MIZORAM PUBLIC SERVICE COMMISSION

TECHNICAL COMPETITIVE EXAMINATIONS FOR SENIOR GRADE OF MIZORAM HEALTH SERVICES (SPECIALIST SUBCADRE) UNDER HEALTH & FAMILY WELFARE DEPARTMENT, GOVERNMENT OF MIZORAM, FEBRUARY-2024

PAPER-II (MEDICINE)

Time Allowed: 3 hours		FM: 200
All questions carry equal	mar	ks of 2 each.
Attempt all que	estion	s.
1. Anterior inferior cerebral artery is a branch of:		
(a) Subclavian artery	(b)	Vertebral artery
(c) Basilar artery	(d)	Middle cerebral artery
2. What is the site of lesion affecting cranial nerve VI	, VII	and VIII:
(a) Pons	(b)	Medulla
(c) Midbrain	(d)	Junction between pons and medulla
3. Nerve carrying taste sensation from anterior 2/3rd o	fthe	tongue is called:
(a) Arnold nerve		Criminal nerve of grassi
(c) Jacobson nerve	(d)	Nerve of wrisberg
4. All of the following are features of Horner's syndro	me e	xcept:
(a) Ptosis	(b)	Heterochromia iridis
(c) Miosis	(d)	Exophthalmos
5. Negri bodies are found in:		
(a) Cerebellum	(b)	Hypothalamus.
(c) Hippocampus	(d)	Brain stem
6. Lewy's body is seen in:		
(a) Alzheimer's	(b)	Rabies
(c) Parkinsonism	(d)	Multi infarct dementia
7. Which is the earliest histopathological changes in m	yocai	rdial infarction:
(a) Stretching and waviness of fibers		Neutrophilic infiltration
(c) Coagulative necrosis	(d)	Fibrovascular response
8. Which of the following is best to confirm the diagramily history of Thalassemia	nosis	of Thalassemia trait in a lady with positive
(a) Elevated HbA2	(b)	Reticulocytosis
(c) NESTROFT	(d)	Peripheral smear
9. A 30 year old patient presented with fever, headac	he an	d vomiting. He had splenectomy few years

(b) Pneumococcus

(d) C Diphtheria

ago. Most probable organism:

(a) Meningococcus

(c) E-Coli

10. Secondary bacterial pneumonia in a post influe	nza patient is most likely due to:
(a) Staphylococcus aureus	(b) Moraxella
(c) Listeria	(d) Klebsiella
11. Corynebacterium diphtheria is:	
(a) Gram positive cocci	(b) Gram positive bacilli
(c) Gram negative cocci	(d) Gram negative bacilli
12. CLO test is done for:	(a) orani negativo outini
(a) HPV	(b) Salmonella typhi
(c) HIV	(d) H Pylori
13. Pharmacovigilance is:	(w) III yiofi
(a) Monitoring generic drugs	(b) Monitorina dans or
(c) Monitoring ethical drugs	(b) Monitoring drug efficacy
14. Adverse drug reaction class B is:	(d) Monitoring adverse effect of drugs
(a) Predictable side effect	(h) Di
(c) Failure of a drug	(b) Bizarre effect of a drug
3	(d) Chronic side effect
15. Which of the following drug require therapeutic(a) Phenytoin	
(c) Metformin	(b) Warfarin
	(d) Propanolol
16. Which of the following is a recognised complica(a) Blindness	
, ,	(b) Convulsions
(c) Respiratory distress	(d) Metabolic alkalosis
17. As a first-line treatment, Elapidae group of snak	ebite should receive:
(a) Neostigmine	(b) Atropine
(c) Polyvalent antivenin	(d) Blood
18. Drug of choice in paracetamol poisoning is:	
(a) Penicillamine	(b) Amyl nitrite
(c) N-acetylcystine	(d) Cholestyramine
19. Victims of mushroom poisoning (Amanita phall	oides) may die of:
(a) Acute tubular necrosis	(b) Cardiac stand still
(c) Raised intracranial tension	(d) Acute hepatic necrosis
20. In mercury poisoning, death is usually due to:	
(a) Hepatocellular failure	(b) Hypovolaemic shock
(c) Renal failure	(d) Encephalopathy
21. A disease recur every 10 years, which trend is re	
(a) Secular trend	(b) Epidemic
(c) Seasonal trend	(d) Cyclic trend
22. True about incidence:	
(a) Total number of cases in a community	(b) Number of at risk patients
(c) Number of new cases	(d) Number of deaths in a community
23. Framingham study is:	C / 2 control of continuinty
(a) Prospective cohort	(b) Retrospective cohort
(c) Case control study	(d) Cross sectional study
24. Which of the following set is termed as epidemiol	orical triad:
(a) Endemic, epidemic and outbreak	
(c) Incidence, prevalence and disease load	(b) Agent, host and environment
y Free menter and disouse toda	(d) Agent, man and disease

25.	Sam	ple registration is done:		
	(a)	Every 3 months	(b)	Every 6 months
	(c)	Every 9 months		Every 12 months
26.	Corr	elation coefficient of 1.76 indicates:	. ,	·
	(a)	Positive correlation	(b)	Highly positive correlation
	(c)	Absence of correlation		Wrong calculation
27.	Diab	etes, hypertension or CAD screening should b		_
		30		35
	(c)	45	` ,	55
28.	Post	exposure prophylaxis schedule of rabies vacci	` '	
		Day 0,3,7,14,21,90		Day 0,3,7,14,28,90
		Day 0,3		0,7,28
29.	• /	ch of the following vaccines does not provide h		• •
•		Hepatitis		B. Rabies
		Measles	٠,	Diphtheria
30	` '			• .
50.		eatment of Parkinsonism, Carbidopa is used al It increase the half life of Levodopa by inhibit		
		It inhibits Levodopa excretion	ıng n	s metabolism
		It inhibits peripheral dopa decarboxylase		
		It inhibits central dopa deaminase		
31		for tuberculin test:		
J1.		1 TU	(b)	2.771
		2.5 TU	. ,	2 TU 5 TU
32	` '	anion gap acidosis is seen in all except:	(u)	310
.) <u></u> ,		Lactic acidosis	(h)	Diomhasa
	. ,	Acute renal failure	. ,	Diarrhoea Salicylate poisoning
22			- ,	· ·
33.		th can be given immediately in haemoπhagic st Packed RBC		
	` '	Blood transfusion	• •	Colloids
2.4	` ′			Hypertonic fluids
34.		th is true of the recent trial (NINDS) of thromb		
		Streptokinase has the same risk benefit profit		
	(0)	The mortality rate of tPA given within three ho of the stroke without thrombolysis	ours c	of onset of ischemic stroke is lower than that
	(c)	The mortality rate of tPA given within three ho	ure o	forget of inchamic strake is high on them the
	(0)	of the stroke without thrombolysis	uiso	touset of ischemic stroke is nigher than tha
	(d)	The long term disability rate in patients surviv	zing t	heir stroke is less if they were given tPA
35.		th statement is FALSE about carotid stenosis?	- 5 -	and the second s
		In a patient with an anterior circulation isch	iemia	c event the presence of a bruit suggests
	5-7	moderately severe stenosis	-41111	· · · · · · · · · · · · · · · · · ·
	(b)	In a patient with an anterior circulation isch	emio	e event, the absence of a bruit dismisses a
		moderately severe stenosis		, =====================================
	(c)	A symptomatic stenosis >70% is often operation	ted u	pon
	(d)	An asymptomatic stenosis of >70% is usually	/ not 4	onerated unon

36.	Whic	ch is not a physiological effect of aging?		
	(a)	↑ Residual volume of lung	(b)	↑ Compliance of lung
	(c)	↓ Stroke volume	(d)	↓ Insulin sensitivity
37.	Whic	ch of the following should arouse suspicion of	unde	rlying disease in a person over 70 years?
		Loss of vibration sensation		Presence of palmomental reflex
	(c)	Loss of ankle jerk	(d)	Astereognosis
38.	Alzh	eimer's disease is treated with:		
	(a)	Trihydroaminoacridine	(b)	Amantadine
		Lubeluzole	(d)	Donazepril
39.	Allo	f the following are age-related changes in phys	iolog	ric function except:
		Decreased susceptibility to hypothermia		Increased T-suppressor cells
		Increased autoimmunity		Decline in baroreceptor reflex
40.	Whic	ch of the following drugs may be responsible fo	٠,	•
		Cetrizine		Leflunomide
	` ′	Acarbose	` '	Prazosin
41.		ch is false regarding cardiovascular changes in	` '	
		Reduced pulse pressure	-	Widened aortic arch on X-ray
		Increased risk of atrial fibrillations		Systolic hypertension
42.		th is not true regarding change in immune syste		•
		False negative PPD response		•
		•		↓ T cell function
	(c)	•		↓ Bone marrow reserve
43.		ets of aging on drug metabolism are due to all	_	
	(a)	↓ Lean body mass	(b)	↓ renal excretion
	(c)	↓ Plasma binding	(d)	↑ Hepatic first-pass metabolism
44.	In the	e aged, all of the following are raised in compa	arisoi	n to reference ranges except:
	(a)	Serum alkaline phosphatase	(b)	Serum globulin
	(c)	Serum uric acid	(d)	Total leucocyte count
45.	Thep	resence of which of the following in an elderly	does	not imply significance?
	(a)	Fourth heart sound	(b)	Ejection click
	(c)	Systolic murmurs of pulmonary stenosis	(d)	Third heart sound
46.	Progr	rammed cell death is popularly known as:		
	(a)	Apoptosis	(b)	Atopy
	(c)	Necrosis	(d)	Gangrene
47.	TNF	$-\alpha$ is produced by all <i>except</i> :		
	(a)	T cells	(b)	Monocyte
	(c)	B cells	(d)	Macrophages
48.	HLA	association of SLE is:		
	(a)	DR2	(b)	DR4
	(c)	DRI	(d)	DR3
49.	All a	re single gene disorders except:		
	(a)	Polyposis coli	(b)	Sickle-cell anaemia
		Turner's syndrome	(d)	

50.	Trisc	omy 13 is:		
	(a)	Crouzon's syndrome	(b)	Patau's syndrome
	(c)	Marfan's syndrome	(d)	Edward's syndrome
51.	Tran	sferrin has half-life of:		
	(a)	1-2 days	(b)	3-4 days
	(c)	5-7 days	(d)	8-9 days
52.	Whie	ch is not an X-linked dominant disorder?		
	(a)	G6PD deficiency	(b)	Orofaciodigital syndrome
	(c)	Vitamin D resistant rickets		Fabry's disease
53.	Whi	ch disease is not associated with HLA-B8?		
	(a)	Sjogren's syndrome	(b)	Multiple sclerosis
	(c)	Myasthenia gravis		Graves' disease
54.	In ge	ne therapy, which infective agent is used as a v	ehic	le?
		E.coli		Pneumococcus
	(c)	Corynebacterium	(d)	Adenovirus
55.	Imm	unoglobin found in bronchial secretion:		
	(a)	IgA.	(b)	IgG.
	(c)	IgM.	(d)	IgE
56.	Most	common site of angioedema is:		
	(a)	Hands	(b)	Lips
	(c)	Skin		Eyelid
57.	Seve	re combined immunodeficiency is seen with:		
		Pre B-cell	(b)	Pre T-cell
	(c)	Both	(d)	NK ceil
58.	In no	rmal immune system, the epithelial cells are de	rived	from:
		THI		TH2.
	(c)	Macrophages	(d)	TH19
59.	Meni	ngococcal meningitis is seen with which of the	follov	ving complement deficiency:
		Clq	(b)	_
	(c)	C4	(d)	C5
60.	IgM i	s:		
	(a)	Monomer	(b)	Dimer
	(c)	Pentamer	(d)	Tetramer
61.	Capla	an syndrome is characterized by:		
	(a)	Pneumoconiosis with HLA B27		
	(b)	Pneumoconiosis with reactive arthritis		
	(c)	Pneumoconiosis with progressive massive fibr	rosis.	
	(d)	Pneumoconiosis with rheumatoid arthritis		
62.	HLA	B27 is maximally associated with:		
	(a)	Rheumatoid arthritis	(b)	Ankylosing spondylosis
	(c)	Reiter syndrome	(d)	Psoriasis
63.	Prima	ry immune response is by which cell:		
	(a)	B cell	(b)	T cell
	(c)	B and T cell both	(d)	Complement mediated

64.	Whic	ch is the first line of defense in viral infection:		
	(a)	B lymphocyte	(b)	Macrophages
	(c)	T lymphocyte	(d)	Large granular lymphocyte
65.	Whic	h among the following is not an autoimmune di	isease	e:
	(a)	Myasthenia gravis	(b)	Systemic lupus erythematous
	(c)	Grave's disease	(d)	Sickle cell disease
66.	Schu	mm test is done to detect?		
	(a)	Haptoglobin	(b)	Methaemalbumin
	(c)	Cirtulline	(d)	Haemopexin
67.	Whic	th of the following does not produce iron-over	load	in body?
	(a)	Chronic haemodialysis	(b)	Pernicious anaemia
	(c)	Alcoholic liver disease	(d)	Sideroblastic anaemia
68.	Post-	splenectomy peripheral blood picture does no	t con	tain;
	(a)	Howell-Jolly bodies	(b)	Heinz bodies
	(c)	Target cells	(d)	Doehle bodies
69.	Com	monest cause of jaundice in thalassaemia is:		•
	(a)	Viral hepatitis C	(b)	Iron deposition in liver
	(c)	Viral hepatitis B	(d)	Haemolysis
70.	Whic	h of the following anaemias is associated with	splen	omegaly?
	• /	Chronic renal failure	(b)	Aplastic anaemia
	(c)	Hereditary spherocytosis	(d)	Sickle cell anaemia
71.	'Sugg	gilations' are haemorrhagic spots in the size of:		
	(a)	1-2 mm in diameter	(b)	2-5 mm in diameter
	(c)	>10 mm in diameter	(d)	>20 mm in diameter
72.	Basop	philia is classically found in:		
		Non-Hodgkin's lymphoma	(b)	Hodgkin's disease
	(c)	Melanoma	(d)	Chronic myeloid leukaemia
73.	↑ Fe	and normal TIBC are found in:		
	(a)	Thalassaemia major	(b)	Haemosiderosis
	(c)	Rheumatoid arthritis	(d)	Disseminated malignancy
74.	Splen	ectomy is virtually curative in:		
	(a)	G6PD deficiency	(b)	Idiopathic thrombocytopenic purpura (ITP)
	(c)	Thalassaemia	(d)	Hereditary spherocytosis
75.	Spur	cell anaemia is seen in:		
	(a)	Uraemia	(b)	Myxoedema
	(c)	Cirrhosis of liver	(d)	Lymphoma
76.	Whic	h is the most common tumour associated with	supe	rior vena cava syndrome:
	(a)	Lung cancer	(b)	Lymphoma
	(c)	Metastasis	(d)	Thyroid cancer
77.	Whic	h is the most common cancer which result in d	eath:	
	(a)	Oral cancer	(b)	Breast cancer
	(c)	Prostate cancer	(d)	Lung cancer

78. J	umping gene is known as:		
	(a) Transposon	(b)	Retroposon
	(c) Insertion sequence	(d)	Integron
79. V	Varthin tumour is:		
	(a) Adenolymphoma	(b)	Pleomorphic adenoma
	(c) Mucoepidermoid carcinoma	(d)	Acinic cell carcinoma
80. N	Most radiosensitive tumour is:		
	(a) Ewing's sarcoma	(b)	Seminoma
	(c) Osteosarcoma	(d)	Osteoid osteoma
81. 7	Fumour marker for mesothelioma is:		•
	(a) Desmin	(b)	Keratin
	(c) Vimentin	(d)	Alpha feto protein
82. I	L-myc leads to:		
	(a) Burkitts lymphoma	(b)	Neuroblastoma
	(c) Oat cell cancer	(d)	GIST
83. H	Esophageal irradiation causes damage by:		
	(a) Decreasing secretion	(b)	Glandular dysplasia
	(c) Stricture formation	(d)	Glandular hypertrophy
84. (Carcinoembryonic antigen is the tumour marker of		
• • • •	(a) Ovarian carcinoma	(b)	Hepatocellular carcinoma
	(c) Bronchogenic carcinoma	(d)	Colorectal carcinoma
85. (Chloroma is found in:		
	(a) Acute lymphatic leukaemia (ALL)	(b)	Chronic myeloid leukaemia (CML)
	(c) Acute myeloid leukaemia	(d)	Non Hodgkin's lymphoma
86. 1	Emperical drug of choice for treatment of meningo	coccal	l meningitis:
	(a) Cefoxitin		Ceftriaxone
	(c) Cefotetan	(d)	Gentamicin
87.	The preferred treatment option for primary syphilis	s is:	
	(a) Injection Benzathine penicillin 2.4 million ur		I single dose
	(b) Injection Benzathine penicillin 2.4 million u		
	(c) Cap Doxycycline 100mg orally twice a day		
	(d) Tab Azithromycin 2gm single dose		•
88.	Which of the following antitubercular drug require	s dos	e adjustment in renal failure:
	(a) Isoniazid		Rifampicin
	(c) Pyrazinamide	(d)	Ethambutol
89.	Mechanism of action of Statin:		
	(a) Inhibit HMG COA synthesis	(b)	Stimulate HMG COA reductase
	(c) Inhibit HMG COA reductase	(d)	Stimulate HMG COA synthesis
90.	Fastest acting Insulin:		
	(a) Insulin Aspart	(b)	Insulin Glargine
	(c) Insulin Lente	(d)	Insulin Determir

91.	The	locked-in syndrome is caused by occlusion of v	which	of the following arteries?
	(a)	Middlle cerebral artery	(b)	Posterior cerebral artery
	(c)	Vertebral artery	(d)	Basilar artery
92.	right	year old man who has been stabbed in the basisided paralysis and left sided decrease sensistence with:	ack p sation	resents to the emergency department with a below the waist. He's findings are most
	(a)	Central cord syndrome	(b)	Anterior cord syndrome
	(c)	Brown Sequard syndrome	(d)	Complete spinal cord transection
	follo (a) (b) (c) (d)	presentation of infection in the elderly may b wing reasons except: Pathogens are significantly different Febrile response may be impaired Physical exam may be misleading or non spec Leucocytosis may be absent		ered from that of younger adults for all the
94.		ch is the major precipitant of DKA?		
	` '	Infection	` ′	Missed doses of insulin
	• ′	AMI	• •	Pancreatitis
95.		f the following are consistent with Cauda Equi	•	
	(a)	Asymmetric lower extremity weakness	(b)	Hyperreflexia
		G = 1.11 = = = = = zt. = = t =	/ t\	Th. 1 . 1 .
	(c)	Saddle anaesthesia	` ,	Decreased rectal tone
	(c) A 65 coug diste	year old patient presents to the emergency de h and swelling of his hands, you note edema ension, periorbital swelling and an absent her	partn of his	nent with complaint of shortness of breath, upper extremities, thoracic and neck vein
	(c) A 65 coug diste	year old patient presents to the emergency de h and swelling of his hands, you note edema	partn of his oatoji	nent with complaint of shortness of breath, upper extremities, thoracic and neck vein
	(c) A 65 coug diste repre (a)	year old patient presents to the emergency de th and swelling of his hands, you note edema on sinsion, periorbital swelling and an absent her esents:	partn of his oatoju (b)	nent with complaint of shortness of breath, upper extremities, thoracic and neck vein ugular reflux. His condition MOST likely
·96.	(c) A 65 coug diste repre (a) (c)	year old patient presents to the emergency de th and swelling of his hands, you note edema on sion, periorbital swelling and an absent hep esents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admi	partnof his patojo (b) (d)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure
·96.	(c) A 65 coug diste repre (a) (c) In re disea	year old patient presents to the emergency de th and swelling of his hands, you note edema on sion, periorbital swelling and an absent hep esents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admi	partnof his patojo (b) (d) ssion	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure
·96.	(c) A 65 coug diste repre (a) (c) In re disea (a)	year old patient presents to the emergency de th and swelling of his hands, you note edema on sinsion, periorbital swelling and an absent hep esents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse?	partmof his patojo (b) (d) ssion (b)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe
-96. 97.	(c) A 65 coug diste repre (a) (c) In re disea (a) (c) A pa same	year old patient presents to the emergency dech and swelling of his hands, you note edema dension, periorbital swelling and an absent hepesents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with famedications for years. Which one of his medications	partnof his patojo (b) (d) ssion (d) first totions	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms?
-96. 97.	(c) A 65 coug diste repre (a) (c) In re disea (a) (c) A pa same (a)	year old patient presents to the emergency deth and swelling of his hands, you note edema dension, periorbital swelling and an absent hepsents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medications for years.	partnof his patojo (b) (d) ssion (d) first to the (b)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix
96. 97.	(c) A 65 coug disterrepre (a) (c) In red disea (a) (c) A par same (a) (c)	year old patient presents to the emergency dechand swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of adminse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medications for years.	partnof his batojo (b) (d) ssion (d) first totions (d)	nent with complaint of shortness of breath, upper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine
96. 97.	(c) A 65 coug dister repre (a) (c) In red disea (a) (c) A par same (a) (c) Temp follo	year old patient presents to the emergency dech and swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medicate Captopril Digoxin poral arteritis is a vasculitis that affects women wing is NOT usually associated with temporal	partnof his patojo (b) (d) ssion (b) (d) first to tions (d) en mearteri	nent with complaint of shortness of breath, upper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine ore frequently than men. Which one of the tis?
96. 97.	(c) A 65 coug diste repre (a) (c) In re disea (a) (c) A pa same (a) (c) Temp follo (a)	year old patient presents to the emergency dech and swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medicate Captopril Digoxin poral arteritis is a vasculitis that affects women wing is NOT usually associated with temporal affects of the second	partnof his patojo (b) (d) ssion (b) (d) first to tions (b) (d) en mearteri (b)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure I lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine ore frequently than men. Which one of the tis? ESR >50
96. 97. 98.	(c) A 65 coug diste repre (a) (c) In re disea (a) (c) A pa same (a) (c) Temp follo (a) (c)	year old patient presents to the emergency deth and swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medicate Captopril Digoxin poral arteritis is a vasculitis that affects women wing is NOT usually associated with temporal affects of Age >50 years Ischemic papillitis	partnof his patojo (b) (d) ssion (b) (d) first to tions (b) (d) en mearteri (b) (d)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure I lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine ore frequently than men. Which one of the tis? ESR >50 Tender, pulsatile temporal artery
96. 97. 98.	(c) A 65 coug disterepre (a) (c) In redisea (a) (c) A par same (a) (c) Temp follor (a) (c) Char	year old patient presents to the emergency deth and swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medicate Captopril Digoxin poral arteritis is a vasculitis that affects women wing is NOT usually associated with temporal affects acteristics of PCP pneumonia in AIDS patients	partnof his batojo (b) (d) ssion (d) first t tions (d) en mearteri (b) (d) including the control of the control	nent with complaint of shortness of breath, aupper extremities, thoracic and neck vein augular reflux. His condition MOST likely Superior vena cava syndrome Liver failure a lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine ore frequently than men. Which one of the tis? ESR >50 Tender, pulsatile temporal artery ade which of the following features:
96. 97. 98.	(c) A 65 coug diste repre (a) (c) In re disea (a) (c) A pa same (a) (c) Temp follo (a) (c) Char (a)	year old patient presents to the emergency deth and swelling of his hands, you note edema dension, periorbital swelling and an absent heresents: Nephrotic syndrome Congestive heart failure gards to acute pancreatitis which set of admitse? WBC 18,000: LDH 370: Glucose 230 LDH 370: Amylase 800: Albumin 3.2 tient with long history of CHF presents with the medications for years. Which one of his medicate Captopril Digoxin poral arteritis is a vasculitis that affects women wing is NOT usually associated with temporal affects of Age >50 years Ischemic papillitis	partnof his patojo (b) (d) ssion (b) (d) first to tions (b) (d) en mearteri (b) (d) inclu (b)	nent with complaint of shortness of breath, supper extremities, thoracic and neck vein ugular reflux. His condition MOST likely Superior vena cava syndrome Liver failure I lab values is MOST predictive of severe Amylase 650: WBC 18,000: PaO2 65 HCT 33: LDH 370: AST 250 ime acute angioedema. He has been on the is most likely responsible for his symptoms? Lasix Nitroglycerine ore frequently than men. Which one of the tis? ESR >50 Tender, pulsatile temporal artery