Q.P. Code: 321001 **Reg. no.: .....**

Third Professional MBBS Part II Degree Supplementary Examinations
October 2025
General Medicine I
(2019 Scheme)

Time: 3 Hours **Total Marks: 100**

- ***Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers***
- ***Indicate the question number correctly for the answer in the margin space***
- ***Answer all parts of a single question together • Leave sufficient space between answers***
- ***Draw table/diagrams/flow charts wherever necessary***

1. Multiple Choice Questions **(20x1=20)**

The **MCQ** questions **(Q.No. i to Q.No. xx)** shall be answered **only in the OMR sheet provided at page No. 51** of the answer book (the inner portion of the back cover page (PART III)). Responses for MCQs marked in any other part/page of the answer book will not be valued. **For marking the correct responses use X mark only**

Question numbers i-v case scenario-based questions

A 45 year old woman presents with symptoms of unexplained weight loss, increased appetite and persistent diarrhea. She also reports feeling unusually hot and sweating excessively. On physical examination, she has diffuse goiter, thyroid eye disease and tremor in hands. Laboratory tests reveal serum TSH < 0.01 Mu/L (low); free T_4 2.5mg / dl (elevated); free T_3 6.0 pg/ml (elevated)

i. What is the most likely diagnosis for this patient based on her clinical presentation and laboratory findings.
a) Hypothyroidism b) Grave's disease c) Hashimoto's thyroiditis d) Thyroid carcinoma

ii. What is the most likely thyroid uptake pattern in this patient
a) Focal uptake c) Homogeneous diffuse thyroid uptake
b) Heterogeneous diffuse uptake in the thyroid d) Decreased uptake

iii. Dermatological manifestation of this disease include
a) Erythema multiforme c) Erythema nodosum
b) Pretibial myxedema d) Acanthosis nigricans

iv. Which factor is strongly associated with the development of 'thyroid eye disease'
a) Smoking c) Uncontrolled blood sugar
b) Alcohol abuse d) Vitamin B_{12} deficiency

v. What will be the treatment of choice if the patient is eight weeks pregnant
a) Carbimazole b) Methimazole c) Propyl thiouracil d) Radio iodine

Question numbers vi-x consist of two statements - Assertion (A) and Reason (R). Answer these questions by selecting the appropriate options given below.

a) Both A and R are true, R is the correct explanation of A **c) A is true but R is false**
b) Both A and R are true, R is not the correct explanation of A **d) A is false but R is true**

vi. **Assertion:** Patient with chronic heart failure benefit from the use of angiotensin receptor blocker (ARB)
Reason: Angiotensin receptor blockers, compared to angiotensin converting enzyme inhibitors are better tolerated and have similar efficacy in reducing cardiovascular events.

vii. **Assertion:** Thiazolidinediones activate peroxisome proliferator activated receptor- **γ** and enhance the actions of endogenous insulin
Reason: Pioglitazone should be given in combination with insulin in cardiac failure as it is decreases the insulin resistance

viii. **Assertion:** Hypoglycemia does not occur in well controlled insulin-treated diabetics during exercise.
Reason: Learning to recognize the early onset of hypoglycemia is an important aspect of the diabetic patient's education.

ix. **Assertion:** H. pylori and $NSAID_S$ are independent risk factors for peptic ulcer disease.
Reason: Compared to ulcer healing lungs, H. pylori eradication therapy is superior for healing duodenal ulcer.

x. **Assertion:** Acute fatty liver of pregnancy is more common in multiparous women.
Reason: Acute fatty liver is characteristic of a defect in beta oxidation of fatty acid in the mitochondria.

Question numbers xi-xv are multiple-response type questions. Read the statements & mark the answers appropriately.

xi. Which of the following are the most likely cause of non megaloblastic macrocytic anaemia (select two)
1) Hypothyroidism 2) Alcohol abuse 3) Thiamine deficiency 4) Vitamin B_{12} deficiency
a) 1 & 2 are correct b) 1 & 3 are correct c) 3 & 4 are correct d) 2 & 4 are correct

(PTO)

xii. 1) Generalized tonic colonic seizure - Levetiracetam
2) Absence seizure - Ethosuximide
3) Myoclonic seizure - Phenytoin
4) Secondary tonic colonic seizure - Acetazolamide
a) 1 & 2 are correct b) 1 & 3 are correct c) 3 & 4 are correct d) 2 & 4 are correct

xiii. 1) TICS - Tourette syndrome
2) Myoclonus - Parkinsonism
3) Chorea - Huntingtons disease
4) Essential tremor - Wilson's disease
a) 1 & 2 are correct b) 1 & 3 are correct c) 3 & 4 are correct d) 2 & 4 are correct

xiv. 1) Circumduction gait - Parkinson's disease
2) Waddling gait - Proximal muscle weakness
3) Ataxic gait - Upper motor neuron lesion
4) High-stepping gait - Lower motor neuron lesion
a) 1 & 2 are correct b) 1 & 3 are correct c) 3 & 4 are correct d) 2 & 4 are correct

xv. Which of the following are the cause of high anion gap acidosis (select two)
1) Diabetic ketoacidosis 2) Lactic acidosis 3) Diuretic use 4) Pneumonia
a) 1 & 2 are correct b) 1 & 3 are correct c) 3 & 4 are correct d) 2 & 4 are correct

Question numbers xvi-xx are single-response type questions

xvi. A 35 year old female is brought to the emergency room. She is suffering from schizophrenia and is on haloperidol. She presents with symptoms of fever, sweating, disorientation and rigidity for one day. Her blood pressure is high and on investigation CPK level is increased and there is leukocytosis. What is the likely diagnosis
a) Acute dystonia c) Viral encephalitis
b) Neuroleptic malignant syndrome d) Tardive dyskinesia

xvii. Which of the following medication can cause hyperprolactinemia
a) Propranolol b) Glucocorticoids c) Metoclopramide d) Levothyroxine

xviii. All the following drugs are used to treat hyperkalemia **EXCEPT**
a) Steroids b) Calcium gluconate c) Salbutamol d) Dextrose insulin infusion

xix. Carey Coombs murmur is seen in
a) Severe mitral stenosis c) Para aortic regurgitation
b) Acute rheumatic carditis d) Severe pulmonary hypertension

xx. A chronic alcoholic develops palpitation suddenly after an alcohol binge. Which of the following arrhythmia is most likely
a) Ventricular fibrillation c) Atrial flutter
b) Ventricular premature contraction d) Atrial fibrillation

Long Essays: **(2x10=20)**

2. Write about etiology, clinical features, complications, investigations and treatment of Crohn's disease (2+2+2+2+2)
3. A 30-year old male patient comes with blood urea level of 380 and creatinine of 8 mg/dL
   a) Enumerate the causes of acute renal failure
   b) Enumerate the mechanism of anemia in chronic kidney disease
   c) Mention three systemic diseases that can lead to chronic kidney disease
   d) What are the techniques of renal replacement therapy (3+3+2+2)

Short Essays: **(6x6=36)**

4. Management of Acute bacterial meningitis
5. Management of hypertensive emergencies
6. Nephrotic syndrome
7. Migraine headache
8. Portal hypertension
9. Clinical manifestations and diagnosis of multiple myeloma

Short Answers: **(6x4=24)**

10. Central nervous system (CNS) manifestations of HIV
11. Diagnosis and management of acute pancreatitis
12. Antiplatelet drugs
13. Communicate the therapeutic options to a patient with acute coronary syndrome
14. Inheritance and genetic counselling of hemophilia
15. Clinical features of pheochromocytoma

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