## **PROVISIONAL ANSWER KEY**

Question44/2024/OLPaper Code:384/2023Code:Sistant Professor in CardiologyDate of Test20-04-2024DepartmentMedical Education

Question1:-The following is true about mitral valve apparatus

A:-MV leaflets are divided into segments as A1, A2, A3 and P1, P2, P3 based on the scallops in anterior mitral leaflet.

B:-MV leaflets are divided into segments A1, A2, A3 and P1, P2, P3 based on the scallops of posterior mitral leaflet.

C:-Carpentier type II MR refers to restricted mitral leaflet motion.

D:-The chordal free zones of MV apparatus are the commissures of the mitral valve

Correct Answer:- Option-B

Question2:-Regarding iFR the following statements are true EXCEPT

A:-iFR over estimates the functional significance of stenosis versus FFR in circumstances in which the resting flow is elevated (e.g. anemia)

B:-The critical cut off value for iFR is less than or equal to 0.90

C:-The "wave free period" is defined as starting 25% into cardiac diastole and 5 ms before the end of diastole.

D:-In randomized trials iFR was found to be non-inferior to FFR

Correct Answer:- Option-B

Question3:-The mechanism of action of inclisiran is

A:-Monoclonal antibodies that reduce the expression of PCSK-9 leading to increased LDL-C uptake.

B:-siRNA targeting Lp(a).

C:-targets ACLY (ATP-citrate lyase)

D:-siRNA that penetrates hepatocytes and blocks the translation of PCSK9 mRNA targeting PCSK9.

Correct Answer:- Option-D

Question4:-Most common congenital cardiovascular malformation in turner syndrome is

A:-Bicuspid aortic valve

**B:-Pseudocoarctation** 

C:-Coarctation of Aorta

D:-Conotruncal anomalies

Correct Answer:- Option-A

Question5:-In Kirklin and Barrat boyes classification of unroofed coronary sinus defects, Type III is

A:-Completely unroofed Cs without Left SVC

B:-Completely unroofed Cs with LSVC

C:-Partially unroofed terminal portion of the CS

D:-Partially Unroofed mid portion of the CS

Correct Answer:- Option-D

Question6:-The following is not a stochastic injury in radiation exposure

A:-Lens injury

B:-Cancer

C:-Pregnancy complications

D:-Inheritable diseases

Correct Answer:- Option-A

Question7:-A 56 year old diabetic male with acute coronary syndrome without heart failure and blood pressure of 90/60 undergoing conventional invasive coronary angiography with iodinated contrast is having a CI - AKI (Contrast induced acute kidney injury) risk as follows

A:-Low risk

B:-High risk

C:-Very high risk

D:-Intermediate risk

Correct Answer:- Option-D

Question8:-Flamm's formula is

A:-4X SVC O2 + 1 X IVC o2/4

B:-2X SVC o2 + 2 X IVC O2/4

C:-3X SVC O2 + 1 X IVC O2/4

D:-1X SVC o2 + 3 X IVC O2/4

Correct Answer:- Option-C

Question9:-LV global longitudinal strain map showing predominantly a "bulls eye" pattern is suggestive of

A:-Hypertrophic cardiomyopthy

B:-Restrictive cardiomyopathy

C:-Takotsubocardiomyopathy

D:-Amyloidosis

Correct Answer:- Option-D

Question10:-Regarding Permanent Junctional Reciprocating Tachycardia (PJRT) all are true EXCEPT

A:-It is a Long RP tachycardia

B:-Affects infants and children

C:-Due to manifest accessory pathway with slow retrograde, decremental conduction

D:-Medical therapy is most often ineffective

Correct Answer:- Option-C

Question11:-The following is not consistent with severe AR

A:-Jet width of AR  $\geq$  65% of LVOT

B:-Venae contracta  $\geq$  0.6 cm

C:-Regurgitant volume > 50 ml/beat

 $\text{D:-ERO} \ge 0.3 \text{ cm}^2$ 

Correct Answer:- Option-C

Question12:-Prosthetic mitral valve stenosis is defined as the following

(i) Mean mitral valve gradient  $\geq$  5 mmHG

(ii) Peak mitral inflow velocity  $\geq$  1.9 m/sec

(iii) Effective orifice area  $\leq$  1.5  $_{\rm cm^2}$ 

CHOOSE an appropriate option from below

A:-Statement i is true

B:-Statements i and ii are true

C:-Statements i, ii & iii are true

D:-Statements i and iii are true

Correct Answer:- Option-B

Question13:-Prosthesis Patient Mismatch in aortic position is defined as Indexed EOA

A:-<0.85 cm<sup>2</sup>/m<sup>2</sup> B:-<0.90 cm<sup>2</sup>/m<sup>2</sup> C:-<0.65 cm<sup>2</sup>/m<sup>2</sup> D:-<1.2 cm<sup>2</sup>/m<sup>2</sup>

Correct Answer:- Option-A

Question14:-The famous statement that "Pathologists have long known that rheumatic fever (RF) licks at the joints but bites at the heart," was said by

A:-Duckett jones

B:-Gene H Stollerman

C:-Carey F Coombs

D:-Ernst-Charles Lasegue

Correct Answer:- Option-D

Question15:-The following were the salient features of the OCTOBER trial except

A:-OCT was compared with IVUS in complex bifurcation PCI

B:-Oct guided PCI was superior to the comparative arm

C:-True complex bifurcation lesions were recruited in the study

D:-There were significant number of patients with LMCA bifurcation in both arms

Correct Answer:- Option-A

Question16:-A 18 years lady was referred for cardiological evaluation for frequent symptoms of light headedness, palpitations, tremulousness, blurred vision, fatigue. On examination her pulses were 84/minute and BP of 110/80 in supine position and on standing upright her pulses were 128 beats/minute and BP 94/70 mm  $_{\rm Hg}$ Cardiovascular auscultation revealed normal heart sounds without any significant murmur and normal cardiac size. Most likely diagnosis is

A:-POTS (Postural Orthostatic Tachycardia syndrome)

B:-Pure Autonomic failure (Bradburry Eggleston syndrome)

C:-Shy Dragger syndrome

D:-Parkinsons disease

Correct Answer:- Option-A

Question17:-Taussing Bing anomaly is

A:-DORV with subaortic VSD and no pulmonary stenosis

B:-DORV with subaortic VSD and Pulmonary stenosis

C:-DORV with subpulmonary VSD bilateral conus and side by side semilunar valves

D:-DORV with Mitral atresia, severely unbalanced AV canal defect.

Correct Answer:- Option-C

Question18:-"ANNULUS REVERSUS" in tissue Doppler imaging of the mitral valve is seen in

A:-Constrictive pericarditis

B:-Hypovolemic shock

C:-Endomyocardial fibrosis

D:-Myocarditis

Correct Answer:- Option-A

Question19:-In Cavo-tricuspid isthmus dependent Atrial flutter the commonest form of circuit is

A:-Counter clockwise loop

B:-Perimitral loop

C:-Clockwise loop

D:-Loop around a scar tissue in the right atrium

Correct Answer:- Option-A

Question20:-The acceptable cold ishemic time for donor heart in cardiac transplantation is

A:-<24 hours

B:-<18 hours

C:-<12 hours

D:-<5 hours

Correct Answer:- Option-D

Question21:-Type A Aortic intramural Hematoma is best managed by

A:-Conservative Management

**B:-Intensive Medical Therapy** 

C:-TEVAR

D:-Surgical Management

Correct Answer:- Option-D

Question22:-Major exclusion criteria for TEER for mitral regurgitation in COAPT and EVEREST II trials EXCEPT

A:-MV orifice area < 4.0 cm<sup>2</sup>

B:-Mal coaptation of the A2 and P2 scallops of the mitral valve (MV)

C:-Width of the flail segment  $\geq$  15 mm or flail gap  $\geq$  10 mm

D:-Coaptation depth > 11 mm or vertical coaptation length is < 2mm

Correct Answer:- Option-B

Question23:-In pre excited atrial fibrillation, the following statements are true EXCEPT

A:-In hemodynamic instability DC cardioversion should be done

B:-In hemodynamically stable patients - Ibutilide, Procainamide or Class IC agents (flecaindie / propafenone) may be used

C:-Class III agent Amiodarone can be used to restore Sinus rhythm

D:-AV nodal blocking drugs should be avoided

Correct Answer:- Option-C

Question24:-A possible benefit of Re-vasculrisation of non-culprit vessels at the time of primary PCI for STEMI was shown in the following trials EXCEPT

A:-PRAMI

B:-DANAMI 3-PRIMULTI

C:-CvLPRIT

D:-CULPRIT SHOCK

Correct Answer:- Option-D

Question25:-The new drug approved by US FDA for use in HCM with obstruction is

A:-Mavacamptin

B:-Eleclazine

C:-Aficampten

D:-Ranolazine

Correct Answer:- Option-A

Question26:-The characteristics of pre capillary pulmonary hypertension is

A:-Mean Pulmonary arterial pressure > 20 mHg, Pulmonary artery wedge pressure > 15 mm HG, Pulmonary vascular resistance  $\geq$  3 WU.

B:-Mean Pulmonary arterial pressure > 20 mHg, Pulmonary artery wedge pressure  $\leq$  15 mm HG, Pulmonary vascular resistance  $\geq$  3 WU.

C:-Mean Pulmonary arterial pressure > 20 mHg, Pulmonary artery wedge pressure > 15 mm HG, Pulmonary vascular resistance < 3 WU

D:-Mean Pulmonary arterial pressure > 20 mHg, Pulmonary artery wedge pressure  $\leq$  12 mm HG, Pulmonary vascular resistance  $\geq$  3 WU

Correct Answer:- Option-B

Question27:-In a right heart catheterization study in a patient with pulmonary hypertension. Pulmonary artery pressure is 50/25 mm Hg with a mean of 32 mmHg and PA wedge pressure was 25mmHg. Which of the following statement is true

i The (TPG) Transpulmonary gradient is 7 mmHg

ii The DPG Diastolic pulmonary gradient is zero

iii The patient has passive pulmonary hypertension (PH)

iv The patient has obstructive pulmonary hypertension (PH)

Choose the appropriate option

A:-statements i, ii and iv

B:-statements i, ii and iii

C:-statements i and iii

D:-statements ii and iv

Correct Answer:- Option-B

Question28:-The treatment of choic for Chronic thromboembolic pulmonary hypertension (CTEPH) is

A:-Pulmonary endarterectomy (PEA)

B:-Intensive medical treatement with oral anticoagulants, diuretics and  $\circ_{\scriptscriptstyle 2}$  therapy, Bosentan and Riociguat

C:-Interventional treatment - Balloon dilatation of the Pulmonary artery stenosis

D:-All of the above

Correct Answer:- Option-A

Question29:-The standard of care for Pulmonary vasoreactivity testing is

A:-IV Adenosine

B:-IV Epoprostenol

C:-Inhaled nitric oxide at 10-20 parts per million

D:-Inhaled iloprost

Correct Answer:- Option-C

Question30:-Phasic ejection click is a manifestation of

A:-Mitral valve prolapse

B:-Tricuspid valve prolapse

C:-Bicuspid aortic valve disease

D:-Pulmonary valve stenosis

Correct Answer:- Option-D

Question31:-The phenomenon of increase in the force of ventricular muscle contraction with increase in heart rate is

A:-Starlings phenomenon

B:-Anrep effect

C:-Holding effect

D:-Treppe phenomenon

Correct Answer:- Option-D

Question32:-In normal individuals, atrial systole contributes to how much of left ventricular filling?

A:-30-40%

B:-15-25%

C:-5%

D:-50%

Correct Answer:- Option-B

Question33:-The drug Omecamtiv mecabril is a

A:-Cardiac myosin activator

B:-Steroid

C:-Antiarrhythmic

D:-Inotrope

Correct Answer:- Option-A

Question34:-The rapid onset of action of intravenous frusemide given for acute decompensated heart failure is due to \_\_\_\_\_ action.

A:-Diuretic activity

**B:-Venodilatation** 

C:-Arteriolar dilatation

D:-Inotropic effect

Correct Answer:- Option-B

Question35:-In heart failure with reduced left ventricular ejection fraction, the

ejection fraction is usually less than

A:-10%

B:-20%

C:-30%

D:-40%

Correct Answer:- Option-D

Question36:-Common causes of resistant hypertension include all of the following except

A:-Obesity

B:-chronic kidney disease

C:-Drug induced hypertension

D:-Non-adherence to low-sodium diet

Correct Answer:- Option-C

Question37:-Hypertension associated with episodes of flash pulmonary edema is seen in

A:-Renal artery stenosis

B:-Coarctation of aorta

C:-Cushings syndrome

D:-Drug induced hypertension

Correct Answer:- Option-A

Question38:-Which of the following drugs is known to cause systemic hypertension

A:-Glipizide

B:-Sodium valproate

C:-Sitagliptin

D:-Recombinant Human Erythropoitin

Correct Answer:- Option-D

Question39:-Spironolactone is used in the management of systemic hypertension in the following situation

A:-Drug induced hypertension

**B:-Resistant hypertension** 

C:-Hypertension of renal artery stenosis

D:-Hypertension in the elderly

Correct Answer:- Option-B

Question40:-Rebound hypertension after drug withdrawal is common with

A:-Clonidine

**B:-Chlorthalidone** 

C:-Prazocin

D:-Nifedipine

Correct Answer:- Option-A

Question41:-Tachycardia which exhibits warm up and cool down phenomenon (irregularity at the beginning and towards the end of the arrhythmia) is a feature of

A:-Fascicular ventricular tachycardia

B:-Focal atrial tachycardia

C:-Atrial flutter

D:-Atypical AVNRT

Correct Answer:- Option-B

Question42:-Cavo-tricuspid dependant arrythmia is

A:-Classical atrial flutter

**B:-Slow-slow AVNRT** 

C:-Multifocal atrial tachycardia

D:-Focal atrial tachycardia

Correct Answer:- Option-A

Question43:-Ventricular tachycardia that responds best to verapamil is

A:-Right ventricular outflow tract ventricular tachycardia

B:-Mitral annular ventricular tachycardia

C:-Scar ventricular tachycardia

D:-Left fascicular re-entrant tachycardia

Correct Answer:- Option-D

Question44:-Bidirectional ventricular tachycardia is a feature of

A:-Digoxin toxicity

B:-Long QT syndrome

C:-Brugada syndrome

D:-Scar ventricular tachycardia

Correct Answer:- Option-A

Question45:-Drug of choice to prevent ventricular tachycardia in long QT syndrome

A:-Diltiazem

B:-Magnesium

C:-Betablockers

D:-Amiodarone

Correct Answer:- Option-C

Question46:-All are echocardiographic features of Cardiac Amyloidosis except

A:-Pericardial thickening

B:-Biventricular hypertrophy

C:-Thickening of interatrial septum

D:-Reduced longitudinal strain, with sparing of apical areas.

Correct Answer:- Option-A

Question47:-Radionuclide used specifically for diagnosis of Amyloidosis

A:-Technetium 99 Sestamibi

B:-Thallium 2013.

C:-Technetium 99m Pyrophosphate

D:-Technetium 99m Tetrafosmin

Correct Answer:- Option-C

Question48:-Epsilon waves in the electrocardiogram is seen in

A:-Hypertrophic cardiomyopathy

B:-Long QT syndrome

C:-Cardiac amyloidosis

D:-Arrhythmogenic right ventricular dysplasia

Correct Answer:- Option-D

Question49:-The classical pattern of ventricular tachycardia in Arrhythmogenic right ventricular dysplasia is

A:-LBBB with superior axis

B:-LBBB with inferior axis

C:-RBBBB with superior axis

D:-RBBB with inferior axis

Correct Answer:- Option-A

Question50:-A common cause of tachycardia inducing tachycardiomyopathy in children is

A:-Atrial flutter

**B:-Atrial fibrillation** 

**C:-Atrial ectopics** 

D:-Permanent reciprocating junctional tachycardia

Correct Answer:- Option-D

Question51:-Becks triad suggests the following diagnosis

A:-Contrictive pericarditis

B:-Cardiac tamponade

C:-Sub aortic stenosis

D:-Alcoholic cardiomyopathy

Correct Answer:- Option-B

Question52:-Which is not a feature of cardiac tamponade?

A:-Pulsus paradoxus

B:-Prominent y descend in jugular venous pulse

C:-Muffled heart sounds

D:-Prominent x descend in jugular venous pulse

Correct Answer:- Option-B

Question53:-Which is not a feature in the jugular venous pulse of constrictive pericarditis?

A:-Elevated jugular venous pressure

B:-Kussmaul sign positive

C:-Prominent x descend

D:-Prominent y descend

Correct Answer:- Option-C

Question54:-"Annulus reversus" is an echocardiographic feature of

A:-Constrictive pericarditis

B:-Mitral annular calcification

C:-Mitral stenosis

D:-Hypertrophic cardiomyopathy

Correct Answer:- Option-A

Question55:-Cholesterol rich pericardial fluid is a feature of pericardial effusion due to

A:-Trauma

B:-Lipoma of pericardium

C:-Hereditary hypercholesterolemia

D:-Hypothyroidism

Correct Answer:- Option-D

Question56:-Prostate surgery is considered to a \_\_\_\_\_\_ risk surgery with regard to perioperative risk

A:-Low

B:-Intermediate

C:-High

D:-Extremely high

Correct Answer:- Option-B

Question57:-Breast surgery is considered to a \_\_\_\_\_ risk surgery with regard to perioperative risk

A:-Low

**B:-Intermediate** 

C:-High

D:-Extremely high

Correct Answer:- Option-A

Question58:-Cardio Vascular Risk Index (CVRI) is used to

A:-Assess heart transplant recipient

B:-Assess requirement for left ventricular assist device during percutaneous coronary intervention

C:-Pre-operative risk assessment for non-cardiac surgery

D:-Choose between coronary bypass surgery and multivessel angioplastry.

Correct Answer:- Option-C

Question59:-Climbing one flight of stairs utilizes \_\_\_\_\_\_ METS

A:-2

B:-4

C:-8

D:-12

Correct Answer:- Option-B

Question60:-Most important side effect of intravenous propafenone

A:-Precipitation of seizures

**B:-Precipitation of wheezing** 

C:-Hypocalcaemia

D:-Hypotension

Correct Answer:- Option-D

Question61:-Among the following, which type of bacteria is commonly associated with native valve infective endocarditis

A:-Gram positive Cocci

B:-Gram positive Bacilli

C:-Gram negative Cocci

D:-Gram negative Bacilli

Correct Answer:- Option-A

Question62:-Fungal endocarditis with Candida Spp. is common in the following subsets of patients **except** 

A:-Indwelling right heart catheter

B:-Prosthetic heart valve

C:-IV drug users

D:-Native mitral valve

Correct Answer:- Option-D

Question63:-Which of the following statements about infective endocarditis is **FALSE** 

A:-Stenotic valve lesions are predominantly involved

B:-Native valves accounts for 2/3rd of infective endocarditis

C:-Pulmonary valve is the least affected in IE

D:-Tricuspid valve endocarditis is common in intravenous drug users.

Correct Answer:- Option-A

Question64:-Fever is **NOT** a prominent symptom in infective endocarditis in the following clinical situations **except** 

A:-Elderly

B:-CIED (Cardiovascular Implantable Electronic Device) infection

C:-Females

D:-Receiving a course of empirical antibiotics

Correct Answer:- Option-C

Question65:-Structurally normal heart valves may be affected by infective endocarditis in some patients. The predisposing conditions **DOES NOT** include

A:-Advanced age

B:-Renal failure on dialysis

C:-Infections by Staph. Aureus.

D:-Associated Secundum atrial septal defect.

Correct Answer:- Option-D

Question66:-A patient being treated for infective endocarditis presents with pleuritic chest pain and chest Xray shows a wedge shaped shadow. The most likely affected valve will be

A:-Mitral valve

B:-Aortic valve

C:-Tricuspid valve

D:-Post Mitral valve replacement with mechanical heart valve

Correct Answer:- Option-C

Question67:-The most common congenital heart disease associated with infective endocarditis is

A:-Unrepaired ventricular septal defects

B:-Unrepaired secundum atrial septal defects

C:-Unrepaired Sinus venosus ASDs

D:-Repaired secundum ASD with no residual shunt

Correct Answer:- Option-A

Question68:-Regarding prosthetic heart valve and pregnancy - What is NOT true.

A:-Warfarin usage increases the risk of miscarriage

B:-Warfarin < 5 mg / day in first trimester is relatively safe

C:-Patient has to be started and to be continued on heparin throughout pregnancy.

D:-The risk to fetus is maximum between 6-12 weeks of pregnancy

Correct Answer:- Option-C

Question69:-A patient after mechanical heart valve replacement was advised an INR target of 1.5 - 2 plus Aspirin. The most likely prosthetic valve implanted is

A:-TTK Chitra heart valve prosthesis in the aortic position

B:-TTK Chitra heart valve prosthesis in the mitral position

C:-on-X valve at aortic position

D:-St Jude valve at the aortic position.

Correct Answer:- Option-C

Question70:-The incidence of atrioventricular block necessitating permanent pacemaker implantation with balloon expandable valves in transcutaneous aortic valve replacement (TAVR) is nearly

A:-6-7%

B:-17-18%

C:-1-2%

D:-20-24%

Correct Answer:- Option-A

Question71:-Cardioembolic stroke accounts for \_\_\_\_\_ % of ischemic stroke

A:-5%

B:-10%

C:-20%

D:-40%

Correct Answer:- Option-C

Question72:-The scoring system used to assess patients with patent foramen ovale (PFO) and benefit from treatment is

A:-RoPE score

**B:-CHADS2 Score** 

C:-CHA2DS2-VASc

D:-HAS-BLED Score

Correct Answer:- Option-A

Question73:-A patient with severe mitral stenosis in sinus rhythm need to be given oral anticoagulation in which of the following situations

A:-MS with tricuspid regurgitation.

B:-MS in sinus rhythm with history of minor stroke.

C:-MS with pulmonary hypertension.

D:-MS with mitral regurgitation.

Correct Answer:- Option-B

Question74:-Atrial fibrillation occurring for the first time and persisting continuously for more than 7 days is termed as

A:-Paroxysmal AF

**B:-Persistent AF** 

C:-Long standing AF

D:-Permanent AF

Correct Answer:- Option-B

Question75:-Regarding management of atrial flutter - all are true **except** 

A:-Anticoagulation is not required in atrial flutter as in atrial fibrillation.

B:-Rate control strategy using betablockers may be tried.

C:-Rate control strategy using verapamil / diltiazem may be tried.

D:-Intravenous ibutilide may be tried for conversion to sinus rhythm

Correct Answer:- Option-A

Question76:-Which of the following drugs should not be used in the management of atrial flutter

A:-Flecainide

B:-Metoprolol succinate

C:-Metoprolol tartrate

D:-Verapamil

Correct Answer:- Option-A

Question77:-Atrial fibrillation is linked to all the following except

A:-Cognitive decline

**B:-Heart failure** 

C:-Sudden cardiac death

D:-Aortic regurgitation

Correct Answer:- Option-D

Question78:-67 years old female with history of diabetes mellitus and hypertension presented with a trial fibrillation of 2 weeks duration, normal renal function, echocardiogram shows normal valves and good ventricular function - The best management strategy would be

A:-Aspirin 150 mg daily

B:-Aspirin 75 mg daily

C:-Apixaban 5 mg twice daily

D:-Aspirin 150 mg + Warfarin with target INR of 2-3

Correct Answer:- Option-C

Question79:-The drugs used in the "pill in the pocket" strategy in Atrial fibrillation include

A:-Amiodarone

**B:-Digoxin** 

C:-Flecainide

D:-Dronedarone

Correct Answer:- Option-C

Question 80:-Regarding AF in patients with hypertrophic cardiomyopathy - Which of the following is  ${f NOT}$  true.

A:-AF occurs in 25% of patients with HCM.

B:-AF worsens symptoms of HCM

C:-Anticoagulation is indicated in all patients with AF and HCM irrespective of the CHA2DS2-VASC Score.

D:-Anticoagulation is indicated in patients with HCM with AF only those with CHA2DS2-VASC score >3

Correct Answer:- Option-D

Question81:-The following about aortic aneurysms are true **EXCEPT** 

A:-Larger Aortic aneurysms have a faster annual growth rate

B:-Dissected aneurysms grow faster than those without dissection

C:-Aneurysms of Ascending Aorta grow faster than the descending Aortic aneurysm

D:-Patients with bicuspid aortivalve have a faster growth rate of aoric aneurysm than those without BAV

Correct Answer:- Option-C

Question82:-Commonest primary tumour of ascending aorta is

A:-Fibrous tumour

B:-Leiomyosarcoma

C:-Angiosarcoma

D:-Un differentiated sarcoma

Correct Answer:- Option-D

Question83:-Which of the following is not correct regarding Aortic dissection

A:-CECT has the highest sensitivity and specificity in diagnosis

B:-Coronary angiography must be done before surgical repair in acute type A aortic dissection

C:-Aortography is no longer used for acute aortic dissection

D:-Intra mural haematoma may predispose to aortic dissection

Correct Answer:- Option-B

Question84:-Deceleration injury of aorta commonly involve

A:-Sino Tubular junction

**B:-Aortic isthmus** 

C:-Junction of thoracic and Abdominal aorta

D:-Aortic root

Correct Answer:- Option-B

Question85:-Indications for Thoracic endovascular repair for type B Aortic dissection are all **EXCEPT** 

A:-Impending rupture

**B:-Haemhorragic Pleural Effusion** 

C:-Refractory Hypotension

D:-Refractory Pain

Correct Answer:- Option-C

Question86:-The Features of thrombo angitis obliterans include all **EXCEPT** 

A:-Involvement predominantly of appedicular arteries

B:-Occlusive thrombus with micro abscesses and giant cells

C:-Inflammatory infiltration of internal elastic membrane

D:-involvement of pulmonary arteris

Correct Answer:- Option-C

Question87:-The drug that has shown reduction in limb events and mortality in peripheral occlusive arterial diease is

A:-Aspirin

B:-Ticlopidine

C:-Clopidogrel

D:-Ticagrelor

Correct Answer:- Option-B

Question88:-The following findings are seen in peripheral arterial disease **EXCEPT** 

A:-Loss of type I oxidative slow twitch fibres

B:-Delay in mitochondrial respiratory activity in affected muscles

C:-Early shift and delayed persistence of anaerobic metabolism with Exercise

D:-Loss of type II skeletal muscle fibres with decreased muscle strength

Correct Answer:- Option-A

Question89:-All are true about Kawasaki disease **EXCEPT** 

A:-Predominantly affects medium and small arteries

B:-Treatment with aspirin and immunoglobulin provides symptomatic relief but do not reduce incidence of coronary aneurysms

C:-Incidence of coronary aneurysms can occur in upto 25% of affected children

D:-Diagnostic coronary angiography is not recommended in acute phase

Correct Answer:- Option-B

Question90:-Thoracic and abdominal aortic aneurysm can be a feature of

A:-Wegener's Granulomatosis

B:-Kawasaki disease

C:-Churg strauss syndrome

D:-Gaint cell arteritis

Correct Answer:- Option-D

Question91:-Which of the following can be considered as a contra indication for pregnancy

A:-Severe asymptomatic aortic stenosis

**B:-Fontan circulation** 

C:-Mechanical prosthetic valves

D:-Severe mitral stenosis

Correct Answer:- Option-D

Question92:-All are TRUE regarding paripartum cardiomyopathy **EXCEPT** 

A:-Multiparity is a predisposing factor

 $\ensuremath{\mathsf{B:-LV}}$  Ejection fraction less than 30% predicts poor LV functional recovery post partum

C:-Women with an LV Functional recovery to normal does not carry any risk of recurrence in subsequent pregnancies

 $\mbox{D:-LV}$  end Diastolic dimension of more than 60 MM at diagnosis is a predictor of poor functional recovery

Correct Answer:- Option-C

Question93:-Which of the following statements is **CORRECT** 

A:-Niemann pick type C disease is caused by mutations in sphyngomelin phospho diesterase 1 gene

B:-Tangiers disease is an HDL deficiency syndrome caused by ABCA1Gene mutation

C:-Familial hyper triglyceridaemia is characterised by corneal arcus, xanthomas and xanthelasma

D:-Cognitive impairment can be associated with very low levels of LDL

Correct Answer:- Option-B

Question94:-Fish eye disease is an entity associated with

A:-Lecithin - Cholesterol Acyl transferase deficiency

B:-Cholesterol ester transfer protein deficiency

C:-Hereditary sitosterolemia

D:-Abetalipoprotenemia

Correct Answer:- Option-A

Question95:-Which of the following drug is useful in sitosterolemia

A:-Fibric acid derivatives

B:-Water soluble statins

C:-Ezetimibe

D:-PCSK 9 inhibitors

Correct Answer:- Option-C

Question96:-Disseminated intravascular coagulation may be associated with pulmonary embolism due to

A:-Air

B:-Thrombus

C:-Fat

D:-Amniotic Fluid

Correct Answer:- Option-D

Question97:-The following statement is wrong regarding pulmonary thrombo embolism

A:-Progesterone only oral contraceptive pill poses a high risk

B:-Superficial venous thrombus can be a predictor of future venous thrombo embolism

C:-Fall in systolic BP to less than 90 is used to distinguish between massive and sub massive pulmonary thrombo embolism

D:-ECMO can be a treatment option for massive pulmonary embolism

Correct Answer:- Option-A

Question98:-Which of the following does not cross react with heparin induced antibodies of hit

A:-Enoxaparin

**B:-Dalteparin** 

C:-Tinzaparin

D:-Fondaparinux

Correct Answer:- Option-D

Question99:-Assertion:- Warfarin initiation must be overlapped with heparin in treatment of DVT

Reason :- Warfa in causes an intial rapid fall in antithrombin III causing initial hypercoagulability

A:-Assertion is CORRECT but reason is NOT CORRECT

B:-Assertion and reason are in CORRECT

C:-Assertion is wrong but statement given as reason is factual

D:-Both Assertion and Reason are wrong

Correct Answer:- Option-A

Question100:-Which of the following statements is **CORRECT** 

A:-Recurrent venous thromboembolism is more common in females

B:-Asprin offers significant protection in unprovoked venous thromboembolism

C:-Rivaroxaban, Apixaban and Dabigatran are superior to warfarin in prevention of recurrent venous thromboembolism.

D:-Systemic venous thrombolysis with Alteplase is a recommended treatment for sub massive and massive pulmonary embolism

Correct Answer:- Option-B