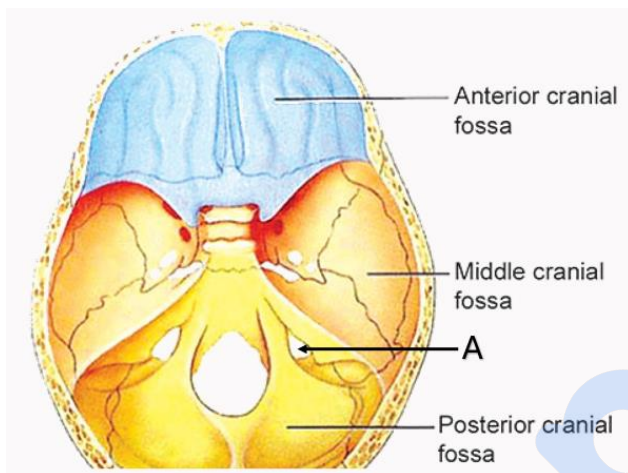


## NEET PG 2025 Memory Based Question Paper

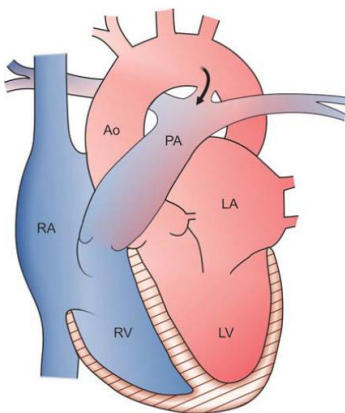
### Anatomy

Q1. Image below highlights jugular foramen. Which of the following structures do not pass through the marked structure "A"?



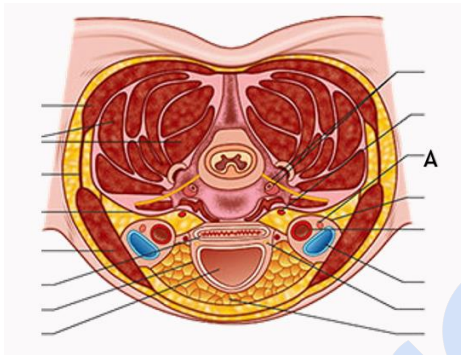
- A. Glossopharyngeal nerve
- B. Accessory nerve
- C. Vagus nerve
- D. Hypoglossal nerve

Q2. The defect shown in image relates to which of the following:



- A. Left 4th aortic arch
- B. Right 4th aortic arch
- C. Left 6th aortic arch
- D. Right 6th aortic arch

Q3. Which of the following is not carried by the structure marked "A" in the image?



- A. GSA
- B. GVA
- C. GSE
- D. GVE

Q4. What are the contents of Umbilical cord?

- A. 2 arteries, 2 veins
- B. 1 artery, 2 veins
- C. 2 arteries, 1 vein
- D. 1 artery, 1 vein

Q5. What is the root value responsible for Meralgia paresthetica?

- A. T12 and L1
- B. L2 and L3
- C. L2, L3 and L4
- D. L1 and L2

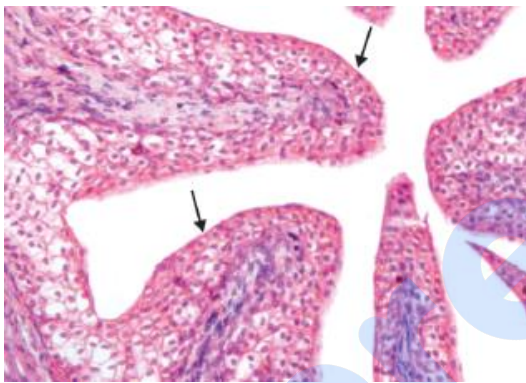
Q6. A girl presented with foot injury and gave history of forceful eversion of foot. Which of the following structure is affected the most?

- A. Anterior talofibular ligament
- B. Deltoid ligament
- C. Posterior talofibular ligament
- D. Calcaneofibular ligament

Q7. A patient presents with muscle wasting, reduced tone, and weakness in the left hand. Fine motor movements like dough kneading are impaired. Which of the following structure is most likely affected?

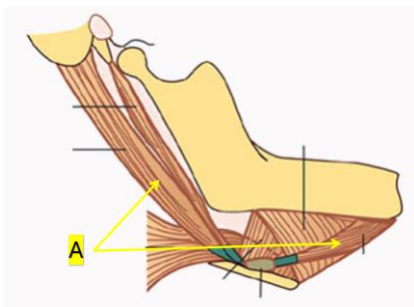
- A. Right anterior horn cells in spinal cord
- B. Pyramidal lesion
- C. Internal Capsule
- D. Left Corticospinal tract in the cervical cord

Q8. Identify the structure where the shown epithelium is located:



- A. Esophagus
- B. Ureter
- C. Fallopian tube
- D. Trachea

Q9. What is the nerve supply of the marked structure "A"?

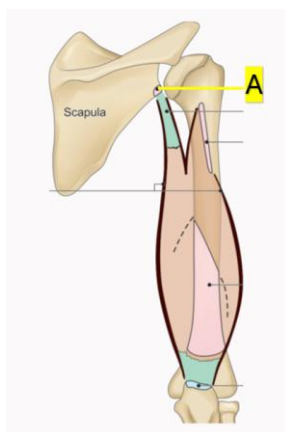


- A. Nerve to mylohyoid and facial nerve
- B. Facial nerve and mandibular nerve
- C. Mandibular nerve and spinal accessory nerve
- D. Facial nerve and spinal accessory nerve

Q10. During resection of submandibular gland, there is accidental injury to a structure running superior to the posterior belly of digastric muscle. Which of the following structure is likely to be injured?

- A. Lingual nerve
- B. Marginal Mandibular Nerve
- C. Trigeminal nerve
- D. Hypoglossal nerve

Q11. A 20-year-old boy got severe pain due to hyperextension of shoulder while training in the gym. The trainer expected a probable disruption of the structure marked "A" in the image below. Which site is affected?



- A. Shaft of humerus
- B. Deltoid tubercle of humerus
- C. Infraglenoid tubercle of scapula
- D. Supraglenoid tubercle of scapula

### Anesthesia

Q12. Patients administered sevoflurane and succinylcholine for abdominal surgery and develops post-operative muscle rigidity. What is the drug of choice here?

- A. Dantrolene
- B. Diazepam
- C. Propranolol
- D. Paracetamol

Q13. A patient was administered a muscle relaxant and subsequently developed erythema, facial flushing, and hypotension. Which drug is most likely responsible for these symptoms?

- A. Cisatracurium
- B. Atracurium
- C. Rocuronium
- D. Vecuronium

**Biochemistry**

Q14. In Hurler syndrome, which glycosaminoglycans accumulate and cause organ enlargement?

- A. Keratan sulfate and dermatan sulfate
- B. Keratan sulfate and heparan sulfate
- C. Heparan sulfate and dermatan sulfate
- D. Keratan sulfate and hyaluronic acid

Answer : C

Q15. A child presents with gum bleeding, perifollicular hemorrhages, petechiae, and recurrent fractures. Which enzyme deficiency is most likely?

- A. Lysyl oxidase
- B. Prolyl hydroxylase
- C. Tyrosinase
- D. Alkaline phosphatase

Q16. A man survives 5 days without food. What is the brain's primary energy source during this prolonged fasting period?

- A. Gluconeogenesis
- B. Glycogenolysis
- C. Ketosis
- D. Lipolysis

Q17. A patient has high phenylalanine levels despite normal phenylalanine hydroxylase. Which cofactor deficiency is most likely responsible?

- A. Tetrahydrofolate
- B. Tetrahydrobiopterin (BH<sub>4</sub>)
- C. Thiamine
- D. Pyridoxine

Q18. A patient with vitamin B12 deficiency presents with anemia, positive Romberg sign, and elevated homocysteine. Which amino acid is most likely deficient?

- A. Cysteine
- B. Methionine
- C. Tyrosine
- D. Glutamate

Q19. A patient on long-term hydrochlorothiazide develops neuropathy, heart failure, and symmetrical paresthesia. Which nutrient deficiency is most likely responsible?

- A. Selenium
- B. Thiamine
- C. Vitamin B12
- D. Zinc

Q20. A frameshift mutation from nucleotide insertion at position 4 of a 900-base mRNA is observed. What is the likely outcome?

- A. No change in the final protein
- B. Partial protein production

- C. Complete change in protein production
- D. No change due to RNA editing

Q21. A patient develops skin cancer and worsening hyperpigmentation following sun exposure. Which DNA repair pathway is most likely impaired?

- A. Nucleotide excision repair
- B. Base excision repair
- C. Non-homologous end joining (NHEJ)
- D. Mismatch repair

Q22. A patient with orange-colored tonsils has a triglyceride level of 140 mg/dL and very low HDL cholesterol (5 mg/dL). What is the most probable diagnosis?

- A. Familial hypercholesterolemia
- B. Tangier disease
- C. Type I hyperlipoproteinemia
- D. Abetalipoproteinemia

Q23. A 10-year-old patient has high total cholesterol, tendon xanthomas, and a family history of similar findings. Triglyceride levels are normal. What type of familial dyslipidemia is most likely?

- A. Type I
- B. Type IIa
- C. Type IIb
- D. Type II

Q24. To diagnose a syndromic illness like meningitis, which PCR technique is most appropriate?

- A. Multiplex PCR
- B. Uniplex PCR
- C. Attributed PCR
- D. Nested PCR

Q25. A 45-year-old man is evaluated for electrolyte imbalance:  $\text{Na}^+ = 130 \text{ mmol/L}$ ,  $\text{Cl}^- = 84 \text{ mmol/L}$ ,  $\text{HCO}_3^- = 16 \text{ mmol/L}$ . What is his anion-gap?

- A. 26
- B. 30
- C. 18
- D. 22

### Community medicine

Q26. For prevention of coronary artery disease, what is the recommended dietary cholesterol intake limit per day?

- A. 100 mg / 1000 kcal
- B. 200 mg / 1000 kcal
- C. 400 mg / 1000 kcal
- D. 500 mg / 1000 kcal

Q27. Toxic fumes are released after industry explosion. What advise should be given to the residents?

- A. Use telephone and call friends
- B. Seal the cracks and close the windows
- C. Open the window for ventilation
- D. Use the mask

Q28. A new community intervention is initiated to reduce prenatal sepsis. Researchers allocated 20 PHCs to receive standard care and 20 PHCs to receive a community-based intervention. What type of study design is this?

- A. Cross-sectional study
- B. Case-control study
- C. Quasi-experimental study
- D. Cluster-randomized control trial

Q29. A 20-year-old resident of Andhra Pradesh presents with outward bending of the lower limbs and signs of osteoporosis. His diet mainly consists of rice and jowar roti. Which of the following intervention will not be helpful?

- A. Provision of running surface water for drinking
- B. Change the water source
- C. Fluoride supplementation
- D. Add lime and alum to drinking water

Q30. A student was asked to bring the correct boxes from lab for Nalgonda technique:

- A. Alum and Gypsum
- B. Alum and Charcoal
- C. Alum and Lime

D. Charcoal and Lime

Q31. A study is conducted to compare the mean hemoglobin (Hb) levels between two groups. Which test is most appropriate?

- A. Paired t-test
- B. Unpaired t-test
- C. Chi-square test
- D. ANOVA

Q32. An urban city has a population of 70,00,000, with 30% residing in slum areas. How many UPHCs are required for the slum population?

- A. 22
- B. 32
- C. 42
- D. 52

Q33. Identify the mosquito without a siphon tube and which rests parallel to the surface of water?

- A. Anopheles
- B. Culex
- C. Aedes
- D. Mansonia

Q34. A 60-year-old diabetic patient with COVID-19 succumbed to death in the hospital. Which type of surveillance does this death report fall under?

- A. Active surveillance
- B. Passive surveillance
- C. Sentinel surveillance
- D. Syndromic surveillance

Q35. A dietary survey report indicates that the 5-year survival rate for breast cancer has increased following the introduction of a new screening method. However, autopsy data shows no change in overall mortality. What type of bias does this scenario illustrate?

- A. Survival bias
- B. Lead time bias
- C. Berksonian bias
- D. Detection bias

Q36. In “de facto” method of census data collection, collected data based on which of the following?

- A. Place of birth
- B. Location at the time of enumeration
- C. Place of employment
- D. Usual place of residence

Q37. Which of the following is the correct sequence in a Randomized Controlled Trial (RCT)?

- A. Follow-up → Manipulation → Assessment → Randomization

- B. Randomization → Manipulation → Follow-up → Assessment
- C. Assessment → Randomization → Follow-up → Manipulation
- D. Manipulation → Assessment → Follow-up → Randomization

Q38. Under the Weekly Iron and Folic Acid Supplementation scheme, what is the composition of IFA tablets given to children aged 10–19 years old?

- A. 60 mg elemental iron + 100 µg folic acid
- B. 100 mg elemental iron + 500 µg folic acid
- C. 100 mg elemental iron + 100 µg folic acid
- D. 60 mg elemental iron + 500 µg folic acid

Q39. What is the time interval between acquiring an infection and reaching the period of maximum infectivity is known as?

- A. Generation time
- B. Communicable period
- C. Incubation period
- D. Serial interval

Q40. Which of the following is used to measure the degree of objective and target achievement, and assess the quality of results obtained in a health program?

- A. Planning
- B. Surveillance
- C. Monitoring
- D. Evaluation

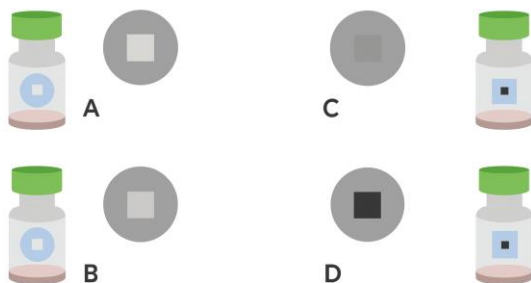
Q41. A young boy presents with clinical signs of rickets. Which government program specifically addresses this type of nutritional deficiency?

- A. Integrated Child Development Services (ICDS)
- B. National Nutritional Deficiency Control Programme
- C. Anemia Mukh Bharat
- D. Mid-Day Meal Scheme

Q42. A recently diagnosed HIV-positive patient with a CD4 count of 250 cells/mm<sup>3</sup> also tests positive for active tuberculosis. He has not yet been started on ART. What is the correct approach to initiating treatment?

- A. Start ATT first, then initiate ART after 2 weeks
- B. Start ART first, then begin ATT after 2 weeks
- C. Start both ART and ATT simultaneously
- D. Start ATT first, then initiate ART after 8 weeks

Q43. Which of the following vaccines can be used in the clinics?



- A. Use A only
- B. Use A and B
- C. Use A, B and C
- D. Use D only

### Dermatology

Q44. A young adult presents with facial pain and painful vesicular lesions in the mouth. Tzanck smear reveals multinucleated giant cells with intranuclear inclusions. What is the most likely causative organism?

- A. Adenovirus
- B. Cytomegalovirus
- C. EBV
- D. HSV

Q45. What is the most common cause for Squamous cell carcinoma at the base of the tongue?

- A. EBV
- B. HPV
- C. HCV
- D. CMV

Q46. A patient presents with irregular swelling over the foot, multiple discharging sinuses, and black granules. A KOH mount is performed on the discharge. What is the most likely observation?



- A. Arthrospores
- B. Slender dematiaceous fungi
- C. Yeast
- D. Septate hyphae

Q47. A 45-year-old patient presents with a chronic granulomatous skin lesion. What is the most confirmatory diagnostic test for this condition?



- A. PCR (Polymerase Chain Reaction)
- B. Slit skin smear
- C. Mantoux test
- D. Skin biopsy with histopathology

Q48. A 20-year-old patient presents with a non-progressive hypopigmented lesion on the trunk. On Wood's lamp examination, there is white accentuation. Diascopy is negative. What is the most likely diagnosis?



- A. Vitiligo
- B. Nevus depigmentosus
- C. Nevus anemicus
- D. Indeterminate leprosy

Q49. Q. A patient with intense itchy vesicular lesion on extensor surface presents with history of gluten sensitivity. Likely diagnosis?

- A. Bullous pemphigoid
- B. Pemphigus vulgaris
- C. Dermatitis herpetiformis
- D. Psoriasis

### ENT

Q50. A patient presents with the injury shown in lateral X-ray of nose. What procedure can be done to manage this patient?



- A. Tilley's probe
- B. Luc's forceps
- C. Denis Browne probe
- D. Walsham's forceps

Q51. A 78-year-old male, known case of diabetes mellitus and hypertension presents with nasal bleeding. The initial management such as packing were not successful in controlling the bleed. Which of the following artery should be ligated to control the bleeding?

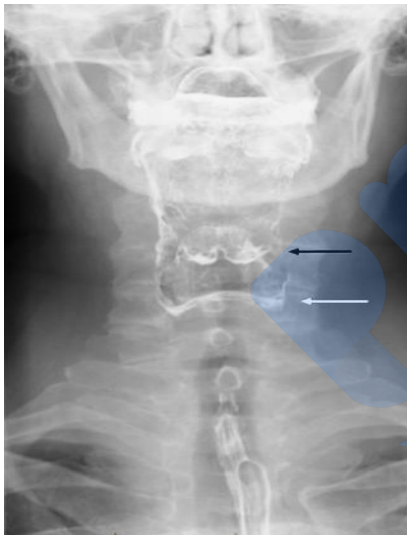
- A. Sphenopalatine artery
- B. Anterior Ethmoidal artery
- C. Posterior Ethmoidal artery
- D. Greater Palatine artery

Q52. A 16-year-old male presents with recurrent profuse nasal bleeding in the right nasal cavity. Endoscopy shows a globular mass in the right nasal cavity. CT shows bowing of the posterior wall of maxillary sinus. What is the most probable diagnosis?

- A. Juvenile Nasopharyngeal Angiofibroma (JNA)
- B. Antrochoanal polyp
- C. Rhinosporidiosis

D. Rhinoscleroma

Q53. What is the marked structure?



- A. Thyroid cartilage
- B. Pyriform sinus
- C. Epiglottis
- D. Vallecula

Q54. A 27-year-old male presents with complaints of recurrent ear infection. Otoscopic examination shows central perforation of tympanic membrane. Result of a tuning fork examination of a patient revealed the following: Rinne: -ve on left and +ve on Right; Weber: Lateralization on Left. What is the type and localization of Hearing loss?

- A. Left Sensorineural Hearing Loss
- B. Right Sensorineural Hearing Loss
- C. Left Conductive Hearing Loss
- D. Right Conductive Hearing Loss

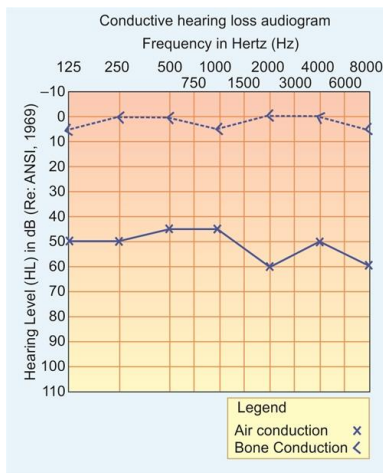
Q55. A 75-year-old male, smoker presents with complaints of hoarseness of voice, difficulty in swallowing. He has been diagnosed as large advanced SCC, and undergoes surgery. What is most appropriate surgical procedure done?

- A. Total laryngectomy
- B. Partial laryngectomy
- C. Percutaneous tracheostomy
- D. Standard tracheostomy

Q56. A 20-year-old patient presents with recurrent ear discharge. On otoscopic examination, the examiner notes complete absence of Tympanic membrane. What is the best option for treatment?

- A. Myringoplasty
- B. Radical mastoidectomy
- C. Ossiculoplasty
- D. Tympanoplasty

Q57. A 27-year-old male presents with complaints of reduced hearing in the left ear for 2 months. He denies tinnitus or vertigo. Pure tone audiometry is done, and the audiogram is shown below. Which of the following is the most likely diagnosis?



- A. Left ear SNHL
- B. Left ear CHL
- C. Right ear mixed hearing loss
- D. Normal hearing

### Forensic Medicine

Q58. During an autopsy of a 35-year-old female, the doctor noted bruises below the right angle of the jaw covered with scratches over the upper border and three group bruises on left side of neck below thyroid cartilage, and additional bruises over shoulder blade, backside of trunk and hip crests. What is the most likely cause of death?

- A. Throttling
- B. Garroting
- C. Mugging
- D. Ligature Strangulation

Q59. A 16-year-old girl and a 23-year-old man are medically examined after the girl's parents accuse the man of rape. The girl reports that the sexual activity was consensual, and

no physical injuries are noted. According to the law, which of the following is the correct statement?

- A. Consent is invalid as the girl is under 18 years
- B. No punishment since the act was consensual
- C. Parents must prove that the act was non-consensual
- D. No punishment since there are no injuries

Q60. What is ZASKO's phenomena?

- A. Tendon reflex occurring after death
- B. Blood clotting after death
- C. Gaping of wound along skin tension lines
- D. Seeping of blood through bones after death

Q61. Under the POCSO Act 2012, which group is protected by the law?

- A. All children under 16 years of age
- B. All children under 18 years of age
- C. Girls under 16 years of age
- D. Girls under 18 years of age

Q62. A male patient with recent history of RTA was brought to hospital. His CT scan was normal, but he died within three hours of admission. His autopsy revealed retraction ball appearance and petechial hemorrhages in the corpus callosum. What is the most likely diagnosis?

- A. Diffuse vascular injury
- B. Diffuse axonal injury

C. Intracerebral hemorrhage

D. None of the above

Q63. A 68-year-old female presented with breathlessness and poor health status. She also has multiple metastasis. On examination, she is awake and anxious. The doctors believed that aggressive chemotherapy, radiotherapy and ICU admission will not be helpful. However, her daughter insists on 'trying everything'. How should the attending doctor handle such a scenario?

A. Convene to family members and consider the patient's needs

B. Shift to ICU and start aggressive treatment

C. Discharge the patient and shift to palliative care

D. Give placebo care to relieve anxiety

### Medicine

Q64. Q. A 65-year-old patient with a history of atrial flutter is being considered for long-term prophylaxis to prevent recurrence. The cardiologist decides to start a calcium channel blocker for rate control and prevention of rapid ventricular response. Which calcium channel blocker is most appropriate for atrial flutter prophylaxis?

A. Amlodipine

B. Nifedipine

C. Diltiazem

D. Felodipine

Q65. Q. A diabetic patient on insulin glargine and metformin has persistent hyperglycemia (HbA1c 8.3%) and signs of heart failure. Which is the most appropriate medication to add next?

A. Sitagliptin

B. Pioglitazone

C. Empagliflozin

D. Gliclazide

Q66. Q. A patient with atrial fibrillation (AF) and mitral stenosis presents within 4 hours of symptom onset and is hemodynamically stable. What is the next best step?

A. Ventricular rate control

B. Cardioversion

C. Anticoagulation

D. Wait and watch

Q67. A 2-year-old child presents to the emergency department with a generalized tonic-clonic seizure lasting 3 minutes associated with high fever (39.5°C). The child has no previous history of seizures or neurological problems. The seizure has now stopped, but the parents are concerned about recurrence. What is the most appropriate immediate management for this febrile seizure?

A. Ethosuximide

B. Sodium valproate

C. Diazepam

D. No antiepileptic medication needed

Q68. Q. 45-year-old female presents with a 6-month history of paroxysmal nocturnal dyspnea, palpitations, and breathlessness. On evaluation, her blood pressure and SpO<sub>2</sub> are within normal limits. Jugular venous pressure is elevated, and she has an irregularly irregular pulse. Examination reveals tender hepatomegaly, a heaving apex beat, and a mid-diastolic murmur heard at the apex. She also has a history of acute rheumatic fever. Which of the following statements is false?

A. This patient has an increased risk of stroke

- B. The 'a' wave is absent in the JVP
- C. This patient shows features of right heart failure
- D. Presystolic accentuation is a hallmark feature

Q69. A 15-year-old adolescent with known type 1 diabetes mellitus presents with fatigue, vomiting, and diarrhea. Laboratory findings reveal a random blood glucose level of 700 mg/dL, serum sodium of 125 mEq/L, and potassium of 4.2 mEq/L. Which of the following is NOT recommended during the initial management of this patient?

- A. Administration of 3% saline
- B. Initiation of 0.9% normal saline infusion
- C. Intravenous insulin therapy
- D. Frequent monitoring of serum potassium levels

Q70. A patient with an irregularly irregular pulse and palpitations. He arrives 2.5 hours after symptom onset. No H/O diabetes and BP is 160/100 mmHg. What is the next best step?

- A. Control ventricular rate with verapamil
- B. Emergent cardioversion
- C. Transesophageal echo (TEE)
- D. Wait and watch

Q71. A 36-year-old woman with symmetrical small joint arthritis tests positive for anti-CCP. Which histological feature is most characteristic?

- A. Synovial granulomas

- B. Pannus formation and reactive lymphocytic infiltrate
- C. Uric acid crystal deposits
- D. Non-caseating granulomas

Q72. Q. A 65-year-old man presents with enlarged hat size, shin pain, elevated alkaline phosphatase, and normal calcium and PTH levels. X-ray reveals mixed lytic and sclerotic bone lesions. What is the most likely diagnosis?

- A. Paget's disease
- B. Primary hyperparathyroidism
- C. Osteomalacia
- D. Bone metastasis

Q73. Q. A 64-year-old man with chronic kidney disease presents with pallor, exertional breathlessness, and signs of heart failure. Investigations reveal normocytic anemia. What is the most appropriate next step in management?

- A. Oral iron
- B. Darbepoetin alfa
- C. Intravenous iron
- D. Blood transfusion

Q74. Q. A 42-year-old woman presents with enlarged hands, coarsened facial features, and an increased shoe size. Her IGF-1 level is elevated. Which of the following is the most specific test to confirm the diagnosis?

- A. Measurement of IGF-1 alone
- B. Lack of GH suppression following oral glucose tolerance test (OGTT)

- C. Lack of IGF-1 suppression after OGTT
- D. Random growth hormone level

Q75. Q. A 54-year-old man with a history of chronic hyponatremia develops sudden-onset quadriparesis after rapid sodium correction. Which investigation is most appropriate to confirm the diagnosis?

- A. Brainstem evoked potential
- B. Electroencephalogram (EEG)
- C. MRI of the brain
- D. Nerve conduction studies

Q76. Q. Which hormone is elevated in Addison's disease, leading to hyperpigmentation?

- A. Cortisol
- B. ACTH
- C. Aldosterone
- D. Renin

Q77. Q. A 50-year-old man presents with altered sensorium and deep labored breathing.

ABG is given below. What is the most likely acid-base abnormality? pH: 7.20

pCO<sub>2</sub>: 35 mmHg    HCO<sub>3</sub><sup>-</sup>: 16 mEq/L    Na<sup>+</sup>: 130 mEq/L    Cl<sup>-</sup>: 84 mEq/L

PaO<sub>2</sub>: 80 mmHg

- A. Acute metabolic acidosis with AG 30
- B. Chronic metabolic acidosis with AG 30
- C. Acute respiratory acidosis
- D. Chronic respiratory acidosis

Q78. Q. A patient collapses with breathlessness and pink frothy sputum. Autopsy shows hemosiderin-laden macrophages. In which condition is this not seen?

- A. Protein-losing enteropathy
- B. Right heart failure
- C. Volume overload
- D. Pulmonary vein obstruction

Q79. Q. A 14-year-old boy presents with fatigue, mild jaundice, and splenomegaly. His hemoglobin is 10.5 g/dL, MCV is 82 fL, and MCHC is high 37 g/dL. His father had a similar history of chronic anemia and underwent splenectomy. What is the most likely diagnosis?

- A. Autoimmune hemolytic anemia
- B. Hereditary spherocytosis
- C. Thalassemia minor
- D. G6PD deficiency

Q80. A patient arrives with hypotension, fever, joint pain, petechiae on limbs, and respiratory distress. Which of the following is the most likely diagnosis?

- A. Disseminated gonococcal infection
- B. Septic shock
- C. Rheumatoid arthritis
- D. Septic arthritis

Q81. A critically ill patient with COVID-19 is admitted to the ICU and is currently on mechanical ventilation. The PaO<sub>2</sub>/FiO<sub>2</sub> ratio is 100, indicating severe ARDS. Which of the following is the most appropriate ventilatory strategy to manage this patient?

- A. High PEEP and low tidal volume
- B. High PEEP and high tidal volume
- C. Low PEEP and low tidal volume
- D. Low PEEP and high tidal volume

Q82. Q. A 58-year-old patient has prolonged PT. Factor IX deficiency (vitamin K-dependent). Parenteral vitamin K planned. In which condition will this help?

- A. Hepatitis A
- B. Pernicious anemia
- C. Hemophilia B
- D. Bile duct obstruction

Q83. Case of sudden onset Aphasia and right arm weakness for last 5 hours. Which is indicated investigation

- A. MRI brain
- B. Carotid Doppler
- C. TEE
- D. Transthoracic echocardiography

Q84. A patient already on salbutamol and ipratropium continues to have nocturnal exacerbations of asthma. What is the next step?

- A. Oral corticosteroids

- B. Montelukast
- C. LABA plus inhalation steroids
- D. Increase the dose of salbutamol

Q85. Q. A 32-year-old male with history of recurrent paroxysmal supraventricular tachycardia is stable in sinus rhythm. What is the best choice for long-term prophylaxis?

- A. IV adenosine
- B. IV Esmolol
- C. Oral diltiazem
- D. IV amiodarone

### Microbiology

Q86. A farmer presents with a necrotic ulcerative skin lesion. Microscopy using polychrome methylene blue stain reveals capsulated bacilli showing a positive McFadyean reaction. What is the most likely causative organism?

- A. Clostridium perfringens
- B. Bacillus anthracis
- C. Yersinia pestis
- D. Francisella tularensis

Q87. Which structural component of Group A Streptococcus enables its attachment to pharyngeal epithelium by binding to fibronectin?

- A. Lipoprotein
- B. Lipoteichoic acid
- C. Capsule
- D. Flagella

Q88. Several residents in a village develop watery followed by bloody diarrhea after consuming unpasteurized milk. Stool microscopy reveals Gram-negative curved bacilli with polymorphonuclear leukocytes. Identify the most likely pathogen.

- A. *Clostridium perfringens*
- B. *Staphylococcus aureus*
- C. *Vibrio parahaemolyticus*
- D. *Campylobacter jejuni*

Q89. A man presents with hemoptysis, fever, and breathlessness. Microscopic analysis of bronchoalveolar lavage reveals septate hyphae with acute angle branching. Which fungal infection is most likely?

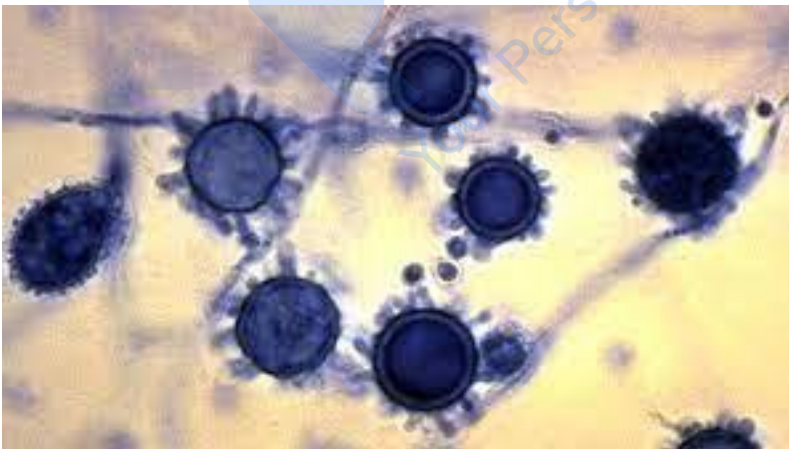
- A. Mucormycosis
- B. Histoplasmosis
- C. Aspergillosis
- D. Candidiasis

Q90. A 5-year-old child presents with intense perianal itching, predominantly during nighttime. Microscopic examination reveals the following egg. Which organism is most likely responsible for the condition?



- A. Enterobius vermicularis
- B. Ancylostoma duodenale
- C. Hymenolepis nana
- D. Trichuris trichiura

Q91. A patient presents with chronic cough, weight loss, and intermittent low-grade fever. Fungal culture from respiratory samples shows a yeast with narrow-based budding. Which of the following is the most probable diagnosis?



- A. Blastomycosis
- B. Histoplasmosis
- C. Cryptococcosis

D. Coccidioidomycosis

Q92. A case of brain abscess, reveals Gram-positive, branching, filamentous organisms on microscopy. The organism is weakly acid-fast and grows on paraffin bait media. Which is the most likely etiologic agent?

- A. *Actinomyces israelii*
- B. *Mycobacterium tuberculosis*
- C. *Nocardia asteroides*
- D. *Cryptococcus neoformans*

Q93. A case of recurrent *Neisseria gonorrhoeae* infection is being evaluated. Which immunological investigation would best detect a complement pathway defect?

- A. C1 esterase inhibitor assay
- B. Quantitative immunoglobulin levels
- C. Nitroblue tetrazolium test
- D. Terminal complement (C5-C9) assay

Q94. A man from an endemic region has developed progressive leg swelling. Peripheral smear reveals the following parasitic organism. Which pathophysiologic mechanism is most likely responsible?



- A. Hypoalbuminemia
- B. Lymphatic obstruction
- C. Hypoproteinemia
- D. Increased hydrostatic pressure

Q95. A 25-year-old sewage worker presents with fever lasting a week, followed by sudden weakness. He has scleral congestion, jaundice, and oliguria. Lab findings show raised bilirubin. What is the most likely diagnosis?

- A. Brucellosis
- B. Weil's disease
- C. Enteric fever
- D. DHF

### **Obstetrics and Gynecology**

Q96. 1st trimester pregnancy, previous toxoplasmosis. IgG positive. What is the advice?

- A. Continue pregnancy, no risk

- B. Abort – high risk
- C. Continue, risk exists
- D. Repeat IgM serology

Answer : C

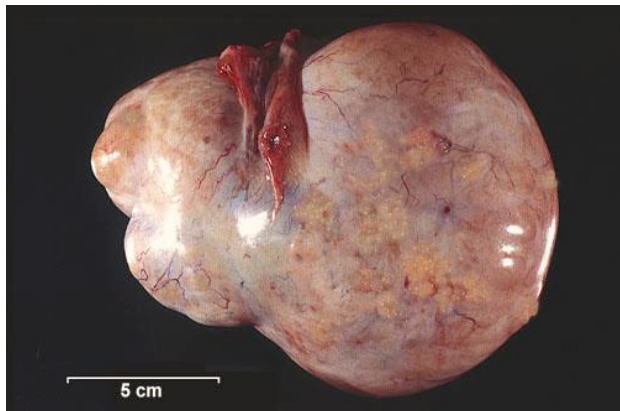
Q97. Child born with absent finger. Likely diagnosis?

- A. Amniotic band syndrome
- B. Arthrogryposis multiplex
- C. Polyhydramnios
- D. Congenital constriction ring

Q98. G2L2 delivered at home by trained dai presents with uterine prolapse. Which structure is weak?

- A. Round ligament
- B. Broad ligament
- C. Cardinal ligament
- D. Uterosacral ligament

Q99. Gross image of cystadenocarcinoma, CA-125 positive, heaviness in abdomen.  
Diagnosis?



- A. Serous cystadenocarcinoma
- B. Mucinous carcinoma
- C. Dysgerminoma
- D. Yolk sac tumor

Q100. Q. A 28-year-old pregnant woman at 34 weeks gestation is diagnosed with severe preeclampsia. The decision is made to start magnesium sulfate using the Pritchard regimen for seizure prophylaxis. What is the correct loading dose of magnesium sulfate in this regimen?

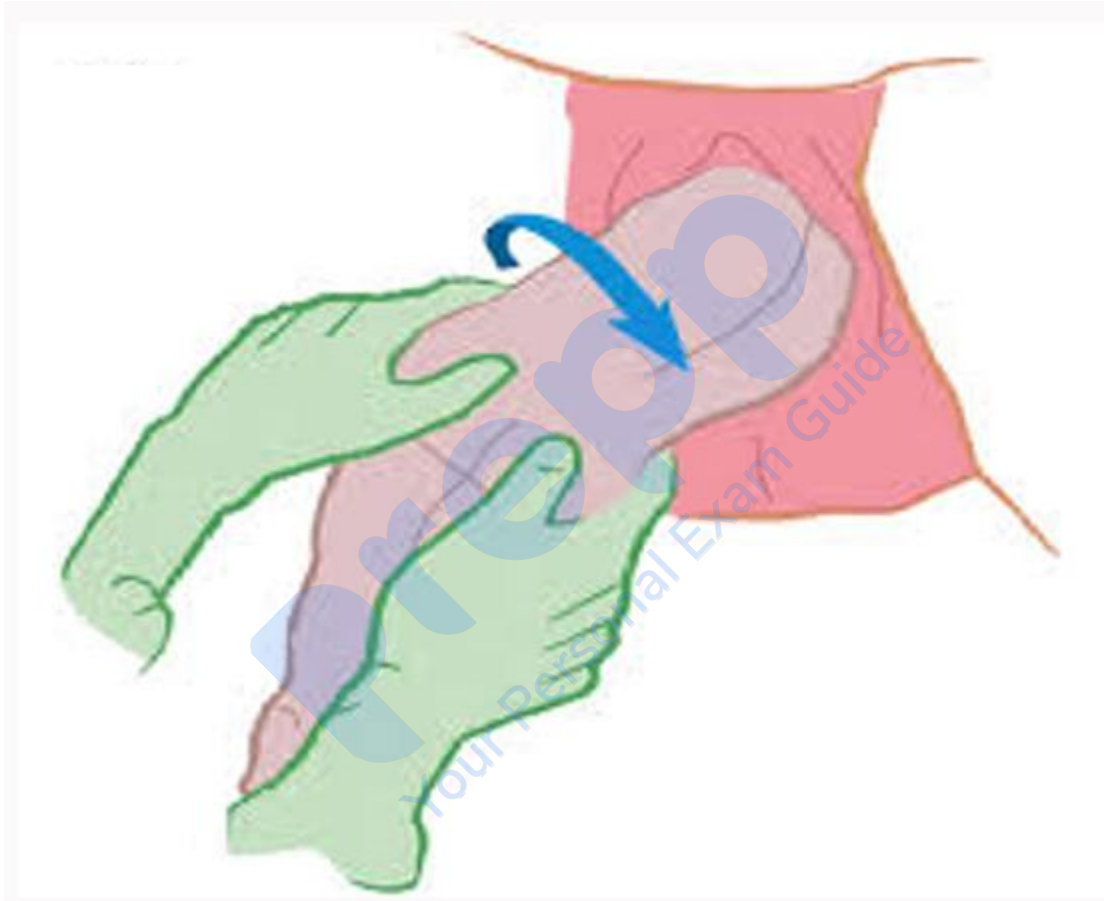
- A. 4 gm IV
- B. 6 gm IV + 5 gm IM each buttock
- C. 14 gm total
- D. 20 gm total

Q101. Sequence of repair of episiotomy:

- A. Mucosa → Muscle → Skin
- B. Skin → Muscle → Mucosa

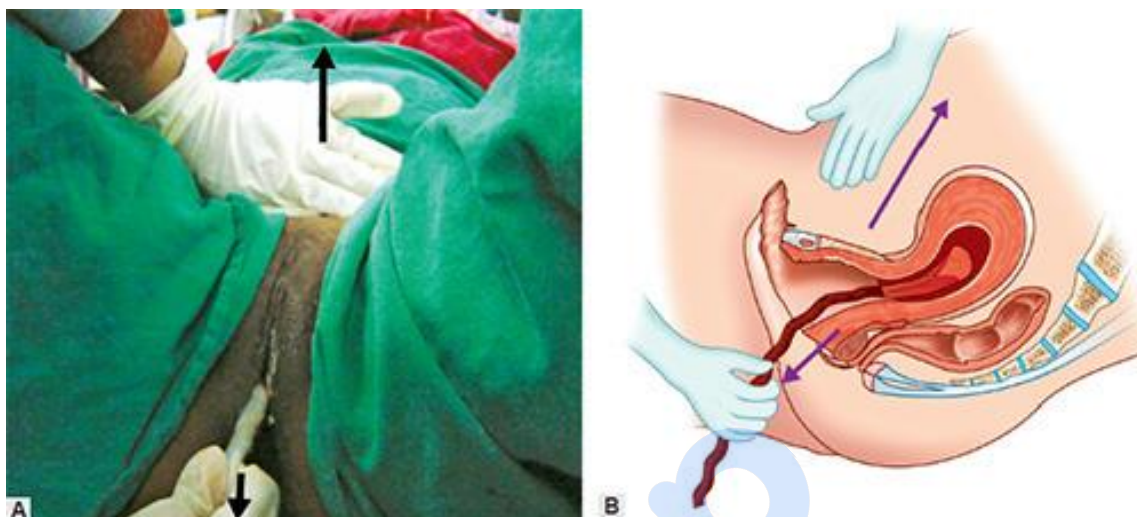
- C. Muscle → Mucosa → Skin
- D. Mucosa → Skin → Muscle

Q102. During vaginal breech delivery, the baby develops winging of the scapula. Identify the maneuver used:



- A. McRoberts
- B. Pinard
- C. Lovset
- D. Woods corkscrew maneuver

Q103. A resident is performing normal vaginal delivery. He is seen applying counterpressure above the pubic symphysis while gently pulling the umbilical cord. Which maneuver is being demonstrated?

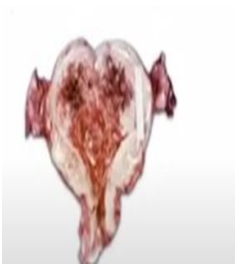


- A. Controlled cord traction
- B. Replacement of prolapsed cord
- C. Manual removal of placenta
- D. Delivery of shoulder using Lovset maneuver

Q104. A postmenopausal woman presents with blood-stained discharge. Her BP is 170/100 mm Hg. What is the next best step?

- A. Reassure
- B. PV exam, Pap smear, TVUSG
- C. Refer to cardiologist
- D. Wait and watch

Q105. Q. A 65-year-old postmenopausal woman presents with bleeding per vagina. She undergoes a total hysterectomy. What is the most likely diagnosis?



- A. Fibroid
- B. Endometriosis
- C. Adenomyosis
- D. Endometrial cancer

Q106. Postpartum anticoagulant of choice:

- A. LMWH
- B. Warfarin
- C. Aspirin
- D. Clopidogrel

Q107. A 36-year-old P2L2 with 9 months secondary amenorrhea has FSH 36, LH 56, AMH 0.5. What is the diagnosis?

- A. PCOS
- B. Premature ovarian failure
- C. Hyperprolactinemia
- D. Hypothalamic amenorrhea

Q108. A 46-year-old woman presents with heavy menstrual bleeding. USG shows endometrial thickness of 16 mm. Next best step?

- A. Hysterectomy
- B. Endometrial biopsy
- C. HPV testing
- D. Progesterone therapy

Q109. Atonic PPH not responding to medical management. Next best step?

- A. Uterine devascularization
- B. Hysterectomy
- C. Bakri balloon tamponade
- D. Compression suture

Q110. Correct order of maneuvers in shoulder dystocia:

- A. McRoberts → Rubin → Gaskin → Zavanelli
- B. Zavanelli → McRoberts → Gaskin → Rubin
- C. Rubin → Gaskin → McRoberts → Zavanelli
- D. McRoberts → Suprapubic pressure → Rubin → Zavanelli

Q111. A 30 yr old G2P1 woman present in labor. Previous cesarean, active labor, fetal bradycardia, maternal tachycardia, cervix 8 cm. Next step?

- A. Instrumental delivery
- B. ARM
- C. Increase oxytocin dose

D. Emergency Cesarean section

Q112. Day 21 of 28-day cycle. Which hormone profile is correct?

A. ↑P, ↑E, ↓FSH, ↓LH

B. ↑P, ↓E, ↓FSH, ↓LH

C. ↓P, ↓E, ↑LH, ↑FSH

D. ↑E, ↓P, ↑LH, ↓FSH

Q113. A female in labor presents with cord prolapse. What is the next best step?

A. Push cord back into cervix

B. Emergency C-section

C. Head-low, lift part, fill bladder

D. Vaginal delivery with forceps

Q114. Cervical cancer with hydronephrosis. FIGO stage?

A. IIA

B. IIIA

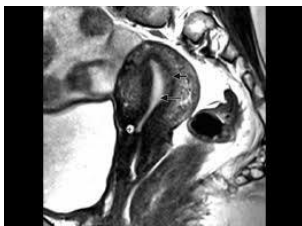
C. IIIB

D. IV

Q115. A woman presents with amenorrhea, linea nigra, nausea, vomiting, bluish vagina. These are:

- A. Probable signs of pregnancy
- B. confirmed pregnancy
- C. Menopause
- D. Normal menstrual cycle

Q116. A woman presents with Chronic lower abdominal Pain and dysmenorrhea. MRI is shown. Diagnosis?



- A. Adenomyosis
- B. Endometriosis
- C. endometrial carcinoma
- D. Fibroid

Q117. A woman is first antenatal visit reports LMP 2 months ago. Which ultrasound parameter is most accurate for dating pregnancy at this stage.

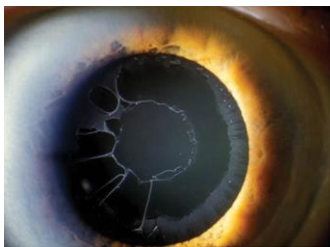
- A. Biparietal diameter
- B. Mean gestational sac diameter
- C. Abdominal circumference
- D. Crown-rump length

Q118. 36 weeks pregnant, ↓fetal movements. NST 1 accel, no decel in 20 min. Next step?

- A. Emergency C-section
- B. Induce labor
- C. Wait and observe
- D. Continue NST for 40 min

### Ophthalmology

Q119. An elderly patient presents with white dandruff-like deposits on the anterior lens capsule seen on slit-lamp examination. What is the most likely diagnosis?



- A. Anterior capsular opacity
- B. Iris cyst
- C. Pseudoexfoliation syndrome
- D. Pigment dispersion syndrome

Q120. The device shown in the image is "INTACS." What is the primary indication for its use?



- A. Glaucoma
- B. Cataract

- C. Keratoconus
- D. Corneal ulcer

Q121. A 16-year-old female presents with a gradually enlarging, painless orbital swelling that has persisted for 10 years. What is the most likely diagnosis?



- A. Dermoid cyst
- B. Capillary Hemangioma
- C. Lacrimal gland carcinoma
- D. Osteoma

Q122. A patient presents with guttate lesions in one eye and bullous keratopathy in the other. What is the most likely diagnosis?

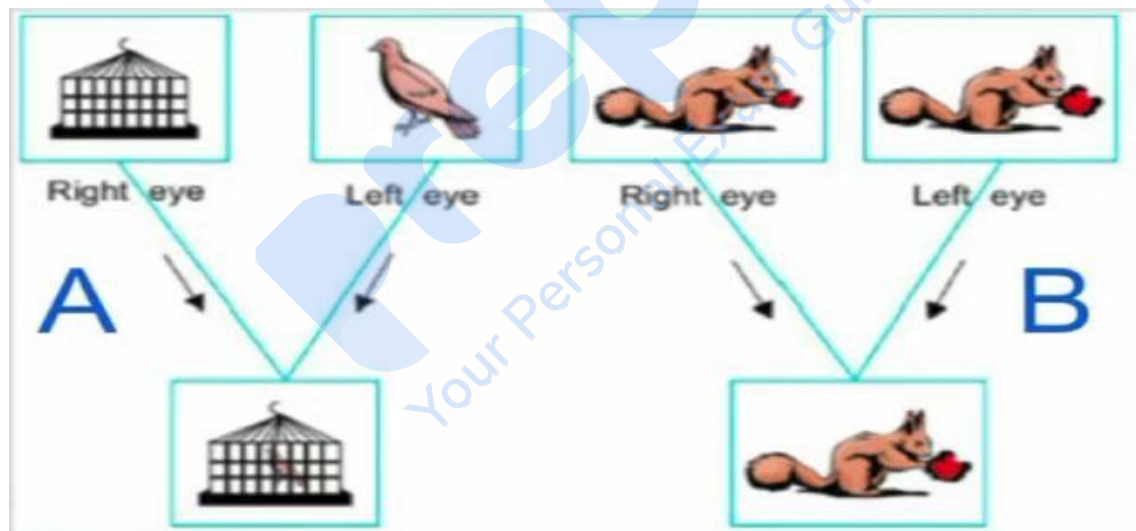
- A. Fuchs' endothelial dystrophy
- B. Viral corneal ulcer
- C. Interstitial keratitis

D. Keratoconjunctivitis

Q123. Which of the following is true about orbital cellulitis?

- A. The inflammation is confined anterior to the orbital septum
- B. Ethmoidal sinusitis is the most common cause in all age groups
- C. It presents with proptosis, but pupillary reflexes and extraocular movements remain normal
- D. Broad-spectrum topical antibiotics are the treatment of choice

Q124. Identify A and B components from the image about binocular vision



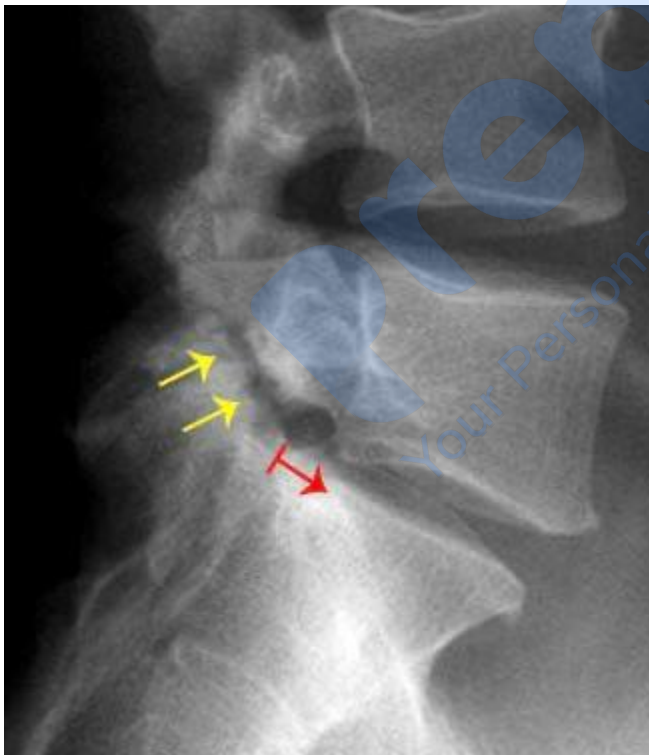
- A. A. Simultaneous perception and B-Stereopsis
- B. A-Simultaneous perception and B-Fusion
- C. A- Fusion and B-Simultaneous perception
- D. A- Stereopsis and B-Fusion

**Orthopedics**

Q125. Q. A 27-year-old individual presents with chronic lower back pain that improves with physical activity and is associated with early morning stiffness. There is a past history of anterior uveitis. A recent X-ray of the sacroiliac joints appears normal. What is the most appropriate next step in evaluation?

- A. MRI of the sacroiliac joints
- B. Anti-CCP antibody testing
- C. Repeat plain radiograph
- D. CT scan of the sacroiliac joints

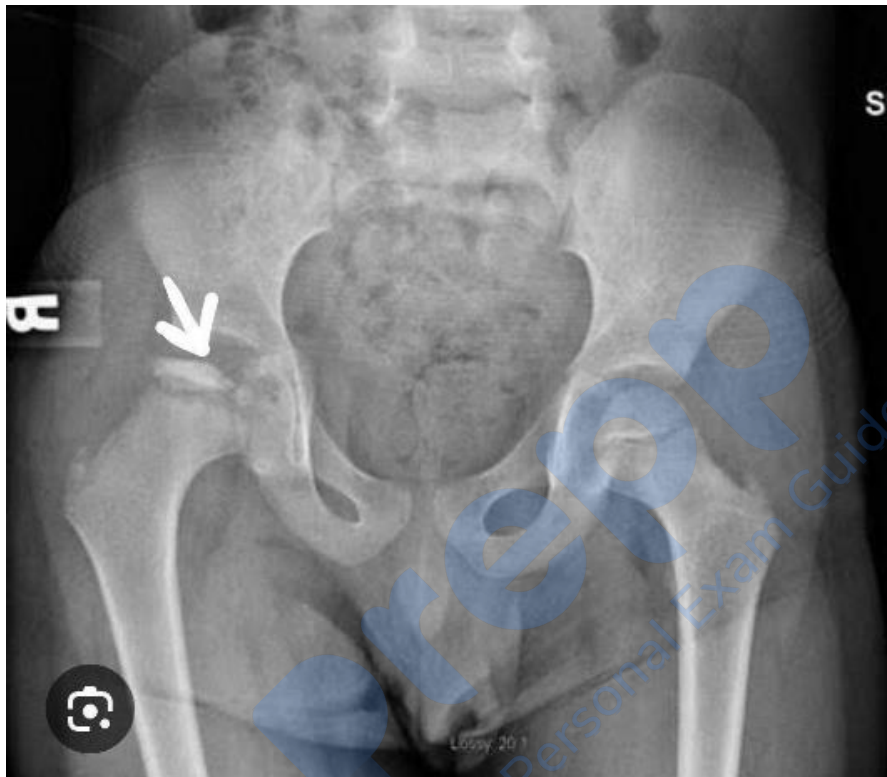
Q126. What is the most appropriate diagnosis for the image below?



- A. Spondylolisthesis
- B. Spondylolysis
- C. Vertebral compression fracture

D. Degenerative disc disease

Q127. A 11-year-old boy presented with complaint of painless limp. X-ray was done and the following image was obtained. What is the most likely diagnosis?



- A. Perthes disease
- B. Developmental dysplasia of the Hip
- C. TB Hip
- D. Slipped Capital Femoral Epiphysis

Q128. A 25-year-old male presents to the emergency department following a motorbike accident. He has sustained a closed midshaft tibial fracture. Six hours later, he complains of severe pain disproportionate to the injury, which worsens with passive dorsiflexion. The

pain is not relieved by analgesics. Distal pulses are palpable, but there is loss of sensation in the first web space. What is the most appropriate next step in management?

- A. Elevate the limb and observe
- B. Immediate fasciotomy
- C. Administer opioid analgesics
- D. Apply a cast and schedule follow-up

Q129. A male patient sustains a road traffic accident with closed midshaft fractures of the femur and tibia. Two days later, he develops breathlessness, tachycardia, and petechial rash on the chest and conjunctiva. What is the most probable diagnosis?

- A. Disseminated intravascular coagulation
- B. Fat embolism syndrome
- C. Pulmonary embolism
- D. Sepsis

Q130. A 45-year-old male presents with discomfort in his joints. Synovial fluid aspiration reveals Rhomboid shaped positively birefringent crystals under polarized light microscopy. What is the most likely diagnosis?

- A. Gout
- B. Rheumatoid arthritis
- C. Osteoarthritis
- D. Pseudogout

### Pathology

Q131. Q. Which of the following types of cell death involves activation of caspase enzymes?

- A. Necrosis and Apoptosis

- B. Apoptosis and Pyroptosis
- C. Apoptosis and Necroptosis
- D. Apoptosis only (+ Pyroptosis)

Q132. Q. Anti-mitochondrial antibody (AMA) is most commonly seen in:

- A. Autoimmune hepatitis
- B. Primary biliary cholangitis
- C. Primary sclerosing cholangitis
- D. Systemic lupus erythematosus

Q133. Q. Which of the following conditions is most likely to follow this pattern of inheritance?

- A. Prader willi syndrome
- B. Marfan syndrome
- C. Kearns-Sayre syndrome
- D. Duchenne muscular dystrophy

Q134. Q. A 68-year-old man presents with complaints of persistent fatigue. On examination, there is generalized lymphadenopathy. CBC shows leukocytosis with an absolute lymphocyte count of 35,000/ $\mu$ L. Which of the following is the investigation of choice to confirm the diagnosis and determine CD markers of CLL?

- A. Bone marrow biopsy
- B. Flow cytometry of peripheral blood
- C. Serum LDH levels
- D. Lymph node excisional biopsy

Q135. Q. A 35-year-old woman undergoes abdominal imaging for nonspecific RUQ pain. A liver mass is identified and surgically excised. The gross specimen is shown below. What is the most likely diagnosis?



- A. Hepatocellular carcinoma
- B. Focal nodular hyperplasia
- C. Hepatic adenoma
- D. Metastasis

Q136. Q. A patient with H/o cough chest pain and dyspnea. Imaging reveals giant cells granuloma formation and stellate inclusions. Likely diagnosis?

- A. Tuberculosis
- B. Sarcoidosis
- C. Lung cancer
- D. Fungal infection

Q137. Q. A very tall man presents with visual problems and is found to have ectopia lentis on ophthalmological evaluation. Which gene is most likely defective in this patient?

A. FBN1 ✓(chromosome 15)

B. COL1A1

C. FGFR3

D. PAX6

Q138. Q. A patient presents with hearing loss and balance problems. Histopathology of the lesion shows Antony A and Antony B areas and Verocay bodies. What is the most likely diagnosis?

A. Schwannoma ✓

B. Ependymoma

C. Meningioma

D. Medulloblastoma

Q139. Q. A child presents with visual disturbances and delayed growth. Imaging reveals a suprasellar mass, and histopathology shows the presence of wet keratin compact, eosinophilic anucleate keratin. What is the most likely diagnosis?

A. Medulloblastoma

B. Rathke pouch cyst

C. Pituitary adenoma

D. Craniopharyngioma

Q140. Q. Which of the following lab techniques is most commonly used to compare and quantify CD markers in cells.

A. ELISA

B. Western blot

- C. Flow cytometry
- D. IHC

Q141. Q. Anti SCL 70 antibody is most strongly associated with

- A. GAVE
- B. Calcinosis cutis
- C. Interstitial lung disease
- D. Myositis

Q142. Q. A 30-year-old man presents with a painless testicular mass. An ultrasound shows a well-circumscribed, homogeneous, non-hemorrhagic tumor. Histology is shown. What is the likely diagnosis?

- A. Yolk sac tumor
- B. Choriocarcinoma
- C. Teratoma
- D. Seminoma

Q143. Q. A lymphoma characterized by the presence of centrocytes and centroblasts, along with BCL2 positivity and CD10 expression, is most commonly associated with which chromosomal translocation?

- A. t(2;5)
- B. t(11;14)

C. t(14;18)

D. t(11;14)

Q144. Q. A 68-year-old man presents with bleeding. Peripheral smear shows a “faggot cell.” Which translocation is associated?

A. t(15;17)

B. t(14;18)

C. t(11;14)

D. t(8,21)

Q145. Q. A middle-aged woman presents with dry eyes and mouth. Laboratory tests reveal positive anti-Ro (SSA) and anti-La (SSB) antibodies. What is the most likely underlying pathological mechanism?

A. Destruction of exocrine glands by neutrophils

B. IgE-mediated hypersensitivity reaction

C. Lymphocytic infiltration and destruction of salivary and lacrimal glands ✓

D. Deposition of amyloid in salivary glands

Q146. Q. A patient has a neck mass with odynophagia and dyspnea. Histology shows amyloid deposition. What is the most likely diagnosis?

A. Papillary thyroid carcinoma

B. Follicular thyroid carcinoma

C. Medullary thyroid carcinoma

D. Anaplastic thyroid carcinoma

Q147. Q. A patient is diagnosed with AML M3. Which chromosomal translocation is characteristically associated with this condition?

- A. t(9;22)
- B. t(8;21)
- C. t(15;17)
- D. t(11;14)

### Pediatrics

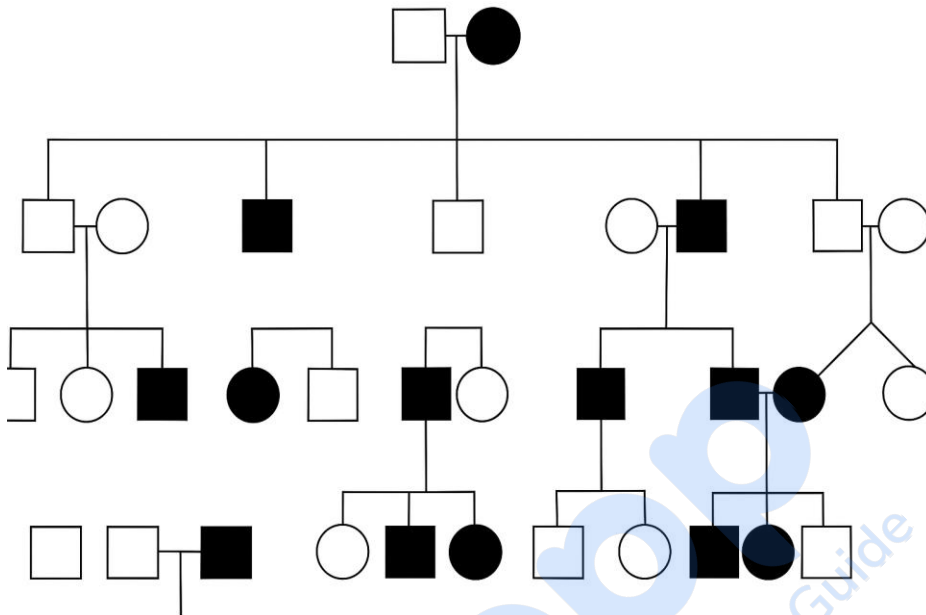
Q148. A 3-year-old child is brought to the emergency department with generalized convulsions following a high-grade fever. Which of the following is the most appropriate first-line medication to manage seizures in this acute febrile episode?

- A. Diazepam
- B. Valproate
- C. Fosphenytoin
- D. Doxycycline / Amoxicillin

Q149. A 6-month-old infant presents with frequent infections and failure to thrive. Tests show adenosine deaminase (ADA) deficiency. Which immunodeficiency disorder is most likely responsible?

- A. Severe Combined Immunodeficiency (SCID)
- B. Hypogammaglobulinemia
- C. DiGeorge Syndrome
- D. Wiskott -Aldrich Syndrome

Q150. A family pedigree reveals multiple individuals with symptoms such as progressive eye movement limitation, retinal pigment changes, and disturbances in cardiac conduction. Based on these findings and the inheritance pattern, which of the following is the most probable diagnosis?



- A. Duchenne Muscular Dystrophy
- B. Kearns–Sayre Syndrome
- C. Friedreich Ataxia
- D. Myotonic Dystrophy

Q151. A 2-year-old child has choked on a peanut. What is the most appropriate immediate management?

- A. Chest compressions
- B. Back blows
- C. Abdominal thrusts
- D. Endotracheal intubation

Q152. A child demonstrates progressive neurological decline and a cherry-red spot-on fundus examination. Enzyme analysis reveals a deficiency in hexosaminidase A. What is the most likely diagnosis?

- A. GM1 gangliosidosis
- B. GM2 gangliosidosis
- C. Niemann-Pick disease
- D. Gaucher disease

Q153. A child with coarse facial features and developmental delay is found to have a deficiency of  $\alpha$ -L-iduronidase on enzyme testing. Which substances are expected to accumulate in this disorder?

- A. Dermatan sulfate + Chondroitin sulfate
- B. Only Dermatan sulfate
- C. Dermatan sulfate + Heparan sulfate
- D. Heparan sulfate + Chondroitin sulfate

Q154. A 7-month-old infant has just started complementary feeding using the 'katori method.' What is the recommended quantity and frequency of feeding during the first day?

- A.  $\frac{1}{2}$ –1 katori, 4 times daily
- B.  $\frac{1}{2}$ –1 katori, 5 times daily
- C.  $\frac{1}{2}$ –1 katori, 6 times daily
- D.  $\frac{1}{2}$ –1 katori, 8 times daily

Q155. A neonate is born to an HIV-positive mother with a viral load of 1200 copies/mL. What is the recommended antiretroviral prophylaxis for the newborn?

- A. Nevirapine for 6 weeks with exclusive breastfeeding
- B. Nevirapine + Zidovudine for 6 weeks with exclusive breastfeeding
- C. No prophylaxis needed as mother is on ART
- D. Nevirapine + Zidovudine for 12 weeks with exclusive breastfeeding

Q156. A 5-year-old child with known chronic kidney disease presents with bowing of the legs. Lab results reveal: Normal calcium, Elevated phosphate, Increased alkaline phosphatase, Low 25(OH) Vitamin D. What is the most appropriate next intervention?

- A. Calcium supplementation with phosphate binder
- B. Phosphate binder
- C. Oral calcium with Vitamin D
- D. Growth hormone therapy

Q157. A 1-day-old newborn with significant respiratory distress is admitted to the ICU. Chest radiograph is performed. What is the most probable diagnosis based on the clinical and radiological findings?



- A. Congenital Pulmonary Airway Malformation (CPAM)
- B. Congenital Diaphragmatic Hernia (CDH)
- C. Congenital lobar emphysema
- D. Neonatal pneumonia

### Pharmacology

Q158. Which receptor does Benralizumab act on?

- A. IL-5
- B. IL-4
- C. IL-1
- D. TNF –  $\alpha$

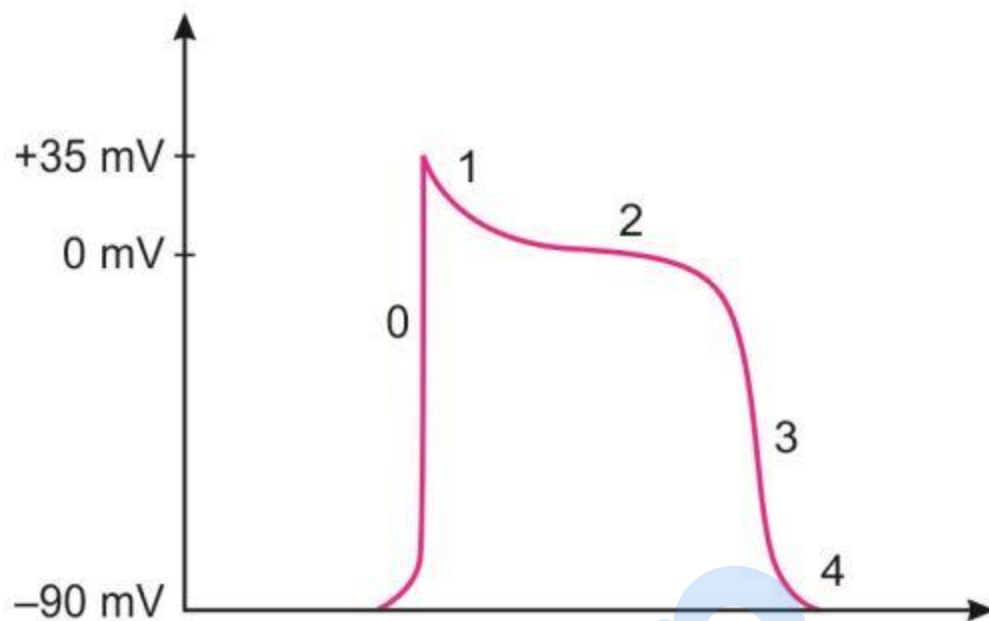
Q159. What is the drug of choice for chemoprophylaxis in close contacts of a patient diagnosed with meningococcal meningitis?

- A. Doxycycline
- B. Amoxicillin
- C. Ciprofloxacin
- D. Vancomycin

Q160. Which of the following, if given in large volumes, can lead to hyperchloremic metabolic acidosis?

- A. Dextrose in NS (DNS)
- B. Normal saline (NS)
- C. 5% dextrose in water
- D. Ringer lactate

Q161. Q. A 60-year-old man with ischemic cardiomyopathy and palpitations is started on amiodarone. Which phase of the cardiac action potential is its primary site of action?



- A. Phase 0 – Rapid depolarization
- B. Phase 2 – Plateau
- C. Phase 3 – Repolarization
- D. Phase 4 – Resting potential

Q162. Q. A patient presents with headache, palpitations and diaphoresis with elevated 24-hour urine metanephrine levels. Which of drug is given preoperatively

- A. Phenoxybenzamine
- B. Esmolol
- C. CCB
- D. Labetalol

Q163. A 35-year-old woman is diagnosed with migraine and has a family history of coronary artery disease. She has been previously treated with sumatriptan. What is the drug of choice for migraine prophylaxis?

- A. Propranolol
- B. Topiramate
- C. Ergotamine
- D. Naratriptan

Q164. A patient with tumor lysis syndrome has elevated uric acid levels and is prescribed with Pegloticase. What is the mechanism of action of Pegloticase?

- A. Xanthine oxidase inhibition
- B. URAT-1 receptor inhibition
- C. Oxidizes uric acid
- D. Hydrolysis of uric acid

Q165. A 40-year-old male patient presents with GERD. Which of the following drug helps in contraction of Lower esophageal sphincter and increase in gastric emptying?

- A. Metoclopramide
- B. Pantoprazole
- C. Vonoprazan
- D. Sodium alginate

Q166. A patient presents with following lesions and have burning sensations on eating spicy food. Which of the following drug is responsible here?



- A. Lithium
- B. Beta blockers
- C. Fluconazole
- D. Ciprofloxacin

Q167. A patient with history of hypertension presents with renal stones. He was started on hydrochlorothiazide. Which statement is true regarding the choice of drug?

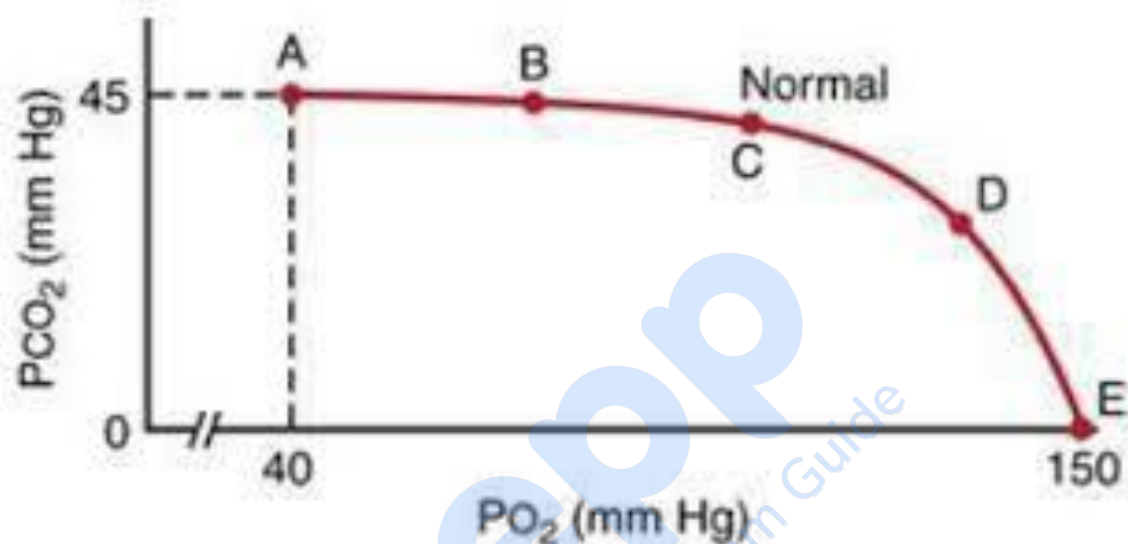
- A. Increased calcium excretion
- B. Decreased calcium excretion
- C. Increased oxalate absorption
- D. Decreased citrate excretion

Q168. A patient with HIV is recently diagnosed with multidrug-resistant tuberculosis. What is the appropriate regimen, and what should the patient be monitored for?

- A. BPaLM ; monitor for immune reconstitution syndrome
- B. INH + Levofloxacin + Pyrazinamide + ethambutol, monitor for hepatotoxicity
- C. INH + Levofloxacin + Streptomycin + Ethionamide, monitor for pyridoxine deficiency
- D. INH + Clarithromycin + Pyrazinamide + Ethambutol, monitor for optic neuritis

**Physiology**

Q169. In a patient with pulmonary embolism causing complete obstruction of blood flow. Which point on the V/Q graph indicates the effect of pulmonary embolism



- A. A
- B. B
- C. C
- D. D

Q170. A patient has the following Starling forces measured at the capillary level: Capillary hydrostatic pressure: 18 mmHg Capillary oncotic pressure: 27 mmHg Interstitial oncotic pressure: 7 mmHg. If there is no net movement of fluid across the capillary wall, what is the value of the interstitial hydrostatic pressure?

- A. 0 mmHg
- B. +1 mmHg
- C. +2 mmHg
- D. -2 mmHg

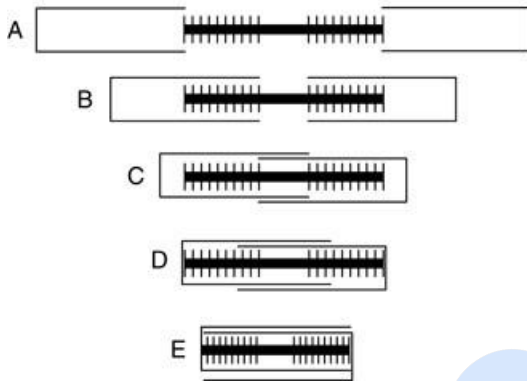
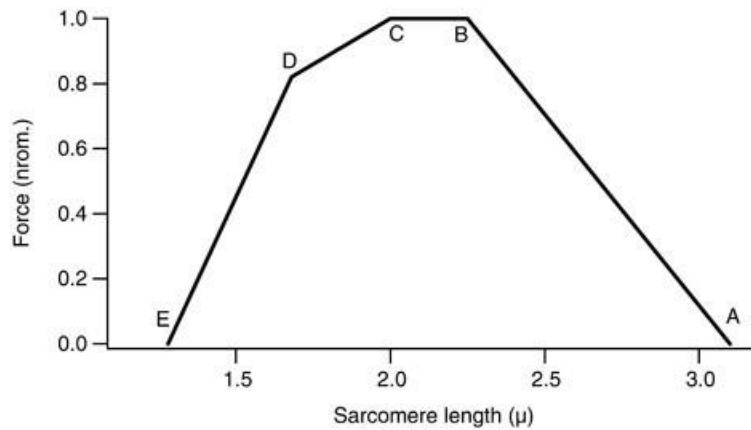
Q171. A patient flying to high altitude (3700 m) develops headache, nausea, dyspnea, and dizziness. What explains these symptoms?

- A. Hypoxia causing vasodilation
- B. Hypoxia causing vasoconstriction
- C. Metabolic acidosis causing edema
- D. high PO<sub>2</sub> causing vasoconstriction

Q172. In an experimental study, blood glucose levels were elevated to 2–3 times the normal and maintained at that level. What is the most likely pattern of insulin secretion in response?

- A. Rapid rise followed by a fall
- B. Gradual rise followed by a fall
- C. Remains persistently elevated
- D. Initial rise followed by sustained elevation

Q173. In the sarcomere length–tension relationship curve, at which point is the maximum active tension generated due to optimal overlap between actin and myosin filaments?



- A. Point A
- B. Point B
- C. Point C
- D. Point D

Q174. A patient presents with fatigue, muscle cramps, and strong salt cravings. What is the most likely diagnosis?

- A. Addison's disease
- B. Conn's disease
- C. Cushing's disease
- D. Hypopituitarism

Q175. What acid-base disturbance is expected in a person trekking at high altitude due to hyperventilation?

- A. Metabolic acidosis
- B. Metabolic alkalosis
- C. Respiratory acidosis
- D. Respiratory alkalosis

Q176. A woman presenting with amenorrhea and galactorrhea is diagnosed with a pituitary adenoma and elevated prolactin levels. What is the most likely cause of her amenorrhea?

- A. Low GnRH
- B. High pulsed LH
- C. High FSHD
- D. Inhibition of GnRH by prolactin

### Psychiatry

Q177. Schizophrenia patient on haloperidol was responding well for last 2 years. Now presented with orofacial dyskinesia, choreiform, tick like movements, and dystonia features. What can be the probable diagnosis and treatment?

- A. Acute dystonia - Ropinirole
- B. Tardive dyskinesia - Valbenazine
- C. Akathesia - Propranalol
- D. Oral tremor – amantadine

Q178. A patient says that he follows the way birds fly whenever he is in an open place because god is giving him instructions through the birds. What is the diagnosis?

- A. Delusional perception

- B. Visual hallucination
- C. Delusional memory
- D. Sudden Delusional ideas

Q179. Mr. K was brought to a psychiatrist by his friend, saying that Mr. K needs everything to be in perfect order and has difficulty in getting rid of things stored with him, both of which are affecting his work quality. He is a perfectionist. However, Mr. K denies such complaints. What is the diagnosis?

- A. Narcissistic Personality
- B. Obsessive Compulsive Personality Disorder
- C. Paranoid Delusion
- D. Dependent personality

Q180. A patient is brought in by a social worker after a recent earthquake. He has been living in a town different from his place of origin and is unaware of how he traveled 110 km away from home. He cannot recall his identity. There's no substance abuse history. What is the most likely diagnosis?

- A. Dissociative amnesia
- B. Dissociative fugue
- C. DID
- D. Selective amnesia

Q181. A 21-year-old female presents with amnesia of events following her father's death in a road traffic accident. Symptoms have persisted for 2 weeks, and she experiences flashbacks. What is the most probable diagnosis?

- A. Dissociative disorder

- B. Major depression
- C. PTSD
- D. Acute stress disorder

Q182. A person attacks his co-worker, complaining that the co-worker has been plotting to harm him. He hears voices. On examination, the person is found to have a disorganized speech. What is the next step in this case?

- A. Refer for anger management.
- B. Refer for psychiatric assessment and check if he is fit for trial.
- C. He is not responsible because is mentally ill
- D. Start immediate trials and punishment

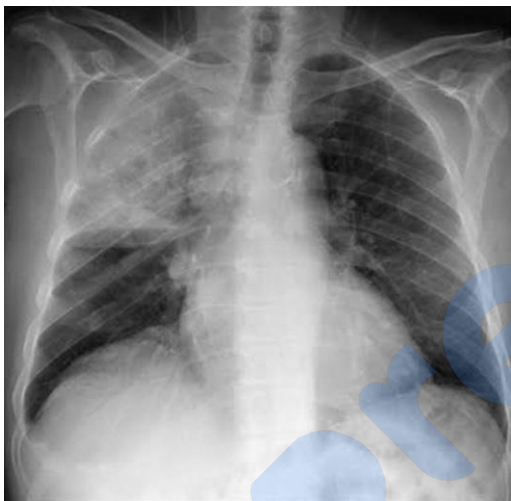
### Radiology

Q183. What is correct regarding the image shown?



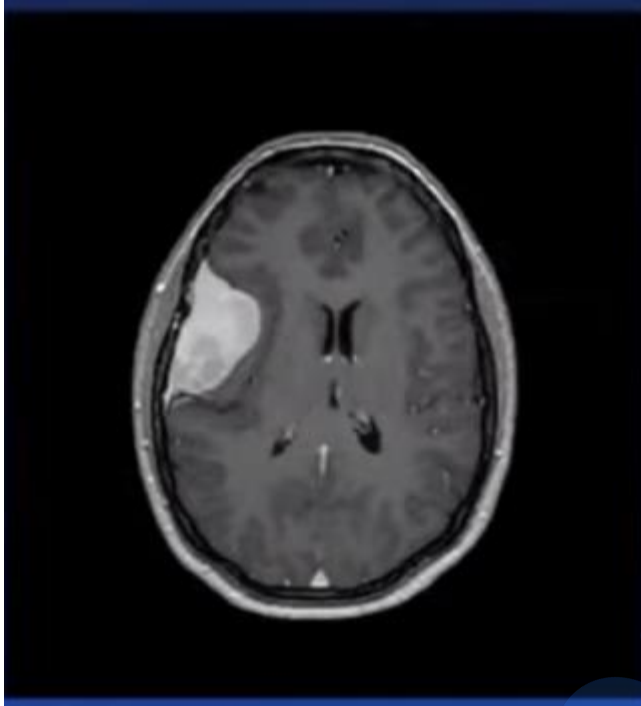
- A. Non-invasive and gold standard of cancer
- B. Non-invasive and can diagnose PUJ obstruction
- C. Percutaneous method
- D. Invasive and therapeutic for bladder lithiasis

Q184. What is the most appropriate diagnosis for the image below?



- A. Collapse of right upper lobe
- B. Consolidation of right upper lobe
- C. Right lung abscess
- D. Right upper lobe bronchogenic carcinoma

Q185. A 35-year-old male presents with complaint of recurrent headaches. On further investigation, the following MRI was received. What is the most likely diagnosis?



- A. Meningioma
- B. Glioma
- C. Medulloblastoma
- D. Pilocystic astrocytoma

Q186. A 32-year-old male presents with dysphagia and regurgitation. A barium swallow image is shown. Which investigation is considered the gold standard for confirming the diagnosis?



- A. CECT
- B. Esophageal manometry
- C. Endoscopy
- D. NCCT

### **Surgery**

Q187. A patient presents with dyspnea and tachycardia 7 days after undergoing knee replacement surgery. Which investigation will confirm the diagnosis?

- A. V/Q ratio
- B. D-dimer
- C. Chest X-ray
- D. CT Pulmonary Angiography (CTPA)

Q188. Q. A 35-year-old man diagnosed with pheochromocytoma is scheduled for surgery. Which medication should be given as preoperative preparation?

- A. Clonidine
- B. Phenoxybenzamine

C. Esmolol

D. Aspirin

Q189. During a complex duodenal surgery, a vessel posterior to the duodenum is cut, resulting in massive bleeding and blood collection. Which vessel is most likely injured?

A. Superior mesenteric artery

B. Inferior vena cava

C. Aorta

D. Portal vein

Q190. A patient presents with the fingertip changes shown in the image. What is the most likely diagnosis?



A. Wet gangrene

- B. Raynaud's phenomenon
- C. Dry gangrene
- D. Frostbite

Q191. A patient presents with the breast condition shown in the image. According to TNM staging, what stage would this represent?

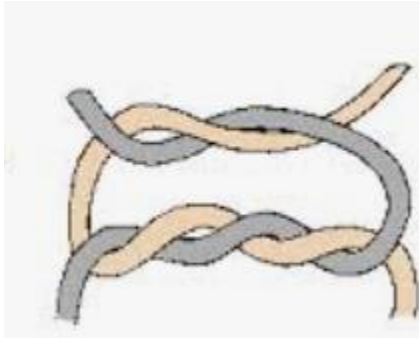


- A. Stage IIIB
- B. Stage IIIC
- C. Stage IVD
- D. Stage IIB

Q192. A 50-year-old patient presents with a slowly growing, painless neck mass at the angle of the mandible... 'Lyre's sign' is observed. What is the most likely diagnosis?

- A. Thyroid nodule
- B. Lymphadenopathy
- C. Carotid body tumor
- D. Branchial cyst

Q193. The knot shown in the image is commonly used in surgical procedures. What type of knot is depicted?

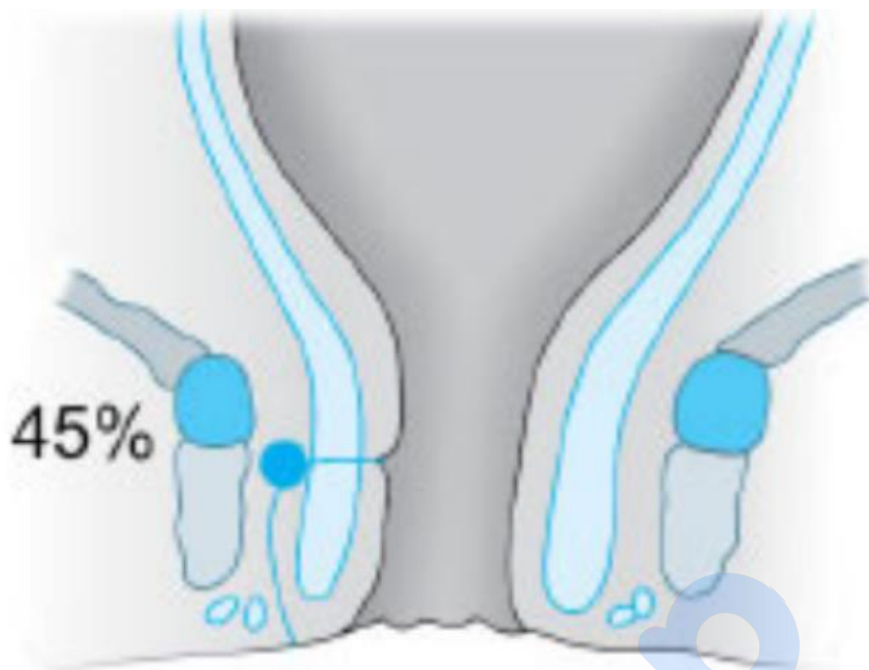


- A. Surgeon's knot
- B. Granny's knot
- C. Square knot
- D. Slip knot

Q194. A 35-year-old male with stab wound to epigastrium, hypotension, guarding. What is the immediate intervention of choice?

- A. FAST
- B. DPL
- C. CT Scan
- D. Exploratory Laparotomy

Q195. Based on Park's classification, identify the type of anorectal fistula shown in the image.



- A. Intersphincteric
- B. Suprasphincteric
- C. Extrasphincteric
- D. High transsphincteric

Q196. A 56-year-old with chronic venous changes in lower limb. Which statement is true?



- A. Sclerotherapy is preferred
- B. Eczema or lipodermatosclerosis may develop
- C. Telangiectasia is uncommon
- D. Venous ulcer not expected

Q197. Regarding polydioxanone suture material, which of the following is accurate?

- A. Non-absorbable
- B. Monofilament
- C. Braided multifilament
- D. Derived from collagen

Q198. A 3-year-old boy has painful urination and ballooning of foreskin. Likely diagnosis?



- A. BXO
- B. True phimosis
- C. Recurrent balanoposthitis
- D. Recurrent UTI

Q199. A woman with deep partial-thickness burns on lower limb. Image shows procedure. What is the procedure?



- A. Escharotomy
- B. Surgical debridement
- C. Excision to healthy fat or fascia
- D. Early skin grafting

Q200. A known case of anal carcinoma with mass near the anal opening comes for a follow up. Which of the following lymph nodes are most likely involved?

- A. Superficial inguinal lymph nodes
- B. Deep inguinal lymph nodes
- C. External iliac lymph nodes
- D. Internal iliac lymph nodes