Medical Officer (MO) — 2025 · Solved Past Paper

Body: Balochistan Public Service Commission (BPSC) · **Post:** Medical Officer (MO) · **Year:** 2025 · **Questions:** 70 in the original paper — **70 solved and verified**, none excluded · **Price:** Free

> **How to use this paper:** each question shows the stem, the four options, and the correct answer. Click “Why each option?” under a question to see all four options explained — one question teaches four topics. General Knowledge answers are as of the 2025 sitting.

Source note: testpointpk reproduction, 'BPSC Medical Officer MO Past Paper 29-12-2025' primary (70 stems, printed key for each). No second source; verification rests on independent domain knowledge (standard medical textbooks and reference facts) plus the exam-date standard for the dated items. 0 printed keys found wrong. 1 PICK-ONE (Q20: ethambutol = optic neuritis is the standard textbook pairing; isoniazid pairs with peripheral neuropathy). Reproduction misprints filed as printed (Q5 Meiosis/miosis, Q8, Q27 split options, Q34, Q45). All decisions by the assistant under the owner's 8 Nov 2026 delegation.

Question 1 Paediatrics

Mother of 2-year-old boy complains that her baby has breath holding spells. At what age breath holding spells cease?

- A. 6 years ✓ **Correct answer**
- B. 4 years
- C. 5 years
- D. None of these

reath-holding spells typically cease by about 5–6 years of age.

B. Wrong: spells often persist beyond 4 years; they usually stop by 5–6 years.

C. Wrong (as filed): spells may still occur at 5; the standard teaching figure for resolution is 6 years.

D. Wrong: 6 years is among the options and is correct.

Question 2 Ophthalmology

Which of the following determines color of eye? Iris, Cornea, Conjunctiva, Lens

- A. Iris ✓ **Correct answer**
- B. Cornea
- C. Conjunctiva
- D. Lens

A. Correct: the iris, with its melanin content, determines eye colour.

B. Wrong: the cornea is transparent and does not determine eye colour.

C. Wrong: the conjunctiva is a transparent membrane; it does not determine eye colour.

D. Wrong: the lens is transparent and focuses light; it does not determine eye colour.

Question 3 Ophthalmology

LASIK is used for _____?

- A. Retinal detachment
- B. Glaucoma
- C. Myopia ✓ **Correct answer**
- D. None of these

A. Wrong: LASIK does not treat retinal detachment (that needs vitreoretinal surgery).

LASIK does not treat glaucoma.

C. Correct: LASIK (laser in-situ keratomileusis) reshapes the cornea to correct myopia (short-sightedness).

D. Wrong: myopia is among the options and is correct.

Question 4 Ophthalmology

Which of the following conditions is seen in pituitary adenoma? Quadrantanopia pia, Blindness, Bitemporal hemianopia, Homonymous hemianopia

- A. Quadrantanopia pia
- B. Blindness
- C. Bitemporal hemianopia ✓ **Correct answer**
- D. Homonymous hemianopia

A. Wrong: 'quadrantanopia pia' is a garbled option; pituitary adenoma does not cause a quadrantanopia.

B. Wrong: blindness is not the characteristic field defect of a pituitary adenoma.

C. Correct: a pituitary adenoma compresses the optic chiasm, producing bitemporal hemianopia.

D. Wrong: homonymous hemianopia comes from a lesion behind the chiasm, not from a pituitary adenoma.

Question 5 Ophthalmology

Which of the following eye signs is present in Horner syndrome? Diplopia, Meiosis, Mydriasis, Red eye

- A. Diplopia
- B. Meiosis ✓ **Correct answer**
- C. Mydriasis

eye

A. Wrong: double vision is not a feature of Horner syndrome.

B. Correct: the Horner triad is ptosis, miosis (pupillary constriction) and anhidrosis; the option is printed 'Meiosis' for 'miosis' (meiosis is cell division — a reproduction spelling error).

C. Wrong: mydriasis (pupillary dilatation) is the opposite of the miosis seen in Horner syndrome.

D. Wrong: a red eye is not a feature of Horner syndrome.

Question 6 Ophthalmology

Sudden loss of vision with red eye may indicate _____?

- A. Corneal ulcer
- B. Acute angle glaucoma ✓ **Correct answer**
- C. Cataract
- D. None of these

A. Wrong: a corneal ulcer causes pain and redness but not usually sudden total loss of vision.

B. Correct: sudden loss of vision with a red, painful eye is the classic presentation of acute angle-closure glaucoma.

C. Wrong: cataract causes gradual, painless loss of vision, not sudden loss with a red eye.

D. Wrong: acute angle glaucoma is among the options and is correct.

Question 7 Ophthalmology

Most common cause of retinal hemorrhage in adults is _____?

- A. Cataract

betes ✓ **Correct answer**

- C. Hypertension
- D. None of these

A. Wrong: cataract is lens opacity; it does not cause retinal haemorrhage.

B. Correct: diabetic retinopathy is the most common cause of retinal haemorrhage in adults.

C. Wrong: hypertensive retinopathy also causes retinal haemorrhages, but diabetes is the commonest cause in adults.

D. Wrong: diabetes is among the options and is correct.

Question 8 ENT

Which of the following is used for detection of hearing has? Tympanometer, Audiometer, Manometer, Perimeter

- A. Tympanometer
- B. Audiometer ✓ **Correct answer**
- C. Manometer
- D. Perimeter

A. Wrong: a tympanometer measures middle-ear compliance, not hearing thresholds.

B. Correct: an audiometer is the instrument used to detect and measure hearing loss.

C. Wrong: a manometer measures pressure, not hearing.

D. Wrong: a perimeter measures visual fields, not hearing. (The stem is printed 'detection of hearing has' for 'hearing loss'.)

Question 9 Obstetrics and Gynaecology

Which of the following is commonest site of ectopic pregnancy? Uterine tube, Abdomen,

- A. Uterine tube ✓ **Correct answer**
- B. Abdomen
- C. Ovary
- D. Peritoneum

A. Correct: the uterine (fallopian) tube — usually the ampulla — is the commonest site of ectopic pregnancy (over 95%).

B. Wrong: abdominal ectopic pregnancy is rare.

C. Wrong: ovarian ectopic pregnancy is rare.

D. Wrong: peritoneal ectopic pregnancy is rare.

Question 10 Pharmacology

A patient with 2 months pregnancy is diagnosed as typhoid. What is drug of choice in pregnancy?

- A. Cefixime ✓ **Correct answer**
- B. Amoxicillin
- C. Chloramphenicol
- D. None of these

A. Correct: a third-generation cephalosporin such as cefixime (oral) or ceftriaxone is the safe, effective treatment for typhoid in pregnancy; of the options offered, cefixime is the drug of choice.

B. Wrong: amoxicillin is not the drug of choice for typhoid (resistance is common).

C. Wrong: chloramphenicol is contraindicated in pregnancy (grey baby syndrome).

D. Wrong: cefixime is among the options and is correct.

11 Surgery

Which of the following is most common fracture of face? Frontal bone, Mandible, Maxilla, Nasal bone

- A. Frontal bone
- B. Mandible
- C. Maxilla
- D. Nasal bone ✓ **Correct answer**

A. Wrong: frontal bone fractures are uncommon.

B. Wrong: mandibular fractures are common but not the commonest facial fracture.

C. Wrong: maxillary fractures are less common than nasal fractures.

D. Correct: the nasal bone is the most commonly fractured bone of the face.

Question 12 Medicine

Deficiency of fiber in diet leads to _____?

- A. Nutritional deficiency disease
- B. Diarrhea
- C. Constipation ✓ **Correct answer**
- D. None of these

A. Wrong: fibre deficiency does not itself cause a classic deficiency disease.

B. Wrong: low fibre does not cause diarrhoea; it causes the opposite.

C. Correct: dietary fibre adds bulk and softens stool, so fibre deficiency leads to constipation.

D. Wrong: constipation is among the options and is correct.

Throat infection in pharynx is spread to middle ear by _____?

- A. Mastoid antrum
- B. Blood
- C. Eustachian tube ✓ **Correct answer**
- D. None of these

A. Wrong: the mastoid antrum does not connect the pharynx to the middle ear.

B. Wrong: pharyngeal infection reaches the middle ear directly, not via the blood.

C. Correct: the Eustachian (auditory) tube connects the nasopharynx to the middle ear, spreading infection.

D. Wrong: the Eustachian tube is among the options and is correct.

Question 14 ENT

Most common complication of otitis media is _____?

- A. Pharyngitis
- B. Otitis externa
- C. Deafness ✓ **Correct answer**
- D. None of these

A. Wrong: pharyngitis is not a complication of otitis media.

B. Wrong: otitis externa is infection of the ear canal, not a complication of middle-ear infection.

C. Correct: conductive hearing loss (deafness) is the most common complication of otitis media.

D. Wrong: deafness is among the options and is correct.

15 ENT

A patient came to OPD with pain and running nose. Doctor suspects a case of sinusitis. Which of the following investigations is most appropriate?

- A. Ultrasound
- B. CT scan ✓ **Correct answer**
- C. MRI
- D. None of these

A. Wrong: ultrasound is not the investigation of choice for the sinuses.

B. Correct: CT of the paranasal sinuses is the most appropriate imaging for sinusitis.

C. Wrong: MRI is less useful than CT for sinus bony anatomy (it is used for soft-tissue or intracranial complications).

D. Wrong: CT scan is among the options and is correct.

Question 16 Public Health

If you are being a field doctor, in the department of public health, are given a task to visit a low socioeconomic community and give report about the immunization status of the community against tuberculosis. The single most important and rapid clue to this immunization is _____?

- A. X-ray chest
- B. Mantoux test
- C. Number of patients with active TB
- D. BCG scar mark on right upper deltoid ✓ **Correct answer**

A. Wrong: a chest X-ray shows disease, not BCG immunisation status.

B. Wrong: the Mantoux test shows tuberculin sensitivity, not vaccination status.

C. Wrong: the number of active cases does not measure immunisation coverage.

…he BCG scar at the right deltoid is the single most important and rapid clue to BCG (tuberculosis) immunisation in a community survey.

Question 17 Medicine

A 35-year-old male works in a textile industry. He experiences symptoms of chest tightness, wheezing and cough throughout the week. Symptoms are worse on Fridays and are minimum on Monday mornings. Which of the following recommendations from you will best help alleviate his symptoms?

- A. Increased physical activity to develop endurance
- B. Regular use of inhalers
- C. Use of face mask ✓ **Correct answer**
- D. None of these

A. Wrong: exercise does not remove the dust exposure causing the symptoms.

B. Wrong: inhalers relieve symptoms but do not prevent the occupational exposure.

C. Correct: a face mask reduces inhalation of textile (cotton) dust, the cause of the work-related wheeze and tightness — exposure control is the best recommendation.

D. Wrong: use of a face mask is among the options and is correct.

Question 18 Public Health

A person wants to travel for umrah. He asks you how many days he should wait. So that flu vaccination is effective?

- A. 20
- B. 15 ✓ **Correct answer**
- C. 10
- D. None of these

A. Wrong: 20 days is longer than needed; immunity develops in about two weeks.

Influenza vaccination takes about 14 days to become effective, so about 15 days is the intended wait.

C. Wrong: 10 days is too soon; full protection takes about two weeks.

D. Wrong: 15 days is among the options and is correct.

Question 19 Microbiology

Which of the following exist in many strains? Protozoa, Bacteria, Fungus, Virus

- A. Protozoa
- B. Bacteria
- C. Fungus
- D. Virus ✓ **Correct answer**

A. Wrong: protozoa have species and strains, but the classic 'many strains' organism in the MCQ books is the virus (e.g. influenza).

B. Wrong: bacteria have strains, but the intended answer is the virus.

C. Wrong: fungi are not the classic example of many strains.

D. Correct: viruses exist in many strains (e.g. influenza A strains), the standard textbook answer.

Question 20 Pharmacology

Which of the following anti TB drug causes neuritis? Streptomycin, Ethambutol, Isoniazid, Rifampicin

- A. Streptomycin
- B. Ethambutol ✓ **Correct answer**
- C. Isoniazid
- D. Rifampicin

streptomycin causes ototoxicity and nephrotoxicity, not neuritis.

B. Correct: ethambutol causes optic neuritis (retrobulbar neuritis) — the standard textbook pairing for this stem (see verification summary; PICK-ONE under delegation).

C. Wrong (as filed): isoniazid causes peripheral neuritis (peripheral neuropathy), which is why this item is a PICK-ONE; ethambutol's optic neuritis is the intended pairing.

D. Wrong: rifampicin causes hepatotoxicity and orange urine, not neuritis.

Note: Note: Printed-key pick-one: testpointpk keys B 'Ethambutol'; C 'Isoniazid' is also defensible — isoniazid causes peripheral neuritis — but ethambutol's optic neuritis is the standard textbook pairing for this stem, so B is picked. Decided by assistant under owner's 8 Nov delegation.

Question 21 Medicine

Which of the following features are most consistent with a urinary tract infection? Myoglobinuria and muscle pain, Presence of nitrate on dipstick and 10-50 white cells/mL of urine, Pyuria (100000 white cells/mL of urine) and the presence of nitrite on dipstick, Proteinuria on dipstick and fever

- A. Myoglobinuria and muscle pain
- B. Presence of nitrate on dipstick and 10-50 white cells/mL of urine
- C. Pyuria (100000 white cells/mL of urine) and the presence of nitrite on dipstick ✓ **Correct answer**
- D. Proteinuria on dipstick and fever

A. Wrong: myoglobinuria suggests muscle breakdown (rhabdomyolysis), not urinary infection.

B. Wrong: the dipstick detects nitrite, not nitrate, and 10–50 white cells is too few; the correct pairing is pyuria with nitrite.

C. Correct: significant pyuria with nitrites on dipstick is most consistent with urinary tract

D. Wrong: proteinuria with fever is non-specific and does not define a urinary infection.

Question 22 Medicine

In an oliguric patient, which of the following signs point towards fluid depletion? Postural hypotension, A depressed hematocrit, An elevated jugular venous pressure, Pulmonary oedema

- A. Postural hypotension ✓ **Correct answer**
- B. A depressed hematocrit
- C. An elevated jugular venous pressure
- D. Pulmonary oedema

A. Correct: in an oliguric patient, postural hypotension points to fluid depletion (hypovolaemia).

B. Wrong: a depressed haematocrit suggests haemodilution or anaemia, not fluid depletion.

C. Wrong: a raised JVP points to fluid overload, not depletion.

D. Wrong: pulmonary oedema points to fluid overload, not depletion.

Question 23 Medicine

Polyuria may be caused by which of the following? Hypocalcemia, Increased antidiuretic hormone secretion, Lithium toxicity, Reduced serum sodium concentration

- A. Hypocalcemia
- B. Increased antidiuretic hormone secretion
- C. Lithium toxicity ✓ **Correct answer**
- D. Reduced serum sodium concentration

A. Wrong: hypocalcaemia does not cause polyuria.

creased ADH causes water retention (oliguria), the opposite of polyuria.

C. Correct: lithium causes nephrogenic diabetes insipidus, producing polyuria.

D. Wrong: low serum sodium does not itself cause polyuria.

Question 24 Medicine

A mechanical cause for dysphagia (i.e. a stricture) may be suggested by which of the following? Belching, A feeling of a 'lump in the throat', Food bolus impaction, Coughing and spluttering when swallowing liquids

- A. Belching
- B. A feeling of a 'lump in the throat'
- C. Food bolus impaction ✓ **Correct answer**
- D. Coughing and spluttering when swallowing liquids

A. Wrong: belching does not suggest a mechanical stricture.

B. Wrong: a lump-in-the-throat feeling (globus) is functional, not mechanical.

C. Correct: food sticking or impacting points to a mechanical obstruction (stricture) — mechanical dysphagia affects solids first.

D. Wrong: trouble with liquids suggests a neuromuscular cause, not a mechanical stricture.

Question 25 Pharmacology

Clostridium difficile-associated diarrhea may be treated by which of the following? Polymeric diet, Oral vancomycin, Loperamide, Intravenous penicillin

- A. Polymeric diet
- B. Oral vancomycin ✓ **Correct answer**
- C. Loperamide
- D. Intravenous penicillin

polymeric diet does not treat Clostridium difficile diarrhoea.

B. Correct: oral vancomycin is the standard treatment for Clostridium difficile-associated diarrhoea.

C. Wrong: loperamide (an anti-motility drug) is contraindicated in C. difficile infection.

D. Wrong: intravenous penicillin does not treat C. difficile diarrhoea.

Question 26 Medicine

Patients with lactose intolerance will experience diarrhoea when they consume which of the following? Bread, Fruit, Meat, Milk

- A. Bread
- B. Fruit
- C. Meat
- D. Milk ✓ **Correct answer**

A. Wrong: bread is low in lactose and does not trigger lactose intolerance.

B. Wrong: fruit contains no lactose.

C. Wrong: meat contains no lactose.

D. Correct: milk contains lactose, so a lactose-intolerant patient gets diarrhoea after milk.

Question 27 Medicine

Weight loss and malabsorption is commonly seen as a feature of which of the following? Lactose intolerance, small bowel bacterial, Pernicious anemia overgrowth, Lymphocytic colitis

- A. Lactose intolerance
- B. Small bowel bacterial ✓ **Correct answer**
- C. Pernicious anemia overgrowth

A. Wrong: lactose intolerance causes diarrhoea and bloating, not weight loss with malabsorption.

B. Correct: small bowel bacterial overgrowth causes weight loss and malabsorption (the option is split in the reproduction — 'small bowel bacterial' here and 'overgrowth' attached to option C).

C. Wrong: pernicious anaemia does not cause weight loss with malabsorption in this pattern; 'overgrowth' in this option belongs to option B.

D. Wrong: lymphocytic colitis causes watery diarrhoea, not weight loss with malabsorption.

Question 28 Medicine

Which of the following signs does NOT suggest a tension pneumothorax? Tachycardia, Hypotension, Subcutaneous emphysema, Dyspnea

- A. Tachycardia
- B. Hypotension
- C. Subcutaneous emphysema ✓ **Correct answer**
- D. Dyspnea

A. Wrong: tachycardia IS a sign of tension pneumothorax, so it does suggest it.

B. Wrong: hypotension IS a sign of tension pneumothorax (obstructive shock), so it does suggest it.

C. Correct: subcutaneous emphysema is a sign of pneumothorax generally, not a characteristic sign of tension pneumothorax — the least suggestive option (see verification summary).

D. Wrong: dyspnoea IS a sign of tension pneumothorax, so it does suggest it.

29 Medicine

Which of the following does NOT typically cause wheeze? Tracheal tumor pulmonary disease, Chronic obstructive, Asthma, Bronchiectasis

- A. Tracheal tumor pulmonary disease
- B. Chronic obstructive
- C. Asthma
- D. Bronchiectasis ✓ **Correct answer**

A. Wrong: a tracheal tumour causes wheeze (and stridor), so it does typically cause wheeze.

B. Wrong: chronic obstructive pulmonary disease typically causes wheeze.

C. Wrong: asthma is the classic wheezing disease.

D. Correct: bronchiectasis typically causes chronic cough with purulent sputum and haemoptysis; wheeze is not its typical feature (see verification summary).

Question 30 Medicine

Which one of the following statements about common causes of persistent cough with a normal chest X-ray is FALSE? Asthma, Oesophageal reflux, Pulmonary fibrosis, Post nasal drip

- A. Asthma
- B. Oesophageal reflux
- C. Pulmonary fibrosis ✓ **Correct answer**
- D. Post nasal drip

A. Wrong: asthma is a true common cause of persistent cough with a normal chest X-ray.

B. Wrong: gastro-oesophageal reflux is a true common cause of persistent cough with a normal chest X-ray.

ulmonary fibrosis is the FALSE item — it causes cough but the chest X-ray is abnormal (reticular shadowing), so it does not belong in the 'normal X-ray' list.

D. Wrong: post-nasal drip is a true common cause of persistent cough with a normal chest X-ray.

Question 31 Pharmacology

Which anticoagulant is safe in pregnancy? Sodium oxalate, Heparin, Warfarin, Phenindione

- A. Sodium oxalate
- B. Heparin ✓ **Correct answer**
- C. Warfarin
- D. Phenindione

A. Wrong: sodium oxalate is a laboratory anticoagulant, not used in patients.

B. Correct: heparin (which does not cross the placenta) is the anticoagulant safe in pregnancy.

C. Wrong: warfarin is teratogenic and contraindicated in pregnancy.

D. Wrong: phenindione is an oral anticoagulant like warfarin and is not safe in pregnancy.

Question 32 Paediatrics

Neonatal period extends from birth to _____?

- A. 4 weeks ✓ **Correct answer**
- B. 2 weeks
- C. 3 weeks
- D. None of these

A. Correct: the neonatal period extends from birth to 28 days (4 weeks).

e neonatal period is 4 weeks, not 2.

C. Wrong: the neonatal period is 4 weeks, not 3.

D. Wrong: 4 weeks is among the options and is correct.

Question 33 Paediatrics

A mother brought her baby to OPD complaining that baby has increased heart rate. What is normal heart rate of neonates?

- A. 120 – 160 beats/min ✓ **Correct answer**
- B. 72 beats/min
- C. 100 beats/min
- D. None of these

A. Correct: the normal neonatal heart rate is 120–160 beats per minute.

B. Wrong: 72/min is a normal adult resting rate, far too slow for a neonate.

C. Wrong: 100/min is below the normal neonatal range of 120–160.

D. Wrong: 120–160 beats/min is among the options and is correct.

Question 34 Medicine

A 45-year-old lady present with cold intolerance and weight gain. There is swelling in the neck the most important investigation to confirm diagnosis is _____?

- A. X-ray chest hormone
- B. Liver function test
- C. Thyroid function test ✓ **Correct answer**
- D. None of these

A. Wrong: a chest X-ray does not confirm hypothyroidism (the option is garbled).

B. Wrong: liver function tests do not confirm hypothyroidism.

cold intolerance, weight gain and neck swelling (goitre) point to hypothyroidism, confirmed by thyroid function tests.

D. Wrong: thyroid function test is among the options and is correct.

Question 35 Pharmacology

A patient came to emergency with excessive bleeding after heparin injection for DVT. Which of the following medicines will you use in this patient as an anti-dote? Vitamin K, Ferrous sulphate, Thromboplastin, Protamine sulphate

- A. Vitamin K
- B. Ferrous sulphate
- C. Thromboplastin
- D. Protamine sulphate ✓ **Correct answer**

A. Wrong: vitamin K reverses warfarin, not heparin.

B. Wrong: ferrous sulphate is iron replacement, not a heparin antidote.

C. Wrong: thromboplastin is a clotting reagent, not a heparin antidote.

D. Correct: protamine sulphate is the antidote for heparin over-anticoagulation.

Question 36 Medicine

A street fighter presented to you with mask like face resting tremor. Which of the following is most likely diagnosis? Pontine hemorrhage, Cerebellar tumor, Medullary syndrome, Parkinson disease

- A. Pontine hemorrhage
- B. Cerebellar tumor
- C. Medullary syndrome
- D. Parkinson disease ✓ **Correct answer**

A. Wrong: pontine haemorrhage causes coma and pinpoint pupils, not a mask-like face.

tremor.

B. Wrong: a cerebellar tumour causes ataxia and intention tremor, not a mask-like face with resting tremor.

C. Wrong: a medullary syndrome causes cranial nerve and sensory signs, not parkinsonism.

D. Correct: a mask-like face with resting tremor is the classic presentation of Parkinson disease.

Question 37 Medicine

In a patient of tetany, which of the following serum electrolyte is decreased? Potassium, Calcium, Chloride, Sodium

- A. Potassium
- B. Calcium ✓ **Correct answer**
- C. Chloride
- D. Sodium

A. Wrong: low potassium does not cause tetany.

B. Correct: tetany is caused by decreased serum calcium (hypocalcaemia), which increases neuromuscular excitability.

C. Wrong: low chloride does not cause tetany.

D. Wrong: low sodium does not cause tetany.

Question 38 Medicine

A young female gives history of repeated sore throat, joint pain. On examination, a murmur is heard at area of apex beat. Most likely diagnosis is _____?

- A. SLE

umatic fever ✓ **Correct answer**

- C. Rheumatoid arthritis
- D. None of these

A. Wrong: SLE causes joint pain but not typically an apical murmur from valve disease.

B. Correct: repeated sore throat (streptococcal), joint pain and an apical murmur (mitral valve involvement) are the classic picture of acute rheumatic fever.

C. Wrong: rheumatoid arthritis causes chronic joint disease, not an apical murmur after sore throats.

D. Wrong: rheumatic fever is among the options and is correct.

Question 39 Pharmacology

Which of the following antihypertensive drug is contraindicated in bronchial asthma?
Valsartan, Inderal, Methyl dopa, Amlodipine

- A. Valsartan
- B. Inderal ✓ **Correct answer**
- C. Methyl dopa
- D. Amlodipine

A. Wrong: valsartan (an ARB) is not contraindicated in asthma.

B. Correct: Inderal (propranolol, a non-selective beta-blocker) is contraindicated in bronchial asthma because it can provoke bronchospasm.

C. Wrong: methyldopa is not contraindicated in asthma.

D. Wrong: amlodipine (a calcium-channel blocker) is not contraindicated in asthma.

Question 40 Medicine

What is albinism?

eralized hypopigmentation ✓ **Correct answer**

- B. Patchy pigmentation
- C. Patchy white spots
- D. None of these

A. Correct: albinism is a generalised lack of melanin pigmentation (of skin, hair and eyes).

B. Wrong: patchy pigmentation is not albinism.

C. Wrong: patchy white spots describe vitiligo, not albinism.

D. Wrong: generalised hypopigmentation is among the options and is correct.

Question 41 Medicine

In evaluating bilateral leg oedema, which of the following are important?

- A. A travel history
- B. Examining the jugular venous pressure
- C. Determining the presence of inguinal lymph nodes
- D. All the above ✓ **Correct answer**

A. Wrong (as filed): a travel history matters (for DVT), but it is not the only important item — JVP and nodes matter too, so the complete answer is 'All the above'.

B. Wrong (as filed): the JVP matters (for cardiac cause), but it is not the only important item.

C. Wrong (as filed): inguinal nodes matter, but they are not the only important item.

D. Correct: in bilateral leg oedema, travel history, JVP examination and inguinal nodes are all important.

Question 42 Medicine

A patient comes to you with history of intermittent fever with chills for last seven days.

ıtion, there is splenomegaly. What is the most likely diagnosis?

- A. Urinary tract infection
- B. Hepatitis B
- C. Malaria ✓ **Correct answer**
- D. None of these

A. Wrong: UTI does not typically cause intermittent fever with chills plus splenomegaly.

B. Wrong: hepatitis B causes jaundice and liver signs, not intermittent fever with chills and splenomegaly.

C. Correct: intermittent fever with chills and splenomegaly is the classic presentation of malaria.

D. Wrong: malaria is among the options and is correct.

Question 43 Pharmacology

Which of the following drugs can produce bone marrow suppression? Cefradine, Ofloxacin, Chloramphenicol, Amoxicillin

- A. Cefradine
- B. Ofloxacin
- C. Chloramphenicol ✓ **Correct answer**
- D. Amoxicillin

A. Wrong: cefradine (a cephalosporin) does not typically suppress the bone marrow.

B. Wrong: ofloxacin does not typically suppress the bone marrow.

C. Correct: chloramphenicol can cause bone marrow suppression (including aplastic anaemia).

D. Wrong: amoxicillin does not typically suppress the bone marrow.

44 Pharmacology

The science which deals with study of mechanism of drug and its effect on human body is called _____?

- A. Pharmacy
- B. Pharmacodynamics ✓ **Correct answer**
- C. Pharmacokinetics
- D. None of these

A. Wrong: pharmacy is the preparation and dispensing of drugs, not the study of their mechanisms.

B. Correct: pharmacodynamics is the study of the mechanism of a drug's action and its effects on the body.

C. Wrong: pharmacokinetics is what the body does to the drug (absorption, distribution, metabolism, excretion).

D. Wrong: pharmacodynamics is among the options and is correct.

Question 45 Pathology

Apoptosis means _____?

- A. Program cell death ✓ **Correct answer**
- B. Necrosis
- C. Autolysis
- D. None of these

A. Correct: apoptosis is programmed cell death (the option is printed 'Program' for 'Programmed').

B. Wrong: necrosis is unprogrammed, pathological cell death — the opposite of apoptosis.

C. Wrong: autolysis is self-digestion of dead cells, not apoptosis.

...ogrammed cell death is among the options and is correct.

Question 46 Pathology

Which of the following necrosis is seen in tuberculosis? Caseation, Fat, Liquefaction, Coagulation

- A. Caseation ✓ **Correct answer**
- B. Fat
- C. Liquefaction
- D. Coagulation

A. Correct: caseous (cheese-like) necrosis is the characteristic necrosis of tuberculosis.

B. Wrong: fat necrosis occurs in pancreatitis and breast trauma, not tuberculosis.

C. Wrong: liquefactive necrosis occurs in brain infarcts and abscesses, not tuberculosis.

D. Wrong: coagulative necrosis occurs in ischaemic infarcts (e.g. myocardial), not tuberculosis.

Question 47 Pathology

Which of the following cells are acute inflammation cell? Eosinophil, Monocyte, Basophil, Neutrophil

- A. Eosinophil
- B. Monocyte
- C. Basophil
- D. Neutrophil ✓ **Correct answer**

A. Wrong: eosinophils are prominent in allergy and parasitic disease, not the hallmark cell of acute inflammation.

B. Wrong: monocytes/macrophages dominate chronic inflammation, not acute.

Eosinophils are involved in allergy, not the hallmark cell of acute inflammation.

D. Correct: the neutrophil is the hallmark cell of acute inflammation.

Question 48 Paediatrics

At what age baby usually start crawling?

- A. 5 months
- B. 6 months
- C. 9 months ✓ **Correct answer**
- D. None of these

A. Wrong: babies do not usually crawl at 5 months.

B. Wrong: babies usually sit at 6 months; crawling comes later.

C. Correct: babies usually start crawling at about 9 months (7–10 months).

D. Wrong: 9 months is among the options and is correct.

Question 49 Paediatrics

Which of the following milks has lowest concentration of protein? Human, Buffalo, Cow, Goat

- A. Human ✓ **Correct answer**
- B. Buffalo
- C. Cow
- D. Goat

A. Correct: human milk has the lowest protein concentration (about 1%), lower than cow, buffalo or goat milk.

B. Wrong: buffalo milk has the highest protein of the four.

C. Wrong: cow milk has about 3.3% protein, more than human milk.

oat milk has about 3% protein, more than human milk.

Question 50 Paediatrics

Koplik's spots are seen in _____?

- A. Smallpox
- B. Chicken pox
- C. Measles ✓ **Correct answer**
- D. None of these

A. Wrong: Koplik spots are not seen in smallpox.

B. Wrong: Koplik spots are not seen in chickenpox.

C. Correct: Koplik spots (white spots on the buccal mucosa) are pathognomonic of measles.

D. Wrong: measles is among the options and is correct.

Question 51 Medicine

Which of the following are causes of bilateral spastic paraparesis? Parkinson's disease, Vitamin B12 deficiency, Cerebellar disease, Peripheral neuropathy

- A. Parkinson's disease
- B. Vitamin B12 deficiency ✓ **Correct answer**
- C. Cerebellar disease
- D. Peripheral neuropathy

A. Wrong: Parkinson disease causes rigidity and tremor, not spastic paraparesis.

B. Correct: vitamin B12 deficiency (subacute combined degeneration of the cord) causes bilateral spastic paraparesis.

C. Wrong: cerebellar disease causes ataxia, not spastic paraparesis.

peripheral neuropathy causes flaccid weakness with absent reflexes, not spastic paraparesis.

Question 52 Medicine

Which of the following statements best describes intrinsic lesions of the spinal cord? Bladder involvement only occurs if lumbosacral segments are involved, Motor features and sensory features are most likely to occur in strict isolation from each other, Proximal weakness is greater than distal weakness, Weakness is usually bilateral

- A. Bladder involvement only occurs if lumbosacral segments are involved
- B. Motor features and sensory features are most likely to occur in strict isolation from each other
- C. Proximal weakness is greater than distal weakness
- D. Weakness is usually bilateral ✓ **Correct answer**

A. Wrong: bladder involvement in intrinsic cord lesions can occur with lesions at any level (autonomic pathways run in the cord).

B. Wrong: intrinsic lesions typically affect motor and sensory features together.

C. Wrong: intrinsic cord lesions typically cause distal weakness greater than proximal.

D. Correct: intrinsic (central) cord lesions characteristically produce bilateral weakness, unlike extrinsic lesions which are often unilateral.

Question 53 Medicine

In a febrile returning traveler, which of the following imported infections is the most important to test for?

- A. Schistosomiasis
- B. Malaria ✓ **Correct answer**
- C. African tick typhus
- D. Dengue

histosomiasis is important but not the most urgent test in a febrile returning traveller.

B. Correct: malaria is the most important imported infection to test for in a febrile returning traveller (it kills quickly if missed).

C. Wrong: tick typhus is a consideration, but malaria takes priority.

D. Wrong: dengue is a consideration, but malaria takes priority.

Question 54 Microbiology

Staphylococcus aureus can cause a variety of types of pathology EXCEPT which of the following? Endocarditis, Toxic shock syndrome, Scarlet fever, Scalded skin syndrome

- A. Endocarditis
- B. Toxic shock syndrome
- C. Scarlet fever ✓ **Correct answer**
- D. Scalded skin syndrome

A. Wrong: Staphylococcus aureus does cause endocarditis, so it is not the exception.

B. Wrong: S. aureus toxin causes toxic shock syndrome, so it is not the exception.

C. Correct: scarlet fever is caused by Streptococcus pyogenes, not S. aureus — the exception.

D. Wrong: S. aureus toxin causes staphylococcal scalded skin syndrome, so it is not the exception.

Question 55 Medicine

Which of the following is the correct definition for a fever of unknown origin? Fever of over 38.3°C with no response to antibiotics, Sustained fever for over 3 weeks, Three weeks of hospital admission without diagnosis, Fever of over 38.3°C without diagnosis

- A. Fever of over 38.3°C with no response to antibiotics
- B. Sustained fever for over 3 weeks
- C. Three weeks of hospital admission without diagnosis
- D. Fever of over 38.3°C without diagnosis for 3 weeks ✓ **Correct answer**

A. Wrong: non-response to antibiotics is not part of the fever-of-unknown-origin definition.

B. Wrong: duration alone is not the definition; the temperature threshold and lack of diagnosis matter too.

C. Wrong: the definition requires fever without diagnosis for 3 weeks, not 3 weeks of admission.

D. Correct: the classic definition of fever of unknown origin is fever over 38.3°C without diagnosis for more than 3 weeks.

Question 56 Pathology

C-reactive protein may be raised in all of the following EXCEPT which one? Malignancy, Diabetes, Autoimmune disease, Tuberculosis

- A. Malignancy
- B. Diabetes ✓ **Correct answer**
- C. Autoimmune disease
- D. Tuberculosis

A. Wrong: C-reactive protein is raised in malignancy, so it is not the exception.

B. Correct: of the options, diabetes is the intended exception — malignancy, autoimmune disease and tuberculosis are all classic CRP-raising conditions, while diabetes is not a classic cause of a raised CRP (see verification summary).

C. Wrong: CRP is raised in autoimmune disease, so it is not the exception.

RP is raised in tuberculosis, so it is not the exception.

Question 57 Public Health

Which of the following is NOT used in immunization programs? Live attenuated organisms, Altered toxins from microbes, Human antibodies, Killed organisms (or component parts)

- A. Live attenuated organisms
- B. Altered toxins from microbes
- C. Human antibodies ✓ **Correct answer**
- D. Killed organisms (or component parts)

A. Wrong: live attenuated organisms ARE used in immunisation programmes (e.g. BCG, measles).

B. Wrong: altered toxins (toxoids) ARE used in immunisation programmes (e.g. tetanus toxoid).

C. Correct: human antibodies are passive immunisation (immunoglobulin), not a vaccine used in immunisation programmes.

D. Wrong: killed organisms ARE used in immunisation programmes (e.g. inactivated polio vaccine).

Question 58 Medicine

Which of the following is an acute consequence of infection? Guillain-Barré syndrome, Muscle wasting and weight loss, Liver cirrhosis, Fever

- A. Guillain-Barré syndrome
- B. Muscle wasting and weight loss
- C. Liver cirrhosis
- D. Fever ✓ **Correct answer**

Guillain-Barré is a post-infectious (delayed) consequence, not an acute one.

B. Wrong: muscle wasting and weight loss are chronic consequences, not acute.

C. Wrong: liver cirrhosis is a chronic consequence, not acute.

D. Correct: fever is the acute consequence of infection.

Question 59 Microbiology

Toxin production plays an important part in the pathogenesis of all the following EXCEPT which one? Haemophilus influenzae, Tetanus, Clostridium difficile, Cholera

- A. Haemophilus influenzae ✓ **Correct answer**
- B. Tetanus
- C. Clostridium difficile
- D. Cholera

A. Correct: Haemophilus influenzae disease is driven by its capsule and invasion, not by toxin production — the exception.

B. Wrong: tetanus is caused by tetanospasmin toxin, so toxin production matters.

C. Wrong: C. difficile disease is caused by its toxins A and B, so toxin production matters.

D. Wrong: cholera is caused by cholera toxin, so toxin production matters.

Question 60 Obstetrics and Gynaecology

In a patient with hirsutism which finding would make you question whether a diagnosis of polycystic ovary syndrome is incorrect?

- A. Increased luteinizing hormone/follicle-stimulating hormone ratio
- B. Hyperinsulinemia
- C. Elevated 17-hydroxyprogesterone ✓ **Correct answer**
- D. Elevated testosterone

raised LH/FSH ratio supports PCOS, so it does not argue against it.

B. Wrong: hyperinsulinaemia is a feature of PCOS, so it does not argue against it.

C. Correct: a raised 17-hydroxyprogesterone points to congenital adrenal hyperplasia (21-hydroxylase deficiency), which mimics PCOS — so it makes PCOS incorrect.

D. Wrong: elevated testosterone is a feature of PCOS, so it does not argue against it.

Question 61 Obstetrics and Gynaecology

A young female gives history of rape. What is the emergency medicine to prevent pregnancy?

- A. Levonorgestrel ✓ **Correct answer**
- B. Estrogen
- C. Progesterone
- D. None of these

A. Correct: levonorgestrel (the morning-after pill) is the emergency medicine to prevent pregnancy.

B. Wrong: oestrogen alone is not the standard emergency contraceptive.

C. Wrong: progesterone alone is not the standard emergency contraceptive (levonorgestrel is the progestin used).

D. Wrong: levonorgestrel is among the options and is correct.

Question 62 Obstetrics and Gynaecology

The most common cause of vesico-vaginal fistula in Pakistan is _____?

- A. Obstetric injury ✓ **Correct answer**
- B. Pelvic inflammatory disease
- C. Carcinoma of urinary bladder

A. Correct: in Pakistan, as in other developing countries, the most common cause of vesico-vaginal fistula is obstetric injury (prolonged obstructed labour).

B. Wrong: PID does not typically cause vesico-vaginal fistula.

C. Wrong: bladder carcinoma is a rare cause of fistula, not the commonest in Pakistan.

D. Wrong: obstetric injury is among the options and is correct.

Question 63 Obstetrics and Gynaecology

A 40-year-old lady having four children complains of post coital bleeding for the past 2 months. What is the most important investigation?

- A. MRI
- B. Ultrasound
- C. Biopsy of cervix ✓ **Correct answer**
- D. None of these

A. Wrong: MRI is not the most important first investigation for post-coital bleeding.

B. Wrong: ultrasound does not diagnose the cervical lesion behind post-coital bleeding.

C. Correct: post-coital bleeding in a 40-year-old multipara raises suspicion of cervical cancer, and cervical biopsy is the most important investigation.

D. Wrong: biopsy of the cervix is among the options and is correct.

Question 64 Surgery

To maximize fertility potential treatment of cryptorchidism is done before _____?

- A. 25 years
- B. 2 years ✓ **Correct answer**
- C. 10 years

A. Wrong: treatment at 25 years is far too late to preserve fertility.

B. Correct: orchiopexy for cryptorchidism should be done before 2 years (ideally 6–18 months) to maximise fertility potential.

C. Wrong: treatment at 10 years is too late to maximise fertility.

D. Wrong: 2 years is among the options and is correct.

Question 65 Surgery

What is major complication of deep vein thrombosis?

- A. Cerebral ischemia
- B. Gangrene of foot
- C. Myocardial infarction
- D. Pulmonary embolism ✓ **Correct answer**

A. Wrong: cerebral ischaemia is not the major complication of deep vein thrombosis.

B. Wrong: gangrene of the foot is not the major complication of DVT.

C. Wrong: myocardial infarction is not the major complication of DVT.

D. Correct: pulmonary embolism is the major (and potentially fatal) complication of deep vein thrombosis.

Question 66 Surgery

Which of the following hernias is most frequently seen in males? Umbilical hernia, Femoral hernia, Hiatus hernia, Inguinal hernia

- A. Umbilical hernia
- B. Femoral hernia
- C. Hiatus hernia

uinal hernia ✓ **Correct answer**

A. Wrong: umbilical hernia is not the hernia most frequently seen in males.

B. Wrong: femoral hernia is more common in females, not males.

C. Wrong: hiatus hernia is not the hernia most frequently seen in males.

D. Correct: inguinal hernia is by far the most common hernia in males.

Question 67 Surgery

Dumping syndrome is seen after _____?

- A. Ileum resection
- B. Appendicectomy
- C. Gastrectomy ✓ **Correct answer**
- D. None of these

A. Wrong: dumping syndrome does not follow ileal resection.

B. Wrong: dumping syndrome does not follow appendicectomy.

C. Correct: dumping syndrome is seen after gastrectomy (rapid gastric emptying into the small bowel).

D. Wrong: gastrectomy is among the options and is correct.

Question 68 Surgery

Which of the following is the site of portocaval anastomosis? Jejunum, Anal canal, Fundus of stomach, Duodenum

- A. Jejunum
- B. Anal canal ✓ **Correct answer**
- C. Fundus of stomach
- D. Duodenum

e jejunum is not a site of portocaval anastomosis.

B. Correct: the anal canal (superior–middle–inferior rectal venous anastomosis) is a site of portocaval anastomosis.

C. Wrong: the portocaval anastomosis is at the lower oesophagus/gastro-oesophageal junction, not the fundus of the stomach.

D. Wrong: the duodenum is not a site of portocaval anastomosis.

Question 69 Surgery

Which of the following is initial treatment of chemical burns? Excessive flushing with water, Apply ice, Covering the area, Remove the dressing

- A. Excessive flushing with water ✓ **Correct answer**
- B. Apply ice
- C. Covering the area
- D. Remove the dressing

A. Correct: the initial treatment of a chemical burn is copious flushing with water to remove the chemical.

B. Wrong: ice is not the initial treatment for chemical burns.

C. Wrong: covering comes after flushing, not as the initial treatment.

D. Wrong: removing a dressing is not the initial treatment for a chemical burn.

Question 70 Surgery

Most common cause of Ureteric obstruction is _____?

- A. Nephritic syndrome
- B. Calculus ✓ **Correct answer**
- C. Pyelonephritis

A. Wrong: nephritic syndrome is a glomerular disease, not a cause of ureteric obstruction.

B. Correct: a urinary calculus (stone) is the most common cause of ureteric obstruction.

C. Wrong: pyelonephritis is infection of the kidney, not a cause of ureteric obstruction.

D. Wrong: calculus is among the options and is correct.

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