U H S R E X A M I N A T I O N S
WST-MO-2026-Set-C

1. Which bird species is known for its ability to mimic chainsaws and other mechanical sounds?
   A. Mockingbird
   B. Lyrebird
   C. Parrot
   D. Starling

2. What causes the Aurora Borealis?
   A. Refraction of moonlight in ice crystals
   B. Interaction of solar wind with Earth's magnetic field
   C. Reflection of sunlight on polar ice
   D. Emission of gases from volcanoes

3. Who demonstrated the role of antiseptics in preventing surgical infections?
   A. Robert Koch
   B. Ignaz Semmelweis
   C. Joseph Lister
   D. Rudolf Virchow

4. Which layer of the atmosphere is primarily responsible for weather phenomena like rain and storms?
   A. Stratosphere
   B. Troposphere
   C. Mesosphere
   D. Thermosphere

5. Which file extension is commonly associated with spreadsheet software?
   A. .docx
   B. .pptx
   C. .xlsx
   D. .pdf

6. What is the rarest type of blood group among humans?
   A. O-negative
   B. AB-positive
   C. AB-negative
   D. B-negative

7. Which Indian state has the longest coastline?
   A. Maharashtra
   B. Tamil Nadu
   C. Gujarat
   D. Andhra Pradesh

8. Which Indian River flows westward and drains into the Arabian Sea?
   A. Ganga
   B. Godavari
   C. Krishna
   D. Narmada

9. Which article of the Indian Constitution deals with the imposition of President's Rule in a state?
   A. Article 352
   B. Article 356
   C. Article 360
   D. Article 365

10. Deficiency disease resulting from deficiency of selenium is:
    A. Keshan disease
    B. Fabry's disease
    C. Menke's disease
    D. Prion disease

11. A 28-year-old woman presents with irregular menstrual cycles. On day 21 of her menstrual cycle, her serum hormone levels show elevated progesterone but low luteinizing hormone (LH) and follicle-stimulating hormone (FSH) levels. Which of the following best explains these findings?
    A. Anovulatory cycle with no corpus luteum formation
    B. Normal luteal phase with functioning corpus luteum
    C. Luteal phase defect with inadequate progesterone production
    D. Persistent follicle producing oestrogen but no ovulation

12. Why does the force of cardiac muscle contraction increase with an increase in its length?
    A. Because longer muscle length enhances mitochondrial oxygen consumption.
    B. Because stretching increases calcium sensitivity of the contractile filaments.
    C. Because stretching increases the number of motor units recruited.
    D. Because longer length increases ATP availability in the muscle fibers.

13. Large density vesicles in the synaptic knob contain:
    A. Ach
    B. Glycine
    C. Neuropeptide
    D. Glutamate

14. Which of the following best describes the dynamics of calcium release and uptake during the development of high frequency-induced muscle tetany?
A. Release from longitudinal tubules is greater than uptake by terminal cisterns
B. Release from the longitudinal tubules is greater than the uptake by the tubules T
C. Release from terminal cisterns is greater than uptake by longitudinal tubules
D. Release from the terminal cisterns is greater than the uptake by the tubules T

15. What is the role of stretch receptors (muscle spindles) in maintaining muscle tone?
A. They stimulate the brainstem nuclei responsible to maintaining muscle tone.
B. They detect excessive tension and activate the Golgi tendon reflex.
C. They sense muscle stretch and stimulate alpha motor neurons.
D. They block the transmission of sensory signals to the spinal cord to prevent overstimulation.

16. Which of the following best describes the role of the cell membrane protein clathrin?
A. It facilitates calcium-dependent cell-to-cell adhesion.
B. It assists in vesicle formation during receptor-mediated endocytosis by coating budding vesicles.
C. It is directly involved in the fusion of secretory vesicles with the plasma membrane during exocytosis.
D. It is an integral transmembrane protein embedded uniformly across the plasma membrane.

17. Middle meningeal artery is a direct branch of:
A. External carotid artery
B. Internal maxillary artery
C. Superficial temporal artery
D. Middle cerebral artery

18. All of the following are supports of the uterus EXCEPT:
A. Broad ligament
B. Uterosacral ligament
C. Mackenrodts' ligament
D. Levator ani

19. Which of the following is primarily responsible for recognizing replication origins and recruiting initiation factors during eukaryotic DNA replication?
A. DNA ligase
B. DNA polymerase delta
C. Replication protein A
D. Origin recognition complex

20. The primary role of insulin in lipid metabolism is to:
A. Increase lipolysis in adipose tissue
B. Increase triglyceride synthesis in adipose tissue
C. Increase free fatty acid release into blood
D. Increase β-oxidation in liver

21. Glycolysis primarily occurs in which cellular compartment?
A. Cytosol
B. Endoplasmic reticulum
C. Mitochondria
D. Golgi apparatus

22. A 45-year-old hypertensive patient has been on long-term therapy with lisinopril. Because his blood pressure remains 148/102 mmHg, triamterene is added. What is the major risk associated with this drug combination?
A. Hyponatremia
B. Hyperkalemia
C. Hypokalemia
D. Hypernatremia

23. Compared with atropine, inhaled ipratropium produces fewer adverse effects in COPD because it:
A. Is rapidly metabolized in the liver
B. Has limited systemic absorption from airways
C. Preferentially blocks nicotinic receptors
D. Increases mucociliary clearance

24. A 28-year-old woman at 20 weeks of gestation is diagnosed with chronic hypertension. Which drug is most appropriate for long-term blood pressure control?
A. Losartan
B. Ramipril
C. Methyldopa
D. Hydrochlorothiazide

25. Which of the following disinfectants primarily act by disrupting microbial membranes?
A. Halogens
B. Quaternary ammonium compounds
C. Aldehydes
D. Heavy metals

26. Frozen section biopsy is most commonly useful intraoperatively in which of the following conditions?
A. Chronic pancreatitis
B. Gallbladder carcinoma
C. Breast lump suspicious for malignancy
D. Acute appendicitis

27. Which of the following statements about thyroid storm in the surgical setting is TRUE?
A. It is a mild hyperthyroid state that resolves spontaneously
B. Emergency thyroidectomy is the first-line treatment
C. It is a life-threatening condition precipitated by surgery or trauma in poorly controlled hyperthyroid patients
D. It commonly occurs after thyroid surgery in euthyroid patients

28. Which of the following is a classical risk factor for prolapse in nulliparous women?
A. Chronic constipation
B. Childbirth trauma
C. Spina bifida occulta
D. Fibroid uterus

29. Bandl's ring is most commonly seen in which of the following conditions?
A. Cephalopelvic disproportion
B. Obstructed labor
C. Prolonged labor
D. Cervical dystocia

30. A 27-year-old G2P1L1 at 30 weeks gestation presents with ICT (indirect Coombs test) positive, titres 1:16, and maternal Anti-D level 10 IU/mL. What is the mainstay investigation for diagnosing fetal anemia?
A. Amniocentesis with spectrophotometric analysis
B. Middle cerebral artery Doppler
C. Cordocentesis
D. Umbilical artery Doppler

31. A 20-year-old primigravida at 36 weeks' gestation has BP 140/90 mmHg with normal labs. Ultrasound shows AFI 3 cm and fetal growth restriction. Which finding indicates the highest risk of adverse maternal or fetal outcome?
A. Pre-eclampsia without severe features
B. Fetal growth restriction
C. Severe oligohydramnios
D. Late preterm gestation

32. A 6-year-old girl presents with early breast development, pubic hair, and café-au-lait spots. Which of the following statements regarding the most likely diagnosis is TRUE?
A. It is associated with neural tumors
B. It is associated with multiple endocrinopathies
C. It is characterized by elevated LH and FSH levels
D. It results from low estradiol levels

33. A 35-year-old multiparous woman presents with lower abdominal pain and vaginal discharge. Ultrasound shows a thin-walled, elongated, tubular cystic adnexal structure with incomplete septations and low-resistance blood flow on Doppler. What is the most likely diagnosis?
A. Chronic interstitial salpingitis
B. Hydrosalpinx
C. Ectopic pregnancy
D. Benign ovarian mass

34. A 25-year-old woman presents with sudden-onset, severe lower abdominal pain on the right side, associated with nausea and vomiting. On pelvic ultrasound, an enlarged ovary with peripheral follicles and absent/reduced blood flow on Doppler is seen. What is the most likely diagnosis?
A. Ruptured haemorrhagic cyst
B. Ovarian torsion
C. Tubo-ovarian abscess
D. Ectopic pregnancy

35. A 28-year-old woman presents with 6 weeks of amenorrhea, lower abdominal pain, and light vaginal bleeding. On transvaginal ultrasound, no intrauterine gestational sac is seen, but a heterogeneous adnexal mass with a "ring of fire" sign on color Doppler is noted. What is the most probable diagnosis?
A. Missed abortion
B. Tubal ectopic pregnancy
C. Hydrosalpinx
D. Corpus luteum cyst

36. A 28-year-old primigravida at 34 weeks has BP 170/110 mmHg, severe headache, visual symptoms, and 3+ proteinuria. What is the next best step?
A. Oral antihypertensives and continue pregnancy
B. IV antihypertensives + magnesium sulfate and plan delivery
C. Corticosteroids and observe
D. Bed rest and weekly follow-up

37. A 28-year-old woman has chronic pelvic pain, worsening dysmenorrhea, deep dyspareunia, and infertility. Examination shows posterior fornix tenderness with uterosacral nodularity. What is the best test to confirm the diagnosis?
A. Transvaginal ultrasound
B. Serum CA-125
C. Diagnostic laparoscopy
D. Endometrial biopsy

38. Regarding breath-holding spells in children, which of the following statements is TRUE?
A. They commonly begin before 3 months of age
B. They are usually benign and require parental reassurance
C. Every episode progresses to generalized seizures
D. They are always associated with prolonged apnea at later age

39. A 3-month-old infant born to an HIV-positive mother requires confirmation of infection. Which test is most appropriate?
A. Detection of HIV IgG antibody by 2–3 reactive Enzyme Immunoassays (EIA)
B. HIV Proviral DNA PCR
C. Western blot assay
D. Capture p24 antigen assay

40. Regarding subcutaneous nodules in acute rheumatic fever, which of the following statements is TRUE?
A. They are painful nodules over bony prominences
B. They appear early and persist for years
C. They are strongly associated with carditis
D. They are the most common major manifestation

41. A 1-month-old infant has lethargy, hoarse cry, prolonged jaundice, umbilical hernia, and a wide anterior fontanelle. What is the most likely diagnosis?
A. Neonatal sepsis
B. Congenital hypothyroidism
C. Congenital syphilis
D. Congenital CMV infection

42. 9-month-old infant is brought for a routine check-up. Which of the following developmental milestones is most likely to be achieved by this age?
A. Walking independently
B. Saying 3–5 words with meaning
C. Sitting without support
D. Using a spoon to feed self

43. A cyanotic neonate has an “egg-on-a-string” appearance on chest X-ray. What is the most likely diagnosis?
A. Tetralogy of Fallot
B. Transposition of the great arteries
C. Total anomalous pulmonary venous connection
D. Tricuspid atresia

44. Which of the following statements about febrile seizures is TRUE?
A. Complex febrile seizures last less than 15 minutes and do not recur within 24 hours
B. Febrile seizures usually begin after 5 years of age
C. Simple febrile seizures are generalized, last less than 15 minutes, and do not recur within 24 hours
D. Antiepileptic drugs are routinely recommended after a simple febrile seizure

45. A 1-year-old child has pallor, failure to thrive, and frontal bossing. Peripheral smear shows microcytic hypochromic anemia with target cells, and Hb electrophoresis reveals markedly elevated HbF. What is the most likely diagnosis?
A. Iron deficiency anemia
B. Sickle cell anemia
C. Beta-thalassemia major
D. Alpha-thalassemia trait

46. A screening test for a disease has high sensitivity but low specificity. Which of the following is the most likely outcome when this test is used in a large population?
A. Increased number of false negatives
B. Increased number of false positives
C. Higher positive predictive value in low-prevalence settings
D. Missed early cases of disease

47. Which is not a component of ‘Ayushman Bharat Program’?
A. Health and Wellness Centres
B. National Urban Health Mission
C. National Health Protection Scheme
D. Telemedicine Services

48. The “Red Line” campaign is associated with:
A. Antibiotic resistance
B. Tuberculosis
C. Metabolic syndrome
D. Kyasanur Forest Disease

49. Which of the following is the nodal agency for POSHAN Abhiyan?
A. Ministry of Health and Family Welfare
B. NITI Aayog
C. Ministry of Women and Child Development
D. Ministry of Human Resource Development

50. A goal of National Nutrition Mission is?
A. Eliminate malnutrition by 2030
B. Reduce low birth weight by 2% per year
C. Provide food for all
D. Eradicate vitamin A deficiency

51. Which of the following parasites primarily inhabits the duodenum?
A. Entamoeba histolytica
B. Giardia lamblia
C. Balantidium coli
D. Toxoplasma gondii

52. Which of the following glomerular lesions is most specific for diabetic nephropathy?
A. Capillary basement membrane thickening
B. Diffuse mesangial sclerosis
C. Nodular glomerulosclerosis
D. Hyaline arteriolosclerosis

53. A 60-year-old man presents with painless hematuria and dysuria. He has worked for 30 years in a rubber manufacturing factory. Cystoscopy reveals a bladder mass, and biopsy shows malignant urothelial cells. Chronic exposure to which of the following substances is most strongly associated with this malignancy?
A. Arsenic
B. Benzidine
C. Vinyl chloride
D. Asbestos

54. Which one of the following statements is correct:
A. Warthin tumour is more common in females
B. Pleomorphic adenoma is also called malignant mixed tumour
C. Mucoepidermoid carcinoma is associated with CRTC1-MAML2 fusion protein formation
D. Perineural invasion is characteristic of Acinic cell carcinoma

55. Which one of the following statements is NOT true about the Warburg effect?
A. It represents aerobic glycolysis
B. It is characterized by high glucose uptake and increased conversion to lactate
C. It generates more ATP than oxidative phosphorylation
D. It provides metabolic intermediates for biosynthesis

56. Arborescent markings are seen in:
A. Frostbite
B. Lightning injury
C. Electrical burn
D. Heat stroke

57. A 40-year-old woman presents with hypertension and muscle weakness. Laboratory tests reveal hypokalemia and metabolic alkalosis. Plasma aldosterone concentration is elevated with suppressed plasma renin activity. Which of the following is the most likely diagnosis?
A. Pheochromocytoma
B. Conn's Syndrome
C. Cushing's syndrome
D. Addison's disease

58. A patient undergoes arterial blood gas analysis with the following values:
pH:7.25, HCO_3^-:16 mEq/L, $PaCO_2$:30 mmHg. Which of the following best describes the acid–base status?
A. Primary metabolic acidosis with respiratory compensation
B. Primary metabolic acidosis with superimposed respiratory alkalosis
C. Mixed metabolic and respiratory acidosis
D. Primary metabolic alkalosis with respiratory compensation

59. Which of the following is LEAST consistent with Cushing reflex?
A. Widened pulse pressure
B. Bradycardia
C. Irregular breathing
D. Tachycardia

60. Which of the following statements regarding Renal Tubular Acidosis (RTA) is INCORRECT?
A. Type 1 (distal RTA) is associated with hypokalemia
B. Type 2 (proximal RTA) is due to impaired bicarbonate reabsorption
C. Type 4 RTA is associated with hypoaldosteronism and hyperkalemia
D. All types of RTA are associated with metabolic alkalosis

61. A young patient presents with episodic palpitations. Which ECG finding is most characteristic of Wolff–Parkinson–White (WPW) syndrome?
A. Short PR interval with broad QRS complex
B. Prolonged PR interval with narrow QRS complex
C. Short PR interval with narrow QRS complex
D. Normal PR interval with broad QRS complex

62. Which of the following is NOT a classic feature of nephrotic syndrome?
A. Proteinuria (>3.5 g/day)
B. Hypoalbuminemia
C. Hyperlipidemia
D. Hematuria with Red Blood Cell casts

63. Which of the following is NOT a characteristic feature of Behçet's syndrome?
A. Recurrent oral ulcers
B. Genital ulcers
C. Erythema nodosum
D. ANA positivity

64. Which of the following findings is NOT typically associated with Fanconi syndrome?
A. Glycosuria with normal plasma glucose
B. Normal anion gap metabolic acidosis
C. Hyperkalemia
D. Phosphaturia with hypophosphatemia

65. A 45-year-old man has progressive dyspnea and dry cough. Pulmonary function tests show ↓ TLC, normal FEV_1/FVC, and ↓ DLCO.The reduced DLCO is most likely due to:
A. Decreased pulmonary capillary blood volume
B. Thickening of the alveolar–capillary membrane
C. Loss of elastic recoil
D. Ventilation–perfusion mismatch

66. A 70-year-old woman with long-standing hypertension presents with dyspnea on exertion and ankle swelling. Echocardiography shows concentric left ventricular hypertrophy and an ejection fraction of 60%. Which type of heart failure is most consistent with these findings?
A. Heart failure with reduced ejection fraction
B. Heart failure with preserved ejection fraction
C. Dilated cardiomyopathy
D. Acute myocardial infarction

67. A 45-year-old woman develops sudden dyspnea and pleuritic chest pain 5 days after knee surgery. She is tachycardic and hypoxemic. Which is the most appropriate initial imaging test?
A. CT pulmonary angiography
B. D-dimer assay
C. Ventilation–perfusion scan
D. Lower limb Doppler ultrasound

68. A 20-year-old male presents with a painless right scrotal swelling for 6 months. On examination, the testis is not separately palpable and the swelling is transilluminant. What is the most likely diagnosis?
A. Right vaginal hydrocele
B. Right spermatocele
C. Right inguinal hernia
D. Right epididymal cyst

69. A 16-year-old school boy is brought with history of fall from a moving bus with bruising and lacerations over the lower abdomen and pelvis. The patient has strong urge to pass urine but is unable to do so. On examination there is blood at the tip of the penis. What is the management of urinary retention in this patient?
A. Foley's catheterization
B. Supra pubic catheterization
C. Passage of a feeding tube per urethra
D. Encourage the patient to sit up and pass urine on his own

70. Which of the following is NOT used in the management of haemorrhoids?
A. Milligan–Morgan haemorrhoidectomy
B. Rubber band ligation
C. Sclerotherapy
D. Lateral sphincterotomy

71. Which of the following statements regarding fibroadenoma of the breast is TRUE?
A. They are borderline malignant neoplasms
B. They always require surgical removal
C. Subcutaneous mastectomy is the treatment of choice
D. They most commonly present in late adolescence or early adulthood

72. Which one of the following is the most likely electrolyte abnormality following massive blood transfusion?
A. Low sodium and high phosphate
B. High sodium and low potassium
C. Low calcium and high potassium
D. High calcium and high sodium

73. Investigation needed to confirm diagnosis of achalasia is:
A. Esophagogram **B. Manometry**
C. Endoscopy D. 24- hour pH monitoring

74. A 65-year-old adult presents with sudden onset of painless lower gastrointestinal bleeding. Which of the following is the most likely cause?
A. Colorectal carcinoma B. Angiodysplasia
C. Diverticular disease D. Inflammatory bowel disease

75. Which of the following is the earliest symptom of acute appendicitis?
A. Right lower quadrant tenderness **B. Periumbilical pain**
C. Guarding and rigidity over McBurney's point D. Nausea and vomiting

76. In one of the coastal district of Karnataka state, sudden cases of acute flaccid paralysis (AFP) are reported. What is the next step under the relevant national health program?
A. Active case search under NLEP
B. Immediate case notification under IDSP
C. Field investigation and stool sample collection under UIP surveillance
D. Mass doxycycline prophylaxis to all exposed individuals

77. A 48-year-old male, Mr Devender diagnosed with MDR-TB is put on second-line treatment. He is monitored through a system where he calls a unique toll-free number every time he takes his medicine. This ICT-based adherence monitoring tool is part of which intervention?
A. eNikshay B. V-Cure
C. 99 DOTS D. Treat_108

78. A health worker Mr. Hardik, is reviewing the immunization coverage in a village. One child aged 9 months has not received any vaccine. Under Mission Indradhanush, what should be the approach?
A. Refer the child to tertiary care B. Register the child for surveillance
C. Administer only measles vaccine **D. Include the child in catch-up immunization rounds**

79. Direct cash transfer scheme to adolescent girls is covered under:
A. ICDS **B. SABLA**
C. CSSM D. RCH

80. Under National Rural Health mission who will be the link person between community and health care services?
A. Anganwadi worker B. TBA
C. ASHA D. ANM

81. The Vision 2020 initiative was launched to eliminate avoidable blindness from major causes. Which of the following condition was not included in the 'Vision 2020: The Right to Sight'?
A. Cataract **B. Epidemic conjunctivitis**
C. Diabetic retinopathy D. Trachoma

82. Under National Rural Health Mission, lowest level at which Health Action Plan is prepared is:
A. State level B. District Level
C. Subcentre Level **D. Village Level**

83. Yellow fever Vaccine is which of the following type of Vaccine?
A. Killed **B. Live attenuated**
C. Recombinant D. Toxiod

84. The area is declared free of epidemic:
A. Till last secondary case recovers
B. No new case reported for the incubation period of disease since the last case
C. No new case reported for twice the incubation period of disease since the last case
D. No new case reported for six months since the last case

85. Which of the following statement regarding Serial Interval is correct?
A. Time interval between the onset of primary and secondary case
B. Time interval between the onset of primary and last known case
C. Average interval between cases
D. Sequential interval between cases

86. Incidence rate is best measured by which of the following epidemiological study designs?
A. Case control study
B. Cohort study
C. Cross-sectional study
D. Cross-over study

87. In October 2024, India launched the U-WIN platform. What is its primary objective?
A. Telemedicine for pregnant women
B. Digital registry to track vaccinations in pregnant women and children
C. Online nutritional counselling for lactating mothers
D. Virtual prenatal yoga sessions

88. What is the maximum financial coverage per family per year under the national health protection scheme (PM-JAY)?
A. ₹1 lakh
B. ₹2 lakh
C. ₹3 lakh
D. ₹5 lakh

89. Who is primarily responsible for conducting population-based screening for adults at Health and Wellness Centres?
A. ASHA worker
B. Auxiliary Nurse Midwife
C. Community Health Officer
D. Medical Officer

90. In the Janani Suraksha Yojana, cash incentives are provided to promote:
A. Contraceptive use
B. Institutional deliveries
C. Child vaccination
D. Family planning counselling

91. Diplacusis is usually seen in:
A. Perilymph fistula
B. Meniere's disease
C. Benign Paroxysmal Positional Vertigo
D. Otosclerosis

92. Membrane on the tonsils is NOT seen in
A. Infectious mononucleosis
B. Ludwig's angina
C. Streptococcal tonsillitis
D. Diphtheria

93. Progressive pannus is defined as:
A. Vascularization ahead of infiltration
B. Infiltration ahead of vascularization
C. Only vascularization no infiltration
D. Only infiltration no vascularization

94. Which structure of the eye provides the majority of its refractive power?
A. Anterior cornea
B. Posterior cornea
C. Anterior lens
D. Posterior lens

95. Keratoconus typically causes the following type of astigmatism:
A. With the rule astigmatism
B. Against the rule astigmatism
C. Irregular astigmatism
D. Oblique astigmatism

96. Measurement of contrast sensitivity can be done by the following tests EXCEPT:
A. Pelli Robson Chart
B. Cambridge grating
C. Amsler Grid
D. Arden grating

97. A 55-year-old chronic smoker has chronic cough and progressive dyspnea. Spirometry shows FEV1/FVC = 65% with no reversibility. Most likely diagnosis?
A. Bronchiectasis
B. Asthma
C. COPD
D. Pulmonary fibrosis

98. A 60-year-old smoker has chronic cough, dyspnea, hyperinflated lungs on X-ray, and FEV1/FVC = 60%. The most characteristic pathological finding is:
A. Alveolar wall destruction and airspace enlargement
B. Fibrosis of alveolar septa
C. Bronchial smooth muscle hypertrophy
D. Granulomatous inflammation

99. A 45-year-old man with COPD has dyspnea, raised JVP, loud P2, and peripheral edema. What is the underlying pathophysiology?
A. Left ventricular failure → pulmonary hypertension
B. Right ventricular failure due to pulmonary hypertension from lung disease
C. Primary RV myocardial disease
D. Constrictive pericarditis

100. A 50-year-old man presents with polyuria, polydipsia, and recurrent renal stones. Labs reveal: serum calcium 12.5 mg/dL, phosphate 2.2 mg/dL, PTH elevated. X-ray shows subperiosteal bone resorption in the phalanges. Which is the most likely diagnosis?
A. Secondary hyperparathyroidism
B. Primary hyperparathyroidism
C. Vitamin D intoxication
D. Sarcoidosis