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THIRD PROFESSIONAL M.B.B.S. DEGREE EXAMINATION, JUNE 2006

Part II

GENERAL MEDICINE-Paper II

(New Scheme)

Time: Three Hours

Maximum: 60 Marks

Answer Sections A and B in separate answer-books.

Draw diagrams wherever necessary.

Question I should be answered first in the response sheet provided.

Section A

I. Multiple Choice Questions.

Single Response Type - 20 (Separate sheet attached).

 $(20 \times \frac{1}{2} = 10 \text{ marks})$

II. Match the following.

Type - 6 (Separate sheet attached).

 $(6 \times \frac{1}{2} = 3 \text{ marks})$

III. Draw and label:

- 1 A diagrammatic representation of a Typical Peripheral Blood Smear of a patient with Chronic Myeloid Leukemia.
- 2 A Hydatid Cyst.

 $(2 \times 1 = 2 \text{ marks})$

IV. Write briefly on :

- 1 Control of spread of Cholera in the community.
- 2 Management of Acute Pulmonary Oedema.
- 3 Complications of Lobar Pneumonia.
- 4 Diagnosis of Typhus Fever.
- 5 Charcot's Joint.

 $(5 \times 1 = 5 \text{ marks})$

V. Write short notes on :

- Rheumatoid Factor.
- 2 Phobia.
- 3 Psoriatic Arthropathy.
- 4 Spread of Japanese Encephalitis.
- 5 Prophylaxis Against Hepatitis B.

 $(5 \times 2 = 10 \text{ marks})$

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Section B

VI. Read this Paragraph and answer the following questions

A 40 year old male is admitted with headache, vomiting, tinnitus and ataxia of right side. Clinical examination showed Nerve Deafness, LMN Facial Palsy and Cerebellar Signs on the Right side only. Ophthalmoscopy showed bilateral early papilloedema:

- 1 What is the most likely diagnosis?
- 2 Mention two points to be specifically looked for during general examination of this patient.
- 3 List four Investigations which vill help in confirming the diagnosis here.
- 4 List four points to differential between LMN and UMN Facial Palsy.
- 5 List four causes for Bilateral LMN Facial Palsy.

 $(5 \times 2 = 10 \text{ marks})$

VII. Write briefly on :

- 1 Newer Sulphonyl Ureas.
- 3 Ehrlich's test.
- 5 Dissociated Sensory Loss.
- 7 Polymerase chain reaction.
- 9 Betalactamase.

- 2 Nerve Biopsy.
- 4 Hysteria.
- 6 Methylprednisolone.
- 8 Intra Articular Injection Therapy.
- 10 Chemprophylaxis in malaria.

 $(10 \times 1 = 10 \text{ marks})$

VIII. Write short notes on :

- Abdominal Reflex.
- 3 Diagnosis of Osteoporosis.
- 5 Electromyography.

- 2 Reactions in Leprosy.
- 4 Cardiac Pacemakers.

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Section A

I. MULTIPLE CHOICE QUESTIONS

e.—(1)) Do	not write anything on the	questio	n paper.
(2)) Wr	ite your register number o	n the an	swer-sheet provided.
(3)			ver and	encircle the alphabet against each question in th
(4)			e total	number of your answers in the appropriate bo
(5)	Eac	ch question carries ¼ mari	k.	
ide and	d Mob	ile Splitting of Second He	art Sou	nd is a typical feature of :
(A)	Atrial	septal defect.	(B)	Persistent Ductus Arteriosus.
(C) 1	Right	bundle branch block.	(D)	Left bundle branch block.
pressi	on of	the ST segment in the EC	G is a t	ypical feature of :
(A)	Acute	Myocardial Infarction.	(B)	Pericarditis.
(C) 1	Ventr	icular Aneurysm.	(D)	Digitalis Toxicity.
fective	Endo	carditis is last commonly	associa	ted with
(A) I	Mitra	stenosis.	(B)	Mitral regurgitation.
(C)	Aortic	stenosis.	(D)	Aortic regurgitation.
	(2) (3) (4) (5) ide and (A) (C) 1 (Pressi (A) (C) 1 (C) 1 (Ective (A) 1	(2) Wr. (3) Sel ans (4) In pro (5) Eac ide and Mob (A) Atrial (C) Right pression of (A) Acute (C) Ventre fective Endo (A) Mitral	 (2) Write your register number of answer-sheet the appropriate answer-sheet provided. (3) Select the appropriate answer-sheet provided. (4) In the answer-sheet enter the provided. (5) Each question carries ½ markide and Mobile Splitting of Second He (A) Atrial septal defect. (C) Right bundle branch block. (Pression of the ST segment in the EC (A) Acute Myocardial Infarction. (C) Ventricular Aneurysm. (Ective Endocarditis is last commonly (A) Mitral stenosis. 	(2) Write your register number on the an answer sheet the appropriate answer and answer-sheet provided. (4) In the answer-sheet enter the total provided. (5) Each question carries ½ mark. ide and Mobile Splitting of Second Heart Sou (A) Atrial septal defect. (B) (C) Right bundle branch block. (D) spression of the ST segment in the ECG is a total (A) Acute Myocardial Infarction. (B) (C) Ventricular Aneurysm. (D) fective Endocarditis is last commonly associa (A) Mitral stenosis. (B)

- 4. Autoimmune Hemolytic Anemia is characterized by the following except :
 - (A) Positive Coomb's test. (B) Indirect positive Vanden Bergh's reaction.
 - (C) Increased Urobilinogen in urine. (D) Bile pigment in urine.
- 5. The Gene for Factor VIII is located on :
 - (A) Chromosome No. 14. (B) Chromosome No. 8.
 - (C) X chromosome. (D) Y-chromosome.
- "Palpable Purpura" is a characteristic feature of :
 - (A) Idiopathic thrombocytopenic purpura.
 - (B) Henoch schonlein purpura.
 - (C) Acute leukemia.
 - (D) Senile purpura.
- The principal site of absorption of vitamin B₁₂ is:
 - (A) Duodenum. (B) Jejunum.
 - (C) Ileum. (D) Colon.





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8.	. 1	Macrocytes in the peripheral blood smear is a recognized association of the following except :					
		(A)	Myxoedema.	(B)	Vitamin B ₁₂ deficiency.		
		(C)	Folic Acid deficiency.	(D)	Hydatid disease.		
. 9). 1	Hemorrhagic pleural effusion is a recognized feature of the following except :					
		(A)	Bronchogenic carcinoma.	(B)	Meig's syndrome.		
		(C)	Tuberculosis.	(D)	Pulmonary infarction.		
10)	All of the following are recognized paraneoplastic features of bronchogenic carcinoma except :					
		(A)	Hypercalcemia.	(B)	Migratory thrombophlebitis.		
		(C)	Cushing's syndrome.	(D)	Myasthenic syndrome.		
1	1.	Dysphasia mainly for solids is typically seen in the following conditions except:					
		(A)	Achalasia cardia.	(B)	Stricture of esophagus.		
		(C)	Carcinoma of esophagus.	(D)	Esophageal web.		
15	2.	Curling's ulcer is associated with :					
		(A)	Stress.	(B)	Burns.		
		(C)	Aspirin.	(D)	Helicobacter pylori.		
1	3.	A Patient with proven Celiac disease should avoid :					
		(A)	Rice.	(B)	Wheat.		
		(C)	Ragi.	(D)	Maize.		
1	4.	Toxin Mediated Diarrhea without bacteremia or tissue invasion is characteristic of :					
		(A)	Salmonella.	(B)			
		(C)	Cholera.	(D)	Ecoli.		
1	5.	Hemorrhagic ascitis could be due to the following causes except:					
		(A)	Malignancy.	(B)			
		(C)	Pancreatitis.	(D)	Meig's syndrome.		
1	6.	Which	of the following anti-bacterial ha	s been	recognized as hepatotoxic?		
		(A)		(B)	To all a controlled		



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17. "Pretibial Myxoedema" is a recognized feature of

(A) Cretinism.

(B) Myxoedema.

(C) Grave's disease.

(D) Hashimoto's Thyroiditis.

18. All of the following are recognized features of primary hyperaldosteronism except:

(A) Hypertension.

(B) Oedema.

(C) Hypokalemia.

(D) Polyurea.

19. "Characteristic Wasting of Sternomastoids" is classically described with:

(A) Limb Girdle Type of Muscular Dystrophy.

(B) Facio scapulo humeral muscular dystrophy.

(C) Dystrophia myotonica.

(D) Duchenne muscular dystrophy.

20. Hoarse voice dysphonia is a feature of :

(A) Palatal paralysis.

(B) Perforation of palate.

(C) Congenital cleft palate.

(D) Recurrent laryngeal nerve lesion.

 $(20 \times 14 = 10 \text{ markel})$





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- II. Match the following :-
 - 1 Thalamic lesion
 - 2 Stereotaxic surgery
 - 3 Malignant hyperthermia
 - 4 Chyluria
 - 5 Hallucinations
 - 6 Charcot's joint

- (a) Anti-Neutrophil Cytoplasmic Antibodies (ANCA)
- (b) Delirium tremens.
- (c) Delirium tremens.
- (d) Syringomyelia.
- (e) Parkinsonism.
- (f) Filariasis
- (g) Disseminated malignancy.
- (h) Halothane.
- (i) Hyperpathia

(Ex 1/2 = 3 merge)

