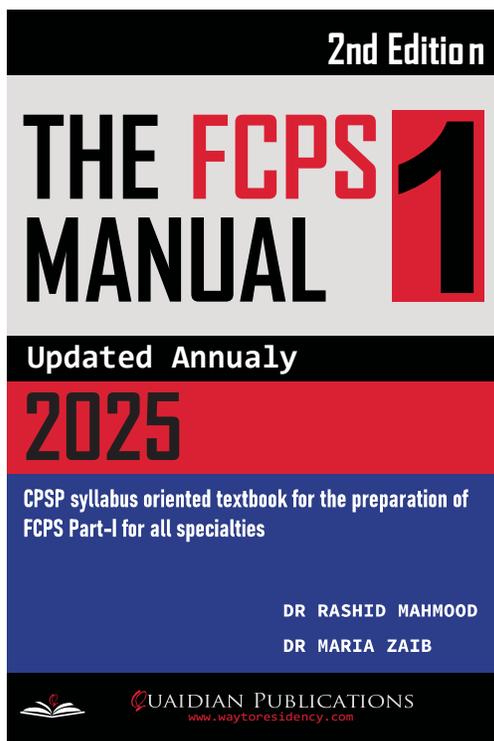


# Residents' *way to* Residency

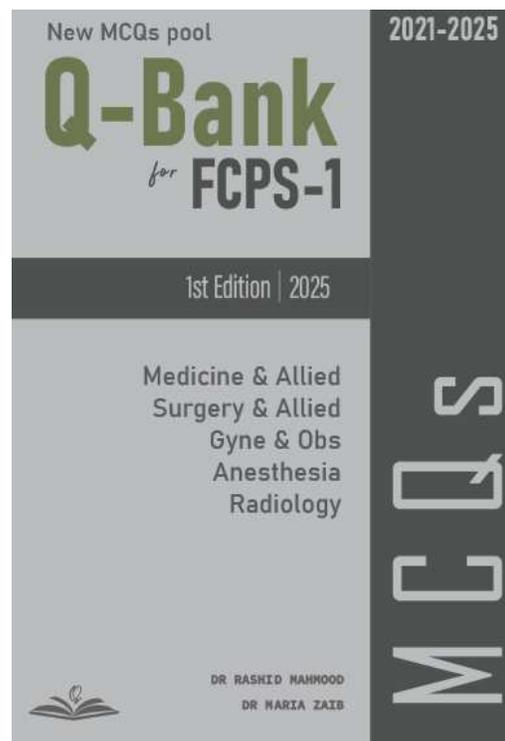
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Residents' way to Residency, 5th Edition 2025  
Author: Dr. Rashid Mahmood  
Quaidian Publication - Bahawalpur

# DEDICATIONS

*In the Name of Allah, the Most Beneficent, the Most Merciful.*

This book is dedicated to *My Parents, my Wife* and my parent institute, Quaid-e-Azam Medical College (which gave me prefix 'Dr'). Without whom, I wouldn't be able to stand where I am today and without whom all these little efforts made, were impossible.

# ABOUT AUTHOR

I am Dr. Rashid Mahmood, author of  
*“Residents’ way to Residency”*, *“The Night Before Exam”*, *“The FCPS-I Manual 2025”*, *“The FCPS-1 Q-Bank 2025”*. I am from Bahawalpur (Punjab) and I did my graduation from Quaid-e-Azam Medical College Bahawalpur (Batch of 2013-18). Now, I am working as a Resident Surgeon in Bahawal Victoria Hospital Bahawalpur. I intend to become Liver Transplant surgeon in future. IA

# ABOUT CO-AUTHOR

I'm **Dr. Maria Zaib**, co-author of  
“*Residents' way to Residency*” and “*The FCPS-I Manual*”

I did my graduation from Quaid-e-Azam medical college (2014-2019). I did my house job from Bahawal Victoria Hospital. Currently, I am working as a medical officer in Bahawalpur district. It's taken us a lot of hard work and time compiling all the past recalls, arranging them, and then finding the answers. We hope you will find this book as useful as much as we have put our efforts into it.

# ACKNOWLEDGEMENTS

I would like to express my heartfelt gratitude to all those who have supported me throughout the creation of this book.

First and foremost, I would like to thank my family for their unwavering support and encouragement. Their love and understanding have been an endless source of inspiration for me, and I am forever grateful for their presence in my life. I would also like to extend my gratitude to my friends and colleagues and my teachers who have provided me with invaluable feedback and constructive criticism, helping me to improve the quality of this book.

Finally, I would like to acknowledge the publishers, editors, and everyone involved in the production of this book for their hard work and dedication. Their efforts have ensured that my ideas are presented in the best possible light, and I am deeply grateful for their contributions. Once again, thank you everyone who has contributed to the creation of this book. Your support and encouragement have been instrumental in bringing my vision to life.

# PREFACE

I am deeply grateful and humbled by the fact that Allah has presented me with the opportunity to write this book. I am truly delighted and honoured to present this book, containing the past questions from the prestigious Agha Khan Hospital entrance exam. My aim is to help aspiring medical professionals achieve their dreams and excel in their careers. It is a privilege to contribute to the field of medicine through this platform.

It is the first-ever book that contains past recalls from the AKUH residency and internship entrance exams. The features characteristic and salient to this book are given below:

This book is compiled in the following 4 major portions:

1. **Generic Test Paper:** Anesthesiology, Cardiothoracic Anesthesiology, Diagnostic Radiology, Emergency Medicine, Family Medicine, Pathology & Lab Medicine, Psychiatry, Radiation Oncology.
2. **Surgery & Allied Test Paper:** Cardio-thoracic Surgery, General Surgery, Neurosurgery, Obstetrics/Gynecology, Otolaryngology/Head Neck Surgery, Ophthalmology, Orthopedics, Paediatric Surgery, Plastic Surgery, Urology
3. **Medicine & Allied Test Paper:** Adult Cardiology, Clinical Haematology, Dermatology, Internal Medicine, Medical Oncology, Nephrology, Neurology, Paediatrics & Child Health, Pulmonary Medicine
4. **Internship Test Papers (Housejob)**

Note:

- This book contains recalls from multiple platforms, and although there might be some repeated questions, we have tried our best to avoid duplications. If questions are found to be repeated, they may contain the same topic but with a different concept and explanation.
- The aim of this book is to help readers understand the concept of multiple choice questions (MCQs) and the pattern of AKU residency and internship exams.
- We have written this book by gathering all the concepts and recalls from the AKU entrance exams and we have compiled them in the form of a book which is accessible and easy to use for the candidates who are trying to secure a seat in residency or internship at AKUH.
- We feel very pleased to know about the medical personnel getting into the institute by using our book as a platform. We hope and pray this book to be of equal help and guidance for all of you.

DR. RASHID MAHMOOD

*Author*

## *What's new in RWR 2025 ?*

- This book contains past recalls of Residency and Internship exams of The Aga Khan University Hospital from 2024 to 2016.
- We have tried our best to re write the concept and recalls in the form of a proper question stem along with four relevant options.
- Answer key is given at the end of the papers so that you can do a self-assessment and tally the correct answers accordingly.
- We have added a Model Paper/ Mock Test in this edition that will help you do a quick self-assessment. It consists of 100 MCQs, with 30 questions pertaining to English and 70 relating to science. These questions have been taken from past recalls, in order to provide an understanding of the pattern and sections tested in the exam. Answer key to the paper is given at the end.
- We have also added the English section in this edition that might help you get an idea of how the English related questions are asked in exam. No single book is necessary for its preparation as the test focuses on linguistic ability and background knowledge. However, an intermediate level grammar book can be helpful. The past recalls of the English section in AKU exam were utilized for the question paragraph as well as synonyms and antonyms.

### Attention!

- This is NOT an officially recommended book by the Aga Khan University. It only consists of the questions compiled from the past recalls collected over time and are re-written as multiple choice questions. These question stems in this book are not the actual ones. We have converted the past recalls into a proper stem with four logical options.

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RWR-2025

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# Guidelines (Residency & Internship Exams)

**Advertisement:** June

**Test date:** August

**Who can appear?**

You can appear in the residency test whether you have passed FCPS one or not. But you must pass FCPS Part-1 in final merit list i.e., November attempt.

**Test Pattern:**

There is a written test composed of 100 MCQs, 30 from English and 70 from Science with five option each MCQs. The concept and nature of MCQs asked in both residency and internship exams is almost similar that's why we recommend doing all these papers irrespective of the exam you are taking.

**English portion:** Five questions from the comprehension paragraph. Five questions about interpreting whether the given statement is replying to a greeting/ expressing opinion/ expressing concern/ disagreeing. Five questions are from 'Fill in the blanks' with the most appropriate option. Five questions from Choose the 'wrong bits' of these sentences. Five questions from synonyms and five from antonyms. In short, grammar and vocabulary-related questions are asked from English section.

**Science portion:** The majority of the science portion is the same for all specialities but Medicine and Surgery are asked more compared to other specialties, with the minor component varies depending on the speciality. The concept and nature of MCQs asked in both residency and internship exams is almost similar that's why we recommend doing all these papers irrespective of the exam you are taking.

For English, only 10% of total marks counted in final aggregate. So, 90% counted from Science.

**Books to follow:**

There is no particular book for exam, but you need to grasp the English component (very easy, no need to read any book) and important clinical knowledge. It is impossible to be completely prepared for it because AKU residency and internship entrance exam is based on concepts and basic knowledge. So, if you have the basic concepts, you'll pass it easily. Past papers / recalls play a magical role for passing exam because some questions not only repeat in exam but also help you to understand the pattern of exam. Some seniors recommend these books:

- **Master the Boards USMLE Step 2 CK by Conrad Fischer**
- **Pretest series**
- **Residents' way to Residency**

**OSCE / Interview:**

The OSCE has 8 or 10 stations. Most of them are ethical cases where you're given a scenario, like you've messed up with the patient and now your senior is mad at you. What will you do? Questions can be general like why AKUH? Why Pathology? where do you see yourself in 10 years? or can be subject related, emergencies, professional ethics or some short clinical scenarios etc. In short, they just test your personality, professionalism and vocal skills. Few of them were where I had to perform basic stuff like GPE, blood pressure, CPR etc.

Passing criteria: There is no definitive passing criteria however passing percentile is used which includes short listing of the candidates with highest merits according to the number of seats available in the respective departments.

**Final Merit:** Merit depends on interview marks, test marks, and MBBS Marks/attempts.

# *Guidelines (Residency & Internship Exams)*

## **Frequently asked question!**

If you have not passed FCPS one yet, you can appear in the residency test.

## **Links to follow:**

Official website of AKUH: <https://www.aku.edu/mcpk/pgme>

You can see timelines and apply online there, details of every specialty and slots can also be checked.

## **For exam preparation join us at**

- Aga Khan Residency and Internship Exams Preparation (facebook group)
- WhatsApp groups for AKUH residency, internship and dentistry preparation  
(For getting link text at whatsapp 03087747686)

## **Dear Readers,**

We are delighted to present “Residents Way to Residency,” a comprehensive guide aimed at facilitating aspiring residents in their journey. If you are interested in becoming a co-author of this esteemed work or wish to contribute by sharing valuable suggestions, rectifying errors with sound logic, or aiding in recall gathering, please do not hesitate to contact us at 03087747686. Your contributions will be duly recognized, and your name will be added to our esteemed list of contributors. We look forward to your valuable input and collaboration.

**-Dr. Rashid Mahmood (Author)**

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& Internship Exam Preparation**



**SCAN ME**

# The Aga Khan Residency & Internship Exam (Mock Test)

Total Questions: 100

Time: 2 hours

## English Section

### Q 1-5. Read the comprehension passage and answer the questions

Our visual perception depends on the reception of energy reflecting or radiating from that which we wish to perceive. If our eyes could receive and measure infinitely delicate sense-data, we could perceive the world with infinite precision. The natural limits of our eyes have, of course, been extended by mechanical instruments; telescopes and microscopes, for example, expand our capabilities greatly. There is, however, an ultimate limit beyond which no instrument can take us; this limit is imposed by our inability to receive sense-data smaller than those conveyed by an individual quantum of energy. Since these quanta are believed to be indivisible packages of energy and so cannot be further refined, we reach a point beyond which further resolution of the world is not possible. It is like a drawing a child might make by sticking indivisible discs of color onto a canvas. We might think that we could avoid this limitation by using quanta with extremely long wavelengths; such quanta would be sufficiently sensitive to convey extremely delicate sense-data. And these quanta would be useful, as long as we only wanted to measure energy, but a completely accurate perception of the world will depend also on the exact measurement of the lengths and positions of what we wish to perceive. For this, quanta of extremely long wavelengths are useless. To measure a length accurately to within a millionth of an inch, we must have a measure graduate in millionths of an inch; a yardstick graduated in inches is useless. Quanta with a wavelength of one inch would be, in a sense, measures that are graduated in inches. Quanta of extremely long wavelength are useless in measuring anything except extremely large dimensions. Despite these difficulties, quanta have important theoretical implications for physics. It used to be supposed that, in the observation of nature, the universe could be divided into two distinct parts, a perceiving subject and a perceived object. In physics, subject and object were supposed to be entirely distinct, so that a description of any part of the universe would be independent of the observer. The quantum theory, however, suggests otherwise, for every observation involves the passage of a complete quantum from the object to the subject, and it now appears that this passage constitutes an important coupling between observer and observed. We can no longer make a sharp division between the two in an effort to observe nature objectively. Such an attempt at objectivity would distort the crucial interrelationship of observer and observed as parts of a single whole. But, even for scientists, it is only in the world of atoms that this new development makes any appreciable difference in the explanation of observations.

- 1. The primary purpose of the passage is to**
  - A. Discuss a problem that hinders precise perception of the world
  - B. Point out the inadequacies of accepted units of measurement
  - C. Criticize attempts to distinguish between perceiving subjects and perceived objects
  - D. Compare and contrast rival scientific hypotheses about how the world should be measured and observed
- 2. According to the passage, quanta with an extremely long wavelength cannot be used to give complete information about the physical world because they**
  - A. Exist independently of sense-data

- B. Have an insignificant amount of energy  
 C. Cannot, with present-day instruments, be isolated from quanta of shorter wavelength  
 D. Provide an insufficiently precise means of measuring length and position
3. **The author implies that making a sharp division between subject and object in physics is**  
 A. possible in a measurement of an object's length and position, but not in a measurement of its energy  
 B. Still theoretically possible in the small-scale world of atoms and electrons  
 C. Possible in the case of observations involving the passage of a complete quantum  
 D. No longer an entirely accurate way to describe the observation of the universe
4. **The author's use of the phrase "in a sense" implies which of the following?**  
 A. Quanta of extremely long wavelength are essentially graduated in inches.  
 B. Quanta of one-inch wavelength are not precisely analogous to yardsticks graduated in inches.  
 C. Quanta of extremely long wavelength, in at least one respect, resemble quanta of shorter wavelength.  
 D. Quanta of one-inch wavelength and quanta of extremely long wavelength do not differ only in their wavelengths.
5. **According to the passage, the quantum theory can be distinguished from previous theories of physics by its**  
 A. Insistence on scrupulously precise mathematical formulations  
 B. Understanding of the inherent interrelationship of perceiver and perceived  
 C. Recognition of the need for sophisticated instruments of measurement  
 D. Emphasis on small-scale rather than on large-scale phenomena

**Q 5-10. Fill in the blanks with the most appropriate option.**

6. **It was raining yesterday, so we \_\_\_\_\_ out.**  
 A. did not go  
 B. did not went  
 C. would not go  
 D. would not gone
7. **I \_\_\_\_\_ what was happening.**  
 A. couldn't understood  
 B. couldn't understand  
 C. was not able to understood  
 D. was not able to understand
8. **She is looking for a job in \_\_\_\_\_ electronic or print media.**  
 A. both  
 B. between  
 C. neither  
 D. either
9. **I must get to the market before it \_\_\_\_\_.**  
 A. close  
 B. clam  
 C. closed  
 D. has closed

10. Our team played \_\_\_\_\_.

- A. bad
- B. badly
- C. good
- D. well done

Q 11-15. Choose the correct option.

11. What is the meaning of the proverb / idiom: "To be at loggerheads" :

- A. to cooperate with enemies
- B. to be in strong disagreement
- C. to face stiff opposition
- D. to tax one's mind and body

12. A penny for your thoughts

- A. an idea to ponder
- B. to ask someone what they are thinking about
- C. to ask someone about his belief
- D. none

13. If "you have finger in the pie", you are \_\_\_\_\_ in something:

- A. involved
- B. disinterested
- C. puzzled
- D. none of these

14. JIT was formed to investigate the crime. The JIT here is \_\_\_\_ noun

- A. abstract
- B. collective
- C. virtual
- D. concrete

15. She goes to her mother's house off and on. What does idiom / phrase "off and on" means

- A. frequently
- B. rarely
- C. occasionally
- D. sometimes

Q 16-20. Choose the incorrect option of these sentences.

16. The central government has<sup>A</sup> come up with a cash voucher scheme to encourage<sup>B</sup> people to spend<sup>C</sup> their savings on good<sup>D</sup>.

17. Poverty is<sup>A</sup> compounded by inflation which has<sup>B</sup> reached extreme levels<sup>C</sup> in the region, as demonstrated by consumer price indexes<sup>D</sup>.

18. Attorney-generals<sup>A</sup> from 16 states<sup>B</sup> condemned<sup>C</sup> the ban yesterday and were discussing<sup>D</sup> whether to challenge the administration in court.

19. But in the corner, almost hidden<sup>A</sup> from his fellows, a forty-years-old<sup>B</sup> man was sitting<sup>C</sup> who did not enjoy<sup>D</sup> the singing.

20. The boxes were heavy, so<sup>A</sup> carrying two of them<sup>B</sup> was<sup>C</sup> too much weighted<sup>D</sup> to handle.

**Q 21-25. Choose the appropriate synonyms provided.**

**21. Detest**

- A. Argue
- B. Hate
- C. Discover
- D. Reveal

**22. Gracious**

- A. Pretty
- B. Clever
- C. Pleasant
- D. Present

**23. Sacrosanct**

- A. Prayer
- B. Sanctuary
- C. Pious
- D. Sacred

**24. Pensive**

- A. Oppressed
- B. Caged
- C. Thoughtful
- D. Happy

**25. Banish**

- A. Exile
- B. Hate
- C. Fade
- D. Clean

**Q 26-30. Choose the appropriate antonyms provided.**

**26. Heartfelt**

- A. Loving
- B. Insincere
- C. Unhealthy
- D. Humorous

**27. Brazen**

- A. Bashful
- B. Boisterous
- C. Noisy
- D. Heated

**28. Expound**

- A. Besmirch
- B. Confuse
- C. Confine

D. Condemn

**29. Pique**

- A. Value
- B. Gully
- C. Smooth
- D. Soothe

**30. Abridge**

- A. Shorten
- B. Extend
- C. Stress
- D. Easy

**Science Section**

**31. A 75-year-old woman comes to the physician for a follow-up examination following a successful hip surgery. She is extremely grateful that she is able to walk again and can play with her grandchildren. To express her gratitude, she brings the physician a basket of oranges she picked up at the grocery store. Which of the following is the most appropriate response by the physician?**

- A. "Thank you for the oranges."
- B. "This was very nice of you, but I cannot accept gifts from patients."
- C. "This was very nice of you, but I cannot accept perishable food items here in the clinic."
- D. "This was very nice of you, but I am allergic to oranges."

**32. An appropriate tissue biopsy of a typical patient with SLE is most likely to show:**

- A. Coagulative necrosis
- B. Liquefactive necrosis
- C. Fat necrosis
- D. Fibrinoid necrosis

**33. Which of the following is protective against colon cancer?**

- A. Vitamin A
- B. Vitamin E
- C. Vitamin D
- D. Vitamin E

**34. All of the following are complications of massive blood transfusion except:**

- A. Hyperkalemia
- B. Acidosis
- C. Left-shift of O<sub>2</sub> dissociation curve
- D. Hypercalcemia

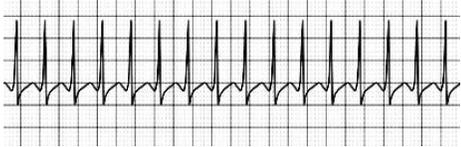
**35. A patient present with jaundice, Hb 6.5 g/dl, HCT 25%, total bilirubin 4 gm/dl, both direct and indirect bilirubin are raised, ALP raised, PT 16/12, aPTT 13/20, Albumin 2.0 g/dl, total protein 6.0 g/dl. After initial resuscitation, what is the next step you will do?**

- A. FFPs
- B. Vitamin K supplement
- C. Whole blood transfusion
- D. Platelets

36. A 46-year-old male with a productive cough for 2 months. Now, he has developed progressively worsening dyspnea. On examination, bilateral rhonchi are heard with an increased anteroposterior diameter of the chest noted. What is the most likely diagnosis?
- Lung cancer
  - Chronic bronchitis
  - TB
  - Asthma
37. An obese diabetic with RBS > 260 mg/dl. What is the most appropriate management?
- Diet and exercise
  - Diet, exercise and biguanides
  - Diet, exercise and sulfonylureas
  - Diet, exercise and prevention
38. An 8 months' child with history of exposure to measles. Which of the following is the most appropriate management?
- Administer vaccine
  - Give immunoglobulin
  - Give antibiotics
  - Reassure
39. A 68-year-old woman with metastatic lymphoma presents to the emergency department with fever, dysuria, and back pain. She is diagnosed with pyelonephritis and antibiotics are prescribed. The patient, however, wants to fight through without antibiotics because it's going to be a full moon tonight and that will certainly give her strength. Her husband arrives at the hospital and wants her to receive antibiotics now. Which of the following is the most appropriate next step in managing this patient?
- Administer intravenous ampicillin and gentamicin
  - Assess the patient's decision-making capacity
  - Consult the hospital ethics committee
  - Discharge the patient as per her right to autonomy
40. A 38 years old male with 1-week history of fever, drowsiness and right hemiparesis. On examination, he has up-going planters and has had a seizure. LP reveals pleocytosis, increased protein and normal glucose. What is the most likely diagnosis?
- HSV encephalitis
  - Bacterial meningitis
  - Tuberculus meningitis
  - Fungal meningitis
41. What is the investigation of choice for a patient presenting with recurrent seizures?
- EEG
  - CT scan
  - MRA
  - MRI
42. A man presents with complaints of unilateral headache, lacrimation, flushing and rhinorrhea. These symptoms are improved by 100% O2 therapy. What is the most likely diagnosis?
- Cluster headache
  - Tension headache
  - Migranous headache

- D. Space occupying lesion
43. A known diabetic hypertensive with deranged LFTs, cholesterol 230 mg/dl, triglycerides 130 mg/dl, HDL 45 mg/dl and family history of MI. Which of the following drugs should be administered to this patient?
- Niacin
  - Clofibrate
  - Simvastatin
  - Rosuvastatin
44. A 27-year-old woman at 39 weeks' gestation is in a car accident and bleeding profusely. Fetal monitoring shows late decelerations. Emergent Caesarean delivery is recommended to save the patient and fetus. The patient refuses. The husband arrives on the scene. He is screaming that he wants everything possible to be done to save his wife and unborn son. He says his wife is in a state of shock and not in a position to refuse treatment. He is a wealthy lawyer and says he will bring down the physician and the hospital if they don't act now. Soon afterward the patient loses consciousness. Which of the following is the appropriate action by the physician?
- Do not perform the surgery
  - Obtain an emergency obstetric consult
  - Perform the surgery while maintaining care and supervision of the patient
  - Send the patient to emergency theater and immediately transfer care to obstetrics
45. The hematologic abnormalities seen in SLE are examples of:
- Type I hypersensitivity
  - Type II hypersensitivity
  - Type III hypersensitivity
  - Type IV hypersensitivity
46. A patient with uncomplicated MI is on beta-blocker with a pulse rate of 54/min. What is the most appropriate management?
- Lower the dose of beta-blocker
  - Order ECG
  - Refer to cardiologist
  - Switch to ACE inhibitors
47. Which of the following drugs is NOT used in the management of acute exacerbation of asthma?
- Beta-blockers
  - Beta-agonists
  - Ipratropium
  - Aminophylline
48. A kid has scabies and tells you that his elder brother also has similar complaints. What is the best management in this case?
- Treat the kid
  - Treat the kid and the brother
  - Treat the whole family
  - Treat the kid and rest of the members if symptomatic
49. A child with chickenpox should be isolated for a duration of:
- 7 days
  - 14 days

- C. 10 days
  - D. 5 days
- 50. Secondary hyperparathyroidism is most often characterized by:**
- A. High serum calcium, high urinary phosphate
  - B. Normal serum calcium, high urinary phosphate
  - C. Normal serum calcium, low urinary phosphate
  - D. Low serum calcium, high urinary phosphate
- 51. Parkinson's disease denotes a disappearance of dopaminergic neurons from the:**
- A. Hippocampus
  - B. Subthalamus
  - C. Striatum
  - D. Substantia nigra pars compacta
- 52. Child has swallowed kerosene oil. In ER, you will give:**
- A. Oxygen
  - B. Emetic
  - C. Antacid
  - D. Antibiotics
- 53. Uncontrolled diabetes mellitus and hypertension in a 55-year-old female. You suspect that hypertension is secondary to Cushing's syndrome. What test will you order for this patient?**
- A. Low-dose dexamethasone suppression test
  - B. High-dose dexamethasone suppression test
  - C. 24-hour urinary cortisol
  - D. Urinary VMA levels
- 54. A 68 years old man on long term warfarin therapy for atrial fibrillation is admitted to the ward 48 hours prior to elective TURP. He complains of minor gingival bleeding only and has an INR of 7.5 . Select most appropriate treatment from the options below**
- A. Cryoprecipitate
  - B. Prothrombin complex concentrate
  - C. Protamine sulphate
  - D. Intravenous Vit K
- 55. A Patient with post hip surgery now complaining of severe pain. O/E , BP 150/80 with no previous history of HTN. How will you manage HTN?**
- A. Tramadol
  - B. Atenolol
  - C. NSAID
  - D. Alprazolam
- 56. What's the 1st thing to go in diabetic neuropathy?**
- A. Vibration
  - B. Position
  - C. Proprioception
  - D. Pain sensations
- 57. What's the 1st sign of compartment syndrome?**
- A. Pain (is a symptom not sign)
  - B. No pulse

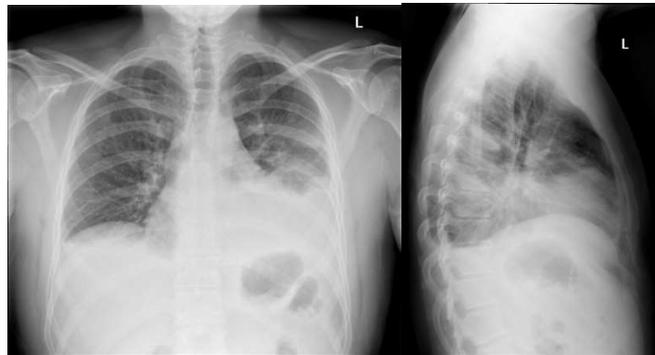
- C. Pallor  
D. Tightness and tenderness
58. A medical student develops tachycardia. His ECG is shown. What's the diagnosis?  
A. SVT  
B. VT  
C. Atrial fibrillation  
D. WPW
59. A patient presented with uncontrolled DM with retinopathy. He is on glibenclamide. His Cr= 2. What will you do?  
A. Stop glibenclamide and add insulin  
B. Add insulin to glibenclamide  
C. Add metformin to glibenclamide  
D. Shift to regular insulin only
- 
60. A pregnant lady comes with history of TB. After delivery what to do?  
A. Give baby 6 months of INH  
B. Start baby on ATT  
C. Keep mother in hospital until smear becomes negative  
D. Tell mother to have no contact with baby
61. Most common worldwide cause of bronchiectasis  
A. TB  
B. Cystic fibrosis  
C. Stomach drainage  
D. Along celiac nodes
62. 28-year-old male with a history of chronic nasal congestion now with progressively worsening dyspnea. He took aspirin recently for myalgias. Physical exam reveals expiratory wheeze and a polyp in left nasal turbinate. What is the cause?  
A. Allergic Rhinitis  
B. Aspirin associated asthma  
C. Bronchitis  
D. Upper Respiratory tract infection
63. Patient presents to the ER with a tension pneumothorax, needle aspiration is planned. What is the appropriate level for needle aspiration?  
A. 2nd intercostal space, midclavicular line  
B. 4th intercostal space  
C. Midclavicular line  
D. 5th intercostal space, mid axillary line
64. Person in his 30s had 300 cholesterol, 200 LDL and 1000 triglycerides. Alongside lifestyle modification, you will give?  
A. Niacin  
B. Fibrate  
C. Statin  
D. Cholestyramine
65. 16 months' baby with stridor. Increased when baby cries. Normal otherwise. What to do?  
A. Reassure

- B. Surgery
  - C. Give oxygen
  - D. Referral
66. A 65-year-old man's CXR reveals central lung tumor. Labs show Ca= normal, Na= 120. Which type is it?
- A. Small cell
  - B. Large cell
  - C. Squamous cell
  - D. Adenocarcinoma
67. A person on pre-employment checkup has asymptomatic bilateral hilar lymphadenopathy on chest X-ray. What is
- A. Tuberculosis
  - B. Sarcoidosis
  - C. AIDS
  - D. Lymphoma
68. Hyperthyroid picture: which investigation to order?
- A. TSH
  - B. FT4
  - C. T4, T3
  - D. Antibodies
69. p-value of a test is set at 0.025. You will reject the null hypothesis:
- A. At level of 3% significance
  - B. At level of 2% significance
  - C. At level of 1% significance
  - D. At level of 5% significance
70. A patient present with left-sided ptosis, headache and anisocoria. He has a history of long-standing diabetes mellitus. The patient is afebrile. Which of the following is an unlikely cause?
- A. Meningitis
  - B. Space occupying lesion
  - C. Myasthenia gravis
  - D. Diabetic neuropathy
71. A case history of mother with history of Sheehan syndrome. All labs show hypopituitarism. The lesion is most likely at which site?
- A. Hypothalamus
  - B. Pituitary gland
  - C. Cerebellum
  - D. Adrenal
72. Obese man presents with hypertension: the most relevant dietary intervention that will reduce blood pressure would be:
- A. Decrease fat
  - B. Decrease sodium
  - C. Exercise
  - D. Lose weight
73. A drowsy 11 months old baby with sunken fontanelle: what is the most appropriate

- management for this patient?**
- A. Oral rehydration and observe
  - B. Oral rehydration and refer
  - C. I/V hydration and observe
  - D. I/V hydration and refer
- 74. In 18 months old child, what is the best way to assess dehydration?**
- A. Urine output
  - B. Altered mental status
  - C. Sunken fontanelle
  - D. Sunken eyes
- 75. A 46 years old male with history of hemoptysis, weight loss, hard swollen supraclavicular lymph nodes. The next best test to order in this patient is:**
- A. Chest X-ray
  - B. Cytology
  - C. Lymph node biopsy
- 76. A child with diarrhea has 10 RBCs and many WBCs on stool D/R. What is the most likely cause?**
- A. Shigella
  - B. Entamoeba histolytica
  - C. Rotavirus
  - D. Salmonella
- 77. 14-year-old patient presented with Low fever, anorexia, multiple sub-cm LN in posterior triangle, tender, smooth liver edge 2 cm BCM, diagnosis**
- A. Liver abscess
  - B. Infectious mononucleosis
  - C. Lymphoma
  - D. Hepatitis
- 78. Female with fever, sore throat, fatigue, spleen tip, petechiae on palate, inflamed pharynx, after CBC, investigation you will do**
- A. Monospot
  - B. Blood culture
  - C. Throat swab
  - D. Bone marrow culture
- 79. Which of the following anti-tuberculous drug is contraindicated in pregnancy?**
- A. Rifampicin
  - B. Pyrazinamide
  - C. Ethambutol
  - D. Streptomycin
- 80. Man presents with complain of ammonia in his eye. Conjunctival injection and hazy cornea. What to do?**
- A. Irrigate
  - B. Antibiotics
  - C. Analgesia
  - D. Topical steroids
- 81. Girl with fever for 3 days, on panadol and amoxicillin. Fever subsided, now rash.**

- Painless, maculopapular, nonpruritic on trunk. Blanching. Palpable occipital nodes. What is the diagnosis?**
- A. German measles
  - B. Measles
  - C. Roseola infantum
  - D. Drug allergy
- 82. 28-year-old man with low backache for the last two years. The pain is non radiating and has become worse with time. There is stiffness in the back especially early in the morning and it gets better with activity. Examination is unremarkable except for limited forward flexion. Diagnosis?**
- A. Ankylosing spondylitis
  - B. Lumbar disc prolapse
  - C. Lumbosacral strain
  - D. Rheumatoid Arthritis
- 83. Person on thiazide diuretic present with swollen big toe and painful. What to give?**
- A. Allopurinol
  - B. Probenecid
  - C. NSAIDS
  - D. Pregabalin
- 84. A patient had a stroke: hemiplegia with slight dysarthria, no sensory loss and normal speech. What is the most likely location of the lesion?**
- A. Frontal cortex
  - B. Medial lemniscus
  - C. Internal capsule
  - D. Cerebellum
- 85. A 15-year-old male presents to ER with sudden onset of epigastric pain radiating to the back along with nausea and vomiting. On examination, there is epigastric tenderness with bruise along the umbilicus and the flanks. What is the most probable diagnosis?**
- A. Acute Pancreatitis
  - B. Acute Cholecystitis
  - C. Acute Appendicitis
  - D. Penetrating Ulcer
- 86. 20-week pregnant lady. Tetanus in pregnancy when to give**
- A. Stat and at delivery
  - B. 1 dose any time
  - C. 2 doses any time
  - D. 2 doses at least 2 weeks before delivery
- 87. A sexually active woman landed in emergency department having abdominal pain in left lower quadrant. Her date of last menstrual period was 2 weeks back. On examination, she was afebrile, visibly uncomfortable and found to have adnexal mass. Lab investigations showed leukocytes normal in count. What is the most likely diagnosis?**
- A. Acute appendicitis
  - B. PID
  - C. Hemorrhagic ovarian cyst
  - D. Ectopic pregnancy

88. A patient presented to you after an accident, he is unconscious and there is blood coming out from his right ear. What will be your first step regarding his management?
- Do the CT scan
  - Check his BSR
  - FAST scan
  - Secure the airway
89. Vaccination in 3-month-old baby in whom no previous vaccination was given?
- BCG, DPT, OPV
  - BCG, Pentavalent, OPV
  - BCG, DPT, IPV
  - BCG, DT, OPV, pentavalent
90. A person travelled from Chicago to Karachi and now having diarrhea. What will the organism for causing diarrhea in this patient?
- E. Coli
  - H. Influenza
  - Giardiasis
  - Amebiasis
91. A patient presented with left chest pain with increased work of breathing. X ray shows
- Lobar pneumonia
  - Pneumothorax
  - Lung contusion
  - Para pneumonic effusion



92. A patient is presented to you after severe diarrhea, now he is complaining of lethargy, drowsiness with BP=90/60, his JVP is decreased.
- JVP↓ SV↑ CO↓
  - JVP↓ SV↓ CO↓
  - JVP↓ SV↓ CO↓
  - JVP↑ SV↑ CO↓
93. A 73-year-old woman presents to the emergency room complaining of severe epigastric pain radiating to her back, nausea, and vomiting. CT scan of the abdomen demonstrates inflammation and edema of the pancreas. A right upper quadrant ultrasound demonstrates the presence of gallstones in the gallbladder. Which of the following is an important prognostic sign in acute pancreatitis according to Ranson's criteria?
- Amylase level
  - Age
  - Total bilirubin level
  - Lipase level
94. A 15-year-old child with head trauma was brought to the emergency after a road traffic accident. On examination, his right pupil was dilated with a decerebrate posture. An

- immediate CT scan showed a diffuse and biconvex hyperdense collection between the skull and the right frontal lobe of the brain. What will be the most probable diagnosis?
- A. Uncal herniation
  - B. Subdural hematoma
  - C. Epidural hematoma
  - D. Brain contusion
95. A 45-year-old male, known case of DM and gout, BMI 34, presented with the BP of 170/110. He was already taking Amiodarone 10mg. Which of the following drugs will you add along with lifestyle modification?
- A. Add losartan
  - B. Add hydrochlorothiazide
  - C. Add beta blocker
  - D. Add alpha blocker
96. A pregnant patient is having symptoms of diabetes mellitus. How will you confirm this as a case of gestational diabetes mellitus?
- A. OGTT more than 205 after 2 hours
  - B. FBS of 110
  - C. Random of 180
  - D. UDR proteins
97. A woman presents to the outpatient clinic with non-bilious vomiting. Physical examination shows visible peristalsis and positive succussion splash. What will you do next?
- A. Endoscopy
  - B. Barium meal
  - C. IV fluid resuscitation with NG decompression
  - D. IV antibiotics and gastric lavage
98. A surgeon got a cut on his hand while performing surgery. His BP is 80/50 mmHg and pulse is 150 bpm. What will be the estimated blood loss?
- A. 10%
  - B. 20%
  - C. 30%
  - D. 40%
99. A 30-year-old newly married female presented to gynae OPD with a complaint of yellowish foul smelling vaginal discharge that usually increased during sexual intercourse. What is the most likely organism?
- A. Chlamydia
  - B. Gonorrhoea
  - C. Syphilis
  - D. Trichomonas
100. A 22 years old male (weight= 45kg) came to ER after extensive burns of different body parts. Burn area is calculated about 25%. Calculate how much fluid should be given to a him in first 8 hours?
- A. 9000 ml
  - B. 4500 ml
  - C. 2250 ml
  - D. 2000 ml
- Explanation: According to parkland formula

Volume of R/L in first 24 hours= 4 ml (% of TBSA) x (weight in kg)  
 = 4 x 25x 45 ml  
 = 4500 ml  
 So, volume of R/L given in first 8 hours= 2250 ml

Agha Khan Residency & Internship Exam (Mock Test)									
1-A	2-D	3-D	4-D	5-B	6-A	7-B	8-D	9-B	10-B
11-B	12-B	13-A	14-B	15-C	16-D	17-D	18-A	19-B	20-D
21-B	22-C	23-D	24-C	25-A	26-B	27-A	28-B	29-D	30-A
31-A	32-D	33-B	34-D	35-A	36-B	37-B	38-B	39-B	40-A
41-A	42-A	43-B	44-A	45-C	46-A	47-A	48-C	49-B	50-D
51-D	52-A	53-A	54-B	55-A	56-A	57-B	58-A	59-A	60-A
61-A	62-B	63-A	64-B	65-A	66-A	67-A	68-A	69-D	70-C
71-B	72-B	73-C	74-A	75-A	76-A	77-A	78-A	79-D	80-A
81-C	82-A	83-C	84-C	85-A	86-D	87-D	88-D	89-A	90-A
91-D	92-A	93-B	94-C	95-A	96-A	97-C	98-D	99-D	100-C

## Generic Paper 2024

Generic

1. A 28-year-old man presents to the clinic with complaints of painful urination that started two weeks ago, swelling and pain in his right knee, and redness in both eyes accompanied by discharge. He denies any recent trauma or systemic symptoms such as fever or weight loss. His past medical history is unremarkable, but he reports a recent episode of unprotected sexual intercourse one month ago. What is the most likely diagnosis?

A. Osteoarthritis  
B. Rheumatoid Arthritis  
C. Reiter's Syndrome  
D. Septic Arthritis  
E. Ankylosing Spondylitis

Surgery &amp; Allied

2. A 40-year-old woman presents to the emergency department with progressive weakness and difficulty swallowing that started earlier in the day. She also reports blurred vision, dry mouth, and constipation. Her symptoms began 12 hours after attending a family gathering, where she ate home-canned vegetables. On examination, she has bilateral ptosis, facial weakness, and sluggish pupillary reactions. Muscle strength is reduced in both the upper and lower limbs, and deep tendon reflexes are absent. There are no sensory deficits. Which of the following is the most likely diagnosis?

A. Guillain-Barré Syndrome (GBS)  
B. Multiple Sclerosis  
C. Myasthenia Gravis  
D. Amyotrophic Lateral Sclerosis (ALS)  
E. Botulism

Medicine &amp; Allied

3. A 28-year-old woman presents to the neurology clinic with blurry vision in her right eye and difficulty walking for the past two weeks. She describes eye pain worsened by movement and states that she had a similar episode of numbness in her left leg six months ago, which resolved on its own. Over the past few days, she has also noticed fatigue and difficulty maintaining her balance. On examination, she has decreased visual acuity in the right eye, a relative afferent pupillary defect (RAPD), hyperreflexia, and increased muscle tone in the lower limbs. MRI of the brain shows multiple periventricular white matter lesions. Which of the following is the most likely diagnosis?

A. Guillain-Barré Syndrome (GBS)  
B. Myasthenia Gravis (MG)  
C. Multiple Sclerosis (MS)  
D. Neuromyelitis Optica (NMO)  
E. Acute Disseminated Encephalomyelitis (ADEM)

Internship

4. A 32-year-old man presents to the emergency department with progressive weakness in his legs for the past three days, which has now started to affect his arms. He describes a tingling sensation in his feet that initially appeared a week ago. He also reports difficulty standing up from a seated position. His medical history is significant for a mild flu-like illness two weeks ago. On examination, he has bilateral lower limb weakness, areflexia, and decreased vibratory sensation in the feet. His cranial nerves are intact. His vitals are stable, but he has a mild tachycardia. Which of the following is the most likely diagnosis?

A. Guillain-Barré Syndrome (GBS)

- B. Transverse Myelitis
  - C. Myasthenia Gravis (MG)
  - D. Botulism
  - E. Multiple Sclerosis (MS)
5. A mother brings her 2-year-old child to the clinic with a history of 4-6 loose stools per day for the past 4 days. The child appears distressed, starts crying, and has tears rolling down their cheeks. The child is alert but irritable, and there are no sunken eyes, lethargy, or poor skin turgor. According to the Integrated Management of Neonatal and Childhood Illness (IMNCI) guidelines, what is the most appropriate initial step in managing this child's condition?
- A. Oral Metronidazole
  - B. IV Infusion
  - C. Oral Rehydration
  - D. Stool Culture
  - E. Antibiotics
6. A 25-year-old female presents to the gynecology clinic with complaints of frothy, yellow-green vaginal discharge and intense vaginal itching. She also reports dysuria and discomfort during intercourse. On examination, there is erythema and inflammation of the vaginal walls, and the cervix appears friable with punctate bleeding spots. A wet mount microscopy of the vaginal discharge reveals motile, flagellated protozoa. What is the most appropriate treatment for this condition?
- A. Metronidazole
  - B. Fluconazole
  - C. Doxycycline
  - D. Clindamycin
  - E. Azithromycin
7. A patient with hyperkalemia is scheduled for surgery. The anesthesiologist is considering which neuromuscular blocker to use and is concerned about the potential for worsening the patient's condition. Which neuromuscular blocker is contraindicated in a patient with hyperkalemia?
- A. Atracurium
  - B. Pancuronium
  - C. Suxamethonium
  - D. Rocuronium
  - E. Vecuronium
8. A 35-year-old male is undergoing a minor skin procedure under local anesthesia with lidocaine. Shortly after the injection, he reports a strange tingling sensation around his mouth and a metallic taste. He also feels slightly lightheaded but remains alert. On further questioning, he denies any nausea, vomiting, seizures, tremors or visual disturbances. The doctor immediately suspects lidocaine toxicity. Which of the following is the most common initial sign of lidocaine toxicity?
- A. Seizures
  - B. Nausea and vomiting
  - C. Tremors
  - D. Perioral numbness
  - E. Dizziness
9. A 23-year-old woman is brought to the emergency department after being found

unconscious at home. Her parents discovered an empty bottle of antidepressants beside her. On arrival, she is drowsy but arousable, with a heart rate of 120 bpm and a widened QRS complex on ECG. Her blood pressure is 90/60 mmHg, and she appears flushed and dry-skinned. Bedside labs show metabolic acidosis. Which of the following medications is most likely responsible for her arrhythmia?

- A. Amitriptyline
- B. Fluoxetine
- C. Sertraline
- D. Diazepam
- E. Bupropion

10. A patient with a diagnosed case of schizophrenia has expressed plans to kill his mother. The doctor must decide on the appropriate course of action to manage the patient's safety and protect potential victims. What should the doctor do in response to the patient's expressed intent to harm his mother?

- A. Give antipsychotic medication and reexamine after several hours
- B. Inform the mother about the threat and admit the patient to the hospital
- C. Inform the police about the patient's plan
- D. Inform the police and request an arrest if the patient leaves the hospital
- E. Notify the mother and increase the patient's medication dosage

11. A 35-year-old farmer is brought to the emergency department by coworkers after being found confused and unsteady in a field. The patient has hypotension (BP 90/60 mmHg), excessive drooling, profuse sweating, miosis (pinpoint pupils), and muscle fasciculations. The emergency physician suspects organophosphate poisoning. What is the immediate next step in managing this patient?

- A. Atropine
- B. Activated charcoal
- C. Sodium bicarbonate
- D. Naloxone
- E. N-acetylcysteine

12. A 45-year-old male presents to the emergency department with pinpoint pupils, excessive lacrimation, salivation, and confusion. He also reports difficulty breathing. Upon further questioning, he reveals that he accidentally spilled insecticide on himself while working in his garden earlier in the day. His symptoms have progressively worsened over the past hour. On physical examination, bradycardia, bilateral wheezing, and diaphoresis are noted. What is the most likely underlying cause of his clinical presentation?

- A. Organophosphate Poisoning
- B. Opioid Overdose
- C. Benzodiazepine Overdose
- D. Digoxin Toxicity
- E. Allergic Reactions

13. A 16-year-old is brought to the emergency department by family after ingesting an unknown substance 45 minutes ago. The patient is drowsy but responsive, with slurred speech and slow breathing. The emergency physician suspects a drug overdose. For which of the following substances is gastric lavage an appropriate treatment?

- A. Kerosene oil within 1 hour
- B. Large amount of alkali
- C. Large amount of acid
- D. Phenobarbital within 1 hour