

1.name five causes of distended uterus.

leiomyoma
pregnancy
adenomyosis
endometrial polyp
choriocarcinoma

2.give the composition of ors.

nacl 3.5 g (60 nm)
kcl 1.5 g (20 nm)
sodium citrate 2.9 g (30 nm)
glucose 20 g (110 nm)

3.what are the risk factors of surgical infection?

- poor surgical technique
- metabolic disease (diabetes, jaundice)
- immuno suppression
- poor perfusion (local ischemia or systemic shock)
- foreign body material

4.name the causative agent of:

i. plague yersinia pestis
ii. anthrax bacillus anthracis
iii. diphtheria corynebacterium diptheriae
iv. trachoma chlamydia trachomatis
v. leprosy mycobacterium leprae

5.what are the complications of ludwig's angina?

airway blockage
generalised infection
septic shock

6.what are the possible adverse reactions of blood transfusions?

- congestive heart failure
- transfusion reaction
- infections
- coagulation failure
- thrombophlebitis
- air embolism

7.name the complications of pneumonia.

para-pneumonic effusion
empyema
retention of sputum causing lobar collapse
development of thrombo embolic disease
pneumothorax – particularly with staphylococcus aureus

8.give five causes of pathological sinus bradycardia.

myocardial infarction
hypothermia
hypothyroidism
sinus node disease (sick sinus syndrome)
cholestatic jaundice

9.name the different cerebellar signs.

hypotonia
postural changes and alteration of gait
disturbance of voluntary movement (ataxia)
dysdiadochokinesia
disturbances of reflexes (pendular knee jerk)
disturbance of ocular movement (nystagmus)
disorder of speech (dysarthria)

10.name five anti retro viral drugs.

indinavir
ritonavir
zalcitabine
zidovudine
abacavir

11.what is the active management of third stage of labor?

i.v. ergometrine is given following the birth of anterior shoulder.
the placenta is delivered by the controlled cord traction soon after the delivery of the baby availing first uterine contraction.
if the first attempt fails, another attempt is made after 2-3 minutes failing which another attempt is made at 10 minutes.
if this still fails, manual removal is done.
finally oxytocin 5-1- units i.v. is given.

12.give the clinical features of iridocyclitis.

circumcorneal injection occurs.
there may be white specks visible on the posterior surface of the cornea. (keratitic precipitates)
the pupil may be constricted and irregular due to the formation of adhesions (posterior synechiae) between the edge of the pupil and the anterior surface of the lens.
photophobia

short answer questions:

five complications of radiotherapy?
five complications of dka (diabetic ketoacidosis)?
extended program of immunization
five clinical features of intussusception?
treatment of csom (chronic suppurative otitis media)
treatment of ectopic pregnancy.
usg in third trimester.
assessment of pem
classification of leprosy
five skin manifestations of hiv aids
methods of nutritional assessments?

multiple choice questions:

a newborn child with heart rate 88, poor cry, minimal respiratory effort, hypotonic with slight movements of the arm . what is the apgar score?

a child with pustules along with maculopapular rashes. what is the diagnosis? ans: chicken pox

least antiemetic inducing preanesthetic drug: thiopentone, propofol, na valproate, ketamine ans. propofol

rx of three spike wave (absence seizure)? ethosuximide, na valproate, phenytoin, acth

rta with head injury with gcs 9 most likely to be given fluid is? rl, ns, 5% dextrose, dns

7m child with b/l wheeze during winter ans bronchilolitis

a dyspnic pt. comes with decreased vical freitus, dull on percussion, trachea shifted to opposite side ans. pleural effusion

thyroid surgery – which nerve get damaged, ans. recurrent laryngeal nerve

appendix perforate which one is true: a. not common in <2yrs, management is same in pregnanat, common in children, murmur – ans: rheumatic heart disease

indication for caeserian section

fb in ear extraction – what is the temperature of the warm water 31-32, 33-34, 35-36, 36-37

pre vaccination requirement

an 18 year old girl brought to er with respiratory depression, miosis, profuse secretions, bradycardia etc. ans: op poisoning
in which bone disease methotrexate used: paget's, perthe's, oa, osteomyelitis.
how long scabies remains without treatment, 3wk, 3 month, 1yr, infinite.
all are present in rigor mortis except: mol. death, duration of 12-18 hr, (2 more option could be remember)
what is the least common of eclampsia : headache, proteinurea, blurring of vision, epigastric pain

what is a felon? ans: a suppurative abscess in distal phalanx of finger.

why there is hypertension in spinal anaesthesia ans is vasomotor stimulation.

dissociation is more common in mania, schizophrenia, depression, what do you give in alcohol withdrawal? thiamine, haloperidole, vit. b12,
what do you give in vt ans is xylocard.
a 3 yr child weighing 10 kg with sever dehydration can't take orally, to answer this question be familiar with fluid calculation.

6 wk pregnant, come with vaginal bleeding, usg suspect ectopic pregnancy which one is the best next possible investigation, beta hcg, leproscopy, x-ray abdomen

a man dies on plain crash, which one is identifying feature: skull x-ray, pelvic x-ray, dental x-ray, chest x-ray.

chemoprophylaxis is indicated in all except, pellagra, hepatitis a, cholera,

causative agents for portal hypertension ans. cistosomiasis

where is the defect in muscular dystrophy? ans. dystrophin

a pt. come with chronic non healing ulcer suger is 26 mmole what may be the possible diagnosis - tropical ulcer, tubercular ulcer, malignant ulcer, syphilitic ulcer

which organism causes anaemia - scaris lubricoud, t. saginata, t. trichuriasis, pig tape worm

1. what is called the poor mans meat?
pulses

2. which of the following is the commonest site of endometriosis?
ovary

3. what is the target value of imr?
answer: ____

4. what is the dose of tt given in pregnancy?
in case of previously un-immunized cases, two doses of 0.5 ml tt im at 6 weeks interval, first between 16-24 weeks. in previously immunized, a booster dose of 0.5 ml im in last trimester.

5. in the health centre a boy 10 years old comes with colles fracture. which kind of anaesthesia would you give?

infiltrating anesthesia

6. what would be the most suitable treatment for a fracture of neck of femur in a 40 year old male who comes to you after two days?
closed reduction and internal fixation

7. where do you find pulsus biferans?
• combined aortic stenosis and regurgitation
• pure aortic regurgitation

• idiopathic hypertrophic subaortic stenosis

8. where do you find mid diastolic murmur, pansystolic murmur, and early diastolic murmur altogether?
please search the answer yourself.

9. a patient with a fracture of neck of femur comes with a complaint of dyspnoea. why do you think has happened?
fat embolism

10. which of the following fractures is best healed?
spiral

11. painless hematuria occurs in:
please find the answer yourself.

12. carcinoma of bladder is a type of: _____

13. a 70 year old man comes with a history of dysuria, what may be the most liable cause?

14. which is the most commonly injured organ during penetrating injury to abdomen?
stomach

15. rashes and abdominal pain is suggestive of –
henochs schlein purpura.

16. which of the following is the diagnostic investigation of choice in case of trauma to chest?
chest x-ray

17. which of the following is the drug that causes gum hypertrophy?

18. which of the following causes joint pain as the most common adverse effect?
pyrazinamide

19. which of the following drugs causes steven johnson syndrome?
carbamazepine

20. what is the indication for tympanectomy?
hematoma

21. colostrum contains the highest amount of-

22. allergic conjunctivitis-

23. what is the clinical finding in whooping cough?
subconjunctival hematoma

24. what is the clinical symptom that suggests psychosis?
hallucinations

25. neurosis – transient

26. which of the congenital heart disease doesn't cause heart failure?
tetralogy of fallot

27. what is the genetic make up in a case of turner's syndrome?
45x0

28. white discharge is seen in cervicitis. (there were other options as well)

29. commonest agent that cause vaginitis- candida albicans

30. which of the following is not the clinical feature of fibroids –
menorrhagia

31. which of the following is the most dangerous tumour of the female genital tract? – ovarian tumour

32. bph- turp

33. which of the following is the commonest causative organism of upper uti? – e coli

34. post streptococcal glomerulonephritis causes nephrotic syndrome

35. when is iucd applied? – 5th day of menstruation

36. which nerve is damaged in carpal tunnel syndrome? –median nerve

37. which of the following viruses is a dna virus? –hepatitis b

38. vertical transmission is seen in – hepatitis b

39. hepatocellular carcinoma can be caused by- hepatitis b virus

40. what is the concentration of oxygen in umbilical cord? ans is 20.009

41. what would be the most suitable treatment for a boy with hypothyroidism? l-thyroxine

42. what is the most common cause of post partum hemorrhage? uterine atonia

43. which of the following is the feature of beriberi disease? absent dorsalis pedis

44. allergic dermatitis is caused by- nickel

45. which of the following is used as a protection against x-ray radiation? - lead

46. what do these features suggest: -acute viral conjunctivitis

47. trachoma is caused by chlamydia trachomatis

48. in children what is the most common cause of unilateral nasal obstruction with foul smell? foreign body obstruction.

49. what would you do in a hypertensive patient who comes with epistaxis? anterior nasal packing and glycerine.

50. all are true about mumps except-

- always bilateral
- associated with testicular pain
- vaccine is effective

51. what is the commonest mode of infection of leprosy? – droplet

52. partial dislocation of joint is called- subluxation.

53. which of the following is secondary skin lesion?

- atrophy
- wheal
- macule
- pustule

54. three month infant with projectile non-bilious vomiting and palpable mass in the right hypochondrium

- duodenal atresia
- congenital hypertrophic pyloric stenosis
- gastric cancer

nmle question september 2, 2006 - 12-09-2006, 07:42 pm

the day before exam was a horrifying situation, receiving different calls ..and question papers. however after receiving question paper we had a mixed feeling, neither happy nor sad!!! none of the questioned

was there on the following day. so this is our small effort to share these questions that we came in our nmle exam. we tried our level best to recollect all the questions but we couldn't you know its human mind.

so, our suggestion is "healthy internship is the best way to pass nmle exam."

best of luck for those who will appear in the future nmles.

long question

- give five causes of gradual painless loss of vision.
- 40 yr old man presented with enlarged vein in the neck diagnosed to have retrosternal goiter, write four other symptoms associated with this disease.?
- name five regional organizations of WHO with their location.
- south east asia – new delhi, india.

answer:

- africa – brazzaville, congo.
- the americas – washington dc, usa.
- europe – copenhagen, denmark.
- eastern mediterranean – alexandria, egypt.
- western pacific – manila, philippines.

- give five causes of postmenopausal bleeding.
- give five causes of hoarseness of voice.
- give five causes of cyanotic heart disease.
- name five organisms responsible for causing dysentery in children in nepal.
- a 50 yr old man smoker and alcoholic since last 30 yrs presented with icterus and abdominal distension what is the most likely diagnosis? name three investigations to diagnose the condition. (ans: alcoholic liver cirrhosis. inv – lft, ascitic fluid analysis, ugi, usg ect)
- a 14 yr old child gives the history of continuous fever since last seven days. on examination temp 102 f, pulse 80/min, bp 120/80 mm of hg, chest and cvs normal, splenic tip palpable. what is the most likely diagnosis? write two investigations to support your diagnosis and treatment plan.
- 8 week pregnant woman presented with pain abdomen and brownish discharge per vagina give your differential diagnosis and how will you manage it.
- name five components of phc (primary health care) in nepal.

short questions:

1. 60 yr old man presented with generalized swelling of the body and shortness of breath. on examination there is pulsatile liver. what is the expected finding?

- a. pulsus bisferiens
- b. prominent v wave on jvp
- c. systolic murmur increased during expiration
- d. oxygen saturation

2. a 14 year old boy presented with fever, chest pain, cough on examination temp 101 f, percussion – dullness in the right subscapular region with bronchial breath sound.

- a. bronchopneumonia is the diagnosis
- b. wheezes are expected

- c. crackles are expected
- d. all of the above

3. a 60 yr old man presented with left sided chest pain, on ecg there is st segment elevation in lead ii, iii and avf with reciprocal depression in lead avl and i. what is the diagnosis?

- a. anterior wall mi
- b. posterior wall mi
- c. inferior wall mi
- d. lateral wall mi

4. 16 yr old boy gives the history of continuous fever of last 7 days on examination temp 104 f, pulse 90/min with coated tongue, chest, cvs, p/a are normal, what is the probable diagnosis?

- a. malaria
- b. kala-azar
- c. enteric fever
- d. tuberculosis

5. 12year old male c/o of fleeting joint pain and arthritis with subcutaneous nodule .On ecg there is increased pr interval .what is your diagnosis?

- a.typhoid fever
- b.rheumatic fever
- c. kala azar
- d. tb

6. 60 yr old female c/o swelling in the body ,cold intolerance, slowness in activity. o/e pulse -54/min with delayed relaxation of knee jerk. her blood examination will show-

- a.high cholesterol
- b.low estrogen
- c.low tsh
- d.high cortisol

7. serum cretinine level in mg% is

- a. 0.4-1.4
- b. 1.2-1.8
- c. 1.9-2.5
- d. 2.0-3.6

8. following antitb drug is

- a. isoniazid
- b.pyrazinamide
- c.rifampicin
- d.ethambutol

9. 8+weeks old pregnant presented with pain abdomen and vaginal bleeding

vitals stable.diagnosis is

- a. incomplete abortion
- b. complete abortion
- c. threatened abortion
- d. ectopic pregnancy

10. a doctor is graded good in the society

- a. by the knowledge he possesses
- b by the skill he possesses
- c.good behaviour in the society

11. socialization means

- a. to adapt social norms and values
- b. started in soviet union
- c. socialist revolution

12 contraceptive preventing std and hiv

- a. ocp
- b. condom
- c. dutch cap
- d. cu-t

13 true about .uv prolapse

- a. occurs in nulliparous
- b. aggravated by cough
- c. pessary is the permanent treatment

14.nephrotoxic drug is

- a. gentamycin
- b. amoxycillin
- c. cephalosporin

15.drug that is avoided in pregnancy

- a. tetracyclin
- b. amoxycillin
- c. cefixime

16.commonest complication of ovarian cyst-

- a. torsion
- b. infection
- c. haemorrhage
- d. rupture

17. a boy c/o fever ,headache and vomiting showed maculopapular rashes all over the body . the organism is

- a.staph. aureus
- b. meningococcal
- c.ecoli

18. a 3yr old boy is c/o cough since the last 100dys with repeated episodes of vomiting. the diagnosis is

- a. whooping cough
- b. tb
- c. bronchiolitis

19. 70 yr old man with dm2 developed bpof 160/100 .the drug of choice.

- a. enalapril
- b. amlodipine
- c. propranolol
- c. atenolol

20. imr is mortality of

- a. <1yr old
- b. <30 days old
- c. <5yr old
- d. <10 yr old

21. xerophthalmia is caused due to deficiency of

- a. vit a
- b. vit b
- c. vit c
- d. vit d

22. a 72 yr old man is c/o gradual painless of vision with cloudy papillary reflex .the diagnosis is

- a. cataract
- b. retinal detachment
- c. glaucoma

23. quinsy is pus in

- a. peritonsillar space
- b. retropharyngeal space
- c. submandibular space

24. frontal sinus in x-ray appears in

- a. 1yr
- b. 2yrs
- c. 5yrs
- d. 10yrs

25. a 36 yr old man presented on and off fever ,weight loss and abdominal distention.on ascetic tap tc-300/cu.mm dc - 98%lymphocytes protein-4gm%.the diagnosis is

- a. tb
- b. sle
- c. hepatitis
- d. crf

26. 25 yr old man is c/o fever on and off ,weight loss and sob. o/e decreased breath sound on rt.side with dull percussion on rt.subcoastal region .best inv. would be

- a. cxr
- b. ct scan
- c. pleural tapping and biochem analysis
- d. mantoux test

27. insulin is secreted by

- a. beta cells
- b. alpha cells
- c. delta cells
- d. gama cells

28. a 64 yr old man is having icterus with distended gall bladder

- a. ca pancreas-head
- b ca pancreas tail
- c. hepatitis
- d. cirrhosis

29. a patient on 3rd post op day developed low urinary output - 10ml/hr .cvp-2cm bp 90/60. what will you do?

- a. dopamine
- b. catheter
- c. fluid challenge
- d. observe

30. 7th day old neonate with features of septicaemia .the drug of choice is –

- a. penicillin +gentmycin
- b. iv ceftriaxone
- c. penicillin only

31. 60yr old nam c/o ill health ,wt loss .on inv tc-48000 dc-97% lymphocytes with predominant small ones without splenomegaly. the diagnosis is –

- a. cll
- b. all
- c. cml
- d. aml

32. hepatitis causing epidemic is

- a.hep a
- b.hep b
- c.hep c
- d.hep d

33. fat droplets in faeces is seen in

- a. chronic pancreatitis
- b. acute panretitis
- c. cirrhosis

34. 1 yr old with fever, cough and sob in the winter season. the diagnosis .the diagnosis is

- a. acute bronciolitis
- b. pneumonia
- c. tb

35. development of second molar tooth occurs at the age of

- a. 8-10 yr
- b. 10-12 yr
- c. 12-14 yr
- d 14-16 yr

36. which of the following require consent?

- a. ml autopsy

- b.age estimation
- c.rape victim case

37.gcs is the estimation of

- a.head injury
- b.<2 incompatible with life
- c.was introduced by dr.ferguss glasgow

38.in mumps

- a.pancreatitis is a known complication
- b.orchitis occurs in <1 yr old
- c.vit aa def can occur

39.2yr old male is c/o red congestion of eye, fever with maculopapular rashes .the diagnosis is

- a. measles
- b. conjunctivitis
- c.typhoid

40.neck of indirect hernia is in

- a.lat to inf .epigastric artery
- b.medial to inf epigastric artery
- c.superficial to deep ring
- d.deep to inguinal ligament

41.16 yr old male with pain in the left testis sudden in onset.rt. testes is normal.the

- diagnosis is –
- a hydrocele
- b.torsion
- c.spematocele

42.swelling in post. triangle of neck in 3yr old child with transillumination

- positive cyst is .
- a.ranula
- b.dermoid
- c.cystic hygroma

43.colles fracture occurs in

- a.young adults
- b.middleaged
- c. elderly
- d.children

44. green stick fracture occurs in

- a.children
- b.middle aged
- c.elderly

45.hormone that can be given orally

- a.gh
- b.insulin
- c.thyroxine

46.the variable which divides the distribution into two equal parts a mean

- b.mode
- c.median
- d. range

47.clinical staging is done in

- a.ca cervix
- b.ca. uterus
- c.ca. endometrium

48.6mth yr old presented with meningitis

- the common organism is
- a.streptococcus pneumoniae
- b.h.influenzae
- c.grp b streptococcus

49.alcohol withdrawl causes

- a.psychoses
- b.neuroses
- c.conversion disorder
- d.schizophrenia

50.hysteria is a type of

- a.psychoses
- b.neuroses
- c.psychosomatic disorder

51.most common cause of rupture spleen

- a.malaria
- b.trauma
- c.leukemia
- d.infectious mononucleosis

52.female sex worker has a highest risk of transmitting hiv whenthere is

- a genital wart
- b.genital ulcer
- c.urethral discharge
- d. mollusum contagiosum

53.health for all was declared at

- a.alma ata
- b.zurich
- c.kenya
- d

54.amother with hiv should avoid

- a.breast feeding
- b.

55.64 yr old man presented with haematuria with no history pain abdomen and feverand burning micturition.

- a.ivu
- b.cystoscopy
- c.ct scan

56.common cause of rewctal bleeding in a1yr old child is

- a.rectal polyp
- b.fissure
- c.haemorrooid

57.30 yrs old man presented with lump in the breast,firm innature with no palpablelymph nodes.the diagnosis is

- a.fibroadenoma
- b.fibroadenosis
- c.carinoma

58.8th post op day a man developerd sob with no other chest findings and swelling of left leg .the diagnosis is

- a. chest infection
- b.pulmonary embolism
- c.

59.true about corpus luteum

- a.secretes mainly progesterone
- b.lasts for 21 days
- c.made up of theca cells

60.a dead body was found warm and flaccid.the death has occurred in

- a.3hrs
- b.6hrs
- c.12hrs
- d.24hrs

61.haemphiliaa is due to deficiency of

- a.factor 8
- b factor 9
- c.factor 10
- d factor 6

62.!st sign in diabetic retinopathy

- a.av nipping
- b.microaneurysm
- c.retinal haemorrhage

63.a child with acute severe asthma should be immediately treated with

- a.iv steroid
- b.nebulised salbutamol
- c.amoxycillin

64.absolute indication for amputation of foot

- a.gangrene
- b.septicemia

65.there is increasing size of toxic nodule which is excised.cause of excision is

- a.suspicion of malignancy
- b.cosmetic purpose

66.steroid is indicated in

- a.asthma
- b.tb
- c.pneumonia

67.bence jones protein is seen in

- a.multiple myeloma
- b.tb
- c.sle

68.argyl robertson pupil is seen in

- a.syphilis
- b.retinal detachment
- c.cataract

69.time of iucd insertion is

- a. after menstruation
- b 28th day
- c 1st day if menstruation

70.cast in both bone fracture should be applied from

- a. forearm to wrist
- b. below elbow to neck of metacarpal
- c above elbow to neck of meta carpal

71.a patient with cervical injury is is brought to er .ist thing to do is

- a.airway maintainance
- b.iv collar
- c.iv fluids

72.2nd stage of labour occurs after

- a.delivery of baby
- b .full dilatation of cervix
- c..onset of labour pain

73.true about brachial plexus

- a.arises from c5-t1
- border of arrangement is vein artery and nerve

74.caloric test is done for the function of

- a.vestibule
- b.cochlea
- c.facial nerve

75.a6month yr old female ishas sob , previous6 cynotic attacks and

has clubbing.the
diagnosis is
a.tetralogy of fallot
b.pneumonia
c.bronchiolitis

76.a new yr old newborn has short stature with webbed neck ,slanting eyes,curved nail .the diagnosis is
a.turner's syndrome
b.kliene felter's syndrome
c.mucopolysaccharides

77.which of the following is a pre malignant condition ?
a. leucoplakia
b. metaplasia
c....

- compiled by: dr. saurav & dr. khem, kmc

nmle december 23, 2006
held in iom nursing campus,
time 8.00 - 11.00 am

saq (12 x 5 = 60)

1) 35 yrs old chronic alcoholic man taking alcohol since last 10 yrs has bp 200/120 mm hg.

- what are the possible organ damage due to his condition ?
- what would you advise him for investigation ?
- what suggestion would you give to him. ?

2) 35 yrs male presented with pain epigastrium and malena. on ugi endoscopy pt has du.

- what is the causative organism ?
- what t/t would you prescribe him

3) contraindication of ocp

4) complication of frontal sinusitis

5) causes of postmenopausal vaginal bleeding in 60 yrs female

6) write the health determinants of nepal

7) how will you remove hardness of water

8) case question : d/d and diagnostic criteria for rheumatodi arthritis

9) 14 yrs of male presented with vomiting, pain over lt testis since 4 hrs. the patient looks tense and toxic

- what is your clinical diagnosis
- what investigation will u do to support your diagnosis
- what is the management?
- what will u advice for prophylaxis to avoid such in future.

10) jaundice in neonate developed in 4th day (case)

- what clinical sign will u look for
- investigation

11) 35 yrs old male farmer presented with pain, red eye, congestion, photophobia over lt eye. pt also gives h/o paddy plant trauma in the field. on exam pt had ant hypophyon 3x 2 mm size,.

- what are your d/d
- what is your clinical dx
- what will you examine and investigate
- write 4 drugs used in t/t

12) intestinal bowel resection done about 1.5 m, on 5th post op day, pt

had 2 lit urine output, 1.5 litre ng drain, abdominal distension, no flatus, absent bowel sound. on inv. potassium 2.4 mmol/l , sodium : 135 mmol/l, urea : 7, creatinine : 75, tc : 10,000 /cu.mm n 73 % .l 17 % , fbs : 5 mmol/l

- what is the clinical condition called
- what is the abnormal lab. finding
- what could be the cause
- management of this condition

dear friends, we had promised you all to post here the questions of the nmle held on 4th february 2006, we tried our best and have collected as many questions as we could and here they are. the examinees who we met at the exam place felt that the examination was getting more and more standard and obviously more difficult these days. i think it's a good move. and as far as these questions are concerned, i think it would be better if you search the answers yourself. so, i have not listed the answers here and about some of the mcqs i could not collect the exact options, and i have only mentioned the questions so please, help yourself.....i am extremely sorry about that. i wish this will be of some help to you all....

short questions:

1. list five causes of metabolic alkalosis.

2. list the complications of colostomy.

3. give the incubation periods of:

- mumps:
- measles:
- rubella:
- typhoid:
- hepatitis b:

4. give the full forms of:

- unicef
- sars
- phc
- cphc
- mmr

5. a 60 year man comes with a mass in upper abdomen. the usg showed a cystic mass, what could be the differential diagnosis?

6. outline the basic management and complications of ovarian cyst.

7. give the indications of following drugs:

- methotrexate
- cycloserine
- streptokinase
- sodium valproate
- d- penicillamine

8. what are the possible routes of spread of liver abscess?

9. what are the criteria for tracheostomy?

10. a child, 2 years old, comes with a complaint of stridor and fever. what could be the possible differential diagnosis?

11. a 30 year old female comes with a swollen right eye. what could be the possible causes?

12. name four absolute contraindications for oral contraceptive pills.

the mcqs are:

1. most of the thyroid cancers arise from:
 - i. parafollicular cell
 - ii. lymphoid follicle
 - iii. follicular cell
 - iv. connective tissue
2. which of the following anti-hypertensive drug is contraindicated in pregnancy?
 - i. methyl dopa
 - ii. nifedipine
 - iii. hydralazine
 - iv. ace inhibitors
3. anti-hypertensive of choice in pregnancy induced hypertension is:
 - i. methyl dopa
 - ii. diuretics
 - iii. calcium channel blockers
 - iv. vasodilators
4. an infant presents with persistent jaundice, what could be the most likely cause?
 - i. most commonly occurring value
 - ii. the middle value
 - iii. least occurring value
 - iv. the highest value
5. mode is :
 - i. most commonly occurring value
 - ii. the middle value
 - iii. least occurring value
 - iv. the highest value
6. the probability of a test to come as positive in diseased person is called:
 - i. sensitivity
 - ii. specificity
 - iii. positive predictive value
 - iv. negative predictive value
7. a child suddenly presents with dyspnoea, the most common cause is:
 - i. asthma
 - ii. foreign body aspiration
 - iii. acute exacerbation of copd
 - iv. pulmonary embolism
8. downs phenomenon is:
9. ovarian artery is a branch of
10. dangerous placenta previa is
11. tb becomes non-infectious by
12. thyroglossal cyst is a cyst of
13. after anesthesia, failure to breathe is due to
14. fracture of neck of femur in 70 years elderly can be best treated by.....
15. treatment duration in lepromatous leprosy is
16. oligomenorrhoea is
17. mycoses fungoidis is
18. infertility is said to be present when the couple can't conceive by
19. a newly married couple wants to delay pregnancy for next 2 years so what will be the best contraceptive of choice for them?
 - i. condom

- ii. ocp
 - iii. iucd
 - iv. copper-t
20. retrograde ejaculation is common after
 21. in pem there is:
 - i. weight for age is decreased
 - ii. height for age is decreased
 - iii. weight for height is decreased
 - iv. weight is increased but height is decreased
 22. treatment of choice in stage iib hodgkins disease is
 - i. chemotherapy
 - ii. radiotherapy
 - iii. physiotherapy
 - iv. surgical excision
 23. drug used for pediculosis capitis in children is
 24. flask shaped ulcer is found in
 - i. bacillary dysentery
 - ii. amoebic dysentery
 - iii. typhoid
 - iv. ulcerative colitis
 25. thrombocytopenia is not a feature of
 - i. itp
 - ii. hsp
 - iii. dic
 - iv. all of the above
 26. antithyroid drug of choice in elderly patient is
 27. in quartan malaria, fever spikes over every
 - i. 24 hrs
 - ii. 48 hrs
 - iii. 72 hrs
 - iv. 96 hrs
- here are few questions asked in nmle 4th feb,2006

- 1.write down the full form of the followings
 - a) unicef=united nations international children's emergency fund
 - b)sars =severe acute respiratory syndrome
 - c)mmr =measles mumps rubella
 - d)phc =primary health centre
- 2.write down the incubation periods
 - a) measles=7-14days(n.r.10days)
 - b) mumps =12-21days("18days)
 - c)hepatitis b=6weeks-6months(12weeks)
 - d)typhoid fever=7-21days
 - e)chicken pox =14-21 days(21days)

other probable
 bacillary dysentery (2-5days)
 amoebiasis14days -months(21days)
 malaria 8days -months
 poliomyelitis 3dya -21days
 hepatitis a 2-6weeks
 leprosy =years(2-5years)
 rabies =variable (2-8weeks)
- 3.sources of infection(pyogenic liver abscess)
 - infection through portal vein =acute appendicitis ,acute amoebic colitis etc.
 - infection through the common bile duct =stricture of the cbd,cholangitis etc.

-infection through the hepatic artery =septicaemia and pyaemia etc.
-extension abscess=penetrating injuries etc.
-infection through umbilicus =neonatal umbilical sepsis giving rise to pyaemia etc.

4.drug of choice
methotrexate=rheumatoid arthritis
phenytoin=epilepsy
streptokinase=myocardial infarction

5.55 years old man underwent colostomy , now you would like to explain him about the complication ,hat are the complications?

-colostomy bleeding ,necrosis,retraction,prolapse,colostomy diarrhoea.

6.67 years old man on usg mass on the upper abdomen diagnosis was not made what are your provisional diagnosis?

-amoebic hepatitis
-hydatid cyst
-ca of the liver
-subphrenic abscess
-intussusception
-pseudopancreatic cyst

7. swelling over the right eye ,what are the possible diagnosis?

-corneal oedema(glaucoma)
-stye
-hordeolum internum,acute dacryocystitis
-orbital cellulitis
-orbital abscess
-endophthalmitis

8.45 years female,usg diagnosed ovarian cyst .definitive management what complications could occur if not managed in time?

-non neoplastic enlargement of ovary

a)follicular cyst -disappear spontaneously within a few weeks to months when symptoms like amenorrhoea are prolonged stimulation of post-ovulatory change by administering oral medroxy progesterone 10mg tds over a period of 5-7days
.clomiphene citrate 50mg given orally for 5 consecutive days helps to induce ovulation and brings about menstruation or pregnancy

b)follicular haematoma:asymptomatic/no clinical significant

c)lutein cysts of the ovary :
granulosa lutein cysts most cysts resolve in due course of time,observation
theca lutein cyst=spontaneous regress

d)pcos(polycystic ovarian syndrome)

usg -subcapsular cysts of varying size

treatment -wt. loss help in restoring the hormonal milieu to some extent

-avoid cigarette smoking
-oestrogen suppresses androgen and adrenal production
-dexamethasone 0.5mg /prednisone 5mg at bed time decreases androgen production

-hirsutism is treated with cyproterone acetate

-infertility is treated with clomiphene .80%ovulate and 40%conceive

treatment of benign ovarian tumour

in young patient
-ovarian cystectomy
-ovariotomy (or salpingo -oophorectomy)
when any doubt about innocence of the tumour

parous women and age >45 years
-total hysterectomy with bilateral salpingoophorectomy

ovarian tumour with pregnancy
-continue pregnancy upto full term if no complication
-if no delivery occurs remove the tumour in puerperium
-if tumour impact in the pouch of douglas caeserean section and remove the tumour in same sitting
-if causing obstructed labour.caeserean section and remove tumour
-if any complication immediate surgery

treatment of malignant ovarian tumour:

1.
surgery
definitive surgery :total hysterectomy with bilateral salpingoohorectomy ,appendicectomy and omentectomy(partial /total)

conservative surgery:unilateral salpingoophorectomy (young patient ,desire offspring ,tumour limited only in ovary)

2.

radiotherapy
3.

chemotherapy
adriamycin 50mg/m²
cyclophosphamide 500mg/m²
cisplatin 50mg/m²

cp=cyclophosphamide 750-1000mg/m²
cicplatine 50-100mg/m²

drugs are given i.v.on day 1 every 4 weeks interval for 6-8 cycles.
4.

paracentesis

complications

torsion of the pedicle
intracystic haemorrhage

infection
rupture of a cyst
degeneration
malignancy
intestinal obstruction

9.write down the criteria for tracheostomy
respiratory obstruction
infection -acute laryngo-tracheo-bronchitis
acute epiglottitis,ludig angina
trauma - injury of larynx and trachea

neoplasm - benign and malignant neoplasmof larynx ,pharynx,foreign body of larynx

oedema of larynx

retained secretion -cva ,head injuries etc.
painful cough -chest injuries ,multiple rib fractures, pneumonia
,aspiration of pharyngeal secretion

respiratory insufficiency

10.causes of metabolic alkalosis(high ph,high co2)

-due to loss of acid eg.vomiting nasogastric suction
-hco₃ may be retained in exchange for loss of cl⁻ as in diarrhoea
-due to excessive administration of alkali eg. nahco₃ administration
antacid abuse
-when h⁺ are lost in excess in exchange for k⁺ eg.severe
hypokalaemia
-primary or secondary hyperaldosteronism.

11.2 years child brought to you with a h/o fever and stridor what are
your possible diagnosis

-acute laryngitis ,laryngomalacia
-acute epiglottitis
-laryngotracheobronchitis
-laryngeal trauma,laryngeal oedema

12.contradication of oral contraceptive pills

absolute -
circulatory disease -
arterial /venous thrombosis
severe htn
valvular heart disease ,ihd
focal migraine
liver disease
others-pregnancy
undiagnosed genital tract bleeding

relative
-obesity
-varicosities
-epilepsy
-depression
-age>35 years
-smoking
-bronchial asthma

i tried to gather all of the questions ,but some are missing if u can try
to grab those , i did my labour best to answer as well do comment me
or else try to search the best answers good bye

in near future i will provide other keep waitin bye bye

multiple choice questions

- a patient came with swelling in inguinal region which increased in size,tachypnoea,tachycardia,absent bowel sounds & in painful condition.

- strangulated hernia
- obstructed hernia
- irreducible hernia

2. 10 month old child fever & convulsions. tlc=250 dc = 90%
glucose=40%
lymphocytes=10% protein=26%

- encephalitis
- tubercular meningitis
- pyogenic meningitis
- febrile convulsions

3. cadaveric spasm indicates.
- patient was in motion b4 death
- starts in voluntary muscles
- similar to rigor mortis

- who ors contains

- na⁺ in less
- k⁺ in less
- glucose in excessive amount
- dextrose in less amount

- ringer's lactate

- contains more na⁺ than in plasma
- is used because it contains all electrolytes in equilibrium with plasma
- contains less na⁺ than in plasma
- contain less k⁺ in plasma

- right recurrent laryngeal nerve hooks around

- thyroid
- right main bronchus
- subclavian artery

- 60 years old patient bph with htn is under going for turp under spinal

anaesthesia which drug will you give?

- pentazocine
- alprazolam
- propanolol
- atropine

8. g2p1 32 weeks pregnant came with vaginal bleeding & painless uterine

contractions, what is diagnosis?

- prom
- preterm labour
- premature labour
- abruption placenta

9. g2p1 37 weeks pregnancy came but fhs negative & she was having abdominal

pain, what will you do?

- arm
- c/s
- wait for house officer

10. nifedipine causes

- tachycardia
- bradycardia
- increase cardiac output
- decreases cardiac output

11. child was having <70% of body wt & later he developed oedema,15 days fever, what is likely diagnosis?

- marasmus
- kwashiorkor
- marasmic kwashiorkor

12. definite host for e. granulosus is

- man
- dog
- sheep
- cow

13. most common cause of otitis media is children

- csom
- asom
- ossicle fusion
- ome

14. second stage of labour in primigravida lasts for

- 1-2 hr
- 2-3 hr
- 3-4 hr
- <1 hr

15. ectopic pregnancy mostly occurs at

- 4-6 weeks
- 6-8 weeks
- 8-10 weeks
- 10-12 weeks

16. ocp causes

- vaginal moniliasis
- breast cancer
- endometrial cancer
- menorrhagia

17. most common type of breast cancer in nepal.

- medullary
- intraductal
- lobular
- papillary

18. 35 yrs old lady came with painless thyroid nodule what will you do?

- surgery
- radio-iodine
- antithyroid drugs

19. e. granulosus is transmitted by ingestion

- of faeces, containing ova, of dog
- of faeces, containing ova, of sheep
- of liver of sheep containing e. granulosus

20. direct questions are allowed in

- cross examination
- dying deposition
- dying declaration

21. which of following doesn't cause liver cirrhosis?

- alpha 1 antitoxin deficiency
- sarcoidosis
- cystic fibrosis
- haemochromatosis

22. most suitable outcome of tetanus occurs when

- patient comes late in hospital
- patient has short course of disease
- patient has long course of disease

23. nutritional deficiency is best corrected

- at nutritional training centres
- at hospital
- when person takes enough food (available)

24. which of the following is less likely in gas gangrene?

- crepitus
- khaki coloured skin
- amputation
- pain

25. a mother brought 18 month old child having fever 104degree fever & convulsions

protein ,glucose is normal in c.s.f what is likely diagnosis?

- meningitis
- sah
- encephalitis
- febrile convulsion

26. cardiac output in pregnancy isn't affected by-

- heart rate
- heat surrounding
- stroke volume
- -----

27. which of the following isn't intracranial complication of asom?

- meningitis
- encephalitis
- facial nerve paralysis
- lateral sinus thrombophlebitis

28. infant mortality rate in 2006 is

- 64
- 51
- 41
- 101

29. a child (malnourished) brought by her mother to health camp has

whitish cornea, what is diagnosis?

- xerophthalmia
- toxocara endophthalmitis
- cataract

30. primigravida excessive vomiting in pregnancy which has deleterious effect upon health of mother & fetus, what is it?

- hepatitis
- pancreatitis
- hyper emesis gravidarum

31. diabetes mellitus is best diagnosed by-

- p.p blood sugar > 11.1mmols
- fasting blood sugar > 7mmols/l

32. putrefaction is delayed in which poisoning?

- arsenic
- molybdenum
- manganese
- selenium

33. which is false about caput succedaneum?

- appears immediately after birth
- disappears at 2-6 weeks

34. which disease is transmitted both by water & air?

- hepatitis
- typhoid
- cholera
- yellow fever

35. which doesn't transfers active immunity?

- antitetanus toxin
- cholera vaccine
- rabies vaccine

36. cvp reflects
- rt atrial pressure
- cardiac output
- cerebral & renal perfusion

37. patient with ascitis, when percussed an abdomen it was resonant as the percussion is done lat side it was dull. patient is turned & again lateral side s percussed now it's resonant? what is sign called?

- shifting dullness
- puddle sign

38. lady came with bilateral nasal obstruction, poor hygienic condition & has smell from nose noticed by others. what is diagnosis?

- ozaena
- hyper tropic rhinitis
- rhinosporidiosis

39. antidote for warfarin is

- heparin
- vitamin k
- protamine sulphate

40. person came with abdomen pain, tachycardia, liver dullness masked. what is diagnosis?

- acute pancreatitis
- acute appendicitis
- perforated peptic ulcer

41. drug which is mydriatic with little cycloplegic action.

- atropine
- phenylephrine
- homatropine
- pilocarpine

42. in rickets which of the following is seen

- parathormone
- calcium
- alkaline phosphates

43. causes of death in crf

- hyperkalimia
- hypokalimia
- hypocalcimia

44. haemodynamic complication of massive blood transfusion.

- citrate intoxication
- dic
- thromboembolism

45. which drug of choice in op poisoning?

- atropine
- pilocarpine
- pam

46. pseudomonas is treated with

- ceftazidime
- cefotaxime
- ceftriaxone

47. common cause of corneal ulcer in nepal

- pneumococcus
- streptococcus
- fungal ulcer

48. diabetic patient who is hypertensive came & on fundoscopic examination flame shaped haemorrhage seen. what is next thing you would like to do?
- blood ulcer
- measure b.p

49. continuous murmur in children

- vsd
- pda
- aortic stenosis
- tof

50. 2 yrs old child cyanosis in lip & clubbing in fingers. what is diagnosis?

- tof
- pda

51. which of following is fluid filled lesion?

- pustule
- vesicle
- wheal

52. 50 yrs old patient has itching & on scraping silvery white lesions are present. what is diagnosis?

- psoriasis
- dermatophytosis
- scabies

53. which of following contains rash of all stages?

- chicken pox
- measles
- herpes

54. a school teacher has feeling that every time she has to beat children & she has guilty for that. she tried a lot to avoid this thinking from her mind. what is diagnosis?

- depression
- mania
- ocd

55. thought block is seen in

- schizophrenia
- depression
- psychosis
- neurosis

56. anti maniac drug is

- na valproate
- carbamazepine

57. patient has sputum +ve tuberculosis & x-ray showed cavitory lesion which drug would you like to give?

- shrze
- hrze

58. baby has cough with subconjunctival haemorrhage

- whopping cough
- tetanus
- typhoid

59. the chance of getting true positive in case is called as

- specificity
- sensitivity

60. the patient had small cell carcinoma of lung, what is treatment that you

would like to give?

- radio therapy
- chemo therapy
- labectomy

61. the patient had small nodule in breast which undergo change during menses.

what is it?

- fibro adenoma
- fibro adenosis
- carcinoma

62. during subtotal thyroidectomy patient developed sudden onset of dyspnoea.

what is likely cause?

- tracheal haematoma
- tracheal perforation

63. structures not to be preserved in modified radical mastectomy is

- cephalic vein
- pectoralis minor
- long thoracic nerve
- thoracodorsal nerve

64. cubitus varus deformity is seen in

- supracondylar fracture of humerus
- lateral condylar fracture of humerus
- galaezzi fracture

65. most common complication in intracapsular fracture of neck of femur is –

- non union
- mal union
- delayed union

66. foot drop because of trauma in popliteal region is seen in

- common peroneal nerve palsy
- sciatic nerve palsy
- tibial nerve palsy

67. maturity of fetus in usg is best determined by

- bpd
- biparietal diameter

68. hypertensive male has right sided hemiplegia, which of following can't be seen in him?

- blowing of cheek in & out with respiration
- tongue pointing towards side of lesion

69. on auscultation of right side of adult male at interscapular, infra axillary &

inframammary regions following are seen –

- a. absent breath sounds
- b. dull note
- c. decreased chest movement. what is diagnosis?

- rt. lower lobe lung collapse
- rt. medial lobe lung collapse
- pleural effusion
- pericardial effusion

70. neonates are those

- who are <28 days old
- who are more than 28 days old
- who are 1 month old
- who are after 28 weeks of gestation & 7 days of life

71. perinatals are those

- who are late fetuses but early neonates

- who are 1 year old

72. most common problem of lbw but appropriate for date babies in nepal

- infection
- asphyxia
- choking

73. hepatitis serum conversion is best denoted by

- hbsag
- hbcag
- hbeag
- anti – hbsag

74. the child has abdominal pain, non bilious vomiting, what is diagnosis?

- congenital hypertrophic pyloric stenosis
- intestinal obstruction
- lymphoma

75. 50 yrs old female came with complaint of vaginal bleeding. what is suitable for her?

- usg
- colposcopy
- cervical biopsy
- endometrial biopsy

76. boy has sudden onset of abdominal pain with vomiting on left side, which

worsened when testes was elevated. what is diagnosis?

- testicular torsion
- epididymo – orchitis

77. ejaculation is controlled by

- somatic
- sensory
- parasympathetic
- sympathetic

78. g3p1 on 36wks pregnancy painful uterine contractions. what is diagnosis?

- prom
- preterm labour

79. 2 yrs old girl had webbed neck, coarctation of aorta. what is diagnosis?

- turner's syndrome
- down's syndrome
- klinefelter's syndrome

80. at high altitude person developed acute mountain sickness. what is treatment of choice?

- bring him down
- acetazolamide
- oxygen

81. i.d. bodies're found in

- malaria
- kala- azar
- typhoid
- paratyphoid

82. g2p1 on labour for 6hrs, membrane ruptured, head station +2, malrotated what is applied?

- forceps
- vacuum
- baby delivered by caesarean section.

there are 100 multiple choice questions could not remember 18 multiple choice questions....

long questions

1. patient had moon face, buffalo hump, abdominal stria.
 - a. what is rx & name at least two d/d
 - b. name two ivs to confirm diagnosis
 - c. name two radiological ivs which can be done in this case
2. 50 yrs old man with urgency frequency nocturia undergone turp
 - a. what was rx?
 - b. what is tumour marker for ca. prostate?
 - c. what are two sexual complications after prostatectomy?
 - d. what are changes noted in bladder when there is bladder outflow obstruction
 - e. name two drugs for bph
3. patient complaining of whitish vaginal discharge.
 - a. what is '4' differential diagnosis
 - b. diff. between fungal & amoebic discharge
 - c. what ivs will you do to confirm it?
 - d. what is treatment?
4. child 2yrs of age, maroon coloured faces & had agonizing pain, while crying
raise legs above abdomen.
 - a. what is diagnosis?
 - b. which organism is responsible for this?
 - c. what is treatment?
5. g2p1, at b.p of 150/100mm hg pulse 80 10/min, at 37 wks pregnancy.
 - a. what drug'll you give?
 - b. what are signs & ivs of this?
 - c. when'll you discharge patient?
 - d. what advise will u give if b.p is controlled? & if b.p isn't controlled?
 - e. what is drug of choice if it's associated with convulsions?
6. patient brought child with respiratory distress.
 - a. what're signs of respiratory distress?
 - b. what're confirmatory signs & dd?
 - c. what are ivs?
 - d. what is treatment?
7. patient had pain abdomen, with gb stone radiating to back, no bowel sounds.
aggravated while lying in supine position.
 - a. what is diagnosis?
 - b. what is it due to?
 - c. what are diagnostic criteria?
- 8a. what are major manifestations of rh fever?
 - b. which're the joints involved name 4?
 - c. what is least time for involvement of joint?

nmcle 2007 sept 22 (asoj 5, 2064)

total marks: 240
pass marks: 120
time: 12:00-2:00 pm (2hrs)
total mcqs: 100 (100x2=200 marks)
total sqas: 8 (8x5=40 marks)

1. which of the following is the most common hernia in women?
a.femoral b.indirect inguinal c.direct inguinal d.spigelian
2. a pt with lymphadenitis & sinus discharging white caseous material. the most likely diagnosis is?
a. tb
3. the most common cause of pid is?
a. chlamdia b. tb c. e coli
4. which of the following enzyme rise first in mi?
a. ast b. ck-mb c.ldh d. streptokinase
5. flaccid paralysis in nepal should be reported to
a. polio eradication centre b. kanti bal hospital c. health ministry
6. the most important clinical diagnostic feature of kwasiworkor is
a. edema b.flag sign c.weight loss d.neurological dysfunction
7. a lactating woman with 6 month old child has amenorrhea after deliver. she wants to use contraceptive. what must be advised?
a.ocp b.barrier method c. urine test for b-hcg
8. the most common cause of conductive deafness in children?
a.csom-aa b.csom-tt c.ome
9. the most common cause of unilateral foul smelling nasal discharge in children is?
a.foreign body b.sinusitis c. adenoids d.asom
10. which of the following must be given to a lactating woman?
a.iron b.calcium c.folic acid d.vit b
11. an adult with # shaft of femur, skeletal traction is done by
a. k-wire
12. a pt with a h/o # neck of femur came with a c/o pain after 2 yrs. most imp cause?
a.avascular necrosis
13. which of the following is not an aids criteria?
a.fever b.wt loss >10% c.cough d.diarrhoea
14. a 21-yr-old boy came with a c/o pain and tender abdomen. x-ray showed gas under diaphragm. cause?
a. appendicular perforation b.peptic ulcer perforation
15. a 2-yr-old child with respiratory rate >45 and indrawing chest. cause?
a.pneumonia b. severe pneumonia c.common cold
16. a child with uncomplicated rupture of tympanic membrane. what you do?
a.steroid and antibiotic drops b.iv antibiotics c.wait and watch d.immediate repair
17. which of the following reduces progression of the severity of copd?
a.oral b-agonist b.oral b-agonist+steroid c.smoking cessation
18. spider nevi is seen in
a. hand b. brain c.trunk d.palms
19. which is used for the radical treatment of malaria?
a.chloroquine b.quinine c.primaquine
20. rigor mortis starts from
a.lower jaw b.upper eyelids c.lower limbs
21. term pregnancy, normal vag delivery, still birth. cause?
a. dm mother b.iugr

22. which of the following is transmitted by water and air?
a.polio b.typhoid c.hepatitis

23. a man from terai with non-pitting edema. the most likely cause?
a.filaria b.polio c.dvt d.nephrotic syndrome

24. early morning sticky, red eye. cause?
a.conjunctivitis

25. diagnostic accuracy of a test is determined by
a predictive value b.specificity+sensitivity

26. a mother at a health camp brought her 2-yr-old malnourished child who had white patch on eye. cause?
a. cataract b.xerophthalmia

27. infant mortality rate in nepal
a.41 b.50. c.98 d.64

28. which of the following is acyanotic heart disease?
a.tof b.tricuspid atresia c.tga d.vsd without pulmonary hypertension

29. in tof there is vsd, pulmonary stenosis, rt ventricular hypertrophy, and?
a.asd b.overriding aorta c.coarctation of aorta

30. oxytocin
a.produced by pituitary gland b.ejection of milk

31. umbilicus is supplied by
a.t10

32. uterus is
a.supported mostly by broad ligament b.supplied by hypogastric nerve

33. the most common tumor of testis is?
a. seminoma b.teratoma c. lymphoma

34. att contraindicated in pregnancy?
a.inh b.rifampicin c.pyrazinamide. d.streptomycin

35. att causing uremia and gout?
a.inh b.rifampicin c.pyrazinamide. d.ethambutol

36. febrile convulsion in a child is best treated with
a.phenytoin b.diazepam c. ethos d.phenobarbital

37. antibodies detected in blood in typhoid
a.1st week b.2nd wk c.3rd wk d. 4th wk

38. obese dm type 2 pt. best drug?
a. sulphonyl urea b.metformin c.insulin d.rosiglitazone

39. dm pt with bp 160/95 mmhg, which anti-hypertensive is best?
a.nifedipine b.ramipril c.methyldopa

40. a child with cough for 1 month and there is subconjunctival hemorrhage. diagnosis?
a.whooping cough

41. which of the following is a proton pump inhibitor?
a.omeprazole b.cimetidine c.ranitidine

42. a pale looking farmer from biratnagar came for checkup. o/e he was anemic but other findings were normal. cause?
a.hook worm

43. # of a bone into >2 pieces
a.compound # b. communitied # c.simple #

44. menorrhagia mostly associated with
a. ca ovary b.fibroid uterus c.ca uterus

45. a driver having erythematous plaques with silvery scales. cause?
a.psoriasis

46. a 44-yr-old male patient with facial assymetry. on p/e touching the cornea of either eye with a cotton swab results in blinking of only one eye. he states that he feels the cotton swab touch in both eyes. diagnosis?
a. facial nerve paralysis b. trigeminal nv paralysis c.occulomotor nv paralysis

47. aciduria occurs in
a.met acidosis b. met alka c.resp acid. d.resp alkalosis

48. microcytic hypochromic anemia. which test?
a.schilling test b. hemoglobin electrophoresis c.g-6pd test

49. a woman in ravibhawan complains early morning sneezing, nasal obstruction and rhinorrhoea for a long period. o/e nasal turbinates are pinkish and edematous. cause?
a. vasomotor rhinitis b. allergic rhinitis c.nasal polyps

50. a child with radioulnar #. which anesthetic agent used?
a.ketamine

51. which anti-hypertensive agent can be given during pregnancy?
a. alpha-methyl dopa

52. a patient with previous reducible hernia, now presents with pain, tenderness and irreducibility. cause?
a.obstruction b.strangulation

53. a child...
a.mental retardation

54. cross transfusion means?
a.

55. a 6-week-old child with non-billious projectile vomiting. cause?
a. hyertrophic pyloric stenosis b. dodenal atresia c. intussuseption

56. commenest complication of chicken pox?
a.secondary infection b.meningitis c.pneumonia

57. a patient with gall stone suddenly develops pain abdomen, tachycardia and shock. cause?
a. acute pancreatitis

58. fluid filled lesion <1 cm diameter.
a.macule b.papule c.vesicle d.wheel

59. which sign in appendicitis?
a.iliopsoas b.murphy sign

60. few hours after subtotal thyroidectomy a pt develops dyspnea. cause?
a. hematoma b. rln paralysis

61. which investigation accrately diagnose pulmonary embolism?
a.contrast ct b.ecg c.chest x-ray

62. how to differentiate chronic bronchitis with asthma?
a.history taking b. chest x-ray

63. rashes in measles starts from
a.face b. trunk c.limbs

64. cause of neurocysticercosis?
a.t solium b. t saginata c.ascaris

64. a pt with red eyes and intropion of few eye lashes. cause?
a.trachoma b.glaucoma. c. cataract

65. height of a child doubles in
a.4 yr b.5 yr c. 3yr d. 2yr

66. child with fever and headache. csf: n 90% glu-dec,pro-increased.
cause?
a.pyogenic meningitis b.viral meningitis c. encephalitis

67. a pt fell from height and got # calcaneum. which other # is usually associated with it?
a. spinal # b. skull#

68. how do you check xii cranial nerve?
a. ask to protrude the tongue b.ask to say 'aah' c. ask to bend the neck

69. a pt with a h/o appendectomy develops distended rigid tender abdomen. on x-ray multiple air-fluid levels. cause?
a. intestinal adhesion

70. an agitated adult man, couldn't sleep properly at night, thinks he is superior to his colleagues, quarrels with coworkers, makes new ideas.
cause?
a. mania

71. a woman with white curdy discharge per vagina. cause?
a. moniliasis b.chlamydia c.trichomonas

short question answer

1. a carpet factory worker living in a crowded place presents with chest pain, evening rise of temperature, and mild weight loss.
a. cause?
b. investigations you want to order?
c. 2 treatments for this diagnosis.

2. a man presents with acute chest pain for 1 hour. on ecg there is st elevation >1mm.
a. cause?
b. investigations you want to do?
c. how do you manage this patient in a zonal hospital?

3. a newly married woman with 2 months history of amenorrhoea presents with vaginal bleeding.
a. d/d of this condition
b. write non-invasive investigations
c. how do you manage?

4. a child with fever, headache, vomiting, rashes on lower limbs.
a.diagnosis?
b.write 2 other tests which support your diagnosis
c. causative organism?
d. drg of choice?

5. a woman complains of fever on 4th postpartum day for 2 days.
a. 2 d/d
b. what 2 informations in this case supports your diagnosis?
c. how do you care this patient?

6. a toxic looking child presents with stridor and drooling.
a. diagnosis?
b. 3 d/d of this case?
c. which organism is responsible for this condition?
d. drug of choice?

7. a lactating woman presents with severe breast pain and swollen tender mass in the outer quadrant of the breast.
a. diagnosis?

b. 2 d/d
c. cause?
d. management?

8. smoking male complains of right leg pain with black patches of skin of right toe and left calf pain when he walks.
a. diagnosis?
b. what is intermittent claudication?
c. what is rest pain?
nmle questions 22th dec. 2007 - 27-12-2007, 04:16 pm

most common parotid gland tumour >> mixed (pleomorphic)

which of the following vaccine is live attenuated >> mumps measles bcg

which of the following is the complication of diphtheria >>myocarditis

in measles rashes starts from >> face trunk hand

which of the following is best method for the study of rare disease>> case control cohort experimeantal

illusion is >> false interpretation of stimulaii

anti-psychotic drg is indicated in >> schizophrenia anxiety diaorder depression

a child with odema an wt 70% >> kwasiyokar marasmus kwashiwokarmarasver

a child with ht 90% wt 80% with wide wrist jt, bowin legs >> shunted retarded rickets

koplik spot is seen in >> typhoid measles mumps.

a child with swellinnn on rt side of chick with tresmus, a student in his class is also sufferin from the same diseae >> mumps, parotid tumour

60yr male with horseness of voice n palpable ly node on supraclavicular ly node >> ca. larynx , recurrent nrv palsy, vocal cord nodule

most common cause of infection in pp fever >> clamydia

most commonly affected in pp sepsis>> endomentrium salphinx cervix vagina

21 ??yrs male with vomiting , visible peristalsis lt to rt , suc.splash + ,>> small bowel obs., grastic outlet obs., large bowel obs.
?? yr person sputum -ve tb on att now becomes sputum +ve after 2mt of therapy >> cnage to cat 1 chang to cat 2
moutoux test is best read after >>> 12 24 48 72 hrs (48)
2 mth old child can do >>>from motor developement
100ml of breast milk contains how much cal. >> 47 57 67 77 (67)
t/t of toxic nodule >> surgery medical radio iodine..
female on pp period with red hot tender rt breast >> i n d, aspirate to confirm brest absess, flucloxacillin an f/u after 2 days,
infectivity of hbv is indicated my >> hbeag, igmhbv
t/t of choice of t.solium > py, meb, alb, (praz)
oph. neonatarumi s caused by >> ghororra, stap, strep
pt with couldnot see far n near obj with pain eye>>> glaucoma, presy. ,
??/t of iritis >>atropin

with neoplasm usually venot mets at time of dia. > ssc, rcc, malig. melanoma, basal cell ca.
gomet insertion in >> glue ear, csom, asom...

ext. pyramadal rxn >> haloperidol

not adr of ketamin>> halucination, dissociative ana., inc. iop, bradycard.

iodine day >> ????
which doesn't cause empyema in child >> stap, strep, myco, n.

a clinical que from rheumatic hrt disease ??

a clinical que from ms??

comprehension ques. each carry 1 marks

9mth child ..

common cause of meningitis >> h inf
csf finding >> >100 wbc with neutro indominent
t/t >> cefuro..
common compli>??
one i can't remember

turner synd.

genetic abn > 46 x 45x 46 xxy 45xxy
common associaeed contd > vsd asd co. of aorta pda
common associated kidney disorder > horse shoe kidney
t/t >growth hormone
not found > ht tall, ht short,web neck

mi

in chest >2mm st elevation >> ant mi ,ant septal mi. , massive ant mi
drg for ?? reperfusion >> streptokinase?? , aspirin, gtn.
coz of death in 1st 24 hr >> venti arry, ccf....
which drg comb. prevent decrease pain n prevent remodelin >> o2
morphine b block, aspinin ace inhibit.
pansystolic murmur coz?>> vsd, mr ,ms

burn

to calculate % of burn <rule of nine>
fluid requirement (parkland formula)

nmcle poush 7 th 2064 (22 decmber 2007)

correct answers are given in bold italic letters. please help yourself
regarding unanswered questions and if any doubt about high lighted
answers

group a

1;which of the following is true
a;acidic drugs are best ionised in acidic medium
b;gentamycin is given i;v as it is unionised in git
c;aspirin;::::::::::;
d;

2;illusion is

a;mis interpretation
b;misbelief
c;false belief
d;false memory

3;b blocker should be avoided in

a;ht
b;arrhythmia
c;ccf
d;mi

4;a pt; with sputum negative pulmonary tb is treated with category 3
regimen of who for 2 months and he became sputum positive at the
end of 2 month;how will you treat this pt; further?

a;stop this regimen and start with cat=1
b;stop this regimen and start with cat;2
c;continue this regimen and recheck sputum at 5 months
d;switch to 2nd line drugs

5;clubbing is not found in

a;bronchiectasis
b;tuberculosis
c;left to right shunt
d;cystic fibrosis
compiled by dr. jj

6;a pt with organophosphorus poisoning is being treated by atropine
in the ward;his both pupils are dilated ;develops fever and is
tachypnoiec ;suddenly he develops convulsion;what will you
do;::::::::::;

a;start pralidoxime
b;give iv midazolam
c;give phenytoin
d;stop atropine and watch

7;a 35 years female has solitary thyroid nodule;what will you advice?

a;antithyroid drugs
b;surgery
c;radio iodine
d;observation

8;a 40 years male has developed bronchial asthma;what will you
advice

a;terbutaline nebulizer
b;steroid therapy
c;theophylline
d;montelukast therapy

9;1 gm hemoglobin combines with

a;1.35mlo2
b;2;35ml o2
c'0=35 ml o2
d;35 ml O2

10;which of the following antibiotic is c\i in suspected tb pt?

a;amoxycillin
b;tetracycline
c;ofloxacin
d azithromycin

11;paronychia is a infection of

a;nail bed
b'pulp of the nail
c;apex of the nail
d;base of the nail

12;a dehydratd pt has fever;which of the following complication
occurs first
compiled by dr. jj

a;respiratory acidosis
b;metabolic acidosis (please help yourself too)
c;respiratory alkalosis
d;metabolic alkalosis

13;which of the following is not the macrovascular complication of
dm

a;cad
b;cerebral thrombosis
c;peripheral neuropathy
d;

14;-----cause

a;endocarditis
b;myocarditis
c;pericarditis
d;pancarditis

15 a pt; came with alcohol poisoning in the emergency department where you are medical officer;what will you do

- a;give water
- b;give 3;5%hypertonic saline
- c;methyl alcohol (please help yourself too)
- d;ethyl alcohol

16; a poor farmer from phoolbari vdc near dhangadhi came in the opd without slipper and proper dress with the h/o loss of appetite ;weight loss and is icteric on examination;what could be the possible diagnosis-----

- a;amoebiasis
- b;giardiasis
- c;ascariasis
- d;hookworm infestation

17;diabetes is suspected if the fasting blood sugar is above

- a;116mg%
- b;126mg%
- c;140mg%
- d;200mg%

18;human milk provides

- a;47kcal
- b;57kcal compiled by dr. jj

c;67kcal (please help yourself too)

- d;77kcal

19;which of the following is not macrolides;;

- a;tetracycline
- b;azithromycin
- c;erythromycin
- d;rosithromycin

20; a person with damaged mitral valve develops endocarditis;the most common organism is;;;

- a;s;viridans
- b;staph epidemidis (please help yourself too)
- c;h;influenzae
- d;s;mitis

21;a 26 years male starts micturition;what will be the pressure inside urinary bladder?

- a;15
- b;25
- c;35
- d;45

22;a 6 moth child came in the opd with posterior triangle swelling in the neck;what could be the possible cause?

- a;thyroglossal cyst
- b;lipoma
- c;cystic hygroma
- d;thyroid swelling

23;a lactating mother came to your opd with right breast swelling;on examination found red;tenderness and swollen;;;suspect breast abscess

- what is your next step
- a;aspirate and confirm abscess (please help yourself too)
- b;give antibiotic and ask her to come after 3 days
- c;incision and drainage
- d;confirm abscess by ultrasound

24;vasectomy-most common complication

- a;hematoma
- b;varicocele compiled by dr. jj

c; spontaneous recanalization of cord
d;

25; a 27 years old male patient has found patent processus vaginalis;what could be the possible complication/diagnosis;;

- a;inguinal hernia
- b;direct hernia
- c;hydrocoele
- d;testiculour tumour

26;parotid tumour-most common

- a;
- b;
- c;
- d;

27;which of the following develops in the first post operative day?

- a;atelactasis
- b;fever
- c;dvt
- d;infection `1

28;a pt; suddenly presents mass outside the anal canal with some blood streaks in the stool;after 2 hrs later while defecation similar events occurred;what could be the most possible cause;;;;;;;

- a;hemorrhoids
- b;anal fissure
- c;anal fistula
- d;prolapse of the rectum

29;a pt with signs of dehydration and altered sensorium admitted to the emergency department with serum sodium level 115meq/l;which fluid will you prefer;;;;;;;

- a;5%dextrose
- b;0.9%nacl
- c;rl
- d;3=5%hypertonic saline
compiled by dr. jj

30;a 32 years old patient starts non bileous projectile vomiting with contains of food particles and has distended

a bdomen with visible peristalsis and circum splash is admitted in your ward;what could be your most probable diagnosis""

- a;gastric outlet obstruction
- b;small intestine obstruction
- c;large intestine obstruction
- d;esophageal stricture

31;a 2 months child can;;;

- a;hold head on ventral suspension
- b;has protective reflex against external stimuli
- c;
- d;

32;a child has 70%body wt of his expected wt at that age with oedema;;;which one is true

- a;marasmus
- b;kwashiworker
- c;stunted
- d;undernutrition

33;a moderately dehydrated child is in your hospital;what is the fluid requirement for first 4 hour

- a;100ml/kg
- b;75 ml/kg
- c;65ml/kg
- d;50ml/kg

34;a 8 years child with puffiness of the face and periorbital oedema which later develops in lower extremities;;what is the most probable cause?

- a;nephrotic syndrome
- b;nephritis -
- c;cushing syndrome
- d;downs syndrome

35;nephritis-false

- a;hypotension
- b;oliguria
- c;hematuria
- d;oedema

36;b- thalassemia-choose the correct one

a;both a and b chain increased compiled by dr. jj

b;both a and b chain decreased

- c;a chain increased and b chain decreased
- d;b chain increased and a chain decreased (please help yourself too)

37;adolescence period

- a;10-19years
- b;13-19years
- c;13-24 years
- d;8-27years

38;menorrhagia is a common feature of;;;:

- a;fibroid
- b;ca cervix
- c;ovarian tumour
- d;

39;uterus nerve supply

- a;hypogastric plexus
- b
- c
- d

40 uti in pregnancy--;safe drug

- a=ciprofloxacin
- b;nitrofurantoin
- c;ofloxacin
- d zentamycin

41;pid-commonest causative agent

- a;chlamydia
- b;ecoli
- c;salmonella
- d;streptococcus

42;a pregnant lady with blood group a positive needs immediate blood transfusion after delivery;but that blood group is not found;what will you do?

- a;give a neg; blood group
- b;give o negative blood group
- c;give ab positive blood group
- d; give b positive blood group

43;pap smear is taken from compiled by dr. jj

- a;anterior fornix
- b;lateral fornix
- c;all fornix
- d;cervix

44;38+w pregnant lady has developed painless bleeding per vagina without abdominal pain;commonest cause

- a;placenta previa
- b;abruptio placenta
- c; abortion
- d;still birth

45;anti tb drug avoided in pregnancy

- a=isoniazid
- b;rifampicin
- c;pyrazinamide
- d;streptomycin

46;a 42 + weeks pregnant lady with abdominal pain and not fully dilated cervix has done arm ;what will be your next step

- a;augmentation by oxytocin
- b;induction by oxytocin
- c;apply cerviprime gel locally
- d;give prostaglandin for induction

47;koplik spot is seen in

- a;measles
- b;typhoid
- c;chicken pox
- d;mumps

48;a 5 years old child has difficulty in opening the mouth; unilateral parotid swelling and few days before his classmate had also developed the similar swelling;what could be the most common cause;;

- a;diphtheria
- b;mumps
- c;tetanus
- d;rubella

49;most common complication of diphtheria

- a;peritonsillar abscess
- b;oral thrush compiled by dr. jj

c;myocarditis (please help yourself too)

d;meningitis

50;measles rashes first appears in

- a;face
- b;trunk
- c;abdomen
- d;hands

51;cysticercosis –drug of choice

- a;pyrantel pamoate
- b;albendazole
- c;niclosamide
- d;mebendazole

52;a pt with plasmodium falciparum malaria came to your opd;what will be your initial treatment

- a; tab;chloroquine base 600 mg followed by chloroquine base 300 mg in next 6 hr and 300 mg for 2 more days
- b;iv quinine with 10% dextrose
- c;
- d;

53;je is transmitted from

- a;culex mosquito
- b;aedes mosquito
- c;anopheles mosquito
- d;

54;triage

- a;
- b;
- c;
- d;

55;rare causes are studied under
a;descriptive study
b;analytic
c;experimental
d;retrospective

56;imr
a=the numerator includes child of age less than 28 days
b;less than 7 days
c;less than 1 year
d;less than 2 months compiled by dr. jj

57;live attenuated vaccine
a;bcg
b;dpt
c;hepatitis
d;salk

58;hiv by needle prick transmitted
a;0.3%
b;3%
c;10%
d;20%

59;ocp- mechanism
a;suppress lh by negative feedback mechanism and prevent ovulation
b;
c;
d;

60;life long immunity is achieved by
a;diphtheria
b;tetanus
c;mumps
d;typhoid

61;ketamine-false
a;nystagmus
b;hallucination
c;salivation
d;hypotension

62;which of the following is paired cartilage
a;thyroid cartilage
b;cricoid cartilage
c;epiglottis
d;corniculate

63;sinus not present at birth
a;frontal
b;maxillary
c;ethmoidal
d;sphenoid
compiled by dr. jj

64;gromet insertion is done in
a;glue ear (ruptured tm)
b;fungal infection
c;otosclerosis
d;foreign body in external ear

65;60 years male presented in your opd with the complaint of hoarseness of voice and h/o smoking; most probable diagnosis is
a;b/l recurrent laryngeal nerve palsy
b;carcinoma of the larynx
c;pharyngitis
d;fb obstruction

66;in scabies there is
a;vesicle
b;papules
c;bulla
d;burrow

67;paucibacillary single lesion tuberculoid leprosy is best treated by
a;clofazimine
b;dapsone
c;amphotericin b
d;tetracycline

68;a man has habit of pricking hairs in beard shaving area and the hairs prick easily
a;psychosis
b;tinea barbie
c;
d;

69;eps is caused by
a;haloperidol
b;resperidone
c;olanzapine
d;phenyl hexidine

70;antipsychotic drug is used in
a;depression
b;anxiety disorder
c;schizophrenia compiled by dr. jj

d;neurosis

71;a pt on tricyclic antidepressant drug has taken overdose; what could be the most common complication
a;laryngospasm
b;arrhythmia
c;diarrhoea
d;cerebral oedema

72;a pt with liver disease since last 3 months is under treatment and he finds himself that he is not improving; he is in home stay for long time; now he is irritable and thinks he is not going to be alright and is sad; what has happened to him
a;generalised anxiety disorder
b;depression
c;psychosis
d;organic mental disease

73; in a case of diabetic retinopathy the earlier sign is:
a;retinal hemorrhage
b;soft exudates
c;hard exudates
d;papilloedema

74;iritocyclitis patient; what will you give
a;aspirin
b;antibiotic
c;steroid
d;acetazolamide

75;a 60 years old man with h/o gradual loss of vision with mild pain and h/o headache, blurring of vision; what is your most probable diagnosis
a;cataract
b;presbyopia
c;acute glaucoma
d;conjunctivitis

76;age estimation can be done by:

a;attrition
b;dentition
c;bone calcification
d; compiled by dr. jj

77;mugging is
a;
b;
c;
d;

78;cobra venom is
a;cardiotoxic
b;neurotoxic
c;hepatotoxic
d;git toxic

79;which of the following is developed from shaft of the bone
a;osteoclastoma
b;osteoid osteomas
c;ewing sarcoma
d;

80;compartment syndrome is more danger when it is in
a;lower end of femur
b;upper end of humerus
c;lower end of tibia
d;lowe end of humerus

81;orthopaedic emergency
a;septic arthritis
b;fracture neck of femur
c;fracture skull
d;rheumatoid arthritis

82; fracture of shaft of femur --treatment in child of 2 yrs
a;abobe knee plaster
b;
c;
d;

83 .which of the following investigation is ordered for maximum
infective period in hepatitis- b patient?
a;hbsag
b.hbcag
c;hbeag
d;anti hcv

compiled by dr. jj

84;which of the following disease is benign?
a;basal cell carcinoma
b;malignant melanoma
c;squamous cell carcinoma
d;

85;iodine day in nepal
a. b; c; d ??????help yourself

86;ophthalmia neonatorum -most common organism
a.n.gonorrhoea
b;streptococcus
c;h;influenzae
d;staph aureus

87.10 years old child with multiple large joint pains for two
weeks;most probable diagnosis is
a;jra

b;acute rheumatic fever
c;septic arthritis
d;osteoarthritis

89;treatment of paraphimosis
a;circumcision
b;multiple puncture of glands
c;
d;

90. clinical question regarding referred pain from chest to shoulder

91;onwards could not remembered
*****best of luck*****
dr. jj
if any query, contact: joshijagadish@gmail.com

compiled by dr. jj

group :b

a= a 4 years old child presented to you with turner syndrome
1' what will be the xenotype of this patient?
a;45xxy
b'45xo
c;47xxy
d'47xyy

2'which of the following findings is present in this patient?
a'vsd
b'coarctation of aorta
c'endocardial cushion defect
d'tga

3'which of the following is associated with turner syndrome?
a'pckd
b'hoarse shoe kidney
c;minimal change disease
d'agn

4'which of the following is fase?
a;short stature
b height tall
c;
d;

5;treatment of turner syndrome?
a;growth hormone
b;tsh
c;steroid
d;ddavp

b;9 month old child with features of meningitis
1 most comman 'causative agent ?

a'klebsiella
b'h'influenzae
c's;pneumoniae
d;ecoli

2;true regarding csf findings
a;cell count 650 with mostly neutrophils
b;protein:20 gm
c;sugar 45mg%

d'cell counts 200 with mostly lymphocytes

3;true regarding brudgkisky sign
a;neck pain while passive flexion of neck
b;flexion of knee while bending neck compiled by dr. jj

c;pain on thigh while bending neck

d;neck stiffness

4;regarding brain abscess at this age which one is not common?

a;s; pyogen

b;staph aureus

c' mycoplasma

d;viral

5;treatment of above case

a;ceftriaxone

b;crystalline penicillin

c;zentamycin

d;vancomycin

c= a case of cholelithiasis_-___-_-

1most common organism associated with infection

a; e; coli

b;streptococcus

c'staphylococcus

d;salmonella

2;immediate complication of this patient

a;cholangitis

b;acute cholecystitis

c'pain/colick

d;acute pancreatitis

3;black colour stone is due to

a;infection

b;hemolysis

c;obstruction

d'bile

4;can happen except

a;du perforation

b=gall stone ileus

c;pancreatitis

dcholangitis

compiled by dr. jj

5;all are true except

a;10% gall stones are radio opaque

b;90%gall stones are detected by usg

c:90% gall stones are radioluscent

d;10%gall stones are detected by usg

d;60 kg man with h/o burn presentd in emergency

1;how will you assess the severity of the burn

a;depth of the burn (please help yourself too)

b;surface area of the burn

c;weight of the patient

d;sex of the patient

2;the pt has lower left extremity burn
what is the % of burn of this patient?

a;9%

b;18%

c;36%

d;24%

3; what is the fluid requirement for 24 hour of this patient

a;9l

b;12l

c;6l

d18 l

4:true regarding burn

a;bubbling is seen in superficial burn

b;pain is more in more depth burn

c;rt is decreased in superficial burn

d;

5;which one of the following must be monitered in this patient

a; urine output

b;pain

c;oral intake

d; fever

compiled by dr. jj 22

probable questions

4; a patient came 4 hours after the burn time how will you calculate fluid requirement

a; generally 50% fluid should be given in first 8 hours

b;rest 50% fluid should be given in next 24 hours

c;in this case 50% fluid should be given in next 4 hours

d;

5;fluid of choice

a;nacl

b;r1

c;5% dextrose

d;hypertonic saline

e;a fifty years male pt with myocardial infarction

1;ecg changes are >2mm st elevation in leads v1 to v6 ;what is your diagnosis

b;posterior wall mi rsion and st elevation in lead v1 to a;anteroseptal mi

c;extensive anterior wall mi

d; inferior wall mi

2;drug for reperfusion

a'streptokinase

b;aspirin

c;gtn

d;morphine

3'most common cause of death in 24 hr?

a vent;;arrythmia

b;heart failure

c

4 pansystolic murmur

a, vsd

b;mr

c;ms

d;ar

compiled by dr. jj

5; streptokinase is given; further treatment by(to decrease remodelin)

a;aspirin

b;ace inhibitor

c;b blocker

d;ace nhibitor+b- blocker+aspirin

f;a case of type 2 dm

1) obese pt with h/o generalised pruritus and serum creatinin level 2=5 mg%; what will you give

- a; insulin
- b; metformin
- c; metformin+gliactazone
- d; metformin +sulphonylurea

2. which of the following is not the macrovascular complication of dm?

- 1; cad
- 2; cerebral thrombosis
- 3; peripheral neuropathy
- 4;

3; true regarding type 2 dm

- a; it is associated with addison's disease
- b; it is autoimmune disease
- c;

4; complication.....

5; dm is found in

- a= thalassemia pt
 - b- iron deficiency anaemia pt
 - c; aplastic anaemia pt
 - d; sickle cell disease
- compiled by dr. jj

g=38+ weeks pregnant lady presented in emergency with vaginal bleeding and mild abdominal pain; she has given the h/o vaginal bleeding 8 hours back

- 1; what is your most probable diagnosis
- a; normal labour
- b; pp
- c; ap
- d; vasa recta

2 pregnant lady at term; on examination no fhs heard, head at station +2 with late deceleration;;; delivery by

- a; forcep
- b; ventouse
- c; c/s
- d; normal delivery

h; 2 month pregnant lady with c/o vomiting' severe right iliac pain with right lower abdominal pain and rebound tenderness is presented in emergency

- 1; what is your most probable diagnosis?
- a; acute appendicitis
- b; ruptured ovarian cyst
- c; ectopic pregnancy (please help yourself too)
- d; intestinal obstruction compiled by dr. jj

2; retention of urine in pregnant lady; most common cause

- a; retroverted uterus

nmle questions chaitra 3rd (march 17, 2007) - 17-03-2007, 04:32 pm

1) causes of massive splenomegaly?

2) signs of diabetic retinopathy?

3) 20 yr f/ pt came to emergency with shortness of breath. according to her husband she is pregnant for 2 months . on examination , pulse 100, b.p. 90/60 mm of hg, pulmonary oedema on auscultation .

- a) write d/d

b) changes in heart in ac. rheumatic fever

c) why she came to hospital at this time?

d) treatment

4) clinical features of hiv in children.

5) major criteria of rheumatic fever?

6) 30 yr f came with pain right hypochondrium on examination serum bilirubin 4mg%, multiple stones in cbd, dilated cbd

- a) write its surgical t/t
- b) change in lft
- c) complication due to lft

7)

- a) difference between external and internal inguinal hernia
- b) femoral vs inguinal hernia relation of hernia sac and spermatic cord
- c) omentocele vs enterocele

8) criteria for normal labour

9) risk factors for ca cervix

10) 102 f temperature ,vomiting ,rashes in legs

- a) investigations
- b) signs
- c) t/t

11) what are the five signs of atropinization in case of op poisoning? what advice will you give on duty sister while managing op poisoning case?

12) investigation modalities in case of ca. breast . management in case of ca breast.

1. causative organism of impetigo.> group a streptococcus.

2. dose of acyclovir for herpes zoster infection.>

- a) 800 mg five times a day
- b) 400mg bd
- c) 200mg bd
- d) 200mg tds

3. the most abundant quantity found in clostrum milk is

- a) water b) fat c) protein

4. commonest cause of dementia.

- a) alzheimers disease

5. low pitch mid diastolic murmur.

- a) mitral stenosis. b) tr c) as

6) which drug is contraindicated in ccf?

- a) propranolol. b) ace inhibitor c) ccbs

7. hematuria with rbc cast.

- a) nephritic syndrome b) nephritic syndrome c) arf d) crf

8. t wave inversion in ecg is seen in.

- a) hypokalaemia b) hypothermia c) hycalcemia

9. which wave is seen in ecg in hypothermia?

- a) j wave b) delta wave c) tall t wave

10. commonest surgical cause of cushing syndrome?

- a) pituitary adenoma b) ectopic acth. (please find the answer yourself too)

11. normally anterior fontanel is close in
a) 18 months b) 12 months c) 8 months
12. you are going to drain an abscess under ketamin, which condition you want to rule out?
a) hypertension b) diabetes c) smoking
13. 12 years old child has got high grade fever pharyngitis and sore throat. after 4 days fever subsides and measles like rashes appear what might be the cause?
a) scarlet fever b) measles c) erythema sabaitem d) enteric fever
14. spalding sign denotes
a) intrauterine fetal death b) ectopic pregnancy c) molar pregnancy
15. which is the shortest pelvic diameter?
16. caloric test is done for? > vestibulo coclear
17. when a person first time exposed to the disease in the epidemic areas is called? >
a) index b) primary.
18. cause of b/l partial loss of vision
a) temporal lesion b) glaucoma c) optic glioma d) pituitary adenoma
(please be sure about c and d)
19. a female of 26 years is taking oral hypoglycaemic drugs. she came to the opd with the c/o vulval itching and discharge. what might be the cause?
a) fungal b) bacterial
20. antemortem death due to the drowning. what is the surest sign.
a) oedematous lung. b) goose skin. c) diatoms
21. what is the visual acuity for the blindness according to the who?
a) 1/60 b) 15/38 c) 6/60 d) 6/6
22. 6 years boy came to the ent opd c/o pain ear. o/e there is tender on pressing the tragus. what is your diagnosis?
a) asom b) acute otitis externa c) mastoiditis d) csom
23. antipsychotic drugs is used for which condition? > schizophrenia
24. what is the commonest sign of schizophrenia?
a) visual hallucination b) auditory hallucination
25. what is the weight of termed sized uterus?
a) 500g b) 900g c) 1500g d) 2000g
26. a women of vaginal; delivery on 3rd ppd developed a mild fever. what might be the cause?
a) uti b) puerperal sepsis c) breast engorgement
26. which is true about hospital acquired infection?
a) resistant to many antibiotic b) drugs for hospital acquired infection is similar to the drugs for community acquired infection given by good hospital c) hospital acquired infection is not seen by doctor.
27. sensitivity means ?
28. mode means? > commonly occurring value
29. 32 years male ,teacher by occupation., is taking att drugs. he develops pain on right hypochondrium. on

investigation bilirubin is raised and impaired lft. what drug you want to stop?

- a) rifampicin b) pyiznamide c) streptomycin d) ethambutal
30. which is true about hansen's disease?
a) hypoaesthetic patch, afb +ve. thickened nerve.
b) hypopigmented patch, afb +ve, thickened nerve
31. a patient of multibacillary leprosy was under anti leprotic drugs. he developed a red discoloration of skin, which drug is causing it ?
a) rifampicin b) dapson c) clofazimine d) minocycline
32. a 30 years female patient with normal vaginal delivery with episiotomy came to the opd with the h/o pain during defecation and episode of bleeding on stool what investigation you want to do?
a) digital rectal examination b) sigmoidoscopy c) proctoscopy d) gently apart the buttock and see.
33. a 25 years male patient has resting tremor. on investigation he has normal t3 and t4. what is your diagnosis? > ?
34. a female patient on examination has b/l thyroid lump . what investigation you want to do initially?
a) usg b) fnac c) tft d) biopsy
35. which one is true about bcg vaccine?
a) given subcutaneously b) prevention against tubercular meningities c) life long protection against tuberculosis. d) killed vaccine.
36. a 23 years female patient came with labour pain. medical officer did p/v examination then he found cervix fully, head at the level of ischial spine and pusatile cord. what you will do next?
a) ceseration section b) forcep delivery c) ventouse d) wait and watch.
37. a 9 years boy has painful swelling on the parotid region. which of the following vaccine may prevent this?
a) mmr b) bcg c) opv d) dpt
- 38.

nmcle 7th asad 2065

1] drug of choice in uti with pregnenacy
a b nitrofurition c d

2] a two yrs child with running nose , sore throat , pharyngitis developed sub conjunctival hemorrhage , what is the most likely provisional diagnosis ?

a b c d

3] pleomorphic rashes seen in
a measles b mumps c chicken pox d small pox

4] which of the following drugs is mood stabilizer ?
a chlorpromazine b promethazine c carbamazipine d proclormapazine

5] anxiety neurosis
a b c d

6] thought block seen in
a b c d

7] 30 yrs adult patient has irritating eye , watering discharge with periorbital swelling , the most common cause is

a pyogenic conjunctivitis b viral conjunctivitis c allergic conjunctivitis d non

8] a malnourished patient develops sudden recent onset of opacity of the eye came in eye camp, the most cause is
a xerophthalmia b

9] ectopic pregnancy 5 yrs
a b c d

10] malaria hypnozoites
a b c d

11] cin staining
a

12] uterus support
a b c d

13] triage
a b c d

14] drowning
a b c d

15] fast putrefaction in which poisoning
a b c d

16] mean , mode median
a b c d

17] consent is not taken in
a age estimation b rape case c postmortem

18] pyogenic meningitis
a b c d

19] negri bodies
a rabies b c d

20] supracondylar fracture
a extent b c d

21] septic arthritis , the most common causative agent
a staph au b c d

22] local anaesthesia moa

23] 70 yrs old , tibial fracture - which anesthesia
a spinal b c d

24] 5 yrs old child with nasal block , irritant nose , the most common cause
a fb b c d

25] drug c/i in pregnancy
a tetracycline b c d

26] 50 yrs old man shows hoarseness of voice since last 3 yrs

a ca of larynx b c d

27] rda of protein
a b c d

28] treatment of paraphimosis

a circumcision b c d

29] endometritis
a b c d

30] 40 yrs old lady in usg fibroid uterus with asymptomatic
a hystera b myomectomy c hysterectomy d hysterectomy with salphangitis

31] most common site of breast ca
a upper and outer b c d

32] young man with rta and the most dangerous complication
a head injury b middle cerebral artery c post

33] the most common site for lumbar puncture
a l2 l3 b l3 l4 c d

34] deficiency of ca+ causes in child
a osteoporosis b ricket c osteomalacia d

35] tetany is caused by
a decreased ca+ b c d

36] alcoholic patient with melena and hematemesis
a iv saline with blood b rl c d

37] palmar erythema is seen in
a liver disease b renal disease c d

38] the most common cause of alopecia areata
a b c d

39] hypotonia , ataxia and tremor seen in
a cerebral lesion b c d pons

40] haloperidol
a eps b c d

41] drug not given in petit mal seizure
a clonazepam b c d

42] scanty, foul smelling with discharge seen in
a csom aa b c d glue ear

43] lady with sedation
a anxiolytic for sedation b c d

44] antidepressive drug causes
a cardiac arrhythmia b c d

45] 9 month child with respiratory rate 50/min , fever and dyspnea
a urti b pneumonia c d

46] 2 and half yrs child having visual impairment
a b c d

47] measles like rashes seen in
a rosea infantum b c d

48] syphilitic ulcer in vulva with painless treatment is
a b c d

- 49] tb ulcer
a undermined b everted c d
- 50] late mid diastolic murmur is heard in
a ms b mvp c ar d
- 51] the commonest congenital heart disease is
a vsd b c d
- 52] clinical question regarding rickets
53. question regarding polio, neuropathy, gbs, transverse myelitis
54. fluid given in antrum carcinoma
55. who definition of blindness
56. questions regarding all in child
- ssqs
1. clinical questions regarding cholelithiasis
 2. clinical questions regarding myocardial infarction
 3. clinical questions regarding burn
 4. megaloblastic anaemia
 5. pem
 6. meningitis
 7. retention of urine in early pregnancy
 8. ectopic pregnancy
nmcle chaitra 02-2064 (march 17th-2008)
- group a
mcqs-2 marks each
1. arf
 2. commonest primary bone tumour.....
 3. rl
 4. nifedipine-most common side effect
a. bradycardia
 5. ards
 6. tonsillectomy
 7. septic arthritis
 8. septic arthritis
 9. meningococemia
 10. pyogenic bacterial meningitis-csf findings
 11. incidence
 12. delirium
 13. mania
 14. commonest ca larynx
 15. cretinism
 16. mood stabilizer
 17. multi drug resistant
 18. sars- causative virus
a. corona virus
 19. glomerulonephritis is caused by
a. plasmodium malariae
 20. apcn
 21. bell's palsy
 22. cpr ratio in child
a.
 23. atropine c\i in
 24. steroid c\i in
a.
 25. mushroom poisoning rx
a.
 26. atropine (Op)
 27. op poisoning
 28. lichen planus
 29. alcoholic male
 30. measles
 31. tetanus
 32. chickenpox
 33. hyperemesis gravidarum
 34. recurrent miscarriage
 35. acute severe asthma
 36. antenatal hb
 37. perforated uterus
 38. # neck of femur
 39. bag and mask ventilation
 40. children common
 41. burn
 42. kala zar drug
 43. hida scan is done in
 44. craniotabes
 45. pneumonia cut off point in child
 46. stab injury
 47. influenza virus

48.ebv

49.nulliparity

50.cystoscopy

51.urate stone

52.bartholin's cyst
a.marsupialization

53.24 yrs 6*6cm²

54.post operative dyspnoea-common cause
a.haematoma formation

55.rectal cancer

56.bone marrow transplantation

57.normal titre in typhoid
a.1:80

58.interstitial keratitis

59.pulsatile ln

60.atypical pneumonia

61. ethambutol dose in tb?

62.monilia infection-drug

63.acute flaccid paralysis d/d

64.frost bite treatment

65.hypothyroidism- earliest symptom

66.mitral stenosis-murmur

67.tof-tetrad

68.pulmonary embolism-medical emergency

69.highest refractive index in
a.lens

70.uv prolapse-early prevention
a.pelvic floor exercise

71.oliguria is
a.urine output <.5 ml(1ml)/kg/hr

72.sigmoid volvulus

73.stroke volume

74.surgical emergency

75.pneumocystis carinii rx
a.cotrimoxazole

76.ampulla-commonest site for ectopic pregnancy

77.mucolytic drug

78.safer antihypertensive drug in preg
a.methyl dopa

79.streptomycin- s/e

80.rigor mortis starts from-periorbital region

81.breech presentation

82.no urine output.....

83.leprosy

84.hepatitis-regarding pathology

85.dka

86.oxytocin-regarding functions

87.....
group b
ssaqs-5 marks each

1.tuberculosis-----

2.diarrhoea and dehydration

3.malnutrition

4.rectal bleeding

5.rta

6.aph

7.ovarian tumour

8.megaloblastic anaemia

nmlc questions 9th kartik 2065 - 27-10-2008, 07:07 pm

well i don't remember all the questions but here are some of them:

1. some bowel surgery was done. after a week, what would be the symptom, if the abdomen was to burst?
a. abdominal distension
b. leakage of pus, secretions

2. presence of ld bodies suggest
a. malaria
b. kalazar
c. typhoid
d. tuberculosis

3. a man with kalazar will die of
a. splenic rupture
b. bacterial infection
c. malnutrition
d. hemorrhage

4. a mydriatic drug with no cycloplegic action
a. pilocarpine
b. phenylephrine
c. atropine
d. homatropine

5. a patient taking tcas might have (tricyclic antidepressant)
a. cardiac arrhythmias
b. severe headache
c. increased intracerebral pressure
d. hypotension

6. a man working in cotton dusts will have ("brown lung disease", Monday fever)
a. bagassosis
b. byssinosis
c. farmer's lung
d. tuberculosis

7. which one of the following is contraindicated in corneal ulcer?
a. atropine
b. steroids

c. phenylephrine

8. which one is not associated with hypopyon?

- a. endophthalmitis
- b. scleritis
- c. corneal ulcer
- d. iritis

9. if a person with acute congestive glaucoma develops blindness, it is due to

- a. optic atrophy
- b. lens degeneration
- c. vitreous hemorrhage
- d. corneal opacity

10. a person after head injury has diplopia, which nerve must have been affected?

- a. 6th
- b. 4th
- c. 7th
- d. 2nd

11. which is the earliest sign of retinoblastoma? (cat's eye)

- a. leukokoria
- b. fungating mass
- c. blindness
- d. corneal ulcer

12. which of the following kidney stones can not be seen in xray?

- a. urate stones
- b. oxalate
- c. cystine
- d. phosphate

13. a post menopausal women took estrogen and he developed side effects. if she wants to have an alternative treatment of pms, what would you suggest?

- a. phytoestrogen
- b. antidepressants
- c. green leafy vegetables
- d. exercise

14. a son had a diabetic father. just to be in safe side, he went to have his blood sugar checked. which one of the following would be the most diagnostic?

- a. blood fasting sugar > 7 mmol/l
- b. blood random sugar >11 mmol/l
- c. plasma two hour post prandial sugar >11mmol/l
- d. glycosylated hemoglobin level > 7%

15. an adult fell off a tree and broke his tibia which is a open fracture. what would you do after resuscitation and before actual management?

- a. wash and start iv antibiotics
- b. just wash and apply cast
- c. debride the wound and wash

16. a 27 year old male had fracture intracapsular right hip. how would you treat him?

- a. apply skeletal traction and immobilise
- b. hip joint transplantation
- c. internal fixation with multiple screws.

17. which one will have life long immunity once infected?

- a. mumps
- b. typhoid
- c. tuberculosis
- d. tetanus

18. a man has early morning cough and sob. he has mucoid sputum. what is the diagnosis?

- a. asthma

b. acute exacerbation of copd

c. pneumonia

19. which is the commonest site for large intestinal polyps?

- a. rectum
- b. sigmoid colon
- c. cecum
- d. transverse colon

20. which has the maximum malignant potentiality?

- a. adenomatous polyp
- b. puetz jeghers polyp
- c. hyperplastic polyp

i will post the rest later.

nmcle qsns of 25th oct - 28-10-2008, 04:45 pm

i wrote some 90 qsns and i lost them...and i have no idea where did they go...anyways..i will write them again but this time shorter version..hope it helps!!!

1) choice of contraception in young couple- ocp

2)rectal polyp with high malignancy transformation- adenomatous

3)painless pr bleedin bright red in colour- haemorrhoids

4)convulsions less than 10 mins in 2 yrs child-febrile convulsions

5)fever with unconsciousness in 3 yr old child with non blanching rashes over lower abdomen-meningococcal meningitis

6)time of iucd insertion post delivery-after 6-8 weeks

7)infertile couple first investigation-seminogram

8)trichomonas vaginalis,rx-metronidazole

9)lady with intense pruritus over vaginal region, type of discharge-curdy white

10)laboring lady,suspected of face presentation, to confirm-vaginal examination

11) putrefaction-fastest in earth and slowest in water

12)blue line in gums-lead poisoning

13)best way to identify living person-dactylography

14)commonest ovarian ca in 45 yrs old-epithelial

15)pph not controlled by massaging the uterus or uterotonic,next step-b/l iliac artery ligation

16)undermined edge ulcer- tb

17)young lady with difficulty breathing-thyroglossal cyst,brachial cyst, cystic hygroma,thymoma.search for the ans not sure about the ans

18)lady with solitary thyroid nodule with tachycardia and sweating,tx-radioiodine

19)child with constipation,prolonged physiological jaundice and mental retardation-cretinism

20)lactating mother should get - iron supplement

21)breast feeding ci in - hep b

22)gastric juice secretion per day - 2500ml

23)calorie req of adult with sedentary lifestyle-2000kcal

24)lady after husband's death sad n takes no pleasure in anything- depression

25)bells palsy-unknown etiology

26)abductor of vocal cord - post cricopharyngeal muscle

27) not related to submandibular gland- glossopharyngeal nerve

28) true about ocp-comes in 30 days pack as to maintain regularity and compliance

29) false about ocp-vaginal monalasis is decreased

30) puo can be due to-lymphoma

31) child with loose stool blood and mucous mixed- bacillary dysentery

32)live vaccine- bcg

33)37 weeks lady with decreased fetal movement,bestthing to do-ctg and fetal heart pattern monitoring

34)recurrent abortion at 6 and 8 weeks,presented now at 2 mths..next thing to do- usg

35)abd pain,2 8 weeks preg, anemia and brownish p/v discharge- ectopic

36)maintainance fluid for 30 kg child-70ml/hr

37)who setup in – 1948

38)epidemic dropsy - argemone seeds

39)commonest tumour in aids patient - either kaposi or burkitt lymphoma,please check it

40)diagnostic feature of child who is hiv positive - chronic diarrhea

41)sound amplification in auditory canal done by which structure-?

42)moderate dehydration treatment-search the ans please

43)h/o fall of child in outstretched hand and is able to pronate and supinate-supracondylar fracture

44)immediate complication of neck of femur fracture - sciatic nerve injury

45)labor with continuous fall innjur on the right shoulder,with pain and swelling in the supraclavicular region with sensation intact-posterior dislocation of shoulder joint

46)not an acquired sinus - either preauricular or urachus..not sure..check it!!

47)fistula is - abnormal tract lined by epi tissue connecting two viscus

48)oph neonatarum-n.gonorhea

49)commonest cause of pid - chylmadia

50)bartholin cyst,tx of choice-marsipulisation

51)4 yr old child with cyanosis of lip and nose - tof

will post other qsns later..i gtg right now..hope it helps..please check the answers again some might be wrong!!!good luck

re: nmcle qsns of 25th oct - 26-11-2008, 09:14 am

hi blotto...the pattern has been changed for this time...the qsns were all mcq..no short answers question!!..not sure if the next exam will be of the same pattern or different though.
here r some more questions..it has been really long time though..almost 2 months..so i will jot down the ones i remember...

1.wat wud suggest pneumonia in a 2 year old child-rr of more than 40/min

2.csf finding of raised wbc,decreased sugar and high protein-bacterial meningitis

3.presence of ld bodies - kala azar

4 cause of death in chronic kala azar - splenic rupture

5. cause of death in pt with chronic renal failure - hyperkalemia

6.cause of death in a pt taking tca antidepressant- cardiac arrhythmias

7.steriods ci in- corneal ulcer

8.radiolucent renal stone- urate

9.hypopyon not seen in- scleritis

10.atropine ci in- narrow angle glaucoma

11. sle is associated with- episcleritis

12.diagnostic of ra- involvement of small joints of hand

13.person with head injury and raised icp and diplopia.. nerve injured-sixth nerve

14.commonest cause of end stage renal disease- dm

15.comonnest cause of sub-arachnoid haemorrhage: rupture of berry aneurysm

16.one qsn about most diagnostic test for dm- fasting blood sugar > 7mmol/l

17.commonest site for large intestine malignancy- rectum

18.55 yr old man having morning cough presents with shortness of breath.he gives history of mucoid sputum- a/e of copd

19.child with fever and no other symptions.o/e child is active and chest has b/l crepts, antibiotic of choice- amoxycillin


20.cephalosporin of choice in pseudomonas- cefazidime



21.life long immunity post infection - mumps

22.highest chance of malignant transformation- adenomatous polyp

23.chromosomal abnormality in down's- trisomy 21

24.open fracture of tibia,first step after resuscitation- debridement

- 25.earliest sign of retinoblastoma- leucocoria
- 26.young man with fracture of intracapsular fracture of hip joint,tx of choice- closed reduction and internal fixation
- 27.radical tx of malaria-primaquine
28. typhus caused by-rickettsia
- 29.mydiatric drug with no cycloplegic action-phenylephrine
30. surgical emergency-paralytic ileus
- 31.man with history of jaundice for 1 month,mild fever and pain abdomen- liver abscess
- 31.diagnostic of hepatitis b infection- hbsag
- 32.all are life threatening except-diaphragmatic hernia
- 33.child with h/o previous sore throat fever presented with joint pain and subcutaneous nodules- rf
- 34.commonest type of ca larynx- squamous cell
- 35.false about tropical splenomegaly syndrome- can recur after splenectomy
- 36.c/i of tonsillectomy- haemophilia
- 37 blood test to be dearranged in obstructive jaundice- pt
- 38.cotton dust inhalation causes - byssinosis
- 39.sign of wound give away in a woman with post cs scar and in labour- maternal tachycardia
40. sign of impending wound infection post surgery-serous and pus discharge from the wound
- 41.cause of blindness in acute congestive glaucoma- optic atrophy
this is all tht i can remember..sorry for posting it this late!!
- nmcle chaitra 2065 questions - 09-04-2009, 10:40 pm
-
- maximum questions were clinical..i couldn't remember all ..i m just writing summary of questions...
- 1)rita 22 yrs old...with h/o.....flight of ideas,thinks superior to her colleague...what is the diagnosis?? ans: mania
- 2)what is true regarding hallucination??a:false belief b:false perception with stimuli c:false perception without stimuli
- 3)iv regional anesthesia ..drug of choice?? a: lidocaine b:bupivacaine c: ropivacaine
- 4)a patient with h/o seizure..all are drug of choice as anaesthetic agent except.. a:etomidate b ropofol c: ketamine
- 5)60 yr old patient..spinal anaesthesia of choice.. a:0.5% lidocaine b:0.5% bupivacaine c:0.5% bupivacaine heavy
- 6)which stain is used for treponoma pallidum?? a:gram stain b:giemsa stain c: dark ground d: ziehl nelson
- 7)regarding syphilis which is true??a: penicillin drug of choice in primary syphilis b: penicillin doc in secondary c: in primary and secondary not in tertiary d:in all stages

- 8)which match the best?? a:chlamydia:discharge with clump b:gonorrhoea:whitish discharge c:trichomonas:profuse discharge
- 9)60 yr patient with secondary uv prolapse and decubitus ulcer..what would you do?? a:left operation b:vaginal hysterectomy with pfr c:abdominal sling operation d:manchester operation
- 10)32 yr female with completed family size with cervical lengthening??what is the treatment of choice?? a:manchester operation b:left operation c: abdominal sling operation d: vh with pfr
- 11)15 year girl presented with h/o prolonged 4 days of p/v bleeding..what is ur diagnosis?? a:dysmenorrhea b:menorrhagia c:dysfunctional uterine bleeding
- 12)30 yr old female with intermenstrual bleed..what is the most likely diagnosis?? a:cervicitis b: endometritis c: copper t insertion d: endometrial ca
- 13)a pt is intubated..what is the reliable sign u would like to check?? a: capnography b: chest auscultation c: pulse oximetry
- 14)target value for tb control and case detection rate in nepal??...i couldn't remember options
- 15)measles vaccine is given ?? a: intradermally b:subcutaneously c:orally d: intramuscularly
- 16)which is not combined vaccine?? a olio c:measles d: bcg
- 17)what is true regarding bcg?? a: live vaccine b:killed c:toxoid d:inactive
- 18)in pelvic inflammatory disease a combination of metronidazole and which drug is given?? a:doxycycline b:ciprofloxacin c:penicillin
- 19)a 5 yr child with fever stridor...has glottic edema..sitting with both his hand forward..what is the most likely diagnosis?? a:bronchiolitis b:adenoids c: acute epiglottitis d: croup
- 20)a 4 year child present with fever ,rr 52/min b/l wheeze..he had similar past history..what is your diagnosis?? a: acute bronchiolitis b: bronchitis c: bronchopneumonia d:asthma
- 21)a 30 yr female presented with h/oimpending eclampsia....which is the doc for this??a: nifedipine b: methyl dopa c:hydralazine d: mgso4
- 22)which is least likely in eclampsia??a: headache b:epigastric pain c bp>120mmhg d:blurring of vision
- 23)a 19 yr patient presented with h/o mass on left side of floor of mouth..there is pain when he takes sour food which goes off spontaneously..on palpation there is 3*3 cm2 mass firm mass on left side on submandibular region..what is your diagnosis?? a:lymphadenitis b:ranula c:submandibular calculi
- 24)one case from fibroadenoma ..i couldn't remember question
- 25)a couple presented with h/o infertility for past 14 months..what is the first thing you would like to do?? a: semen analysis b: serum gonadotrophin c:progesterone level d:tubal patency test
- 26)a27 yr patient has h/o fall from tree..he present withpain on wrist..there is mild swelling.....on examination he has tenderness on anatomical snuff box..what is the diagnosis??a:monteggia b:greenstick fracture c:scaphoid fracture
- 27)a 25yr patient presentd with 3 days h/o fe ver throat pain..on

examination there is inflamed tonsils congestion...with uvula shifted to left side ..what is the diagnosis?? a:acute tonsillitis b:parapharyngeal abscess c:peritonsillar abscess d:pharyngitis

28)one question from acute leukemia(blast cell >21% in pbs)

29)one question from cll

30)a 45 yr patient presented with h/o.....his blood pictures were mcv>90.all peripheral counts decreased and hypersegmented neutrophils...what is your diagnosis?? a: acute leucopenia b:aml c:megaloblastic anemia

31)a patient presented with h/o gum bleeding for last 2 days ,there is no cyanosis normal skin pinch..he had joint pain 1 day back..which would be true regarding this?? a: aPT decreased b:PT decreased c:low platelets

32)regarding ab+ve blood group which is true??a: no agglutinin b:no aglutinogen c:

33)which structure is supplied by obturator nerve??a: sartorius b: adductor magnus c:hamstring

34)while doing cystic artery ligation in cholecystectomy which ligament has to be cut?? a: falciform ligament b:hepatoduodenal c:gastroduodenal d:gastrocolic

35)a 49 yr old female presented with h/o acute retention of urine..on examination...there is firm and cysticmass protruding toward pouch of douglas..what would you do?? a:transurethral catheterization b:urg c:suprapubic catheterization

36)a 10 yr old boy presented with h/o ballooning of prepuce and acute retention of urine..what is the diagnosis??a: posterior urethral valve b:pinhole meatus

37)in mitral stenosis which is most unlikely??a: left atrial dilatation b:lvh c:pulmonary htn d:right ventricular hypertrophy

38)mid diastolic murmur heard in??a: ms b:mr c:tr

39)you are posted in phc...a 50yr pt. presented with h/o chest pain...sob....on ecg there is st elevation in lead v2-v5 , avl..what will you not immediately ???a:refer to tertiary centre b:administer high dose aspirin c:O2 2litre/min d:give morphine

40)how does buscopan(hyoscine butyl bromide) act??a:m2 receptor antagonist b:m1 receptor antagonist c:m3 receptor antagonist d:m receptor agonist

41)cause of jaundice in pregnancy ?? ans:acute fatty liver

42)a tourist from england went to thameltook fried rice..vanilla sausage...after 4 hours he developed vomiting...diarrhea.....which organism is responsible for this??a:staph aureus b:clostridium perfringes c:e. toxigenic e.coli d:bacillus cereus

43) regarding rheumatic heart disease what is the sequence of valve involvement??ans:mitral,aortic,tricuspid,pulmonary

44)which poisoning result in optic atrophy ?? ans:methyl poisoning

45)a 45 yr female presented with flat topped pinkish lesionon volar aspect of hand??what is ur diagnosis??ans:lichen planus

46)in macconkey's agar medium which causes lactose fermentation?ans :enterobacter

47)one question was from throttling..idon't remember the question

48)cornea is supplied by which nerve?a:maxillary others were b:

nasociliary , lacrimal nerve

49)xerophthalmia treatment question

50)innepal vitamin a supplementation programme done for which group??ans: 6months-5 years age group

51)scleritis associated with which disease??ans:rheumatoid arthritis

52)what is most likely in multivalvular heart disease??ans:constrictive pericarditis

53)a 5 year boy presented with.....with subconjunctival haemorrhage..what is your diagnosis??ans:whooping cough

54)a 37 yr female presented with h/o vertigo..no tinnitus..no hearing loss...she has latency of 15 seconds.....what is her diagnosis??ans:bppV(benign paroxysmal positional vertigo)

55)a 10 yr old child present with h/o impaired hearing since 3-4 days..o/e there is retracted tympanic membrane and conductive hearing loss..what is the diagnosis??a: csom b:asom c: ome

56)a 50 yr old patient presented with h/o nasal bleeding...his vitals.....what would u do??ans:anterior nasal packing

57)one question from seborrhoic dermatitis

58)following would be diagnosis of hiv??a:cd4 count<300/mm3 b: 200/mm3 c:400/mm3 d:500/mm3

59)one question was from heat stroke(an army man with h/o heavy exercise.....temp>104 degree f ..without sweating.....what is your diagnosis)

60)one question was from waterhouse friedrichson syndrome(a 15 yr boy with h/o fever with vomiting and rashes onhis bp 70/50..what is your diagnosis??)

61)one question was from conn's adenoma...pt's history given..with htn ...serum sodium was high..and k+ low..

62)a 2 year child with h/o chest infection..failure to thrive..o/e rr>50/min,no cyanosis.....what is your diagnosis??ans:vsd

63)a pt..with h/o.....on x-ray examination boot shaped heart was seen..what is your diagnosis??ans:tetralogy of fallot

64)a patient presented with h/o winging of scapula...damage to which structure would have cause this??a:axillary nerve b:radial nerve c:long thoracic nerve

65)a pt. presented with h/o fall on outstretched hand...with shoulder dislocated anterior..which is the nerve damage??a: brachial b:radial nerve c:median d:axillary nerve

66)a patient was transfuse 6 units of whole blood...which is false regarding this??a:thrombocytopenia b:↑^hic c:hypocalcemia d:hypercalcemia

67)a patient known case of hiv presented with h/o white plaques on oral cavity..on staining pseudohyphae was seen..which organism would have cause this??a:histoplasmosis b:cryptococcus c:candida albicans d:blastomycosis

68)a 55 year pt. presented with h/o dvt..which investigation would you like to send?? a:usg b: venograph c: ct d:doppler

69)a patient present with h/o suggestive of abdominal aortic aneurysm..which test would you like to send for diagnosis?? a:ct abdomen b:usg abdomen c:aortogram

70)there was one question from epidemics

71)after polio which disease is targeted for eradication from nepal??ans:measles(not sure..check out yourself)

72)which drug combination would likely responsible for congestive cardiac failure??a:atenolol+nifedipine b:atenolol+verapamil c:atenolol+diltiazem d:atenolol+amlodipine

73)a 32 yr patient with a h/o neck swelling(thyroid) since 20 years....for the last one month the mass has increased rapidly..o/emas is hardwhat is most likely diagnosis??a:anaplastic ca b:papillary ca thyroid c: follicular ca

74)by direct ophthalmoscope image is magnified how many times??a:10 times b:20 times c:5 times d:15 times

75)a patient with h/o discomfort on eye since 2 days...o/e dendritic ulcer was seen..what is the diagnosis?? a: herpes simplex infection b:fungal ulcer c:bacterial infection

76)an obese patient with recent loss of weight.....his random blood glucose level is 250 mg%....what would you like to do?? a: advice exercise b: start glitazone c: start insulin d:start metformin

77)a 2 yrchild presented with h/o bleeding per rectum.....o/e maroon colored stool was seen....tenderness on right iliac fossa??what is yourdiagnosis??a:acute appendicitis b:acute intussuception c:meckel's diverticulum


78)one question was from juvenile rheumatoid arthritis

79)one was from rheumatoid arthritis


80)one question was from breast milk

re: nmcle chaitra 2065 questions - 10-04-2009, 12:33 am


will update other questions soon...

1)in all condition dpt vaccine is given except??ansroggressive polyneuropathy

2) a 8 kg child with sunken eyes.....eager to drink....what would you do??ans:600ml fluid in first 4 hours

3)which diseas transmit both by droplet and food borne??a:cholera bolio c:measles

4)cap most common organism??ans:s. pneumoniae

5) a pt. came with h/o.....he couldn't see on left temporal region and rt. nasal region.....where is the lesion??ansptic tract

6)tribadism is a condition characterized by??a:sex of man with woman b: sex of woman with woman c:sex of man with man d:sex of man with animal

7)one question was related to amniotic fluid..i couldn't remember options..they were regarding electrolytes value of amniotic fluid

8) a 15 yr old student....with pain on medial epicondyle while writing....what is your diagnosis?? a:tennis elbow b:golfer's elbow c:student elbow

9) a 6 yr old child with u/l nasal obstruction.....foul smelling discharge..what is the diagnosis?? ans: fb in nose

10)all are true regarding dentition except??ans: 3rd molar in 12 years

11)one case was from open angle glaucoma....age group related to this??a:<40 years b: 20-40 years c:>8 years d:>40 years

12)one case was given regarding asthma....first fluticasone was given..then changed to budesonide..then beclomethasone..what is true regarding this??a:beclomethasone is more potent b: budesonide is more potent c:fluticasone is more potent c:all r equal in potency

13) which decreases gastric secretion>??ans:somatostatin

14) a 40 year old patient ...with h/o ...had fracture femur... what is the volume of blood loss??a:1000 ml b:1500 ml c:2000 ml d: 2500 ml

15)a 45 year pt with h/o diabetes...presented with multiple ulcer in the nape of the neck..what is your diagnosis??ans:carbuncle

16) a pt. presented with h/o 14 hours of wound.....what would you do??ans: debridement cleaning and antibiotics

17) kancha 14 year old boy with loss of consciousness , uprolling of eye.....had his wet pant....what is your diagnosis?? a:anxiety neurosis b: epilepsy


18)regarding arf which is not the major criteria??ans: leucocytosis

19)match the best?? there were two right answer a:x-linked recessive: haemophilia another was x linked dominant: vitamin d resistant rickets

20)a 55 years male presented with loc since 7 hours ...he had h/o alcohol intake history for 20 years..what would be your first line of management??a:start 25% dextrose immediately b:inj thiamine c:wait for blood glucose level

21)all are true regarding parasympathetic activity except ??ans : gastroparesis

22) true regarding parasympathetic action in eye?? ans: ciliary muscle contraction

23) a patient with h/o trauma by while playing foot ball on epigastric region 2 weeks back..on examination fluctuant cystic mass was found at epigastrium..what is the diagnosis??aseudopancreatic cyst b:rectus sheath hematoma c:false aneurysm of aorta

clinical vignettes (topics only .total 10*5=50)

- 1.organo phosphorous poisoning
- 2.extradural hematoma
- 3.osteosarcoma
- 4.t.b meningitis
- 5.cns infection
- 6.breast ca
- 7.active phase of labour ? aph
- 8.acute rheumatic fever
- 9.seizure disorder