegic aura
- c. Diabetes mellitus

- d. Gall bladder disease
- e. Hypertension

HRT:

19 A 55 yrs woman presented 3 yrs . after menopause asking your advice about HRT. She was not symptomatic and O?E her vagina was well oestrogenised. What is the most likely cause ?

- a. Ectopic progesterone secretion
- b. Oestrogen producing tumour
- c. The time lag since her menopause is too short for symptoms to occur
- d. Peripheral conversion of androstenedion to oestrogen
- e. Peripheral conversion of Di-Hydro- Epi- Androsterone(DHEAS) to oestrogen

20 Progestion against athorosclerosis mediated by HRT. May be due to all the following EXCEPT

- a. Decrease total cholesterol level
- b. Decrease LDL level
- c. Decrease HDL level
- d. Decrease total triglycerides levels
- e. Protective effect on vascular wall endothelium

21 A 53yrs woman non-symptomatic woman presented asking your advice about HRT fro prevention of osteoporosis because of positive family history. She has had hysterectomy 2 yrs. Earlier. Which of the following would you prescribe her

- a. Ethinly oestradiol 0.01-0.05mg
- b. Conjugated oestrogen 0.675mg
- c. Oestradiol valerate 1-2 mg
- d. Piperazine oestrone 0.625 mg
- e. Oestriol 1 mg

Incontinence:

22 Management of urge incontinence includes all the following EXCEPT

- a. Anti-cholinergic drugs
- b. Pelvic floor muscles exercises
- c. Dilatation of the bladder sphincter
- d. HRI
- e. Baldder retraining (Bladder drill)

Infertility

23 After ejaculation which of the following is the site were MOST of the sperms are lost

- a. The vagina
- b. The cervix
- c. The uterine cavity
- d. The ampulla
- e. The isthmus

24 A 28 yo woman with 18/12 h/o post pill amenorrhoea [resents b/o infertility .All of the following investigations may need to be carried out EXCEPT

- a. S. Prolactin
- b. CT scan even if the prolactin level is normal
- c. S. oestrogen
- d. FSH
- e. Laparoscopy for PCO

Ovaries

25. A young woman presents b/o acute pelvic pain after 8 wks of amenorrhoea .B\_hcg is

(-) and on U/S . She is found to have an 1.8cm cyst, what is the most appropriated action

- Ask too see her again after 3 wks
- Refer her fro laparoscopy
- Refer her for surgical remove of the cyst
- Prescribe oral contraceptive pill
- Prescribe her clomiphene

Pelvic pain

26. A 24 yrs woman presents b/o acute pelvic pain and spotting after 8 wks of amenorrhoea . B-HCG is +, In the past she has had appendicectomy and cholecystectomy . what is the least likely cause of her pain

- Ectopic pregnancy
- Red degeneration of a fibroid
- Tortes ovarian cyst
- Pelvic abscess
- Inevitable abortion

Procedures:

27 A woman is being investigation for infertility . Her gynaecologist advised laparoscopy and she asks your opinion about the procedure . you may tell her all the following EXCEPT

- Visceral damage is possible but unlikely to happen
- Vena caval or aortic rupture can cause cardiac arrest and death
- Laparoscopy is diagnostic of PCO
- Shoulder pain is common after the procedure
- Serious heart or lung disease usual, do not contraindicate the procedure

## SURGERY

Integument/dermatology

Head and neck /eye/ENT

1. A young man complains of a misty vision when he is reading books, the eye vision test showed 5/60 on both eyes. When he wears glasses the vision test showed 40/60 on left eye and 35/60 on the right eye. Which of the following is the most likely basis on his complains?

- Diabetic retinopathy
- Cataract
- Myopia
- Chronic simple glaucoma
- e.

Nervous system /Neurology

2. Which of the following lesion can cause the wrist drop?

- Radial nerve
- Ulnar nerve
- Median nerve
- Brachial plexus nerve
- e.

3. A young man with bilateral weakness and wasting of thenar, hypothenar and interossei of hand , which of the following is the most possible cause

- Bilateral ulnar nerve palsies
- Bilateral median nerve palsies
- Multiple sclerosis
- Brain stem infarction

e.

Musculoskeletal Orthopaedics and rheumatology

4. Which of the following is the management for the large necrosis of limb?

- a. High dose of steroids
- b. Antibiotics
- c. Cytotoxic drug
- d. Tetanus toxoid
- e.

5. Picture of a palm fascia thickening and fibrosis with skin puckering associated with the ring finger and little finger flexion (Dupuytren's contracture) . Which of the following is the most common cause?

- a. Farm worker
- b. Chronic infection alcoholism
- c. Vibrating tool damage
- d. Smoker
- e.

6. Which of the following situation is the most common complication of an intra-epiphyseal fracture in a long bone in an adolescent?

- a. Mal-union or non-union
- b. Increase spurt of growth in long bone
- c. Premature cessation of growth
- d. Stiffness
- e. Deformity

Circulation system /heart/vessels

7. A 60 year-old male patient presents a sudden abdominal pain which is severe pain and radiates to the back , there are 120/min of pulse, 90/60 mmHg of blood pressure, which of the following is the most likely diagnosis?

- a. Acute pancreatitis
- b. Leaking aneurysm
- c. Perforation of duodenum
- d. Acute cholecystitis
- e. Most characteristic feature of fat embolism

8. Which of the following is the most likely characteristic of fatty embolism after lower limb trauma?

- a. Petechiae usually occur in the upper body
- b. Never involve the CNS
- c. Petechiae usually occur in the lower body
- d. Dyspnoea and tachypnoea
- e.

9. A lady presents an engorged long saphenous veins and engorged tributaries in the calf and thigh , which of the following is the management?

- a. Ligation of saphenous vein
- b. Ligation of stripping vein
- c. Amputate the leg if varices are severe
- d. Sclerotherapy
- e. Remove varices vein under local anaesthesia

10. Management of bedridden in a patient include all of the followings EXCEPT:

- a. Keep dry the pressure area

- b. Use a water bed
- c. Use sheep skin on the bed
- d. Keep ventilation on both sides of feet
- e. Constant movement by turning the patient

11. A 53 yrs man has a sudden blindness on the one eye, Which of the following is common cause?

- a. Block of proximal part of subclavian artery
- b. Temporal arteritis
- c. Block entire carotid artery
- d. Block of vertebral artery

Respiratory system /lung /chest

12. A female patient developed tachycardia and fever(T38C) at 24 hrs after elective cholecystectomy. She was , otherwise , well before operation , apart from biliary pain. She was reluctant to cough, but produced a small amount of white sputum. Which of the following is the most likely explanation of her fever?

- a. Leakage of bile
- b. Wound infection
- c. Thrombophlebitis
- d. Pulmonary atelectasis
- e. Bronchopneumonia

13. Which of the following is the most serious condition requiring immediate intervention?

- a. Tension pneumothorax
- b. Pneumohaemothorax
- c. Open pneumothorax
- d. Subcutaneous emphysema
- e. Flail chest

14. A 70 yrs man has history of heavy smoking and haemoptysis, there are pleural plaques on the chest x-ray . Which of the following is next management?

- a. Bronchoscopy to look for asbestos bodies
- b. Percutaneous biopsy for mesothelioma
- c. Open chest biopsy
- d. Give antibiotics
- e. Thoracoscopy and.

Gastrointestinal system /abdomen/abdominal wall

15. A woman presents sudden onset of abdominal pain, vomiting for 8 hrs. O/E: there were irregular pulse , tenderness of abdomen, bowel sound absent and bloody discharge from rectum . Which of the following is the most likely diagnosis?

- a. Ulceration colitis
- b. Colon cancer
- c. Diverticulitis
- d. Mesenteric disease
- e. Crohn `s disease

16. Five days after appendectomy , a patient develops 39C of fever, Which of the following is the most likely cause of the fever?

- a. Appendix abscess
- b. Wound infection
- c. Thrombophlebitis
- d. Pulmonary atelectasis
- e. Bronchopneumonia

17. Which of the following is the characteristic of fistula?

- a. Communication with two side epithelium
- b. A kind of ulcer
- c. Always leads to granuloma
- d. Sinus
- e. Communication with one end epithelium cavity

18 Lithogenesis of bile is increase by all of the following EXCEPT:

- a. Age
- b. Weight loss
- c. Malabsorption
- d. Crohn's disease
- e. Hyperlipidaemia

19. Which of the following is the most common hiatus hernia?

- a. Sliding oesophageal hernia
- b. Rolling hernia
- c. Pare oesophageal hernia
- d. Mixed hernia

20. A man, middle age, complains that there was a mild abdominal pain with an abdominal distension , which was relieved by passing flatus, There was semiformal stool motion . Which of the following is the most possible diagnosis?

- a. Irritable bowel syndrome
- b. Cancer of colon
- c. Coeliac disease
- d. Diverticular disease

21. Picture of CT scan of the abdomen shows a huge localised swelling in the abdominal cavity. Which of the following is the least likely cause ?

- a. Pancreatic pseudocysts
- b. Ascites
- c. Splenic cyst
- d. Pancreatic cancer

Breast/endocrine system

22. Which of the following is the most common cause for bloody discharge from the nipples?

- a. Intra-ductal carcinoma
- b. Intra-ductal papilloma
- c. Paget's disease of the nipples
- d. Fibroadenoma
- e. Mammary duct ectasia

23. Which of the following is the best time for self breast examination ?

- a. Before menstruation
- b. During menstruation
- c. After menstruation
- d. Just before ovulation
- e. Just after ovulation

Reproductive system

24. An enlarged , red and painful testes in a 10 yrs boy, which of the following is your management?

- a. Reassure
- b. surgical exploration of scrotum
- c. urine analysis
- d. urine analysis and send him home
- e. send him to out-patient urology

#### Haematopoietic system

25. In a patient with spherocytosis, all of the following may happen after splenectomy EXCEPT

- a. Life span of RBC will become normal
- b. Reduce the rate of haemolysis
- c. Increase risk of infection
- d. Increase platelet
- e. Increase staphylococcus infection

26. Regarding DIC, all of the followings are true EXCEPT:

- a. Fibrinogen decreased
- b. Fibrinogen degradation products decreased
- c. Prolong APTT and INR
- d. Antithrombin III decreased
- e. Thrombocytopenia

#### Renal system

##### Nutrition /metabolism

27. In third day after head surgery , a patient has reduced levels of serum Na<sup>+</sup> k<sup>+</sup> and cl<sup>-</sup>, the urine osmolality is normal, but blood osmolality is low, which of the following is the most likely cause?

- a. Water intoxication
- b. Inappropriate ADH syndrome
- c. Acute renal failure
- d. Chronic renal failure
- e. Diabetic insipidus

#### Infection disease:

28. Which of the following is the most likely site detected anaerobic infection:

- a. Brain abscess
- b. Hip prothesis
- c. Lung abscess
- d. Long bone osteomyelitis
- e. Pleural effusion

#### Clinical Oncology

29. Regarding cancer of the thyroid all of the followings are true EXCEPT:

- a. Commonest finding was a solitary nodule
- b. Hot nodule on isotope scanning
- c. Hoarseness is one of the symptoms
- d. Difficulty in swallowing
- e. More in males

30. A female patient presents a tinnitus, sensorineural hearing loss and absence of corneal reflex. Which of the following is the MOST LIKELY cause:

- a. Brainstem glioma
- b. Acoustic neuroma
- c. Meniere's disease
- d. Vestibular labyrinthitis

e. Ear wax

31. Picture: Which of the following is INITIAL management for a woman with a lump in the breast:

- a. Needle aspiration
- b. Needle core biopsy
- c. Excision
- d. Radiotherapy
- e. Radical mastectomy

32. All of the following statements regarding cancer of lip are true EXCEPT:

- a. It accounts for 30% of head and neck cancers
- b. It usually occurs on upper lip
- c. It most is squamous cell carcinoma
- d. Occur equally in males and female
- e. ?

33. A patient comes to see you and shows a lump on left arm, which of the following is the MOST IMPORTANT information you should ask:

- a. What kind of pain is it?
- b. How long have you been found the lump?
- c. How do you feel?
- d. Which part of arm is the location of the lump?

34. Which of the following metastatic carcinoma have the WOST prognosis:

- a. Prostate
- b. Breast
- c. Stomach
- d. Uterus
- e. Colon

35. A patient has single lump on one side of thyroid. All following situations suggest malignant EXCEPT:

- a. Single nodule
- b. Ultrasound showed a solid nodule
- c. Thyroid scan showed a 'hot' lump
- d. Associated with serum thyroglobulin increased
- e. Associated with hoarseness

Clinical Immunology:

36. A young man with an accident on his motorcycle and presented with 3cm of bone protruding through the skin on the leg. What is the next management?

AMC EXAM MONDAY 25TH OCTOBER 1999

MCQ PAPER II

PSCHIATRY

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20 TYPE 'A' QUESTION:

ADOCUMENT DISORDER:

1. What is CORRECT in normal Grief?
  - a. Affective reactivity is preserved
  - b. Suicidal risk is increased
  - c. Progression to pathological grief is common
  - d. May precipitate schizophrenia
  - e. May precipitate delusional disorder

COMMUNITY & LIAISON PSYCHIATRY

2. You were called for a young patient of yours who has stopped taking his medication and was very agitated and waving a sword. What is the BEST COURSE OF action?
  - a. Talk to him in a calm voice to convince him to give you the sword and conduct a mental examination
  - b. Talk to him firmly that he should lay down his sword
  - c. Withdraw from the situation and call the police to help you transfer him to hospital

Recall Paper AMC MCQ EXAM OCT 1999

Surgery

1. A young patient present with a lump in the arm. You are unsure about its nature. What do you ask to help to establish your diagnosis? Choose what is the best response?
  - A. Is it painful?
  - B. Is there any lump in other side of the body?
  - C. Is there any change of bowel habit?
  - D. What do you think cause of the lump?
  - E. How long it present?
2. What is the common cause of bone tumour in the pelvis of young adult?
  - A. Metastatic Tumor
  - B. Osteoma
  - C. Osteosarcoma
  - D. Chondroma
  - E.
3. What is the common cause amaurosis fugax (transient monocular vision)?
  - A. Stenosis of internal carotid artery?
  - B. Giant cell arteritis
  - C. Vertebral artery occlusion
  - D. Embolism to middle cerebral artery.
  - E.
4. A woman developed tinnitus and sensory neural deafness decreased sensation in trigeminal area. What is the most likely cause?
  - A. Acoustic neuroma.

- B. Brain stem infarction.
- C. Vestibular neuritis.
- D. Vasculitis.
- E. Meningioma.

5. What is true about carcinoma of lip?

- A. Usually in upper lip.
- B. Usually squamous cell in origin.
- C. Metastasis to cervical lymph node.
- D. Exclusively occur in men.
- E.

6. A patient developed pain in right eye then developed blindness, what is the most likely cause?

- A. Closure angle glaucoma.
- B. Chronic glaucoma.
- C. Conjunctivitis.
- D. Corneal FB.
- E. Uveitis.

7. A diabetic patient developed a deep ulcer in 3rd metatarsal head. What is the cause?

- A. Neuropathy.
- B. Atherosclerosis.
- C. Micro-vascular disease.
- D. Infection.
- E. Uncontrolled DM.

8. A boy can not see the black board in the class but can read his book. On examination Right eye vision 6/36. left eye vision 6/18. What is the most likely cause?

- A. Myopia.
- B. Hypermetropia.
- C. Amblyopia
- D. Cataract.
- E. Presbyopia.

9. Photo of CT scan of abdomen (looks like cystic lesion) What is the least likely cause?

- A. Acute gastric dilatation.
- B. Ascites.
- C. Mesenteric cysts.
- D. Splenic cyst.
- E. Pancreatic pseudocyst.

10. photo of Dupuytren's contracture. What is the most likely cause :

- A. work with vibratory tools
- B. alcoholic
- C. ulnar nerve palsy
- D. median nerve palsy
- E. work with fire arm

11. photo of mammogram & ultrasound of breast showing very large cystic mass. What is the next plan of management

- A. true cut biopsy
- B. aspiration (fine needle)
- C. mastectomy
- D. radiotherapy

E. d

12. what is the least likely cause of thyroid carcinoma

- A. being male
- B. hot nodule in thyroid scan
- C. radiation to the neck
- D. history of hoarseness

13. a man has thyroidectomy due carcinoma. He developed fever tachycardia after 10 days. What is the most likely cause ?

- A. sepsis
- B. thyroid storm
- C. hypothyroidism
- D. d
- E. d

14. photo of a obese lady in operative table. What is the most likely cause :

- A. dermatitis artefacta
- B. herpes zoster
- C. d
- D. d
- E. d

15. a woman developed sudden onset of abdominal pain. On examination pulse irregular, abdomen diffusely distended, positive rebound tenderness. Rectal examination showed dark stained stool. What is the likely cause

- A. mesenteric artery occlusion
- B. perforated diverticulitis
- C. .
- D. .
- E. .

16. an obese woman developed low thoracic pain radiates to lower abdomen, epigastrium. Right femoral pulse is weak and epigastric tenderness present. This lady has past history of appendectomy & long standing hypertension. Now BP 170/100 Pulse 100. chest X ray showed widened mediastinum. What is the most important cause you going to exclude ?

- A. rupture aortic aneurysm
- B. diverticulitis
- C. inferior myocard infarction
- D. diaphragmatic hernia
- E.

17. what is fistula

- A. d
- B. d
- C. d
- D. d
- E. d

18. a man has varicose veins of long saphenous vein

- A. saphenous vein ligation
- B. stripping up the tributaries
- C. phenol injection
- D. .
- E. .

19. a young man fell from tractor sustained a .. in the leg. After debridement of the wound you ask about his previous tetanus immunization status. He said " I think I have shot 5 years ago rather I don't remember" what is your treatment plan ?

- A. tetanus toxoid
- B. tetanus immunoglobulin & toxoid
- C. tetanus immunoglobulin IM & toxoid & penicillin
- D. .,
- E. .

20. 42 years old lady has right nephrectomy few years ago for phosphate stone. She now presents with severe hypertension due to localized renal artery stenosis due to fibromuscular hyperplasia. What is the best management ?

- A. hypotensive agent
- B. renal artery angioplasty with surgical back up
- C. renal artery reconstruction surgery
- D. .
- E. .

21. a young hypotensive man has reduced CVP & reduced pulmonary artery wedge pressure. What is the most likely cause ?

- A. hypovolemia
- B. hypervolaemia
- C. pulmonary embolism
- D. pneumothorax
- E. .

22. what is true about rash in fat embolism

- A. usually occur in the face
- B. usually in the upper part of the body]
- C. lower part of the body
- D. in lower legs

23. a man developed abdominal pain & vomiting for 8 hours. Examination Hb 18.7 g what fluid is the best :

- A. Hartman solution 2000 ml during surgery
- B. Hartman solution 2000 ml before surgery
- C. 4 % Dextrose 1/5 NS 2000 ml before surgery
- D. 4 % Dextrose 1/5 NS 2000 ml after surgery

24. what is the life threatening condition ?

- A. tension pneumothorax
- B. haemothorax
- C. aortic aneurysm

25. a woman presents with unilateral exophthalmos. What is the most likely cause :

- A. carcinoma of maxillary antrum
- B. thyrotoxicosis
- C. sinusitis
- D. cellulites of the orbital

26. About antibiotic uses :

- A. It is always best to give antibiotic before any operation
- B. It is best practice to give two or three antibiotic together to have maximum benefit
- C. Always try to give single antibiotic to minimize cross reaction
- D.

E. .

27. When is the best time for self examination of breast ?

- A. immediately before menstruation
- B. immediately after menstruation
- C. during midcycle
- D. at the end of the period
- E.

Paediatric

1. 2 year old boy previously well, presents with buccal ulceration including some noted on the tongue which in most likely cause:

- A. Herpes type I
- B. Adenovirus
- C. ECHO virus
- E. Coxsackie virus
- E.

2. 17 month old boy ingested some corrosive. He has drooling from mouth, otherwise well. What would be next of management?

- A. Reassure mother
- B. Admit for observation and possible endoscopy
- C. Give ipecac
- D. Give nasogastric activated charcoal

3. 2 year old well child noted to have some petichiae and purpura on the trunk for one week. No other abnormality detected. Which is the correct?

- A. Child has haemophilia A
- B. Child probably has low platelet count
- C.
- D.
- E.

4. 2 year old presents with cut in hand with minimally contaminated wound. This child has no past history of immunization. Which of the following is most appropriate?

- A. Tetanus immunoglobulin
- B. Tetanus toxoid
- C. Penicillin
- D. DPT (triple antigen)
- E. Combined Diptheria Tetanus

5. One year old child developed cough, running nose. Two other family members have sneezing, coughing. The child developed moderate respiratory difficulty with nasal flaring, chest hyper inflated by the time present to hospital. What is the most likely diagnosis?

- A. Asthma
- B. Bronchiolitis
- C. Viral croup
- D. Diptheria
- E.

6. What is the significant of epiphyseal growth fracture?

- A. Malunion
- B. Ununion
- C. arrested growth

- D.
- E.

7. A mother noted a mass during bathing in a 22 month old child. On examination she said the child has irritable, pale. The mass noted on left lower quadrant, which is non tender and also bilateral noted periorbital echymosis. Which of the following is most likely diagnosis?

- A. Refer for child abuse
- B. Neuroblastoma
- C. Wilms tumor
- D. Advise mother its no important finding.

8. 9 year old boy with life long history of enuresis and not wet during the day. WOF is associate with the correct statement regarding this child in which > 20% cases are correct?

- A. Either parent has history of enuresis
- B. Reflux uropathy
- C. Small capacity bladder
- D. Spina bifida occulta
- E. Small kidney

9. 8 year old boy obese, weigh 48 kg (>98 percentile) height 137 cm (90th percentile). WOF is correct in relation to this boy?

- A. Advanced bone age
- B. Elevated fasting blood sugar
- C. Increase urinary free cortisol
- D. Primary parathyroid
- E. Increase Thyroid hormone

10. 22 month old child presents with mild jaundice. On examination splenomegaly and found with past history of prolong neonatal jaundice and family history of gall stone. WOF you will find in peripheral blood film?

- A. Microcytosis
- B. Target cells and basophilic stippling
- C. Spherocytes
- D. Megaloblastic
- E. Inclusion bodies.

11. Child presents with acute attack of asthma the best side measure to assess the severity is:

- A. Severity of the wheezing
- B. Response to inhaler
- C. Degree of dyspnoea
- D. PEF
- E. Pulmonary function test.

12. One week baby presents with sign of severity chest infection. WOF shall be included in the management? (X-ray reveals pneumatocele)

- A. Ampicillin
- B. Gentamycin
- C. Fluxacillin
- D. Cephalosporin
- E.

13. An infant presents with recurrent attack of bullous vomiting and screaming which of the

following is used in the assessment of his condition?

- A. Reassurance
- B. Endoscopy
- C. CT scan
- D. US
- E.

14. Child presented immediately to ED after swallowed acoustic soda. First step is?

- A. Endoscopy
- B. Milk
- C. Water
- D. Charcoal
- E.

15. Child presents with fever for 2 days and then rash after fever disappears. What is the diagnosis?

- A. Roseola infantum
- B. Measles
- C. Scarlet fever
- D. Herpes simplex type I
- E.

13. One year child with fully breast milk feeding presents with pale, anaemia, lethargic. WOF is the correct response?

- A. Iron deficiency
- B. Thalassaemia
- C. Change to bottle milk
- D.
- E.

14. 6 month old baby with recurrent unilateral eye infection. Previously treated with antibiotic. WOF is the correct response?

- A. Repeat the antibiotic
- B. Lacrimal duct obstruction
- C. Refer to Ophthalmologist.
- D.
- E.

15. Case of Amblyopia?

- A. All children should be screened at 6 years old
- B. Loss of central vision – unless corrected
- C. Cover the affected eye.
- D.
- E.

16. Diabetes Mellitus usually:

- A. Presented within 1 month of onset
- B. 50% have history of DM monozygote twin
- C. Could be confused with oral hypoglycemia
- D.
- E.

17. All of the following could be a cause of deafness in newborn except (Apgar score 8 at 1 minute):

- A. Phenytoin

- B. Kernicterus
- C. 1500 gram weigh at birth
- D.
- E.

18. Most common micro organism in child with meningitis?

- A. Echo virus
- B. Herpes virus
- C. TB
- D. Staphylococcus.
- E.

# 2008

- 1) For the paracetamol poisoning question I marked the liver transplantation option. I really don't remember the question but I believe he had the criteria for it: PT was high and the 3 days with abnormal lab studies
- 2) It was a Hutchinson freckle
- 3) I marked wound debridement: it is the first option in gas gangrene. The key event in the treatment of this condition is early diagnosis.

Once the diagnosis is established:

expert help should be consulted

surgical treatment involves wide excision or amputation of affected tissue(s)

antibiotics:

high dose penicillin  
metronidazole in addition

antitoxin:

widely used in wartime  
doubtful value

hyperbaric oxygen:

to eradicate the required anaerobic environment  
may be effective

requires special apparatus - if available it should be administered

4) Was the stroke question you are asking the one that had the CT image. I can't remember that one?

5) What did you answer on the CT image?

6) It was an epigastric hernia

7) It was a femoral hernia



What about the photo of the neonate? hypoglycaemia or hypothyroidism  
let's keep on touch and post more questions

PROM at 26 week, the nearest tertiary hospital is 120 Km distance, what to do?

- a- Give tocolytics
- b- Give decadron
- c- Give AB

question about PROM and the answer was giving hydrocortisone

sign and symptoms of gardenia vaginals during pregnancy, how Rx?

- a- Metronidazol

fertile female with lower abdominal pain and adnaxal mass but no cervical motion tenderness, last menstrual period was before 3 weeks, Ix?

- a- U/S
- b- B-hcg

X ray of humras neck fracture, mx?

- a-spica
- b-sling with early mobilisation

question about patient with COPD developed co2 retention after Rx with O2

ealdry patient developed hypothyroidism, dose of Tr;

- a- 25 mg thyroxin
- b- 50mg thyroxin
- c- 75-----

WOF is not future of thyrotoxicosis

- a-Corse hand tremor

feamble did MVA while examine u find no visual filed bilaterally with some cataract

- a-do ct
- b-measure Intraocular pressure
- c-report driving authority
- d-do cataract sx

woman with HPV

- a- human papiloma virus is not indicated

male sudden syncope family hx of heart problem,

- a-echocardiography

polycystic kidney, Hx of died uncle because of brain hemorrhage

Do head ct

q/sigmoed valvules

dierty wound, Rx: debridment

horsness+dysphagea+feeling of mass in the throat

a-ca oesophagus  
b-ca larynx