1. Patch test is done to document:
   (a) Type I hypersensitivity
   (b) Delayed type hypersensitivity
   (c) Autoimmune disease
   (d) Immunocomplex deposition

2. Which of the following shows deposition of IgA in dermal papilla?
   (a) Dermatitis herpetiformis
   (b) IgA papillomatosis of childhood
   (c) Bullous pemphigoid
   (d) Gestational herpes

3. Intraepidermal IgG deposition is seen in:
   (a) Pemphigous
   (b) Bullous pemphigoid
   (c) Herpes genitalis
   (d) Not recalled

4. A female has hypopigmented lesion of centre of forehead. Drug responsible is?
   (a) Hydroquinone
   (b) Ether metabolite of hydroquinone
   (c) Paratertiarybutylcatechol
   (d) Paratertiarybutylphenol

5. All are seen in Reiter’s syndrome except:
   (a) Subcutaneous nodules
   (b) Oral ulcers
   (c) Keratoderma blenorrhagicum
   (d) Circinate balanitis

6. A person suffers from B27 associated reactive arthritis, urethritis and conjunctivitis. Which is most likely organism involved in this case?
   (a) Borrelia burgdorferi
   (b) Ureaplasma urealyticum
   (c) Betahemolytic streptococci
   (d) Streptococcus bovis

7. Child presents with linear verrucous plaques on the trunk with vacuolisation of keratinocytes in S. Spinosum and S. Granulosum. Diagnosis is:
   (a) Incontinenta pigmenti
   (b) Delayed hypersensitivity reaction
   (c) Verrucous epidermal nevus
   (d) Linear darriers disease

8. In cengenital dystrophic variety of epidermolysis bullosa, mutation is seen in the gene conding for:
   (a) Laminin 4
   (b) Collagen type 7
   (c) Alpha 6 integerin
   (d) Keratin 14

9. Auspitz sign is seen in:
   (a) Pustular psoriasis
   (b) Plaque type psoriasis
   (c) Lichen planus
   (d) Pityriasis rubra pilaris

10. Keratoderma blenorrhagicum is seen in:
    (a) Psoriasis
    (b) Reiter’s syndrome
    (c) Syphilis
    (d) Disseminated gonococcal infection

11. Most common cause of plant induced dermatitis in India is:
    (a) Poison ivy
    (b) Parthenium
    (c) Ragweed
    (d) Cotton fibres

12. All causes cicatricial alopecia, except:
    (a) Lichen planus
    (b) DLE
    (c) Pseudo-pelade
    (d) Alopecia areata
13. About Vitiligo all are true, except:
   (a) Genetic predisposition is present
   (b) Narrow range UV-B is very effective
   (c) Topical steroid used for localised lesion
   (d) Leukotrichia has good prognosis

14. A 22 years woman with diffuse hair loss for 1 month, with past history of enteric fever, before 4 months, likely cause for hair loss is:
   (a) Androgenic alopecia
   (b) Telogen effluvium
   (c) Anagen effluvium
   (d) Alopecia areata

15. Tuberculides are seen in:
   (a) Lupus vulgaris
   (b) Scrofuloderma
   (c) Lichen scrofulosorum
   (d) Erythema nodosum

16. A 3-years-old child has eczematous dermatitis on extensor surfaces. His mother has a history of Bronchial asthma. Diagnosis should be:
   (a) Atopic dermatitis
   (b) Contact dermatitis
   (c) Seborrhic dermatitis
   (d) Infantile eczematous dermatitis

17. Pityriasis Rosea, truth is:
   (a) Self limiting
   (b) Chronic relapsing
   (c) Life threatening infection
   (d) Caused by dermatophytes

18. Which of the following is contraindicated in Androgenic Alopecia:
   (a) Testosterone
   (b) Cyproterone
   (c) Acetate Finasteride
   (d) Minoxidil

19. ‘Chancre redux’ is a clinical feature of:
   (a) Early relapsing syphilis
   (b) Late syphilis
   (c) Chancroid
   (d) Recurrent herpes simplex infection

20. Anagen phase of the hair indicates:
   (a) The phase of activity and growth
   (b) The phase of transition
   (c) The phase of resting
   (d) The phase of degeneration

21. Max. Joseph’s space is a histopathological feature of:
   (a) Psoriasis vulgaris
   (b) Lichen planus
   (c) Pityriasis rosea
   (d) Parapsoriasis

22. Ivermectin is indicated in the treatment of:
   (a) Syphilis
   (b) Scabies
   (c) Tuberculosis
   (d) Dermatophytosis

23. The following drug is not used for the treatment of type II lepra reaction:
   (a) Chloroquin
   (b) Thalidomide
   (c) Cyclosporine
   (d) Corticosteroids

24. The main cytokine, involved in erythema nodusum lepromatum (ENL) reaction is:
   (a) Interleukin-2
   (b) Interferon-gamma
   (c) Tumor necrosis factor-alpha
   (d) Macrophage colony stimulating factor

25. The following test is not used for diagnosis of leprosy:
   (a) Lepramin test
   (b) Slit skin smear
   (c) Fine needle aspiration cytology
   (d) Skin biopsy

26. Air-borne contact dermatitis can be diagnosed by:
   (a) Skin biopsy
   (b) Patch test
   (c) Prick test
   (d) Estimation of serum IgE levels
27. ‘Exclamation mark’ hair is a feature of:
   (a) Telogen effluvium 
   (b) Androgenetic alopecia 
   (c) Alopecia areata 
   (d) Alopecia mucinosa 

28. Pautrier's micro-abscess is a histological feature of:
   (a) Sarcoidosis 
   (b) Tuberculosis 
   (c) Mycosis fungoides 
   (d) Pityriasis Lichenoides Chronica 

29. ‘Adenoma sebaceum’ is a feature of:
   (a) Neurofibromatosis 
   (b) Tuberous sclerosis 
   (c) Xanthomatosis 
   (d) Incontinentia pigmenti 

30. A 27-years-old male had burning micturition and urethral discharge. After 4 weeks he developed joint pains involving both the knees and ankles, redness of the eye and skin lesion. The most probable clinical diagnosis is:
   (a) Psoriasis vulgaris 
   (b) Reiter’s syndrome 
   (c) Behcet’s syndrome 
   (d) Sarcoïdosis 

31. Which one of the following is the treatment of choice for Dermatitis Herpetiformis?
   (a) Corticosteroids 
   (b) Dapsone 
   (c) Methotrexate 
   (d) Retinoids 

32. A 6-month-old infant presented with multiple papules and exudative lesions on the face, scalp, trunk and few vesicles on the palms and soles for 2 weeks. His mother had history of itchy lesions. The most likely diagnosis is:
   (a) Scabies 
   (b) Infantile eczema 
   (c) Infantile seborrhoeic dermatitis 
   (d) Impetigo contagiosa 

33. “Pinch” purpura is diagnostic of:
   (a) Systemic primary amyloidosis 
   (b) Secondary systemic amyloidosis 
   (c) Idiopathic thrombocytopenic purpura 
   (d) Drug induced purpura 

34. A 40-years-old woman presented with a 8 month history of erythema, swelling of the periobital region and papules, plaques on the dorsolateral aspect of forearms and knuckles with ragged cuticles. There was no muscle weakness. The most likely diagnosis is:
   (a) Systemic lupus erythematosus 
   (b) Dermatomyositis 
   (c) Systemic sclerosis 
   (d) Mixed connective tissue disorder 

35. A 40-years-old male had multiple blisters over the trunk and extremities. Direct immunofluorescence studies showed linear IgG deposits along the basement membrane. Which of the following is the most likely diagnosis?
   (a) Pemphigus vulgaris 
   (b) Pemphigus foliaceous 
   (c) Bullous Pemphigoid 
   (d) Dermatitis herpetiformis 

36. A 9-years-old boy has multiple itchy erythematos among the following all over the body for 2 days. There is no respiratory difficulty. Which is the best treatment?
   (a) Antihelminthics 
   (b) Systemic corticosteroids 
   (c) Antihistamines 
   (d) Adrenaline 

37. A 27-year-old patient was diagnosed to have borderline leprosy and started on multibacillary multi-drug therapy. Six weeks later, he developed pain in the nerves and redness and swelling of the skin lesions. The management of his illness should include all of the following, except:
   (a) Stop anti-leprosy drugs 
   (b) Systemic corticosteroids 
   (c) Rest to the limbs affected 
   (d) Analgesics
38. Rakesh, a 27-years-old boy had itchy, excoriated papules on the forehead and the exposed parts of the arms and legs for 3 years. The disease was most severe in the rainy season and improved completely in winter. The most likely diagnosis is:
   (a) Insect bite hypersensitivity
   (b) Scabies
   (c) Urticaria
   (d) Atopic dermatitis

39. A 55-years-old male, with uncontrolled diabetes mellitus and hypertension, developed severe airborne contact dermatitis. The most appropriate drug for his treatment would be:
   (a) Systemic corticosteroids
   (b) Thalidomide
   (c) Azathioprine
   (d) Cyclosporine

40. A 30-years-old male patient has a large, spreading and exuberant ulcer with bright red granulation tissue over the glands penis. There was no lymphadenopathy. The most likely causative organism is:
   (a) Treponema pallidum
   (b) Herpes simplex virus type 1
   (c) Herpes simplex virus type 2
   (d) Calymmatobacterium granulomatis

41. A 22-years-old male patient present with a complaint of severe itching and white scaly lesions in the groin for past month. Which of the following is most likely to be the causative agent:
   (a) Trichophyton rubrum
   (b) Candida albicans
   (c) Candida glabrata
   (d) Malassezia furfur

42. A 16-years-old student reported for the evaluation of multiple hypopigmented macules on the trunk and limbs. All of the following tests are useful in making a diagnosis of leprosy, except:
   (a) Sensation testing
   (b) Lepromin test
   (c) Slit smears
   (d) Skin biopsy

43. A 12-years-old boy had a gradually progressive plaque on a buttock for the last 3 years. The plaque was 15 cm in diameter, annular in shape, with crusting and induration at the periphery and scarring at the center. The most likely diagnosis is:
   (a) Tinea corporis
   (b) Granuloma annulare
   (c) Lupus vulgaris
   (d) Borderline leprosy

44. A 24-years-old man had multiple, small hypopigmented macules on the upper chest and back for the last three months. The macules were circular, arranged around follicles and many had coalesced to form large sheets. The surface of the macules showed fine scaling. He had similar lesions one year ago which subsided with treatment. The most appropriate investigation to confirm the diagnosis is:
   (a) Potassium hydroxide preparation of scales
   (b) Slit skin smear from discrete macules
   (c) Tzanck test
   (d) Skin biopsy of coalesced macules

45. A 22-years-old woman developed small itchy wheals after physical exertion, walking in the sun, eating hot spicy food and when she was angry. The most likely diagnosis is:
   (a) Chronic idiopathic urticaria
   (b) Heat urticaria
   (c) Solar urticaria
   (d) Cholinergic urticaria

46. A 45-years-old male had multiple hypoaesthetic mildly erythematous large plaques with elevated margins on trunk and extremities. His ulnar and lateral popliteal nerves on both sides were enlarged. The most probable diagnosis is:
   (a) Lepromatous leprosy
   (b) Borderline leprosy
   (c) Borderline tuberculoid leprosy
   (d) Borderline lepromatous leprosy

47. The following drug is indicated in the treatment of pityriasis versicolor:
   (a) Ketoconazole
   (b) Metronidazole
   (c) Griseofulvin
   (d) Chloroquine
48. A 24-years-old male presents to a STD clinic with a single painless ulcer on external genitalia. The choice of laboratory test to look for the etiological agent would be:
   (a) Scrappings from ulcer for culture on chocolate agar with antibiotic supplement.
   (b) Serology for detection of specific IgM antibodies.
   (c) Scrappings from ulcer for dark field microscopy.
   (d) Scrappings from ulcer for tissue culture.

49. Podophyllum resin is indicated in the treatment of:
   (a) Psoriasis
   (b) Pemphigus
   (c) Condyloma acuminata
   (d) Condylomata lata

50. A 24-years-old female has flaccid bullae in the skin and oral erosions. Histopathology shows intraepidermal acantholytic blister. The most likely diagnosis is:
   (a) Pemphigoid
   (b) Erythema multiforme
   (c) Pemphigus vulgaris
   (d) Dermatitis herpetiformis
<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>A 45-years-old male has multiple grouped vesicular lesions present on the T10 segment dermatome associated with pain. The most likely diagnosis is:</td>
<td>(a) Herpes zoster (b) Dermatitis herpetiformis (c) Herpes simplex (d) Scabies</td>
</tr>
<tr>
<td>2.</td>
<td>A 28-years-old patient has multiple grouped papulovesicular lesions on both elbows, knees, buttocks and upper back associated with severe itching. The most likely diagnosis is:</td>
<td>(a) Pemphigus vulgaris (b) Bullous pemphigoid (c) Dermatitis herpetiformis (d) Herpes zoster</td>
</tr>
<tr>
<td>3.</td>
<td>A child has multiple itchy papular lesions on the genitalia and fingers similar lesions are also seen in younger brother. Which of the following is most possible diagnosis?</td>
<td>(a) Papular urticaria (b) Scabies (c) Atopic dermatitis (d) Allergic contact dermatitis</td>
</tr>
<tr>
<td>4.</td>
<td>Which layer of epidermis is underdeveloped in the VLBW infants in the initial 7 days?</td>
<td>(a) Stratum germinativum (b) Stratum granulosum (c) Stratum lucidum (d) Stratum corneum</td>
</tr>
<tr>
<td>5.</td>
<td>Scabies, an infection of the skin caused by Sarcoptes scabie, is an example of:</td>
<td>(a) Water borne disease (b) Water washed disease (c) Water based disease (d) Water related disease</td>
</tr>
<tr>
<td>6.</td>
<td>Treatment of pustular psoriasis is:</td>
<td>(a) Thalidomide (b) Retinoids (c) Hydroxyurea (d) Methotrexate</td>
</tr>
<tr>
<td>7.</td>
<td>A patient presents with erythematous scaly lesions on extensor aspect of elbows and knee. The clinical diagnosis is got by:</td>
<td>(a) Auspitz sign (b) KOH smear (c) Tzanck smear (d) Skin biopsy</td>
</tr>
<tr>
<td>8.</td>
<td>Actinic keratosis is seen in:</td>
<td>(a) Basal cell carcinoma (b) Squamous cell carcinoma (c) Malignant melanoma (d) Epithelial cell carcinoma</td>
</tr>
<tr>
<td>9.</td>
<td>A 30-years-old female presents with history of itching under right breast. On examination annular ring lesion was present under the breast. The diagnosis is:</td>
<td>(a) Trichophyton rubrum (b) Candida albicans (c) Epidermophyton (d) Microsporum</td>
</tr>
<tr>
<td>10.</td>
<td>Wood’s lamp light is used in the diagnosis of:</td>
<td>(a) Tinea capitis (b) Candida albicans (c) Histoplasma (d) Cryptococcos</td>
</tr>
<tr>
<td>11.</td>
<td>A patient presented with multiple nodulocystic lesions on the face. The drug of choice is:</td>
<td>(a) Retinoids (b) Antibiotics (c) Steroids (d) UV light</td>
</tr>
</tbody>
</table>
12. Acne Vulgaris is due to involvement of:
   (a) Sebaceous Gland
   (b) Pilosebaceous Gland
   (c) Eccrine Gland
   (d) Apocrine Gland

13. A patient with psoriasis was started on systemic steroids. After stopping t/t patient developed generalised pustules all over his body, the most likely cause is:
   (a) Drug induced reactions
   (b) Pustular psoriasis
   (c) Bacterial infection
   (d) Septicemia

14. A patient presents with scarring Alopecia, thinned nails, hypopigmented macular lesions over trunk and oral mucosa. The diagnosis is:
   (a) Psoriasis
   (b) Leprosy
   (c) Lichenplanus
   (d) Pemphigus

15. A young boy presented with lesion over his right buttock which had peripheral scaling and central scarring. The investigation of choice would be:
   (a) Tzank smear
   (b) KOH preparation
   (c) Biopsy
   (d) Saboraud’s agar

16. An 8-years-old boy presents with a well defined annular lesion over the buttock with central scarring that is gradually progressing over the last 8 months. The diagnosis is:
   (a) Annular psoriasis
   (b) Lupus vulgaris
   (c) Tinea corporis
   (d) Chronic granulomatous disease

17. The characteristic Nail finding in lichen planus is:
   (a) Pitting
   (b) Pterygium
   (c) Beau’s lines
   (d) Hyperpigmentation of the Nails

18. An adult presents with oval scaly hypopigmented macule over the chest and the back. The diagnosis is:
   (a) Leprosy
   (b) Lupus vulgaris
   (c) Pityriasis versicolor
   (d) Lichen Planus

19. A 40-years-old farmer with a history of recurrent attacks of porphyria complains of itching when exposes to the sun and maculopapular rash on sun exposed areas, his symptoms are exaggerated in the summer. The diagnosis is:
   (a) Seborrheic dermatitis
   (b) Contact dermatitis
   (c) Psoriasis
   (d) Porphyria cutanea tarda

20. In an 8-day-old child with no history of consanguinity in the parents, the mother reports blisters and bleeding off of the skin at the site of handling and pressure. There was a similar history in the previous child which proved to be fatal. The diagnosis is:
   (a) Bullous pemphigoid
   (b) Congenital syphilis
   (c) Congenital epidermolysis bullosa
   (d) Letterer-Swiwe disease

21. Truth about incontinenta pigmenti include all of the following, except:
   (a) X-linked dominant
   (b) Primary skin abnormality
   (c) Avascularity of peripheral retina
   (d) Ocular involvement is seen in almost 100% cases and is typically unilateral

22. Scarring alopecia is seen in:
   (a) T. capitis
   (b) Androgenic alopecia
   (c) Alopecia areata
   (d) Lichen planus

23. All the following are primary cutaneous diseases, except:
   (a) Psoriasis
   (b) Reiter’s disease
   (c) Lichen planus
   (d) Icthiosis
24. Which of the following Tuberculids is characterized by involvement of sweat gland, and hair follicles with non caseating epitheloid granulomas?
   (a) Lichen Scrofulosorum
   (b) Miliary Tuberculosis
   (c) Papulonecrotic type
   (d) Lupus vulgaris

25. A child with fever presents with multiple tender erythematous skin lesions. On microscopic examination the skin lesions are seen to have neutrophilic and histiocytic infiltration in the dermis. What is the diagnosis?
   (a) Sweet syndrome
   (b) Behcet's syndrome
   (c) Pyoderma gangrenosum
   (d) Juvenile dermatosis

26. A male patient presents with patchy loss of hair on scalp, eyebrows and beard. He also gives a history of rapid greying of hair in a few areas. The likely diagnosis is:
   (a) Alopecia areata
   (b) Anagen effluvium
   (c) Telogen effluvium
   (d) Androgenic alopecia

27. A 40-years-old female developed persistent oral ulcers followed by multiple flaccid bullae on trunk and extremeties. Direct examination of a skin biopsy immunofluorescence showed intercellular IgG deposits in the epidermis and suprabasal split with acantholytic cells. The probable diagnosis is:
   (a) Pemphigus vulgaris
   (b) Pemphigoid
   (c) Erythema multiforme
   (d) Dermatitis herpetiformis

28. A heterosexual male presents with multiple non-indurated painful ulcers with undermined edges and enlarged lymph nodes 5 days after exposure. Most likely diagnosis is:
   (a) Herpes genitalis
   (b) LGV
   (c) Primary chancre
   (d) Chancroid

29. The Drug of choice for a pregnant woman in 2nd trimester with pustular psoriasis is:
   (a) Prednisolone
   (b) Dapsone
   (c) Acitretin
   (d) Methotrexate

30. Drug of choice for type II Lepra Reaction is:
   (a) Thalidomide
   (b) Steroids
   (c) Clofazamine
   (d) Rifampicin

31. Which of the following statement is true for Pityriasis Rosea?
   (a) It is Self limiting
   (b) It is Chronic relapsing
   (c) It is Life threatening infection
   (d) It is Caused by dermatophytes

32. An infant presented with erythematous lesions on cheek, extensor aspect of limbs. Mother has history of bronchial asthma. The probable diagnosis is:
   (a) Air borne contact dermatitis
   (b) Atopic dermatitis
   (c) Seborraehic dermatitis
   (d) Infectious eczematoid dermatitis

33. Tuberculides is seen in:
   (a) Lupus vulgaris
   (b) Scrofuloderma
   (c) Lichen scrofulosorum
   (d) Tuberculoris Cutis Orificialis

34. A patient had severe irregular hyperpigmented macules on the trunk and multiple small hyperpigmented macules in the axillae and groins since early childhood. There were no other skin lesions. Which is the most likely investigation to support the diagnosis?
   (a) Slit-lamp examination of eye
   (b) Measurement of intraocular tension
   (c) Examination of fundus
   (d) Retinal artery angiography
35. Pterygium of nail is characteristically seen in:
   (a) Lichen planus
   (b) Psoriasis
   (c) Tinea unguium
   (d) Alopecia areata

36. A 24-year-old unmarried woman has multiple nodular, cystic, pustular and comedonic lesions on face, upper back and shoulders for 2 years. The drug of choice for her treatment would be:
   (a) Acitretin
   (b) Isotretinoïn
   (c) Doxycycline
   (d) Azithromycin

37. A 45-year-old farmer has itchy erythematous popular lesions on face, neck, ‘V’ area of chest, dorsum of hands and forearms for 3 years. The lesions are more severe in summers and improve by 75% in winters. The most appropriate test to diagnose the condition would be:
   (a) Skin biopsy
   (b) Estimation of IgE levels in blood
   (c) Patch test
   (d) Intradermal prick test

38. A 6-month-old infant had itchy erythematous papules and exudative lesions on the scalp, face, groins and axillae for one month. She also had vesicular lesions on the palms. The most likely diagnosis is:
   (a) Congenital syphilis
   (b) Seborrhoeic dermatitis
   (c) Scabies
   (d) Psoriasis

39. Which of the following is wrong statements?
   (a) Koilonychia in Vit B12 deficiency
   (b) Onycholysis in Psoriasis
   (c) Mees lines in Arsenic poisoning
   (d) Pterygium of nails in Lichen Planus

40. A 16-years-old boy presented with asymptomatic, multiple, erythematosus, annular lesions with a collarette of scales at the periphery of the lesions present on the trunk. The most likely diagnosis is:
   (a) Pityriasis versicolor
   (b) Pityriasis alba

41. All of the following drugs are effective in the treatment of pityriasis versicolor except:
   (a) Selenium sulphide
   (b) Ketoconazole
   (c) Griseofulvin
   (d) Clotrimazole

42. An 8-years-old boy from Bihar presents with a 6 months history of an ill defined, hypopigmented slightly atrophic macule on the face. The most likely diagnosis is:
   (a) Pityriasis alba
   (b) Indeterminate leprosy
   (c) Morphoea
   (d) Calcium deficiency

43. A 40-years-old woman presents with a 2-year history of erythematous papulopustular lesions on the convexities of the face. There is a background of erythema and telangiectasi(a) The most likely diagnosis in the patient is:
   (a) Acne vulgaris
   (b) Rosacea
   (c) Systemic lupus erythematosus
   (d) Polymorphic light eruption

44. A 36-years-old factory worker developed itchy, annular scaly plaques in both groins. Application of a corticosteroid ointment led to temporary relief but the plaques continued to extend at the periphery. The most likely diagnosis is:
   (a) Erythema annulare centrifugum
   (b) Granuloma annulare
   (c) Annular lichen planus
   (d) Tinea cruris

45. A 27-years-old sexually active male develops a vesiculobullous lesion on the glans soon after taking tablet paracetamol for fever. The lesion healed with hyperpigmentation. The most likely diagnosis is:
   (a) Behcet’s syndrome
   (b) Herpes genitalis
   (c) Fixed drug eruption
   (d) Pemphigus vulgaris
46. The only definite indication for giving systemic corticosteroids in pustular psoriasis is:
   (a) Psoriatic enythroderma with pregnancy
   (b) Psoriasis in a patient with alcoholic cirrhosis
   (c) Moderate arthritis
   (d) Extensive lesions

47. A 30-years-old male had severely itchy papulo-vesicular lesions on extremities, knees, elbows and buttocks for one year. Direct immunofluorescence staining of the lesions showed IgA deposition at dermoepidermal junction. The most probable diagnosis is:
   (a) Pemphigus vulgaris
   (b) Bullous pemphigoid
   (c) Dermatitis herpetiformis
   (d) Nummular eczema

48. A 5-years-old male child has multiple hyper-pigmented macules over the trunk. On rubbing the lesion with the rounded end of a pen, he developed urticarial wheal, confined to the border of the lesion. The most likely diagnosis is:
   (a) Fixed drug eruption

49. A 25-years-old man presents with recurrent episodes of flexural eczema, contact urticaria, recurrent skin infections and severe abdominal cramps and diarrhoea upon taking sea foods. He is suffering from:
   (a) Seborrhic dermatitis
   (b) Atopic dermatitis
   (c) Airborne contact dermatitis
   (d) Nummular dermatitis

50. A 40-years-old male developed persistent oral ulcers followed by multiple flaccid bullae on trunk and extremities. Direct examination of a skin biopsy immunofluorescence showed intercellular IgG deposits in the epidermis. The most probable diagnosis is:
   (a) Pemphigus vulgaris
   (b) Bullous Pemphigoid
   (c) Bullous Lupus erythematosus
   (d) Epidermolysis bullosa acquisita

ANSWERS

Test 1

1. (b)  2. (a)  3. (a)  4. (d)  5. (a)  6. (b)  7. (c)  8. (b)  9. (b)  10. (b)
11. (b) 12. (d) 13. (d) 14. (b) 15. (c) 16. (a) 17. (a) 18. (a) 19. (a) 20. (a)
21. (b) 22 (b) 23. (c) 24. (c) 25. (a) 26. (b) 27. (c) 28. (c) 29. (b) 30. (b)
31. (b) 32. (a) 33. (a) 34. (b) 35. (c) 36. (c) 37. (a) 38. (a) 39. (c) 40. (d)
41. (a) 42. (b) 43. (c) 44. (a) 45. (d) 46. (d) 47. (a) 48. (c) 49. (c) 50. (c)

Test 2

1. (a)  2. (c)  3. (b)  4. (d)  5. (b)  6. (b)  7. (a)  8. (b)  9. (a)  10. (a)
11. (a) 12. (b) 13. (b) 14. (d) 15. (c) 16. (b) 17. (b) 18. (c) 19. (d) 20. (c)
21. (d) 22. (d) 23. (b) 24. (a) 25. (a) 26. (a) 27. (a) 28. (d) 29. (a) 30. (b)
31. (a) 32. (a) 33. (a) 34. (a) 35. (a) 36. (a) 37. (a) 38. (a) 39. (a) 40. (a)
41. (a) 42. (a) 43. (a) 44. (a) 45. (a) 46. (a) 47. (a) 48. (a) 49. (a) 50. (a)