

PROVISIONAL ANSWER KEY

Question 50/2025/OL

Paper Code:

Category 189/2024

Code:

Exam: Assistant Professor in Endocrinology

Date of Test 31-05-2025

Department Medical Education

Question1:-Vaso Inhibin is referred to

A:-16-kDa Prolactin

B:-8-kDa Prolactin

C:-18-kDa Prolactin

D:-6-kDa Prolactin

Correct Answer:- Option-A

Question2:-The production of spermatozoa per day by testes

A:-1000 per heart beat

B:-1500 per heart beat

C:-2000 per heart beat

D:-2500 per heart beat

Correct Answer:- Option-A

Question3:-The following statements are true regarding TSH except

A:-Serum level of alpha sub unit is 0.5 - 5 ug/l

B:-Plasma TSH half life is about 30 minutes

C:-Production rate is 40 - 150 mU/day

D:-Beta sub unit of TSH is having 102 amino acids

Correct Answer:- Option-D

Question4:-Hereditary Pituitary deficiency caused by transcription factor mutations inherited as AR except

A:-PROP I

B:-LHX 4

C:-TBX 19

D:-TBX 91

Correct Answer:- Option-B

Question5:-The earliest change seen in the treatment of Hypothyroidism

A:-Weight reduction

B:-Increase in Na, if Hyponatraemic

C:-Pulse rate and pulse pressure increase

D:-Improvement in constipation

Correct Answer:- Option-B

Question6:-The gene responsible for gonadal dysgenesis and sudden infant death syndrome is

A:-TSPYL I

B:-WTI

C:-WNT 4

D:-WWOX

Correct Answer:- Option-A

Question7:-Ideal glycaemic metrics are all except

A:-TBR 54-69 mgs <4%

B:-TAR > 250 mgs < 5%

C:-TAR 180-250 mgs < 25%

D:-TBR < 54 mgs < 2%

Correct Answer:- Option-D

Question8:-The following statement are true except

A:-RECORD study is a CVOT with glitazone

B:-REDUCE IT showed reduction of vascular events with EZETIMIBE

C:-ACT NOW is a trial for diabetes prevention trial

D:-Dapagliflozin is the only agent among SGLT 2 with warning against use of this drug in patient with a bladder carcinoma

Correct Answer:- Option-B

Question9:-The drug reduces the LP(a) are all except

A:-Olpasiran

B:-Statin

C:-PCSK9 inhibitor

D:-Niacin

Correct Answer:- Option-B

Question10:-The following are the cause of very low HDL less than 10 mgs/dl, except

A:-LCAT deficiency

B:-Fish eye disease

C:-Tangier disease

D:-SR-B1 deficiency

Correct Answer:- Option-D

Question11:-Which of the following statement is/are correct about Growth

Hormone(GH) secreting adenoma ?

- (i) Sparsely staining cytoplasmic GH granules are rapidly growing
- (ii) Monomorphous acidophilic stem cell adenomas are invasive
- (iii) Somatotroph hyperplasia on silver staining displays a well-preserved reticulin network with a surrounding pseudocapsule

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-All of above (i, ii and iii)

D:-Only (i) and (iii)

Correct Answer:- Option-B

Question12:-Which of the following statement is/are correct about clinical features of acromegaly ?

- (i) Hyperhidrosis and malodorous oily skin are rare presentation
- (ii) Sleep apnoea associated with higher GH and IGF1 levels
- (iii) Manifestations of acromegaly are caused by either central pressure effects of the pituitary mass or peripheral actions of excess GH and IGF1

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-A

Question13:-Which of the following statement is/are correct about diagnosis of acromegaly ?

A:-GH secretion does not fluctuate in healthy person

B:-Evoked GH responses to GHRH administration are of diagnostic use

C:-In patients with acromegaly, GH levels may increase after oral glucose

D:-High IGF1 level does not correlates with clinical indices of disease activity in acromegaly

Correct Answer:- Option-C

Question14:-Which of the following statement is/are correct about treatment of acromegaly ?

(i) Postoperative GH level measured within 24 hours of surgery is a significant outcome predictor.

(ii) After 48 hours of successful resection, metabolic dysfunction and soft tissue swelling start improving.

(iii) In women, age of less than 50 years had remission rate lower than men.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-All of above (i, ii and iii)

D:-Only (i) and (iii)

Correct Answer:- Option-D

Question15:-Which of the following statement is/are correct about complications of acromegaly ?

- (i) History of pituitary irradiation is a significant mortality determinant.
- (ii) Hypertension present in 50% cases of acromegaly.
- (iii) Acromegaly is associated with lipogenesis

A:-Only (i) and (ii)

B:-All of above (i, ii and iii)

C:-Only (i) and (iii)

D:-Only (ii) and (iii)

Correct Answer:- Option-A

Question16:-Which of the following statement is/are correct about Somatostatin Receptor Ligands (SRLs) in acromegaly ?

- (i) An octapeptide somatostatin analogue, which binds predominantly to SST2.
- (ii) Long-acting SRL formulations (20-30 mg/intramuscularly), effectively suppressed integrated GH levels for upto 49 days.
- (iii) Headache usually resolves within minutes of octreotide injection.

A:-Only (ii) and (iii)

B:-Only (i) and (iii)

C:-All of above (i, ii and iii)

D:-Only (i) and (ii)

Correct Answer:- Option-C

Question17:-Which of the following statement is/are correct about panhypopituitarism ?

- (i) Most common cause is non-functioning adenoma.
- (ii) Pituitary insufficiency develops insidiously.
- (iii) Commonly associated with diabetes insipidus.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-B

Question18:-Which of the following statement is/are correct about clinical panhypopituitarism ?

- (i) In hypopituitarism caused by radiotherapy, where GH and luteinizing hormone/ follicle-stimulating hormone deficiencies develop first.
- (ii) Hypopituitarism due to pituitary metastasis, often present with isolated ACTH deficiency.
- (iii) In male, symptoms because of hypogonadotropic hypogonadism is often non-specific.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-D

Question19:-Which of the following statement is/are correct about diagnosis of adrenocorticotrophic hormone deficiency (secondary adrenal insufficiency) ?

- (i) ACTH in patients with secondary adrenal insufficiency may be inappropriately normal.
- (ii) Secondary adrenal insufficiency can be rule out if morning serum cortisol is greater than 250 nmol/L.
- (iii) Test for secondary adrenal insufficiency should be done in all patients with a lesion in the hypothalamopituitary region.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-C

Question20:-Which of the following statement is/are correct about diagnosis of central hypothyroidism ?

- (i) Symptoms and signs that are specifically related to central hypothyroidism may not be as striking as in patients with overt primary hypothyroidism.
- (ii) Genetic testing should be done in familial cases.
- (iii) Central hypothyroidism is diagnosed by measurement of TSH.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-B

Question21:-Which of the following statement is/are correct about treatment of panhypopituitarism ?

A:-Hydrocortisone is usually administrated in four divided doses per day

B:-Patients with secondary adrenal insufficiency need small dose of aldosterone replacement

C:-L-thyroxine replacement does not mimic the normal small diurnal variations in free T4

D:-Women of postmenopausal age with hypogonadotropic hypogonadism require specific hormonal replacement therapy

Correct Answer:- Option-C

Question22:-Which of the following statement is/are correct about morbidity and mortality in panhypopituitarism ?

- (i) Women have a higher standardized mortality ratio than men.
- (ii) Patients with ACTH deficiency, receiving relatively high glucocorticoid doses, have an increased mortality.
- (iii) Pituitary radiotherapy is associated with high mortality.

A:-Only (i) and (ii)

B:-All of above (i, ii and iii)

C:-Only (i) and (iii)

D:-Only (ii) and (iii)

Correct Answer:- Option-B

Question23:-Which of the following statement is/are correct about lymphocytic hypophysitis in post-partum ?

(i) It occurs in first 2 month of post-partum.

(ii) Patients commonly present with symptoms of pituitary mass effect such as headache or visual field changes.

(iii) Patient typically have a history of obstetrical haemorrhage.

A:-Only (ii) and (iii)

B:-Only (i) and (ii)

C:-Only (i) and (iii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-B

Question24:-Which of the following statement is/are correct about Sheehan syndrome ?

(i) It is caused by infarction of the pituitary gland following obstetrical haemorrhage.

(ii) Lactation failure is the commonest presentation.

(iii) Pituitary injury is temporary and recovered after 5-7 years.

A:-Only (ii) and (iii)

B:-Only (i) and (iii)

C:-Only (i) and (ii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-C

Question25:-Which of the following statement is/are correct about prolactin/prolactinoma in pregnancy ?

(i) By end of third trimester, prolactin levels increased up to 10-fold relative to prepregnancy levels.

(ii) In prolactinoma, monitoring of prolactin levels in pregnancy is not useful.

(iii) Dopamine agonists are stopped once pregnancy is confirmed.

A:-Only (ii) and (iii)

B:-Only (i) and (iii)

C:-Only (i) and (ii)

D:-All of above (i, ii and iii)

Correct Answer:- Option-D

Question26:-Graves Triad refers to the clinical presentation of :

A:-Thyroid, eye and skin

- B:-Thyroid, eye and liver
- C:-Thyroid, eye and kidney
- D:-Eye, skin and liver

Correct Answer:- Option-A

Question27:-Autoimmune thyroid disease is characterised by the occurrence of antibodies against :

- A:-TPO (Thyroid peroxidase)
- B:-Tg (Thyroglobulin)
- C:-TSHR (TSH receptor)
- D:-All of the above

Correct Answer:- Option-D

Question28:-Which of the following anti-thyroid agents is preferred in the treatment of Thyroid Storm :

- A:-PTU
- B:-Methimazole
- C:-Carbimazole
- D:-Lithium

Correct Answer:- Option-A

Question29:-Amiodarone is a common drug associated with

- A:-Subacute thyroiditis
- B:-Hamburger thyrotoxicosis
- C:-Thyrotoxicosis factitia
- D:-Iodine-induced thyrotoxicosis

Correct Answer:- Option-D

Question30:-High-grade fever, marked tachycardia, unexplained jaundice, pulmonary edema and seizures are highly suggestive of

- A:-Inherited nonimmune hyperthyroidism
- B:-Thyroid storm
- C:-Toxic adenoma
- D:-Amiodarone-induced hyperthyroidism

Correct Answer:- Option-D

Question31:-Consumptive hypothyroidism commonly involves increased activity of

- A:-Deiodinase 1
- B:-Deiodinase 2
- C:-Deiodinase 3
- D:-Both Deiodinase 1 and 2

Correct Answer:- Option-C

Question32:-A defect in iodine organification accompanied by sensory nerve deafness is suggestive of

A:-Defect in thyroglobulin synthesis

B:-Pendred syndrome

C:-Iodide transport defect

D:-None of the above

Correct Answer:- Option-B

Question33:-Which of the following can alter levothyroxine requirements in patients ?

A:-Pregnancy

B:-Selenium deficiency

C:-Rifampin

D:-All of the above

Correct Answer:- Option-D

Question34:-A clinical presentation of low-normal fT4 but slightly elevated TSH is suggestive of

A:-Sub-clinical hypothyroidism

B:-Resistance to Thyroid Hormone (RTH)

C:-Consumptive hypothyroidism

D:-TSH-secreting pituitary tumors

Correct Answer:- Option-A

Question35:-Mutations in thyroid transcription factor-2 (TTF-2) and Pax8 genes are associated with

A:-Thyroid agenesis

B:-Resistance to thyroid hormone (RTH)

C:-Hashimoto's thyroiditis

D:-Graves' disease

Correct Answer:- Option-A

Question36:-Diagnostic evaluation of patients with nodular goiters consists of

A:-Clinical evaluation

B:-Biochemical testing

C:-FNA and imaging studies

D:-All of the above

Correct Answer:- Option-D

Question37:-Management of non-toxic goiter includes

A:-Thyroxine suppressive therapy

B:-Surgery

C:-¹³¹I therapy

D:-All of the above

Correct Answer:- Option-D

Question38:-Activation of RET proto-oncogene is associated with

A:-Toxic adenoma

B:-Papillary thyroid carcinoma

C:-Follicular thyroid adenoma

D:-Follicular thyroid carcinoma

Correct Answer:- Option-B

Question39:-Increased plasma calcitonin levels are usually seen in patients with

A:-Anaplastic thyroid carcinoma

B:-Medullary thyroid carcinoma

C:-Follicular thyroid carcinoma

D:-None of the above

Correct Answer:- Option-B

Question40:-Serum thyroglobulin (Tg) levels are an excellent marker to evaluate treatment follow-up in

A:-Papillary thyroid carcinoma

B:-Medullary thyroid carcinoma

C:-Anaplastic thyroid carcinoma

D:-None of the above

Correct Answer:- Option-A

Question41:-Circulating CBG levels are decreased in all except

A:-Hepatic cirrhosis

B:-Nephrotic syndrome

C:-Chronic hepatitis

D:-Graves' disease

Correct Answer:- Option-C

Question42:-Which of the following is false ?

A:-Prednisolone has a more potent anti-inflammatory action than cortisol

B:-Prednisolone has a more potent pituitary suppressive action than cortisol

C:-Prednisolone has a more potent salt retention action than cortisol

D:-None of the above

Correct Answer:- Option-C

Question43:-Which of the following is not diagnostic of Cushing syndrome ?

A:-Elevated late-night salivary cortisol

B:-Altered circadian rhythm of plasma cortisol

C:-Elevated Morning Plasma ACTH level

D:-Unsuppressed serum cortisol on Low-dose (2 mg/day) dexamethasone suppression test

Correct Answer:- Option-C

Question44:-Primary pigmented micronodular Adrenal hyperplasia all are true except

A:-Intrarenal tissue hyperplasia

B:-ACTH independent Cushing syndrome

C:-Beaded adrenals on ultrasound

D:-Typical age of presentation less than 30 years

Correct Answer:- Option-A

Question45:-Which of the following features of Cushing syndrome is considered irreversible even after successful surgical treatment ?

A:-Visceral obesity

B:-Dermal atrophy

C:-Vertebral fractures

D:-Reproductive dysfunction

Correct Answer:- Option-C

Question46:-Patients with AIDS may present with all except

A:-Hypocortisolism

B:-Glucocorticoid resistance

C:-Enlarged adrenals

D:-Hypercortisolism with low ACTH

Correct Answer:- Option-D

Question47:-Two brothers present with hyperpigmentation, poor weight gain. One has history of neonatal hypoglycemia. Both have unstimulatable serum cortisol levels, high plasma ACTH levels and normal plasma renin activity. Likely genetic defect could be

A:-MC 2 R mutation

B:-ABCD 1 mutation

C:-AAAS mutation

D:-DAX1 (NR0B1) mutation

Correct Answer:- Option-A

Question48:-Which of the following statements about corticosteroid induced adrenal suppression is correct ?

A:-Budesonide has less potent action at the Glucocorticoid Receptor (GR) than dexamethasone or prednisolone

B:-The risk of adrenal suppression with inhaled fluticasone increases with doses above 1000 µg per day for more than a year

C:-Inhaled budesonide is more frequently associated with suppression of the HPA axis than fluticasone

D:-None of the above

Correct Answer:- Option-B

Question49:-Which of the following findings helps differentiate glucocorticoid resistance from Cushing syndrome ?

A:-Elevated ACTH and cortisol levels

B:-Suppression of cortisol with low-dose dexamethasone

C:-Presence of clinical features of androgen excess

D:-Preservation or increase of bone mineral density

Correct Answer:- Option-D

Question50:-Regarding the liquid chromatography-tandem mass spectrometry (LC-MS/MS) vs radioimmunoassay (RIA) in diagnosing adrenal insufficiency which is incorrect ?

A:-LC-MS/MS provides higher cortisol values than RIA in all cases

B:-LC-MS/MS is more specific than RIA due to cross-reactivity

C:-LC-MS/MS offers higher accuracy for steroid measurement compared to RIA

D:-None of the above

Correct Answer:- Option-A

Question51:-A 50 year female patient was diagnosed with 2 cm adrenal incidentaloma seen on computed tomography of the abdomen. The basal attenuation is -5 Hounsfield units, and the lesion is homogenous, patient is not hypertensive but not has mild hypokalemia. Which of the following tests can be avoided ?

A:-Tests to rule out hypercortisolism

B:-Test for pheochromocytoma

C:-Tests for primary hyperaldosteronism

D:-None of the above

Correct Answer:- Option-B

Question52:-Which patient with Adrenal Incidentaloma needs to be worked up further except

A:-Clinical features of hormone excess absent and size 8 mm

B:-Clinical features of hormone excess absent and size 13 mm

C:-Clinical features of hormone excess present and size 8 mm

D:-None of the above

Correct Answer:- Option-A

Question53:-Which of the following statements best reflects the current

recommendation regarding the use of adrenal biopsy in the diagnostic work-up of patients with adrenal masses ?

A:-Adrenal biopsy should be performed routinely for all adrenal masses

B:-Adrenal biopsy is recommended if there is a history of extra-adrenal malignancy

C:-Adrenal biopsy is recommended for all patients with suspected adrenal carcinoma

D:-Adrenal biopsy should be performed before any imaging studies

Correct Answer:- Option-B

Question54:-Which of the following adrenal tumours is most common in children and often presents as an abdominal mass ?

A:-Pheochromocytoma

B:-Adrenocortical adenoma

C:-Neuroblastoma

D:-Adrenocortical carcinoma

Correct Answer:- Option-C

Question55:-Adrenal metastases occur most commonly from

A:-Colon carcinoma and renal cell carcinoma

B:-Hepatoma and prostate cancer

C:-Lung carcinoma and breast carcinoma

D:-Melanoma and Thyroid cancer

Correct Answer:- Option-C

Question56:-To study contrast washout-lesion attenuation measurements are done at which specific time points of the following ?

1. Before contrast injection.

2. 15 seconds after injection.

3. 60 seconds following injection.

4. 10 or 15 minutes after contrast injection.

A:-1, 2, 3

B:-2, 3, 4

C:-1, 2, 4

D:-1, 3, 4

Correct Answer:- Option-D

Question57:-Light bulb sign is classically described for

A:-Pheochromocytoma on a CT scan

B:-Pheochromocytoma on a T2 weighted MRI

C:-Pheochromocytoma on a T1 weighted MRI

D:-Adrenocortical carcinoma on a T2 weighted MRI

Correct Answer:- Option-B

Question58:-On MRI, which imaging technique is the mainstay for evaluating solid adrenal lesions for intracellular lipid ?

- A:-T1-weighted imaging
- B:-T2-weighted imaging
- C:-Chemical shift imaging
- D:-Diffusion-weighted imaging

Correct Answer:- Option-C

Question59:-What is the most widely used unenhanced CT attenuation threshold for diagnosing a lipid-rich adrenal adenoma ?

- A:-0 HU
- B:-10 HU
- C:-20 HU
- D:-30 HU

Correct Answer:- Option-B

Question60:-Which of the following CT washout characteristics is most consistent with ACC ?

- A:-Absolute washout > 60%
- B:-Relative washout > 40%
- C:-Absolute washout < 60% and relative washout < 40%
- D:-Immediate washout after contrast

Correct Answer:- Option-C

Question61:-After 10 weeks of gestation SRY expression is seen in

- A:-Leydig cells
- B:-Sertoli cells
- C:-Germ cells
- D:-All of the above

Correct Answer:- Option-B

Question62:-A 14 year old adolescent reared as male presents with gynecomastia, on examination he has penoscrotal hypospadias and cordee with bilateral palpable gonads of size 12 ml (Prader's orchidometer). There is no history of hypertension. The most appropriate first set of investigations would be

- A:-Morning Fasting Serum Testosterone, Dihydrotestosterone (DHT), Androstenedione
- B:-HCG Stimulated-Serum Testosterone, DHT, Androstenedione
- C:-Serum 17-Hydroxy progesterone, Testosterone, 11 Deoxy Corticosterone
- D:-Serum Aldosterone, Renin, Cortisol

Correct Answer:- Option-A

Question63:-Teplizumab is approved by the US FDA for

A:-Type 1 Diabetes Stage 1 to Stage 2

B:-Type 2 Diabetes Stage 1 to Stage 2

C:-Type 1 Diabetes Stage 2 to Stage 3

D:-Type 2 Diabetes Stage 2 to Stage 3

Correct Answer:- Option-C

Question64:-Which of the following is a US FDA approved therapy for prevention or delaying onset of type 2 diabetes in persons with multiple risk factors of diabetes ?

A:-Metformin

B:-Acarbose

C:-Vitamin D

D:-None of the above

Correct Answer:- Option-D

Question65:-According to IADPSG criteria for diagnosing gestation diabetes mellitus

A:-Fasting Plasma Glucose ≥ 92 mg/dl, 1 hr PPG ≥ 180 mg/dl, 2 hr PPG ≥ 153 mg/dl

B:-Fasting Plasma Glucose ≥ 95 mg/dl, 1 hr PPG ≥ 200 mg/dl, 2 hr PPG ≥ 140 mg/dl

C:-Fasting Plasma Glucose ≥ 100 mg/dl, 1 hr PPG ≥ 180 mg/dl, 2 hr PPG ≥ 140 mg/dl

D:-Fasting Plasma Glucose ≥ 90 mg/dl, 1 hr PPG ≥ 180 mg/dl, 2 hr PPG ≥ 120 mg/dl

Correct Answer:- Option-A

Question66:-The following are the condition with false low value of HbA1C except

A:-Multiple Blood Transfusion

B:-Hereditary Spherocytosis

C:-Blood Loss

D:-Iron deficiency anaemia

Correct Answer:- Option-D

Question67:-Mention the criteria to diagnose MODY

A:-Duke Criteria

B:-Tattersall Fajan Criteria

C:-Crucial Criteria

D:-Truclove and Witts Criteria

Correct Answer:- Option-B

Question68:-Macroalbuminuria is seen in which stage of diabetic nephropathy ?

A:-Stage 2

B:-Stage 3

C:-Stage 4

D:-Stage 5

Correct Answer:- Option-B

Question69:-A patient with diabetes already had minor amputation. What is the interval of follow up ?

A:-3-6 months

B:-1-3 months

C:-Once a month

D:-Once a year

Correct Answer:- Option-B

Question70:-Side effect of insulin are the following except

A:-Hyperglycemia

B:-Hypoglycemia

C:-Lipoatrophy

D:-None of the above

Correct Answer:- Option-A

Question71:-Comprehensive eye examination by an ophthalmologist should done in Type I and Type II diabetes respectively at

A:-At the time of diagnosis, after five years

B:-After five years, within six months

C:-Within five years, at the time of diagnosis

D:-After one year, at the time of diagnosis

Correct Answer:- Option-C

Question72:-The Oral hypoglycemic agent which acts by decreasing the amount of glucose produced by liver

A:-Sulfonyl Urea

B:- α glucosidase inhibitor

C:-Biguanides

D:-None of the above

Correct Answer:- Option-C

Question73:-Which lipid lowering agent worsen glycemic control ?

A:-Ezetemibe

B:-Atorvastatin

C:-Gemfibrozil

D:-None of the above

Correct Answer:- Option-B

Question74:-Standard of care in Diabetes 2025 recommends that people with

diabetes who have hypertension should be treated to blood pressure goals of

A:-<130/80

B:-<120/80

C:-<140/80

D:-<125/84

Correct Answer:- Option-A

Question75:-In individuals with diabetes and high cardiovascular risk screening for peripheral arterial disease should be considered if duration of diabetes is

A:- \geq 3 years

B:- \geq 5 years

C:- \geq 10 years

D:- \geq 15 years

Correct Answer:- Option-C

Question76:-The type of insulin used in the initial treatment of diabetic ketoacidosis is

A:-Long acting insulin

B:-Intermediate acting insulin

C:-Short acting insulin

D:-None of the above

Correct Answer:- Option-C

Question77:-Glycated fructosamine assay reflects the glycemic status over the prior _____ weeks.

A:-6-12 weeks

B:-2-3 weeks

C:-4-6 weeks

D:-5-7 weeks

Correct Answer:- Option-B

Question78:-What is a significant adverse event associated with burosumab therapy in children with XLH ?

A:-Increased risk of fractures

B:-Increased dental abscesses

C:-Severe nephrocalcinosis

D:-Chronic Kidney disease requiring dialysis

Correct Answer:- Option-B

Question79:-Which of the following gut microbiota species is positively associated with fasting glucose and HbA1c levels ?

A:-Clostridium species

B:-Lactobacillus species

C:-Firmicutes

D:-Bacteroidetes

Correct Answer:- Option-B

Question80:-What is the percentage of iodine in amiodarone ?

A:-39%

B:-37%

C:-35%

D:-33%

Correct Answer:- Option-B

Question81:-Quarter FFM rule pertains to which concept ?

A:-Bone resorption with anti osteoporotic medications

B:-Beta cell decline in diabetes

C:-Lean mass reduction during obesity management

D:-Carbohydrate inclusion in Keto diet

Correct Answer:- Option-C

Question82:-At what level of serum cortisol can physiological replacement of steroid be stopped in glucocorticoid induced adrenal insufficiency ?

A:-12 ug/dl

B:-10 ug/dl

C:-8 ug/dl

D:-14.5 ug/dl

Correct Answer:- Option-B

Question83:-Which is the latest modality for diagnosing polyuria polydipsia syndrome ?

A:-Copeptin

B:-AVP stimulated Copeptin

C:-Hypertonic saline stimulated Copeptin

D:-Urea Stimulated Copepetin

Correct Answer:- Option-D

Question84:-Which is the mutation not associated with hearing loss in Congenital Hypogonadotrophic Hypogonadism ?

A:-CHD7

B:-SOX10

C:-IL17RD

D:-FGFR1

Correct Answer:- Option-D

Question85:-Which is the correct order of insulin absorption rate from the injection sites ?

A:-Abdomen > arms > thighs > buttocks

B:-Arms > abdomen > thighs > buttocks

C:-Thighs > buttocks > arms > abdomen

D:-Abdomen > buttocks > arms > thighs

Correct Answer:- Option-A

Question86:-Which of the following is not a myostatin pathway inhibitor ?

A:-Bimagrumab

B:-Garetosumab

C:-Taldefgrobep alpha

D:-Enobosarm

Correct Answer:- Option-D

Question87:-Pochins' sign in thyroid eye disease is

A:-EOM restriction

B:-Increased blinking amplitude

C:-Absent forehead creases on upgaze

D:-Levator Palpebrae superioris spasm

Correct Answer:- Option-B

Question88:-Which drug is not associated with false negative dexamethasone suppression test ?

A:-Fluoxetine

B:-Ritonavir

C:-Fenofibrate

D:-Diltiazem

Correct Answer:- Option-C

Question89:-Find TIRADS score of a thyroid nodule sized 1.8×2.1 cm, mixed cystic and solid and hyperechoic ?

A:-TR1

B:-TR2

C:-TR3

D:-TR4

Correct Answer:- Option-B

Question90:-Which is the mutation in congenital hypothyroidism and urogenital abnormalities ?

A:-PAX8

B:-JAG1

C:-TUBB1

D:-NTN1

Correct Answer:- Option-A

Question91:-Which is the FDA approved medication for MASLD ?

A:-Vit. E 800 mg

B:-Pioglitazone in diabetic patients

C:-Saroglitazar

D:-Resmetirom

Correct Answer:- Option-D

Question92:-Which is false regarding MEN 5 syndrome ?

A:-Extra-adrenal ganglioneuromas and neuroblastomas

B:-Mutation in MAP gene

C:-Parathyroid adenomas and prolactinomas

D:-Multiple, bilateral and multicentric tumours

Correct Answer:- Option-B

Question93:-A hypertensive patient with a BMI of 26 kg/m² and Hbaic-6.2% is which stage of CKM syndrome ?

A:-Stage 0

B:-Stage 1

C:-Stage 2

D:-Stage 3

Correct Answer:- Option-C

Question94:-Palmar xanthomas are characteristic of

A:-Dysbetalipoproteinemia

B:-Familial chylomicronemia

C:-Familial hypercholesterolemia

D:-None of the above

Correct Answer:- Option-A

Question95:-High PTH, low calcium, high phosphorus, AHO phenotype, multiple hormonal resistance is seen in

A:-Pseudopseudohypoparathyroidism

B:-Pseudohypoparathyroidism 1b

C:-Pseudohypoparathyroidism 1a

D:-Pseudohypoparathyroidism 2

Correct Answer:- Option-C

Question96:-Number of aminoacids in Prolactin

A:-191

B:-197

C:-199

D:-190

Correct Answer:- Option-C

Question97:-Which of the following is high discriminatory feature of Cushing syndrome ?

A:-Skin thinning

B:-Centripetal obesity

C:-Bruising

D:-Buffalo hump

Correct Answer:- Option-C

Question98:-Which drug does not affect levothyroxine absorption ?

A:-Vitamin C

B:-Oral semaglutide

C:-Calcium citrate

D:-Tamoxifene

Correct Answer:- Option-D

Question99:-Which among the options is not a syndromic nonmedullary thyroid carcinoma ?

A:-Gardner syndrome

B:-Carney complex

C:-Werner syndrome

D:-None of the above

Correct Answer:- Option-D

Question100:-A 72 yr. old man undergoes mitral valve replacement and in postoperative period he develops atrial fibrillation and is started on intravenous amiodarone. He is discharged on amiodarone 200 mg/d and on 3 months follow up, cardiologist notes a pulse rate of 116 bpm, irregularly irregular. He has lost weight and complaints of loose stools despite good appetite. He has goitre on clinical examination. TSH-<0.01 Mlu/l, FT4-5 ng/dl, FT3-7pg/ml;Thyroid radioiodine uptake-1% at 24 hrs. Which is the most appropriate treatment ?

A:-Methimazole

B:-Methimazole and prednisone

C:-Prednisone

D:-Total thyroidectomy

Correct Answer:- Option-B