MCQ on lecture 1(part2) lecture 2, lecture 3

12- Phase 4 of SAnodal potential is attritutable to:

- a- An increase in K conductance
- b- An increase in Na conductance
- c- Decrease in Cl conductance
- d- Decrease in Ca conductance
- e- Simultaneous increase in K and Cl conductance

13- During which phase of ventricular action potential is the conductance of Ca is highest:

- a- Phase 0
- b- Phase 1
- c- Phase 2
- d- Phase 3
- e- Phase 4

14- Chronotropism refer to:

- a- Rhythmicity
- b- Conductivity
- c- Excitability
- d- Contractility

15- SA node is the normal pacemaker because of its:

- a- Rate of discharge
- b- Location in the atrium
- c- Neural control
- d- Muscular structure
- e-Relative position to AV node

16- SA node is the normal pacemaker because:

- a- Most rapidly discharging part
- b- Most richly supplied by nerve ending
- c- Located in atrium
- d- All of the above

17- Regarding Sanode:

- a- Cells within it, act as pacemaker because there membrane depolarize to the threshold and initiate action potential
- b- Acetylcholine increase the slope of pacemaker potential
- c- Sympathetic decrease the slope of pacemaker potential
- d- Cells within it are neurons rather than myocytes

18- Pacemaker potential is primarily due to:

- a- Slow decrease in K permeability
- b- Slow increase in k permeability
- c- Slow decrease in Na permeability
- d- Rapid increase in Ca permeability
- e- Slow decrease in Mg permeability

19- The cardiac tissue with the slowest rythmicity:

- a- Sanode within vagal tone
- b- Sanode without vagal tone
- c- Ventricular ms
- d- Avnode
- e- Purkinje fibers

20- Action potential of heart is characterized by plateau:

- a- In the ventricle is reached 100 m.sec
- b- In the atrial ms is reached 300 m.sec
- c- Result from balance between ca influx and k efflux
- d- Result from inflow of cl and outflow of HCO3

21- It is impossible to tetanize heart because:

- a- There is a long mechanical refractory period
- b- The electrical refractory period and mechanical contractile response are almost equivalent duration
- c- Heart ms does not contain ca
- d- Mechanical contractile event shorter than depolarization

22- The phase of cardiac cycle in which heart is not responsive:

- a- Effective refractory period
- b- Relative refractory period
- c- Shorter than that of skeletal ms
- d- Extend all through action potential

23- ARP of heart:

- a- Shorter than that of skeletal ms
- b- Really effective but not absolute
- c- Extend till end of repolarization
- d- Correspond to QRS complex of ECG
- e- In the av bundle protect ventricle from high atrial rythem

24- About ARP of heart, all true except:

- a- Lasts approximately as long as cardiac contraction
- b- Longer than that of skeletal ms
- C- Prolonged in damaged myocardial ms
- d- Correspond in time with the whole duration of action potential

25- Action potential of cardiac ms differ with that of nerve in:

- a- Having negative after potential
- b- Having shorter duration
- C- Having lower resting potential
- d- Having reversed polarity
- e-None of the above

26-	The	steepest	pre	potential	normally	occurs	in:
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- a- Sanode
- b- Anvode
- C- Bundle of his
- d- Purkinje fibers
- e- Ventricle ms wall

27- In which phase of ventricular ms action potential is k permeability is highest:

- a- 0
- b- 1
- c- 2
- d- 3
- e- 4

28- Which of the following about cardiac ms is the most accurate:

- a- T tubule of cardiac ms can store less ca than skeletal ms
- b- Strength of contraction of cardiac ms depend on amount of casuuronding cardiac myocyte
- c- Cardiac ms initiation of action potential causes immediate opening of slow ca
- d- Cardiac repolarization is caused by opening of na channel
- e- Mucopolysccharde inside T tubule bind chloride ions

29- Which of the following condition in avnode will cause decrease in heart rate:

- a- Increase na permeability
- b- Decrease acytcoline level
- C- Increase norepinphrine level
- d- Increase k permeability
- e-Increase ca permeability

30- Which of the following is the resting membrane potential of sanode:
a100 membrane potential of sanode:
b90
C80
d55
e20
31- Which of the following conditions of sanode will cause heart rate to
decrease :
a- Increase nor epinephrine level
b- Increase na permeability
C- Increase ca permeability
d- Increase k permeability
e- Decrease actycholine level
32- Which of the following is caused by acetylcholine:
a- Hyperpolarization of sanode
b- Depolarization of av node
C- Decrease permeability to k
d- Increase heart rate
e- Increase permeability to ca
33- Threshold level of Sanode is :
a40
b55
c65
d85
e105
34- Myocardial contractility is best correlated with intracellular conc. Of:
a- Na
b- k
c- ca
d-CL

35- The physiological function of relatively slow conduction through AV node is to allow sufficient time for:

- a- Run off blood from aorta to arteries
- b- Venous return to atria
- c- Filling of the ventricle
- d- Contraction of ventricle

36- Which of the following has negative inotropic effect:

- a- Increased heart rate
- b- Sympathetic
- c- Norepinephrine
- d- Acetylcholine
- e- Digitalis

37- The most rapid conducting velocity is present in:

- a- SAN
- b- AVN
- c- Ventricular ms
- d- Purkinje fibers

38- The fibers of AV bundle and its branches:

- a- Conduct impulse very slowly
- b- Are highly contractile
- c- Are modified ms fibers
- d- Are nerve fibers

39- Parasympathetic to heart:

- a- Stimulation to heart
- b- Decrease rate of AV junctional fibers
- c- Prevent idio ventricular rythem
- d- Has no effect on refractory period of atrial ms
- e-All are true

40- About purkinje fibers, all true except:

- a- Modified myocardial cells
- b- Confined to ventricle
- c- Are primitive nerve tissue
- d- Conduct impulse as some nerve fibers

41- All the following decrease in AV node conduction velocity except:

- a- Vagus
- b- Co2 excess
- c- Thyroxine
- d- Para sympathomimetic

42- About cardiac conductivity, all true except:

- a- Slowest in AV node
- b- Maximal in purkinje fibers
- c- Slowest in ventricular ms
- d- Decreased by vagal stimulation
- e- Occurs through modified cardiac ms

43- About cardiac contractility, all the following are true except:

- a- Depend on interaction between actin and myosin
- b- Increases when serum Rises above normal
- c- It is lost if the bathing medium is made Ca free
- d- Increases by administration of digitalis

44- Main function of purkinje fibers is :

- a- Prevent premature ventricular beat
- b- Coordinate valve movement with myocardial contraction
- c- Enable all part of the ventricle to contract simultaneously
- d- Delay systole until ventricle fill

45- Myocardial contractility is best correlated with intra cellular:

- a- Na
- b- K
- c- ca
- d-CI

46- The following agent are positive inotropic except:

- a- Norepinephrine
- b- Digitalis
- c- Glucagon
- d- Acetylcholine

47- Which of the following is most likely to cause heart to go into spastic contraction:

- a- Increased body temperature
- b- Increased sympathetic activity
- c- Decreased extracellular fluid K
- d- Excess extra cellular fluid K
- e- Excess extra cellular fluid Ca

48- Which of the following result in dilated flaccid heart:

- a- Excess Ca in blood
- b- Excess K in blood
- c- Excess Na in blood
- d- Increased sympathetic stimulation

49- Which of the following conditions at AV node will cause a decrease in heart rate:

- a- Increased Na permeability
- b- Decreased acetylcholine
- C- Increased norepinephrine
- d- Increased K permeability
- e- Increased Ca permeability

50- What is the normal delay of cardiac ms in AV node plus bundle:

- a- .22
- b-.18
- c-.16
- d- .13
- e- .09

51- Which of the following show how sympathetic affect heart:

- a- Permeability of SAN to Na decrease
- b- Permeability of AVN to Na decrease
- c- Permeability of SAN to k increase
- d- There is increased in upward drift of resting membrane potential of SAN
- e- Permeability of cardiac ms to Ca decrease

52- Slowest conduction of action potential occurs in:

- a- Atrial ms
- b- Anterior internodal pathway
- c- AV bundle fibers
- d- Purkinje fibers
- e- Ventricular ms

53- If purkinje fibers become pacemaker, expected heart rate is:

- g- 30
- b- 50
- c- 65
- d-75
- e-85

54- Sympathetic stimulation to heart normally to cause which of the following:

- a- Acetylcholine release
- b- Decreased heart rate
- c- Decreased rate of conduction
- d- Decreased force of contraction of atria
- e- Increased force of contraction of ventricle

55- If SAN is charge at 0.00 seconds, when will the action potential normally arrive at epicardial surface at base of left ventricle:

- a- .22
- b- .18
- c-.16
- d- .12

56- If SAN discharge at 0.00 seconds, when will the action potential normally arrive at AV bundle:

a- .22

b- .18

c- .16

d- .12

e-.09

12-	Ь	20-	c	28-	Ь	36-	d	44-	d
13-	c	21-	Ь	29-	d	37-	d	45-	C
14-	a	22-	a	30-	d	38-	c	46-	d
15-	a	23-	Ь	31-	d	39-	Ь	47-	e
16-	a	24-	d	32-	a	40-	C	48-	a
17-	a	25-	e	33-	a	41-	C	49-	d
18-	0	26-	a	34-	C	42-	C	50-	d
19-	c	27-	d	35-	c	43-	Ь	51-	d

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E2 -	E2 -	54-е	55-a	56-d
52-c	53-a	34-0	The state of the s	



MCQ (lectures and formative of previous year)

57- Which of the following is a major reservoir of blood:

- a- Veins
- b- Arteries
- c- Arterioles
- d- Capillaries
- e- The heart

58- Excitation wave start in:

- a- Atrioventricular bundle
- b- Atrioventricular node
- c- Atrial ms fibers
- d- Sinoatrial node
- e- Pukinje fibers

59- Which of the following is not a function of atria:

- a- Contain SAnode and AVnode
- b- Pump 30% of blood into the ventricle
- c- Blood reservoir during ventricular diastole
- d- Contain receptor for many reflexes
- e- Secrete atrial naturetic peptide which regulate ABP

60- Cardiac ms act as syncitium due to presence of :

- a- T tubules
- b- Gap junction
- c- Action potential
- d- Ca ions
- e- Sarcoplasmic reticulum

61- Phase 4 of SAnodal potential is attritutable to:

- f- An increase in K conductance
- g- An increase in Na conductance
- h- Decrease in Cl conductance
- i- Decrease in Ca conductance
- j- Simultaneous increase in K and Cl conductance

62- During which phase of ventricular action potential is the conductance of Ca is highest:

- f- Phase 0
- g- Phase 1
- h- Phase 2
- i- Phase 3
- j- Phase 4

63- In phase 0 of sanodal action potential, which of the following occurs:

- a- Inward ca current through L type Ca channel
- b- An increase in K conductance
- c- Increase in Na conductance
- d- Decrease in Cl conductance
- e- Simultaneous increase in K and CL



- 64- Currents caused by opening of which of the following channels contribute to repolarization (phase 3) of action potential of the ventricular ms fibers:
 - a- Na channels
 - b- Cl channels
 - c- Ca channels
 - d- K channels
 - e- HCO3 channels
- 65- Resting membrane potential of SAnode is:
 - a- -70 mv
 - b- -85 mv
 - c- -40
 - d- -100
 - e- -55
- 66- Physiologic function of relatively slow conduction through AV node to allow sufficient time for :
 - a- Run of blood from aorta to the arteries
 - b- Venous return to atria
 - c- Filling of the ventricle
 - d- Contraction of ventricles
 - e- Repolarization of ventricles



67-	Which of	the	following	increase	conduc	tivity o	f cardiac	ms :
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- a- Digitalis
- b- Sympathetic stimulation
- c- Parasympathetic stimulation
- d- Acidosis
- e- Sever hyperkalemia

68- The action potential spread to the interior of cardiac ms along membrane of :

- a- Z line
- b- M line
- c- Transverse (T tubules)
- d- Longitudinal tubules (SR)
- e- Terminal cistern

69- Myocardial contractility is best correlated by intracellular conc. Of

- a- Na
- b-K
- c- Ca
- d-Cl e)Mg

70- Which of the following has negative inotropic effect on heart:

- a- Increased heart rate
- b- Sympathetic stimulation
- c- Norepinephrine
- d- Acetylcholine
- e- Digitalis

71- Parasympathetic produce all the following except:

- a- Decrease rate of discharge from SAnode
- b- Coronary VC
- c- Increase ventricular contractility
- d- Decrease atrial contractility

72- Which of the following has the highest conduction velocity:

- a- SAnode
- b- Atrial ms
- c- Ventricular ms
- d- AV node
- e- Purkinje fiber

73- In heart, parasympathetic stimulation:

- a- Increases rate of discharge from SAnode
- b- Decreases coronary blood flow
- c- Increases ventricular contractility
- d- Increases atrial contractility
- e- Has no effect on SAnode

