Roll No. .....

Question Booklet Number

O. M. R. Serial No.

M. Sc. (Microbiology) (Fourth Semester) EXAMINATION, 2025-26

(Old Syllabus Effective from 2022)

(Only Back Paper Students)

MEDICAL MICROBIOLOGY

Paper Code							
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Questions Booklet Series
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Time : 1:30 Hours] [*Maximum Marks : 75*

Instructions to the Examinee :

1. Do not open the booklet unless you are asked to do so.

2. The booklet contains 100 questions. Examinee is required to answer 75 questions in the OMR Answer-Sheet provided and not in the question booklet. All questions carry equal marks.

3. Examine the Booklet and the OMR Answer-Sheet very carefully before you proceed. Faulty question booklet due to missing or duplicate pages/questions or having any other discrepancy should be got immediately replaced.

परीक्षार्थियों के लिए निर्देश :

1. प्रश्न-पुस्तिका को तब तक न खोलें जब तक आपसे कहा न जाए।

2. प्रश्न-पुस्तिका में 100 प्रश्न हैं। परीक्षार्थी को 75 प्रश्नों को केवल दी गई OMR आन्सर-शीट पर ही हल करना है, प्रश्न-पुस्तिका पर नहीं। सभी प्रश्नों के अंक समान हैं।

3. प्रश्नों के उत्तर अंकित करने से पूर्व प्रश्न-पुस्तिका तथा OMR आन्सर-शीट को सावधानीपूर्वक देख लें। दोषपूर्ण प्रश्न-पुस्तिका जिसमें कुछ भाग छपने से छूट गए हों या प्रश्न एक से अधिक बार छप गए हों या उसमें किसी अन्य प्रकार की कमी हो, तो उसे तुरन्त बदल लें।

(Remaining instructions on the last page) **(शेष निर्देश अन्तिम पृष्ठ पर)**

(Only for Rough Work)

1. Robert Koch formulated "Koch's Postulates" while studying which disease ?

(A) Rabies

(B) Smallpox

(C) Anthrax

(D) Tuberculosis

2. The first vaccine, developed by Edward Jenner, was created to protect against which virus ?

(A) Polio

(B) Cowpox

(C) Smallpox

(D) Measles

3. Who discovered the first antibiotic, Penicillin, in 1928 ?

(A) Selman Waksman

(B) Alexander Fleming

(C) Howard Florey

(D) Paul Ehrlich

4. Who developed the staining method used to differentiate bacteria into two large groups based on cell wall structure ?

(A) Richard Petri

(B) Hans Christian Gram

(C) Fanny Hesse

(D) Ferdinand Cohn

5. Which part of the human body is normally considered sterile (lacking a normal flora) ?

(A) Skin

(B) Lower respiratory tract (Alveoli)

(C) Colon

(D) Mouth

6. Which of the following is the most predominant normal flora found on the skin ?

(A) *Escherichia coli*

(B) *Staphylococcus epidermidis*

(C) *Streptococcus pneumoniae*

(D) *Bacteroides fragilis*

7. In a healthy adult vagina, which organism maintains an acidic pH to prevent the overgrowth of pathogens ?

(A) *Candida albicans*

(B) *Gardnerella vaginalis*

(C) *Lactobacillus species*

(D) *Enterococcus faecalis*

8. Which anatomical site contains the largest and most diverse population of normal flora ?

(A) Stomach

(B) Small intestine

(C) Large intestine (Colon)

(D) Nasopharynx

9. Which vitamin is primarily produced by *Escherichia coli* in the human colon ?

(A) Vitamin C
(B) Vitamin K
(C) Vitamin D
(D) Vitamin A

10. Microbes that inhabit the body for short periods (days or weeks) without establishing themselves permanently are called :

(A) Resident flora
(B) Transient flora
(C) Symbionts
(D) Persistent flora

11. A pathogen that causes disease only when the host's immune defenses are compromised or when it is introduced into an unusual body site is called a/an :

(A) True pathogen
(B) Opportunistic pathogen
(C) Obligate pathogen
(D) Avirulent strain

12. The degree or intensity of pathogenicity, often measured by the LD50 (Lethal Dose 50%) , is referred to as :

(A) Pathogenicity
(B) Infectivity
(C) Virulence
(D) Toxigenicity

13. Which of the following is the correct order of the stages of pathogenesis ?

(A) Invasion, Infection, Adhesion, Exposure
(B) Exposure, Adhesion, Invasion, Infection
(C) Adhesion, Exposure, Infection, Invasion
(D) Infection, Exposure, Adhesion, Invasion

14. Bacterial structures such as pili, fimbriae, and capsules that allow a microbe to attach to specific host cell receptors are examples of :

(A) Invasins
(B) Toxins
(C) Adhesins
(D) Endotoxins

15. Which term describes the ability of a pathogen to produce biochemicals or poisons that damage host cells ?

(A) Pathogenicity
(B) Toxigenicity
(C) Infectivity
(D) Invasiveness

16. The ease with which an infectious agent is passed from one host to another is known as :

(A) Communicability
(B) Pathogenicity
(C) Virulence
(D) Infectivity

17. How does an "Infection" differ from a "Disease" ?
    (A) They are identical terms.
    (B) Infection is the entry and multiplication of a microbe; Disease is the resulting deviation from health.
    (C) Disease occurs before infection.
    (D) Infection always leads to visible symptoms.

18. A bacterial enzyme that breaks down the "intercellular glue" (hyaluronic acid) to allow a pathogen to spread deeper into tissues is called :
    (A) Coagulase
    (B) Hyaluronidase
    (C) Hemolysin
    (D) Endotoxin

19. Which antibiotic resistance mechanism involves the bacteria producing enzymes like β-lactamase to destroy the drug ?
    (A) Efflux pumps
    (B) Target modification
    (C) Enzymatic inactivation
    (D) Reduced permeability

20. If Pathogen A has an ID50 (Infectious Dose) of 10 cells and Pathogen B has an ID50 of 10,000 cells, which is more virulent ?
    (A) Pathogen A
    (B) Pathogen B
    (C) Both are equally virulent
    (D) ID50 does not measure virulence

21. Which morphological feature is characteristic of *Corynebacterium diphtheriae* when stained with Albert's stain ?
    (A) Central spores
    (B) Metachromatic granules (Volutin)
    (C) Peritrichous flagella
    (D) Thick polysaccharide capsule

22. The selective medium used to isolate *Bordetella pertussis* from a nasopharyngeal swab is :
    (A) Lowenstein-Jensen (LJ) Medium
    (B) Bordet-Gengou Agar
    (C) Thiosulfate-Citrate-Bile Salts (TCBS)
    (D) MacConkey Agar

23. What is the primary mechanism of the Diphtheria toxin ?
    (A) Activation of adenylate cyclase
    (B) Inhibition of protein synthesis via EF-2 inactivation
    (C) Degradation of host cell membrane phospholipids
    (D) Blocking the release of acetylcholine

24. Acid-fastness in *Mycobacterium tuberculosis* is primarily due to the high content of ..... in its cell wall.
    (A) Teichoic acid
    (B) Peptidoglycan
    (C) Mycolic acid
    (D) Lipopolysaccharide

25. The "Whooping" sound in Pertussis occurs during which clinical stage ?

(A) Catarrhal stage

(B) Paroxysmal stage

(C) Convalescent stage

(D) Incubation period

26. The "Rice Water Stool" characteristic of Cholera is caused by a toxin that :

(A) Increases intracellular cAMP levels

(B) Destroys the intestinal villi

(C) Inhibits protein synthesis

(D) Causes systemic sepsis

27. Which diagnostic test is used to detect antibodies (H and O antigens) in the serum of a suspected Typhoid patient ?

(A) Mantoux test

(B) Widal test

(C) Elek test

(D) Schick test

28. *Shigella* species are typically differentiated from *E. coli* on MacConkey agar because they are :

(A) Lactose fermenters (Pink colonies)

(B) Non-lactose fermenters (Pale colonies)

(C) Highly motile

(D) Gram-positive cocci

29. What is the primary treatment for a patient suffering from severe Cholera ?

(A) Immediate IV Antibiotics

(B) Antiviral therapy

(C) Oral Rehydration Salt (ORS) and fluid replacement

(D) Surgical intervention

30. *Bacillus anthracis* colonies on Blood Agar typically show a "Medusa Head" appearance and are :

(A) Strongly hemolytic

(B) Non-hemolytic

(C) Greenish alpha-hemolytic

(D) Beta-hemolytic

31. The "Drumstick" appearance under a microscope is a characteristic morphological feature of :

(A) *Clostridium perfringens*

(B) *Clostridium tetani*

(C) *Bacillus anthracis*

(D) *Mycobacterium leprae*

32. Which toxin is responsible for the "spastic paralysis" and "lockjaw" seen in Tetanus ?

(A) Tetanolysin

(B) Tetanospasmin

(C) Alpha toxin

(D) Lethal Factor (LF)

33. "Nagler's Reaction" is used for the laboratory identification of *Clostridium perfringens* by detecting :

(A) Lecithinase activity

(B) Capsule production

(C) Spore formation

(D) Motility

34. The primary virulence factor of the *Bacillus anthracis* capsule is that it is composed of :

(A) Polysaccharides

(B) Poly-D-glutamic acid

(C) Lipopolysaccharides

(D) Hyaluronic acid

35. Mycobacterium leprae has a unique predilection for infecting which host cells ?

(A) Hepatocytes

(B) Schwann cells and macrophages

(C) Erythrocytes

(D) T-helper cells

36. Which form of Leprosy is characterized by high cell-mediated immunity and few, well-defined skin lesions ?

(A) Tuberculoid Leprosy

(B) Lepromatous Leprosy

(C) Borderline Leprosy

(D) Histoid Leprosy

37. The standard Multi-Drug Therapy (MDT) for Leprosy recommended by the WHO includes :

(A) Penicillin and Streptomycin

(B) Rifampicin, Dapsone, and Clofazimine

(C) Isoniazid and Ethambutol

(D) Vancomycin and Methicillin

38. *Mycobacterium leprae* cannot be grown on artificial lab media. Which animal is commonly used to culture it ?

(A) White Mouse (Footpad)

(B) Nine-banded Armadillo

(C) Guinea Pig

(D) Both (A) and (B)

39. Which staining technique is used to identify *M. leprae* in skin slit smears, though it uses a weaker acid (5% H_2SO_4) than the TB stain ?

(A) Gram Stain

(B) Ziehl-Neelsen (Z-N) Stain

(C) Giemsa Stain

(D) Negative Stain

40. Which morphological feature is used to identify *Candida albicans* when incubated in serum for 2-3 hours ?

(A) Arthrospores

(B) Germ tubes

(C) Pseudohyphae

(D) Spherules

41. The "Oral Thrush" and "Vaginal Candidiasis" caused by *Candida* are classic examples of :
(A) Systemic mycoses
(B) Primary pathogens
(C) Subcutaneous mycoses
(D) Opportunistic infections

42. Which stain is used to visualize the thick polysaccharide capsule of *Cryptococcus neoformans* in CSF samples ?
(A) India Ink
(B) Gram stain
(C) Giemsa stain
(D) Ziehl-Neelsen stain

43. *Cryptococcus neoformans* is frequently associated with exposure to :
(A) Rose thorns
(B) Pigeon droppings
(C) Decaying wood
(D) River water

44. Which enzyme produced by *Cryptococcus* is a major virulence factor that converts phenolic compounds into melanin ?
(A) Catalase
(B) Phenoloxidase (Laccase)
(C) Keratinase
(D) Elastase

45. *Histoplasma capsulatum* is a dimorphic fungus, meaning it grows as ..... at 25°C and as ..... at 37°C.
(A) Yeast; Mold
(B) Mold; Yeast
(C) Spore; Hyphae
(D) Spherule; Yeast

46. The geographical distribution of Histoplasmosis is most prevalent in which region ?
(A) Nile River Valley
(B) Ohio and Mississippi River Valleys
(C) Southwestern United States (Deserts)
(D) Southeast Asia

47. In the laboratory, the presence of large, thick-walled "Tuberculate Macroconidia" is diagnostic for :
(A) *Aspergillus fumigatus*
(B) *Histoplasma capsulatum*
(C) *Candida albicans*
(D) *Microsporum canis*

48. Inside the human host, *Histoplasma* cells are typically found within which host cells ?
(A) Red blood cells
(B) Macrophages
(C) Neutrophils
(D) Squamous epithelial cells

49. Which species of *Aspergillus* is the most common cause of invasive Aspergillosis ?
(A) *A. flavus*
(B) *A. niger*
(C) *A. fumigatus*
(D) *A. terreus*

50. A "Fungus Ball" (Aspergilloma) typically develops in which pre-existing condition ?
(A) Active Pneumonia
(B) Old Tuberculosis cavities
(C) Asthma
(D) Lung Cancer

51. Under a microscope, *Aspergillus* hyphae are characterized by :

(A) Broad, non-septate hyphae with 90° branching.

(B) Narrow, septate hyphae with 45° (dichotomous) branching.

(C) Yeast cells with narrow-based budding.

(D) Pseudohyphae only.

52. Which toxin produced by *Aspergillus* flavus is a potent carcinogen associated with liver cancer ?

(A) Ochratoxin

(B) Aflatoxin

(C) Ergotamine

(D) Gliotoxin

53. The drug of choice for treating invasive Aspergillosis is :

(A) Fluconazole

(B) Voriconazole

(C) Griseofulvin

(D) Penicillin

54. Dermatophytes cause infections (Tinea) because they produce the enzyme ....., allowing them to digest structural proteins in the skin.

(A) Lipase

(B) Keratinase

(C) Coagulase

(D) Hyaluronidase

55. Which genus of Dermatophytes is characterized by large, multi-septate, spindle- shaped macroconidia ?

(A) *Trichophyton*

(B) *Microsporum*

(C) *Epidermophyton*

(D) *Candida*

56. 'Ringworm' of the scalp is clinically known as :

(A) Tinea pedis

(B) Tinea corporis

(C) Tinea capitis

(D) Tinea unguium

57. What is the standard lab procedure for examining skin scrapings for fungal elements ?

(A) Gram staining

(B) 10% KOH (Potassium Hydroxide) mount

(C) Acid-fast staining

(D) Darkfield microscopy

58. The 'H' and 'N' in Influenza strains (e.g., H1N1) stand for which surface glycoproteins ?

(A) Hemoglobin and Neuraminidase

(B) Hemagglutinin and Nucleocapsid

(C) Hemagglutinin and Neuraminidase

(D) Hyaluronidase and Neuraminidase

59. Minor point mutations in Influenza viruses that cause seasonal epidemics are known as :

(A) Antigenic Shift

(B) Antigenic Drift

(C) Reassortment

(D) Viral Interference

60. Which drug is a Neuraminidase inhibitor commonly used to treat Influenza A and B ?

(A) Acyclovir

(B) Oseltamivir (Tamiflu)

(C) Ribavirin

(D) Zidovudine

61. Which virus remains latent in the trigeminal nerve ganglia and causes "cold sores" ?

(A) HSV-2

(B) HSV-1

(C) Varicella-Zoster

(D) Cytomegalovirus

62. 'Shingles' (Herpes Zoster) is a reactivation of the virus that originally caused :

(A) Smallpox

(B) Measles

(C) Chickenpox

(D) Rubella

63. Koplik's spots on the oral mucosa are a pathognomonic sign of which disease ?

(A) Rubella

(B) Measles (Rubeola)

(C) Chickenpox

(D) Smallpox

64. Smallpox was caused by which virus, and what is its current status ?

(A) Varicella virus; Eradicated

(B) Variola virus; Eradicated

(C) Vaccinia virus; Still endemic

(D) Cowpox virus; Eradicated

65. Congenital Rubella Syndrome is most dangerous when a woman is infected during :

(A) The third trimester

(B) The first trimester

(C) Delivery

(D) Breastfeeding

66. The MMR vaccine provides protection against which three viral diseases ?

(A) Measles, Mumps, Rabies

(B) Measles, Mumps, Rubella

(C) Measles, Meningitis, Rubella

(D) Mumps, Mononucleosis, Rubella

67. Which type of Hepatitis is primarily transmitted via the fecal-oral route ?

(A) Hepatitis B

(B) Hepatitis C

(C) Hepatitis A

(D) Hepatitis D

68. Hepatitis D (Delta agent) can only cause infection in the presence of :

(A) Hepatitis A

(B) Hepatitis B

(C) HIV

(D) Epstein-Barr Virus

69. Which enzyme does HIV use to convert its RNA genome into DNA ?

(A) RNA Polymerase

(B) Reverse Transcriptase

(C) Integrase

(D) Protease

70. A patient is clinically diagnosed with AIDS when their CD4+ T-cell count drops below :

(A) 1000 cells/mm^3

(B) 500 cells/mm^3

(C) 200 cells/mm^3

(D) 50 cells/mm^3

71. Which of the following is the standard screening test for HIV ?

(A) Western Blot

(B) ELISA

(C) PCR

(D) Northern Blot

72. Which species of *Shigella* is the most common cause of severe epidemic dysentery due to its potent Shiga toxin production ?

(A) *Shigella sonnei*

(B) *Shigella flexneri*

(C) *Shigella dysenteriae* Type 1

(D) *Shigella boydii*

73. The presence of "Negri Bodies" in brain neurons is diagnostic for :

(A) Polio

(B) Rabies

(C) Herpes Encephalitis

(D) HIV Dementia

74. Rabies virus travels from the site of a bite to the Central Nervous System via :

(A) The bloodstream (Viremia)

(B) Lymphatic vessels

(C) Retrograde axonal transport in nerves

(D) Cerebrospinal fluid

75. Which vaccine for Polio is an "Inactivated" (killed) vaccine given by injection ?

(A) Sabin Vaccine

(B) Salk Vaccine

(C) BCG Vaccine

(D) ATS Vaccine

76. Poliovirus primarily multiplies in the ..... before spreading to the spinal cord.

(A) Lungs and heart

(B) Throat and intestinal tract

(C) Liver and spleen

(D) Skin and hair follicles

77. Hydrophobia (fear of water) is a classic symptom of which stage of Rabies ?

(A) Dumb Rabies

(B) Furious Rabies

(C) Paralytic Rabies

(D) Incubation period

78. The Sabin vaccine (OPV) is preferred in many regions because it induces :

(A) Only systemic IgG

(B) Local mucosal immunity (Ig(A) in the gut

(C) Lifelong immunity with one dose

(D) No risk of reversion to virulence

79. Post-exposure prophylaxis (PEP) for Rabies includes :

(A) Antibiotics and rest

(B) Wound cleaning, Rabies Vaccine, and HRIG (Immunoglobulin)

(C) Isolation and Vitamin C

(D) Antiviral cream

80. Which cells in the spinal cord are specifically destroyed by Poliovirus, leading to paralysis ?

(A) Sensory neurons

(B) Anterior horn motor neurons

(C) Schwann cells

(D) Astrocytes

81. Brucellosis is commonly known as "Undulant Fever" because :

(A) It causes a persistent skin rash

(B) The fever rises and falls in a wave-like pattern

(C) It only affects the lower limbs

(D) It leads to permanent deafness

82. Which species of *Brucella* is most commonly associated with infections from goats and sheep ?

(A) *Brucella abortus*

(B) *Brucella suis*

(C) *Brucella melitensis*

(D) *Brucella canis*

83. The primary mode of transmission for Brucellosis to humans is :

(A) Mosquito bites

(B) Consumption of unpasteurized dairy products

(C) Inhalation of contaminated soil

(D) Human-to-human respiratory droplets

84. What is the causative agent of the Plague ?

(A) *Yersinia enterocolitica*

(B) *Yersinia pestis*

(C) *Francisella tularensis*

(D) *Bacillus anthracis*

85. In Bubonic Plague, the term "Bubo" refers to :

(A) A type of skin ulcer

(B) Swollen, painful lymph nodes

(C) A specific type of flea

(D) Fluid in the lungs

86. The primary vector responsible for transmitting *Yersinia pestis* from rodents to humans is :

(A) *Ixodes tick*

(B) *Xenopsylla cheopis* (Rat flea)

(C) *Anopheles mosquito*

(D) *Glossina fly*

87. Which form of Plague is highly contagious and can be spread directly from person to person via respiratory droplets ?

(A) Bubonic Plague

(B) Septicemic Plague

(C) Pneumonic Plague

(D) Sylvatic Plague

88. Lassa fever, Ebola, and Marburg virus diseases are all classified as :

(A) Neurotropic fevers

(B) Viral Hemorrhagic Fevers (VHF)

(C) Dermatropic infections

(D) Respiratory syndromes

89. The natural reservoir for the Ebola virus is believed to be :

(A) Domestic pigs

(B) Fruit bats

(C) Mosquitoes

(D) Ruminants

90. Japanese Encephalitis (JE) is primarily transmitted to humans by the bite of which mosquito ?

(A) *Aedes aegypti*

(B) *Culex species*

(C) *Anopheles species*

(D) *Haemagogus species*

91. In the transmission cycle of Japanese Encephalitis, which animals act as the 'amplifier hosts' ?

(A) Cattle and sheep

(B) Pigs and water birds

(C) Dogs and cats

(D) Horses and goats

92. Which Viral Hemorrhagic Fever is transmitted by the *Aedes aegypti* mosquito and can progress to "Shock Syndrome" ?

(A) Hantavirus
(B) Dengue Fever
(C) Rift Valley Fever
(D) Crimean-Congo Fever

93. Yellow Fever is characterized by liver damage leading to which prominent symptom ?

(A) Paralysis
(B) Jaundice
(C) Blindness
(D) Deafness

94. Which species of *Plasmodium* is responsible for the most severe form of "Malignant Tertian" Malaria ?

(A) *P. vivax*
(B) *P. ovale*
(C) *P. falciparum*
(D) *P. malariae*

95. The infective stage of the Malaria parasite that enters the human body via a mosquito bite is the :

(A) Trophozoite
(B) Merozoite
(C) Sporozoite
(D) Gametocyte

96. Where does the "Exo-erythrocytic" cycle of Malaria take place in the human host ?

(A) Red blood cells
(B) Liver cells (Hepatocytes)
(C) Spleen
(D) Brain

97. Leishmaniasis (Kala-azar) is transmitted to humans by the bite of an infected :

(A) Tsetse fly
(B) Sandfly (*Phlebotomus*)
(C) Blackfly
(D) Deer fly

98. The visceral form of Leishmaniasis (Kala-azar) is primarily caused by :

(A) *Leishmania tropica*
(B) *Leishmania donovani*
(C) *Leishmania braziliensis*
(D) *Leishmania mexicana*

99. What is the diagnostic stage of *Leishmania* found in a bone marrow or spleen aspirate of a patient ?

(A) Promastigote
(B) Amastigote (LD bodies)
(C) Epimastigote
(D) Trypomastigote

100. Which drug is a common first-line treatment for Visceral Leishmaniasis in many endemic areas ?

(A) Chloroquine
(B) Sodium Stibogluconate (Pentostam)
(C) Penicillin
(D) Metronidazole

(Only for Rough Work)

4. Four alternative answers are mentioned for each question as—A, B, C & D in the booklet. The candidate has to choose the correct answer and mark the same in the OMR Answer-Sheet as per the direction :

Example :

Question :

Q. 1 (A) ● (C) (D)
Q. 2 (A) (B) ● (D)
Q. 3 (A) ● (C) (D)

Illegible answers with cutting and over-writing or half filled circle will be cancelled.

5. Each question carries equal marks. Marks will be awarded according to the number of correct answers you have.
6. All answers are to be given on OMR Answer Sheet only. Answers given anywhere other than the place specified in the answer sheet will not be considered valid.
7. Before writing anything on the OMR Answer Sheet, all the instructions given in it should be read carefully.
8. After the completion of the examination candidates should leave the examination hall only after providing their OMR Answer Sheet to the invigilator. Candidate can carry their Question Booklet.
9. There will be no negative marking.
10. Rough work, if any, should be done on the blank pages provided for the purpose in the booklet.
11. To bring and use of log-book, calculator, pager and cellular phone in examination hall is prohibited.
12. In case of any difference found in English and Hindi version of the question, the English version of the question will be held authentic.

Impt. : On opening the question booklet, first check that all the pages of the question booklet are printed properly. If there is any discrepancy in the question Booklet, then after showing it to the invigilator, get another question Booklet of the same series.

4. प्रश्न-पुस्तिका में प्रत्येक प्रश्न के चार सम्भावित उत्तर—A, B, C एवं D हैं। परीक्षार्थी को उन चारों विकल्पों में से सही उत्तर छाँटना है। उत्तर को OMR आन्सर-शीट में सम्बन्धित प्रश्न संख्या में निम्न प्रकार भरना है :

उदाहरण :

प्रश्न :

प्रश्न 1 (A) ● (C) (D)
प्रश्न 2 (A) (B) ● (D)
प्रश्न 3 (A) ● (C) (D)

अपठनीय उत्तर या ऐसे उत्तर जिन्हें काटा या बदला गया है, या गोले में आधा भरकर दिया गया, उन्हें निरस्त कर दिया जाएगा।

5. प्रत्येक प्रश्न के अंक समान हैं। आपके जितने उत्तर सही होंगे, उन्हीं के अनुसार अंक प्रदान किये जायेंगे।
6. सभी उत्तर केवल ओ. एम. आर. उत्तर-पत्रक (OMR Answer Sheet) पर ही दिये जाने हैं। उत्तर-पत्रक में निर्धारित स्थान के अलावा अन्यत्र कहीं पर दिया गया उत्तर मान्य नहीं होगा।
7. ओ. एम. आर. उत्तर-पत्रक (OMR Answer Sheet) पर कुछ भी लिखने से पूर्व उसमें दिये गये सभी अनुदेशों को सावधानीपूर्वक पढ़ लिया जाये।
8. परीक्षा समाप्ति के उपरान्त परीक्षार्थी कक्ष निरीक्षक को अपनी OMR Answer Sheet उपलब्ध कराने के बाद ही परीक्षा कक्ष से प्रस्थान करें। परीक्षार्थी अपने साथ प्रश्न-पुस्तिका ले जा सकते हैं।
9. निगेटिव मार्किंग नहीं है।
10. कोई भी रफ कार्य, प्रश्न-पुस्तिका के अन्त में, रफ-कार्य के लिए दिए खाली पेज पर ही किया जाना चाहिए।
11. परीक्षा-कक्ष में लॉग-बुक, कैलकुलेटर, पेजर तथा सेल्युलर फोन ले जाना तथा उसका उपयोग करना वर्जित है।
12. प्रश्न के हिन्दी एवं अंग्रेजी रूपान्तरण में भिन्नता होने की दशा में प्रश्न का अंग्रेजी रूपान्तरण ही मान्य होगा।

महत्वपूर्ण : प्रश्नपुस्तिका खोलने पर प्रथमतः जाँच कर देख लें कि प्रश्न-पुस्तिका के सभी पृष्ठ भलीभाँति छपे हुए हैं। यदि प्रश्नपुस्तिका में कोई कमी हो, तो कक्षनिरीक्षक को दिखाकर उसी सिरीज की दूसरी प्रश्न-पुस्तिका प्राप्त कर लें।