# **INI CET 2025 Question Paper with Solutions**

**Time Allowed :**3 Hours | **Maximum Marks :**100 | **Total questions :**60

# **General Instructions**

#### **General Instructions:**

- i) All questions are compulsory. Marks allotted to each question are indicated in the margin.
- ii) Answers must be precise and to the point.
- iii) In numerical questions, all steps of calculation should be shown clearly.
- iv) Use of non-programmable scientific calculators is permitted.
- v) Wherever necessary, write balanced chemical equations with proper symbols and units.
- vi) Rough work should be done only in the space provided in the question paper.

## Q1. Which of the following is the most common cause of acute pancreatitis?

- (1) Alcohol abuse
- (2) Gallstones
- (3) Hypertriglyceridemia
- (4) Viral infections

**Correct Answer:** (1) Alcohol abuse

#### **Solution:**

#### **Step 1: Understanding acute pancreatitis.**

Acute pancreatitis is an inflammation of the pancreas that occurs suddenly and can be severe. The most common causes are alcohol abuse and gallstones.

#### **Step 2: Analyzing the options.**

- (1) **Alcohol abuse:** This is the most common cause of acute pancreatitis. Chronic or heavy drinking can lead to inflammation of the pancreas.
- (2) Gallstones: Gallstones can also cause acute pancreatitis, but alcohol abuse is more common.
- (3) **Hypertriglyceridemia:** This is a less common cause of pancreatitis, typically occurring with very high triglyceride levels.
- **(4) Viral infections:** Though viral infections can cause pancreatitis, it is a rarer cause compared to alcohol abuse and gallstones.

## Step 3: Conclusion.

The most common cause of acute pancreatitis is (1) Alcohol abuse.

#### Quick Tip

In clinical practice, alcohol abuse is one of the leading causes of acute pancreatitis, followed by gallstones and hypertriglyceridemia.

# Q2. Which of the following conditions is most commonly associated with hypoparathyroidism?

- (1) Rheumatoid arthritis
- (2) Chronic renal failure
- (3) Diabetes mellitus
- (4) Hyperthyroidism

Correct Answer: (2) Chronic renal failure

#### **Solution:**

# Step 1: Understanding hypoparathyroidism.

Hypoparathyroidism is a condition where there is insufficient production of parathyroid hormone (PTH), which regulates calcium and phosphorus levels. One of the most common causes is chronic renal failure.

## **Step 2: Analyzing the options.**

- (1) **Rheumatoid arthritis:** This is an autoimmune disease affecting joints, and not typically associated with hypoparathyroidism.
- (2) Chronic renal failure: Chronic kidney disease is strongly associated with hypoparathyroidism due to disturbances in calcium and phosphorus metabolism.
- (3) **Diabetes mellitus:** Diabetes does not directly cause hypoparathyroidism, though it can complicate other conditions.
- **(4) Hyperthyroidism:** This condition affects the thyroid but is not associated with hypoparathyroidism.

## **Step 3: Conclusion.**

The most common condition associated with hypoparathyroidism is (2) Chronic renal failure.

## Quick Tip

In cases of chronic renal failure, the kidneys are unable to effectively regulate calcium and phosphorus levels, leading to hypoparathyroidism.

#### Q3. The drug of choice for treating acute gout flare is:

## (1) Colchicine

- (2) Allopurinol
- (3) NSAIDs
- (4) Steroids

Correct Answer: (1) Colchicine

#### **Solution:**

#### Step 1: Understanding acute gout flare.

Acute gout flare is a painful condition caused by the accumulation of uric acid crystals in the joints. Treatment typically focuses on reducing inflammation and pain.

## **Step 2: Analyzing the options.**

- (1) Colchicine: Colchicine is often the drug of choice for treating acute gout attacks, as it helps reduce inflammation and prevent crystal formation.
- (2) Allopurinol: Allopurinol is used for chronic gout management, not during acute flares.
- (3) **NSAIDs:** Nonsteroidal anti-inflammatory drugs (NSAIDs) are also commonly used to treat acute gout, but colchicine is more specifically effective.
- (4) **Steroids:** Steroids may be used for severe cases, but colchicine is preferred in many situations for its effectiveness.

#### **Step 3: Conclusion.**

The drug of choice for treating acute gout flare is (1) Colchicine.

## Quick Tip

For acute gout attacks, colchicine is effective in reducing inflammation and pain. NSAIDs are also commonly used as alternatives.

# Q4. Which of the following bacteria is the most common cause of community-acquired pneumonia?

- (1) Streptococcus pneumoniae
- (2) Mycoplasma pneumoniae
- (3) Haemophilus influenzae

## (4) Staphylococcus aureus

Correct Answer: (1) Streptococcus pneumoniae

#### **Solution:**

## **Step 1: Understanding community-acquired pneumonia (CAP).**

Community-acquired pneumonia (CAP) is an infection of the lungs that occurs outside of a hospital setting. The causative organisms are often bacterial.

# **Step 2: Analyzing the options.**

- (1) **Streptococcus pneumoniae:** This is the most common cause of community-acquired pneumonia. It is a leading bacterial pathogen in CAP.
- **(2) Mycoplasma pneumoniae:** While this bacterium is a common cause of CAP, it is less frequent than Streptococcus pneumoniae.
- (3) Haemophilus influenzae: This can cause CAP, especially in people with chronic respiratory conditions, but it is not the most common.
- (4) **Staphylococcus aureus:** This bacterium can cause severe pneumonia but is less common in community-acquired infections compared to Streptococcus pneumoniae.

# **Step 3: Conclusion.**

The most common cause of community-acquired pneumonia is (1) **Streptococcus pneumoniae**.

#### Quick Tip

Streptococcus pneumoniae is the most common cause of CAP and is treated with antibiotics like penicillin or amoxicillin.

# Q5. Which of the following is the hallmark of Type 1 Diabetes mellitus?

- (1) Insulin resistance
- (2) Insulin deficiency
- (3) Impaired insulin secretion
- (4) Insulin sensitivity

Correct Answer: (2) Insulin deficiency

#### **Solution:**

# Step 1: Understanding Type 1 Diabetes mellitus.

Type 1 diabetes is characterized by the autoimmune destruction of pancreatic beta cells, which results in insulin deficiency. This is different from Type 2 diabetes, which involves insulin resistance.

## **Step 2: Analyzing the options.**

- (1) Insulin resistance: This is the hallmark of Type 2 diabetes, not Type 1.
- **(2) Insulin deficiency:** This is the correct answer. Insulin deficiency occurs due to the loss of beta cells in the pancreas.
- (3) Impaired insulin secretion: This can occur in Type 1 diabetes, but the primary hallmark is insulin deficiency.
- (4) Insulin sensitivity: This is related to Type 2 diabetes and insulin resistance, not Type 1.

### **Step 3: Conclusion.**

The hallmark of Type 1 diabetes is (2) Insulin deficiency.

# Quick Tip

In Type 1 diabetes, the body cannot produce insulin due to the destruction of beta cells, leading to insulin deficiency.

# Q6. Which of the following is a primary risk factor for the development of aortic dissection?

- (1) Hypertension
- (2) Diabetes mellitus
- (3) Hyperlipidemia
- (4) Smoking

Correct Answer: (1) Hypertension

#### **Solution:**

## Step 1: Understanding aortic dissection.

Aortic dissection is a serious condition in which a tear occurs in the aortic wall, often leading to catastrophic consequences. Hypertension is the leading risk factor.

## **Step 2: Analyzing the options.**

- (1) **Hypertension:** Hypertension (high blood pressure) is the most significant risk factor for aortic dissection, as it puts excessive strain on the aorta.
- (2) Diabetes mellitus: While diabetes can contribute to vascular diseases, it is not a primary risk factor for aortic dissection.
- (3) **Hyperlipidemia:** Hyperlipidemia is a risk factor for atherosclerosis but not specifically for aortic dissection.
- (4) **Smoking:** Smoking is a general risk factor for cardiovascular diseases but is not a leading cause of aortic dissection.

## Step 3: Conclusion.

The primary risk factor for the development of aortic dissection is (1) Hypertension.

### Quick Tip

Hypertension is the leading cause of aortic dissection because it causes increased stress on the aortic walls, leading to potential tears.

#### Q7. The most sensitive test for diagnosing acute myocardial infarction (MI) is:

- (1) Troponin I
- (2) Creatine kinase-MB (CK-MB)
- (3) Myoglobin
- (4) Electrocardiogram (ECG)

**Correct Answer:** (1) Troponin I

#### **Solution:**

#### Step 1: Understanding acute myocardial infarction (MI).

Acute myocardial infarction (MI), commonly known as a heart attack, occurs when blood flow to part of the heart muscle is blocked. Diagnosing MI early is critical for treatment.

**Step 2: Analyzing the options.** 

(1) **Troponin I:** This is the most sensitive and specific biomarker for diagnosing acute

myocardial infarction. Elevated levels indicate heart muscle damage.

(2) Creatine kinase-MB (CK-MB): CK-MB is less sensitive and specific than troponin I for

diagnosing MI.

(3) Myoglobin: Myoglobin is an early marker but lacks specificity for diagnosing MI. It can

be elevated in other conditions.

(4) Electrocardiogram (ECG): While ECG is crucial in diagnosing MI, it may not always

detect early infarction, making troponin I more reliable.

**Step 3: Conclusion.** 

The most sensitive test for diagnosing acute myocardial infarction is (1) **Troponin I**.

Quick Tip

Troponin I is the gold standard for diagnosing acute myocardial infarction due to its

high sensitivity and specificity for heart muscle injury.

Q8. A 45-year-old woman presents with unexplained weight loss, excessive thirst, and

frequent urination. Her blood glucose level is found to be 250 mg/dL. Which of the

following is the most likely diagnosis?

(1) Type 2 diabetes

(2) Type 1 diabetes

(3) Diabetic ketoacidosis

(4) Hyperosmolar hyperglycemic state

**Correct Answer:** (1) Type 2 diabetes

**Solution:** 

**Step 1: Understanding the symptoms.** 

The patient presents with classic symptoms of hyperglycemia, including unexplained weight

loss, excessive thirst, and frequent urination. These are commonly seen in diabetes. The

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blood glucose level of 250 mg/dL is elevated but not as high as in conditions like diabetic ketoacidosis or hyperosmolar hyperglycemic state.

# **Step 2: Analyzing the options.**

- (1) **Type 2 diabetes:** This is the most likely diagnosis. The symptoms and blood glucose level fit well with Type 2 diabetes, which is more common in adults.
- (2) **Type 1 diabetes:** Type 1 diabetes often presents with more severe symptoms, such as diabetic ketoacidosis, which is not mentioned in this case.
- (3) **Diabetic ketoacidosis:** Diabetic ketoacidosis typically presents with a much higher blood glucose level and additional signs like fruity breath, vomiting, and dehydration.
- **(4) Hyperosmolar hyperglycemic state:** This condition involves much higher blood glucose levels, often over 600 mg/dL, and would not fit the current clinical presentation.

## Step 3: Conclusion.

The most likely diagnosis is (1) **Type 2 diabetes**, as the symptoms and glucose level are characteristic of this condition.

## Quick Tip

Type 2 diabetes is more common in adults and can present with elevated blood glucose levels along with classic symptoms such as weight loss, thirst, and frequent urination.

#### Q9. Which of the following is the first-line treatment for acute asthma exacerbation?

- (1) Oral corticosteroids
- (2) Inhaled beta-agonists
- (3) Intravenous magnesium sulfate
- (4) Inhaled anticholinergics

**Correct Answer:** (2) Inhaled beta-agonists

#### **Solution:**

#### **Step 1: Understanding acute asthma exacerbation.**

During an acute asthma exacerbation, patients experience worsening symptoms due to

airway constriction and inflammation. Immediate treatment focuses on bronchodilation and reducing airway obstruction.

## **Step 2: Analyzing the options.**

- (1) Oral corticosteroids: Oral corticosteroids are often used in more severe cases or for long-term control but are not the first-line treatment for acute exacerbation.
- (2) Inhaled beta-agonists: Inhaled beta-agonists are the first-line treatment for acute asthma exacerbation as they quickly relax the muscles around the airways, improving airflow.
- (3) Intravenous magnesium sulfate: Magnesium sulfate is used in severe cases of asthma exacerbation, especially when beta-agonists are not effective.
- **(4) Inhaled anticholinergics:** These can be used as an adjunct to beta-agonists in acute exacerbations, but they are not first-line treatments.

## **Step 3: Conclusion.**

The first-line treatment for acute asthma exacerbation is (2) Inhaled beta-agonists.

## Quick Tip

Inhaled beta-agonists are fast-acting bronchodilators that relieve acute asthma symptoms by relaxing airway muscles.

## Q10. Which of the following is the most common form of dementia?

- (1) Alzheimer's disease
- (2) Vascular dementia
- (3) Lewy body dementia
- (4) Frontotemporal dementia

**Correct Answer:** (1) Alzheimer's disease

#### **Solution:**

#### **Step 1: Understanding dementia.**

Dementia is a general term for a decline in cognitive ability severe enough to interfere with daily life. Alzheimer's disease is the most common cause of dementia.

## **Step 2: Analyzing the options.**

- (1) **Alzheimer's disease:** Alzheimer's disease is the most common form of dementia, accounting for 60-80(2) **Vascular dementia:** This form of dementia is caused by impaired blood flow to the brain, often due to strokes, but it is less common than Alzheimer's.
- (3) **Lewy body dementia:** Lewy body dementia involves abnormal protein deposits in the brain and is less common than Alzheimer's.
- (4) Frontotemporal dementia: This type of dementia affects the frontal and temporal lobes of the brain, but it is less common than Alzheimer's disease.

## **Step 3: Conclusion.**

The most common form of dementia is (1) Alzheimer's disease.

# Quick Tip

Alzheimer's disease is the leading cause of dementia, marked by memory loss and changes in cognitive function. Early diagnosis can help manage symptoms.