

PSM, Anaes, Derma

BTR Test

By. Dr. Zainab Vora

1. 28-year-old woman comes to the physician for evaluation of a rash on her left foot. A week ago, she noticed multiple lesions on the sole of her foot that are painful with walking or standing. The patient has no other medical conditions. Her only medication is an oral contraceptive. She has no history of tobacco or alcohol use. She works as an accountant. The patient has had 2 sexual relationships in the past 3 years and has been sexually active with her current boyfriend for the past 6 months. Her temperature is 36.1 C (97 F), blood pressure is 128/76 mm Hg and pulse is 78/min. Skin examination is shown below. The remainder of her physical examination is within normal limits. Which of the following is the most likely etiology for this patient's findings?

- A. Callus
- B. Human papillomavirus infection
- C. Lichen planus
- D. Plantar fasciitis



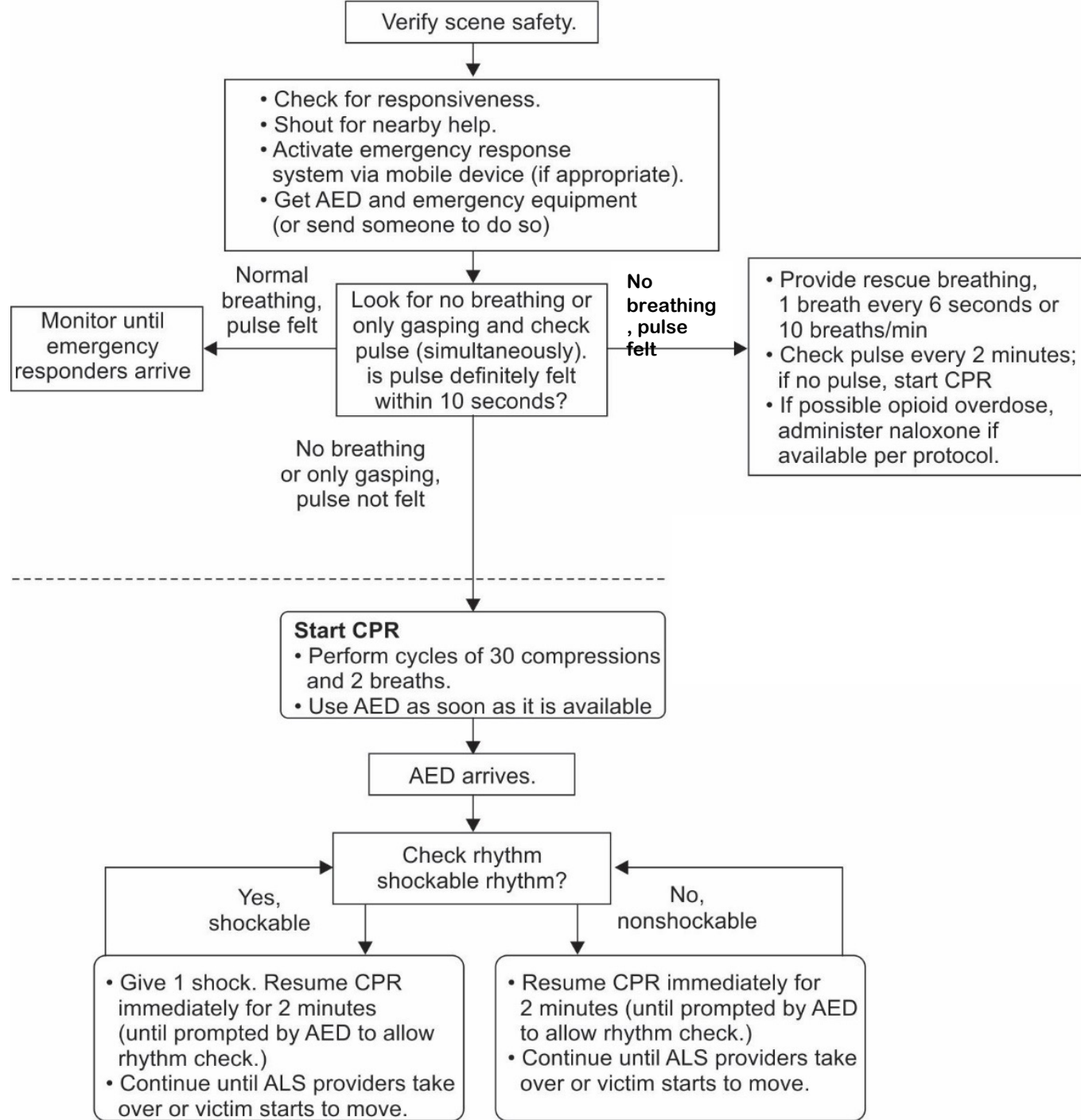
2. You are a healthcare provider working in a community clinic. A 29-year-old male patient presents to your clinic with complaints of persistent fatigue, unexplained weight loss of approximately 10kg over the past three months, and recurrent episodes of night sweats. He admits to engaging in unprotected sexual intercourse with multiple partners and sharing needles for intravenous drug use in the past. He has a history of a RTA 1year back for which he received iv fluids and blood transfusion. On physical examination, you observe generalized lymphadenopathy and a rash on his trunk. Which of the following is the most efficient route of transmission of the likely infection in this case?

- A. Sexual**
- B. Blood**
- C. Needles**
- D. Vertical**

	Efficiency/Risk
Sexual transmission	0.01-1%
Blood	90%
Needles	0.3%
Vertical	30%

3. You are in a public park when you notice a person suddenly collapse and fall to the ground. You approach the individual to assess their condition. They are unresponsive, not breathing, and there is no pulse. What should be your immediate action?

- A. Begin chest compressions at a rate of 100-120 per minute**
- B. Administer rescue breaths immediately**
- C. Check their airway for obstruction**
- D. Call 112**



4. 40-year-old man comes to the office due to a slightly painful sore on his lip which has been enlarging for the last 3 months. Past medical history is unremarkable. The patient does not use alcohol, tobacco, or illicit drugs. He works as a farmer and has no new sexual contacts. Vital signs are normal. Examination shows a 3x7-mm partially encrusted ulcer in the vermilion zone of the lower lip, surrounded by a 6x12-mm area of induration. There are no palpable submental or submandibular lymph nodes, and the remainder of the physical examination is unremarkable. Biopsy of this lesion will most likely show which of the following?

A. Giant cells in a Tzanck preparation

B. Granulomatous inflammation

C. Invasive cords of squamous cells with keratin pearls

D. Invasive clusters of spindle cells surrounded by palisaded basal cells



5. Emporiatics is a term often used in the field of medicine. What best describes the concept of emporiatrics?

- A. The study of diseases affecting the elderly population and their treatment.**
- B. The branch of medicine that focuses on the prevention and treatment of diseases in travelers and those exposed to new environments.**
- C. The practice of traditional medicine in rural areas, often using herbal remedies and ancient healing techniques.**
- D. The study of psychological disorders and their treatment, particularly in children and adolescents.**

6. You are conducting a systematic review and meta-analysis to assess the publication bias in studies investigating the efficacy of a new drug for a rare medical condition. As part of your analysis, you decide to create a funnel plot to visualize potential publication bias. You gather data from 20 relevant studies and calculate effect sizes for each study. After plotting these effect sizes against their corresponding standard errors, you notice that the funnel plot appears asymmetrical, with a gap on one side. What is the most appropriate interpretation of the asymmetrical funnel plot in this context?

- A. The asymmetrical funnel plot suggests that the studies with smaller sample sizes tend to report larger effect sizes, indicating potential bias.**
- B. An asymmetrical funnel plot is an expected result when conducting a meta-analysis and does not require further investigation.**
- C. The funnel plot's asymmetry is indicative of the heterogeneity of study designs and does not reflect publication bias.**
- D. The asymmetrical funnel plot is a result of errors in data collection and analysis, and the meta-analysis should be repeated with corrected data.**

7. Match the following with the appropriate diagnosis:

- a. Lichen planus
- b. Anti-synthetase syndrome
- c. Osteoarthritis
- d. Dermatomyositis



Options

- A. 1-a, 2-d, 3-c, 4-b
- B. 1-a, 2-d, 3-b, 4-c
- C. 1-d, 2-a, 3-c, 4-b
- D. 1-d, 2-a, 3-c, 4-d

8. Match the following scale types with their lesions?

- A. 1-b, 2-c, 3-d, 4-a
- B. 1-a, 2-b, 3-d, 4-c
- C. 1-d, 2-c, 3-a, 4-b
- D. 1-c, 2-b, 3-d, 4-a

Scales	Disease
1. Collarette scales	a. Pityriasis versicolor
2. Silvery scales	b. Pityriasis Rosea
3. Mica like scales	c. Psoriasis
4. Branny scales	d. Pityriasis lichenoides chronica

9. You are preparing to intubate a patient in the operating room. As part of your preoperative assessment, you perform a Mallampati examination to assess the patient's airway. Identify the class from the image shown below?

- A. Mallampati Class I**
- B. Mallampati Class II**
- C. Mallampati Class III**
- D. Mallampati Class IV**





I



II



III



IV

10. 42-year-old man comes to the office due to an itchy rash. The rash began 3 months ago during the summer since then has enlarged and spread across his back, chest, and abdomen. The patient has attempted treatment with topical emollients and over-the-counter hydrocortisone cream without relief. Examination reveals scaly, annular plaques, as shown in the exhibit. In addition to appropriate measures for treatment of the rash, which of the following should be done at this time?

- A. Antinuclear antibody assay
- B. Hepatitis B serology
- C. HIV screening test
- D. Rule out beta blocker usage



11. You are a MO at a Subcentre Chhainsa and have scheduled a vaccination drive tomorrow. Identify the device and number of Vaccine vials that should be kept inside this box:

- A. Day carrier, 2-4**
- B. Vaccine carrier, 4-8**
- C. Vaccine carrier, 16-20**
- D. Portable-ILR, 24-32**



12. Match the following Mapleson circuits with the features described:

- A. 1-c, 2-a, 3-d, 4-b
- B. 1-b, 2-a, 3-d, 4-c
- C. 1-d, 2-a, 3-b, 4-c
- D. 1-c, 2-a, 3-b, 4-d

a. Most effective for spontaneous ventilation	1. Bain's circuit
b. Most effective for controlled ventilation	2. Magill's circuit
c. Used in emergency intubations	3. Jackson Rees circuit
d. Most effective in pediatric population	4. Type C circuit

13. A 28-year-old female presents to her healthcare provider seeking contraception. She has no significant medical history to hormonal contraceptives. Due to her poor socio-economic status, the health care provider suggests the OCPs available free of cost under NFWP. What is the composition of the OCP?

- A. Ethinyl estradiol 0.03 mcg, Levonorgestrel 0.15 mcg, Fe fumarate 30mg**
- B. Ethinyl estradiol 30 mcg, Levonorgestrel 150 mcg, Fe sulphate 60mg**
- C. Ethinyl estradiol 0.03 mg, Levonorgestrel 0.15 mg, Fe fumarate 60mg**
- D. Ethinyl estradiol 0.03 mg, Levonorgestrel 0.15 mg, Fe sulphate 30mg**

14. A screening test is positive in 50% diseased population and 10% healthy population. Calculate the PPV:

A. 83

B. 90

C. 50

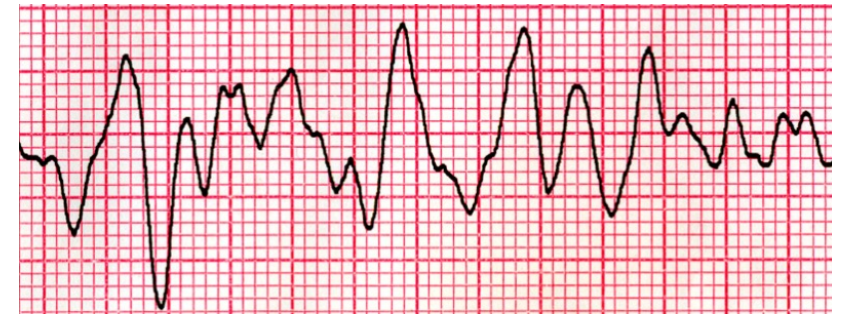
D. 89

15. 16-year-old girl is brought to the office due to hair loss. Over the last few months, she has developed a few patches of hair loss on the scalp as shown in the image. The lesions are associated with mild itching just before the loss of hair but are otherwise asymptomatic. Medical history is unremarkable; the patient's only current medication is an oral contraceptive. She does not use tobacco, alcohol, or illicit drugs. Vital signs are normal. Which of the following is the most appropriate next step for this patient's hair loss?

- A. Cognitive behavioural therapy
- B. Intralesional triamcinolone
- C. Oral griseofulvin
- D. Topical minoxidil

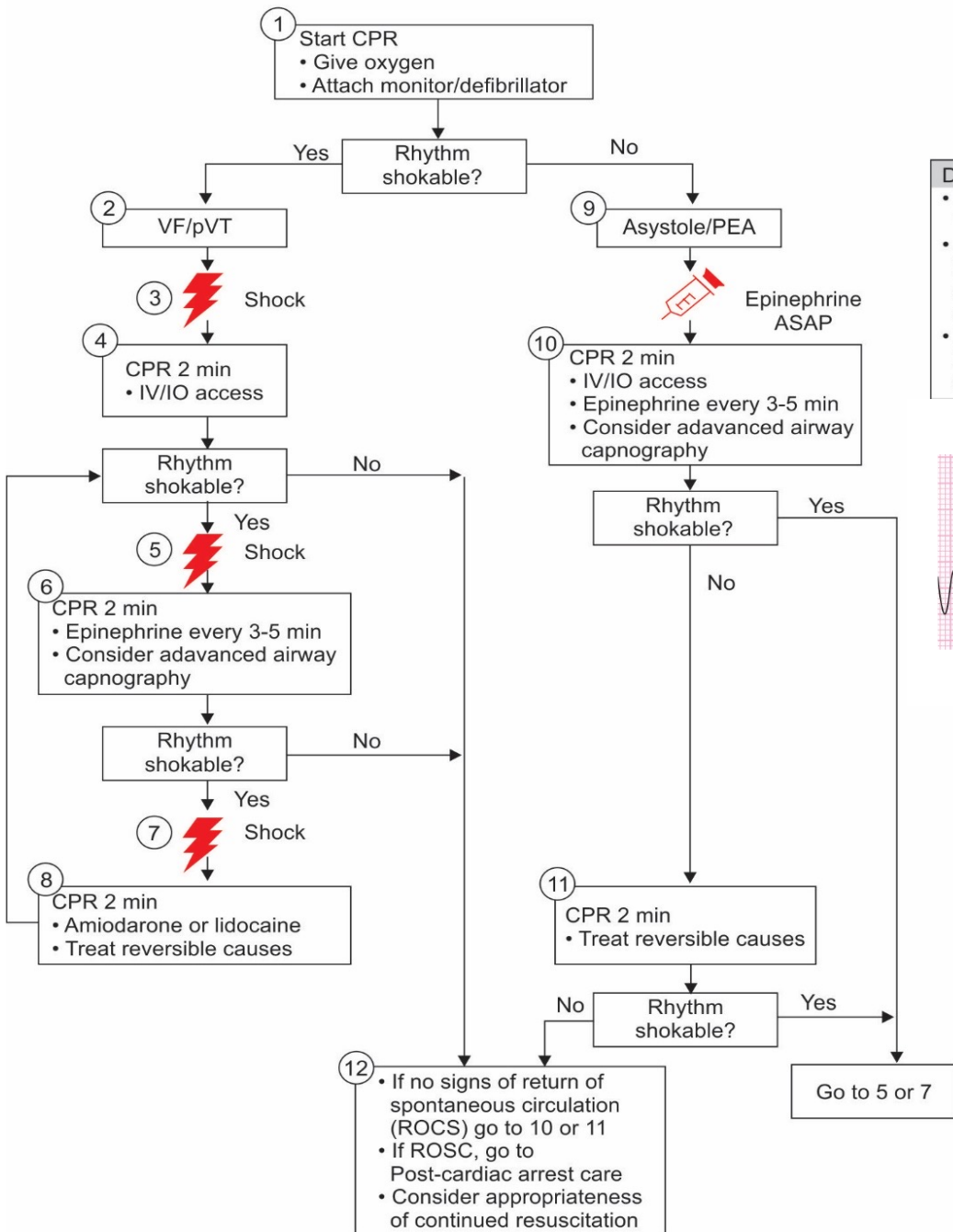


16. You are the team leader during a cardiac arrest resuscitation scenario in a hospital setting. A 65-year-old patient has suddenly collapsed and is unresponsive. The monitor displays a rhythm as shown in the image. What is the next immediate step?



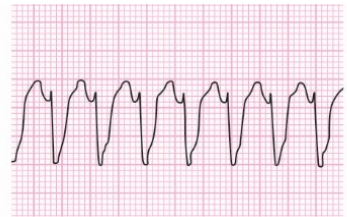
- A. Administer epinephrine**
- B. Begin high-quality CPR**
- C. Defibrillate at 360 joules**
- D. Administer MgSO₄**

Adult cardiac arrest algorithm (VF/pVT/Asystole/PEA)



Drug therapy

- Epinephrine IV/IO dose: 1 mg every 3-5 minutes
- Amiodarone IV/IO dose: First dose: 300 mg bolus, second dose: 150 mg or
- Lidocaine IV/IO dose: First dose: 1-1.5 mg/kg second dose: 0.5-0.75 mg/kg.



12

- If no signs of return of spontaneous circulation (ROCS) go to 10 or 11
- If ROCS, go to Post-cardiac arrest care
- Consider appropriateness of continued resuscitation

17. In the context of the World Health Organization's International Health Regulations (IHR), "immediately notifiable diseases" refer to specific diseases that must be reported to the WHO. What is the time period to report them and the diseases included in the list? Identify the correct pair:

- A. 12hrs, Cholera**
- B. 24hrs, Yellow fever**
- C. 48hrs, Polio**
- D. 96hrs, Zika virus**

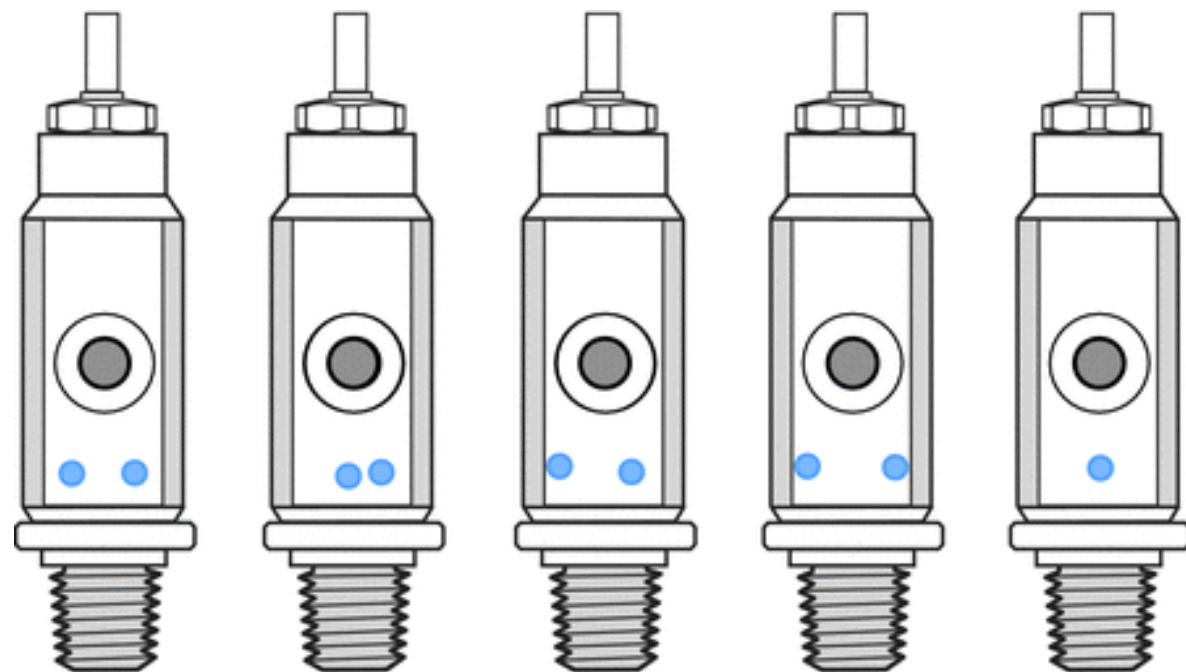
18. A 17-year-old boy comes to the physician complaining of worsening acne. He has scattered papules and pustules with mild-to-moderate redness at the forehead, nose, and chin. His acne has been present for 2 years. The lesions are not painful, but the boy is concerned as the symptoms have progressively worsened and his peers at school are starting to make fun of him. He currently uses topical tretinoin and washes his face twice daily with benzoyl peroxide. His medical history is otherwise negative. On examination, he has moderate pustular acne with erythema but no scarring. Which of the following is the best next step in management of this patient?

- A. Add oral minocycline**
- B. Add topical erythromycin**
- C. Add topical salicylic acid**
- D. Switch to oral isotretinoin**

19. Identify the cylinder:

- A. O₂
- B. CO₂
- C. N₂O
- D. Air





Oxygen
(2,5)

Nitrous oxide
(3,5)

Air
(1,5)

Carbon dioxide
(1,6)

Entonox
(7)

20. The following are types of rapid molecular tests under NTEP except:

A. LPA

B. TrueNAAT

C. CBNAAT

D. MGIT960

21. 35-year-old man comes to the office due to a 2-month history of a skin lesion on his lower back. He noticed a similar lesion in the same location 6 months ago, which spontaneously resolved after 3 weeks. The patient recalls minor trauma at this site few months ago. There is no associated pruritus, pain, or other symptoms. His medical history is unremarkable, and he has no history of tobacco or alcohol use. Vital signs are within normal limits. Skin examination shows a firm, mobile nodule, as shown in the image below. There is no drainage from the lesion or tenderness to palpation. The lesion does not change shape when pinched at the edges. The remainder of the physical examination is within normal limits. Which of the following is the most likely diagnosis?



- A. Dermatofibroma
- B. Epidermal inclusion cyst
- C. Lipoma
- D. Squamous cell carcinoma

22. The following are useful in the measurement of the index shown in the image:

1. PM10
2. PM5
3. NO2
4. SO2
5. O3
6. NH3
7. PM2.5

Options;

- A. 1,2,3,4,5,6,7
- B. 1,3,4,5,6
- C. 1,3,4,5,6,7
- D. 1,2,6,7

Good (0 to 50)	Minimal impact
Satisfactory (51 to 100)	May cause minor breathing discomfort to sensitive people
Moderately Polluted (101 to 200)	May cause breathing discomfort to the people with lung disease such as asthma and discomfort to people with heart disease, children and older adults
Poor (201 to 300)	May cause breathing discomfort to people on prolonged exposure and discomfort to people with heart disease
Very Poor (301 to 400)	May cause respiratory illness to the people on prolonged exposure. Effect may be more pronounced in people with lung and heart diseases
Severe (401 to 500)	May cause respiratory effects even on healthy people and serious health impacts on people with lung/heart diseases. The health impacts may be experienced even during light physical activity

23. What will be the 95% confidence interval (CI) for an estimated prevalence of 10% and a sample size of 100?

A. 2–18

B. 4–16

C. 7–13

D. Given data inadequate for calculation of class intervals

24. Identify the correct diagnosis:

A. Marjolin ulcer



B. HSV-1 reactivation



C. Darrier disease



D. Scleroderma



25. Identify the disease transmitted by the vector shown in the image:

- A. Epidemic typhus
- B. Endemic typhus
- C. Q fever
- D. Scrub typhus



26. 20 accidental pregnancies happen after 100 women used a new contraceptive device for 2yrs. What is the pearl index?

A. 0.1

B. 1

C. 5

D. 10

27. Which is the inhalational agent not preferred for induction of anesthesia in children?

A. Halothane

B. N₂O

C. Sevoflurane

D. Desflurane

28. 18-month-old boy is brought to the emergency department due to fever and facial rash for 2 days. The patient has a history of atopic dermatitis for which his parents occasionally apply over-the-counter steroid cream. The boy had a flare-up of dry, thickened, itchy skin on his cheeks 4 days ago. He then developed many overlying, painful bumps 2 days ago that have since increased in number. His vaccinations are up to date. Physical examination shows an uncomfortable-appearing child with numerous painful, clear vesicles over erythematous skin on both cheeks as well as a few scattered lesions with overlying dark-red crusting. Submandibular lymphadenopathy is present. The rest of the skin appears dry. The initial gram stain of one of the lesions is negative. Which of the following is the most likely etiology of this patient's rash?

- A. Herpes simplex virus
- B. Methicillin-resistant *Staphylococcus aureus*
- C. Methicillin-sensitive *Staphylococcus aureus*
- D. Varicella zoster infection

29. Identify the correct pair of recommendations made by committees:

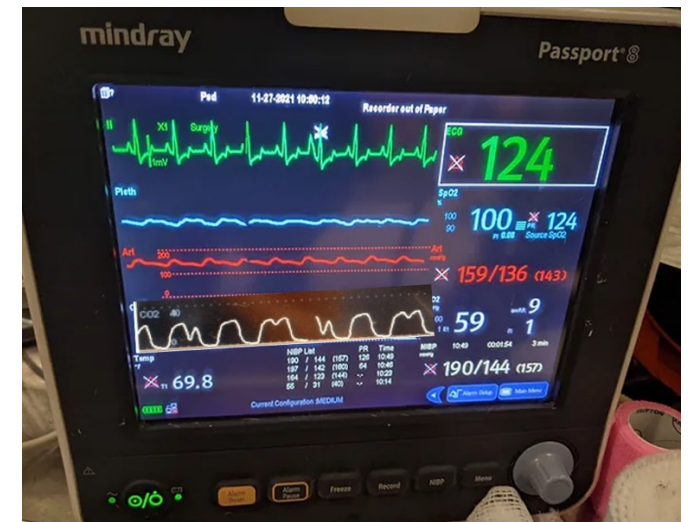
- 1. Srivastava committee-3.5yr course for rural Community health officers**
- 2. Bhore committee-3 million plan**
- 3. Mukherjee committee-De-link malaria from family planning activities**
- 4. Kartar Singh-MPW for health and family planning**
- 5. Bajaj committee-Urban revamping scheme**

Options:

- A. 1,2,3**
- B. 2,3,4,5**
- C. 2,3,4**
- D. 1,2,4,5**

30. You are a very smart intern and the anaesthetist on duty trusts you with monitoring a patient after induction while he goes to the next case and asks you to give any medications if needed. You keep observing the monitor continuously and is shown in the image below. What is the next step in this patient?

- A. Inject IV dantrolene sodium
- B. Administer top up NM blocking agent
- C. Reassure yourself that “all is well”
- D. Ask surgeon to limit blood loss



31. 28-year-old woman comes to the office due to worsening of a skin rash on her back and arms for the past 2 weeks. She has had no associated pain or pruritus. During her teenage years, the patient had comedonal acne on her face, which resolved with topical medications. She was diagnosed with systemic lupus erythematosus 2 years ago and is on oral prednisone due to a recent exacerbation of renal failure. The patient also takes hydroxychloroquine and as-needed nonsteroidal anti-inflammatory drugs. She does not use tobacco, alcohol, or illicit drugs. She works in a dry-cleaning facility. The patient is sexually active with her boyfriend and takes OCP. Temperature is 37 C (98.6 F), blood pressure is 130/86 mm Hg, and pulse is 78/min. Skin examination shows uniform-appearing, 1- to 3-mm, erythematous papules across her back, shoulders, and upper arms. There is mild symmetric synovitis in the hands and wrists, but the remainder of the physical examination is unremarkable. Which of the following is the most likely cause of this patient's skin rash?

- A. Chlorinated chemical exposure
- B. Cutaneous manifestation of systemic lupus erythematosus
- C. Disseminated gonococcal infection
- D. Medication adverse effect





32. Identify the correct pair:

1. Benefit measured in terms of natural units-Cost benefit analysis
2. Method based on behavioral sciences-MBO
3. PERT-Network Analysis
4. Benefit measured in terms of QALY-Cost effective analysis

Options;

- A. 1,2,3
- B. 2,3,4
- C. 2,3
- D. 1,4

33. Identify the incorrect pair:

<p>A. Jaw thrust</p>	 A diagram showing a person lying on their back with their head tilted back. A hand is shown pushing the lower jaw forward, indicated by an upward-pointing arrow. Another hand is shown supporting the neck from below, indicated by a downward-pointing arrow.
<p>B. Larson manouever</p>	 A photograph showing a person lying on their back with their head tilted back. A hand is shown pulling the tongue forward, away from the airway.
<p>C. Hemlick manouever</p>	 A diagram showing a person standing behind another person who is leaning forward. The person behind is performing the Heimlich maneuver by grasping the other's abdomen and applying upward pressure.
<p>D. Selick manouever</p>	 A photograph showing a hand wearing a white glove performing the Selick maneuver. The hand is placed on the forehead and the base of the skull, with the fingers pointing upwards.

34. Identify the incorrect pair:

1. Cytotoxic and expired drugs-Incineration
2. Catheter, Urobag-Autoclave, Microwave
3. PVC gloves-Recycling
4. Chemicals-Collect in chlorinated containers and send for disposal

Options;

- A. 1,3,4
- B. 3,4
- C. 1,2
- D. 2,3,4

35. A 24-year-old woman comes to the AIIMS OPD due to skin lesions on her trunk and proximal upper limbs. The patient noticed the lesions after returning from a summer vacation at a Goa a week ago. During the vacation she had sun exposure on several occasions without prior application of sunscreen. The lesions are mildly itchy but not painful. Medical history is notable for hypothyroidism, for which she takes levothyroxine. She drinks alcohol on social occasions but does not use tobacco or illicit drugs. Examination shows hypopigmented lesions as shown in the image below. Which of the following is the most likely cause of this patient's current condition?

- A. Autoimmune melanocyte injury**
- B. Dermatophyte skin infection**
- C. Malassezia globosa infection**
- D. Ultraviolet-skin-damage**



36. Identify the incorrect pair :

1. Etomidate-Does not cause myocardial suppression
2. Fospropofol-Maximum pain on injection
3. Ketamine- Neuroprotective
4. Thiopentone-Best for porphyria

Options;

- A. 2,3,4
- B. 1,2,3,4
- C. 3,4
- D. 2,3

37. A team of epidemiologists is planning to conduct a survey on the prevalence of malnutrition in a village. What is the correct sequence of steps involved in the planning of this activity?

1. Establishment of objectives and goals

2. Fixing priorities

3. Analysis of the health situation

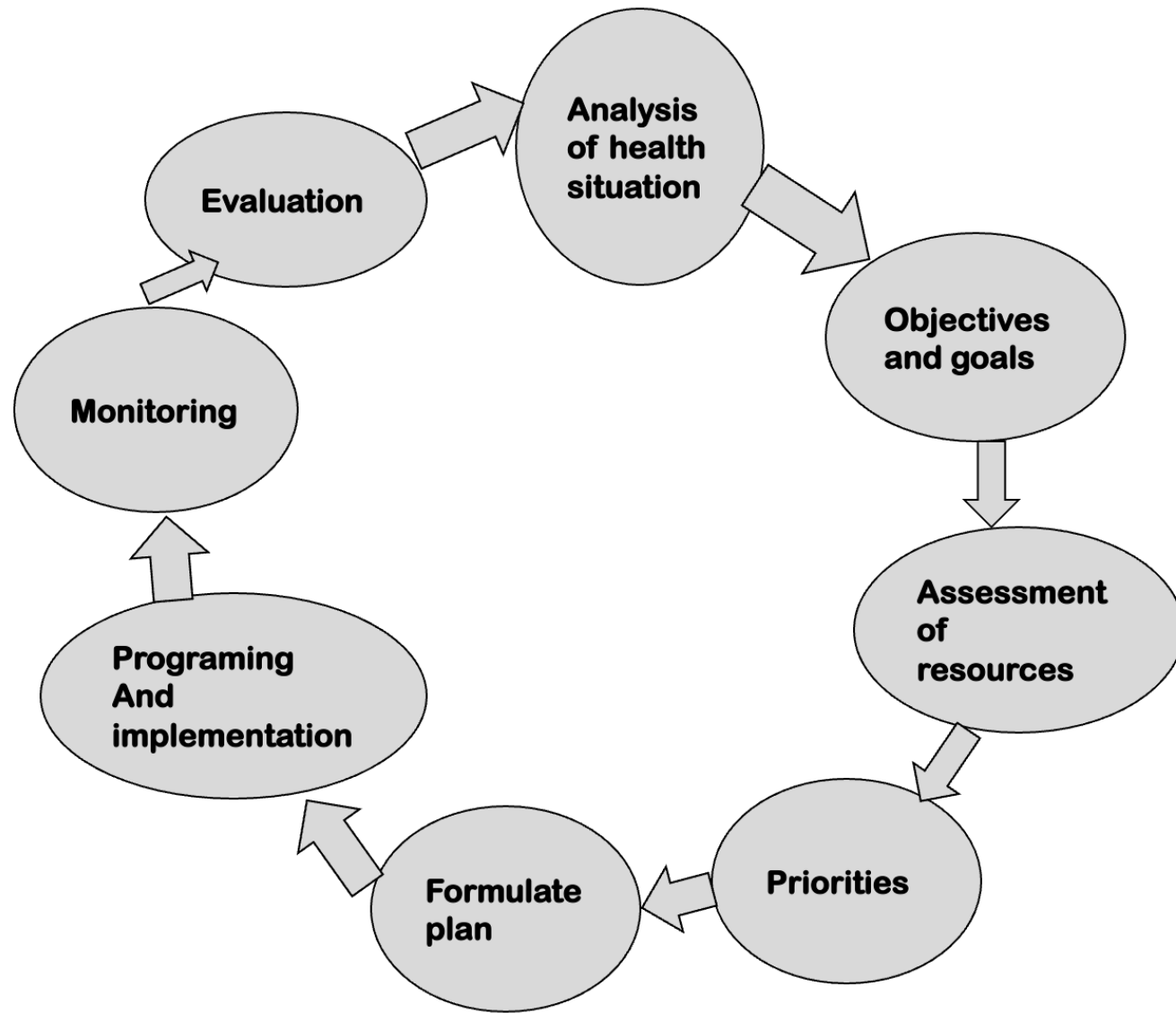
4. Assessment of resources

A. 3,1,4,2

B. 4, 1, 2,3

C. 3, 2, 4, 1

D. 1,2,3,4







38. Among the listed causes of alopecia, which ones result in non-scarring alopecia?

- 1. Alopecia areata**
- 2. Telogen effluvium**
- 3. Androgenic alopecia**
- 4. Frontal fibrosing alopecia**

- A. 3 and 4**
- B. 1, 2, and 3**
- C. 2, 3, and 4**
- D. Only 4**

39. Identify the correct oxygen delivery devices with the maximum o2 saturation delivered:

A. 90%	
B. 40%	
C. 51%	
D. 30%	

40. Identify the correct statements about health indicators:

1. Number of years a newborn is expected to live in full health based on current rates of sickness and mortality-Sullivan index
 2. Simplest measure of burden of disease-Incidence
 3. Optimal utilisation of health services-Negative Bed turnover ratio
 4. Best indicator of effectiveness of health care-IMR
 5. Cost effectiveness of NHP-DALY
 6. Best measure of standard of living-HDI
-
- A. 1,2,3,4,5,6
 - B. 3,4,5,6
 - C. 2,4,5,6
 - D. 4,6

41. Identify the correct pair with the type of prevention:

1. Prescriptive screening-Secondary
2. HPV Vaccination against ca cervix-Primary
3. Iodine supplementation in salt-Primordial
4. Pap smear in health camp-Primary
5. Spectacles-tertiary

- A. 1,2,3,4,5
- B. 1,2,4,5
- C. 2,3,5
- D. 1,2,5

**42. HIV testing is done as screening in series.
Which of the following will be true?**

- A. Sensitivity and specificity will increase**
- B. Sensitivity will decrease, specificity will increase**
- C. Sensitivity and specificity will decrease**
- D. Sensitivity will increase, specificity will decrease**

43. Identify the correct ASA-PS grade:

- A. Occasional alcoholic-I**
- B. DM with HbA1c of 10%-II**
- C. History of CVA 1yr back-IV**
- D. Brain dead patient-VI**

ASA PS Classification	Definition	Examples, including, but not limited to:
ASA I	A normal healthy patient	Healthy, non-smoking, no or minimal alcohol use
ASA II	A patient with mild systemic disease	Mild diseases only without substantive functional limitations. Examples include (but not limited to): current smoker, social alcohol drinker, pregnancy, obesity (30<BMI<40), well-controlled DM/HTN, mild lung disease
ASA III	A patient with severe systemic disease	Substantive functional limitations. One or more moderate to severe diseases. Examples include (but not limited to): poorly controlled DM or HTN, COPD, morbid obesity (BMI≥40), active hepatitis, alcohol dependence or abuse, implanted pacemaker, moderate reduction of ejection fraction, ESRD undergoing regularly scheduled dialysis, premature infant PCA < 60 weeks, history (>3 months) of MI, CVA, TIA, or CAD/stents.
ASA IV	A patient with severe systemic disease that is a constant threat to life	Examples include (but not limited to): recent (<3 months) MI, CVA, TIA, or CAD/stents, ongoing cardiac ischemia or severe valve dysfunction, severe reduction of ejection fraction, sepsis, DIC, ARD or ESRD not undergoing regularly scheduled dialysis
ASA V	A moribund patient who is not expected to survive without the operation	Examples include (but not limited to): ruptured abdominal/thoracic aneurysm, massive trauma, intracranial bleed with mass effect, ischemic bowel in the face of significant cardiac pathology or multiple organ/system dysfunction
ASA VI	A declared brain-dead patient whose organs are being removed for donor purposes	

44. 56-year-old woman comes to the office due to a 1-year history of skin lesions. He has had rough, flaky spots, which do not itch or bleed, on his forehead and cheeks. The patient has attempted treatment with various emollients without effect. Medical history includes hypertension. The patient works as a building inspector and does not use tobacco, alcohol, or illicit drugs. Vital signs are normal. On examination multiple scattered white, scaling lesions are noted, as shown in the image below. Which of the following is the most likely diagnosis in this patient?

- A. Actinic keratosis
- B. Psoriasis
- C. Seborrheic dermatitis
- D. Seborrheic keratosis





45. An orthopedic resident has removed a K-wire from the fractured SCH of a 13-year-old boy. Where should he discard this?

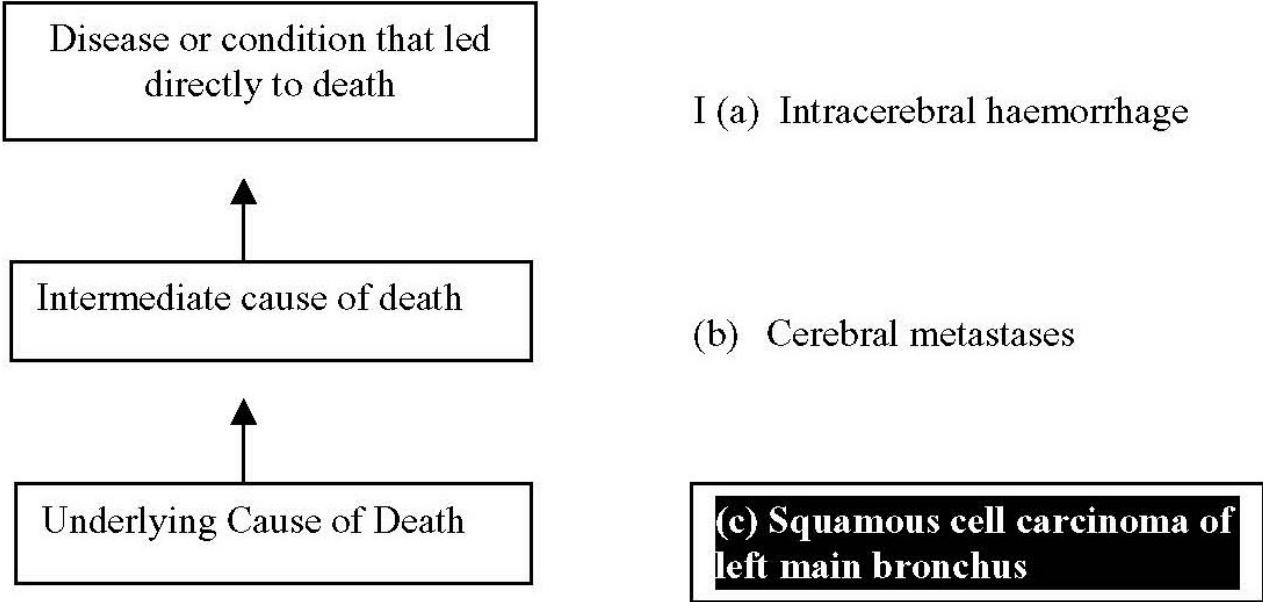
- A. Cadmium-free red coloured bag**
- B. Cardboard box with blue marking**
- C. Puncture-proof and tamper-proof white container**
- D. Blue chlorine-free bag**

46. You are filling the death certificate of a patient who died from ventricular fibrillation following an acute myocardial infarction. This was because of thrombosis in the coronary artery due to longstanding atherosclerosis. What will you record in line I (c) of the death certificate?

- A. Ventricular fibrillation**
- B. Myocardial infarction**
- C. Coronary artery thrombosis**
- D. Atherosclerosis**

A patient died from an intracerebral haemorrhage caused by cerebral metastases from a primary malignant neoplasm of the left main bronchus.

This should be entered as follows:



47. Which of the following is included in high-quality CPR?

1. **Compression depth of at least 5 cm**
2. **Rotate chest compressor every 3 mins**
3. **Avoid excessive ventilation**
4. **Compression - ventilation ratio of 30:2**
5. **Allow complete recoil**
6. **ET co2 <10mm**
7. **Intra-arterial DBP >20mm Hg**
8. **Breaths 20-30/min**

A. 1,2,3,4,5,6,7,8

B. 1,2,4,5,7,8

C. 1,3,4,5,7,8





D. 1,3,4,5,7

48. Match the following with the images:

- A. Lichen simplex chronicus
- B. Lichen scrofulosorum
- C. Lichen planus
- D. Lichen sclerosus
- E. Lichen nitidus

Options;

- A. 1-D, 2-A, 3-E, 4-C
- B. 1-A, 2-D, 3-B, 4-C
- C. 1-D, 2-C, 3-E, 4-B
- D. 1-A, 2-D, 3-E, 4-C

1	
2	
3	
4	



49. Which of the following is statements about ICD-11 are true:

1. It includes a new chapter on traditional medicine
2. Gender incongruence and sexual dysfunctions are now listed as part of mental health disorders
3. It has come into full effect from January 2022
4. Chapter 6 is Mental, behavioural or neurodevelopmental disorders

Options;

- A. 1,2,3,4
- B. 1,3,4
- C. 1,2,3
- D. 1,4

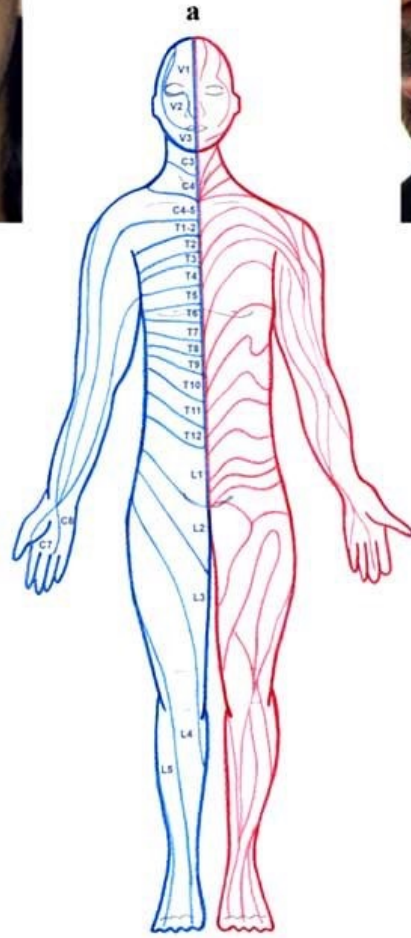
50. A 10-year-old child has been diagnosed with diphtheria and is being treated in the ward. His 2.5-year-old brother, who lives in the same house has received all due vaccinations according to NIS. What is the next best step for the management of the younger sibling?

- A. DPT booster**
- B. Reassure as he is vaccinated**
- C. Erythromycin + diphtheria toxoid**
- D. Erythromycin only**

51. The most probable diagnosis for a young male depicted in the image is?

- A. Focal vitiligo**
- B. Segmental vitiligo**
- C. Indeterminate leprosy**
- D. Nevus depigmentosus**





52. Identify the correct statements:

1. Grade 2 disability per 10 lac population is the most important leprosy awareness indicator
2. VVM shows cumulative exposure of the vaccine to the heat and assess vaccine potency
3. As per the National Tuberculosis Elimination Program (NTEP), HIV-TB prevalence of district $>15\%$ is a high-priority district
4. The external validity of a screening test is related to generalizability

Options:

- A. 1,2,3,4
- B. 1,2,4
- C. 1,2,3
- D. 2,3,4

53. Under the Anemia Mukta Bharath initiative, mild to moderate anemia in pregnant women < 34 weeks of gestation is treated using:

- A. 60 mg elemental iron and 500 mcg folic acid daily**
- B. IV iron sucrose**
- C. 45mg elemental iron and 400 mcg folic acid twice daily**
- D. 60 mg elemental iron and 500 mcg folic acid twice daily**

54. All of the following can be given by intra-tracheal route except:

A. Epinephrine

B. Atropine

C. Naloxone

D. N-Acetyl cysteine

55. A new drug has been introduced into the market which was found to decrease mortality but it does not cure the disease. Which of the following is a true statement regarding prevalence and incidence?

- A. Decrease in incidence**
- B. Decrease in prevalence**
- C. Increase in incidence**
- D. Increase in prevalence**

56. Identify the correct statements about muscle relaxants:

1. Gallamine and pancuronium have vagolytic activity
2. Shortest acting approved NDMR is Gantacurium
3. MR that may cause hypotension and flushing after injection: Tubocurarine
4. Rocuronium and vecuronium can be reversed by use of Suggamadex

A. 1,2,3,4

B. 2,3,4

C. 1,3,4

D. 2,4

57. A study found that the incidence of bladder carcinoma is 5 times higher in smokers than in non smokers. Calculate the attributable risk?

A. 20%

B. 33%

C. 75%


D. 80%

58. Identify the following congenital lesions with the genetic defects :

- A. NEMO
- B. GNAQ
- C. Collagen VII
- D. Transglutaminase 1

Options;

- A. 1-A, 2-B, 3-C, 4-D
- B. 1-D, 2-A, 3-B, 4-C
- C. 1-C, 2-A, 3-B, 4-D
- D. 1-C, 2-D, 3-B, 4-A

1	
2	
3	
4	

59. Identify the true statements:

1. The HIV sentinel surveillance includes single male migrants, truck drivers, CSW, transgenders and antenatal women
2. Gaussian distribution is the probability distribution that describes the chances of an event in a particular time frame.
3. Congenital glaucoma is not covered under RBSK screening
4. According to SDG target 3.1, MMR should be $<80/1$ lakh live births

Options;

- A. 1,3,4
- B. 1,2,4
- C. 1,3
- D. 2,3,4

**HIV sentinel surveillance: Biennial-Unlinked, anonymous
Proxy for general population (>1%):**

High-risk (>5%): CSW MSM TG

Bridge group:

Single male migrants

Truck drivers

Identified Health Conditions for Child Health Screening and Early Intervention Services

Defects at Birth

1. Neural Tube Defect
2. Down's Syndrome
3. Cleft Lip & Palate / Cleft Palate alone
4. Talipes (club foot)
5. Developmental Dysplasia of the Hip
6. Congenital Cataract
7. Congenital Deafness
8. Congenital Heart Diseases
9. Retinopathy of Prematurity

Deficiencies

10. Anaemia especially Severe Anaemia
11. Vitamin A Deficiency (Bitot spot)
12. Vitamin D Deficiency (Rickets)
13. Severe Acute Malnutrition
14. Goiter

Childhood Diseases

15. Skin conditions (Scabies, Fungal Infection and Eczema)
16. Otitis Media
17. Rheumatic Heart Disease
18. Reactive Airway Disease
19. Dental Caries
20. Convulsive Disorders

Developmental Delays and Disabilities

21. Vision Impairment
22. Hearing Impairment
23. Neuro-Motor Impairment
24. Motor Delay
25. Cognitive Delay
26. Language Delay
27. Behaviour Disorder (Autism)
28. Learning Disorder
29. Attention Deficit Hyperactivity Disorder

30. Congenital Hypothyroidism, Sickle Cell Anaemia, Beta Thalassemia (Optional)

60. A 40-year-old patient with no known medical conditions undergoes elective surgery under general anesthesia. During the procedure, the anesthesia team observes rapidly increasing body temperature, tachycardia, elevated blood pressure, and generalized muscle rigidity. Which of the following drugs should be avoided in this patient?

- A. Halothane, Desflurane**
- B. Methoxyflurane, Propofol**
- C. Rocuronium, N₂O**
- D. Xenon, Ether, Sevoflurane**

61. The seasonal variations of a disease were studied in children, in a group from June to July and in another group of similar characteristics from August to September. The test of significance that should be used to compare the data is:

- A. Chi square**
- B. Paired t test**
- C. Wilcoxon test**
- D. ANOVA**

62. Identify the correct kit for the clinical presentations:

1. Painful ulcers upon palpation, with suppurative inguinal lymphadenopathy on the right side
2. Vaginal discharge in a CSW with cervical erosions
3. Painful, swollen, and tender inguinal lymph node in a truck driver
4. Painless ulcer in the genital area with non-tender inguinal lymphadenopathy in CSW; past h/o treatment of a similar lesion resulted in fever, malaise, tachycardia and vomiting

Options;

- A. 1-Red, 2-Green, 3-Black, 4-Blue
- B. 1-White, 2-Green, 3-Black, 4-Blue
- C. 1-White, 2-Grey, 3-Black, 4-White
- D. 1-Blue, 2-Grey, 3-White, 4-Blue

63. Identify the correct statements:

1. **FORD foundation is aiding in building toilets in India**
2. **Normalcy of data can be measured by histogram, box-whisker plot and Shapiro-Wilk test**
3. **CONSORT standards are for RCT**
4. **Meta-analyses>RCT>Systematic review>Cohort>Case-control>expert opinion is the correct hierarchy for evidence**

A. 1,2,3,4

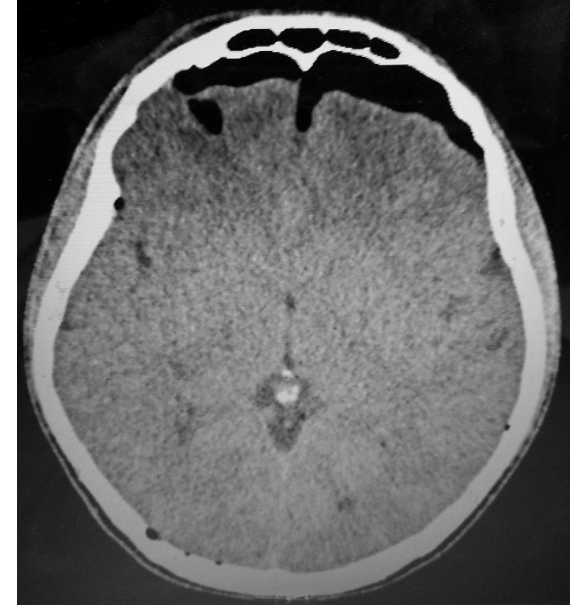
B. 1,2,3

C. 1,3,4

D. 1,2,4

64. During recovery from anaesthesia after a posterior cranial fossa surgery, the patient complained of a severe headache and was agitated. CT scan is shown. Which of the following is most likely responsible for this condition?

- A. Post dural puncture heading**
- B. N2O entering cranial cavity**
- C. Air embolism**
- D. Venous sinus thrombosis**



65. An 18-month-old child is brought with no history of vaccination. From the following, which vaccines would be appropriate to give this child according to the National Immunization Schedule (NIS)?

- A. DPT -1, OPV-1 only**
- B. BCG, DPT-1, OPV-1**
- C. BCG, DPT-1, OPV-1, Measles - 1, Vit.A -50000IU**
- D. DPT-1, OPV-1, Measles - 1, Vit.A – 1 lakh IU**

DELAYED IMMUNISATION:

BCG

HEP B

IPV

ROTA

PENTA

PCV

MEASLES/MR

VIT A

OPV

Hib

DTP

JE

dT/TT

66. Topical steroids are not effective in which of the following:

A. Psoriasis involving <10% BSA

B. Impetigo herpetiformis

C. Vitiligo

D. Eczematous dermatitis

67. All of the following are true statements about communicable diseases except:

1. Humans are dead-end hosts for rabies, tetanus and JE
2. Rabies is an example of amphixenosis
3. A disease whose pathogenic response is higher in children compared in adults is defined as hyperendemic disease
4. Number of cases last week 42; this week 49 -Endemic

Options;

- A. 2,3,4
- B. 2,3
- C. 1,2
- D. 1,4

68. Identify the correct statements:

1. Lowest MAC=Highest potency
2. Min MAC-N₂O, Max MAC-Methoxyflurane
3. Blood gas partition coefficient (BGC)=Lipid solubility-Speed of induction
4. Lowest BGC-Xenon, Highest BGC-Methoxyflurane

A. 1,2,3,4

B. 1,3

C. 2,4

D. 1,4

69. You are a smart MO posted in a health camp. You notice a child named Kiaan with fever and rash. On subsequent history, you find out that similar symptoms occurred in his friend Ayaan 6 days back. Kiaan tells you that another common friend Shanaya also is starting to have weakness and myalgia. How will you epidemiologically categorise Kiaan?

- A. Primary case**
- B. Index case**
- C. Secondary case**
- D. Tertiary case**

70. A 42-year-old construction worker presents to a dermatology clinic with complaints of persistent, itchy, and red skin rashes on his hands and forearms. He reports that the symptoms worsen during and after work, especially when handling construction materials. On examination, there are erythematous, scaly plaques with vesicles and crusting on the dorsal surfaces of his hands and forearms. Which of the following is the most likely cause of this dermatitis?

- A. PPD**
- B. Nickel**
- C. Chromate**
- D. MBEH**

1. Hair dye: PPD (para phenylenediamine)
2. Metal: Nickel (most common)
3. Topical antibiotic: Neomycin
4. Cement: Potassium dichromate
5. Bindi: PTBP (para tertiary butyl phenol)

71. A 2year old child comes with the following finding. Identify the grade and management:

- A. X1 A, 50000IU vit A**
- B. X1B, 1 lakh IU vit A**
- C. X1A, 2 lakh IU vit A**
- D. X1B, 2 lakh IU vit A**



- - - - -

Xerophthalmia classification (3,9)

XN	Night blindness
X1A	Conjunctival xerosis
X1B	Bitot's spots
X2	Corneal xerosis
X3A	Corneal ulceration/keratomalacia (involving less than one third of the corneal area)
X3B	Corneal ulceration/keratomalacia (involving one third or more of the corneal area)
XS	Corneal scar (from X3)
XF	Xerophthalmic fundus

72. Which of the following statements is true regarding sodalime?

1. 100 g of sodalime can absorb 23 liters of CO₂
2. Amsorb is preferred for Sevoflurane and Desflurane over sodalime
3. The major constituent of sodalime is Ca (OH)₂
4. Water content of sodalime is 5%
5. Can form a neurotoxic compound with Trilene

Options;

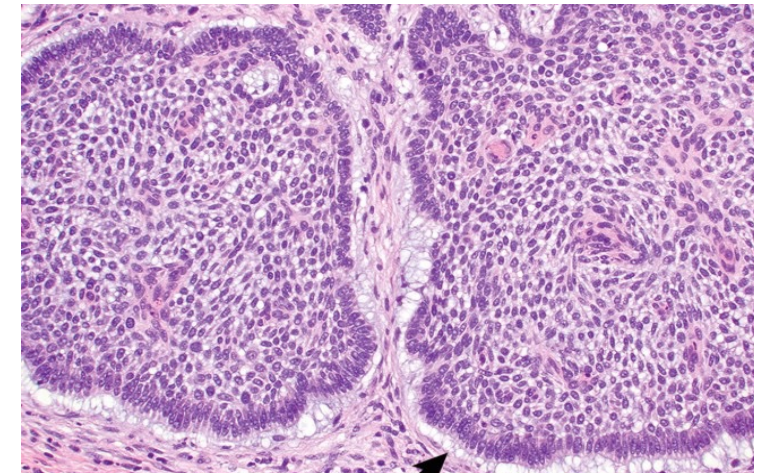
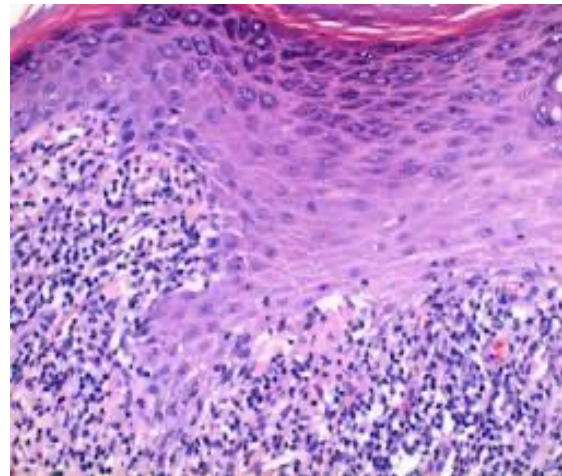
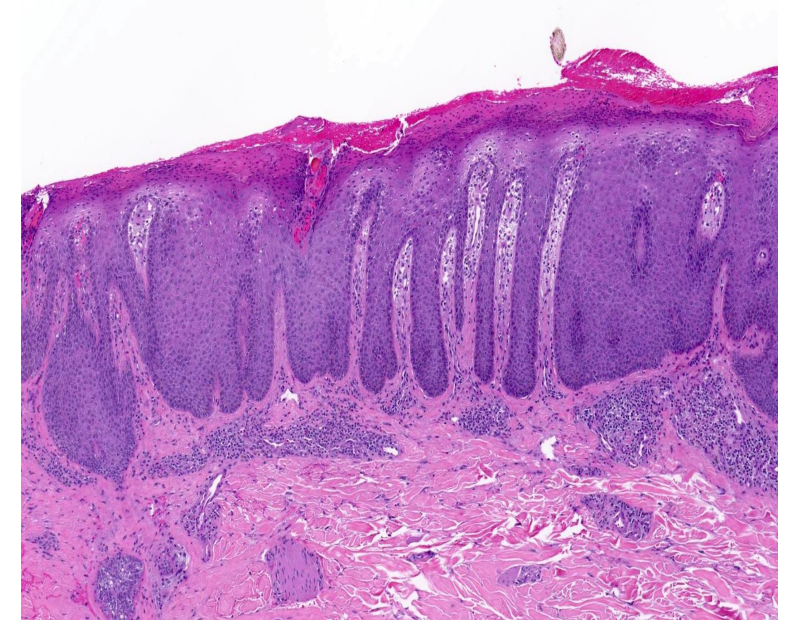
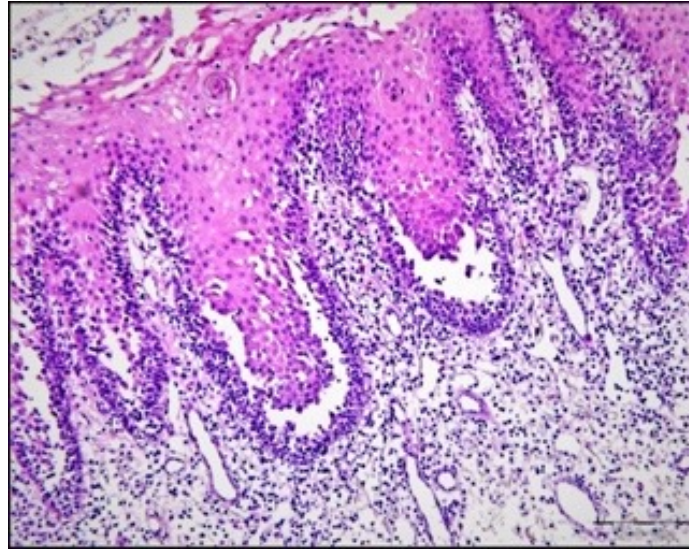
- A. 2,3,4
- B. 1,2,3,4,5
- C. 1,2,3,4
- D. 1,2,3,5

73. A study was conducted on two different samples for comparing variation between DBP and Vitamin D. The mean diastolic blood pressure is 110 with standard deviation 11 and the mean vitamin D level is 18 with standard deviation 3. Which of the following statement is true regarding the coefficient of variation (CV)?

- A. CV of DBP is more than Vitamin D**
- B. CV of Vitamin D is more than DBP**
- C. Both DBP and Vitamin D have equal variability**
- D. It cannot be ascertained from information provided**

74. Match the histological images with the correct diagnosis:

- A. Pemphigus
- B. Hailey hailey
- C. Psoriasis
- D. Lichen planus
- E. Melanoma
- F. BCC
- G. Mycosis fungoides



Options:

- A. 1- A, 2-D, 3-C, 4-F
- B. 1-A, 2-C, 3-D, 4-F
- C. 1-B, 2-C, 3-D, 4-G
- D. 1-B, 2-C, 3-D, 4-G

75. Identify the correct statements about malaria control:

1. Urban malaria scheme is based on anti-larval measures where $SPR > 5\%$
2. Rural malaria scheme is based on anti-adult measures with ITBN
3. Most efficient to control urban malaria is constant surveillance of cases
4. Synthetic pyrethroids are agents of choice for Sandfly

Options:

- A. 1,2,4
- B. 1,3,4
- C. 1,4
- D. 2,3

76. Identify the correct statements about LA:

1. Maximum methHb-Procaine
2. Most cardiotoxic- Bupivacaine
3. LA of choice in MH-Prilocaine
4. LA with vasoconstriction-Cocaine

Options:

- A. 1,4
- B. 1,2,3,4
- C. 2,4
- D. 1,3,4

77. Match the following:

A-Safe motherhood services and cash for institutional delivery

B-Designed for training health personnel

C-Freedays by ASHA

D-Prevent trafficking

1-JSY

2-JSSK

3- Ujjawala

4-Ujjwala

5-Ujala

6- kishori shakti yojana

7-Rashtriya Kishor Swasthya Karyakram

8- Navjat Sishu Suraksha Karyakaram

Options;

A. A-1,B-7, C-6, D-4

B. A-1,B-8, C-7, D-3

C. A-2,B-8, C-7, D-4

D. A-2,B-7, C-6, D-3

78. Match the following images in the extremities with the diagnosis:

- A. Diabetes
- B. Graves disease
- C. Lofgren syndrome
- D. Varicose veins
- E. Hypothyroidism
- F. IBD



Options:

- A. 1-E, 2-B, 3-F, 4-D
- B. 1-A, 2-B, 3-F, 4-D
- C. 1-D, 2-A, 3-B, 4-F
- D. 1-A, 2-B, 3-C, 4-F

79. All of the following are true except:

- A. Codex Alimentarius is the principal organ of the FAO/WHO food standards program**
- B. Vanaspati is fortified with 2500 IU of vitamin A and 175 IU of vitamin D**
- C. Methylene blue reduction test is the best test for efficacy of pasteurisation**
- D. Sudden onset of hypersecretory glaucoma, diarrhea, and cardiac failure is seen due to sanguinarine toxicity**

80. You are planning to administer spinal anesthesia to a young female. Which of the following needles would be the most suitable for reducing the risk of a post-dural puncture headache?

- A. 22G Quincke**
- B. 22G Whitacre**
- C. 25G Quincke**
- D. 25G Whitacre**

81. All are correct statements about Indian health care system except:

- A. One male health assistant is per 5000 population in plain areas and 3000 in hilly areas**
- B. Minimum number of beds in CHC is 30**
- C. Urban PHC caters to a population of 50000, which a metro CHC caters to 5 lakh population**
- D. School health program is managed by PHC**

82. Identify the incorrect statement in rapid sequence intubation?

- A. Preoxygenation with 100% oxygen for 3 minutes is done**
- B. High-volume low-pressure cuff Endotracheal tube is used**
- C. It is the method of choice in cardiac arrest patients**
- D. Induction agent and muscle relaxant are given simultaneously**

83. What is the probable diagnosis for a 38-year-old female who is experiencing substantial hair loss for 4 months and has a history of COVID-19 infection 8 months ago?

- A. Telogen effluvium**
- B. Androgenetic alopecia**
- C. Anagen effluvium**
- D. Trichotillomania**



84. Match the following:

A- Socratic communication with audience	1-Panel
B- Series of lectures followed by Q and A with audience	2-FGD
C- Best to teach people about ORS	3-Symposium
D- 6-12 people	4-Seminar
	5-Workshop
	6-Demonstrations

Options:

- A. A-1, B-3, C-4, D-2
- B. A-3, B-4, C-6, D-2
- C. A-1, B-3, C-6, D-5
- D. A-1, B-3, C-6, D-2

85. Identify the correct statements:

1. Most common cause for hospital admission after day care surgery is post-operative pain
2. Commonly used frequency of tetanic stimulation in neuromuscular monitoring is 2Hz.
3. Add 0.5 ml Heparin to the syringe before taking blood for ABG
4. Dobutamine stress echocardiography is the most accurate non-invasive investigation to predict risks of perioperative cardiac complications

Options:

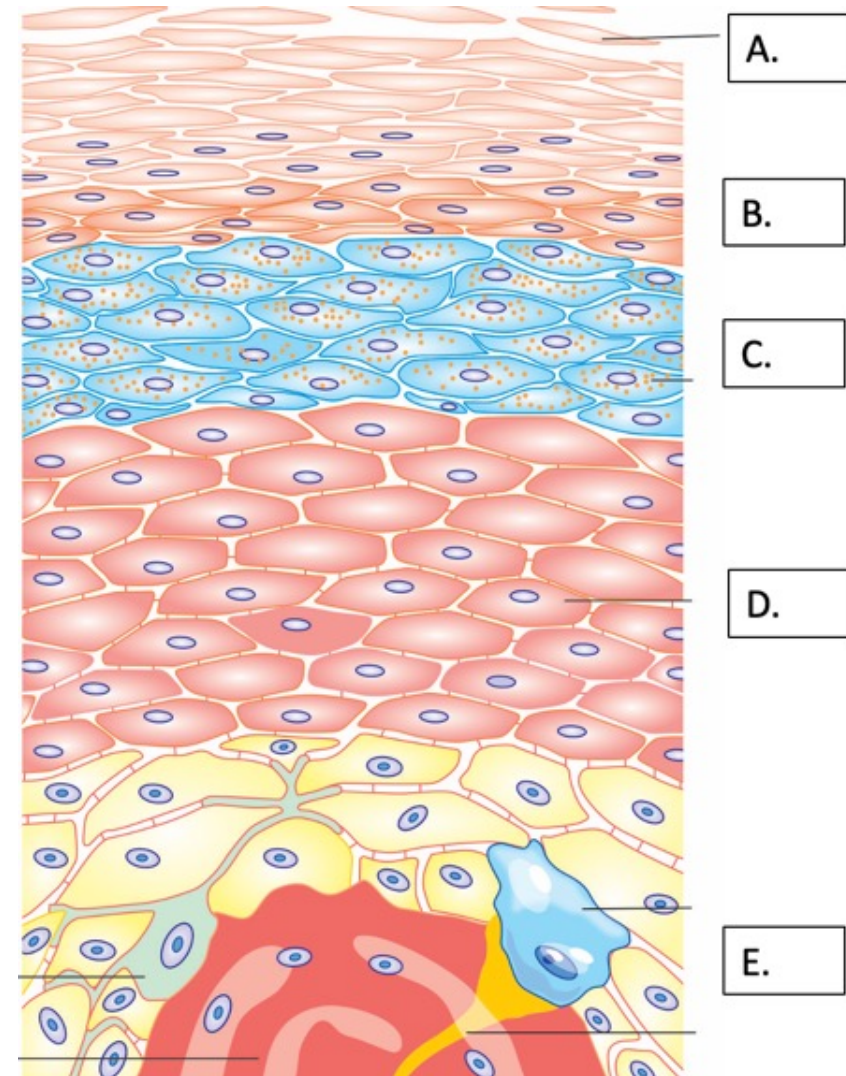
- A. 1,2,3,4
- B. 2,3,4
- C. 1,3,4
- D. 4

86. Identify the layer involved in the following disease:

1. Pemphigus foliaceus
2. Ichthyosis
3. Pemphigus vulgaris
4. LCH
5. Vitiligo

Options:

- A. 1-C, 2-B, 3-D, 4-E, 5-E
- B. 1-C, 2-C, 3-D, 4-D, 5-E
- C. 1-D, 2-B, 3-B, 4-D, 5-D
- D. 1-D, 2-B, 3-E, 4-A, 5-D



87. A patient of blunt chest trauma has been intubated and started on mechanical ventilation. Which of the following is not correct about the initial setting?

- A. Respiratory rate - 12 Breaths/ min**
- B. PEEP - 5 cm H₂O**
- C. FiO₂-100%**
- D. Tidal volume - 12 ml/kg of actual BW**

In a patient put on mechanical ventilation, ideal ventilatory settings are as given below. This is also called Lung Protective Ventilation.

- Tidal volume - 4-6 ml/kg of Ideal Body Weight
- Respiratory rate – 12-18 Breaths/ min
- FiO₂ - 100% to begin with and titrated to lesser values maintain spo₂> 95%
- PEEP - Begin with 5 cm H₂O

88. Identify the correct statements:

1. Direct observation with a structured checklist is the best method to survey the injection practices of health workers.
2. Mass drug administration done for Worm infestation, Vitamin A deficiency and Scabies.
3. Innermost circle of Rule of haves denotes hypertensives getting treatment.
4. Type A PHCs have >20deliveries per month

Options:

- A. 1,3,4
- B. 1,4
- C. 2,3,4
- D. 1

89. Following tube adds additional airway resistance. This is due to:

- A. Circumference of the tube
- B. Length of the tube
- C. Diameter of the tube
- D. Curvature of the tube



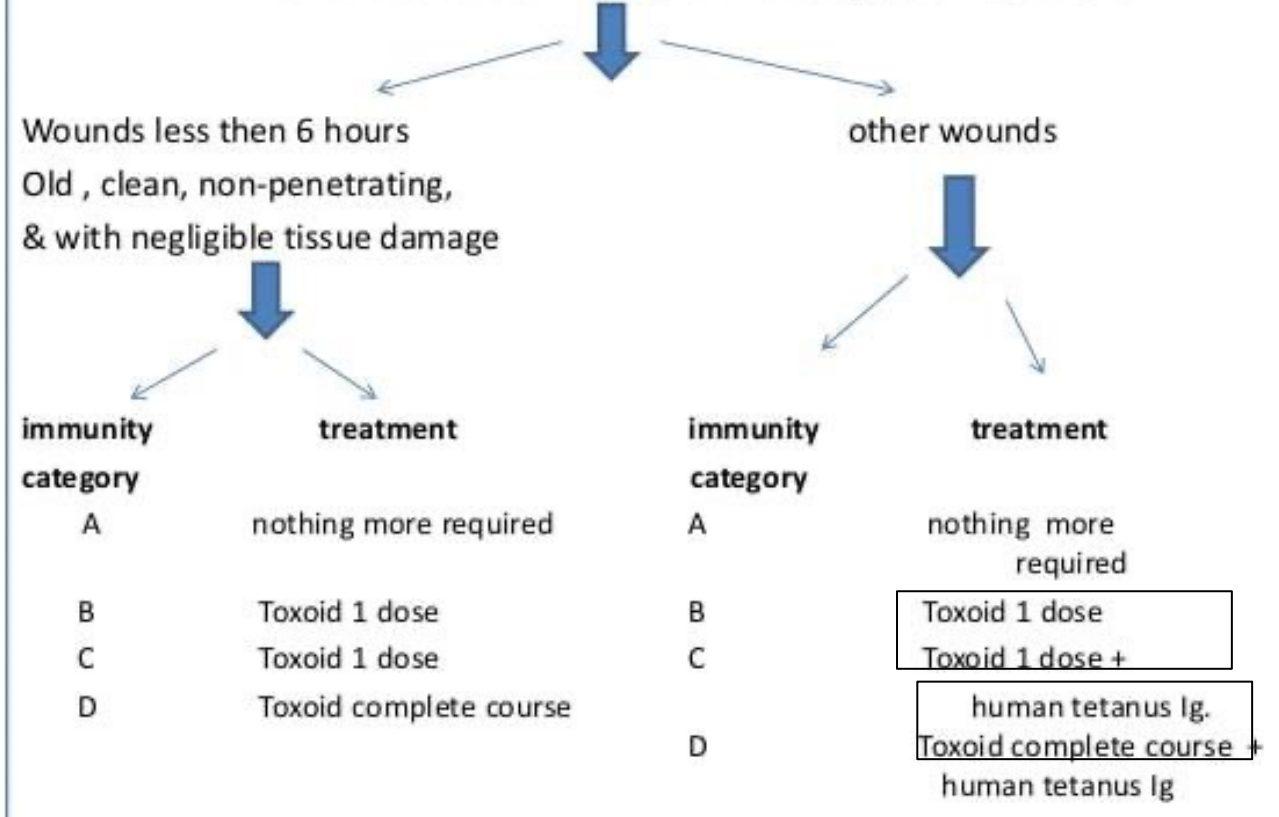
90. A patient comes with a history of clean-cut injury which is not lacerated. He says that he received his last dose of tetanus vaccination about 10 years ago. What should be given next?

- A. Full course of tetanus vaccination**
- B. Single dose tetanus toxoid**
- C. Tetanus toxoid + immunoglobulin**
- D. No vaccination needed**

Tetanus PEP

- A - has had a complete course of Toxoid or booster dose with in the past 5 year
- B - has had a complete course of Toxoid or booster dose more then 5 years ago & less then 10 years ago
- C - has had a complete course of Toxoid or a booster dose more then 10 year ago
- D - has not had a complete course of Toxoid or immunity status unknown

- All wound receive surgical toilet



91. Identify the correct statements about vaccines:

1. Influenza and yellow fever vaccines are CI in egg allergy
2. Abscess formation post-BCG is treated conservatively
3. Live vaccines should not be given with Human immunoglobulin except measles
4. All of the following are killed vaccines: Pertussis, Salk, SA14-14-2, 17D
5. NS is used as diluent for Danish 1331

Options:

- A. 1,2,3,4
- B. 1,3,5
- C. 1,2,3,5
- D. 1,5

BCG

MMR

Rotovac

JE SA 14-14-2

Typhoral-Ty21a

Varicella

OPV

17D

Rabies

Cholera-Dukoral

Pertussis

JE-Nakayama Beijing

IPV

92. Identify the correct pair of doses :

1. Max dose of lignocaine without adrenaline-300mg
2. Dantrolene sodium-2.5mg/kg
3. Intralipid 20% IV-1.5 mL/kg
4. Epinephrine in cardiac arrest-1mg 1:10000 iv

Options:

- A. 1,2,3,4
- B. 1,2,3
- C. 2,3,4
- D. 2,3

93. Match the following images with likely diagnosis:

A. Kerion

B. Favus

C. Black dot

D. Grey patch





Options:

A. 1-A, 2-B, 3-C, 4-D

B. 1-A, 2-B, 3-D, 4-C

C. 1-B, 2-A, 3-C, 4-D

D. 1-B, 2-A, 3-D, 4-C

1	
2	
3	
4	

94. Identify the type of study described in the scenario:

1. A researcher planning to study the aetiologies of Multiple sclerosis	A-Descriptive study
2. A study was conducted among a group of 300 patients with thyroid cancer and another group of 300 people chosen from the general population. Both the groups were questioned about their exposure to smoking.	B-Ecological study
3. Study to correlate dietary habits of different countries with association of obesity	C-Case control
4. Researchers are interested in calculating the Relative risk between long-term coffee consumption and the risk of developing type 2 diabetes	D-Cohort study
	E-Cross-sectional study

- A. 1-A, 2-B, 3-C, 4-D
- B. 1-E, 2-C, 3-B, 4-D
- C. 1-E, 2-C, 3-B, 4-A
- D. 1-A, 2-C, 3-B, 4-D





95. Identify the correct statements about lower extent of the following structures:

1. Subarachnoid space-Lower border of S2
2. Filum terminale-Coccyx
3. Spinal cords in infants-Lower border of L3
4. Adult spinal cord-Lower border of L1





Options:

- A. 1,2,3,4
- B. 1,2
- C. 1,2,3
- D. 1,2,4

96. Identify the incorrect pair

A. NACO	 The logo for Suraksha Clinic, featuring a red square with a white cross, followed by the text "suraksha clinic" in a sans-serif font.
B. NTEP	 The logo for Nikshay, featuring a smartphone icon with a blue hand cursor pointing at it, followed by the word "nikshay" in a stylized orange font.
C. NPCDCS	 A green awareness ribbon, a symbol commonly used for HIV/AIDS awareness.
D. NLEP	 An illustration of a young girl with a green backpack, wearing a yellow top and a pink floral skirt, walking towards the right.

97. A 35-year-old woman presents to a PHC with skin lesions with sensory loss. On examination, the dermatologist observes the following morphology. How would you treat this patient?

A.	
B.	
C.	
D.	





PB adult blister pack

PB adult treatment:

Once a month: Day 1

- 2 capsules of rifampicin (300 mg X 2)
- 1 tablet of dapsone (100 mg)

Once a day: Days 2-28

- 1 tablet of dapsone (100 mg)

Full course: 6 blister packs



PB child blister pack

PB child treatment (10-14 years):

Once a month: Day 1

- 2 capsules of rifampicin (300 mg+150 mg)
- 1 tablet of dapsone (50 mg)

Once a day: Days 2-28

- 1 tablet of dapsone (50 mg)

Full course: 6 blister packs

For children younger than 10, the dose must be adjusted according to body weight.



MB adult blister pack

MB adult treatment:

Once a month: Day 1

- 2 capsules of rifampicin (300 mg X 2)
- 3 capsules of clofazimine (100mg X 3)
- 1 tablet of dapsone (100 mg)

Once a day: Days 2-28

- 1 capsule of clofazimine (50 mg)
- 1 tablet of dapsone (100 mg)

Full course: 12 blister packs



MB child blister pack

MB child treatment (10-14 years):

Once a month: Day 1

- 2 capsules of rifampicin (300 mg+150 mg)
- 3 capsules of clofazimine (50 mg X 3)
- 1 tablet of dapsone (50 mg)

Once a day: Days 2-28

- 1 capsule of clofazimine every other day (50 mg)
- 1 tablet of dapsone (50 mg)

Full course: 12 blister packs

For children younger than 10, the dose must be adjusted according to body weight.

98. What is the appropriate size for ET tube for child aged 8?

A. 6mm

B. 7mm

C. 8mm

D. 9mm

99. Identify the correct pair about clinical trial phases:

- A. Therapeutic efficacy confirmed-Phase II**
- B. Dose ranging-Phase III**
- C. Maximum tolerable dose evaluation-Phase I**
- D. Max drug failure rate-Phase IV**

100. All of the following are true about paediatric airway:

1. High position of larynx opposite C3-C4 allows simultaneous breathing while feeding
2. Thyroid cartilage is angulated
3. Larynx is softer and more collapsible
4. Shape of the laryngeal inlet is cylindrical

Options:

- A. 1,2,3
- B. 1,3
- C. 1,3,4
- D. 2,3,4



PSM, Anaesthesia, Dermatology
BTR Test

Cerebellum
Get the balance right

1. 28-year-old woman comes to the physician for evaluation of a rash on her left foot. A week ago, she noticed multiple lesions on the sole of her foot that are painful with walking or standing. The patient has no other medical conditions. Her only medication is an oral contraceptive. She has no history of tobacco or alcohol use. She works as an accountant. The patient has had 2 sexual relationships in the past 3 years and has been sexually active with her current boyfriend for the past 6 months. Her temperature is 36.1 C (97 F), blood pressure is 128/76 mm Hg and pulse is 78/min. Skin examination is shown below. The remainder of her physical examination is within normal limits.

Which of the following is the most likely **etiology** for this patient's findings?

A. Callus

~~B.~~ Human papillomavirus infection → pain

C. Lichen planus ✗ ✗

D. Plantar fasciitis ✗ ✗

Plantar warts



2. You are a healthcare provider working in a community clinic. A 29-year-old male patient presents to your clinic with complaints of persistent fatigue, unexplained weight loss of approximately 10kg over the past three months, and recurrent episodes of night sweats. He admits to engaging in **unprotected sexual intercourse with multiple partners** and sharing **needles** for intravenous drug use in the past. He has a history of a RTA 1 year back for which he received iv fluids and **blood transfusion**. On physical examination, you observe generalized lymphadenopathy and a rash on his trunk. (Which of the following is the most efficient route of transmission of the likely infection in this case?)

most likely

HIV

A. Sexual

~~B. Blood~~

C. Needles

D. Vertical

Sexual

Cerebrum
Get the balance right

	<u>Efficiency/Risk</u>
Sexual transmission	0.01-1%
Blood	90%
Needles	0.3% \neq
Vertical	30%



BLS : ABCDE — trauma
CAB

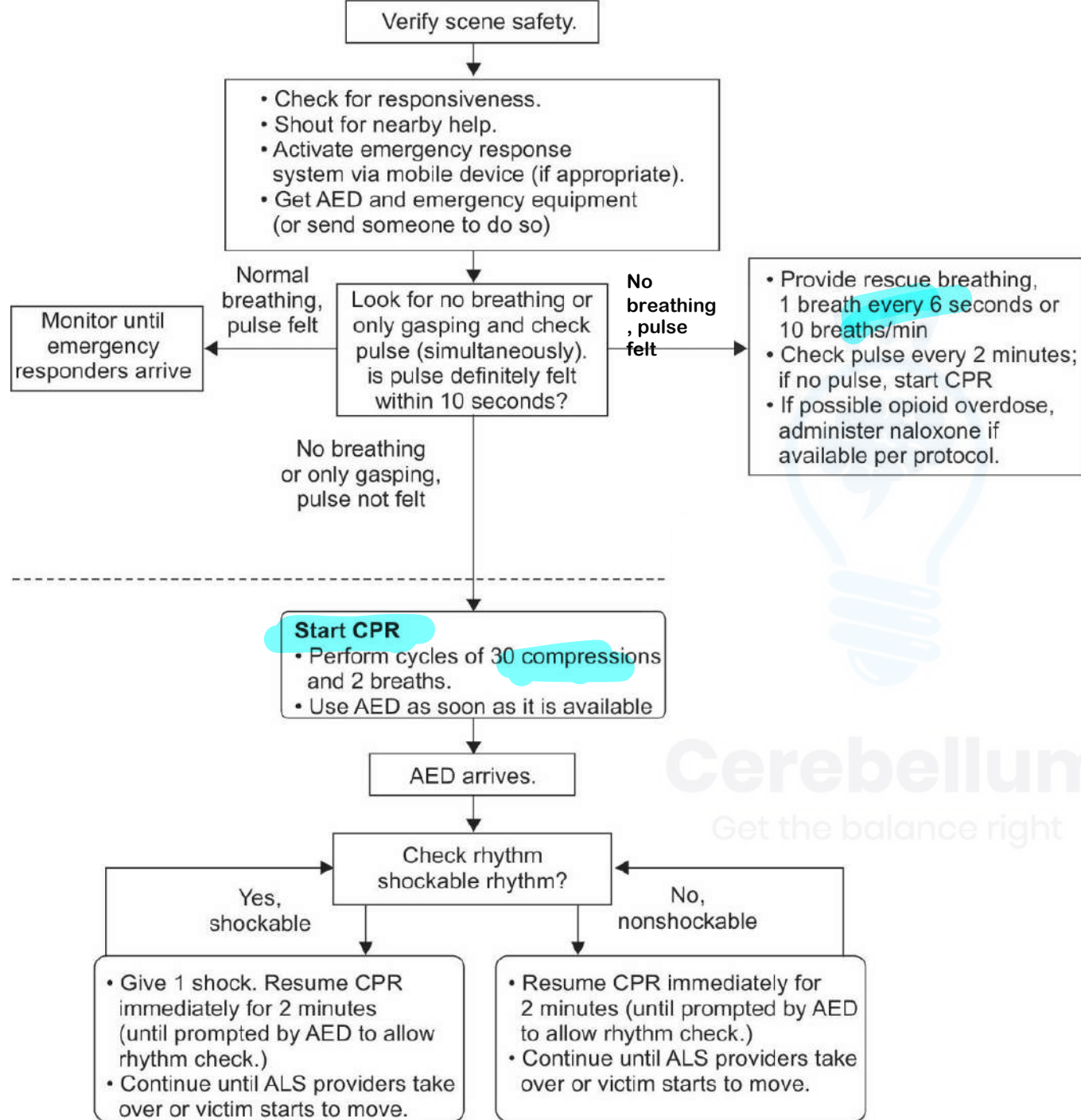
3. You are in a public park when you notice a person suddenly collapse and fall to the ground. You approach the individual to assess their condition. They are unresponsive, not breathing, and there is no pulse. What should be your immediate action?

A. Begin chest compressions at a rate of 100-120 per minute

B. Administer rescue breaths immediately^x

C. Check their airway for obstruction^x

~~D. Call 112~~ — 108 - ambulance
ERS



Cerebellum
Get the balance right



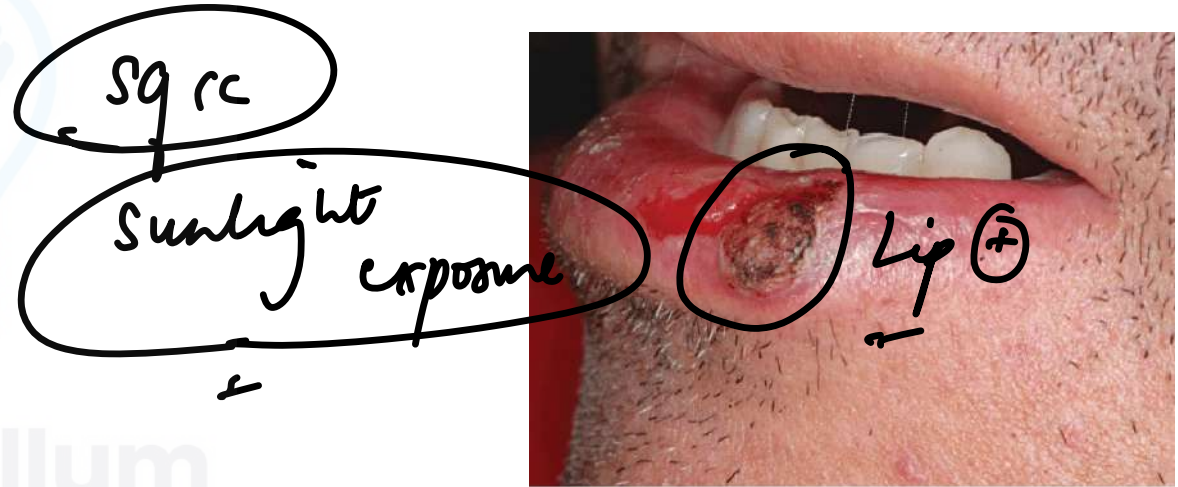
4. 40-year-old man comes to the office due to a slightly painful sore on his lip which has been enlarging for the last 3 months. Past medical history is unremarkable. The patient does not use alcohol, tobacco, or illicit drugs. He works as a farmer and has no new sexual contacts. Vital signs are normal. Examination shows a 3x7-mm partially encrusted ulcer in the vermilion zone of the lower lip, surrounded by a 6x12-mm area of induration. There are no palpable submental or submandibular lymph nodes, and the remainder of the physical examination is unremarkable. Biopsy of this lesion will most likely show which of the following?

A. Giant cells in a Tzanck preparation

B. Granulomatous inflammation

~~C.~~ Invasive cords of squamous cells with keratin pearls

D. Invasive clusters of spindle cells surrounded by palisaded basal cells



5. Emporiatics is a term often used in the field of medicine. What best describes the concept of emporiatrics?

- A. The study of diseases affecting the elderly population and their treatment.
- B. The branch of medicine that focuses on the prevention and treatment of diseases in travelers and those exposed to new environments.
- C. The practice of traditional medicine in rural areas, often using herbal remedies and ancient healing techniques.
- D. The study of psychological disorders and their treatment, particularly in children and adolescents.

Cerebellum

Get the hang of it!

6. You are conducting a systematic review and meta-analysis to assess the **publication bias** in studies investigating the efficacy of a new drug for a rare medical condition. As part of your analysis, you decide to create a **funnel plot** to visualize potential publication bias. You gather data from 20 relevant studies and calculate effect sizes for each study. After plotting these effect sizes against their corresponding standard errors, you notice that the funnel plot appears **asymmetrical**, with a gap on one side. What is the most appropriate interpretation of the **asymmetrical funnel plot** in this context?

Funnel = Publication bias

- A. The asymmetrical funnel plot suggests that the studies with smaller sample sizes tend to report larger effect sizes, indicating potential bias. ✓
- B. An asymmetrical funnel plot is an expected result when conducting a meta-analysis and does not require further investigation. ✓
- C. The funnel plot's asymmetry is indicative of the heterogeneity of study designs and does not reflect publication bias. ✗
- D. The asymmetrical funnel plot is a result of errors in data collection and analysis, and the meta-analysis should be repeated with corrected data. ✗

7. Match the following with the appropriate diagnosis:

- a. Lichen planus
- b. Anti-synthetase syndrome
- c. Osteoarthritis
- d. Dermatomyositis



Gottron papules

DM

LP

(H)/B
DA

Mechani

ACC

Options

A. 1-a, 2-d, 3-c, 4-b

B. 1-a, 2-d, 3-b, 4-c

~~C. 1-d, 2-a, 3-c, 4-b~~

D. 1-d, 2-a, 3-c, 4-d

D. 1-d, 2-a, 3-c, 4-d

8. Match the following scale types with their lesions?

~~A. 1-b, 2-c, 3-d, 4-a~~

B. 1-a, 2-b, 3-d, 4-c

C. 1-d, 2-c, 3-a, 4-b

D. 1-c, 2-b, 3-d, 4-a

Scales	Disease
1. Collarette scales	a. Pityriasis versicolor
2. Silvery scales	b. Pityriasis Rosea
3. Mica like scales	c. Psoriasis
4. Branny scales	d. Pityriasis lichenoides chronica

9. You are preparing to intubate a patient in the operating room. As part of your preoperative assessment, you perform a Mallampati examination to assess the patient's airway. Identify the class from the image shown below?

PUSH

A. Mallampati Class I

B. Mallampati Class II - U

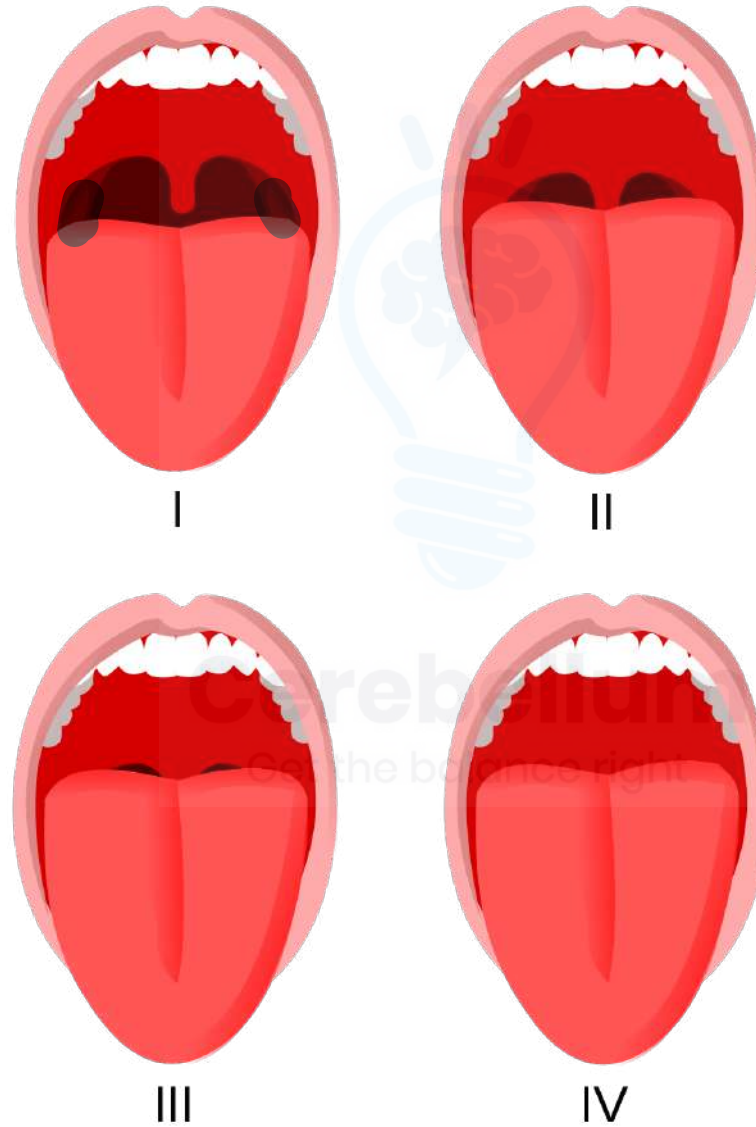
~~C.~~ Mallampati Class III

D. Mallampati Class IV only HP



Cerebellum
Get the balance right

⑥ → epiglottitis



10. 42-year-old man comes to the office due to an itchy rash. The rash began 3 months ago during the summer since then has enlarged and spread across his back, chest, and abdomen. The patient has attempted treatment with topical emollients and over-the-counter hydrocortisone cream without relief. Examination reveals scaly, annular plaques, as shown in the exhibit. In addition to appropriate measures for treatment of the rash, which of the following should be done at this time?

• (ic) / DM / steroids

A. Antinuclear antibody assay x

B. Hepatitis B serology x HCV → LP

C. HIV screening test

D. Rule out beta blocker usage → psoriasis

Tinea corporis



11. You are a MO at a Subcentre Chhainsa and have scheduled a vaccination drive tomorrow. Identify the device and number of Vaccine vials that should be kept inside this box:

A. Day carrier, 2-4

B. Vaccine carrier, 4-8

~~C.~~ Vaccine carrier, 16-20

D. Portable-ILR, 24-32

Day carrier : 6-8 vials
↳ village

S/C : 16-20 vials

PHC : ILR 8/mon



12. Match the following Mapleson circuits with the features described:

- A. 1-c, 2-a, 3-d, 4-b
- ~~B.~~ 1-b, 2-a, 3-d, 4-c
- C. 1-d, 2-a, 3-b, 4-c
- D. 1-c, 2-a, 3-b, 4-d

a. Most effective for spontaneous ventilation

A - Magill / Lach

1. Bain's circuit

b. Most effective for controlled ventilation

D - Bain

2. Magill's circuit

c. Used in emergency intubations

AMBu

3. Jackson Rees circuit

d. Most effective in pediatric population

E F

4. Type C circuit

13. A 28-year-old female presents to her healthcare provider seeking contraception. She has no significant medical history to hormonal contraceptives. Due to her poor socio-economic status, the health care provider suggests the OCPs available free of cost under NFWP. What is the composition of the OCP?

Mala - N

- A. Ethinyl estradiol 0.03 mcg, Levonorgestrel 0.15 mcg, Fe fumarate 30mg
- B. Ethinyl estradiol 30 mcg, Levonorgestrel 150 mcg, ~~Fe sulphate 60mg~~
- C. Ethinyl estradiol 0.03 mg, Levonorgestrel 0.15 mg, Fe fumarate 60mg
- D. Ethinyl estradiol 0.03 mg, Levonorgestrel 0.15 mg, ~~Ee sulphate 30mg~~

30 mg

150 mg

FF 60mg

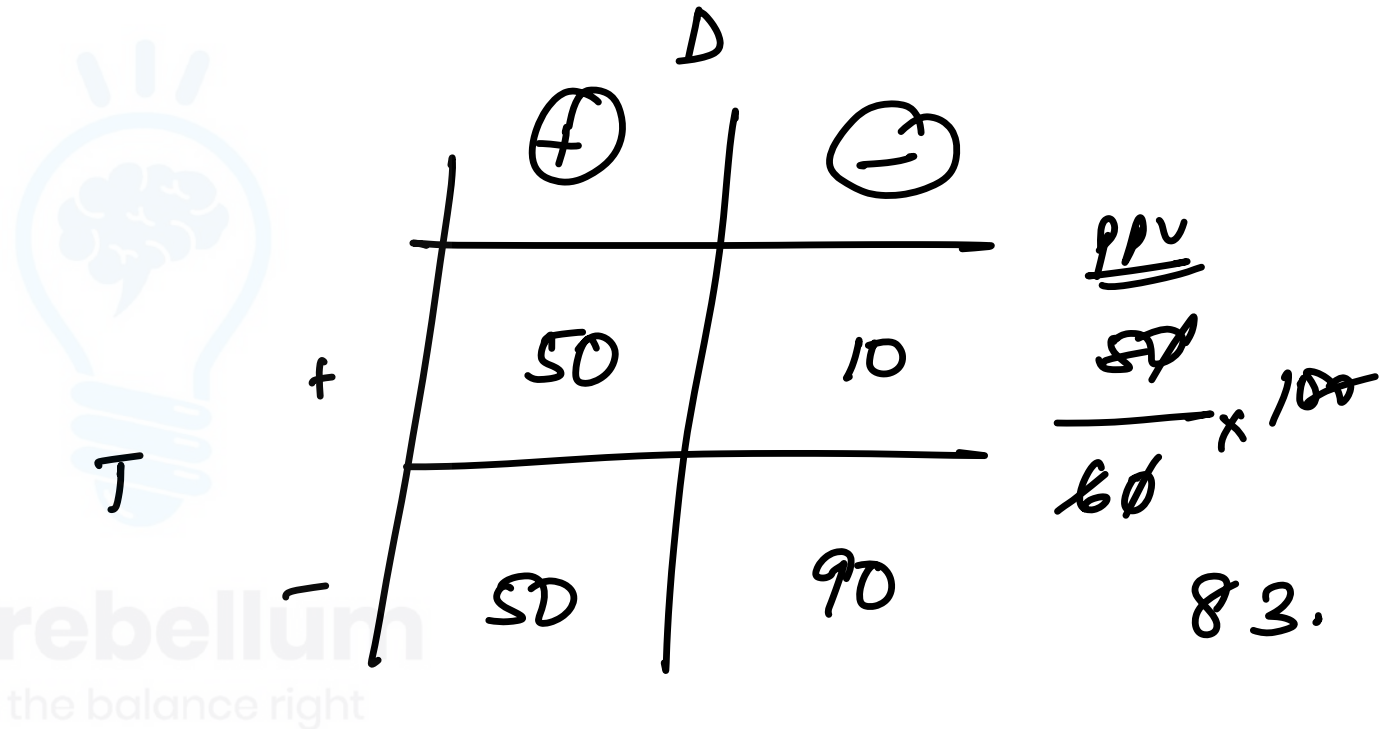
14. A screening test is positive in 50% diseased population and 10% healthy population. Calculate the PPV:

~~A. 83~~

B. 90

C. 50

D. 89



15. 16-year-old girl is brought to the office due to hair loss. Over the last few months, she has developed a few patches of hair loss on the scalp as shown in the image. The lesions are associated with mild itching just before the loss of hair but are otherwise asymptomatic. Medical history is unremarkable; the patient's only current medication is an oral contraceptive. She does not use tobacco, alcohol, or illicit drugs. Vital signs are normal. Which of the following is the most appropriate next step for this patient's hair loss?

A. Cognitive behavioural therapy ~~xx~~

B. Intralesional triamcinolone

C. Oral griseofulvin ~~xx~~

D. Topical minoxidil ~~xx~~



AA

patchy non-scarring

16. You are the team leader during a cardiac arrest resuscitation scenario in a hospital setting. A 65-year-old patient has suddenly collapsed and is unresponsive. The monitor displays a rhythm as shown in the image. What is the next immediate step?



A. Administer epinephrine

B. Begin high-quality CPR

C. Defibrillate at 360 joules

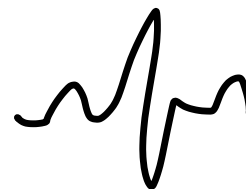
D. Administer MgSO₄

Cerebellum
Get the balance right

V Fib

Shockable

→ CPR

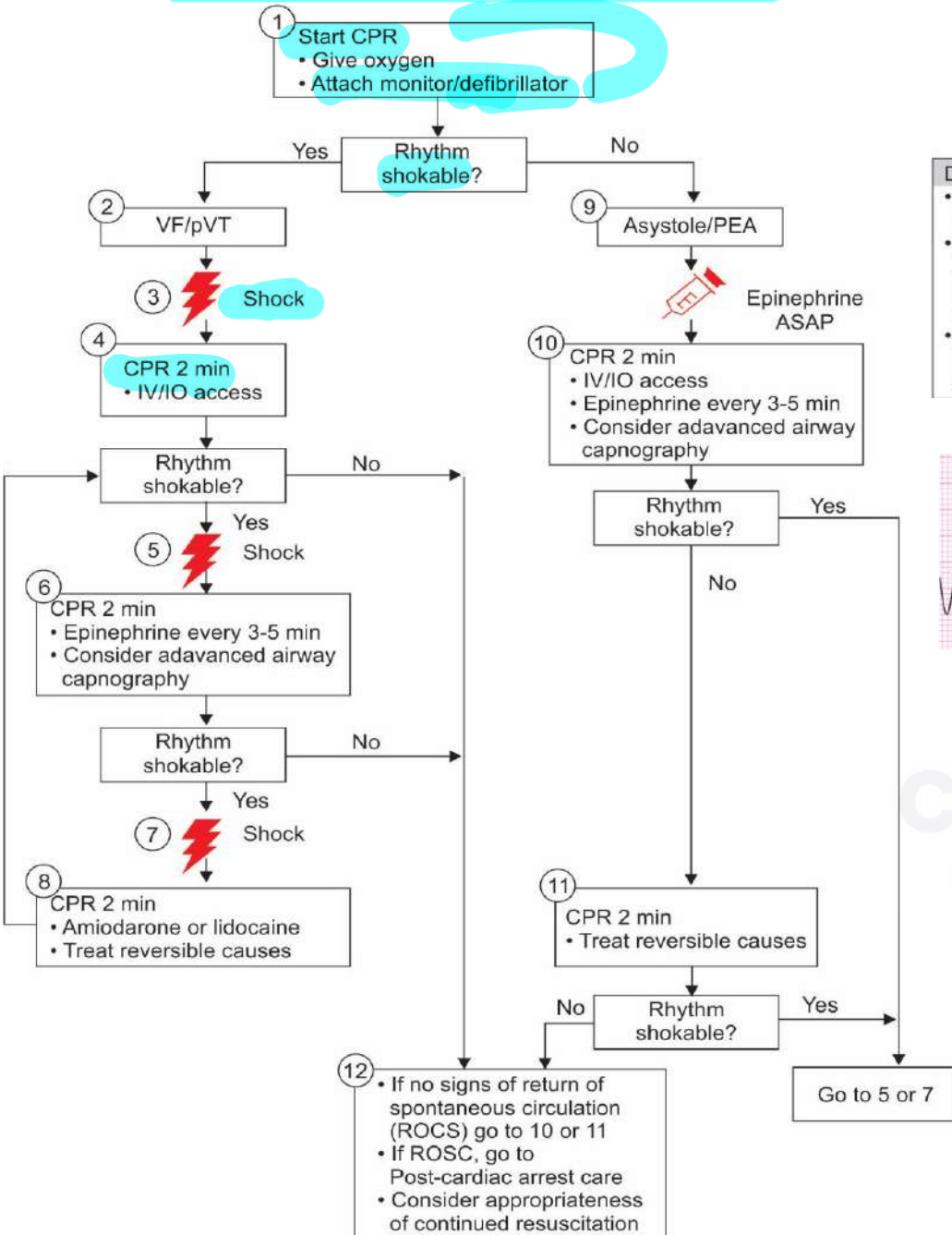


Next:

Epi

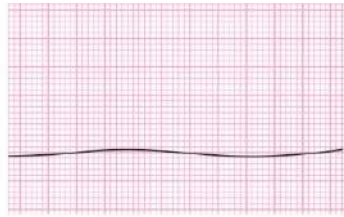
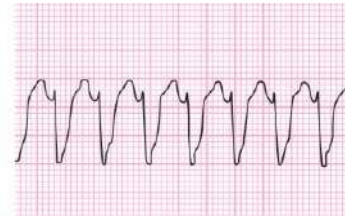
↓
CPR

Adult cardiac arrest algorithm (VF/pVT/Asystole/PEA)



Drug therapy

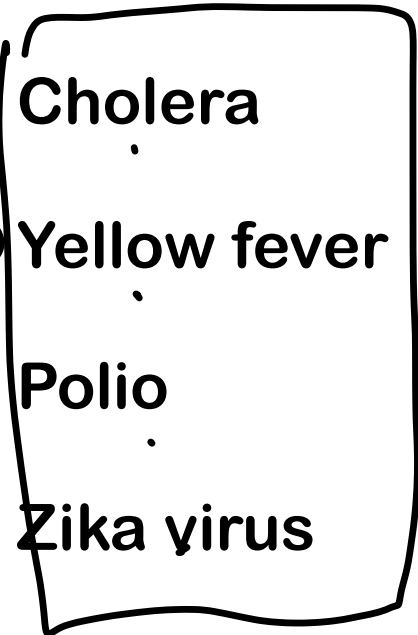
- Epinephrine IV/IO dose: 1 mg every 3-5 minutes
- Amiodarone IV/IO dose: First dose: 300 mg bolus, second dose: 150 mg or
- Lidocaine IV/IO dose: First dose: 1-1.5 mg/kg second dose: 0.5-0.75 mg/kg.



Cerebellum
Get the balance right

17. In the context of the World Health Organization's International Health Regulations (IHR), "immediately notifiable diseases" refer to specific diseases that must be reported to the WHO. What is the time period to report them and the diseases included in the list? Identify the correct pair:

- A. 12hrs, Cholera
- B. 24hrs, Yellow fever
- C. 48hrs, Polio
- D. 96hrs, Zika virus



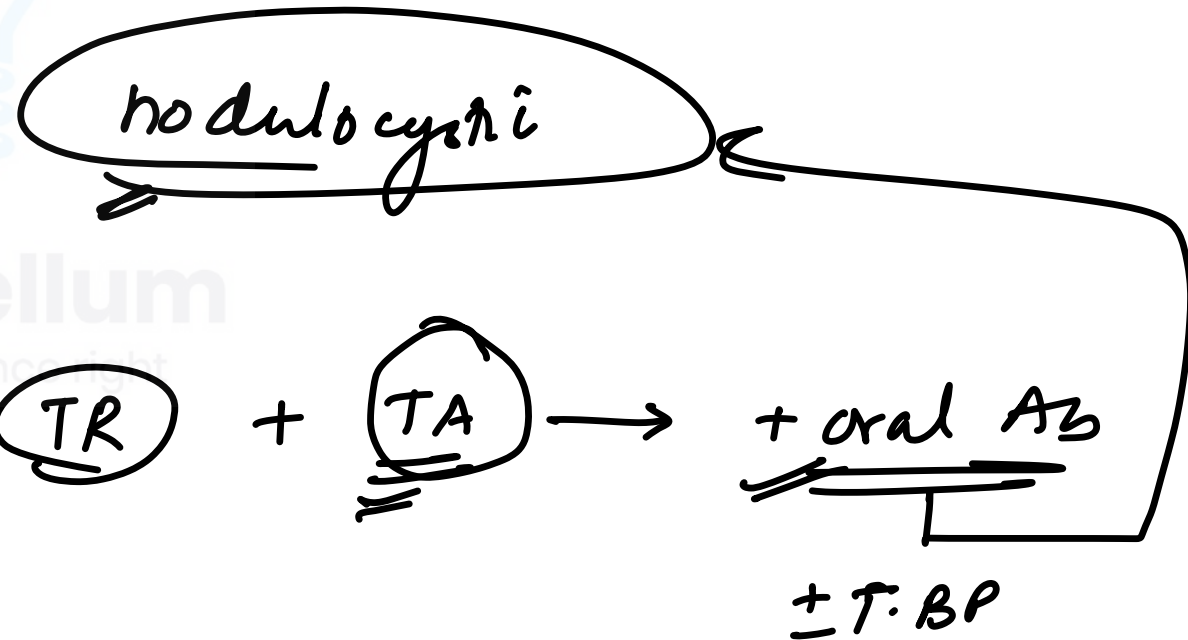
• SARS

< 24hrs

Polio - 72 hrs
AFP

18. A 17-year-old boy comes to the physician complaining of worsening acne. He has scattered papules and pustules with mild-to-moderate redness at the forehead, nose, and chin. His acne has been present for 2 years. The lesions are not painful, but the boy is concerned as the symptoms have progressively worsened and his peers at school are starting to make fun of him. He currently uses topical tretinoin and washes his face twice daily with benzoyl peroxide. His medical history is otherwise negative. On examination, he has moderate pustular acne with erythema but no scarring. Which of the following is the best next step in management of this patient?

- A. Add oral minocycline
- B. Add topical erythromycin
- C. Add topical salicylic acid
- D. Switch to oral isotretinoin x x



19. Identify the cylinder:

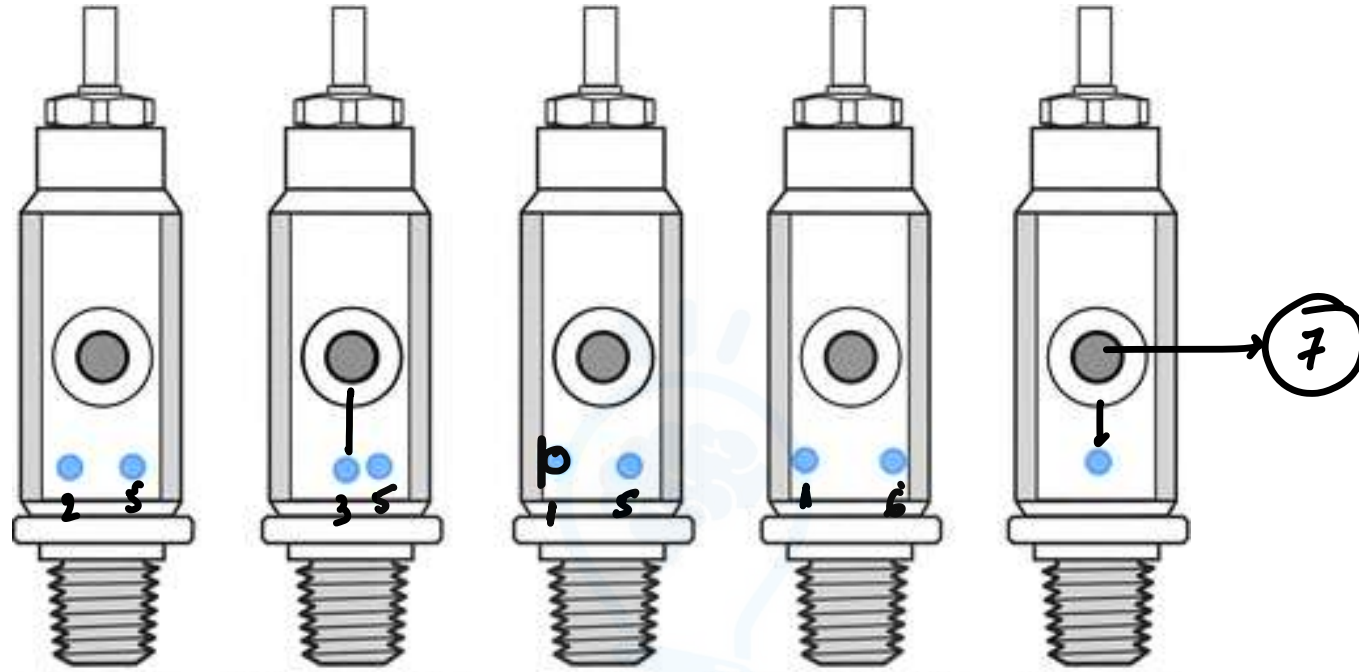
A. O₂

B. CO₂

C. N₂O

D. Air





Oxygen
(2,5)

Nitrous oxide
(3,5)

Air
(1,5)

Carbon dioxide
(1,6)

Entonox
(7)

3

Cerebellum
Get the balance right

3
000000
3/4
3
0
1 2 0 5 6
0 0 0 0

20. The following are types of rapid molecular tests under NTEP except:

A. LPA ✓

B. TrueNAAT ✓

C. CBNAAT ✓

D. MGIT960

Culture



Cerebellum
Get the balance right

21. 35-year-old man comes to the office due to a 2-month history of a skin lesion on his lower back. He noticed a similar lesion in the same location 6 months ago, which spontaneously resolved after 3 weeks. The patient recalls minor trauma at this site few months ago. There is no associated pruritus, pain, or other symptoms. His medical history is unremarkable, and he has no history of tobacco or alcohol use. Vital signs are within normal limits. Skin examination shows a firm, mobile nodule, as shown in the image below. There is no drainage from the lesion or tenderness to palpation. The lesion does not change shape when pinched at the edges. The remainder of the physical examination is within normal limits. Which of the following is the most likely diagnosis?

A. Dermatofibroma

B. Epidermal inclusion cyst

C. Lipoma

D. Squamous cell carcinoma

Buttonhole sign - NFI

dimpling

Epidermoid cyst



xx

22. The following are useful in the measurement of the index shown in the image:

AQI

- 1. PM10 ✓
- 2. ~~PM5~~
- 3. NO2 ✓
- 4. SO2 ✓
- 5. O3 ✓
- 6. NH3 ✓
- 7. PM2.5 ✓

CO
Pb

air pollutants

Good (0 to 50)	Minimal impact
Satisfactory (51 to 100)	May cause minor breathing discomfort to sensitive people
Moderately Polluted (101 to 200)	May cause breathing discomfort to the people with lung disease such as asthma and discomfort to people with heart disease, children and older adults
Poor (201 to 300)	May cause breathing discomfort to people on prolonged exposure and discomfort to people with heart disease
Very Poor (301 to 400)	May cause respiratory illness to the people on prolonged exposure. Effect may be more pronounced in people with lung and heart diseases
Severe (401 to 500)	May cause respiratory effects even on healthy people and serious health impacts on people with lung/heart diseases. The health impacts may be experienced even during light physical activity

Options;

- A. ~~1,2,3,4,5,6,7~~
- B. 1,3,4,5,6
- C. 1,3,4,5,6,7
- D. ~~1,2,6,7~~

23. What will be the 95% confidence interval (CI) for an estimated prevalence of 10% and a sample size of 100?

A. 2-18

B. 4-16

C. 7-13

D. Given data inadequate for calculation of class intervals

$SE_{prop} = \sqrt{\frac{pq}{n}}$

$= 3$

$10 \pm 2SE$

$= \sqrt{\frac{10 \times 90}{100}}$

10 ± 6

Carbalkum
Get the balance right

24. Identify the correct diagnosis:

A. Marjolin ulcer

= sq cc
in an
ulcer



BCC

B. HSV-1 reactivation

VZV



C. Darrier disease



Akanthosis
malignans
metab So . MOD

D. Scleroderma



salt & pepper
pigment

25. Identify the disease transmitted by the vector shown in the image:

A. Epidemic typhus - Louse

B. Endemic typhus

C. Q fever Soft tick / no vector

D. Scrub typhus - Mite



Flea

26. 20 accidental pregnancies happen after 100 women used a new contraceptive device for 2 yrs. What is the pearl index?

A. 0.1

B. 1

C. 5

D. 10



$$\frac{20}{24 \times 100} \times 1200$$

2

Cerebellum
Get the balance right

$$\frac{20}{\text{months} \times \text{♀}} \times 1200$$

27. Which is the inhalational agent not preferred for induction of anesthesia in children?

A. Halothane

B. N₂O

C. Sevoflurane

D. Desflurane

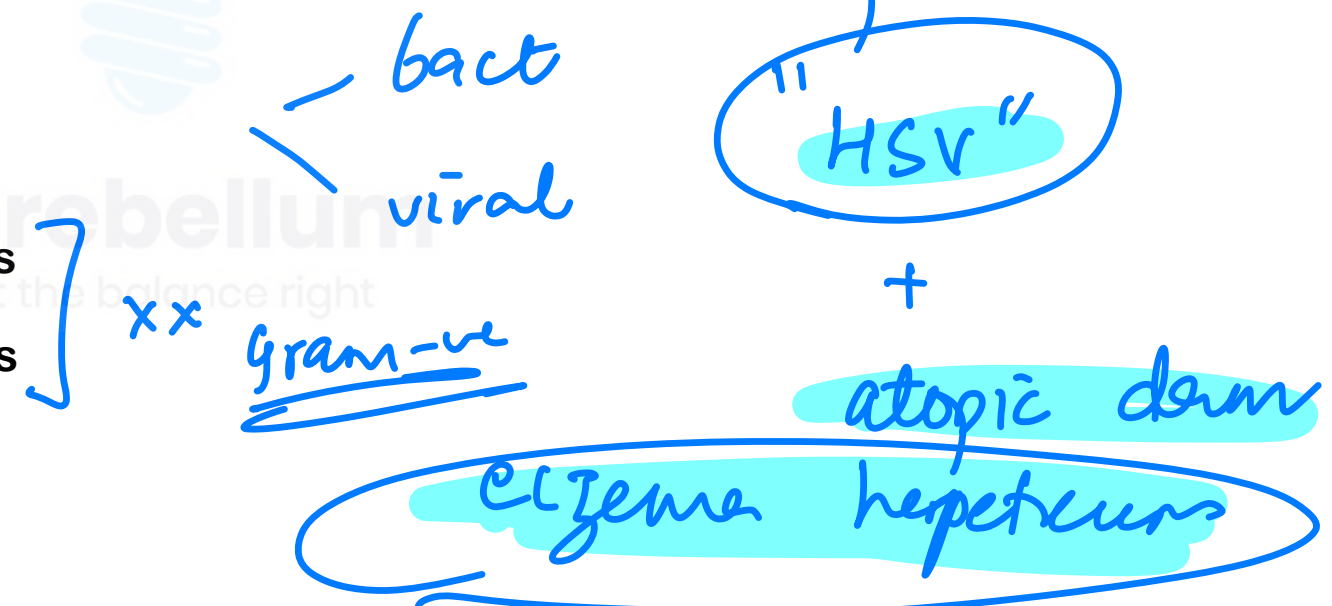
Comp A

-pungent

Cerebellum
Get the balance right

28. 18-month-old boy is brought to the emergency department due to fever and facial rash for 2 days. The patient has a history of atopic dermatitis for which his parents occasionally apply over-the-counter steroid cream. The boy had a flare-up of dry, thickened, itchy skin on his cheeks 4 days ago. He then developed many overlying, painful bumps 2 days ago that have since increased in number. His vaccinations are up to date. Physical examination shows an uncomfortable-appearing child with numerous painful, clear vesicles over erythematous skin on both cheeks as well as a few scattered lesions with overlying dark-red crusting. Submandibular lymphadenopathy is present. The rest of the skin appears dry. The initial gram stain of one of the lesions is negative. Which of the following is the most likely etiology of this patient's rash?

- A. Herpes simplex virus
- B. Methicillin-resistant Staphylococcus aureus
- C. Methicillin-sensitive Staphylococcus aureus
- D. Varicella zoster infection



29. Identify the correct pair of recommendations made by committees:

1. Srivastava committee - ^{ASC} 3.5yr course for rural Community health officers ^{ELG}
2. Bhore committee - 3 million plan (F)
3. Mukherjee committee - Delink malaria from family planning activities (T)
4. Kartar Singh - MPW for health and family planning (T)
5. Bajaj committee - Urban revamping scheme (F)
Krishnan

Options:

- A. 1,2,3
- B. 2,3,4,5
- ~~C. 2,3,4~~
- D. 1,2,4,5

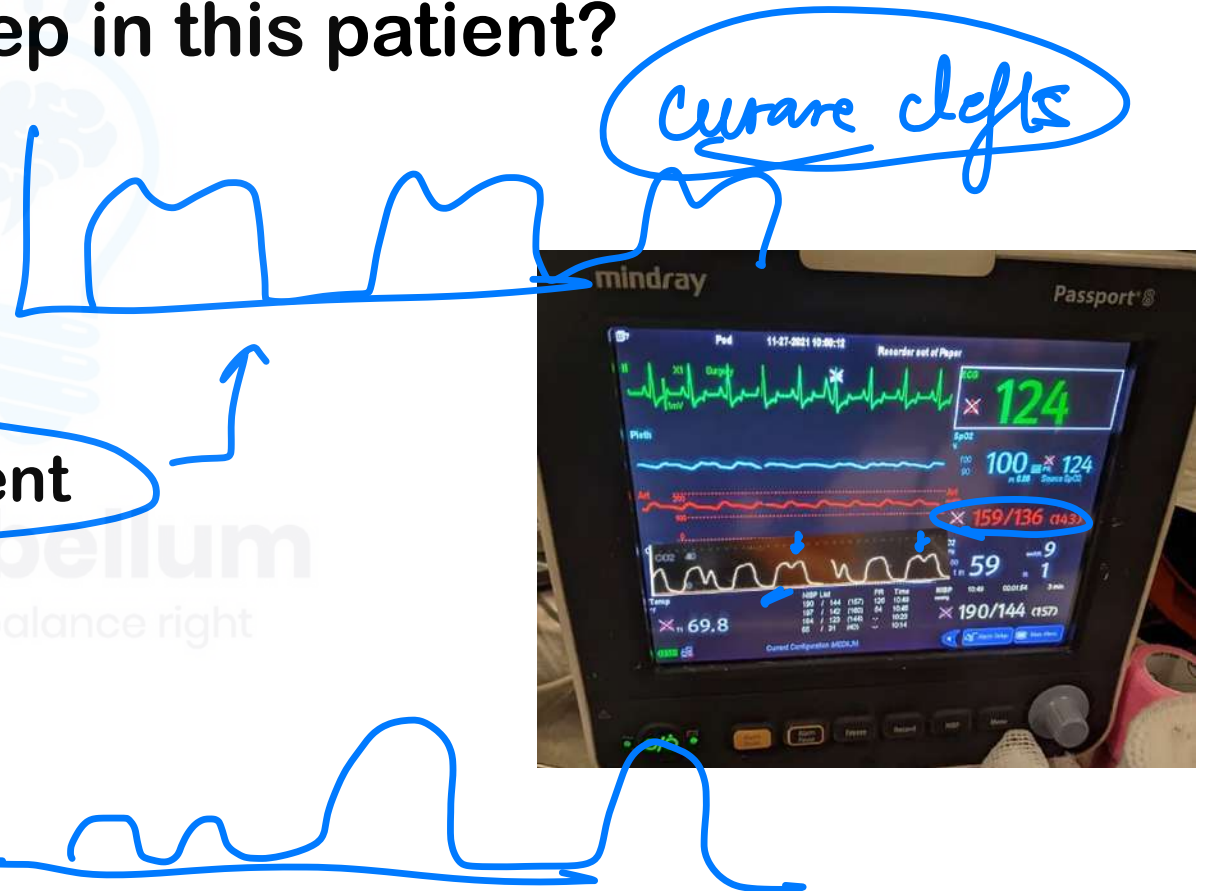
30. You are a very smart intern and the anaesthetist on duty trusts you with monitoring a patient after induction while he goes to the next case and asks you to give any medications if needed. You keep observing the monitor continuously and is shown in the image below. What is the next step in this patient?

A. Inject IV dantrolene sodium

B. Administer top up NM blocking agent

C. Reassure yourself that "all is well"

D. Ask surgeon to limit blood loss



31. 28-year-old woman comes to the office due to worsening of a skin rash on her back and arms for the past 2 weeks. She has had no associated pain or pruritus. During her teenage years, the patient had comedonal acne on her face, which resolved with topical medications. She was diagnosed with systemic lupus erythematosus 2 years ago and is on oral prednisone due to a recent exacerbation of renal flair. The patient also takes hydroxychloroquine and as-needed nonsteroidal anti-inflammatory drugs. She does not use tobacco, alcohol, or illicit drugs. She works in a dry-cleaning facility. The patient is sexually active with her boyfriend and takes OCP. Temperature is 37 C (98.6 F), blood pressure is 130/86 mm Hg, and pulse is 78/min. Skin examination shows uniform-appearing, 1- to 3-mm, erythematous papules across her back, shoulders, and upper arms. There is mild symmetric synovitis in the hands and wrists, but the remainder of the physical examination is unremarkable. Which of the following is the most likely cause of this patient's skin rash?

- A. Chlorinated chemical exposure
- B. Cutaneous manifestation of systemic lupus erythematosus
- C. Disseminated gonococcal infection
- ~~D. Medication adverse effect~~

Handwritten notes:

- cytorematous skin fold → infant
- SLE
- acne
- steroids
- INH
- valproate
- Li
- no comedons
- monomorphi acneiform
- articular wrist
- psoriasis vesicle

32. Identify the correct pair:

1. Benefit measured in terms of natural units-Cost benefit analysis ^{CEA} _(monetary)
2. Method based on behavioral sciences-MBO
3. PERT-Network Analysis / CPM (Mx by objective) (T)
4. Benefit measured in terms of QALY-Cost effective analysis (T)

Options;

A. 1,2,3

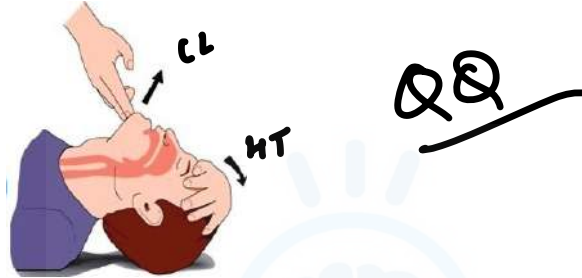
~~B. 2,3,4~~

C. 2,3

D. 1,4

33. Identify the incorrect pair:

A. Jaw thrust
✗ ✗



B. Larson manouever ✓



C. Hemlick manouever ✓



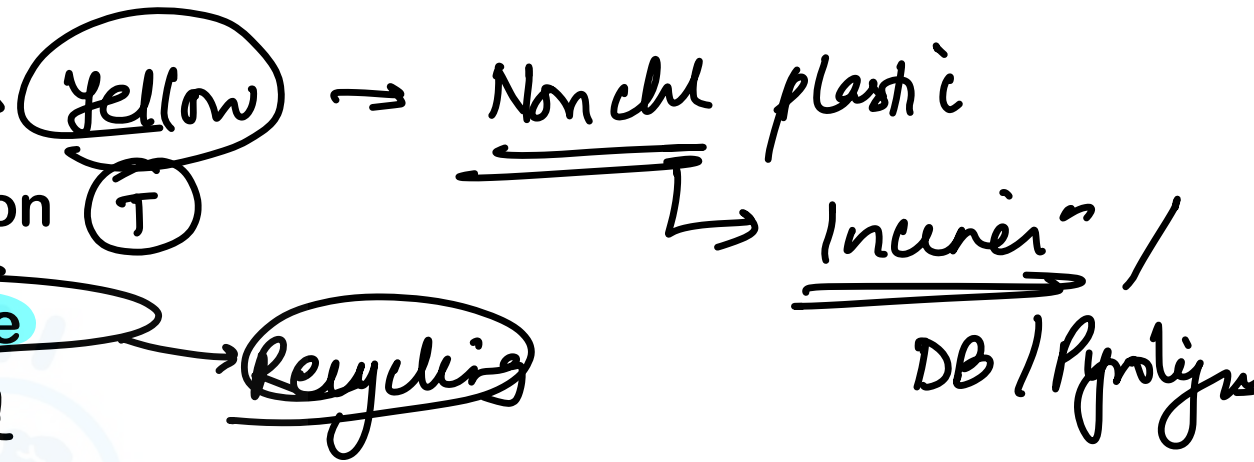
D. Selick manouever ✓



QQ

34. Identify the incorrect pair:

- 1. Cytotoxic and expired drugs - Incineration
- 2. Catheter, Urobag - Autoclave, Microwave
- 3. PVC gloves - Recycling
- 4. Chemicals - Collect in chlorinated containers and send for disposal



Yellow

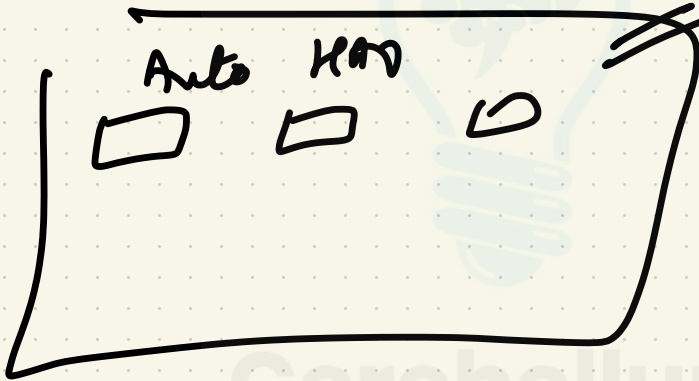
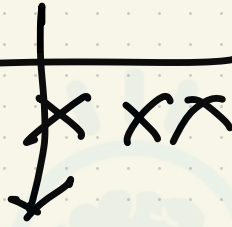
xx

Options;

- A. 1,3,4
- ~~B. 3,4~~
- C. 1,2
- D. 2,3,4


Expired + cytotoxic D
↓
Returned -1. ~

BMW



Stentions

Yellow → Non ch plastic → Incen^s
Plasma
pyrolysis

Blue -  → Autoclave
microwave → Hydrolysis
"AMH"

Red Non ch plastic → AMU 

White PP Containers → Shredding

35. A 24-year-old woman comes to the AIIMS OPD due to skin lesions on her trunk and proximal upper limbs. The patient noticed the lesions after returning from a summer vacation at a Goa a week ago. During the vacation she had sun exposure on several occasions without prior application of sunscreen. The lesions are mildly itchy but not painful. Medical history is notable for hypothyroidism, for which she takes levothyroxine. She drinks alcohol on social occasions but does not use tobacco or illicit drugs. Examination shows hypopigmented lesions as shown in the image below. Which of the following is the most likely cause of this patient's current condition?

- A. Autoimmune melanocyte injury ✗
- B. Dermatophyte skin infection ✗✗
- C. Malassezia globosa infection
- D. Ultraviolet-skin-damage ✗✗



36. Identify the incorrect pair :

1. Etomidate-Does not cause myocardial suppression (T) *adv sup*
2. Fospropofol-^{Propofol}Maximum pain on injection (F)
3. Ketamine- Neuroprotective (F) *Thiopentone*
4. Thiopentone-Best for porphyria (F) *CI*

Options;

~~A. 2,3,4~~

B. 1,2,3,4

C. 3,4

D. 2,3

37. A team of epidemiologists is planning to conduct a survey on the prevalence of malnutrition in a village. What is the correct sequence of steps involved in the planning of this activity?

1. Establishment of objectives and goals
2. Fixing priorities
3. Analysis of the health situation
4. Assessment of resources

~~A.~~ 3, 1, 4, 2

B. 4, 1, 2, 3

C. 3, 2, 4, 1

D. 1, 2, 3, 4

A

Cerebellum
Get the balance right

Baseline GI

Goal

obj

target

GI TD

- good de

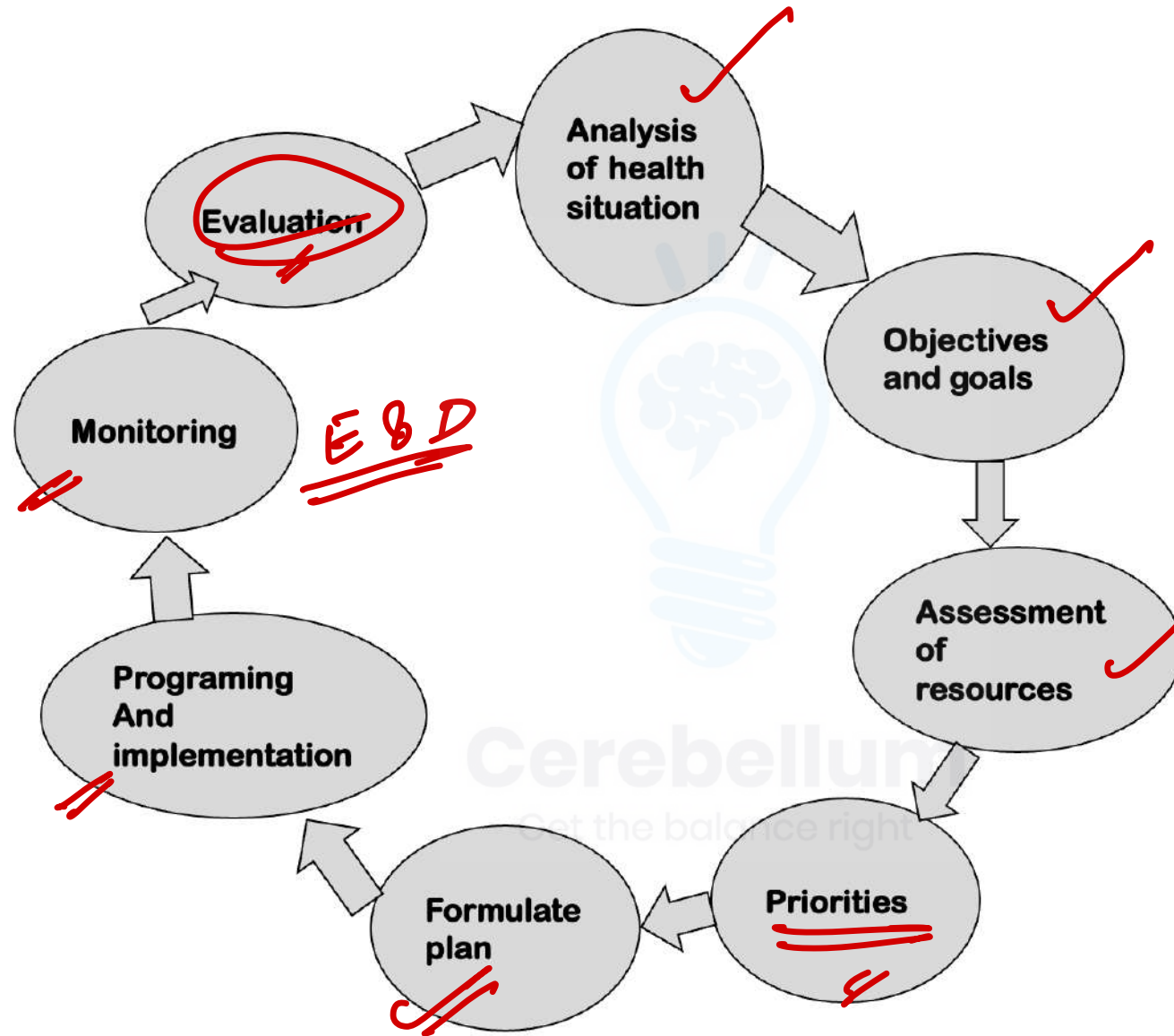
- Rank 2

- GI - >140

resources

BIR - B - P_Ydc -
RR - SWT

↓



38. Among the listed causes of alopecia, which ones result in non-scarring alopecia?

1. Alopecia areata ✓
2. Telogen effluvium
3. Androgenic alopecia ✓
4. Frontal fibrosing alopecia

A. 3 and 4

~~B. 1, 2, and 3~~

C. 2, 3, and 4

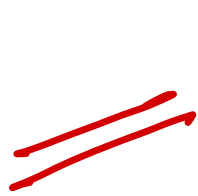
D. Only 4



Cerebellum
Get the balance right

39. Identify the correct oxygen delivery devices with the maximum o2 saturation delivered:

A. 90%



85 - 95%

40
5

60
10

Max
60
15

B. 40%



x

85
15

100%
60

100%
∞

C. 51%



x

Cerebellum
Get the balance right

D. 30%

x



40%

40. Identify the correct statements about health indicators:

1. Number of years a newborn is expected to live in full health based on current rates of sickness and mortality-Sullivan index (DFLE) HALE
2. Simplest measure of burden of disease- ~~Incidence~~ PMR proportional
3. Optimal utilisation of health services- ~~Negative~~ Bed turnover ratio interval
4. Best indicator of effectiveness of health care-IMR T "slightly +ve"
5. Cost effectiveness of NHP ~~DALY~~ QALY
6. Best measure of standard of living-HDI Q

- YLD + YLL

- A. 1,2,3,4,5,6
- B. 3,4,5,6
- C. 2,4,5,6
- ~~D. 4,6~~

41. Identify the correct pair with the type of prevention:

1. Prescriptive screening-Secondary
2. HPV Vaccination against ca cervix-Primary
3. Iodine supplementation in salt-Primordial
4. Pap smear in health camp-Primary
5. Spectacles-tertiary

Prospective (1°)
- Blood

x (1°)

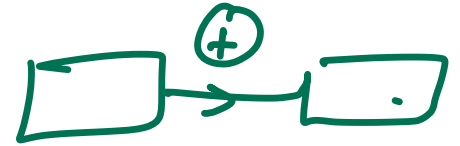
x (2°)

Screening

- A. 1,2,3,4,5
- B. 1,2,4,5
- C. 2,3,5
- D. 1,2,5

42. HIV testing is done as screening in series. Which of the following will be true?

- A. Sensitivity and specificity will increase
- B. Sensitivity will decrease, specificity will increase**
- C. Sensitivity and specificity will decrease
- D. Sensitivity will increase, specificity will decrease



sp ↑

sn ↓

43. Identify the correct ASA-PS grade:

- A. Occasional alcoholic-I — (II)
- B. DM with HbA1c of 10%-II (III)
- C. History of CVA 1yr back-IV (III)
- ~~D. Brain dead patient-VI~~

ASA PS Classification	Definition	Examples, including, but not limited to:
ASA I	A normal healthy patient	Healthy, non-smoking, no or minimal alcohol use
ASA II	A patient with mild systemic disease	Mild diseases only without substantive functional limitations. Examples include (but not limited to): current smoker, social alcohol drinker, pregnancy, obesity (30<BMI<40), well-controlled DM/HTN, mild lung disease
ASA III	A patient with severe systemic disease	Substantive functional limitations. One or more moderate to severe diseases. Examples include (but not limited to): poorly controlled DM or HTN, COPD, morbid obesity (BMI≥40), active hepatitis, alcohol dependence or abuse, implanted pacemaker, moderate reduction of ejection fraction, ESRD undergoing regularly scheduled dialysis, premature infant PCA < 60 weeks, history (>3 months) of MI, CVA, TIA, or CAD/stents.
ASA IV	A patient with severe systemic disease that is a constant threat to life	Examples include (but not limited to): recent (<3 months) MI, CVA, TIA, or CAD/stents, ongoing cardiac ischemia or severe valve dysfunction, severe reduction of ejection fraction, sepsis, DIC, ARD or ESRD not undergoing regularly scheduled dialysis
ASA V	A moribund patient who is not expected to survive without the operation	Examples include (but not limited to): ruptured abdominal/thoracic aneurysm, massive trauma, intracranial bleed with mass effect, ischemic bowel in the face of significant cardiac pathology or multiple organ/system dysfunction
ASA VI	A declared brain-dead patient whose organs are being removed for donor purposes	

← 3m

44. 56-year-old woman comes to the office due to a 1-year history of skin lesions. He has had rough, flaky spots, which do not itch or bleed, on his forehead and cheeks. The patient has attempted treatment with various emollients without effect. Medical history includes hypertension. The patient works as a building inspector and does not use tobacco, alcohol, or illicit drugs. Vital signs are normal. On examination multiple scattered white, scaling lesions are noted, as shown in the image below. Which of the following is the most likely diagnosis in this patient?

A. Actinic keratosis

B. Psoriasis

C. Seborrheic dermatitis

D. Seborrheic keratosis

Cybermenia → pre-malignant cut ^{how} keratoacanthoma

xx

= greasy

= → stuck on "



Cerebellum
Get the balance right



SK
"stuck" m



Cerebellum
Get the balance right

45. An orthopedic resident has removed a K-wire from the fractured SCH of a 13-year-old boy. Where should he discard this?

Blue

A. Cadmium-free red coloured bag

~~B. Cardboard box with blue marking~~



C. Puncture-proof and tamper-proof white container

D. Blue chlorine-free bag

46. You are filling the death certificate of a patient who died from ventricular fibrillation following an acute myocardial infarction. This was because of thrombosis in the coronary artery due to longstanding atherosclerosis. What will you record in line I (c) of the death certificate?

- A. Ventricular fibrillation
- B. Myocardial infarction
- C. Coronary artery thrombosis
- D. Atherosclerosis

1a

1b

1c

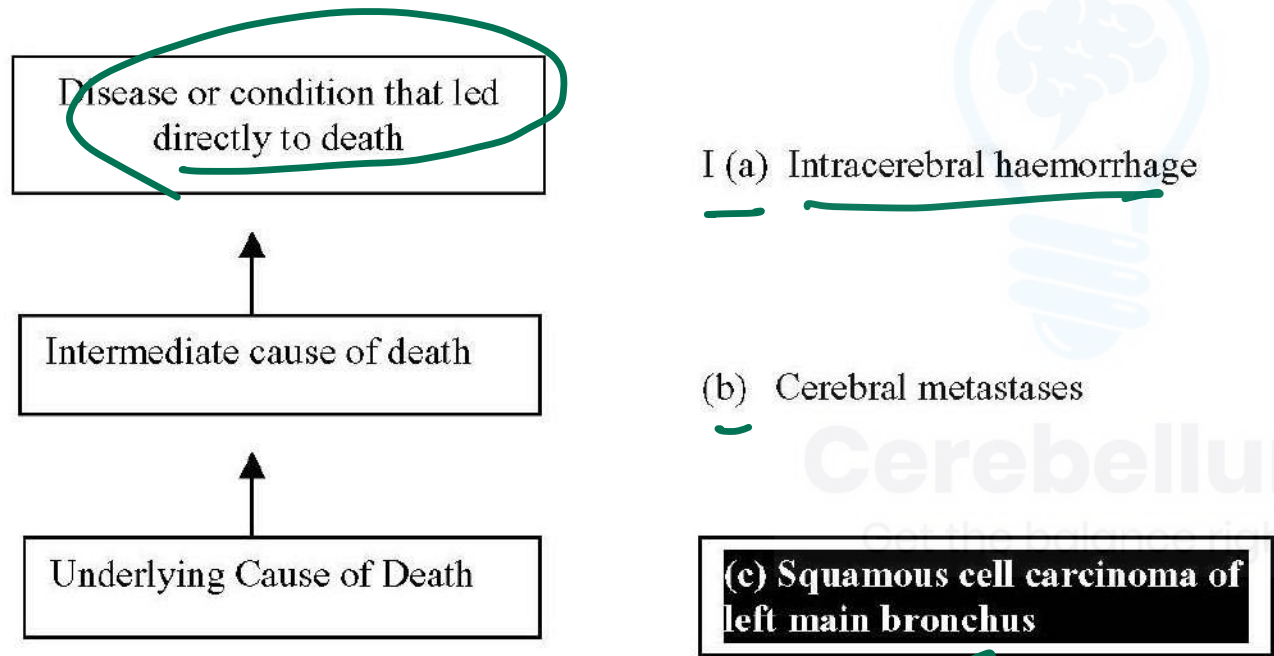
Part II

-accⁿ led to death



A patient died from an intracerebral haemorrhage caused by cerebral metastases from a primary malignant neoplasm of the left main bronchus.

This should be entered as follows:



47. Which of the following is included in high-quality CPR?

1. Compression depth of at least 5 cm

5-6 cm ✓

2. Rotate chest compressor every 3 mins

x 2 min

3. Avoid excessive ventilation ✓

4. Compression - ventilation ratio of 30:2 ✓

5. Allow complete recoil ✓

6. ~~ET co2 <10mm~~

>10mm / >20mm

7. Intra-arterial DBP >20mm Hg

8. Breaths 20-30/min

10 b/min

A. ~~1,2,3,4,5,6,7,8~~

B. ~~1,2,4,5,7,8~~

C. 1,3,4,5,7,8

~~D. 1,3,4,5,7~~

48. Match the following with the images:

- A. Lichen simplex chronicus
- B. Lichen scrofulosorum
- C. Lichen planus
- D. Lichen sclerosus
- E. Lichen nitidus

Options;

- A. 1-D, 2-A, 3-E, 4-C
- ~~B. 1-A, 2-D, 3-B, 4-C~~
- C. 1-D, 2-C, 3-E, 4-B
- D. 1-A, 2-D, 3-E, 4-C

1



LSC

2



LS

3



LS LN

4



LP



Cerebellum
Get the balance right

Lichen nitidus

Lichen nitidus



Cerebellum
Get the balance right

49. Which of the following is statements about ICD-11 are true:

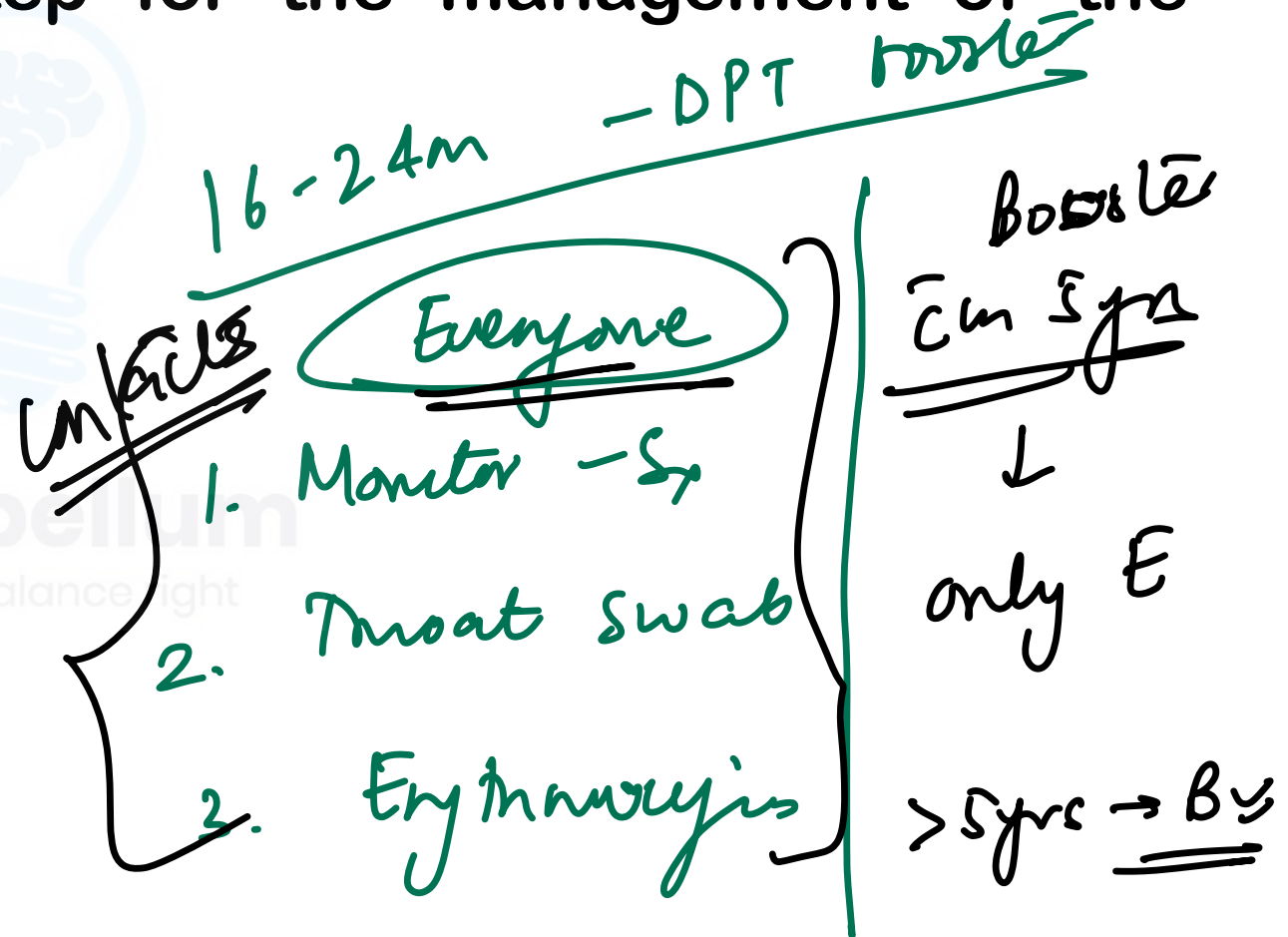
1. It includes a new chapter on traditional medicine ✓
2. Gender incongruence and sexual dysfunctions are ~~now listed~~ as part of mental health disorders xx removed sexual health
3. It has come into full effect from January 2022 ✓
4. Chapter 6 is Mental, behavioural or neurodevelopmental disorders ✓

Options;

- A. 1,2,3,4
- B. 1,3,4
- C. 1,2,3
- D. 1,4

50. A 10-year-old child has been diagnosed with diphtheria and is being treated in the ward. His 2.5-year-old brother, who lives in the same house has received all due vaccinations according to NIS. What is the next best step for the management of the younger sibling?

- A. DPT booster
- B. Reassure as he is vaccinated
- C. Erythromycin + diphtheria toxoid
- ~~D. Erythromycin only~~



51. The most probable diagnosis for a young male depicted in the image is?

A. Focal vitiligo

B. Segmental vitiligo

C. Indeterminate leprosy

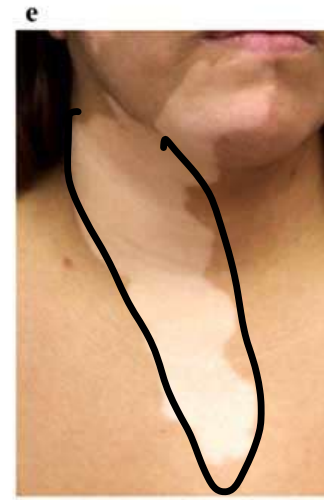
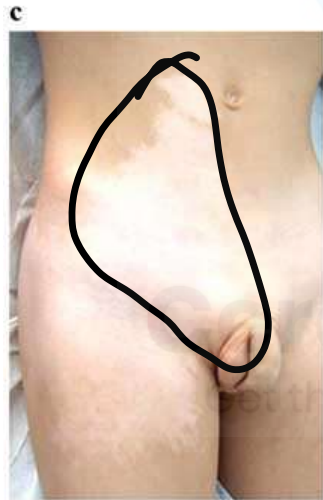
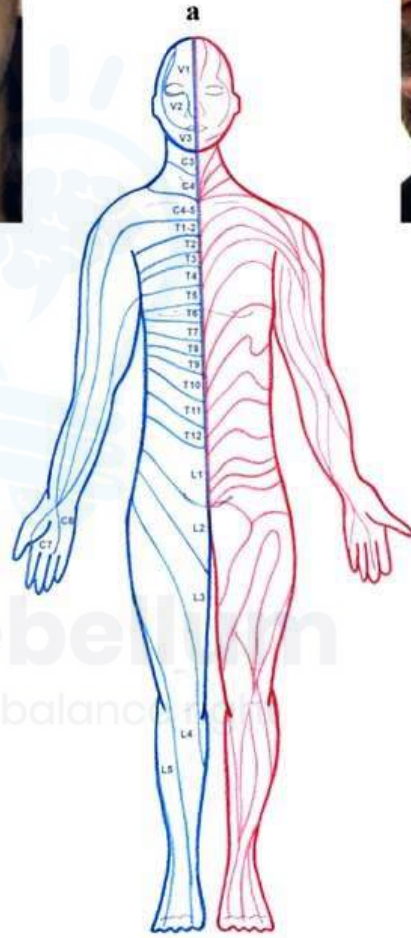
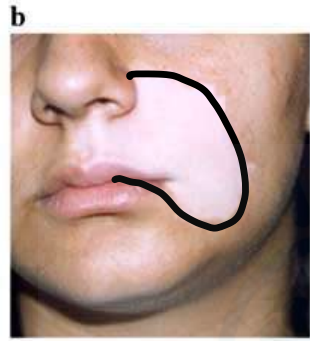
D. Nevus depigmentosus

x x sn lvs

L dx of exclusion



Get the balance right



52. Identify the correct statements:

1. Grade 2 disability per 10 lac population is the most important leprosy awareness indicator (T)
2. VVM shows cumulative exposure of the vaccine to the heat and assess vaccine potency ^{efficacy} (T)
3. As per the National Tuberculosis Elimination Program (NTEP), HIV-TB prevalence of district >15% is a high-priority district ^{>10%} (F)
4. The external validity of a screening test is related to generalizability (T)

Options:

A. 1,2,3,4

~~B. 1,2,4~~

C. 1,2,3

D. 2,3,4

VVM → (T) - potency

53. Under the Anemia Mukh Bharath initiative, mild to moderate anemia in pregnant women < 34 weeks of gestation is treated using:

> 34wks POG → (B)

- A. 60 mg elemental iron and 500 mcg folic acid daily *Prophylaxis*
- B. IV iron sucrose ← *non compliant / tolerate*
- C. 45mg elemental iron and 400 mcg folic acid twice daily
- ~~D.~~ 60 mg elemental iron and 500 mcg folic acid twice daily BP

54. All of the following can be given by intra-tracheal route except:

A. Epinephrine ✓

- lignocaine

B. Atropine ✓

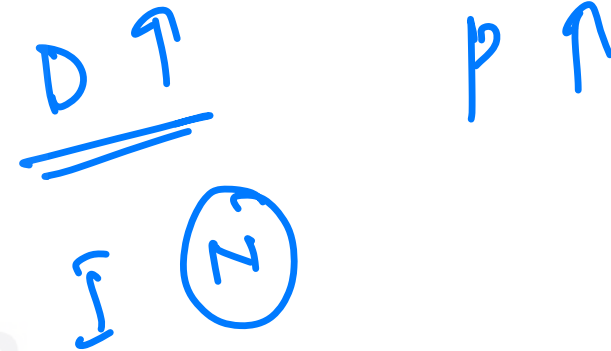
C. Naloxone ✓

D. N-Acetyl cysteine



55. A new drug has been introduced into the market which was found to decrease mortality but it does not cure the disease. Which of the following is a true statement regarding prevalence and incidence?

- A. Decrease in incidence
- B. Decrease in prevalence
- C. Increase in incidence
- D. Increase in prevalence



56. Identify the correct statements about muscle relaxants:

1. Gallamine and pancuronium have vagolytic activity ^{sympathomimetic} up ^{||} (T)
2. Shortest acting approved NDMR is Gantacurium ^{Miva} (F)
3. MR that may cause hypotension and flushing after injection: Tubocurarine ^{Histamine} (T)
4. Rocuronium and vecuronium can be reversed by use of Suggamadex ^{ROVE} (T)

A. 1,2,3,4

B. 2,3,4

C. 1,3,4

D. 2,4

Cerebellum
Get the balance right

Atracurium

- Hoffman

- Laudonon S2

- Histamine

57. A study found that the incidence of bladder carcinoma is 5 times higher in smokers than in non smokers. Calculate the attributable risk?

A. 20%

B. 33%

C. 75%

~~D. 80%~~



$$\frac{5x - x}{5x}$$

$$\frac{4}{5} \times \frac{20}{100}$$

58. Identify the following congenital lesions with the genetic defects :

- A. NEMO
- B. GNAQ
- C. Collagen VII
- D. Transglutaminase 1

Options;

- A. 1-A, 2-B, 3-C, 4-D
- B. 1-D, 2-A, 3-B, 4-C
- C. 1-C, 2-A, 3-B, 4-D
- D. 1-C, 2-D, 3-B, 4-A

1
EB
coll VII

2
TTG
Collagen

3
GNAQ

4
"IP"
NEMO

Cerebell
Get the balance

59. Identify the true statements:

1. The HIV sentinel surveillance includes single male migrants, truck drivers, CSW, transgenders and antenatal women. ✓ ✓ ✓ ✓ ✓ ✓ (T)
2. Gaussian distribution is the probability distribution that describes the chances of an event in a particular time frame. (F) Poisson
3. Congenital glaucoma is not covered under RBSK screening (T)
4. According to SDG target 3.1, MMR should be <80/1 lakh live births (F) Q

Options;

A. 1,3,4

B. 1,2,4

~~C. 1,3~~

D. 2,3,4

HIV sentinel surveillance: Biennial-Unlinked, anonymous
Proxy for general population (>1%):

ANC

High-risk (>5%): CSW MSM TG

Bridge group:

Single male migrants
Truck drivers



1420
x STD clinic

Identified Health Conditions for Child Health Screening and Early Intervention Services

Defects at Birth

1. Neural Tube Defect
2. Down's Syndrome
3. Cleft Lip & Palate / Cleft Palate alone
4. Talipes (club foot)
5. Developmental Dysplasia of the Hip
6. Congenital Cataract ✓
7. Congenital Deafness ✓
8. Congenital Heart Diseases
9. Retinopathy of Prematurity ✓

Deficiencies

10. Anaemia especially Severe Anaemia
11. Vitamin A Deficiency (Bitot spot)
12. Vitamin D Deficiency (Rickets)
13. Severe Acute Malnutrition
14. Goiter

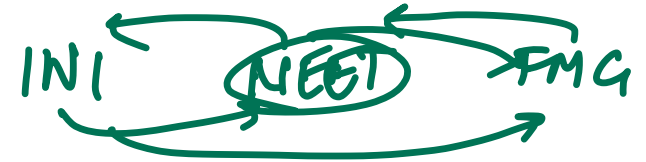
Childhood Diseases

15. Skin conditions (Scabies, Fungal Infection and Eczema)
16. Otitis Media
17. Rheumatic Heart Disease
18. Reactive Airway Disease
19. Dental Caries
20. Convulsive Disorders

Developmental Delays and Disabilities

21. Vision Impairment
22. Hearing Impairment
23. Neuro-Motor Impairment
24. Motor Delay
25. Cognitive Delay
26. Language Delay
27. Behaviour Disorder (Autism)
28. Learning Disorder
29. Attention Deficit Hyperactivity Disorder

30. Congenital Hypothyroidism, Sickle Cell Anaemia, Beta Thalassaemia (Optional)



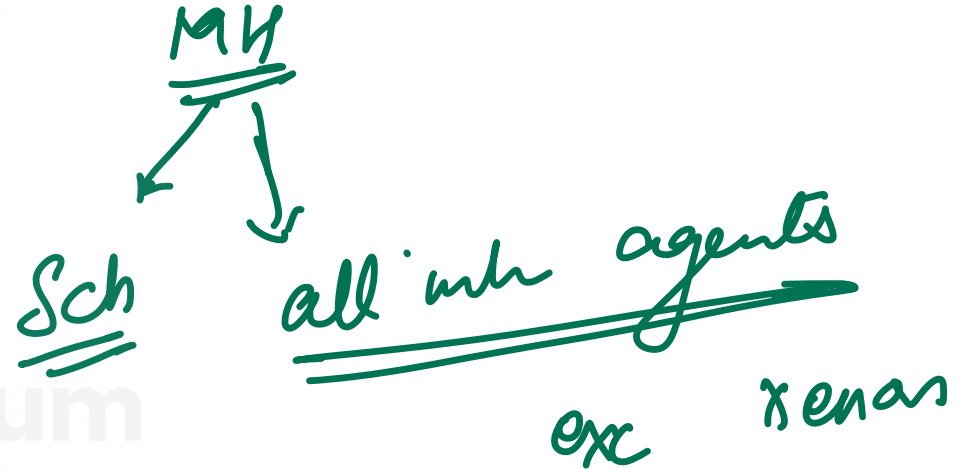
60. A 40-year-old patient with no known medical conditions undergoes elective surgery under general anesthesia. During the procedure, the anesthesia team observes rapidly increasing body temperature, tachycardia, elevated blood pressure, and generalized muscle rigidity. Which of the following drugs should be avoided in this patient?

A. Halothane, Desflurane

B. Methoxyflurane, Propofol

C. Rocuronium, N₂O

D. Xenon, Ether, Sevoflurane



Qualilah

61. The seasonal variations of a disease were studied in children, in a group from June to July and in another group of similar characteristics from August to September. The test of significance that should be used to compare the data is:

- A. Chi square
- B. Paired t test
- C. Wilcoxon test
- D. ANOVA



Cerebellum
Get the balance right

62. Identify the correct kit for the clinical presentations:

1. Painful ulcers upon palpation, with suppurative inguinal lymphadenopathy on the right side → White
2. Vaginal discharge in a CSW with cervical erosions - Grey
3. Painful, swollen, and tender inguinal lymph node in a truck driver Bubo - Black
4. Painless ulcer in the genital area with non-tender inguinal lymphadenopathy in CSW;
past h/o treatment of a similar lesion resulted in fever, malaise, tachycardia and vomiting

Options;

- A. 1-Red, 2-Green, 3-Black, 4-Blue
- B. 1-White, 2-Green, 3-Black, 4-Blue
- C. 1-White, 2-Grey, 3-Black, 4-White
- D. 1-Blue, 2-Grey, 3-White, 4-Blue

Syphilis
→ White
Janish - Hexamine
penicillin CI ??
No

63. Identify the correct statements:

1. FORD foundation is aiding in building toilets in India (T)
2. Normalcy of data can be measured by histogram, box-whisker plot and Shapiro-Wilk test (F)
3. CONSORT standards are for RCT (F) ^{Q/}
4. Meta-analyses > RCT > Systematic review > Cohort > Case-control > expert opinion is the correct hierarchy for evidence (F)

A. 1,2,3,4

~~B. 1,2,3~~

C. 1,3,4

D. 1,2,4

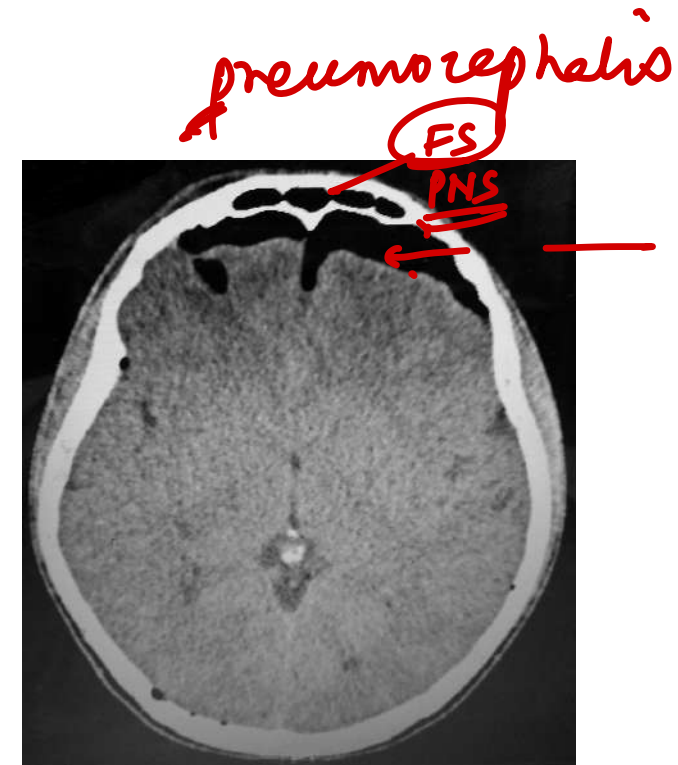
64. During recovery from anaesthesia after a posterior cranial fossa surgery, the patient complained of a severe headache and was agitated. CT scan is shown. Which of the following is most likely responsible for this condition?

A. Post dural puncture heading ^{xx} headache

B. N2O entering cranial cavity EAR

C. Air embolism xx

D. Venous sinus thrombosis xx



65. An 18-month-old child is brought with no history of vaccination. From the following, which vaccines would be appropriate to give this child according to the National Immunization Schedule (NIS)?

- A. DPT -1, OPV-1 only ✗
- B. ~~BCG~~, DPT-1, OPV-1
- C. ~~BCG~~, DPT-1, OPV-1, Measles - 1, Vit.A -50000IU
- D. DPT-1, OPV-1, Measles - 1, Vit.A – 2 lakh IU

□ DELAYED IMMUNISATION:

BCG
HEP B
IPV
ROTA
PENTA
PCV

} 1yr

MEASLES/MR
VIT A
OPV

} - 5yr

Hib

- 6y

DTP

- 7y

JE

→ 15y

dT/TT

- any age.



Cerebellum
Get the balance right

66. Topical steroids are not effective in which of the following:

A. Psoriasis involving <10% BSA ✓

B. Impetigo herpetiformis

C. Vitiligo ✓

D. Eczematous dermatitis ✓

- PPP preg - systemic

67. All of the following are true statements about communicable diseases except:

1. Humans are dead-end hosts for rabies, tetanus and JE (F)
2. Rabies is an example of amphixenosis, (F) man \rightleftharpoons lower vert
3. A disease whose pathogenic response is higher in children compared in adults is defined as hyperendemic disease Holoendemic - (F)
4. Number of cases last week 42; this week 49 - Endemic (T)

Options;

A. 2,3,4

B. 2,3

C. 1,2

D. 1,4

> 2SD

endemic
↑↑↑
dengue in India

68. Identify the correct statements:

1. Lowest MAC=Highest potency (T)
2. Min MAC-N₂O, Max MAC-Methoxyflurane (F)
max min
poten
3. Blood gas partition coefficient (BGC) = Lipid solubility - Speed of induction (F)
xr water solubility
4. Lowest BGC-Xenon, Highest BGC-Methoxyflurane (T)
fastest
slowest

A. 1,2,3,4

B. 1,3

C. 2,4

~~D. 1,4~~

69. You are a smart MO posted in a health camp. You notice a child named Kiaan with fever and rash. On subsequent history, you find out that similar symptoms occurred in his friend Ayaan 6 days back. Kiaan tells you that another common friend Shanaya also is starting to have weakness and myalgia. How will you epidemiologically categorise Kiaan?

A. Primary case → Ayaan

B. Index case

C. Secondary case

D. Tertiary case ✕✕

Suspect Case

- a a n

Convenience

70. A 42-year-old construction worker presents to a dermatology clinic with complaints of persistent, itchy, and red skin rashes on his hands and forearms. He reports that the symptoms worsen during and after work, especially when handling construction materials. On examination, there are erythematous, scaly plaques with vesicles and crusting on the dorsal surfaces of his hands and forearms. Which of the following is the most likely cause of this dermatitis?

A. PPD

B. Nickel

C. Chromate

D. MBEH

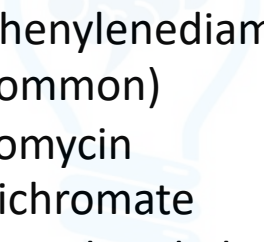
binds off

art jewelry

Cement

rubber

Cerebellum
get it right

- 
1. Hair dye: PPD (para phenylenediamine)
 2. Metal: Nickel (most common)
 3. Topical antibiotic: Neomycin
 4. Cement: Potassium dichromate
 5. Bindi: PTBP (para tertiary butyl phenol)

Cerebellum
Get the balance right

71. A 2year old child comes with the following finding. Identify the grade and management:

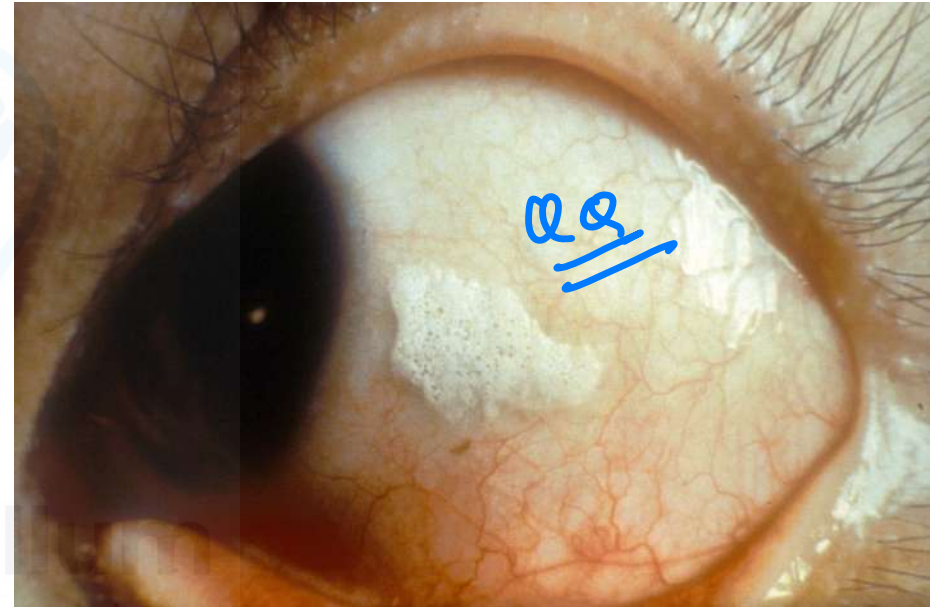
A. X1 A, 50000IU vit A

B. X1B, 1 lakh IU vit A

C. X1A, 2 lakh IU vit A

D. X1B, 2 lakh IU vit A

R



Cerebel
Get the balance right

- - - - -

Xerophthalmia classification (3,9)

XN	—————→	Night blindness
X1A	—————→	Conjunctival xerosis
X1B	—————→	Bitot's spots
X2		Corneal xerosis
X3A		Corneal ulceration/keratomalacia (involving less than one third of the corneal area)
X3B		Corneal ulceration/keratomalacia (involving one third or more of the corneal area)
XS		Corneal scar (from X3)
XF		Xerophthalmic fundus

72. Which of the following statements is true regarding sodalime?

1. 100 g of sodalime can absorb 23 liters of CO₂ (T)

2. Amsorb is preferred for Sevoflurane and Desflurane over sodalime (T)

3. The major constituent of sodalime is Ca(OH)₂ (80%)

4. Water content of sodalime is 5% (15%)

5. Can form a neurotoxic compound with Trilene (T) (Comp A) (CO)

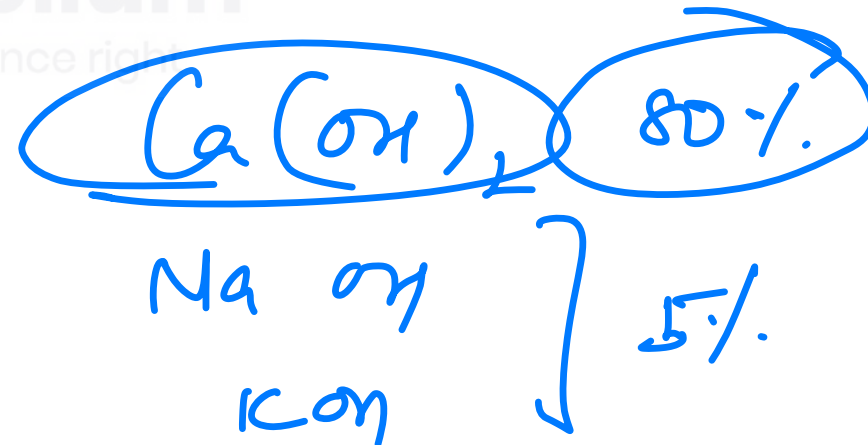
Options;

A. 2,3,4

B. 1,2,3,4,5

C. 1,2,3,4

~~D. 1,2,3,5~~



73. A study was conducted on two different samples for comparing variation between DBP and Vitamin D. The mean diastolic blood pressure is 110 with standard deviation 11 and the mean vitamin D level is 18 with standard deviation 3. Which of the following statement is true regarding the coefficient of variation (CV)?

$$CV = \frac{SD}{\text{mean}} \times 100$$

A. CV of DBP is more than Vitamin D

B. CV of Vitamin D is more than DBP

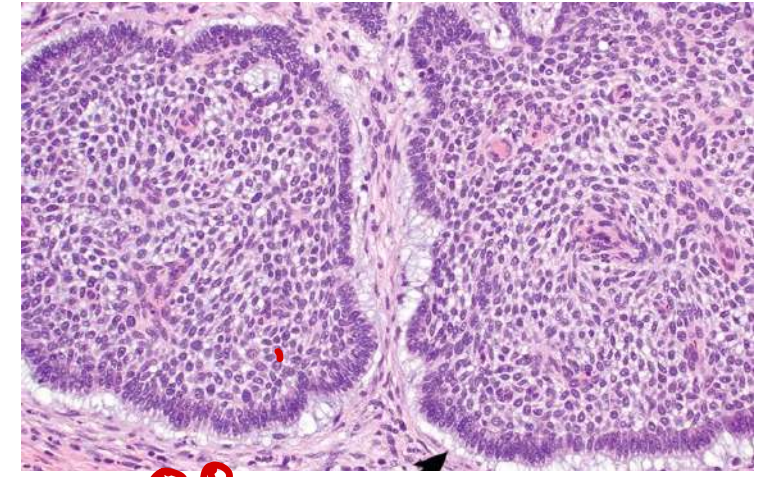
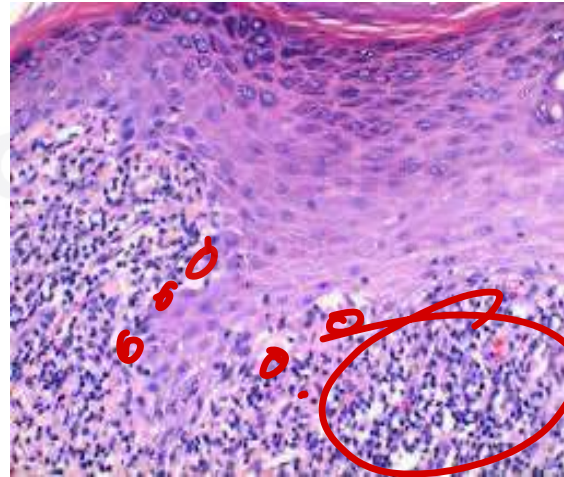
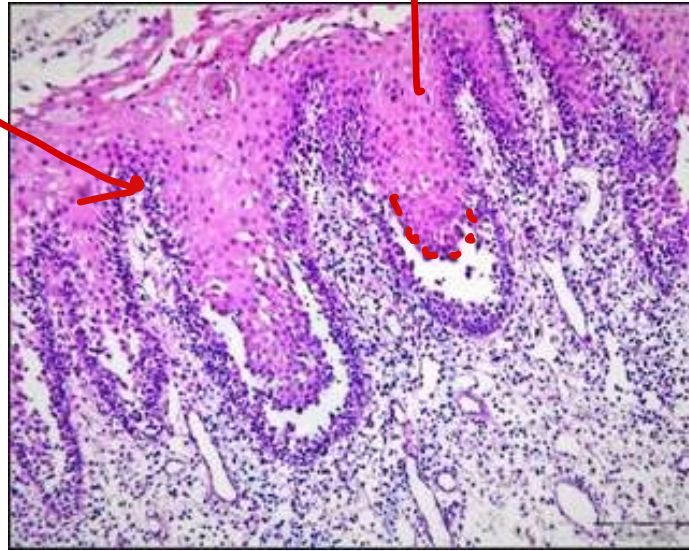
C. Both DBP and Vitamin D have equal variability

D. It cannot be ascertained from information provided

$$CV = \frac{11}{110} \times 100 = 10$$
$$CV = \frac{3}{18} \times 100 = 16.6$$

74. Match the histological images with the correct diagnosis:

- A. Pemphigus
- B. Hailey hailey
- C. Psoriasis
- D. Lichen planus
- E. Melanoma
- F. BCC
- G. Mycoises fungoides



Options:

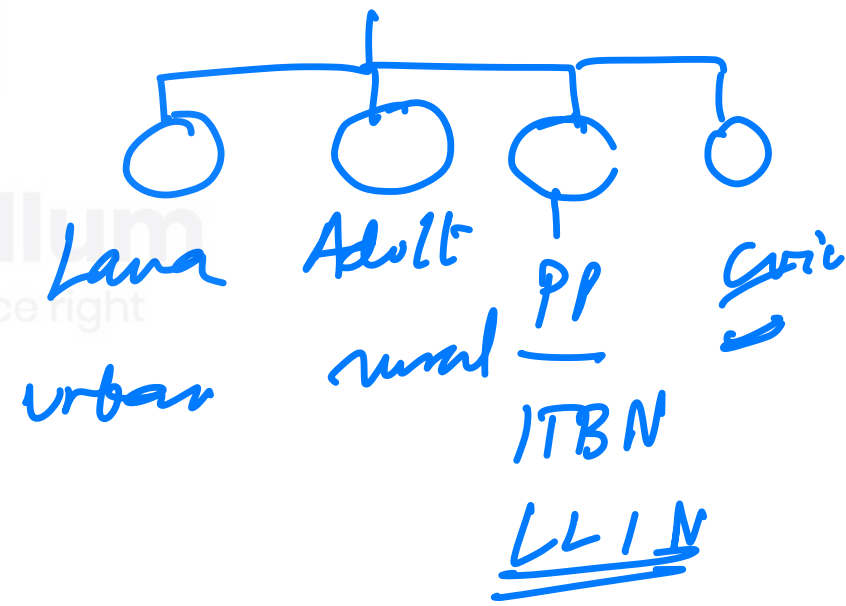
- A. 1- A, 2-D, 3-C, 4-F
- ~~B. 1-A, 2-C, 3-D, 4-F~~
- C. 1-B, 2-C, 3-D, 4-G
- D. 1-B, 2-C, 3-D, 4-G

75. Identify the correct statements about malaria control:

1. Urban malaria scheme is based on anti-larval measures where SPR >5% ^{environmental control} (T)
2. Rural malaria scheme is based on anti-adult measures with ITBN → IRS
3. Most efficient to control urban malaria is constant surveillance of cases
4. Synthetic pyrethroids are agents of choice for Sandfly (T)

Options:

- A. 1,2,4
- B. 1,3,4
- C. 1,4
- D. 2,3



Containers / tanks overhead covering ✓

76. Identify the correct statements about LA:

1. Maximum methHb-Procaine

2. Most cardiotoxic- Bupivacaine

3. LA of choice in MH-Prilocaine

4. LA with vasoconstriction-Cocaine

(T)

(T)

pyqs

Options:

A. 1,4

B. 1,2,3,4

~~C. 2,4~~

D. 1,3,4

77. Match the following:



- A-Safe motherhood services and cash for institutional delivery
- B-Designed for training health personnel
- C-Freedays by ASHA
- D-Prevent trafficking

- 1-JSY
- 2-JSSK
- 3-Ujjawala
- 4-Ujjawala → LPG
- 5-Ujala → lamps.
- 6-Kishori shakti yojana
- 7-Rashtriya Kishor Swasthya Karyakram
- 8-Navjat Sishu Suraksha Karyakaram

Sambalaya

Neonatal course

Options;

A. A-1, B-7, C-6, D-4

B. A-1, B-8, C-7, D-3

C. A-2, B-8, C-7, D-4

D. A-2, B-7, C-6, D-3

KSY - adolescent ♀



78. Match the following images in the extremities with the diagnosis:

- A. Diabetes
- B. Graves disease
- C. Lofgren syndrome
- D. Varicose veins
- E. Hypothyroidism
- F. IBD



Necrotic
hypodermis
diabeticorum

↓
Graves

↓
EN

↓
Lofgren

↓
PG - IBD

Options:

- A. 1-E, 2-B, 3-F, 4-D
- B. 1-A, 2-B, 3-F, 4-D
- C. 1-D, 2-A, 3-B, 4-F
- ~~D. 1-A, 2-B, 3-C, 4-F~~

79. All of the following are true except:

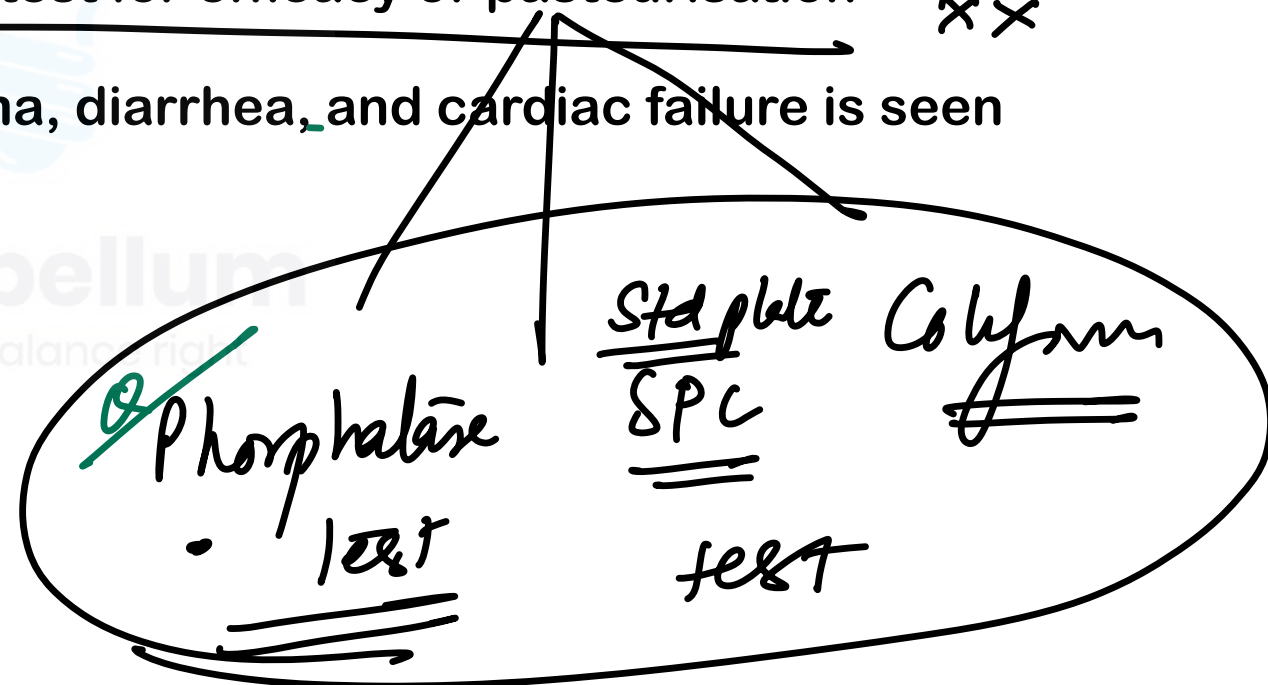
A. Codex Alimentarius is the principal organ of the FAO/WHO food standards program (T)

B. Vanaspati is fortified with 2500 IU of vitamin A and 175 IU of vitamin D (T)

~~C. Methylene blue reduction test is the best test for efficacy of pasteurisation~~ (XX)

D. Sudden onset of hypersecretory glaucoma, diarrhea, and cardiac failure is seen due to sanguinarine toxicity (T)

Eg droopy



80. You are planning to administer spinal anesthesia to a young female. Which of the following needles would be the most suitable for reducing the risk of a post-dural puncture headache?

A. 22G Quincke *writing*

B. 22G Whitacre *spilling*

C. 25G Quincke

D. 25G Whitacre



81. All are correct statements about Indian health care system except:

- A. One male health assistant is per 5000 population in plain areas and 3000 in hilly areas PHC → S/C → (3) PHC → (5) x
- B. Minimum number of beds in CHC is 30
- C. Urban PHC caters to a population of 50000, which a metro CHC caters to 5 lakh population urban CHC - $\sqrt{2.52}$
- D. School health program is managed by PHC oo urban S/C

82. Identify the incorrect statement in rapid sequence intubation?

- A. Preoxygenation with 100% oxygen for 3 minutes is done ✓
- B. High-volume low-pressure cuff Endotracheal tube is used ✓
- C. It is the method of choice in cardiac arrest patients CPR
- D. Induction agent and muscle relaxant are given simultaneously ✓

83. What is the probable diagnosis for a 38-year-old female who is experiencing substantial hair loss for 4 months and has a history of COVID-19 infection 8 months ago?

A. Telogen effluvium

B. Androgenetic alopecia

C. Anagen effluvium — chemotherapy

D. Trichotillomania

steps

tension

"3 months"



84. Match the following:

A- Socratic communication with audience

B- Series of lectures followed by Q and A with audience

C- Best to teach people about ORS

D- 6-12 people

1-Panel

2-FGD

3-Symposium

4-Seminar

5-Workshop

6-Demonstrations

Options:

A. A-1, B-3, C-4, D-2

B. A-3, B-4, C-6, D-2

C. A-1, B-3, C-6, D-5

D. A-1, B-3, C-6, D-2

Cerebellum
Get the balance right



85. Identify the correct statements:

1. Most common cause for hospital admission after day care surgery is post-operative pain ^{PONU}
2. Commonly used frequency of tetanic stimulation in neuromuscular monitoring is 2Hz. ^{SDN2}
3. Add 0.5 ml Heparin to the syringe before taking blood for ABG ^{70F} 0.05-0.1ml ^{XX}
4. Dobutamine stress echocardiography is the most accurate non-invasive investigation to predict risks of perioperative cardiac complications ^(T)

Options:

A. 1,2,3,4

B. 2,3,4

C. 1,3,4

D. 4

86. Identify the layer involved in the following disease:

1. Pemphigus foliaceus → *Subcorned*
2. Icthyosis
3. Pemphigus vulgaris
4. LCH
5. Vitiligo

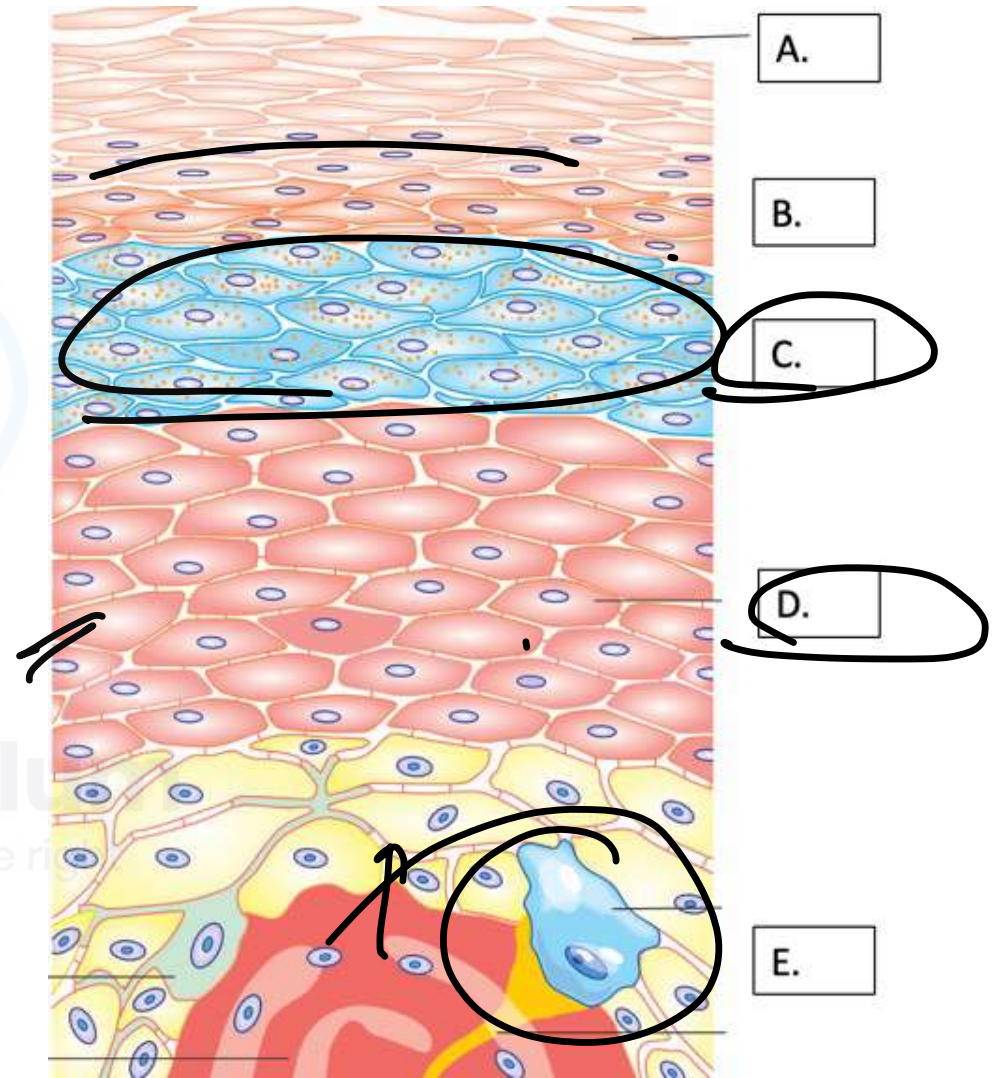
Options:

A. 1-C, 2-B, 3-D, 4-E, 5-E

~~B. 1-C, 2-C, 3-D, 4-D, 5-E~~

C. 1-D, 2-B, 3-B, 4-D, 5-D

D. 1-D, 2-B, 3-E, 4-A, 5-D



87. A patient of blunt chest trauma has been intubated and started on mechanical ventilation. Which of the following is not correct about the initial setting?

A. Respiratory rate - 12 Breaths/ min

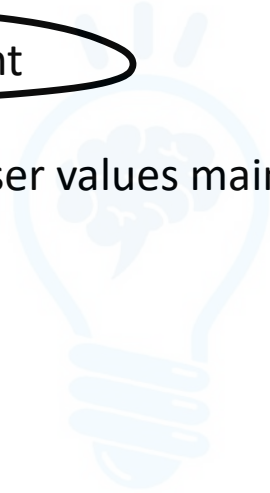
B. PEEP - 5 cm H₂O

C. FiO₂-100%

D. Tidal volume - 12 ml/kg of actual BW^x

In a patient put on mechanical ventilation, ideal ventilatory settings are as given below. This is also called Lung Protective Ventilation.

- Tidal volume - 4-6 ml/kg of Ideal Body Weight
- Respiratory rate – 12-18 Breaths/ min
- FiO₂ - 100% to begin with and titrated to lesser values maintain spo₂ > 95%
- PEEP - Begin with 5 cm H₂O



88. Identify the correct statements:

1. Direct observation with a structured checklist is the best method to survey the injection practices of health workers. (T)

2. Mass drug administration done for Worm infestation, Vitamin A deficiency and Scabies. ^{xxx} flavours

3. Innermost circle of Rule of haves denotes hypertensives getting treatment. xx

4. Type A PHCs have >20 deliveries per month xx
<20

Options:

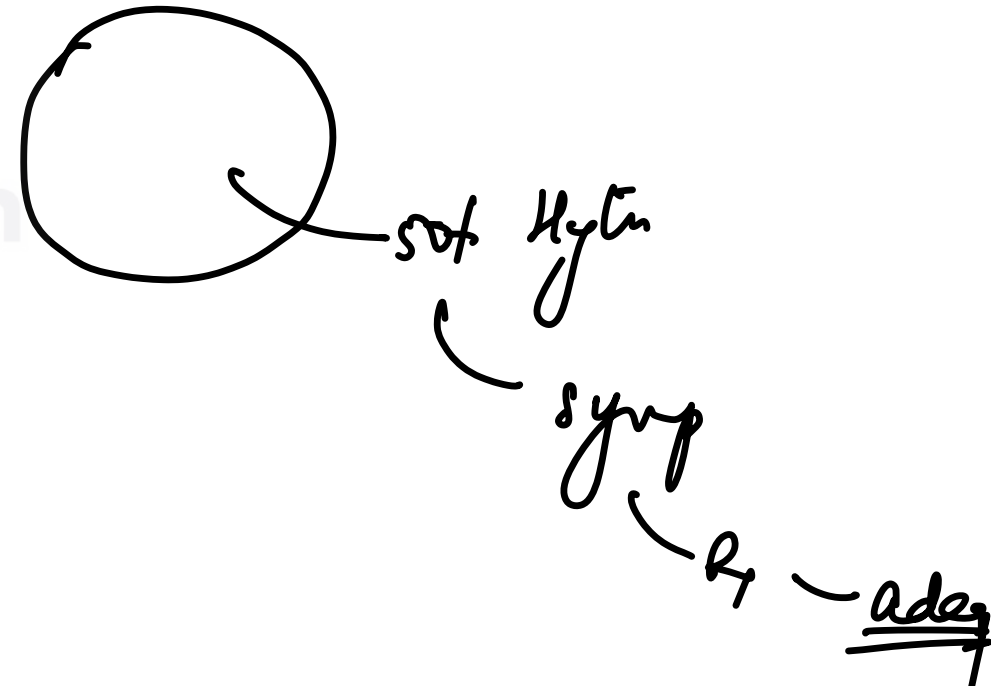
A. 1,3,4

B. 1,4

C. 2,3,4

~~D.~~ 1

Cerebellum
Get the balance right



89. Following tube adds additional airway resistance. This is due to:

A. Circumference of the tube

B. Length of the tube

~~C. Diameter of the tube~~

D. Curvature of the tube



$$R = \frac{l}{r^4}$$

90. A patient comes with a history of clean-cut injury which is not lacerated. He says that he received his last dose of tetanus vaccination about 10 years ago. What should be given next?

A. Full course of tetanus vaccination

B. Single dose tetanus toxoid

C. Tetanus toxoid + immunoglobulin

D. No vaccination needed

Tetanus PEP

- A - has had a complete course of Toxoid or booster dose with in the past 5 year
- B - has had a complete course of Toxoid or booster dose more then 5 years ago & less then 10 years ago
- C - has had a complete course of Toxoid or a booster dose more then 10 year ago
- D - has not had a complete course of Toxoid or immunity status unknown

• All wound receive surgical toilet

Wounds less then 6 hours
Old, clean, non-penetrating,
& with negligible tissue damage

immunity
category

A

nothing more required

B

Toxoid 1 dose

C

Toxoid 1 dose

D

Toxoid complete course

other wounds

immunity
category

A

nothing more
required

B

Toxoid 1 dose

C

Toxoid 1 dose +

human tetanus Ig.

D

Toxoid complete course +
human tetanus Ig

Cerebellu
Get the balance right

91. Identify the correct statements about vaccines:

1. Influenza and yellow fever vaccines are CI in egg allergy ^{QQ} (T)
2. Abscess formation post-BCG is treated conservatively IBD
3. Live vaccines should not be given with Human immunoglobulin ~~except measles~~ ^{systemic IWH}
4. All of the following are killed vaccines: Pertussis, Salk, SA14-14-2, 17D ^{PAS/INH powder} (exc vaccine)
5. NS is used as diluent for Danish 1331 ^{↓ Live} ^{↓ Live} ^{↓ High-risk}

Options:

A. 1,2,3,4

B. 1,3,5

C. 1,2,3,5

~~D. 1,5~~

live

- BCG
- MMR
- Rotovac
- JE SA 14-14-2**
- Typhoral-Ty21a
- Varicella
- OPV
- 17D

Killed

- Rabies
- Cholera-Dukoral
- Pertussis
- JE-Nakayama Beijing**
- IPV



Cerebellum
Get the balance right

92. Identify the correct pair of doses :

1. Max dose of lignocaine without adrenaline-300mg

4.5mg/kg

2. Dantrolene sodium-2.5mg/kg - MH

3. Intralipid 20% IV-1.5 mL/kg - LAST

4. Epinephrine in cardiac arrest-1mg 1:10000 iv

E ad - 500mg
7mg/kg

Options:

A. 1,2,3,4

B. 1,2,3

C. 2,3,4

D. 2,3

93. Match the following images with likely diagnosis:

- A. Kerion
- B. Favus
- C. Black dot
- D. Grey patch

Options:

- A. 1-A, 2-B, 3-C, 4-D
- B. 1-A, 2-B, 3-D, 4-C
- C. 1-B, 2-A, 3-C, 4-D
- D. 1-B, 2-A, 3-D, 4-C

1



Kerion

2



Favus

3



Black dots
endo trich
(F)

4



Grey patch
(M)

94. Identify the type of study described in the scenario:

1. A researcher planning to study the aetiologies of Multiple sclerosis

A-Descriptive study

2. A study was conducted among a group of 300 patients with thyroid cancer and another group of 300 people chosen from the general population. Both the groups were questioned about their exposure to smoking.

B-Ecological study

3. Study to correlate dietary habits of different countries with association of obesity

C-Case control

4. Researchers are interested in calculating the Relative risk between long-term coffee consumption and the risk of developing type 2 diabetes

D-Cohort study

E-Cross-sectional study

A. 1-A, 2-B, 3-C, 4-D

B. 1-E, 2-C, 3-B, 4-D

C. 1-E, 2-C, 3-B, 4-A

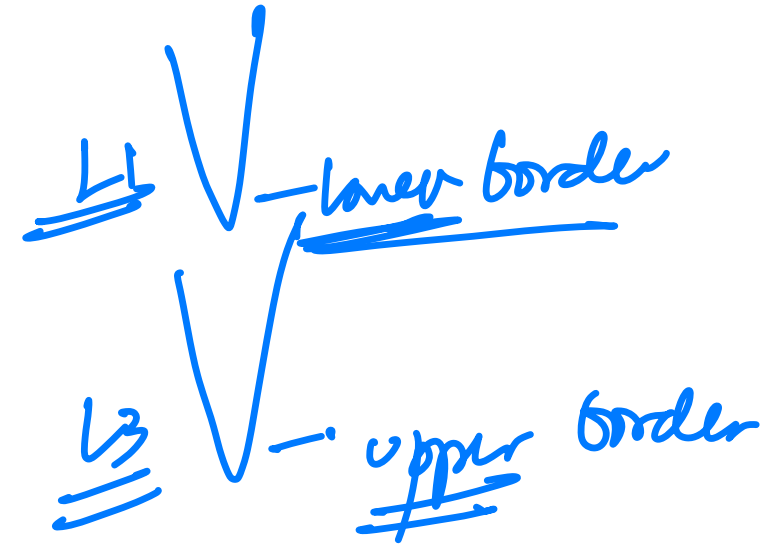
D. 1-A, 2-C, 3-B, 4-D

95. Identify the correct statements about lower extent of the following structures:

1. Subarachnoid space-Lower border of S2 ✓✓
2. Filum terminale-Coccyx ✓✓
3. Spinal cords in infants-Lower border of L3 ✓✓ *upper*
4. Adult spinal cord-Lower border of L1 ✓✓

Options:

- A. 1,2,3,4
- B. 1,2
- C. 1,2,3
- D. 1,2,4



96. Identify the incorrect pair

A. NACO



B. NTEP



C. NPCDCS

xx



Mehlat H

D. NLEP



Sapna

97. A 35-year-old woman presents to a PHC with skin lesions with sensory loss. On examination, the dermatologist observes the following morphology. How would you treat this patient?

A



B.



C.



D.



MBL



PB adult treatment:

Once a month: Day 1
- 2 capsules of rifampicin (300 mg X 2)
- 1 tablet of dapsone (100 mg)

Once a day: Days 2-28
- 1 tablet of dapsone (100 mg)

Full course: 6 blister packs

PB adult blister pack



PB child treatment (10-14 years):

Once a month: Day 1
- 2 capsules of rifampicin (300 mg+150 mg)
- 1 tablet of dapsone (50 mg)

Once a day: Days 2-28
- 1 tablet of dapsone (50 mg)

Full course: 6 blister packs

For children younger than 10, the dose must be adjusted according to body weight.

PB child blister pack



MB adult treatment:

Once a month: Day 1
- 2 capsules of rifampicin (300 mg X 2)
- 3 capsules of clofazimine (100mg X 3)
- 1 tablet of dapsone (100 mg)

Once a day: Days 2-28
- 1 capsule of clofazimine (50 mg)
- 1 tablet of dapsone (100 mg)

Full course: 12 blister packs

MB adult blister pack



MB child treatment (10-14 years):

Once a month: Day 1
- 2 capsules of rifampicin (300 mg + 150 mg)
- 3 capsules of clofazimine (50 mg X 3)
- 1 tablet of dapsone (50 mg)

Once a day: Days 2-28
- 1 capsule of clofazimine every other day (50 mg)
- 1 tablet of dapsone (50 mg)

Full course: 12 blister packs

For children younger than 10, the dose must be adjusted according to body weight.

MB child blister pack

↙
Gm / 12m (WHO)

98. What is the appropriate size for ET tube for child aged 8?

- ~~A. 6mm~~
- B. 7mm
- C. 8mm
- D. 9mm

children:

$$\frac{\text{Age}}{4} + 4$$

6

♀: 7-7.5

♂: 7.5-9

99. Identify the correct pair about clinical trial phases:

SWIM
== -

A. Therapeutic efficacy confirmed-Phase II III

B. Dose ranging-Phase III II

~~C. Maximum tolerable dose evaluation-Phase I~~

D. Max drug failure rate-Phase ~~IX~~ II

100. All of the following are true about paediatric airway:

1. High position of larynx opposite C3-C4 allows simultaneous breathing while feeding ✓
(T)
2. Thyroid cartilage is angulated *adult* (F) (T)
3. Larynx is softer and more collapsible (T)
4. Shape of the laryngeal inlet is cylindrical *adult* (F) C5-C6

funnel
conical

Options:

- A. 1,2,3
- ~~B. 1,3~~
- C. 1,3,4
- D. 2,3,4