



श्री चित्रा तिरुनाल आयुर्विज्ञान और प्रौद्योगिकी संस्थान, त्रिवेंद्रम , केरल- 695 011
(एक राष्ट्रीय महत्व का संस्थान, विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार)
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Entrance Examination 2020 - DM _ Cardiology _(Paediatrics)

SL No	Question	Answer	OptionA	OptionB	OptionC	OptionD
1	Pulmonary blood flow is decreased in which of the following:	B	Transposition of the great arteries with intact ventricular septum	Neonatal Ebstein's anomaly	Hypoplastic left heart syndrome	Transposition of the great arteries with ventricular septal defect
2	The negative input for augmented limb lead aVR is:	A	Left arm plus left leg	Right arm plus left leg	Left arm plus right arm	Wilson central terminal
3	All of the following fall in class IV of Modified WHO classification of maternal cardiovascular risk in pregnancy with maternal cardiac event rate risk of >40% EXCEPT:	C	Severe re-coarctation	Severe mitral stenosis	Fontan circulation	Systemic RV with moderately decreased ventricular function
4	All of the following chemotherapeutic agents produce irreversible dose dependent myocardial damage EXCEPT:	C	Doxorubicin	Paclitaxel	Trastuzumab	Cyclophosphamide
5	Non-Doppler strain rate imaging is obtained by:	B	Myocardial Contrast Echo	Speckle tracking	Adenosine stress echo	M Mode echocardiography
6	All of the following are part of the treatment targets and goals endorsed by ESC 2019 for cardiovascular risk prevention in people at moderate risk EXCEPT:	C	ApoB <100 mg/dl	LDL-C <100 mg/dl	Non-HDL-C <100 mg/dl	HbA1c <7%
7	Rastelli classification is used in:	D	Truncus arteriosus	Hypoplastic left heart syndrome	Congenital mitral valve anomalies	Atrio-ventricular canal defects
8	During invasive right heart catheterization, the mean right atrial pressure was noted to be the same during inspiration and expiration. Which of the following conditions would most likely be associated with this finding?	C	Obstructive airway disease	Cardiac tamponade	Constrictive pericarditis	Ventricular septal defect
9	Regarding natriuretic peptides, which of the following is FALSE?	C	BNP is better than NTproBNP in renal failure patients.	NT Pro BNP is the marker of choice in patients receiving ARNI than BNP.	NT Pro BNP Cut-Off for acute HF is the same in all age groups.	Obese patients have low Natriuretic peptide levels.
10	Which among the following type of VSDs will have the HIGHEST incidence of surgically induced atrioventricular block during closure?	A	Perimembranous defects	Outflow VSD (Sub-pulmonic)	Mid-muscular VSD	Apical Muscular VSD
11	A patient with heart failure with reduced EF (HFrEF) is having EF of 32%, BP 132 / 92 mmHg HR 66 bpm and Creatinine of 3 mg/dL. He is on Carvedilol 25 mg BD and Torsemide 20 mg BD. Whenever he is started on ACEI. His renal function worsens. He is still symptomatic with DOE. ECG shows sinus rhythm with normal QRS duration. The drug which can be considered in him.	C	ARNI – Sacubitril-Valsartan	Angiotensin Receptor Blocker	Hydralazine – nitrate	Ivabradine
12	Potts shunt is a shunt connecting:	D	Left subclavian artery to left pulmonary artery	Right subclavian artery to right pulmonary artery	Ascending aorta to right pulmonary artery	Descending aorta to left pulmonary artery
13	Which of the following medications used for Heart Failure with reduced ejection fraction (systolic congestive heart failure) DO NOT reduce mortality?	D	ACE inhibitors	Beta blockers	Aldosterone blockers	Diuretics
14	In COVID-19, the following statements are true EXCEPT:	D	Cytokine storm is one of the major reasons for cardiac injury	Supply-demand mismatch – Type 2 MI is another major reason for cardiac injury	Cardiac injury manifests in second week and is a prognostic factor	Type I MI due to atherosclerotic plaque rupture is the commonest mechanism of cardiac injury

15	Choose the FALSE statement regarding pre-excited atrial fibrillation:	B	Can degenerate to ventricular fibrillation and hence need prompt treatment	Amiodarone can effectively and safely control the ventricular rate and is the preferred choice	Direct cardioversion can be done even when the patient is hemodynamically stable	Ablation of the accessory pathway may reduce or cure the atrial fibrillation as well
16	Choose the FALSE statement regarding syncope:	C	Global cerebral hypoperfusion is the presumed mechanism	A short prodrome suggests a cardiac syncope	Tilt table testing is the first line and mandatory test in the evaluation of syncope	Beta blockers are no more the preferred drugs in the management of neurocardiogenic syncope
17	Choose the FALSE statement regarding pericarditis:	D	In general, Corticosteroids are not the preferred first line drugs in the treatment of a first episode of acute pericarditis	Colchicine significantly reduces the risk of recurrent pericarditis	Corticosteroids are useful in acute pericarditis during pregnancy	Constriction is unusual in pericarditis related to cardiac surgery
18	Which among the following is NOT a diastolic event?	D	Pericardial knock	Opening snap	Fourth heart sound	Non ejection click
19	Regarding management of right ventricular myocardial infarction, treatment which can be harmful?	A	Nitrates	Intravenous fluids	AV sequential pacing	Positive inotropes
20	The following is TRUE about AV conduction system in congenitally corrected transposition of great arteries:	B	Medical management is the treatment of choice in asymptomatic individuals	In some cases, there may be two AV nodes and both can have distal conduction system	Unless there is a Monckeberg sling, there can't be two conduction systems even if there are two AV nodes	The posterior AV node tends to lack distal conduction system if the pulmonary valve and outflow tract is atretic
21	Which of the following is FALSE about Ebstein's anomaly of the tricuspid valve in d-loop situs solitus hearts:	A	There is a higher incidence of left sided accessory pathways	It can cause hydrops foetalis	The modified cone repair is the preferred type of surgical repair	Cyanosis may not be present in all the cases
22	Dissociation of RP' (p wave and the preceding R wave) is least likely to occur in which of the following tachycardias?	A	Atrioventricular re-entrant tachycardia	Atrial tachycardia	Junctional ectopic tachycardia	Sinus nodal re-entrant tachycardia
23	Choose the TRUE statement regarding supraventricular tachycardia:	A	Adenosine can have a diagnostic as well as therapeutic role	Termination with Adenosine excludes the possibility of atrial tachycardia	Lack of response to Adenosine excludes an accessory pathway mediated tachycardia	Regular cannon waves during tachycardia suggests atrial flutter
24	Regarding the standard electrocardiographic recording, which of the following is FALSE?	D	The Chest leads are unipolar, whereas the unaugmented frontal leads are bipolar	The augmented Frontal plane leads are derived from the non-augmented ones but are unipolar	The skin-electrode interface is a potent source of artifacts	Myopotential artifacts are typically of the frequency 0.12-0.5 Hz

25	Which among the following statements is CORRECT regarding Aspirin?	D	Aspirin at doses less than 75mg/day does not have gastrointestinal side effects	At lower doses, Aspirin preferentially targets thrombin-mediated platelet aggregation	Enteric coated formulation of 75mg/day has the same bioavailability as non-coated Aspirin	Aspirin decreases the efficacy of Angiotensin converting enzyme inhibitors in patients with heart failure, when used concomitantly
26	A 50-year-old male presents to emergency department with localised central chest pain of 30 minutes duration, which he describes as mild. While taking history, you ask a series of questions to ascertain if it is likely to be acute coronary syndrome. An affirmative reply (i.e., answers as YES) to which of the following questions would have the highest likelihood of the patient having acute coronary syndrome?	D	Episode of similar pain last week while taking rest, which got relieved spontaneously over a few minutes	Associated left arm pain	Associated sweating	History of similar symptom at presentation during the previous acute coronary event.
27	Which among the following results in the formation of Ostium Secundum Atrial Septal Defect?	A	Excessive resorption of septum primum	Failure of fusion of atrioventricular septum with septum primum	Failure of fusion of septum primum and septum secundum	Failure of resorption of right venous valve
28	Which among the following clinical findings in a pregnant lady is always abnormal?	D	Loud First heart sound	Third heart sound	Ejection systolic murmur in base of heart	Apical mid-diastolic murmur
29	Which is TRUE regarding non-ST elevation acute coronary syndromes (NSTE-ACS) compared with ST elevation myocardial infarctions (STEMI)?	B	STEMI is more frequent	Long-term mortality of NSTE-ACS is higher	Long-term mortality of STEMI is higher	STEMI patients are older with more comorbidities
30	Which is TRUE statement about arrhythmogenic right ventricular cardiomyopathy?	C	Arrhythmogenic right ventricular cardiomyopathy is the commonest cause of sudden death in young athletes	Myocardial necrosis is a common histological feature	Endomyocardial biopsy has a low sensitivity and high specificity	Epsilon wave is the commonest electrocardiographic finding
31	Choose the FALSE statement regarding treatment of pediatric arrhythmias	C	DC cardioversion can be done with 0.5-2 J/kg of energy	Correct dose of Adenosine is 0.1mg/kg intravenous bolus	Amiodarone bolus should be given at 15mg/kg over 20-60 minutes	The intravenous loading dose of Digoxin is 8-12 micro gm/kg
32	All of the following are ABSOLUTE contraindications for treadmill testing EXCEPT:	A	Acquired complete heart block	Troponin positive acute coronary syndrome	Active endocarditis	Acute myocarditis
33	The maximum allowable whole-body radiation during lifetime for Cardiology personnel working in the cath lab (roentgen-equivalents-man) is:	B	5	50	100	500
34	Lipoprotein agarose gel electrophoresis of a patient with dyslipidemia and tuberos xanthomas showed a broad band between VLDL and LDL. Which is the most likely diagnosis?	C	Type I hyperlipoproteinemia	Type II hyperlipoproteinemia	Type III hyperlipoproteinemia	Type IV hyperlipoproteinemia
35	The mechanism of action of Mavacamten, evaluated for symptomatic HOCM is:	D	ATP citrate lyase inhibition	L-type calcium channel inhibitor and calmodulin antagonist	Endothelin-1 inhibitor	Cardiac myosin ATPase inhibitor
36	A 3kg term neonate with interrupted aortic arch on mechanical ventilation and on PGE1 infusion develops desaturation to 70%. All of the following are recommended first-line measures EXCEPT:	A	Uptitrate PGE1	Check for pulmonary venous congestion	Increase PEEP	Check for endotracheal tube block or displacement
37	In acute coronary syndrome due to cocaine use, it is preferable to avoid which of these agents?	B	Heparin	Beta blocker	ACEI	None of the above
38	The occurrence of conduction disturbances such as left bundle branch block (LBBB) and left anterior fascicular block (LAFB) are associated with which of the following?	B	Good prognosis	Poor prognosis	Does not dictate prognosis	None of the above

39	In a hypotensive patient with HOCM and high outflow gradient, in addition to intravenous fluids, which intravenous drug would be most useful?	D	Norepinephrine	Dopamine	Verapamil	Phenylephrine
40	What is the Duke treadmill score of a 45-year-old asymptomatic gentleman who walked for 14 min (13.5 METS on Bruce protocol), achieved an exercise heart rate of 185 bpm, has no angina, and has no ST-segment changes on ECG?	D	2	3.4	9	14
41	Which among the following is NOT a feature of severe mitral stenosis?	D	Elevated a wave in left atrial waveform	Elevated v wave in left atrial waveform	Blunted y descent	Mitral valve closes just before the onset of left ventricular contraction
42	Which of the following is generally associated with normal QRS axis on ECG?	D	Transposition of great arteries with intact ventricular septum	Tetralogy of Fallot with atrioventricular septal defect	Tricuspid atresia with normally related great arteries	Pulmonary atresia with intact ventricular septum
43	The following may be useful in the treatment of torsades de pointes, EXCEPT:	D	Isoprenaline	Potassium	Magnesium	Amiodarone
44	Which is NOT a relative contraindication for thrombolysis after myocardial infarction?	B	Lactation	Chronic liver disease with portal hypertension	Diabetic proliferative retinopathy	Uncontrolled hypertension
45	Choose the FALSE statement about aortic aneurysms:	B	Abdominal aorta is the commonest site	Suprarenal portion of abdominal aorta is specifically prone for developing aneurysms	Bicuspid aortic valve disease is known to be associated with thoracic aortic aneurysms	Some TGF-Beta pathway mutations are associated with aortopathy and aneurysm formation
46	Which is FALSE about the Marfan syndrome:	C	It is not always inherited, but is heritable	About 25% have the disease as a result of denovo mutations	Hypermetropia is a common finding	Annuloaortic ectasia is a typical cardiac manifestation
47	Which of the following has the highest risk for venous thromboembolism in hospitalized patients?	B	Stroke	Cancer	Obesity	Age >70 yrs
48	LEAST common radiological feature of constrictive pericarditis among the following is:	A	Calcified pericardium	Left atrial enlargement	Pleural effusion	Cardiomegaly
49	Choose the FALSE statement regarding jugular venous pulsations:	C	Irregular cannon waves can be seen in ventricular single chamber pacing	Kussmaul's sign may be seen in massive pulmonary embolism	Regular cannon waves are seen during atrioventricular re-entrant tachycardia	Square root sign is typical of constrictive pericarditis
50	With regards to the jugular venous pulse, which is FALSE?	B	Tricuspid regurgitation can cause a dominant v wave	Tricuspid stenosis can cause cannon a waves	Kussmaul's sign is a rise in the JVP on inspiration	Hyperdynamic circulation causes an elevated JVP
51	Which of the following infection resulted in outbreaks due to the use of infant formula in premature babies?	B	Enterobacter chuandaensis	Prevotella histicola	Streptococcus agalactiae	Cronobacter sakazakii
52	What is the gestational age assessment of a newborn with a New Ballard maturity rating of 0?	C	20 weeks	22 weeks	24 weeks	28 weeks
53	Who among the following needs a developmental evaluation?	A	36 months old boy who has pivotal speech with spontaneous 2-word phrases	18 months old girl with jargon speech and a vocabulary of 20 words	48 months old girl who uses 3 – 5 word sentences without conjunctions	4 months old boy vocalizing with bilabial 'raspberry' sounds

54	Which is FALSE regarding attention deficit hyperactivity disorders (ADHD) in children:	B	ADHD is associated with dysregulation of frontal subcortical circuits and small cortical volumes.	At least 5 in attentive symptoms and 3 hyperactive symptoms for a duration of 6 months is required for the diagnosis of ADHD by DSM-5.	Dopamine transporter gene and dopamine 4 receptor gene are the commonly implicated genes in the pathogenesis.	The symptoms must begin before the age of 12 years to fulfil the diagnosis of ADHD
55	Which of the following is FALSE regarding the evaluation of a child with Autistic Spectrum Disorder:	B	All children with ASD should have a chromosomal microarray (CMA).	All individuals with ASD and a head circumference greater than 2.5 SD should have MeCP2 deletion/duplication testing.	Girls with ASD should have testing for mutation in the <i>MeCP2</i> gene if CMA is normal.	Fragile X DNA testing is recommended for all boys with ASD
56	All of the following are associated with macrocephaly and global developmental delay, EXCEPT:	D	Alexander syndrome	Canavan disease	Sotos syndrome	Angelman syndrome
57	Rohan's anthropometric indices were recorded. His weight-for-age is 80%, height-for-age is 84%, weight-for-height is 86%. How is this interpreted?	A	Grade 1 underweight (Gomez), mild wasting (Waterlow), severe stunting (Waterlow)	Grade 2 underweight (Gomez), mild wasting (Waterlow), moderate stunting (Waterlow)	Grade 1 underweight (Gomez), mild wasting (Waterlow), moderate stunting (Waterlow)	Grade 1 underweight (Gomez), moderate wasting (Waterlow), severe stunting (Waterlow)
58	All of the following are TRUE regarding ROHHAD, EXCEPT	B	Rapid onset obesity is the most common symptom	PHOX-2 mutation is implicated in the pathogenesis	Initial symptoms present between 18 months and 7 years of life.	Failed growth hormone stimulation test suggests the diagnosis
59	A three-year-old child was evaluated for rickets and his reports were as follows: S. calcium 8.8mg/dl, S. phosphorus 3.1 mg/dl, Serum PTH 102 pg/ml (high), 25-(OH)D 45 nmol/L (normal), 1,25-(OH)2D 140 pg/ml (high). Which of the following is the most likely etiology?	C	Vitamin D deficiency	Autosomal dominant hypophosphatemic rickets	Vitamin D dependent rickets type 2A	Vitamin D dependent rickets type 1B
60	Epidemic keratoconjunctivitis in children is caused by:	D	Enterovirus CA24 or 70	Hemophilus influenzae	Chlamydia trachomatis	Adenovirus 8 or 19
61	Which is FALSE regarding post streptococcal glomerulonephritis	B	C4 levels are normal	Diffuse mesangial immunoglobulin deposits are noted on immunofluorescence	CH ₅₀ and C3 levels are depressed	Circulating antibodies to streptococcal pyogenic exotoxin (SPE B) is common
62	All of the following are causes of tubular proteinuria EXCEPT	A	Alport syndrome	Dent syndrome	Lowe syndrome	Fanconi syndrome
63	A 14-year-old child was evaluated for failure to achieve menarche. The child's stature was normal, but there was lack of breast development. The vagina and uterus were normal but gonads were streak. Which of the following is a possible diagnosis	D	21-hydroxylase deficiency	Mixed gonadal dysgenesis	Persistent Mullerian duct syndrome	XY pure gonadal dysgenesis
64	A 3.5 kg term newborn was evaluated for poor feeding, vomiting and convulsions on day 5 of life. Plasma ammonia was 75 mcg/dl, with high anion gap metabolic acidosis. All of the following are possible differential diagnoses EXCEPT:	C	Carnitine palmitoyltransferase Ia deficiency	Multiple carboxylase deficiency	Carbamoyl phosphate synthase 1 deficiency	Maple syrup urine disease
65	Which is NOT included in Quadruple test for screening of Down syndrome	B	Increased Beta HCG	Increased AFP	Increased inhibin	Decreased unconjugated estriol
66	False negative Apgar score is seen in	A	Maternal acidosis	Prematurity	Congenital neuropathy	Congenital myopathy
67	All are true about the presence of nuchal pad thickening of more than 6 mm at 5-20 weeks EXCEPT:	C	May be associated with Turner's syndrome	~ 25 % fetuses maybe normal	~75% may have associated chromosomal anomalies	Associated with Trisomy 21

68	Which among the following statements is CORRECT in children with Down's syndrome and leukemia?	B	Ratio of AML to ALL is higher in Down's syndrome than in general population	AML in Down's syndrome has better prognosis than in children without Down's syndrome	About 10 % of children with Down's syndrome develop a transient leukemia (TL-DS) of megakaryocyte – erythroid precursors in fetal liver around 1 year of age	Cytarabine-based therapy is preferred for the management of TL-DS to prevent progression to typical leukemia
69	Identify the TRUE statement regarding immunoglobulins in the child	A	Premature infants do not mount IgM response to antigenic stimulation in the first two weeks of life	Premature infants receive less maternal IgG by birth as opposed to full term infants.	Adult concentrations of IgM are achieved by the child far earlier than adult levels of IgG	Cord serum from noninfected normal newborns does not contain IgA
70	Which is FALSE?	D	Lecithin : sphingomyelin ratio of 2:1 in amniotic fluid indicates lung maturity	Saturated phosphatidyl choline in the amniotic fluid is a more specific indicator of pulmonary maturity	Lecithin is produced by Type II alveolar cells	Lecithin : sphingomyelin ratio is 4:1 in maternal blood
71	Which is FALSE regarding urine output, in the definition of Oliguria	B	Less than 0.5 ml/kg/hour in a child	Less than 1 ml/kg/hour in a child	Less than 240 ml/m ² body surface area	Less than 400 ml/day in older child
72	Persistent hypoglycemia of newborn is defined as failure to maintain a normal blood sugar despite a glucose infusion rate of:	B	10 mg/kg/min	12 mg/kg/min	14 mg/kg/min	16 mg/kg/min
73	Strain of Rotavirus used in ROTAVAC is	A	116E	115F	112G	114H
74	Excess of vitamin K in a new born causes	B	Bleeding tendencies	Hyperbilirubinemia	Vomiting	Hemolysis
75	Average caloric content of a full-term mother's breastmilk is:	C	50 kcal/100 ml	55 kcal/100ml	67 kcal/100ml	80 kcal/100ml
76	Earliest sign of rickets is	B	rickety rosary	craniotabes	bow legs	Harrison's groove
77	Total brain volume of a newborn doubles by	A	One year	Two years	Three years	Four years
78	Late onset thrombocytopenia develops by:	C	24 hours of life	48 hours of life	72 hours of life	7 days of life
79	A newborn baby has a head circumference of 35cm at birth. His optimal head circumference will be 43cm at	D	4 months of age	6 months of age	8 months of age	12 months of age
80	The modified Ross classification of pediatric heart failure does NOT include which among the following clinical parameters	A	Fatigue	Dyspnea	Diaphoresis	Growth
81	Intra uterine growth retardation can be caused by all EXCEPT:	D	Nicotine	Alcohol	Propranolol	Phenothiazine
82	Which vitamin deficiency is NOT seen in newborn?	B	C	E	D	K
83	Which of the following is the etiological agent of rickettsial pox?	A	Rickettsia akari	Rickettsia prowazekii	Rickettsia conorii	Orientia tsutsugamushi
84	Deficiency of protoporphyrinogen oxidase leads to:	C	Congenital erythropoietic porphyria	Acute intermittent porphyria	X-linked protoporphyrinemia	Variete porphyria
85	Colchicine acts by inhibition of:	A	tubulin polymerization	mitotic spindle	Variete porphyria	a) IL 6
86	Lefamulin is a:	C	Peptidoglycan antibiotic	Lipidoglycan antibiotic	Pleuromutilin antibiotic	Glycoprotein antibiotic
87	All are immune deficiency syndromes with dermatologic disorders EXCEPT:	D	Dyskeratosis congenita	Acrodermatitis enteropathica	Netherton syndrome	Chediak-Higashi syndrome
88	Hemolytic anemia is seen in deficiency of which of the following micronutrient	B	Vitamin C	Vitamin E	Manganese	Selenium
89	All the following are trinucleotide expansion disorders EXCEPT:	A	Ataxia telangiectasia	Spinocerebellar ataxia	Myotonic dystrophy	Friedrich's ataxia
90	Which among the following is NOT an example of non-traditional inheritance?	D	Pearson syndrome	Huntington disease	Prader-Willi syndrome	Retinitis pigmentosa

91	A person has the AB type blood group. His sister and mother have the O type, whereas his father's blood group is A. Which of the following statements is TRUE?	C	The situation is impossible	The mother's blood group is erroneous and needs to be repeated	The mother has anti-A, anti-B, and anti-h antibodies in her serum	The father has anti-A antibody in his serum
92	If a patient is HBsAg + ve, Anti-HBS negative, Anti HBc IgM positive ALONG with HbeAg positive, and AntiHBe negative – it indicates:	A	Acute Hepatitis B infection – High infectivity	Chronic Hepatitis B – High infectivity	Window period	Acute Hepatitis B infection – Low infectivity
93	Choose the FALSE statement regarding Hyperkalemia:	B	Can be associated with hyperchloremic acidosis	Increases the cardiac resting membrane potential	Calcium administration can reduce the ECG changes seen in Hyperkalemia	There is poor correlation between potassium levels and ECG changes
94	All the following may be used to determine if a study sample has normal distribution EXCEPT:	D	Histogram	Kolmogorov Smirnov test	Shapiro Wilk test	Kruskal Wallis test
95	Value of Pearson correlation coefficient is between	C	0 and +1'	0 and - 1'	-1 and +1'	0.005 and 0.05'
96	Serum parathyroid hormone concentration is decreased in which of the following conditions?	A	Hereditary hypophosphatemic rickets with hypercalciuria	Vitamin D deficiency	Hereditary Vitamin D resistant rickets	X-linked hypophosphatemia
97	On evaluation of polyuria, serum sodium was found to be very high, with low urine sodium and low vasopressin level. Which of the following is the most likely cause?	C	Syndrome of inappropriate antidiuretic hormone secretion	Nephrogenic syndrome of inappropriate antidiuresis	Central diabetes insipidus	Cerebral salt wasting
98	Red cell Distribution width is LOW in:	D	Sickle cell anemia	Iron deficiency anemia	Megaloblastic anemia	Aplastic anemia
99	Osmolal gap is defined as the difference between the measured and calculated plasma osmolality of more than:	B	5 mOsm/kg	10 mOsm/kg	15 mOsm/kg	20 mOsm/kg
100	Polyvalent antsnake venom is effective against all EXCEPT	A	Banded krait	Saw scaled viper	Russell viper	Common krait