

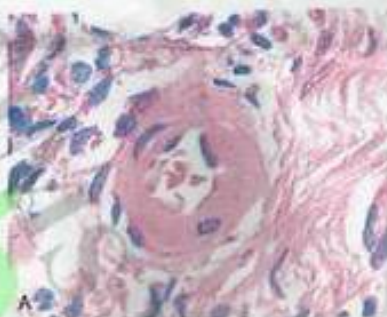
- Q.54 During physical examination a 45 year old man is noted to have a 3 cm palpable nodule in one lobe of an otherwise normal size thyroid gland. Needle aspiration of the nodule demonstrates polygonal tumor cells and amyloid, but only very scanty colloid and normal follicular cells. Which of the following is the most likely diagnosis?
- Follicular thyroid carcinoma.
 - Hashimoto's disease.
 - Medullary thyroid carcinoma.
 - Papillary thyroid carcinoma.
 - Thyroid adenoma.
- Q.55 Most common pathogen responsible for acute osteomyelitis in a two year old child is:
- Streptococcus pneumoniae.
 - Escherichia Coli.
 - Candida albicans.
 - Haemophilus influenzae.
 - Salmonella typhi.
- Q.56 Most common malignant tumor seen in bone is:
- Osteosarcoma.
 - Chondrosarcoma.
 - Secondaries(mets).
 - Lymphoma.
 - Enchondromas.
- Q.57 Histopathological features of Duchenne type muscular dystrophy include all of the following EXCEPT:
- degeneration of muscle fibers.
 - Infiltration of macrophages.
 - Fibrosis.
 - Granulation tissue.
 - Regeneration of unaffected muscle fibers.
- Q.58 Reiter's syndrome is not associated with:
- Arthritis.
 - Urethritis.
 - Positivity for HLA-DRE1.
 - History of some enteric infection.
 - Positivity for HLA-B27.
- Q.59 Main cause of peripheral neuropathies are:
- Excessive physical work.
 - Deficiency of Vitamin B.
 - Chondroplasia.
 - Hypertension.
 - Diabetes mellitus.
- Q.60 Which of the following is not a tumor of central nervous system?
- Astrocytoma.
 - Oligodendroglioma.
 - Meningioma.
 - Ependymoma.
 - Retinoblastoma.
- Q.61 Which of the following CNS tumor has the best prognosis?
- Anaplastic astrocytoma (WHO grade III).
 - Glioblastoma multiforme.
 - Piloicytic astrocytoma (WHO grade I).
 - Medulloblastoma.
 - Oligodendroglioma (WHO grade II).
- Q.62 A 60 year old male presents with acute retrosternal chest pain to emergency department. Lab investigations show total CK 360U/L (NV: upto 195U/L), CK MB 32 U/L (NV: upto 25U/L), SGOT 54U/L (NV: 5-40U/L), LDH 418U/L (NV: 230-460U/L). ECG was consistent with Acute Myocardial Infarction. What is the possible duration of his present attack?
- 30 minutes.
 - 2 hours.
 - 12 hours.
 - 36 hours.
 - 5 days.
- Q.63 A 15-year-old boy is brought to the emergency in coma. The doctor on duty notes that the patient's breath smells like acetone. This would be most consistent with which of the following?
- Alcohol intoxication.
 - Diabetic hyperosmolar coma.
 - Diabetic ketoacidosis.
 - Heroin over dosage.
 - Profound hypoglycemia.
- Q.64 A 10-year-old boy sustains 25% burns over his body. Next day his serum urea is 90mg/dl and serum Creatinine is 0.6 mg/dl. I/V fluids are given continuously and there is no drop in blood pressure or urinary output. Which of the following most likely accounts for the increased urea values:
- Decreased renal perfusion.
 - Distal urinary tract obstruction.
 - Increased synthesis of urea.
 - Renal glomerular disease.
 - Renal tubule interstitial disease.
- Q.65 A 2cm pigmented lesion is excised from the back of a 45 year old woman as it became more nodular and darker recently. Microscopic examination confirmed the diagnosis of malignant melanoma composed of epithelioid cells. The lesion extended 2 mm below the reticular dermis. Lymphocytes were present below the melanoma. Which of the following statements will be suitable for this patient?
- The immune response will prevent metastasis.
 - The prognosis is poor.
 - The primary site of this lesion is eye.
 - Nevi on outer parts of the body may become malignant.

- Q.42. What change in the sickle hemoglobin (HbS) upon deoxygenation results in sickling of the red blood cell?
 a) Oxidation
 b) Polymerization
 c) Reduction
 d) Dehydration
 e) Phosphorylation
- Q.43. Following a bout of acute viral hepatitis for which the agent was not identified a 30-year-old man develops lethargy, pallor with cutaneous petechiae, and ecchymosis. Peripheral smear shows pancytopenia and bone marrow trephine shows suppression of all three cell lines with fatty infiltration. What is the diagnosis?
 a) Leukemia
 b) Fanconi anemia
 c) Christmas disease
 d) Myelodysplastic syndrome
 e) Aplastic anemia
- Q.44. A 10-year-old African boy presents with a 10 cm mass involving right mandibular area. H and E staining shows a malignant lymphoid neoplasm composed of intermediate sized lymphocytes with a high mitotic rate. Numerous tingible body macrophages are present giving the tumor a 'starry sky pattern'. Eosinophil EBV DNA is positive in all tumor cells. Which malignant lymphoid neoplasm are these features characteristic of?
 a) Burkitt lymphoma
 b) MALT lymphoma
 c) Diffuse large B cell lymphoma
 d) Peripheral T-cell lymphoma
 e) Small lymphocytic lymphoma
- Q.45. The translocation 9; 22 characteristic of chronic myelogenous leukemia results in:
 a) Trisomy 22
 b) Formation of BCR-ABL fusion protein
 c) Hypermethylation of ABL gene
 d) Increased MYC expression
 e) Increased p53 expression
- Q.46. A 10-year-old boy develops pain and swelling of his left knee joint which he attributes to a fall on the cricket ground. His joint is swollen and tender. A synovial tap yields hemorrhagic fluid. Multiple bruises are present on elbow joints. PT is prolonged. PT, bleeding time and clotting time are within normal limits. What clotting factor assay would you like to have in this patient?
 a) Factor VIII
 b) Factor VIII and IX
 c) Factor X
 d) Prothrombin
 e) Fibrinogen
- Q.47. A 32-year old female presents with severe respiratory distress. She has a protracted history of dyspnea on mild exertion for the past many years. Chest radiograph shows right ventricular enlargement. There is no history of congenital heart disease, interstitial lung disease or obstructive pulmonary disease. Serological tests for autoimmune conditions are negative. A lung biopsy shows marked medial hypertrophy and intimal fibrosis of pulmonary arterioles. What is the most likely cause for this patient's symptoms?
 a) Right sided cardiac failure
 b) Emphysema
 c) Good pasture syndrome
 d) Primary pulmonary hypertension
 e) Secondary pulmonary hypertension
- Q.48. A 4-year-old child, resident of Islamabad has seasonal bouts of breathing difficulty with prolonged cough productive of copious mucinous secretions, each spring season. Peripheral smear shows eosinophilia during an episode and sputum exam reveal charcoal-laden crystals. What is the most potent mediator of bronchospasm in this patient?
 a) TNF- α
 b) Leukotrienes
 c) Interleukins
 d) Histamine
 e) Prostaglandins
- Q.49. What is the common pathogenetic mechanism for all atypical (viral and Mycoplasma) pneumonias?
 a) Production of cross-reacting antibodies to alveolar basement membrane
 b) Direct invasion of lung parenchyma by the causative organism
 c) Hypersensitivity reaction to viral/copiasma/viral antigens
 d) Attachment of organism to upper respiratory tract epithelium followed by necrosis and inflammation
 e) Exotoxin production
- Q.50. ACTH and ADH production is associated with which histological subtype of lung cancer?
 a) Squamous cell carcinoma
 b) Adenocarcinoma
 c) Small cell carcinoma
 d) Carcinoid tumor
 e) Large cell carcinoma
- Q.51. A 56-year-old male patient of lung cancer develops hoarseness of voice. This symptom is attributable to tumor invasion of:
 a) Larynx
 b) Recurrent laryngeal nerve
 c) Trachea
 d) Vagus nerve
 e) Sympathetic chain

	neg	Hamish Peter Hughes	Appendix 1
14-b	27-c	40-c	53-c?
15-b	28-e	41-c?	54-b
16-c?	29-e	42-a?	55-?
17-b	30-a?	43-e	56-d, c
18-e	31-a	44-b	57-b
19-e	32-b	45-d	58-c?
20-b	33-b	46-a	59-a, α
21-d	34-b	47-a	60-b
22-a	35-b	48-?	61-e
23-a	36-a	49-c	62-?
24-e?	37-a	50-e	63-b
25-e	38-c?	51-b?	64-?
26-a?	39-b	52-a	65-e

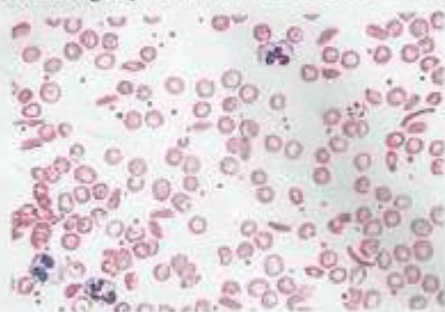
- Q.54** A 55 years old man comes to an Emergency Room with profuse sweating, palpitations, excruciating chest pain. His electrocardiogram shows Q wave and ST segment changes; his cardiac enzyme profile indicates that he has Myocardial Infarction (MI). He has a strong family history of MI. The major constitutional risk factors for IHD (Ischemic Heart Disease) is:
- a) Physical inactivity
 - b) Increasing Age
 - c) Stress
 - d) Postmenopausal oestrogen deficiency
 - e) Chlamydia pneumoniae infection

- Q.55** A 70 years old male with history of severe headache presents with loss of consciousness, CT scan shows evidence of intracerebral haemorrhagic leak, after few hours the patient could not survive. His autopsy was performed; following is the histology of his blood vessel. These findings are classic of a:



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- a) Hyperplastic arteriolosclerosis
 - b) Medial Calcific Necrosis
 - c) Hyaline arteriolosclerosis
 - d) Atherosclerosis
 - e) Thromboangitis obliterans
- Q.56** A 10 years old girl presents with high grade fever, sore throat and pharyngitis. Her throat swab is taken which turns out to be positive for group A Streptococci, minor manifestations sufficient to make the diagnosis are:
- a) Migratory polyarthrititis
 - b) Arthralgia & elevated blood levels of acute-phase reactants
 - c) Subcutaneous nodules
 - d) Erythema marginatum of the skin
 - e) Sydenham chorea
- Q.57** A 55 years old male presents with slowly progressing CHF, shortness of breath and poor exertional capacity, the patient has slipped precipitously from a compensated to a decompensated state. His left ventricular ejection fraction is <40%. What is the most likely diagnosis?
- a) Hypertrophic cardiomyopathy
 - b) Dilated cardiomyopathy
 - c) Restrictive cardiomyopathy
 - d) Myocarditis
 - e) Rheumatic Heart Disease
- Q.58** A patient with history of an episode of chest pain for which he was hospitalised. A fortnight ago, presents with atypical chest pain, not related to exertion and often worse on reclining, and a prominent friction rub. There is a significant fluid accumulation in his pericardium on X-ray chest. The cause of his condition may be due to:
- a) Ruptured MI
 - b) Blunt chest trauma
 - c) Malignancy
 - d) Aortic dissection
 - e) Mediastinal lymphatic obstruction
- Q.59** An 8 month old baby has hematocrit values of 18% to 30% (normal range, 35%-45%). Marked reticulocytosis and hyperbilirubinemia, punctuated by sudden pain crises. On examination there is hepatosplenomegaly. Photomicrograph of the blood smear is given. What is the diagnosis?



- a) Sickle Cell Anemia
- b) Hereditary Spherocytosis
- c) Thalassemia
- d) Glucose-6-Phosphate Dehydrogenase Deficiency
- e) Iron Deficiency Anemia

2.63 A man in his 20's begins to note persistent lower back pain and stiffness that diminishes with activity. In his 30's he also develops hip and shoulder arthritis, and in his 40's he is bothered by decreased lumbar spine mobility. These findings are most typical for:

- a) Rheumatoid arthritis
- b) Ankylosing spondylitis
- c) Osteoarthritis

- d) Lyme disease
- e) Calcium pyrophosphate dihydrate deposition disease

2.64 Which of the following is NOT associated with Duchenne's muscular dystrophy:

- a) An X-linked recessive pattern of inheritance
- b) Hypertrophied calves
- c) Striking early muscle fibrosis

- d) Lack of the muscle membrane protein dystrophin
- e) Marked increase in glycogen content of muscle fibers

2.65 Which of the following findings is NOT characteristic for human degenerative neurologic diseases?

- a) Progressive neurologic deficits over many years
- b) Loss of specific neuronal groups
- c) Lack of specific and/or curative therapies

- d) Specific patterns of inheritance
- e) Mass effect with acute symptoms

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- Q.43 A 20-year old female has had a bloody, brownish vaginal discharge for the past day. She now presents with shortness of breath. A chest radiograph demonstrates numerous 2- to 5- cm. nodules in both lungs. A red brown 3 cm mass is seen on the lateral wall of the vagina, and a biopsy of this mass reveals malignant cells resembling syncytiotrophoblasts. Serum level of which the following proteins, is likely to be elevated in this patient?
- Human chorionic gonadotrophin
 - Alpha-fetoprotein
 - Estrogen
 - Androgen
 - Thyroxin
- Q.44 The malignant surface epithelial tumors of ovary include:
- Mucinous cystadenoma
 - Stromal tumour
 - Sarcomatoid tumour of Ovary
 - Squamous cell carcinoma
 - Leiomyoma
- Q.45 A 52 year old female presented with a lump in her breast. Biopsy of the lump showed invasive ductal carcinoma. The connective tissue adjacent to the tumour was densely collagenous. This is an example of:
- Anaplasia
 - Dysplasia
 - Desmoplasia
 - Carcinoma
 - Metaplasia
- Q.46 A 20 years old female presents with lump in her right breast which is freely mobile and nontender. What is the most likely diagnosis?
- Invasive ductal carcinoma
 - Fibroadenoma
 - Intraductal papilloma
 - Fibrocystic disease
 - Abscess
- Q.47 Which of the following risk factors play the most important role in the development of male breast carcinoma?
- Long term insulin use
 - Age older than 70 years
 - Long term digoxin therapy
 - Promiscuous behaviour
 - Chronic alcoholism
- Q.48 A 55-year-old female is found to have 3cm mammographic density with irregular borders and calcification in her left breast. There is a 90% likelihood that this lesion is a:
- Benign lesion
 - Invasive carcinoma
 - In situ carcinoma
 - Sclerosing condition
 - Sarcoma
- Q.49 Of the histological subtypes of breast carcinoma, which metastasizes most frequently to peritoneum, retroperitoneal and leptomeninges?
- Invasive ductal carcinoma
 - Lobular carcinoma
 - Mucinous carcinoma
 - Medullary carcinoma
 - Metaplastic carcinoma
- Q.50 A 2-year old child has had failure to thrive. The child is short, with coarse facial features, a protruding tongue, and an umbilical hernia. Profound mental retardation is apparent as the child matures. These findings are best explained by a lack of:
- Cortisol
 - Norepinephrine
 - Somatostatin
 - Thyroxine (T4)
 - Insulin
- Q.51 A 0.7-cm microadenoma of the adenohypophysis is seen by head MRI in a 25-year- old female. Which of the following complications is she most likely to have?
- Amenorrhea with galactorrhea
 - Hyperthyroidism
 - Acromegaly
 - Cushing disease
 - Syndrome of inappropriate antidiuretic hormone (SIADH)
- Q.52 A 60-year-old woman has been feeling tired and sluggish for more than a year. Thyroid gland is not palpable. Serum T4 level is decreased but TSH is markedly increased. Which of the following factors is important in the pathogenesis of this condition?
- Irradiation to neck during childhood.
 - Prolonged iodine deficiency
 - Anti-microsomal and anti-thyroglobulin antibodies
 - Mutations in the RET protooncogene
 - Recent viral upper respiratory tract infection.
- Q.53 A 59 year old woman with advanced metastatic lung cancer develops profound fatigue, weakness and altering diarrhea and constipation. Physical examination demonstrates hyper pigmentation of skin even in areas protected from the sun. Tumor involvement of which endocrine organ is most strongly suggested by this patient's presentation?
- Adrenal gland.
 - Endocrine pancreas.
 - Ovaries.
 - Pituitary glands.
 - Thyroid gland.

- Q.8** A 45-year-old male alcoholic with a history of portal hypertension presents with vomiting of blood (hematemesis) and hypotension. He denies any history of vomiting non blood material or retching prior to vomiting blood. During workup he dies suddenly. Based on his history and physical findings, histologic sections from his esophagus would most likely reveal:
- a) Columnar epithelium in the distal esophagus
 - b) Decreased ganglion cells in the myenteric plexus
 - c) Dilated blood vessels in the submucosa
 - d) Mucosal outpouchings (diverticula) in the distal esophagus
 - e) Numerous intraepithelial neutrophils with scattered eosinophils
- Q.9** A 39-year-old male presents with bloody diarrhea. Multiple stool examinations fail to reveal any ova or parasites. A barium examination of the patient's colon reveals a characteristic "string sign." A colonoscopy reveals the rectum and sigmoid portions of the colon to be unremarkable. A biopsy from the terminal ileum reveals numerous acute and chronic inflammatory cells within the lamina propria. Worsening of the patient's symptoms results in emergency resection of the distal small intestines. Gross examination of this resected bowel reveals deep, long mucosal fissures extending deep into the muscle wall. Several transmural fistulas are also found. What is the best diagnosis for this patient?
- a) Ulcerative colitis
 - b) Lymphocytic colitis
 - c) Infectious colitis
 - d) Eosinophilic colitis
 - e) Crohn's disease
- Q.10** Familial polyposis coli is characterized by:
- a) Autosomal recessive pattern of inheritance
 - b) Multiple hamartomatous polyps throughout the colon
 - c) 100% risk of carcinoma
 - d) An association with fibromatosis and multiple osteomas
 - e) An association with tumors of the central nervous system
- Q.11** A 65 year old man presents to a physician because of a palpable mass immediately above the left clavicle. Biopsy of the mass demonstrates metastatic adenocarcinoma in a lymph node. Which of the following organs should be most strongly suspected as containing the primary tumor?
- a) Bladder
 - b) Large bowel
 - c) Liver
 - d) Stomach
 - e) Pancreas
- Q.12** Chronic Gastritis is associated with:
- a) Helicobacter pylori
 - b) Contaminated food
 - c) Drug poisoning
 - d) Trauma
 - e) Schistosoma infection
- Q.13** The signs and symptoms in which one of the listed individuals is most likely to be due to intussusception of the bowel?
- a) An 18-year-old male with fever, leukocytosis, and right lower quadrant abdominal pain
 - b) A 3-year-old child with the abrupt onset of colicky abdominal pain and bloody, "currant jelly" stools
 - c) A 55-year-old male with the acute onset of severe abdominal pain
 - d) A 67-year-old female with fever, leukocytosis, and left lower quadrant abdominal pain
 - e) A newborn infant with projectile vomiting and midepigastria mass
- Q.14** A 6 year old boy presents with abdominal pain and vomiting. The pain first started in the periumbilical region and then shifted to the right lower quadrant. His temperature is 102° F and pulse is 110. A laparotomy is performed and his appendix is removed. What will be observed if the appendix is examined by the histopathologist?
- a) Lymphocytic infiltrate
 - b) Necrosis
 - c) Neutrophilic infiltrate
 - d) Perforation of the appendix
 - e) Adhesions
- Q.15** A 62-year-old male with hepatic failure secondary to cirrhosis develops a pungent odor in his breath (fetor hepaticus). He is also noted to have marked ascites, gynecomastia, asterixis, and palmar erythema. His serum ammonia levels are found to be elevated. This patient's gynecomastia is the result of:
- a) Decreased synthesis of albumin
 - b) Defective metabolism of the urea cycle
 - c) Deranged bilirubin metabolism
 - d) Impaired estrogen metabolism
 - e) The formation of mercaptans in the gut
- Q.16** A mononuclear portal inflammatory infiltrate that disrupts the limiting plate and surrounds individual hepatocytes (piecemeal necrosis) is characteristic of:
- a) Ascending cholangitis
 - b) Chronic active hepatitis
 - c) Acute alcoholic hepatitis
 - d) Cholestatic jaundice
 - e) Nutritional cirrhosis

- Q.46 Rupture of a berry aneurysm of the circle of Willis would likely produce hemorrhage into the:
 a) Epidural space
 b) Cerebellum
 c) Subarachnoid space
 d) Subdural space
 e) Thalamus
- Q.47 A 5-year-old boy presents with projectile vomiting and progressive ataxia. Workup finds obstructive hydrocephalus due to an infiltrative tumor originating in the cerebellum. What is the most likely diagnosis for this cerebellar tumor?
 a) Ependymoma
 b) Glioblastoma multiforme
 c) Medulloblastoma
 d) Oligodendroglioma
 e) Schwannoma
- Q.48 After myocardial infarction the laboratory report shows an elevation of troponin T and Myoglobin. What is the approximate time interval since the attack?
 a) 1 hour
 b) 4 hours
 c) 1 day
 d) 18 hours
 e) 1 week
- Q.49 After post partial haemorrhage, the investigations on a patient's blood sample showed sodium 126mmol/l [136-145], potassium 5.6mmol/l [3.5-5.1], BUN 45mg/dl [6-20], creatinine 2.8mg/dl [0.4-1.1]. These findings indicate:
 a) Renal failure
 b) Acute pyelonephritis
 c) Alkalosis
 d) Nephrotic syndrome
 e) Acute proliferative glomerulonephritis
- Q.50 A 37 year old male was seen in the emergency room. Past history revealed that patient had developed diabetes mellitus at the age of 8 years. Admission laboratory data showed: serum glucose 950 mg/dl, Na: 115 mmol/L [135-145], K: 6.0 mmol/L [3.5-5.0], Cl: 79mmol/L [95-105], pH: 7.1, HCO₃: 10.0 mmol/L [24-32]. Laboratory results are suggestive of:
 a) Metabolic acidosis
 b) Respiratory acidosis
 c) Lactic acidosis
 d) Compensatory metabolic alkalosis
 e) Respiratory alkalosis
- Q.51 A 67-year-old male is found on rectal examination to have a single, hard, irregular nodule within his prostate. A biopsy of this lesion reveals the presence of small glands lined by a single layer of cells with enlarged, prominent nucleoli. From what portion of the prostate did this lesion most likely originate?
 a) Anterior zone
 b) Central zone
 c) Peripheral zone
 d) Periurethral glands
 e) Transition zone
- Q.52 Which of the following testicular tumors is most radiosensitive?
 a) Seminoma
 b) Embryonal carcinoma
 c) Choriocarcinoma
 d) Yolk sac tumor
 e) Immature teratoma
- Q.53 A biopsy of the uterine cervix was done following an abnormal Pap smear report. This histologic section shows koilocytosis, which results from infection with:
 a) Adenovirus
 b) Cytomegalovirus (CMV)
 c) Epstein-Barr virus (EBV)
 d) Herpes simplex virus (HSV)
 e) Human papillomavirus (HPV)
- Q.54 A 29-year-old female presents with severe pain during menstruation (dysmenorrhea). During workup, an endometrial biopsy is obtained. The pathology report from this specimen makes the diagnosis of chronic endometritis. Based on this pathology report, which one of the following was present in the biopsy sample of the endometrium?
 a) Neutrophils
 b) Lymphocytes
 c) Lymphoid follicles
 d) Plasma cells
 e) Decidualized stromal cells
- Q.55 A 25-year-old female presents to your office for workup of infertility. In giving a history she describes severe pain during menses, and she also tells you that in the past another doctor told her that she had "chocolate in her cysts." Based on this history, what abnormality would you most expect to be present in this patient?
 a) Metastatic ovarian cancer
 b) Endometriosis
 c) Acute pelvic inflammatory disease
 d) Adenomyosis
 e) A posteriorly located subserosal uterine leiomyoma
- Q.56 A 23-year-old female presents with pelvic pain and is found to have an ovarian mass of the left ovary that measures 3 cm in diameter. Grossly, the mass consists of multiple cystic spaces. Histologically, these cysts are lined by tall columnar epithelium, with some of the cells being ciliated. What is your diagnosis of this ovarian tumor, which histologically recapitulates the histology of the fallopian tubes?
 a) Serous tumor
 b) Mucinous tumor
 c) Endometrioid tumor
 d) Clear cell tumor
 e) Brenner tumor

- Q.21 A 30-year-old male patient presents with generalized muscle weakness and loss of libido. On examination he has broad sausage like fingers and toes and jaw is enlarged and protuberant with loose teeth. To confirm a diagnosis of acromegaly, which hormone will you measure following an oral dose of glucose?
- Insulin
 - Insulin-like growth factor
 - TSH
 - Growth hormone
 - ACTH
- Q.22 A 30-year-old female presents with moderately enlarged thyroid gland with thyrotoxic symptoms. Serum TSH levels are equivocal and free T4 is elevated. To rule out a secondary cause of hyperthyroidism serum TSH levels are measured following an injection of TRH. TSH shows a normal rise following the injection. What is the inference from this result?
- The patient has secondary hyperthyroidism due to a TSH-secreting pituitary adenoma
 - The patient has primary hyperthyroidism
 - The patient has thyrotoxicosis but not hyperthyroidism
 - Initial TSH measurements were falsely low
 - Further testing would be required to establish a cause for thyrotoxicosis
- Q.23 Infiltrative ophthalmopathy is characteristic of Grave's disease. The inflammatory infiltrate consists largely of:
- B lymphocytes
 - Histiocytes
 - Eosinophils
 - T lymphocytes
 - Neutrophils
- Q.24 While examining an H&E section from a thyroidectomy specimen a pathologist notices a capsulated lesion composed of closely packed well-differentiated uniform-appearing thyroid follicles. In order to classify this lesion as follicular carcinoma or adenoma what histological feature would he look for?
- Degree of cellular atypia
 - Architectural growth pattern
 - Presence or absence of colloid
 - Integrity of capsule/capsular invasion
 - Hurthle cell change
- Q.25 A patient having history of regular steroid intake is diagnosed with iatrogenic Cushing syndrome, what morphological change would you expect in the adrenal gland?
- No change
 - Diffuse hyperplasia
 - Nodular hyperplasia
 - Atrophy
 - Adrenal adenoma
- Q.26 Most primary bone tumors arise in the:
- Diaphysis
 - Diencephalon
 - Epiphysis
 - Sub-periosteum
 - Metaphysis
- Q.27 Widespread venous thrombosis is a notorious paraneoplastic effect of the common primary cancer arising in which organ?
- Lung ("oat cell carcinoma")
 - Colon
 - Liver
 - Prostate
 - Pancreas
- Q.28 A 30-year old female presents with morning stiffness with pain and swelling of metacarpophalangeal joints and proximal interphalangeal joints of her hands. Serum RA factor is positive. This condition results from an autoimmune reaction against:
- Articular cartilage
 - Periosteum of bone
 - Hyaline cartilage
 - Unknown arthritogenic antigen
 - Synovium
- Q.29 After a dog bite a pink-stained structure is seen in the central neuron, slightly above the nucleus. What is the diagnosis?
- Herpes simplex
 - Rabies
 - Metachromatic leukodystrophy
 - Progressive multifocal leukoencephalopathy
 - Tay-Sachs or other storage disease
- Q.30 On a patient who is hypertensive suffers from hemiplegia. What is the diagnosis?
- Contusion
 - Hemorrhagic infarct
 - Hypertensive-type intracerebral hemorrhage
 - Meningioma, angiomatous variant
 - Premature child with subependymal bleed
- Q.31 A 35-year old female patient with history of bilateral intracranial Schwannoma and Meningealoma now presents with a space-occupying lesion in the cauda equina/filum terminale region of the spinal cord. What is the most likely diagnosis?
- Medulloblastoma
 - Ependymoma
 - Glioblastoma
 - Oligodendroglioma
 - Primitive neuroectodermal tumor

- ii. Attempt *all* questions.
- iii. Question Paper to be returned along with MCQ Response Form.
- iv. Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

- Q.1** Which of these bacteria is most likely to set up acute bacterial endocarditis on a previously-normal valve?
- a) Clostridia
 - b) Staphylococcus
 - c) Streptococcus pyogenes
 - d) Streptococcus viridans
 - e) Pseudomonas
- Q.2** The rheumatic heart disease involves the valves of the heart. Which of the two valves listed below is least commonly associated with it?
- a) Aortic and pulmonary
 - b) Mitral and tricuspid
 - c) Aortic and mitral
 - d) Pulmonary and tricuspid
 - e) Aortic and tricuspid
- Q.3** What's the major risk factor for Buerger's thromboangitis obliterans?
- a) Alcohol abuse
 - b) Cocaine use
 - c) Old age
 - d) Sexual promiscuity / multiple partners
 - e) Smoking
- Q.4** The most frequent cause of cor pulmonale with right-sided heart failure is:
- a) Constrictive pericarditis
 - b) Disease of the lungs or pulmonary vessel
 - c) Left-sided heart failure
 - d) Pulmonary infundibular or valvular stenosis
 - e) Systemic Hypertension
- Q.5** Wavy fibers in the absence of other myocardial pathology suggest what to the autopsy pathologist?
- a) Amyloidosis
 - b) Cobalt cardiomyopathy
 - c) Hypertrophic cardiomyopathy
 - d) Long qt (abnormal waves)
 - e) Sudden coronary death
- Q.6** A 30 year old female has splenomegaly and anemia with spherocytosis. The circulating RBCs demonstrate an increased osmotic fragility on laboratory testing. An inherited abnormality in which of the following RBC components best explains these findings:
- a) Glucose-6-phosphate dehydrogenase.
 - b) A membrane cytoskeletal protein.
 - c) A-globin chain
 - d) Heme
 - e) B-globin chain
- Q.7** A 60 year old man with H/O joint pains and is on NSAIDs, is becoming increasingly tired and listless. He occasionally passes dark stools. A CBC indicates a hemoglobin concentration of 9.7g/dl, hematocrit of 29.9%, MCV of 69.7fL/red cell, RBC count of $3.8 \times 10^6/\mu\text{L}$, and WBC count of $5500/\mu\text{L}$. The most probable explanation of these findings is:
- a) Iron deficiency.
 - b) Autoimmune hemolytic anemia.
 - c) B-thalassemia major.
 - d) Chronic alcoholism.
 - e) Vitamin B12 deficiency.
- Q.8** A 9 year-old-boy has less than 1% factor VIII activity measured in plasma. If he is not given transfusions of factor VIII concentrate, which of the following manifestations of this deficiency is most likely to occur?
- a) Hemolysis.
 - b) Splenomegaly.
 - c) Conjunctival petechiae.
 - d) Hemochromatosis.
 - e) Hemarthroses.
- Q.9** A 20 year old female present with fever of two weeks duration. A CBC shows a Hb concentration 14g/dL, hematocrit of 42.0%, MCV of 89fL, differential count shows 60 segmented neutrophils, 16 band cells, 6 metamyelocytes, 1blast, 8 lymphocytes, 2 monocytes, and 2 eosinophils per 100 WBCs. The peripheral blood leukocyte alkaline phosphatase score is increased. The most likely diagnosis is:
- a) Chronic myeloid leukemia (CML).
 - b) Hairy cell leukemia.
 - c) Hodgkin disease, lymphocyte depletion type.
 - d) Leukemoid reaction.
 - e) Acute lymphoblastic leukemia (ALL).

A 60 year old woman has lost 5 kg weight during the last 6 months. She has cough and haemoptysis. She is non smoker however addict to marijuana. On x-ray there is 2x3cm globular mass in upper lobe of the left lung. There is also a small node in left supraclavicular region. The FNA of the node revealed a few clusters and sheets of metastatic malignant cells. Which one of the following is most probably cancer of the lung?

- a) Squamous cell carcinoma
- b) Adenocarcinoma
- c) Small cell carcinoma
- d) Carcinoid tumour
- e) Lymphoma

Q.45 A 55 year old woman came with lower abdominal pain. Ultrasound reveals bi-lateral ovarian mass. Investigation reveals raised level of tumour marker CA-125, which ovarian tumour will be the most likely possibility?

- a) Chorio Carcinoma
- b) Mucous Cystadenocarcinoma
- c) Embryonal Cell Carcinoma
- d) Endometrioid carcinoma
- e) Malignant Teratoma

Q.46 A 45 year old female with unilateral ovarian mass on histological diagnosis reveals nests of transitional epithelium, glandular spaces and plump fibroblasts, the most likely tumour is:

- a) Brenner's tumour
- b) Yolk sac tumour
- c) Gynandroblastoma
- d) Serous cystadenoma
- e) Androblastoma

Q.47 Risk factors for cervical cancer does not include:

- a) HPV type 6 & 11
- b) Early age at first inter course
- c) Multiple sexual partners
- d) Herpes Simplex virus
- e) HPV type 16-18

Q.48 Ultrasound examination of a post menopausal woman reveals a large unilateral ovarian mass. Investigations reveals marked increased in estrogen level, which one of the following tumour is most likely present.

- a) Yolk sac tumour
- b) Granulosa cell tumour
- c) Dysgerminoma
- d) Gonado blastoma
- e) Sertoli leydig cell tumour

Q.49 Splenomegaly is a feature of which of the following?

- a) Neutrophilia
- b) Hereditary spherocytosis
- c) Iron deficiency anaemia
- d) Acute episode of intravascular hemolysis.
- e) Blood loss anaemia.

Q.50 A three year old boy presented with pallor and failure to thrive. His younger brother died of similar complaints. Investigation of this patient revealed Hb= 3.4 G/dl; TLC, DLC and platelet count- all normal. The best diagnostic tool in this case would be which of the following?

- a) Haemoglobin estimation
- b) CBC
- c) TLC
- d) Peripheral blood examination.
- e) Hb. Electrophoresis

Q.51 Which one of the following tumor has the poorest prognosis:

- a) Osteogenic sarcoma
- b) Chondrosarcoma
- c) Ewing cell sarcoma
- d) Synovial cell sarcoma
- e) Lymphoma

Q.52 A 30 years old male was diagnosed as a case of Wegner's granulomatosis. Which of the following investigation has pathognomic importance to confirm:

- a) Anti-neutrophilic cytoplasmic antibodies
- b) Rheumatoid factor
- c) Double stranded DNA
- d) Anti streptolysin O titre
- e) Complement level

Q.53 A 46 year old male has hepatomegaly, bilateral foot oedema and congested neck veins. He is diagnosed as a case of cor-pulmonale. All of the following conditions predispose to this state except which one

- a) Pneumoconiosis
- b) Primary pulmonary hypertension
- c) Pickwickian syndrome
- d) Kyphoscoliosis
- e) Cushing syndrome

Q.54 A 30 year old male got fracture of his femur. After 10 days what is the most important function of the osteoclasts:

- a) Elaborate cytokines
- b) Resorb the bone
- c) Form collagens
- d) Synthesize osteoid
- e) Metaplasia

Q.55 The hereditary predisposition is a strong factor for cancer of the breast. The BRCA2 is autosomal dominant gene. This gene is located on which of the following chromosome:

- a) Chromosome 13
- b) Chromosome 21
- c) Chromosome 9
- d) Chromosome 18
- e) Chromosome 7

- Q-10** A 6-year-old girl presents with acute vomiting and nuchal rigidity. MRI reveals a tumour in the posterior fossa consisting of a large cyst with a nodular mass attached to its wall (cyst with mural nodule). Histological examination shows elongated astrocytes with long bipolar processes and numerous Rosenthal fibres. Which of the following is the most likely diagnosis?
- Astrocytoma, WHO grade II
 - Ependymoma
 - Glioblastoma multiforme
 - Medulloblastoma
 - ☒ Pilocytic astrocytoma
- Q-11** Biopsy of a solitary 1 cm diameter pigmented lesion from the upper back on your 35 year old female patient shows a malignant melanoma that is 2 mm in thickness. This finding most strongly suggests that:
- She will not have to worry further about this lesion
 - The lesion has occurred in a non-sun-exposed area
 - There is a genetic basis for the occurrence of this lesion
 - Human papillomavirus infection is present
 - There may be metastases within 5 years
- Q-12** Hepatocellular carcinoma is associated with infection with which of the following viruses?
- Herpes A virus
 - ☒ Hepatitis C virus
 - Herpes E virus
 - Rubella virus
 - Cytomegalovirus
- Q-13** A patient of liver cirrhosis develops ascites. What concentration of protein would you expect to find in aspirated ascetic fluid?
- < 3 g/dl
 - 3-10 g/dl
 - > 20 g/dl
 - > 50 g/dl
 - > 100 g/dl
- Q-14** A liver biopsy from a patient of chronic viral hepatitis shows ground glass hepatocytes. This appearance is due to:
- Aggregates of HBs antigen
 - Aggregates of HBs antigen
 - Aggregates of HBV DNA
 - Aggregates of anti HBs Ig
 - Glycogen
- Q-15** A 40-year-old previously healthy woman has bouts of sharp abdominal pain along with nausea for three weeks. On examination she has scleral icterus and tenderness in right upper quadrant. Microscopic examination of a liver biopsy shows only intracanalicular cholestasis in the centrilobular regions, along with swollen liver cells and portal tract oedema. There is no necrosis, fibrosis or stainable iron. Which of the following is the most likely diagnosis?
- Chronic passive congestion
 - Hepatitis B viral infection
 - Extrahepatic biliary atresia
 - Hepatic veno-occlusive disease
 - Choledocholithiasis
- Q-16** A 10-year-old school going student developed malaise, fatigue and loss of appetite after having "chat" from school canteen. On physical examination she has mild scleral icterus. Laboratory studies reveal serum ALT of 63 U/L and AST 56 U/L. Total bilirubin concentration is 2.3 mg/dl and direct bilirubin concentration is 2.3 mg/dl. She recovers in next three weeks. Which of the following serologic test result is most likely to be positive in this patient?
- Anti-HBs
 - Anti-HAV
 - Anti-HDV IgM
 - Anti-HAV IgM
 - Anti-HBc
- Q-17** An 8-year-old boy developed fever, malaise, oliguria with smoky urine two weeks after recovering from a sore throat. He has mild hypotension and periorbital edema. ASO titer is raised and serum C3 is low. What glomerular lesion would you expect to find in a renal biopsy from this patient?
- Crescents
 - Subepithelial glomeruli with immune complex deposition
 - Diffuse capillary wall thickening
 - Normal glomeruli
 - Hyalineization
- Q-18** A 12-year-old girl presented with generalized body edema, nephritic range proteinuria, which consisted largely of albumin, and hypoalbuminemia. At light microscopic level glomeruli are normal. Electron microscopy shows diffuse effacement of epithelial foot processes. The patient responds exceptionally well to steroid therapy. The findings are consistent with a diagnosis of:
- Crescentic glomerulonephritis
 - Focal segmental glomerulonephritis
 - ☒ Minimal change disease
 - Membranoproliferative glomerulonephritis
 - Mesangioproliferative glomerulonephritis
- Q-19** Hereditary renal clear cell carcinoma is associated with:
- BK virus mutation
 - VHL gene mutation
 - Mutated/overexpressed Mbr
 - Alteration of PRCC gene
 - ☒ Alteration of VHL gene

- Q.32 In renal cell carcinoma, which of the following gene is mutated?
 a) APC gene
 b) VHL
 c) ras gene
 d) WT1 gene
 e) IGF-2
- Q.33 Polycystic kidney disease observed in 10 months old male has which defect?
 a) X linked dominant
 b) Autosomal recessive
 c) Autosomal dominant
 d) X linked recessive
 e) Trisomy 21
- Q.34 Tram Track appearance of glomeruli is pathognomic microscopic feature of which type of the glomerular disease?
 a) IgA nephropathy.
 b) Membrano-proliferative GN.
 c) Membranous GN.
 d) Lipoid Nephrosis.
 e) Diabetic Nephropathy.
- Q.35 A patient who has chronic cystitis, on urine culture there was growth of *Proteus vulgaris*. Which type of the following stones are most likely to develop in the bladder of this patient?
 a) Calcium oxalate.
 b) Ammonium Magnesium phosphate.
 c) Uric acid.
 d) Cystine.
 e) Xanthine.
- Q.36 A 40-years-old male presented with haematuria and cystoscopic biopsy reveal features of squamous cell carcinoma. Which of the following factor is causative agent?
 a) Cigarette smoking.
 b) Diabetes mellitus.
 c) Working in leather industry.
 d) Infestation by schistosoma.
 e) Exposure to cadmium.
- Q.37 Flexner Winter Steiner rosettes is one of the characteristic histological features of:
 a) Retinoblastoma
 b) Gliomas
 c) Meningioma
 d) Medulloblastoma
 e) Neuroblastoma
- Q.38 A young patient presented with polyurea, polydipsia and visual disturbance. The diagnosis of brain tumour was made. Which of the following brain tumour may be responsible for this symptoms complex:
 a) Meningioma
 b) Astrocytoma
 c) Retinoblastoma
 d) Ependymoma
 e) Craniopharyngioma
- Q.39 A 58 year old woman presents with increased "lump" in her neck. Physical examination finds non tender diffuse enlargement of her thyroid gland. Clinically she is found to be euthyroid and her serum TSH level is within normal limits. Sections from her enlarged thyroid gland reveal numerous, mainly enlarged follicles, most of which are filled with abundant colloid material. There are areas of fibrosis, haemorrhage, and cystic degeneration. No papillary structures are identified and neither colloid scalloping nor Hurthle's cells are present. Which of the following is the most likely diagnosis?
 a) Colloid carcinoma
 b) Diffuse toxic goitre
 c) Graves' disease
 d) Multinodular goitre
 e) Hashimoto's thyroiditis
- Q.40 The best method of monitoring in type II diabetic patient is:
 a) Random plasma glucose level
 b) Hb A1c
 c) FBS (Fasting Blood Sugar)
 d) Glycated albumin
 e) Serum fructosamine
- Q.41 A 50 year old heavy smoker male C/O dyspnea for the last 10 years. On examination there is palpitation, elevated jugular venous pressure and cyanosis. The x-ray show widening of intra ribs spaces and flattening of diaphragm. Which of the following protein is associated with pathogenesis of condition?
 a) Collagenase
 b) Alpha 2 macroglobulin
 c) Elastase
 d) Alkaline phosphatase
 e) Hyaluronidase
- Q.42 Which of the following lung tumour can result in right ventricular hypertrophy?
 a) Carcinoid tumour
 b) Squamous cell carcinoma
 c) Small cell carcinoma
 d) Adenocarcinoma
 e) Lymphoma
- Q.43 The mast cells have an important role in asthma. All of the following are the mediators released by mast cell except which one of the following:
 a) Histamine
 b) Leucotrien C4
 c) Prostaglandin D2
 d) Platelet activating factor
 e) Desmoplasmin

- Q.10 A patient with diagnosis of nodular prostatic hyperplasia is unresponsive to medical therapy and is anxious about his risk of developing cancer. What is the most pertinent information you can give this patient?
- He has an 80% risk of developing prostate cancer in the next 5 years
 - He has a 50% risk of developing prostate cancer in the next 5 years
 - He has a 10% risk of developing prostate cancer in the next 5 years
 - He is not at risk for prostate cancer since nodular hyperplasia is not a premalignant condition
 - He has a 100% risk of developing prostate cancer in the next 5 years
- Q.11 A 45-year-old female having history of multiple sexual partners is diagnosed as Squamous cell carcinoma of cervix. Genetic material of which virus is most likely to be detected in the tumor?
- HPV 18
 - HPV 16
 - EBV
 - HSV type I
 - HSV type II
- Q.12 A 28-year-old female presents with dysmenorrhea, pelvic pain and irregular vaginal bleeding. Ultrasound examination reveals a partly cystic right adnexal mass. Cystectomy specimen is filled with thick chocolate colored fluid and histologic sections reveal a cyst wall lined showing marked hemorrhage, with endometrial glands and stroma along with hemosiderin-laden macrophages. What is the diagnosis?
- Mucinous cystadenoma
 - Endometriotic cyst
 - Serous cyst adenoma
 - Hemangioma
 - Endometrial carcinoma
- Q.13 Where do you find a "Nabothian cyst"?
- Endocervix
 - Alongside the oviduct
 - Nabothian vineyard
 - Testicular adnexal structures
 - Vaginal wall or vestibule
- Q.14 A 22-year-old female is diagnosed with a malignant germ cell tumor of the ovary that is metastatic to liver, lungs and bone at the time of diagnosis. What is this tumor most likely to be?
- Yolk sac tumor
 - Choriocarcinoma
 - Dysgerminoma
 - Embryonal carcinoma
 - Teratoma
- Q.15 A cystic mass removed from the right ovary of a 28-year-old female consists of a cyst wall lined by mature stratified Squamous epithelium with skin appendages. Mature gut and bronchial epithelium and cartilage are also present. What is the expected karyotype of this tumor?
- 46XX
 - 45Y
 - 47XXY
 - 46XY
 - 45X
- Q.16 What is the commonest causative organism for acute mastitis?
- Streptococcus aureus
 - E. coli
 - Pseudomonas
 - Staphylococcus aureus
 - Candida albicans
- Q.17 A 35-year-old female patient is diagnosed to have 'Invasive ductal carcinoma' of the right breast. Her grandmother and two maternal aunts have had breast cancer below 40 years of age. What genetic mutation is she likely to carry?
- BRCA 1 or BRCA 2
 - c-Myc
 - k-Ras
 - p53
 - INK4A
- Q.18 A 55-year-old female is found to have 3cm mammographic density with irregular borders and calcification in her left breast. There is a 90% likelihood that this lesion is a:
- Invasive carcinoma
 - Benign lesion
 - In situ carcinoma
 - Sclerosing condition
 - Sarcoma
- Q.19 The designations 'ductal' and 'lobular' with reference to carcinoma of the breast refer to:
- Cell of origin of the tumor
 - Tumor growth patterns
 - Tumor Grade
 - Degree of invasiveness
 - Anatomic site of origin of tumor
- Q.20 Examination of a mastectomy specimen in the pathology lab reveals an eczema-like eruption on the nipple with scale crust. Underlying this is an invasive ductal carcinoma. IHC sections from the nipple show presence of large atypical cells in the epidermis with loss of cohesion of the keratinocytes of the stratum. What is this condition called?
- Desmoplasia
 - Paget's disease
 - Infiltrating duct carcinoma
 - Paget's disease
 - Comedocarcinoma

20. An autoimmune demyelinating disorder characterized by episodes of neurologic deficits separated in time, attributable to white matter lesions is:
- a. Prion disease
 - b. Multiple sclerosis
 - c. Parkinson's disease
 - d. Encephalomyelitis
 - e. Temporal dementia
21. A 65 years old man presents with diminished clinical expressions, stooped posture, and slowness of voluntary movements, festinating gait, rigidity and pill rolling type of tremors. On the basis of these clinical manifestations your most likely diagnosis will be?
- a. Alzheimer's disease
 - b. Parkinson disease
 - c. Pick disease
 - d. Huntington disease
 - e. Multiple sclerosis
22. A 40 years old lady presents with pelvic pain, menorrhagia, colicky dysmenorrhea and dyspareunia for several months, particularly during the menstrual periods. On examination she is afebrile and a pelvic scan reveals a symmetrically enlarged uterus with no appreciable nodularity or mass. The most likely diagnosis is?
- a. Leiomyoma
 - b. Adenomyosis
 - c. Chronic Endometritis
 - d. Salpingitis
 - e. Pelvic inflammatory disease
23. A 50-year-old female presents with massive abdominal distension. Laparotomy reveals extensive mucinous ascites and adhesions with a right ovarian tumour. Histopathologically peritoneal implants of mucin producing epithelium are seen. What is this condition known as?
- a. Bowen syndrome
 - b. Pseudomyxomatous peritonei
 - c. Krukenberg tumour
 - d. Gestational trophoblastic disease
 - e. Mullerian Mucinous Cystadenoma
24. Which of the following is not a congenital disorder of breast development?
- a. Milk like remnants
 - b. Macromastia
 - c. Congenital nipple inversion
 - d. Acute mastitis
 - e. None of the above
25. Periductal mastitis is strongly associated with
- a. Smoking
 - b. Lactation
 - c. Early menarche
 - d. Late menopause
 - e. Staphylococcal infections
26. Microalbuminuria in a diabetic patient is advised to diagnose
- a. Acute renal failure
 - b. Chronic renal failure
 - c. Protein energy malnutrition
 - d. Diabetic nephropathy
 - e. Liver involvement
27. Serum urea and creatinine increase only if the creatinine clearance falls?
- a. <50%
 - b. <20%
 - c. <30%
 - d. <40%
 - e. <60%
28. If a urine R/E report of a patient shows protein >3g/day. He may be suffering from?
- a. Dehydration
 - b. Liver cirrhosis
 - c. Nephrotic syndrome
 - d. Nephritic syndrome
 - e. Malignancy
29. A 28 years old lady sustained traumatic blow to her breast in an accident. She developed a bruise but it disappeared within a few weeks leaving a firm lump. What would be the most likely diagnosis?
- a. Fat necrosis
 - b. Acute mastitis
 - c. Periductal mastitis
 - d. Ductal carcinoma in situ
 - e. Atypical ductal hyperplasia
30. A 27 years old lady presents with a mobile 2 cm breast lump, a biopsy reveals cyst formation, adenosis, and compression of the ducts by the surrounding connective tissue proliferation and apocrine metaplasia. What is the most likely diagnosis?
- a. Ductal hyperplasia

- Q.21 End stage renal disease is defined by:
 a) GFR less than 5%
 b) Serum creatinine more than 1.5 mg/dl
 c) Serum urea more than 50 mg/dl
 d) Both a & b
 e) Proteinuria more than 3.5 gm/dl
- Q.22 Which of the following hormone will cause cretinism in a two year old child:
 a) Cortisol
 b) Norepinephrine
 c) Somatostatin
 d) Insulin
 e) Thyroxine
- Q.23 A 65 year old male who presented with nocturia, weight loss, bone pain and dysuria with raised serum ALKP and serum calcium level with normal blood urea and serum creatinine. Most likely diagnosis based upon the above findings is:
 a) Benign Prostate Hyperplasia
 b) Chronic renal failure
 c) Uncontrolled hypertension
 d) Diabetes insipidus
 e) Prostatic Carcinoma
- Q.24 Which of the following component in teratoma is indicative of malignant potential?
 a) Bone
 b) Cartilage
 c) Thyroid tissue
 d) Adipose tissue
 e) Neural Tissue
- Q.25 An adult male presented with testicular enlargement for last one year. The ultrasound revealed a solid mass with enlarged para-aortic lymph nodes and lab investigation shows increased level of chorionic gonadotropin and alpha-fetoprotein. Which of the following testicular neoplasm is most likely?
 a) Leydig cell carcinoma
 b) Mixed germ cell tumour
 c) Pure spermatocytic seminoma
 d) Metastatic adenocarcinoma of prostate
 e) Choriocarcinoma
- Q.26 A 60 year old female developed cervical lymphadenopathy and yellow discoloration of sclera. She consulted a general practitioner who advised her antibiotic and dextrose infusion. There was no relief. Peripheral blood film shows microspherocytes, Normoblast and lymphocytosis. Possible cause is:
 a) Follicular lymphoma
 b) Chronic Lymphocytic Leukaemia
 c) Adult T-Cell Lymphoma/Leukemia
 d) Burkitt's lymphoma
 e) Diffuse large cell lymphoma
- Q.27 A 40 year old person presented with lymphadenopathy and bleeding from multiple sites. On examination there is hepatosplenomegaly and peripheral film shows 50 % blast cells which shows convoluted nuclei. Which one of the following stain will help in diagnosis of the disease:
 a) PAS stain
 b) Giemsa stain
 c) Non specific esterase
 d) Sudan black B
 e) Acid phosphatase
- Q.28 A 70 year old man complains of weakness and weight loss for the last 4 months. On examination there is hepatosplenomegaly with tender spleen. Peripheral film shows rouleaux formation. Bone marrow examination shows plasma cell 20 %. What further investigation will help in diagnosis?
 a) Trephine biopsy
 b) Neutrophils alkaline phosphatase
 c) CBC
 d) Serum Potassium level
 e) Serum protein electrophoresis
- Q.29 A 43 year old man with chronic history of heart burn, recently diagnosed as lower esophageal carcinoma related to Barrett's esophagus. What could be the underlying pathology:
 a) Metaplasia from squamous to stratified squamous epithelium
 b) Metaplasia from columnar to squamous epithelium
 c) Metaplasia from cuboidal to columnar epithelium
 d) Metaplasia from cuboidal to squamous epithelium
 e) Metaplasia from squamous to columnar epithelium
- Q.30 Over the past 4 months, a 50 year old man has had increasing difficulty in swallowing solids and liquids. He also has had regurgitation of undigested solids and liquids. Physical examination shows no abnormalities. A barium swallow shows dilatation of the distal esophagus with loss of peristalsis in distal two-thirds. Select the most likely diagnosis:
 a) Achalasia
 b) Esophageal cancer
 c) Diffuse esophageal spasm
 d) Esophageal candidiasis
 e) Esophageal reflux
- Q.31 A 65 years old woman noticed a lump on right side of her face that has become larger over the past years. On physical exam, a 3-4 firm mobile, painless mass is palpable in the region of right parotid gland. The oral mucosa appears normal. The patient complains of difficulty in chewing food. Which of the following condition is most likely to account for these findings?
 a) Pleomorphic adenoma
 b) Sialolithiasis
 c) Sjogren disease
 d) Mucoepidermoid carcinoma
 e) Malignant lymphoma

Q.6

A 60 years old chronic alcoholic presents with weight loss, anorexia, fatigue, and weakness, followed by pain, usually related to swallowing. Endoscopy reveals a small, gray-white, plaque like thickenings of mucosa suspected to be oesophageal carcinoma. What statement defines it best?

- a) Surgical resection is indicated in most cases
- b) Alcohol and smoking are implicated in its cause
- c) Dysphagia is the major symptom
- d) Adenocarcinoma is more common
- e) HPV is a major cause

Q.7

A 35 years old female presents with recurrent episodes of diarrhea, crampy abdominal pain, and fever lasting days to weeks. On surgery her intestinal wall is rubbery and thick with creeping fat. There is also evidence of fissuring and fistula formation. What best describes this condition?

- a) Granulomas are caseating
- b) Distal small bowel and colon are common sites
- c) Transmural infarction is common
- d) Erythema nodosum and arthropathy are common
- e) Pseudopolyps are more common

Q.8

Celiac disease:

- a) IgA endomysial antibody is diagnostic
- b) Histological finding include, villous atrophy, crypt hyperplasia and intraepithelial infiltration by lymphocytes
- c) Is more common in developed world
- d) Major symptom is constipation
- e) Gluten free diet does not help

Q.9

A 65 years old male presents with a diffuse, roughened, leathery, white, discrete areas of mucosal thickening at the base of the tongue. On microscopic evaluation marked epithelial thickening and hyperkeratosis without underlying epithelial dysplasia is noted, there is strong history of tobacco use. What is your diagnosis?



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- a) Leukoplakia
- b) Squamous cell carcinoma
- c) Lichen Planus

- d) Erythroplakia
- e) Granuloma pyogenicum

Q.10

Regarding Salivary Gland Tumors, which one is the most common?

- a) Papillary cystadenoma lymphomatosum (Warthin tumor)
- b) Pleomorphic adenoma
- c) Mucoepidermoid carcinoma
- d) Monomorphic Adenoma
- e) Squamous Cell Carcinoma

Q.11

A 30 years old female complains of epigastric discomfort for the last six months for which she has been having antacids but without improvement in her symptoms. Her gastric endoscopy was done and biopsy findings are shown below. What is your diagnosis?



- a) Malt Lymphoma
- b) Adenocarcinoma
- c) Helicobacter pylori gastritis

- d) Peptic Ulcer
- e) Acute erosive gastritis



MBBS THIRD PROFESSIONAL
Special Pathology
(Multiple Choice Questions)

Page -

Signature of Candidate

Roll No.

Total Marks: 65

Time Allowed: 1 hour and 5 minutes

MCQ Paper ID **P A G E 1 1 1 0 5 1 1 1**

Instructions:

- i. Read the instructions on the MCQ Response Form carefully.
- ii. Attempt all questions. Choose the **Single Best Answer** for each question.
- iii. Question Paper to be returned along with MCQ Response Form.
- iv. Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

- Q-1** A 50-year old male presents with proteinuria and hypertension. Renal biopsy shows hyaline obliteration of most glomeruli. The few remaining glomeruli show crescent formation. What is the diagnosis?
- a) Diabetic nephropathy
b) Chronic glomerulonephritis
c) Lupus nephritis
d) Minimal change disease
e) IgA nephropathy
- Q-2** Which is the commonest organism causing pyelonephritis?
- a) E. coli
b) Proteus
c) Pseudomonas
d) Enterobacter
e) S. fecalis
- Q-3** What is the commonest site of blood-borne metastases of renal clear cell carcinoma?
- a) Liver
b) Lung
c) Bone
d) Prostate
e) Spleen
- Q-4** In the urinary bladder 'carcinoma in situ' refers to:
- a) Papilloma
b) Flat non invasive carcinoma
c) Invasive papillary carcinoma
d) Flat invasive carcinoma
e) Squamous cell carcinoma
- Q-5** Of the major specific inflammatory testis, which invariably affects testis & epididymus?
- a) Gonorrhoea
b) Tuberculosis
c) Chlamydia
d) Mycobacterium tuberculosis
e) Syphilis
- Q-6** Two males each aged 28 years old are diagnosed with Cryptorchidism. One patient has abdominal undescended testis and the other has inguinal undescended testis, what is the risk of developing testicular cancer?
- a) The patient with abdominal testis has the higher risk
b) The patient with inguinal testis has the higher risk
c) Both have equal risk
d) Undescended testis is not related to the risk of testicular cancer
e) Undescended testis protects against testicular cancer
- Q-7** A 35-year-old male presents with a rapidly enlarging painless testicular mass. Serum HCG is markedly raised. A diagnosis of mixed germ cell tumor is made on Histopathology of the orchidectomy specimen. Which component of the mixed tumor is most responsible for the rise in HCG?
- a) Embryonal carcinoma
b) Yolk sac tumor
c) Teratoma
d) Seminoma
e) Choriocarcinoma
- Q-8** A 50-year-old male develops acute urinary retention and is catheterized. The prostate is found moderately enlarged on digital rectal examination. Later on serum PSA level is found slightly elevated (4ng/dL). How best will you interpret this result?
- a) May have resulted from catheterization and digital rectal examination.
b) Diagnostic for prostatic adenocarcinoma
c) Diagnostic for nodular hyperplasia
d) The value is falsely high due to analytical lab error
e) Normal level for this age



Answer 2012

**MBBS THIRD PROFESSIONAL
Special Pathology
(Multiple Choice Questions)**

Pages 07

M. F. Khan
Signature of Candidate

045148
Roll No.

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MCQ Paper ID B B F A 1 2 4 2 1 5 2 2

Instructions:

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- Q.1** The most helpful histological feature for diagnosing Atypical ductal hyperplasia breast is:
- ☐ a) Proliferation of cells filling the duct
 - ☒ c) Monomorphic cell population
 - ☐ b) Calcification
 - ☐ d) Streaming of nuclei along the trabeculae
 - ☐ e) Pleomorphic cell population
- Q.2** Amplified Her-2 neu gene can be detected by FISH technique. It is manifested by:
- ☐ a) Presence of single signal /cell
 - ☐ b) Presence of two signals /cell
 - ☐ c) Presence of > two signals
 - ☐ d) Absent signal
 - ☐ e) Presence of multiple signals/cell
- Q.3** Degree of malignancy in Phylloides tumour is determined by:
- ☐ a) Dysplastic ductal lining cells
 - ☐ b) Pleomorphic ductal lining cells
 - ☒ c) Stromal cellularity
 - ☐ d) Stromal Pleomorphism
 - ☐ e) Stromal heterogenous elements
- Q.4** A 40-year-old male presented with gradual onset of fatigue, loss of weight, GIT disturbances, and pigmentation of skin. His lab results were: Serum Potassium level=6.2 mmol/L, Serum sodium level=120 mmol/L. He developed an attack of acute respiratory tract infection whence he developed hypotension, coma and expired. Autopsy examination of adrenal gland revealed shrunken gland with absent cortical cells with lymphocytic infiltration. What was the underlying adrenal disorder?
- ☒ a) Primary autoimmune adrenalitis (Addison's disease)
 - ☐ b) Waterhouse-Friderichsen syndrome
 - ☐ c) Secondary adrenocortical insufficiency
 - ☐ d) Pituitary carcinoma
 - ☐ e) Pan-hypopituitarism
- Q.5** A 40 years old lady presents with Exophthalmus and H/O fine tremours in hands, tachycardia and menstrual disturbances. Her TSH level was low. The characteristic histological feature seen in thyroidectomy specimen of this patient was:
- ☐ a) Tall columnar follicular lining cells
 - ☐ b) Papillary infoldings intraluminal
 - ☐ c) Diffuse lymphocytic infiltration
 - ☐ d) Germinal center formation
 - ☐ e) Columnar lining with lymphocytic infiltration
- Q.6** Differentiation of follicular carcinoma thyroid from follicular adenoma depends on the following histological feature:
- ☐ a) Marked pleomorphism of cells
 - ☐ b) Hyperchromatic atypical nuclei
 - ☐ c) Capsular invasion within inter follicular septae
 - ☒ d) Capsular invasion
 - ☐ e) Microfollicular pattern of growth
- Q.7** Ophthalmopathy of Graves disease is due to:
- ☐ a) Pseudotumour
 - ☐ b) Acute inflammation
 - ☐ c) Chronic inflammation
 - ☒ d) Autoimmunity
 - ☐ e) Hyperplasia
- Q.8** On the basis of staining reaction the cells constituting adrenal pheochromocytoma are called:
- ☒ a) Chromaffin cells
 - ☐ b) Chromophobe cells
 - ☐ c) Acidophilic cells
 - ☐ d) Basophilic cells
 - ☐ e) Metachromatic cells
- Q.9** An adult patient presents with persistent headaches. A CT scan of the head demonstrates a 2-cm spherical mass at the junction of the white and gray matter of the lateral aspect of the cerebral hemisphere. Which of the following would most likely produce this lesion?
- ☒ a) Astrocytoma
 - ☐ b) Ependymoma
 - ☐ c) Glioblastoma multiforme
 - ☐ d) Meningioma
 - ☐ e) Metastatic carcinoma

- Q.51** What is the commonest fibrous proliferative lesion of the oral cavity?
 a) Fibroma
 b) Pyogenic granuloma
 c) Peripheral giant cell granuloma
 d) Ossifying fibroma
 e) Hemangioma
- Q.52** A 22-year-old male presents with severe aching pain in the left jaw. X-ray shows a unilocular cystic lesion with impacted third molar tooth (wisdom tooth). The excised lesion shows a cyst wall lined by stratified Squamous epithelium with intense chronic inflammation in the adjacent stroma. What is the diagnosis?
 a) Epidermal inclusion cyst
 b) Keratocyst
 c) Periapical cyst
 d) Ameloblastoma
 e) Dentigerous cyst
- Q.53** A 45-year old female is diagnosed with peptic ulcer disease. She is hypertensive and on beta-adrenergic blockers. She also has rheumatoid arthritis and is in the habit of taking non-steroidal anti-inflammatory drugs that she buys off the counter. She takes hormonal treatment to regulate her menstrual cycle. What factor in her history makes her most prone to developing peptic ulcer disease?
 a) Chronic use of NSAIDs
 b) Age and female gender
 c) Hypertension
 d) Use of antihypertensives
 e) Exogenous hormones
- Q.54** A 35-year-old male patient is diagnosed with H. pylori associated chronic gastritis with atrophy. What type of gastric cancer is this patient at the greatest risk of developing?
 a) Gastrointestinal stromal tumor
 b) Leiomyosarcoma
 c) Adenocarcinoma, papillary
 d) Adenocarcinoma, tubular
 e) MALT lymphoma
- Q.55** Appendiceal inflammation most commonly results from:
 a) Bacterial infection
 b) Obstruction
 c) Bile reflux
 d) Viral infections
 e) Malignant tumors
- Q.56** A patient of Barrett's oesophagus is referred to the surgery department. While reviewing his histopathology report what morphological feature will the surgeon look for to assess the patient's risk of developing an esophageal malignancy?
 a) Intestinal metaplasia
 b) Hemorrhage
 c) Ulceration
 d) Dysplasia
 e) Inflammation
- Q.57** Examination of a colonic specimen from an 18-year-old female shows carpeting of the mucosal surface with innumerable adenomatous polyps. There is no history of cancer at any other site. Mutation of which gene is most likely to be encountered in this patient?
 a) APC
 b) KRAS
 c) TP53
 d) p53
 e) Cyclin D1
- Q.58** Toxic megacolon is a complication of ulcerative diseases of the large bowel characterized by progressive swelling and gangrene of the colon. What is the pathogenetic basis for this complication?
 a) Secondary intestinal obstruction
 b) Transmural necrosis of the colon wall
 c) Vascular thrombosis
 d) Toxic damage to neural plexus
 e) Neuronal Dysplasia
- Q.59** A 10-year-old boy presents with an attack of acute Pancreatitis. His medical record shows that he has had similar attacks since childhood. This child has a hereditary condition characterized by a germ line mutation that prevents the inactivation of which pancreatic enzyme?
 a) Trypsin
 b) Lipase
 c) Phospholipase
 d) Alpha amylase
 e) Lysosomal hydrolase
- Q.60** A 40-year-old paramedic is found to be Hepatitis B surface antigen positive after a needle prick injury. Six months later he remains asymptomatic with normal liver function tests; HBs antigen remains positive while Hbe antigen and HBV DNA by PCR are both negative. How best would you describe the status of this patient?
 a) Asymptomatic carrier state
 b) Completely resolved infection
 c) Chronic active hepatitis
 d) Acute hepatitis
 e) Convalescence phase
- Q.61** In a study on outcome of hepatitis C infection, 100 patients with chronic hepatitis C were recruited in a cohort. If they were all alive 20 years hence, how many of them would develop cirrhosis?
 a) None
 b) 50%
 c) 20%
 d) 50%
 e) 100%

- Q-56 The ductal carcinoma of the breast is the commonest cancer of the female. This carcinoma originate from which of the following cell type:
- Prolactin expressing cell
 - Oestrogen expressing cell
 - Adipar cells
 - Myoepithelial cell
 - Adipocytes
- Q-57 A 45 years old farmer who is fair coloured developed a slowly growing papular lesion on the face for the last 25 years. Now it is ulcerated. On examination there is no palpable nodes in the neck. What type of tumour is it:
- Melanoma
 - Squamous cell carcinoma
 - Pilo-carcinoma
 - Neurofibroma
 - Basal cell carcinoma
- Q-58 A 7 years old girl gives H/O spontaneous fracture without any trauma. The joints are loose. She has decreased hearing. On x-ray the bone are markedly thin. What is the probable diagnosis?
- Osteoporosis
 - Osteopetrosis
 - Osteogenesis imperfecta
 - Osteomalacia
 - Chronic osteomyelitis
- Q-59 Which of the following tumour is most radio sensitive in a male patient:
- Seminoma
 - Teratoma testis
 - Yolk sac tumor
 - Embryonal carcinoma
 - Ependynoma
- Q-60 A 32 years old female developed carcinoma of the colon. Her father died at the age of 45 years due to intestinal obstruction and his elder brother also died after 3 month of leproctomy for a colonic tumour. Which one of the following gene is associated with risk for colonic carcinoma:
- P-53 gene
 - Polypsis colorectal gene
 - RB gene
 - K-ras gene
 - BRCA 1 gene
- Q-61 Three weeks after a meal at banquet dinner a twenty year male develops malaise, fatigue and loss of appetite. On physical examination he has mild icterus. Labs studies reveal raised AST&ALT with the serum bilirubin 3.9 mg/dl. The direct bilirubin is 2.8. His symptoms abate in about 3 weeks. Which of the serological test result is most likely to be positive in the patient?
- Anti-HBs antibody
 - IgM Anti HDV antibody
 - Anti-HCV antibody
 - Anti-HBc antibody
 - IgM Anti HAV antibody
- Q-62 A 55 years old man comes to emergency department because of marked hematemesis that has continued for past three hours. On physical examination his temperature was 35.9°C, pulse 112/min respiration 26/min and blood pressure 90/45mm Hg. He has distended abdomen with a fluid wave. The spleen is just palpable. Which of the following liver disease most likely to be present in the patient:
- Cholelithiasis
 - Cirrhosis
 - Massive hepatic necrosis
 - Fatty change
 - HAV infection
- Q-63 A 60 years old man had ascites for the past years after paracentesis with a removal of one liter of slightly cloudy, serosanguineous fluid. Physical examination shows firm, nodular liver. Labs findings are positive for HBs Ag and anti-HBc. He has a markedly elevated serum alpha-feto protein level. Which of the following hepatic lesion is most likely to be present:
- Marked steatosis
 - Hepatocellular carcinoma
 - Massive hepatocyte necrosis
 - Wilson disease
 - Autoimmune hepatitis
- Q-64 Brown pigment stones are caused by which of the following:
- Infection of biliary tract by E. coli
 - Hereditary red cell disorders
 - Extra vascular haemolysis
 - Carcinoma head of pancreas
 - Hypercholesterolemia
- Q-65 A 40 year old male presented with a testicular swelling and gynecomastia, which will be the most likely tumor to be the cause:
- Granulosa cell tumour
 - Teratoma
 - Leydig cell tumour
 - Poly embryoma
 - Choreocarcinoma

- Q.21 A 10 year old boy comes to emergency with H/O nausea, vomiting, right iliac fossa pain and mild fever. On physical examination there is tenderness in paraumbilical region and right iliac fossa. The provisional diagnosis is:
- Intestinal obstruction.
 - Acute appendicitis.
 - Acute pancreatitis.
 - Acute peptic ulcer disease.
 - Ischemia Bowel Disease.
- Q.22 Which salivary gland is the most frequent site for tumor involvement?
- Parotid gland.
 - Sub maxillary gland
 - Sublingual gland
 - Minor salivary gland
 - Parathyroid gland.
- Q.23 A 60-year-old man with H/O cigarette smoking and alcohol abuse develops a protruding centrally ulcerated mass in the oral cavity. The lesion is suspected to be carcinoma. Which of the following locations is most commonly the primary site of oral squamous cell carcinoma?
- Base of the tongue.
 - Buccal mucosa
 - Floor of mouth
 - Palate
 - Tip of the tongue
- Q.24 A 40 year old man has severe abdominal pain for 03 days. Physical examination reveals board like rigidity of abdominal muscles. His pancreas shows chalky white fat necrosis. What is the most likely predisposing factor in the development of this disorder?
- Cytomegalovirus (CMV) infection.
 - Hyperlipidemia.
 - Ischemia.
 - Peptic ulcer disease.
 - Chronic alcoholism.
- Q.25 Chronic Hepatitis is most likely to occur after acute infection with which of the following virus?
- Hepatitis A virus
 - Hepatitis C virus
 - Hepatitis E virus
 - Hepatitis G virus
 - Hepatitis D virus
- Q.26 Three weeks after a meal at road side restaurant a 20 years old male presents with loss of appetite, malaise, fatigue and mild yellowness of sclera. Which of the following laboratory test findings is he most likely to have?
- Hepatitis A IgM antibody
 - Hepatitis D IgM antibody
 - Hepatitis C antibody
 - Hepatitis B core antibody
 - Hepatitis B surface antigen
- Q.27 A 45 year female presents with ascites. Liver biopsy reveals diffuse portal tract bridging fibrosis and nodular regeneration of liver cells without hepatocyte necrosis and cholestasis. The findings are characteristic for:
- Alcoholic hepatitis
 - Viral hepatitis
 - Drug toxicity
 - Cirrhosis
 - Chronic congestion
- Q.28 At autopsy, the liver of a 40 years old male shows irregular nodular mass. On cut surface the lesion is grey white with extensive fibrotic bands, and alpha feto protein is markedly raised. What is the most likely diagnosis?
- Hepatocellular carcinoma
 - Hepatitis
 - Cirrhosis
 - Primary Sclerosing Cholangitis
 - Hemochromatosis
- Q.29 A 25 years old male notices mild degree of scleral yellowness after her examination. Her liver function profile shows total bilirubin 4.9 mg/dl and direct bilirubin 0.8 mg/dl. Her other liver function tests are unremarkable. The condition is most likely to be:
- Choledochal cyst
 - Primary biliary cirrhosis
 - Gilbert's syndrome
 - Dubin-Johnson syndrome
 - Hepatitis C
- Q.30 Which of the following is most likely cause of the clinical combination of generalized edema, hypoalbuminemia and hypercholesterolemia in an adult whose urinalysis demonstrated marked proteinuria with fatty casts and oval fat bodies?
- Nephritic syndrome
 - Nephrotic syndrome
 - Acute renal failure
 - Renal tubular acidosis
 - Urinary tract infection
- Q.31 After an acute myocardial infarction, a 50 years old male is in stable condition. However 2 days later, his urine output drops and his serum urea nitrogen increases to 33mg/dl. This oliguria persists for a few days and is followed by polyuria for 2 more days. He is then discharged from the hospital. What lesion best explains his renal abnormalities?
- Acute tubular necrosis
 - Benign nephrosclerosis.
 - Acute renal infarction.
 - Hemolytic uremic syndrome.
 - Rapidly progressive glomerulonephritis.

- Q.27 A 26-year-old presents with right upper quadrant abdominal pain and is found to have a large cyst in the right lobe of his liver. X-rays reveal the cyst to have a calcified wall. The cyst is then surgically excised. Examination of this tissue histologically reveals a thick, acellular, laminated eosinophilic wall. The fluid within the cyst is found to be granular and contains numerous small larval capsules with scoleces ("brood capsules"). Which one of the following is the correct diagnosis?
- Pyogenic liver abscess
 - Amoebic liver abscess
 - Hydatid cyst
 - Schistosomiasis
 - Oriental cholangiohepatitis
- Q.28 A 51-year-old male alcoholic with a history of chronic liver disease presents with increasing weight loss and ascites. Physical examination reveals a slightly enlarged, soft, nontender prostate. Examination of the scrotum is unremarkable, and fecal occult blood tests are negative. A chest x-ray is unremarkable, but a CT scan of the abdomen reveals a single mass in the left lobe of the liver. Workup reveals elevated levels of alpha-fetoprotein in this patient's blood. At this point the most likely diagnosis for the liver mass is
- Angiosarcoma
 - Cholangiocarcinoma
 - Hepatoblastoma
 - Hepatocellular carcinoma
 - Metastatic colon cancer
- Q.29 A 54-year-old male presents with a high fever, jaundice, and colicky abdominal pain in the right upper quadrant. The gallbladder cannot be palpated on physical examination. Workup reveals, unconjugated bilirubin level of 0.9 mg/dL (upto 0.8mg/dL), conjugated bilirubin level of 7.1mg/dL (upto 0.2 mg/dL), and alkaline phosphatase level of 300 IU/L (50-120). What is the correct diagnosis?
- Acute cholecystitis
 - Chronic cholecystitis
 - Bile duct obstruction by a stone
 - Carcinoma of the gallbladder
 - Carcinoma of the stomach
- Q.30 What is the most likely cause of the combination of generalized edema, hypoalbuminemia, hypercholesterolemia, marked proteinuria, and fatty casts and oval fat bodies in the urine?
- Nephritic syndrome
 - Nephrotic syndrome
 - Acute renal failure
 - Renal tubular defect
 - Urinary tract infection
- Q.31 A 35-year-old female recovering from hepatitis B develops hematuria, proteinuria, and red cell casts in the urine. Which of the following would best describe the changes within the kidney in this patient?
- Plasma cell interstitial nephritis
 - IgG linear fluorescence along the glomerular basement membrane
 - Granular deposits of antibodies in the glomerular basement membrane
 - Diffuse thickening of the glomerular basement membrane by subepithelial immune deposits
 - Nodular hyaline glomerulosclerosis
- Q.32 Treatment with steroids would most likely produce a beneficial response in a young child with:
- Acute cystitis
 - Acute pyelonephritis
 - Focal segmental glomerulosclerosis
 - Minimal change disease
 - X-linked agammaglobulinemia
- Q.33 Histologic sections of a kidney reveal patchy necrosis of epithelial cells of both the proximal and distal tubules with flattening of the epithelial cells, rupture of the basement membrane (tubulorrhexis), and marked interstitial edema. Acute inflammatory cells are not seen. What is the best diagnosis?
- Acute pyelonephritis
 - Acute tubular necrosis
 - Chronic glomerulonephritis
 - Chronic pyelonephritis
 - Diffuse cortical necrosis
- Q.34 A 49-year-old male who is a long-term smoker presents with frequency and hematuria. Histologic examination of sections taken from an exophytic lesion of the urinary bladder reveal groups of atypical cells with frequent mitoses forming finger-like projections that have thin, fibrovascular cores. These groups of atypical cells do not extend into the lamina propria and muscularis. No glands or keratin production are found. What is the most accurate diagnosis for this bladder tumor?
- Adenocarcinoma, non-invasive
 - Inverted papilloma
 - Transitional cell carcinoma in situ
 - Papillary transitional cell carcinoma (TCC), non-invasive
 - Squamous cell carcinoma in situ
- Q.35 The term hypospadias refers to an abnormal location of the:
- Testes due to failure of the normal descent of the intraabdominal testes
 - Urethral opening on the dorsal surface of the penis due to faulty positioning of the genital tubercle
 - Urethral opening on the inferior surface of the penis due to failure of fusion of the paramesonephric (Müllerian) ducts
 - Urethral opening on the superior surface of the penis due to failure of down growth of mesoderm over the anterior bladder
 - Urethral opening on the ventral surface of the penis due to failure of the urethral folds to close



MBBS THIRD PROFESSIONAL
Special Pathology
(Multiple Choice Questions)

Pages 07

Signature of Candidate

Roll No.

Total Marks: 65

Time Allowed: 1 hour and 5 minutes

MCQ Paper ID B B F B 1 2 1 4 3 5 7 3

Instructions:

- Read the instructions on the MCQ Response Form carefully.
- Attempt **all** questions. Choose the **Single Best Answer** for each question.
- Question Paper to be returned along with MCQ Response Form.
- Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

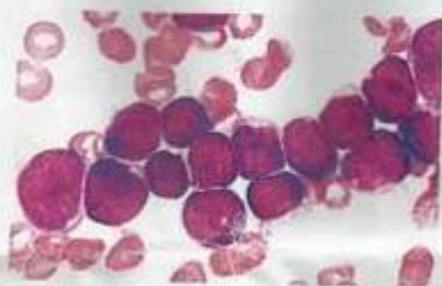
- Q.1** A 54 years old man died of left heart failure. On autopsy the most likely histological finding in the lungs will be:
- Areas of infarction
 - Proliferation of blood vessels.
 - Heart failure cells
 - Foamy macrophages
 - Cavitations
- Q.2** Hemoglobin electrophoresis of the blood from an individual with Cooley's anemia (β thalassemia major) would most likely show which one of the following combinations of findings?
- Hemoglobin Increased, Hemoglobin A2 Increased & Hemoglobin F Increased
 - Hemoglobin Increased, Hemoglobin A2 Increased & Hemoglobin F Decreased
 - Hemoglobin Increased, Hemoglobin A2 Decreased & Hemoglobin F Increased
 - Hemoglobin Decreased, Hemoglobin A2 Increased & Hemoglobin F Increased
 - Hemoglobin Decreased, Hemoglobin A2 Decreased & Hemoglobin F Decreased
- Q.3** Two days after receiving the antimalarial drug primaquine, a 27-year old black man develops sudden intravascular hemolysis resulting in a decreased hematocrit, hemoglobinemia, and hemoglobinuria. Examination of the peripheral blood reveals erythrocytes with a membrane defect forming "bite" cells; when crystal violet stain is applied, many Heinz bodies are seen. The most likely diagnosis is:
- Hereditary spherocytosis
 - Glucose-6-phosphate dehydrogenase deficiency
 - Paroxysmal nocturnal hemoglobinuria
 - Autoimmune hemolytic anemia
 - Microangiopathic hemolytic anemia
- Q.4** Antibodies made in the spleen that are directed against the cell surface antigens GpIIb/IIIa or GpIb/IX are characteristically seen in individuals with:
- Cold autoimmune hemolytic anemia
 - Felty's syndrome
 - Hashimoto's thyroiditis
 - Immune thrombocytopenic purpura
 - Warm autoimmune hemolytic anemia
- Q.5** A 28-year-old male presents with widespread ecchymoses and bleeding gums. Physical examination reveals enlargement of his spleen and liver. Laboratory examination of his peripheral blood reveals a normochromic, normocytic anemia, along with a decreased number of platelets and an increased number of white blood cells. Coagulation studies reveal prolonged prothrombin and partial thromboplastin times and increased fibrinogen degradation products. Examination of the patient's bone marrow reveals the presence of numerous granular-appearing blast cells with numerous Auer rods. These immature cells make up about 38% of the nucleated cells in the marrow. The correct diagnosis for this patient is:
- Acute erythroid leukemia
 - Acute lymphoblastic leukemia
 - Acute monocytic leukemia
 - Acute myelomonocytic leukemia
 - Acute promyelocytic leukemia
- Q.6** A 38-year-old male presents with increasing weakness and is found to have a markedly elevated peripheral leukocyte count. Laboratory testing on peripheral blood finds a decreased leukocyte alkaline phosphatase (LAP) score, while chromosomal studies on a bone marrow aspirate show the presence of a Philadelphia chromosome. This abnormality refers to a characteristic chromosomal translocation that involves the oncogene:
- bcl-2
 - c-abl
 - c-myc
 - erb-B
 - N-myc
- Q.7** The most common histologic type of carcinoma of the oral cavity is:
- Adenocarcinoma
 - Clear cell carcinoma
 - Large cell undifferentiated carcinoma
 - Small cell undifferentiated carcinoma
 - Squamous cell carcinoma

- Q.53 The right testis of a 33 years old male is enlarged to twice normal size. The testis is removed, and the epididymis and the upper aspect of the right testis are involved with extensive granulomatous inflammation with epithelioid cells, Langhans giant cells, and caseous necrosis. The most common cause for these findings is:
- Mumps
 - Syphilis
 - Tuberculosis
 - Gonorrhea
 - Sarcoidosis
- Q.54 During routine physical examination of a 70-year-old male, the prostate is found to be normal in size on palpation. He has a serum prostate specific antigen (PSA) that is 17 ng/mL, four times the upper limit of normal and twice the value measures only one year ago. A routine urinalysis reveals no abnormalities. He is healthy, with no history of major illnesses. Which of the following histologic findings seen on a biopsy of the prostate is most likely to account for these findings?
- Hyperplastic nodules of the stroma and glands lined by two layers of epithelium.
 - Poorly differentiated glands lined by a single layer of epithelium and packed back to back.
 - Foci of chronic inflammatory cells in the stroma and in normal appearing glands.
 - Areas of liquefactive necrosis filled with neutrophils.
 - Multiple caseating granulomas.
- Q.55 Men with Benign nodular hyperplasia of the prostate are not likely to have which of the following complications as a consequence of this condition?
- Chronic renal failure
 - Prostatic infarction
 - Urinary tract infection
 - Nocturia
 - Adenocarcinoma of prostate
- Q.56 Leiomyomas are Benign tumours that:
- Usually occur singly
 - Usually show increased mitosis
 - Require progesterone for growth
 - Usually grow rapidly during pregnancy
 - Give rise to most leiomyosarcomas of the uterus
- Q.57 Following variant of Endometrial carcinoma carries the worst prognosis:
- Clear cell carcinoma
 - Endometrioid carcinoma
 - Adenocarcinoma
 - Adenosquamous carcinoma
 - Well differentiated adenocarcinoma
- Q.58 You obtain a routine Pap smear while performing a physical examination on a 25-year-old female, gross inspection of the vulva, vagina and cervix reveals no apparent lesions. The results of the Pap smear are consistent with cervical intraepithelial neoplasia (CIN) II. What is the major significance of this finding?
- A cervicitis needs to be treated
 - She has an increased risk for cervical carcinoma
 - Cervical intraepithelial neoplasia are probably present
 - An endocervical polyp needs to be excised
 - She needs to discontinue oral contraceptives
- Q.59 Cytologic examination of fluid from a unilateral mass that was unilocular and filled with clear fluid from a 47-year-old female reveals clusters of malignant epithelial cells surrounding psammoma bodies. She probably has:
- Endometrial adenocarcinoma
 - Ovarian serous cystadenocarcinoma
 - Mesothelioma
 - Ovarian mature cystic teratoma
 - Adenocarcinoma of fallopian tube
- Q.60 Bilateral cystic ovarian masses in a 30-year-old female that are mostly filled with hair and sebaceous material are most typical for:
- Mature cystic teratomas
 - Endometriotic cysts
 - Chaparrinomas
 - Bilateral serous cystadenocarcinomas
 - Metastatic carcinoma
- Q.61 A 13-year-old boy with pain in his left leg is found to have a neoplasm of the femur that radiologically is diaphyseal in location and on biopsy is seen microscopically to be composed of numerous small round blue cells. The probable diagnosis is:
- Ewing's sarcoma
 - Medulloblastoma
 - Neuroblastoma
 - Chondroblastoma
 - Osteoblastoma
- Q.62 A 14 years old male with sickle cell anemia (Hgb SS) is most prone to develop osteomyelitis with:
- Staphylococcus aureus
 - Escherichia coli
 - Salmonella
 - E. coli
 - Candida

- a. Copper
b. Councilman bodies
c. Eosinophilic hyaline inclusions
d. Glycogen
e. Iron
62. A 54 year old alcoholic male presents with sudden onset of severe epigastric pain that radiates to his mid back. Further evaluation finds fever and steatorrhea. Laboratory test reveal elevated amylase and lipase. What is the diagnosis?
a. Acute appendicitis
b. Acute cholecystitis
c. Acute cholangitis
d. Acute diverticulitis
e. Acute pancreatitis
63. A 6 year old boy presents with abdominal mass which has grown rapidly over the last four months accompanied by weight loss. Ultrasound also confirms space occupying lesion in kidney. The diagnosis is?
a. Renal cell carcinoma
b. Transitional cell carcinoma
c. Squamous cell carcinoma
d. Wilms tumor
e. Hydronephrosis
64. Which of the following is the most likely cause of clinical combination of generalized edema, hypoalbuminemia, hypercholesterolemia and proteinuria?
a. Nephritic syndrome
b. Nephrotic syndrome
c. Acute renal failure
d. Renal tubular defects
e. Urinary tract infection
65. A 60 year old male presented with painless hematuria. IVP shows filling defect in the urinary bladder. What is the most likely diagnosis?
a. Stone in the urinary bladder
b. Schistosomiasis
c. Acute haemolysis
d. Stone in urethra
e. Bladder carcinoma
66. Select T cell lymphoma from the following
a. Follicular lymphoma
b. Mantle cell lymphoma
c. MALT lymphoma
d. Burkitt lymphoma
e. Mycosis fungoides
67. Which of the following lab investigations is abnormally prolonged in classic hemophilia
a. APTT
b. Bleeding time
c. PT
d. Thrombin time
e. All of the above
68. A new born female baby presented with continuous bleeding from the umbilical stump. What is the most likely cause for this bleeding?
a. DIC
b. Hemophilia A
c. Hemophilia B
d. Thrombocytopenia
e. Vitamin K deficiency
69. A patient had microcytic hypochromic anemia. On biochemical investigations, he was found to have low serum iron and high serum TIBC levels. The likely diagnosis is:
a. Iron deficiency
b. Chronic underlying disorder
c. Sideroblastic anemia
d. Beta-thalassemia
e. Lead poisoning
70. A 55-year-old male presents with weakness, weight loss, anorexia and left upper quadrant pain. Clinical examination reveals splenomegaly. Blood CP shows marked leucocytosis (120,000/ μ l). Differential count shows predominance of neutrophils with myelocytes and metamyelocytes. Bone marrow examination reveals 100% cellularity with maturing granulocytes comprising most of the cell population. What chromosomal translocation is characteristic of this chronic myeloproliferative disorder?
a. t(14;18)
b. t(9;22)
c. t(8;22)
d. t(1;X)
e. t(2;8)

- The lab investigation in a 30 year-old female, complaining of tachycardia, are: Hb=9gm/dl, Serum Ferritin low, Iron binding capacity increased, and Transferrin saturation reduced. Which of the following is probable diagnosis?
- Haemochromatosis
 - Malabsorption
 - Iron- deficiency anaemia
 - Folic acid deficiency anaemia
 - G-6PD deficiency
- Q.32** A multipara with abruption placenta develops sudden hypotension and excessive vaginal bleeding and goes into shock. Which of the following investigations will help to diagnose her underlying pathology?
- Haemoglobin value
 - Spiral CT of lungs
 - Fibrin degradation products (FDP)
 - Platelet count
 - D-Dimers + platelet count
- Q.33** Blood profile of a middle aged male was: TLC=100,000/cmm, smear showed neutrophils, metamyelocyte and myelocytes. Cytogenetic studies did not show Philadelphia chromosome. With a high suspicion of CML, what other investigation can confirm this diagnosis?
- Platelet count
 - Smear Myeloblast cell count
 - FISH test for BCR-ABL fusion gene
 - Serum electrophoresis
 - TRAP test
- Q.34** A young patient presents with cervical lymph node enlargement. Fine needle aspiration was carried out. The aspirate showed lymph node cells, necrotic material, inflammatory cells and vacuolated epithelioid granulomas. Which of the following is the probable diagnosis?
- Acute lymphadenitis
 - Sarcoidosis
 - Actinomycosis
 - Fungal infection
 - Tuberculous lymphadenitis
- Q.35** In a case of acute lobar pneumonia resolution is the natural outcome. Which of the following plays key role during this stage for resolution to be completed?
- Fibroblasts
 - Macrophages
 - Lymphocytes
 - Neutrophils
 - Mast cells
- Q.36** The most important mediators implicated in acute allergic bronchial asthma from treatment point of view are:
- Histamine
 - Prostaglandin-PgD₂
 - Leukotrienes
 - PAF
 - ILF
- Q.37** In a male homozygous for alpha-1 anti-trypsin deficiency, which of the following intervention can help prevent development of Emphysema?
- Alpha-1 anti-trypsin replacement
 - Pharmacologic
 - Smoking cessation and smoking
 - Avoid pulmonary infection
 - Leukopenia
- Q.38** The first histological evidence of bronchial mucosal damage due to cigarette smoke which can progress on to carcinoma is:
- Ciliated dysplasia
 - Squamous metaplasia
 - Carcinoma-in-situ
 - Loss of cilia
 - Loss of Goblet cells
- Q.39** In a 60 year old female an incidental discovery in chest x-ray was the presence of solid nodule in peripheral parenchyma. Transcutaneous needle aspirate showed malignant epithelial cells with evidence of mucin production. Which gene mutation is commonly encountered in this tumour?
- K-RAS mutation
 - Ab gene mutation
 - BCL-2 gene mutation
 - C-MYC gene mutation
 - EGFR gene mutation
- Q.40** Young male patient presents with painful enlargement of submandibular gland. The pain worsens while chewing the food. Excision of gland was done. What will be the predominant histological feature?
- Diffuse lymphocytic infiltration of stroma
 - Micro-abscess formation
 - Diffuse neutrophilic infiltration of stroma
 - Granuloma formation
 - Metaplasia of ductal lining epithelium
- Q.41** A slowly enlarging mass was reported in the Parotid region of a 65 years old female. She had now started complaining of severe pain in this area. Mass was excised and its histological examination revealed sheets of myoepithelial cells, glandular acini areas of cartilaginous differentiation and hyalinization and squamous differentiation. Which of the following entity is the possible diagnosis?
- Mucopapillary carcinoma
 - Squamous cell carcinoma
 - Pleomorphic adenoma
 - Adenocarcinoma
 - Basal cell adenoma

- Q.60** A 10 years old male presents with three months history of fatigue, fever, bleeding (petechiae, epistaxis and gum bleeding) bone pain and tenderness. There is generalized lymphadenopathy, splenomegaly, and hepatomegaly. His blood smear is shown. What is the diagnosis?



- a) Myeloid Leukemia
- b) Chronic Lymphocytic Leukemia
- c) Lymphoblastic leukaemia
- d) Hairy cell leukaemia
- e) Plasmacytoma

- Q.61** A 50 years old male presents with bone pain, anaemia and recurrent infections. His bone marrow aspirate shows variable population of plasma cells. Urine is positive for Bence-Jones proteins. What is the likely diagnosis?

- a) Multiple myeloma
- b) Follicular Lymphoma
- c) Large B cell Lymphoma
- d) Hodgkin's Lymphoma
- e) MALT lymphoma

- Q.62** Disorder associated with Disseminated Intravascular Coagulation is:

- a) Minor surgery
- b) Increased Fibrin Degradation Products
- c) Lack of fibrin thrombi
- d) Septic abortion
- e) Macroangiopathic hemolytic anemia

- Q.63** A 10 years old boy presents with bleeding from small, superficial blood vessels producing petechiae and large ecchymoses in the skin, the mucous membranes of the gastrointestinal and urinary tracts also gave evidence of bleeding without thrombi on endoscopy. His platelet count is markedly reduced with normal PT & PTT. He also gave history of viral infection few days ago. What is the most likely diagnosis?

- a) Acute ITP
- b) Chronic primary Immune Thrombocytopenic Purpura (ITP)
- c) Disseminated Intravascular Coagulation
- d) Thrombotic Thrombocytopenic Purpura
- e) Microangiopathic hemolytic anemia

- Q.64** A chronic smoker with reduced expiratory flow rate and ratio of FEV₁ to FVC presents with dyspnoea, cough and fever. What is the possible diagnosis?

- a) Cryptogenic organizing pneumonia
- b) Emphysema
- c) Pneumonia
- d) Sarcoidosis
- e) Idiopathic pulmonary fibrosis

- Q.65** 35 years old male comes to your clinic due to shortness of breath, for which he was X-rayed. A spherical, small (3-4 cm), discrete "coin" lesion in right lung is seen on chest radiographs. Most likely diagnosis is:

- a) Hamartoma
- b) Squamous Cell Carcinoma
- c) Sarcoidosis
- d) Tuberculosis
- e) Fungal Pneumonia

- Q.20 Schistosoma hematobium infection is most commonly associated with which of the malignant tumors of urinary bladder?
- Adenocarcinoma
 - Mixed carcinoma
 - Flat noninvasive carcinoma
 - Squamous cell carcinoma
 - Transitional cell carcinoma
- Q.21 A 45-year-old woman presents with hematuria, flank pain and hypertension. 24-hour urinary protein is 1.5 g. Abdominal ultrasound reveals large multicystic kidneys. What other cystic lesion occurs commonly with this condition?
- Epidermal cyst of skin
 - Polycystic liver disease
 - Polycystic ovarian disease
 - Pancreatic pseudocyst
 - Colloid cyst of CNS
- Q.22 An unconscious 20-year-old male is brought to the emergency. He has tachycardia. On his blood chemistry $\text{Na}^+ = 125 \text{ mmol/L}$, $\text{K}^+ = 5.3 \text{ mmol/L}$ and random blood sugar is 200 mg/dl. His breath smells of acetone. The most likely diagnosis is?
- Addison disease
 - Cushing's syndrome
 - Diabetic ketoacidosis
 - Nephrotic syndrome
 - Non-ketotic hyperosmolar coma
- Q.23 A 75-year-old obese woman with a history of type II diabetes and heart disease presents complaining of crushing sub-sternal chest pain of 30 minutes duration with pain radiating down her left arm. A blood test within 8 hours would show an increase in which of the following cardiac enzyme levels?
- Aspartate aminotransferase (AST)
 - Lactate dehydrogenase (LDH)
 - Phospholipase C
 - Tropomyosin
 - Troponin-I
- Q.24 A 56-year-old man presented with weight loss, generalized weakness and lethargy of six months duration. His investigations revealed: Increased potassium, urea, creatinine, H^+ , Phosphate, Magnesium and decreased sodium, bicarbonate and calcium. What is the most likely diagnosis?
- Diabetes mellitus
 - Chronic renal failure
 - Acute renal failure
 - Chronic renal failure
 - Renal lithiasis
- Q.25 A young male presents to the emergency department with history of acute onset of headache in the occipital region followed by unconsciousness. Within an hour he expired. On autopsy of brain subarachnoid haemorrhage was seen around circle of Willis. Which of the following was the underlying pathology?
- Traumatic rupture of anterior cerebral artery
 - Ruptured Berry aneurysm
 - Brain infarct
 - Septic brain emboli
 - Ruptured atherosclerotic aneurysm
- Q.26 A 50-year-old lady presenting with ankle edema, raised JVP (Jugular venous pressure) and enlarged liver, was found to have hypertrophied dilated right ventricle and normal left ventricle and atria. Which underlying pathology can produce this lesion?
- Mitral stenosis
 - Aortic stenosis
 - Mitral incompetence
 - Primary pulmonary hypertension
 - Left heart failure
- Q.27 A 70-year old male presents to emergency department with clinical diagnosis of acute Myocardial infarction. His relatives gave history of acute symptoms for the past 24 hours. Which of the following lab tests will confirm the diagnosis?
- ESR
 - TLC
 - Serum SGOT
 - Serum LDH
 - Serum Troponins
- Q.28 In acute Rheumatic fever, small vegetations form along line of closure of the mitral valve cusps. These can:
- Cause acute heart failure
 - Cause cardiac arrhythmias
 - Cause valvular disorder in chronic rheumatic heart disease
 - Cause mitral valve incompetence
 - Cause Mitral valve stenosis
- Q.29 Most frequent sequel of fibrinous pericarditis associated with Rheumatic heart disease is:
- Organization
 - Constrictive pericarditis
 - Evolution
 - Purulent pericarditis
 - Adhesive pericarditis
- Q.30 Peripheral blood smear of a young African male revealed Heinz bodies, bite cells, normoblasts and high Reticulocyte count. This followed an attack of acute lobar pneumonia. Which other feature will be present in him for defining the underlying pathology?
- Polychromasia
 - Platelet parasite in smear
 - Polychromatophilic erythrocytes in the smear
 - Haematuria
 - Jaundice

- Q.10 A 60 years old woman presents with weight loss, heart burn and small mass overlying her left clavicle. On histological examination of lymph nodes in clavicular region shows malignant cells with peripheral placed nucleus and positive for mucin. Which of the following abnormality is likely to be present?
- Adenocarcinoma of esophagus
 - Clear cell carcinoma of kidney
 - Colloid carcinoma of breast
 - Follicular carcinoma of thyroid
 - Signet cell carcinoma of stomach
- Q.11 Unopposed estrogen stimulation for prolonged period increases the risk of development of endometrial hyperplasia and then carcinoma. Which histologic appearance is most common?
- Clear cell carcinoma
 - Adeno-carcinoma
 - Small cell carcinoma
 - Squamous cell carcinoma
 - Transitional cell carcinoma
- Q.12 An 11 year old boy presents with enlarging, painful lesion that involves the medullary cavity of his left femur. X-ray show "onion-skin" lesion. Histologically lesion consists of sheets of uniform, small, round, blue cells. Which translocation is associated with this lesion?
- t(14;18)
 - t(11;22)
 - t(15;17)
 - t(8;14)
 - t(9;22)
- Q.13 A 42 years old female presented to her physician with the complaint of dysphagia. On clinical examination, she has pallor, glossitis and cheilosis. Lab investigation show that she is suffering from iron deficiency anaemia. Endoscopy revealed a semicircumscribed, eccentric lesion in the upper part of esophagus composed of mucosal blebs. The clinical picture is suggestive of:
- Plummer-vinson syndrome
 - Barret's esophagus
 - Zenker's diverticulum
 - Esophageal rings
 - Gastro-esophageal reflux disease
- Q.14 A 69 years old man goes to his physician for a routine check up. Considering his age, a digital rectal examination was also done. A firm to hard nodule was felt. Serological tests indicated prostatic cancer. Which of the following findings on histological examination will be most specific for prostate cancer:
- Crowded cells, containing darkly stained basal flat cells
 - Presence of basal, flat cells & corpora Amylacea
 - Shedding off glandular epithelial cells
 - Perineural invasion
 - Frequent mitosis
- Q.15 A 28 year old married woman had purulent discharge per vagina and pelvic pain. A cervical culture shows growth of *Neisseria gonorrhoeae*. If the infection is not adequately treated, the patient will be at increased risk of which of the following complications:
- Dysfunctional uterine bleeding
 - Ectopic pregnancy
 - Cervical carcinoma
 - Placenta previa
 - Endometrial hyperplasia
- Q.16 A 40 years old female suddenly experienced excruciating headache and developed diplopia. She was referred to the emergency and CT scan was done which showed a pituitary growth. Which one of the following is responsible for her condition:
- Pituitary apoplexy
 - Somatotroph adenoma of pituitary
 - Prolactinoma
 - Sheehan syndrome
 - Corticotroph adenoma
- Q.17 Patients with Hashimoto's thyroiditis are at increased risk of developing which one of the following:
- Follicular carcinoma thyroid
 - B cell non Hodgkin lymphoma
 - Anaplastic carcinoma
 - Hamartomas
 - Medullary carcinoma
- Q.18 Which of following risk factors is most likely to cause leukoplakia:
- Eating chilli peppers
 - Chewing spearmint gum
 - Grilled Bar-B-Que eating
 - HIV infection
 - Chewing tobacco
- Q.19 A 30 year old man has intermittent cramping abdominal pain and low volume diarrhoea for several weeks. Colonoscopy shows many areas of ulcerations and some areas normal. Biopsy shows mixed inflammatory cells and non caseating granulomas. Which of the following underlying disease has most likely developed:
- Amoebiasis
 - Crohn's disease
 - Tuberculosis
 - Sarcoidosis
 - Ulcerative colitis
- Q.20 Which of following laboratory finding is most likely in a patient of myasthenia gravis:
- Acetylcholine receptor antibody positive
 - Elevated serum creatine kinase level
 - Eosinophilia
 - Increased serum cortisol level
 - Vitamin B12 deficiency



**MBBS THIRD PROFESSIONAL
Special Pathology
(Multiple Choice Questions)**

Pages 10

Signature of Candidate

Roll No.

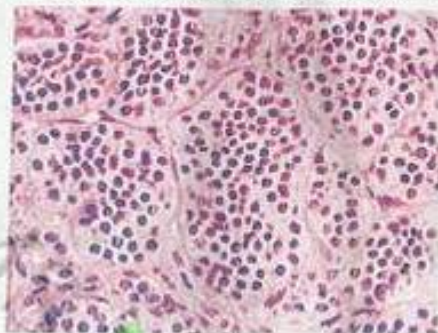
Total Marks: 65

Time Allowed: 1 hour and 5 minutes

MCQ Paper ID: F C A A 1 1 2 5 8 4 1 2

- Instructions:**
- Read the instructions on the MCQ Response Form carefully.
 - Attempt **all** questions.
 - Question Paper to be returned along with MCQ Response Form.
 - Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

Q.1 ✓ Histologic appearance of bronchial biopsy from a patient with a spherical, pale mass protruding into the lumen of the bronchus is shown below. What is your diagnosis?

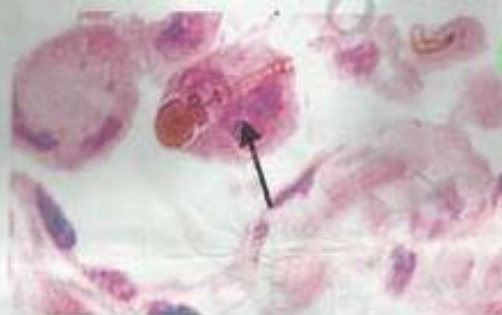


- a) Carcinoid
b) Lymphoma of the lung
c) Squamous cell carcinoma
d) Small cell carcinoma
e) Large-cell neuroendocrine carcinoma

Q.2 A 39 years old teacher comes to an ENT clinic for hoarseness of voice for a year. This symptom has gradually increased and making compromises in his profession. On examination of the true vocal cords a soft, raspberry-like excrescency more than 1 cm in diameter is visible. Histology of the lesion reveals a benign lesion. What is the diagnosis?

- a) Squamous papilloma of the larynx
b) Squamous cell carcinoma
c) Vocal cord nodules
d) Chondroma of the larynx
e) Fibroma of the larynx

Q.3 ✗ A 50 years old car factory worker gives history of progressively worsening dyspnoea accompanied by a cough associated with production of sputum. On examination, he is found to have CHF. Pleural plaques are detected on radiographs as circumscribed densities. Cytology of his sputum is given below. What structures are seen in the micrograph?



- a) Asteroid body
b) Chrysotiles
c) Asbestos body
d) Schaumann bodies
e) Silica

Q.4 ✗ Barrett's oesophagus is present in 5% to 15% of persons with persistent symptomatic reflux disease. Out of the following statements which one best defines the lesion?

- a) Presence of Squamous metaplasia
b) Strong genetic predisposition
c) Biopsy confirms the diagnosis
d) Raised incidence of Squamous cell carcinoma
e) The patient should be followed

Q.5 ✓ Gastric carcinoma:

- a) Usually arise from polyps
b) Early carcinoma is confined to serosa
c) Intestinal type has glands with atypia
d) Surgical resection in early stages is indicated
e) Squamous cell carcinoma is more common

Q.21 A 40 years old female gives history of hematuria, azotemia and hypertension. What factors are going to help you in making a diagnosis in favour of Acute Renal Failure?

- a) There is gradual loss of renal function
- b) Ruling out renal calculi is of extreme priority
- c) Oliguria is the chief complain
- d) Toxic acute tubular necrosis is the most common etiology
- e) Azotemia is not a feature

Q.22 Which Statement regarding Chronic Renal Failure is justified?

- a) Cardiovascular disease is the leading cause of death
- b) Uraemia is not a feature
- c) Acute tubular injury is one of the causes
- d) Elevated serum urea, calcium and phosphate levels
- e) Renal function decline can be treated

Q.23 A 50 years old male presents with renal colic and gradually deteriorating renal functions. History reveals that he has been a diabetic and hypertensive for many years. He also smokes 10 packs of cigarettes in a day. If he is suspected to have atherosclerosis. What factor will go in favour of ischemic nephropathy:

- a) Atherosclerosis of main renal vessels is the cause of ischemia
- b) It is the common cause of Chronic Renal Failure in elderly
- c) Macroscopic examination of the kidney will show fine diffuse scarring of renal cortex
- d) Ischemic necrosis is caseation necrosis
- e) Cause of death in these patients is end stage renal failure

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Q.24 An 18 years old boy has had an episode of gross hematuria that occurred within 1 or 2 days of a non-specific upper respiratory tract infection. The hematuria lasted several days and then subsided, only to recur every few months. It is often associated with loin pain. He is suspected of having Glomerular Disease. Which statement regarding glomerular disease is right?

- a) Membranous glomerulonephritis is a common cause of Nephrotic Syndrome in adults
- b) IgA nephropathy is due to deposition of IgA in glomerular basement membrane
- c) Focal segmental glomerulosclerosis (FSGS) carries a good prognosis
- d) Chronic Glomerulonephritis is an uncommon cause of chronic renal failure
- e) IgA nephropathy shows linear immunofluorescent deposits in glomerular basement membrane

Q.25 Adult polycystic kidney disease is characterized by one of the following:

- a) It is the cause of 25% of the patients of end stage renal failure
- b) Diagnosis is usually made while investigating hypertension
- c) Mutation of PKD2 gene is etiological
- d) Intracerebral haemorrhage leading to death is a well known complication
- e) The kidneys are enlarged and cystic at birth

Q.26 A 60 years old male presents with difficulty in starting the stream of urine (hesitancy) and intermittent interruption of the urinary stream while voiding. He also complains of painful distention of the bladder and, KUB reveals hydronephrosis. Symptoms of obstruction are accompanied by urinary urgency, frequency, and nocturia. What are the points in favour of benign prostatic hyperplasia?

- a) Hyperplastic nodules are present in the peripheral zone of the prostate
- b) There is poor coordination between size of the prostate and severity of the symptoms
- c) Only epithelial hyperplasia is present
- d) There increased risk of carcinoma
- e) Prostatic specific antigen (PSA) >10ng/ml is significantly raised

Q.27 A 45 years old male presents with painless testicular enlargement, for which he under went surgery. Histology of the testis reveals a neoplasm with Sheets of uniform polygonal cells with cleared cytoplasm and lymphocytes in the surrounding stroma. What is the diagnosis?

- a) Embryonal carcinoma
- b) Seminoma
- c) Yolk sac tumors
- d) Chorlocarcinoma
- e) Teratoma

Q.28 A 50 years old male comes to your clinic for complains of urinary urgency, frequency, PR examination reveals a hard nodule in the periphery of the prostate, His PSA is 10ng/ml, biopsy shows neoplastic glands lined by a single layer of cells. What is the diagnosis?

- a) Benign prostatic hyperplasia
- b) Chronic Prostatitis
- c) Prostatic carcinoma
- d) Acute prostatitis
- e) Transitional cell carcinoma

Q.29 The most common penile malignancy is:

- a) Squamous cell carcinoma
- b) Adenocarcinoma
- c) Non Hodgkin's Lymphoma
- d) Malignant Melanoma
- e) Condyloma accuminatum

51. A 25 year old male has flushing and diarrheal episodes. Bronchoscopy reveals obstructing mass in upper lobe of lung. The biopsy showed neuroendocrine nature of tumor on immune-staining. The diagnosis is
- Hamartoma
 - Carcinoid tumor
 - Squamous cell carcinoma
 - Kaposi sarcoma
 - Large cell carcinoma
52. A young male presents with numerous epidermal cysts of skin. Workup finds a solitary osteoma of the jaw and numerous adenomatous polyps of small and large intestines. Which of the following is the most likely diagnosis?
- Peutz-Jeghers syndrome
 - Familial adenomatous polyposis
 - Gardner's syndrome
 - Lynch syndrome
 - Turoots syndrome
53. Which lesion with flat white patch on the buccal mucosa can lead to oral malignancy?
- Leukoplakia
 - Hairy leukoplakia
 - Lichen planus
 - Oral thrush
 - Squamous papilloma
54. A 40 year old female presented with epigastric pain, and provisional diagnosis of peptic ulcer was made. For conformation of diagnosis on endoscopy. From where one should take the biopsy?
- Gastric antrum
 - Gastric ulcer
 - Gastroesophageal junction
 - Greater curvature
 - Duodenal ulcer
55. A 55 year female takes large quantities of non-steroidal anti-inflammatory drugs. Recently she had epigastric pain, nausea, vomiting and episode of haematemesis and physical examination is unremarkable. A gastric biopsy will show which of the following lesion?
- Epithelial dysplasia
 - Hyperplastic polyp
 - Acute gastritis
 - Adenocarcinoma
 - Helicobacter pylori infection
56. A 45 year old female with long standing rheumatoid arthritis complains of dry eyes and dry mouth. Bilateral enlargement of the parotids is noted on physical examination. This syndrome is best described as:
- Autoimmune
 - Infectious
 - Metabolic
 - Metastatic
 - Primary Neoplastic
57. A 55 year old woman goes to her physician for a routine health maintenance examination. A stool sample is positive for occult blood. CT scan of the abdomen shows numerous air filled, out punching of the sigmoid and descending colon. Which of the following complications is most likely to develop in this patient?
- Adenocarcinoma
 - Pericolic abscess
 - Bowel obstruction
 - Malabsorption
 - Toxic megacolon
58. Conjugated hyperbilirubinaemia is seen in?
- Haemolytic anemia
 - Physiological jaundice of the newborn
 - Crigler-najjar syndrome
 - Dubin-johnson syndrome
 - Viral hepatitis
59. The virus associated with an immune mediated vasculitis characterized by p-ANCA antibodies is:
- Hepatitis A
 - Hepatitis B
 - Hepatitis C
 - Hepatitis D
 - Hepatitis E
60. A patient presented with ascites and his liver biopsy reveals diffuse portal tract bridging fibrosis and nodular regeneration of liver cells without hepatocytes necrosis and cholestasis. The findings are characteristic for?
- Alcoholic hepatitis
 - Viral hepatitis
 - Drug toxicity
 - Cirrhosis
 - Chronic congestion
61. A 13 year old boy presented with extrapyramidal signs, ophthalmologic examination demonstrates presence of kayser-fleischer rings. Laboratory investigations show elevated liver enzymes. The patient's condition is associated with the accumulation of:

- Q.31 What is the frequency of fibrillary astrocytomas among primary malignant brain tumors in adults?
 a) 80%
 b) 50%
 c) Less than 5%
 d) <1%
 e) 20%
- Q.32 Cotton wool patches on the diabetic retina are:
 a) Amyloid deposits
 b) Ischemic areas
 c) Protein deposits
 d) Retinal microseparations
 e) Thread-like vascular proliferations
- Q.33 Which of the following is most helpful in diagnosis of Myocardial infarction in first six hours of angina?
 a) LDH
 b) CPK
 c) ALT
 d) Troponin T
 e) AST
- Q.34 In a patient who has renal artery stenosis will most likely to have:
 a) Acute pyelonephritis
 b) Acute tubular necrosis
 c) Diffuse proliferative glomerulonephritis
 d) Lupus, who class IV
 e) Hypertension
- Q.35 A 50-year-old farmer develops pain and itching in a mole on his left cheek. The mole has been present since birth. It is also increasing in size and at the time of examination it is 15mm in diameter, dark brown to blackish in color with irregular margins and a rough surface. A lymph node is also palpable in left cervical chain. Given that this lesion developed in the background of a Dysplastic nevus, what is the major predisposing factor in its development?
 a) Trauma
 b) Exposure to sunlight
 c) Exposure to X rays
 d) Exposure to radiation
 e) Exposure to chemical carcinogens
- Q.36 A 40-year-old man presents with excruciating chest pain radiating to back. ECG shows no changes and cardiac enzymes are not raised. There is no history of hypertension. A type A aortic aneurysm is noted on radiological investigations. What genetic disorder would you expect in this patient?
 a) Di George syndrome
 b) Osteogenesis Imperfecta
 c) Alpha₁-antitrypsin deficiency
 d) Ehlers Danlos syndrome
 e) Marfans syndrome
- Q.37 A 42-year-old male, a professional cricketer for the past 20 years collapses and expires while playing for a veteran's cricket team. The patient has no history of hypertension and or ischemic heart disease, although he is slightly overweight for his height. Autopsy shows left ventricular hypertrophy. Lungs show no significant pathology. Coronary arteries are patent. Diagnosis of Sudden cardiac death is made. What is the most important risk factor for this condition in this patient?
 a) Age
 b) Increased cardiac mass
 c) Sedentary physical activity
 d) Male gender
 e) Obesity
- Q.38 Two 12 year-old boys, playmates at school have a bout of severe pharyngitis. Throat swab cultures were positive for group A beta hemolytic streptococci. Two weeks after recovering from sore throat, one of the boys develops acute Rheumatic fever. What factor is most likely to have determined the occurrence of RF in one boy while the other remained healthy?
 a) Re-exposure to the same pathogen
 b) Decreased immunity
 c) Genetic susceptibility
 d) Severity of initial infection
 e) Virulence of organism causing initial infection
- Q.39 A 65-year-old retired professor, known hypertensive with a sedentary lifestyle experiences severe choking substernal chest pain that lasts for about 10 minutes. What degree of stenosis in his coronary arteries would have caused his symptoms?
 a) 90%
 b) 50%
 c) 10%
 d) 20%
 e) <1%
- Q.40 A 35-year-old male patient is admitted in the chest ward with community acquired lobar pneumonia. Initial regimen of antibiotics fails to control the infection. On the fifth hospital day he complains of chest pain and is found to have a loud pericardial friction rub. Pericardiocentesis yields a creamy yellow exudate, which shows acute inflammation on microscopy. What is the most likely cause of his symptoms?
 a) Serous pericarditis
 b) Myocarditis
 c) Acute suppurative pericarditis
 d) Fibrinous pericarditis
 e) Empyema thoracis

- b. Fibroadenoma
c. Fibrocystic change
d. Lobular carcinoma in situ
e. Traumatic fat necrosis
31. Infiltration of the epidermis by inflammatory or circulating blood cells is?
a. Spongiosis
b. Exocytosis
c. Acanthosis
d. Dyskeratosis
e. Acantholysis
32. A 65 years old lady incidentally notices a tender breast swelling in her right breast. A few months later the swelling worsened. Physical examination revealed a hard, fixed lump, nipple retraction, overlying erythematous skin and axillary lymphadenopathy. The excision of this lump is most likely going to reveal?
a. Phyllodes tumour
b. Sclerosing adenosis
c. Paget's disease
d. Invasive ductal carcinoma
e. Atypical ductal hyperplasia
33. A 25-year-old male patient presents with acute renal failure, which is not amenable to dialysis. He has history of recurrent episodes of hemoptysis and chest radiograph shows focal lung consolidation. What type of antibodies can be responsible for his pulmonary and renal symptoms?
a. Anti smooth muscle antibodies
b. Anti neutrophil cytoplasmic antibodies
c. Antinuclear antibodies
d. Autoantibodies to type IV collagen
e. Autoantibodies to type III collagen
34. The most common cause of abdominal aortic aneurysm is?
a. Trauma
b. Syphilis
c. Atherosclerosis
d. Vasculitis
e. Hypertension
35. The leading cause of mortality in ischaemic heart disease is sudden death which is due to?
a. Atrial fibrillation
b. Ventricular fibrillation
c. Myocardial ischaemia
d. Hypotension
e. Coagulation necrosis
36. A 45 year old man is seen because of a long history of slowly developing congestive heart failure. His blood pressure is normal. Coronary artery angiography reveals no vascular disease. No heart murmurs are heard. The white blood cell count, differential and erythrocyte sedimentation rate are normal. The most likely diagnosis is:
a. Carcinoid heart disease
b. Cardiomyopathy
c. Coarctation of the aorta
d. Constrictive pericarditis
e. Myocardial infarction
37. Four month following a dental surgery a 65-year-old man develops flu like symptoms with fatigue and weight loss. Chest auscultation reveals an aortic murmur and echocardiography shows calcific stenosis of the aortic valve with large vegetations. A blood culture in this patient is likely to be positive for?
a. Staphylococcus aureus
b. Group B beta hemolytic streptococci
c. Streptococcus viridans
d. Gram negative bacilli
e. Staphylococcus epidermidis
38. Which of these bacteria is most likely to setup acute bacterial endocarditis on a previously normal valve?
a. Clostridia
b. Staphylococcus
c. Streptococcus pyogenes
d. Streptococcus viridans
e. Pseudomonas
39. Which serum marker would best help in diagnosis of chest pain four hour after its onset and radiating to the left arm?
a. Aspartate aminotransferase
b. Creatinine kinase-MB isoenzyme
c. Lactate dehydrogenase-I isoenzyme
d. Troponin
e. Total creatinine kinase
40. A 50 year male presents with severe chest pain after myocardial infarction. One week later he again complains of pericardial pain, fever and loud friction rub. What is the diagnosis?
a. caseous pericarditis
b. fibrinous pericarditis

Q.12 An eight months old infant presents with alternating episodes of obstruction and passage of diarrheal stools. Radiological findings show dilated bowel segment. Colonic biopsy findings reveal absence of ganglion cells in the nondistended bowel segment. It is a case of:

- a) Ischemic bowel disease
- b) Hirschsprung Disease
- c) Meckel diverticulum
- d) Omphalocele
- e) Intestinal Malrotation

Q.13 A 35 years old drug abuser presents with increasing fatigue, occasional bouts of mild jaundice, lately he has lost weight and appetite. His physical examination is positive for hepatic tenderness. Laboratory studies show persistent elevation of serum transaminase for the last few months. Hyperbilirubinemia, prolonged prothrombin time and detectable HCV RNA in his serum. Regarding hepatitis C infection select one best statement:

- a) Most of the cases become chronic
- b) It is mostly transmitted sexually
- c) Acute infection leads to acute icteric hepatitis
- d) Genotype of the virus has no effect on the response to therapy
- e) Having multiple sex partners does not expose a person to HCV

Q.14 A 40 years old female comes to ER with severe abdominal pain referred to left shoulder. She has had anorexia, nausea and vomiting in the last few days. She is diagnosed to have acute pancreatitis on the basis of her symptoms and markedly elevated serum amylase levels. What is the right statement regarding Acute Pancreatitis?

- a) Acute respiratory distress syndrome and acute renal failure are ominous complications
- b) Acute upper abdominal pain and peritonitis are the typical presentation
- c) Alcohol and blunt trauma are major causes
- d) It predisposes to pancreatic carcinoma
- e) Genetics has no role in its aetiology

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Q.15 A 40 years old male presents with abdominal pain and jaundice. Ultrasonography of abdomen is ordered but the reports are not available. Possibility of pancreatic carcinoma is there. Which of the following statements is right regarding pancreatic carcinoma?

- a) Body of the pancreas is a common site
- b) Squamous Cell Carcinoma is a common pancreatic tumour
- c) Severe weight loss is common
- d) Tumours are respectable at the time of presentation
- e) Migratory Thrombophlebitis is not a feature

Q.16 A 40 years old obese female gives history of dyspepsia, flatulence and right upper quadrant pain. Ultrasound shows gallstones. Which of the following statements will help you in making the diagnosis in favour of gallstones?

- a) Gallstones always present with right upper quadrant pain
- b) Gallstones are a common cause of obstructive jaundice
- c) Biliary colic is a systemic disease associated with chronic cholecystitis
- d) Gallstones are always associated with chronic cholecystitis
- e) 90% of the stones are pigment stones

Q.17 Liver cirrhosis is associated with:

- a) Minimum fibrosis
- b) Kupffer cell inactivation
- c) Ascites is an early feature of cirrhosis
- d) Cirrhosis does not lead to Hepatocellular carcinoma
- e) Decompensated hepatic failure is common

Q.18 Choose the right statement regarding Liver Function Tests (LFT):

- a) LFTs are always deranged in liver disease
- b) An isolated increase in β glutamyltransferase (GGT) is often seen in alcoholics
- c) An isolated increase in alkaline phosphatase means Biliary disease
- d) Mild increase in bilirubin, alanine aminotransferase & aspartate aminotransferase is typical of Gilbert's Syndrome
- e) Uridinediphosphate glucosyltransferase is normal in Crigler Najjar Syndrome

Q.19 Which of the following statements regarding Renal Function is justified?

- a) Most laboratories measure Creatinine by Jaffe Reaction
- b) Urea is filtered by the glomeruli but is not significantly absorbed by renal tubules
- c) Creatinine is a sensitive indicator of mild renal impairment
- d) Increased urea and normal Creatinine indicate severe renal impairment
- e) Increased urea and Creatinine indicate that patient has had high protein diet

Q.20 A premenopausal, 40 years old female presents with amenorrhea, galactorrhea, loss of libido, and infertility. During investigation an adenoma of pituitary is identified. Which of the following statements goes with the diagnosis?

- a) Increased ACTH levels
- b) Elevations of serum prolactin
- c) Decreased TSH
- d) High-dose estrogen therapy does not have an effect on this neoplasm
- e) Melanocyte stimulating Hormone is invariably raised



DEPARTMENT OF PATHOLOGY
RAWALPINDI MEDICAL COLLEGE

Roll No.

4th YEAR THIRD TERM EXAM 2015 --- MCQs PAPER---21st SEP. 2015

TOTAL QUESTIONS: 70

TOTAL MARKS: 70

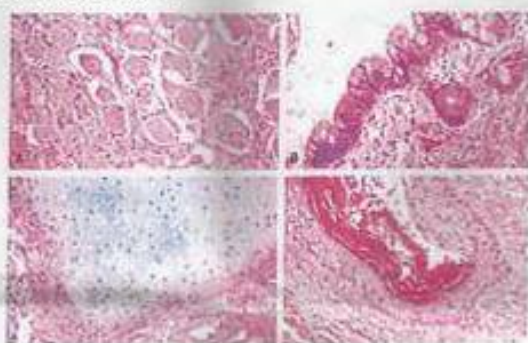
TIME: 70 MINUTES

***** CHOOSE THE ONE CORRECT ANSWER --- ATTEMPT ALL QUESTIONS *****

NOTE: MOBILE PHONES ARE STRICTLY PROHIBITED AND CARRYING THEM DURING EXAM WILL RESULT IN STRICT DISCIPLINARY ACTION. DEPOSIT MOBILE PHONES TO INVIGILATION STAFF BEFORE STARTING PAPER.

- Dilation of the renal pelvis and calyces associated with progressive atrophy of the kidneys due to urine outflow obstruction is
a. Diffuse cortical necrosis
b. Sickle cell nephropathy
c. Hydronephrosis
d. Nephrosclerosis
e. Nephrotic syndrome
- Thrombotic microangiopathies are characterized morphologically and clinically by?
a. Thrombosis in capillaries
b. Thrombocytopenia
c. Hemolytic anemia
d. Renal failure
e. All of the above
- Kollocytosis in Condyloma acuminatum is characteristic of infection by?
a. Herpes simplex virus
b. Human papilloma virus
c. Epstein Barr virus
d. Staph. aureus
e. Streptococci
- The left testis of a 32 years old man is enlarged to five times the normal size. The testis is removed and histology shows sheets of uniform, large to round polyhedral cells having distinct cell membranes, watery appearing cytoplasm, large central nucleus and one or two prominent nucleoli, divided into poorly demarcated lobules by fibrous septa. These findings are suggestive of?
a. Teratoma
b. Seminoma
c. Prostatic carcinoma
d. Gonorrhoea
e. Yolk sac tumour
- The most common cause of hypothyroidism in underprivileged countries is:
a. Pituitary dysfunction
b. DeQuervain's thyroiditis
c. Graves' disease
d. Hashimoto's thyroiditis
e. Iodine deficiency
- You are consulted by a 41-year old male who is very tall and has a large jaw. You have acromegaly due to a pituitary adenoma as your provisional diagnosis. What laboratory test would be best for making this diagnosis?
a. Insulin-like growth factor level
b. Random serum growth hormone level
c. Prolactin level
d. Hemoglobin
e. Lactate dehydrogenase
- A patient with Cushing syndrome might present with any of the following EXCEPT:
a. Obesity
b. A buffalo hump
c. Moon facies
d. Bronze or hyperpigmented skin
e. Glucose intolerance
- A patient presents with polyuria and thirst, stones, and nephrocalcinosis. He also has muscle weakness and bone cysts. All of the following is associated with his disease except:
a. Hyperparathyroidism
b. Excessive vitamin D
c. High bone turnover
d. Paget's disease
e. Less sunlight
- Which of the following is true regarding multiple endocrine neoplasia (MEN) I syndrome?
a. Virtually all patients develop medullary thyroid carcinoma
b. The genetic abnormality involves the RET gene
c. The genetic abnormality involves a proto-oncogene
d. Many patients develop parathyroid hyperplasia
e. Some patients may have a Marfanoid habitus

- Q.30** A 40 years old male presents with testicular swelling with elevated hCG and AFP, biopsy of the mass is shown. What is your diagnosis?



KHIZZER KHAN

- a) Seminoma
b) Embryonal carcinoma
c) Yolk sac tumors
d) Teratoma
e) Chorioncarcinoma
- Q.31** Most successful cervical cancer screening test is:
a) Papanicolaou smear
b) Cone biopsy of cervix
c) Punch biopsy of cervix
d) Colposcopic examination
e) Ultrasonography
- Q.32** A 40 years old female presents with menorrhagia and a dragging pelvic sensation in pelvic region. Her surgery is done, operative findings showed firm gray-white multiple masses occupying the uterine wall and cavity with a characteristic whorled cut surface. What is the likely histological feature?
a) Calcification, ischemic necrosis, cystic degeneration are absent
b) Whorling bundles of smooth muscle cells and Foci of fibrosis
c) Increased atypical mitosis
d) Hyperchromasia and polymorphism
e) Anaplasia
- Q.33** A 30 years old female comes with history of severe dysmenorrhea, pelvic pain, dyspareunia and infertility. On Ultrasonography a right sided ovarian cyst is localised which on biopsy is consistent with endometriosis. Which of the following is consistent with the diagnosis?
a) The endometrial glands are present outside the uterus
b) Symptoms are related to the amount of endometriosis
c) All histological criteria (endometrial glands, stroma & hemosiderin laden macrophages) must be present
d) It is a disease of postmenopausal women
e) Regurgitation theory and Metaplastic theory account for most of the cases
- Q.34** A 45 years old lady undergoes surgery for ovarian tumour, which was found to be 5-10 cm spherical to ovoid, cystic mass. Which of the following is right about ovarian neoplasia?
a) Dysgerminoma is the most common ovarian tumour
b) Mature cystic teratoma is a germ cell tumour
c) Borderline tumours have poor prognosis
d) There is no association with BRCA1 and BRCA2 genes in ovarian carcinoma
e) Benign serous cystadenoma is the most common ovarian tumour
- Q.35** A 25 years old obese female presents with oligomenorrhea and hirsutism. Ultrasonography shows multiple bilateral ovarian cysts consistent with polycystic ovarian disease. Which of the following statements favour the diagnosis?
a) Anovulation leads to endometrial atrophy
b) Ovulatory failure, androgen excess and polycystic ovaries are essential for the diagnosis
c) 1% of the women are affected by polycystic ovarian disease
d) Decrease in the serum level of luteinizing hormone is seen
e) Insulin resistance plays a role in the pathogenesis
- Q.36** A 45 years old female presents with a discrete cystic breast mass, fine needle aspiration yield 10 ml of pale yellow clear fluid suggesting the diagnosis to be a benign fibrocystic lesion. What is the suitable statement which goes in favour of the clinical impression?
a) Large ducts are altered
b) Increase in number of acini within the lobule are seen
c) Eccrine metaplasia of mammary duct cells are seen
d) Hyperplasia of the ductal epithelium is often seen
e) It is a disease of young females

- Q.17** A 55-year-old heavy smoker presents with severe dyspnea and slight dry cough. He has a barrel-chest and expiration is prolonged. FEV1 is decreased. Chest X-ray shows voluminous lungs overshadowing the heart. What is the principle pathogenetic mechanism for this patient's lung disease?
- Production of autoantibodies against alveolar basement membrane
 - Type IV Hypersensitivity
 - Vasculitis of pulmonary arterioles
 - Protease production by neutrophils and macrophages
 - Squamous metaplasia of bronchial epithelium
- Q.18** A resident in the surgery department is conducting a survey to identify risk factors for lung cancer in the local population. In which subset of patients is he likely to encounter the highest frequency of tobacco smokers?
- Squamous cell carcinoma
 - Small cell carcinoma
 - Adenocarcinoma
 - Large cell carcinoma
 - Bronchioalveolar carcinoma
- Q.19** A 61 year old man presents with increasing shortness of breath. A chest x-ray reveals a diffuse pulmonary infiltrate, while a transbronchial lung biopsy reveals variable patchy interstitial fibrosis with multiple fibroblastic foci. Sheets of 'desquamated' cells within alveoli are NOT seen. What is the best diagnosis?
- Bronchiolitis obliterans-organizing pneumonia (BOOP)
 - Cryptogenic organizing pneumonia (COP)
 - Desquamative interstitial pneumonia (DIP)
 - Idiopathic pulmonary fibrosis (IPF)
 - Nonspecific interstitial pneumonia (NSIP)
- Q.20** A 24 year old African American woman presents with non-specific symptoms including fever and malaise. A chest x-ray reveals enlarged hilar lymph nodes ('potato nodes'), while her serum calcium level is found to be elevated. Which of the following histological abnormalities is most likely to be seen in biopsy specimens from these enlarged hilar lymph nodes?
- Casating granulomas
 - Dense, granular PAS +ve eosinophilic material
 - Markedly enlarged epithelial cells with intranuclear inclusions
 - Non-casating granulomas
 - Numerous neutrophils with fibrin deposition
- Q.21** A 55 year old man presented with ptosis, miosis and anhydrosis. On CT, an apical mass in the left lung is seen. The most likely diagnosis is:
- Pancoast tumor
 - Myasthenia Gravis
 - Grave's disease
 - Carcinoid tumor
 - Papillary carcinoma thyroid
- Q.22** Following bilateral hip replacement surgery a 75-year-old female expires on the tenth post op day. The autopsy pathologist recovers a saddle embolus lying astride the main right and left pulmonary arteries. What is the most probable source of this embolus?
- Pulmonary veins
 - Inferior vena cava
 - Renal veins
 - Deep veins of the leg
 - Mesenteric veins
- Q.23** During a routine physical examination a 67 year old diabetic man is found to have a 5 cm pulsatile mass in his abdomen. Angiography reveals a marked dilatation of his aorta distal to his renal arteries. Which of the following is the most likely cause of his aneurysm?
- Atherosclerosis
 - A congenital defect
 - Hypertension
 - Trauma
 - A previous syphilitic infection
- Q.24** A factor that stimulates the proliferation of smooth-muscle cells and also relates to the pathogenesis of atherosclerosis is:
- Platelet-derived growth factor
 - Transforming growth factor β
 - Interleukin 1
 - Interferon α
 - Tumor necrosis factor
- Q.25** A 64-year-old male presents with recurrent chest pain that develops whenever he attempts to mow his yard. He relates that the pain goes away after a couple of minutes if he stops and rests. He also states that the pain has not increased in frequency or duration in the last several months. What is the correct diagnosis for this patient?
- Stable angina
 - Unstable angina
 - Atypical angina
 - Prinzmetal's angina
 - Myocardial infarction
- Q.26** Where are glomus tumors most commonly found?
- Head and neck
 - Axilla and upper arms
 - Fingers and toes
 - Groin and upper thigh
 - Knee and upper calf

- Q.36 A 27-year-old male presents with a testicular mass, which is resected and diagnosed as being a yolk sac tumor. Which one of the listed substances is most likely to be increased in this patient's serum as a result of being secreted from the cells of this tumor?
- Acid phosphatase
 - α -fetoprotein (AFP)
 - Alkaline phosphatase
 - β -human chorionic gonadotropin (β -HCG)
 - Prostate-specific antigen (PSA)
- Q.37 A 47-year-old male presents with the sudden onset of fever, chills, and dysuria. During the review of symptoms you discover that he has no history of recurrent urinary tract infections. Rectal examination finds that the prostate gland is very sensitive and examination is painful. What is the most likely diagnosis for this patient?
- Acute prostatitis
 - Chronic bacterial prostatitis
 - Chronic abacterial prostatitis
 - Granulomatous prostatitis
 - Benign prostatic hyperplasia
- Q.38 A 65-year-old male presents with bone pain and is found to have hypocalcemia and increased parathyroid hormone. Surgical exploration of his neck finds all four of his parathyroid glands to be enlarged. Without any other information, which one of the following is most likely the cause of the enlargement of the parathyroid glands?
- Primary hyperplasia
 - Parathyroid adenoma
 - Chronic renal failure
 - Parathyroid carcinoma
 - Lung carcinoma
- Q.39 A 5-year-old boy develops secondary sex characteristics, including pubic hair development and enlargement of penis. Which of the following feature is most likely to be seen in his adrenal gland?
- Bilateral adrenal cortical hyperplasia
 - Bilateral adrenal cortical atrophy
 - A nodule in the adrenal gland
 - Normal size and architecture
 - A nodule in zona glomerulosa
- Q.40 A 72-year-old male presents with a slowly growing, ulcerated lesion located on the pinna of his right ear. The lesion is excised, and histologic sections reveal infiltrating groups of cells in the dermis. These cells have eosinophilic cytoplasm, intercellular bridges, and intracellular keratin formation. What is the correct diagnosis for this lesion?
- Basal cell carcinoma
 - Dermatofibrosarcoma protuberans
 - Merkel cell carcinoma
 - Poorly differentiated adenocarcinoma
 - Squamous cell carcinoma
- Q.41 A 5-year-old boy presents with clumsiness, a waddling gait, and difficulty climbing steps. Physical examination reveals that this boy uses his arms and shoulder muscles to rise from the floor or a chair. Additionally, his calves appear to be somewhat larger than normal. This boy's physical findings are most consistent with a diagnosis of:
- Inclusion body myositis
 - Werdnig-Hoffmann disease
 - Dermatomyositis
 - Duchenne's muscular dystrophy
 - Myotonic dystrophy
- Q.42 A 54-year-old man presents with chronic knee pain. Resection of the patella reveals chalky white deposits on the surface of intraarticular structures. Histologic sections reveal long, needle-shaped, negatively birefringent crystals. These findings are most consistent with a diagnosis of:
- Osteoarthritis
 - Rheumatoid arthritis
 - Ochronosis
 - Gout
 - Pseudogout
- Q.43 A 59-year-old woman presents with difficulty swallowing, ptosis, and diplopia. Which of the following is most consistent with these symptoms?
- Antibodies to the acetylcholine receptor
 - Antibodies to the microvasculature of skeletal muscle
 - Lack of lactate production during ischemic exercise
 - Rhabdomyolysis
 - Corticosteroid therapy
- Q.44 Which one of the listed abnormalities is most likely to produce a spinal cord lesion that destroys both bone and the disk space (cartilage)?
- Metastatic carcinoma
 - Multiple myeloma
 - Non-Hodgkin's lymphoma
 - Syringomyelia
 - Tuberculosis
- Q.45 An 11-year-old boy presents with an enlarging, painful lesion that involves the medullary cavity of his left femur. X-rays reveal an irregular, destructive lesion that produces an "onion-skin" periosteal reaction. The lesion is resected surgically, and histologic sections reveal sheets of uniform small, round, "blue" cells. What is the correct diagnosis?
- Chondroblastoma
 - Ewing's sarcoma
 - Fibrosarcoma
 - Osteoblastoma
 - Osteogenic sarcoma

- Q.10 A new born baby is suspected to be suffering from neonatal sepsis. Which of the following abnormality in peripheral blood picture is most helpful in reaching the diagnosis?
 a) Microcytosis.
 b) Reticulocytoses.
 c) Thrombocytosis.
 d) High percentage of band cells.
 e) Hypochromia.
- Q.11 The most common source of pulmonary thrombo-embolism is:
 a) Femoral vein
 b) Popliteal vein
 c) Deep veins of calf
 d) Saphenous vein
 e) Anti cubital veins
- Q.12 Over several decades which of the following inhaled pollutants is most likely to produce extensive pulmonary fibrosis?
 a) Silica
 b) Tobacco smoke
 c) Wood dust
 d) Carbon monoxide
 e) Ozone
- Q.13 An 18 year old female student before entry into a medical college had to undergo medial tests. She developed a 05 mm area of induration on her forearm 3 days after intracutaneous injection of 0.1 ml of purified protein derivative (PPD). She appeared healthy. A chest radiograph would most likely demonstrate:
 a) Marked hilar lymphadenopathy
 b) Upper lobe calcification
 c) Extensive opacification
 d) Cavitory change
 e) No abnormal findings
- Q.14 An 85 years old female had left eye problems including exophthalmos, melosis, and ptosis. A chest X-Ray showed right upper lobe opacification. Which of the following conditions she is most likely to have?
 a) Bronchopneumonia
 b) bronchiectasis
 c) Bronchogenic carcinoma
 d) Sarcoidosis
 e) Tuberculosis
- Q.15 A 35 year old male has flushing and diarrhoeal episodes. Bronchoscopy reveals an obstructing mass filling the bronchus to the right upper lobe. Biopsy showed neuroendocrine nature of the tumor cells on immunostaining. The diagnosis is:
 a) Hamartoma
 b) Adenocarcinoma
 c) Large cell carcinoma
 d) Kaposi sarcoma
 e) Carcinoid tumor
- Q.16 A 39 year old male presented with on and off epigastric pain, provisional diagnosis of peptic ulcer disease was made. For confirmation of diagnosis on endoscopy, from where one should take the biopsy?
 a) Gastric antrum
 b) Gastric ulcer
 c) Gastroesophageal junction
 d) Duodenal ulcer
 e) Greater curvature
- Q.17 The most frequent esophageal malignancy is:
 a) Adenocarcinoma
 b) Fibrosarcoma
 c) Leiomyosarcoma
 d) Rhabdomyosarcoma
 e) Squamous Cell Carcinoma
- Q.18 A 68 year old female has suffered from burning substernal pain for many years. This pain occurs after meal. She now has dysphagia. Endoscopy reveals a lower esophageal mass that nearly occludes the esophageal lumen. Biopsy of the mass is most likely to reveal which of the following neoplasm?
 a) Adenocarcinoma.
 b) Leiomyosarcoma.
 c) Squamous cell carcinoma.
 d) Non-Hodgkins lymphoma
 e) Carcinoid tumor.
- Q.19 A 73 year old female has iron deficiency anemia. She has no vaginal bleeding, hematemesis, hemoptysis but melana. A colonoscopy reveals an obstructive lesion that is most likely to be a:
 a) Malignant Lymphoma.
 b) Adenocarcinoma.
 c) Leiomyosarcoma.
 d) Tubular adenoma.
 e) Carcinoid tumor.
- Q.20 A 59-Years old male presents with 2 month history of intermittent burning substernal and retrosternal pain radiating to his neck. The burning is usually relieved quickly with antacids. There is no relationship of these symptoms to exercise or exertion. Which of the following must be considered in the differential diagnosis of this patient's problem?
 a) Acid reflux disease.
 d) Panic disorder.
 e) Carcinoma stomach.



MBBS THIRD PROFESSIONAL
Special Pathology
(Multiple Choice Questions)

Pages 06

Signature of Candidate

Roll No.

Total Marks: 65

Time Allowed: 1 hour and 5 minutes

MCQ Paper ID 00000000000000000000000000000000

Instructions:

- i. Read the instructions on the MCQ Response Form carefully.
- ii. Attempt all questions. Choose the **Single Best Answer** for each question.
- iii. Question Paper to be returned along with MCQ Response Form.
- iv. Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

- Q.1 ITP is associated with which of the following?
- a) Hereditary spherocytosis
 - b) G-6-PD deficiency
 - c) Anti-red cell antibodies
 - d) Anti-platelet antibodies
 - e) Prolonged clotting time
- Q.2 A 66 year old man with a history of emphysema returns home from the hospital after suffering a myocardial infarction involving the apex of the left ventricle. The patient subsequently suffers a massive stroke and suddenly expires. Which of the following is an expected pathologic finding at autopsy?
- a) Calcific aortic stenosis
 - b) Mural thrombus
 - c) Dilated cardiomyopathy
 - d) Ventricular rupture
 - e) Mitral valve prolapse
- Q.3 A 36 year old woman complains of tachycardia. There is a history of recurrent episodes of arthritis, skin rash, and glomerulonephritis. There is also a mild diastolic murmur. Blood cultures are negative. Laboratory tests for antinuclear antibodies (ANA) and anti-double-stranded DNA are positive. Which of the following is the most likely cause of heart murmur in this patient?
- a) Aortic valve stenosis
 - b) Ventricular septal defect
 - c) Mitral valve prolapse
 - d) Rheumatic fever
 - e) Libman-Sacks endocarditis
- Q.4 In a known case of bacterial endocarditis due to staph aureus. Which one of the following is not a complication of this disease?
- a) Glomerulonephritis
 - b) Emphysema
 - c) Pyelonephritis
 - d) Meningitis
 - e) Liver abscess
- Q.5 Which one of the following is not a cause of pericarditis?
- a) Whipple's disease
 - b) Scleroderma
 - c) Sjogren's Syndrome
 - d) Dressler's syndrome
 - e) Marfan's syndrome
- Q.6 Histologic examination of an indurated breast lesion shows dilated ducts containing necrotic debris and foamy macrophages and surrounded by lymphocytes, plasma cells and histiocytes. The best diagnosis is:
- a) Fibrocystic disease
 - b) Plasma cell mastitis
 - c) Abscess
 - d) Paget's disease
 - e) Comedocarcinoma
- Q.7 HER 2/neu over expression in breast cancer:
- a) Responds to herceptin therapy
 - b) Is a bad prognostic marker
 - c) Responds to tamoxifen
 - d) Show good prognosis
 - e) Indicates recession of cancer
- Q.8 Which one of the following abnormalities is most likely to be found in an individual with hereditary hemochromatosis:
- a) Black cartilage
 - b) Bronze skin
 - c) Blue sclera
 - d) Red pupils
 - e) White hair
- Q.9 A 30 years old man presents with small, painless swelling in neck which is smooth, non-tender and fluctuant mass which moves up and down during swallowing. The histological examination shows cystic lesion lined by pseudostratified columnar epithelium. Lymphoid tissue is not present. What is the diagnosis?
- a) Brachial cleft cyst
 - b) Dentigerous cyst
 - c) Radicular cyst
 - d) Thyroglossal duct cyst
 - e) Odeontogenic cyst

may 4

- Q.52 A 60 year old smoker and occasional drinker presents to the ER with severe pain in the epigastrium radiating to the back. He is feeling nauseated and has vomited twice. Lab shows markedly raised amylase and lipase and low serum calcium. What is the most likely diagnosis?
- a) Acute pancreatitis
 - b) Acute cholecystitis
 - c) Acute appendicitis
 - d) Acute intestinal obstruction
 - e) Perforated peptic ulcer
- Q.53 Dubin Johnson syndrome is caused by a hereditary defect in excretion of bilirubin glucuronides across the canalicular membrane. What type of hyperbilirubinemia will it cause?
- a) Does not cause hyperbilirubinemia
 - b) Mainly conjugated
 - c) Mainly unconjugated
 - d) Both conjugated and unconjugated
 - e) Depends on the severity of the defect
- Q.54 Hepatocellular carcinoma can arise in the background of chronic hepatitis of any cause. What is the common denominator in the pathogenesis?
- a) Cirrhosis
 - b) Persistent chronic inflammation
 - c) Massive liver necrosis
 - d) Repeated cycles of cell death and regeneration
 - e) Integration of viral genetic material into hepatocyte genome
- Q.55 A 4-year-old girl child develops nephrotic syndrome. Renal biopsy shows normal looking glomeruli on light microscopy. Electron microscopy shows diffuse obliteration of epithelial foot processes. The patient recovers dramatically following steroid therapy. What is the diagnosis?
- a) IgA nephropathy
 - b) Membranous glomerulonephritis
 - c) Membranoproliferative glomerulonephritis
 - d) Lipoid nephrosis (Minimal change disease)
 - e) Focal segmental glomerulosclerosis

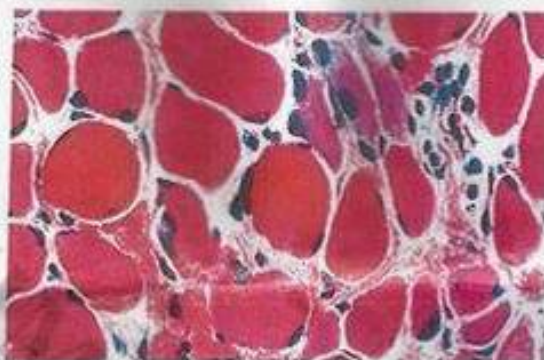
For may 13
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- Q.57 Pseudomyxoma peritonei is most likely to be associated with a:
 a) Clear cell tumor of the kidney
 b) Cystic tumor of the gallbladder
 c) Mucinous tumor of the ovary
 d) Serous tumor of the ovary
 e) Smooth-muscle tumor of the uterus
- Q.58 A 27-year-old female who is actively training for a marathon presents with the new onset of a painful lump in the upper outer quadrant of her right breast. A mammogram shows an irregular mass with focal areas of calcification. An excisional biopsy reveals a localized area of granulation tissue and numerous lipid-laden macrophages surrounding necrotic adipocytes. What is the correct diagnosis?
 a) Acute mastitis
 b) Ectasia
 c) Enzymatic fat necrosis
 d) Foreign-body reaction
 e) Traumatic fat necrosis
- Q.59 A 23-year-old woman presents with a rubbery, freely movable 2-cm mass in the upper outer quadrant of the left breast. A biopsy of this lesion would most likely histologically reveal:
 a) Large numbers of neutrophils
 b) Large numbers of plasma cells
 c) Duct ectasia with inspissation of breast secretions
 d) Necrotic fat surrounded by lipid-laden macrophages
 e) A mixture of fibrous tissue and ducts
- Q.60 A 39-year-old female presents with the new onset of a bloody discharge from her right nipple. Physical examination reveals a 1-cm freely movable mass that is located directly beneath the nipple. Sections from this mass reveal multiple fibrovascular cores lined by several layers of epithelial cells. Atypia is minimal. The lesion is completely contained within the duct and no invasion into underlying tissue is seen. What is the correct diagnosis?
 a) Benign phyllodes tumor
 b) Ductal papilloma
 c) Intraductal carcinoma
 d) Paget's disease
 e) Papillary carcinoma
- Q.61 The most important factor related to the prognosis of breast cancer is:
 a) The presence of activated oncogenes
 b) The histologic type and grade
 c) The size of the tumor
 d) The status of axillary lymph nodes
 e) The presence of estrogen receptors
- Q.62 A 48-year-old female presents with a 1.5-cm firm mass in the upper outer quadrant of her left breast. A biopsy from this mass reveals many of the ducts to be filled with atypical cells. In the center of these ducts there is extensive necrosis. No invasion into the surrounding fibrous tissue is seen. What is the correct diagnosis for this breast mass?
 a) Colloid carcinoma
 b) Comedocarcinoma
 c) Infiltrating ductal carcinoma
 d) Infiltrating lobular carcinoma
 e) Lobular carcinoma in situ
- Q.63 A 42-year-old man presents because recently he has had to change his shoe size from 9 to 10.5. He also says that his hands and jaw are now larger. The disorder is most likely mediated through the actions of excess:
 a) Prolactin
 b) ACTH
 c) Somatomedin
 d) Antidiuretic hormone
 e) Thyrotropin
- Q.64 A 49-year-old man who smokes two packs of cigarettes a day presents with a lung mass on x-ray and recent weight gain. Laboratory examination shows hyponatremia with hyperosmolar urine. The patient probably has:
 a) Renal failure
 b) Pituitary failure
 c) Conn's syndrome
 d) Cardiac failure
 e) Inappropriate ADH
- Q.65 An 8-month-old infant is being evaluated for growth and mental retardation. Physical examination reveals a small infant with dry, rough skin; a protuberant abdomen; periorbital edema; a flattened, broad nose; and a large, protuberant tongue. Which one of the listed disorders is the most likely cause of this infant's signs and symptoms?
 a) Graves' disease
 b) Cretinism
 c) Toxic multinodular goiter
 d) Toxic adenoma
 e) Struma ovarii

- Q.32 A 28 years old female presents with a 2 days history of dysuria with frequency and urgency. A urine culture grows more than 100,000 colonies/ml of E.Coli. She is treated with antibiotic therapy. However, if she continues to suffer recurrences of this problem she is at great risk for development of:
- Diffuse glomerulosclerosis.
 - Chronic glomerulonephritis.
 - Amyloidosis.
 - Membranous glomerulonephritis.
 - Chronic pyelonephritis.
- Q.33 A 60 year old male presents with painless haematuria. On physical there is no significant finding. IVP shows a filling defect in the urinary bladder. What is the most likely diagnosis?
- Stone in urinary bladder.
 - Schistosomiasis.
 - Acute hemolysis.
 - Stone in urethra.
 - Bladder carcinoma.
- Q.34 A 24 year old male is suffering from painless haematuria. What is the most probable diagnosis?
- Stone in renal pelvis.
 - Stone in ureter.
 - Renal cell carcinoma.
 - Acute glomerulonephritis.
 - Chronic pyelonephritis.
- Q.35 CA prostate most commonly involves:
- Transitional zone of prostate.
 - Outer (Peripheral) zone of prostate.
 - Central zone of prostate.
 - Periurethral zone of prostate.
 - Capsule of the prostate.
- Q.36 The right testis of a 33 years old male is enlarged to twice normal size. The testis is removed, and the epididymis and the upper aspect of the right testis are involved with extensive granulomatous inflammation with epithelioid cells, Langhans giant cells, and caseous necrosis. The most common cause for these findings is:
- Mumps.
 - Syphilis.
 - Tuberculosis.
 - Gonorrhea.
 - Sarcoidosis.
- Q.37 Which of the following tumor marker is routinely performed in patients suspected of having carcinoma prostate?
- PAP.
 - AFP.
 - PSA.
 - CEA.
 - CA-19-9.
- Q.38 Which of the following tumor is most radiosensitive?
- Breast carcinoma.
 - Prostate carcinoma.
 - Astrocytoma.
 - Colorectal adenocarcinoma.
 - Seminoma.
- Q.39 Histology of a testicular tumor in a 24 year old man revealed syncytial sheet of polymorphic cells with vesicular nuclei, prominent nucleoli and prominent lymphocytic infiltrate in the stroma. The most likely diagnosis is:
- Yolk sac tumor.
 - Seminoma.
 - Teratoma.
 - Choriocarcinoma.
 - Embryonal carcinoma.
- Q.40 54 year old woman with an abdominal mass undergoes exploration laparoscopy. Both ovaries are enlarged and hence resected. Pathology report is Krukenberg tumor, indicating which of the following:
- Ectopic pregnancy.
 - Endometriosis.
 - Hyperestrogenic state.
 - Immunosuppression.
 - Metastatic carcinoma.
- Q.41 You obtain a routine Pap smear while performing a physical examination on a 28-year old female. Gross inspection of the vulva, vagina, and cervix reveals no apparent lesions. The results of the Pap smear are consistent with cervical intraepithelial neoplasia (CIN) II. What is the major significance of this finding?
- A cervicitis needs to be treated.
 - She has an increased risk for cervical carcinoma.
 - Condyloma acuminata are probably present.
 - An endocervical polyp needs to be excised.
 - She needs to discontinue oral contraceptives.
- Q.42 A 58-year old female has had dull pain in the lower abdomen for the past 6 months, along with some minimal vaginal bleeding on three occasions. An abdominal ultrasound reveals a solid, 8-cm right adnexal mass. A total abdominal hysterectomy is performed, and the mass is diagnosed as an ovarian granulosa-theca cell tumor. Which of the following additional lesions is most likely to be seen in the surgical specimen?
- Condyloma acuminata of the cervix.
 - Bilateral chronic salpingitis.
 - Partial mole of the uterus.

- Q.44** A 35 years old female presents with heat intolerance, weight loss despite increased appetite. Gastrointestinal, hypermotility symptoms like and diarrhea. On examination a wide, staring gaze and lid lag are present. Her Laboratory workup reveals hyperthyroid status. Which of the following statements is consistent with the diagnosis?
- a) Autonomous functional nodules develop in long standing Multinodular Goiter
 - b) Grave's disease is characterized by the autoimmune destruction of the thyroid gland
 - c) Most follicular adenomas are functional
 - d) Biochemical evaluation includes Raised TSH and lowered T3 and T4
 - e) Thyroid storm is designate by abrupt onset of severe hypothyroidism
- Q.45** Which statement is justified regarding Thyroid carcinoma?
- a) Follicular carcinoma can be readily diagnosed by Fine Needle Aspiration Cytology
 - b) Papillary structures in papillary carcinoma are diagnostic
 - c) Follicular carcinoma is the most common variety
 - d) Anaplastic carcinoma is a slow growing neck mass in elderly
 - e) Medullary carcinoma is a key feature of MEN2
- Q.46** A 55 years old female complains of deep, aching pain exacerbated by use, morning stiffness, crepitus (grating or popping sensation in the joint), and limited range of movement in her left knee. Her calf muscles frequently go into spasms, a diagnosis of osteoarthritis is made. Which of the following statements goes more in its favour?
- a) Narrowing of joint space, subchondral sclerosis, cyst formation are important radiographic findings
 - b) Pain and stiffness worse in the morning is the only symptom
 - c) Inflammation is the main pathological feature
 - d) Shoulder and elbow joints are mainly involved
 - e) In early stages of the disease chondrocytes become atrophic
- Q.47** What is right regarding Primary Bone Tumours:
- a) They are more common than metastatic tumours
 - b) Most common site for osteosarcoma are the bones of the shoulder
 - c) Most bone tumours develop during the first several decades of life
 - d) Giant cell tumour rarely recurs after excision
 - e) Biopsy is the only diagnostic modality
- Q.48** A 40 years old male presents with sudden onset of pain, redness, and swelling of the right knee joint with restricted range of motion. Fever, leukocytosis, and elevated erythrocyte sedimentation rate are noted. He also gives history of a fall few days ago. Which of the following statements will help if the diagnosis is septic arthritis?
- a) Streptococcal bacteria are the most common causative agents
 - b) Therapy should be started immediately to avoid joint destruction
 - c) Joints are hot red, swollen but mobile
 - d) Treatment with Benzyl penicillin is indicated
 - e) Gonococcus infection is more prevalent in elderly
- Q.49** A 10 years old male presents with swelling left knee joint, fever, elevated erythrocyte sedimentation rate, anemia, and leukocytosis. X-rays show a destructive lytic tumor with infiltrative margins and extension into surrounding soft tissues. There is a characteristic periosteal reaction depositing bone in an onion-skin fashion. What is your diagnosis?
- a) Osteosarcoma
 - b) Chondroma
 - c) Ewing's sarcoma
 - d) Osteoma
 - e) Osteoblastoma

- Q.50** A 5 years old child comes to you for progressive weakness and wasting of muscle. A micrograph of his muscle biopsy is shown. What is your diagnosis?



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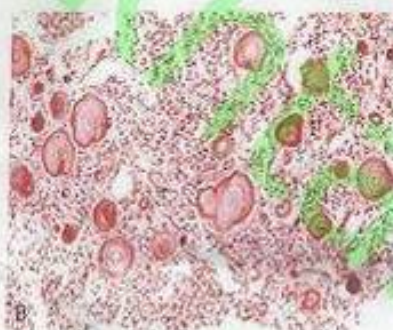
- a) Dermatomyositis
- b) Duchenne Muscular Dystrophy
- c) Polymyositis
- d) Inclusion body myositis
- e) Myotonic Dystrophy

- Q.51** A 40 years old male presents with lesions (shown below) on the skin of the elbows, the lesion is a well-demarcated, pink to salmon-colored plaque covered by loosely adherent silver-white scale. What is the most likely diagnosis:



- a) Lichen Planus
- b) Psoriasis
- c) Lichen Simplex Chronicus
- d) Squamous cell carcinoma
- e) Pemphigus vulgaris

- Q.52** A 40 years old female presents with weakness of her arm and severe headache. Her CT scan shows a mass attached to the dura with compression of underlying brain. Macro and microscopic pictures are given below. What is your diagnosis?



- a) Medulloblastoma
- b) Oligodendroglioma
- c) Meningioma
- d) Astrocytoma
- e) Gangliogliomas

- Q.53** A 25 years old female presents with relapsing and remitting episodes of unilateral visual impairment, ataxia, and disrupted conjugate eye movements, difficulties with the voluntary control of bladder function are also reported. Her CSF examination reveals mildly elevated protein level with an increased proportion of γ -globulin; there is moderate pleiocytosis. When the immunoglobulin is examined further, oligoclonal bands, representing antibodies directed against a variety of antigens are noted. In view of the above information, what is your diagnosis?
- a) Necrotizing hemorrhagic encephalomyelitis
 - b) Multiple Sclerosis
 - c) Leukodystrophies
 - d) Krabbe disease
 - e) Central pontine myelinosis

- c. haemorrhagic pericarditis
d. purulent pericarditis
e. serous pericarditis
41. Which of the following is the most likely cause of death in acute rheumatic fever?
a. Central nervous system involvement
b. Endocarditis
c. Myocarditis
d. Pericarditis
e. Streptococcal sepsis
42. Aschoff's nodule shows the presence of
a. Coagulation necrosis
b. Aggregation of lymphocytes
c. Multinucleated giant cells
d. Numerous plasma cells
e. Marked fibrosis
43. A 35 year female presented with pedunculated mass in the left atrium, microscopically it shows stellate cells in loose myxoid background. What is the most likely diagnosis?
a. chordoma
b. fibroblastoma
c. leiomyoma
d. Myxoma
e. Rhabdomyoma
44. A 45 year old male patient presented with cough, dyspnea, sweats and rigors with bronchial breath sounds on auscultation. Diagnosis can be confirmed by
a. Complete blood count
b. Gram stain and culture of sputum
c. Sputum for AFB
d. Blood gases
e. Bronchoscopy
45. Over several decades which of the following inhaled pollutants is most likely to produce extensive pulmonary fibrosis?
a. Silica
b. Tobacco smoke
c. Wood dust
d. Carbon monoxide
e. Ozone
46. A young male complains of episodic breathlessness, cough, wheezing and chest tightness, worse during spring season. Pathological findings will include?
a. Mast cell activation
b. Permanent enlargement of distal air spaces
c. Hemoptysis
d. Excessive lysis of elastin
e. Alpha-1 antitrypsin deficiency
47. The bronchoscopic biopsy shows non caseating granulomas with giant cell containing schaumann bodies and asteroid bodies. These features are most consistent with the diagnosis of?
a. Tuberculosis
b. Silicosis
c. Interstitial pneumonitis
d. Sarcoidosis
e. Fungal infection
48. A 65 year old male had left eye problem with endophthalmos, melosis and ptosis. A chest x-ray show upper lobe opacification. Which of the following conditions he is most likely to have?
a. Bronchopneumonia
b. Bronchiectasis
c. Bronchogenic carcinoma
d. Sarcoidosis
e. Tuberculosis
49. The most frequent esophageal malignancy is?
a. Adenocarcinoma
b. Fibrosarcoma
c. Leiomyosarcoma
d. Rhabdomyosarcoma
e. Squamous cell carcinoma
50. A large fungating mass protruding into the rectal lumen which on biopsy turns out to be an invasive malignant tumor composed of glandular structures is associated with?
a. Diverticulitis
b. Diverticulosis
c. Juvenile polyposis syndrome
d. Crohn's disease
e. Ulcerative colitis

Q.36 Retinoscopy is performed to:

- a) Examine the optic disc
- b) Examine the retina
- c) Examine the lens

- d) Assess refractive error
- e) Assess the visual field

Q.37 Regarding bacterial keratitis:

- a) Topical antibiotics are not effective
- b) Cultures are usually negative
- c) Typically dendritic ulcers are seen

- d) Pain, photophobia and blurred vision are the presenting complaints
- e) Contact lens wear is not a risk factor

Q.38 The best treatment for cataract is:

- a) Intracapsular cataract extraction
- b) Extracapsular cataract extraction with rigid intraocular lens
- c) Phacoemulsification with foldable lens implant

- d) Phacoemulsification without implant of intraocular lens
- e) It doesn't require treatment

Q.39 Regarding retinal surgery:

- a) Requires simple inexpensive equipment for vitrectomy
- b) Scleral buckling requires very expensive equipment
- c) Cryo treatment is done by using special laser

- d) Most operations are done under topical anesthesia
- e) Some operations may involve injecting silicone oil

Q.40 Laser treatment of the retina:

- a) Is done by argon laser
- b) May be complemented with Yag laser to treat coexisting retinal edema
- c) Is ineffective in proliferative diabetic retinopathy

- d) Has no role in treating diabetic macular edema
- e) May cause brain damage

Q.41 Retinal nerve fibers:

- a) Are the outermost layer of the retina
- b) Are more than 10 million in number
- c) Increase in diabetics

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- d) Have a very thin myelin sheath
- e) Loss leads to visual field loss

Q.42 Tractional retinal detachment:

- a) Occurs in diabetics
- b) Can be treated with laser only
- c) Is not sight threatening

- d) Scleral buckling is the best option
- e) Vitrectomy is contraindicated

Q.43 Retinoblastoma:

- a) Is most common childhood Benign tumor
- b) Never occurs before 5 years of age
- c) Presents with red pupil

- d) Enucleation is the only treatment
- e) Early cases may be treated with cryo or laser

Q.44 A cherry red spot at the macula is seen in:

- a) Central retinal vein occlusion
- b) Central retinal artery occlusion
- c) Retinopathy of prematurity

- d) Diabetic retinopathy
- e) Hypertensive retinopathy

Q.45 Regarding diabetic retinopathy:

- a) More common in type II diabetics
- b) Retinal neovessels are seen in proliferative retinopathy
- c) Hard exudates are absent

- d) Control of blood sugar level is of little significance
- e) Microaneurysms occur late in disease

- Q.11 A cataract in which liquefaction of the cortex has allowed the nucleus to sink inferiorly is called:
 a) Mature cataract
 b) Hyper mature cataract
 c) Morgagnian cataract
 d) Cortical cataract
 e) Christmas tree cataract
- Q.12 Normal tear film consists of:
 a) Three layers: mucin, aqueous, lipid
 b) Two layers: mucin and aqueous
 c) Is secreted by lacrimal ducts
 d) Is not essential for eye health
 e) Develops at six months of age
- Q.13 Retina consists of:
 a) Ten layers with pigment epithelium as outermost
 b) Ten layers with pigment epithelium as innermost
 c) Eight layers with nerve fibers as outermost
 d) Eight layers with nerve fibers as innermost
 e) Eight layers with vitreous as innermost
- Q.14 Extraocular muscles:
 a) Medial rectus abducts the eye
 b) Lateral rectus is supplied by the trochlear nerve
 c) Superior rectus is supplied by trochlear nerve
 d) Inferior rectus is supplied by abducent nerve
 e) Lateral rectus is supplied by abducent nerve
- Q.15 Near reflex consists of:
 a) Convergence, accommodation, pupillary constriction
 b) Convergence, accommodation, pupillary dilatation
 c) Divergence, accommodation, pupillary constriction
 d) Divergence, accommodation, pupillary dilatation
 e) Convergence and accommodation
- Q.16 Aqueous humor exits from the anterior chamber mostly through:
 a) The trabecular route
 b) The iris vessels
 c) Uveoscleral route
 d) The posterior chamber
 e) The corneal endothelium
- Q.17 Retinal blood supply:
 a) Central retinal artery supplies whole of the retina and choroid
 b) Macular blood supply comes solely from ciliary body
 c) Central retinal vein drains only the central retina
 d) Retinal ischemia may lead to neovascularization
 e) Vitreous normally has blood vessels in its periphery
- Q.18 Pilocarpine is:
 a) A prostaglandin analogue
 b) A parasympathomimetic
 c) Carbonic anhydrase inhibitor
 d) Alpha agonist
 e) A sympathomimetic
- Q.19 A 17 year old male presents with dendritic ulcer. The best medication is:
 a) Acyclovir ointment 5 times/day
 b) Acyclovir ointment once/day
 c) Chloramphenicol eye drops 2 hourly
 d) Atropine eye drops once daily
 e) Steroid eye drops. Five times a day
- Q.20 Retinitis pigmentosa:
 a) Is dominantly inherited retinal degeneration
 b) Is due to retinal pigment epithelium degeneration
 c) Causes night blindness
 d) Usually involves older patients
 e) Is treatable with retinal laser
- Q.21 A four year old child presents with fever, unilateral proptosis and pain. The most likely diagnosis is:
 a) Traumatic orbital hemorrhage
 b) Orbital cellulitis
 c) Thyroid eye disease
 d) Orbital tumor
 e) Advanced retinoblastoma invading the orbit
- Q.22 An abnormal protrusion of the globe is called:
 a) Pseudoproptosis
 b) Buphthalmos
 c) Orbital cellulitis
 d) Proptosis
 e) Enophthalmos

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- Q.11 A 30 year old female wearing +6 D glasses on both sides presents to the Emergency with a painful red eye. Her intraocular pressure is 30 mmHg, there is mild corneal edema and a ratio of 0.3, the angle is grade 1. What is the most useful topical drug in this patient?
- Brimonidine
 - Dorzolamide
 - Latanoprost
 - Pilocarpine
 - Timolol Maleate
- Q.12 A 20 year old boy presents with rapidly deteriorating visual acuity. On examination, he is found to have conical cornea and distortion of mires on a placido disc. What is the other most likely finding?
- Ferry ring
 - Fleischer ring
 - Kayser Fleischer ring
 - Stocker ring
 - Wessley ring
- Q.13 A 20 year old girl whose right eye was injured by a tree branch, now complains of pain in the eye. Examination shows a 4 mm circular yellow lesion in the center of her cornea. What is the most appropriate investigation of choice in this case?
- Biopsy
 - Cautery
 - Impression cytology
 - Scrapping
 - Swab
- Q.14 A 50 year old patient presents with painful red eye 2 days after Phacoemulsification with foldable intraocular lens implantation was done in her right eye. Examination shows a 2 mm hypopyon and the visual acuity is 6/60 in that eye. What is the treatment of choice in this patient?
- Intravenous Moxifloxacin
 - Intravitreal Ceftazidime
 - Subconjunctival Gentamycin
 - Subtenon Kenacort
 - Topical Gatifloxacin
- Q.15 A 20 year old girl develops reduction in Calcium levels after Parathyroid surgery. What type of cataract is she most probable to develop?
- Anterior polar
 - Cortical
 - Lamellar
 - Nuclear
 - Posterior subcapsular
- Q.16 A 10 year old boy presents with decrease in vision in both eyes. Examination shows that he has tall stature, high arched palate and his crystalline lens is displaced superiorly in both eyes. Which one of the following syndromes is most likely to cause this?
- Alport
 - Down
 - Marfan
 - Turner
 - Wells Marchesani
- Q.17 A 30 year old Diabetic patient presents with black floaters in front of his right eye. Examination revealed neovascularization at the disc and mild vitreous hemorrhage. Which one of the following procedures will you perform to treat this condition?
- Barrier laser
 - Focal laser
 - Grid laser
 - Laser ablation
 - Panretinal photocoagulation
- Q.18 A 40 year old female presents with sudden onset decrease in vision. Examination shows that she has extensive flame shaped hemorrhages all over the retina with dilated tortuous veins. What is the most likely predisposing factor for this disease?
- Diabetes Mellitus
 - Hypertension
 - Multiple Sclerosis
 - Rheumatoid Arthritis
 - Wegner's Granulomatosis
- Q.19 A 60 year old patient presents with sudden loss of vision and a central Scotoma. Examination reveals a greyish green lesion at the fovea. What is the most probable diagnosis?
- Drusen
 - Dry Macular Degeneration
 - Geographic Atrophy
 - Serous Retinopathy
 - Wet Macular Degeneration
- Q.20 A 30 year old female presents with gradual loss of vision. Her mother also suffers from the same condition. Examination shows black pigment outside the posterior pole in a bone spicule pattern. What type of visual field defects will you see?
- Ring Scotoma
 - Central Scotoma
 - Enface Scotoma
 - Siedel Scotoma
 - Wedge Scotoma



MBBS THIRD PROFESSIONAL
Ophthalmology
(Multiple Choice Questions)

Pages 04

Signature of Candidate

Roll No.

Total Marks: 45

Time Allowed: 1 hour

MCQ Paper ID B B F B 1 2 3 2 0 5 4 2

Instructions:

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S-2012

- Q.1 An eighty years old man is brought to eye OPD with painful red eye for the last one day. His IOP is 40 mmHg. He is diagnosed as lens induced glaucoma. What is the type of cataract which can cause such type of glaucoma:
- a) Nuclear cataract
b) Coronary cataract
c) Immature cataract
d) Cortical cataract
e) Hypermature cataract
- Q.2 A 30 years old lady who has been using some drugs for her spring catarrh for the last 5 years has developed complicated toxic cataract. What are the likely drugs to cause such a condition:
- a) Steroids drops
b) Sodium cromoglycate drops
c) Anti histamine drops
d) Antisthine privityne drops
e) Timolol drops
- Q.3 A 60 years old man complains of visual difficulty while driving at night. His visual acuity is 6/12 both eyes but he has been changing reading glasses quite frequently ocular media are clear. What clinical signs will help you in diagnosis:
- a) IOP
b) Cup disc ratio beyond 6
c) Visual fields changes
d) OCT
e) All of these
- Q.4 A 40 year old widow with hypermetropia C/o sudden pain in right eye with redness and reduced visual acuity. Her IOP is 60mmHg. Cornea is edematous and pupil is vertically oval and very sluggishly reacting. What is the pathogenesis of this type of glaucoma:
- a) Plate iris
b) Sclerosed episcleral veins
c) Iridocyclitis
d) Iridodonesis
e) Pupillary block
- Q.5 A 40 year old lady has acute congestive glaucoma. What is the operation of choice:
- a) Peripheral iridectomy
b) Peritomy
c) Paracentesis
d) Goniotomy
e) Sclerostomy
- Q.6 A 50 year old man is diagnosed as a case of open angle glaucoma. What is the drug of choice for medical control of this type of glaucoma:
- a) Epinephrine eye drops
b) Adrenaline eye drops
c) β blockers
d) Miotics
e) Mydriatics
- Q.7 A mother brings her 10 year old child with the complaint that the child has squint. What is the best method to prove the manifest squint:
- a) Hirschberg test
b) Cover test
c) Cover uncover test
d) Ocular motility
e) Refraction
- Q.8 A child has accommodative esotropia. What is the best option to investigate him:
- a) Hirschberg test
b) Ocular motility
c) Hess Chart test
d) Cover test
e) Cycloplegic refraction
- Q.9 A 15 year old student reports in the eye OPD with the complaint that he has reduced visual acuity in his right eye which he has noticed only 10 days back when he was hit in the face by a shuttle cock. The visual acuity in right eye is 6/60 and 6/6 in the left eye. Right eye examination does not reveal any abnormality except that the refractive error in the right eye is -14.00D with -2 prismatism at 160°. What is the diagnosis:
- a) Amblyopia
b) Astigmatism
c) Macular degeneration
d) Retrobulbar neuritis
e) Macular oedema

phacomorphic glaucoma

Painful Red Eye

- Keratitis
- Acute Congestive glaucoma

- Scleritis
- Corneal edema
- Iridocyclitis



MBBS THIRD PROFESSIONAL
Ophthalmology
(Multiple Choice Questions)

Page 1 of 4

Signature of Candidate

Roll No.

Total Marks: 45
Time Allowed: 1 hour

MCQ Paper ID

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- Q.1 **The layer of cornea in contact with aqueous humour is called?**
a) Epithelium
b) Descemet's membrane
c) Endothelium
d) Bowman
e) Stroma
3ma - mod layer
- Q.2 **Convergence is associated with which phenomenon?**
a) Dilation of the pupil
b) Relaxation of zonules
c) Miosis
d) Posterior synechae formation
e) Iris Bombe
- Q.3 **Parasympathetic fibers supplying the pupil originate from which nucleus?**
a) Red nucleus
b) Edinger Westphal nucleus
c) Caudate nucleus
d) Pontine nuclei
e) Reticular formation
- Q.4 **Red colour appreciation is a function of which part of the eye?**
a) Macula
b) Peripheral retina
c) Optic disc
d) Ora serrata
e) Pars Plana
- Q.5 **Thickening of the crystalline lens in diabetes will lead to which condition?**
a) Hypermetropia
b) Astigmatism only
c) Presbyopia
d) Amblyopia
e) Myopia
- Q.6 **Hard exudates in the retina are formed due to the accumulation of which material?**
a) Proteins
b) Lipids
c) Sugars
d) Calcium
e) Xanthophyll
- Q.7 **Depression of the eye in abduction is caused by which muscle?**
a) Superior Rectus
b) Inferior Rectus
c) Medial Rectus
d) Lateral Rectus
e) Inferior Oblique
border
- Q.8 **A 30 year old diabetic patient develops complete ptosis accompanied by mydriasis in his right eye. What is the most likely diagnosis?**
a) Horner syndrome
b) Meige Syndrome
c) Bell's palsy
d) III nerve palsy
e) Blepharospasm
- Q.9 **A 50 year old female patient with poorly controlled hypertension is seen by the internist. He is very concerned to find hard exudates on ophthalmoscopy and refers the patient to you for treatment. What will be your response?**
a) Argon Laser
b) YAG Laser
c) Control of Hypertension
d) Hyperlipidemia control
e) Intravitreal steroids.
- Q.10 **A 40 year old male is found to have intraocular pressure of 30 mm of Hg in the right eye. His cup to disc ratio is 0.4 on that side. Which pattern of visual field is likely to be seen if he is diagnosed with glaucoma?**
a) Central scotoma
b) Bjerrum scotoma
c) Enlargement of blind spot
d) Bitemporal hemianopia
e) Homonymous hemianopia

(Continued)

achment is:

- a) Detachment of neurosensory layer of retina
- b) Detachment of pigment epithelium
- c) Splitting of various retinal layers
- d) Detachment of retina from choroid

Associated with headache as classical feature of tractional RD

- e) Treated with intravenous Mannitol

Which of the following statement regarding Central serous retinopathy is correct:

- a) Is hereditary in nature
- b) Does not occur in males
- c) Causes total blindness
- d) Does not recur
- e) Fluorescein shows defect in bruch's membrane

Q.38 Retinoblastoma:

- a) Is a tumour of young children
- b) Arises from bipolar cells
- c) Does not spread to surrounding tissues
- d) Is not life threatening
- e) Can be treated with antifungal drugs

Q.39 A 38 years old male complains of headache, projectile vomiting and transient obscuration of vision for one year. On examination her both optic discs are swollen. What is the most probable cause?

- a) Raised intra ocular pressure
- b) Raised blood pressure
- c) Space occupying lesion inside cranium
- d) Space occupying lesion outside cranium
- e) Bell's Palsy

Q.40 In lesions of optic chiasma the visual field defect is:

- a) Bitemporal Hemianopia
- b) Ring scotoma
- c) Enlargement of Blind Spot
- d) Centrocoecal scotoma
- e) Siedle's scotoma

Q.41 Which of the following is the most important diagnostic sign of optic nerve disease?

- a) Mild decrease in visual acuity
- b) Afferent pupillary defect
- c) Redness of conjunctiva
- d) Disc hyperemia
- e) Raised intra ocular pressure

Q.42 Forced duction test is performed to diagnose which of the following:

- a) 6th nerve palsy
- b) Diplopia
- c) Restrictive myopathy
- d) Concomitant squint
- e) Stereopsis

Q.43 Parents bring a child of one year with complains of inward deviation since birth. Cover test and Hirschberg test show Right Esotropia 30 degrees. Ocular movements are normal and there is no refractive error. Which of the following is most likely diagnosis:

- a) Accomodative esotropia
- b) Sixth Nerve palsy
- c) Infantile Esotropia
- d) Congenital Exotropia
- e) Convergence Insufficiency

Q.44 The best and cheapest option for treatment of amblyopia is:

- a) Glasses
- b) Contact Lens
- c) Pleoptics
- d) Convergence exercises
- e) Occlusion

Q.45 Which statement is true about pinhole?

- a) It cuts off central rays of light
- b) A pencil of light passes through hole falling on fovea centralis
- c) In macular diseases vision is improved with pinhole
- d) If vision improves it implies that there is organic ocular pathology
- e) Can be used on permanent basis

MBBS THIRD PROFESSIONION
Ophthalmology
(Multiple Choice Questions)

Pages 04

Signature of Candidate

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Time Allowed: 1 hr.

MCQ Paper ID: B B F B 2 5 3 7 6 4 0 1

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- Q.1 A Patient is known for primary open angle glaucoma. Gonioscopy shows Grade III angle in all four quadrants. Which structures are visible on gonioscopy?
- Ciliary body *→ not visible*
 - Schwalbe's line and Trabecular mesh work *→ Grade II*
 - Trabecular mesh work and scleral spur
 - Schwalbe's line and Trabecular mesh work and scleral spur
 - Trabecular mesh work and scleral spur ciliary body
- Q.2 Which of the following is most likely origin of the Human Lens:
- Surface ectoderm
 - Neuro ectoderm
 - Mesoderm
 - Neural crest cells
 - Endoderm
- Q.3 Vascular Coat of the eye is:
- Retina
 - Sclera
 - Cornea
 - Ciliary body
 - Iveal track
- Q.4 In accommodation the main change occurs in the:
- Lens
 - Cornea
 - Sclera
 - Retina
 - Anterior Chamber
- Q.5 Scotopic vision is the property of:
- Amacrine cells
 - Cones
 - Bipolar cells
 - Rods
 - Optic Nerve fiber
- Q.6 What of the following is the true statement about corneal endothelial cells?
- They act as protective layer of cornea
 - They are responsible for corneal transparency
 - They form a bi-layer
 - They are always regenerating
 - They cannot proliferate beyond cornea
- Q.7 The strongest cycloplegic drug is:
- Tropicamide
 - Atropine
 - Adrenaline
 - Cyclopentolate
 - Homatropine
- Q.8 Mydriatics are used in uveitis for the following reasons:
- To prevent anterior synechiae
 - As anti inflammatory agent
 - To prevent and break posterior synechiae
 - To treat retinitis
 - To decrease aqueous flare.
- Q.9 A 14 years old boy has been diagnosed as a case of Retinitis Pigmentosa. What of the following may be the most important symptom of the patient:
- Far sightedness
 - Night blindness
 - Yellowness of eye
 - Redness of eyes
 - Near sightedness
- Q.10 A 5 years old girl has unilateral proptosis. On examination pulsation is present. Which of the following is most likely diagnosis?
- Orbital cellulitis
 - Dacryoadenitis
 - Pseudo tumour
 - Endocrine Exophthalmos
 - Saccular aneurysm of Ophthalmic artery

- Q.11 A 50 year old male is seen by your medical officer. His cup to disc ratio is 0.3 in both eyes and his visual fields are normal. He is concerned that the patient has glaucoma on checking the intraocular pressure. Which level of IOP in mm of Hg is diagnostic of glaucoma?
 a) 10
 b) 40
 c) 20
 d) 25
 e) 21
- Q.12 A 23 year old male is diagnosed to have Keratoconus in both his eyes. What is the cause of poor vision in his eyes?
 a) Excessive rubbing
 b) Fleischer Ring
 c) Haabs' Striae
 d) Munson sign
 e) Irregular Astigmatism
- Q.13 A 22 year old female presents with a painful red eye for the last two days. If she wears contact lens which condition is most likely to have?
 a) Uveitis
 b) Infective keratitis
 c) Angle closure glaucoma
 d) Scleritis
 e) Sty formation
- Q.14 A two year old patient is diagnosed with unilateral congenital cataract. Which condition is he likely to develop after cataract extraction without intraocular lens implantation?
 a) Amblyopia
 b) Night blindness
 c) Hypermetropia
 d) Retinoblastoma
 e) Hypopyon
- Q.15 An eight year old patient undergoes uncomplicated congenital cataract surgery. Post operatively he has poor vision and his fundus examination shows salt and pepper retinal appearance. Which infection caused this condition?
 a) Toxoplasmosis
 b) Hypercalcemia
 c) Vitamin D Deficiency
 d) Rubella infection of mother
 e) Malnutrition
- Q.16 A patient with mature cataract prolongs his cataract surgery for a long time. He presents one year later with sudden painful loss of vision. He is most likely to have?
 a) Phacomorphic glaucoma
 b) Blue dot cataract
 c) Sunflower cataract
 d) Cortical spokes
 e) Posterior capsule rupture
- Q.17 A 50 year old insulin dependent diabetic develops proliferative diabetic retinopathy. Which is the most likely cause of poor vision in this patient?
 a) Serous retinal detachment
 b) Sub-retinal neovascularisation
 c) Tractional retinal detachment
 d) Rhegmatogenous retinal detachment
 e) Papilloedema
- Q.18 Anti-Vascular endothelial Growth factor is used in the treatment of which condition?
 a) Rhegmatogenous Retinal detachment
 b) Retinitis pigmentosa
 c) Exudative diabetic maculopathy
 d) Tractional retinal detachment
 e) Dry macular degeneration
- Q.19 Tunnel vision develops in advanced form of which disease?
 a) Diabetic maculopathy
 b) Retinitis pigmentosa
 c) Rhegmatogenous retinal detachment
 d) Central retinal artery occlusion
 e) Wet macular degeneration
- Q.20 A five year old male patient is brought to you with rapidly growing retinoblastoma. Examination shows half fill of the eyeball. Which is most appropriate treatment?
 a) Enucleation
 b) Exenteration
 c) Cryotherapy
 d) External beam radiotherapy
 e) Argon laser therapy
- Q.21 Enlargement of the blind spot is seen in which condition?
 a) Retrobulbar neuritis
 b) Optic atrophy
 c) Retinal detachment
 d) Papilloedema
 e) Macular haemorrhage
- Q.22 Loss of goblet cells in Steven Johnson syndrome will lead to which condition?
 a) Epiphora
 b) Dry eyes
 c) Papillae formation
 d) Yellowish discharge
 e) Pus formation
- Q.23 A 50 year old alcoholic develops vitamin B₁₂ deficiency. He presents with progressive loss of vision in both his eyes. What is the most likely finding on fundus examination?
 a) Optic atrophy
 b) Papilloedema
 c) Central retinal vein occlusion
 d) Sub-retinal haemorrhage
 e) Exudative retinal detachment

- Q.35 A 40 year old female who has been complaining of severe headache and disturbance of vision for the last five days. Her visual fields show **enlargement of the blind spot**. What is the probable cause:
- a) ☒ Retrobulbar neuritis
 - b) ☐ Optic atrophy
 - c) ☐ Retinal detachment
 - d) ☐ Glaucomatous cupping
 - e) ☒ Papilloedema
- Q.36 A 50 year old male who has insulin dependent diabetes for the last 20 years develops proliferative diabetic retinopathy. The most likely cause of his blindness is:
- a) ☒ Tractional retinal detachment
 - b) ☐ Serous retinopathy
 - c) ☐ Vitreous detachment
 - d) ☐ Papilloedema
 - e) ☐ Retrobulbar neuritis
- Q.37 A 60 year old alcoholic who develops vitamin B deficiency presents with **progressive loss of vision**. What is the most probable cause of loss of vision:
- a) ☒ Optic atrophy
 - b) ☐ Papilloedema
 - c) ☐ Macular degeneration
 - d) ☐ Exudative retinal detachment
 - e) ☐ Central retinal vein occlusion
- Q.38 A 60 year old ill nourished male develops **pain on right forehead followed by blisters**. Corneal examination shows punctate keratitis and pseudodendrons. What is the most likely diagnosis:
- a) ☐ Herpes simplex keratitis
 - b) ☐ Fungal keratitis
 - c) ☐ Bacterial keratitis
 - d) ☐ Impetigo keratitis
 - e) ☒ Herpes zoster ophthalmicus
- Q.39 A 50 year old female complains of arthritis for the last two years. She suddenly develops pain and redness in right eye with **K.P.** at the back of cornea and constricted sluggishly reacting pupil. The most likely diagnosis is:
- a) ☒ Anterior uveitis
 - b) ☐ Ulcerative keratitis
 - c) ☐ Ch. Simple glaucoma
 - d) ☐ Herpes simplex keratitis
 - e) ☐ Acute congestive glaucoma
- Q.40 A 3 year child is brought with having **intermittent convergent squint**. He is advised cycloplegic refraction. What is the commonest likely diagnosis:
- a) ☐ Myopia
 - b) ☐ Astigmatism
 - c) ☐ Presbyopia
 - d) ☐ Emmetropia
 - e) ☒ Accommodative esotropia due to hypermetropia
- Q.41 A 7 year old male child has been advised surgery with residual accommodative esotropia. Which muscles will need recession to align the eye:
- a) ☐ Medial rectus recession
 - b) ☐ Lateral rectus recession
 - c) ☐ Inferior rectus recession
 - d) ☐ Medial rectus free tenotomy
 - e) ☐ Superior rectus recession
- Q.42 A 30 year old male with orbital cellulitis develops optic nerve compression with progressive loss of vision. The **optic nerve compression** can be checked by:
- a) ☐ Corneal reflex
 - b) ☒ Pupillary light reflex
 - c) ☐ Ptosis
 - d) ☐ Diplopia
 - e) ☐ Posterior synchiae
- Q.43 A young girl presents with advanced **Keratoconus** of the eye. Which is the best option for treatment:
- a) ☐ Spectacles
 - b) ☐ Soft contact lens
 - c) ☐ Excimer laser
 - d) ☐ Keratectomy
 - e) ☒ Keratoplasty
- Q.44 A 6 months old child is brought to eye department with the complaint of **big eye ball** with megalocornea. Since birth, child is photophobic and cornea appears to be big and hazy. What is the likely diagnosis:
- a) ☐ Buphthalmos
 - b) ☐ High myopia
 - c) ☐ High hypermetropia
 - d) ☐ Astigmatism
 - e) ☒ Keratoglobus
- Q.45 A 40 years old lady has had typhoid fever w/o redness, pain and watering in right eye. Corneal fluorescein stain shows a **branching ulcer**. What is the best treatment option:
- a) ☒ Mydriatic and antiviral drops
 - b) ☐ Miotics and antiviral drops
 - c) ☐ Simple antibiotic drops
 - d) ☐ Lubricant drugs
 - e) ☐ Antibiotics and mydriatics drops

- Q.24 A 20 year old male presents with chronic irritation in both his eyes. White Flaky material is seen on the eyelashes with hyperemia of the lid margin. What is the most likely diagnosis?
 a) Trichiasis
 b) Entropion
 c) Ectropion
 d) Blepharitis
 e) Epiblephron
- Q.25 A 30 year old farmer develops a triangular conjunctival growth encroaching on the cornea. His vision is slowly getting worse in that eye. What is the most likely diagnosis?
 a) Pinguecula
 b) Dellen
 c) Pterygium
 d) Papillae
 e) Follicle
- Q.26 A 15 year old female is prescribed topical mast cell stabilizers for the treatment of her chronic red eyes. What is most likely diagnosis?
 a) Bacterial conjunctivitis
 b) Pterygium
 c) Xerosis
 d) Allergic conjunctivitis
 e) Keratitis
- Q.27 A 50 year old female presents with painless swelling inferior to the medial canthal tendon. Positive regurgitation test will be seen in which condition?
 a) Mucocele
 b) Dermoid cyst
 c) Lacrimal sac tumour
 d) Sebaceous cyst
 e) Chalazion
- Q.28 A 40 year old hypermetrope is seen to have iris bombe. What will be the mechanism of raised intraocular pressure in this patient?
 a) Posterior synechiae formation
 b) Closure of angle
 c) Aqueous misdirection
 d) Swelling of the lens
 e) Hypopyon formation
- Q.29 A 60 year old male develops blisters on his right forehead. Corneal examination shows punctate keratitis. Which condition is most likely to produce this condition?
 a) Herpes simplex
 b) Fungal
 c) Bacterial
 d) Herpes Zoster
 e) Trachoma
- Q.30 A 50 year old patient with chronic red eye presents in the outpatients. Examination reveals cells in the anterior chamber with mutton fat keratic precipitates. What is the most likely diagnosis?
 a) Herpes simplex
 b) Tuberculosis
 c) Ankylosing spondylitis
 d) Bechet's disease
 e) Ulcerative keratitis
- Q.31 A 20 year old patient presents with decreased vision in both eyes. Examination shows bilateral interstitial keratitis with salmon patch appearance. What is the most likely diagnosis?
 a) Tuberculosis
 b) Syphilis
 c) Leprosy
 d) Herpes Simplex
 e) Herpes Zoster
- Q.32 A 35 year old male is involved in a car accident. He sustains blunt head trauma during the injury. He presents later in the eye outdoor with vertical diplopia. Which cranial nerve palsy can cause this condition?
 a) II
 b) III
 c) IV
 d) V
 e) VI
- Q.33 A three year old child is brought by his parents with Esotropia. He is advised cycloplegic refraction. Which condition is he most likely to have?
 a) Myopia
 b) Astigmatism
 c) Hypermetropia
 d) Presbyopia
 e) Emmetropia
- Q.34 A 10 year old female with esotropia is advised squint surgery to align her eyes. Resection of which muscle is needed?
 a) Medial rectus
 b) Lateral rectus
 c) Superior rectus
 d) Superior oblique
 e) Inferior rectus
- Q.35 A patient presents with dislocated lens in the inferior vitreous after trauma. Retinoscopy shows +10 D of refractive error. Which condition is likely to produce this?
 a) Pseudophakia
 b) Emmetropia
 c) Myopia
 d) Astigmatism
 e) Aphakia

(Continued)

- Q.38 Retinoblastoma:
 a) Is a tumour of old age *infants & young children*
 b) Arises from bipolar cells
 c) Does not spread to surrounding tissues
 d) Is not life threatening
 e) ☒ Arises from primitive retinal cells
- Q.39 A 26 years old female complains of headache, projectile vomiting and transient obscuration of vision for one year. On examination her both optic discs are swollen. Which of the following investigation should be done first?
 a) ☒ Intra ocular pressure measurement
 b) Intracranial pressure measurement
 c) Neuro imaging to rule out space occupying lesion
 d) Lumbar puncture for CSF examination
 e) Cerebral angiography
- Q.40 Visual field changes in optic neuritis is:
 a) Bitemporal Hemianopia
 b) Ring scotoma
 c) Enlargement of Blind Spot
 d) Centrocoecal scotoma
 e) Siedle's scotoma
- Q.41 Which of the following is the most important diagnostic sign for optic nerve disease?
 a) Mild decrease visual acuity
 b) ☒ Afferent pupillary defect
 c) Redness of conjunctiva
 d) Disc hyperemia
 e) Raised Intra ocular pressure
- Q.42 Which of the following simple test is performed to diagnose strabismus?
 a) Hess screen test
 b) Hirschberg's test
 c) ☒ Alternate Prism cover test
 d) Tangent screen test
 e) Forced duction test
- Q.43 A 3 years old child has 30 ΔD esotropia alternating between each eye. The inward deviation is more for near than for distance. Refraction shows + 6D Hypermetropia in each eye. Extra ocular muscle movements are normal. Name the type of squint:
 a) Paralytic squint
 b) Incomitant squint
 c) Accommodative-non refractive esotropia
 d) ☒ Accommodative refractive esotropia
 e) Non-accommodative Esotropia
- Q.44 Commonest refractive error causing paediatric squint is:
 a) ☒ Myopia
 b) Astigmatism
 c) Presbyopia
 d) Aphakia
 e) Hypermetropia
- Q.45 In retinoscopy at 1 M distance using a plane mirror, when mirror is moved to the right the shadow in pupil moves to the left, condition is:
 a) Hypermetropia
 b) Myopia more than 1 D
 c) Emmetropia
 d) ☒ Myopia less than 1 D
 e) Myopia of 1D

MBBS THIRD PROFESSIONAL
Ophthalmology
(Multiple Choice Questions)

Pages 04

Signature of Candidate

Roll No.

Total Marks: 45
Time Allowed: 1 hour

MCQ Paper ID: 80FA17345404

Instructions:

- Read the instructions on the MCQ Response Form carefully.
- Attempt all questions. Choose the Single best Answer for each question.
- Question Paper to be returned along with MCQ Response Form.
- Candidates are strictly prohibited to give any identification mark except Roll No. & Signature in the specified columns only.

Q.1 In a patient with keratoconus:

- a) The cornea is flatter than normal
- b) The cornea assumes an ectatic conical shape
- c) Corneal thinning is not a feature
- d) It occurs in elderly individuals
- e) Corneal diameter is larger than normal

Q.2 Regarding Cornea:

- a) Keratoconus is a progressive disorder
- b) Arcus senilis causes blindness
- c) Band keratopathy has cholesterol deposits
- d) LASIK treatment is for hypermetropia
- e) Radial keratotomy is meant to treat hazy corneas

Q.3 Uveal tissue refers to:

- a) Iris and ciliary body
- b) Iris and choroid
- c) Ciliary body and choroid
- d) Iris, ciliary body and choroid
- e) Choroid and retina

Q.4 Hypopyon refers to:

- a) Leakage of proteins into the anterior chamber
- b) Red blood cells in the anterior chamber
- c) Inflammatory cells that settle in the inferior part of the anterior chamber and form a horizontal level
- d) Lens matter in the anterior chamber
- e) Presence of keratic precipitates in the anterior chamber

Q.5 A young adult male presents with recent onset of pain, photophobia in his left eye. On examination there are cells in anterior chamber and small keratin precipitates on corneal endothelium. The vitreous is clear and retina appears to be normal. The most probable diagnosis

- a) Anterior uveitis
- b) Intermediate uveitis
- c) Posterior uveitis
- d) Panuveitis
- e) Vitritis

Q.6 Trabeculectomy is a surgical procedure to treat:

- a) Open angle glaucoma
- b) Angle closure glaucoma
- c) Lens induced glaucoma
- d) Congenital glaucoma
- e) Complicated glaucoma only

Q.7 A 65 years old patient presents complaining of decreased vision. On examination his cup disc ratio is increased. What investigation would be helpful?

- a) Angiography
- b) B scan
- c) Perimetry
- d) Keratometry
- e) Tonometry

Q.8 Neovascular glaucoma is likely to occur in:

- a) Rheumatoid arthritis
- b) Ankylosing spondylitis
- c) Central retinal artery occlusion
- d) Central retina vein occlusion
- e) Optic neuritis

Q.9 A 60 year old patient underwent cataract extraction. On 2nd post operative day he presented with lid swelling, pain and hypopyon. Treatment of choice would be:

- a) Systemic steroids
- b) Intravitreal steroids
- c) Intravitreal vancomycin
- d) Intravitreal cyclosporin
- e) Intravitreal vancomycin and amikacin

Q.10 After phaco cataract extraction the intraocular lens is implanted:

- a) Within the capsular bag of the crystalline lens
- b) Between the iris and the cornea
- c) Inside the cornea
- d) Over the crystalline lens
- e) Behind the crystalline lens

- Q.22 Accommodation is lost in:
 a) Glaucoma
 b) Myopia
 c) Astigmatism
 d) Aphakia
 e) Anisometropia
- Q.23 Bitemporal field loss is due to:
 a) Glaucomatous cupping
 b) Macular degeneration
 c) Optic neuropathy
 d) Lesions in the visual cortex
 e) Lesion in the optic chiasma
- Q.24 The drug of choice in vernal conjunctivitis (spring catarrh) is:
 a) Adrenaline eye drops
 b) Ephedrine eye drops
 c) Antisthine privity eye drops
 d) Sodium chromoglycate eye drops
 e) Lubricating eye drops
- Q.25 A 48 year old female suffers from tubular vision. His two elder sisters have been suffering from the same disease while her two brothers are normal and healthy. What is the most likely diagnosis:
 a) Vitamin A deficiency
 b) Glaucoma
 c) Macular dystrophy
 d) Pituitary adenoma
 e) Retinitis pigmentosa X linked
- Q.26 A 15 year old boy was hit by tennis ball on the right eye. Now he complains of diplopia and sunken eye. What is the most likely diagnosis:
 a) Blow out fracture of floor of the orbit
 b) Injury to the superior rectus muscle
 c) Injury to inferior rectus muscle
 d) Tear of the superior oblique
 e) Orbital haemorrhage
- Q.27 A 35 year old widow complains of bilateral prominent eyes since the death of her husband. She also complains of palpitation and sweating of hands for the last three months. What is the most probable diagnosis:
 a) Thyroid disease
 b) Ischemic heart disease
 c) Hypertension
 d) Anxiety neurosis
 e) Orbital cellulitis
- Q.28 A child is brought to the eye department with a palpebral acute pyogenic swelling on the lid margin since three days. How will you treat this case:
 a) Oral antibiotics
 b) Antibiotic injections
 c) Local antibiotics
 d) Drainage of the pus by pulling the cilium
 e) Antibiotics and analgesics
- Q.29 A 50 year old male presents with bilateral entropion of the upper lids due to chronic trachoma. What will be the procedure of choice in this case:
 a) Tarsectomy and eversion of the lid margin
 b) Strapping of the lids
 c) Sling operation of the lid
 d) Epilation of the cilia
 e) Electrolysis of the cilia
- Q.30 A mother brings his five months old child complaining of watering from right eye since birth. The diagnosis is blocked nasolacrimal duct of the right eye. What will be your advice to the mother:
 a) Wait for sometime and keep the eye clean and evacuate the lacrimal sac by pressure
 b) Have probing and syringing done immediately
 c) Immediate dacryocystorhinostomy
 d) Antibiotic drops
 e) Antihistamine drops
- Q.31 A 70 year old male presents with acute dacryocystitis of the right eye. What is the best treatment:
 a) Antibiotics
 b) Incision and drainage
 c) Dacryocystectomy
 d) Dacryocystorhinostomy
 e) Probing and syringing
- Q.32 A 50 year old farmer presents with progressive pterygium of the right eye which has led to astigmatism and blurring of vision. What will be your advice:
 a) Leave it alone
 b) Simple excision
 c) Excision with mitomycin
 d) Excision with cryo
 e) Excision with cautery
- Q.33 A 4 year old child has severe whooping cough and he presents with bilateral subconjunctival hemorrhage. What will be your advice?
 a) No treatment
 b) Drainage of subconjunctival haemorrhage
 c) Antibiotics to prevent secondary infection
 d) Vasoconstrictor drops
 e) Treatment of the whooping cough
- Q.34 A 5 year old male child is brought in the eye OPD with leuco-coria of right eye with a fungating mass in the orbit. What is the diagnosis:
 a) Retinoblastoma endophytum
 b) Retinoblastoma exophytum
 c) Basal cell carcinoma
 d) Orbital cellulitis
 e) Proptosis

A patient of acute iridocyclitis has come to you for second opinion about his treatment. Which of the following treatment options will be most suitable?

- a) Atropine eye drops and topical NSAID
- b) Atropine eye drops and Sub conjunctival steroid injection
- c) Mydriatic Eye drops and topical antibiotic
- d) Antiviral Eye drops and systemic steroids
- e) Atropine eye drops and topical steroids

A 35 years old female presented in emergency with left painful, red eye, watery discharge, vomiting and headache. On examination cornea is hazy. Anterior chamber markedly shallow with ciliary congestion. IOP is 60 mmHg. What stage of the disease is seen?

- a) Primary open angle glaucoma
- b) Primary closed angle glaucoma
- c) Chronic congestive glaucoma
- d) Acute congestive glaucoma
- e) Secondary open angle glaucoma

Q.26 What is the most common cause of Neovascular Glaucoma?

- a) Choroidal tumours
- b) Anterior segment ischemia
- c) Retinal ischemia
- d) Retinal detachment
- e) Uveal effusion

Q.27 Which of the following is definitive treatment of phacomorphic glaucoma?

- a) Peripheral iridectomy
- b) Cyclo cryo therapy
- c) Removal of lens
- d) Trabeculectomy with Mitomycin-C
- e) Use of oral anti-glaucoma medicine

Q.28 Which type of cataract is most commonly seen:

- a) Diabetic cataract
- b) Senile cataract
- c) Steroid induced cataract
- d) Traumatic cataract
- e) Paediatric cataract

Q.29 To calculate IOL power following procedure is employed:

- a) B scan
- b) Biometry
- c) Perimetry
- d) Indirect Ophthalmoscopy
- e) Tonometry

Q.30 A congenital cataract should be treated at:

- a) Puberty
- b) Two months
- c) As soon as detected
- d) School age
- e) 30 years

Q.31 A 55 years female presented with painless progressive loss of vision in her both eyes. On examination grayish white pupil with iris shadow is found reacting briskly. Indirect ophthalmoscopy indicates normal retina. What surgical procedure you think is best for her?

- a) Needling
- b) Irrigation and aspiration
- c) Intracapsular lens extraction
- d) Extracapsular lens extraction
- e) Phacoemulsification with IOL

Q.32 A 30 years male wearing 10D glasses (both eyes) complaining of sudden, painless loss of vision. It was gradual like falling of curtain before right eye. Patient also gives history of flashing lights on movement of eye since few days. What is the most likely diagnosis?

- a) CRAO
- b) CRVO
- c) Posterior vitreous detachment
- d) Rhegmatogenous retinal detachment
- e) Giant cell arteritis

Q.33 A 45 years old male hypertensive comes with complaint of sudden loss of vision in his left eye. Slit lamp examination does not show any abnormality in anterior segment. Media is clear while indirect ophthalmoscopy indicates pale retina with cherry red spot. What do you think he is suffering from?

- a) Central retinal vein occlusion
- b) Choroidal melanoma
- c) Central retinal artery occlusion
- d) Retinal detachment
- e) Retinal break

Q.34 A 45 years old diabetic male presents with sudden onset of diplopia in dextroversion. Which of the following extra ocular muscle is functionally compromised:

- a) Left medial rectus
- b) Left lateral rectus
- c) Right lateral rectus
- d) Right medial rectus
- e) Right superior oblique

Q.35 A forty five years old uncontrolled diabetic and hypertensive complains of sudden painless loss of vision in his right eye. The likely diagnosis is:

- a) Vitreous haemorrhage
- b) Optic neuritis
- c) Papilledema
- d) Retrobulbar neuritis
- e) Papillitis

- Q.36** A 30 year old uncontrolled diabetic develops bilateral painful proptosis with loss of consciousness. Which is the most likely diagnosis?
 a) Thyroid eye disease
 b) Ethmoiditis
 c) Myositis
☒ d) Cavernous sinus thrombosis
 e) Dermoid cyst
- Q.37** A patient with orbital cellulitis develops progressively loss of vision. Optic nerve compression in this patient can be checked by?
 a) Corneal reflex
☒ b) Pupillary light reflex
 c) Cataract formation
 d) Ptosis
 e) Diplopia
- Q.38** A 28 year old male presents with severe backache, reduced vision and ciliary congestion in the right eye. On examination he is found to have a hyopyon in that eye. He is most likely to have?
 a) Rheumatoid arthritis
 b) Ulcerative colitis
☒ c) Ankylosing spondylitis
 d) Vogt Koyanagi Syndrome
 e) Toxoplasmosis
- Q.39** A patient with acute anterior uveitis is prescribed treatment by the house officer. The patient develops permanent posterior synechiae on follow up. Which drug did he forget to prescribe?
 a) Pilocarpine
 b) Ciprofloxacin
 c) Fucidic acid
☒ d) Phenylephrine
 e) Cyclopentolate
- Q.40** A 30 year old patient develops decreased vision in both eyes progressively. Which drug is most likely to cause the formation of cataracts?
 a) Phenothiazines
 b) Antibiotics
 c) Anti-oxidants
☒ d) Osmotics
 e) ACE inhibitors
- Q.41** A 42 year old patient undergoes retinal re-attachment surgery for rhegmatogenous retinal detachment. Retinal breaks are sealed during the surgery with?
 a) Suturing of the retina
☒ b) Cryotherapy
 c) Cauterization
 d) Needling
 e) Tissue adhesives
- Q.42** A 30 year old female had enucleation for retinoblastoma in childhood. She is most likely to have which characteristic?
 a) Develop Obesity
 b) Should have cousin marriages
 c) Do not develop sarcomas
☒ d) Can transmit their disease in their child
 e) Are excessively tall
- Q.43** A 25 year old female is recently diagnosed with glaucoma. She will develop headache if she is prescribed?
 a) Atropine
 b) Pilocarpine
 c) Phenylephrine
 d) Cyclosporine
 e) Dexamethasone
- Q.44** A 60 year old male suffers a stroke due to uncontrolled hypertension. He is likely to develop loss of vision in the temporal half of the right eye and nasal half of left eye due to?
 a) Bitemporal hemianopia
☒ b) Right sided homonymous hemianopia
 c) Binasal hemianopia
 d) Left sided homonymous hemianopia
 e) Amaurosis fugax
- Q.45** A patient with chronic red eyes is prescribed olopatidine eye drops. Which condition is she most likely to have?
 a) Glaucoma
 b) Uveitis
 c) Cataract
☒ d) Allergic conjunctivitis
 e) Infective Keratitis

Which of the following treatment options are suitable for a known case of anterior uveitis?

- a) Atropine eye drops and topical steroid
- b) Atropine eye drops and topical NSAID agent
- c) Atropine eye drops and sub conjunctival steroid injection
- d) Atropine eye drops and topical antibiotic
- e) Atropine eye drops and systemic steroids

Q.25 A 50 years old male presented in emergency with left **painful red eye**, watery discharge vomiting and headache. On examination cornea is hazy. Anterior chamber markedly shallow with ciliary congestion. IOP is 60 mmHg. What should be done to right eye while left eye is being treated?

- a) Use of B-Blockers
- b) Laser iridotomy
- c) Latanoprost eye drops
- d) I/V Acetazolamide
- e) Trabeculectomy

→ Paphlogitic peripheral iridectomy

Q.26 In primary open angle glaucoma which part of the anterior chamber angle is basically diseased:

- a) Ciliary processes
- b) Ciliary body
- c) Trabecular meshwork
- d) Iris root
- e) Schwalbe's line

Q.27 A **six month old child** presents with bilateral big eye balls with hazy cornea. Child has watering from both eyes and is photophobic. Which of the following is most likely diagnosis?

- a) Ophthalmia neonatorum
- b) Megalocornea
- c) Buphthalmos
- d) Congenital anomaly of the eye ball
- e) Retinoblastoma

Q.28 Most common complication during Phacoemulsification is:

- a) Expulsive hemorrhage
- b) Corneal tear
- c) Posterior capsular rupture
- d) Retinal detachment
- e) Cystoid macular edema

Q.29 Which systemic condition is associated commonly with **Ectopia lentis**:

- a) Down's syndrome
- b) Marfan's syndrome
- c) Diabetes Mellitus
- d) Wilson's disease
- e) Neurofibromatosis type-1

Q.30 The cause of senile cataract is:

- a) Physiological aging process
- b) Diabetes Mellitus
- c) Tetany
- d) Trauma
- e) Hypercalcemia

Q.31 The modern treatment of senile cataract is:

- a) Needling
- b) Irrigation and aspiration
- c) Intracapsular lens extraction
- d) Couching
- e) Phacoemulsification with IOL

Q.32 Which of the following is hall mark of proliferative diabetic retinopathy:

- a) Cotton wool spots
- b) Vitreous haemorrhage
- c) Tractional retinal detachment
- d) New vessels formation
- e) Ischemic retina

Q.33 In which of the following conditions retina becomes pale?

- a) Central retinal vein occlusion
- b) Choroidal melanoma
- c) Retinal break
- d) Central retinal artery occlusion
- e) Intraocular foreign body

Q.34 **Comotio retinae** is caused by:

- a) Central Retinal Vein Occlusion
- b) Retinitis Pigmentosa
- c) Central Retinal Artery Occlusion
- d) Blunt ocular injury
- e) Macular hole

Q.35 A forty five year old uncontrolled diabetic and hypertensive complains of **sudden painless loss of vision** in his right eye. Which of the following is most likely diagnosis:

- a) Vitreous haemorrhage
- b) Optic neuritis
- c) Papilledema
- d) Retrobulbar neuritis
- e) Cataract

Q.36 Eales disease is:

- a) Congenital disease of the eye
- b) A hereditary disease of the eye
- c) A disease of old age
- d) Idiopathic periphlebitis of retinal vein
- e) The disease of females only

Q.37 Central serous retinopathy:

- a) Is hereditary in nature
- b) Does not occur in males
- c) Does not recur
- d) Does not recur
- e) Fluorescein shows defect in bruch's

(Multiple Choice Questions)

WB-III / 15 - A / 504 - 108 (2.15)

Total Marks: 45
Time Allowed: 1 hour

MCQ Paper ID

Student ID No.

Student Signature

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- Q.1 Which one of the following structures of the cornea DOES NOT regenerate if damaged?
- Bowman's membrane
 - Endothelium
 - Epithelium
 - Keratocytes
 - Corneal nerves
- Q.2 Corneal transparency is maintained by:
- Epithelial regeneration
 - Endothelial Na-K pump
 - Evaporation of tears
 - Gelatin in the stroma
 - Tight descemet membrane
- Q.3 Capsule of the human crystalline lens is thinnest at which one of the following locations?
- Anterior
 - Equator
 - Pre-equator
 - Posterior
 - Post-equator
- Q.4 During accommodation, changes occur in the human crystalline lens which leads to which one of the following changes in the zonules?
- Bending
 - Pulling
 - Relaxation
 - Straightening
 - Stretching
- Q.5 Vitamin A is an essential component of the Visual cycle as it combines with Scotopsin which is a:
- Lipid
 - Carbohydrate
 - Mineral
 - Lipoprotein
 - Protein
- Q.6 A 20 year old boy with -4 Dioptres of Myopia presents with sudden decrease in vision in the right eye. Examination shows a corrugated appearance of the retina with formation of bullae. What finding is most likely to be seen in this condition?
- Cotton wool spots
 - Drusen
 - Hard exudates
 - Horse shoe tear
 - Subretinal hemorrhage
- Q.7 The primary action of the superior oblique muscle in straight gaze is:
- Abduction
 - Depression
 - Elevation
 - Extorsion
 - Intorsion
- Q.8 A 30 year old male who had lid repair surgery done for surgical trauma complains of irritation in that eye on blinking. What can be the most common cause of this problem?
- Ectropion
 - Notching
 - Poliosis
 - Trichiasis
 - Wrinkling
- Q.9 A 40 year old Insulin dependent Diabetic patient presents with sudden onset decrease in vision in his right eye. On fundus examination, there is a large pre-retinal Hemorrhage, lots of cotton wool spots surrounding it and fine blood vessels on the optic disc. Which one of the following stages of Diabetic Retinopathy is this?
- Background
 - Exudative
 - Ischemic
 - Pre-proliferative
 - Proliferative
- Q.10 A 40 year old patient with family history of eye disease presents in the OPD. Fundus examination shows a cup to disc ratio of 0.8 in one eye. What type of visual fields would you expect in him?
- Altitudinal defect
 - Arcuate scotoma
 - Centrocecal scotoma
 - Enlarged blind spot
 - Pie in the sky

- Q.12 A row of posteriorly **misdirected eyelashes** originating from meibomian glands are called:
☒ a) Trichiasis
 b) Aplastic lashes
 c) Distichiasis
 d) Pseudo ptosis
 e) Madarosis
- Q.13 A 70 years old fair coloured man has a history of **nodule on lower lid near medial canthus** for the last four years. On examination base of the nodule is ulcerated, margins are raised and indurated. Which of the following is most likely the correct diagnosis?
☒ a) Basal cell carcinoma
 b) Squamous cell carcinoma
 c) Sebaceous gland carcinoma
 d) Haemangioma
 e) Xanthelasma
- Q.14 Evaporation of the tears is prevented by:
 a) Blinking reflex
 b) Epithellum of cornea
 c) Endothellum of cornea
☒ d) Aqueous layer of the tears
 e) Lipid layer of the tears
- Q.15 Dacryocystorhinostomy is a surgical procedure in which a passage is created between:
 a) Conjunctival sac and lacrimal sac
 b) Conjunctival sac and naso lacrimal duct
☒ c) Lacrimal sac and nasal cavity
 d) Nasal cavity and cranial cavity
 e) Conjunctival sac and nasal cavity
- Q.16 Which of the following conjunctivitis is sexually transmitted:
 a) Trachoma
☒ b) Adult Inclusion conjunctivitis
 c) Epidemic Kerato conjunctivitis
 d) Spring catarrh
 e) Angular conjunctivitis
- Q.17 A labourer who lives in a crowded unhygienic surrounding complains of itching and watering in both eyes. His visual acuity is 6/6 in both eye and he has **follicles on upper tarsal conjunctivae**. A **pannus** on the upper part of the cornea is also seen. Which of the following is the correct diagnosis:
 a) Membranous conjunctivitis
 b) Acute purulent conjunctivitis
 c) Acute follicular conjunctivitis
☒ d) Folliculosis
 e) Trachoma
- Q.18 A 23 years old **contact lens wearer** female presents with **painful left eye**. On examination there was **corneal lesion**, **ciliary congestion** and **hypopyon**. The **Gussein stain** of the lesion was positive. What should be the initial step in management?
 a) Immediately start antibiotics
 b) Discard contact lenses and use appropriate antibiotic
☒ c) Scraping of the corneal lesion
 d) Atropine Eye drops
 e) Eye pad
- Q.19 In chemical ocular injuries which of the following is the most important prognostic factor:
 a) Corneal abrasion
 b) Conjunctival tear
☒ c) Increased PH in anterior chamber
 d) Limbal Ischemia
 e) Optic nerve status
- Q.20 Simple corneal ulcer can best be diagnosed by:
 a) Torch examination
 b) Slit Lamp examination
 c) Visual disturbance
☒ d) Fluorescein staining
 e) Redness of the eye
- Q.21 The management of thick corneal opacity (Leucoma) is:
 a) Tattooing
 b) Corneal graft rotation
 c) Optical Iridectomy
☒ d) Lamellar keratoplasty
 e) Full thickness keratoplasty
- Q.22 A 20 years old boy came in eye OPD with the complaint of blurring of vision and photophobia in both eyes. He was on anti T.B. therapy for the last one week. Which of the following signs suggest that he had **granulomatous uveitis**?
☒ a) Circumcorneal congestion
☒ b) Sluggish pupillary reaction
☒ c) Mutton fat KPs.
 d) Small fine KPs. \Rightarrow Non-granulomatous Uveitis
 e) Posterior synechia
- Q.23 Posterior synechiae means:
☒ a) Adhesion of pupillary Iris to anterior surface of the lens
 b) Adhesion between Iris and Cornea
 c) Adhesion between anterior and posterior capsule of the lens
 d) Adhesion between the iris and trabecular meshwork
 e) Adhesion of the inflammatory cells to the anterior surface of the lens



MCQs THIRD PROFESSIONAL
Ophthalmology
(Multiple Choice Questions)

Pages 04

Signature of Candidate

Roll No.

Total Marks: 45
Time Allowed: 1 hour

MCQ Paper ID **B B F A 1 3 2 8 5 4 0 1**

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A-2013

- Q.1 Which of the following is most likely the origin of the Human Lens:
a) Surface ectoderm
b) Neuro ectoderm
c) Mesoderm
d) Neural crest cells
e) Endoderm
- Q.2 The Structure of eye ball consists of:
a) 2 layers
b) 5 layers
c) 3 layers
d) Single layer
e) 6 layers
- Q.3 The human sclera is:
a) Very Vascular
b) Semi transparent
c) Stony hard
d) Relatively avascular
e) Easily inflamed
- Q.4 The Aqueous humour is secreted by:
a) The pigment epithelium of iris
b) The endothellum of cornea
c) The ciliary epithellum
d) The stromal glands of ciliary body
e) The choroid
- Q.5 Photopic vision is the property of:
a) Amacrine cells
b) Cones
c) Bipolar cells
d) Rods
e) Optic Nerve fiber
- Q.6 In physiology of the vision both sensory and motor systems are involved. In the motor system extra ocular muscles are used for:
a) Accommodation
b) Illumination
c) Aligning the two foveae on to the object
d) Colour and direction of stimulus
e) Pupillary movements
- Q.7 In the list of given drugs which of the following is different on the basis of mode of action:
a) Tropicamide.
b) Atropine.
c) Pilocarpine.
d) Cycloper.
e) Homatropine.
- Q.8 Which of the following is the best option for treating postoperative acute endophthalmitis:
a) Fortified antibiotic topically.
b) Intravitreal antibiotic therapy.
c) Systemic antibiotic.
d) Intracameral antibiotic.
e) Pericocular antibiotic.
- Q.9 A patient with wilson's disease will present to eye department with following sign:
a) Kayser-Fleischer rings
b) Reduced vision
c) High myopia
d) Retinopathy
e) Frequent blinking
- Q.10 A 5 years old boy had sinusitis followed by ipsilateral lid swelling, proptosis and painful ophthalmoplegia. What dreadful complication may arise if the condition remains untreated?
a) Preseptal cellulitis.
b) Orbital cellulitis
c) Orbital abscess
d) Cavernous sinus thrombosis
e) Sub-periosteal abscess
- Q.11 In thyroid ophthalmopathy muscular involvement leads to:
a) Lymphadenopathy
b) Restrictive myopathy
c) Maxillary sinusitis
d) Optic nerve avulsion
e) Optic nerve avulsion

- Q.36 A 50 year old female presents with progressive forward protrusion of her right eye. On examination, the right eye is displaced 5 mm medially. What is the most probable diagnosis?
- Frontal mucocele
 - Optic nerve meningioma
 - Orbital floor fracture
 - Pleomorphic adenoma of lacrimal gland
 - Thyroid eye disease
- Q.37 A 30 year old patient presents with painful Proptosis of his right eye. His visual acuity is 6/36 in that eye. On CT scan, there is haziness in the right ethmoid sinus. What is the most appropriate oral treatment?
- Acetaminophen
 - Cefuroxime
 - Diclofenac
 - Ibuprofen
 - Steroids
- Q.38 A 30 year old patient presents with decreased vision in the right eye. Examination shows white cells floating in the anterior chamber. What other finding is likely to be seen in this patient?
- Filaments
 - Ghost cells
 - Guttata
 - Keratic precipitates
 - Red Blood Cells
- Q.39 A 40 year old patient presents with decreased vision in the left eye. On examination, there are multiple retinal hemorrhages in the peripheral superotemporal retina with whitening and constriction of retinal veins. What is the most probable underlying disease?
- Behcet disease
 - Diabetes Mellitus
 - Gout
 - Hypertension
 - Multiple Sclerosis
- Q.40 A 2 year old child is brought to eye OPD for decreased vision in the right eye. On examination there is leucoria in the pupillary area. B scan ultrasound shows clear vitreous and flat retina. The corneal diameter of the patient is 11mm. What is the most probable diagnosis?
- Cataract
 - Coat's disease
 - Primary Hyperplastic Vitreous
 - Retinoblastoma
 - Retinopathy of prematurity
- Q.41 A 3 year old child is brought to you with Leucocoria. On B scan ultrasound, there is large mass arising from the retina with calcification. Which one of the following is another mode of presentation of this disease?
- Amblyopia
 - Enophthalmos
 - Hyperoleon
 - Ptosis
 - Strabismus
- Q.42 A 20 year old boy with family history of night vision problems presents in the outpatient department. On examination there is bone spicule formation in the peripheral retina. Which one of the following is another feature of this disease?
- Chaiky white disc
 - Cupped disc
 - Hyperemic disc
 - Swollen disc
 - Waxy disc pallor
- Q.43 A 30 year old hypermetrope presents in the OPD with painful red eye with decreased vision. On examination, there is corneal edema and intraocular pressure is 40mmHg. Instillation of which one of the following drugs can lead to this condition?
- Latanoprost
 - Moxifloxacin
 - Natamycin
 - Pilocarpine
 - Tropicamide
- Q.44 A 30 year old female complains of persistent headache for the last one month. On MRI scan, there is an enlargement of the Pituitary gland. Which one of the following is the most likely pattern of visual field defect in this patient?
- Bilateral central
 - Bilateral inferonasal
 - Bilateral inferotemporal
 - Bilateral superonasal
 - Bilateral superotemporal
- Q.45 A 30 year old male comes for follow-up examination. His intraocular pressure is 20 mmHg and his cup to disc ratio is 0.8 in both eyes. He complains of shortness of breath since the last visit. Which one of the following medications can cause this problem?
- Brimonidine
 - Dorzolamide
 - Latanoprost
 - Pilocarpine
 - Timolol

- 100
- Q.23 A 2 year old boy presents with painful swelling of the right upper lid and marked erythema with complete Ptosis. There is no Proptosis. What is the most probable diagnosis?
- Chalazion
 - External Hordeolum
 - Orbital Cellulitis
 - Pre-septal Cellulitis
 - Stye
- Q.24 A 70 year old patient with hypertension complains of headache and decrease vision in both eyes. Computed tomograph shows a left sided parietal lobe lesion. What is the most likely visual field defect?
- Bilateral left inferior quadrantanopia
 - Bilateral left superior quadrantanopia
 - Bilateral right inferior quadrantanopia
 - Bilateral right superior quadrantanopia
 - Bitemporal hemianopia
- Q.25 A 20 year old girl presents in the OPD with swelling of both upper lids. There is watery discharge, follicular conjunctivitis and pre-auricular lymphadenopathy. What is the most likely diagnosis?
- Adenoviral conjunctivitis
 - Cytomegalovirus conjunctivitis
 - Herpes Simplex conjunctivitis
 - Inclusion conjunctivitis
 - Trachomatous conjunctivitis
- Q.26 A 10 year old boy presents to the OPD with swelling of the upper lid. On eversion of the upper lid, there is marked redness with cobblestone appearance of the Conjunctiva. There is no history of Eczema. What is the most probable diagnosis?
- Atopic conjunctivitis
 - Perennial conjunctivitis
 - Seasonal conjunctivitis
 - Toxic conjunctivitis
 - Vernal conjunctivitis
- Q.27 A 20 year old patient presents with a painless swelling below the right medial canthal tendon. The patient complains of slightly increased watering from that eye. What test will you perform to confirm your diagnosis?
- Pinch
 - Pin prick
 - Regurgitation
 - Snap
 - Transillumination
- Q.28 A 10 year old boy is brought by his parents with blue coloration of his sclera. On examination, his cornea is hazy and the diameter is 14 mm horizontally. What is the most probable diagnosis?
- Buphthalmos
 - Keratoconus
 - Megalocornea
 - Scleromalacia
 - Vitamin A deficiency
- Q.29 A 50 year old male presents with reduced vision and a red eye for the last one week. On examination, there is branching pattern ulcer in the middle of the cornea with reduced corneal sensitivity. What is the most appropriate topical treatment?
- Acyclovir
 - Bacitracin
 - Gentamycin
 - Moxifloxacin
 - Natamycin
- Q.30 A 30 year old male with lower backache for the last 1 year presents with sudden decrease in vision in the right eye. On examination, there are cells in the anterior chamber with 2 mm hypopyon formation. What is the most probable cause of this condition?
- Ankylosing Spondylitis
 - Osteoarthritis
 - Polymyalgia
 - Rheumatoid Arthritis
 - Reiter's Arthritis
- Q.31 A 20 year old girl presents with a painful red eye for the last 2 months. After treatment with topical Moxifloxacin, there is no improvement. Examination shows a 5 mm abscess with central 2mm of clear area. The anterior chamber is formed. What change has taken place in the abscess?
- Descemetocoele
 - Hydrops
 - Leucoma
 - Nebula
 - Perforation
- Q.32 An 8 year old girl is referred from her school for difficulty in reading. Examination shows inward deviation of the right eye and her visual acuity is 6/24 in right & 6/6 in left eye with spectacle correction of +6 in the right & +2 in the left eye. What is the most probable cause of her poor vision?
- Anisometropic Amblyopia
 - Convergent Amblyopia
 - Meridional Amblyopia
 - Sensory Amblyopia

A 70 years old man presents with in turned lower lid and irritation of the eye. The diagnosis and treatment is:

- a) Entropion with surgical correction
- b) Entropion with muscle relaxant
- c) Entropion treated with botulinum toxin
- d) Ectropion with surgical treatment
- e) Ectropion treated with muscle relaxants

Q.24 Ptosis is:

- a) Lowered upper eyelid
- b) Raised upper eyelid (retraction)
- c) Always associated with pupillary abnormalities
- d) Can be treated with beta blockers
- e) Can never be congenital

Q.25 A 70 year old woman presents with watering of right eye and a tender swelling at the medial canthus and side of the nose of acute onset. The diagnosis and treatment is:

- a) Acute dacryocystitis treated with antibiotics
- b) Acute dacryocystitis treated with steroids
- c) Acute dacryocystitis treated surgically
- d) Lacrimal gland tumor treated surgically
- e) Lacrimal duct tumor treated surgically

Q.26 The major bulk of tear film is composed of:

- a) Lipid layer from the meibomian glands
- b) Lipid layer from the goblet cells
- c) Aqueous layer secreted by lacrimal glands
- d) Mucin layer secreted by conjunctival goblet cells
- e) Both mucin and lipid layers

Q.27 An 8 years old boy presents in OPD with redness, watering and itching associated with sneezing and nasal discharge. Which medicine would work best?

- a) Mast cell stabilizers
- b) Pilocarpine
- c) Chloramphenicol
- d) Tropicamide
- e) Atropine

Q.28 Best treatment for bacterial conjunctivitis is:

- a) Acyclovir eye ointment
- b) Ciprofloxacin eye drops
- c) Atropine eye drops
- d) Steroid eye drops
- e) Timolol 0.5 % eye drops

Q.29 Herpes zoster ophthalmicus:

- a) Is caused by herpes simplex virus
- b) Affects skin and the eye
- c) Is a bilateral condition
- d) Is caused by pain in second division of trigeminal nerve
- e) Affects healthy middle aged females

Q.30 A 30 year old female presented with decreased vision in the right eye. On examination she has an afferent pupillary defect and swollen optic disc. The likely diagnosis and treatment is:

- a) Optic neuritis treated with steroids
- b) Optic neuritis needing antibiotics
- c) Papilledema needing MRI
- d) Papilledema needing steroids
- e) Papilledema needing cerebrospinal fluid drainage

Q.31 The 6th nerve palsy causes:

- a) Convergent squint and diplopia
- b) Divergent squint and diplopia
- c) Convergent squint without diplopia
- d) Head turn upwards
- e) Head turn downwards

Q.32 Visual sensation:

- a) Optic nerve carries visual sensation
- b) Optic nerve & oculomotor nerve carry visual sensation
- c) Oculomotor nerve is a sensory nerve 3rd, 4th & 6th cranial nerves
- d) All contribute to visual sensation
- e) 5th nerve is also an important carrier of visual sensation

Q.33 Hypertropia:

- a) Is upward deviation of the eyes
- b) Downward deviation of the eyes
- c) Cyclic movement of the eyes
- d) Extorsion of the eyes
- e) Intorsion of the eyes

Q.34 Examination of squint includes:

- a) Visual field examination
- b) Cover uncover test
- c) Nerve muscle studies
- d) Biopsy of the involved muscles
- e) Pachymetry

Q.35 Amblyopia means:

- a) Decreased vision in the absence of an organic disease
- b) Decreased vision due to squint only
- c) Decreased vision due to refractive error only
- d) A special type of nystagmus
- e) A special type of refractive error

UPMC BOOK SHOP

CA



**MBBS THIRD PROFESSIONAL
MODEL QUESTIONS FOR ANNUAL 2009**

Ophthalmology

(Multiple Choice Questions)

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- Q.1** A male of sixty years presented with progressive visual deterioration with perception of halos around light. Examination revealed IOP of 32 in Right Eye and 26 mm of Hg in Left Eye, open angle and 'snow flakes' like material on the surface of the lens. The possible diagnosis in this case would be:
- a) Pigmentary glaucoma
 - b) Pigment dispersion syndrome
 - c) Essential iris atrophy
 - d) Pseudo exfoliation glaucoma
 - ☒ e) Neovascular glaucoma
- Q.2** While playing with the child the mother sustained nail injury to the eye following which she developed pain, redness and intense watering from that eye. What is the most probable diagnosis of this case:
- a) Lid injury
 - b) Conjunctival ulcer
 - ☒ c) Corneal ulcer
 - d) Uveitis
 - e) Blow out injury
- Q.3** A young male sustained head injury during road traffic accident and a clot was removed from the left temporal lobe leading to partial dysfunction of the corresponding areas. Which of the following field defect is the characteristic for left temporal dysfunction:
- ☒ a) Right upper temporal
 - b) Right lower temporal
 - c) Right upper nasal
 - d) Right lower nasal
 - e) Central vision
- Q.4** A baby age one month is brought to the ophthalmic clinic with findings of haziness and slightly larger size cornea noted on both sides. What do you think is the probable diagnosis in this infant?
- a) Congenital rubella infection
 - b) Congenital Cataract
 - ☒ c) Congenital glaucoma
 - d) Light coloured Iris
 - e) Megalocornea
- Q.5** A young boy was presented in the eye clinic with blunt trauma to his left eye with a ball. There was a superficial corneal ulcer involving the inferotemporal quadrant of the cornea. Which of the following is the best management for this young boy:
- a) Use of antibiotic eye drops
 - ☒ b) Use of antibiotic eye ointment
 - c) Bandaged contact lens
 - d) Use of antibiotic and eye patching
 - e) No management required and it will heal by itself

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- Anisometropic Amblyopia
 - Emmetropic Amblyopia
 - Latent Amblyopia
 - Meridional Amblyopia
 - Sensory Amblyopia
- Q.33** A 6 year old child is seen on regular follow up. His visual acuity is 6/6 with +6 Dioptre glasses in both eyes. Eyes are straight with glasses and there is inward deviation of 30 degrees when the child is playing with his glasses off. What is the most probable diagnosis?
- Accommodative Esotropia
 - Amblyopic Esotropia
 - Infantile Esotropia
 - Latent Esotropia
 - Partial Esotropia

EYE 2015 MCQ KEY

1. Cataract (mcq as scanrio)
2. Diabetes
3. Hypertension --> retina with engorged, tortuous vessels
4. Protein (scotopsin)
5. Adenovirus (follicular conjct)
6. Lacrimal Adenoma (prominent eye with inward deviation type female)
7. Acyclovir for viral conjunc
8. Regurgitation in dacryo
9. Intorsion(so func)
10. Retrobulbar neuritis
11. Simple myopic astigmatism
12. With glasses(patching of normal eye)
13. Vernal catarrh(cobblestone appearnace)
14. Arcuate scotoma (glaucoma cup disc ratio 0.8)
15. wet macular degeneration
16. Trichiasis(f.b senstaion)
17. Strabismus(retinoblastoma presntation)
18. buphthalmous
19. Marfan syndrome(ectopia lentis)
20. Intravitreal injection after cataract complicaion
21. Ring scotoma(rp)
22. Waxy pallor(rp)
23. Sodium pump (transperancy)
24. Bowmens membrane dont regenerate
25. orbital cellulitis-->proptosis and painful eye
26. Supertemporal -> pitutry tumor
27. Right inferior quadra? petrous lob lesion
28. proliferative diabetic retinopathy
29. Photocoagulation
30. Spondylosis ankylosis
31. Feysheers ring
32. anisometropic amblyopia
33. Latent esotropia?
34. Relaxation of zonule in accomodation
35. Anterior part of lens(thinnest part)
36. Hypoparathyroidism: posterior subcapsular cataract
37. Scraping in corneal ulcers
38. Retina bulla -->horse shoe
39. Probing syringing in nldo
40. Glaucoma causing drug-->tropicamide
41. Drug Given in glaucoma-->Pilocarpine
42. Drug causing increased breathlessness-->Timolol
43. Desmetocele --> central area surrounding abcess
44. KP in flares
45. steroid



4. A 50 year old patient presents with painful red eye 2 days after Phacoemulsification with foldable intraocular lens implantation was done in her right eye. Examination shows a 2 mm hypopyon and the visual acuity is 6/60 in that eye. What is the treatment of choice in this patient?
- Intravenous Moxifloxacin
 - Intravitreal Ceftazidime
 - Subconjunctival Gentamycin
 - Subtenon Kenacort
 - Topical Gatifloxacin
5. A 20 year old girl develops reduction in Calcium levels after Parathyroid surgery. What type of Cataract is she most probable to develop?
- Anterior polar
 - Cortical
 - Lamellar
 - Nuclear
 - Posterior subcapsular
6. A 10 year old boy presents with decrease in vision in both eyes. Examination shows that he has tall stature, high arched palate and his crystalline lens is displaced superiorly in both eyes. Which one of the following syndromes is most likely to cause this?
- Alport
 - Down
 - Marfan
 - Turner
 - Weill Marchesani
17. A 30 year old Diabetic patient presents with black floaters in front of his right eye. Examination revealed neovascularization at the disc and mild vitreous hemorrhage. Which one of the following procedures will you perform to treat this condition?
- Barrier laser
 - Focal laser
 - Grid laser
 - Laser ablation
 - Panretinal photocoagulation
18. A 40 year old female presents with sudden onset decrease in vision. Examination shows that she has extensive flame shaped hemorrhages all over the retina with dilated tortuous veins. What is the most likely predisposing factor for this disease?
- Diabetes Mellitus
 - Hypertension
 - Multiple Sclerosis
 - Rheumatoid Arthritis
 - Wegner's Granulomatosis
19. A 60 year old patient presents with sudden loss of vision and a central Scotoma. Examination reveals a greyish green lesion at the fovea. What is the most probable diagnosis?
- Drusen
 - Dry Macular Degeneration
 - Geographic Atrophy
 - Serous Retinopathy
 - Wet Macular Degeneration
20. A 30 year old female presents with gradual loss of vision. Her mother also suffers from the same condition. Examination shows black pigment outside the posterior pole in a bone spicule pattern. What type of visual field defects will you see?
- Ring Scotoma
 - Central Scotoma
 - Bjerrum Scotoma
 - Siedel Scotoma
 - Wedge Scotoma
- A 25 year old female complains of sudden decrease in vision in the right eye. Her vision is 6/60 and relative afferent pupillary defect is present in that eye. There is no history of drug intake. Fundus examination is within normal. What is the diagnosis?
- Neuroretinitis
 - Papillitis
 - Papilloedema
 - Retrobulbar Neuritis
 - Toxic Optic Neuropathy
- A 1 year old infant is brought by her parents for Epiphora in the right eye. On examination, the regurgitation test is positive. What is the most appropriate treatment?
- Conjunctivorhinostomy
 - Dacryocystorhinostomy
 - Lacrimal intubation
 - Lester Jones tube
 - Probing and syringing

- Q.10 A young female who has been complaining headache for the last 3 months now C/S is disturbed. The visual fields reveal bitemporal hemianopia. Which part of the visual pathway is involved?
 a) Retina
 b) Optic nerve
 c) Optic tract
 d) Optic chiasma
 e) Optic radiation
- Q.11 A young lady who suffers disseminated sclerosis complains of sudden loss of vision in right eye. Her visual acuity in right eye is 6/60, left eye is 6/6. Right optic disc shows slight temporal pallor. Other examination is normal. What is the probable diagnosis?
 a) Retrobulbar optic neuritis
 b) Neurosis
 c) Amblyopia
 d) Papilloedema
 e) Macular degeneration
- Q.12 A young factory worker reports that while working on a grinding wheel with iron rod, something has gone into his eyes. The x-ray reveals a radio-opaque foreign body lodged in the retina. He refuses treatment. What is the most long term complication he is likely to suffer from retrained intraocular iron F.B.?
 a) Corneal staining
 b) Vitreous hemorrhage
 c) Complicated cataract
 d) Hyphaema
 e) Siderosis bulbi
- Q.13 A child who has been looking at the solar eclipse now complains of visual disturbance. What is the likely ocular injury he has suffered?
 a) Corneal burn
 b) Iris burn
 c) Cataract
 d) Vitreous liquefaction
 e) Macular burn
- Q.14 A 70 years old man who has history of operation on one eye and has been given glasses recently complains of diplopia. On examination the right anterior chamber appears to be deep. What is the probable cause of his deep anterior chamber?
 a) Myopia
 b) Megalcornea
 c) Keratoconus
 d) Aphakia
 e) Post synaedic
- Q.15 A 20 years young male complains of pain, redness and watering with reduced visual acuity in his right eye. On examination, he has slight swelling of lids with circumcorneal congestion, flare and cells in the anterior chamber with fine keratic precipitate at the back of cornea. His blood serology is negative he has no other complaint. The treatment options are:
 a) Mydriatic and steroid drops
 b) Micotics and acetazolamide tablets
 c) Micotics alone
 d) Mydriatics alone
 e) Antibiotic drugs
- Q.16 A child has congenital cataract. This type of cataract is usually due to:
 a) Malnourishment of mothers
 b) Premature delivery
 c) Obstructed labour
 d) Mothers suffering from rubella during pregnancy
 e) Diabetic mothers
- Q.17 A 40 years old man presents with unilateral cataract. He is having difficulty in driving. He has been advised operation for his cataract. Which is the best procedure to help him?
 a) Intracapsular lens extraction and contact lens
 b) Extra capsular lens extraction and contact lens
 c) Intracapsular lens extraction and 10L
 d) Curette evacuation and contact lens
 e) Phacoemulsification and 10L
- Q.18 The most vascular structure of the eye ball is:
 a) Retina
 b) Sclera
 c) Conjunctiva
 d) Iveal tract
 e) Limbus
- Q.19 Aqueous humor is secreted by:
 a) Iris
 b) Ciliary body
 c) Choroid
 d) Trabecular meshwork
 e) Episcleral veins
- Q.20 Retinal artery is a branch of:
 a) Internal carotid artery
 b) External carotid artery
 c) Ophthalmic artery
 d) Vertebral artery
 e) Middle meningeal artery
- Q.21 Colour perception is property of:
 a) Rods
 b) Bipolar cells
 c) Optic nerve fibers
 d) Neuroglial cells of retina
 e) Cones

years old boy had tennis ball trauma and on examination it was diagnosed as **blow out fracture**. Which one of the following symptoms is worst for the patient:

- a) Enophthalmos
b) Black eye
c) **Diplopia**
d) Sub conjunctival hemorrhage
e) Periorbital emphysema
- Q.12 Painful nodule on right upper lid associated with lid swelling may be caused by:
a) Basal cell papilloma
b) Squamous cell papilloma
c) Xanthelasma
d) **Stye**
e) Chalazion
- Q.13 An 80 years old farmer has a history of nodule on lower lid near medial canthus for the last two years. On examination base of the nodule is **ulcerated, margins are raised and indurated**. The expected diagnosis would be?
a) **Squamous cell carcinoma**
b) Sebaceous gland carcinoma
c) Capillary Haemangioma
d) Neurofibroma
e) Basal cell carcinoma
- Q.14 Mother brings a 4 months female child with complaint of watering right eye since birth. Regurgitation test is positive while the nasal examination is normal. The obstruction lies in the:
a) Lower punctum
b) Lower canaliculus
c) Common canaliculus
d) **Nasolacrimal duct**
e) Upper punctum and canaliculus
- Q.15 A patient suffering from acute dacryocystitis needs the following immediate treatment:
a) Incision and drainage
b) **Antibiotics and Analgesics**
c) DCR
d) Probing and syringing
e) Dacryocystectomy
- Q.16 **Herbert's pits** are pathognomonic of:
a) Vernal Kerato-conjunctivitis
b) Gonococcal conjunctivitis
c) Adeno viral kerato-conjunctivitis
d) **Trachoma**
e) Rhino conjunctivitis
- Q.17 What is the term used for a **foamy white triangular patch** on the temporal side of bulbar conjunctiva in a person with some **nutritional deficiency**?
a) Concretion
b) Epithelioma
c) Pinguecula
d) Tranta's dot
e) **Bitot spot**
- Q.18 You have a call from intensive care unit for a comatose patient with red eyes. On examination you observed partially closed eyes and bilateral corneal ulcers. This patient has:
a) Neurotrophic keratopathy
b) **Exposure keratopathy**
c) Dry eyes
d) Dendritic ulcer
e) Keratoconus
- Q.19 The most dreadful complication of a non healing corneal ulcer is:
a) Corneal opacity
b) Adherent leucoma
c) Descemetocoele
d) Hypopyon
e) **Corneal perforation and panophthalmitis**
- Q.20 A farmer presented in eye OPD with history of trauma to left eye with shoot of a tree 7 days back. On examination typical satellite lesions were seen in the cornea. What is the most probable diagnosis:
a) Acanthamoeba keratitis
b) Herpes simplex keratitis
c) Herpes zoster keratitis
d) Bacterial keratitis
e) **Fungal Keratitis**
- Q.21 Phlyctenular Keratoconjunctivitis is due to:
a) Exogenous allergy
b) **Endogenous allergy**
c) Direct bacterial infection
d) Viral infection
e) Fungal infection
- Q.22 A 30 years old male came in eye OPD with the complaint of blurring of vision and photophobia both eyes. He was on ar B. therapy for the last one week. Which of the following signs suggest that he had **granulomatous uveitis**?
a) Circumferential Congestion
b) Sluggish pupillary reaction
c) **Small fine KPs.**
d) **Mutton fat KPs.**
e) Posterior synechia
- Q.23 A 25 years old lady presented with pain and redness and loss of vision in her right eye. On examination findings **adhesion of pupillary iris to anterior surface of the lens** was found. What is this sign called as?
a) Hypopyon
b) Hypphema
c) Pannus
d) Anterior synechia
e) **Posterior synechia**