



NEET PG 2025

**Medicine Previous
Year Questions with
Solutions**

TUTORIALS

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Medicine NEET PG 2025 (modified)

Question 1:

A patient presents with complaints of salt craving, generalized hyperpigmentation, and laboratory findings of hyperkalemia and metabolic acidosis. Which of the following is the most likely diagnosis?

Options:

- A) Addison's disease
- B) Conn's disease
- C) Pheochromocytoma
- D) Cushing's syndrome

Correct Answer: A) Addison's disease

Question 2:

A critically ill patient with COVID-19 is admitted to the ICU and requires mechanical ventilation. The patient's $\text{PaO}_2/\text{FiO}_2$ ratio is 100, consistent with severe Acute Respiratory Distress Syndrome. Which of the following ventilatory strategies is most appropriate for managing this patient?

Options:

- A) High PEEP and high tidal volume
- B) Low PEEP and low tidal volume
- C) Low PEEP and high tidal volume
- D) High PEEP and low tidal volume

Correct Answer:

D) High PEEP and low tidal volume

Question 3:

A 15-year-old boy presents with progressive enlargement of hands and feet, coarse facial features, prominent enlarged jaw, and frontal bossing. On examination, he is noted to have bitemporal hemianopia. Which of the following is the most definitive test to confirm the diagnosis?

Options:

- A) Increased IGF-1 levels
- B) Decreased IGF-1 levels
- C) Suppressed GH on administration of glucose
- D) Non-suppressed GH on administration of glucose

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Correct Answer: D) Non-suppressed GH on administration of glucose

Question 4:

A 69-year-old man presents with severe dyspnea and increasing amounts of clear sputum. ABG reveals pH 7.2, PCO₂ 66 mmHg, PaO₂ 44 mmHg, and bicarbonate 26 mEq/L. His SpO₂ is 77%. Which of the following is the underlying abnormality?

Options:

- A) Metabolic acidosis
- B) Metabolic alkalosis
- C) Respiratory acidosis
- D) Respiratory alkalosis

Correct Answer:

C) Respiratory acidosis

Question 5:

An asthmatic patient on salbutamol and ipratropium continues to have nocturnal exacerbations. Which of the following is the next best step?

Options:

- A) Add oral corticosteroids
- B) Switch to an inhaled corticosteroid plus a long-acting β 2-agonist
- C) Increase frequency of salbutamol
- D) Add montelukast at night

Correct Answer: B) Switch to an inhaled corticosteroid plus a long-acting β 2-agonist

Question 6:

A 19-year-old boy was diagnosed with meningococcal meningitis. What is the drug of choice (DOC) for prophylaxis to be given to his contacts?

Options:

- A) Rifampicin
- B) Ethambutol
- C) Doxycycline
- D) Amoxicillin

Correct Answer:

A) Rifampicin

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Question 7:

A patient presents with pain and swelling of the knee joint. Synovial fluid aspirate shows rhomboid-shaped crystals that are positively birefringent under polarized light microscopy. What is the most likely diagnosis?

Options:

- A) Gout
- B) Pseudogout
- C) Amyloidosis
- D) Rheumatoid arthritis

Correct Answer:

B) Pseudogout

Question 8:

A patient presents with progressive skin thickening. Laboratory evaluation reveals ANA positivity along with anti-Scl-70 antibodies. Which clinical manifestation is most strongly associated with this antibody?

Options:

- A) Gastric antral vascular ectasia
- B) Calcinosis cutis
- C) Interstitial lung disease
- D) Raynaud's phenomenon

Correct Answer: C) Interstitial lung disease

Question 9:

A patient presents with frothy sputum, hemoptysis, paroxysmal nocturnal dyspnea, and dyspnea on exertion. Lung biopsy reveals hemosiderin-laden macrophages. Which of the following conditions is least likely to be associated with this finding?

Options:

- A) Volume overload
- B) Right ventricular failure
- C) Pulmonary vein obstruction
- D) Protein-losing enteropathy

Correct Answer:

B) Right ventricular failure

Question 10:

A 50-year-old man presents to the emergency department with altered sensorium, hypotension, and shortness of breath. His arterial blood gas reveals a pH of 7.2, PaCO₂ of 44 mmHg, PaO₂ of 54 mmHg, HCO₃⁻ of 16 mEq/L, and a base excess of -12. Serum

electrolytes show sodium 130 mEq/L and chloride 84 mEq/L. Based on these findings, what is the most likely acid–base disturbance?

Options:

- A) Metabolic acidosis with anion gap of 30
- B) Metabolic acidosis with anion gap of 20
- C) Respiratory acidosis with anion gap of 30
- D) Respiratory alkalosis with anion gap of 20

Correct Answer: A) Metabolic acidosis with anion gap 30

Question 11:

A 45-year-old woman presents with a 6-month history of paroxysmal nocturnal dyspnea, palpitations, and breathlessness. On examination, blood pressure and oxygen saturation are normal, jugular venous pressure is elevated, the pulse is irregular, and tender hepatomegaly is present. Cardiac examination reveals a heaving apex and a mid-diastolic murmur at the apex. She has a past history of acute rheumatic fever. Which of the following statements regarding this patient is false?

Options:

- A) This patient has an increased risk of stroke
- B) “a” wave is absent on JVP
- C) This patient has features of right heart failure
- D) Pre-systolic accentuation of the mid-diastolic murmur is a hallmark feature

Correct Answer: D) Pre-systolic accentuation of the mid-diastolic murmur is a hallmark feature

Question 12:

A patient presents with morning stiffness and tests positive for anti-CCP antibodies. Which of the following histological features is most characteristic of the underlying disease?

Options:

- A) Synovial inflammation with pannus formation
- B) Cartilage degeneration with osteophyte formation
- C) Subepidermal blister with IgA deposits
- D) Tophus with monosodium urate crystals

Correct Answer:A) Synovial inflammation with pannus formation

Question 13:

A 70-year-old patient with hypertension and atrial fibrillation presents with an acute-onset weakness of right side of body and aphasia, which began 2 hours ago. A non-contrast CT scan of the brain shows no evidence of haemorrhage. What is the next best step in management?

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Options:

- A) Administration of intravenous rTPA
- B) Carotid Doppler ultrasound
- C) Transesophageal echo
- D) IV low molecular weight heparin

Correct Answer:

A) Administration of intravenous rTPA

Question 14:

An HIV-positive patient presents with a 2-week history of fever, cough, and weight loss. He is diagnosed with tuberculosis. What is the most appropriate approach to management?

Options:

- A) Start antiretroviral therapy (ART) 2 weeks after initiating anti-tubercular therapy (ATT)
- B) Start ATT and ART simultaneously
- C) Start ART after completing the course of ATT
- D) Start ATT 2 weeks after initiating ART

Correct Answer:

A) Start antiretroviral therapy (ART) 2 weeks after initiating anti-tubercular therapy (ATT)

Question 15:

A 55-year-old man with a long-standing history of diabetes mellitus presents with numbness and tingling in both feet. On examination, deep tendon reflexes in the lower limbs are reduced. Which of the following is the most likely cause of his symptoms?

Options:

- A) Bilateral distal symmetric polyneuropathy
- B) Autonomic neuropathy
- C) Mononeuropathy
- D) Acute motor axonal neuropathy

Correct Answer: A) Bilateral distal symmetric polyneuropathy

Question 16:

A 21-year-old female, a known case of insulin-dependent diabetes mellitus (IDDM), presents to the emergency department with altered sensorium. She has a history of missing her insulin doses for the past two days. On examination, her blood pressure is 80/60 mmHg and pulse rate is 103/min. Laboratory values reveal a serum sodium of 126 mEq/L, potassium

4.3 mEq/L, BUN 79 mg/dL, creatinine 2.2 mg/dL, and a random blood glucose level of 720 mg/dL. Which of the following is not a part of the initial management of this patient?

Options:

- A) 3% NaCl
- B) 0.9% NaCl
- C) IV insulin
- D) Monitor potassium level

Correct Answer:

A) 3% NaCl

Question 17:

A 55-year-old female presents with respiratory distress and hemoptysis on day 7 after knee replacement surgery. Her respiratory rate is 28/min, and pulse is 120/min. What is the most appropriate investigation?

Options:

- A) Ventilation-perfusion (V/Q) scan
- B) Chest X-ray
- C) CT Pulmonary Angiography (CTPA)
- D) D-dimer

Correct Answer:

C) CT Pulmonary Angiography (CTPA)

Question 18:

A patient in altered sensorium is found to have a serum sodium of 95 mEq/L. She was treated with 3% hypertonic saline, and after 24 hours, her sodium level increased to 111 mEq/L. After sodium correction, her neurological status has deteriorated. What is the next best step in management?

Options:

- A) Brainstem evoked potential
- B) Electroencephalogram (EEG)
- C) MRI brain
- D) CSF analysis

Correct Answer:

C) MRI brain

Question 19:

A 12-year-old child with chronic kidney disease is admitted for evaluation of bone pain and growth retardation. Laboratory investigations reveal: serum calcium 7.2 mg/dL, serum phosphate 6.3 mg/dL, alkaline phosphatase 370 U/L, and elevated parathyroid hormone levels. X-ray of the long bones shows metaphyseal dysplasia. Which of the following is the most appropriate treatment for this patient?

Options:

- A) Phosphate binders only
- B) Oral calcium supplements
- C) Calcium supplements with phosphate binders
- D) Oral calcium with vitamin D

Correct Answer: C) Calcium supplements with phosphate binders

Question 20:

A 70-year-old male presents to the emergency department with dyspnea and palpitations for the past 4 hours. ECG is suggestive of atrial fibrillation. He is hemodynamically stable. What is the next best step in management?

Options:

- A) Emergency cardioversion
- B) Control ventricular rate
- C) Echocardiography to look for left atrial clot
- D) Start low molecular weight heparin

Correct Answer: B) Control ventricular rate

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