

Government Medical College and Hospital Sector 32, Chandigarh

Post: Senior Resident Dermatology

QUESTION BOOKLET

Time: 120 Minutes

Number of Question: 100

Maximum Marks: 100

Name of Candidate

Roll Number: In figure

In Words

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Signature of the Candidate: _____

DO NOT OPEN THE SEAL ON THE BOOKLET UNTIL ASKED TO DO SO

INSTRUCTIONS:-

1. Write your Roll Number on the Question Booklet and also on the OMR Sheet in the space provided. You will be required to give your thumb impression on the OMR sheet in the space provided.
2. This question booklet contains 100 MCQ's. Once you are permitted to open the Question Booklet, please check for any missing question / misprint etc. and in case of any discrepancy, inform the Assistant Superintendent / Invigilator within 10 minutes of the start of the test.
3. Each question has four alternative answer (A, B, C, D) out of which only one is correct. For each question, **darken only one bubble (A or B or C or D)**, whichever you think is the correct answer, on the OMR Answer sheet **with Black or Blue Ball Pen only**. Do not use any other Pen / Gel pen / Pencil etc. **Do not Tick ✓ or × on the OMR Sheet**. Darken the bubbles in the OMR Answer Sheet according to the Serial No. of the Questions given in the Question Booklet.
4. Each MCQ is of One (01) mark. There is no negative marking.
5. If you do not want to answer a question, leave all the bubbles corresponding to that question blank in the OMR Answer sheet.
6. The OMR Answer sheet is designed for computer evaluation. Therefore, if you do not follow the instructions given, it may make evaluation by the computer difficult. Any resultant loss to the candidates on the above account, i.e. not following instructions completely and properly, shall be the responsibility of the candidates only.
7. After the test, handover the Question Booklet and OMR sheet to the Invigilator on duty.
8. A Candidate who creates disturbance of any kind or changes his/her seat or is found in possession of any paper or the any assistance or found giving or receiving assistance or found using any other unfair means during the examination will be expelled from the examination by the Centre superintendent/Observer whose decision shall be final.
9. Telecommunication equipment such as pager, cellular phone, wireless, scanner, smart watch/ watch etc. is not permitted inside the examination hall. Use of calculators is not allowed.
10. Candidate should ensure accuracy of their personal details on the OMR Sheet i.e. Name and Roll No. as well as thumb impression. The personal details are to be filled in by the candidates with his/her own hand writing.

1. All are types of endogenous eczema except:
 - A. Atopic Dermatitis
 - B. Photoallergic Dermatitis
 - C. Seborrheic Dermatitis
 - D. Pityriasis Alba
2. MASI score is used to indicate the severity of:
 - A. Mycosis Fungoides
 - B. Miliria rubra
 - C. Melasma
 - D. Mondors disease
3. The characteristic histopathological feature of psoriasis is:
 - A. Spongiosis
 - B. Spongiform pustules
 - C. Acantholysis
 - D. Pigmentary incontinence
4. Darier's Sign is seen in:
 - A. Dermatitis Herpetiformis
 - B. Darier disease
 - C. Discoid Lupus Erythematosus
 - D. Mastocytosis
5. Dennie Morgan's fold is a feature of:
 - A. Systemic lupus erythematosus
 - B. Atopic Dermatitis
 - C. Vitiligo
 - D. Pemphigus
6. Pemphigus vulgaris antigens are located in
 - A. Hair
 - B. Reticular Dermis
 - C. Epidermis
 - D. Nail matrix
7. "Christmas tree" pattern is seen in:
 - A. Pityriasis rosea
 - B. Pityriasis versicolor
 - C. Pityriasis rubra pilaris
 - D. Psoriasis
8. "Ophiasis" pattern is seen in:
 - A. Scalp psoriasis
 - B. Pseudopelade
 - C. Cicatricial alopecia
 - D. Alopecia areata
9. Cicatricial alopecia is a feature of all except:
 - A. Lichen planus
 - B. Discoid Lupus Erythematosus
 - C. Anagen effluvium
 - D. Pseudopelade
10. UV A or Sun exposure following systemic psoralen administration is done after:
 - A. Immediately
 - B. 30 minutes
 - C. 2 hours
 - D. 4 hours
11. Depigmentation may be a feature of all EXCEPT:
 - A. Lichen sclerosus
 - B. Leprosy
 - C. Vitiligo
 - D. Contact leukoderma
12. Koebner's Phenomenon is typically seen in
 - A. Lichen planus
 - B. Pityriasis rosea
 - C. Atopic dermatitis
 - D. Discoid dermatitis
13. Lichenification includes all EXCEPT:
 - A. Thickening of skin
 - B. Pigmentation
 - C. Accentuation of skin markings
 - D. True loss of sensation
14. White Dermographism is a feature of:
 - A. Vitiligo
 - B. Atopic dermatitis
 - C. Pityriasis rubra pilaris
 - D. Nevus depigmentosus
15. All are used in the therapy of psoriasis vulgaris EXCEPT:
 - A. Psoralens
 - B. Methotrexate
 - C. Dexamethasone-cyclophosphamide pulse therapy
 - D. Systemic retinoids
16. Acrodermatitis enteropathica occurs due to deficiency of:
 - A. Copper
 - B. Selenium
 - C. Zinc
 - D. Iron

17. Histoid Hansen's is a type of
 - A. Multibacillary Leprosy
 - B. Paucibacillary Leprosy
 - C. Poly Neuritic Leprosy
 - D. Indeterminate Leprosy
18. To confirm a dermatophytic infection the following test may be done
 - A. Tzank smear
 - B. KOH examination
 - C. Fungal culture
 - D. Slit skin smear
19. Classical features of herpes zoster thoracis include:
 - A. Dermatomal / segmental lesions
 - B. Painless lesions
 - C. Intractable itching
 - D. Remissions and relapses
20. A 10-year-old boy developed an asymptomatic single patch of complete hair loss over the occipital scalp. The skin in this patch was apparently normal. What is the most probable diagnosis?
 - A. Morphea
 - B. Tinea capitis
 - C. Trichotillomania
 - D. Alopecia areata
21. Miliaria rubra is a disorder of the :
 - A. Apocrine sweat glands
 - B. Ectopic Sebaceous glands
 - C. Eccrine sweat glands
 - D. Both apocrine and eccrine sweat glands
22. Dermatoheliosis is another term for
 - A. Photoaging
 - B. Chronic actinic dermatitis
 - C. Dermatomyositis rash
 - D. Premature aging syndrome
23. "Lupus pernio" is the clinical form of
 - A. Cutaneous tuberculosis
 - B. Systemic lupus erythematosus
 - C. Cutaneous sarcoidosis
 - D. Porphyria cutanea tarda
24. The treatment in dermatophytic finger nail infections needs to be done for a minimum of
 - A. 1 month
 - B. 3 months
 - C. 6 months
 - D. 12 months
25. Dosage adjustment of Acyclovir is required in a patient with:
 - A. Hepatitis
 - B. Cholecystitis
 - C. Renal impairment
 - D. Impaired glucose tolerance
26. Most common dermatome involvement in Herpes zoster is
 - A. Trigeminal
 - B. Thoracic
 - C. Cervical
 - D. Ophthalmic
27. Oral Griseofulvin is best absorbed when taken:
 - A. Empty stomach
 - B. After a meal
 - C. With milk
 - D. With a liquid meal
28. The causative organism of Donovanosis is
 - A. Hemophilus ducreyi
 - B. Klebsiella granulomatis
 - C. Chlamydia trachomatis
 - D. Neisseria gonorrhoeae
29. The dermatological sign of Tuberous sclerosis which manifests the earliest is
 - A. Café-au-lait macules
 - B. Shagreen patch
 - C. Hypomelanotic ash-leaf macules
 - D. Koenen's Tumors
30. The commonest cause of contact dermatitis among the metals in jewellery is:
 - A. Platinum
 - B. Gold
 - C. Silver
 - D. Nickel

31. Incubation period of syphilis is
 A. 24-48 hours
 B. 1-7 days
 C. 9-90 days
 D. 1-3 years
32. Granuloma annulare is usually associated with
 A. Diabetes mellitus
 B. Hyperthyroidism
 C. Bronchial asthma
 D. Hypertension
33. Bullous impetigo is mainly caused by-
 A. Coryneform bacteria
 B. Staphylococcus aureus
 C. Streptococcus viridans
 D. Streptococcus pyogenes
34. The antibody characteristic of neonatal lupus erythematosus is:
 A. Anti-mitochondrial antibodies
 B. Scl-70 antibodies
 C. Anti RNP antibodies
 D. Anti Ro antibodies
35. Fetal Varicella Syndrome occur if varicella in pregnant female is acquired-
 A. before 28 weeks
 B. after 28 weeks
 C. Before labour
 D. None of the above
36. Atrophoderma of Pasini and Pierini is an atrophic variant of
 A. Keratoacanthoma
 B. Panniculitis
 C. Pseudolymphoma
 D. Morphea
37. Photopheresis involves administration of oral psoralen followed by removal of following cells by a cell separator
 A. Red blood cells
 B. White blood cells
 C. Platelets
 D. Fibrin
38. The 'sign of groove' is seen in:
 A. Chancroid
 B. Granuloma inguinale
 C. Lymphogranuloma venereum
 D. Secondary syphilis
39. Pellagra is caused by the deficiency of
 A. Biotin
 B. Riboflavin
 C. Thiamine
 D. Nicotinic acid
40. The recommended dose of oral isotretinoin in patients of acne vulgaris is (in mg / kg body weight)
 A. 0.1 - 0.3
 B. 0.5 - 1.0
 C. 1.0 - 3.0
 D. 3.0 - 5.0
41. A 15-year-old girl developed multiple, asymptomatic, flat topped, skin coloured papules, slowly increasing in number over face for the last one year. What is the most likely diagnosis?
 A. Freckles
 B. Molluscum contagiosum
 C. Verruca vulgaris
 D. Verruca plana
42. The UV-A radiation spectrum comprises of the wavelengths
 A. 100-280 nm
 B. 280-320 nm
 C. 320-400 nm
 D. 400- 700 nm
43. "LE cells" are
 A. B-Lymphocytes
 B. Polymorphonuclear leukocytes
 C. Tissue fibroblasts
 D. Circulating Basophils
44. The half-life of Itraconazole is
 A. 7 days
 B. 5 days
 C. 3 days
 D. 1 day
45. Onychomadesis is a disease of
 A. Nail bed
 B. Nail folds
 C. Nail matrix
 D. Nail lunula

46. Voriconazole acts through inhibition of
- P-450 dependent lanosterol 14 - alpha demethylase
 - Nucleic acid synthesis deaminase
 - Squalene epoxidase
 - Membrane bound squalene epoxidase
47. Cumulative insult dermatitis of hand is due to
- Irritant contact dermatitis
 - Allergic contact dermatitis
 - Photo contact dermatitis
 - Atopic dermatitis
48. Restrictive dermopathy is characterised by all **except**
- Loose and redundant skin
 - Long term survival is poor
 - Stiff and tense skin
 - Lung hypoplasia
49. Toxic shock syndrome has all of the following **except**
- Caused by *Staphylococcus aureus* toxin
 - Potentially fatal disease
 - Patients have high antibodies towards staphylococcal toxin
 - Fever and rash is common presentation
50. Scorpion stings are characterised by
- Septic shock
 - Motor dysfunction
 - Sensory dysfunction
 - Mixed motor and sensory dysfunction
51. Acyclovir resistance is often due to
- Poor bioavailability of the drug
 - Lack of renal concentration of drug
 - Absence of Phosphorylation by the virus
 - Use and abuse of low dose acyclovir
52. Delayed pressure urticaria best responds to
- Bilastine
 - Danazol
 - NSAIDs
 - Ranitidine
53. Podophyllin gives best efficacy in
- Giant condyloma acuminata
 - Verruca vulgaris type of condyloma acuminata
 - Condyloma acuminata affecting muco-cutaneous junctions
 - Intravaginal and Intra-urethral condyloma acuminata
54. Atrichia with papular lesions is characterised by **all except**
- Mental retardation
 - Gastrointestinal polyposis
 - Delay in the bone age
 - Marfanoid habitus
55. Hartnup disease has cutaneous manifestations that resemble
- Beriberi
 - Pellagra
 - Hypervitaminosis A
 - Pyridoxine deficiency
56. The most abundant essential fatty acid normally present in the epidermis is
- Arachidonic acid
 - Linolenic acid
 - Eicosatrienoic acid
 - Columbic acid
57. The Carcinoid syndrome can include cutaneous changes similar to
- Vitamin B₁₂ deficiency
 - Biotin deficiency
 - Pellagra
 - Copper deficiency
58. Synthetic retinoids in the blood are bound particularly to
- Plasma Retinol-binding protein
 - Cellular retinol-binding protein
 - Cellular retinoic acid-binding protein
 - Transthyretin (pre-albumin)
59. The wavelength of light important in vitamin D synthesis in the skin are in the range of
- 290 to 320 nm
 - 320 to 400 nm
 - 400 to 410 nm
 - 470 nm to 510 nm

60. Hypogeusia refers to an alteration in
 A. Hearing
 B. Balance
 C. Taste
 D. Tactile sensation
61. The origin of amyloid deposits in macular and lichenoid localized amyloidosis is
 A. Bone marrow immunoglobulin
 B. Serum proteins synthesized in the liver
 C. Serum proteins synthesized in the kidney
 D. Keratinocytes
62. Cheiralgia paresthetica is best defined as
 A. Lateral, femoral cutaneous nerve-derived thigh pain
 B. Radial nerve-derived hand pain
 C. Supra-scapular nerve-derived back pain
 D. Saphenous nerve-derived leg pain
63. The recessively inherited syndrome caused by deficiency of α_1 antitrypsin is associated with all **except**
 A. Early, severe, rapidly progressive emphysema
 B. Late, mild, slowly progressive scleroderma-like changes
 C. Early, severe, rapidly progressive scleroderma like changes
 D. Late, severe, slowly progressive scleroderma-like changes
64. Each of the following is essentially a synonym for a form of necrotizing venulitis, **except**
 A. Allergic angiitis
 B. Hypersensitivity angiitis
 C. Leukocytoclastic vasculitis
 D. Urticarial vasculitis
65. The "innocent bystander" hypothesis of vasculitis proposes that Fibrinoid necrosis of blood vessel walls occurs because of activity of
 A. Complement cascade
 B. Kinins
 C. Eosinophil release products
 D. Neutrophil release products
66. Of the following malignancies, the disease most frequently associated with Sweet's syndrome is
 A. Multiple myeloma
 B. Lymphoma
 C. Myelogenous leukemia
 D. Neuroblastoma
67. Of the following, the most severely affected cases in Behcet's disease are
 A. Women with early onset of disease
 B. Women with late onset of disease
 C. Men with early onset of disease
 D. Elderly black women
68. Which of the following types of paraproteinemia should be particularly looked for in a patient with pyoderma gangrenosum?
 A. Ig A
 B. Ig G
 C. Ig M
 D. Ig E
69. Quality of polypropylene which makes it a good choice for cosmetic procedures
 A. Good memory
 B. Monofilament
 C. Absorbable
 D. Good knot strength
70. This antifungal agent is also excreted by the sebaceous glands
 A. Griseofulvin
 B. Amphotericin
 C. Itraconazole
 D. Terbinafine
71. Highest potency is carried in the following topical formulation
 A. Cream
 B. Gel
 C. Lotion
 D. Ointment
72. Tranexamic acid is used for the treatment of all **except**
 A. Hereditary angioedema
 B. Menorrhagia
 C. Melasma
 D. Acne

73. Hydroxychloroquine is a drug which is pregnancy
- Category A
 - Category B
 - Category C
 - Category D
74. Which of the following is not a cutaneous marker of internal malignancy?
- Acanthosis nigricans
 - Erythema gyratum repens
 - Necrolytic migratory erythema
 - Erythema chronicum migrans
75. Pediculosis corporis var. humanis (Body louse) lays eggs at the following site
- Seams of clothes
 - Under the nails
 - On body hair
 - On the bed linen
76. The lymph node involvement in Chancroid shows the following characteristic
- Chronic multilocular non-suppurative
 - Acute multilocular suppurative
 - Acute unilocular suppurative
 - Chronic unilocular suppurative
77. Tinea capitis is the likely diagnosis when there is
- A localized area of alopecia with normal skin
 - A localized area of alopecia with broken hair and scaly skin
 - An area of Cicatricial alopecia
 - Moth eaten alopecia
78. Treatment best preferred in a 6-month old infant with scabies is
- 1% Permethrin
 - 5% Permethrin
 - 10% Sulphur
 - 1 % GBHC
79. In patients with the sign (syndrome) of Leser-Trelat, the most common internal malignancy is adenocarcinoma of the
- Stomach
 - Colon
 - Kidney
 - Ovary
80. Symptoms of serumboid food poisoning most closely resemble those induced by
- Scopolamine
 - Serotonin
 - Histamine
 - Tetanus toxin
81. Each of the following statements regarding epidermolysis bullosa herpetiformis (Dowling-Meara) is true, except
- Transmission of the disease is by autosomal dominant inheritance
 - Onset is during the first 3 months of life
 - It is characterized by generalized bullae in a herpetiform arrangement that typically heal without scarring
 - Lesions are exacerbated by fever and are worse in summer
82. The chronic phase of the toxic oil syndrome most closely resembles
- Miner's pneumonitis
 - Subacute lupus erythematosus
 - Scleroderma
 - Lichenoid seborrheic dermatitis
83. In patients with urticaria pigmentosa who are found to have systemic involvement, the most frequently involved site is
- Liver
 - Spleen
 - Lungs
 - Bone marrow

84. The most diagnostic feature of paraneoplastic pemphigus is
- Autoantibodies that bind to a subset of epidermal proteins denoted Desmoplakin I (250 kd) and II (210 kd)
 - The classic appearance of a bullous eruption only in patients with malignancy who are undergoing radiotherapy
 - The absence of oral involvement in otherwise typical clinical appearance of pemphigus
 - A bullous eruption localized to the site of an underlying abdominal malignancy
85. Which of the following skin lesions has not been described in association with histiocytosis X (Langerhans cell histiocytosis)?
- Bronze pigmentation
 - Acrodermatitis enteropathica
 - Lipid infiltration of the eyelids
 - Granuloma annulare-like plaques
86. Which of the following organisms can cause tinea capitis in an adult?
- Microsporum audouinii*
 - Trichophyton mentagrophytes*
 - Epidermophyton floccosum*
 - Trichophyton tonsurans*
87. Acquired ichthyosis may be sign of
- Internal malignancy
 - HIV-1 infection
 - Concomitant HIV-1 and HTLV-II infection more frequently than HIV-1 infection alone
 - All of the above
88. Each of the following foods has a high nickel content except
- Chocolate milk
 - Spinach
 - Raspberries
 - Alcoholic beverages
89. Which of the following organisms causes erythema infectiosum?
- Coxsackievirus
 - Cytomegalovirus
 - Human parvovirus
 - Epstein - Barr virus
90. Each of the following statements regarding delusions of parasitosis is true except
- The typical patient is a middle-aged or elderly woman who appears frustrated or exhausted.
 - Evaluation of an affected patient requires a search for a true infestation or organic cause.
 - The "matchbox sign" is not pathognomonic for the disease
 - The therapeutic drug of choice is Phenobarbitone
91. Which of the following may be associated with balanitis xerotica obliterans?
- Bulla formation
 - Urethral meatal stenosis
 - Stricture of the foreskin
 - All of the above
92. Disease that have been reported to occur in association with lymphomatoid papulosis include each of the following EXCEPT
- Hodgkin's disease
 - Cutaneous T-cell lymphoma
 - Follicular small-cleaved lymphoma
 - Notalgia paresthetica
93. Clonal rearrangements of immunoglobulins or T-cell receptors genes may be found in
- Angiolymphoid hyperplasia with eosinophilia
 - Cutaneous lymphoma, localized to the skin
 - Cutaneous lymphoma, with systemic disease
 - All of the above

94. Each of the following statements regarding atypical mole syndrome (AMS) or dysplastic nevus syndrome is true except

- A. The AMS phenotype is characterized by many nevi, clinically atypical nevi, and nevi in unusual sites.
- B. Melanoma patients with AMS phenotype are likely to be at increased risk of additional primary tumors
- C. Data suggest that only a small percentage of patients with melanoma have the AMS phenotype
- D. The presence of the AMS phenotype in a patient with melanoma merits screening for the first-degree relatives, even in the absence of a family history of melanoma.

95. Proximal white subungual onychomycosis is an unusual pattern of superficial infection. Its presence suggests

- A. Insufficient treatment
- B. Clinical relapse of previously treated onychomycosis
- C. Underlying HIV infection
- D. Dermatophytosis because it is the most common pattern

96. Ecthyma gangrenosum is a cutaneous sign of

- A. Fiberglass dermatitis
- B. Osler-Weber-Rendu syndrome
- C. Frostbite reaction
- D. Pseudomonas septicemia

97. Organic illnesses associated with delusional parasitosis include all except

- A. Cocaine abuse
- B. Dementia
- C. Motor neurone disease
- D. Diabetes mellitus

98. Each of the following statements characterizes lichenoid drug eruptions (LDEs) except

- A. LDEs wax and wane despite discontinuation of drug
- B. Common inducers of LDEs include macrolides, cephalosporins, and β -adrenergic blocking agents.
- C. Oral mucosal lesions occur more frequently in LDEs than in idiopathic lichen planus
- D. Skin lesions commonly show a pattern of photo distribution

99. "Non-bullous pemphigoid" can persist without vesicles or bullae for as long as

- A. 1 month
- B. 1 year
- C. 2 years
- D. 3 years

100. All are the connexion disorders of the skin except

- A. Erythrokeratoderma variabilis
- B. Diffuse palmoplantar keratoderma with sensorineural hearing loss
- C. Epidermodysplasia verruciformis
- D. Hidrotic ectodermal dysplasia

SUBJECT DERMATOLOGY

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