MCC-005

# POST GRADUATE DIPLOMA IN CLINICAL CARDIOLOGY (PGDCC) 01333

## **Term-End Examination**

### June, 2014

# MCC-005: COMMON CARDIOVASCULAR DISEASES-III

Time : 2 hours

Maximum Marks : 60

Note :

- (i) There will be multiple choice type of questions in this examination which are to be answered in <u>OMR Answer Sheets</u>.
- (ii) All questions are compulsory.
- (iii) Each question will have four options and only one of them is correct. Answers have to be marked in figures in the appropriate rectangular boxes corresponding to what is the correct answer and then blacken the circle for the same number in that column by using HB or lead pencil and not by ball pen <u>in OMR Answer Sheets</u>.
- (iv) If any candidate marks more than one option it will be taken as the wrong answer and no marks will be awarded for this.
- (v) Erase completely any error or unintended marks.
- (vi) There will be 90 questions in this paper and each question carries equal marks.
- (vii) There will be no negative marking for wrong answers.
- (viii) No candidate shall leave the examination hall at least for one hour after the commencement of the examination.

MCC-005

P.T.O.

- 1. Which of the following is not an obstructive Acyanotic Congenital Heart Disease ?
  - (1) Coarctation of Aorta (2) Aortopulmonary Window
  - (3) Supramitral Membrane (4) Discrete Subaortic Stenosis

2. The heart murmur in Atrial Septal Defect arises at the level of \_\_\_\_\_\_.

- (1) Atrial Septum (2) Tricuspid Valve
- (3) Pulmonary Valve (4) Mitral Valve

**3.** Which of the following conditions tends to abolish respiratory variations in systemic venous return ?

- (1) Aortopulmonary Window (2) Patent Ductus Arteriousus
- (3) Ventricular Septal Defect (4) Atrial Septal Defect
- 4. Which of the following is associated with late onset congestive heart failure ?
  - (1) Ventricular Septal Defect (2) Patent Ductus Arteriousus
  - (3) Atrial Septal Defect (4) Aortopulmonay Window

5. Which of the following is **not** a type of ventricular septal defect ?

- (1) Perimembranous (2) Marginal Muscular
- (3) Unroofed Coronary Sinus (4) Outlet
- 6. Paradoxical Splitting of second heart sound is noted with which of the following conditions ?
  - (1) Large Patent Ductus Arteriousus
  - (2) Small Patent Ductus Arteriousus
  - (3) Patent Ductus Arteriousus with Reversal of Shunt
  - (4) Restrictive Ventricular Septal Defect
- 7. Volume overload of left heart is **not** noted with which of the following conditions ?
  - (1) Large Ventricular Septal Defect (2) Large Patent Ductus Arteriousus
  - (3) Large Atrial Septal Defect (4) Large Aorto Pulmonary Window

- 8. Supravalvar Pulmonary Stenosis is associated with which of the following syndromes ?
  - (1) Kartagener Syndrome (2) William Syndrome
  - (3) Patau Syndrome (4) Cri Du Chat Syndrome
- 9. Which of the following conditions would most likely present with a murmur at birth?
  - (1) Congenital Severe Aortic Stenosis (2) Ventricular Septal Defect
  - (3) Patent Ductus Arteriousus (4) Atrial Septal Defect
- 10. A child presents with left ventricular failure in infancy. The most likely diagnosis is :
  - (1) Large Atrial Septal Defect (2) Coarctation of Aorta
  - (3) Congenital Mitral Stenosis (4) Tetralogy of Fallot
- **11.** A child presenting with deep cyanosis in a case of Tetralogy of Fallot, is least likely to have which of the following ?
  - (1) Mild Pulmonary Stenosis (2) Silent Large Ventricular Septal Defect
  - (3) No Thrill of Pulmonary Stenosis (4) Worsening of Cyanosis in Knee Chest Position

12. Which of the following would not be a differential diagnosis for cyanotic congenital heart disease with reduced pulmonary blood flow ?

- (1) Transposition of Great Arteries with VSD with PS
- (2) Single Ventricle
- (3) Double Outlet Right Ventricle with PS
- (4) Fallot's Tetralogy

13. Cyanotic Spells are common in the following age group :

- (1) 2 months to 2 years (2) 2 years to 4 years
- (3) 4 6 years (4) 6 8 years
- 14. Double Discordance is associated with which of the following conditions ?
  - (1) Transposition of Great Arteries (2) Single Ventricle
  - (3) Double Outlet Right Ventricle (4) Corrected Transposition of Great Arteries

- 15. Which of the following does not have a continuous murmur?
  - (1) Ruptured Sinus of Valsalva to Right Atrium
  - (2) Ruptured Sinus of Valsalva to Left Atrium
  - (3) Ruptured Sinus of Valsalva to Right Ventricle
  - (4) Ruptured Sinus of Valsalva to Left Ventricle

**16.** Symptoms of slow feeding with frequent crying, such-rest-suck cycles, increased crying after passing stool in an infant are mostly suggestive of :

- (1) Congestive Heart Failure (2) Hypoxia
- (3) Cyanosis (4) Respiratory Tract Infection

17. All of the following are Left to Right shunts expect :

- (1) ASD (2) VSD
- (3) Eisenmenger's syndrome (4) PDA
- 18. Which of the following anti-arrhythmics cause shortening of action potential duration ?
  - (1) Sotalol (2) Quinidine (3) Lidocaine (4) Flecainide

**19.** The 4<sup>th</sup> position in the naspe/bpeg generic code for pacemaker nomenclature is used to designate :

- (1) Chamber Paced (2) Chamber Sensed
- (3) Response to sensing (4) Rate Response

20. Anti-Arrhythmic Drug which predominantly blocks potassium channels is :

- (1) Amiodarone (2) Disopyramide
- (3) Mexiletine (4) Procainamide
- 21. 10 Year patency rates for LIMA graft to LAD are :
  - $(1) \quad 30\% \qquad (2) \quad 60\% \qquad (3) \quad 90\% \qquad (4) \quad 99\%$

- 22. Patients with Triple Vessel Disease with mild symptoms have to be operated for CABG despite mild symptoms except in following conditions :
  - (1) There is Left Main Equivalent Disease
  - (2) There is Significant Left Ventricular Dysfunction
  - (3) Syncope
  - (4) Left Main Stenosis
- 23. Urgent Revascularization is required in a patient presenting with angina if there is :
  - (1) Significant LV Dysfunction
  - (2) Severe Triple Vessel Disease
  - (3) Left Main Coronary Artery Disease
  - (4) All of the above
- 24. Which of the following is not a good indicator of myocardial viability?
  - (1) Dobutamine Stress Echocardiography
  - (2) Thallium Scintigraphy
  - (3) Positron Emission Tomography
  - (4) Exercise Tolerance Test
- 25. Peri-operative MI rates after CABG surgery, as per CASS report is :
  - (1) 5% (2) 10% (3) 2.5% (4) 1%

26. Which of the following valves need the maximum anticoagulation ?

- (1) Bileaflet Mechanical Valves (2) Tilting Disc Mechanical Valves
- (3) Tissue Valves (4) Ball Valves
- 27. Which one of the following is **not** an obstructive lesion ?
  - (1) Aortic Stenosis (2) Mitral Regurgitation
  - (3) Pulm. Stenosis (4) Coarctation of Aorta
- **MCC-005**

28	. Mi is r	Mitral Stenosis would be considered to be severe if the mean trans-valvular pressure gradient is more than :						
	(1)	5 mm Hg	(2)	10 mm Hg	(3)	15 mm Hg	(4)	20 mm Hg
29.	The	e Ross Procedure i	nvolve	es replacement of	f aortic	valve with :		
	(1)	Homograft	(2)	Autograft	(3)	Xenograft	(4)	Allograft
30.	Pos	t MI Ventricular S	eptal ]	Rupture is mostly	y note	d at the :		
	(1)	Inferior Wall		(2)		erior Wall		
	(3)	Lateral Wall		(4)	Inter	ior Lateral Wall		
31.	Whi	ich of the followir	ng is n	ot an indication :	for Ca	rdiac Transplan	tation ?	2
	(1)	Heart Failure						
	(2)	Cardiomyopath	у					
	(3)	Congenital Hear	rt Dise	ase				
	(4)	Acute Myocardi	al Infa	rction with Carc	liogen	ic Shock		
32.	Whi	ch of the followin	g cond	litions would req	uire P	ulmonary Band	ing Pro	cedure ?
	(1)	Single Ventricle						
	(2)	Tetralogy of Fall	ot					
	(3)	Double Outlet R	ight V	entricle with VSI	) with	PS		
	(4)	Tricuspid Atresia	a with	VSD with PS				
33.	Senn	ing Operation is i	ndicat	ed for which con	dition	?		
	(1)	Tetralogy of Fallo	ot					
	(2)	Double Outlet Ri	ght Ve	entricle				
	(3)	Single Ventricle						
	(4)	Transposition of	Great	Arteries				

MCC-005

6

- **34.** Anastomosis between Left Subclavian Artery and Left Pulmonary Artery using PTFE Graft is known as :
  - (1) Classic Blalock-Taussig Shunt
  - (2) Modified Blalock-Taussig Shunt
  - (3) Pott's Shunt
  - (4) Waterston Shunt

35. Which of the following is not a common cause for Mitral Regurgitation ?

- (1) Marfan Syndrome (2) Carcinoid Syndrome
- (3) Cardiomyopathy (4) Infective Endocarditis

**36.** Elderly patients above 65 years of age should exercise with an intensity to achieve \_\_\_\_\_\_ of target heart rate.

- (1) 75-85% (2) 65-75% (3) 50-75% (4) >85\%
- 37. Which of the following is **not** the indication for surgery in case of Infective Endocarditis ?
  - (1) Refractory Heart Failure
  - (2) Aortic Root Abscess
  - (3) Large Vegetation
  - (4) Valve Dysfunction with Persistent Infection
- 38. All of the following are acyanotic congnital heart diseases except ?
  - (1) Actual Septal Defect (2) Ventricular Septal Defect
  - (3) PDA (4) Tetralogy of Fallot
- 39. Fontan Operation is indicated in all of the following except :
  - (1) When biventricular correction is not feasible
  - (2) Single Ventricle Physiology
  - (3) One of the ventricles is dysplastic
  - (4) Pulmonary Vascular Resistance is high

- 40. Total Intra-Cardiac Repair of Fallot's Tetralogy cannot be done if there is :
  - (1) Severe Infundibular Stenosis
  - (2) Absent Pulmonary Valve
  - (3) Hypoplastic Pulmonary Arteries
  - (4) Complete Heart Block
- 41. Which of the following would be suitable conditions for a bioprosthetic valve ?
  - (1) Elderly Patient with Atrial Fibrillation
  - (2) Early Degeneration of Metallic Valve
  - (3) Young Female Desiring for Pregnancy
  - (4) Tricuspid Valve Replacement
- **42.** Incidence of which complication is significantly higher with CABG surgery in comparison to coronary angioplasty ?
  - (1) Stroke
  - (2) Arrhythmias
  - (3) Need for Repeat Revascularization
  - (4) Left Ventricular Dysfunction
- 43. Which artery is not used for CABG surgery as a conduit ?
  - (1) Right Internal Mammary (2) Gastro-Epiploic
  - (3) Superior Mesenteric (4) Inferior Epigastric

44. Cardioplegia solution does not contain which of the following constituents ?

- (1) Aspartate (2) Adenosine
- (3) Adrenaline (4) Dimethyl Sulphoxide
- 45. Differential Cyanosis is present in which of the following conditions ?
  - (1) TGA with PDA with Reversal of Shunt
  - (2) PDA with Reversal of Shunt
  - (3) VSD with Reversal of Shunt
  - (4) Single Ventricle

46.	Acute toxicity due to amiodarone is seen on :										
	(1)	Lungs	(2)	GIT		(3)	Skin		(4)	Brair	ı
47.		life of amiodaro					<b>0</b> 0		(4)	<b>~</b> ~	
	(1)	9 - 10 hrs	(2)	9 - 10 days		(3)	30	106 days	(4)	2-3	weeks
48.	Dru	g used for acute	termir	nation of Atria	al Fil	orillat	ion ?				
	(1)	Ibutitide	(2)	Bletytium		(3)		odarone	(4)	None	e
	( )		. ,								
49.	Clas	s - IV drugs are :									
	(1)	Beta Blockers		I	(2)	Na (	Chann	el Blockers			
	(3)	Ca Channel Blo	ockers		(4)	Non	e				
50.	Vera	apamil Supresses	electr								
	(1)	Sinus Node	(2)	AV Node		(3)	Both	(1) and (2)	) (4)	Non	e
	<b>* *</b> 1/										
51.		f life of digoxin :	(2)	) denne		(2)	) hr	_	(4)	Non	0
	(1)	2 weeks	(2)	2 days		(3)	2 hrs	>	(4)	INUIT	c
52.	Sym	ptoms of digitox	icity a	re :							
	(1)	Nausea, Vomit	-		rial Fibri (3 (2) N (4) N in the : (4) (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	(2)	Visu	al Disturba	ance		
	(3)	Significant Arr	hythn	nic		(4)	All				
53.	Whi	ch of the followi	ng dri	igs has negati	ive i	sotrop	oic effe	ect:			
	(1)	Verapamil	(2)	Beta Blocke	ers		(3)	Diltiazem	L	(4)	All
54.	Ade	nosine has a half	life o	f :							
	(1)	1 hr - 6 hrs	(2)	1 day - 6 d	lays		(3)	1 min - 6	min	(4)	1 sec - 6 sec
мс	C-005				9						<b>P.T.O</b> .
141	2-000	•			-						

- 55. Which is true regarding defibrillation ?
  - (1) Solid gel electrodes (adhesive) can cause high risk of burns
  - (2) Wet gel electrode can cause high risk of burns
  - (3) (1) and (2)
  - (4) Solid gel electrodes conduct electricity more even than wet gel electrodes

56. Which of the following is not a duct dependent Pulm. Blood. Flow ?

- (1) Critical Aortic Stenosis (2) Pulm Atresia
- (3) Ebstein's Anomaly (4) Critical Pulm. Stenosis

57. Prolonged prostaglandism infusion causes all of the following side effects except :

- (1) Apnoea (2) Hypertension (3) Hypotension (4) Fever
- 58. Cyanotic Spells are caused by all except :
  - (1) Decreased pulm. blood flow (2) Increased right to left shunt
  - (3) Decreased right to left shunt (4) Fall in SVR
- 59. ASD is of \_\_\_\_\_\_ types.

   (1) 1
   (2) 2
   (3) 3
   (4) 4

60. Devices that can interfere with pacemakers are :

- MRI
   (2) Radiation therapy
   (3) Arc welding
   (4) All the above
- 61. Which of the following statement is correct ?
  - (1) Superior Vena-cava has a Valve
  - (2) Inferior Vena-cava has a Valve
  - (3) Coronary Sinus has a Valve
  - (4) Smooth part of the Right Atrium is derived from Sinus Venosus

- 62. Which of the following statement is incorrect ?
  - (1) Great Cardiac Vein drains in RA
  - (2) Small Cardiac Vein drains in RA
  - (3) Anterior Cardiac Vein drains in RV
  - (4) Thobesian Vein drains in RV
- **63.** Which of the following statement is **incorrect** ?
  - (1) SA node is located at junction of SVC and RA
  - (2) AV node is located at the angle of kochs
  - (3) SA node is supplied by LAD
  - (4) RBB is supplied by LAD
- 64. In the radiological examination of the heart :
  - (1) LV enlargement on PA view Shows shift of long axis downwards and outwards
  - (2) RV enlargement on PA view Shows shift of long axis downwards and outwards
  - (3) RA enlargement causes straightening of left heart border
  - (4) Right Pulm. artery runs horizontally to the right within mediastinum and is not seen on the frontal view
- **65.** Which is false regarding sotalol?
  - (1) Used in VT (2) Used in atrial arrhythmias
  - (3) Arrhythmogenic RV (4) Complete heart block
- 66. All of the following are digoxin properties except :
  - (1) Excreted by kidney (2) Increase para sympathetic tone
  - (3) Decrease para sympathetic tone (4) Increase intra cellular calcium
- 67. KERLEY B LINES :
  - (1) Seen in Pulm. Oedema
  - (2) Identified in upper positions of lungs
  - (3) Short Transverse Lines
  - (4) Thickened Interlobular Septa

- **68**. Amiodarone causes all except :
  - (1)Pulm. Toxicity (2)Photo Sensitivity
  - (3)Tachycardia (4)Hyperthyroidism
- 69. Development of Heart :
  - SVC from light common cardinal vein (1)
  - SVC is from left common cardinal vein (2)
  - (3) IVC is from right viteline vein
  - Coronary sinus is from left horn of sinus venosus (4)
- Atrial Systole : 70.

•

- (1)Begins with P wave of the ECG
- (2)Coincides with QRS
- (3) The atrio-ventricular valves are closed
- (4)The semi lunar valves are opened

#### 71. Indication for ICD is :

- (1)VF/VT (2)SVT
- (3) Atrial Fibrillation (4)All of the above

In permanent pacemaker implantation, lead is placed in : 72.

- (1)**Right Atrium** (2)**Right Ventricle**
- (3)Both of the above (4) None
- 73. Magnesium is contraindicated in patients with :
  - (1)Magnesium levels > 5(2)Renal failure (3)
    - Bradycardia All of the above (4)
- **MCC-005**

74.	Ade	enosine is used in patients with :		
	(1)	SVT	(2)	VT
	(3)	Complete Heart Block	(4)	All
75.	Trep	oopnea means :		
	(1)	Dyspnoea in up right position	(2)	Dyspnoea in supine position
	(3)	Dyspnoea in lateral position	(4)	Dyspnoea during sleep
76.	Moc	leration bend is present in :		
	(1)	Right Atrium	(2)	Left Atrium
	(3)	Right Ventricle	(4)	Left Ventricle
77.		row Pulse pressure is seen in all co	onditi	ons <b>except</b> :
	(1)	Heart Failure	(2)	Complete Heart Block
	(3)	Serve Aortic Stenosis	(4)	DKA
78.	RV /	cavity obstruction by an abnormal	<b>m</b> 1166	la hundla is called as t
70.	(1)	Valvular PS	(2)	Supravalvular PS
	(3)	Double chambered RV	(2)	Sub valvular PS
	(0)		(+)	
79.	Abse	ent "a" waves of JVP seen in :		
	(1)	CHB (2) AF		(3) VT (4) Acute PE
	~ /	ζ,		
80.	Shap	e of the Left Ventricle :		
	(1)	Triangular	(2)	Qudrangular
	(3)	Crescent shape	(4)	Bullet shape

-

MCC-005

.

13

P.T.O.

81.	Class	Class - I drugs in Vaghan William classification block :					
	(1)	Fast Na channel	(2)	Slow Na channel			
	(3)	Fast K+ channel	(4)	Slow K+ channel			
82.	Drug	gs that reduce Vmax a	nd prolong actior	n potential duration ar	e all <b>except</b> :		
	(1)	Quinidine (2)	Procainamide	(3) Disopyramide	(4) Moracizine		
83.	Arry	thmias occur due to th	he following mech				
	(1)	Re entry	(2)	Automaticity			
	(3)	Tiggered activity	(4)	All of the above			
84.	Adv	erse effects of quinidir	ne include all <b>exce</b>				
	(1)	Diarhoea	(2)	Cinchorism			
	(3)	Thrombocytopenia	(4)	Lupus			
			1 (( )	<i>c</i>			
85.		tia and Nystagmus are			(4) Digoxin		
	(1)	Lidocaine (2)	Mexiletine	(3) Phenytoin	(+) Digoxiii		
86.	Dru	gs that cause QT prolo	ongation are :				
00.	(1)	Cisapcide	(2)	Erythromycin			
	(3)	Both of the above	(4)	None of the above			
	. ,						
87.	NA	PA is a metabolite of :					
				Quiniding			
	(1)	Procainamide	(2)	Quinidine			
	(1) (3)	Procainamide Mexiletine	(2) (4)	Propronolol			
	(3)	Mexiletine	(4)	Propronolol			
88.	(3)		(4)	Propronolol			
88.	(3)	Mexiletine	(4)	Propronolol	drugs		
88.	(3) Tors	Mexiletine sades de pointes occur	(4) rs in patients with (2)	Propronolol	drugs		

-

MCC-005

.

14

89. Beta Blocker with Vasodilator action :

:

•

- (1) Atenolol (2) Carvedilol
- (3) Metaprolol (4) Propronolol

90. Beta Blockers are contraindicated in patients with all except :

- (1) PR interval > 0.24 (2) Severe Bronchospasm
- (3) Peinz metal angina (4) Supra Ventricular Tachycardia

- 0 0 0 -