JAMMU AND KASHMIR PUBLIC SERVICE COMMISSION

RESHAM GHAR COLONY, BAKSHI NAGAR, JAMMU - 180001

Website: http://jkpsc.nic.in email: coejkpsc2017@gmail.com Jammu: 0191-2566533

Subject:

Written Test for the post of Medical Officer (Allopathic) in the Health and Medical Education Department - Provisional Answer Key thereof.

Notification No. PSC/Exam/S/2024/13 Dated: 21.04.2024

In pursuance of Rule 10(c) of the Jammu & Kashmir Public Service Commission (Conduct of Examination) Rules, 2022, as amended upto date, the Provisional Answer Key of Question Paper pertaining to the Written Test for the post of **Medical Officer** (Allopathic) in the Health and Medical Education Department held on 21.04.2024, is hereby notified for seeking the objections from candidates.

Provisional Answer Key

Test Booklet (
Q1	В
Q2	Α
Q3	В
Q4	Α
Q5	D
Q6	A
Q7	В
Q8	D
Q9	С
Q10	В
Q11	Α
Q12	D
Q13	В
Q14	D

	Question No. es A)
Q15	D
Q16	В
Q17	В
Q18	D
Q19	С
Q20	С
Q21	С
Q22	В
Q23	D
Q24	В
Q25	С
Q26	Α
Q27	Α
Q28	Α

Test Booklet Question No. (Series A)				
Q29 B				
Q30	В			
Q31	C A C A B A A			
Q32				
Q33				
Q34				
Q35				
Q36				
Q37				
Q38	D			
Q39	Α			
Q40	В			
Q41	Α -			
Q42	В			

Test Booklet Question No. (Series A)			
Q43 C			
Q44	Α		
Q45	Α		
Q46	С		
Q47	A		
Q48	С		
Q49	С		
Q50	С		
Q51	В		
Q52	В		
Q53	Α		
Q54	С		
Q55	С		
Q56	D		
Q57	D		
Q58	С		
Q59	Α		
Q60	С		
Q61	С		
Q62	В		
Q63	Α		
Q64	Α		
Q65	В		

Test Booklet Question No. (Series A)				
Q66 C				
Q67	Α			
Q68	D			
Q69	С			
Q70	Α			
Q71	В			
Q72	D			
Q73	В			
Q74	Α			
Q75	Α			
Q76	Α			
Q77	В			
Q78	С			
Q79	В			
Q80	В			
Q81	С			
Q82	A			
Q83	С			
Q84	В			
Q85	В			
Q86	D			
Q87	В			
Q88	С			

Test Booklet Question No.				
(Serie	es A)			
Q89 C				
Q90	В			
Q91	В			
Q92	A			
Q93	D			
Q94	Α			
Q95	Α			
Q96	В			
Q97	В			
Q98	D			
Q99	Α			
Q100	A			

The candidates are advised to refer to Question Booklet (Series A) to match the corresponding question(s) in their respective Question Booklet Series and if any candidate feels that the key to any of the question(s) is/are wrong, he/she may represent on prescribed format/proforma annexed as Annexure-A along with the documentary proof/evidence (hard copies only) and fee of Rs.500/- per question in the form of Demand Draft drawn in favour of COE, J&K PSC (refundable in case of genuine/correct representation) to the Controller of Examinations, Jammu & Kashmir Public Service Commission, from 22.04.2024 to 24.04.2024. The candidates are further advised to clearly mention the question(s) objected to with reference to its serial number as it appears in the Question Booklet of Series A of the provisional answer key.

Further, any objection/application not accompanied by the requisite Demand Draft of Rs.500/- as prescribed, shall not be considered/entertained under any circumstances. Candidates are, in their own interest, advised to adhere to these instructions and not submit any objection unaccompanied by the Demand Draft as required under extant rules.

The Commission shall not entertain any such representation(s) after the expiry of the stipulated period i.e. after 24.04.2024 (Wednesday), 05.00 pm.

The provisional answer key is available on the website of the Commission http://www.jkpsc.nic.in.

21.04.2024

(G.L Sharma) JKAS

Additional Secretary J&K Public Service Commission

Dated: 21.04.2024

No. PSC/Ex-Secy/2024/14

Copy to the: -

1. Director, Information and Public Relations, J&K for publication of the notice in all leading newspapers published from Jammu/Srinagar.

2. P.S. to Hon'ble Chairman, J&K Public Service Commission for information of the

Hon'ble Chairman.

3. P.S. to Hon'ble Member, Shri ______ for information of the Hon'ble Member.

4. P. A. to Secretary, J&K Public Service Commission for information of the Secretary.

5. P.A. to Controller of Examinations, J&K Public Service Commission.

6. Main file/Stock file/Notice Board.

Annexure-A

Representation regarding objection(s) to any Question/Answer pertaining to the Written Test conducted for the post of Medical Officer (Allopathic) in the Health and Medical Education Department, held on 21.04.2024

(NOTE: USE SEPARATE FORMS FOR SEPARATE QUESTIONS)

Name of the Applicant	:
Roll No.	:
Correspondence Addres	6S:
Contact/Mobile No.:	
Date of Application:	.04.2024
Demand Draft No. date	1
Candidates Account No	.(16 digit) & IFSC Code :

Question No. in Series A	Details of the Objection	Resource Material (copy to be enclosed)	Details of the Website (if any)
Selies A			
			В
Correct Ansi	wer/Option as per candidate	•	

Correct Answer/Option as per candic

Signature of the Candidate

Note: Application for each question/answer shall be made on separate page in the given format, otherwise the first question entered in the format shall only be considered.

Booklet Serial No. 200517

Test Booklet Series

TEST BOOKLET MEDICAL OFFICER Written Test - 2024 (24)



Time Allowed: Two Hours

Maximum Marks: 100

INSTRUCTIONS

- 1. IMMEDIATELY AFTER THE COMMENCEMENT OF THE EXAMINATION, YOU SHOULD CHECK THAT THIS TEST BOOKLET **DOES NOT** HAVE ANY UNPRINTED OR TORN OR MISSING PAGES OR ITEMS, ETC. IF SO, GET IT REPLACED BY A COMPLETE TEST BOOKLET.
- 2. Please note that it is the candidate's responsibility to encode and fill in the Roll Number and Test Booklet Series Code A, B, C or D carefully and without any omission or discrepancy at the appropriate places in the OMR Answer /Response Sheet. Any omission/discrepancy will render the Response Sheet liable for rejection.
- 3. You have to enter your Roll Number on the
 Test Booklet in the Box provided alongside.

 DO NOT write anything else* on the Test Booklet.
- 4. This Test booklet contains 100 items (questions). Each item comprises of four responses (answers). You will select the response which you want to mark on the Answer Sheet/Response Sheet. In case you feel that there is more than one correct response, mark the response which you consider the best. In any case, choose *ONLY ONE* response for each item.
- 5. You have to mark all your responses *ONLY* on the separate Answer /Response Sheet provided. *See directions in the Response Sheet*.
- 6. *All* items carry equal marks.
- 7. Before you proceed to mark in the Answer /Response Sheet, the response to various items in the Test Booklet, you have to fill in some particulars in the Answer /Response Sheet as per instructions sent to you with your Admission Certificate.
- 8. After you have completed filling in all your responses on the Response Sheet and the examination has concluded, you should hand over to the Invigilator *only the Answer /Response Sheet*. You are permitted to take away with you the Test Booklet and *Candidate's Copy of the Response Sheet*.
- 9. Sheets for rough work are appended in the Test Booklet at the end.
- 10. Penalty for wrong answers:

THERE WILL BE PENALTY FOR WRONG ANSWERS MARKED BY THE CANDIDATE IN THE WRITTEN TEST (OBJECTIVE TYPE QUESTIONS PAPERS).

- (i) There are four alternatives for the answer to every question. For each question for which a wrong answer has been given by the candidate, (0.25) of the marks assigned to that question will be deducted as penalty.
- (ii) If a candidate gives more than one answer, it will be treated as a **wrong answer** even if one of the given answers happens to be correct and there will be same penalty as above for that question.
- (iii) If a question is left blank, i.e., no answer is given by the candidate, there will be **no penalty** for that question.

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

SI

1.	The	e following are seen in complicated otitis media –	
	i.	Battle sign	
	ii.	Bezold's sign	
	iii.	Delta sign	i i
	iv.	Griesinger's sign	
		A) i,ii and iii	
		B) ii,iii and iv	
		C) i,iii and iv	
		D) i,ii and iv	
2.	Faci	ial venous plane for dissection in superficial parotidectomy is called.	
	A)	Patey's	
	B)	Zuckerkandl	
	C)	Camper	
2	D)	Buck's	
3.	A fa	alse positive fistula test without clinical evidence of middle ear or mastoid dis	sease is -
	A)	Hitselberger's sign	
	B)	Hennebert's sign	
	C)	Griesenger's sign	
	D)	Schwartz sign	
4.	Wha	at is NOT true regarding LASERS –	
	A)	Spontaneous emission	
	B)	Collimated	
	C)	Spatial coherence	
	D)	Monochromatic	
(24-	A)	(3)	[P.T.O.

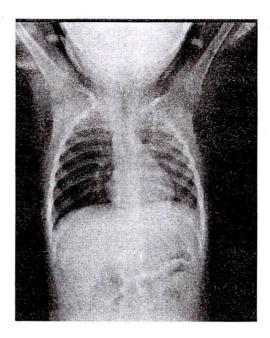
	B)	Ptosis
	C)	Orbital fracture
	D)	Thyroid eye disease
6.	Whi	ch of the following is most characteristic of exudative retinal detachment?
	A)	Shifting fluid
	B)	Tobacco dust
	C)	Fixed folds
¥	D)	Equatorial traction folds
7.	Whi	ch of the following statements concerning senile cataract is FALSE?
	A)	Occurs when the lens of the eye becomes cloudy
	B)	In cataract surgery, the extracted lens is replaced by an implant that is usually placed within the iris plane
	C)	Decreased contrast and decreased ability to discern colors
	D)	Main types of age-related cataracts are nuclear sclerosis, cortical and posterior sub-capsular.
•		
8.	All	the following are used for the treatment of keratoconus, EXCEPT:
	A)	Intracorneal ring segments
	B)	Contact lenses
	C)	Penetrating Keratoplasty
	D)	LASIK surgery
(24-	. A)	(4)
(24	11)	(7)

	A)	Blurred vision
	B)	Blurring of disc margins
	C)	Cupping of the disc
	D)	Hyperemia of the disc
	9	
10.	Whi	ch of the following is NOT a method of treating spastic entropion
	A)	Quickert suture
	B)	Wies marginal rotation
	C)	Taping of eyelid
	D)	Botox injection
11.	In tra	auma setting, FAST refers to which imaging modality
	A)	Ultrasound
	B) -	Urgent X ray of Chest and pelvis
	C)	Urgent CT scan
U	D)	Urgent Doppler
12.	The	Competent Authority for radiation safety in medicine in India is called
	A)	Indian Council of Radiation Protection
	B)	Atomic Energy Authority of India
	C)	Health Protection Agency
	D)	Atomic Energy Regulatory Board

Papilledema has all of the following features EXCEPT:

9.

13. The young child of 3 years old was brought to a paediatric emergency department with a history of choking and dyspnea while playing at home. Plain radiograph of the chest was performed. What is the diagnosis?



- A) Foreign body aspiration on left side
- B) Foreign body aspiration on right side
- C) Pneumothorax on right side
- D) Collapse of left lower lobe
- 14. A 10-year-old male child, presented with swelling over the right shoulder for 3 months. A plain radiograph of the right shoulder showed a permeative type of lytic destructive lesion arising from the diaphysis of the humerus. The lesion has no matrix mineralization and shows interrupted lamellated periosteal reaction. Possible diagnosis is
 - A) Aneurysmal bone cyst
 - B) Giant cell tumor
 - C) Telangiectatic Osteogenic sarcoma
 - D) Ewing's Sarcoma

15.	infectious when purified?		
	A)	Influenza virus	
	B)	Rotavirus	
	C)	Measles virus	
	D)	Poliovirus	
16.	Whi	ch one of the following organisms principally infects vascular endothelial cells?	
	A)	Salmonella typhi	
	B)	Rickettsia rickettsii	
	C)	Haemophilus influenzae	
	D)	Coxiella burnetii	
17.	The	MAIN host defence against bacterial exotoxins is:	
	A)	Activated macrophages secreting proteases	
	B)	IgG and IgM antibodies	
	C)	Helper T cells	
	D)	Modulation of host cell receptors in response to the toxin	
18.		terial surface structures that show antigenic diversity include each of the following CEPT:	
	A)	Pili	
	B)	Capsules	
	C)	Flagella	
	D)	Peptidoglycan	

19.	Nov	vobiocin disc test is done for?	
. 6	A)	Streptococcus	
	B)	Enterococcus	
	(C)	Coagulase negative Staphylococcus	4 m
	D)	Staphylococcus aureus	
			te.
20.	Ext	tremely rare drug resistance in typhoidal Salmonellae is wi	ith which drug?
	A)	Azithromycin	
	B)	Cefepime	
	C)	Ceftriaxone	
	D)	Cefexime	
	2		
21.	Xer	roderma pigmentosum is caused due to a defective:	
	A)	Non-homologous end joining repair	
	B)	Homologous repair	
	C)	DNA nucleotide excision repair	
	D)	DNA mismatch repair	a section of the Section of the
22.	Whi	nich ONE of the hormone receptors exhibits intrinsic tyros	sine kinase activity?
	A)	Glucagon	
	B)	Insulin	1.45
	C)	Epinephrine	
	D)	Calcitonin	

23.	Physio	logic b	uffers	in the	body inc	lude all	of the	following,	EXCEPT:
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- A) Bicarbonate
- B) Orthophosphate
- C) Proteins
- D) Lactate

24. Identify the correct match of the two columns of the table:

	Antibiotic		Mechanism of inhibiting protein synthesis
1.	Tetracycline	a.	Binds to 23S rRNA
2.	Chloramphenicol	b.	Inhibits protein synthesis on prokaryotic and eukaryotic ribosomes
3.	Puromycin	c.	Inhibits peptidyl transferase in the 60S ribosomal subunit in eukaryotes
4.	Cycloheximide	d.	Prevents binding of aminoacyl-tRNAs to the A site of bacterial ribosome

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

25. The specific enzyme marker that is elevated in obstructive jaundice is:

- A) Alanine transaminase
- B) Aspartate transaminase
- C) Alkaline phosphatase
- D) Gamma glutamyl transferase

26.	Dec	laration of Helsinki is about?					
	A)	Organ transplantation				269	
	B)	Human experimentation				17	
	C)	Torture					
	D)	Physician's oath					
27.	Cya	nide poisoning causes:					
	A)	Histotoxic anoxia					
	B)	Anoxic anoxia					
	C)	Anemic anoxia					
41	D)	Stagnant anoxia		9			
	18E				*		
28.	Nor	thern blotting is for:					
	A)	RNA					
	B)	DNA					
	C)	Proteins					
	D)	Maternal DNA					
	-,						
29.	nyst	5 year old male with a history of agmus, and ataxia. Examination revering from					
	A)	Korsakoff's psychosis				900 M	
	B)	Wernicke's Encephalopathy					
	C)	De Clerambault syndrome					
	D)	Delirium Tremens					

	- · · · · ·	
30.	Asse	ertion:Range of shot can be determined by the dispersion of pellets.
	Rea	son: Shotgun cartridge contains pellets
	A)	Both assertion and reason are independently true and the reason is the correct explanation of assertion.
	B)	Both assertion and reason are independently true and the reason is not the correct explanation of assertion.
	C)	Assertion is independently true and the reason is independently false.
1	D)	Both assertion and reason are independently false.
		*
31.	Fluo	oride used in collection of blood samples inhibits the enzyme:
	A)	Glucokinase
	B)	Hexokinase
	C)	Enolase
	D)	Glucose 6 phosphatase

- A) Stature of an individual from long bone
- Race from skull B)
- C) Age of an individual
- D) Sex from pelvis

The nerve of the third pharyngeal arch is ONE of the following:

- A) Trigeminal
- Facial B)
- Glossopharyngeal C)
- D) Vagus

34. The thoracic duct drains into ONE of the follow	ving:
---	-------

- A) Junction of left subclavian and jugular veins
- B) Inferior vena cava
- C) Superior vena cava
- D) Portal vein

35. Arteries in the scalp are found in ONE of the following layers:

- A)]
- B) II
- C) III
- D) IV

36. Correct match of the clinical descriptions of crackles with their corresponding respiratory conditions is:

	Clinical Descriptions:	Respiratory Conditions:			
1.	End inspiration fine crackles.	a.	Congestive Cardiac failure		
2.	Low-pitched crackles heard mostly	b.	Interstitial Lung Diseases		
	in the base of the chest.				
3.	Continuous, mixed crackles heard	c.	Bronchiectasis		
	throughout inspiration and expiration.		3		
4.	Crackling sounds heard during inspiration	d.	Bronchiolitis		
3	that disappear after coughing.				

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

37. Correct match of the descriptions of congenital anomalies with their corresponding chromosome numbers is:

	Congenital Anomalies:	Chr	omosome Numbers:
1.	Intellectual disability, distinctive	a.	47,XXY
	facial features, and developmental delays.		
2.	Short stature, webbed neck,	b.	46,XY
	and gonadal dysgenesis.	12 8	
3.	High-pitched cat-like cry, intellectual	c.	47,XX+21
	disability, and microcephaly.		
4.	Tall stature, gynecomastia, and small testes.	d.	45,X0

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

38. A 40-year-old woman presents to the clinic with complaints of fatigue, weakness, and swollen gums. On examination, her gums appear red, swollen, and bleed easily upon probing. She reports that she has been following a restrictive diet due to her weight loss goals, mostly consuming processed foods and avoiding fresh fruits and vegetables.

Which of the following conditions is most likely contributing to her symptoms?

- A) Vitamin D deficiency
- B) Vitamin B12 deficiency
- C) Iron deficiency anemia
- D) Vitamin C deficiency

39. Correct match of the peripheral blood smear pictures with their corresponding diagnosis is:

	Peripheral Blood Smear Pictures:		Diagnosis:
1.	Microcytic, hypochromic red blood cells with pencil-shaped cells and target cells.	a.	Iron deficiency anemia
2.	Normocytic, normochromic red blood cells with tear drop cells, nucleated red blood cells, and leukoerythroblastic changes.	b.	Thalassemia
3.	Macrocytic red blood cells with hypersegmented neutrophils.	c.	Megaloblastic anemia
4.	Schistocytes, helmet cells, and spherocytes.	d.	Hemolytic anemia

- **40.** Which diagnostic modality is most appropriate for confirming dengue infection based on the day of fever onset?
 - A) Day 1-3: PCR (Polymerase Chain Reaction) for detecting viral RNA
 - B) Day 2-4: NS1 antigen test
 - C) Day 8-10: IgM antibody capture ELISA
 - D) Day 11-14: Serological testing for IgG antibodies

41. A 45-year-old male presents to the emergency department with fever, productive cough, and pleuritic chest pain on the right side. Chest X-ray reveals a right-sided pleural effusion with blunting of the costophrenic angle. Thoracentesis is performed, and analysis of the pleural fluid reveals a turbid appearance with pH < 7.2, elevated white blood cell count, and low glucose levels. Gram stain shows gram-positive cocci in clusters.

Which of the following statements regarding the treatment of the condition described is most appropriate?

- A) Immediate initiation of broad-spectrum antibiotics is necessary, followed by chest tube drainage and possible surgical intervention.
- B) Conservative management with oral antibiotics alone is sufficient for resolution of the condition.
- C) Thoracentesis should be repeated periodically to monitor pleural fluid characteristics, and antibiotics should be initiated only if there is evidence of systemic infection.
- D) The condition usually resolves spontaneously without specific treatment; supportive care for pain management is all that is necessary.
- **42.** A 28-year-old female presents to the clinic with complaints of fatigue, nausea, and abdominal discomfort for the past week. On examination, she appears jaundiced, with scleral icterus noted. Laboratory investigations reveal elevated liver enzymes and bilirubin, with the following values:
 - Serum alanine aminotransferase (ALT): 800 IU/L
 - Serum aspartate aminotransferase (AST): 600 IU/L
 - Total bilirubin: 6 mg/dL
 - Direct bilirubin: 4 mg/dL

Which of the following treatment options is most appropriate next line of management for the condition described?

- A) Initiation of antiviral therapy with ribavirin to suppress viral replication.
- B) Rest and monitoring with supportive care for symptom management.
- C) Performance of a liver biopsy to assess the extent of liver damage.
- D) Administration of corticosteroids to reduce inflammation

43. A 65-year-old male with a history of hypertension, diabetes mellitus, and hyperlipidemia presents to the emergency department with sudden onset weakness and numbness of the right arm and leg half an hour before. On examination, he has right-sided hemiparesis and facial droop, along with slurred speech. His blood pressure is 170/100 mmHg, and he has a blood glucose level of 200 mg/dL. A non-contrast CT scan of the brain shows a hyperdense left middle cerebral artery with loss of gray-white matter differentiation, suggestive of acute ischemic stroke.

Which of the following is the most appropriate next step in the management of this patient?

- A) Immediate initiation of intravenous thrombolytic therapy with alteplase.
- B) Administration of aspirin within 24 hours of symptom onset.
- C) Transfer to a comprehensive stroke center for endovascular thrombectomy.
- D) Control of blood pressure and blood glucose levels, along with supportive care.
- 44. A 25-year-old male presents to the emergency department after spending several hours in subzero temperatures without proper protection. He complains of numbness and tingling in his fingers and toes, along with pain and swelling in the affected areas. On examination, there are areas of erythema and edema, with skin blanching upon pressure. The affected extremities feel cold to the touch, and the patient is unable to move them normally.

Which of the following is the most appropriate next step in the management and monitoring of this patient?

- A) Rewarming the affected extremities with warm water immersion.
- B) Rubbing the affected areas vigorously to promote circulation.
- C) Administering oral analgesics for pain relief.
- D) Referring the patient to a specialized burn center for further evaluation and management.

45. Correct match of the pattern of joint involvement with the corresponding diagnosis is:

	Pattern of Joint Involvement:		Diagnosis:
1.	Symmetrical polyarthritis involving small joints of hands	a.	Rheumatoid Arthritis
2.	Asymmetrical oligoarthritis involving small joints	b.	Gout
3.	Symmetrical oligoarthritis involving large joints	c.	Osteoarthritis
4.	Axial involvement with sacroiliac and spinal joints	d.	Psoriatic Arthritis
		е.	Ankylosing Spondylitis

- A) 1-a, 2-d, 3-c, 4-e
- B) 1-a, 2-b, 3-d, 4-e
- C) 1-d, 2-c, 3-a, 4-e
- D) 1-d, 2-a, 3-b, 4-e

46. The most commonly injured organ in a patient who has sustained injury following an underwater bomb explosion is

- A) Tympanic membrane.
- B) Gastro-intestinal tract.
- C) Lungs.
- D) Heart.

47. Which of the following statement is TRUE about e-FAST examination, an adjunct of primary survey during initial assessment and management of an acutely injured patients?

- A) It is a surgeon performed ultrasound.
- B) 'e' stands for "extensive".
- C) It is an adjunct of secondary survey.
- D) It is useful in detecting free air in peritoneal cavity.

48.	fore	30-year-old male has sustained machine cut injury with traumatic amputation of his left earm. Which of the following statement is not true regarding the care of amputated limb the patient?						
	A)	Clean the amputated part by gentle rinsing with Ringer's Lactate solution.						
	B)	Wrap the amputated limb in moist gauze and place it in a plastic bag.						
	C)	Freeze the amputated limb with crushed ice in a plastic bag.						
	D)	Labelling of the plastic bag with the amputated limb is a must.						
49.		ch one of the following clinical conditions has the strongest predisposition for the elopment of colorectal carcinoma in later stage of life?						
	A)	Peuts-Jegher's Polyp						
	B)	Juvenile Polyposis						
	C)	Familial polyposis coli.						
	D)	Hyperplastic poly						
50.	Whi	ch of the following sequence regarding the phases of the wound healing is true?						
	A)	Haemostasis → Proliferation → Inflammation → Remodelling						
	B)	Inflammation. → Haemostasis. → Proliferation. → Remodelling						
	C)	Haemostasis → Inflammation → Proliferation. → Remodelling						
	D)	Inflammation. → Haemostasis. → Remodelling. → Proliferation.						
51.		ich of the following statement is TRUE regarding Congenital hypertrophic pyloric osis (CHPS)?						
	A)	More Common in female child.						
	B)	Hypochloremic alkalosis.						
-	C)	Heller's myotomy is the procedure of choice.						
	D)	Most often manifest following alkali ingestion.						
(24-	A)	(18)						

(24-	A)	(19) [P.T.O.					
	D)	Blue					
	C)	Green					
	B)	Grey					
	A)	PINK					
55.	Wha	at is the colour of 18 gauge intravenous cannula					
	D)	Secondary sexual characteristics are typically normal.					
	C)	It is more common on the left side.					
	B)	Early repositioning of an incompletely descended testis can preserve function.					
	A)	Incompletely descended testis tends to atrophy as the puberty approaches.					
54.	54. Which of the following statement is NOT true in patient who is diagnosed as a case incompletely descended testis?						
	D)	Anal Incontinence					
,	C)	Reactionary haemorrhage.					
	B)	Acute retention of urine					
	A)	Pain					
53. The most common early complications following surgical haemorrhoidectomy for III & IV haemorrhoids is							
	D)	Serum IL-6 levels.					
	C)	Serum Pro-Calcitonin levels					
	B)	Total Leucocyte count.					
	A)	C-Reactive Protein (CRP) level					
52.	Which of the following biochemical parameter is used to calculate the score in the ALVARADO scoring system to assist in the diagnosis of acute appendicitis?						

(24-A)

	foot	is
	A)	Cavus, equinus, adductus, varus
	B)	Varus, adductus, cavus, equinus
	C)	Equinus, adductus, varus, cavus
	D)	Cavus, adductus, varus, equinus
57.	Wha	at is the complication of total parenteral nutrition given after major surgery:
	A)	Hypergycemia
	B)	Azotemia
	C)	Hyperkalemia
	D)	All the Above
58.	Wha	at type of Shock is observed in Burn injury:
	A)	Cardiogenic shock
	B)	Neurogenic shock
	C)	Hypovolemic shock
	D)	none of the above
59.	Wh	ich is the primary collagen type produced by in tendon?
	A)	1
	B)	ш
	C)	VI
	D)	${f x}$

(20)

(24-A)

The order of deformity correction for Ponsetti casting technique for management of club

60.	A child walks with one hand held, rises independently, takes several steps, picks up a rawith the unassisted pincer movement of forefinger and thumb, says a few words besomana" and "dada," plays simple ball game, makes postural adjustments to dressing. We is her/his age?			
	A)	8 months		
1	B)	10 months		
	C)	12 months		
	D)	15 months		
61.	Wha	at is the approximate age by which a child can hop on one foot?		
	A)	Two years		
	B)	Three years		
	C)	Four years		
	D)	Five years		
62.	irrita	8-month-old white boy manifests failure to thrive, abdominal distention, diarrhea, and ability. He was well until one month of age. After that, he has been weaned from breast to regular food. His growth curve is flattering. The most likely diagnosis is-		
	A)	Giardiasis		
	B)	Celiac disease		
	C)	Pancreatitis		
	D)	Cystic fibrosis		

- A) Acute malnutrition
- B) Chronic malnutrition
- C) Acute on chronic malnutrition
- D) Stunted

64.	Whi	ch of the following is a topoisomerase inhibitor?		
	A)	Etoposide		
	B)	Cladribine		
	C)	Cisplatin		
19	D)	Ifosfamide		
65.	All e	of the following factors are associated with a substantially greater risepsy after febrile seizures, EXCEPT.	k of dev	eloping
	A)	Atypical Febrile seizures		
	B)	Early age of onset		
	C)	Developmental abnormalities		
	D)	Positive family history of Epilepsy		
66.	10 t	0-month-old infant has a 2-day history of diarrhea and poor oral intake o 15% dehydration in this case. Which of the following fluids is mo in the fluid resuscitation?	. You di st appro	agnose a priate to
	A)	D5 1/4 Normal saline		
	B)	D5 ½ Normal saline		
	C)	Normal saline		
	D)	5% Dextrose		
67.	Toa	ad-like skin is characteristic of deficiency of which vitamin?		
	A)	A		
	B)	B2		
	C)	C		
	D)	Biotin		

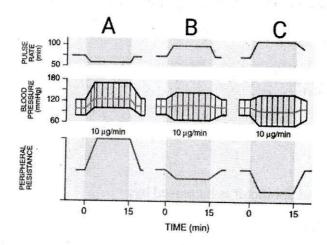
68.	SW	0-month-old child presented with a swelling in the reating, flushing, and bone pain for five weeks. CEO ss with calcification. What is the probable diagnosi	CT abdomen revealed a	s of diarrhea, n abdominal
	A)	Pheochromocytoma		es es es es
	B)	Wilms tumor		
	C)	Hepatoblastoma		
	D)	Neuroblastoma		
69.	Wh	ich of the following vaccines is a live vaccine?		
1	A)	DPT	9 9 1 9	
	B)	Typhoid polysaccharide		N 2 10
	C)	Rotavirus		sp. * g
	D)	Pneumococcal		
70.	Whi	ich of the following is TRUE regarding thumb suck	ing in children?	NO NO SEC
	A)	Intervention to reduce thumb-sucking should not l	W 75	years of age
	B)	It is rarely observed during infancy and toddlerho		·
	C)	Thumb sucking always affects the alignment of th		

Encouraging parents to ignore thumb-sucking should be avoided

- A) Gas Chromatography
- B) Mass spectrometry
- C) Nuclear Magnetic resonance
- D) Calorimetry

72	phy stan	ich of the following contains description of chemical structure, molecular weight, sical and chemical characteristics, solubility, identification and assay methods, dards of purity, storage conditions and dosage forms of officially approved drugs in a ntry.
	A)	Formulary
	B)	Essential medicines list
	C)	Drug reference
= 1	6 0	
	D)	Pharmacopoeia
73	. Wh	ich of the following is constant in a first order kinetics
	A)	Half life
	B)	Clearance
	C)	Volume of distribution
	D).	Protein binding
74	4. A 7	70 kg man is administered 500 ug of Digoxin and a plasma concentration of 0.75 ng/ml is nieved. What would be the volume of distribution of Digoxin.
	A)	667 Litre
	B)	150 Litre
	- C)	7 Litre
	D)	52 Litre
		en sur en la companya de la companya del companya del companya de la companya de
7:	int	72-year-old man with hypertension and chronic kidney disease was given a diuretic ravenously. Following administration of the drug, he developed tinnitus and diminished aring. Which of the following drugs was most likely given?
	A)	Ethacrynic acid
	B)	Triamterene
	C)	Chlorthalidone
	D)	Spironolactone
	24 4)	(24)

76. Identify A, B, C



- A) Norepinephrine, Epinephrine, Isoproterenol
- B) Epinephrine, Norepinephrine, Isoproterenol
- C) Isoproterenol, Norepinephrine, Epinephrine
- D) Isoproterenol, Epinephrine, Norepinephrine

77. Which of the following drug metabolism reaction shows genetic polymorphism

- A) Oxidation
- B) Acetylation
- C) Methylation
- D) Glucuronide conjugation

78. Antidiuretic hormone:

- A) is a long chain protein hormone
- B) decreases the osmolarity of urine
- C) decreases the volume of urine
- D) increases the reabsorption of water in the proximal tubules

	A)	Arterial blood pressure	
	B)	Systemic venous pressure	
	C)	Interstitial fluid pressure	
¥0	D)	Capillary pressure	
80.	The	tone of lower esophageal sphincter is increased by:	
	A)	Atropine	
10	B)	Gastrin	
	C)	Sympathetic stimulation	
	D)	PGE1	
81.	Ide	ntify the Essential Amino Acid (EAA) from the follow	wing:
	A)	Argine	18
	B)	Glycine	* = =
	C)	Tryptophan	
	D)	Glutamic acid	
82.	. All	are methods of pasteurization of milk EXCEPT -	
	A)	Hot soaking method	
	B)	Holder method	
	C)	HTST method	
	D)	UHT method	

79. CSF pressure is close to the:

83.	wr	ich indicator is dropped for the first tir	ne in NFHS – 5 survey?	
	A)	Disability	and the state of the factor	₹ 6
	B)	Access to toilet facility		Mx
	C)	HIV testing	man gan into a san	
	D)	Methods and reasons for abortion	8 a = v _{yzy} dcy, j ² ,	
			-	
84.	Ope	en Vial Policy is not applicable for which	ch of the following vaccines?	36 10 E 70
	A)	Oral Polio Vaccines (OPV)		
	B)	BCG vaccine		
	C)	Td		
	D)	Hepatitis B		
85.	Cu-	Γ 380 A is approved for use for how man	ny years?	
	A)	1 year	ge grag &	
	B)	5 years		
	C)	10 years		20
	D)	4 years	* - e g *	
86.	Avoi harm	dance of unnecessary medical activity, "is an example of which level of preven	keeping in mind the principle of "Fntion?	irst do no
	A)	Primordial prevention		
	B)	Secondary prevention		9.95
	C)	Primary prevention	**** 0 g = 0g (
	D)	Quaternary prevention		

(27)

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(24-A)

2			
87.		ich of the following National Health programme does not vention in the current scenario?	contribute to NCD
	A)	National Tuberculosis Elimination Programme	
	B)	National AIDS Control Programme	
	C)	RMNCH+A	

- 88. As per the Comprehensive Primary Health Care guidelines, which of the following is true?
 - A) In an upgraded SHC, one service provider i.e., Multipurpose Worker Female (MPW-F) is employed.
 - B) In 24*7 PHCs having inpatient care where cervical cancer screening is done, neither additional manpower nor capacity building of existing manpower is needed
 - C) In urban areas, 1 ASHA is required for a population of 2500
 - D) In the service delivery framework of HWCs, service delivery begins from the Health and Wellness Centres.
- 89. Which of the following is an example of passive surveillance?

National Immunization Programme

- A) WHO-STEPS survey
- B) GATS survey
- C) Cancer registry
- D) IDSP

D)

- 90. All are true regarding AYUSHMAN Ambassadors EXCEPT-
 - A) School teachers will be selected as AYUSHMAN Ambassadors
 - B) Only female school teachers are eligible candidates
 - C) They will ensure age-appropriate skill oriented theme-based sessions for school children
 - D) Every Tuesday will be dedicated as Health and Wellness Day in the schools

- 91. A 30-year-old woman presents to her gynecologist with complaints of fecal incontinence following the recent delivery of her first child. She reports difficulty controlling bowel movements, especially when experiencing urgency. On examination, there are no visible signs of perianal trauma or structural abnormalities. Which of the following is the most appropriate next step in managing her rectal incontinence?
 - A) Prescribe stool softeners and laxatives to prevent constipation and reduce straining.
 - B) Recommend pelvic floor physical therapy to strengthen the perineal muscles.
 - C) Perform a diagnostic colonoscopy to rule out underlying gastrointestinal pathology.
 - Suggest dietary modifications including increased fiber intake and avoidance of gas-producing food.
- 92. A 32-year-old woman and her partner present to a fertility clinic with a history of infertility for the past 2 years. They report regular unprotected intercourse without conception. The woman has regular menstrual cycles, and her partner's semen analysis reveals normal parameters. On further evaluation, the woman's hysterosalpingogram shows bilateral patent fallopian tubes and a normal uterine cavity. Which of the following is the most appropriate next step in managing their infertility?
 - A) Initiate ovulation induction with clomiphene citrate/letrozole with intrauterine insemination to improve the chances of conception.
 - B) Perform a diagnostic laparoscopy to evaluate for pelvic adhesions or endometriosis.
 - C) Recommend intrauterine insemination (IUI) to bypass any potential cervical factor infertility.
 - D) Proceed with In Vitro Fertilization (IVF) as the next step in assisted reproductive technology.
- 93. A 28-year-old sexually active woman presents to the gynaecology clinic with complaints of vaginal discharge and itching for the past week. She denies any urinary symptoms or lower abdominal pain. On examination, there is erythema of the vaginal mucosa and a thick, white, curd-like discharge adherent to the vaginal walls. Which of the following is not true about Amsel's criteria?
 - A) Presence of clue cells on microscopic examination
 - B) Elevated vaginal pH (>4.5)
 - C) Positive whiff test (fishy odor upon addition of potassium hydroxide)
 - D) Presence of vulvovaginal itching

- 94. A 52-year-old woman presents to her primary care physician with complaints of bothersome menopausal symptoms, including hot flashes, night sweats, and vaginal dryness. She has no significant medical history and is otherwise healthy. After discussing treatment options, the patient expresses interest in Hormone Replacement Therapy (HRT) to alleviate her symptoms. Which of the following is the most appropriate next step in managing her menopausal symptoms with HRT?
 - A) Initiate combined estrogen-progestin therapy
 - B) Start her on Selective Estrogen Receptor Modulators (SERM) especially raloxifene
 - C) Refer her to psychiatrist
 - D) Recommend non-hormonal therapies such as SSRIs or SNRIs for symptom relief
- **95.** A 30-year-old pregnant woman at 38 weeks of gestation presents with sudden onset tonic-clonic seizures. She has a history of hypertension during pregnancy and complains of severe headache and visual disturbances. What would be the next line of management?
 - A) Administration of magnesium sulfate
 - B) Immediate cesarean delivery
 - C) Initiation of antihypertensive therapy with labetalol
 - D) Intravenous administration of phenytoin
- **96.** A 32-year-old woman at 34 weeks of gestation presents with a bout of painless vaginal bleeding. Ultrasound reveals a placenta covering the internal cervical os. Her vitals are stable and she has superficially stained her pads since admission. What would be the preferred options of management for this patient?
 - A) Immediate cesarean delivery
 - B) Expectant management with close monitoring
 - C) Intravenous administration of tocolytics
 - D) Transfusion of packed red blood cells

- 97. A 30-year-old woman has profuse bleeding immediately after vaginal delivery. She had an uneventful antenatal period and spontaneous vaginal delivery of a healthy infant. On examination, her vital signs are stable, but she continues to bleed vaginally, with a boggy uterus on palpation. What would be the preferred options of management for this patient?
 - A) Administration of intravenous oxytocin
 - B) Manual removal of placenta
 - C) Tranexamic acid infusion
 - D) Uterine artery embolization
- **98.** A 32-year-old primigravida at 37 weeks of gestation presents to the labor ward with the fetus in a breech presentation. The fetal buttocks are palpable on abdominal examination, and the fetal head is located in the fundus. Which among the following would be next line of management
 - A) External Cephalic Version (ECV)
 - B) Administering intravenous oxytocin infusion
 - C) Administering epidural analgesia for pain relief
 - D) Preparing for emergency cesarean section
- 99. A 30-year-old woman presents with vaginal bleeding and passage of grape-like vesicles at 10 weeks of gestation. Ultrasound reveals a "snowstorm" appearance with no fetal tissue seen. Which of the following modalities of treatment is the most appropriate for this patient?
 - A) Suction Evacuation
 - B) Methotrexate therapy
 - C) Observation and monitoring
 - D) Hysterectomy
- 100. A 25-year-old pregnant woman presents with severe nausea, vomiting, and dehydration since the beginning of her pregnancy. On examination, she appears pale and dehydrated, with decreased skin turgor. Her laboratory tests show electrolyte imbalances. Which of the following modalities of treatment is the most appropriate for this patient?
 - A) Intravenous fluids and electrolyte replacement
 - B) Oral antiemetics
 - C) Dietary modifications and ginger supplements
 - D) Psychological counseling and relaxation techniques

ROUGH WORK

(24-A)

(32)