

FINAL ANSWER KEY

Question 49/2025/OL

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Department Medical Education

Question1:-Diagnostic Criteria for Complete Right Bundle Branch Block are all except

A:-QRS duration ≥ 120 msec

B:-rsr', rsR' or rSR' , patterns in leads V1 and V2

C:-S waves in leads I and V6 ≥ 40 msec wide

D:-Prolonged time to peak R wave (> 60 msec) in V5 and V6

Correct Answer:- Option-D

Question2:-Absolute Contraindications to exercise testing are all except

A:-Acute myocardial infarction, within 2 days

B:-Hypertrophic cardiomyopathy with severe resting gradient

C:-Symptomatic severe aortic stenosis

D:-Acute myocarditis or pericarditis

Correct Answer:- Option-B

Question3:-Which of the following is not a echocardiographic signs of RV pressure overload ?

A:-Dilated RV with basal RV/LV ratio > 1.0

B:-Flattened intraventricle septum

C:-Increased peak systolic (S') velocity of tricuspid annulus (>9.5 cm/s)

D:-Coexistence of acceleration time of pulmonary ejection <60 ms and midsystolic "notch" with mildly elevated (<60 mmHg) peak systolic gradient at the tricuspid valve

Correct Answer:- Option-C

Question4:-Choose incorrect one of the following.

A:-In lateral radiograph, the lower posterior border of the heart is created by the right ventricle

B:-Kerley B lines are most apparent at the right lung base on the frontal chest x-ray

C:-Kerley B lines are also associated with viral pneumonia and lymphangitis carcinomatosis

D:-Left atrial enlargement can elevate the left mainstem bronchus on the frontal radiograph

Correct Answer:- Option-A

Question5:-Which one of the following is correctly matched ?

- | Radio tracer | Mechanism of uptake |
|--|---|
| A. ^{13}N -ammonia | Na^+/K^+ ATPase pump |
| B. ^{82}Rb (82Rb) | Passive diffusion and incorporation into the glutamate pool |
| C. ^{18}F -sodium fluoride (NaF) | Microcalcification |
| D. 2-deoxy-2-[^{18}F]fluoro-D-glucose (FDG) | Mitochondrial uptake |

A:-A only

B:-B only

C:-C only

D:-D only

Correct Answer:- Option-C

Question6:-All are true about Napkin-Ring Sign on coronary CT angiography except

A:-The central area of low attenuation represents a large necrotic core

B:-The higher surrounding ring-like attenuation may be caused by fibrous plaque

C:-Shown to have a low specificity to identify TCFA on Optical Coherence Tomography (OCT)

D:-The peripheral enhancement may also be caused by the vasa vasorum

Correct Answer:- Option-C

Question7:-Type C lesion is characterized by all except

A:-Excessive tortuosity of proximal segment

B:-Total occlusion > 3 months old

C:-Degenerated vein graft with friable lesions

D:-Irregular contour

Correct Answer:- Option-D

Question8:-Which of the following is not a traditional respiratory criteria for diagnosis of constrictive pericarditis ?

A:-LV/RV interdependence

B:-LVEDP versus RVEDP < 5

C:-RVEDP versus RVSP > 1/3

D:-PASP < 55

Correct Answer:- Option-A

Question9:-All genes are inherited in autosomal dominance manner except one

A:-MYH7

B:-GLA

C:-PCSK9

D:-COL3A1

Correct Answer:- Option-B

Question10:-Which of the following one is wrongly matched ?

Adult derivatives

A. Common carotid artery

B. Left subclavian artery

C. Pulmonary trunk

D. Brachiocephalic artery

Embryological structures

Proximal part of 3rd arch artery

left 7th cervical intersegmental artery

Part of 6th arch artery

Right horn of aortic sac

A:-A only

B:-B only

C:-C only

D:-D only

Correct Answer:- Option-C

Question11:-Acyanotic CHD can convert in to cyanotic CHD include all except

A:-Ebstein anomaly

B:-Severe pulmonic stenosis with intact septum

C:-VSD with Gasul's phenomenon

D:-Common atrium

Correct Answer:- Option-D

Question12:-Which is incorrect regarding complete transposition of great arteries ?

A:-Double circle appearance of great arteries in short axis view of echocardiography

B:-VSD is the best circulatory mixing chamber

C:-Development of accelerated pulmonary vascular disease

D:-Common in offsprings of diabetic mother

Correct Answer:- Option-B

Question13:-Which is true regarding rib notching in coarctation of aorta ?

A:-It occurs on the superior margins of ribs

B:-Posterior ribs are usually spared

C:-It is rarely found below the ninth rib

D:-It is always bilaterally symmetrical

Correct Answer:- Option-C

Question14:-Which is true regarding Total Anomalous Pulmonary Venous Connection ?

A:-About 70% of infra-diaphragmatic type have obstruction

B:-Inter-atrial communication is obligatory for survival

C:-Obstruction is the rule in coronary sinus variety

D:-Its classical radiological sign "Snowman silhouette" is seen in cardiac variety

Correct Answer:- Option-B

Question15:-Which is incorrect regarding differentiating features between morphological right and left ventricles ?

A:-Morphological left ventricle is characterized by an atrioventricular valve that inserts into the ventricular septum at a level more inferior than that of opposite atrioventricular valve

B:-Chordal attachment to ventricular septum is characteristic of morphological left ventricle

C:-Morphological right ventricle is characterized by the presence of multiple papillary muscles

D:-Morphological right ventricle is crescent shaped with coarse apical trabeculations

Correct Answer:-**Question Cancelled**

Question16:-Which is true regarding prosthetic valve endocarditis ?

A:-Janeway lesions and Osler nodes are more common

B:-Fever is less common symptom in early prosthetic valve endocarditis

C:-Late prosthetic valve endocarditis is commonly caused by streptococci

D:-Duke's criteria are not applicable

Correct Answer:-**Question Cancelled**

Question17:-Which is true regarding rheumatic tricuspid stenosis ?

A:-Results in early diastolic hepatic pulsations

B:-Parasternal lift is prominent in severe tricuspid stenosis

C:-Kausmaul sign can be present

D:-In patients of mitral stenosis, pure tricuspid stenosis is commoner than tricuspid stenosis with regurgitation

Correct Answer:- Option-C

Question18:-Pregnancy is not contraindicated in

A:-Eisenmenger complex

B:-Severe asymptomatic aortic stenosis

C:-Fully recovered peripartum cardiomyopathy

D:-Severe mitral regurgitation after recovered episode of infective endocarditis

Correct Answer:- Option-D

Question19:-Which is incorrect regarding Rheumatic Mitral Stenosis ?

A:-A2-OS interval widens during sudden standing

B:-Presystolic accentuation is always absent in presence of AF

C:-Development of second stenosis of mitral stenosis may soften the murmur

D:-The time required for peak velocity to reach half its initial level correlates with the size of mitral orifice

Correct Answer:- Option-B

Question20:-Which is true regarding modified Jones criteria 2015 as applicable to India ?

A:-Polyarthralgia is a minor criteria

B:-Recurrence of rheumatic fever can be diagnosed in presence of two minor criteria

C:-Carditis can be diagnosed even in the presence of normal ASO titers

D:-Fever of more than $\geq 38.5^{\circ}\text{C}$ is taken as minor criteria

Correct Answer:- Option-C

Question21:-Following findings identify the high-risk individual of stable coronary artery disease except

A:-Stress induced LV dilatation

B:-Wall motion abnormalities developing at heart rate $< 120/\text{minute}$ during Dobutamine stress echocardiography

C:-Decreased lung uptake of tracer during stress myocardial perfusion imaging

D:-Resting perfusion defect involving $> 25\%$ of the myocardium without previous known MI

Correct Answer:- Option-C

Question22:-Agents shown to reduce mortality after Acute Myocardial Infarction include

A:-Beta blocker, Aspirin, Nitrate

B:-Beta blocker, Eplerenone, Apixaban

C:-Beta blocker, Statin, ACE inhibitor

D:-Beta blocker, Ranolazine, Nicorandil

Correct Answer:- Option-C

Question23:-All are true regarding ECG changes in acute myocardial infarction except

A:-qRBBB indicate proximal LAD occlusion

B:-Presence of additional ST elevation in inferior leads in patients with anterior wall myocardial infarction indicate proximal LAD occlusion

C:-Presence of reciprocal ST depression in anterior leads in patients with inferior wall myocardial infarction rules out RVMI

D:-In inferior wall myocardial infarction, ST elevation in lead II more than that of lead III indicates Lcx occlusion

Correct Answer:- Option-B

Question24:-PCI in infarct related artery is not indicated in

A:-Stable patient after successful thrombolysis done within 2 hours of MI

B:-MI complicated by acute severe heart failure

C:-Totally occlude artery > 48 hours after MI in a stable patient

D:-Cardiogenic shock with severe triple vessel disease

Correct Answer:- Option-C

Question25:-Subclinical atherosclerosis can be detected by all except

A:-Ankle Brachial Index (ABI)

B:-Carotid Intima-Media Thickness (CIMT)

C:-Coronary Artery Calcium (CAC) measured by EBCT

D:-Stress Myocardial Perfusion Scan (MPI)

Correct Answer:- Option-D

Question26:-The most effective drug in resistant hypertension (defined as clinic systolic BP \geq 140 mm Hg despite treatment with maximally tolerated doses of three anti-hypertensive drugs) is

A:-Bisoprolol

B:-Doxazocin

C:-Spironolactone

D:-None of the above

Correct Answer:- Option-C

Question27:-Non-dipper hypertension is defined by day to night variation in blood pressure of

A:-<10% decline in night time blood pressure

B:-<15% decline in night time blood pressure

C:-<20% decline in night time blood pressure

D:-<25% decline in night time blood pressure

Correct Answer:- Option-A

Question28:-All the following statements are true about renovascular hypertension except

A:-Renovascular hypertension can affect people of all ages

B:-Renal artery stenosis secondary to atherosclerosis is the most common cause in elderly individuals

C:-Abdominal bruit on examination is a classic clinical finding in patients with renal artery stenosis

D:-Renovascular hypertension occurs insidiously and rarely presents as hypertensive urgency or emergency

Correct Answer:- Option-D

Question29:-The control of hypertension has following impact on events in

decreasing order

A:-Stroke > CAD > All-cause mortality

B:-Stroke = CAD = All-cause mortality

C:-CAD > Stroke > All-cause mortality

D:-All-cause mortality > Stroke > CAD

Correct Answer:- Option-A

Question30:-The most common cause of sudden cardiac death is

A:-Hypertrophic cardiomyopathy

B:-Arrhythmogenic right ventricular dysplasia

C:-Coronary artery disease

D:-Long QT syndrome

Correct Answer:- Option-C

Question31:-Which of the following statements is false regarding drug therapy for acute decompensated heart failure ?

A:-Beta-blocker should be started before hospital discharge in patients admitted with acute decompensated heart failure

B:-Invasive hemodynamic monitoring is not routinely recommended

C:-Intravenous vasodilator therapy has been shown to improve survival

D:-Only selected patients with acute decompensated heart failure should be started on intravenous vasodilator therapy

Correct Answer:- Option-C

Question32:-The most specific sign of acute decompensated heart failure is

A:-Pedal edema

B:-Raised JVP

C:-Basal crepitations

D:-Presence of S3

Correct Answer:- Option-B

Question33:-In patients with heart failure with reduced ejection fraction and atrial fibrillation, which below approach in addition to standard treatment of heart failure reduces all-cause mortality and hospitalization due to heart failure.

A:-Rate control

B:-Rhythm control with drugs

C:-Catheter ablation

D:-All the above have similar efficacy

Correct Answer:- Option-C

Question34:-The American College of Cardiology/American Heart Association (ACC/AHA) staging system for heart failure is defined by four stages (A, B, C, D). Which of the following constitutes stage C :

A:-Structural heart disease but no symptoms of heart failure

B:-Structural heart disease and symptoms of heart failure

C:-Refractory heart failure requiring specialized interventions

D:-High risk of heart failure but no structural heart disease or symptoms of heart failure

Correct Answer:- Option-B

Question35:-Reverse nulling on gadolinium enhanced MRI is seen in

A:-Ischemic cardiomyopathy

B:-Amyloidosis

C:-Dilated cardiomyopathy

D:-Hypertensive heart disease

Correct Answer:- Option-B

Question36:-All of the following therapies reduce N-terminal pro-B-type natriuretic peptide (NT-ProBNP) levels except

A:-Angiotensin converting enzyme inhibitors

B:-Aldosterone antagonists

C:-Biventricular pacing

D:-Intracardiac cardioverter defibrillator

Correct Answer:- Option-D

Question37:-The cardiac status in patients on Angiotensin Receptor-Neprilysin Inhibitor (ARNI) can be monitored by

A:-B-type natriuretic peptide (BNP) levels

B:-N-terminal pro-B-type natriuretic peptide (NT-proBNP) levels

C:-Troponin levels

D:-Galectin 3 levels

Correct Answer:- Option-B

Question38:-Diuretic Optimization Strategies Evaluation (DOSE) study compared continuous versus intermittent diuretic dose schedules in patients with acute decompensated heart failure (ADHF). Which schedule was found to have better efficacy

A:-Intermittent dosing

B:-Continuous dosing

C:-Both of intermittent and continuous dosing had similar efficacy

D:-Combination of intermittent and continuous dosing

Correct Answer:- Option-C

Question39:-The most frequent cause of decompensation in a previously compensated patient with heart failure is

A:-Non-adherence to diet and medications

B:-Uncontrolled hypertension

C:-Arrhythmias eg. atrial fibrillation

D:-Ischemia

Correct Answer:- Option-A

Question40:-The pill in pocket approach can be used for cardioversion of atrial fibrillation recurrences in select patients without significant structural or ischemic heart disease after demonstrating initial safe conversion with the pill in hospital setting before a patient is declared fit for outpatient "pill-in-the pocket" use. Which of the following drugs are approved for this indication ?

A:-Flecainide

B:-Propafenone

C:-Amiodarone

D:-Both 1 and 2

Correct Answer:- Option-D

Question41:-Risk stratification for sudden cardiac death (SCD) in a patient with hypertrophic cardiomyopathy (HCM) includes the following parameters except

A:-Family history of sudden cardiac death

B:-Unexplained syncope

C:-Age > 65

D:-Presence of apical aneurysm

Correct Answer:- Option-C

Question42:-Which of the following is not a feature of Grade 1 Diastolic dysfunction ?

A:-Ratio of early trans mitral flow velocity to late diastolic flow velocity $E/A < 1$

B:-Elevated left atrial pressure

C:-Prolongation of deceleration time

D:-Decrease in early tissue velocity of mitral valve (e')

Correct Answer:- Option-B

Question43:-Which of the following manifestations is pathognomic of AL-Amyloidosis ?

A:-Periorbital ecchymosis

B:-Autonomic dysfunction

C:-Capal tunnel syndrome

D:-Atrial arrhythmias

Correct Answer:- Option-A

Question44:-Most common mutated protein in Familial Dilated cardiomyopathy is

A:-LAMIN A

B:-LAMIN C

C:-TITIN

D:-DESMIN

Correct Answer:- Option-C

Question45:-Dilated Cardiomyopathy (DCM) with prominent conduction system disease is seen in which protein mutation ?

A:-Lamin A/C

B:-Myosin

C:-Titin

D:-Troponin

Correct Answer:- Option-A

Question46:-Becks triad, associated with cardiac tamponade includes all the following except

A:-Hypotension

B:-Pulsus paradoxus

C:-Muffled heart sounds

D:-Elevated systemic venous pressure

Correct Answer:- Option-B

Question47:-Which of the following statements regarding pericardial constriction is false ?

A:-Pulsus paradoxus may be present in upto 1/3rd of patient with constrictive pericarditis

B:-There is a decrease in the systemic venous pressure on inspiration

C:-Ventricular pressure tracings may show 'Square root sign'

D:-Systemic venous morphology shows a prominent y descent

Correct Answer:- Option-B

Question48:-Which is the earliest ECG sign of acute pericarditis ?

A:-TP segment depression

B:-T wave inversion

C:-PR segment depression

D:-Notching of the J point

Correct Answer:- Option-C

Question49:-GOLD PAINT effusion is seen in which condition ?

A:-TB pericarditis

B:-Hypothyroidism

C:-Traumatic or surgical injury to the thoracic duct

D:-Malignancy

Correct Answer:- Question Cancelled

Question50:-All the following are echocardiographic characteristics of constriction except

- A:-Inspiratory reversal of diastolic flow in hepatic veins
- B:-Increased E' velocity of the mitral valve annulus
- C:-Pericardial thickening and calcification
- D:->25% respiratory variation on mitral E velocity

Correct Answer:- Option-A

Question51:-Which causative organism in infective endocarditis has been associated with GI lesions, including colon cancer ?

- A:-Streptococcus gallolyticus
- B:-Kingella kingae
- C:-Staphylococcus epidermidi
- D:-Staphylococcus lugdunensis

Correct Answer:- Option-A

Question52:-A 30 year old IV drug abuser presents with 1 233 k history of fever, malaise, fatigue. Transthoracic echocardiography showed a vegetation on the tricuspid valve. Which of the following organisms is most likely positive in blood cultures ?

- A:-Streptococcus sanguis
- B:-Enterococcus faecium
- C:-Coxiella burnetii
- D:-Staphylococcus aureus

Correct Answer:- Option-D

Question53:-Which of the following is a predictor of poor outcome in patients with infective endocarditis ?

- A:-Insulin dependent diabetes mellitus
- B:-Presence of staphylococcus aureus growth in blood culture
- C:-Echocardiographic evidence of peri annular complications
- D:-All of the above

Correct Answer:- Option-D

Question54:-Which congenital heart disease has the highest predisposition to develop infective endocarditis ?

- A:-Atrial septal defect
- B:-Congenital bicuspid aortic valve
- C:-Unrepaired ventricular septal defect
- D:-Tetralogy of fallot

Correct Answer:- Option-C

Question55:-40 year old patient with a history of severe aortic stenosis affecting a

bicuspid aortic valve and aortic dilatation underwent aortic root and valve replacement. Post surgery patient developed low grade fever and fatigue after a few weeks. Clinical examination revealed splinter hemorrhages. Blood cultures grew coagulase negative staphylococci and trans esophageal echocardiography showed non specific changes. Which of the following would be the next investigation of choice ?

A:-CT Thorax

B:-18 FDG PET/CT

C:-Radio labelled leukocyte SPECT/CT

D:-USG thorax

Correct Answer:- Option-C

Question56:-22 year old female who is 33 weeks pregnant, who is having moderate pulmonary regurgitation after TOF repair. The OBG team enquire regarding need for antibiotic prophylaxis at the time of delivery. Which of the following statement is true ?

A:-Antibiotic prophylaxis is only required for caesarean section delivery

B:-Antibiotic prophylaxis is only required for normal vaginal delivery

C:-No antibiotic prophylaxis needed

D:-Tab Clindamycin 600 mg PO stat 2 hours prior to delivery

Correct Answer:- Option-C

Question57:-According to the 2023 ESC guidelines which of the following are major diagnostic criteria for diagnosis of infective endocarditis ?

A:-Two sets of blood cultures taken during admission positive for coagulase negative staphylococci

B:-Aortic root abscess seen on CT

C:-One set of blood cultures positive for staphylococcus aureus

D:-Echocardiographic detection of valvular regurgitation

Correct Answer:- Option-B

Question58:-Which trial compared IV antibiotic therapy with oral step-down therapy in infective endocarditis patients ?

A:-POET TRIAL

B:-DAPT TRIAL

C:-RANDOMIZE TRIAL

D:-ENDOVAL TRIAL

Correct Answer:- Option-A

Question59:-Which pathogen is most associated with culture negative endocarditis in patients with prior antibiotic exposure ?

A:-Staphylococcus aureus

B:-Coxiella burnetii

C:-Enterococcus faecalis

D:-Streptococcus gallolyticus

Correct Answer:- Option-B

Question60:-Which antibiotic regimen is recommended for IE caused by HACEK organism ?

A:-Penicillin G

B:-Ceftriaxone

C:-Vancomycin

D:-Doxycycline

Correct Answer:- Option-B

Question61:-Diastolic pressure gradient between pulmonary artery and pulmonary capillary wedge is defined as pressure difference between

A:-Diastolic PA pressure and diastolic PCWP

B:-Diastolic PA pressure and mean PCWP

C:-Mean PA pressure and mean PCWP

D:-Mean PA pressure and diastolic PCWP

Correct Answer:- Option-B

Question62:-Which of the following statement is correct regarding heritability of familial pulmonary artery hypertension ?

i. AD with 70% penetrance

ii. BMPR2 mutation is seen in 70% of heritable PAH

iii. Endoglin mutation is the most common mutation in hereditary hemorrhagic telangiectasia.

A:-i and ii

B:-ii and iii

C:-i and iii

D:-All of the above

Correct Answer:- Option-B

Question63:-Pulmonary veno occlusive disease is classified under

A:-Pulmonary arterial hypertension

B:-Pulmonary hypertension due to left heart disease

C:-Pulmonary hypertension due to lung disease

D:-Thromboembolic hypertension

Correct Answer:- Option-A

Question64:-Which one of the following is not correct regarding vasodilatory test in pulmonary hypertension ?

A:-It is recommended in all patients with pulmonary hypertension

B:-Those with 10mm fall in mean PA pressure to a final pressure of < 40 mm Hg is considered a positive response

C:-Such positive response is seen in 20% of patients with pulmonary

hypertension

D:-Those patients showing a positive response should be treated with prostaglandins

Correct Answer:- Option-D

Question65:-Which one of the following is an oral prostacyclin receptor agonist ?

A:-Trepstinil

B:-Iloprost

C:-Selexipag

D:-Riociguat

Correct Answer:- Option-C

Question66:-Which one of the following condition is associated with ECG changes usually ?

A:-Acute ischemic stroke

B:-Intracerebral hemorrhage

C:-Subarachnoid hemorrhage

D:-Hypoxic ischemic encephalopathy

Correct Answer:- Option-C

Question67:-Which of the following statement is incorrect regarding thrombolysis in ischemic stroke ?

A:-tPA is the only approved thrombolytic agent

B:-tPA use is associated with 10X risk of intracerebral hemorrhage

C:-tPA should be used within 4 hours of stroke

D:-ASPECT score in CT identifies small infarct where the patient may not benefit from thrombolysis

Correct Answer:- **Question Cancelled**

Question68:-All statement regarding endovascular treatment of stroke is correct except

A:-Pre-stroke RANKIN score should be 6 or more

B:-NIH stroke score should be 6 or more

C:-ASPECT score should be 6 or more

D:-Treatment should be initiated within 6 hours of stroke onset

Correct Answer:- Option-A

Question69:-All are correct regarding management of arterial hypertension during ischemic stroke except

A:-Patient is not eligible for reperfusion if BP > 180/110mmHg

B:-If diastolic BP > 140 consider sodium nitroprusside infusion

C:-If a patient is not a candidate for reperfusion therapy BP should not be controlled

D:-It is recommended to reduce BP by 20% in the first day

Correct Answer:- Option-C

Question70:-Which statement is false regarding primary and secondary prevention of stroke ?

A:-Antiplatelets have no role in primary prevention of stroke in low risk patients

B:-Use of statin in patient with coronary artery disease reduce the incidence of stroke

C:-Tight control of diabetes will reduce stroke in primary and secondary prevention

D:-Tight control of BP will reduce stroke in primary and secondary prevention

Correct Answer:- Option-C

Question71:-CHADS2 Score include all except

A:-Congestive heart failure

B:-Coronary artery disease

C:-Diabetes

D:-Hypertension

Correct Answer:- Option-B

Question72:-Which one of the statements is false regarding atrial fibrillation ?

A:-Paroxysmal AF has lower risk for embolic episode than permanent AF

B:-Aspirin do not reduce risk of stroke compared to placebo in patients with AF

C:-Idavucizumab will reverse the anticoagulant effect of dabigatran within minutes

D:-Anticoagulant action of NOAC will be lost within 24 hours of discontinuation

Correct Answer:- Option-A

Question73:-Regarding left atrial appendage closure, which statement is FALSE ?

A:-Nearly 50% LA thrombus form in LA appendage

B:-WATCHMAN device is nitinol plug covered with fabric

C:-Anticoagulation can be discontinued after 2 months in 90% of LA appendage occluded patients

D:-LA appendage occlusion device is recommended in patients who cannot tolerate anticoagulation

Correct Answer:- Option-A

Question74:-Regarding cardioversion of AF which statement is False ?

A:-Recurrent risk is more in electrical cardioversion than pharmacological cardioversion

B:-Pharmacological cardioversion is unlikely to be effective if AF duration > 7 days

C:-Amiodarone is more effective than Ibutilide in the acute conversion of AF

D:-Ibutilide cannot be used in patients with low EF

Correct Answer:- Option-C

Question75:-Regarding pharmacological management of AF, which is false ?

A:-There is low rate of rehospitalization in rhythm control, though there is no difference in mortality stroke or bleeding

B:-If AF duration is > 1 year it is unlikely to respond to rhythm control

C:-In patients with paroxysmal AF, rhythm control is better

D:-Digitalis will increase. Mortality when used in patients with AF

Correct Answer:- Option-A

Question76:-Which one of the statement is false ?

A:-Perioperative hypertensive crisis is defined as systolic BP>180 with end organ damage

B:-Similar anesthesia is not recommended in patients with hypertrophic obstructive cardiomyopathy

C:-Bridging with heparin prior to non-cardiac surgery is not needed in most of the patients on oral anticoagulant

D:-Asymptomatic severe aortic stenosis may not experience high risk MACE during non-cardiac surgery

Correct Answer:-**Question Cancelled**

Question77:-Which one of the statement is false ?

A:-Exercise tolerance is more important factor in the perioperative risk than severity of coronary artery disease

B:-In asymptomatic patient detailed evaluation for coronary artery disease is not necessary

C:-In cardiopulmonary exercise test, anaerobic threshold of 10 ml/kg/min is optimum marker of risk

D:-POISE study showed lower incidence of stroke in Metoprolol arm in patients undergoing non cardiac surgery

Correct Answer:- Option-D

Question78:-Which one of the statement is not correct ?

A:-Most perioperative MI do not cause ST elevation

B:-Routine measurement of Troponin is recommended in perioperative evaluation of patients

C:-Perioperative MI has a mortality of 30%

D:-Non cardiovascular mortality outnumber cardiovascular mortality in patients undergoing non cardiac surgery

Correct Answer:- Option-B

Question79:-Which one of the statement is false ?

A:-Routine revascularization is not recommended prior to non-cardiac surgery

B:-Discontinuation of antiplatelets after 1 month in bare metal stent and 6 months in drug eluting stents is safe

C:-Beta blocker use is recommended prior to surgery to reduce incidence of arrhythmia

D:-Statin usage will reduce the incidence of peri-operative MI

Correct Answer:- Option-C

Question80:-Which one of the following should not undergo evaluation prior to non-cardiac surgery ?

A:-Unstable angina

B:-Decompensated heart failure

C:-Asymptomatic severe mitral stenosis

D:-Asymptomatic triple vessel coronary disease

Correct Answer:- Option-D

Question81:-Regarding abdominal aortic aneurysms which is not true ?

A:-Five times more prevalent in men than in women

B:-Current smokers are seven times more likely to have

C:-More common in age group of 40-60 years

D:-More common in hypertensives

Correct Answer:- Option-C

Question82:-Which of the following endoleak is most common ?

A:-Type I

B:-Type II

C:-Type III

D:-Type IV

Correct Answer:- Option-B

Question83:-For degenerative aneurysms surgical replacement of aorta is recommended in all except

A:-Aortic root or ascending aortic diameter reaches 5.5 cm

B:-Arch diameter is greater than 4.5 cm

C:-Descending or thoracoabdominal aorta greater than 5.5 - 6 cm

D:-Aortic arch diameter is greater than 5.5-6 cm

Correct Answer:- Option-B

Question84:-Stroke risk in TEVAR for thoracic aortic aneurysm

A:-0-3%

B:-3-6%

C:-6-10%

D:-10-15%

Correct Answer:- Option-B

Question85:-Characteristics predicting risk of late aortic complications in initially uncomplicated type B aortic dissection include all except

A:-False lumen diameter > 22 mm

B:-Initial aortic diameter > 40 mm

C:-Primary entry tear diameter > 10 mm

D:-True lumen diameter < 45 mm

Correct Answer:- Option-D

Question86:-Type 2 grade of ischemic grading with ankle brachial index is

A:-0.60-0.79

B:-0.30-0.39

C:-0.40-0.59

D:-0.79-0.89

Correct Answer:- Option-C

Question87:-A 40 year old hypertensive female has symptoms suggestive of raynaud's phenomenon. Which of the following medications should be avoided in this patient ?

A:-Clonidine

B:-Prazosin

C:-Diltiazem

D:-Nifedipine

Correct Answer:- Option-A

Question88:-In popliteal artery aneurysm beyond what diameter is repair indicated ?

A:-1-2 cm

B:-2-3 cm

C:-4-5 cm

D:-76 cm

Correct Answer:- Option-B

Question89:-Which test is used to elicit symptoms of thoracic outlet syndrome in a patient ?

A:-Adson's test

B:-Halsted test

C:-Wright test

D:-Roos test

Correct Answer:- Option-D

Question90:-In patients with thromboangitis obliterans all the following

immunological abnormalities are seen except

- A:-Prothrombin gene mutation
- B:-Elevated antiphospholipid antibodies
- C:-Increased expression of factor VII
- D:-Anti endothelial cell antibodies

Correct Answer:- Option-C

Question91:-True about normal physiological changes occurring during pregnancy

- A:-Plasma flow increase by 20%
- B:-Cardiac output increase by 70%
- C:-Systemic vascular resistance ↓
- D:-Pulmonary vascular resistance ↑

Correct Answer:- Option-C

Question92:-Which is not a predictor considered in carpreg II risk score ?

- A:-High risk aortopathy
- B:-Ventricular dysfunction
- C:-Bioprosthetic valve
- D:-Pulmonary hypertension

Correct Answer:- Option-C

Question93:-Very high risk pregnancy does not include

- A:-Eisenmenger syndrome
- B:-Marfan syndrome with aorta > 45 mm
- C:-Bicuspid aortopathy with aorta > 30 mm
- D:-LV ejection fraction < 30%

Correct Answer:- Option-C

Question94:-Most common cause of myocardial infarction in pregnancy is

- A:-Coronary atherosclerotic disease
- B:-Intracoronary thrombus
- C:-Spontaneous coronary artery dissection
- D:-Coronary spasm

Correct Answer:- Option-C

Question95:-Prosthetic valve thrombosis in pregnancy which is correct ?

- A:-Aortic prosthesis less risk than mitral prosthesis
- B:-Newer generation valves more risk than older
- C:-Risk is same with old and new generation valves
- D:-Both aortic and mitral positions have same risk

Correct Answer:- Option-A

Question96:-Classic well's criteria to assess likelihood of pulmonary embolism includes which one with score of 3

A:-Heart rate > 100 beats/minute

B:-Hemoptysis

C:-Cancer treated within 6 months

D:-An alternate diagnosis is less likely than pulmonary embolism

Correct Answer:- Option-D

Question97:-In Seattle II trial following were observed except

A:-Mean RV to LV ratio decreased by 30%

B:-Mean pulmonary artery systolic pressure decreased by 30%

C:-Major bleeding occurred in 1% of patients

D:-Mean modified miller angiographic obstruction index diminished by 30%

Correct Answer:- Option-C

Question98:-In simplified pesi criteria which are included except

A:-History of cancer

B:-Altered mental status

C:-History of heart failure or chronic lung disease

D:-Heart rate > 110 beats/minute

Correct Answer:- Option-B

Question99:-IVC filters appear to do all except

A:-Reduce the short term risk of subsequent PE

B:-Increase the long term risk for DVT

C:-No impact on overall mortality

D:-Reduce the overall mortality

Correct Answer:- Option-D

Question100:-Which risk factor is not included in padua predictor score for identification of hospitalised patients at risk of venous thromboembolism ?

A:-Cancer

B:-Previous VTE

C:-Obesity

D:-Diabetes mellitus

Correct Answer:- Option-D