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Macleod's

15th Edition



Clinical  
Examination

ARCHIVE

Introduction to clinical years

SUBJECT :

CVS

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الطب الجراحي  
لجنة



1. which murmur commonly radiates to the axilla? Select one:

- a. Tricuspid stenosis
- b. Mitral regurgitation
- c. Aortic stenosis
- d. Aortic regurgitation
- e. Mitral stenosis

Ans. b

2. Symptoms of acute arterial occlusion are all EXCEPT? Select one:

- a. Increased pulse on peripheral arteries
- b. Skin pallor
- c. Muscle pain
- d. Skin paresthesias
- e. Muscle paralysis

Ans.a

3. One of the followings is NOT correct statement concerning intermittent (arterial) claudication? Select one:

- a. Is clinically diagnosed as rest pain
- b. Is relieved with short periods of rest
- c. Pain is located in the calves (less frequently in the buttocks or thighs)
- d. Is caused by arterial obstruction proximal to affected muscle beds
- e. Is lower extremity muscular pain induced by exercise

Ans. a

4. Regarding the palpation of apex of the heart, which is False?

Select one:

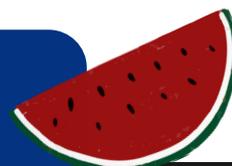
- a. Normally, The apex beat is situated in the sixth intercostal space along the midclavicular line.
- b. The apex beat may be impalpable in obese individuals.
- c. Displacement of the apex inferiorly and laterally suggests cardiomegaly.
- d. If you are unable to feel the apex try rolling the patient further to the left to bring the heart closer to the chest wall.
- e. If there is still no beat palpable, try feeling on the right for dextrocardia.

Ans. a

5. All of the following are common causes of chest pain except one:

- a. Myocardial infarction
- b. Angina
- c. Pericarditis
- d. Aortic dissection
- e. Heart failure

Ans. e



6. Retrosternal chest pain expect

1. Oesophageal rupture
2. pulmonary embolism
3. angina

Ans. a

7.. The MOST common cause of peripheral arterial disease is?

- a. Diabetes
- b. Deep vein thrombosis
- c. Atherosclerosis
- d. Pregnancy
- e. Drug abuse

Ans. c

CVS

General CVS examination:

1. What is the most likely cause of a collapsing pulse? wateen

- A. Mitral valve prolapse
- B. Atrial fibrillation
- C. Aortic stenosis
- D. Aortic regurgitation
- E. Hypertrophic cardiomyopathy

Ans: D

2. Differences between carotid artery and jugular venous pulsation ? Wateen

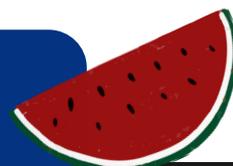
- A. Varies with respiration
- B. Carotid artery has a rapid inward movement
- C. JVP decrease with abdominal pressure
- D. The JVP is usually best seen on the patient's left side
- E. Carotid artery has 2 peaks per heart beat

Ans: A

3. What is the most likely cause of a prolonged radio-femoral delay? Nabeed

- A. Aortic stenosis
- B. Mitral valve prolapse
- C. Aortic coarctation
- D. Pulmonary hypertension
- E. Atrial fibrillation

Ans: C



Which of the following conditions is NOT typically associated with central cyanosis? Nabeed

- A. Tetralogy of Fallot
- B. Pulmonary embolism
- C. Chronic obstructive pulmonary disease (COPD)
- D. Left-to-right shunt
- E. Associated with finger clubbing

Ans:D

5. What is the normal heart rate range for an adult at rest? Nabeed

- A. 40-60 beats per minute
- B. 50-70 beats per minute
- C. 60-100 beats per minute
- D. 70-90 beats per minute
- E. 80-120 beats per minute

Ans:C

6. Which of the following is NOT typically associated with infective endocarditis? Nabeed

- A. Janeway lesions
- B. Osler's nodes
- C. Roth spots
- D. Splinter hemorrhages
- E. Koilonychia (spoon-shaped nails)

Ans:E

7. Which of the following statements about the jugular venous pressure (JVP) is TRUE? Nabeed

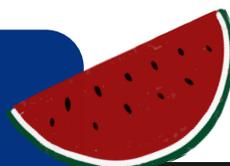
- A. JVP is increased with inspiration.
- B. JVP is decreased with expiration.
- C. JVP is independent of respiratory variations.
- D. JVP is decreased with inspiration.
- E. JVP is increased with Valsalva maneuver.

Ans:D

8. Which one of these is true about JVP? Nabeed

- A. Above the sternal notch normal by 9cm.
- B. JVP has one peak.
- C. Decreased with abdominal pressure.
- D. -It doesn't elevate in any condition that leads to high right ventricular filling pressure.
- E. JVP doesn't vary with the position of the patient.

Ans:A



9. Regarding Jugular venous pressure (JVP), which of the following is true?

Select one:Wareed

- A.It's base is measured with the patient lying at about 45 degrees.
- B. It may indicate heart failure when the JVP is not raised.
- C.The filling pressure should be more than 3 cm above the sternal angle.
- D.It has no visible pulsation.
- E.Checked on the posterior aspect of the neck.

Ans:A

10. 52. One of the following is true, radial pulse rate normally is :Wareed

- A.60-100 /minute
- B.150 -250 /minute
- C.40-80 /minute
- D.40-60 /minute
- E.100-120 /minute

Ans:A

11. 55. Radio-femoral delay is examined to check?wareed

- A.Aortic Regurgitation
- B. Atrial fibrillation
- C.Pulmonary Stenosis
- D.Coarctation of aorta
- E.heart block

Ans:D

12. Which of the followings is CORRECT about difference between jugular venous pulsations and carotid arterial pulsations?wareed

- A. The carotid pulse has a double waveform, the JVP is single
- B. The jugular venous Impulse palpable and non-compressible
- C. TheCarotid is not strongly pulsatile
- D. Carotid pulsations variable with respiration
- E. The JVP rises with pressure on the liver (hepatojugular reflux).

Ans:E



13. One of the following is NOT correct about JVP (jugular venous pressure) measurement: wareed

- A. It is best measured at 45 degrees.
- B. We look for palpable non-wavy pulsations.
- C. Normally should be below 3-4 cm.
- D. Level is usually measured as height above the sternal angle.
- E. We usually take the highest level of pulsations for measurement.

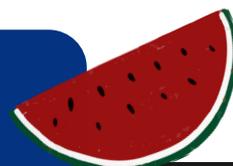
Ans:B

14. 7. For measurement of JVP (Jugular venous pressure) we use the internal jugular vein because:

- A. It has NO direct continuity with the heart.
- B. Has NO valves.
- C. It is superficial.
- D. It is wavy.
- E. Has NO palpable pulsations.

Ans:B

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1) pulse of carotid with?

- A)S1
- B)S2
- C)S3
- D)S4

Answer : A

2)apex beat at 6ICL left axillary line ?

- A)LV dilation
- B)LV hypertrophy
- C)RV dilation
- D)RV hypertrophy
- E)congestive heart failure

Answer:a

3)correct about S4?

- A)normal in athlete, young age
- B)represent ventricular filling
- C)it's always pathological

Answer :C

4) palpable sound at left parasternum indicate?

- A) tricuspid regurgitation murmur
- B)RV hypertrophy

5)tricuspid area?

- A)5th ICS
- B)lower left sternal border
- C)at the apex

6)Location of Aortic valve ?

7)all are pansystolic murmurs ,  
except ?

- A)mitral regurgitation
- B)tricuspid regurgitation
- C)VSD
- D)aortic stenosis
- E)mitral valve prolapse

8)Loud S1

- A)Large stroke volume
- B)Low cardiac output
- C)Long PR interval

9)S3 and S4?

- A)by bell at apex
- B)by diaphragm at apex

10) wrong about JVP?  
A) best inspection at right  
B) if low the patient may have to lie flat  
C) Sc obstruction, positive abdominojugular test  
D) best when SCM is relaxed  
E) best inspection at left  
Answer : C , E??

11) paradoxical rise of JVP in inspiration ?  
Kussmaul sign

12) patient with aortic regurgitation, we will also see?

13) atrial fibrillation with?  
Pulse deficit

14) not symptom for PE?  
A) Dyspnea  
B) orthopnea  
C) syncope  
D) hemoptysis  
Answer : B

15) congestive heart failure at rest NYHC scale?  
IV

16) All of the following are true about internal jugular vein (IJV) pulse except:  
A) Diminished by pressure at the root of the neck  
B) Palpable  
C) Increases with abdominal pressure  
D) Changes with posture  
E) Has rapid inward movement  
Answer : B

17) Which of the following is a characteristic of the carotid pulse (as compared to the jugular venous pulse)?  
A) Rapid inward movement  
B) Does not change with posture  
C) Increases with abdominal pressure  
D) Decreased by pressure at the root of the neck  
Answer: b

18) All of the following causes central chest pain except ?  
A) pulmonary embolism  
B) MI  
C) pneumothorax  
D) aortic dissection  
Answer : D

19) All of the following are causes of retrosternal pain, Except?

myocardial Infarction.

A) Aortic dissection.

B) Esophagitis.

C) pericarditis.

D) fatigue at right arm

answer: e

20) a patient with localized chest pain that is relieved by leaning forward, you think of:

A) MI

B) pneumonia

C) unstable angina

D) pericarditis

E) aortic dissection

Answer : D

21) What is wrong about angina:

A) associated with GI symptoms

b. mild in diabetic patients

Answer : A

22) Which of the following denotes a positive family history for ischemic heart disease:

a. Family history in a male first degree relative less

than 55 years of age and/or a female first degree

relative less than 65 years of age

Answer : a

23. Increase the risk of heart diseases:

a. sister 60 years old diagnosed with MI.

b. father 60 years old diagnosed with MI.

c. 2 brothers above 67 diagnosed with MI.

Answer : A

24- A patient with family history of CAD, he came to the ER suffering from continuous chest pain in the last 15 min. your diagnosis:

A) Acute coronary syndrome

B) ST elevation MI

C) Normal ECG MI

Answer : A

25) A 64-year-old male comes with episodes of shortness of breath that awakens him from sleep. The term that best describes his symptoms is:

a. Orthopnea.

b. Paroxysmal nocturnal  
dyspnea.

c. Shortness of breath.

d. Right sided heart failure.

e. Heart burn.

Answer: b

26) All of the following about esophageal spasm are correct, except:

A. Radiates to the arms

B. Not relieved by nitrates

C. Mimics MI pain

Answer : B

27) Drugs induce syncope except

Beta agonist [which cause Palpitation]

28) Mr. Mahmoud came to the ER, complaining of sudden chest pain, radiating to the arm, neck, jaw, with breathlessness, nausea & sweating. What's the most probable diagnosis?

- A. Ruptured aortic aneurysm
- B. Esophageal dysmotility
- C. Myocardial infarction

Answer : C

29) Which of the following drugs might cause oedema:

- A. B blockers
- B. Angiotensin receptor Blocker
- C. Ca<sup>++</sup> channel blockers
- D. ACE Inhibitors

Answer : C

30) one of the following symptoms not specific for CVS:

- A) angina
- B) orthopnea
- C) palpitation
- D) PND
- E) ankle swelling

Answer: E

31) Patient with family history of CAD. with right hand Bp 170/110 and left hand BP 140/110. pain radiating to the back. Your diagnosis :

- A) ST elevation MI
- B) Normal ECG MI
- C) aortic dissection
- D) Acute coronary syndrome

Answer: C

32) Orthopnea is dyspnea on?

- a. Lying on one side
- b. Upright posture
- c. Lying supine
- d. Exercise
- e. At rest

Answer : C

33) One of the following is not related to heart failure?

- a. orthopnea
- b. PND
- c. leg swelling.
- d. liver failure.
- e. lung collapse.

Answer : E

34) A 65 year old gentleman, hypertensive 10 years ago, presented to the ER complaining of sudden retrosternal chest pain radiating to the interscapular area, of 30 minutes duration, it was 10 of 10, not relieved by anything it was tearing pain associated with lightheadedness

- a. Pericarditis
- b. Infective endocarditis
- c. Myocardial infarction
- d. Acute myocarditis
- e. Aortic dissection

Answer : E

35) a lady with sharp stabbing chest pain, she's young, pain relieved by leaning forward the most likely diagnosis is:  
pericarditis

36) Least likely to be found in someone with HF:

- a. Decreased urinary output
- b. PND
- c. Palpitation
- d. Heart burn

Answer : d

37) all of the following is true about palpitation except:  
palpitation that disappear with exercise is malignant

38) All of the following cause palpitations, except:

- A. Hypothyroidism
- B. Ectopic beat
- C. Anxiety
- D. Drugs
- E. Supraventricular tachycardia

Answer : A

A patient presented with chest pain. What is the best initial step for assessment of his condition?

- A. All chest pains are the same
- B. Can't help him, need more investigations
- C. Ignore chest pain in young patients
- D. More details and patient words will help you
- E. Immediate angiography is mandatory

Answer: D

A patient with mild congestive heart failure comes to ER due to shortness of breath and uses 3 pillows to sleep. What is the medical term that describes his condition?

- A. PND
- B. Orthopnea
- C. PE
- D. Dyspnea on exertion
- E. Trepopnea

Answer: B