**Anatomy**

1. Cystic artery is a branch of
	1. Common hepatic
	2. Right hepatic
	3. Left hepatic
	4. Gastroduodenal
	5. Left gastric
2. Stomach is supplied by
	1. Short gastric artery
	2. Left GA
	3. Sup pancreaticoduodenal
	4. Right G epiploieic
	5. Inf pancreatico duodenal
3. regarding pituitary gland
	1. sphenoidal air sinus lie inf to it
	2. supplied by ICA
	3. sept from third ventricle by pars art
	4. lies within the sella turcica
	5. hangs down from 3rd ventricle
4. true about trachea is
	1. lies post to oesophagus
	2. cranine reach to T6 in deep respi
	3. left bronchus is wide & obtuse than right
	4. arch of aorta is anterior to trachea
	5. supplied by branch of vagus nerve
5. true about female pelvis A/E
	1. acute suprapubic angle
	2. wide and shallow true pelvis
	3. narrow sacrosciatic notch
	4. gracious and lighter bone
6. physiological calcification is seen in
	1. choroid plexus
	2. pineal gland
	3. lens
	4. basal ganglion
7. tracts of post column
	1. spino rubral
	2. tract of gracilis
	3. spino cerebellar
	4. lat spinothalamic
	5. tract of cuniatus

**Physiology**

1. BMR in a 40 kg man is
	1. 1000 K
	2. 1500 K
	3. 2000 K
	4. 2500 K
	5. 3000 K
2. True about BMR
	1. starvation decreases BMR by 50%
	2. starvation increases BMR
	3. independent of hormonal influence
	4. independent of energy expenditure
3. All hormones increase after trauma
	1. Adrenaline
	2. Insulin
	3. ACTH
	4. Glucagon
	5. Aldosterone
4. Ca+2 metabolism organs do not take part
	1. Skin
	2. Lung
	3. Spleen
	4. GIT
	5. Renal
5. thyroxin is carried by
	1. globulin
	2. pre albumin
	3. transferrin
	4. ceruloplasmin
	5. albumin
6. hyperkalemia is seen in
	1. in sec mets to bone
	2. m.myeloma
	3. hyper parathyroidism (primary)
	4. thyrotoxicosis
7. functions of basal ganglion
	1. co-ordination of sensory function
	2. co-ordination of motor function
	3. planning and motor co-ordination
	4. short term memory
8. CO2 retention is seen in
	1. Mountain climbing
	2. CO poisoning
	3. Respi failure
	4. Lung failure
	5. Drowning

**Biochemistry**

1. all are used for separating protein acc to size
	1. iron exchange chromatograph
	2. high performance chromatograph
	3. affinity chromatograph
	4. SDS poly ceramide gel electrophoresis
	5. Electrophoresis
2. reducing sugar in urine found in
	1. fanconis
	2. lactose intolerance
	3. galactosemia
	4. phenylketonuria
	5. salicylate poisoning
3. western blot test is
	1. for proteins using nitrocellulose
	2. for DNA
	3. for RNA
4. Gluconeogenic key enzymes are
	1. Pyruvate carboxylase
	2. Fructose 1,6 biphosphate
	3. phosphoglucomutaze
5. phopholipid in cell have following functions except
	1. cell-cell recognition
	2. signal transduction
	3. DNA repair
6. iron containing enzymes
	1. peroxidase
	2. SOD
	3. Glutathione peroxidase
	4. Cytochrome
7. gene therapy technic used
	1. electrofocussing
	2. electrooperation
	3. intranuclesr injection
8. Regulation of TCA Cycle is by
	1. ATP
	2. Acetyl coA
	3. CoA
	4. Citrate
	5. NADH
9. True about genes coding for light & heavy chains
	1. \*\*\*\*
	2. \*\*\*\*\*
10. Egg shell calcification seen in
	1. Silicosis
	2. Sarcoidosis
	3. Bronchogenic Carcinoma
11. Palindrome is
	1. highly repetitive
	2. local symmetry
	3. local asymmetry
	4. site of action of restriction endonuclease

**Pathology**

1. Nephrotic syndrome occurs in
	1. gold
	2. Amphotericin B
2. Renal vein thrombosis seen in
	1. MCP
	2. Membranous
	3. Amyloid
	4. Post streptococcal GN
	5. HUS
3. pericarditis is seen in all except
	1. amidrione
	2. procainamide
	3. brytellium
	4. methyserzide
	5. hydralizine
4. all of the following pigments are seen in hepatocytes except
	1. iron
	2. bile pigments
	3. lipofuschine
	4. pseudomelanine
	5. malaria pigments
5. von villibrand disease is diagnosed by
	1. BT
	2. APTT
	3. APTT + BT + VIIIc: roc cofactor
	4. Prothrombin time
	5. CT
6. multiple mycloma shows
	1. preformed increase B cell in marrow
	2. B cell in settle in pl marrow
7. vegetation of RHD
	1. along closure of values
	2. calcification of mitral annular ring
	3. monoclonal proliferation of B cell in matured state
	4. monoclonal proliferation of B cell in early stage
8. AFP- is increased in
	1. Ca prostate
	2. Ca liver
	3. Ca colon
	4. Ca lung
	5. Germ cell tumor
9. mitochondrial abnormality
	1. oncocytomas
	2. mitochondrial dystrophies
10. glycogen storage disease are
	1. von gerkeis
	2. fabrys
	3. macarld’s
	4. krabbes
11. rib notching is seen in
	1. marfans syndrome
	2. coarctation of aorta
	3. blalock Taussing shunt
	4. Aneurysm arch of aorta
12. klinefelter syndrome
	1. 47 XXY
	2. mental retardation
	3. hypogonadism
	4. ↑ FSH
13. turner syndrome true is
	1. XO
	2. Cubitus valgus
	3. Subnormal intelligence
	4. Streek ovaries
	5. Shield chest with ill develop breast
14. gene imprinting is
	1. paternal slicing
	2. maternal slicing
	3. prader villi syndrome
	4. angelmans syndrome
15. features of mesothelioma
	1. Microvilli
	2. Desmosomes
16. True about Bronchiolitis obliterans
	1. protinaceous exudates
	2. fibrinous exudates
17. Following are true of Sarcoma botyroides
	1. c layer seen
	2. grape like appearance
	3. associated with DES consumption in pregnancy
18. Thrombotic microangiopathy most likely resembles
	1. Diabetes
	2. Malignant Hypertension
	3. Acute Graft rejection

**Pharmacology**

1. cefepine
	1. is a IVth generation cephalosporin
	2. on O.d dose
	3. Pro drug
	4. Dose decreases in liver failure
	5. Active against pseudomonas
2. β-blocker + CCB causes
	1. AV block
	2. hypotension
	3. Ppt CCF
3. in acute severe asthma which can be given to induce sleep
	1. nitrazepam
	2. morphine
	3. phenobarbitone
	4. choral hydrate
	5. all hypnotics are safe
4. mefiprestone is
	1. also called RU-486
	2. it is a non steroid 21 progestone
	3. used as inter captive
	4. used for menstrual regulation
5. teratogenic drugs are
	1. heparin
	2. warfarin
	3. phenytoin
	4. valproate
	5. steroids
6. safe in pregnancy
	1. Rmy
	2. INH
	3. Ethambutol
	4. Streptomycin
	5. pyrizinamide
7. K + sparing diuretics
	1. Amiloride
	2. Spironolactone
	3. Triamterene
8. metabolic alkalosis is caused by
	1. acetazolomide
	2. spironolactone
	3. bemetemide
9. NO is
	1. Vasoconstrictor
	2. Used in pul HTN
	3. Sympathomimetics
	4. Decreases MAC of desoflurane
10. methicillin resistant staph is treatment by
	1. vancomycin
	2. ampicillin clavulonic acid
	3. cephalosporins
	4. ciprofloxacillin
	5. naladixic acid
11. Drugs used in attention deficit disorder
	1. Imipramine
	2. Methylphenidate
	3. Amphetamine
12. Drugs effective against S typhi
	1. Tetracycline
	2. Clotrimazole
	3. Ciprofloxacin
13. Drugs causing pigmentation
	1. Minocycline
	2. Clofazamine
	3. R Cin
	4. Phenytoin
	5. Hydroxyurea

 **Microbiology**

1. young male presents with diarrhoea and pus cells, following causes
	1. E.toxigenic coli
	2. E.invasive coli
	3. Shigella
	4. V.cholera
	5. El-tor cholera
2. true about anthrax
	1. humans are relatively resistant
	2. less no of spores sufficient for pulmonary anthrax
	3. primarily disease of carnivorous animals
	4. mac fadyen reactions is characteristic capsular swelling reactions
3. all are zoonotic except
	1. brucellosis
	2. leptospirosis
	3. anthrax
	4. typhoid
	5. Q-fever
4. taxonomically this is a bacteria
	1. chlymidia
	2. rickettsia
	3. bacteriophage
	4. prion
	5. mycoplasma
5. staphylocci found in stools in large number in
	1. staph food poisoning
	2. TSS
	3. Ischiorectal abscess
	4. Is a normal phenomenon
	5. As a commensal
	6. Pseudomembraneous colitis
6. culture of causative organisms from lesion can be done from
	1. diptheria from myocarditis
	2. meningoccus from skin lesions (pustules)
	3. CSF in tetanus
	4. Staph from rheumatic valve
7. hydatid cyst is caused by
	1. E. granulosus
	2. E.multilocularis
	3. T.solium
	4. T.saginata
8. larva in stool are seen in case of
	1. A.duodenale
	2. N.Americans
	3. Strongyloides
	4. Trichuris trichura
9. chlamydia is cultured in
	1. Hel 2
	2. Hela
	3. Me Coy cell
	4. kidney
	5. human fibroblast
10. di george syndrome shows
	1. decreased T cells in paracortial areas of lymp node
	2. decreased t cells in red pulp
	3. facial dymorphim
11. secretory IgA
	1. by epithelial cells
	2. by plasma cells
12. Media for TB Bacilli are
	1. LJ medium
	2. Dorset

**Forensic**

1. Pin point pupil is seen in
	1. Morphine
	2. OP poisoning
	3. Dhatura poisoning
2. PM staining disappears on
	1. 2-3 days
	2. 3-4 days
	3. 12-24 hrs
	4. merges with putrefaction
3. paraphillia is
	1. bisexuallity
	2. bestiality
	3. fretturism
	4. homosexuality
	5. sodomascohaism
4. strangulation shows
	1. dribbling of saliva
	2. froth in the nostril
	3. ligature mark
	4. bruising and ecchymosis below the ligature mark
	5. cyanosis
5. hanging

**Medicine**

1. Consumption of tobacco causes
	1. buccal cancer
	2. lung cancer
	3. bladder
	4. breast
	5. cervix
2. two important test in a patient with polyuriaand polydipsia
of 30 yrs excreting 6 l per day

a.      water loading

* 1. water deprivation
	2. urines and plasma osmality
	3. skull x ray
1. gullian-barre syndrome
	1. proximal motor weakness
	2. distal motor weakness
	3. involves facial n
2. samtire’s triad
	1. B asthma
	2. Nasal polyps
	3. Broncheictasis
	4. Aspirin hypersentitively
3. least diff between systolic BP of both limbs that is abnormal
	1. 5mm
	2. 10
	3. 20
	4. 40
4. NIDDM fundoscopy is done at
	1. At diagnosis
	2. 5 yrs after diagnosis
	3. 10 yrs after diagnosis
5. huge cardiomegaly is seen in
	1. anemia
	2. pericardial effusion
	3. multiple valvular diseases
	4. TOF
	5. CCF
6. B asthma diagnosed by
	1. Wheeze
	2. Dypnoea
	3. CXR
	4. Reversible airway flow obstruction
7. only chemotherapy is treatment in
	1. lymphoma
	2. ALL
	3. Choriocarcinoma
	4. RCC
	5. Nephroblastoma
8. barter syndrome seen in
	1. hyperkalemia
	2. hyporeninemia
	3. HTN
	4. Hypokalemia
	5. Alkalosis
9. In CPR organs systems supported are
	1. Heart
	2. Respi
	3. CNS
	4. GIT
	5. Renal

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1. what occurs in CPR,injuries seen in all except
	1. liver rupture
	2. stomach rupture
	3. DIC
	4. Rib#
	5. Lung rupture
2. in emphysema
	1. lung compliance increased
	2. FEV1 normal
	3. Increased VC
	4. Diffusion capairty decreased
3. severe MR is indicated by
	1. atrial fibrillation
	2. systemic embolism
	3. SV3
	4. Loud S1
	5. Long murmurs
4. In MI done is
	1. Aspirin
	2. Heparin
	3. Alteplase
	4. Oral anticoagulants
	5. ACE inhibitors
5. parkinsonism is caused by
	1. bromocriptine
	2. carbidopa
	3. haloperidol
	4. phenothiazines
6. lepromatous leprosy
	1. > 10 lesion
	2. bilat symmetrical
	3. BI + to ++
	4. Loss of eyebows
	5. Ear lobules infiltration
7. leprosy
	1. palpable nerves
	2. hot and moist area involved
8. butyomycosis is caused by
	1. staph aureus
	2. streptococcus
	3. sporotrichosis
	4. Pseudomonads
	5. Staph epidermidis
9. renal failure is caused by
	1. amyloidosis
	2. HUS
	3. Interstitial nephritis
	4. Post step GN
	5. ATN
10. IDDM
	1. Mostly occurs in children
	2. Need insulin to prevent ketoacidosis
	3. Predictable inheritance
	4. Strong family history
11. celiac sprue patient can be given
	1. rice
	2. rye
	3. soyabeen
	4. corn
	5. barley
12. splenectomy patient seen in
	1. howel jowel bodies
	2. eosinophilia
	3. megakaryocytosis
	4. neutrophilia
	5. neutropenia
13. aplastic anemia leads to
	1. AML
	2. Myelodysplastic syndrome
	3. PNH
14. ineffective erythropoiesis is seen in
	1. iron def
	2. megaloblastic anemia
	3. aplastic anemia
	4. myelodysplastic syndrome
	5. all anemias
15. risk factors for CAD
	1. smoking
	2. homocystinuria
	3. increases HDL
	4. female is more prone than mal

 101. raynaud’s disease seen in

* 1. systemic sclerosis
	2. mixed connective tissue disease
	3. behcet’s syndrome
	4. reiters syndrome
1. renal vein thrombosis seen in
	1. Membranous glomerulonephritis
	2. OC
	3. Amyloidosis
	4. DIC

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**Paediatrics**

1. cyanosis is seen in
	1. TOF
	2. Eissenmenger’s
	3. Tricuspid atresia
	4. VSD
	5. PDA
	6. Coarctation of aorta
2. IQ of 50 child can do
	1. Study upto 8
	2. Can handle money
	3. Obey simple instruction
	4. Recognize family members
	5. Can look after himself
3. post streptocococal GN
	1. follows throat and skin infection
	2. antibiotics prevent recurrence
	3. lead to chronic renal damage
	4. low compliment level
4. hypoglycemia in new born is seen in
	1. erythroblastosis foetalis
	2. IUGR
	3. Macrosomia
	4. Hypo thyroid
	5. Hyperthyroid
5. genralised seizure can be cause by
	1. Viral encephalitis
	2. Hypo natraemia
	3. Hyperkalemia
	4. Cavernous sinus thrombosis
	5. hypokalemia
6. hypothyroidism in newborn
	1. presents as goiter
	2. decreased level of T4
	3. prolongation of physiological jaundice
	4. MC in patient from endemic region
	5. Can be diagnosed by TSH
7. maintained body proportion with decreased bone maturity
	1. hypothyroidism
	2. malnutrition
	3. achondroplasia
	4. Mariques
8. 8 week old child can do
	1. turn head 180 deg to bright light
	2. social smile
	3. hold head in vertical suspension

**Ophthalmology**

1. periphery of retina is seen in
	1. direct opthalmoscopy
	2. in direct opthalmoscopy
	3. + 90 diopter lens
	4. gold man’s lens
	5. ruby lens
2. cornea epithelium is
	1. str squamous keratinized
	2. pseudo stratified
	3. columnar
	4. transitional
	5. str-sq non keratinized
3. Advantage of posterior capsule preservation in ECCE
	1. cystoid macular odema
	2. endoopthalmitis
	3. endothelial damage
	4. retinal detachment
4. photoopthalmia done is
	1. saline irrigation
	2. steroids eye drops
	3. reassurance
	4. eye patching
5. cataract is caused by all except
	1. UV waves
	2. Infrared
	3. Microwave radiation
	4. Ionizing radiation
	5. MRI
6. staphylococcal blephritis causes all except
	1. vernal keratoconjunctivitis
	2. phlyctenular conjunctivitis
	3. marginal corneal ulcer
	4. follicular conjunctivitis
	5. predisposes to basal cell Ca
7. chalazion is a
	1. true retension cyst
	2. staphylococcal infection
8. fovea true is
	1. lowest light threshold
	2. highest no of cones
	3. max no of rods
	4. present over optic head
	5. max visual acquity
9. true about dendritic ulcer is
	1. caused by HSV
	2. steroid decreases the severity
	3. oral acyclovir is effective
	4. topical acyclovir is effective
	5. heals spontaneously
10. to reduce infection after cataract surgery best method is
	1. intra op antibiotic
	2. pre Op topical antibiotic
	3. sub corneal inj of antibiotic
	4. post op systemic antibiotic

**Anesthesia**

1. LMA-laryngeal mask airway
	1. Is used in short neck
	2. For short surgical procedure
	3. Prevent gastric aspiration
	4. Where intubation is CI
	5. Difficult airways
2. headache of dural puncture
	1. prevented by small bore needle
	2. blood patch is treatment of choice at initial stage
	3. early ambulation increases headache
	4. common in old age
3. anesthetic with less analgesia
	1. thiopentone
	2. ketamine
	3. NO
	4. Propofol
	5. Methohexitone
4. CPR drugs used
	1. Xylocaine
	2. Adr
	3. O2
	4. Magnesium
	5. noradrenaline

**ENT**

1. fungal sinusitis
	1. x ray shows hazy opacity
	2. amp-B is given iv
	3. surgical removal of fungus
	4. a niger is most common cause
	5. aspergillus niger is MC
2. recurrent laryngeal has an abberent course
	1. in carotid sheath
	2. posterior to inferior thyroid A
	3. anterior to inferior thyroid art
	4. between the branches of inferior thyroid
	5. passes through sternocleidomastoid
3. nasophayngeal Ca
	1. MC is adeno ca
	2. Arises in fossa of rosenmullar
	3. RT is treatment of choice
	4. EBV virus is causative
	5. Secretory otitis media is a present in adults
4. pre cancerous lesion of larynx are
	1. hyperplastic laryngitis
	2. lichen planus
	3. leucoplakia
	4. papilloma vocal cords
5. DNS treatment is done in case of
	1. Severe DNS
	2. Severe sinusitis
	3. With bony spur
	4. Severe rhinorrhea
	5. Recurrent epistaxis
6. structure seen in indirect laryngoscopy
	1. pyriformis fossa
	2. arylenoid cartilage
	3. lingual surface of epiglottis
7. recurrent laryngeal nerve supplies
	1. cricothyroid
	2. omohyoid
	3. vocalis
	4. post arrytenoid
	5. Stylopharyngeus
8. True about syphilis congenital from present as snuffles
	1. involves cartilagenous part
	2. presentation of sec syphilis
	3. collapse of nasal bridge

**Radiology**

1. radium emits
	1. ν-rays
	2. β-rays
	3. α-rays
	4. χ-rays

**PSM**

1. all are live vaccine
	1. measles
	2. BCG
	3. polio
	4. rabies
	5. pertussis
2. AIDS defining condition
	1. Western blot +
	2. CD4 /CD5 ratio 1
	3. CD4 <500
	4. CD4 <200
	5. Opportunistic infection with TB , P.carini
3. Diarrhoea in AIDS is caused by
	1. Isospora belli
	2. Microsporidium
	3. Cryptococcus
	4. Giardia
	5. Cryptosporidium
4. AIDS WHO defining conditions
	1. diarrhoea fever weight loss
	2. generalized lymphadenopathy
	3. opportunistic infn with TB , P. carini
5. central tendencies
	1. median
	2. mean
	3. mode
	4. std deviation
	5. range
6. blood transfusion transmits
	1. hep A
	2. hep B+C
	3. CMV
	4. Toxoplasmosis
	5. Syphilis
7. chicken pox true is
	1. infective periodic is 2 weeks
	2. prevented by giving immuno globulins
	3. pleomorphic rash
	4. adult chicken pox is less severe
8. WHO ORS true is
	1. 4.5 gm NaCl
	2. 3.5 gm NaCl
	3. 1.5 gm KCl
	4. 2.9 g in Na citrate
9. cholera is diagnosed by
	1. watery stool
	2. many cases from same locality
	3. dysentry
	4. abdominal pain
	5. fever
10. rights of children are protected by article
	1. 24
	2. 28
	3. 48
	4. 42

**OBG**

1. Schiller Dural inclusion bodies seen in
	1. Brumer’s tumor
	2. yolk salk tumor
	3. choricarcinoma
	4. granulosa cell tumor
2. insulin resistance is increase in pregnancy in presence of
	1. HPL
	2. Oestrogen
	3. Progesterone
3. progesterone withdrawal bleeding indicates
	1. adequate progesterone
	2. adequate estrogen
	3. ovarian failure
	4. intact endometrium
4. factors initiating lactation
	1. oxytocin
	2. polactin
	3. FSH
	4. LH
5. all are used for treatment of DUB
	1. danazol
	2. GNRH
	3. Oestrogen
	4. Progesterone
	5. Mifeperistone
6. hydatiform mole true is
	1. more common in develop country
	2. complete is seen in 46 XX
	3. maternal in origin
	4. associated with theca luteal cyst
7. OCP causes
	1. Ca breast
	2. Ca hepatic adenoma
	3. Ca Cx
8. PCOD all are seen
	1. Hirsutism
	2. Insulin resistance
	3. Streak ovaries
	4. Increased FSH
9. polyhydroamnios are caused by
	1. renal agenesis
	2. oesophageal atresia
	3. maternal diabetes
	4. preeclampsia
	5. hydrops
10. hydrocephalus seen
	1. breech presentation
	2. diabetic mothers
	3. spinabifida
11. Ca breast is predisposed by
	1. Family history
	2. OCP
	3. Multiparity
	4. Nulliparty
	5. First pregnancy at 30 yrs
12. Ca Cx is predisposing factor
	1. Family history
	2. Caused by HPV
	3. OCP predisposes
	4. Multiparity
	5. Nulliparity
13. pre eclampsia seen in
	1. HTN
	2. Proteinuria
	3. Convulsions
	4. Pedal odema
14. antiphospholipid syndrome seen in
	1. recurrent arterial thrombosis
	2. recurrent abortion
	3. rec IUD
	4. thrombocytopenia
15. causes of DUB s
	1. irregular ripening
	2. irregular shedding
	3. ca endometrium
	4. granulosa cell tumour
16. manning scoring include
	1. breathing 3 episodes in30 mts
	2. feotal movement
	3. fetal tone

**Surgery**

1. breast conserving surgery CI in all except
	1. poor socioeconomic
	2. age > 40
	3. multicentric disease
	4. axillary LN involvement
2. gas under both sides of diaph seen in
	1. peptic perforation
	2. appendix perforation
	3. meckel’s perforation
	4. uterine perforation
	5. amoebic lives abscess
3. sphincter saving operation in Ca rectum is CI in all except
	1. age > 50
	2. < 4 cm from anal verge
	3. high grade tumor
4. 30 yr old hypotensive patient comes in shock USG shows splenic tear treatment Mn
	1. iv fluids and blood
	2. adv CECT
	3. laprotomy and splenectomy
	4. observation
	5. diagnostic peritoneal lavage
5. fq .of USG (diagnostic )
	1. 1-20 hz
	2. 20-30 hz
	3. 30-40 hz
	4. 40-50 hz
6. reflux esophagitis is prevented by
	1. long abd esophagus
	2. increased abd pressure
	3. increased thoracic pressure
	4. right crux of diaphragm
	5. left crux of diaphragm
7. x-ray lat decubitus is indicated in
	1. dependent hydrothorax
	2. pneumothorax
	3. middle lobe pnemonitis
	4. pleural effusion
8. gonococcal arthritis
	1. females more severe than men
	2. single dose of ciplox is treatment of choice
	3. commonly leads to arthritis
9. trendlenberg’s operation is
	1. stripping of long saphenous vein
	2. ligation of sapheno femoral perforation
	3. flush ligation of sapheno femoral junction
	4. proximal 5 cm stripping of sap vein
10. varicose surgical treatment is indicated if
	1. involves superficial system
	2. if size > 3mm
	3. if size < 3m
	4. if ass with DVT
	5. is not ass with DVT
11. Schuller Duval inclusion bodies found in
	1. Bremer’s
	2. yolk salk tumor
	3. granulosa cell tumor
	4. choriocarcinoma
12. long standing gastric outlet obstruction causes
	1. hypokalemia
	2. hyponatremia
	3. hypochloremia
	4. metabolic acidosis
13. burger’s disease involves A/E
	1. small sized arteries
	2. median sized veins
	3. median sized arteries
	4. small sized veins
	5. large sized arteries
14. for diagnosis of intestinal obstruction
	1. x-ray supine abd
	2. CXR
	3. X-ray Abd erect
	4. Barium study
	5. CT scan
15. perforated peptic ulcer treatment includes
	1. iv fluids +
	2. drainage of paracolic gutters
	3. immediate surgery
	4. antacid
	5. iv pentocid
16. immediate surgery is indicated in
	1. DU perforation
	2. Post op adhesions
	3. Volvulus of sigmoid
	4. Paralytic ileus
17. in traumatic transection of ent femoral A and vein
	1. repair of A & vein
	2. repair of A & ligation of vein
	3. repair of A & contralateral sympathectomy
	4. amputation below knee
18. premalignant lesions are
	1. ulcerative colitis
	2. crohns
	3. TB
19. ulcerative colitis involves
	1. circular muscles
	2. longitudinal muscles
	3. mucosa
	4. submucosa
	5. serosa
20. in ulcerative colitis malignancy is mostly likely in
	1. child hood onset
	2. present of crypt abscess with cell abnormal cytology
	3. length of involvment
21. rigid esophagoscopy is C/I in
	1. aneurysm
	2. lung abscess
	3. cervical spine damage
	4. ca esophagus
22. CBD stone is managed by
	1. ERCP
	2. Stenting with T tube
	3. Direct surgical incision
23. complication of gall stones
	1. pancreatitis
	2. ca stomach
	3. cholecystitis
24. charcot’s triad
	1. fever
	2. pruritis
	3. jaundice
	4. pain
25. in strangulated inguinal hernia investigation done is all except
	1. USG serotum
	2. Needle biopsy
	3. X-ray abd
26. which is premalignant
	1. FAP
	2. Villous adenoma
	3. Hyperplastic polyp
27. acalculous cholecystitis is seen in
	1. crohn’s disease
	2. diabetes mellitus
28. medulary Ca of thyroid
	1. secrete calcitonin
	2. familial
	3. amyloid strauma
	4. hormone dependent

**Ortho**

1. which of the following arise in epiphysis
	1. ewings
	2. osteosarcoma
	3. giant cell tumor
	4. chondroblastoma
	5. osteoblastoma
2. true about osteochondromatosis
	1. autosomal dominant
	2. also known as multiple endostosis
	3. occur in diaphysis
	4. involves long bones & skull
3. paraosteal osteosarcoma
	1. x-ray diagnostic
	2. rarely invades medullary cavity
4. stance muscles
	1. quadriceps
	2. hamstring
	3. anterior tibial
	4. peroneus longus
	5. gastrocnermins
5. bow leg is due to
	1. bowing of tibia
	2. both tibias & femur
	3. mild degree in children needs no treatment
6. Osgood sheller syndrome osteochondritis of
	1. Upper tibia
	2. Lower tibia
	3. Femur
	4. Patella
	5. Scaphoid
7. tallipo equino varus is due to A/E
	1. spina bifida
	2. idiopathic
	3. aruopyogyrosis
	4. neurologic disorders
8. mallet finger is due to avulsion of extensor tendon of
	1. proximal phalynx
	2. middle phalynx
	3. distal phalynx
	4. meta carpel
	5. any of phalynx
9. Cough #
	1. occurs in COPD
	2. Mid scapular line
	3. Needs strapping
	4. Associated with pain

**Dermatology**

1. pitryasis rubra pillaris
	1. cephals caudal spread
	2. more common in females
	3. hyperkeratosis of palms and soles
	4. cydosporme is effective
2. Morbilliform rash is seen in
	1. scarlet fever
	2. rubella
	3. toxic shock syndrome

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