

GENESIS

Post-Graduation Medical Orientation Centre

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FCPS PART-I MOCK TEST-I

SUBJECT : Medicine

PAPER : III

Exam Date	:	Mock-I	:	12-12-20/15-12-20/18-12-20
		Mock-II	:	25-12-20/26-12-20/27-12-20
Exam Time	:	03.00pm-4.20pm		
Total Number	:	100		

Question 26-50 based on single answer

1. Preformed mediators of mast cell degranulation includes

- a) Leucotrienes
- b) Histamine
- c) Tryptase
- d) Thromboxanes
- e) Neutrophil chemotactic factor

2. Which one is the example of type-III hypersensitivity disease

- a) Farmer's lung
- b) SLE
- c) Type-I diabetes
- d) Goodpasture's disease
- e) Cryoglobulinemia

3. Which one is the risk factor for falls in elderly

- a) Anxiety
- b) Age over 70 years
- c) Arthritis
- d) Walking without an AID
- e) Psychotropic medication

4. Which one causes redistribution of potassium into the cells

- a) Alkalosis
- b) Glucagon
- c) Catecholamine
- d) Acidosis
- e) β -adrenergic agonist

5. Which one is more in intracellular fluid than extracellular fluid

- a) K^+
- b) Cl^-
- c) Na^+
- d) Phosphate
- e) Proteins

6. Causes of glomerulonephritis with low serum complement includes

- a) Post infectious glomerulonephritis
- b) Endocarditis
- c) Systemic lupus erythematosus
- d) Cryoglobulinemia
- e) Mesangiocapillary glomerulonephritis

7. Endocrine hormones acting on kidneys are

- a) Vasopressin
- b) Prednisolone
- c) Parathyroid hormone
- d) Thyroid hormone
- e) Calcitonin

8. Drugs causing acute interstitial nephritis are

- a) Sulphazalazine
- b) Omeprazole
- c) Cyclosporin
- d) Diclofenac
- e) Penicillin

9. Regarding adult polycystic kidney disease which one is true

- a) Inherited autosomal dominant trait
- b) Mutation in the PKD1 gene accounts for 15% and PKD2 for about 85% of cases
- c) About 30% of patients with PKD also have hepatic cyst
- d) 50% cases have berry aneurysm
- e) Usually present with hypertension in the age of 20 onwards

10. Which conditions identified by bone scintigraphy

- a) Osteoporosis
- b) Skeletal metastases
- c) Stress fracture
- d) Osteopetrosis
- e) Complex regional pain syndrome

11. Joint aspiration is the pivotal in patient with suspected

- a) Rheumatoid arthritis
- b) Septic arthritis
- c) Haemophilic arthritis
- d) Crystal arthritis
- e) Reactive arthritis

12. What are the indications of urate lowering drugs

- a) Good renal function should be present
- b) Recurrent attacks of acute gout
- c) Tophi
- d) No bone or joint damage
- e) Nephrolithiasis

13. Hypersensitivity features of primary tuberculosis

- a) Erythema multiforme
- b) Phlyctenular conjunctivitis
- c) Miliary TB
- d) Dactylitis
- e) Skin test conversion

14. Adverse effects of ethambutol

- a) Arthralgia
- b) Retrobulbar neuritis
- c) Hepatitis
- d) Peripheral neuropathy
- e) Hyperuricemia

15. Normal flora of vagina includes

- a) Lactobacillus SPP
- b) Staph. epidermidis
- c) Strep. agalactiae
- d) Candida albicans
- e) Corynebacterium SPP

16. Drugs used against pseudomonas are

- a) Ciprofloxacin
- b) Meropenem
- c) Ceftriaxone
- d) Aminoglycosides
- e) Clindamycin

17. Specific serological test for syphilis includes

- a) Rapid plasma reagin test
- b) TPHA test
- c) VDRL test
- d) FTA-ABS test
- e) TPPA test

18. What are the clues for diagnosing factitious fever

- a) Temperature $<41^{\circ}\text{C}$
- b) A patient who looks unwell
- c) Evidence of self-infection
- d) Normal ESR and PRP
- e) Raised temperature during supervised measurement

19. Clinical features of Type-2 lepra reaction includes

- a) New skin lesion
- b) Painful tender nerves
- c) Iritis
- d) Swollen skin lesion
- e) Fever

20. Which one is dimorphic fungus

- a) Histoplasma capsulatum
- b) Candida SPP
- c) Aspergillus SPP
- d) Coccidioides immitis
- e) Sporothrix schenckii

21. Regarding Plasmodium vivax malaria which one is true

- a) Prepatent period-15-30 days
- b) Persistent as hypnozoites
- c) Asexual cycle 72hrs synchronous
- d) Fevers come every alternate days
- e) Delayed onset common

22. Features in favour of syndrome of inappropriate antidiuretic hormone secretion are

- a) Plasma sodium $<130\text{ mmol/L}$
- b) Plasma osmolality $<290\text{ mOsmol/kg}$
- c) Urine osmolality $>100\text{ mOsmol/kg}$
- d) Clinical euvolemia
- e) No recent use of diuretics

23. Causes of symmetrical polyarthritis are

- a) Rheumatoid arthritis
- b) Viral arthritis
- c) Osteoarthritis
- d) Axial spondyloarthritis
- e) Systemic lupus erythematosus

24. Which features of respiratory function abnormality suggest restrictive lung disease

- a) RV-↓
- b) TLC-↑↑
- c) FEV₁/FVC-↑
- d) TLCO-↑↑
- e) FVC-↓↓

25. Causes of type-I acute respiratory failure are

- a) Acute asthma
- b) Pulmonary oedema
- c) Acute severe asthma
- d) Pneumothorax
- e) Lung fibrosis

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

26. Which one is the cause of raised CRP level?

- a) Systemic Lupus erythematosus
- b) Multiple myeloma
- c) Pregnancy
- d) End stage renal disease
- e) Bacterial endocarditis

27. Regarding cauda equina syndrome all are true except

- a) Difficulty with micturition
- b) Loss of anal sphincter tone
- c) Saddle anaesthesia
- d) No gait disturbance
- e) Pain numbness in one or both legs

28. A 35-year-old woman comes to you with the complaints of shortness of breath. On CXR (P/A) view you found bilateral hilar lymphadenopathy. You suspect this may be a clue of sarcoidosis. Which one is not the presentation of sarcoidosis

- a) Hypercalcaemia
- b) Splenomegaly
- c) Diabetes insipidus
- d) Cardiac arrhythmia
- e) Interstitial lung diseases

29. A 50 years old smoker man comes to emergency department with SOB. You suspect pulmonary embolism. What is the features of acute massive pulmonary embolism

- a) Diffuse central chest pain
- b) Bradycardia
- c) Metabolic alkalosis
- d) Raised JVP
- e) S₁ Q₃ T₃, LBBB

30. A baby born with congenital heart block with neonathl lupus. His mother also a patient of systemic lupus erythematosus. Which antibody will be positive in this case?

- a) Anti jo. Antibody
- b) Anti sm Antibody
- c) Anti Ro Antibody
- d) Anti RNA polymerase
- e) Anti histone Antibody

31. Regarding histological section of lymphnode which cell are found in the medulla

- a) T-cell
- b) Dendritic cell
- c) Plasma cell
- d) B-cells in primary lymphoid follicle
- e) Proliferating-B cells after antigen exposure

32. A-34 years old women comes to you with a history of fever and unconsciousness for 3days. After taking drug history his attendant gave the history of hydroxy chloroquine and other medication not known at that moment. On examination you found butterfly rashand discoïd rash on her face and body. With the given clue which organism likely to be the cause of her recent condition

- a) Staphylococcus aureus
- b) Haemophilus influenzae
- c) Mycobacterium tuberculosis
- d) Cytomegalovirus
- e) Neisseria meningitidis

33. Regarding classical renal tubular acidosis which one is not true

- a) Impaired sodium reabsorption in the late distal tubule or cortical collection duct intercalated cells
- b) Hyperglobulinemia is one of the cause
- c) Patients often presents with profound hypokalemia
- d) Mobilization of calcium from bone causes osteomalacia
- e) Renal stone formation occurs here

34. Most common causes of chronic kidney disease

- a) Hypertension
- b) IgA nephropathy
- c) NSAID
- d) Diabetic mellitus
- e) Polycystic kidney disease

35. A 7 years old girl with previous throat infection comes to you with a history of abdominal pain and arthralgia. On examination you found rash in buttocks and lower legs. What is the most likely diagnosis

- a) Henoch-schonlein purpura
- b) IgA nephropathy
- c) Idiopathic thrombocytopenic purpura
- d) Thrombotic thrombocytopenic purpura
- e) Haemolyticuraemic syndrome

36. Most common cause of nephritic syndrome in children

- a) Membranous nephropathy
- b) Minimal change disease
- c) Focal segmental glomerulosclerosis
- d) IgA nephropathy
- e) Anti glomerular basement membrane diseases

37. Most characteristic findings in glomerulonephritis

- a) Red cell cast
- b) White cell cast
- c) Proteinuria
- d) Hypoalbuminemia
- e) Elevated creatinine and reduced renal function

38. A 30 years of man presented with massive proteinuria >3.5g 24 hours. He is hepatitis B virus positive for several years and direct immunofluorescence found IgG along the basement membrane. What is the most likely diagnosis

- a) IgA nephropathy
- b) Minimal change disease
- c) Diffuse proliferative glomerular phetitis
- d) Anti glomerular basement membrane disease
- e) Membranous nephropathy

39. Regarding investigating a patient with thrombocytopenia you also found stroke like feature and renal impairment and haemolytic anaemia. your diagnosis is thrombotic thrombocytopenic purpura as you found antibodies against ADAMTS-13. What should be the appropriate management

- a) Glucocorticoid
- b) Cyclophosphamide
- c) Plasma exchange
- d) Blood transfusion
- e) Rituximab

40. A 35 years old woman comes with the history of intermittent fever for 6 months associated with rash and arthralgia on examination you found her lymph nodes enlarged hepatosplenomegaly. on investigation you found markedly elevated serum ferritin. What is the most likely diagnosis

- a) Miliary tuberculosis
- b) Lymphoma
- c) Adult onset stills disease
- d) Chronic myeloid leukaemia
- e) Long standing rheumatoid arthritis

41. Mineralization of bone critically dependant on which enzyme

- a) Alkaline phosphatase
- b) Calcium gluconate
- c) Myeloperoxidase
- d) Fibroblast growth factor
- e) 25 (OH) vit-D

42. Most common infecting agents of community acquired pneumonia is

- a) Haemophilus influenzae
- b) Influenza virus
- c) Adeno virus
- d) Streptococcus pneumoniae
- e) Staphylococcus aureus

43. A 55-year-old smoker comes to you with history fever, haemoptysis. A lesion seen in his chest X-ray on investigation he has hyponatremia with low plasma osmolality which type of lesion he has

- a) Squamous cell carcinoma of lung
- b) Lymphoma
- c) Small cell carcinoma of lung
- d) Large cell carcinoma of lung
- e) Adenocarcinoma of lung

44. A 45-year-old woman comes to you with the history of frothy green vaginal discharge with itching and tenderness around vulva given the likely diagnosis what is the treatment

- a) Clotrimazole
- b) Econazole cream
- c) Fluconazole
- d) Clindamycin
- e) Metronidazole

45. Which disease occurs in a HIV patient when CD-4 count below 100 cells/mm³

- a) Cerebral toxoplasmosis
- b) Pneumocystis pneumonia
- c) Tuberculosis
- d) Kaposi's sarcoma
- e) Esophageal candidiasis

46. Which organism is most responsible for catheter associated infections

- a) Staphylococcus aureus
- b) Streptococcus pneumoniae
- c) Coagulase negative staphylococcus
- d) Enterococcus
- e) Gram negative bacilli

47. Which virus is not associated with congenital malformation

- a) Rubella
- b) Zika virus
- c) Syphilis
- d) Parvovirus B19
- e) Toxoplasmosis

48. Regarding SARS corona virus -2 all are true except

- a) RNA virus
- b) Double stranded virus
- c) Enveloped virus
- d) Has a propensity to bind with ACE-2
- e) There are four viral proteins in the corona virus membrane

49. A 20 years old comes to you with the history of high swinging fever. Rigors and lethargy for 5 days. Associated with headache joint and muscle pain. On examination splenomegaly and epididymo-orchitis found he also gave history of taking unpasteurized milk several times. What is the probable diagnosis

- a) Malaria
- b) Typhoid
- c) Brucellosis
- d) Leptospirosis
- e) Borrelia infection

50. Regarding diagnosis of kala azar which one is most efficient means of diagnosis

- a) Demonstration of amastigote in splenic smear
- b) Giemsa stain
- c) Bone marrow study for amastigote
- d) Complete blood count
- e) Lymph Node biopsy for amastigote

GENVESIS

Medicine-Mock-I, Paper-III

1. FTTFT (Ref: Davidson 23rd/Page-74)
2. TTFFT (Ref: Davidson 23rd/Page-83)
3. FFTFT (Ref: Davidson 23rd/Box)
4. TTTFT (Ref: Davidson 23rd/Page-361)
5. TTFFT (Ref: Davidson 23rd/Page-349)
- Exp: Cl⁻ & Na⁺ more in ECF
6. TTTT (Ref: Davidson 23rd/Page-401)
7. TTTFT (Ref: Ganong/Page-25/Vision Page-297)
8. FTFTT (Ref: Davidson 23rd/Page-402)
9. TTTFT (Ref: Davidson 23rd/Page-405)
- Exp:
 - b) PKD1-85%, PKD2- 15%
 - d) 5% cases
10. FTTFT (Ref: Davidson 23rd/Page-989)
- Exp:
 - a) Osteomalacia
 - d) Hypertrophic pulmonary osteoarthropathy
11. FTFTF (Ref: Davidson 23rd/Page-988)
- Exp: Joint aspiration with examination of SF is pivotal in – septic arthritis crystal arthritis and intra articular bleeding
12. FTTFT (Ref: Davidson 23rd/Page-1015)
- Exp:
 - a) Renal impairment
 - d) Bone or joint damage
13. FTFTF (Ref: Davidson 23rd/Page-589)
14. TTFTF (Ref: Davidson 23rd/Page-593)
15. TTFTF (Ref: Davidson 23rd/Page-103)
16. TTFTF (Ref: Davidson 23rd/Page-117)
17. FTFTT (Ref: Davidson 23rd/Page-339)
18. FTFTF (Ref: Davidson 23rd/Page-220)
- Exp:-
 - a) Temp >41°C
 - b) Who looks well
 - e) Normal temperature
19. FTFTT (Ref: Davidson 23rd/Page-268)
20. TTFFT (Ref: Davidson 23rd/Page-300)
21. FTFTT (Ref: Davidson 23rd/Page-274)
22. TTFTF (Ref: Davidson 23rd/Page-357)
- Exp: Plasma osmolality < 275 mosmol/ Kg
23. TTTFT (Ref: Davidson 23rd/Page-993)
24. TTFTT (Ref: Davidson 23rd/Page-555)
25. TTFTF (Ref: Davidson 23rd/Page-565)
26. E (Ref: Davidson 23rd/Page-72)
27. D (Ref: Davidson 23rd/Page-997)
- Exp: d) Gait disturbance present
28. A (Ref: Davidson 23rd/Page-609)
29. D (Ref: Davidson 23rd/Page-619)
30. C (Ref: Davidson 23rd/Page-999)
31. C (Ref: Davidson 23rd/Page-62)
32. E (Ref: Davidson 23rd/Page-62)
- SLE → Low complement → Neisseria meningitidis
33. A (Ref: Davidson 23rd/Page-366)
- Exp: Impaired acid secretion
34. D (Ref: Davidson 23rd/Page-415)

Exp:

- a) 5.20%
 - b) 10-20
 - c) 20-30%
 - d) 20-40%
 - e) 5%
35. A (Ref: Davidson 23rd/Page-401)
 36. A (Ref: Davidson 23rd/Page-395)
 37. A
 - Exp: Nephritic syndrome is characterised by the presence of haematuria in association with HTN. Oliguria fluid retention and reduced renal function
 38. E (Ref: Davidson 23rd/Page-398)
 - Exp: Box-15.15
 39. C (Ref: Davidson 23rd/Page-409-973)
 - Exp: Plasma exchange early therapy is crucial for
 40. C (Ref: Davidson 23rd/Page-1040)
 41. A (Ref: Davidson 23rd/Page-985)
 42. D (Ref: Davidson 23rd/Page-582)
 43. C (Ref: Davidson 23rd/Page-607)
 - Exp: Small cell Ca → SIADH
 44. E (Ref: Davidson 23rd/Page-335)
 - Exp: Frothy green discharge- Trichomoniasis → Metronidazole
 45. A (Ref: Davidson 23rd/Page-313)
 46. C (Ref: Davidson 23rd/Page-229)
 - Exp: Staphylococci account for 70-90% of catheter infections with coagulase negative staphylococci more common than staph aureus
 47. D (Ref: Davidson 23rd/Page-235)
 48. B (Ref: Davidson 23rd/Page-)
 49. C (Ref: Davidson 23rd/Page-254)
 50. A (Ref: Davidson 23rd/Page-283)