Medical Entrance Examination Questions

- Q1. Bone marrow density 2 SD below the reference level is labeled as:
 - a. Normal level
 - b. Low bone mass
 - c. Osteoporosis
 - d. Severe osteoporosis
- Q2. Which of the following joint is rarely involved in SLE?
 - a. PIP joints
 - b. Carpal joints
 - c. Knee joints
 - d. Sacroiliac joints
- Q3. The term "Large vessels" in large vessel vasculitis indicates:
 - a. Arteries arising from arch of aorta
 - b. Arteries directly arising from any part of aorta
 - c. Arteries of size (diameter) more than 5 cm
 - d. Arteries supplying the main viscera
- Q4. The most commonly used drug in sarcoidosis is:
 - a. Methotrexate
 - b. Azathioprine
 - c. Steroid
 - d. NSAIDS
- Q5. A 45 years old male presented with jaundice and ascites. On evaluation, his serum bilirubin was 2.1 mg/dl, serum 5. A 45 years old male presented with jaundice and ascites. On evaluation, his serum bilirubin was 2.1 mg/dl, serum 5. A 45 years old male presented with jaundice and ascites. On evaluation, his serum bilirubin was 2.1 mg/dl, serum albumin was 3.4 g/dl, INR was 1.8,had controlled albumin was 3.4 g/dl, INR was 1.8,had controlled ascites and minimal HE. His Child Pugh class would be ascites and minimal HE. His Child Pugh class would be
 - a. A
 - b. B
 - c. C
 - d. Above data are insufficient to classifyAbove data are insufficient to classify
- Q6. Half life of serum albumin is:
 - a. 1-3 days
 - b. 3-7 days
 - c. 7-14 days
 - d. 14-21 days
- Q7. Which of the following micronutrient potentiates action of insulin?7. Which of the following micronutrient potentiates action of insulin?
 - a. Zinc
 - b. Chromium
 - c. Magnesium
 - d. Calcium

- Q8. Magenta tongue is seen due to the deficiency of:tongue is seen due to the deficiency of:
 - a. Thiamine
 - b. Riboflavin
 - c. Niacin
 - d. Pyridoxine
- Q9. The score system used to estimate the risk of ischemic stroke in the first two days af9. The score system used to estimate the risk of ischemic stroke in the first two days after TIA is:
 - a. NIHSS
 - b. CHA2DS2-VASc
 - c. HAS-BLED
 - d. ABCD2
- Q10. Diastolic murmur heard in apex in a case of aortic regurgitation is due to:
 - a. Carey coombs murmur
 - b. Gallavardin phenomenon
 - c. Austin flint murmur
 - d. Dock's murmur
- Q11. Which of the following electrolyte disorder causes atrioventricular block?
 - a. Hypokalemia
 - b. Hypernatremia
 - c. Hypomagnesemia
 - d. Hypermagnesemia
- Q12. Which of the following is not included in family of PSVT?12. Which of the following is not included in family of PSVT?
 - a. AV node reentry
 - ${\tt b.}$ AV node reentry using accessory pathwayAV node reentry using accessory pathway
 - c. Atrial tachycardia
 - d. Inappropriate sinus tachycardia
- Q13. What happens to blood pressure and heart rate during recovery phase of Valsalva maneuver?13. What happens to blood pressure and heart rate during recovery phase of Valsalva maneuver? 13. What happens to blood pressure and heart rate during recovery phase of Valsalva maneuver?
 - a. ⋅BP,⋅HR
 - b. \cdot BP, \cdot HR
 - c. Both BP and HR \cdot
 - d. Both BP and HR ·
- Q14. Which of the following is not true about tetanus?14. Which of the following is not true about tetanus?
 - a. It is completely preventable by vaccinationIt is completely preventable by vaccination
 - b. Puncture entry wound is found in every casePuncture entry wound
 - is found in every cases of tetanus
 - c. Deeper infections are associated with more severe diseaseDeeper infections are associated with more severe disease
 - d. Persons more than 60 years of age are at greater risk of

tetanusPersons more than 60 years of age are at greater risk of tetanus

Q15. Adult intestinal colonization botulism is associated with 15. Adult intestinal colonization botulism is associated with

- a. Food borne
- b. Traumatic wound contamination
- c. Iatrogenic
- d. Antibiotic use

Q16. A 9 year boy presented with the features of truncal and limb ataxia, dysarthria, myoclonic jerks, areflexia, extensor 16. A 9 year boy presented with the features of truncal and limb ataxia, dysarthria, myoclonic jerks, areflexia, extensor 16. A 9 year boy presented with the features of truncal and limb ataxia, dysarthria, myoclonic jerks, areflexia, extensor plantar response and distal sensory deficit. He had repeated history of pneuplantar response and distal sensory deficit. He had repeated history of pneumonia in the past. He also has generalized monia in the past. He also has generalized lymphadenopathy. The probable diagnosis islymphadenopathy. The probable diagnosis is

- a. Spinocerebellar ataxia
- b. Friedreich's ataxia
- c. Ataxia telangiectasia
- d. Mitochondrial ataxia

Q17. The diagnosis of acromegaly is confirmed by

- a. Measurement of random Growth hormone level
- b. IGF-I level
- c. MRI pituitary
- d. Oral glucose tolerance test

Q18. Differentiating the ACTH dependent Cushing's syndrome, which of the following feature is more prominently seen in ACTH secreting pituitary tumor as compared to ectopic ACTH secretion

- a. Rapid onset
- b. Pigmentation
- c. Severe myopathy
- d. None of the above

Q19. Poor host immune reaction denotes:

- a. Tuberculoid leprosy
- b. Lepromatous leprosy
- c. Borderline leprosy
- d. Drug resistant leprosy

Q20. Harmonic scalpel uses which of the following to cut tissues?20. Harmonic scalpel uses which of the following to cut tissues?

- a. Cold
- b. Heat
- c. Ultrasound
- d. Fire