

11

Madhya Pradesh Medical Science University, Jabalpur
MBBS Second Professional Examination September 2019

Paper Code:-19BM0000100510

Pathology Paper -I

Time : 3 :00Hours

Maximum Marks : 40

Instructions:

- a) All questions are compulsory
- b) Draw diagrams wherever necessary
- c) Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- d) MCQ has to be answered in theory answer book
- e) Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- f) MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University

Q. 1 Total MCQs : 16

16 X ½ = 8

- 1 Macrophages are converted into epitheloid cell by
a. IFN - γ b. IL - 2 c. TNF - α d. TGF - β
- 2 The following is a Proapoptatic Factors
a. Bax b. Bcl - 2 c. Bcl xL d. M ci - 1
- 3 In Respiratory tract metaplasia occurs from
a. Squamous to columnar b. Squamous to cuboidal c. Columnar to Squamous d. Cuboidal to Squamous
- 4 Role of P selectin in Inflammation
a. Rolling b. Adhesion c. Homing d. Transmigration
- 5 Most Important for diapedesis
a. PECAM b. Selectin c. Integerin d. Glycoprotein
- 6 Nutmeg liver seen in
a. Alcoholic b. CVC c. Hepatoma d. Fatty liver
- 7 Heart Failure (Heart Failure) cell are
a. Foam cells b. Lipid Laden Macrophages c. Hemosiderin Laden Macrophages d. Type - 1 Pneumocytes
- 8 Red Infarct is seen in
a. Liver b. Kidney c. Brain d. Lung
- 9 Vit -K dependent Factor is
a. II b. III c. IV d. VI
- 10 The Commonest mode of Inheritance of Von Willebrand's disease
a. Co dominant b. Autosomal c. Autosomal Dominant d. X-linked
- 11 Russell's body is found in
a. WBC b. RBC c. Mast cell d. Plasma cell
- 12 Coagulative Necrosis is found in
a. Anaemia b. Tuberculosis c. Sarcoidosis d. Gangrene
- 13 Programmed cell death is also called as
a. Apoptosis b. Necrosis c. Degeneration d. Calcification
- 14 Which of the following stain is specific for Amyloids
a. PAS b. Alzerian red c. Congo red d. Von - kossa
- 15 Most common form of Leukemia in children
a. AML b. CML c. CLL d. ALL

- 16 Myelin figures are derived from
- a. Nucleus
 - b. Cytoplasm
 - c. Cell Membrane
 - d. Golgi Apparatus

Q. 2 Long Answer Question

2 X 5 = 10

- a. Describe Types & Morphological changes of Necrosis
- b. Define & classify anaemia, discuss lab – diagnosis of megaloblastic anemia

Q.3 Short Answer Question

4 X 3 = 12

- a. Write briefly on etiopathogenesis of thrombosis.
- b. Differentiate between benign & malignant tumour
- c. Write in brief about type IV hypersensitivity
- d. Write briefly on multiple myeloma

Q.4 Very Short Answer Question

10 X 1 = 10

- a. Granuloma
- b. Dystrophic calcification
- c. Warm antibodies
- d. FAB classification of AML
- e. Metaplasia
- f. Paradoxical embolism
- g. Sago spleen
- h. Nutmeg liver
- i. Auer rod
- j. Philadelphia chromosome

HIGHLY CONFIDENTIAL DOCUMENT EDC - 401, @ 17-09-2019 09:31:23

Madhya Pradesh Medical Science University, Jabalpur
MBBS 2nd Professional Examination November-2019

Paper Code:-19BM0000100510

Pathology Paper -I

Time : 3 :00Hours

Maximum Marks : 40

Instructions:

- All questions are compulsory
- Draw diagrams wherever necessary
- Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- MCQ has to be answered in theory answer book
- Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice. Such answers will not be counted in the marks and action will be taken according to UFM rules of University

Q. 1 Total MCQs : 16

16 X ½ = 8

- Dystrophic calcification is seen in the following Except
a. caseous necrosis b. fat necrosis c. primary hyperparathyroidism d. atherosclerosis
- Factors that predispose thrombus formation
a. Endothelial injury b. Stasis c. Blood Hypercoagulability d. All three
- Which of the following Sarcoma has high incidence in patients with AIDS
a. Rhabdomyosarcoma b. Fibrosarcoma c. Osteogenic Sarcoma d. Kaposi Sarcoma
- Selective tropism of HIV virus is seen for
a. Natural killer cells b. CD+8 T lymphocyte c. CD+4 T lymphocyte d. B lymphocyte
- Syphilitic aneurysm is commonly seen in
a. Ascending aorta b. Abdominal aorta c. Opening of renal arteries d. None
- Following is a primary manifestation of Left Ventricular Failure
a. Generalised oedema b. Congestive splenomegaly c. Cardiac cirrhosis d. Chronic venous congestion of Lung
- The most common cause of pulmonary embolism is
a. Cardiac thrombus in left ventricle b. Aortic aneurysm c. Deep vein thrombosis d. Aortic atherosclerotic Plaques
- The fragmentation of nuclear chromatin during necrosis is called
a. Karyolysis b. Pyknosis c. Karyorrhexis d. Apoptosis
- One of the following is not an example of granulomatous disease
a. Tuberculosis b. Leprosy c. Sarcoidosis d. Typhoid
- Hemolytic disease of newborn mainly occurs when:
a. Mother Rh +ve, foetus Rh -ve b. Mother Rh -ve, foetus Rh +ve c. Both mother and foetus Rh -ve d. Both mother and foetus Rh +ve
- High risk of HPV implicated in cervical intraepithelial neoplasia (CIN) are
a. HPV Types 6 & 11 b. HPV Types 5 & 8 c. HPV Types 16 & 18 d. HPV Types 19 & 22
- In TNM staging N stands for
a. Examination of tumor b. Spread to distant organ c. Lymph node involvement d. None

13. Hamartomas are
- a. Hemangiomas b. Hematomas c. Developmental malformation d. Antibiomias
14. Paraneoplastic syndromes are most commonly associated with
- a. Lung carcinoma b. Pancreatic carcinoma c. Breast carcinomas d. Gastrointestinal carcinomas
15. Hereditary breast cancer can be attributed to two highly penetrant autosomal genes
- a. PTEN & KAI b. BRCA1 & BRCA 2 c. VHL gene and PRCC d. RB gene
16. Following clinical feature is characteristically absent in aplastic anaemia
- a. Splenomegaly b. Reticulocytopenia c. Macrocytic & normochromic RBCs d. Neutropenia

Q.2 Long Answer Question

2 X 5 = 10

- a. Define Edema. Discuss pathogenesis of edema in congestive cardiac failure and renal disease.
- b. Define and classify Anaemia. Describe investigations in haemolytic anaemia.

Q.3 Short Answer Question

4 X 3 = 12

- a. Define Apoptosis. Describe various mechanisms of apoptosis.
- b. Chemical mediators of inflammation.
- c. Discuss the role of Tumour markers and their role in diagnosis.
- d. FAB classification of Acute Myeloid Leukemia.

Q.4 Very Short Answer Question

10 X 1 = 10

- a. Rb gene.
- b. Reticulocytes.
- c. Megaloblast.
- d. Giant cell.
- e. Leukemoid reaction.
- f. Dysplasia.
- g. Types of necrosis.
- h. Nutmeg liver.
- i. Types of embolism.
- j. Human blood group system.

Madhya Pradesh Medical Science University, Jabalpur
MBBS Second Professional Examination September 2019

Paper Code:-19BM0000100511

Pathology Paper -II

Time : 3 :00Hours

Maximum Marks : 40

Instructions:

- a) All questions are compulsory
- b) Draw diagrams wherever necessary
- c) Answers of Questions and Sub questions must be written strictly according to the serial order of question paper.
- d) MCQ has to be answered in theory answer book
- e) Please write MCQ answer neatly and in serial order with black or blue pen in brackets for example:- 1. (a) 2. (b)
- f) MCQ has to be answered only once, any kind for repetition or cutting or erasing or whitener will be consider as malpractice, Such answers will not be counted in the marks and action will be taken according to UFM rules of University

Q.1 Total MCQs : 16

16 X ½ = 8

- 1 Aschoff nodules are seen in
 - a. Acute rheumatic fever
 - b. Bacterial endo – carditis
 - c. Pneumoconiosis
 - d. Asbestosis
- 2 Rokitansky Aschoff sinus are a feature a feature of
 - a. Adenomyomatosis of gall bladder
 - b. Chronic Cholecystitis
 - c. Acute cholecystitis
 - d. Carunoma gall bladder
- 3 Krukenberg tumour of ovary is due to carcinoma of
 - a. Stomach
 - b. Lung
 - c. CNS
 - d. Thyroid
- 4 Pseudopolyps are features of
 - a. Chrohn's Disease
 - b. Ulcerative colitis
 - c. Celiac Sprue
 - d. Whipple's disease
- 5 Which Hepatitis causes more morbidity in pregnant female
 - a. Hepatitis A
 - b. Hepatitis B
 - c. Hepatitis C
 - d. Hepatitis E
- 6 Commonest Histological finding in benign hypertension
 - a. Proliferative Endocarditis
 - b. Necrotising arteriolitis
 - c. Hyaline arteriosclerosis
 - d. Cystic medial necrosis
- 7 ANCA positive vasculitis
 - a. Henoch scholein purpura
 - b. Behcet's syndrome
 - c. Wegener's granulomatosis
 - d. None
- 8 Complication of diabetes mellitus includes
 - a. Encephalopathy
 - b. Myelopathy
 - c. Retinopathy
 - d. Myopathy
- 9 Which type of Diabetes is HLA associated
 - a. Ty I DM
 - b. Ty II DM
 - c. Malnutrition related type
 - d. Pregnancy related type
- 10 Normal level of serum uric acid in males is
 - a. 3.1 – 7 mg ldl
 - b. 2.5 – 5.6 mg ldl
 - c. 1.5 – 3.3 mmol/L
 - d. 1.8 – 4.4 mmol/L
- 11 Cast seen in acute Gtomerulonephritis is
 - a. Hyaline cast
 - b. Granular cast
 - c. RBC cast
 - d. WBC cast
- 12 Bile conjugation occurs in
 - a. Liver
 - b. Pancreas
 - c. Duodenum
 - d. Spleen
- 13 Macronodular Cirrhosis refers to nodule diameter greater than
 - a. 1mm
 - b. 2mm
 - c. 3mm
 - d. 4mm

14 Bilirubin is the degradation product of
a. Albumin b. Globulin

15 Pigment stone is composed of
a. Ca bilirubinate b. Ca phosphate

16 Asbestosis causes
a. Lymphoma b. Leukemia

c. Heme

d. Transferrin

c. Ca carbonate

d. Ca gluconate

c. Renal Cell Carcinoma

d. Mesothelioma

Q.2 Long Answer Question

a. Define and classify cirrhosis. Write briefly on alcoholic cirrhosis

2 X 5 = 10

b. Write classification and lab diagnosis of diabetes mellitus

Q.3 Short Answer Question

a. Lab diagnosis of myocardial infarction

4 X 3 = 12

b. Gross and microscopic features of lobar pneumonia

c. Differentiate between crohn's disease and ulcerative colitis

d. Write briefly on post streptococcal glomerulonephritis

Q.4 Very Short Answer Question

10X 1 = 10

a. Aschoff nodule

b. Types of emphysema

c. Wilm's tumour

d. Baretts Oesophagus

e. ESR

f. Malory hyaline bodies

g. Fibroadenoma

h. Ewing's sarcoma

i. CSF finding in tubercular meningitis

j. Ghon's complex

HIGHLY CONFIDENTIAL DOCUMENT EDC - 407, @ 23-09-2019 09:22:33

Madhya Pradesh Medical Science University, Jabalpur
MBBS 2nd Professional Examination November 2019

Paper Code:-19BM0000100511

Pathology Paper -II

Time: 3 hours

Instructions:

- All questions are compulsory
- Draw diagrams wherever necessary
- Answers of Questions and Sub questions must be written strictly according to the order
- MCO has to be answered in theory answer book
- Please write MCO answer neatly and in serial order with black or blue pen in brackets for MCO has to be answered only once, any kind for repetition or cutting or erasing or white out
- Such answers will not be counted in the marks and action will be taken according to U.P.U.

Total MCQs: 15

1. The most common location for carcinoid tumor is

- a. Foregut b. Mid gut c. Hind gut

2. The most common mechanism in pathogenesis of chronic pyelonephritis is

- a. Ascending infection b. Reflux nephropathy c. Obstructive nephropathy

3. Which of the following does not lead to bronchiectasis

- a. Mucoviscidosis b. Kartagener syndrome c. Prolonged bronchial obstruction

4. Curschman spirals are seen in

- a. Emphysema b. Bronchial asthma c. Bronchiectasis

5. "Lithman Sacks" endocarditis occur in

- a. Carcinoid syndrome b. Rheumatic carditis c. Old age and cachexia

6. Takayasu arteritis is characterized by

- a. Fibrinoid necrosis of small arteries b. Leucocytoclastic arteritis c. Granulomatous vasculitis

7. Which of the following is not implicated in hepatocellular carcinoma?

- a. Hepatitis B virus b. Hepatitis C virus c. Aflatoxin B

8. Kimmelstiel-Wilson lesion of kidney is seen in

- a. SLE b. Goodpasture syndrome c. Diabetes mellitus

9. In case of Barrett esophagus, the change seen is:

- a. Squamous metaplasia b. Squamous dysplasia c. Columnar dysplasia

10. Which of the following tumor is malignant tumor?

- a. Fibroadenoma b. Lipoma c. Hepatoma

11. "Orphan Annie" or ground glass nuclei are diagnostic features of

- a. Medullary carcinoma of thyroid b. Thyroid lymphoma c. Follicular carcinoma of thyroid

12. Which of the following tumor is uncommon in infancy and childhood

- a. Wilms tumor b. Ewing sarcoma c. Neuroblastoma

13. Commonest glioma is

- a. Oligodendroglioma b. Craniopharyngioma c. Medulloblastoma

14. Fibroadenoma of breast has following features EXCEPT
- a. Most common benign tumor
 - b. Appears in young women
 - c. Stromal cells are monoclonal
15. Grape like chorionic villi occurs in
- a. Choriocarcinoma
 - b. Hydatidiform mole
 - c. Invasive mole
16. Deposits of antigen-antibody complex on glomerular basement membrane is detected by
- a. Light microscopy
 - b. Dark ground microscopy
 - c. Polarizing microscopy

Q.2 Long Answer Question

- a. List the criteria for the diagnosis of hepatic syndrome and causes of hepatic drainage.
- b. Describe pathogenesis, lesions and laboratory investigations in viral hepatitis.

Q.3 Short Answer Question

- a. Gross and microscopic changes in Myocardial Infarction.
- b. Lung abscess.
- c. Difference between Crohn disease and Ulcerative colitis.
- d. Tabulate differences in CSF examination findings in pyogenic, tubercular and viral meningitis.

Q.4 Very Short Answer Question

- a. Alpha fetoprotein.
- b. Complications of atherosclerosis.
- c. Hashimoto Thyroiditis.
- d. Osteoclastoma.
- e. Teratoma.
- f. Cervical intraepithelial Neoplasia (CIN).
- g. Hypernephroma.
- h. Complications of cirrhosis of liver.
- i. Serpinemia.
- j. Difference between Typhoid and Tubercular ulcer of intestine.

Madhya Pradesh Medical Science University, Jabalpur

MBBS 2nd Professional Examination 2018

Paper Code:- 18BM0000100512

Subject: Pathology Paper -II

Instructions:

- 1) All questions are compulsory
- 2) Draw diagrams wherever necessary for Question no. 2, 3 and 4.
- 3) Answers of Questions and Sub questions must be written strictly according to the serial order of question paper. otherwise the question shall not be valued
- 4) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

Time : 2.30 Hours

Maximum Marks : 32

2 X 5 = 10

Q. 2. Long Answer Question

- a. Describe etio-pathogenesis of colorectal carcinoma.
- b. Laboratory diagnosis of Acute Myocardial Infarction.

4 X 3 = 12

Q3 Short Answer Question

- a. Sequelae of Hepatitis B virus infection
- b. Diagnostic criteria of Diabetes Mellitus
- c. Differentiate between Primary and secondary pulmonary tuberculosis
- d. Differentiate between benign and malignant ulcer of the stomach.

Q4 Very Short Answer Question

10X 1 =10

- a. Definition of Leukoplakia.
- b. Spread of carcinoma breast.
- c. Histopathological hallmark of Papillary carcinoma thyroid.
- d. Major risk factors for atherosclerosis- enumerate.
- e. Enumerate opportunistic infections in immuno-compromised host.
- f. Enumerate complications of portal hypertension.
- g. Enumerate types of Hodgkin's disease and their characteristic cell.
- h. Spread of cervical carcinoma.
- i. Enumerate causes of obstructive jaundice.
- j. Enumerate bacteria causing pyogenic meningitis.

Madhya Pradesh Medical Science University, Jabalpur
MBBS 2nd Professional Examination 2018
Paper Code:- 18BM0000100512
Subject- Pathology Paper -II

Instructions:

All questions are compulsory

- 1) MCQ question paper should be conducted and completed in first 30 min.
- 2) Fill (dark) the appropriate empty circle against the question number once only.
- 3) Use blue black ball point pen only.
- 4) Each MCQ carries half mark.
- 5) Students will not be allotted mark if he/she overwrites/ strikes or put white ink on the cross once marked on MCQ.

Maximum Marks : 8

Time : 30 Minutes

16 X ½ = 8

Q. 1

Total MCQs : 16

- 1 Lacunar cells are seen in Hodgkin's disease- type
 a. Lymphocyte predominance b. Mixed cellularity c. Nodular sclerosis d. Lymphocytic depletion.
- 2 A 15 years old male presented with low grade fever and cervical lymphadenopathy for last 2 months. Node were soft and matted. Lymph node biopsy most probably reveal
 a. Lymphoma b. Reactive hyperplasia c. Tuberculosis d. Suppurative lymphadenitis
- 3 Barrett's oesophagus is characterized by all except
 a. It affects lower oesophagus b. Caused by H. pylori c. Predisposition to adenocarcinoma d. Patient complaint of reflux
- 4 'Leather bottle stomach' results from which type of carcinoma stomach
 a. Ulcerative type b. Diffuse infiltration c. Polypoidal type d. Fungating type
- 5 What is excreted in urine in Carcinoid syndrome
 a. VMA b. 17- ketosteroids c. 5-HIAA d. Histamine.
- 6 What is false about Warthin's tumor
 a. It arises in Parotid gland b. Smokers have high risk c. The epithelial component is made up of oncocytes arranged in a papillary pattern d. These are malignant in nature.
- 7 Skip lesions of intestine are characteristic of
 a. Tuberculosis b. Adenocarcinoma c. Ulcerative colitis d. Crohn's disease
- 8 Alcoholic liver disease is characterized by all EXCEPT
 a. Mallory hyaline bodies b. Piecemeal necrosis c. Central vein sclerosis d. Fatty liver
- 9 In an epidemic of Hepatitis E maximum mortality is observed in
 a. Infants b. Adolescents c. Pregnant women d. Old persons
- 10 A 28 years male presented with diabetes mellitus, pigmentation of skin and hypogonadism. The likely diagnosis is
 a. Wilson's disease b. Alfa-1-antitrypsin deficiency c. Addison's disease d. Hemochromatosis
- 11 Which enzyme assay is most useful in alcoholic liver disease ?
 a. AST b. ALT c. CPK d. Gamma glutamyl transferase
- 12 Which virus is not transmitted parenterally
 a. Hepatitis B b. Hepatitis C c. Hepatitis D d. Hepatitis E
- 13 Earliest diagnosis of acute hepatitis B infection is made by presence of
 a. IgM anti-HBc in serum b. HBsAg in serum c. IgG anti-HBc in serum d. HBcAg in serum
- 14 Ghon's focus is present in
 a. Progressive tuberculosis b. miliary tuberculsis c. Primary tuberculosis d. Secondary tuberculosis
- 15 Nephrotic syndrome includes EXCEPT
 a. Generalized oedema b. Heavy proteinuria c. Microscopic hematuria d. hyperlipidemia
- 16 Which testicular tumor demonstrates lymphocytes in the stromal fibrous bands
 a. Seminoma b. Embryonal carcinoma c. Yolk sac tumor d. Choriocarcinoma

3. Write differences between :

2×5=10

(i) Crigler-Najjar Syndrome and Dubin-Johnson's Syndrome

(ii) Hypernephroma and Wilms tumor

4. Write short note on :

4×2½=10

(i) Teratomas

(ii) Medulloblastoma

(iii) Benign Prostatic Hypertrophy (BPH)

(iv) Infective Endocarditis

M-1207

**Second M. B. B. S. (Professional) Examination,
Sept.-Oct. 2017**

PATHOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

*Note : All questions are compulsory. Draw diagrams/
flow charts wherever necessary.*

1. Discuss granulomatous inflammation. 10

M-1208

Second M. B. B. S. (Professional) Examination,
Sept.-Oct. 2017

PATHOLOGY

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. Describe Etio-Pathogenesis, risk factors and morphology
in Atherosclerosis. 10
2. Describe Etio Pathogenesis, risk factors and morphological
findings in Bronchial Asthma. 10

3. Write differences between :

2×5=10

(i) Crigler-Najjar Syndrome and Dubin-Johnsons Syndrome

(ii) Hypernephroma and Wilms tumor

4. Write short note on :

4×2½=10

(i) Teratomas

(ii) Medulloblastoma

(iii) Benign Prostatic Hypertrophy (BPH)

(iv) Infective Endocarditis

M-1208

**Second M. B. B. S. (Professional) Examination,
Feb.-March 2017**

PATHOLOGY

Paper : Second

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. Discuss Pathophysiology of atherosclerosis. Write down its complication.

10

M-1208

PTO

2. Describe pathophysiology of Jandice. Classify Hereditary hyperbilirubinemias. 10

2×5=10

3. Write the difference between :

(a) Acute pancreatitis a chronic pancreatitis

(b) Acute pyelonephritis and chronic phelonephritis

4. Write short notes on : 4×2½=10

(a) Scmmoma

(b) Minimal change disease

(c) Emphysema

(d) Hepatitis-B

M-1207

**Second M. B. B. S. (Professional) Examination,
Feb.-March 2017**

PATHOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

- 1. Define and classify Anemia. Describe pathogenesis and laboratory diagnosis of iron deficiency anemia. 10**

M-1207

PTO

2. Write short notes on :

- (a) Apoptosis
- (b) Chemical Mediators of Inflammation
- (c) Septic shock
- (d) Sex chromosome disorders
- (e) Viral oncogenesis
- (f) Amyloidosis

M-1207

**Second M. B. B. S. (Professional) Examination,
Sep.-Oct. 2015**

PATHOLOGY

Paper : First

Time Allowed : Three hours

Maximum Marks : 40

Minimum Pass Marks : 20

Note : All questions are compulsory.

1. Write difference between :

2×4=8

(a) Benign and Malignant tumor

(b) Kwashorkor and Marasmus

M-1207

PTO

- (c) Diabetes mellitus and Diabetes insipidus
- (d) Hypertrophy and Hyperplasia

2. Describe the major event of Acute Inflammation with notes on defective Leukocyte functions.

8

3. Write short notes on : (any four)

2×4=8

- (a) Metaplasia
- (b) Eosinophilia
- (c) Tumor Supressor Gene
- (d) Phagocytosis
- (e) Granuloma

4. Draw diagram of :

2×4=8

- (a) Basal Cell Carcinoma
- (b) Megaloblastic Anaemia
- (c) Peripheral Blood in Malaria
- (d) Reed-Stemberg Cells

5. Only short answer on :

1×8=8

- (a) Blood component prepared in blood bank.
- (b) What is Reticuloocytes? Mention two causes of Reticulocytosis.

- (c) Coombs Test
- (d) Types of Necrosis
- (e) Significance of Cast in Urine
- (f) Mast Cell
- (g) Keton bodies
- (h) Microscopic picture of Appendicitis