

1. All of the following are causes of bloody diarrhoea **EXCEPT**:
Shigellosis.

Cholera.

Pseudomembranous colitis.

Angiodysplasia.

Diverticulosis.

2. All of the following organisms can be transmitted during blood transfusion Except:
HBV.

Syphilis

CMV

Measles

EBV.

3. Which one of the following is **not** a feature of ankylosing spondilitis:

Renal failure.

Uveitis.

Morning stiffness.

Symptoms improve with exercise.

Peripheral joints are affected.

4. In typhoid fever, which one of the following is Not **true**:
Blood culture is positive in the first week.

Widal test is diagnostic.

Skin rash (Rose spots) occur in the second week of fever.

Stool culture is positive in the third week of illness.

The drug of choice for treatment is ciprofloxacin.

5. Hepatosplenomegaly is usually found in all the following conditions **EXCEPT**:
Beta-thalassaemia major.

Idiopathic thrombocytopenic purpura.

Myelofibrosis.

Myeloid leukaemia.

Polycythaemia rubra vera

6. The following drugs are nephrotoxic **EXCEPT**:
diclofen

Cyclosporin.

Gentamycin.

ciprofloxacin.

Amikacin.

7. The following may be present in myasthenia gravis **EXCEPT**:

Thymoma.
Antibodies to acetylcholine receptor.
Sensory neuropathy.
Diplopia.
Respiratory failure.

8. All of the following conditions are causes of chronic liver disease **EXCEPT**:

Primary biliary cirrhosis.
Hepatitis C infection.
Hepatitis B infection.
Infectious mononucleosis.
Autoimmune hepatitis

9. which one of the following is a major criteria of rheumatic fever :

Erythema multiform.
Erythema marginatum.
Erythema chronicum-migrans.
Erythema nodosum.
Granuloma annulare.

10. The following are causes of bradycardia **EXCEPT**:

Pulmonary embolism
Hypothyroidism.
 β blocker.
Organophosphorous poisoning.
Hypothermia.

11. Which of the following is **False** about systemic lupus erythematosus (SLE):

Is a cause of lymphopenia.
Can cause oral ulcers.
May cause seizures.
Can cause psychosis.
Causes joint deformity.

12. Which one of the following can cause atrial fibrillation:

Pneumonia.
Hypertension.
Fever.
Ischemic heart disease.
All are true

13. All of the following are indications for haemodialysis **EXCEPT**:

Pulmonary oedema

Uraemic encephalopathy.

Severe refractory hyperkalaemia

Anemia.

Uraemic pericarditis.

14. Causes of high anion gap metabolic acidosis include all of the following **EXCEPT**:

Renal failure.

Diabetic ketoacidosis.

Ethanol poisoning

Sepsis.

Prolonged hypotension.

15. Causes of microcytosis in peripheral blood include all of the following **EXCEPT**:

Hypothyroidism.

Iron deficiency anemia.

B12 deficiency

Thalassaemia trait.

Inherited sideroplastic anaemia

16. All of the following antibiotics are effective against pseudomonas aeruginosa infection

Except:

Ciprofloxacin

Piperacillin

Amikacin

Clarithromycin.

Ceftazidim

17. Diarrhoea is associated with all of the following **EXCEPT**:

Irritable bowel syndrome

Coeliac disease.

Hyperthyroidism.

Primary hyperparathyroidism.

Bacterial overgrowth.

18. All of the following are manifestations of hypokalaemia **EXCEPT**:

U wave on ECG

Paralytic ileus

Polyuria.

Vomiting.

Exaggerated deep tendon reflexes

19. Which one of the following is **not** seen in Addison's disease:

Diarrhoea.

High serum K.

Weight loss

Thrombocytopenia.

Eosinophilia.

20. All of the following are causes of finger clubbing **EXCEPT**:

Bronchiectasis.

Bronchial squamous cell carcinoma.

Bronchial Asthma.

Fibrosing alveolitis.

Inflammatory bowel disease.

1. A 22 year old woman has had four episodes of deep venous thrombosis (DVT). Laboratory studies should include each of the following **EXCEPT** :

Serum albumin.

Protein C.

Protein S.

Antithrombin III.

Lupus anticoagulant.

2. All of the following conditions cause prolongation of QT interval on ECG **EXCEPT**:

Heart failure.

Hypercalcaemia.

Amiodarone therapy.

Hypomagnesaemia.

Diuretic therapy.

3. Each of the following conditions is likely to be associated with increased incidence of acute gout **EXCEPT**:

A. Chronic alcoholism.

B. Obesity.

Rheumatoid arthritis.

Diabetes mellitus.

E. Diuretic therapy.

4. Which one of the following medications should **NOT** be taken in aspirin-induced asthma:

Paracetamol.
Diclofenac sodium.
Codeine.
Ranitidine.
Tetracycline.

5. Each of the following clinical situations can cause gynecomastia **EXCEPT**:

Carcinoma of the bronchus.
Digoxin therapy.
Hyperthyroidism.
Captopril therapy.
Testicular tumor.

6. In septic arthritis, the **most** likely organism causes infection is:

Neisseria gonorrhoea.
Chlamydia trachomatis.
Staphylococcus aureus.
Streptococcus pneumonia.
Staphylococcus epidermidis.

7. Which of the following signs is **NOT** a feature of Parkinson's disease:

Action tremor. >> static tremors
Rigidity.
Bradykinesia.
Micrographia.
Loss of postural reflexes.

8. Each of the following conditions commonly cause splenomegaly **EXCEPT**:

Hereditary spherocytosis.
Chronic myeloid leukemia (CML).

Idiopathic thrombocytopenic purpura (ITP).

Polycythaemia rubra vera.

β-Thalassaemia.

9. All of the following conditions cause pruritis (itching) **EXCEPT**:

Primary biliary cirrhosis.

Hyperlipidaemia.

Renal failure.

Lymphoma.

Hyperthyroidism.

10. Which of the following antibiotics will be **most** effective in the treatment of mycoplasma pneumonia:

A. Vancomycin.

B. Metronidazole.

C. Tetracycline.

D. Ampicilline.

E. Acyclovir.

11. All of the following conditions cause exudative ascities **EXCEPT**:

Tuberculous peritonitis.

Malignancy.

Pancreatic ascities.

Budd-Chiari syndrome. ??

Constrictive pericarditis.

12. All of the following are causes of hypercalcaemia **EXCEPT**:

Sarcoidosis.

Primary hyperparathyroidism.

Multiple myeloma.

Osteoporosis.

Bronchial carcinoma.

13. In the management of acute hyperkalaemia, which one of the following drugs is administered first:

Sodium bicarbonate.
Insulin plus glucose, intravenously.
Calcium gluconate, intravenously.
Salbutamol.
Loop diuretic.

14. Which one of the following findings is **LEAST** consistent with nephrotic syndrome:

Haematuria.
Hypoalbuminaemia.
Oedema.
Proteinuria > 3g \ 24 hour.
High serum cholesterol.

15. Which **ONE** of the following drug regimens should be started in acute management of deep venous thrombosis (DVT):

Start aspirin immediately.
Start warfarin (coumadin) immediately.
Start aspirin and warfarin together, immediately.
Start heparin, followed by warfarin.
Give streptokinase.

16. The **most** common ECG finding in pulmonary embolism is:

Sinus tachycardia.
Right bundle branch block.
Right axis deviation.
Atrial fibrillation.
ST- segment elevation.

17. The gold standard test for the diagnosis of acute interstitial nephritis is:

Urine eosinophil count.
Renal biopsy.
Renal ultrasound.
Urine red cells casts.
CT-scan of abdomen and pelvis.

18. All of the following are associated with an increased risk for ischemic heart disease **EXCEPT**:

Diabetes mellitus.

Obesity.

High level of high-density lipoprotein (HDL) cholesterol.

Hypertension.

Cigarette smoking.

19. Which physical finding is **NOT** a characteristic of dilated cardiomyopathy:

A) S 3 gallop.

B) Pulmonary crepitation.

C) Diffuse, medially displaced left ventricular impulse.

D) Mitral regurgitation.

E) S 4 gallop.

20. All of the following are indicated in the treatment of unstable angina **EXCEPT**:

Nifedipine (Adalat).

Intravenous heparin.

Aspirin.

Nitrates

Atenolol.

21. All of the following are consistent with the diagnosis of mitral stenosis **EXCEPT**:

Loud p2.

Opening snap.

Diastolic rumble.

Left ventricular strain pattern on ECG.

Dyspnoea.

22. All of the following drugs can be used in the treatment of hypertension **EXCEPT**:

Captopril.
Diltiazem.
Digoxin.
Atenolol.
Thiazide diuretics.

23. All of the following are major criteria for the diagnosis of rheumatic fever
EXCEPT:

Arthritis.
Carditis.
Subcutaneous nodules.
Erythema marginatum.
High ESR.

24. Which of the following can cause a transudative pleural effusion:

Congestive heart failure.
Hypothyroidism.
Liver cirrhosis.
Nephrotic syndrome.
All of the above.

25. Which of the following disorders can cause hemoptysis:

Bronchiectasis.
Tuberculosis.
Aspergilloma.
Pulmonary embolism.
All of the above.

26. Which **one** of the following drugs can precipitate bronchospasm in asthmatics:

Captopril.
Propranolol.
Subcutaneous heparin.
Diuretics.
Calcium channel blockers.

27. The **best** way to make a diagnosis of cystic fibrosis is:

Sweat chloride test.
Sputum culture.
Pulmonary function test.
Chest CT-Scan.
DNA analysis.

28. All of the following are causes of finger clubbing **EXCEPT**:

Bronchiectasis.
Bronchial squamous cell carcinoma.
Chronic bronchitis.
Fibrosing alveolitis.
Cystic fibrosis.

29. All of the following are complications of pancreatitis **EXCEPT**:

Ascites.
Pancreatic abscess.
Pancreatic pseudocyst.
Hypercalcemia.
Acute Renal failure.

30. All of the following are causes of diarrhoea **EXCEPT**:

Hyperthyroidism.
Zollinger-Ellison syndrome.
Carcinoid syndrome.
Hyperparathyroidism.
Diabetes mellitus.

31. Common findings in sepsis include all of the following **EXCEPT**:

A reduced cardiac output in early stages.
Tachycardia.

A decreased systemic vascular resistance.
Hypotension.
Metabolic acidosis.

32. Complications of diabetes mellitus include all of the following
EXCEPT:

Autonomic dysfunction.
Atherosclerosis.
Blindness.
Bronchiectasis.
Peripheral vascular disease.

33. Hemochromatosis is associated with all of the following clinical
manifestations **EXCEPT:**

	deposition in :
Cirrhosis.	liver
Diabetes mellitus.	pancreas
Gonadotropin deficiency.	Pituitary
Cardiomyopathy.	Heart
Hypertension.	

34. All of the following may result in nephrotic syndrome **EXCEPT:**

Diabetes mellitus.
Hodgkin's lymphoma.
Membranous glomerulonephritis.
Gout.
Amyloidosis.

35. Which of the following is **not** seen in Addison's disease:

High serum Na.
High serum K.
Hypotension.
Low blood sugar.
Hyperpigmentation.

36. The **most** common organism in acute bacterial pyelonephritis is:

Klebsiella.
Chlamedia.
E.coli.
Pseudomonas.
Candida.

37. Symptoms and signs associated with pheochromocytoma include all of the following **EXCEPT**:

Hypertension.
Sweating.
Palpitation.
Flushing.
Holosystolic murmur.

38. Thrombocytopenia may be associated with all of the following **EXCEPT**:

Cirrhosis.
Sepsis.
Viral infection.
Splenectomy.
Systemic lupus erythematosus (SLE).

39. All of the following are manifestations of hypercalcemia **EXCEPT**:

Depression.
Diarrhoea.
Polyuria.
Vomiting.
Seizures.

40. Which of the following cardiac conditions have the **lowest** risk for development of infective endocarditis:

Coactation of aorta.
Ventricular septal defect.
Atrial septal defect.
Prosthetic heart valve.
Patent ductus arteriosus.

41. Malabsorption is associated with all of the following **EXCEPT**:

Giardiasis.
Coeliac disease.
Crohn's disease.
Helicopacter pylori.
Bacterial overgrowth.

42. Which **one** of the following antibiotics is effective against pseudomonas aergenosa infection:

Ampicilline.
Gentamycin.
Metronidazole.
Tetracycline.
Cephalexine (keflex).

43. Causes of macrocytosis in peripheral blood include all of the following **EXCEPT**:

Hypothyroidism.
Iron deficiency anemia.
Chronic alcohol abuse.
Liver cirrhosis.
Haemolysis.

44. Causes of metabolic acidosis include all of the following **EXCEPT**:

Renal failure.
Diabetic ketoacidosis.
Diuretics. >> metabolic alkalosis
Sepsis.
Prolonged hypotension.

45. Characteristic features of achalasia of the oesophagus include all of the Following **EXCEPT**:

Increased lower oesophageal sphincter.
Abnormal histology of the oesophageal wall.
Chest pain.
Dysphagia.
Heart pain.

46. All of the following are indications for haemodialysis **EXCEPT**:

Hypotension.
Uraemic encephalopathy.
Hyperkalemia.
Uraemic pericarditis.
Pulmonary oedema.

47. Causes of atrial fibrillation include all of the following **EXCEPT**:

Constrictive pericarditis.
Complete heart block.
Pulmonary embolism.
Ischemic heart disease.
Thyrotoxicosis.

48. Complications of inflammatory bowel disease (Cohn's disease, ulcerative colitis) include all of the following **EXCEPT**:

Urinary tract stones and gallbladder stones.
Pyoderma gangrenosum as skin manifestation.
Chronic hepatitis.
Arthritis.
Congestive heart failure.

49. All of the following are causes of splenomegaly **EXCEPT**:

- A. Portal hypertension.
- B. Chronic myeloid leukaemia (CML).
- C. Hodgkin's disease.
- D. Ulcerative colitis.**
- E. Myelofibrosis.

50. Complications of Behcet's disease include all of the following **EXCEPT**:

Deep venous thrombosis.

Seizures.

Gout.

Bloody diarrhoea.

Erythema nodosum.

51. Which of the following is **true** about systemic lupus erythematosus (SLE):

Is a cause of haemolytic anaemia.

Can cause lymphadenopathy.

May cause focal central nervous signs.

Can cause hair loss (alopecia).

All are true.

52. All of the following are causes of bloody diarrhoea **EXCEPT**:

Shigellosis.

Giardia infection.

Entamoeba histolytica infection.

Ulcerative colitis.

Diverticulosis.

53. Which one of the following is **not** a complication of blood tranfusion:

Haemolytic reaction.

Thrombocytopenia.

Fever.

Hypercalcemia.

Infection transmission.

54. Primary biliary cirrhosis can be described by all of the following statements
EXCEPT:

90% of affected individuals are men.

Pruritus, fatigue, and jaundice are common.

Serum transaminase levels (AST, ALT) are normal or slightly elevated.

Serum cholesterol level is elevated.

The most common causes of death are hepatic failure and bleeding oesopgeal varices.

55. The most common cause of bacterial meningitis in adult is:

Streptococcus pneumoniae.

Neisseria meningitidis.

Hemophilus influenzae.

Staphylococcus aureus.

Staphylococcus epidermidis.

56. A 35 year old man with nausea and vomiting, vertigo, nystagmus, tinnitus and nerve deafness in the right ear most likely has:

Mastoiditis.

A cerebellar tumor.

Labyrinthitis.

A glioblastoma multiform.

Acoustic neuroma.

57. A 75 year old woman who is using warfarin, presented to emergency room with left sided weakness and difficulty in speech. The first test for diagnosis is to do:

MRI of the brain.

CT of the brain.

Electroencephalogram (EEG).

Lumbar puncture.

ECG.

58. Which condition is **least** likely to present with polyarthritis:

Rheumatic fever.

Rheumatoid arthritis.

Systemic lupus erythematosus (SLE).

Gout.

Viral infection.

59. The most important first step in lowering cholesterol is:

Drug therapy.
Decreasing stress.
Decreasing intake of carbohydrates.
Physical exercise.
A low-fat diet.

60. The first line drug for the treatment of status epilepticus is:

Intravenous phenytoin.
Intravenous diazepam or lorazepam.
Intravenous lidocaine.
Intravenous phenobarbital.
Intravenous digoxin.

61. Which one of the following is **not** a feature of ankylosing spondylitis:

Renal failure.
Uveitis.
Morning stiffness.
Symptoms improve with exercise.
Peripheral joints are affected.

62. In typhoid fever, which one of the following is **true**:

Stool culture is positive in the first week. >> 2nd wk
Antibiotic treatment is not always necessary. >> ciprofloxacin
Skin rash (Rose spots) occur in the first week of fever. >> in 2nd wk
Blood culture is positive in the third week of illness. >> in 1st 2 wks
The organism can be cultured from bone marrow.

63. Drugs which are safe in pregnancy include all of the following **EXCEPT**:

Penicillins.
Paracetamol.
Cephalosporins (keflex).
Heparin.
Methotrexate.

64. Hepatosplenomegaly is usually found in all the following conditions

EXCEPT:

Beta-thalassaemia major.

Aplastic anemia.

Myelofibrosis.

Myeloid leukaemia.

Lymphoma.

65. The following drugs are nephrotoxic **EXCEPT:**

Indomethacin.

Cyclosporin.

Gentamycin.

Diltiazem.

Amikacin.

66. The following are associated with increased risk of stroke **EXCEPT:**

Diabetes mellitus.

Hypertension.

Hyperlipidaemia.

Psoriasis.

Smoking

67. The following may be present in myasthenia gravis **EXCEPT:**

Thymoma.

Antibodies to acetylcholine receptor.

Sensory neuropathy.

Diplopia.

Respiratory failure.

68. In rheumatoid arthritis which one of the following is **true:**

women are affected more than men.

Cerebral involvement is usual.

A positive rheumatoid factor is diagnostic.

Steroids are the preferred treatment.

Symptoms are worse after exercise.

69. All of the following conditions are causes of chronic liver disease **EXCEPT**:

Autoimmune active hepatitis.
Hepatitis C infection.
Hepatitis B infection.
Hepatitis A infection.
Alcohol.

70. Which one of the following can cause polyuria:

Polydipsia.
Hypercalcaemia.
Hypokalaemia.
Diabetes mellitus.
All are true.

71. The most common skin manifestation in sarcoidosis is :

Erythema multiform.
Erythema marginatum.
Erythema chronicum-migrans.
Erythema nodosum.
Granuloma annulare.

72. The following are causes of hypoalbuminaemia **EXCEPT**:

Sepsis.
Acute left ventricular failure.
Nephrotic syndrome.
Liver cirrhosis.
Protein losing enteropathy.

73. Which one of the following conditions causes aphthous ulcers:

Behcet's disease.
Crohn's disease.
Coeliac disease.
Ulcerative colitis.
All are true.

74. The following are causes of bradycardia **EXCEPT**:

Pregnancy.

Hypothyroidism.

β blocker.

Complete heart block.

Hypothermia.

Ulcerative colitis is associated with each one of the following findings, except

. Inflammatory cell infiltrate in lamina propria a)

. b) Pseudopolyps

.c) Non-caseating granulomas

.d) Depletion of goblet cells

. e) Inflammation confined to mucosa and submucosa

Crohn's disease is associated with each one of the following, except:

A. Fistulae

B. string sign in barium follow through

C. 'Cobblestone' pattern of mucosa

D. Crypt abscesses

E. Involvement of all layers of bowel wall

Concerning Crohns disease which one is not correct :

A associated with smoking

B recognized association with erythema marginatum >> nodosum

C anal fistulae are seen

D may present as colitis

E there is an increased incidence of bowel carcinoma

35 year old man has ulcerative colitis. Which condition is most likely to be associated?

A Gallstones

B Sclerosing cholangitis

C Erythema nodosum

D Renal calculi

E Vitamin B12 deficiency

Measures to stop a variceal upper GIT bleeding, all are true except

- A banding
- B sclerotherapy
- C esophageal transection
- D ballon tamponade
- E Octreotide infusion

Precipitating factors for hepatic encephalopathy in a patient with cirrhosis, all are true except

- A infection
- B aggressive diuresis
- C constipation
- D treament with oral neomycin
- E excesss dietary proteins

Causes of chronic liver disease and cirrhosis, all are true except

- A alpha 1 anti-trypsin deficiency
- B Hepatitis C
- C hemochromatosis
- D autoimmune hepatitis
- E EBV

Spontaneous bacterial peritonitis in the context of cirrhosis, all are true except

- A Up to one third of cases the abdominal signs are mild or absent
- B Almost always a mono-microbial infection state
- C Recurrence is common but unfortunately there is no way to prevent it
- D The commonest organisms are enteric gram negatives, but no source of infection is usually present
- E Ascitic fluid is cloudy with more than 250 neutrophils / mm³

Which of the following conditions is least associated with Helicobacter pylori?

- A. Gastric carcinoma
- B. B cell lymphoma of MALT tissue
- C. Gastro-esophageal reflux disease
- D. Atrophic gastritis
- E. Peptic ulcer disease

The folowing can cause peptic ulcer diseaes except :

- A Zollinger- ellison syndrome
 - B H pylori
 - C NSAIDS
 - D ulcerative colitis
 - E Systemic mastocytosis
-

Which one of the following test is better for proving the eradication of H pylori after therapy

- A H Pylori Ig M
 - B Urease test
 - C Urea breath test**
 - D S. gastrin level
 - E Gastroscopy
-

Which of the following is not risk factor for PUD in patient taking NSAIDS

- A) Age less than 40 yr**
 - B) Prior history of peptic ulcer disease or gastrointestinal hemorrhage
 - C) Concurrent use of NSAIDs and corticosteroids
 - D) Concurrent use of NSAIDs and anticoagulants
 - E) High dosage of NSAIDs or use of more than one
-

The following test is indicative of acute hepatitis A:

- A Raised ALT
 - B Positive HAV Ig G Antibody
 - C Positive HAV Ig M Antibody**
 - D Hepatomegaly on US
 - E Scleral jaundice
-

Unconjugated hyperbilirubinaemia is typical of

- A Dubin-Johnson syndrome
 - B hereditary spherocytosis
 - C Rotor's syndrome
 - D Gilbert's disease**
 - E biliary atresia
-

The following is true regarding bilirubin metabolism except:

- A 80% of bilirubin is produced from heme in the reticuloendothelial system
 - B 300 mg of bilirubin is produced daily
 - C The unconjugated bilirubin is soluble in water and is readily excreted into the bile**
 - D The intestinal bacteria reduce bilirubin to urobilinogen
-

Autoimmune hepatitis type 1 is most strongly associated with which one of the following antibodies?

- A. Anti-smooth muscle antibody**
 - B. Anti-ribonuclear protein antibody
 - C. Anti-liver/kidney microsomal type 1 antibody
 - D. Rheumatoid factor
 - E. Anti-microsomal antibody
-

Which one of the following is not associated with villous atrophy on jejunal biopsy?

- A Tropical sprue
 - B Celiac disease
 - C Hypogammaglobulinaemia
 - D Familial Mediterranean Fever**
 - E Whipple's disease
-

Which one of the following is the most likely presentation of *Staphylococcus aureus* food poisoning?

- A Tenesmus
 - B Watery diarrhea
 - C Dysentery
 - D Severe vomiting**
 - E Presentation 24-48 hours after eating affected food
-

Which of the following symptoms is least associated with irritable bowel syndrome?

- A Weight loss**
 - B Abdominal pain
 - C Depression
 - D Nausea
 - E Alternation in bowel habits
-

Each one of the following may have a role in the treatment of irritable bowel syndrome, except

- A Tricyclic antidepressant
 - B High fiber diet
 - C Mebeverine
 - D Laxative
 - E Ferrous sulfate**
-

Horner's syndrome can be seen in the following except :

- a. Carotid aneurysm.
- b. Lateral medullary syndrome.
- c. Following surgical treatment of Reynaud's disease.
- d. Multiple sclerosis.
- e. Cauda equina lesions**

Hemorrhagic stroke can be caused by all of the following except

- a. Choriocarcinoma brain secondaries.
- b. Amphetamine abuse.
- c. Cranial Meningioma.**
- d. Following secondary prophylaxis of cardio embolic stroke.

e. severe hypertension

Causes of small pupil:

- a. Morphine abuse.
- b. Organophosphorus poisoning.
- c. Pontine hemorrhage.
- d. Neurosyphilis
- e. all of the above

Carpal Tunnel syndrome:

- a. is caused by vitamin B12 deficiency.
- b. Remits during pregnancy.
- c. doesn't respond to local steroid injections.
- d. Thenar atrophy is an early sign.
- e. With autonomic involvement is seen in hereditary amyloidosis

Rheumatoid arthritis:

- a. Carpal tunnel syndrome can be a presenting feature.
- b. A mononeuritis multiplex is NOT a feature.
- c. Atlanto-axial subluxation is a common benign complication.
- d. Peripheral polyneuropathy is predominantly motor.
- e. Cauda equine syndrome is a late feature.

Polymyositis:

- a. Is paraneoplastic in the majority of cases.
- b. Ocular involvement is common.
- c. Muscle tenderness is seen in 95% of cases.
- d. Pulmonary fibrosis is uncommon.
- e. Anti-Jo1 antibodies are seen in 85% of the cases

Pseudotumor cerebri can be caused by all of the following except :

- a. Rapid withdrawal of long-term steroid usage.
- b. Cerebral sinus venous thrombosis.
- c. Nalidixic acid usage.
- d. Vitamin A intoxication.
- e. Hypothyroidism

Which one of the following is least characteristic of Addison's disease?

- a- Hypoglycaemia
- b- Hyponatraemia
- c- metabolic alkalosis
- d- Hyperkalaemia
- e- Positive short ACTH test

the diagnosis of severe diabetic ketoacidosis is supported by all of the following except:

- a history of abdominal pain at onset
- a history of anorexia
- shallow respiration
- ketonuria
- a plasma bicarbonate level less than 10 mmol/l

short stature in a 16 yr may be the result of all except

- turner's syndrome
- childhood's crohn's disease
- hypochondroplasia
- childhood thyrotoxicosis
- celiac disease

inhibitors of hepatic gluconeogenesis include all of the following except

- glucocorticoids
- adrenaline
- metformin
- glucagons
- starvation

insulin induced hypoglycemia may present with any one of the following except:

- hemiplegia
- night sweat
- foot drop
- headache
- aggressive behavior

In autoimmune Addison's disease the following is not true

- the serum potassium concentration is characteristically low
- there is an association with pernicious anemia
- weight loss is a recognized feature
- there is an increased incidence of premature ovarian failure
- skin pigmentation is an associated feature

1). A 23-year-old woman experienced watery diarrhea, nausea, vomiting, and abdominal cramps 6 hours after eating a salad and a hamburger in a local restaurant. The most likely organism causing her disease is

- a) *Vibrio vulnificus*
- b) *Listeria monocytogenes*
- c) *Yersinia enterocolitica*
- d) *Clostridium welchii*
- e) *Staphylococcus aureus***

2). A 35-year-old man presents with diarrhea for 10 days, characterized by frequent, low-volume stools with the presence of mucus. He also complained of subjective fever and lower abdominal pain. The presence of leukocytes in stool is consistent with which organism?

- a) *Clostridium perfringens*
- b) *S. aureus*
- c) *Giardia lamblia*
- d) *Enterobius vermicularis*
- e) *Entamoeba histolytica***

3) Which statement about esophageal cancer is true?

- a) Dysphagia is an early manifestation.
- b) The most common type of esophageal cancer in the United States is adenocarcinoma.
- c) Esophageal cancer is most commonly located in the proximal third of the esophagus.
- d) Most esophageal cancers are not resectable at presentation.**
- e) Barrett's syndrome is associated with squamous carcinoma.

4) A 42-year-old man presents with intermittent dysphagia to solids and liquids and regurgitation of food. He has lost 4 pounds in 2 months. His physical exam is normal. A barium swallow reveals a dilated esophageal body, with the distal esophagus terminating in a narrow end. Which one of the following options is the most appropriate long-term therapy?

- a) Isosorbide dinitrate
- b) Metoclopramide
- c) Dilation with balloon**
- d) Nifedipine
- e) Dilation with rubber tube (bougie)

5) A 45-year-old male executive comes to your office complaining of epigastric pain for 2 months. His primary physician prescribed him H2-blockers 3 weeks ago,

which have produced only partial relief of his symptoms. His weight is stable. His physical exam is normal. An upper endoscopy reveals a 1-cm duodenal ulcer. Which of the following risk factors is not associated with the development of ulcer disease?

- a) Daily use of nonsteroidal anti-inflammatory drugs (NSAIDs)
- b) Gastric infection with *H. pylori*
- c) Emotional stress**
- d) Cigarette smoking
- e) Gastrin-secreting tumors

6) Which of the following features best distinguishes Crohn's disease from ulcerative colitis?

- a) Oral ulcers
- b) Rectal bleeding
- c) Continuous colonic involvement on endoscopy
- d) Noncaseating granulomas**
- e) Crypt abscesses

7) All of the following thyroid conditions are amenable to RAI treatment, except

- a) Papillary cancer
- b) Follicular cancer
- c) Graves' disease
- d) Thyroid lymphoma**
- e) Multinodular goiter

8) All of the following conditions involve the distal interphalangeal (DIP) joint, except

- a) Multicentric reticulohistiocytosis
- b) Erosive osteoarthritis
- c) Psoriasis with nail changes
- d) Juvenile chronic arthritis
- e) Rheumatoid arthritis**

9) Rheumatoid factor may be present in each of these conditions, except

a) Adult Still's disease

- b) Subacute bacterial endocarditis
- c) Vasculitis syndromes
- d) Sarcoidosis
- e) Sjögren's syndrome

10) Ophthalmologic manifestations of rheumatoid arthritis may include all of the following, except

- a) Secondary Sjögren's syndrome with sicca complex
- b) Scleritis
- c) Episcleritis
- d) Corneal melts
- e) Ischemic optic atrophy**

11) All of the following are characteristic patterns of joint involvement in rheumatoid arthritis, except

- a) Polyarticular involvement
- b) Oligoarticular involvement**
- c) Symmetrical involvement
- d) Involvement of the proximal interphalangeal (PIP), metacarpophalangeal (MCP) wrist, and metatarsophalangeal (MTP) joints
- e) Frequent cervical spine involvement

12) Extra-articular manifestations of rheumatoid arthritis that may be associated with severe morbidity or mortality include

- a) Rheumatoid vasculitis
- b) Pericarditis
- c) Cachexia
- d) Rheumatoid nodule within the aortic valve
- e) All of the above**

13) Each of the following is characteristic of polymyalgia rheumatica, except

- a) Mild joint inflammation
- b) Stiffness of the shoulder and hip girdles
- c) Weakness of the shoulder and hip girdles**

- d) Elevated erythrocyte sedimentation rate
- e) Normochromic normocytic anemia

14) 72-year-old female presents with a history of severe left temporal headache. She gives a history of feeling generally unwell and also complaints of problems with eating. You arrange investigation of this patient

Which one of the following drugs would you use in this patient whilst awaiting confirmation of the diagnosis? >> Temporal arthritis

- a) Steroids >> to prevent blindness
- b) Antiviral
- c) Anticonvulsants
- d) Sumatriptan

15) In massive pulmonary embolism which of the following may occur?

- a) Elevated troponin levels
- b) Hypercarbia
- c) Normal D-dimers
- d) Acidosis pH <7.1
- e) Low plasma lactate levels

15) Which of the following is likely to be the cause of hypomagnesaemia?

- a) Hypothyroidism
- b) Chronic renal failure
- c) Diuretic therapy
- d) Antacid therapy
- e) Elevated phosphate levels

16. Which one of the following is not part of the American College of Rheumatology criteria for diagnosing rheumatoid arthritis?

- A. Raised ESR or CRP
- B. Morning stiffness > 1 hr
- C. Subcutaneous nodules
- D. Symmetrical arthritis
- E. Rheumatoid factor positive

17. Which one of the following skin disorders is least associated with hypothyroidism?

- A. Xanthomata
- B. Pruritus
- C. Pretibial myxoedema
- D. Eczema
- E. Dry, coarse hair

18. Which one of the following conditions is most associated with aortic dissection?

- A. Acromegaly
- B. Actinomycosis
- C. Sarcoidosis
- D. Bicuspid aortic valve**
- E. Adult polycystic kidney disease

19. A 54-year-old man is admitted to the Emergency Department with a 15 minute history of crushing central chest pain. Which one of the following rises first following a myocardial infarction?

- A. AST
- B. Troponin I >> the most sensitive & specific marker
- C. CK
- D. CK-MB
- E. Myoglobin >> the first marker**

20. Each one of the following may cause secondary hypertension, except:

- A. **Patent ductus arteriosus**
- B. Cushing's syndrome
- C. Liddle's syndrome
- D. 11-beta hydroxylase deficiency
- E. Primary hyperparathyroidism

21. Which of the following is most likely to show up on chest X-ray as a cavitating lesion?

- A. Squamous carcinoma ?? ممكن
- B. Large cell carcinoma
- C. Adenocarcinoma
- D. Alveolar cell carcinoma
- E. Small cell carcinoma

22. Microscopic haematuria would be an expected finding in the following except :

- A. urinary tract infection
 - B. renal papillary necrosis**
 - C. membranous glomerulonephritis
 - D. infective endocarditis
 - E. renal infarction
-

Multiple Choice Questions

Dr. Walid Daoud

Select the ONE best response to each question.

1. All of the following are signs of acute severe asthma EXCEPT:
silent chest.

high Pco_2 .

altered mental status.

diffuse wheezing.

respiratory rate more than 30 breath / min.

2. The normal range of Pco_2 in arterial blood is:

30-60 mmHg.

25-50 mmHg.

20-40 mmHg.

25-35 mmHg.

35-45 mmHg.

.

3. Bronchial breathing by auscultation of the chest is a sign of:
pneumothorax.

pneumonia.

pleural effusion.

emphysema.

lung tumor.

4. All of the following are general causes of dyspnea EXCEPT:
hyperthyroidism.

acidosis.

anemia.

uremia.

polycythemia.

5. The most diagnostic test for pulmonary tuberculosis is:

upper lobe cavity in chest x-ray.

positive Tuberculin test.

positive sputum for acid-fast bacilli by Zeihl-Neelsen stain.

blood lymphocytosis.

high erythrocyte sedimentation rate (ESR).

6. The antihypertensive drug of choice in asthmatic patients is:

atenolol.
captopril.
nefidepine.
alpha-methyl dopa.
furosemide.

7. The best treatment of tension pneumothorax is:
oxygen therapy.
intubation and mechanical ventilation.
chest physiotherapy.
chest tube with under water seal.
aspiration of pleural air.

8. The clinical sign by percussion in pleural effusion is:
normal resonance
hyperresonance.
impaired note.
dullness.
stony dullness.

9-All of the following are complications of systemic hypertension EXCEPT:
subdural hemorrhage.
dissecting aneurysm of ascending aorta.
renal artery stenosis.
lacunar strokes in the internal capsule.
dilated retinal arterioles.

10-All of the following are features of acute myocardial infarction EXCEPT:
(a)nausea and vomiting.
(b)breathlessness.
©hypotension and peripheral cyanosis.
(d)sinus tachycardia or sinus bradycardia.
(e)elevated serum gamma-glutamyl transferase.

11-All of the following cause edema of both lower limbs EXCEPT:
(a)acute left ventricular failure.
(b)cor pulmonale.
©congestive heart failure.
(d)liver cirrhosis.
(e)hypoalbuminemia.

12-Which of the following valve lesion may cause syncope:

(a)aortic stenosis.

(b)aortic incompetence.

© tricuspid incompetence.

(d)pulmonary stenosis.

(e)mitral stenosis.

13-All of the following are signs of pulmonary hypertension EXCEPT:

(a)pulsations in the second left intercostals space.

(b)dullness in the second left intercostals space.

© palpable second heart sound.

(d)accentuated pulmonary component of the second heart sound.

(e)bulging of the second left space.

14-All of the following cause wide pulse pressure EXCEPT:

(a)pregnancy .

(b)aortic incompetence.

©atreriovenous fistula.

(d)polycythemia.

(e)anemia.

15-The commonest cause of constrictive pericarditis is:

(a)rheumatic fever.

(b)tuberculosis.

©viral.

(d)fungal.

(e)parasitic.

16-Which of the following antihypertensive drugs may cause gynecomastia:

(a)captopril.

(b)nefidepine.

© methyl dopa.

(d)atenolol.

(e)deltiazem.

17-The clinical features of acute myocardial infarction include:

(a)nausea and vomiting.

(b)hypotension.

© peripheral cyanosis

(d)breathlessness.

(e)all of the above.

18-Fever and bradycardia occurs in one of the following:

typhoid fever.

streptococcal tonsillitis.
staphylococcal pneumonia.
gram negative septicemia.
pneumococcal meningitis.

19-Which of the following drugs is used in treatment of amoebic hepatitis:

(a)metronidazole.

(b)emetine HCl.

©doxycycline.

(d)chloramphenicol.

(e)penicillin.

20-All of the following precipitate hepatic encephalopathy in cirrhosis EXCEPT:

(a)infection.

(b)hypokalemia.

©abdominal surgery.

(d)gastrointestinal bleeding.

(e)lactulose therapy.

21-Pyogenic liver abscess is a recognized complication of:

(a) ascending cholangitis.

(b) pancreatitis.

(c) septicemia.

(d) subphrenic abscess.

(e) all of the above.

22-The proton pump inhibitor used in treatment of peptic ulcer is:

ranitidine.

cimetidine.

famotidine.

omeprazole.

all of the above.

23-Risk factors for osteoarthritis include all of the following EXCEPT:

increasing age.

family history

male sex

obesity

trauma

24-Ankylosing spondylitis is associated with all of the following EXCEPT:

- (a) peripheral neuritis
- (b) abnormalities in cardiac conduction >> aortic regurge
- © uveitis
- (d) lung fibrosis
- (e) hepatomegaly

25-Behcet's syndrome is manifested by all of the following EXCEPT:

- (a) recurrent oral and genital ulcers
- (b) iritis and uveitis
- © thrombophlebitis
- (d) arthritis
- (e) gall bladder stones

26-Xerophthalmia is a manifestation of one of the following:

- (a) osteoarthritis.
- (b) systemic lupus erythematosus
- © Sjogren's syndrome
- (d) ankylosing spondylitis
- (e) dermatomyositis.

27-The segmental innervation of knee tendon reflex is:

- cervical 5-6
- cervical 6-7
- lumbar 3-4
- sacral 1-2
- thoracic 8-9

28-All of the following are features of trigeminal neuralgia EXCEPT:

- (a) occurs in elderly patients
- (b) corneal reflex is not lost
- © pain is precipitated by touching the face and/or chewing
- (d) pain lasting several hours at a time
- (e) response to anticonvulsants

29-All of the following are typical features of migraine EXCEPT:

- (a) family history of migraine
- (b) onset after the age of puberty
- © headache is always unilateral and throbbing
- (d) hemiparesis at onset
- (e) visual scintillations and scotomas

30-Recognised causes of a generalized polyneuropathy include:

- (a)rheumatoid arthritis
- (b)diabetes mellitus
- ©vitamin B₁₂ deficiency and folate deficiency
- (d)amiodarone therapy
- (e)all of the above

31-All of the following are true in the treatment of paraplegia EXCEPT:

- (a)prophylactic antibiotics are indicated to prevent urinary sepsis
- (b)immobility predisposes to bed sores formation
- ©urinary retention requires long-term catheterization
- (d)flexor spasm and contractures are avoidable by good posturing and passive movement
- (e)constipation may require manual evacuation

32-Typical presentation of diabetes mellitus include:

- weight loss and nocturia
- balanitis or bruritis vulvae
- epigastric pain and vomiting
- limb pain with absent ankle reflexes
- all of the above

33-Typical symptoms of hypoglycemia in diabetic patient include:

- (a)feeling of faintness and hunger
- (b)tremors, palpitation and dizziness
- ©headache and confusion
- (d)nocturnal sweating, nightmares and convulsions
- (e)all of the above

34-The clinical features of diabetic retinopathy include:

- (a)venous dilatation and increased venous varicosity
- (b)soft and hard exudates
- ©dot and blot retinal hemorrhages
- (d)microaneurysms
- (e)all of the above

35-Recognized association of obesity include:

- (a)hyperuricemia
- (b)gall stones
- ©type 2 diabetes mellitus
- (d)hyperlipidemia
- (e)all of the above

36-The clinical features of thyrotoxicosis include:

- (a)atrial fibrillation with collapsing pulse
- (b)weight loss and oligomenorrhea
- ©proximal myopathy
- (d)exophthalmos
- (e)all of the above

37-The typical clinical features of Cushing's syndrome include:

- (a) generalized osteoporosis
- (b) systemic hypertension
- (c) hirsutism and amenorrhea
- (d) proximal myopathy
- (e) all of the above

38-All of the following are adverse effects of corticosteroid therapy EXCEPT:

- hypertension
- avascular bone necrosis
- pseudogout**
- insomnia
- peptic ulcer

39-All of the following are expected clinical finding in acromegaly EXCEPT:

- (a)arthropathy and myopathy
- (b)hypertension and impaired glucose tolerance
- (c) hepatomegaly and cardiomegaly
- (d)increased sweating and headache
- (e)skin atrophy and decreased sebum secretion

40-All of the following cause microscopic hematuria EXCEPT:

- urinary tract infection
- renal papillary necrosis
- membranous glomerulonephritis
- infective endocarditis
- renal infarction

41-All of the following causes polyuria EXCEPT:

- (a)chronic hyperglycemia
- (b)lithium toxicity**
- ©adrenocorticotrophic hormone (ACTH) deficiency
- (d)Addison's disease
- (e)Hypercalcemia

42-All of the following are biochemical features of chronic renal failure EXCEPT:

- (a)impaired urinary concentrating ability
- (b)hyperphosphatemia
- ©hypocalcemia
- (d)metabolic acidosis
- (e)severe proteinuria more than 3.5 g / day>>mild

43-All of the following are complications of chronic renal failure EXCEPT:

- (a)normocytic or microcytic anemia
- (b)peripheral neuropathy
- ©bone pain
- (d)pericarditis
- (e)metabolic alkalosis

44-The functional unit of the kidney is called:

- (a)glomerulus
- (b)renal tubules
- ©nephron
- (d)convoluted tubules
- (e)loop of Henle

45-All of the following cause blood lymphocytosis EXCEPT:

- brucellosis
- pneumococcal pneumonia
- measles and rubella
- non-Hodgkin lymphoma
- chronic lymphatic leukemia

46-Causes of pancytopenia include:

- (a)systemic lupus erythematosus
- (b)indomethacin and sulphonamide therapy
- ©hepatitis A infection
- (d)megaloblastic anemia
- (e)all of the above

47-In patients with sickle cell disease, acute painful crises are precipitated by:

- high altitude
- pregnancy
- dehydration
- systemic infection
- all of the above

48-Characteristic features of acute leukemia include:

rapid onset of fever and anemia
mouth ulceration and gingival hypertrophy
myalgia arthralgia and skin rashes
normocytic or macrocytic anemia, with primitive white cells
all of the above

49-General manifestations of anemia include;
bradycardia
small pulse pressure
dyspnea on effort
high grade fever
clubbing of fingers

50-Thrombocytopenia is caused by one of the following drugs:
coumadin
heparin
aspirin
penicillin
cephalexin

51-The hazards of blood transfusion include:
urticaria
congestive cardiac failure
fever
acute intravascular hemolysis
all of the above

52-Causes of leg ulcers include:
diabetes mellitus
leprosy
sickle-cell disease
syphilis
all of the above

53-The following suggest that a pigmented skin lesion is a malignant melanoma:
asymmetry
irregular border and elevation
irregular colour
diameter more than 0.5 cm
all of the above

54-Recognized causes of erythema multiforme include:

herpes simplex infection
mycoplasma pneumonia
pregnancy
systemic lupus erythematosus
all of the above

MCQ – Internal Medicine

Dr. Walid Daoud

Select ONE best response to each question:

1. Pneumatocele on the chest x-ray is typically seen with:

- (a) staphylococcal pneumonia.
- (b) Klebsiella pneumonia.
- (c) lung abscess.
- (d) pulmonary tuberculosis.
- (e) sarcoidosis.

2. All the following may produce chest pain EXCEPT:

- (a) pleurisy.
- (b) acute osteomyelitis of ribs.
- (c) acute bronchial asthma..
- (d) pulmonary infarction.
- (e) pneumothorax.

3. All the following suggest acute severe asthma EXCEPT:

- (a) PCO₂ in arterial blood is 38 mmHg. ??
- (b) central cyanosis.
- (c) pulse rate 140 per minute.
- (d) peak expiratory flow rate is 60 % of predicted value.
- (e) respiratory rate is more than 30 per minutes.

4. Bronchiectasis may be described in:

- (a) Kartagener's syndrome.
- (b) cystic fibrosis.
- (c) ciliary dyskinesia.
- (d) sequestered lobe.
- (e) all of the above.

5. Lung collapse is produced by:

- (a) foreign body aspiration.
- (b) pleural effusion.
- (c) pneumothorax.
- (d) bronchial adenoma.
- (e) all of the above.

6. All the following cause clubbing of fingers EXCEPT:

- (a) biliary cirrhosis.
- (b) bronchiectasis.
- (c) intestinal polyposis.
- (d) heart failure.
- (e) infective endocarditis.

7. The treatment of choice in treatment of tension pneumothorax is:

- (a) oxygen.
- (b) needling of the chest.
- (c) chest physiotherapy.
- (d) mechanical ventilation.
- (e) chest tube with under water seal.

8. Massive hemoptysis is defined by blood loss of:

- (a) 100 ml / hour..
- (b) 150 ml / hour.
- (c) 500 ml / hour.
- (d) 600 ml / hour.
- (e) 400 ml / hour.

9. All the following are characteristic features of intrinsic bronchial asthma EXCEPT:

- (a) negative family history.
- (b) normal serum IgE level.
- (c) It occurs in adults.
- (d) purulent or mucopurulent sputum.
- (e) the patient is free between attacks.

10. All the following are characteristic physical signs of lung collapse EXCEPT:

- (a) reduced breath sounds on the affected side.
- (b) shift of the mediastinum to the same side.
- (c) impaired chest movement on the affected side.
- (d) retraction of intercostal spaces of the affected side.
- (e) increased tactile vocal fremitus (TVF).

11.early diastolic soft blowing murmur is a characteristic feature of:

- (a) aortic stenosis.
- (b) aortic incompetence.
- (c) mitral incompetemce.
- (d) ventricular septal defect.
- (e) mitral stenosis.

12.Notched P-waves on the electrocardiogram denotes:

- (a) myocardial ischemia.
- (b) acute myocardial infarction.
- (c) mitral stenosis.
- (d) bundle branch block.
- (e) hyperkalemia.

13.Systolic hypertension is caused by all the following EXCEPT:

- (a) renal artery stenosis.
- (b) aortic incompetence.
- (c) patent ductus arteriosus
- (d) arteriovenous fistula.
- (e) anemia.

14. The drug contraindicated for treatment of hypertension in asthmatic patient is:

- (a) nifedipine.
- (b) atenolol.
- (c) captopril.
- (d) furesimide.
- (e) amiodarone.

15.Non-cardiogenic pulmonary edema is caused by:

- (a) viral pneumonia.
- (b) salicylate poisoning.
- (c) oxygen toxicity.
- (d) head injury.
- (e) all of the above.

16.The antidote used for treatment Coumadin overdose is:

- (a) vitamin K.
- (b) acetyl salicylic acid.
- (c) aminocaproic acid.
- (d) protamine sulphate.
- (e) viamin B₁₂.

17.The earliest serum enzyme elevated in acute myocardial infarction is:

- (a) creatine phosphokinase (CPK).
- (b) isoenzyme troponin.
- (c) lactic acid dehydrogenase (LDH).
- (d) aspartate transferase (AST).
- (e) catalase.

18.Splinter hemorrhage is a characteristic feature in patients with:

- (a) pericarditis.
- (b) infective endocarditis.
- (c) aortic incompetence.
- (d) aortic stenosis.
- (e) pulmonary incompetence.

19.Diastolic shock is a sign of:

- (a) left ventricular failure.
- (b) pulmonary stenosis
- (c) pulmonary hypertension
- (d) severe hypotension.
- (e) all of the above.

20.Diarrhea in diabetes mellitus:

- (a) is severe and explosive.
- (b) contains gross blood in the stool.
- (c) associated with abnormal radiological small intestinal pattern.
- (d) treatment of choice is anticholinergic drug.
- (e) it is usually progressive in severity.

21.Hyperacidity is common in people with:

- (a) blood group AB.
- (b) blood group B.
- (c) blood group A.
- (d) age above 65 years.
- (e) all of the above.

22.All the following about bile salts are true EXCEPT:

- (a) produce bradycardia.
- (b) produce pruritis.
- (c) help emulsification of fat.
- (d) activate lipase enzyme.
- (e) increase absorption of water.

23.Liver cirrhosis may produce:

- (a) reduction in plasma albumin.
- (b) prolongation of prothrombin time..
- (c) ascites.
- (d) decreased synthesis of coagulation factors II, VII, IX and X.
- (e) all of the above.

24. All the following are recognized causes of malabsorption EXCEPT:

- (a) systemic sclerosis.
- (b) ileal lymphoma.
- (c) atherosclerosis of superior mesenteric artery.
- (d) amoebiasis.
- (e) jejunal diverticulitis.

25. Chronic active hepatitis is described with:

- (a) ulcerative colitis.
- (b) alpha-methyl dopa therapy.
- (c) Wilson's disease.
- (d) alpha-antitrypsin deficiency.
- (e) all of the above.

26. All the following cause massive splenomegaly EXCEPT:

- (a) Kala-azar.
- (b) bilharziasis.
- (c) infectious mononucleosis.
- (d) myelofibrosis.
- (e) chronic myeloid leukemia.

27. The condition predisposes to carcinoma of the colon is:

- (a) ulcerative colitis.
- (b) chronic giardiasis.
- (c) regional ileitis (crohn's disease).
- (d) Hirschsprung's disease.
- (e) chronic intestinal amebiasis.

28. Secretion of what of the following hormones does not increase at night :

- (a) growth hormone.
- (b) ACTH.
- (c) melatonin.
- (d) insulin.
- (e) prolactin.

29. Hypokalemia is caused by:

- (a) steroid therapy.
- (b) prolonged diarrhea and vomiting.
- (c) long-term diuretic therapy.
- (d) Cushing's syndrome.
- (e) all of the above.

30. Ciprofloxacin is used for treatment of:

- (a) typhoid fever.
- (b) viral infection.
- (c) mycoplasma pneumonia.
- (d) calcular cholecystitis.
- (e) all of the above.

31. Hyperglycemia is induced by all the following hormones EXCEPT:

- (a) epinephrine.
- (b) thyroxine.
- (c) adrenocorticotrophic hormone (ACTH).
- (d) glucagon.
- (e) aldosterone.

32. Which of the following is not involved in regulation of plasma calcium level:

- (a) kidneys.
- (b) skin.
- (c) liver.
- (d) lungs.
- (e) intestine.

33. Hypothyroidism is characterized by all the following EXCEPT:

- (a) hoarseness of voice.
- (b) obesity.
- (c) constipation.
- (d) tachycardia.
- (e) obstructive sleep apnea.

34. All the following are characteristic of hypopituitarism EXCEPT:

- (a) cachexia.
- (b) infertility.
- (c) pallor.
- (d) low basal metabolic rate.
- (e) intolerance to stress.

35. The actions of insulin include:

- (a) converting glycogen to glucose.
- (b) stimulating gluconeogenesis.
- (c) increasing plasma amino acid concentration.
- (d) enhancing potassium entry into cells.
- (e) reducing urine formation.

36. Hypercholesterolemia may result from:

- (a) primary biliary cirrhosis.
- (b) nephrotic syndrome.
- (c) hypothyroidism.
- (d) obstructive jaundice.
- (e) all of the above.

37. Which of the following has the highest pH:

- (a) gastric juice.
- (b) bile in the gall bladder.
- (c) pancreatic juice.
- (d) saliva.
- (e) secretions of intestinal glands.

38. Side effects of corticosteroid therapy include:

- (a) diabetes insipidus.
- (b) increased leukocytes migration.
- (c) avascular necrosis of bones.
- (d) hypercalcemia.
- (e) increased vascular permeability.

39. Nephrotoxicity is described with:

- (a) gentamycin.
- (b) polymixin B.
- (c) acetazolamide.
- (d) rifampicin.
- (e) all of the above.

40. Specific indication for dialysis include:

- (a) serum potassium of 7.4 mEq/litre.
- (b) blood pH of 7.15.
- (c) blood urea of 378 mg/100ml.
- (d) presence of pericarditis.
- (e) all of the above.

41. Nephrotic syndrome is characterized by:

- (a) hypertension.
- (b) hypercholesterolemia.
- (c) hypoalbuminemia.
- (d) albuminuria.
- (e) all of the above.

42. Urinary calcium loss is increased in:

- (a) osteoporosis.
- (b) osteomalacia.
- (c) hypothyroidism.
- (d) secondary hyperparathyroidism.
- (e) sarcoidosis.

43. Erythropoietin:

- (a) contains zinc.
- (b) contains iron.
- (c) stimulates renin secretion.
- (d) acts on some stem cells in the bone marrow.
- (e) none of the above.

44. Acute metabolic acidosis is characterized by all the following EXCEPT

- (a) low arterial blood pH.
- (b) low blood bicarbonate.
- (c) base excess more than -2.
- (d) normal P_{CO_2} .
- (e) low blood sodium

45. Palmer erythema and spider naevi are characteristic of :

- (a) renal failure.
- (b) liver failure.
- (c) septicemia.
- (d) myocardial infarction.
- (e) all of the above.

46. Headache is caused by all the following EXCEPT:

- (a) constipation
- (b) sinusitis
- (c) hypertension.
- (d) gastritis.
- (e) brain tumor.

47. Parkinsonism is characterized by all the following EXCEPT:

- (a) sialorrhea.
- (b) lesion in basal ganglia.
- (c) hyperkinesia.
- (d) tremors.
- (e) head nodding.

48.The drug of choice in treatment of streptococcal septicemia is:

- (a) ceforuxime.
- (b) penicillin.
- (c) doxycycline.
- (d) erythromycin.
- (e) clxacillin.

49.Ankylosing spondylitis is characterized by;

- (a) aortic incompetence.
- (b) sterile prostatitis.
- (c) Bamboo-shape of the spine in x-ray.
- (d) fibrocystic lesion of lungs apices.
- (e) all of the above.

50.Behcet,s disease is characterized by all the following EXCEPT:

- (a) polyarthritis of large joints.
- (b) relapsing iritis.
- (c) hepatosplenomegaly.
- (d) thrombophlebitis.
- (e) painful orogenital ulcers.

51.Severe irradiation produces all the following EXCEPT:

- (a) increase incidence of leukemia.
- (b) thrombocytopenia.
- (c) increase incidence of visceral malignancy.
- (d) leukemoid reaction in some patients.
- (e) hemolytic anemia.

52Microcytic hypochromic anemia is caused by:

- (a) Vitamin B12 deficiency.
- (b) vitamin C deficiency.
- (c) vitamin B1deficiency.
- (d) chronic blood loss.
- (e) vitamin B6 deficiency.

53.All the following are used in treatment of acute severe asthma EXCEPT:

- (a) salbutamol.
- (b) hydrocortisone IV.
- (c) oxygen.
- (d) inhaled steroid.**
- (e) aminophylline IV.

54. Specific skin lesion in sarcoidosis is:

- (a) erythema nodosum.
- (b) erythema multiform
- (c) lupus pernio.**
- (d) butterfly pigmentation.
- (e) all of the above.

55. Infectious mononucleosis is characterized by:

- (a) fever.
- (b) splenomegaly.
- (c) lymphadenopathy.
- (d) hepatomegaly.
- (e) all of the above.

56. Recognized causes of pruritis include all the following EXCEPT:

- (a) obstructive jaundice.
- (b) hypoparathyroidism.
- (c) polycythemia rubra vera.
- (d) pernicious anemia.**
- (e) Hodgkin's lymphoma.

57. Brucellosis is characterized by all the following EXCEPT:

- (a) splenomegaly is often tender.
- (b) sterile pyuria is a feature.
- (c) human to human transmission is uncommon.
- (d) calcification of the liver.
- (e) chloramphenicol should be given for 2-3 weeks.

58. Vitamin B1 deficiency causes:

- (a) megaloblastic anemia.
- (b) Beri beri.
- (c) muscle weakness.
- (d) hyperkeratosis.
- (e) all of the above.

59. Low fixed specific gravity of urine denotes:

- (a) nephritic syndrome.
- (b) urinary tract infection.
- (c) pyelonephritis.
- (d) renal failure.
- (e) all of the above.

60. Rosy spots on the abdomen are characteristic of:

- (a) thrombocytopenic purpura.
 - (b) fat embolism
 - (c) typhoid fever.
 - (d) infective endocarditis.
 - (e) intestinal amoebiasis
-

MCQ – Internal Medicine (Dr. Walid Daoud)

Select ONE best response to each question:

1. Cavitations on the chest x-ray are typically seen with all the following EXCEPT:

- (a) staphylococcal pneumonia.
- (b) Klebsiella pneumonia.
- (c) lung abscess.
- (d) pulmonary tuberculosis.
- (e) sarcoidosis.**

2. All the following may produce physical signs simulating pneumonia EXCEPT:

- (a) carcinoma of the bronchus.
- (b) acute pulmonary edema.
- (c) early stage of lung abscess.
- (d) pulmonary infarction.
- (e) pulmonary fibrosis

3. One of the following statements suggest that the asthmatic attack is severe:

- (a) PCO₂ in arterial blood is 40 mmHg.
- (b) peripheral cyanosis without central cyanosis.
- (c) pulse rate 100 per minute.
- (d) inspiratory stridor.
- (e) respiratory rate is more than 20 per minutes.

4. Bronchiectasis is described in:

(a) Kartagner's syndrome.

- (b) sarcoidosis.
- (c) bronchial asthma.
- (d) liver cirrhosis.
- (e) scleroderma.

5. Pulmonary fibrosis is produced by:

- (a) penicillin.
- (b) aspirin.
- (c) erythromycin.
- (d) prednisone.
- (e) bleomycin.

6. All the following cause clubbing of fingers EXCEPT:

- (a) biliary cirrhosis.
- (b) bronchiectasis.
- (c) intestinal polyposis.
- (d) heart failure.
- (e) infective endocarditis.

7. The drug of choice in treatment of Chlamydia pneumonia is:

- (a) penicillin.
- (b) doxycycline.
- (c) amoxicillin.
- (d) gentamycin.
- (e) ceforuxime.

8. The commonest cause of hemoptysis is:

- (a) lung cancer.
- (b) pulmonary tuberculosis.
- (c) mitral stenosis.
- (d) acute bronchitis.
- (e) bronchiectasis.

9. All the following are characteristic features of extrinsic bronchial asthma EXCEPT:

- (a) positive family history.
- (b) normal serum IgE level.
- (c) It occurs in childhood.
- (d) Sputum and blood eosinophilia.
- (e) the patient is free between attacks.

10. All the following are characteristic physical signs of a large pneumothorax EXCEPT:

- (a) reduced breath sounds on the affected side.
- (b) shift of the mediastinum to the opposite side.
- (c) impaired chest movement on the affected side.
- (d) dullness to percussion of the affected side.
- (e) reduced tactile vocal fremitus (TVF).

11. Mid-diastolic rumbling murmur is a characteristic feature of:

- (a) aortic stenosis.
- (b) aortic incompetence.
- (c) mitral incompetence.
- (d) ventricular septal defect.
- (e) mitral stenosis.

12. Pathological Q-wave with raised S-T segment on the electrocardiogram denotes:

- (a) myocardial ischemia.
- (b) acute myocardial infarction.
- (c) acute left ventricular failure.
- (d) bundle branch block.
- (e) systemic hypertension.

13. All the following cause secondary hypertension EXCEPT:

- (a) renal artery stenosis.
- (b) Cushing's syndrome.
- (c) hypothyroidism.
- (d) congenital polycystic kidney.
- (e) Pheochromocytoma.

14. The drug of choice for treatment of hypertension in asthmatic patient is:

- (a) nifedipine.
- (b) atenolol.
- (c) captopril.
- (d) furesimide.
- (e) amiodarone.

15. All the following cause non-cardiogenic pulmonary edema EXCEPT:

- (a) paracetamol overdose.
- (b) salicylate poisoning.
- (c) oxygen toxicity.
- (d) head injury.
- (e) ketoacidosis.

16. The antidote used for treatment heparin overdose is:

- (a) vitamin K.
- (b) acetyl salicylic acid.
- (c) aminocaproic acid.
- (d) protamine sulphate.
- (e) vitamin B₁₂.

17. Painless myocardial infarction may occur in the following:

- (a) diabetic neuritis.
- (b) shocked or comatose patient.
- (c) during anaesthesia.
- (d) infarction in a transplanted heart.
- (e) all of the above.

18. Water-Hammer pulse is a characteristic feature in patients with:

- (a) pericarditis.
- (b) infective endocarditis.
- (c) aortic incompetence.
- (d) aortic stenosis.
- (e) pulmonary incompetence.

19. Silent mitral stenosis occurs in:

- (a) left ventricular failure.
- (b) severe pulmonary hypertension.
- (c) pulmonary embolism.
- (d) severe bradycardia.
- (e) all of the above.

20. Cardiac output is increased by:

- (a) sleep.
- (b) tachycardia more than 200 / min.
- (c) eating.
- (d) moderate change in environment.
- (e) sitting up from a lying position.

21. Etiological factors of peptic ulcers include EXCEPT:

- (a) smoking cigarettes.
- (b) biliary cirrhosis.
- (c) hyperparathyroidism.
- (d) Zollinger-Ellison syndrome.
- (e) colchicine therapy.

22. Recognized causes of hematemesis include:

- (a) salicylate ingestion.
- (b) oral iron tablets overdose.
- (c) severe burns.
- (d) esophageal varices.
- (e) all of the above.

23. Hepatic failure may produce EXCEPT:

- (a) positive alpha fetoprotein in the serum.
- (b) a characteristic flapping tremors.
- (c) high output cardiac failure.
- (d) hypoglycemia.
- (e) central cyanosis.

24. All the following are recognized causes of malabsorption EXCEPT:

- (a) systemic sclerosis.
- (b) ileal lymphoma.
- (c) atherosclerosis of superior mesenteric artery.
- (d) amoebiasis.
- (e) jejunal diverticulitis.

25. Chronic active hepatitis is described with:

- (a) ulcerative colitis.
- (b) alpha-methyl dopa therapy.
- (c) Wilson's disease.
- (d) alpha-1-antitrypsin deficiency.
- (e) all of the above.

26. All the following cause massive splenomegaly EXCEPT:

- (a) Kala-azar.
- (b) bilharziasis.
- (c) infectious mononucleosis.
- (d) myelofibrosis.
- (e) chronic myeloid leukemia.

27. The condition predisposes to carcinoma of the colon is:

- (a) ulcerative colitis.
- (b) chronic giardiasis.
- (c) regional ileitis (Crohn's disease).
- (d) Hirschsprung's disease.
- (e) chronic intestinal amebiasis.

28. Saliva has all the following constituents EXCEPT:

- (a) bicarbonate.
- (b) phosphate.
- (c) chloride.
- (d) glucose.
- (e) lysozyme.

29. Hypokalemia is caused by:

- (a) steroid therapy.
- (b) prolonged diarrhea and vomiting.
- (c) long-term diuretic therapy.
- (d) Cushing's syndrome.
- (e) all of the above.

30. Fever and bradycardia occurs in:

- (a) typhoid fever.
- (b) viral infection.
- (c) mycoplasma pneumonia.
- (d) calculi cholecystitis.
- (e) all of the above.

31. Hyperglycemia is induced by all the following hormones EXCEPT:

- (a) epinephrine.
- (b) thyroxine.
- (c) adrenocorticotrophic hormone (ACTH).
- (d) glucagon.
- (e) aldosterone.

32. A diabetic patient may present for the first time with:

- (a) peripheral vascular disease.
- (b) retinal detachment.
- (c) oculomotor nerve palsy.
- (d) severe pruritis.
- (e) all of the above.

33. Addison's disease may be associated with all the following EXCEPT:

- (a) Hashimoto's thyroiditis.
- (b) **hyperparathyroidism.**
- (c) increased pigmentation.
- (d) vittiligo.
- (e) adrenal calcification.

34.All the following are characteristic of hypothyroidism EXCEPT:

- (a) bradycardia.
- (b) decreased metabolic rate.
- (c) heat intolerance.
- (d) sleepiness.
- (e) weight gain.

35.The actions of insulin include:

- (a) converting glycogen to glucose.
- (b) stimulating gluconeogenesis.
- (c) increasing plasma amino acid concentration.
- (d) enhancing potassium entry into cells.
- (e) reducing urine formation.

36.Hypercholesterolemia may result from:

- (a) primary biliary cirrhosis.
- (b) nephrotic syndrome.
- (c) hypothyroidism.
- (d) obstructive jaundice.
- (e) all of the above.

37.Cushing's syndrome is strongly suggested by EXCEPT:

- (a) cataract.
- (b) moon face.
- (c) diabetes mellitus.
- (d) extreme weakness and muscle wasting.
- (e) ecchymoses in absence of thrombocytopenia.

38.Side effects of corticosteroid therapy include:

- (a) diabetes insipidus.
- (b) increased leukocytes migration.
- (c) avascular necrosis of bones.
- (d) hypercalcemia.
- (e) increased vascular permeability.

39.Nephrotoxicity is described with:

- (a) gentamycin.
- (b) polymixin B.
- (c) acetazolamide.
- (d) rifampicin.
- (e) all of the above.

40. Specific indication for dialysis include:

- (a) serum potassium of 7.4 mEq/litre.
- (b) blood pH of 7.15.
- (c) blood urea of 378 mg/100ml.
- (d) presence of pericarditis.
- (e) all of the above.

41. A large kidney is produced by EXCEPT:

- (a) post-obstructive uropathy.
- (b) polycystic renal disease.
- (c) chronic glomerulonephritis.
- (d) renal amyloidosis.
- (e) following contralateral nephrectomy.

42. Urinary calcium loss is increased in:

- (a) osteoporosis.
- (b) osteomalacia.
- (c) hypothyroidism.
- (d) secondary hyperparathyroidism.
- (e) sarcoidosis.

43. Nephrotic syndrome is produced by:

- (a) epanutin.
- (b) colchicines.
- (c) penicillamine.
- (d) erythromycin.
- (e) phenobarbitones.

44. Bilateral lower motor neurone 7th nerve lesion occurs in all the following EXCEPT:

- (a) Guillian-Barre syndrome.
- (b) sarcoidosis.
- (c) myasthenia gravis.
- (d) leprosy.
- (e) pseudobulbar palsy.

45. Dysphagia is caused by all the following EXCEPT:

- (a) left temporal lobe abscess.
- (b) Alzheimer's disease.
- (c) systemic sclerosis.
- (d) parkinsonism.
- (e) intracranial tumor.

46. Bell's palsy is caused by lesion in:

- (a) oculomotor nerve.
- (b) glossopharyngeal nerve.
- (c) facial nerve.
- (d) abducent nerve.
- (e) hypoglossal nerve.

47. Parkinsonism is characterized by all the following EXCEPT:

- (a) sialorrhea.
- (b) macrographia.
- (c) hypokinesia.
- (d) tremors.
- (e) head nodding.

48. The drug of choice in treatment of rheumatoid arthritis resistant to steroids is:

- (a) indomethacin.
- (b) gold therapy.
- (c) methotrexate. >> best initial DMARD
- (d) cyclosporine A.
- (e) salicylates.

49. Ankylosing spondylitis is characterized by:

- (a) aortic incompetence.
- (b) sterile prostatitis.
- (c) Bamboo-shape of the spine in x-ray.
- (d) fibrocystic lesion of lungs apices.
- (e) all of the above.

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- (a) polyarthritis of large joints.
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- (a) increase incidence of leukemia.
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- (a) Vitamin B12 deficiency.
- (b) vitamin C deficiency.
- (c) vitamin B1 deficiency.
- (d) chronic blood loss.
- (e) vitamin B6 deficiency.

53. Eosinophilia occurs with:

- (a) scarlet fever.
- (b) parasitic infestation.
- (c) Hodgkin's disease.
- (d) polyarteritis nodosa.
- (e) all of the above.

54. Erythema nodosum is well recognized with all the following EXCEPT:

- (a) Primary tuberculosis.
- (b) Crohn's disease.
- (c) post-streptococcal infection.
- (d) contraceptive pills.
- (e) meningococcal meningitis.

55. The characteristic clinical sign of scabies is:

- (a) red macules of the skin.
- (b) scratch mark.
- (c) skin nodules.
- (d) enlarged regional lymph nodes.
- (e) none of the above.

56. Recognized causes of pruritis include all the following EXCEPT:

- (a) obstructive jaundice.
- (b) hypoparathyroidism.
- (c) polycythemia rubra vera.
- (d) pernicious anemia.
- (e) Hodgkin's lymphoma.

57. Brucellosis is characterized by all the following EXCEPT:

- (a) splenomegaly is often tender.
- (b) sterile pyuria is a feature.
- (c) human to human transmission is uncommon.
- (d) calcification of the liver.
- (e) chloramphenicol should be given for 2-3 weeks.

58. Tingling parasthesiae are typically of all the following EXCEPT:

- (a) multiple sclerosis.
- (b) temporal lobe epilepsy.
- (c) Raynaud's phenomenon.
- (d) acromegaly.
- (e) hyperventilation.

59. Glucose starts to appear in urine when blood glucose exceeds:

- (a) 200 mg/dl.
- (b) 250 mg/dl.
- (c) 140 mg/dl.
- (d) 180 mg/dl.
- (e) 280 mg/dl.

60. Cyanosis starts to appear when the amount of reduced hemoglobin is:

- (a) more than 3 gram / 100 ml capillary blood.
 - (b) more than 4 gram / 100 ml capillary blood.
 - (c) more than 5 gram / 100 ml capillary blood.
 - (d) more than 6 gram / 100 ml capillary blood.
 - (e) more than 7 gram / 100 ml capillary blood.
-

1- A 26-year-old primigravida presents for her first prenatal visit 10 weeks after her last menstrual period. She has a history of hypothyroidism for which she has been taking levothyroxine (Synthroid), 0.075 mg daily. She has not had her blood drawn in several years. Physical examination is completely normal, with a 10-week size uterus.

Laboratory studies reveal the following: Total T4 9.0 mcg/dL (N 4.5-10.9)

T3 resin uptake 18% (N 25-45) , TSH 7.5 mcU/mL (N 0.5-5.0)

What is the correct management of her hypothyroidism?

a-Reduce the levothyroxine to 0.05 mg daily and repeat tests in 1 month

b-Increase the levothyroxine to 0.1 mg daily and repeat tests in 1 month

c-Continue the present dose and repeat tests each trimester

d-Discontinue the levothyroxine and repeat tests in 1 month

2-Appropriate advice for patients with acid reflux disease includes which one of the following?

a-Elevating the head of the bed should be used only as a last resort

b-An H2 blocker should be used for a maximum of 8 weeks

c-High-fat foods should be avoided, because they increase the severity of reflux

d-Antacids should be avoided, as they may cause rebound symptoms

3-Which one of the following statements is true concerning recommendations about health care for adolescents?

- a-For confidentiality reasons, parents should be excluded from the adolescent health care delivery process
- b-Routine screening of all adolescents for tuberculosis with a yearly skin test is recommended
- c-Immunization of unimmunized adolescents against hepatitis B is not recommended unless they are at high risk
- d-Sexually active female adolescents should have a Papanicolaou (Pap) test at 3-year intervals
- e-All sexually active adolescents should be screened for sexually transmitted diseases**

4-One day after your nurse performed CPR on an emergency-department patient, you are informed that the patient had meningococcal meningitis. Which one of the following is the most appropriate chemoprophylaxis for this condition?

- a-No prophylaxis is necessary
- b-Quadrivalent meningococcal vaccine
- c-Oral prednisone, 40 mg daily for 5 days
- d-Rifampin (Rifadin), 600 mg every 12 hours for 2 days**
- e-Penicillin G benzathine (Bicillin), 1.2 million units intramuscularly

5-Which one of the following statements regarding rheumatoid arthritis is true?

- a-Erythromycin can be used to treat the pericarditis seen with rheumatoid arthritis
- b-Amoxicillin has been shown to be of significant benefit in treating rheumatoid arthritis involving the large, weight-bearing joints
- c-Metronidazole (Flagyl) is useful for rheumatoid arthritis caused by anaerobic organisms
- d-Oral minocycline (Minocin) has been shown to have some benefit in treating mild to moderate cases**

6-A 55-year-old hospitalized white male with a history of rheumatic aortic and mitral valve disease complains of fever, back pain, and myalgias for the past 3 days. On initial examination, no definite focus of infection is found. The WBC count is 24,000/mm³ with 40% polymorphonuclear leukocytes and 40% band forms. The following day, two blood cultures are growing gram-positive cocci in clusters. Until specific organism sensitivity is known, the most appropriate antibiotic treatment at this time would be

- a-vancomycin (Vancocin) and gentamicin (Garamycin)**
- b-ceftriaxone (Rocephin)
- c-streptomycin and penicillin
- d-nafcillin (Nafcil)
- e-ciprofloxacin (Cipro)

7-A patient who has experienced recurrent urticaria comes to your office because the lesions have persisted for 48 hours. The patient has individual wheals that are smooth, edematous, and purpuric. They also itch and are painful.

Which one of the following is the most important diagnostic step at this time?

- a-A trial of oral H1 antihistamines
- b-A placebo-controlled food additive challenge
- c-A WBC count with differential
- d-A skin biopsy**
- e-A serum C4 complement level

8-The primary treatment for lactase deficiency is

- a-elimination of products containing wheat or rye from the diet
- b-elimination of milk products from the diet**
- c-a high fiber diet
- d-vitamin B12 supplementation
- e-corticosteroids

9-A 35-year-old white male executive comes to your office complaining of 3 to 4 bloody stools per day over the past month. Your initial approach to this problem should be to

- a-talk to the patient about job tension
- b-obtain a stool culture
- c-order a barium enema
- d-perform sigmoidoscopy**
- e-recommend a low-residue, high-fiber diet

10-In middle-aged women, which one of the following statements most accurately describes the relationship between obesity and the risk for myocardial infarction?

- a- Obesity is a risk factor for myocardial infarction in women with no other risk factors**
- b-Obesity is a risk factor for myocardial infarction only in women who take estrogen
- c-Obesity is a risk factor for myocardial infarction only in postmenopausal women
- d-Obesity is a risk factor for myocardial infarction only in women who smoke
- e-Obesity is not a risk factor for myocardial infarction

11-Which one of the following is the best current indication for the use of digoxin?

- a- Mild congestive heart failure in acute myocardial infarction
- b-Dilated, failing heart; impaired systolic function; and regular rhythm**
- c-Elevated filling pressures due to reduced ventricular compliance, preserved systolic function, and regular rhythm
- d-Drug of choice for the acute management of paroxysmal supraventricular tachyarrhythmias of the reentrant type

12-When given prior to chemotherapy for tumors, which one of the following drugs will prevent acute uric acid nephropathy?

a-Allopurinol

b-Indomethacin (Indocin)

c-Sulfinpyrazone (Anturane)

d-Probenecid (Benemid)

e-Colchicine

13-Hemoglobin A1c assays are INACCURATE in patients with

a-hypothyroidism

b-sickle cell disease

c-cor pulmonale

d-morbid obesity

e-secondary hypertension

14-Syncope is most likely to occur with the first dose of which one of the following drugs?

a-Prazosin

b- captopril

c-Methldopa

d-Hydralzine

e-Minoxidil

15-Which one of the following statements concerning treatment of acute myocardial infarction is correct?

a-Beta blockers reduce infarct size and chest pain when given for acute myocardial infarction

b-Calcium channel blockers reduce mortality from acute myocardial infarction

c-Angiotensin converting enzyme (ACE) inhibitors cause congestive heart failure if given during an acute myocardial infarction

d-Lidocaine must be given routinely for myocardial infarction

e-Magnesium reduces the risk of sudden death from myocardial infarction

16-A 25-year-old male visits your office concerned about a painless ulcer on the glans of his penis. After appropriate examination and testing you diagnose primary syphilis and treat him with 2.4 million units of benzathine penicillin intramuscularly in a single dose. Eight hours later, while you are working the evening clinic, he returns because he has a fever of 100.6° F and a bad headache, which he rarely gets. He says he "aches all over."

Which one of the following is the most appropriate action at this time?

a-Reassure and prescribe antipyretics

b-Add doxycycline (Vibramycin), 100 mg orally twice a day for 14 days

- c-Perform a spinal tap
- d-Order a CT scan of his head
- e-Obtain three blood cultures from different sites at 30-minute intervals

17-An 18-year-old white male comes to your office complaining of rectal pain and drainage. Examination reveals that the drainage is not from the rectum at all, but from the area above the gluteal cleft in the lower back. Erythema, induration, and purulent drainage are noted. The diagnosis of a pilonidal abscess is made. The patient's past history is otherwise unremarkable, as is the remainder of his examination.

Which one of the following is the best treatment?

- a-Incision and drainage with packing**
- b-Parenteral antibiotics
- c-Oral antibiotics
- d-Watchful waiting, as this condition often heals spontaneously

18-A high-school wrestler who is a type 1 (insulin-dependent) diabetic comes to see you before a match because his glucose level is high. You confirm that it is 275 mg/dL.

You should

- a-check his urine for ketones and, if positive, do not let him participate**
- b-advise him that type 1 diabetes is a contraindication to wrestling
- c-encourage him to take concentrated glucose, as his glucose level should be 300 mg/dL or more before a strenuous match
- d-tell him to go ahead and participate, as the exercise will lower his glucose level to a normal range

19-Which one of the following conditions is associated with high serum cholesterol?

- a-Diabetes insipidus
- b-Amyloidosis
- c-Multiple sclerosis
- d-Nephrotic syndrome**
- e-Hyperthyroidism

20-An 81-year-old white female comes to your office complaining of being depressed. She also complains of recurrent muscle cramping and tingling of her fingers. During your evaluation, you discover that her serum calcium level is 6.8 mg/dL (N 8.5-10.8) and her serum phosphorous level is 5.6 mg/dL (N 2.5-4.5). Which one of the following additional findings would most suggest the diagnosis of primary hypoparathyroidism?

- a-Normal renal function**
- b-Intracranial calcifications

- c-Papilledema
- d-Prolongation of the QT interval on EKG

21-A 55-year-old construction worker with no history of health problems develops intense flank pain with radiation into the groin. Urinalysis shows hematuria but is otherwise negative. He subsequently passes a stone which is analyzed and shown to consist of calcium oxalate. A CBC and chemistry profile are negative.

Which one of the following is true in this situation?

- a-Daily ingestion of 3 L of fluid should be recommended**
- b-A 24-hour urine specimen should be checked for calcium
- c-Dietary calcium should be restricted
- d-Beverages such as beer and tea should be avoided
- e-The patient should be started on triamterene (Dyrenium)

22-Which one of the following is true regarding the treatment of influenza with inhaled zanamivir (Relenza)?

- a-It should not be given within 2 weeks of the influenza vaccine
- b-For influenza prevention, it is more cost-effective than vaccine
- c-Treatment is effective when begun up to 5 days after the onset of symptoms
- d- It is inactive against influenza B
- e-It may cause bronchospasm in patients with asthma**

23-A 38-year-old white female who complains of abdominal pain insists that she be referred for surgical evaluation. There is a history of multiple unexplained physical symptoms which began in her late teenage years. She is vague concerning past medical evaluations, but a review of her thick medical chart reveals multiple normal blood and imaging tests, several surgical procedures which have failed to alleviate her symptoms, and frequent requests for refills of narcotic analgesics.

This history is most compatible with which one of the following?

- a-Somatization disorder**
- b-Generalized anxiety disorder
- c-Panic disorder
- d-Malingering
- e-Hypochondriasis

24-The drug of choice for methicillin-resistant staphylococcal infection is

- a-vancomycin (Vancocin)**
- b-piperacillin/tazobactam (Zosyn)
- c- imipenem/cilastatin (Primaxin)
- d-cephalothin (Keflin)
- e-ampicillin/sulbactam (Unasyn)

25-A 35-year-old day-care worker has a 2-day history of large-volume watery diarrhea with abdominal cramps. She is afebrile and a fecal smear is negative for leukocytes.

The most likely cause of her illness is

- a-Escherichia coli
- b-Campylobacter
- c-Salmonella
- d-rotavirus**
- e-Shigella

26-Which one of the following is generally considered to be an irreversible side effect of phenothiazines?

- a-Tardive dyskinesia**
- b-Dystonic reaction
- c-Akathisia
- d-Parkinsonian symptoms

27-A 22-year-old radiology technician performs a chest radiograph on a 3-year-old child who coughed for over 5 minutes while the technician took the film. The child's nasopharyngeal cultures grow Bordetella pertussis. The technician was fully immunized to pertussis as a child.

Which one of the following should you recommend to the health-care worker?

- a-Erythromycin orally for 2 weeks; stay home from work for the first 5 days of treatment**
- b-Amantadine (Symmetrel) orally for 2 weeks
- c-DTP booster (whole cell vaccine)
- d- Draw antibody to pertussis; give antibiotic prophylaxis only if antibody negative
- e-No further treatment

28-Which one of the following would be expected to have the highest attack rate during an outbreak of influenza?

- a-Children less than 3 years of age
- b-School-age children**
- c-Healthy young adults
- d-Adults over 65 years of age

29-Which one of the following anti-seizure medications is used exclusively for absence (petit mal) seizures?

- a-Phenytoin (Dilantin)
- b-Phenobarbital
- c-Primidone (Mysoline)
- d-Gabapentin (Neurontin)
- e- Ethosuximide (Zarontin)**

30-A healthy 75-year-old female brings the results of a urinalysis and subsequent culture obtained prior to scheduled cataract surgery. The urinalysis reveals 1-2 WBCs, 0-1 RBCs, a few epithelial cells, and 4+ bacteria. The culture shows >100,000 Escherichia coli. She denies urinary symptoms. Her only medication is hydrochlorothiazide (HydroDIURIL), which has controlled her blood pressure. Which one of the following should you do?

- a-Refer her to a urologist for evaluation
 - b-Order measurement of post-void residual volume and 7 days of trimethoprim/sulfamethoxazole (Bactrim, Septra)
 - c-Prescribe a 10-day course of amoxicillin
 - d-Inform her that treatment is not necessary**
-

A 41-year-old woman chronically infected with HCV, genotype 1a, 580,000 IU/mL, whose liver biopsy specimen showed stage 2, grade 1 disease has been receiving 180 µg peginterferon alfa-2b subcutaneously per week and 600 mg ribavirin orally twice daily. After 12 weeks of therapy she has had no adverse effects of therapy, her absolute neutrophil count is 800/mL, her hemoglobin level is 10.8 g/dL, her platelet count is 127,000/mL, and her HCV RNA level is 25,000 IU/mL. Which of the following is the most appropriate next step in this patient's care?

Add 40,000 IU erythropoietin per week to her medication regimen.
Continue current therapy for 12 weeks and then recheck HCV RNA level.
Decrease ribavirin to 400 mg twice daily.

Discontinue therapy.

Increase peginterferon to 180 µg/week.

A 55-year-old woman with cirrhosis and a history of hepatic encephalopathy is admitted to the hospital for the third time in one month with tense ascites. At each previous admission, she underwent therapeutic paracentesis with removal of 2 to 3 L of fluid. She has been following a diet restricted to 2 g of sodium per day and taking 160 mg furosemide and 400 mg spironolactone daily for diuresis. Her urine sodium concentration is low, confirming her compliance with a low-sodium diet. Serum sodium and potassium levels are 125 mEq/L and 4.2 mEq/L, respectively. Which of the following is the most appropriate initial approach to managing this patient's ascites?

Administer intravenous furosemide.
Remove all ascitic fluid possible and add amiloride to her medication regimen.
Remove all ascitic fluid possible and start intravenous albumin replacement.
Remove as much as 5 L of ascitic fluid and increase the doses of both diuretics.
Place a transjugular intrahepatic portosystemic shunt (TIPS).

All of the following necessitate sending bacterial stool cultures in patients with diarrhea for 2 days severe enough to keep them home from work *except*?

- A. age >75
- B. bloody stools
- C. dehydration
- D. recent lung transplantation
- E. temperature >38.5°C

A 76-year-old man complains of frequent small stools that are not abnormally liquid or hard. There is some pain with passing the stool. He has no abdominal pain, nausea, melena, vomiting, or fever. He has approximately eight to ten bowel movements per day, which interferes with his quality of life, though there is no fecal incontinence. What is a possible diagnosis to explain his complaints?

- A. Hypothyroidism
- B. Neuromuscular disorder
- C. Proctitis
- D. Ulcerative colitis
- E. Viral gastroenteritis

Which of the following proteins does not cause secretion of gastric acid?

- A. Acetylcholine
- B. Caffeine
- C. Gastrin
- D. Histamine
- E. Somatostatin

All the following cancers commonly metastasize to the liver except?

- A. breast
- B. colon
- C. lung
- D. melanoma
- E. prostate

5. A 38-year-old male presents to his physician with 4 to 6 months of weight loss and joint complaints. He reports that his appetite is good, but he has had diarrhea with six to eight loose, foul-smelling stools each day. He has also had migratory pain in the knees

and shoulders. Stool studies demonstrate steatorrhea. Which of the following diagnostic tests is most likely to be positive in this patient?

- A. Serum IgA antiendomysial antibodies
- B. Serum IgA antigliadin antibodies
- C. Serum PCR for *Tropheryma whippelii*
- D. Small bowel biopsy showing reduced villous height and crypt hyperplasia
- E. Stool *Clostridium difficile* toxin

6. A male patient with inflammatory bowel disease (IBD) comes to your office as a new patient. Reviewing the medical records, you note that he has had primarily rectal disease. Macroscopic photographs from his most recent colonoscopy show a lumpy, bumpy, hemorrhagic mucosa with ulcerations. Histology shows a process that is limited to the mucosa, with the deep layers unaffected. There are crypt abscesses. Which historic feature would be surprising in a patient with this form of IBD?

- A. Age 15–30
- B. Current smoker
- C. Fraternal twin sister does not have IBD
- D. Identical twin brother does not have IBD
- E. Intact appendix

7. All the following are causes of diarrhea except

- A. diabetes
- B. hypercalcemia
- C. hyperthyroidism
- D. irritable bowel syndrome
- E. metoclopramide

8. A 16-year-old woman had visited your clinic 1 month ago with jaundice, vomiting, malaise, and anorexia. Two other family members were ill with similar symptoms. Based on viral serologies, including a positive anti-hepatitis A virus (HAV) IgM, a diagnosis of hepatitis A was made. The patient was treated conservatively, and 1 week after first presenting, she appeared to have made a full recovery. She returns to your clinic today complaining of the same symptoms she had 1 month ago. She is jaundiced, and an initial panel of laboratory tests returns elevated transaminases.

Which of the following offers the best explanation of what has occurred in this patient?

- A. Co-infection with hepatitis C
- B. Hepatitis A recurrence
- C. Inappropriate treatment of initial infection
- D. Incorrect initial diagnosis; this patient likely has hepatitis B
- E. Relapsing hepatitis

9. which of the following factors at presentation predicts a poor outcome and increased risk of death in acute pancreatitis?

- A. Body mass index (BMI) >25 kg/m²
- B. Hematocrit ≥40%
- C. Lipase >1000 IU/L
- D. PaO₂ <60 mmHg**
- E. WBC count >10,000/μL

10. A 55-year-old man is evaluated because of painless jaundice and a 10 kg weight loss. He has had intermittent bloody diarrhea for several years. A magnetic resonance study suggests a mass within the common bile duct. Endoscopic biopsy indicates cholangiocarcinoma. Which of the following is the most likely cause of the patient's bloody diarrhea?

- Chronic duodenal ulcer
- Hemorrhoids
- Shigella enteritis
- Tumor bleeding into the gastrointestinal tract
- Ulcerative colitis**

11. A 30-year-old man presents to a gastroenterologist with intermittent dysphagia to solids. Over the past 5 years, he has had 2 episodes of food impaction requiring endoscopic treatment, which he attributed to taking very large bites. He has not followed-up with his physician as recommended. Past medical history reveals childhood asthma, which has resolved. Physical examination is unremarkable. Upper endoscopy shows an esophagus with a ringed appearance and vertical furrows throughout its length (Figure).



1. What is this patient's most likely diagnosis
- Achalasia
 - Eosinophilic esophagitis**
 - Esophageal candidiasis
 - Schatzki's rings
 - Scleroderma

12. A 28-year-old woman is 22 weeks pregnant with her first child. Over the last several weeks, she has developed severe heartburn after eating meals and at bedtime. She wants to take medication to improve her symptoms. Which of the following medications would be most appropriate for first-line use in this patient?

Proton pump inhibitor (PPI)

Histamine type 2 receptor antagonist (H2RA)

Over-the-counter antacid

Promotility agent

Antispasmodics.

13. A 19-year-old woman who is 10 weeks pregnant develops severe right upper quadrant pain and jaundice with fever and an elevated leukocyte count. Her aspartate aminotransferase (AST) level is 247 U/L and her alanine aminotransferase (ALT) level is 218 U/L. Right upper quadrant ultrasound demonstrates stones in the gallbladder, dilated intra- and extrahepatic bile ducts, and a thickened gallbladder wall as well as some pericholecystic fluid. Amylase and lipase levels are normal. On antibiotics and intravenous fluids, the patient's fever and leukocytosis abate, but her jaundice does not; her transaminases remain elevated. Which of the following is the best course of action to manage this patient?

Cholecystectomy only

Endoscopic retrograde cholangiopancreatography (ERCP) only

Percutaneous transhepatic cholangiography with drainage tube insertion

ERCP now followed by cholecystectomy in the second trimester

Cholecystectomy now followed by post operative ERCP in the second trimester

14. A 19-year-old woman travels to Egypt. While there, she develops deep jaundice and right upper quadrant abdominal pain and presents to a local hospital. Hepatitis serologies are obtained, and the patient is diagnosed with acute hepatitis A, presumed to have come from eating contaminated shellfish. The patient terminates her vacation and returns home, where further testing discloses that the patient is 8 weeks pregnant, a fact of which she was unaware. Laboratory studies demonstrate the following: total bilirubin level, 6.6 mg/dL; AST level, 2300 U/L; and ALT level, 1970 U/L. The patient is not coagulopathic. The patient is admitted to the hospital for monitoring and possible therapy. Which of the following is the best management option for this patient?

Administration of hepatitis A vaccine

Administration of hepatitis B immune globulin (HBIG)

Administration of pegylated interferon and ribavirin

Administration of lamivudine

Observation with maternal and fetal monitoring

15. A 70-year-old man with severe atherosclerosis who takes 1 baby aspirin (81 mg) daily undergoes cardiac catheterization because of chest pain. Later in the day, he develops severe abdominal pain and passes a large amount of bloody diarrhea. Physical examination reveals no peritoneal signs. Which of the following is the most likely cause of the patient's bleeding?

Colon cancer

Diverticulitis

Hemorrhoids

Mesenteric ischemia

Nonsteroidal anti-inflammatory drug enteropathy

16. A 50-year-old man with cirrhosis comes to the hospital with massive upper gastrointestinal bleeding. EGD reveals actively bleeding gastric varices, but the gastroenterologist is unable to stop the bleeding. Despite vigorous blood and fluid replacement, the patient remains profoundly hypotensive. Which of the following is the most appropriate next step in this patient's treatment?

Emergent TIPS placement

Insertion of a Nachlas Linton tube

Octreotide administration

Propranolol administration

Surgery

17. A 50-year-old woman with cirrhosis is admitted to the intensive care unit because of gross hematemesis. EGD reveals multiple esophageal varices and portal hypertensive gastropathy. One of the esophageal varices that is acutely bleeding is successfully treated with endoscopic band ligation. Which of the following is the best treatment plan for this patient upon discharge from the hospital?

Administration of propranolol only

Administration of propranolol and endoscopic band ligation of the remaining varices

Administration of propranolol and endoscopic sclerotherapy of the remaining varices

Endoscopic band ligation of the remaining varices only

Endoscopic sclerotherapy of the remaining varices only.

18. A 45-year-old man has iron deficiency anemia and guaiac-positive stools. He takes prednisone, acetaminophen, and ibuprofen to treat his rheumatoid arthritis, smokes 2 packs of cigarettes daily, and drinks several cups of coffee each morning. EGD and colonoscopy are unremarkable. Small bowel enteroscopy reveals multiple shallow ulcers and several areas of stricturing with inflammation in the jejunum. Use of which of the following substances is the most likely cause of the findings in this patient?

Acetaminophen

Cigarettes

Coffee

Ibuprofen

Prednisone

19. A 60-year-old man comes to the emergency department vomiting bright red blood. Severe retching preceded the bleeding. Esophagogastroduodenoscopy (EGD) is performed, revealing a clean-based but clearly visible laceration of the mucosa at the gastroesophageal junction (Mallory-Weiss tear). No active bleeding is present at the time of endoscopy. Which of the following is the most appropriate next step in this patient's treatment?

Observation

Endoscopic heater probe therapy

Blakemore tube (balloon tamponade)

Surgical oversewing of the tear

Transjugular intrahepatic portosystemic shunt (TIPS) placement

20. A 49-year-old man with cirrhosis from hepatitis C is seen for evaluation. The patient contracted hepatitis C approximately 30 years ago from a blood transfusion but had never been treated. He reports a 10 kg weight loss over 1 year. Physical examination reveals tenderness in the right upper quadrant and stigmata of chronic liver disease.

Ultrasonography shows cirrhosis and a 2-cm lesion in the left hepatic lobe, indicating possible hepatocellular carcinoma (HCC). Serum alpha-fetoprotein (AFP) level is normal. Which of the following is the best management option?

Check the patient's serum carbohydrate antigen 19-9 level

Obtain a computed tomography (CT) scan

Perform a left hepatectomy

Perform surgical resection of the tumor alone

Repeat the test for AFP in 3 to 6 months

Q 1 - The most potent stimulus for the release of secretin from duodenal mucosa is :

A. stimulation of the vagus nerve

B. Distension of duodenum by chyme

C. Acidity of the chyme entering the duodenum

D. protein content of the chyme entering the duodenum

Q 2 - The cephalic phase of gastric secretion is mediated mainly by

A. Chemical agents

B. Parasympathetic nerves

C. Sympathetic efferent nerves

D. Neurohormones of the hypothalamus .

Q 3 - Bilirubin

gives rise to jaundice if the blood level rises to 3mg/100ml

in high concentration in the blood can cause itching of the skin

can not cross the blood-brain barrier in the adult

is the brown pigment in the stools

Q 4 - The sphincter of oddi is related to

biliary function

salivary function

gastric hypersecretion

stress incontinence

Q 5 - The amount of gastrointestinal tract secretions per day

1000 ml

4000 ml

6000 ml

8000 ml

Q 6 - Food is prevented from entering the trachea during normal swallowing by

Elevation of the soft palate

Approximation of the palatopharyngeal folds

Approximation of the vocal cords

All of the above

Q 7 - The stomach

absorbs about 25% of the production of ingested protein

depresses the activity of carbonic anhydrase for production of hydrochloric acid

increase its mechanical activity when fat enters the duodenum

increase its mechanical activity in the response

Q 8 - Liver failure

Is characterized by a low albumin / globulin ratio

Is almost always present in a patient who is jaundiced

Both of above are true

Both of above are false

Q 9 - Chief function of colon is

A. Absorption of water

B. Secretion of mucus

C. Secretion of digestive enzymes

D. Both A and B

Q 10 - The motor unit includes
all the muscle fibers in a muscle
the afferent neuron. Center and the efferent neuron
motor nerve and the muscle fibres that it supplies
a single muscle fibre and all neurons that innervate it

Q 11 - The end plate is characterized by
propagation
depolarization
hyper polarization
all or none properties

Q 12 - The neurotransmitter released at the neuromuscular junction is
histamine
acetylcholine
noradrenaline
gamma amino butyric acid

Q 13 - Vagal stimulation cause the following effects except
fall in the blood pressure
increase in intestinal secretion
relaxation of bronchial musculature
constriction of intestinal musculature

Q 14 - The immediate source of energy for muscle contraction is
actin-tropomyosin
adenosine-triphosphate
phospho creatinine
none of the above

Q 15 - the metabolism of brain
is mainly dependent on the large glycogen storage
is independent of the blood glucose level
accounts for 26% of O₂ consumption of the body at rest
is influenced greatly by the uptakes of fatty acid from the blood

Q 16 - Sensory ataxia is due to lesions in
flocculo-nodular lobe
vestibular apparatus
posterior columns
all of the above

Q 17 - Demyelinated nerve fibres differ from myelinated nerve fibers in that they have increased excitability

have no nodes of ranvier

have no power of regeneration

have no association of Schwann cells

Q 18 - The following is a ketone body

A. Acetoacetate

B. Oxaloacetate

C. Pyruvic acid

D. Acetoacetyl CoA

Q 19 - Rich source of polyunsaturated fatty acids in the diet is

A. Milk

B. Eggs

C. Butter

D. Vegetable oils

Q 20 - Whole wheat is an excellent source of

A. Vitamin D

B. Ascorbic acid

C. Thiamine

D. Vitamin A

Q 21 - The vitamins that are necessary for neurological function

A. Thiamine, Riboflavin & Cyanocobalamin

B. Thiamine, Riboflavin & Pyridoxine

C. Thiamine, pyridoxine & cyanocobalamin >> (B1,6,12)

D. Thiamine, Folic acid & Cyanocobalamin

Choose the best answer

1. Which from the following antibiotics is contraindicated in epileptic patient ?

Erythromycin

Doxycycline

Ciprofloxacin

Penicillin

Cephalosporins

2. which is the best antibiotic for treatment of mycoplasma pneumonia ?

Rifampicin

Amoxicilline

Erythromycine >> & tetracycline

Cefurexime

Pipracillin

3. what is the ECG changes seen in hypocalcemic patients ?

a. Short P-R interval

b. Prolonged P-R interval

c. Wide QRS complex

d. Short Q-T interval

e. **Prolonged Q-T interval**

4. Which of the following drugs cause hypocalcemia ?

a. Thiazide diuretics

b. Enalapril

c. **Loop diuretics**

d. Morphine

5. Which of the following condition cause low sugar in the C.S.F?

a. Bacterial meningitis

b. T.B meningitis

c. Mumps

d. H.S.V meningo- encephalitis

e. **All of the above**

6. Which of the following condition cause oligoclonal band in the C.S.F?

a. TB meningitis

b. Multiple sclerosis

c. Sarcoidosis

d. Lymphoma

7. Which of the following drugs potentiate the action of Digoxin ?

a. Paracetamol

b. amoxicillin

c. **Quinidine Sulfate**

d. Pethidine

8. Which of the following drugs potentiate the action of warfarin ?

a. **Amiodarone**

b. Phenytoin

c. Barbiturate

d. Carbamazepine

9. What is the most specific test for SLE?

- a. ANA
- b. **Anti- DS DNA Abs**
- c. RF
- d. CRP

10. What is the cause of Death in SLE patients ?

- a. **Infection**
- b. Anemia
- c. Leucopenia
- d. D.V.T

11. Which of the following condition precipitate migraine headache ?

- a. Stress
- b. Fasting
- c. oral contraceptive pills
- d. Insomnia
- e. **All of the above**

12. An 80 years old male pt. Presented with headache, Anemia and ESR > 100 what is your diagnosis ?

- a. Brain tumor
- b. meningitis
- c. Encephalitis
- d. **Temporal arteritis**
- e. pseudo tumor cerebri

13. Serious complication of D.V.T is ?

- a. Leg ulcer
- b. Leg swelling
- c. **Pulmonary embolisms**
- d. Cellulitis

14. Which of the following cause D.V.T?

- a. SLE
- b. Protein C deficiency
- c. Antithrombin III deficiency
- d. Nephrotic syndrome
- e. **All the above**

15. Which of the following condition cause symmetrical arthritis ?

- a. SLF
- b. Rheumatic Fever
- c. Rheumatoid arthritis**
- d. Gout

16. All of the following are **seronegative** spondyloarthopathy except?

- a. Antylosing Spondylitis .
- b. Rheumatoid arthritis**
- c. Psoriatic arthritis
- d. Reactive arthritis

17. Cause of Macrocytic Anemia all **except?**

- a. Megablactic Anemia
- b. liver disease
- c. Folic acid deficiency Anemia** غلط
- d. Alcohol
- e. hypothyroidism

18. All of the following cause microcytic Anemia except?

- a. Iron D.A
- b. Thalassemia
- c. Sideroblastic Anemia
- d. Autoimmune hemolytic Anemia**

19. Complications associated with **chickenpox** include all of the following **except?**

- a. Bloody diarrhea**
- b. hemorrhagic vesicles
- c. Cerebellar inflammation
- d. pneumonitis
- e. Reys syndrome

20. The **most common fistula** in the gastrointestinal tract usually results from ?

- a. Crohns disease
 - b. ulcerative colitis
 - c. diverticular disease**
 - d. childbirth
 - e. peptic ulcer surgery
-

GIT physiology:

Choose your answers from a-d by clicking the radio button next to each choice and then press 'Submit' to get your score.

Question 01

Regarding salivary secretion and swallowing:

- ☐ a) The food bolus is propelled down the esophagus by segmentation movements.
- ☒ b) The pH of saliva rises as its rate of secretion increases.
- ☐ c) Swallowing is a purely voluntary activity.
- ☐ d) Hormones are more important than nerves in the regulation of salivary secretion.

Question 02

Regarding the control of gastric secretion:

- ☒ a) Gastric acid is secreted by parietal cells of the gastric glands in response to hormonal stimulation.
- ☐ b) Most of the acid and pepsinogen secreted by the stomach occurs during the intestinal phase of gastric secretion.
- ☐ c) Gastric secretion does not begin until food enters the stomach.
- ☐ d) Secretin secreted by the duodenum stimulates gastric secretion.

Question 03

Regarding gastric motility:

- ☒ a) Gastric emptying is inhibited by the enterogastric reflex.
- ☐ b) The antral region of the stomach is important for the storage of food.
- ☐ c) Contractions of the stomach wall do not begin until food enters the stomach.
- ☐ d) The contractions of the stomach depend on activity in the vagus nerve.

Question 04

Regarding pancreatic secretion:

- ☐ a) Pancreatic secretion is inhibited by gastrin secreted by the G cells of the antrum.
- ☐ b) Pancreatic acinar cells contain trypsin.
- ☐ c) Cholecystokinin inhibits secretion from the exocrine pancreas.
- ☒ d) The introduction of acid into the duodenum stimulates pancreatic secretion.

Question 05

Regarding the bile:

- ☐ a) Bile is diluted in the gall bladder.

- ☐ b) Bile salts are hydrophobic molecules.
- ☒ c) Most bile salts are absorbed in the terminal ileum.
- ☐ d) Bile salts are the breakdown products of hemoglobin.

Question 06

Regarding digestion and absorption by the small intestine:

- ☐ a) Intestinal digestive enzymes are secreted by cells of the crypts of Lieberkuhn.
- ☐ b) About half of the digested carbohydrate is absorbed in the small intestine.
- ☒ c) Small peptides are absorbed in the small intestine.
- ☐ d) The liver is the first organ to receive the digestion products of dietary fats.

Question 07

Regarding gastro-intestinal function:

- ☐ a) The presence of large amounts of fat in the chyme will accelerate gastric emptying.
- ☐ b) Distension of the ileum stimulates gastric motility.
- ☒ c) Total gastrectomy leads to malabsorption of vitamin B₁₂.
- ☐ d) Aldosterone inhibits the absorption of sodium and water by the large intestine.

1) Which of the following are incorrectly paired

a. pancreatic alpha amylase-starch	b. elastase-tissue rich in elastin
c. renin-coagulated milk	d. erythropeptidase-polypeptides

Ans. D

2) All are GIT hormones except

a. cholecystokinin	b. gastrin
c. secretin	d. erythropoietin

Ans. D

3) Iron is absorbed in

a. stomach	b. duodenum
c. jejunum	d. ileum

Ans. b

4) In infants, defecation often follows a meal. The cause of colonic contractions in this situation is

a. gastro-ileal reflex	b. increased circulating levels of CCK
c. gastrocolic reflex	d. enterogastric reflex

Ans. C

5) Which of the following has highest ph

a. gastric juice	b. pancreatic juice
c. bile in GB	d. secretions of intestinal glands

Ans. B

6) Man is unable to digest

a. dextrin	b. glucose
c. cellulose	d. glycogen

Ans. C

7) Steatorrhea may be caused by all factors except

a. pancreatectomy	b. gastrin secreting hormone
c. resection of distal ileum	d. hemolytic jaundice

Ans. D

8) Normal swallowing is dependant on the integrity of the

a. 9th and 10th cranial nerves	b. pyramidal tract
c. trigeminal nerve	d. appetite center of hypothalamus

Ans. A

9) Secretion of intrinsic factor occurs in

a. parietal cells of stomach	b. chief cells of stomach
c. upper abdomen	d. alpha cells of pancreas

Ans. B

10) In which of the following is absorption of water greatest

a. colon	b. jejunum
c. duodenum	d. stomach

Ans. B

11) Secretin is released by

a. acid in duodenum	b. acid in stomach
c. cells in the liver	d. distention of colon

Ans. A

12) Which of the following would not be produced by total pancreatectomy

a. hyperglycaemia	b. metabolic acidosis
c. weight gain	d. decreased absorption of amino acids

Ans. C

13) Vit D is essential for normal

a. fat absorption	b. Ca absorption
c. ADH secretion	d. protein absorption

Ans. B

14) Gastrin secretion is increased by

a. acid in the lumen of stomach	b. distension of stomach
c. increased circulating levels of secretin	d. vagotomy

Ans. B

15) Saliva is responsible for all EXCEPT

a. helps in deglutition	b. prevents dental caries
c. is essential for complete digestion of starch	d. prevents decalcification of the teeth

Ans. C

What is the most common cause of cyanotic congenital heart disease at birth?

- A. **Transposition of the great arteries**
- B. Coarctation of the aorta
- C. Patent ductus arteriosus
- D. Tetralogy of Fallot
- E. VSD

A 25-year-old man presents with lethargy and increased skin pigmentation. Blood tests reveal deranged liver function tests and impaired glucose tolerance. Given the likely diagnosis of haemochromatosis, what is the most appropriate initial investigation?

- A. **Transferrin saturation**
- B. Haematocrit
- C. Liver biopsy with Perl's stain
- D. Serum iron

E. Serum ferritin

Crohn's disease is associated with each one of the following findings, except:

- A. Inflammation confined to mucosa and submucosa
- B. Non-caseating granulomas
- C. Rose-thorn ulcers
- D. Cobblestone pattern
- E. Fistulas

Each one of the following procedures requires endocarditis prophylaxis for susceptible patients, except:

- A. Flexible bronchoscopy
- B. Oesophageal dilatation
- C. Small bowel resection
- D. Dental polishing
- E. Dental scaling

Each one of the following procedures requires endocarditis prophylaxis for susceptible patients, except:ia

- ☐ A. Upper respiratory tract surgery
- ☐ B. Dental polishing
- ☐ C. Rigid bronchoscopy
- ☐ D. Gastroscopy
- ☐ E. Dental scaling

Which one of the following causes of diarrhoea has the shortest incubation period?ia

- A. Salmonella 8 – 48 hr
- B. Shigella 48 – 72 hr
- C. Campylobacter 2 – 10 days
- D. E. coli 24 – 72 hr
- E.A Bacillus cereus 1 – 4 hr

What is the most common hormone secreted from pituitary tumours?

- A. TSH
- B. LH
- C. GH

D.A Prolactin

E. ACTH

What causes increased sweating in patients with acromegaly?

- A. Increased sodium content in sweat
- B. Decreased LH and FSH secondary to hypopituitarism
- C. Episodic hypoglycaemia
- D. Low-grade chronic pyrexia
- E. Sweat gland hypertrophy

What percentage of patients with ulcerative colitis have primary sclerosing cholangitis?

- A. 0.5%
- B. 1%
- C. 2%
- D. 5%
- E. 10%

A 43-year-old man is found to have a pheochromocytoma. Which anti-hypertensive medication should be started first?

- A. Propranolol
- B. Ramipril
- C. Atenolol
- D. Phenoxybenzamine >> a blocker
- E. Doxazosin

A 55-year-old man is admitted following an anterior myocardial infarction. Which of the following drugs is least likely to reduce mortality in the long-term?

- A. Atorvastat
- B. Atenolol
- C. Ramipril
- D. Aspirin
- E. Isosorbide mononitrate

Which of the following antibiotics is most likely to cause cholestasis?

- A. Co-amoxiclav
- B. Gentamicin
- C. Ciprofloxacin

- D. Trimethoprim
- E. Ceftazidime

What is the most common type of thyroid cancer?

- A. Follicular
- B. Lymphoma
- C. Medullary
- D. Anaplastic
- E. Papillary

Which one of the following conditions may cause hypokalaemia in association with hypertension?

- A. Gitelman syndrome
- B. 21-hydroxylase deficiency
- C. Bartter's syndrome
- D. Pheochromocytoma
- E. 11-beta hydroxylase deficiency

Each one of the following procedures requires endocarditis prophylaxis for susceptible patients, except:

- ☐ A. Upper respiratory tract surgery
- ☐ B. Dental polishing
- ☐ C. Rigid bronchoscopy
- ☐ D. Gastroscopy
- ☐ E. Dental scaling

Each one of the following is a recognised complication of gastro-oesophageal reflux disease except:

- ☐ A. Oesophageal carcinoma
- ☐ B. Barrett's oesophagus
- ☐ C. Anaemia
- ☐ D. Achalasia
- ☐ E. Benign strictures

Which one of the following treatments have not been shown to improve mortality in patients with chronic heart failure?

- A. Beta-blockers
- B. Spironolactone
- C. **Furosemide**
- D. Nitrates and hydralazine
- E. Enalapril

Congenital adrenal hyperplasia is most commonly caused by:

- ☐ A. 11-hydroxylase deficiency
- ☐ B. Anti-histone antibodies
- ☐ C. 17-hydroxylase deficiency
- ☐ D. Anti-mitochondrial antibodies
- ☐ E. **21-hydroxylase deficiency**

Each one of the following is a contraindication to performing a percutaneous liver biopsy, except:

- ☐ A. INR 2.6
- ☐ B. **Viral hepatitis**
- ☐ C. Hydatid cyst
- ☐ D. Uncooperative patient
- ☐ E. Haemangioma

Each one of the following is a cause of nephrogenic diabetes insipidus, except:

- ☐ A. **Hypocalcaemia**
- ☐ B. Sickle-cell anaemia
- ☐ C. Lithium
- ☐ D. Hypokalaemia
- ☐ E. Demeclocyclin

Which one of the following is least characteristic of Addison's disease?

- ☐ A. Hypoglycaemia
- ☐ B. **Metabolic alkalosis**
- ☐ C. Hyponatraemia
- ☐ D. Hyperkalaemia

- ☐ E. Positive short ACTH test

Each one of the following is associated with atrial myxoma, except:

- ☐ A. Clubbing
- ☐ B. Mid-diastolic murmur
- ☐ C. Pyrexia
- ☐ D. 'J' wave on ECG
- ☐ E. Atrial fibrillation

Where is the most common site for primary cardiac tumours to occur in adults?

- ☐ A. Left atrium
- ☐ B. Right ventricle
- ☐ C. Right atrium
- ☐ D. Left atrial appendage
- ☐ E. Left ventricle

Each one of the following is associated with oesophageal cancer, except:

- ☐ A. Achalasia
- ☐ B. Smoking
- ☐ C. Gastro-oesophageal reflux disease
- ☐ D. *Helicobacter pylori*
- ☐ E. Alcohol

Which of the following histological findings is not associated with coeliac disease?

- ☐ A. Villous atrophy
- ☐ B. Crypt hyperplasia
- ☐ C. Non-caseating granulomas
- ☐ D. Lamina propria infiltration with lymphocytes
- ☐ E. Increase in intraepithelial lymphocytes

each one of the following is a feature of polycystic ovarian syndrome, except:

- ☐ A. Hirsutism
- ☐ B. Subfertility
- ☐ C. Acne
- ☐ D. Acanthosis nigricans
- ☐ E. **Raised FSH/LH ratio (العكس raised LH/FSH)**

Which one of the following skin disorders is least associated with hypothyroidism?

- ☐ A. Xanthomata
- ☐ B. Pruritus
- ☐ C. **Pretibial myxoedema**
- ☐ D. Eczema
- ☐ E. Dry, coarse hair

Which one of the following is not part of the major criteria for diagnosing rheumatic fever?

- ☐ A. Sydenham's chorea
- ☐ B. Flitting polyarthritis
- ☐ C. Myocarditis
- ☐ D. Subcutaneous nodules
- ☐ E. **Erythema chronicum migrans**

A 58-year-old man presents to the Emergency Department following an episode of transient right-sided weakness which lasted approximately 20 minutes. He has had two previous episodes of a similar nature. On examination he is found to be in atrial fibrillation at a rate of 80 bpm

CT head normal

What is the most suitable management?

- ☐ A. Digoxin
- ☐ B. Low-dose aspirin and dipyridamole
- ☐ C. **Warfarin**
- ☐ D. Sotalol
- ☐ E. Low-dose aspirin

A 26-year-old male blood donor is noted to have the following results:

Bilirubin 41 $\mu\text{mol/L}$

ALP 84 U/L

ALT 23 U/L

Albumin 41 g/L

Dipstick urinalysis Normal

What is the most likely diagnosis?

- ☐ A. Gilbert's syndrome
- ☐ B. Dubin-Johnson syndrome
- ☐ C. Rotor syndrome
- ☐ D. Hepatitis C infection
- ☐ E. Primary biliary cirrhosis

The cardiac arrest team attend a 54-year-old man who has collapsed on the cardiology ward. He is not breathing and a carotid pulse cannot be felt. What is the correct ratio of chest compressions to ventilation prior to the placement of a definite airway?

- A. 5:1
- B. 10:1
- C. 15:2
- D. 20:2
- E. 30:2

Which one of the following is least associated with mitral stenosis?

- A. Malar flush
- B. Loud S2
- C. Mid-diastolic murmur
- D. Opening snap
- E. Atrial fibrillation

The following cause a rise in triglyceride levels, as opposed to cholesterol levels, except:

- ☐ A. Hypothyroidism
- ☐ B. Obesity
- ☐ C. Liver disease
- ☐ D. Bendrofluazide
- ☐ E. Chronic renal failure

Which one of the following is not part of the minor criteria for diagnosing rheumatic fever?

- ☐ A. Pyrexia
- ☐ B. Subcutaneous nodules
- ☐ C. Arthralgia
- ☐ D. Raised ESR
- ☐ E. Prolonged PR interval

Which one of the following is the most likely presentation of *Staphylococcus aureus* food poisoning?

- ☐ A. Tenesmus
- ☐ B. Watery diarrhoea
- ☐ C. Dysentery
- ☐ D. Severe vomiting
- ☐ E. Presentation 24-48 hours after eating affected food

In patients with suspected insulinoma, which one of the following is considered the best investigation?

- A. Oral glucose tolerance test
- B. Insulin tolerance test
- C. Early morning C-peptide levels
- D. Glucagon stimulation test
- E. Supervised fasting

Six weeks after having a prosthetic heart valve a patient develops infective endocarditis. What is the most likely causative organism?

- A. Streptococcus viridians (AFTER 6 WEEK)
- B. Staphylococcus epidermidis (WITH IN 6 WEEKS)
- C. Staphylococcus aureus
- D. Streptococcus bovis (WITH RECTAL DISEAS)
- E. One of the HACEK groupie

Each of the following statements regarding hyperkalaemia are true, except:

- ☐ A. ECG changes include large P waves

- ☐ B. It is associated with metabolic acidosis
- ☐ C. May be caused by Addison's disease
- ☐ D. May be caused by spironolactone
- ☐ E. May be caused by massive blood transfusion

A 55-year-old smoker with a past history of hypertension presents to the Emergency Department with a sudden onset of breathlessness. Examination reveals bibasal crackles whilst the CXR shows upper lobe diversion and perihilar shadowing. The ECG and cardiac enzymes are normal. What is the likely cause of his breathlessness?

- ☐ A. Infective endocarditis
- ☐ B. Pheochromocytoma
- ☐ C. Fibromuscular dysplasia
- ☐ D. Renal artery stenosis
- ☐ E. Anterior myocardial infarction

Which one of the following complications is least associated with ventricular septal defects?

- A. Right heart failure
- B. Aortic regurgitation
- C. Eisenmenger's complex
- D. Infective endocarditis
- E. Atrial fibrillation

A 71 year patient is presents to the Emergency Department with a 30 minute history of crushing central chest pain. ECG shows tall R waves in V1-2. Which coronary territory is likely to be affected?

- A. Lateral
- B. Posterior
- C. Anteroseptal
- D. Anterolateral
- E. Inferior

Which of the following rises first following a myocardial infarction?

- ☐ A. AST
- ☐ B. Troponin I
- ☐ C. CK

- ☐ D. CK-MB
- ☐ E. Myoglobin

The following cause a rise in triglyceride levels, as opposed to cholesterol levels, except:

- ☐ A. Diabetes mellitus
- ☐ B. Bendrofluazide
- ☐ C. Nephrotic syndrome (AND HYPOTHYROIDISM)
- ☐ D. Alcohol
- ☐ E. Obesity

A 35-year-old female presents with a deep vein thrombosis in the third trimester of pregnancy. Whilst in the Emergency Department she develops a left hemiparesis. What underlying cardiac abnormality is most likely to be responsible?

- ☐ A. Primum ASD
- ☐ B. Secundum ASD
- ☐ C. Patent foramen ovale
- ☐ D. VSD
- ☐ E. Patent ductus arteriosus

Which one of the following features is least commonly seen in Gitelman's syndrome?

- ☐ A. Hypokalaemia
- ☐ B. Hypertension
- ☐ C. Metabolic alkalosis
- ☐ D. Hypocalciuria
- ☐ E. Hypomagnesaemia

Which one of the following is not an indication for insertion of a temporary pacemaker?

- ☐ A. Complete heart block following an inferior MI
- ☐ B. Complete heart block following an anterior MI
- ☐ C. Trifascicular block prior to surgery
- ☐ D. Mobitz type II heart block following an anterior MI
- ☐ E. Symptomatic bradycardia not responding to drug treatment

A 64-year-old female presents with central chest pain radiating down her left arm of 20 minutes duration. On examination the pulse is 90 bpm and regular and the **BP is 205/110** mmHg. ECG shows 2 mm ST elevation in **leads V2-6**. Morphine and aspirin have already been given. What is the most appropriate next step?

- ☐ A. Observe
- ☐ B. IV streptokinase
- ☐ C. IV alteplase
- ☐ D. **IV GTN**
- ☐ E. Temporary pacing

Which one of the following is a recognised cause of hypokalaemia associated with hypertension

- ☐ A. **Liddle's syndrome**
- ☐ B. Bartter's syndrome
- ☐ C. Gitelman syndrome
- ☐ D. Ciclosporin
- ☐ E. Renal tubular acidosis

Of the following, which one is the most useful prognostic marker in paracetamol overdose?

- ☐ A. ALT
- ☐ B. **Prothrombin time**
- ☐ C. Paracetamol levels at presentation
- ☐ D. Paracetamol levels at 12 hours
- ☐ E. Paracetamol levels at 24 hours

A 74-year-old man presents to his GP for a medication review. Blood pressure is recorded as 184/72. This is confirmed on two further occasions. What is the most appropriate first line therapy?

- ☐ A. Ramipril
- ☐ B. Losartan
- ☐ C. Frusemide
- ☐ D. **Bendrofluazide**
- ☐ E. Atenolol

A 62 year man is admitted with to the cardiology ward with infective endocarditis. Blood cultures grow *Streptococcus bovis*. What is the most appropriate investigation given the blood culture findings?

- ☐ A. Sialogram
- ☐ B. Bronchoscopy
- ☐ C. CT brain
- ☐ D. Gastroscopy
- ☐ E. Barium enema

Which one of the following is least associated with hepatocellular carcinoma?

- ☐ A. Hepatitis C
- ☐ B. Primary biliary cirrhosis
- ☐ C. Aflatoxin
- ☐ D. Wilson's disease
- ☐ E. Haemochromatosis

Primary biliary cirrhosis is associated with a raised level of:

- ☐ A. IgM
- ☐ B. IgE
- ☐ C. IgD
- ☐ D. IgA
- ☐ E. IgG

Which one of the following is not a recognised dermatological manifestations of hyperthyroidism?

- ☐ A. Pruritus
- ☐ B. Pretibial myxoedema
- ☐ C. Increased sweating
- ☐ D. Loss of lateral aspect of eyebrows
- ☐ E. Thyroid acropachy

A 29-year-old female who is 14 weeks into her first pregnancy is investigated for excessive sweating and tremor. Blood tests reveal the following:

TSH < 0.05 mu/l

T4 188 nmol/l

What is the most appropriate management?

- ☐ A. Immediate surgery
- ☐ B. Carbimazole
- ☐ C. Surgery at start of third trimester
- ☐ D. Propylthiouracil
- ☐ E. Radioiodine

A 54-year-old male with no past medical history is found to be in atrial fibrillation during a consultation regarding a sprained ankle. If the patient remains in chronic atrial fibrillation what is the most suitable treatment to offer the patient?

- ☐ A. Aspirin
- ☐ B. Warfarin, target INR 2-3
- ☐ C. No anticoagulation
- ☐ D. Warfarin, target INR 3-4
- ☐ E. Warfarin, target INR 2-3 for six months then aspirin

Which one of the following is not associated with villous atrophy on jejunal biopsy?

- ☐ A. Tropical sprue
- ☐ B. Coeliac disease
- ☐ C. Hypogammaglobulinaemia
- ☐ D. Familial Mediterranean Fever
- ☐ E. Whipple's disease

Ebstein's anomaly is associated with in-utero exposure to which of the following:

- ☐ A. Metronidazole
- ☐ B. Ramipril
- ☐ C. Carbimazole
- ☐ D. Phenytoin
- ☐ E. Lithium

A 56-year-old man is reviewed in the Cardiology outpatient clinic following a myocardial infarction one year previously. During his admission he was found to be hypertensive and

diabetic. He complains that he has put on 10kg in weight in the past 6 months. Which of his medications may be contributing to his weight gain?

- ☐ A. Metformin
- ☐ B. Losartan
- ☐ C. Clopidogrel
- ☒ D. A Glicazide
- ☐ E. Simvastatin

A 45-year-old man with a history of alcohol excess is diagnosed as having grade 3 oesophageal varices on endoscopy. What is the most appropriate management to prevent variceal bleeding?

- ☐ A. Propranolol
- ☐ B. Isosorbide mononitrate
- ☐ C. Variceal sclerotherapy
- ☐ D. Terlipressin
- ☐ E. Variceal banding

Each one of the following is a feature of Tetralogy of Fallot, except:

- ☐ A. Right ventricular outflow tract obstruction
- ☐ B. Overriding aorta
- ☐ C. Ejection systolic murmur
- ☒ D. A Left-to-right shunt
- ☐ E. Right ventricular hypertrophy

Which one of the following is most suggestive of Wilson's disease?

- ☐ A. Reduced hepatic copper concentration
- ☐ B. Reduced 24hr urinary copper excretion
- ☐ C. Increased skin pigmentation
- ☒ D. Reduced serum caeruloplasmin
- ☐ E. Reduced serum copper

A 54-year-old female consults her GP concerned about double vision. She is noted to have exophthalmos and conjunctival oedema on examination and a diagnosis of thyroid eye disease is suspected. What can be said regarding her thyroid status?

- ☐ A. Hyper- or euthyroid
- ☐ B. Hypothyroid
- ☐ C. Hyperthyroid
- ☐ D. Hypo- or euthyroid
- ☐ E. **Eu-, hypo- or hyperthyroid**

Which one of the following is associated with an ejection systolic murmur?

- ☐ A. **Pulmonary stenosis**
- ☐ B. Mitral valve prolapse
- ☐ C. Mitral stenosis
- ☐ D. Ventricular septal defect
- ☐ E. Coarctation of aorta

A 45-year-old man is referred to the acute medical unit. He had presented earlier in the day to the GP complaining of ongoing fatigue and polydipsia. A BM taking in the surgery was 22.3. On examination he is an obese man (BMI 36) with a pulse of 84 bpm and blood pressure of 144/84 mmHg. Blood tests reveal the following:

Na ⁺	140 mmol/l
K ⁺	3.9 mmol/l
Bicarbonate	22 mmol/l
Urea	5.2 mmol/l
Creatinine	101 µmol/l
Glucose	21.2 mmol/l

What is the most appropriate initial management?

- ☐ A. Glicazide
- ☐ B. Pioglitazone
- ☐ C. Weight loss
- ☐ D. **Metformin**
- ☐ E. Commence insulin therapy

Cushing's syndrome is most typically associated with which one of the following abnormalities:

- ☐ A. Hypokalaemic metabolic acidosis
- ☐ B. Hyperkalaemic metabolic alkalosis
- ☐ C. Hypocalcaemic metabolic acidosis
- ☐ D. Hypokalaemic metabolic alkalosis
- ☐ E. Hyperkalaemic metabolic acidosis

A 30-year-old female is started on carbimazole 20mg bd following a diagnosis of Grave's disease. What is the best biochemical marker to assess her response to treatment?

- ☐ A. Total T4
- ☐ B. TSH
- ☐ C. Free T4
- ☐ D. ESR
- ☐ E. Free T3

A 45-year-old female is admitted to the Emergency Department with abdominal pain associated with vomiting. She has a past medical history of hypothyroidism. On examination she is pyrexial at 37.6°C. Pulse is 110 bpm with a blood pressure of 100/64 mmHg. Blood results show the following:

Na⁺ 131 mmol/l
K⁺ 4.9 mmol/l
Urea 8.1 mmol/l
Creatinine 110 µmol/l
Glucose 3.3 mmol/l

What treatment should be given first?

- ☐ A. Ceftriaxone + benzylpenicillin
- ☐ B. Glucagon
- ☐ C. Propranolol
- ☐ D. Triiodothyronine
- ☐ E. Hydrocortisone

Which of the following conditions is least associated with *Helicobacter pylori*?

- ☐ A. Gastric carcinoma
- ☐ B. B cell lymphoma of MALT tissue
- ☐ C. Gastro-oesophageal reflux disease
- ☐ D. Atrophic gastritis
- ☐ E. Peptic ulcer disease

What is the most appropriate screening investigation to exclude a pheochromocytoma?

- ☐ A. Ultrasound adrenals
- ☐ B. Phenoxybenzamine suppression test
- ☐ C. 24 hour urinary collection of vanillylmandelic acid
- ☐ D. 24 hour urinary collection of catecholamines
- ☐ E. Plasma adrenaline (morning)

Which one of the following features of haemochromatosis may be reversible with treatment?

- ☐ A. Cardiomyopathy
- ☐ B. Hypogonadotropic hypogonadism
- ☐ C. Diabetes mellitus
- ☐ D. Arthropathy
- ☐ E. Liver cirrhosis

Which of the following congenital heart defects may progress to Eisenmenger's syndrome?

- ☐ A. Tetralogy of Fallot
 - ☐ B. Coarctation of the aorta
 - ☐ C. Patent ductus arteriosus
 - ☐ D. Tricuspid atresia
 - ☐ E. Transposition of the great arteries
-

مهم جدا CORRECT ANSWERS IN BLUE

In the assessment of an acute asthma attack the following are false EXCEPT

- Heart rate 90 indicates a severe attack
- A peak flow less than 50% best predicted is an indication of a severe attack
- Absence of wheeze indicates the attack is mild
- Hypertension indicates a life threatening attack
- **A $\text{paO}_2 < 30 \text{ mmHg}$ indicates a need for ventilation**

Three days after a chest infection a 20-year – old insulin dependent diabetic starts to have nausea ,abdominal pain and vomiting .The blood glucose was 430mg/dl and arterial blood PH was 7.25 .Which one of the following abnormal blood results is rarely encountered in this condition ?

- Hyperkalaemia
- A low Pa co_2
- **Tetany**
- A low bicarbonate
- A rise in plasma chloride

A 23 year-old male is referred to you after developing “reddish brown” urine 1 day after playing football. He also notes that for the past two days he has had a sore throat and cough. He has no PMHx, takes no medications and has a family history of nephrolithiasis. Chemistries reveal a BUN of 16 mg/dL and creatinine of 1.0 mg/dL. ANA is negative and C3 is normal. A 24 hour urine protein excretion is 200 mg and creatinine clearance is 120 cc/m. Microscopic analysis reveals many RBC with some dysmorphic cells. Renal U/S is wnl. The most likely diagnosis is:

- Minimal change disease
- Rhabdomyolysis
- **IgA nephropathy**
- Post-streptococcal glomerulonephritis
- Nephrolithiasis

A 60 –year – old woman is noted to have small pupil which is non reactive to light but constrict to accommodation .The most likely cause for the pupil abnormality is:

- **Syphilis**
- Posterior communicating artery aneurysm syndrome
- Pancosts tumour

- Pontine hemorrhage
- Holmes –Adie pupil

One of the following is TRUE in the management of chronic obstructive pulmonary disease (COPD):

- In an infective exacerbation the most likely organism is Staphylococcus aureus
- Influenza vaccine is contraindicated
- Regular blood transfusions may help to increase oxygen carrying capacity
- **Long-term oxygen has been shown to improve life expectancy**
- In the treatment of an exacerbation, high oxygen tension should be used initially

A 55 –year – old man presents with a six – month history of arthralgia and vasculitic skin rash affecting the lower limbs .Further investigation reveals monoclonal and polyclonal cryoglobulins. This condition is often associated with which one of the following infections ?

- Hepatitis C virus (HCV)

- Hepatitis B virus (HBV)
- Cytomegalovirus (CMV)
- Parvovirus
- Epstein – Barr virus (EBV)

The following are possible causes of a goiter EXCEPT:

- pregnancy
- **exogenous iodine**
- carbimazole
- puberty
- Graves' disease

Which one of the following is a characteristic side effect of Carbamazepine ?

- Hyponatraemia.
- **Thrombocytopenia.**
- Nephrolithiasis.
- Diabetes mellitus.
- Agitation.

A 56-year-old poorly controlled, insulin-dependent diabetic complains of horizontal diplopia. Diplopia is maximal on left gaze, and covering the left eye leads to disappearance of the outer image. Which nerve is most likely to be affected?

- Left trochlear
- **Left oculomotor**
- Right abducens
- **Left abducens**

- Right oculomotor

A 67 year –old male presents to the Emergency Room with epigastric pain associated with nausea and vomiting, found to be hypotensive. What is the FIRST investigation to be done ?

- Abdominal Ultrasound.
- Random blood sugar.
- Serum amylase.
- **Electrocardiogram(ECG)**
- Abdominal X ray.

A 30 –year- old nurse has diarrhea – predominant irritable bowel syndrome (IBS) .She has tried herbal medicine in the past .In your opinion which one of the following agents is she most likely to respond to ?

- Antispasmodic agents
- Smooth muscle relaxants
- Prednsone enema
- **Amitriptyline**
- Loperamide

A 56-year-old man has had sinusitis for a few months. Recently he complained of bloody nasal discharge, cough, and shortness of breath. The chest X-ray shows a diffuse area of consolidation and cavities in the right middle lobe and left upper lobe. Urinalysis shows red blood casts and protein +++++. The most likely diagnosis is

- Pulmonary tuberculosis
- Sarcoidosis
- Aspiration pneumonia
- **Wegener's granulomatosis**
- Carcinoma of the bronchus

The following may be presenting features of acute myocardial infarction EXCEPT

- Confusion
- Diabetic hyperglycemic states
- **Polyuria**
- Syncope
- Acute pulmonary edema

Biochemistry is as follows: urea 51 mg / dl, creatinine 1.9 mg / dl, AST 25 U/l, ALT 23 U/l ALP 98 U/l, and LDH 1532 U/l. what is the most likely diagnosis?

- Aplastic anemia
- Secondary carcinoma infiltrating the spleen

- Acute myeloid leukaemia

- Myelofibrosis
- Chronic myeloid leukaemia

Regarding infectious diseases one of the following is FALSE

- Since 1992 there has been a reduction in the incidence of *Haemophilus influenzae* type B infections in children

- H. influenzae type B viruses are subject to antigenic shift

- There have been no confirmed cases of measles since 1994
- Approximately 90% of adults are immune to chickenpox
- Smallpox was declared to have been eradicated from the world in the 1980s

A 52 year old woman presents for follow-up. She has adult-onset DM for which she takes glyburide. No other medical problems. On PE she is 152 cm tall, and weighs 90.7 kg. Liver is mildly enlarged and non-tender. Labs show: AST 75 ALT 52 Alb 4.0 T.Protein 6.5 Alk Phos 110 T.bili 1.0 Glucose 254 Hep B/C neg. AMA/Anti-smooth muscle Ab neg. U/S shows decreased echogenicity of liver but no ductal dilatation. The most likely diagnosis is:

- Nonalcoholic steatohepatitis

- Alcoholic steatosis
- Autoimmune hepatitis
- Biliary cirrhosis
- Chronic cholecystitis

A 75-year-old lady presents with increasing tiredness for six months. On examination she is pale and has 6 cm of splenomegaly. Her Hemoglobin is 7.2 g/dl, MCV 85 fl, WCC $21.5 \times 10^9/l$ and platelets $45 \times 10^9/l$. Examination of her blood film reveals teardrop-shaped red cell and occasional nucleated red cell.

A 50 year old woman has a history of gastrinoma and pituitary tumor .She reports increasing lethargy ,drowsiness and constipation . The laboratory studies include raised calcium (11.6 mg/dl) low phosphate and raise PTH . The most likely diagnosis is :

- Carcinoma of the bronchus.
- Acromegaly
- Multiple endocrine neoplasia syndrome (MEN I)**
- Sarcoidosis

- Pseudohypoparathyroidism

A 24 year old man presents with a four – day history of a worsening skin eruption preceded by symptoms of headache , fever and arthralgia . On examination , there is evidence of a widespread purpuric rash affecting the extensor aspects of her forearms , legs and buttocks . Investigations demonstrates a raised white cell count with a neutrophilia , and a raised serum IgA level. Urinalysis reveals microscopic hematuria and proteinuria . What is the most likely diagnosis ?

- Rheumatic fever.
- Erythema multiforme
- Linear IgA disease.
- **Henoch – Schonlein purpura**

The following are contraindications to thrombolysis EXCEPT:

- Aortic dissection
- Previous subarachnoid hemorrhage
- **Menstruation**
- Cavitating pulmonary disease
- Pregnancy

One of the following is TRUE regarding spontaneous pneumothorax

- If left alone, a 100% pneumothorax would take 2-3 weeks
- Usually occurs in woman

- May be managed by observation alone

- Is often caused by rib fractures
- Is best treated with positive pressure ventilation

Concerning acute deep vein thrombosis the following are false EXCEPT

- about 2% embolism to the lung occurs.

- a below knee deep vein thrombosis is of no clinical significance
- admission is required until warfarin treatment is established
- the first line radiological investigation is a venogram
- an above knee deep vein thrombosis requires 3 months of anticoagulation

A 31 –year – old woman is referred because of unsteady gait and rigidity. Her problem started seven years ago with tremors affecting the arms and the head ,associated with dysarthria and dysphagia. Its noted that she has deranged liver function tests and recently was referred to the ophthalmologist for an eye problem .The most likely diagnosis is

- Parkinsons disease
- **Wilsons disease**
- Ataxia telangiectasia

- Huntingtons disease
- **Multiple sclerosis**

A 58-year-old man was admitted with a three-weeks history of shortness of breath. The chest X-ray demonstrates a right pleural effusion. Pleural fluid analysis shows 6600 mm³ WBC, 40% eosinophils. The condition least likely to be responsible for this clinical presentation is

- Pneumothorax
- Benign asbestos pleural effusion
- **Tuberculous pleural effusion**
- Haemothorax
- Pulmonary infarction

A 31- year – old woman presented with dysuria and frequency of micturation. Urine microscopy shows a high number of white cells but no organisms are detected. Urine cultures are negative. The clinical picture is typical of each of the following disorders EXCEPT:

- Ureaplasma urealyticum infection
- **Renal tuberculosis**
- Candidiasis
- Urolithiasis
- Escherichia coli infection

The following statements about peptic ulceration are true EXCEPT:

- Helicobacter pylori may play a role in the etiology
- **gastric ulcers are associated with blood group A**
- duodenal ulcers do not become malignant
- gastric ulceration usually occurs with a normal or low acid production
- duodenal ulcers are more common than gastric ulcers

Which medication acts the fastest to terminate seizure activity in the brain ?

- Carbamezipine
- Phenytoin
- **Diazepam**
- Succinylcholine.
- Valproic acid .

A 58-year-old woman is admitted with sudden onset of weakness and loss of sensation of the right upper arm and right face. Further assessment revealed receptive and expressive dysphasia. The artery most likely to be involved in this stroke syndrome is

- **C-Left middle cerebral artery**

- Basilar artery
- Left anterior cerebral artery
- Left posterior cerebral artery
- Right vertebral artery

A 55-year-old man was referred because he has shortness of breath after minimal exertion, and non-productive cough. These symptoms started nine months earlier and were not preceded by any febrile illness. He smoked heavily during most of his adult life physical examination revealed fine crepitations in mid- and lower zones and clubbing of the fingers. The most likely diagnosis is

- pulmonary tuberculosis (TB)
- **Fibrosing alveolitis**
- Bronchiectasis
- chronic obstructive pulmonary disease
- Carcinoma of the bronchus

The following are side effects of inhaled steroids EXCEPT:

- Laryngeal myopathy
- **Adrenal suppression**
- Hoarse voice
- Cataracts
- Oral candidiasis

A 60 year – old man is diagnosed with hypertension. Which one of the following drug combination is potentially hazardous and should be AVOIDED ?

- Diltiazem and atenolol
- Thiazide and lisinopril
- Nifedipine and enalapril.
- Verapamil and enalapril.
- **Bisoprolol and lisinopril**

The followings are recognized causes of Microcytic Hypochromic anemia EXCEPT :

- **Folic acid deficiency.**
- Thalassemia.
- Chronic diseases.
- Lead poisoning.
- Iron deficiency.

A 16 Year old boy develops glomerulonephritis and nephritic syndrome following a malarial infection. The most likely diagnosis is:

- **Plasmodium malariae**
- *Plasmodium vivax.*
- *Plasmodium ovale.*

- *Plasmodium falciparum*.
- All the above.

Major causes of metabolic acidosis include each of the following EXCEPT ?

- Metformine therapy.
- Methanol ingestion.
- Diabetic Keto Acidosis.
- **Steroid therapy.**
- Chronic renal failure.

A 40-year-old butcher complains of pain and paraesthesia in both hands. On examination he has wasting of the right thenar muscles, and tapping the volar aspect of the right wrist provoked a pins and needle sensation in the index and middle finger. Each of the following disorders could be responsible for the clinical features, EXCEPT.

- **Hemochromatosis**
- Diabetes mellitus
- Rheumatoid arthritis
- Acromegaly

A 26 year old G4 P3 A0 who is 34 weeks pregnant presents with 4 days of malaise/RUQ pain and 2 days of N/V. No previous problems with any pregnancy. PE shows BP of 140/90, Neg. Murphy's, 3+ BLE edema Labs show: Hgb 8.0 (normal 1 month ago) WBC 12,000 (80% polys, 5% bands) Platelet count 80,000 Blood smear: Helmet cells and RBC fragments T.Bili 5.0 D.Bili 0.4 AST 300 ALT 300 LDH 1000 BUN 19, creatinine 0.8, uric acid 6.0, U/A: 4+ proteinuria. The most likely diagnosis is:

- Immune thrombocytopenic purpura

- HELLP syndrome

- Hemolytic uremic syndrome
- Cholestasis of pregnancy
- Acute fatty liver of pregnancy

A 45-year-old woman presents with a marked right-sided ptosis and failure of upgaze (elevation). What is the most likely diagnosis?

- Dystopia myotonica
- Dysthyroid eye disease
- **Third cranial nerve palsy**
- Horner's syndrome
- Myasthenia gravis

A 31 year- old insulin-dependent diabetic patient is admitted in ketoacidosis .She complains of nasal stuffiness and facial pain. Examination of the nasal turbinates reveals blackish discoloration .The most likely diagnosis is :

- Coccidiomycosis.

- **Invasive zygomycosis.**

- Mycetomas

- Blastomycosis.

- Cryptococcosis.

In Cystic Fibrosis, all the following are true EXCEPT:

- causes clubbing

- **usually leads to death in the early teens**

- has autosomal recessive inheritance

- causes steatorrhoea

- occurs in 1 in 2000 live births

The following ECG changes in the diagnosis of acute myocardial infarction are false EXCEPT:

- ST elevation of greater than or equal to 1 mm in leads AVL and III

- New right bundle branch block (RBBB)

- An ST elevation of greater than or equal to 1 mm in leads AVR and AVL

- ST elevation of greater than or equal to 1 mm in leads V3 and V4

- **ST elevation of greater than or equal to 2 mm in leads V5 and V6**

A 20 – year – old woman presents with sudden onset of swelling of the lips and tongue .She also has abdominal pain and vomiting. Her mother confirmed that her daughter had similar attacks over the years and even as a child. A brother and older sister have the same disorder .Which of the following statements about this disease is accurate?

- Antinuclear antibody (ANA)are often positive

- Raised IgE helps differentiate it from other immune disorders

- It has autosomal recessive inheritance

- **Serum C4 is low**

- It has sex - linked inheritance

A 60-year-old right-handed woman is admitted with loss of power and sensation in the right arm and leg, associated with word-finding difficulty. Physical examination confirms these findings and reveals a right carotid bruit and normal heart sounds. The neurological signs resolve over the two hours after admission. Her GP letter states that she has paroxysmal atrial fibrillation and that she had a duodenal ulcer treated with triple therapy five years ago. She takes no regular medication. Which one of the following treatments is the most appropriate for secondary preventions of transient ischemic attacks?

- Warfarin to an INR of 2-3.5

- Aspirin and Omeprazole
- Aspirin
- Clopidogrel
- Aspirin, dipyridamole, and omeprazole

***Legionella pneumophila* is transmitted by:**

- Aerosols of respiratory secretions of infected persons
- Inhalation or ingestion of contaminated environmental sources**
- Fecal-oral transmission
- 2 and 3
- 1 and 2

Which one of the following disorders is MOST commonly associated with Steven – Johnson syndrome ?

- Herpes zoster infection
- Celiac disease.
- Sarcoidosis
- Systemic lupus erythematosus
- Herpes simplex infection.**

The following can be attributed to a urinary tract infection in an elderly person EXCEPT:

- Hematuria
- Urinary incontinence
- Falls
- Wandering at night**
- Disorientation

Antibiotics are MOST CLEARLY indicated for diarrhea caused by which of the following?

- EHEC
- EPEC
- Yersinia enterocolitica**
- Salmonella enterica serotype Enteritidis
- Salmonella enterica serotype Enteritidis

Regarding systolic murmurs one of the following statements is False :

- The murmur of a ventricular septal defect is pansystolic
- Hypertrophic obstructive cardiomyopathy produces a murmur loudest on squatting
- Aortic stenosis produces a mid-systolic murmur
- Mitral valve prolapse produces a pansystolic murmur >> late systolic**
- An atrial septal defect produces an ejection systolic murmur

A patient with a gastro-intestinal bleed is deemed to be at high risk EXCEPT if

- The hemoglobin is < 10 g/dl
- The pulse rate is > 100
- **Is over 50 years of age**
- There is fresh melena
- There is a postural drop in diastolic blood pressure

A 54-year-old woman is treated with oral amoxicillin 500mg thrice daily for five days. Her respiratory symptoms improve, but she develops profuse diarrhea associated with fever. On examination the pulse rate is 98 bpm, blood pressure 136/80 mmHg, with generalized abdominal tenderness. Stool culture is strongly positive for *Clostridium difficile* and you suspect a diagnosis of pseudomembranous colitis. Which one of the following treatments would be most appropriate?

- Ciprofloxacin
- Erythromycin
- Trimethoprim
- Augmentin
- **Metronidazole**

In Benign intracranial hypertension the following is true EXCEPT:

- is associated with certain drugs
- **causes papilloedema only if associated with a tumor**
- is treated by repeated lumbar puncture
- is more common in women
- is characterized by frequent headaches

A 40-year-old man has a six-month history of increasing shortness of breath and wheeze. The full blood count shows an increased absolute eosinophil count. Chest X-ray and a CT scan of the chest show right apical bronchiectasis. Which one of the following is the most likely diagnosis?

- **Allergic bronchopulmonary aspergillosis**
- Polyarteritis nodosa
- Nitrofurantoin hypersensitivity
- Loeffler's syndrome
- Strongyloides stercoralis infection

Which of the following agents should be considered as the initial treatment of patients with an asthma flare?

- Oral steroids.
- Intravenous theophyllines.
- Intravenous steroids.

- None of the above.
- **Inhaled beta agonists**

Active pulmonary tuberculosis is usually diagnosed by:

- Demonstration of rise in antibody titer
- **Chest film and sputum culture**
- Clinical impression
- PPD skin test
- Gram stain

Acromegaly can present with EXCEPT

- **blindness**

- cardiomyopathy
- glycosuria
- hepatomegaly
- hypertension

A 30-year-old woman with a history of recurrent DVT and pulmonary embolism is found to have a prolonged activated partial thromboplastin time (APTT). What is the MOST likely associated abnormality?

- Anti-Ro antibodies
- Anti-Scl-70 antibodies
- Protein S deficiency
- Antithrombin III deficiency
- **Anticardiolipin antibodies**

Hypercalcaemia can occur in the following EXCEPT:

- Hyperparathyroidism
- Thyrotoxicosis
- Malignant disease
- sarcoidosis
- **acute pancreatitis**

Immunisation is the main factor responsible for the reduction in rates of the following diseases EXCEPT

- Diphtheria
- **Pulmonary tuberculosis**
- Measles
- Whooping cough
- Mumps

In a patient with unstable angina one of the following is TRUE:

- a beta-agonist should be given intravenously

- hospital admission is sometimes necessary
- **there is an increased risk of myocardial infarction**
- Troponin levels rarely alter management
- warfarin treatment should be started

In the diagnosis of pulmonary embolism the following are true EXCEPT

- Chest x-ray is normal
- Partial pressure of oxygen is 50 mmHg
- **Patient is below 30 years of age**
- Respiratory rate is 25 respirations per minute
- Dimer is <3 ml per liter

As Causes of a collapsing pulse one of the following is FALSE

- Thyrotoxicosis
- Fever
- Patent ductus arteriosus
- Aortic regurgitation
- **Bradycardia**

Treatment of peptic ulcer disease in H. pylori positive patient is

- Misoprotol 200ug /x4.
- Dual therapy is effective as triple therapy.
- Proton pump inhibitor alone can eradicate H.pylori.
- Metronidazole is better than Amoxicillin.
- **Proton pump inhibitor,c Clarithromycine and Amoxicillin**

Each of the following conditions is known to cause fatty liver EXCEPT?

- Obesity
- **Corticosteroids therapy.**
- Diabetes mellitus
- Alcoholic liver disease.
- **Hypercholesterolemia.**

Regarding an abdominal x-ray the following are true EXCEPT:

- The large bowel is dilated if it is > 5.5 cm in diameter
- The small bowel is centrally placed
- The small bowel is dilated if it is > 3 cm in diameter
- **The large bowel has folds called valvulae conniventes**
- The large bowel normally contains gas

A 33 – year – old intravenous drug abuser is positive for HIV .She has experienced pain on swallowing .Upper endoscopy reveals a few raised , creamy – white plaques

and several sharply demarcated small areas of shallow ulceration in the mid – to lower oesophagus .Which one of the following is the most likely cause of this problem?

- Oesophageal web
- Barretts oesophagus
- Cytomegalovirus infection of the oesophagus
- **Herpes simplex oesophagitis**
- Oesophageal candidiasis

In a patient who has mitral valve insufficiency , which procedure does not require prophylactic antibiotic therapy ?

- **Cardiac catheterization .**
- Cystoscopy
- Prostatectomy
- Periodontal surgery.
- Tonsillectomy

A 35-year-old teacher consults her GP. She gave birth to her second child five months ago. When he was three months old, she returned to work and stopped breastfeeding. Since then, she has been feeling anxious and irritable. On examination, the only abnormal finding was a sinus tachycardia. Her GP checked her thyroid function tests, found that she was thyrotoxic and referred her to the Endocrine Clinic. Which one of the following investigations would best distinguish between Graves disease and postpartum thyroiditis?

- FNA biopsy of the thyroid
- Ultrasound scan of the thyroid
- CT scan of the neck
- **Thyroid autoantibody titer**
- Isotope scan of the thyroid

The following are causes of a ptosis EXCEPT:

- Myasthenia gravis
- Third nerve damage
- Damage to the sympathetic nervous system
- **Facial nerve palsy**
- Dystrophia myotonica

A 60-year-old teacher is being investigated for increasing shortness of breath and diffuse fibrotic changes found on plain chest X-rays. He was taking diuretics and anti-arrhythmic treatment. The 12-lead ECG shows a prolonged QT interval. Each of the following clinical situations could be responsible for this ECG abnormality, EXCEPT:

- Heart failure

- Hypokalemia
- **Hypercalcemia**
- Amiodarone therapy
- Furosemide Therapy

A 30 –year –old mechanic presented with central chest pain ,worse on lying flat. He claims that he has had a flu – like illness for a week .Which one of the following ECG changes is most characteristic of this disorder ?

- ST depression
- PR prolongation
- Prominent U wave
- Peaked , tall T wave
- **PR segment depression** **“pericarditis”**

Causes of papilloedema include all the following EXCEPT:

- Parasagittal meningioma
- Type 2 respiratory failure
- **Hyperparathyroidism**
- Hypertension
- Benign intracranial hypertension

A 24 –year old woman has a webbed neck , short stature, amenorrhea and 45 chromosomes .The most likely associated cardiac malformation in this condition is :

- Pulmonary stenosis
- Ventricular septal defect
- Atrial septal defect
- **Coarctation of the aorta**
- Patent ductus arteriosus

A 25-year-old university lecturer with a history of asthma and nasal polyp has recurrent episodes of dyspnea and cough whenever she takes aspirin. She should be advised to avoid taking which one of the following medications

- **Diclofenac sodium**
- Ranitidine
- Trimethoprim
- Paracetamol
- Codeine

Which one of the following disorders is MOST likely to be associated with H .pylori infection?

- Reflux esophagitis.
- Non ulcer dyspepsia.
- **Gastric lymphoma.**

- Achalasia of the cardia.
- Celiac disease.

Ocular complications of diabetes mellitus include all the following EXCEPT

- Cataract formation
- **Optic neuritis**
- glaucoma
- New vessel formation in the retina
- An isolated third nerve palsy

The following diseases and antibodies are associated, EXCEPT:

- Rheumatoid factor ----- Rheumatoid
- Anticardiolipin ----- SLE
- Anti Mitochondrial Antibodies ----- Primary Biliary Cirrhosis
- **Anti centromere ----- Chronic active hepatitis**
- Anti double-stranded DNA ----- SLE

One of the following statements on mortality rates is true:

- The stillbirth rate is the number of babies born dead after 28 weeks divided by the number of live births
- The maternal mortality rate is the number of deaths of mothers attributable to pregnancy and delivery divided by the number of pregnancies
- The perinatal mortality rate is the number of deaths in the first week of life (excluding stillbirths) divided by the total number of births
- The neonatal mortality rate is the number of deaths in the first four weeks of life divided by the number of deaths in the first year
- **The infant mortality rate is the number of deaths in the first year divided by the number of live births**

In the treatment of acute asthma all the following are false EXCEPT

- Nebulised magnesium may help
- **High concentration oxygen should be given initially**
- Intravenous salbutamol should be started if a nebuliser has failed to produce improvement
- Nebulised ipratropium bromide helps most patients
- Fluid restriction to prevent pulmonary oedema is often necessary

Causes of gynecomastia include all the following EXCEPT

- Testicular tumors
- **Hyperprolactinemia**
- Cimetidine
- Liver failure
- Spironolactone

Risk factors for the development of tuberculosis include which of the following :

- HIV infection.
- Residing in a nursing home .
- Age (higher risk in infants and the elderly).
- Close contact with a person known to have tuberculosis.
- **All of the above .**

Rapid respiration may be caused by EXCEPT

- Lesions of the pons
- Salicylate overdose
- Anxiety
- **Hypoglycaemia**
- Hyperosmolar ketoacidosis

The following conditions are associated with gut malignancy EXCEPT:

- familial adenomatous polyposis coli >>>> colorectal ca
- iron deficiency anaemia >> (Plummer venson>>> premalignant condition)
- coeliac disease >>>>> gut lymphoma
- **reflux oesophagitis ?????????? >> (adenocarcinoma)**
- Helicobacter pylori >>>>> MALToma

I think all of them are associated with increased risk of gut malignancy

ECG changes of hyperkalaemia include the following, EXCEPT

- Wide QRS complex
- Absent P-waves.
- **Ventricular tachycardia**
- Prolonged P-R interval
- Depressed S-T segment

A 72 – year – old man has increasing difficulty with balance and frequent falls. He has unblinking gaze and monotonous voice. Which of the following signs is not indicative of Parkinson's disease ?

- **Action tremors**
- Micrographia
- Bradykinesia
- Loss of postural reflexes
- Cogwheel rigidity

The following apply to the arterial blood pressure EXCEPT:

- e. It is falsely high when a small cuff is used

c. On standing the systolic and diastolic pressures rise

- a. There may be a difference between the right and left brachial pressures
- d. There is a diurnal variation
- b. It increases on exercise

One of the following is associated with dilatation of the pupil:

- Convergence
- Horner's syndrome
- **Complete third nerve palsy**
- Entering the garden on a bright day
- Old age

Causes of erythema nodosum include all the following EXCEPT

- tuberculosis
- streptococcal sore throat
- sarcoid
- **trauma**
- sulphonamides

Dysphagia occurs with the following conditions EXCEPT

- iron deficiency
- Chagas disease
- **pyloric stenosis**
- anxiety
- myasthenia gravis

The following are recognized causes of diarrhea EXCEPT

- carcinoid syndrome
- diabetes mellitus
- chronic pancreatitis
- thyrotoxicosis
- **hyperparathyroidism**

One of the following enable a diagnosis of diabetes mellitus to be made:

- Retinal new vessel formation
- Fasting plasma glucose of 120 mg%
- Random plasma glucose of 200 mg%
- **Islet cell antibodies**
- Glycosuria

Glycosuria may be found in the following situations EXCEPT

- Fanconi syndrome

- Cushing's syndrome
- acromegaly
- **Addison's disease**
- normal patients

A 40-year – old engineer has smoked a pack of cigarettes daily for 20 years presents with chronic unproductive cough associated with a history of recurrent pneumothorax and a chronic hepatitis .The most likely diagnosis is :

- Immotile cilia syndrome
- Cystic fibrosis
- Chronic bronchitis
- **α -1 Antitrypsin deficiency**
- Marfan's syndrome

Regarding mild pulmonary embolism one of the following is TRUE

- loud P2
- ECG pattern of S1 Q3 13
- **tachypnea, tachycardia and hypoxia**
- Heparin therapy should be started when a positive V/Q scan is obtained
- cardiomegaly

The following are causes of a pleural effusion EXCEPT:

- Pancreatitis
- Mesothelioma
- Pulmonary infarction
- Ovarian carcinoma
- **Retroperitoneal fibrosis**

A 35-year-old with migraine presents with a ten-hour history of headache and right-sided visual disturbance. On examination he has a right inferior homonymous quadrantanopia. Damage to which structure is most likely to have caused his visual problems?

- **Left parietal lobe**
- Optic chiasm
- Left occipital lobe
- Left lateral geniculate nucleus
- Left temporal lobe

Regarding Cardiac causes of finger clubbing one of the following is TRUE

- Maladie de Roger
- Atrial septal defect
- **Transposition of the vessels**
- Mitral valve prolapse

- Rheumatic fever

In the management of Cardiac Arrest, one of the following is TRUE:

- DC cardioversion is seldom useful in ventricular fibrillation
- Sodium bicarbonate must be given to prevent acidosis
- Hypercalcaemia may be a cause of electromechanical dissociation
- Calcium chloride is recommended for asystole
- **External cardiac compression should depress the sternum 1.5-2 inches**

The following statements about the normal chest X-ray are false EXCEPT:

- the horizontal fissure is normally visible on the left
- **the left hemidiaphragm is lower than the right**
- the left hilum is lower than the right
- the trachea is slightly to the left of the midline
- the heart appears larger on a PA film

Which of the following causes profuse, watery diarrhea without inflammation or tissue damage?

- EHEC
- *Campylobacter jejuni*
- *Vibrio vulnificus*
- *Salmonella typhi*
- ***Vibrio cholera***

One of the following statements about Type I Insulin dependent diabetes is TRUE:

- Nephropathy is more common than retinopathy
- **There is an increased frequency of HLA DR3**
- Diabetic nephropathy affects about 4% of all subjects
- Retinopathy is less common than with Type 11 diabetes
- Insulin dosage must be decreased when illness prevents eating and drinking

Regarding detection by urine dipstick choose the correct answer:

- Oxalate crystals
- Microalbuminuria
- Bence-Jones proteins
- **Nitrite**
- Red cell casts

Recognized features of sarcoidosis may include all the following EXCEPT:

- Bilateral hilar lymphadenopathy
- Lupus pernio
- **Deafness**
- Facial nerve palsy

- Splenomegaly

Cerebellar lesions cause the following EXCEPT:

- slurred speech
- **extensor plantar response**
- Hypotonia
- Intention tremor
- ipsilateral neurological signs

Which of the following is not a characteristic of fulminant hepatic failure?

- Cerebral edema.
- Coagulopathy
- Elevated bilirubin.
- Hepatic encephalopathy.
- **Non of the above.**

Polyuria may result from the following conditions EXCEPT:

- Hypercalcaemia
- Supraventricular tachycardia
- Hypokalaemia
- **An epileptic attack**
- Diabetes insipidus

In Paget's disease one of the following is TRUE

- Plasma acid phosphatase is elevated
- **Cardiac failure is a recognised complication**
- Symptoms are proportional to the degree of skeletal involvement
- About 10% of patients develop osteosarcoma
- Serum calcium is usually elevated

A patient with hypertension requires admission to hospital EXCEPT if

- Blood pressure is known to have risen suddenly
- Seizures occur
- **There is co-existent diabetes**
- Papilloedema is present
- The diastolic blood pressure is > 130 mmHg

Syncope is a recognized feature in the following EXCEPT:

- hypertrophic obstructive cardiomyopathy
- pertussis
- **Meniere's disease**
- complete heart block

- paroxysmal tachycardia

Leucocytes in the urine occur with the following EXCEPT

- Urolithiasis
- Aspirin nephropathy
- Renal tuberculosis
- Nephroblastoma
- **Retroperitoneal fibrosis**

The risk of osteoporosis is increased in all the following EXCEPT:

- Thyrotoxicosis
- Asians
- **Warfarin treatment**
- Steroid therapy
- Premature menopause

Regarding the JVP one of the following is TRUE

- cannon waves occur in tricuspid stenosis
- **it falls on inspiration**
- It is low in cardiac tamponade.
- it is raised in left ventricular failure
- Large V waves will occur in mitral regurgitation

Which of the following pathogens is INNATELY resistant to penicillin?

- Staph epidermidis
- Strep pneumo
- Corynebacterium diphtheriae
- Group A strep
- **Mycoplasma pneumonia**

Spontaneous rib fracture may be caused by the following EXCEPT

- Metastases
- **Pneumothorax**
- Coughing
- Osteoporosis
- Primary lung tumour

A 72-year-old woman is admitted to the Coronary Care Unit with an acute inferior myocardial infarction. During ECG recording it is noticed that her heart rate is 40 bpm with sinus rhythm and a blood pressure is 87/55 mmHg. The most appropriate immediate action is :

- **Give intravenous atropine sulphate (0.6mg)**
- Give 24-hour isoprenaline infusion

- Insert temporary pacemaker
- Keep monitoring the pulse and the blood pressure for a further 24 hours
- Organize emergency percutaneous coronary angiography

Aortic stenosis in adult is commonly the result of which one of the following?

- Cystic medial necrosis.
- **Bicuspid aortic valve.**
- Left ventricular membrane.
- Rheumatic fever.
- Hypertrophic Obstructive CardioMyopathy (HOCM)

The following may be features of a Bell's palsy EXCEPT:

- hyperacusis
- loss of taste in the anterior part of the tongue
- **deafness**
- pain

The usual biochemical features of primary hyperaldosteronism include EXCEPT

- Hyponatraemia
- Hypokalaemia
- Hypertension
- Decreased plasma rennin activity
- **Metabolic acidosis >> alkalosis**

Portosystemic Encephalopathy may be precipitated by all of the following EXCEPT:

- Constipation
- Gastrointestinal hemorrhage
- **Lactulose**
- Diuretics
- Benzodiazepines

An 85 –year – old man is referred with a three – month history of dysphagia. Gastro-esophagoscopy and biopsy confirmed the presence of squamous cell carcinoma of the esophagus. Each of the following conditions might be associated with this tumor, EXCEPT:

- Achalasia
- Head and neck cancers
- **Barrett's oesophagus**
- Tylosis
- Smoking

Giant cell arteritis usually involves:

- Increased temporal artery pulse
- Young males
- Chronic migraine (with aura)
- **Temporal artery tenderness**
- Both 1 and 3

Nephrotic syndrome may be caused by the following EXCEPT

- Gold
 - **Interstitial nephritis**
 - Congenital defects
 - Systemic lupus erythematosus (SLE)
 - Amyloidosis
-

1. Pneumocystis carinii is caused by:

- A. fungi

2. 28 year old man presents with dry cough and dyspnea, chest X-ray shows interstitial infiltrate, the most likely cause of pneumonia is:

- A. pneumocystis carinii

3. Klebsiella is caused by:

- A. bacteria

4. Pseudomonas is caused by:

- A. bacteria.

5. Escherichia coli is caused by:

- A. bacteria.

6. Diphtheria is caused by:

- A. gram-positive bacillus

7. The most common cause of toxic myocarditis is:

- A. diphtheria.

8. The most common cause of nosocomial infection is:

- A. aerobic bacteria

9. The most common site of nosocomial infection is:

- A. urinary tract infection

10. The most common bone tumor is:

A. metastatic tumor

11. Digital clubbing in patients with bronchial carcinoma is associated with:

A. hypertrophic pulmonary osteoarthropathy -

12. Among parasitic infections, the most common cause of cardiac involvement is:

A. trichinosis

13. The most common cause of cor pulmonale is:

A. chronic obstructive pulmonary disease.

14. Plain X-ray in acute pancreatitis is associated with:

A. sentinel loop

B. colon cutoff sign

C. both

15. According to Dukes' classification of large bowel cancer, cancer spread to lymph nodes is classified as:

A. stage C

16. The most commonly afflicted endocrine gland in patients with AIDS is:

A. adrenal gland

17. Skin lesions in herpes zoster resemble those of:

A. chickenpox.

18. The rash of measles usually appears first on the:

A. face

19. MRI is contraindicated in patients with:

A. metal intracranial clips

20. Diarrhea following a long-term therapy with ampicillin is most likely due to:

A. c. difficile.

21. The most common cause of portal hypertension in developing countries is:

A. schistosomiasis

22. Ascetic milk white (chylous) fluid is due to:

A. lymphatic obstruction.

23. 14 year old boy presents with greenish-brown discoloration of the corneal margin, the most likely diagnosis is:

A. Wilson's disease.

24. The most common presentation of primary biliary cirrhosis is:

A. pruritus

25. The most sensitive test for primary hypothyroidism and hyperthyroidism is:

A. serum TSH

25. Erythema nodosum :

B. usually occurs on the anterior aspect of the legs.

26. 62 year old man with gastric cancer presents with velvety brown thickened skin of the body folds, this is called:

A. acanthosis nigricans

27. 28 year old woman complains of early morning attacks of abdominal pain relieved by defecation, the most likely diagnosis is:

A. irritable bowel syndrome

28. Patients with very high levels of serum triglyceride are at risk of:

A. pancreatitis

29. Which of the following is NOT a risk factor for acute pancreatitis?

A. mumps

B. hypercalcemia

C. hyperglycemia

D. fulminant hepatic failure

30. Which of the following is a diagnostic criteria for Kawasaki's disease?

A. fever lasting 5 days or more

31. diabetic woman presents with irregularly shaped plaques on the dorsal surfaces of the ankles, it's mostly :

A. necrobiosis lipoidica

32 . Angular stomatitis, seborrheic dermatitis, and glossitis are associated with deficiency of:

A. riboflavin

33. man has low mean cell volume (MCV), the best test for him is:
A. serum Fe
34. The most common cause of iron deficiency anemia in developed countries is:
A. gastrointestinal bleeding
35. While recovering from influenza, a 72 year old man develops pneumonia, chest X-ray shows patchy infiltrates, the most like cause is:
A. staphylococcus aureus
36. Sensory loss (numbness) of the dorsum of the foot with normal knee jerk and normal ankle jerk is caused by lesion in:
A. L4-L5 (L5root)
37. The most common cause of vascular neuropathy is:
A. diabetes mellitus
38. Hilar lymphadenopathy associated with erythema nodosum, fever and arthritis in a 20 year old female is most likely due to:
A. sarcoidosis
39. 40% to 50% of patients with gonorrhea have concomitant infection with:
A. chlamydia trachomatis
40. Patients with familial hypercholesterolemia typically have increased:
A. LDL cholesterol
41. Atypical chest pain with intermittent dysphagia and no abnormalities on endoscopy is typical of:
A. esophageal spasm
42. Pancoast is a tumor of:
A. lung
43. Chlamydia is classified as a:
A. bacteria
44. During initial 24 hours of acute pancreatitis, which of the following indicates poor prognosis?
A. serum calcium of 10 mg/dl
B. blood glucose of 180 mg/dl
C. arterial Po₂ of 80 mm/Hg
D. decrease in hematocrit (less than 10%)

45. The most common type of carcinoma of pancreas:

- A. adenocarcinoma arising from the ductal cells

46. A large palpable gallbladder is associated with:

- A. Courvoisier's sign

47. Gastric carcinoma :

- A. spreads first to the duodenum
- B. is increasing in incidence many countries
- C. is squamous cell carcinoma in most cases
- D. usually occurs at the pylorus and in the antrum

48. The most common clinical finding in toxoplasmosis is:

- A. lymphadenopathy

49. Following are risk factors for carcinoma of colon, EXCEPT:

- A. acromegaly
- B. sarcoidosis
- C. increasing age

50. Peutz-28 year old man has chest pain and fever, you would recommend:

- A. blood culture

51. The most common cause of bacterial pneumonia is:

- A. streptococcus pneumonia

52. A young man presents with recurrent acute hepatitis and hemolysis, the most likely diagnosis is:

- A. Wilson's disease.

53. Cirrhosis of the liver is associated with:

- A. Whipple's disease
- B. Dupuytren's contracture

54. 72 year old man complains of severe whirling vertigo when first lying down in bed at night, the most likely diagnosis is:

- A. benign positional vertigo

55. Babinski reflex is present in:

- A. lower motor neuron lesion
- B. upper motor neuron lesion

56. The most common type of bronchial carcinoma is:

- A. large cell
- B. small cell
- C. squamous
- D. adenocarcinoma

57. The LEAST common type of bronchial carcinoma is:

- A. adenocarcinoma

58. Hypercalcemia is most likely to be caused by bronchial carcinoma type:

- A. squamous

59. Bronchial carcinoma is associated with:>> small cell

- A. ectopic ACTH secretion
- B. inappropriate ADH secretion
- C. both

60. A lung cancer patient has hyponatremia, the most likely type of cancer is:

- A. small cell carcinoma

61. 28 year old woman presents with erythematous pustules on face, trunk, and groin, the most likely diagnosis is:

- A. staphylococcal folliculitis

62. 26 year old man presents with umbilicated, flesh-colored papules on face and anogenital area, the most likely diagnosis is:

- A. molluscum contagiosum

63. A cluster of vesicles in a dermatomal distribution is typical of:

- A. herpes zoster

64. 52 year old man presents with hematuria, his kidneys are enlarged and his blood pressure is high, the most likely diagnosis is:

- A. polycystic kidney disease

65. Ocular disorders in cluster headache may include all of the following. EXCEPT:

- A. ptosis
- B. miosis
- C. proptosis
- D. eyelid edema

66. What is the most likely cause of sudden onset of 3rd or 6th cranial nerve palsy with normal pupil size in a 62 year old woman?

A. diabetes mellitus

67. .25 year old man presents with linear, red-brown streaks proximal nail beds, the most likely diagnosis is:

A. splinter hemorrhages

68. The most common cause of viral conjunctivitis is:

A. adenovirus

70. The most common type of cataract is:

A. senile

71. Hyperpigmentation is a clinical feature of:

A. Addison's disease

72. Pheochromocytoma is characterized by:

A. hypertension

73. The most common cause of death in treated diabetic patients is:

A. atherosclerosis

74. The most common symptom in patients with infective endocarditis is:

A. fever

75. The most common clinical finding in children with infectious mononucleosis is:

A. lymphadenopathy

76. Hyperprolactinemia is NOT caused by:

A. methyl dopa

B. haloperidol

C. bromocriptine

D. metoclopramide

77. 32 year old woman is diagnosed with hyperthyroidism, the most likely cause is:

A. Graves' disease

78. Hypothyroidism is NOT associated with:

A. anemia

B. vitiligo

C. menorrhagia

D. lymphadenopathy

79. A young man presents with severe hemoptysis and rapidly progressive renal failure, the most likely diagnosis is:

A. Good pasture's syndrome

80. Blood urea nitrogen (BUN) is increased in:

A. corticosteroid therapy

81. Which of the following is NOT a complication of chronic renal failure?

A. pericarditis

B. hypokalemia

C. metabolic acidosis

D. congestive heart failure

82. Hemangiomas of the liver:

A. are best diagnosed by arteriography

83. The best single test for the classification of ascites into portal hypertensive and non-portal hypertensive causes is:

A. serum ascites-albumin gradient (SAAG)

84. Glabellar tap sign (tapping the forehead causes repetitive blinking) occurs in:

A. Parkinson's disease

85. Inequality in the size of red cells is called:

A. anisocytosis

86. Marked irregularity in the shape of red cells is called:

A. poikilocytosis

87. What is the most common cause of iron deficiency anemia in a 62 year old man?

A. Bleeding

88. Megaloblastic anemia is characterized by reduced:

A. hemoglobin

89. Which of the following is NOT a diagnostic feature of beta-thalassemia major?

A. erythroblastosis

C. raised levels of Hb F

B. presence of Hb S

D. profound hypochromic anemia

90. Which of the following bone tumors is more common in females than in males?

A. chondrosarcoma

91. Bleeding time is increased in:

- A. Von Willibrands disease

92. Patients with Von Willibrands disease have normal:

- A. PT

93. 36 year old woman complains of generalized pruritus, antimitochondrial antibody is positive, the most likely diagnosis is:

- A. primary biliary cirrhosis

94. Which of the following is a (salt-craving) disease?

- A. Addison's disease

95. Which of the following is decreased in hyperthyroidism?

- A. T3
- B. TSH

96. Hyponatremia does NOT occur in:

- A. diabetes insipidus
- B. cirrhosis of the liver
- C. congestive heart failure
- D. syndrome of inappropriate antidiuretic hormone (SIADH)

97. The most common cause of intestinal fistula is:

- A. iatrogenic

98. 100% oxygen by mask is given to victims of:

- A. carbon monoxide (Co) narcosis

99. HDL (normal > 40) is decreased by:

- A. smoking

100. Atherosclerosis is associated with:

- A. low HDL

1. The most common presenting symptoms in patients with pulmonary embolism are:

- A. sweats and hemoptysis
- B. cyanosis and syncope
- C. dyspnea and chest pain
- D. pedal edema and fever

2. The most common testicular tumor associated with cryptorchidism is:

- A. teratomas
- B. lymphomas
- C. seminomas
- D. embryonal carcinomas

3. Hyperostosis is associated with toxic effect of:

- A. vitamin A
- B. vitamin C
- C. vitamin B6
- D. vitamin B12

4. Urethral obstruction is most likely to occur in:

- A. Crohn's disease
- B. cervical cancer
- C. prostatic hypertrophy
- D. polycystic ovary disease

5. The most common immunoglobulin in a healthy adult is:

- A. IgG
- B. IgA
- C. IgM
- D. IgD

6. The most common cause of gas gangrene is:

- A. c. tetani
- B. c. difficile
- C. c. perfringens

7. The most common esophageal cancer is:

- A. adenocarcinoma
- B. squamous cell carcinoma

8. 26 year old man presents with a painful, encapsulated nodule near the nail, the most likely diagnosis is:

- A. melanoma
- B. glomus tumor
- C. basal cell carcinoma

9. Use of unpasteurized dairy products is associated with:

- A. brucellosis
- B. shigellosis

C. scarlet fever

10. Peritoneal lavage is contraindicated in:

- A. abdominal rigidity
- B. pneumoperitoneum
- C. both

11. The most likely cause of recurrent pruritic rashes in an asthmatic woman is:

- A. psoriasis
- B. insulinoma
- C. atopic dermatitis

12. Which of the following is a glycogen storage disease?

- A. Cori's disease
- B. Whipple's disease
- C. Carrison's disease
- D. Von Willebrand's disease

13. High cardiac output is associated with:

- A. psoriasis
- B. Paget's disease of the bone
- C. both
- D. neither

14. 14 year old boy presents with chest pain, his ECG and blood enzymes are normal, the most likely diagnosed is

- A. myocarditis
- B. pleural effusion
- C. musculoskeletal strain
- D. ischemic heart disease

15. Chronic pancreatitis is characterized by the triad of pancreatic calcification, diabetes mellitus and:

- A. steatorrhea
- B. hepatic cirrhosis
- C. elevated serum amylase

16. Which of the following is due to long-term reflux and is precancerous?

- A. acute esophagitis
- B. Barrett's esophagus
- C. Mallory-Weiss syndrome

17. Plummer-Vinson triad consists of esophageal webs, atrophic glossitis and:

- A. peptic ulcer
- B. rheumatoid arthritis
- C. hypochromic microcytic anemia

18. The most common primary intracranial neoplasms are:

- A. gliomas
- B. meningiomas
- C. pituitary adenomas

19. The most common primary site of metastasis to the testis is:

- A. lung
- B. kidney
- C. prostate
- D. gastrointestinal tract

20. Which of the following is the commonest neoplasm in 20 to 35 year old men?

- A. colon cancer
- B. prostatic cancer
- C. testicular cancer
- D. pancreatic cancer

21. The most common type of intramedullary tumor is:

- A. ependymoma
- B. astrocytoma
- C. oligodendroglioma
- D. glioblastoma multiforme

22. What percentage of patients with acute myocardial infarction die before reaching a hospital?

- A. 1%
- B. 5%
- C. 20%
- D. 40%

23. Patients with hypertension and hypokalemia are likely to have also an adenoma in the:

- A. lung
- B. liver
- C. prostate
- D. adrenal gland

24. What is the most common presentation of Cushing's syndrome is:

- A. striae
- B. obesity
- C. hirsutism
- D. hypertension

25. Ecthyma is an ulcerative form of:

- A. impetigo
- B. pertussis
- C. epiglottitis

26. Pseudogout most commonly occurs in individuals aged:

- A. 10 years or younger
- B. 20 to 30 years
- C. 40 to 50 years
- D. 60 years or older

27. The most common cause of myocardial infarction is:

- A. vasculitis
- B. embolic occlusion
- C. prolonged vasospasm
- D. prolonged myocardial ischemia

28. The main route of elimination of digoxin from the system is:

- A. renal
- B. hepatic

29. Activated charcoal is contraindicated in:

- A. phencyclidine overdose
- B. glutethimide overdose
- C. acetaminophen overdose
- D. tricyclic antidepressant overdose

30. Muscle weakness is a clinical feature of:

- A. dermatomyositis
- B. polymyalgia rheumatica
- C. both
- D. neither

31. The most common electrolyte abnormality observed in a general hospitalized population is:

- A. hyperkalemia
- B. hyponatremia
- C. hypomagnesemia

32. Myasthenia gravis is commonest in young women with HLA type:

- A. A3
- B. B8
- C. B27
- D. DR3

33. ECG in hyperkalemia shows:

- A. prominent U waves
- B. depressed ST segments
- C. biphasic QRS-T complexes
- D. decreased T wave amplitude

34. What percentage of patients of patients with Zollinger-Ellison develop peptic ulcer?

- A. less than 10%
- B. 20% to 40%
- C. 60% to 80%
- D. more than 90%

35. Weakness of the proximal muscles of the limbs in patients with lung cancer is most likely due to:

- A. scleroderma
- B. multiple sclerosis
- C. myasthenic syndrome (Lambert-Eaton syndrome)

36. Renin-angiotensin mechanism regulates the secretion of:

- A. insulin
- B. aldosterone
- C. vasopressin

37. Which of the following is a major manifestation of rheumatic fever?

- A. fever
- B. arthralgia
- C. leukocytosis
- D. erythema marginatum

38. Hyperamylasemia can occur in'

- A. parotitis
- B. intestinal obstruction
- C. both
- D. neither

39. A patient with Plummer-Vinson syndrome develops dysphagia, the most likely cause is:

- A. achalasia
- B. esophageal web
- C. esophageal cancer
- D. esophageal diverticulum

40. Patients with Plummer-Vinson syndrome have iron deficiency anemia, glossitis and:

- A. meningitis
- B. esophageal web
- C. intestinal polyps
- D. hairy cell leukemia

41. 72 year old man presents with sudden, severe abdominal pain, endoscopy shows ulcers in the descending colon and splenic flexure, the most likely diagnosis is:

- A. ischemic colitis
- B. Crohn's disease
- C. splenic rupture
- D. ulcerative colitis

42. Initial work-up for a 62 year old man who presents with sudden onset of severe chest pain may include all of the following EXCEPT:

- A. ECG
- B. cardiac enzymes
- C. complete blood count
- D. respiratory function tests

43. Distended neck veins (increased venous pressure) occurs in:

- A. massive hemothorax
- B. tension pneumothorax
- C. both
- D. neither

44. Intellectual deterioration with tremors, ataxia, rigidity and dysarthria in a 16 year old male is most likely due to a defect in hepatic excretion of:

- A. iron
- B. gold
- C. silver
- D. copper

45. 54 year old man present with excessive skin pigmentation and impotence , the most likely diagnosis is:

- A. Wilson's disease
- B. hemochromatosis
- C. Cushing's syndrome

46. Which of the following is usually increased in septic shock?

- A. cardiac output
- B. systemic vascular resistance
- C. pulmonary capillary pressure
- D. all of the above

47. Gynecomastia is LEAST likely to occur in patients with:

- A. thyrotoxicosis
- B. adrenal carcinoma
- C. myasthenia gravis
- D. Reifenstein's syndrome

48. Insulinomas:

- A. cause hypoglycemia
- B. usually occur before 40 years of age
- C. occur predominantly in males
- D. are malignant in 85% of cases

49. Which of the following is a risk factor for acute pancreatitis?

- A. caffeine
- B. hyperlipidemia
- C. both
- D. neither

50. Treponema pallidum is classified as:

- A. virus
- B. fungi
- C. bacteria
- D. protozoa

51. Chancroid is caused by

- A. virus
- B. fungi
- C. bacteria
- D. protozoa

52. Scabies and pediculosis pubis are caused by

- A. fungi
- B. acarids

- C. bacteria
- D. protozoa

53. Mycoplasma hominis is classified as:

- A. virus
- B. fungi
- C. bacteria
- D. protozoa

54. Symptoms of major depression are similar to those of:

- A. psoriasis
- B. brain tumor
- C. osteoporosis
- D. hypothyroidism

55. Before starting a 32 year old woman on lithium, all the following tests should be done, EXCEPT:

- A. ECG
- B. creatinine
- C. barium enema
- D. pregnancy test

56. Which of the following is a side effect of tricyclic antidepressants?

- A. diarrhea
- B. urinary retention
- C. multiple vocal tics
- D. all of the above

57. Cataplexy is a:

- A. form of seizure
- B. form of neuralgia
- C. personality disorder
- D. sudden loss of muscle tone

58. The most common cause of neutropenia is:

- A. viral infection and bacterial sepsis
- B. marrow depression caused by drugs or radiation

59. Leukocyte alkaline phosphatase is low (less than 20) in:

- A. leukemoid reaction
- B. chronic myelogenous leukemia
- C. myelofibrosis with myeloid metaplasia
- D. all of the above

60. Severity of snake bite is affected by all of the following factors, EXCEPT:

- A. patient's age
- B. location of bite
- C. the size of the snake
- D. patient's immunization history

61. Ticks can be vectors for all of the following diseases, EXCEPT:

- A. Q fever
- B. tularemia
- C. borreliosis
- D. tuberculosis

62. The most common cause of uveitis is:

- A. idiopathic
- B. sarcoidosis
- C. Lyme disease
- D. rheumatoid arthritis

63. The most common constitutional symptom of Hodgkin's disease is:

- A. fatigue
- B. pruritus
- C. weight loss
- D. low-grade fever

64. Enlarged lateral ventricles with atrophy of the caudate nuclei is most likely to occur in:

- A. multiple sclerosis
- B. Parkinson's disease
- C. Huntington's disease

65. 28 year old woman presents with joint pain, fatigue, malar rash and patchy alopecia, the best management is:

- A. liver biopsy
- B. joint aspiration
- C. CD4 T cell counts
- D. antinuclear antibody test

66. Inability to sustain the muscles in one position is called:

- A. chorea
- B. dystonia
- C. athetosis
- D. myoclonus

67. Increased muscular tone that causes fixed abnormal posture is called:

- A. chorea
- B. dystonia
- C. athetosis
- D. myoclonus

68. Very brief, involuntary, random muscular contraction is called:

- A. chorea
- B. dystonia
- C. athetosis
- D. myoclonus

69. A patient walks with the legs spread widely apart, watching the ground carefully and making slapping sounds when feet contact the ground, this is typical of:

- A. parkinsonism
- B. cerebral palsy
- C. sensory ataxia
- D. cerebellar disease

70. A 32 year old man cannot stand or walk but can carry out natural movements of the limbs when lying in bed, this is called:

- A. chorea
- B. dystonia
- C. myoclonus
- D. astasia-abasia

71. Which of the following is NOT included in the characteristic ECG triad of Wolff-Parkinson-White syndrome?

- A. short PR
- B. wide QRS
- C. delta wave
- D. ST elevation

73. 36 year old woman presents with diplopia, ptosis, dysphagia, weakness in chewing, nasal speech and limb weakness, the most likely diagnosis is:

- A. achalasia
- B. scleroderma
- C. brain tumor
- D. myasthenia gravis

72. Bone age in familial short stature is:

- A. less than height age and less than chronologic age

- B. less than height age and more than chronologic age
- C. more than height age and more than chronologic age
- D. more than height age and equal to chronologic age

74. Which of the following is/are NOT enlarged in fragile X-syndrome?

- A. ears
- B. head
- C. penis
- D. testes

75. The most common cause of dysphagia in a 72 year old man is:

- A. achalasia
- B. scleroderma
- C. hiatal hernia
- D. esophageal cancer

76. Serum iron is increased in:

- A. sideroblastic anemia
- B. iron deficiency anemia
- C. anemia of chronic disease
- D. none of the above

77. Sideroblastic anemia is a microcytic, hypochromic anemia characterized by:

- A. normal TIBC
- B. decreased serum iron
- C. decreased serum ferritin
- D. all of the above

78. The first step of opioid treatment should be:

- A. clonidine
- B. withdrawal
- C. oral methadone
- D. Narcotics Anonymous participation

79. D-xylose tolerance test is normal in:

- A. celiac sprue
- B. Crohn's disease
- C. pancreatic insufficiency
- D. all of the above

80. Which of the following is a symptom of primary hyperparathyroidism?

- A. diarrhea
- B. areflexia

- C. tachycardia
- D. proximal muscle weakness

81. 46 year old man has Auer rods on his peripheral smear, the most likely diagnosis is:

- A. polycythemia vera
- B. acute myelocytic leukemia
- C. acute lymphocytic leukemia
- D. chronic lymphocytic leukemia

82. Hyperextension of the knee occurs in:

- A. equinovarus
- B. genu varum
- C. genu valgum
- D. genu recurvatum

83. The most likely cause of meningitis in patients with sickle cell anemia is:

- A. cytomegalovirus
- B. toxoplasma gonadii
- C. listeria monocytogen
- D. haemophilus influenza

84. Carpal spasm following inflation of blood pressure cuff for 2 minutes above the systolic blood pressure (positive Trousseau sign) occurs in:

- A. hypocalcemia
- B. hypoglycemia
- C. thyrotoxicosis
- D. Milk-alkali syndrome

85. Ulcerative colitis is suspected in:

- A. 32 year old woman with abdominal pain and vomiting
- B. 26 year old man with abdominal cramps and bloody diarrhea
- C. 58 year old man with abdominal cramps and anal fistulae
- D. 62 year old man with jaundice and a palpable abdominal mass

86. A brief lucid period is associated with:

- A. brain tumor
- B. epidural hematoma
- C. subdural hematoma
- D. subarachnoid hemorrhage

87. What is the best initial diagnostic method for a 38 year woman who presents with sudden onset of severe right upper quadrant pain?

- A. ultrasound
- B. nuclear scan
- C. laparotomy
- D. tomography

88. Rose spots (small, pale red, blanching macules on chest and abdomen) are associated with:

- A. typhoid fever
- B. Hodgkin's disease
- C. infectious mononucleosis

89. 72 year old man complains of tremors, nervousness, and weight loss, his ECG shows atrial fibrillation, the most likely diagnosis is:

- A. anxiety
- B. hyperthyroidism
- C. Parkinson's disease
- D. mitral valve prolapse

90. Toxic shock syndrome (TSS) is a:

- A. viral disease
- B. bacterial disease
- C. rickettsial disease
- D. none of the above

91. The most important index to monitor in patients with hypovolemic shock is:

- A. heart rate
- B. serum calcium
- C. urinary output
- D. serum potassium

92. The most appropriate initial step for a 30 year old woman with palpitations and a prominent mid-systolic click is:

- A. Holter monitor
- B. Echocardiography
- C. coronary angiography
- D. graded exercise testing

93. Erysipelas is almost always caused by:

- A. group A streptococci
- B. staphylococcus aureus
- C. haemophilus influenzae
- D. clostridium perfringens

95. 26 year old man with sickle cell anemia develops osteomyelitis, the most likely cause is:

- A. salmonella**
- B. Escherichia coli
- C. staphylococcus aureus
- D. clostridium perfringens

96. Scarlet fever is caused by:

- A. virus
- B. fungi
- C. bacteria**
- D. protozoa

97. 56 year old man presents with symptoms of increased intracranial pressure due to malignancy, the most likely cause is:

- A. Glioma**
- B. meningioma
- C. pituitary tumor
- D. metastatic tumor

98. Which of the following brain tumors are extremely radiosensitive and do not require surgery?

- A. gliomas
- B. meningiomas
- C. schwannomas
- D. pinealomas (germinomas)**

99. 46 year old woman develops scalp redness and blisters each time she dyes her hair, the most likely diagnosis is:

- A. urticaria
- B. psoriasis
- C. atopic dermatitis
- D. contact dermatitis**

100. Weakness of the quadriceps muscle with absent tendon reflex is associated with which of the following nerve roots?

- A. L3
- B. L4**
- C. L5
- D. S1

1. Positive Trousseau and Chvostek signs can be found in patients with:

- A. hypocalcaemia
- B. hypomagnesaemia
- C. both

2. What is the most common cause of a coin lesion seen on a chest X-ray?

- A. bronchogenic carcinoma -

3. 26 year old man presents with hemoptysis, the initial step in the management is:

- A. bronchoscopy-

4. What is the most common cause of death that follows a myocardial infarction?

- A. ventricular fibrillation-

5. After the administration of a general anesthetic, the patient develops fever of 41.2°C and muscle rigidity, the most likely diagnosis is:

- A. malignant hyperthermia-

6. Following may cause malignant hyperthermia, EXCEPT:

- A. lidocaine
- B. gallamine
- C. ethyl chloride
- D. dantrolene sodium

7. The most common type of malignant melanoma is:

- A. superficial spreading -

8. The most common immunoglobulin found in myeloma is:

- A. Ig G -

9. The classical triad of symptoms for renal cell carcinoma are flank mass, hematuria and:

- A. pain –

10. The most common ocular disorder associated with galactosemia is:

- A. cataracts –

11. Which of the following is a defect in the proximal tubules of the kidney that permits the loss of phosphate?

- A. Cystinosis-

12. Toxoplasmosis is caused by:

- A. protozoa-

13. In patients with diabetes mellitus, glucagonoma should be considered in the presence of:

A. diffuse skin rash -

14. 42 year old man presents with a 2 cm thin-walled, bluish mass on the floor of the mouth, the most likely diagnosis is:

A. ranula-

15. What percentage of lung cancers are small cell cancers?

A. 20% -

16. The most common testicular germ cell tumor is:

A. seminoma -

17. 90% of erythropoietin is produced in the:

A. kidney -

18. Posterior column degeneration occurs in:

A. cobalamin deficiency -

19. The most common cause of cobalamin deficiency is:

A. pernicious anemia -

20. Glutamic acid is replaced by valine in:

A. sickle cell disease -

21. Tissue damage caused by iron overload is associated with

A. hemochromatosis-

22. PT, PTT, and fibrin degradation products (FDPs) are all increased in:

A. severe liver disease

B. disseminated intravascular coagulation

C. both

23. The most common presentation of a sinonasal tumor is:

A. unilateral nasal obstruction -

24. The most common site of a sinonasal tumor is:

A. maxillary sinus -

25. The most common site of oropharyngeal cancer is:

A. tonsils-

26. Most of the nasopharyngeal malignancies are:

A. squamous cell carcinomas-

27. The most common presentation of nasopharyngeal carcinoma are:

A. unilateral neck mass and aural fullness-

28. What percentage of parotid tumors are benign?

A. 80% -

29. Which of the following is a risk factor for esophageal cancer?

A. achalasia

B. lye stricture

C. Barrett's esophagus

D. all of the above

30. Which of the following is most likely to be a risk factor for the develop of hepatoma?

A. hemochromatosis -

31. Which of the following signs is associated with pancreatic cancer?

A. Trousseau's sign (migratory thrombophlebitis)

B. Courvoisier's sign (palpable right upper quadrant mass)

C. Sister Mary Joseph's sign (enlarged periumbilical lymph node)

D. all of the above

32. Cushing's syndrome is characterized by:

A. hematuria

B. hypotension

C. facial plethora

D. cold intolerance

33. Primary aldosteronism is characterized by:

A. hypotension

B. hyponatremia

C. hyperkalemia

D. metabolic alkalosis

34. Which of the following is a well-known risk factor for testicular cancer?

A. orchitis

B. hydrocele

C. cryptorchidism

35. Diagnosis of testicular cancer can be confirmed by:

A. orchiectomy-

36. Compared with testicular nonseminomas, testicular seminomas are more:

A. radiosensitive-

37. The most aggressive testicular germ cell tumor is:

A. choriocarcinoma -

38. Renal cell carcinomas are:

A. radiosensitive

B. chemosensitive

C. both

D. neither

39. The incidence of melanoma is increased in people who:

A. work primarily outdoors -

40. Sublingual melanoma associated with pigmentation of proximal nail fold is known as:

A. Hutchinson's sign -

41. The most common site of soft tissue sarcoma is:

A. lower extremity -

42. Ewing's sarcoma is most likely to occur in a:

A. 14 year old, Caucasian male -

43. Wernicke's encephalopathy is a medical emergency which requires immediate administration of:

A. thiamine - >> vit B1

44. Amyotrophic lateral sclerosis is characterized by:

A. motor weakness -

45. Degeneration of the spinal cord is associated with deficiency of:

A. folic acid -

46. Which of the following vulvar disorders seen more commonly in obese and diabetic women?

A. intertrigo -

47. 26 year old female presents with scaly macular patches in the groin area, Wood's lamp shows coral-red fluorescence, the most likely diagnosis is:

A. erythrasma -

48. The definitive treatment for contact dermatitis is:

A. avoid the causative agent -

49. 25 year old male presents with gross hematuria following a viral infection, the most likely type of diagnosis is:

A. IgA nephropathy (Buerger's disease)-

50. The triad of abnormal gait, dementia, and urinary incontinence occurs in:

A. normal pressure hydrocephalus -

51. The most common cause of end-stage renal failure is:

A. diabetic nephropathy -

52. Inferior wall of the heart is supplied by which of the following arteries?

A. circumflex

B. left coronary

C. right coronary

D. left anterior descending

53. 32 year old woman with hyperthyroidism presents with palpitations, her ECG would most likely show:

A. atrial fibrillation-

54. Tactile fremitus is increased in:

A. pneumonia-

55. On the side of a large pleural effusion you would most likely expect to have:

A. absent egophony

B. hyperresonant on percussion

C. increased tactile fremitus

D. all of the above

56. Hyperresonant on percussion typically occurs in:

A. pneumonia

B. pleural effusion

C. both

D. neither

57. Which of the following is a febrile syndrome associated with animal exposure?

A. Q fever

B. brucellosis

- C. leptospirosis
- D. all of the above

58. Which of the following is implicated in cold hemolytic anemia's?

- A. IgM -

59. 46 year old man develops frequent, involuntary jerks of the arms, his father had the same symptoms and died at the age of 42, the most likely diagnosis is:

- A. Huntington's disease –

60. Following disorders may overlap to form the spondyloarthritis, EXCEPT:

- A. Behcet's disease
- B. Whipple's disease
- C. Reiter's syndrome
- D. Huntington's disease

61. 32 year old obese woman suffers from a progressive right knee pain, the most likely diagnosis is:

- A. osteoarthritis -

62. Obstruction of left main bronchus causes:

- A. compensatory emphysema of right lung -

63. Following are extra-articular disorders associated with rheumatoid arthritis, EXCEPT:

- A. glaucoma
- B. Felty's syndrome
- C. Caplan's syndrome
- D. Edward's syndrome

64. Patients with systemic lupus erythematosus most commonly present with:

- A. fatigue and arthralgia -

65. Rash or calcinosis occurs in:

- A. dermatomyositis -

66. The most common form of vasculitis is:

- A. hypersensitivity vasculitis -

67. The most commonly involved organs in Wegener's granulomatosis are:

- A. lung and Para nasal sinuses -

68. The most common presentation of giant cell arteritis is:

A. headache -

69. 26 year old man presents with painful, shallow, necrotic-base ulcers in the groin with suppurative lymphadenopathy, the most likely cause is:

A. haemophilus ducreyi- >> cause chancroid "Gram -ve coccobacillus"

70. In granuloma inguinale:

- A. the initial lesion is painful
- B. lymphadenopathy is usually present
- C. both
- D. neither

71. Duodenal ulcers are more frequent:

- A. than gastric ulcers
- B. in women than in men

72. Hyperventilation is associated with:

- A. respiratory alkalosis-

73. Normocytic anemia with increased total iron binding capacity and low serum iron typically occurs in:

- A. chronic disease anemia -

74. Microcytic, hypochromic anemia with low total iron binding capacity and low serum iron typically occurs in:

- A. iron deficiency anemia –

75. Following are disorders in which serum gastrin level is indicated, EXCEPT:

- A. dysphagia and chest pain
- B. chronic unexplained diarrhea
- C. enlarged gastric folds on x-ray
- D. family history of peptic ulcer

76. Patients with chronic peptic ulcer disease and unexplained diarrhea are most likely to have:

- A. elevated serum gastrin levels –

77. The only two antibodies that fix the complement are IgG and:

- A. IgM -

78. A patient has anemia described as microcytic, hypochromic with normal serum iron and TIBC, the most likely type is:

- A. thalassemia -

79. Serum transferrin levels are typically elevated in:

A. iron deficiency anemia-

80. The most common lymphadenopathy site in patients with Hodgkin's disease is:

A. cervical-

81. The LEAST common histologic group of Hodgkin's disease in children is:

A. mixed cellularity

C. lymphocyte depleted

B. nodular sclerosis

82. The most common adverse effect of clindamycin involves

A. gastrointestinal system-

83. A patient has hypertension and hypokalemia, the next step should be:

A. plasma renin and aldosterone -

84. Hepatic cysts occur in 30% of patients with:

A. adult kidney polycystic disease-

85. Patients with Bartter's syndrome have:

A. hypokalemia

C. decreased aldosterone secretion

B. hypertension

D. decreased plasma renin activity

86. Hypokalemia, normal blood pressure, elevated aldosterone secretion and plasma renin activity are features of:

A. Bartter's syndrome-

87. Which of the following kidney stones is more common in females than in males?

A. calcium stones

B. uric acid stones

C. struvite stones

88. The most common complication of frontal sinusitis is:

A. osteitis of the frontal bone -

89. Choanal atresia occurs unilaterally in:

A. 75% -

90. The most common cause of nasal furuncle is:

A. s. aureus-

91. The most common cause of peritonsillar cellulitis or abscess (quinsy) is:

A. beta hemolytic streptococci-

92. The most common cause of Ludwig's angina is:

A. group A streptococci -

93. About 70% of acute cervical adenitis are due to:

A. beta hemolytic streptococci -

94. The most common type of primary liver carcinoma is:

A. hepatocellular-

95. The most common neurologic finding in rheumatoid arthritis is:

A. carpal tunnel syndrome-

96. Only one huge vessel arteries supplies both the systemic and pulmonary arterial beds in:

A. persistent truncus arteriosus-

97. The most common valvular residual of acute rheumatic carditis is:

A. mitral insufficiency-

98. Retrosternal chest pain made worse by deep inspiration and decreased by leaning forward with ECG showing ST segment elevations occurs in:

A. pericarditis –

99. Varicella-zoster virus causes:

A. shingles

B. chickenpox

C. both

100. Stooped posture, tremor, hypokinesia, and rigidity are associated with:

A. Lewy bodies