

# S. Y. M.B.B.S. Examination March - 2023

Microbiology: Paper - II

Time: 3 Hours ]	[ Total Marks: 100
સૂચના : / Instructions	
(1) નીચે દર્શાવેલ ☞ નિશાનીવાળી વિગતો ઉત્તરવહી પર અવશ્ય લખવી. Fill up strictly the details of ☞ signs on your answer book Name of the Examination:	Seat No.:
S. Y. M.B.B.S.	
Name of the Subject :	
Subject Code No : 2106000102030102	

- (2) Draw a label diagram wherever required with blue pen/pencil only.
- (3) Short notes 100-15 0 words.
- (4) Write heading of each question properly.

#### Section - 2A

#### (Skin and soft tissue infection, Musculoskeletal and respiratory system)

- Que. 1 A 35 year old female from a village of Bihar came to the hospital with history of fever on and off for the past one year and recently developed unilateral swelling of the left lower limb. Her blood sample was sent for peripheral blood smear examination which revealed worm like structures, 240 um in length with pointed tail tip. (12 marks)
  - a. Name the disease and its etiological agent.
  - b. Describe the life cycle, pathogenesis and laboratory diagnosis of this condition.
  - c. Explain prevention and treatment of this clinical condition.

## Que. 2 Write notes. (any four)

 $(4 \times 7 = 28 \text{ marks})$ 

- a. Etipathogensis and laboratory Diagnosis of Madura foot
- b. Etio-pathogenesis, laboratory diagnosis and complication in a man with necrotic limb wound that crepitates following a road traffic accident.

- c. Fever with rash in a child: four causative organisms and lpathogenesis, aboratory diagnosis and prevention of any one.
- d. Hospital acquired Infections: types, risk factors and preventive measures.
- e. COVID 19: Laboratory Diagnosis and Vaccines

		TD 19. Laboratory Diagnosis	and vo	decimes.
Que. 3	Mul	ltiple Choice Questions.		(10 Marks)
1.		ich of the following is correct a	bout le	epromatous leprosy:
	a.	Multibacillary	b.	Langerhans cells are found
	c.	CMI is normal	d.	Positive lepromin test
2.		ich is the most preferred antim stant S. aureus (MRSA)?	icrobia	l for the treatment of methicillin-
	a.	Dicloxacillin	b.	Cephalexin
	c.	Cefazolin	d.	Vancomycin
3.	Wh	ich of the following toxin med	iates So	calded skin syndrome :
	a.	Hemolysin	b.	Coagulase
	c.	Enterotoxin	d.	Epidermolytic toxin
4.		otyping of Streptococcus pyog tein:	enes is	based on which of the following
	a.	M protein	b.	T protein
	c.	R protein	d.	Carbohydrate antigen
5.	CA	MP test is useful in identificati		
	a	S. pyogenes	b.	S. agalactiae
	c.	Viridans streptococci	d.	S. pneumoniae
6.	Gra	am-stain morphology of Bacill	races is:	
	a.	Tennis racket appearance	b.	Drum stick appearance
	<b>c.</b> 7	Bamboo stick appearance	d.	Spectacle glass appearance
7.		nich viral infection is response	onsible	for Subacute Sclerosing Pan
	a.	Mumps	b.	Measles
	c.	Rubella	d.	Influenza

- Which of the following is a vector for leishmaniasis:
  - a. Sandfly

b. Reduviid bug

c. Tsetse fly

- d. Anopheles mosquito
- Which of the following fungus does not infect nail:
  - Trichophyton a.

b. Microsporum

Epidermophyton c.

- d. Candida albicans
- Rhinosporidiosis is characterized by all of the following EXCEPT-10.
  - It is caused by a fungus a.
  - The fungus is usually found in dirty waters b.
  - It manifests as polyps that bleed easily. c.
  - d. It can be cultured easily in laboratory.

## Section - 2B (CNS, Genitourinary, HAI, Miscellaneous)

Que. 1 A 25 yr. old man presented with painless ulcer with hard base on penis. He had a history of sex with multiple partners. On examination, inguinal lymph nodes were enlarged, discrete, non-tender and rubbery. The blood specimen was collected and sent to the laboratory for serological test.

- What is the clinical diagnosis and possible causative agent? Justify. a.
- Explain the pathogenesis and laboratory diagnosis of this condition. b.
- c. Enlist three possible etiological agents in case the man had multiple painful genital ulcers.

#### Que. 2 Write notes. (any four)

 $(4 \times 7 = 28 \text{ marks})$ 

- A 30 years of Male with history of HIV/AIDs presented to casualty with high grade fever, Headache and seizures. CSF microscopy revealed budding yeast cells surrounded by a halo. Identify the etiological agent. Explain pathogensis and laboratory diagnosis of the condition.
- b. Encephalitis: four causative agents and pathogenesis with laboratory diagnosis of anyone.
- c. Antimicrobial stewardship program: concept and different strategies used in the program
- d. Non-tuberculosis Mycobacterium: classification and significance as human pathogen
- e. Consent: Definition, types and its importance in autonomy is autonomy?

Que. 3	М	ultiple Choice Questions.		(10 Ma
1.	. W	hich of the following is the ca	nisative	e agent of chancroid?
	a.	Haemophilusducreyi	b.	
	c.	Mycoplasma hominis	d.	tit - Il-ioong
2.	Ca	susative agents of non gonoco	ccal ur	ethritis may be:
	a.	Chlamydia trachomatis	b.	Ureaplasmaurealyticum
	c.	Mycoplasma genitalium	d.	All of the above
3.	Wl	nich of the following fungi are	e associ	iated with zygomycosis?
	a.	Mucor	b.	Rhizopus
	c.,	Absidia	d.	All of the above
4.	Wh	nich of the following pigment is	diagno	ostic of Pseudomonas aeruginosa?
	a.	Pyocyanin	b.	Pyorubin
	c.	Pyomelanin	d.	Fluorescin
5.	Wh	at is significant bacteriuria?		
	a.	Bacterial count >10 <sup>5</sup> per mL	,	
	b.	Bacterial count between 10	<sup>4</sup> to 10	<sup>5</sup> per mL
	c.	Bacterial count <10 <sup>4</sup> per ml		
	d.	None of the above		
6.	Whi	ich of the following depict dec owing occupational exposure:	creasing	g order of risk of transmission
•	a.	HIV>HBV>HCV	b.	HBV>HIV>HCV
	c.	HBV>HCV>HIV	d.	HCV>HBV>HIV
7.	Whi fecal	ch of the following microbe is contamination of water:	is <b>NO</b> T	Γ used as indicator organism of
,	a.	Fecal E. coli	b.	Fecal streptococci
	b.	Pseudomonas	d.	Vibrio cholerae
8.	The	most effective way of preventi	ing teta	unus is:

c.

Hyperbaric oxygen

Tetanus toxoid

b.

d.

Antibiotics

Surgical debridement and toilet

- 9. Neonatal meningitis acquired through colonized/infected birth canal is due to:
  - a. S. pyogenes

b. Viridans streptococci

c. S. agalactiae

- d. S. pneumoniae
- 10. Humans acquire cysticercus cellulosae infection by all of the following mechanisms, **EXCEPT:** 
  - a. Ingestion of contaminated vegetables
  - b. Reverse peristalsis
  - c. Autoinfection
  - d. Ingestion of contaminated pigs meat



### S. Y. M.B.B.S. Examination March - 2023

Microbiology: Paper - I

Time: 3 Hours	[ Total Marks: 10	00

#### સૂચના : / Instructions

(1) નીચે દર્શાવેલ ☞ નિશાનીવાળી વિગતો ઉત્તરવહી પર અવશ્ય લખવી. Fill up strictly the details of ☞ signs on your answer book	Seat No.:
Name of the Examination:	
S. Y. M.B.B.S.	
Name of the Subject :	
Subject Code No.: 2106000102030101	Student's Signature

- (2) Draw a label diagram wherever required with blue pen/pencil only.
- (3) Short notes 100-150 words.
- (4) Write heading of each question properly.

#### SECTION - IA (General Microbiology and Immunology)

Que. 1 Define and differentiate Sterilization from disinfection. Explain the principle, application and control of any one method of sterilization based on heat used in patient care. Explain the concept and use of CSSD in hospitals. (12 marks)

### Que. 2 Write notes. (any four)

 $(4 \times 7 = 28 \text{ marks})$ 

- a. Principle, applications and modifications of Polymerase Chain Reaction in patient care.
- b. Classification, types and diagnostic modalities of Immunodeficiency diseases.
- c. Define vaccine. Describe National Immunization Schedule and the types of vaccines used in it.
- d. A girl presented in emergency with sudden onset of itching, redness and erythema following unknown bite. Identify the condition. Explain the immuno-pathogenesis of her condition.
- e. Mechanisms of transferable drug resistance in bacteria.

c.

a.

c.

result in:

Both

Neutrophil

First set rejection

10. Application of skin graft for the second time from the same donor will

d.

b.

d.

**RBC** 

None

Second set rejection

#### SECTION-IB

## (Infection of Blood stream, Cardiovascular system, Gastrointestinal tract, Hepatobiliary system)

- Que. 1 A young adult female was admitted to the hospital with intense headache, abdominal discomfort for past five days. She had also developed fever which is of remittent type with gradual rise in a step ladder fashion. On examination, she was toxic with temperature of 101°F, tongue was coated and mild splenomegaly was present. (12 marks)
  - a. What is the most probable etiological diagnosis? Give justification
  - b. Describe the pathogenesis of this condition.
  - c. Explain the choice of test, sample collection and laboratory diagnosis of the condition
  - d. Suggest preventive measures for the disease.

#### Que. 2 Write notes. (any four)

 $(4 \times 7 = 28 \text{ marks})$ 

- a. Laboratory diagnosis and Post exposure prophylaxis of HIV.
- b. Describe the pathogenesis and laboratory diagnosis of a female brought to emergency department with sunken eyes. Relatives gave history of sudden onset of watery diarrhea (15-20 times per day) without blood and mucus and abdominal pain.
- c. Mycotic food poisoning.
- d. Pyrexia of unknown origin: definition, causes and diagnostic test used
- e. Importance of effective communication skill in Doctor Patient relationship.

## **Que. 3** Multiple Choice Questions.

(10 marks)

- 1. Most common agent causing native valve endocarditis is:
  - a. S.aureus

b. S.epidermidis

c. Viridans streptococci

d. Enterococci

- 2. Infections causing Megaloblastic anemia include:
  - a. Babesia microti

b. Diphyllobothrium latum

c. Bartonella bacilliformis

d. Leishmania donovani

3. Antibodies against which of the following antigen appear in typhoid carrier?

a. Vi antigen

b. O antigen

c. Hantigen

d. Capsular antigen

4.	which of the following is the infective form of the malarial parasite to man:							
	a.	Merozoite	b.	Sporozoite				
	c,	Trophozoite	d.	Gametocyte				
5.	Wh	ich of the following is respon	sible for	transmission of HBV infection:				
	a.	HBsAg	b.	HBeAg				
	c.	HBcAg	d.	HBV DNA				
6.	Sin	gle most important agent of to	raveler's	diarrhea is:				
	a.	Enterotoxigenic E. coli	b.	Enteroaggregative E. Coli				
	c.	Campylobacter jejuni	d.	Non Typhoidal salmonella				
7.	Which of the following is <b>NOT</b> a commensal in human female genital tract?							
	a.	Lactobacillus	b.	Streptococcus agalactiae				
	c.	Neisseria	d.	Trichomonas vaginalis				
8.	Leis	shmania donovani can be cul	tivated in	n:				
	. a.	Blood agar	b.	NNN medium				
•	c.	Diamonds medium	d.	RPMI 1640 medium				
9.	During the window period of patient with AIDS, best diagnostic test is:							
	a.	ELISA	b.	Western Blot				
	c.	Rapid test	d.	RT-PCR				
10.	Tre	ench fever is caused by:						
	a.	B.henselae	b.	B.quintana				
	c.	B.bacilliformis	d.	C.burnetii				
		·						



#### Phase II M.B.B.S. Examination March - 2023

## Pharmacology Paper - I

Time: 3 Hours		Total Marks: 100

# સૂચના : / Instructions

(٩)	નીચે દર્શાવેલ ☞ નિશાનીવાળી વિગતો ઉત્તરવહી પર અવશ્ય લખવી. Fill up strictly the details of ☞ signs on your answer book	Seat No.:
	Name of the Examination:	
	◆ Phase II M.B.B.S.	
	Name of the Subject :	
	✔ Pharmacology Paper - I	
	Subject Code No.: 2106000102020101	Student's Signature

- (2) Answers should be precise and to the point.
- (3) Give examples and figures if needed.
- (4) First 20 mins have been allotted to solve multiple choice questions.

#### **Section I**

#### **Instructions:**

- (1) Encircle the single most appropriate answer.
- (2) Each question carries one mark and there is no negative marking.
- (3) Overwriting is not allowed.

# Q. 1 Multiple Choice Questions (MCQs)

(20)

- 1. Therapeutic index is an assessment of:
  - a. Potency of drug
- b. Onset of action
- c. Duration of action
- d. Margin of safety
- 2. All of the following statements for flumazenil are true EXCEPT:
  - a. It is a specific antagonist of benzodiazepines.
  - b. It may be used to treat barbiturate poisoning.
  - c. It is given intravenously.
  - d. It acts on same site on GABA channels where benzodiazepines bind.

Chlordiazepoxide Mattrexone Most vulnerable period of preformations due to drugs is: 18-55 days of gestation Second trimester ug metabolism, hepatic cytoclonsible for: Phase I reactions Phase II reactions Both (a) and (b) Converting hydrophilic metabolism statements for Induced at the site of inflamments.	full stopation  awal is b. d. gnancy b. d. hrome	Disulfiram Diazepam of for the causation of foetal  56-84 days of gestation 36 weeks onwards P-450 (CYP-450) system is		
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of the following statements for				
•	COX-			
Induced at the site of inflamn		-2 are correct EXCEPT:		
a. Induced at the site of inflammation				
b. Activation of COX-2 leads to ulcer protective effect on gastric mucos				
c. It is constitutionally expressed on some cell surfaces				
It is utilized in generation of	eicosa	noids with a ring structure		
ch of the following drug is con	nmonl	y used in narcoanalysis?		
Atropine sulfate	b.	Scopolamine hydrochloride		
Phenobarbitone	d.	Morphine		
which of the following drugs a	warni	ng is written: 'To be sold by retail on		
rescription of registered medic	cal pra	ctitioner only'.		
Schedule C	b.	Schedule X		
Schedule Y	d.	Schedule H		
histaminics used for motion sig	ckness	is:		
Cetirizine	b.	Meclizine		
Diphenhydramine	d.	Fexofenadine		
	Phenobarbitone which of the following drugs a rescription of registered medic Schedule C Schedule Y histaminics used for motion side Cetirizine	Phenobarbitone d.  which of the following drugs a warni rescription of registered medical pra Schedule C b. Schedule Y d.  histaminics used for motion sickness Cetirizine b.		

11.	The sympathetic and parasympathetic systems exert functionally opposite influences on the following parameters except:					
	a.	Heart rate	b.	Atrial refractory period		
	c.	Pupil diameter	d.	Intestinal motility		
12.	Gas	tric lavage is contraindicated in	:,			
	a.	Salicylate poisoning	b.	Organophosphate poisoning		
	c.	Kerosene poisoning	d.	Morphine poisoning		
13.	Reg	arding efficacy and potency of a	a drug	all are true EXCEPT:		
	a.	In a clinical setup, efficacy is	more i	mportant than potency		
	b.					
	c.	ED <sub>50</sub> of the drug corresponds	to the	efficacy		
	d.	Drugs that produce similar ph different levels of efficacy	armac	ological effect can have		
14.	Tacl	nyphylaxis is seen after use of:				
	a.	Tamoxifen	b. '	Ephedrine		
	<b>c.</b> ,	Morphine	d.	Chlorpromazine		
15.	Corr	ectly matched pair of heavy me	tal and	l its respective chelating agent is:		
	a.	Iron - BAL				
,	b.	Mercury - Calcium disodium e	edetate	الله المنظومين الله المنظومين الله المنظومين الله الله الله الله الله الله الله الل		
	c.	Copper - d-penicillamine				
	d.	Arsenic - Desferioxamine	,			
16.	Caution is advised for the use of Aspirin in which of the following group of patients:					
	a.	In diabetics - can cause hyperg	glycaeı	mia		
	b.	In children with viral disease -	risk o	f acute renal failure		
	c.	In gout - can increase serum un	ric aci	d levels		
	d.	In pregnancy- risk of teratoger	nicity			
17.		olol eye drops are preferred over ents because:	r piloc	arpine eye drops by glaucoma		
	a.	Timolol is more effective than	piloca	rpine		
	b.	Timolol acts by enhancing uve	o-scle	ral outflow		
	c.	Timolol produces less ocular s				
1	d.	There are no contraindications	to tim	olol		

- 18. Use of morphine in preanaesthetic medication:
  - a. Is routine except in the presence of contraindications
  - b. Is restricted to patients being anaesthetised with ether
  - c. Should be made only in combination with atropine
  - d. Is restricted mostly to patients in pain preoperatively
- 19. How would a drug that competes with ACh for receptors at the motor end plate affect skeletal muscle? It would:
  - a. Produce uncontrolled muscle spasms
  - b. Cause the muscles to contract and be unable to relax
  - c. Cause muscles to relax and be unable to contract
  - d. Make the muscles more excitable
- 20. Transdermal drug delivery systems offer the following advantages EXCEPT:
  - a. Produces high peak plasma concentration of the drug
  - b. Produces smooth and non-fluctuating plasma concentration of the drug
  - c. Minimises inter-individual variations in the achieved plasma drug concentration
  - d. Avoids hepatic first-pass metabolism of the drug

## Q. 2 Answer in brief [any five]:

[3×5=15]

- a. Explain the concept of "Placebo".
- b. Compare and contrast neostigmine vs physostigmine.
- c. What is microsomal enzyme induction? Give suitable examples.
- d. Define drug antagonism. Describe its types with suitable examples.
- e. Short note on kinetics of elimination.
- f. Enumerate therapeutic uses and adverse effects of selective COX-2 inhibitors.

## Q. 3 Write short notes [any three]:

 $[5 \times 3 = 15]$ 

- a. Classify  $\alpha$  blocker drugs. Discuss their therapeutic uses and adverse effect profile.
- b. Which drugs are indicated for glaucoma? Discuss the pharmacotherapy for open angle glaucoma.
- c. Describe the concept of potency and efficacy with suitable examples and graphs.
- d. Enumerate various atropine substitutes and/or derivatives. Describe their clinical uses.

#### Q. 4 Case based questions:

 $[10 \times 1 = 10]$ 

A 34-year-old female presented with chief complaints of sudden onset of severe pain in the right big toe. Her physical examination and laboratory investigations were suggestive of acute gout. She was prescribed tablet allopurinol 100 mg once a day for one month and tablet naproxen 500 mg twice a day for three days. She returned after 10 days with recurrence of symptoms as severe as the initial episode. On further investigation, she mentioned that the pain had completely subsided initially but had recurred just the previous night.

Answer the following questions:

- a. Was the approach towards the initial episode in this case appropriate?
   Explain. How will you manage this case? [2+2]
- b. Classify the drugs for gout. [2]
- c. Describe uricosuric agents briefly. [4]

#### Section II

#### Q. 5 Answer in brief [any five]:

 $[3 \times 5 = 15]$ 

- a. Management of methanol poisoning.
- b. Mention agents used in spinal anaesthesia. Which are the complications of spinal anaesthesia?
- c. Describe pre-anaesthetic medications with their basis of use.
- d. Name two mucolytic agents. Explain briefly role of mucolytic in the treatment of cough.
- e. Classify antipsychotic agents. Describe its adverse effects profile briefly.
- f. Write a note on "Pharmacovigilance".

## Q. 6 Write short notes [any three]:

 $[5 \times 3 = 15]$ 

- a. Mention various anti-epileptic agents. Explain the pharmacological basis of phenytoin in grand mal epilepsy. Describe adverse effects of phenytoin.
- b. Enumerate various neuromuscular blocking agents. Explain the difference between non-depolarizing and depolarizing block. Mention two therapeutic uses of succinylcholine.
- c. Classify drugs used in asthma. Write treatment for status asthmaticus.
- d. Write a note on phases of clinical trial.

## Q.7 Case based questions:

[10\*1=10]

A 50-year-old male patient presents to the medicine out-patient department with tremors at rest in one hand, difficulty in initiating movements, mask like face, defective posture and gait along with dementia. After a thorough clinical and central nervous system examination, he was diagnosed as a case of parkinson's disease. The clinician prescribed a combination of levodopa 100 mg and carbidopa 10 mg orally once daily for one month. The patient was asked to visit for follow-up after a month.

## Answer the following questions:

a. Explain the rationale for prescribing a fixed dose combination of levodopa + carbidopa. Discuss the consequences of initial as well as prolonged levodopa therapy. [2 + 2]
b. Classify the drugs prescribed for parkinsonism. [2]
c. What is drug induced parkinsonism? How will you treat such a case? [2]
d. Mention recent developments in the treatment of parkinsonism. [2]



# II M.B.B.S. Examination March - 2023

# Pharmacology

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			e Examination:	ei book	
		II M.B.			
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	Eacl	n ques	he single most appropria stion carries one mark an ng is not allowed.		negative marking.
1		Mul	tiple Choice Questions.	(MCQs)	[Marks 20]
	1.	Whi	ch diuretic is preferred in	scites ?	
		a)	Furosemide	· b)	Spironolactone
		c)	Acetazolamide	d)	All of the above
	2.	30-у	_		neurological disturbances in a ar drug regimen. Which vitamin
		a)	Vitamin Bl	b)	Vitamin B6
		c)	Vitamin B12	d)	Vitamin B2
	3.	The	management of thyrotox	cicosis crisis	includes all the following except:
		a)	Propranolol	b)	Hydrocortisone
		c)	Oral I <sup>131</sup>	d)	Propylthiouracil
	4.	Con	nbine oral contraceptive p	pill reduces t	the risk of:
		a)	Breast cancer	b)	Ovarian cancer
		c)	Cervical cancer	d)	Vaginal cancer

٥.	VV 111	ch drug should not be given in		II la la mino		
	a).	Labetalol	b)	Hydralazine		
•	c)	ACE inhibitors	d)	Methyldopa		
6.						
	a)	It is used for the treatment of	acrom	egaly		
	b) It stops oesophageal variceal bleeding					
	c)	It can be used for the manage	ment o	of secretory diarrhoea		
	d)	It is effective orally		•		
7.	The following antianginal drug is most likely to produce tachycardia as a side effect:					
	a)	Amlodipine	<b>L</b> )	Nifedinine		
	c)	Diltiazem	b)	Nifedipine		
	C)	Dittiazem	d)	Verapamil		
8.		en are protom pump inhibitors r				
	a)	After meals	b)	Along with H2 blockers		
	c)	Shortly before meals	d)	During prolonged fasting		
				periods		
9.	Whi	ich of the following purgative in	ncreas	es the fecal bulk due to their		
	wate	er absorbing and retaining capa	city?			
	a)	Methyl cellulose	b)	Lactulose		
	c)	Liquid paraffin	d)	Dioctyl sodium sulfosuccinate		
10.	The	drug of choice for neurocystice	ercosis	is:		
	a)	Albendazole	b)	Niclosamide		
	c)	Praziquantel	d)	Ivermectin		
11.	The	multidrug therapy of leprosy is	CHPA	ior to monathorous and he		
11.		owing basis:	super	for to monomerapy on the		
	a)	It prevents emergence of daps	sone re	esistance		
	b)	It is effective in cases with pr	imary	dapsone resistance		
	c)	It shortens the total duration of	of drug	g therapy and improves		
		compliance		•		
	d)	All of the above				
12.	Dob	utamine is preferred over dopa	mine i	n cardiogenic shock because of		
12.		elatedness to:		are care of the care of the care of		
		Better cardiac stimulation				
	a) .		ion			
	b)	Less peripheral vasoconstrict				
	c)	Lower risk of cardiac arrhyth	mias			
	d)	More CNS stimulation				

5. Which drug should not be given in pregnancy?

13.	Which antifungal agent is effective in both dermatophytosis as well a systemic mycosis:						
	a)	Amphotericin B	b)	Griseofulvin			
	c)	Clotrimazole	d)	Ketoconazole			
14.	On v	which enzymes do statins act?					
	a)	Acyl CoA synthetase	b)	Acyl CoA reductase			
	c)	HMG CoA synthetase	d) <sub>.</sub>	HMG CoA reductase			
15.		d man syndrome' has been assoc		with rapid intravenous			
	inje	ction of the following antibiotic					
	a)	Vancomycin	b)	Clindamycin			
	c)	Cefoperazone	d)	Piperacillin			
16.	Astr	ingents are substances that:					
	a)	Irritate sensory nerve endings					
	b)	Precipitate proteins					
	c)	Penetrate target cell nucleus for	or the	ir action			
	d)	All of the above					
17.	The following anticancer drug has high emetogenic potential:						
	a)	Vincristine	b)	Chlorambucil			
	c)	6-Mercaptopurine	d)	Cisplatin			
18.	Which vitamin acts as a hormone?						
	a)	Vitamin A	b)	Vitamin D			
	c)	Vitamin C	d)	Vitamin E			
19.	Select the drug combination which does NOT exhibit supra-additive						
	synergism:						
	a)	Nalidixic acid + nitrofurantoir	1				
	b) Amoxicillin + clavulanic acid						
	c)	Pyrimethamine + sulfadoxine					
	d)	Sulfamethoxazole + trimethop	rim				
20.	Which of the following is NOT a valid indication for parenteral iron therapy?						
	a) Inadequate response to oral iron due to patient non-compliance						
	b)	_					
	c) Severe anemia associated with chronic bleeding						
	d) Anemia in a patient of active rheumatoid arthritis						
	, and the property of work of mountained at titlings						

### PHARMACOLOGY PAPER II

Time: 3 Hours ]

[ Total Marks: 100

#### **Instructions:**

- (1) Answers should be precise and to the point.
- (2) Give examples and figures if needed.
- (3) First 20 mins have been allotted to solve multiple choice questions.

#### **SECTION I**

Q. l Multiple choice questions.

 $[1 \times 20 = 20]$ 

## Q. 2 Answer in brief. [any five]

 $[3 \times 5 = 15]$ 

- a) Describe various types of oral contraceptives. What is the rationale of combining estrogen and progesterone for contraception?
- b) Write a note on management of erectile dysfunction.
- c) Classify thyroid inhibitors. Write a note on thyroid storm management.
- d) Outline the pharmacotherapy of psoriasis.
- e) Write a note on drug therapy for constipation.
- f) Discuss briefly about heparin versus warfarin.

# Q. 3 Write short notes. [any three]

 $[5 \times 3 = 15)$ 

- a) Discuss various insulin preparations available. Write in detail about newer insulin preparations, their uses, pros and cons of each.
- b) Mention various thrombolytic agents. Describe their uses, mechanism of action and precautions required while using them.
- c) Classify diuretic agents. Explain mechanism of action, uses and adverse effect profile of thiazide-like diuretics in detail.
- d) Enumerate commonly used glucocorticoids. Discuss their adverse effect profile.

# Q. 4 Case based questions:

 $[10 \times 1 = 10]$ 

An adult 46-year-male, an executive in a multi-national company, has complaints of pain in abdomen since a month, along with occasional heart burn due to which he is unable to sleep. It worsens with ingestion of spicy and oily meals. After a thorough examination, physician diagnosed him as a case of peptic ulcer. Along with appropriate diet and lifestyle modifications, physician prescribed him anti-ulcer drugs.

### Answer the following questions:

- a) Enumerate various drugs from different groups which can be prescribed to him along with mechanism of action of any two drug classes. [4]
- b) Write briefly about treatment regimens for H. pylori infection. [4]
- c) Which drugs should be prescribed to the above patient if he develops gastroesophageal reflux disease (GERD)?

#### **SECTION II**

## Q. 5 Answer in brief. [any five]

 $[3 \times 5 = 15]$ 

[2]

- a) Write a short note on anti-hypertensives in pregnancy.
- b) Elaborate mechanism of action, therapeutic uses and adverse effects of metronidazole.
- c) Outline the pharmacotherapy of urinary tract infection.
- d) Describe measures to prevent antimicrobial drug resistance in detail.
- e) Enumerate HMG-CoA reductase inhibitors along with their uses.
- f) What is post exposure prophylaxis for HIV infection? Write two NACO recommended regimens for same.

## Q. 6 Write short notes. [any three]

[5×3=15[

- a) Classify fluoroquinolones. Describe the mechanism of action, therapeutic uses and adverse effects of any one fluoroquinolone.
- b) Enlist anti-malarial drugs. Discuss the treatment regimens for chloroquine resistant P. falciparum malaria.
- c) Describe in detail general principles for cancer chemotherapy.
- d) Which are the drugs for congestive heart failure? Discuss the mechanism of action of digoxin in this scenario.

# Q. 7 Case based questions:

b)

 $[10 \times 1 = 10]$ 

A 50-year-old male patient was admitted to casualty with chief complaints of heaviness in chest, squeezing midsternal pain which was radiating to jaw and left shoulder without any precipitating factor, lasting for about few minutes. He was sweating profusely. His electrocardiogram showed ST segment elevation. He was diagnosed as having acute myocardial infarction.

# Answer the following questions:

a) Write in detail about the management of above-mentioned diagnosis.

[3]

[5]

c) What is the rationale of using  $\beta$  blocker + long-acting nitrate combination in classical angina?

Enumerate various anti-anginal drugs.

[2]



# S.Y. M.B.B.S. Examination March - 2023

Pathology: Paper II (Set - 3)

(CBME New Course)

Time	e: 3 F	lours ]	[ Total Marks: 100
સૂચન	ι:/ I	nstructions	
(9)		દર્શાવેલ 🖝 નિશાનીવાળી વિગતો ઉત્તરવહી પર અવશ્ય ıp strictly the details of 🖝 signs on your a	
	Nam	e of the Examination:	
	•	S.Y. M.B.B.S.	
	Nam	e of the Subject :	
	•	Pathology : Paper II (Set - 3) (CBME New C	ourse)
	Subje	ect Code No.: 2106000102010102	Student's Signature
(2)	Eacl	n question carries one mark.	
(3)	Enci	ircle the correct answer.	*
Tim	e: 20	Minutes ]	[ Total Marks: 20
		Section -	I
1.		Multiple choice questions (*no nega	ative markings) 20
	1.	Barrett's oesophagus can result from:	
			c) Gastroesophageal reflux
		b) H. simplex infection	d) Varices
	2	Lumbation pariod of handitis Pist	
	2.	Incubation period of hepatitis B is:  a) 6 weeks to 6 months	c) 6 months to 6 years
		<b>a</b> )	d) More than 6 years
		b) days to a weeks	.,
	3.	Endodermal sinus tumor is characteri	sed by:
			c) Call - Exner body
		,	d) Homer-wright rosette

4.	EXU	Extravascular flaemorysis causes.						
	a)	Hemoglobinemia	c)	Jaundice				
	b)	Hemosiderinuria	d)	Hemoglobinuria				
5	Ant	oni A and Antoni D ragions are	soon i	in.				
5.		Antoni A and Antoni B regions are seen in:  a) Meningioma c) Medulloblastoma						
	a)	Meningioma	c)					
	b)	Glioblastoma	d)	Schwannoma				
6.	Best	Best test for assessment of iron status is:						
٠.	a)							
	b)	Ferritin	,	Hemoglobin				
	U)	Ciritin	u) I.	icinogioom				
7.	Skip	lesions are seen in:						
	a)	Ulcerative colitis	c)	Carcinoid syndrome				
	b)	Crohn's disease	d)	Whipple's disease				
	- /							
8.	Call	-Exner bodies are seen in:	*					
	a)	Dysgerminoma	c)	Teratoma				
	b)	Granulosa cell tumor	d)	Theca cell tumor				
	,		ŕ					
9.	All t	All the following are invasive carcinoma breast except:						
	a)	Comedocarcinoma	c)	Lobular carcinoma				
	b)	Colloid carcinoma	d)	Medullary carcinoma				
10.	Which one of these thyroid cancers cannot be diagnosed by FNAC:							
	a)	Papillary carcinoma	c)	Follicular carcinoma				
	b)	Medullary carcinoma	d)	Anaplastic carcinoma				
		•						
11.	Ewing's sarcoma arises from:							
	a)	G cell	c)	Neuroectodermal cells				
	b)	Totipotent cells	d)	Neurons				
12.	A 40	year-old hypertensive male a	dmitte	d to hospital with sudden onset				
	of headache and altered sensorium. On examination his blood pressure							
	was observed to be 220/110 mm hg and the patient died 4 hours later.							
	What is pathological finding in kidneys?							
	a)							
	b) Small kidney with petechial haemorrhage							
	c) Large kidney with waxy appearance							
	ď)	Large kidney with granular s						
	-							

13.	Diagnostic feature in rheumatic heart disease is:						
	a)	Aschoff nodule	c)	Bread and butter pericarditis			
	b)	Mc Callum's patch	d)	Shaggy vegetation			
14.	Ferru	aginous bodies are seen in:					
	a)	Silicosis	c)	Asbestosis			
	b)	Byssinosis	d)	Bagassosis			
15.	'Popo	corn cells' are seen in which ty					
	a)	Lymphocytic dominant	c)	Nodular sclerosis			
	b)	Lymphocytic depleted	d)	Mixed type			
16.	Cells	s seen in myocardial infarction	at 48	hours are:			
	a)	Polymorphs	c)	Lymphocyte			
	b)	Fibroblast	d)	Macrophage			
17.	Marl	ker for small cell cancer of lung	g is:				
	a)	Cytokeratin	c)	Desmin			
	b)	Chromogranin	d)	Vimentin			
18.	Most common cause of nephrotic syndrome in adult:						
	a) Membranous glomerulonephritis						
	b)	Minimal change disease		•			
	c) Acute glomerulonephritis						
	d)	Focal segmental glomerulone	phriti	S			
19.	Asce	ending aorta involvement is the	com	monest site of which aneurysm?			
	a)	Syphilitic	c)	Mycotic			
	b)	Atherosclerotic	d)	None of the above			
20.	AMI	L with gum infiltration, hepatos					
	a)	Ml	c)	M3			
	b)	M2	d)	M4			

#### Section-II (40 Marks)

## Q-2 Case based long essay questions

[13\*1=13]

A 70-year-old male presented with changes in bowel habit, bleeding per rectum, loss of weight, fatigue, and weakness of six-month duration. Endoscopy was suggestive of large polypoidal lesion in descending colon and biopsy done.

Biopsy of lesion showed marked pleomorphism of glandular epithelial cells with many atypical miosis and necrosis

After endoscopic biopsy of colon, left sided hemicolectomy was done

	,	
1)	What is your probable diagnosis?	2 Marks
2)	Describe etiopathogenesis of it.	5 Marks
3)	Describe the gross and microscopic features of the	6 Marks
	resected colon.	

## Q-3. Long essay questions. (Attempt any three)

[9\*3=27]

1)	Describe etiology and morphology of Myocardial Infarction.	3+6
2)	Classify glomerular disease. Describe etiopathogenesis,	3+3+3
	morphological features Post streptococcal glomerulonephritis.	
3)	Define and classify Jaundice. Describe laboratory diagnosis of Jaundice.	1+3+5
		1.2.5

4) Define Pneumoconiosis. Classify Pneumoconiosis and describe Coal-worker's pneumoconiosis.

1+3+5

### Section- III (40 Marks)

## Q-4. Short notes (Attempt Any 8)

[8\*5=40]

- 1) Peripheral smear finding of Chronic Myeloid leukaemia.
- 2) Describe etiopathogenesis and morphological features of Bronchiectasis.
- 3) Gross and microscopic features of Chronic pyelonephritis.
- 4) Sickle cell anaemia.
- 5) Benign prostatic hyperplasia.
- 6) Enumerate and explain the causes of Splenomegaly
- 7) Basal cell carcinoma.
- 8) Describe aetiopathogenesis and morphological features of Infective endocarditis.
- 9) Hydatidiform Mole
- 10) Immune thrombocytopenic purpura



# S. Y. M.B.B.S. Examination March - 2023

Pathology: Paper - I

# SET - II

Tim	e: 3 l	Hour	<b>-s</b> ]			[ Tota	l Marks: 100
સૂચન	u : / I	nstr	uctions				
(1)			🖝 નિશાનીવાળી વિગતો ઉત્તઃ ctly the details of 🖝 sigr	_		1 1 11 11	
			e Examination:				
			I.B.B.S.				
			e Subject :			· · · · · · · · · · · · · · · · · · ·	
	_		ogy : Paper - I SET - II				
	Subje	ct Çod	e No.: 2106000102010101	1		Student's	s Signature
(2)	Eac	h que	stion carries one marl	ζ.			
(3)	Enc	ircle	the correct answe	r.			
Tim	e 20	Min	iutes ]			[ Tot	al Marks: 20
1 1111	ie. 20	14111	iutes j	Section	1 - I	[	
			•				(20)
Q:1	5		ltiple choice question	ıs (*no ne	gativ	e markings)	(20)
	1.		e of Zahn occurs in.		-)	Embolus	
		a)	Post-mortem clot		c) d)	Embolus Coraline thrombus	,
		b)	Infarct		u)	Coramic momous	
	, 2.		concept of clino-path tomy was introduced l		orrela	ation (CPC) by study of	fmorbid
	,	a)	Hippocrates		c)	Morgagni	
		b)	John hunter		b)	Virchow	
	3.	con	gestive heart failure an nosiderin laden cells w in of these "heart failu	nd progres ithin alve	ssive l oli. W	70-year-old woman Mobreathing problems revolutions of the following i	eal numerous
		a)	Endothelial cells		c)	Lymphocyte	
		b)	Pneumocyte		d)	Macrophage	
				•			599
RAN	V-2106	50001	02010101 ]	[1]			[ P.Ţ.O. ] <b>Z</b>

4.	Blood component products are all, except							
	a)	Whole blood	c)	Fresh frozen plasma				
	b)	Platelet	d)	Leukocyte reduced RBC				
5.	Mos	st common site for lymphoma	in AID	S patient is				
	a)	CNS lesions	c)	Spleen				
	b)	Thymus	d)	Abdomen				
6.	Tun	Tumor suppressor genes are all, except						
	a)	APC	c)	P53				
	b)	Rb	d)	C-myc				
7.	Wh	ich one of the following crysta	als is fo	ound in acidic urine?				
	a)	Triple phosphate	c)	Calcium oxalate				
	b)	Calcium carbonate	d)	Ammonium biurate				
8.	Mai	Marker for ovarian carcinoma in serum is:						
	a)	CA-125	c)	Acid phosphatase				
	b)	Fibronectin	d)	PSA				
9.	Workers exposed to polyvinyl chloride may develop following liver malignancy:							
	a)	Cholangiocarcinoma	c)	Angiosarcoma				
	b)	Fibrolamellar carcinoma	d)	All the above				
10.	Father has a Blood group B; mother has AB; children are not likely to have the following blood group							
	a)	В	c)	AB				
	b)	O	d)	A				
11.	Which of the following is not a granulomatous disease							
	a)	Leprosy	c)	Tuberculosis				
	b)	Sarcoidosis	d)	Amebiasis				
12.	Both hyperplasia and hypertrophy are seen in?							
	a)	a) Breast enlargement during lactation						
	b)	b) Uterus during pregnancy						
	c) Skeletal muscle enlargement during exercise							
	d) Left ventricular hypertrophy during heart failure							

13.	The	The following is Anti apoptotic gene						
	a)	Bax	c)	Bcl-X				
	b)	Bad	d)	Bim				
14.	Which chemical mediator is an arachidonic acid metabolite produced by cyclo-oxygenase pathway?							
	a)	LXA4	c)	LXB4				
	b)	5 HETE	d)	PGH2				
15.	Ant	Anti-ds DNA antibodies are commonly seen in						
	a)	Systemic Lupus Erythemate	osus					
	b)	Scleroderma						
	c)	Dermatomyositis						
	d)	Rheumatoid Arthritis		•				
16.	Kar	Karyotyping is done for						
	a)	Chromosomal disorder						
	b) Autosomal recessive disorder							
	c)	c) Autosomal dominant disorder						
	d)	Linkage disorder						
17.	HLA is located on							
	a)	Long arm of chromosome 6		•				
	b)	Long arm of chromosome 3						
	c)	Short arm of chromosome 6	)					
	d)	Short arm of chromosome 3	*					
18.	Match the column and identify the correct answer							
	a)	PAS Stain	1)	Glycogen				
	b)	Oil Red O Stain	2)	Fat				
	c)	Congo Red Stain	3)	Amyloid				
	d)	Fontana Masson Stain	4)	Melanin				
	a)	a-2/b-3/c-l/d-4	c)	a-1/b-3/c-2/d-4				
	b)	a-3/b-l/c-4/d-2	d) -	a-1/b-2/c-3/d-4				

- 19. A man after consuming seafood develops rashes. It is due to
  - a) IgE mediated response
- c) Cell mediated response
- b) Complement activation
- d) None of the above
- 20. Oedema in nephrotic syndrome occur due to
  - a) Na+ and water restriction
- c) Increased venous pressure
- b) Decreased serum albumin
- d) Decreased fibrinogen

#### Time: 2 Hours 40 Minutes 1

[ Total Marks: 80

#### Section- II (40 Marks)

#### Q. 2. Case based long essay questions.

 $[13 \times 1 = 13]$ 

A 19-year-old female presented with a one month history of productive cough, chest pain, evening rise fever, anorexia, and weight loss. On examination: Cervical lymph node enlargement, multiple, matted, firm in consistency.

X- Ray Chest showed patchy areas of consolidation in the right lung.

- 1) What is your diagnosis based on the above clinical finding?
- 2 Marks
- 2) Describe pathogenesis of the given condition.

- 4 Marks
- 3) Describe microscopic finding and draw a labelled diagram.
- 4Marks
- 4) Write the difference between acute and chronic inflammation. 3Marks

# Q. 3. Long essay questions. (Attempt any three)

 $[9\times3=27]$ 

- 1) Define Necrosis, describe any two types of Necrosis. Enlist difference between Necrosis and Apoptosis. 1+5+3
- 2) Define Thrombosis. Describe pathophysiology of Thrombosis. Write the clinical effects of Thrombi. 1+6+2
- 3) Define Neoplasia. Describe various routes of spread of tumor with its mechanism. Enumerate effect of tumor on host. 1+5+3
- Describe structure of HIV virus. Write pathogenesis of HIV infection and AIDS.

#### Section- III (40 Marks)

## Q. 4. Short notes (Attempt Any 8)

 $[8 \times 5 = 40]$ 

- 1) Enumerate criteria for blood donor selection and describe various transfusion transmitted disease
- 2) Type -2 Hypersensitivity reaction
- 3) Klinefelter syndrome
- 4) Fine needle aspiration cytology
- 5) Phagocytosis
- 6) Gangrene
- 7) Difference between healing by primary intention and secondary intention of Wound.
- 8) Chronic venous congestion of Lung
- 9) What is urinary cast? Mention various types of casts and their significance
- 10) Chemical carcinogenesis