

March-2004 PLAB-1

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1 Theme: Scientific basis of CNS disease

Options

- . *Berry aneurysm*
- . *Multiple sclerosis*
- . *Alzheimer's dementia*
- . *Toxoplasmosis*
- . *Meningioma*
- . *Glioblastoma multiforme*
- . *Cerebral infarct*
- . *Cerebral hemorrhage*
- . *Secondary carcinoma*
- . *Astrocytoma*
- . *Meduloblastoma*

1. It is characterized by large areas of demyelination throughout the brain"
2. A circumscribed and limited lesion with glandular columnar cells with pleomorphic nuclei
3. A wedge shaped area of discoloration involving both gray and white matter
- 4 A mass present on the outer aspect of the brain with pressure over the brain. Psammoma bodies are present
5. Present at the junction of internal carotid artery and middle cerebral artery (*or Mid cerebral art & Ant cerebral art*)

2 Theme: Scientific basis of Heart disease

Options

- . *Nutritional*
- . *Congenital*
- . *Autoimmune*
- . *Infective*
- . *Hormonal*
- . *Degenerative*
- . *Neoplastic*
- .

6. A 55-year-old lady has palpitation, weight loss despite increased diet.
7. A 24-year-old female presents with pyrexia, finger clubbing and splinter hemorrhages:
8. A 34-year-old patient underwent valvular replacement surgery, afterwards she presents with fever, a newly developed murmur and altered intensity of heart sounds.
9. A 34-year-old man has symptoms of syncope, he has a bicuspid aortic valve
10. An alcoholic 60-year-old man who is on his own, with no one to look after him, has raised JVP, pedal edema and spider neavei. On C-XR he is found to have massive cardiomegaly (globular heart)

3. Theme: Diagnosis of Eye Conditions

Options

- . *Corneal Abrasion*
 - . *Dendritic Ulcer*
 - . *Foreign Body*
 - . *Viral Conjunctivitis*
 - . *Limbal Dermoid*
 - . *Pterygium*
 - . *Interstitial Keratitis*
 - . *Band Keratopathy*
 - . *Herpes zoster*
 - . *Keratoconus.*
 - . *Interstitial keratitis.*
 - . *Degenerative changes.*
- 11.** Metal sheet worker complains of pain photophobia and lacrimation
- 12.** A welsh farmer has fleshy bilateral swellings on the white of the eye
- 13.** A patient presents with pain in the eye and decreased vision along with photophobia and lacrimation. He has painful vesicular eruptions around the mouth
- 14.** A female patient wakes up from sleep to find blurring of vision along with pain and lacrimation in the eye. 12 months back she was treated for a scratch in the eye by her daughter's nail while playing
- 15.** A patient has a history of sore throat along with flu like symptoms. He now has a red eye:

4. Theme: Management of Ear complaints

Options

- . *Admit & IV antibiotics.*
 - . *Oral Amoxicillin*
 - . *Oral Amoxicillin + Metronidazole.*
 - . *Syringing.*
 - . *Pack the ear.*
 - . *Surgical intervention*
 - . *Out patient review.*
- 16.** Girl with fever, earache not able to swallow
- 17.** A 24-year-old man newly joins swimming classes and presents with earache and diminished hearing. On exam he is found to be normal except for some wax in the ear
- 18.** A 24-year-old Rugby player has ear discharge and loss of hearing in right ear, on exam there is small ragged perforation in the tympanic membrane
- 19.** A 34-year-old woman presents with high fever, vomiting, headache and rigors. She has already been having earache along with ear discharge, tenderness over mastoid antrum
- 20.** A 33-year-old female undergoes root canal treatment at a dentist. 5 days afterwards she has tenderness over the maxillary sinus associated with earache.
- 21.** A 32-year-old boxer has bleeding in the ear after an injury sustained in a boxing match.

5. Theme: Management of cardiac Arrhythmias

Options

- . Heparin
- . Warfarin
- . Atenolol
- . Streptokinase,
- . Alteplase
- . Heparin + Cardioversion
- . Adenosine
- . Isosorbide mononitrate
- . Glyceryl trinitrate
- . r-TPA
- . Low dose Aspirin
- . NTG Patch

- 22.** A 40-year-old male presents with chest pain for 2 hours, now after 1 hour he has no chest pain. But the ECG shows T wave inversion in L II, III, aVF
- 23.** Patient with previous history of MI treated with thrombolysis now presents with ST segment elevation
- 24.** Post MI patient, with narrow complex tachycardia.
- 25.** A patient presents with an irregular pulse, HR. 160 /min., BP. 100/70 mm Hg [*Atrial Fibrillation*]
- 26.** A patient has his apical impulse shifted to the Left and has difficulty in breathing and L V H.

6. Theme: Diagnosis of post MI complications

Options

- . Papillary muscle rupture
 - . Atrial Fibrillation
 - . Ventricular Fibrillation
 - . Complete Heart block
 - . Pulmonary Embolism
 - . Acute pericarditis
 - . Congestive cardiac failure
 - .
- 27.** Five days after myocardial infarction a patient presents with collapse. O/E pansystolic murmur
- 28.** Pt presents 12-hours after MI with recurrent chest pain, breathlessness & heart rate of 40/min
- 29.** Post MI with irregularly irregular pulse

7. Theme: Diagnosis of chest infection

Options

- . *M. Tuberculosis*
- . *Pseudomonas.*
- . *Strep pneumoniae.*
- . *Mycoplasma pneumoniae.*
- . *Legionella.*
- . *Chlamydia.*
- . *Pneumocystis carinii.*

30. A 30-year-old patient loses weight within the last 4-months, presents with dry cough and bilateral interstitial marking on C -X ray
31. A 20-year-old previously very healthy has general malaise, dry cough and breathlessness. No significant changes on examination. Chest X-ray shows patchy consolidation throughout the lung fields.
32. Patient with history of travel, presented with diarrhea vomiting and chest infection.
33. A 50 kg weight loses 5 kgs weight and has night sweats, fever and hemoptysis & cough. C-X ray shows upper sided lesion
34. Cystic fibrosis severe cough

8. Theme: Infections Causative agent

Options

- H. Strep pneumoniae*
 - H. Strep pyogenes*
 - H. Staph aureus*
 - H. Chlamydia*
 - H. E. Coli*
 - H. Gonococcus*
 - H. Clostridium difficile*
 - H. Campylobacter*
 - H.*
35. A 14-year-old boy presents with a circumscribed swelling on his arm. It is erythematous and the margins are very limited. Pyrexia is present.
112. A 25-year-old presents with an axillary abscess
36. 25-year-old male patient having pus from axilla
37. Old hospitalized lady on cefuroxime now developed bloody diarrhea
38. A patient has very severe lower abdominal pain along with pyrexia after changing her sexual partner.
- 39.

9. Theme: Management of asthma

Options

- . Nebulized Beta₂ agonist
- . Long acting inhaled B₂ agonist
- . Inhaled Steroid
- . Reduce inhaled steroid dose
- . Inhaled cromoglycate
- . Oral Steroids
- . Reassurance
- . Inhaled short acting B₂ agonist
- . Iv steroids
- . Leukotrienes antagonist
- . Antibiotics
- . Oral Theophylline

41. A 7-year-old child has intermittent asthma, he has been using inhaled B agonists and oral steroids. He is allergic to aspirin and is still having symptoms
42. Patient well maintained on 1000ugm inhaled steroid but develops thrush
43. A 25-year-old man is taking inhaled B agonist 3 times in a day. Still he wakes up at night with wheezing.
44. A 36-year-old woman is a known asthmatic. She is on treatment with oral steroids. She presents to the A&E breathless and wheezing
45. A 45-year-old man suffering from chronic asthma is unwell, he has pyrexia and green sputum. His PEFr is <80% of his normal value.

10. Theme: Diagnosis of Upper GI Diseases (Dysphagia)

Options

- L. Barrett's esophagus
- L. Achalasia cardia
- L. Plummer Vinson syndrome
- L. Scleroderma
- L. Hiatus Hernia
- L. Peptic ulcer
- L. Parkinsonism
- L. GORD
- L.

46. Transformation of squamous epithelium to columnar epithelium
47. A 50-year-old female presents with pallor and fatigue, blood smear shows microcytic and hypochromasia. She has post cricoid webs and has difficulty in swallowing.
48. A boy with dysphagia, an organ protrusion into the thoracic cavity
49. A layer of submucosal hyaloid fibrosis

50- s/s achalasia

11. Theme: Appropriate investigation in constipation

Options

- . Rectal biopsy
 - . Reassure
 - . Barium meal + follow through
 - . NM studies of gut
 - . Sigmoidoscopy
 - . CT scan
 - . USG abdomen
 - . UGI endoscopy
 - .
51. An 8-year-old girl with weekly abdominal pain, no h/o diarrhea or vomiting. Physical examination was unremarkable.
52. A 6-year-old child had been having repeated constipation which is not being relieved by treatment with laxatives. O/E there is no ano-rectal anomalies
53. A 8-year-old child presents with epigastric pain a/w food. It appears before eating and is relieved by eating food
54. A patient presents with a painless bladder, which is distended up to the umbilicus. The patient has been suffering from constipation since the last 3 months and his sigmoid colon is palpable per abdomen

12. Theme: Rectal bleeding

Options

- . Hemorrhoids
 - . Diverticulitis
 - . Diverticulosis
 - . CA rectum
 - . CA colon
 - . U C
 - . Campylobacter jejuni.
 - . Pseudomembranous colitis.
55. A 45-year-old male with loose stools, blood, and progressive feeling of incomplete defecation
56. A 54-year-old man presents with altered bowel habits and bleeding PR.
57. History of chronic constipation, hard stool passage now presenting with bleeding PR. Feces coated with blood and splash in pan
58. A 28-year-old woman returns from Thailand, she had an episode of bloody diarrhea there, then she was all right. She came back and has similar episode
59. Young boy with bloody diarrhea and vomiting for one day.

13. Theme: Investigation of complications CA prostate

Options

- . PSA
 - . Serum acid phosphatase
 - . Serum alkaline phosphatase
 - . Transrectal USG guided biopsy
 - . Serum Calcium level
 - . Isotope bone scans
 - . Full skeletal survey
 - . X ray pelvis and lumbar spine
- 60.** A patient with CA. Prostate presents with urinary incontinence along with weakness of lower legs and backache
- 61.** Known case of CA Prostate presents with humerus fracture. On xray we find two osteosclerotic lesions
- 62.** Male with high PSA levels and on rectal exam has loss of median sulcus + on USG some nodularity in prostate next step
- 63.** A 56-year-old has a family h/o of prostatic CA. He presents for examination and wants to know if he has prostatic CA. He is found to have a normal per-rectal exam and no lymphadenopathy.
- 64.** Man on GnRH's for prostate cancer comes after 2 months for follow up

14. Theme: Cause of urinary retention

Options

- L. BPH
 - L. Prostatae Ca
 - L. Fecal impaction
 - L. Clot retention
 - L. Ureteral stricture
 - L. Bladder stone
 - L.
 - L.
- 65.** An old patient with the history of constipation with palpable sigmoid colon & bladder palpable till umbilicus
- 66.** A patient with Bladder Ca. wants to undergo surgery. A day before the admission to hospital he presents with inability to pass urine.
- 67.** A patient is unable to pass urine after drinking 5 pints of beer. Earlier he had difficulty in micturition, dribbling and nocturia.
- 68.** 75-year-old male with bladder outflow obstruction with other BPH s/s
- 69.**

15. Theme: Investigations of Postop complications

Options

- . Blood Culture
 - . Ultrasound abdomen
 - . Wound swab
 - . Doppler study
 - . CT scan
 - . Venogram
 - . Serum Creatinine level
 - . Chest X-ray
 - . Blood Glucose
 - . ECG
 - . Full blood count
 - . VQ scan
70. A 64-year-old woman underwent an emergency laprotomy for peritonitis. On the 6th day after surgery she is noted to have a serosanguinous discharge from the wound. There is no surrounding erythema & she has normal temperature
71. A 50-year-old woman underwent surgery for Ca. Rectum, 10 days back. She has low-grade fever of 37.5 deg. C and is complaining of pain in the left calf. She has oedema of the left leg and ankle.
72. A 24-year-old man underwent appendicectomy 7 days back. He was making good recovery, but suddenly developed high fever. O/E there is no abnormality except for slight lower abdominal tenderness.
73. A 55-year-old man underwent emergency repair for an abdominal aortic aneurysmal rupture. Before the surgery his BP was 60/40 mm Hg. During the surgery and after, his blood pressure was satisfactory, but his urine output was < 5-ml in the first hour after surgery.
74. A 75-year-old woman underwent left hemicolectomy for Ca. Sigmoid Colon. On the 4th day after surgery she becomes sick. On exam she is having fever 38.6°C, BP. 60/40, PR. 130/min., her hands and feet are warm.

16. Theme: Pre -op investigation

Options

- . ECG
 - . 24-hr ECG
 - . EEG
 - . Echocardiography
 - .
 - .
75. A 10-year-old child is posted for Herniorrhaphy. He is clinically normal, but has an irregular pulse.
76. A person wants to undergo surgery. He is evaluated and found to be completely normal. His ECG however shows RBBB. Next step.
- 77.

17. Theme: Diagnosis of Fractures

Options

- . *Transverse Fracture ulna*
 - . *Fracture clavicle*
 - . *Spiral Fracture humerus*
 - . *Fracture neck of humerus*
 - . *Scaphoid Fracture*
 - . *Bennett's Fracture*
 - . *Supracondylar Fracture humerus*
 - . *Fracture Metacarpals*
 - . *No evidence of fracture*
 - .
- 78.** A 43-year-old lady oversteps the footpath while carrying her shopping bags and falls. She presents with pain in arm and no deformity but movements are slightly restricted.
- 79.** A 16-year-old girl falls on the outstretched hand and complains of pain from shoulder to the elbow, she is unable to use her arm.
- 80.** A man hit by baseball bat while protecting himself using his hand in a fight.
- 81.** A patient has a fall on a outstretched hand. He is unable to lift his wrist placed on the table.
- 82.** A Rugby player injures his hand during the game. He has pain swelling and tenderness in the region distal to the lower end of radius. On the X-ray there is no evidence of fracture.
- 83.** Guy presents with pain after punching his fist on the wall

18. Theme: Management of traumatic injuries

Options:

- . *Shoulder-Wrist Sling*
 - . *Collar & Cuff Sling*
 - . *Simple Sling*
 - . *Reassure*
 - . *Immobilization in cast*
 - . *Resuscitation*
 - . *Resuscitation and External Fixation*
 - . *Manipulation*
 - . *POP Cast*
- 85.** A patient undergoes a RTA and has fracture pelvis.
- 86.** A 3-year-old boy his father pulls his hand while swinging him in the garden. He has a displacement at the elbow region.
- 87.** A child is knocked down and run over by a bus over his pages, he is tachycardia and hypotension. Next step.
- 88.** After injury, pain distal to radius, initial investigations seem normal.
- 89.** **Clavicle or some joint dislocation**

19. Theme: Trauma investigation

Options:

- . Abdominal CT
- . Thoracic CT
- . Pelvic CT
- . Chest x-ray
- . Neck x-ray
- . Abdominal X-ray
- . IVU
- . Urethrogram
- . Skeletal Survey
- .

- 90.** A 10-year-old boy is knocked down by a car while cycling, brought to A&E. He is vomiting, upper abdominal pain and tenderness.
- 91.** A child from RTA pain in upper abdomen with pain in lt shoulder tip.
- 92.** A patient had an episode of epilepsy following which he has difficulty in breathing and cant swallow his saliva. O/E his dentures are missing
- 93.** A 32-year-old man has a kick in loin region, developed hematuria, no blood at urethral meatus, no perineal injury seen.
- 94.** A patient was wearing a soft neck collar and is involved in a RTA and she had been sitting in the rear seat. After 10 days she presents with neck pain.

20. Theme: Etiology of Arthritis

Options :

- L. Rheumatoid Arthritis
- L. Osteoarthritis
- L. Reactive arthritis
- L. Septic Arthritis
- L. Degenerative Osteoarthritis
- L. Psoriasis
- L. Psoriatic arthritis
- L. Myeloma
- L. Gout
- L. Pseudo gout
- L. Reiter's disease
- L. Ankylosing spondylosis
- L. Chondromalacia Patella
- L. Inflammatory arthritis

- 95.** A 47-year-old lady with arthritis of the small joints has swelling of the fingers and pitting of nails
- 96.** A 27-year-old woman during her postpartum period presents with symmetrical small joint swelling associated with edema
- 97.** Patient with steroids now having a swollen painful joint which is hot & tender associated with pyrexia
- 98.** A 45-year-old male patient has a history of gout. His metacarpal joints are swollen and hot after an episode of trauma..
- 99.** A 76-year-old patient has knee problem for 10 years, it is not hot but during the attacks it swells and subsides
- 100.** An 80-year-old lady with knee pain. Knee is inflamed but no rise of temperature.
- 101.** A 68-year-old patient has hypercalcemia, along with low backache and proteinuria.

21. Theme: Management of HERNIA

Options

- G. Herniotomy
- G. Herniotomy + orchidopexy.
- G. Herniorrhaphy+ orchidectomy
- G. Elective herniorrhaphy.
- G. Emergency herniorrhaphy
- G. Abdominal binder.
- G. Truss
- G. Reassure.
- G. Observe

- 102.** A 68-year-old woman is a known smoker. She had an attack of MI 10 yrs back and is known to have peripheral vascular disease. She presents with a reducible herniation over the incision region of a surgery which she underwent in childhood
- 103.** A 38-year-old lady presents with an irreducible hernia in the right groin region. She is vomiting and has constipation since the last 3 days. Her abdomen is distended and is tender to palpation
- 104.** A 9-month-old child is brought to the A&E with an irreducible firm swelling, which descends into the left groin when the child is crying
- 105.** A 45-year-old mechanic presents with a reducible swelling in the groin, impulse on coughing is present. He has mild dragging pain in the abdomen, otherwise he is normal

22. Theme: statistics of psychiatric disorders (Dementia) in UK

Options :

- . Alcoholic dementia
- . Alzheimer's disease
- . Cerebral secondaries
- . Creutzfeldt-Jakob's disease
- . Frontal lobe dementia
- . Lewy body dementia
- . Multi infarct dementia
- . Myxoedema
- . Normal pressure hydrocephalus
- . Pseudo-dementia
- . Viral encephalitis
- . Wilson's disease
- . Schizophrenia

- 106.** A condition associated with hypertension
- 107.** The commonest form of dementia in the UK.
- 108.** A condition characterized by 'senile plaques' and neurofibrillary tangles in the cortex and hippocampus.
- 109.** A condition, which may respond to treatment with antidepressants.
- 110.** A condition characterized by early personality changes, usually of loss of inhibitions and relative intellectual sparing.

23. Theme: Treatment of psychiatric disorders

Options:

- N. Mental status examination
- N. Couple therapy.
- N. Cognitive therapy.
- N. Cognitive and behavioral therapy
- N. Psychodynamic Physiotherapy
- N. Exercise therapy
- N. Hypnotherapy.
- N. Martial therapy.
- N. Flupenthixol.
- N. E C T.
- N. Imipramine.
- N. Lithium
- N. Tricyclic antidepressant
- N. Bed rest

111. A 25-year-old mother, had puerperal blues in her first pregnancy. Now in her second pregnancy after delivery, she has lost weight and believes that her husband intends to kill her and her baby. She feels completely worthless. She is currently on antidepressant medication
112. A 68-year-old female has received antidepressants for depression at the age of 30 in 10 cycles. She presents now with loss of interest in her activities and refuses to eat or drink anything.
113. A 23-year-old female is always tearful and weeping. She cries on her own, without any reason and is not able to do any work
114. A man with anxiety, lack of concentration at work, but no somatic symptoms of depression.. what do we do?.
115. Doctor with problem in dealing with patients no past history of any treatment.
116. Man with manic depressive symptoms
117. A 10-year-old child has spasmodic torticollis.
118. A patient with Alzheimer's disease presents with coarsening of habits.

24. Theme: Psychiatric disorders Diagnosis

Options

- . Paranoid Schizophrenia
- . Anxiety
- . Depression
- . Gilles La Tourette syndrome
- . Schizophrenia
- . Hypomania
- . Delirium
- .
- .
- .

119. A 30-year-old has periods of elation and depression. He goes to a bank and demands money from the cashier and says that he is the owner of the Bank. --- **Hypomania / Schizophrenia**.
120. A male with suspicion and schizophrenic features
121. Patient with ticks shouts obscene

25. Theme: Diagnosis/Causes of Anemia

Options

- . Pernicious anemia.
 - . Sideroblastic anemia.
 - . Sickle cell anemia.
 - . Vit. B₁₂ malabsorption.
 - . Vit. B₁₂ dietary deficiency.
 - . Decreased Fe Intake.
 - . Fe malabsorption.
 - . Folate def
 - . Hemolytic anemia.
 - . Hereditary Spherocytosis.
 - . Aplastic anemia
- 123.** A 32-year-old female presents with macrocytosis, she has anti intrinsic factor antibodies.
- 124.** A 42-year-old vegans with macrocytic anemia and normal serum folate.
- 125.** A 23-year-old patient has Microcytic hypochromic anemia, he has diarrhea and is sensitive to gluten containing diets. With endomysial antibodies.
- 126.** A 23-year-old patient has iron deficiency anemia, he has diarrhea and is sensitive to gluten containing diets
- 127.** A 54-year-old patient is on Cyclophosphamide therapy, he presents with a platelet count of 25×10^9 , and a WBC count of 2×10^9

26. Theme : Management of bleeding

Options

- H. Factor IIIIV
 - H. Vitamin K
 - H. Warfarin.
 - H. Vitamin C.
 - H. Vitamin. E.
 - H. FFP.
 - H. Heparin.
 - H.
- 128.** A 45-year-old male patient has Mitral Stenosis and Atrial Fibrillation, he presents with epistaxis and his blood pressure is normal. The bleeding stops on packing the nose. His INR is 9.4
- 129.** A 10-year-old boy presents with bleeding into his knee joints. On investigation his bleeding time is found to be normal, but his clotting time is prolonged. His grand father is also known to have the same disorder
- 130.** A 34-year-old woman presents with perifollicular hemorrhages. Serum coagulation factor levels are normal
- 131.** A 48-year-old woman undergoes hysterectomy. She has 2 attacks of TIA from which she has recovered. O/E she is found to have an irregular pulse
- 132.** Widower with bleeding tendencies
()

27 Theme: Management of SEIZURES

Options

- L. Carbamazepine.
 - L. Phenobarbitone.
 - L. Ethosuximide.
 - L. IV Diazepam.
 - L. IM Diazepam.
 - L. Oral Diazepam.
 - L. Rectal Diazepam.
 - L. Non Pharmacological intervention.
 - L. Lamotrigine.
 - L. Paraldehyde.
 - L. Valproate.
 - L. Phenytoin
- 133.** A 9-year-old child with tonic clonic convulsions brought to A&E, iv access failed
- 134.** A 4-year-old child with history of absences episodes in school (reproducible on hyperventilation)
- 135.** A 24-year-old college student who is about to start university has first episode of generalized convulsions
- 136.** A 34-year-old female is having continuous seizures without any gap
- 137.** A woman with 25 min of epilepsy with loss of consciousness
- 138.** Rx of status epilepticus

28. Theme: HEADACHE investigation

Options

- I. CT scan
 - I. MRI scan
 - I. EEG
 - I. Temporal artery biopsy
 - I. CSF examination
 - I. Tonometry
- 139.** A 44-year-old man with history of migraine now have a sudden pain in right eye for 36 hrs.
- 140.** A 72-year-old lady with a history of migraine has aches all over her body along with severe headache. She had some visual problem a week back
- 141.** 85-year-old lady with h/o headache accompanied a few times with vision problem now has a headache
- 142.**

29. Theme: Causes of Renal stones

Options:

- . Multiple myeloma
- . Uric acid
- . Primary hyperthyroidism
- . Secondary Hyperthyroidism
- . Iatrogenic (Drugs)
- .

143. A Female with renal stones, recurrent pancreatitis and hypercalcemia

144. An old aged lady with a long h/o of knee pains is on treatment for it. She presents with stone in the kidney along with loin pain..

145. Male with back

pain hypercalcemia ESR-108-mm

146. A patient with gout with loin pain

30. Theme: Diagnosis of purpuric rashes

Options:

- . ALL
- . Non accidental injury
- . Measles
- . Meningococcal Septicemia
- . Henoch Schönlein Purpura
- . Idiopathic Thrombocytopenic Purpura
- . Hemophilia
- . DIC
- . Acute Glomerulonephritis
- . NAI
- . Pertussis

148. 10-year-old boy developed a purpuric rash over his legs, also has intermittent abdominal & joint pains with proteinuria & diarrhea. Never been immunized and has a past history of allergy.

149. A 2-year-old girl presents with purpuric rash over the body and has a WBC count of 20×10^9 . She has cervical lymphadenopathy and splenomegaly.

150. A 5-year-old boy has purpuric rashes over his body following a URTI. FBC is normal except for very low platelets

151. 8-year-old girl developed bruises all over her body of different ages, also has a circular spot on her hand.

152. 18-year-old boy developed a purpuric rash and fever after moving in a hall of residence. has a past history of vaccination of meningococcal C vaccine.

31. Theme: Vaginal Bleeding

Options:

- . Endometrial polyp.
- . Cervical polyp.
- . CIN.
- . Cervical CA.
- . Endometrial CA.
- . Cervical Ectropion.
- . Atrophic Vaginitis

153. A sexually active lady recently divorced having many sexual partners presents with episodes of post coital bleeding. O/E there is an ulcer at cervix that bleeds on touching

154. A 30-year-old lady on OCPs referred by her GP after he found that she has bleed on touching while taking cervical smear. Cervical smear was normal.

155. A 62-year-old lady presents with post coital bleeding. She had intercourse for the first time after 15 years.

156. A 58 years postmenopausal woman bleeding PV. On trans vaginal USG scan cervix is 15-mm in thickness.

32. Theme: Vaginal Discharge

Options :

- H. Candidiasis Rx*
- H. Trichomoniasis vaginitis Rx*
- H. Gonorrhoea treatment*
- H. Bacterial vaginosis*
- H. Chlamydia*

158. A female patient has greenish vaginal discharge & itching on vulva along with lower abdominal pain

159. A diabetic female has mild lower abdominal pain, since a long time, for which she had antibiotic treatment with not much of a response. She develops vulval swelling and rashes along with cheesy vaginal discharge.

160. Female with vaginal discharge, dysuria and urethritis.

161. A female with low abdominal pain temp of 39°C. Basic investigations done.

33. Theme: Management of miscarriage

Options

- K. Cervical encirclage
- K. Low dose aspirin
- K. Bed rest
- K. Reassurance
- K. Warfarin
- K. Antibiotics
- K. Myomectomy
- K. Heparin
- K. Counseling
- K. Uterine septum removal

- 163-** 26-year old pregnant lady with history of 3 abortions, last one at 18 weeks. Now presents with watery discharge PV at 14 weeks of gestation for regular check up, o/e cervix is 1-cm long & admits one finger.
- 164-** A pregnant lady had past history of premature rupture of membranes at 23 weeks of gestation with infection followed by abortion. What will be your advice?
- 165-** A 23-year-old female with past history of 2 abortions in mid-trimester, she has anti-phospholipid antibody. Now she wants to try for pregnancy again.
- 166-** A female with past history of abortion, no specific cause was found at that time which needed treatment
- 167.** A 38-year-old female with the history of three previous normal pregnancies, followed by 2 abortions O/E uterus distorted with multiple fibroids

34. Theme: Postpartum hemorrhage

Options :

- I Uterine Atony.
- I Large Placental surface.
- I Placenta praevia.
- I Abruptio
- I Uterine Rupture.
- I D I C.
- I Vaginal or Cervix Tears, (Trauma).
- I Endometritis.
- I Retained products of conception.
- I Septic abortion.

- 169.** A 23-year-old female who was delivered by rotational forceps had PPH.
- 170.** A female with abruptio delivered a dead baby
- 171.** A 25-year-old primigravida delivered by induction of labour after 26 hours it is followed by PPH.
- 172.** Secondary bleeding 10 day after normal delivery uterus well involuted
- 173.** A 23-year-old diabetic delivers a baby of 4.8 kgs. Uterus well is normally involuted and retracted but she has PV bleeding post delivery.
- 174.** A 30-year-old female delivers a stillborn baby after 3 days of IUD. This is followed by PPH

35. Theme: Management - weight loss

Options:

- H. PEG*
 - H. NG tube feeding*
 - H. Total Parenteral nutrition*
 - H. Oral sips*
 - H. Gluten free diet*
 - H. Low protein diet with salt restriction*
 - H. Low protein diet with antibiotics*
 - H. High caloric diet*
 - H. Lactose free diet*
- 175.** A 5-year-old girl comes with a history of abdominal pain, steatorrhea, vomiting, poor growth and aphthous ulcers. Jejunal Biopsy shows villous atrophy
- 176.** A 70-year-old heavy alcoholic presents with hepatic encephalopathy, he has jaundice and ascites
- 177.** A 60-year-old patient with long standing Parkinson's disease presents with intractable dysphagia
- 178.** A 68-year-old male patient suffered a hemorrhagic stroke. After 5 days he is offered food, but is found to be still aspirating fluids.
- 179.** A 74-year-old patient who underwent resection of the colon and ileostomy for carcinoma is now in the ITU as he develops septicemia. He has not been eating anything since the past 2 weeks

**36. Theme: Diagnosis
(Acid Base Balance)**

Options:

- J. Metabolic Acidosis.*
 - J. Metabolic Alkalosis.*
 - J. Respiratory Acidosis.*
 - J. Respiratory Alkalosis.*
 - J. Hypokalemia.*
 - J. Renal failure.*
 - J. Dehydration.*
 - J. Fluid Overload.*
- 181.** A 5-year-old child has projectile vomiting due to pyloric stenosis with hypokalemia and base excess
- 182.** A 43-year-old man has profuse watery diarrhea and is dehydrated. He has a villous adenoma of the colon
- 183.** Patient with dry mouth, hiccups, toxic & unable to pass urine
- 184.** A 56-year-old man had general anesthesia now presenting with tachycardia, hypotension and breathlessness and dyspnea.
- 185.** A 46-year-old woman undergoes cholecystectomy under general anesthesia. Post operatively she presents with breathlessness and peripheral edema and crepitations in the lungs.
- 186.** A 45-year-old man presents with pallor, fatigue and has a dry skin and is anuric since the past 3 days

37. Theme: Pain management

Options :

- . Oral NSAIDs
- . IV NSAIDs.
- . IM NSAIDs.
- . IV **bisphosphonate**
- . Beta Blockers.
- . Oral Dexamethasone.
- . Local steroid injection
- . Methotrexate.
- . PCA-Morphine (syringe deliver).
- . Radiotherapy.
- . Nerve blocks.
- . Physiotherapy or exercise training

187. A 70-year-old male, known smoker, presents with small cell bronchial carcinoma with bony metastasis his backache not relieved by simple analgesic and NSAIDs

188. A 45-year-old male has lumbar backache, with pain radiating to the thigh, he undergoes laminectomy and discectomy for a prolapsed intervertebral disc, but has no relief

189. Patient with symmetrical polyarthritis pain does not decrease with simple analgesia.

190. A 24-year-old female has migraine. It is getting worsen and she is taking more time off her work.

191. A 34-year-old pt develops very severe headache followed by neck rigidity & is found to have a SAH

38. Theme: Investigation of poisoning

Options

- . Serum salicylate level
- . Serum iron levels
- . ECG
- . Serum oestradiol levels
- . Reassure
- . Toxicology screen
- . EEG
- . Urea & Electrolytes
- . ABGs
- . Serum Creatinine

192. A 7-year-old girl swallowed some tablets, which her father was taking for treatment of depression, which he is suffering since a long time. She is brought to the A&E and she looks drowsy and ill.

193. A 6-year-old child accidentally swallows five combined oral contraceptive pills and is brought to the A&E

194. A heavily pregnant lady brings her 2 year old son to the A&E in a serious condition. His vomitus is dark brown in colour

195. A 10-year-old is brought to A&E in a comatose condition, his mother is an IV drug abuser. Next step.

196. A 4-year-old child was playing with a bottle of Aspirin tablets and is brought to the A&E by the mother with tachypnoea, vomiting, dehydration and sweating

197. A teenage girl took some of her mom's tablets after a fight with boyfriend now having palpitation

39. Theme - investigations

Options

- I. Doppler flow study*
 - I. Blood Culture*
 - I. Ultrasound*
 - I. CT Scan*
 - I. Lumber puncture*
 - I. Cerebral angiogram*
 - I. Neck vein angiogram*
- 198.** Post cholecystectomy patient of mitral valve disease presents with feature of stroke what investigation to be done
- 199.** A patient has 3 episodes of loss of consciousness with recovery after 2 hours. O/E carotid bruit.
- 200.** A s/s of infective endocarditis
- 201.** A small baby on fundoscopy shows multiple retinal hemorrhages, she is unconscious.

40. Theme: Misc Investigation

Options:

- . *Bone Scan*
 - . *Skeletal survey*
 - . *Blood glucose*
 - . *Thyroid function tests*
 - . *Liver Function Test*
 - . *IVU*
 - . *MSU*
 - . *X-ray KUB*
 - . *Cystoscopy*
 - . *Echocardiography*
 - . *24 hr ECG*
 - . *RAST*
 - . *Blood culture*
- 202.** Boy with history of drinking vodka at party presents with signs symptom of hypoglycemia
- 203.** A lady with Alzheimer's disease. presents in a and e with collapse. next morning demands sherry with morning tea
- 204.** A child has swellings with varied colors on the back of his arm, hand and legs is brought to A&E.
- 205.** A patient has an injury on walking astride and presents with inability to pass urine, has an enlarged abdomen. There is no blood at the tip of penis..
- 206.** A child has difficulty in standing on his leg and has a fractured thigh.
- 207.** A 65-year-old says that he is losing weight despite eating well. On exam. he has an irregular pulse and atrial fibrillation.
- 208.** Investigation of allergic ?

41. Theme: Management of inguino-scrotal swelling

Options:

- H. MSU culture & microscopy
- H. IVU
- H. USG
- H. CT scan abdomen
- H. Urethral swab
- H. X-ray KUB
- H. X-ray abdomen
- H. Urgent surgical exploration

209. A 14-year-old boy presents with unilateral severe pain in the right testis along with vomiting. On examination, the right testis is swollen and tender to palpation.
210. A patient undergoes TURP surgery and presents 5 days latter with bilateral swelling and pain in the testes. He is febrile.
211. Boy testis removed now presents with epigastric mass
212. A patient presents to the A&E on the evening of surgery for right hydrocele, which was tapped. He has a tense scrotal swelling on the right side, the other side is normal.
213. A patient presents with rigors, pyrexia and has a tender and painful epididymis, on palpation. Investigation.

42. Theme: Investigation of neck swelling

Options :

- J. CT scan
- J. X-ray neck
- J. MRI
- J. FNAC
- J. Lymph node biopsy
- J. Chest V-ray
- J. Digital computerized angiography

214. Single nodule in front of neck
215. Swelling moves on protruding the tongue, lies between tongue and the hyoid bone
216. Pulsatile swelling moves from side to side at carotid bifurcation

43. Theme: Mixed ????????

217. Patient with singed eyebrows, soot in the throat and nasal passage, he presented with breathlessness, dyspnea and stridor (***laryngeal edema***)
218. Patient with circumferential burns on his right hand (***escharotomy***)
219. A 4-year-old child with 10% scalds on chest
220. A patient with myeloma has back pain and presents with raised ESR, and proteinuria. He has a distended bladder and is unable to pass urine. He has sensory disturbances in his lower legs. ***Spinal Cord Compression*** ?

44. Theme about -strains and sprains is missing

Answers

1-B	50-B	99-?
2-F/I,	51-B	100-N/E?
3-G,	52-A	101-H
4-E	53-H	102-F/G
5-A	54-?	103-E (<i>a case of strangulated hernia immediate repair</i>)
6-E,	55-D	104-A
7-C/D (<i>most likely autoimmune as acute RH fever but can be infective if endocarditis</i>)	56-E	105-D
8-D,	57-A	106-G
9-B,	58-G <i>not sure this was the only option of infective agent</i>	107-B
10-A/G (<i>dilated cardiomyopathy nutritional due to beriberi or can be neoplastic</i>)	59-G	108-B
11-C	60-F/H	109-J
12-F	61-G	110-E
13-B	62-D	111-D,
14-C/H	63-A	112-J,
15-D	64-A	113-?
16-A,	65-C	114-C <i>as no somatic symptoms,</i>
17-D	66-D	115-M,
18-E	67-B/A	116-L,
19-F	68-A	117-E/N/F,
20-C	69-	118-A
21-?	70-C	119-E/F (Note : <i>Mania or Bipolar disorder options not given</i>)
22-D	71-D	120-A
23-H/J	72-B	121-D
24-G	73-G as a case of ATN	123-D/A
25-F <i>as it is the only choice with cardioversion in it</i>	74-?	124-E
26-?	75-	125-G <i>a case of celiac disease</i>)
27-A (<i>bcoz VSD</i>)	76-	126-K
28-D	77-	127-?
29-C/B	78-B	128-B
30-G	79-G	129-A
31-D	80-A	130-?
32-E	81-C	131-?
33-A	82-E,	132-Vit-C deficiency _?
34-B	83-H	133-G
35-B (cellulitis)	85-G	134-C
36-C	86-?	135-H
37-G	87-D	136-?
38-F/D/E	88-(<i>her it is a scaphoid fracture, so is the answer reassure/cast? since there was no scaphoid cast scaphoid x-ray mentioned</i>)	137-
39-	89-?	138- D (iv lorazepam)
40-	90-A (<i>CT Abdomen as option of u/s abdomen was not there</i>)	139-?
41-E	91-A	140-B/F
42-D	92-D	141-?
43-C	93-C	142-
44-A	94-?	143-C
45-K	95-F/I,	144- E (<i>Ca+ tablets ingestion Iatrogenic</i>)
46-A,	96-A	145-A
47-C,	97-D	146-B
48-E,	98-E	148-E,
49-D,		149-A,
		150-F,

151-B,	166- D,	191-
152-? (Meningitis) <i>this was a tricky one, guys what do u think was the ans.. other options were measles, HSP, ITP, etc which didn't co-relate except meningitis in a closed contact place ,but why give the h/o immunize if it were meningitis? im darn confused.....MAY BE MEASLES</i>	167- G	192-C
153-D	168-	193-D/E
154-F	169-G	194-B
155-G	170-D	195-F
156-E	171-A	196-E
157-	172-I	197-?
158-B	173-B	198-B
159-A	174-?	199-F/G/A carotid artery stenosis
160-C	175-E	200-B
161-E/D (endocervical swab or admit for parenteral antibiotics PID)	176-G (cirrhosis Low Protein Diet + Antibiotic)	201-D
162-	177-A	202-C.
163-A	178-B/C	203-C.
164-C/?	179-C	204-B.
165-B	180-	205-F/I.
	181-B	206-A.
	182-E	207-D.
	183-F	208-L
	184 (pulmonary edema H / C)	209-H
	185-H	210-H
	186-G	211-D
	187-I (as opioids should be avoided coz of respiratory depression syringe deliver morphine)	212-H
	188-K	213-A
	189-A	214-D
	190-E	215-?
		216-E