



Post Graduate Medical Diploma (Part-I)
Diploma in Tuberculosis and Chest Diseases (DTCD)
Paper-I
(Multiple Choice Questions)
MODEL PAPER

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Signatures of Candidate

Roll No.

Total Marks: 100
Time Allowed: 2 hours

Instructions:

- i. Read the instructions on the MCQ Response Form carefully.
- ii. Attempt **all** questions.
- iii. Question Paper to be returned along with MCQ Response Form.
- iv. Candidates are strictly prohibited to give any identification mark except Roll No. & Signatures in the specified column only.

- Q.1 Acute viral bronchiolitis:**
- a) Often show hyaline membranes in the respiratory passages.
 - b) May be complicated by the development of lung abscess.
 - c) Characteristically affect middle-aged individuals.
 - d) Are typically secondary to another infection.
 - e) May be associated with the formation of epithelial giant cells in the alveoli.
- Q.2 Bronchial carcinoma is a recognized occupational hazard in:**
- a) Coal-mining.
 - b) Manufacture of coal gas.
 - c) The asbestos industry.
 - d) Welding.
 - e) Manufacture of aniline dyes.
- Q.3 Faecal excretion plays an important part in the spread of the following pathogens:**
- a) M. tuberculosis.
 - b) Rhino viruses.
 - c) Hepatitis.
 - d) Leprosy.
 - e) Bubonic plague.
- Q.4 Tuberculin:**
- a) Is a toxin produced by Mycobacteria.
 - b) When injected gives rise to humoral antibodies.
 - c) Is used as a prophylactic immunizing agent.
 - d) When injected produces a delayed inflammatory response in a person who is immune to Mycobacterium tuberculosis.
 - e) Is relatively heat stable when in concentrated solution.
- Q.5 In a posteroanterior radiograph of thorax, the following structure forms the left margin of the heart shadow:**
- a) Right auricle.
 - b) Pulmonary trunk.
 - c) Aortic orifice.
 - d) Right ventricle.
 - e) Left common carotid artery.
- Q.6 A patient came to the hospital with fracture of the manubrium sterni. Which structure is likely to be injured in such a case?**
- a) Ascending aorta.
 - b) Descending thoracic aorta.
 - c) Right brachiocephalic vein.
 - d) Inferior vena cava.
 - e) Brachiocephalic artery.
- Q.7 Which of the following statements about streptococcus pneumoniae is not correct:**
- a) They are becoming increasingly resistant to benzyl penicillin.
 - b) There is a strong connection between infection with this organism and the nephrotic syndrome.
 - c) They are one of the principal organisms giving rise to pyogenic meningitis.
 - d) They may persist in the carrier state in one or more members of a family.
 - e) They are no longer the main cause of Pneumonia.
- Q.8 Recognized features of infectious mononucleosis include all except:**
- a) Sparing of the tonsillar lymph nodes.
 - b) Sensitivity, in the form of a rash, to ampicillin.
 - c) Pericarditis.
 - d) Also called kissing disease.
 - e) Raised serum AST (GOT) activity.
- Q.9 A middle-aged patient complains of persistent nasal stuffiness, this might be due to:**
- a) Diabetes mellitus.
 - b) Deviated nasal septum.
 - c) Enlarged adenoids.
 - d) Methyldopa (Aldomet) therapy.
 - e) Prolonged use of a topical decongestant.

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- Q.10 The aortic opening of diaphragm transmits:**
a) Azygous veins.
b) Right and left vagus nerves.
c) Left gastric vessels.
d) Right phrenic nerve.
e) Inferior vena cava.
- Q.11 Tuberculosis of urinary tract:**
a) Is a primary infection by the organism.
b) Characteristically causes pain in the affected kidney.
c) Is typically accompanied by pyuria with sterile culture.
d) Should not be treated until the organism is cultured.
e) Causes frequency of micturition only when the bladder is directly involved.
- Q.12 Preop Spirometry in a 70 years old man reveals FEV/FVC = 75% of predicted and FEF25-75 = 50% of predicted value. Most likely pulmonary dysfunction is:**
a) Normal study.
b) Restrictive dysfunction.
c) Upper airway obstruction.
d) Bronchiolitis.
e) Thyroid carcinoma.
- Q.13 Acid fast Bacilli include all except:**
a) M scrofulaceum.
b) Mycoplasma.
c) Leprosy bacillus.
d) Nocardia.
e) M Kansaii.
- Q.14 Which of the following statements about the angle of Louis is not correct:**
a) Helps in rib counting.
b) Lies at T2.
c) Carotid bifurcation occurs at this level.
d) It is prominent in thin subjects.
e) Bronchial breathing may be heard over it.
- Q.15 Which of the following statements is correct about diaphragm:**
a) Develops from mesoderm only.
b) Gets sensory supply from C3-5.
c) Gets motor supply from phrenic nerve.
d) A raised Hemidiaphragm on chest X-ray is only caused by phrenic paralysis.
e) Right crus is smaller than left.
- Q.16 Which of the following statements about Pleura is not correct:**
a) Visceral and parietal are in continuation.
b) Both pleurae join at hilum.
c) Blood supply comes from systemic circulation.
d) Visceral pleura has no pain receptors.
e) Divides left lung into three lobes.
- Q.17 All of the following statements are correct about Diaphragm, except:**
a) Motor supply comes from intercostal nerves.
b) Intercostal nerves are sensory for central tendon.
c) Right hemidiaphragm originates from L1-3.
d) Right crus is bigger than left.
e) It originates from septum transversum.
- Q.18 Following are correct about Right Lung:**
a) It is larger than left.
b) Divides into upper, lower and lingual.
c) Posses 10 bronchopulmonary segments.
d) Medial surface is related to oesophagus throughout its course.
e) It weighs more than left lung.
- Q.19 Oxygen Dissociation Curve shifts to the right with:**
a) Pyrexia.
b) Respiratory alkalosis.
c) Decreased 2-3 diphospho glycerate in RBCs.
d) Polycythemia.
e) Sick cell anaemia.
- Q.20 Which of the following statement about tidal Volume is not correct:**
a) It is part of expiratory reserve volume.
b) Is part of vital capacity.
c) Is part of minute ventilation.
d) Can be measured by nitrogen washout test.
e) Indicates exercise capacity.
- Q.21 Arterial PO₂ is lowered by all except:**
a) Pulmonary fibrosis.
b) Fat embolism.
c) Acute pulmonary oedema.
d) Cyanide poisoning.
e) Obstructive airway disease.
- Q.22 Which of the following about Oxygen Dissociation curve, is not correct:**
a) Shifts to left if Hg has more affinity for Oxygen.
b) Shifts to left if temperature is high.
c) Shifts to the right with increase in hydrogen ion concentration.
d) Expresses relationship between SO₂ and PO₂.
e) Shifts to right at high levels of DPG.
- Q.23 The Respiratory center:**
a) Lies in spinal cord.
b) Lies in medulla oblongata.
c) Lies in hypothalamus.
d) Lies in carotid bodies.
e) Lies in frontal cortex.

- Q.24 A hypercapnoeic patient has all the features except:**
 a) High blood bicarbonate level. d) High blood pH.
 b) Acidic urine. e) Impaired ventilation.
 c) Lower PO₂ while breathing air.
- Q.25 A 49 year old miner develops smear-positive mycobacterium tuberculosis. Which of the following dusts is most likely to have increased the risk of this infection in this patient?**
 a) Coal dust. d) Silica.
 b) Asbestos. e) Beryllium.
 c) Cadmium.
- Q.26 In patients with restrictive lung disease all are correct except:**
 a) FEV/FVC ratio is normal or increased. d) Total lung capacity is increased.
 b) PEFR is decreased. e) Vital capacity is decreased.
 c) Residual volume is decreased.
- Q.27 In Obstructive lung diseases all are incorrect except:**
 a) FEV1 remains normal. d) FEV/FVC is normal.
 b) FVC is decreased. e) Residual volume is decreased.
 c) PEFR is normal.
- Q.28 Respiratory Dead space is:**
 a) Equal to anatomical dead space in normal subject. d) Increased with increased pulmonary blood flow.
 b) Decreased in old age. e) Directly proportionate to body weight.
 c) Increased with intermittent positive pressure breathing.
- Q.29 With regards to asthma provocation which of the following statements is NOT true?**
 a) Cockroach body parts are an important indoor allergen. d) Food allergens are a common precipitant of asthmatic symptoms.
 b) The sensitivity to environmental allergens decreases with age. e) Peak expiratory flow rates improve when patients avoid environmental allergens to which they are sensitive too.
 c) Animal dander is an important indoor allergen.
- Q.30 Which of the following is not a characteristic of occupational lung diseases?**
 a) Atopic individuals are at an increased risk. d) Isocyanates may cause pulmonary oedema.
 b) Smoking is not a recognized risk factor. e) Berylliosis is steroid responsive.
 c) Wheeze and cough in a cotton worker may be byssinosis.
- Q.31 All are incorrect about vital capacities except:**
 a) Higher in females. d) Directly related to lung compliance.
 b) More on lying than sitting. e) Maximum amount of air which can be inhaled in addition to residual volume.
 c) Equal to Tidal volume x Respiratory rate.
- Q.32 CO₂ in blood is carried as:**
 a) Carboxy Haemoglobin. d) Dissolved in plasma.
 b) Bicarbonates. e) Carbonic acid.
 c) Combined with plasma proteins.
- Q.33 Airflow obstruction leads to reduction in all except:**
 a) FEV. d) Ventilation perfusion ratio.
 b) FEV/FVC ratio. e) Peak expiratory flow rate.
 c) Residual volume.
- Q.34 Hypoxemia in chronic respiratory failure leads to all except:**
 a) Right heart failure. d) Peripheral cyanosis.
 b) Pulmonary vasodilatation. e) Central cyanosis.
 c) Increased erythropoiesis.
- Q.35 A man is diagnosed with small cell lung cancer. Despite a normal brain MRI he develops progressive truncal ataxia. The most helpful investigation is:**
 a) Anti-purkinje cell antibody levels. d) Serum calcium.
 b) Lumbar puncture. e) Visual Evoked potential.
 c) Serum sodium.
- Q.36 Bronchial asthma is likely to be relieved by all except:**
 a) Beta agonists. d) Leukotrienes.
 b) Glucocorticoids. e) Anticholinergic drugs.
 c) Mast cell stabilizers.
- Q.37 About Vital Capacity all are correct except:**
 a) Reduced with advanced age. d) Equal to sum of inspiratory and expiratory reserve volume.
 b) Greater in men than women of same age. e) Is same as FVC in normal subjects.
 c) Related to lean body mass.

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- Q.38 Which statement is correct about Residual Volume:**
 a) The amount of air left in lungs after normal expiration.
 b) More in men than women.
 c) About 1.6 L in an adult.
 d) Measured by spirometry.
 e) Smaller in older age.
- Q.39 All about Pulmonary Dead Space are correct except:**
 a) Is decreased during coughing.
 b) Is decreased during deep inspiration.
 c) Is increased with rise in catecholamine level.
 d) Is not involved in exchange of gases.
 e) Saturates air with water vapours.
- Q.40 Staphylococci do not result in:**
 a) Abscess.
 b) Cellulitis.
 c) Lymphangitis.
 d) Interstitial Pneumonia.
 e) Carbuncle.
- Q.41 Ascariasis can cause all except:**
 a) Pneumonia.
 b) Bowel obstruction.
 c) Jaundice.
 d) Severe anaemia.
 e) Anal itch.
- Q.42 Which of the following diseases are transmitted by blood transfusion:**
 a) Hepatitis-A.
 b) HIV infection.
 c) Malaria.
 d) Tuberculosis.
 e) Pneumonia.
- Q.43 Bronchopulmonary Aspergillosis is characterized by all except:**
 a) Is rarely a primary disease.
 b) May present with bronchiectasis.
 c) Results in formation of fungal balls.
 d) Surgery is the only treatment.
 e) Occurs in immunocompetent subjects.
- Q.44 All are correct except one, Aspergillosis is caused by:**
 a) A fungus.
 b) Usually results in granulomatous disease.
 c) Usually seen in preexisting lung disease.
 d) Occurs in patients on long term steroids.
 e) Can present with asthma.
- Q.45 A solitary pulmonary nodule in an HIV infected patient may represent:**
 a) Pneumocystis Jiroveci Pneumonia.
 b) Histoplasmosis.
 c) Cryptococcosis.
 d) Bronchogenic carcinoma.
 e) All of the above.
- Q.46 Organisms involved in Cystic Fibrosis exacerbations includes all of the following except:**
 a) S. Aureus.
 b) P. Auruginosa.
 c) Stenotrophomonas maltophilia.
 d) Burkholderia cepacia.
 e) Mycobacterium tuberculosis.
- Q.47 In case of an Exudative lymphocytic effusion, elevated levels of adenosine deaminase is not a feature of:**
 a) Lymphoma.
 b) Sarcoidosis.
 c) Tuberculous pleuritis.
 d) Bacterial empyema.
 e) Leukaemia.
- Q.48 The following are the commonest masses of the anterior-superior mediastinum, except:**
 a) Germ cell tumour.
 b) Thymoma.
 c) Schwanoma.
 d) Lymphoma.
 e) Retrosternal thyroid.
- Q.49 The most common indication for pectus carinatum repair is:**
 a) Pulmonary hypertension.
 b) Lung collapse.
 c) Cosmetic reasons.
 d) Coarctation of aorta.
 e) Cor pulmonale.
- Q.50 The most hepatotoxic anti tuberculous drug is:**
 a) Streptomycin.
 b) Isoniazid.
 c) Pyrazinamide.
 d) Rifampicin.
 e) Ethambutol.
- Q.51 Which of the following is not associated with increased risk of developing TB?**
 a) Diabetes mellitus.
 b) Silicosis.
 c) Gastrectomy.
 d) CXR findings suggestive of previous TB.
 e) Splenectomised individuals.
- Q.52 Which of the following tests detects interferon gamma release from sensitized lymphocytes?**
 a) Tuberculin test.
 b) Kveim test.
 c) Quantiferon TB Gold test.
 d) All of the above.
 e) None of the above.

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- Q.53 Which of the following first line anti TB drugs can cause Sideroblastic anaemia?**
 a) Streptomycin. d) Rifampicin.
 b) Isonicotinic Acid Hydrazide. e) Ethambutol.
 c) Pyrazinamide.
- Q.54 Permanent staining of contact lenses of a TB patient can occur due to:**
 a) Streptomycin. d) Rifampicin.
 b) Kanamycin. e) Ofloxacin.
 c) Pyrazinamide.
- Q.55 In a patient <45years of age, having recurrent PE, which of the following is unlikely:**
 a) SLE. d) Factor V Leiden mutation.
 b) Anti thrombin (AT) deficiency. e) Factor VIII deficiency.
 c) Deficiency of Protein C & S.
- Q.56 The most successful smoking cessation strategy is:**
 a) Quitting once for all. d) Bupropion for 12 weeks.
 b) Gradual withdrawal. e) Meditation.
 c) Nicotine replacement treatment.
- Q.57 Which of the following modalities actually improves the long term survival of individuals with COPD?**
 a) Theophylline. d) Long term oxygen treatment.
 b) Oral corticosteroids. e) None of the above.
 c) Domiciliary Non invasive ventilation.
- Q.58 Which of the following groups of organisms are commonly encountered in exacerbations of COPD?**
 a) Pneumococcus, H. Influenzae & Pseudomonas aeruginosa. d) Enteric Gram negative organisms.
 b) Pneumococcus, H. Influenzae & M. Cattarhalis. e) Staph Aureus, Klebsiella & Legionella
 c) Atypical organisms including Chlamydophila Pneumoniae. Pneumophila.
- Q.59 Malignant mesothelioma usually has documented asbestos exposure in:**
 a) None. d) 60%.
 b) 40%. e) All.
 c) 50%.
- Q.60 Chest radiographic findings in Berylliosis are similar to:**
 a) Silicosis. d) Pulmonary malignancy.
 b) Sarcoidosis. e) None of the above.
 c) Pulmonary edema.
- Q.61 Spirometry tests are used to demonstrate all of the following in obstructive airway disease except:**
 a) Airflow limitation. d) Hyper responsiveness by using challenge tests.
 b) Functional respiratory reserve. e) Reversibility of airflow limitation with inhalation of a bronchodilator.
 c) Reversibility of airflow limitation over time.
- Q.62 Which of the following is the least likely factor to precipitate the development of asthma in a predisposed individual?**
 a) Tobacco smoke. d) Weather changes.
 b) Air pollution. e) Pregnancy.
 c) Respiratory infection.
- Q.63 A 30 yrs old chronic asthmatic, on oral theophylline comes with symptoms of Respiratory tract infection. Which of the following antibiotics should not be used in this patient?**
 a) Amoxicillin. d) Cephalexin.
 b) Erythromycin. e) Levofloxacin.
 c) Doxycycline.
- Q.64 Which of the following ATT drugs should not be used in an HIV positive patient?**
 a) INH d) Pyrazinamide.
 b) Rifampicin. e) Thiacetazone.
 c) Ethambutol.
- Q.65 All of the following features are seen in asbestosis except:**
 a) Diffuse pulmonary interstitial fibrosis. d) Calcific pleural plaques.
 b) Fibrous pleural thickening. e) Spindle shaped opacities.
 c) Emphysema.
- Q.66 The following is true for Mycoplasmas except:**
 a) Multiply by binary fission. d) Require sterols for growth.
 b) Are sensitive to Beta lactam group of antibiotics. e) Are sensitive to Quinolones.
 c) Can grow in cell free culture media.

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- Q.67 Pulmonary fibrosis is a most common complication with:**
a) Mercapto purine. d) Adriamycin.
b) Vincristine. e) Azathioprin.
c) Bleomycin.
- Q.68 Which of the following gas is used to decrease pulmonary artery pressure in adults:**
a) Nitrous Oxide. d) Nitrogen.
b) Helium. e) Carbon dioxide.
c) Nitric Oxide.
- Q.69 The folloiwng is not in the differential diagnosis of an anterior mediastinal mass:**
a) Teratoma. d) Lymphoma.
b) Neutrogena tumour. e) Hydatid cyst.
c) Thymoma.
- Q.70 A young man with TB presents with massive recurrent hemoptysis . For angiographic treatment which vascular structure should be evaluated first:**
a) Pulmonary artery. d) Sup. vena cava
b) Bronchial artery e) Azygos vein
c) Pulmonary vein.
- Q.71 Which of the following is less likely to be associated with delayed repair after acute inflammation?**
a) Advanced age. d) Protein deficiency.
b) Ascorbic acid deficiency. e) Retention of debris.
c) Diabetes mellitus.
- Q.72 George Engel put forward the concept of Biopsychosocial perspective of health and disease which stresses on the understanding of:**
a) Holistic medicine. d) Personality of the patient
b) Social milieu of the patient. e) Psychosocial environment of patient in the same way as pathophysiological processes.
c) Better communication skills.
- Q.73 While the physician is expected to know the patient's language, the patient is often unaware of the medical jargon. Therefore :**
a) The responsibility lies with the physician to bridge the communication gap. d) Medical jargon must be banned.
b) The physician must first simplify and explain the medical terminology. e) The physician must learn other languages.
c) The physician must explore the psychosocial background of each patient.
- Q.74 Active listening is a complex process which involves a simultaneous focus on patient's words as well as:**
a) Body language. d) Adequate eye contact.
b) Paralinguistic aspects. e) Open ended questions.
c) Active prompting.
- Q.75 Empathy building refers to the statements of the doctor that :**
a) Conveys to the patient that his feelings have been well-understood. d) Reflect his good upbringing.
b) Show his sincere sympathy for the patient. e) Indicate good communication skills.
c) Relaxes the patient.
- Q.76 Empathic skills are essential for better therapeutic relationship and include reflection, validation, support, respect and:**
a) Exclusivity. d) Partnership.
b) Unconditional positive regard. e) Friendship.
c) Informational care.
- Q.77 Counselling is a technique which aims at :**
a) Making people less emotional. d) Giving sincere advice and solutions to the patients problems
b) Achieving a greater depth of understanding and clarification of the problem. e) Breaking bad news in a professional manner.
c) Comparing the patient's experiences with one's own.
- Q.78 A doctor aiming to adopt the role of a counsellor must exhibit and develop attributes such as :**
a) Wide ranging knowledge base. d) Unconditional positive regard.
b) Charismatic personality. e) Honest and simple life style.
c) Mastery of the local dialect.
- Q.79 A 56 years old male patient has just been diagnosed with Diabetes Mellitus. His physician is concerned about his treatment compliance with the prescribed regimen of medication and dietary changes. The patient is most likely to follow the instructions given by the physician if the conversation with the physician makes the patient :**
a) Calm and collected. d) Worried and distracted.
b) Calm and questioning. e) Fearful and self absorbed.
c) Concerned and attentive.

- Q.80** Consent is the agreement of the patient to an examination, procedure, treatment or intervention. Which of the following pillars of medical ethics does it represent?
- a) Justice.
 - b) Beneficence.
 - c) Autonomy.
 - d) Non-maleficence.
 - e) Confidentiality.
- Q.81** A patient constantly defying prohibitions by the doctors in spite of repeated warnings of serious consequences is displaying the phenomena of :
- a) Transference.
 - b) Resistance.
 - c) Counter-transference.
 - d) Non-compliance.
 - e) Emotional instability.
- Q.82** A-40yrs old man who had pulmonary tuberculosis in the past, developed proteinuria of 5gm/24hrs, which one of the following conditions can give rise to proteinuria:
- a) Glycogenesis.
 - b) Sarcoidosis.
 - c) Amyloidosis.
 - d) Hemachromatosis.
 - e) Rheumatoid arthritis.
- Q.83** On organophosphorus exposure resulting in bronchospasm which of the receptors are responsible:
- a) M1.
 - b) M2.
 - c) M3.
 - d) M4.
 - e) M5.
- Q.84** Ipratropium bromide differ from a beta agonist as it:
- a) Causes bradycardia.
 - b) Has poor absorption.
 - c) Is metabolised slowly.
 - d) Causes cardiac arrhythmia.
 - e) Is more effective.
- Q.85** Beta agonist produce bronchodilation through:
- a) Decreasing adenosine.
 - b) Increasing cyclic AMP.
 - c) Decreasing cyclic AMP.
 - d) Phosphodiesterase inhibition.
 - e) Blocking muscrinic receptors.
- Q.86** Amphotericin B given I/V for fungal chest infection may result in:
- a) Hypotension.
 - b) Hepatitis.
 - c) Muscle cramps.
 - d) Myelosuppression.
 - e) Renal tubular acidosis.
- Q.87** In a patient suffering from chronic pyelonephritis which of the following drug is safe for treating pneumonia:
- a) Ofloxacin.
 - b) Vancomycin.
 - c) Clindamycin.
 - d) Cotrimoxazole.
 - e) Amikacin.
- Q.88** Which of the following drugs is safe to treat pneumonia in a pregnant lady:
- a) Cephadrine.
 - b) Ciprofloxacin.
 - c) Amikin.
 - d) Doxycyclin.
 - e) Sulphadiazin.
- Q.89** Contraceptive may become less effective when prescribed with:
- a) Rifampicin.
 - b) Isoniazid.
 - c) Ethambutol.
 - d) Streptomycin.
 - e) PZA.
- Q.90** A 30 years old jobless man with smear positive tuberculosis sensitive to all primary drugs is AFB positive after 4 months of chemotherapy. What is the most likely cause of treatment failure:
- a) Malabsorption of drugs.
 - b) Non compliance.
 - c) MDR tuberculosis
 - d) Nontuberculous infection.
 - e) Associated HIV infection.
- Q.91** An asthmatic patient has been prescribed theophylline in TID dosages. Steady state plasma level will be achieved in:
- a) 16 hours.
 - b) 24 hours.
 - c) 36 hours.
 - d) 48 hours.
 - e) 72 hours.
- Q.92** Which of the following beta agonist can be used as inhaled long acting bronchodilator:
- a) Albuterol.
 - b) Terbutalin.
 - c) Salmetrol.
 - d) Sotalol.
 - e) Salbutamol.

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- Q.93 Which one of following is anaerobic:**
- a) *Klebsiella pneumoniae*.
 - b) *Clostridium tetani*.
 - c) *Bacillus cereus*.
 - d) *Streptococcus pneumoniae*.
 - e) *Nocardia*.
- Q.94 The time interval between remission and reappearance of symptoms is called:**
- a) Incubation period.
 - b) Latent period.
 - c) Refractory period.
 - d) Refractory period.
 - e) Infectivity period.
- Q.95 A test which measures what originally was designed to measure, is said to have high:**
- a) Validity.
 - b) Sensitivity.
 - c) Specificity.
 - d) Reliability.
 - e) Predictability.
- Q.96 A persistent presence of tuberculous infection in a community refers to:**
- a) Endemic.
 - b) Hyperendemic.
 - c) Epidemic.
 - d) Pandemic.
 - e) Endemoepidemic.
- Q.97 Serial chest radiographs among coal workers to detect pneumoconiosis constitute:**
- a) Medical management.
 - b) Surgical intervention.
 - c) Secondary prevention.
 - d) Primary prevention.
 - e) Tertiary prevention.
- Q.98 An average value found in a set of data is referred to as:**
- a) Range.
 - b) Standard deviation.
 - c) Variance.
 - d) Standard error of the mean.
 - e) Central tendency.
- Q.99 Life threatening haemoptysis in a patient with operable squamous cell lung cancer is best treated with:**
- a) Bronchial embolisation.
 - b) Tranexamic acid.
 - c) Conservative care.
 - d) Antibiotics.
 - e) Radiotherapy.
- Q.100 Which of the following best describes the findings of a patient with asbestosis?**
- a) Clubbing and predominant upper lobe fibrosis.
 - b) Absence of clubbing and lung fibrosis but pleural calcification on the chest X-ray.
 - c) Clubbing, predominant lower zone fibrosis and pleural plaques.
 - d) Clubbing and eggshell calcification and development of mesothelioma.
 - e) Clubbing, predominant lower zone fibrosis, pleural plaques and diaphragmatic calcification.