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## GoldStandard Papers (FCPS-1)

### Gynae & Obs

1<sup>st</sup>-December-2021 (Evening)

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Medicine & Allied 1 <sup>st</sup> December Afternoon
Medicine & Allied 1 <sup>st</sup> December Night
Medicine & Allied 2 <sup>nd</sup> December Morning
Medicine & Allied 2 <sup>nd</sup> December Afternoon
Medicine & Allied 2 <sup>nd</sup> December Night
Surgery & Allied 30 <sup>th</sup> November Afternoon
Surgery & Allied 30 <sup>th</sup> November Night
Surgery & Allied 1 <sup>st</sup> December Morning
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Opthmology November 2022
Dentistry November 2022



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### Gynae & Obs 1<sup>st</sup> december Evening [www.fcpsworld.com](http://www.fcpsworld.com)

- A dry eyes and dry mouth most suitable -----> Anti SSA
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- A newborn baby is noted to have a left unilateral cleft lip. There are no abnormalities of the baby's palate. Developmental defects accounts for this occurrence-----> Failure of the left maxillary process to fuse with the left medial nasal process
- Structure is behind ovarian fossa-----> Ureter
- Conditions caused by lymphatic obstruction-----> Cystic Hygroma
- Prothrombin time is useful in -----> Jaundice
- After Dehydration nephron part most affected is-----> PCT
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Drug used for acute pancreatitis-----> Pethidine
- Which anesthesia is cardiotoxic-----> Bupivacaine
- A tall young man had aortic root dilation upto 4cm, ocular examination showed lens dislocation. Mitral valve leaflet defect with a systolic click what is diagnose-----> Marfan Syndrome
- Interruption of cervical sympathetic chain result in homer syndrome if sympathetic nerves to the Eye are affected of the is the commonest finding-----> Drooping of eyelid on affected side
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- Lady with previous hx of HMB now becomes pregnant delivers a baby on MI term. Both mother and baby will have deficiency of-----> Iron
- Local anesthetic when injected in nerve fiber-----> Block sodium channel in ionized form
- Tunica vaginalis is derived from -----> Parietal Peritoneum
- Lady admitted with complain of irregular bleeding and pain on investigation it was diagnosed as case of endometrial cancer is associated with inherited cancer-----> HNPCC
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- Pt with generalized petechiae + purpura. Clotting profile normal. Blood reports normal. What's the cause-----> Vasculitis
- G6 p5 develop rigors chills sudden lower abdominal pain, white watery vaginal discharge most suitable Diagnose is-----> Chorioamnionitis
- Behaviour changes are produced in society by-----> Peer seeder
- Regarding lymphocytes true is-----> Are cancer fighting cells
- Before puberty, the oocyte is in diplotene stage, which is a part of-----> Prophase
- Pt develops Anaphylactic shock after blood transfusion treatment should be-----> IM adrenaline
- True hermaphrodite is-----> XY
- 2nd order neurons of anterior spinothalamic tract lies in-----> Substantia gelatinosa
- ----->
- After finger cut immediate mediator will be-----> Histamine
- Undergoing laparotomy, during dissection at ovarian fossa ovary attached to lateral pelvic wall which artery is at risk of damage-----> Internal iliac
- Standard deviation measure-----> Variability among individual values
- A Hypoxia. His PO<sub>2</sub> measured is 65mmhg. Type of hypoxia is-----> Hypoxia hypoxia
- A chronic alcoholic suffering from liver cirrhosis developed portal hypertension with caput medusa. In this condition, the veins around the umbilicus are connected to the left branch of portal vein through-----> Paraumbilical veins
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- Pulse oximeter gives erroneous reading in-----> Methemoglobinemia
- Single breath nitrogen test is used to measure-----> Anatomical dead space
- Which of the anticancer drug is contraindicated in renal impairment-----> Cisplatin
- Most common location of breast cancer is-----> Upper outer quadrant



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- Severe bums, he developed swelling in the whole body, cause of swelling is-----> Hypoalbumemia
- Child bom with a mass at lumbar region with no neural tissue in it this is due to-----> Spina bifida with meningocele
- A MI Left circumflex artery infarction area involved will be-----> Left atrium and left ventricle
- A scar that extends beyond its boundaries is called-----> Keloid
- ----->
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- Through which function hormone released at one site, acts locally in near area-----> Paracine
- Heart (SA node) and uterine smooth muscle are supplied by adrenergic receptor are-----> B1 and B2
- Hereditary spherocytosis defective protein is -----> Spectrin
- Woman had RTA, She does not know recent events but he remembers her school events. On CT where is the lesion-----> Hippocampus
- Paramagnetic cylinder used for what-----> Oxygen
- In Leukemia eye involvement in which percentages-----> 80
- Ionizing radiation cause injury by-----> Free radical
- For Rythm control in AF with IHD treatment should be-----> Amiodarone
- In transverse cut section which structure is not visible at Til but visible at T12 behind the stomach-----> Spleen
- Spermatogenesis stimulated by FSH secreted by-----> Sertoli cell
- In autosomal dominant genetic defect if phenotypically it is not expressed, pattern is-----> Reduced penetrance
- Cell to cell adhesion-----> Cadherins
- In fetus blood in carotid artery enter from-----> Aorta
- Most appropriate blood test in initial stages of MI-----> Myoglobin
- Oxidase enzyme and H<sub>2</sub>O<sub>2</sub> present in-----> Peroxisomes
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- Fine skilled discrete movement of hands by -----> Corticospinal tract



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- In construction factor worker there is risk of-----> Asbestosis
- A man having subfertility Having son of 5 years but semen analysis showed azospermia there may be defect in-----> Sertoli cell Defect
- Ovarian epithelium is-----> Simple cuboidal
- ----->
- Closes cranial sutures in Animal models-----> TGF Beta
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- Pt with H/O of 3"\* degree bum stratum comeum, spinosum and lucidum acute loss will lead to-----> Acute water loss
- Pt of CRF with edema development which of the fouowinga.is the most specific mechanism operating-----> Decrease oncotic pressure
- Lesser and greater sac are separated all over except at one place-----> Epiploic foramen
- Most important function of progesterone-----> Breast alveolar development
- Painful leg ulcer and having howell jolly bodies on smear what is likely diagnose-----> Sickle cell anemia
- ----->
- Suffering from CA breast undergo total mastectomy develop edema of right upper limb can be the reason of this edema-----> Lymphatic obstruction
- Staging for any malignancy done see -----> Extend of spread
- Comeal epithelium type-----> Stratified squamous non keratinized
- A fracture of humerus now cannot raise his arm above shoulder and sensory loss on lateral surface of atm and loss of abduction of arm which nerve is damaged-----> Axillary and Suprascapular nerve
- For increasing iron absorption what should he added in diet-----> Citrus fruit
- Total Body water measured by-----> Tritiated water
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- Lady has no difficulty in walking but Can't stand from sitting position due to weakness of which muscle-----> Gluteus maximus



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- Result of positive test came positive and negative came negative this is related to-----> Accuracy
- When interpreting a capnogram at-----> Rise in baseline demonstrates rebreathing
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- Suffering from Dysphagia dysarthria analgesia & thermoanesthesia on ipsilateral side of face and ipsilateral homer's syndrome Occlusion of which artery would producethese signs & symptoms-----> Posterior inferior cerebellar artery
- Sertoli cells releases -----> Inhibin
- Regarding melatonin true is-----> Regulates pigmentation
- Post ganglionic sympathetic release-----> Norepinephrine
- Lowest maternal mortality in which age group-----> 20.30
- Mechanism of action of PTU-----> Inhibit thyroid peroxidase enzyme
- For 14 to 24 meq of HCO<sub>3</sub>, cch will be-----> 35
- CNS symptoms, high insulin, high C peptide, low glucose, what is the cause-----> Insulinoma
- Pulmonary artery supply-----> Alveoli
- Man presented with 8 months hx of progressive generalized lymphadenopathy his HB 9.8 TLC 59\*10 PLTS 94\*10 peripheral 61m shows mature lymphocytes likely dx-----> CLL
- Wave on JVP correspond ventricular contraction-----> C wave
- Cough and x.ray shows hilar lymphadenopathy, non caseating granuloma present diagnose is-----> Sarcoidosis
- Bleeding from the post duodenal ulcer rupture artery is responsible for this-----> Gastroduodenal artery
- ----->
- CGMP is secondary receptor of-----> ANP
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- A scientist was experimenting on mice, he gave croton oil several times to mice in a week, then asked about how promoters causes carcinogenesis-----> Clonal expansion
- Strongest stimuli for erythropoietin are-----> Hypoxia
- Child fell while cycling, after that he has complain of anuria which structure is damaged-----> Urethra
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Megaloblastic anemia and peripheral neuropathy cause is-----> Cobalamine
- Main difference between primary and secondary intention wound healing is-----> Wound contraction
- A Kid having cystic fibrosis developing recurrent chest infecdon and odds media most likely associate findings-----> Increase sweat chloride
- Minimum absorption of drug from its site of absorption for its desirable effect occurs----->local action
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Components of informed consent include-----> Written explained procedure risks benefits and alternative method
- Steroid produced by fetal adrenal cortex is-----> DHEA
- A Pregnancy of 28 weeks with no complications suddenlyneeded resuscitation and given mechanical intubation due to respiratory insufficiency and zero respiratory effort having increase opacities on X.ray after premature birth. What will be found in baby lungs-----> Decreased lamellar bodies in type 2
- Enzymes involved in cell remodeling of tissue-----> Collegenase
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Pt with Delayed puberty having small testis with Large legs and Gynecomastia and Karyotype is 47 XXY most suitable diagnose is-----> Klin filter Syndrome
- Immediate death occurs after injury to which nerve-----> Vagus
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- On initial pt interview, least likely thing to be done is-----> Project an image of authority
- Low level of complement is seen in condition-----> SLE
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- PCT in comparison to DCT has-----> Extensive brush border
- Is Diagnostic criteria for sarcoma-----> Increased vascularity
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Lady presents with 40 weeks gestation cephalic presentation. Gynaecologist did pelvic examination the cervix is dilated upto 6cm and head is at 0 station. What is the landmark/reference point-----> Ischial spine
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- Vessel at the base of Bladder lies in which ligament-----> Dorsolateral
- Chlorpromazine most common toxic effect is-----> Dystonia
- After a road trafsc accident massive blood loss pt undergoes shock BP 85/40 what will activate now-----> CNS Ischemic response
- Infant presents with jaundice on exam diaper is yellow stained diagnose is-----> Biliary atresia
- Pt presented with Macroglossia, hyperglycemia, HTN is raised-----> Somatotroph
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- After using cholarmphenicol eye drops, pt develops echymosis and epistaxis Diagnose is-----> ITP
- Most radiosensitive tumor is -----> Lymph node Tumor
- Of women with neonates getting tetanus 19 had not taken tetanus toxoid and 40 whose babies didnt take tetanus 30 has taken two tetanus toxoid shots during pregnancy-----> 9
- Spermeogenesis take place in how many days-----> 64 days
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- How many catridges of 1.8mg of lidnocaïne with 1 100000 adrenaline to equal 0.4 dose of adrenaline-----> 2
- A paralysis of right limb and right lower face along with homonymous hemianopia lesion present in -----> Forebrain



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- Pt lying naked, at 25 °C, heat loss by-----> Radiation
- Is RNA virus-----> HDL
- Extradural hematoma artery involved-----> MMA
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- Data on 2 groups of diabetics was collected to look at the male and lady pattern of diabetes. Ladies had a mean random blood sugar level of 200+ \_ s0mg% and males have a mean RBS level of 205. The result reveals that-----> Women have a lower median and higher SD in their group
- Presence or absence of vomiting denoted by which type of data-----> Nominal data
- Child eat food at restaurants Child present with abdominal pain with dysentery, stool contains pus and rbc's causative agent is-----> Enterohemorrhagic E coli
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- Growth hormone needs to increase maximum effect-----> Insulin
- Pt presented after RTA, you are advised to make histology slide containing muscle fasciculus surrounded by connective tissue and the layer is termed as-----> Perimysium
- Systolic phase of cardiac cycle correspond to the component of ECG-----> QT/RT interval
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- MAO and TCA common effect and interaction is-----> Toxicity related with certain foods
- To avoid repeated blood transfusions in ESRD what should be given to pt-----> Subcutaneous Erythropoetin
- Second degree heart block would most likely result in-----> Atrial rate more than ventricular rate
- 5kg infant will have the blood volume-----> 420 ml
- Digoxin toxicity increase by -----> Quinidine
- JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Moderate hemorrhage can be diagnosed clinically as-----> Postural dizziness



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- Tracheostomy level in adult is at which level-----> C6
- Present with lethargy low Hb microcytic anemia, having brother with multiple transfusions, which test to do-----> Hb electrophoresis,  
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- During hysterectomy, what vessel has chance of damage at pelvic brim-----  
--> Ovarian artery
- Child presents with active bleed from umbilical stump, vitamin deficiency--  
-----> Vitamin K
- Plasma protein drugs related-----> Inactive until activated by liver
- Capnometer is used to measure-----> Measure sat of CO2
- Difference between PCT and DCT-----> PCT has Brush border  
➤ JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Goblet cells replaced by clara cells at which level-----> Tertminal bronchioles
- Lobes of breast through many terminal ducts open into-----> Lactiferous duct
- Who had colostomy was started on total parenteral nutrition; TPN included which problem will be-----> Hyperglycemia
- Internal jugular lymph node biopsy in neck region after that he developed numbness of ear lobe nerve got injured-----> Greater auricular nerve  
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- Hb accepts proton from which amino acid, so that Hb can act as a buffer-----  
---> Histidine
- ----->
- A diagnosed as abdominal angina which part is spared-----> Descending colon
- A below hymen boil on Labia, group of lymph nodes involved-----> Medial group Horizontal superficial inguinal LN
- ----->
- Scrotal skin lymphatic drainage is by lymph node-----> Superficial inguinal
- What type of change will occur in body after taking 1.5 litres blood out-----  
-> Normocytic normochromic anemia



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- In a study, 40% woman have received HRT and 20% have not received HRT, best way to represent such study is-----> Pie chart
- In hydrocephalous which structure is most commonly blocked-----> Aqueduct of sylvius
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- A structure with ciliated and non. Ciliated epithelium having three layers of muscles & tubular glands is-----> Fallopian tube
- During intrauterine life testosterone secretion is stimulated by-----> Placenta! HCG
- Stradsed cuboidal epithelium is present in -----> Lining duct of
- The end product of carbohydrate digesion is -----> Glucose
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- A young male had an RTA which resulted in a femur fracture. He died S days later autopsy showed cerebral petechiae. Dx is-----> Fat embolism
- A person is sitting with eyes closed which wave will appear on EEG-----> Alpha wave
- Dead space remained unchanged in-----> Shallow breathing
- Calculation of embryonic age if Imp is 15.112020 and today is 15.2.2021-----> 10 weeks
- Child with frontal and occipital bossing due to premature closure of which suture-----> Sagittal
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- Child previously having TB comes to you with the complain of fever and cough along with noisy breathing and difficulty in swallowing, now diagnosed as retropharyngeal Abscess, which structure it will invade first-----> Prevertebral fascia
- In Grade 4 cervical CA. Which lymph nodes enlarged-----> Internal Iliac
- TCA analgesic effect in how much time-----> 1 week
- Neurotransmitter of autonomic ganglia-----> Acetylcholine
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- Squamous cell CA diagnosed in a person who came from Dubai and presented with painless hematuria likely organisms associated with disease is-----> Schistosoma hemobatum
- Pt known case of mitral stenosis is having irregularly irregular pulse Most common Ending on JVP-----> Absent a wave
- Accessory right hepatic artery originates from -----> SMA
- Artery blocked by embolus, occluding half, men, which factor will increase 16 times-----> Resistance
- Alcoholic mother with a baby with facial hypoplasia where does the defect lie embryonically-----> First arch
- Most common inherited thrombotic disorder is due to-----> Factor V laiden
- Least dilatable part of the urethra is-----> Membranous part
- A back pain radiating to thigh Sciatic nerve compressed root value is-----> L4.5
- Child present with lump on forehead Mass excised from forehead microscope shows anastomosis of vessels and single layer of endothelium it is most likely-----> Hemangioma
- Hormonal profile of postmenopausal women shows-----> Increased FSH, LH
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- Clara cells are present in-----> Terminal bronchioles
- A study conducted to on rates on antibiotics of same effect produced by different pharmaceutical company and rate of different drugs are 1.4 1.7 2.0 3.5 8.4 etc which measure of central tendency will be used-----> Weighted mean
- Women with poor dietary habits and sedentary life style having fracture of femur neck most suitable cause is-----> Post menopausal low estrogen
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- Male presented with hx of fever, significant weight loss, painful micturition, hematuria and flank mass, his Hb is 18 what could be the possible pathology associated with his condition-----> Renal cell carcinoma
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- Peripheral chemoreceptors are stimulated by-----> Decrease O<sub>2</sub>
- Patient got injured in RTA with femur fractured most probably he will have-----> V/Q mismatch
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- Which is cause of cervical dysplasia-----> IUCD
- Nucleus pulposus will be seen herniating at which segment-----> T10.T12
- Aphasia is due to lesion in which lobe-----> Frontal
  - JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- AV nodal delay help in which -----> Ventricle filling
- Statistically significant p value-----> <0.05
- Pt brought to ER unconscious there is breathing problem empty bottle of aspirin found eliminate aspirin from body-----> Bicarbonate administration
- A pregnant lady has mitral stenosis to prevent atrial fibrillation treatment is-----> Heparin IV
- Septic shock by which cytokine-----> TNF
  - JOIN FCPSWORLD ONLINE CLASSES & CLEAR EXAM IN 1<sup>ST</sup> ATTEMPT
- Dopamine receptor characteristic feature-----> D<sub>1</sub> act via adenylate cyclase
- Regarding pharmacokinetics true is-----> Increased toxicity of methotrexate with aspirin
- Drugs given in SVT is-----> Digoxin
- A Man smoke 20 packs per month work in factory he develops lung cancer which carcinogen in Cigarette cause lung cancer-----> Hydrocarbons
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- Lady presents with hypertension and increasing weight. Features would be most suggestive of Cushing's syndrome rather than simple obesity-----> Abdominal striae
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- Pt present with fatigue, Pallor and generalized body weakness and diagnosed as iron deficiency anemia, blood picture will show-----> Low MCV, low MCH, low MCHC
- Women had hysterectomy, lower segment pfannenstiel incision was given, there was serosanguinous discharge after 3 days, what is most likely cause-- -----> Wound dehiscence
- Turner syndrome characteristic feature-----> Streak ovaries

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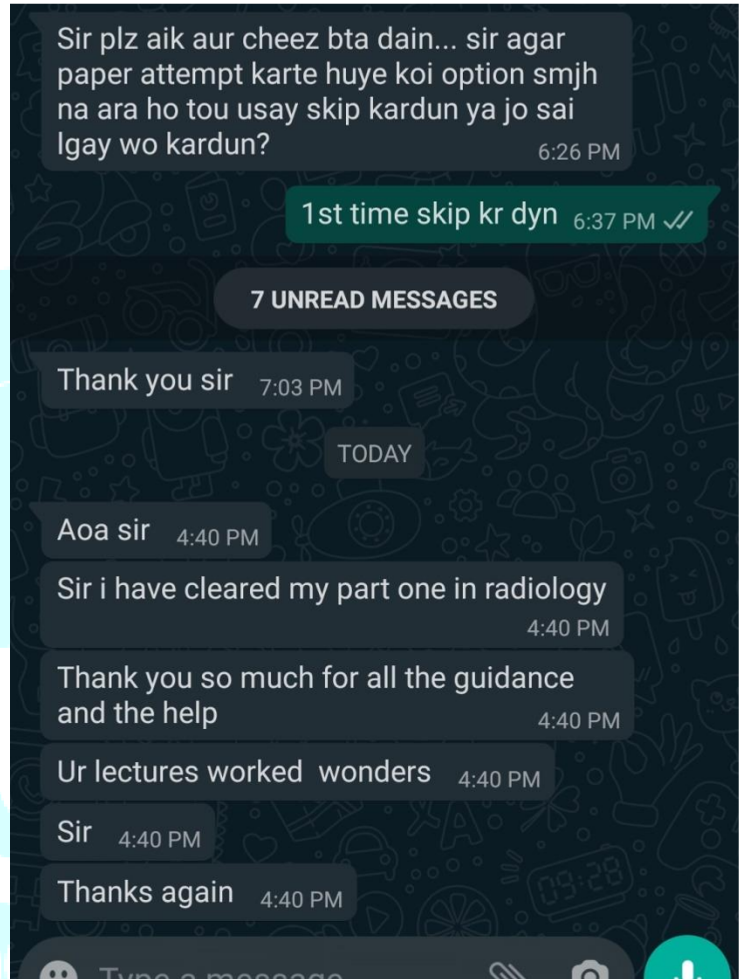
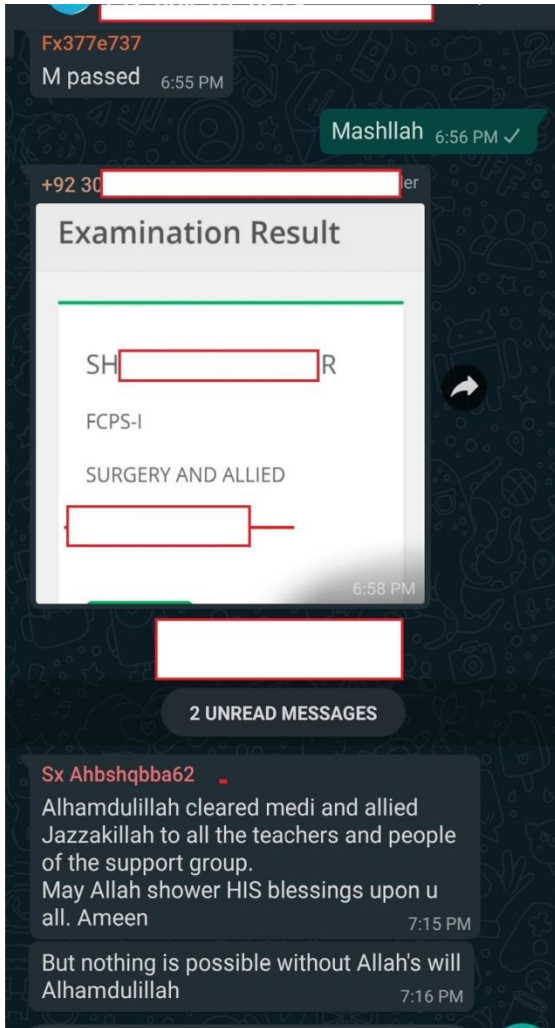


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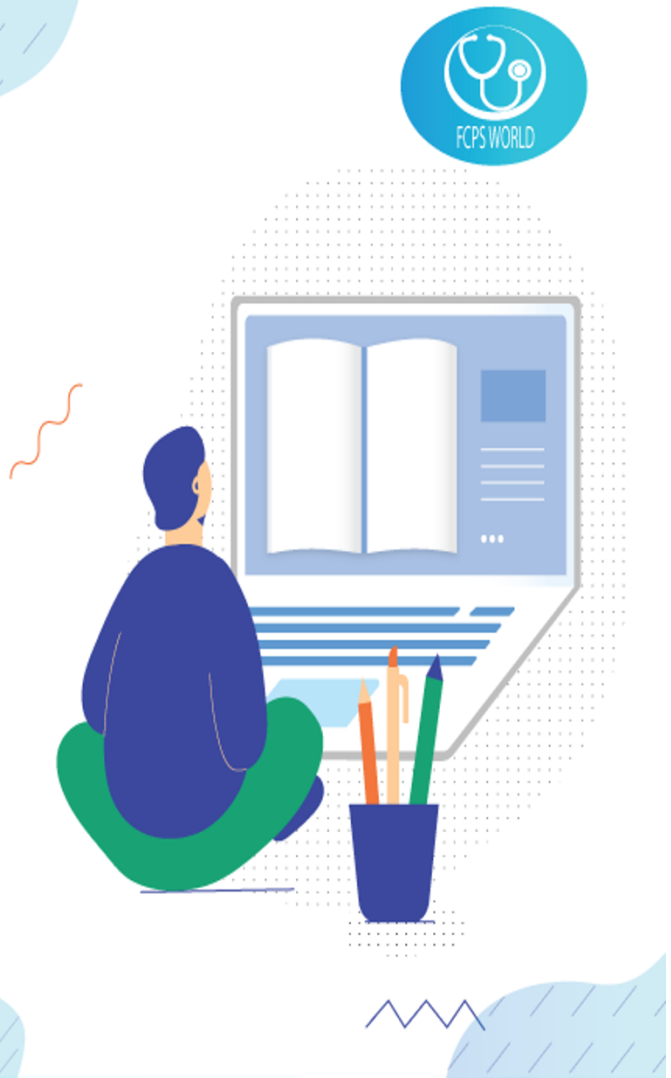
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1. MCQs should be covered in retrograde fashion
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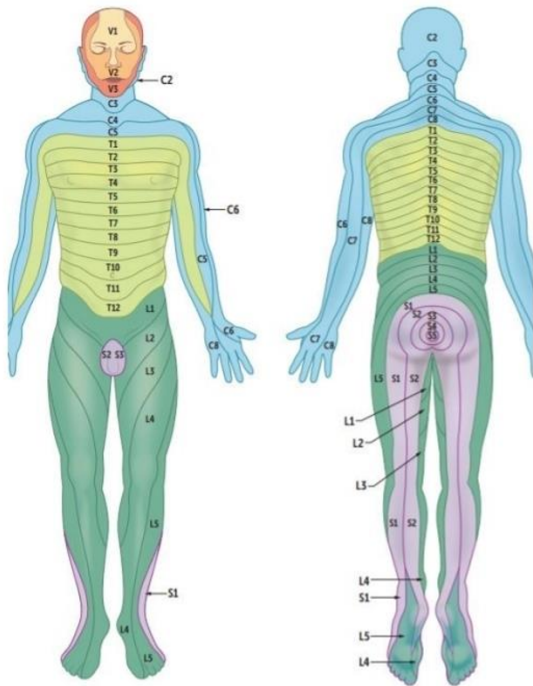


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- Superficial fascia of the scalp is mixture of → Loose areolar and adipose tissue
- The axillary sheath is a continuation of → Prevertebral fascia
- Thyroid gland moves with swallowing because it is enclosed in → Pretracheal fascia
- Trauma to one kidney without the perforation of Gerota fascia, the blood goes to → Inferiorly to the pelvis
- True regarding the posterior triangle of neck is → Roof formed by investing layer of deep cervical fascia

**DERMATOMES**



C2	Posterior half of skull
C3	High turtleneck shirt Diaphragm and gallbladder pain referred to the right shoulder via phrenic nerve ✓ C3, 4, 5 keeps the diaphragm alive
C4	Low-collar shirt
C6	Includes thumbs ✓ Thumbs up sign on left hand looks like
T4	✓ At the nipple ✓ T4 at the teat pore
T7	✓ At the xiphoid process 7 letters in xiphoid
T10	✓ At the umbilicus (belly button) Point of referred pain in early appendicitis
L1	✓ At the Inguinal Ligament
L4	✓ Includes the kneecaps Down on ALL 4's
S2, S3, S4	✓ Sensation of penile and anal zones S2, 3, 4 keep the penis off the floor

GREAT TOE	L4
LITTLE TOE	S1
KNEE	L4
NIPPLE	T4
UMBILICUS	T10
RING AND LITTLE FINGER	C8 RING, T1 LITTLE
THUMB	C6

anal area dermatome	s3-4
dermatome of lateral wrist	c6
dermatomy of thumb	c6

knee dermatome	l4
lower end of clavicle dermatome	c3-4
pain in calf and medial malleolus dermatome	l4

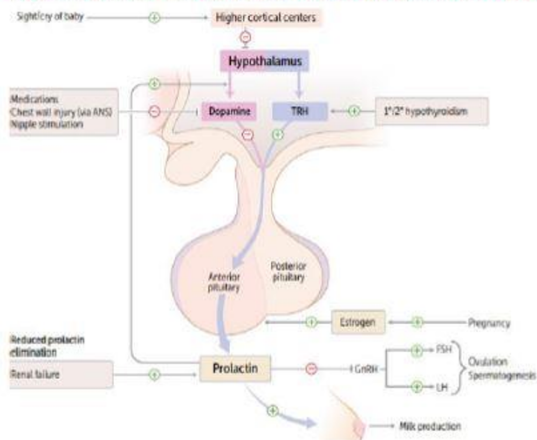




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**Prolectin**

1. Stimulates milk production in breast; inhibits ovulation in females and spermatogenesis in males by inhibiting **GnRH** synthesis and release (thus **LH, FSH release**).
  - Hypothalamus -> Decr GnRH secretion -> Decr FSH/LH -> Decr estradiol in females, Decr testosterone in males
  - Alveolar Cells of Breast Ducts -> Milk production and release -> Lactation
  - Prolectin release dopamine which inhibits prolectin
2. Release by sucking, voice of baby
3. Prolectin secretion from anterior pituitary is tonically inhibited by **dopamine** Prolectin.



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**PAST PAPERS**

Potent stimulus for prolectin release is?	Suckling reflex of baby
A 9-month pregnant presents with complaints of lactation (milky discharge). This is likely due to	Prolactin
Secretion of milk in mammary gland is due to	Prolactin
During lactation, ovulation is inhibited because of inhibition of GnRH by?	Prolactin
hormone of the anterior pituitary is under direct inhibitory control of hypothalamus?	Prolactin
During lactation, ovulation is inhibited because of inhibition of GnRH hv?	Prolactin



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## ENDOCARDITIS

- Nonbacterial endocarditis is seen in → Neoplasms, hypercuaquable state
- Most common cause of death in rheumatic fever → Myocarditis
- Commonly use Tri-cuspaed valvue
- common in IV-drug users
- Libman-Sack Endocarditis occurs in → SLE
- DOC is benzethins pencilline if allergic give genta+vanco
- Correct infective endocarditis sequence  
Damage valve, Thrombus, Bacteremia, Perforation (VT-BP)

**Bacterial endocarditis** Acute—*S aureus* (high virulence). Large vegetations on previously normal valves. Rapid onset.  
Subacute—viridans streptococci (low virulence). Smaller vegetations on congenitally abnormal or diseased valves. Sequela of dental procedures. Gradual onset.

Tricuspid valve endocarditis is associated with IV drug use (don't "tri" drugs). Associated with *S aureus*, *Pseudomonas*, and *Candida*.  
*S bovis (gallolyticus)* is present in colon cancer, *S epidermidis* on prosthetic valves.

## PAST PAPERS

Non thrombotic bacterial endocarditis is frequently associated with?	Terminal neoplasm
A known case of rheumatic mitrai stenosis developed fever, lassitude body ache after tooth extraction. O/E splinter haemorrhages and splenomegaly was noted Subacute endocarditis is suspected. Most likely organism on blood culture would be?	Strep viridans
Most common heart valve affected in diseases is	Tricuspid
Female pt. has valvular heart disease, such pt. are at risk of developing infective endocarditis, which organism is commonly responsible	streptococcus viridians
On Examination there are skin spots and nail bed hemorrhages on both hands & a Grade-4 Diastolic Murmur, past history is unremarkable. Patient is most likely suffering from	Infective Endocarditis
Developed fever, lassitude body ache after tooth extraction. Most likely organism on blood culture would be	Strep viridians
Infective endocarditis Patient is allergic to penicillin give medication	Vancomycin + gentamicin
School teacher who after death was diagnosed as a case of endocarditis and lymphocytic infiltration of cardiac tissues	Coxsackie virus



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True about CSF	Slightly acidic than plasma
----------------	-----------------------------

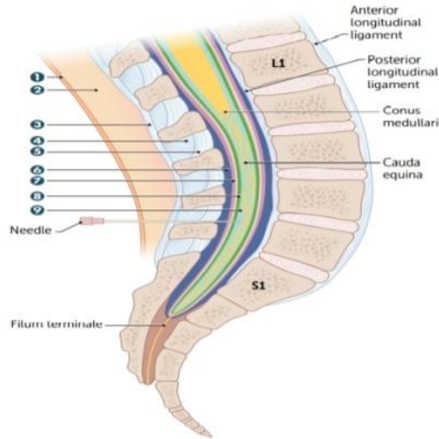
**LUMBER PUNCTURE**

In adults, spinal cord ends at lower border of L1–L2 vertebrae. Subarachnoid space (which contains the CSF) extends to lower border of S2 vertebra. Lumbar puncture is usually performed between L3–L4 or L4–L5 (level of cauda equina).

Goal of lumbar puncture is to obtain sample of CSF without damaging spinal cord. To **keep** the cord **alive**, keep the spinal needle between **L3 and L5**.

Needle passes through:

- 1 skin
- 2 fascia and fat
- 3 supraspinous ligament
- 4 interspinous ligament
- 5 ligamentum flavum
- 6 epidural space (epidural anaesthesia needle stops here)
- 7 dura mater
- 8 arachnoid mater
- 9 subarachnoid space (CSF collection occurs here)



Past papers

During LP after crossing flavum at L3, L4 the needle touches which structure first	Epidural space
Ideal site for lumbar puncture is	Below L4
Regarding Epidural space extension	Foramen magnum to S2
Site of Epidural anaesthesia for patient undergoing Vaginal hysterectomy is	Sacral hiatus
Spinal cord is suspended in dura by	Denticulate ligament
Structure most likely pierced by needle during lumbar puncture is	Ligamentum flavum
Which of the following structure is pierced in paramedian approach	Ligamentum flavum
The most common site of spinal anaesthesia is?	Subarachnoid
Subarachnoid space ends at the level of	S2-S3
Cauda equina:	Anterior & posterior roots of spinal cord from L1 to L5

Note:

Herniation between L4-L5 affect which spinal segment?	Lumbar
Between L4 and L5 disc herniation, which spinal nerve will be affected	L5
Herniation between L4-L5 affect which spinal segment	L4

**Centers of Brain**

- Vomiting centre located in → Medulla
- Cough centre is present in → medulla
- Respiratory centre located in → Medulla oblongata

Past papers

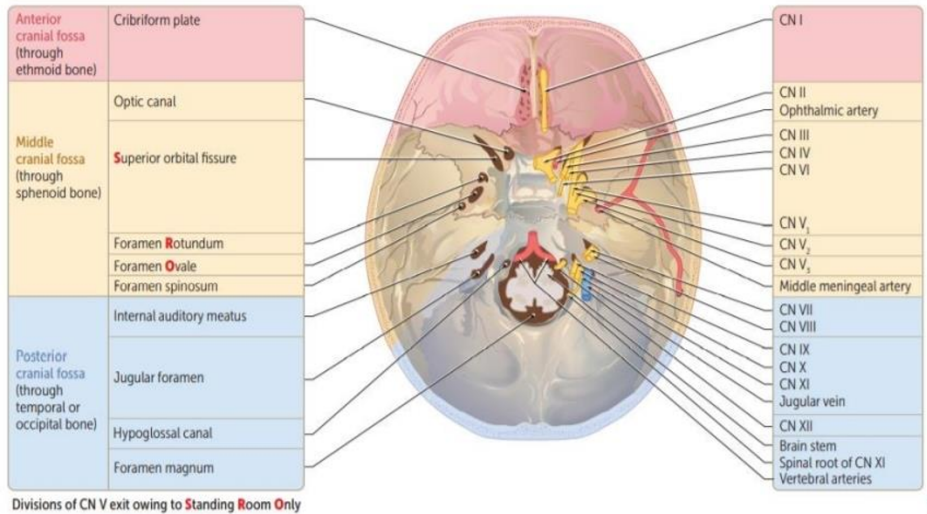


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## HEAD AND NECK

### Foramin of Skull



Anterior cranial Fossa (ethmoid bone)	Cribriform plate	CN 1
Middle Cranial Fossa (sphenoid bone)	Optic Canal	CN2 Ophthalmic artery, central retinal vein
	Superior orbital fissure	CN2,4,6 CN 5-V1
	Foramen rotundum	CN5-V2 → maxillary branch of trigeminal nerve
	Foramen ovale	CN5-V3 → mandibular branch of trigeminal nerve
Posterior Cranial Fossa (temporal or occipital bone)	Foramen spinosum	Middle meningeal artery
	Internal auditory meatus	CN7, 8
	Jugular foramen	CN 9,10,11 Jugular vein
	Hypoglossal canal	CN12
	Foramen magnum	Brain stem Spinal root of CN 12 Vertebral arteries

Pastpapers

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Accessory meningeal artery enters through which foremen----->Ovale
Accessory nerve passes through which foramen----->Jugular foramen
Foramen Rotundum damaged which structure will be severed----->Maxillary branch of trigeminal nerve.
Lesion below foramen Ovale causes paralysis of----->Lower part of face/Jaw
Mandibular branch of Trigeminal nerve passes through----->Foramen ovale
Middle meningeal artery in the----->Foramen Spinosum
Nerve in foramen Ovale damaged nerve supply of which part will be affected----->Lower face
Vagus nerve passes through----->jugular foramen



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**FSH & LH**

**LH**

**Luteinizing Hormone in males acts on = Leydig cells**

1. **Luteinizing** hormone acts on = **Leydig** cells to produce **Testosterone**
2. Function of LH before ovulation is=Convert most of the **granulosa** cells into **lutein** cells

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**FSH**

3. **FSH** acts on =**Sertoli** cells to do **Spermatogenesis** → Related to **Azoospermia**  
 [Ligh**T** is Fa**S**t]

- Development of seminiferous tubules
- Convert testosterone into estradiol
- Helps in maturation of follicles
- Inhibited by **INHIBIN**

Spermatogenesis is stimulated by	FSH and testosterone
LH act through:	cAMP
Hormone causing increase release of testosterone:	Luteinizing hormone
LH act on which testicular cells mostly	Leydig cells

Function of sertoli cells	help in spermiogenesis
A tall man with normal external genitalia married but no kids. Semen analysis showed azospermia. Most likely cause may be in	Sertoli cell
Sertoli cells produce	MIF (Mullerian inhibitory factor)
Married man with azospermia. Investigation of choice is	Serum FSH + LH

Function and development of seminiferous tubule requires=FSH and androgen  
 Testosterone converted to estradiol by which hormone= FSH  
 Conversion of testosterone to 17-beta estradiol in granulosa cells occurs by the influence of= FSH

**Before Ovulation maturation of follicles occur by action of FSH**

Maturation of follicles

Hormone responsible is FSH mainly and LH partly.

**GnRH from hypothalamus release FSH and LH by pituitary**

Which hormone stimulates release of FSH and LH	GnRH
During lactation, amenorrhea occurs due to	Inhibition of GnRH

**The Sertoli cells also secrete inhibin Which stop FSH secretion**

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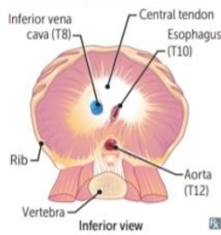
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# Thorax

## Diaphragm

### Diaphragm structures



Structures perforating diaphragm:

- At T8: IVC, right phrenic nerve
- At T10: esophagus, vagus (CN 10; 2 trunks)
- At T12: aorta (red), thoracic duct (white), azygos vein (blue) ("At T-1-2 it's the red, white, and blue")

Diaphragm is innervated by C3, 4, and 5 (phrenic nerve). Pain from diaphragm irritation (eg, air, blood, or pus in peritoneal cavity) can be referred to shoulder (C5) and trapezius ridge (C3, 4).

Number of letters = T level:

- T8: vena cava (IVC)
- T10: (O)esophagus
- T12: aortic hiatus

I ate (8) ten eggs at twelve.

C3, 4, 5 keeps the diaphragm alive.

Other bifurcations:

- The Common Carotid bifurcates at C4.
- The Trachea bifurcates at T4.
- The abdominal aorta bifurcates at L4.

## ESOPHAGUS [All are pastpapers]

Oesophagus starts at level of:	Cricoid cartilage
Esophagous narrowest at:	Cricopharyngus
Esophagus constricted at:	Where crossed by arch of aorta

## Breast [All are pastpapers]

Regarding breast:	15-20 lactiferous ducts
In a female major breast duct terminate into terminal ducts from terminal ducts it forms:	Lactiferous sinus
Terminal duct in breast form:	Lobule
Breast lies on:	Pect major

## LYMPHATICS OF BREAST [All are pastpapers]

Pectoral group of axillary nodes drain:	Major part of the breast
Breast CA involving lateral part of breast drain by:	Ant pectoral group
Upper lateral quadrant of breast is drained by which grp of nodes:	Anterior axillary lymph node
Lymph drainage from nipple of breast is to:	Anterior axillary nodes
Inner medial lower quadrant of breast doesnt drain into	Inf phrenic
Lymph node of inner breast drains into all except:	Inf phrenic nodes
Breast Medial / Lower compartment does not:	Inferior phrenic lymph nodes
Medial quadrant of breast drain into?	Internal thoracic nodes
Pectrol lymph nodes drain maximum:	Major part of breast
Lateral side of breast drains into:	Pectoral lymph nodes
Lateral quadrants of breast drain into which nodes?	Pectoral nodes.
Lymphatic drainage from nipple of breast is:	Ant axillary lymph node
Breast outer quadrant:	Pectoral (anterior) group





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**Graves Disease**

**Hyperthyroidism**

**Graves disease**



Most common cause of hyperthyroidism. Thyroid-stimulating immunoglobulin (IgG, can cause transient neonatal hyperthyroidism; type II hypersensitivity) stimulates TSH receptors on thyroid (hyperthyroidism, diffuse goiter), dermal fibroblasts (pretibial myxedema), and orbital fibroblasts (Graves orbitopathy). Activation of T-cells → lymphocytic infiltration of retroorbital space → ↑ cytokines (eg, TNF-α, IFN-γ) → ↑ fibroblast secretion of hydrophilic GAGs → ↑ osmotic muscle swelling, muscle inflammation, and adipocyte count → exophthalmos. Often presents during stress (eg, pregnancy). Associated with HLA-DR3 and HLA-B8.  
Histology: tall, crowded follicular epithelial cells; scalloped colloid.

**PAST PAPERS**

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A pt with exophthalmos and other hyperthyroid features and positive anti-thyroid antibodies is suggestive of	Graves disease
Exophthalmus is due to:	Inc TSI
Most common cause of hyperthyroidism:	Graves disease
Hyperthyroid, goiter and exophthalmos:	Graves disease
common cause of hyperthyroidism?	Grave's disease
What will increase in graves disease	t3
Graves ophthalmopathy:	Optic nerve compression

Vitamin D deficiency is associated with Ophthalmopathy in patients with Graves' hyperthyroidism

Key lympho, antibody

**Hypothyroidism**

**Hashimoto thyroiditis**

Also called chronic autoimmune thyroiditis. Most common cause of hypothyroidism in iodine-sufficient regions. Associated with HLA-DR3, ↑ risk of primary thyroid lymphoma (typically diffuse large B-cell lymphoma).  
Findings: moderately enlarged, **nontender** thyroid. May be preceded by transient hyperthyroid state ("Hashitoxicosis") due to follicular rupture and thyroid hormone release.  
Serology: ⊕ antithyroid peroxidase (antimicrosomal) and antithyroglobulin antibodies.  
Histology: Hürthle cells, lymphoid aggregates with germinal centers.  
Postpartum thyroiditis—mild, self-limited variant of Hashimoto thyroiditis arising < 1 year after delivery.

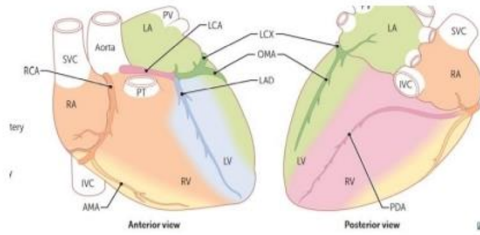
A 40-year known Hypothyroidism female was referred to endocrinologist for a mass in neck. FNAC shows increased lymphocytes and serology was adviseD.What is the most probable cause?	Hashimoto thyroiditis
Female with neck swelling hypothyroid dr orders some immunologic tests?	Hashimoto thyroiditis
Female swelling infront of neck. Hypothyroid Dr orders some immunological test. What is the diagnosis?	Hashimoto thyroiditis
Diagnosis for hashimotos	Antimicrosomal and anti-thyroglobulin

A 40-year known Hypothyroidism female was referred to endocrinologist for a mass in neck. FNAC shows increased lymphocytes and serology was advised. What is the most probable cause  
Hashimoto



**MI ECG LEADS**

INFARCT LOCATION	LEADS WITH ST-SEGMENT ELEVATIONS OR Q WAVES
Anteroseptal (LAD)	V <sub>1</sub> -V <sub>2</sub>
Anteroapical (distal LAD)	V <sub>3</sub> -V <sub>4</sub>
Anterolateral (LAD or LCX)	V <sub>5</sub> -V <sub>6</sub>
Lateral (LCX)	I, aVL
Inferior (RCA)	II, III, aVF
Posterior (PDA)	V <sub>7</sub> -V <sub>9</sub> , ST depression in V <sub>1</sub> -V <sub>3</sub> with tall R waves



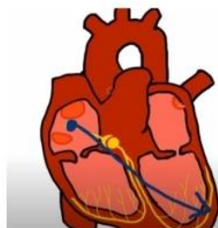
**PAST PAPERS**

Inferior wall MI occurs due to blockage of	Right coronary artery
Post 1/3 of interventricular septum is damaged due to MI. Artery involved is?	Right coronary artery
Inferior wall MI occurs due to blockage of which artery?	Right marginal
MI of posterolateral surface of heart. Vessel involved is	Left circumflex
ECG changes in lead V4 indicated involvement of which vessel	LAD
Infarction of apex of heart, vessel thrombosed will be	LAD
The circumflex artery supplies	Left atrium and left ventricle
Infarct in the lower segment of heart	LCX
ECG shows changes in leads II, III and avF. Diagnosis	Inferior wall MI
ST elevation in lead II, which artery involved	RCA

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Patient presented to ER with crushing chest pain for last 1 hour ON ECG there is ST segment elevation in lead II, III & AvF what's the diagnosis	Inferior wall MI
ST segment elevation in lead II which artery effected	right main coronary
A man presents to ER with ST depressions in II, III and avF and was advised angiography. The Most likely culprit artery is	RCA
Artery involved in inferior wall MI	Right marginal
Patient having ST elevation in Lead 2 and complete heart block vessel involved	RCA

NOTE: AXIS deviation



Left axis deviation on ECG is seen in	Rt ventricular myocardial damage
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