

Screening MCQs

SET 1: STUDY MCQs (10 questions)

(Focus: memorization & core concepts)

Q1. Screening is best defined as: (Memorization)

- A. Testing symptomatic patients to confirm disease
- B. Searching for unrecognized disease using rapid tests in apparently healthy individuals
- C. Diagnosing disease in hospitalized patients
- D. Testing only high-risk patients with definitive methods
- E. Clinical examination followed by treatment

Q2. The "iceberg phenomenon" of disease refers to: (Memorization)

- A. Only fatal cases seen in hospitals
- B. Diagnosed cases representing the majority of disease
- C. Hidden subclinical and undiagnosed cases in the community
- D. Diseases with seasonal variation
- E. Acute diseases only

Q3. All of the following are characteristics of screening tests EXCEPT: (Memorization)

- A. Applied to apparently healthy individuals
- B. Applied to groups
- C. Highly accurate
- D. Less expensive
- E. Not a basis of treatment

Q4. Which of the following is an example of screening? (Memorization)

- A. VDRL test in a patient with genital ulcer
- B. VDRL test in pregnant women attending antenatal clinic
- C. Biopsy of cervical lesion
- D. CT scan for suspected lung cancer
- E. Premarital VDRL testing for syphilis

Q5. Case finding differs from screening because it: (Memorization)

- A. Is applied to apparently healthy people
- B. Is done on the whole population
- C. Targets individuals seeking health care for another reason

- D. Uses less accurate tests
 - E. Is never laboratory based
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Q6. Mass screening means: *(Memorization)*

- A. Screening only high-risk individuals
 - B. Screening hospitalized patients
 - C. Screening a whole defined population
 - D. Using more than one test
 - E. Screening symptomatic patients
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Q7. Multiphasic screening is: *(Memorization)*

- A. Screening repeated over time
 - B. Screening high-risk groups only
 - C. Using two or more screening tests simultaneously
 - D. Screening children only
 - E. Screening after diagnosis
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Q8. Which is NOT a criterion of the disease to be screened? *(Memorization)*

- A. High prevalence
 - B. Well understood natural history
 - C. Availability of effective treatment
 - D. High cost of treatment
 - E. Detectable early stage
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Q9. Acceptability of a screening test includes all EXCEPT: *(Memorization)*

- A. Simple
 - B. Non-invasive
 - C. Painful
 - D. Cheap
 - E. Accepted by population
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Q10. Repeatability of a screening test is also called: *(Memorization)*

- A. Validity
 - B. Sensitivity
 - C. Specificity
 - D. Reliability
 - E. Accuracy
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SET 2: EXAM MCQs (10 questions)

(Focus: understanding & application)

Q11. A screening test that correctly identifies most diseased individuals has high: (Understanding)

- A. Specificity
- B. Predictive value
- C. Reliability
- D. Sensitivity
- E. Accuracy

Q12. Sensitivity of a test is calculated as: (Understanding)

- A. $TN / (TN + FP)$
- B. $TP / (TP + FN)$
- C. $TP / (TP + FP)$
- D. $TN / (TN + FN)$
- E. $(TP + TN) / \text{Total}$

Q13. Specificity of a test measures the ability to: (Understanding)

- A. Detect true cases
- B. Detect early disease
- C. Exclude non-affected individuals
- D. Increase prevalence
- E. Reduce false negatives

Q14. When the cut-off point of a test is lowered, the result is: (Application)

- A. \uparrow Specificity, \downarrow Sensitivity
- B. \downarrow Sensitivity, \downarrow False positives
- C. \uparrow Sensitivity, \uparrow False positives
- D. No change in test performance
- E. \uparrow True negatives only

Q15. For a lethal disease where early detection improves prognosis, the screening test should have high:

(Application)

- A. Specificity
- B. Predictive value
- C. Sensitivity
- D. Reliability
- E. Accuracy

Q16. In diseases like diabetes, high specificity is preferred mainly to: *(Application)*

- A. Increase false positives
 - B. Reduce false negatives
 - C. Avoid overburdening health services
 - D. Detect all early cases
 - E. Improve sensitivity
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Q17. Positive predictive value of a screening test represents: *(Understanding)*

- A. Proportion of diseased persons among those tested
 - B. Probability that a person testing positive is truly affected
 - C. Ability of a test to detect early disease
 - D. Proportion of non-affected persons testing negative
 - E. Consistency of test results on repetition
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Q18. PPV is calculated as: *(Understanding)*

- A. $A / (A + C)$
 - B. $D / (C + D)$
 - C. $A / (A + B)$
 - D. $D / (B + D)$
 - E. $(A + D) / \text{Total}$
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Q19. Which statement about predictive values is CORRECT? *(Application)*

- A. They are constant for all populations
 - B. They are independent of prevalence
 - C. They are only valid for the tested sample
 - D. They equal sensitivity and specificity
 - E. They measure reliability
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Q20. All of the following are drawbacks of screening EXCEPT: *(Understanding)*

- A. False reassurance
 - B. Anxiety due to false positives
 - C. Overuse of medical resources
 - D. Early detection and treatment
 - E. Unnecessary investigations
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Correct Answers

1. B
2. C
3. C
4. E

5. C
6. C
7. C
8. D
9. C
10. D
11. D
12. B
13. C
14. C
15. C
16. C
17. B
18. C
19. C
20. D