

GENESIS

Post Graduation Medical Orientation Centre
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FCPS PART-I MOCK TEST-II

SUBJECT : Dermatology
PAPER : II

Exam Date	:	Mock-I	:	13-12-20/17-12-20/20-12-20
		Mock-II	:	25-12-20/26-12-20/27-12-20
Exam Time	:	2.30.pm-4.00pm		
Total Number	:	100		

Question 26-50 based on single answer

1. Psoriasis may be induced by

- a) β -blockers,
- b) Lithium
- c) Antimalarials
- d) Terbinafine,
- e) Calcium channel blockers

2. TOPICAL treatment for the treatment of AD)

- a) Topical corticosteroids
- b) Crisaborole
- c) Tacrolimus
- d) Emollients
- e) Crude coal tar in white petrolatum

3. Lichenoid reactions can be seen with many medications, including

- a) Gold
- b) Hydrochlorothiazide
- c) Furosemide
- d) Antimalarials
- e) Terbinafine

4. Zinc dependent Enzymes are

- a) Alcohol dehydrogenase
- b) Carbonic anhydrase
- c) Lactate dehydrogenase
- d) Alkaline phosphatase
- e) Superoxide dismutase

5. Glucocorticoid secretion also increased

- a) Surgery
- b) Anxiety
- c) Physical trauma
- d) Hemorrhage
- e) Exercise

6. During sleep secretion of following hormone increased

- a) GH
- b) Insulin
- c) ADH
- d) Glucagon
- e) Prolactin

7. Sun protection programs have the following four main messages:

- a) Avoid midday sun.
- b) Seek shade)
- c) Wear sun-protective clothing.
- d) Apply a sunscreen.
- e) WEAR HAT

8. SPF

- a) DETERMINES sunscreen's efficacy in blocking the UVB radiation .
- b) It is the ratio of the number of MEDs of radiation required to induce erythema through a film of sunscreen (2 mg/cm²) compared with unprotected skin.
- c) Application of the sunscreen at least 20 minutes before sun exposure is recommended)
- d) Sunscreen need not be reapplied after swimming
- e) Vitamin D supplementation is sometimes required

9. Measures of central tendency are:

- a) Median
- b) Mean
- c) Mode
- d) Range
- e) Standard deviation

10. Following are examples of viral Exanthems of childhood?

- a) Measles (rubeola)
- b) Rubella (German measles)
- c) Varicella (or chickenpox)
- d) Fifth disease)
- e) Roseola

11. Following are Cutaneous symptoms:

- a) Pruritus
- b) Itch
- c) Hyperesthesia
- d) Pain
- e) Hypoesthesia

12. Characteristics of normal distribution of data

- a) Bell shaped
- b) Bilaterally symmetrical frequency curve
- c) Mean, median & mode coincide and represent the highest point in frequency distribution.
- d) About 50% values above & 50% values below the mean
- e) Maximum values lie in the middle around the mean

13. ADRENOCORTICAL FUNCTION TEST

- a) Dexamethasone test
- b) Urinary catecholamines
- c) Computed tomography (CT) scan
- d) Urinary free cortisol measurement
- e) CRH stimulation test

14. Types of experimental interventions may include:

- a) Therapeutic agents
- b) Prophylactic agents
- c) Diagnostic agents
- d) Surgical procedures
- e) Health service strategies

15. The blood pressure measured and recorded in mm is -

- a) Categorical type of data
- b) Ordinal type of data
- c) Qualitative data
- d) Quantitative type of data
- e) Measured in ratio scale

16. Prospective study

- a) Cohort study is called prospective study
- b) Proceeds from effect to cause
- c) Study proceeds forwards from cause to effect
- d) Long follow up period
- e) Yields relatively quick results

17. When secretory activity in the thyroid glands increases-

- a) It takes up iodide from the blood at a faster rate
- b) Its follicles enlarge & fill with colloid
- c) The follicular cells become more columnar
- d) The follicular cells ingest colloid by endocytosis
- e) The blood levels of thyrotrophin (TSH) increases

18. Hormones produced by Placenta (During pregnancy)

- a) Estrogen
- b) Progesterone
- c) HCG
- d) HPL
- e) Testosterone

19. Radiographic findings that are highly suggestive of psoriasis.

- a) Erosion of terminal phalangeal tufts
- b) Pencil in a cup deformity
- c) Osteolysis of metatarsals
- d) Predilection for distal interphalangeal and proximal interphalangeal joints,
- e) Relative sparing of metacarpophalangeal joints

20. Acquired causes of Palmo-plantar Hyperkeratosis

- a) Psoriasis
- b) Paraneoplastic syndrome
- c) Keratoderma climactericum
- d) PRP
- e) Chronic arsenicosis

21. Hazards of percutaneous drug absorption:

- a) Systemic toxicity
- b) Irritant contact dermatitis
- c) Drug reaction
- d) Topical absorption of harmful agents
- e) Eczema

22. The “four Hs” are characteristic of scurvy:

- a) Hemorrhagic signs
- b) Hyperkeratosis of the hair follicles
- c) Hypochondriasis
- d) Hemato–logic abnormalities
- e) Hypoesthesia

23. Blood supply of adrenal cortex

- a) Renal artery
- b) Adrenal artery
- c) Sup. suprarenal artery branch
- d) Middle suprarenal artery branch of abdominal aorta
- e) Inf. suprarenal artery branch of renal artery

24. Drugs causing erythroderma

- a) Allopurinol
- b) Aminoglycosides
- c) Arsenic
- d) Gold
- e) Phenobarbital

25. Thyroid hormone biosynthesis

- a) Thyroglobulin is synthesized in the rough endoplasmic reticulum
- b) Parafollicular C cells secrete thyroxine
- c) Iodine is incorporated to tyrosine on the surface of thyroglobulin
- d) Small amount of T4 secreted
- e) Thyroglobulin re-enters the follicular cell

Each question below contains five suggested answers- choose the one best response to each question (26-50)

26. Noninflammatory, spontaneous, painless blistering, most often in acral locations, is characteristic of

- a) Diabetic bullae
- b) bullous LP
- c) PMLE
- d) Hydroa Vacciniforme
- e) Tinea pedis

27. The treatment of choice for chancroid is

- a) Trimethoprim-sulfamethoxazole,
- b) Clindamycin,
- c) Doxycycline,
- d) Azithromycin
- e) Dicloxacillin

28. When experimental study is done on humans, it is called

- a) Quasi-experimental study
- b) Clinical Trial
- c) Retrospective study
- d) Prospective study
- e) Cohort study

29. The period of highest UVB intensity

- a) Between 9 AM and 3–4 PM
- b) Noon
- c) Evening
- d) All day long
- e) Morning

30. Most common patterns of psoriatic arthritis is:

- a) Asymmetric distal interphalangeal joint involvement
- b) Arthritis mutilans
- c) Symmetric polyarthritis-like rheumatoid arthritis (RA), with clawhand
- d) Oligoarthritis with tenosynovitis
- e) Ankylosing spondylitis alone or with peripheral arthritis

31. In SIADH, Sodium imbalance is characterized by

- a) Hyponatraemia with hypervolaemia
- b) Hyponatraemia with hypovolaemia
- c) Hypernatraemia with hypovolaemia
- d) Hyponatraemia with euvolaemia
- e) Hypernatraemia

32. Male hypogonadism is confirmed by demonstrating a

- a) Low serum testosterone level
- b) Elevated FSH and LH
- c) Normal FSH and LH
- d) Low FSH and LH
- e) Decreased GnRH

33. Effective treatment for PCT.

- a) Antimalarials
- b) Phlebotomy
- c) Oral iron supplementation
- d) Erythropoietin
- e) Desferrioxamine

34. ROM therapy (Rifampicin, Ofloxacin, Minocycline) is given in

- a) Paucibacillary Leprosy
- b) Tuberculoid Leprosy
- c) Single Lesion - Paucibacillary Leprosy
- d) Lepromatous Leprosy
- e) Indeterminate disease

35. Which is not a Papulosquamous Diseases:

- a) Pityriasis rosea
- b) Seborrheic dermatitis
- c) Pityriasis rubra pilaris
- d) Small plaque parapsoriasis
- e) Psoriasis

36. A 16year old boy complains of galactorrhoea and prolactin concentrations above 100 000 mU/L. The treatment of choice is

- a) Antimalarial drugs
- b) Antipsychotics
- c) Dopamine agonists
- d) Dopamine antagonists
- e) Anti-prolactins

37. A lady developed urticarial plaques and papules around the umbilicus and extremities in her second trimester. Within the infiltrated erythematous plaques, tense vesicles and bullae erupt, often in an annular or polycyclic configuration. Diagnosis:

- a) Pruritic Urticarial Papules and Plaques of Pregnancy
- b) Papular Dermatitis of Pregnancy
- c) Prurigo Gestationis
- d) Impetigo Herpetiformis
- e) Pemphigoid gestationis

38. FDA approved indication of Methotrexate:

- a) Lymphomatoid papulosis
- b) Keratoacanthomas
- c) Mycosis fungoides
- d) Sezary syndrome
- e) Pityriasis rubra pilaris

39. Vitiligo is caused due to

- a) Autosomal recessive disorder
- b) Mutation on VIP4 gene
- c) Enzyme deficiency
- d) Autosomal dominant trait
- e) Autoimmune disease

40. DNA synthesis takes place in

- a) M phase
- b) K phase
- c) L phase
- d) S phase
- e) G phase

41. Allergic Contact Dermatitis OCCURS THROUGH

- a) Type 1 hypersensitivity
- b) Type2 hypersensitivity
- c) Type3 hypersensitivity
- d) type IV hypersensitivity
- e) Th1 pathway

42. beriberi develops due to:

- a) Vitamin B1 deficiency
- b) Vitamin B6
- c) vitamin K
- d) Vitamin B2
- e) Vitamin C

43. A lady developed severe pustular psoriasis in pregnancy. The treatment of choice

- a) Systemic Retinoids
- b) Dapsone
- c) Colchicine
- d) Thalidomide
- e) systemic corticosteroids

44. Dapsone mainly acts on:

- a) Lymphocyte
- b) Neutrophil
- c) Plasma cell
- d) Langerhans giant cell
- e) Eosinophil

45. A 45 year old man developed whitish reticulate lesions in buccal mucosa) He has a history of wearing dental amalgams and the lesions improved with removal of the dental material.

Diagnosis:

- a) Oral lichenoid
- b) Oral lichenoid reaction
- c) Oral LP
- d) Drug reaction
- e) Oral candidiasis

46. GH is secreted in a

- a) Pulsatile manner
- b) Continuous
- c) Day and night manner
- d) Alternating with cortisol
- e) Alternating with gonadotrophins

47. Which is False : Acute intermittent porphyria (AIP) is

- a) The second most common form of porphyria after PCT
- b) Characterized by periodic attacks of abdominal pain
- c) Mental symptoms include: agitation, hallucinations, and depression.
- d) Skin lesions do not occur
- e) elevated porphyrin precursors are photosensitizers

48. Which includes Helsinki declaration

- a) Human trial
- b) Animal trial
- c) War criminals
- d) Both Human and Animal trial
- e) Only observational study

49. 7,3,2,2,1

- a) Mean = 3
- b) Median = 3
- c) Mode = 2
- d) Range = 4 - 7
- e) S D is 2

50. Secukinumab inhibits which member of the cytokine family?

- a) IL-23
- b) IL-12
- c) interleukin 17A
- d) IL-18
- e) IL-19

Dermatology Mock-II, Paper-II

1. TTTTT [Ref: Andrews' Diseases of the Skin/ P-197]
2. TTTTT [Ref: Andrews' Diseases of the Skin/ P-70,71]
3. TTTFF [Ref: Andrews' Diseases of the Skin/ P-129]
4. TTTTT
5. TTTTF
6. TFTFT
7. TTTTF [Ref: Andrews' Diseases of the Skin/ P- 25]
8. TTTFT [Ref: Andrews' Diseases of the Skin/ P- 25]
9. TTTFF
10. TTTTT
11. TTTTT
12. TTTTT
13. TTFTT
14. TTTTT
15. FFFTF
16. TFTTF [Ref: Biostatistics sheet]
17. TFTTF
18. TTTTF
19. TTTTT [Ref: Andrews' Diseases of the Skin/ P-194]
20. TTTTT [Ref: Andrews' Diseases of the Skin/P-209]
21. TTTTT
22. TTTTF [Ref: Andrews' Diseases of the Skin/P-475]
23. FTTT
24. TTTTT
25. TFTFT
26. A
27. D [Ref: Andrews' Diseases of the Skin /P- 272]
28. B
29. A [Ref: Andrews' Diseases of the Skin/ P - 25]
30. D [Ref: Andrews' Diseases of the Skin/ P- 194]
31. D [Ref: Davidson's 22nd Edition/ P - 438]
32. A [Ref: Davidson's 22nd Edition/ P-760]
33. B [Ref: Andrews' Diseases of the Skin/ P-522]
34. C [Ref: Andrews' Diseases of the Skin/ P-344]
35. D
36. C [Ref: Davidson's 22nd Edition/ P-791]
37. E [Ref: Andrews' Diseases of the Skin/ P- 464]
38. D [Ref: Wolverton/ P- 173]
39. E
40. D
41. D [Ref: Andrews' Diseases of the Skin/ P- 95]
42. A [Ref: Andrews' Diseases of the Skin/ P- 477]
43. E [Ref: Andrews' Diseases of the Skin /P-466]
44. B [Ref: Wolverton /P -230]
45. B [Ref: Andrews' Diseases of the Skin/ P- 129]
46. A
47. E
48. A [Ref: ABC of Research Methodology & Biostatistics/3rd/P-123]
49. C
50. C