МИНИСТЕРСТВО ОБРАЗОВАНИЯ И НАУКИ

КЫРГЫЗСКОЙ РЕСПУБЛИКИ

ОШСКИЙ ГОСУДАРСТВЕННЫЙ УНИВЕРСИТЕТ

МЕЖДУНАРОДНЫЙ МЕДИЦИНСКИЙ ФАКУЛЬТЕТ

Кафедра клинических дисциплин 3

РАССМОТРЕНО
на заседании кафедры КД 3
Прот. №___от_____2024г.
Зав.каф., *к.м.н., доцент*
Б.О.Абдурахманов _____

УТВЕРЖДАЮ _____
Председатель УМС ММФ,
Базиева А.М.
"____"_____2024г.

ФОНД ТЕСТОВЫХ ЗАДАНИЙ

Для итогового контроля по дисциплине

"Радиология и радиотерапия"

На 2023-2024 учебный год

Направление: 560001-лечебное дело (GM)

Курс– 2, семестр- 4

Наименование дисциплины	Всего	Кредит	Аудиторные занятия (30)		СРС
			Лекции	Практические	
Предмет	90	3	18	27	45
Количество тестовых вопросов	300				

Составители: Абдурахманов Б.О.. / _____/

Кадыркулова Дж.У. /_____/

Эралиев Т.К. /_____/

Апсаматов Р.Р. /_____/

Эксперт тестолог: / _____/

Г.Ош. 2024г.

Выписка из протокола №3

заседания кафедры "Клинических дисциплин 3" международного медицинского

факультета Ошского государственного университета

От "1" 09. 2023 г.

Время: 15:00

Место: ауд. 407 ММФ

ПОВЕСТКА ДНЯ:

Утверждение экзаменационных вопросов по дисциплинам кафедры за IV семестр 2023-2024 учебного года.

Слушали: зав. кафедрой, к.м.н .Абдурахманова Б.О., который ознакомил присутствующих количеством, структурой и содержанием экзаменационных тестовых вопросов за осенний семестр текущего учебного года.

Подробно остановился на каждом предмете по каждой специальности отдельно:

Об утверждении экзаменационных тестов по медицинской радиологии и радиотерапии .

Сетка часов по учебному плану:

Дисциплина	Всего час	Количество часов			СРС	Отчетность
		Аудиторные занятия				
		Ауд.зан.	Лекция	Практ.		
Медицинская радиология и радиотерапия						
IV семестр	90	3кр	18	27	45	Экзамен
Количество экзаменационных тестов			300			

Выступили: к.м.н Абдурахманов Б.О. и преподаватель по медицинской радиолгоии и радиотерапии Кадыркулова Дж которые единогласно поддержали количество, структуру и содержание экзаменационных тестовых вопросов по предметам кафедры.

Решили: Утвердить экзаменационные тестовые вопросы по предметам кафедры за весенний семестр 2023-2024 учебного года. Утвердить обращение кафедры на имя УМС факультета.

Постановили:

1. Принять к сведению выступление зав. кафедрой, к.м.н., Абдурахманов Б.О.;
2. Рекомендовать обращение кафедры на рассмотрение УМС факультета;
3. Ходатайствовать перед УМС факультета об утверждении экзаменационных тестовых вопросов по предметам кафедры за весенний семестр 2023-2024 учебного года;

Председатель: Абдурахманов Б.О. /_____

Секретарь: Нурмамат кызы Н /

ЭКСПЕРТНОЕ ЗАКЛЮЧЕНИЕ БАНКА ТЕСТОВЫХ ЗАДАНИЙ

кафедры «Клинических дисциплин 3.»

от «___» _____ 202 _ г.

на разработанные тестовые задания по дисциплине
«Радиология и радиотерапия»
наименование дисциплины

к.м.н. Абдурахманов Б.О.

/указать должность, ученую степень, Ф.И.О. автора (авторов)/

Тестовые задания проверены членом экспертной группы тестологов

Барбашов И.Ю.

/указать должность, ученую степень, Ф.И.О./

Направления проведения оценки структуры и содержания тестового задания

№	Направление экспертизы	Оценка экспертов	
1	Соответствие задания программам и стандартам обучения	Соответствует ✓	Не соответствует
2	Включение в тесты только наиболее важных, базовых знаний	Соответствует ✓	Не соответствует
3	Ясность смысла тестовой ситуации и представления ТЗ	ясно ✓	Не ясно
4	Правильность ответа на вопрос ТЗ	Соответствует ✓	Не соответствует
5	Значимость содержания тестового задания (0-сомнительный, 1-допустимый, 2-важный, 3-существенный)	3 балл(ов)	
6	Соответствие необходимое число заданий по каждому разделу дисциплины исходя из его важности и числа часов, отведенных на его изучение в программе.	Соответствует ✓	Не соответствует

Членом экспертной группы выявлены следующие недостатки в тестовом задании не выявлены недостатки ТЗ.

Членом экспертной группы внесены следующие исправления (корректировки) в тестовое задание не внесены ТЗ.

На основании представления тестовых заданий автором (авторами) и проведенной проверки сделала следующее заключение:

1) Содержание тестовых заданий **соответствует (не соответствует)** содержанию УМКД *(нужное подчеркнуть)*

2) Представленные тестовые задания в следующем объеме 300 вопросов: **соответствуют (не соответствуют)** требованиям, предъявляемым к количеству, уровням сложности и формам заданий для составления тестов. *(нужное подчеркнуть)*

Тестолог Барбашов И.Ю. _____ / _____ /
подпись дата

Ознакомлен зав. кафедрой Абдурахманов Б.О. _____ / _____ /
подпись дата

Multiple Choice Questions
Of Radiology and Imaging

1.Source of gamma rays is :
a. Radium
b. Xenon
e. Barium

2.Dye used for bronchography was
a. Iapanoic acid
c. Sodium diazotuale
d. Cobalt
e. Cesium
b.
c. Meglumine Iodothalamate
d. Dianosil
e. Barium sulfate

3.Enteroclysis is syninymous with
a. Hypotonic duodunography
b. Ba meal follow through
c. Small bowel enema
d. All of the above
e. Irrigoscopy

4.Ultrasound waves are produced by means of a crystal
a. Ferromagnetic
b. Piezoelectric
c. Ferroelectric
d. Paramagnetic
e. Lemba waves

5.NMR uses gyromagnetic property of
a. Electron
b. Proton
c. Positron
d. Neutron
e. Nitron

6.Increased density on x-ray film denotes
a. A black shadow
b. White shadow
c. Increased radiolucency
d. None of the above
e. Round shadow

7.The optimum distance used in radiographic exam is
a. 90-100cm
b. 150-160cm
c. 180-190cm
d. 200-210cm
e. 80 120cm

8.Most common cause of punched out lesion in phalanges is :
a. Enchondroma
b. Chondrosarcoma
c. Aneurysmal bone cyst
d. Multeple myeloma
e. Sarcoma

9.Amongst the following phases of iodinated contrast medium enhancement,CT scan makes use of
a. Vascular enhancement
b. Tissue opacification
c. Opacification of urinary tract
d. Any of the above
e. Tissue clarification

10.Best investigation in acute cholecystitis is
a. Technetium scan
b. US
c. Plain x-ray abd
d. CT
e. Endoscopy

11.Micturating cystourethrogram is not used in
a. Renal tumours
b. Hydronephrosis
c. Urinary obstrutor
d. Tecurrent UTI
e. Kidney cyst

12.Salt of barium used in Ba studies is
a. Ba carbonate
b. Ba sulphate
c. Ba sulphide
d. Ba chloride
e. Ba gluconate

13.Maximum radiation exposures is caused by
a. Sonography
b. CT scan
c. Chest x-ray
d. MRI
e. Fluorography

14.Pipe stem colon is seen in :
a. Ulcerative colitis
b. Carcinoma colon
c. Crohn disease
d. Whipple disease
e. All of the above

15.For congital CNS anomalies,the investigation of choice is
a. Plain x-ray
b. USG
c. MR
d. None

e. CT

16.The substance most widely used in medical ultrasound is Zirconate titanate

a. Silver
b. Sodium
c. Magnesium
d. Lead
e. Ba sulphate

17.Ultrasound is not useful in

a. Neonatal patients
b. Obstetric patients
c. Obese patients
d. Adult patients
e. Elderly

18.Structures seen white on US image are

a. Calculi
b. Air
c. Fat
d. All
e. Stones

19.Xeroraiography is mainly used for-cancer

a. Lung
b. Breast
c. Thyroid
d. Stomach
e. Esophagus

20.MRI should be used with caution in patients with

a. Acute stroke
b. Brainstem lesions
c. Demyelinating dz.
d. Cardiac pacemaker
e. Encephalopathy

21. Champagne Glass pelvis is seen in :

a. Achondroplasia
b. Cretinism
c. Down syndrome
d. Congenetial dislocation of hip
e. Osteoporosis

22.Pneumothorax is best demonstrated by taking a radiograph of the patient in

a. Inspiration
b. Expiration
c. Full inspiration
d. Prone
e. Breathe

23.Hydatid cyst of the lung in a chest x-ray

a. is seen as a calcified ring shadow
b. shows speckled calcification

c. will not calcify
d. a and b are correct
e. Round shadow

24.Water lily appearance in chest x-ray is suggestive of
a. Bronchiectasts
b. Bronchopleural fistula
c. Hydatid cyst
d. Sequestration cyst of lung
e. Pleuritis

25.Popcorn calcification is seen in
a. Pulmonary hamartoma
b. Pulmonary hemorrhage
c. Pulmonary teratoma
d. Pulmonary embolism
e. Pulmonary echinococcus

26.Cause of homogenous opacity on a chest x-ray is all except
a. Pleural effusion
b. Diaphragmatic hernia
c. Massive consolidation
d. Emphysema
e. Pleuritis

27.The most common cause of spontaneous pneumothorax is
a. TB
b. Ruptured subpleural blebs
c. Bronchogenic carcinoma
d. Bronchial adenoma
e. Pleural effusion

28.Characteristic of benign lesion of lung in chest x-ray is
a. Size＞5cm in diameter
b. Cavitation
c. Peripheral location
d. (d)Concentric dense calcification
e. Round shadow syndrome

29.Multiple translucent cysts on x-ray are found in the chest in all,except
a. congenital diaphragmatic hernia
b. congenital adenomatoid malformation
c. lobar agenesis
d. bilateral multiple cysts
e. Lung tissue necrosis

30.Best method for bronchiectasis is
a. X-ray
b. Bronchography
c. MRI
d. HRCT
e. CT

31.Dye used for bronchography is

a. Iopanoic acid
b. Sodium diatizoate
c. Meglumine iodothalamate
d. Dianosil
e. Ba sulphate

32.Egg shell calcification is characteristically seen in
a. Silicosis
b. Tuberculosis
c. Aneurysm
d. Histoplasmosis
e. Lungs cancer

33.Minimal pleural effusion is best detected by x-ray view
a. AP
b. PA
c. Lateral
d. Lateral decubitus with horizontal beam
e. Front

34.Obliteration of left heart border in PA chest x-ray is suggestive of
a. lingular pathology
b. left upper lobe lesion
c. left hilar lyph nodes
d. left lower lobe lesion
e. Right lower lobe lesion

35.The imaging modality for breast,in a patient of 20 years
a. Mammography
b. Ultrasound
c. MRI
d. Thermography
e. CT

36.The advantage of ultrasound
a. Economical
b. Can differentiate cystic vs solid
c. No radiation
d. All of the above
e. Availability

37.Following are the radiological changes in tetralogy of fallot, except
a. Prominent cardiac apex
b. Cardiomegaly
c. Prominent pulmonary trunk
d. Normal right atrial shadow
e. Heart hypertension

38.Isotope used in myocardial perfusion scan is
a. Technetium
b. Thallium
c. Stannous pyrophosphate
d. Gallium
e. Oxygenous

39.Left atrial hypertrophy is seen radiologically as
a. Double cardiac silhouette
b. Left bronchial elevation
c. Straightening of left heart border
d. All of the above
e. Enlargement of the right border of the heart

40.Left to right shunt is usually demonstrated in chest x-ray by
a. Increase in pulmonary venous markings
b. Increase in size of pulmonary arteries
c. Increase in no.of pulmonary arteries
d. Increase in pulmonary vascular markings
e. Increase alveolar pulmonary

41.Coiled spring appearance on barium enema is seen in :
a. Carcinoma colon
b. Sigmoid volvulus
c. Intussusception
d. Ileal atresia
e. Crohn disease

42.The heart can be shifted to the left on the PA radiograph with
a. Sternal compression
b. VSD
c. Complete situs inversus
d. Marfan's syndrome
e. Lower lung cyst

43.One of the following is a non-invasive investigations in cardiology
a. Angiocardiography
b. Cardiac catheterisation
c. Echocardiogram
d. Diagnostic pericardial effusion aspiration
e. Doppler sonography

44.Money bag appearance is seen in
a. Pericardial effusion
b. Pneumothrax
c. Pulmonary embolism
d. Right heart failure
e. Pleuritis

45.Boot shaped heart is seen in
a. Total anomalous pulmonary venous connection
b. Tetralogy of fallot
c. Ebstein's anomaly
d. All of the above
e. Congenital heart defect

46. Pleural calcification is seen in :
a. Asbestosis
b. Mesothelioma
c. Pulmonary infarction

d. Anthracosis
e. Tetrado fallot

47.Frequency of sound waves used for transabdominal ultrasonography is
a. 2.5-3.5MHz
b. 3.5-5.0MHz
c. 5.0-7.5MHz
d. 7.5-10.0MHz
e. 2.5 5.0 MHz

48.Chronic Budd-Chiary syndrome is usually associated with
a. Hypertrophied caudate lobe
b. Right lobe hypertrophy
c. Caudate lobe atrophy
d. Left lobe hypertrophy
e. Right lobe atrophy

49.Single best answer:which of the following etiologic factors are associated with Budd-Chiary syndrome
a. Hypercogulable state
b. Liver malignancy
c. Congenital caval webs
d. Idiopathic
e. All of the above

50.Which statement is not true regarding hepatic amoebic abscess
a. Male predominant disorder
b. Usually multipe lesions seen by imaging
c. Liver involvement more common than lung or brain
d. Infection spreads to liver via mesenteric viens
e. Elderly predominant disorder

51.Folw direction in portal vein may be determined by
a. Real time ultrasound
b. Enhanced CT
c. Spin Echo MRI sequence
d. Arteriography
e. Doppler sonography

52.Which of the following is not true regarding pyogentic liver abscess
a. Solitary in majority of cases
b. May following bowel surgery
c. Usually from gram negative or aerobic bacteria
d. Most common between 40 and 60 years old
e. Elderly predominant disorder

53.Which of the following are not typically considered hypervascular metastases to the liver
a. Pancreatic adenocarchinoma
b. Renal cell carcinoma
c. Melanoma
d. Choriocarcinoma
e. Liver cyst

54.Which of the following is ture concerning imaging of the hepatocellular carcinoma

a. There is increased uptake on Galliun scans
b. Hepatocellular carcinoma is hyperintense on T2W MRI scan
c. HCC is almost always hyperechoic on ultrasound
d. HCC tends to enhance during portal venous phase of enhancement
e. All of the above

55.PTS is helpful in the diagnosis of
a. Cancer of the liver
b. Level of obstruction in the biliary tree
c. Pancreatitis
d. Pseudo pancreatic cyst
e. Echinococcosis of the liver

56.Most useful and safest diagnostic method for amoebic liver abscess is
a. Needle aspiration
b. Chemotherapeutic trial
c. Ultrasound
d. Endoscopy
e. MRI

57.A 40 yrs male presents with a painless cystic liver enlargement of four year duration without fever or jaundice.On ultrasound there is evidence of a multiseptated cyst with floating membrancs.The most likely diagnosis is
a. Amoebic liver abscess
b. Hepatoma
c. Hydatid cyst of liver
d. Choledochal cyst
e. Pseudo pancreatic cyst

58.Following are complications of hydatid in the liver, except
a. Jaundice
b. Suppuration
c. Cirrhosis
d. Rupture
e. Hepatitis

59.Ultrasound is not useful in
a. CBD stone at the diatal end of the CBS
b. Breast cyst
c. Ascites
d. Full bladder
e. Cirrhosis of the liver

60.Best investigation for diagnosis of ampullary gallstone with obstructive jaundice is
a. Intravenous
b. OCG
c. PTC
d. ERCP
e. MRI

61.Investigation of choice in a case of obstructive jaundice is
a. Ultrasonography
b. ERCP
c. CT scan

d. Plain x-ray
e. MRI

62.Following are causes of gas in the biliary tree,except
a. Gallstone fistula
b. Laxed sphincter
c. Emphysematous cholecystitis
d. Pert ampullary carcinoma of pancreas
e. Pancreatitis

63.A patient with obstructive jaundice and PT-30 minutes,which investigation is contraindicated
a. PTC
b. X-ray
c. CT scan
d. Ultrasound
e. MRI

64.An ultrasound examination shows dilated intrahepatic biliary channels with a small gall bladder.The most likely diagnosis is
a. Gall bladder stone
b. Pancreatic calculus
c. Common bile duct stone
d. Head of pancreas
e. Gepatitis

65.The method of choice in preliminary evaluation of biliary obstuction with clinical jaundice is
a. OCG
b. ERCP
c. CT scan
d. Ultrasonography
e. Intravenous cholangiography

66.The incidence of gallstones is increased in
a. Diabetes mellitus
b. Ischemic heart disease
c. Pregnancy
d. Myelofibrosis
e. All of the above

67.Emphysematous cholecystitis is found mainly in patients with
a. Gout
b. Stone impacted in cystic duct
c. Poorly controlled diabetes
d. Arteriosclerotic disease
e. Pancreatic calculus

68.Which of the following is not associated with cholelithiasis
a. Sickle cell disease
b. Inflammatory bowel disease
c. Obesity
d. Colonic neoplastic disease
e. Intestinal obstruction

69.Which of the following statements about cholelithiasis are false

a. Most calculi of the gall bladder are invisible on plain film
b. Pigmented gallstones are most likely to be calcified than cholesterol stones
c. Pigmented stomed are more common than cholesterol stones
d. Most gall stones are visible on CT
e. Most gall stones are visible on US

70.Which of the following is false concerning cholangiocarcinoma
a. Previous thorotrast administration may prediapose
b. More common in females
c. Graual onset of painless jaundice is a typical presentation
d. Adenocarcinoma is the most common cell type
e. More common in male

71.Which is not common ultrasound sign of acute cholecystitis
a. Halo sign
b. Pericholecystic fluid
c. Gall bladder distension
d. Air in the gall bladder
e. Thickening of liver tissue

72.Which statement is true ragarding acute cholecystitis
a. Peak age is <40 years
b. Empyema of gallbladder in a complication
c. More common in males
d. Gall bladder is visualized with hepatobiliary scintigraphy
e. All of the above

73.The investigation of choice to diagnose annular pancrease is
a. US
b. CT
c. ERCP
d. PTC
e. MRI

74.Inverted 3 sign of frostberg is seen in all except
a. Acute pancreatitis
b. Pancreatic carcinoma
c. Pseudocyst panereas
d. Duodenal carcinoma
e. Liver carcinoma

75.Double duct sign is seen in
a. Acute pancreatitis
b. Chronic pancreatitis
c. Carcinoma pancreas
d. Pancreatic trauma
e. Pseudocyst pancreas

76.Invested 3 or epsilon appearance of duodenal loop in lesions of head of pancreas is known as
a. Frostberg' sign
b. Pseudo kidney sign
c. Uleus callorum
d. Handek's niche

e. Kidney Stone

77.Absence of gas on an abdominal radiograph is sign of
a. Psoas abscess
b. Chest infection
c. Acute pancreatitis
d. Mid gut volvolus
e. Chronic pancreatitis

78.In cystic fibrosis
a. Majority of the patients present with meconium ileus
b. A micro gall bladder is often present
c. Pancreatic calcification presents in 50% of patients
d. Rectal prolapse occurs
e. Duodenal carcinoma

79.Barium meal picture in a pseudocyst of pancreas shows
a. Filling defect in stomach
b. A ball like radiopaque shadow in the abdomen
c. Stomach displaces forwards
d. Contracted stomach
e. Stomach cancer

80.Organ that appears most dense on a CT noncontrast scan is
a. Pancreas
b. Kidney
c. Liver
d. Gall bladder
e. Stomach

81.Pathgnomic x-ray feature of chronic pancreatitis is
a. Air under diaphragm
b. Sentinel loop
c. Widening of C loop of duodenum
d. Calcification of pancreas
E Water under diaphragm

82.Radiological features of acute pancreatitis include all except
a. Reverse figure 3 sign
b. Left pleural effusion
c. Local or generalised a dynamic ileus
d. Swelling confined to pancreatic head
e. Right pleural effusiion

83.Calcification in the pancreas may occur in
a. Hypoparathyroidism
b. Mumps
c. Malnutrition
d. Filariasis
e. Adiposity

84.Chain of lakes appearance is seen in
a. Chronic cholecystitis
b. Chronic pancreatitis

c. Acute appendicitis
d. Ulcerative colitis
e. Acute pancreatitis

85.Commonest cause of calcified splenic cyst is
a. Parasitic infestation
b. Subcapsular haematoma
c. Bacterial infection
d. Splenic infarct
e. Liver cyst

86.Following are associated with focal abscent activity on splenic scintigraphy except
a. Cyanotic heart disease
b. Trauma
c. Sarciodosis
d. Thalassemia
e. All of the above

87.In a patient with infiltration of spleen by lymphoma or leukemia the spleen scan shows
a. Normal splenic sequestration
b. Increased splenic sequestration
c. Decreased splenic sequestration
d. None of the above
e. Thickening of liver tissue

88.Which of the following shows curvilinear splenic calcification
a. Hydatid cyst
b. Brucellosis
c. Tuberculosis
d. Sickle cell anemia
e. Rheumatism

89.Radio pharmaceutical used for scanning of spleen in
a. 99mTc-DTPA
b. 99mTc-sulphur colloid
c. Cr labelled RBC
d. Gallium citrate
e. None of the above

90.Diliated jejunal loops on plain x-ray abdomen are identified by
a. Haustrations
b. Valvulae conniventes
c. Characterless bowel
d. Air fluid level
e. Appendicitis

91.X-ray findings suggestive of achalasia cardiac are all,except
a. Megaesophagus
b. Toruous esophagus
c. Fluid levels in esophagus
d. Diverticulum in esophagus
e. Air fluid level

92.Minimal ascites can be best detected by

d. Zollinger-Ellison syndrome
e. Gastroudenitis

108.Not true about necrotising enterocolitis
a. Is first detected by gas in the bowel wall on plain radiography
b. Occurs after umbilical catheterization
c. Is associated with respiratory distress syndrome
d. Is usually caused by viruses
e. After hepatitis

109.In cystic fibrosis
a. Majority of the patient presents with meconium ileus
b. Scrotal calcification can on a radiograph of neonate
c. Pancreatic calcification is present in 50%
d. Rectal prolapse occurs
e. Small bowel atresia

110.Ileum in barium looks like
a. Characteristic
b. Irregular dilation
c. Characterless
d. None
e. Obstruction

111.Colon is identified on x-ray by
a. Haustra
b. Valva conniventis
c. Characterless
d. None
e. Irregular dilation

112.Thumb printing sign on barium meal is seen in
a. Diverticulitis
b. Ischaemic colitis
c. Ulcerative colitis
d. Carcinoma colon
e. Characterless

113.When an individual is frightened or emotionally disturbed the stomach tend to be
a. Not affected
b. Contracts irregularity
c. Hypertonic
d. Hypotonic
e. All of the above

114.Congenital hypertrophic pyloric stenosis is best diagnosed by
a. Appendix calculi
b. Widening of peritoneal fat line
c. Mass indenting the caecum
d. Gas in appendix
e. Carcinoma colon

115.String sign is seen in
a. Crohn's disease

b. Left side is more commonly affected than right
c. Males are more commonly affected
d. Occurs more commonly in posterior direction
e. Osteogenesis imperfecta

162.Commonest site of fracture in osteogenesis imperfecta is
a. Epiphysis
b. Metaphysis
c. Diaphysis
d. All of the above
e. Flat bones

163.Congenital pseudoarthrosis is seen in
a. Tibia fibula
b. Femur
c. Femur tibia
d. Hip joint
e. Hip bone

164.Spnengel's deformity of the scapula is
a. Undescended/elevated scapula
b. Undescended neck of scapula
c. Exostosis scapula
d. None of the above
e. Prolapse of the neck scapula

165.Trident hand is seen in
a. Mucopolysaccharidosis
b. Achondroplasia
c. Diaphyseal achalasia
d. Chondrodysplasia
e. None of the above

166.In which of the following syndrome is polydactyiy common
a. Ellis-von Creveld syndrome
b. TAR syndrome
c. Fing's syndrome
d. Rubinstein-Taybi syndrome
e. All of the above

167.Marble bone appearance is characteristic of
a. Osteopetrosis
b. Osteogenesis imperfecta
c. Fluorosis
d. Achondroplasia
e. Osteoporosis

168.Tram track appearance on skull radiographs is characteristic of
a. Tuberous sclerosis
b. Sturge-Weber syndrome
c. Meningioma
d. Craniopharyngioma
e. Osteopetrosis

169.Punched out lytic lesion in the skull are charatersitic of
a. Multiple myeloma
b. Hyperparathyroidism
c. Metastases
d. None of the above
e. Meningioma

170.Feature of meningioma include all except
a. Hyperostosis of the adjacent bones
b. Hyperdense tumour on noncontrast CT
c. No enhancement on postcontrast images
d. Cerebral convexities are the common sites
e. Hyperparathyroidism

171.During carotid angiography,the vessels catheterized include
a. Bilater internal and external caroid
b. Bilater internal carotid and one vertebral artery
c. Bilater external carotid and one vertebral artery
d. Bilater external and internal carotid and vertebral artery
e. None of the above

172.Sutural diastasis is seen in
a. Raised intracranial tension in children
b. Raised intracranial tension in adults
c. Both of the above
d. None of the above
e. Raised extracranial tension in adults

173.All are features of acromegaly except
a. Obtuse mandibular angle and prognathism
b. Enlarged sella an sinuses
c. Acrosteolysis
d. Delayed osteoarthritis
e. Heredity

174.All are true about intracranial hematomas except
a. Acute hematoma appear hyperdense on CT
b. Extradural hematoma appear as a lenticular shaped extra-axial collection
c. Acute subdural hemorrhage appears as hyperdensity in the sulcal spaces and basal cisterns
d. The commonest site for hypertensive bleed is basal ganglia
e. Acute hematoma appear hyperdense on MRI

175.On FLAIR images,CSF appears
a. Hyperintense to the gray matter
b. Isointense to the gray matter
c. Hypointense to the gray matter
d. None of the above
e. The commonest site for hypertensive bleed is basal ganglia

176.Modality of choice for detecting hyperacute inflarct
a. Noncontrast CT
b. Constrast enhanced CT
c. Constrast enhanced MR
d. Diffusion MR

e. X ray

177.Modality of choice for diagnosing acute subarachnoid hemorrhage
a. Noncontrast Ct
b. Constrast enhanced CT
c. Constrast enhanced MR
d. Diffusion MR
e. X ray

178. Commonly used contrast media in myelography
a. Myodil
b. Urografin
c. Biligrafin
d. Iohexol
e. None of the above

179. Investigation of choice for multiple sclerosis
a. CT
b. MR
c. Angiography
d. Myelography
e. US

180.Bracket shaped calcification on skull radiograph is characteristic of
a. Callosal lipoma
b. Craniopharyngioma
c. Meningioma
d. Glioma
e. Hemangioma

181.Commonest cause of physiological intracranial calcification
a. Lens calcification
b. Pineal calcification
c. Falcine calcification
d. Tumoural calcification
e. Hypertension

182.Which of the following paranasal sinus is not present at birth
a. Frontal
b. Spheonid
c. Maxillary
d. Ethmoid
e. Sinusitis

183.Commonest cause of acute of acute sinusitis is
a. Dental inflections
b. Nasal tumors
c. Acute rhinitis
d. Swimming
e. Ethmoid

184.Three statements ragarding radiological finding of ameloblastoma is
a. Multilocular lesion
b. Causes marked expansion in axial plane

d. Atomic mass
e. Celiac trunk

200. Which of the following statement is true?
a. By reducing KVP by 50% radiation dose is reduced to half
b. In pediatric patients dose should
be reduced
c. CT dose index is not useful for control exposure in multislice CT
d. kV has no control over CT dose index
e.Bone algorithm for image recon-struction

201. Investigation of choice in parathyroid pathology is:
a. CT scan
b. Gallium scan
c. Thallium scan
d. Tc-thallium subtraction scan
e. Entire organ

202. Which artery is dissected most commonly following arteriography by femoral route?
a. Celiac trunk
b. Superior mesenteric artery
c. Inferior mesenteric artery
d. Gastroduodenal artery
e. Vasa previa

203. How much area is covered by spiral CT in 30 seconds?
a. Entire organ
b. Entire abdomen
c. Entire trunk
d. Whole body

204. In CT scan, Hounsfield units depends on:
a. Electron density
b. Mass density
c. Effective atomic number
d. Linear attenuation coefficient

205. X-ray view of choice for lumbar spondylosis is/are:
a. PA view
b. PA view
c. Lateral view
d. Left oblique view
e. Right oblique view

206. High resolution CT of the lung is a specialized CT technique for greater detail of lung parenchyma and it utilizes:
a. Special lung filters
b. Thick collimation
c. Bone algorithm for image recon-struction
d. Large filed of view
e. Pleural effusion

207. Which of the following is non-ionising radiation?
a. X-ray
b. b-rays
c. a-rays
d. Microwave
e. g-rays

208. PET stands for:
a. Positive electron tomography
b. Proton-electron therapy
c. Positron emission tomography
d. Photon emmitting tomography
e.PET scan

209. What modification is needed for proper radiographic image in a heavy bony built person?
a. ↑ ed ma
b. ↑ kvp
c. ↑ ed exposure time
d. ↑ ed developing time
e. ↑ Chromosomal analysis

210. Maximum radiation exposure occurs in:
a. Bone scan
b. X-ray
c. MRI
d. CT scan
e. USG

211. USG is definitive investigation of:
a. Vasa previa
b. Abruption placenta
c. Placenta previa
d. Imperforate hymen
e. Change in attenuation

212. Investigation of choice in whole body imaging in metastasis is:
a. Magnetic resonance imaging
b. Angiography
c. Venography
d. CT scan
e. USG

213. Gyromagnetic property of proton is seen in:
a. MRI
b. CT
c. PET scan
d. USG
e. Angiography

214. Most reliable test for spinal tuberculosis:
a. Raised ESR
b. PPD skin test

c. CT guided biop…
d. USG
e. Angiography

215. Doppler effect is due to:
a. Change in frequency in relation to the movement of source or observer
b. Change in attenuation
c. Change in absorption
d. Change in reverberation
e. Change in position

216. Diagnosis of pulmonary embolism is primarily made by:
a. Multidetector CT contrast
b. Angiography
c. Ventilation perfusion scan
d. CXR
e. USG

217. Alpha particle is similar to:
a. Electron
b. Proton
c. Neutron
d. Helium nucleus
e. Positron

218. Neural tube defect is best detected by:
a. USG
b. Chromosomal analysis
c. Amniocentesis
d. Placentography
e. Plain X-ray

219. Radiation produced by nuclear decay/disintegration:
a. **Gamma rays**
b. X-rays
c. Plain X-ray
d. Alpha rays
e. Cosmic rays

220. Contrast used in CT:
a. Gadolinium
b. Technitium
c. Iodine
d. Chromium
e. barium

221. Investigation of choice to see gall bladder:
a. CT
b. USG
c. Plain X-ray
d. Oral cholecystogram
e. Plain X-ray

222. Radiocontrast is contraindicated in all except:

c. Produced when patient moves while taking the shoot
d. Any of the above
e. All of the above

238. Decubitus view is useful in diagnosing:
a. Pleural effusion without dependent hemithorax
b. Pleural effusion with dependent hemithorax
c. Pericardial effusion
d. Middle lobe consolidation
e. Pair production occur for low energy

239. X-rays were discovered by:
a. Godfrey Hounsfield
b. Roentgen
c. Coulomb
d. Sievert
e. All of the above

240. True about electromagnetic radiations are all except:
a. Pair production occur for low energy
b. Infrared is an EM radiation
c. Compton scattering occur for intermediate energy
d. X-ray is EM radiation
e. Diffusion weighted MRI

241. Earliest diagnosis of cerbral infarct can be done by:
a. NCCT
b. CECT
c. Diffusion weighted MRI
d. FLAIR MRI
e. CT angiography

242. Best investigation for diagnosing abdominal aortic aneurysm is:
a. USG
b. CT angiography
c. Classical radiography
d. Noncontrast CT scan
e. Diffusion weighted MRI

243. Fluorescein angiography is used to examine:
a. Ciliary vasculature
b. Retinal vasculature
c. Corneal vasculature
d. Conjunctival vasculature
e. Collateral vasculature

244. Hounsfiled unit of fat ranges from:
a. 1 to 20
b. 100 to1000
c. –10 to –1000
d. 100 to 300
e. 200 to 500

245. Ultrasonogram is the primary modality of choice in obstetrics and in surgery. Frequency of the

b. ERCP
c. CT scan
d. Angiography
e. X-ray

300. Honeycomb appearance on x-ray is seen in all except:

a. Rheumatoid arthritis
b. Tuberous sclerosis
c. Histiocytosis X
d. Wegeners granylomatosis