

Combined Medical Services

SURGERY, OBSTETRICS AND GYNAECOLOGY; PREVENTIVE, SOCIAL AND COMMUNITY 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. Rough sheets are appended at the end of the Test Booklet.
10. **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 for 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.

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

1. Tidy wounds inflicted by sharp instruments and containing no devitalised tissues are expected to heal by
- Secondary healing
 - Primary healing
 - Formation of contracture
 - Skin grafting
2. The following statements regarding small bowel tuberculosis are correct *except*
- There are two types : ulcerative and hyperplastic
 - The strictures are common in the ulcerative type
 - In the ulcerative type, the bowel serosa is studded with tubercles . .
 - The ulcerative type occurs when the virulence of the organism is greater than the host defence
3. Systemic Inflammatory Response Syndrome (SIRS) is characterised by the following *except*
- Release of lipopolysaccharide endotoxins from the walls of dying gram-negative bacilli
 - Tachycardia with a heart rate of more than 90/min.
 - White cell count $< 5000/\text{mm}^3$
 - Tachypnoea with a respiratory rate of $> 20/\text{min}$.
4. The most common site for a parathyroid adenoma is
- Intra-thyroid
 - In the superior parathyroid lobe
 - In the inferior parathyroid lobe
 - Mediastinal
5. The sonographic finding of a cyst containing clear fluid is described as
- Anechoic
 - Hypoechoic
 - Isoechoic
 - Hyperechoic
6. The histological grade best correlates with the prognosis in which one of the following malignancies ?
- Prostate cancer
 - Melanoma
 - Colonic adenocarcinoma
 - Soft tissue sarcoma
7. Match List I with List II and select the correct answer using the code given below the Lists :
- | List I
(Name of the perforators) | List II
(Site of perforators) |
|-------------------------------------|----------------------------------|
| A. Boyd's | 1. 5 cm above the calcaneus |
| B. Dodd's | 2. Mid thigh |
| C. Cockett's | 3. Below the knee |
| D. Bassi's | 4. Above the ankle |
- Code :
- | | A | B | C | D |
|-----|---|---|---|---|
| (a) | 4 | 3 | 1 | 2 |
| (b) | 3 | 2 | 1 | 4 |
| (c) | 3 | 2 | 4 | 1 |
| (d) | 4 | 3 | 2 | 1 |

8. When a patient suffers from critical limb ischemia, the ankle-brachial pressure index (ABPI) is less than
- 1.0
 - 0.9
 - 0.7
 - 0.3
9. Which of the following most strongly suggests the diagnosis of primary hyperparathyroidism?
- Serum acid phosphatase above 120 IU/L
 - Serum calcium above 11 mg/dL
 - Urinary calcium below 100 mg/day
 - Serum alkaline phosphatase above 120 IU/L
10. A patient has a 6-cm breast tumour with mobile, clinically positive, ipsilateral axillary lymph nodes and no evidence of distant metastasis. The stage of the breast cancer is
- Stage I
 - Stage II b
 - Stage III a
 - Stage III b
11. A young patient presented in the emergency with haematemesis and was found to have massive splenomegaly. The following conditions are associated with the above clinical presentation *except*
- Malaria
 - Kala-azar
 - Portal hypertension
 - Idiopathic thrombocytopenic purpura
12. The following are the common features of Idiopathic Thrombocytopenic Purpura *except*
- Epistaxis
 - Cutaneous ecchymoses
 - Massive splenomegaly
 - Thrombocytopenia
13. Among the following, which is the investigation of choice for evaluation of common bile duct (CBD)?
- CECT-Abdomen
 - MRCP
 - HIDA scan
 - Ultrasonography
14. The removal of malarial parasites from the red blood cells by spleen is called
- Pitting
 - Culling
 - Binding
 - Phagocytosis
15. The prognostic indicators in a case of portal hypertension include
1. Serum globulin
 2. Serum albumin
 3. Serum bilirubin
 4. Ascites
- Select the correct answer using the code given below:
- 1, 2 and 3
 - 1 and 4 only
 - 2, 3 and 4
 - 3 and 4 only

16. The following constitute the Saint's triad *except*
- Gall stones
 - Jaundice
 - Hiatus hernia
 - Colonic diverticulosis
17. A 40-year old alcoholic male complains of acute pain in the epigastrium associated with vomiting for the last 10 days. On clinical examination, he is found to have a mass in the epigastrium. The most likely diagnosis is
- Perforated peptic ulcer with sub-hepatic abscess
 - Pseudopancreatic cyst
 - Carcinoma of head of the pancreas
 - Hepatoma in left lobe of liver
18. In acute pancreatitis, surgery is indicated in which one of the following conditions?
- Acute fluid collection
 - Acute pseudocyst
 - Sterile pancreatic necrosis
 - Infected pancreatic necrosis
19. The most common site of skeletal metastases in carcinoma of the breast is
- Pelvis
 - Skull
 - Lumbar vertebrae
 - Thoracic vertebrae
20. The inability to flex the index finger is a sign of
- Ulnar nerve injury
 - Radial nerve injury
 - Median nerve injury
 - Dupuytren's contracture
21. Consider the following findings with reference to a diagnostic peritoneal lavage (DPL) in a case of abdominal trauma :
- 10 ml of gross blood on aspiration
 - W.B.C. count more than 500/cu mm
 - Amylase level more than 175 IU/dL
 - R.B.C. count more than 100,000/cu mm
- The criteria for a positive DPL are :
- 1 and 2 only
 - 3 and 4 only
 - 1, 2 and 3 only
 - 1, 2, 3 and 4
22. Following radical surgery for the carcinoma of breast, reconstruction of the breast can be performed by using the following procedures *except*
- Silicon implants
 - Latissimus dorsi flap (LD flap)
 - Transversus abdominis muscle flap (TRAM flap)
 - Deltopectoral flap

23. A Wolfe graft is a
- Partial thickness skin graft
 - Pinch skin graft
 - Small full thickness skin graft
 - Pedicle graft
24. The following hallmarks characterise Diaphyseal aclasis *except*
- Pseudoarthrosis is common
 - Genu valgum can be found
 - Chondrosarcoma may occur in less than 1% cases
 - It is inherited as an autosomal dominant dysplasia
25. The most common complication of a Colles' fracture is
- Malunion
 - Delayed union
 - Non-union
 - Sudeck's osteodystrophy
26. The indications for surgery in patients with pulmonary tuberculosis include all of the following *except*
- Severe life-threatening haemoptysis
 - Drug-resistant chronic tuberculous abscess
 - Aspergilloma within a tuberculous cavity with recurrent haemoptysis
 - AFB positive sputum with normal chest CT scan
27. Inhaled foreign bodies are more likely to get lodged in the right main bronchus because
- Left main bronchus is wider and shorter
 - Left main bronchus is narrow and wide
 - Right main bronchus is shorter, wider and nearly vertical
 - Right main bronchus is shorter, narrower and lies horizontally in relation to trachea
28. In a patient with stage I (confined to mucosa and submucosa) transitional cell carcinoma of the urinary bladder, the recommended treatment is
- Trans urethral resection of bladder tumour (TURBT)
 - Radical cystectomy
 - Radiation therapy
 - Systemic chemotherapy
29. In patients with systemic hypertension, the characteristic haemorrhage seen on ophthalmoscopy is
- Dot haemorrhage
 - Subchoroidal haemorrhage
 - Flame-shaped haemorrhage
 - Wet sponge haemorrhage
30. Spring catarrh is a type of conjunctivitis caused by
- Bacterial infection
 - Exogenous allergen
 - Virus infection
 - Endogenous toxins

31. A localized nodule of squamous cell carcinoma in the vocal cord is best treated by
- Cryosurgery
 - Surgical excision
 - Radiotherapy
 - Laser therapy

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

List I (Observed associations)	List II (Syndromes)
A. Turcot syndrome	1. Café-au-lait spots
B. Neurofibromatosis II	2. Desmoid tumours
C. Neurofibromatosis I	3. Bilateral schwannomas
D. Gardner syndrome	4. CNS tumours

Code :

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

33. In a head injury victim, which of the following is the most common initial manifestation of an increasing intracranial pressure ?
- Change in the consciousness level
 - Ipsilateral pupillary dilatation
 - Contralateral pupillary dilatation
 - Hemiparesis

34. Stored blood which has been preserved in a blood bank is deficient in which of the following coagulation factors ?

- II only
- II and VII
- V and VIII
- IX and X

35. Consider the following statements in respect of congenital hypertrophic pyloric stenosis :

- The condition is more common in males.
- The investigation of choice is ultrasonography.
- Hypertrophy is maximal in the prepyloric region.
- The condition presents within the first week of birth.

Which of the statements given above are correct ?

- 1 and 2 only
- 2, 3 and 4 only
- 1 and 3 only
- 1, 2 and 4 only

36. The complications of prolonged parenteral hyperalimentation may include the following *except*

- Cholestatic jaundice
- Hyperphosphataemia
- Hyperosmolar acidosis
- Hyperammonaemia

37. The following statements regarding Meckel's diverticulum in adults are true *except*

- (a) It is a remnant of omphalomesenteric duct
- (b) It usually presents on the anti-mesenteric border of small intestine
- (c) Bleeding is a common complication
- (d) It should be removed if detected incidentally during an abdominal exploration

38. Consider the following statements :

Branchial cysts :

1. are associated with tracks passing between the carotid bifurcation.
2. usually present in early adulthood.
3. occur along the lower one-third of the anteromedial border of the sternocleidomastoid muscle.
4. develop from the vestigial remnants of the fourth branchial cleft.

Which of the statements given above are correct ?

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

39. Regarding laparoscopic cholecystectomy, which of the following statements is *correct* ?

- (a) It is primarily done for cholecystitis in the third trimester of pregnancy
- (b) It is associated with higher rate of bile duct injuries than open cholecystectomy

(c) It is contraindicated in acute cholecystitis

(d) It is safer than open cholecystectomy in patients with cardiorespiratory disease

40. The "Subclavian steal syndrome" occurs due to

(a) Occlusion/stenosis of the vertebral artery

(b) Occlusion/stenosis of the carotid artery

(c) Occlusion of the subclavian artery proximal to origin of vertebral artery

(d) Occlusion of the subclavian artery distal to origin of vertebral artery

41. Which of the following hormones is the best indicator of maternal-foetal-placental unit ?

(a) Prolactin

(b) Human placental lactogen

(c) Progesterone

(d) Estriol

42. During a normal pregnancy, the changes occurring in the urinary tract include the following *except*

(a) Increase in the Glomerular filtration rate

(b) Dilatation of the ureters

(c) Elevation and thickening of the trigone

(d) Hypertonicity of the ureteric smooth muscle

43. The daily requirement of calcium during normal pregnancy is
- 250 mg
 - 500 mg
 - 1000 mg
 - 2000 mg
44. A 35-year-old woman who has completed her family shows a positive Pap smear {Cervical intraepithelial neoplasia III (CIN III)}. What is to be done next?
- Simple hysterectomy
 - Wertheim's hysterectomy
 - Conisation
 - Cryotherapy
45. While making a pelvic assessment in a gravid woman at term, the obstetrician can measure with the examining finger the following diameter
- Diagonal conjugate
 - True conjugate
 - Diameter of pelvic inlet
 - Obstetric conjugate
46. The perinatal complications of a diabetic pregnancy include:
- Small for Gestational Age baby
 - Stillbirth
 - Hypoglycaemia
 - Respiratory distress syndrome
- Select the correct answer from the code given below:
- 1 and 4 only
 - 1 and 2 only
 - 1, 2 and 3 only
 - 2, 3 and 4 only
47. Antimicrobial prophylaxis is essential for a woman in labour who has
- Hypertension
 - Renal disease
 - Diabetes mellitus
 - Heart disease
48. A nulliparous woman presents with acute lower abdominal pain. She has a history of missed periods. The ultrasound examination shows an empty uterus. The cervical movements are very tender. The vital signs are stable. How will you manage her?
- Treat her as a case of Pelvic Inflammatory Disease
 - Perform a laparotomy
 - Admit her for observation
 - Perform a laparoscopy
49. In a pregnancy complicated by heart disease, which of the following is/are *contraindicated*?
- External cephalic version
 - LSCS
 - Corrective surgery of the heart lesion
 - Prophylactic intravenous methergine at the birth of anterior shoulder
- Select the correct answer from the code given below:
- 1 only
 - 1 and 3 only
 - 4 only
 - 1, 2, 3 and 4

50. During a routine prenatal visit, a 22-week gravid woman is found to be affected with ankle oedema and new onset hypertension. The urine analysis reveals marked proteinuria. Which of the following, if it were to occur, would substantiate the diagnosis of eclampsia?
- Molar pregnancy
 - Hyperuricaemia
 - Seizures
 - Thrombocytopenia
51. The umbilical cord contains
- Two arteries and one vein
 - Two veins and one artery
 - Two arteries and two veins
 - One artery and one vein
52. In a gravid woman with placenta praevia, the following foetal complications are known to increase
- Congenital malformations
 - Intrauterine growth retardation
 - Prematurity
- Select the correct answer from the code given below:
- 1, 2 and 3
 - 1 and 2 only
 - 2 and 3 only
 - 1 and 3 only
53. A pregnant woman with 16 weeks gestation is diagnosed to have an ovarian cyst of 11 cm diameter. The best timing for the removal of the ovarian cyst is
- Immediately
 - At the time of caesarean section
 - Immediately after delivery
 - Three months after delivery
54. The maternal serum alpha-fetoprotein concentration is elevated in the following conditions *except*
- Multiple gestation
 - Foetal neural tube defect
 - Foetal osteogenesis imperfecta
 - Gestational trophoblastic disease
55. In the quadruple test conducted as a part of second trimester screening for Down's syndrome, the fourth marker which has been added to the triple test is
- PAPP-A
 - Inhibin-A
 - Human Placental Lactogen (HPL)
 - Acetylcholinesterase
56. A fourth-gravida with three living children presents at 38 weeks of pregnancy with abdominal pain and vaginal bleeding. On examination, the uterus is tense and tender, and the foetal heart sounds are absent. What is the probable diagnosis?
- Accidental haemorrhage
 - Placenta praevia
 - Vasa praevia
 - Ectopic pregnancy

57. A "double bubble" sign on an antenatal ultrasound examination in a gravid woman is diagnostic of
- Anencephaly
 - Hydronephrosis
 - Duodenal atresia
 - Meningomyelocele
58. A 25-year-old woman with a history of three consecutive abortions has been investigated thoroughly to determine the cause of recurrent pregnancy loss. In the absence of a demonstrable cause, what is the chance of a viable birth in subsequent pregnancy?
- Less than 20%
 - 20-30%
 - 40%
 - 60%
59. In a woman with molar pregnancy with a uterus size of 28 weeks, the treatment of choice is
- Medical induction with prostaglandins
 - Hysterotomy
 - Hysterectomy
 - Suction evacuation
60. Foetal anaemia can be detected non-invasively by Doppler ultrasonography on the basis of an increase in the
- Peak systolic velocity of the anterior cerebral artery
 - SD ratio in the anterior cerebral artery
 - Peak systolic velocity of the middle cerebral artery
 - SD ratio in the umbilical artery
61. As per the Government of India guidelines, the daily dose of elemental iron recommended for prophylaxis during pregnancy is
- 50 mg/day for 100 days
 - 100 mg/day for 100 days
 - 150 mg/day for 100 days
 - 200 mg/day for 100 days
62. A pregnant mother is referred with a prolonged second stage of labour. On examination, the foetal heart sound is 120/min, and the head is at -1 station with severe moulding. What will be the most appropriate management?
- Apply obstetric forceps and deliver
 - Apply ventouse and deliver
 - Perform LSCS
 - Start pitocin drip
63. A multiparous patient presents with 36 weeks of pregnancy in labour. On examination, the cervix is fully dilated. The foetal heart rate is 170/min, and the head is at +2 station. What will be the most appropriate management?
- Wait for the normal delivery
 - Apply ventouse and deliver
 - Apply forceps and deliver
 - Perform LSCS
64. The most common cause of secondary postpartum haemorrhage is
- Intrauterine infection
 - Subinvolution of uterus
 - Oestrogen therapy administered to inhibit the lactation
 - Retained fragments of placenta or membranes

65. The respective hormones responsible for the breast milk secretion and ejection are (in that order)
- Oxytocin and Prolactin
 - Prolactin and Oxytocin
 - Oestrogen and Prolactin
 - Prolactin and Oestrogen
66. A 37-week small-for-date neonate is *not* likely to develop
- Hypocalcaemia
 - Hypoglycaemia
 - Hypothermia
 - Hyaline membrane disease
67. Which of the following haematological parameters does *not* undergo a physiological increase during normal pregnancy?
- Blood volume
 - Red cell volume
 - Leukocyte count
 - Platelet count
68. A 40-year-old woman presents with excessive menstrual bleeding. The most appropriate first surgical treatment will be
- Hysteroscopy
 - Myomectomy
 - Dilatation and curettage
 - Hysterectomy
69. A 15-year-old unmarried girl presents with complaints of dysmenorrhoea for the last about one year. She achieved menarche at 12 years of age. On abdominal and rectal examination, she has no abnormality. What will be the most appropriate management?
- Prescribe antibiotics
 - Prescribe clotrimazole vaginal ovules
 - Reassure her and prescribe analgesics
 - Perform dilatation and curettage
70. Asherman's syndrome typically results from
- Excessive curettage during dilatation and curettage
 - Post-partum haemorrhage
 - Prolonged usage of oral contraceptives
 - Use of intrauterine contraceptive device
71. A 30-year-old woman with three children has dysfunctional uterine bleeding. What will be the most appropriate management?
- Abdominal hysterectomy
 - Medical management with danazol
 - Transcervical endometrial resection
 - Levonorgestrel-releasing intrauterine device

72. The following hormonal changes mark the Polycystic Ovarian Disease *except*
- (a) Hyperinsulinaemia
 - (b) Hyperandrogenism
 - (c) Raised LH, Raised FSH
 - (d) Raised LH, Low-to-normal FSH
73. A 13-year-old, obese, unmarried girl presents with the history of amenorrhea and cyclical abdominal pain. On examination, the secondary sex characters are found to be well developed. What should be the next step?
- (a) Carry out the progesterone challenge test
 - (b) Assess the TSH and Prolactin levels
 - (c) Carry out a per-rectal examination
 - (d) Keep her under observation for the next three months
74. A woman who has secondary amenorrhea experiences withdrawal bleeding following progesterone administration. What is the likely diagnosis?
- (a) Anovulation
 - (b) Premature ovarian failure
 - (c) Hypothalamic amenorrhea
 - (d) Asherman's syndrome
75. A woman of child-bearing age develops a second-degree uterine prolapse with supravaginal elongation of the cervix. What will be the most appropriate management?
- (a) Amputation of the cervix
 - (b) Fothergill's operation
 - (c) Vaginal hysterectomy and pelvic floor repair
 - (d) Sling operation
76. The diagnostic criteria for bacterial vaginosis include the following *except*
- (a) Vaginal pH < 4.5
 - (b) Homogenous vaginal discharge
 - (c) Presence of clue cells
 - (d) Positive whiff test
77. The absence of fructose in the seminal fluid indicates a defect of
- (a) Testicular tubular epithelium
 - (b) Seminal vesicles
 - (c) Leydig cells
 - (d) Hypothalamic-pituitary axis
78. A woman, who is in the reproductively active age group, presents with a history of greenish and frothy vaginal discharge. On per speculum examination, she has multiple punctuate strawberry-like spots. What is the likely diagnosis?
- (a) Candidiasis
 - (b) Trichomoniasis
 - (c) Gonococcal vaginitis
 - (d) Chlamydia infection
79. A 60-year-old woman presents with postmenopausal bleeding per vaginum. Both per vaginum and per speculum examination reveal no abnormality, and the Pap smear is normal. What will be the most appropriate management?
- (a) Keep her under observation
 - (b) Administer haemostatics
 - (c) Measure endometrial thickness with ultrasound
 - (d) Hysterectomy

80. The following are the branches of the anterior division of internal iliac artery *except*
- (a) Superior rectal artery
 - (b) Middle rectal artery
 - (c) Inferior vesical artery
 - (d) Uterine artery
81. The genetic inheritance of Haemophilia is
- (a) Sex-linked dominant
 - (b) Sex-linked recessive
 - (c) Autosomal dominant
 - (d) Autosomal recessive
82. The causative organism of Chancroid is
- (a) *Haemophilus ducreyi*
 - (b) *Donovania granulomatis*
 - (c) *Chlamydia trachomatis*
 - (d) *Psittacosis lymphogranuloma group*
83. Hormonal contraceptives are *contra-indicated* in women
- (a) less than 25 years of age
 - (b) who are normotensive
 - (c) who have thromboembolic disorders
 - (d) who have anaemia
84. Herd immunity is *not* seen in
- (a) Poliomyelitis
 - (b) Measles
 - (c) Diphtheria
 - (d) Tetanus
85. Which micronutrient supplement should be administered during an acute episode of diarrhoea ?
- (a) Iron
 - (b) Copper
 - (c) Calcium
 - (d) Zinc
86. The use of condom for protection against sexually transmitted diseases qualifies as
- (a) Primordial prevention
 - (b) Health promotion
 - (c) Specific protection
 - (d) Secondary prevention
87. Child survival index is the percentage of children surviving till the age of
- (a) 1 year
 - (b) 3 years
 - (c) 5 years
 - (d) 15 years
88. The chemoprophylaxis in malaria is an example of
- (a) Primary prevention
 - (b) Secondary prevention
 - (c) Primordial prevention
 - (d) Tertiary prevention

89. The "risk of a disease" is measured by the
- Prevalence Rate
 - Incidence Rate
 - Case Fatality Rate
 - Communicability Rate
90. The "Relative Risk" of 0.25 indicates
- 75% reduction in the incidence rate in the exposed individuals compared with the unexposed
 - 25% increase in the incidence rate in the exposed individuals compared with the unexposed
 - 2.5% times higher risk in the exposed individuals compared with the unexposed
 - 75% risk increase in the exposed individuals compared with the unexposed
91. Which of the following constitutes "Secondary Prevention" ?
- Health Education Programme
 - Wearing Safety Helmets
 - Using Limb Callipers
 - Screening Tests
92. The installation and usage of sanitary latrines by general public constitutes which level of prevention ?
- Health promotion
 - Specific protection
 - Early diagnosis and treatment
 - Disability limitation and rehabilitation
93. "Sampling error" occurs due to the variation in results
- between one sample and another
 - between the observations of two individuals
 - due to the use of many instruments in the study
 - due to the multiple readings taken on the same instrument
94. Match List I with List II and select the correct answer using the code given below the Lists :
- | List I
(Chemical Contaminant) | List II
(Harmful effect) |
|----------------------------------|-----------------------------|
| A. Lead | 1. Wrist drop |
| B. Coal Tar | 2. Leukaemia |
| C. Aniline dye | 3. Lung cancer |
| D. Benzol | 4. Bladder cancer |
- Code :
- | | A | B | C | D |
|-----|---|---|---|---|
| (a) | 1 | 3 | 2 | 4 |
| (b) | 3 | 1 | 4 | 2 |
| (c) | 3 | 1 | 2 | 4 |
| (d) | 1 | 3 | 4 | 2 |
95. Which one of the following indicators does *not* include the value of a person's height in its formula ?
- Quetelet's index
 - Ponderal index
 - Lorentz's formula
 - Corpulence index

96. Which of the following insecticides is a natural contact poison ?

- (a) Lindane
- (b) Carbaryl
- (c) Rotenone
- (d) Propoxur

97. In measles, when do the Koplik's spots appear ?

- (a) On the day that fever occurs
- (b) On the day that rashes appear
- (c) 1-2 days before the rashes appear
- (d) 1-2 days before the fever occurs

98. Which of the following is covered under spiritual dimension of health ?

- (a) Balance of rationality and emotionality
- (b) Meaning and purpose of life
- (c) Quality of interpersonal ties
- (d) Harmony within individual

99. The ratio between incidences among exposed and non-exposed persons is called

- (a) Attributable risk
- (b) Positive predictive value
- (c) Relative risk
- (d) Odds ratio

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

List I
(Disease)

List II
(Active food toxicant)

- | | |
|--------------------|-------------------------------------|
| A. Lathyrism | 1. <i>Aspergillus flavus</i> |
| B. Epidemic dropsy | 2. Beta oxalyl amino alanine (BOAA) |
| C. Aflatoxicosis | 3. Pyrrolizidine alkaloids |
| D. Endemic ascites | 4. Sanguinarine |

Code :

- | | A | B | C | D |
|-----|---|---|---|---|
| (a) | 3 | 4 | 1 | 2 |
| (b) | 2 | 1 | 4 | 3 |
| (c) | 3 | 1 | 4 | 2 |
| (d) | 2 | 4 | 1 | 3 |

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

List I
(Disease)

List II
(Common Vectors)

- | | |
|--------------------------|----------------------------------|
| A. Japanese encephalitis | 1. Reduviid bug |
| B. Kala-azar | 2. Tsetse fly |
| C. Sleeping sickness | 3. <i>Phlebotomus argentipes</i> |
| D. Chagas disease | 4. Culicine mosquitoes |

Code :

- | | A | B | C | D |
|-----|---|---|---|---|
| (a) | 1 | 2 | 3 | 4 |
| (b) | 1 | 3 | 2 | 4 |
| (c) | 4 | 3 | 2 | 1 |
| (d) | 4 | 2 | 3 | 1 |

102. A new drug is to be evaluated for its therapeutic effect. The best study design will be

- (a) Cross sectional survey
- (b) Case control design
- (c) Natural experiment
- (d) Randomized controlled trial

103. Consider the following criteria for a "screening test":

- 1. Disease should have a latent period
- 2. Condition (disease) should be rare
- 3. Disease should be amenable to treatment

Which of the above must be satisfied before including a screening test into any programme ?

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

104. "Risk ratio" is utilised to calculate the

- (a) Relative risk
- (b) Attributable risk
- (c) Population attributable risk
- (d) Odds ratio

105. Consider the following characteristics of biological agents :

- 1. Infectivity
- 2. Pathogenicity
- 3. Virulence
- 4. Communicability

Among the above characteristics, which are used to measure the ability of biological agents to induce clinically apparent illness ?

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

106. The Framingham Heart Study is an example of

- (a) Case control study
- (b) Cohort study
- (c) Randomised Controlled Trial
- (d) Cross sectional study

107. 'Mid-year population' is *not* the denominator of which mortality rate ?

- (a) Crude death rate
- (b) Age specific death rate
- (c) Weekly death rate
- (d) Proportional mortality rate

108. The best indicator for the measurement of "completed family size", that is the number of children a woman would have through her reproductive years is
- General fertility rate
 - Total fertility rate
 - Gross reproduction rate
 - Net reproduction rate
109. Under the DOTS strategy of Revised National Tuberculosis Programme, the recommended line of management in Category I patients, if the sputum is positive after 2 months of Intensive Phase treatment with 4 drugs, is to
- Start the continuation phase of treatment with INH and Rifampicin
 - Continue the Intensive Phase of treatment with 4 drugs for 1 more month only, regardless of sputum positivity after that
 - Continue the Intensive Phase of treatment with 4 drugs until the sputum becomes negative
 - Add one more drug, that is, to use 5 drugs until the sputum becomes negative
110. A 15-month-old child presents with fever and cough since the last two days, the respiratory rate is 55/min and there is no in drawing of the chest. According to the National Programme for Acute Respiratory Infections, the line of management should be
- Immediate referral of the child to hospital for urgent admission
 - Referral of the child to hospital for admission, after administration of first dose of antibiotic
 - Administration of antibiotic at home along with treatment for fever, advising the mother to return for reassessment after two days
 - Administration of treatment for fever at home, advising the mother to return after two days for assessment of the need for an antibiotic
111. Basophilic stippling of the RBCs is a sensitive index of
- Lead poisoning
 - Arsenic poisoning
 - Asbestosis
 - Silicosis
112. Which one of the following is the correct sequence of appearance for the Hepatitis B virus serological markers ?
- Anti-HBe, HBsAg, Anti-HBc, HBeAg
 - HBsAg, HBeAg, Anti-HBc, Anti-HBe
 - Anti-HBc, HBsAg, Anti-HBe, HBeAg
 - HBeAg, Anti-HBe, Anti-HBc, HBsAg