Top 100 Most Repeated Government Pharmacist Exam MCQs with Verified Solutions

Document: Top 100 Solved MCQs Question Bank	**Target Exams:** RRB, AIIMS, ESIC, UPSSSC, RSSB, BTSC
Standard: PCI Education Regulations (ER-2020)	**Official Portal:** sarkaripharma.com

Q1. What is the statutory first-line antidote administered in acute Paracetamol (Acetaminophen) toxicity?

(A) Atropine Sulphate
(B) N-Acetylcysteine (NAC)
(C) Naloxone Hydrochloride
(D) Deferoxamine Mesylate

Correct Answer: (B) N-Acetylcysteine (NAC)

Rationale: Acetaminophen toxicity produces toxic metabolite NAPQI which depletes hepatic glutathione. N-Acetylcysteine replenishes glutathione stores and conjugates NAPQI to non-toxic mercapturic acid.

Q2. Which class of antihypertensive drugs is strictly contraindicated in bilateral renal artery stenosis?

(A) Calcium Channel Blockers (Amlodipine)
(B) ACE Inhibitors (Enalapril / Ramipril)
(C) Beta Blockers (Atenolol)
(D) Thiazide Diuretics

Correct Answer: (B) ACE Inhibitors (Enalapril / Ramipril)

Rationale: In bilateral renal artery stenosis, glomerular filtration pressure depends on Angiotensin II-mediated efferent arteriolar constriction. ACE inhibitors block this mechanism, precipitating acute renal failure.

Q3. Which of the following antimicrobial agents is notorious for causing Gray Baby Syndrome in neonates?

(A) Tetracycline
(B) Chloramphenicol
(C) Erythromycin
(D) Ciprofloxacin

Correct Answer: (B) Chloramphenicol

Rationale: Neonates lack adequate glucuronyl transferase enzyme required for chloramphenicol conjugation, leading to toxic drug accumulation, circulatory collapse, and ashen-gray cyanosis.

Q4. The specific antidote for acute benzodiazepine overdose is:

(A) Naloxone
(B) Flumazenil
(C) Pralidoxime (2-PAM)
(D) Physostigmine

Correct Answer: (B) Flumazenil

Rationale: Flumazenil is a competitive antagonist at the central GABA-A receptor benzodiazepine binding site.

Q5. Which diuretic drug acts primarily on the thick ascending limb of the Loop of Henle?

(A) Spironolactone
(B) Furosemide
(C) Hydrochlorothiazide
(D) Acetazolamide

Correct Answer: (B) Furosemide

Rationale: Furosemide inhibits the Na+/K+/2Cl- cotransporter in the thick ascending limb of Henle's loop, causing profound natriuresis.

Q6. The therapeutic serum concentration range for Digoxin in heart failure management is:

(A) 0.5 – 0.9 ng/mL
(B) 2.5 – 5.0 ng/mL
(C) 5.0 – 10.0 ng/mL
(D) 10 – 20 ng/mL

Correct Answer: (A) 0.5 – 0.9 ng/mL

Rationale: Digoxin has a narrow therapeutic index. Levels above 2.0 ng/mL produce fatal cardiac arrhythmias.

Q7. Red-orange discoloration of urine, tears, and bodily secretions is an anticipated adverse effect of:

(A) Isoniazid (INH)
(B) Rifampicin
(C) Ethambutol
(D) Pyrazinamide

Correct Answer: (B) Rifampicin

Rationale: Rifampicin is a lipid-soluble dye-like molecule excreted in urine, tears, and sweat, coloring them harmlessly orange-red.

Q8. Retrobulbar optic neuritis causing red-green color blindness is a classic toxic effect of:

(A) Streptomycin
(B) Ethambutol
(C) Rifampicin
(D) Dapsone

Correct Answer: (B) Ethambutol

Rationale: Ethambutol produces dose-dependent optic neuropathy impairing visual acuity and color discrimination.

Q9. Which anticoagulant agent can be safely administered during pregnancy?

(A) Warfarin
(B) Heparin (Unfractionated / LMWH)
(C) Dabigatran
(D) Phenindione

Correct Answer: (B) Heparin (Unfractionated / LMWH)

Rationale: Heparin is a large, highly charged molecule that does not cross the placental barrier, unlike Warfarin which is teratogenic.

Q10. Protamine Sulphate is the pharmacological reversal agent for:

(A) Warfarin toxicity
(B) Heparin toxicity
(C) Aspirin poisoning
(D) Streptokinase hemorrhage

Correct Answer: (B) Heparin toxicity

Rationale: Protamine is strongly basic and combines with strongly acidic Heparin to form an inactive, stable salt complex.

Q11. The statutory temperature defined in the Indian Pharmacopoeia (IP) for 'Cold Storage' is:

(A) 0°C to 4°C
(B) 2°C to 8°C
(C) 8°C to 15°C
(D) 15°C to 25°C

Correct Answer: (B) 2°C to 8°C

Rationale: As per IP specifications, 'Cold' means any temperature between 2°C and 8°C. 'Cool' means 8°C to 25°C.

Q12. What is the standard capacity of a Size '000' hard gelatin capsule shell?

(A) 0.68 mL
(B) 0.95 mL
(C) 1.37 mL
(D) 0.21 mL

Correct Answer: (C) 1.37 mL

Rationale: Size '000' is the largest standard hard gelatin capsule with a volume capacity of 1.37 mL. Size '5' is the smallest (0.13 mL).

Q13. In tablet manufacturing, 'Capping' is defined as:

(A) Partial or complete separation of top or bottom crown from the main tablet body
(B) Unequal distribution of color across the tablet surface
(C) Adhesion of tablet granulation to the punch faces
(D) Breaking of tablet edges during coating

Correct Answer: (A) Partial or complete separation of top or bottom crown from the main tablet body

Rationale: Capping is caused by air entrapment during compression and excessive fine particles in granulation.

Q14. The official USP disintegration time limit for Uncoated Tablets is not more than:

(A) 5 minutes
(B) 15 minutes
(C) 30 minutes
(D) 60 minutes

Correct Answer: (B) 15 minutes

Rationale: Indian and British Pharmacopoeia prescribe disintegration time of not more than 15 minutes in water at 37°C for uncoated tablets.

Q15. HEPA filters utilized in laminar airflow sterile workstations must filter particles with efficiency of:

(A) 90.0% at 0.5 micron
(B) 95.0% at 0.3 micron
(C) 99.97% at 0.3 micron
(D) 99.99% at 1.0 micron

Correct Answer: (C) 99.97% at 0.3 micron

Rationale: Standard Grade HEPA filters remove 99.97% of airborne particulate matter down to 0.3 micrometers in diameter.

Q16. Under the Drugs and Cosmetics Act 1940, 'Schedule M' prescribes standards for:

(A) Good Laboratory Practices (GLP)
(B) Good Manufacturing Practices (GMP) and factory premises
(C) Standards for surgical dressings
(D) Pack sizes of drugs

Correct Answer: (B) Good Manufacturing Practices (GMP) and factory premises

Rationale: Schedule M details mandatory requirements for premises, plant layout, equipment, and GMP for pharmaceutical products.

Q17. The Pharmacy Act was enacted by the Parliament of India in the year:

(A) 1940
(B) 1945
(C) 1948
(D) 1950

Correct Answer: (C) 1948

Rationale: The Pharmacy Act, 1948 (Act No. 8 of 1948) was enacted on 4th March 1948 to regulate the profession of pharmacy in India.

Q18. The Central Drugs Laboratory (CDL) of India is situated at:

(A) Kasauli, Himachal Pradesh
(B) Kolkata, West Bengal
(C) Mumbai, Maharashtra
(D) Ghaziabad, Uttar Pradesh

Correct Answer: (B) Kolkata, West Bengal

Rationale: The statutory Central Drugs Laboratory established under Section 6 of the Drugs & Cosmetics Act is located at 3 Kyd Street, Kolkata.

Q19. Under the Pharmacy Act 1948, the mandatory hospital practical training requirement for D.Pharm students is:

(A) 250 hours over 2 months
(B) 500 hours over not less than 3 months
(C) 750 hours over 6 months
(D) 1000 hours over 1 year

Correct Answer: (B) 500 hours over not less than 3 months

Rationale: Form-III (Appendix-E) of PCI Education Regulations mandates 500 hours practical training over not less than 3 months under a Registered Pharmacist.

Q20. 'Schedule X' under the Drugs and Cosmetics Rules deals with:

(A) List of poisonous substances

(B) List of Habit-Forming and Psychotropic Substances

(C) List of generic drugs exempted from price control

(D) Standards for disinfectants

Correct Answer: (B) List of Habit-Forming and Psychotropic Substances

Rationale: Schedule X governs potent psychotropic and habit-forming drugs like Barbiturates, Ketamine, and Amphetamines requiring triple prescription retention.