1. A fifty year old man presents in emergency ward with central chest pain. On examination his blood pressure is 90/60 mmHg and pulse is 106 per minute. He is pale and sweating profusely. The most likely diagnosis is:
   a) Esophagitis.
   b) Myocardial infarction.
   c) Pericarditis.
   d) Pleural effusion.
   e) Pneumothorax.
   Key: b
   Ref: Myocardial Infarction (591) Davidson’s Principles and Practice of Medicine.

2. A thirty five year old man presents in a clinic with history of chronic productive cough that is worse in the morning and brought on by changes in posture. Sputum is copious and yellow. The most likely diagnosis in this patient is:
   a) Bronchial asthma.
   b) Bronchiectasis.
   c) Bronchogenic carcinoma.
   d) Chronic bronchitis.
   e) Pulmonary tuberculosis.
   Key: b
   Ref: Bronchiectasis (Page 684) Davidson’s Principles and Practice of Medicine.

3. A twenty year old girl is taking anti tuberculosis treatment. She presents in eye outdoor with visual complaints. The most likely cause of her symptoms is side effect of:
   a) Isoniazid.
   b) Rifampicin.
   c) Ethambutol.
   d) Pyrazinamide.
   e) Streptomycin.
   Key: c
   Ref: Adverse Reaction of First Line Anti Tuberculosis Drugs (Page 702) Davidson’s Principles and Practice of Medicine.

4. A fifteen year old boy who is diabetic presents with pain abdomen, vomiting and shortness of breath. There is history of fever and sore throat two days back. The most likely cause of his symptoms is:
   a) Diabetic ketoacidosis.
   b) Gastritis.
   c) Hypoglycemia.
   d) Non ketotic hyperosmolar coma.
   e) Renal failure.
   Key: a
   Ref: Diabetic Ketoacidosis (Page 820) Davidson’s Principles and Practice of Medicine.
5. A forty year old lady gives history of weight gain and hoarseness of voice. On examination her pulse is 64 per minute and skin is pale, coarse and dry. The most important investigation to find diagnosis in this case is:
   a) Adrenocorticotrophin hormone (ACTH).
   b) Cortisol level.
   c) Gonadotrophin levels.
   d) Insulin like growth factor (IGF).
   e) Thyroid function test.

   Key: e
   Ref: Hypothyroidism Box 20.6 (Page 750-752) Davidson’s Principles and Practice of Medicine.

6. A ten year old boy gives history of swelling of body starting from face and more on getting up in the morning. On examination his blood pressure is normal, pallor is absent and jugular venous pressure is not raised. Signs of ascites and bilateral pleural effusion are found. The first line of investigation in this case is:
   a) Blood urea level.
   b) Chest X-ray.
   c) Echocardiography.
   d) Liver function test.
   e) Urine for albumin.

   Key: e
   Ref: Nephrotic Syndrome (Page 480) Davidson’s Principles and Practice of Medicine.

7. A young girl comes in the cardiology ward with history of breathlessness and palpitations for last one year. After auscultation of precordium cardiology registrar makes diagnosis of mitral stenosis. The most important sign on which this diagnosis is based is:
   a) Ejection systolic murmur.
   b) Mid diastolic murmur.
   c) Mid systolic click.
   d) Pan systolic murmur.
   e) Third heart sound.

   Key: b
   Ref: Mitral Stenosis (Page 619) Davidson’s Principles and Practice of Medicine.

8. A fifteen year old boy presents with history of fever and arthritis. There is past history of similar symptoms one year back. A diagnosis rheumatic fever is made. The treatment of choice for this patient’s symptom is:
   a) Aspirin.
   b) Diclofenac.
   c) Ibuprofen.
   d) Paracetamol.
   e) Morphine.

   Key: a
   Ref: Rheumatic Fever (Page 618) Davidson’s Principles and Practice of Medicine.
9. An old lady presents with history of fever and left sided chest pain for one month. Examination of respiratory system shows decreased chest movements, stony dull percussion note and absent breath sounds on left side. Her chest X-ray is likely to reveal:
   a) Collapse.
   b) Consolidation.
   c) Fibrosis.
   d) Pleural effusion.
   e) Pneumothorax.

Key: d
Ref: Clinical Exam of Respiratory System (Page 649) Davidson’s Principles and Practice of Medicine.

10. A forty year old woman gives history of fever for last three weeks accompanied by dry cough, night sweats and weight loss. Chest examination is normal. Abdominal examination reveals hepatosplenomegaly. Chest X-ray shows symmetrically distributed fine nodules. The most likely diagnosis is:
   a) Military tuberculosis.
   b) Chronic liver disease.
   c) Malaria.
   d) Pneumonia.
   e) Typhoid.

Key: a
Ref: Tuberculosis (Page 696) Davidson’s Principles and Practice of Medicine.

11. A young girl complains of nocturnal cough and shortness of breath which disturbs her sleep. A diagnosis of bronchial asthma is made. The most important investigation to confirm this diagnosis is:
   a) Chest X-ray.
   b) Eosinophil count.
   c) Lung function tests.
   d) Serum IgG levels.
   e) Sputum examination.

Key: c
Ref: Bronchial Asthma (Page 673) Davidson’s Principles and Practice of Medicine.

12. A forty year old man presents with cold intolerance and weight gain. Examination reveals goiter. The most likely finding on central nervous system examination is:
   a) Ataxia.
   b) Delayed relaxation of ankle jerk.
   c) Hypotonia.
   d) Hyper reflexia.
   e) Loss of sensations.

Key: b
Ref: Hypothyroidism Davidson’s Principles and Practice of Medicine.
13. A fifteen year old girl presents with history of fever, bleeding from gums and pallor for last fifteen days. Her peripheral blood film shows pancytopenia. The most important investigation is:
   a) Bone marrow examination.
   b) Coomb’s test.
   c) Reticulocyte count.
   d) Serum folic acid level.
   e) Serum iron level.

Key: a
Ref: Acute Leukemia (Page 1040) Davidson’s Principles and Practice of Medicine.

14. Which of the following drugs is used in the treatment of hyperkalemia in acute renal failure:
   a) Amiloride.
   b) Amlodipine.
   c) Captopril.
   d) Insulin.
   e) Propranolol.

Key: d
Ref: Treatment of Hyperkalemia, Acute Renal Failure Davidson’s Principles and Practice of Medicine.

15. For the patient with history of fever, headache and neck stiffness, the most important investigation is:
   a) Cerebrospinal fluid examination.
   b) Complete blood counts.
   c) Computerized tomography scan brain.
   d) Magnetic resonance imaging brain.
   e) X-ray skull.

Key: a
Ref: Meningitis (Page 1224) Davidson’s Principles and Practice of Medicine.

16. The most common risk factor for chronic obstructive pulmonary disease is:
   a) Air pollution.
   b) Coal mining.
   c) Infection.
   d) Low socioeconomic status.
   e) Tobacco smoke.

Key: e
Ref: Chronic Obstructive, Pulmonary Disease (Page 678) Davidson’s Principles and Practice of Medicine.
17. In a patient with centripetal obesity, acne and hirsuitism. The most likely diagnosis is:
   a) Cushing’s syndrome.
   b) Diabetes mellitus.
   c) Hypogonadism.
   d) Hypothyroidism.
   e) Simple obesity.
   **Key: a**
   **Ref: Cushing’s Syndrome (Page 779) Davidson’s Principles and Practice of Medicine.**

18. In a young boy with hypertension, examination of cardiovascular system reveals radio-femoral delay. The most likely cause of hypertension in this patient is:
   a) Coarctation of aorta.
   b) Diabetic nephropathy.
   c) Conn’s syndrome.
   d) Dissection of aorta.
   e) Renal artery stenosis.
   **Key: a**
   **Ref: Coarctation of the Aorta (Page 637) Davidson’s Principles and Practice of Medicine.**

19. The gait of a patient with cog-wheel rigidity and pill rolling tremors is likely to be:
   a) Drunken.
   b) Hemiplegic.
   c) High stepping.
   d) Normal.
   e) Shuffling.
   **Key: e**
   **Ref: Parkinsonism (Page 1218) Davidson’s Principles and Practice of Medicine.**

20. An old patient presented in emergency ward with history of weakness of right side of body of rapid onset. The most helpful first line investigation for management of this patient is:
   a) Cerebral angiography.
   b) Cerebro spinal fluid examination.
   c) Computerized tomography scan brain.
   d) Fasting lipid profile.
   e) Nerve conduction study.
   **Key: c**
   **Ref: Cerebrovascular Disease (Page 1200) Davidson’s Principles and Practice of Medicine.**
21. In a patient of thalassemia peripheral blood film for red cell morphology shows:
   a) Hypochromic microcytic cells.
   b) Normochromic normocytic cells.
   c) Macrocytosis.
   d) Sickle cells.
   e) Spherocytes.
   
   **Key: a**
   **Ref: Thalassemia (Page 1038) Davidson’s Principles and Practice of Medicine.**

22. An epileptic girl is found to have gum hypertrophy. Anti epileptic drug which she is most likely taking is:
   a) Carbamazepine.
   b) Gabapentin.
   c) Lamotrigine.
   d) Phenytoin.
   e) Sodium valproate.
   
   **Key: d**
   **Ref: Epilepsy (Page 1175) Davidson’s Principles and Practice of Medicine.**

23. A patient of chronic diarrhea is having angular stomatitis and glossitis. The most likely cause of these signs is deficiency of:
   a) Folic acid.
   b) Iron.
   c) Proteins.
   d) Thiamine.
   e) Pyridoxine.
   
   **Key: b**
   **Ref: Clinical Examination Blood DIS (Page 1000) Iron Deficiency Anaemia (Page 1025) Davidson’s Principles and Practice of Medicine, Iron Deficiency, Kumar and Clark.**

24. In a patient with high grade fever, rigors and tender hepatomegaly. The most likely diagnosis is:
   a) Carcinoma of liver.
   b) Liver abscess.
   c) Malaria.
   d) Right heart failure.
   e) Typhoid fever.
   
   **Key: b**
   **Ref: Pyogenic Liver Abcess (Page 986) Davidson’s Principles and Practice of Medicine.**
25. A patient of embolic stroke is taking warfarin. He comes to dental outdoor for tooth extraction. The most useful investigation to see the effect of warfarin is:
   a) Bleeding time.
   b) Hematocrit.
   c) Platelet count.
   d) Prothrombin time.
   e) Thromboplastin time.
   Key: d
   Ref: Cerebrovascular Disease (Fig: 26:34, Page 1209) Davidson’s Principles and Practice of Medicine.

26. A forty year old man gives history of high grade fever for last one week associated with cough productive of rusty sputum. Auscultation reveals bronchial breathing on right lower chest. Chest X-ray shows consolidation. The most likely causative organism is:
   a) Anaerobic bacteria.
   b) Gram negative bacilli.
   c) Mycobacterium tuberculosis.
   d) Staphylococcus aureus.
   e) Streptococcus pneumoniae.
   Key: e
   Ref: Pneumonia (Page 687) Davidson’s Principles and Practice of Medicine.

27. The anti diabetic agent of choice for a fifty year old obese lady with mild hyperglycemia is:
   a) Chlorpropamide.
   b) Glibenclamide.
   c) Insulin.
   d) Metformin.
   e) Repaglinide.
   Key: d
   Ref: Oral Anti-Diabetic Drugs (Page 831) Davidson’s Principles and Practice of Medicine.

28. A fifty year old man presents with dysphagia. Which of the following characteristic suggests a benign structure of esophagus:
   a) Anaemia.
   b) Cervical lymphadenopathy.
   c) Dysphagia worse for solids.
   d) Hoarseness of voice.
   e) Weight loss.
   Key: c
   Ref: Benign Esophageal Structure (Page 880), Carcinoma of Esophagus (Page 882) Davidson’s Principles and Practice of Medicine.
29. A thirty five year old man presents with history of low grade fever and cough for last three months. Examination of respiratory system is normal. A diagnosis of tuberculosis is made. Which of the following feature on chest X-ray suggests this diagnosis:

a) Cavitation.
b) Con solidation.
c) Hilar congestion.
d) Prominent bronchovascular marking.
e) Rib erosion.

Key: a
Ref: Pulmonary tuberculosis (Page 695) Davidson’s Principles and Practice of Medicine.

30. In a patient with history of shortness of breath, which of the following sign indicates left heart failure:

a) Ascites.
b) Basal crepitations.
c) Dependant edema.
d) Engorged neck veins.
e) Fourth heart sound.

Key: b
Ref: Heart Failure (Page 545) Davidson’s Principles and Practice of Medicine.

31. A fifty year old man is admitted in emergency ward with acute myocardial infarction. Which of the following drug is used as acute reperfusion therapy:

a) Aspirin.
b) Clopidogrel.
c) Heparin.
d) Streptokinase.
e) Warfarin.

Key: d
Ref: Myocardial Infarction (Page 595) Davidson’s Principles and Practice of Medicine.

32. A fifty year old smoker presents with history of cough productive of mucoid sputum in every winter for last three years. The most likely diagnosis is:

a) Bronchial asthma.
b) Bronchiecstasy.
c) Bronchogenic carcinoma.
d) Chronic bronchitis.
e) Pulmonary tuberculosis.

Key: d
Ref: Chronic Obstructive Pulmonary Disease (Page 679) Davidson’s Principles and Practice of Medicine.
33. A forty year old lady presents with history of severe, constant upper abdominal pain that does not radiate and is associated with vomiting. On examination temperature is normal and there is marked tenderness in epigastrium. Most useful investigation for this patient is:
   a) Cardiac enzymes.
   b) Electrocardiography.
   c) Gastroscopy.
   d) Liver function tests.
   e) Serum amylase.

Key: c
Ref: Peptic Ulcer Disease (Page 885) Davidson’s Principles and Practice of Medicine.

34. An important physical sign of portal hypertension in a patient of cirrhosis of liver is:
   a) Gynecomastia.
   b) Hepatomegaly.
   c) Palmer erythema.
   d) Spider angioma.
   e) Spleno-megaly.

Key: e
Ref: Portal Hypertension (Page 957) Davidson’s Principles and Practice of Medicine.

35. A forty year old diabetic man presents with history of sudden onset of pain in right loin which radiates towards right iliac fossa. It is associated with fever and vomiting. On examination tenderness is present in right loin. The most likely diagnosis is:
   a) Appendicitis.
   b) Cholecystitis.
   c) Diverticulitis.
   d) Perforated peptic ulcer.
   e) Pyelonephritis.

Key: e
Ref: Acute Pyelonephritis (Page 470) Davidson’s Principles and Practice of Medicine.

36. In a patient with history of haematemesis, the clinical feature which suggests that peptic ulcer is the underlying cause is:
   a) Ascites.
   b) Drowsiness.
   c) History of jaundice.
   d) Tender epigastrium.
   e) Splenomegaly.

Key: d
Ref: Peptic Ulcer (Page 885-890) Davidson’s Principles and Practice of Medicine.
37. A young boy presents with history of fever, skin rash and diarrhea. Examination of oral cavity shows koplik spots on buccal mucosa. The most likely diagnosis is:
   a) Chicken pox.
   b) Diphtheria.
   c) Measles.
   d) Small pox.
   e) Typhoid.
   **Key: c**
   **Ref: Measles (Page 300) Davidson’s Principles and Practice of Medicine.**

38. A sixteen year old girl presents with chronic diarrhea. Which of the following features suggests that she has irritable bowel syndrome:
   a) Anaemia.
   b) Abdominal pain relieved by defecation.
   c) Blood in stools.
   d) Nocturnal symptoms.
   e) Weight loss.
   **Key: b**
   **Ref: Irritable Bowel Syndrome (Page 920) Davidson’s Principles and Practice of Medicine.**

39. A thirty year old man is found to be HBsAg positive on a routine biochemical test. He is asymptomatic. On examination there is mild hepatomegaly. Alanine aminotransferase (ALT) is 200 μ/L. HBV-DNA is positive by polymerase chain reaction (PCR). The oral antiviral agent of choice for this patient is:
   a) Aciclovir.
   b) Adefovir.
   c) Amantidine.
   d) Ribavirin.
   e) Zidovudine.
   **Key: b**
   **Ref: Chronic Hepatitis B Infection (Page 370, 371) Clinical Medicine Kumar and Clark**

40. In a patient with history of muscle cramps and carpopedal spasm. Which of the following serum electrolyte level is most likely to be low:
   a) Calcium.
   b) Chloride.
   c) Magnesium.
   d) Potassium.
   e) Sodium.
   **Key: a**
   **Ref: Hypocalcemia and Hypoparathyroidism (Page 1094, 1095) Clinical Medicine Kumar and Clark**
41. A young boy presents in outdoor with history of sudden painful swelling of joints after minor trauma since childhood. The most likely diagnosis is:
   a) Disseminated intravascular coagulation.
   b) Glanzmann’s thrombasthenia.
   c) Idiopathic thrombocytopenic purpura.
   d) Haemophilia A.
   e) Sickle cell disease.
   
   Key: d
   Ref: Haemophilia (Page 1057) Davidson’s Principles and Practice of Medicine.

42. In a patient with history of jaundice, pruritis and clay-colored stools, which of the following enzyme level is expected to be markedly elevated:
   a) Alkaline aminotransferase.
   b) Alkaline phosphatase.
   c) Aspartate aminotransferase.
   d) Lactate dehydrogenase.
   e) Pyruvate kinase.
   
   Key: b
   Ref: Cholestatic Jaundice (Page 946) Davidson’s Principles and Practice of Medicine.

43. A patient presents with history of intermittent fever, abdominal pain and headache. Abdominal examination shows tenderness and hepatosplenomegaly. His blood culture is positive for salmonella typhi. The antibiotic of choice for this patient is:
   a) Ciprofloxacin.
   b) Gentamycin.
   c) Metronidazole.
   d) Tetracycline.
   e) Vancomycin.
   
   Key: a
   Ref: Enteric Fever (Page 85) Clinical Medicine Kumar and Clark.

44. Which of the following is a cause of central cyanosis:
   a) Exposure to cold.
   b) Heart failure.
   c) Shock.
   d) Right to left cardiac shunts.
   e) Raynaud’s phenomenon.
   
   Key: d
   Ref: Cyanosis (page 735) Clinical Medicine Kumar and Clark.

45. The most common side effect of quinine is:
   a) Coma.
   b) Deafness.
   c) Headache.
   d) Respiratory depression.
   e) Tremors.
   
   Key: b
   Ref: Antimalarials (Page 211) Davidson’s Principles and Practice of Medicine.