MIZORAM PUBLIC SERVICE COMMISSION

MIZORAM HEALTH SERVICES (COMBINED) EXAMINATION UNDER HEALTH & FAMILY WELFARE DEPARTMENT, GOVERNMENT OF MIZORAM, JULY-2024

TECHNICAL SUBJECT PAPER-II

Time Allowed: 2 hours			FM: 200
	All questions carry equal Attempt all ques		
1. Which recover	type of fluid should be administered as a fluid ry?	resu	scitation during the emergent phase of burn
(a) C	Colloids	` '	Ringer's Lactate
(c) F	Fresh-frozen plasma	(d)	Packed red blood cells
2. Percent	tage of burns (extend) are determined by all	exce	pt:
(a) R	Rule of nine	` ′	Patient's palm
(c) P	Parkland formula	(d)	Lund and Browder chart
3. In case	of female commonest hernia is -		
(a) I	Direct inguinal hernia	` ′	Indirect inguinal hernia
(c) F	Femoral hernia	(d)	Incisional hernia
4. Most co	ommon abdominal organ injured in blunt tra	ıma	abdomen is
(a) S	Spleen		Liver
(c) P	Pancreas	(d)	Stomach
5. In seve	ere injury, first to be maintained is -		
(a) I	Hypotension	` '	Dehydration
(c) A	Airway	(d)	Cardiac status
6. Preferr	ed incision for abdominal exploration in Blur		
(a) A	Always midline incision		Depending upon the organ
(c) T	Fransverse incision	(d)	Paramedian
	ent presents in emergency with a cervical spin		
(a) I	Locate the fracture by shifting the patient side	e to s	ide
` '	X-ray of spine		
	Clear the airway and intubate him		
	mmobilise the cervical spine		
8. After h	nead injury, biconvex, lenticular shape hema ing –		
(a) I	Extradural hemorrhage	` '	Subdural hemorrhage
(c) I	Intracerebral hematoma	(d)	Diffuse axonal injury
9. Comm	nonest site of epixtaxis is:		
(a) I	Bony septum	` '	Little's area
(c) S	Superior turbinate	(d)	Lateral wall of nose

10.	. 10 year old boy is having sensorineual deafness, not benefited by hearing aids. Next best management is:				
	(a) Cocchlear implant	(b)	Stapes fixation		
	(c) Stapedectomy	(d)	Fenestration		
11.	A 25 year old man presents with 3 days history of pain in the right lower abdomen and vomitings. Patient's general condition is satisfactory and clinical examination reveals a tender lump in the right				
	iliac fossa. The most appropriate management	in this cas	se would be –		
	(a) Immediate appendectomy	` ,	Exploratory laparotomy		
	(c) Oschner Sherren regimen	. ,	External drainage		
12.	The frequent mechanism in perforation of apper	ndix is—			
	(a) acute inflammation by gut microbes	· aaamatia	no.		
	(b) Tension gangrene due to the accumulating(c) Necrosis of lymphoid patch	3 Secretion	115		
	(d) Retrocaecal function				
13.	Not true about urethral injuries is –				
	(a) Catheterize the patient immediately				
	(b) Can be associated with fracture pelvis				
	(c) Bladder injury is associated with post ures	thral injur	ries		
	(d) Blood at the external urethral meatus is an	n importa	nt feature		
14.	Triple assessment for breast cancer includes:				
	(a) History, Clinical examination and mammo	gram			
	(b) History, Clinical examination and FNAC				
	(c) Ultrasound, Mammogram and FNAC(d) Clinical Examination, Mammogram and F	NAC			
15	What complication commonly occurs in anterio		al ulcer_		
15.	(a) Bleeding		Penetration		
	(c) Perforation		Stricture formation		
16.	'Charcot' triad is –	. ,			
	(a) Fever, pain, vomiting	(b)	Fever, stone, jaundice		
	(c) Gall stone, vomiting, jaundice	(d)	Fever, pain, jaundice		
17.	Most common site of hypertrophic keloid is –				
	(a) Face	, ,	Leg		
	(c) Arm	(d)	Presternal area		
18.	A clean incised wound heals by –				
	(a) Primary intention		Secondary intention		
40	(c) Excessive scarring	(a)	None of these		
19.	Reactionary hemorrhage occurs within –	(b)	2 7 days		
	(a) 1 – 2 days (c) < 24 hours	` ,	2 – 7 days after 7 days		
20	Treatment of contaminated wound in Gas gange		arter 7 days		
20.	(a) Debridement of wound		Antiseptic dressings		
	(c) Metronidazole administration		Peroxide dressings		
21.	Different phases of peri-operative care include:		-		
	(a) Post-operative care		Intraoperative care		
	(c) Palliative care	` ,	Pre-operative care		
22.	Which of the following is a non-absorbable suto				
	(a) Polypropylene		Polyglycolic acid		
	(c) Catgut	(d)	Polydioxanone		

23.	Rams	sted's operation is for -		
	(a)	Duodenal atresia	(b)	Volvulus of small intestine
	(c)	Anorectal malformation	(d)	Congenital pyloric stenosis
24.	Onio	n peel appearance in X-rays suggest –		
		Ewing's sarcoma	(b)	Chondrosarcoma
		Osteogenic sarcoma	(d)	Osteoclastoma
25.	• • •	res of hypovolemic shock are all except –	•	
20.		Oliguria	(b)	Bradycardia
	. ,	Low Blood Pressure		Acidosis
26		ch of the following nerve is commonly damaged	` ′	
20		Subcostal nerve		lliohypogastric nerve
		11 th thoracic nerve		Ilioinguinal nerve
27	` '		` '	-
21.		tient who has fallen over a loose manhole cove nal urethral meatus. Which of the following wi		
		Rupture of bladder		Rupture of bulbar urethra
	` '	Rupture of membranous urethra	, ,	Pelvic organ blunt trauma
20	• •	-	` '	_
28.		ch of the following gas is commonly used in lap		
	` '	N2O	` ′	02
	` '	Helium	(u)	CO2
29.		ings ulcer is seen in –	<i>(</i> 1.)	
		Burn patients		Zollinger Ellison syndrome
	` '	Head injury	(d)	Analgesic drug abuse
30.		's sign seen in splenic rupture is –		
		Periumbilical pain	` ′	Pain over renal angle
	(c)	Pain over left shoulder	(d)	Pain over right scapula
31.	Flap	commonly used in breast reconstruction is -		
	(a)	Serratus anterior flap	(b)	TRAM
	(c)	Pectoralis myocutaneous flap	(d)	Deltopectoral flap
32.	The 1	best investigative modality for gall bladder sto	nes –	
	(a)	Oral cholecystogram	(b)	Percutaneous transhepatic cholangiography
	(c)	Ultrasound	(d)	Intravenous cholangiogram
33.	The	most common type of intussusception is -		
		Ileocolic	(b)	Ileoileal
	(c)	Colo-colic .	(d)	Caeco-colic
34.	Cont	tent of Na' in Ringer lactate is meq/1 -		
		154	(b)	12
	` '	130	` ´	144
35	` ′	unk operation is used in –	` '	
33.		Parotid tumour	(b)	Thyroglossal cyst
	` '	Thyroglossal fistula	(d)	, –
26			(4)	Bom (b) & (c)
30.		most common site of carcinoma tongue is –	(h)	Amical
		Lateral borders		Apical
	` ′	Posterior 1/3 rd	(d)	
37.		under the diaphragm is seen in the following of		
	` '	Perforated duodenal ulcer	` '	Typhoid perforation
	(c)	Post laparotomy	(d)	Rupture of oesophagus

38.	The most sensitive and specific test for acute pancreatitis is:					
	(a)	S. amylase	(b)	C-reactive protein		
	(c)	S. lipase	(d)	Alanine transaminase		
39.	Which of the following is the content of littre's hernia?					
	(a)	Sigmoid colon	(b)	Urinary bladder		
	(c)	Ileum	(d)	Meckel's diverticulum		
40.	Patient complaint of pain at lower abdomen which radiates from loin and groin and anterior thigh. It					
	is mo	st likely due to –				
	(a)	Bladder calculus	` ′	VUR		
	(c)	Ureteric calculus	(d)	Hydronephrosis		
41.	Whic	h of the following is the most common form of a	nalig	gnant melanoma?		
	(a)	Nodular	` '	Superficial spreading		
	(c)	Acral lentiginous	(d)	Mucosal		
42.	Dysp	hagia lusoria is due to –				
	(a)	Oesophageal diverticulum	(b)	Aneurysm of aorta		
	(c)	Oesophageal web	(d)	Compression by aberrant blood vessel		
43.	Most	common site of direct hernia -				
	(a)	Hasselbach's triangle	(b)	Femoral gland		
	(c)	No site prediction	(d)	None of these		
44.	BPH	involves-				
	(a)	Central zone	(b)	Peripheral zone		
	(c)	Transitional zone	(d)	Prostate capsule		
	Drim	b and another model lower who a always a certains				
45.	LIIII	ary nyperparatnyroidism, pheochromocytoma	ma	y be associated with which type of thyroid		
45.	cance	er?				
45.	cance (a)	er? Papillary carcinoma of thyroid	(b)	Medullary carcinoma of thyroid		
45.	cance (a)	er?	(b)			
	cance (a) (c)	er? Papillary carcinoma of thyroid	(b) (d)	Medullary carcinoma of thyroid Anaplastic carcinoma of thyroid		
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52	Fato	Loarding activity can be detected by ultragone	1	at have manner also after attitud
32.		l cardiac activity can be detected by ultrasono 4 weeks		
	` ′	6 weeks	• /	5 weeks
5 2	` '			7 weeks
55.		ortant sonological marker for fetal anomalies in		
	` ′	Peak sign		Lambda sign
	` ′	Triple test		Nuchal translucency
54.		most reliable sonological parameter which refl		
	` '	Abdominal circumference	` `	Nuchal translucency
	• •	Femur length	(d)	Bi-parietal diameter
55.		velaire Uterus is seen in –		
		Abruptio placenta	(b)	Placenta previa
	(c)	Vasa previa	(d)	Placenta accrete
56.	Shee	han's Syndrome is associated with -		
	(a)	Post partum Hemorrhage	(b)	Placenta previa
	(c)	Placenta accreta	(d)	Vasa previa
57.	It is i	mportant to treat patients with asymptomatic l	bacte	riuria in pregnancy because:
		The patient is seriously ill		
	(b)	One third will develop septic shock during pr	egna	ncy
	(c)	One third will develop cystitis during pregnar	ncy	
	(d)	One third will develop acute pyelonephritis d	uring	pregnancy
58.	Wha	t should be the management of an anaemic pati	ient i	f the haemoglobin concentration is less than
	8 g/d	l and the gestational age 37 weeks?		<u> </u>
	(a)	Admit to hospital for bed rest and a good die	et	
	(b)	Admit to hospital for a blood transfusion		
	(c)	Give an intramuscular injection of iron-dextra	ın (In	nferon)
	(d)	Prescribe 1 ferrous sulphate tablet 3 times a d	lay uı	ntil delivery
59.	The r	nost common surgical cause of acute abdomer	n requ	niring surgery during pregnancy is -
	(a)	Calculous cholecystitis	(b)	Acute gastritis
	(c)	Acute Appendicitis	(d)	Ureteric Stone
60.	Abso	olute contraindication of pregnancy in heart dis	sease	includes all except –
		Atrial septal defect		Pulmonary arterial hypertension
	(c)	Ventricular dysfunction (LVEF<30%)		Marfan syndrome with aorta dilated>45mm
61.	Whic	ch of the following is not a Contraindication to	Indu	ction of labor?
		Contracted Pelvis		Previous classical caesarean section
	(c)	Severe Pre-eclampsia	` '	Malpresentation
62.	Labo	r should ideally be monitored with –		•
		Partograph	(b)	Cardiotocograhy
		Bishops score		Apgar score
63.	` ′	c inlet disproportion is seen in all the following	` ′	- -
00.		When the obstetric conjugate is <10 cms	CACC	,pr
		When the greatest transverse diameter is >12	eme	
	` '	When the diagonal conjugate is <11 cms	CIIIS	
		When there is marked asynctilism		
64		•	- تعمروا	an?
U4.		h of the following is not a method of labour inc Misoprostol		
	• •	•		Artificial Rupture of membrace
	(c)	Prostaglanding injection	(u)	Prostaglandin Vaginal Gel

65.	The operative procedure of extracting the p through the anterior wall of uterus is called –	roducts of	conception before 28 weeks, by cutting		
	(a) Caesarean section	(b)	Dilatation and evacuation		
	(c) Culdocentesis	(d)	Hysterotomy		
66.	Fetal intra-cranial hemorrhage is most commo	nly seen in	ı—		
	(a) Ventouse delivery	(b)	External cephalic version		
	(d) Forceps delivery	(d)	Internal podalic version		
67.	The commonest indication of Cesarean hyster	ectomy is-	_		
	(a) Atonic uterus and uncontrolled PPH	(b)	Obstructed labor		
	(c) Ruptured uterus	(d)	Cephalo-pelvic disproportion		
68.	Operation whereby the fetal head is severed from of the trunk and that of severed head per vagin				
	(a) Craniotomy	(b)	Cleidotomy		
	(c) Decapitation	(d)	Evisceration		
69.	Precocious puberty is defined as menarche be	efore the ag	ge of –		
	(a) 14 years	-	11 years		
	(c) 9 years	(d)	16 years		
70.	A 14 year old girl is brought to gynaecology complains of pain lower abdomen for 3-4 days that she has not attained menarche. The most	s, for the la probable d	ast 4-6 months. Her detailed history reveals liagnosis is –		
	(a) Turners syndrome		Delayed puberty		
	(c) Kalman's syndrome	• •	Cryptomenorrhea		
71.	The commonest cause of anovulation in female				
	(a) Endometriosis	` '	PCOS		
	(c) Thyroid dysfunction	(d)	Hyperprolactinemia		
72.	Ovary contains maximum number of oocytes -				
	(a) At intra-uterine life	` '	At childhood		
	(c) At menarche	(d)	At 20-30 years		
73.	. Primary Amennorhoea is –				
	(a) Absence of menarche by 14 years without development of secondary sexual characters				
	(b) Absence of menarche by 16 years with secondary sexual characters				
	(c) Absence of secondary sexual characters by 16 years				
	(d) Absence of menarche by 20 years				
74.	A lady presented with creamy white vaginal di		-		
	(a) Doxycycline	(b)			
	(c) Metronidazole	(d)	Clindarnycin		
<i>7</i> 5.	Most common site for genital tuberculosis is:				
	(a) Ovary	(b)	Uterus		
	(c) Cervix	(d)	Fallopian tube		
76.	All of the following are known risk factors for	the develo	pment of Ovarian Carcinoma Except:		
	(a) Family history of Ovarian Carcinoma	(b)	Use of oral contraceptive pills		
	(c) Use of Clomiphene	(d)	BRCA 1 positive individual		
77.	Largest benign ovarian tumour is:				
	(a) Serous cystadenoma	(b)	Brenner tumour		
	(c) Fibroma	(d)	Mucinous cystadenoma		

78. Which ovarian tumor has got the highest malignant potential?						
	(a)	Mucinous cystadenoma	(b)	Serous cystadenoma		
		Endometrioma	(d)	Dermoid		
79.	Pelvi	c inflammatory disease is attributed to -				
		Cervicitis leading to endometritis, salpingitis,	pelvi	ic peritonitis and tubo-ovarian abscess		
		Ascending spread of micro-organisms	•	-		
		Hematogenous spread of infections towards u	ıppeı	genital tracts		
	(d)	Descending spread of micro-organisms				
80.	In wi	nich case of primary amenorrhoea, gonadecton	ny is i	indicated?		
		Turner's Syndrome		Testicular feminization syndrome		
	` '	MRKH syndrome	(d)	Klinefelter's Syndrome		
81.	Ultra	sound finding in PID include all except –				
		Thickened fallopian tubes	(b)	Incomplete septae		
	• .	Cog-wheel sign		Snow-storm appearance		
82.	` '	causative organism of Pelvic Inflammatory Dis	ease	includes all except –		
02.		Neisseria gonorrhea		Chlamydia trachomatis		
	` '	Candida albicans		Gardnerella		
23	` ′	normal weight gain during pregnancy for norm	` ′			
05.		25-35 LB		15-25 LB		
	• ′	28-40LB	` '	11-20LB		
01	` ,	urrent abortion is defined as –	(-)			
04.	(a) Loss of pregnancy before 20 weeks which occurs 2 times in a row					
		≥ 3 consecutive loss of pregnancy before 20				
		≤ 4 consecutive loss of pregnancy		•••		
	` '	Multiple first trimester loss of pregnancy				
95	` ′	ning scoring system of fetal biophysical profile	inch	ides all except –		
03.		Fetal breathing movement		Amniotic fluid volume		
		Fetal urine production	` .	Fetal movement		
04		enta accreta or percreta with bladder invasion				
ou.		Ultrasonography		Computerized Tomography Scan		
	` `	Magnetic Resonance Imaging		3-d Color Doppler		
07	(*)					
87.		frequency range in obstetric vaginal transduce 5-7 MHz		3-5 MHz		
	` ′	8-10 MHz	` '	12-14 MHz		
00	` '		` ′			
88.		dose of Immunization against neonatal tetanus	s (teta	inus toxold) silould ideally be given—		
	` '	During the third trimester				
	(b)		w io c	onfirmed		
	(c)	During the 1st trimester or once the pregnance	yısc	commined		
^-		Between 16-24 weeks pregnancy				
89.	-	ortant risk factor Placenta accreta is –	Z1. N	Duine annuam de linearre		
	` ,	History of abruption placenta	• •	Prior caesarean delivery		
	(c)	Placenta previa in previous pregnancy	(d)	Succenturiate lobe		

90.	In G	estational Diabetes mellitus, delivery of fetus	at 37	-38 weeks should be planned for –
	(a)	Women on insulin and/or oral hypoglycemic of	lrugs	;
	(b)	Overt or uncontrolled GDM		
	(c)	Well controlled GDM on diet		
	(d)	GDM with suboptimal control		
91.		taglandin should be avoided during labor and d	elive	ery in pregnancy with –
	(a)	Heart Disease	(b)	Hepatitis B & C infection
	(c)	SLE	(d)	Bronchial asthma
92.	Whi	ch of the following sign is clear indication of pe	rfora	tion of Uterus while conducting D&E?
	(a)	Pain felt by the mother	(b)	Frothy currette
	(c)	Sudden loss of resistance	(d)	Grating sensation on curretting
93.	Wha	t is the most common cause for premature over	rian f	ailure?
	(a)	Genetic	(b)	Repeated ovulation induction
	(c)	Primary infertility	(d)	Multiple Child bearing
94.	Whic	ch type of overion tumour undergo torsion com	monl	y during pregnancy?
	(a)	Serous cystaderomous	(b)	Leydic cell tumour
	(c)	Dermoid cyst	(d)	Endometriotic cyst
95.	Whie	ch is the best method for management of AUB	at 44	lyrs, of age?
		ОСР		LNIUD
	(c)	Progesterone support is 2 nd half of cycle	` /	Simple Hysterectony
96.	Whic	ch of the following is an important sign of shoc	k du	e to blood loss?
		A fast pulse rate		A low haemoglobin concentration
	(c)	Concentrated urine		Pyrexia
97.	Wha	t is the definition of anaemia in pregnancy?		•
	(a) A haemoglobin concentration of less than 12 g/dl			
	(b) A haemoglobin concentration of less than 11 g/dl			
	 (c) A haemoglobin concentration of less than 10 g/dl (d) Any patient with shortness of breath irrespective of the haemoglobin concentration 			
98.	. The most life-threatening complication of septic abortion is –			
		Peritonitis		Renal Failure
	(c)	Respiratory Distress Syndrome	(d)	Septicaemia
99.	Most	common cause of 1st trimester abortion is -		
	(a)	Chromosomal abnormalities	(b)	Syphilis
	` '	Rhesus isoimmunization	` ′	Cervical incompetence
100.	Com	monest cause of postmenopausal bleeding is –	. /	-
		Ca endometrium	(b)	Ca cervix
		Ca Vulva	` '	Enomethial atrophy

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