



PROCESSO SELETIVO UNIFICADO/2025 – RESIDÊNCIA MÉDICA

PROVA OBJETIVA

DATA 02/02/2025

GABARITO



Você deverá pintar apenas uma alternativa

1	A	B	<input checked="" type="radio"/>	D
2	A	<input checked="" type="radio"/>	C	D
3	<input checked="" type="radio"/>	B	C	D
4	A	B	C	<input checked="" type="radio"/>
5	<input checked="" type="radio"/>	B	C	D
6	A	<input checked="" type="radio"/>	C	D
7	A	B	C	<input checked="" type="radio"/>
8	A	<input checked="" type="radio"/>	C	D
9	<input checked="" type="radio"/>	B	C	D
10	<input checked="" type="radio"/>	B	C	D
11	A	B	C	<input checked="" type="radio"/>
12	<input checked="" type="radio"/>	B	C	D
13	A	B	<input checked="" type="radio"/>	D
14	A	B	C	<input checked="" type="radio"/>
15	<input checked="" type="radio"/>	B	C	D
16	A	B	<input checked="" type="radio"/>	D
17	A	B	<input checked="" type="radio"/>	D
18	A	B	C	<input checked="" type="radio"/>
19	A	B	<input checked="" type="radio"/>	D
20	<input checked="" type="radio"/>	B	C	D
21	A	<input checked="" type="radio"/>	C	D
22	A	B	C	<input checked="" type="radio"/>
23	A	B	<input checked="" type="radio"/>	D
24	A	B	<input checked="" type="radio"/>	D
25	A	B	C	<input checked="" type="radio"/>

26	<input checked="" type="radio"/>	B	C	D
27	A	<input checked="" type="radio"/>	C	D
28	A	<input checked="" type="radio"/>	C	D
29	A	B	C	<input checked="" type="radio"/>
30	<input checked="" type="radio"/>	B	C	D
31	A	B	<input checked="" type="radio"/>	D
32	A	B	C	<input checked="" type="radio"/>
33	A	<input checked="" type="radio"/>	C	D
34	A	B	C	<input checked="" type="radio"/>
35	A	B	<input checked="" type="radio"/>	D
36	A	<input checked="" type="radio"/>	C	D
37	A	B	<input checked="" type="radio"/>	D
38	A	<input checked="" type="radio"/>	C	D
39	<input checked="" type="radio"/>	B	C	D
40	A	<input checked="" type="radio"/>	C	D
41	A	B	C	<input checked="" type="radio"/>
42	A	<input checked="" type="radio"/>	C	D
43	A	B	<input checked="" type="radio"/>	D
44	A	B	C	<input checked="" type="radio"/>
45	<input checked="" type="radio"/>	B	C	D
46	A	<input checked="" type="radio"/>	C	D
47	A	B	<input checked="" type="radio"/>	D
48	A	<input checked="" type="radio"/>	C	D
49	A	B	<input checked="" type="radio"/>	D
50	<input checked="" type="radio"/>	B	C	D

Assinatura por extenso: _____