INSTRUCTIONS FOR CANDIDATES

ANSWERING EXTENDED MATCHING QUESTIONS (PAPER II)

Each of the extended Matching Questions (EMQ) in the paper consists of a theme, a lead-in statement, an option list ranging from 10 – 15 options followed by a set of clinical situations or questions which will range from three to five.

With each option list there are usually three to five clinical situations called ‘questions’. You have to select the most appropriate answer for each question by shading the appropriate box. An option may be selected as an answer for one question or more than one question related to that lead-in.

The attached Response Sheet has boxes for each question in one row:

1. If you are satisfied that the answer is True, you should shade the appropriate box with a soft pencil.
2. If you are not sure of the answer, and shade the box according to your guess, no negative mark is given, if the answer is incorrect.

To gain full marks single best item must be correctly identified as True. A question left unshaded or answered incorrectly will be counted as zero, which will however, not affect the score in any direction.

An optical scanner connected to a computer will grade the response sheet on which you mark your answers. The optical scanner is designed to record boxes filled with properly and of sufficient darkness. This is the reason you have been provided special pencils. If you have to change your response, please make sure that the previous shading is completely erased, failing which it will be counted as if you have filled both the boxes.

It is important that you shade the boxes properly and remain within the box. It is also important that the shading of the boxes is dark, so that the scanner can pick them. If you erase, please do it completely to prevent the scanner, recording it as an entry.

Example on how the boxes are arranged, how they are filled and how the questions are shaded are given below:

Continued...
THEME: ANEMIA- DIFFERENTIAL DIAGNOSIS

Lead –in: for each of the following clinical situations, select the best diagnosis.

Options
A. Anemia of chronic disease
B. Cold agglutinin hemolytic anemia
C. Warm agglutinin hemolytic anemia
D. Non-immune hemolytic anemia
E. Aplastic anemia
F. Parvovirus infection
G. Hookworm infestation
H. Iron deficiency anemia
I. Plummer Vinson syndrome
J. Megaloblastic anemia
K. Blind loop syndrome
L. Thalassemia
M. Sickle cell anemia
N. Lead poisoning

Questions

1. A 38-year-old female with symptomatic multiple submucosal fibroids presents with easy fatigability. Her Hb is 8.6 gm % and MCV is 70 fl, and the platelets 550000/cubic cm. (Answer H)

2. A 6 month old baby with congenital hereditary spherocytosis suddenly develops severe pallor and his Hb is 3.8 gm%. 2 weeks back her Hb was 11.2% (Answer F)

3. A 43-year-old man complaints of easy fatigability, palpitation and dysphagia. On examination pallor, nail cracking and glossitis present. (Answer I)

4. A 3-year-old black child presents with abdominal colic and pica. His Hb is 7 gms %, MCV 50 fl. RBCs are microcytic and hypochromic with basophilic stippling. (Answer N)

5. An 11-month-old black infant presents with pallor, painful and fusiform digits. (Answer M)

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