023/2018

Question Booklet Alpha Code

A	

Question Booklet Serial Number

Total Number of Questions: 100	Time: 75 Minutes
Maximum Marks: 100	

INSTRUCTIONS TO CANDIDATES

- 1. The question paper will be given in the form of a Question Booklet. There will be four versions of question booklets with question booklet alpha code viz. **A**, **B**, **C** & **D**.
- 2. The Question Booklet Alpha Code will be printed on the top left margin of the facing sheet of the question booklet.
- 3. The Question Booklet Alpha Code allotted to you will be noted in your seating position in the Examination Hall.
- 4. If you get a question booklet where the alpha code does not match to the allotted alpha code in the seating position, please draw the attention of the Invigilator IMMEDIATELY.
- 5. The Question Booklet Serial Number is printed on the top right margin of the facing sheet. If your question booklet is un-numbered, please get it replaced by new question booklet with same alpha code.
- 6. The question booklet will be sealed at the middle of the right margin. Candidate should not open the question booklet, until the indication is given to start answering.
- 7. Immediately after the commencement of the examination, the candidate should check that the question booklet supplied to him contains all the 100 questions in serial order. The question booklet does not have unprinted or torn or missing pages and if so he/she should bring it to the notice of the Invigilator and get it replaced by a complete booklet with same alpha code. This is most important.
- 8. A blank sheet of paper is attached to the question booklet. This may be used for rough work.
- 9. Please read carefully all the instructions on the reverse of the Answer Sheet before marking your answers.
- 10. Each question is provided with four choices (A), (B), (C) and (D) having one correct answer. Choose the correct answer and darken the bubble corresponding to the question number using Blue or Black Ball Point Pen in the OMR Answer Sheet.
- 11. Each correct answer carries 1 mark and for each wrong answer 1/3 mark will be deducted. No negative mark for unattended questions.
- 12. No candidate will be allowed to leave the examination hall till the end of the session and without handing over his/her Answer Sheet to the Invigilator. Candidates should ensure that the Invigilator has verified all the entries in the Register Number Coding Sheet and that the Invigilator has affixed his/her signature in the space provided.
- 13. Strict compliance of instructions is essential. Any malpractice or attempt to commit any kind of malpractice in the Examination will result in the disqualification of the candidate.



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(A)	Ireland	(B)	Canada		(C)	Australia	(D)	France
	of India	ın const	itution prol	nibits	untou	chability and r	nakes it	a punishab
offei	nce.							
(A)	Article 19	(B)	Article 16		(C)	Article 21	(D)	Article 17
The	second Chairm	an of th	e Human F	Rights	Comn	nission :		
(A)	Justice Renga	nath Mi	shra	(B)	Justi	ce A.S. Anand		
(C)	Justice Venka	tachaila	h	(D)	ΗL	Dattu		
	was app	ointed t	to study an	d repo	ort ab	out centre state	e relatio	ns.
(A)	Rajendra Bab	u comm	ission	(B)	Shah	commission		
(C)	Nanavathi co	mmissic	n	(D)	Sark	aria commissic	on	
'Maş	gdalanamariam	' is the	work of :					
(A)	Vallathol			(B)	Ullo	or		
(C)	Ponkunnam \	Varkey		(D)	Kesa	ıvdev		
Who	o founded Coch	in Musl	im Educati	on Soc	ciety ?			
(A)	P M Aattakoy	a Than	gal	(B)	Moio	du Moulavi		
(C)	T K Muhamm	ned		(D)	Muh	nammed Abdu	Rahima	n
Whi	ch is the first b	ook prir	ited at Man	nanar	n pres	s by Kuriakose	Elias C	havara ?
(A)	Jnanapiyoosh	am		(B)	Karr	nala Kusuman	ı	
(C)	Atmanuthapa	am		(D)	Nala	nagamangal		
	vas always been niliation of their		•					•
(A)	Jawaharlal N	ehru		(B)	Raje	ndra Prasad		
(C)	Gandhiji			(D)	S Ra	dhakrishnan		
Wife	e of Kozhipura	th Madl	nava Meno	n is		<u>.</u>		
(A)	Arya pallam			(B)	Sara	swathyamma		
(C)	Kunjakkamm	2		(D)	Viitt	imalu Amma		

10.	A G	Velayudhan was	s kille	d in lathi-ch	arges	in cor	nnection with:		
	(A)	Paliyam Satyag	graha		(B)	Gurı	uvayoor Sathya	agraha	
	(C)	Vaikom Satyag	raha		(D)	Cha	nnar Agitation		
11.	Autł	nor of the book C	Onneka	alkodi Mala	yalika	1:			
	(A)	A K Gopalan			(B)	ЕМ	Sankaran Nan	nboothir	ipad
	(C)	Mannathu Pad	mana	bhan	(D)	G K	Pillai		
12.	Chat	tampi Swamikal	was l	born at :					
	(A)	Kannanmoola	(B)	Panmana		(C)	Varkala	(D)	Aruvippuram
13.	"Vic	hitravijayam" is	a drai	ma written l	эу:				
	(A)	C Kunjiraman			(B)	Thop	ppilbhasi		
	(C)	Kumaranasan			(D)	SL	Puram Sadanaı	ndan	
14.	Early	y name of Subha	ınanda	a Guru is _					
	(A)	Kunjan Pillai	(B)	Raman Pil	llai	(C)	Nanu	(D)	Pappankutty
15.	GS	Γ (Goods and Sei	rvice [Γax) was int	roduc	ed at	first in :		
	(A)	France	(B)	India		(C)	America	(D)	China
16.	The	present Indian Pr	reside	nt is :					
	(A)	Venkaia Naidu			(B)	Gop	al Krishna Gan	dhi	
	(C)	Meera Kumar			(D)	Ram	nath Kovind		
17.	Misi	le woman of Indi	ia :						
	(A)	Tessy Thomas			(B)	ТК	Anuradha		
	(C)	Seetha S			(D)	V R	Lalithambika		
18.	The	story 'Vaarikuzh:	i' is w	ritten by :					
	(A)	K G George			(B)	Padı	marajan		
	(C)	P A Baker			(D)	M T	Vasudevan Na	nir	
19.	"The	e Ministry of Utr	nost F	Happiness"	writte	n by_			
	(A)	Arundhathi Ro	y		(B)	Jaya	sree Mishra		
	(C)	Madhavikutty			(D)	Sasi	Tharoor		

20.	Pakis	sthan's Mother T	n's Mother Teresa :									
	(A)	Malala Yoosaf	(B)	Ruth Pfau		(C)	Benasir Bhuto	(D)	Sanmir			
21.	Risk	of male breast ca	rcino	ma in klinef	elters	synd	rome is	_time	S.			
	(A)	30	(B)	20		(C)	60	(D)	50			
			-	7. 67								
22.		oid obesity define			han			<i>(</i> -)				
	(A)	30	(B)	35		(C)	40	(D)	32			
23.	Bier's	s block is :										
	(A)	Axillary block										
	(B)	Transverse abdo	minis	plane block								
	(C)	Intravenous reg		-								
	(D)	Field block										
	` /											
24.	Total	l energy requiren	nent o	f stable pation	ent w	ith no	ormal need is app	oroxim	ately:			
	(A)	30 - 40 Kcal/kg			(B)	35 -	50 Kcal/kg					
	(C)	50 - 60 Kcal/kg			(D)	20 -	30 Kcal/kg					
	T 4 71		1	(1)			. 1					
25.		t is the % of incid			ia aft							
	(A)	5	(B)	4		(C)	11	(D)	15			
26.	Orde	er of return of fur	nction	of the intest	ine a	fter al	odominal surgery	7:				
	(A)	Stomach/large 1										
	(B)	Small bowel/lar										
	(C)		•									
	(D)	Stomach/small		-								
27.	`	gmans fracture is										
	(A)	Odantoid fractu										
	(B)	Occipital condy										
	(C)	Traumatic spone	5		on C	23						
	(D)	Atlantoaxial ins	tabilit	У								
28.	Most	t common site of	fractu	re of mandil	ble :							
	(A)	Angle of mandi			(B)	Necl	c of the condyle					
	(C)	Region of the ca		tooth	(D)		physis menti					
	` '	C			. ,	•						

29.	Retro	operitoneal injur	y alwa	ays to be ex	xplore	d in _	·			
	(A)	Zone 1	(B)	Zone 2		(C)	Zone 3	(D)	All zones	
30.	Corr	ect statement abo	out FA	AST is all ex	cept :					
	(A)	it detects free fl	uid in	the abdom	en					
	(B)	it will not relial	oly det	tect less tha	n 100 :	ml of	free fluid			
	(C)	it detects free fl	uid in	the pericar	dium					
	(D)	it will identify i	njury	to hollow v	riscus					
31.	_	gnostic peritoneal d more than	_		ered to	be p	ositive when ca	nnula is	s aspirated for	
	(A)	15 ml	(B)	10 ml		(C)	20 ml	(D)	30 ml	
32.	The	correct statement	t abou	t cooling of	f the b	urn w	ound is correct	t except	:	
	(A)	will not provide	e anal	gesia	(B)	it slo	ows the delayed	d microv	ascular dama	ge
	(C)	hypothermia m	ust be	avoided	(D)	effec	ctive upto 1 hou	ır after	burn injury	
33.	Corr	ect statement abo	out rol	le of hyperl	oaric o	xyger	ı in necrotizing	fascitis	is:	
	(A)	bactericidal		<i>J</i> 1	(B)		rove neutrophil			
	(C)	promote wound	d heal	ing	(D)	all o	f the above			
34.	Corr	ect statement abo	out fro	ost bite exce	ept:					
	(A)	it is a cold burn			(B)	the t	issue feels hard	l		
	(C)	cannot be inde	nted		(D)	no f	reezing of tissu	e		
35.	Spur	ling test is done	for:							
	-	cervical nerve r		mpression	(B)	lum	bar disc prolap	se		
	(C)	kyphosis		-	(D)	thor	acic disc hernia	ation		
36.	The	muscles in rotato	or cuff	are all exce	ept :					
	(A)	supraspinatus	(B)	infraspina	-	(C)	subscapularis	(D)	teres major	
37.	Turf	toe occurs in :								
	(A)	Golf	(B)	Tennis		(C)	Rowing	(D)	Football	
38.	Com	nmonst malignan	cy tha	t metastasis	se to tl	he spi	ne :			
	(A)	Lung	(B)	Breast		(C)	Prostate	(D)	Thyroid	
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39.	% of	metastasis in cu	taneou	ıs squamoı	ıs cell	carcin	oma :		
	(A)	3	(B)	8		(C)	10	(D)	2
40.	Tota	l C S F volume is	:						
	(A)	150 ml	(B)	125 ml		(C)	200 ml	(D)	500 ml
41.	The	common primary	tumo	or of brain	is:				
	(A)	Pituitary adeno	ma		(B)	Schv	vannoma		
	(C)	Glioma			(D)	none	9		
42.	Com	nmon tumor prod	ucing	metastasis	to bra	in :			
	(A)	Melanoma			(B)	Lung	5		
	(C)	Breast			(D)	Unk	nown primar	У	
43.	Mos	t common cancer	prod	ucing left v	ocal co	ord pa	lsy:		
	(A)	Thyroid			(B)	Lung	5		
	(C)	Nasopharynx			(D)	Oeso	phagus		
44.	Font	aine sign seen in	:						
		cystic hygroma			(B)	chen	nodectoma		
	(C)		h nod	le	(D)	bran	chial cyst		
45.	Muc	osa of the oral ca	avity (contain app	proxim	ately_	mi	nor saliva	ry gland.
	(A)	350	(B)	450	L	(C)	250	(D)	•
46.	Wro	ng statement abo	ut rar	nula :					
	(A)	retention cyst			(B)	trans	slucent		
	(C)	can resolve spor	ntaneo	ously	(D)	none	9		
47.	Nerv	ve not injured du	ring s	ubmandibu	ılar gla	ınd ex	cision :		
	(A)	lingual			(B)	hypo	oglossal		
	(C)	marginal mand	ibular		(D)	vagu	IS		
48.	Kutt	ner tumor is :							
	(A)	parotid tumor							
	(B)	lymph node in	papill	ary carcino	ma				
	(C)	non inflammato	ry en	largement (of saliv	ary g	land		
	(D)	chronic sclerosii	•	U					
	•		-				-		

49 .	The	hormone tri-iod	lothyro	nine extra	cted in	:			
	(A)	1920	(B)	1915		(C)	1917	(D)	1930
50.	Rock	kall scoring syste	em is to	assess reb	oleeding	χ:			
	(A)	Upper gastroi	ntestina	al	(B)	Low	er gastroin	itestinal	
	(C)	Portal hyperte	nsion		(D)	Hae	morrhoid b	oleeding	
51.	Seve	ere hyponatremi	a is de	fined as (N	Na+) les	s thai	n	meq/L.	
	(A)	122	(B)	120		(C)	130	(D)	100
52.	Max	imal rate of sod	lium co	orrection sl	hould n	ot ex	ceed	meq/I	٠.
	(A)	0.35	(B)	0.25		(C)	0.3	(D)	0.4
53.	Not	a feature of tum	or lysis	s syndrom	e :				
	(A)	hyperkalemia			(B)	hype	eruricemia		
	(C)	hypercalcemia	1		(D)	hyp	erphosphat	temia	
54.	Ade	quate suture wo	ound le	ngth ratio	to prev	ent in	ncisional he	rnia is :	
	(A)	3:1	(B)	2:1		(C)	5:1	(D)	4:1
55.	Not	a feature of ma	lignant	lymphnoc	de in ca	rcinoı	ma thyroid	:	
	(A)	microcalcificat	tion		(B)	irreg	gular shape	2	
	(C)	hyper vascular	rity of 1	node	(D)	cysti	ic change		
56.	Com	nmonst malignai	nt tumo	or of saliva	ıry glan	d is:			
	(A)	pleomorphic a	denom	ıa	(B)	ader	noid cystic	carcinoma	
	(C)	mucoepidermo	oid can	cer	(D)	seco	ndaries		
57.	Wro	ng statement ab	out de	ep vein thi	rombosi	s in s	urgical pat	ients :	
	(A)	risk more over	age of	40					
	(B)	risk more with	n malig	nant disea	se				
	(C)	subcutaneous	low mo	olecular he	parin is	more	e effective		
	(D)	early mobiliza	tion en	courages I	OVT				
58.	The	weight of norm	nal adre	enal gland	is app	roxim	ately	gm.	
	(A)	5	(B)	4		(C)	3	(D)	2

59.	Wro	ng statement abo	ut sca	ilene node :					
	(A)	situated in scale	ene tri	angle	(B)	sam	e as virchow no	ode	
	(C)	involved in puli	nonai	ry disease	(D)	part	of chain of dee	p medi	astinal node
60.	Ingu	inal ligament is t	he lo	wer free ed	ge of .		muscle.		
	(A)	internal oblique			(B)	tran	sverse abdomin	isa	
	(C)	external oblique	?		(D)	all o	f the above		
61.	The	structures coursii	ng thr	ough the p	reperi	toneal	space are the f	ollowin	ig except :
	(A)	medial umbilica	l liga	ment	(B)	med	lian umbilical li	gament	
	(C)	falciform ligame	ent		(D)	none	e		
62.	The	risk of developin	g desi	moid tumor	in F	A P is	fold	l .	
	(A)	1000	(B)	650		(C)	2000	(D)	100
63.	Mos	t common primai	y ma	lignancy of	the m	esente	ery is :		
	(A)	GIST	(B)	liposarcor	ma	(C)	desmoid tumo	or (D)	neurofibroma
64.	How	ship-Romberg si	gn see	en in :					
	(A)	obturator herni	a		(B)	lum	bar hernia		
	(C)	sciatic hernia			(D)	incis	sinal hernia		
65.	Clay	brook sign seen	in :						
	(A)	acute appendici	tis		(B)	acut	e cholecystitis		
	(C)	acute pancreati	tis		(D)	rupt	ured abdomina	l viscer	a
66.	Forr	est classification i	s usec	d to assess :					
	(A)	risk of perforation	on in	peptic ulcei	r disea	ise			
	(B)	need of blood tr	ansfu	sion in blee	ding p	peptic	ulcer		
	(C)	risk of rebleedir	ıg in p	peptic ulcer	diseas	se			
	(D)	all of the above							
67.	Wate	er meion stomach	is:						
	(A)	complication of	carci	noma stoma	ach				
	(B)	complication of	chror	nic D U					
	(C)	gastric dialatati	on						
	(D)	vascular ectasia	:						

	(A)	transverse colon	(B)	sigmoid
	(C)	cecum	(D)	rectum
69.	Sudo	den collapse occurs in patients with	ı blee	ding from:
	(A)	neoplasia of the colon		
	(B)	diverticular disease of the colon		
	(C)	angidysplasia		
	(D)	colitis		
70.	Corr	ect statement about meckels divert	iculu	m is all except :
	(A)	true diverticulam		
	(B)	remnant of omphalomesenteric d	uct	
	(C)	bleeding common from ulcerative	lesio	n on the ileal wall opposite diverticulam
	(D)	segmental resection is not the treat	atmer	nt
71 .	Larg	est artery to stomach is:		
	(A)	left gastric	(B)	right gastric
	(C)	left gastroepiploic	(D)	right gastroepiploic
72.	Inco	rrect statement about stomach moi	rpholo	ogy:
	(A)	covered all around peritoneum		
	(B)	middle layer of the smooth muscl	e is o	nly complete muscle layer of the stomach wall
	(C)	peritoneum forms the outer seros	a of t	he stomach
	(D)	middle circular layer at pylorus fo	orms	sphincter
73.	Gast	ric acid secretion by the parietal ce	ll is re	egulated by all except :
	(A)	acetyle choline (B) gastrin		(C) somatostatin (D) histamin
74.	Ade	nolymphoma is :		
	(A)	hodgkins lymphoma	(B)	warthins tumor
	(C)	lymphoma of the stomach	(D)	none
75.	Mos	t common metabolic defect after ga	astrec	tomy:
	(A)	anaemia	(B)	impaired absorbtion of fat
	(C)	osteoporosis	(D)	osteomalacia

Angiodysplasia of large bowel common in :

68.

76.	Mos	t common site of	lympł	noma in G I T is :				
	(A)	stomach	(B)	small bowel	(C)	colon	(D)	duodenum
77.		l bile salt pool in						
	(A)	2-3 gm	(B)	4-8 gm	(C)	5-6 gm	(D)	8-9 gm
78.		nterohepatic circu ours.	lation	bile salts are red	circula	te about	tin	nes in every
	(A)	3	(B)	4	(C)	5	(D)	6
79.	Horn (A) (B) (C) (D)	mone not synthes gastric inhibitor gastrin releasing somatostatin neurotensin	y poly	peptide				
80.	Croh (A) (C)	nns disease involv rectum ascending colon	-	parts of the large (B) (D)	sign	-		
81.	Extra	a intestine manife	statio	n of crohns disea	se is a	ıll except :		
	(A)	iritis				1		
	(B)	peripheral arthr	ritis					
	(C)	phlebothrombos						
	(D)	none						
82.	Scro	fula is :						
	(A)	cervical tubercu	lous 1	vmphadenitis				
	(B)			on of tuberculos	is			
	(C)	fungal infection						
	(D)	candidiasis of or		vity				
83.	Dage	ion for dograma.	inai 4	ongo of companie	om o 11	horval is that are	ont.	
83.		son for decreased			sman	bower is that exc	ept:	
	(A)	rapid transit of			1 0011-			
	(B)	O		ll bowel epithelia				
	(C)	· ·		of small intestinal	conte	ents		
	(D)	high level of lg	1 in th	ne intestinal wall				

85. Most common extra abdominal source for metastatic neoplasm to small (A) breast (B) lung (C) malignant melanoma (D) thyroid 86. Riglers sign seen in: (A) pneumoperitoneum (B) haemoperitoneum (C) gall stone ileus (D) sigmoid volvulus 87. Most common extraluminal cause of small bowel obstruction: (A) hernia (B) adhesion (C) tumor of adjacent organ (D) volvulus 88. False statement about ulcerative colitis: (A) common in developed countries (B) there is no increased incidence among individuals who migrate risk areas (C) there is a seasonal variation (D) aetiology is unknown 89. False statement about carcinoma arising in ulcerative colitis: (A) poorly differentiated (B) highly aggressive (C) high risk of developing malignancy when disease confined to left	,	all of the above
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(C) high risk of developing malignancy when disease confined to lef		
(D) duration is one rick factor	ft si	ide of colon
(D) duration is one risk factor		
90. Marker for F A P is CHRPF which is detected by :		
(A) indirect laryngoscopy (B) indirect ophthalmoscop	y	
(C) direct laryngoscopy (D) colonoscopy		
91. Umbilical fissure of liver does not contain:		
(A) hepatic vein (B) left portal vein		
(C) hepatic artery (D) bile duct		

	(A)	portal vein form at the level of second lumbar vertebrae				
	(B)	1 cm diameter				
	(C)	runs along the left border of lesser omentum				
	(D)) runs posterior to the bile duct and hepatic artery				
93.	Neuroendocrine tumor less commonly metastasis to liver :					
	(A)	gastrinoma	(B)	glucognoma		
	(C)	somatostatinoma	(D)	insulinoma		
94.	Tumbling intestinal obstruction seen in :					
	(A)	internal herniation	(B)	malignancy of colon		
	(C)	gall stone ileus	(D)	pseudo obstruction of o	colon	ı
95.	Wrong statement about biliary leak after laparoscopic cholecystectomy:					
	(A)	managed by early repair				
	(B)	common cause is dislodgement of clips				
	(C)	commonly occurs within 1 week				
	(D)	bile staining of right side port is a	ı featı	ıre		
96.	Statement about acute acalculus cholecystitis is correct except:					
	(A)	more fulminant course				
	(B)	commonly progress to gangrene				
	(C)	frequently occurs in young patients				
	(D)	common in trauma and burns				
97.	Thyroid malignancy that cannot be diagnosed by FNAC:					
	(A)	papillary (B) medullary		(C) follicular	(D)	anaplastic
98.	Absolute indication for total gastrectomy :					
	(A)	carcinoma fundus of the stomach				
	(B)	gastric volvulus				
	(C)	gastric bezoars				
	(D)	bleeding gastric varices				
Α			13			023/20

92. Wrong statement about portal vein :

- **99.** Wrong statement about caecal volvulus :
 - (A) usually anticlockwise
 - (B) common in females
 - (C) ischemia is common
 - (D) palpable tympanic swelling in midline

100. Strawberry lesion of the rectosigmoid:

- (A) amoebic granuloma
- (B) gonococcal proctitis
- (C) infection with sprochaeta vincenti
- (D) rectal bilharziasis

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