

1) CA of skin of scrotum goes to \rightarrow Superficial Inguinal Nodes.

2) Superior Mesenteric Lymph Nodes drain \Rightarrow Jejunum.

3) Ant relations of kidney
Left \Rightarrow a) Body of Spleen.
b) ~~Left~~ Inf br of Left Colic
c) Iliohypogastric Nerve

4) In Inspiration \Rightarrow a) Venous return to heart \uparrow
b) Chest wall spring out & Abdomen bulges out (something like dot)

5) Extensor Indicis Supplied by \Rightarrow Deep br of Radial Nerve.

6) About Parotid Gland \Rightarrow a) Separated by submandibular gland by stylomandibular lig.
b) External Carotid pass above facial Nerve.
c) Secretomotor fibres from facial Nerve.

7) Anterior dislocation of Femur on Tibia \Rightarrow Post Cruciate Ligament injured

[N.B: Ant dislocation of Femur on Tibia \rightarrow Ant Cruciate
Ant " " Femur on Tibia \rightarrow Post Cruciate injured]

8) In a young boy CA affecting Epiphysis => a) Osteoblastoma.
(Giant Cell Tumour wasn't given) b) Chondroma.

9) Parathyroid Gland develops from => a) III Pharyngeal Pouch
(very confusing beuz sup or inferior b) IV " "
was not mentioned) c) Not from pouches.

10) Most appropriate about small intestine => a) may be 7-8m long
b) Mesentery arise Rt to L2 vertebra.
c) only 5cm visible by enema preparations something
d) Two options were abt a something sulcus (idnt remember really)

12) King About Aorta appropriate => Give renal arteries at L2.

13) Appropriate about Liver => a) Quadrate lobe, factually/ functionally part of Rt Lobe
b) Hepatic veins arise outside the liver & are not connected/ associated w liver (dont remember exactly.
c) Porta hepatis covered in double layer of lesser sac & 1

14) Furosemide to treat => a) Pulmonary edema (i marked dis)
b) Calciuria something tha.

15) Potent Good analgesic but poor anesthetic => Nitrous Oxide

- 16) Corpus Callosum appropriate is \Rightarrow a) Connects two hippocampus
 b) Winds around at post border to form forceps major
 c) connects wide gyri \bar{e} in same hemis phere.
- 17) Epithelium of kidney derived from \Rightarrow Mesoderm
- 18) Epithelium of Thyroid was asked.
- 19) Chorea caused by \Rightarrow Caudate Nucleus
- 20) Athetosis " " \Rightarrow Caudate Nucleus.
 [i don't remember if dis was in paper I or II but 2 different questions were asked about Caudate]
- 21) Artery winding around neck of femur blocked \Rightarrow Medial & lat circumflex femoral causing avascular of femoral head
- 22) Artery supplying head of humerus \Rightarrow Arcuate artery.
- 23) Eversion of foot by \Rightarrow peroneus longus
- 24) Oesophageal aneurysm (severe dilatation) will affect \bar{e} parts of heart \Rightarrow a) Left Atrium
 b) Left auricle
 c) Left Right Atrium

25) If head tilted to Right ^{a)} Perilymph / Lymph in horizontal (something) canal move in opposite direction
b) Stereocilia move away from kinocellum

26) Thorn Pick \Rightarrow Staphylococcus Aureus

27) Undercooked raw meat ingestion by \Rightarrow Tapeworm.

28) Infraorbital is one of terminal \Rightarrow a) Facial
branch of b) Maxillary
c) Supraorbital
d) Transverse facial.

29) Cerebellum appropriate \Rightarrow a) output is excitatory
b) receive afferent from cortex
(don't remember exactly)

30) Infarct of post 1/3 of I/V Septum \Rightarrow RCA

40) Circumflex br of left coronary blocked \Rightarrow Post part of
area involved. left ventricle.

41) Cutaneous larva migrans wala tha.

42) E will predispose to cutaneous malignant melanoma

a) Xeroderma Pigmentosum
b) Melanosis Coli
c) Chronic Burn
b) gene defect of Retinoblastoma.

43) vWD Rx \Rightarrow a) Whole Blood b) Cryoprecipitate c) FFP

Child developed

44) Generalized purpura & bleeding gums (epistaxis was thr) sudden onset previously healthy. & investigation to do

- > a) Bleeding Time
- b) Clotting Time
- c) Platelet Count
- d) PT e) APTT

45) Female & jaundice, hepatosplenomegaly Xanthomas etc etc (Typical scenario of primary biliary cirrhosis) Dx by

=> Antimitochondrial Ab.

46) Young girl / E hepatosplenomegaly, neutropenia, thrombocytopenia, immature peripheral cells / RBCs something. Dx

took a drug n den developed bleeding (may be was leuko. Not sure)

- > a) Acute leukemia
- b) ~~Test~~ Drug induced anemia

c) Aplastic Anemia

45) PertV drug abuser will have / develop (something like that)

- => a) Mitral Valve Prolapse
- b) Infective endocarditis
- c) Libman Sack
- d) Marantic

46) 46 XX => Female Pseudohermaphrodite.

47) Rapid adaptation => Pacinian Corpuscle.

48) Inactivate killed organism in vaccine cause => Whooping Cough

49) Deep inguinal ring in => Fascia Transversalis.

50) Fluid of pancreat acute pancreatitis will go to

- a) Subhepatic
- b) Subphrenic
- c) Paracolic gutter

51) After cholecystectomy drain placed in

- a) Subhepatic space
- b) Subphrenic space

52) Post Δ neck contains \Rightarrow big option \bar{e} subclavian, chords of brachial plexus

53) Rotator Cuff formed by \Rightarrow Supra, infraspinatus, Subscapularis, Teres Minor.

54) Clavipectoral fascia \Rightarrow covers pectoralis major

58) Female after fracture lost sensation \Rightarrow Pudendal Nerve. of urogenital region. nerve involved

59) Vertebra, correct statement \Rightarrow Nerves exit above corresponding vertebra.

60) * MOST FAUL & CONTROVERSIAL *

* Persistence of Allantois \Rightarrow Urachal Fistula

[N.B. : If Allantois persist \Rightarrow Urachal Fistula
If Urachus persist \Rightarrow Urachal Cyst]

FULL AND FINAL

61) \downarrow resistance of afferent arteriole will \downarrow \Rightarrow a) Renal plasma flow
b) GFR
c) Filtration Fraction
d) Renin release
e) Blood pH (i marked this)

62) Cutaneous larva migrans

63) injection insulin will cause \Rightarrow a) \uparrow free fatty acids in blood
 \uparrow in \Rightarrow b) K^+ in blood.
c)

64) after ^{non-lethal} MI in few min \Rightarrow arrhythmias

65) ^{About} Coag/Blood Clotting & Coagulation disorder 4 questions were there so do that thoroughly.

68) Azoospermia. Investigation to do \Rightarrow a) LH & FSH
b) Testosterone
c) only LH

69) Ducts drain empties into \Rightarrow Ejaculatory ducts

70) Cervical dysplasia caused by \Rightarrow Multiparity.

71) Pseudomembranous Colitis \Rightarrow Clostridium Welchii
[Birefringent was another option \in is wrong].

78) Pethidine vs Morphine side effect question was there, some effect on heart.

79) After jejunostomy, ileostomy, $Ca^{2+} \downarrow$, \uparrow peristalsis \Rightarrow Secretin releasing from unresected upper portion of small intestine & diarrhea \uparrow peristalsis due to

80) Mass movement in colon affected \Rightarrow Aurabechi's Plexus
due to damage of

81) Female \bar{e} Normal T cells, \downarrow B cells \Rightarrow Common
Giardia Lamblia isolated. Dx Immunovolatile
Deficiency.

82) Young boy/girl Hb: S, MCV \downarrow , MCHC \downarrow + \Rightarrow a) Hb Electrophoresis
Abnormal morphology / appearance b) Ferritin
of RBCs. \otimes Investigation c) Fe + TIBC

PAPER I (Some Questions Dat were confusing Me)

- \Rightarrow Contractility of heart depends on intracellular \rightarrow Ca^{+2}
- \Rightarrow Brod'sman area 3, 1, 2 \Rightarrow Receive all somatosensory info.
- \Rightarrow True about muscular system \Rightarrow a) Tendons rounded & elastic
b) Belly is muscular along entire muscle length
c) Insertion is movable d) Origin is fixed
- \Rightarrow Endometrial hyperplase \Rightarrow \uparrow estrogenic levels.
- \Rightarrow Umbilical Vein \Rightarrow 60% O_2 saturation.
- \Rightarrow

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