

## Q. 1. Multiple choice questions (Darken the single best response in OMR sheet.)

(0.5 x 24 = 12)

1. Giant 'a' waves in JVP occurs in all **except**:
  - a. Junctional rhythm
  - b. Pulmonary hypertension
  - c. Tricuspid regurgitation
  - d. Complete heart block
2. Mid diastolic murmur with presystolic accentuation is typically seen in:
  - a. Mitral stenosis
  - b. Mitral regurgitation
  - c. Aortic stenosis
  - d. MVP
3. Predisposing factors for coronary artery disease include all, **except**:
  - a. Homocysteinemia
  - b. ↑ Lipoprotein B
  - c. ↑ Fibrinogen
  - d. ↑ Plasminogen activator inhibitor 1
4. A patient with acute inferior wall MI has developed shock. Which of the following is the most likely cause of shock:
  - a. Cardiac rupture
  - b. Inter-ventricular septal perforation
  - c. Papillary muscle rupture
  - d. Right ventricular infarction
5. Reticulocytosis is **not** a feature of:
  - a. Paroxysmal nocturnal hemoglobinuria
  - b. Following acute bleeding
  - c. Hereditary spherocytosis
  - d. Anemia in CRF
6. A patient with a Hb of 6, WBC count of 2000, has a normal differential count except for having 6% blasts; platelets are reduced to 80,000, moderate splenomegaly is present, possible diagnosis is:
  - a. Leukemia
  - b. Aplastic anemia
  - c. Hemolysis
  - d. ITP
7. A young female presents with diminished pulses in the upper limb & hypertension. The most likely diagnosis is:
  - a. Takayasu arteritis
  - b. Coarctation of aorta
  - c. Giant cell arteritis
  - d. Polymyalgia nodosa
8. Anti ds-DNA is most specific for:
  - a. SLE
  - b. Rheumatoid arthritis
  - c. Scleroderma
  - d. Systemic sclerosis
9. A young, tall, thin, male with arachnodactyly has ectopia lentis in both eyes. The most probable diagnosis is:
  - a. Marfan's syndrome
  - b. Marchesani's syndrome
  - c. Homocystinuria
  - d. Ehler's Danlos syndrome
10. Hyper-segmented neutrophils are characteristic of:
  - a. Microcytic anemia
  - b. Megaloblastic anemia
  - c. Fanconi's anemia
  - d. Iron deficiency anemia
11. Signs and symptoms specific of iron deficiency are all of the following **except**:
  - a. Geophagia
  - b. Koilonychia
  - c. Blue sclera
  - d. Glossitis
12. Coloured urine is **not** seen in administration of:
  - a. Quinine
  - b. Rifampicin
  - c. Nitrofurantoin
  - d. Pyridium
13. Anuria in clinical practice is defined as:
  - a. Urine output <100 ml/hr
  - b. Urine output <400 ml/hr
  - c. Urine output <800 ml/hr
  - d. Urine output <1200 ml/hr
14. Tumor lysis syndrome is associated with all the following **except**:
  - a. Hyperkalemia
  - b. Hypercalcemia
  - c. Hyperuricemia
  - d. Hyperphosphatemia
15. Most common presentation of renal tuberculosis is:
  - a. Renal colic
  - b. Sterile pyuria
  - c. Intractable urgency
  - d. Painful micturition
16. Which of the following metabolic complications is **not** seen in chronic renal failure?
  - a. Hyperkalemia
  - b. Hyponatremia
  - c. Hypercalcemia
  - d. Hyperphosphatemia
17. Metabolic acidosis is seen in all **except**:
  - a. DKA (diabetic ketoacidosis)
  - b. CRF (chronic renal failure)
  - c. Cellphos poisoning
  - d. Ingestion/poisoning due to sodium bicarbonate
18. Which type of diabetes is HLA associated?
  - a. Type I diabetes
  - b. Type II diabetes
  - c. Malnutrition related type disease
  - d. Pregnancy related type diabetes
19. For diagnosis of diabetes mellitus, fasting blood glucose level should be more than:
  - a. 120 mg/dl
  - b. 140 mg/dl
  - c. 180 mg/dl
  - d. 200 mg/dl
20. Diabetes control is best monitored by:
  - a. Serum glucose
  - b. Postprandial blood glucose
  - c. HbA1C
  - d. HbA2C
21. Drug of choice for treatment of inappropriate anti-diuretic hormone secretion:
  - a. Furosemide
  - b. Hydrochlorothiazide
  - c. Spironolactone
  - d. Demeclocycline
22. All of the following are seen in ricket's **except**:
  - a. Bow legs
  - b. Gunstock deformity
  - c. Pet belly
  - d. Craniotabes
23. Pseudomembranous colitis is caused by toxins produced by:
  - a. Corynebacterium
  - b. Listeria sp.
  - c. Clostridium sp.
  - d. Legionella
24. Blood cultures are taken in which period of febrile illness or diagnosis of enteric fever:
  - a. First week
  - b. Second week
  - c. Third week
  - d. Fourth week

**MEDICINE**  
**PAPER – FIRST**

[Time allotted: Three hours]

[Max Marks: 60]

**Note:** Attempt all questions.

Draw suitable diagrams wherever necessary.

- Q. 2. Give reasons for:** **(1 x 6 = 06)**
- a. Role of  $\beta$  agonists in hyperkalemia
  - b. Role of metformin in obese diabetics
  - c. Hemolysis in patient of *vivax* malaria if given primaquine
  - d. Secondary & tertiary hyperparathyroidism in patients with chronic renal failure
  - e. Recurrent urinary tract infection in diabetic patient on SGLT2 inhibitor drugs
  - f. Folic acid supplementation in patients with hyper-homocysteinemia
- Q. 3. Problem based question:** **(1+2+3 = 06)**
- A 60 yrs., male, chronic smoker & hypertensive patient, presents to the emergency with severe retrosternal chest pain with profuse sweating. ECG done shows ST elevation in II, III, aVF.
- a. What is your probable diagnosis?
  - b. What investigations should be done for confirmation of diagnosis apart from ECG?
  - c. Write the management of above case scenario.
- Q. 4. Write short notes on:** **(3 x 4 = 12)**
- a. Megaloblastic anemia
  - b. Management of hyperkalemia
  - c. Beri-beri
  - d. Diagnosis of dengue fever
- Q. 5. Structured question:**
- (i) Enumerate clinical features & management of chronic renal failure. **(3+3 = 06)**
- (ii) Enumerate clinical features of myxoedema coma & management of same. **(3+3 = 06)**
- Q. 6. Write in brief about:** **(3 x 4 = 12)**
- a. Management of DKA
  - b. Newer drugs in management of rheumatoid arthritis
  - c. Management of H1N1 infection
  - d. Management of multiple myeloma

## M.B.B.S. FINAL PROF. PART-II EXAMINATION, JUNE - 2020

## MEDICINE

## PAPER – SECOND

## SET- A

[Time allotted: Three hours]

[Max Marks: 60]

Q. 1. Multiple choice questions (Darken the single best response in OMR sheet. Time allotted 20 minutes) (0.5 x 24=12)

1. Pontine hemorrhage is characterized by all **except**:
  - a. Pinpoint pupils
  - b. Pyrexia
  - c. Paralysis
  - d. Seizures
2. Lower motor neuron lesions present with all **except**:
  - a. Fasciculations
  - b. Hypotonia
  - c. Positive Babinski sign
  - d. Flaccid paralysis
3. Thickened peripheral nerves are seen in all **except**:
  - a. Leprosy
  - b. Amyloidosis
  - c. Refsum's disease
  - d. Motor neuron disease
4. Hemiplegia is most commonly caused by thrombosis of:
  - a. Anterior cerebral artery
  - b. Middle cerebral artery
  - c. Posterior choroidal artery
  - d. Basilar artery
5. All of the following extra-ocular muscles are supplied by oculomotor nerve **except**:
  - a. Medial rectus
  - b. Lateral rectus
  - c. Superior rectus
  - d. Inferior rectus
6. Klinefelter's syndrome is associated with all **except**:
  - a. XXY genotype
  - b. Infertility
  - c. Barr bodies present
  - d. Myopathy
7. All are extraintestinal manifestations of ulcerative colitis **except**:
  - a. Uveitis
  - b. Pyoderma gangrenosum
  - c. Polymyositis
  - d. Osteoarthritis
8. The most common site for amoebiasis is:
  - a. Sigmoid colon
  - b. Transverse colon
  - c. Rectum
  - d. Caecum
9. Which of the following is **not** a cause of acute pancreatitis?
  - a. Gallstones
  - b. Hemochromatosis
  - c. Alcohol
  - d. Hypercalcemia
10. The most reliable indicator for recent Hepatitis B infection is:
  - a. HBsAg
  - b. IgG anti HBs
  - c. IgM anti HBc
  - d. IgM anti HBe
11. Hepatic encephalopathy is precipitated by all **except**:
  - a. Gastrointestinal bleed
  - b. Diarrhoea
  - c. Infection
  - d. Azotemia
12. Chylous ascites is caused by all **except**:
  - a. Tuberculosis
  - b. Filariasis
  - c. Nephrotic syndrome
  - d. Carcinoma of stomach
13. Herald patch is seen in:
  - a. Pityriasis rosea
  - b. Tinea cruris
  - c. Psoriasis
  - d. Lichen planus
14. Lichen planus is associated with:
  - a. Hepatitis A
  - b. Hepatitis B
  - c. Hepatitis C
  - d. Hepatitis D
15. D-dimer is the most sensitive diagnostic test for:
  - a. Acute pulmonary oedema
  - b. Cardiac tamponade
  - c. Pulmonary embolism
  - d. Acute myocardial infarction
16. Clubbing may be seen in all of following **except**:
  - a. Lung abscess
  - b. Bronchogenic carcinoma
  - c. Chronic bronchitis
  - d. Idiopathic pulmonary fibrosis
17. Succussion splash in chest is found in:
  - a. Hydro-pneumothorax
  - b. Pleural effusion
  - c. Lung abscess
  - d. Pericardial effusion
18. Byssinosis occurs due to:
  - a. Cotton mill dust
  - b. Sugarcane dust
  - c. Moldy hay
  - d. Silica dust
19. Shock manifests with all of following **except**:
  - a. Tachycardia
  - b. Systolic blood pressure <90 mmHg
  - c. Polyuria
  - d. Altered sensorium
20. Organophosphate poisoning is characterized by all **except**:
  - a. Pinpoint pupils
  - b. Bronchospasm
  - c. Bradycardia
  - d. Sweating
21. First rank symptoms of acute schizophrenia include all **except**:
  - a. Auditory hallucinations
  - b. Broadcasting
  - c. Delusional perceptions
  - d. Poverty of speech
22. Anorexia nervosa is associated with all **except**:
  - a. Marked weight loss
  - b. Anxiety and depressive symptoms
  - c. Food avoidance
  - d. Marked male preponderance
23. High altitude pulmonary oedema manifests with all **except**:
  - a. Breathlessness and dry cough
  - b. Crepitations in both lung fields
  - c. Mild hypoxemia
  - d. Pulmonary hypertension
24. ARDS is characterized by all **except**:
  - a. Hypoxemia
  - b. Diffuse bilateral infiltrates on chest X-ray
  - c. Raised left atrial pressure
  - d. Impaired lung compliance

**MEDICINE**  
**PAPER – SECOND**

**Note:** Attempt all questions.  
Draw suitable diagrams wherever necessary.

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- Q. 2. Give reasons for:** **(1 x 6 = 06)**
- a. Slow lowering of blood pressure in acute ischemic stroke
  - b. Burning pain in feet of diabetic patients
  - c. Enlarged spleen in cirrhosis liver
  - d. Intestinal obstruction in intestinal tuberculosis
  - e. Hypoxemia in type 1 respiratory failure
  - f. Central cyanosis at high altitude
- Q. 3. Problem based question:** **(1+1+1+1+2 = 06)**
- A 55-year-old male who is a chronic smoker presented with history of seizures, weakness of right half of body and difficulty in speaking for 1 day.
- a. What is the most probable diagnosis?
  - b. Enumerate risk factors for this disease.
  - c. What is the differential diagnosis of the case?
  - d. How will you investigate this case?
  - e. Outline treatment of this case.
- Q. 4. Write short notes on:** **(3 x 4 = 12)**
- a. Broca's aphasia
  - b. Septic shock
  - c. Anxiety neurosis
  - d. Lepromatous leprosy
- Q. 5. Structured questions:**
- (i) Enumerate clinical features and management of ulcerative colitis. **(3+3 = 06)**
  - (ii) Enumerate the clinical features and management of acute bronchial asthma. **(2+4 = 06)**
- Q. 6. Write in brief about:** **(3 x 4 = 12)**
- a. Psoriasis
  - b. Organophosphate poisoning
  - c. High altitude pulmonary oedema
  - d. Klinefelter's syndrome