2206000103010101 EXAMINATION FEBRUARY-MARCH 2024 BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART-1) OPTHALMOLOGY (NEW) - LEVEL 1

[Time: As Per Schedule] [Max. Marks: 100] Seat No: **Instructions:** 1. Fill up strictly the following details on your answer book a. Name of the Examination: BACHELOR OF MEDICINE AND **BACHELOR OF SURGERY (THIRD PART-1)** b. Name of the Subject: **OPTHALMOLOGY (NEW) - LEVEL 1** c. Subject Code No: 2206000103010101 2. Sketch neat and labelled diagram wherever necessary. 3. Figures to the right indicate full marks of the question. 4. All questions are compulsory. 5. Write section I and section II in separate answer books. Student's Signature 6. Read each question carefully. There may be sub questions carrying separate markings. Answer all sub questions at one place only. 7. Write legibly and draw diagram with black pencil wherever indicated. No marks will be given for the material which cannot be read. SECTION - I Describe the anatomy of the cornea using a neatly labelled diagram and $\mathbf{Q.1}$ 10 describe the Factors responsible for its transparency. (4+2+4)Q.2Answer any one of the following: 10 1. A 20 year old female comes to ophthalmic OPD complaining of severe mucopurulent discharge in both the eyes from 2 days with redness. On examination there is conjunctival congestion, matted lashes and cornea is normal. i. What is a probable diagnosis? Justify 1+1ii. Describe the treatment 3 iii. Mention different types of eye discharge with their 5

corresponding causes

	2.	A 10 year old boy is brought by his parents with itching, redness and foreign body sensation off and on, from last 6 months. Parents give history of symptoms being relieved by use of "over the counter" eyedrops.	
		i. What is the probable diagnosis from history? Justify	2
		ii. Name the group of "over the counter" eyedrops which would have relieved the symptoms in this case.	1
		iii. Describe the ophthalmic signs likely to be found in this condition	4
		iv. Describe the treatment modality	3
Q.3	Write	short notes on any four of the following:	20
		Describe classification & clinical features of entropion.	
	2. 3.	Describe relative afferent pupillary defect and enumerate its causes. Describe the fundus findings of a case of pathological myopia.	3+2
	4.	Mention Anomalies of accommodation and write in brief about anyone.	2+3
	5.	Mention the common causes of corneal blindness. Write the surgical modalities to treat it.	2.5+2.5
Q.4	Answ	er any five of the following:	10
	1.	Describe definitive treatment of dendritic corneal ulcer.	
		Enumerate four clinical signs of aphakia	
		Enumerate all the glands present in the eyelids.	
		Enumerate four common causes of scleritis.	
		Write the treatment of squamous blepharitis.	
	0.	Draw a neatly labeled diagram of Lacrimal apparatus.	
		SECTION – II	
Q.5	Descri	the the clinical features & management of open angle glaucoma. (5+5)	10

Q.6	WITH	e any one out of the following:	10
	1.	A male patient 45 year old was referred to an ophthalmologist for evaluation of a case having history of transient blurring of vision associated with severe headache and pulsatile vomiting. His visual acuity was 6/6 in both eyes, anterior segment & IOP normal. Fundus examination reveals, both eyes disc hyperaemia and blurring of disc margin.	
		a. What is the likely diagnosis? Justify	2
		b. Describe the etiopathogenesis for this condition?	4
		c. Write four differential diagnosis of disc edema?	2
		d. Enumerate 4 ophthalmic causes of headache	2
		OR	
	2.	A 40 year old female presents to the eye OPD with bilateral proptosis from 1 month associated with weight loss, palpitation and excessive sweating	
		1. What is the likely cause?	1
		2. What other associated signs can be seen on eye examination in such condition?	5
		3. Enumerate four causes of unilateral proptosis	4
Q.7	Write	e short notes on any four of the following:	4*5=20
	1.	How will you counsel a relative of terminally ill patient to motivate for eye donation in case patient dies.	
	2.	How will you counsel an engineer, 50-year-old with Grade 2 cataract for type of Intraocular lens to be implanted during phacoemulsification surgery.	
	3.	Describe the stages of cataract maturity with a brief description of each stage?	
	4.	Describe in detail Proliferative Diabetic Retinopathy and its complications	3+2
	5.	Describe the clinical features of acute anterior uveitis.	

- 1. Enumerate four fundus signs of hypertensive retinopathy.
- 2. Enumerate four indications of using atropine eye drops.
- 3. Mention the function of superior rectus muscle.
- 4. Name the type of local anesthesia currently used in cataract surgery and enumerate any two dreaded complications of local anesthesia. (1+1)
- 5. Enumerate four ophthalmic manifestation of Tuberculosis.
- 6. Mention any four tests routinely done for squint assessment.

2306000103020102 EXAMINATION FEBRUARY-MARCH 2024 BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART-1) OTO-RHINO-LARYNGOLOGY (NEW) - LEVEL 2

[Time: As Per Schedule] [Max. Marks: 100] Instructions: Seat No: 1. Fill up strictly the following details on your answer book a. Name of the Examination: BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART-1) b. Name of the Subject : OTO-RHINO-LARYNGOLOGY (NEW) - LEVEL 2 c. Subject Code No: 2306000103020102 2. Draw a neat and labelled diagram wherever necessary. 3. Figures to the right indicate full marks of the question. 4. All questions are compulsory & all sections are compulsory Student's Signature 5. All MCQs are compulsory. MCQs to be attempted in the OMR sheet 6. Write both sections 2 & 3 in a separate answer sheet.

SECTION - I

Q.1 Multiple choice questions (MCQs).

- 1. Communication between middle ear and Eustachian tube is obliterated surgically in
 - a) Cortical mastoidectomy
 - b) Radical mastoidectomy
 - c) Myringoplasty
 - d) Modified radical mastoidectomy
- 2. All are true for Gradenigo's syndrome except
 - a) It is associated with pure conductive hearing loss
 - b) It is seen in petrositis
 - c) It leads to involvement of the 5th and 6th cranial nerves
 - d) It is characterized by retro-orbital pain

a) Meckel's cartilage	b) Reichert's cartilage
	,
c) Otic capsule	d) None of the above
4. A child aged 3 years presented win was prescribed hearing aids but sh next line of management?	th severe sensorineural deafness, he nowed no improvement. What is the
a) Fenestration	b) Stapes mobilization
c) Cochlear implant	d) Conservative
5. Operation of choice for coalescent	t mastoiditis is:
a) Cortical mastoidectomyc) Modified radical mastoidect	b) Radical mastoidectomy tomy d) Fenestration surgery
6. Following is not a feature of Meni	iere's disease:
a) Sensori-neural hearing loss	b) Aural fullness
c) Pulsatile discharge	d) Vertigo
 7. Oral manifestations of HIV includes a) Oral candidiasis b) Hairy leukoplakia c) Buccal striae forming a lact d) Recurrent aphthous ulcers 	cing pattern
8. Plummer-Vinson syndrome is cha	racterised by all except:
a) Koilonychia	b) Dysphagia
c) Atrophic gastritis	d) Haematemesis
9. Taste buds are seen in all of the fo	ollowing papillae except:
a) Circumvallate	b) Fungi form
c) Filiform	d) Foliate
10. Thornwaldt's cyst is seen in:	
a) Floor of mouth	b) Oropharynx
c) Nasopharynx	d) Hypopharynx

- 11. Care of tracheostomized patient include:
 - a) Humidification by wet gauze
- b) Changing the tube regularly

c) All the above

- d) None of the above
- 12. What is not correct in acute epiglottitis?
 - a) Constant supervision in hospital is mandatory
 - b) Dyspnoea may be progressing and alarming
 - c) It is a special form of acute laryngitis, in which the inflammatory changes affect mainly the loosely attached mucosa of the epiglottis
 - d) Systemic antibiotics is not a must to be started immediately
- 13. All of the following laryngeal muscles are adductors of vocal cord except:
 - a) Lateral cricoarytenoid
- b) Posterior cricoarytenoid
- c) Thyroarytenoid
- d) Oblique arytenoid
- 14. The mylohyoid muscle:
 - a) It is a depressor of the mandible
 - b) It is supplied by maxillary branch of the trigeminal 5th cranial nerve
 - c) It is an elevator of the mandible
 - d) It is a protractor of the mandible
- 15. Which of the following is not true about nasopharyngeal cancer?
 - a) Metastasizes to cervical lymph nodes
 - b) Causes serous otitis media
 - c) Treatment of choice is radiotherapy
 - d) Most common nerve involved is vagus
- 16. The Little's area of nose is supplied by:
 - a) Superior labial, anterior ethmoidal, greater palatine and sphenoethmoidal arteries
 - b) Superior labial, posterior ethmoidal, greater palatine and sphenoethmoidal arteries
 - c) Superior labial, anterior ethmoidal, lesser palatine and sphenoethmoidal arteries
 - d) Inferior labial, anterior ethmoidal, greater palatine and sphenoethmoidal arteries

	 17. All of the following are causes of bilateral nasal obstruction except: a) Adenoids b) Atrophic rhinitis c) Antrochoanal polyp d) Ethmoidal polyp 	
	 18. All of the following are complications of sinusitis except: a) Cavernous sinus septic thrombosis b) Meningitis c) Toxic shock syndrome d) Glomerulonephritis 	
	 19. Which of the following arteries belong to the internal carotid system? a) Greater palatine artery b) Sphenopalatine artery c) Anterior ethmoidal artery d) Superior labial artery 	
	 20. A biopsy taken from the granulomatous lesion of the nose revealed Mikulicz's cells & eosinophilic structures in the cytoplasm of the plasma cells- the likely diagnosis is: a) Mucormycosis b) Rhinosporidiosis c) Rhinoscleroma d) Nasal leprosy 	
	SECTION – II	
Q.2	Attempt any 1 out of 2: 1. Discuss the surgical anatomy of middle ear in detail.	10
	2. Discuss the blood supply of palatine tonsils in detail. Discuss the indications & contra-indications of tonsillectomy in detail.	
Q.3	Attempt any 2 out of 3:	12
	 A 25 years old Hindu married female patient presented to ENT OPD with following chief complaints: 	
	- Both sided impaired hearing for 2 years Her mother & her elder sister had similar complaint& underwent surgery for the same. Her otoscopy findings show normal & intact tympanic membrane on	

both sides. Her pure tone audiogram shows moderate conductive hearing loss in both ears with a notch at 2KHz.

- a) What is the most probable clinical diagnosis?
- b) What is a Carhart's notch& Schwartz sign?
- c) Discuss in detail about the management of this patient.
- 2. A 17 years old male patient presented to ENT OPD with following chief complaints:
 - Right ear discharge for 9 months.
 - Right ear impaired hearing for 4 months.

 His otoscopy shows: moderate sized central perforation in right ear and intact tympanic membrane on left side. His pure tone audiometry reveals moderate conductive hearing loss in right ear and normal hearing on left side.
 - a) What is the most probable clinical diagnosis?
 - b) Discuss in detail about the management of this patient.
- 3. Microscopic examination of ear.

Q.4 Short Notes (Attempt any 3 out of 4):

18

- 1. Rinne's test.
- 2. Consent for tympanoplasty.
- 3. Differential diagnosis of conductive hearing loss with an intact tympanic membrane.
- 4. Oto-acoustic emissions.

SCETION - III

Q.5 Attempt any 1 out of 2:

- 1. What is Juvenile Nasopharyngeal Angiofibroma. Discuss the etiology and management of the same in detail.
- 2. Discuss the sequelae of total laryngectomy & post-laryngectomy rehabilitation of the patient in detail.

18

- 1. A 45 years old Hindu married male laborer presented to ENT OPD with following chief complaints:
 - Ulcer along right side of tongue for 4 months
 - Pain while chewing for 4 months
 - Right sided upper cervical neck swelling for 3 months
 He is a chronic tobacco chewerfrom last 40 years. He also consumes local distillery made alcohol ~ 2 potlis per week from 40 years.

His oral cavity examination shows nicotine-stainedteeth. Ulcer over right lateral margin & dorsum of tongue of 4*3 cm with surrounding induration of ~1 cm. His neck examination shows a hard fixed swelling of ~4*4 cm in right cervical neck. His chest Xray is clear

- a) What is the most likely clinical diagnosis?
- b) According to TNM staging, what is the staging of this patient?
- c) How will you manage this patient?
- 2. A 12 years old female child presented to ENT OPD with following chief complaints:
 - Mouth breathing for 3 years.
 - Snoring for 3 years.
 - Both sided nasal discharge for 3 years.
 - Both sided nose block for 3 years.

On anterior rhinoscopy, there is mucus discharge in both nasal cavities with no gross nasal septal deviation.

- a) What is the most probable diagnosis?
- b) How will you investigate & treat this patient?
- 3. Dix-Hallpike test.

Q.7 Short Notes (Attempt any 3 out of 4):

- 1. T3 of carcinoma right vocal cord.
- 2. Atrophic rhinitis.
- 3. Complications of Functional Endoscopic Sinus Surgery (FESS).
- 4. Consent for rigid direct laryngoscopy in a patient with growth supraglottis.

2206000103040001 EXAMINATION FEBRUARY-MARCH 2024 BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART-1) FORENSIC MEDICINE AND TOXICOLOGY - LEVEL 4

Time: As Per Schedule]	[Max. Marks: 100]
Instructions:	Seat No:
1. Fill up strictly the following details on your answer book	
a. Name of the Examination: BACHELOR OF MEDICINE AND	
BACHELOR OF SURGERY (THIRD PART-1)	
b. Name of the Subject: FORENSIC MEDICINE AND	
TOXICOLOGY - LEVEL 4	
c. Subject Code No : 2206000103040001	
2. Draw table or diagram wherever it is needed.	
3. Figures to the right indicate full marks of the question.	
4. All questions are compulsory.	Student's Signature
5. There are two sections in this question paper. Answer both the sections in separate answer sheets.	
6. Write answers according to the question only. Writing anything which	
is not asked won't be counted for Marks.	

SECTION - I

- Q.1 Define Asphyxia. Classify it. Enumerate various causes of Death following 1*10=10 Hanging. Write post mortem findings in case of death following typical Hanging. (1+2+2+5 Mark)
- Q.2 Case based scenario/ Applied Questions. (Write any 2 out of 3) 2*6=12
 - 1) A 28-year-old female presents to emergency with a history of accidental flame burns, an hour back while cooking food. On examination, she was found to have burn injuries over both upper limbs, upper part of front of abdomen, front of whole chest, neck, and face. Based on above information,
 - a. Calculate the percentage surface area burnt.

	due to the fall of hot liquid?	. .
	c. Enumerate various causes of death following burns.	3
	2) A 30 year old male presents to casualty with multiple injuries over the head caused allegedly from assault by many people using hard and blunt weapons. In such a case:a. What are the various possible injuries found? What features help	2
	differentiate a lacerated wound from incised wound?	
	b. What criteria are used to opine an injury as grievous?	2
	c. What do you mean by Dangerous Weapon? Give examples.	2
	3) A 10 yrs old boy brought to casualty by police officer having alleged history of forceful unnatural sexual assault by his neighbor. In present scenario,	
	 Mention findings of general & local examination to confirm her alleged history. 	4
	b. Enlist the samples to be collected & test to be performed which helps in solving the crime.	2
Q.3	Short notes (Write any 4 out of 5)	4*4=16
	1) Signs of recent delivery in a living female.	
	2) Fingerprint	
	3) Firearm Cartridge	
	4) Indication, Rules & Regulation & New Amendments of MTP Act.	
	5) Dying Declaration	

Q.4	Give answer in two or three sentences. (Write any 6 out of 7)			6*2=12
	1) Susj	pended Animation	2) Virtopsy	
	3) Fala	inga Vs Telephano	4) Flail Chest	
	5) Ata		6) Stillborn Child	
	7) Exh	umation		
		SE	CTION – II	
Q.5	case of genera	snake bite on a lower lim	ken to prevent spread of snake venom in b. What are the clinical features (local and iper snake? What is its management?	1*10=10
Q.6	Case b	pased scenario/ Applied (Questions. (Write any 2 out of 3)	2*6=12
		30-year-old male is brough atment.	t to emergency in an inebriated state for	
	a.	What features would sug poisoning?	gest it to be a case of methyl alcohol	3
	b.	What are the various trea	tment methods available for the same?	3
	on at p fou	busy street of your city and basserby. On reporting to that that person is mentally	40 was found wondering for past 2-3 days d he was involved in acts of stone pelting he police, they arrived to the scene and unsound. He was brought by police mental illness. In such scenario,	
	a.	How will you diagnose th	nat it's a case of insanity?	3
	b.	What are the various civi ill person?	l and criminal responsibilities of mentally	3

,	scissor and cotton gouge piece from abdominal cavity. In the present scenario	
	a. Which type of doctrine it is? Enumerate other examples of such doctrine	2
	b. What are the legal action taken against doctor?	2
	c. What are the various defenses available against negligence?	2
Q. 7	Short notes (Write any 4 out of 5)	4*4=16
	1) Hydrargyrism	
	2) Functions of National Medical Commission	
	3) Delusion	
٠,	4) Gastric Lavage	
	5) Euthanasia	
Q.8	Answer in two or three sentences (Write any 6 out of 7)	6*2=12
	1) Coma Cocktail 2) Truth Serum 3) Meetha Zeher 4) Privileged Communication	
	5) Nicoma Zonor (and a second control of the second control of th	
	5) Body Packers Syndrome6) LSD7) Difference between Red & Yellow Phosphorus	

[4 of 4]

2206000103030103

EXAMINATION FEBRUARY -MARCH 2024 BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART-1)

COMMUNITY MEDICINE (PAPER - I) (NEW) - LEVEL 3

	edule]		[Max. Marks: 100]
Instructions:		2017 110000	Seat No:
a. Name of the BACHELO	ne following details on your a Examination: BACHELOR R OF SURGERY (THIRD I	OF MEDICINE AND PART-1)	1 (41)
(NEW) - L		EDICINE (PAPER - I)	
3	e No : 2206000103030103		
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 Figures to the rig All questions are 	ht indicate full marks of the queen	uestion.	Gt. L. W. Gi
4. All questions are	compuisory.	1 Of	Student's Signatur
	engabil, a	. 18/L9/31(
	ត្តពេញទៅ ១៤	g5(+0%);	
	SEC'	TION – I	
		. อ) ราชเรา สองกับใหญ่ การมา	
Q.1 Multiple C	Choice Questions (MCQs).		20
(Each carr	y 1 mark)	a volume jo general Pra	· · · · · · · · · · · · · · · · · · ·
	sical Quality of Life Index (cators except one:	PQLI) comprises all the	following
	Infant Mortality	b. Life Expectancy	at Birth
	•	· ·	
c. I	Literacy	d. Life Expectancy	at age one
	World Health Organization	(WHO) has set the targe	et of at least
2. The	World Health Organization % expenditure of each co	(WHO) has set the targe ountry's GNP on health c	et of at least
2. Thea.	World Health Organization % expenditure of each co	(WHO) has set the targe ountry's GNP on health c b. 3%	et of at least
2. The	World Health Organization % expenditure of each co	(WHO) has set the targe ountry's GNP on health c	et of at least
2. The a. c. 5	World Health Organization % expenditure of each continued to the continue of each continue of a	(WHO) has set the targe buntry's GNP on health c b. 3% d. 7%	et of at least are.
2. The a. c. 5	World Health Organization % expenditure of each co 1%	tact, who has been exposemum incubation period,	et of at least are.
 The a. c. 5 Rest com 	World Health Organization % expenditure of each continued to the continue of each continue of a	(WHO) has set the targe buntry's GNP on health c b. 3% d. 7%	et of at least are.

a. Social and psychological	factors			
b. Equilibrium between mar	n and environment			
c. Germ theory of disease				
d. Absence of Pain				
5. Which of the following is no	t a Morbidity Indicator?			
a. Life Expectancy	b. Notification Rates			
c. Incidence rate	d. Prevalence			
6. In a village having a population	ion of 10,000, 150 people have a disease			
and 30 of them died. What is	and 30 of them died. What is Case Fatality Rate?			
a. 0.3%	b. 1.5%			
c. 2%	d. 20%			
	disease is considered which level of			
prevention?	/ ** , **			
a. Primordial	b. Primary			
c. Secondary	d. Tertiary			
(- HOI				
8. Mid-year population refers to	Mid-year population refers to the population estimated on which date of			
a year	તું જું (1984), પુક્રલો ૧૯૩૧)			
a. 1 st January	b. 30 th June			
c. 1st July	d. 31 st July			
	ally better to prost			
Cross product ratio is calcula				
a. Cohort study				
c. Cross Sectional Study	d. Ecological Study			
	gent to invade and multiply in a host is			
a. Pathogenicity	b. Infectivity			
c. Virulence	d. Communicability			
11. Specificity of a screening test	t is the ability of a test to detect:			
a. True Positives	b. False Positives			
c. False Negatives	d. True Negatives			
	,			

4. Biomedical concept of Health is based on:

12. Hardness of water is due to all exc	ept.
a. Sulphates	b. Chlorides
c. Nitrates	d. Phosphates
13. Mosquitoes that breed in dirty wat	er collection are:
a. Anopheles	b. Aedes
c. Culex	d. Mansonia
c. carex	d. Mansonia
14. Following Diseases are transmitted	1 by culex mosquito, except
a. Malaria	b. Japanese Encephalitis
c. West Nile Fever	d. Viral Arthritis
c. West file rever	d. Vital Altillius
15. The most common side effect of I	UD insertion is:
a. Bleeding	b. Pain
c. Pelvic Infection	d. Ectopic Pregnancy
16. Waste sharps should be disposed i	n:
a. Black bag	b. Yellow bag
c. White bag	d. Red bag
17. Biomedical waste mixing with cera. Incinerationc. Shredding	ment and other substances is known as: b. Inertization d. Autoclaving
10 Tricas manage	
18. Triage means: a. First come first serve basis	
b. Treating persons randomly	
c. Labelling the death patient	- J. two-two-ant Cost
d. Identifying seriously ill who no	eeds treatment first
19. IT based TB surveillance is know	n as:
a. Nischay	b. Nikshay
c. Nirbhay	d. e-DOTS
, ,	
20. Under National Rural Health Mis	sion, ASHA stands for:
a. A Social Health Agent	
b. A Specific Health Agent	
c. Accredited Social Health Act	ivist
d. Advanced Scientific Health A	

SECTION - II

Q.2	Write the full question on following: (any 1 out of 2)	10
	 Define Health and write the factors affecting the health of people. Define Screening. Write the criteria for the test as well as disease to be screened. 	
Q.3	Write short notes/comments on the following: (any 2 out of 3)	10
	1. Epidemic Curve	
	2. Any Five Mortality indicators of Health	
	3. Chlorination	
Q.4	Write one or two line short questions (2 marks each)	20
	1. Define Incubation Period.	
	2. What is Nosocomial Infection?	
	3. Name the diseases covered under National Vector-borne disease Control	
	Program.	
	4. What is Sullivan's Index?	
	5. Define Demography.	
	6. What is couple protection rate?	
	7. Enumerate any four methods of sampling techniques.	
	8. What is Dependency ratio?9. List the effects of Noise Pollution.	
	10. Name the biomedical wastes to be collected in yellow colour bag.	
	SECTION – III	
Q.5	Write the full question on following: (any 1 out of 2)	10
	1. Write the causes of air pollution and method to prevent and control it.	
	2. What is Disaster? Write its type and steps of disaster management.	
Q.6	Write short notes on the following: (any 2 out of 3)	10
	1. National Immunization Schedule	
	2. Emergency Contraception	
	3. Rodent Control Measures	

Q.7 Write Short Notes on the following: (any 5 out of 6)

- 1. Radiation hazards
- 2. Treatment of P. Falciparum Malaria in Gujarat
- 3. Health care waste disposal techniques
- 4. Modes of Interventions
- 5. Risk estimation in Cohort Study
- 6. Overcrowding

2206000103030104

EXAMINATION FEBRUARY-MARCH 2024 BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (THIRD PART - 1)

COMMUNITY MEDICINE (PAPER - II) (NEW) - LEVEL 3

ime: As Per Schedule]	[Max. Marks: 100]
nstructions:	Seat No:
. Fill up strictly the following details on your answer book	
a. Name of the Examination: BACHELOR OF MEDICINE AND	
BACHELOR OF SURGERY (THIRD PART-1)	
b. Name of the Subject : COMMUNITY MEDICINE (PAPER - II)	
(NEW) - LEVEL 3	
c. Subject Code No : 2206000103030104	
2. Sketch neat and labelled diagram wherever necessary.	
3. Figures to the right indicate full marks of the question.	
All questions are compulsory.	Student's Signature

Q.1 Multiple choice questions each carry 1 mark (MCQs).

- 1. Duration of treatment of multibacillary leprosy is
 - a. 6 months
- b. 9 months
- c.12 months
- d. 24 months
- 2. Corpulence index measures
 - a. Blood pressure
- b. Obesity
- c. Coproporphyria
- d. Diabetes
- 3. Pasteurised milk is commonly tested by
 - a. Oxidase test
- b. Phosphatase test
- c. Catalase test
- d. Coliform test

	4.	Positive shick's test indicates that the person is:			
		a. Immune to diphtheria			
		b. Hypersensitive to diphtheria			
		c. Susceptible to diphtheria	e Caldania		
		d. Susceptible and hypersensitive	e to diphtheria		
	5.	Which is NOT a risk factor for coronary artery disease: a. Oral contraceptive b. Alcohol			
		c. Type A personality d. High	fibre diet		
6.		The average weight gain for a pregnant woman with BMI 20-23			
		should be			
		a. 4 to 6 kg	b. 8 to 12 kg		
		c. 12 to 14 kg	d. 15 to 16 kg		
	7.	One of the following gestational infections results in congenital			
		anomaly:	_		
		a. Chicken pox	b. Candidiasis		
		c. Taeniasis	d. Cholera		
	8.	Which of the following is not organic dust			
		a. Cane fiber	b. Tobacco		
		c. Asbestos	d. Cotton dust		
9.		Marijuana is derived from which of the following			
		a. Mushrooms	b. Cannabis		
		c. Cocoa	d. Morning glory		
	10	0. A person aged 40 years, working as a laborer in grain market for the			
		last 25 years presented with a history of repeated attacks of			
		respiratory infections in the last 1 year. X- ray showed pulmonary			
		fibrosis. The likely diagnosis wa	-		
		a. Tuberculosis	b. Silicosis		
		c. Silicotuberculosis	d. Farmer's lung		
	11	. PCPNDT is an act to prevent:			
		a. Congenital birth defects	b. Female suicide		
		c. Female foeticide	d. IVF using sex selection		
		,			

12. Koplik's spot is seen	in
a. Measles	b. Scrub typhus
c. Malaria	d. Dengue
13. For early detection of	f cancer cervix recommended test is
a. PAP smear	b. VDRL test
c. FNAC	d. Trans vaginal ultrasonography.
4. All diseases are unde	er surveillance of WHO except:
a. Chicken pox	b. Malaria
c. Relapsing fever	d. Paralytic polio
5. Incidence of mumps	is highest among
a. 0-5 years	b. 5-15 years
c.15-25 years	d. Above 25 years
6. All are components of	of ICDS except:
a. Nutrition	b. Vaccination
c. Health education	d. Admission and treatment of sick children
17. Kuppuswamy scale c	consists of all except
a. Education	b. Occupation
c. Housing	d. income
18. All are classified as n	naternal death except
a. Abortion	
b. Labour	
c. During 3 rd month	of lactation
d. Within 1st week o	of delivery due to sepsis
9. Genetic predispositio	on of cancer is seen in
a. Colon	b. Stomach
c. Pancreas	d. All of the above
20. Birth and death regist	tration act of India was amended in
a. 1948	b. 1970
c. 1967	d. 1991

SECTION - II

Q.2	Answer any one of the following questions:	10			
	 a. Describe epidemiological determinants, prevention and treatment of Vivax malaria. 				
	b. What is ARI? How would you manage a 3 year old child with ARI as per IMNCI protocol?				
Q.3	Write your comments on the following: (any 2 out of 3)	5*2=10			
	a. Social factors related to mental health.b. Cost effective analysis in health.c. Barriers of communication.				
Q.4	Write in one- or two-lines short answers:	2*10=20			
	 a. Juvenile delinquency b. Drugs used in MDR-TB c. Treatment of paucibacillary leprosy d. Cause of Bagassosis and Byssinosis e. 2 functions of UNICEF f. Non modifiable risk factors of diabetes g. Doctor patient relationship h. Annual parasite index and its importance i. Exclusive breast feeding j. JE vaccine-type, dosage, route and site of administration 				
SECTION - III					
Q.5	Answer any one of the following questions:	10			
	a. What are the components of post natal check up? What measures can be taken to improve post natal care at community level?				
	b. Discuss the epidemiology of hypertension and the WHO recommendations for its prevention and control.				

Q.6 Write short notes on the following: (any 2 out of 3)

5*2=10

- a. Ergonomics.
- b. Food adulteration.
- c. Disablement benefits under ESI Act, 1948.

Q.7 Write short notes on the following: (any 5 out of 6)

4*5=20

- a. Risk factors for cervical cancer.
- b. Nikshay poshan yojana.
- c. Genetic counselling.
- d. Integrated Vector Management.
- e. Mass drug administration for filariasis.
- f. Clinical features of severe acute malnutrition.
