AIIMS MAY 11 PAPER WITH ANSWERS	4. Spectroscopy.
EXPLANATIONS (Version 2.0)	Ans 2 -Tests for species identification are Precipitin test, Latex agglutination test, Haem-agglutination inhibition test.
(Last Updated August 06th 11 PM IST) (Usage of this paper is subject to disclaimer accessible from main page of site.	4. In a suspected case of death due to poisoning where cadaveric rigidity is lasting longer than usual, it may be a case of poisoning due to:
Discuss difficult questions at our <u>question</u> <u>forum</u> , For more papers go to our <u>Pre PG</u> <u>download section</u> . (over 5000 MCQs and 1500 EMQS online apart from other material) To contribute answers/ explanations to this paper use <u>this form (opens in new window)</u> . Answers to few <3-6 questions are doubtful / missing.AIIMS paper	 Lead. Arsenic. Mercury. Copper. Ans 2 'Whip-lash' injuries is caused due to: A fall from a height. Acute hyperextension of the spine. A blow on top to head. Acute hyper flexion of the spine.
To contribute other pg papers mail to contribute@aippg.com. Your name will be fully acknowledged. Answers and explanations © Aippg.com 2003. Read our disclaimer for more information.	Ans 2 (Ref Maheshwari page 147, CSDT 11th ed 1206)- This injury occurs due to rear end automobile collision. The body of victim is accelerated by the impact force but the head is left behind.Sudden hyperextension followed by sudden hyperflexion occurs. It is mentioned that in mild forms only subtle hyperextension injuries zare found in X Ray.So hyperextension being the primary injury is most important answer.
Visit AIPPG forums at www.aippg.net/forum . Separate forums for Discussion difficult questions, General queries about Pre Pg Entrance, plab part 1 , plab part 2. AIPPG forums: your medical community of the web! 1. A dead born foetus does not have:	Other questions about Whiplash- Characteristic feature is that Plain X ray may be normal. Radiological features suggestive of this unstable injury are 1) Widening of anterior disc space 2) Injury to facets joints, pedicle or lamina 3) Avulsion fractures of anterior vertebral body 4) Retropharyngeal swelling / Fracture of posterior facet.Reversal of cervical lordosis suggests damage to posterior facets and manifests as S Shaped (swan neck deformity)Kyphosis seen most often at C4-C5, C5-C6 levels.
 Rigor mortis at birth. Adipocere formation. Maceration. Mummification. 	6. All of the following form radiolucent stones except:1. Xanthine.2. Cysteine.3. Allopurinol.4. Orotic acid.
Ans 2/4??2. False sense of perception without any external object or stimulus is known as:	Ans 2. Radio-opaque stone are Struvite, cysteine, oxlate. Radiolucent are Xanthine, uric acid and uric acid. Allopurinol stones do not exist as such but Allopurinol may lead to xanthine stones.
 Illusion. Impulse. Hallucination. Phobia. Ans 3	7. A young female presents with history of dyspnoea on exertion. On examination, she has wide, fixed split of S2 with ejection systolic murmur (III/VI) in left second intercostals space. Her EKG shows left axis deviation. The most probable diagnosis is :
 Species identifications is done by: Neutron activation analysis (N.A.A.). Precipitin test. Benzidine test. 	 Total anomalous pulmonary venous drainge. Tricuspid atresia. Ostium primum atrial septal defect. Ventricular septal defect with pulmonary arterial hypertension. Ans 3

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	Criteria for diagnosis of neurofibromatosis type 1 (any two of
8. Which test is performed to detect reversible myocardial	the following seven will do)
ischemia?	
1. Coronary angiography.	1) Neurofibromas (one plexiform neuroma, or two +)
2. MUGA scan.	2)Cafe au lait spots (six or more measuring at least 1.5 cm in
3. Thallium scan.	greatest dimension)
4. Resting echocardiography. Ans 3	3)Frekling in axilliary or inguinal areas
Alls 3	4) Two or more iris hamartomas (Lisch nodules)
9. A 62 years old man with caracioma of lung presented to	5) OPTIC GLIOMA6) Sphenoid dysplasia or thinning of cortex of long bones.
emergency department with respiratory distress. His EKG	7) Immediate Relative with Neurofibromatosis Type 1
showed electrical alternans. The most likely diagnosis is :	/) miniculate relative with real of of official of the second sec
1. Pneumothorax.	Since, optic nerve glioma is one of the diagnostic criterai for NF
2. Pleural effusion.	1 it is the commonest. Other tumours associated with NF1 are
3. Cardiac tamponade.	Astrocytic tumours, neurofibrosarcomas, pheochromocytoma.
4. Constrictive pericarditis.	Compressive myleopathy, compressive peripheral neuropathy
Ans 3	and scoliosis also occur.
10 Atrial Chaillation may accur in all of the fallouring	
10. Atrial fibrillation may occur in all of the following conditions, except:	NF type 2 is also Autosomal dominant, the defect being loacted
1. Mitral stenosis.	on chromosome 22. It is characterized by bilateral acoustic
2. Hypothyroidism.	neuromas. (remember type 2 -22 chromosome) / (type 1-17
3. Dilated cardiomyopathy.	chromosome)
4. Mitral regurgitation.	
Ans 2 (Causes of AF include hyperthyroidism)	15. A patient undergoing surgery suddenly develops
	hypotension. The monitor shows that the end tidal carbon dioxide has decreased abruptly by 15mmHg. What is the
11. A patient with recent-onset primary generalized epilepsy	probable diagnosis?
develops drug reaction and skin rash due to phenytoin sodium,	1. Hypothermia.
The most appropriate course of action is :	2. Pulmonary embolism
 Shift to clonazepam. Restart phenytoin sodium after 2 weeks. 	3. Massive fluid deficit
 3. Shift to sodium valproate. 	4. Myocardial depression due to anesthetic agents.
4. Shift to ethosuximide.	Ans 2
Ans 3	
	16. The commonest cause of death in a patient with primary
12. Which of the following is the commonest location of	amyloidosis is 1. Renal failure
hypertensive hemorrhage?	2. Cardiac involvement
1. Pons.	3. Bleeding diathesis
2. Thalamus.	4. Respiratory failure
 Putamen/external capsule. Cerebellum. 	Ans 1
Ans 3	
13. Which of the following is the most common central nervous	17. A middle aged old man, with chronic renal failure is
system parasitic infection?	diagnosed to have sputum positive pulmonary tuberculosis. His
1. Echinococcosis.	creatinine clearance is 25ml/min. All of the following drugs
2. Sparganosis.	need modification in doses except.
3. Paragonimiasis.	1. Isoniazid
4. Neurocysticercosis.	2. Streptomycin 3. Rifampicin
Ans 4. Echinococcosis- Most common site is liver & lungs.	4. Ethambutol.
Paragonimiasis occurs in lungs.	Ans 3 Rifampin has hepatic metabolism, Isoniazid has hepatic
14 Which of the fallowing is the most common tomor	metabolism but dose – needed in mild to moderate renal failure.
14. Which of the following is the most common tumor	Streptomycin & ethambutol have RENAL metabolism.
associated with type I neurofibromatosis? 1. Optic nerve glioma.	
2. Meningioma.	
3. Acoustic Schwannoma.	18. An HIV- positive patient is on anti retroviral therapy with
4. Low grade astrocytoma.	zidovudine, lamivudine and indinavir. He is proven to be
Ans 1 [Ranjita Pallavi, K.J.Somaiya; Mumbai]	suffering from genitor- urinary tuberculosis. Which one of the
Neurofibromatosis Type 1 (von Recklinghausen's Disease is am	following drugs not is given to this patient?
Autosomal dominant disorder. Gene involved = 17, gene	1. Isoniazid 2. Rifampicin
product = Neurofibromin.	3. Pyrazinamide

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4. Ethambutol	4. Recurrent supraventricular tachycardia.
Ans 2 As Rifampin is an enzyme inducer.	Ans 2
19. A high amylase level in pleural fluid suggests a diagnosis of :	26 With reference to bacteroides fragilis all of the following statements are true except.
1. Tuberculosis	-
2. Malignancy	1 It is the most frequent anaerobe isolated from clinical
3. Rheumatoid arthritis	samples. 2. It is not uniformly sensitive to metronidazole.
4. Pulmonary infarction Ans 2. High amylase in pleural fluid may also be seen in	3. The lipopolysaccharide formed by B. fragills is structurally
pancreatic pleural effusion and esophageal rupture q	and functionally different from the conventional endotoxin.
	4. Shock and disseminated intravascular coagulation are
20. Which of the following conditions is associated with	common in bacteremia due to B. fragilis
Coomb's positive hemolytic anaemia: 1. Thrombotic thrombocytopenic purpura.	Ans 4 DIC and purpura are less common as LPS lacks biological potency as seen in other gram -ve bacteria.
2. Progressive systemic sclerosis	biological potency as seen in other grain -ve bacteria.
3. Systemic lupus erythematosus.	27. All of following statements are true regarding Q fever
4. Polyarteritis nodosa.	except.
Ans 3. Other condition associated with Coombs positive	1. It is a zoonotic infection.
hemolytic anemia is drug Methyldopa.	 1. It is a zoonotic infection. 2. Human disease is characterized by an interstitial pneumonia
21. Which of the following marker in the blood is the most	3. No rash is seen
reliable indicator of recent hepatitis B- infection?	4. Weil Felix reaction is very useful for diagnosis.
	Ans 4
1. HBsAg 2. lgG anti - HBs	28. The following statements are true regarding botulism except.
3. lgM anti - HBc	26. The following statements are true regarding obtains except.
4. lgM anti - HBe	1. Infant botulism is caused by ingestion of preformed toxin.
Ans 3	2. Clostridium botulinum A, B, C and F cause human disease.
22. The severity of mitral stenosis is clinically best decided by:	 The gene for botulinum toxin is encoded by a bacteriophage. Clostridium boriatti may cause botulism.
 1. Length of diastolic murmur. 	Ans 1
2. Intensity of diastolic murmur	
3. Loudness of first heart sound.	29. Streptococcal Toxic shock syndrome is due to the following
4. Split of second heart sound.	virulence factor.
Ans 1	1. M protein
23. The risk of developing infective endocarditis is the least in a	2. Pyrogenic exotoxin
patient with:	3. Streptolysin O.
1. Small wantriaular contal defact	4. Carbohydrate cell wall. Ans 2 M protein resists phagocytosis. Pyrogenic toxin causes
 Small ventricular septal defect Severe aortic regurgitation. 	TSS.
3. Severe mitral regurgitation	
4. Large atrial septal defect.	30. A 24 year old male presents to a STD clinic with a single
Ans 4 IE is less in ASD as such, with large pressure ASD pressure difference $$ so risk is lesser.	painless ulcer on external genitalia. The choice of laboratory test
pressure difference so fisk is lesser.	to look for the etiological agent would be:
24. The severity of mitral regurgitation is decided by all of the	1. Scrappings from ulcer for culture on chocolate agar with
following clinical findings except:	antibiotic supplement.
	2. Serology for detection of specific IgM antibodies.
 Presence of mid- diastolic murmur across mitral valve. Wide split of second heart sound. 	 Scrappings from ulcer for dark field microscopy. Scrappings from ulcer for tissue culture.
 Wide spirt of second heart sound. Presence of left ventricular S3 gallop. 	Ans 3 (presumably to look for Treponema pallidium.)
4. Intensity of systolic murmur across mitral valve.	
Ans 1 (mid diastolic murmur heard only in MR with MS)	31. There has been an outbreak of food borne salmonella
25. Congenital long QT syndrome can lead to:	gastroenteritis in the community and the stool samples have been received in the laboratory. Which is the enrichment
25. Conformations Q1 syndrome can read to.	medium of choice:
1. Complete heart block	
2. Polymorphic ventricular tachycardia.	1. Cary Blair medium
3. Acute myocardial infarction.	2. V R medium

 Selenite "F" medium Thioglycollate medium. Ans 3 	 Loss of vision in that eye. Dilatation of pupil. Ptosis
32. A 20 year old male had pain abdomen and mild fever followed by gastroenteritis. The stool examination showed presence of pus cells and RBCs on microscopy. The etiological agent responsible is most likely to be:	4. Loss of light reflex. Ans 339. The commonest cause of occipito- posterior position of fetal head during labour is:
 Enteroinvasive E. coli. Enterotoxigenic E. coli. Enteropathiogenic E. coli. Enetroaggregative E. coli. Ans 1 	 Maternal obesity Deflexion of fetal head Multiparity Android pelvis. Ans 2
33. A man presents with fever and chills 2 weeks after a louse bite. There was a maculo-popular rash on the trunk which spread peripherally. The casue of this infection can be:1. Scurb typhus.2. Endemic typhus.3. Rickettsial pox.4. Epidemic typhus.	 40. The commonest cause of breech presentation is 1. Prematurity 2. Hydrocephalus 3. Placenta previa 4. Polyhydramnios Ans 1
 Ans 2 34. The virulence factor of Nesseria gonorrhoeae includes all of the following except. 1. Outer membrane proteins 2. IgA Protease 3. M- Proteins 4. Pilli 	 41. The commonest congenital anomaly seen in pregnancy with diabetes mellitus is 1. Multicystic kidneys 2. Oesophageal atresia 3. Neural tube defect 4. Enalapril Ans 3
Ans 3 35 A patient in an ICU is on a CVP line. His blood culture shows growth of grain positive cocci which are catalase positive and coagulase negative. The most likely etiological agent is:	 42. Use of which of the following drug is contra-indicated in pregnancy. 1. Digoxin 2. Nigedipine 3. Amoxycillin 4. Ealapril
 Staplylococcus aureus Staplylococcus epidermidis Streptococcus pyogenes Enterococcus faecalis. Ans 2 According to WHO criteria, the minimum normal sperm 	 Ans 4 43. Following renal disorder is associated with worst pregnancy outcome. 1. Systemic lupus erythematosus 2 IgA nephropathy 3. Autosomal dominant polycystic kidney disease
count is: 1 10 million/ml 2 20 million/ml 3 40 million/ml 4 60 million/ml Ans 2 (Below 20 is oligospermia, Normal is 60-120 Million/ ml)	4. Scleroderma Ans 1 COGDT 2003 says that "Scleroderma remains the same or improves slightly during pregnancy." ADPKD presents like scleroderma after 40.IgA nephropathy improves in pregnancy. SLE is associated with a bad outcome about 30% stillbirths. SO SLE is the answer here. ALSO as COGDT says that in quiescent SLE pregnancy may be normal or result in preterm baby without
 37 In triple screening test for Down's syndrome during pregnancy all of the following are included except. 1. Serum beta hCG 2. Serum oestriol 3. Maternal serum Alfa fetoprotein 4. Acetyl cholinesterase Ans 4 	other serious complications. 44. A perimanopausal lady with well differentiated adenocarcinoma of uterus has more than half myometrial invasion, vaginal metastasis and inguinal lymph node metastasis. She is staged as:
38 An optic nerve injury may result in all of the following except.	1. Stage III B 2 Stage III C 3. Stage IV a

4. Stage IV b	
Ans 4 Page 1109 CSDT 11 ed. (Table). Only vaginal metastiais	49. A drop in fetal heart rate that typically lasts less than 2
would be stage IIIB, only more than half invasion of	minutes and is usually associated with umbilical cord
myometrium would have been stage IC.	compression is called.
myometrum would have been stage ic.	1. Early declaration
45. The following combination of agents are the most preferred	2. Late declaration
for short day care surgeries	3. Variable declaration
1 December 1 Control 1 Control	4. Prolonged declaration
1. Propofol, fentanyl, isoflurane	Ans 3 [Visit AIPPG forum / Message Board at
2 Thiopentone sodium, morphine, halothane	www.aippg.net/forum]
3. Ketamine, pethidine halothane	
4. Propofol, morphine, halothane	50. All the following are known side effects with the use of
Ans 1 Ref Lee.	tocolytic therapy except.
	1. Tachycardia
46. All of the following drugs have been used for medical	2. Hypotension
abortion, except.	3. Hyperglycemia
1. Mifepristone.	4. Fever
2. Misoprostol	Ans 2
3. Methotrexate	Click here to contribute to aippg.com (A new window will
4. Atosiban	<u>open)</u>
Ans 4 [Page 547 Dutta "Atosiban is an oxytocin analogue, It	
counteracts the effect of endogenous oxytocin.So, It can inhibit	51 All of the following factors decrease the minimum Alveolar
oxytocin induced preterm labour.]	Concentration (MAC) of an inhalation anaesthetic agent except.
[Medical abortion: Done when women come within 49 days	
from LMP.	1. Hypothermia
Protocol is IM Methotrexate (50 mg/metre square) given on	2. Hyponatremia
day 1 and then Misoprostol (prostaglandlin E1) inserted	3. Hypocalcaemia
Vaginally on day 5,6,7. Suction curretage may be needed after 2	4. Anemia
weeks if pregnancy appears viable, IF gestational sac persists	Ans 3
for more than 4 weeks after methotraxate or IF excessive	
bleeding occurs during anytime. (only 10-15 % require Suction	52 The narrowest part of larynx in infants is at the cricoid level.
curretage)]	In administering anesthesia this may lead to all except.
[About Mifepristone: = RU-486, It is a synthetic steroid. It	in deministering difestitesia and may fead to an except.
occupies progesterone binding sites but does not release heat	1. Choosing a smaller size endotracheal tube.
shock protein[Progesterone does].	2. Trauma t the subglottic region.
So this drug blocks stimulatory effect of progesterone on	3. Post operative stridor
endometrial growth, also it blocks inhibitory effect of	4. Laryngeal oedema
progesterone on uterine contractility-causing abortion.	Ans ?
It has been used with prostaglandlins to cause abortions]	
[Team AIPPG; & Murali, Bangalore (MMC)]	53. The administration of succinylocholine to a paraplegic
[reality in ro, & Waran, Bangalore (Wive)]	patient led to the appearance of dysarrhythmias, conduction
47. A 21 year old primigravida is admitted at 39 weeks gestation	abnormalities and finally cardiac arrest. The most likely cause
with painless antepartum haemorrhage. On examination uterus	is:
is soft, non tender and head engaged. The management for her	15.
would be:	1 Hymerceleomie
would be.	1. Hypercalcemia
1. Blood transfusion and sedatives.	2. Hyperkalemia3. Anaphylaxis
 A speculum examination Pelvic examination in OT 	4. Hyermagnesemia
	Ans 1
4. Tocolysis and sedatives.	
Ans 3	54. Following spinal subarachnoid block patient a develop
40 Which statement is the second in APATOLICE (M	hypotension. This can be managed by the following means
48. Which statement is true regarding VENTOUSE (Vacuum	except.
Extractor)	1. The second second second
1. Minor scalp abrasions and subgaleal haematomas to new born	1. Lowering the head end
are moe frequent than forceps.	2. Administration of 100 ml of Ringers lacate before the block
2. Can be applied when foetal head is above the level of ischial	3. Vascopressure drug like methoxamine
spine.	4. Us of ionotrope like dopamine.
3. Maternal trauma is more frequent than forceps.	Ans 4
4. Can not be used when fetal head is not fully rotated.	55 To the immediate ment an and in 1.1
Ans 2	55. In the immediate post operative period the common cause of

respiratory insufficiency could be because of the following, except.	1. Carotid branch of the glossopharyngeal nerve.
1. Residual effect of muscle relaxant	2. Phrenic nerve
2. Overdose of narcotic analgesic	3. Vagus nerve and recurrent laryngeal nerve.
3. Mild Hypovalemia	4. Thoracic splanchnic nerve
4. Mycocardial infarction	Ans 4
Ans 4	
56 On mutation, which of the following may give rise to	60. All the following signs could result from infection within the right cavernous sinus except.
hereditary glaucoma.	1. Constricted pupil in response to light
1. Optineurin	2. Engorgement of the retinal veins upon ophthalmoscopic
2. Ephrins	examination.
3. RBA8	3. Ptosis of the right eyelid.
4. Huntingtin	4. Right ophthalmoplegia.
Ans 1 [Ref : PMID: 11834836 PubMed - indexed for	Ans 1?
MEDLINE] [PUBMED is a free service by the US Govt health	
department, it indexes almost all studies/ Research papers	61. In dislocation of the jaw, displacement of the articular disc
published worldwide] It can be found at url http://nlm.nih.gov.	beyond the articular tubercle of the temporomandibular joint results from spasm or excessive contraction of the following
"	muscle?
"optineurin gene is implicated in transmission of hereditary primary open angle glaucoma"	1. Buccinator
Other points about Opitneurin gene taken from the same study:	2. Lateral pterygoid
• Located on chromosome 10 p 14 [Short arm: P = Petite!, Next	3. Masseter
letter q was taken for long arm]	4. Temporalis
• Optineurin is expressed in trabecular meshwork,	Ans 2
nonpigmented ciliary epithelium, retina, and brain, and we	
speculate that it plays a neuroprotective role.	62. Following surgical removal of a firm nodular cancer
• The OPTN gene codes for a conserved 66-kilodalton protein of	swelling in the right breast and exploration of the right axilla, on examination the patient was found to have a winged right
unknown function that has been implicated in the tumor necrosis	scapula. Most likely this could have occurred due to injury to
factor-alpha signaling pathway and that interacts with diverse proteins including Huntingtin, Ras-associated protein RAB8,	the :
and transcription factor IIIA.	1. Subscapular muscle
• Inheritance is supposedly Autosomal Dominant.	2 Coracoid process of scapula
	3. Long thoracic nerve
Taken from "Rezaie T, Child A, Hitchings R, Brice G, Miller L,	4. Circumflex scapular artery
Coca-Prados M, Heon E, Krupin T, Ritch R, Kreutzer D, Crick	Ans 3
RP, Sarfarazi M. Molecular Ophthalmic Genetics Laboratory,	63 A 50 year old man suffering from carcinoma of prostate
Surgical Research Center, Department of Surgery, University of	showed areas of sclerosis and collapse of T10 and T11 vertebrae
Connecticut Health Center, Farmington, CT 06030, USA."	in X-ray. The spread of this cancer to the above vertebrae was
	most probably through:
[Dr Sid; Dr Sanjeev Bansal ,LLRM Meerut]	1. Sacral canal
57 Brain lipid binding protein is expressed by which of the	2. Lymphatic vessels
following:	3. Internal vertebral plexus of veins
1. Mature astrocytes.	4. Superior rectal veins
2. Oligodendrocytes.	Ans 3 Vertebral plexus also known as bateson's plexus.
3. Purkinje cells	64 Father to son inheritance is never seen in case of:
4. Pyramidal neurons	1. Autosomal dominant inheritance
Ans 2?	2. Autosomal recessive inheritance
50 All of the following ligger out a contribute to the stability of	3. X- linked recessive inheritance
58. All of the following ligaments contribute to the stability of ankle (talocrural) joint except.	4. Multifactorial inheritance
1. Calcaneonavicular (spring)	Ans 3
2. Deltoid	
3. Lateral	65 A 3- year old boy is detected to have bilateral renal calculi. Metabolic evaluation confirms the presence of marked
4. Posterior tibiofibular	hypercalciuria with normal blood levels of calcium, magnesium,
Ans 1 (associated with arch integrity)	phosphate, uric acid and creatinine. A diagnosis of idiopathic
	hypercalciuria is made. The dietary management includes all,
59. In angina pectoris, the pain radiating down the left arm is	except
mediated by increased activity in afferent (sensory) fibres	1. Increased water intake
contained in the : -	

 Low sodium diet Reduced calcium intake Avoid meat proteins. Ans 3 	 The normal physiological substrate concentration. The substrate concentration at half maximum velocity. Numerically indentical for all isozymes that catalyze a given reaction. Ans 1
66. The hormone associated with cold adaption is :1. Growth hormone.2. Thyroxine.3. Insulin.4. Melanocyle Stimulating Hormone.Ans 2	 73. At the physiological pH the DNA molecules are : 1. Positively charged. 2. Negatively charged. 3. Neutral. 4. Amphipathic. Ans 2 (harper, this question has been in last 2-3 exams)
 67. All of the following are characteristic features of Kwashiorkor, except : 1. High blood osmolarity. 2. Hypoalbuminemia. 3. Edema. 4. Fatty liver. Ans 1 68. Acetyl Co-A acts as a substrate for all the enzymes except : 1. HMG-Co A synthetase. 2. Malic enzyme. 	 74. Cholesterol present in LDL : 1. Represents primarily cholesterol that is being removed from peripheral cells. 2. Binds to a receptor and diffuses across the cell membrance. 3. On acuumulation in the cell inhibits replenishment of LDL receptors. 4. When enters a cell, suppresses activity of acyl-CoA: cholesterol acytranferase ACAT. Ans 3
 Malonyl Co A synthetase. Fatty acid synthetase. Ans 2[Dr Kailash Prasad Verma, Calicut] Click here to contribute to aippg.com (A new window will open) 69. The activity of the following enzyme is affected by biotin deficiency: Transketolase, Dehydrogenase. Oxidase. Carboxylase. 	 75 A newborn infant refuses breast milk since the 2nd day of birth, vomits on force-feeding but accepts glucose-water, develops diarrhea on the third day, by 5th day she is jaundiced with liver enlargement and eyes show signs of cataract. Urinary reducing sugar was positive but blood glucose estimated by glucose oxidation method was found low. The most likely cause is deficiency of : Galactose-1-phosphate uridyl transferase. Beta galactosidase. Glucose-6-phosphatase. 4. Galactokinase.
 Ans 4 70. A 55-year-old male accident victim in casualty urgently needs blood. The blood bank is unable to determine his ABO group, as his red cell group and plasma group do not match. Emergency transfusion of patient should be with: 1. RBC corresponding to his red cell group and colloids/crystalloid. 2. Whole blood corresponding to his plasma group. 3. O positive RBC and colloids/ crystalloid. 4. AB negative whole blood. Ans 3 	 76 An obese lady aged 45 years, was brought to emergency in a semi comatose condition. The laboratory investigations showed K+ (5.8 mmol/L); Na+ (136 mmol/L); blood pH (7.1), HCO3 (12 mmol/L), 'ketone bodies (350 mg/dl). The expected level of blood glucose for this lady is: 1. < 45 mg/dl. 2. < 120 mg/dl. 3. >180 mg/dl. 4. < 75 mg/dl. Ans 2?/ 3? Pseudohypernatremia / Diabetic ketoacidosis (to be updated any points?)
 71. Although more than 400 blood groups have been identified, the ABO blood group system remains the most important in clinical medicine because. : 1. It was the blood group system to be discovered. 2. It has four different blood groups A, B, AB, O(H). 3. ABO (H) antigens are present in most body tissues and fluids. 4. ABO (H) antibodies are invariably present in plasma when persons RBC lacks the corresponding antigen. Ans 4 [Major importance in Clinical medicine is TRANSFUSION] [Sanjay, Assam] 72. Km of an enzyme is : 1. Dissociation constant. 	 77. Replication and transcription are similar processes in mechanistic terms because both : Use RNA primers for initiation. Use decoxybonucleotides as precursors. Are semi conserved events Involve phosphodiester bond formation with elongation occurring in the 5' - 3' direction. 78. Commonest cause of neonatal mortality in India is : Diarrheal diseases. Birth injuries. Low birth weight

 except: maternal intake of iron supplements (Yes Ybo) and birth weights 2. The disease progresses even after removal of contact. 3. Can lead to plenual mesohelioma. 4. Spatum contains asbestos bodies. An al van and the method of a di above. 3. Population under 10 years and 60 and above. 3. Population under 15 years and 60 and above. 3. Population under 15 years and 60 and above. 3. Population under 15 years and 60 and above. 3. Population under 15 years and 60 and above. 3. Population under 15 years and 60 and above. 3. Population under 15 years and 65 and above. 4. Paired 1-test. 5. Concernet inhalation agent delivery. 1. Incorrect attachment of anaesthesia machines. 2. Category II, start 2 (RHZE)3. 4. Category II, start 2 (RHZE)3. 5. Category II, start 2 (RHZE)3. 6. Category II, start 2 (RHZE)3. 7. The prevalence of the disease is higher in population. 7. The prevalence of the disease is higher in population. 8. After a mior head injury a young patient was unable to close his left eye and had forolog of saliva from left angle of mouth. He is suffering from: 4. Uraversious. 4. Diade dependent struct. 4. Sa dual and a discontinue stark is a left beart syndrome. 4. Th	4. Congenital anomalies. Ans 3	4. Cannot be calculated from the given data. Ans 2
 Occurs within five years of exposure. The discase progresses even a larremoval of contact. Can clad to pleural mesohelioma. Sputum contains asbestos bodies. Ans 1 Sputum contains asbestos bodies. Chicaculating Dependency Ratio, the numerator is expressed In collectar test of hypothesis would you advise for the investigator in this situation ? Chicaculating Dependency Ratio, the numerator is expressed Population under 10 years and 60 and above. Population under 10 years and 65 and above Population under 10 years and 65 and above. Population under 10 years and haemoptysis of radio. Coccupt and Personnel an haemoptysis of radio. Coccupt of a months and haemoptysis of radio. Chargory IL, start 2 (RHZE). Category IL, start 2 (RHZE). So A set a minor head injury a young patient was unable to close sit bingler in population A. T	79. All of the following features are suggestive of asbestosis except:	
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populations; but the proportion of false positive results among those who test positive in population A is lower than those who test positive in population A.4. Intravenous pulse corticosteroids. Ans 21. The specificity of the test is lower in population A.3. The prevalence of the disease is higher in population A.4. The specificity of the test is higher in population A.88. After a minor head injury a young patient was unable to close his left eye and had drooling of saliva from left angle of mouth. He is suffering from : 1. VIIth nerve injury.3. The prevalence of the disease is higher in population A.7. The prevalence of the disease is higher in population A.4. The specificity of the test is higher in population A.88. After a minor head injury a young patient was unable to close his left eye and had drooling of saliva from left angle of mouth. He is suffering from : 1. VIIth nerve injury.83. Residence of three village with three different types of water supply were asked to participate in a study to identify cholera carries. Because several cholera deaths had occurred in the recent past, virtually everyone present at the time submitted to examination. The proportion of residents in each village who were carries was computed and compared. This study is a : 1. Cross-sectional study.1. Atrial septal defect. 2. Hypoplastic left heart syndrome. 3. Truncus arteriosus. 4. Double outlet right ventricle. Ans 184. A drug company is developing a new pregnancy-test kit for use on an outpatient basis. The company used the pregnancy test to more sector pay showed positive test. Upon using the same test on 100 mone-pregnant women, 90 showed negative result. What is the sensitivity of the test ? 1. 90%9. All of the following are given global prominence in t	02 A summing that is an align the summer is the similar	
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 test positive in population B. What is the likely explanation? 1. The specificity of the test is lower in population A. 2. The prevalence of the disease is lower in population A. 3. The prevalence of the disease is higher in population A. 4. The specificity of the test is higher in population A. 4. The specificity of the test is higher in population A. 4. The specificity of the test is higher in population A. 4. The specificity of the test is higher in population A. 5. The prevalence of three village with three different types of water supply were asked to participate in a study to identify cholera carries. Because several cholera deaths had occurred in the recent past, virtually everyone present at the time submitted to examination. The proportion of residents in each village who were carries was computed and compared. This study is a : Cross- sectional study. Case-control study. Concurrent cohort study. Non-concurrent. Ans 1 84. A drug company is developing a new pregnancy-test kit for 100 women who are known to be pregnant. Out of 100 women, 99 showed positive test. Upon using the same test on 100 non-pregnant women, 90 showed negative result. What is the sensitivity of the test ? 190% 		
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the sensitivity of the test ? Ans 1 1. 90%		
1. 90%		
2.99%	2.99%	91. For the field diagnosis of trachoma, the WHO recommends
	3. Average of 90 & 99.	

	2 Demetrique enlancia
assessed in : 1. Women aged 15-45 years.	 Pemphigus vulgaris. Dermatitis herpetiformis.
 Wohlen aged 15-45 years. Population of 10 to 28 year range. 	Ans 3
3. Children aged 0-10 years.	
4. Population above 25 years of age irrespective of sex.	99. Podophyllum resin is indicated in the treatment of :
Ans?	1. Psoriasis.
	2. Pemphigus.
92. The eye condition for which the world Bank assistance was	3. Condyloma acuminata.
provided to the National Programme for Control of Blindness	4. Condylomata lata.
(1994-2001) is :	Ans 3
1. Cataract.	
2. Refractive errors.	100. The following drug is indicated in the treatment of
3. Trachoma.	pityriasis versicolar :
4. Vitamin A deficiency.	1. Ketoconazole.
Ans 4	2. Metronidazole.
93. Under the school eye screening programme in India, the	3. Griseofulvin.
initial vision screening of school children is done by : 1. School teachers.	4. Chloroquine. Ans 3
2. Primary level health workers.	Click here to contribute to aippg.com (A new window will
3. Eye specialists.	open)
4. Medical officers.	
Ans 1	101. Direct impact on the bone will produce a :
	1. Transverse fracture.
94. The usefulness of a screening test depends upon its :	2. Oblique fracture.
1. Sensitivity.	3. Spiral fracture.
2. Specificity.	4. Comminuted fracture.
3. Reliability.	Ans 4
4. Predictive value.	
A 1	102. All of the following are seen in rickets, except.
Ans 1	1. Bow legs.
95. For testing the statistical significance of the difference in	 2. Gunstock deformity. 3. Pot belly.
heights of school children among three socio-economic groups,	4. Cranio tabes.
the most appropriate statistical test is :	Ans 2
1. Student's 't' test.	
2. Chi-squared test.	103. Post-dural puncture headache is typically :
3. Paired 't' test.	1. A result of leakage of blood into the epidural space.
4. One way analysis of variance (one way ANOVA).	2. Worse when lying down than in sitting position.
Ans 4	3. Bifrontal or occipital.
	4. Seen within 4 hours of dural puncture.
96. Reservoir of Indian Kala azar is :	Ans 3
1. Man.	
2. Rodent.	104. Kenny Packs were used in the treatment of :
 Canine. Equine. 	 Poliomyelitis. Muscular dystrophy.
Ans 1 (new park)	3. Polyneuropathies.
Alls I (liew park)	4. Nerve Injury.
97. The following is true about the term 'New Families':	Ans 1
1. It is a variant of the 3-generation family.	
2. It is applied to all nuclear families of less then 10 years	105. A patient was administered epidural anaesthesia with 15ml
duration.	1.5% lignocaine with adrenaline for hernia surgery. He
3. It is a variant of the joint family.	developed hypotension and respiratory depression within 3
4. It is applied to all nuclear families of less then 2 years	minutes after administration of block. The commonest cause
duration.	would be.
Ans 2	1. Allergy to drug administered.
09 A 24 year old formals has floasid hulles in the slip on 1 - 1	2. Systemic toxicity to drug administered.
98. A 24 year old female has flaccid bullae in the skin and oral	3. Patient got vasovagal shock.4. Drug has entered the sub arachnoid space.
erosions. Histopathology shows intraepidermal acantholytic blister. The most likely diagnosis is :	4. Drug has entered the sub arachnoid space. Ans 3
1. Pemphigoid.	1110.5
2. Erythema multiforme.	106. Which one of the following is the shortest acting
,	

intravenous analgesic :1. Remifantanil.2. Fentanyl.3. Alfentanil.4. Sufentanil.	 Heal pad blood at the time of birth. Heal pad blood on 4 day of birth. Peripheral venous blood on 28 day. Ans 1
Ans 1	114. The Pin index code of Nitrous oxide is :
	1. 2, 5.
107. The etiology of anterior ethmoidal neuralgia is :	2. 1,5.
1. Inferior turbinate pressing on the nasal septum.	3. 3,5.
2. Middle turbinate pressing on the nasal septum.	4. 2,6.
3. Superior turbinate pressing on the nasal septum.	Ans 1 Lee's
4. Causing obstruction of sphenoid opening.	
Ans 2	115. A three years old boy presents with poor urinary stream.
	Most likely cause is :
108. The treatment of choice for stage 1 cancer larynx is:	1. Stricture urethra.
1. Radical Surgery.	2. Neurogenic bladder.
2. Chemotherapy.	3. Urethral calculus.
3. Radiotherapy.	4. Posterior uretral valves.
4. Surgery followed by radiotherapy.	Ans 4
Ans 3	
	116. Peroconceptional use of the following agent leads to
109. Stapes footplate covers :	reduced incidence of neural tube defects :
1. Round window.	1. Folic acid.
2. Oval window.	2. Iron.
3. Interior sinus tympani.	3. Calcium.
4. Pyramid.	4. Vitamin A.
Ans 2	Ans 1
110. All the following muscles are innervated by the facial	117. A 11- month old boy, weighing 3 kg, has polyuria,
nerve except.	polydipsia and delayed motor milestones. Blood investigations
1. Occipito- frontalis.	show creatinine of 0.5 mg/dl, potassium 3mEq/1, sodium 125
2. Anterior belly of diagastric.	mEq/1, chloride 88 mEq/1, calcium 8.8 mg/dl, pH 7.46 and
3. Risorius.	brcarbonate 26 mEq/1. Ultrasonography shows medullary
4. Procerus.	nephrocalcinosis. The most likely diagnosis is :
Ans 2 [Anterior belly of digastric supplied by Mandibular	1. Renal tubular acidosis.
Division of 5th CN] [Dr Indra Nagar, MMC Bangalore]	2. Diabetes insipidus.
Click here to contribute to aippg.com (A new window will	3. Bartters syndrome.
open)	4. Pseudohypoaldosteronism.
	Ans 3 ghai page 384
111. The following statements regarding Turner syndrome are	
true except.	118. The treatment of choice for primary grade V vesico-
1. Occurrence of Turner syndrome is influenced by material age.	ureteric reflux involving both kidneys in a 6 month old boy is:
2. Most patients have primary amenorrhoea.	1. Antibiotic prophylaxis.
3. Most patients have short stature.	2. Ureteric reimplantation.
4. Edema of hands and feet is an important feature during	3. Cystoscopy followed by subureteric injection of teflon.
infancy.	4. Bilateral ureterostomies.
Ans 1 Turner's syndrome is not related to mother's age. Pts have	Ans 1 ?(Nelson says that chemo prophylaxis as even severe
chromatin negative buccal smear and 46 X configuration.	reflux resolves over time.)
112. All of the following methods are used for the diagnosis of	119. The most common leukocytoclastic vasculitis affecting
HIV infection in a 2 month old child, except :	children is :
1. DNA-PCR.	1. Takayasu disease.
2. Viral culture.	2. Mucocutaneous lymph node syndrome. (Kawasaki disease).
3. HIV ELISA	3. Henoch Schonlein purpura.
4. p24 antigen assay.	4. Polyarteritis nodosa.
Ans 3	Ans 3
A I I M S A I P P G PA P E R	120 A 12 mean ald have a network for some locking of the
113. In neonatal screening programme for detection of	120. A-13-year old boy is referred for evaluation of nocturnal
congenital hypothyroidism, the ideal place and time to collect	enuresis and short stature. His blood pressure is normal. The hemoglobin level is $8\sigma/dl$. Urea 112 mg/dl, creatining 6 mg/dl
the blood sample for TSH estimation is : 1. Cord blood at time of birth.	hemoglobin level is 8g/dl. Urea 112 mg/dl, creatinine 6 mg/dl, sodium 119 mEq/dl, potassium 4 mEq/l, calcium 7 mg/dl,
	j sourum 117 meg/ui, potassium 4 meg/i, calcium 7 mg/ul,

phophate 6 mg/dl and alkaline phophatase 300 U/l. Urinalysis shows trace proteinuria with hyaline casts; no red and white	 2. Dissecting aneurysm of aorta. 3. Metastatic disease of pericardium.
cells are seen. Ultrasound shows bilateral small kindneys and	4. Constrictive pericarditis.
the micturating cystourethrogram is normal. The most likely diagnosis is :	Ans 2
1. Alport's syndrome.	128. A 60- years man presented with fatigue weight loss and
2. Medullary sponge kidney.	heaviness in left hypochodrium for 6 months. The hemogram
3. Chronic glomerulonephritis.	showed Hb 10 gm/dL, TLC 5 laks/mm3, platelet count 4
4. Nephronophthisis.	laks/mm3, DLC; neutrophil 55%, lymphocytes 4% montocytes 2% basophiles 6% metamyelocytes 10% myeloytes 18%,
Ans 4 exp?	promyelocytes 2% and blasts 3%. The most likely cytogenetic abnormality in this case is :
121. The most common infectious agent associated with chronic	1. t (8; 21).
pyelonephritis is :	2. t (9; 22).
1. Proteus vulgaris.	3. t (15; 17).
2. Klebsiella pneumonie.	4. trisomy 21.
3. Staphylococcus aureus.	Ans 2
4. Escherichia coli.	
Ans 1	129. On sectioning of an organ at the time of autopsy, a focal, wedge-shaped firm area is seen accompanied by extensive
122. Which of the following hepatitis viruses is a DNA virus:	hemorrhage, with a red appearance. The lesion has a base on the
1. Hepatitis C virus.	surface of the organ. This finding is typically of :
2. Hepatitis B virus.	1. Lung with pulmonary thromboembolism.
3. Delta agent.	2. Heart with coronary thrombosis.
4. Hepatitis E virus.	3. Liver with hypovolemic shock.
Ans 2	4. Kidney with septic embolus.
	Ans 1
123. The mechanism that protects normal pancreas from	
autodigestion is :	130. Upper GI endoscopy and biopsy from lower esophagus in a
1. Secretion of biocarbonate.	48 year old lady with chronic heart burn shows presence of
2. Protease inhibitors present in plasma.	columner epithelium with goblet. The feature is most likely
3. Proteolytic enzymes secreted in inactive form.	consistent with :
4. The resistance of pancreatic cells.	1. Dysplasia.
Ans 3	2. Hyperplasia.
	3. Carcinoma in-situ.
124. All of the following type of lymphoma are commonly seen	4. Metaplasia.
in the orbit except.	Ans 4
1. Non Hodgkin's lymphoma, mixed lymphocytic & histiocytic.	
2. Non Hodgkin's lymphoma, lymphocytic poorly differentiated.	
3. Burkitt's lymphoma.	AIPPG
4. Hodgkin's lymphoma.	.com
Ans 3	
	131. The light brown perinuclear pigment seen on H&F staining
125. "Tophus" is the pathognomonic lesion of which of the	of the cardiac muscle fibers in the grossly normal appearing
following condition:	heart of an 83- year old man at autopsy is due to deposition of. :
1. Multiple myeloma.	1. Hemosiderin.
2. Cystinosis.	2. Lipochrome.
3. Gout.	3. Cholesterol metabolic.
4. Eale's disease.	4. Anthracotic pigment.
Ans 3	Ans 2
126. Common ocular manifestation in Trisomy 13 is :	132. A renal biopsy from a 56 years old women with
1. Capillary hemangioma.	progressive renal failure for the past 3 years shows glomerular
2. Bilateral microphthalmos.	and vascular deposition of pink amorphous material. It shows
3. Neurofibroma.	apple-green birefringence under polarized light after Congo red
4. Dermoid Cyst.	staining. These deposits are positive for lambda light chains.
Ans 1 Ghai	The person is most likely to suffer from :
	1. Rheumatoid arthritis.
127. Haemorrhagic pericacarditis occurs in all of the following	2. Tuberculosis.
conditions except. :	3. Systemic lupus erythematosus.
1. Transmural myocardial infarction.	4. Multiple myeloma.
	Ans 4

139. Sodium 2-mercapto ethance sulfonate (mesna) is used as a 133. A 40-year-old man has a chronic cough with fever for several months. The chest radiograph reveals a diffuse protective agent in : reticulonodular pattern. Microscopically on transbronchial 1. Radiotherapy. biopsy there are focal areas of inflammation containing 2. Cancer chemotherapy. epithelioid cell granuloma, Langhans giant cells, and 3. Lithotrypsy. lymphocytes. These findings are typical for which of the 4. Hepatic encephalopathy. following type of hypersensitivity immunologic responses : Ans 2 1. Type-I. 2. Type-II. 140. During laryngoscopy and endo-tracheal intubation which 3. Type-III. of the maneuver is not performed: 4. Type-IV. 1. Flexion of the neck. Ans 4 2. Extension of Head at the atlanto-occipital joint. 3. The laryngoscope is lifted upwards levering over the upper 134. An adult old man gets a burn injury to his hands. Over few incisors. weeks, the burned skin heals without the need for skin grafting. 4. In a straight blade laryngoscope, the epiglottis is lifted the tip. The most critical factor responsible for the rapid healing in this Ans 1 case is : 1. Remnant skin appendages. 141. In a young patient who had extensive soft tissue and muscle injury, which of these muscle relaxants used for 2. Underlying connective tissue. 3. Minimal edema and erythema. endotracheal intubation might lead to cardiac arrest : 4. Granulation tissue. 1. Atracurium. Ans 4 2. Suxamethonium. 3. Vecuronium. 135. A 12 year old girl complains of pain persisting in his left 4. Pancuronium. leg. For several weeks with a low grade fever. A radiograph Ans 2 reveals a mass in the diaphyseal region of the left femur with overlying cortical erosion and soft tissue extension. A biopsy of 142. The diuretic group that does not require access to the the lesion shows numerous small round cells, rich in PAS tubular lumen to induce diuresis is : positive diastase sensitive granules. The most likely histological 1. Carbonic anhydrase inhibitor. diagnosis is : 2. Na-Cl symport inhibitor. 3. Mineralocorticoid antagonist. 1. Osteogenic sarcoma. 2. Osteoblastoma. 4. Na-K symport inhibitor. 3. Ewing's sarcoma. Ans 3 4. Chondroblastoma. Ans 3 (PAS positive diastase resistant granules seen in 143. A vasopressin analogue does not produce therapeutic effect through vasopression V-2 receptor in which of the following: Hereditary haemocromatosis in Liver biopsy) 1. Central diabetes insipidus. 2. Bleeding esophageal varices. 136. In a 2 months old infant undergoing surgery for biliary atresia, you would avoid one of the following anaesthetic: 3. Type I van Willebrand's disease. 1. Thiopentone 4. Primary nocturnal enuresis. 2. Halothane. Ans 2 [See AIPPG download section at www.aippg.com/pg/.] 3. Propofol. 4. Sevoflurance. 144. Regarding neonatal circumcision, which one of the Ans? following is true : 1. It should be done without anaesthesia, as it is hazardous to give anaesthesia. 137. The ideal muscle relaxant used for a neonate undergoing porto-enterostomy for biliary atresia is : 2. It should be done without anesthesia, as neonates do not perceive pain as adult. 1. Altracurium. 2. Vecuronium 3. It should be done under local anaesthesia only. 3. Pancuronium. 4. General anaesthesia should be given to neonate for circumcision as they also feel pain as adult. 4. Rocuronium. Ans? Ans 3 as per CPDT but lee says that GA should be given normally. 138. Visual analogue scale (VAS) is most widely used to measure : 145. The following statement is not true about the use of 1. Sleep. clonidine in the treatment of hypertension.: 2. Sedation. 1. Reduction in central sympathetic outflow. 3. Pain intensity. 2. Increase in LDL-cholesterol in prolonged use. 3. Sedation ad xerostomia are common side effects. 4. Depth of Anaesthesia. Ans 3 4. It can be combined with vasodilators.

Ans 2 AI PP G	 2. Enzymatic composition. 3. Nuclei.
146. The following is not true about the use of beta-blockers in	4. Membrane lipids.
heart failure:	Ans 1
 It should be initiated at a very low dose. It is most effective in new-onset decompensated heart failure. 	154. A 60 year old hypertensive patient on Angiotensin II
 Rest encerve in new-onset decompensated near failure. Slow upward titration of dose is required. 	receptor antagonists (losartan) is posted for hernia repair
4. Carvedilol is most widely used in this condition.	surgery. The anti-hypertensive drug should be :
Ans 2	1. Continued till the day of operation.
147. The following statement is not true about sotalol :	 Discontinued 24 hrs. preoperatively. Discontinued one week preoperatively.
1. It is a non-selective beta-blocker.	4. Administered in an increased dosage on the day of operation.
2. It prolongs action potential duration troughout the heart.	Ans 2 (this is done to prevent Hypotension)
3. It is excreted through bile following hepatic metabolism.	
4. Polymorphic ventricular tachycardia is a common side effect. Ans 4 [A I P P G]	155. Infertility is a common feature in 'Sertoli cell only' syndrome, because :
	1. Too many Sertoli cells inhibit spermatogenesis via inhibin.
148. For drugs with first-order kinetics, the time required to	2. Proper blood -testis barrier is not established.
achieve steady state levels can be predicted from :	3. There is no germ cells in this condition.
 Volume of distribution. Half life. 	4. Sufficient numbers of spermatozoa are not produced. Ans 3
3. Clearance.	
4. Loading dose.	156. Most accurate measurement of extracellular fluid volume
Ans 2 (4 and half life req //)	(ECF) can be done by using :
149. All of the following drugs are metabolised by acetylation	1. Sucrose. 2. Mannitol.
except. :	3. Inulin.
1. INH.	4. Aminopyrine
 Sulfonamides. Ketoconazole. 	Ans 3
4. Hydralazine.	157. A shift of posture from supine to upright posture is
Ans 3	associated with cardiovasucular adjustments. Which of the
	following is NOT true in this context :
150. All the following cephalosporins having good activity against Pseudomonas aerugenosa except :	 Rise in central venous pressure. Rise in heart rate.
1. Cephadroxil.	3. Decrease in cardiac output.
2. Cefepime.	4. Decrease in stroke volume.
3. Cefoperazone.	Ans 3
4. Ceftazidime. Ans 1	158. Dystrophic gene mutation leads to :
Click here to contribute to aippg.com (A new window will	1. Myasthenia gravis.
open)	2. Motor neuron disease.
151. Low does progestational contracentives primarly est on	3. Poliomyelitis.
 151. Low dose progestational contraceptives primarly act on. : 1. Oviductal motility. 	4. Duchenne Muscular Dystrophy. Ans 4
2. Uterine endometrium.	
3. Cervix.	159. Osteoclast has specific receptor for :
4. Pituitary. Ans 3	 Parathyroid hormone. Calcitionin.
	3. Thyroxin.
152. There is a mid-cycle shift in the basal body temperature	4. Vit D3.
(BBT) after ovulation in women. This is caused by :	Ans 2
1. FSH-peak. 2. LH-peak.	160. Which of the following is not a usual feature of right
3. Oestradiol.	middle cerebral artery territory infarct ?
4. Progesterone.	1. Aphasia.
Ans 4	2. Hemiparesis.
153. Various cells respond differentially to a second messenger	 Facial weakness. Dysarthria.
(such as increased CAMP) because they have different.	Ans 1
1. Receptors.	

161. The treatment of choice in Attention Deficit HyperactivityDisorder is :1. Haloperidol.	prematurity, coats disease, retinopathy of prematurity, persistant hyperplastic primary vitreous."
 2. Imipramine. 3. Methylphenidate. 4. Alprazolam. 	Also rarely in 7 % patients painful red eye with glaucoma, hyphema, or proptosis is the initial manifestation.
Ans 3	Imp about retinoblastoma : Biopsy not needed for diagnosis: characterstic features on ophthalmologic examination are intraocular calcification and vitreous seeding. Retinoblastoma
162. The following is a Schneider's first rank symptom :1. Persecutory delusion.2. Voices commenting on actions.	can undergo spontaneous remission (Q) Also read question in past papers on aippg.com about treatment of retinoblastoma.
 Delusion of guilt. Incoherence. 	Reference # 2 kanski 5th ed.page 339 and 340 table courtsey
Ans 2	Ranjita Pallavi, K.J. Somaiya college; Mumbai.
163 A middle aged man presented with pain in back, lack of interest i recreational activities, low mood, lethargy, decreased	167 Which of the following imaging modality is most sensitive
sleep and appetite for two months. There was no history	to detect early renal tuberculosis.
suggestive of delusions of hallucinations. He did not suffer from	 Intravenous urography Ultrasound
any chronic medical illness. There was no family history of psytchiatric illness. Routine investigations including	3. Computed tomography
haemogram, renal function tests, liver function testsm	4. Magnetic resonance imaging
electrocadiogram did not reveal any abnormality. This patient	Ans 1
should be treated with :	168. A young man with tuberculosis presents with massive
1. Haloparidol.	recurrent hemoptysis. For angiographic treatment which
 Sertraline. Alprazolam. 	vascular structure should be evaluated first.
4. Olanzapine.	1. Pulmonary
Ans 3	2. Bronchial artery
164. An elderly house wife lost her husband who died suddenly	 Pulomary vein Superior vena cava
of Myocardial infarction couple of years ago. They had been	Ans 2 CMDT page 218 ed 2003
staying alone for almost a decade with infrequent visits from her son and grandchildren. About a week after the death she heard	
his voice clearly talking to her as he would in a routine manner	169 Which one of the following imaging modalities is most
from the next room. She went to check but saw nothing.	sensitive for evaluation of extra- adrenal phaeochromocytoma.
Subsequently she often heard his voice conversing with her and	1. Ultrasound 2. CT
she would also discuss her daily matters with him. This	3. MRI
however, provoked anxiety and sadness of mood where she was preoccupied with his thought. She should be treated with:	4. MIBG scan
1. Clomipramine.	Ans 4
2. Alprazolam.	
3. Electroconvulsive therapy.	170 On 3 phase 99mTc-MDP bone scan, which of the following bone lesions will show least osteoblastic activity.
4. Haloperidol.	1. Paget's disease
Ans 4	2. osteoid Osteoma
165 Yawning is a common feature of	3. Fibruous Displasia
1. Alcohol withdrawal	4. Fibrous cortical defect
2. Cocaine withdrawal	Ans 4
3. Cannabis withdrawal	171. Use of tamoxifen in carcinoma of breast patients does not
4. Opioid withdrawal Ans 2	lead to the following side effects.
	1. Thromboembolic events
166 The differential diagnosis of retinoblastoma would include	2. Endometrial Carcinoma
all except.	3. Cataract
1. Persistent hyperplastic primary vitreous	4. Cancer in opposite breast Ans 4
2. Coat's disease.	
3 Retinal astro cytoma4. Retinal detachment	172 For the treatment of deep seated tumors, the following rays
Ans 4 [ref CPDT page 813 ed 15th] . "leucoria is the most	are used.
common sign(60%) in retinoblastoma, D/d of leucoria includes	1. X- rays and Gamma- rays
Toxocara canis granuloma, astrocytic hamartoma, retinopathy of	 Alpha rays and Beta -rays Electrons and positrons

4. High power laser beams Ans 1 (4??)	cranial neuropathy.
173 Stereotactic Radio-surgery is a form of:	References
1. Radiotherapy	Evans RW. Headaches during childhood and adolescence. In:
2. Radioiodine therapy	Evans RW, Mathew NT, eds. Handbook of Headache.
3. Robotic surgery	Philadelphia: Lippincott, Williams, and Wilkins; 2000:chap 7.
4. Cryo Surgery	Lee AG, Brazis P. Ophthalmoplegic migraine. In: Gilman S, ed.
Ans 1 This is focused high dose radiation to destroy tumors less	Medlink. Neurobase. San Diego: Arbor Publishing; 2000.
than 3 cm.	Troost BT, Zagami AS. Ophthalmoplegic migraine and retinal
	migraine. In: Olesen J, Tfelt-Hansen P, Welch KMA, eds. The
174 Which of the following is not an oncological emergency	Headaches. 2nd ed. Philadelphia: Lippincott, Williams, and
 Spinal cord compression. Superior venacaval syndrome 	Wilkins; 2000:chap 64. Medscape: Randolph Warren Evans, MD, 11/30/2000
3. Tumorlysis syndrome	Ref CMDT 2003 Pg 947, HPIM 15th Page 76
4. Carcinoma cervix stage- III"B" with Pyometra.	Kei embi 2003 i g 947, ili ini isui i age 70
Ans 4	Answer is 3 as choice one specifically mentions complete
	paralysis that is usually but not always not the case & choice 3
175 The level of alpha fetoprotein is raised in all of the	is absolutely correct.
following except.	
1. Cirrohosis of liver.	Other Migraine questions:
2. Hepatocellur carcinoma	In CLASSIC migraine Throbbing headache is
3. Yolksac tumor	CONTRALATERAL to visual display. (Contrast to
4. Dysgerminoma	Ophthalmoplegic migraine) SCOTOMA called as "fortification spectra" ^Q begins as a small
Ans 3	Para central scotoma - expands in a C shape manner. It has
176 Aniseikonia means:	scintillating lights around it in a serrated (fortification) form. It
1. Difference in the axial length of the eyeballs.	expands and disappears out of visual field in 20-25 minutes.
2. Difference in the size of corneas	Carotidynia ^Q is lower jaw/ Facial migraine like headache.
3. Difference in the size of pupils	(Older age group, with carotid pulsations)
4. Difference in the size of images formed by the two eyes.	Bikersaff''s Migraine: Basilar migraine in young adolescent
Ans 4	females with blindness.
	Rizatriptanq is the fastest acting Triptan.
177. Ophthalmoplegic migraine means:	Aspirin, NSAIDS, isomethepteneq used to abort mild migraine.
1. When headache is followed by complete paralysis of the IIIrd and VI nerve on the same side as the hemicrania.	BIOFEEDBACK ^q therapy is useful in helping patients deal with stress.
2. When the headache is followed by partial paralysis of the	Triggering factors include Chocolate, alcohol, Food additives,
IIIrd nerve on the same side as the hemicrania with out any	Bright light, menstrual cycle (around menstruation), anxiety,
scotoma.	stress, exercise, OCPs.
3. Headache associated with IIIrd, IVth and VIth nerve	
paralysis.	178 Surface ectoderm gives rise to all of the following
4. Headache associated with optic neuritis	structures except.
	1. Lens
Ans 3. In Ophthalmoplegic Migraine headache occurs in	2. Corneal epithelium
conjunction with diplopia. As the intensity of an ipsilateral severe headache subsides after a day or more, paresis of 1 or	 Conjunctival epithelium Anterior layers of iris.
more of cranial nerves III, IV, and VI occurs. The third cranial	Ans 4 Lens is formed by surface ectoderm. Cornea epithelium is
nerve is affected in about 80% of cases, initially with ptosis and	formed by surface ectoderm rest of layers are formed by
then oculomotor paresis, which is usually complete but may be	mesothelium (these are endothelium, descemet's membrane,
partialq. This is usually transient; but may outlast pain for a few	stroma, bowman's layer. Iris is formed by neuroectoderm -
weeks. Other symptoms are vomiting, nausea. CMDT also says	epithelial layers. Blood vessels of iris derived from mesoderm.
that ophthalmic division of V CN may be affected.	Other questions: Retina, Pineal Gland, Neurohypophysis, CNS
MYDRIASIS may occur in 50% cases.	neurons, preganglionic neurons derived from Neuroectoderm.
Important about Onbthalmonlagia Migraines In ADIII TO : 5:4	Dilator and sphincter pupillae muscles, ciliary muscle, carotid body, most bones of face, skull except occipital bone, bones of
Important about Ophthalmoplegic Migraine: In ADULTS if it occurs always consider the possibility of aneurysms.(these are	middle ear, pia and arachnoid layer, schwann cells,
very rare in childhood). Exclude Other D/D by imaging	parafollicular cells, postganglionic neurons and odontoblasts
including	derived from NEURAL CREST.
Tolosa-Hunt syndrome q (granulomatous inflammation in the	Extraocular muscles, skeletal muscles of head-neck-trunk,
cavernous sinus), orbital pseudotumor (an idiopathic infiltration	muscles of tongue, vertebrae ribs occipital bone and dura matter
of orbital structures with chronic inflammatory cells), Diabetic	are derived from PARAXIAL MESODERM

179 Enucleation of the eyeball is contraindicated in1 Endophthalmitis	lymphomatosum. Occurs more in males, age ~ 60 yrs, Diagnosis possible without biopsy by 99Tc pertechnate scan. T/t is superficial parotidectomy.
 Panophthalmitis Intraocular tumour Painful blind eye Ans 2 	186 A newborn baby had normal APGAR score at birth and developed excessive frothing and choking on attempted feeds.The investigation of choice is:1. Esophagoscopy2. Bronchoscopy
Indications for enucleation are -ABSOLUTE -Retinoblastoma and malignant melanoma. Relative are Painful blind eye following glaucoma, Endophthalmitis, mutilating ocular injuries, anterior staphyloma and pthysis bulbi ^q Indications for evisceration are Panophthalmitis, expulsive	 3. MRI chest 4. X-ray chest and abdomen with the red rubber catheter passed per orally into esophagus Ans 4 A I P P G AIIMS Answers
choroidal hemorrhage and bleeding anterior staphyloma. In Panophthalmitis we prefer evisceration to prevent infection reaching meninges.	187. A new born baby has been referred to the casualty as a case of congenital diaphragmatic hernia. The first clinical intervention is to:
180. The treatment of congenital glaucoma is1. Essentially topical medications2. Trabeculoplasty3. Trabeculotomy with trabeculectomy4. Cyclocryotherapy.Ans 3	 Insert a central venous pressure line. Bag and mask ventilation Insert a nasogastric tube. Ventilate with high frequency ventilator Ans 3
181. Hypochloremia hypokalemia and alkalosis are seen in:1. Congenital hypertrophic pyloric stenosis2. Hirschsprung's disease.3. Esophageal atresia4. Jejunal atresiaAns 1	 188 One year old male child is presented with poor urinary stream since birth. The investigation of choice for evaluation is: 1. Voiding cystourethrography (VCUG) 2. USG bladder 3. Intravenous urography 4. Uroflowmetry Ans 1
182 There is a high risk of renal dysplasia in1. Posterior urethral valves.2. Bladder extrophy	189. Which of the following statements about peptic ulcer disease is true.
3. Anorectal maloformation4. Neonatal sepsisAns 1 (ref Schwartz surgery.)	 Helicobacter pylori eradication increases the likelihood of occurrence of complications. The incidence of complications has remained unchanged. The incidence of Helicobacter pylori re-infection in India is
183. Cells from the neural crest are involved in all except.1. Hirschsprung's disease2. Neuroblastoma3. Primitive neuroectodermal tumour	very low. 4. Helicobacter pylori eradication does not alter the recurrence ratio. Ans ?
4. Wilm's tumour Ans 4	<u>Click here to contribute to aippg.com (A new window will open)</u> 190. Which of the following is not a contraindication for extra
184 A 'Malignant pustule' is a term used for1. An infected malignant melanoma2. A carbuncle3. A rapidly spreading rodent ulcer.4. Anthrax of skin	 corporeal Shockwave Lithotripsy (ESWL) for renal calculi? 1. Uncorrected bleeding diathesis 2. Pregnancy 3. Ureteric stricture 4. Stone in a calyceal diverticulum.
Ans 4 [neeharika, Aurangabad] <u>Click here to contribute to aippg.com (A new window will</u> <u>open)</u>	Ans 4 191. Which of the following is not an appropriate investigation
 185 A warthin's tumour is: 1. An adenolymphoma of parotid gland 2. A pleomorphic adenoma of the parotid 3. A carcinoma of the parotid. 4. A carcinoma of submandibular salivary gland 	for anterior urethral stricture? 1. Magnetic Resonance Imaging 2. Retrograde urethrogram 3. Micturating cystourethrogram 4. High frequency ultrasound Ans 1
Ans 1 Warthin's tumour is also known as papillary cystadenoma	192. The recommended treatment for preputial adhesions

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producing ballooning of prepuce during micturition in a 2-year-	Hollow Organs, Lungs are most affected. Liver is spared due to
old boy is: -	its homogenosity.[Saurabh Tripathi, TN Medical College
1. Wait and watch policy	,Mumbai; Dipak Gupta, BPKIHS, Nepal]
2. Circumcision	
3. Dorsal slit	198 Regarding testicular tumour, the following are false except.
4. Preputial adhesions release and dilatation	
Ans 3	1. They are commonest malignancy in older man
193 All are correct about potassium balance except.	2. Seminomas are radiosensitive
1. Most of potassium is intracellular	3. Only 25% of Stage 1 teratomas are cured by surgery alone.
2. Three quarter of the total body potassium is found in skeletal	4. Chemotherapy rarely produces a cure in those with Metastatic
muscle.	disease.
3. Intracellular potassium is released into extra- cellular space in	Ans 3 Seminomas are radioSensitive, Slowly growing. [SSS]
response to severe injury or surgical stress.	
4. Acidosis leads to movement of potassium from extracellular	199 A young patient presents with history of dysphagia more to
to intracellular fluid compartment.	liquid than solids. The first investigation you will do is:
Ans 4	
	1. Barium Swallow
194. Hypocalcaemia characterized by all except.	2. Esophagoscopy
1. Numbness and tingling of circumoral region.	3. Ultrasound of the chest
2. Hyperactive tendon reflexes and positive Chvostek's sign.	4. C.T. Scan of the chest
3. Shortening of Q-T interval in ECG.	Ans 1
4. Carpopedal spasm	
Ans 3	200. A 45 years old hypertensive male presented with sudden
	onset severe headache, vomiting and neck stiffness. On
195 Which of the following not true of gas gangrene.	examination he didn't have any focal neurological deficit. His
1. It is caused by clostridium perfringens	CT scan showed blood in the Sylvain fissure. The probable
2. Clostridium Perfringens is a gram-negative spore-bearing	diagnosis is:
bacillus.	
3. Gas gangrene is characterized by severe local pain crepitus	1. Meningitis
and signs of toxemia.	2. Ruptured aneurysm
4. High dose penicillin and aggressive debridement of affected	3. Hypertensive bleed.
tissue is the treatment of established infection.	4. Stroke
Ans 2 they are gram +ve	Ans 2?3?
	Click here to contribute to aippg.com (A new window will
196. "Sleep apnea", is defined as a temporary pause in breathing	<u>open)</u>
during sleep lasting at least.	
1. 40 seconds	Answers and explanations are copyright ©2003
2. 30 seconds	AIPPG.com
3. 20 seconds	ALL Rights Reserved Worldwide
4. 10 seconds	PLAB INFORMATION HOME PAGE AIIMS Papers
Ans 4 HPIM 15th page 1520. Sleep apnea is of two types	Comprehensive plab information at <u>www.aippg.com/plab</u> -
Obstructive & central. Nocturnal Polysomnography used to	uk
diagnose & distinguish between Obstructive & central apnea.	Unified PG download at <u>www.aippg.com/pg</u>
(Monitoring of multiple physiological factors during sleep.)	Omneu r O download at <u>www.aippg.com/pg</u>
Current pediatric diagnosis and treatment page 30, 15th Ed	
mentions apnea as "any cessation of respiration longer than 20	AIPPG is a no profit organization commited to the
sec, or any cessation of respiration with the appearance of cyanosis." Also appea in neonate most common cause in	cause of PG aspirants. We are commited to provide
	you with the best material WITHOUT profit.
prematurity. If question comes of apnea of prematurity it is better mark 20 sec otherwise "HARRISON IS ALWAYS	
RIGHT"	You may contribute to AIPPG by emailing at
Hypopnoea is defined as decrease in respiration with drop in	<u>CONTRIBUTE@aippg.com</u> . Your suggestion, comments,
oxygenated hemoglobin levels by at least 4 %.	contributions will be surely acknowledged in full.
oxysenated hemogroun levels by at least + /0.	
197. In a blast injury, which of the following organ is least	Sincerely
vulnerable to the blast wave.	AIPPG
1. G.I. tract	
2. Lungs	
3. Liver	Forums ay <u>www.aippg.net/forum</u> [the most visited
4. Ear drum	forums]
Ans (3) Ref Bailey & Love . Exp: In Blast injury - Eardrum,	