

MCQS^{Q&As}

Multiple-choice questions for general practitioner (GP) Doctor

Pass Test Prep MCQS Exam with 100% Guarantee

Free Download Real Questions & Answers **PDF** and **VCE** file from:

https://www.pass2lead.com/mcqs.html

100% Passing Guarantee 100% Money Back Assurance

Following Questions and Answers are all new published by Test Prep Official Exam Center

Instant Download After Purchase

100% Money Back Guarantee

- 😳 365 Days Free Update
- 800,000+ Satisfied Customers





QUESTION 1

A 55 year/\'s man who is hypertensive suddenly lost his vision. The retina is pale and fovea appears as a spot.

What is the single most appropriate treatment?

- A. Corticosteroids
- B. Pan retinal photocoagulation
- C. Press over eyeball
- D. Scleral buckling

Correct Answer: C

In central retinal artery occlusion (CRAO) retina becomes pale and fovea. Hypertension is a major cause of CRAO. Apply direct pressure for 5-15 seconds, then release. Repeat several massage can dislodge the embolus to a point further down the arterial circulation and improve retinal perfusion.

QUESTION 2

A 55-year-old man has epigastric discomfort. He is seropositive for Helicobacter pylori. Upper endoscopy reveals no gastritis and no ulcer disease. Biopsy of the stomach shows Helicobacter.

What should you do?

- A. Breath testing
- B. PPI alone as symptomatic therapy
- C. Repeat endoscopy after 6 weeks of PPIs D-PPI, amoxocillin, and clarithromycin

Correct Answer: B

You do not need to treat Helicobacter pylori unless there is gastritis or ulcer disease. This patient has epigastric pain and Helicobacter but no ulcer or gastritis. This is non-ulcer dyspepsia. Treat it symptomatically with a PPI. Enormous numbers of people are colonized with H. pylori; you do not need to eradicate it from the world without evidence of disease. H. pylori is not the cause of non-ulcer dyspepsia.

QUESTION 3

Which vitamin has a protective effect against colon cancer?

A. Vitamin C

- B. Vitamin D
- C. Folic acid
- D. Vitamin K



Correct Answer: B

Calcium and vitamin D Calcium may protect against bowel cancer, according to the World Cancer Research Fund. A 2004meta analysis showed that people with the highest levels of calcium intake (from food and supplements) reduced their risk of bowel cancer by 22% compared to people with the lowest calcium intake. However, 2 meta analyses in 2010 found that calcium supplements had no effect on bowel cancer risk in the general population. But they did find a link between calcium intake and a reduced risk of polyps coming back in the bowel after previous treatment. Polyps are growths in the bowel that may develop into cancer over a long period of time, if left untreated. To reduce bowel cancer risk, it may be better to take vitamin D and calcium together. We need vitamin D to be able to absorb calcium. A large randomized controlled trial in 2006 showed that only the people with high intakes of both calcium and vitamin D had a reduced risk of bowel cancer. Other studies have shown that people with the highest intakes of vitamin D have a lower risk of bowel cancer and bowel polyps. Dairy There is some evidence that drinking milk reduces the risk of bowel cancer. A review in 2011 showed that the benefit of dairy in reducing bowel cancer risk was only seen at levels over 100 grams (g) a day. Having 500 to 800g milk a day reduced bowel cancer risk by 20 to 30%. One pint, or 0.5 liters, of semi skimmed milk weighs about 550g. The effect of milk on lowering bowel cancer risk may be partly due to the calcium. But milk contains many other substances which may also play a role. There is limited evidence that eating cheese may increase the risk of bowel cancer. It is not clear how cheese may increase the risk, but it may have something to do with the saturated fatty acids.

QUESTION 4

After starting Antidepressant drug, if patient is not improving then when you decide to stop drugs?

A. 3-4 weeks

B. 1 day

C. 1 week

D. 2 weeks

Correct Answer: A

Some people notice an improvement within a few days of starting treatment. However, an antidepressant often takes 2-4 weeks to build up its effect and work fully. Some people stop treatment after a week or so thinking it is not helping. It is best to wait for 3-4 weeks before deciding if an antidepressant is helping or not. If poor sleep is a symptom of the depression, it is often helped first, within a week or so. With some types of tricyclic antidepressant, the initial dose that is started is often small and is increased gradually to a full dose. (One problem that sometimes occurs is that some people remain on the initial dose which is often too low to work fully.) If you find that the treatment is helpful after 3-4 weeks, it is usual to continue. A normal course of antidepressants lasts at least six months after symptoms have eased. If you stop the medicine too soon, your symptoms may rapidly return. Some people with recurrent depression are advised to take longer courses of treatment (up to 2 years or longer)

QUESTION 5

The child bought by a mother having bouts of severe abdominal pain that cause child to bring his legs to fold to abdomen, settles after sometime, now again he had this attack with vomiting. On examination child is distressed with pain and there is a mass in epigastrium.

What Investigation you will do?

A. Ultrasound



- B. Chest x-ray
- C. Ct abdomen
- D. Air enema
- Correct Answer: D

This investigation is both diagnostic and therapeutic and is the initial investigation of choice if strong clinical suspicion of intussusception (e.g. palpable mass and bowel obstruction) There is a small risk of bowel perforation and bacteremia during the gas enema (the surgical registrar as well as a suitably trained nurse should attend with appropriate resuscitation equipment) Ultrasound scan Diagnostic investigation of choice (unnecessary if high level of suspicion) Useful if there is a suggestive history but no mass palpable or signs on plain AXR and may identify other pathology.

MCQS VCE Dumps

MCQS Practice Test

MCQS Exam Questions