

CBME**Dr NTR UNIVERSITY OF HEALTH SCIENCES : VIJAYAWADA - 8****MBBS DEGREE EXAMINATION - JANUARY, 2025****SECOND M.B.B.S. EXAMINATION****PATHOLOGY- PAPER-II (SET-C)****(Multiple Choice Questions)****Time: 20 Minutes****Max Marks: 20****Note: Answer all questions.**

SECTION-I (MCQs - 20 MARKS)**1X2=20**

- 1) Malignant neoplasm of skin which does not metastasize to lymph nodes
 - a. Squamous cell carcinoma
 - b. Melanoma
 - c. Basal cell carcinoma
 - d. All of the above
- 2) Acute Plaque Change includes
 - a. Ulceration of atheroma
 - b. Fatty dot
 - c. Fatty streak
 - d. Fibrous plaque
- 3) Alcoholic liver disease includes
 - a. Hepatic steatosis
 - b. Steatohepatitis

- c. Laennec cirrhosis
 - d. All of the above
- 4) Multiple endocrine neoplasia (MEN syndrome) type I includes all except
- a. Primary hyperparathyroidism
 - b. Insulinomas
 - c. Prolactinoma
 - d. Pheochromocytomas
- 5) Diabetic Macrovascular Disease is
- a. Gangrene of lower extremities
 - b. Diabetic nephropathy
 - c. Diabetic retinopathy
 - d. None of them
- 6) Which of the following is not complication of Myocardial infarction _____
- a. Myocardial rupture
 - b. Arrhythmias
 - c. Rheumatic heart disease
 - d. Ventricular aneurysm
- 7) Distinctive lesions in the heart—called Aschoff bodies—are composed of foci of T lymphocytes, occasional plasma cells, and plump activated macrophages are seen in _____
- a. Congenital heart disease
 - b. Infective endocarditis
 - c. Left heart failure

d. Rheumatic heart disease

8) Complication of pneumonia include

a. Asthma

b. Empyema

c. Emphysema

d. Chronic bronchitis

9) Impaired mineralization of bone is seen in

a. Osteoporosis

b. Osteomalacia

c. Hyperparathyroidism

d. Paget's disease of bone

10) The current classification of cervical precursor lesions is _____

a. Dysplasia/carcinoma in situ

b. CIN I, CIN II, CIN III

c. LSL & HSL

d. None of the above

11) Apical plebs or bullae are characteristic of

a. Emphysema

b. Consolidation

c. Asthma

d. Chronic Bronchitis

12) Type 2 Diabetes may develop hyperosmolar hyperglycemic state due to—

- a. Increase in free fatty acids
- b. Hyperinsulinemia
- c. Excess of ketone bodies
- d. Severe dehydration resulting from sustained osmotic diuresis

13) Noninflammatory collections of serous fluid within the pleural cavities are called—

- a. Pneumothorax
- b. Hemothorax
- c. Pyothorax
- d. Hydrothorax

14) Vegetations on heart valves are the classic hallmark of _____

- a. Infective endocarditis
- b. Rheumatic heart disease
- c. Myocardial infarction
- d. Congenital heart disease

15) The hallmark of diabetic macrovascular disease is _____

- a. Thick basement membrane
- b. Ketoacidosis
- c. Accelerated atherosclerosis
- d. None of the above

16) Most common cause of nephrotic syndrome

- a. Minimal change disease

- b. Crescentic glomerulonephritis
- c. Diffuse endocapillary proliferative glomerulonephritis
- d. Mesangial proliferative glomerulonephritis

17) Kimmelstiel-Wilson disease is _____

- a. Diffuse Mesangial Sclerosis
- b. Pyelonephritis
- c. Modular Glomerulosclerosis
- d. Capillary Basement Membrane Thickening

18) All are consequences of portal hypertension except

- a. Ascites
- b. Congestive splenomegaly
- c. Testicular atrophy
- d. Gastroesophageal varices

19) The classic adenoma-carcinoma sequence accounts for up to 80% of sporadic cancers and typically includes mutation of _____ gene early in the neoplastic process

- a. APC gene
- b. Mismatch repair
- c. K-RAS
- d. TP53

20) The thyroid follicular cells with abundant eosinophilic, granular cytoplasm, which represent a metaplastic response of the normally low cuboidal follicular epithelium to chronic injury in Hashimoto's thyroiditis are called—

- a. Tall columnar cells
- b. Microfollicular cells
- c. Macrofollicular cells
- d. Hurthle cells

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