**FINAL 2023 / NABED**

1) 19 year old, with lumbosacral pain, wors in the morning and improve with exercsise; The Best investigation to confirm the diagnosis : HIP 27

2) One of the following is incorrect about aortic dissection : Aortic dissection of ascending aorta can be treated medically

3) One side efect of ribovirin treatment: teratogenic

4) All are features of crohn’s except: Caseating granuloma

5) FEV1= 77% , FEV1 change=13 , FEV1/FVC= 65%, diagnosis? Asthma

6) Cytokines responsible for prognosis of RA : Il-6 TNF alpha

7) One not required to be ruled out before diagnosis of cardiomyopathy : Chemotherapy and illicit drugs

8) 55 year old with polyuria, polydipsia and abdominal pain for 3 months ; Increased ca, decreased phosphate, normal pth, what is the cause of hypercalcemia? milk alkali syndrome

9) mitral stenosis

10) One incorrect regarding motral valve : Infective endocarditis is the most common cause of mitral stenosis

11) Which of the following best fits diagnosis of dm? fasting 130 and glucose tolerance 210

12) Iv drug user, cavitating pneumonia, bilateral , leukocytosis, Type of pneumonia is?!

-Klebsiela -TB -staph ????????

13) All are C/I to kidney biopsy except? uncontrolled hypertension

 14) 65 male, sweating and palpitation for 2 months, increased free T3, T4, TSH , with eye manifestations and small goiter, What Next to do? pituitary MRI

15) Incorrect matched pairs (regarding murmurs): ?????????

-Pulmonary stenosis...diastolic

-Pulmonary regurge....systolic

-Aortic stenisis....diastolic

16 ) All are correctly matched except (regarding thyroid)?! High TSH normal T4 T3 - > TSH secreting adenoma

17) Pruritis is clinical manifestation to only one of the following: Polycythema vera

18) Typical feature of IBS include:

-Associated with psychiatric symptoms -Alternating bowel habits habits ✅

19) Increased retc. count in all except: Aplastic anemia

20 ) Least common cause of upper gi bleeding: aortoduodenal fistula

21) H.pylori spread via : feco-oral

22) Incorrect regarding atrial flutter: ???????

- Has risk of Thromboembolism like atrial fibrillation

- ecg typical saw tooth

 - Beta blocker unaffected in treatment

- Atrial rate 300

23) 62 male, current smoker, follow up for breathlessness from 6 months , FEV1=90 ,After 5 years, FEV1=50 ,Treatment????????

- start salbutamol - smoking cassation

24) Wrong about treatment of crohn :

Key enzyme involved in methotrexate is TPMT

25 ) One falseregarding pulmonary htn: خيارات هذا السؤال موجودة بالأرشيف

26) Most common cause of acute kidney injury: dehydration

27) Cause of transudative pe: Renal failure

28) Hepatitis B, one of the following is false : HBcAg

29) Aure rods found in one : Acute myelocytic leukemia

31) Poor prognosis indicators in glomerular diseases except: female

32) True about stable angina?

clinical presentation with risk factors enough to start medical treatment without further investigation

33) 54 y male, presented with dyspne, large pulse volum+ diastolic murmur in left 3 rd intercostal space, diagnosis? aortic regurgitation

34) Poor prognostic factor in pneumonia:

-WCC= 17000 -Bp= 110/70 -RR=35 ✅ -Rigors -Temp= 39

35) Pericarditis on ecg: concave st elevation

36) Common symptome of kidney disease (one): hypertension

37) Patient positive hlaB27 suffering from low back pain, most common extraarticular manifestation?

Ibd✅

38) all of the following areECG finding in acute inferior STEMI except :

a. sinus tachycardia ✅

b. sinus bradycardia

c. LBBB

39) Splenomegaly is common clinical sign in all except : sickle cell anemia

40) Behcet, all true except : Erythema nodosum indicates severity

41) Most common mode of transmission of hepatitis C nowadays:

Intravenous drug abuse ✅

42) All are part of diagnostic criteria of hyperosmolar coma except:

- bicarbonate 15-18 ✅

- Ph<7.3

43) Mallory weiss tears are ? superficial tears produced by excessive vomiting and retching

45) long case .. the patient is positive anticentromere the dx is : CREST syndrome

46) Not typically filtered by kidney: protein

47) Drug-S.E; all correctly matched except: pioglitazone with fatty liver

48) Oppurtunistic infection in HIV : Candidiasis

49) One false about minimal change disease : irreversible damage of podocyte

50) Case of TB present with 3 episodes of haemoptysis, CXR shows cavity with mass and crescent of air around, diagnosis? Aspergilloma

51) synovial fluid analysis for pt with gout : -ve birefringent needle shaped crystals

52) Hormon regulate body fluid balance by controlling urine production: ADH

53) All ass/w lower than expectedlevels of HbA1c, except : .iron deficiency anemia✅

54) Celiac pt., survy of osteoperosis done by: bone densometry

55) not useful in long term mx of varicral bleeding

- IV vc ✅ - TIPS - sclerotherapy - banding

56) 25 pregnant, increased TSH, normal T4, Which one is an indication to start levothyroxin : Pregnancy

57) Clinical presentation of sarcoidosis, Best way to confirm the diagnosis?

- kveim test✅

- Serum ACE

- tuberculine skin test

- biopsy

58) All are causes of malabsorption except: ulcerative colitis

59) Normal GFR is : 90-120

56) All true about DM except:

- Start screening micro vascular complications for pt with type 1 DM at time of diagnosis

57) Indication of blood transfusion in second day in upper gi bleeding:

-Pt with Hb 6.5

-pt with Hb 10.5 has HF ✅

58) Investigation would differentiate between hypersplenism/ aplastic anemia : reticulocyte count

59) Young female with Family history of mi, Her ecg indicates inferior mi, -ve troponin, Manegment?

- Morphine, o2, nitrate

-Repeat troponin ✅

- fibrinolytics

56 ) Management of adrenal crisis except:

1. iv fluid

2. iv hydrocortisone

3. Fludrocortisone✅

4.iv antibiotics

5.iv glucose

57) One wrong about peripartumcardiomyopathy: all of them will have full recovery

58) All diseases can't detect by HbA1c

-Beta thalassemia -G6pd -Hereditary spherocytosis -IDA✅

59) Warfarin is an oral.. ???? Anticoagulant that prevents conversion of vitamin K to it's active form

60) Wrong about heparin : Antidote is vit. K

61) Patient with PaO2 56 and PaCO2 62 pH 7.13 : Decompensated type 2 respiratory failure

62) Worrying with RS ?

Elevated CO2✅

Normal

Slightly low O2

63) Case of asthma with ABG values, what would be a concerning reading of ABG?

Elevated carbon dioxide levels

64) patient with symptoms of pneumonia , CURB65 =3 , treatment is :

macrolides and co-amoxocllave

65) Mostly with kidney disease:

Diarrhea

HTN✅

Blurred vision

Chest pain

65) SLE Patient with flare:

ds-dna ab

ESR,

complement✅)

66) Pregnant with hypothyroidism, TSH =7 …. Why she treated? Pregnancy status

67) Not used to confirm H.pylori eradication : IgG

68) Pt with DM and his skin is tanned : hemochromatosis

69) Cause of seronegative arthritis, one of extra articular manifestations :

1.anterior uveitis✅

2.IBS

70) Patient with intermittent headache, high ESR , investigation : temporal artery biopsy

71) cushing syndrom , false: Serum cortisol is the best initial test

72) Wrong about hypopitutirism :

- Clinical features ass with type and severity of hormones

- most common cause is autoimmune hypopitutarism✅

73) Iv drug endocardities: Staph in tricusped valve

74) Paresthesia in hand and macocytic anemia with positive schills test: Pernicious anemia

75) All the following are C.I to kidney biopsy except: renal transplants

76) bleeding when brushing teeth from gum plus prolonged BT and ptt: (VWD)

77) Low pao2 and high paco2 what can be the cause:

Kyphoscoliosis✅

Viral pneumonia

Bacterial pneumonia

78) Pt after hip replacement surgery, his CXR has wedge shape opacity?

-Atelectasis

-Pulmonary infarction✅

79) Wrong about nephrotic syndrome:

-The cause all in the glomerulus✅

-.>3.5 g

-result in edema and hypoalbuminemia

-renal biopsy is rarely involved in investigation

80) Known case of copd present with acute dyspnea from 90 minutes...on examination there is decrease breath sounds and tactile fremitus in left and tracheal shift to right

Dx:

Left pneumothorax✓✓✓

Pleural effusion

81) Tb case. What’s the treatment?

Isoniazid, rifampicin, ethambutol, pyrazinamide for 2 months// then 2 drugs of them for 4 months

82) Patient suffering from pain in sacroiliac joint, investigation to confirm diagnosis?

-xray for sacroiliac joint

-hla-B27 test✅

83) RA case. Not from extraarticular manifestations?

Anemia

Pericarditis

Thrombocytopenia✓

84) Polyuria and polydipsia ………. ? History of lithium intake

85 ) all the following coorrectly matched exceopt:

 -Sick sinus:bradycardia with sinus pause

-Atrial flutter: tachycardia withr egular narrow qrs complex

-Sinus brady:asymptomatic and physiolagical during sleep

-A fib:irregular without p wave

-V tach:irregular tachy with wide qrs complex ✅

86) In systemic arterial hypertension. One statement is falseSelect one:

a. Kidneys regulate blood pressure by controlling intravascular volume.

b. Cardiac complicationsof HTN include diastolic disfunction and coronary artery disease.

c. HTN is generally asymptomatic and easily diagnosed.

d. Secondary hypertension HTN is usually familial ✅

e. Hyperglycemia is a known side effect of frusemide

87) The following statements are true regarding HOCMP except:Select one:

a. Non-dilated LV with systolic anterior motion of the mitral valve.

b. Tachyarrhythmias are well tolerated in HOCM. ✅

C. ischemic chest pain in HOCM is multifactorial.

d. Patients with HOCM are usually asymptomatic.

e. Betablockers are important in the management of HOCM.

89) In dilated cardiomyopathy one of the following is true:

a. Pathologically in DCMP the left ventricle is dilated with significant fibrosis and normal weight.

b. Recovery from DCMP with treatment is common.c. Peripartum CMP always carries poor prognosis.

d. Endomyocardial biopsy is sensitive and specific for diagnosis.

e. LBBB is a common finding in DCMP. . ✅

90) In aortic stenosis all are true except:

a. Symptoms occur when aortic valve area is ≤ 1 cm2.

b. Pressure gradient decreases when LV systolic function declines ✅

c. Grade 5/6 systolic murmur indicates severe disease.

d. The onset of angina indicates poor prognosis.

e.LV ejection fraction < than 50% is class 1 indication for AVR.