

**MBBS PHASE – II  
DEGREE EXAMINATION – DECEMBER 2024**

**Time: 3 Hours**

**Max. Marks: 100**

**PATHOLOGY  
PAPER – I**

**Q.P. Code: A009**

Answers should be specific to the Questions asked.  
Draw neat, labeled diagrams wherever necessary.  
All questions are compulsory.

<b>Question Number</b>	<b>Marks</b>
1. M.C.Q.	<b>20 X 1 = 20</b>
<b>LONG ESSAY QUESTIONS:</b>	<b>2 X 10 = 20</b>
2. Define and classify Shock. Describe the pathogenesis of Septic Shock with a flowchart. Enumerate clinical stages of shock.	(3+5+2)
3. A 45-year-old male came to hospital with history of generalized weakness. On examination he had hepato-splenomegaly. Hemoglobin was 9.3 g/dL, WBC count was 1.5 lakhs/cu mm and Platelet count was 2.5 lakhs/cu mm. Cytogenetics showed there was translocation (9:22). a. What is the probable diagnosis? b. Mention different phases of the disease identified. c. Describe the pathogenesis and peripheral smear findings in the given patient.	(1+2+7)
<b>SHORT ESSAY QUESTIONS:</b>	<b>9 X 5 = 45</b>
4. A 62-year-old man was brought to emergency department with complains of severe abdominal pain and history of passing bloody stools. After the radiologic examination patient was posted for emergency laparotomy. On opening blackish discoloration of segment of intestine was noted. a. What is the probable diagnosis. b. Discuss the etiological factors, gross and microscopic findings in the case.	(1+4)
5. A 25-year-old male sustained minor injury over the skin around the knee due to fall from bike. On examination, the wound appeared clean. On the 3rd day the surface of wound appeared pink, soft and granular. a. What tissue is observed at site of injury on 3rd day? b. Describe the mode of healing in this case with the help of neat labeled diagram.	(1+4)
6. A 13-year-old child is admitted in trauma center for femur fracture while playing cricket. On day-two, he develops rashes. He was found to be breathless and was in a confused state. Routine blood investigation was significant for platelet count of 60,000 cells/ mm <sup>3</sup> . a. What is the most likely diagnosis? b. Describe the etiopathogenesis of the condition.	(1+4)
7. Write short note on Genomic imprinting and explain it with <b>one</b> example.	
8. Write in brief about the mechanism of injury in type 2 hypersensitivity and give example for each type.	(3+2)
9. Define neoplasia. Discuss differences between benign and malignant tumors with appropriate examples.	(1+4)

10. Define severe acute malnutrition and discuss the pathogenesis of disorders caused by protein calorie malnutrition. (1+4)
11. A 45-year-old male came to hospital with history of generalized weakness. On examination Hemoglobin was 7.5 g/dL, WBC count was 3400 cells/cu mm and Platelet count was 80000/cu mm. Schilling test performed was Positive. (1+4)
  - a. What is the probable diagnosis?
  - b. Describe Pathogenesis and Bone marrow findings in the above case.
12. Describe Immunologic transfusion reactions.

**SHORT ANSWER QUESTIONS:**

**5 X 3 = 15**

13. Enumerate the stages of phagocytosis with the help of neat labeled diagram.
14. Enumerate **three** congenital syndromes associated with Wilm's tumour.
15. Enlist **three** differences between Hodgkin lymphoma and Non-Hodgkin lymphoma.
16. What is Autologous Blood Transfusion? Mention **two** advantages.
17. Enumerate differences between Contrast Autonomy and Paternalism.

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**MULTIPLE CHOICE QUESTIONS**

<b>Course:</b> MBBS Phase-II, December 2024	<b>Max. Marks:</b> 20 Marks
<b>Subject :</b> Pathology Paper-I, QP Code: A009	<b>Time:</b> 30 Minutes

**Instructions:**

- Each question is followed by four options.
- Pick up the single best option and darken the appropriate circle in the OMR Sheet provided.
- Each question carries one mark. No negative marking.

1. A 28-year-old woman has had a constant feeling of lethargy since childhood. On physical examination, she is afebrile and the spleen tip is palpable. Laboratory studies show hemoglobin of 11.7 g/dL. The peripheral blood smear shows small round erythrocytes that lack a zone of central pallor. An inherited abnormality in which of the following RBC component best accounts for these findings?  
(A)  $\alpha$ -Globin chain (B)  $\beta$ -Globin chain  
(C) Carbonic anhydrase (D) Spectrin cytoskeletal protein
2. A 19-year-old woman who works indoors spends a day outside gardening. She does not wear a hat or sunscreen. That evening her partner remarks that her face appears red. Which of the following dermal changes **most** likely accounts for her red appearance?  
(A) Edema (B) Hemolysis  
(C) Hemorrhage (D) Vasodilation
3. Which of the following is a good prognostic indicator in AML?  
(A) Inversion 16 (B) Complex karyotype  
(C) AML M7 (D) Deletion 7q
4. After extravasation, leucocytes emigrate in the tissue towards the site of injury. This is called as  
(A) Chemotaxis (B) Diapedesis  
(C) Margination (D) Pavementing
5. Which of the following is a marker of myeloid neoplasm?  
(A) S100 (B) HMB45  
(C) Leucocyte Common Antigen (D) Cytokeratin
6. 60-year-old male, chronic smoker has a mass in right lung, which was diagnosed as malignant on biopsy. Molecular analysis reveals mutation in RB gene. Which of the following mechanism of this mutation contribute to the development of neoplasm?  
(A) Insensitivity to growth-inhibitory signals (B) Altered cellular metabolism  
(C) Evasion of apoptosis (D) Limitless replicative potential
7. Which of the following is **NOT** a fate of thrombus?  
(A) Metastasis (B) Organization  
(C) Embolization (D) Dissolution
8. A 23 year old lady was admitted in ICU following severe injury to limbs after road Traffic accident. On day 2, she was breathless and was found to have thrombocytopenia. What is the most likely diagnosis?  
(A) Pulmonary Thromboembolism (B) Disseminated Intravascular Coagulation  
(C) Caisson Disease (D) Fat embolism syndrome
9. Which of the following adaptation is noted in enlargement of uterus during Pregnancy?  
(A) Hyperplasia (B) Hypertrophy  
(C) Both A & B (D) Metaplasia
10. Post-transplant lymphoma occurs due to proliferation of which of the following cells?  
(A) T cell (B) B cell  
(C) NK cell (D) Monocyte

11. A 48-year-old man presents to the emergency room complaining of vague abdominal pain, intermittent fever and significant weight loss over the past 6 months. CT-guided liver biopsy reveals hepatocellular carcinoma. Which of the following tumor marker is effective for monitoring disease recurrence after surgery?  
 (A) AFP (B) CA -125  
 (C) CEA (D) PSA
12. Identify the organ showing neurofibrillary tangles which is a protein aggregate  
 (A) Sympathetic nerves (B) Spinal cord  
 (C) Brain (D) Parasympathetic nerves
13. Which among the following is a wear and tear pigment?  
 (A) Melanin (B) Bilirubin  
 (C) Hemosiderin (D) Lipofuscin
14. A 69-year-old woman complains of increasing back pain for 1 month. On physical examination, there is tenderness over the lower back. A radiograph of the spine shows a partial collapse of T10 and multiple 0.5- to 1.5-cm lytic lesions in the thoracic and lumbar vertebrae. A bone marrow aspirate shows numerous atypical plasma cells with Russel bodies. Which of the following laboratory findings is **most** likely to be seen in this patient?  
 (A) Bence Jones proteinuria (B) Decreased serum alkaline phosphatase level  
 (C) Hypogammaglobinemia (D) t(9;22) in the karyotype of marrow cells
15. Russel body is an example of which intracellular accumulation?  
 (A) Glycogen (B) Neutral fat  
 (C) Cholesterol (D) Protein
16. Differential expression of same gene depending upon the parent of origin is called  
 (A) Anticipation (B) Chimerism  
 (C) Genomic imprinting (D) Mosaicism
17. Which antibodies are Highly specific for SLE diagnosis?  
 (A) Anti-Nuclear antibodies (B) Anti-double stranded DNA antibody  
 (C) Anti-DNA topoisomerase (D) Anti SS-A and SS-B
18. Pellagra syndrome is associated with which of the following vitamin deficiency?  
 (A) Thiamine (B) Riboflavin  
 (C) Niacin (D) Pyridoxine
19. Homer Wright rosettes are seen in  
 (A) Ependymoma (B) Neuroblastoma  
 (C) Neurocytoma (D) Retinoblastoma
20. Birbeck's granule is found in which of the following cells?  
 (A) Langerhans cell (B) Langan's giant cell  
 (C) Lepra cell (D) Clue cell

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**MBBS PHASE – II  
DEGREE EXAMINATION – DECEMBER 2024**

**Time: 3 Hours**

**Max. Marks: 100**

**PATHOLOGY  
PAPER – I**

**Q.P. Code: 1008**

Answers should be specific to the Questions asked.

Draw neat, labeled diagrams wherever necessary.

All questions are compulsory.

<b>Question Number</b>	<b>Marks</b>
1. M.C.Q.	<b>25 X 1 = 25</b>
<b>LONG ESSAY QUESTIONS:</b>	<b>2 X 10 = 20</b>
2. An elderly male complains of per rectal bleeding. On examination he shows koilonychias and Hemoglobin is 4.6mg/dl. What is the probable diagnosis. Enumerate the causes and discuss laboratory findings.	(2+2+6)
3. Discuss the healing of fractured bone and its complications.	(7+3)
<b>SHORT ESSAY QUESTIONS:</b>	<b>8 X 5 = 40</b>
4. Enumerate the differences between Tuberculoid and Lepromatous leprosy.	
5. Classify Hemolytic Anemia.	
6. Discuss the laboratory findings in Chronic Myeloid Leukemia.	
7. Describe the tests for detection and causes of Ketonuria.	
8. Describe the morphological features of Vitamin A deficiency.	
9. Describe gross and microscopy of fatty liver.	
10. Define Metaplasia. Mention its types with <b>two</b> examples.	
11. Describe the laboratory diagnosis of cancer.	
<b>SHORT ANSWER QUESTIONS:</b>	<b>5 X 3 = 15</b>
12. Mention the Normal absolute and Differential eosinophil count values. List <b>three</b> causes of eosinophilia.	
13. Enumerate the differences between Leukaemoid reaction and Leukemia.	
14. Describe the P.C.V. tube and mention its uses.	
15. Name <b>six</b> indications for lumbar puncture.	
16. Name the <b>six</b> renal function tests.	

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**MULTIPLE CHOICE QUESTIONS**

<b>Course:</b> MBBS Phase-II, December 2024	<b>Max. Marks:</b> 25 Marks
<b>Subject :</b> Pathology Paper-I, QP Code: 1008	<b>Time:</b> 30 Minutes

**Instructions:**

- Each question is followed by four options.
- Pick up the single best option and darken the appropriate circle in the OMR Sheet provided.
- Each question carries one mark. No negative marking.

1. Apoptosis is inhibited by  
(A) P-53 gene (B) N-myc gene  
(C) Ras gene (D) BCl2 gene
2. Hypoxic cell injury primarily affects the function of  
(A) Mitochondria (B) Cell membrane  
(C) Ribosome (D) Genetic material
3. Pathogenesis of edema includes all of the following **EXCEPT**  
(A) Increased hydrostatic pressure (B) Reduced Oncotic pressure  
(C) Decreased hydrostatic pressure (D) Lymphatic obstruction
4. Gamma Gandy bodies are seen in chronic venous congestion of  
(A) Liver (B) Spleen  
(C) Lung (D) Kidney
5. Laminations seen in arterial thrombus are called as  
(A) Lines of Zahn (B) Lines of Virchow  
(C) Lines of Laconic (D) Lines of Langerhans
6. White infarcts are encountered in all **EXCEPT**  
(A) Heart (B) Lung  
(C) Kidney (D) Ovary
7. Cardiogenic shock is seen in all the following conditions **EXCEPT**  
(A) Myocardial infarction (B) Myocardial rupture  
(C) Burns (D) Cardiac arrhythmias
8. A state of hypervitaminosis occurs in  
(A) Vitamin A & Vitamin B (B) Vitamin B & Vitamin C  
(C) Vitamin C & Vitamin D (D) Vitamin A & Vitamin D
9. Stain for peripheral smear was developed by  
(A) Romanowsky (B) Gram  
(C) Ehrlich (D) Hansen
10. Granulomas are seen in all of the following **EXCEPT**  
(A) Crohn's disease (B) Brucellosis  
(C) Cat-scratch disease (D) Abscess
11. Amyloid can be present in stroma of which type of thyroid tumor  
(A) Papillary carcinoma (B) Medullary carcinoma  
(C) Follicular carcinoma (D) Anaplastic carcinoma
12. Advantage of FNAC procedure  
(A) Requires no anaesthesia (B) Rapid results  
(C) Low cost (D) All of the above

13. Specific gravity of urine can be measured by  
 (A) Refractometer (B) Reagent strips  
 (C) Urinometer (D) All of the above
14. Fatty casts are **commonly** associated with  
 (A) Nephrotic syndrome (B) Diuretic therapy  
 (C) Tubular inflammation (D) Heavy Exercise
15. A permanent change in DNA is known as  
 (A) Insertion (B) Mutation  
 (C) Mendelian disorder (D) Translocation
16. The most important indicator of malignancy is  
 (A) Increased mitotic activity (B) Infiltrative borders  
 (C) Metastasis (D) Necrosis
17. HCG is a specific tumor marker for  
 (A) Carcinoma Stomach (B) Choriocarcinoma  
 (C) Prostate Carcinoma (D) Thyroid Carcinoma
18. Dry gangrene is a type of  
 (A) Caseation necrosis (B) Coagulative necrosis  
 (C) Fat necrosis (D) Liquefactive necrosis
19. Lepra cells are  
 (A) Neutrophils (B) Plasma cells  
 (C) Histiocytes (D) Lymphocytes
20. Auer rods are seen in  
 (A) AML (B) ALL  
 (C) CML (D) CLL
21. One of the carbohydrate does **NOT** give positive Benedict's test  
 (A) Glucose (B) Lactose  
 (C) Sucrose (D) Fructose
22. Which of the following is **NOT** seen in Megaloblastic Anemia?  
 (A) Hypersegmented Neutrophil (B) MCV <80  
 (C) Evidences of dyserythropoiesis (D) Giant metamyelocytes
23. Sickle cell anemia is a  
 (A) Defect of Hemoglobin (B) Membrane defect of RBC  
 (C) Enzyme defect of RBC (D) Maturation defect of RBC
24. Schilling test is performed to diagnose  
 (A) Sideroblastic Anemia (B) Hemolytic Anemia due to G-6-PD deficiency  
 (C) Pernicious Anemia (D) Sickle cell Anemia
25. Which of the disease is **NOT** necessarily tested before blood transfusion?  
 (A) Syphilis (B) Malaria  
 (C) HIV Infection (D) Hepatitis B

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**MBBS PHASE – II****DEGREE EXAMINATION – DECEMBER 2024****Time 3 Hours****Max. Marks 100****PATHOLOGY  
PAPER – II****Q.P. Code A010**

Answers should be specific to the Questions asked.  
Draw neat, labeled diagrams wherever necessary.  
All the questions are compulsory.

<b>Question Number</b>	<b>Marks</b>
1. M.C.Q.	<b>20 X 1 = 20</b>
<b>LONG ESSAY QUESTIONS</b>	<b>2 X 10 = 20</b>
2. A 50-year-old man is admitted with sudden onset of central chest pain of 6 hours duration, radiating to left shoulder, profuse sweating and breathlessness. BP- 90/60 mmHg, Pulse 102 beats/min. ECG shows ST segment elevation. a. What is the probable diagnosis? b. Mention appropriate investigations. c. What morphological changes in the target organs are expected?	(1+4+5)
3. Describe the etiopathogenesis, morphology and complications of Ulcerative Colitis.	(3+4+3)
<b>SHORT ESSAY QUESTIONS</b>	<b>9 X 5 = 45</b>
4. A 15-year-old male presents with bony swelling near the knee joint. X-ray of the swelling showed elevation of periosteum, radio-opaque lesion infiltrating into the medullary cavity and surrounding soft tissue. It is a case of osteosarcoma. a. Enumerate the risk factors. b. Describe the gross and microscopic features of the above condition.	(1+4)
5. Discuss the pathogenesis of Alcoholic Liver Disease.	
6. Describe gross and microscopy of Seminoma of Testis.	(2+3)
7. A 56-year-old obese hypertensive woman presents with history of postmenopausal bleeding. Transvaginal ultrasound shows endometrial thickening of 18 mm. a. What is the probable diagnosis? b. Add a note on gross and microscopic findings.	(1+4)
8. Discuss pathogenesis of carcinoma colon.	
9. Discuss prognostic factors in carcinoma breast.	
10. A 50-year-old chronic smoker has gradually increasing dyspnea & weight loss over the past 2 years. A chest radiograph shows bilateral hyperlucent lungs, especially marked in the upper lobes. Pulmonary function tests show that the FEV1 is markedly decreased, but the FVC is normal, and FEV1/FVC ratio is decreased. It is a case of emphysema. a. Explain the clinical correlation of the above mentioned investigations. b. Discuss the different types of emphysema.	(2+3)
11. Discuss the etiology and CSF findings of Pyogenic meningitis.	(2+3)

**P.T.O....**

12. A 65-year-old female presented with painless hematuria and dragging pain in left loin. USG shows a mass in the upper pole of kidney. (1+2+2)
- What is the probable diagnosis?
  - Write the gross findings and microscopic types of this condition.

**SHORT ANSWER QUESTIONS**

**5 X 3 = 15**

- Describe the components of Ghon's complex.
- What is Assent? Enumerate any **two** situations where assent is required.
- List **three** clinical warning signs of melanoma in a mole.
- Describe etiology and significance of Cryptorchidism.
- Describe the morphology of vegetation's in infective endocarditis.

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**MULTIPLE CHOICE QUESTIONS**

<b>Course</b>	<b>MBBS Phase-II, December 2024</b>	<b>Max. Marks</b>	<b>20 Marks</b>
<b>Subject</b>	<b>Pathology Paper-II, QP Code A010</b>	<b>Time</b>	<b>30 Minutes</b>

**Instructions**

- Each question is followed by four options.
- Pick up the single best option and darken the appropriate circle in the OMR Sheet provided.
- Each question carries one mark. No negative marking.

1. Blue dome cyst is a characteristic finding of  
(A) Carcinoma breast (B) Cystosarcoma phyllodes  
(C) Fibrocystic change (D) Fibroadenoma
2. Which of the following is the earliest histological change seen in Myocardial Infarction?  
(A) Coagulative necrosis (B) Neutrophilic infiltration  
(C) Granulation tissue formation (D) Fibrosis
3. Squamous cell carcinoma of cervix is associated with  
(A) HPV 6, 11 (B) HPV 16, 18  
(C) HPV 17, 19 (D) HIV 20, 22
4. "Creeping fat" or Mesenteric fat wrapped around the bowel surface is found in  
(A) Crohn's Disease (B) Ulcerative colitis  
(C) Pseudomembranous colitis (D) Irritable bowel syndrome
5. Chest x-ray of an asymptomatic adult male who works at sandblasting reveals a fine nodularity in the lungs and "eggshell" calcification of the hilar lymph nodes. Biopsy of lung reveals birefringent particles within macrophages. This material is **most** likely to be  
(A) Asbestos (B) Beryllium  
(C) Carbon (D) Silica
6. Which of the following is a **common** site of metastasis in advanced prostatic cancer?  
(A) Liver (B) Lungs  
(C) Brain (D) Bone
7. Malignant change in the nevus is characterized by all the following **EXCEPT**  
(A) Darkening (B) Regular borders  
(C) Itching (D) Increase in size
8. A 35-year-old presents with a swelling of the upper end of humerus. X-ray showed lytic lesion with characteristic "soap bubble appearance". What is the probable diagnosis?  
(A) Giant cell tumor of bone (B) Osteosarcoma  
(C) Chondrosarcoma (D) Aneurysmal bone cyst
9. The phagocytic cells of brain are  
(A) Astrocytes (B) Neurons  
(C) Microglia (D) Oligodendroglia
10. A 12-year-old male presented with periorbital edema. Urine-sulfosalicylic acid test-showed curdy precipitate, with no hematuria. What is the probable diagnosis?  
(A) Nephritic syndrome (B) Acute pyelonephritis  
(C) Nephrotic syndrome (D) Chronic pyelonephritis
11. Feco-oral route of transmission is seen in  
(A) Hepatitis A (B) Hepatitis B  
(C) Hepatitis C (D) Hepatitis D

12. Foul smelling sputum is seen in  
 (A) Emphysema (B) Chronic bronchitis  
 (C) Bronchiectasis (D) Bronchial asthma
13. Osteosarcoma arises from  
 (A) Epiphysis (B) Metaphysis  
 (C) Diaphysis (D) Para cortex
14. Helicobacter pylori produces all enzymes **EXCEPT**  
 (A) Urease (B) Lecithinase  
 (C) Protease (D) Elastase
15. A 30-year-old woman presented with anxiety, sleeplessness, palpitations, heat intolerance and loss of weight. On examination she had diffusely enlarged thyroid, tachycardia, tremors, proptosis and oedema over the skin. What is the probable diagnosis?  
 (A) Hypothyroidism (B) Left heart failure  
 (C) Hyperthyroidism (D) Acute renal failure
16. Which of the following is a major criterion for diagnosis of Rheumatic Fever according to Jones Criteria?  
 (A) Fever (B) Erythema Marginatum  
 (C) Elevated ESR (D) Arthralgia
17. Long term assessment of diabetes is provided by following investigation  
 (A) FBS (B) RBS  
 (C) PPBS (D) HbA1c
18. Small contracted kidney is seen in all of the following **EXCEPT**  
 (A) Acute tubular necrosis (B) Benign nephrosclerosis  
 (C) Chronic Pyelonephritis (D) Chronic glomerulonephritis
19. Schiller Duval bodies are seen in  
 (A) Teratoma (B) Choriocarcinoma  
 (C) Yolk sac tumor (D) Embryonal cell carcinoma
20. A 46-year old woman presents with an eczematous lesion over the nipple since 4-months. Biopsy reveals infiltration of nipple by large cells with clear cytoplasm which are found both singly and in small clusters in the epidermis. What is the probable diagnosis?  
 (A) Ductal papilloma (B) Phyllodes tumor - malignant  
 (C) Mammary duct ectasia (D) Paget's disease

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**MBBS PHASE – II  
DEGREE EXAMINATION – DECEMBER 2024**

**Time 3 Hours**

**Max. Marks 100**

**PATHOLOGY  
PAPER – II**

**Q.P. Code 1009**

Answers should be specific to the Questions asked.  
Draw neat, labeled diagrams wherever necessary.  
All questions are compulsory.

<b>Question Number</b>	<b>Marks</b>
1. M.C.Q.	<b>25 X 1 = 25</b>
<b>LONG ESSAY QUESTIONS</b>	<b>2 X 10 = 20</b>
2. Enumerate the inflammatory bowel diseases. Mention the difference between Ulcerative colitis and Crohn's disease.	( 2+8 )
3. Describe the pathogenesis of type II Diabetes Mellitus. Discuss its major long term complications.	(5+5)
<b>SHORT ESSAY QUESTIONS</b>	<b>8 X 5 = 40</b>
4. Describe the gross and microscopy of fibrocaceous tuberculosis with diagram.	(2+3)
5. Describe the gross and microscopic features of multinodular Goitre.	(2+3)
6. Describe gross & microscopy of Malignant melanoma.	(2+3)
7. Discuss about the enzyme changes in Myocardial Infarction.	
8. Discuss prognostic factors in carcinoma breast.	
9. Classify of Bone tumors.	
10. Discuss etiology of Hepatoma.	
11. Discuss morphology of acute pancreatitis.	
<b>SHORT ANSWER QUESTIONS</b>	<b>5 X 3 = 15</b>
12. Enumerate the complications of lobar pneumonia.	
13. List the causes of acute renal failure.	
14. What is Astrocytoma? How does it differ from Glioma?	
15. Describe gross and microscopy of Neurilemmoma.	
16. Enumerate the liver function tests.	

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**MULTIPLE CHOICE QUESTIONS**

<b>Course</b>	<b>MBBS Phase-II, December 2024</b>	<b>Max. Marks</b>	<b>25 Marks</b>
<b>Subject</b>	<b>Pathology Paper-II, QP Code 1009</b>	<b>Time</b>	<b>30 Minutes</b>

**Instructions**

- Each question is followed by four options.
- Pick up the single best option and darken the appropriate circle in the OMR Sheet provided.
- Each question carries one mark. No negative marking.

1. Constrictive pericarditis is **most** likely to produce which histologic finding in liver  
(A) Mallory hyaline (B) Sinusoidal dilatation  
(C) Macro-nodular cirrhosis (D) Bile duct proliferation
2. Cor pulmonale can be caused by  
(A) COPD (B) Pulmonary embolism  
(C) Polyarteritis nodosa (D) Wegener's granulomatosis
3. Status asthmaticus is associated with  
(A) Commences in children (B) No allergen implicated  
(C) Prolonged attack with severe respiratory distress (D) Type IV hypersensitivity reaction
4. In Mallory Weiss Syndrome the site of tear is  
(A) Distal Oesophagus (B) Proximal stomach  
(C) Oesophago-gastric junction (D) All of the above
5. All the following are findings of CSF in Pyogenic meningitis **EXCEPT**  
(A) Increased protein (B) Increased Cells  
(C) Decreased Glucose (D) Decreased C-Reactive
6. Schiller Duval bodies are seen in  
(A) Teratoma (B) Choriocarcinoma  
(C) Yolk sac tumor (D) Embryonal cell carcinoma
7. All the following features are characteristic of cirrhosis of liver **EXCEPT**  
(A) Disorganized hepatic architecture (B) Focal scarring  
(C) Involvement of entire liver (D) Formation of regenerative nodules
8. Chloroma is also called as  
(A) Burkitt's lymphoma (B) Monocytic leukemia  
(C) Multiple myeloma (D) Granulocytic sarcoma
9. The most **common** causative organism for lobar pneumonia is  
(A) Staphylococci (B) Streptococci  
(C) Pneumococci (D) Haemophilus
10. Non-caseating sarcoid-like epithelioid cell granulomas are seen in  
(A) Silicosis (B) Asbestosis  
(C) Coal workers pneumoconiosis (D) Chronic berylliosis
11. Most **common** etiologic factor implicated in chronic bronchitis is  
(A) Atmospheric pollution (B) Cotton mills  
(C) Mycoplasma infection (D) Cigarette smoking
12. Small contracted kidney is seen in all of the following **EXCEPT**  
(A) Acute tubular nephritis (B) Benign nephrosclerosis  
(C) Chronic Pyelonephritis (D) Chronic glomerulonephritis

13. Blue dome cyst is a characteristics finding of  
 (A) Carcinoma breast (B) Cystosarcoma phyllodes  
 (C) Fibrocystic disease (D) Fibroadenoma
14. The most important prognostic feature of Renal Cell Carcinoma is  
 (A) Size > 5cm (B) Hematuria  
 (C) Vascular invasion (D) Hypercalcemia
15. Kimmelstien-Wilson nodule is diagnostic of  
 (A) Diabetic glomerulosclerosis (B) Malignant hypertension  
 (C) Amyloid kidney (D) Benign nephrosclerosis
16. The etiology of Granulomatous prostatitis is  
 (A) Tuberculosis (B) Sarcoidosis  
 (C) Autoimmunity (D) Syphilis
17. Osteomalacia is  
 (A) Normal osteoid, defective mineralization (B) Abnormal osteoid, normal mineralization  
 (C) Abnormal osteoid, abnormal mineralization (D) Abnormal osteoid, normal remodeling
18. Massive splenomegaly is seen all **EXCEPT**  
 (A) Kala azar (B) Myelofibrosis  
 (C) ALL (D) Gaucher's disease
19. Psammomma bodies are characteristically seen in  
 (A) Papillary carcinoma (B) Follicular carcinoma  
 (C) Medullary carcinoma (D) Anaplastic carcinoma
20. The absolute criteria for malignancy in pheochromocytoma is  
 (A) Capsular invasion (B) Metastasis  
 (C) Mitosis (D) Nuclear pleomorphism
21. Hypoglycemia is seen in  
 (A) Gastrinoma (B) Glucaganoma  
 (C) Insulinoma (D) VIPoma
22. In Hashimoto's thyroiditis, serum antibodies are mainly **against**  
 (A) Tri-iodothyronine (B) Thyroxine  
 (C) Thyroglobulin (D) Thyroid stimulating hormone
23. One of the following is a features of ulcerative colitis  
 (A) Granuloma (B) Skip lesion  
 (C) Transmural involvement (D) Crypt abscess
24. The most **common** site of pancreatic cancer is  
 (A) Head (B) Body  
 (C) Tail (D) Uncinate process
25. All of the following have a role to play in Hepatocellular cancer **EXCEPT**  
 (A) HBV infection (B) HCV infection  
 (C) Aflatoxin (D) EBV infection

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