M.B.B.S. 1st Prof.

(New Scheme w.e.f. 2019 admission onwards)
BF/2023/06

Anatomy - A

M.M.: 100 Time: 3 Hours(First30 Min. for MCQs)

Note: 1. <u>Use OMR Sheet to answer Multiple Choice Questions(MCQs).</u>

- 2. Attempt all questions. Illustrate your answers with suitable diagrams
- 3. NO SUPPLEMENTARY SHEET SHALL BE ALLOWED/PROVIDED
- 4. <u>The student must write Q.P. Code in the space provided on OMR Sheet and the Title page of the Answer Book.</u>

Q.1 MCQs (Attempt on OMR sheet)

[1x20]

- 1. A 3 year old child is admitted to the emergency department with a particularly severe attack of asthma. Which of the following is the most important factor in increasing the intrathoracic capacity in inspiration?
 - a. "Pump handle movement" of the ribs-thereby increasing anterior-posterior dimensions of the thorax
 - b. "Bucket handle movement" of the ribs- increasing the transverse diameter of the thorax
 - c. Straightening of the forward curvature of the thoracic spine, thereby increasing the vertical dimensions of the thoracic cavity
 - d. Descent of the diaphragm with protrusion of the abdominal wall thereby increasing vertical dimensions of the thoracic cavity
- 2. A 41 year old patient presents with a compliant of chronic nasal bleed. To control the severity of the nasal bleeding his physician decides to ligate the sphenoplatine artery. From which of the following arteries does the sphenopalatine artery arise?
 - a. External carotid artery

b. Facial artery

c. Maxillary artery

- d. Ophthalmic artery
- 3. A young lady was brought to the burns casualty with 60% bourns. You as a duty doctor observe that both her upper limbs and lower limbs are involved in the burn injuries. What will you do to give a continuous venous infusion of fluids to save the patient?
 - a. Try putting a cannula in the median cubital vein
 - b. Try putting a cannula in cephalic venin
 - c. Try putting a cannula in the external jugular vein
 - d. Try a venous cut open of the great saphenous vein
- 4. A 29 year old visited ENT OPD with the chief compliant of facial asymmetry, not able to close his left eye and inability to chew food properly from his left side. He had a history of fever 10 days back. On examination the side of the face is motionless, wrinkles absent, tears flowing out and saliva dribbling from the left angle of the mouth. On the basis of your knowledge of anatomy, what can be the diagnosis?
 - a. Injury to the facial nerve at stylomastoid foramen
 - b. Injury at facial colliculus

c. Supra-nuclear lesion of the facial nerve

- d. Injury to Pons
- 5. A patient has been severly injured in the back of the head during a mugging attempt and imaging studies reveal possible fracture of the skull along with the C1 (atlas) vertebra. The patient is also bleeding from the vertebral artery in this location and the attending surgeon will attempt to stop the bleeding by access through the suboccipital triangle. Which of the following muscles attaches from the transverse process of C1 to the occipital bone and forms the lateral border of the suboccipital triangle?
 - a. Obliquus capitis inferior

- b. Obliquus capitis superior
- c. Rectus capitis posterior major
- d. Rectus capitis posterior minor

6.	A 50 year old man came to the casualty complai throat and that it was causing pain and discomfort. the fish bone was impacted in the piriform fossa. Vinjured?	On phy	sical examination of the throat,	it was found that
	a. External laryngeal nerve	b.	Internal laryngeal nerve	
	c. Ansa cervicalis	d.	Glossopharyngeal nerve	
7.	After the cadaveric dissection the proper mode of d	isposal	is inbin.	
	a. Blue	b.	Green	
	c. Red	d.	Yellow	
8.	A new born baby with a tuft of hair in lower bapossible condition suspected?	ick regi	on was examined by paediatric	cian, what is the
	a. Rachischisis	b.	Spina bifida occulta	
	c. Sacrococcygeal teratoma	d.	Caudal dysgenesis	
9.	A 40 year old patient came with headache, fever an meningitis. The physician wanted to evaluate the bi one of the following would be the choice of tapping a. T-12 and L-1 c. L-2 and L-3	iochemi	cal analysis of cerebrospinal flu	
10.	A 6 year old girl was having high grade fever for 5			
	left leg. On examination there was flaccid paralysis			onal diagnosis?
	a. Poliomyelitis	b.	Cerebral palsy	
	c. Cerebellar palsy	d.	Lateral medullary syndrome	
11.	A 66 year old nulliparous woman presented in the her right nipple. On examination, the nipple was f peel appearance'. The most likely diagnosis for this a. Intraductal papilloma c. Gynecomastia	found to	be retracted and skin around i	
		.	rager s ensease or the crease	
12.	60 year old diabetic lady complaints of intermittent right hand. On examination, there is wasting of the and fingers. There was loss of opposition of thumb fist. What could be the cause of such a condition?	nar emir . Index a	nence, she is unable to hold a pa and middle finger lag behind wh	per with thumb ile making a
	a. Compression of ulnar nerve in the forearm	b.	Compression of median nerve	
	c. Compression of ulnar nerve at the carpal tunnel	d.	Compression of median nerve	at carpal tunnel
13.	A 22 year old female kabaddi player suffered a wrist outstretched hand. The Orthopedician notices mild ulnar deviation of hand. Which carpal bone is likely	swelling	g at the anatomical snuff box winjured?	
	a. Pisiform	b.	Trapezoid	
	c. Trapezium	d.	Scaphoid	
14.	A woman comes to OPD with the complaint of diff- likely to be involved:	iculty to	spread the fingers of her left ha	and. The nerve is
	a. Ulnar	b.	Musculocutaneous	
	c. Radial	d.	Median	
15.	A patient is stabbed in the neck. You suspect damage would test nerve function by asking the patient to	ge to the	e accessory nerve in the posterio	r triangle. You
	a. Extend his neck against resistance	b.	Extend his neck without resist	ance
	c. Lift his shoulders against resistance	d.	Lift his shoulders without resis	
16.	Examination of a patient indicates that he has a medamage to the:	dially di	rected strabismus (squint). This	could be due to
	a. Oculomotor nerve	b.	Trochlear nerve	
	c. Ophthalmic nerve	d.	Abducens nerve	Page 2 of 3

17.	The	eseventh	n cranial nerve supplies:			
			ouds on the posterior third of the tongue	b.	Muscles of the soft palate	
			rotid salivary gland	d.	Muscles of the lower lip	
18.	co ve a.	ncerned nous sin	old child sustain an insect bite on his upp about spread of the infection to the dura uses does the superior ophthalmic vein cor or sagittal sinus t sinus	l venou	is sinuses. With which of the fe	
19.	Oı	ne of the	following is a paired dural venous sinus			
	a.	Superio	or sagittal sinus	b.	Sigmoid sinus	
	c.	Inferior	r sagittal sinus	d.	Confluence of sinuses	
20.			ations from the tongue is carried by the f	ollowii	=	
		VII, VI		b.	V, VI, & XI	
	c.	VII, IX	. & X	d.	XI, X & XII	
Q.2		Descri	be the larynx under following head	lings:	-	
		a.	Cartilages and ligaments			
		b.	Movements of vocal cords	c.	Clinical anatomy	[4x3]
Q. 3	3.	Write	short notes on:			[5x4]
		a.	Illustrate microanatomy of mammar	y glan	d	
		b.	Types of cartilaginous joints			
		c.	Claw hand			
		d.	Describe microanatomy of compact	bone		
Q.4		Explai	in:			[3x5]
		a.	Clinical importance of median cubit	al vein	l	
		b.	Wry neck			
		c.	Neurobiotaxis with example			
		d.	Erb's palsy			
		e.	Haemmohrage after tonsillectomy			
Q.5		Write	short notes on:			[6x3]
		a.	Derivatives of first pharyngeal arch			
		b.	Transverse section through midbrain	at the	level of superior colliculus	
		c.	Cranial nerve nuclei of general visce	eral eff	Ferent column	
Q.6		Write	short notes on:			[5x3]
		a.	Lymphatic drainage of mammary gla	and		
		b.	Lower triangular space in scapular re	egion		
		c.	Circle of Willis			

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M.B.B.S. 1st Prof.

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Anatomy – B

M.M.	: 100			Time: 3 Hours(First30 Min	n. for MCQs)
Note:	1.	Use OMR Sheet to answer Mul	tiple Cha	oice Questions(MCQs).	
	2.	Attempt all questions. Illustrate y	vers with suitable diagrams		
	3.	NO SUPPLEMENTARY SHE			
	4.	The student must write Q.P. Cod	<u>le in the s</u>	space provided on OMR Shee	t and the Title
		page of the Answer Book.			
Q.1	MCQ	(Attempt on OMR sheet)		[1x2	0]
1. Fa	scia of l	Denonvilliers -			
		branous layer of fascia of the thigh			
		nal fascia			
		a between the rectal ampulla and the	e prostate	e and the seminal vesicles	
d.	Poste	rior layer of perirenal fascia			
2. A	forty y	ear old lady comes to OPD with	ı compla	int of difficulty to initiate d	lorsiflexion and
inv		of leg. The muscle most likely affect	cted is:		
a.		lis posterior	b.	Tibialis anterior	
c.	Peron	eus tertius	d.	Peroneus longus	
3. Sic	ckle cell	l anemia is the clinical manifestation	on of hor	nozygous genes for an abnori	mal hemoglobin
		The event responsible for the muta			C
a.	Insert	ion	b.	deletion	
c.	Non-o	disjunction	d.	Point mutation	
4 Ar	n eight	year child is brought to casualty	with his	tory of small heads inserted	s into the nose
		ly. It will most likely to enter into-	WICH IIIS	tory or small beaus inserted	is into the nose
a.		al segment of right Lower lobe	b.	Medial segment of right M	iddle lobe
c.		segment of left Lung	d.	Posterior segment of right 1	
		est among diseases with Mendelian			
a.		somal dominant	b.	Autosomal recessive	
c.	X-IIII	ked recessive	d.	X-linked dominant	
6. Dı	ıring suı	rgery in the region of adductor cana	al, which	of the following structures is	not found ?
	_	ral artery		_	
		ral nerve	d.	Saphenous nerve	
7 TL		div of the testis develope from			
7. 111 a.		ndix of the testis develops from - nephric duct	b.	Para-Mesonephric duct	
c.	Both	nepinie duct	d.	None	
		cord has -	u.	Tione	
a.		ry and 1 vein	b.	1 artery and 2 veins	
c.		ry and 2 veins	d.	only one artery	
9. In		the inner cell mass forms the -		•	
a.		yonic disc	b.	Extra embryonic mesodern	
c.	Chori	on	d.	Allantois	Page 1 of 3

10. In a. c.	a female child ovary are present in which stage Anaphase 2nd meoitic Oogony	ge- b. d.	Prophase 1 st meiotic Maturation
11. Th a. c.	e ureter is lined by ephithelium - Stratified squamous Cilliated columnar	b. d.	Cuboidal Transitional
12. Th a. b. c. d.	the upper half of the oesophagus in lined by - Stratified cuboidal epithelium Stratified columnar epithelium Stratified squamous non keratinsed epithelium Stratified squamous keratinised epithelium	ım	
13. Cl	ara cells are present in -		
a.	Alveoli	b.	Bronchus
c.	Bronchioles	d.	Trachea
14. A	common structure in Hesselbach's triangle an	d femo:	ral triangle is -
a.	Conjoint tendon	b.	inguinal ligament
c.	Inferior epigastric artery	d.	Rectus femoris
15 Pe	rineal body is formed by all except -		
	Levator ani muscle	b.	External anal sphincter muscle
	Bulbocavernous muscle	d.	Obturator internus muscle
16. A1	l are parts of vulva except -		
	Labia minora	b.	Labia majora
	Perineal body	d.	Clitoris
17. a. b. c. d.	The following about prostate is true except - Surrounds the neck of bladder Has an anterior lobe which hypertrophies in Has median lobe between urethra and ejacul Has a posterior lobe which is prone to carcin	old age	ucts
18. In	the region of knee all are true except-		
	The popliteal fossa is bounded above by ter two heads of the gastrocnemius muscle	ndons o	f the hamstring muscles and below by the
b.	The deepest structure in the popliteal fossa i	s the po	opliteal artery
	The popliteal and femoral vessels are contin	_	· ·
d.	The common peroneal nerve doesn't pass th	rough t	he popliteal fossa

- 19. Neurovascular plane in anterior abdominal wall is
 - a. Between external oblique and internal oblique
 - b. Between internal oblique and transversus abdominis
 - c. Below transverses abdominis
 - d. Above external oblique
- 20. Order of the uterine tube from lateral to medial is
 - a. Ampulla- Infundibulum -Isthmus-Interstitial
 - b. Infundibulum-Ampulla-Isthmus-Interstitial
 - c. Isthmus-Infundibulum-Ampulla-Interstitial
 - d. Ampulla-Isthmus-Infundibulum-Interstitial

Gross features a. b. Relations c. Blood supply and lymphatic drainage d. Applied anatomy Q.3. Write short notes on:-[5x4]a. Femoral sheath b. Bronchopulmonary segments c. Lateral longitudinal arch of foot d. Fertilisation Explain the anatomical/embryological basis of:-Q.4. [3x5]a. Tetralogy of fallot b. Foot drop c. Paracentesis thoracis d. Intramuscular injections are given in the upper and lateral quadrant of gluteal region e. Pain of ureteric colic referred from loin to groin Q.5. Discuss briefly the applied aspect of:-[6x3]a. Cervical rib b. Autosomal dominant disorders c. Atrial septal defects a. Draw well labelled diagram of Microanatomy of Pancreas. Q.6. [5x3]Draw well labelled diagram of Structures forming stomach bed b. c. Discuss briefly about proper disposal of biomedical waste in dissection hall. Page 3 of 3

Q.2. Describe 'Spleen' under the following headings:

[4+3+3+2]

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Physiology – A

M.M.: 100 Time: 3 Hours(First30 Min. for MCQs)

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- 2. Attempt all questions. Illustrate your answers with suitable diagrams
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Q.1 MCQs (Attempt on OMR sheet)

[1x20]

- 1. Massaging the skin or applying an irritating substance to the skin can suppress the transmission of pain signals from the corresponding area of the body by suppressing the sensory fibres that transmit the pain signal. Which statement describes best?
 - a. Presynaptic and postsynaptic inhibition of serotonin C-type fibers.
 - b. Lateral inhibition of allogenic fibers by tactile fibers from adjacent areas of the skin.
 - c. Activation of neurons of the periaqueductal grey substance.
 - d. Release of endorphin from local neurons in the spinal cord.
- 2. A 48-year-old man was undergoing a thorough neurological exam after falling from a construction platform. The test included an evaluation of his deep tender reflex. Considering entire reflex pathway is intact, which of the following structures CAN NOT trigger a muscle contraction when stimulated?
 - a. Gamma motor neurons
- b. Loading of spindle.
- c. Primary (Group Ia) fiber
- d. Golgi tendon organ
- 3. A man falls into deep sleep with one arm under his head. After awakening the arm is paralyzed but tingling sensation and pain sensation persists. This loss of motor function without the loss of sensory function is because
 - a. type A fibres are more susceptible to hypoxia that B
 - b. type A fibres are more sensitive to pressure than C
 - c. C fibres are more sensitive to pressure than A
 - d. Sensory nerves are nearer bone and hence affected by pressure
- 4. 33-year-old man presents with headache for 4 weeks and a right-sided lower motor neuron facial weakness for 3 days. On the day of admission he had developed partial nerve deafness in his left ear. Which is correct finding after doing hearing test.
 - a. Rinne's test is positive right ear and sound lateralized to left ear in weber's test.
 - b. Rinne's test is negative in left ear and sound lateralized to right ear in weber's test.
 - c. Rinne's test is positive in left ear and sound lateralized to right ear in weber's test.
 - d. Sounds are not perceived.
- 5. A 69-year-old woman was admitted to hospital with complains of headache and blurring of vision and pain in both the eyes. On visual examination, she has a reduced ability to see objects in upper and lower quadrant of the left visual fields of both eye but vision is present in the central regions of the visual field. The diagnosis is
 - a. Heteronymous hemianopia without macular sparing
 - b. Heteronymous hemianopia with macular sparing
 - c. Homonymous hemianopia without macular sparing
 - d. Homonymous hemianopia with macular sparing

pl	6. A 48-year-old man was undergoing a thorough neurological exam after falling from a construction platform. The test included an evaluation of his knee jerk reflex and considering entire reflex						
pa	pathway is intact, which of the following is true regarding reflexes						
	a. The reaction time for stretch reflex is between 19-24 ms.						
b.	b. The spinal nerve involved in the testing of knee jerk reflex S1 spinal nerve						
c.	1						
_ d.	<u>.</u>						
			is a protanope these patients have difficulty in				
	entifying which of the following colour						
a.		b.	Green				
c.		d.	Black				
			the hypothalamus in appetite control. In particular,				
			the hypothalamus in order to investigate the effects				
	this area on appetite. A lesion of this a		* *				
a.	Decrease eating ,hyperactivity and w	_					
	Excessive eating and weight gain	C.	Decreased eating and no change in weight				
d.	•	rolo of	various areas of the brain on the industion of				
			various areas of the brain on the induction of s of the brain and brain stem in order to investigate				
	• •		following brain regions induces sleep when				
	mulated?	ii oi tiic	following brain regions induces sieep when				
a.	Facilitating reticular formation	b.	Raphe nuclei				
c.		d.	Substantia nigra				
			a gonadotroph- stimulating drug responded with an				
			ut follicles stimulating hormone levels remain low.				
	<u> </u>		ld also be expected to remain unaffected by such a				
	ug	ics wou.	id also be expected to remain unaffected by such a				
a.		b.	Progesterone				
c.		d.	Testosterone				
			n levels of circulating adrenocorticotropic hormone				
			al cortex hormones would be least likely to be				
	fected by high ACTH?	8					
a.	•	b.	Cortisol				
c.		d.	Aldosterone.				
12. A	young woman loses sensation on the l	left side	below the mid-thoracic region after falling down a				
fli	ght of stairs. A CT scan of her spine re	vealed a	a lesion in her dorsal column. All of the following				
as	cending sensory pathways are located i	in the do	orsal column except				
a.	pain	b.	touch				
c.	pressure	d.	vibration				
			t a weight .The length of skeletal muscle at which				
he	can develop maximal active tension is	called:					
a.	Initial length	b.	Resting length				
c.	Maximum length	d.	Active length				
	•		below the mid-thoracic region after falling down a				
	· .		a lesion in her anterolateral spinal cord segment. A				
le	sion in the anterolateral segment of the	-					
a.	<u> </u>	b.	Ipsilateral loss of temperature				
c.	1	d.	Contralateral vibration loss				
			that destroyed his pancreatic β cell is most likely				
	exhibit which of the following signs an	. • -					
a.	Hyperglycaemia and diuresis	b.	Hyperkalaemia				
c.	Enhanced protein storage in muscle	d.	Enhance glucose uptake by deposit.				
			Page 2 of 3				

- 16. After falling down a flight of stairs a young woman has partial loss of voluntary movement on the right side of her body and loss of pain and temperature sensation on the left side. It is probable that she has a lesion damaging the right half of the spinal cord. All are characteristic features of this lesion except
 - a. Fine touch, vibration preserved on same side
 - b. Motor paralysis on the same side c. Loss of pain and temperature on opposite side
 - d. Loss of kinaesthetic sensation on opposite side
- 17. A 60-year-old man with Parkinson's disease has been able to continue to work and help with routine jobs around the house but now he has tremors and rigidity that interfere with these activities. The characteristics of these tremors could be all except
 - a. It consists of regular rhythmic alternate contraction of antagonist and agonist muscle
 - b. Common side being the face muscles
 - c. Present at rest but disappear during activity
 - d. Occur at rate of 6-8 times per second
- 18. A 35-year-old woman reports muscle weakness in the extraocular eye muscles and muscles of the extremities. She feels fine in the morning, but the weakness begins soon after she becomes active. The weakness is improved by rest. The physician treats her with an anticholinesterase inhibitor. Her physician diagnoses her with
 - a. Lambert–Eaton syndrome.
- b. Myasthenia Gravis.

c. Multiple Sclerosis.

- d. Parkinson Disease.
- 19.An MD/Ph.D. student studied sleep patterns in full-term infants. Paradoxical sleep occupies about 80% of total rest. Paradoxical sleep consists of
 - a. REM sharp wave and fast rhythm
- b. REM spike and slow wave
- c. NREM Delta wave

- d. NREM high spikes theta wave
- 20. Which hormone from the list below is produced by Sertoli cells and stimulates GnRH (gonadotropin-releasing hormone) and FSH (follicle- stimulating hormone) secretion?
 - a. Luteinizing hormone (LH)
- b. Activin
- c. Androgen-binding protein (ABP)
- d. Testosterone
- Q.2. Enumerate the components of basal ganglia. What is Parkinson's disease? Discuss the features and rationale of treatment of Parkinson's disease. [1.5+1.5+7+2]
- Q.3. Write short notes on:-

[5x4]

- a. Role of cAMP as second messenger in signal amplification
- b. Molecular basis of skeletal muscle contraction
- c. Enumerate the hormones regulating the calcium homeostasis. Explain the role of any of them
- d. Differentiate between non REM sleep and REM sleep
- Q.4. Explain why/reason: -

[3x5]

- a. Why neuron is refractory to subsweeuent stimuli during action potential?
- b. Why patients with amputated limb may complain of pain and proprioceptive sensations in the absent limb?
- c. Why damage to ossicles in middle ear results in hearing loss?
- d. Why stretching of tendon results in muscle contraction?
- e. Why is a person entering a dark room from a day light takes time to see the objects?
- Q.5. Short notes on(applied aspect):-

[6x3]

- a. Explain the consequences of adrenal hyperplasia involving outermost cortical layer.
- b. Explain the feedback regulation of ovarian hormones and physiological basis of oral contraceptive pills in prevention of pregnancy.
- c. Explain the feeding behavior abnormalities in lesion of certain areas of hypothalamus.
- Q.6. **Short notes:-** [5x3]
 - a. Explain spermatogenesis and its regulation.
 - b. Explain the cardiovascular and metabolic effects of thyroid hormones.
 - c. Explain the physician's role and responsibility to society and the community.

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Physiology – B

M.M.: 100			ie: 3 Hours(First30 Min. for MCQs)					
Note:	1.	Use OMR Sheet to answer Multiple Choice Questions(MCQs).						
	2. 3. 4.	Attempt all questions. Illustrate your answ NO SUPPLEMENTARY SHEET SHALE. The student must write Q.P. Code in the spage of the Answer Book.	L BE	ALLOWED/PROVIDED				
Q.1	MCQ	s (Attempt on OMR sheet)		[1x20]				
Q1	Multip	ole choice questions						
	1	Maximum contraction of gall bladder is see a. CCK c. Gastrin	en witl b. d.	h Secretin Enterogastrone				
	2.	The PR interval is a. The beginning of the P wave and the b. The beginning of the P wave and the c. The end of the P wave and the begin d. The end of the P wave and the end of	e begi nning	nning of QRS complex of QRS complex				
	3.	Which of the following is <i>NOT</i> a hypovole a. Hemorrhage c. Diarrhea	mic sh b. d.	nock? Burn Heart failure				
	4.	The most common cause of anemia in devera. a. Malignancy c. Nutritional deficiency d. Drugs causing bone marrow suppre	b.	g country is Infection				
	5.	Which is the first and immediate event in ha. Platelet adhesionc. Vasoconstriction	b. d.	tasis Platelet aggregation Platelet activation				
	6.	Which of the following intestinal movement content a. Peristalsis c. Villus contraction	b. d.	or mixing and grinding of intestinal Segmentation Migrating myoelectric complex				
	7.	Blood pressure is defined as the product of a. Systolic pressure x pulse rate c. Pulse pressure x pulse rate	b. d.	Diastolic pressure x pulse rate Cardiac output x peripheral resistance				
	8.	Neutrophil count is high a. During acute bacterial infection c. In pernicious anemia	b. d.	Typhoid fever Drugs depressing bone marrow Page 1 of 3				

9.	Stimulation of parasympathetic nerve to salivary gland causes								
	a. In	creased secretion rich in	organic	constituents					
	b. D	ecreased secretion							
	c. Increased watery secretion rich in enzyme and mucin								
	d. Secretion is unaffected								
10.	Baroreceptor stimulation produces								
	a. Decreased heart rate and blood pressure								
	b. Increased heart rate and blood pressure								
	c. Increased cardiac contractility								
		aroreceptor adaptation	•						
11.	Exercise	causes which of the follow	wing?						
		creased blood flow to the	_	s after half minute					
				e to increase in systolic blood pressure					
		creased body temperature							
		ecreased O ₂ consumption							
		_							
12.		recisely measured by ulin	b.	Creatinine					
			d.	PAH					
	c. H	ippuric acid	u.	гАп					
13.	Which of the following is NOT absorbed in proximal convoluted tubule								
	a. N	a^+	b.	Phosphate					
	c. H	CO_3^-	d.	H^+					
14.	Counterc	urrent mechanism in the k	kidney is	s responsible for					
	a. Maintenances of blood flow								
	b. A	bsorption of Glucose							
		smotic gradient of medull	la						
		ecretion of uric acid							
15.	The first	physiological response to	high en	vironmental temperature is					
		weating	b.	Vasodilation					
	c. D	ecreased heat production	d.	Decreased non-shivering thermogenesis					
16.	Which of	the following does not st	imulate	peripheral chemoreceptors?					
	a. H	ypoxic hypoxia	b.	Stagnant hypoxia					
		nemic hypoxia	d.	Histotoxic hypoxia					
17.	Timed vital capacity (FEV ₁) is less than 70% in								
	a. B	ronchial asthma	b.	Bronchitis					
	c. Pu	ılmonary fibrosis	d.	Lung collapse					
18.	Which of the following is seen in high altitude climates?								
	a. Decreased density of systemic capillaries								
		ypertension	1						
		radycardia							
		crease in pulmonary vent	ilation						
19.		n of sympathetic fibers ca		EXCEPT					
	a. In								
	b. In								
		ecreased coronary blood t							
	d. In	creased myocardial contr	actility						
20.	Carbon m	nonoxide poisoning is a ty	pe of						
		nemic hypoxia	b.	Histotoxic hypoxia					
		ypoxic hypoxia	d.	Stagnant hypoxia					

Q.2. With the help of a neat diagram explain the volume and pressure changes in the cardiac cycle. Enumerate the heart sounds. Explain the mechanism of the third heart sound. [8+2+2]Q.3. Write short notes on:-[5x4]Explain mechanism of tubulo-glomerular feedback in kidney Discuss mechanism of gastric acid secretion b. c. Explain Bohr's effect in oxy-heamoglobin dissociation curve in detail d. Discuss role of T helper cells in immunity **Explain why:-**Q.4. [3x5]Inulin is used to calculate renal clearance ORS is the best treatment for dehydration b. Vitamin K is administrated to newborns c. A patient in circulatory shock feels thirsty d. Normal intra-pleural pressure is negative e. Q.5. Short notes on(applied aspect):-[6x3]Define hypoxia. Discuss hypoxic hypoxia in detail. a. Discuss dialysis in detail b. Define and classify anemias. Discuss laboratory findings of iron deficiency anemia in c. detail. Q.6. Short notes on:-[5x3]Discuss rights and responsibilities of a patient. b. Discuss nitrogen narcosis Explain peristalsis in detail c.

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M.M.: 100

Note: 1.

Q.P. Code: MBN105

Time: 3 Hours(First30 Min. for MCQs)

M.B.B.S. 1st Prof.

(New Scheme w.e.f. 2019 admission onwards) BF/2023/06

Biochemistry - A

Use OMR Sheet to answer Multiple Choice Questions(MCQs).

	2. 3. 4.	Attempt all questions. Illustrate your NO SUPPLEMENTARY SHEET S The student must write Q.P. Code in page of the Answer Book.	SHALI	
Q.1	MCO	s (Attempt on OMR sheet)		[1x20]
1.	A 45 y	vear old man was admitted to hospital	e after	ng from general fatigue, headache and stiff his blood pressure was found to be 170/96
2.	headad		en to he s of tox esteras holines	e
He wa	as on i			ought to hospital in an unconscious state. smell was noticed in his breath. Blood
3.		s your most probable diagnosis		
	a.	Respiratory acidosis	b.	Lactic acidosis
	c.	Metabolic alkalosis	d.	Diabetic ketoacidosis
4.	The of	fensive smell in breath is due to		
	a.	Acetone	b.	Acetoacetate
	c.	Beta-hydroxy butyrate	d.	Lactate
indica was re	ted a k ported	idney stone. Increased urinary excr		side and back. Subsequent investigations f cystine, arginine and lysine in the urine
5.		s your most probable diagnosis	1-	G4:i-
	a.	Cystinosis	b. d.	Cystinuria Phonyllatonuria
_		Homocysteinaemia	u.	Phenylketonuria
6.		of the above disorder is	b.	Enzymatic defect
	a. c.	Transport defect Hormonal defect	d.	Immuno-compromised state
7				minutio-compromised state
7.		tatement related to the above amino ac Cystine is an essential amino acid	b.	Arginine is a semi-essential amino acid
	a. c.	Lysine is a non-essential amino acid		All three amino acids are glucogenic Page 1 of 3
				S

A 14 year old boy with type 1 diabetes lost consciousness on racing track, while he was playing with his friends. He had received his normal insulin injection in the morning but continued playing forgetting his breakfast and lunch. He was given glucagon injection from the emergency kit his mother carried and recovered within minutes

8. The boy lost consciousness due to

a. Hyperglycaemia

b. Ketone bodies

c. Hyperlipidaemia

d. Hypoglycaemia

9. The tissue/organ which is most severely affected in the above condition is Haemopoietic system Skeletal system b. c. Nervous system d. Vascular system 10. The following compounds foms a link between Kreb cycle and Urea cycle Fumarate Succinate a. b. Malate c. Oxaloacetate d. 11. Rate and direction of glucose and glycogen metabolism in liver is controlled by Estradiol Glucagon a. b. Aldosterone c. d. Estrone 12. Near complete absence of the high density lipoproteins leads to the following disease: Tangier disease b. Fabry disease c. Familial hypercholesterolaemia d. Familial combined hyerlipidaemia 13. The term abetalipoproteinaemia refers to near complete absence of all of the following EXCEPT. LDL **VLDL** a. b. c. Chylomicrons d. **HDL** 14. GluTs promote entry of glucose into cells along a concentration gradient. This is an example of Simple diffusion b. Faciliated diffusion a. c. Primary active transport d. Secondary active transport 15. Hypoglycaemia compromises brain functions and is fatal when severe (blood glucose below 2.5 mmol/Liter). Severe hypoglycaemia may occur in: Insulinoma b. Fasting a. Cigarette smoking d. Cushing syndrome c. When a person gets up in the morning 12 hours after dinner, the main source of his blood 16. glucose is Liver glycogenolysis Gluconeogenesis a. b. Muscle glycogen Dietary glucose d. c. 17. Brain is an avid eater of glucose. During prolonged fasting its energy needs are covered from Oxidation of muscle glycogen a. Hepatic glycogenolysis b. Anaerobic glycolysis c. d. Oxidation of ketone bodies 18. All of the following are essential amino acids EXCEPT Lysine b. Leucine a. Glycine d. Phenylalanine 19. Competitive inhibitors bind with active site of an enzyme and cause

b.

d.

Increase in Km

Decrease in Vmax

Increase in Vmax

Decrease in Km

a.

c.

20. All of the following are correct statements related to doctor patient communication EXCEPT: One of the goals of effective doctor patient communication is facilitating exchange of information Lesser doctor patient ratio is one of the reasons for bad doctor patient communication b. Use of medical jargons is allowed while breaking bad news to the patient or patient's c. d. Building rapport is one of the tools to improve doctor patient communication A new born baby developed jaundice on 3rd day after the birth. Blood test revealed Q.2. unconjugated hyperbilirubinemia. [3+4+3+2]What is the diagnosis? a. What are the probable causes of developing this condition? b. How is such a case managed? c. Give two causes of conjugated hyperbilirubinemia. d. Q.3. Write short notes on:-[5x4]Glutathione Glycosides b. Micelles c. d. Glycated hemoglobin **Explain why:-**Q.4. [3x5]Trans fatty acids are harmful. Curd is advised in patients with lactose intolerance. b. Phenylketonuric infants are fair. c. Exercise intolerance is observed in McArdle disease. d. Dietary fibers are beneficial for health. e. Q.5. Write short notes on:-[6x3]Role of enzymes in diagnostic. a. Biochemical basis of toxicity of hyperammonemia. b. Biochemical role of vitamin A. c. Q.6. Write short notes:-[5x3]Discuss the types of doctor-patient relationship. b. Discuss the causes and consequences of alcoholics. c. Discuss the regulation of ketone body metabolism.

M.M.: 100

5.

b. c.

d.

Q.P. Code: MBN106

Time: 3 Hours(First30 Min. for MCQs)

M.B.B.S. 1st Prof.

(New Scheme w.e.f. 2019 admission onwards)
BF/2023/06

Biochemistry - B

Note:	ote: 1. <u>Use OMR Sheet to answer Multiple Choice Questions(MCQs).</u>			ce Questions(MCQs).
	2. 3. 4.	Attempt all questions. Illustrate you NO SUPPLEMENTARY SHEET The student must write Q.P. Code in page of the Answer Book.	SHALI	
Q.1	_	s (Attempt on OMR sheet) e most appropriate answer:		[1x20]
1.	fingers	s show scarring and several scabs. H	lis lips ificantly	often to the point of bleeding. The boy's are swollen and bruised. He also has poor y delayed speech. The urine is orange in agnosis? Phenylketonuria Cerebral palsy
2.	investi	year old body develops severe digation revealed the following results: Arterial blood pH = 7.25 Partial Pressure of carbon dioxide = Bicarbonate = 11 mEq/L with normals the most probable diagnosis? Metabolic acidosis Respiratory acidosis	26 mm]	•
3.	and tri	ied and had a history of seizures. The ner ring in the cornea and low serur	e exam	nd was admitted in a hospital. He was weak ination revealed an enlarged liver, Kayser-oplasmin level. What is the most probable Keshan's disease Hartnup's disease
4.	_	ALA synthase and protoporphyrin of ALA dehydratase and ferrochelatase	wing er xidase xidase n oxida	

Which of incorrect in xeroderma pigmentosum?a. It is an autosomal recessive conditionb. Defect is in the repair mechanism of DNA

Sensitivity to UV light is the major manifestation

Cells are unable to synthesize vitamin-D even in the presence of sunlight

	a. c.	Restriction endonuclease Reverse trascriptase	b. d.	Taq DNA polymerase Ligase
7.	Lac or	peron is active when		
	a. c.	Only glucose is available in medium cAMP is low	b. d.	Only lactose is available Both lactose and glucose are available
8.	swellin	ng all over the body, loss of appeti	te, low ght and	OPD with complaints of mild generalized grade fever and distended abdomen. She height were lower as compared for her age
	a.	Kwashiorkar	b.	Marasmus
	c.	Irritable bowel syndrome	d.	Ulcerative colitis
9.	Vitam	in K activates the following clotting f	actor ex	ccept:
	a.	Prothrombin	b.	Factor VII
	c.	Factor V	d.	Factor IX
10.	Marfa	n's syndrome is caused by the followi	ng defe	ective protein:
10.	a.	Fibrinogen	b.	Fibronectin
	c.	Fibrillin	d.	Collagen
	C.	Tomin	u.	Conagen
11.	An inc	crease in serum unconjugated bilirubin	occurs	s in:
	a.	Hemolytic jaundice	b.	Obstructive jaundice
	c.	Defects in intestinal absorption	d.	Glomerulonephritis
12.	The ur	rine of the patient with obstructive jau		
	a.	Fouchet's test	b.	Benzidine test
	c.	Sodium nitroprusside test	d.	Precipitation test
13.	What	is a nucleosome?		
	a.	Synonym of nucleolus	b.	DNA-RNA complex present in nucleus
	c.	mRNA attached with snRNA	d.	DNA wrapped around histones
14.	In prin	mary hypothyroidism, the lab findings	are	
	a.	Decreased TSH	b.	Increased TSH
	c.	Increased T3	d.	Increased T4
15.				become black on long standing. This may be
	due to	the presence of which substance in the		
	a.	Homogentisic acid	b.	Phenylalanine
	c.	Homocystine	d.	Tyrosine
16.	A CSI sugges		of 5000	, 90% neutrophilis and protein of 81 mg/dl
	a.	Fungal meningitis	b.	Viral meningitis
	c.	Tubercular meningitis	d.	Bacterial meningitis
17	A 70	your old male was been alst to the	an an	with anot difficulty in massing and Th
17.				with great difficulty in passing urine. There . Investigations were sent for the probable
		· ·		owing marker will support the diagnosis?
	a.	Alkaline phosphatase	b.	Tissue specific antigen
	c.	Prostate specific antigen	d.	CA125 Page 2 of 3

The enzyme used in the complementary DNA synthesis is

6.

18.	The f	ollowing is NOT a proto oncogene:		
	a.	c-myc	b.	Tyrosine kinase gene
	c.	p53	d.	cycline
19.	On in		mg/dl.	nin in the first toe with swelling and redness. Synovial fluid examination revealed needle bable diagnosis? Scurvy Phenylketonuria
20.	The in	nhibitor of iron absorption is		
	a.	Phytate		
	b.	Lysine		
	c.	Vitamin C		
	d.	Gastric HCL		
	Q.2.	chest pain radiating to left arm. myocardial infarction. Name the biomarkers having specification.	His I	
	b.	myocardial infarction.	or onse	et of cardiac biomarker elevations in acute
	c.	How is BMI calculated?		
	d.	What is atherosclerosis?		
Q.3.	Write	e short notes on:-		[5x4]
	a.	Messenger RNA		
	b.	Restriction enzymes Initiation of protein synthesis		
	c. d.	Role of non-verbal gestures in doct	or-patie	ent communication
0.4	El		•	[25]
Q.4.	Expia a.	ain why:- Creatinine is a better assessor of kid	dnev fu	[3x5]
	b.	Hyper ammonemia occurs in urea c	-	
	c.	Antigen presenting cells have a maj	•	
	d.	Pedigree chart is important tool in p		
	e.	Monoclonal antibodies are required	l in labo	oratory for diagnosis of some disease.
Q.5.	Write	e short notes on:-		[6x3]
	a.	Tumor markers		
	b.	Vitamin A		
	c.	Thyroid function tests		
Q.6.		e short notes:-		[5x3]
	a.	Post transcriptional modifications		
	b.	Nutritional anaemias Fatty acid synthesis		
	c.	ratty acid synthesis		
				

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