Test Booklet Series

DO NOT OPEN THIS TEST BOOKLET UNTIL YOU ARE ASKED TO DO SO

T.B.C.: P-DNT-M-THB

TEST BOOKLET

SURGERY, GYNAECOLOGY
AND OBSTETRICS,
PREVENTIVE AND
SOCIAL MEDICINE



Paper II

Time Allowed: Two Hours

Maximum Marks: 250

INSTRUCTIONS

- 1. IMMEDIATELY AFTER THE COMMENCEMENT OF THE EXAMINATION, YOU SHOULD CHECK THAT THIS TEST BOOKLET *DOES NOT* HAVE ANY UNPRINTED OR TORN OR MISSING PAGES OR ITEMS, ETC. IF SO, GET IT REPLACED BY A COMPLETE TEST BOOKLET.
- 2. ENCODE CLEARLY THE TEST BOOKLET SERIES A, B, C OR D AS THE CASE MAY BE IN THE APPROPRIATE PLACE IN THE ANSWER SHEET.
- 3. You have to enter your Roll Number on the Test Booklet in the Box provided alongside. DO NOT write anything else on the Test Booklet.
- 4. This Test Booklet contains 120 items (questions). Each item comprises four responses (answers). You will select the response which you want to mark on the Answer Sheet. In case you feel that there is more than one correct response, mark the response which you consider the best. In any case, choose ONLY ONE response for each item.
- 5. You have to mark all your responses *ONLY* on the separate Answer Sheet provided. See directions in the Answer Sheet.
- 6. All items carry equal marks.
- 7. Before you proceed to mark in the Answer Sheet the response to various items in the Test Booklet, you have to fill in some particulars in the Answer Sheet as per instructions sent to you with your Admission Certificate.
- 8. After you have completed filling in all your responses on the Answer Sheet and the examination has concluded, you should hand over to the Invigilator *only the Answer Sheet*. You are permitted to take away with you the Test Booklet.
- 9. Sheets for rough work are appended in the Test Booklet at the end.
- 10. Penalty for wrong answers:

THERE WILL BE PENALTY FOR WRONG ANSWERS MARKED BY A CANDIDATE IN THE OBJECTIVE TYPE QUESTION PAPERS.

- (i) There are four alternatives for the answer to every question. For each question for which a wrong answer has been given by the candidate, one-third (0.33) of the marks assigned to that question will be deducted as penalty.
- (ii) If a candidate gives more than one answer, it will be treated as a wrong answer even if one of the given answers happens to be correct and there will be same penalty as above to that question.
- (iii) If a question is left blank i.e., no answer is given by the candidate, there will be **no penalty** for that question.

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- 1. The term "debridement of the wound" refers to
 - (a) Clean excision of at least 1 mm of skin from the edge of the wound
 - (b) The irrigation and cleaning of the wound
 - (c) Laying open all layers of the wound and excision of the devitalized tissue
 - (d) Closure of wound in layers
- 2. Which of the following statements is true regarding wound contracture?
 - (a) It is a primary process affecting the closure of sutured wounds
 - (b) Bacterial colonization of a wound slows the process of contraction
 - (c) It is the function of specialised fibroblasts that contain actin myofilaments
 - (d) It may account for a maximum of 40% decrease in the size of a wound
- 3. Consider the following statements:

HIV can be transmitted to a healthcare worker from a patient through:

- 1. A needle stick injury
- 2. Contact with the patient's blood
- 3. External examination of the patient
- 4. Inhalation

Which of the statements given above is/are correct?

- (a) 1 and 4
- (b) 1 and 2 only
- (c) 1, 2 and 3
- (d) 2 and 3 only

- 4. The scolicidal agents used in the surgery of a hydatid cyst include all of the following except
 - (a) 0.5% silver nitrate
 - (b) 20% (hypertonic) saline
 - (c) 15% gluteraldehyde
 - (d) Absolute alcohol
- 5. Which one of the following is an example of a chemodectoma?
 - (a) Cock's peculiar tumour
 - (b) Cystosarcoma phylloides
 - (c) Carotid body tumour
 - (d) Keratoacanthoma
- 6. Which of the following statements is true about antibiotic therapy?
 - (a) It has its greatest effect on multiplying organisms
 - (b) It enhances the uptake of organisms by phagocytes
 - (c) It enhances the intracellular killing of organisms by phagocytes
 - '(d) It facilitates killing of organisms by activation of complements
- 7. The commonest cause of primary hyperparathyroidism is
 - (a) Idiopathic parathyroid hyperplasia
 - (b) Familial hyperparathyroidism
 - (c) Parathyroid adenoma
 - (d) Primary parathyroid carcinoma



- 8. The central venous pressure (CVP) is low in .
 - (a) Pericardial effusion
 - (b) Massive pulmonary embolism
 - (c) Acute left ventricular failure
 - (d) Tension pneumothorax
- 9. In a 30-year-old male smoker, the commonest cause of dry gangrene of foot will be
 - (a) Buerger's disease
 - (b) Atherosclerosis
 - (c) Diabetes mellitus
 - (d) Embolism
- 10. The following are the indications for carrying out a sympathectomy except
 - (a) Hyperhydrosis
 - (b) Venous ulcer of leg
 - (c) Causalgia
 - (d) Raynaud's disease
- 11. In which one of the following is Branham's sign positive?
 - (a) Arterial stenosis
 - (b) Arterial aneurysm
 - (c) Deep vein thrombosis
 - (d) Arteriovenous fistula
- 12. The structures removed in radical neck dissection include
 - 1. Sternomastoid muscle
 - 2. Submandibular gland
 - 3. Internal jugular vein
 - 4. Recurrent laryngeal nerve

- (a) 1, 2 and 3 only
- (b) 1 and 3 only
- (c) 2 and 4 only
- (d) 1, 2, 3 and 4
- 13. Which of the following breast cancers is most often bilateral?
 - (a) Medullary carcinoma of the breast
 - (b) Lobular carcinoma of the breast
 - (c) Colloid carcinoma of the breast
 - (d) Ductal carcinoma of the breast
- 14. The inflammatory breast carcinoma is staged as
 - (a) T_4 a
 - (b) T_4b
 - (c) $T_{A}c$
 - (d) T₄d
- 15. All of the following organisms are involved in post-splenectomy sepsis except
 - (a) Streptococcus pneumoniae
 - (b) Neisseria meningitides
 - (c) Haemophilus influenzae
 - (d) Staphylococcus aureus
- **16.** Splenectomy is indicated in all of the following conditions, *except*
 - (a) Hereditary spherocytosis
 - (b) Idiopathic thrombocytopenic purpura
 - (c) Myelofibrosis
 - (d) Hydatid cyst of the spleen



- 17. Which one of the following statements is true regarding "injection-sclerotherapy" for haemorrhoids?
 - (a) Sclerotherapy is the ideal treatment for acute external haemorrhoids
 - (b) In patients with haemorrhoids at 3 o'clock, 7 o'clock and 11 o'clock positions, the injection is made in the sitting position
 - (c) Sclerotherapy is the treatment of choice for the prolapsed haemorrhoids
 - (d) Injection of sclerosant is made above the dentate line (pectinate line)
- 18. Which one of the following nerves is vulnerable to injury while conducting an appendicectomy through the McBurney's incision?
 - (a) Subcostal nerve
 - (b) Genitofemoral nerve
 - (c) Ilio-inguinal nerve
 - (d) Lateral cutaneous nerve of the thigh
- 19. The pancreas is supplied by all of the following arteries except
 - (a) Left gastric
 - (b) Common hepatic
 - (c) Splenic
 - (d) Superior mesenteric
- 20. The Ranson prognostic criteria used at the time of admission in acute pancreatitis include all of the following *except*
 - (a) Age more than 55 years
 - (b) Blood glucose more than 200 mg/

- (c) WBC count more than 16,000/mm³
- (d) Serum calcium < 2.0 mmol/L
- 21. A truck driver hit his chest against the steering wheel and sustained multiple rib fractures. His vitals are stable; however, the injured side of the chest shows paradoxical movement. The chest X-ray shows no evidence of haemothorax or pneumothorax but there is a large pulmonary contusion. The most appropriate treatment will be
 - (a) Tracheostomy, mechanical ventilation and positive end-expiratory pressure ventilation
 - (b) Stabilisation of fractured ribs with towel clips
 - (c) Immediate operative stabilisation
 - (d) Insertion of an intrathoracic drain
- 22. What is the most appropriate surgical procedure for a "duodenal atresia"?
 - (a) Gastroduodenostomy
 - (b) Duodenoduodenostomy
 - (c) Duodenojejunostomy
 - (d) Ramstedt's operation
- 23. All of the following signs are considered in Alvarado score for acute appendicitis except
 - (a) Elevated temperature
 - (b) Right iliac fossa tenderness
 - (c) Rebound tenderness
 - (d) Rectal tenderness



- 24. A 30-year-old patient developed haematuria following a blunt injury to the abdomen. The patient is haemodynamically stable. However, the ultrasonographic examination reveals a perirenal collection which measures 4×4 cm. The patient is best managed by
 - (a) Immediate laparotomy and repair of the renal injury
 - (b) Renal angiography and embolisation of the bleeding vessel
 - (c) Percutaneous nephrostomy and drainage of the haematoma
 - (d) Nonoperative management
- 25. An inhalation injury may result in which of the following?
 - 1. Thermal burn to the upper airway
 - 2. Thermal burn to the bronchial tree and lungs
 - 3. Chemical burn to the bronchial tree
 - 4. Chemical burn to the lungs

- (a) 1 and 2
- (b) 2 and 3 only
- (c) 1, 3 and 4
- (d) 2, 3 and 4
- **26.** Avascular necrosis may develop in the following fractures *except*
 - (a) Fracture of the scaphoid
 - (b) Subcapital fracture of the femoral neck
 - (c) Fracture of the calcaneum
 - (d) Fracture of the talus

- 27. The "carpal tunnel syndrome" occurs due to the compression of
 - (a) Median nerve
 - (b) Ulnar nerve
 - (c) Radial nerve
 - (d) Radial artery
- 28. Inhaled foreign bodies are more likely to enter the right main bronchus than left because
 - (a) the right main bronchus is longer, wider and horizontal
 - (b) the right main bronchus is shorter, wider and nearly vertical
 - (c) the right main bronchus is shorter, narrower and horizontal
 - (d) the right main bronchus is shorter, posterior and horizontal
- 29. A patient is diagnosed to have a Stage T3a carcinoma of the prostate. Clinically, this implies
 - (a) Involvement of both the lobes but the disease is limited to within the prostatic capsule
 - (b) Involvement of both the lobes but the disease has extended through the prostatic capsule
 - (c) Involvement of the seminal vesicles
 - (d) Involvement of the pelvic wall
- 30. Which one of the following statements regarding seminoma testis is correct?
 - (a) 'It is the most common type of testicular cancer
 - (b) It frequently metastasizes to the liver and bones
 - (c) It does not respond to radiation
 - (d) Its five-year survival rates approach 50 per cent



- **31.** The most typical clinical presentation of a retinoblastoma is
 - (a) Severe pain in the eye
 - (b) Loss of vision
 - (c) White reflex in pupil
 - (d) Proptosis
- 32. The normal range of intraocular pressure (in mmHg) is
 - (a) 5-15
 - (b) 10-20
 - (c) 15-25
 - (d) 20-30
- 33. The treatment of choice for a mastoid fracture with facial nerve paralysis is
 - (a) Nerve decompression
 - (b) Steroid therapy
 - (c) Sling operation
 - (d) Mastoidectomy with nerve grafting
- **34.** Which one of the following conditions produces sensorineural deafness?
 - (a) Eustachian tube blockage
 - (b) Tympanic membrane rupture
 - (c) Mixed otosclerosis
 - (d) Atelactatic middle ear
- 35. Which is the most common laryngeal abnormality that produces laryngeal strider in a newborn?
 - (a) Congenital subglottic stenosis
 - (b) Congenital web
 - (c) Congenital vocal cord paralysis
 - (d) Laryngomalacia

- 36. A fracture of the middle cranial fossa may result in an injury of the
 - (a) Sixth cranial nerve
 - (b) Eighth cranial nerve
 - (c) Tenth cranial nerve
 - (d) Eleventh cranial nerve
- **37.** A meningomyelocoele is most commonly situated in the
 - (a) Cervical spine
 - (b) Thoracic spine
 - (c) Dorsolumbar spine
 - (d) Lumbosacral spine
- 38. A pulmonary artery (Swan-Ganz) catheter measures all of the following except
 - (a) Cardiac output (CO)
 - (b) Pulmonary artery wedge pressure (PAWP)
 - (c) Mixed venous oxygen saturation (Svo₂)
 - (d) Left ventricular end diastolic volume (LVEDV)
- 39. Which of the following local anaesthetics causes irreversible cardiac arrest if it is given intravenously?
 - (a) Bupivacaine
 - (b) Lignocaine
 - (c) Cocaine
 - (d) Prilocaine



- **40.** Blood stored in the blood bank is deficient in which of the following coagulation factors?
 - (a) Factor II only
 - (b) Factors II and VII
 - (c) Factors V and VIII
 - (d) Factors IX and X
- **41.** Consider the following statements regarding HCG:
 - 1. HCG is a glycoprotein with two subunits α and β .
 - 2. HCG levels reach the maximum between the 60th and 70th day in a normal pregnancy.
 - 3. HCG is secreted by the cytotrophoblasts of the chorionic villi.

Which of the statements given above is/are correct?

- (a) 1, 2 and 3
- (b) 1 and 2 only
- (c) 2 and 3 only
- (d) 1 and 3 only
- 42. Which one of the following statements is **not** correct regarding the haemodynamic changes occurring during a pregnancy?
 - (a) The cardiac output is increased
 - (b) The stroke volume is increased
 - (c) The systemic vascular resistance is increased
 - (d) The serum colloid pressure is decreased
- **43.** The perinatal HIV transmission can be reduced by the following measures *except*
 - (a) Intrapartum anti-retroviral therapy
 - (b) Delivery by elective caesarean section

- (c) Anti-retroviral therapy to the
- (d) Breast-feeding
- 44. A multiparous patient has been diagnosed to have foetal demise on a sonographic examination at 16 weeks of pregnancy. The ideal method for termination is
 - (a) Suction curettage
 - (b) Hysterotomy with tubectomy
 - (c) Extra-amniotic ethacridine
 - (d) High vaginal insertion of dinoprostone gel
- 45. A 30-year-old third gravida, who has a 3-year-old child and had undergone a MTP one year ago, has presented with 30-weeks pregnancy. She complains of having had vaginal bleeding 2 hours ago. She has not received any antenatal care. On examination, her pulse is 78 beats per minute, and the BP is 102/58 mmHg. She has moderate pallor, her abdomen is soft, and the foetal heart rate is 130 beats per minute. The most appropriate management will be
 - 1. Ultrasonographic evaluation
 - 2. Watch for labour
 - 3. Hospitalisation and bed rest
 - 4. Speculum examination of vagina and cervix
 - 5. I. V. fluid drip

Select the appropriate treatment using the code given below:

- (a) 1 and 2
- (b) 1, 3 and 5
- (c) 3, 4 and 5
- (d) 2, 3 and 4.

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- 46. A 35-year-old woman presents with complaints of profuse vaginal bleeding. She also has a history of abortion 4 months ago. On examination, the uterus is soft and bulky, both ovaries are enlarged and cystic, and the pregnancy test is positive. The probable diagnosis is
 - (a) Incomplete abortion
 - (b) Malignant ovarian tumour
 - (c) Persistent trophoblastic disease
 - (d) Dysfunctional uterine bleeding
- 47. An elderly gravida with 36-weeks pregnancy presents with severe pregnancy induced hypertension (PIH), severe abdominal pain, per vaginal bleeding and loss of foetal movements. The diagnosis is
 - (a) Placenta praevia
 - (b) Abruptio placenta
 - (c) Rupture of uterus
 - (d) Vasa praevia
- 48. A young female patient presents with a history of two months amenorrhoea and complaints of severe lower abdominal pain, syncopal attacks and minimal per vaginal bleeding. On examination, she has tachycardia and appears pale. The clinical diagnosis is
 - (a) Ectopic pregnancy
 - (b) Molar pregnancy
 - (c) Inevitable abortion
 - (d) Missed abortion

- 49. A 30-year-old woman with history of previous three abortions has been found to have anti-phospholipid antibodies. What will be the treatment of choice in the subsequent pregnancy?
 - (a) Corticosteroids
 - (b) Aspirin
 - (c) Heparin
 - (d) Aspirin and Heparin
- 50. In the rhesus-negative mothers, the factors which influence the development of rhesus incompatibility include all except
 - (a) Amniocentesis
 - (b) Placental abruption
 - (c) Incoordinate uterine action
 - (d) Abortions
- 51. The anticonvulsant of choice in the treatment of seizures in eclampsia is
 - (a) Magnesium sulphate
 - (b) Diazepam
 - (c) Phenytoin
 - (d) Phenobarbitone
- 52. A vaginal examination conducted during the second stage of labour reveals occipito-posterior position of the vertex. This occipito-posterior position of the vertex was diagnosed on the basis of which of the following findings?
 - (a) Anterior fontanelle not reached
 - (b) Posterior fontanelle in the subpubic
 - (c) Sagittal suture in transverse in the pelvic cavity
 - (d) Posterior fontanelle is anterior to the maternal sacrum with the sagittal suture anteroposterior



- 53. A 35-year-old multiparous woman is admitted with prolonged labour. She is in shock, and her pulse rate is 150 per minute. The uterus is tonically contracted with Bandl's ring, and the presenting part is not engaged. The appropriate treatment is
 - (a) Augment labour with oxytocin
 - (b) Deliver the baby by vaginal route using a vacuum extractor
 - (c) Perform LSCS (Lower Segment Caesarean Section)
 - (d) Do internal podalic version and extraction
 - 54. A second gravida, whose first baby is alive, has been in the second stage of labour for more than one hour. On examination, her cervix is fully dilated. The pelvis is adequate and the station of the vertex is +2. The occiput is in right, occipitoposterior position and the foetal heart is 120/min. The mother is exhausted. She should be delivered by
 - (a) Forceps application
 - (b) Vacuum extraction
 - (c) Wait and watch policy
 - (d) Caesarean section
 - **55.** Before the delivery of the second twin having cephalic presentation, the mother develops profuse bleeding per vaginum. The appropriate management will be
 - (a) Deliver the placenta of the first twin
 - (b) ARM
 - (c) External cephalic version and oxytocin drip
 - (d) Internal podalic version and breech extraction

- 56. A 34-week multiparous gravida comes in labour. On examination, the cervix is fully dilated, the head is at +2 station and the foetal heart rate is 172/min. The appropriate management will be
 - (a) Immediate LSCS (Lower Segment Caesarean Section)
 - (b) Apply ventouse and deliver
 - (c) Wait and watch
 - (d) Apply forceps and deliver
- 57. A 25-year-old primigravida at term is in early labour with vertex presentation in left occipitoanterior position. The head is floating. Her diagonal conjugate measures 11 cm. The appropriate management will be
 - (a) Deliver vaginally at home
 - (b) Give her a trial of labour
 - (c) Deliver by emergency caesarean section
 - (d) Administer oxytocin drip to induce more powerful contractions .
- 58. The following are the predisposing factors for postpartum uterine, atony except
 - (a) Pre-eclampsia
 - (b) Oxytocin induced labour
 - (c) Hydramnios
 - (d) Multiple pregnancy
- 59. A multiparous woman presenting with postpartum haemorrhage due to placenta increta is best managed by
 - (a) Hysterotomy with the removal of the adherent placenta
 - (b) Internal iliac artery ligation
 - (c) Hysterectomy
 - (d) Packing the uterus followed by a course of methotrexate



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- 60. On examination, a woman with postdated pregnancy is found to have 80% effaced cervix. She requires the induction of labour. This is best done through
 - (a) Oxytocin drip
 - (b) Intracervical dinoprostone gel
 - (c) ARM with oxytocin drip
 - (d) Carboprost tromethamin intramuscularly
- 61. Which of the following foetal diameters measure 9.4 cm at term?
 - 1. Biparietal diameter
 - 2. Suboccipitofrontal diameter
 - 3. Submentobregmatic diameter
 - 4. Bitrochanteric diameter

- (a) 1 and 2 only
- (b) 1 and 3 only
- (c) 2 and 4 only
- (d) 1, 2, 3 and 4
- 62. A multiparous woman delivered by a village dai (midwife) presents on the 22nd postnatal day with bleeding per vaginum with clots. On examination, the uterus is 14-16 weeks, the internal os is open, and there is bleeding through the os. The likely cause of this bleeding is
 - (a) Excessive postnatal physical work
 - (b) Perineal tears
 - (c) Retained bits of placenta and membranes
 - (d) None of the above

- 63. The incidence of the congenital foetal anomalies is highest when a pregnancy is complicated by
 - (a) Hydramnios detectable on clinical examination
 - (b) Intrauterine growth retardation of the foetus
 - (c) Maternal diabetes
 - (d) Congenital heart disease of the mother
- 64. A parous woman notices a bulge at the vulva that diminishes in size following micturition. She also finds it difficult to initiate micturition. What is the likely diagnosis?
 - (a) Uterine prolapse
 - (b) Fibroid polyp
 - (c) Cystocoele
 - (d) Congenital elongation of cervix
- 65. A 30-year-old woman presents with three-month amenorrhoea, pain abdomen for the last two days and fainting attacks for the last eight hours. On examination, her pulse rate is 102/min, the systolic BP is 90 mmHg, and she has (1+) pallor. On abdominal palpation, she has tenderness. She is provisionally diagnosed with ectopic pregnancy. The most likely site of implantation within the fallopian tube is in the
 - (a) Ampullary region of the tube
 - (b) Isthmic region of the tube
 - (c) Interstitial region of the tube
 - (d) Infundibular region of the tube



- 66. An 18-year-old girl presents with primary amenorrhoea and gives a history of cyclical colicky abdominal pain. The most probable diagnosis is
 - (a) Ovarian cyst
 - (b) Encysted tuberculosis
 - (c) Full bladder
 - (d) Haematocolpos
- 67. A 20-year-old married woman anxious to get pregnant has cyclical cramps and sharp lower abdominal pain which lasts for 3 days starting from the day of her menstrual flow. Her menstrual periods are regular but heavy. On clinical examination, her pelvis is normal. The most probable diagnosis is
 - (a) Uterine leiomyomata
 - (b) Endometriosis
 - (c) Primary dysmenorrhoea
 - (d) Adenomyosis
- 68. Which one of the following statements regarding functional epimenorrhoea is **not** correct?
 - (a) It is a cyclic bleeding
 - (b) The cycle is reduced to an arbitrary limit of 21 days or less
 - (c) It is seen more frequently at the ends of reproductive life
 - (d) If epimenorrhoea is associated with heavy menstrual loss it is called menometrorrhagia
- 69. In a patient of dysfunctional uterine bleeding with cyclical menorrhagia, the first line drug is
 - (a) Tranexamic acid
 - (b) Progesterone
 - (c) Oestrogen
 - (d) Oestrogen and progesterone

- 70. The pelvic examination of a woman reveals that the cervix is directed forwards, the body is backward, but it can be anteposed easily. The examination does not demonstrate any other abnormality. The most probable diagnosis is
 - (a) Posterior wall tumour of the uterus
 - (b) An ovarian cyst in the pouch of Douglas
 - (c) Pelvic endometriosis
 - (d) Retroverted uterus
- 71. A 20-year-old young woman, who was delivered two months ago at home by a nurse, presents with a complaint of something protruding through the vulva. The clinical examination reveals a cystocoele, rectocoele, and the cervix 1 cm above the introitus. The most appropriate management will be
 - (a) Anterior colporrhaphy, posterior colpoperineorrhaphy and perineal repair
 - (b) Fothergill's operation
 - (c) Pessary
 - (d) Sling operation
- **72.** Consider the following:

Which of the following are the features of backache due to genital prolapse?

- 1. The pain is experienced on getting up in the morning.
- 2. The patient complains of a diffuse pain over the sacrum.
- 3. There is no local tenderness.
- 4. The pain occurs more commonly among multiparous than nulliparous women.

- (a) 1 and 4
- (b) 1 and 2 only
- (c) 1, 2 and 3
- (d) 2, 3 and 4



- 73. A woman who is being investigated for infertility is diagnosed to have a nulliparous prolapse of the uterus. The most appropriate management will be
 - (a) Ring pessary
 - (b) Fothergill repair
 - (c) Sling operation
 - (d) Cervical amputation
- 74. Which of the following is *not* an outcome of gonococcal salpingitis?
 - (a) Multiple tubal blocks
 - (b) Hydrosalpinx
 - (c) Salpingitis isthmica nodosa
 - (d) Ectopic pregnancy
- 75. A parous woman complains of itching in the vulva. On examination, there is local redness and swelling and white flakes around the introitus. The most probable diagnosis is
 - (a) Gonorrhoea
 - (b) Trichomoniasis
 - (c) Candidiasis
 - (d) Pyogenic vulvovaginitis
- 76. A recently married woman presents with dysuria and increased urinary frequency of two-days duration. On physical examination, her body temperature is 38°C and her vital signs are normal. Her gynaecologic examination does not reveal any vaginal discharge, vaginitis or cervicitis. Her urine analysis reveals 14 WBC per high power field and many gram negative rods. Which of the following is the most appropriate pharmacotherapy?

- (a) Ampicillin
- (b) Ceftriaxone
- (c) Fluconozole
- (d) Metronidazole
- 77. The characteristic features of inguinal lymph nodes associated with a primary syphilitic lesion of the vulva are
 - (a) Painful, tender nodes which become matted together to form an abscess
 - (b) Firm, shotty, painless nodes that do not suppurate
 - (c) Non-suppurative tender enlarged nodes
 - (d) Painful inflamed nodes which undergo necrosis and develop a chronic sinus
- 78. The common manifestations of genital tuberculosis include the following except
 - (a) Infertility
 - (b) Foul-smelling vaginal discharge
 - (c) Pelvic pain
 - (d) Amenorrhoea
- 79. A 60-year-old woman is diagnosed with genital malignancy. On physical examination she is found to have the enlargement of superficial inguinal lymph nodes. The most likely organ involved is
 - (a) Uterus
 - (b) Cervix
 - (c) Vulva
 - (d) Adnexa

- **80.** The drugs which may interfere with the efficacy of oral contraceptives and increase the failure rates are the following *except*
 - (a) Barbiturates
 - (b) Rifampicin
 - (c) Ampicillin
 - (d) Sulphonamides
- 81. Consider the following statements:
 - 1. Diets high in vitamin C have been claimed to lower the incidence of certain cancers, particularly oesophageal and gastric cancers.
 - 2. Vitamin C can prevent the conversion of nitrites and secondary amines to carcinogenic nitrosamines

Which of the statements given above is/are correct?

- (a) 1 only
- (b) 2 only
- (c) Both 1 and 2
- (d) Neither 1 nor 2
- 82. Iron is absorbed predominantly in the
 - (a) Stomach
 - (b) Jejunum
 - (c) Ileum
 - (d) Colon
- 83. The biological value of a given protein depends upon
 - (a) Digestibility and leucine content
 - (b) Digestibility and amino acid composition

- (c) Amino acid composition alone
- (d) Amino acid composition and specific dynamic effect
- 84. The most common opportunistic infection observed in patients with AIDS is
 - (a) Atypical mycobacteria
 - (b) Haemophilus influenzae
 - (c) Pseudomonas aeruginosa
 - (d) Pneumocystis carinii
- 85. What is the recommendation for use of Levonorgestrel for the purpose of emergency contraception?
 - (a) One tablet of 0.75 mg Levonorgestrel to be taken soon after the act of unprotected coitus but within 120 hours
 - (b) One tablet of 0.75 mg Levonorgestrel to be taken soon after the act of unprotected coitus but within 72 hours
 - (c) Two tablets of 0.75 mg Levonorgestrel to be taken soon after the act of unprotected coitus but within 96 hours
 - (d) None of the above
- 86. Which one of the following vitamins given as a supplement during the periconceptional period to a woman can help prevent the neutral tube defects in the baby?
 - (a) Thiamine
 - (b) Riboflavin
 - (c) Vitamin B₁₂
 - (d) Folic acid

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87. Match List I with List II and select the correct answer using the code given below the Lists:

List I (Vitamins)	List II (Clinical signs)
A. Thiamine	1. Dermatitis
B. Niacin	2. Bitot's spots
C. Retinol	3. Cardiac failure
D. Cholecalciferol	4. Triradiate pelvis
Code:	

	Α	В	C	D
(a)	1	4	2	3
(b)	4	2	1	3
(c)	3	2	1	4
(d)	3	1	2	4

- **88.** Which of the following conditions may produce "wrist drop"?
 - (a) Lead poisoning
 - (b) Diabetes mellitus
 - (c) Alcoholics
 - (d) Beriberi
- 89. The most common hospital-acquired (nosocomial) infection is
 - (a) Urinary tract infection
 - (b) Pneumonia
 - (c) Surgical wound infection
 - (d) Bacteraemia

90. Match List I with List II and select the correct answer using the code given below the Lists:

List I (Measuring instrument)	List II (Function/ measures)
A. Kata thermometer	Mean radiant temperature
B. Globe thermometer	2. High air velocity
C. Anemometer D. Sling	3. Relative humidity
Psychrometer	4. Low air velocity

Code:

	A	В	C	D	
(a)		1	2	3	
(b)	4	2	1	3	
(c)	3	1	2	4	
(d)	3	2	1	4	

- **91.** The pathogenic organism responsible for the causation of Donovaniasis is
 - (a) Chlamydia trachomatis
 - (b) Calymmatobacterium granulomatis
 - (c) Haemophilus ducreyi
 - (d) Herpes simplex virus
- 92. A Health Assistant (Male) covers a population of
 - (a) 1,000
 - (b) 5,000
 - (c) 30,000
 - (d) 1,00,000

- 93. Case Fatality Rate of a disease is a measure of its
 - (a) Infectivity
 - (b) Endemicity
 - (c) Virulence
 - (d) Chronicity
- 94. The incubation period of mumps is
 - (a) 1-2 weeks
 - (b) 2-3 weeks
 - (c) 3-4 weeks
 - (d) 4-5 weeks
- 95. Cluster testing is used in the detection of
 - (a) STD
 - (b) Diabetes
 - (c) Measles
 - (d) Cancer
- 96. Among the following, the best indicator for acute malnutrition in the under-fives is
 - (a) Mid arm circumference
 - (b) Head/chest circumference ratio
 - (c) Weight for height
 - (d) Height for age
- 97. In infants and toddlers, craniotabes is a sign related to the deficiency of
 - (a) Vitamin A
 - (b) Vitamin C
 - (c) Vitamin D
 - (d) Vitamin K

- 98. An average-sized hen egg would provide
 - (a) 50 Kcal
 - (b) 70 Kcal
 - (c) 90 Kcal
 - (d) 110 Kcal
- 99. Specialists that should be available at a Community Health Centre include, *inter alia*, those in
 - 1. Paediatrics
 - 2. Obstetrics and Gynaecology
 - 3. Dermatology and Venereology
 - 4. Surgery

- (a) 1, 2 and 3
- (b) 1, 2 and 4
- (c) 2, 3 and 4
- (d) 1, 3 and 4
- 100. In a normal curve, how much per cent of the values will be included in the area between two standard deviations on either side of the mean $(X \pm 2 \sigma)$?
 - (a) 68.3
 - (b) 90·4
 - (c) 95·4
 - (d) 99·7



101.		The minimum accepted interval between two doses of D.P.T. is 105. Match List correct an					er u		II and	l sele	
	(a)	4 weeks		below the Lists:							
	()	•		List I (Committee)			List II (Recommendations))	
	(b)	6 weeks					•	-			ons)
	(c)	8 weeks	•		Bhor Mud		•		Devel referra compl	al ser	vices
	(d)	10 weeks		D . 1	WIUU.	anai			_		of
102	The	ability of a test to identify correctly		Ċ. I	Karta	ar Sing	gh		Streng distric	t hos	pitals
102.	those who do not have the disease is called its			D. Srivastava				3. Replace ANM with female health workers			
	(a)	Sensitivity						4.	Three trainir	mon	ths'
	(b)	Specificity							for do	ctors	
		The state of the s		Cod	le :						
	(C)	Positive predictive value				Α	В	C	D		
	(d)	Negative predictive value			(a)	4	3	2	1		
					(b)	le	2	3	4		
103.		ch of the following is a live attenua-			(c)	4	2	3	1		
	tea	vaccine ?		((d)	1	3	2	4		
	(a)	Hepatitis B Vaccine 100				ist I					
	(b)	Japanese Encephalitis Vaccine				answe he Lis		sing	the c	ode	given
	. ,	U.O.		OCIC	Lis				I i	st II	
	(c)	Yellow Fever Vaccine		(Дізі. Туре					sease	
	(d)	Salk Vaccine		_	Vect	•			trans		<i>l</i>)
	` ,			A. 1	Lice			1. K	Cyasan	ur Fo	prest
104.	The	Relative Risk of a disease measures		TD 1	Fleas	,			Disease		
	the			J. 1	ricas	•			Indem	ic Ty	phus
	(a) Strength of association between suspected cause and effect			C. Ticks D. Sand Flea			fever				
								3. Epidemic Typhus fever			
	(b)	Biological plausibility between						4. K	Kala-az	zar	
	. ,	suspected cause and effect		Coa	le :						
	(0)	There are bounded as the state of the state				Α	В	C	D		
	(c)	Temporal relationship between		((a)	3	1	2	4		
		suspected cause and effect		((b)	1	2	4	3		
	(d)	Specificity of association between		((c)	1	2	3	4		
		suspected cause and effect		((d)	3	2	1	4		

(d) 3

- 107. Relapsing fever is transmitted by
 - (a) Hard tick
 - (b) Sand fly
 - (c) Soft tick
 - (d) Tsetse fly
- 108. In Japanese Encephalitis, which of the basic cycles of transmission mentioned below is *not* true?
 - (a) Pig mosquito pig
 - (b) Cattle mosquito cattle
 - (c) Man mosquito man
 - (d) Bird mosquito bird
- 109. Which one of the following is a polyunsaturated fatty acid?
 - (a) Palmitic acid
 - (b) Stearic acid
 - (c) Oleic acid
 - (d) Linoleic acid
- 110. Which of the following dietary source contains the lowest per cent of Linoleic acid?
 - (a) Coconut oil
 - (b) Mustard oil
 - (c) Groundnut oil
 - (d) Corn oil
- 111. Match List I with List II and select the correct answer using the code given below the Lists:

List I
(Epidemiological terms used with disease agents)

A. Infectivity

- B: Pathogenecity
- C. Virulence
- D. Communicability

- List II
 (Meaning of the term)
- 1. Ability to induce clinical signs/symptoms
- 2. Ability to cause sever clinical manifestations
- 3. Ability to invade and multiply in a host
- 4. Capacity/extent of transmission from host to host

Code:

;	Α	В	C	D
(a)	4	O 2	3	1
(b)	3	2	1	4
(c)	4	3	2	1
. (d)	3	1	2	4

- 112. Which of the following is a non-modifiable risk factor for coronary heart disease?
 - (a) Cigarette smoking
 - (b) Elevated serum cholesterol
 - (c) Alcoholism
 - (d) Age
- 113. The detection of sore throat cases in children and their treatment with Benzathine Penicillin in Community Control Programme of Rheumatic Fever/Rheumatic Heart Disease (RF/RHD) constitutes
 - (a) Primordial prevention of RF/RHD
 - (b) Primary prevention of RF/RHD
 - (c) Secondary prevention of RF/RHD
 - (d) Tertiary prevention of RF/RHD



- 114. Which one of the following is a stomach poison for the larvae of insects of medical importance?
 - (a) D.D.T.
 - (b) Paris Green
 - (c) Pyrethrum
 - (d) Anti larva oil
- 115. In a village, every fifth house was selected for a study. This is an example of
 - (a) Simple random sampling
 - (b) Systematic random sampling
 - (c) Stratified random sampling
 - (d) Convenience sampling
- 116. In disability rates, event type indicators are the following except
 - (a) Number of days of restricted activity
 - (b) Limitation of activity
 - (c) Bed disability days
 - (d) Work loss days
- 117. A 9-month-old infant is brought to you The infant has for immunization. previously received the first dose of OPV and DPT. What will you do?
 - (a) Repeat the first dose counting afresh
 - (b) Give the infant DT/OPV
 - (c) Give the infant second dose of DPT/OPV
 - (d) Give the infant a booster dose of DPT/Polio
- 118. Which of the following regimens is recommended for multibacillary leprosy in children 10-14 years of age?

- (a) Rifampicin 450 mg once a month (under supervision) + Dapsone 50 mg daily (self administered) + Clofazimine 150 mg once a month (under supervision) and 50 mg every alternate day
- (b) Rifampicin 600 mg once a month (under supervision) + Dapsone 100 mg daily (self administered) + Clofazimine 50 mg once a month (under supervision) and 25 mg every alternate day
- (c) Rifampicin 450 mg once a month (under supervision) + Dapsone 50 mg daily (self administered)
- (d) Rifampicin 600 mg once a month (under supervision) + Dapsone 50 mg daily (self administered).
- 119. A randomized trial comparing the efficacy of two drugs showed a difference between the two (p value < 0.05). However, in reality the two drugs do not differ. This is an example of
 - (a) Type I error
 - (b) Type II error
 - (c) Both type I and II error
 - (d) Random error
- 120. Which one of the following formulae is used for computing the Aedes aegypti Index at International Airports and sea ports?
 - Number of bites of Aedes aegypti (a) Total number of man hours

Number of houses positive for Aedes aegypti breeding

(b) Total number of houses

Number of containers positive for Aedes aegypti breeding

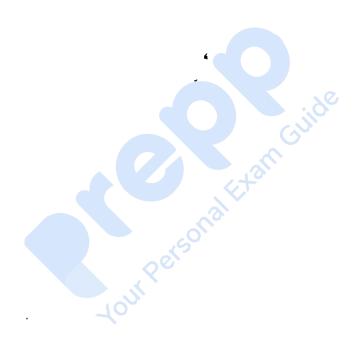
 $\times 100$ (c) Total number of containers

Number of containers positive for Aedes aegypti breeding (d) $\times 100$

Total number of houses



SPACE FOR ROUGH WORK





SPACE FOR ROUGH WORK

