

MBBS PHASE III PART II DEGREE EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

General Medicine Paper II

Q.P. Code: 1019

Instructions for MCQs:

- 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

Instructions for Essay questions:

- Answers should be specific to the Questions asked.
- Draw neat, labeled diagrams wherever necessary.

MCQ 25X1=25

1. UMN involvement is characterized by all of the following **EXCEPT**
(A) Extensor plantar (B) Absent abdominal reflexes
(C) Muscle fasciculations (D) Increased muscle tone and tendon reflexes
2. EEG rhythm seen when eyes are shut is
(A) Alpha (B) Beta
(C) Theta (D) Delta
3. Broca's aphasia is
(A) Fluent aphasia (B) Non-fluent aphasia
(C) Sensory aphasia (D) Conduction aphasia
4. Viral meningitis has all of the following **EXCEPT**
(A) Clear CSF (B) Sterile culture
(C) Normal protein (D) More than 5000 cells
5. Which of the following statements about Brown-Sequard syndrome is true?
(A) Ipsilateral loss of temperature (B) Contralateral loss of pain
(C) Contralateral loss of vibration (D) Contralateral loss of position sense
6. Proteinuria in excess of 3.5 gm per day suggests
(A) Cardiac failure (B) Polycystic kidney disease
(C) Chronic pyelonephritis (D) Nephrotic Syndrome
7. Microscopic hematuria is **NOT** a feature of
(A) Urinary tract infection (B) Renal papillary necrosis
(C) Nephrotic syndrome (D) Infective endocarditis
8. Which of the following drugs causes Thyrotoxicosis?
(A) Amiodarone (B) Furosemide
(C) Verapamil (D) Diltiazem
9. Which of the following is **NOT** a symptom of Hypothyroidism?
(A) Deafness (B) Impotence
(C) Dry hair (D) Weight loss
10. TROUSSEAU'S sign is observed in
(A) Hypercalcemia (B) Hyperkalemia
(C) Hypokalemia (D) Hypocalcemia
11. Which of the following is growth hormone excess condition?
(A) Conn's syndrome (B) Prolactinoma
(C) Acromegaly (D) Cushing's syndrome
12. Gold standard test to diagnose turners syndrome
(A) MRI (B) CT
(C) Karyotyping (D) Serum cortisol

13. Hypoglycemia is defined as
 (A) Blood glucose <63mg/dl (B) Blood glucose <100mg/dl
 (C) Blood glucose <126mg/dl (D) Blood glucose <200 mg/dl
14. Which of the following is the hallmark of "proliferative" diabetic retinopathy?
 (A) Retinal vascular microaneurysms (B) Blot hemorrhages
 (C) Neovascularization (D) Cotton wool spots
15. Most Dreaded organ involvement in SLE is
 (A) Pulmonary (B) Cardiac
 (C) Renal (D) Nervous system
16. Rheumatoid factor is
 (A) IGM (B) IGG
 (C) IGA (D) Can be any of the above
17. 5 % Permethrin is used in treatment of
 (A) Scabies (B) Dermatophytosis
 (C) Leishmaniasis (D) Measles
18. Condyloma acuminata is caused by
 (A) Herpes Simplex Virus 1 (B) Herpes Simplex Virus 2
 (C) Human Papilloma Virus (D) Treponema pallidum
19. Delusion is a disorder of
 (A) Thought (B) Perception
 (C) Personality (D) Cognition
20. Which of the following is not an SSRI?
 (A) Fluvoxamine (B) Amitriptyline
 (C) Sertraline (D) Paroxetine
21. What is the length of the oesophagus?
 (A) 20 cm (B) 25 cm
 (C) 15cm (D) 10 cm
22. Bloody diarrhea is most common presentation of
 (A) Crohn disease (B) Ulcerative colitis
 (C) Peptic ulcer (D) Intestinal obstruction
23. Definite indication for H. pylori eradication
 (A) Peptic ulcer (B) GERD
 (C) Achalasia (D) Oesophagitis
24. All are intra hepatic sinusoidal causes of portal hypertension **EXCEPT**
 (A) Cirrhosis (B) Polycystic liver disease
 (C) Nodular regenerative hyperplasia (D) Budd-Chiari syndrome
25. Serum Amylase is increased in all **EXCEPT**
 (A) Acute Pancreatitis (B) Intestinal ischemia
 (C) Pyelonephritis (D) Perforated peptic ulcer

LONG ESSAY QUESTIONS 2 X 10 = 20

2. Discuss etiopathogenesis, clinical features, investigations and management of tubercular meningitis. [2+3+2+3]
 3. Discuss causes, clinical features, investigations and management of intracerebral hemorrhage. [3+3+2+2]

SHORT ESSAY QUESTIONS 8 X 5 = 40

4. Classify Anticonvulsant drugs.
 5. Discuss Calcium metabolism. Write a note on Tetany. (2+3)
 6. Classify drugs used in Diabetes Mellitus and discuss management of type 2 Diabetes Mellitus?(2+3)
 7. Mention the types of Seronegative Arthritis and describe the clinical features. (3+2)
 8. Define Delusion. Enumerate some common delusions seen in clinical practice.
 9. Describe the systemic treatment modalities for Psoriasis.
 10. Discuss clinical features and management of Spontaneous Bacterial Peritonitis.
 11. Discuss the clinical features and management of Irritable Bowel Syndrome.

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. List 3 drugs used for prophylaxis of Migraine.
13. Mention 3 cardiac manifestations Hyperthyroidism.
14. Describe 6 causes of Polyarthritis.
15. Enlist First Rank Symptoms of Schizophrenia.
16. Describe the clinical features of Chicken pox.

MBBS PHASE-III Part-II DEGREE EXAMINATION – AUGUST 2020

Time: 3 Hours

Max. Marks: 100

General Surgery Paper I

Q.P. Code: 1020&1021

Instructions for MCQs:

- ◆ 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

Instructions for Essay questions:

- ◆ Answers should be specific to the Questions asked.
- ◆ Draw neat, labeled diagrams wherever necessary.

MCQ (SECTION A) 15 X 1 = 15

1. Parenteral nutrition can be administered through all **EXCEPT**
(A) Peripherally inserted central catheter (B) Subclavian vein
(C) External Jugular vein (D) Percutaneous endoscopic gastrostomy
2. Peripheral feeding is appropriate for
(A) 2 years (B) 2 weeks
(C) 2 months (D) 2 days
3. The intra-abdominal pressure during laparoscopy should be set in between
(A) 5 to 8 mmhg (B) 10 to 15 mmhg
(C) 20 to 25 mmhg (D) 30 to 35 mmhg
4. Gas used in laparoscopy
(A) CO₂ (B) O₂
(C) N₂O (D) N₂
5. Normal ankle brachial pressure index is
(A) <1 (B) >1
(C) <2 (D) >2
6. Wound healing is affected by all **EXCEPT**
(A) Age (B) Nutrition
(C) Dryness or wetness of wound (D) Drugs
7. The vitamin which has inhibitory effect on wound healing
(A) Vitamin A (B) Vitamin E
(C) Vitamin C (D) Vitamin B
8. Keloid scar is made of
(A) Dense collagen (B) Loose fibrous tissue
(C) Granulation tissue (D) Fibrosis
9. Following is not used as debriding agent,
(A) Variclene lactic acid (B) Aberbine benzoic acid
(C) Methyl benzoic acid (D) Benoxyl benzoic acid
10. Which is not a feature of leprosy?
(A) Trophic ulceration (B) Abdominal mass
(C) Involvement of spine (D) Central nervous system
11. Pilonidal sinus more common in
(A) Men (B) Women
(C) Equal incidence (D) Children
12. Which of the following has a punctum
(A) Lipoma (B) Dermoid cyst
(C) Sebaceous cyst (D) Nevus

13. Commonest cause of genital ulcer is
 (A) Syphilis (B) Chancroid
 (C) HIV (D) Genital herpes
14. An abscess of pulp of finger is
 (A) Paronychia (B) Felon
 (C) Cellulitis (D) Koilonychia
15. Universal tumor is
 (A) Dermoid cyst (B) Epidermoid cyst
 (C) Lipoma (D) Sebaceous cyst

LONG ESSAY QUESTIONS (SECTION A) 1 X 10 = 10

2. Define and classify Shock. Discuss the pathophysiology and management of Septic Shock. (1+1+4+4)

SHORT ESSAY QUESTIONS (SECTION A) 2 X 5 = 10

3. Classify Burns. Management of 20% first degree burns in children. (2+3)
 4. Discuss the management of DVT.

SHORT ANSWER QUESTIONS (SECTION A) 5 X 3 = 15

5. What are the metabolic response to starvation?
 6. What are the different Blood substitutes?
 7. Define Cyst. Describe the clinical features, complications and management of Sebaceous cyst.
 8. Discuss Tetanus prophylaxis.
 9. Describe Tropic ulcer.

MCQ (SECTION B) 10 X 1 = 10

1. Most common cause of pathological fracture in India
 (A) Osteoporosis (B) Sarcoidosis
 (C) Nutritional (D) Steroids
2. Cast syndrome is complication of
 (A) Hip spica (B) Below elbow cast
 (C) Above elbow cast (D) Ptb cast
3. Skeletal traction is given by
 (A) Steinmann pins (B) Pawlik harness
 (C) Rush pin (D) Intramedullary nail
4. Which of the following is an ideal site for harvesting bone graft
 (A) Iliac crest (B) Distal end Humerus
 (C) Distal end Femur (D) Fibula
5. Most accurate diagnostic clinical sign of fracture is
 (A) Abnormal mobility at the bone (B) Pain
 (C) Tenderness (D) Swelling
6. Commonest joint to dislocate in adults is
 (A) Shoulder (B) Hip
 (C) Elbow (D) Metacarpophalangeal
7. The earliest sign/symptom of Compartment syndrome is:
 (A) Pain on passive movement (B) Absence of pulse
 (C) Paralysis (D) Sensory disturbances
8. Tennis elbow is
 (A) Tendinitis at common extensor origin (B) Tendinitis at common flexor origin
 (C) Painful elbow flexion (D) Painful elbow extension
9. Break in Shenton's line indicate
 (A) Intertrochanteric fracture (B) Femur neck fracture
 (C) Tibia fracture (D) Ankle fracture
10. Most common complication of fracture shaft Femur is
 (A) Malunion (B) Nonunion
 (C) Knee stiffness. (D) Fat embolism

LONG ESSAY QUESTIONS (SECTION B) 1 X 10 = 10

1. Define Fracture. Explain briefly stages of fracture healing, clinical features and management of fracture.

SHORT ESSAY QUESTIONS (SECTION B) 3 X 5 = 15

2. Describe Monteggia fracture, its management and complications.
3. Discuss clinical features and management of Acute Osteomyelitis.
4. Explain complications of amputation.

SHORT ANSWER QUESTIONS (SECTION B) 5 X 3 = 15

5. Describe Thomas splint.
6. List the causes of pathological fracture.
7. List the causes of fracture nonunion.
8. What is cold abscess?
9. Describe the importance of Pauwel's classification.

MBBS PHASE III PART II EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

General Surgery Paper II

Q.P. Code: 1022

Objective 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

Subjective Instructions :

- ◆ Answers should be specific to the Questions asked.
- ◆ Draw neat, labeled diagrams wherever necessary.

MCQ 25 X 1 = 25

1. The strength of the surgical wound which has healed soundly is
(A) 60% (B) 70%
(C) 80% (D) 90%
2. Light meshes are defined as weight
(A) <40g/m² (B) >40g/m²
(C) <50g/m² (D) >50g/m²
3. Most Spigelian hernias appear
(A) Above the umbilicus (B) At the level of umbilicus
(C) Below the level of umbilicus (D) Below arcuate line
4. Le Fort II facial fracture implies
(A) Fracture running through alveolar ridge (B) Fracture running through midline of palate & zygomatico maxillary suture
(C) Fracture running through zygomatic process of maxilla, floor of orbit, root of nose on one side only (D) Similar to C but on both sides
5. Which of the following is not a feature of oral cancer?
(A) Mouth ulceration >4 weeks (B) Unilateral tonsillar enlargement.
(C) Unexplained tooth mobility (D) Trismus
6. Pre-malignant lesions of the oral cavity are all, **EXCEPT**
(A) Erythroplakia (B) Oral sub-mucous fibrosis
(C) Chronic hyperplastic candidiasis (D) Aphthous ulcer
7. Which of the following is false about secondary hyperparathyroidism?
(A) Commonly occurs in CRF (B) Related to hyperphosphatemia
(C) Patients are generally hypocalcemic (D) Patients are generally hypermagnesemia
8. Removal of L1 ganglion in lumbar sympathectomy results in
(A) Sterility (B) Impotence
(C) Causalgia (D) Urine retention
9. DTPA scan is used to evaluate
(A) Renal structure (B) Renal function
(C) Renal blood flow (D) Cardiac output
10. Indication for surgery in BPH are all **EXCEPT**
(A) Prostatism (B) Chronic retention
(C) Haemorrhage (D) Enlarged prostate
11. Operations for hypospadias should be undertaken before the age of
(A) 18 months (B) 22 months
(C) 36 months (D) 42 months

12. All are true about testicular tumour **EXCEPT** :
- (A) AFP and HCG should be measured prior to orchidectomy
(B) Lymphatic spread to para aortic lymph nodes
(C) Extremely sensitive to platinum based chemotherapy
(D) Lymphoma is most common
13. Diagnosis of traumatic rupture of diaphragm is made by
- (A) Laparoscopy
(B) Chest x-ray
(C) Diagnostic peritoneal lavage
(D) Computed tomography
14. H.pylori causes
- (A) Type A gastritis
(B) Type B gastritis
(C) Auto immune
(D) Allergic
15. What is advantage of robotic surgery over laparoscopic surgery
- (A) Operative time
(B) Post op pain
(C) Improved tactile feedback
(D) Improved instrument maneuverability
16. More specific indicator of acute pancreatitis is
- (A) Sr amylase
(B) Sgpt
(C) Sr lipase
(D) Sgot
17. Commonest type of mesentric cyst is
- (A) Enterogenous cyst
(B) Chylolymphatic cyst
(C) Dermoid cyst
(D) Urogenital remnant
18. Right hemicolectomy is treatment for cancer of
- (A) Caecum
(B) Ascending colon
(C) Caecum and ascending colon
(D) Transverse colon
19. Cardinal clinical features of intestinal obstruction are all except
- (A) Vomiting
(B) Abdominal pain
(C) Diarrhea
(D) Constipation
20. All are true about Meckel's diverticulum except
- (A) Congenital
(B) True diverticula
(C) Develop from omphalomesenteric duct
(D) All incidentally detected Meckel's diverticulum should be resected
21. Fluid levels are not visible in
- (A) Meconium ileus
(B) Intussusception
(C) Colon pouch
(D) Duodenal obstruction
22. Sigmoid volvulus occurs in
- (A) Clockwise
(B) Anticlockwise
(C) Both clockwise and anticlockwise
(D) Axial in direction
23. Most common initiating factor in acute appendicitis is
- (A) Luminal obstruction
(B) Bacterial infection
(C) Lymphoid hyperplasia
(D) Perforation
24. Severe epistaxis can be treated by which of the following
- (A) Nasal packing
(B) Surgical ligation
(C) Embolization
(D) All of the above
25. Drug used for antiemesis
- (A) Halothane
(B) Propofol
(C) Metoclopramide
(D) Nitrous oxide

LONG ESSAY QUESTIONS 2 X 10 = 20

2. Describe the anatomy of Appendix. Discuss the etiology, investigations and treatment of acute appendicitis. (3+3+4)
3. Discuss the etiology, clinical features, classifications and management Cholelithiasis. (2+2+2+4)

SHORT ESSAY QUESTIONS 8 X 5 = 40

4. Define Hernia. Clinical features and recent advances in management of inguinal hernia. (1+2+2)
5. Classify Le-Fort fractures. Write about management of Le-Fort II fractures. (3+2)
6. Discuss the causes for Gynecomastia and its surgical management.

7. Describe the surgical anatomy of thyroid gland.
8. Explain Extracorporeal Shockwave Lithotripsy.
9. Describe the clinical features & management of Hydrocele. (2+3)
10. Discuss the management of sub diaphragmatic abscess.
11. Define pain and mention various drugs used to treat pain.

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. Enumerate the causes of LMN facial nerve palsy.
13. Discuss the causes of Stomatitis.
14. Describe the clinical features of Horner's syndrome.
15. Describe the symptoms and clinical features of Gastric ulcer.
16. Explain the components of Basic life support.

MBBS PHASE – III Part II DEGREE EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

Obstetrics & Gynaecology Paper I

Q.P. Code: 1023

Instructions for MCQs:

- 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

Instructions for Essay questions:

- Answers should be specific to the Questions asked.
- Draw neat, labeled diagrams wherever necessary.

MCQ 25X1=25

1. Time taken for spermatogenesis is
(A) 80-90 days (B) 50-60 days
(C) 60-70 days (D) 70-80 days
2. Liquor is maximum at
(A) 32-34 weeks (B) 34-36 weeks
(C) 36-38 weeks (D) 38-40 weeks
3. Renal agenesis is associated with
(A) Hydramnios (B) Anencephaly
(C) Tracheo oesophageal fistula (D) Oligohydramnios
4. The remnant of the umbilical vein is
(A) Allantois (B) Ligamentum teres
(C) Round ligament (D) Broad ligament
5. Physiological changes in pregnancy include
(A) Increased Insulin levels (B) Decreased BMR
(C) Decreased GH (D) Decreased blood volume
6. The doubling time of beta-HCG is
(A) 1.4-2 days (B) 14 days
(C) 10 days (D) 7 days
7. Hegar's sign can be demonstrated at following period of gestation
(A) 06 to 10 POG (B) 12 to 16 POG
(C) 20 to 24 POG (D) 24 to 28 POG
8. External ballottement is elicited earliest at
(A) 10 weeks (B) 12 weeks
(C) 14 weeks (D) 20 weeks
9. The first trimester of pregnancy refers to
(A) First 12 weeks pregnancy (B) 13-28 weeks pregnancy
(C) 28-40 weeks pregnancy (D) None
10. The total duration of pregnancy is
(A) 260 days (B) 270 days
(C) 280 days (D) 290 days
11. Lie in Cephalic presentation is
(A) Unstable (B) Oblique
(C) Longitudinal (D) Transverse
12. The arbitrary bony fixed point on the presenting part which comes in relation with various quadrants
(A) Denominator (B) Attitude
(C) Lie (D) Presentation

13. In case of Primigravida ,if head fails to engage the causes are all **EXCEPT**
 (A) Deflexed Head (B) CPD
 (C) PIH (D) Hydrocephalus
14. Posterior fontanel is formed by junction of
 (A) Anteriorly Sagittal, laterally Temporal sutures (B) Bi temporal diameter
 (C) Anteriorly Sagittal sutures and Lambdoid on either side (D) Anterior Frontal, posteriorly Sagittal & on either side Coronal sutures
15. True Pelvis refers
 (A) Upper part of Pelvis (B) Lower part of Pelvis
 (C) Either of these (D) Neither of these
16. Use of Folic acid to prevent NTD's should be best initiated
 (A) During 1st trimester (B) During 2nd trimester
 (C) During 3rd trimester (D) Before conception
17. Triple test includes all **EXCEPT**
 (A) Inhibin A (B) Unconjugated Estradiol
 (C) Beta HCG (D) Inhibin B
18. Bag of membranes ruptures usually
 (A) Before full dilatation (B) After full dilatation of cervix
 (C) After head is engaged (D) With excessive show
19. Milk ejection reflex is by
 (A) Oxytocin (B) Prolactin
 (C) Estrogen (D) Progesterone
20. All the following drugs are used in hyperemesis **EXCEPT**
 (A) Prochlorperazine (B) Metoclopramide
 (C) Hydrocortisone (D) Lorazepam
21. Commonest cause of first trimester abortion
 (A) Monosomy (B) Trisomy
 (C) Triploidy (D) Aneuploidy
22. All of the drugs are used in MTP **EXCEPT**
 (A) Mifiprestone (B) Methotrexate
 (C) Misoprostol (D) Atosiban
23. According to MTP act, 2nd doctor opinion is required when pregnancy is
 (A) 10 weeks (B) 6 weeks
 (C) >12 weeks (D) >20 weeks
24. Twin peak sign is seen in
 (A) Monochorionic diamniotic (B) Dichorionic monoamniotic
 (C) Conjoined twins (D) Diamniotic dichorionic
25. All of the following are risk factors for PIH **EXCEPT**
 (A) Diabetes (B) Primigravida
 (C) Previous LSCS (D) Previous history of PIH

LONG ESSAY QUESTIONS 2 X 10 = 20

2. Episiotomy- Define, describe the types, indications, technique, complications, advantages of episiotomy
3. Define Pre eclampsia. Differentiate mild and severe Pre eclampsia. Add a note on investigations in a case of Pre eclampsia. (2+4+4)

SHORT ESSAY QUESTIONS 8 X 5 = 40

4. Describe the functions of Placenta.
5. Discuss the various stages of Lactation and its endocrine control. (3+2)
6. Differentiate Cephalohematoma from Caput succedaneum?
7. Discuss the principle and method of follow up of vesicular mole.
8. Define Oligohydramnios? Mention the important causes for Oligohydramnios. (2+3)
9. Discuss the complications specific to Monochorionic twins.
10. Critically evaluate Forceps versus Ventouse assisted delivery.
11. Enumerate the indications of Caesarean section.

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. Discuss the principle of urine pregnancy test.
13. Define Moulding. Mention at which bones this occurs on the fetal skull.
14. Enumerate the tests for prenatal genetic screening.
15. Enumerate the importance of Ischial spine in obstetrics.
16. Mention the criteria to diagnose blighted ovum.

MBBS PHASE – III Part II DEGREE EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

Obstetrics & Gynaecology

Q.P. Code: 1024

Instructions for MCQs:

- 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

Instructions for Essay questions:

- Answers should be specific to the Questions asked.
- Draw neat, labeled diagrams wherever necessary.

MCQ25X1=25

1. The uterine artery is a branch of
(A) Aorta (B) Common iliac
(C) Internal iliac (D) External iliac
2. The length of female urethra is
(A) 50mm (B) 20 mm
(C) 35 mm (D) 45 mm
3. The longest part of fallopian tube
(A) Interstitial portion (B) Ampulla
(C) Infundibulum (D) Isthmus
4. Ovary is attached to broad ligament with
(A) Mesovarium (B) Ovarian ligament
(C) Round ligament (D) Infundibulopelvic ligament
5. The ferning of cervical mucus depends on
(A) Estrogen (B) Progesterone
(C) LH (D) FSH
6. Normal prolactin level is
(A) 15ng/ml (B) 20ng/ml
(C) 30ng/ml (D) 25ng/ml
7. How many hours prior to ovulation the peak of estrogen secretion is seen
(A) 36hrs (B) 24hrs
(C) 48hrs (D) 12hrs
8. Which of these is diagnostic of menopause?
(A) Serum FSH >40 (B) Serum FSH >20
(C) Serum FSH <40 (D) serum FSH <30
9. HRT helpful in all of the following except
(A) Vaginal atrophy (B) Flushing
(C) Osteoporosis (D) Coronary heart disease
10. Absolute contraindication of hormone replacement therapy is
(A) Thrombosis (B) Fibrocystic disease
(C) Fibroadenoma (D) Hemorrhage
11. The term metrorrhagia refers to
(A) Heavy menstrual bleeding (B) Scanty menstrual bleeding
(C) Intermenstrual bleeding (D) Prolonged menses
12. The fixative used in pap smear examination is
(A) Formalin (B) Methanol
(C) 95% ethyl alcohol and ether (D) PAS

13. The magnification of Colposcope is
 (A) 100 times (B) 50 times
 (C) 200 times (D) 10-20 times
14. Colposcopy is the preferred modality for screening of
 (A) Ca Cervix (B) Ca Vagina
 (C) Ca Ovary (D) Ca Endometrium
15. Diagnostic indications of USG are
 (A) Congenital anomalies of the uterus (B) To diagnose haematocolpos
 (C) To diagnose Haematometra (D) All of the above
16. Indications of intravenous urography are following except
 (A) Advanced Ca Cervix (B) Ovarian cancers
 (C) Genitourinary fistulae (D) Ca breast
17. In radionuclear imaging the bone scans are done using
 (A) Ir 131 (B) I 121
 (C) Tc - 99 (D) Ra
18. The procedures used to diagnose uterus didelphys are **EXCEPT**
 (A) Laparoscopy (B) HSG
 (C) USG (D) IVP
19. All of the following present with painful genital lesions **EXCEPT**
 (A) Genital herpes (B) Soft sore
 (C) Donovanosis (D) Chancroid
20. 47XXY is a karyotype of
 (A) Turners syndrome (B) Klinefelter syndrome
 (C) Edward Syndrome (D) Downs Syndrome
21. Clinical features of Turners syndrome **EXCEPT**
 (A) Secondary amenorrhoea (B) Widely spaced nipple
 (C) XO genotype (D) Streak ovaries
22. Drugs used in treatment of Hirsutism are all **EXCEPT**
 (A) Spironolactone (B) Flutamide
 (C) Cyproterone acetate (D) Danazol
23. Type of discharge in Trichomoniasis
 (A) Foul smelling greenish discharge (B) Brownish discharge
 (C) Curdy white discharge (D) Watery discharge
24. All are differential diagnosis of acute PID except
 (A) Acute appendicitis (B) Ectopic pregnancy
 (C) Twisted ovarian cyst (D) Fibroid uterus
25. Cervical stenosis is caused by all except
 (A) Conization (B) Fothergills surgery
 (C) Cauterization (D) Cervical tear

LONG ESSAY QUESTIONS 2 X 10 = 20

- Describe supports of uterus. Draw a neat labeled diagram of supports of uterus.
- Classify ovarian tumors. Differentiate between benign and malignant ovarian tumors. Enumerate the complications of benign ovarian tumor. (4+3+3)

SHORT ESSAY QUESTIONS 8 X 5 = 40

- Describe the course of pelvic ureter and mention the common sites of injury during pelvic surgery.
- Management of postmenopausal bleeding.
- Write indications and complications of diagnostic laparoscopy in gynecology.
- Enumerate the risk factors for Vulvovaginal Candida infection.
- Management of vesicovaginal fistula.
- Indications for hysterectomy in a patient of abnormal uterine bleeding.
- Complications of hydatidiform Mole.
- POP-Q Classification of genital prolapse.

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. Name the different parts of fallopian tube with neat labeled diagram.
13. Define late menopause. Enumerate two risks and two benefits of late menopause.
14. Discuss the complications of hysteroscopy.
15. List any 6 causes of menorrhagia.
16. Define Secondary Amenorrhea. Physiological causes of Secondary Amenorrhea.

MBBS PHASE – III Part II DEGREE EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

Paediatrics

Q.P. Code: 1017

Instructions for MCQs:

- 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

Instructions for Essay questions:

- Answers should be specific to the Questions asked.
- Draw neat, labeled diagrams wherever necessary.

MCQ 25x1=25

1. Low set malformed ear is a feature in which of the following syndrome
(A) Down's syndrome (B) Edwards syndrome
(C) Patau syndrome (D) Dubin Johnson's syndrome
2. Delayed closure of posterior fontanelle is seen in
(A) Hypopituitarism (B) Hypothyroidism
(C) Turner's syndrome (D) Apert's syndrome
3. Vitamin given to newborn at the time of birth.
(A) Vitamin A (B) Vitamin C
(C) Vitamin K (D) Vitamin D
4. Neural tube defects can be prevented by antenatal periconception supplementation with
(A) Vitamin B₆ (B) Vitamin B₂
(C) Folic acid (D) Vitamin B₁₂
5. Human milk is stored in
(A) Lactiferous sinus (B) Duct
(C) Alveoli (D) Myoepithelial cell
6. The most common organism causing peritonitis in Nephrotic syndrome is :
(A) Staph.aureus (B) E.coli
(C) H.influenzae (D) S.pneumoniae
7. Vesicoureteric reflux is diagnosed by :
(A) Ultrasound (B) MCU
(C) Renal biopsy (D) DTPA scan
8. The full number of nephrons in the kidney is present at around
(A) 32 weeks (B) 38 weeks
(C) 36 weeks (D) 40 weeks
9. Hemolytic Uremic syndrome is characterized by all of the following **EXCEPT**
(A) Microangiopathic hemolytic anemia (B) Acute Cardiac Insufficiency
(C) Thrombocytopenia (D) Acute renal insufficiency
10. All are minor criteria for diagnosing rheumatic fever **EXCEPT**
(A) Fever (B) Arthralgia
(C) Prolonged PR interval (D) Positive throat culture for streptococci
11. Conditions associated with wide pulse pressure are all **EXCEPT**
(A) Rupture sinus of valsalva (B) PDA
(C) Aortic stenosis (D) Arterio-venous fistula
12. The most important discharge criteria in a severely malnourished child is
(A) A consistent weight gain (B) Looking well

- (C) No symptoms (D) Caretaker able to take care of the child
13. Recommended site for Bone Marrow aspiration in a 5 year old child is
 (A) Iliac crest (B) Sternum
 (C) Antero-medical aspect of proximal tibia (D) Antero-lateral aspect of proximal tibia
14. Common organisms implicated in the causation of neonatal meningitis include all except
 (A) H.influenzae (B) E.coli
 (C) N.meningitidis (D) P.aeruginosa
15. A child achieves handedness at,
 (A) 6 months (B) 12 months
 (C) 18 months (D) 24 months
16. According to WHO, fluid of choice for resuscitation in Dengue Hemorrhagic fever is
 (A) Isolyte P (B) Ringers lactate
 (C) Normal saline with dextrose (D) 5% Dextrose
17. Following are Autosomal Dominant conditions except -
 (A) Huntington chorea (B) Marfan's Syndrome
 (C) Neurofibromatosis (D) Spinal muscular Atrophy
18. At what age does stranger anxiety normally appear
 (A) 2 month (B) 4 month
 (C) 7 month (D) 11 month
19. Bronchiolitis is most commonly caused by
 (A) Staphylococcus aureus (B) Pneumococcus
 (C) Respiratory syncytial virus (D) Candida
20. The earliest sign of rickets is
 (A) Rickety rosary (B) Craniotabes
 (C) Bow legs (D) Harrisons groove
21. The normal calorie requirement of a 5 year old child is
 (A) 800 calories (B) 1000 calories
 (C) 1400 calories (D) 2000 calories
22. Reference protein is obtained from
 (A) Milk (B) Liver
 (C) Soya beans (D) Egg white
23. Megaloblastic anemia in infants may be associated with
 (A) Pica (B) Marasmus
 (C) Goats milk feeding (D) Delayed weaning
24. What is the most common cause of iron deficiency anemia in children
 (A) G6PD deficiency (B) Leukemia
 (C) Pernicious anemia (D) Poor intake of iron
25. Treatment of choice in Iron poisoning in a 4 year old child.
 (A) Gastric lavage (B) Desferrioxamine IV 100mg
 (C) N-Acetyl cystine (D) Blood transfusion

LONG ESSAY QUESTIONS 2 X 10 = 20

2. A 7year old boy comes with h/o facial puffiness since 4 days with h/o reduced urine output. What are the differential diagnoses in this case and how would you approach this case?
3. Describe various factors affecting growth and development. Discuss approach to failure to thrive.

SHORT ESSAY QUESTIONS 8 X 5 = 40

4. Discuss about physiological jaundice in newborn.
5. Describe clinical manifestations and management of Kerosene poisoning in children
6. Define microcephaly. Discuss the causes of microcephaly in children.
7. Discuss the clinical features and management of Bronchiolitis in children.
8. Discuss indications for use of Blood components in children.
9. List the components of pentavalent vaccine. Mention the schedule and common adverse events of this vaccine.
10. Discuss the causes and prevention of Under-5 mortality.

11. Discuss clinical features and management of measles

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. Describe Ghon's complex

13. Describe the peripheral smear findings in Malaria

14. Define BMI. Classify obesity as per BMI

15. Enlist the causes of delayed dental eruption.

16. Explain the components of Low osmolarity WHO ORS

MBBS PHASE III PART II DEGREE EXAMINATION AUGUST 2020

Time: 3 Hours

Max. Marks: 100

General Medicine Paper I

Q.P. Code: 1018

Instructions for MCQs:

- ◆ 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

Instructions for Essay questions:

- ◆ Answers should be specific to the Questions asked.
- ◆ Draw neat, labeled diagrams wherever necessary.

MCQ 25 X 1 = 25

1. Satiety is controlled by which part of the brain?
(A) Hippocampus (B) Corpus Callosum
(C) Thalamus (D) Hypothalamus
2. Categorize BMI > 25 kg/ sq m as per Asia Pacific Guidelines for obesity.
(A) Normal (B) Overweight
(C) Obese (D) Underweight
3. Which of the following drugs is most likely to cause falls in elderly?
(A) Benzodiazepines (B) Antipsychotics
(C) Antidepressants (D) Beta blockers
4. Which one of the following is the major risk factor for delirium in elderly?
(A) Depression (B) Visual impairment
(C) Pre-existing cognitive impairment (D) Polypharmacy
5. Glandular fever caused by
(A) Herpes Zoster virus (B) Varicella zoster
(C) Epstein Bar virus (D) Herpes simplex
6. Incubation period in primary HIV infection is
(A) 1 to 2 weeks after exposure (B) 1 to 3 weeks after exposure
(C) 2 to 3 weeks after exposure (D) 2 to 4 weeks after exposure
7. Management of Rickettsial fevers include all **EXCEPT**
(A) Tetracycline (B) Doxycycline
(C) Chloramphenicol (D) Penicillin
8. Best marker for iron deficiency is
(A) Serum Iron (B) Serum Ferritin
(C) TIBC (D) Transferrin saturation
9. All of the following cause intravascular hemolysis **EXCEPT**
(A) Mismatched blood transfusion (B) Snake bite
(C) Thalassemia (D) PNH
10. Cold hemagglutinin is associated with
(A) Anti IgM (B) Anti IgG
(C) Anti IgA (D) Donath Landsteiner antibody
11. Which of the following is **NOT** seen in DIC
(A) Thrombosis (B) Thrombocytopenia
(C) Hyperfibrinogenemia (D) Consumption coagulopathy
12. In multiple myeloma most common infection is
(A) Osteomyelitis (B) Otitis
(C) Cholecystitis (D) Pyelonephritis

13. Graham Steel's murmur is heard in
 (A) Aortic regurgitation (B) Pulmonary regurgitation
 (C) Tricuspid regurgitation (D) Mitral regurgitation
14. Coarctation of aorta is most commonly associated with
 (A) Mitral stenosis (B) Tricuspid stenosis
 (C) Bicuspid aortic valve (D) Patent ductus arteriosus
15. Boot shaped Heart on X-ray is seen in
 (A) Pericardial effusion (B) Dilated cardiomyopathy
 (C) ASD (D) Tetralogy of Fallot
16. Most common infectious cause of acute pericarditis
 (A) Fungal (B) Bacterial
 (C) Viral (D) Parasitic
17. T wave is inverted in
 (A) Exercise (B) Coronary ischemia
 (C) CCF (D) Hyperthyroidism
18. Digital clubbing is seen in all **EXCEPT**
 (A) Endocarditis (B) Pulmonary AV fistula
 (C) Tricuspid atresia (D) Aortic dissection
19. All are ECG changes in hypokalemia , **EXCEPT**
 (A) U wave (B) ST segment sagging
 (C) T wave flattening or inversion (D) QT interval prolongation
20. Which of the following is a Serum marker of Hepatocellular carcinoma?
 (A) CEA (B) CA15-5
 (C) Beta HCG (D) AFP
21. Cough with post nasal drip is of the following origin
 (A) Pharynx (B) Larynx
 (C) Trachea (D) Bronchus
22. Rusty colored sputum and presence of herpes labialis is suggestive of pneumonia caused by which pathogen?
 (A) Klebsiella (B) Pneumococcus
 (C) Legionella (D) Streptococcus
23. Melanoptysis is sputum which is
 (A) Brown colored (B) Green colored
 (C) Black colored (D) Red colored
24. Platypnea is defined breathless in
 (A) Supine position (B) Sitting position
 (C) Lateral position (D) Standing position
25. Aquagenic pruritus is seen in
 (A) Essential Thrombocytosis (B) Chronic Myeloid Leukemia
 (C) Primary Myelofibrosis (D) Polychthemia Vera

LONG ESSAY QUESTIONS 2 X 10 = 20

2. Discuss etiology, clinical features, investigations and management of Atrial fibrillation. (2+2+3+3)
 3. Define Hemoptysis. Describe the various etiologies and management of hemoptysis. (1+ 4+5)

SHORT ESSAY QUESTIONS 8 X 5 = 40

4. Describe the clinical manifestations of Thiamine deficiency.
 5. Describe the interventions to reduce the risk of falls and fractures in elderly.
 6. Describe the clinical features, and treatment of Herpes Zoster.
 7. Discuss the neurological manifestations and treatment of B₁₂ deficiency.
 8. Describe any 10 peripheral signs of Aortic Regurgitation.
 9. Classify Antiplatelet drugs. List the indications and contraindications.
 10. Describe the management of Acute Severe Asthma.
 11. Describe the management of Anaphylactic shock.

SHORT ANSWER QUESTIONS 5 X 3 = 15

12. Write a note on clinical features of Zinc deficiency.
13. Enumerate the drugs used in management of Post exposure prophylaxis in HIV.
14. Enumerate the causes of falls in elderly.
15. List three causes of Pansystolic murmur.
16. Mention 6 causes of dry cough.