# Medicine INI-25 (May) Reworked

**Q1**
**Clinical question:**
**Question:**
Most common manifestation of systemic lupus erythematosus (SLE) is:

**Options:**
A) Photosensitivity
B) Arthralgia/myalgia
C) Nephrotic syndrome
D) Seizures

**Correct Answer: B) Arthralgia/myalgia**

**Q2**
**Clinical question:**
**Question:**
Which of the following is the most common initial symptom of Multiple Sclerosis (MS)?

**Options:**
A) Motor weakness
B) Sensory loss
C) Ataxia
D) Seizures

**Correct Answer: B)** Sensory loss

**Q3**
**Clinical question:**
**Question:**
A 20 year old male presents with fever, severe headache, vomiting and photophobia. On examination, neck rigidity and Brudzinski's sign is positive. Brain CT shows hydrocephalus. What is the most likely diagnosis?

**Options:**
A) Normal pressure hydrocephalus
B) Bacterial meningitis
C) Viral encephalitis
D) Subarachnoid hemorrhage

**Correct Answer: D)Subarachnoid hemorrhage**

**Q4**
**Clinical question:**
**Question:**

A 45-year-old man presents with recurrent episodes of dysuria and suprapubic discomfort over the past 3 months. He has been treated multiple times with antibiotics for suspected urinary tract infections. He denies fever or hematuria. On examination, his prostate is non-tender and normal in size. Lab reports show leukocyte count (>50/UI) in Urine analysis with no growth in urine culture. Which of the following is the most likely diagnosis?

**Options:**

A) Chronic Bacterial Prostatitis
B) Granulomatous prostatitis
C) Acute UTI
D) Sterile Pyuria

**Correct Answer: D)Sterile Pyuria**

**Q5**
**Clinical question:**
**Question:**
A 58-year-old diabetic man presents with septic shock. He is febrile, tachycardic, and has a blood pressure of 80/50 mmHg, despite adequate fluid resuscitation with crystalloids. His urine output is low and he is drowsy. What is the next best step in management?

**Options:**

A) Administer dopamine
B) Administer norepinephrine
C) Administer hydrocortisone
D) Administer vasopressin

**Correct Answer: B)Administer norepinephrine**

**Question 6:**
**Clinical question:**
**Question:**
A 63-year-old diabetic woman presents with fever, flank pain, dysuria, and elevated WBC count. Imaging reveals mild hydronephrosis. Urinalysis shows pyuria and bacteriuria. She is diagnosed with a complicated urinary tract infection (UTI). Which of the following is the best initial treatment?

**Options:**

A) Ceftriaxone
B) Meropenem
C) Amoxicillin-clavulanate
D) Nitrofurantoin

**Correct Answer: B) Meropenem**

**Question 7**
**Clinical question:**
**Question:**
A patient on a ventilator presents with cough and breathlessness. Ventilator-associated pneumonia (VAP) is diagnosed. What is the role of procalcitonin?

**Options:**
A) Deciding the duration of antibiotics
B) Choosing empirical antibiotics
C) Confirmation of VAP
D) Differentiate fungal and bacterial etiology

**Correct Answer: A) Deciding the duration of antibiotics**

**Question 8:**
**Clinical question:**
**Question:**
A person living in an iodine deficient area developed hyperthyroidism after taking iodine supplementation. Which phenomenon explains this?

**Options:**
A) Wolff-Chaikoff effect
B) Jod-Basedow effect
C) Goitre
D) Medullary thyroid cancer

**Correct Answer: B) Jod-Basedow effect**

**Question 9:**
**Clinical question:**
**Question:**
Erythropoietin is primarily used in the treatment of which type of anemia?
1. Nutritional anemia
2. Chronic kidney disease (CKD)-related anemia
3. Myelodysplastic syndrome (MDS)-related anemia
4. Aplastic anemia

**Options:**
A) 1 & 4
B) 2 & 3
C) 1 & 3
D) 1, 2 & 4

**Correct Answer: B) 2 & 3**

**Question 10:**
**Clinical question:**
**Question:**
Which of the following best explains the development of hyponatremia in a hypovolemic patient with diarrhea?

**Options:**
- **A) Decreased reabsorption of sodium from kidney**
- **B) Decreased secretion of aldosterone**
- **C) Non-osmotic release of antidiuretic hormone (ADH)**
- **D) Decreased sodium absorption from the intestine**

**Correct Answer: c) Non-osmotic release of antidiuretic hormone (ADH)**

**Question 11:**
**Clinical question:**
**Question:**
Mitral stenosis murmur coincides with:

**Options:**
- A) ST segment
- B) QRS
- C) P wave
- D) T wave

**Correct Answer: C) P wave**

**Question 12:**
**Clinical question:**
**Question:**
Which is not associated with congestive cardiac failure?

**Options:**
- A) Orthopnea
- B) PND
- C) Non-pulsatile elevated JVP
- D) Right hypochondrium pain

**Correct Answer: C) Non-pulsatile elevated JVP**

**Question 13:**
**Clinical question:**
**Question:**
What is the appropriate treatment for a patient with systemic lupus erythematosus (SLE) presenting with wire loop lesions on renal biopsy?

**Options:**
- A) Steroid alone
- B) Steroid and cyclophosphamide
- C) Mycophenolate mofetil (MMF) alone
- D) Hydroxychloroquine

**Correct Answer: B) Steroid and cyclophosphamide**

**Question 14:**
**Clinical question:**
**Question:**
A 42-year-old smoker has the following pulmonary function test (PFT) results: FEV1/FVC: 0.62, FVC: 60% and RV/TLC: 142%. Which of the following best describes the underlying abnormality?

**Options:**
A) Restrictive lung disease
B) Reduced lung compliance
C) Trapping of Air with Hyperinflation
D) Age-related change

**Correct Answer: C) Trapping of Air with Hyperinflation**

**Question 15:**
**Clinical question:**
**Question:**
In some individuals, peptic ulcers do not develop despite the presence of Helicobacter pylori. This is most likely due to:

**Options:**
A) NSAIDs causing ulceration independent of H. pylori
B) Variation in host and bacterial virulence factors
C) Colonization limited to the antrum in asymptomatic individuals
D) All strains of H. pylori being non-ulcerogenic in certain hosts

**Correct Answer: B) Variation in host and bacterial virulence factors**

**Question 16:**
**Clinical question:**
**Question:**
A patient with Parkinson's disease had aspiration pneumonitis. How will you manage this patient?

**Question:**
A) High frequency chest oscillation
B) Macrolides
C) N-acetylcysteine
D) Percutaneous endoscopic gastrostomy (PEG)

**Correct Answer: D) Percutaneous endoscopic gastrostomy (PEG)**

**Question 17:**
**Clinical question:**
**Question:**
Which of the following statements are correct regarding hypogonadal hypogonadism in males?
1. Kallmann syndrome is a form of primary hypogonadism.
2. In secondary hypogonadism, serum LH and FSH are low or inappropriately normal.
3. Low testosterone with elevated LH and FSH indicates secondary hypogonadism.
4. Clinical features may include decreased libido and infertility.

**Options:**

A) 1 and 2
B) 2 and 4
C) 1 and 3
D) 2 and 3

**Correct Answer:B )2 and 4**

**Question 18:**
**Clinical question:**
**Question:**
A 64-year-old male with hypertension and type 2 diabetes mellitus has fatigue and exertional dyspnea. He is compliant with his medications. Echo reveals normal systolic function and grade 2 diastolic dysfunction, left ventricular hypertrophy, left atrial enlargement, and EF 60%. His BNP is elevated at 980 pg/mL. He has had two hospital admissions for heart failure in the past year. He is currently euvolemic and is on optimal doses of beta-blockers and ACE inhibitors. Which of the following is the most appropriate next step?

**Options:**

A) Digoxin – to increase myocardial contractility
B) Ivabradine - to decrease heart rate and improve ventricular filling
C) Loop diuretic + SGLT2 inhibitor - to improve long term outcome
D) Ranolazine - to reduce angina

**Correct Answer:C) Loop diuretic + SGLT2 inhibitor - to improve long term outcome**

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