

HOLY SPIRIT INSTITUTE OF NURSING EDUCATION Holy Spirit Hospital, Andheri (East), Mumbai-400093

PHARMACOLOGY & PATHOLOGY-I QUESTION BANK

3rd Semester BSc. Nursing

REVIEWERS



Dr.Sr.Lalitha Rosali MSc(N), PhD(N),RN Principal, Holy Spirit Institute of Nursing Education, Andheri(East),Mumbai



Dr.Supriya Mane MSc(N),PhD(N),RN Associate professor Holy Spirit Institute of Nursing Education, Andheri(East), Mumbai

INDEX

PHARMACOLOGY-1

Chapter 1- Introduction to pharmacology	.1
Chapter 2- Antiseptic and Disinfectant	.5
Chapter 3- Drugs acting on GI system	
Chapter 4- Drugs acting on respiratory system	10
Chapter 5- Drugs used in treatment of cardiovascular system and blood disorders	13
Chapter 6- Drugs used in treatment of Endrocine system disorders	15
Chapter 7- Drugs used in treatment of communicable diseases1	18

PATHOLOGY-1

Chapter 1-Introduction of pathology	21
Chapter 2- The Respiratory system	25
Chapter 3- The Cardiovascular system	27
Chapter 4- The Gastrointestinal tract system	30
Chapter 5- Liver, Gallbladder and Pancreas	32
Chapter 6- The Skeletal system	
Chapter 7- The Endrocine system	35
Chapter 8-Heamotogical test for diagonasis of blood disorders	

- 1. Physical structure of drug includes
 - a. Weak acid
 - b. Amine
 - c. Solid
 - d. Poisonous
- 2. Natural sources of drugs are
 - a. Microbial sources
 - b. Corticosteroids
 - c. N-acetyl sources
 - d. Powder source
- 3. Half-life of a drug means?
 - a. Harmful effects of drugs
 - b. Semi-solid preparation
 - c. Time taken to reach peak level
 - d. Opposing the action of drug
- 4. The nature of drugs depends upon different factors like
 - a. Natural, microbial, mineral, marine
 - b. Biosynthetic, synthetic, kinetics, dynamics
 - c. Shape, chemical properties, physical properties
 - d. Routes, concepts, properties, forms
- 5. The term addiction means
 - a. Dependency
 - b. Weakness
 - c. Toxicity
 - d. Indirect results
- 6. Which is the enteral route of administration of medication?
 - a. Transdermal
 - b. Epidural
 - c. Oral
 - d. Nasal
- 7. Which is the fastest route of drug absorption?
 - a. Subcutaneous
 - b. Intravenous
 - c. Intramuscular
 - d. Intradermal

- 8. The drug Reserpine is derived from the plant species
 - a. Atropa belladonna
 - b. Rauwolfia serpentina
 - c. Catharanthus roseus
 - d. Tobacco leaves
- 9. The size of the drug that binds to receptor sites ranges from
 - a. 100-1000
 - b. 10-100
 - c. 10-1000
 - d. 100-10,000
- 10. Anaphylaxis means
 - a. Allergy
 - b. Side effects
 - c. Treatment
 - d. Hypersensitivity
- 11. The meaning of dose is
 - a. Time taken by drug
 - b. Amount of drug
 - c. Response of drug
 - d. Misuse of drug
- 12. Stat and PRN means
 - a. Immediately and parenteral
 - b. If necessary and at bedtime
 - c. Immediately and after meals
 - d. Immediately and as needed
- 13. Which drug is injected or a drug placed in rectum?
 - a. Aminophylline
 - b. Digoxin
 - c. Nicotine
 - d. Benadryl
- 14. Antidote means
 - a. Poisoning
 - b. Drug counteracting harmful effects
 - c. Abnormal reactivity
 - d. Impact on body and mind

- 15. Transdermal patches surface area ranges from?
 - a. 2-20sq.cm
 - b. 5-15sq.cm
 - c. 5-21sq.cm
 - d. 5-20sq.cm
- 16. In Topical route the drug is
 - a. Absorbed in blood
 - b. Applied externally
 - c. Placed under tongue
 - d. Given through rectum
- 17. The meaning of OTC and BBF is?
 - a. Over the counter and before meals
 - b. Once daily and before breakfast
 - c. Over the counter and after breakfast
 - d. Over the counter and before breakfast
- 18. Mifepristone is a
 - a. Progesterone antagonist
 - b. Oestrogen receptor antagonist
 - c. Both
 - d. None of the above
- 19. The purpose of drug classification is
 - a. To ensure drug use is safe and beneficial
 - b. To gain knowledge
 - c. To give drugs
 - d. To understand working of drugs
- 20. All are the duration of action of drugs except
 - a. Short acting
 - b. Ultra short acting
 - c. Partial acting
 - d. Intermediate acting
- 21. Pharmacokinetics of drugs includes
 - a. Absorption
 - b. Distribution
 - c. A and B
 - d. Stimulation
- 22. 1 kg is equal to
 - a. 100g
 - b. 1000g
 - c. 10g

- d. 100.2 g
- 23. Action of drug on body is called
 - a. Pharmacokinetics
 - b. Pharmacodynamics
 - c. Pharmacopoeia
 - d. Principle of drugs
- 24. When one drug inhibits/decreases the effect of another drug
 - a. Agonist
 - b. Idiosyncrasy
 - c. Drug allergy
 - d. Antagonist
- 25. Drugs that produce enzymatic activity by converting drug into its active metabolite is called
 - a. Stimulator
 - b. Inhibitors
 - c. False substrate
 - d. Prodrug
- 26. Movement of drug from site of administration to circulation is called
 - a. Distribution
 - b. Absorption
 - c. Bioavailability
 - d. Elimination
- 27. The ability of drug to elicit maximum response is called
 - a. Drug potency
 - b. Drug efficacy
 - c. Half-life of drug
 - d. Dose response relationship
- 28. When one drug increases the effect of another drug is called
 - a. Antagonism
 - b. Non-competitive antagonist
 - c. Synergism
 - d. Therapeutic index
- 29. Receptor is a
 - a. Micro molecule
 - b. Macromolecule
 - c. Mega molecule
 - d. Large molecule

- 30. Which is the type of receptor based on molecular structure
 - a. Antagonist receptor
 - b. Nuclear receptor
 - c. Inverse agonist receptor
 - d. Partial agonist receptor
- 31. Adverse drug reactions include all except
 - a. Therapeutic failure
 - b. Overdose
 - c. Therapeutic effect
 - d. Drug abuse
- 32. Which one is not the type of allergic reaction
 - a. Type 2
 - b. Type 3
 - c. Type 4
 - d. Type 5
- 33. Overdose of drugs can result in
 - a. Toxic effects
 - b. Non-toxic effects
 - c. Therapeutic effect
 - d. Synergistic effect
- 34. Fraction of given dose of a drug that reaches systemic circulation in unchanged form is called
 - a. Assimilation
 - b. Bioavailability
 - c. Elimination
 - d. Distribution
- 35. Most drugs get metabolised in this organ of body
 - a. Intestine
 - b. Spleen
 - c. Liver
 - d. Kidney

36. _____ antibiotics used in treating patients are inappropriate.

- a. 25-75%
- b. 30-20%
- c. 80%
- d. 50-60%

- 37. Which of the following sentences is false?
 - a. Always write legibly.
 - b. Always space out words and numbers to avoid confusion.
 - c. Always complete medication orders.
 - d. Always prescribe high alert medication for fever
- 38. If a patient is terminally ill which therapy is mostly preferred for patient?
 - a. Medication therapy
 - b. Drug therapy
 - c. Palliative therapy
 - d. Physiotherapy
- 39. Right patient, right drug, right dose, right route come under _____.
 - a. Principles of drug administration.
 - b. Principles of drug abuse.
 - c. Principles of pharmacology.
 - d. Principles of drug interactions.
- 40. Indian drugs act and cosmetic act was framed in which year?
 - a. 1989
 - b. 1920
 - c. 1940
 - d. 2000
- 41. Which of the following is not a factor affecting the route of administration?
 - a. Pregnancy
 - b. Liver disease
 - c. Kidney disease
 - d. Gender
- 42. Under which drug schedule do prescription drugs lie?
 - a. Schedule k
 - b. Schedule F
 - c. Schedule H
 - d. Schedule A
- 43. Which are the drug acts in India?
 - a. Drugs and cosmetics rules 1945
 - b. Patient drug rule
 - c. Narcotic drugs and psychotropic substance act 1985
 - d. Drugs order 1995

- 44. Prescriptions should be written in capitals and its always advisable to write generic drugs.
 - a. True
 - b. False
- 45. Full form of OTC is?
 - a. Over the counter
 - b. Old then confirmed
 - c. Over the commercial
 - d. Over the consent
- 46. Schedule F (III) includes _____
 - a. Standard of cosmetics
 - b. Standard of viral vaccines
 - c. Standard of umbilical tapes
 - d. Surgical dressing schedule
- 47. Pharmacy act was established in which year?
 - a. 1948
 - b. 2000
 - c. 1987
 - d. 1999
- 48. What are the features of Indian pharmacopoeia?
 - a. Comprehensive monographs
 - b. Quality standards
 - c. Regular revision
 - d. All the above
- 49. Which of the drugs is used for cleft lip, cleft palate, and microcephaly?
 - a. Thalidomide
 - b. Phenytoin
 - c. Tetracycline
 - d. Aspirin
- 50. It is an Autonomous Institution of the Ministry of Health and Family Welfare, Govt. of India.
 - a. Drug and cosmetic act
 - b. Indian pharmacopoeia commission
 - c. Schedule drugs act
 - d. World health organisation.
- 51. Study of Genetic basis of variability in drug response is known as,
 - a. Pharmacogenomics
 - b. Pharmacogenetics

- c. Pharmacokinetics
- d. Pharmacodynamics
- 52. It takes _____ half -lives for complete excretion of drug from the body.
 a. 7-8
 b. 8-9
 c. 10-11
 - d. 4-5

- 1. Explain in detail about pharmacokinetics and pharmacodynamics
- 2. Write down the principles of drug administration and factors affecting route of administration.

Q. SHORT ANSWER QUESTIONS:

- 1. Write about factors affecting drug absorption
- 2. List down the legal and ethical issues related to prescription.

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Define bioavailability
- 2. Explain any four schedule drugs

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.c 2.a 3.c 4.c 5.a 6.c 7.b 8.b 9.a 10.d 11.b 12.d 13.a 14.b 15.d 16.b 17.d 18.a 19.a 20.c 21.c 22.b. 23.b 24.d 25.d 26.b 27.b 28.c 29.b 30.b 31.c 32.d 33.a 34.b 35.c 36.a 37.d 38.c 39.a 40.c 41.d 42.c 43.b 44.a 45.a 46.c 47.a 48.d 49.b 50.b 51.b 52.d

- 1. Which agent is used to control hospital required infection and prevent infection in hospital?
 - a. Germicide
 - b. Insecticides
 - c. Pesticides
 - d. Herbicides
- 2. Sepsis is known as?
 - a. Absence of bacteria
 - b. Killing bacteria
 - c. Presence of bacteria
 - d. Inhibit bacteria
- 3. Which of the following is not the ideal quality of antiseptic and disinfectant?
 - a. Non cidal agents
 - b. Chemically stable
 - c. Non staining
 - d. Cheap
- 4. Which of the following solution is used as a pre-operative skin antiseptic?
 - a. Povidone-iodine
 - b. Iodine
 - c. Hypochloride solutions
 - d. Bacilliod
- 5. Which of the solution is used to disinfectant and sterilize fibre optics?
 - a. Hydrogen peroxide
 - b. Chlorhexidine
 - c. Glutaraldehyde.
 - d. KMnO4
- 6. Which of the following is the oxidizing agent?
 - a. Hydrogen peroxide
 - b. Hypochlorite
 - c. Chlorhexidine.
 - d. Acetic acid
- 7. Which of the following is the weak solution?
 - a. Chlorine solution.
 - b. Benzocaine
 - c. Iodine solution.
 - d. Phenol

- 8. Which of the following is used as a bleaching agent
 - a. Sodium hydroxide
 - b. Potassium permanganate
 - c. Hypochlorite salts
 - d. Glutaraldehyde
- 9. What is the percentage of Isopropyl alcohol?
 - a. 90%.
 - b. 75%
 - c. 70%.
 - d. 80%
- 10. What is the percentage of acetic acid used to kill microbes?
 - a. 1%.
 - b. 3%
 - c. 4%.
 - d. 5%
- 11. Sliver Nitrate is indicated for
 - a. Mouth sores.
 - b. Acne
 - c. Candidiasis.
 - d. Skin infection
- 12. What is full form of EUSOL
 - a. Edinburgh Unique Solution of Lime
 - b. Edinburgh Unique Solvent of Lime
 - c. Edinburgh University Solution of Lime
 - d. Edinburgh Universal Solvent of Lime
- 13. Cresol is also known as
 - a. Hydroxytoluene
 - b. Hydroxyethyl
 - c. Hydrochloride
 - d. Hydrogen peroxide
- 14. Which of the following is the example of Chloroxylenol?
 - a. Phenol.
 - b. Dettol
 - c. Savlon
 - d. Alcohol
- 15. Cidex solution is active for
 - a. 1 week
 - b. 2-4 weeks
 - c. 3 days
 - d. 24 hours

- 16. Which of the following is used as disinfectant for water tanks?
 - a. Hydrochloride solution
 - b. Potassium permanganate
 - c. Iodine
 - d. Sodium Chloride
- 17. Which of the following is used for the treatment of lice and mites?
 - a. Gentian violet
 - b. Lindane
 - c. Triple dye
 - d. Cidex
- 18. Which solution is used as a surgical scrub?
 - a. Biguanide
 - b. Bacilliod solution
 - c. Sterillium
 - d. Glutaraldehyde
- 19. What is the meaning of cidal?
 - a. Killing the microbes
 - b. Inhibiting the microbes
 - c. Growth of microbes.
 - d. Living of microbes
- 20. Which of the following is not a natural insecticide?
 - a. Salt spray
 - b. Neem leaf spray
 - c. Eucalyptus oil
 - d. None of the above

- 1. Categories of Antiseptics and disinfectants.
- 2. Explain about most common antiseptic and disinfectants used in hospital settings and role of nurse during use of antiseptic and disinfectant.

Q. SHORT ANSWER QUESTIONS:

- 1. Role of nurse during use of antiseptic and disinfectant.
- 2. Classification of antiseptics and disinfectants.
- 3. Explain in detail about aldehydes.
- 4. Explain in detail about any two examples of oxidizing agents.

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Define Disinfectant and Sterilization.
- 2. Any four qualities of an ideal antiseptics and disinfectant.
- 3. Give any two examples of Aldehydes.
- 4. What is the full form of EUSOL.
- 5. Mention two adverse effects of Phenol.

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.a 2.c 3.a 4.a 5.c 6.a 7.c 8.c 9.c 10.d 11.a 12.c 13.a 14.b 15.b 16.b 17.b 18.a 19.a 20.d

- 1. Drugs that are used to treat Nausea and Vomiting are
 - a. Emetics
 - b. Anti emetics
 - c. Anti secretory
 - d. Antacids
- 2. Which drug crosses Blood Brain Barrier (BBB)?
 - a. Domperidone
 - b. Phenothiazines
 - c. Metoclopramide
 - d. Chemoreceptors
- 3. Metoclopramide and Domperidone are agents.
 - a. Prokinetic agents
 - b. Kinetic agents
 - c. Pharmacodynamic drugs
 - d. Pharmacokinetic drugs
- 4. Classification of antiemetics includes
 - a. Anticholinergics, Antihistamines, Hydroamines
 - b. CNS depressant, Aluminium hydroxide
 - c. Cannabinoids, 5-HT³, calcium salts
 - d. H¹ antihistamines, Anticholinergics, neuroleptics
- 5. Antacids acts within ____ when taken on empty stomach.
 - a. 90 minutes
 - b. 60 minutes
 - c. 30 minutes
 - d. 10 minutes
- 6. _____ are agents that are used to stimulate defecation.
 - a. Phenothiazines
 - b. Purgatives
 - c. Butyrophenones
 - d. Tardive

- 7. Laxatives are agents that are used to stimulant defecation except
 - a. Chloride channel activators
 - b. Stimulants
 - c. Osmotic
 - d. Cannabinoids
- 8. Adverse effects of administrating lubricant is
 - a. Lipoid pneumonia
 - b. Convulsions
 - c. Peripheral neuritis
 - d. Indigestion
- If anti motility agents are taken in larger doses, then it can cause morphine like effects. So, which antidote is used to reverse the side effects
 - a. Atropine
 - b. Methylene
 - c. Naloxone
 - d. Trazodone
- 10. Intestinal flora modifiers maintain normal healthy flora which decreases the growth of diarrhoea causing
 - a. Worms
 - b. Fungal
 - c. Bacteria
 - d. Virus
- 11. As per WHO criteria, the composition of sodium chloride (NaCl) in (ORS) oral rehydration solution is
 - a. 2.6g
 - b. 2.8g
 - c. 1.6g
 - d. 1.8g
- 12. Anti Spasmodic drugs are
 - a. Dicyclomine
 - b. Atropine
 - c. Both a and b
 - d. None of the above
- 13. What causes accumulation of certain drugs like phenytoin, warfarin, lidocaine, etc
 - a. K+ATPase
 - b. Theophylline
 - c. Phenytoin d. Cimetidine

- 14. Which drug provides coating of gastric mucosa like sucralfate
 - a. Magnesium sulphate
 - b. Colloidal bismuth sub citrate
 - c. Sodium citrate
 - d. Pirenzepine
- 15. Pepsin Inhibitors are drug used as
 - ___ agents
 - a. Cytoprotective
 - b. Gastric
 - c. Smooth muscle
 - d. Misoprostol
- 16. Examples of proton pump inhibitors are except
 - a. Lansoprazole
 - b. Metronidazole
 - c. Pantoprazole
 - d. Omeprazole
- 17. Antacids are a _____ that contains different salts of calcium, magnesium, and aluminium as active components
 - a. Group of solutes
 - b. Group of solvent
 - c. Group of alkaline
 - d. Group of chemicals
- Full form of 5-HT³ antagonist is
 - a. 5-histamines
 - b. 5-hydrogentryamide
 - c. 5-hydroxytryptamine
 - d. 5-hydrotriamines
- 19. Salts _____
 - gastric acidity
 - a. Increases acidity
 - b. Increases alkalinity
 - c. Neutralise
 - d. None of the above

- 20. Aspiration and lipoid pneumonia can be caused by
 - a. Groundnut oil
 - b. Coconut oil
 - c. Sunflower oil
 - d. Mineral oil
- 21. _____ have large proteins and are used as plasma expanders in case of burns, tissue damage.
 - a. Colloids
 - b. Potential fats
 - c. Protein
 - d. Sodium
- 22. It is used to treat bacterial dysentery, food poisoning diarrhoea
 - a. Hypotonic Fluids
 - b. Furazolidone
 - c. Isotonic fluids
 - d. Hypertonic Fluids
- 23. Drugs that are used to treat gastric ulcers are called
 - a. Anti peptic ulcer drugs
 - b. Peptic drugs
 - c. Proton pump inhibitors
 - d. Anti histamines
- 24. H² Antagonist are except
 - a. Impromidine
 - b. Cimetidine
 - c. Ranitidine
 - d. Nizatidine
- 25. Which agents decrease muscle tone of intestine and decease peristalsis movement
 - a. Anticholinergics
 - b. Antibacterial
 - c. Antimotility
 - d. Absorbent
- 26. Which drug is used in case of irritable bowel syndrome?
 - a. Clarithromycin
 - b. Tetracycline
 - c. Dicyclomine
 - d. Ranitidine

- 27. Bisacodyl suppositories can cause
 - a. Burning sensation
 - b. Constipation
 - c. Vomiting and nausea
 - d. Diarrhoea
- 28. Which of these is rapid acting antacid?
 - a. Aluminium Hydroxide
 - b. Magnesium Hydroxide
 - c. Potassium hydroxide
 - d. Sodium hydroxide
- 29. Which of these is slowly acting antacid?
 - a. Aluminium Hydroxide
 - b. Magnesium Hydroxide
 - c. Potassium hydroxide
 - d. Sodium hydroxide
- 30. Diphenoxylate is available in combination with atropine, with which trade name?
 - a. Digoxin
 - b. Cetirizine
 - c. Ridol
 - d. Lomotil
- Which agents are not recommended for people who have allergies
 - a. Dioctyl
 - b. Sorbitol
 - c. Psyllium
 - d. Bisacodyl

- 1. Explain in detail about antiemetics with classification and contraindications. Also write the Role of nurse.
- 2. Describe laxatives and purgatives with causes, indication, contraindications and their side effects.

Q. SHORT ANSWER QUESTIONS:

- 1. Write role of nurse in Administrating purgatives and laxatives.
- 2. Write the mechanism of action of Proton pump inhibitors.
- 3. Write a shot note on classification of laxatives.
- 4. Write the examples, indications, contraindications and side effects of H1 antihistamines.

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Write any two drugs for triple therapy that is used to treat H. pylori.
- 2. Write 5 to 6 contraindication for Dicyclomine drugs.
- 3. Write the drug interaction of Furazolidone.

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.b 2.c 3.a 4.d 5.c 6.b 7.d 8.a 9.c 10.c 11.a 12.c 13.d 14.b 15.a 16.b 17.d 18.c 19.c 20.d 21.a 22.b 23.a 24.a 25.a 26.c 27.c 28.a 29.b 30.a 31.d

- 1. Asthma is a state of hyperreactivity.
 - a. Bronchial
 - b. Alveoli
 - c. Lobe
 - d. Interstitial
- 2. Cetirizine belongs to which category of drug?
 - a. First generation H1 antagonists
 - b. Second generation H1 antagonists
 - c. H2 antagonist
 - d. H3 antagonist
- 3. Bromhexine is an example of:
 - a. Expectorants (Mucokinetics)
 - b. Antihistamines
 - c. Antitussives
 - d. Mucolytics
- 4. Sodium cromoglycate is an example of:
 - a. Mast cell stabilizers
 - b. Sympathomimetics
 - c. Leukotrienes antagonists
 - d. Methyl xanthines
- 5. Action of xanthine derivatives is:
 - a. Relax smooth muscle around bronchioles
 - b. Block actions of acetylcholine
 - c. Increase the level of cAMP
 - d. Inhibit inflammatory response
- 6. Example of anticholinergic (Muscarinic antagonists) is:
 - a. Ipratropium bromide
 - b. Montelukast
 - c. Adrenaline
 - d. Theophylline
- 7. Isopropanol is a
 - a. Beta receptor selective drug
 - b. Beta 2 receptor selective drug
 - c. Beta 2 receptor agonist

- d. Muscarinic antagonists
- 8. Salbutamol is a:
 - a. Beta receptor selective drug
 - b. Beta 2 receptor selective drug
 - c. Beta 2 receptor agonist
 - d. Short acting Beta 2 adrenoceptor antagonists
- 9. Action of short acting Beta 2 adrenoceptor antagonists is:
 - a. It relaxes smooth muscle around bronchioles (Air sacs) of lung
 - b. Inhibit release of mast cell mediators such as histamine
 - c. Vagolytic action
 - d. Immunomodulatory /Anti-inflammatory effects
- 10. Theophylline is:
 - a. Beta receptor selective drug
 - b. Beta 2 receptor selective drug
 - c. Xanthine derivatives
 - d. Muscarinic antagonists
- 11. Budesonide is a
 - a. Corticosteroid
 - b. Systemic corticosteroid
 - c. Inhalational corticosteroid
 - d. Muscarinic antagonist
- 12. Sodium cromoglycate is a
 - a. Mast cell stabilizers
 - b. Corticosteroid
 - c. Anticholinergic
 - d. Beta 2 receptor agonist
- 13. Omalizumab is a
 - a. IgE monoclonal antibody
 - b. Antiallergic drug
 - c. Xanthine derivatives
 - d. Long-acting Beta agonist
- 14. Pseudoephedrine is a
 - a. Beta 2 receptor selective drug
 - b. Beta 2 receptor agonist
 - c. Muscarinic antagonist
 - d. Alpha adrenergic agonist

- 15. Which drugs reduce viscosity which facilitates removal of mucus from respiratory tract?
 - a. Mucokinetics
 - b. Mucolytics
 - c. Antitussives
 - d. Antihistamine
- 16. Which drugs sooth throat and reduce afferent impulses from inflamed mucosa of respiratory tract?
 - a. Mucolytics
 - b. Antitussives
 - c. Pharyngeal demulcents
 - d. Antihistamine
- 17. Impromide belongs to which category of drugs?
 - a. First generation H1 antagonists
 - b. Second generation H1 antagonist
 - c. H2 antagonist
 - d. H3 antagonist
- 18. Which Antihistamine act on histamine receptors present in mast cells, eosinophils?
 - a. H1
 - b. H2
 - c. H3
 - d. H4
- 19. Which Antihistamine act on histamine receptors present bronchiolar and blood vessels?
 - a. H1
 - b. H2
 - c. H3
 - d. H4
- 20. Which H1 antagonists penetrate Central nervous System and have highly sedative effect?
 - a. 1st generation
 - b. 2nd generation
 - c. H2 antagonist
 - d. H3 antagonist

- 21. Which drugs block muscarinic acetylcholine receptors in smooth muscles of pulmonary tissue?
 - a. Beta 2 receptor selective drug
 - b. Beta 2 receptor agonist
 - c. Muscarinic antagonist
 - d. Alpha adrenergic agonist
- 22. Classification of Anti-Asthmatic Drugs are following except:
 - a. Bronchodilators
 - b. H1 antagonists
 - c. Corticosteroid
 - d. Anticholinergic
- 23. Indications of Bronchodilators except:
 - a. Asthma
 - b. COPD
 - c. Bronchitis
 - d. Pregnancy
- 24. Categories of drugs acts as bronchoconstrictors are as follow except:
 - a. Beta 2 agonist
 - b. Corticosteroid
 - c. Anticholinergic
 - d. Beta 2 antagonists
- 25. Mast cell stabilizers is:
 - a. Antiallergic
 - b. Anticholinergic
 - c. Antibiotics
 - d. Antitussives
- 26. Antiallergic drug prevent release of mediators from mast cell which causes
 - a. Bronchospasm
 - b. Bronchodilation
 - c. Bronchoconstrictor
 - d. Bronchitis
 - 27. Immunosuppressive medications such as corticosteroids could reduce the effectiveness of
 - a. IgA
 - b. IgG
 - c. IgE
 - d. IgM

- 28. Nasal decongestants helps in the____
 - a. Shrinkage of engorged mucous membrane
 - b. Vasodilation
 - c. Allergic response
 - d. Vasoconstriction
- 29. Examples of Nasal decongestants
 - a. Xylometazoline, Oxymetazoline
 - b. Metoprolol, atenolol
 - c. Methimazole, propylthiouracil
 - d. Promethazine, cinnarizine
- 30. What causes cough?
 - a. Sympathomimetic nervous system
 - b. Parasympathetic nervous system
 - c. Enteric nervous system
 - d. Chemoreceptors

- 1. Explain anti- asthmatics drugs.
- 2. Describe expectorant, antitussives and mucolytic.
- 3. Explain broncho constrictor and antihistamine drugs.

<u>Q. SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Antihistamine drugs
- 2. Classification of drugs used for cough
- 3. Nasal decongestant
- 4. Explain the role of nurse while administering antiasthmatic drugs

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Mucolytics
- 2. Corticosteroid
- 3. Expectorant (Mucokinetics)
- 4. Methyl xanthines
- 5. Mast cell stabilizers

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.a 2.b 3.d 4.a 5.c 6.a 7.a 8.d 9.a 10.c 11.c 12.a 13.a 14.d 15.a 16.c 17.d 18.d 19.a 20.a 21.c 22.b 23.d 24.d 25.a 26.a 27.c 28.a 29.a 30.d

- 1. Agents required in the formation of blood are called
 - a. Haematinics
 - b. Haematinemia
 - c. Anticoagulant
 - d. Antianemics
- 2. How is iron stored in bone marrow and spleen?
 - a. Haemoglobin
 - b. Ferritin
 - c. Haemosiderin
 - d. Both b & c
- 3. The cellular mechanism of digoxin is
 - a. Inhibition of cAMP synthesis
 - b. Inhibition of B-Adrenergic stimulation
 - c. Inhibition of ATP degeneration
 - d. Inhibition of Na+ K+ ATPase
- 4. The condition in which iron stores are depleted in our body is called as?
 - a. Megaloblastic anaemia
 - b. Sickle cell anaemia
 - c. Microcytic hypochromic
 - d. Haemolytic anaemia
- 5. Which form of cyanocobalamin is not suitable for pernicious anaemia?
 - a. Injection
 - b. Tablets
 - c. Syrup
 - d. Supplement powder
- 6. Anaemia due to true folic acid deficiency is called as
 - a. Megaloblastic anaemia
 - b. Sickle cell anaemia
 - c. Microcytic hypochromic

- d. Haemolytic anaemia
- 7. Incidence of neural tube defect is reduced by
 - a. Vitamin B12
 - b. Iron supplements
 - c. Erythropoietin
 - d. Folic acid supplements
- 8. Except which of the drug when combined with Erythropoietin shows risk of increasing severity of Thrombosis.
 - a. Abemaciclib
 - b. Apixaban
 - c. Adagrasib
 - d. Abiraterone
- 9. Muscarinic receptor are which type of coupled receptor
 - a. C-receptor
 - b. G- receptor
 - c. B-receptor
 - d. D-receptor
- 10. Who mimics the effect of acetylcholine
 - a. Nicotinic Agents
 - b. Adrenergic Agents
 - c. Vasodilating Agents
 - d. Cholinergic Agents
- 11. Choline Esters are
 - a. Bethanechol
 - b. Carbachol
 - c. Methacholine
 - d. Arecoline
- 12. Which anticholinesterase is used for Alzheimer's disease?
 - a. Pyridostigmine
 - b. Neostigmine
 - c. Donepezil
 - d. Edrophonium
- 13. Residual neuromuscular blockade is also called as
 - a. Preoperative decurarization
 - b. Postoperative decurarization
 - c. Intraoperative decurarization
 - d. Emergency decurarization

- 14. Administration of anticholinergic agents with called cholinergic agents shows
 - a. Inhibit the efficacy of anticholinergic
 - b. Reduce the efficacy of both
 - c. Reduce the efficacy of cholinergic
 - d. None of the above
- 15. To reverse the muscarinic effect of organophosphates maintenance dose is given for how many weeks?
 - a. 3-4weeks
 - b. 6-7 weeks
 - c. 1-2 weeks
 - d. 8-9weeks
- 16. Pilocarpine eyedrop is not available in this concentration
 - a. 1%
 - b. 2%
 - c. 3%
 - d. 4%
- 17. Fight or flight body responses are as follows, except
 - a. Increased blood sugar
 - b. Increased muscle strength
 - c. Decreased rate of blood coagulation
 - d. Increased mental activity
- 18. The actual site for lipolysis
 - a. Alpha 1 receptor
 - b. Alpha 2 receptor
 - c. Beta 2 receptor
 - d. Beta 3 receptor
- 19. Xanthopsia is
 - a. Yellow tinted vision
 - b. Green tinted vision
 - c. Reddish visual image
 - d. Dark vision
- 20. Antiplatelet agents include
 - a. Enoxaparin
 - b. Aspirin
 - c. Tinzaparin

d. Delteparin

Q. LONG ANSWER QUESTIONS:

- 1. Explain in detail about the mechanism of action, indication, contraindications, adverse effects and role of nurse in administration of Vasodilators.
- 2. Write in detail about the classification of Antianginal drugs.
- 3. Discuss about drugs used to treat blood disorders.

Q. SHORT ANSWER QUESTIONS:

- 1. Write the mechanism of action of potassium channel openers.
- 2. Explain in detail about Antihypertensive drugs.
- 3. Discuss the drug therapy for chronic heart failure.

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Give any four examples of Calcium Channel Blockers drugs?
- 2. Write any two properties of plasma expanders?
- 3. What does Hypolipidemic drugs do?
- 4. Enlist the adverse effects of Thrombolytic agents?
- 5. Write down the two categories of Anticholinergic drugs?

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.a 2.b 3.d 4.c 5.b 6.a 7.d 8.b 9.b 10.d 11.d 12.c 13.b 14.c 15.c 16.c 17.c 18.d 19.a 20.b

- 1. Mechanism of action of sulfonylureas is
 - a. Increases insulin release from pancreas
 - b. Decreases glucose absorption
 - c. Increases glucose uptake from blood
 - d. Increases insulin sensitivity
- 2. Mifepristone is a
 - a. Progesterone antagonist
 - b. Oestrogen receptor antagonist
 - c. Both
 - d. None of the above
- 3. All are antiandrogen except
 - a. Flutamide
 - b. Dihydrotestosterone
 - c. Finasteride
 - d. Cyproterone acetate
- 4. Which of the following is a selective progesterone receptor modulator?
 - a. Toremifene
 - b. Nomegestrol
 - c. Ulipristal
 - d. Tamoxifen
- 5. Which of the following is synthetic Oestrogen?
 - a. Estriol
 - b. Estrone
 - c. Estradiol
 - d. Diethylstil
- 6. Acarbose is
 - a. Alpha-glucosidase inhibitors
 - b. Thiazolidinedione
 - c. Sulphonylureas
 - d. Meglitinide
- 7. Calcitonin is secreted by
 - a. Thyroid gland
 - b. Parathyroid gland
 - c. Adrenal gland
 - d. Pancreas

- 8. Which drugs belongs to non-nitrogenous by phosphonate?
 - a. Risedronate
 - b. Tiludronate
 - c. Raloxifene
 - d. Cinacalcet
- 9. Which drug inhibit thyroid hormone synthesis?
 - a. Synthroid
 - b. Propylthiouracil
 - c. Iodine
 - d. Radioactive iodine
- 10. Which of the following are types of insulin?
 - a. Short acting
 - b. Intermediate acting
 - c. Long acting
 - d. All the above
- 11. Sulfonylureas represent a class of medication utilized in treatment of
 - a. Type 1 diabetes mellitus
 - b. Type 2 diabetes mellitus
 - c. Gestational diabetes mellitus
 - d. None of the above
- 12. Thyroid gland secrets which hormone?
 - a. Thyronine
 - b. Thyroxin
 - c. Calcitonin
 - d. All the above
- 13. Which are types of steroids?
 - a. Corticosteroid
 - b. Anabolic steroid
 - c. Both a and c
 - d. None of the above
- 14. Propylthiouracil is an antithyroid drug used to manage which disease?
 - a. Graves' disease
 - b. Hypothyroidism
 - c. Diabetes mellitus
 - d. Obesity

- 15. Disorders related to calcium
 - a. Osteoporosis
 - b. Hypercalcaemia
 - c. Both a and b
 - d. None of the above
- 16. Dosage of calcium citrate is
 - a. 100-200 mg
 - b. 200-300 mg
 - c. 200-500 mg
 - d. 500-1000 mg
- 17. Hormones involved in regulation of calcium
 - a. Oestrogen
 - b. Progesterone
 - c. Testosterone
 - d. Calcitonin
- 18. Teriparatide 20mcg is given by
 - a. Intravenously
 - b. Intramuscular
 - c. Subcutaneous
 - d. Orally
- 19. Vitamin D3 is also known as
 - a. Calcium
 - b. Calcitonin
 - c. Calcitriol
 - d. Cholecalciferol
- 20. Side effects of Calcitonin are, except
 - a. Runny nose
 - b. Back pain
 - c. Joint pain
 - d. Fever
- 21. All are antithyroid drug except,
 - a. Carbimazole
 - b. Methimazole
 - c. Propylthiouracil
 - d. Carbamazepine
- 22. Plasma half-life of carbimazole is
 - a. 2 hours
 - b. 8 hours
 - c. 26 hours
 - d. 13 hours

- 23. Bromocriptine is indicated in the following except
 - a. Galactorrhoea
 - b. Parkinsonism
 - c. Hypothyroidism
 - d. Acromegaly
- 24. Orally active hormone is
 - a. Thyroxine
 - b. Growth Hormone (GH)
 - c. Prolactin
 - d. Thyroid Stimulating Hormone
- 25. Which of the following drug does not cause hypoglycaemia?
 - a. Insulin
 - b. Acarbose
 - c. Nateglinide
 - d. Glimepiride
- 26. Long-acting insulin is
 - a. Lispro insulin
 - b. Semilente
 - c. Ultralente
 - d. Lente
- 27. 2nd generation sulfonylurea drugs are all except
 - a. Tolbutamide.
 - b. Glipizide
 - c. Glibenclamide
 - d. Gliclazide
- 28. Which one drug is alpha glucosidase inhibitor?
 - a. Pioglitazone
 - b. Miglitol
 - c. Nateglinide
 - d. Metformin
- 29. Glucocorticoids with mineral corticoids activity is seen in
 - a. Betamethasone
 - b. Dexamethasone
 - c. Triamcinolone
 - d. Cortisol

- 30. Longest acting
 - Glucocorticoid is
 - a. Dexamethasone
 - b. Prednisolone
 - c. Cortisone
 - d. Prednisone

- 1. Explain oral hypoglycaemic drugs.
- 2. Discuss role of nurse while administering insulin.
- 3. Explain types of insulin
- 4. Explain classification of oral hypoglycaemic drug
- 5. What are thyroid and antithyroid drug?

Q. SHORT ANSWER QUESTIONS:

- 1. List down thyroid and antithyroid drugs.
- 2. List down the side effects of glucocorticosteroids.
- 3. List down the indication of androgen.
- 4. Write short note on parathyroid hormone.
- 5. Difference between thyroid and antithyroid drug?

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Explain calcitonin.
- 2. List down side effects of calcitonin.
- List down classification of vitamin D3.
- 4. Which hormone are involved in the regulation of calcium?
- 5. Write down disorders involving calcium.

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.a. 2.a. 3.b. 4.c. 5.d. 6.a. 7.a. 8.a. 9.b. 10.d. 11.b. 12.b. 13.c. 14.a. 15.c. 16.c. 17.d. 18.c. 19.d. 20.d. 21.d. 22.c. 23.b. 24.a. 25.b. 26.c. 27.a. 28.b. 29.d. 30.a

- 1. Which drug is effective against leprosy?
 - a. Dapsone
 - b. Amikacin
 - c. Netilmicin
 - d. Clofazimine
- 2. Primaquine belongs to which category of drugs?
 - a. 4-aminoquinoline
 - b. Quinoline methanol
 - c. 8-Aminoquinolins
 - d. Biguanides
- 3. Which drug is steroidal antibiotic?
 - a. Fusidic
 - b. Polymyxins
 - c. Rifaximin
 - d. Daptomycin
- 4. Which drug belongs to carbapenem?
 - a. Meropenem
 - b. Ampicillin
 - c. Ciprofloxacin
 - d. Sulfisoxazole
- 5. Penicillin V is a
 - a. Natural penicillin
 - b. Semi synthetic penicillin
 - c. Extended spectrum penicillin
 - d. Synthetic penicillin
- 6. First generation Cephalosporin drugs are, except
 - a. Cefazolin
 - b. Cephradine
 - c. Ceftriaxone
 - d. Cefadroxil
- 7. Ceftriaxone belongs to which generation of Cephalosporin?
 - a. First generation
 - b. Second generation
 - c. Third generation
 - d. Fourth generation

- 8. Indications of streptomycin are
 - a. Tuberculosis
 - b. Plague
 - c. Both a and b
 - d. None of the above
- 9. Aminoglycosides are very powerful antibiotics and their side effects can be
 - a. Mild
 - b. Moderate
 - c. Severe
 - d. None of the above
- 10. Bacteriostatic binds to how many ribosomal subunits?
 - a. 30s
 - b. 40s
 - c. 50s
 - d. 60s
- 11. Natural tetracyclines were introduced in the year
 - a. 1943
 - b. 1945
 - c. 1948
 - d. 1950
- 12. Adverse effects of sulphonamides are, except
 - a. Nausea
 - b. Vomiting
 - c. Epigastric pain
 - d. Breathlessness
- 13. Classification of quinolones
 - are
 - a. Moxifloxacin
 - b. Ciprofloxacin
 - c. Gemifloxacin
 - d. All the above
- 14. One of the newer classes of antibiotics are
 - a. Daptomycin
 - b. Mupirocin
 - c. Fidaxomicin
 - d. Fusidic

- 15. Fusidic dosage is given how much mg twice a day
 - a. 100 mg
 - b. 150 mg
 - c. 200mg
 - d. 250 mg
- 16. First line drugs used in treatment of tuberculosis
 - a. Thioacetazone
 - b. Kanamycin
 - c. Rifampicin
 - d. Amikacin
- 17. Another name for leprosy
 - a. Hansen
 - b. Anopheles
 - c. All the above
 - d. None of the above
- 18. Lepromatous leprosy is which type?
 - a. Pauci bacillary type
 - b. Single bacillary type
 - c. Multi bacillary type
 - d. Double bacillary type
- 19. Malaria is caused by bite of which mosquitoes?
 - a. Aedes
 - b. Anopheles
 - c. Culex
 - d. Aquatic snells
- 20. Contraindications of quinine are, except
 - a. Thrombocytopenia
 - b. Thrombocytopenia purpura
 - c. Myasthenia gravis
 - d. Varicose vein
- 21. Which medication is used to manage and treat infection caused by herpes simplex virus?
 - a. Acyclovir
 - b. Entecavir
 - c. Zanamivir
 - d. Amantadine

- 22. Which of the following are antifungal drugs?
 - a. Amphotericin
 - b. Miconazole
 - c. Both a and b
 - d. None of the above
- 23. Which drugs are useful for thread worm and roundworm?
 - a. Piperazine
 - b. Mebendazole
 - c. Albendazole
 - d. Thiabendazole
- 24. Anti retrovirus drugs are
 - a. Zidovudine
 - b. Lamivudine
 - c. Both a and b
 - d. None of the above
- 25. HIV is which type of virus?
 - a. Coronavirus
 - b. Retroviruses
 - c. Nipah virus
 - d. Influenza virus
- 26. Example of Gram-positive cocci are
 - a. Clindamycin
 - b. Erythromycin
 - c. Vancomycin
 - d. All the above
- 27. General characteristics of antimicrobial drugs are
 - a. Selective
 - b. Broad spectrum
 - c. Both a and b
 - d. None of the above
- 28. Adverse effects of Cephalosporin are, except
 - a. Diarrhoea
 - b. Nephrotoxicity
 - c. Bleeding
 - d. Vomiting
 - 29. Crotamiton belongs to which category of drugs?a. Antihelminth

- b. Antiprotozoal
- c. Antifungal
- d. Antiscabies
- 30. Streptomycin is a
 - a. Narrow spectrum aminoglycoside
 - b. Broad spectrum aminoglycoside
 - c. Monobactam
 - d. Intermediate spectrum aminoglycoside

- 1. Describe the classification of antimicrobial drugs.
- 2. Describe the factors responsible for effectiveness of treatment, selection of antimicrobial agent.
- 3. Explain the antitubercular drugs. List down the classification and write the role of nurse while administering antitubercular drugs.

Q. SHORT ANSWER QUESTIONS:

- 1. Antimalarials drugs
- 2. General characteristics of antimicrobial drugs
- 3. Quinolones drugs
- 4. Chemoprophylaxis
- 5. Sulphonamides drugs
- 6. Antiviral drugs

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

Define:

- 1. Antibiotic
- 2. Bactericidal
- 3. List at least two classifications of antiviral drugs
- 4. Daptomycin
- 5. Write the role of nurse while administering the antimalarial drugs.

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.a 2.c 3.a 4.a 5.b 6.c 7.c 8.c 9.c 10.c 11.c 12.d 13.d 14.a 15.d 16.c 17.a 18.c 19.b 20.d 21.a 22.a 23.c 24.a 25.a

- 1. Study of the structural, biochemical, and functional changes in cells, tissues, and organs that
 - a. Anatomy
 - b. Morphology
 - c. Pathology
 - d. Physiology
- 2. Sequence of cellular, biochemical, and molecular events that follow the exposure of cells or tissues to an injurious agent is
 - a. Morphologic changes
 - b. Pathogenesis
 - c. Etiology
 - d. Clinical Manifestations
- 3. Father of modern pathology is
 - a. Rudolf Virchow
 - b. Antonie Philips
 - c. Herophilus
 - d. Antonie van Leuwenhoek
- 4. All are reversible injuries of the cell, except:
 - a. Vacuole
 - b. Karyorrhexis
 - c. Fat accumulation
 - d. Cell wall swelling
- 5. Most important cells in chronic inflammation is
 - a. Lymphocytes
 - b. Platelets
 - c. Macrophages
 - d. Mast cells
- 6. During inflammation, "rubor" is because of
 - a. Arteriolar dilation
 - b. More blood viscosity
 - c. More vascular permeability
 - d. Edema

- 7. Increased permeability in acute inflammation is because of
 - a. TGF-B
- b. Serotonin
- c. Neuropeptides
- d. Histamine
- 8. One aspect wrong about wound healing is
 - a. Inhibited by infection
 - b. Inhibited by hematoma
 - c. Inhibited by DM
 - d. Inhibited by foreign body
- 9. Contraction of wound is mediated by
 - a. Myofibroblasts
 - b. Epithelial cells
 - c. Collagen
 - d. Elastin
- 10. Granulation tissue formation is due
 - to
 - a. Thrombosed vessels
 - b. Budding of new capillaries
 - c. Infiltration of cells
 - d. Mucosal proliferation
- 11. Wound strength is completely gained by
 - a. 1 month
 - b. 1 year
 - c. 6 months
 - d. Never regained
- 12. Both hyperplasia and hypertrophy are seen in
 - a. Uterus enlargement during pregnancy
 - b. Muscle enlargement
 - c. Cardiac enlargement
 - d. All the above
- 13. Abnormal cell proliferation characterised by increased number of immature cells called as
 - a. Metaplasia
 - b. Hypertrophy
 - c. Atrophy
 - d. Dysplasia

- 14. Cell injury defined as
 - a. Abnormal cell proliferation
 - b. Increased physiological demand or stimulation of the cell
 - c. Variety of stresses that encounters due to changes in its internal and external environment
 - d. Apoptosis
 - 15. Irreversible cell injury is characterised by
 - a. Extensive physical damage to the cells, especially organelles like mitochondria
 - b. Cell swelling
 - c. Accumulation of lactic acid
 - d. All the above
 - 16. Causes of fatty liver:
 - a. Excess fat in the liver
 - b. Alcohol abuse
 - c. Toxins
 - d. All the above
 - 17. Dead cell undergoes:
 - a. Dystrophic calcification
 - b. Malignant transformation
 - c. Necrosis
 - d. All the above
 - 18. What is the 2nd phase of cell necrosis?
 - a. Pyknosis
 - b. Karyolysis
 - c. Karyorrhexis
 - d. None of the above
 - 19. In below which is not the type of gangrene
 - a. Dry gangrene
 - b. Wet gangrene
 - c. Gas gangrene
 - d. Coagulative
 - 20. In which type of necrosis, the dead cell is transformed into thick viscous liquid
 - a. Liquefactive necrosis
 - b. Coagulative necrosis
 - c. Gangrenous necrosis

- d. Caseous necrosis
- 21. In fat necrosis the released fatty acids combine with calcium to produce?
 - a. Viscous liquid
 - b. Fat saponification
 - c. Toxins
 - d. None of the above
- 22. Gas gangrene is mainly caused by
 - a. Clostridium perfringens
 - b. Staphylococcus
 - c. Streptococcus
 - d. Haemophilus
- 23. In which type of necrosis there is a leakage of fibrin and other plasma proteins?
 - a. Gangrenous necrosis
 - b. Liquefactive necrosis
 - c. Caseous necrosis
 - d. Fibrinoid necrosis
- 24. In below which is the cardinal signs of inflammation?
 - a. Rubor
 - b. Calor
 - c. Tumour
 - d. All the above
- 25. Correct order of wound healing?
 - a. Haemostasis, Acute inflammatory response, Proliferation, Organization and Remodelling.
 - b. Proliferation, Haemostasis, Acute inflammatory response, Organization and Remodelling.
 - c. Acute inflammatory response, haemostasis, Organization and Remodelling, Proliferation.
 - d. Organisation and Remodelling, proliferation, haemostasis, Acute inflammatory response.
- 26. _____ is a well circumscribed lesion of around 1mm diameter.
 - a. Wet gangrene
 - b. Necrosis
 - c. Wound

- d. Granuloma
- 27. Granulomatous inflammation comes under which type of inflammation?
 - a. Acute
 - b. Chronic
 - c. Primary
 - d. Secondary
- 28. Which are not the cells of chronic inflammation?
 - a. Monocytes and macrophages
 - b. T lymphocytes
 - c. B lymphocytes and plasma cells
 - d. Phagosomes
- 29. Disordered growth of epithelium is known as
 - a. Anaplasia
 - b. Dysplasia
 - c. Metastases
 - d. Carcinoma in situ
- 30. Which of the following is the clinical feature of cancer?
 - a. Fatigue
 - b. Difficulty in swallowing
 - c. Hoarseness of voice
 - d. All of the above
- 31. Which of the following is not stages of shock?
 - a. Non progressive phase
 - b. Progressive phase
 - c. Irreversible phase
 - d. Degenerative phase
- 32. The process of partial or complete obstruction of any part of cardiovascular system by an embolus is called
 - a. Haemostasis
 - b. Thrombosis
 - c. Embolism
 - d. None of the above
- 33. Lower Sodium electrolyte level in fluid is known as
 - a. Hypokalaemia

- b. Hyponatremia
- c. Hypernatremia
- d. Hypercalcemia
- 34. Decreased partial pressure of arterial carbon dioxide and increased blood pH is known as
 - a. Respiratory Acidosis
 - b. Metabolic Alkalosis
 - c. Metabolic Alkalosis
 - d. Respiratory Alkalosis
- 35. A disease caused when the body is exposed to a sudden drop in surrounding pressure is known as
 - a. Caisson's disease
 - b. Huntington's disease
 - c. Thrombosis
 - d. Amniotic fluid embolism
- 36. Clinical term which refers to systemic hypoperfusion caused either by reduction in cardiac output or in effective circulating blood volume is known as
 - a. Thrombosisb. Haemorrhage
 - 0. Haemonnag
 - c. Shock
 - d. Nine of the above
- 37. Which is not a way of laboratory diagnosis of cancer?
 - a. Genetic testing
 - b. Tumour marker
 - c. Biopsy
 - d. Chemical test
- 38. What are the causes of Fat embolism?
 - a. Liposuction
 - b. Caesarean section
 - c. Trauma
 - d. None of the above
- 39. The suffix '-oma' is added to denote
 - a. Malignant tumours
 - b. Benign tumours
 - c. Germ cell tumours
 - d. Pre malignant tumours

- 40. Cancer is a layman's term for all
 - a. Benign neoplasm
 - b. Rhabdomyoma
 - c. Benign teratoma
 - d. Malignant neoplasm
- 41. Of the following options, which one is a positive charged anion?
 - a. Chloride
 - b. Hydrogen
 - c. Sulphate
 - d. Phosphate
- 42. What are the environmental causes of neoplasm?
 - a. Chemicals
 - b. Oncogenic viruses
 - c. Radiation
 - d. All the above
- 43. Bruise or contusion are also known as
 - a. Petechiae
 - b. Purpura
 - c. Ecchymoses
 - d. Hemarthrosis
- 44. Which of the following is not component of Virchow's triad?
 - a. Altered blood flow
 - b. Endothelial injury
 - c. Tissue factor
 - d. Hypercoagulability
- 45. Terms which is not used to describe edema is
 - a. Anasarca
 - b. Ascites
 - c. Hydrothorax
 - d. Aneurysm

- 1. Define Embolism. Write the classification of embolism and explain in detail.
- 2. Define cell injury. Explain pathogenesis of reversible and

irreversible cell injury. Enlist etiology of cell injury.

- 3. Explain the pathology of acute inflammation.
- 4. Define shock. Describe about the types and etiology of shock and explain its pathogenesis. Explain the stages of shock

Q. SHORT ANSWER QUESTIONS:

- 1. Difference between Benign tumour and Malignant tumour.
- 2. Explain phases of wound healing.
- 3. Explain in detail the process of phagocytosis?

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Define Edema. Enumerate the types of Edema.
- 2. Importance of pathology in nursing.
- 3. Differentiate between dry and wet gangrene

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.c 2.b 3.a 4.b 5.c 6.a 7.d 8.a 9.a 10.b 11.d 12.a 13.b 14.c 15.a 16.d 17.a 18.c 19.d 20.a 21.b 22.a 23.d 24.d 25.a 26.d 27.b 28.d 29.b 30.d 31.d 32.c 33.b 34.d 35.a 36.c 37.d 38.a 39.b 40.d 41.b 42.d 43.c 44.b 45.d

- 1. Name the type of bacteria that causes tuberculosis.
 - a. Staphylococcus
 - b. Mycobacterium tuberculosis
 - c. Streptococcus
 - d. M. Scrofulaceum
- 2. Most commonly affected organs by tuberculosis are except
 - a. Brain
 - b. Lung
 - c. Heart
 - d. Spine
- 3. What is the sequence of transmission of tuberculosis?
 - a. Direct contact, Ingestion, Inoculation, Transplacental route
 - b. Inoculation, Direct contact, Ingestion, transplacental route
 - c. Ingestion, transplacental route, Inoculation, Direct
 - d. Transplacental route, Inoculation, direct contact, Ingestion
- 4. Who discovered the disease tuberculosis?
 - a. Louis Pasteur
 - b. Robert Koch
 - c. Robert hook
 - d. Leeuwenhoek
- 5. Pneumonia can be defined as any infection of the lung parenchyma involving _____ and
 - a. Alveoli and bronchioles.
 - b. Lungs and trachea
 - c. Alveoli and larynx
 - d. Bronchioles and pleura
- 6. Disease that is characterised by the loss of pulmonary parenchyma...
 - a. Pneumonia
 - b. Asthma
 - c. Emphysema
 - d. Chronic Bronchitis

- 7. Which stain is used to identify mycobacterium in smear?
 - a. Ziehl-Nielson
 - b. Gram stain
 - c. PCR assay
 - d. a and c
- 8. An accumulation of protein rich fluid with high specific gravity is called
 - a. Transudative effusion
 - b. Exudative effusions
 - c. Lung abscess
 - d. Bronchiectasis
- 9. Which emphysema affects the respiratory bronchioles and involves the upper lobes?
 - a. Centriacinar emphysema
 - b. Penacinar emphysema
 - c. Emphysema
 - d. a and b
- 10. Source of pulmonary surfactant is
 - a. Alveolar macrophages
 - b. Type I pneumocytes
 - c. Type II pneumocytes
 - d. Capillary basement membrane
- 11. The most common causative organism for lobar pneumonia is
 - a. Staphylococci
 - b. Streptococci
 - c. Pneumococci
 - d. Haemophilus
- 12. Restrictive lung disease is characterized by the following features except:
 - a. Dyspnoea
 - b. Tachypnoea
 - c. Cyanosis
 - d. Wheezing
- 13. Bronchogenic carcinoma has increased incidence in the following pneumoconiosis:
 - a. Coal workers' pneumoconiosis
 - b. Silicosis
 - c. Asbestosis

- d. Berylliosis
- 14. Which type of asthma occurs in late adult life?
 - a. Atopic asthma
 - b. Intrinsic asthma
 - c. Mixed asthma
 - d. Allergic asthma
- 15. Which of the following histological types of carcinomas is most likely to be found at the periphery of the lung preceded by healed lung lesions?
 - a. Adenocarcinoma
 - b. Large cell carcinoma
 - c. Small cell carcinoma
 - d. Squamous cell carcinoma
- 16. Which antibody is produced in large amount during extrinsic asthma?
 - a. IgM
 - b. IgE
 - c. IgF
 - d. IgE & IgM
- 17. Primary tuberculosis is characterized by presence of which of the following pathology
 - a. Virchow's triad
 - b. Ghon's complex
 - c. Chocolate cyst
 - d. Cannon ball
- 18. An acute, prolonged and severe attack of asthma, which can be fatal
 - a. Status asthmaticus
 - b. Status epilepticus
 - c. Non allergic asthma
 - d. None of the above

1. What is Chronic obstructive pulmonary disease? Elaborate its two major types.

Q. SHORT ANSWER QUESTIONS:

- 1. Write a short note on pneumonia.
- 2. Write a short note on Tuberculosis.

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Classify lung tumor.
- 2. Enlist the tests performed for tuberculosis.
- 3. Define COPD.

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.b 2.c 3.a 4.b 5.a 6.c 7.a 8.a 9.a 10.c 11.b 12.c 13.a 14.d 15.a 16.b 17.b 18.a

- 1. Cardiovascular system is extremely vital organ system comprising of and .
 - a. Pulmonary artery and low veins
 - b. Heart and great Vessels
 - c. Deoxygenated veins and arteries
 - d. Coronary arteries and veins
- 2. The left side of heart is responsible for pumping
 - a. Deoxygenated blood
 - b. Deoxygenated veins
 - c. Oxygenated blood
 - d. Oxygenated veins
- 3. The main blood supply to the heart comes from
 - a. Right coronary vein
 - b. Left coronary artery
 - c. Right and left coronary arteries
 - d. Right and left coronary veins
- 4. Which layer is the outermost layer comprises further of two layers?
 - a. Endocardium
 - b. Myocardium
 - c. Pericardium
 - d. Visceral Pericardium
- 5. Pericardium effusion means
 - a. Collection of abnormal amounts of fluid
 - b. Collection of abnormal amounts of air
 - c. Collection of abnormal amounts of blood
 - d. Collection of abnormal amounts of fats
- 6. Pick out the odd man out Pericardial effusion inflammatory causes are
 - a. Viral infections, surgery of the heart, Systemic lupus erythematosus (SLE)
 - b. Bacterial infections tuberculosis, stenting procedure, Rheumatoid arthritis

- c. Fungal infections, Sjögren's syndrome, Kidney Failure
- d. Hypothyroidism, Blunt chest trauma, mesothelioma
- 7. Rheumatic fever is caused by
 - a. M. avium intracellulare
 - b. Escherichia coli
 - c. Pharyngitis
 - d. Streptococcus
- 8. Rheumatic fever is a _____
 - a. Hardening of the arterial wall
 - b. Lymphatic drainage of the fluid from the pericardial cavity
 - c. Occlusion of arterial venous drainage
 - d. Multisystem autoimmune disease
- 9. Select the non-environmental factor of Rheumatic Heart disease
 - a. Overcrowding
 - b. Poor sanitation
 - c. Shortness of breath
 - d. Poverty
- 10. The procedure to remove pericardial fluid is known as
 - a. Pericardiocentesis
 - b. Thoracentesis
 - c. Pericardial effusion
 - d. Pericardial effusion
- 11. In RHD irregular thickenings usually in the left atrium is called
 - a. Maccallum patch
 - b. Vegetations
 - c. Aschoff
 - d. Stenosis
- 12. Painless haemorrhage on palms and soles are called in infective endocarditis
 - a. Roth spots
 - b. Osler nodules
 - c. Janeway lesions
 - d. Splinter haemorrhages
- 13. The hardening and narrowing of coronary arteries by formation of plaques of cholesterol, foam cells and necrotic debris in the vessel wall:

- a. Infective endocarditis
- b. Myocardial infarction
- c. Rheumatic Heart Disease
- d. Atherosclerosis
- 14. Which of the following enzyme is elevated serum of a patient who has suffered myocardial infarction:
 - a. LDH
 - b. Loha fetoprotein
 - c. Amylase
 - d. Troponin T
- 15. A localised dilatation of wall of blood vessel due to its weakening:
 - a. Embolism
 - b. Aneurysm
 - c. Infarction
 - d. Thrombosis
- 16. An autoimmune disease affecting heart, joints, and skin of young females after a bout of pharyngitis:
 - a. Infective endocarditis
 - b. Myocardial infarction
 - c. Rheumatic Heart disease
 - d. Aneurysm
- 17. Migratory polyarthritis, pancarditis, Sydenham chorea, leukocytes and elevated C reactive proteins are seen in which condition:
 - a. Infective endocarditis
 - b. Myocardial infarction
 - c. Rheumatic Heart disease
 - d. Aneurysm
- An infective disease of heart characterised by fever, splinter haemorrhages and vegetation formation on valves after a dental procedure
 - a. Infective endocarditis
 - b. Myocardial infarction
 - c. Rheumatic Heart disease
 - d. Aneurysm

- 19. In the following heart disease, there is generally involvement of valves of right heart:
 - a. Heart disease in SLE
 - b. Carcinoid Heart disease
 - c. Nonbacterial thrombotic endocarditis
 - d. Subacute bacterial endocarditis
- 20. In chronic RHD, the most common valvular deformities are:
 - a. Mitral stenosis
 - b. Mitral histiocyte
 - c. Mitral insufficiency alone
 - d. Mitral and aortic stenosis combined
 - 21. In rheumatic heart disease, antibodies against the following streptococcal products are seen in the serum except:
 - a. DNAse B
 - b. Streptokinase
 - c. Streptolysin S
 - d. Strep Hyaluronidase
 - 22. Chronic alcoholism is associated with:
 - a. Hypertrophic cardiomyopathy
 - b. Dilated cardiomyopathy
 - c. Restrictive cardiomyopathy
 - d. Infiltrative cardiomyopathy
 - 23. Which of the following produces right ventricular hypertrophy:a. Coarctation of aorta
 - b. Aortic stenosis
 - c. Pulmonary insufficiency
 - d. Systemic hypertension
 - 24. The most common anatomic pattern of distribution of coronary blood supply is:
 - a. Left coronary preponderance
 - b. Right coronary preponderance
 - c. Circumflex preponderance
 - d. Balanced circulation
- 25. Aschoff body consists of foci of lymphocytes, occasional plasma cells, and activated macrophages is known as
 - a. Caterpillar cells
 - b. Anitschkow cells
 - c. Nuclear cells
 - d. Endothelial cells

- 26. Pick the correct Clinical feature of Rheumatic Heart disease:
 - a. Chest pain
 - b. Heaviness
 - c. Pain in left hand
 - d. Migratory polyarthritis of the large joints
- 27. Select the incorrect predisposing factors of infective endocarditis:
 - a. Infections of genitourinary tract during catheterization, cystoscopy
 - b. Upper or lower respiratory tract infection
 - c. Diabetes mellitus and alcoholism
 - d. Periodontal infective during tooth extraction or dental procedures
- 28. Select the odd man out of modifiable risk factors of Atherosclerosis:
 - a. Hyperlipidaemia, obesity, and sedentary lifestyle
 - b. Age, gender, and genetic
 - c. Hypertension, diabetes mellitus and alcoholism
 - d. Cigarette smoking, stress, and anxiety
- 29. Ischemic heart disease is also known as
 - a. Crohn's Disease
 - b. Gastric disease
 - c. Coronary Heart disease
 - d. Myocardial infarction

1. Explain about Myocardial infarction types of myocardial infarction. Also write its complication and pathogenesis.

Q. SHORT ANSWER QUESTIONS:

- 1. Explain about etiopathogenesis pericardial effusion.
- 2. Explain pathogenesis of Rheumatic heart disease.
- 3. Describe Atherosclerosis risk factors and pathogenesis.

- 4. Explain Ischemic heart disease causes and pathogenesis.
- 5. Explain etiopathogenesis of Aneurysm.

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Clinical features of pericardial effusion
- 2. Any two risk factors of Atherosclerosis
- 3. Any two causes of ischemic heart disease
- 4. Define Aneurysm
- 5. Any four clinical features of Rheumatic heart disease

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.b 2.c 3.c 4.c 5.a 6.d 7.d 8.d 9.c 10.a 11.a 12.c 13.d 14.d 15.b 16.c 17.c 18.a 19.b 20.a 21.c 22.b 23.c 24.b 25.b 26.d 27.c 28.b 29.d

- 1. Crohn's disease is characterised by the following histopathologic 3 features, except
 - a. Non-caseating sarcoid like granulomas
 - b. Superficial mucosal ulceration
 - c. Stricture formation in chronic cases
 - d. Widening of submucosa due to edema
- 2. The following features characterise ulcerative colitis, except
 - a. Formation of crypt abscess and cryptitis
 - b. Superficial mucosal ulceration
 - c. Depletion of goblet cells and mucus
 - d. Stricture formation in chronic cases
- 3. How much percent does duodenum ulcer causes
 - a. 20
 - b. 40
 - c. 80
 - d. 60
- 4. Which bacteria causes peptic ulcer?
 - a. H. Pylori
 - b. E. Coli
 - c. S. Pneumonia
 - d. M. Tuberculi
- 5. The major complication of typhoid ulcer is:
 - a. Intestinal obstruction
 - b. Intestinal perforation
 - c. Fistula formation
 - d. Malabsorption
- 6. Gross feature of typhoid fever is
 - a. Payer's patches
 - b. Single
 - c. Punched out lesions
 - d. Four zones
- 7. Most common malignant tumour of the small intestine is:
 - a. Carcinoid tumour

- b. Lymphoma
- c. Adenocarcinoma
- d. Malignant GIST
- 8. Which country has the world's highest rate of gastric cancer?
 - a. India
 - b. Japan
 - c. China
 - d. America
- 9. In gastric carcinoma, what occurs to the gastric wall?
 - a. Linitis Plastica
 - b. Signet ring cells
 - c. Krukenberg tumors
 - d. Flat lesions
- 10. The following features characterise ulcerative colitis except:
 - a. Formation of crypt abscess and cryptitis
 - b. Superficial mucosal ulceration
 - c. Depletion of goblet cells and mucus
 - d. Stricture formation in chronic cases

Q. LONG ANSWER QUESTIONS:

- 1. Explain in detail about intestinal carcinoma.
- 2. Pathophysiology of gastric carcinoma.
- 3. Write the classification of neoplasms and explain any one.
- 4. Explain in detail about inflammatory Bowel disease.
- 5. Etiopathology of peptic ulcer.

Q. SHORT ANSWER QUESTIONS:

- 1. Write the classification of peptic ulcer.
- 2. Explain about typhoid fever
- 3. Gross and microscopic features of Crohn's disease
- 4. Clinical features and pathogenesis of oesophageal carcinoma
- 5. Difference between peptic ulcer and duodenal ulcer

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

1. Enlist 4 clinical features of gastric carcinoma

- 2. Classification of inflammatory Bowel disease
- 3. Enlist complications of peptic ulcer

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.b 2.d 3.c 4.a 5.b 6.a 7.a 8.b 9.a 10.d

- 1. The most frequent anatomic site for squamous cell carcinoma of the oesophagus is?
 - a. Upper third
 - b. Lower 3rd
 - c. Middle third
 - d. Gastrointestinal
- 2. Patience of benign gastric ulcers generally has what?
 - a. High gastric acid
 - b. Normal to high gastric acid
 - c. Normal to low gastric acid
 - d. Absence of gastric acid
- 3. Duodenal ulcers are found most at?
 - a. First part, anterior surface
 - b. First part, posterior surface
 - c. Second part anterior surface
 - d. Second part posterior surface
- 4. The most common location for gastric collide carcinoma is?
 - a. Cardiac
 - b. Fundus
 - c. Body
 - d. Pylorus
- 5. The major complication of thyroid ulcer is?
 - a. Intestinal obstruction
 - b. Intestinal perforation
 - c. Malabsorption
 - d. Fistula formation
- 6. What is a normal value of alkaline phosphatase in blood?
 - a. 25 to 140 IU/L
 - b. 22 to 100 IU/L
 - c. 35 to 140 IU/L
 - d. 21 to 140 IU/L
- 7. Which of the following is the toxic product of the fungus?
 - a. Aflatoxins
 - b. Aspergillus
 - c. Steatohepatitis

- d. Alcoholism
- 8. Which of the following is the tumour marker of carcinoma of pancreas?
 - a. CEA
 - b. CA-125
 - c. CA 19.9
 - d. LDH
- 9. Which viral hepatitis has high mortality in pregnant females?
 - a. HAV
 - b. HCV
 - c. HEV
 - d. HBV
- 10. Which bilirubin enters the bloodstream and binds to albumin and is transported to the liver?
 - a. Unconjugated
 - b. Conjugated
 - c. Both a & b
 - d. Urobilinogen
- 11. The most common location for primary colorectal carcinoma is?
 - a. Rectum
 - b. Sigmoid and descending colon
 - c. Ileocecal valve
 - d. Ascending colon
- 12. Pancreatic carcinoma is most common in?
 - a. Females
 - b. Infants
 - c. Males
 - d. Children
- 13. Which is the cardinal manifestation of acute pancreatitis?
 - a. Cramps
 - b. Abdominal pain
 - c. Weakness
 - d. Fatigue
- 14. What is the incubation period of HAV?
 - a. 15 to 45 days
 - b. 20 to 90 days
 - c. 30 to 50 days
 - d. 15 to 60 days

- 15. Which type of abscess is caused by candida species?
 - a. Parasitic abscess.
 - b. Fungal Abscess
 - c. Parasitic abscess
 - d. Bacterial abscess
- 16. Which of the following releases or secrets alpha-fetoprotein?
 - a. HCC
 - b. HCV
 - c. HBV
 - d. HEV
- 17. Which of the following is not the clinical manifestation for hepatitis A?
 - a. Fever
 - b. Headache
 - c. Jaundice
 - d. Liver damage
- 18. Which is the fifth most common cancer in the world?
 - a. Hepatocellular carcinoma
 - b. Hepatic ulcer
 - c. Haemangiomas
 - d. Cholangiocarcinoma
- 19. Hepatitis A is transmitted by?
 - a. Feco-oral route
 - b. Oral route
 - c. Parenteral route
 - d. Through breast milk
- 20. Is haemolytic jaundice caused by?
 - a. Breakdown of WBC
 - b. Formation of lymphocyte
 - c. Excessive breakdown of RBC
 - d. Formation of platelets

1. Explain in detail the classification, etiology, and pathogenesis of diabetic mellitus?

Q. SHORT ANSWER QUESTIONS:

- 1. Describe the types of thyroid cancer?
- 2. Explain oral glucose tolerance test (OGTT)?
- 3. Explain the pathogenesis of type 2 diabetic mellitus?

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Define diabetic ketoacidosis
- 2. Normal ranges
 - •Impaired fasting glucose
 - •Impaired glucose tolerance
 - •Diabetes
- 3. Define atherosclerosis
- 4. What is proteinuria?

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.c 2.c 3.a 4.d 5.b 6.a 7.a 8.c 9.b 10.a 11.a 12.c 13.b 14.a 15.b 16.a 17.d 18.a 19.a 20.c

- 1. Osteoporosis means
 - a. Porous bone
 - b. Fragile bone
 - c. Compact bone
 - d. Spongy bone
- 2. Most frequent and severally involved joint in rheumatoid arthritis are
 - a. Knees
 - b. Elbows
 - c. Interphalangeal
 - d. Sacroiliac
- 3. Paget's disease of the bone has following features except
 - a. Affects older age past 50 years
 - b. Elevation of serum alkaline phosphatase
 - c. There is generally hypocalcaemia
 - d. Role of virus in its etiology
- 4. Chordoma is a:
 - a. Benign tumour
 - b. Locally recurrent tumour
 - c. Intermediate grade tumour
 - d. Malignant tumour
- 5. Most common etiologic agent implicated in chronic osteomyelitis is
 - a. Staphylococcus aureus
 - b. E. coli
 - c. Pseudomonas
 - d. Klebsiella
- 6. Common causes of myxoedema are as under except
 - a. Follicular adenoma
 - b. Ablation of thyroid by surgery
 - c. Thyroid cancer
 - d. Autoimmune thyroiditis
- 7. Disease characterised by decrease in substance or mass of bone is known as
 - a. Osteomyelitis
 - b. Osteoporosis
 - c. Chondrogenic
 - d. Vascular tumour

- 8. Hematoma is formed in which stage of wound healing
 - a. First stage
 - b. Second stage
 - c. Third stage
 - d. Fourth stage
- 9. A disease of joints caused by wear and tear of cartilage with inflammation in affected joint
 - a. Osteoporosis
 - b. Osteomyelitis
 - c. Osteoarthritis
 - d. Osteochondroma
- 10. Which bacteria causes tuberculosis osteomyelitis?
 - a. Klebsiella
 - b. Mycobacterium tuberculosis
 - c. Streptococcus aureus
 - d. Escherichia coli

Q. LONG ANSWER QUESTIONS:

- 1. Enlist the classification of bone tumours and explain
- 2. Explain in detail about osteoporosis
- 3. Classification of disease of joints
- 4. What is arthritis

<u>Q. SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Explain about pathogenesis and clinical features of osteoarthritis
- 2. Stages of bone healing
- 3. Etiopathogenesis of osteoporosis
- 4. Gross anatomy of bone

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Functions of bone
- 2. Enlist the stages of bone healing
- 3. Enlist the causes of osteomyelitis

<u>ANSWERS FOR MULTIPLE CHOICE</u> <u>QUESTIONS:</u>

1.a 2.a 3.a 4.a 5.a 6.d 7.b 8.a 9.c 10.b

- 1. Excessive secretion of ADH from posterior pituitary results from the following conditions except:
 - a. Oat cell carcinoma
 - b. Carcinoma pancreas
 - c. Pituitary adenoma
 - d. Thymoma
- 2. The following complication is almost exclusive for type 1 diabetes mellitus?
 - a. Hyperosmolar nonketotic coma
 - b. Diabetic ketoacidosis
 - c. Atherosclerosis
 - d. Diabetic nephropathy
- 3. Deficiency of which mineral causes goitre?
 - a. Calcium
 - b. Phosphorus
 - c. Sodium
 - d. Iodine
- 4. Normal range of HbA1c levels in blood?
 - a. <6 of Hb b. <8 of Hb
 - c. ≤ 4 of Hb d. ≤ 7 of Hb
- 5. Common causes of myxoedema are as under except?
 - a. Follicular adenoma
 - b. Ablation of thyroid by surgery
 - c. Thyroid cancer
 - d. Autoimmune thyroiditis
- 6. Crohn's syndrome is?
 - a. Chronic hypercortisolism
 - b. Adrenogenital syndrome
 - c. Secondary hyperaldosteronism
 - d. Primary hyperaldosteronism
- 7. What is the limit of fasting blood sugar level required to diagnose diabetes mellitus?
 - a. >126 mg/dl b. <110 mg/dl
 - c. <200 mg/dl d. <140 mg/dl
- 8. Which of the following is used to monitor blood glucose over a period of the last 1-2 weeks?
 - a. Insulin

- b. Glycated albumin
- c. Globulin
- d. Glycosylated haemoglobin
- 9. Which of the following is a metabolic disorder?
 - a. Type1 DM
 - b. Type2 DM
 - c. Diabetic mellitus
 - d. Gestational diabetic
- 10. Which of the following disease conditions is not associated with diabetes mellitus?
 - a. Cirrhosis
 - b. Atherosclerosis
 - c. Ketoacidosis
 - d. Nephropathy

Q. LONG ANSWER QUESTIONS:

1. Explain in detail the classification, etiology, and pathogenesis of diabetic mellitus?

<u>Q. SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Describe the types of thyroid cancer?
- 2. Explain oral glucose tolerance test (GTT)?
- 3. Explain the pathogenesis of type 2 diabetic mellitus?

<u>Q. VERY SHORT ANSWER</u> <u>QUESTIONS:</u>

- 1. Define diabetic ketoacidosis
- 2. Normal ranges
 Impaired fasting glucose
 Impaired glucose tolerance
 Diabetes
- 3. Define atherosclerosis
- 4. What is proteinuria

ANSWERS FOR MULTIPLE CHOICE QUESTIONS:

1.d 2.d 3.d 4.a 5.d 6.d 7.b 8.b 9.c 10.a

- 1. What is the term or name to a condition in which increase in Haemoglobin Levels or are RBC count about normal.
 - a. Polycythaemia
 - b. Hypercythemia
 - c. Anaemia
 - d. Hypercalcaemia
- 2. What is the grading of mild anaemia in woman?
 - a. 10-12g/dl
 - b. 13-20 g/dl
 - c. 17-30g/dl
 - d. 21-23g/dl
- 3. APTT evaluate the clotting factor of intrinsic pathway except
 - a. VII and XIII
 - b. VII and XI
 - c. VII and I
 - d. I and III
- 4. Rh is given after which animal
 - a. Donkey
 - b. Rhesus monkey
 - c. Lion
 - d. Zebra
- 5. In Rh positive there is presence of which antigen
 - a. A
 - b. C
 - c. B
 - d. D
- 6. A test for detection antibodies
 - a. APTT Test
 - b. Coomb's test
 - c. Prothrombin test
 - d. Clotting test
- 7. What are the other names of cross matching?
 - a. Combination testing
 - b. Compatibility testing
 - c. APTT testing
 - d. Coomb's testing

- 8. What should be the weight of the person for blood donation
 - a. Less than 50kg
 - b. More than 50kg
 - c. Between 10kg to 100kg
 - d. More than 100kg
- 9. What should be the blood pressure for blood donating person
 - a. More than 140/90 mm Hg
 - b. Less than 140/90 mm Hg
 - c. Less than 120/60 mmHg
 - d. More than 120/80 Mm Hg
- 10. The A, B and O gene is located at which chromosome number
 - a. 1
 - b. 2
 - c. 10
 - d. 9
- 11. In blood Transfusion, the Injection of a volume of blood often from a healthy person is known as
 - a. The donor
 - b. The recipient
 - c. The giver
 - d. The taker
- 12. What should be the level of Hb for blood donation?
 - a. 20 g/dl
 - b. 12 g/dl
 - c. Less than 12 g/dl
 - d. More than 12 g/dl
- 13. What the therapy called when Prothrombin time is used to monitor oral anticoagulant therapy?
 - a. Karl's therapy
 - b. Warfarin therapy
 - c. Rutherford's therapy
 - d. Wonderbra's therapy
- 14. What is the INR range for a healthy person?a. 0.8-1.2b. 0.1-13
 - c. 11.0-12
 - d. 0.1-05

- 15. What is the term or name to a condition in which increase in Haemoglobin Levels or are RBC count about normal.
 - a. Polycythaemia
 - b. Hypercythemia
 - c. Anaemia
 - d. Hypercalcaemia
- 16. What is the grading of mild anaemia in woman?
 - a. 10-12g/dl
 - b. 13-20 g/dl
 - c. 17-30g/dl
 - d. 21-23g/dl
- 17. APTT evaluate the clotting factor of intrinsic pathway except
 - a. VII and XIII
 - b. VII and XI
 - c. VII and I
 - d. I and III
- 18. Rh is given after which animal
 - a. Donkey
 - b. Rhesus monkey
 - c. Lion
 - d. Zebra
- 19. In Rh positive there is presence of which antigen?
 - a. A
 - b. C
 - c. B
 - d. D
- 20. A test for detection antibodies
 - a. APTT Test
 - b. Coomb's test
 - c. Prothrombin test
 - d. Clotting test
- 21. What are the other names of cross matching
 - a. Combination testing
 - b. Compatibility testing
 - c. APTT testing
 - d. Coomb's testing

- 22. What should be the weight of the person for blood donation
 - a. Less than 50kg
 - b. More than 50kg
 - c. Between 10kg to 100kg
 - d. More than 100kg
- 23. What should be the blood pressure for blood donating person.
 - a. More than 140/90 mm Hg
 - b. Less than 140/90 mm Hg
 - c. Less than 120/60 mmHg
 - d. More than 120/80 Mm Hg
- 24. The A, B and O gene is located at which chromosome number
 - a. 1
 - b. 2
 - c. 10
 - d. 9
- 25. In blood Transfusion, the Injection of a volume of blood often from a healthy person is known as
 - a. The donor
 - b. The recipient
 - c. The giver
 - d. The taker
- 26. What should be the level of Hb for blood donation
 - a. 20g/dl
 - b. 12g/dl
 - c. Less than 12 g/dl
 - d. More than 12 g/dl
- 27. What the therapy called when Prothrombin time is used to monitor oral anticoagulant therapy
 - a. Karl's therapy
 - b. Warfarin therapy
 - c. Rutherford's therapy
 - d. Wonderbra's therapy
- 28. What is the INR range for a healthy person.a. 0.8-1.2b. 0.1-13
 - 11 0 1
 - c. 11.0-12

- 1. What are the different methods do you know or haemoglobin estimation and write about it.
- 2. Write about the blood components and its implications.

Q. SHORT ANSWER QUESTIONS:

- 1. What are the different variation do you know in Haemoglobin.
- 2. End list the different types of anaemia with its range.
- 3. What are the different indications or haemoglobin estimation.
- 4. What are the different disadvantages of Sahli's method.
- 5. What are the different reagent used in Cyanmethemoglobin method with quantity.

Q. VERY SHORT ANSWER QUESTIONS:

- 1. Enlist the methods of haemoglobin estimation.
- 2. What is the Principle of Sahli's method.
- 3. What will happen if there is some variation in ESR (both increase and decrease)
- 4. What are the reasons for prothrombin time is important.
- 5. What is the difference between Haemolysis and Haemolysis.

<u>ANSWERS FOR MULTIPLE CHOICE</u> <u>QUESTIONS:</u>

 1.a
 2.a
 3.b
 4.b
 5.d
 6.c
 7.b
 8.b
 9.b

 10.c
 11.a
 12.d
 13.b
 14.a
 15.a
 16.a
 17.a

 18.b
 19.b
 20.d
 21.b
 22.b
 23.b
 24.b

 25.b
 26.d
 27.a
 28.d
 29.b
 30.a