

37. A 60 year old hypertensive and diabetic man who has previously been well is found in the morning with weakness of the right side. He is rushed to the hospital where he arrives in 1 hour. Computerized tomography (CT) scan of the head reveals an infarct. Which of the following would be the MOST effective treatment?

- A. Aspirin
- B. Clopidogrel
- C. Atorvastatin
- D. Intravenous tissue plasminogen activator (TPA) *after 6 hrs not useful*
- E. Dipyridamole

38. Which of the following deficiency is found in patients with terminal ileum disease?

- A. Calcium
 - B. Iron - *Quadrant*
 - C. Folic acid - *Jejunum*
 - D. Tryptophan
 - E. Cobalamin - *vit B12*
- Not Terminal ileitis*
- Malabsorption*
- Pancrease*
- Thiolactonase or lactase*

39. A 41 year old man admitted for management of heart failure develops a cough, chest pain and fever after 1 week in the hospital. Which one of the following antibiotics is the BEST empiric choice?

- A. Amoxicillin - clavulanic acid
 - B. Clarithromycin
 - C. Cefazidime - *3rd*
 - D. Cefuroxime - *2nd*
 - E. Flucloxacillin *fluorocloxacillin - antipseudomonal*
- Bolegunab*
- (to order pt)*
- cefapim*
- cefazidime*
- enidazole + penicillin*
- MCP*
- thyo*
- or*
- fluoro*
- ceph*

40. A 43 year old man presents with 8 week history of symmetrical joint pain and swelling involving the metacarpal-phalangeal (MCP) metatarsal - phalangeal (MTP) and proximal interphalangeal (PIP) joints. Symptoms are worse in the morning and last for 1 hour. Which one of the following statements is TRUE of this condition?

- A. Non-steroidal anti-inflammatory drugs (NSAIDs) are the first line of therapy
 - B. Extra-articular manifestations is not a feature
 - C. Radiological investigation is required for the diagnosis of disease
 - D. Disease modifying therapy should be instituted immediately
 - E. Biologic agents have no role in its management
- Definite of ar*
- Drugs of choice*
- High dose*
- + systemic*
- all local radio*
- Temp*
- P*
- avoid alcohol*
- 10 1g*
- MIP*

41. In a 60 year old man with multiple myeloma and a fracture of the right femur, which one of the following is the MOST appropriate approach to management?

- A. Start melphalan and radiotherapy
 - B. Start melphalan then refer for bone marrow transplantation
 - C. Start analgesics, internally fix the fracture then administer radiotherapy
 - D. Administer radiotherapy then internally fix the fracture
 - E. Start neoadjuvant thalidomide then internally fix the fracture
- not coming*
- metastatic disease*
- Plasma cells*
- 66yo man*
- Neurologic*
- ovary*
- hyperextension*
- MIP*
- least injecta sp g*
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A 20 year old woman presents with sudden onset weakness of the right side of the body with normal speech. The MOST likely site of the lesion is?

- A. Internal capsule
- B. Middle cerebral artery territory
- C. Brain stem
- D. Pons
- E. Cerebellar peduncle

Which one of the following statements is TRUE regarding characteristics of X-linked recessive disorders?

- A. In the male, X-linked recessive genes only manifest when the genes are homozygous
- B. The condition usually affects females
- C. They are transmitted by healthy male carriers
- D. Male offspring of a male with the disorder inherit the disease
- E. All female offspring of an affected male will be carriers

Which one of the following drugs used in the treatment of tuberculosis is correctly matched with its expected adverse reaction?

- A. Streptomycin - optic neuritis
- B. Isoniazid - hypothyroidism
- C. Rifampicin - peripheral neuropathy
- D. Pyrazinamide - hepatotoxicity
- E. Ethambutol - renal failure

All of the following diseases are classified as Spondyloarthropathies EXCEPT:

- A. Ankylosing spondylitis
- B. Psoriatic arthritis
- C. Reactive arthritis
- D. Polymyalgia rheumatica
- E. Enteropathic arthritis

A 25 year old man presents with a 4 month history of swellings on the left lower neck and generalized pruritus. Examination reveals mobile non-tender rubbery lymph nodes. Lymph node biopsy shows features of nodular sclerositis Hodgkin's disease. Bone marrow confirms marrow infiltration. Computerized tomography (CT) scan of the chest, abdomen and pelvis are normal. What is the stage of the disease?

- A. II A
- B. III B
- C. III S
- D. IV
- E. IV S

- I - One lymph node region
- II - Locally advanced disease with or without lymph node region on the same side of diaphragm or on the other side of diaphragm or one lymph node region or more than one lymph node region on one side of diaphragm or on opposite sides of diaphragm
- III - Locally advanced disease with or without lymph node region on one side of diaphragm or on opposite sides of diaphragm and one or more lymph node regions in the chest, abdomen or pelvis
- IV - Diffuse or nodular involvement of one or more extralymphatic sites
- IV S - Diffuse or nodular involvement of one or more extralymphatic sites with stage III disease

47. A 20 year old patient presents with pruritic lesions on the neck, antecubital and popliteal fossae since 2 year of age. The lesions are lichenified, excoriated and crusted patches. The MOST likely diagnosis is:-
- A. Atopic dermatitis *Infants 3-6 mths - face, trunk, extensor surfaces*
 B. Seborrhoeic dermatitis *children - Antecubital & Popliteal foss*
 C. Allergic contact dermatitis *Adults - face, neck, upper chest*
 D. Nummular dermatitis
 E. Dyshidrotic dermatitis
48. In a HIV positive patient with cryptococcal meningitis and CD4 count of 40 cells/uL, which one of the following approaches would be the MOST appropriate?
- A. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures and HAART initiation at 2 weeks
 B. HAART and amphotericin B plus fluconazole initiation simultaneously, serial lumbar punctures
 C. HAART for 2 weeks followed by amphotericin B plus fluconazole, serial lumbar punctures.
 D. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures; then fluconazole. HAART initiation after 5 weeks
 E. HAART for 5 weeks; serial lumbar punctures. Initiation of amphotericin B plus fluconazole after 5 weeks.
49. A 40 year old alcoholic goes to bed and wakes up in the morning with a wrist drop. The MOST likely nerve injury is?
- A. Radial nerve
 B. Ulnar nerve
 C. Musculocutaneous nerve
 D. Median nerve
 E. Axillary nerve
50. A 28 year old man presents with pain and swelling of his left leg 3 days after a thorn prick. Which one of the following antibiotics is the BEST empiric choice?
- A. Ciprofloxacin
 B. Clarithromycin
 C. Metronidazole
 D. Amoxicillin - clavulanic acid
 E. Nitrofurantoin
51. All of the following statements are true regarding gout EXCEPT:-
- A. The 1st metatarsal - phalangeal joint is commonly involved
 B. Renal failure is a known complication
 C. It can present with extra-articular manifestations
 D. It is common in pre-menopausal women
 E. It results form monourate sodium deposition

A patient presents with oral lesions for 1 month. He has flaccid vesicles and bullae on the trunk and limbs. Nikolsky sign is positive. The MOST likely diagnosis is:-

- A. Erythema multiforme major *acute*
- B. Mucous membrane pemphigoid
- C. Bullous pemphigoid - *large blisters, none on flexure areas*
- D. Pemphigus foliaceus *crusts, central lesion*
- E. Pemphigus vulgaris *so - this has mixed vesicles, flaccid blisters, all are characteristic of pemphigus, constant re-occurring lesions*

A 25 year old man with history of HIV disease presents with a history of chronic headache. Neurological examination is normal. CT scan reveals a contrast enhancing ring lesion on the left parietal lobe. The MOST appropriate approach would be:- *Toripir*

- A. Biopsy the lesion
- B. Start patient on steroids
- C. Start patient on empirical antibiotics
- D. Start patient on empirical anti-toxoplasmosis treatment - *Pyrimethamine + Sulphadiazine*
- E. Start patient on intravenous acyclovir

The following are the results of cerebrospinal fluid (CSF) obtained from a 40 year old man with meningitis

- Protein 100g/l *45g/dl*
- Glucose 1mmol/l
- White cell count 2000 cells/ μ l, predominantly lymphocytes
- Gram stain negative

These findings are compatible with:-

- A. Pyogenic meningitis
- B. Viral meningitis
- C. Tuberculous meningitis
- D. Sarcoidosis
- E. Cryptococcal meningitis

14. Which one of the following is the MOST important attribute necessary for a screening test?

- A. Sensitivity } *Influenza*
- B. Specificity }
- C. Positive predictive value (PPV)
- D. Negative predictive value (NPV)
- E. Receiver-operator curve (ROC)

15. All of the following statements regarding *Plasmodium falciparum* are true EXCEPT:-

- A. It causes more severe disease in pregnancy
- B. It is associated with recurrent relapses after effective initial treatment
- C. It is the only malarial parasite causing greater than 20% parasitemia
- D. Infection is associated with thrombocytopenia
- E. It is the only cause of cerebral malaria.

42. Which one of the following disease process is well matched with the renal manifestation?

- A. Syphilis - obstructive uropathy *nephrotic syndrome renal failure*
- B. *Plasmodium malariae* infection - nephrotic syndrome
- C. Systemic lupus erythematosus - acute tubular necrosis *lupus nephritis*
- D. *Schistosoma haematobium* infection - Fanconi syndrome, *Obstructive*
- E. Rheumatoid arthritis - acute glomerulonephritis *CAGE and test Amyloidosis, mesangial*

43. A 46 year old man with diabetes presents with right foot ulceration without gangrene. It is septic with malodorous smell. HbA_{1c} is 8.5%, dorsalis pedis pulses are good. *Staphylococcus aureus* and *Klebsiella sp.* have been isolated from the wound swab. The following actions are appropriate EXCEPT:-

- A. Daily hydrogen peroxide soaks *DM ulcers*
- B. Intravenous antibiotics *Great leg*
- C. Daily saline soaks *stop smoking*
- D. Platelet-derived growth factor dressing *Paracetamol avoid*
- E. Insulin therapy *Don't go too far*

44. A 65 year old man with 25 pack years of smoking presents with cough, weight loss and breathlessness. A chest radiograph shows a right apical homogeneous round opacity. All of the following findings are known to be associated with this presentation EXCEPT:-

- A. Hyperpigmentation of the palms *Paraneoplastic*
- B. Radicular pain to the right hand *Paraneoplastic*
- C. Hypocalcemia *Paraneoplastic*
- D. Hoarseness of the voice *Paraneoplastic*
- E. Haemoptysis *Paraneoplastic*

45. A patient presenting with non-ST elevation acute coronary syndrome will benefit from all of the following therapeutic interventions EXCEPT:-

- A. Thrombolysis
- B. Combined clopidogrel and aspirin therapy
- C. Enoxaparin therapy
- D. Beta-blocker therapy
- E. Nitrates

46. A 70 year old man presents with generalized pruritus and weight loss. Clinical examination reveals green jaundice and a palpable non-tender gall bladder. Which of the conditions listed below is the MOST likely diagnosis?

- A. Acute cholecystitis
- B. Cholelithiasis
- C. Hepatocellular carcinoma
- D. Pancreatic malignancy
- E. Cholangiocarcinoma

32. All of the following findings are compatible with a diagnosis of *Pneumocystis jirovecii* pneumonia EXCEPT:-

- A. Elevated white blood cell count *(blood count is normal)*
- B. Low CD4 count \uparrow
- C. Elevated lactate dehydrogenase (LDH) in blood *(LDH is elevated)*
- D. Marked hypoxia on arterial blood gas analysis \uparrow
- E. Butterfly appearance on chest radiograph \uparrow

33. A 65 year old man complains of palpitations. ECG shows irregular QRS complexes with absent P-waves. The diagnosis is :-

- A. Atrial flutter *sinus node*
- B. Atrial ectopics
- C. Atrial fibrillation *(1) - ventricular irregularity, (2) - irregularly irregular, (3) - narrow QRS, (4) - no association of P and QRS*
- D. Heart block *PR prolonged*
- E. Ventricular fibrillation

34. A 25 year old man is diagnosed with chronic hepatitis B infection. He has high hepatitis B virus (HBV) DNA at 100 million IU/ml. All of the following investigations would be required before initiation of treatment EXCEPT:-

- A. Liver function tests (LFT)
- B. Hepatitis B e antigen (HBeAg) test *infectivity*
- C. Hepatitis B core antigen (HBcAg) test *current infection*
- D. Hepatitis C virus screen
- E. Thyroid function tests (TFTs)

35. A 30 year old man presents with scaly papules and plaques. The differential diagnoses include all the following EXCEPT:-

- A. Lichen planus
- B. Psoriasis vulgaris
- C. Discoid dermatitis
- D. Pityriasis rosea *hypopigmentation*
- E. Morphoea *- localized scleroderma, caused by loss of collagen deposits in the skin*

36. A HIV positive woman has generalized cervical lymphadenopathy. Fine needle aspiration (FNA) cytology confirms tuberculous adenitis. Her CD4 count is 60 cells/ul. She is started on antituberculous treatment and HAART simultaneously. 4 weeks later she develops fever and increasing enlargement of the lymph nodes. Which one of the following would be the CORRECT approach to her management?

- A. Stop the anti-tuberculous therapy *start*
- B. Stop the anti-retroviral therapy *continue only if life threatening*
- C. Start on prednisone immediately *highly but steroids & mycobacteria*
- D. Add a broad spectrum antibiotic
- E. Give an antipyretic and continue therapy

6. In a patient with anasarca, 24-hour albumin excretion of 8g and normal glomerular filtration (GFR), the following complications are expected EXCEPT: - *renal retention of diuresis*

- A. ✓ Hypercoagulability *antifibrinolytic*
- B. Metastatic calcification *hypocalcaemia*
- C. Atherosclerosis *hyperlipidaemia*
- D. Susceptibility to infections *hypoproteinaemia*
- E. Hyponatremia *dilutional*

7. A 60 year old man presents to his doctor for a medical check. He is found to have a random blood sugar (RBS) of 7mmol/L. An oral glucose tolerance test (OGTT) done showed fasting blood glucose of 6.2 mmol/L, 2 hour post glucose load of 14.4 mmol/L. Which of the following statements is TRUE regarding this patient?

- A. He has diabetes mellitus *11.1 = DM*
- B. He has impaired glucose tolerance *fasting with FBS 2.7 mmol/L*
- C. He has metabolic syndrome *fasting glucose 5.6*
- D. He should have fasting lipid assay to determine the diagnosis *fasting glucose 5.6*
- E. Another OGTT should be done in 6 months to determine his diagnostic status *fasting glucose 5.6*

A 22 year old man presents to the emergency department with a 3 day history of fever, cough and pleuritic chest pain. His temperature is 39°C, pulse rate is 110 beats/min and respiratory rate is 26 beats/min. Chest radiograph reveals an opacity in the right lower lung zone. Which of the following is the MOST common cause of the condition?

- A. *Candida albicans*
- B. *Pseudomonas aeruginosa*
- C. *Mycoplasma pneumoniae*
- D. *Staphylococcus aureus*
- E. *Streptococcus pneumoniae*

9. A 12 year old boy develops migratory joint pain involving large joints 2 weeks after a sore throat. He has a tachycardia of 110 beats/min, and a systolic murmur at the apex. Which of the following statements is TRUE concerning his clinical presentation?

- A. The micro-organism causing the sore throat is likely to be *Staphylococcus aureus*
- B. Blood cultures usually yield the offending organism
- C. The heart involvement is usually pancarditis
- D. Erythema nodosum is expected
- E. Shortened PR interval is found on the electrocardiogram (ECG)

10. A 20 year old man presents with 3 months history of bloody mucoid diarrhea. Colonoscopy shows diffuse erythema and ulcerations in the entire colon and patchy ulceration in the terminal ileum. The MOST likely diagnosis is:-

- A. Ulcerative colitis *ULC with backwash ileitis*
- B. Crohn's disease
- C. Amoebic colitis
- D. Shigellosis
- E. Tuberculous enteritis

21. All of the following auscultatory findings are expected in mitral stenosis EXCEPT:-

- A Mid-diastolic murmur
 - B Soft first heart sound \times loud \checkmark
 - C Presystolic murmur accentuation \checkmark
 - D Opening snap \checkmark
 - E Loud second heart sound \checkmark
- rumbling mid diastolic murmur best heard in supine*

22. A patient presents with massive haematemesis for 1 day. Endoscopy reveals acutely bleeding oesophageal varices. All of the following treatments would be recommended EXCEPT:-

- A Sclerotherapy \checkmark
- B Propranolol infusion \checkmark
- C Octreotide infusion \checkmark
- D Nasogastric tube insertion \checkmark
- E Band ligation \checkmark

23. A 25 year old woman presents with erosion, weeping and crusted lesions on 30% body surface area. The plan of management should include all of the following EXCEPT:-

- A Septic screen \checkmark
 - B Saline soaks \checkmark
 - C Infection control \checkmark
 - D Keep warm \checkmark
 - E Emollients \checkmark
- immune complex mediated hypersensitivity*

24. A 58 year old man with HIV develops a vesicular eruption along the left side of the ribcage. The eruption is preceded by days of tingling and burning sensation. Which one of the statements is TRUE regarding the condition?

- A Corticosteroids should be started immediately
- B Early acyclovir reduces the duration of symptoms
- C Previous Herpes simplex virus infection is associated with this presentation
- D Disappearance of the rash is associated with disappearance of symptoms in all the patients
- E Amitriptylline has no role in the management of this condition

25. A 50 year old man presents with history of wasting of the small muscles of the hand associated with dysarthria and dysphagia. Examination reveals spastic immobile tongue, wasted muscles of the hands with increased deep tendon reflexes. All of the following statements are true regarding the condition EXCEPT:-

- A Autosomal dominant inheritance \checkmark
- B Cause of death is usually respiratory \checkmark
- C Is associated with nystagmus \checkmark
- D Responds to steroids \checkmark
- E Sphincteric involvement is a late complication

in x-linked disease
copy
subependymal
energy
reminders
forms
1 2 3
EBV CMV, HIV
at HIV, HIV
Myogenic (CNS) - Progressive
Smith
forms of ALS
Progressive spinal muscular atrophy
bulbar palsy
by latent recessors

ALS - group of motor neuron disease
nerve cells excitability state
muscle
isolated part of spinal cord
to replaced by connective tissue scars
range of formal like conditions
does not affect
nerve, taste, smell, vision, hearing, bladder, intellectual
irreversible
Arthralgia
rectus abdominis
or bulbar
g. to spinal
Page 6 of 20
connective tissue
multidisciplinary
avoid all muscle

16. All of the following are diagnostic criteria for polymyositis EXCEPT:-

- A. Elevated creatine kinase ✓
- B. Proximal muscle weakness ✓
- C. Myopathic electromyogram (EMG) ✓
- D. Typical changes on muscle biopsy ✓
- E. Heliotrope rash — Dermatomyositis

17. A 13 year old boy presents with long-standing mild jaundice, moderate pallor and moderate splenomegaly. The MOST likely diagnosis is:-

- A. Sickle cell anaemia
- B. Non-Hodgkin's lymphoma
- C. β -thalassaemia
- D. Chronic myeloid leukemia
- E. Myelofibrosis

18. A 56 year old man presents with severe low back pain, lumbar spine tenderness and general illhealth. He has pallor and mild ankle oedema. Investigations show haemoglobin 6g/dl, MCV 80fl, ESR 110mmHr serum albumin 30g/l, total protein 130g/l. Xrays show compression fracture L3 to L5 and osteolytic lesions in the pelvic bones. Common causes of renal failure in this condition include all the following EXCEPT:

- A. Neurogenic bladder
- B. Hypercalcemia
- C. Hyperuricemia —
- D. Proteinuria — \rightarrow Paraprotein
- E. Hyperparathyroidism ✓

19. A 28 year old woman is followed up for thyrotoxicosis. She is on antithyroid medication. Which one of the following clinical parameters will closely reflect her thyroid hormone status?

- A. Emotional variability (moods) ✓
- B. Menstrual patterns
- C. Palpitations
- D. Sleep patterns
- E. Weight

20. All of the following interventions are beneficial in the management of patients with chronic obstructive airway disease (COPD) EXCEPT:-

- A. Pneumococcal vaccination ✓
- B. Ceasation of smoking ✓
- C. Short acting bronchodilators ✓
- D. Inhaled anticholinergics ✓
- E. High tension oxygen therapy ✓

52. Which one of the following is TRUE regarding chronic myeloid leukemia (CML)?

- A. It is almost exclusively a disease of children
- ~~B.~~ Leucocyte alkaline phosphatase (LAP) score is reduced
- ~~C.~~ Lymphadenopathy is common in the stable state
- ~~D.~~ Autosplenectomy occurs ✓
- E. Spontaneous fractures tend to occur

53. Which one of the following conditions is associated with dilutional hyponatraemia?

- ~~A.~~ Congestive heart failure
- B. Acute tubular necrosis
- C. Gastroenteritis
- D. Hypothyroidism
- E. Hypercholesterolaemia

54. A 36 year old man with longstanding bronchial asthma has been on prednisolone 30mg/day for several years. Now he has cushingoid features. The other findings expected in this patient include all of the following EXCEPT:-

- A. Systemic hypertension
- B. Bone pains
- C. Normal libido
- D. Agitated behaviour
- E. Raised intra-ocular pressures

55. All of the following are danger signs in status asthmaticus EXCEPT:-

- A. Pulse rate of 115 beats/min
- B. Inability to complete sentences
- C. Respiratory rate of 36 breaths/min
- D. Inability to perform peak flow measurements
- E. Blood pressure of 90/60 mm Hg

56. All of the following pharmacotherapies have been shown to prolong survival in patients with non-valvular heart failure EXCEPT:-

- A. Spironolactone
- B. Carvedilol
- C. Angiotensin converting enzyme inhibitors (ACE I)
- D. Angiotensin receptor blockers (ARB)
- E. Loop diuretics

57. A 35 year old man presents with heartburn and a feeling of regurgitation after meals. He frequently clears his throat while talking. Upper gastrointestinal tract (GIT) endoscopy is reported as normal. This condition is associated with all of the following features EXCEPT:-

- A. Poor quality of life
- B. Increased incidence of malignancy
- C. Barrett's oesophagus
- D. Recurrent bronchospasm
- E. Increased incidence of *Helicobacter pylori*

63. Steroid therapy is indicated in the following oncological emergencies EXCEPT:-
- A. Superior vena cava obstruction
 - B. Hypercalcemia
 - C. Severe neutropenic sepsis
 - D. Raised intracranial pressure
 - E. Spinal cord compression

64. A 35 year old man presents with nausea, vomiting and general malaise. He has been hypertensive for 5 years. Laboratory tests show:-

- Urinalysis – protein 3+, RBCs 2+, granular casts
- Haemoglobin 9.3g/dl, MCV 80fl WBC $6 \times 10^9/L$, platelets $119 \times 10^9/L$
- Serum K^+ 5.4 mmol/L, Na^+ - 128 mmol/L urea 28mmol/L creatinine 837umol/L
- Renal ultrasound – bilateral contracted kidneys Right = 6.2 x 3.8 cm, Left = 6.32 x 3.3 cm

Which of the following statements is TRUE?

- A. This is acute kidney injury secondary to volume depletion
 - B. This is acute glomerulonephritis
 - C. Renal biopsy should be performed
 - D. Patient requires longterm dialysis
 - E. Patient has hypertensive glomerulosclerosis
65. All of the following are rational combinations of oral glucose lowering medications EXCEPT:-
- A. Metformin/Arcabose/Glimepiride
 - B. Metformin/Repaglinide/Linagliptin
 - C. Metformin/Insulin
 - D. Chlorpropamide/Insulin
 - E. Metformin/Linagliptin/Insulin

66. A 60 year old male has a 20 pack-year history of cigarette smoking. He presents with a productive cough and shortness of breath especially on cold days and associated chest tightness and wheezing. The MOST likely diagnosis is:-

- A. Asthma
- B. Chronic obstructive pulmonary disease (COPD)
- C. Heart failure
- D. Anxiety attack
- E. Pneumonia

67. An elderly female who is being nursed in hospital for dense hemiplegia from a cerebrovascular accident is suddenly diaphoretic and dyspnoeic. On examination, she is cold, sweaty and tachypnoeic. Her radial pulse is weak and feeble. The electrocardiogram (ECG) is significant only for sinus tachycardia. All of the following investigations are useful in establishing the diagnosis EXCEPT:-

- A. Cardiac troponin assay
- B. D-dimer assay
- C. Computerized tomography (CT)-pulmonary angiography
- D. Blood sugar analysis
- E. Chest radiograph

68. All of the following statements regarding irritable bowel syndrome (IBS) are true EXCEPT:-
- A. Presents with increased loose watery stools
 - B. Diarrhoea often occurs at night
 - C. The stool never contains blood
 - D. Constipation is sometimes the predominant symptom
 - E. Abdominal pain is often relieved by defecation
69. AIDS-defining mucocutaneous disorders include all of the following EXCEPT:-
- A. Oesophageal candidiasis
 - B. Kaposi's sarcoma
 - C. Cutaneous cryptococcosis
 - D. Herpes simplex ulcers
 - E. Pyoderma gangrenosum
70. A 26 year old woman presents with a 2 week history of change in speech and a tongue that deviates to the right side on protrusion. Which cranial nerve is involved?
- A. Right glossopharyngeal
 - B. Left glossopharyngeal
 - C. Right hypoglossal
 - D. Left hypoglossal
 - E. Left vagus
71. A 26 year old woman presents with history of chronic cough. She reports that she was on treatment for tuberculosis which she stopped 3 weeks prior after having taken it for 25 days. Which one of the following is NOT appropriate in the approach to her management?
- A. Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide and ethambutol
 - B. Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide, ethambutol and streptomycin
 - C. Send sputum for acid fast bacilli staining
 - D. Send sputum for genexpert MTB/RIF
 - E. Apply directly observed therapy
72. A 13 year old boy presents with a 2 day history of fever, right knee pain and swelling. There were no precipitants to this illness. Which one of the following statements is TRUE regarding this condition?
- A. Intra-articular steroids are useful in the management
 - B. Analgesia, oral antibiotics and bedrest is the gold standard in the management
 - C. Antibiotics should be withheld until results of the gram stain are obtained
 - D. Intra-articular antibiotics are useful
 - E. Needle aspiration and drainage of the joint is warranted

84. Which of the following conditions is NOT a recognized cause of cardiogenic syncope?

- A. Pulmonary embolism
- B. Ventricular fibrillation
- C. Postural hypotension
- D. First degree heart block
- E. Third degree heart block

85. A 45 year old man with liver cirrhosis and bleeding tendencies and an otherwise normal blood count comes to you for management. Which of the following is the MOST appropriate therapy?

- A. Tranexamic acid ✓ *Antifibrinolytic*
- B. Platelet infusion ✗
- C. Whole blood transfusion ✗
- D. Transfusion of packed cells ✗
- E. Vitamin K *(helps liver produce clotting factors)*

86. Which of the following drugs is LEAST useful in myoclonic epilepsy?

- A. Ethosuximide
- B. Carbamazepine
- C. Sodium valproate
- D. Clonazepam
- E. Lamotrigine

87. Modifiable risk factors for osteoarthritis include all of the following EXCEPT:-

- A. Age
- B. Race
- C. Female gender
- D. Obesity
- E. Prior inflammatory joint disease

88. Which one of the following is NOT a risk factor for hepatocellular carcinoma?

- A. Heavy alcohol consumption ✓
- B. Exposure to aflatoxins ✓
- C. Hepatitis A virus ✗
- D. Hepatitis B virus ✓
- E. Hepatitis C virus ✓

89. Which one of the following statements is TRUE regarding diabetic nephropathy?

- A. Stage 2 is characterized by microalbuminuria
- B. Hyperfiltration is only evident in late stages F
- C. The microalbuminuria stage is potentially reversible F
- D. Microalbuminuria precedes the glomerular structural changes F
- E. Stage 4 patients need to be started on dialysis F *make it worse*

96. A 20 year old woman presents with a history of sudden onset of confusion. This is followed by a severe episode of generalized tonic-clonic seizure. Before the onset of the seizure, she had reported a funny smell. Examination reveals a temperature of 38°C , confusional state with no evidence of meningeal irritation. Which of the following would be the MOST effective treatment in this condition?
- Acyclovir
 - Gancyclovir
 - Anti-tuberculous treatment
 - High dose steroids
 - Ceftriaxone with vancomycin
97. Low voltages on a 12-lead ECG occur in all the following conditions EXCEPT:-
- Amyloid heart
 - Chronic obstructive pulmonary disease (COPD)
 - Pericarditis
 - Obesity
 - Pericardial effusion
98. A 22 year old man presents with a 6-month history of left upper quadrant discomfort and early satiety. 2 days prior to presentation, he developed priapism. Abdominal exam revealed splenomegaly 12 cm below left costal margin. White blood cell count (WBC) is $279 \times 10^9/\text{L}$, haemoglobin is 9.4g/dL and platelets $702 \times 10^9/\text{L}$. What is the MOST appropriate next investigation to confirm the diagnosis?
- Abdominal ultrasound scan
 - Erythropoietin level
 - Haemoglobin electrophoresis
 - Bone marrow evaluation
 - Peripheral blood film
99. Which one of the following statements is TRUE regarding ascites in liver disease?
- Thiazides are the diuretics of choice
 - Malignant ascites responds well to diuretic therapy
 - Portal hypertension is a rare cause
 - Aldosterone antagonists are the preferred diuretics
 - Infectious aetiology is uncommon
100. A 20 year old woman at 20 weeks gestation presents to the emergency department with dyspnoea class III. On examination, she has a regular pulse rate of 90 beats/min, a non-displaced apex with apical mid-diastolic rumbling murmur with loud first heart sound. Which of the following is the MOST appropriate emergency therapeutic intervention? 60 1026/100
- Furosemide therapy
 - Termination of pregnancy
 - Digoxin therapy
 - Angiotensin converting enzyme inhibitor (ACEI) therapy
 - Beta blocker therapy

26. You notice in the locker room one of your colleagues injecting himself with pethidine. What would be your MOST appropriate actions? D
- A Report to the supervisor
 - B Counsel your colleague yourself
 - C Pretend you did not see him
 - D Ask your senior colleague to talk to him
 - E Report him to the director of the hospital

27. A 28 year old man presents with painful micturition and a purulent urethral discharge for 2 days. Which one of the following is NOT an appropriate drug for his treatment?
- A Ciprofloxacin 500mg BD
 - B Ceftriaxone 200mg IM
 - C Amoxicillin
 - D Azithromycin - 2g single dose
 - E Doxycycline - 200mg 1 day divided at 12h po / 100mg 1 day qd for 2w

28. Which one of the following is NOT a feature of fibromyalgia? - disorder of chronic widespread pain
- A Anxiety
 - B Fatigue
 - C Irritable bowel syndrome (IBS)
 - D Scleritis
 - E Sleep disturbance
- Complicatn*
Mixed
Opio analgesic
Hypnic
Sleep disruption
Headache
obs 4
metabolic
- qdx*
myokines
RA
UF
Poly myalgic syndrome
- disorder of chronic widespread pain*
or tender points
more of tender points
stress
PS - persistent
heaviness
+ ataxic gait
scapular
trapezius

29. A 30 year old man presents with general body weakness. Physical examination reveals pallor and koilonychia. Which one of the following is the MOST likely positive laboratory finding?
- A Presence of *Ascaris lumbricoides* ova in his stool
 - B Presence of *Taenia saginata* ova in his stool
 - C Increased faecal stercobilinogen
 - D Mean corpuscular volume (MCV) of 59fl
 - E Reduced total iron binding capacity (TIBC)

30. Which one of the following renal disease is well matched to renal imaging findings?
- A Chronic glomerulonephritis - bilateral contracted echogenic kidneys
 - B Obstructive uropathy - echogenic kidneys
 - C Chronic pyelonephritis - enlarged globular kidney
 - D HIV nephropathy - bilateral small scarred kidneys
 - E Acute tubular necrosis - dilated calyces.

31. The metabolic syndrome is defined by the presence of all the following characteristics EXCEPT:
- A Abdominal obesity
 - B Hypertension
 - C High high-density lipoprotein(HDL) - cholesterol
 - D Hypertriglyceridemia
 - E Impaired glucose tolerance

multiple risk factor
insulin resistance
common risk factor for CAD
Abdominal obesity
hypertension
hypertriglyceridemia
retinopathy
Hypox TGs
HDL
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Abdominal obesity
chest pain of SOB
thrombosis

disturbance of sleep
Cognitive dysfunction
Permanently poor one
fluoxetine
graded Acids
Antyplatelet

73. A middle-aged man is reviewed in the outpatient clinic with complaints of abdominal swelling for several weeks. Physical examination reveals splenomegaly extending 10 cm below the costal margin. All of the following are likely causes EXCEPT:-

- A. Chronic myeloid leukemia ✓
 - B. Miliary tuberculosis
 - C. Myelofibrosis
 - D. Visceral leishmaniasis ✓
 - E. Hyper-reactive malarial splenomegaly (HMS)
- causes of massive splenomegaly
→ MTS
→ Myelofibrosis
→ Visceral leishmaniasis

74. Which one of the following statements is TRUE concerning urinary tract infections?

- A. *Staphylococcus aureus* is the commonest organism among sicklers F
- B. *Proteus spp.* infection is associated with calculi
- C. Treatment of *Candida* infections predisposes one to bacterial infections
- D. Haematogenous route of infection is the commonest origin f - has ascending
- E. In men, infections are usually associated with sexual intercourse

75. All of the following are established risk factors for diabetic foot ulcer disease EXCEPT:-

- A. Diabetic cardiomyopathy
- B. Chronic kidney disease stage 3 and higher ✓
- C. Macular eye disease ✓
- D. Peripheral neuropathy ✓
- E. Claw-toe deformity ✓

76. Which one of the following is NOT a recognized risk factor for the development of deep venous thrombosis?

- A. Hormonal contraceptive therapy ✓
- B. Protein C deficiency ✓
- C. Heart failure
- D. Anti-phospholipid syndrome
- E. Hypertension

77. Which of the following is NOT a cause of constipation?

- A. Hypocalcemia
- B. Hypothyroidism
- C. Aluminium containing antacids
- D. Cerebrovascular accidents
- E. Atorvastatin

78. All of the following are risk factors for haemorrhagic stroke EXCEPT:-

- A. Cocaine use
- B. Cigarette smoking
- C. Amyloid angiopathy
- D. Aneurysm
- E. Warfarin use

90. All of the following are evidence-based therapeutic lifestyle changes in the control of systemic arterial hypertension EXCEPT:-

- A. Moderation of alcohol ingestion
- B. Reduced dietary salt ingestion
- C. Lower dietary potassium intake
- D. Stress management
- E. Regular aerobic exercise

91. A 30 year old pregnant woman is found to be hepatitis B surface antigen (HBs Ag) positive. She is concerned about transmitting the virus to her unborn infant. Which of the following factors is MOST useful in determining the risk of transmission?

- A. Hepatitis B e antigen (HBeAg) status
- B. Hepatitis B core immunoglobulin G (HBcIgG) status
- C. Alanine aminotransferase (ALT) 23IU/L
- D. Her alcohol history
- E. Aspartate aminotransferase (AST)/ALT ratio >2

92. A 38 year old woman presents with a 1 month history of bilateral numbness of the lower limbs. Examination is notable for reduced vibration sense and reduced ankle reflexes. All of the following tests are useful in this patient EXCEPT:-

- A. Serum sodium
- B. Serum creatinine
- C. Thyroid stimulating hormone
- D. Glycosylated haemoglobin
- E. Haemoglobin level

93. A 25 year old woman presents with gradual skin tightening involving the hands and face. She also has first degree heart block on the ECG and reflux oesophagitis. Which one of the following statements is TRUE regarding this condition?

- A. It is commoner in males compared to females
- B. It is easily amenable to treatment
- C. Raynaud's phenomenon is an invariable feature
- D. It has no renal manifestations
- E. It is usually an indolent disease

94. A 16 year old girl has bilateral haemarthrosis of elbow joints. She has a fluctuant right knee that is tender. She is bleed from a venepuncture site for the past 24 hours. Which one of the following is the MOST likely diagnosis?

- A. Classical hemophilia
- B. Christmas disease
- C. Von Willebrand's disease
- D. Disseminated intravascular coagulopathy (DIC)
- E. Protein C deficiency

95. All of the following are features of minimal change glomerulonephritis EXCEPT:-

- A. Heavy proteinuria ✓
- B. Hypertension X
- C. Corticosteroid responsiveness ✓
- D. Lack of active sediment in urine ✓
- E. Hypercholesterolemia ✓

79. A tourist suffered a bout of watery diarrhoea which became mucoid and blood stained. He had fever and developed severe joint pain a few weeks later. Rheumatoid factor was negative. All of the following statements are true regarding the disease EXCEPT:-
- A. *Shigella flexneri* is the causative organism
 - B. There is high circulating bacterial antigen
 - C. Culture of *Neisseria gonorrhoeae* will be obtained from joint aspirate
 - D. It is associated with HLA B27 genotype
 - E. It is associated with serum leucocytosis
80. A 45 year old woman with a diagnosis of rheumatoid arthritis has been on methotrexate and prednisone for 2 years. Which one of the following complications is NOT likely to be due to her chronic steroid use?
- A. Cataract formation
 - B. Peptic ulcer disease
 - C. Diabetes mellitus
 - D. Liver disease
 - E. Hypertension
81. A strict vegetarian presents with general malaise, exertional dyspnoea and pallor. Peripheral blood film shows segmented neutrophils and the mean corpuscular volume (MCV) is 110fl. Which one of the following statements is TRUE?
- A. Gum hypertrophy occurs
 - B. Serum ferritin levels are low
 - C. Bone marrow Prussian blue stain is negative
 - D. Paraesthesias are common
 - E. Condition is invariably fatal
82. A 30 year old man has just been diagnosed with HIV. He presents to the clinic with complaints of unintentional weight loss despite a good appetite. His initial weight was 70Kg. He has lost 8 Kg over the past 3 months. Physical exam reveals generalized lymphadenopathy. What is his current WHO stage?
- A. Stage 0
 - B. Stage 1
 - C. Stage 2
 - D. Stage 3
 - E. Stage 4
83. A 28 year old woman presents with goitre. Thyroid profile showed TSH = 0.000m IU/L, FT4 = 30ng/L, FT3 = 12 pmol/L. Ultrasound showed a thyroid nodule in the right lobe, the rest had normal echotexture. Which of the following treatments is LEAST appropriate for her?
- A. Propranolol
 - B. Propylthiouracil
 - C. Lugol's iodine
 - D. Methylprednisolone
 - E. Surgery

58. A 15 year old boy presents with insidious onset of pruritic eruption on the interdigital clefts, flexor aspects on the wrists and gluteal cleft. The lesions comprise of papules, vesicles, pustules and burrows. The MOST likely diagnosis is:-
- A. Larval migrans
 - B. Papular urticaria
 - C. Urticaria pigmentosa
 - D. Scabies
 - E. Dermatitis herpetiformis
59. A 34 year old HIV positive man presents with a 3 week history of severe headaches and photophobia. His CD₄ count is 36 cells / μ l. He further reports that 2 months back, he had similar headaches, was admitted and given 2 weeks of amphotericin B for confirmed "fungal meningitis". He did not go for follow-up after discharge. What is the MOST useful test to confirm the diagnosis now?
- A. Cerebrospinal (CSF) cryptococcal antigen (CRAG) test
 - B. Serum CRAG test
 - C. India ink in CSF
 - D. CSF fungal culture
 - E. CSF protein level
60. A 30 year old woman presents with a 2 week history of progressive weakness. She has found it difficult to rise from a sitting position and comb her hair. Examination reveals normal deep tendon reflexes and sensory modalities. All of the following statements are true regarding her illness EXCEPT:-
- A. It responds to steroids
 - B. It is associated with elevated muscle enzymes
 - C. It is associated with acetylcholine receptor antibodies
 - D. It is associated with malignancies
 - E. Dysphagia occurs
61. A 60 year old man presents with a 1 day history of headache, fever and neck stiffness. Which one of the following organisms is NOT likely to cause this presentation?
- A. *Streptococcus pneumoniae*
 - B. Group A β -hemolytic *Streptococcus*
 - C. *Haemophilus influenzae*
 - D. *Neisseria meningitidis*
 - E. *Listeria monocytogenes*
62. All of the following indicators are useful in evaluating the success of treatment of rheumatoid arthritis EXCEPT:-
- A. Tender joint count
 - B. Swollen joint count
 - C. Markers of inflammation
 - D. Number of deformed joints
 - E. Functional status of the patient