

# श्री चित्रा तिरुनाल आयुर्विज्ञान और प्रौद्योगिकीसंस्थान, तिरुवनंतपुरम्-11 SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES & TECHNOLOGY THIRUVANANTHAPURAM—695 011

## **ENTRANCE EXAMINATION - ACADEMIC SESSION JUNE 2018**

## **DM Cardiology (Pediatrics)**

Time: 90 Minutes

Max. Marks: 100

(Select the most appropriate answer) (There are no negative marks for wrong answers)

- 1. All of the following are true regarding constitutional growth delay, except
  - A. IGF-1 levels are normal for bone age
  - B. Pubertal growth spurt is delayed
  - C. Majority attain the expected normal adult height
  - D. Skeletal age is delayed
- 2. Which among the following accounts for the commonest etiology during evaluation of children with congenital malformations
  - A. Multifactorial inheritance
    - B. Chromosomal disorders
    - C. Single gene mutations
    - D. Teratogenicity
- 3. Which is the commonest identified chromosomal abnormality in spontaneously aborted fetuses?
  - A. Trisomy 21
  - B. Trisomy 18
  - C. Trisomy 13
  - D. Turner syndrome
- 4. Which among the following statements regarding measles is incorrect
  - A. It is caused by single stranded RNA virus
  - B. Only one serotype of the virus has been identified till date
  - C. The commonest complication in children is otitis media
  - D. Modified measles infection occurs in the immunocompromised host

- 5. What proportion of children who acquire hepatitis B virus by perinatal transmission have persistent infection?
  - A. Less than 10 %
  - B. One-third
  - C. Nearly 50%
  - D. More than four-fifths
- 6. Prolongation of prothrombin time occurs in deficiency of which of the following clotting factors
  - A. VII
  - B. VIII
  - C. Von willebrand factor
  - D. XI
- 7. During screening of hemoglobinopathies in a new-born, the electrophoresis showed FAS pattern. This suggests a diagnosis of : :
  - A. Sickle cell β-thalassemia zero
  - B. Sickle cell β-thalassemia +
  - C. Sickle cell disease
  - D. Sickle cell trait
- 8. All of the following are true regarding potassium, except
  - A. The plasma potassium is normally 0.4 mEq/L higher than the serum value
  - B. For every 100,000/m<sup>3</sup> increase in the platelet count, the serum potassium level rises by approximately 0.15mEq/L
  - C. White blood cell counts above 200,000/m3 are associated with elevated serum potassium, but not plasma potassium
  - D. Antidiuretic hormone has negligible overall impact on the potassium balance
- 9. A 6-week-old cyanotic baby, diagnosed to have heterotaxy syndrome, was detected to have asplenia. The child was referred for appropriate institution of prophylaxis against infections. Which among the following statements is the correct one?
  - A. Quadrivalent conjugate meningococcal vaccine, MenACWY-D should not be administered till 2 years
  - B. The 13-valent Pneumococcal conjugate vaccine and 23-valent Pneumococcal polysaccharide vaccine should be administered together at 2 months for adequate immune response
  - C. Prophylaxis with phenoxy-methyl penicillin or amoxicillin should be initiated immediately and continued till 2 years of age if vaccinations are given
  - D. Intranasal influenza vaccine should be given at 6 months of age

1

#### 10. Pegvisomant is a

- A. Somatostatin analogue
- B. Growth hormone receptor antagonist
- C. Recombinant IGF-1
- D. Dopamine (D2) receptor agonist
- 11. Which of the following statements regarding congenital hypertrophic pyloric stenosis is incorrect?

•

. . .

- A. Unconjugated hyperbilirubinemia is a common clinical association
- B. A pyloric thickness of >2 cm is the characteristic ultrasound diagnostic criterion
- C. Hypochloremic metabolic alkalosis is the usual blood gas abnormality
- D. Reduced levels of neuronal nitric oxide synthase (nNOS) is implicated
- 12. The average daily nutrient intake level estimated to meet the requirements of half of the healthy members of a particular life stage and gender group is called
  - A. Estimated;average requirement
  - B. Estimated energy requirement
  - C. Recommended daily allowance
  - D. Adequate intake
- 13. Which of the following statements regarding infantile oesophagus is incorrect?
  - A. At rest, the tonic lower oesophageal sphincter pressure is >20 mmHg
  - B. Santmyer swallow is a normal phenomenon in healthy infants
  - C. The lower oesophageal sphincter pressure is usually higher than the upper oesophageal sphincter pressure
  - D. The normal oesophageal peristaltic speed is 3 cm/sec
- 14. Anti-thyroid antibodies are associated with all, except
  - A. Down syndrome
  - B. Turner syndrome
  - C. William syndrome
  - D. Type 1 diabetes mellitus
- 15. Which of the following is true about haemoglobin?
  - A. At birth HbF constitutes 90% of haemoglobin
  - B. At birth, HbA2 constitutes 2% of haemoglobin
  - C. Decline in the proportion of HbF starts in third trimester of pregnancy
  - D. Throughout life, the ratio of HbA to HbA2 is about 10:1

16. By what age does GFR of a child reach adult value?

- A. 1 year
- B. 3 years
- C. 5 years
- D. 7 years

17. Myokymia is a prominent feature of

- A. Morvan's syndrome.
- B. Trypanosomiasis.
- C. Neurocysticercosis.
- D. Lithium toxicity

18. Rituximab acts by binding to

- A. CD 23
- B. CD 11
- C. CD 20
- D. CD 4

19. Mitral arcade anomaly is characterized by

A. Isolated cleft of anterior mitral leaflet.

i

- B. Single papillary muscle.
- C. Absence of chordae tendinae
- D. Failure of excavation of posterior mitral leaflet from left ventricular wall

## 20. WHO recommended solution for ORS - glucose content in mEq

- A. 111
- B. 140
- C. 70
- D. 90

## 21. Disorders with Turner syndrome include

- A. Type I diabetes milletus
- B. Learning abnormalities
- C. Low posterior hairline
- D. Gonadoblastoma

22. Endotracheal tube size for 2.5 kg newborn at 36 weeks of gestation

- A. 2.5
- B. 2.9
- C. 3.5
- D. 4

## 23. Koebner phenomenon occurs in

- A. SLE
- B. Churg-Strauss vasculitis
- C. Juvenile rheumatoid arthritis
- D. Wegener's granulomatosis

24. Percentage of T-cell population among total lymphocytes in an infant

- A. 30%
- B. 50%
- C. · 70%
- D. 80%
- 25. Felty's syndrome include all, except
  - A. Rheumatoid arthritis
  - B. Hepatomegaly
  - C. Splenomegaly
  - D. Neutropenia
- 26. Commonest mechanism of genetic variations in humans is
  - A. Chromosomal translocations
  - B. Chromosomal microdeletions
  - C. Copy number variations
  - D. Single nucleotide polymorphisms
- 27. Delayed detachment of the umbilical cord, leucocytosis and recurrent infections in infancy are characteristic of:
  - A. Hyper IgE syndrome
  - B. Wiskott Aldrich syndrome
  - C. Severe combined immunodeficiency
  - D. Chediak-Higashi syndrome
- 28. Which of the following is true regarding membranoproliferative glomerulonephritis (MPGN)?
  - A. Type II MPGN is mediated by immune complex
  - B. Type II MPGN is associated with partial lipodystrophy
  - C. Dense deposit disease is the most common subtype
  - D. Alternate complement pathway is activated in 50% of type I MPGN
- 29. What is the targeted temperature (in Celsius) for therapeutic hypothermia in neonates?
  - A. 26-28<sup>0</sup>
  - B. 28-30<sup>0</sup>

- C. 30-31<sup>0</sup>
- D. 33-34<sup>0</sup>

30. The calorie content of maintenance intravenous fluids with D5 is

- A. 17 calories/ 100 ml
- B. 27 calories/ 100 ml
- C. 37 calories/ 100 ml
- D. 47 calories/ 100 ml

31. Nipah virus, the RNA virus, responsible for the newly emerging zoonosis in India belong to

- A. Picornaviridae
- B. Paramyxoviridae
- C. Flaviviridae
- D. Togaviridae

32. Which among the following infections have an animal reservoir?

- A. Hepatitis A
- B. Hepatitis C
- C. Hepatitis E
- D. GB Virus C
- 33. Pacemaker of intestines is
  - A. Leydig cells
  - B. Neuroglial cells
  - C. Intersitial cells of Cajal
  - D. Smooth muscle cells in sphincter of Oddi
- 34. Albendazole acts by
  - A. Inhibiting microtubule formation
  - B. Increasing calcium permeability
  - C. Inhibiting Na<sup>+</sup>-K<sup>+</sup> ATPase
  - D. Activating Sodium channel
- 35. What is the probability of a normal sibling of an individual affected by a disease which has autosomal recessive transmission, being a carrier for the same disease?
  - A. 25 %
  - B. 50 %
  - C. 66 %
  - D. 75 %

36. Sickle cell trait is associated with which of the following malignancies in young adults

- A. Papillary thyroid carcinoma
- B. Non-squamous cell carcinoma of lung

- C. Renal medullary carcinoma
- D. Osteosarcoma

37. Transcription factors are

- A. Messenger RNA
- B. Micro-RNA
- C. Transfer RNA
- D. Proteins

38. A girl presented with severe hyperkalemia and peaked T waves on ECG. What is the most rapid way to decrease serum potassium level?

- A. Calcium gluconate IV
- B. Oral resins
- C. Insulin + glucose
- D. Sodium bicarbonate

39. Thrombotic event is seen in all of following, except

- A. PNH
- B. DIC
- C. ITP
- D. Heparin induced thrombocytopenia

40. Generalised painless lymphadenopathy is seen in

- A. Rocky mountain spotted fever
- B. Scrub typhus
- C. Epidemic typhus
- D. Q fever

41. All of the following are associated with high urinary sodium, except

- A. Syndrome of inappropriate antidiuretic hormone secretion
- B. Nephrogenic syndrome of inappropriate antidiuresis
- C. Cerebral salt wasting
- D. Pseudohyponatremia

42. All of the following are causes of metabolic alkalosis with normal blood pressure, except

- A. Gitelman syndrome
- B. Bartter syndrome
- C. Liddle syndrome
- D. Autosomal dominant hypoparathyroidism
- 43. Candida skin test is used for assessment of
  - A. T cell function
  - B. B cell function
  - C. Complement function

- D. Phagocytic function
- 44. Which of the following is predominantly a granulomatous small vessel vasculitis?
  - A. Churg-Strauss syndrome
  - B. Microscopic polyangitis
  - C. Henoch-Schonlein purpura
  - D. Kawasaki disease
- 45. Nephrogenic systemic fibrosis is associated with
  - A. Iodinated contrast.
  - B. Gadolinium based contrasts
  - C. Iridium based contrasts.
  - D. Barium based contrast.
- 46. A 9 yr old girl has difficulty in combing hairs and climbing upstairs since 6 months. She has Gower's sign positive and maculopapular rash over metacarphalangeal joints. What should be the next appropriate investigation to be done?
  - A. ESR
  - B. RA factor
  - C. Creatine kinase
  - D. Electromyography
- 47. 14-yrs old girl on exposure to cold has pallor of extremities followed by pain and cyanosis. In later ages of life, she is prone to develop
  - A. SLE
  - B. Scleroderma
  - C. Rheumatoid arthritis
  - D. Histiocytosis

48. Reduced T2 relaxation time is characteristic feature of

- A. Amyloidosis.
- B. Sarcoidosis.
- C. Cardiac lymphoma.
- D. Iron overload cardiomyopathy

## 49. Least seen in hypothyroidism

- A. Complete heart block
- B. Carotenemia
- C. Pretibial myxedema
- D. Tamponade

## 50. Fabry's disease results from a deficiency of

- A. Alpha-galactosidase A
- B. Beta-galactosidase
- C. Sphingomyelinase
- D. Neuraminidase

- 51. The risk of occurrence of conduction abnormalities due to procedure-related injury is likely to be the least in
  - A. Balloon mitral valvotomy
  - B. Trans-catheter aortic valve implantation
  - C. RF ablation of mid-septal accessory pathway
  - D. Percutaneous alcohol septal ablation

52. How many METs has a patient exercised, if he completed stage 2 of Bruce protocol?

- A. 4.6 METs
- B. 5.4 METs
- C. 6.4 METs
- D. 7.0 METs

53. The following statements regarding Tetrology of Fallot are true, except

- A. Left axis deviation on ECG suggests associated AV canal defect ;
- B. The RVOT gradient is proportional to the severity of the disease'
- C. JVP is usually not elevated in children with TOF
- D. Good surgical outcome is primarily decided by the pulmonary anatomy

54. All of the following are long RP tachycardia, except

- A. Atrial tachycardia
- B. PJRT
- C. AVRT
- D. Atypical AVNRT

55. Which of the following is not a feature of sub-aortic stenosis?

- A. Aortic regurgitation
- B. Ejection click
- C. Left ventricular hypertrophy
- D. Coarctation of aorta as a coexisting defect
- 56. Which of the following is not a common feature of total anomolous pulmonary venous connection?
  - A. Continuous murmur
  - B. Figure of 8 appearance on chest X-ray in infra-cardiac type
  - C. Right axis deviation on ECG
  - D. Similar oxygen saturation in all cardiac chambers
- 57. The lowest systemic oxygen saturation is seen in
  - A. TGA with VSD and PS

- B. Tetralogy of Fallot
- C. Single Ventricle with PAH
- D. TAPVC
- 58. All of the following are true about bidirectional VT, except
  - A. Mutation of calsequestin-2
  - B. Seen with digoxin toxicity
  - C. Beta blockers are ineffective
  - D. Usually presents in childhood
- 59. 'Dip and Plateau' pressure wave form in ventricles is seen in all the following conditions, except
  - A. Restrictive cardiomyopathy
  - B. Right ventricular ischemia
  - C. Congestive cardiac failure
  - D. Acute tricuspid regurgitation
- 60. Upright T wave in lead V1 in a neonate of 7 days of life
  - A. Indicates RV Hypertrophy
  - B. Normal pattern of ECG at that age
  - C. May suggest corrected TGA
  - D. Can occur with left to right shunt lesions
- 61. A 25 year old male presents to OPD with a regular narrow QRS tachycardia at a rate of 180bpm with P waves following each QRS. During carotid sinus massage, tachycardia converts to LBBB morphology at a rate of 165bpm. The most likely diagnosis
  - A. AVNRT with LBBB aberrancy
  - B. Orthodromic AVRT using a left-sided Bypass tract
  - C. Orthodromic AVRT using a right-sided bypass tract
  - D. Ventricular tachycardia with 1:1 VA conduction
- 62. A 15-year old girl presented with recurrent episodes of syncope that are preceded by prodromal symptoms of weakness and nausea. Physical examination, ECG, Holter monitoring and treadmill test were normal. Which is the next appropriate evaluation?
  - A. Electrophysologic study
  - B. Head up tilt test
  - C. Signal-averaged ECG
  - D. Implantable arrhythmia monitor

- 63. The following features are characteristics of ostium primum ASD with left to right shunt more than 2:1, except
  - A. Right axis deviation and right bundle branch block
  - B. Fixed and wide split of S2
  - C. Tricuspid mid-diastolic murmur
  - D. Right ventricular S3
- 64. What is the tricuspid annular plane systolic excursion that correlates with normal right ventricular systolic function?
  - A. >14 mm
  - B. >16 mm
  - C. >18 mm
  - D. >20 mm
- 25. A 20-year old male presented with recurrent episodes of exertional syncope. His baseline ECG was normal. Out of genetic arrhythmia syndromes, the most possible diagnosis in him is
  - A. Catecholaminergic polymorphic VT
  - B. Brugada syndrome
  - C. Long QT syndrome
  - D. Short QT syndrome
- 66. All of the following are examples of admixture physiology, except
  - A. Tricuspid atresia
  - B. Complete atrioventricular septal defect
  - C. Pulmonary atresia with ventricular septal defect
  - D. Hypoplastic left heart syndrome
- 67. Which among the following is not a part of right atrial anatomy?
  - A. Crista supraventricularis
  - B. Eustachian valve
  - C. Torus aorticus
  - D. Tendon of Todaro
- 68. Lack of decline of right atrial waveforms during inspiration during catheterization is least likely to occur in which of the following conditions
  - A. Cardiac tamponade
  - B. Right ventricular endomyocardial fibrosis
  - C. Right ventricular myocardial infarction
  - D. Severe mitral stenosis with severe pulmonary hypertension and tricuspid regurgitation

69. ECG manifestations of Brugada syndrome are provoked with?

- A. Ajmaline
- B. Flecainide
- C. Procainamide
- D. All of the above
- 70. Which among the following findings during exercise stress testing has the least clinical significance?
  - A. Progressive prolongation of QT interval
  - B. Development of broad QRS
  - C. Progressive shortening of PR interval
  - D. Development of T wave alternans
- 71. A 50-year-old male with atypical angina underwent treadmill exercise electrocardiography by Buce Protocol. The test result read "negative for indurule ischemia". What is the minimum heart rate (in beats per minute) this patient should have attained during stress test for satisfying the diagnostic accuracy requirement for the test?
  - A. 136
  - B. 145
  - C. 153
  - D. 170
- 72. Therapy with Phosphodiesterase-5 inhibitors is currently not recommended or could be potentially harmful in all the following conditions, except
  - A. Pulmonary hypertension associated with systemic sclerosis
  - B. Pulmonary hypertension associated with mitral stenosis
  - C. Pulmonary veno-occlusive disease
  - D. Pulmonary hypertension associated with hypertrophic cardiomyopathy
- 73. A 9-month-old asymptomatic, healthy-looking baby presents for cardiac evaluation. Which among the following clinical findings would indicate a small, restrictive ventricular septal defect?
  - A. Soft, early peaking early systolic murmur in the upper left sternal border
  - B. Wide, mobile split second heart sound
  - C. Harsh and loud early systolic murmur in the lower left sternal border, which disappears in second half of systole followed by normally split second heart sound
  - D. Short mid diastolic murmur in mitral area
- 74. A 60-year old male patient is planned for invasive coronary angiography. During the precatheterization evaluation, the doctor verifies the check-list of the patient. Which among

the following items noted in the check-list is not a caution against the procedure, in relation to the use of contrast agents?

- A. History of documented vasovagal response during a previous coronary angiogram performed 3 years ago.
- B. Serum Potassium concentration 2.4 mEq/L
- C. Multi-nodular goiter with Serum TSH < 0.05 mIU/L
- D. e-GFR of 25 mL/minute

75. Complete heart block is common in the following congenital heart diseases, except

- A. Atrioventricular septal defects
- B. Ebstein anomaly
- C. Corrected TGA
- D. 'Swiss-cheese' VSD
- 76. The essential drugs to be prescribed at discharge for a 60-year old male following anterior wall ST elevation myocardial infarction and successful thromobolysis do not include
  - A. Statin

- B. Beta blocker
- C. Short acting nitrate
- D. ACE inhibitor
- 77. Which of the following statements about sarcoid heart disease is not true?
  - A. The most common phenotype is restrictive cardiomyopathy.
  - B. Most patients with cardiac sarcoid have lung involvement also
  - C. Heart block is a common manifestation
  - D. Ventricular arrhythmias is a common manifestation
- 78. The features of cardiac amyloidosis include all, except
  - A. Dilated ventricular chambers
  - B. Atrial septal thickening
  - C. Sub-enedocardial Gadolinium enhancement in MRI
  - D. Right heart failure predominates in clinical symptoms
- 79. Watchman device is used for
  - A. Paravalvar leak closure
  - B. Left atrial appendage closure
  - C. Inter atrial septal aneurysm occlusion
  - D. Closure of Fontan fenestration
- 80. A 48-year-old male, smoker, with history of claudication presents with syncope. Electrocardiogram reveals type I Brugada pattern. His coronary angiogram is normal. On

review of his treatment records, he is on medications for bipolar disorder and peripheral arterial disease. Which among the following medicines which he was taking, do not have a caution against use in patients with Brugada syndrome in relation to arrhythmogenicity?

- A. Lithium
- B. Cilostazol
- C. Oxcarbazepine
- D. Amitriptyline

81. Continuation of eustachian valve of inferior vena cava on medial end of right atrium is

- A. Crista terminalis
- B. Tendon of Todaro
- C. Septal leaflet of tricuspid valve
- D. Atrio-ventricular septum

82. Which among the following is not a beta blocker with vasodilatory property?

- ; A. Bisoprolol
  - B. Bucindolol
  - C. Carvedilol
  - D. Nebivolol

#### 83. Noonan syndrome all true except

- A. Left axis deviation
- B. Lymphedema
- C. Aortic stenosis
- D. Mental retardation
- 84. During invasive radial arterial pressure recording of a patient with heart failure admitted in critical care unit, waveforms displayed a notch in the lower part of ascending limb, the systolic peak was remarkably delayed and the pulse waves displayed low amplitude. In addition, every second beat had smaller amplitude than the preceding one. Which among the following is most likely to be the patient's underlying cardiac condition?
  - A. Acute severe aortic regurgitation
  - B. Aortic stenosis
  - C. Acute severe mitral regurgitation
  - D. Acute myocardial infarction, cardiogenic shock with implantation of intra-aortic balloon pump counterpulsation with augmentation of every alternate cycle
- 85. Inotrope of choice in cardiogenic shock with tachyarrhythmia
  - A. Dopamine
  - B. Dobutamine
  - C. Norepinephrine

### D. Milrinone

- 86. The vein that is expected to give the best results on implantation of left ventricular lead in CRT is
  - A. Anterior interventricular vein
  - B. Middle cardiac vein
  - C. Posterolateral vein
  - D. Small cardiac veins

87. which drugs has significant interaction and drug toxicity

- A. Simvastatin and erythromycin
- B. Sildenafil and nitroglycerin
- C. Cyclosporine and St. John's wort
- D. Digoxin and verapamil

88. Which of the following about idiopathic outflow tract ventricular tachycardia is false?

- A. ~80% of outflow tract VTs originate in LV
- B. Not associated with SCD
- C. Vagal maneuvers terminate them
- D. Adenosine and beta blockers terminate them

89. Normal aortic valve area is

- A. 1-2 cm<sup>2</sup>
- B. 2-3 cm<sup>2</sup>
- C. 3-4 cm<sup>2</sup>
- D. 4-5 cm<sup>2</sup>

90. LV dyssynchrony is considered to be present when septal to posterior wall delay exceeds

- A. 100 ms
- B. 130 ms
- C. 150 ms
- D. 65 ms

91. The following drug is contra indicated during PCI in a patient with history of CVA

- A. Prasugrel
- B. Ticagrelor
- C. Clopidogrel
- D. Cangrelor
- 92. All of the following are features of hyperaldosteronism, except
  - A. Reduced Na absorption

- B. Increased K excretion
- C. Increased plasma volume
- D. Reduced renin angiotensin levels

93. All of the following drugs are used in the management of AVNRT, except

- A. Adenosine
- B. Verapamil
- C. Diltiazem
- D. Amiodarone
- 94. "Cannon" "A" waves may occur regularly in which of the following conditions?
  - A. During junctional rhythm
  - B. AV dissociation with VT
  - C. Complete heart block
  - D. All of the above

95. The normal A2-OS interval is?

- A. 0.04 to 0.06 seconds
- B. 0.04 to 0.08 seconds
- C. 0.04 to 0.10 seconds
- D. 0.04 to 0.12 seconds

#### 96. Murmur of HOCM becomes louder with?

- A. Standing
- **B.** Squatting
- C. Passive leg raising
- D. All of the above
- 97. In mitral stenosis, which of the following is more reliable as an index of severity of valve obstruction?
  - A. Loudness of S1
  - B. Character of murmur
  - C. Duration of murmur
  - D. Intensity of murmur

#### 98. Normal HV interval in the His bundle recording is?

- A. 10 to 20 ms
- B. 15 to 35 ms
- C. 35 to 55 ms
- D. 60 to 75 ms

99. Torsades de pointes is unusual with

- A. Sotalol
- B. Amiodarone
- C. Ibutilide
- D. Dofetilide

100. All the following are true regarding fractional flow reserve (FFR), except

i

- A. Cut off of 0.80 determines physiological significance
- B. Used in culprit vessels in ACS
- C. Used in non-culprit vessels in ACS

D. Regadenosan can be used in calculation of FFR

# DM Cardiology June 2018 – Answer key (Medicine)

1	D	21	C	41		<u> </u>	<b>D</b>	01	T	
2	B.	21	A		D	61	B	81	В	
3				42	С	62	В	82	Α	
	A	23	D	43	A	63	Α	83	C	
4 r	D	24	C	44	A	64	В	84	В	
5	B	25	B	45	B	65 ·	D	85 ·	С	
6	B	26	В	46	С	66	В	86	C	
7	B	27	B,	47	В	67	<b>A</b>	87	D	
8	D	28	Б	48	D	68	A	88	Α	
9	D	29	A	49	С	69	D	89	C	
10	В	30	С	50	A	70	С	90	В	
11	Α	31	В	51	Α	71	В	91	Α	
12	D	32	С	52	<b>D</b> .	72	Α	92	Α	
13	D	33	С	53	В	73	С	93	D	
14	С	34	A	54	С	74	Α	94	Α	
15	С	35	C	55	В	75	D	95	D	
16	В	36	С	56	В	76	С	96	A	
17	D	37	D	57	Α	77	Α	.97	C	
18	В	38	С	58	С	78	Α	98	С	
19	В	39	С	59	С	79	В	99	В	
20	D	40	В	60	Α	80	B	100	В	
DM Cardiology (Pediatrics)										
1	С	21	A	41	D	61	В	81	В	
2	Α	22	С	42	С	62	В	82	A	
3	D	23	С	43	Α	63	A	83	С	
4	D	24	С	44	Α	64	В	84	В	
5	D	25	В	45	В	65	D	85	C	
6	Α	26	D	46	С	66	В	86	c	
7	D	27	D .	47	В	67	A	87	D	
8	Α	28	В	48	D	68	A	88	A	
9	A	29	D	49	C	69	D	89	c	
10	B	30	Α	50	A	70	C	90	B	
11	В	31	В	51	A	71	B .	91	A	
12	A	32	С	52	D	72	A	92	A	
13	С	33	С	53	B	73	C	93	D	
14	С	34	A	54	C	74	A	93		
15	C	35	C	55	В	75	D	94 95	A D	
16	B	36	C	56	B	76	C	95	A	
17	A	37	D	57	A	77	A	90 97	C	
18	C	38	C	58	·C	78	A	98	<u> </u>	
19	C	39	C	59	C	79	B	99	B	
20 /	A	40	B	60	A	80	B	100	B	
<u>///</u>										

Dr. Ajitkumar VK

Head, Dept. of Cardiology

Erofeliser Conde & HOD Department of Care / SCTIMST, Trivandrum - 11 Dr. Narayanan Namboodiri Dr. NARAYANAN AMBOODIRI .K.K Professof, consultant –in-charge Department of Cardiology S.C.T.I.M.S.T Thiruvananthapuram