

Rheumatology

1- A young female with RA , she is planning Pregnancy . what is the first line drug?

- A-Sulfasalazine
- B-Azathioprine
- C-Leflunomide
- D-Infliximab
- E-Methotrexate

Ans:a

2- The Raynaud's phenomenon is most common in :

- A- SLE
- B- Systemic sclerosis
- C- RA

Ans:b

3- The Most common organ involved in granulomatosis with polyangiitis (GPA)?

- A- Skin
- B- lungs
- C- GI
- D-renal

ans: d

4- All of the following are possible complications of SLE except:

- A-Aseptic necrosis of hip bone.
- B-Osler's nodules
- C-Glomerulonephritis
- D-Neuropathy
- E- pericarditis

ans:b

5- All of the following are clinical features of ankylosing spondylitis except:

- A- heart block
- B- Knee destruction
- C- Conjunctivitis
- D- Sacroilitis
- E- Aphthous ulcers

ans:b

6- Which of the following is correct about vasculitis?

- A- Polyarteritis nodosa common with HBV antigens
- B- PAN common with females
- C- polymyositis/rheumatica fatal complications without treatment

ans:a

7-Which one is Not cause an erosive in the joint :

- a.SLE
- b.RA
- C.Psoriatic
- d.Gout
- e.Osteoarthritis

Ans: a

7- A young female Patient with arthralgia and fatigue has +ve ANA with high titer 1:1500 RF negative what the most appropriate next step?

- A-Anti-ccp**
- B-Anti-dsDNA**
- C-Anti-centromere**
- D- Anti-RO/SSA**

ans: b

8- Which of the following is treatment for acute gout?

- A- Colchicine**
- B- paracetamol**
- c-biological agent**
- d-allopurinol**

ans:a

9- Most commonly related with raynauds phenomenon?

- A-Systemic sclerosis**
- B- SLE**
- C- polymyositis**
- D- RA**
- E- Sjogren syndrome**

ans :a

10- In which of the following conditions is an increase in rheumatic factor (RF) LEAST likely to occur?

- A) Adult-onset Still's disease**
- B) Sjögren syndrome**
- C) Subacute bacterial endocarditis**
- D) Conn's syndrome (primary hyperaldosteronism)**
- E) Sickle cell disease**

ans: d

11-Which of the following is NOT a pulmonary complication of rheumatoid arthritis (RA)?

- A) Felty's syndrome (RA triad: splenomegaly, neutropenia, recurrent infections)**
- B) Caplan syndrome(rheumatoid pneumoconiosis with lung nodules)**
- C) Rheumatoid pulmonary nodules**
- D)Interstitial lung fibrosis**
- E)Bronchiolitis obliterans**

ans:a

12- Which of the following matche is Wrong ?

- A- Anti dsDNA_ Reiters syndrome**
- B- anti-LA-- sjogren syndrome**
- c.anti-centmere.....CREST syndrome**

ans:a

13-One of following organisms related to reactive arthritis :

- A. Mycoplasma**
- b. S.pneumonia**
- c. Chlamydia**

ans : c

13- What is the most distinctive clinical feature of inflammatory arthritis ?

- A. Joint swelling**
- B. Morning stiffness lasting >30 minutes**
- C. Pain worsening with movement and relieved by rest**

ans:b

Endocrine

14- all the following causes of nephrogenic DI expect

- A- hypercalcaemia and hypokalemia**
- B- cisplatin**
- C-Demeclocylin**
- D- Sjogren syndrome**

Ans:d

15- A 65-year-old male presents with 2 months of sweating, palpitations, and weight loss. A physical exam revealed mild lid retraction, lid lag, and a small diffuse goiter. Laboratory results show: ↑ Free T3. ↑ Free T4. ↑ TSH. What is the next best diagnostic step?

- a. Thyroid ultrasound**
- b. Radioactive iodine uptake scan**
- c. Pituitary MRI**
- d. Thyroid peroxidase antibodies**
- e. Thyroid fine-needle aspiration**

ans:c

16- Female pt that polyuria, polydipsia, diagnosed as Primary polydipsia, what supports ur diagnosis?

- A- low osmolality post vasopressin**
- B- high urine osmolality after water restrictions test.**
- C-Medical history of lithium use**

ans:b

17- All of the following causes hyponatremia, except:

- A- Diarrhea**
- B- Heart failure**
- C- absent ADH**
- d.addison syndrome**

Ans:c

***All the following are true about hyperthyroidism except:**

- A-Ptu used in first trimester of pregnant**
- B- Methimazol contraindicated in ophthalmopathy**
- C- Hyperthyroidism can see in hashimouto thyroiditis**
- D- Led lag can see in any Hyperthyroidism**
- E- Radiactiv iodine preferable toxic adenoma and multinodular toxic adenoma**

ans : b

18- Which of the following confirms the diagnosis of DM?

- a. HbA1c percent 6.5**
- b. Random blood glucose 140 without symptoms**
- c. Fasting blood glucose 120, and 2-hour OGTT 210**
- d. Fasting blood glucose 130, and 2-hour OGTT 210**

ans:d

19- Which of the following is not correctly matched regarding antidiabetic drugs?

- a. Metformin vitamin B12 def**
- b. Glibenclamide Hypoglycemia**
- c. Empagliflozine UTI**
- d. Sitagliptin Pancreatitis**
- e. Pioglitazone Fatty liver.**

ans: E

20- Which of the following is not a feature of hyperosmolar hyperglycemic coma?

- a. Blood glucose >600**
- b. pH > 7.3**
- c. bicarbonate less than 15-18**
- d. Osmolarity >320**
- e. Minimal ketones**

ans:c

21- All the following are true about hypopituitarism except

- A-The first hormone to be affected is growth hormone**
- B-Hormone stimulation tests are used to diagnose disorders of GH and ACTH**
- C-Morning levels of hormones are used for diagnosis**
- D-Autoimmune hypopituitarism is the most common cause.**

ans:d

22- A man comes to the ER with hypoglycemia and hypotension, he has a 3-day history of cough and shortness of breath, and he is febrile. If an adrenal crisis is suspected. Which of the following is not part of the initial management?

- a. IV fluids**
- b. Hydrocortisone**
- c. Fludrocortisone**
- d. Dextrose**
- e. IV Antibiotics**

Ans:c

23- A pregnant lady was found to have a TSH level of 7 and normal T3, T4. What would be the indication to start levothyroxine treatment in her case?

- a. TSH level**
- b. Pregnancy**

ans:b

all the following considered as treatment of hyperkalemia expect:

- A- insulin**
- B- b- blocker***

Rs :

24- The first line management for acute severe asthma

A- Oxygen therapy

B- Ipratropium bromide

C- High dose of i.v prednisolone

D- I.v magnesium

E- salbutamol

Ans : i think a

25 - Which one indicates about pleural empyema :

A- High LDH , low glucose. Ph less than 7.2

B- High LDH , high glucose , PH less than 7.2

ANS : A

26- All about ARDS except :

A- Acute

B- Non cardiogenic

C- RR more than 24

D- ratio less than 200

E- infiltration

ans:c

27- : All are indications of severe pneumonia except:

A- Confusion

B- Pao₂/fio₂ more 250

C- Chest x ray multilobar infiltrate

ans:b

28- Patient with TB who takes isoniazid and rifampin, what is the most investigation i should monitor it :

A- Liver function test

B- ABG

C- renal function test

ans:a

29- 60 year old male patient with dyspnea and clubbing fingers, x ray show bilateral lower lobe reticulonodular, what is the diagnosis:

A- bronchogenic carcinoma

B- idiopathic pulmonary fibrosis

C- bronchiectasis

D- COPD

ans:b

30- one of the following drugs cause pulmonary fibrosis:

A- aspirin

B- amiodone

ans: b

31- female patient with type with a known history of type 1 diabetes mellitus presents to the emergency department . Her arterial blood gas (ABG) results are as follows:

A- high anion gap, metabolic acidosis

B- normal anion gap metabolic acidosis

C- metabolic alkalosis

Ans:a

32- congestive Hf patient with plural effusion, what the most appropriate results of plural fluid analysis:

A- pleural LDH599, LDH 0.9, protein ratio <0.1

B- pleural LDH59 , LDH 0.2 , protein ratio <0.3

ans:b

33- Female treated for primary TB, complain of symptoms like loss of sensation what the causative drug ?

A- INH*

B- Rifampin

C- pyrezenamide

34- interstitial fibrosis

A- Low DLCO

B- increase vital capacity

C- obstruction

D- high FVC1

ans:a

35- organisms in atypical CAP :

A- legionela.

B- strep pneumonia

C. H.influenza

ans:a

GI

36- Medical staff with needle stick injury from patient with Hepatitis B virus what is the first marker can detect it :

A-HBsAg

B-HBcAg

C- anti-HBsAg

D- HBeAg

Ans: A

37- Which type can't make damage with itself only and need to be co-infection

A-HBV

B-HAV

C-HDV

D-HCV

Ans : c

38- Which of the following is most likely to be involved in ulcerative colitis?

- a. Sigmoid**
- b. Rectum**
- c. Ascending colon**
- d. Descending colon**
- e. Terminal ileum**

ans:b

39- all the following correct about UC except:

- a- inflammation involve mucosa and submucosa**
- b- non caseating granuloma "**
- c- psudopolyp**

ans:b

40- wrong about Crohn's

- a- inflammation involve mucosa and submucosa"**
- b- non caseating granuloma**

ans:b

41- Which one associated with PSA :

- A- chrons**
- b-celiac disease**
- c-US**

ans:c

42- The first test for Celiac disease

- A- anti tissue transglutaminase**
- B- anti endomysial**

ans:a

43- mostly suspects IBS

ans: change in bowal habit

44- not true about IBS :

- A- mucus with stool**
- B- Pain relieve after defecation**
- C- بصحيه من النوم**
- D- altered bowel habits**
- E- feeling of incomplete defecation**

Ans:c

45- gentic in Celiac

- A- HLA DR3**
- B- HLA DR4**
- C- HLA DQ2**
- D- HLA B27**

Ans:c

47- rote of transmission of H- Pylori

Ans: feco- oral rote

48- Which of the following is the first-line treatment for clinical ascites due to cirrhosis?

- a. Furosemide**
- b. Spironolactone**
- c. Vasopressin**

ans:b

49- alcoholic patient with acites, have abdominal pain

A- acitic fluid WBC

50 - A patient who is a known case of alcoholic cirrhosis presents with frank hematemesis, rupture of esophageal varices is suspected, after resuscitation and IV terlipressin, what would be the most suitable management?

- a. TIPS**
- b. Endoscopic variceal band ligation**
- c. Endoscopic clipping**

ans:b

51- What is the best method to confirm eradication of H. pylori?

- a. Endoscopy**
- b. Stool culture**
- c. Urea breath test**
- d. Serology**
- e. Hydrogen breath test**

ans:c

52- which of the following not for confirm eradication of h pylori

A-IgG serology

- b. Clture**
- c.stool analysis**
- d.urea breath test**

ans:a

53- Female with syncopal attacks and murmur radiating to the carotids

Answer: Aortic stenosis

54- 50 years old male has aortic stenosis, what is the most likely cause of this murmur

- a. Bicuspid aortic valve**
- b. early diastolic murmur**
- c. Aortic regurgitation**
- d. celiac disease**

answer: A

55- Absolute contraindications for thrombolytic agents?

- a. Left-sided hemiparesis from 1 month**
- b. Diabetic retinopathy**
- c. Prolonged CPR for 5 minutes**

Ans:a

56- A 70-year-old female with chest pain for 2 hours , negative troponin , and no changes on ECG, what is the most appropriate next step?

- a. Discharge**
- b. Repeat troponin and ECG**
- C- negative troponin and ecg rule out acute coronary syndrome**

ans:b

57-A young female patient has narrow, regular complexes on ECG and persistent palpitation despite the Valsalva maneuver and 6 mg of adenosine. Her pulse is 160, but all other vitals are normal. What is the most appropriate next step?

- a. Administer 12 mg of adenosine**
- b. Synchronized electrical cardioversion**
- c. IV amiodarone**
- d. Administer 14mg of adenosine**

ans: a

58- An elderly female presents with atrial fibrillation and rapid ventricular response (heart rate 180), she is hypotensive with Bp 90/50 . What is the best next step in management?

- a. Beta blockers**
- b. Anticoagulants**
- c. Amiodarone**
- d. Cardioversion**

ans: d

59- Radiofemoral delay is characteristic of?

- a. Aortic stenosis**
- b. Coarctation of the aorta***

Ans: b

60- Which of the following is not part of the diagnostic workup for a patient with newly diagnosed hypertension?

- a. Urine analysis**
- b. ECG**
- c. Brain natriuretic peptide**

ans:c

61- Patient with MI and had cardiac arrest, what is the most cause:

- A- Ventricular fibrillation**
- B- Cardiogenic shock**
- C- complete heart block**

ans:a

62- Patient with MI and in ECG there is ST elevation in inferior leads, what is the management:

- A- Morphine, nitrate, oxygen**
- B- Thrombolytic**
- C- Discharge**

ans: a

63- ECG shows ST elevation in lead I, aVL what is the affected territory

- A- lateral MI**
- B- anterioseptal**
- C- inferoseptal**
- D- posterior**

ans:a

64- Which of the following is an indication for thrombolytic agents?

- a. New onset LBBB**
- b. New onset RBBB**
- c. T wave inversion in chest leads**
- d. ST depression in all chest leads**

ans:a

65- Changes of PE on ECG

- A- pathological Q wave in all leads**
- b. deep S on lead 1 only without any changes on lead 3**
- c. deep S in lead I, deep Q wave in lead II, T inversion in lead III**

ans: c

66- 70 year old presenting with palpitation and lethargy for 7 days, pulse is 123 irregularly irregular, BP is 118/70 with clear chest, what is the next step?

Ans: Atenolo

66- Which of the following is an indication for thrombolytic agents?

- a. New onset LBBB**
- b. New onset RBBB**
- c. T wave inversion in chest leads**
- d. ST depression in all chest leads**

ans:a

67-which one can lead to load S2 :

- A- AS**
- B- VSD**
- C- systemic hypertension**
- d-mitral stenosis**

ans:c

68- 54 year old with dyspnoea, large pulse volume and a diastolic on the left 3rd intercostal space?

- A- Aortic regurgitation**
- B- Aortic stenosis**
- c-Tricuspid regurgitation**

ans:a

69- A patient has a holosystolic murmur that is best heard on the 5th intercostal space on the left sternal border and intensifies with inspiration, with prominent JVP, most likely diagnosis?

- a. Mitral regurgitation**
- b. Tricuspid regurgitation**
- c. Aortic stenosis**

ans:b

Heme

70- One of the following features of Hodgkin Lymphoma is emergency:

- A- SVC obstruction**
- b. Bilateral lymphadenopathy**
- C. anemia**

ans:a

71- Wrong about hodgken Lymphoma:

- A- Large tender-painful- Lymph node**
- B- Reed strung cell**

ans:a

72- Which of the following feature about CML is incorret :

- a. Smudge cells**
- b.Philadelphia chromosome**
- c.Tyrisine kinase inhibitors**
- d.Increased wbc with shift to the left**
- e.Massive splenomegaly**

ans:a

73- In Patient with history of DVT and PE, How long he should take warfarin ?

- A- for life long**
- b.for 6 month**

C. for 3 month

ans:c

74-A 60-year-old male with a 3-year history of atrial fibrillation (afib) and no other significant medical conditions presents for stroke prevention management. According to current guidelines, which of the following is the most appropriate anticoagulant for him ?

- A) Aspirin 81 mg daily**
- B) Warfarin (target INR 2–3)**
- C) Warfarin (target INR 3–4)**
- D) No anticoagulation**

ans: b

75- Which of the following is NOT a cause of iron deficiency anemia?

- a. Decreased oral intake of iron**
- b. Increased oral intake of iron absorption inhibitors**
- c. Anemia of chronic disease**
- d. Hookworm infestation**
- e. Chronic blood loss**

ans:c

76-Which of the following findings is most consistent with anemia of chronic disease (ACD)?

- a. High hepcidin**
- b. Low ferritin**
- c. High TIBC**

ans:a

77- A female presents with hemoptysis, pleuritic pain, and shortness of breath. She has a history of 3 miscarriages and a prior DVT. What is the most likely diagnosis?

- a. Antiphospholipid syndrome**
- b. SLE**

ans:a

78- Which of the following investigations would be most useful in differentiating between hypersplenism and aplastic anemia?

- A. Bone marrow biopsy**
- B. Serum ferritin**
- C. Reticulocyte count**
- D. Serum vitamin B12 levels**

ans:c

79- Anisocytosis mean

- A- The general term that describes variation in red blood cell size**
- B- The general term that describes variation in red blood cell shape**

Ans:a

80- All the following are causes of ITP expect:

- A- SLE**
- B- heparin**
- C- vit B12**

81- Which of the following is NOT a standard treatment for immune thrombocytopenia (ITP)?

- A) Oral vitamin B12**
- B) Prednisone**
- C) Intravenous immunoglobulin (IVIg)**
- D) Splenectomy**
- E) Azithroprine**

ans : a

82- All of the following conditions make lower than expected HbA1c level except:

- A- Hereditary sideroblastic**
- B- Hemodialysis**
- C- Sickle cell anemia**
- D- G6p**
- E- Iron deficiency anemia**

ans:e

Nephro

83- What is the most common cause of acute kidney injury?

- a. Dehydration**
- b. Acute interstitial nephritis**
- c. Glomerulonephritis**

Ans:a

84-Which of the following is a symptom of renal disease?

- a. Chest pain**
- b. High blood pressure**
- c. Diarrhea**

ans:b

85-What is the normal range of GFR in a healthy person?

- a. 200-300**
- b. 10-30**
- c. 90-120**
- d. More than 800**

Ans:c

86-Which of the following is NOT a contraindication to performing a kidney biopsy?

- a. Severe bleeding diathesis**
- b. Uncontrolled hypertension**
- c. Transplanted kidney**
- d. Solitary kidney**
- e. Small kidney**

ans:c

87- You are seeing a 60-year-old male for the first time, presented with blood pressure readings of 168/106 with similar readings on 3 different occasions, there is no evidence of end-organ damage, and he has no comorbidities. What is your initial management?

- a. Give hydrochlorothiazide 25mg**
- b. Initiate ACE inhibitors**
- c. Reassurance**
- d. IV furosemide**

ans :b

88-How is the severity of Chronic Kidney Disease (CKD) classified into 5 stages?

- A) Based on serum creatinine levels alone**
- B) Based on (GFR)**
- C) Based on the presence of proteinuria**

Ans: b

89-A 35-year-old male presents with suspected (PCKD). He reports a family history of PCKD in his father and brother. What is the best initial screening modality for this patient?

- A. Renal ultrasound (US)**
- B. Genetic testing**
- C. CT scan of the abdomen**
- D. MRI of the kidneys**

Ans:a

91- All of the following are characteristic by hypertension except :

- a.cushing syndrome**
- b.Adrenal insufficiency**

ans:b

92-All of the following are indications for dialysis except:

- A-Hypophosphatemia**
- B-hyperkalemia**
- C-metabolic acidosis**
- D. Fluid overloud**

ans: a

Infection

96- Which of the following organism causes bloody diarrhea?

- A- Campylobacter**
- B- Giardiasis**

Ans:a