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| كلية الطب  جامعة مؤتة |  | Faculty of Medicine,  Mu’tah University |

**Fifth-year psychiatry exams  
------------------------------------------------------------------**

**ييي**

### **يرجى الانتباه ان الملف يشمل امتحان الفاينال مع امتحانات الميني اوسكي وذلك لكون امتحان الميني اوسكي mcq**

**قام بجمع وترتيب هذه الأسئلة :  
نور الحجاج ،تمارا الطراونة , أحمد الخطايبة , لمى البديرات   
لغاية امتحانات سنة 2017 ..  
 وتم إضافة**

**باقي الإمتحانات وتنسيقها عن طريق طارق أبولبدة و عامر عجالين و عبدالله عزام ..  
 وبإشراف لجنة الطب والجراحة ..**

**قام بإضافة وتنسيق امتحانات 2021-2022 : نبال الجرابعة ، محمد جابر**



**Psychiatry**

**Mini-OSCE Archive**

**Group: C+D**

**Ahmed Al-Debas**

1. **The most common SSRI side effect? GI irritation**

**2-Which drug is FDA approved for OCD? Fluvoxamine**

**3-Late side effect of lithium? Memory impairment**

**4-One of the following is idiosyncratic side effect of carbamazepine? Agranulocytosis**

**5-One of the following is not a side effect of pregabalin? Weight loss**

**6,7-** **Not a side effect of TCA? Bradycardia (مكرر مرتين)**

**8-** **Priapism is caused by which drug? Trazadone**

**9- Direct contraindication for ECT? Space occupying intracranial lesion**

**10- All are MAOI side effects except? CNS sedation**

**11- All are not considered in Serotonin syndrome except? Tachycardia**

**12- A case about female, her interest in sexual activities and excitement are decreased, what is the diagnosis? Female sexual interest arousal disorder**

**13- Non modifiable suicidal risk factor? Homosexuality**

**14- The criminal act should be preceded with which of the following to be considered as a crime? Mens rea**

**15- Irritability, poor concentration, sleep problems, all of the following should be considered in the differential diagnosis, EXCEPT?**

**Social anxiety disorder**

**16- a person who wears very odd clothes, thinks he is a psychic (clairvoyance, telepathy, superstitiousness), has severe social anxiety, what kind of personality disorder does he have? Schizotypal personality disorder**

**17- sleep complex and K spindle with which stage of sleep? N2**

**18- Male patient with negative medical work up but despite all reassurance from doctor and normal investigations results, he is still convinced that he has liver disease, what is your diagnosis? Illness anxiety disorder**

**19- Behavioral symptom of stress? Appetite changes**

**20- Brief Psychotic Disorder duration? Less than 1 month**

**21- FDA approved medication for Bulimia Nervosa? Fluoxetine**

**22- To diagnose somatic symptoms disorder the duration must be? At least 6 months**

**23- The persisting sexual preference for people of the same sex(homosexual) or people of the opposite sex (heterosexual) is? Sexual orientation**

**24- 72-year-old male in the ICU due to multiple MI and stroke, on EEG there is a low wave in the background, he is confused and disoriented but he is not agitated, what is the diagnosis? Delirium**

**25- Most common anxiety disorder? Specific Phobia**

**26-82year old alcoholic drinker, came to ER with loss of consciousness and was hospitalized for the management of pneumonia, he was still confused, agitated and ataxic with ocular problems (difficulty looking upward and downward) , what is your diagnosis ? Werneck encephalopathy**

**27-The key differentiating characteristic between binge eating and bulimia nervosa is? Lack of Inappropriate compensatory behavior**

**28- which of the following types of disorders has an incidence of 10:1 in female: male? Eating Disorder**

**29- 25 years old female diagnosed with schizophrenia at this age and she slowly started to have delusions in the past 3 years, when her husband died, she had more delusions, which of the following predicts a poor outcome in this patient? Insidious onset**

**30- Fixed false believe that events, remarks are directed at oneself? Delusion of reference**

**31- All true about Alzheimer disease EXCEPT? Intact personality**

**32- Wrong about Cognitive behavioral therapy? Long and Time Consuming**

**33-** **Which receptor does alcohol work on? GABA-A**

**34- Female pt says she is depressed and plays the sick role without any secondary gain? Factious disorder**

**35- Abnormal, repetitive goal-directed behavior? Mannerism**

**36-Most prominent symptom seen in Mania that is not in schizophrenia? Flight of ideas**

**37-** **Difference between delirium and dementia? Loss of Consciousness**

**38-** **Which of these abnormalities is caused by a patient of anorexia nervosa inducing vomiting?** **Hypokalemic Hypochloremic Metabolic Alkalosis**

**39-A person is talking about his father death while he is laughing, Dx?**

**Incongruity of affect**

**40-** **A patient presented to your clinic that has Russel sign, normal weight & parotid swelling what is the most likely diagnosis? Bulimia nervosa**

**Psychiatry-Mini-OSCE Archive**

Eslam Al-Tarawneh - Walid Azayzeh - Laith Najada

**1- A patient take lorazepam, on which receptor does the drug bind?**

**A- Histamine 1**

**B- Histamine 2**

**C- 5-HT**

**D- GABA-A**

**E- GABA-B**

**2- A drug used for alcohol dependence?**

**A- Acamprosate**

**B- flumazenil**

**C- clozapine**

**D- clonidine**

**E- naloxone**

**3- A patient on antipsychotic started to experience restlessness and he says he is unable to set still?**

**A- Rigidity**

**B- Akathisia**

**C- Dystonia**

**D- Bradykinesia**

**E- Ataxia**

**4- The most common symptom for mania is?**

**A- Pressure of speech**

**B- Poverty of sleep**

**C- Mutism**

**D- Neologism**

**E- Words salad**

**5- All sexual disorders except drug induced, criteria for duration should at least be?**

**A- 1 month**

**B- 3 months**

**C- 6 months**

**D- 8 months**

**E- 1 year**

**6- The most common SSRI side effect?**

**A- Sexual disorder**

**B- GI irritation**

**C- Sedation**

**D- dry mouth**

**E- palpitation**

**7- 50 year old man who has schizophrenia and he is alcoholism, came with hallucinations and delusion, what should not be included in the differential diagnosis?**

**A- Schizophrenia**

**B- Alcohol dependence**

**C- Substance induced psychotic features**

**D- Border line personality disorder with psychotic features**

**8- Which drug is FDA approved for OCD?**

**A- fluoxetine**

**B- fluvoxamine**

**C- venlafaxine**

**D- clozapine**

**9- Late side effect of lithium?**

**A- Tremor**

**B- Muscle weakness**

**C- Memory impairment**

**D- Acne**

**E- Vomiting**

**10- One of the following is idiosyncratic side effect of carbamazepine?**

**A- Agranulocytosis**

**B- Blurred vision**

**C- Ataxia**

**D- Headache**

**E- Vertigo**

**11- One of the following is not a side effect of pregabalin?**

**A- Sedation**

**B- Pancreatitis**

**C- Thrombocytopenia**

**D- Weight loss**

**E- Benign aminotransferase elevation**

**12- Direct contraindication for ECT?**

**A- pregnancy**

**B- Space occupying intracranial lesion**

**C- Kidney problems**

**D- Vomiting**

**13- Sense of self as being male or female is the definition of?**

**A- sexual identity**

**B- gender identity**

**C- Gender role**

**D- Sexual orientation**

**E- Paraphilia**

**14- The least duration for criteria of delusional disorder?**

**A- 1 day**

**B- 1 week**

**C- 1 month**

**D- 1 year**

**15- All of the following are considering as good prognostic for schizophrenia EXCEPT?**

**A- Followed by a death of wife**

**B- Gradual onset**

**C- Delusion and hallucination**

**D- Family history of mood disorder**

**E- Later age of onset**

**16- Patient think that aliens are tracking him, which pathway is affected?**

**A- Mesocortical**

**B- Mesolimbic**

**C- Tuberoinfundibular**

**D- Nigrostriatal**

**E- None of the above**

**17- A case about female, her interest in sexual activities and excitement are decreased, what is the diagnosis?**

**A- Female sexual interest arousal disorder**

**B- Female orgasm disorder**

**C- Genito-pelvic pain penetration disorder**

**18- Premature ejaculation occur at which stage of sexual cycle?**

**A- Desire**

**B- Arousal**

**C- Excitement**

**D- Orgasm**

**E- Resolution**

**19- Abnormal, repetitive goal-directed movement?**

**A- Stereotypy**

**B- Mannerism**

**C- Agitation**

**D- Dystonia**

**E- Chorea**

**20- Non modifiable suicidal risk factor?**

**A- PTSD**

**B- Impulsivity**

**C- Cancer**

**D- Homosexuality**

**21- What is the intent to commit a crime or a guilty mind called?**

**A. Mens rea**

**B. Haggis**

**C. Habeus corpus**

**D. Respondent superior**

**22- Sleep disorder in mania?**

**A- Insomnia**

**B- Hypersomina**

**C- Decreased need for sleep**

**D- Narcolepsy**

**23- Irritability , poor concentration , sleep problems , All of the following should be considered in the differential diagnosis , EXCEPT ?**

**A- PTSD**

**B- Premenstrual dysphoric disorder**

**C- GAD**

**D- Social anxiety disorder**

**E- Depressive disorders**

**24- What is the key difference between illness anxiety disorder and somatic symptom disorder?**

**A- The presence of an associated medical condition**

**B- Whether they are a diagnosis of exclusion**

**C- Somatic symptom disorder need treatment rather than investigation**

**D- Presence of neurological deficits**

**E- Number of symptoms**

**25 & 26- Not a side effect of TCA? مكرر مرتين**

**A- Bradycardia**

**B- Blurred vision**

**C- Sexual dysfunction**

**D- Urinary retention**

**E- Orthostatic hypotension**

**27- patient who has a negative body image and occupied with their weight , she regularly engages in eating binges followed by self inducing vomiting her weight is 48kg and height is 1.70 cm .what is the diagnosis:-**

**A- Anorexia nervosa restricting type**

**B- Anorexia nervosa binge eating/purging type**

**C- Bulimia nervosa**

**D- Binge eating disorder**

**E- None of the above**

**28- Patient who has motiveless resistance to all attempts to be moved or to all instructions?**

**A- Mannerism**

**B- Ambitendence**

**C-** **Negativism**

**D- Compulsion**

**29- Person with odd behavior and magical thinking , lack of close friends believes in superstitions, what is his diagnosis?**

**A- Schizoid**

**B- Schizotypal**

**C- Schizophrenia**

**D- Delusional disorder**

**E- Paranoid**

**30- Behavioral symptom of stress?**

**A- Rage**

**B- Sleep pattern changes**

**C- Appetite changes**

**D- Palpitation**

**E- Headache**

**31- All of the following are true EXCEPT?**

**A- Brief psychotic disorder more than 1 month but less than 6 months**

**B- Schizophreniform disorder more than 1 month but less than 6 months**

**C- Schizophrenia more than 6 months**

**32- 72 year old male in the ICU due to multiple MI and stroke, on EEG there is a low wave in the background, he is confused and disoriented but he is not agitated, what is the diagnosis?**

**A- Epilepsy**

**B- Delirium**

**C- Dementia**

**33- Priapism is caused by which drug?**

**A- TCA**

**B- MAOI**

**C- Nefazodone**

**D- Trazodone**

**E- SSRI**

**34- A person is talking about his father death while he is laughing, Dx?**

**A- Flat affect**

**B- Euphoria**

**C- Incongruity of affect**

**D- Restricted affect**

**35- Fixed false believe that events, remarks, and objects are directed at oneself?**

**A- Delusional Perception**

**B- Delusions of reference**

**D- Delusion of control**

**36- All true about Alzheimer disease EXCEPT?**

**A- Memory impairment**

**B- Cognitive impairment**

**C- Intact personality**

**D- Hallucinations and delusions**

**37- Wrong about CBT?**

**A- Brief and Time-Limited**

**B- Average number of sessions = 16 Sessions**

**C- Long and Time-Consuming**

**38- The key difference between panic attack and panic disorder?**

**A- Panic attack is characterized by spontaneous, recurrent panic attacks.**

**B- Panic attacks can be experienced with other psychiatric disorders and medical conditions**

**C- Panic disorder cannot occur multiple times per day**

**39- year-old man comes to the office due to concerns about having pancreatic cancer after a coworker died of the disease 6 months ago. The patient has no epigastric pain, jaundice, or weight loss. However, he worries constantly because in researching the illness he read that it may not have obvious symptoms in early stages and can be rapidly fatal. The patient saw another physician 2 months ago, who performed a physical examination, laboratory evaluation, and abdominal CT scan. The results were normal and the physician reassured the patient that he did not have cancer. However, the patient reports that he has noticed occasional stomach noises after eating and would like to have additional testing done. Which of the following is the most likely diagnosis?**

**A- Adjustment disorder with anxiety**

**B- Conversion disorder**

**C- Delusional disorder (somatic subtype)**

**D- Factitious disorder**

**E- Generalized anxiety disorder**

**F- Illness anxiety disorder**

**40- A person has an episode of seizure lasting for 3 to 5 minutes, he has no postictal state of confusion after the episode, incompatibility between the symptoms and the seizure, what is the diagnosis?**

**A- Factitious disorder**

**B- Conversion disorder**

**C- Malingering**

**Psychiatry archive-Mini-OSCE**

**Group\_c+d ,by :tasneem rawashdeh,roqaya khanazreh ,rayan rawashdeh**

1-true about conversion disorder : Neurological symptoms

2-receptor of alcohol, diazepam,…: GABA A

3-A patient on antipsychotic started to experience restlessness and he says he is unable to set still: Akathesia

4-What type of psychotherapy is best for a patient with borderline personality disorder? Dialectical Behavioral Therapy

هو جاب كيس هستوري ومنها المفروض تعرفوا انه بوردرلاين وبكون هيك الجواب

5-Good prognostic factor in MDD : Severe depression

6-In DSM-V criteria for enuresis, what is the duration needed for diagnosis? 2 times a week for 3 Months

7-At which age we can start the diagnosis of Encopresis?4 years

8-Which is not a symptom of hypomania:

**Grandiose delusions**

Flight of ideas

Distractibility

Inflated self esteem

Decreased need for sleep

9-Which of the following measures of polysomnography refers to the duration of time from turning off the lights until the onset of Stage 2 (more recently, N2) sleep?

a Sleep efficiency

**b. Sleep latency**

C. REM latency

d. Sleep-onset REM period

e. Apnea index

10-Projection of unconscious feelings into the therapist is called:

Transference

11-A person had an RTA 3 weeks ago, that caused death of his friend, the patient is feeling sad, anhedonic and started having nightmares & flashbacks about the accident, Your Diagnosis?

Post-traumatic stress disorder

Adjustment Disorder

**Acute Stress Disorder**

12-Difficulty recognizing words with slow inaccurate reading is called:

Dyslexia

13-Difference between Paranoid personality disorder & paranoid schizophrenia/delusional disorder?

Pervasive pattern of symptoms

14-criteria for delusional disorder : 1 month delusions

15- Chronic alcohol drinker comes to ER agitated confused with horizental nystagmus

**werenick\_encephalopathy**

korsakoff

alcohol withdrawal

alcohol intoxication

16-Not a criteria for bulemia :once week for 3 Months

17- Not negative symptom of schizophrenia : alogia

18- Not SSRI effect: agrosomia

19- Which drug is not an atypical drug :

Venalfaxine

Metrazapine

Ttazdone

Bupropion

**Escitalopram**

20- Absolute contraindication of lithium : severe kidney failure

21- Not side effect of lamotigine : Nephrogenic DM

22- not a paraphilia: Homosexual

23-which of these is not a side effect of methylphenidate:

a-weight loss

b-anorexia

**c-lethargy**

d-insomnia

24-not used in treatment of phobia :ECT

25- not a criteria for schizotypal disorder

a-Odd beliefs or magical thinking

**b-indifferent to the praise or criticism**

c-Suspiciousness or paranoid ideation

d-Inappropriate or constricted affect

e-Lack of close friends

26- sense of self as being male or female is the definition of

A-sexual identity

**B-gender identity**

C-Gender role

D-Sexual orientation

E-Paraphilia

27-all of these drugs are FDA approved for OCD except :clozapine

28-wrong about delerium : chronic

29-safest SSRI in overdose : sertraline

30 – description of tangentiality and refer to what :

A\_ Speech

B\_ Thoughts

C\_ Mood ,,,,,, etc

31- Case about characteristics of personality disorder : Obssessive convulsion personality

32- Difference between delirium and dementia : Loss of Cons.

33- A case about female , her interest in sexual activities and excitement are decreased , What is DX : Female sexual interest arousal disease

34- A case about borderline personality and what type of psychotherapy we should use ? Flooding

(ناسي صيغة السؤال بالضبط بس الجواب من الدكتور يجماعه لا تلوموني )

35- Definition of mannerism

36- All of the following are risks of suicide except ?

كل الخيارات كانت حرفيه من السلايد ما عدا واحد و كان واضح جدا انه هو الجواب بس ناسيه

37- All are criteria of Narcolepsy except ? At least one episode of need to sleep in last 3 months.

38- All are features of antisocial personality except ? attempts of self-harm

**Psychiatry archive-Mini-OSCE**

Group 5 / by: Ahmad Abu-Morad

Mahmoud Darwish, Fatimah Hesham

1-All of the following about fluoxetine are true except:

1. Longest half life with active metabolites
2. Can elevate levels of antipsychotics leading to increase side effects
3. Can cause sexual dysfunction
4. Not safe in pregnancy & not approved for use in children

Answer: D

2- true about conversion disorder : Neurological symptoms

3-A worker female was brought to the clinic by her internist who said that for the previous 1 month, she has been convinced that a famous pop star is in love with her, no hx of hallucinations, your dx: Delusional disorder

4-at which age enuresis is diagnosed: 5 years

5- first line pharmacological treatment for enuresis: Desmopressin

6- A patient presented to your clinic that has Russel sign, normal weight & parotid swelling what is the most likely diagnosis?  
A-anorexia nervosa  
B-bulimia nervosa  
C-Binge eating disorder  
D- Conversion disorder

7-case scenario for female patient who was admitted for exacerbation of asthma, suddenly she developed nonproductive cough and a fever of 39 ,…..the nurse saw the patient dipping the thermometer in hot cup of liquid, possible dx? Factitious disorder

8- the time needed to diagnose intermittent explosive disorder?

Twice a week for 3 months

9-repetitive monotonous non-goal directed movements: Stereotypy

10-Difference between delirium and dementia:

Answer:-fluctuation in conscious

11-Perceptual disturbance? Formication

12-All of the following drugs increase level of lithium except?

A-NSAIDS

B-ACE inhibitors

C-k sparing diuretic

13-patient came to the clinic with his family for the fisrt time, and started to imitate your monvements and words and was very resistant to your instructions for him to move as you ask, dx: Schizophrenia- catatonic type

14- Asperger rather than kanner syndrome?

Intact language ….

15-not a DSM 5 criterion of schizophrenia?

Active symptoms at least 6 months

16 -Female with insomnia, loss of appetite and weight loss of interest for 7 month , to be

Diagnosed with schizoaffective disorder? Psychotic symptom for 2 weeks in the absence of

Mood disorder symptom

17-not matched?

Fear of height -Agoraphobia

18-poor prognosis ADHD?

Late identification

19-long case of an old woman have symptoms of delirium and she was agitated come to ER ,best drug of choice?

Haloperidol

20- old patient presented with fluctuating cognitive performance and consciousness, parkinsonism, complex hallucinations, recurrent falls and syncope ,what is the type of dementia?

Lewy bodies

21-not a criterion in diagnosis of ASD?

……

22-A patient on risperidone comes into your office and reports that she

Intends on going to her gynecologist because she hasn’t been having her menstrual periods.

She has taken a pregnancy test and it was negative. Which lab test would you order?

Select one:

a. Lumbar puncture

b. Risperidone level

c. Complete blood count

d. Liver profile

e. Prolactin level

23-receptor of alcohol, diazepam,…

GABA A

24-The least duration required for diagnosis of generalized anxiety disorder?

6 months

25-What is the intent to commit a crime or a guilty mind called?

Select one:

A. Mens rea

B. Haggis

C. Habeus corpus

D. Respondent superior

26-poor prognosis in OCD?

Yielding to compulsions

27-When a preson is very talkative as in mania, this is called: Logorrhea

28-One of the following is not true about mental examination:

Hallucination is a disorder of though content

29-all the following drugs cause depression except: Paroxetine

30-A female gave birth to a twin, she started complaining of falling asleep while she is awake, and this condition is associated with overwhelming activities and stress: Cataplexy

31-A patient on antipsychotic started to experience restlessness and he says he is unable to set still: Akathesia

32-drug not used specifically in the treatment of dementia?

Olanzapine

33-one of the following is a negative symptom?

Flat affect

34-case describing sexual sadism

35 -typical case of borderline personality disorder

36- typical case of schizotypal personality disorder

37-not an intrusive symptom in dsm-5 criteria of PTSD

Persistent inability to to experience positive emotion

38- dyspraxia definition

**Psychiatry archive-Mini-OSCE**

Done by : Ebaa Alkhattab

Collected by : Mustafa Al-Fawwaz

1. Patient brought by his brother to the ER, he had a broad-based gate , on examination he was confused, ocular examination showed nystagmus , what should you ask about? alcohol
2. Wrong :poverty of speech-thought content
3. One is increasing in anorexia nervosa: BUN
4. Hair character in anorexia nervosa : Langue hair
5. mature defense mechanism: humor
6. drug that cause penile erection :trazodone
7. The first side effect of antipsychotic: akathisia.
8. Sleep disorder in mania : Decrease the need of sleep
9. What type of psychotherapy is best for a patient with borderline personality disorder? Dialectical Behavioral Therapy
10. The period requires to diagnosis of illness anxiety disorder : 6 months
11. poor appetite ,poor sleep ,confusion Not a ddx : Social anxiety
12. true about history of eating disorder 15) 50% of bulimia nervosa have history of anorexia nervosa
13. Which area of brain is responsible for motor, language and behavior? Frontal Lobe
14. Pt on anti psychotic then have restlessness: Akathesia
15. The least drug cause withdrawal symptoms in SSRI : Floxatine
16. 1st stage after sezure : confusion
17. receptor of lorazepam : GABA
18. Good prognostic factor in MDD : Sever depression
19. All of these drugs are FDA approved for OCD except : Clozapine
20. defention of mens rea??
21. differnace bt illnes anxitey Somatic :Somatic need tx rather than investigation
22. What type of psychotherapy is best for a patient with borderline personality disorder? Dialectical Behavioral Therapy
23. In DSM-V criteria for enuresis, what is the duration needed for diagnosis? 2 times a week for 3 Months
24. ‏At which age we can start the diagnosis of Encopresis?4 years
25. which of these is not a side effect of methylphenidate

a-weight loss

b-anorexia

c-lethargy

d-insomnia

1. Which is not a symptom of hypomania:

Grandiose delusions

Flight of ideas

Distractibility

Inflated self esteem

Decreased need for sleep

1. case of a male patient that likes to cross-dress and wants to undergo sex-change surgery claiming that “he is in the wrong body”

a-transgender

b-gender dysphoria

c-transvestic fetishism

d-frotterurism

e-necrophilia

1. A patient presented to your clinic that has Russel sign, normal weight, what is the most likely diagnosis?

A-anorexia nervosa

B-bulimia nervosa

C-Binge eating disorder

D- Conversion disorder

**Group 3 (A+B)**

**30/11/2022**

**40 Questions, 45 minutes**

**1.In narcolepsy, which neuropeptide is decreased in CSF?**

A. Melatonin

B. Hypocretin ✔️

C. Neuropeptin

**2. At which stage of sleep does erection occur, which is useful to differentiate between Primary Erection disorder & Vascular causes?**

REM stage

**3. Which of the following measures of polysomnography refers to the duration of time from turning off the lights until the onset of Stage 2 (more recently, N2) sleep?**

a Sleep efficiency

**b. Sleep latency**

C. REM latency

d. Sleep-onset REM period

e. Apnea index

**4. Projection of unconscious feelings into the therapist is called:**

Transference

**5. What type of psychotherapy is best for a patient with borderline personality disorder?**

Dialectical Behavioral Therapy

**6. A person had an RTA 3 weeks ago, that caused death of his friend, the patient is feeling sad, anhedonic and started having nightmares & flashbacks about the accident, Your Diagnosis?**

Post-traumatic stress disorder

Adjustment Disorder

**Acute Stress Disorder**

**7. Which anti-depressant has least withdrawal symptoms?**

Fluxetine

**8. Case of a patient with depression, and a previous attempt of drug overdose, which anti-depressant is safest for this patient?**

Sertraline

**9. Patient with MDD, complaining of persistent erection for 5 hours, what drug is mostly associated with it?**

Trazodone

**10. Which type of Paraphilias is more common in females?**

Sadism

**11. Difficulty recognizing words with slow inaccurate reading is called:**

Dyslexia

**12. Which of the following is Not a side effect for Guanfacine?**

Gi disturbance

**Insomnia✔️**

Low BP

Low HR

Headache

**13. In DSM-V criteria for enuresis, what is the duration needed for diagnosis?**

2 times a week for 3 Months

**14. At which age we can start the diagnosis of Encopresis?**

4 years

**15. Not a poor prognostic factor for Schizophrenia?**

Acute onset

**16. Good prognostic factor for MDD?**

Severe depression

**17. Not included in the 4D's of Negligence in clinical malpractice?**

Duty

Damage

Deviation

Direct causation

**Discovery**

**18. A patient with Anorexia Nervosa, binge-eating purging type, she complains of excessive eating followed by VOMITING, what are the expected electrolyte disturbances?**

Hypokalemic Hypochloremic Metabolic Alkalosis

**19. A 68 years old patient complaining of significant impairment in memory, recurrent syncope and fainting, most likely diagnosis?**

Dementia with Lewy Bodies

**20. Which is not a symptom of hypomania:**

**Grandiose delusions ✔️**

Flight of ideas

Distractibility

Inflated self esteem

Decreased need for sleep

**21. Difference between Paranoid personality disorder & paranoid schizophrenia/delusional disorder?**

Pervasive pattern of symptoms

**22. Difference between illness anxiety disorder & somatic symptom disorder?**

Predominance of somatic symptoms

**23. A 36 years old patient has been having fear of being judged, embarrassment that started 6 months ago. It caused impairment in his social occupational relationships, diagnosis?**

Social anxiety disorder

**24. A child is quiet in school for a few months, parents say that in the house, he is quite talkative, diagnosis?**

Selective Mutism

**25. A male is having fear of flying since many years, he drives from one state to another to avoid getting on a plane, your diagnosis?**

Specific Phobia

**26. Which anti-psychotic drug mostly causes weight gain?**

Clozapine

**27. Which of the following is a metabolite of Risperidone?**

Paliperidone

**28. Which of the following drugs is used for alcohol dependence?**

Naloxone

**Naltrexone**

Flumazenil

**29. Not a differential diagnosis for Intermittent Explosive Disorder?**

Schizophrenia

**Schizoid personality disorder ✔️**

Antisocial personality disorder

Alcohol intoxication

**30. Which area of brain is responsible for motor, language and behavior?**

Frontal Lobe

**31. Patient talking with excessive details, but reaching to the point in the end?**

Circumstantiality

**32. All of these drugs are FDA approved for OCD except?**

Clomipramine

**33.  Which of the following is Not associated with Dementia?**

Loss of Consciousness

**34. which is an FDA approved drug for delirium?**

Haloperidol

**35. FDA approved drug for anorexia nervosa?**

Clozapine

Fluxetine

**NON of the above**

**36.Which is true according to FDA about Delirium?**

No preference for Risperidone over Haloperidol

5/10/2022

made by :- Osama Alqaryouti,Moath Daher,Nasser Asem

1-which of these is not a side effect of methylphenidate

a-weight loss

b-anorexia

c-lethargy

d-insomnia

answer:- c

2-which of these is not a side effect of stimulants

a-weight loss

b-bradycardia

c-hypertension

d-insomnia

answer:-b

3-which one of these is the toxic dose for lithium

a-1.5

b-1.2

c-0.5

d-3

answer :- a

4-Derailment is a disorder of which component of these :-

a-speech

b-thought

c-mood

d-affect

e-memory

answer:-b

5-which one of these is a disorder of perception :-

a-delusion

b-hallucination

c-flight of ideas

d-thought insertion

answer:- b

6-6-year child was talking and suddenly become mute, close his eyes and blinks for 3 second, which type of sezuire?

A-grand-mal

b-partial

c-tonic-clonic

d-absence

answer:- d

7-The "four Ds of medical malpractice include all of the following except :\_

a-Duty.

b-Deviation.

c-Damages.

d- Direct causation.

e- Discovery

answer:- e

8-percentage of people with bulimia nervosa that has a history of anorexia nervosa :-

a-30

b-40

c-50

d-60

e-70

answer:- c

9-case of a male patient that likes to cross-dress and wants to undergo sex-change surgery claiming that “he is in the wrong body”

a-transgender

b-gender dysphoria

c-transvestic fetishism

d-frotterurism

e-necrophilia

answer:- b

10-Difference between delirium and dementia:

answer:-fluctuation in consciousness

11- wrong about delirium

a- may be chronic

b-decline in both the level of consciousness and cognition

c-impairment in attention

d-hypoactive type more likely to go undetected

answer:-a

12- which of these does not happen in mania

a-distractability

b-grandiosity

c-pressured speech

d-anhedonia

e-impulsive

answer:-d

13- what phase of sexual response cycle does premature ejaculation happen in :-

a-orgasm

b-desire

c-excitement

d-resolution

answer:- a

14- which one of these is a typical antipsychotic :-

a- haloperidol

b- olanzapine

c- clozapine

d- risperidone

e- quetiapine

answer:-a

15- in which one of these disorders do you need to rule out thyroid disease by thyroid function testing :-

a-social anxiety disorder

b-specific phobia

c-panic attack

d-generalized anxiety disorder

e-selective mutism

answer :- c

16-not a criteria for schizotypal disorder

a-Odd beliefs or magical thinking

b-indifferent to the praise or criticism

c-Suspiciousness or paranoid ideation

d-Inappropriate or constricted affect

e-Lack of close friends

answer:- b

17-case about a child that has conflicting parents who want to have a divorce then the child suddenly develops blindness but seems calm and indifferent to it

answer:- conversion disorder

18-which one of these are used to treat alcohol dependance

a-Acamprosate

b-naloxone

c-flumazenil

d-snri

answer:- a

19-diagnosis of bulimia :-

a- at least twice a week for six months

b- at least twice a week for three months

c- at least once a week for three months

d-at least once a week for six months

e- none of the above

answer :- c

20- case about a 4-year old child that had difficulties in peer interaction and relation but normal language milestones.

answer:-Asperger disease

21- one of the diagniostic criteria of somatic symptom disorder is that it needs to last for at least :-

a-1 months

b-3 months

c-6 months

d-12 months

e-2 years

answer:- c

22- which one of these is not a side effect of carbamazepine :-

a-diplopia

b-ataxia

c-neutropenia

d-inhibition of cytochrome p-450

e-liver toxicity

answer:- d

23- the stressor of adjustment disorder happens within :-

a- 1 month

b- 3 months

c- 6 months

d- 1 year

e- none of the above

answer :- b

24- which one of these is not a side effect of carbamazepine :-

a-luecocytosis

b-ataxia

c-aplastic anemia

d-teratogenesis

answer :- a

25- a patient with schizofrenia who has auditory hallucination what pathway in the dopaminergic system is affected

a-tuberoinfundibular

b-nigrostriatal

c-prefrontal cortical

d-mesolimbic

e-none of the above

answer :- d

26- a patient who has a negative body image and occupied with their weight , she regularly engages in eating binges followed by self inducing vomiting and use of laxatives her weight is 48kg and height is 1.70 cm .what is the diagnosis:-

a-anorexia nervosa restricting type

b-anorexia nervosa binge eating/purging type

c-bulimia nervosa

d-binge eating disorder

e-none of the above

answer :- b

27- a schizophrenic patient who was started on haloperidol but was not improving . The doctor recommended to stop the drug and switch to resperidone 5mg after a few weeks the patient started having symptoms of akathisia what is your next step

a-lower the dose

b-change the drug

c-administer benzotropine

d-administer benzodiazepines

answer:- a

28- good prognostic factor for MDD

a-Double depression

b-Co-morbid physical disease, personality disorders or alcohol dependence

c-Chronic ongoing stress

d-Poor drug compliance

e-severe depression

answer :- e

29-not a mood stabilizer

a-lithium

b-valproate

c-fluvoxamine

d-carbamazepine

e-lamotrigine

answer:- c

30- bad prognostic factor for schizofrenia

a-Acute onset

b-Married

c-Good support system

d-Positive symptoms

e-gradual onset

answer:- e

31- a patient with depression who was treated with fluxitene and then after 2 weeks developed mania . What is the diagnosis

a-bipolar type 1

b-bipolar type 2

3-MDD

4-shizoaffective disorder

answer:- a

32- a patient who has motiveless resistance to all attempts to be moved or to all instructions

a-waxy flexibility

b-posturing

c-stupor

d-negativism

answer :- d

33- a patient who has fear of leaving home and being left alone

a- social anxiety disorder

b- agoraphobia

c- generalized anxiety disorder

d- specific phobia

answer :- b

34-person with odd behavior and magical thinking , lack of close friends believes in superstitions, what is his diagnosis

a-schizoid

b-schizotypal

c-schizophrenia

d-paranoid

e-avoidant

answer:- b

35- which one of the following is not characteristic of rett syndrome

a-expressive language remains intact

b-loss of purposeful hand movements

c-microcephaly

d- poor muscle coordiination and apraxic gait

answer :- a

37- criteria for delusional disorder : 1 month delusions w/o hallucinations

38-one of the following isn’t feature of hypomania : psychosis

39- how do you test abstract thinking : using proverbs

**Psychiatry archive-Mini-OSCE 2**

***اعداد : اسلام البنوي , ديما شنيكات***

***تجميع: مصطفى الفواز***

1-which of these is a side effect of TCAs ? seizures

2- which of these is not a side effect of TCAs ? weight loss

3- which of these is not used in management of specific phobia ? ECT

4- which of these is not a side effect of TCAs ? diarrhea

5- which of these is not a side effect of carbamezapine ? hypernatremia تكرر مرتين

6- which of these is not a side effect of valporic acid ? thrombocytosis

7- which of these is not a side effect of SSRI ? premature ejaculation

8- which of these is not a side effect of valporic acid ? hirsutism

9- nor interest neither vaginal lubrication and labial swelling ? Female sexual interest and arousal disorder

10- person with odd behavior and magical thinking , lack of close friends ? Schizotypal personality disorder

11- difference btw illness anxiety disorder and somatic disorder ? presence of somatic symptoms

12- which of these SSRIs has withdrawal symptom ? paroxetine

13- mirtazapine act in which receptor ? A2 – antagonist

14- Guanfectine which use in treatment of ADHD act in ? A2 – antagonist

15 - Carbamazepine side effects, except ? liver enzyme inhibition

16- What is the difference between Factitious Disorder & Malingering? Secondary gain

17- True about ADHD? Most commonly comorbid conduct disorder

18- Inability or difficulty in describing or being aware of one’s emotions or mood ? Alexithymia

19-Female with insomnia, loss of appetite and weight loss of interest for 7 month , to be diagnosed with schizoaffective disorder? Psychotic symptom for 2 weeks in the absence of mood disorder symptom

20- Naltrexone used in treatment of alcohol abuse by? Reduce desire or craving and high associated with alcohol

21-Case about clonazepam overdose, which drug would you give? Flumazenil

22- 6-year child was talking and suddenly become mute, close his eyes and blinks for 3 second, which type of sezuire? Absence sezuire

23-Impairment in social interaction and behavioral oddities without language impairment ? asperger

24-All of the following are true except? Brief psychotic disorder more than 1 month but less than 6 month

25- All are true about bulimia nervosa except? Hyperkalemia

26- All are complication of weight loss disease except? Increase bone density

27- In which of the following disorders does the individual have the motivation to assume the sick role in the absence of any secondary gain? Factitious disorder

28- The "four Ds of medical malpractice include all of the following except ? descover

29- Which of the following is most useful in differentiating between schizophrenia and alcohol withdrawal delirium? Level of consciousness

30- Which of the following medications is approved by the FDA for treatment of anorexia nervosa? **None of the above coz AN THERE IS NO FDA TREATMENT EVEN OLANZEPAME is not FDA TREAT.**

31- A patient on risperidone comes into your office and reports that she intends on going to her gynecologist because she hasn't been having her menstrual periods. She has taken a pregnancy test and it was negative. Which lab test would you order? Prolactine

32-: Which of the following measures of polysomnography refers to the duration of time from turning off the lights until the onset of Stage 2 (more recently, N2) sleep? Sleep latency

33- Which of the following are considered good prognostic factors for schizophrenia? Later age of onset, good premorbid functioning, family history of mood disorder, positive symptoms

34- which of these is not a side effect of methylphenidate ? lethargy

35- pt 70 year old , his family noticed he is sleeping during talking , from 5 days ago ? delirium

36- Delusion of grandiosity associated with ? mania

37- pt has sezuire attack and EEG was negative and conflicting with his wife ? conversion disorder

38-Which of these drugs works by increasing the availability of norepinephrine, serotonin, dopamine and tyramine ? phenelzine

39- not clinical features of dementia ? fluctuating of consciousness

**WAREED Psychiatry archive-Mini-OSCE 1**

**3-8-2022**

Done BY : Basel btoush , Abd-Alrahman (Qaruti) , walaa maharmeh

Collected by : Mustafa Alfawwaz

1 )Behavioural symptom Of stress : eating pattern change

Non modifiable suicidal risk factor: Homosexual 2)

3) Not FDA approved for OCD treatment : Venlafaxine

4) Priapism is caused by : tazadone

5) Female 82 years , confused, agitated and speech disorganization at evening , what not in management? Diazepam before sleeping

6) most common SSRI side effect: Gi irritation

7) Not TCA side effect : Bradycardia

8) Not S/E of MAOIs : premature ejaculation

9) sleep complex and k spindle: N2

10) Repetitive goal\_directed behavior : Mannerisms

11)nor interest neither vaginal lubricantion and labial swelling ?Female sexual interest and arousal disorder

Male have cross dressing arousal , and normal sexuality with his girlfriend? \*\*\*12)

13) person with odd behavior and magical thinking , lack of close friends :Schizotypal personality disorder

14 ) male while taking about his father death was laughing ? Incongruity of affect

: true about history of eating disorder 15) 50% of bulimia nervosa have history of anorexia nervosa

16) in which female : male ratio 10:1 : Eating disorder

17) not in Schneider symptoms: Visual hallucinations

18)patient come to doctor believe that he has liver cirrhosis despite all medical evaluations ? Illness anxiety disorder

true about conversion disorder : Neurological symptom 19)

20) positive symptoms of schizophrenia?

21) Fixed false believe that events, remarks are directed at oneself? Delusion of reference

Some one that suspicious about his lover and he is sure , have no psychosis 22)

Delusional disorder

23 )all true about alzahaimer disease except: intact personality

24- female with multiple panic attack , fear of leaving home , feeling guilty about being bad mother of her son ?

-panic disorder

-agoraphobia

- depressive

- Generalized anxiety

25- all these anti-epileptic drugs cause depression except ? Lamotrigine

26- 82year old alcoholic drinker, came to ER with loss of consciousness and was hospitalized for the management of pneumonia, he was still confused , agitated and ataxic with ocular problems (difficulty looking upward and downward) , what is your diagnosis ? Wernicke encephalopathy

27- absolute contraindication of ECT ? Brain occupying lesion

28- female patient of normal weight, come with parotid swelling and ruslle sign ? Bulimia nervosa

29- psychoanalysis not used in ? Schizophrenia

30- percentage of suicide in depressed patient? 15%

31- 28 yr old male cross dressing for sexual pleasure, your DX: sex chromosome disorder.

32-Difference between delirium and dementia? Acute onset in delirium

33-Difference between male and female with schizophrenia: females have later onset and better prognosis.

34- most predominant sign of mania ? Pressure of speech

35-wrong about CBT? Long - time consuming

36- -case of a female was follow a diet and do sport ;her weight is 38Kg then she stop the diet but her weight still going down and she have amenorrhea ;what is the urgent initial investigation: serum K level

37- not a good prognostic factor in schizophrenia? Long term first episode

38- the key differentiating between binge eating disorder and Bulimia nervosa ? lack of inappropriate compensatory behaviors

39- the causative neurotransmitter of positive symptoms in schizophrenia? Dopamine

**Psychiatry archive 11-5-2022**

1. wrong statement about anorexia nervosa? Most commonly affects women aged 20-25
2. used in treatment of trigeminal neuralgia🡪 carbamazepine
3. all of these are SSRIs used in treatment of depression except: duloxetine
4. gender distribution of schizophrenia🡪 equal among males and females 1:1
5. wrong about bipolar disorder🡪 carbamazepine used in treatment of a depressive episode
6. one of these isn't in the criteria of diagnosing delusional disorder🡪 prominent hallucinations
7. not a symptom of patients with Rett’s syndrome🡪 over talkativeness
8. regarding phobias one of these doesn’t match🡪 mysophobia 🡪 fear of cats
9. Wrong about delirium🡪 tends to be chronic
10. Features of Korsakoff syndrome 🡪 memory impairment & confabulations
11. wrong about ASD: appropriate and emotionally congruent reactions
12. patient with schizophrenia was prescribed with antipsychotic and now complaining of inner feeling of restlessness, this side effect of antipsychotic 🡪 Akathisia
13. Propranolol is contraindicated in 🡪 Asthma
14. Wrong about criteria of phobia 🡪 patient is in-aware that his fear is out of proportion
15. a criteria of adjustment disorder🡪 causes significant impairment
16. One of the following isn't perceptual disturbance 🡪 Echolalia
17. Expression of gender identity in society🡪 gender roles
18. lithium acts physiologically by all of the following except🡪 alpha 2 agonism
19. One of the following symptoms not considered in conversion syndrome 🡪 Pain

Psychiatry archive 6/4/2022 - Hashem Tarawneh

Answers at the end

1-which of the following is not related to psychoanalysis

A-Interpersonal therapy

B-Supportive psychotherapy

C-brief dynamic psychotherapy

D- Brief cognitive behavioral therapy

2-A patient presented to your clinic that has Russel sign, normal weight, what is the most likely diagnosis?

A-anorexia nervosa

B-bulimia nervosa

C-Binge eating disorder

D- Conversion disorder

3-Which of the following is not a side effect of lamotrigine

A-skin rash

B-ataxia

C-insomnia

4-which of the following TCAs has the least sedative effect

A-Clomipramine

B-nortriptyline

C-desipramine

5-which of these SSRIs has the shortest acting period

A-sertraline

B-paroxetine

C-citalopram

D- escitalopram

6-a person who wears very odd clothes, thinks he is a psychic (clairvoyance,telepathy, superstitiousness), has severe social anxiety, what kind of personality disorder does he have?

A-schizoid personality disorder

B-Antisocial personality disorder

C-schizotypal personality disorder

D-paranoid personality disorder

7- A person comes to the clinic complaining about decreased libido, he also reports that his shirt is wet on the chest area sometimes and says it is just sweat, which of these tests should you do ?

Prolactin

8-Which of these is not a side effect of lithium?

A-Nephrogenic DM

B-hypothyroidism

C-leukopenia

9-A patient was brought to the ER, with decreased level of consciousness, disorientation to time, and is agitated, what is the most likely diagnosis?

1. Dementia
2. Delirium

10-sense of self as being male or female is the definition of?

A-sexual identity

B-gender identity

C-Gender role

D-Sexual orientation

E-Paraphilia

11-Which receptor does alcohol work on?

A-GABA A

B-NMDA

C-Muscarinic

12-which of these disorder does not happen in REM

A-narcolepsy

B-sleep apnea

C-Sleep paralysis

D-Night terror

13-Which of these drugs works by increasing the availability of norepinephrine, serotonin, dopamine and tyramine ?

A-paroxetine

B-amitryptiline

C-phenelzine

D-lamotrigine

14-Which of these is not a side effect of carbamazepine

A-hypernatremia

B-ataxia

c- neural tube defects

D-agranulacytosis

15-Which of the following is a selective norepinephrine reuptake inhibitor

A-trazodone

B-bupropion

C-Atomoxitine

16-which of the following is not a good prognostic factor for schizophrenia

Early age of onset

17-A man who frequently visits the outpatient clinic because he is worried that he has HIV, he gets some routine tests , and goes home, what is the most probable diagnosis?  
A-factitious disorder

B-illness anxiety disorder

C-malingering

D-factitious disorder by proxy

18-Which of these abnormalities is caused by a patient of anorexia nervosa inducing vomiting

A-metabolic acidosis

B-metabolic alkalosis

19-which of these is a side effect of TCAs

Seizures

Answers:

1. D
2. B
3. C
4. C
5. B
6. C
7. .
8. C nephrogenic DM is probably a misspell
9. B
10. B
11. A
12. D
13. C
14. A
15. C
16. .
17. B
18. B
19. .

**Mallak aljafari , march archive**

1. All of the following are good prognostic factors of schizophrenia except: long duration of it without treatment.
2. A 35 yrs. old mother with many panic attacks, think she is a bad mother and feels guilt, prefer staying at home and she is worry about future, your DX: panic disorder, agoraphobia, GAD.
3. TCA side effects, except: hyperventilation.
4. A2 – antagonist: mirtazapine.
5. Not SSRI side effect: premature ejaculation.
6. Carbamazepine side effects, except: liver enzyme inhibition.
7. Valproate side effects, except: thrombocytosis.
8. Starting dose of risperidone in 22 Kg child with ASD: 0.5 mg.
9. Percentage of seizures in ASD: 30%.
10. 28 yr old male cross dressing for sexual pleasure, your DX: sex chromosome disorder.
11. The first side effect of antipsychotic: akathisia.
12. Difference between AN and BN: 50% of BN have history of AN.
13. Difference between somatic symptom disorder and illness anxiety disorder: somatic symptom disorder responds better to treatment, illness anxiety disorder pt. concern about investigation and treatment, pt. with somatic SD concern about the diagnosis, pt. with somatic SD concern about treatment and symptom relief.
14. Ebstein anomaly is teratogenic side effect of: lithium.
15. Difference between delirium and dementia: in dementia there is no fluctuation in consciousness.
16. All are false regarding delirium, except: acute onset.
17. Opioid antagonist used in alcohol use disorder: naltrexone.
18. Difference between male and female with schizophrenia: females have latter onset and better prognosis.
19. Syndrome with nihilistic delusion: cotards syndrome.
20. 28 yrs. old taxi driver with persecutory thoughts for 4 months, but functionally well and medically free, your DX: delusional disorder.

December exam

1.Not side effect of carbamazepine ?

Hypernatremia

2.What is the percent of anorexia nervosa that eventually become bulimia nervosa ?

50%

3. Which of the following has the most sedative effect?

paroxetine

4. Which of the following has the least sedative & anti cholinergic effect ?

Desimpramin

5. Which of the following is a Positive sign of schizophrenia ?

Auditory hallucination

6. What is the difference between Factitious Disorder & Malingering?

Secondary gain

7. Which of the following drugs inhibit degradation of endogenous amines ?

Phenylzine

8. Not diagnostic for delirium ?

Improve at night

9. ALL of the following increase lithium level except ?

Constipation

10. False about hypochondriasis ?

More common in women

11. The least duration required for diagnosis of generalized anxiety disorder?

6 months

12 .The least duration required for diagnosis of delusion?

1 month

13. Not feature of complex partial seizure ?

Causes aggressiveness & agitation

14. Side effect of TCA?

seizure

15.Selective norepinephrine reuptake inhibitor?

Atomoxetine

16.Loss of association is characteristic for which of the following?

schizophrenia

17. True about ADHD?

Most commonly comorbid with depression & conduct disorder

18. which of The following IS NOT condition must be proven in order to sustain a claim of malpractice?

Death of patient

19. recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving touching and rubbing against a non-consenting person?

Frotteurism

November exam

1. the least drug to cause discontinuation- fluoxetine
2. The correct match- agoraphobia(fear of open places)
3. Difference between delirium and dementia- the level of consciousness
4. Which neurotransmitter is involved in Alcohol withdrawal- GABA
5. True about delusions- functioning in life is not significantly impaired
6. Wrong about passivity phenomena- thought block
7. Alpha2 adrenergic receptor antagonist- Mirtazapine
8. Brief psychosis- less than 1 month
9. Question mentioned a lady that using medications for her mental illness but she can’t remember their names, but she complained of polyuria and polydipsia, what’s her diagnosis? –bipolar   
   (you should know the drug first which is lithium based on the side effects)
10. To diagnose somatic symptoms disorder the duration must be- 6 months
11. FDA approved medication for Bulimia Nervosa- Fluoxetine
12. A patient is resistant to any change in his posture even if he was asked to – Negativism
13. One of the following is a negative symptom- poverty of speech
14. One of which is not a symptom of conversion – pain
15. Autistic spectrum disorder in children is characterized by:

Repetitive behaviors

Restrictive interests

Delay in language

A+B+C

A+B \*\*\*\*

1. Definition of sexual orientation
2. Poor prognosis for schizophrenia- No precipitating factors
3. One of the followings is not a SSRI – clomipramine.
4. Not from the Schneiderian Rank-visual hallucinations
5. Wrong match- thought content- perceptual

OCTOBER exam

Case scenarios

1. A 62-year-old woman comes to the office for follow-up of worsening hypetension. The patient admits to not taking her antihypertension medication as prescribad. She says she feels fine and adds, "1 always listen to my bodily rhythms when deciding whether to take medication on a particular day" The patient explains that her crystal jewelry has healing powers, and she maintains an online forum about the health benefits of crystals. The patient does not trust most people and believes that she can predict the weather based on the number of birds in her yard. She lives alone, has few friends, and is unemployed. On examination, the patient makes limited eye contact and appears mildly anxious. She has no auditory

hallucinations, and no specific delusions are elicited. Which of the following is the most likely explanation for this clinical presentation?

A.Avoidant personality disorder

B.Borderline personality disorder

C.Obsessive-compulsive personality disorder

D.Paranoid personality disorder

E.Schizoid personality disorder

Schizotypal personality disorder

1. A 54-year-old man comes to the office due to concerns about having pancreatic cancer after a coworker died of the disease 6 months ago. The patient has no epigastric pain, jaundice, or weight loss. However, he worries constantly because in researching the illness he read that it may not have obvious symptoms in early stages and can be rapidly fatal. The patient saw another physician 2 months ago, who performed a physical examination, laboratory evaluation, and abdominal CT scan. The results were normal and the physician reassured the patient that he did not have cancer. However, the patient reports that he has noticed occasional stomach noises after eating and would like to have additional testing done. Which of the following is the most likely diagnosis?

A.Adjustment disorder with anxiety

B.Conversion disorder

C.Delusional disorder (somatic subtype)

D. Factitious disorder

E.Generalized anxiety disorder

F. Illness anxiety disorder

1. For Conviction of a crime you require : mens rea
2. Which of the following is the correct definition of sleep latency : length of time needed to transition from full wakefulness to stage 1 of sleep
3. A typical case scenario for schizophrenia case with the question: what is the time life prevalence of the patient condition :

1%

5%

10%

1. A typical case scenario of avoidant personality disorder (what is your diagnosis)
2. A typical case scenario of conversion disorder (what is your diagnosis)
3. Patient brought by his brother to the ER, he had a broad-based gate , on examination he was confused, ocular examination showed nystagmus , what is your diagnosis : wernickes encephalopathy
4. To diagnose panic disorder ,patient should have One or more of panic attacks followed by \_\_\_\_\_\_\_\_of continuous worry about experiencing subsequent attacks or their consequences, and/or a maladaptive change in behaviors : ≥1 month (this is not the question, but the idea is to know the period )
5. One of these drugs is not safe to prescribed with SNRI : MAO inhibitors ( 2 drugs that elevate serotonin , you should know all )
6. Which of the following symptoms indicates lithium toxicity:

Course tremor

Fine tremor

Hypothyroidism

1. Not a side effect of TCA drugs :

Urinary retention

Sedation

Blurred vision

Diarrhea

1. Not a side effect of trazodone :

Sedation

Priapism

Seizures

postural hypotention

1. What drug to be prescribed to patient complaining of premature ejaculation :

Trazodone

Venlafaxine

Selegiline

Sertraline

1. Ssri can be used for the treatment of : premature ejaculation
2. Which of these drugs don’t cause weight gain : the answer was benzodiazepines
3. All of the following are side effects of valproic acid except :

Alopecia

Hirsutism

Pancreatitis

PCOS

Tremor

1. Was a case presented with psychotic features and was managed with haloperidol , few weeks later presented with restlessness , what is the first line of management :

Propranolol

Benztropine

Benzo

1. Case of delirium (not delirium tremens) , what is the drug of choice : haloperidol

6/10/2021

نورالهدى الكركي & دانية المعايطة

1-One of the following causes ataxia at therapeutic dose :

A-Pimozide

B- Carbamazepine

C- Chlorpromazine

D- fluoxetine

E-Imipramine

Answer : B

2-Most common anxiety disorder ?

A-Social phobia

B-GAD

C- Panic attack

D-Specific Phobia

E- PTSD

Answer : D

3- Irritability , poor concentration , sleep problems , All of the following should be considered in the differential diagnosis , EXCEPT ?

A-PTSD

B-Premenstrual dysphoric disorder

C-GAD

D- Social anxiety disorder

E- Depressive disorders

Answer : D

4- The patient constantly imitates and does whatever movements the doctor make without being asked to:

A-Echopraxia

B- Catalepsy

C-Catalepsy

D-Waxy flexibility

E- Preservation

Answer : A

5 - Abnormal, repetitive goal-directed movement with some form of functional significance

A-Sterotype

B-Mannerism

C-catatonia

D-Negativism

E- Chorea

Answer : B

6- The drug that is least likely to cause a discontinuation reaction is:

A-Amytriptelen

B-Paroxetine

C- Fluoxetine

D-BDZ

E- Citalopram

Answer : C

7- The key differentiating characteristic between binge eating and bulimia nervosa is:

A-Lack of Inappropriate compensatory behavior

B-eating for 2 Hours

C-eating until uncomfortably full

D- feeling guilty after eating

E-none of the above

Answer : A

8-which of the following types of disorders has an incidence of 10:1 in female : male ?

A-Sleep disorder

B-Eating disorder

C-Anxiety disorder

D-sexual disorder

E-somatic symptoms and related disorder

Answer : B

9-82year old alcoholic drinker, came to ER with loss of consciousness and was hospitalized for the management of pneumonia, he was still confused , agitated and ataxic with ocular problems (difficulty looking upward and downward) , what is your diagnosis ?

A- Cohol withdrawal

B-cohol intoxication

C- Wernike encephalopathy

D-Korsakoof encephalopathy

E- delirium

Answer : C

10- sleep complex and K spindle with which stage of sleep ?

A-N1

B-REM

C-Awake-tired

D-N2

E-N4

Answer : N2

11- Male patient with negative medical work up but despite all reassurance from doctor and normal investigations results , he said : I have cirrhosis and your results are wrong and not enough , what is your diagnosis ?

A-Factitious disorder

B- Illness anxiety disorder

C-conversion disorder

D- malingering

E- somatic symptom disorder

Answer : B

12- Nihilistic delusion comes with ?

A- Cotard syndrome

Answer : A

13-Obssessions can come in the form of :

A-Delusion

B-Mental image

C-Hallucination

Answer : B

14- pregnant women with lithium use , the fetus is under high risk of ?

A-Ebstein's anomaly

B-SIADH

C- Down syndrome

D-Cleft lip

Answer : A

15- Encoporesis ?

A-At least 4 years old developmentally

B- Repeatedly passes feces into an inappropriate places

C- Happens at least once a month for 3 months

D-all of above

E-none of above

Answer : D

16- which of the following should be present for psychotherapy to proceed ?

A-Work out

B-idealization

C- Therapeutic alliance

D- Repression

E- acting out

Answer : C

17-female presents with decreased sexual desire and erotic thoughts with clitoral erection problems , your diagnosis ?

A- female orgasm disorder

B-dyspareunia

C- Gender dysphoria

D- Female sexual interest / arousal disorder

E- sadism

Answer : D

18- 25 years old female diagnosed with schizophrenia at this age and she slowly started to have delusions in the past 3 years, when her husband died she had more delusions, which of the following predicts a poor outcome in this patient

A-Early onset

B- family history of mood disorder

C- insidious onset

D- Being married

E- acute precipitating factor

Answer : C

19 – The criminal act should be preceded with which of the following to be considered as a crime ?

A- Mens era

B- substitutaed

C- justice

Answer : A

20 - A female patient presents to the doctor with complains of feeling unloved , lonely and unwanted, she flirts with the doctor and feels angry when the doctor doesn't reciprocate , which personality disorder is the likely diagnosis ?

A-Borderline

B-Avoidant

C-Antisocial

D-Histrionic

E- dependent

Answer : D

**Group 3**

**4-8-2021**

**-.All the following are side effect of TCA except 1**

**A.Blurred vision**

**B.Tachycardia**

**C.Diarrhea \*\*\***

**D.Impotence**

**E.Tremor**

**- 2. A case about eating disorders ; the patient have russell’s sign , what is the diagnosis**

**Bulimia nervosa**

**- 3.A case of a female was follow a diet and do sport ;her weight is 38Kg then she stop the diet but her weight still going down and she have amenorrhea ;what is the urgent initial investigation:**

**\*serum K level**

**:4. Obsession**

**A.Egosyntonic**

**B.Egodystonic\*\*\***

**[ 5.All of the following cause serotonine syndrome when administered with MOAI except**

**Tyramin**

**6.A 82years old patient ,in the evening he become agitated and confused (symptoms of delirium)..what is the best management:**

**A. Putting a Calender on the wall**

**B. Diazepam\*\*\***

**C. An anti psychotic**

**D.High light system**

**- [ 7. One of the following not true about mental examination**

**Hallucinatuin is disorder of though content**

**8.A man claims that his wife is cheating on him ;(don’t meet the criteria of mood disorder and there is no psychosis) the diagnosis is:**

**Delusional disorder**

**- 9.How to differentiate between delirium and dementia**

**\*Level of Consciousness**

**10.Schneiderian first rank symptoms:**

**Diagnostic for schizophrenia**

**11. "One's see his own body in space:**

**Autoscopic hallucinations**

**12. schizophrenia is poor prognosis if:**

**Early onset of the disease**

**3.True about conversion disorder :1**

**Neurological symptoms.**

**14. Neurotransmitter that cause positive symptoms of schizophrenia**

**Dopamine**

**15.A case of patient who loss muscle tone for two times one them when her mother had cancer and the second time …….;what is the diagnosis:**

**Narcolepsy**

**16. Visual hallucinations in:**

**Late onset schizophrenia (not sure)**

**- 17.All the following indicate that the patient has Insight except**

**Agree with everything doctor say**

**18. Mirtazapin alpha 2 antagonist**

**19.We use interpersonal therapy in**

**Depression**

**- 20. Inability or difficulty in describing or being aware of one’s emotions or mood**

**A.Cyclothymia**

**B.Apathy**

**C.Alexithymia\*\*\***

**D.Dysthymia**

**Psychiatry Mini-Osci**

**GROUP 3/C+D**

دانية أحمد الرواشدة

**Q1:Nihilistic delusion seen in? Cotard syndrom**

**Q2:Tactile hallucination occurs in which of the following? Cocaine psychosis**

**Q3:The most common drug associated with discontinuation syndrome is? paroxetine**

**Q4: Difference between factitious disorder and malingering?Secondary gane**

**Q5:All are true about stand trial except? Haven’t the ability to work with attorney**

**Q6:All are false about specific phobia except? More common in women**

**Q7: Female with insomnia, loss of appetite and weight,loss of intrest for 7 month, to be diagnosed with schizoaffective disorder? Psychotic symptom for 2 week in the absence of mood disorder symptom**

**Q8:Naltrexone used in treatment of alcohol abuse by? Reduce desire or craving and high associated with alcohol**

**Q9: Benzodiazepine act on?GABA-A receptor**

**Q10: Case about clonazepam overdose, which drug would you give? Flumazenil**

**Q11:False about generalized sezuire? From descrete point in brain**

**Q12: 6-year child was talking and suddenly become mute, close his eyes and blinks for 3 second, which type of sezuire? Absence sezuire**

**Q13:Mechanism of action of Guanfacine? Alpha 2 agonist**

**Q14:All are false about ADHD except? High incidence of conduct disorder and specific learning disorder**

**Q15: Impairment in social interaction and behavioral oddities without language impairment ? asperger’s disorder**

**Q16: All of the following are true except? Brief psychotic disorder mre than 1 month but less than 6 month**

**Q17: All are true about bulimia nervosa except? Hyperkalemia**

**Q18: All are complication of weight loss disease except? Increase bone density**

**السؤالين اللي ظلوا كانوا كيسات وطالب التشخيص واحد جوابه**

**Conversion disorder والثاني جوابه delirium، سهل جدا تعرفوا الجواب بس للأسف مش متذكرة الصياغة ابدا .**

**السيمناراات مهمة كثير وكلام الدكاترة فيها أغلبه بيجي.**

**2021**

**Question 1** :Regarding signs & symptoms of Autism one of the following is incorrect :

Select one:

a. Simple motor stereotypes

b. Lining up toys or flipping objects

**c. Apparent indifference to changes of routine**

d. Rigid thinking patterns

e. Idiosyncratic phrases

**Question 2**: Mysophobia is? Select one:

a. Fear of dogs

b. Fear of cats

c. Fear of animals

d. Fear of water

**e. Fear of dirt**

**Question 3:** Which of the following classes of Anti-depressants is NOT preferred due to chances of dangerous interactions & lesser effectiveness ,Select one:

**a. MAOI'S**

b. SSRI'S

C. SNRI'S

d TCA'S

e NASSA'S

**Question 4**: Behavioral therapy includes all of the following techniques except ,Select one:

a. Biofeedback

b. Aversion therapy

**c. Psychoanalysis**

d. Token economy

e Systemic desensitization

**Question 5** : In which of the following disorders does the individual have the motivation to assume the sick role in the absence of any secondary gain? Select one:

a Malingering

**b. Factitious disorder**

e Somatic symptom disorder

d. illness anxiety disorder

e Conversion disorder

**Question 6** :What is the key difference between illness anxiety disorder and somatic symptom disorder? Select one:

a. The presence of an associated medical condition

b. Whether they are a diagnosis of exclusion

**c. Predominance of somatic symptoms**

d. Presence of neurological deficits

e. Number of symptoms

**Question 7** :Second line treatment of choice for kids with ADHD: Select one:

a Methylphenidate

b. Ritalin

**c. Atomoxetine**

d. Diazepam

e. Risperidone

**Question 8** :The "four Ds of medical malpractice include all of the following except

Select one:

a Duty.

b. Deviation.

c. Damages.

d. Direct causation.

**e. Discovery**.

**Question 9** :According to DSM-5. how many somatic symptoms (distressing or disruptive to daily life) are required for the diagnosis of somatic symptom disorder? Select one:

**a. One**

b. Two

C. Three

d. Four

e. Five

**Question 10** :Which drug requires a strict monitoring of serum levels every 3 months & is likely to cause Sodium imbalances is: Select one:

a. Valproic Acid

b. Carbamazepine

c. Clozapine

**d. Lithium**

e. Clonazepam

**Question 11** : Which of the following is most useful in differentiating between schizophrenia and alcohol withdrawal delirium? Select one:

a Agitation

5. Hallucinations

c. Affect

**d.Level of consciousness**

e Paranoid delusions

**Question 12** : Which of the following diagnostic criteria for anorexia nervosa has been eliminated in DSM-5? Select one:

a. Intense fear of gaining weight or of becoming fat, or persistent behavior that interferes

with weight gain, even though at a significantly low weight.

b. Restriction of energy intake relative to auirement, leading to a significantly low body

weight in the context of age, sex.developmental trajectory and physical health

c. Disturbance in the way in which one's body weight or shape is experienced, undue

influence of body weight or shape on self-evaluation, or persistent lack of recognition of

the seriousness of the current low body weight

d. **Amenorrhea (the absence of at least three consecutive menstrual cycles) in**

**postmenarcheal females.**

e Hypothyrodism

**Question 13 :** What is the prognosis for a 24-year-old man diagnosed with schizophrenia who is adherent to antipsychotic medication treatment? Select one:

a. His delusions and hallucinations are likely to worsen, but his tendency to isolate and his cognitive

abilities may improve.

b. His delusions and hallucinations are likely to worsen, and his tendency to isolate and his cognitive abilities may not improve.

**c. His delusions and hallucinations may improve, but his tendency to isolate and his cognitive abilities**

d. All his symptoms may gradually improve.

e. None of the above

**Question 14** : Which of the following is not a common comorbidity in children with ADHD?

Select one:

a Oppositional defiant disorder

**b Eating disorders**

C. Conduct disorder.

d. Specific learning disability

e Anxiety disorders

**Question 15** : ASD in children is characterized by all of the following except? Select one:

**a. Visual Hallucinations**

b. Repetitive behaviors

c. Restrictive interests

d. Impairments is social communication

e. Inability to interact with peers

**Question 15** : Which of the following medications is approved by the FDA for treatment of anorexia nervosa? Select one:

a. Fluoxetine

b. Mirtazapine

C. Olanzapine

d. All of the above

**e. None of the above**

**Question 16** : A patient comes into your practice after referral from his primary care physician. He is convinced that he has cancer. He thinks that it hasn't been found yet, but is convinced that it is there. He remains convinced despite a full workup with negative results. Despite further reassurance by his doctors, he remains convinced that he has cancer. Which is the most appropriate diagnosis?

Select one:

a. Conversion disorder

**b. Illness anxiety disorder**

c. Body dysmorphic disorder

d. Somatic symptom disorder

e Briquet's syndrome

**Question 17 :** A patient on risperidone comes into your office and reports that she intends on going to her gynecologist because she hasn't been having her menstrual periods. She has taken a pregnancy test and it was negative. Which lab test would you order?

Select one:

a. Lumbar puncture

b. Risperidone level

c. Complete blood count

d. Liver profile

**e. Prolactin level**

**Question 18** : The side effects of TCA's include all of the following except: Select one:

a. Sedation

b. Orthostatic hypotension

**c. Weight loss**

d. Dry mouth

e. Tachycardia

**Question 19** : What neurotransmitter is associated with benzodiazepine withdrawal?

Select one

a. Acetylcholine

**b. GABA**

c Norepinephrine

d Serotonin

e. Dopamine

**Question 20** : A person who pulls out their own hair and eat them in order to achieve relief or pleasure could be described as having which of the following ? Select one:

a Pica syndrome

b. Pyromania

**c. Trichotillomania**

d. Obsessive-compulsive disorder

e. Schizophrenia

**Question 21** : Disorientation to place is seen in?

Select one

a Severe anxiety

**b Wernicke's encephalopathy**

c Korsakoffs psychosis

d. Acute manic episode

e Depression

**Question 22** : Agent that has the longest half-life with active metabolites

Select one:

a. Paroxetine

**b. Fluoxetine**

c. Escitalopram

d. Mirtazapine

e. Citalopram

**Question 23** : Which of the following is NOT a typical symptom of narcolepsy?

Select one:

a. Hypnogogic hallucinations

b. Hypnopompic hallucinations

c. Sleep paralysis

d. Cataplexy

**e. Catalepsy**

**Question 24** :Regarding intermittent explosive disorder all of the following statements are false except :: Select one:

a. Frequent verbal/physical outburst 3 times weekly for 2 months

**b. Outbursts and aggression are grossly out of proportion to the trigger or stressor**

c. Outbursts are premeditated and committed to obtain a desired reward

d. Aggression is usually associated with drug and/or alcohol intake

e. Aggressive outbursts don't cause marked impairment in occupational/interpersonal functioning

**Question 25** : A 24-year-old woman is diagnosed with social phobia. All of the following are effective treatments except : Select one

a. SSRIS

b. Flooding

c. Modeling

d. Systematic desensitization

**e. ECT**

**Question 26** : Which of the following is not considered a perceptual disturbance?

Select one:

a. Derealization.

b. Illusion.

c. Depersonalization.

**d. Delusion.**

e. Hallucination.

**Question 27** : Techniques used in psychoanalysis are except

Select one:

a. Transference

b. Countertransference

e. Therapeutic alliance

**d. Aversion therapy**

e Free association

**Question 28** : Which of the following is defined as the sense of self as being male or female?

Select one:

a. Gender role

**b. Gender identity**

c. Sexual identity

d. Sexual orientation

e. Sexual behavior

**Question 29** : What is the intent to commit a crime or a guilty mind called?

Select one:

a. Actus reus

**b. Mens rea**

c. Haggis

d. Habeus corpus

e. Respondent superior

**Question 30** : All of the following are early signs of Autism EXCEPT: Select one:

a. Prefers to play alone

**b. Hypoactive**

c. Delay in speech development

d. Rejecting cuddles

e. Sleep problems

**Question 31** : Which of the following most closely describes a person who may have a factitious disorder?

Select one:

a Iman sees visions and talks to people who aren't there.

b. Fatmah starves herself and is convinced she is overweight

e Fadi pretends to be sick in order to avoid coming to the exam he didn't study for

**d. Hanan tricks the doctors to believe she is ill by injecting herself by insulin**

e. Tareq does not remember a tragically traumatic event in his life

**Question 32** : Simple partial seizures cause all of the following except:

Select one:

a. Involuntary jerky movements

b. Perceptual distortions

**c. Loss of consciousness**

d. Flashing lights

e. Dizziness

**Question 33** : Most Serotonin specific Antidepressant is ? Select one:

**a. Paroxetine**

b. Fluoxetine

c. Escitalopram

d. Venlafaxine

e. Citalopram

**Question 34** : All of the following are motor signs & symptoms of psychiatric illness except:

Select one:

a. Echopraxia.

b. Mannerism

**c. Neologism**

d. Stereotype

e. Waxy flexibility

**Question 35** : All of the following are inattentive symptoms of ADHD except:

Select one.

a Difficulty remembering daily activities

b. Difficulty to follow through instructions

c. Difficulty with organization

**d. Difficulty waiting or taking turns**

e. Difficulty sustaining attention

**Question 36** : Which of the following measures of polysomnography refers to the duration of time from turning off the lights until the onset of Stage 2 (more recently, N2) sleep?

Select one:

a Sleep efficiency

**b. Sleep latency**

C. REM latency

d. Sleep-onset REM period

e. Apnea index

**Question 37** : Which one of the following is not true of delusional disorder?

Select one:

a. It may involve nonbizarre delusions that could happen in real life

b. It may involve tactile hallucinations

c. The erotomanic type involves another person of higher social standing being in love with the patient

**d: Daily functioning is markedly impaired**

e. The person's behavior is not markedly odd or bizarre

**Question 38** :Which of the following are considered good prognostic factors for schizophrenia?

Select one:

a. poor premorbid functioning, no precipitating factors, soft neurological signs

**b. Later age of onset, good premorbid functioning, family history of mood disorder, positive symptoms**

c. Younger age at onset, being single/ divorced/widowed, family history of schizophrenia, longer duration of untreated illness d. History of perinatal trauma, multiple relapses

e Negative symptoms

Physical signs and symptoms of stress overload are all except:.**Question 39**:

a Diarrhea or constipation

**b. Eating more or less**

c. Nausea, dizziness

d Chest pain, tachycardia

e. Frequent colds

26-5-2021  
Group 2

By : Rahaf Salah Tarawneh

Q1:Which of the following not considered as disturbances of attention:

Echopraxia

Q2: Signs & symptoms with both mechanism & motivation conscious is : **malingering**

Q3: Women on risperidone treatment come with history of galactorrhea and amenorrhea , order test is?

Prolactin level

Q4: Not considered as a good prognostic factor of schizophrenia ?

Younger age of onset

Q5: According to DSM-5 criteria in diagnosis of GAD , correct duration is ?

6 months

Q6: Moderate lithium toxicity ?

Hyperreflexia

Q7: Long question about patient believe that he had cancer , correct diagnosis ?

Somatic symptom disorder

* Q8: Not belong to 4Ds ?
* Discover

Q9:

Wrong about bipolar disorder ?

M:F 2:1

Q10: Question about –bipolar I- ?

Q11: Good prognostic factor in MDD?

Sever depression

Q12: Not consider motor problem in psychiatry ?

Neologism

Q13:

How to differentiate between alcohol withdrawal and schizophrenia delirium ?

Level of consciousness

Q14: Not used to treat social phobia?

ECT

Q15: Not considered as symptom in Schneiderian first rank ?

Visual hallucination

Q16: Observed expression of emotion; may be inconsistent with patient’s description of emotion ?

Affect

Q17: Wrong about delusional disorder ?

Tactile hallucination

Q18: The sense of self as being male or female?

Gender identity

2020/20201 (Group 1 A+B) **2020/2021(Group 1(C+D))**

**By : Alaa alhashaika**

1.Which of the following not perceptual disturbance:

a. Derealization

b. Depersonalization

c. Illusion

**d. Delusion**

e. Hallucination

2. not side effect of TCA :**insomnia**

3.not side effect of SSRI : **wt .gain**

4.not true about treatment of social phobia: **SSRI not approved as treatment by FDA**

5.not 4Ds: **discovery**

6.not true about delirium tremens : **aphasia**

7.treatment approved by FDA for OCD: **clomipramin**

**8.** true about conversion disorder except : pain

9.which of the following cause anexity in men with eplipsy : **divorced**

10.consider GAD for days to at least : **6month**

11.The drug that requires strict monitoring of serum levels every 3 months and is likely to cause sodium imbalances**: Lithium**

12.ASD (autism spectrum disorder) is characterized by all of the following except: **visual hallucinations**

13.signs & symptoms with both mechanism & motivation conscious is : **malingering**

14.How to differentiate between schizophrenia and alcohol withdrawal delirium**: Level of consciousness**

15.Physical sign and symptoms of stress overload are all except: **frequent cold**

16.Which of the fallowing classes of Anti-depressants is NOT preferred due to chances of dangerous Interactions & lesser effectiveness: **MAOI's**

17.Which of the following is not a common comorbidity in children with ADHD: **eating disorders**

18.Which of the following diagnostic criteria for anorexia nervosa has been eliminated in DSM: 5: **Amenorrhea (the absence of at least three consecutive menstrual cycles) in postmenarcheal females**

19.which of the following is good prognostic factor of schizophrenia: **affective symptoms**  
20.All true about early signs of autism except**: hyporeactivity**

By: Jenine nueirat

1. SSRI with longest half-life and active metabolites: fluoxetine
2. SSRI that is most serotonin specific: paroxetine
3. Intention to do a crime: mens orea
4. Not a feature of Wernicke’s encephalopathy: dysphasia
5. The drug that requires strict monitoring of serum levels every 3 months and is likely to cause sodium imbalances: Lithium
6. The distinguishing factor between malingering, factitious disorder, illness anxiety disorder, somatic symptom disorder... etc: malingering has an external incentive (reward, motivation)
7. Expression of gender identity in society: gender role
8. True about concrete thinking: it is a defect of conceptual abstract thought
9. ASD (autism spectrum disorder) is characterized by all of the following except: visual hallucinations
10. Withdrawal symptoms of benzodiazepines is related to which neurotransmitter: GABA
11. The duration of time between turning off the lights and the second stage of NREM (stage N2) is called: sleep latency (NOT SLEEP-WAKE LATENCY)
12. Schizophrenic man who takes risperidone complaining of decreased sex drive, and of wet nipples, but he claims the wet nipples are due to sweat. What lab test would you like to order: prolactin (not 100% sure, but it seemed like the right answer)
13. All are symptoms of inattentive ADHD except: difficulty waiting or taking turns (this is a feature of impulsive ADHD)
14. FDA-approved drug to treat bulimia nervosa: fluoxetine (pay attention to the eating disorder, anorexia nervosa has no FDA-approved drug to treat it)
15. Mysophobia is: fear of dirt and germs
16. Not a side effect of TCA: weight loss
17. True about intermittent explosive disorder: outbursts are grossly out of proportion to the triggering event or stressor
18. Not used to treat social phobia: ECT
19. Not a feature of simple partial seizure: loss of consciousness
20. Not true about autism: indifference to change of routine

(Note from one student to another: This exam had many of the same concepts tested in past exams, with minor changes to the wording of the questions or questions about *related* concepts, like asking about bulimia nervosa’s treatment instead of anorexia, or gender role instead of gender identity, or asking what’s true about this instead of what’s false, so don’t rely on just memorizing the answers blindly. **This is a recurring theme in almost all the exams this year.**)

**2020/2021(group5 c+d)**

**By : Aya hayajneh**

1. Which of the following not comorbidity associated with ADHA:  
   A. mood disorders  
   **B. schizophrenia**  
   C. personality disorders   
   D. oppositional defiant disorders
2. Which of the following not adverse effect of methylphenidate :  
   **A. weight gain**
3. which of the following pairs is true “  
   **A.SARI >> Trazodone**
4. which of the following is a life threatening sign of “serotonin syndrome” :  
   A. loss of consciousness  
   B. tachycardia  
   **c. muscle rigidity**
5. which of the following is not a mild sign of lithium toxicity:  
   A. ataxia   
   **B. oligouria**  
   C. vomiting   
   D. coarse tremor
6. which of the following not consider a prediction of bipolar disorder:  
   A. psychotic depression before 25 year   
   B. rapid onset and offset   
   **C.psychosis after 25**   
   D.sesonality   
   E. bipolar family history
7. which of the following not from Schneider symptoms:  
   A. thought insertion  
   B. made volition  
   C. reffering to the pt in 3ed person   
   D. voice speaking out of his thought loudly   
   **E.cognitive**
8. which of the following is related to Kleptomania:  
   A. done for personal rewards   
   B.   
   **C. childhood or early adolsant onset**   
   D.
9. which of the following is true about concrete thinking:  
   A. usually seen in bipolar disorder   
   B.diagnostic of schizophrenia   
   C. diagnostic of organic brain disease  
   **D. defect of conceptual abstract thought**
10. which of the following not used in treatment of social phobia:  
    A. SSRI  
    B. flooding  
    C. modling  
    D.   
    **E.ECT**
11. which of the following is not good prognostic factor of OCD :  
    A. after divorce  
    B.episodic nature  
    **C.yielding to compulsion**   
    D. competent on out patient treatment
12. which of the following is good prognostic factor of schizophrenia:  
    A. younger age of onset  
    B. insidious onset  
    **C. affective symptoms**  
    D.negative symptoms
13. which of the following is not poor prognostic factor of schizophrenia:  
    A. male gender  
    B. insidious onset  
    **C. short duration**  
    D. negative symptoms
14. intention to do a crime : **mens orea**
15. main neurotransmeter in benzodiazepenes action is : **GABA**
16. signs & symptoms with both mechanism & motivation conscious is : **malingering**
17. pattern of a person’s biological sexual characteristics: chromosomes, external genitalia, internal genitalia, hormonal composition, gonads, and secondary sexual characteristics:  
    A. gender identity  
    **B. sexual identity**  
    C. gender role  
    D. sexual orientation
18. كيس ل مواصفات **binge eating**
19. Acrophobia >> fear of height

**2020/2021 (group 4 c+d)**

**by : Abdelrahman Nour**

**Q1:** being humiliated = masochism

**Q2:** disorientation to place seen in :

A)Wernicke encephalopathy (confusion)

B) Korsakoff syndrome

C) severe anxiety

d) depression

**Q3:** Tangentiality is : Disorder of Thought  
**Q4:** true about delusional disorder : these thoughts are real life for the Pt

**Q5:** How to differentiate between schizophrenia and alcohol withdrawal delirium?

Agitation

Hallucination

Paranoid delusion

Level of consciousness

**Q6:** 24 year old male pt with schizophrenia who is adherent to his antipsychotic treatment , what is the correct prognosis ?

- Hallucinations won’t improve and cognitive / isolation behavior won’t improve

- Hallucinations won’t improve and cognitive / isolation behavior will improve

- Hallucinations will improve and cognitive / isolation behavior won’t improve

- Hallucinations will improve and cognitive / isolation behavior will improve

**Q7:** wrong about autism : the Pt **indifference** to change in routine

**Q8:** All of the following is present in simple partial seizure , except : Loss of consciousness

**Q9:** when Pt have signs and symptoms with both mechanism and motivation conscious this is called ? Malingering

**Q10:** true about Intermittent explosive disorder : outbursts and aggression are grossly **out of proportion** to the triggering event or stressor

**Q11:** SSRI with the Longest half-life ? fluoxetine

**Q12:** Most selective SSRI ? paroxetine

**Q13**: all are side effects of TCA , except :

A. weight loss

B. tachycardia

**Q14:** Which of the following is recommended by the FDA to treat anorexia nervosa ?

A. fluoxetine

B. olanzapine ( not approved by FDA !!!!! )

C. all of the above

D. none of the above

**Q15:** what is the period from turning off the light until stage 2 is called

A. sleep latency

B. rem latency

**Q16:** mysophobia: fear of dirt:

1. fear of dogs
2. fear of cats
3. fear of dirt
4. fear of heights

**Q17:** all are inattentive symptoms in ADHD , except : difficulty waiting or taking turns

**Q18 :** which of the following is a good prognostic factor for schizophreniform disorder ? acute onset of symptoms

**Q19 :** which of the following is not a TECHNIQUE USED IN PSYCHOANALYSIS? Aversion

**Q20** : which of the following is not a BEHAVIORAL THERAPY TECHNIQUE? Psychoanalytic

Good luck 😊

**2020/2021 (group 4)**

**Q1:** Second line treatment on ADHD: atomoxetine

**Q2:** Intension to do a crime: menosera

**Q3:** Which of the following is positve symptoms of Schezophrenia?

1. flat affect
2. poverty of speech
3. bizzare behavior
4. intellictual disability

**Q4:** all regarding wernike syndrome true exepet : dysphasia

**Q5:** All true about early signs of autism except: hyporeactivity

**Q6:** in DSM5 number of somatic symptoms needed to diagnose somatic disorder: one

**Q7:** about genetic basis of schizophrenia :has both genetic and environmental factors

**Q8:** True about rem sleep :loss of muscle tone

**Q9:** the sense of self as being male or female is : gender identity

**Q10:** disorder motivated by a psychological need to assume the sick role (no secondary gain):Factitious disorder

**Q11:** Physical sign and symptoms of stress overload are all except

A. Diarrhea or constipation

B. Eating more or less

C. Nausea, dizziness

D. Chest pain, tachycardia

E. Frequent colds

**Q12:** Which drug requires a strict monitoring of serum levels every 3 months & is likely to cause Sodium imbalances is:

A. Valproic Acid

B. Sodium Valproate

C. Clozapine

D. Lithium

E. Clonazepam

**Q13:** Which of the fallowing classes of Anti-depressants is NOT preferred due to chances of dangerous Interactions & lesser effectiveness:

A.MAOI's

B. SSRI's

C. SNRI's

D. TCA's

E. NASSA's

**Q14:** Which of the following statements about gender differences in anxiety is TRUE?

A. Women are twice as likely as men to have anxiety disorders

B. Women and men are at equal risk of having anxiety disorders.

C. Men are twice as likely as women to have anxiety disorders.

D. Men have higher rates of anxiety before age 20 and lower rates of anxiety after age

**Q15:** Safest Anti-depressant in elderly patients would be :

A. Paroxetine

B. Clomipramine

C. Escitalopram

D. Olanzapine

E. Citalopram

**Q16:** Which of the following is not a common comorbidity in children with ADHD?

1. Oppositional defiant disordery
2. eating disorders
3. Conduct disorder
4. Specific learning disability
5. Anxiety disorders

**Q17:** Which of the following most closely describes a person who may have a factitious disorder?

A. Iman sees visions and talks to people who aren't there.

B. Fatmah starves herself and is convinced she is overweight

C. Fadi pretends to be sick in order to avoid coming to the exam he didn't study for

D. Hanan tricks the doctors to believe she is ill by injecting herself by insulin

E. Tareq does not remember a tragically traumatic event in his life

**Q18:** A person who pulls out their own hair and eat them in order to achieve relief or pleasure could be described as having which of the following:

A. Pica syndrome

B. Pyromania

C.Trichotillomania

D. Obsessive-compulsive disorder

E .Schizophrenia

**Q19:** ASD in children is charactazied by all of the following except: visual halucination

2020/2021 (group 3)

**Q1:** Second line treatment on ADHD: atomoxetine

**Q2:** Obsessions

1. Impulse
2. Words
3. Images
4. Thoughts
5. All of the above

**Q3:** Intension to do a crime: menosera

**Q4:** all regarding wernike syndrome true exepet : dysphasia

**Q5:** All true about early signs of autism except: hyporeactivity

**Q6:** in DSM5 number of somatic symptoms needed to diagnose somatic disorder: one

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**Q19:** ASD in children is charactazied by all of the following except: visual halucination

**2020/2021**

Done By : Lo’ay Al abed

1. According to DSM-S, which of the following is sufficient an its own to satisfy criterion A for schizophrenia?

A. Two voices having a conversation with each other

B. Auditory hallucination providing a real- time commentary

C.A belief that an alien resides in one's big toe

D. Mental automatisms

E . None of the above XXXXXXXXX

2.What is the key difference between illness anxiety disorder and somatic symptom disorder?

A. The presence of an associated medical condition

B. Whether they are a diagnosis of exclusion

C. predominance of somatic sumptoms xxxxxxx

D. Presence of neurological deficits

E. Number of symptoms somatic symptoms

**3.** Which of the following diagnostic criteria for anorexia nervosa has been eliminated in DSM: 5?

**A.** Intense fear of gaining weight or of becoming fat, or persistent behavior that interferes with weight gain, even though at a significantly low weight.

**B.** Restriction of energy intake relative to requirement, leading to a significantly low body weight in the context of age, sex, developmental trajectory, and physical health.

**C.** Disturbance in the way in which one's body weight or shape is experienced, undue influence of body weight or shape on self- evaluation, or persistent lack of recognition of the seriousness of the current low body weight.

**D.** Amenorrhea (the absence of at least three consecutive menstrual cycles) in postmenarcheal females xxxxxxxxxxxxxxxx

4. Which of the following are considered good prognostic factors for schizophrenia?

A. poor premorbid functioning, no precipitating factors, soft neurological signs

B. Later age of onset, good premorbid functionirig, family history of mood disorder, positive symptoms

C. Younger age at onset, being single / divorced/widowed, family history of schizophrenia, longer duration of untreated illness

D. History of perinatal traumă, multiple relapses

E. Negative symptoms

5. Which of the following is defined as the expression of one’s gender identity in society ?

A. Gender role

B. Gender identity

C . Sexual identity

D. Sexual orientation

E. Sexual behavior

6. Which of the following is NOT a typical symptom of narcolepsy?

A. Hypnogogic hallucinations

B. Hypnopompic hallucinations

C. Sleep paralysis

D. Cataplexy

E. Catalepsy

7. The anxialytic property of benzodiazepines is related to which of the following receptors?

A. GABA-B

B. GABA- A

C. NMDA

D. Glycine

E. AMPA

8. Which of the following is true about concrete thinking ?

A. It is usually seen in bipolar disorder

B. It is diagnostic of schizophrenia,

C. It is diagnostic of organic brain disease.

D. it is a defect of conceptual abstract thought.

E. always seen in schizophrenia.

9. Which of the following t not an experience seen in normal people?

A. depersonalization

B. Déja vu

C. Jamais vu

D. Encapsulated delusions

E. Ideas of reference

10. The patient would think "I must put the kettle on, and after a pause of not more than one second would hear a voice say "I must put the Kettle on ‘ This is described as

A. Thought insertion

B. Thought withdrawal

C. Audible thoughts

D. Thought broadcast

E. Tangentiality

11. trichotilo

12. A person who pulls out their own hair and eat them in order to achieve relief or pleasure could be described as having which of the following:

A. Pica syndrome

B. Pyromania

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A. Oppositional defiant disordery

B. eating disorders

C. Conduct disorder

D. Specific learning disability

E Anxiety disorders

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A. Visual Halucinations

B. Repetitive behaviors

C. Restrictive interests

D. Impairments is social communication

E. Inability to interact with peers

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A.MAOI's

B. SSRI's

C. SNRI's

D. TCA's

E. NASSA's

19. Which of the following is not a catatonic sign:

A. Catalepsy

B. Posturing

C. Negativism

D. Cataplexy

E. Waxy flexibility

20. Physical sign and symptoms of stress overload are all except

A. Diarrhea or constipation

B. Eating more or less

C. Nausea, dizziness

D. Chest pain, tachycardia

E. Frequent colds

**2020**

**Question 1: The most common psychiatric disturbance associated with Cushing’s Disease is**

**Select one:**

a. Depression



b. Mania



c. Mixed affective state



d. Schizophreniform psychosis



e. Dementia



**Question 2: Which of the following is a sleep disturbance characteristic of mania?**

**Select one:**

a. Reduced early morning sleep



b. Reduced initial sleep



c. Reduced need for sleep



d. Reduced latency of sleep



**Question 3: Stimulants are useful in ADHD.The symptom that best responds to stimulant Is**

**Select one:**

a. Insomnia



b. Hyperactivity



c. Inattention



d. Motor tics



e. Conduct disturbance



**Question 4: A woman is referred by her lawyer to establish the diagnosis of kleptomania after arrested for shoplifting. Which of the following does not suggest this diagnosis?**

**Select one:**

a. The stolen items are useless for her.



b. This is the first episode of shoplifting in her whole life.



c. She committed shoplifting for many times but she was not caught



d. She consulted psychiatrist for compulsive stealing



e. She threw away the stolen items immediately



**Question 5: A17-year-old patient has recurrent intrusive thoughts which he perceives to be senseless And involuntary.He starts believing these thoughts are being inserted by his family members Though these are his own thoughts.Which of the following diagnoses must be considered Apart from OCD?**

**Select one:**

a. Schizophrenia



b. Anankastic personality



c. Depression



d. Schizotypal personality



e. Delusional disorder



**Question 6: The following are true about the etiology of Autism except:**

**Select one:**

a. Higher concordance among MZ twins.



b. Increased rate of perinatal complications.



c. Decreased brain serotonin levels



d. Condition is 50 times more frequent in the siblings of affected persons



**Question 7: A 70-year-old woman presents with mania after left cerebrovascular accident. As compared to adult bipolar patient, she is more likely to:**

**Select one:**

a. Require higher dose of lithium



b. Demonstrate irritability



c. Demonstrate reckless behavior



d. Have high sexual drive



e. Have grandiose delusions



**Question 8: Which of the following is a relative contraindication for ECT?**

**Select one:**

a. Space-occupying lesion in the brain



b. Third trimester of pregnancy



c. Hypertension



d. Seizure disorder



**Question 9: How long does it take to have enough alcohol in your blood to measure?**

**Select one:**

a. 5 minutes



b. 30 minutes



c. 45 minutes



d. 1hour



e. None of the above



**Question 10: Which of the following risk factors is associated with the highest risk of developing agranulocytosis in schizophrenia patients taking clozapine?**

**Select one:**

a. Afro-Caribbean descent



b. Young age



c. Female gender



d. High dose of clozapine



e. Long duration of clozapine usage



**Question 11: A 37-year-old lady has an eccentric hobby of preserving animal carcasses found On road side. She has also suspiciousness, magical thinking,and obsessive ruminations though she does not resist them. She has never had a diagnosis of schizophrenia.This description best fits which of the following diagnosis?**

**Select one:**

a. Schizoid personality



b. Schizotypal disorder



c. Paranoid personality



d. Obsessive- compulsive disorder



e. Simple schizophrenia



**Question 12: Which Personality disorder is considered to be closely associated with bipolar diathesis?**

**Select one:**

a. Borderline personality disorder



b. Narcissistic personality disorder



c. Antisocial personality



d. Schizoid personality



e. Schizotypal personality



**Question 13: Strong risk factors for depression include all of the following EXCEPT**

**Select one:**

a. Neuroticism



b. Life events



c. Past history of depression



d. Low IQ



e. Family history



**Question 14: Ayoung lady develops transient bladder incontinence with recent job loss. A few months Later she presents to her GP with weakness of the right leg. Which of the following Medical disorder is often confused with conversion disorder?**

**Select one:**

a. Myasthenia gravis



b. Guillain-Barre’ syndrome



c. Brain tumor



d. Creutzfeldt-Jakob syndrome



e. Multiple sclerosis



**Question 15: Which of the following social factors is MOST LIKELY to be associated with relapse of schizophrenia after hospitalization?**

**Select one:**

a. Discrimination



b. Financial problems



c. Homelessness



d. Increased expressed emotion



e. Isolation and absence of family member.



**Question 16: A 60-year-old woman complained of depression and was started by her GP on escitalopram. After two weeks of treatment, she complains of lethargy, muscle weakness and nausea. The GP wants to know the most likely cause for her symptoms.Your answer is:**

**Select one:**

a. Acute confusional state



b. Generalised anxiety disorder



c. Hyponatraemia



d. Serotonin syndrome



e. Somatisation disorder



**Question 17: Which of the following statements about the etiology of depression is true?**

**Select one:**

a. A genetic component is nearly always present



b. Decreased prolactin levels are responsible for depression in children



c. Major depressive disorder requires a "triggering event"



d. A bidirectional association is noted between depression and coronary artery disease



**Question 18: An elderly, mildly confused man is brought to emergency room by his son .When he asked about his problems the patient mentions “abnormalities of function”. His answer to next question is the same, this is an example of:**

**Select one:**

a. coprolalia



b. Fixation



c. Tangentiality



d. Perseveration



e. Echolalia



**Question 19: A 30-year-old man was brought to the Accident and Emergency Department. He suddenly fell down after hearing a loud sound at a party. There was no loss of consciousness. The psychopathology being described is:**

**Select one:**

a. Catalepsy



b. Cataplexy



c. Catatonia



d. Posturing



e. Waxy flexibility



**Question 20: Which of the following is accurate concerning the treatment of OCD?**

**Select one:**

a. Patients who achieve remission of symptoms with behavior therapy alone always require medication to maintain remission



b. People with OCD are at little risk for suicide



c. Mainstays of OCD treatment include selective serotonin reuptake inhibitor (SSRI) antidepressant medications, behavior therapy, education and family interventions, and (in very refractory cases) neurosurgery



d. In patients who undergo combined therapy, ongoing medication has not been found effective in preventing relapse



**Question 21: variety of clues help distinguish delirium from dementia. Which of these clues is incorrect?**

**Select one:**

a. Poor short-term memory (delirium); poor working memory and immediate recall (dementia)



b. Fragmented sleep (delirium); sleep-wake reversal (dementia)



c. Fluctuating course (delirium); gradual deterioration (dementia)



d. Acute onset (delirium); insidious onset (dementia)



**Question 22:Excessive concern with physical appearance ,shallow,labileaffect,and egocentricity are a Feature of which of the following?**

**Select one:**

a. Histerionic personality



b. Narcissistic personality



c. Antisocial personality



d. Borderline personality



e. Dysmorphophobia



**Question 23:According to Jaspers,the most important component of psychiatric Assessment is**

**Select one:**

a. Empathy



b. Humour



c. Judgement



d. Reasoning



e. Common sense



**Question 24:Nihilistic delusions will be congruent with which of the following findings of Mental state examination?**

**Select one:**

a. Depression



b. Mania



c. Depersonalization



d. Grandiose delusion



**Question 25:Which of the following statements is accurate regarding NPD?**

**Select one:**

a. NPD typically does not manifest until mid-adulthood (age &gt; 30 years)



b. The incidence of NPD is equal between men and women



c. NPD is frequently associated with comorbid axis I diagnoses



d. In general, NPD lessens over time as the individual ages



**Question 26:Which of the following is NOT a poor prognostic factor in OCD ?**

**Select one:**

a. Male gender



b. Poor insight



c. Early onset



d. Family history of OCD



e. Presence of depressive symptoms



**Question 27:What clinical feature of schizophrenia is best predictor of long-term functional outcome in schizophrenia?**

**Select one:**

a. Degree of positive symptoms (delusions, hallucinations, thought disorders)



b. Degree of negative symptoms (decreased motivation, diminished emotional expression)



c. Degree of cognitive impairment (impairment of attention, executive function, certain types of memory)



d. Degree of motor abnormalities (posturing, impaired coordination)



**Question 28:Which of the following symptoms is/are a characteristic feature in dissociative fugue?**

**Select one:**

a. Depressive symptoms



b. Depersonalization symptoms



c. Defective new learning



d. Wandering far away with assumption of a new identity



e. Family history of epilepsy



**Question 29:What is the most common problem in individuals with dementia?**

**Select one:**

a. delusions



b. boredom



c. agitation



d. apathy هاي الاجابة الصحيحة



e. disinhibition



**Question 30:Which of the following is the single most important factor predicting Suicide risk?**

**Select one:**

a. Recent life event



b. Family history of suicide



c. Past history of suicidal attempt



d. Recent discharge from hospital



**Question 31:A patient looks dishevelled, with unkempt hair and dirty, unwashed clothes. Self neglect is commonly noted in all of the following EXCEPT**

**Select one:**

a. Alcoholism



b. Chronic schizophrenia



c. Depression



d. Dementia



e. Social phobia



**Question 32:The most common reason for using dantrolene sodium in psychiatric Patients is**

**Select one:**

a. Serotonin syndrome



b. Catatonia



c. Neuroleptic malignant syndrome



d. Dystonia



e. Chorea



**Question 33:A depressed patient does not smile or laugh when a joke is shared by a fellow patient. She shows a defect in which of the following aspects of mental state examination?**

**Select one:**

a. Stability of affect



b. Reactivity of affect



c. Congruence of affect



d. incongruity of the affect



**Question 34:Which of the following is NOT a characteristic feature of atypical depression?**

**Select one:**

a. Leaden paralysis



b. Reversed vegetative signs



c. Response to MAO inhibitors



d. Rejection sensitivity



e. Obsessional symptoms



**Question 35:In the treatment of bipolar depression in young women, caution must be used with which of the following agents because it may increase the risk of polycystic ovarian syndrome?**

**Select one:**

a. Quetiapine



b. Lamotrigine



c. Divalproex



d. Olanzapine



e. None of the above



**Question 36:In which of the following ways does the hyperactivity component of ADHD typically manifest in adults?**

**Select one:**

a. Motor tics



b. Pressured speech



c. Restlessness



d. Physical aggression



**Dementia secondary to which of the following is NOT reversible?**

**Select one:**

a. Nutritional deficiencies



b. Hypothyroidism



c. Stroke



d. Normal pressure hydrocephalus



e. Depression



**Question 38:Which of the following is true of Bipolar II disorder, when compared with Bipolar I ?**

**Select one:**

a. Involves manic states



b. Prone to psychotic symptoms



c. Prone to delusional behavior



d. Has a higher risk of suicide



e. Involves only hypomanic states



**Question 39:One of your regular out-patients with recurrent depression was recently Started on a medication but comes back with aggravated psoriatic skin Lesions. The most probable offending agent is**

**Select one:**

a. Lithium



b. Valproate



c. Onlanzapine



d. Zopiclone



e. Chlorpromazine



**Question 40:Which of the following should be included in a workup for bulimia nervosa?**

**Select one:**

a. Chest radiography



b. Brain MRI



c. Neuropsychological testing



d. Pregnancy test



**2019& 2018**

**ملاحظة هامّة :**  
 امتحان 2019 وامتحان 2018 كانوا نفس الأسئلة ..  
فلذلك أهم شيء هو دراسة أسئلة السنوات الأحدث فالأحدث ..

1. **Comes to her Gp a while later (2 or 3 weeks) with lower limb weakness (one side) what is the disorder is to be considered in addition to conversion?**  
   **MS**
2. **- patient with OCD having recurrent intrusive thoughts that are recognized by him to be products of his own mind and is on SSRIs... Later he starts thinking that these thoughts are being inserted into his mind by his family members and has no other symptoms (no hallucinations or other psychotic features) what is the dx ?**  
   **Delusional disorder**
3. **patient took some drug and he developed maculopapuar rash (psoriasis flair up ) what did he take?**  
   **lithium**
4. **women with magical thinking and odd behavior :**  
   **schizotypal pd**
5. **mildly confused old man brought to the ER by his son, when asked what wrong he gives the same answer to different questions?**  
   **Perservation**
6. **Which drug should be monitered carefully in PCOS ?**  
   **Olanzapine**
7. **female with obssesed with her physical appearance, shallow , labiale affect and egocentric ?**  
   **histerionicPD**
8. **Bipolar is associated with which PD ?**  
   **bordrline**
9. **not a poor prognostic factor of OCD**   
   **family Hx**
10. **all of these are true about etiology of autism except**  
    **Low serotonin**
11. **stimulant use in ADHD affects :**

**Hyperactivity**

1. **Alcohol in blood?  
   5 minutes**
2. **Fall down after party?**  
   **cataplexy**
3. **Delirium vs dementia?**

**short term and immediate memory**

1. **True about depression is?**   
   **Almost always associated with family hxOR initiate by trigger event?**
2. **patient take ectalopram come with muscle weakness and fatigue due tohyponatremia**
3. **DDx for Cushing's syndrome**  
   **depression**
4. **OCD treatment ?**  
   **behavior , SSRI , family support and surgery if refractory**
5. **dantrolene in Mx of?**  
   **Malignant neuroleptic**
6. **all these Reversable causes of dementia except :**  
   **stroke**
7. **Most important risk factor for suicide ?**  
   **Previous suicidal attempts**
8. **Relative contraindication for ECT ?**  
   **Space occupying lesion**
9. **Bipolar II differs from bipolar I ?**  
   **More suicidal risk**
10. **in mania ?  
    decrease need of sleep**
11. **Adult ADHD ?**  
     **restlessness**
12. **Old woman with mania and left hemisphere CVA differs from bipolar ?  
     irritability**
13. **Regarding Atypical depression which is wrong ?**  
    **OCD**
14. **someone not taken care of his appearence and his clothes is dirty which is not DDx ?**   
    **social phobia**
15. **according to some Jasper which is most important thing in psychiatric assessment ?**   
     **Empathy**
16. **Narcissistic personality disorder most accurate answer ?**  
    **assosiated with cormorbid axis I disorder**
17. **In Bulimia nervosa , What is the firs Investigation we do ?**  
    **Pregnancy test**
18. **nihlistic delusion associated with which disorder :  
    depression**
19. **Clozapine agranulocytosis:  
    Female gender**
20. **Dissociative fugue :  
    Far away with assumption of new identity**
21. **Not smiling when hearing a joke:  
    Reactivity test**
22. **patient caught with shoplifting and the lawyer claims she has kleptomania, which of the following not support the Dx?**   
    **this is her first time**
23. **The most important predictor for long term functioning in schizophrenia ?   
    Congnitive impairment**
24. **High relapse in schizophrenia ?**   
    **High emotional expression**
25. **The most common in dementia ?**   
    **Apathy**
26. **Not poor prognostic factor in depression?**

**Q ) patient with enuresis i think following loss of a job being treated with :**  
 **SSRI or TCA i don't remember...**

1. **The capacity to formulate concepts and generalize them:**

* Concrete thinking
* **Abstract thinking**
* Delusional thinking
* Intellectualization
* Rationalization

1. **Giving information that may not be related to the original inquiry:**

* Loose association
* Circumstantiality
* Tangentality
* Echolalia
* Neologisms

1. **An elderly mildly confused, to emergency , repeat the same answer for each Q. example of:**

* Fixation
* Tangentality
* **Preservation**
* Echolalia

1. **Increase rate of hospitalization in which type of personality disorder:**

* Dissociative
* **Borderline**
* Anxious
* Antisocial

1. **70 years manic pt after cva in the left hemisphere .. In comparison to adult bipolar she will complain of:**

* Reckless
* Increase delusions
* Suicidal thoughts
* Sexual behavior
* irritability

1. **Lewy body dementia, drug of choice is:**

* **rivastigmin**
* donzepil
* prisperidon
* clozapine

1. **Most common association with PTSD is :**

* loss event
* combat
* car accident
* natural disaster
* sexual assult

1. **Least cardiac side effect with haloperidol therapy :**

* **Atrail fibrillation**
* Palpitation
* Ventricular fibrillation
* Torsades de pointes

Sudden cardiac

1. **Patient complain of cellulitis , then develop hallucination , paranoid ideation and delusion . The first thing to assess is :**

**Orientation**

1. **Person wear yellow underwear to keep day sunny is an example of :**

**magical thinking**

1. **All of the following are symptoms of inhalant addiction except :**

**Hyperreflexia**

1. **How u usually spend your leisure time , the psychiatrist in this question try to test :**

**personal trait**

1. **Which of the following differ in bipolar 2 from bipolar 1 :**

**higher suicidal thought**

1. **Worst prognostic sign in patient with anorexia nervosa :**

**late onset**

1. **What clinical symptom associated with worst outcome in schizophrenia:**

**Negative symptom**

**\*\* if Q Is best indicator for long term function>> cognitive impairment**

1. **Which of the following is relative contraindication in ECT:**

**Space occupying leasion**

1. **Patient see her son die in car accident then for 3 weeks after the accident she develop hyperarousal , avoidance and reexperience symptoms what dx ?**

**Acute stress disorder**

1. **Risk factor for clozapine agranulocytosis :**

**female gendre  
Q ) Pt. till you what he feel right now while he is in the clinic , is :**

**subject affect**

1. **Pt. think that his neighbor can order him and push him to do things he don't like to do :**

**delusion of control**

1. **Taxi driver have thoughts that he runs over a child when drive thru the road , and can't relive these thoughts until he go back and check the road :**

**OCD ( explanation : an obsession relived by compulsion ).**

1. **Pt with slow motion an delaying in speech:**

**Psychomotor Retardation**

1. **Restlessness with inner tension. Patient is NOT fully aware of restlessness:**

**Agitation**

1. **Restlessness with inner tension. Patient is fully aware of restlessness:**

**Akathisia .**

1. **Ability to sustain focus ,ask patient to :   
   1- substract 7 from 100 2- name the days in backword manner , Example of :**

**Concentration**

1. **Severe painful muscle spasm of ( neck, back ,eyes,tongue ) is**

**Acute dystonia**

1. **Restless movement of group of muscles mainly orofacial ?**

**Tardive Dyskinesia**

1. **Person drop after party ?**

**Cataplexy**

1. **pt look at bee when dr talk to him,example of :**

**Inattention**

1. **Which ex to do in Pt with delirium ?**

* **Orientaion**
* **Cognitive( the orientation is part of cognition ) مالازميجومعبعضبنفسالخياراتاتوقع**

1. **Pt wake up and find himself in different place ?**

**DID(dissociative personality disorder)**

1. **Risk factor for autism?**

* **50time in family**

1. **Dx of panic attack ecept:**

**Carcinoid syndrome .**

1. **Conversion more common in:**

**combat**

1. **Doctor asks patient if he thinks he is ill, doctor is asking about?**

**Insight**

1. **PTSD occurs most commonly in?**

**sexual assult**

1. **Patient is unable to express emotions?**

**Possible Alyxthmia**

1. **Patient believes people in blue cars are terrorists and are going to kill him, delusion of what?**

**Perception**

(اذاكاناعتقادعامعندالمريضبانهايسيارهزرقاءفيهاناسرحيقتلوهفبكون persecution)

1. **Patient is thinking and he feels thoughts stopping, this is?**

**Thought block**

1. **Mother has lost her child, 3 weeks later she is unable to sleep, has nightmares, scared to go anywhere and keeps having flash backs, this is ?**

**Acute stress disorder**

1. **The most important aspect in dementia is ?**

**Apathy**

1. **The difference between dementia and deleruim is ?**

**Acute onset of delirum**

1. **In schizophrenia , doing the daily activity indicate which aspect ?**

**Social activity or motivation**

1. **All are risk factor for dementia except ?**

**Live alone**

1. **Patient denies alcolol drinking , what to do ?**

**GGT**

1. **Flumazenil in antidote for ?**

**Benzodiazepine**

1. **High relapse rate in schizophrenia is related to ?**

**High EE (Hight expressed emotions)**

1. **Best ttt for OCD IS ?**

**Exposure and response prevention**

1. **Drug for OCD is ?**

**Clomipramine**

1. **Which of the negative symptoms of schizophrenia does the psychiatrist test when ask " did he do his hobbies and productive activities” :**

**Avolition**

1. **Most annoying thing for dementia patients:**

**agitation i think**

1. **Which SSRI not cause sexual dysfunction ???????**

**All cause sexual dysfunction but the least is estalopram**

1. **Depressesdpt. with paranoid ideations, suicide thought .the best mental exam to do is?**

**orientation**

1. **Pharmacology in pain syndrome??  
   not cause addictionه**
2. **Testutorycapacity?   
   Legal to act will**

**18-adult adhd differ from young adhd?**

**Restlessness**

19- **schizoaffective** :

**At least 2 week psychosis but not prominent mood symptom**

**19- not actylcholine esterase inhibitor used in treatment of dementia :   
memantine  
70 y old female developed mania after vascular event what differ in her management than mania :  
lithium high dose**

1. **Pt. till you what he feel right now while he is in the clinic , is :**

**subject affect**

1. **Ex. of Thought blocking**
2. **Ex. of Illusion**
3. **Ex. for Concentration (mental status examination )**
4. **Ex. of JUDGMENT**
5. **Ex. of ABSTRACT THINKING**
6. **Ex. of INSIGHT**
7. **Ex. of Acute Dystonia**
8. **Ex. of Tardive Dyskinesia**
9. **Ex. of Pseudo-Hallucinations**
10. **Reversable brain damge occur during drinking alcohol?**

**black out**

**Question about hyper prosexia?  
Hypermnesia: (Hyperprosexia)(عادةبيجيعليهاأسئلةMCQ )**

is excessive retention of memories especially of details. Increased Attention, is rare and seen in normal people, mania, paranoid personality and disorder, Patients suffering traumatic brain injury

1. **Doctor is asking patient about time ? he is checking for what illness?  
    delerium**
2. **Nurse calls the doctor saying the patient is in and out of consciousness and in unable to identify people ?  
   delerium**
3. **Patient has abnormalities in thinking, this is an abnormality in what?**
4. **Doctor asks patient to repeat 7 numbers after him, he is checking for?  
     attention**

**The doctor tell his patient 7 numbers and ask him to repeat them after few seconds , this to asses ?**

**Attention**

1. **All cause depression except ?**

**Pheochromocytoma**

1. **Man after social event loosed his ability to stand and fall down , this is ?**

**Cataplexy**

**Patient that has symptoms for three weeks after accident where her child die and then she has symptoms of avoidance to ride or drive a car with symptoms of anhedonia and insomnia:**

**Acute stress disorder**

1. **Best treatment for ocd from tricyclic antidepressants:**

**Clomipramine**

1. **Most annoying thing for dementia patients:**

**agitation i think**

1. **Doctor asks about hobbits and productivity of schizophrenic patient... assess what from negative symptoms :**

**avolition**

1. **Patients believes people in blue are terrorists and are going to king him:**

**delusional belief**

1. **Q about alcohol screening :**

**person drops after party:**

* **waxy flexibility**
* **cataplexy**
* **catalepsy posture**

**5.. Mother with 3 kids below 11 yr... Unemployment ... Theory ?  
social circumstance as risk factor for mood diorder**

**Psycho Exam 2015/2016  
Mutah University**

**Done by : Sara Irshidat&NeveenRadwan**

**1 - Dementia vspseudodementia all except :   
 verbal memory /execution /**

**4- all are in favour its epileptic seizure ,except :  
when you try to hold the patient to stop it but it increases -\_- !**

**7- LSD stay in urine :  
1-3 days**

**9- Schizophrenia is:  
hypoglatamate (back to slide7)**

**11- good prognosis in schizophrenia :  
positive symptom**

**13- Q about Bipolar I :   
case with family history**

**14- double depression , one of the following :  
 dysthymic patient develop major depression.**

**15- all are wrong except :   
( two options were about the clusters and their subtypes .. one of them was the answer ) Personality disorder**

**16- Hystrionic personality disorder definition**

**18- Two other questions about ECT (electroconvulsive therapy)**

***19- Forensic seminar :about the definitions :truancy , well ,capacity***

**20- OCD association :  
 Sydenham Chorea**

**21- Question about somatoform disorders :**

**22- Bipolar I vs Bipolar II :  
increase suicidal risk**

**23- Rare side effect of Haloparidol :  
 (all the answers are SEs of haloperidol .. the dr wants the least one )  
neuroleptic malignant syndrome if present**

**24-QTS syndrome the least :  
atrial fibrillation**

1. **واحدوضعهكثيرمبهدلومابهتمبحاله،واحدمنالتاليمشDDx؟  
   Social phobia**
2. **hormonal abnormalities w/ depression ?**Hypothyroidism **Hypercortinsim \*\*\***
3. **Stimulant in ADHD , affect ?  
   hyperactivity**
4. **regarding OCD, what true ?  
   behavioral then SSRI thenPsycho then ECT then neurosurgery**
5. **regarding factitious, come w/ ?**1-unexplained bleeding **2- recurrent hypoglcemia   
   3**- hemoptysis  
   4- all of the above  
   6- non of
6. **MC cause for presenile dementia ?  
   Vascular**Alzheimer
7. **regarding alzhImar survival ?  
   1-5 to 8 \*\*\***2- 10 to 12   
   3- 15 to 18
8. **regarding alcohol, detected in blood w/i ?  
   1) 5 min**2) 30 min  
   3) 45 min  
   4) 1 hr  
   5) none of the above
9. **drug given for alcoholic detoxification , act on opiod receptors ?  
   1)  naltrexone \*\*\***2) acambrosate   
   3) disulfram  
   4) buspiron
10. **Q about OCD , associated with ?   
    Sydenham chorea**
11. **Pts came to emergency with left side paralysis, low socioeconomic ?  
     Conversion disorder**
12. **Q about paranoid PD, Wrong thing?  
    need admiration**
13. **Antidepressants drugs used in urine incontinence ?   
    duloxetine**nortryptaline
14. **Atypical depression ?  
    Obsessional thoughts**
15. **Q about severe depression , suicidal attempt ?  
    - hopelessness**- revenge   
    - need for puntiment   
    - feeling of glutei
16. **douple depression come in pt w pervious ?  
    Dysthymia**
17. **True about OCD, MC presentation is ??   
    untreat for long time**
18. **most accurate about NPD (Narcissistic personality disorder)?  
    comorbed with axis 1 disorder**
19. **Q about ADHD , manifestation in adult ?   
    In attention   
    Motor tics   
    Hyperactivity   
    Conduct disturbance   
    All of above \*\*\***
20. **Great predictable long term functional of schizophrenia ??  
     cognitive dysfunction**
21. **Delirium vs dementia wrong ??  
    Short term memory loss in dementia \*\*\* (in dementia its recent memory and later remote memory)  
    Q about depression epidemiilogy ?**Rapid cycle more in man **Bipolar equal in men and women \*\*\***Bipolar is common among women
22. **Drug cause PCOS ?  
    Olanzapine**
23. **Medical student complaining of insomnia ?  
    zolpidem**
24. **cocaine act on except ?  
    \*\* Note : cocaine act on : NE , DA , 5HT**
25. **separation anxiety disorder, what is wrong ?  
     for at least 6 months**
26. **regarding postpartum, what is right ?**Postpartum depression, after 1 week  
    Postpartum blue, after 1 month  
    Pituitary apoplexy, after 12 months **Post partum psychosis**, **after 2 weeks**  
    All of above
27. **Q about drug affect GABA metabolism ?  
    \*\* Note : gabapentin act on high voltage Ca- channel and no effects on gaba metabolism or gaba receptors**

**2010**

**– A 35- year- old man presented with depressed mood, anhedonia,poor appetite, early morning wakening, and retardation. He was commenced in straline and improved a little . He, however,complained of erectile dysfunction which he did not have before. Which antidepressant you would recommend to help this patient?**

A . Fluoxetine.

B . Desipramin.

C . Trazodone.

**D . bupropion**

E. Phenelzine.

**2-A 28-year –old taxi driver is chronically consumed by fears of having accidently run over a pedestrian. Although he tries to convince himself that his worries are silly, his anxiety continues to mount until he drives back to scene of the “accident” and proves to himself that no body lies hurt in the street. This behavior best exemplifies which of the following?**

**A.A compulsion secondary to obsession.**

B. An obsession triggered by a compulsion.

C. A delusional ideation.

D. A typical manifestation of obsessive- compulsive personality disorder.

E. A phobia.

**3- You are called to emergency room to evaluate a male patient brought by the police for bizzare behavioral (i.e.,talking to himself in the public, gesturing for no apparent reason). The patient is unkempt,his speech is odd and idiosyncratic, although there is no overt psychosis.A drug screen is negative. There no information on whether gradual social deterioration has occurred.Your preliminary diagnosis is a personality disorder, which is the most likely personality disorder?**

A . Paranoid personality disorder.

B . Schizoid personality disorder.

**C . Schizotypal personality disorder.**

D . Narcissitic personality disorder.

E . Borderline personality disorder

**4- Which of the following features differentiate delirium from Alzheimer ‘s dementia ?**

**A . Acuity of onset and level of consciousness.**

B . Level of consciousness and orientation.

C. Acuity of onset and orientation.

D . Visual hallucinatios and memory.

E . Memory and level of consciousness.

**5- which one of the following drugs causes substantial weight gain:  
a- imipramine >> causes weight gain**

b- mirtazapine >> metabolic syndrome >> weight gain

6- which drug of choice to treat premature ejacluation:   
fluxitien+sertraline

**7- which drug less likely to cause EPAD>>?? Not know what epad mean :**a) chlorpromazine   
b) olanzapine

**c) clozapine**

d)Quedtiapine

e) ??

**8-patient came to the ER with symtoms of : hyperthermia, tremor, myoclonic jerks .. “ serotonin syndrome symotoms” which one of the drug combination she had taken :**

**Sertraline + phenelzine**

**9- which one of tricyclic antidepressant is used for OCD : “ i guess hek el so2al”   
clomipramine**

**10- “about alcohol” which one decrease GABA and increase CNS depression with alcohol :**a) alkaline phosphatase

**b) disulfiram**

**11- an emergency condition , symptoms of ataxia cofustionnystagmus gaze palsy , caused by thiamine def. :**

**Wernick’s encephalopathy**

**12- rare syndrome characterised by hyperoralityhypersexuality and abnomal behavior**

[**Klüver–Bucy syndrome**](http://en.wikipedia.org/wiki/Kl%C3%BCver%E2%80%93Bucy_syndrome)

**13- patient presented to the ER with syptoms “nseet,hum :P” el mohem Lithium blood level = 4.2 .. Managment?**

**Hemodialysis**

**15-which one less likely to cause agression**

**a) alcohol**

b) cocaine

c) high dose marijuana

**16- not a criteria for bulimia nervosa**

**A)Poor Sexual adjusment aw eshemtlhek**

**17- according to DSM4 to diagnose mixed episode they should meen criteria for mania and?  
major depression**

**18-which one doesn’t cause depression :**

**Pheochromocytoma**

1**9- bipolar disorder:**  
a) there’s genetic causes

b) ECT may be needed in some cases

c)   
d) unipolar is more common on females   
e) all true

**20- which one of the following suggests dementia rather delirium:**  
a) LOC

b) ??? recent or immediate memory is normal

c)days to weeks

**d)progressive**

e)

**21-which site of the brain reposible for the major adrenergic release ??**

a) nucleus solitaris

b) cingulate gyrus

c) nucleus proprius

d)??

**e)?? he locus coeruleus**

**22- biochemical theories that improves serotonin relation to schzio through?**

**LSD induces psychosis**

**23- about deja vu not true:**

a) common in normal people

b) it’s unusually found in schizophrenia

**c) familiar situations felt as freshed ?**

d) situations perceived as familiar

**25- which one of the personality disorders most likely to benefit from adjuvant pharmacotherapy**   
**borderline**

**26- decrease level of HLAA a metabolite of serotonin may cause all except   
a) depression**

b) anti sociality

**c) negativism**

d) impulsivity

d) fire

**27- personality disorders:**

a) type a includes avoidant

b) type b includes dependet

c) type c are emotional and dramatic

d)??

**e) all are false**

**28- high rates of PTSD noticed with :**

Combat

**29- most common cause of demetia of ppl> 65 yrs of age**

Alzheimer

**30- dementia with parkinsonism hallucination .... ,due to:**

Lewy body

**31- when you was examining a pt “ nseet el case “ bskan 3ndu disorder of speech**

**Cases** :

**Case1: Patient diagnosed as major depressive episode with suicidal thought.**

**Q1: thought what is sleep disorder most likely have?   
Early waking**

**Q2: what is hormonal disturbance suspected ?  
Hypothyroidism and high glucocorticoid**

**Q3: what appropriate treatment?  
ECT**

**Case2: : Lawyer with belief that his friend want to destroy his success without hallucination or functional impairment**

**Q1: Diagnosis ?  
Delusional disorder**

**Q2: :DDX?   
paranoid PD or schizophrenia**

**Q3: ttt?  
psycotherapy and medications**

**Case3: What is the type of Personality Disorder ??  
( answer was : schizotypal PD)   
Mention 3 DDx. ?? What is the treatment ??**

**Case4: : Patient already had two major episodes of depression in the past, he returns today with the same symptoms but asks not to take TCA another time due to it’s side effects**

**\* First line of management: SSRI\* Give 4 types of SSRI  \* 4 GI side effects**

**\* What sexual dysfunction does SSRI cause for men and women?**

**Case5:Student comes complaining he is too shy and nervous in front of classmates, he comes to the doctor because he has to prepare a seminar in front of everyone, he wishes people could see how funny he is but that only happens in front of his family**

* **Give a diagnosis**
* **Give 3 other deferential diagnosis**

**Case 1: case of major depression :**  
**1.most sleep disorder in major depression:   
early awakening   
2.hormon problem :  
cortisol   
3. First choice treatment:  
 ECT   
4. 2nd choice:   
SSRI**

**Case 2:   
1. 5 medical ddx:  
pheochrom-hypergly-asthma attack-MI-hyperthyroid   
2. Your provesional dx:  
panic disorder  
3. Most likely complications:  
self injury**

**32- women after her house was burnt :  
 PTSD**

**33-a girl flushes when she is asked a question in school and prefer to sit in last seat to be unnoticed :  
 social phobia**

**34- a nun found in a distant city works in a cabare! She says she doesn’t remember anything about her life:  
dissassociative fugue**

**35- women climbs stairs of 12 floor ‘cuz is afraid of being stuck in an elevator :  
 specific phobia**

**36- woman with symptoms of tachycardia dry mouth ... etc she said she felt that she gonna die and she was afraid ,, same symptoms happened 4 times in the last month:  
panic disorder**

**37- someone who thinks he has nasal septal deviation , others see it normal but he insists that abnormal:  
 body dysmorhic disorder**

**38- someone who thinks bowel irritablity is caused by cancer :  
hypochondiasis**

**39- somatoform disorder**

**Q1. one is false**

1. **8 in 10 persons in developed countries are hospitalized in psychiatric Hospitals**

**Q2. risk for suicide include all of the following except**

1. **young females**

**Q3. biochemical theory as etiology of affective disorders include all except**

1. **increased sensitivity of postsynaptic receptors to monoamines**

**Q4. clinical features of dementia , one is false**

1. **disorientation \*\*\* ( the answer is from the doctor)**
2. emotional lability
3. memory impairment
4. personality disturbance in the late stage

**Q5. clinical features of delirium, one is false**

1. **impairment of recent & remote memory \*\*\* ( the answer is from the doctor)**

Q6**. schizophrenia , one is false**

1. **adoptive studies show no difference in incidence between children of**

**schizophrenic mothers &conrol group**

**Q7. anxiety disorders, one is false**

1. **there is well established neurobiological evidence**

**Q8. all are causes of irreversible dementia except**

1. alcoholism

**Q9. all pairs are true ( organic dse in D.D of psaychiatric disorder) except**

1. hyperthyroidism ……. Anxiety disorder
2. **hypocalcemia ……... obsessive compulsive**
3. HIV …… depression

**Q10. personality disoreders definition , one is false**

1. **variation of traits due to other mental disorder**

**Q11. anankastic (obsessive ) personality CCCs , one is false**

1. **oversensitive**

**Q12. good prognostic factors for anxiety, one is false**

1. **+ve family history**

**Q13. poor prognostic factors for schizophrenia , one is false**

1. **late onset**

**Q14. benzodiazipenes side effects include all except**

1. **anticholinergic effects**

**Q15. panic disorder, one is false**

1. **free floating**

**Q16. post traumatic stress disorder , one is false**

1. **occure after few minutes to the stressful event**

**Q17. dysthymic disorder features one is false**

1. **diurnal variation (its feature of melanocholia)**

**Q18. obsessive compulsive ,one is false**

1. **can be controlled by strong will**

**Q19. obsessive compulsive ,one is false**

1. **controlled by devils**

**Q20. obsessive compulsive treatment ,one is false**

1. **tell the patient to stop these thoughts depending on his religious belief**

**Q21. one is a sexual disorder**

**1)Premature ejaculation**

**Q22. one is an induced movement**

1. **echopraxia (imitation of other movement)**

**Q23. one is NOT in behavioral therapy**

1. **psychodrama**

**Q24. classification of psychiatric disorders is based on**

1. **symptomatology**

**Q25. definition of psychiatric disorders is by**

1. **group of signs & symptoms**

**Q26. the main difference between hypochondriasis & somatisation disorder is that**

1. **hypochondriasis … fear of having serious dse**

**Q27. the main symptom of delirium is**

**10 clouded consciousness**

**Q28. the main feature of anorexia nervosa is**

**10 fear of normal body weight**

**Q29. all are D.D of anxiety disorder except**

1. **Addison dse**

**Q30. all are D.D of depression except**

1. **psychotic depression**

**Q31. ALL are features of depressive disorder except**

1. **change from day to another**

**Q32. mania , one is false**

1. **patient has insight**

**Q33. all are features of schizophrenia except**

1. **altered consciousness**

**Q34.formal thought disorder means**

1. **loss of causal links between successive thoughts**

**Q35. hysterical disorder , one is false**

1. **the patient shows concern about his illness**

**Q36. delusion CCCs , one is false**

1. **it is shared by community**

**Q37. all are early side effects of anti-psychotics except**

**1) tardive dyskinesia**

**Q38. the answer is charcot ( a name for psychiatrist )**

**Q39. the answer is anti-psychotics alone**

1. **In clinical practice, psychiatry differs from physical illness in ONE of the following:**
2. The presence of specific pathological etiology
3. Clinical examination is essential to reach the diagnosis
4. **The diagnosis depends on the presence of a group of symptoms characteristic of a disease. XXX**
5. The use of lab investigations
6. The presence of specific treatment
7. **Descriptive psychopathology differs from dynamic psychopathology in ONE of the following:**
8. Symptoms result from brain dysfunction
9. Trying to be in the patient’s shoes
10. **Describing in words the nature of the experience XXX**
11. Depends on intrapsychic forces to explain the symptoms
12. The use of empathy rather than sympathy
13. **All of the following are disorders of behaviour, EXCEPT:**
14. Echopraxia
15. Stupor
16. Stereotype
17. Mannerism
18. **Mutism XXX**
19. **The talk is rapid and continuous but fragmentary, the connection between successive ideas is determined by chance association, this is:**
20. **Flight of ideas XXX**
21. Incoherence
22. Blocking
23. Circumstantiality
24. Irrelevance
25. **ONE of the following is a primary delusion:**
26. Delusion of misinterpretation
27. **He suddenly realises the he is the next prophet to come XXX**
28. She thinks that someone prestigious is in love with her
29. He thinks that people are talking about him all the time
30. He thinks that he is dead
31. **The following hallucinations refers to organic cause rather than psychiatric cause:**
32. Without precipitation
33. **Seeing figures in the space XXX**
34. Feeling insects walking on him
35. Commentary voices about him
36. The echo of his thinking
37. **Classification of psychiatric disorders depends on ONE of the following:**
38. The understanding of pathophysiological mechanism of illness
39. The shared treatment
40. **Constellation of symptoms XXX**
41. The physical signs of the illness
42. The underlying cause
43. **The followings causes of dementia can be reversible with treatment, EXCEPT:**
44. Meningioma
45. Normal pressure communicating hydrocephalus
46. **Punch drunk syndrome XXX**
47. Multi-infarct dementia
48. Subdural haematoma
49. **Psychotic disorders differ from neurotic one in all following EXCEPT:**
50. Insight is lost
51. Personality distortion
52. **Intelligence level is affected XXX**
53. Can not differentiate between objective and subjective experiences
54. Gross disorder of basic drives
55. **ONE of the following is not a sexual deviation disorder:**
56. **Homosexuality xxx**
57. Trans-sexuality
58. Paedophilia
59. Transvestism
60. Exhibitionism
61. **The following pairs are correct EXCEPT:**
62. SLE ---------- schizophrenia
63. HIV encephalopathy ------------- dementia
64. Hypothyroidism ---------------- depression
65. Hyperthyroidism ------------- anxiety
66. **Hyperparathyroidism -------------- delirium XXX**
67. **Regarding the etiology of anxiety disorders, all the following are correct EXCEPT:**
68. PET scan shows abnormality in the parahippocampus
69. Conditioning
70. Threat to self esteem
71. Secondary to physical illness
72. **Increase in serotonin concentration (may decrease in ocd**
73. **Panic attack differs from phobic attack in ONE of the following:**
74. Tachycardia
75. Sweating
76. Muscle tension
77. **Avoidance of specific stimulus XXX**
78. Palpitations
79. **Regarding Panic attack, ONE is true:**
80. There is depressive symptoms between the attacks
81. The patient predicts the attack
82. **There is severs symptoms during the attack and no or mild ones between them XX**
83. Precipitated by stress
84. Tends to occur in the evening rather than the morning
85. **Regarding the etiology of obsessive compulsive disorder, ONE is false:**
86. There is deficiency of serotonin in strategic areas in the brain
87. There is abnormal glucose metabolism in the prefrontal cortex
88. There is frontostriatal dysfunction
89. MZ studies show higher concordance than DZ studies
90. **There is regression to the anal stage regarding the psychoanalytic theory**
91. **Regarding obsessive personality disorder, the following are true EXCEPT:**
92. **Parsimonyبخل**
93. Suspiciousness
94. Caring about details
95. Meticulous
96. Perfectionism
97. **Obsessions in schizophrenia differs from those in OCD in:**
98. They are irresistible by the patient
99. Do not cause significant distress
100. Often seeks psychiatric help
101. Are usually bizarre
102. **Thought to be due to the power of external agency**
103. **ONE of the following pairs is incorrect:**
104. Hippocrates: wondering uterus in hysteria
105. Janet: emphasized the suggestibility and dissociative features of hysteria
106. Freud: psychoanalytic approach
107. **Bleuler: dementia praecox XXX**
108. Avicenna: differentiated hysteria from epilepsy
109. **Pseudoseizure differs from epileptic seizure in all of the following EXCEPT:**
110. **There is neurological signs XXX**
111. Does not occur in dangerous places
112. Does not occur during sleep
113. There is both conscious and unconscious gain
114. The presence of purposive movements
115. **Somatoform disorders differ from hypochondriac disorders by all the following EXCEPT:**
116. The emphasis of the patient on his symptoms
117. Accepting drugs
118. **The conviction of serious underlying illness XXX**
119. Symptoms may be referred to any part of the body
120. Refuses psychological basis for his illness
121. **Features of PTSD include all the following EXCEPT:**
122. Detachment from other people
123. **Sense of numbness immediately after the trauma XXX**
124. Loss of interest
125. Avoidance of situations reminding the patient of the accident
126. Anxiety and depression due to hypervigilence
127. **Characteristic of anorexia nervosa EXCEPT:**
128. Disturbed body image
129. Fear of adolescent weight
130. Deliberate loss of weight
131. **Loss of appetite XXX**
132. Happy with amenorrhea
133. **ONE of the following is a characteristic physiological feature of depression:**
134. Loss of interest
135. Worthlessness
136. Delusion of guilt
137. **Early morning wakening XXX**
138. Obsessional thoughts
139. **Regarding the etiology of affective disorders one is incorrect:**
140. Increase in intracellular sodium in depression and further increase in mania
141. Increase plasma cortisol level in depression
142. Intraneuronal deamination of monoamines
143. Can be transmitted as X linked ْْْ
144. **Dopamine depletion in certain areas in the brain )**

May increase in mania

1. **All the following are used in the treatment of depression EXCEPT:**
2. Social therapy
3. Behavioural therapy
4. Social help
5. **Dopamine inhibitors XXX**
6. Serotonin reuptake inhibitors
7. **All the following are negative symptoms of schizophrenia EXCEPT:**
8. Loss of motive
9. Withdrawal from society
10. Poor hygiene
11. **Loss of emission and ejaculation XXX**
12. Loss of interest
13. **ONE of the following epidemiological studies is wrong:**
14. Anxiety affects about 5% of the general population
15. Depression affects about 3-4% of the general population
16. OCD affects about 0.05% of the general population
17. **Life time risk for developing schizophrenia is 10% XXX**
18. Incidence of dissociative disorder in USA is 12 per 100000
19. **The hallmark of delirium is:**
20. Abnormal affect
21. Abnormal conduct
22. **Clouded consciousness XXX**
23. Recent memory loss
24. Anxiety
25. **The hallmark of korakov dementia is loss of:**
26. Recent and remote memory
27. Recent and intermediate memory
28. **Recent alone XXX**
29. Remote alone
30. Intermediate alone
31. **The following are side effects of benzodiazepines EXCEPT:**
32. Respiratory depression in high dose
33. Cognitive dysfunction
34. **Dry mouth XXX**
35. Memory disturbance
36. Agitation in some people
37. **The main side effect of lithium is:**
38. ADH deficiency
39. Diabetes insupidus
40. **Hypothyroidism XXX**
41. Hyperthyroidism
42. Hypoparathyroidism
43. **Regarding tardive dyskinesia, one is false:**
44. **Results from hypersensitivity of the postsynaptic receptors XXX (the mechanism is still poorly understood)**
45. Choreiform movements predominate
46. Is a late feature of antipsychotic use
47. Decreased if the drug dose is decreases
48. It is usually irreversible
49. **All following are not risk factors for suicide EXCEPT:**
50. **Divorced male XXX**
51. Married female
52. Young age
53. Successful life
54. No previous history of attempts
55. Regarding pain, one is false:
56. **Anxiolytic almost always relieve all types of pain**
57. Not a feature of anxiety disorder:
58. **Suicidal attempts**
59. Primary delusional disorder:

**Non bizarre delusion   
- Features of schizophrenia include all of the following except one :**

a. Poverty of thought

b. Thought withdrawal

**c. Disorientation**

d. Auditory hallucinations

e. Deterioration in performance

**77- The prevalence of schizophrenia in the general population is**

a. 4%

**b. 1%**

c. 10%

d. 20%

e. 0.1%

**78- Sympathetic stimulation causes the following except one :**

a. Pupil dilatation

b. Relaxation of bronchial smooth muscle

c. Inhibition of salivary secretion

**d. Stimulation of lacrimal secretion**

e. Tachycardia

**79- Hypothalamic functions are related to the following except one**

a. Sleep b. Appetite c. Memory

d. Sexual Behaviour **e. Fear**

**80- Features of hypomania may include one of the following**

a. Poverty of speech

b. Wise financial investments

c. Hyper somnia

d. Low activity

**e. Grandiose delusions**

**81- the treatment for heroin overdose is by one of the following :**

a. diazepam

**b. Naloxone**

c. Methdadone

d. amphetamine

e. vit B 12

**82- Diazepam works fastest when administered**

**a. Orally**

b. I.M.

c. S.C.

d. With antacid

e. With anticholenergics

**83- In an epileptic patient the following can provoke a fit except one :**

a. Hypoglycemia

b. Drinking a large a mount of bear

c. Fever

**d. Benzodiazepines**

e. Premenstrual stage

**84- Psychiatric disorders in the elderly may manifest by :**

a. Change in mood

b. Loss of weight

c. Perceptual changes

d. Constipation

**e. All of the above**

**85- Features of dementia are predominantly characterized by one of the following**

**a. Memory disturbance**

b. Acute onset

c. Hallucinations

d. Over eating

e. Normal sleep

**86- A 18 years old girl described recurrent visual and olfactory hallucinations, she started to believe strongly that she is a queen since six months, her social function has become odd. The most probable diagnosis is**

a. Delirium

b. Mania

**c. Schizophrenia**

d. Delusional Disorder

e. Dementia

**87- A 30 years old female presents to the clinic with recurrent attacks of tachyeardia, difficulty in breathing , and a fear that she is about to die. Investigations revealed normal findings the most likely diagnosis is :**

a. Angina pectoris

b. Agarophobia

c. Pheochromocytoma

**d. Panic disorder**

e. Acute depression

**88- Regarding obsessional compulsive disorder , one of the following is false:**

a. The patient recognizes that his thoughts are silly

b. The obsessions case marked distress

c. Obsessions are ego alien

d. Antidepressants are of good benefit

**e. Behavioural therapy is contraindicated**

**89- Normal experiences include all the following except**

a. Illusions

b. Ideas of references

c. Hypnogogiv hallucination

**d. Formication**

e. De ja vu

**90- Features of hypomania may include one of the following**

**a. Irritabiltiy**

b. Hyper somina

c. Narcoepsy

d. Poverty of thought

e . Delusions of nihilism

**91- Recongnised features of carbon monoxide poisoning except one :**

a. is often a complication of a blocked gas outflow in the heater

**b. often causes central cyanosis**

c. May cause myocardial damage

d. can cause coma

e. pink colour of the skin

**92- A brief lucid period is associated with**

a. brain tumor

**e. epidural hematoma**

c. subdural hematoma

d. subarachnoid hemorrhage

e. Brain edema

**93- Features of narcissim include one of the following**

a. a voidance behavior

**b. Self –love**

c. Confusion

d. Exhibitionism

e. Talkativness

**94- Regarding phobia one of the following is false**

a. Leads to avoidance

b. Situational fear occurs

**c. Over inclusive thought is a feature**

d. Displacement is a defense mechanism

e. Behavioral therapy is the best

**95- All The following are somatoform disorders except**

a. Hypochondriasis

**b. Dissociative disorder**

c. Somatization disorder

d. Psychogenic pain dis

e. Conversion disorder **96- Which of the following conditions may be associated with symptoms of depression**

a.Schizophrenia

b. alcoholism

c. Dementia

d. anxiety disorders

**e. All of the above**

**97- Recognized features of migraine include all of the following except :**

a. Usually unilateral

b. Associated with ophthalamoplegia

c. a Positive family history

**d. Commonly associated with a loss of consciousness**

e. dysphasia often occurs

**98- which of the following types of epilepsy mot frequently displays automatism**

a. Grand mal

b. Jacksonian

**c. Temporal lobe**

d. Petiti mal

e. Generalized

**99- Regarding obsessional compulsive disorder, one of the following is false**

a. The patient recognizes that this thoughts are silly

b. The obsessions cause marked distress

c. Obsessions are ego elien

d. antidepressants are of good benefit

**e. Bahavioural therapy is contraindicated**

**100- Regarding conversion disorder, one of the following is false :**

a. Paralysis, ataxia, aphonia may occur

b. there is close temporal relationship between symptoms and stress

c. The person is not conscious about the symptom

**d. Right sided symptoms are coomon than left sided symptoms**

e. It is a subtype of somatoform disorder

**21-One of the following statements is not true about depersonalization;**

A. Can occur in up to 30% of all new out-patient referrals.

B.It is always unpleasant.

C. In most cases of depersonalization, insight is lost.

D. It can be pleasurable and enjoyable.

E. It involves a change in the awareness of self.

**22-A 22-year-old woman is seen by a psychiatrist in the emergency room after she was walking in the middle of a busy street with no shoes on.During her interview she asked to count backwards 100 by 7’s. Which of the following best describes the cognitive functions being tested by this request?**

A. Orientation.

B. Immediate memory.

C. Fund of knowledge.

**D .Concentration**

E. Abstract reasoning.

**23-A 32-year-old man complains of depressed mood, poor concentration, a25- lb weight gain, and hypersomnia. He is subsequently diagnosed with hypothyroidism. Which is the most appropriate diagnostic axis?**

A. Axis I

B. Axis II

**C. Axis III**

D. Axis IV

E. Axis V

**24-Conversion (dissociative) disorder is characterized by all following statements; except**

A. Sudden loss of sensory or motor functions

B. Often preceded by stressful life event.

C. Patients appear relatively unconcerned.

**D.Patients may refuse to appear in public.**

E. More common in young adults and adolescents

**25-A 14-year- old boy is with erythematous , chapped hands, and an otherwise normal physical and laboratory examination. What is the most likely diagnosis?**

A.Anorexia nervosa.

**B. Obsessive-compulsive disorder.**

C. Hypochondriasis.

D. Bulimia nervosa.

E. Pyromania.

**26-A 28-year –old taxi driver is chronically consumed by fears of having accidently run over a pedestrian. Although he tries to convince himself that his worries are silly, his anxiety continues to mount until he drives back to scene of the “accident” and proves to himself that no body lies hurt in the street. This behavior best exemplifies which of the following?**

**A.A compulsion secondary to obsession.**

B. An obsession triggered by a compulsion.

C. A delusional ideation.

D. A typical manifestation of obsessive- compulsive personality disorder.

E. A phobia.

**27-A 34-year-old man complains of feeling blue at his first visit to you. An mental status examination reveals a disheveled appearance, a depressed mood,psychomotorretardation,and suicidal thoughts . thought processes are significant for thought blocking and some slowing.Deficits with remote and short –term memory are noted .Judgment and insight are also impaired. Your diagnosis is a major depressive episode . What is the best treatment of choice of this patient?**

A .Selective serotonin reuptake inhibitors (SSRIs).

**B.Electro-convulsive therapy (ECT).**

C.Serotonin/ Norepinephrine antagonist

D. SSRIs and atypical antipsychotics

E. SSRIs and cognitive psychotherapy.

**28-A patient places a call after hours to the practice you are covering .You do not have access to the patient chart but learn that the history suggests the patient experiences dysthymia followed by episode of hypomania. In making a dicision about patient’s medication, you quickly recognize the diagnosis. What is the most likely diagnosis?**

A.Bipolar I

B. Bipolar II

C. Rapid cycling

**D. Cyclothymia**

E. Mixed episode ( manic- depressive state)

**29- A 20-year- old woman who presented to your office one month ago with postpartum depression returns for follow up. She states that her mood is improved shortly after beginning fluoxetine. Her energy is greatly improved . She states she has cleaned her house several times and is sleeping only 2 to 3 hours each night. She is speaking quickly and appears distractible.The most appropriate treatment would be:**

A . Increase her fluoxetine.

B . Schedule electro-convulsive therapy.

**C . Begin a mood stabilizer and stop fluoxetine.**

D . Begin dialectical behavioral therapy.

E . Begin cognitive- behavioral therapy.

**30- A patient with refractory depression has received electro-convulsive therapy(ECT) . Which of the following is true of this treatment:**

A . Bilateral ECT has fewer side effects than unilateral.

**B . Bilateral ECT is more effective than unilateral.**

C . ECT is only indicated for refractory depression.

D . The most common side effect is seizures

E . ECT is contraindicated in psychosis.

**31- Early-onset Alzheimer’s dementia due to mutation in the amyloid precursor protein genes, presenilin 1 and presenlin 2,are transmitted by what mode of inheritance:**

**A . Autosomal dominant.**

B . Autosomal recessive

C . X- linked

D . Trinucleotide repeat.

E . Polygenic

**32- You are called to emergency room to evaluate a male patient brought by the police for bizzare behavioral (i.e.,talking to himself in the public, gesturing for no apparent reason). The patient is unkempt,his speech is odd and idiosyncratic, although there is no overt psychosis.A drug screen is negative. There no information on whether gradual social deterioration has occurred.Your preliminary diagnosis is a personality disorder, which is the most likely personality disorder?**

A . Paranoid personality disorder.

B . Schizoid personality disorder.

**C . Schizotypal personality disorder.**

D . Narcissitic personality disorder.

E . Borderline personality disorder.

33-A Borderline personality disorder is characterized by all the following ; except ;

A . Impulsivity and unpredictable behavior.

B . Identity disturbance.

C . Mood instability and short psychotic episode.

**D . Withdrawal from social activity.**

E . Recurrent suicidal gestures.

**34-You asked to visit a patient at home following concern from his family, after the death of his mother.He has always been a loner, preferring to be by himself than with others,when his sister told him that his mother had died ,he showed little emotion,and attended her funeral in jeans and a dirty T-shirt, much to family’s disgust. He had always been quit as a child,and seemed to neither seek nor enjoy the company of other chidren. He currently lives alone and spend all of his time repairing and building a variety of electrical appliances. What is the most likely diagnosis?**

A . Paranoid personality disorder.

**B . Schizoid personality disorder**

C . Schizotypal personality disorder.

D . Dependent personality disorder.

E . Avoidant personality disorder.

**35- Which of the following features differentiate delirium from Alzheimer ‘s dementia ?**

**A . Acuity of onset and level of consciousness.**

B . Level of consciousness and orientation.

C. Acuity of onset and orientation.

D . Visual hallucinatios and memory.

E . Memory and level of consciousness.

**36- A 6-year- old boy who is having difficulty in school and avoids interaction with his classmates and others, who notice him making odd repetitive movements with his hands. What is the most likely diagnosis?**

**A . Autism.**

B . Selective mutism.

C . Childhood schizophrenia.

D . Asperger.

E . Attention- deficit hyperactivity disorder.

**37- A 9-year-old boy is referred to you for evaluation after increasingly disruptive behavior in school. The boy will make a disruptive sounds or shout out in the class. They describe him as polite and neat but restless and jumpy, which is the most likely diagnosis ?**

A . Obsessive-compulsive disorder.

**B . Attention-deficit hyperactivity disorder.**

C . Oppositional defiant disorder.

D . Tourett’s syndrome.

E . trichotillomania .

**38- A 30-year- old female with history of bipolar affective disorder is currently breast feeding her child in community has relapsed ,it does not warrant hospitalization. What would be the best medication for her in the community ?**

A . Quietiapine (seroquel).

B . Haloperidol (haldol).

**C . Valproate (depakene**

D . Lamotrigine (lamictal).

E . Lithium carbonate.

**39- A cancer patient with significant nausea requires an antidepressant. Which of the following medications would be the best?**

A . Bupropion.

B . Duloxetine

**C . Mirtazapine.**

D . Paroxetine.

E . Venlafaxine.

**40- A 27-year-old nurse appears in a private physician’s office complaining of recurrent back pain. On exam , the patient is noted to have a runny nose , dilated pupils, piloerection, mild fever and mild tachycardia. The patient reports that she has previously used oxycodon (opiate derivative) for her back pain for period but has not used any pain relievers for several months .She states that she has back pain “about twice a year”. You obtain an additional laboratory test, make a diagnosis, and prescribe treatment for this patient. A week later ,you are the emergency ward attending physician when the patient brought in by ambulance unconscious with very slow respiration and mild perioral cyanosis. The best emergency treatment for this patient is :**

A . Flumazenil .

B . Physostigmine.

C . Clonidine.

D . Acamprosate

**E . Naloxone.**

**1-which of the following is not categorized under dissociative disorders?**

A-fugue

B-psychogenic amnesia

C-depersonalization

D-identity confusion

**2-A recognized features of subjective anxiety occurs in :**

A-waxy flexibility

B-akathisia

C-agoraphobia

D-dementia

**3-Insight is:**

A-awareness of ones own mental condition.

B-may be lost in sever neurosis

C-not important in planning management

D-an all or nothing phenomenon

**4-During psychiatric interview:**

A-confronting the patient with the diagnosis early in the beginning

B-perceptual disorder can’t be elicited

C-participation of hospital staff is encouraged

D-empathic, non judgmental approach is required

**5-`The following are true for post-traumatic stress disorder (ptsd) except:**

A-flashbacks

B-anhedonia

C-seeking reminders of the trauma

D-good response to medications

**6-Dysmorphophobia is**

 (A type of overvalued idea in which the patient believes one aspect of his body is abnormal or conspicuously deformed)

A-observed in ethnic minority

B-anorexia nervosa

C-plastic surgery clinics

D-acute schizophrenia

**7-Obsessional thoughts are :**

A-felt to come from outside the patient

B-resistance can diminished over the time

C-preoccupy the patient despite attempt to exclude them

D-prominent in acute schizophrenia

**8-Somatic symptoms of anxiety include :**

A-tinnitus

B-irritable bowel syndrome

C-carpopedal spasm

D-tremor

**9-Hallucinations :**

A-occur only in mentally ill patients

B-are misinterpretation of external stimuli

C-soon disappear after treatment

D-auditory hallucinations in third person suggest schizophrenia

**10-Obsessional rituals (compulsion) generally:**

A-are performed in response to hallucinatory commands

B-are not resisted

C-rarely involve checking

D-are recognized as senseless by the patient

**11-Delusins are :**

A-types of overvalued ideas

B-occurs in panic disorders

C-side effect of phenothiazines

D-essential in diagnosing psychosis

**12-one century old treatments of mentally ill patient involve:**

A-SSRI

B-modified ECT

C-restrain and seclusions

D-anxiolytics

**13-A mental state examination ;**

A-done separately to the history taking

B-describes psychopathology at the time of interview

C-should include description of surrounding

D-educating the patient about treatment

**14-Features of somatization disorders include**

A-bitter complaint about one particular part of the body

B-several weeks duration

C-no physical basis demonstrated

D-onset generally in old age

**15-conversional disorders are** ?????

A-observed in chronic schizophrenia

B-multiple somatic complaints

**C-fulfill the primary and secondary gain**

D-good response to sedatives

**16-chronic pain syndrome**

A-Anti-depressant can be of benifit

B-may be associated with secondary gain

C-responds to reassurance

D-A type of somatoform disorders

**17-phobias:**

A-social phobia is fear of poverty

B-phobias respond well to desensetization

C-Agoraphobia has equal sex ratio

D-simple phobia are far more common in females

**18-Hypochondriasis:**

A-more common in females

B-may be normal in old age

C-malingering

D-good response to medications

**19-Acute sever symptoms of anxiety is noticed in ;**

A-panic attack

B-chronic schizophrenia

C-Ganser syndrome

D-irritable bowel syndrome

**20-In obssessive compulsive disorders**

A-ECT is a treatment of choice

B-charactrized by acute course

C-may be associated with personality trait

D-phenothiazines can be of benefit

**21-Disorders of speech involve:**

A-perservation

B-dyspraxia

C-grandious delusions

D-sucidal thoughts

**22-Disorders of thinking**

A-thought Echo

B-euphoria

C-knights move

D-formication

**23-In cognitive assessment ;**

A-we need advanced insruments

B-include assesssment of (insight)

C-apperance is important

D-vital signs is to be examined

**24-Panic attacks can be diagnosed as :**

A-cardiac neurosis

B-cardiac arrythmias

C-illness phobia

D-hystricalmutism

**25-Delayed reaction of post traumatic stresss disorder(PTSD)include**

A-mal adaptive behavior

B-chronic depressive state

C-dudenal ulcer

D-denial phase

**26-which of the following is not a thought disorder**

A-Nihilistic delusions

B-thought broadcasting

C-catatonia

D-ideas of reference

**27-proper managment of panic attack**

A-Alprozolam

B-ECT

C-barbiturate

D-simple reassurance

**28-Acute stress reaction**

A-occur following stressfull event

B-needs hospital admission

C-equal sex ratio

D-needs psychoanalytical approach

**29-post traumatic stress disorders (PTSD) manifests in the followings;**

A-startle reflex

B-decrease recall ability

C-drug addiction

D-hallucinations

**30-Depressed mood and affect;**

A-can be observed during the interview

B-needs labratory investigations

C-responds well to re-assurance

D-to be examined within the cognitive assessment

**57. A psychiatric resident is called to consult on the case of a 75-year-old woman who had undergone a hip replacement 2 days before. On examination ,the resident notes that the patient states the date as 1956, and she thinks she is at her sons’s house. These impairment best illustrate which aspect of the mental status examination?**  
A .Concentration.  
B .Memory.  
C .Thought process . **D .Orientation**  
E .Level of consciousness **58. A 35- year- old man presented with depressed mood, anhedonia,poor appetite, early morning wakening, and retardation. He was commenced in straline and improved a little . He, however,complained of erectile dysfunction which he did not have before. Which antidepressant you would recommend to help this patient?**  
A .Fluoxetine.  
B .Desipramin.  
C .Trazodone.  
D **.Mirtazapine.\***  
E. Phenelzine **59 . Some one who exhibits pathological jealousy, is suspicious about tricked, and is concerned about hidden meaning, is demonstrating sign of :**  
A .A schizoid personality disorder.  
B. A schizotypal personality disorder.  
C .An antisocial personality disorder.  
D .A narcissistic personality disorder. **E .A paranoid personality disorder. \***  
**60. The following are known reversible causes of dementia; except :**A .Normal pressure hydrocephalus.  
B .Subdural hematoma  
C .Hypothyroidism **D . Dementia of Lewy bodies.**  
E .Pernicious anemia  
**61. A 29-year-old woman presented to emergency room complaining of migraine headache. A review of medical file reveals one brief admission for a transient psychotic episode and depression within the past 3 years. She is noted to be dressed in odd clothing. She insists that she is clairvoyant and telepathic, and stereotyped speech. She says she has no friends, since she was teenager. Her presentation is most consist with which of the following personality disorder. ?**  
A .Avoidant personality disorder  
B .Histerionic personality disorder  
C .Paranoid personality disorder  
D . Schizoid personality disorder  
E **.Schizotypal personality disorder.**

**62. Which of the following differentiates Lewy body dementia from Alzheimer type?**  
A .Apraxia.  
B .Choreiform movement.  
C .Executive dysfunction  
D .Gradual progression of deficit  
E **.Recurrent visual hallucination.**   
**63. A 6-year-old boy is referred to you by his school to evaluate his difficulty with reading . It is suspected that he suffers from a reading disorder, but a subtle impairment in vision or hearing must be ruled out as a causative or contributing factor. Learning disorders are most commonly associated with which of following disorders?**  
A .**Attention deficit hyperactivity disorder.**  
B .Bipolar disorder  
C .Tourette disorder  
D .Asperger disorder  
E .Childhood schizophrenia  
**64. Cocaine-induced euphoria is most highly associated with which of the following neurotransmitters ?**  
A .Serotonin **B .Dopamine.**  
C .Norepinephrine  
D . Gama-amino butyric acid  
E .Acetylcholine  
**65. A 66-year-old patient who is treated for bipolar disorder presents comatose with a serum sodium concentration of 112 mmol / L . Which of the following is most likely to be the cause of the sodium imbalance ?**A .Valproate **B .Carbamazepine**   
C .Lithium  
D .Olanzapine  
E .Risperidone  
**66. Hypertension is most associated with which of the following medications ?**  
A .Bupropion  
B .Fluvoxamine  
C .Trazodone  
D .Paroxetine **E .Venlafaxine.**  
**67. A 26-year-old man comes to the physician with chief complaint of a depressed mood for the past 5 weeks. He has been feeling down, with decreased concentration, energy, and interest in his usual hobbies. Six weeks prior to this office visit, he had to the emergency room for an acute asthma attack and was treated on prednisone. Which of the following is the most likely diagnosis ?**  
A . Mood disorder secondary to a general medical condition  
**B . Substance- induced mood disorder.**  
C .Major depression  
D .Adjustment disorder.  
E .Dysthymia.

**68. A 28-year-old woman is diagnosed with bipolar disorder ,manic type, when she was hospitalized after becoming psychotic , hypersexual, severely agitated , and unable to sleep. She is started on a medication in the acute phase of her illness. Which of the following medications recommended for acute use in manic patient , is recommended to be continued on into maintenance therapy?**A .Aripiprazole  
B .Lamotrigine **C .Lithium .**   
D . Olanzapine  
E .Ziprasidone  
**69. A 36-year-old women complains of depression. She reports a decrease in sleep, weight, and libido. She also complain of recent constipation. The change in patient’s sleep, weight, libido, and bowel habits are all which of the following :  
A .Neurovegetative signs**  
B . Word salad   
C .Conversion.  
D .Catatonia .  
E .Neologism  
**70. In clinical or forensic evaluations when financial compensation or special benefits may be available, a psychiatrist must consider the diagnosis of :**A . Factitious disorder **B .Malingering .**  
C .Somatization   
D .Hypochondriasis   
E .Conversion .  
**71.Which of the following antidepressants would be the best choice for a patient concerned about erectile dysfunction ?  
A .Bupropion .**  
B .Fluoxetine   
C .Desipramine  
D .Imipramine   
E .Venlafaxine  
**72. A patient takes medication for bipolar I disorder throughout pregnancy and delivery. The newborn is noted to be cyanotic and in respiratory distress. An echocardiogram reveals significant displacement of 2 leaflets of the tricuspid valve into the ventricle and a large atrial septal defect consistent with Ebstein’s anomaly. Of the following medications, which was the woman most likely taking during her pregnancy ?**  
A .Carbamazapine  
B .Gabapentin  **C .Lithium .**  
D .Valproate  
E .Topiramate  
  
  
  
**73.As emergency ward physician you have been asked to develop a protocol for admissions. While it is understood that any patient might necessitate admission, some conditions are self-limited . A patient in withdrawal from which of the following medications would most likely necessitate admission ?**  
A . Crake cocaine   
B .Crystal methamphetamine   
C .Marijuana   
D .Barbiturates.  
E . Nicotine  
**74. An 18-year-old man is brought to emergency room by police after he is found wandering in street,screaming loudly at passerby. In the emergency room , he placed in an examination room, and paces the floor and pounds with his fist against the door repeatedly. Which of the following actions should be btaken by the psychiatrist first?**  
A . Rule out an organic mental disorder  
B . Rule out psychosis  
C . Give the patient 5 mg haloperidol IM  
D . Make sure the physical environment is safe for the interviewer.  
E . Put the patient into soft restraints

**2008**

**1. Psychiatric disorders may be caused by the paired physical diseases, except :**

* 1. Generalized anxiety disorder ------Thyrotoxicosis
  2. Depression -----------------------------Cushing disease
  3. **Obsessive Compulsive disorder— Hypocalcaemia \*\***
  4. Dementia ------------------------------ Hypothyroidism
  5. Bipolar affective disorders -------- HIV infection

**2. One of the following is most likely to be associated with Somatization disorder;**

1. Patient refusal of prescribed drugs
2. Fear of serious physical diseases
3. Patient insists on advanced medical investigation
4. Consulting psychiatrist is the most priority than other specialists
5. **The main concern is about symptoms relieve \*\***

**3. The following are features of Post Traumatic Stress Disorder (PTSD), except;**

* 1. Frequent remembering of the previous traumatic event
  2. **Symptoms develop immediately after exposure to trauma \*\***
  3. Disturbed emotional response to life events
  4. Loss of enjoyment in everyday life experiences
  5. Onset starts several months after the causative factor

**4. One of the following is true in relationship to General Physician(GP) practice;**

1. The majority of physical diseases are attributed to psychiatric cause
2. Five in 10 persons are hospitalized in psychiatric units once in theirlives
3. One in 9 persons looks for help for a mental disorder
4. In general practice, only10% of the patients' problems related topsychiatric disorders is missed
5. **About third of the patients treated by GP are mentally ill \*\***

**5. Genetic studies of psychiatric disorders show the following result except one;**

1. Depression may be associated with X-linked markers
2. Schizophrenia has higher concordance rate among MZ than DZ twins
3. **Phobic disorder has well established genetic transmission \*\***
4. Obsessive compulsive disorder has some effective genetic factor
5. No well established genetic effect in the transmission of panic disorder

**6. The following are true about Anorexia Nervosa, Except;**

1. Loss of libido
2. **Loss of appetite \*\***
3. Loss of awareness into body debilitation
4. Loss of worry about disturbed menstrual period
5. Dieting despite severe loss of weight

**7. Delusions are characterized by the following features, Except;**

1. Infusion with sense of personal significance
2. Inconsistency with the patients' cultural background
3. **The description of their content is possible \*\***
4. Strong believes that can not be disproved by reasoning
5. They do not go with the patient available information

**8. 'Senseless repetition of previously requested movement' means ONE of the following;**

1. Echopraxia
2. Catalepsy
3. Stereotype
4. Excitation
5. **Perseveration \*\***

**9. 'Negativism' means ONE of the following;**

1. **Motiveless resistance to suggestion \*\***
2. The absence of response
3. A form of sustained mobility
4. Repetitive movements
5. Maintenance of posture

**10. Formal thought disorders of schizophrenia include the following,Except;**

1. The use of approximate answers
2. Personal themes interpenetrate other thoughts
3. Loss of ability to preserve the concepts boundaries
4. **Preoccupation with certain themes \*\***
5. The loss of the proper associations of thoughts

**11. Delusional disorder of Jealousy is characterized by the following, Except;**

1. The spouse is having sexual relationships with others
2. Husband searches his wife for evidence of his delusion
3. The patient is usually eyewitnesses his wife infidelity \*\*
4. Wife may be beaten or even killed by the ill husband
5. Confession of wife does not help in changing the patient's believe

**12. The following secondary delusions may be found in both Depression and schizophrenia, Except;**

1. Nihilism
2. **Delusion of love \*\***
3. Persecution
4. Enormity
5. Poverty

**13. A 35 year old woman, presented with long term pains and aches with fear of having a serious physical disease despite the negative physical examinations, repeated investigations, treatments and reassurance of several physicians. On psychiatric examination she was anxious, depressed and resentful of her psychiatric referral. The diagnosis is most likely to be ONE of the following;**

1. Generalized Anxiety Disorder
2. Depression
3. Somatization disorder
4. **Hypochondriac disorder \*\***
5. Conversional disorder

**14. Dissocial (psychopathic) personality disorder is characterized by the following features, Except:**

1. **Excessive self-reference \*\***
2. Loss of regard for social obligations
3. Low tolerance to frustration
4. Loss of feelings toward others
5. Excessive aggression discharge

**15. Anankastic (Obsessive) personality disorder is characterized by thefollowing, except;**

1. Conscientiousness
2. Stubbornness
3. **Emotional lability \*\***
4. Meticulousness
5. Self-Doubts

**16. Classification of psychiatric disorders compared with that of physical diseases, is mainly based on the following, Except;**

1. Psychological criteria
2. **Specified physiological disturbances \*\***
3. Multiple causative factors
4. Constellation of symptoms
5. Specifications of dominant signs and symptoms in each disorder despite of their presence in other disorders

**17. Panic disorder differs from Generalised anxiety disorder in ONE of the following symptoms;**

* 1. Sympathetic overactivity
  2. Anticipation of danger
  3. Tension
  4. Panic attacks areover imposed on anxiety symptoms in most of the time
  5. **Unpredictable panic attacks with no symptoms between them \*\***

**18. The following neurotransmitters may have a role in the development of Anxiety Disorders, Except;**

* 1. **Dopamine \*\***
  2. GABA amino butyric acid
  3. Melatonin
  4. Alpha 2-Adrenoceptors
  5. Serotonin

**19. Differential diagnosis of anxiety disorders must include the following Except;**

* + 1. Delirium
    2. Depression
    3. Hypoglycemia
    4. **Addison's disease \*\***
    5. Phobia

**20. The following are true about Agoraphobia, Except;**

1. Fear of going out alone
2. **The reason of the fear can be explained by the patient \*\***
3. Panic attacks develop in exposure to crowded places
4. The patient may become housebound
5. It may occur as a symptom in other psychiatric disorders

**21. Obsessive compulsive disorder includes the following features, Except;**

1. Unwanted thoughts are continuously repeated through the mind
2. The patient tries to stop thinking about silly topics but with failure
3. **The repeated thoughts or ideas are associated with pleasant feeling \*\***
4. The patient realizes his inability to stop repeating certain acts
5. The silly thoughts and acts are his own and under his control

**22. The following methods are used in the treatment of Obsessive compulsive disorder, Except;**

1. Thought satiation
2. Exposure with response prevention
3. Thought stopping
4. Aversion \*\*
5. Relaxation technique

**23. A 17 year old female was presented with a sudden paralysis of the lower limbs. The diagnosis is   
 most likely to be Conversional disorder in the presence of the following, Except;**

1. **The patient is worried about her problem \*\***
2. The onset followed a personal stressful situation
3. Repeated neurological examinations showed changes of signs from time to another
4. Grandmother had lower limb paralysis a few years ago
5. She was brought by her family

**24. The most common psychiatric disorder among the following is;**

1. Dementia
2. Depression
3. Obsessive compulsive disorder
4. Schizophrenia
5. Anorexia nervosa

**25. Physiological symptoms of depressive disorder include the following, Except;**

1. The mood is worse in the morning
2. Early morning wakening
3. **Loss of interest \*\***
4. Loss of appetite
5. Poor sexual desire

**26. Dysthymic disorder, as a DSM-4 type of depression is characterized by the following symptoms, Except;**

1. Fluctuating depressive mood
2. Difficulty in falling asleep
3. Following stressful life events
4. **The onset is common in the middle age \*\***
5. The absence of diurnal variation of mood

**27. Epidemiological studies of depression shows the following facts, Except;**

1. It represents 3-4% of the general population
2. **There is equal sex ratio \*\***
3. Severe or psychotic type is more common among age group 50 years and over
4. Social class is normally distributed
5. The increased rate among immigrants compared with original population

**28. Manic disorder is diagnosed by the following symptoms, Except;**

1. Disinhibited behaviour
2. Elated mood
3. Increased activity
4. Overtalkativeness
5. **Asyndetic thinking \*\***

**29. One of the following is the most important indication of Electroconvulsive Therapy (ECT):**

1. **Severe depression \*\***
2. Schizophrenia
3. Puerperal disorder
4. Delusional disorder
5. Manic episode

**30. The following are recognised side effects of classical Antipsychotics, except;**

1. Tremor
2. Dystonic reaction
3. **Delayed ejaculation \*\***
4. Tardive dyskinesia
5. Parkinsonian rigidity

**31. One of the following is the most characteristic symptom of Dementia;**

1. Failure of remote memory
2. **Loss of recent memory \*\***
3. Loss of concentration and attention
4. Impaired abstract thinking
5. Emotional instability

**32. Dementia is a chronic progressive brain disorder but can be treated, if it is caused by the following, Except;**

1. Hypothyroidism
2. Alcoholism
3. Subdural haematoma
4. **Huntington's chorea \*\***
5. Normal pressure communicating hydrocephalus

**33. The course of Delirium is characterized by the following, Except;**

1. Fluctuating symptoms
2. Fluctuating course
3. Lucid intervals of normal orientation
4. **Sudden recovery \*\***
5. Transition to dementia is the end result

**34. The diagnosis of schizophrenia rests on the presence of the following symptoms, Except;**

1. Abolished interest in the environment, apart from those with personal reference
2. **Fluctuating level of awareness of the surrounding \*\***
3. Hearing voices speak his thoughts
4. Sudden cessation of thinking due to outside interference with own mind
5. Delusional perception

**35. Negative schizophrenic negative symptoms include the following, Except;**

1. Social withdrawal
2. Loss of interest in personal care
3. Decreased motivation
4. **Feelings are not his own \*\***
5. Loss of pleasure

**36. Depression may be associated with the course schizophrenic disorderbecause of the following mentioned causes, Except ONE;**

1. **At the onset of schizophrenia due to realization of bizarre symptoms \*\***
2. During recovery from the illness because of regaining insight
3. As a form of schizoaffective disorder
4. During the course of the disorder as part of the illness symptomatology
5. Results from the Biochemical effect of Antipsychotics

**37. The following are true in regard to schizophrenia, Except;**

* 1. Life time risk in general population is 1-2.8% all over the world
  2. **Children of both ill parents have about 50% chance of developing the disorder \*\***
  3. Recent studies show equal distribution among both sexes
  4. Concordance rate among MZ twins is about 42%
  5. Despite the hypotheses of increased dopamenergicoveractivity, there is inconsistency about the biochemical abnormality among recent results

**38. Suicidal risk is expected among suicidal attempters, in the presence of the following data, Except;**

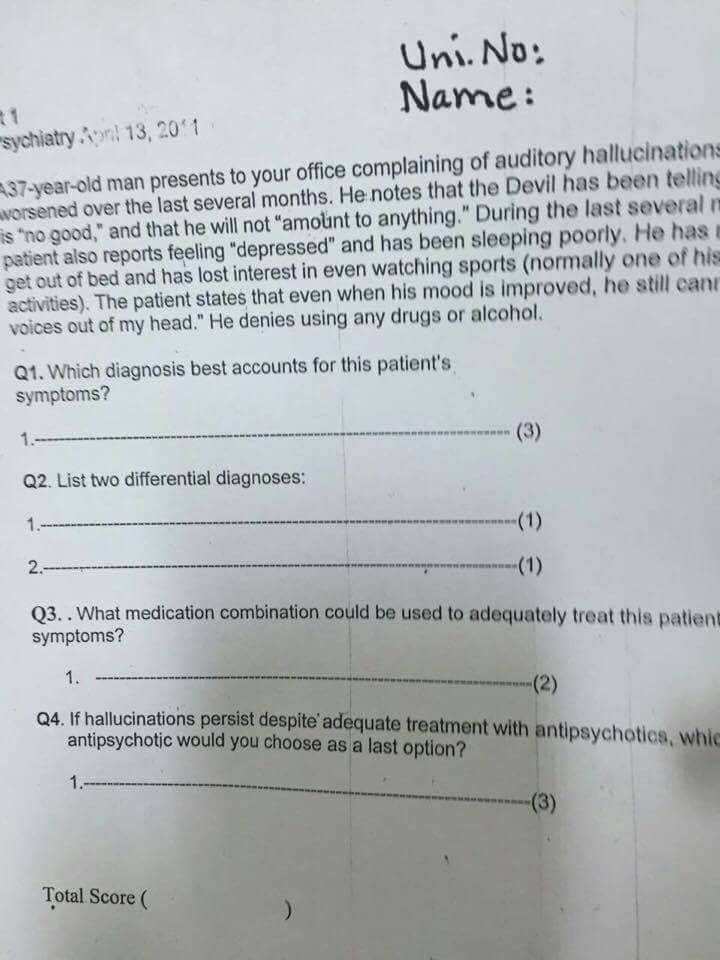
1. Young age group
2. Male gender
3. **Divorced and widowers \*\*??**
4. Writing a message of goodbye
5. History of depressive disorder

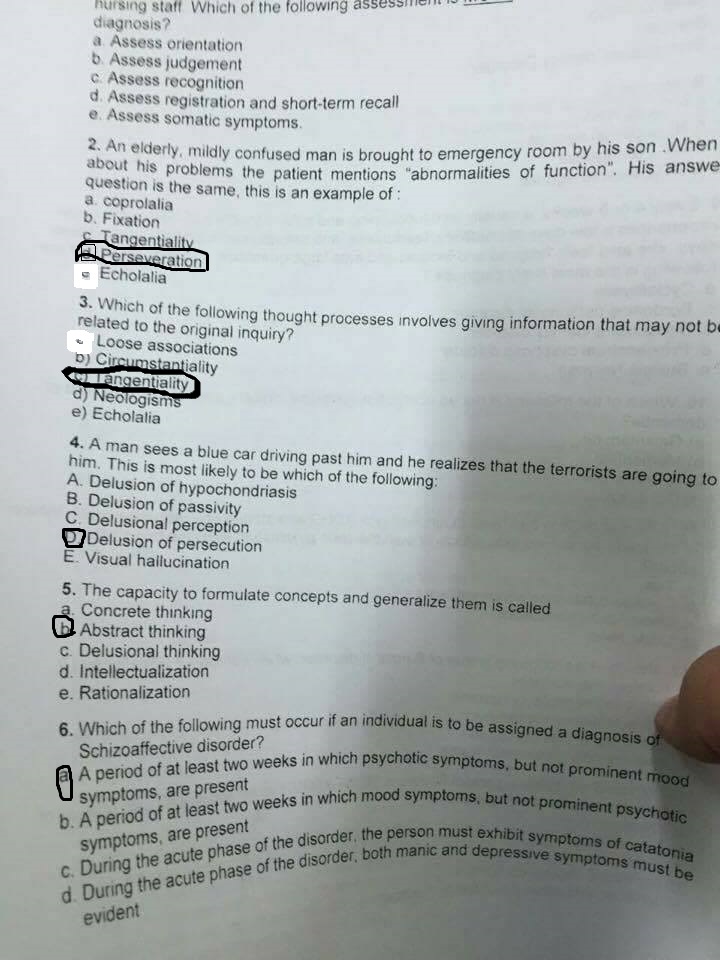
**39. One of the following is a gender identity disorder;**

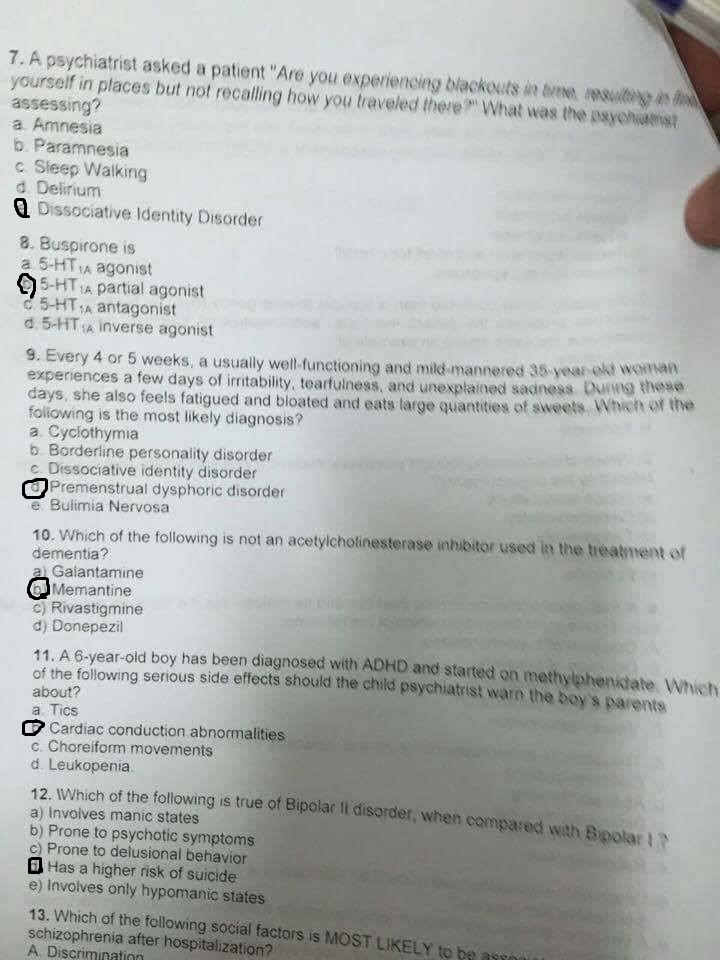
1. Transvestism
2. Loss of sexual drive
3. Sex phobia
4. Homosexuality
5. **Transsexualism \*\***

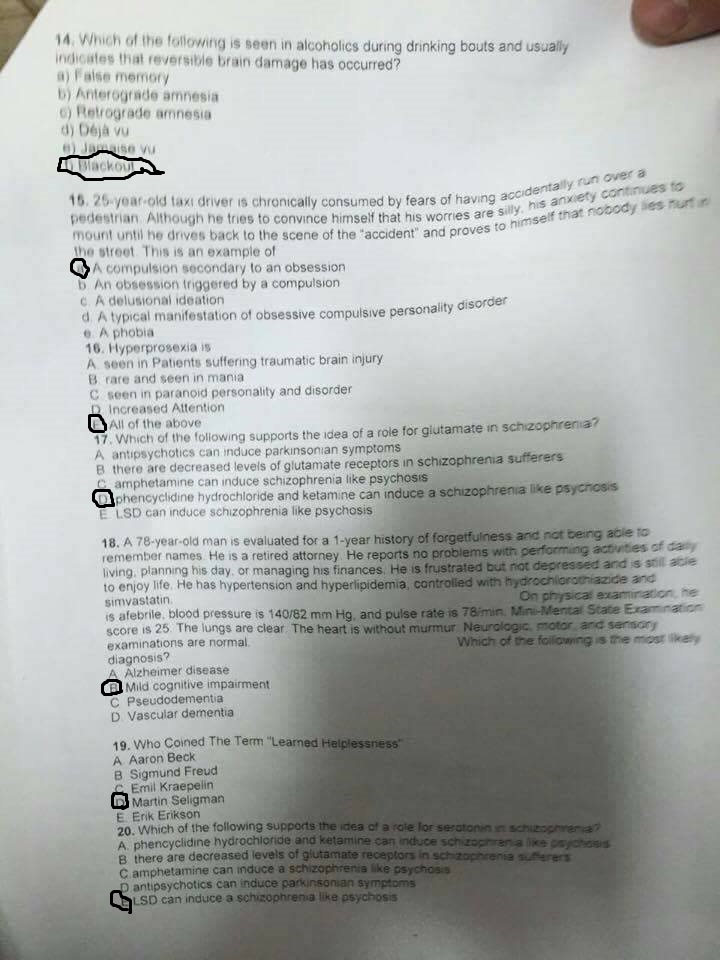
**40. The following are psychiatric emergencies which are usually seen in a general hospital casualty department, except;**

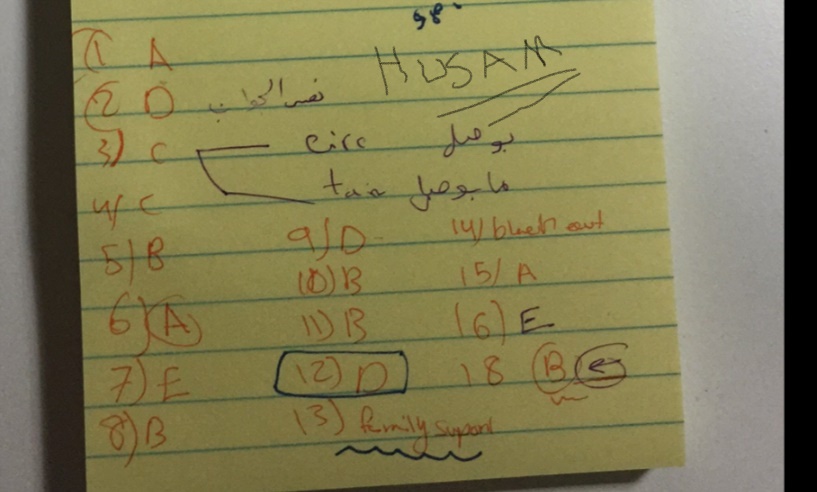
1. Depressive stupor
2. Panic disorder
3. Suicidal attempt (deliberate self harm)
4. **Chronic schizophrenia \*\***
5. Dissociative fainting

****









**المجموعةالرابعة ) ج + د (**

**إعدادأحمدنيازرواشدة**

MCQ

1-A female with bipolar disorder taking medications got pregnant even though she is taking contraceptives, what is the drug the interacted with pregnancy causing OCP the مش هيك حرفي بس هاي الفكرة

a-Lithium

b-Valporate

c-Carbamazepine

d-Lamotrigine

الاجابة من الدكتور

2-A 60 year old woman's husband believes (without any ceartain clue ) that his house is full with radioactive dust and his wife is هيك زي اشي concerned that she won't be able to clean it while he is in the hospital what is the woman's diagnosis:

a-Schizophrenia

b-delusional disorder

c-shared delusional disorder

3-What is false about PTSD:

a-more common in men

b-avoidance of stimuli is a characteristic feature

c-children are less likely to respond to psychotherapy

d-the symptoms must last for at least 1 month

**Cases (1)**

**A 9-year-old boy is referred to you for evaluation after increasingly disruptive behavior in school. The boy will make a disruptive sounds or shout out in the class. They describe him as polite and neat but restless and jumpy,**

1. **which is the most likely diagnosis ?**

Attention-deficit hyperactivity disorder. 3 marks

**2- treatment** : 3 marks

(االحسن تتاكدوا منها) amphetamine

**3- write 2 assoitedcomrbid with this syndrome :**4 marks

1. Tourett’s syndrome. الدكتور من 2-

**Case (2)**

**ناسي الكيس بالظبط بس الي كان فيها وحده مطلقه و ع طول قلقانه حتى لو ما كان فبه سبب وهاذ الحكي طول عمرها**

1. **diagnosis :**

generalized anxiety disorder 4 marks

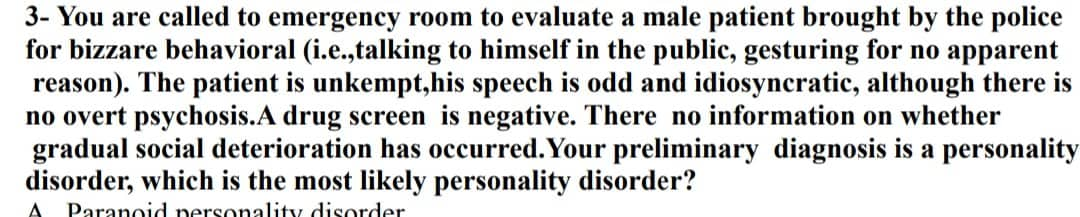
**2- write two non benzodiazepines in a drug used for treatment of as such case 6 marks**

1- busprirone 2- 5 HT1aمتاكد مش

**\*\*All these drugs used for neuroleptic malignant syndrome except :**

1. **Atypical antipsychotic**
2. **Dantrolin**
3. **Amantidin!!!!**
4. **ECT**

الجواب من الدكتور ......



Which the type of personality

Give 2 personality DDx

Tow way of management  
  
  
المجموعة الثالثة جروب (أ+ب)

MCQ

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**CASES**

**1-You asked to visit a patient at home following concern from his family, after thedeath of his mother.He has always been a loner, preferring to be by himself than withothers,when his sister told him that his mother had died ,he showed little emotion,andattended her funeral in jeans and a dirty T-shirt, much to family’s disgust. He hadalways been quit as a child,and seemed to neither seek nor enjoy the company of otherchidren. He currently lives alone and spend all of his time repairing and building avariety of electrical appliances.**

1. **Diagnosis : schizoid PD**
2. **Alternative dx : schizophrenia / major depression**
3. **Treatment : psychotherapy / asntipsychotics**
4. **Prognosis : bad (poor)**

**2-old man with CCF and DM, came to the hospital and was agitated (وكمان اعراض الها دخل بالdelirium) for 3 days**

1. **Diagnosis : delirium**
2. **What is the cause of the delirium : medical cause (CCF/DM)**
3. **Would you treat him in a psychiatric ward : NO**
4. **Short and long term prognosis**

**امتحان مني اوسكي مادة النفسية قروب 5 (ج+د) 10/12/2019**

**اعداد: عبدالرحمن الوردات و مهند الخزاعلة**

**Case 1**

36 years-old female patient came to your clinic complaining of depression of 6 months duration since she lost her job and worsened in the past month. Also she has uncontrolled DM (Hb A1C = 8.0%) and diagnosed with personality disorder in the past. She drinks 3-4 glasses of beer everyday, and she was caught driving while she toxicated. On Hx and Ex, doctor noticed she has moderately sever depression and he decided to treat ger as an outpatient since she doesn't have suicidal ideation or intention...

**-Mention 4 factors in this case that Suggests poor prognosis and outcome with treatment. (10 marks)**

1. **Long duration with depression**
2. **Uncontrolled medical illness (DM)**
3. **Excessive alcohol intake**
4. **Other psychiatric comorbidities (personality disorder)**
5. **Progressive worsening (worsened past month)**

**Case 2**

Patient diagnosed with psychotic disorder, doctor prescribed Haloperidol 5mg twice daily .

**1- mention 4 extrapyramidal and neurological side effects of this drug (6 marks)**

1. **Dystonia**
2. **Akathisia**
3. **Tardivedyskinesia**
4. **Parkinson like symptoms(resting tremor,bradykinesia, rigidity)**

**2- mention 4 psychotic symptoms that may not respond to this drug . (4 marks)**

**(any 4 -ve symptoms)**

1. **Anhedonia**
2. **Alogia**
3. **Avolition**
4. **Asociality**
5. **Flattened Affect**

**اسئلةالMCQ كلهم تكرروا من ملف اسئلة السنوات عدا هذا السؤال ..**

**-All these drugs used for neuroleptic malignant syndrome except :**

1. **Atypical antipsychotic**
2. **Dantrolin**
3. **Amantidin !!!!**
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الجواب من الدكتور ......