

ARM

PROVISIONAL ANSWER KEY [CBRT]

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Instructions / સૂચના

Candidate must ensure compliance to the instructions mentioned below, else objections shall not be considered: -

- (1) All the suggestion should be submitted in prescribed format of suggestion sheet Physically.
- (2) Question wise suggestion to be submitted in the prescribed format (Suggestion Sheet) published on the website.
- (3) All suggestions are to be submitted with reference to the Master Question Paper with provisional answer key (Master Question Paper), published herewith on the website. Objections should be sent referring to the Question, Question No. & options of the Master Question Paper.
- (4) Suggestions regarding question nos. and options other than provisional answer key (Master Question Paper) shall not be considered.
- (5) Objections and answers suggested by the candidate should be in compliance with the responses given by him in his answer sheet. Objections shall not be considered, in case, if responses given in the answer sheet /response sheet and submitted suggestions are differed.
- (6) Objection for each question shall be made on separate sheet. Objection for more than one question in single sheet shall not be considered & treated as cancelled.

ઉમેદવારે નીચેની સૂચનાઓનું પાલન કરવાની તકેદારી રાખવી, અન્યથા વાંધા-સૂચન અંગે કરેલ રજૂઆતો ધ્યાને લેવાશે નહીં

- (1) ઉમેદવારે વાંધા-સૂચનો નિયત કરવામાં આવેલ વાંધા-સૂચન પત્રકથી રજૂ કરવાના રહેશે.
- (2) ઉમેદવારે પ્રશ્નપ્રમાણે વાંધા-સૂચનો રજૂ કરવા વેબસાઈટ પર પ્રસિધ્ધ થયેલ નિયત વાંધા-સૂચન પત્રકના નમૂનાનો જ ઉપયોગ કરવો.
- (3) ઉમેદવારે પોતાને પરીક્ષામાં મળેલ પ્રશ્નપુસ્તિકામાં છપાયેલ પ્રશ્નક્રમાંક મુજબ વાંધા-સૂચનો રજૂ ન કરતા તમામ વાંધા-સૂચનો વેબસાઈટ પર પ્રસિધ્ધ થયેલ પ્રોવિઝનલ આન્સર કી (માસ્ટર પ્રશ્નપત્ર)ના પ્રશ્ન ક્રમાંક મુજબ અને તે સંદર્ભમાં રજૂ કરવા.
- (4) માસ્ટર પ્રશ્નપત્ર માં નિર્દિષ્ટ પ્રશ્ન અને વિકલ્પ સિવાયના વાંધા-સૂચન ધ્યાને લેવામાં આવશે નહીં.
- (5) ઉમેદવારે જે પ્રશ્નના વિકલ્પ પર વાંધો રજૂ કરેલ છે અને વિકલ્પ રૂપે જે જવાબ સૂચવેલ છે એ જવાબ ઉમેદવારે પોતાની ઉત્તરવહીમાં આપેલ હોવો જોઈએ. ઉમેદવારે સૂચવેલ જવાબ અને ઉત્તરવહીની જવાબ ભિન્ન હશે તો ઉમેદવારે રજૂ કરેલ વાંધા-સૂચન ધ્યાનમાં લેવાશે નહીં.
- (6) એક પ્રશ્ન માટે એક જ વાંધા-સૂચન પત્રક વાપરવું. એક જ વાંધા-સૂચન પત્રકમાં એકથી વધારે પ્રશ્નોની રજૂઆત કરેલ હશે તો તે અંગેના વાંધા-સૂચનો ધ્યાને લેવાશે નહીં.

001. Which of the following signaling pathways plays an important role in intestinal epithelial cell proliferation
- (A) Wnt pathway (B) mTOR pathway
(C) NOTCH pathway (D) Toll-like receptor (TLR) pathway
002. Which of the following hereditary gastrointestinal cancer syndrome is associated with mutation in PTEN gene?
- (A) Juvenile polyposis (B) Hereditary diffuse gastric cancer
(C) Peutz-Jeghers syndrome (D) Cowden syndrome
003. Which of the following is the most abundant antibody in mucosal secretions?
- (A) Immunoglobulin (Ig)G (B) IgM
(C) IgA (D) IgE
004. Under normal conditions, which of the following colonic wall layers contains the majority of inflammatory cells?
- (A) Lamina propria (B) Muscularis mucosa
(C) Submucosa (D) Muscularis propria
005. An elderly gentleman undergoes a colonoscopy that reveals a large, friable mass in the ascending colon and another smaller mass in the transverse colon. Biopsies of both masses confirm the diagnosis of adenocarcinoma. An abdominal computed tomography (CT) scan reveals multiple hypodense liver lesions consistent with metastatic spread. Treatment with chemotherapy combined with cetuximab is considered.
- Which of the following genetic mutations should be tested prior to initiating therapy with cetuximab?
- (A) EGFR (B) APC
(C) KRAS (D) C-MYC
006. True statement is
- (A) Liver diverticulum forms through proliferation of mesodermal cells at cranioventral junction of the yolksac
(B) Earliest marker of mammalian hepatic differentiation is the endodermal expression of albumin, transthyretin, and alphafetoprotein
(C) Extrahepatic bile ducts originate from a region of dorsal foregut proximate to liver
(D) All of the above
007. Esophageal SEMS, All are false except
- (A) SEMS placement is recommended as a bridge to surgery or prior to preoperative chemoradiotherapy.
(B) Esophageal SEMS placement is not the preferred treatment for sealing malignant tracheoesophageal or bronchoesophageal fistula
(C) Brachytherapy is a valid alternative or in addition to stenting in esophageal cancer patients with malignant dysphagia.
(D) Placement of uncovered SEMS is indicated for palliation of malignant dysphagia
008. Which of the following is tLESR inhibitor
- (A) Bethanecol (B) Metoclopramide
(C) Baclofen (D) Rabeprazole

009. A 34-year-old man who is obese and a smoker reports a 5-year history of worsening dysphagia to solid foods. He undergoes an upper endoscopy, which is only notable for a submucosal lesion in the midesophagus. On subsequent endoscopic ultrasound, the lesion is described as an anechoic 15-mm lesion with no associated wall thickening or lymphadenopathy. What is the most likely diagnosis?
- (A) Esophageal squamous cell carcinoma (B) Gastrointestinal stromal tumor (GIST)
 (C) Esophageal lipoma (D) Duplication cyst
010. Which of the following is false regarding inlet patch
- (A) Seen in around 10%
 (B) Adenocarcinoma has never been reported as a complication
 (C) Associated with globuspharyngeus and is said to resolve post APC
 (D) Aymptomatic usually
011. Right gastroepiploic vein drains into
- (A) Superior mesenteric vein (B) Inferior mesenteric vein
 (C) Splenic vein (D) Portal vein
012. A newborn is regurgitating saliva, and prenatal exams demonstrated polyhydramnios and an absent stomach bubble. Esophageal atresia is suspected. What diagnostic testing is indicated to confirm the diagnosis
- (A) Ultrasound of the esophagus (B) Thoracic computed tomography (CT)
 (C) Barium swallow (D) Passage of a nasogastric (NG) tube and concurrent chest radiograph
013. Which of the following inhibits gastrin release from antral G cells?
- (A) Cholecystokinin (B) Glucagon
 (C) Somatostatin (D) Secretin
014. At what age does the development of the liver start?
- (A) First week of gestation (B) Sixth week of gestation
 (C) Third week of gestation (D) Tenth week of gestation
015. A 65-year-old man with multiple medical problems which include epilepsy, hypertension, atrial fibrillation, and congestive heart failure presents to his gastroenterologist's office for a 3-month history of epigastric pain. EGD reveals a clean base duodenal ulcer. Random gastric biopsy was negative for H. pylori. A proton pump inhibitor was prescribed for his ulcer disease. His other medications are warfarin, amlodipine, phenytoin, and furosemide. Which of the following medications has the highest likelihood of drug interaction?
- (A) Omeprazole (B) Pantaprazole
 (C) Esomeprazole (D) Rabeprazole
016. A 72-year-old woman presents with epigastric discomfort. She was treated with PPIs without response. She is referred to a gastroenterologist and Gastroscopy shows a 1.3 cm nodule in the antrum, which is biopsied. The pathologist reports a neuroendocrine tumor. Her serum gastrin level is 750 pg/mL (normal <100 pg/ mL).What is the best treatment for this patient?
- (A) Endoscopic resection (B) Continue PPI
 (C) Somatostatin analog injection (D) Surgery

017. A 35-year-old man presents with difficulty in swallowing meat and intermittent chest pain. Over the last 1 yr, he had three episodes of esophageal food bolus obstruction. Endoscopic biopsies from the mid and distal esophagus showed eosinophilic infiltration of the mucosa, compatible with EoE. His symptoms persisted despite treatment with PPIs. However, he improves symptomatically after starting swallowed topical fluticasone. Which of the following is the recommended duration of treatment?
- (A) 2 weeks (B) 2 months
(C) 6 months (D) Indefinitely
018. A 57-year-old woman gives history of left lower abdominal pain for the last 18 months. She denies diarrhea, rectal bleeding, or weight loss. Colonoscopy showed polypoidal mass measuring 1.5 cms in the terminal ileum. Histopathology report indicates a neuroendocrine tumor (i.e., low-grade carcinoid). In addition to imaging studies, which of the following factors is important in determining the prognosis?
- (A) Smoking (B) Serum serotonin
(C) Serum histamine (D) Serum chromogranin-A
019. Which of the following phyla contribute to the majority of bacteria in the distal bowel?
- (A) Firmicutes and Bacteroidetes (B) Firmicutes and Proteobacteria
(C) Bacteroidetes and Acintobacteria (D) Acintobacteria and Proteobacteria
020. Which of the following cancers has been shown to be significantly more common in obese compared to nonobese women?
- (A) Lung cancer (B) Rectal cancer
(C) Colon cancer (D) Gallbladder cancer
021. Which of the following is the most abundant solute in bile in healthy individuals?
- (A) Bilirubin (B) Cholesterol
(C) Phospholipids (D) Bile acids
022. A 65-year-old man who underwent a Billroth type I partial gastrectomy 20 years ago for recurrent gastric ulcers was seen in the gastroenterology clinic.
- Which of the following deficiencies is he most likely to suffer from?
- (A) Calcium (B) Folate
(C) Iron (D) Vitamin D
023. 60-year-old woman presents with dyspepsia, a weight loss of 10 pounds and postprandial nausea for 3 months. Her past medical history is significant for hypertension and breast cancer, treated with surgery and adjuvant chemotherapy 5 years ago. Her physical exam reveals normal vital signs, cardiac, pulmonary, and abdominal exams. She has peripheral edema. She is referred to a gastroenterologist and undergoes an EGD. This shows hypertrophic gastric folds with ample secretions. Antral biopsy shows a few *H. pylori* organisms. Which of the following is the most appropriate treatment?
- (A) Proton pump inhibitor (PPI) (B) Gastrectomy
(C) Octreotide (D) *H. pylori* eradication

024. A 40-year-old man is seen in clinic for follow-up of dyspepsia. He was seen in clinic 3 months ago for symptoms of postprandial pain and burning in the epigastric area. He tested positive for *H. pylori* using urea breath test. He was treated with standard triple therapy for *H. pylori* (amoxicillin, clarithromycin, proton pump inhibitor [PPI]). He had resolution of his symptoms initially, but now he has developed recurrence of dyspepsia. An EGD is performed, showing a small shallow ulcer in the gastric fundus. Rapid urease test is positive for *H. pylori* organisms. Which of the following is the best next step in management?
- (A) Repeat initial therapy, extended to a 21-day duration
 (B) PPI + levofloxacin + amoxicillin for 14 days
 (C) PPI + doxycycline + metronidazole + bismuth for 14 days
 (D) PPI + amoxicillin + rifabutin for 14 days
025. Which of the following pathogens persist after disinfection of the endoscopes using proper sterile techniques?
- (A) Hepatitis C (B) HIV
 (C) *Clostridium difficile* (D) Creutzfeldt-Jakob disease
026. Proton pump inhibitor (PPI) is the drug of choice in reducing gastric acid secretion. Which of the following statement is true regarding this class of medications?
- (A) PPI has best efficacy if taken in a fasting state because it requires an acidic environment for the conversion to its active form
 (B) Stopping PPI after chronic acid suppression can cause enterochromaffin-like (ECL) cell hyperplasia
 (C) Because PPI can directly inhibit H⁺/K⁺ ATPase, it does not get affected by gastric pH
 (D) PPI should be taken at breakfast time because this is when most H⁺/K⁺ ATPase pumps are inserted
027. Which of the following gas diffuses the fastest across the mucosa of GI tract?
- (A) O₂ (B) CO₂
 (C) H₂ (D) CH₄
028. A 35-year-old woman undergoes a laparoscopic Roux-en-Y gastric bypass. On day 2 after surgery, the patient develops 10 out of 10 abdominal pain and begins to display hematochezia. On examination, her abdomen is rigid and exquisitely tender. Which of the following is the most likely diagnosis?
- (A) Anastomotic leak (B) Anastomotic ulcer
 (C) Bowel ischemia (D) Bowel obstruction
029. Contraindication to neostigmine therapy in Acute intestinal pseudo-obstruction. False statement
- (A) Tachycardia (B) Bronchospasm
 (C) Creat >2.5 (D) Perforation
030. What is the current most effective therapy for *Cryptosporidium* infection in patients with HIV?
- (A) Trimethoprim-sulfamethoxazole
 (B) Metronidazole
 (C) Highly active antiretroviral therapy (HAART)
 (D) Amphotericin B, then fluconazole
031. Which of the following is the correct treatment for the given infection
- (A) *Histoplasma capsulatum* - ivermectin
 (B) *Trichinella spiralis* - prednisone
 (C) *Entamoeba histolytica* - metronidazole and paromomycin
 (D) *Salmonella typhi* - paromomycin

032. A patient undergoes an allogenic bone marrow transplantation for aplastic anemia. A few days after transplant, he develops mucositis, nausea, vomiting, anorexia, and early satiety. Which of the following is the most likely etiology of his symptoms?
- (A) Upper gut acute graft-versus-host disease (GVHD)
 - (B) Myeloablative conditioning prior to transplant
 - (C) CMV infection
 - (D) Candida esophagitis
033. What is the current most effective therapy for Cryptosporidium infection in patients with HIV?
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 - (D) Amphotericin B, then fluconazole
034. Which of the following is correct regarding the diagnosis of small intestinal bacterial overgrowth (SIBO)?
- (A) Most small intestinal biopsies from patients with SIBO have villus atrophy
 - (B) When performing jejunal aspirates, greater than 10^5 colony-forming units (CFU)/mL is diagnostic in all geographic regions
 - (C) During the lactulose hydrogen breath test (LHBT), the first peak is related to hydrogen production by the oral flora
 - (D) Breath tests are cheaper than jejunal aspirates
035. Which of the following is true regarding teduglutide in patients with short bowel syndrome?
- (A) It has been approved to be used for up to 1 year
 - (B) It is a synthetic analog of glucagon-like peptide 2 (GLP-2)
 - (C) Teduglutide administration is associated with decreased plasma citrulline levels
 - (D) Nephropathy is a common side effect of this medication
036. A 40-year-old man with SBS presents to clinic for followup. He has chronic diarrhea that has been stable. The patient states he only had small intestinal resection, and his entire colon is still intact. He denies any shortness of breath or cough. He reports difficulty with driving at night and dry eyes. He is eating well with no restrictions on his diet. Which of the following would explain the patient's symptoms?
- (A) Fat malabsorption
 - (B) Vitamin B12 deficiency
 - (C) Folate deficiency
 - (D) Niacin deficiency
037. When examining a small intestinal biopsy of a patient with celiac disease, which of the following findings is expected to be seen?
- (A) The disease process that only affecting the mucosa
 - (B) Eosinophilic cytoplasm of the enterocytes
 - (C) Increased intraepithelial neutrophils
 - (D) Shorter crypts

038. A 32-year-old woman is referred to you for evaluation of abdominal bloating. She denies any change in bowel habits or anemia. Her past medical history is remarkable for idiopathic infertility. Her laboratory values show positive IgA tTG antibody. You perform an upper endoscopy with biopsies of the small bowel, which comes back normal. What is the best next step in her management?
- (A) Inform her that she has celiac disease and needs to be on a strict gluten free diet for the rest of her life
 - (B) Inform her that you are concerned she has latent celiac and will need to adhere to a strict gluten free diet as this might be contributing to her bloating and infertility
 - (C) Order serum IgA level
 - (D) Order genetic testing for celiac disease
039. Which of the following is correct regarding the epidemiology of tropical sprue?
- (A) It may occur in indigenous residents
 - (B) Sporadic tropical sprue cases are no longer reported
 - (C) It affects children more frequently than adults
 - (D) Tropical sprue epidemics have been increasing in the last decade
040. Which of the following is true about Whipple's disease?
- (A) It is caused by a gram-negative bacterium
 - (B) It is more common in females
 - (C) It is more common in Africans
 - (D) It is not seen in children
041. Which of the following is characteristic of primary small intestine lymphomas (PSILs)?
- (A) PSILs are most commonly found in the duodenum
 - (B) PSILs rapidly progress extramurally
 - (C) PSILs commonly affect a large portion of intestine in a contiguous fashion
 - (D) Most PSILs are B-cell derived
042. Which of the following general principles regarding oral intake is true in managing infectious diarrhea?
- (A) Reduced-osmolarity oral rehydration solutions (ORS) should be avoided due to the risk of hyponatremia
 - (B) Dairy products should be avoided due to the possibility of secondary lactose deficiency
 - (C) Oral feeding should be started only after the diarrhea resolves
 - (D) ORS should not be given in patients who are vomiting
043. A 33-year-old man presents to the emergency department with abdominal pain and watery diarrhea for 4 days. CT scan of the abdomen and pelvis demonstrates terminal ileal thickening without evidence of obstruction. Which of the following is known to commonly cause terminal ileitis?
- (A) *V. cholerae*
 - (B) *Y. enterocolitica*
 - (C) Enteropathogenic *E. coli* (EPEC)
 - (D) Enteroinvasive *E. coli* (EIEC)
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045. Which of the following inflammatory bowel disease medications can result in reversible male infertility?
- (A) Ciprofloxacin (B) Sulfasalazine
(C) Mesalamine (D) Infliximab
046. Which of the following is true regarding family history and ulcerative colitis (UC)?
- (A) Familial associations generally occur more in second-degree relatives and offspring
(B) Familial association is greater in persons of Jewish descent than non-Jewish patients
(C) For all affected first-degree relatives within a family, there is a low concordance for type of disease (UC vs. Crohn's disease)
(D) There is a consistent correlation with disease extent within families
047. 50-year-old male undergoes polypectomy for two polyps found during a screening colonoscopy. Three days later, he has three episodes of painless rectal bleeding and is seen in the emergency department. He receives fluid resuscitation and is admitted for repeat colonoscopy. Which of the following is a reported risk factor for post-polypectomy bleeding?
- (A) Polyp size of 1.5 cm (B) Pedunculated polyp
(C) Polyp in the right colon (D) Ulcerated polyp
048. A 33-year-old man with HIV presents with recurrent rectal bleeding and painful bowel movements. He has not yet initiated antiretroviral therapy. Colonoscopy reveals mass in the anorectal area. Biopsies show squamous cell carcinoma. Which of the following is associated with this disease?
- (A) Human papilloma virus (HPV) types 6 and 11
(B) HPV types 16 and 18
(C) Human herpes virus-8 (HHV-8)
(D) Epstein-Barr virus (EBV)
049. A 21-year-old man presents to his primary care physician with hypertrophy of his right lower leg, varicose veins only on the right side, and intermittent hematochezia. He reports that his leg abnormalities have been present since childhood. Which of the following is the most likely diagnosis?
- (A) Blue rubber bleb nevus (B) Klippel-Trenaunay syndrome
(C) Osler-Weber-Rendu disease (D) Congenital AVM
050. Microscopic colitis. True statement is
- (A) Chronic inflammatory diarrhea
(B) Seen in young adults
(C) Mechanism is related to extent of thickness of collagen band
(D) Symptom relapse occurs in 40-80% of patients with cessation of steroids
051. Which of the following medications works by activating chloride channels on the intestine for treatment of constipation.
- (A) Ondansetron (B) Lubiprostone
(C) Alosetron (D) Pruclopride
052. True statement regarding initiation of screening colonoscopy is
- (A) 8 years after the onset of pancolitis or 12-15 years after left sided colitis.
(B) 25 years in a case of FAP
(C) 45 years in patients at risk of lynch syndrome
(D) All of the above

053. Which of the following extraintestinal manifestations of IBD is most likely to improve when a flare is successfully treated
- (A) Ankylosing spondylitis (B) Episcleritis
 (C) Primary sclerosing cholangitis (D) Pyoderma gangrenosum
054. With regard to arthropathy associated with Crohn's disease, which of the following statements is most accurate?
- (A) Axial arthropathies including ankylosing spondylitis and sacroiliitis present as lower back pain and stiffness, usually throughout the day
 (B) Biologics are recommended first-line treatment for an acute flare of Crohn's-associated arthropathy
 (C) Musculoskeletal extra-intestinal manifestations (EIMs) is amongst the most common EIM's in IBD
 (D) Large joint arthropathy associated with Crohn's disease usually occurs during remission
055. A 25-year-old male is seen in clinic with complaints of drainage from his perianal area. He reports lower abdominal pain and diarrhea for the past 6 months. A perianal examination reveals a 5 cm fluctuant tender area on the right buttock. A prominent firm perianal tag is noted. A magnetic resonance enterography reveals 20 cm of active inflammation in the terminal ileum. In addition, a 5 cm perirectal abscess is noted. Which of the following is the most appropriate treatment
- (A) Oral antibiotics and surgical referral (B) Oral antibiotics and prednisone
 (C) Infliximab (D) Methotrexate and folic acid
056. A contrast-enhanced CT of the abdomen and pelvis done in the emergency department of a 65 year old lady presenting with abdominal pain shows localized diverticulitis in the sigmoid colon. Note is also made of an incidental 25 mm cystic lesion in the body of the pancreas with multiple microcysts with thin septations. What is the most likely etiology of the pancreatic mass
- (A) Mucinous cystic neoplasm (B) Solid pseudopapillary tumor
 (C) Serous cystadenoma (D) Intraductal pancreatic neoplasm
057. True statement regarding refractory celiac disease type 1(RCD1)
- (A) RCD 1 transition to EATL is common
 (B) Have less than 10% aberrant cells
 (C) RCD1 does not respond to immunosuppression
 (D) Defined as recurrence despite adherence to strict GFD
058. Good quality of evidence for treatment of fecal incontinence
- (A) Neuromuscular training (B) Sacral nerve stimulation
 (C) Sphincteroplasty (D) Both (A) and (B)
059. A 55 year old, nursing home resident with recent history of admission for sepsis presents with 2 weeks of non-bloody diarrhea. Next appropriate step would be
- (A) Colonoscopy
 (B) Stool routine and microscopy
 (C) EGD with duodenal aspirate
 (D) Stool for *C. difficile* Toxin and start metronidazole.
060. Successful spontaneous closure of GI fistula is unlikely if
- (A) Output < 500 ml (B) Age less than 40 yrs
 (C) Long fistulous tract (D) Distal small bowel location

061. Which of the following has the strongest aetiological association with the development of pancreatic cancer
(A) Adult-onset diabetes (B) Chronic pancreatitis
 (C) Hereditary pancreatitis (D) Smoking
062. A 55-year-old woman is seen in clinic with epigastric pain. An MRCP o shows a long common channel between the CBD and the pancreatic duct (measuring 2.5 cm). Which of the following should be recommended
(A) ERCP
(B) EUS
 (C) Cholecystectomy
(D) Reassurance and follow up scan after 6 months
063. Which of the following pancreatic cell type is responsible for the bulk of pancreatic secretion?
(A) Acinar cell (B) Duct cell
(C) Stellate cell (D) Beta cell
064. Which of the following is true regarding autoimmune pancreatitis type 1?
(A) Associated with ulcerative colitis
(B) More common in females
 (C) High serum IgG4 levels
(D) Histology is characterized by presence of neutrophils in medium and small ducts
065. A 62-year-old woman is referred to you for an EUS for pancreatic cystic lesion in the body of the pancreas, found incidentally. She has no abdominal pain or other symptoms. On EUS, you notice a 5 cm well-circumscribed multicystic lesion, which shows honeycombing and central calcification. Which of the following is the most appropriate next step in management?
 (A) Follow-up imaging in 1 year (B) Surgical resection
(C) Check serum chromogranin levels (D) ERCP
066. Which of the following is associated with an increased risk of cholangiocarcinoma?
(A) Cholelithiasis (B) Choledocholithiasis
 (C) Hepatolithiasis (D) Echinococcus multilocularis
067. Which of the following viral hepatitis is associated with the highest risk of intrahepatic cholangiocarcinoma?
(A) Hepatitis A (B) Hepatitis B
 (C) Hepatitis C (D) Hepatitis E
068. Which of the following is a risk factor for postsphincterotomy bleeding?
 (A) Resuming anticoagulation within 72 hours of the procedure
(B) Large size sphincterotomy
(C) Extension of a prior sphincterotomy
(D) Extraction of large biliary stones
069. Nutritional treatment for patients with bone disease in chronic liver disease
(A) Include supplements of calcium (1,000–1,500 mg/day) and 25-hydroxy-vitamin D (400–800 IU/day or 260 µg every 2 weeks) in patients with CLD and a T-score below -1.5
(B) Utilize bisphosphonates in cirrhotic patients with osteoporosis and in those waiting for liver transplantation
(C) Consider testosterone supplementation and venesection in males with haemochromatosis and hypogonadism
 (D) All of the above

070. In the landmark study of Sort et al on albumin administration in CLD. Which statement is false
 (A) Administration of albumin offers no advantage if serum bilirubin is < 4 mg/dl
 (B) Administration of albumin improves in hospital mortality but has no effect on long term mortality
 (C) Prothrombin time is an independent predictor of in hospital mortality.
 (D) Plasma renin activity is more in the antibiotic group
071. A 40 year female with colonic cancer is on immunotherapy with nivolumab. Her blood investigations showed deranged LFT. Total Protein: 6.4 mg/dl, Bil: 0.5, AST: 488, ALT: 1368, ALP: 302, GGT: 40.
 Which of the following is not appropriate management
 (A) Stop Nivolumab (B) Start oral or IV steroids
 (C) Infliximab could be considered (D) None of the above
072. In the current COVID-19 pandemic conditions, certain additional information, to be agreed upon by the patient, needs to be incorporated in the consent, except:
 (A) While all the necessary precautions are being taken, there is a finite though small risk that the patient may contract the infection from the hospital
 (B) He/she indemnifies the hospital and the endoscopist against any such liability arising out of any action taken while doing the procedure.
 (C) As it is difficult to have physical interaction, teleconsultation may be done as per the telemedicine practice guidelines issued by the Medical Council of India (MCI).
 (D) Furthermore, to protect the patient him/herself, he/she agrees to get the preprocedural test for COVID-19 as well as bear the additional cost of the PPE used by the endoscopist and support staff.
073. Regarding telemedicine practice guidelines issued by the MoHFW ,all are true except
 (A) Primarily there are only 2 modes: Video or Audio, of telemedicine consultation
 (B) Consent is implied if patient initiates consultation
 (C) An Explicit consent is needed if RMP initiates consultation
 (D) List “A” - includes usually prescribed medications for which diagnosis is possible only by video consultation
074. Regarding the Epidemic Diseases (Amendment) Ordinance, 2020, all are true except
 (A) The Ordinance amends the Epidemic Diseases Act of 1867.
 (B) The Ordinance amends the Act to include protection for healthcare personnel combating epidemic diseases
 (C) It expands the powers of the central government to prevent the spread of epidemic diseases
 (D) Violence against a healthcare service personnel are considered cognizable and non-bailable offences
075. The endoscopist is bound to take all the precautions to safeguard him/herself and the patient from spreading the infection. In the current scenario of COVID 19 pandemic - for spreading an infectious disease either knowingly or unknowingly or negligently, endoscopist may attract punishment under the provisions of:
 (A) Section 270/269 of Indian penal code (B) Section 4 of the Epidemic Diseases Act
 (C) Section 73 of Disaster Management Act (D) Section 56 of Disaster Management Act
076. Regarding Chi-square test, all are true except
 (A) The variables should be categorical
 (B) Sampling should be random
 (C) The value in all the cells is subjected to a certain minimum
 (D) The values should be in percentages or averages

077. What is true regarding the probability or P-value
- (A) Fisher's test is not used to calculate the P value
 - (B) If the P value ≤ 0.05 – the alternate hypothesis is rejected
 - (C) If the P value > 0.05 – the null hypothesis is rejected
 - (D) Goodness of fit test is used to calculate the P value
078. Level of evidence "2b" includes the following type of studies
- (A) Individual Cohort studies
 - (B) Individual case-control studies
 - (C) Individual randomized controlled trials
 - (D) Case series
079. Regarding IBD in women, which statement is true:
- (A) Women with IBD on immunosuppressant's have an increased risk of endometrial cancer
 - (B) Women with IBD consistently report lower quality of life (QOL) and sexual function than men
 - (C) IBD symptoms don't worsen before and during menstruation
 - (D) All of the above
080. Majority of benign liver tumors are more common in women, except:
- (A) Cavernous hemangioma
 - (B) Focal nodular hyperplasia
 - (C) Hepatic adenoma
 - (D) Nodular regenerative hyperplasia
081. Regarding Sex-related differences in alcohol associated liver disease (ALD), which statement is true
- (A) The ratio of oestrogen-to-progesterone doesn't contribute to the sex-related differences in ALD
 - (B) Sex-related differences in activity of key alcohol-metabolizing enzymes such as alcohol dehydrogenase and cytochrome P450 2E1 is well known
 - (C) Increased gut permeability and endotoxin translocation into the liver is seen in women
 - (D) All the above
082. Liver biopsy specimens in mitochondrial disorders typically show
- (A) Macrovesicular steatosis
 - (B) Microvesicular steatosis
 - (C) Increased density and occasional swelling of mitochondria on electron microscopy
 - (D) All of the above
083. Effect of stress hormone corticotropin releasing factor on gut physiology include which of the following:
- (A) Gastric stasis
 - (B) Gastric emptying
 - (C) Decrease in the colonic transit rate
 - (D) Decrease visceral hypersensitivity
084. Humoral mediators that appear to be unique to cancer cachexia
- (A) IL-6
 - (B) TNF- α
 - (C) Proteolysis inducing factor
 - (D) Serotonin
085. Dual energy X-ray absorptiometry (DEXA) is useful for the analysis of which body compartment
- (A) Absolute fat mass(FM) and lean mass(LM)
 - (B) Proportion of the body composed of LM
 - (C) Proportion of body composed of FM
 - (D) Regional Fat mass/lean mass

086. Which is used for Percutaneous Endoscopic GastroJejunostomy (PEGJ) placement
 (A) Russel technique (B) Johlin technique
 (C) Sachs – Vine technique (D) All of the above
087. Medications commonly used by elderly which are linked with an increase in the risk for Diverticular Disease are, all except:
 (A) NSAIDS (B) Calcium channel blockers
 (C) Steroids (D) None of the above
088. Regarding IBD in older adults, true statement is
 (A) Side effects from immune- modifying agents not increased in elderly when compared to younger counter parts
 (B) Inflammatory phenotype predominates
 (C) Disease less aggressive and progresses more slowly
 (D) All of the above
089. Regarding classification of the endoscopic appearance of the papilla of Vater, which is the correct match
 (A) Type I – Small papilla (B) Type II – Protruding papilla
 (C) Type IV – Creased/Ridged papilla (D) All of the above
090. Regarding drugs used in the treatment of unresectable hepatocellular carcinoma
 (A) Lenvatinib is used as 1st line therapy, is non-inferior to Sorafenib
 (B) Cabozantinib is used as 2nd line therapy, in Sorafenib intolerant progressive disease
 (C) Regorafenib is used as 2nd line therapy, in Sorafenib tolerant progressive disease
 (D) Ramucirumab is an immune checkpoint inhibitor
091. In patients with type 2 diabetes, antidiabetic agent that also improves NAFLD :
 (A) Pramlintide (B) Dapagliflozin
 (C) Miglitol (D) Glipizide
092. Regarding Obeticholic acid (OCA), all are true except
 (A) Semisynthetic derivative of the chenodeoxycholic acid
 (B) The most common side effect is nausea
 (C) OCA activates GPBAR1/TGR5 receptor
 (D) Second-line treatment for PBC patients
093. BING classification refers to
 (A) Benign Gastric Neoplasia –NBI classification
 (B) Bowel Injury Grading in blunt trauma abdomen
 (C) Barrett’s Epithelium - NBI classification
 (D) Bowel Ischemia Necrosis and Gangrene classification on laparotomy
094. Regarding endoscopic Esophageal Mucosa In Achalasia (EMIA) and Sub Mucosal Fibrosis (SMF) classification, all are true except
 (A) EMIA classification is recorded as grades A to F
 (B) SMF is graded as 0, 1, 2 and 3
 (C) EMIA classification – Grades A and B are an independent predictor of SMF
 (D) The classification may be used for assessment of the difficulty and success of POEM

095. Small bowel vascular lesions can be endoscopically classified into four categories based on the Yano-Yamamoto classification. Regarding which classification, all are true except
 (A) Angioectasia's (AE) are classified as Type 1
 (B) Dieulafoy's lesion (DL) are classified as Type 3
 (C) Congenital intestinal AVMs are relatively large and are classified as Type 4
 (D) For AE-APC;DL-CLIPPING and Large AVM-Surgical resection - are the treatment options
096. All of the following techniques are recommended for Endoscopic Eradication Therapy (EET) of Barrett's esophagus, except
 (A) EMR (Endoscopic mucosal resection) (B) ESD (Endoscopic submucosal dissection)
 (C) RFA (Radiofrequency ablation) (D) APC (Argon plasma coagulation)
097. In Achalasia cardia, highest risk of post-procedure reflux is seen with
 (A) Heller Myotomy (B) POEM
 (C) Pneumatic dilatation (D) Botulinum Toxin injection
098. Which vitamin deficiency is commonly seen in Refeeding syndrome?
 (A) Thiamine (B) Vitamin E
 (C) Vitamin B12. (D) Vitamin D
099. Which of the following statements is correct regarding hepatitis B and D coinfection compared to hepatitis D superinfection?
 (A) Coinfection is more likely to lead to resolution of infection
 (B) Coinfection often presents with negative hepatitis B core IgM
 (C) Coinfection carries a higher risk for hepatocellular carcinoma
 (D) Coinfection more often leads to rapid disease progression to end-stage liver disease
100. Which of the following is a side effect of cyclosporine?
 (A) Gingival hyperplasia (B) Low cholesterol
 (C) Psoriasis (D) Autoimmune pancreatitis
101. All of the following are risk factors for Budd-chiarri syndrome EXCEPT
 (A) JAK-2 mutation (B) MTHFR mutation
 (C) Factor v Leiden mutation (D) CCR-5 mutation
102. For a low risk endoscopic procedure DOAC-direct acting anticoagulant should be
 (A) Stopped 3 days prior to the procedure (B) Stopped 5 days prior to the procedure
 (C) Stopped 7 days prior to the procedure (D) Omitted on the day of procedure
103. The primary modality for treatment of squamous cell dysplasia and cancer confined to the superficial esophageal mucosa.
 (A) Surgical management (B) Surgical management with NACT
 (C) Endoscopic mucosal dissection (D) Neoadjuvant Chemoradiotherapy
104. In absence of prophylaxis perinatal transmission of Hepatitis B may be as high as
 (A) 25-30% (B) 45-50%
 (C) 65-70% (D) 85-90%
105. All of the following are true about Sorafenib EXCEPT
 (A) It is a multikinase Inhibitor
 (B) Used in Multinodular HCC with portal vein invasion
 (C) Hypotension is a common side effect
 (D) Used in Renal cell carcinoma

106. Parasitic disease which causes portal hypertension
 (A) Amoebiasis (B) Schistosomiasis
 (C) Fascioliasis (D) Clonorchiasis
107. First line of investigation in patients suspected with low probability of Celiac disease
 (A) Endoscopy and Small intestinal biopsy
 (B) IgA EMA or tTG antibody \pm IgA AKA, IgG AKA
 (C) Genetic testing for HLA DQ2/DQ8
 (D) Gluten challenge test
108. Commonest cause of Acute Mesenteric Ischemia
 (A) SMA thrombosis (B) SMA embolus
 (C) Mesenteric venous thrombosis (D) Non occlusive mesenteric ischemia
109. All of the following are indications for selective entacavir or tenofovir alafenamide over tenofovir disoproxil fumarate except :
 (A) High Phosphate > 4.5 mg/dl (B) Age > 60 years
 (C) Albuminuria > 30 mg / 24 hours (D) eGFR < 60 ml/min/1.73 m²
110. Fluids should not be restricted in patients with Cirrhosis and ascites unless the S.Sodium is below
 (A) 125 mg/dl (B) 128 mg /dl
 (C) 130 mg /dl (D) 110 mg/dl
111. If liver transplant is contraindicated or not available for a patient with Acute on chronic liver failure, beyond what ACLF CLIF score on day 3 to day 7 should intensive organ support be discontinued
 (A) > 64 (B) > 32
 (C) > 74 (D) > 60
112. STOPAH trial evaluated the effect of treatment of which drug in Alcoholic Hepatitis
 (A) Prednisolone (B) Saroglitazar
 (C) G-CSF (D) Infliximab
113. AIMS-65 score is used for prognosis of patients with
 (A) Acetaminophen toxicity (B) Upper GI bleeding
 (C) Lower GI bleeding (D) Acute on chronic liver failure
114. All are true about PBC EXCEPT
 (A) Elevated IgM level
 (B) Primarily affects males
 (C) SICCA complex can be seen in patients
 (D) Specific ANA (gp 210, sp 100, anti centomere) positivity may be seen
115. As per the mayo score for ulcerative colitis, disease activity is said to be in remission when the score is
 (A) Equal to or less than 2 (B) Equal to or less than 3
 (C) Equal to or less than 4 (D) Equal to or less than 6
116. The following are predictors of aggressive disease course and colectomy in a patient with ulcerative colitis except:
 (A) Elevated inflammatory markers (B) Age > 40 years at diagnosis
 (C) Presence of large or deep ulcers (D) Extensive disease

117. Tofacitinib is
 (A) Anti-integrin (B) Janus kinase inhibitor
 (C) Anti-IL 12/23 monoclonal antibody (D) Anti TNF
118. All are true about Post ERCP Pancreatitis prevention EXCEPT
 (A) Prophylactic pancreatic stent placement
 (B) Routine rectal administration of 100mg of diclofenac or indomethacin immediately before or after ERCP is recommended
 (C) Prophylactic administration of Inj Somatostatin/octreotide
 (D) Glyceryl trinitrate (GTN) may be effective in preventing PEP when administered sublingually
119. Drug associated with improved outcome in sinusoidal obstruction syndrome/veno-occlusive disease
 (A) Prostaglandin E1 (B) Pentoxifylline
 (C) N-Acetylcysteine (D) Defibrotide
120. Sorafenib is indicated in which stage according to BCLC classification
 (A) Stage A (B) Stage B
 (C) Stage C (D) Stage D
121. All of the following are absolute contra-indications for liver transplant EXCEPT
 (A) Active alcohol or drug abuse
 (B) Advanced age > 65 years
 (C) Pulmonary Hypertension-mean MAP \geq 50 mmHg
 (D) Uncontrolled Psychiatric disease
122. Crohn's disease is said to be extensive when the involvement of the disease is
 (A) > 75 cm whatever the location (B) > 100 cm whatever the location
 (C) > 150 cm whatever the location (D) > 115 cm whatever the location
123. All of the following are true about Oculopharyngeal Muscular dystrophy EXCEPT
 (A) Autosomal Dominant disorder
 (B) Affects smooth muscles of pharynx
 (C) Characterized by ptosis and progressive dysphagia
 (D) Genetic studies indicate linkage to Chromosome 14
124. All of the following are true about VIPOMAS EXCEPT
 (A) Causes venous thromboembolism in 12-35% of patients
 (B) Also called Pancreatic cholera
 (C) Causes flushing in 14-33% of patients
 (D) 80-90% of VIPOMA in adults are pNETS
125. Bouveret's syndrome refers to
 (A) The hepatic duct is compressed by a large stone impacted in the cystic duct or Hartman's pouch
 (B) The calculus has eroded into the common hepatic duct to produce a cholecystocholedochal fistula
 (C) An uncommon form of intestinal obstruction caused by impaction of a large gallstone in the intestinal lumen
 (D) Impaction of a gallstone in the distal duodenum or at the pylorus with resulting symptoms of gastric outlet obstruction

126. How many variables are there in APACHE II criteria used for assessing the severity of acute pancreatitis
- (A) 8 (B) 10
 (C) 12 (D) 13
127. Maldigestion of fat occurs after :
- (A) 90% of pancreatic lipase secretory capacity is lost
 (B) 70% of pancreatic lipase secretory capacity is lost
 (C) 50% of pancreatic lipase secretory capacity is lost
 (D) 45% of pancreatic lipase secretory capacity is lost
128. Which mode of imaging should be used as first line in the diagnosis of chronic pancreatitis :
- (A) EUS (B) MRI
 (C) Ultrasound (D) X Ray
129. Which of the following is not recommended to improve pain in chronic pancreatitis ?
- (A) Celiac Plexus Block (B) Pancreatic enzyme supplements
 (C) Anti oxidant therapy (D) Endotherapy
130. Type II Achalasia cardia is characterised by
- (A) 100% failed peristalsis, mean IRP >10 mmHg
 (B) Mean IRP \geq 15 mmHg; mix of normal, weak, rapid or panesophageal pressurisation
 (C) No esophageal contraction and Panesophageal pressurisation with \geq 20% of swallows; mean IRP > 10 mmHg
 (D) Premature contractions with \geq 20% of swallows; mean IRP \geq 17 mmHg
131. The following primary tumors of pancreas are benign except :
- (A) Serous cystadenoma (B) Mucinous cystadenoma
 (C) Intraductal papillary mucinous adenoma (D) Pancreatoblastoma
132. The folowing are criteria of SIRS except :
- (A) pulse greater than 90 beats/minute
 (B) rectal temperature less than 36°C or more than 38°C
 (C) WBC count less than 4000/mm³ or more than 12,000/mm³
 (D) respiratory rate greater than 22/minute or an arterial Pco₂ less than 30 mm Hg
133. The following are recessive mutations causing chronic pancreatitis except
- (A) CFTR mutation (B) SPINK 1 mutation
 (C) Caludin mutation (D) PRSS 1 mutation
134. The following are true about Type A Esophageal ring except
- (A) Located at proximal border of esophageal vestibule
 (B) Broad symmetrical band of hypertrophied muscle (4 mm – 5 mm)
 (C) Covered by squamous epithelium
 (D) Associated with hiatus hernia
135. What should be the surveilance interval for non dysplastic barrett's esophagus, if the maximum extent of barrett's esophagus is equal to or more than 3 cm and is less than 10 cm
- (A) Every 1 year (B) Every 2 years
 (C) Every 3 years (D) Every 5 years

136. The IRP (Intergrated relaxation pressure) is the median of the maximal relaxation pressures of the EGJ
- (A) in 3 seconds during the 10-second window of EGJ relaxation that follows a swallow
 - (B) in 4 seconds during the 10-second window of EGJ relaxation that follows a swallow
 - (C) in 5 seconds during the 10-second window of EGJ relaxation that follows a swallow
 - (D) in 6 seconds during the 10-second window of EGJ relaxation that follows a swallow
137. Type III Sphincter of oddi Dysfunction patient will have:
(According to Modified Milwaukee Classification for Biliary SOD)
- (A) • Biliary-type pain
 - Serum alanine aminotransferase, aspartate aminotransferase, or alkaline phosphatase level $\geq 1.1 \times$ normal on 1 occasion
 - (B) • Biliary-type pain only
 - (C) • Biliary-type pain
 - Bile duct $> 10/$ mm
 - (D) • Biliary-type pain
 - Serum alanine aminotransferase, aspartate aminotransferase, or alkaline phosphatase level $\geq 1.1 \times$ normal on 1 occasion
 - Bile duct $> 10/$ mm
138. A 34-year-old man presented with symptoms suggestive of delayed gastric emptying. With regard to the physiology of gastric emptying, which of the following cells are responsible for controlling the slow-wave phase in the distal stomach?
- (A) Chief cells
 - (C) Interstitial cells of Cajal
 - (B) Enterochromaffin cells
 - (D) Mucous neck cells
139. Treatment success of Achalasia Cardia is defined as an Eckardt score of
- (A) Equal to 1
 - (C) Equal to or less than 3
 - (B) Equal to or less than 2
 - (D) More than 3
140. A 23-year-old man attended the gastroenterology clinic for advice. His brother was recently diagnosed with familial adenomatous polyposis, and genetic testing identified a germ-line mutation. He asked for your advice on further management. What would be the most appropriate next step?
- (A) Colonoscopy
 - (B) Flexible sigmoidoscopy
 - (C) Genetic testing
 - (D) Oesophagogastroduodenoscopy and colonoscopy
141. Regarding ulcerative colitis, which of the following statements is most accurate?
- (A) $> 25\%$ of patients with pancolitis eventually have a colectomy
 - (B) At 10 years, disease extent progresses in less than 10% of patients with proctitis
 - (C) The incidence of colorectal cancer is 20% at 20 years, and 40% at 30 years
 - (D) Maintenance 5-ASA therapy reduces colorectal cancer by 10%
142. All of the following are implicated as causative organisms in Recurrent pyogenic cholangitis EXCEPT
- (A) *Diphyllobothrium*
 - (B) *Opisthorchis species*
 - (C) *A. lumbricoides*
 - (D) *C. sinensis*

143. The following are true about testing for treatment success after H.Pylori eradication therapy except :
- (A) PPI should be withheld for 4 weeks
 - (B) Urea breath test atleast 4 weeks after completion of antibiotic therapy
 - (C) Fecal antigen testing atleast 4 weeks after completion of antibiotic therapy
 - (D) Biopsy based testing atleast 4 weeks after completion of antibiotic therapy
144. A patient presents with upper GI bleed and the endoscopic finding is adherent clot in the first part of duodenum. Which Forrest and Finlayson's description does this finding correspond to?
- (A) Ib
 - (B) IIa
 - (C) IIb
 - (D) IIc
145. A 52-year-old African American man with a 10-year history of Crohn's colitis underwent a gastroscopy and colonoscopy. Gastroscopy was macroscopically and microscopically normal. Colonic biopsies showed changes consistent with mild disease activity in the descending and sigmoid colon. Ileal biopsies were unremarkable. His disease was controlled on azathioprine at a standard dose. His father had colorectal cancer at the age of 63 years.
- Which of the following most accurately represents this patient's Montreal classification?
- (A) A1 L1 B1
 - (B) A1 L4 B3
 - (C) A3 L2 B1
 - (D) A2 L2 B3
146. All of the following are Absolute Contraindications to percutaneous biopsy EXCEPT
- (A) Uncooperative patient
 - (B) Ascites
 - (C) PT > 4 seconds over control, INR > 1.5
 - (D) Serious consideration of echinococcal cyst
147. Hepatocyte precursor Hepatoblasts arise from which germline
- (A) Endoderm
 - (B) Mesoderm
 - (C) Ectoderm
 - (D) Neuroderm
148. All of the following are risk factor for gallbladder carcinoma EXCEPT
- (A) Cholelithiasis (stone size > 1/ cm)
 - (B) Cholesterol polyp
 - (C) Chronic Salmonella Typhi or Paratyphi carrier status
 - (D) Segmental adenomyomatosis in patients ≥ 60 years of age
149. All of the following are true about Pancreatic rest EXCEPT
- (A) Ectopic (heterotopic) pancreatic tissue
 - (B) Has an independent blood supply
 - (C) Endoscopic band ligation and snare polypectomy are contraindicated for obtaining tissue for histopathology
 - (D) Can be found in the umbilicus
150. All of the following are absolute Contraindications to placement of a TIPS EXCEPT
- (A) Chronic encephalopathy
 - (B) Severe pulmonary hypertension
 - (C) Hepatic artery insufficiency (thrombosis, stenosis)
 - (D) Multiple hepatic cysts

151. The following points about Ménétrier's disease are all true except:
 (A) Always associated with protein-losing gastropathy
 (B) Hyperplastic, hyper secretory variant is associated with increased or normal acid secretion
 (C) Ménétrier's disease has been associated with Helicobacter Pylori infection
 (D) Ménétrier's disease has been associated with Helicobacter Pylori infection
152. Drugs indicated in treatment of Third Recurrence of C. Difficile are all EXCEPT
 (A) Vancomycin (B) Fidaxomicin
 (C) Rifaximin (D) Metronidazole
153. PRSS 2 encodes for
 (A) Trypsin (B) Cationic Trypsinogen
 (C) Anionic Trypsinogen (D) Meso Trypsinogen
154. Which is untrue regarding diaphragmatic hernia
 (A) Type I is the commonest
 (B) Sliding hiatus hernia is also called as paraesophageal hernia
 (C) Type III – is composed of mixed diaphragmatic hernias
 (D) Cameroons ulcer is seen in hiatus hernia
155. Intestinal mucosa synthesizes & secretes which of the following immunoglobulin
 (A) Secretory IgA (B) Secretory IgG
 (C) Secretory IgM (D) Secretory IgE
156. Regarding natural history of ulcerative colitis, all are true except
 (A) 6%-19% have a severe initial presentation
 (B) 20% of patients have only one attack followed by relapse free course
 (C) Upto 10% have a severe first attack ultimately requiring colectomy
 (D) In patients initially presenting with proctitis or proctosigmoiditis, disease extension occurs in 10% to 30% over a 10 year period
157. The proximal small intestine is the site for the absorption of all of the following except
 (A) Calcium (B) Iron
 (C) Folic acid (D) Bile acids
158. What is the MRI finding of refractory celiac disease type II?
 (A) Presence of less than 10 folds per 5 cm jejunum
 (B) Mesenteric fat infiltration
 (C) Bowel thickening
 (D) All of the above
159. In a patient with significant diarrhea, what should be the upper limit of fecal fat excretion ?
 (A) 7 g/day (B) 10 g/day
 (C) 14 g/day (D) 20 g/day
160. Acute fatty liver of pregnancy causes which type of portal hypertension
 (A) Presinusoidal (B) Sinusoidal
 (C) Post sinusoidal (D) Prehepatic

161. Which is untrue regarding NOD2/CARD15 gene in Crohn's disease
- (A) NOD2/CARD15 Protein is expressed in paneth cells, macrophages, lymphocytes etc.
 - (B) 50-60% of patients with Crohns disease have abnormal NOD2/CARD15 genes
 - (C) Homozygous mutations for NOD2/CARD15 have an odds ratio of 17.1 for Crohns disease
 - (D) Polymorphisms in NOD2/CARD15 are younger, have ileal disease and have higher propensity of stricture formation
162. According to AASLD 2019 recommendation. A MELD score of _____ should prompt consideration of steroid treatment in alcoholic hepatitis
- (A) > 20
 - (B) > 21
 - (C) > 18
 - (D) > 27
163. For induction of remission in mildly active left-sided colitis, the recommended treatment is
- (A) Oral 5-ASA at a dose of at least 2 g/d combined with Rectal Hydrocortisone at a dose of at least 500 g/d
 - (B) Oral 5-ASA at a dose of at least 2 g/d combined with oral Azathioprine 1-1.5mg/kg/day
 - (C) Rectal 5-ASA enemas at a dose of at least 1 g/d combined with oral 5-ASA at a dose of at least 2 g/d
 - (D) Rectal 5-ASA enemas at a dose of at least 2 g/d combined with oral 5-ASA at a dose of at least 1 g/d
164. Risk factors Predictive of a Poor Prognosis After Hemorrhage From Peptic Ulcer are all EXCEPT
- (A) Bleeding onset in hospital
 - (B) Severe co-morbid medical illness
 - (C) Fresh blood in NG tube
 - (D) Anterior duodenal bulb ulcer
165. 45 year old male patient diagnosed with high grade dysplasia in Barrett esophagus, what will be the next line of management
- (A) Esophagectomy
 - (B) Surveillance should be performed using high-resolution white-light endoscopy
 - (C) Endoscopic eradication therapy
 - (D) Long term PPI without any surveillance
166. Autosomal dominant cause of chronic Pancreatitis is
- (A) Carboxyl ester lipase (CEL) – MODY 8 phenotype
 - (B) CFTR, 2 severe variants in trans (cystic fibrosis)
 - (C) SPINK 1
 - (D) CLDN 2
167. The following about common variable immunodeficiency are true except :
- (A) Decreased IgG levels
 - (B) Small instestinal biopsy shows sprue like features
 - (C) Giardia are often isolated from patients with CVID
 - (D) Onset is usually in childhood
168. In a patient with HRS, recommended duration of vasopressor treatment is generally a maximum of _____ number weeks until HRS reverses or LT is performed
- (A) 1
 - (B) 2
 - (C) 3
 - (D) 4

169. Toxic megacolon is defined as
- (A) Acute colonic dilatation with a transverse colon diameter of more than 5 cm (on radiologic examination) and loss of haustration in a patient with a severe attack of colitis
 - (B) Acute colonic dilatation with a transverse colon diameter of more than 4 cm (on radiologic examination) and loss of haustration in a patient with a severe attack of colitis
 - (C) Acute colonic dilatation with a transverse colon diameter of more than 6 cm (on radiologic examination) and loss of haustration in a patient with a severe attack of colitis
 - (D) Acute colonic dilatation with a transverse colon diameter of more than 7 cm (on radiologic examination) and loss of haustration in a patient with a severe attack of colitis
170. On Ano-Rectal manometry, Type I Dyssynergic defecation is characterised by
- (A) The subject is unable to generate an adequate propulsive force together with an absent or inadequate relaxation of anal sphincter.
 - (B) The subject can generate an adequate propulsive force (rise in intra rectal pressure ≥ 40 mmHg) along with paradoxical increase in anal sphincter pressure
 - (C) The subject is unable to generate an adequate propulsive force; additionally there is paradoxical anal contraction
 - (D) The subject can generate an adequate propulsive force but there is either absent relaxation (a flat line) or inadequate ($\leq 20\%$) relaxation of anal sphincter
171. Among the Directly Acting Antiviral in treatment of Hepatitis C, NS5A is inhibited by which drug
- (A) Sofosbuvir
 - (B) Daclatasvir
 - (C) Glecaprevir
 - (D) Dasabuvir
172. All of the following causes Protein losing enteropathy by lymphatic obstruction or elevated lymphatic pressure EXCEPT
- (A) Lymphatic-enteric fistula
 - (B) Budd-Chiari syndrome
 - (C) Whipple disease
 - (D) α -Chain disease
173. All of the following are cutaneous manifestations of inflammatory bowel disease EXCEPT
- (A) Lichen Planus
 - (B) Pyostomatitis vegetans
 - (C) Erythema nodosum
 - (D) Pyoderma gangrenosum
174. POEMS syndrome includes all of the following EXCEPT
- (A) Pancreatitis
 - (B) Organomegaly
 - (C) M protein spike
 - (D) Skin Changes
175. AARC score is used in which condition
- (A) Acute liver failure
 - (B) Acute on chronic liver failure
 - (C) Alcoholic Hepatitis
 - (D) Autoimmune Hepatitis
176. Antibiotic-associated diarrhoea is least common with which of the Antibiotics
- (A) Cefixime
 - (B) Amoxicillin-clavulanate
 - (C) Trimethoprim-sulpamethoxazole
 - (D) Ampicillin
177. Genetic defect in peutz jehghers syndrome is :
- (A) APC
 - (B) MLH 1
 - (C) STK 11
 - (D) PTEN tumor supressor gene

178. Bedside Index of Severity in Acute Pancreatitis (BISAP) incorporates how many clinical and laboratory parameters?
 (A) 4 (B) 5
 (C) 6 (D) 7
179. All of the following are components of borchardt's triad in gastric volvulus, except :
 (A) Pain (B) Unproductive retching
 (C) Hematemesis (D) Inability to pass NG tube
180. Which type of gastric carcinoid is associated with MEN I/ZES
 (A) Type 1 (B) Type 2
 (C) Type 3 (D) Type 4
181. Paris Criteria for primary biliary cholangitis/autoimmune hepatitis (PBC-AIH) overlap syndrome includes all of the following EXCEPT
 (A) Moderate to severe interface hepatitis (B) ALP > 2 × ULN or GGT > 5 × ULN
 (C) IgM ≥ 2 × ULN (D) Smooth muscle antibodies > 1 : 20
182. In a patient with refractory ascites, diuretic should be discontinued if the patient does not excrete
 (A) > 20 mmol/day of Sodium (B) > 30 mmol/day of Sodium
 (C) > 50 mmol/day of Sodium (D) > 60 mmol/day of Sodium
183. All of the following are Definitive Risk factors for Gastric Adenocarcinoma EXCEPT
 (A) Adenomatous gastric polyps (B) History of gastric surgery (esp. Billroth II)
 (C) Hyperplastic and fundic gland polyps (D) EBV infection
184. All of the following are characteristics of Cystic fluid in Malignant Mucinous Cystadenoma EXCEPT
 (A) High Viscosity (B) High CEA level
 (C) High Amylase level (D) Intermediate to High CA 72-4 level
185. All of the following are characteristics of Type II autoimmune pancreatitis EXCEPT
 (A) Associated with IBD
 (B) No IgG4 cells in histology
 (C) Obliterative phlebitis is common in histology
 (D) Average age at presentation is 40-50 years
186. Rome IV Diagnostic Criteria for Centrally mediated Abdominal Pain Syndrome includes all of the following EXCEPT
 (A) Continuous or nearly continuous abdominal pain
 (B) Pain is associated with physiological events (e.g., eating, defecation, menses)
 (C) Pain limits some aspect of daily functioning
 (D) Pain is not feigned
187. All of the following are Extraesophageal Manifestations of GERD EXCEPT
 (A) Asthma (B) Chronic Sinusitis
 (C) Excess mucus or phlegm (D) Globus sensation
188. Which Zone of Liver is most susceptible for Ischemic injury
 (A) Zone 1 (B) Zone 2
 (C) Zone 3 (D) All of the above
189. In a case of esophageal atresia which type of tracheoesophageal fistula is the most common
 (A) H Type (B) Distal type
 (C) Proximal type (D) Mid type

190. The mucosal folds visible on the luminal surface of small intestine is called
 (A) Folds of kerckring (B) Folds of luzern
 (C) Folds of santorini (D) Kruckenberg folds
191. What is the initial test of choice to diagnose intussusception ?
 (A) X ray (B) USG
 (C) CT (D) MRI
192. The following are true about paediatric GIST except :
 (A) Most common in stomach (B) Common in girls
 (C) KIT mutation is common (D) Wild type show poor response to Imatinib
193. Which screening tool is used for assessment of protein energy malnutrition in geriatric population ?
 (A) Subjective global assesment (B) Mini nutritional assesment
 (C) Prognostic nutritional index (D) Hospital nutritional index
194. The age group to screen for pancreatic cancer in patients at increased risk for familial pancreatic cancer is :
 (A) 2 years younger than the youngest effected blood relative
 (B) 5 years younger than the youngest effected blood relative
 (C) 8 years younger than the youngest effected blood relative
 (D) 10 years younger than the youngest effected blood relative
195. A patient with eosinophilic esophagitis is said to be in histological remission when :
 (A) Eosinophils per HPF < 5 (B) Eosinophils per HPF < 10
 (C) Eosinophils per HPF < 15 (D) dadaEosinophils per HPF < 20
196. The following are true about sigmoid volvulus except :
 (A) In patients with peritonitis – do not detorse the volvulus
 (B) Undergo resection of the compromised bowel in the volvulized position
 (C) Subtotal colectomy can be done
 (D) Segmental resection can be done
197. In post-operative ileus Colonic activity usually returns by
 (A) Within 6 hours of surgery (B) Within 12-36 hours of surgery
 (C) Within 2-3 days of surgery (D) > 3 days of surgery
198. The pacemaker region of stomach is located in
 (A) Anatomical cardia
 (B) Between Cardia and Fundus along greater curvature
 (C) Between Fundus and Proximal corpus along greater curvature
 (D) Between Corpus and Antrum along greater curvature
199. The following are true about endoscopy during pregnancy except :
 (A) Supplemental oxygen during procedure
 (B) Supine position in 2nd and 3rd trimester to be avoided
 (C) Benzodiapines are safe in 1st trimester during endoscopy
 (D) Avoid breast feeding and discard milk for 4 hours after procedure requiring sedation
200. The following are true about cohort study except:
 (A) Interventional analysis (B) Followed up over a period of time
 (C) Can be prospective (D) Can be retrospective