

GENESIS

(Post Graduation Medical Orientation Centre)

Foundation-1 Batch

Total Number- 60
Pass Mark- 42

Topics: Blood & Hematology-II
Question 16-30 is based on Single answers

Time: 30 Min
Date: 18/02/20

1. Regarding stem cells

- a) Comprise 1% of total bone marrow
- b) Stem cell plasticity present
- c) Adult stem cell multipotent
- d) Always lineage specific
- e) Labile cell contains stem cells

FTTFT [Sheet,P: 6]

2. Plasma contains NPN substance are

- a) Albumin
- b) Glucose
- c) Cholesterol
- d) Creatinine
- e) Xanthine

FFFT [Sheet, Pg: 4]

3. In comparison between plasma and serum

- a) Plasma: Cellular fluid portion of blood
- b) Serum: Fluid portion of blood after removal of clot
- c) Plasma: Contains all clotting factor
- d) Serum: Contains only 1,2,5,8 factor
- e) Plasma: Straw color

FTTFF [Sheet, Pg: 5]

4. Following are crystalloid

- a) Na⁺
- b) K⁺
- c) Albumin
- d) Dextran
- e) Cl⁻

TFFFT [Sheet, Pg:6]

5. Regarding reticulocyte

- a) Mature red cell
- b) Normal count 5%
- c) Stained by Leishmann stain
- d) Decreased in Fe therapy
- e) Decreased in any deficiency anemia

FFFT [Sheet, Pg:12]

6. Causes of decreased transferrin

- a) Liver disease
- b) Pregnancy
- c) Nephrotic syndrome
- d) OCP
- e) Acute phase response

TFTFT [Sheet, Pg:21]

7. Causes of raised MCV

- a) Hyperthyroidism
- b) Myxedema
- c) Smoking
- d) Reticulocytosis
- e) Myelodysplasia

FTTT [Sheet, Pg:17]

8. Howell-Jolly bodies present in PBF

- a) Hypothyroidism
- b) Hyposplenism
- c) CLD
- d) Post splenectomy
- e) Dyshematopoiesis

FTFT

9. Protozoal causes of splenomegaly

- a) Malaria
- b) Typhoid
- c) Brucellosis
- d) Histoplasmosis
- e) Trypanosomiasis

TFFFT

10. Regarding autologous HSCT

- a) Best for hematological malignancy
- b) Most common indication lymphoma and myeloma
- c) Stem cells collect from HLA identical sibling
- d) GVHD is a common complication
- e) No requirement of immunosuppression

FTFFT

11. Regarding spherocytosis

- a) Autosomal recessive disorder
- b) Due to deficiency of spectrin
- c) Absolute indication of splenectomy
- d) In clinical course aplastic crisis occurs due to parvovirus infection
- e) Common cause of massive splenomegaly

FTTTF

12. Management of splenectomised patient

- a) Life-long prophylactic azithromycin indicated
- b) Pneumococcal vaccine should be given annually
- c) No need of vaccination after emergency surgery
- d) Always vaccinate before 2-3 months of surgery in elective case
- e) Overwhelming sepsis is usually a common complication

TFFFT

13. Regarding LMWH

- a) Short half life
- b) Cent percent bioavailability
- c) No need of monitoring with low body weight patient
- d) Common side effect HIT
- e) Can be used outdoor basis

FTFFT

14. Electrolyte imbalance in storage blood

- a) Hypokalemia
- b) Hypocalcemia
- c) Hyponatremia
- d) Metabolic alkalosis
- e) Iron overload

FTFFT [Sheet, Pg: 100]

15. Protozoa transmitted through blood transfusion

- a) Coxiella
- b) Rickettsii
- c) Babesia
- d) Trypanosoma
- e) Treponema

FTTF [Sheet, Pg: 103]

Each question below contains five suggested answers- choose the one best response to each question (16-30)

16. Major site for thrombopoietin

- a) Kidney
- b) Lung
- c) Brain
- d) Liver
- e) Testes

D

17. Which electrolyte is important for coagulation

- a) K⁺
- b) Na⁺
- c) Ca²⁺
- d) SO₄⁻
- e) PO₄⁻

C

18. Non nucleated cell of following erythroid series

- a) Reticulocyte
- b) Normoblast
- c) Basophil erythroblast
- d) Pro-erythroblast
- e) Polychromatic erythroblast

A [de gruchy 5th Edition p 5]

19. Erythropoietin is a hormone which is a

- a) Protein hormone
- b) Polypeptide hormone
- c) Steroid hormone
- d) Thyrosine derivative
- e) Glycoprotein

E [de gruchy 5th Edition p 11]

20. A known case of CKD patient came to you with anemia) You are going to treat the patient by erythropoietin. Before starting erythropoietin therapy, which levels should you correct?

- a) Vitamin B12
- b) Thyroid hormone
- c) Iron
- d) Folic acid
- e) Growth hormone

C

21. Most common symptoms of megaloblastic anemia

- a) Breathlessness
- b) Parasthesia
- c) Malaise
- d) Sore mouth
- e) Poor memory

C

22. Absolute indication of splenectomy

- a) ITP
- b) Hereditary spherocytosis
- c) Hereditary elliptocytosis
- d) Thalassemia major
- e) Felly's Syndrome

B [de Gruchy 5th Edition p 358]

23. Narrowest capillary in the circulation are in

- a) Liver
- b) Kidney
- c) Spleen
- d) Brain
- e) Lung

C

24. Clopidogrel is an antiplatelet drug in which it binds

- a) Glycoprotein IIb/IIIa
- b) Glycoprotein Ib/V/IX
- c) Glycoprotein VI
- d) Glycoprotein Ia/IIa
- e) ADP receptor

E

25. A 36 Y old man present with night time cough and wheezing over the previous 2 months. He has a previous history of eczema) What findings in his full blood count would be in fitting with the scenario and help towards the diagnosis.

- a) Basophil
- b) Eosinophil
- c) Lymphocytosis
- d) Monocytosis
- e) Neutrophilia

B

26. Drug can cause lymphadenopathy

- a) Gold
- b) Naproxene
- c) Phenytoin
- d) Sulphanamide
- e) Penicillin

C

27. A patient is admitted into hospital for Hb-6g/dL, for this purpose this patient was treated with 3 unit fresh human blood) After this procedure patient complains of perioral numbness, paraesthesia, spasm in hand) What is the next possible treatment of this patient

- a) Inj. K+
- b) Inj. Na+
- c) Inj. Calcium
- d) I/V saline
- e) Inj. Lasix

C

28. A patient, known case of MM comes to emergency department feeling irritable, restlessness. On investigation findings, serum calcium level was high, which is the most immediate treatment of this patient

- a) I/V analgesic
- b) Bisphosphonates for hypercalcemia
- c) Allopurinol to prevent nephropathy
- d) Plasmapheresis for hyperviscosity
- e) I/V normal saline

E

29. A child develops oligouria, hypertension, diarrhea, vomiting and pyrexia within 5-14 days after an attack of gastroenteritis. On examination finding patient was anemic and slightly icteric) CBC shows thrombocytopenia, which is most likely diagnosis

- a) Cardiac hemolytic anemia
- b) Henoch-Schölein purpura
- c) Thrombotic thrombocytopenic purpura
- d) Hemolytic uremic syndrome
- e) March hemoglobinuria

D [de gruchy 5th Edition 207]

30. A 30 year old female patient come to you with superficial bruising, epistaxis, menorrhagia) Investigation shows platelet count normal, BT and CT both prolonged) Which is the most likely diagnosis?

- a) HemophiliaA
 - b) Christmas disease
 - c) Von Willebrand disease
 - d) DIC
 - e) Thrombotic thrombocytopenic disorder
- C**