



RASHIDA IQBAL FINANCIAL AID **ORGANIZATION**

OSPE AND VIVA - 2ND YR

For ospe patterns :

https://drive.google.com/drive/folders/1foW20ayiGaBx2n8G_T4e_perTVwhkKxV?usp=sharing

Past ospe and Viva questions :

https://docs.google.com/spreadsheets/d/1LvqadcW2_xRwopduTz6iZ4QaiFsU3Ly_2B89vL5YZR4/pub?output=pdf

https://docs.google.com/spreadsheets/d/1LvqadcW2_xRwopduTz6iZ4QaiFsU3Ly_2B89vL5YZR4/pubhtml

Videos for ospe :

<https://drive.google.com/drive/u/0/folders/0B8UdOWxCs6ByfmVvNWUxMXVHeUNGV01mNV9lYXc1dmdiQ1dmWkNSUG9XYkh2aW56TFM1ZWc>

some histo slides :

<https://drive.google.com/drive/u/0/folders/0B4EaU9GB4tlQTnF0ZEw5T1BnVGc>

<https://drive.google.com/open?id=1MtQ9JAxyl2WH8nkl6wUmOv5MiFl5xN-6>

histology slides + identification points :

<https://web.facebook.com/media/set/?set=oa.1773037562920972&type=3>

some solved uhs physio ospes :

<https://aeymon.blogspot.com/2015/05/2nd-year-mbbs-physiology-ospe-by-uhs.html?m=1>

https://aeymon.blogspot.com/2015/05/2nd-year-mbbs-physiology-ospe-by-uhs_30.html?m=1

Past ospe and viva questions asked by different examiners are given below for all of you to have an idea

Biochem ospe :

Names of salivary gland

Rate limiting step of cholesterol synthesis

Most abundant plasma protein in blood and its concentration

1. Ph of saliva gastric juice milk

2. Brown fat and functions.

3. Functions of tyrosine and tryptophan

4. Glycemic index of starchy food.

5. Features of DM.

6. Reaction catalyzed by Glutamate dehydrogenase and its co enzyme

7. Bile constituents.

8. Reg enzymes of Glycogen metabolism

Observed Spectrophotometer and test for phosphorus.

Protein concentration in csf. When are they raised. Causes of increased cholesterol. Ph of blood. How to measure ph.

Why even chain fatty acids cannot synthesise glucose.

Normal blood urea. Causes of incr blood urea. Which pathway produces NADPH. How many per glucose molecule.

Name 2 chemical carcinogens.

Normal level of Ca. Nd causes of hypocalcemia.

Diff between conjugated and un conjugated billirubin.

Hyperurecemia and allopurinol function

GTT used for?

How ammonia is transported to liver.

3 non protein nitrogen containing excretory products.

Enumerate lipoproteins. Which one is beneficial.

1. How thermogenin can produce heat?
2. Indications for GTT
3. enzymes responsible for phenylketonuria and maple syrup urine disease
4. Key enzyme of urea synthesis
5. proteins present in milk
6. Isozymes of creatinine kinase and conditions in which it increases
7. Conditions in which ketoacidosis occur
8. Factors regulating level of calcium
- Observed stations
9. Detection of phosphorus in given sample
10. Spectrophotometer

Cholesterol, urea, fasting blood glucose Normal values. Ph of blood and urine, Two indications of creatinine clearance. What is ph meter. What is Aids. Two diagnostic processes of AIDS. One example of hyperuricemia plus two causes. Post renal causes of high urea in blood. Post hepatic causes of high bilirubin. OBSERVED: POTTENKOFFERS TEST. Pipette 20 microlitre from solution

Biochem viva questions examples :

External

Metabolism of purines and pyrimidines

Glycolysis

Gluconeogenesis

Transcription

Translation

Scid

Hyperammonemia

Replication

Pcr

Internal

Function of aspartic acid

Glutamic acid

Diabetes insipidus

Acromegaly

Cretinism

Cancer

Function of na k

Which deficiency is severe otc or arginase...ans is otc

internal: cloning, digestion of CHO, lung buffer

mechanism external: transcription,

transamination, transmethylation, catecholamines

function, creatinine (no. Of amino acids) , xeroderma

piInternal: what is anabolism

Fate of glucose

Glucose transporters

What is codon

Mutations

Composition of saliva

External:

What is triacylglycerol

Beta oxidation

Beta oxidation mn energy milti h?? Kitni??

What is codon

What is stop codongmentosa

Internal:wobble hypothesis,classification of amino acids,functions of different amino acids,okazaki fragments,cancer, fatty acid synthesis and beta oxidation

External:

what is trancription,translation,pcr,gliconeogenesis,hmp shunt, southern blotting

Internal - Redox potential, catabolism, pathway, sources of blood glucose, Lesh Nyhan syndrome, Cori cycle

External - Flow of information from DNA to protein, replication, DNA polymerases, antibiotics acting to stop transcription and translation, urea cycle, ammonia toxicity



AIDS. One example of hyperuricemia plus two causes. Post renal causes of high urea in blood. Post hepatic causes of high bilirubin. OBSERVED: POTTENKOFFERS TEST. Pipette 20 microlitre from solution

9:52 AM

Biochem OSPE:

Observed:

Measure absorbance on spectrophotometer.

Benedicts test.

Non observed:

4 ways in which aids does not communicate.

How to take blood from a patient with HIV

Main enzyme for cholesterol synthesis. Plus action of statins.

Serum calcium plus hypocalcemia.

Serum urea level plus post renal causes of increased urea.

Achlorydia and xerostomia.

Person vomits lalalal had lactose intolerance. What juice you would test.

9:52 AM



Physiology viva

Identify Nephron - Functions of Large Intestine -
Functions of Internal Ear - Otitis Media

-Functions of Adrenal Medulla -Pheochromocytoma -
Functions of Placenta -Hormones Secreted By Placenta &
Functions of Progesterone -Basic Unit of Cerebellum

-Acromegaly -Acromegaly ka opposite -Explain the
diagram from sketch copy -Name a neurotransmitter which
always acts as excitatory neurotransmitter -Name a
neurotransmitter which always acts as Inhibitory
neurotransmitter

- Memory, Consolidation - Myopia; how we can still see
near objects ? - What are small intestinal movements
called? - Referred Pain - Motion Sickness

-Functions of Basal Ganglia -Place Principle -Volley
Principle -Referred Pain & Pain of Appendicitis -Vomiting
Reflex

-Receptor -Types of receptor -Receptor potential -
Receptors that detect sense of vibration -
Amorphosynthesis

Receptor potential. What type. - What is Synapse. Types
Neurotransmitter examples - Stomach emptying factors. -
Presynaptic inhibition and where it occurs?

Draw nephron. Cells in Dct. - Pancreatic secretion. -
Reverberatory circuits? - Effect of removal of intestine on
blood. - Draw graph of lateral inhibition. - Trigeminal
neuralgia - Why does a star disappear at night after you
keep looking at it for some time?

- nephrotic syndrome - parkinsonism - Reciprocal reflex - types of tremors - functions of duodenum - clearance - receptor potential - renal function test - swallowing - Define dermatome. - functions of kidney - presbyopia - calcium k level - Golgi tendon - Place principle

growth hormone, vasa recta, progesterone, effect on uterine contractions, osmolality of body compartments, water clearance from body, edema, types, pitting edema cause and diseases.

UMNL, draw spinal cord, nephron, salivary secretions, composition, , glands, function, deglutination, stages, factors, aphasia, types.

-functions of adrenal medulla, -myopia, presbyopia, medial lemniscus, lateral lemniscus, -ascending tracts, -brain analgesia system, -graves disease, -gastric emptying, -movements of small intestine

GASTROINTESTINAL TRACT : Movements in large/small int. + hormones

CENTRAL NERVOUS SYSTEM : Receptors for 2PD stereognosis, synapses, types of synapses, location etc., draw section of spinal cord, projection law, functions of spinal cord, subcortical control, define conditioned reflex emm define taste flavour, draw a neuron explain, Dale's law, Bell megendie law mainly definitions

ENDOCRINOLOGY : Addisonian crisis, Addison's disease, Conn's syndrome, Cushing disease and all other diseases, action of PTH, aldosterone, ADH, cAMP pathway, hormones acting via cAMP

REPRODUCTION : libido, stages of labor, pregnancy, male act, why women are shorter than men, why men are bald

RENAL : GFR, transport maximum, draw a nephron, name its parts, countercurrent multiplier mechanism, clearance, renal plasma flow, amount of water in body, how it is produced, why water is less in females (due to fats... which can be mobilized at the time of hypoglycemia), how would you determine dehydration in a person (by pinching not exactly pinching but kind of raising the skin.. if it returns back to normal then it is a well hydrated person, if skin is dry and get wrinkled it is dehydration), renal function tests, aquaporins

what is synapse, types of synapses, how facilitation of synapse occurs. -What is dermatome. significance of dermatome. -presbyopia and its correction. -movements of large intestine. -name sensory pathways. Anterolateral system.

Draw nephron. explain its parts. -explain EEG. brain waves. REM sleep. - Addisonian crisis. -function of Prolactin. Oxytocin. -Composition of urine.

Cerebrospinal fluid, urine composition, kernicterus, other name for jaundice, function of glomerulus, functions of thyroid hormone, you have eaten a paratha, an egg and a cup of tea for breakfast how will the GIT process these things, diff in the urine in summer and winter, normal bilirubin level, glucosuria

Draw the spinal cord and label it, which hormone inhibits ovulation, define spinal cord, where is the withdrawal reflex integrated, ascending and descending tracts of the

spinal cord, why does the cornea have the max refractive power, refractory index of diff parts of the eye.

Renal plasma flow rate value, osmolar clearance, edema, how do we measure renal plasma flow rate?

what is difference between a spermatocyte and spermatid)
he asked about functions of stomach, gastric mucosa barrier, peptic ulcer....he asked questions from almost everyone about any random figure in sketch copy....
cushing disease, addisons disease, addisonian crisis.... diff between actions of ADH and aldosterone.... function of gastrin and secretin...diabetes mellitus types...

types of memory, EPSP, how post synaptic facilitation occurs in Intermediate long term memory....name ascending tracts in spinal cord....presbyopia, its correction ,myopia n its correction...he also asked about referred pain and its 4 theories.....

PHYSIOLOGY OSPE

- Ishihara chart? How would a red blind read 42? - Angle subtended by each letter in Snellen's chart. Chart used for near vision? - Three tests with tuning fork. What is presbycusis (or something like that) - Location of Primary Auditory Cortex . - Decerebrate rigidity occurs at what level? - Tell the result from the pregnancy strip. Secretory changes in the endometrium are caused by which hormone? - PERIMETRY . 2 advantages of binocular vision - SCHWABACH'S TEST - Name 2

pathological reflexes. Effect of hyperthyroidism on deep reflexes

****(UNOBSERVED STATIONS)**** - Why infants have positive babinski sign? - One scenario was there in which age of a person is 55 and he can't read newspaper . Reason? - Why beta HCG is used in pregnancy test? - Tremors in cerebellar lesion? Parkinsonism? - Ishihara chart , function? - Root value of knee jerk? - How to correct Perceptive deafness ? What to do if snellens chart can't be read at 60? - Argyll Robertson pupil? - Which division of autonomic nervous system involved in accommodation?

****(OBSERVED STATIONS)****

1) testing trigeminal nerve. 2) testing smell of patient.

****(UNOBSERVED STATIONS)**** - Label axon reflex, - olfactory system diagram , - Identify urinometer, clinical hammer , pregnancy strip - what kidney function is determined by urinometer - what do 2 red lines on strip show? - define visual acuity... - physiological scotoma - Thermometer and sites in body from where body temperature can b recorded - Tuning fork and its uses - vibration sense receptors.

****(OBSERVED STATIONS)**** - Examine 3rd cranial nerve - Determination of field of vision (Perimetry)

****(UNOBSERVED STATIONS)****

-Pen light or torch used for pupillary reflex and centre for this reflex, --Tuning fork and the experiments in which its used -Myopia and its correction -Bitter taste and its

physiological basis -taste centre in brain, papilloedma and when its produced -drunken and spastic gait which diseases produce either of them -Pregnancy test produces result after how many days -hormone responsible for descent of testes -ishishara chart and how a red green blind person would Perceive "74" , and something about women being carriers of colour blindness.

****(OBSERVED STATIONS)****

-Test the corneal reflex (sir kamil) -Elicit the plantar reflex (sir moosa)

UNOBSERVED STATIONS : -use of ishirara chart, photoreceptors detect hote hein in se -vitamin kon sa use hota he for vision -bitter taste ke papillae kon se hein - ADH se urine specific gravity ko kia ho ga increase hote he mein ne bhe increase likha aur pocha tha dehydration mein urine specific gravity ko kia ho ga - which nerve fibers r stimulated by massage, what is the relay station for pain -which muscle moves eyeball laterally its nerve supply, nerve supply of superior oblique -concensual light reflex, which receptors detect pressure, how to elicit gag reflex, it checks which nerve integrity, -name the reflex in which facial nerve is efferent, -types of ophthalmoscope and its use, nerve responsible for moving upper eyelid:)

OBSERVED STATIONS : 1) check light reflex 2) check sensory system in lower limb.

physio ospe questions:

1)acromegaly and cause;

2)clinical hammer knee jerk is which type of reflex

3) jaeger chart and use 4)

friends chart its use and how will a green blind person read

it

5)urinometer identification specific gravity in case of dehydration

6.a) wht r uses of given instruments(common pin compass asthesiometer cotton balls and pen) b)at which pts. two pt. discrimination is max

7)dermatones of abdominal reflex..in which case ankle clonus is seen

8.a)which nerve carries taste sensation from ant. 2/3rd of tongue,b) aguesia

9) identify tuning fork and basis of rinnes test 10)a)type of gait in parkinsonism and cerebellum disease b) type of tremor in parkinsonism and cerebellar disease

Observed:

1) finger nose test 2)pregnancy test 3) muscle power test of upper limb

PS:2 minutes for each station and rest station after every unobserved station

Physiology Ospe: Observed: Weber test. Test Sensory part of facial nerve. Ankle clonus.

Non observed: Friend chart and use. Two reflexes in which torch is used. Their centres.

Two neurotransmitters of pain sensation.Ischiaras Test.

Where Color blinds can not be employed. What are afferent neurons of warmth and cold sensations.

What is receptor for jerk reflexes. Part of clincal

hammer.Efferent neurons to intrafusul fibres.Dermatome

of knee jerk. Rflex in which facial nerve is efferent. Which nerve damage causes hyperacusis? **Red blind reads

friends chart FIN.

Anatomy ospe :

Langman Diagrams. Do ask teachers over there if you dont get anything. Dont hesitate.

Histo slides py grip rakho. They are tricky.

ANATOMY OSPE past questions

BONES : Axis, atlas, skull (basalis), foramens of skull, sacrum a d lumbar vertebra. We only had to identify one pin from the bones. They were present along with soft tissues.

There wasn't a seperate table for bones like it was in 1st year. **BRAIN** : cut sections of brain, one was the

longitudinal section showing the corpus callosum, 3rd ventricle, the second was at the level of internal capsule showing the lateral ventricle. Dura matter was there too.

ABDOMEN AND PELVIS : Liver, spleen and kidney: really basic stuff like renal cortex, hilum of spleen etc

Posterior abdominal wall and pelvis: mostly muscles,

lumbosacral trunk **EMBRYO** : There were 2 stations woth photocopied diagrams. Diagram 13.4 (pg 165), dia 17.21 A (pg 276). **X-RAY** : pelvis

RADIOLOGY : TMJ, spinous process, axis spine, palatine bone of maxilla, angle of mandible, ischial spine

ABDOMEN AND PELVIS : Diaphragmatic surface of liver, falciform lig, caudate process, gallbladder neck, porta hepatis Post surface of kidney, ureter, renal artery, renal cortex transversus Abdominis, rectum, bulb of penis, testes, root of mesentary BRAIN : Hypothalamus, tonsil of cerebellum, uncus, collateral sulcus, interthalamic adhesion, pons, medulla HEAD & NECK : Internal jugular vein, vagus nerve, Mylohyoid or maybe submandibular gland, Omohyoid sup belly, internal acoustic meatus, external acoustic meatus.

- Radiographs of Head and neck from Atlas - Embryo diagrams 13.35 and 17.31(C) from Langman - Brain Medulla, superior medulay velum, inferior colliculus, cerebellum - Skull - Hip bone (pubic eminence) - Axis(dens) etc - EJV, Ureter, hilum of kidney, diaphragm, pancrease, renal impresssion of spleen - Sphenoidal sinus, - piriform fossa ;_ : - iliacus etc

Anatomy viva

Mid brain colliculi with their afferents efferents...primary secondary visual areas functions lesions...hypoglossal nerve abducent nerve clinicals, gag reflex, basal ganglia vala stuff spotting and clinicals, holoprosencephaly, development of retina, sources of gonads, medial medullary syndrome, polio, tremors types, CSF pressure, craniopharyngiomas, hydrocephalus.

Embryo mein she had model of urogenital system... sources of gonads, epoothoron paraphooron, cloaca

hindgut etc, caudal pentalogy, penis, 3rd pharyngeal pouch
Rotations and herniation of midgut stomach and volvulus
gastroschisis etc

Lateral wall of nose wala model... Lacrimal apparatus..
How many lacrimal ducts are there.. Development of
sternum.. External ear on model.. Rotation of stomach..
Presentation of pyloric stenosis in infants

parts of brainstem, vpm nucleus main konse lemnisci relay
krte hain.. Names of muscles of anterior abdominal wall...
Names of ventral branches of aorta.. Spot first branch of
aorta on model.. Spot appendix on model... Appendix main
taenia hotay hain?.. Names of muscles which form pelvic
floor.. Contents of rectovesical pouch

Embryo puriii,,,,hr cheez ki development...hr student se
alag cheez pochti hain mam,,,skull, limbs, glands etc skull
ki attachments on different norma jo b sketch me draw hua
hua ae us se related questions! triangles of neck and
relations of submandibular,thyroid,parotid glands,eye ball
ki nerve supply. lateral wall of nose and external ear on
model.plus pterigopalatine fossa and its contents,
maxillary artery ki branches,development of bones,interior
of skull,lacrimal gland.

if u have done development of CNS,CVS and urogenital
system "WELL" than an excellent viva is guaranteed from
head n neck mostly questions were from ear,eye and
nose(lateral wall of nose bones).... -true and false
hermaphroditism external today asked about interior cranial
fossa(interior of skull) cervical plexus,prevertebral
muscles,atlas n axis attachments,stapedius attachment,parts

of incus malleus n stapes ,parts of sphenoid bone,nerve supply of lacrimal gland

relations of kidney, *hiatus of schwalbe (BD), *critical point of soudek (point at rectosigmoid junction where blood supply from sigmoidal artery ends and blood supply from sup rectal artery starts,it has to be preserved in surgery), *how epiploic foramen hernia is reduced?(first coil of intestine is decompressed and then reduced so it doesnot damage imp structures around epiploic foramen) sir arshad is asking functions of almost every part of cns like limbic system ,hypothalamus,reticular formation,basal nuclei,functions of nuclei,medial lateral and spinal lemnisci

EMBRYOLOGY Today external started taking viva around 8:15 today she was asking mostly about -the development of CNS from everyone -development of 4th ventricle, choroid plexus, limbic system, cerebellum, development of uterus, syndactyly and its types (osseous and cutaneous), development of reticular formation - Development of dens of axis. **HEAD AND NECK:** lymphatic drainage of head and neck, attachments of atlas, parts of ethmoid bone, spotting of wall of nose on model

ABDOMEN AND PELVIS: Sir was asking more from abdomen and pelvis inguinal canal, hydrocoele, difference between hydrocele and indirect inguinal hernia, columns of Morgagni, relation with hemmorhoids, clock positions of haemorrhoids, prostate line of growth **BRAIN:** fibres in trigeminal nerve, the table of cranial nerves in bd is must besides sir was asking about some critical point of zoduk

posterior 1/3 of Norma basalis. -contents of jugular foramen. -external ear parts on model. -development of ANS. -development of IVC. -formation of tonsils. -waldeyers ring. -pituitary gland development -boundaries of middle ear -extent of thyroid gland -anatomy of temporomandibular joint -development of cerebellum, skeletal muscles, what happens if radius is not formed - what happens in congenital hip dislocation and how can it occur during pregnancy -heart development. atria, ventricles, atrioventricular valves, semilunar valves... -age changes in mandible -development of heart viscerocranium, tongue, ANS, -Norma lateralis and its attachments -lingual nerve block -branches of ophthalmic artery -tongue tie -styloid apparatus

bony pelvis differences. -relations of duodenum. bile duct. -carcinoma of head of pancreas. -afferents efferents of red nucleus. -efferents of substantia nigra.. -parkinsonism. -white line of Hiltons. -anal canal blood supply lymphatics. -oesophagus arterial supply, venous drainage, -site of portosystemic anastomoses, -oesophageal varices, how to stop bleeding in oesophageal varices -parts of uterine tube, blood supply of uterine tube, -reticular formation's functions and how it performs these functions -uterosacral ligament attachments, -how liver is suspended in abdominal cavity -name somatic efferent nuclei, -olfactory pathway, -differences between male n female sacrum. -differences between male n female sacrum, -anterior relations of first part of duodenum, -how olive is produced, -lateral lemniscus, fasciculus gracilis, -blood supply of seminal vesicle prostatic plexus n its communications

Anterior abdominal wall nerve supply...subcostal vessels kaise enter krte abdomen mein...uterus blood supply..duodenum relations... fundus of gall bladder kis level pe hota..uterine muscle ki modification and importance for preventing blood flow something like tht:/ neuro mein cranial nerve nuclei..

Norma occipitalis ki attachments... adrenal gland development...testis development ...congenital adrenal hyperplasia..holoprosencephaly..middle ear boundaries..

Greater omentum attachments, colic comp, paracolic gutter, pouch of douglas, cranial nerve nuclei, anterolateral muscle of abdominal wall, superficial inguinal ring attachment, features of posterior abdominal wall, internal iliac artery, diff b/w ileum n jejunum, boundaries of middle cranial fossa n pterygopalatine fossa, mandible attachments, cervical vertebrae, norma verticalis, thyroidemia artery, orbit boundaries, parotid gland features, tongue lymphatic drainage, diff b/w male n female sacrum, ages changes in mandible, sigmoid mesocolon, reticular formation n its zones, development of lung, eye, face, kidney, thyroid gland, bladder, genital organs, subclavian artery, paraduodenal space, levator ani, prostate B.S, duodenum relations, ligaments of liver, stomach bed, conjoint tendon nerve suply, ludwigs angina, thalamus nuclei, lemnisci in medulla oblongata, contents of spermatic cord, mumps, extrophy of bladder n cloaca, treacher collin syndrome, pan shaped kidney, urinary bladder peritoneal relations, stomach lymphatic drainage, atlanto-occipital joint n its ligament!

a part of the abdomen model comprising of colon, duodenum, pancreas etc. Asked their blood supplies, lymphatic drainage (from mucosa level to jugulosubclavian venous junction), difference b/w duodenum and jejunum, most dangerous position of Appendix, lobes and functions of cerebellum, structures passing through foramen ovale. He's asking cranial nerve nuclei names and locations from almost everyone. Make sure you go through that.

Muscles of Ant Ab wall, Free borders of Ext Oblique, Posterior Relations of 3rd part of Duodenum, Boundaries of left Infracolic compartment, Contents of Deep Perineal Pouch, Brainstem Parts, Cranial Nuclei at the level of mid-brain, Function & Difference of Mesencephalic Nucleus from the remaining nuclei of Trigeminal Nerve. post. abdominal Wall ka model explain, duodenum k anterior relations, bile duct formation, opening and nerve supply, hepatic plexus, prostate lobes and their significance, lobes of cerebral cortex, limbic lobe contents and occipital lobe contains which area..

Boundaries of Infratemporal & Pterygopalatine Fossae, Posterior Triangle Spotting on model, Attachments on inner surface of Mandible, Development of Face. There is a table of Cranial Nerve Nuclei in BD along with their functions. Must do that. Also go through the motor & sensory nuclei of Thalamus etc. He asked these from a few ppl.

the complete embryological development of female reproductive system and a clinical from the Head and Neck chapter from Langman. Norma Occipitalis. Ligaments and

membranes of larynx. anterior triangle of neck, parotid gland relations, thyroidectomy and precautions while doing it, pierre robin syndrome, treacher collin syndrome, eye development, development of fore brain and one embryo model

Regards

Shahana Ghazal

President RIFAO

