Online Examinations (Odd Sem/Part-I/Part-II Examinations 2021 - 2022)

Course Name - Basic Anesthesia Course Code - BPA303

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11.	2. Drug resistance transmitting factor present in bacteria is:
	Mark only one oval.
	Plasmid Chromosome
	Introns
	Centromere
12.	3. General anaesthesia includes-
	Mark only one oval.
	Analgesia
	Amnesia
	Temporary loss of consciousness
	All of these
13.	4. A middle aged man with chronic renal failure is diagnosed to have sputum-positive pulmonary tuberculosis. His creatinine clearance is 25 ml/min. All of the following drugs need modification in doses EXCEPT:
	Mark only one oval.
	Isoniazid
	Streptomycin
	Rifampicin
	Ethambutol

14.	5. Slow acetylators of isoniazid are more prone to develop:
	Mark only one oval.
	Failure of therapy
	Peripheral neuropathy
	Hepatotoxicity
	Allergic reactionsl
15.	6. Prolonged treatment with INH leads to deficiency of?
	Mark only one oval.
	Pyridoxine
	Thiamine
	Pantothenic acid
	Niacin
1.0	7 Discontation and address to account the
16.	7. Dissociative anaesthesia is caused by-
	Mark only one oval.
	Propofol
	Etomidate
	Ketamine
	None of these
17.	8. Side effects of halothane are-
	Mark only one oval.
	Hepatitis
	Malignant hyperthermia
	Both
	None

18.	9. Most of the general anaesthetic agent causes-
	Mark only one oval.
	Hyperpolarisation
	Hypopolarisation
	Lowers peak of action potential
	Both Hyperpolarisation and Lowers peak of action potential
19.	10. MAC refers to –
	Mark only one oval.
	Maximum alveolar concentration
	Minimum alveolar concentration
	Modulatory alveolar concentration
	None of these
20.	11. Outpatient surgery can be done with which of the following agents? Mark only one oval.
	Sevoflurane
	Desflurane
	Both Sevoflurane and Desflurane
	None of these
21.	12. Second gas phenomenon is exhibited by
	Mark only one oval.
	Nitrous oxide
	Ether
	Carbon dioxide
	Oxygen

22.	13. Which of the following are inducing agents?
	Mark only one oval.
	Thiopentone
	Methohexitone
	Ketamine
	All of these
23.	14. PRIS is caused by:
	Mark only one oval.
	Pentoxifylline
	Procaine
	Propofol
	Prilocaine
24.	15. Thiazide diuretics can be used for the treatment of all of these conditions EXCEPT:
	Mark only one oval.
	Idiopathic hypercalciurea with nephrocalcinosis
	Hyperlipidemia
	Congestive Heart Failure
	Hypertension

25.	16. High ceiling diuretics are useful in the treatment of all of the following conditions except:
	Mark only one oval.
	Generalized edema
	Cerebral edema
	Acute pulmonary edema
	Pulmonary hypertension
26.	17. Which one of the following is not a clinical use of spironolactone?
	Mark only one oval.
	Pulmonary edema
	Hypertension
	Congestive heart failure
	To counteract hypokalemia due to thiazide diuretics
27.	18. K+ sparing diuretic is:
	Mark only one oval.
	Furosemide
	Spironolactone
	Thiazide
	None of these
28.	19. Furosemide acts at:
	Mark only one oval.
	Ascending limb of loop of Henle
	DCT
	PCT
	Collecting tubule

29.	20. Diuretics that can be used in renal failure is:
	Mark only one oval.
	Furosemide
	Chlorthiazide
	Mannitol
	None of these
30.	21. Thiazides act on
	Mark only one oval.
	PCT
	DCT
	Collecting tubule
	Loop of Henle
31.	
•	22. Which of the following skeletal muscles is relaxed first by tubocurarine?
	Mark only one oval.
	Mark only one oval.
	Mark only one oval. Respiratory
	Mark only one oval. Respiratory Fingers
	Mark only one oval. Respiratory Fingers Limbs
	Mark only one oval. Respiratory Fingers Limbs Head and neck
32.	Mark only one oval. Respiratory Fingers Limbs Head and neck 23. The Muscle relaxant of choice in liver disease is
	Mark only one oval. Respiratory Fingers Limbs Head and neck
	Mark only one oval. Respiratory Fingers Limbs Head and neck 23. The Muscle relaxant of choice in liver disease is
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	Mark only one oval. Respiratory Fingers Limbs Head and neck 23. The Muscle relaxant of choice in liver disease is Mark only one oval. Atracurium

33.	24. Laudanosine is a metabolite of
	Mark only one oval.
	Atracurium
	Rocuronium
	Pipecuronium
	Vecuronium
34.	25. The neuromuscular blocker that does not need a reversal of action by neostigmine at the end of the operation is:
	Mark only one oval.
	d-Tubocurarine
	Doxacurium
	Pipecuronium
	Mivacurium
35.	26. 'Second gas effect' is exerted by which of the following gas when coadministered with halothane:
	Mark only one oval.
	Cyclopropane
	Nitrogen
	Nitrous oxide
	Helium

36.	27. Which general anaesthetic selectively inhibits excitatory NMDA receptors:
	Mark only one oval.
	Thiopentone
	Desflurane
	Halothane
	Ketamine
37.	28. Baclofen is used in the treatment of:
	Mark only one oval.
	Schizophrenia
	Anxiety
	Depression
	Spasticity
38.	29. Which of the following agents is most commonly used to induce
00.	anaesthesia:-
	Mark only one oval.
	Thiopentone sodium
	Propofol
	Methohexitone sodium
	Etomidate
39.	30. Short-acting non-depolarizing blocker is:
	Mark only one oval.
	Rocuronium
	Mivacurium
	Suxamethonium
	Pancuronium

40.	31. A female patient was anesthetized with halothane and nitrous oxide and tubocurarine was used for skeletal muscle relaxation. She became hypertensive along with marked muscle rigidity and hyperthermia. Lab reports showed that she has developed hyperkalemia and acidosis. This complication was caused by:
	Mark only one oval.
	Block of autonomic ganglia by tubocurarine
	Activation of brain dopamine receptors by halothane
	Pheochromocytoma
	Excessive release of calcium from the sarcoplasmic reticulum
41.	32. Hallucinations are seen after anaesthesia:
	Mark only one oval.
	Ketamine
	Thiopentone
	Fentanyl
	Nitrous oxide
42.	33. Malignant hyperthermia is a rare complication of the use of the following anaesthetic:
	Mark only one oval.
	Ketamine
	Thiopentone sodium
	Halothane
	Ether

43.	34. The minimal alveolar concentration of an inhalational anaesthetic is a measure of its:
	Mark only one oval.
	Potency
	Therapeutic index
	Diffusibility
	Oil: water partition coefficient
44.	35. Shortest acting non-depolarizing muscle relaxant is:
	Mark only one oval.
	Succinyl choline
	Rapacuronium
	Atracurium
	Pancuronium
45.	36. All of the following are the true for post lumbar puncture headache except:
	Mark only one oval.
	Mark only one oval. Presents 12 hours after procedure
	Presents 12 hours after procedure
	Presents 12 hours after procedure Pain is relieved in standing position
	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking
46.	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking
46.	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking Pain is occipito-frontal in location
46.	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking Pain is occipito-frontal in location 37. Cocaine overdose presents with all of the following except:
46.	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking Pain is occipito-frontal in location 37. Cocaine overdose presents with all of the following except: Mark only one oval.
46.	Presents 12 hours after procedure Pain is relieved in standing position Pain is worsened by headshaking Pain is occipito-frontal in location 37. Cocaine overdose presents with all of the following except: Mark only one oval. Diaphoresis

47.	38. Local anesthetic not recommended for peripheral nerve blockade:
	Mark only one oval.
	lidocaine (Xylocaine) bupivacaine (Marcaine) ropivacaine (Naropin) tetracaine (pontocaine)
48.	39. Which of the following agents is most commonly used to induce anaesthesia:
	Mark only one oval.
	Thiopentone sodium
	Methohexitone sodium
	Propofol
	Etomidate
49.	40. Neurotoxicity following local anesthesia: lower extremity paresis predisposing conditions may include advanced age and peripheral vascular disease
	Mark only one oval.
	transient radicular irritation
	cauda equina syndrome
	anterior spinal artery syndrome
	None of these

50.	41. Local anesthetic lipophilicity and effectiveness of epinephrine on local anesthesia:
	Mark only one oval.
	more lipophilic anesthetics benefit most by epinephrine in addition to local anesthetic solutions
	more lipophilic anesthetics benef ileast by epinephrine in addition to local anesthetic solutions
	Both more lipophilic anesthetics benefit most by epinephrine in addition to local anesthetic solutions and more lipophilic anesthetics benef ileast by epinephrine in addition to local anesthetic solutions
	None of these
51.	42. The term balanced anaesthesia has been given by:
	Mark only one oval.
	Simpson
	Fischer
	Lundy
	Mortan
52.	43. Consequences of vasodilatory local anesthetic property:
	Mark only one oval.
	reduced systemic absorption
	shorter duration of action
	both
	neither

53.	44. Amide-type local anesthetic
	Mark only one oval.
	cocaine
	prilocaine (Citanest)
	tetracaine (pontocaine)
	lidocaine (Xylocaine)
54.	45. Ester-type local anesthetic:
	Mark only one oval.
	lidocaine (Xylocaine)
	ropivacaine (Naropin)
	tetracaine (pontocaine)
	dibucaine (Nupercainal, generic)
55.	46. Factors influencing local anesthetic distribution and plasma
00.	concentrations:
	Mark only one oval.
	liver function
	cardiovascular status
	extent of protein binding
	All of these
56.	47. Factors that influence local anesthetic absorption and distribution:
	Mark only one oval.
	dosage
	presence of epinephrine in the local anesthetic solution
	injection site
	All of these

57.	48. Clearance mechanisms for local anesthetics:
	Mark only one oval.
	amides-mainly renal
	esters-rapid clearance; hydrolysis
	both
	neither
58.	49.The enzyme pseudocholinesterase acts on:
	Mark only one oval.
	Decamethonium
	Tubocurarine
	Gallamine
	Succinylcholine
59.	50. Shortest acting benzodiazepine among these is:
	Mark only one oval.
	Flurazepam
	Alprazolam
	Triazolam
	Diazepam
60.	51. Which drug is used for pain control in cancer patients?
	Mark only one oval.
	Pethidine
	Fentanyl
	Methadone
	Remifentanil

61.	52. Local anesthetics: chemical properties
	Mark only one oval.
	many local anesthetics are chiral
	enantiomers are often less toxic than racemates and many local anesthetics are chiral
	ropivacaine (Naropin) is an example of a pure R enantiomer
	all of these
62.	53. Propranolol (Inderal) local anesthetic effect(s):
	Mark only one oval.
	inhibits bupivacaine (Marcaine) extraction
	increases lidocaine (Xylocaine) plasma clearance
	Both inhibits bupivacaine (Marcaine) extraction and increases lidocaine (Xylocaine) plasma clearance
	None of these
63.	54. Enhancement of spinal anesthesia by the presence of epinephrine in local anesthetics: Reason(s)
	Mark only one oval.
	increased substance P release
	increased dorsal horn neuronal activity
	decreased local neuronal uptake
	none of these

64.	55. Most effective non habit forming sedative is:
	Mark only one oval.
	Lorazepam
	Zolpidem
	Flurazepam
	Trazadone
65.	56. All of the following are halogenated anaesthetic agents except:
	Mark only one oval.
	Halothane
	Propofol
	Enflurane
	Isoflurane
66.	57. Hoffman's elimination is seen with:
	Mark only one oval.
	Rocuronium
	Atracurium
	Vecuronium
	Pancuronium
67	
67.	58. Chlorzoxazone is used in the treatment of:
	Mark only one oval.
	Anxiety
	Depression
	spasticity
	Schizophrenia

68.	59. Eutectic mixture of local anaesthetic (EMLA) cream is:
	Mark only one oval.
	Bupivacaine 0.5% + Lidocaine 2.5%
	Lidocaine 2.5% + Prilocaine 5%
	Bupivacaine 2.0% + Prilocaine 2.5%
	Lidocaine 2.5% + Prilocaine 2.5%
69.	60. Regarding propofol, which one of the following is false:
	Mark only one oval.
	It has no muscle relaxant property
	It is painful on injecting intravenously
	It causes severe vomiting
	lewis and MNS system

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