

Total No. = 03 pages**Q.P. Code: MBN402****M.B.B.S. Final Prof. Part-II**

(New Scheme w.e.f. 2019 admission onwards)

BF/2024/03

Medicine-B

M.M. : 100

Time : 3 Hours(First 30 Min. for MCQs)

- Note: 1. **Use OMR Sheet to answer Multiple Choice Questions(MCQs).**
2. Attempt all questions. Illustrate your answers with suitable diagrams
3. **NO SUPPLEMENTARY SHEET SHALL BE ALLOWED/PROVIDED**
4. **The student must write Q.P. Code in the space provided on OMR Sheet and the Title page of the Answer Book.**

Q.1 MCQs (Attempt on OMR sheet)

[1x20]

1. Vidhya, 21 year married female was brought to ER with abnormal posturing of limbs and persistent deviation of neck to one side. She had a family dispute with her in-laws two days back and was prescribed tablet haloperidol from psychiatric OPD yesterday. Which is the most likely cause of her condition?
 - a. Conversion reaction
 - b. Drug induced dystonia
 - c. Acute psychosis
 - d. Acute cerebro vascular accident
2. An 8 years old boy has presented with sudden onset periorbital oedema, which has progressed to edema across his entire body. He has been lethargic with a poor appetite and states that his urine has looked a bit 'frothy'. On examination he has leukonychia. What is the most appropriate initial investigation for this presentation?
 - a. Renal ultrasound
 - b. Urine dipstick test
 - c. Renal biopsy
 - d. Fasting glucose
3. A person quarrels and hits his neighbor. He feels that his neighbor controls him with radio waves. Next day he feels that police is following him and may arrest him. The diagnosis is:
 - a. Schizophrenia
 - b. Delusion of persecution
 - c. Thought insertion
 - d. Conversion reaction
4. A 19 year old female develops multiple large flaccid bullous lesions in skin with oral erosions. The histopathology shows intraepidermal acantholysis. The likely diagnosis is:
 - a. Pemphigoid
 - b. Erythema multiforme
 - c. Dermatitis herpetiformis
 - d. Pemphigus vulgaris
5. A 26 year old male presents with severe itching and white scaly lesions in the groins for past one month. The most likely causative organism is:
 - a. Trichophyton rubrum
 - b. Candida albicans
 - c. Malassezia furfur
 - d. Candida glabrata
6. A 30 years sexually active male has a large, spreading exuberant ulcer on glans penis. There is bright red granulation tissue in the ulcer but no regional lymphadenopathy. The likely causative organism is:
 - a. T. pallidum
 - b. N. gonorrhoea
 - c. H. ducreyi
 - d. K. granulomatosis
7. In patient with certain cardiac lesions, antimicrobial prophylaxis is routinely indicated before dental procedures. Among the following which cardiac condition warrant antimicrobial prophylaxis:
 - a. Pacemaker in situ
 - b. Mitral valve prolapse
 - c. Hypertrophic cardiomyopathy
 - d. Unrepaired cyanotic congenital heart disease

8. A 30 years old man has presented with recent history of increased alcohol consumption, increased sexual indulgence, irritability, decreased need for sleep, not feeling fatigued even on prolonged periods of over activity since 3 weeks. Most likely diagnosis is
- Alcohol dependence
 - schizophrenia
 - mania
 - impulse control disorder
9. A person is reported missing from home. Few days later he was found in a market well dressed and appears to window shopping but has some degree of amnesia. The most probable diagnosis is:
- Delirium
 - Dissociative amnesia
 - Dissociative fugue
 - Dissociative identity disorder
10. An elderly patient who was treated with amitriptyline for depressive episode presents to the emergency with urinary retention, constipation and blurring of vision. The likely cause for the problem is
- Anticholinergic side effects
 - Onset of depressive stupor
 - Prostate enlargement
 - Dementia
11. Trismus with board like rigidity of the abdomen is a characteristic feature of-
- Botulism
 - Porphyria
 - Tetanus
 - Peritonitis
12. A 14 years boy exclusively fed on maize, comes to OPD with history of skin rash, diarrhea, nausea and neurological symptoms like confusion, amnesia and delusions. What could be the cause of these symptoms?
- Acute HIV syndrome
 - Niacin deficiency
 - Thiamine deficiency
 - Vitamin C deficiency
13. A 43 year truck driver presents with history of weight loss and fever for past 3 months. He has past history of several episodes of various genital infections. Examination reveals generalized lymphadenopathy and oral candidiasis. The next advisable test is:
- TPHA test
 - HIV antibody
 - LN biopsy
 - HBsAg
14. A farmer presents with fever of 7 days duration, petechial rash and jaundice for 1 day. At presentation, he was found to have acute kidney injury also. The likely infective agent is-
- Leptospirosis
 - Brucella
 - Yersinia
 - Babesia
15. A patient presents with history of intermittent fever, abdominal pain and headache. Abdominal examination shows tenderness and hepatosplenomegaly. His blood culture is positive for salmonella typhi. The antibiotic of choice for this patient is:
- Ciprofloxacin
 - Gentamycin
 - Metronidazole
 - Vancomycin
16. The crown of a very carious tooth suddenly fracture while the patient is standing eating in a marriage function and a fragment is inhaled. It is more likely to enter the
- Right lung because the right main bronchus is wider and more vertical
 - Left lung because the left main bronchus is wider and more vertical
 - Any lung because the two main bronchi are of equal size and at the same angulation
 - Any lung because it mainly depends on gravity
17. In a patient with history of muscle cramps and carpedalspasm. Which of the following serum electrolyte level is most likely to be low:
- Calcium
 - Chloride
 - Potassium
 - Sodium

18. A pleural aspirate of high protein content, 250 cells predominant lymphocytes and low glucose contents is most likely due to?
- Acute pancreatitis
 - Tuberculosis
 - Para pneumonic effusion
 - Malignant lymphoma
19. A patient has been diagnosed with extensively drug resistant tuberculosis (XDR-TB). Which of the following drug class will be useful in this patient?
- Rifampicin
 - Amikacin
 - Moxifloxacin
 - Linezolid
20. Reduced FEV1/FVC ratio with normal FVC is suggestive of
- Obstructive lung disease
 - Restrictive lung disease
 - Mixed pattern
 - Normal pattern
- Q2. A 22 years old male presented to emergency with history of acute onset breathlessness and dry cough for last 3 hours. He gives a history of visit to a nearby bird zoo. He is dysgenic with inability to speak in sentence. Examination reveals normal pulse and blood pressure. The accessory muscles of respiration were working. His chest was rather silent. His ABG revealed PaO₂ of 48 mm Hg, PaCO₂ of 34 mm Hg and pH of 7.34. What is the diagnosis? How would you investigate and treat this patient. [2+5+5]
[5x4]
- Q.3. **Write short notes on:-**
- Discuss the medico-legal issues pertaining to organ donation in India.
 - Explain the etiopathogenesis of acute tubular necrosis.
 - Describe alcohol related psychosis.
 - Describe HIV Post exposure prophylaxis.
- Q.4. **Explain why?** [3x5]
- Anemia occurs in chronic kidney disease.
 - Sputum examination is a key of diagnosis in many infectious and non infectious disorders of respiratory system.
 - Hypoglycemia occurs in patient with falciparum malaria
 - Delusions and hallucinations are seen in schizophrenia.
 - Anti-microbial resistance can be transmitted in bacteria.
- Q.5. **Write short answer (applied aspect):** [6x3]
- Describe diagnostic approach to a patient with proteinuria.
 - Explain syndromic approach to treatment of sexually transmitted infections.
 - Describe the etiology, types, clinical features and treatment of Beri Beri.
- Q.6. **Write short answer:-** [5x3]
- Describe the clinical features and treatment of allergic broncho-pulmonary aspergillosis.
 - Define chronic kidney disease and state its clinical staging.
 - Describe Lepra reactions and discuss their treatment.
