Select the correct answers to the following questions!!!
...each question may have more than one correct answer.

FM-1.1.
Renal calcification is a possible complication of:
A) medullary cystic kidney disease
B) renal tuberculosis
C) sarcoidosis
D) sickle cell anemia
E) secondary hyperparathyroidism

FM-1.2.
Which of the following statements concerning chromosomes are correct?
A) their number is normally 46
B) mosaicism is the coexistence of cells with different number of chromosomes within the same organism
C) they are always identical in cells of the same phenotype
D) nondisjunction must be followed by translocation
E) they can be used as tumor markers

FM-1.3.
Drugs with a bacteriostatic effect in regular doses include:
A) tetracyclines
B) cephalosporins
C) sulfamethoxazole and trimethoprim (Sumetrolim)
D) erythromycin
E) amoxycillin

FM-1.4.
Factors causing a susceptibility to urinary tract infect include:
A) urinary tract obstruction
B) diabetes mellitus
C) hyperkalemia
D) prolonged tetracycline therapy
E) pregnancy

FM-1.5.
The medical history of a 45-year-old male reveals episodes of vertigo and loss of consciousness associated with sweating. Possible causes of his symptoms include:
A) hyperventilation
B) hyperglycemia
C) Zollinger-Ellison syndrome
D) pheochromocytoma
E) paroxysmal tachycardia

FM-1.6.
Possible causes of hematemesis include:
A) salicylate administration
B) an oral iron supplement overdose
C) severe burn injury
D) Menetrier's disease (giant hypertrophic gastritis)
E) feeding via a nasogastric tube
FM-1.7.
The use of which of the following should be avoided in patients receiving monoamino-oxidase inhibitor therapy:
A) cheese
B) imipramine (Melipramin)
C) phentolamine (Regitin)
D) pethidine (Dolargan)
E) sulphonamides

FM-1.8.
Which of the following conditions are usually associated with purpura?
A) Henoch-Schönlein syndrome
B) hepatic cirrhosis
C) systemic lupus erythematosus
D) Addison's disease
E) Raynaud's phenomenon

FM-1.9.
Bone density is markedly increased in:
A) osteopetrosis
B) Paget's disease of the bone
C) following the intake of a large amount of fluoride
D) hyperparathyroidism
E) renal osteodystrophy

FM-1.10.
Which of the following conditions is associated with a male-type distribution of hair in females?
A) myxedema
B) true hermaphroditism
C) Laurence-Moon-Biedl syndrome
D) Stein-Leventhal syndrome (polycystic ovary)
E) Cushing's syndrome

FM-1.11.
In which of the following conditions can central cyanosis be detected?
A) methemoglobinemia
B) ventilation-perfusion mismatch
C) pulmonary arteriovenous fistula
D) heatstroke
E) heavy physical exercise

FM-1.12.
Which of the following statements about delirium tremens are correct?
A) chlormethiazole (Heminevrin) is suitable for treatment
B) acoustic hallucinations are common
C) visual hallucinations are common
D) electroshock therapy is indicated in severe cases
E) the condition may be fatal

FM-1.13.
In which of the following conditions can renal failure be fatal?
A) hypernephroma
B) systemic lupus erythematosus (SLE)
C) Weil's disease
D) renal tuberculosis
E) accelerated hypertension

FM-1.14.
Penicillin administration is the appropriate therapy in which of the following complications of syphilis?
A) meningitis
B) aneurysm of the aorta
C) interstitial keratitis
D) condyloma latum
E) the generalized paralysis of psychotic patients

FM-1.15.
Characteristics of mycoplasma-pneumonia include:
A) pleural effusion as a common complication
B) the presence of cold agglutinins
C) associated renal failure
D) a good response to tetracyclines
E) patients immunized against mycoplasma are resistant

FM-1.16.
Which of the following statements about post-traumatic epilepsy are correct?
A) it usually follows head trauma within a month
B) the CT reveals the causative abnormalities
C) it requires surgical therapy in most cases
D) it responds poorly to standard anticonvulsive therapy
E) the EEG reveals its characteristic changes

FM-1.17.
Macroglossia is a possible feature of which of the following conditions?
A) acromegaly
B) Marfan's syndrome
C) Hurler's syndrome
D) achondroplasia
E) amyloidosis

FM-1.18.
A paradoxically split second heart sound is a feature of,
A) severe pulmonary stenosis
B) a ventricular septal defect
C) severe aortic stenosis
D) a patent ductus arteriosus
E) complete right bundle branch block

FM-1.19.
Bilateral parotid gland enlargement is a symptom of
A) Mikulicz's syndrome
B) infectious mononucleosis
C) mumps
D) brucellosis
E) sarcoidosis

FM-1.20.
Which of the following statements about Conn's syndrome are correct?
A) a high aldosterone level in the serum is a characteristic finding
B) the plasma renin activity is elevated
C) the associated hypertension is malignant in 10% of cases
D) hyperkalemia is a common complication
E) operative therapy is usually recommended

FM-1.21. Recognized causes of nodular hepatomegaly include:
A) postnecrotic cirrhosis
B) primary biliary cirrhosis
C) syphilis of the liver
D) Weil's disease (Leptospira icterohemorrhagica)
E) carcinomatous metastases of the liver

FM-1.22. Which of the following symptoms are associated with Turner's syndrome?
A) infantilism
B) congenital abnormalities of the external genitalia
C) an atrial septal defect
D) retinitis pigmentosa
E) a short stature

FM-1.23. Symptoms characteristic of an acute exacerbation of ulcerative colitis include:
A) the development of anemia
B) the occurrence of vertigo following sulfasalazine therapy
C) macroscopically detected blood in the feces
D) the development of generalized eruptions
E) an increased erythrocyte sedimentation rate

FM-1.24. The early manifestations of congenital syphilis include:
A) oral eczema
B) interstitial keratitis
C) occipital lymphadenopathy
D) Clutton-knee (Clutton's joint)
E) chorioretinitis

FM-1.25. Which of the following statements about congenital hypertrophic pyloric stenosis are correct?
A) it is more frequent in females
B) there is an increased likelihood for any offspring to be similarly afflicted
C) any vomit almost never contains bile
D) the pyloric ring is rarely palpable
E) the majority of patients require surgical therapy

FM-1.26. Which of the following statements about renal disease are correct?
A) a 3000 ml/24 h urine volume is a normal finding
B) the severity of proteinuria correlates with the severity of the responsible renal disease
C) granular casts are observed exclusively in renal disease
D) orthostatic proteinuria, if chronic, is abnormal
E) Tamm-Horsfall protein is a normal constituent of the urine
FM-1.27. Which of the following conditions is associated with true hematuria?
A) urinary tract tuberculosis
B) acute pyelonephritis
C) acute cystitis
D) malignant hypertension
E) renal infarction

FM-1.28. Which of the following statements about medullary cystic kidney disease are correct?
A) the prognosis is usually poor
B) it is usually manifested during childhood
C) the diagnosis is based on the associated radiological findings
D) renal calculi may be present
E) renal function is frequently impaired

FM-1.29. In the carcinoid syndrome:
A) mitral stenosis is a possible complication
B) it may be diagnosed by measuring the vanillylmandelic acid (VMA) concentration in the urine
C) the application of methysergide (Deseril) is a possible therapeutic intervention
D) any associated alcohol intake can induce a facial blushing
E) chronic dyspnea is a recognized complication

FM-1.30. Primary optic nerve atrophy is a recognized complication of:
A) glaucoma
B) disseminated sclerosis
C) Paget's disease of the skull
D) neurosyphilis
E) ethambutol (Sural) therapy

FM-1.31. Recognized causes of motor neuropathy include:
A) diabetes mellitus
B) porphyria
C) Guillain-Barre syndrome
D) Friedrich's ataxia
E) diphtheria

FM-1.32. Possible causes of hypercholesterolemia include:
A) primary biliary cirrhosis
B) the nephrotic syndrome
C) hyperthyroidism
D) hepatocellular jaundice
E) Gaucher's disease

FM-1.33. Which of the following statements about Charcot's joint are correct?
A) it is caused by syringomyelia
B) it is caused by diabetes mellitus
C) it is more frequent in females than in males
D) one of its complications is kyphosis
E) penicillin therapy is effective if this alteration is caused by syphilis

FM-1.34.
Recurrent syncopes are possible complications:
A) in narcolepsy
B) during the Valsalva maneuver
C) in children suffering from whooping cough
D) of the Shy-Drager syndrome
E) in Adams-Stokes syncope

FM-1.35.
Which of the following symptoms are associated with chronic alcoholism?
A) acoustic hallucinations
B) amnestic syndromes
C) severe pruritus
D) degeneration of the corpus callosum
E) multiple mononeuritis

FM-1.36.
Which of the following signs can be attributed to an iron deficiency anemia?
A) a pale color of the sclera
B) hepatosplenomegaly
C) glossodynia (pain in the tongue)
D) menorrhagia
E) neurologic abnormalities

FM-1.37.
Which of the following statements about lymphogranuloma inguinale are correct?
A) its causative agent is Chlamydia
B) it is associated with painful primary genital lesions
C) it causes painless inguinal lymphadenopathy
D) it is frequently associated with suppuration of the inguinal lymph nodes
E) rectal stenosis is a possible complication

FM-1.38.
Which of the following statements about hallucinations are correct?
A) acoustic hallucinations are a common complication of amphetamine psychosis
B) paranoid symptoms are characteristic of "cocaine psychosis"
C) amphetamines can induce hallucinations
D) hallucinations are inevitable symptoms of schizophrenia
E) purely visual hallucinations suggest a functional abnormality

FM-1.39.
In encephalitis lethargica:
A) choreoathetoid movements are seen in the acute phase
B) an oculogyric crisis develops following therapy
C) endogenic depression is a common complication
D) mental retardation can develop
E) Argyll-Robertson pupils are detected
FM-1.40.
Which of the following conditions are related to psychosomatic disorders?
A) systemic lupus erythematosus
B) vasomotor rhinitis
C) peptic ulcer
D) diabetes mellitus
E) Bartter's syndrome

FM-1.41.
Which of the following compounds are well known antidotes?
A) naloxone - morphine overdose
B) pralidoxime - parathione intoxication
C) dimercaptol - cyanide intoxication
D) orphenadrine - pyridostigmine intoxication
E) cobalt-EDTA - haloperidol overdose

FM-1.42.
HLA B8-linked diseases include:
A) multiple sclerosis
B) dermatitis herpetiformis
C) celiac disease
D) ankylosing spondylitis
E) myasthenia gravis

FM-1.43.
Factors stimulating gastrin secretion include:
A) gastric wall distension
B) acid in the lumen of the stomach
C) glucagon
D) calcium
E) secretin

FM-1.44.
Hyperparathyroidism is associated with:
A) hypocalcemia
B) psychosis
C) constipation
D) Trousseau's sign
E) renal stones with the risk of urinary obstruction

FM-1.45.
Brucellosis is usually associated with:
A) bilateral hilar lymphadenopathy which can be observed on the chest x-ray
B) jaundice
C) spontaneous remissions of several weeks to months in length
D) splenomegaly
E) marked sweating

FM-1.46.
Which of the following statements about anthrax are correct?
A) it is an occupational disease
B) Woolsorter's disease develops following the inhalation of the causative microorganism
C) more than 90% of patients exhibit skin lesions
D) the malignant pustula is very painful
E) any associated regional lymphadenopathy is very unusual

FM-1.47.
Nephroblastoma (Wilms' tumor):
A) is a malignancy of childhood
B) distant metastases develop rapidly
C) it may present with systemic hypertension
D) if the tumor is localized to the kidney, a nephrectomy is indicated
E) it causes hypercalcemia

FM-1.48.
Recognized causes of the nephrotic syndrome include:
A) constrictive pericarditis
B) malaria
C) Goodpasture's syndrome
D) Hodgkin's disease
E) excessive use of acetaminophen (Rubophen)

FM-1.49.
The ECG abnormalities characteristic for acute rheumatic fever include:
A) a short QT interval
B) nonparoxysmal AV nodal tachycardia
C) prominent U waves
D) second degree AV block
E) delta waves

FM-1.50.
Non-cardiogenic pulmonary edema is associated with:
A) an acetaminophen (Rubophen) overdose
B) nitrofurantoin therapy
C) oxygen toxicity
D) head trauma
E) ketoacidosis

FM-1.51
Hypoglycemia is a recognized symptom or complication of:
A) Addison's disease
B) the Zollinger-Ellison syndrome
C) chlorpropamide therapy
D) high dose penicillin therapy
E) chlorpromazine therapy

FM-1.52.
Which of the following statements about Crohn's disease are correct?
A) the prevalence of ulcerative colitis is lower in relatives of patients suffering from Crohn's disease
B) pyrexia of unknown etiology is a characteristic finding
C) any intestinal manifestation might be preceded by ankylosing spondylitis
D) a risk of developing colonic carcinoma is increased after 10 years of the presence of Crohn's disease
E) the first detected symptom of the disease is usually diarrhea without blood in the feces
FM-1.53.
Neuropsychiatric symptoms of hepatic insufficiency include:
A) a reverse sleep pattern
B) Argyll-Robertson pupils
C) myelopathy with paraplegia
D) perseveration signs
E) diagnostic EEG abnormalities

FM-1.54. Which of the following statements about psoriatic arthropathy are correct?
A) it affects 20% of psoriatic patients
B) all joints are symmetrically affected
C) sacroileitis is a characteristic finding
D) the joints of the hand frequently exhibit minimal destructive abnormalities
E) the application of steroids is usually contraindicated

FM-1.55.
Which of the following statements about gastric secretion are correct?
A) approximately 250 ml gastric juice is secreted daily
B) gelatinase is a normal constituent of gastric juice
C) the stomach is capable of producing both acidic or alkaline secretions
D) if the rate of production is slow, the Na+ concentration is high
E) only the glands of the pyloric region are capable of secreting mucus

FM-1.56.
Characteristics of mediastinal emphysema include:
A) marked suprasternal pulsation
B) Hamman's sign (a crackling sound synchronous with cardiac systole)
C) pain in the throat
D) gas under the diaphragm
E) cyanosis

FM-1.57.
Transient amnesia is possible:
A) following head trauma
B) in patients suffering from epilepsy
C) in cerebrovascular insufficiency
D) in Alzheimer's disease
E) in patients with a temporal lobe tumor

FM-1.58.
Paresthesia associated with pruritus is characteristic for which of the following conditions?
A) multiple sclerosis
B) temporal lobe epilepsy
C) Raynaud's phenomenon
D) acromegaly
E) hypoventilation

FM-1.59.
An abnormality of speech is a recognized complication of:
A) dementia paralitica (a generalized paralysis of the psychotic patient)
B) congenital diplegia
C) Friedricch's ataxia
D) amyotrophic lateral sclerosis
E) severe glossitis

FM-1.60.
In which of the following conditions does palpation reveal uneven, rough liver edges?
A) alcoholic cirrhosis after the withdrawal of alcohol
B) secondary syphilis
C) hepatic actinomycosis
D) Wilson's disease
E) an amebic hepatic abscess

FM-1.61.
In polycythemia rubra vera:
A) the reticulocyte count is typically elevated
B) the leukocyte alkaline phosphatase activity is low
C) 30% of patients exhibit hyperuricosuria
D) the vitamin B₁₂ binding capacity in the serum is elevated
E) the serum total iron level is typically elevated

FM-1.62.
Which of the following statements about methemoglobinemia are correct?
A) it is caused by a cytochrome B₅ reductase deficiency
B) the color of the blood is chocolate brown
C) the family history is usually positive
D) if treatment is indicated, the intravenous administration of methylene blue is a possible intervention
E) cyanosis is a characteristic finding

FM-1.63.
In eczema of infancy:
A) eruptions are characteristically present at birth
B) the papules cause itching
C) cold weather relieves the symptoms
D) in 70% of cases the family history reveals data indicative of the disease
E) the presence of dermographism excludes the diagnosis

FM-1.64.
Which of the following statements about Letterer-Siwe disease are correct?
A) this is a slowly progressing disease of childhood
B) a generalized lymphadenopathy is characteristic
C) severe hemorrhagic eruptions occur
D) the reaction to corticosteroids is usually positive
E) a "honeycomb lung" on the x-ray film is of diagnostic value

FM-1.65
Tetralogy of Fallot:
A) pulmonary stenosis in most cases is due to an obstruction of the valve
B) cyanosis might be absent in the first few months of life
C) can be associated with convulsions
D) the second pulmonary sound becomes widely split
E) the pulmonary fields are typically flooded on the chest x-ray
Recognized causes of a childhood onset hepatic cirrhosis include:
A) Gaucher's disease
B) occlusive disease of the hepatic vein
C) xanthomatosis
D) alcoholism during pregnancy
E) celiac disease

A 12-week-old healthy infant:
A) would react if called by his/her name
B) turns his/her head towards a summoning voice
C) produces a grabbing reflex in response to the proper stimulus
D) can recognize the feeding bottle
E) can elevate his/her head from the pillow

Characteristics of Korsakoff's syndrome include:
A) polyneuritis which is detected in all cases
B) a clear consciousness
C) impaired judgement
D) morphological abnormalities in the hypothalamus
E) confabulation

Symptoms suggestive of childhood onset schizophrenia include:
A) abnormal movements
B) persistent sucking of the finger
C) resistance against changes in the environment
D) infantile autism
E) negativism

Signs indicative of a good prognosis in schizophrenia include:
A) an acute onset of the disease
B) a positive family history
C) a previously stable personality
D) a pycnic constitution
E) an early onset of the disease

Haloperidol:
A) is effective in the treatment of depressive psychosis
B) has a marked antiemetic effect
C) has marked extrapyramidal side effects
D) is administered only in the form of an injection
E) can be used to substitute for phenothiazine derivatives in patients who become jaundiced following phenothiazine administration

Indications of penicillamine therapy include:
A) systemic sclerosis
B) primary biliary cirrhosis
C) recurrent polychondritis
D) hemosiderosis
E) drug induced chronic active hepatitis

FM-1.73
The side effects of corticosteroids include:
A) a loss of collagen
B) decreased leukocyte migration
C) avascular bone necrosis
D) hypercalcemia
E) increased vascular permeability

FM-1.74. Digitalis therapy:
A) is contraindicated in atrial tachycardia
B) elongates the effective refractory period of the AV node
C) is likely to cause intoxication with a concomitant hyperkalemia
D) is contraindicated in cor pulmonale
E) is effective in hypertrophic obstructive cardiomyopathy

FM-1.75. In which of the following conditions is polydactyly present?
A) the Laurence-Moon-Biedl syndrome
B) Marfan's syndrome
C) Turner's syndrome
D) Fanconi's congenital aplastic anemia
E) a ventricular septal defect

FM-1.76. An opening snap is detected in:
A) mitral stenosis developing as a consequence of rheumatic carditis
B) congenital mitral stenosis
C) mitral insufficiency associated with a rigid posterior but a normal anterior cusp
D) the presence of a myxoma in the left atrium
E) severe aortic insufficiency

FM-1.77. Which of the following statements concerning acromegaly are correct?
A) patients usually complain of nocturnal paresthesia of the hand
B) dryness of the hand is characteristic
C) female patients complain of hair growth over the extremities and trunk
D) impotence in males is a common complication
E) it cannot be diagnosed if the hypophyseal fossa is normal in size on the skull x-ray film

FM-1.78. Possible therapeutic interventions in thyrotoxic crisis include:
A) a high dose of dexamethasone
B) that the patient must be kept warm
C) the administration of beta-blockers
D) immediate propylthiouracil treatment
E) the administration of iodine

FM-1.79. Specific indications for dialysis include:
A) a serum potassium concentration of 7.4 mmol/l (7.4 mEq/l)
B) a blood pH of 7.2
C) a blood urea concentration of 63 mmol/l (378 mg/100 ml)
D) pericarditis
E) strong lumbar pain

FM-1.80.
In Paget's disease of the bone (osteitis deformans)
A) the serum alkaline phosphatase activity is normal unless the patient has had a recent fracture
B) the serum phosphate concentration is typically low
C) there is a high risk of renal stone formation
D) adequate therapy includes the administration of a high dose of steroids
E) there is a periosteal thickening

FM-1.81.
In Hodgkin's disease:
A) a delayed type hypersensitivity reaction is abnormal
B) the diagnosis can be made with a bone marrow smear in 50% of cases
C) eosinophilia is detected in approximately 10% of cases
D) absolute lymphocytosis is a typical finding
E) hemolytic anemia may occur

FM-1.82.
Complications of massive irradiation include:
A) an increased prevalence of leukemia
B) a thrombocytopenia developing within 4 days
C) an increased prevalence of visceral malignancies
D) leukemoid reactions in some patients.
E) hemolytic anemia

FM-1.83.
Which of the following statements relating to transplantation immunology are correct?
A) a hyperacute rejection is mediated by T-lymphocytes
B) an early acute rejection is mediated by B-lymphocytes
C) a chronic rejection is mediated by immunoglobulins
D) prophylactic steroid therapy effectively reverses any rejection of the transplanted organ
E) antilymphocyte globulin is effective in the destruction of small lymphocytes

FM-1.84. Osteoporosis:
A) causes an elevation of the serum calcium concentration
B) typically causes elevation of the alkaline phosphatase activity
C) causes pain in the bones
D) improves during bed rest
E) the response to calcium substitution therapy is usually positive

FM-1.85. Mydriasis is a recognized complication of:
A) a paralysis of the oculomotor nerve
B) Horner's syndrome
C) retrobulbar neuritis
D) iritis
E) Adie's pupil syndrome

FM-1.86.
Which of the following statements about rubella during pregnancy are
correct?
A) in the first trimester, it is usually associated with a higher risk
   of fetal developmental abnormalities
B) it causes cardiac anomalies in the newborn
C) it causes deafness in the newborn
D) retinopathy is a well known complication
E) the virus is easily isolated from the throat of the newborn even
   if there is no other evidence for the disease

FM-1.87
Alpha,-antitrypsin deficiency is associated with:
A) a family history of emphysema
B) an early onset of dyspnea upon exertion
C) restrictive pulmonary disease
D) bullae in the upper and medial lobe
E) gastrointestinal malabsorption

FM-1.88. Recognized causes of recurrent pneumonia include:
A) chronic alcoholism
B) multiple myeloma
C) hereditary spheroctytosis
D) esophageal lesions
E) allergic bronchopulmonary aspergillosis

FM-1.89. Barbiturates, if continuously administered can:
A) contribute to the development of convulsions
B) induce physical dependence
C) cause relaxation of skeletal muscles
D) cause parkinsonism
E) cause ataxia

FM-1.90.
Megaloblastic anemia is a possible side-effect of:
A) carbamazepine therapy
B) primidone (Sertan) therapy
C) methotrexate therapy
D) sulfamethoxazole and trimethoprim (Sumetrolim) therapy
E) ulcerative colitis

FM-1.91.
Drugs which potentiate hypoglycemic attacks developing as a consequence
of sulphonylurea administration are:
A) probenecid
B) sulfamethoxazole and trimethoprim (Sumetrolim)
C) acenocoumarol (Syncumar)
D) monoamino-oxidase inhibitors
E) salicylates

FM-1.92.
Biologically active compounds which are metabolized in the lung include:
A) surfactant
B) kallikrein
C) prostaglandins
D) angiotensin I
E) bradykinin
FM-1.93.
In atrial septal defect:
A) Symptoms usually present in the second decade
B) Echocardiography reveals dilatation of the pulmonary artery
   and the right ventricle
C) A fixed, widely split second heart sound is detected
D) A murmur is caused by the flow through the defect
E) A mid-diastolic murmur, enhanced during expiration, is characteristic

FM-1.94.
In fat embolization:
A) Skin hemorrhages forming petechiae are rare
B) Cyanosis is present
C) The occurrence of convulsions indicates a poor prognosis
D) Intravenous alcohol injection is a possible therapeutic intervention
E) Hemoptysis is a common symptom

FM-1.95.
Neurologic manifestations of myxedema include:
A) Atrophy of the optic nerve
B) Paresthesia of the hands
C) Cerebellar symptoms
D) A loss of vibration sensation in the legs
E) Hypacusis and tinnitus

FM-1.96.
Possible initial symptoms of diabetes mellitus include:
A) Weight gain
B) Peripheral vascular disease
C) Retinal detachment
D) Polyuria and polydipsia
E) Severe pruritus

FM-1.97.
Characteristic features/complications of cystic fibrosis include:
A) A decreased chloride concentration of sweat
B) Anorexia
C) Hepatic cirrhosis
D) Chronic paranasal sinusitis
E) A decreased pancreatic enzyme activity in the duodenal juice

FM-1.98.
Carcinoma of the gallbladder:
A) The prevalence is higher in males
B) It is associated with cholelithiasis in 90% of cases
C) Virtually never causes hepatomegaly
D) The formation of distant metastases is very rare
E) Commonly develops from an adenomatous polyp

FM-1.99.
Recognized features of Whipple's disease include:
A) That in most cases it is manifested in young adulthood
B) Arthralgia
C) Lymphadenopathy
D) A PAS-positive substance in a jejunal biopsy sample
E) An excellent response to a daily dose of 1 g of tetracycline for 3
Recognized causes of impotency include:
A) a total prostatectomy
B) an androgen deficiency
C) tabes dorsalis
D) parietal lobe lesions
E) malignant hypertension

A sudden development of bilateral external ophthalmoplegia is associated with:
A) botulism
B) myasthenia gravis
C) Wernicke's encephalopathy
D) neurosyphilis
E) diphtheria

Which of the following statements concerning paroxysmal myoglobinuria are correct?
A) the urine is devoid of erythrocytes
B) there is severe muscle weakness
C) renal failure is a possible complication
D) 50% of patients die in an acute attack
E) McArdle's disease is a possible cause

Factors directly regulating the renal concentration of urine under physiological conditions include:
A) the concentration of any circulating antidiuretic hormone
B) the systemic blood pressure
C) normal tubular function
D) a potassium depletion
E) the presence of fever

In the nephrotic syndrome:
A) the prognosis is better in males than in female patients
B) a generalized edema is present
C) an intermittent microscopic hematuria suggests advanced parenchymal damage
D) the administration of steroids is always ineffective
E) favourable treatment includes the management of any underlying Disease

Adult type polycystic kidney disease:
A) its inheritance is autosomal recessive
B) is manifested by massive proteinuria
C) is frequently complicated by malignant hypertension
D) polycythemia is a possible complication
E) an ultrasound examination of the kidneys reveals characteristic changes
In infectious endocarditis:
A) the presence of bacteria within the kidney can usually be demonstrated
B) any renal abnormalities are due to immune complex glomerulonephritis
C) a real hematuria, if present, is not related to the disease
D) any renal involvement unfavourably alters the outcome of the disease
E) a persistent hypocomplementemia is always present

FM-1.107.
In acute pyelonephritis:
A) a common symptom is shaking chills
B) vomiting is a possible complaint
C) the absence of any lumbar pain excludes the diagnosis
D) an intravenous pyelogram is necessary for the diagnosis
E) to confirm the diagnosis, a hemoculture should routinely be made

FM-1.108.
A splenectomy has a beneficial effect in:
A) hereditary spherocytosis
B) idiopathic thrombocytopenic purpura
C) sickle cell anemia
D) thalassemia major
E) hemoglobin H disease

FM-1.109.
Symptoms of the lateral medullary syndrome include:
A) contralateral ataxia
B) Horner's syndrome affecting the ipsilateral side
C) hoarseness of the voice
D) diplopia
E) visual field defects

FM-1.110.
In acute idiopathic polyneuritis:
A) both proximal and distal muscular weakness are present
B) pain is a common feature
C) the occurrence of paresthesias is common
D) urinary retention is a frequent complication
E) lymphadenopathy is a frequent complication

FM-1.111.
Which of the following statements about pellagra are correct?
A) approximately 70% of patients exhibit mental symptoms
B) the excessive consumption of cereals causes this disease
C) an advanced pellagra can be fatal within a few years
D) dermatitis, diarrhea, and dementia frequently develop
E) there is substantial improvement one week after commencing therapy

FM-1.112.
The prevalence of suicide is higher in:
A) depressive psychosis
B) psychopathic patients
C) obsessive-compulsive neurosis
D) chronic alcoholism
E) epilepsy

FM-1.113.
Factors which stimulate glucagon secretion include:
A) cholecystokinin
B) hypoglycemia
C) secretin
D) alpha-adrenergic stimulators
E) free fatty acids

FM-1.114.
Symptoms of the Hand-Schuller-Christian disease include:
A) diabetes insipidus
B) exophthalmus
C) hypercholesterolemia
D) skull lesions
E) lipemia retinalis

FM-1.115.
Poliomyelitis (cerebral infantile paralysis) is associated with:
A) muscle hypotonia
B) ataxia
C) atethosis
D) bitemporal hemianopsia
E) a severe tremor

FM-1.116.
Characteristics of pediatric viral hepatitis include:
A) it is usually caused by the Hepatitis B virus
B) hepatic cirrhosis is a frequent complication
C) pruritus is a rare outcome
D) splenomegaly; which is more frequent than in adult viral hepatitis
E) acute hepatic failure is a rare outcome

FM-1.117.
A type II (cytotoxic) hypersensitivity reaction is observed in:
A) sumac (Rhus vernix) intolerance
B) idiopathic thrombocytopenic purpura (ITP)
C) Goodpasture's syndrome
D) penicillin allergies
E) chronic mucocutaneous candidiasis

FM-1.118.
Immunosuppressive therapy is suitable in which of the following conditions?
A) psoriatic arthritis
B) ileitis regionalis (Crohn's disease)
C) persistent viremia
D) rheumatoid arthritis
E) poststreptococcal glomerulonephritis

FM-1.119.
The complications of diphtheria include:
A) a paralysis of the diaphragm
B) airway obstruction
C) bronchopulmonary diphtheria
D) glossopharyngeal neuritis
E) subacute sclerozing panencephalitis

FM-1.120
Tetanus:
A) is caused by an anaerobic gram-positive rod
B) bacterium is shed into the soil through the intestine of infected animals
C) may cause carpopedal spasm
D) infected patients frequently exhibit mental confusion at admittance
E) urinary retention and constipation may develop

FM-1.121
In primary tuberculosis:
A) alterations usually occur in the lower two thirds of the lungs
B) bilateral hilar adenopathy frequently develops in adolescents
C) miliary tuberculosis might develop
D) eczematous conjunctivitis is a characteristic symptom
E) there is no association with erythema nodosum

FM-1.122.
Characteristics of a Trichinella spiralis infection include:
A) prodromal diarrhea in adults
B) severe muscular pain
C) periorbital edema
D) subconjunctival hemorrhages
E) patchy subungual hemorrhages

FM-1.123.
Myopathy is typically associated with:
A) excessive alcohol ingestion
B) McArdle's disease (phosphorylase deficiency)
C) strychnine poisoning
D) Guillain-Barre syndrome
E) hypothyroidism

FM-1.124.
Which of the following statements concerning silicosis are correct?
A) the latency period is usually short
B) there is a high coincidence rate with scleroderma
C) the prevalence of bronchogenic carcinoma is higher
D) it causes characteristic calcification of the hilar lymph nodes
E) functional respiratory tests reveal an obstructive disorder

FM-1.125.
Bullous skin lesions are observed in which of the following conditions?
A) herpetiform dermatitis
B) a barbiturate overdose
C) Albright's disease
D) ataxia-teleangiectasia
E) pemphigoid

FM-1.126.
Features of galactosemia include:
A) hepatic cirrhosis
B) mental retardation  
C) E. coli septicemia  
D) that it improves following application of products containing soybean  
E) cataracts which are present at birth  

FM-1.127. Somatostatin:  
A) is found in the D cells of the pancreatic islet cells  
B) inhibits insulin secretion  
C) inhibits glucagon secretion  
D) pancreatic tumors secreting somatostatin cause hyperglycemia  
E) pancreatic tumors secreting somatostatin cause biliary stones  

FM-1.128. Which of the following findings can be detected in Hodgkin's disease:  
A) a normochromic, normocytic anemia  
B) an increased erythrocyte sedimentation rate  
C) leukocytosis  
D) thrombocytosis  
E) eosinophilia  

FM-1.129. Trichomoniasis:  
A) causes perinatal intertrigo  
B) is sexually transmitted  
C) causes severe systemic symptoms  
D) may be completely symptomless  
E) the disease of the newborns is transmitted from the mother  

FM-1.130. Symptoms of a ventricular septal defect include:  
A) an elevated jugular vein pressure, even in the absence of cardiac failure  
B) a pansystolic murmur over the apex  
C) a systolic ejection murmur  
D) a Graham-Steel sound, which is a very common finding following the development of pulmonary hypertension  
E) a fixed, widely split second heart sound  

FM-1.131. Infective endocarditis is rarely associated with:  
A) combined mitral valvular disease  
B) a patent ductus arteriosus  
C) congenital bicuspid aortic stenosis  
D) an atrial septal defect  
E) advanced mitral stenosis  

FM-1.132. In pulmonary atresia:  
A) cyanosis is present  
B) convulsions may occur  
C) a continuous murmur is detected  
D) the ECG findings differentiate this condition from Tetralogy of Fallot  
E) crouching down relieves the associated symptoms  

FM-1.133. Klebsiella-pneumonia:
A) is usually mild
B) is frequently associated with a collapse of the upper lobe
C) frequently causes lung abscesses
D) despite therapy the mortality is 50%
E) most commonly develops in youngsters

FM-1.134.
Addison's disease can be associated with:
A) Hashimoto's thyroiditis
B) hyperparathyroidism
C) more intensive pigmentation
D) vitiligo
E) calcification of the adrenal gland

FM-1.135.
An association of cholestatic icterus has been noted with:
A) pregnancy
B) methyltestosterone therapy
C) isoniazid therapy.
D) halothane anesthesia
E) biliary cirrhosis

FM-1.136.
icotinamide deficiency may cause:
A) high output cardiac failure
B) dementia
C) glossitis
D) sensory polyneuropathy
E) dermatitis

FM-1.137.
The relatives of patients with which of the following diseases must undergo a screening test?
A) acute intermittent porphyria
B) Wilson's disease
C) hemochromatosis
D) Gilbert's disease
E) chlorpromazine induced cholestatic icterus

FM-1.138.
Which of the following findings would suggest a benign rather than a malignant paraproteinemia?
A) Bence-Jones proteinuria
B) the IgG level is higher than 2 g/100 ml
C) there is an elevated paraprotein level
D) no skeletal abnormalities can be detected
E) a 2-year symptomless period

FM-1.139.
Which of the following statements about nitroglycerin are correct?
A) only topical application is effective in Raynaud's disease
B) it causes paroxysmal nocturnal dyspnea as a side-effect
C) it relieves the pain caused by diffuse esophageal spasms
D) it might relieve pain in biliary colic
E) it alleviates the symptoms of bronchial asthma
FM-1.140.
Which of the following statements concerning doxorubicin (Adriamycin) therapy are correct?
A) the drug is applied intramuscularly
B) the drug causes myelosuppression
C) the drug causes cardiomyopathy
D) the drug is successful in the treatment of primary hepatocellular carcinoma
E) the drug should be administered daily, for a period of 21 days

FM-1.141.
A classic type migraine is characterized by which of the following?
A) it cannot be diagnosed if there are no prodromal symptoms
B) it shows a gradual progression
C) a homonymous hemianopsia is present
D) there is edema of the papilla
E) frequently occurring acoustic hallucinations

FM-1.142
Progressive spinal muscular atrophy of infancy is associated with:
A) severe general syncope
B) fasciculation of the tongue
C) a loss of function of the spinthalamic tract
D) spontaneous fibrillation revealed by electromyography
E) normal tendon reflexes

FM-1.143.
The complications of meningococcal meningitis include:
A) hydrocephalus
B) paraparesis
C) cortical blindness
D) deafness
E) peripheral neuropathy

FM-1.144.
In pyloric stenosis of infancy:
A) there is an autosomal dominant inheritance pattern
B) vomiting occurs during the first week of life
C) the vomit is frequently tinged with bile
D) an abdominal tumor is nearly always palpable
E) if left untreated complications during adulthood commonly develop

FM-1.145.
Which of the following foods should be avoided in celiac disease (gluten sensitive enteropathy)?
A) cheese
B) corn flakes
C) rye cereals
D) beer
E) bread

FM-1.146.
Manifestations of congenital rubella include:
A) thrombocytosis
B) retrolental fibroplasia
C) mental retardation
D) microphthalmus
E) macrosomia

FM-1.147.
Causes of mental retardation include:
A) severe malnutrition
B) polyomyelitis
C) 'cri du chat' syndrome
D) a cytomegalovirus infection
E) the presence of syringomyelia

FM-1.148.
Which of the following findings would suggest psychosis of childhood?
A) an inability to speak
B) intense emotional outbreaks
C) recurrent nocturnal enuresis after a toilet-proof period
D) a sensation of depersonalization
E) a sudden onset of dysphemia (stammering)

FM-1.149.
Which of the following observations help to differentiate neurosis from psychosis?
A) neurotic patients characteristically disclaim reality
B) endogenous experiences cause excitation in neurosis
C) real illusions can occur in neurosis
D) associative function is not affected in neurosis
E) the 'ego' is intact in neurotic patients

FM-1.150.
Which of the following statements about autosomal dominant inheritance are correct?
A) the likelihood of a manifestation in the offspring is 25%
B) the manifested disease is usually less severe than those which have the recessive trait
C) manifestation affects several generations
D) healthy parents are carriers
E) the more rare the manifestation, the more likely a genetic relationship exists in the family

FM-1.151.
Plague:
A) is transmitted by droplet infection
B) usually does not cause fever
C) causes painful enlargement of the lymph nodes
D) causes characteristic circular erythematous skin lesions
E) responds to high dose penicillin therapy

FM-1.152.
In amebic dysentery:
A) symptoms might be similar to those observed in duodenal ulcer
B) alternating diarrhea and constipation suggest an underlying carcinoma
C) intestinal movements are associated with a characteristic
sweet odor
D) amebiasis of the liver is a rare complication
E) metronidazole (Klion) is the therapeutic drug of first choice

FM-1.153.
Toxocara canis:
A) causes severe pruritus ani
B) causes hepatosplenomegaly
C) may cause asthma
D) the larva respond to diethylcarbamazine
E) causes chronic diarrhea in children

FM-1.154.
Lymphogranuloma venereum:
A) its prevalence is high in temperate zones
B) the Frei-test is frequently positive
C) is caused by Clamydia trachomatis
D) usually causes primary herpetiform lesions
E) causes non-gonococcal urethritis

FM-1.155.
Laboratory findings characteristic for early nephrotic syndrome
include:
A) a serum albumin level which is lower than 25 g/l
B) a decreased fibrinogen level
C) an elevated serum cholesterol level
D) an expanded circulatory volume
E) an increased erythrocyte sedimentation rate

FM-1.156.
Causes of an increased kidney size include:
A) acute glomerulonephritis
B) polycystic kidney disease
C) chronic glomerulonephritis
D) renal amyloidosis
E) hypertrophy following contralateral nephrectomy

FM-1.157. Possible causes of fibrotic alopecia include:
A) x-ray irradiation
B) alopecia areata
C) discoid lupus erythematosus
D) a post partum state
E) heparinization

FM-1.158.
Infectious mononucleosis is associated with:
A) periorbital swelling
B) generalized lymphadenopathy
C) jaundice in the majority of patients
D) petechiae on the palate
E) pruritus

FM-1.159.
In polycythemia rubra vera:
A) a transient blurring of vision is possible
B) the tendency for thrombosis only affects the veins
C) the Budd-Chiari syndrome develops  
D) gastrointestinal bleedings can occur  
E) the development of gout is a rare complication

FM-1.160.  
Which of the following statements about chronic lymphocytic lymphoma are correct?  
A) irradiation preceding the onset is an etiological factor  
B) in 50% of the cases the onset is before the age of 30  
C) a painful enlargement of the spleen develops  
D) a Coombs negative hemolytic anemia is observed  
E) hypogammaglobulinemia is a frequent complication

FM-1.161.  
Characteristics of beta-thalassemia include:  
A) hepatosplenomegaly  
B) an enlargement of the maxillary region of the face  
C) a frequency of infectious diseases which is lower than in the normal population  
D) a normal reticulocyte count  
E) characteristic changes on the skull x-ray

FM-1.162.  
Factors which increase cardiac output include:  
A) sleep  
B) tachyarrhythmias with a rate of over 200/min  
C) eating  
D) any slight changes in the subject's environment  
E) sitting up from a horizontal position

FM-1.163.  
Which of the following anatomical statements are correct?  
A) the liver and gallbladder cover the first part of duodenum  
B) the pancreas crosses the medial part of the duodenum  
C) the ampulle of Vater is situated in the third part of the duodenum  
D) the superior pancreaticoduodenal artery originates from the superior mesenteric artery  
E) the right kidney lies just behind the second part of the duodenum

FM-1.164.  
ECG abnormalities characteristic for acute rheumatic fever include:  
A) a short PR interval  
B) non-paroxysmal AV nodal tachycardia  
C) a third degree AV block  
D) a long QT interval  
E) tall, asymmetric T waves observed in the precordial leads

FM-1.165.  
Which of the following statements relating to aortic regurgitation are correct?  
A) an early diastolic murmur revealed by auscultation during acute rheumatic valvulitis is usually transient  
B) angina pectoris is a more frequent complication than in aortic stenosis  
C) a progression of the condition usually results in accentuation of the murmur
D) an accentuated first sound differentiates an Austin-Flint murmur from organic mitral stenosis
E) an accentuated presystolic murmur may be detected without an associated mitral stenosis

FM-1.166.
Which of the following drugs would lower the total serum cholesterol concentration in a patient with atherosclerosis of the coronaries?
A) saccharin
B) nicotinic acid
C) bezafibrate
D) sulfinpyrazone
E) thyroxine

FM-1.167.
Recognized complications of severe intoxication with aspirin include:
A) acidosis
B) hypoglycemia
C) hyperprothrombinemia
D) tinnitus
E) bone marrow hematopoiesis suppression

FM-1.168.
Characteristics of rheumatic polymyalgia include:
A) an onset which occurs in young adulthood
B) painful muscles and restriction of movements are characteristic
C) that it may be associated with temporal arteritis
D) a red blood cell sedimentation rate which is typically normal
E) characteristic abnormalities revealed by electromyography

FM-1.169.
Bilateral pleural effusion is observed in:
A) pleural mesothelioma
B) systemic lupus erythematosus
C) miliary tuberculosis
D) carcinomatous lymphangitis
E) sarcoidosis

FM-1.170.
Case Study
In a patient with dyspnea, both the FEV₁ and FVC are decreased, while the FEV₁/FVC ratio is 82%. Possible causes which should be considered in the differential diagnosis include:
A) acute bronchial asthma
B) fibrotizing alveolitis
C) pleural effusion
D) ankylosing spondylitis
E) chronic bronchitis

FM-1.171.
Classical symptoms of multiple sclerosis include:
A) paresthesia
B) retrobulbar neuritis
C) a loss of position and vibration sensation
D) diplopia
E) a steady progression
FM-1.172.
In "petit mal" epilepsy:
A) a cerebral tumor is observed which is responsible for the
development of the disease
B) breath-holding spells (infantile syncope) are observed
C) the EEG reveals characteristic changes
D) if the disease persists then during adulthood "grand mal"
   convulsions may also occur
E) no effective treatment is available

FM-1.173.
Cryptococcus infection:
A) causes the symptoms of meningitis
B) is a frequent complication of AIDS
C) a lung infection might remain localized
D) a common complication is the occurrence of a pleural effusion
E) a typical finding is calcified hilar lymphadenopathy

FM-1.174.
Which of the following tests are valuable in the differential diagnosis
of non-tropical sprue and pancreatic insufficiency?
A) the determination of the urinary indican
B) 14C-D-xylose test
C) the Schilling test
D) the serum albumin concentration
E) the serum cholesterol concentration

FM-1.175.
Which of the following statements about glucagon are correct?
A) its half-life in the circulation is 5-10 hours
B) it is metabolized mainly in skeletal muscle
C) it is secreted into the portal vein
D) it stimulates red blood cell production in the bone marrow
E) it has a gluconeogenic effect

FM-1.176.
Undesirable effects of oxygen inhalation include:
A) pulmonary atelectasis
B) hepatic fibrosis
C) retrolental fibroplasia
D) acute renal failure
E) myocardial damage

FM-1.177.
Which of the following statements about Bence-Jones proteins are correct?
A) if they are present in the urine, the Albustix test is positive
B) the excreted amount increases parallel with the progression of
   the renal disease
C) they are rarely detected in benign monoclonal gammopathy
D) in severe cases, hypoproteinemia develops
E) they are light chain proteins

FM-1.178.
Drug induced lupus erythematosus:
A) causes renal failure
B) causes arthritis  
C) corticosteroid therapy may be indicated  
D) may be caused by pyrazinamide therapy  
E) may be caused by hydralazine therapy

FM-1.179. Radio-opaque renal stones are:  
A) calcium oxalate stones  
B) xanthine stones  
C) uric acid stones  
D) cystine stones  
E) magnesium ammonium phosphate stones

FM-1.180. Jaundice and acute renal failure are detected in:  
A) amanita phalloides poisoning  
B) Gram negative septicemia  
C) Weil's disease  
D) polycystic kidney disease  
E) salicylate intoxication

FM-1.181. A serum calcium level of 3.0 mmol/l(12 mg%) is possibly detected in:  
A) acute alcohol induced pancreatitis  
B) multiple myeloma  
C) hyperparathyroidism  
D) renal tubular acidosis  
E) sarcoidosis

FM-1.182. Hyperuricemia is associated with which of the following conditions?  
A) lymphomas  
B) hemolysis  
C) preeclampsia  
D) acute alcohol abuse  
E) hypoparathyroidism

FM-1.183. Which of the following diseases have an autosomal dominant inheritance pattern?  
A) Ehlers-Danlos syndrome  
B) homocystinuria  
C) hereditary spherocytosis  
D) galactosemia  
E) Marfan's syndrome

FM-1.184. Clubbing of the fingers is observed in which of the following conditions?  
A) chronic meningococcal meningitis  
B) rheumatoid arthritis  
C) bronchiectasis  
D) schistosomiasis  
E) carcinoma of the lung

FM-1.185. Impetigo:
A) is usually caused by staphylococcus infection  
B) causes bullous lesions  
C) is associated with toxic epidermal necrolysis  
D) is manifested on surfaces which are usually covered with clothes  
E) is rarely contagious  

FM-1.186.  
In chronic lymphocytic leukemia:  
A) an absolute lymphocytosis is observed  
B) thrombocytosis is observed  
C) splenomegaly is always present  
D) the development of an acute blastic crisis is possible  
E) Coombs positivity is possible  

FM-1.187.  
Which of the following findings would suggest a thrombocyte defect rather than a coagulation abnormality?  
A) hemarthrosis  
B) bleeding from superficial abrasions  
C) immediate and strong bleeding from tooth extraction  
D) bleeding of the mucous membranes  
E) menorrhagia  

FM-1.188.  
In classic type hemophilia:  
A) the inheritance pattern is autosomal recessive  
B) every son in the offspring of a male patient is affected  
C) 50% of daughters of the carrier females become carriers themselves  
D) hemarthrosis is a common manifestation  
E) spontaneous hemorrhaging in the brain frequently develops  

FM-1.189.  
In Huntington's disease:  
A) the onset is usually acute  
B) the family history is positive  
C) extreme dementia develops  
D) choreiform movements usually affect the lower extremities first  
E) symptoms usually develop after the age of 30  

FM-1.190.  
Fever:  
A) its development is attributed to an increased production of interleukin-1  
B) slows down the growth of certain tumors  
C) is advantageous in patients with rickettsial infections  
D) unfavourably increases viral infections by promoting viral proliferation  
E) is advantageous in neurosyphilis  

FM-1.191.  
Which of the following are congenital heart diseases which cause central cyanosis?  
A) Tetralogy of Fallot  
B) pulmonary stenosis  
C) severe aortic stenosis  
D) tricuspid atresia
E) Ebstein's anomaly

FM-1.192. Symptoms of rickets of infancy include:
A) muscular hypertrophy
B) sweating of the skin of the head
C) craniotabes
D) coxa vara
E) an early closing of the fontanelles

FM-1.193. The clinical symptoms of idiopathic hypercalcemia of infancy include:
A) severe constipation
B) a low serum cholesterol level
C) a short PQ interval observed on the ECG
D) an irreversible mental retardation
E) hypertension

FM-1.194. Iron poisoning in children:
A) is less likely to be caused by ferrous gluconate than by ferrous sulphate
B) causes melena
C) causes jaundice
D) heart failure is a common complication
E) causes respiratory acidosis

FM-1.195. Which of the following statements about norepinephrine are correct when compared to epinephrine?
A) a development of hyperglycemia is less likely with norepinephrine
B) a more pronounced elevation of blood pressure is observed with norepinephrine
C) a more pronounced increase in peripheral resistance is observed with norepinephrine
D) norepinephrine markedly increases cardiac output
E) the effect on the free fatty acid liberation is more pronounced with norepinephrine

FM-1.196. Which of the following statement about a bicuspid aortic valve is correct?
A) coarctation of the aorta is sometimes associated with this anomaly
B) calcification of the abnormal valve is rare
C) infectious endocarditis is extremely rare
D) incompetence of the valve is more frequent than stenosis of the valve
E) this anomaly is frequently associated with Turner's syndrome

FM-1.197. Aortic arteritis (Takayasu's syndrome):
A) a carotid sinus hyperesthesia is present
B) visual symptoms are pronounced
C) cardial insufficiency is rare
D) claudication of the jaw is detectable
E) it is rarely associated with intestinal ischemia
FM-1.198.
An accentuated first heart sound is audible in which of the following conditions?
A) complete heart block
B) severe mitral regurgitation
C) mitral stenosis
D) acute myocarditis
E) pulmonary embolism

FM-1.199.
Characteristic physical symptoms of pneumothorax include:
A) percussion over the affected side reveals dullness
B) auscultation over the affected side reveals weaker respiratory sounds
C) end-respiratory crepitations are detected
D) the mediastinum is shifted towards the opposite side
E) there are decreased respiratory movements on the affected side

FM-1.200.
Adequate procedures in the treatment of asthmatic crisis include:
A) the inhalation of 40% oxygen if the PaCO$_2$ is elevated
B) sedation with pethidine (Dolargan) if the patient is agitated
C) the intravenous administration of hydrocortisone
D) salbutamol inhalation
E) water deprivation for the prevention of cardiac insufficiency

FM-1.201.
Findings and parameters which help to differentiate chronic bronchitis from emphysema are:
A) prolonged expiration and rales
B) the PaCO$_2$
C) the diffusion capacity
D) the PaO$_2$
E) eosinophilia

Predisposing factors to thromboembolic disorders are:
A) carcinoma of the pancreas
B) a type O blood group
C) oral contraceptives
D) obesity
E) myocardial infarction

FM-1.203.
Characteristic features of porphyria cutanea tarda include:
A) an inherited predisposition
B) a marked photosensitivity
C) an enhanced response to barbiturates
D) a chloroquine (Delagl) intake is followed by an exacerbation of the symptoms
E) exclusively, the excretion of uroporphyrines is markedly elevated in the urine

FM-1.204.
Drugs which may induce jaundice include:
A) phenelzine
B) rifampicin
C) penicillin allergic reactions
D) chlordiazepoxide (Elenium)
E) novobiocin

FM-1.205.
Which of the following states predispose an affected person to colon carcinoma?
A) ulcerative colitis
B) chronic giardiasis
C) familial intestinal polyposis
D) Crohn's disease
E) Hirschsprung's disease

FM-1.206.
Symptoms of acute diverticulitis include:
A) alternating constipation and diarrhea
B) severe rectal hemorrhage
C) vitamin B₁₂ deficiency anemia
D) subacute intestinal obstruction
E) melena

FM-1.207.
Which of the following statements about Echinococcus cyst (hydatid cyst) are correct?
A) it usually occurs in the right lobe of the liver
B) cerebral involvement is possible
C) typically, multiple cysts are present in the liver
D) adequate therapy involves percutaneous aspiration of the cyst
E) formation of cysts in the long bones is an indication for amputation

FM-1.208.
Arnold-Chiari malformation:
A) causes hydrocephalus
B) is frequently associated with syringomyelia
C) is associated with lumbosacral spina bifida
D) is associated with congenital anomalies of the heart
E) causes urinary bladder dysfunction

FM-1.209.
Possible causes of dysphasia include:
A) a left temporal lobe abscess
B) Alzheimer's disease
C) Parkinsonian syndromes
D) motor neuron disease
E) an intracranial tumor

Possible causes of a decreased glucose level and an elevated protein level in the cerebrospinal fluid include:
A) tuberculosis
B) Cryptococcus-meningitis
C) meningitis carcinomatosa
D) sarcoid meningitis
E) Coxsackie-meningitis
FM-1.211.
Which of the following findings would suggest subarachnoid hemorrhage rather than an artificially sanguineous cerebrospinal fluid?
A) an elevated cerebrospinal fluid pressure
B) the fluid clears up during puncture
C) the obtained fluid does not clot
D) shrunken red blood cells observed under microscope
E) an elevated lactate dehydrogenase activity of the sample

FM-1.212.
Analgesic nephropathy:
A) alterations seen in intravenous pyelography are characteristic for the condition
B) shows progression even after the discontinuation of the etiologic drugs
C) is clinically similar to chronic pyelonephritis
D) causes anuria
E) is caused by long term codeine therapy

FM-1.213.
Monoclonal gammopathy is a recognized feature of:
A) systemic lupus erythematosus
B) sarcoidosis
C) myeloma
D) macroglobulinemia
E) benign paraproteinemia

FM-1.214.
Urinary calcium loss is increased in:
A) osteoporosis
B) osteomalacia
C) primary hyperparathyroidism
D) secondary hyperparathyroidism
E) sarcoidosis

FM-1.215.
Hypocomplementemia is a recognized complication of:
A) acute rheumatic fever
B) paroxysmal nocturnal hemoglobinuria
C) nephritis due to an infected ventriculatrial shunt
D) membranoproliferative glomerulonephritis
E) acute poststreptococcal glomerulonephritis

FM-1.216.
Recognized alterations in the ECG produced by hyperkalemia include:
A) prominent U waves
B) the lack of P waves
C) wide QRS complexes
D) ventricular tachycardia
E) a depression of the ST segment

FM-1.217.
Disadvantages of a preterm delivery include:
A) the increased frequency of an intracranial hemorrhage in the newborn
B) inadequate sweating leading to hyperthermia
C) an immature respiratory center
D) an insufficient vitamin B₁₂ level which causes anemia
E) an increased susceptibility to infections

FM-1.218.
Factors predisposing to the respiratory distress syndrome of newborns include:
A) antepartum hemorrhage
B) maternal alveolar proteinosis
C) cesarean section
D) maternal diabetes mellitus
E) that the mother received steroid therapy

FM-1.219.
Umbilical sepsis:
A) is usually caused by Staphylococcus aureus
B) is usually a severe condition
C) is associated with multiple hepatic abscesses
D) frequently penetrates into the abdominal cavity
E) requires systemic antibiotic therapy

FM-1.220
In acute bronchiolitis of the neonate:
A) the temperature is usually around 40°C
B) a bilateral obstructive emphysema develops
C) the chest x-ray is of diagnostic value
D) the mortality rate is approximately 50%
E) the spleen is palpable

FM-1.221.
Which of the following signs are found in the anemia caused by myelophthisis?
A) Howell-Jolly bodies in the peripheral blood smear
B) an increased number of nucleated red cells in the peripheral smear
C) a white blood cell count of 26 G/l
D) thrombocytosis
E) a bone marrow smear which is of diagnostic value

FM-1.222.
Homocystinuria:
A) is an inborn error of methionine metabolism
B) is clinically indistinguishable from Marfan's syndrome
C) typically causes hepatosplenomegaly
D) is characterized by an increased risk of venous thrombosis
E) is characterized by a positive nitroprusside screening test

FM-1.223.
Characteristics of delirium tremens include:
A) marked drowsiness
B) a gradual onset
C) visual hallucinations
D) bradycardia
E) illusions
**Case Study:**
A 3-year-old child loses his appetite and subsequently refuses food.
Possible causes include:
A) an early onset of schizophrenia
B) negative behavior
C) daydreaming
D) anorexia nervosa
E) the parents have spoiled the child

FM-1.225.
Characteristics of anorexia nervosa include:
A) a history of self-induced vomiting
B) lethargy and fatigue
C) hirsutism
D) menorrhagia
E) extreme emaciation

FM-1.226.
Erythema multiforme:
A) is frequently caused by a viral infection
B) may be caused by Mycoplasma pneumoniae
C) usually requires systemic steroid therapy
D) develops in patients with sarcoidosis
E) develops following steroid therapy

FM-1.227.
Skin lesions associated with syphilis are:
A) copper colored bullous lesions
B) unilateral hyperkeratosis of the sole
C) condyloma acuminatum
D) mucocutaneous lesions
E) moderately elevated circular ulcerations

FM-1.228.
Chlorpromazine:
A) inhibits the responsiveness of the reticular activating system
B) causes mydriasis
C) causes an elevation of body temperature
D) causes postural hypotension
E) causes galactorrhea

FM-1.229.
Indications for steroid therapy include:
A) atopic dermatitis
B) sarcoidosis
C) Cushing's syndrome
D) pemphigoid
E) hereditary spherocytosis

FM-1.230.
Diazoxide:
A) is a member of the thiazide diuretics family
B) is suitable for the treatment of insulin secreting tumors
C) is administered intravenously only
D) causes alopecia
E) is suitable for the long-term treatment of hypertension
FM-1.231. Rales revealed by auscultation are characteristic for:
A) the early phase of pneumonia
B) fibrotizing alveolitis
C) bronchiectasis
D) left ventricular failure
E) chronic bronchitis

FM-1.232. Papilledema occurs frequently in patients with:
A) Friedreich's ataxia
B) subarachnoid hemorrhage
C) acute meningitis
D) a cerebellar tumor
E) a tumor of the fourth ventricle

FM-1.233. Clinical symptoms of cretinism are:
A) obesity
B) goiter
C) spastic diplegia
D) deafness
E) mental deficiency

FM-1.234. Recognized causes of the lack of antidiuretic hormone include:
A) a suprasellar tumor
B) healed tuberculous meningitis
C) phenylbutazone therapy
D) dicoumarol
E) probenecid

FM-1.235. Which of the following conditions or drugs inhibit uric acid reabsorption?
A) low dose salicylate
B) hyperlactacidemia
C) phenylbutazone
D) dicoumarol
E) probenecid

FM-1.236. Recognized causes of a radiologically detected paraspinal calcification include:
A) fluorosis
B) rickets
C) hypoparathyroidism
D) familial hypophosphatemia
E) thyrotoxicosis

FM-1.237. Which of the following may cause pain in the heel?
A) ankylosing spondylitis
B) Köhler's disease
C) rheumatoid arthritis
D) prolonged diazepam therapy
E) gonococcal infection

FM-1.238.
Inflammatory arteritis is typically seen in the following conditions:
A) polyarteritis nodosa
B) aortic arch syndrome
C) rheumatic fever
D) Henoch-Schönlein purpura
E) endarteritis obliterans

FM-1.239.
Which of the following conditions show an X-linked inheritance pattern?
A) glucose-6-phosphate dehydrogenase deficiency
B) Hurler's syndrome
C) Duchenne's muscular dystrophy
D) Lesch-Nyhan syndrome
E) vitamin D resistant rickets

FM-1.240.
In measles:
A) a morbilliform erythema is observed
B) a suboccipital lymphadenopathy is continuously present
C) lymphopenia is a common complication
D) arthritis is a possible complication
E) frequent relapses are observed

FM-1.241.
Herpes simplex infection:
A) is commonly associated with carcinoma of the uterus
B) may cause Kaposi's varicelliform eruptions
C) may cause keratoconjunctivitis
D) may cause subacute sclerosing panencephalitis
E) may cause acute gingivostomatitis

Answer Key (FM-1)

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Select the single best response to each of the following questions!!

PBH-2.1.
Which of the following statements regarding perinatal mortality is true?

A) the fetal mortality rate plus the number of fatalities among live-born neonates within the first 6 days of life
B) the number of fatalities within the first 27 days of life
C) the number of abortions plus the fetal mortality rate (including the number of fatalities within the first 6 months of life)
D) mortality occurs within the first year of life

PBH-2.2.
The most frequently used indicator for the quality of life is:

A) the life expectancy rate at birth
B) the life expectancy rate without chronic disease and disability
C) the life expectancy rate at 60 years of age
D) the raw mortality rate

PBH-2.3.
The proportion of children aged 0-12 years in developing countries is:
A) approx. 10-12%
B) approx. 20%
C) approx. 20-25%
D) approx. 30%

PBH-2.4.
The term "communal diagnosis" means:
A) the consensual health diagnoses within a community
B) the determination, analysis, and evaluation of the communal and health profiles
C) the determination of the priorities of a diagnosis

PBH-2.5.
Reliable indicators of a quality-life include:
A) the amount of the gross domestic product
B) the unemployment rate
C) the raw mortality rate
D) crime statistics
E) leisure utilization statistics

PBH-2.6.
All of the following are integral elements of communal health movements, EXCEPT:
A) self-help groups
B) minority health-groups
C) health societies
D) the public health and medical officer service

PBH-2.7.
All of the following are important elements of the social case-review, EXCEPT:
A) the etiological social factors resulting in the development of the disease
B) the social effects of a disease
C) the clinical therapy
D) the social therapy

PBH-2.8.
The term "descriptive epidemiology" means:
A) the observation and description of phenomena prevailing in the population
B) the research and testing of associations and correlations
C) the application of experimental instruments for the description of phenomena
D) the establishment and testing of the zero-hypothesis

PBH-2.9.
Which of the following formulas is appropriate for the calculation of the age-specific mortality rate?
A) the number of new cases observed during the test period
   ---------------------------------------------------------- xK
the number of observed individual years during the test period

B) the number of events studied within the given age –group

the size of the affected population within the given age – group

C) the number of cases observed during the test period

the size of the population at the beginning of the test period

PBH-2.10.
The term "perinatal mortality" means:
A) the number of fatalities among live-born neonates during the first 6 days of life
B) the number of fatalities among live-born neonates during the first 27 days of life
C) the number of stillbirths plus the number of fatalities among live-born neonates during the first 6 days of life
D) the number of stillbirths

PBH-2.11.
According to 1990 data, which of the following causes resulted in the highest mortality rate per 10,000 inhabitants in Hungary?
A) mortality due to hypertension
B) mortality due to ischemic heart disease (IHD)
C) mortality due to cerebrovascular diseases
D) mortality due to myocardial infarction

PBH-2.12.
Which of the following is a WHO program for the monitoring of cardiovascular diseases?
A) TETRA-CP
B) MONICA
C) CINDI
D) Health City

PBH-2.13.
The leading diseases causing disability are:
A) psychiatric conditions
B) malignancies
C) musculoskeletal diseases
D) cardiovascular diseases

The coincidence of three risk factors increases the likelihood of developing ischemic heart disease (IHD):
A) eightfold
B) fourfold
C) thirteenfold
D) sevenfold

PBH-2.15.
All of the following are considered as deviant behavior, EXCEPT.
A) alcoholism
B) suicide
C) drug abuse
D) accidents

PBH-2.16.
Alcohol and drug abuse:
A) are equally prevalent in both sexes
B) are more prevalent among males
C) are more prevalent among females
D) have an age-dependent prevalence

PBH-2.17.
The time to seek needed medical help is determined by:
A) the personality of the given individual
B) the intensity of the signs and symptoms
C) the pain-sensitivity of the individual
D) all of the above
E) none of the above

PBH-2.18.
All of the following are characteristic features of drug dependence, 
EXCEPT:
A) anxiety and nervous behavior
B) excessive smoking
C) weight gain
D) poor personal hygiene

PBH-2.19.
Which of the following is used as health indicators of a population?
A) demographic parameters
B) somatometric parameters
C) epidemiologic parameters
D) all of the above
E) none of the above

PBH-2.20.
The principal cause of the population reduction in Hungary is:
A) a low live birth rate
B) the significant reduction of the live birth rate as compared to
   the European average
C) a stagnant mortality rate
D) the deterioration of raw mortality statistics

PBH-2.21.
A pyramid shaped age distribution tree is characteristic of countries with:
A) an increasing population
B) a decreasing population
C) a stagnant population

PBH-2.22.
Where is the World Health Organization's principle headquarters?
A) London
B) Geneva
C) New York
D) Vienna

PBH-2.23.
All of the following are important factors for studies on lifestyle,
EXCEPT.
A) smoking
B) alcohol consumption
C) eating habits
D) drug abuse
E) the social support system
F) physical activity
G) health beliefs

PBH-2.24.
The initiative "Health for all" means:
A) the achievement of a health level that ensures complete physical, mental, and social well being
B) the achievement of a health level that is based on the rights and responsibilities of the individual as well as the society
C) the achievement of a health level that ensures complete physical, mental, and economic well being
D) the provision of a health level that ensures a socially and financially productive life for every individual

PBH-2.25.
Which of the following is used for the classification and comparison of the various disease processes?
A) the international classification of diseases (ICD)
B) the international classification of death causes
C) the international classification of death causes, diseases, and symptoms

The term "lethality" means:
A) the intensity of a disease
B) the ratio of fatal cases among patients with the given disease
C) the mortality rate of a given disease
D) the morbidity conditions of a given disease

PBH-2.27.
The WHO Center for the European Region resides in:
A) Geneva
B) Paris
C) Copenhagen
D) Rome

PBH-2.28.
All of the following belong to the methods of health education, EXCEPT:
A) the health education of the individual
B) the health education of the community
C) printed health education materials
D) health education via the mass media

PBH-2.29.
Epidemiology can be regarded as the study of
A) the etiology of human diseases
B) the incidence and causes of human death
C) the distribution of human diseases and the incidence of their determining factors
D) the functional parameters of the health care delivery system
PBH-2.30.
Which of the following statements regarding the infant mortality rate is correct?
A) the numerator contains the number of neonates who died during the first month of life
B) this is the ratio of neonatal deaths during the first week of life per thousand live births
C) this is the ratio of infant deaths during the first year of life per thousand live births

PBH-2.31. According to 1990 data, which of the following is the closest approximation of the live birth rate in Hungary?
A) 19.5%
B) 17.2%
C) 12%
D) 9.7%

PBH-2.32. According to 1990 data, which of the following is the closest approximation of the raw mortality rate in Hungary?
A) 19.2%
B) 18.7%
C) 16.5%
D) 14.1%

PBH-2.33. According to 1990 data, the life expectancy of males born in Hungary is:
A) 66.1 years
B) 65.1 years
C) 62.2 years
D) 63.1 years

PBH-2.34. Compared to developed countries, Hungary's ranking in the raw mortality rate is:
A) in the middle third of the list
B) in the upper third of the list
C) in the lower third of the list
D) the country with the highest raw mortality rate

PBH-2.35. Which of the following parameters regarding the male gender is similar or worse than corresponding data from three decades back?
A) the raw mortality rate
B) the life expectancy at birth
C) the standardized mortality rate
D) the life expectancy after 40 - 50 years of age

PBH-2.36. All of the following belong to the new methods of population science used for setting priorities and making decisions, EXCEPT:
A) the magnitude of the potential loss of live years
B) the standardized age and gender specific mortality
C) the life expectancy without disability
D) the number of live years afflicted by disability and chronic disease
PBH-2.37.
All of the following are the most frequent causes of death in Hungary, EXCEPT:
A) cardiovascular diseases
B) death due to trauma
C) congenital malformations
D) malignancies

PBH-2.38.
According to the results of the "KOMOV Study", all of the following belong to the 3 most frequent ICD main groups in Hungary, EXCEPT:
A) skin and connective tissue diseases
B) upper respiratory tract and respiratory system diseases
C) cardiovascular diseases
D) gastrointestinal diseases

PBH-2.39.
According to the results of the "KOMOV Study", what is the approximate percentage of the population in need of continuous follow-up care?
A) 15%
B) 25%
C) 40%
D) 60%

PBH-2.40.
What is the percentage of males living into their sixth decade of life as economically active citizens in Hungary?
A) 35%
B) 45%
C) 57%
D) 62%

PBH-2.41.
Compared to the percentage of smokers in the population in seventeen other European countries, Hungary:
A) is ranked in the lower third of the field
B) is ranked in the middle third of the field
C) is ranked among the leading countries
D) has the least favourable statistics

PBH-2.42.
All of the following are features of health beliefs, EXCEPT:
A) the public opinion regarding the determining factors about the status of health
B) the individual's opinion about the problems associated with his/her disease
C) the individual's attitude toward the health care delivery system
D) the individual's opinion regarding the use of preventive and early health care interventions

PBH-2.43. All of the following blood pressure readings indicate the presence of hypertension, EXCEPT:
A) 160/95 mmHg
B) 145/89 mmHg
C) 170/90 mmHg
D) 200/97 mmHg

PBH-2.44.
The proportion of essential (primary) hypertension among all hypertension cases is as high as:
A) 25-30%
B) 40-45%
C) 60-65%
D) 90-95%

PBH-2.45.
All of the following are valid statements regarding the significance of hypertension, EXCEPT:
A) it is the most prevalent disease in the main group of cardiovascular disorders
B) absenteeism from work associated with cardiovascular disorders is mainly due to hypertension
C) it is a prevalent cause of death in the mortality statistics
D) hypertension is extremely demanding on nursing and health care facilities

PBH-2.46.
All of the following are parts of the proper technique for taking accurate blood pressure readings, EXCEPT:
A) the blood pressure should be measured in the sitting position and the patient should not have smoked or consumed coffee in the preceding hour
B) the actual blood pressure is determined by averaging 3 pressure readings
C) the actual blood pressure is determined by averaging 2 pressure readings
D) the width of the cuff used should match the circumference of the upper arm

PBH-2.47.
Which of the following statements is FALSE?
A) the prevalence of hypertension in the Hungarian population aged 18-64 years is approximately 20%
B) the prevalence of hypertension is higher in the rural population than in the urban population
C) the prevalence of hypertension is higher in males than in females
D) the incidence of hypertension increases with advancing age

PBH-2.48.
All of the following are risk factors for hypertension, EXCEPT:
A) a high bodyweight
B) a hereditary disposition
C) an excessive intake of sodium
D) the regular use of alcohol
E) smoking

PBH-2.49.
All of the following statements regarding stroke are valid, EXCEPT:
A) stroke is more prevalent in males
B) the stroke related mortality rate is less in females than in males
C) the incidence of stroke increases with an increasing blood pressure
D) the incidence of stroke increases significantly with advancing age

PBH-2.50.
The estimated prevalence of diabetes mellitus in Hungary is:
A) 1-1.4%
B) 2-2.5%
C) 4-6%
D) 6-8%

PBH-2.51
All of the following factors influence the impact of diabetes mellitus on public health, EXCEPT:
A) insulin dependent (type I) diabetes mellitus decreases the average life expectancy by 15%
B) the prevalence of disability is 2-3 times higher than in the normal population
C) the prevalence of blindness is 10 times higher than in the total population
D) the prevalence of limb amputations is 20-30 times higher than in the normal population

PBH-2.52.
All of the following are valid statements regarding diabetes mellitus, EXCEPT:
A) the prevalence of diabetes depends on the diagnostic criteria which are applied
B) the prevalence of diabetes increases with advancing age
C) the prevalence of diabetes is higher in males
D) adult onset diabetes is called type II, non-insulin dependent diabetes

PBH-2.53.
All of the following questions should be answered when establishing a community diagnosis, EXCEPT:
A) What is the health status of the community like?
B) How do the latest advances of medical science influence the health status of the community?
C) How do the individual, the community and particularly the health care delivery system improve the health status?
D) Which methods are appropriate for monitoring the results of the measures taken?

PBH-2.54.
Establishing the community diagnosis includes all of the following steps, EXCEPT:
A) the health diagnosis
B) the environmental factors
C) an analysis of the quality of life
D) a study of the factors influencing behavior
E) the profile of the culture
F) the administrative and organizational issues

PBH-2.55.
Essential components defining the term "risk factor" include all of the following, EXCEPT:
A) the presence of factors and influences that increases the likeli
hood of the development of the disease
B) a causal relationship exists between the presence of risk factors and the development of the disease
C) the relationship between the disease and the relevant risk factors is often not absolute, instead it implies statistical correlation
D) the correlation between the presence of multiple risk factors and the likelihood of the development of the disease is not linear

PBH-2.56
The most frequent health risk factors include:
A) smoking
B) alcohol abuse
C) malnutrition or obesity
D) drug abuse

PBH-2.57.
Risk factors for the development of a myocardial infarction include all of the following, EXCEPT:
A) an excess bodyweight
B) an elevated cholesterol level
C) a lack of exercise
D) alcohol abuse
E) an A-type personality
F) smoking

PBH-2.58.
Which of the following is the principal cause of a demographic boom?
A) an increase of the raw birth rate
B) a reduction of the raw birth rate
C) an increase of the raw mortality rate
D) a reduction of the raw mortality rate

PBH-2.59.
The term "incidence" is defined as:
A) the number of new cases occurring over a specified time-period
B) the total number of cases over a specified time-period
C) the contingence of the occurrence of diseases
D) the number of chronic cases over a specified time-period

PBH-2.60.
In Hungary, the average life expectancy at birth is:
A) decreasing
B) increasing
C) stagnant
D) fluctuating

PBH-2.61.
The prevalence of tuberculosis is:
A) increasing significantly
B) increasing slightly
C) stagnant
D) decreasing significantly

PBH-2.62.
In Hungary, the most prevalent sexually transmitted disease is:
A) AIDS
B) gonorrhea
C) chancroid
D) syphilis

PBH-2.63.
In Hungary, during the period from 1970 to 1988, the mortality rate due to chronic liver disease and cirrhosis:
A) had not changed significantly
B) had decreased by 50%
C) had decreased by more than 50%
D) had doubled
E) had increased more than five-fold

PBH-2.64.
Anal-oral transmission is characteristic of:
A) hepatitis B
B) hepatitis C
C) hepatitis D
D) hepatitis E

PBH-2.65.
Primary hepatocellular carcinoma may develop in:
A) hepatitis E
B) hepatitis D
C) hepatitis C
D) hepatitis B

PBH-2.66.
The application of gamma-globulin (immunoglobulin) currently manufactured in Hungary is effective for post-exposure protection in:
A) a hepatitis A infection
B) a hepatitis B infection
C) a hepatitis C infection
D) a hepatitis D infection
E) none of the above

PBH-2.67.
In Hungary, the mortality rate due to malignant disease is:
A) 31%
B) 40%
C) 15%
D) 5%

PBH-2.68.
In Hungary, the mortality rate resulting from malignant disease is highest in tumors of the:
A) stomach
B) large intestine
C) rectum
D) lung

PBH-2.69.
Which of the following malignancies is characterized by a decreasing mortality rate and an increasing rate of incidence?
A) neoplasms of the stomach
B) neoplasms of the cervix
C) both of the above
D) none of the above

PBH-2.70.
For which of the following malignancies is there an operative screening program in Hungary?
A) neoplasms of the stomach
B) neoplasms of the cervix
C) both of the above
D) none of the above

PBH-2.71.
Which of the following malignancies is characterized by both a decreasing incidence rate and a decreasing mortality rate?
A) neoplasms of the stomach
B) neoplasms of the cervix
C) both of the above
D) none of the above

PBH-2.72.
Valid statements regarding cohort studies include:
A) these are usually longitudinal studies
B) these are descriptive studies
C) these are analytic studies

PBH-2.73
Estimates of the growth rate of the world population are made on the presumption that the size of the population doubles every:
A) 15 years
B) 35 years
C) 70 years
D) 105 years
E) 140 years

PBH-2.74.
To which of the following organizations should new malignant cases be reported for an initial diagnostic work-up?
A) to a regional oncology care center
B) to the National Ministry of Health
C) to a national and regional oncology center
D) to the Census Bureau
E) to all of the above

PBH-2.75.
How does the incidence of cervical cancer rank among all female malignancies?
A) first place
B) second place
C) third place
D) fourth place
E) fifth place

PBH-2.76.
Which of the following factors has the greatest significance in the transmission of nosocomial infections?
PBH-2.77. Which of the following nosocomial infections is the most common in Hungary?
A) pneumonia
B) surgical wound infections
C) septic conditions
D) urinary tract infections

PBH-2.78. Which of the following microorganisms is the most common pathogen of nosocomial infections?
A) Staphylococcus aureus
B) Streptococcus faecalis
C) Klebsiella sp.
D) E. coli

PBH-2.79. Which of the following hospital departments is afflicted by the highest relative incidence of nosocomial infections?
A) hospital nurseries
B) intensive care units
C) departments of surgery
D) departments of urology

PBH-2.80. What is the approximate proportion of infectious hepatitis cases among the occupational nosocomial infections?
A) 20%
B) 40%
C) 60%
D) 80%

PBH-2.81. Which of the following extrinsic factors is considered the most significant factor of carcinogenesis in Hungary?
A) nutrition
B) smoking
C) occupational diseases
D) environmental pollution

PBH-2.82. What is the mortality rate of rabies?
A) 20-40%
B) 50-60%
C) 70-80%
D) 100%

PBH-2.83. Which of the following diets would you recommend to an asymptomatic male with moderate hypercholesterolemia?
A) stuffed eggs, and mixed salads
B) fried fish, steamed rice, and tomato salads
C) noodles with cottage cheese, cutlets, and apples
D) pork fried in breadcrumbs and mashed potatoes
E) gyros, arnaki, and kokoretsi

PBH-2.84.
Which of the following has had a substantial increase of morbidity over the last 20 years in Hungary?
A) acute myocardial infaction
B) cerebrovascular accidents
C) breast carcinoma
D) chronic liver disease
E) prostatic carcinoma

PBH-2.85.
Which of the following is the most common occupational disease requiring mandatory reporting and indemnification?
A) silicosis
B) hearing loss
C) defects resulting from excessive vibration
D) insecticide poisoning

PBH-2.86.
What is the mortality rate of tetanus in Hungary?
A) 10-20%
B) 30-40%
C) 40-50%
D) 60-70%

PBH-2.87
The term "emission" means:
A) the concentration of pollutants in the air just above the ground
B) the emanation of air pollutants per unit of time
C) the dilution of pollutants present in the air
D) the annual average pollutant-concentration per individual

PBH-2.88.
Which of the following malignancies is the leading cause of death in Hungarian males?
A) gastric cancer
B) lung cancer
C) prostate cancer
D) colon cancer

PBH-2.89.
Which of the following malignancies is the leading cause of death in Hungarian females?
A) breast cancer
B) gastric cancer
C) colon cancer
D) cervical and uterine neoplasms

PBH-2.90.
Which of the following neoplasms is characterized by the highest detection rate by screening?
A) breast cancer
B) lung cancer
C) cervical cancer
D) colon cancer

PBH-2.91.

Case Study:
Several patients present at your office simultaneously, with symptoms occurring 2-3 hours after a meal. Their complaints include malaise, nausea and vomiting although they have no fever. Which of the following food-poisonings is the likely cause of this condition?
A) botulism
B) salmonellosis
C) staphylococcal food poisoning (caused by S. aureus)
D) Clostridium perfringens food poisoning

PBH-2.92.

Which of the following may cause cancer of the urinary bladder?
A) cadmium
B) mercury
C) aniline dyes
D) lead

PBH-2.93.

What is the optimal percentage of protein-calories in the total energy content of a balanced diet?
A) 6-10%
B) 10-12%
C) 12-18%
D) 25-30%

PBH-2.94.

The purpose of the medical booklet issued to workers employed in the food processing and public catering industry is to:
A) educate employees on the prevention of food poisoning
B) provide a means for registering their experience gained during hygienic surveys
C) to demonstrate the mandatory food-hygienic regulations to the people employed in food processing or catering
D) to keep record of the results of the medical tests mandatory in this profession

PBH-2.95.

Which of the following laboratory tests is valuable in establishing a diagnosis of echinococcosis?
A) a complete blood count
B) stool tests
C) serologic tests
D) testing of the cerebrospinal fluid

PBH-2.96.

In which of the following types of food poisonings should a blood sample be sent to the laboratory for examination?
A) staphylococcal food poisoning
B) botulism
C) campylobacteriosis
D) salmonellosis
PBH-2.97.
What is the maximum nitrate concentration of drinking water appropriate for consumption by infants?
A) 40 ug/l
B) 80 ug/l
C) 40 mg/l
D) 80 mg/l

PBH-2.98.
What is the maximum average noise level allowed for working in a continuous high-level noisy industrial environment?
A) 75 dB
B) 85 dB
C) 90 dB
D) 95 dB

PBH-2.99.
Workers are required to wear individual ear protectors at noise levels exceeding:
A) 60 dB
B) 75 dB
C) 85 dB
D) 95 dB

PBH-2.100.
Initial hearing-loss resulting from exposure to noise is detectable at a frequency of:
A) 1000 Hz
B) 2000 Hz
C) 3000 Hz
D) 4000 Hz

PBH-2.101.
The pathomechanism of respiratory conditions caused by vegetable dust include(s):
A) the allergenic properties of the dust
B) the inflammatory effects of fungi and bacteria
C) both of the above
D) none of the above

PBH-2.102.
Contraindications to post-exposure active immunization for rabies include(s):
A) pregnancy
B) rheumatoid arthritis
C) active tuberculosis
D) all of the above
E) none of the above

PBH-2.103.
The recent fecal contamination of drinking water is suggested by a high concentration of:
A) chloride
B) nitrate
C) sulphate
PBH-2.104.
Hemangiosarcoma may develop as a result of prolonged exposure to:
A) asbestos
B) polyvinylchloride (PVC)
C) beryllium
D) chlorinated hydrocarbons

PBH-2.105.
Which of the following statements is valid?
A) behavior involves deliberate actions determined by the will and character of the individual
B) behavior is a learned and acquired pattern of actions that is not incompatible with the mastering of a contrary or alternative behavior
C) instead of applying a step-by-step approach, behavior modification is based on the "all or nothing" principle

PBH-2.106.
The term "compliance" means:
A) the totality of factors influencing health and behavior
B) the atmosphere determining the doctor-patient relationship.
C) the willingness of the patient to cooperate with the health delivery system in health development and disease prevention as well as to facilitate the healing process

PBH-2.107.
Appropriate measures mandatory for the detection of cholera cases include:
A) in cholera, both the occurrence of the infection and the recovery of the patient should be reported to the public health authorities
B) the detection of the infection should be reported by telegram and telephone to the regional center of the National Public Health and Medical Officer Service
C) the detection of the infection should be reported by telegram and telephone to the National Institute of Public Health
D) all the above should be effected

PBH-2.108.
The hepatitis A virus can be isolated from the stool of an infected individual:
A) immediately after the onset of jaundice
B) a week before the onset of jaundice
C) only during the period of jaundice
D) 2-3 weeks before the onset of jaundice

PBH-2.109.
A child with polio should be isolated:
A) at home
B) in the hospital (in the department of infectious diseases)
C) no isolation is necessary

PBH-2.110.
Coxsackie and Echovirus infections should be reported if:
A) herpangina develops
B) epidemic pleurodynia develops
C) epidemic encephalitis develops
D) tonsillitis develops

PBH-2.111.
Which of the following measures is appropriate in giardiasis?
A) all such cases should be reported
B) the patient should be isolated
C) laboratory tests are possible, although not mandatory
D) laboratory testing is mandatory

PBH-2.112.
In amebiasis:
A) only the patient's subsequent recovery should be reported
B) such cases of infection should be reported
C) continuous therapy is the only necessary measure
D) the necessary precautions are the same as for dysentery

PBH-2.113.
Which of the following diagnostic methods is used for establishing the diagnosis of a brucellosis infection?
A) the detection of the virus
B) Wright's reaction
C) Ascoli's thermoprecipitation
D) Geck's India ink stain

PBH-2.114.
Which of the following microorganisms is the vector for the plague?
A) Necator americanus
B) Xenopsylla cheopis
C) Sallitor macarencus
D) Shylla nomatius

PBH-2.115.
Which of the following diagnostic methods is used for establishing the diagnosis of a glanders infection?
A) Strauss' reaction
B) hemagglutination inhibition test
C) hemadsorption inhibition test
D) Nidal's reaction

PBH-2.116.
The length of the incubation period of anthrax is:
A) several hours
B) 2 weeks
C) 3-4 days
D) 21 days

PBH-2.117.
Which of the following diagnostic methods is used for establishing the diagnosis of a leptospirosis infection?
A) an immobilization test
B) a thick smear
C) an agglutination test
D) agglutination-lysis
PBH-2.118. Single Choice Question
The pathogen of Q fever is:
A) Coxiella burnet
B) Chlamydia sp.
C) Miyagawanella sp.
D) viruses

PBH-2.119.
The characteristic features of ornithosis include:
A) a continuous fever
B) an 80% mortality rate
C) in all such cases the regional veterinarian authorities should be notified
D) this infection does not belong to the group of anthropozoonoses

PBH-2.120.
A high concentration of detergents is characteristic of:
A) industrial sewage
B) agricultural sewage
C) domestic sewage
D) sewage of health-care institutions

PBH-2.121.
Leukemia may develop insidiously with prolonged exposure to:
A) methylbromide
B) benzene
C) trichlorethylene
D) carbon tetrachloride

PBH-2.122.
Paraquat (Gramoxon) belongs to the family of:
A) phenoxyalkanes
B) dinitro derivatives
C) dipyridilium herbicides
D) dithiocarbamate herbicides

PBH-2.123.
Organic phosphate esters:
A) inhibit the activity of phosphophosphorylase
B) inhibit the activity of acetylcholinesterase
C) inhibit the activity of malate dehydrogenase
D) stimulate the activity of pseudocholinesterase

PBH-2.124.
All of the following tests are used in the diagnosis of syphilis, EXCEPT:
A) Portnoy's flocculation test
B) VDRL test
C) Kolmer's test
D) Wassermann test
E) TIT test

PBH-2.125.
All of the following are syphilitic antibodies, EXCEPT:
A) cardiolipin
B) Reiter's protein
C) immobilizin
D) AFP

PBH-2.126.
Valid statements regarding the incidence and mortality rate of iatrogenic infections in Hungary include:
A) their incidence is the same as the European average; a mortality rate of 10%
B) their incidence is the same as the European average; a mortality rate of 1.1-2%
C) their incidence is lower than the European average; a mortality rate of 3%
D) their incidence is higher than the European average; a mortality rate of 1.2%

PBH-2.127.
The mechanism of the development of resistance to antibiotics includes the transmission of the resistance factor by:
A) bacteriophages
B) viruses
C) plasmids
D) lysogenic conversion

PBH-2.128.
The occurrence of iatrogenic infections:
A) does not need to be reported
B) is only useful as a statistical parameter
C) should be reported in the same manner as the patient's recovery

PBH-2.129.
According to 1979 statistics, what was the percentage of iatrogenic staphylococcosis?
A) 39%
B) 29%
C) 50%
D) 10%

PBH-2.130.
Streptococcus pyogenes is the pathogen of:
A) a puerperal infection
B) diarrhea outbreaks in hospitals
C) pemphigus
D) Lyell's syndrome (toxic epidermal necrolysis)

PBH-2.131.
Typhoid carriers should be followed-up for more than a year:
A) if the carrier state persists longer than a year since the onset of the infection
B) if the results of stool cultures performed to exclude a carrier state were positive
C) if new cases have been detected in the carrier's environment
D) and also be classified as chronic enteric carriers of the pathogen

PBH-2.132.
Starting from the date of the last positive stool culture, a typhoid carrier is obliged to present for laboratory tests:
PBH-2.133.
Isolation of a patient with typhoid fever is necessary until:
A) the signs of clinical recovery are detected
B) three consecutive stool cultures yield negative results
C) the bacteriologic studies repeated at four-day intervals yield negative results
D) three consecutive stool cultures yield negative results following complete clinical recovery

PBH-2.134.
After the presumed eradication of the causative enteric pathogen:
A) stool cultures should be repeated monthly following the date of the last positive culture
B) urine cultures should be repeated monthly following the date of the last positive culture
C) stool and urine cultures should be repeated monthly following the date of the last positive culture
D) patients are classified as chronic enteric carriers after stool cultures have been positive for 4 consecutive weeks

PBH-2.135.
Chronic enteric carriers are obliged to present for laboratory testing:
A) biannually for a year
B) biweekly for a year
C) monthly for a year
D) monthly for two years

PBH-2.136.
The mortality rate of yellow fever is:
A) 10%
B) 50%
C) 60%
D) 90%

PBH-2.137.
The reservoir of yellow fever is/are:
A) infected monkeys and humans
B) mosquitoes
C) tsetse fly
D) rat

PBH-2.138.
Immunization against tick-borne encephalitis consists of:
A) 5 vaccinations by administering 1 ml vaccine on each occasion
B) 4 vaccinations by administering 2 ml vaccine on each occasion
C) 4 vaccinations by administering 1 ml vaccine on each occasion
D) revaccination is performed by administering a double dose

PBH-2.139.
Measures important for the prevention of toxoplasmosis include:
A) the hygenic control of domestic dogs
B) avoiding the ingestion of undercooked meat
C) avoiding the ingestion of game meat
D) supplementing the diet of pregnant women with meat

PBH-2.140.
The presence of proglottides in the gastrointestinal tract is a characteristic feature of:
A) echinococcosis (hydatid disease)
B) taeniasis (beef tapeworm infection)
C) hymenolepidosis (dwarf tapeworm infection)
D) toxoplasmosis

PBH-2.141.
The characteristic transmission mechanism of Enterobius vermicularis is by:
A) reinfection via the oral-fecal route
B) the contaminated hands of the infested individual
C) dust contaminated by ova
D) sexual transmission

PBH-2.142.
Which of the following statements regarding trichuriasis is valid?
A) the causative worm is a cestode
B) the causative worm is a nematode
C) infestation by this worm is called ascariasis
D) this helminthiasis is referred to as a tapeworm infestation

PBH-2.143.
Which of the following statements regarding ascariasis is valid?
A) the causative worm is a cestode
B) the occurrence of this infestation should be reported
C) infestation by this worm is referred to as a dwarf tapeworm infection
D) infestation by this worm is called ascariasis

PBH-2.144.
Which of the following statements regarding hymenolepidosis is valid?
A) infestation by this worm is also called a threadworm infection
B) the causative worm is a nematode
C) laboratory testing is mandatory
D) infestation by this worm is also called a dwarf tapeworm infection

PBH-2.145.
Which of the following statements regarding salmonellosis is valid?
A) the isolation of infected patients is unnecessary
B) laboratory testing is mandatory
C) the occurrence of these infections should be reported
D) continuous and conclusive disinfection is necessary

PBH-2.146.
Characteristic features of infections caused by Clostridium perfringens include that:
A) the pathogen is an anaerobic bacterium
B) the length of the incubation period is 2-3 days
C) the mortality rate is virtually nil in this infection
D) clostridia enter the organism via the oral route
PBH-2.147.
All of the following are characteristic features of Clostridium botulinum, EXCEPT:
A) this bacterium is a 1x4 um rod
B) it forms spores
C) this is a Gram-negative bacterium
D) it contains O and (type-specific) H antigens

PBH-2.148.
Characteristic features of botulism include that:
A) the mortality rate of the disease is 80%
B) the length of the incubation period is 3-4 days
C) the mortality rate of the disease is 30-50%
D) the patient must be isolated

PBH-2.149.
In infectious mononucleosis, preventive measures include that:
A) the patient should be isolated
B) laboratory testing is mandatory
C) reporting is not required
D) continuous disinfection is necessary

PBH-2.150.
In enteric fever caused by S. paratyphi, the length of the incubation period is:
A) 1 - 4 days
B) 3-14 days
C) 14 -21 days
D) 21-30 days

PBH-2.151.
One of the administrative steps required in enteric fever caused by S. paratyphi is:
A) reporting the occurrence of infection
B) reporting the recovery of the patient
C) reporting both the occurrence of the infection and the recovery of the patient
D) reporting both the occurrence of the infection and the recovery of the patient; the regional infectious disease control board should be notified by telephone

PBH-2.152.
Which of the following statements regarding the viability of Shigella species is valid?
A) in stool, these microorganisms remain viable for several weeks
B) in water and ice, these microorganisms remain viable for 1-2 days
C) encrusted on textiles contaminated by feces, these microorganisms remain viable for a period longer than 100 days
D) these pathogens are extremely resistant to antiseptic solutions

PBH-2.153.
Proper administrative measures necessary in dysentery include:
A) reporting both the occurrence of the infection and the recovery of the patient
B) only the reporting of the occurrence of the infection is important
C) that the isolation of the patient is unnecessary
D) laboratory testing is necessary, however not mandatory

PBH-2.154.
All of the following statements are valid regarding dysenteriform enterocolitis (colonic dyspepsia), EXCEPT:
A) laboratory testing is mandatory
B) reporting is mandatory
C) laboratory testing is recommended, however not mandatory
D) continuous and conclusive disinfection is necessary

PBH-2.155.
All of the following are characteristic epidemiologic features of yersiniosis, EXCEPT:
A) the length of the incubation period is 10 days
B) Yersinia enterocolitica is an animal pathogen
C) the sources of infection include infected humans and animal carriers of the pathogen
D) according to experience gained so far, the index of infectivity is low

PBH-2.156.
A most significant late complication of exposure to chromium compounds is:
A) conjunctivitis
B) rhinitis
C) bronchial carcinoma
D) peptic ulcer

PBH-2.157.
The diagnosis “Shinsu-myocardosis” means poisoning by:
A) hydrogen cyanide
B) carbon monoxide (chronic exposure)
C) arsenic
D) nickel

PBH-2.158.
A characteristic feature of typhoid fever is:
A) an isolated elevation of the H antigen titers
B) an elevation of the O antigen titers and a reduction of the H antigen titers
C) a reduction of the O antigen titers
D) the simultaneous elevation of both O and H antigen titers

PBH-2.159.
The mortality rate of typhoid fever is:
A) 10% if treated
B) 50% if left untreated
C) 1% if treated
D) 10% if left untreated

PBH-2.160.
Which of the following statements regarding typhoid fever is valid?
A) the causative pathogen can be cultured from the blood throughout the entire disease period
B) the causative pathogen can be cultured from the urine in the initial third of the disease period
C) the causative pathogen can be cultured from the stool in the last third of the disease period
D) serum hemagglutinins are present from the second week of the disease period

PBH-2.161.
In typhoid fever:
A) only continuous disinfection is necessary
B) only conclusive disinfection is necessary
C) both of the above
D) none of the above

PBH-2.162.
Widal's test for typhoid fever:
A) is an agglutination reaction that can be performed on a slide
B) is an agglutination reaction that can be performed in a test tube
C) is a thermoprecipitation reaction
D) is an aspecific agglutination reaction

PBH-2.163.
The positivity of the Gruber-Widal reaction for typhoid fever:
A) is of diagnostic value when the antigen titers are 1:200 or greater
B) is of diagnostic value when the antigen titers are 1:50 or greater
C) is reliable in the range of 1:100 to 1:3200
D) is the sole important feature as the antibody titers are irrelevant

PBH-2.164.
Control tests to screen for typhoid fever (Salmonella typhosa) carriers should consist of:
A) hemocultures performed biweekly
B) biweekly stool and urine cultures performed for a year
C) biweekly stool and urine cultures performed for 6 months
D) monthly stool and urine cultures performed for 6 months

PBH-2.165.
A chronic carrier of typhoid fever (salmonella typhosa) may be declared non-infectioe if:
A) the blood tests are negative
B) the urinalysis and the analysis of the duodenal contents are negative
C) the stool cultures, the urinalysis and the analysis of duodenal contents are all negative
D) the stool cultures and the analysis of the duodenal contents are negative

PBH-2.166.
Chronic carriers of typhoid fever (Salmonella typhosa) who have been declared non-infectioe should:
A) not be checked any longer
B) be checked monthly for another 6 months
C) be checked bimonthly for another 6 months
D) be checked monthly for another year

PBH-2.167.
Any persons who have had contact with patients infected with typhoid fever should be:
A) quarantined  
B) put under observation  
C) checked for infection  
D) put under partial quarantine

PBH-2.168. 
Any persons who have had contact with patients having typhoid fever should have:  
A) stool and urine cultures taken, which should be repeated at 3-day intervals  
B) stool and urine cultures taken, which should be repeated at 3-day intervals and which should yield negative results on at least 3 occasions  
C) stool and urine cultures taken, which should be repeated repeated at 3-day intervals and which should yield negative results on at least 2 occasions  
D) all these tests taken and which should be performed during the first week of observation

PBH-2.169. 
Typhoid fever (Salmonella typhosa) carriers:  
A) may be declared non-infective if the follow-up tests have yielded negative results for 3 months  
B) may be started on conclusive tests for the assessment of infectivity, if the follow-up tests have yielded negative results for 6 months  
C) may be started on conclusive tests for the assessment of infectivity, if the follow-up tests have yielded negative results for 10 months  
D) should be immunized

PBH-2.170. 
The tests for the conclusive assessment of the infectivity of typhoid carriers include:  
A) stool and urine cultures performed on consecutive weeks  
B) stool and urine cultures performed on 8 consecutive weeks  
C) stool and urine cultures performed on 10 consecutive weeks  
D) stool and urine cultures as well as the analysis of the duodenal contents performed on 10 consecutive weeks

PBH-2.171. 
The complement system is a component of  
A) the immune system  
B) the reticuloendothelial system  
C) the aspecific host defence system  
D) none of the above

PBH-2.172. 
Lymphokines are produced by:  
A) B lymphocytes  
B) T lymphocytes  
C) macrophages  
D) plasma cells

PBH-2.173. 
The phage receptors are:  
A) macrophage receptors  
B) bacteriophage receptors
C) Bdellovibrio receptors
D) plasmid receptors

PBH-2.174.
Which of the following is a cross-reaction (heterophilic agglutination)?
A) Sabin-Feldmann's reaction
B) Weil-Felix reaction
C) Stein-Leventhal reaction
D) Widal's test

PBH-2.175.
Chronic carriers of typhoid fever:
A) still shed pathogens 4 weeks after recovery but for a period shorter than a year
B) still shed pathogens 1 year after recovery
C) shed pathogens during the period of recovery
D) still shed pathogens 4 weeks after recovery but stool cultures turn negative thereafter

PBH-2.176.
Aeroplanktones are adsorbed to:
A) fluid particles only
B) solid particles only
C) both of the above
D) none of the above

PBH-2.177.
The index of contagiousness:
A) is the same as the infectivity index
B) represents the prevalence of cases among 100 individuals exposed to the infective agent
C) represents the number of cases among 100 persons who have contacted an infected patient
D) is the same as the Pearl index

PBH-2.178.
Vaccines to be administered according to a continuous immunization schedule include:
A) age-specific, mandatory immunizations
B) seasonal immunizations
C) immunizations required to travel abroad
D) campaign immunizations

PBH-2.179. Components of the chemotherapeutic index include:
A) the toxic dose
B) the DL50 value
C) both the tolerated and the toxic dose
D) both the tolerated and the curative dose

Which of the following authorities should be notified about the occurrence of an infectious hepatitis infection in Hungary?
A) the National Public Health and Medical Officer Service (NPBH莫斯)
B) the NPBHmos and the National Institute of Public Health
C) the NPBHmos and the Szt. Laszló Hospital in Budapest
D) the NPBHmos and the National Institute of Hematology
PBH-2.181.
All of the following are anthropozoonoses, EXCEPT:
A) listeriosis
B) brucellosis
C) ornithosis
D) tularemia
E) glanders
F) leptospirosis
G) plague
H) anthrax
I) ankylostomiasis

PBH-2.182.
The portal of entry for the tetanus pathogen is:
A) the oral mucosa
B) the conjunctiva
C) the excoriated skin
D) the gastrointestinal tract

PBH-2.183.
The length of the incubation period and the subsequent mortality rate in a malignant pustule is:
A) 2 days and 50% respectively
B) 14 days and 30% respectively
C) 6 hours - 6 days and 100% respectively
D) 6 hours - 6 adys and 20-60% respectively

PBH-2.184.
The prevalence of trichomoniasis in the Hungarian population is:
A) 10%
B) 2%
C) 50%
D) 20-30%

PBH-2.185.
The prevalence of trichinellosis in the Hungarian population is:
A) approximately 1.5%
B) approximately 3%
C) nil
D) approximately 10%

PBH-2.186.
Creutzfeldt-Jakob disease:
A) has never occurred in Hungary
B) was first described in Hungary
C) also occurs in Hungary
D) only one case has been detected in Debrecen, Hungary

PBH-2.187.
Oncogenic viruses:
A) contain a viral oncogene
B) contain a cellular oncogene
C) are the result of genetic manipulation
D) play an established role in oncogenesis
PBH-2.188.
Serum hepatitis corresponds to:
A) hepatitis A  
B) hepatitis B  
C) non-A non-B hepatitis  
D) chronic aggressive hepatitis

PBH-2.189
Imission:
A) is the same as emission but is expressed by other dimensions  
B) represents the distribution of an air pollutant just above the ground  
C) translated word for word, this term means "introduction"  
D) is the initial phase of smog

PBH-2.190.
An aerosol:
A) is "settling" dust  
B) is "floating" dust  
C) is of a liquid state  
D) consists of nitrous oxides

PBH-2.191.
Which of the following belongs to the PAN substances?  
A) ozone  
B) sulphur dioxide  
C) aluminium hydroxide  
D) carbon monoxide

PBH-2.192.
Which of the following conditions is described by the idiom "mad as a hatter"?
A) lead poisoning  
B) cadmium poisoning  
C) mercury poisoning  
D) beryllium poisoning

PBH-2.193.
Moeller-Barlow disease is caused by a deficiency of.
A) vitamin A  
B) vitamin D  
C) vitamin K  
D) vitamin C

PBH-2.194.
The increased degradation of structural proteins results from a deficiency of.
A) calcium  
B) potassium  
C) magnesium  
D) sodium

PBH-2.195.
In Hungary, iodinated salt has been available since:
A) 1960  
B) 1940
The development of caries is actively facilitated by:
A) Streptococcus faecalis
B) Streptococcus viridans
C) Streptococcus mutans
D) Streptococcus pyogenes

A major metabolite of aflatoxin is:
A) aflatoxin G1
B) aflatoxin G2
C) aflatoxin M1
D) aflatoxin D2

Gannister disease is caused by the chronic inhalation of:
A) asbestos
B) automobile fumes
C) the dust of fire clay
D) common house dust

The "ADI" value of foods means the permitted concentration of:
A) chemical contamination
B) biological contamination
C) parasitic contamination
D) radionuclide contamination

Judged by its public health conditions, Hungary belongs to the:
A) category of developed countries
B) category of developing countries
C) transitional zone between developed and developing countries

The first step of prevention in human genetics is:
A) screening for genetic defects
B) controlling the consequences of mutations
C) the recognition and research of various mutagenic agents
D) the study of mutagenic agents

Gerohygiene utilizes the results of all the following disciplines, EXCEPT:
A) geriatrics
B) gerontology
C) experimental gerontology
D) social gerontology

Vitamin K is involved in the synthesis of:
A) 1 coagulation factor
B) 2 coagulation factors
C) 3 coagulation factors
D) 4 coagulation factors

PBH-2.204.
Which of the following refers to beriberi?
A) cuorin
B) kakke
C) itai-itai
D) minamata

PBH-2.205.
Cheilosis develops as a result of:
A) a vitamin D deficiency
B) a vitamin A deficiency
C) a vitamin C deficiency
D) a riboflavin deficiency

PBH-2.206.
Corn contains the antimetabolite:
A) ethobrom
B) indole acetate
C) convertin
D) tryptophan

PBH-2.207.
Tropical sprue develops as a result of.
A) a panthotenic acid deficiency
B) a vitamin B\textsubscript{12} deficiency
C) a folic acid deficiency
D) a vitamin A deficiency

PBH-2.208.
Kwashiorkor predominantly afflicts:
A) neonates
B) adults
C) elderly individuals
D) toddlers

PBH-2.209.
Marasmus predominantly afflicts:
A) infants
B) adults
C) children
D) neonates

The "wear quota" (minimum allowance) represents:
A) the absolute minimum of the daily carbohydrate allowance
B) the absolute minimum of the daily fat allowance
C) the absolute minimum of the daily protein allowance
D) weight-loss at high temperatures

PBH-2.211.
Vitamin A deficiency results in:
A) keratomalacia
B) polyneuritis
C) anemia
D) ossification disorders

PBH-2.212.
Rachitis tarda is characteristic in:
A) the adult age
B) the neonatal age
C) puberty
D) advanced age

PBH-2.213.
One gram of fat yields:
A) 39.06 KJ energy
B) 17.20 KJ energy
C) 22.50 KJ energy
D) 20.37 KJ energy

PBH-2.214.
Ethionine is an:
A) antihistamine
B) antivitamin
C) amino acid antagonist

PBH-2.215.
The Minnesota-study:
A) screens for hypertension
B) surveys for myocardial infarction
C) is a model of acute starvation
D) is a model of chronic starvation

PBH-2.216.
Which of the following is the so-called "semiessential" amino acid?
A) arginine
B) cystine
C) tyrosine
D) histidine

PBH-2.217.
The most significant complication of asbestosis is:
A) tuberculosis
B) laryngeal cancer
C) bronchial cancer
D) Raynaud's syndrome

PBH-2.218.
The additive effects of two different poisons having entered the organism is referred to as:
A) interaction
B) antagonism
C) summation
D) synergism

PBH-2.219.
A level of multiphasic carcinogenesis is:
A) syncarcinogenesis
B) cocarcinogenesis
C) the promotional phase
Lead inhibits the activity of all the following enzymes involved in the biosynthetic pathway of heme formation, EXCEPT:
A) d-aminolevulinate dehydratase  
B) coproporphyrinogen decarboxylase  
C) ferrochelatase  
D) heme reductase

Considering the low success rate of therapy in affected cancer patients already detected by screening, primary prevention is particularly important in:
A) skin cancer  
B) breast cancer  
C) bronchial cancer  
D) rectal cancer  
E) cervical cancer

Which of the following cancers is characterized by a decreasing rate of incidence both in developed countries and in Hungary?
A) prostatic cancer  
B) carcinoma of the colon  
C) rectal cancer  
D) gastric cancer  
E) bronchial-lung cancer

According to 1988 data, mortality due to malignancy was the highest in:
A) Austria  
B) Greece  
C) Finland  
D) Hungary  
E) Sweden

According to 1990 data, mortality due to suicide was the lowest in:
A) Austria and Ireland  
B) Austria and Hungary  
C) Ireland and Spain  
D) Austria and Spain

According to 1990 data, which of the following listed in decreasing order, ranks the specified countries by mortality due to suicide?
A) Hungary, Ireland, Austria  
B) Hungary, Spain, Ireland  
C) Hungary, Austria, Ireland  
D) Ireland, Spain, Austria  
E) Spain, Austria, Ireland

In Hungary, the number of HIV-positive individuals is as high as:
A) 30
B) 3000  
C) 300  
D) 30,000

PBH-2.227.  
The HIV virus is synergistic with all of the following viruses, EXCEPT:  
A) Epstein-Barr virus  
B) cytomegalovirus  
C) Herpesviruses  
D) papilloma viruses

PBH-2.228.  
The present-day AIDS epidemic originated in:  
A) West Africa  
B) North Africa  
C) South Africa  
D) Madagascar

PBH-2.229.  
The diversity of the surface antigens of the HIV virus is caused by frequent changes of the nucleotides in the:  
A) env gene sequence  
B) vif gene sequence  
C) gag gene sequence  
D) tat gene sequence

PBH-2.230.  
Viral surface antigens are:  
A) proteins  
B) polysaccharides  
C) lipopolysaccharides  
D) glycoproteins

PBH-2.231.  
The infectivity of the HIV virus decreases when a mutation occurs in the:  
A) tat gene sequence  
B) rev gene sequence  
C) vif gene sequence  
D) env gene sequence

PBH-2.232.  
Necessary epidemiologic control measures in diphteria include:  
A) the occurrence of the infection as well as the recovery of the patient should be reported; the regional public health authority should be notified by telephone  
B) hospital isolation of the patient is unnecessary  
C) continuous and conclusive disinfection is unnecessary  
D) the patient should be quarantined

PBH-2.233.  
Human pathogens of tuberculosis include:  
A) Mycobacterium tuberculosis hominis (in 99% of cases)  
B) Mycobacterium tuberculosis bovis (in 3% of cases)  
C) Mycobacterium tuberculosis hominis (in 97% of cases)  
D) Mycobacterium brevis (in 3% of cases)
PBH-2.234.
The term "Pontiac" fever is:
A) the same as tuberculoid leprosy  
B) the name of the mixed form of leprosy  
C) used as a synonym for legionellosis  
D) used as a synonym for lepromatous leprosy

PBH-2.235.
In chickenpox, the duties of the family practitioner include:
A) the occurrence of the infection should be reported  
B) continuous and conclusive disinfection is unnecessary  
C) the patient should be isolated from any children  
D) all household member should receive antimicrobial chemoprophylaxis

PBH-2.236.
A proper epidemiologic control measure for measles:
A) the occurrence of the infection should be reported to the local infectious disease control centre  
B) laboratory testing is not mandatory  
C) continuous disinfection is unnecessary  
D) isolation is unnecessary after clinical recovery

PBH-2.237.
A proper epidemiologic control measure for rubella:
A) isolation of the patient from pregnant women is unnecessary  
B) continuous disinfection is unnecessary  
C) laboratory testing is mandatory  
D) rubella infections and any cases of the congenital rubella syndrome should be reported

PBH-2.238.
Which of the following plays the most important role in warm weather?
A) the sympathetic vegetative system  
B) the parasympathetic vegetative system  
C) the appendages of the skin  
D) the respiratory system

PBH-2.239.
Minamata disease is caused by:
A) alkyl mercury  
B) beryllium  
C) ethyl bromide  
D) triethyl mercury

PBH-2.240.
The primary portal of entry for tricresyl-phosphate is the:
A) skin  
B) mucous membranes  
C) lung  
D) secretory organs

PBH-2.241.
The prevalence of strongyloidosis in nurseries is as high as:
A) 10%  
B) 80%
C) 5%
D) 27-68%

PBH-2.242.
The length of the incubation period of gonorrhoea is:
A) 2 days
B) 14 days
C) 3-7 days
D) several hours

PBH-2.243.
Epidemiologic features of scarlet fever include:
A) the contagiousness index is as high as 90%
B) the patient should be isolated
C) diagnostic laboratory testing is mandatory low as 1%

PBH-2.244.
Epidemiologic features of bacterial meningitis include:
A) an infectivity index as high as 100%
B) a contagiousness index as high as 50%
C) a contagiousness index as low as 0.1%
D) an infectivity index as low as 0.1%

PBH-2.245.
The principal contaminating substance in the water of wells in the southern regions of Hungary is:
A) asbestos
B) arsenic
C) fluoride
D) nitrites

PBH-2.246.
carcinogenicity as an iatrogenic effect is characteristic of.
A) cyclophosphamide
B) piroxicam (Hotemin)
C) rutoside (Venoruton)
D) acetylsalicylic acid (Kalmopyrin)

PBH-2.247.
An oncogenic substance is:
A) selenium
B) vinyl chloride
C) polyvinyl pyrrolidine
D) polyethylene

PBH-2.248.
Compared to non-smokers, smoking increases the risk of lung cancer by:
A) ten-fold
B) seventeen-fold
C) twenty-fold
D) five-fold

PBH-2.249.
Mortality due to malignancies is the highest in:
A) Uruguay
B) Scotland
C) Hungary  
D) Belgium

PBH-2.250.  
The trends of the cancer mortality curves of Austria and Hungary are:  
A) similar  
B) different as cancer mortality is increasing in Hungary and decreasing in Austria  
C) different as cancer mortality is increasing in Hungary and stagnant in Austria  
D) the same as cancer mortality is increasing in both countries

PBH-2.251.  
How much do nutritional factors contribute to death caused by cancer?  
A) 35-40%  
B) 15%  
C) 55%  
D) 25%

PBH-2.252.  
Provided that patient compliance is high, which of the following conditions can be treated?  
A) lung cancer  
B) bronchial cancer  
C) cancer of the colon  
D) breast cancer  
E) cervical cancer

PBH-2.253.  
The NYVAC vector-virus is:  
A) a variant of the vaccinia virus attenuated by deletion  
B) a variant of the adenovirus attenuated by deletion  
C) a vaccinia virus killed by b-propiolactone  
D) a variant of the avipoxvirus that grows also in human cell cultures

PBH-2.254.  
The principal portal of entry of cadmium is the:  
A) skin  
B) oral mucosa  
C) lung  
D) conjunctiva

PBH-2.255.  
Indoor air-pollution is predominantly manifested by:  
A) conjunctival irritation  
B) numbness  
C) cardiac pain  
D) varicosity

PBH-2.256.  
A relationship between water "hardness" and the risk of myocardial infarction is:  
A) nonexistent  
B) positive  
C) negative  
D) only valid for the CaO content of the water
PBH-2.257
All of the following conditions can develop in Lyme-disease, EXCEPT:
A) the Bannwarth syndrome
B) chronic migratory erythema
C) arthritis
D) endarteritis

PBH-2.258.
Which of the following tests is performed to verify suspected echinococcus infections?
A) Frankel's test
B) Casoni's intradermal test
C) Sabin-Feldman dye test
D) Wright's test

PBH-2.259
Which of the following water pollutants causes liver damage?
A) humic acid
B) asbestos
C) halothane
D) chloral hydroxide

PBH-2.260.
The extreme upper limit of "oxygen debt" is:
A) 100-200 litres
B) 30-40 litres
C) 16-18 litres

PBH-2.261.
The wavelength of infrared light ranges
A) from 300,000 to 500,000 nm
B) from 200 to 300 nm
C) from 750 to 300,000 nm

PBH-2.262.
The laser beam is most damaging to the:
A) skin
B) respiratory system
C) liver
D) eye

PBH-2.263.
What is electric ophthalmia?
A) the effect of strong electric shock on the unprotected eye
B) the effect of laser irradiation on the unprotected eye
C) the effect of exposure to UV-light on the unprotected eye
D) the effect of radiowaves on the unprotected eye

PBH-2.264.
Gray units (Gy) represent the:
A) absorbed dose
B) biological dose
C) dose performance
D) biological effectivity
PBH-2.265.
Which of the following radiation doses are considered particularly important in public health?
A) exposure to a high dose on a single occasion
B) exposure to a low dose on a single occasion
C) serial exposure to low radiation doses
D) serial exposure to high radiation doses

PBH-2.266.
Lead inhibits the activity of all the following enzymes, EXCEPT:
A) d-aminolevulinate dehydratase
B) coproporphyrine decarboxylase
C) ferrochelatase
D) uroporphyrin dehydrogenase

PBH-2.267.
There is a relationship between all of the following paired statements, EXCEPT:
A) the hardness of drinking water and coronary artery disease
B) methemoglobinemia and the nitrate content of drinking water
C) the nitrate content of drinking water and the morbidity of hypertension
D) the protozoa content of the drinking water and the occurrence of some types of bowel cancer

PBH-2.268.
Valid statements regarding eutrophication include all of the following, EXCEPT:
A) this phenomenon occurs in surface waters
B) this phenomenon occurs in overgrowth of algae
C) this phenomenon facilitates the growth of saprobes
D) the antonymous term is nontrophication

PBH-2.269.
All of the following are principal causes of indoor nosocomial infections, EXCEPT:
A) mycobacteria
B) Escherichia coli
C) Staphylococcus aureus
D) Aspergillus flavus

PBH-2.270.
All of the following paired statements reflect a causal relationship, EXCEPT:
A) asbestos - mesothelioma
B) 3,4-benzpyrene - bronchial carcinoma
C) benzene - leukemia
D) aniline - cancer of the urinary bladder
E) lead - central nervous system neoplasms

PBH-2.271.
Which of the following is a characteristic epidemiologic feature of pertussis?
A) this pathogen produces endo- and exotoxins
B) infectivity is absent in the catarrhal stage of the disease
C) the contagiousness index is 60-80%
D) the infection is transmitted exclusively by droplets sprayed
into the air on coughing

PBH-2.272.
Which of the following statements regarding the hepatitis B virus is valid?
A) the hepatitis B virus belongs to the family of DNA viruses
B) hepatitis B viruses can be detected as Dane-particles
C) the surface antigens of the virus are polypeptides
D) the surface antigens of the virus are glycoproteins

PBH-2.273.
Valid statements regarding fluoride include all of the following, EXCEPT:
A) fluoride causes mucosal irritation
B) fluoride causes fluorosis
C) if fluoride is administered for the prophylaxis of tooth decay, the fluoride content of drinking water should be reduced
D) fluoride entering the circulation via the alveoli may cause pulmonary edema

PBH-2.274.
In influenza, proper epidemiologic control measures include all of the following, EXCEPT:
A) laboratory testing is not mandatory
B) the reporting of all cases is required
C) isolation of the patient is recommended
D) continuous disinfection is necessary

PBH-2.275.
All of the following are major complications of mumps, EXCEPT:
A) pancreatitis and meningoencephalitis
B) pneumonia
C) orchitis
D) oophoritis

PBH-2.276.
Valid statements regarding chancroid include all of the following, EXCEPT:
A) this infection is caused by Haemophilus species
B) the pathogen is a Gram-positive microbe
C) the length of the incubation period is 3-5 days
D) the Ito-Reenstierna test is positive

PBH-2.277.
Valid statements regarding cysticercosis in humans include all of the following, EXCEPT:
A) the source of infection are ova shedded by the patient
B) infested pigs are the source of infection
C) infested cattle are the source of infection
D) infested sheep are the source of infection

PBH-2.278.
All of the following can be caused by carbon tetrachloride, EXCEPT:
A) liver damage
B) visual disturbances
C) renal injury
D) CNS depression
E) ventricular fibrillation
F) pulmonary fibrosis

PBH-2.279.
All of the following are caused by carbon monoxide, EXCEPT:
A) extrapyramidal symptoms
B) CO aggravates the progression of atherosclerosis through cholesterol
C) cardiac repolarization disturbances
D) its affinity to hemoglobin is 300 times higher than that of oxygen

PBH-2.280.
All of the following are caused by sulphur dioxide, EXCEPT:
A) bronchospasm
B) mucosal irritation
C) conjunctival irritation
D) vagal paralysis

PBH-2.281.
All of the following are caused by nitrous oxide, EXCEPT:
A) conjunctival irritation
B) delirium
C) drowsiness
D) chronic exposure results in the development of lung cancer

MULTIPLE CHOICE QUESTIONS WITH KEY ANSWERS / TYPE II
Every question or incomplete statement has only one answer in the following combinations:
A) if the answers 1, 2, and 3 are true
B) if the answers 1 and 3 are true
C) if the answers 2 and 4 are true
D) if only the answer 4 is true
E) if all the four answers are true
Select one of these key combinations!!!

PBH-2.282.
Cellular oncogenes:
1) are homologous in all species
2) display partial homogeneity with viral oncogenes
3) can be found in all human cells
4) have the same functions as homeobox genes

PBH-2.283.
Cellular oncogenes:
1) are ubiquitary
2) interact with each other
3) are involved in the regulation of the cell cycle
4) inhibit the activity of suppressor genes

PBH-2.284.
Cellular oncogenes:
1) spread neoplasms horizontally
2) are partially identical with growth factors
3) include the p53 gene
4) are partially identical with growth factor receptors
Compared to those living in detached houses, children living in apartments:
1) are less well-developed
2) have more unstable vegetative functions
3) have higher blood pressures
4) are more even-tempered

Which of the following is not an anthropozoonosis?
1) Q fever
2) hymenolepidosis
3) Marburg disease
4) Necator americanus infestation

Which of the following substances has been involved in the water pollution at Vac in Hungary?
1) cyclohexanon
2) palmitate
3) toluol nitril
4) beryllium

Air pollution increases the incidence of:
1) lung neoplasms
2) conjunctivitis
3) emphysema
4) sinusitis

Environmental noise is an etiologic factor in the development of
1) neurosis
2) hypertension
3) hearing loss
4) Raynaud’s syndrome

Exposure to environmental noise may cause:
1) Reye's syndrome
2) an increased excretion of vanillylmandelic acid
3) neurasthenia
4) Cannon's stress-reaction

The effects of alcohol:
1) facilitate the development of neoplasms
2) are mitogenic
3) are antimitogenic
4) are synergistic with those of endogenous nitrous oxide

Alcohol:
1) binds to opiate receptors
2) is a vasodilator and reduces the morbidity due to myocardial infarction
3) causes Alzheimer's disease
4) facilitates the scavenging of free radicals

PBH-2.293.
The following can be detected in the blood of patients with hepatitis D:
1) HBsAg
2) anti-HAV antibodies
3) anti-Hd antibodies
4) anti-HC antibodies

PBH-2.294.
Which of the following are not carcinogenic substances?
1) chromium compounds
2) mercury compounds
3) nickel compounds
4) ortho-tricresyl-phosphate

PBH-2.295.
Protective immunization against hepatitis B is recommended for:
1) the personnel of infectious disease departments
2) the personnel of hemodialysis units
3) dentists
4) laboratory staff

PBH-2.296.
deletion technique is applied for:
1) the production of NYVAC vector-viruses
2) the reduction of avipoxvirus replication in the human organism
3) the identification of band encoding surface antigens
4) the incorporation of DNA-bands into plasmids

PBH-2.297.
The targets of T lymphocytes induced by HIV capsid glycoprotein (gp 120) include:
1) the HIV capsid glycoprotein
2) the gag structural protein
3) the reverse transcriptase
4) the tat regulatory protein

PBH-2.298.
Which of the following are characteristic features of Lyme disease?
1) benign cutaneous lymphadenosis
2) chronic atrophizing acrodermatitis
3) serous meningitis
4) acro-osteolysis

PBH-2.299.
The mortality rate is increasing in:
1) malignancies of the oral cavity
2) laryngeal malignancies
3) pharyngeal neoplasms
4) cancer of the large bowel and the rectum

PBH-2.300.
The initiative "Health for all" means:
1) the achievement of a health level that ensures complete physical,
2) the achievement of a health level that is based on the rights and responsibilities of the individual as well as the society
3) the achievement of a health level that ensures complete physical, mental and economic wellbeing
4) the provision of a health level that ensures a socially and financially productive life for every individual

PBH-2.301. According to the World Health Organization, the term "communal orientation" means:
1) the right of the population to express its views on health care issues
2) the right of the community and its elected representatives for participating in the administration of the health care delivery system
3) the right of the community to review the financing of the health care delivery system
4) the right of the community and its every member to participate in the identification of all health problems as well as in the planning, implementation and evaluation of health care

PBH-2.302. Terms belonging to the terminology of population dynamics include:
1) the marriage and divorce rate
2) the birth rate
3) the mortality rate
4) immigration

PBH-2.303. Which of the following should be considered when setting up priorities?
1) the prevalence of diseases
2) the severity of diseases and their impact on the community
3) the potential for intervention and assessment
4) the opinion of the population

PBH-2.304. Potential sources of epidemiological data include:
1) demographic statistics
2) hospital morbidity and mortality statistics
3) the statistics of screening programs
4) social insurance statistics

PBH-2.305. The term "iceberg phenomenon":
1) is used to describe latent morbidity phenomena
2) means diseases not presented to the health care delivery system for treatment
3) means that medical care is delivered, although not for the actual diagnosis
4) indicates diseases of unknown etiology

PBH-2.306. A bell-shaped age distribution tree:
1) represents the growth of the population
2) indicates the balance between the number of middle-aged and young adults
3) represents a dwindling population
4) indicates the balance between the number of births and deaths

PBH-2.307.
Components of screening programs include:
1) the family history
2) the individual history-risk assessment
3) the physical examination
4) radiography, ultrasonography, ECG

PBH-2.308.
Reliable predictors of future drug abuse include:
1) parental habits
2) the educational methods applied in the family
3) drug abuse before the age of 15
4) the imitation of a female gender

PBH-2.309.
All of the following are frequently declared criticisms of the WHO definition of health, EXCEPT:
1) the WHO definition accounts for social considerations only
2) the WHO definition is rather rigid instead of being dynamic
3) the WHO definition does not give an unequivocal definition, rather, it changes with time
4) the WHO definition is propagandistic in many respects

PBH-2.310.
Risk factors essentially influenced by social and economic situations include:
1) smoking
2) overweight
3) lack of exercise
4) environmental pollution

PBH-2.311.
Factors to be considered when setting up priorities include:
1) the prevalence of diseases
2) the severity of diseases and their impact on the community
3) the potential for intervention and assessment
4) the opinion of the population

PBH-2.312.
Terms belonging to the terminology of population dynamics include:
1) the marriage and divorce rate
2) drug abuse
3) the death rate
4) alcohol abuse

PBH-2.313.
Drawbacks of retrospective studies include:
1) their long duration
2) their unreliability
3) their high costs
4) the loss of data

PBH-2.314.
The inactivated poliovirus vaccine (IPV):
1) inhibits the adherence of the wild virus to the intestinal wall
2) provides protection only by the presence of circulating antibodies
3) precludes the circulation of the wild virus in the population
4) precludes the blood-borne dissemination of the wild virus into the nervous system

PBH-2.315.
In patients with an ovalbumin allergy in their medical history, the application of viral vaccines is:
1) absolutely contraindicated
2) not contraindicated in patients over the age of 6 years
3) appropriate if antihistamines are administered simultaneously
4) possible, depending on the results of the skin test

PBH-2.316.
Vaccines produced by recombinant technology contain:
1) the gene sequence encoding the antigens
2) only the antibodies with potent activity against the pathogen microorganism
3) all the antigens
4) antigens that play a role in the development of resistance to the pathogen

PBH-2.317.
Immunocompromised children in the family should not be immunized with:
1) inactivated poliovirus vaccine
2) oral poliovirus vaccine
3) RABIVAC vaccine
4) MMR vaccine

PBH-2.318.
Characteristic features of organic phosphate esters include:
1) long-term effects
2) a cholinesterase antagonist effect
3) a potential to accumulate
4) potent toxic effects

PBH-2.319
Examples of biodegradable trash include:
1) waste food
2) tires
3) waste paper
4) PVC

PBH-2.320
Diets deficient in protein may cause:
1) kwashiorkor
2) starvation edema
3) marasmus
4) pellagroid conditions

PBH-2.321
Regulations regarding the collection and storage of food samples include:
1) a sample of at least 100 g should be set aside from each dish
2) food samples should be preserved for 48 hours
3) food samples should be preserved for 24 hours
4) a sample of at least 50 g should be set aside from each dish

PBH-2.322.
Which of the following specimens should be sent for a toxicology study following mushroom poisoning?
1) the vomitus of the patient
2) the remnants of a dish prepared from the suspected poisonous mushroom
3) the gastric lavage fluid
4) a stool specimen

PBH-2.323.
BCG vaccination is CONTRAINDICATED:
1) unless tuberculin testing has been performed earlier
2) in symptomatic and asymptomatic HIV-positive individuals
3) in pregnancy
4) in symptomatic HIV-positive patients

PBH-2.324.
Drawbacks of retrospective studies include:
1) their long duration
2) the excessive use of manpower
3) their high costs
4) the loss of data

RELATION ANALYSIS
In the following questions determine if the statement in the first half of the sentence and the explanation in the second half of the sentence are true and if a causal relationship exists between them. Select the single correct version from the five possible combinations:

A) both the statement and the explanation are true and a causal relationship exists between them;
B) both the statement and the explanation are true but there is no causal relationship between them;
C) the statement is true, but the explanation is false;
D) the statement is false, but the explanation itself is true;
E) both the statement and the explanation are false.

PBH-2.325.
Population health science is the theoretical basis of public health care because it is an integrated discipline incorporating epidemiology and public hygiene.

PBH-2.326.
Population health science is authorized to sanction because this is a means of interdisciplinary and intersectorial cooperation.

PBH-2.327.
Malignant disease is a leading cause of death in Hungary because it is responsible for 35% of all deaths.

PBH-2.328.
Cardiovascular disease is a leading cause of death in Hungary because
it is responsible for more than 60% of all deaths.

PBH-2.329. 
Tuberculosis is a leading cause of death in Hungary because it is responsible for a significant portion of all deaths.

PBH-2.330. 
In Hungary, violent deaths represent the most important health problem because they are responsible for about 10% of all deaths.

PBH-2.331. 
In Hungary, the average life expectancy of males from birth is decreasing because the Hungarian population is aging.

PBH-2.332. 
In Hungary, the average life expectancy of both sexes is decreasing because the Hungarian population is aging.

PBH-2.333. 
In Hungary, the average life expectancy of females is decreasing, whereas it is increasing in males because the mortality of the female population is higher.

PBH-2.334. 
The size of the Hungarian population is decreasing because the reproduction rate of the population is less than adequate.

PBH-2.335. 
The population of Hungary is dwindling because the mortality rate is higher than the European average.

PBH-2.336. 
The rate of preventable mortality is high in Hungary because this is the result of outdated health care alone.

PBH-2.337. 
In Hungary, the mortality of males aged 49-55 years is lower than it was in the thirties because World War II took its toll primarily on this age group.

PBH-2.338. 
Excess mortality is lower in Hungary than in other countries because the rate of preventable death is lower.

PBH-2.339. 
Excess mortality in Hungary is similar to that of developed countries because the health delivery system is extremely efficient in Hungary.

PBH-2.340. 
Hungary is ranked third in the world in the cumulative cancer mortality of females because environmental pollution is higher in Hungary than in other countries.

PBH-2.341. 
In Hungary, cancer mortality is the highest among males because Hungarian males are the biggest smokers in the world.
PBH-2.342. The incidence of liver cirrhosis is increasing progressively in Hungary because the alcohol consumption of the Hungarian population is the highest in the world.

PBH-2.343. The incidence of liver cirrhosis is increasing progressively in Hungary because the Hungarian population consumes the largest volume of ardent spirits in the world.

PBH-2.344. Olive oil is an essential component of Hungarian cuisine because animal fat is less healthy.

PBH-2.345. w-3-fatty acids have a protective effect against malignant disease because these substances only inhibit the interactions of oncogenes.

PBH-2.346. The w-3-fatty acid content is the highest in seafood because their palmitate component is a characteristic substance in the liver of marine animals.

PBH-2.347. Linolenic acid has a protective effect against malignant disease because it contains a ω-3-fraction.

PBH-2.348. Linolenic acid promotes the development of neoplasms because it is an unsaturated fatty acid.

PBH-2.349. Linolenic acid promotes the development of neoplasms because it interacts with oncogenes.

PBH-2.350. Linolenic acid inhibits carcinogenesis because it is an unsaturated fatty acid.

PBH-2.351. Linolenic acid promotes the development of malabsorption syndromes because it is an unsaturated fatty acid.

PBH-2.352. The incidence of cervical carcinoma is decreasing in Hungary because the success rate of cervical carcinoma therapy is high.

PBH-2.353. Smokers are better protected against the development of Alzheimer's disease than non-smokers because the influence of nicotine on dopamine metabolism is highly preventive.

PBH-2.354. The incidence of cervical carcinoma is decreasing in Hungary because there are successful screening programs under way.
PBH-2.355.
The prevalence of cervical carcinoma is increasing in Hungary because there are successful screening programs under way.

PBH-2.356.
The mortality of cervical carcinoma is increasing in Hungary because there are successful screening programs under way.

PBH-2.357.
The mortality of cervical carcinoma is decreasing in Hungary because there are successful screening programs under way.

PBH-2.358.
The mortality of gastric carcinoma is decreasing in Hungary because there have been successful nutritional campaigns in Hungary.

PBH-2.359.
The incidence of gastric carcinoma is decreasing in Hungary because educational programs on healthy nutrition have been highly successful.

PBH-2.360.
The incidence of gastric carcinoma is decreasing in Hungary because the screening activity of gastrofiberoscopy centres is effective.

PBH-2.361.
The mortality of gastric carcinoma is decreasing in Hungary because there are successful screening programs under way.

PBH-2.362.
The mortality of gastric carcinoma is decreasing in Hungary because certain dietary habits have changed favourably.

PBH-2.363.
In Hungary, the mortality of bronchial carcinoma increases more progressively than in similarly developed countries because environmental pollution is higher in Hungary than in other East-European countries.

PBH-2.364.
In Hungary, the mortality of oral, laryngeal and pharyngeal carcinoma increases progressively because Hungarian smoking habits are different from those prevailing in other similarly developed countries.

PBH-2.365.
The incidence of cervical carcinoma is significantly higher in nuns than in promiscuous women because sexual abstinence reduces the incidence of cervical cancer.

PBH-2.366.
The incidence of cervical carcinoma is significantly lower in nuns than in promiscuous women because sexual abstinence reduces the incidence of cervical cancer.

PBH-2.367.
The incidence of cervical carcinoma is significantly lower in Muslim/Jewish women than in Christians because the copulation habits are
different in these populations.

PBH-2.368. The incidence of penile carcinoma is higher in Muslim/Jewish males than in Christians because the mechanical consequences of circumcision facilitate the development of penile carcinoma.

PBH-2.369. The incidence of penile carcinoma is lower in Muslim/Jewish males than in Christians because circumcision precludes the cumulation of noxious substances in the smegma.

PBH-2.370. The incidence of vaginal carcinoma is higher in the daughters of mothers treated with diethylstilbestrol during their pregnancy because diethylstilbestrol binds to estrogen receptors and promotes the proliferation of altered cells.

PBH-2.371. The prevalence of leukemia is higher among radiologists because exposure to radiation increases the risk of developing leukemia.

PBH-2.372. The incidence of leukemia shows a periodic increase following nuclear catastrophes because the development of leukemia is the most common late consequence of ionizing radiation.

PBH-2.373. Leukemias-lymphomas comprise 67% of secondary neoplasms because cytotoxic agents act primarily on the immune system and the lymphocytes.

PBH-2.374. Cyclophosphamide is an established human carcinogenic agent because in humans it causes bladder cancer as a secondary neoplasm.

PBH-2.375. The incidence of gastric cancer is higher in regions supplied with nitrate-contaminated drinking water because nitrates are converted into nitrosamines in the body.

PBH-2.376. The incidence of cardiovascular disease is higher in the population consuming nitrate-contaminated drinking water because nitrates have a deleterious effect on the vascular wall.

PBH-2.377. Morbidity due to myocardial infarction is lower in populations consuming soft drinking water because soft water has a protective effect against myocardial infarction.

PBH-2.378. Morbidity due to myocardial infarction is higher in populations consuming soft drinking water because soft water facilitates the development of myocardial infarction.
PBH-2.379.
Morbidity due to myocardial infarction is lower in populations consuming hard drinking water because hard water has a protective effect against myocardial infarction.

PBH-2.380.
Polycyclic hydrocarbon constituents of tobacco smoke are pluripotent carcinogens because these substances form adducts in the blood.

PBH-2.381.
The exhaust fumes of two-stroke engines may contain polycyclic hydrocarbons because these substances are formed during incomplete combustion.

PBH-2.382.
Polycyclic hydrocarbons cause neoplasms predominantly in the respiratory system because the concentration of these substances is extremely high in polluted air.

PBH-2.383.
The main component of the London-type smog is carbon monoxide because PAN substances are formed in photochemical reactions.

PBH-2.384.
The main components of the Los Angeles-type smog are PAN substances because PAN substances are formed in photochemical reactions.

PBH-2.385.
Air pollution has dramatic effects on human health because its influence is more significant than that of soil contamination.

PBH-2.386.
Drinking water influences human health because carcinogenic substances can be formed as an adverse effect of chlorination.

PBH-2.387.
Hemangiosarcoma may develop in employees of polyvinyl chloride producing factories because several derivatives of polyvinyl chloride have hepatocyte-specific effects.

PBH-2.388.
Exposure to asbestos causes mesothelioma because asbestos fibers are epigenetic carcinogens.

PBH-2.389.
Exposure to asbestos causes mesothelioma and bronchial carcinoma because asbestos is a genotoxic carcinogen.

PBH-2.390.
Promoters exert their influence in the second phase of carcinogenesis because these factors are genotoxic.

PBH-2.391.
Promoters exert their influence in the second phase of carcinogenesis because these are membrane-active factors.

PBH-2.392.
Promoters influence cell-to-cell communication because their target is a protein kinase C enzyme.

PBH-2.393. About a thousand malignant cells are produced in the human body every day because environmental stimulants of mutation and proliferation act on the DNA.

PBH-2.394. The homeostatic immune system eliminates malignant cells from the human body because antitumor defence involves also the activity of lymphokines.

PBH-2.395. Eighty percent of environmental carcinogens are mutagenic because all mutagens are carcinogens as well.

PBH-2.396. Eighty-ninety percent of environmental mutagens are carcinogenic because all environmental carcinogens are mutagenic as well.

PBH-2.397. Environmental carcinogenesis involves several phases because only "dormant" malignant cells are produced during the initiation phase.

PBH-2.398. The molecular epidemiology of malignancies is a new discipline of public health science because the significance of molecular changes has been recognized only recently.

PBH-2.399. Molecular epidemiology of malignancies belongs to the arsenal of secondary prevention because its methods make an early diagnosis possible.

PBH-2.400. Molecular epidemiology of malignancies belongs to the arsenal of primary prevention because it makes the prevention of exposure to chemical carcinogens possible.

PBH-2.401. The objective of tertiary prevention in neoplastic disease is the prevention of the development of metastases because metastases can be recognized early.

PBH-2.402. The effects of chemical (environmental) carcinogens are usually manifested during the process of multiphasic carcinogenesis because they only cause malignancy after a decade-long exposure.

PBH-2.403. The effects of chemical carcinogens are manifested after several decades of exposure because these factors exert their activity during the process of multiphasic carcinogenesis.
Diagnostics at the genetic level accomplishes secondary prevention because oncogenes may change as early as several years before the morphological changes of malignancy become detectable.

PBH-2.405.
Molecular biology diagnostics of neoplasms accomplishes secondary prevention because the changes of onco- and suppressor genes can be detected several years before morphological malignant changes.

Suppressor genes inhibit the development of neoplasms because these genes exert their activity by the inhibition of oncogenes.

PBH-2.407.
Oncogenes may exert their effects also directly because the activation of suppressor genes is not a prerequisite for this.

PBH-2.408.
Oncogenes exert their actions indirectly by influencing suppressor genes because the inhibition of suppressor genes may be a precondition to their activation.

PBH-2.409.
Suppressor genes exert their actions indirectly by influencing oncogenes because the inhibition of oncogenes may be a precondition to their activation.

PBH-2.410.
Oncogenes are integral elements of the cell because cellular oncogenes participate also in the regulation of physiologic cellular functions.

PBH-2.411.
Viral oncogenes have been transmitted to the human genome from viruses because viral oncogenes have been "clipped away" from the human genome during the philogenesis of viruses.

PBH-2.412.
Cellular and viral oncogenes show a high degree of homogenity because viruses have acquired their oncogenes from the human genome by transduction.

PBH-2.423.
Cellular oncogenes are also called proto-oncogenes because these genes assume oncogenicity only after ectopic expression.

PBH-2.424.
The myc oncogenes are responsible for the immortalization of malignant cell lines because immortalization of malignant cells is a prerequisite to the indefinite survival of the neoplasm.

PBH-2.425.
The development of a retinoblastoma may be predicted by screening for the Rb (retinoblastoma) oncogene because the Rb oncogene carries genetic information specific to the development of retinoblastoma.

PBH-2.426.
The development of several leukemia types may be predicted by screening for the Rb (retinoblastoma) oncogene because the Rb oncogene carries genetic information specific only to the development of leukemia.

PBH-2.427. The development of Ewing's sarcoma may be predicted by screening for the Rb (retinoblastoma) oncogene because the Rb oncogene carries genetic information specific only to the development of Ewing's sarcoma.

PBH-2.428. The design of cancer screening protocols is extremely important because these protocols reduce the mortality resulting from malignant disease.

PBH-2.429. The design of cancer screening protocols is extremely important because these protocols reduce the prevalence of malignant disease.

PBH-2.430. Cancer screening protocols are important because their implementation reduces the incidence of malignant disease.

PBH-2.431. Cancer screening protocols are applied continuously in developed countries because this makes the reduction of the mortality rate possible.

PBH-2.432. Cancer screening systems are functioning continuously in developed countries because this makes the reduction of the mortality of malignant diseases possible.

PBH-2.433. Environmental conditions have a great influence on human health because environmental conditions have a significant role in the development of malignant diseases.

PBH-2.434. The control of environmental conditions reduces the incidence of malignant disease because environmental factors are responsible for the development of malignant disease in at least 10% of cases.

PBH-2.435. The modification of lifestyle may prevent the development of cardiovascular disease because lifestyle has an essential role in the development of cardiovascular disease.

PBH-2.436. Lifestyle has a great influence on the incidence of cardiovascular disease because it plays an essential role in the development of cardiovascular disease.

PBH-2.437. Nutrition may have a significant influence on the incidence of stroke because improper nutrition is a major etiologic factor of stroke.

PBH-2.438.
Eating habits may have a significant influence on the incidence of stroke because primary health care plays an important role in the prevention of stroke.

PBH-2.439. Stroke can be prevented by appropriately scheduled screening and intervention because factors other than dietary ones are also involved in its etiology.

PBH-2.440. Stroke can be prevented by early medical intervention because factors other than lifestyle also contribute to the development of stroke.

PBH-2.441. Cholera is an easily curable infection because full recovery can be achieved without antibiotic therapy using only proper fluid and electrolyte supplementation.

PBH-2.442. Cholera is a preventable infection because full recovery can be achieved without antibiotic therapy, using only proper fluid and electrolyte supplementation.

PBH-2.443. Cholera is a preventable infection because the pathogenetic effect of the infecting bacterium can be controlled by infusion therapy.

PBH-2.444. Cholera is a preventable infection in countries where it is endemic because this infection can be controlled by adequate drug therapy.

PBH-2.445. Protective immunization is an important method of infectious disease prevention because all infectious diseases can be prevented by immunization.

PBH-2.446. Leptospirosis is endemic in Hungary because wild rodents belong to the vectors of leptospirosis in Hungary.

PBH-2.447. The incidence of Lyme disease is increasing in Hungary because the incidence of this disease is increasing only in countries with unfavourable environmental conditions.

PBH-2.448. Banawarth syndrome is a component of Lyme disease because this syndrome develops only in patients with Lyme disease.

PBH-2.449. Sexual behavior is a significant factor in the prevention of AIDS because promiscuity reduces the incidence of HIV infection.

PBH-2.450. Contraception is a significant factor in the prevention of AIDS because the pH of the condom destroys the HIV virus.

The HIV virus is transmitted by homosexual contact only because anal intercourse is characteristic of homosexual males.

PBH-2.452. The HIV virus is transmitted also by heterosexual contact because the sexual practices of heterosexual individuals are different from those of homosexuals.

PBH-2.453. The HIV virus causes helper cell damage because the HIV virus is toxic to lymphocytes.

PBH-2.454. Helper lymphocytes are the target cells of the HIV virus because the HIV virus also causes Kaposi's sarcoma.

PBH-2.455. The genetic variability of the HIV virus due to mutations is considerable because the genetic variability of the HIV virus is caused by environmental factors.

PBH-2.456. The HIV virus is destroyed outside the body because it is extremely sensitive to the changes of temperature and pH.

PBH-2.457. Genetic factors also contribute to the development of HIV infection because the prevalence of AIDS is highest in blacks.

PBH-2.458. Racial factors also contribute to the development of HIV infection because the prevalence of AIDS is highest in Asian people.

PBH-2.459. National traditions also contribute to the development of HIV infection because in Europe, the prevalence of AIDS is the highest in Italy and Spain.

PBH-2.460. AIDS is endemic in Hungary because the prevalence of AIDS is extremely high in Hungary.

PBH-2.461. AIDS is not endemic in Hungary because only several hundred individuals are afflicted by this disease in Hungary.

PBH-2.462. The mutagenic variability of the HIV virus is higher than that of the influenza viruses because the mutation frequency of the HIV virus surpasses those of all known pathogens.

PBH-2.463. In Eastern and Middle-European countries, HIV infection is transmitted predominantly by transfusions because before 1985, blood products were not screened for HIV positivity in Hungary.
PBH-2.464. Blood products are potential sources of the HIV virus because blood products are still not screened for HIV positivity in Hungary.

PBH-2.465. Blood products are important sources of HIV infection because several thousand patients have contracted AIDS by the administration of HIV positive blood products in Romania.

PBH-2.466. The condom provides efficient protection against HIV infection because anal intercourse is only possible with a condom.

PBH-2.467. Excoriations of the anal mucosa are convenient portals of entry for the HIV virus because the HIV infection spreads only by mucosal infection.

PBH-2.468. The prevalence of blood-borne HIV infections is increasing in Hungary because the efficacy of HIV testing of blood products has decreased.

PBH-2.469. The number of patients with AIDS has decreased in Hungary because HIV testing is rigorously performed on donated blood.

PBH-2.470. The incidence of AIDS is stagnant in Hungary because Hungary is the centre of the Middle-European condom industry.

PBH-2.471. The Bill of Human Rights authorizes the HIV positive individual to disclose the identity of his/her sexual partners because the identification of sexual partners is mandatory in Hungary.

PBH-2.472. It is difficult to track down HIV positive individuals in Hungary because the disclosure of the identity of sexual partners would breach the provisions of the Bill of Human Rights.

PBH-2.473. The Sabin-Feldman test is a specific method for the diagnosis of toxoplasmosis because the Sabin-Feldman test is a specific immunologic reaction.

PBH-2.474. Darkfield microscopy is used in the diagnostics of syphilis because darkfield microscopy is a specific method for the detection of the pathogen of syphilis.

PBH-2.475. Leptospirosis is endemic in Hungary because recreational exposure (i.e. swimming in contaminated waters) is prevalent in rural populations.

PBH-2.476. The livestock of Hungarian agriculture is infected with brucellosis
Hungarian regulations on veterinary health do not comply with the requirements of the European Community. 

Anthrax is endemic in the Hungarian fauna because the epidemiologic control of anthrax is inefficient in Hungary.

Methemoglobinemia may occur in Hungarian neonates because nitrate contamination of drinking water obtained from wells is common.

In Hungary, goiter is prevalent in the northern Transdanube region because the iodine content of drinking water is usually low in Hungary.

Fluorosis is prevalent in Hungary because the drinking water obtained from wells usually contains excess fluoride.

Tooth decay is endemic in Hungary because fluorinated drinking water is rarely available.

Leukoplakia is a good indicator of oral malignancy because oral neoplasms always originate from the buccal mucosa.

In the southern regions of Hungary, the incidence of gastrointestinal disorders is higher in this region.

Asbestos inhibits the ion-exchange mechanism of renal tubules therefore, asbestos causes disorders characterized by diarrhea.

In the southern regions of Hungary, the asbestos content of drinking water is high because the water supply system is constructed of tubes lined with asbestos.

Asbestos inhibits the ionic transport functions of the tubular epithelium therefore, asbestos may cause renal carcinoma.

Mercury is a carcinogenic substance because mercury deposits in renal epithelial cells represent a direct stimulatory effect.

Lead is a nephrocarcinogen because it induces epithelial proliferation by inhibiting the ionic transport of renal epithelial cells.

Antimonium is an important trace metal because it has a protective effect against malignant disease.
Cobalt is a component of vitamin B\textsubscript{12} because cobalamin binds cobalt in the liver by acidic linking.

\textit{β}-carotenes inhibit the formation of neoplasms because \textit{β}-carotenes have antioxidant properties.

Herbal glycosides are important in the prevention of malignancy because these substances inhibit the activity of the protein kinase C enzyme.

Möller-Barlow disease is an adult type of vitamin C deficiency because the deficiency of vitamin C may result in the development of scurvy.

The consumption of roast meat is unhealthy because barbecuing induces the formation of nitrosamines in meat.

The consumption of barbecued meat is unhealthy because barbecuing induces the formation of nitrosamines in meat.

The consumption of meat roasted on charcoal embers can be unhealthy because this may result in the formation of \textit{β}-carotenes.

The consumption of stewed meat can be considered healthy because stewing does not induce the formation of polycyclic carbohydrogens.

Pork is healthier food than poultry because it contains less tryptophan.

Poultry contains more tryptophan than pork therefore, poultry is healthier than pork.

The consumption of vegetables is healthy because green vegetables accumulate benzpyrene from the atmosphere.

The consumption of fish is deleterious to health because water pollutants may accumulate in the fish liver.

Cytochrome P450 is an enzyme involved in the detoxification functions of the liver therefore the activation of cytochrome P450 is deleterious to health.

Cytochrome P450 is an enzyme involved in the inactivation of health damaging substances therefore factors activating cytochrome P450
can influence health favourably.

PBH-2.504. Campylobacter jejuni can be isolated in a proportion of diarrhea epidemics because C. jejuni is present in the drinking water in Hungary.

PBH-2.505. Vitamin A has a protective effect against malignancy because crystalline vitamin A has a toxic effect on tumor cells.

PBH-2.506. About 20% of children with Entamoeba histolytica infection have diarrhea because E. histolytica is an ubiquitous pathogen in Hungary.

PBH-2.507. Smoking causes a ten-fold increase in the incidence of lung cancer because the risk of lung cancer is reduced to the level of that of nonsmokers at least a decade after the cessation of smoking.

PBH-2.508. Smoking facilitates the development of rectal cancer because nicotine metabolites are excreted in the rectum.

PBH-2.509. Smoking facilitates the development of pancreatic cancer because nicotine is involved in the development of pancreatic cancer.

PBH-2.510. Caffeine may be involved in the development of pancreatic cancer because it inhibits the activity of the tyrosine kinase enzyme.

PBH-2.511. Caffeine may be involved in the development of pancreatic cancer because it influences the activity of the adenylate cyclase enzyme.

PBH-2.512. The herpesvirus has an important role in the development of cervical cancer because an activated oncogene has been detected in cervical tumors.

PBH-2.513. Papilloma viruses have an important role in the development of breast cancer because these pathogens may contain viral oncogenes.

PBH-2.514. Entamoeba histolytica infection is the pathogen in about 20% of childhood diarrhea cases because the prevalence of E. histolytica infections is higher than the average in Hungarian children.

PBH-2.515. Animal fat is an integral component of the Hungarian diet because animal fat is the least expensive foodstuff.

PBH-2.516. Linolenic acid is an unsaturated fatty acid therefore it has a protective effect against cancer.
PBH-2.517.
All unsaturated fatty acids have a protective effect against cancer because all of them contain linolenic acid.

PBH-2.518.
The Declaration of the World Conference held in 1980 in Almaty is of extreme significance because it declares primary health care as the primary instrument for implementig the objectives of "Health for all by the year 2000" incentive.

PBH-2.519.
The Ottawa Charter is a particularly important document of the "Health for all by the year 2000" movement because it gives the definition of health promotion as well as the methods of its implementation.

PBH-2.520.
Intersectorial co-operation is an important method in the fulfillment of the objectives set by WHO because it facilitates the enhanced cooperation of different disciplines.

PBH-2.521.
The suicide statistics of different countries are readily comparable because the system of data collection and processing is totally uniform.

PBH-2.522.
Hungary is ranked the world leader as far as mortality due to suicide is concerned because mortality due to suicide in Hungary is higher than 25/100,000.

PBH-2.523.
More females die from cardiovascular disease than males because the cardiovascular mortality of males under the age of 60-64 years is twice that of females.

PBH-2.524.
The incidence of myocardial infarction (AMI) is increasing in progressively younger age-groups because in 1989 the incidence of AMI in males aged 40-44 was the same as the corresponding incidence in the 45-49 age group in 1988.

PBH-2.525.
Different disease models describe different levels of pathologic processes therefore, the prevention of the development of pathologic processes is the main objective of health development.

PBH-2.526.
Alcohol consumption interferes with driving because alcohol reduces coordination and prolongs reaction time.

PBH-2.527.
The evaluation of the psychosocial aspects of a disease is an insignificant component of the life course study because the necessary interventions implied by the results are non-medical.

PBH-2.528.
Maintaining good relations with self-help movements and self-care
groups is a component of social therapy because these groups may assist the successful elimination of diseases.

PBH-2.529. The assessment of physical activity is not considered among lifestyle factors because these are associated also with work activities.

PBH-2.530. Relation Analysis
In disease, the role of the patient changes in the family, at the job and in the social relationships because the patient is exempted from several responsibilities associated with his role.

PBH-2.531. The regular consumption of alcohol is not a risk factor of hypertension because this relationship could not be verified in epidemiologic studies.

PBH-2.532. In the USA, mortality due to stroke has decreased by more than 5% over the last decade because a national co-operation has been implemented to fight hypertension.

PBH-2.533. The appropriateness of a nation-wide screening program for diabetes can be questioned because manifest diabetes develops only in 2-3% of patients with impaired glucose tolerance.

PBH-2.534. Without regard to the type of the disease, the reduction of obesity is important in the prevention of diabetes because the correlation of obesity and diabetes has been demonstrated by epidemiologic studies.

PBH-2.535. The WHO definition of health, i.e. "health is the condition of harmony and complete stability" is extremely important because it acknowledges the significance of the influence of psychic and social factors on a healthy lifestyle.

ASSOCIATION QUESTIONS
Associate the following terms/statements marked by the letters A, B, C... with the corresponding statements/terms marked by and in the order given by the figures 1, 2, 3...
...for example: 1-C, 2-B, 3-A, 4-D. Put the answer as C, B, A, D!
(Note: Different statements can be associated with the same terms!!!)

PBH-2.536. Associate the following term(s) with their corresponding statement(s)!
A) Sensitivity
B) Specificity
C) Predictive value
D) Validity
E) Relative risk

1) indicates that the method or test in fact measures the targeted parameter
2) has a negative value in healthy individuals
3) has a positive value in ill individuals
4) indicates the risk of developing the disease of a given case if the individual exposes himself to the effects of certain risk factors.
5) indicates the prevalence of patients among the cases indicated positive by this method.

PBH-2.537. Associate the following term(s) with their corresponding statement(s)!
A) Case-control study
B) Cohort study
C) Cross-sectional study
1) starts with an unstratified sample
2) analyzes the incidence of risk factors in patient and control groups
3) examines both exposed and unexposed groups
4) none of the members of the examined groups have the disease
5) analyzes the incidence of risk factors in two groups
6) analyzes the presence of illness and risk factors in every individual
7) it is also called a retrospective study
8) it is also called a follow-up study

PBH-2.538. Associate the following term(s) with their corresponding statement(s)!
A) Lethality
B) Mortality
C) Age-specific mortality
D) Infant death-rate
E) None of the above
1) the ratio of infant mortality during the first year of life per 1000 live births
2) the most common populational measure of mortality
3) indicates the life-threatening nature of the disease
4) measures the mortality of certain age groups
5) indicates the mortality of populations with different age distribution

PBH-2.539. Associate the following term(s) with their corresponding statement(s)!
A) Life expectancy at birth
B) Probable life expectancy
C) Normal life expectancy
D) Average life expectancy
E) None of the above
1) the number of deaths per year
2) the average of the age of the members of a population alive at a given time
3) the age characteristic of most of the individuals deceased during the year
4) the possible length of life in years for a neonate, assuming that mortality conditions will not change
5) the period during which the number of individuals born in the same year is halved

PBH-2.540. Associate the following term(s) with their corresponding statement(s)!
A) Cardiovascular mortality
B) IHD mortality  
C) Mortality due to myocardial infarction  
D) Stroke mortality  
E) None of the above

1) it is responsible for about 53% of overall mortality  
2) it is responsible for 30% of overall mortality  
3) its prevalence has increased by 40% over the last 30 years  
4) more than half of this is comprised by death due to myocardial infarction  
5) the mortality rate of females is almost twice as high as that of males  
6) the mortality rate of males is almost twice as high as that of females  
7) the mortality due to this condition is higher than the average in rural populations  
8) the mortality due to this condition has decreased by one-half  
9) its lethality is almost 40%

PBH-2.541.
Associate the following term(s) with their corresponding statement(s)!
A) Mechanical biological concept  
B) Functional physiological concept  
C) Corticovisceral pathology  
D) Psychosomatic concept

1) the environment in its completeness is manifested by the complexity of social conditions  
2) concentrates on the method of processing social effects  
3) regards both health and disease as purely biological phenomena  
4) its essential principle is the regulative coordination of functions; disordered coordination results in the development of lesions

PBH-2.542.
Associate the following term(s) with their corresponding statement(s)!
A) Almaty Declaration  
B) Ottawa Charter  
C) Madrid Target Document

1) it defines the concept of health promotion  
2) it declares health as the inherent right of all human beings  
3) it challenges prevailing inequity regarding health and illness  
4) it endeavors to incite people to assume responsibility for their health  
5) it formulates concrete objectives for the European region  
6) it is the first to declare primary health care as the essential principle of health delivery,

PBH-2.543.
Associate the following term(s) with their corresponding statement(s)!
A) Intersectorial co-operation  
B) Primary health care  
C) Uniform public policy  
D) None of the above

1) it is the core principle of the restructuring of health care
2) it is a concept of a bipolar health delivery system
3) it is the conceptual basis for the introduction of the family practitioners’ system
4) the joint efforts of different social sectors for health improvement
5) state-social-economic and political theories, and practice observant of health considerations

PBH-2.544.
Associate the following term(s) with their corresponding statement(s)!
A) Health promotion
B) Disease prevention
C) None of the above

1) it regards health as the lack of disease
2) it is a medical model
3) it is a facilitatory and enabling approach
4) it is a complex consideration of health issues
5) a model of active participation
6) the application of experimental models in practice

PBH-2.545.
Associate the following term(s) with their corresponding statement(s)!
A) Precondition of health
B) Social factors important with respect to health
C) Component of the social network
D) Belongs to the domain of general population registries

1) a five level scale that takes the combination of the profession and social status into account
2) equal opportunities for all in preserving health
3) it is the fulfilment of essential human needs
4) a stable job and profits; social self-recognition
5) friends; school; colleagues
6) family members; spouse; children; a relationship with social care services
7) district nurse; social workers

PBH-2.546.
Associate the following statement(s) with their corresponding term(s)!
A) it is the lowest in social groups I and II
B) it is the lowest in social groups IV and V
C) there is no significant difference

1) Average life expectancy
2) Infant death rate
3) Proportion of non-smokers
4) Proportion of alcohol users
5) Proportion of overweight individuals

PBH-2.547.
Associate the following term(s) with their corresponding statement(s)!
A) Demographic review
B) Epidemiologic situation
C) Availability of health care
D) Community diagnosis
1) description and analysis of incidences and distributions regarding health and illness within the community
2) the description and analysis of marriages, divorces, live births, natural growth and losses
3) a survey method using descriptive health and community profiles to assess the health situation of a settlement, factory, institution or region
4) the analysis of the statistics on health care demand, utilization and availability within the community

PBH-2.548.
Associate the following term(s) with their corresponding statement(s)!
A) Hard risk factor
B) Soft risk factor
1) blood pressure
2) cholesterol level
3) lifestyle
4) family conditions
5) diabetes mellitus

PBH-2.549.
Associate the following term(s) with their corresponding statement(s)!
A) Medical model for risk factor theory
B) Social model for risk factor theory
1) risky behavior is determined by the social, cultural and economic environment
2) concentrates primarily on secondary prevention
3) concentrates on drug and behavioral therapy at the individual level
4) concentrates on the reduction and elimination of inequities
5) prefers population-wide intervention programs

ANSWER KEY (PBH-2)

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PSYCHIATRY (PSY-3)
TRUE-FALSE TYPE QUESTIONS
Put T for true statements and F for false statements!!!

PSY-3.1.
During family therapy, a more advisable approach is to tell each family member that they can change for the better, rather than to stigmatize them.

PSY-3.2.
In order to be more effective with a particular course of therapy, it is advisable not to have any preconceptions that can govern our therapeutic attempts.

PSY-3.3.
It is advisable to avoid taking the parent's role when consulting children who are neglecting their duties.

PSY-3.4.
In a partially separated family with children who are neglecting their duties, there is still a risk for strong loyalties among the divided family members.

PSY-3.5.
It is advisable to stay neutral rather than to become authoritative over the family during family psychotherapy.

SINGLE CHOICE QUESTIONS
Select the single best response to each of the following questions!!!

PSY-3.6
A doctor, who smokes, asserts that smoking is beneficial because it inhibits the development of obesity is using which of the following "defense" mechanisms?

A) dissociation
B) intellectualization
C) rationalization
D) reaction formation
E) projection

PSY-3.7
The most accepted hypothesis explaining the biological basis for schizophrenia is:
A) the transmethylation hypothesis
B) the double bind hypothesis
C) the serotonin hypothesis
D) the dopamine hypothesis
E) the endogenous opiate hypothesis

PSY-3.8.
A disorientation to time is characteristic of.
A) Korsakoff’s syndrome
B) an acute schizophrenic episode
C) hypomania
D) depressive psychosis
E) agoraphobia

PSY-3.10.
In attempting to teach a child to accomplish a new task one must:
A) reinforce the child immediately following completion of the task
B) reinforce the child, with a slight delay, following completion of the task
C) reinforce the child, after a marked delay, following completion of the task

PSY-3.11.
When a 5-year-old child "throws a fit", he/she is usually punished but at times the child gets what he/she wants. These fits are most likely to:
A) become less frequent
B) gradually cease
C) become continuous

PSY-3.12.
If praise, attention, and warm affection fail to act as means of reinforcement in a young schoolchild:
A) physical punishment should be introduced
B) the child should be warned
C) alternative means of reinforcement should be introduced, such as praising the child with chocolate and toys

PSY-3.13.
To properly develop a good behavior in a child, it is advisable to:
A) punish the child
B) reward the child  
C) both of the above  
D) none of the above  

PSY-3.15.  
In attempting to reinforce the behavior of a child, it is advisable to:  
A) punish the child  
B) praise the child  
C) both of the above  
D) none of the above  

PSY-3.16.  
Punishment is effective if:  
A) it does not generate aversion towards the punishing person  
B) it does not result in an escape reaction  
C) it decreases the necessity of further punishment  
D) it does not reinforce an aggressive behavior  
E) all of the above  

PSY-3.17.  
Punishment is effective if it is applied:  
A) immediately  
B) with a slight delay  
C) with marked delay  
D) none of the above  

PSY-3.18.  
In the following example, the best way to reinforce a child's behavior is to tell him/her:  
1) "Go to bed, I'll tell you a tale!"  
2) "I'll beat you if you don't go straight to bed!"  
3) "I'm happy that you've put your pyjamas on!"  
4) "If you don't go to bed, you can't have breakfast in the morning!"  

A) answers (1), (2), and (3) are correct  
B) answers (1) and (3) are correct  
C) answers (2) and (4) are correct  
D) all of the above  

PSY-3.19.  
Which of the following statements concerning the prognosis of homosexuality in males is correct?  
A) dreams of heterosexual activity are indicative of a better prognosis  
B) the prognosis is independent of the patient's age at the beginning of therapy  
C) the prognosis is independent of any childhood experiences with the other sex  
D) all of the above  
E) none of the above  

PSY-3.21.  
Important mechanisms in the development of the "ego" include:  
A) condensation  
B) rationalization  
C) defense
PSY-3.22.
Thumb sucking:
A) usually ceases by the first year of age
B) may normally be observed during sleep until the age of 3
C) is physiologically present during the first few months of life
D) is observed in 20% of children above the age of 6
E) all of the above

PSY-3.23.
The proportion of suicides which have already been preceded by
earlier suicide attempts is:
A) 10%
B) 20%
C) 50%
D) 60%
E) 100%

PSY-3.24.
The most common form of a learning disorder is:
A) difficulty in spelling words
B) difficulty in arithmetic tasks
C) a writing disorder
D) a reading disorder
E) none of the above

PSY-3.25.
Contraindications to lithium administration include:
A) an administration in combination with chlorpromazine
   (Thorazine)
B) the presence of a renal disease
C) any occurrence of the symptoms of schizophrenia
D) the presence of depression
E) an administration in combination with imipramine (Tofranil)

PSY-3.26
"Suggestion" as a form of psychotherapy is used in:
A) conversion disorder
B) child psychiatry
C) patients with a low IQ
D) all of the above
E) none of the above

PSY-3.27.
Perception without corresponding environmental stimuli is:
A) a hallucination
B) an illusion
C) a delusion
D) derealization
E) depersonalization

PSY-3.28.
The occurrence of which of the following symptoms would allow
differentiation between delirium and dementia?
A) an impaired judgment
B) a memory deficit  
C) an impaired consciousness  
D) an impaired process of thinking  
E) disorientation

PSY-3.29  
A loss of remote memory is a typical symptom of delirium tremens  
A) delirium tremens  
B) senile dementia  
C) schizophrenia  
D) Korsakoffs syndrome  
E) hysteria

PSY-3.30  
Disorders characterized by delusions include all of the following, EXCEPT:  
A) affective disorders  
B) organic mental disorders  
C) paranoid disorders  
D) personality disorders  
E) schizophrenic disorders

PSY-3.31.  
Early in the psychiatric interview, it is important for the physician to;  
A) inform the patient of the fee  
B) obtain details of any past psychiatric illnesses  
C) let patients talk about what is bothering them  
D) obtain information about the patient's mood  
E) record the family history

PSY-3.32.  
A typical exhibitionist:  
A) projects repressed homosexual impulses  
B) is impotent  
C) experiences loneliness and shame  
D) is older than 50  
E) is schizophrenic

PSY-3.33  
Factors determining an adult's gender identity include:  
A) parental attitudes about the patient's sex during childhood  
B) the availability of sexual partners  
C) endocrine factors  
D) the external genitals  
E) the sex chromosomes

PSY-3.34.  
Which of the following symptoms is least characteristic for schizophrenia?  
A) autistic thinking  
B) bizarre delusions  
C) hypnagogic hallucinations  
D) neologisms  
E) thought blocking

PSY-3.35.  
Physical processes involved in the development of the "superego" include all of the following EXCEPT:
A) identification  
B) internalization  
C) introjection  
D) isolation  
E) idealization

PSY-3.36.  
A "projection" mechanism is most characteristic for which of the following personality disorders?  
A) an anancastic personality  
B) a schizoid personality  
C) a hypomanic personality  
D) a paranoid personality  
E) an antisocial personality

PSY-3.37.  
Procrastination, scorning the efforts of others, forgetting appointments, duties and obligations are all examples of:  
A) splitting  
B) projection  
C) regression  
D) acting out  
E) passive aggression

PSY-3.38.  
Anxiety is a common symptom of all the following conditions, EXCEPT.  
A) hypoglycemia  
B) hypothyroidism  
C) pheochromocytoma  
D) porphyria  
E) hypocalcemia

PSY-3.39.  
The mortality rate of anorexia nervosa is:  
A) less than 1%  
B) 5-15%  
C) 20-30%  
D) 35%  
E) 50%

PSY-3.40.  
A "borderline personality disorder" is characterized by all of the following symptoms, EXCEPT:  
A) impulsivity and an unpredictable behavior  
B) identity disturbances  
C) mood instability  
D) withdrawal from social activity  
E) recurrent suicidal gestures and short psychotic episodes

PSY-3.42.  
Case Study:  
A 56-year-old male presents with symptoms of irritability and disinterest in his daily activities. At times, he is confused and forgetful. His gait is unsteady. The deep tendon reflexes are diminished. He frequently experiences tingling in his legs. The most likely diagnosis is:
A) hypothyroidism
B) a cerebellar tumor
C) multiple sclerosis
D) a vitamin B₁₂ deficiency
E) presenile dementia

PSY-3.43.
Bleuler's symptoms of schizophrenia (the four A's) include all of the following EXCEPT:
A) ambivalence
B) affective flattening
C) apathy
D) autism
E) loose associations

PSY-3.44.
Case Study:
A 25-year-old patient complains of hearing voices speaking about him and threatening him. The patient regards them as real and suffers from them. The most likely diagnosis is:
A) schizophrenia
B) alcoholic hallucinations
C) dementia
D) hysteria
E) debility

PSY-3.46.
Personality disorders are almost always:
A) manifested during adolescence
B) worse in old age
C) free of genetic-biologic influences
D) associated with good occupational functioning
E) seen intermittently during adult life

PSY-3.47
Case Study:
A 23-year-old woman complains of becoming occasionally anxious. These occurrences are associated with tachycardia and excessive sweating. The condition usually develops in the morning. Which of the following tests has to be performed urgently?
A) thyroid function tests
B) toxicological screening
C) determination of the serum sodium level
D) determination of the blood glucose level
E) determination of the serum ammonia level

PSY-3.49.
Patients suffering from which of the following disorders are most likely to be concerned with their diseases?
A) hypochondriasis
B) the different phobias
C) conversion neurosis
D) somatization syndrome (Briquet's syndrome)
E) aggravation
Case Study:
A middle-aged waiter was admitted to the psychiatric ward in a drunken state. While in the ward his behavior became bizarre and he gradually became disoriented to place and time. He sometimes acted as if he was taking orders or serving dishes. On examination he usually misinterpreted the antecedents and circumstances of his admission. He was unable to recall his answers to simple questions after a few minutes. He denies any hallucinations or delusions. The patient has had no prior psychiatric disorders. His relatives haven't found anything extraordinary about his behavior. The most likely diagnosis is:
A) alcohol withdrawal syndrome (delirium tremens)
B) acute paranoid schizophrenia
C) alcoholic hallucinations
D) alcohol amnestic syndrome (Korsakoff's syndrome)
E) manic phase (of bipolar disorder)

The clinical course of affective disorders is characterized by:
A) cyclic relapsing episodes
B) a slow progression
C) a slow progression occasionally interrupted by periods of acute relapses
D) acute relapses
E) dementia

The psychotherapy of schizophrenic patients includes all of the following, EXCEPT:
A) a warm, open relationship aiming to promote the patient's self-esteem and educating the patient about his/her disease
B) a supportive psychotherapy that focuses on resolving the problems of the patient in his/her everyday life
C) setting limits on the patient's behavior, including the consequences of his/her violent actions
D) encouraging socialization in order to build more extensive social relationships
E) encouraging the patient to express his/her anger and hostility as much as possible in the therapeutic relationship in order to reduce the intensity of these emotions outside the consulting office

Neurotransmitters believed to have a role in the pathophysiology of schizophrenia include all of the following EXCEPT:
A) dopamine
B) prostaglandin El
C) ascorbic acid
D) norepinephrine
E) serotonin

According to the DSM-III-R, the principal diagnostic difference between schizophrenia and a schizophreniform disorder is:
A) the time of onset of the psychotic symptoms
B) the duration of the disorder
C) the nature and variability of the psychotic symptoms
D) the presence or absence of the precipitating stressor
E) the premorbid personality

PSY-3.57.
Which of the following symptoms of schizophrenia is most likely to be acutely responsive to treatment with medications and other inpatient treatment methods?
A) auditory hallucinations
B) apathy
C) poverty of thought content
D) anhedonia
E) withdrawal from social relationships

PSY-3.58.
Case Study:
A 25-year-old female was brought to the hospital ward by ambulance. Upon examination she was febrile, confused, and a bizarre posture was observed. The results of blood and cerebrospinal fluid tests were normal. The patient was diagnosed as schizophrenic and is currently on chlorpromazine (Hibernal). Which is the most likely cause of her current symptoms?
A) an acute dystonic reaction
B) akathisia
C) tardive dyskinesia
D) a malignant neuroleptic syndrome
E) an allergic reaction to chlorpromazine

PSY-3.59.
Statements which are characteristic for the various psychotherapeutic methods include all of the following, EXCEPT:
A) these methods aim to relieve anxiety and to improve social integration
B) the theories concerning the application of the methods are specific for each of the psychiatric disorders
C) these focus on childhood events and experiences
D) impulsiveness and resistance develop between the physician and the patient
E) these methods all have a therapeutic aim and elicit a learning process in the patient

PSY-3.60
Which of the following tests is important for the differential diagnosis of organic and psychogenic impotence?
A) monitoring of the serum gonadotropine levels over 24 hours
B) nasopharyngeal EEG during sexual stimulation
C) night-time erections
D) projective tests
E) monitoring of any alterations in the testosterone levels

PSY-3.61.
Negative symptoms of schizophrenia include all of the following, EXCEPT:
A) flat affect
B) auditory hallucinations
C) lack of motivation and initiative
D) anhedonia
E) poverty of thought content

PSY-3.62.
A person who laughs one minute and cries the next without any clear stimulus is said to have:
A) a flat affect
B) euphoria
C) a labile mood
D) a labile affect
E) parathymia

PSY-3.63.
Hallucinations are symptoms of:
A) mood disorders
B) mental disorders
C) thought disorders
D) abnormal perception
E) disorders of concentration

PSY-3.64.
Delusion is characterized by all of the following statements, EXCEPT:
A) delusion is a belief that does not correspond to the experiences of the individual
B) delusions are common symptoms of schizophrenia
C) delusions are possible symptoms of affective disorders
D) delusions may be symptoms of an organic mental disorder
E) delusions may be eliminated by logical explanations

PSY-3.65.
Which of the following is the most common cause of the cessation of sexual activity in married couples?
A) aging
B) marital discord
C) physical illness
D) cultural prohibition
E) depression

PSY-3.66.
Someone who exhibits pathological jealousy, is suspicious about being tricked, and is concerned about hidden meanings is demonstrating signs of:
A) a schizoid personality
B) a paranoid personality
C) an antisocial personality
D) a narcissistic personality
E) none of the above

PSY-3.67.
A shop assistant who steals goods and explains it as a compensation for his low salary is using which of the following defense mechanisms?
A) intellectualization
B) overcompensation
C) rationalization
D) substitution
E) destruction
PSY-3.68.

**Case Study:**
A young man develops an irrepressible urge to wash his hair several times a day which he explains as a means of protection against infection from others. He assures everyone that he feels well but he becomes extremely anxious if he cannot wash his hair. The most probable diagnosis is:
A) automatism
B) compulsive personality disorder
C) hypochondriasis
D) compulsive thoughts
E) phobia

PSY-3.69.

Unconscious emotions generated by a physician during psychotherapy are best described by the term:
A) projection
B) impulse transmission
C) acting out
D) identification
E) introjection

PSY-3.70.

**Case Study:**
A 25-year-old woman who has extramarital affairs fears that her physician disapproves strongly of her behavior. This represents which of the following defense mechanisms?
A) denial
B) repression
C) reaction formation
D) isolation
E) projection

PSY-3.71.

Which of the conditions listed below is most commonly associated with a violent behavior?
A) an XYY chromosome anomaly
B) a low level of intelligence
C) an XO chromosome anomaly
D) epilepsy
E) none of the above

PSY-3.72.

**Case Study:**
A 15-year-old girl presents to the emergency room with severe weight loss. On examination she is cachectic, bradycardic, and hypotensive. The first course of action should be to:
A) determine the family dynamics
B) administer a high-protein and carbohydrate diet
C) draw blood for a serum electrolyte determination and then start intravenous feeding
D) arrange to have the patient admitted to the psychiatric ward
E) prepare for electroconvulsive therapy

PSY-3.73.

Based on the results of psychiatric epidemiological studies, the most common psychiatric disorder among the general population is:
A) depression
B) schizophrenia
C) alcoholism
D) phobias
E) dementia

PSY-3.74.
The ratio of psychiatric disturbances among patients who seek evaluation for somatic diseases is:
A) 10%
B) 20%
C) 33%
D) 50%
E) 90%

PSY-3.75.
Case Study:
A 21-year-old woman who presents with depressive symptoms in December reports a similar episode during late autumn. The most likely mechanism of her depression involves:
A) noradrenergic hyperactivity
B) diminished serotonergic activity
C) alterations in the diurnal rhythm
D) the deterioration of family relationships
E) none of the above

PSY-3.76.
Case Study:
A 40-year-old woman developed delusions during the past year that her husband was having an affair with her sister. She denies any hallucinations. Her emotions and her behavior correspond to the contents of the delusion. The most likely diagnosis is:
A) acute paranoid disorder
B) polie a deux (induced mental disorder)
C) paranoia
D) paranoid schizophrenia
E) schizophreniform disorder with a paranoid character

PSY-3.77.
Statements characteristic for the epidemiology of mood disorders include all of the following, EXCEPT:
A) the lifelong risk for bipolar disorders is 1%
B) depression may be manifested at any age
C) dysthymia (neurotic depression) is commonly associated with organic and psychiatric disorders
D) depression is more frequently diagnosed in men than in women
E) the risk for a major mood disorder is higher among family members of a diseased individual than among the general population

PSY-3.78.
Case Study:
A 20-year-old man is admitted to the hospital. He developed hallucinations and delusions of persecution three weeks ago. He is currently agitated. Possible diagnoses, based on the DSM-III-R, include all of the following, EXCEPT:
A) brief reactive psychosis
B) organic mental disorder
C) borderline personality disorder
D) schizophrenia
E) schizophreniform disorder

PSY-3.79.
The most important reason for monitoring the serum lithium level is:
A) to check on the patient's compliance
B) because the toxic dose is very close to the therapeutic level
C) because lithium is rapidly excreted from the body
D) because lithium is a salt, rather than a drug
E) none of the above

PSY-3.80.
Which of the following types of delusions is least likely to be present in an affective disorder?
A) delusions of grandeur
B) nihilistic delusions
C) delusions of poverty
D) hypochondric delusions
E) thought withdrawal

PSY-3.81.
The psychosocial rehabilitation of schizophrenic patients includes all of the following, EXCEPT:
A) the improvement of communicative skills
B) the improvement of everyday activities such as cleaning the house, preparing a meal, and management of financial duties
C) education in a new job in order to re-enter the workforce
D) encouragement to somehow contribute to controlling the affliction and health in the patient
E) a new and refreshing activity in order to promote well-being

PSY-3.82.
Dementia is characterized by all of the following symptoms, EXCEPT:
A) a gradual decline in cognitive functions (memory, orientation, abstraction)
B) aphasia, alexia, or agraphia
C) alterations in behavior (egocentrism, apathy)
D) a sudden decline in intellectual functions after a cerebrovascular accident
E) a decline in mental functions associated with focal neurologic symptoms

PSY-3.83.
Catatonic motor disorder is best defined as:
A) a marked hyperactivity which is commonly violent and aimless
B) a generalized muscle rigidity
C) waxy flexibility
D) stupor or mutism, without an organic cause
E) a severe psychomotor disturbance which cannot be attributed to an organic cause

PSY-3.84.
Drugs contraindicated in acute alcohol intoxication include all of the
A) diazepam (Seduxen)
B) phenobarbital (Sevenal)
C) disulfiram (Anticol, Antaethyl)
D) glutethimide (Noxyron)
E) haloperidol

PSY-3.85.
Common complications of alcoholism include:
A) cerebral damage
B) gastritis
C) suicide
D) polyneuropathy
E) all of the above

PSY-3.86.
Alzheimer's disease can be diagnosed by which of the following methods?
A) computerized tomography
B) EEG
C) laboratory tests
D) lumbar puncture
E) clinical judgement

PSY-3.87.
Organic mental syndromes include all of the following, EXCEPT:
A) delirium
B) dementia
C) amnestic syndromes
D) paranoid disorders
E) organic hallucinosis

PSY-3.88.
Diseases that lead to mental retardation and require genetic counselling include all of the following, EXCEPT:
A) Tay-Sachs disease
B) galactosemia
C) phenylketonuria
D) Down's syndrome
E) cerebral paralysis (Little's disease)

PSY-3.89.
The aim of methadone maintenance during the treatment of addiction is:
A) to detoxify the patient and then gradually withdraw the opiates
B) to treat the underlying psychological causes
C) to satisfy the "drug-hunger" of the addict in order to make it possible for him to deal with other aspects of his life
D) to use methadone as an opiate antagonist
E) to teach the addict about the dangers of narcotics

MULTIPLE CHOICE QUESTIONS WITH KEY ANSWERS / TYPE II
Every question or incomplete statement has only one answer in the following combinations:
A) if the answers 1, 2, and 3 are true
B) if the answers 1 and 3 are true
C) if the answers 2 and 4 are true
D) if only the answer 4 is true
E) if all the four answers are true
Select one of these key combinations!!

PSY-3.90.
Symptoms of a perception disorder include:
1) hallucination
2) depersonalization
3) illusion
4) perseveration

PSY-3.91.
Psychologic defense mechanisms are functions of the ego and:
1) protect the self from anxiety
2) are mobilized unconsciously
3) may be maladaptive
4) usually require psychotherapy

PSY-3.92.
Sleep patterns characteristic for major (endogenous) depression include:
1) frequent nightmares followed by awakening
2) waking up too early
3) a marked prolongation of the 3rd and 4th phases (delta phase) of sleep
4) a markedly decreased ratio of the REM phases

PSY-3.93.
Mourning is characterized by:
1) ideas of death
2) weight loss
3) insomnia
4) a duration of 2-6 months

PSY-3.94.
Functions of the ego include:
1) the regulation of intrapsychic conflicts
2) the regulation of instincts
3) reality testing
4) developing relationships with objects

PSY-3.95
A complete psychic evaluation should include inquiries about any:
1) suicidal gestures
2) homicidal ideas
3) delusional thinking
4) hallucinations

PSY-3.96.
Which of the following has an etiologic role in anorexia nervosa?
1) cultural influences
2) hypothalamic-pituitary abnormalities
3) parental over-regulation
4) schizophrenia

PSY-3.97.
Case Study:
A 35-year-old man complains of hearing voices at night, telling him
that he is a bad and guilty person. Having no other available information, which of the following conditions would you consider?
1) schizophreniform disorder
2) personality disorder
3) hypnagogic hallucinations
4) organic hallucinations

PSY-3.99.
Characteristics of a conversion (histrionic) disorder include:
1) mimicking an organic disease
2) expression of a psychological conflict
3) seeking other people's attention in order to gain their support
4) the patient's ability to control his/her symptoms voluntarily

PSY-3.100.
Case Study:
A 24-year-old man, wearing a white robe, claims to be a prophet. He wanders in the streets preaching about the end of the world. His speech is circumstantial, and he is very anxious. Select the most likely diagnosis:
1) antisocial personality disorder
2) schizophrenia
3) paranoid personality disorder
4) schizophreniform disorder

PSY-3.101.
Patients with a paranoid personality disorder are likely to have which of the following traits?
1) no sense of humor
2) an awareness of power and rank
3) they are proud about being objective
4) excessive vanity and concern about their appearance

PSY-3.102.
Factors indicative of a better prognosis in schizophrenia and schizophreniform disorder include:
1) a low level of distress at the time of the symptoms
2) the lack of the precipitating stressor before the onset
3) a schizoid premorbid personality
4) the first psychotic episode occurs after the age of 35

PSY-3.104
Which of the following statements concerning suicide are correct?
1) the ratio of suicides with a fatal outcome decreases with age
2) women die from suicide more often than men
3) a suicide can reliably be predicted by certain clinical features
4) a conversation with the patient about his/her ideas of suicide may protect the patient from being a potential victim

PSY-3.105
Psychotropic drugs that can cause addiction include:
1) benzodiazepines
2) amphetamines
3) meprobamate
4) butyrophenones

PSY-3.106
Case Study:
A 62-year-old man seeks evaluation for weakness, a loss of initiative, a loss of weight, and abdominal discomfort. He appears to be depressed. Possible diagnoses can include:
1) dementia
2) pain killer abuse
3) pancreatic carcinoma
4) hyperthyroidism

PSY-3.107.

Case Study:
A 36-year-old man is brought to the emergency room by the police. He has been caught speeding on the highway at night without his headlights on. On examination he is agitated and belligerent. He warned the physician and the policemen that he has "friends" in high places whom he is currently in contact with and that the policemen who have incarcerated him will be punished. Diagnostic possibilities can include:
1) hyperthyroidism
2) arsenic intoxication
3) amphetamine overdose
4) Addison's disease

PSY-3.108.
Cocaine addiction may be manifested as:
1) a sexual dysfunction in males
2) an increased need for sleep
3) severe anxiety and paranoid delusions
4) hallucinations

PSY-3.109.

Case Study:
A 67-year-old man is brought to the emergency room by the police for exposing himself in the nude to schoolchildren. There is no history of similar events in the past. Possible causes of this behavior include:
1) a petit mal seizure
2) Alzheimer's disease
3) digitalis intoxication
4) an intracranial tumor

PSY-3.110.
The usual causes of an inhibited female orgasm include:
1) a lack of information
2) major psychopathology
3) trauma from the first relationship
4) the sedative side-effects of medications

PSY-3.111.
Which of the following agents have an important role in the therapy of alcohol withdrawal delirium?
1) meprobamate and benzodiazepines
2) vitamin B complex
3) chlormethiazole (Heminevrin)
4) potassium and magnesium ions

PSY-3.112.
Patients suffering from a personality disorder:
1) may occasionally lose touch with reality
2) are frequently irritating
3) tolerate stress poorly
4) elicit strong negative reactions to physicians

PSY-3.113.
Characteristic features of a borderline personality disorder include:
1) warm interpersonal relationships
2) the patient exhibits signs of a strong desire for attention without
   any tendencies for reciprocation
3) the patient exhibits signs of well developed defense mechanisms
4) the patient shows no empathy in his/her relationships; idealizes
   or depreciates his/her partners

PSY-3.114.
Visual hallucinations are characteristic for which of the following
conditions?
1) acute alcohol abuse
2) (Korsakof's syndrome
3) alcohol hallucinations
4) delirium tremens

PSY-3.115.
Examples of delusional thinking include:
1) a strong belief that one's internal organs are "rotting" due to
   disease
2) seeing people who are dead or inanimate
3) a strong belief that co-workers are conspiring a plot against the
   patient
4) a strong impulse to tell obscenities in church

PSY-3.116.
Which of the following adult type traits originate from the "anal
period" of the psychosexual development?
1) stubborness
2) a strong urge for tidiness
3) stinginess
4) a low tolerance to stress

PSY-3.117.
If someone is said to be disoriented, they are most likely not to
know:
1) the date
2) where they are
3) the time
4) some famous people

PSY-3.119.
Dyspareunia is:
1) the lack of vaginal lubrication
2) the constriction of vaginal muscles
3) equally frequent among men and women
4) pain during intercourse

PSY-3.120.
Which of the following statements concerning the risk of fatal suicide
are correct?
1) women are at a higher risk than men
2) the risk for the patients above the age of 65 is higher than for those between 25-35-years-old
3) the incidence of suicide is higher during times of war
4) alcohol addicts are at a higher risk for suicide

Possible causes of organic anxiety disorders include:
1) the withdrawal of sedatives or sleeping pills
2) pheochromocytoma
3) an excessive use of caffeine
4) hypoparathyroidism

Most patients with an antisocial personality disorder:
1) lack a guilty conscience
2) change jobs frequently
3) have sexual partnerships devoid of emotions
4) have been brought up in unfavourable family conditions

Patients with a "type-A" personality usually exhibit which of the following characteristics?
1) impatience
2) hostility
3) driven quality
4) a high incidence of coronary heart disease

Correct statements about an histrionic conversion disorder include which of the following?
1) this disorder has primary and secondary advantages
2) a sudden and dramatic onset of symptoms
3) the patient is unable to control the symptoms voluntarily
4) paralysis and paresthesias do not respect the anatomical borders of innervation

Some undesirable complications of a somatization disorder (chronic neurosis) include:
1) the excessive use of drugs
2) secondary iatrogenic complications of invasive diagnostic interventions
3) an excessive dependence on health care
4) a frequent change of physicians

How does malingering differ from somatization disorders?
1) it occurs more rarely
2) this disease is more susceptible to therapy
3) malingering is not a psychiatric disorder
4) it may involve the abnormality of several organs

Symptoms of a presuicidal syndrome include:
1) flatness of affect
2) aggression towards one's self
3) suicidal ideation
4) fright of other people

PSY-3.129.
Researchers believe that anorexia nervosa is symptomatic expression of
1) psychosexual conflicts
2) psychological conflicts with the mother
3) impaired self-regulation
4) psychological conflicts with the father

PSY-3.130.
An effective therapy of a somatization disorder includes:
1) the continuous decrease of unnecessary medications
2) regular therapeutic settings
3) staying with the same physician
4) the administration of anxiolytics

PSY-3.132.
Which of the following statements concerning anorexia nervosa are correct?
1) it is usually manifested by the age of 13
2) the onset is delayed in boys when compared to girls
3) it is usually preceded by a diet
4) a suicide attempt is common as an initial manifestation

PSY-3.133.
Which of the following statements about the empirical risk for schizophrenia are correct?
1) if one of the parents is a schizophrenic, the risk for the disease among the children is 10-15%
2) the risk for schizophrenia among the siblings of a schizophrenic is 10-15%
3) if both parents are schizophrenic, the risk among the children is above 40%
4) concordance of monozygotic twins is above 90%

PSY-3.134.
Symptoms commonly present in all forms of schizophrenia and schizophreniform disorders include:
1) ambivalence and autism
2) disturbed affect
3) disturbed thought process
4) amnesia any. confabulation

PSY-3.135
Based on the results of recent research, neurotransmitters possibly involved in the pathomechanism of schizophrenia include:
1) dopamine
2) neuropeptides
3) gamma-aminobutyric acid (GABA)
4) optical isomers of dopamine

PSY-3.136
The anticholinergic side-effects of tricyclic antidepressants that are frequently observed, especially during the therapy of elderly patients
include:
1) tachycardia
2) constipation
3) the retention of urine
4) blurred vision

**PSY-3.137**

**Case Study:**
A 53-year-old woman underwent an operation for a fracture of the neck of the femur. On the second postoperative day she became agitated and incooperative. On the third day she was noted to have hallucinations and addressed the nurses by the names of her own children. Possible causes of her symptoms include:
1) alcohol withdrawal
2) intravenously administered penicillin
3) sepsis
4) general anesthesia

**PSY-3.138:**
A patient with a major depression is likely to exhibit which of the following symptoms?
1) negligence
2) agitation and anxiety
3) defensiveness
4) sadness

**PSY-3.139**
Tricyclic antidepressants and MAO inhibitors are effective for the treatment of
1) bulimia
2) compulsive personality disorder
3) anancastic disorder
4) atypical depression

**PSY-3.140**
The most characteristic symptoms of delirium tremens include:
1) tremor
2) sweating
3) blackouts
4) hallucinations

**PSY-3.141.**
Dysthymia is characterized by:
1) chronic fatigue
2) social withdrawal
3) insomnia
4) hypersomnia

**PSY-3.142.**
The DST (dexamethasone-suppression test) has limited usefulness in the diagnosis of depression because:
1) the patient is noncompliant
2) the plasma control levels are subject to diurnal variation
3) the test is too expensive for routine clinical use
4) many medical conditions give false positive results
Case Study: A 22-year-old artist, a few days after the death of his father from suicide, becomes euphoric and highly concerned about how he looks. He is hyperactive, restless, and has no insight into his condition. He says that he is extremely happy. Which of the following should be considered?
1) personality disorder
2) narcomania
3) a primitive reaction
4) manic or hypomanic syndrome

Common complications of alcoholism include:
1) cerebral damage
2) gastritis
3) hypertension
4) suicide

Drugs that can cause dependence include:
1) benzodiazepines
2) antihistamines
3) barbiturates
4) tricyclic and tetracyclic antidepressants

Which of the sexual disorders listed below are characterized by the statement that psychologically immature young males are usually aggressive to their “victims” in order to obtain sexual gratification?
1) transsexualism
2) homosexuality
3) erection disorder
4) exhibitionism

The most typical example of a simple phobia is a fear of:
A) heights
B) public transportation
C) dogs
D) being in crowds
E) social situations

Case Study: A 22-year-old patient, during an interview, recalled that she had seen two doves sitting on the window sill, which she recognized as a future sign of an important event that would take place in her life in two weeks time. This symptom should be regarded as a(n):
A) illusion
B) hallucination
C) delusion
D) neologism
E) incoherence
PSY-3.149
The most important process in the development of the ego is:
A) identification
B) projection
C) reaction formation
D) regression
E) repression

PSY-3.150.
Emotional reactions towards the physician, which reflect recent
experiences and relationships outside of the therapeutic setting, may be
defined as:
A) acting out
B) fixation
C) free associations
D) impulse transmission
E) anxiety

PSY-3.151.
Case Study:
A middle-aged woman is brought to the intensive care unit complaining
of thoracic pain. Despite the appropriate diagnosis and therapy
the woman died soon after. The husband begins to threatens the physician
that he will sue him. This behavior is an example of which of the
following defense mechanisms?
A) shifting
B) dissociation
C) overcompensation
D) reaction formation
E) regression

PSY-3.152.
Which of the following abnormalities is most characteristic for psychosis?
A) an abnormality of the thought process
B) schizophrenia
C) manic-depressive psychosis
D) reality testing is impaired
E) impulsiveness and illogical behavior

PSY-3.153.
A characteristic defense mechanism involved in paranoid symptom
formation is:
A) reality denial
B) conversion
C) projection
D) isolation
E) acting out

PSY-3.154.
Case Study:
An elderly, mildly confused man is brought to the emergency room by
his son. When asked about his problems the patient mentions “abnormalities
of function”. His answer to the next question is the same. This
is an example of:
A) coprolalia
B) coprophobia
C) fixation
D) perseveration
E) echolalia

PSY-3.155.

Case Study
A 29-year-old woman is brought to the emergency room by her husband. The woman complains of a sharp, intensive pain on the left side of her chest, accompanied by shortness of breath and palpitations. She fears that she had a heart attack. The results of her physical examination and blood tests are normal. The pain ceased after a few hours of observation and she was released.

3.155/1.
Similar situations have occurred previously, although an organic cause has never been demonstrated. What is the most likely diagnosis?
A) histrionic conversion reaction
B) malingering
C) anancastic neurosis (panic disorder)
D) hypochondriasis
E) compulsive personality disorder

3.155/2.
During these episodes of discomfort the patient talks about herself as if being an independent observer. This is an example of
A) derealization
B) depersonalization
C) illusions
D) hallucinations
E) alienation

PSY-3.156.

Case Study:
A 39-year-old salesman presents at the emergency room complaining of a severe headache localized to one side of his head. The physician should inquire about all of the following, EXCEPT:
A) hallucinations and delusions
B) any trouble with the authorities
C) any history of a loss of consciousness
D) the need for the prescription of a pain killer
E) alcohol abuse

PSY-3.157.

Symptoms which are necessary in order to diagnose a panic disorder include all of the following, EXCEPT:
A) the occurrence of at least three episodes in a 3-week period
B) the continuous presence of the symptoms for at least one month
C) the identification of an environmental stressor
D) an onset in young adulthood
E) the occurrence of spontaneous anxiety attacks

PSY-3.158.

Characteristics of conversion disorders include all of the following, EXCEPT:
A) their incidence in children is equal in both sexes
B) the symptoms are involuntary
C) their incidence is decreasing
D) the symptoms correspond to the pathophysiology of the disorders
E) they are more frequently diagnosed in women by midadolescence

PSY-3.159
The differential diagnosis of anorexia nervosa includes all of the following EXCEPT:
A) cancer
B) depression
C) Addison's disease
D) Cushing's disease
E) ulcerative colitis

PSY-3.160
Which of the following food constituents has to be avoided when prescribing a diet for patients treated with monoamino-oxidase inhibitors?
A) cholesterol
B) choline
C) lactose
D) tryptophan
E) tyramine

PSY-3.161.
Which of the following is a basic technique of psychoanalysis?
A) concentration
B) the resolving of inhibitions
C) empathy
D) free associations
E) hypnosis

PSY-3.162.
Case Study:
A 39-year-old woman was treated for many years for pelvic pain. She underwent numerous examinations, even a laparotomy, all of which failed to demonstrate an organic cause. The patient denies feelings of depression and other psychiatric problems but expresses anger at her physicians who are unable to cure her.

3.162/1.
What is the most likely diagnosis?
A) depressive disorder
B) somatization disorder
C) malingering
D) psychogenic pain syndrome
E) conversion disorder

3.162/2.
The differential diagnosis of her condition includes all of the following, EXCEPT:
A) malingering
B) schizophrenia
C) mood disorder (bipolar)
D) organic mental syndrome
E) conversion disorder
3.162/3.
Although the exact mechanism of this disorder is not known, there are some theories concerning the etiology. These include all of the following, **EXCEPT:**

A) the pain offers a possibility for the patient to avoid an undesirable situation  
B) the patient did not learn to verbalize her emotions during childhood  
C) the patient experienced a disease associated with severe pain during her childhood  
D) the patient attempts to mislead the physician in order to achieve a better quality of care  
E) the pain may be regarded as a stress reaction of the central nervous system

PSY-3.163.
Statistically recognized risk factors of schizophrenia include all of the following, **EXCEPT:**
A) a defective self development (defective self-object differentiation and an increased susceptibility to narcissistic injuries)  
B) cultural, economical, and psycho-social stressors present in the environment  
C) birth in early spring  
D) a schizophrenic amongst the patient’s relatives  
E) a history of a herpes simplex infection or viral encephalitis

PSY-3.164.
Which of the following is an unlikely precipitating cause of a psychotic episode later diagnosed as schizophrenia?  
A) alcohol abuse  
B) a severe psychosocial stressor  
C) a severe depressive episode  
D) a traumatic event in the patient’s life  
E) the use of a psychostimulating drug

PSY-3.165.
The most frequent type of schizophrenia among hospital admissions is:  
A) the autistic type  
B) the catatonic type  
C) the hebephrenic type  
D) the paranoid type  
E) the undifferentiated type

PSY-3.166.
Statements characteristic for bipolar mood disorders include all of the following, **EXCEPT:**
A) certain patients exhibit a congenital membrane defect affecting the lithium-transport in red blood cells  
B) each manic episode is followed by a depressive phase  
C) the sex ratio of bipolar disorders is roughly equal  
D) bipolar disorders usually have an onset before the age of 30  
E) the levels of norepinephrine and its metabolites are frequently found to be elevated in manic patients

PSY-3.167.
The leading symptom of affective disorders is a disturbance of
A) concentration and cognitive functions
B) mood
C) association and the thought process
D) initiatives and psychomotility
E) perception

PSY-3.168.
The period between falling asleep and the occurrence of the first REM phase (REM latency) is typically shorter in:
A) dementia
B) delirium tremens
C) schizophrenia
D) depression
E) alcoholism

PSY-3.169.
Which of the following focal organic mental disorders is characterized by a loss of initiative?
A) temporal lobe syndrome
B) injury of the frontal convexity
C) injury of the frontal base
D) Korsakoffs syndrome
E) diencephalic syndrome

PSY-3.170.
A slow wave activity in the EEG is usually detected in:
A) dementia
B) delirium
C) schizophrenia
D) alcohol withdrawal
E) HIV infection

PSY-3.171.
The risk for developing schizophrenia in a sister of a schizophrenic male child is:
A) 70%
B) 40%
C) 25%
D) 12%
E) 1%

PSY-3.172.
**Case Study:**
A 26-year-old man presents with a history of three discrete episodes of elevated mood and hyperactivity. He has got lost several times during these episodes. Once he had experienced a loss of vision in the right visual field, which was associated with diplopia for a short period.
The most likely diagnosis is:
A) multiple sclerosis
B) vitamin B12 deficiency
C) herpes encephalitis
D) systemic lupus erythematosus
E) progressive paralysis

PSY-3.174
Which of the following symptoms is indicative of barbiturate intoxication,
rather than drug withdrawal?
A) confusion
B) nystagmus
C) postural hypotension
D) disorientation
E) agitation

PSY-3.175.
Drugs causing depression as a side-effect, during regular use,
include all of the following, EXCEPT:
A) alpha-methyldopa
B) contraceptives
C) lithium carbonate
D) propranolol
E) reserpine

PSY-3.176
Case study:
A 60-year-old man is brought to the hospital by his relatives. He had come
recently to visit them from out of town. He heard voices and saw people
who were not there. He is unable to take care of his basic needs. His past
medical history is uneventful although his relatives have noticed that after his
wife had died he became withdrawn and less social than he had previously been.
Which of the following is the least likely diagnosis?
A) delirium
B) schizophrenia
C) dementia
D) depressive psychosis
E) mixed type organic mental syndrome

PSY-3.177
Case Study:
A 43-year-old woman has been found unconscious in her garage. The
car was running and the door to the garage was closed. Upon examination
she is confused. The most likely cause of her confusion is:
A) lead poisoning
B) hypoxia
C) hypoglycemia
D) gasoline inhalation
E) none of the above

PSY-3.178.
A deficiency of which of the following vitamins is an important
factor in the etiology of Korsakoff’s syndrome?
A) vitamin B₆
B) folic acid
C) nicotinamide
D) vitamin B₁
E) vitamin B₁₂

PSY-3.179
Case Study:
An 8-year-old girl, in a febrile state, assumes that the curtain in her
bedroom window is moving and an animal is trying to come into the
room through the window. This symptom is a typical example of:
A) delusion
B) fantasy
C) hallucination
D) illusion
E) phobia

PSY-3.180.
Case study:
A physician asks an elderly male patient what he had for supper the previous day. The patient asserts that he had his Christmas dinner together with his wife and children. This is late June now and the patient's wife died three years ago. Nobody visited the patient the previous day. The patient's reply is characteristic of:
A) circumstantiality
B) confabulation
C) déjà vu
D) a flight of ideas
E) an illusion

PSY-3.181.
Case Study:
A 30-year-old man complains of impotence. He thinks that strangers on the street are laughing at him. He is sure that they know about his problem and that they are probably responsible for the development of his condition. This complaint should be regarded as a sign of:
A) concreteness of thought
B) delusions of reference
C) imaginativeness
D) decline of affect
E) somatic delusions

PSY-3.182
Which of the following is a best example for a double bind?
A) Mary's parents want her to wait to get married until she finishes high school
B) John's parents encourage him to go to high school but want him to decide about his own life
C) Joe's parents encourage him to go to high school but they dissuade his sister from the same thing
D) Frank's parents encourage him to apply to a high school but frequently remind him of the financial sacrifices his education requires from the family
E) Sophie's parents encourage her to apply to a high school but recommend to her to work for a few years first in order to earn the costs of her education

PSY-3.183.
The psychic structure which regulates the conflicts between unconscious drives and the reality is the:
A) ego
B) ego-ideal
C) id
D) preconscious
E) superego

PSY-3.184.
Homosexuality is characterized by all of the following statements EXCEPT:
A) approximately 4% of men in the United States are exclusively homosexual
B) over one third of males have had an orgasm with a partner of the same sex at least once
C) there is a higher incidence of some mental illnesses, such as mood disorders, in homosexuals
D) there is a higher incidence of some somatic diseases, such as hepatitis, in homosexuals
E) attempts to change homosexuals to heterosexual preference are usually unsuccessful

PSY-3.185.
The examination of the victim of a violent suicide may reveal:
A) a low level of epinephrine in the cerebrospinal fluid
B) a low level of 5-hydroxy-indoleacetic acid in the cerebrospinal fluid
C) a high level of norepinephrine in the cerebrospinal fluid
D) a low level of dopamine in the brain tissue
E) an elevated level of most of the biogenic amines in the brain tissue

PSY-3.186.
The description: “attributing one’s own unacceptable motives and emotions to someone else” best characterizes:
A) fantasy
B) splitting
C) regression
D) projection
E) identification

PSY-3.187. Single Choice Question
Which of the following is a mature defense mechanism usually used by an adult and which helps social accommodation?
A) shifting
B) projection
C) avoidance
D) sublimation
E) violence

PSY-3.188.
Borderline personality disorder is characterized by all of the following, EXCEPT:
A) severe impulsiveness and unpredictable behavior
B) disturbances of identity
C) emotional lability
D) withdrawal from social relations
E) recurrent suicidal gestures and short psychotic episodes

PSY-3.189.
Violent behavior is most characteristic for which of the following conditions?
A) bipolar disease; manic type
B) anancastic neurosis
C) melancholia
D) somatoform disorder
E) compulsive personality disorder
Case Study:
A 27-year-old woman is brought to the emergency room complaining of shortness of breath, dizziness, and a tingling in her extremities. Careful examination fails to discover any organic abnormalities. Which of the following is the most likely cause of her symptoms?
A) situational reaction
B) endogenous anxiety
C) caffeine abuse
D) hyperventilation syndrome
E) post-traumatic stress disorder

Correct statements about agoraphobia include all of the following, EXCEPT:
A) the affected person experiences an intensive, irrational fear of leaving his/her home
B) the affected person realizes that the subject of his/her fear is irrational
C) it is effectively relieved by antidepressants
D) behavioral therapy focuses on the phobia and neglects the psychodynamics of the affliction
E) once a phobia is effectively eliminated, it will not re-occur

A major side-effect of monoamino-oxidase inhibitor antidepressant therapy is referred to as a "cheese reaction". Foodstuffs that may cause such a hypertensive crisis include all of the following, EXCEPT:
A) coffee and tea
B) poultry liver
C) smoked fish
D) legumes
E) beer and red wine

Case Study:
A middle-aged man becomes ill with Parkinson's disease. The prescribed medication fails to improve his motor abnormalities. His mood is depressed. He says he has lost his relish for life and the only thing he does is sleep. The first steps of managing this patient include:
A) to admit him to a psychiatric ward with respect to a possibility of suicide
B) reassuring the patient that the prescribed medications are effective in Parkinson's disease
C) a discussion with the patient about his troubles and inquiry about any suicidal ideations
D) referring the patient to a neurologist or a psychiatrist saying, "let them hear his story"
E) scheduling frequent therapeutic settings and calling the attention of the family members to the possibility of suicide

Case Study:
A 41-year-old man complains that life does not give him what he wants. He feels disappointed and unhappy. He was depressed for a while after his girlfriend left him 8 years ago. What is the most likely
diagnosis?
A) psychogenic depression
B) schizophrenia
C) bipolar disorder; depressive phase
D) dysthymia (neurotic depression)
E) cyclothymia

PSY-3.195.
Which of the following personality traits have commonly been found as characteristics of a premorbid personality preceding schizophrenia?
A) extreme dependence (strong relationship with the parents, fear of being far from home)
B) social withdrawal; an inability for close interpersonal relationships
C) insufficient socialization; cruelty to animals; pyromania; enuresis
D) extreme obedience; conformity; excellent academic results
E) none of the above

PSY-3.196.
Which of the following personality disorders is most likely to be associated with a mood disorder?
A) schizoid personality disorder
B) paranoid personality disorder
C) borderline personality disorder
D) avoidant personality disorder
E) antisocial personality disorder

PSY-3.197.
Case Study:
A 39-year-old man complains of severe anxiety. He feels like a stranger in his usual environment and settings. He has very strange thoughts and he has to fight to subdue them. The first step of the management of this patient is:
A) to have him admitted to a psychiatric ward
B) to ensure him that he has no mental disease
C) to explore the current situations of his life in order to determine the subsequent steps
D) to inquire about his childhood events
E) to prescribe anxiolytics and to excuse the patient from work

PSY-3.198.
If one of two monozygotic twins becomes ill with schizophrenia, the likelihood for the other twin to be affected is:
A) 95%
B) not any higher than the average likelihood in the general population
C) the same as for a non-twin sibling
D) between 35 and 70%
E) 100%

PSY-3.199.
An intoxication caused by tricyclic antidepressants is most similar to the one caused by:
A) amphetamines
B) atropine
C) barbiturates
D) the withdrawal of barbiturates
E) lithium

PSY-3.200.
Ever since antipsychotic drugs have been introduced, the usual institutional therapy of schizophrenic patients has changed considerably. These changes include all of the following, EXCEPT:
A) the possibilities of individual adjustment to drug therapy have increased
B) non-medication therapy is more extensively available
C) the average duration of medical care has decreased
D) the period necessary for appropriate therapy in a hospital ward has decreased
E) the number of re-hospitalizations has decreased

PSY-3.201.
Schizophrenia is characterized by all of the following symptoms, EXCEPT:
A) incoherence of thoughts
B) bizarre delusions
C) auditory hallucinations
D) Korsakoff's syndrome
E) parathyria

Which of the following neurotransmitters is believed to be deficient in Alzheimer's disease?
A) norepinephrine
B) gamma-aminobutyric acid (GABA)
C) serotonin
D) acetylcholine
E) dopamine

PSY-3.203.
The use of which of the following substances is most commonly associated with violent behavior?
A) heroin
B) cocaine
C) amphetamines
D) steroids
E) alcohol

PSY-3.204.
Correct statements about the interpersonal relationships of an alcoholic include all of the following, EXCEPT:
A) many good friends
B) good contact with people
C) a deep attachment to friends
D) short-lived relationships
E) a warm-hearted, helpful and responsible individual

PSY-3.205.
Common features of delirium and dementia include all of the following, EXCEPT:
A) impaired remote memory
B) distorted thought process
PSY-3.206.
Characteristics of delirium tremens include all of the following, EXCEPT:
A) an introductory grand mal seizure
B) auditory hallucinations associated with clear thoughts and
   proper orientation
C) tremors and sweating
D) blackouts
E) disorientation

PSY-3.207.
A heroin overdose is characterized by all of the following symptoms
EXCEPT:
A) mydriasis
B) hypotension
C) diminished reflexes
D) coma
E) respiratory depression

PSY-3.208.
Dementia is characterized by all of the following statements, EXCEPT:
A) demented patients are often depressed
B) the ability to generalize from past experiences and to recognize
   the relationship between similar situations is impaired
C) an early feature is an inability to recall events from the distant
   past
D) demented patients may experience hallucinations
E) Creutzfeldt-Jakob disease is a dementia caused by a slow virus
   infection

MULTIPLE CHOICE QUESTIONS WITH KEY ANSWERS / TYPE II
Every question or incomplete statement has only one answer in the
following combinations:
A) if the answers 1, 2, and 3 are true
B) if the answers 1 and 3 are true
C) if the answers 2 and 4 are true
D) if only the answer 4 is true
E) if all the four answers are true
Select one of these key combinations!!!

PSY-3.209.
Intelligence tests have which of the following characteristics?
1) they compare the performance of an individual as compared to
   a large group
2) they are influenced by culture
3) they do not measure an individual's entire intellectual capacity
4) they define an IQ of 100 as average

When attempting to treat a patient with a paranoid personality
disorder the physician should:
1) avoid setting limits
2) apologize quickly for any mistakes he/she may make
3) have a sense of humor
4) explain everything in detail

PSY-3.211
To obtain an appropriate sexual history, it is necessary for the physician to inquire about:
1) attitudes of the family about sex
2) any history of sexual abuse
3) the first sexual experience
4) current sexual functioning

PSY-3.213
Risk factors for a patient's violent behavior in a physician's office include:
1) a history of manic disease,
2) a history of suicide attempts
3) alcohol abuse
4) head trauma

PSY-3.215
Symptoms usually present in somatization disorder include:
1) dysmenorrhea
2) palpitations
3) anxiety
4) nausea

PSY-3.216
Patients suffering from a personality disorder, as opposed to those from neurosis, are to:
1) accuse others for their own problems
2) maintain a therapeutic relationship
3) exhibit certain abnormalities in adolescence
4) require psychotherapy

PST-3.217
Polysomnography has been useful in studying which of the following conditions?
1) ictal diseases
2) impotence
3) depression
4) schizophrenia

PSY-3.218
Which of the following statements concerning social deprivation are correct?
1) it may be associated with severe mental retardation
2) it may be associated with a severe personality disorder
3) it may be experimentally modelled in animals
4) it frequently occurs in poorly organized hospital wards

PSY-3.219
A patient with a paranoid personality usually:
1) becomes psychotic at times
2) restricts his emotions
3) avoids interpersonal conflicts
4) shows excessive sensitivity to the behavior of others

**PSY-3.220**
A Characteristics of neurotic depression include:
1) recurrent short hypomanic episodes
2) a sustained, low-level intensity of mood
3) unresponsiveness to therapy
4) a lack of psychotic symptoms

**PSY-3.221**
Which of the following statements concerning paranoid schizophrenia are correct?
1) the diseased patients rapidly lose their social abilities
2) the onset is earlier as compared to that in other diagnostic subgroups
3) the decline in cognitive functions is more rapid as compared to that in other diagnostic subgroups
4) hallucinations and delusions of grandeur are common manifestations

**PSY-3.222**
According to the DSM-III-R the diagnosis of schizophrenia requires:
1) that the symptoms be observed over a period of 6 months or more
2) a decline in the previous level of functioning
3) an onset before the age of 45
4) that the patient complains of auditory hallucinations

**PSY-3.223**
Positive symptoms of schizophrenia include:
1) flatness of thought
2) delusion of thought withdrawal
3) marked flatness of affect
4) auditory hallucinations

**PSY-3.224**
**Case Study:**
A 67-year-old woman with chronic obstructive pulmonary disease is brought to the hospital by her husband. Four times in the last month, she was found wandering about the yard in her bedclothes. Which of the following etiologic factors should be considered?
1) hypoxia
2) aminophylline intoxication
3) senile dementia
4) cerebrovascular disease

**PSY-3.225**
A manic state is characterized by which of the following symptoms?
1) diffuseness and self-assurance
2) holothymic hallucinations and delusions of grandeur
3) increased activity and a decreased need for sleep
4) specific precipitating causes preceding the onset of symptoms

**PSY-3.226**
Lithium carbonate therapy is useful:
1) in the treatment of an acute manic episode
2) to prevent the recurrence of depression
3) to prevent the recurrence of mania
4) in the treatment of acute depression

PSY-3.227.
Delirium tremens, in its initial phase, may be effectively prevented by:
1) meprobamate
2) benzodiazepines
3) chlormethiazole (Heminevrin)
4) barbiturates

PSY-3.228.
Characteristics of alcohol dependence include:
1) the need for drinking every day in order to maintain one's performance
2) the need to increase the amount consumed to elicit the same effect
3) tremor, sweating, and disorientation developing after two days of abstinence
4) two or more blackouts during an acute alcohol abuse period

PSY-3.229
Conditions which increase the risk of subdural hemorrhage include:
1) hypertension
2) advanced age
3) atherosclerosis
4) alcoholism

PSY-3.230.
Which of the following statements about transsexualism are correct?
1) it is an expression of homosexuality
2) crossdressing is necessary for sexual arousal
3) biologic factors have a significant role in its etiology
4) it is associated with early childhood developmental disturbances

PSY-3.231
The side-effects of tricyclic antidepressants include:
1) hypertension
2) dry mouth
3) diarrhea
4) blurred vision

PSY-3.232.
Cognitive psychotherapy of depression stresses which of the following?
1) drug and alcohol addiction
2) stressed interpersonal relations
3) disturbances of the norms of social activities
4) abnormalities of perception and the thought process

PSY-3.233.
Which of the following statements concerning juvenile suicide are FALSE?
1) the prevalence of juvenile suicide attempts has increased
2) impulsive patients are at a higher risk
3) the leading cause of death among adolescents is suicide
4) child abuse is usually not associated with suicide

PSY-3.234.
Correct statements about illusions include:
1) they are elicited by an environmental stimulus and negatively affect sensory discrimination
2) they are a misperception of an existing environmental stimulus
3) they are more frequently observed in organic mental disorders than in functional psychiatric illnesses
4) they are not always associated with psychoses

PSY-3.236.
Correct statements about psychiatric epidemiologic studies include:
1) at least 25% of the population suffers from some type of psychiatric disorder once during their lifetime
2) morbidity rates among females are higher than those among males
3) more men suffer from addiction than women
4) the prevalence of depression is grossly identical in both sexes

PSY-3.237.
Psychoanalytic theories state that defense mechanisms:
1) inhibit conflicts from becoming conscious
2) are frequently used as physiological tools in accommodation
3) are essential mechanisms of neurotic symptom formation
4) are mechanisms of resistance during psychotherapy

PSY-3.238.
Characteristics of personality disorders include:
1) a gradual flattening of the thought process
2) a normal sense of reality
3) delusions, observed over a long period
4) the possible occurrence of psychotic episodes

PSY-3.239.
Childhood experiences of criminals and people with antisocial behavior usually include:
1) a discrepancy between the words and behavior of their parents
2) the inconsistent application of praise and punishment
3) the reinforcement of an antisocial behavior
4) lack of one of the parents

PSY-3.240.
The initial therapy of conversion disorder includes:
1) the analysis and the discussion of the improvement of any stress symptoms
2) assuring these patient that their symptoms will improve
3) confirming to these patient that their prognosis is good
4) a confrontation with psychologic issues

PSY-3.241.
Antidepressant-type therapy may be of use in which of the following conditions?
1) bulimia
2) affective disorders
3) compulsive personality disorder
4) anancastic disorder

PSY-3.242.
Primary (psychologic and sociopsychologic) disease advantages include which of the following?
1) the disease elicits attention and care in the environment
2) affective conflicts are repressed from consciousness
3) the disease satisfies an unconscious need for dependency
4) the patient is given all the excuses a society can offer

PSY-3.243.
Which of the following defense mechanisms are common for antisocial, borderline, and histrionic personality disorders?
1) dissociation
2) denial
3) splitting
4) acting out

PSY-3.244.
Case Study:
A 29-year-old boy complains of attacks associated with severe anxiety and, fears of having them again. Which of the following medications may be effective in his condition?
1) haloperidol
2) imipramine (Melipramin)
3) meprobamate (Andaxin)
4) diazepam (Seduxen)

PSY-3.245.
Delusions are best defined as false considerations which:
1) persist for a long time despite being obviously unrealistic
2) originate from the misinterpretation of existing external stimuli
3) appear to be real to the individual
4) are pathognostic for schizophrenia

PSY-3.246.
Case Study:
A 17-year-old boy is brought to the emergency room by his father. The father reported that his son had taken three tablets of diazepam (Seduxen) in a suicide attempt. The boy minimized the episode, saying that he was just upset about school. The father became angry at his son for making such a fuss over nothing. The nurses started making jokes about the three diazepam “suicide”. The father was impatient to take his son back home. Both were resistant to a psychiatric evaluation.

3.246/1.
Since the overdose was not life threatening, the most appropriate treatment at this time would include:
1) calling other family members to the hospital
2) reporting the event to the boy's school and obtaining information about his academic problems
3) encouraging the father and son to stay and to be interviewed individually
4) encouraging the father to keep an eye on his son

3.246/2.
Additional therapeutic approaches at this time would include:
1) initiating antidepressant therapy
2) warning the father to hide any medications kept at home
3) giving the son an excuse from school for a few days
4) suggesting a family consultation to relieve any present tensions
The son remained silent and the father insisted on going home. The following day the boy was found dead from a self-inflicted gunshot. This case represents common errors in evaluating a suicide attempt, including:
1) not adequately evaluating the son's emotions
2) not appreciating what the first suicide attempt meant to the son and his father
3) not assessing adequately the father's capacity to support his son
4) not hospitalizing the patient, even if it was against his will

PSY-3.247.
Which of the following symptoms are indicative of major depression?
1) a loss of appetite; dyssomnia; disturbances of sexual function
2) abandoning one's previous social positions and roles in occupation and in the family
3) any suicidal ideation or attempt
4) any abnormalities of the perception of reality, delusions, hallucinations and confusion

PSY-3.248.
Conditions that may be associated with the catatonic syndrome (rigidity, mutism, catalepsia, waxy flexibility) include:
1) an affective disorder
2) viral encephalitis
3) hypnosis
4) schizophrenia

PSY-3.249.
Uncommon side-effects of tricyclic antidepressant therapy include which of the following?
1) a dry mouth
2) tremor
3) constipation
4) extrapyramidal movement disorders

PSY-3.250.
Which of the following somatic diseases may be associated with a depression syndrome?
1) pancreatic carcinoma
2) hypertension
3) hypothyroidism
4) peptic ulcer disease

PSY-3.251.
Which of the following medications are capable of eliciting mania?
1) amphetamines
2) tricyclic antidepressants
3) corticosteroids
4) reserpine

PSY-3.252.
Characteristics of a developing schizophrenia include:
1) sufficient social functioning before the onset of the disease
2) a family history of psychosis
3) a sudden onset of the associated symptoms
4) a low socioeconomic position

PSY-3.253.
Psychological tests that cannot be used alone to diagnose schizophrenia include:
1) Rorschach test
2) Minnesota Multiphasic Personality Inventory (MMPI)
3) Thematic Apperception Test (TAT)
4) MAWI

PSY-3.255.
Atherosclerotic (multi-infarct) dementias are characterized by:
1) associated internal and neurologic symptoms
2) numerous malacic foci in the brain
3) a focal loss of memory
4) a dominant inheritance pattern

PSY-3.257.
Case Study:
A 45-year-old man is admitted to the surgical ward. When interviewed by the nurse he states that he is married, is a father of three boys, and that he lives with his family. He had previously told his physician that he had been living with his father since his girlfriend and her two children had left him. When asked about these contradictions he became confused. Conditions that are likely to account for the patient's confabulation include:
1) Korsakoff's syndrome
2) diabetes mellitus
3) presenile dementia
4) Addison's disease

PSY-3.258.
Types of brain damages that are associated with a violent behavior include:
1) encephalitis
2) birth trauma
3) mild traumas to the skull
4) epileptic grand mal seizures

PSY-3.259.
Wernicke's encephalopathy is characterized by:
1) a sudden onset
2) nystagmus and ophthalmoplegia
3) a somnolent state
4) pathologic changes in the mamillary body

PSY-3.260.
Characteristic symptoms of atypical (pathologic) binges include:
1) actions that are not characteristic for the individual in other situations
2) visual hallucinations
3) amnesia
4) associated epileptiform seizures
Which of the following statements concerning interrelationships between anxiety and depression are correct?

1) many depressed patients are anxious
2) many patients with a panic disorder will develop depression
3) the same therapy may be useful in both depression and anxiety
4) hereditary transmission is recognized in both depression and panic disorder

MULTIPLE CHOICE QUESTIONS / TYPE I
Select the correct answers to the following questions!!!
...each question may have more than one correct answer.

Which of the following conditions are associated with mutism?
A) alcohol withdrawal
B) conversion neurosis
C) catatonic schizophrenia
D) depression
E) Ganser's syndrome

Echolalia is characteristic for:
A) catatonic schizophrenia
B) anorexia nervosa
C) Alzheimer's disease
D) infantile autism
E) petit mal epilepsy

Characteristic symptoms of schizophrenia include:
A) compulsive thoughts
B) progressive dementia
C) depersonalization
D) waking up early in the morning
E) thought withdrawal

Which of the following symptoms or findings suggest a poor prognosis in acute schizophrenic psychosis?
A) an IQ above the average
B) flatness of affect
C) an abrupt onset
D) a normal premorbid personality
E) marked thought disorder

Characteristic symptoms of morphine withdrawal include:
A) excessive yawning
B) hypotension
C) muscle spasms
D) dry conjunctiva
E) diarrhea

PSY-3.262.

PSY-3.263.

PSY-3.264.

PSY-3.265.

PSY-3.266.

PSY-3.267.
Which of the following statements is characteristic for tardive dyskinesia?
A) recent phenothiazine therapy is usually found in the history
B) the intramuscular injection of benztropine rapidly relieves the symptoms
C) grimacing is typical
D) intentional tremor is diagnostic for the condition
E) the administration of phenothiazine may precipitate the attack

PSY-3.268.
Grandious delusions may occur in which of the following conditions?
A) schizophrenia
B) frontal lobe tumor
C) manic syndrome
D) compulsive neurosis
E) amphetamine intoxication

PSY-3.269.
Characteristic symptoms of acute manic psychosis include:
A) lack of insight
B) flight of ideas
C) confabulation
D) distractibility
E) depression in the family history

PSY-3.270.
Characteristic symptoms of depression include:
A) diminished concentration
B) hallucinations
C) hypochondriasis
D) delusions of persecution
E) weight loss

ANSWER KEY (PSY-3)

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PED-4.2.
All of the following statements regarding amoebiasis (Entamoeba hystolitica infection) are correct, EXCEPT:
A) the disease is transmitted by the ingestion of cysts
B) digestive enzymes release trophozoites from the cysts
C) bacteria of the intestinal flora also contribute to the intestinal damage caused by the trophozoites
D) the intestinal lesions are superficial
E) hepatic abscesses area common complication

PED-4.3
All of the following statements regarding maple syrup urine disease are correct, EXCEPT:
A) newborns are symptomless at birth
B) early symptoms include difficulties of feeding, irregular respiration and a weak Moro reflex
C) spasms are rarely seen
D) the time of the onset of symptoms is the third to fifth day after birth
E) the disease is associated with a branched-chain ketoaciduria

PED-4.6
All of the following statements concerning congenital adrenal hyperplasia are correct, EXCEPT:
A) cortisol production is elevated in the second week following
B) the overproduction of androgens causes masculinization of the external genitals in females
C) the acute sodium deficiency adrenal crisis is due to deficient aldosterone production
D) these infants have a decreased appetite and somatic growth is impaired
E) an excessive sodium deficiency causes severe water loss and dehydration

PED-4.7.7
All of the following statements about the adrenogenital syndrome are correct, EXCEPT:
A) androgen hypersecretion in the adrenal medulla causes virilization and increased protein anabolism
B) virilizing adrenal tumors are rarely palpable, but they do dislocate the kidney
C) the urinary 17-KS levels are decreased
D) virilizing adrenal tumors do not cause excessive cortisol production
E) the skeletal muscles are well developed in both boys and girls

PED-4.8.
The most likely cause of goiter in a newborn is:
A) the maternal consumption of goitrogenic substances (foods)
B) congenital hypothyroidism
C) a severe peroxidase defect
D) an abnormality of the thyrolingual duct
E) congenital thyroiditis

PED-4.9.
All of the following statements about heart sounds in children are correct, EXCEPT:
A) a third heart sound is commonly detected during childhood
B) the second heart sound is generated by the closing of the semilunar valves
C) the intensity of the first heart sound decreases if the ejection fraction increases
D) a fourth heart sound can only be heard if ventricular ejection is impeded
E) the origin of normal heart sounds is obscure

PED-4.10.
Which of the following would differentiate most clearly between a venous hum and the murmur caused by a patent ductus arteriosus?
A) the site of auscultation
B) auscultation during systole and diastole
C) a venous murmur is always soft
D) altering the patient's head position diminishes or accentuates the intensity of the murmur
E) the intensity of the murmur is accentuated during exercise

PED-4.11
During the treatment of acute diarrhea, hypernatremic dehydration develops, if:
A) the amount of fluid received orally is insufficient
B) the sodium concentration of the fluid received orally is 80-90 mmol/l
C) the amount of fluid administered orally is insufficient and the patient is oliguric
D) bacterial toxins, if present, exert a sodium retaining effect
E) the sodium concentration of the oral rehydration fluid is 40-60 mmol/l

PED-4.12.
Rectal prolapse is a possible complication of all of the following conditions, EXCEPT:
A) cystic fibrosis
B) severe malnutrition
C) whooping cough
D) chronic dysentery
E) enterobiasis

PED-4.13.
All of the following statements about congenital obstruction of the upper gastrointestinal tract are correct, EXCEPT:
A) vomiting might become continuous even without feeding
B) the obstruction is frequently associated with polyhydramnios
C) in the initial phases of the obstruction, meconium can pass
D) the vomit is always stained with bile

PED-4.14.
Which of the following symptoms is not characteristic for progeria?
A) mortality rate is highest at the age of 14
B) the usual causes of death are cardiac and cerebrovascular abnormalities
C) osteoarthritis and cataract are possible complications
D) the affected child's father is usually old
E) no effective therapy is presently available

PED-4.15.
All of the following statements concerning the incidence of the sudden infant death syndrome (SIDS) are correct, EXCEPT:
A) the incidence of the sudden infant death syndrome is the highest at the age of 5-6 months
B) it is more frequent in families with poor social conditions
C) the incidence is higher among the subsequent siblings of SIDS victims
D) the incidence is higher among girls

PED-4.16.
Bone age is advanced:
A) in hypothyroidism
B) in those with poor social conditions
C) in congenital adrenal hyperplasia
D) in familial dwarfism
E) as an effect of long-term cortisone therapy

PED-4.17.
Which of the following statements regarding acute lymphoblastic leukemia is valid?
A) the tumor cells react with anti-B-cell antiserum
B) the prognosis is better if, in the initial phase, the white blood cell count is high
C) a marked splenomegaly occurs
D) disseminated intravascular coagulation is a common complication
E) acute lymphoblastic leukemia is predominantly a childhood disease

PED-4.18.
Which of the following is a typical symptom of Henoch-Schönlein purpura?
A) polyarthralgia
B) jaundice
C) a purpuric skin rash involving the face
D) a decreased serum complement level
E) a prolonged bleeding time

PED-4.19.
A possible cause of frequent pulmonary infections in a neonate is:
A) cystic fibrosis
B) hypogammaglobulinemia
C) chronic granulomatous disease
D) all of the above

PED-4.20.
The risk of a mother over the age of 40 to give birth to a baby with Down's syndrome is approximately:
A) 1:2,000 live births
B) 1:4,000 live births
C) 1:40 live births
D) 1:400 live births
E) 1:800 live births

PED-4.21.
The main cause of neonatal mortality is:
A) septicemia
B) bleeding
C) pulmonary hyaline membrane disease with resorptional atelectasis
D) bronchopneumonia
E) cerebral malformation

PED-4.22.
The overall incidence of Down's syndrome is approximately:
A) 1:200 live births
B) 1:5,000 live births
C) 1:100 live births
D) 1:700 live births
E) 1:1,000 live births

PED-4.23.
The frequency of phenylketonuria is approximately:
A) 1:1,000 live births
B) 1:100,000 live births
D) 1:70,000 live births
E) 1:15,000 live births

PED-4.24.
The determination of the white blood cell count and the differential blood count in a varicella infection typically reveals:
A) nothing abnormal
B) a marked leukopenia
C) a marked eosinophilia
D) a marked lymphopenia
E) a marked leukocytosis

PED-4.25.
Which of the following statements regarding hypertrophic pyloric stenosis is valid?
A) the disease is manifested during the first few days of life
B) metabolic acidosis is characteristic
C) the disease is manifested during the first 4-6 weeks of life
D) bilious vomit is a characteristic finding

Which of the following is a rare symptom of acute appendicitis?
A) epigastric pain radiating to the right lower quadrant
B) nausea, vomiting and moderate fever
C) diarrhea
D) leukocytosis (the white blood cell count is approximately 14,000 G/1)
E) tenderness at McBurney's point

PED-4.27.
A transient prolongation of the PR interval on the ECG is detected in:
A) acute rheumatic fever
B) digitalis therapy
C) massage of the carotid sinus
D) all of the above
E) none of the above

PED-4.28.
During which childhood age is the onset of acute lymphoblastic leukemia most frequent?
A) 10-12 years
B) the neonatal period
C) adolescence
D) 3-5 years
E) 6 months

PED-4.29.
The most frequent cause of urinary tract infections in a young girl is:
A) bacterla which ascend through the urethra and the lower urinary tract
B) bacteria penetrating from adjacent organs via the lymphatic vessels
C) direct extension from adjacent organs
D) hematogenic dissemination

PED-4.31
A cerebral abscess most frequently occurs in the bacterral meningitis that is caused by:
A) Meningococcus
B) Pneumococcus
C) Streptococcus
D) Haemophilus influenzae

PED-4.32.
Characteristics of hypertonic dehydration in infancy include all of the following, EXCEPT:
A) a loss of consciousness
B) less decreased skin turgor relative to the severity of the
dehydration
C) abdomen is lardaceous to touch
D) serum sodium concentration is above 145 mmol/l
E) central nervous system complications, are relatively frequent

PED-4.33.
The inheritance patterns of the muscular dystrophies are markedly different. The inheritance of progressive muscular dystrophy is:
A) sex-linked recessive
B) autosomal dominant
C) autosomal recessive
D) sex-linked dominant
E) autosomal recessive and sex-linked recessive

PED-4.34.
All of the following statements about a child with encopresis are correct, EXCEPT:
A) the prevalence of encopresis in the general child population is 1-3%
B) the prevalence of encopresis among children with psychiatric abnormalities is 5-7%
C) the etiologic background is a sensitivity to gluten
D) it is more common during daytime than in the night
E) impaction of the stool and constipation are frequently associated, up to 80-95% of all cases

PED-4.35.
All of the following conditions can be diagnosed prenatally, EXCEPT:
A) arginino-succinic acidemia
B) a cystathionine synthase defect
C) Hunter's syndrome
D) the Lesch-Nyhan syndrome
E) the Guillain-Barré syndrome

PED-4.36.
From which of the following laboratory data is it possible to differentiate between a hypothalamic-pituitary secondary hypothyroidism and primary hypothyroidism?
A) a low serum T4 level and normal TSH levels
B) an elevated serum T4 level and low TSH levels
C) a low serum T4 level and elevated TSH levels
D) an elevated serum T4 level and elevated TSH levels
E) a low serum T4 level and elevated TSH levels

PED-4.37.
All of the following diseases are associated with an increased frequency of some histocompatibility antigens, EXCEPT:
A) type I, insulin dependent diabetes mellitus
B) celiac disease
C) membranoproliferative glomerulonephritis
D) rheumatoid arthritis
E) ankylosing spondylitis

PED-4.38.
Bleeding, due to thrombocytopenia occurs if the platelet count is less than:
A) 150,000 /ul
PED-4.39. Possible causes of a tall stature in childhood include all of the following, EXCEPT:
A) an eosinophilic adenoma of the pituitary
B) a chromophobic adenoma of the pituitary
C) Marfan syndrome
D) Hand-Schüller-Christian disease

PED-4.40. Now, that the long term prognosis of the acute leukemia of the childhood improved considerably during the last ten years, there is increasing interest concerning the "hidden places" where malignant cells may survive. Which of the following is regarded as a "hidden place"?
A) the muscles and bone
B) the skin and mucous membranes
C) the testis and the central nervous system
D) the pancreas
E) the liver

PED-4.41. Possible causes of a fever of unknown origin include all of the following, EXCEPT:
A) pyelonephritis
B) subacute bacterial endocarditis
C) Salmonella enteritis
D) hypothyroidism
E) thyroiditis

PED-4.42. Zinc deficiency is a possible complication of all of the following conditions, EXCEPT:
A) acrodermatitis enteropathica
B) Hirschprung's disease
C) celiac disease
D) phenylketonuria
E) kwashiorkor

PED-4.43. In which case is the newborn considered live-born?
A) if the body mass exceeds 750 g
B) if the body mass at birth exceeds 500 g
C) if the heart beats and the newborn breathes and moves
D) if any of the life functions are detectable after birth

PED-4.44. In which of the following cases is the newborn with a low birth weight considered to be a premature newborn?
A) if the birth weight is less than 2,500 g
B) if signs of intrauterine retardation are detected
C) if the gestation period is shorter than 37 weeks
D) in cases of strong difficulties to adaptation (cooling, acidosis)

PED-4.45.
Which of the following age groups does the term 'post-neonatal mortality' refer to?
A) 6-11 months
B) 3-11 months
C) 28-364 days
D) 7-364 days

PED-4.46.
The factors which have the most disadvantageous influence on neonatal mortality in developed countries are:
A) frequent enteral infections
B) congenital anomalies
C) accidents
D) malignancies

PED-4.47.
The number of the human haploid chromosomes is:
A) 22
B) 23
C) 44
D) 46
E) 48

PED-4.48.
Case Study:
The parents of a child who is suffering from a metabolic disease, characterized by an autosomal recessive inheritance pattern, ask for your advice. They intend to have a second baby. Which of the following considerations is INCORRECT?
A) the phenotype of 75% of the potential offspring will be normal
B) the genotype of 25% of the potential offspring will be normal
C) the genotype of 50% of the potential offspring will be normal
D) 50% of the offspring will be heterozygous

PED-4.49.
All of the following statements concerning a sex-linked recessive inheritance pattern are correct, EXCEPT:
A) the disease only affects boys
B) the father of the diseased sons might be affected
C) only girls can be carriers
D) the diseased boys might have diseased grandfathers
E) not all of the daughters of a carrier mother will be carriers

PED-4.50.
All of the following statements concerning Down's syndrome are correct, EXCEPT:
A) the expected average life span is 20 years if no organ abnormality is present
B) males are sterile, females are fertile
C) the IQ value of the patients ranges considerably but rarely exceeds 60
D) 3-4% of these patients suffer from the translocational type of the disease
PED-4.51.
Which process is faster during the first month of life?
A) an increase of height  
B) an increase of weight

PED-4.52.
How much is the head circumference of a mature, well-developed 6-infant?
A) 43 cm  
B) 38 cm  
C) 46 cm  
D) 50 cm

PED-4.53
What is the difference in the blood constitution between a 24-hour-old newborn and a healthy, 24-month-old child?
A) the newborn exhibits a higher hemoglobin level and a higher white blood cell count  
B) the newborn exhibits a higher hemoglobin level and a lower white blood cell count  
C) the newborn exhibits a lower hemoglobin level and a higher white blood cell count  
D) the newborn exhibits a lower hemoglobin level and a lower white blood cell count

PED-4.54.
Case Study:
An 11-month-old infant is referred to you. The infant cannot sit up or stand up, but crawls and plays with objects, understands plenty of words and commands. The somatic growth is apparently normal. After careful examination, the infant's psychic development is found to be normal and an organic neurologic disorder is excluded. What would be your advise to the parents?
A) to observe the child and repeat the examination at a later date  
B) to elevate the dose of the regular vitamin D  
C) although the infant's hip joints have been found to be normal in a physical examination, an x-ray of the hip joint is ordered  
D) curative gymnastics should be recommended

PED-4.55.
At what age is the head size to body height ratio the highest?
A) in the newborn  
B) in a 6-year-old child  
C) in the adolescent  
D) in the adult

PED-4.56
Case Study:
A 2-week-old infant is brought to your office. Two days ago the baby vomited. The baby also has diarrhea. The mother tells you that the infant's appetite is good, and he voids large amounts of urine (the nappy is always wet). On observation the infant is alert. What is the most likely diagnosis?
A) sepsis  
B) gastroenteritis  
C) intestinal malrotation  
D) volvulus of the small intestine
E) overfeeding

PED-4.57.
How much is the energy requirement of a 4-week-old, normally developing infant?
A) 100-150 kcal/kg/day
B) 200-250 kcal/kg/day
C) 300-350 kcal/kg/day

PED-4.58
Case Study:
A breast-fed baby is developing well. The baby's mother has no problem with lactation. At what age would you introduce vegetable puree to the diet?
A) at the age of 6 weeks.
B) at the age of 6 months
C) at the age of 9 months
D) at the age of 11 months

PED-4.59.
How much fluid does a 1-month-old, healthy infant require daily if the body weight is 3,400 g and the external temperature is 25°C?
A) 300 ml
B) 500 ml
C) 800 ml
D) 1,200 ml

PED-4.61.
Case Study:
The mother of a 2-week-old baby has no or very little breast milk. Which of the following preparations would you tell the mother to use?
A) pasteurized mother's milk
B) 50% diluted cow's milk
C) Isomil (soy-based formula)

PED-4.62.
What is the protein requirement of a 2-month-old infant?
A) 1 g/kg/day
B) 2.5 g/kg/day
C) 10 g/kg/day
D) 4.5 g/kg/day

PED-4.63.
With what and in what ratio should the cow's milk be diluted for a well-developed, 6-month-old infant?
A) there is no need for dilution
B) with 50% boiled water
C) 2 parts milk and 1 part water containing rice powder
D) 2 parts milk and 1 part tea containing saccharose

PED-4.64.
How much is the daily vitamin D requirement of a 6-month-old healthy infant on an average mixed diet?
A) 2.5 µg/day
B) 10 µg/day
C) 5 µg/day
D) 15 µg/day

PED-4.65.
Possible causes of the development of rickets in a child regularly supplemented with oral vitamin D include all of the following, EXCEPT:
A) an abnormality in the metabolism of vitamin D in the skin
B) an abnormality in the metabolism of vitamin D in the kidney
C) lipid malabsorption
D) hyperphosphaturia

PED-4.66.
Which of the following tests is not suitable to confirm the diagnosis of rickets?
A) the serum inorganic phosphate level
B) an x-ray picture of the wrist
C) the serum calcium level
D) the serum 25-OH-D3 level
E) the serum alkaline phosphatase activity

PED-4.67. Single Choice Question
All of the following statements about vitamin A are correct, "EXCEPT:
A) vitamin A is needed for the formation of a normal epithelium and normal development
B) lipid malabsorption is a possible cause of vitamin A deficiency
C) a very low dietary lipid consumption is a possible cause of vitamin A deficiency
D) crepuscular (twilight) blindness is a possible symptom of vitamin A deficiency
E) muscular hypotonia is a possible symptom of vitamin A deficiency

PED-4.68.
All of the following statements about hypervitaminosis-A are correct, EXCEPT:
A) the intake of a dose of 300,000 IU of vitamin A or the regular intake of 1,500 IU of vitamin A daily causes the development of hypervitaminosis within a short period
B) it is associated with a loss of appetite
C) it is associated with the occurrence of painful swellings over the bones
D) it is associated with an increased cerebrospinal pressure
E) it is associated with skin petechiae

PED-4.69.
All of the following statements concerning vitamin B1 are correct, EXCEPT:
A) it is a coenzyme in carbohydrate metabolism
B) it is heat stable
C) a carbohydrate-rich diet increases vitamin B1 requirements
D) the symptoms of hypovitaminosis-B1 are fatigue, loss of appetite and anemia
E) it can be found in milk, egg, yeast and bran

PED-4.70.
All of the following abnormalities of body constitution and function can be detected in atrophy, EXCEPT:
A) the subcutaneous adipose tissue of the face is lost first
B) a tendency for hypothermia is observed  
C) a tendency for hypoglycemia is observed  
D) a more frequent occurrence of interstitial pneumonia is observed in older, atrophic infants

PED-4.71. All of the following statements concerning the so-called 'milk injury' are correct, EXCEPT: 
A) it develops following the ingestion of excess milk proteins and more concentrated food  
B) the infant is pale and anemic; somatic growth is insufficient  
C) the stool is bulky, light, loose and fetid  
D) the urine has the smell of ammonia, dermatitis occurs

PED-4.72. All of the following statements concerning the afflictions of an atrophic infant are correct, EXCEPT: 
A) otitis media and mastoiditis cause few symptoms in these patients  
B) there is a tendency for hypoglycemia which may cause apnea  
C) urinary tract infections in these infants are always associated with high fever  
D) these infants can only eat a limited amount of food  
E) these infants are prone to pneumonia

PED-4.73. All of the following steps in the therapy of atrophic infants are correct, EXCEPT: 
A) the atrophic infant should be nourished with large amounts of food, primarily milk  
B) large volumes of parenteral infusions should be avoided to prevent overload on the atrophic myocardium  
C) first the energy, then the protein intake should be increased  
D) vitamins, Mg++, K+ and folic acid should be supplemented  
E) feeding during the night is important

PED-4.74. Case Study: 
A 4-month-old baby boy, born at term with 3,400 g birth weight, currently weighs 6,000 g. What is your opinion?  
A) the body weight of the infant is normal  
B) the infant is overweight  
C) the infant's nourishment is deficient

PED-4.75. Case Study: 
The case history reveals that a 6-month-old, mature infant has been nourished exclusively by breastfeeding. Which of the following do you recommend for this infant?  
A) the infant should be ablactated urgently  
B) breastfeeding should be replaced gradually with vegetable purée  
C) the duration of the breastfeeding should be limited to 10 minutes

PED-4.77 The most common cause of obesity in childhood is:  
A) adrenal cortex hyperfunction  
B) hypothyroidism
C) corticosteroid therapy  
D) overeating, the lack of physical activity  
E) hyperthyroidism  
F) adiposogenital dystrophy (Fröhlich's syndrome)  

PED-4.78.  
All of the following statements about adiposogenital dystrophy (Fröhlich's syndrome) are correct, EXCEPT:  
A) the cause is a lesion of the hypothalamic area  
B) most frequent cause is a tumor  
C) symptoms of the disease include obesity, short stature and hypogonadism  
D) it is associated with mental retardation  
E) diabetes insipidus is a possible complication  

PED-4.79.  
How much is the required daily water intake of a child who weighs 14 kg?  
A) 500 ml  
B) 1,000 ml  
C) 1,700 ml  
D) 2,000 ml  
E) 2,700 ml  

PED-4.80.  
All of the following statements concerning fluid therapy are correct, EXCEPT  
A) it includes a maintenance dose of fluid and electrolytes, and the administration of glucose for the prevention of ketosis  
B) the maintenance dose of fluid should be adjusted to the energy metabolism (and insensible losses)  
C) the loss of water by means of insensible perspiration is approximately 50 ml/100 kcal (420 kJ daily: the volume generated by oxidation should be subtracted (17 ml/100 kcal))  
D) the osmolality of the normal plasma is 350-360 mOsm/kg  
E) the insensible perspiration increases during pyrexia, sweating and phototherapy  
F) the renal fluid loss is increased in case of a marked glucosuria  

PED-4.81.  
The minimal fluid requirement of a 6-month-old infant with mild diarrhea is:  
A) 50 ml/kg  
B) 75 ml/kg  
C) 150 ml/kg  
D) 300 ml/kg  
E) 400 ml/kg.  

PED-4.82.  
What is the most simple method to control the correction of a 5% dehydration?  
A) a measurement of the body weight  
B) a determination of the osmolality of the plasma  
C) a measurement of the central venous pressure  
D) a measurement of the blood pressure
What is the optimal initial therapy in case of moderately severe dehydration?
A) the transfusion of whole blood
B) the transfusion of packed red blood cells
C) the infusion of plasma
D) the infusion of 0.9% sodium chloride solution
E) the infusion of half-isotonic sodium chloride-dextrose solution
F) the infusion of 10% dextrose solution
G) the infusion of Rheomacrodex

PED-4.84.
Case Study:
A 12-month-old infant is admitted to the department with complaints of diarrhea and exsiccosis for the last three days. During a general examination a week before admission the infant was found healthy and weighed 10 kg. For the last few days the body temperature has been 39°C and the baby had stool 10-12 times daily. The infant did not void urine during the last 18 hours. Current examination reveals dry skin with markedly decreased turgor, and hollow eyes. What is to be done first?
A) hemoculture; a complete and differential blood cell count
B) urinalysis: cultivation, electrolytes and specific gravity
C) blood is drawn for the determination of ions and urea nitrogen; 20 ml/kg half-isotonic sodium chloride-dextrose solution is administered intravenously, and a continuous infusion is started
D) bacteriology, a reduction test and a determination of the fat content of the stool

PED-4.85.
All of the following statements concerning the clinical symptoms of the conditions characterized by fluid and electrolyte loss are correct, EXCEPT:
A) the turgor is decreased, the extremities are cold and the heart rate is elevated in a moderately severe isotonic dehydration
B) loss of consciousness develops in severe hyponatremic dehydration
C) marked lethargy develops in a moderately severe hypernatremic dehydration
D) abdominal distension and muscular weakness develop in acute hypokalemia
E) during prolonged vomiting the concentrating capacity of the kidney decreases, polyuria develops and peripheral paresis may occur

PED-4.86.
All of the following statements concerning isotonic dehydration are correct, EXCEPT:
A) 80% of the dehydration states developing during childhood are isotonic
B) possible causes include diarrhea, the sequestration of fluid in ileus, excessive sweating, edema formation
C) the heart rate increases, the blood pressure increases, turgor is decreased, the extremities are cool
D) the application of an oral rehydration solution is suitable in mild cases
E) the rate of the infusion of fluid is constant from the beginning
F) 2% glucose in an oral rehydration solution is optimal for the absorption of sodium
PED-4.87. All of the following statements concerning hypotonic (hyponatremic) dehydration are correct, EXCEPT:
A) the sodium concentration of the serum is below 130 mmol/l
B) the extracellular hyperosmolarity causes swelling of the cells
C) aldosterone secretion decreases because of the hyponatremia
D) cerebral edema develops in severe hypotonic dehydration
E) besides the serum sodium concentration, the total body water is also important during the correction of the condition

PED-4.88. All of the following statements concerning hypertonic (hypernatremic) dehydration are correct, EXCEPT:
A) the fluid loss is restricted to the extracellular fluid compartment in case of a hypertonic dehydration
B) hypernatremia is a serum sodium concentration greater than 150 mmol/l
C) possible complications of severe cases include fever, irritability, spasms, coma and occasionally cerebral hemorrhage
D) possible causes include water deprivation, hyperventilation, diabetes insipidus
E) rehydration must be carried out slowly, as the decrease in the serum sodium concentration should not exceed 10 mmol/l a day
F) the fluid loss is calculated from the sodium excess relative to the normal sodium concentration and the volume of the extracellular fluid

PED-4.89. All of the following conditions may be associated with hypokalemia, EXCEPT:
A) hyperaldosteronism (Conn's syndrome)
B) post-acidotic syndrome
C) Bartter's syndrome
D) acute renal failure

PED-4.90. All of the following statements about rickets are correct, EXCEPT:
A) the effective metabolite of the vitamin D metabolism is calcitriol or 1,25-(OH)2-D3
B) the synthesis of renal calcitriol is regulated by the serum calcitriol level
C) an insufficient absorption of calcium causes osteoid tissue formation in the ossification zones
D) rickets is associated with hyperphosphatemia which tends to increase the precipitation of calcium in the ossification zones
E) phosphatase activity is elevated in rickets

PED-4.91. Possible symptoms and complications of rickets include all of the following, EXCEPT:
A) the earliest symptom is craniotabes which, if not associated with other symptoms, may be misdiagnosed
B) caput quadratum develops, with the swelling of the wrists and the ankles
C) rachitic rosary and deformities of the thorax develop
D) mental retardation is a possible late complication
E) pelvic deformities and kyphoscoliosis develop in children who can stand and walk

PED-4.92. Pyloric stenosis is associated with which of the following metabolic acid-base disorders?
A) hypochloremic acidosis
B) hypochloremic alkalosis
C) hyperchloremic acidosis
D) hyperchloremic alkalosis

PED-4.93. Which of the following statements about phenylketonuria (PKU) is correct?
A) the frequency of phenylketonuria is 1:30,000
B) the inheritance pattern is autosomal dominant
C) phenylketonuric newborns are symptom-free at birth
D) the diagnosis is made a few days after birth with a ferric chloride test of the urine

PED-4.94. All of the following findings support the diagnosis of phenylketonuria, EXCEPT:
A) an elevated plasma phenylalanine concentration
B) a normal plasma tyrosine concentration
C) an increased phenylpyruvic acid excretion in the urine
D) intolerance to orally administered phenylalanine
E) dark colored skin and hair

PED-4.95. The deficiency of which of the following enzymes is responsible for the "classic" type galactosemia?
A) galactokinase
B) galactose-1-phosphate-uridyl-transferase
C) uridyl-diphosphate-galactose-4-epimerase
D) glucose-6-phosphatase

PED-4.96. Possible causes of hypoglycemia include all of the following, EXCEPT:
A) pancreas beta cell hyperplasia
B) leucine intolerance
C) growth hormone deficiency
D) renal glycosuria
E) decreased epinephrine mobilization
F) starvation associated with decreased glyconeogenesis
G) decreased glycogen mobilization

PED-4.97. Case Study:
A neonate, born five minutes ago exhibits the following symptoms: a pulse rate of 130/min, the extremities are cyanotic, muscle tone is normal, the newborn cries loudly and makes grimaces. How much is the Apgar score?
A) 3
B) 5
C) 9
D) 10
PED-4.98.
All of the following rules of the transportation of term and premature newborns are correct, EXCEPT:
A) acute, life-threatening conditions should be managed in the obstetric ward
B) a bolus infusion of a solution containing 10% glucose, occasionally completed with bicarbonate administration via the umbilical vein is useful before any transportation is attempted
C) the premature newborn should receive a glucose infusion during prolonged transport
D) the newborn should be attended by a doctor or a trained nurse
E) a blood sample of the mother and full documentation of the pregnancy, delivery and the peripartum period should be sent with the infant

PED-4.99.
All of the following statements concerning esophageal atresia are correct, EXCEPT:
A) any pregnancy complicated by hydramnios should be screened for this anomaly
B) it is frequently associated with a tracheo-esophageal fistula
C) the problem might only be detected during the first feeding, despite a thorough perinatal examination
D) an operation should be done as soon as possible
E) the upper stump must be continuously aspirated until a therapeutic operation is performed and the newborn should be placed in a half-sitting position
F) intubation might be necessary to avoid aspiration

PED-4.100.
All of the following statements concerning the newborn of a diabetic mother are correct, EXCEPT:
A) most of these newborns, are overweight relative to the gestational age
B) hypoglycemia, developing soon after birth, is common
C) tachypnea frequently occurs
D) the prevalence of hyaline membrane disease among these infants is the same as in a control group of the same gestational age

PED-4.101.
Which newborn is the least prone to hypoglycemia?
A) a premature newborn with a low body weight relative to the gestational age
B) a premature newborn with normal body weight relative to the gestational age
C) a neonate born at term, with intrauterine retardation
D) the newborn of a diabetic mother

PED-4.102.
All of the following statements concerning persistent fetal circulation are correct, EXCEPT:
A) it develops primarily following chronic fetal distress
B) the cause is a hyperthrophy or spasm of the vessels of the pulmonary circulation
C) a marked right to left shunt is maintained by the open foramen
ovale and the patent ductus arteriosus
D) the initial therapy includes the administration of a high concentration of oxygen
E) tolazoline effectively relieves the pulmonary hypertension
F) tolazoline relieves the pulmonary hypertension but elevates the pressure in the systemic circulation
G) besides tolazoline, dopamine is also administered

PED-4.103
All of the following statements concerning pneumothorax in a neonate are correct, EXCEPT:
A) the major causes are neonatal hypoxia and the respiration therapy indicated in hypoxia
B) in case of valvular pneumothorax, the lung on the affected side is compressed and shock may develop
C) transillumination is an important step in the physical examination
D) any respiration therapy should be discontinued immediately after the detection of a pneumothorax
E) the application of continuous aspiration is necessary in case of a severe pneumothorax

PED-4.104.
All of the following statements about pulmonary hemorrhage in the neonate are correct, EXCEPT:
A) it is most commonly observed in infants with IRDS
B) a hemostatic disorder is a possible etiologic factor
C) hypoxia is a possible etiologic factor
D) a congenital anomaly of the pulmonary vessels is a possible etiologic factor
E) hypervolemia contributes to the development of a pulmonary hemorrhage
F) it is characterized by a sudden onset, the development of shock and a foamy, pink discharge from the airways

PED-4.105.
All of the following statements concerning the etiologic factors of IRDS (hyaline membrane disease) are correct, EXCEPT:
A) the rate of surfactant production is higher after the 34th week of gestation
B) the phospholipid concentration of the amniotic fluid is a marker of the maturation of the lung
C) steroid hormones stimulate the production of surfactant
D) insulin stimulates the production of surfactant
E) theophylline stimulates the production of surfactant
F) the steroid prophylaxis of IRDS has to be carried out before delivery

PED-4.106.
All of the following statements concerning the pathogenesis of IRDS (hyaline membrane disease) are correct, EXCEPT:
A) respiration becomes difficult because of the collapse of the alveoli
B) alveolar hyperventilation, hypercapnia, hypoxia and acidosis develop because of the collapse of the alveoli
C) the pulmonary vascular resistance increases
D) a compensatory dilatation of the bronchi is observed
E) a hyaline membrane develops due to the pulmonary
hypoperfusion
F) a persistent fetal circulation may develop

ED-4.107.
All of the following statements concerning IRDS (hyaline membrane disease) are correct, EXCEPT:
A) it is manifested within a few hours following birth
B) tachypnea, jugular and intercostal retraction are observed
C) the observed expiratory grunting is a result of the closing of the glottis, which aims to keep the alveoli open
D) the development of a pneumo-bronchogram on the chest x-ray verifies IRDS
E) during the third stage, the diaphragm-lung and the heart-lung borders are obscure on the chest x-ray

PED-4.108.
All of the following statements about the therapy of IRDS (hyaline membrane disease) are correct, EXCEPT:
A) the aim of respiration therapy is to keep the alveoli open and maintain a normal functional residual capacity
B) the aim of respiration therapy is to maintain the normal arterial oxygen tension and to prevent an elevation of the carbon dioxide tension
C) CPAP (continuously positive airway pressure) should provide an airway pressure of 3-7 cm of water during spontaneous respiration
D) the ratio of oxygen in the inspired air should be at least 50%
E) if, despite CPAP respiration, carbon dioxide fails to fall below 55 mmHg, then PEEP (positive end-expiratory pressure) respiration is indicated

PED-4.109.
All of the following statements concerning pneumonia of a newborn are correct, EXCEPT:
A) it may develop during the fetal period, during delivery, or postnatally
B) an early rupture of the amnion plus maternal infections predispose this condition
C) a group B streptococcus infection is a frequent cause
D) symptoms of the condition are similar to those in IRDS
E) an elevated or, occasionally, very low white blood cell count, associated with a low platelet count are indicative of pneumonia, rather than IRDS
F) a strong elevation of the serum IgG level is indicative for a connal pneumonia

PED-4.110. Single Choice Question
Which of the following mechanisms is not involved in the development of the physiologic jaundice in the newborn?
A) toxic compounds present in the circulation
B) a shorter life span of the newborn's red blood cells
C) an elevated level of the non-conjugated bilirubin in the newborn
D) the insufficient conjugation capacity of the liver
E) an enhanced enterohepatic circulation of bilirubin
Possible causes of the development of pathologic hemolysis associated with hyperbilirubinemia in the newborn include all of the following, EXCEPT:
A) bacterial or viral sepsis
B) erythroblastosis
C) ABO incompatibility
D) vitamin K deficiency
E) red cell enzyme abnormalities
F) congenital abnormalities of the red blood cells

All of the following statements concerning the anemia of neonatal hemolytic disease are correct, EXCEPT:
A) the lower limit of the reference range of the hemoglobin concentration of a newborn during the first days is 8.5 mmol/l (14 g/dl)
B) the lower limit of the reference range of the hemoglobin concentration of a 6-week-old infant is 6.5 mmol/l (10 g/dl)
C) the late anemia caused by an incompatibility develops 5-6 weeks after the blood exchange
D) during blood exchange irregular antibodies reach the organism, this is the cause of the late anemia

Anti-D immunoglobulin is administered in all of the following conditions EXCEPT:
A) to non-sensitized, D-negative mothers following the birth of a D positive newborn
B) to non-sensitized, D-negative mothers following abortion
C) to non-sensitized. D-negative mothers following the first delivery, if the newborn is D-negative
D) to D-negative individuals following the incorrect transfusion of D-positive blood

All of the following statements concerning "rare" isoimmunization are correct, EXCEPT:
A) a newborn with "rare" isoimmunization associated with jaundice and anemia should only receive a transfusion of selected, compatible blood
B) the mother, during transfusion of blood identical in main blood groups, is still at risk for the development of a severe hemolytic complication
C) hemolysis following transfusion of blood identical in Rh(D) and ABO blood groups is indicative of a "rare" isoimmunization
D) the direct Coombs' test usually becomes positive in case of hemolysis caused by the transfusion of ABO-incompatible blood

Case Study:
A 3-week-old, well developed, breast-fed infant is still jaundiced. Which of the following therapies is indicated?
A) the administration of barbiturates
B) exposure to blue light
C) a blood exchange
D) no treatment is necessary at this time
Meconium ileus is a possible early symptom of:
A) pyloric stenosis
B) Hirschsprung's disease
C) cystic fibrosis
D) intestinal perforation

Which of the following is the most likely cause of a bilious vomit of a newborn?
A) esophageal atresia
B) pyloric stenosis
C) achalasia
D) volvulus of the small intestine

When should an x-ray examination be performed in case of anal atresia?
A) immediately after detection of the anomaly
B) a few hours after birth
C) 12 hours after birth
D) the x-ray picture is unrevealing within one day after birth
E) a few days after birth

Clavicular fracture of a newborn is most commonly associated with which of the following additional injuries?
A) epiphyseolysis of the humerus
B) a lesion of the phrenic nerve
C) a lesion of the brachial plexus
D) the rupture of the sternocleidomastoid muscle

All of the following statements concerning birth traumas of the skeleton are correct, EXCEPT:
A) a fracture of the clavicle is quite common and it is frequently undetected
B) the therapy of clavicular fractures includes stabilization of the upper arm in an abducent position
C) a fracture of the humerus must be differentiated from a paresis of the brachial plexus
D) the characteristic symptoms of a femoral fracture include crying and pain upon movements of the lower extremity

All of the following statements about neonatal lesions of the peripheral nerves are correct, EXCEPT:
A) in the Erb-Duchenne form of paralysis, the cervical V-VI radices are injured and a brachial type paralysis develops
B) in the Klumpke type of paralysis, the cervical VII-VIII and the thoracal I radices are injured and a paralysis of the forearm develops
C) Moro's reflex cannot be elicited in the Klumpke type of paralysis
D) the therapy of a paralysis of the upper arm and the forearm includes stabilization of the extremity and physiotherapy
E) a lesion of the phrenic nerve causes a unilateral paralysis of the diaphragm
PED-4.122.

Case Study:
A 6-hour-old newborn exhibits tachypnea and dyspnea and vomits repeatedly. The body temperature of the newborn is normal. The physical examination reveals a tympanic resonance over the left side of the chest, no respiratory sounds are audible over this side. The surface of the abdomen is concave. What is the most likely cause of this condition?
A) IRDS
B) neonatal sepsis
C) left-sided pneumonia
D) a diaphragmatic hernia on the left side
E) pneumothorax
F) congenital valvular disease

PED-4.123.
Maternal factors which predispose the newborn to neonatal infections include all of the following, EXCEPT:
A) urinary tract infections during pregnancy
B) febrile diseases or diarrhea during the peripartum
C) an invasive prenatal diagnostic examination
D) terbutaline sulphate (Bricanyl) therapy of the mother in an attempt to prevent the abortion
E) bacterial colonization of the delivery channel
F) early rupture of the amnion

PED-4.124.
Indications of neonatal antibiotic prophylaxis include all of the following, EXCEPT:
A) a peripartal maternal infection
B) an early rupture of the amnion
C) a fetid amniotic fluid
D) a prolonged and difficult delivery
E) a blood transfusion
F) a blood exchange
G) catheterization of the umbilical vessels

PED-4.125.
Specify the most suitable intervention for the inhibition of the vertical transmission of a group B streptococcus infection:
A) oral antibiotic therapy of all of the carrier mothers
B) parenteral penicillin therapy of the newborns of the carrier mothers in selected cases (early rupture of the amnion, premature newborns etc.)
C) parenteral penicillin therapy of all of the carrier mothers and their newborns
D) peripartal, intravenous ampicillin therapy of the carrier mothers

PED-4.126.
Which of the following bacteria are the most frequent causative microorganisms of meningitis and sepsis during the neonatal period?
A) Streptococcus pneumoniae and Haemophilus influenzae
B) Staphylococcus and E. coli
C) E. coli and group B Streptococcus
D) E. coli and group A Streptococcus
E) Pseudomonas and Klebsiella
PED-4.127. All of the following statements concerning necrotizing enterocolitis (NEC) are correct, EXCEPT:
A) the disease is primarily manifested between the ages of 6-12 months
B) breastfeeding increases the resistance for developing NEC
C) an intestinal pneumatosis is of diagnostic value
D) bloody stool is observed in the majority of cases
E) in case of the failure of conservative therapy, an operation is indicated

PED-4.128. The occurrence of which of the following symptoms is the least likely to occur in neonatal sepsis?
A) fever
B) the refusal of food
C) jaundice
D) lethargy
E) irritability

PED-4.129. Case study:
A 1-week-old infant is being suspected intestinal abnormaly
The mother tells that the baby defecates a green, mucous stool 6-10 times daily. The body temperature is normal, the appetite of the infant is normal, the somatic growth is sufficient and the nappy is changed 10-12 times daily (it is always wet when replaced). The smell of the feces is acidic. Which of the following statements is correct?
A) if the infant is breastfed only, the condition is severe
B) such stools may be normal in breastfed babies
C) such stools may be normal if the infant receives food preparations with a high cereal content
D) the infant likely has a nosocomial enteral infection

PED-4.130. All or the following statements concerning pyloric stenosis are correct, EXCEPT:
A) it is more common in boys than in girls
B) the usual time of the onset of symptoms is at the end of the first month
C) the vomit is bilious
D) these patients usually show projectile vomiting

PED-4.131. What is the most likely acid-base abnormality in congenital hypertrophic pyloric stenosis?
A) respiratory alkalosis
B) none, as these is a normal acid-base status
C) metabolic acidosis
D) metabolic alkalosis
E) respiratory acidosis

PED-4.132. Which of the following statements concerning the therapy of congenital hypertrophic pyloric stenosis is correct?
A) a pyloromyotomy is indicated immediately
B) after normalization of the acid-base and electrolyte balance, a pyloromyotomy has to be performed in each case
C) gradually increased doses of atropine are administered to relieve pyloric spasm
D) with frequent feeding and low quantities of food the newborn survives the critical period, the pyloric passage increases with time

PED-4.133.
Case Study:
A 3-month-old infant is brought to you with a 5-week history of diarrhea. No microorganism has been demonstrated by fecal bacteriology. Furthermore, the administration of several antibacterial drugs failed to normalize the condition. The infant has been on an average diet containing mixed food since the age of 6 weeks. The possible causes of this condition include all of the following, EXCEPT:
A) cow's milk protein intolerance
B) a lactase deficiency following a bacterial diarrhea
C) the so-called infantile, intractable diarrhea of unknown origin
D) a change of the GI flora caused by the administration of antibiotics
E) a diarrhea caused by a viral infection

PED-4.134.
Which of the following findings would support the diagnosis of a suspected mucoviscidosis (cystic fibrosis)?
A) a decreased absorption of xylose
B) a decreased vital capacity
C) a decreased biliary pigment content of the duodenal juice
D) steatorrhea
E) the chloride concentration of the sweat is above 60 mmol/l
F) cor pulmonale

PED-4.135.
Which of the following statements concerning celiac disease is correct?
A) an intestinal biopsy revealing subtotal atrophy of the villi in a patient on an average diet proves celiac disease
B) a gluten-free diet is introduced following the detection of subtotal atrophy of the villi, and a biopsy is repeated 2 months following the relief of symptoms; if the histology is still abnormal, then celiac disease is excluded
C) a xylose absorption test is necessary for the diagnosis
D) the diagnosis is only reliable if the biopsy is repeated 1 year after the restriction of gluten and the histology is normal and then, 6 months after the re-introduction of gluten, the biopsy preparation reveals the characteristic abnormalities again

PED-4.136.
In case of proven celiac disease, which of the following cereals should be AVOIDED?
A) wheat meal and semolina, until the end of puberty
B) wheat meal and semolina, lifelong
C) wheat, rye, barley and oat, lifelong
D) wheat, barley and oat, lifelong

PED-4.137.
Diseases in which a specific diet is indicated include all of the following, EXCEPT:
A) post-enterititis malabsorption
B) acrodermatitis enteropathica
C) intestinal lymphangiectasis  
D) celiac disease  
E) galactosemia  
F) congenital sucrase-isomaltase deficiency

PED-4.138. Which of the following tests is the most informative in the recognition of appendicitis in childhood?  
A) the white blood cell count and the red blood cell sedimentation rate  
B) a native abdominal x-ray  
C) an abdominal ultrasound  
D) the repeated physical examination of the abdomen  
E) a rectal digital examination

PED-4.139. All of the following diseases are to be excluded during the differential diagnosis of an acute appendicitis, EXCEPT:  
A) mesenteric lymphadenitis  
B) bronchopneumonia  
C) urinary tract infection  
D) acute enteritis  
E) ascariasis  
F) Bornholm disease  
G) lobar pneumonia (right lower lobe)  
H) abdominal purpura (Henoch-Schönlein)  
I) pneumococcal peritonitis

PED-4.140. Case Study:  
You are examining a 10-year-old boy. The child has been complaining of pain in the ileocecal region for a few hours. The temperature is 37.9°C. On examination, the paryngeal mucosa is moderately hyperemic. Tenderness, but no muscular defense, is detected in the ileocecal region. No resistance is palpable during a rectal digital examination. What is your next action?  
A) the diagnosis is pharyngitis associated with mesenterial lymphadenitis; bed-rest at home and penicillin (Maripen) are indicated  
B) the diagnosis is acute appendicitis; the patient is referred to a surgical department  
C) the diagnosis is pharyngitis and acute appendicitis; the patient is referred to a hospital, close observation is indicated

PED-4.141. Symptoms indicative for intussusception include all of the following, EXCEPT:  
A) a suddenly developing and periodically recurrent abdominal pain  
B) the emptying of non-feculent, bloody mucus  
C) the detection of fluid levels in the native abdominal x-ray  
D) the emptying of purulent, bloody and mucous stool, preceded by the development of fever  
E) a palpable resistance in the abdomen

PED-4.142. All of the following are possible causes of mechanical ileus, EXCEPT:  
A) meconium plug  
B) volvulus  
C) invagination
D) Meckel's diverticulum
E) ulcerative colitis

PED-4.143.
Recognized causes of paralytic ileus include all of the following, EXCEPT:
A) an abdominal operation
B) a toxic infection
C) renal colic
D) perforation peritonitis
E) intestinal helminthiasis
F) pneumonia
G) hypokalemia

PED-4.144.
Possible causes of constipation include all of the following, EXCEPT:
A) emotional factors
B) an inappropriate diet
C) congenital megacolon
D) increased vagal tone
E) laxative abuse
F) hypothyroidism
G) dolichocolon

PED-4.145.
Which of the following statements concerning congenital megacolon is correct?
A) the cause of this condition is the lack of parasympathetic ganglia in the distended portion of the colon or rectum
B) it may cause paralytic ileus
C) constipation is always present; diarrhea never occurs
D) on rectal digital examination, the rectal ampulla is found empty during the neonatal period

PED-4.146.
Which of the following statements about hernias is FALSE?
A) reposition of the incarcerated content 6 hours or more after the incident is dangerous; an operation is indicated in these cases
B) a small inguinal hernia might spontaneously close during the first year, but it is not necessary to wait until it closes
C) an inguinal hernia can only be examined in tranquil patients
D) the majority of umbilical hernias close spontaneously during the first few years of life

PED-4.147.
All of the following statements about chronic persistent hepatitis are correct, EXCEPT:
A) it may develop following an acute hepatitis B or a non-A non-B hepatitis infection
B) symptoms of the condition include fatigue, a loss of appetite and icterus
C) hepatic enzyme activities in the serum are markedly elevated
D) a liver biopsy is necessary for the diagnosis
E) the histologic structure of the hepatic lobules is normal
F) the majority of cases heal but require control over a long period of time
PED-4.148.
All of the following statements concerning chronic active hepatitis are correct, EXCEPT:
A) one group of the chronic active hepatitises is caused by the hepatitis B virus, the other group is of an autoimmune origin (lupoid hepatitis)
B) the symptoms include a loss of appetite, hepatomegaly and occasionally jaundice
C) the lupoid form is characterized by LE-cell positivity, hypergammaglobulinemia and the presence of autoantibodies in the serum
D) after a while this hepatitis heals on its own
E) a liver biopsy is necessary for the diagnosis

PED-4.149.
Possible causes of hepatic cirrhosis include all of the following, EXCEPT:
A) galactosemia
B) alpha1 antitrypsin deficiency
C) hepatitis A virus infection
D) hepatitis B virus infection
E) lupoid hepatitis
F) biliary atresia

PED-4.150.
The therapy of hepatic cirrhosis includes all of the following, EXCEPT:
A) drugs which are toxic to the liver
B) an energy-rich, fat-free diet and vitamin substitution are necessary
C) the protein intake must be restricted and the intestinal ammonia production should be inhibited in cases of hyperammoniemia
D) in case of esophageal bleeding an immediate surgical shunt preparation is the most straightforward therapeutic procedure
E) ascites formation may be decreased by a low salt intake and the administration of spironolactone

PED-4.151.
All of the following statements about hepatic abscesses are correct, EXCEPT:
A) possible causes include amebiasis, helminthiasis, sepsis
B) the symptoms are fever, tenderness and/or spontaneous pain of the hepatic region
C) x-ray, ultrasound and isotope tests are indicated
D) it is usually associated with diaphragmatic pleuritis
E) the results of the blood tests are characteristic for an acute inflammation

PED-4.152.
All of the following statements about Reye's syndrome are correct, EXCEPT, A) Reye's syndrome is a certain form of hepatic encephalopathy which is characterized by an abnormality of the urea cycle
B) it usually develops following a mild respiratory tract infection, gastrointestinal disease or a varicella infection
C) salicylate administration may have a role in the development of this syndrome
D) following a period of weakness and profuse vomiting, neurologic symptoms develop
E) it is characterized by fever and an increased cerebrospinal fluid cell count and protein concentration
F) hepatic function tests are positive and the liver is enlarged

PED-4.154
All of the following conditions are associated with a systolic murmur, EXCEPT:
A) anemia
B) hypothyroidism
C) mitral incompetence
D) aortic incompetence
E) ventricular septal defect
F) fever

PED-4.155.
Which of the following congenital valvular heart diseases is associated with severe cyanosis manifested during the first few days of life?
A) aorto-pulmonary fenestration
B) the postductal form of coarctation of the aorta
C) common atrioventricular ostium
D) transposition of the great arteries
E) patent ductus arteriosus

PED-4.156.
If the vascular tracings of the lungs are decreased on a chest x-ray of a cyanotic newborn, which of the following congenital valvular diseases is a possible cause?
A) complete transposition of the great vessels
B) complete transposition of the pulmonary veins
C) pulmonary atresia

PED-4.157
All of the following statements concerning an isolated ventricular septal defect are correct, EXCEPT:
A) a left to right shunt becomes more severe with time
B) decompensation might occur
C) signs of pulmonary congestion might occur
D) cyanosis, which is present in all cases, improves later

PED-4.158.
Case Study:
The arterial pulsation in the upper extremity of a newborn with congestive heart failure is palpable whereas in the lower extremity it is not. Which of the following congenital valvular diseases is the most likely cause?
A) the hypoplastic left heart syndrome
B) severe and critical valvular aortic stenosis
C) coarctation of the aorta

PED-4.159.
Which is the most common valvular abnormality developing as a consequence of rheumatic fever?
A) mitral insufficiency
B) mitral stenosis
C) aortic insufficiency
D) aortic stenosis
E) tricuspid insufficiency
PED-4.160.
All of the following statements concerning rheumatic polyarthritis are correct, EXCEPT:
A) it usually affects the great joints
B) the affected joints are swollen, warm, and movements are painful
C) it is associated with a high fever
D) joint deformities develop during healing if the appropriate treatment is not introduced in time
E) the hip joint may also be affected

PED-4.161.
Symptoms of chorea minor include all of the following, EXCEPT:
A) muscular hypotonia
B) hyperkinesis
C) ataxia and impaired coordination
D) increased reflexes
E) emotional lability

PED-4.162.
All of the following statements concerning the therapy of rheumatic fever are correct, EXCEPT:
A) penicillin therapy is indicated
B) in case of carditis, prednisone treatment is indicated for at least 6 weeks
C) salicylate therapy alone is sufficient if the patient only exhibits polyarthritis symptoms
D) bed rest is indicated until complete remission
E) if the disease is unresponsive to the above interventions, the administration of azathioprine (Imuran) is indicated

PED-4.163.
Symptoms of subacute bacterial endocarditis include all of the following, EXCEPT:
A) the initial symptoms include fatigue, pallor and a loss of appetite
B) initially a moderate, then a high-grade fever is detected
C) microembolization of the skin and the kidneys
D) painful erythematous subcutaneous nodules about the tips of the digits

PED-4.164.
Symptoms of a digitalis overdose include all of the following, EXCEPT:
A) nausea, vomiting
B) bradycardia, arrhythmia
C) a prolongation of the PR interval; 2nd or 3rd degree AV-block observed on the ECG
D) atrial premature complexes

PED-4.165.
The effects of digitalis administration in a patient with cardiac decompensation include all of the following, EXCEPT:
A) a declining positive central venous pressure
B) hepatomegaly becomes less pronounced
C) a short PR segment is observed on the ECG
D) the heart rate decreases
E) the volume of the urine increases
In which of the following arrhythmias is the administration of digitalis CONTRAINDIATED?
A) ventricular paroxysmal tachycardia
B) supraventricular paroxysmal tachycardia
C) atrial flutter
D) atrial fibrillation

Which of the following statements about 2nd degree AV-block is correct?
A) each atrial contraction is followed by a ventricular contraction
B) it is usually caused by an organic disease
C) it is always manifested with severe symptoms
D) tachycardia is frequent in the condition

Which of the following statements concerning gallop rhythm is correct?
A) it is a symptom of congenital valvular diseases
B) it is a physiologic phenomenon
C) it is an obligatory symptom of myocarditis
D) it is regarded as a pathological sign during infancy and young childhood
E) it is a harmless phenomenon during childhood

All of the following statements concerning tachycardias are correct, EXCEPT:
A) possible causes of sinus tachycardia include fever, hyperthyroidism and the consumption of caffeine
B) possible causes of acute supraventricular tachycardia include fever, carditis and ephedrine administration
C) chronic supraventricular paroxysmal tachycardia is always associated with valvular disease
D) atrial fibrillation is usually associated with heart disease
E) possible causes of ventricular fibrillation include digitalis toxicity and cardiomyopathy

All of the following statements concerning the therapy of tachycardias are correct, EXCEPT:
A) it is usually sufficient to manage the underlying cause of the sinus tachycardia, digitalis may also be administered
B) after the neonatal period the first step in the therapy of a supraventricular paroxysmal tachycardia is the administration of oxprenolol (Trasicor)
C) propranolol is contraindicated in patients suffering from asthma
D) therapeutic agents applied in a supraventricular paroxysmal tachycardia include digitalis, beta-blockers and verapamil
E) therapeutic agents applied in a ventricular paroxysmal tachycardia include lidocaine, procainamide, phenytoin and electric cardioversion

All of the following statements concerning bradycardias are correct, EXCEPT:
A) the possible causes of acute bradycardia include an atrioventricular block due to hypokalemia, an increased intracranial pressure, an increased
vagal tone, hypoxia and hypothermia
B) the possible causes of chronic bradycardia include beta-blocker therapy, previous cardiac surgery and regular sporting activity
C) a Mobitz II type second degree AV-block usually develops in a previously healthy heart
D) connatal atrioventricular block is a possible cause of connatal bradycardia
E) interventions used for the management of bradycardia include the administration of atropine, ephedrine, isoprenaline and pacemaker-therapy

PED-4.172.
The therapy of the ventricular tachycardias includes the administration of all of the following drugs, EXCEPT:
A) procainamide
B) lidocaine
C) digitalis
D) phenytoin

PED-4.173.
What is the upper limit (95 percentile value) of the normal range of blood pressure in a 10-year-old child?
A) 140/90 mmHg
B) 110/70 mmHg
C) 125/80 mmHg

PED-4.174.
Which of the following statements about the measurement of blood pressure is correct?
A) the measurement of the systolic pressure with the cuff method gives lower values in the lower extremity as compared to the upper extremity
B) with the flush method, the diastolic pressure is detected
C) in excited children, the systolic pressure may exceed (by 40 mmHg) the values obtained at rest
D) a cuff which is too wide may overmeasure the blood pressure

PED-4.175.
Possible causes of hypertension in childhood include all of the following, EXCEPT:
A) hypothyroidism
B) pheochromocytoma
C) coarctation of the aorta
D) acute glomerulonephritis
E) encephalitis

PED-4.176.
All of the following conditions may cause hypertension, EXCEPT:
A) coarctation of the aorta
B) obliteration of the renal artery
C) polycystic kidney
D) lead poisoning
E) the 21-hydroxylase deficient form of the adrenogenital syndrome
F) prolonged hypercalcemia

PED-4.177.
All of the following statements concerning essential hypertension in
childhood are correct, EXCEPT:
A) it is most commonly manifested during adolescence
B) signs of left ventricular hypertrophy are observed on the ECG
C) spasms of central nervous system origin might follow an
   acutely developing elevation of blood pressure
D) in essential hypertension a combination of several drugs is initially
   administered
E) diuretics and/or beta receptor blockers are effective

PED-4.178.
All of the following statements about hypertensive crisis are
correct, EXCEPT:
A) the development of seizures with a loss of consciousness is a
   possible complication
B) a possible complication is acute heart failure
C) phentolamine (Regitin) is indicated in an acute hypertensive
   crisis of any origin
D) diazoxide exerts its effect rapidly in this condition
E) hydralazine normalizes the blood pressure within 10-60 minutes

PED-4.179.
All of the following statements concerning pheochromocytoma are
correct, EXCEPT:
A) these days assays for urinary catecholamines have replaced
   the phentolamine (Regitin) test
B) paroxysms with an elevated blood pressure are always observed
   in this disease during childhood
C) the paroxysms are associated with palpitation, sweating and mydriasis
D) some neuroblastomas also secrete catecholamines
E) vanillylmandelic acid excretion is increased

PED-4.180.
Possible complications of tonsillitis include all of the following, EXCEPT:
A) cervical lymphadenitis
B) acute rheumatic fever
C) sepsis
D) chronic rheumatoid arthritis
E) acute diffuse glomerulonephritis

PED-4.181.
All of the following statements about retropharyngeal abscesses are
correct, EXCEPT:
A) they occur as a complication of a purulent pharyngitis
B) they inhibit swallowing
C) they might cause laryngeal edema
D) the position of the head is similar to that observed in meningism
E) it is advisable to wait for the spontaneous opening of these abscesses
   instead of performing an operation
F) laryngoscopy is indispensable for the diagnosis
G) a painful swelling of the lymph nodes is detected on both sides
   of the mandible

PED-4.182.
All of the following statements concerning acute epiglottitis are correct,
EXCEPT:
A) it progresses slowly
B) fever and excitement are observed
C) dyspnea, cyanosis and retroflection of the head are observed
D) suffocation might develop

PED-4.183.
Which of the following antimicrobial therapies would you choose for the treatment of epiglottitis?
A) antibiotics should not be administered because epiglottitis is caused by a viral infection
B) acyclovir therapy is introduced because the most common cause of epiglottitis is a herpes virus infection
C) amoxicillin or chloramphenicol therapy is introduced because the most common cause of epiglottitis is a Haemophilus influenzae infection
D) oxacillin or methicillin therapy is introduced because the most common cause of epiglottitis is a staphylococcal infection

PED-4.184.
Which of the following statements about subglottic laryngitis is correct?
A) it is most commonly manifested between the ages of 8-10
B) it is always associated with a high fever
C) the speech is clear
D) an expiratory type dyspnea develops
E) a “barking” cough is detected

PED-4.185.
Case Study:
The family history of a 2-year-old child reveals, like both his parents, Allergic rhinitis caused by ragweed. The child also has had pseudocroup (thymic asthma) twice. Is an allergological examination indicated in this case?
A) yes, because there is a positive family history for allergy
B) no, because there is no relationship between ragweed allergy and pseudocroup, plus sensitivity for other allergens cannot be usually demonstrated
C) yes, because pseudocroup is a forerunner of bronchial asthma
D) yes, because desensitization with the demonstrated allergen can be used to prevent the development of a pseudocroup

PED-4.186.
Which of the following is the most common causative microorganism of bronchiolitis?
A) Haemophilus influenzae
B) Pneumococcus
C) Coxsackie virus
D) Streptococcus haemolyticus
E) respiratory syncyital virus

PED-4.187.
All of the following statements about malignant laryngo-tracheobronchitis are correct, EXCEPT:
A) characteristics of this disorder include a high fever, rapid progression, inflammation obliterating the upper airways, dyspnea and cyanosis
B) no abnormality is detected over the lungs on auscultation
C) broad spectrum antibiotics are indicated
D) the crusts and the secretion obliterating the airways are removed during bronchoscopy
E) intubation or tracheotomy might be necessary

PED-4.188.
Possible causes of chronic bronchitis include all of the following, EXCEPT:
A) recurrent infections from the infected individuals in the community
B) allergies
C) sinusitis
D) cystic fibrosis
E) an IgE deficiency

PED-4.189. Single Choice Question
All of the following statements concerning obstructive bronchitis are correct, EXCEPT:
A) it is more frequent during infancy and young childhood
B) malnutrition is a predisposing factor
C) expiratory dyspnea can develop
D) the associated fever is usually moderate
E) the main cause of the dyspnea is a swelling of the airway mucosa

PED-4.190.
Which of the following statements about the relationship between bronchial asthma and obstructive bronchitis is correct?
A) the development of bronchial asthma is usually preceded by obstructive bronchitis
B) approximately 40% of patients with obstructive bronchitis will develop bronchial asthma
C) the dominant symptom of both diseases is airway obstruction
D) antihistamines are the most important medications in both diseases

PED-4.191.
Pathogenetic factors of bronchial asthma include all of the following, EXCEPT:
A) a hyperreactivity of the bronchial system
B) an IgE mediated antigen-antibody reaction
C) the inhalation of cigarette smoke and polluted air
D) physical activity
E) the administration of adrenergic agonists
F) emotional factors

PED-4.192.
All of the following statements concerning the regular therapy of bronchial asthma are correct, EXCEPT:
A) it is important to avoid contact with the demonstrated allergen
B) IgG blocking antibody is formed during hyposensitization
C) cromolyn sodium (Intal) inhibits mastocyte degranulation
D) beta agonists such as salbutamol and terbutaline (Bricanyl) administered in tablets, mtramuscularly orin aemsol form, relieve bronchial spasm
E) diaphylline - inhibiting phosphodiesterase - delays the degradation of cAMP in the bronchial mastcature
F) mucolytics are administered as indicated by the condition
G) steroids - if inhaled - have only a few side effects
H) climate change and physiotherapy are beneficial
PED-4.193.
Which of the following therapeutic interventions is **prohibited** in an asthmatic crisis?
A) an increased intake of fluids
B) beta receptor agonists
C) beta receptor blockers
D) theophylline
E) corticosteroids

PED-4.194.
Which of the following interventions is **contraindicated** in "status asthmaticus"?
A) an aminophylline bolus (4-6 mg/kg), then continuous infusion while monitoring the serum level
B) the application of an oxygen vapour tent
C) salbutamol inhalation
D) cortisone administered intravenously
E) infusion of a solution containing 0.2% saline and 5% dextrose

PED-4.195.
All of the following statements concerning the causative microorganisms of a bacterial pneumonia are correct, EXCEPT:
A) a positive hemoculture is a reliable guide
B) the bacteriology of the laryngeal secretion is usually a reliable guide
C) a bacteriologic test of the tracheal secretion is usually reliable
D) a bacteriologic test of an occasionally present pleural exudate is of diagnostic value
E) leukopenia indicates the possibility of a Gram-negative infective microorganism
F) a rapid progression with abscess formation detectable on the chest x-ray is indicative of a staphylococcal infection

PED-4.196.
All of the following statements concerning pneumococcal pneumonia of infancy are correct, EXCEPT:
A) crepitation is not necessarily detected in the initial phase
B) meningism is a frequent complication
C) it is usually not preceded by an upper respiratory disease
D) the classic symptoms of the infiltration are typically first observed on the 3rd-4th days
E) it cannot be prevented with vaccination against Pneumococcus

PED-4.197.
All of the following physical signs are characteristic of lobar pneumonia, EXCEPT:
A) a duller percussion sound is heard over the affected lobe
B) bronchophony is detected over the affected lobe
C) bronchial respiratory sounds are heard over the affected lobe
D) a tympanic resonance is detected over the affected lobe
E) crepitation is audible over the affected lobe

PED-4.198.
All of the following microorganisms are associated with lung abscess formation, EXCEPT:
A) Streptococcus pneumoniae
B) Klebsiella pneumoniae
C) Chlamydia trachomatis
D) Staphylococcus aureus
E) Haemophilus influenzae

PED-4.199.
All of the following statements concerning pneumonias caused by Gram-negative microorganisms are correct, EXCEPT:
A) the pneumonia of a newborn, premature newborn or an immunodeficient patient is usually caused by Gram-negative bacteria
B) klebsiella pneumonia is accompanied by the formation of sputum that looks like currant jelly (Friedländer's pneumonia)
C) pneumonia caused by gram-negative bacilli has a high mortality rate
D) gram-negative bacilli have a tendency to cause lung infections in a previously-well adult host

PED-4.200.
All of the following statements concerning the differentiation of viral and bacterial pneumonias are correct, EXCEPT:
A) the white blood cell count in a viral pneumonia is typically lower than in a bacterial pneumonia
B) viral pneumonia of the infants is always of a mild severity
C) the progression of a viral pneumonia is slower
D) a lobar infiltration is usually indicative of a bacterial origin

PED-4.201.
Which of the following statements about interstitial plasmocytic pneumonia is correct?
A) bronchial respiratory sounds are heard over the lung fields
B) crepitations are heard over the entire lung
C) it is manifested in newborns with a low birth weight, at the age of 3-8 weeks
D) the onset is after the age of 4 months
E) the patients exhibit a hoarse cough

All of the following statements about pneumonia caused by Pneumocystis carinii are correct, EXCEPT:
A) the incubation period is 3-8 weeks
B) premature newborns and immunodeficient patients are at a higher risk
C) the clinical course is acute (several hours)
D) the presenting symptoms are marked tachypnea, cyanosis, pallor
E) a frosted glass-like shadow is observed on the x-ray
F) the therapeutic drug of choice is trimethoprim/sulfamethoxazole

PED-4.203.
Which of the following procedures is reliable in the diagnosis or exclusion of a foreign body in the airways?
A) a physical examination
B) a thorough history taking
C) bronchoscopy
D) chest transillumination (Holzknecht's sign)
E) chest x-ray

PED-4.204.
Symptoms of bronchiectasis include all of the following, EXCEPT:
A) the recurrence of pneumonia affecting the same area
B) voluminous secretion of the airways
C) a loss of appetit-, growth retardation
D) cyanosis due to the circulatory abnormality
E) clubbing of the fingers

PED-4.205.
All of the following statements about the diagnosis and the therapy of bronchiectasis are correct, EXCEPT:
A) bronchoscopy and bronchography are necessary for the precise diagnosis
B) a postural drainage, nursing home care and the vigorous treatment of infections is indicated in mild cases
C) an associated chronic sinusitis must be cured
D) the regular administration of gamma-globulin is important in all cases
E) in cases when bronchiectasis affects only 1-2 lobes or in prolonged cases a lobectomy is indicated

PED-4.206.
Functions of T lymphocytes include all of the following, EXCEPT:
A) the production of IgM antibodies in response to a viral infection
B) organ rejection in transplantation
C) an immune response to tuberculosis
D) defense against fungal infections
E) defense against viral infections

PED-4.207.
Which of the following immunoglobulin classes is able to penetrate the placenta?
A) IgG
B) IgM
C) IgA
D) IgE
E) IgD

PED-4.208.
Which of the following immunoglobulin classes is able to cause allergic symptoms binding to the cell and the specific antigen?
A) IgG
B) IgM
C) IgA
D) IgE
E) IgD

PED-4.209.
Case Study:
A 3-year-old child, attending nursery school, becomes repeatedly ill with mild respiratory tract infections which heal spontaneously. What is the most likely cause of these symptoms?
A) an immunoglobulin deficiency
B) a cellular immune defect
C) an environmental cause, because of the polyetiologic nature of respiratory infections
D) malnutrition
E) a vitamin C deficiency
F) rickets

All of the following interventions cause an iatrogenic immune defect, EXCEPT:
A) prolonged treatment with corticosteroids
B) cytostatic therapy
C) BCG vaccination
D) splenectomy

PED-4.211.
Diagnostic criteria of juvenile rheumatoid arthritis (JRA) include all of the following, EXCEPT:
A) the onset is before the age of 16
B) a chronic inflammation of one or more joint
C) rheumatoid factor (RF) positivity, demonstrated at least once
D) an arthritis of at least 6 week duration
E) if other possible chronic arthritides are excluded

PED-4.212.
Infectious and post-infections arthritises include all of the following, EXCEPT:
A) bacterial arthritis
B) viral and fungal arthritis
C) Lyme-arthritis
D) arthritis following a Yersinia infection
E) psoriatic arthritis

PED-4.213.
All of the following statements concerning the systemic form of juvenile rheumatoid arthritis (Still's disease) are correct, EXCEPT:
A) an intermittent fever is detected
B) maculo-papulous eruptions are observed, primarily on the trunk
C) mild to severe joint symptoms occur, which might be manifested several days or weeks after the onset of fever and the eruptions
D) a generalized lymphadenopathy is a usual complication
E) the white blood cell count is normal or low
F) the titer of the circulating immune complexes is high
G) it might be accompanied by pericarditis, myocarditis

PED-4.214.
All of the following rules of the therapy of juvenile rheumatoid arthritis (Still's disease) are correct, EXCEPT:
A) a steroid is administered first
B) non-steroid anti-inflammatory drugs have a primary role in the therapy
C) as soon as possible, complex physiotherapy should be started
D) in case of the development of more severe symptoms, the patient should be admitted to a pediatric department
E) growth retardation is a major hazard of using prolonged corticosteroid treatment in children
F) the patient should be seen by the family doctor once every
PED-4.215.
Possible therapeutic interventions in allergic diseases include all of
the following, EXCEPT:
A) avoiding contact with the allergen
B) drug therapy
C) antimicrobial drugs
D) immunotherapy (desensitization)
E) prophylaxis (e.g. breast feeding)

PED-4.216.
All of the following statements concerning urticaria are correct,
EXCEPT:
A) exposure to cold and certain foods might precipitate it
B) the direct cause is an early type hypersensitivity reaction associated
with the liberation of histamine
C) laryngeal edema is a possible complication
D) beta receptor agonists are the effective tools of therapy
E) cyproheptadine (Peritol), among others, is an effective medication
F) in severe cases epinephrine and steroid administration are indicated

PED-4.217.
Case Study:
An 18-month-old infant is brought to your office. The parents tell you
that the infant has always been pale; the infant's appetite is changing;
and they report recurrent upper respiratory infections. The laboratory
results are as follows: hemoglobin: 4.7 mmol/l; hematocrit: 25%: serum
iron: 6 µmol/l; total iron binding capacity (TIBC): 78 µmol/l;
reticulocyte count: 3%; platelet count: 200 G/l.
   What is the most likely diagnosis?
A) minor beta thalassemia
B) aplastic crisis of a hemolytic anemia
C) iron deficiency anemia
D) initial phase of a malignancy
E) sideroachrestic anemia

PED-4.218.
All of the following results are indicative for an iron deficiency,
EXCEPT:
A) a low serum iron level
B) an elevated total iron binding capacity (TIBC)
C) a low serum ferritin level
D) large, hypochromic red blood cells observed in the peripheral
   blood smear
E) anemia

PED-4.219.
Possible causes of folate deficiency anemia include all of the following,
EXCEPT:
A) malabsorption
B) parasite infestation
C) certain drugs
D) feeding with goat's milk
E) vitamin B 12 deficiency
F) increased utilization of folic acid due to hemolysis
A patient is found to have a macrocytic anemia. Possible causes include all of the following, EXCEPT:
A) celiac disease
B) pernicious anemia
C) chronic bleeding
D) methotrexate therapy
E) folic acid deficiency

Characteristics of infectious anemia include all of the following, EXCEPT:
A) a low serum iron level
B) a normal total iron binding capacity (TIBC)
C) a normal or elevated serum ferritin level
D) the ratio of the erythroid cells is decreased
E) the reticulocyte count is low

All of the following diseases are associated with a decreased production of red blood cells EXCEPT:
A) iron deficiency anemia
B) leukemia
C) hypothyroidism
D) the early type anemia of a premature newborn
E) renal failure

Case Study:
Which of the following is the most important therapeutic intervention in familial spherocytosis of a 6-year-old child, who frequently becomes anemic?
A) a transfusion of packed red blood cells
B) a splenectomy
C) the prolonged administration of steroids
D) immunosuppressive therapy
E) iron replacement therapy

Which of the following signs is necessary for the diagnosis of an autoimmune hemolytic anemia?
A) the concentration of hemoglobin is lower than 6.0 mmol/l
B) cold agglutination is detectable
C) the reticulocyte count is above 100 /μl
D) a positive direct Coombs' test

Which of the following interventions is not suitable for the therapy of idiopathic thrombocytopenic purpura (ITP)?
A) glucocorticoid therapy
B) intravenous immunoglobulin therapy
C) anabolic hormone therapy
D) plasmapheresis
E) azathioprine (Imuran) therapy

All of the following laboratory findings are characteristic for
idiopathic thrombocytopenic purpura (ITP), EXCEPT:
A) the platelet count is low
B) the prothrombin time (PT), the partial thromboplastin time (PTT) and the thrombin time (TT) are all normal
C) the white blood cell count is normal
D) the number of megakaryocytes in the bone marrow is low
E) clot retraction is decreased

PED-4.228.
Case Study:
A 2-week-old infant is admitted to your department with apparent skin hemorrhages characteristic for a coagulopathy. What is the most likely diagnosis?
A) hemophilia
B) prothrombin deficiency
C) fibrinogen deficiency
D) von Willebrand's disease
E) disseminated intravascular coagulation (DIC)

PED-4.229.
Case Study:
You are examining a 2 year-old boy. The child became febrile a few days ago and developed symptoms of an upper respiratory tract infection and diarrhea. The day before admission the color of the skin turned pale and yellow. The physical examination reveals a few petechiae and 1-2 superficial suffusions on the skin. The urine is beer-colored. The spleen is of normal size. The laboratory findings show a low hemoglobin, and hematocrit count; the platelet count is lower; a shift to the left is detected in the blood smear, fragmented red blood cells are observed. The concentration of the non-conjugated bilirubin in the serum is elevated. The BUN is elevated. Urinalysis is positive for protein and hemoglobin. What is the most likely diagnosis?
A) congenital spherocytosis
B) autoimmune hemolytic anemia
C) hemolytic uremic syndrome (HUS)
D) nephritis

PED-4.230.
Symptoms and signs of hemolytic uremic syndrome (HUS) include all of the following, EXCEPT:
A) fragmentocytes in the blood smear
B) thrombocytopenic hemorrhagic diathesis
C) oliguria; edema
D) hypotension
E) hyperkalemia
F) acidosis

PED-4.231.
Case Study:
You are examining an 18-month-old boy. The parents have noted the occurrence of large hematomas on the skin following mild traumas during the last 6 months. The results of the laboratory tests are not yet ready, when the parents inform you that the child's finger started to bleed again, two hours after the puncture. What is the most likely diagnosis?
A) thrombocytopenia
B) von Willebrand's disease  
C) hemophilia  
D) vasculopathy  
E) thrombocytopathy  

PED-4.232.  
Which of the following symptoms are characteristic for hemophilia?  
A) spontaneous skin and mucous membrane hemorrhages, a prolonged bleeding time and a normal platelet count  
B) large hematomas in areas that have been hit, a prolonged coagulation time and a decreased prothrombin concentration  
C) large hematomas in areas that have been hit, prolonged bleeding of wounds, a prolonged partial thromboplastin time (PTT), a normal prothrombin concentration and a normal platelet count  
D) large hematomas in areas that have been hit, prolonged bleeding of wounds, a prolonged partial thromboplastin time (PTT), a normal prothrombin concentration, a normal platelet count and a prolonged bleeding time  

PED-4.233.  
Which of the following statements is correct?  
A) the concentration of factor VIII in hemophilia is constant; the lower the concentration, the more severe the disease  
B) the concentration of factor VIII in hemophilia and in von Willebrand's disease changes with time  
C) the leading symptom of hemophilia is a prolongation of the bleeding time  
D) von Willebrand's disease is caused by a deficiency of the low molecular weight component of factor VIII  

PED-4.234.  
If a hemophilic patient undergoes a tooth extraction, what is the correct sequence of the involved steps?  
A) tooth extraction; administration of cryoprecipitate; liquid diet  
B) administration of cryoprecipitate; tooth extraction; administration of cryoprecipitate 1-2 times daily until healing of the wound; liquid diet  
C) administration of prothrombin complex concentrate (PCC); tooth extraction; PCC again; liquid diet  
D) tooth extraction; administration of vitamin K; transfusion of fresh blood; administration of epsilon-aminocaproic acid (EAC); liquid diet  

PED-4.235.  
All of the following statements concerning neutropenia are correct, EXCEPT:  
A) neutropenia is a decrease of the number of neutrophil granulocytes below 1.5 G/l  
B) neutropenia predisposes to infectious e.g. Gram-negative sepsis  
C) chronic neutropenia is usually an autosomal, dominantly inherited, mild disease which tends to improve spontaneously after years  
D) neutropenia occurs in morbilli  
E) neutropenia develops in hemorrhagic anemia  
F) neutropenia develops following ionizing irradiation  

PED-4.236.  
Case Study:
An 8-year-old, febrile child is admitted to the pediatric department. Large lymph nodes are palpable on both sides of the neck. The examination reveals pharyngitis and hepatosplenomegaly. No symptoms of anemia or bleeding are observed. Atypical mononuclear cells are seen in the peripheral blood smear. What is the most likely diagnosis?
A) leukemia
B) toxoplasmosis
C) lymphoma
D) infectious mononucleosis
E) cytomegalovirus infection

PED-4.237.
The occurrence of which of the following combination of symptoms is the most suggestive of leukemia?
A) fever; enlarged cervical lymph nodes; hepatosplenomegaly; a normal hemoglobin, hematocrit and platelet count, an elevated white blood cell count; granulocytopenia and atypical mononuclear cells in the blood smear
B) fever; pain in the extremities; a low hemoglobin and hematocrit; moderately decreased white blood cell and platelet count, in the smear: a few granulocytes, the rest are lymphocyte-like mononuclear cells and the nuclei are looser
C) no fever; a normal hemoglobin and hematocrit; a normal white blood cell count; a decreased platelet count; lymphocytosis in the blood smear
D) fever, a normal platelet count; a lower hemoglobin and hematocrit; an elevated white blood cell count; the blood smear reveals a shift to the left

PED-4.238.
What is to be done if a leukemia or other malignancy is suspected in a patient?
A) regardless of the general clinical state, the patient is referred to an oncology department
B) management of the life-threatening conditions; following this, the patient is referred to an oncology department
C) the patient is referred to an oncology department following performance of the necessary tests and a determination of the exact diagnosis
D) the patient is referred to an oncology department after performing the necessary tests, determination of the diagnosis and introduction of the indicated therapy
E) a biopsy sample is taken for histologic examination; determination of the diagnosis; following this, the patient is referred to an oncology department

PED-4.239. Characteristics of histiocytosis (reticuloendotheliosis) include all of the following, EXCEPT:
A) the etiology is obscure
B) the developing nodes consist of histiocytes, eosinophils and plasma cells
C) the nodes in the bone are surrounded by reactive alterations of the bone
D) Letterer-Siwe disease most frequently develops during infancy
E) Hand-Schüller-Christian disease most frequently develops during young childhood
F) the development of a solitary eosinophil granuloma is characteristic
in older children and adults

PED-4.240.
Signs of histiocytosis (reticuloendotheliosis) include all of the following, EXCEPT:
A) the eosinophilic granuloma causes sharply delineated bone defects and a swelling is palpable over these defects
B) Hand-Schüller-Christian disease is the occurrence of multiple eosinophilic granulomas which, beside affecting bones, may affect the viscera as well
C) if no visceral involvement is present, the disease improves spontaneously after several months and may relapse
D) the granulomas may cause pathologic fractures and may affect the base of the skull
E) the granulomas may be associated with papulous eruptions, petechiae, chronic diseases of the ear and infiltration of the lung
F) the bone marrow and peripheral blood smears are usually unrevealing in Letterer-Siwe disease

PED-4.241.
What are the symptoms of histiocytosis X (Langerhans cell histiocytosis) during infancy?
A) a hemorrhagic diathesis is always present
B) the hair and nails exhibit characteristic changes
C) fever, weight loss, partially hemorrhagic papules on the skin, hepatosplenomegaly
D) a hemolytic anemia
E) the palms of the hands and the feet are greasy

PED-4.242.
Which of the following interventions is incorrect in the therapy of disseminated intravascular coagulation (DIC)?
A) the elimination of the underlying cause
B) the administration of fresh plasma
C) the administration of platelet concentrate
D) the administration of prothrombin complex concentrate (PCC)
E) the administration of heparin but only in selected cases
F) the administration of epsilon-aminocaproic acid (EAC) in each case

PED-4.243.
All of the following diseases cause a short stature, EXCEPT:
A) Turner's syndrome
B) hypothyroidism
C) chondrodysplasia
D) Klinefelter's syndrome
E) Cushing's disease

PED-4.244.
All of the following statements concerning diabetes insipidus in infancy are correct, EXCEPT:
A) it may be the cause of a fever of unknown origin
B) cerebral damage is a possible cause
C) it may cause cerebral damage
D) a concentration test with vasopressin-analogues is indicated, during which the patient is allowed to drink freely
E) natriuretics decrease the polyuria
F) a protein-restricted diet decreases the polyuria, but this is not the appropriate therapy

PED-4.245.
All of the following statements concerning delayed puberty are correct, EXCEPT:
A) a diagnosis of delayed puberty is established if signs of the onset of adolescence are not detectable until after the age of 13 in girls or 15 in boys
B) majority of causes is constitutionally delayed puberty
C) a pituitary or hypothalamic tumor is a possible cause
D) it predisposes to diabetes insipidus
E) the testosterone level is always low in boy patients

PED-4.246.
All of the following statements concerning incomplete precocious puberty associated with feminization are correct, EXCEPT:
A) the feminization is caused by an excess of estrogen, the possible cause of which is an ovarian or adrenal tumor
B) the breasts are enlarged in both sexes
C) the maturation of bone is normal but somatic growth is faster than normal
D) the external genitals develop too rapidly in girls
E) the serum testosterone level is normal relative to the age of the patient
F) an ultrasound examination is important for the diagnosis

PED-4.247.
All of the following statements concerning complete precocious puberty are correct, EXCEPT:
A) it is caused by an early activation of the hypothalamic-pituitary axis
B) possible causes of this organic developmental abnormality are inflammations and tumors
C) it is associated with the early development of secondary sex characteristics
D) it is associated with other symptoms of the central nervous system abnormality
E) it is frequently associated with elevated ADH production
F) androgen antagonists and drugs which decrease gonadotropic hormone production are used for the therapy

PED-4.248.
All of the following statements concerning congenital goiter are correct, EXCEPT:
A) antithyroid therapy or the administration of drugs containing iodine to the pregnant mother are a possible cause of this goiter
B) a congenital defect in the metabolism of iodine and an iodine deficiency are possible causes
C) the ingestion of large amounts of iodine would never cause goiter
D) congenital goiter may be associated with hypothyroidism
E) a newborn with congenital goiter may exhibit symptoms of a respiratory abnormality
F) hyperthyroidism of a newborn presenting in association with goiter is related to hypothyroidism in the mother

PED-4.249.
All of the following statements concerning congenital hypothyroidism are correct, EXCEPT:
A) none, or very few physical symptoms are observed at birth
B) anemia can develop
C) the appetite is decreased but the infant does not seem to be thin
D) the early introduction of therapeutic measures gives good results
E) the serum TSH level is low

PED-4.250.
Which of the following alterations of the plasma levels of thyroid hormones are characteristic for congenital primary hypothyroidism?
A) the TSH is decreased and the T4 is elevated
B) the TSH is elevated and the T4 is normal
C) both the TSH and T4 are elevated
D) the TSH is elevated and the T4 is decreased
E) both the TSH and T4 are decreased

PED-4.251.
When is it recommended to start the therapy of congenital hypothyroidism?
A) immediately after ablation, when the infant does not receive thyroid hormone with the milk any longer
B) when the serum TSH level starts to elevate
C) as soon as possible, having received the result of the neonatal screening test, because any hesitation could markedly worsen the prognosis
D) if the result of the neonatal screening test is positive and the heart rate is less than 80/min

PED-4.252.
The detection of abnormal external genitalia during the neonatal period necessitates the determination of all of the following, EXCEPT:
A) the urinary 17-ketosteroid level
B) the serum 17-OH-progesterone level
C) the serum FSH-LH level
D) the karyotype
E) the serum Na+ and K+ concentration

PED-4.253.
All of the following interventions have to be carried out during the treatment of a salt-losing syndrome in the neonate, EXCEPT:
A) blood is drawn immediately for the determination of 17-OHprogesterone
B) immediate fluid replacement
C) the infusion of a high sodium concentration solution
D) the infusion of a high potassium concentration solution
E) the intramuscular administration of mineralocorticoids
F) the intravenous administration of glucocorticoids

PED-4.254.
All of the following interventions have to be completed during the therapy of a salt-losing adrenogenital syndrome of a girl, EXCEPT:
A) the periodic control of the serum sodium and potassium levels
B) control of the blood pressure
C) bone ossification nuclei should be checked repeatedly
D) an enlarged clitoris has to be resected
E) elimination of the anatomical cause of the urine retention in
the vaginal orifice
F) regular estimation of the mineralocorticoid, glucocorticoid and salt requirements
G) symptomatic therapy in case of fever and vomiting

PED-4.255.
Side-effects of corticosteroids include all of the following, EXCEPT:
A) cushingoid obesity
B) potassium loss
C) hypertension
D) gastric ulcer
E) susceptibility to poorly symptomatic infections
F) complete precocious puberty
G) osteoporosis

PED-4.256.
All of the following statements concerning abnormalities of hormone production in the adrenal cortex are correct, EXCEPT:
A) a deficiency of the 21-hydroxylase enzyme is associated with mineralocorticoid overproduction
B) a deficiency of the 21-hydroxylase enzyme is associated with ACTH overproduction
C) a deficiency of the 17-hydroxylase enzyme is associated with mineralocorticoid overproduction
D) a deficiency of the 17-hydroxylase enzyme is associated with ACTH overproduction

PED-4.257.
Specify the first step in the therapy of a diabetic ketoacidotic coma:
A) correction of the acidosis with NaHCO3
B) a puncture of the cerebrospinal fluid
C) fluid replacement with the infusion of a solution containing no glucose and the administration of a rapidly acting insulin preparation intravenously
D) the subcutaneous administration of insulin
E) fluid replacement with the infusion of a glucose-containing solution

PED-4.258.
What is the optimal rate of the decrease of the blood glucose concentration, over an hour, during the therapy of a diabetic coma?
A) 5 mmol/l
B) 10 mmol/l
C) 15 mmol/l
D) 20 mmol/l
E) 25 mmol/l

PED-4.259
Case Study:
A treated diabetic child loses consciousness. Glucose is found in the urine. What are your considerations before any further interventions?
A) the possibility of hypoglycemia is considered unlikely
B) the patient is likely to have a hyperosmolar coma because the respiration is not acidotic
C) the blood glucose level should be checked with a finger stick and attempts should be made to clarify the antecedents of the attack
PED-4.260.
Case Study:
A 13-year-old girl with treated diabetes is brought to you because of a loss of consciousness. Which of the following should you check immediately?
A) if a respiratory abnormality is present, or if skin is cold and dry
B) if the patient received an insulin dose in the normal time
C) if the patient missed a meal
D) if an additional acute disease is present
E) if the patient has experienced emotional stress
F) if the patient experienced some type of head trauma
G) if some type of drug intoxication is present
H) all of the above

PED-4.261.
Case Study:
A 13-year-old girl with treated diabetes is brought to you because of a loss of consciousness. The time of the last insulin injection is unknown. Her skin is dry; respiration is more frequent and deeper. Which of the following do you recommend?
A) the girl should be taken home and the prescribed insulin dose administered
B) to measure her blood glucose and having the result, decide to refer the patient to the hospital or release her home
C) refer the patient to a hospital

PED-4.262.
What is the following calculation used for?
\[ \frac{(U,V)}{P} \]
- if \( U \) is the urinary concentration of a given substance, \( V \) is the urine volume during a unit of time, \( P \) is the concentration of the given substance in the plasma -
A) the renal clearance of a given substance
B) the renal plasma flow
C) the renal blood flow
D) the tubular secretion of a given substance
E) the tubular reabsorption of a given substance

PED-4.263.
Possible causes of hematuria include all of the following, EXCEPT:
A) acute glomerulonephritis
B) cystitis
C) nephrolithiasis
D) Henoch-Schönlein purpura
E) heavy physical exercise
F) mumps

PED-4.264.
What has to be done in case of recurrent pyuria?
A) specific drug therapy
B) morphology and function of the kidneys plus the lower and upper urinary tract should be examined
C) a concentration test; followed by the examinations in point (B) above
What is significant bacteriuria?
A) a few colonies of the same microorganism
B) over 100,000/ml of a mixed cultivation
C) over 100,000/ml of the same microorganism
D) over 1,000/ml E. coli and proteus
E) over 1,000,000/ml of a mixed cultivation

All of the following statements concerning acute poststreptococcal glomerulonephritis are correct, EXCEPT:
A) it can be prevented with the early antibiotic therapy of streptococcal infections of the upper respiratory tract and the skin
B) exacerbation of an acute glomerulonephritis is frequent in the course of a chronic nephritis
C) the prognosis of the disease in childhood is usually good
D) a hypertensive encephalopathy may be the first symptom of the disease

Possible complications of acute poststreptococcal glomerulonephritis include all of the following, EXCEPT:
A) hyperkalemia
B) hypermagnesiemia
C) encephalopathy
D) pulmonary edema
E) anuria

Typical laboratory alterations in an acute poststreptococcal glomerulonephritis include all of the following, EXCEPT:
A) an increased red blood cell sedimentation rate
B) a normal or increased C₃ complement level in the serum
C) hematuria, proteinuria and granular casts in the urine
D) the antistreptolysin titer in the serum is usually elevated
E) elevated serum creatinine and blood urea nitrogen levels
F) anemia

Common complications of an acute poststreptococcal glomerulonephritis include all of the following, EXCEPT:
A) left-sided heart failure
B) encephalopathy
C) hyperkalemia
D) uremia
E) hemorrhagic diathesis

All of the following statements concerning idiopathic nephrotic syndrome are correct, EXCEPT:
A) the development of edema is caused by hypoproteinemia
B) an increased reabsorption of sodium is an additional cause for the edema formation
C) diarrhea is a possible complication of the condition
D) serum lipid levels are modestly decreased
PED-4.271.
All of the following statements concerning idiopathic nephrotic syndrome are correct, EXCEPT:
A) the onset is usually between 1-6 years of age
B) the histology reveals a "minimal change" process
C) the early development of renal failure is characteristic
D) patients usually do not exhibit hypertension
E) hyperlipidemia is usually present

PED-4.272.
Which of the following drugs is used first during the therapy of the "minimal change" form of the nephrotic syndrome of childhood?
A) prednisone
B) chlorambucil
C) cyclophosphamide
D) prednisone + chlorambucil
E) prednisone + cyclophosphamide

PED-4.273.
When is a patient with a nephrotic syndrome considered steroidresistant?
A) if microhematuria is detected from the beginning
B) if high doses of steroid are needed to relieve symptoms
C) if a marked cushingoid type constitution is observed
D) if proteinuria is present following 2 months of prednisone therapy (60 mg/m² administered continuously for 4 weeks, then alternatingly for 4 weeks)
E) if hypertension develops during treatment

PED-4.274.
The surgical therapy of vesicoureteral reflux is indicated:
A) in case of prolonged and marked reflux or if renal fibrosis progresses
B) if, following 3 months of antibiotic therapy the reflux is still present
C) if the reflux is bilateral
D) never, the reflux can improve without therapy

PED-4.275.
Possible complications of a unilateral renal vas aberrans include all of the following, EXCEPT:
A) obstruction of the ureter
B) enlargement of the pyelon
C) recurrent abdominal pain
D) oliguria
E) hematuria

PED-4.276.
All of the following statements concerning factors which determine renal stone formation are correct, EXCEPT:
A) the most common cause of the formation of calcium stones during childhood is idiopathic hypercalciuria
B) urinary tract infections and an alkaline urine pH favor the formation of MgNH₄-phosphate stones
C) the formation of calcium-phosphate stones can be prevented with regular vitamin D administration
D) urate stones when there is a massive tumor cell breakdown
E) the administration of allopurinol and a low purine content diet
    influence the formation of urate stones

PED-4.277.
Which of the following statements concerning hypercalciuria is FALSE?
A) primary hyperparathyroidism causes hypercalciuria
B) idiopathic hypercalciuria is a frequent cause of hematuria
C) in the renal form, even if the calcium content of the diet is low,
    hypercalciuria can be detected
D) a low calcium content diet diminishes the absorptive form
E) the most efficient therapy is the administration of a high dose
    of vitamin D$_3$
F) hydrochlorothiazide (Hypothiazid) can decrease calcium excretion
    in renal hypercalciuria

PED-4.278.
All of the following statements concerning lower urinary tract infections
are correct, EXCEPT:
A) leukocyturia and bacteriuria are present
B) bed-rest and the intake of large amounts of fluid are important
    parts of the therapy
C) before receiving the bacteriological test results, prednisolone is
    administered
D) specific antibacterial therapy is continued for at least for 2 weeks
E) a urinalysis control is required 2 weeks after the discontinuation
    of therapy

PED-4.279.
Symptoms usually detectable in acute renal failure include all of the
following, EXCEPT:
A) the serum creatinine concentration is elevated
B) hyperkalemia
C) hyponatremia
D) hypophosphatemia
E) acidosis

PED-4.280.
Therapeutic interventions suitable for the therapy of acute renal failure
include all of the following, EXCEPT:
A) fluid replacement in case of oligemia
B) furosemide is administered as a diuretic
C) 20% mannitol solution is administered
D) further fluid intake is seriously restricted
E) a solution containing 50% glucose is infused

PED-4.281.
Recognized causes of chronic renal failure in childhood include all of
the following, EXCEPT:
A) chronic pyelonephritis
B) approximately 50% of all acute poststreptococcal
    glomerulonephritis cases
C) nephrolithiasis
D) membranoproliferative glomerulonephritis
E) focal glomerulosclerosis
PED-4.282.
All of the following interventions are used for the treatment of chronic
renal failure (endogenous creatinine clearance is 40 ml/min/ 1.73 m²),
EXCEPT:
A) protein intake is strongly restricted
B) salt intake is restricted if edema or hypertension develops
C) water intake is not restricted
D) occasionally 1,25(OH)²-D³ is administered
E) a transfusion is only indicated if the anemia is severe

PED-4.283.
Characteristics of hemolytic uremic syndrome (HUS) include all of
the following, EXCEPT:
A) initial symptoms are diarrhea, vomiting and fever
B) later symptoms include pallor, suffusions on the skin, oligo-anuria
C) anemia, thrombocytopenia and uremia can develop
D) microcytosis is observed on the blood smear
E) the serum creatinine concentration is normal

PED-4.284.
Characteristics of a cerebral paresis in childhood include all of the
following, EXCEPT:
A) their possible causes are early central nervous system lesions
   such as hypoxia, intracranial hemorrhages and meningitis
B) they are always associated with severe mental retardation
C) movement disorders originating in the central nervous system
   dominate the clinical picture
D) epilepsy, dyslexia and abnormalities of the special senses are
   common complications
E) rehabilitation training at an early age may result in considerable
   improvement

PED-4.285.
Which forms of neurorehabilitational therapy are indicated in a
young infant with cerebral damage, to overcome the disturbances of
movement coordination and the regulation of muscular tone?
A) frequent physical activity, regular movement and rotation of
   the extremities
B) regular massage and moving of the hypotonic extremities
C) drug therapy (muscle relaxants in case of increased muscular
   tone)
D) regular training of the congenital movement patterns
E) weekly training of the congenital, elementary movement
   patterns

PED-4.286.
Possible intracranial causes of a headache include all of the following,
EXCEPT:
A) migraine
B) cerebral edema
C) hypertension
D) headache following lumbar puncture
E) meningitis and encephalitis
F) Guillain-Barré syndrome
G) cerebral tumor
Recognized causes of vomiting include all of the following, EXCEPT:
A) cerebral edema
B) meningism and meningitis
C) cerebellar tumor
D) cerebral abscess
E) hypernatremia
F) migraine

Which of the following interventions should be avoided in case of cerebellar edema?
A) hyperventilation, to decrease the pCO$_2$ to 25-27 mmHg
B) the administration of mannitol and furosemide
C) the intravenous administration of glycerin
D) treatment of the underlying disease
E) ventricular drainage
F) high dose steroid administration

All of the following statements concerning a cerebellar abscess are correct, EXCEPT:
A) it may be a complication of otitis, sinusitis or head trauma
B) a cardiac anomaly with a right to left shunt predisposes for the condition
C) a cerebrospinal fluid pressure increase is possible
D) focal neurologic symptoms might develop
E) the cell count in the cerebrospinal fluid is always elevated

All of the following statements concerning a chronic subdural hematoma in infancy are correct, EXCEPT:
A) development of the hemorrhage takes weeks to months
B) the cause frequently remains obscure
C) the fonticuli are hard and hemorrhages are observed in the retina
D) hydrocephalus does not develop because of the slow progression of the hemorrhage

All of the following statements concerning the Guillain-Barré syndrome are correct, EXCEPT:
A) a symmetrical, flaccid paralysis and abnormality of sensation are characteristic for the disease
B) the disease improves spontaneously despite its long clinical course
C) cerebrospinal fluid tests reveal markedly elevated cell counts with normal protein and glucose concentrations
D) differentiation of the disease from poliomyelitis is difficult in some cases

All of the following statements concerning peripheral facial nerve paralysis are correct, EXCEPT:
A) possible causes include birth trauma and edema formation in the neonatal period
B) the cause of an isolated facial paralysis of an older child usually remains obscure
C) Borrelia burgdorferi may have a role in the development of the paralysis
D) otitis media and tumors are rare causes
E) an early operation is indicated in all forms of the facial nerve paralysis
F) the administration of steroids is occasionally effective

PED-4.293. Methods suitable for the differentiation of myopathies and neurogenic paresis include all of the following, EXCEPT:
A) nerve conduction tests
B) electromyography
C) histology of a muscle biopsy preparation
D) electrolyte determinations in a muscle biopsy preparation
E) the determination of isoenzymes
F) genetic analysis

PED-4.294. All of the following statements concerning progressive muscular dystrophy are correct, EXCEPT:
A) 70% of the Duchenne-type, infantile form develops in boys
B) the Duchenne-type dystrophy develops during the 3rd-5th years and involves the lower extremities and the pelvis
C) the prognosis of the Duchenne-type is poor because of the progressively decreasing ventilation
D) the inheritance pattern of the juvenile form is autosomal recessive
E) the adult, autosomal dominant type, is characterized by facioscapulo-humeral localization
F) the condition is associated with elevated activities of creatine kinase, aldolase and other enzymes in the serum

PED-4.295. All of the following statements about the epilepsy characterized by primary generalized grand mal seizures are correct, EXCEPT:
A) the seizures are characterized by flexion or extension positions of the lower extremities
B) despite appropriate therapy, dementia develops in the majority of cases
C) phenytoin, phenobarbital and valproate are the most important therapeutic drugs
D) an interictal EEG is not sufficient for the diagnosis

PED-4.296. All of the following statements concerning the diagnostic value of the EEG in epilepsy are correct, EXCEPT:
A) it is usually the most important test for the diagnosis of epilepsy
B) a lack of abnormalities on the interictal EEG does not exclude epilepsy
C) the presence of abnormalities on the interictal EEG proves the diagnosis
D) occasionally sleep deprivation, light stimuli, hyperventilation, and an EEG during sleep or anesthesia may be necessary for the diagnosis
E) EEG control is necessary in the symptomless patient once a year
PED-4.297.
All of the following statements concerning the therapy of epilepsy are correct, EXCEPT:
A) the therapeutic drug may be withdrawn only after a symptomless period of several years
B) the duration of drug therapy depends on the type of epilepsy
C) in case of the presence of EEG abnormalities the therapeutic drug should not be withdrawn
D) the time of discontinuing drug therapy also depends on the age of the patient

PED-4.298.
Symptoms of a cerebellar tumor in childhood include all of the following, EXCEPT:
A) difficulties of coordination
B) nystagmus
C) cerebral vomiting, especially in the morning
D) obesity

PED-4.299.
What is the prognosis of minimal cerebral dysfunction (MCD) or the chronic organic psychosyndrome in childhood? Which of the following statements is FALSE?
A) despite early diagnosis and care, the abnormality passes through childhood and adolescence and is present until adulthood
B) if the condition is undetected, the child becomes frustrated and neurotic
C) tolerance by the family and in the school prevents any abnormalities in personality development
D) drug therapy for the disorder is also possible

PED-4.300.
Which of the following microorganisms cause osteomyelitis most frequently?
A) Haemophilus influenzae
B) Salmonella
C) Streptococcus pyogenes
D) Staphylococcus aureus

PED-4.301
All of the following statements about the therapy of acute osteomyelitis are correct, EXCEPT:
A) a blood sample is taken immediately for hemoculture
B) therapy is started after receiving the bacteriology results
C) therapy is continued for 4 weeks following cessation of the acute symptoms
D) the earliest alterations on the x-ray develop 10-14 clays after the onset of the disease
E) immobilization of the affected extremity is important

PED-4.302.
All of the following statements about purulent arthritis are correct, EXCEPT:
A) the clinical picture is similar to that of osteomyelitis
B) a hemoculture is needed for the diagnosis to be made
C) there is no need for diagnostic/therapeutic punctures
D) therapy is started with antibiotics
E) joint movements may become restricted following late or insufficient therapy

PED-4.304.
What is the most important therapeutic step in a strongly suspected diphtheria if diphtheria antitoxin is not detectable in the serum?
A) antibiotic administration
B) corticosteroid administration
C) diphtheria antitoxin administration
D) high dose vitamin B1 supplementation

PED-4.305.
Specify the combination of symptoms which is the most characteristic for pertussis:
A) RBC sedimentation rate: 10 mm/h; WBC count: 14,000 /ul; granulocytes: 70%
B) RBC sedimentation rate: 60 mm/h; WBC count: 18,000 /ul; granulocytes: 80%
C) RBC sedimentation rate: 3 mm/h; WBC count: 20,000 /ul; lymphocytes: 80%
D) RBC sedimentation rate: 120 mm/h; WBC count: 6,000 /ul; lymphocytes: 50%

PED-4.306.
Specify the pathogenic agent of the epidemic form of scarlet fever:
A) Clostridium difficile
B) Staphylococcus aureus
C) Streptococcus pneumoniae
D) Branhamella catarrhalis
E) Streptococcus pyogenes
F) Staphylococcus epidermidis

PED-4.307.
Possible complications of scarlet fever include all of the following, EXCEPT:
A) submandibular lymphadenitis
B) otitis media
C) subacute sclerosing panencephalitis
D) acute glomerulonephritis
E) peritonsillar abscess
F) rheumatic fever

PED-4.308.
Possible complications of measles include all of the following, EXCEPT:
A) conjunctivitis
B) rhinitis
C) tracheobronchitis
D) lamellar desquamation
E) Koplik's spots
F) maculose eruptions

PED-4.309.
Which of the following statements concerning Koplik's spots detectable in measles is correct?
A) they develop synchronously with the eruptions on the skin
B) they are usually seen in the late phase of the catarrhal incubation period
C) they are most common during the reconvalescent phase
D) the cause is a bacterial superinfection

PED-4.310.
Specify the type of eruption characteristic for measles:
A) vesiculo-pustulous eruptions
B) confluent maculous eruptions
C) confluent eruptions consisting of punctual elements
D) erythema annulare
E) eruptions consisting of isolated maculo-papulous elements
F) sharply delineated, diffuse erythema

PED-4.311.
Which of the following statements concerning the pathogenic agent of varicella (chickenpox) and herpes zoster is correct?
A) it is the same virus in both diseases
B) both pathogenic agents are viruses of the herpesvirus group but they are different in their antigen structure
C) the pathogenic agent of varicella is a virus, the pathogenic agent of zoster is unknown
D) pathogenic cause of zoster is the type I herpes simplex virus

PED-4.312.
Which of the following statements concerning the transmission of varicella is correct?
A) it is only transmitted in case of very close contact (family members)
B) the most common way is droplet infection, but the droplets containing the virus may travel far by air currents, so close contact is not needed for the transmission
C) by desquamated crusts containing virulent viruses, therefore the infection is usually transmitted by these crusts to the environment
D) the disease is also transmitted by blood and blood preparations

PED-4.313.
Which of the following statements concerning varicella is correct?
A) desquamated crusts containing the virus can transmit the disease
B) varicella and herpes zoster are caused by the same virus
C) eruptions observed in varicella are easily differentiated from those in a herpes simplex infection
D) school age children are routinely vaccinated
E) zoster immunoglobulin has no prophylactic value in children

PED-4.314.
Which of the following statements about a patient suffering from varicella is correct?
A) eruptions are treated with keratoplastic ointment
B) the patient should not have a bath until the eruptions have crusted
C) the patient should be bathed regularly; neutral powder is applied to relieve itching
D) oral acyclovir (Zovirax) therapy is indicated
E) erythromycin therapy is needed until the eruptions have crusted to prevent bacterial superinfection

PED-4.315.
Which of the following tests is needed as a routine control following the healing of uncomplicated varicella (chickenpox) in an otherwise healthy child?
A) determination of the specific antibody
B) a urinalysis
C) the red blood cell sedimentation rate, and complete blood cell and differential counts
D) determination of the platelet count
E) an EEG
F) an ECG
G) a neurologic examination
H) none of the above

PED-4.316.
All of the following diseases may cause swelling of the parotid gland, EXCEPT:
A) Mikulitz's syndrome
B) neuroblastoma
C) sialolithiasis
D) mumps
E) Sjögren's syndrome

PED-4.317.
Possible manifestations of a mumps virus infection include all of the following, EXCEPT:
A) parotitis
B) submandibular lymphadenitis
C) orchitis
D) meningoencephalitis
E) pancreatitis

PED-4.318.
Which of the following alterations in the cerebrospinal fluid is characteristic for the meningitis on the 3rd day of a mumps infection?
A) a turbid liquor; an elevated cell count; an elevated protein concentration; granulocyte excess in the sediment
B) opalescent or clear liquor; a modestly elevated cell count and protein concentration; an excess of mononuclear cells in the sediment
C) clear liquor; minimal elevation of the cell count; a markedly elevated protein concentration; low glucose concentration

PED-4.319.
Which of the following statements about exanthema subitum is correct?
A) the peripheral blood smear is of diagnostic value
B) the eruptions are present for 10 days
C) the 3-day long initial phase is characterized by fever, which might occasionally cause eclampsia; synchronously with the cessation of fever macular eruptions develop and exist for 1-2 days
D) possible complications include encephalitis, pneumonia, arthritis

PED-4.320.
All of the following diseases may be transmitted by a cat, EXCEPT:
A) herpetic gingivostomatitis
B) toxoplasmosis
C) lyssa (rabies)
D) benign lymphoreticulosis

PED-4.321.
All of the following statements concerning encephalitis are correct, EXCEPT:
A) the onset of herpetic encephalitis is abrupt
B) herpetic encephalitis is usually associated with focal symptoms
C) the most common nervous system complication of varicella encephalitis is cerebellar ataxia
D) in tick-borne viral encephalitis the fever pattern is biphasic
E) in enterovirus encephalitis, nervous system symptoms develop in the first phase of the febrile period

PED-4.322.
All of the following are possible manifestations of a herpes simplex virus infection, EXCEPT:
A) gingivostomatitis
B) herpes labialis
C) herpes zoster
D) meningoencephalitis
E) keratitis
F) genital herpes

PED-4.323.
Which of the following statements about toxoplasmosis is correct?
A) if the newborn of a mother has congenital toxoplasmosis, the next child of the mother is very likely to have the same disease
B) maternal infection during the first trimester is less dangerous than in the third trimester
C) a toxoplasma infection during pregnancy is usually symptomatic
D) the majority of acute maternal diseases do not cause congenital infection
E) acquired toxoplasmosis causes cerebral paresis

PED-4.324.
All of the following statements concerning acquired toxoplasmosis are correct, EXCEPT:
A) asymptomatic disease, passing through into the adulthood, is common, especially in rural areas
B) toxoplasma infection is frequent all over the world
C) the involved lymph nodes usually suppurate
D) the clinical picture of the disease is similar to that of mononucleosis
E) the drug of first choice is trimethoprim-sulfamethoxazole (Sumetrolim)

PED-4.325.
All of the following statements about brucellosis are correct, EXCEPT:
A) it is transmitted by the milk of infected cows
B) the incubation period ranges from a few days to a few months
C) the development of fever may be gradual or abrupt
D) lymphadenopathy and hepatosplenomegaly are commonly associated
E) a positive brucellin cutaneous test proves the active disease
F) the disease is diagnosed with serological tests

PED-4.326.
All of the following statements concerning primary pulmonary tuberculosis are correct, EXCEPT:
A) the incubation period is 2-8 weeks
B) the clinical course of most cases is benign, often asymptomatic; the primary complex is calcified after 6 months
C) the most common symptoms are cough, fever and night sweats
D) affection of the bronchial wall is rare
E) the intracutaneous test becomes positive 8 weeks after the infection

PED-4.327.
What is the composition of the DPT vaccine?
A) diphtheria anatoxin, pertussis anatoxin, tetanus anatoxin
B) diphtheria and pertussis anatoxin, attenuated tetanus bacterium
C) diphtheria anatoxin, killed Bordetella pertussis and Clostridium tetani
D) diphtheria anatoxin, killed Bordetella pertussis, tetanus anatoxin

PED-4.328.
Case Study:
In a 4-month-old infant, 2 hours after a DPT I/b vaccination, fever and eclampsia develop. Which of the following considerations concerning further vaccinations are correct?
A) the administration of diazepam (Seduxen) should precede further vaccinations
B) the next (DPT I/c) vaccination should be skipped
C) any following vaccines should only contain diphtheria and tetanus components
D) steroid administration should precede the subsequent DTP vaccinations

PED-4.329.
Case Study:
An open wound of a 5-year-old child has been contaminated with soil. Which of the following possibilities of tetanus prophylaxis would you apply besides appropriate wound toilette (the child received DPT II at the age of 3)?
A) besides careful wound toilette, no intervention is indicated
B) bring forward the DPT III vaccination time; vaccination with tetanus antitoxin
C) administration of tetanus antitoxin; the DPT III is administered on the date scheduled
D) penicillin therapy to prevent a Clostridium tetani infection

PED-4.330.
Intoxications with all of the following drugs are associated with a skin rash, EXCEPT:
A) atropine
B) digitalis
C) carbon monoxide
D) cyanide

PED-4.331.
Case Study:
A 13-year-old girl had recently had psychic problems. Her parents found her unconscious at home and called for a doctor. On examination, the girl is in a deep coma, areflexic, her breathing is superficial, and her pupils do not respond to light. Her pulse rate is high and the pulse is suppressible. Intoxication with which of the following drugs is the most likely cause of her symptoms?
A) morphine
B) barbiturates
C) acetylsalicylic acid
D) methophenazate (Frenolon)

PED-4.332.
The therapy of Amanita phalloides intoxication includes all of the following, EXCEPT:
A) gastric lavage, even after 24 hours
B) continuous duodenal aspiration
C) intestinal irrigation
D) the subcutaneous administration of heparin
E) infusion

PED-4.333.
Which of the following interventions should not be done in gasoline intoxication?
A) gastric lavage
B) the administration of liquid paraffin
C) the administration of antibiotics
D) the administration of drugs affecting the circulation

PED-4.334.
What is the first symptom of salicylate intoxication?
A) skin and mucosal hemorrhages
B) sweating
C) hyperventilation
D) coma
E) spasms

PED-4.335.
Conditions which cause fever directly include all of the following, EXCEPT:
A) diabetes insipidus during infancy
B) blood transfusions
C) infections
D) hyperparathyroidism
E) autoimmune diseases
F) toxic goiter

PED-4.336.
Possible causes of a fever of non-infectious origin include all of the following, EXCEPT:
A) hyperthyroidism
B) neuropathy
C) hypernatremia
D) a regulatory imbalance of the autonomic nervous system
E) epilepsy
F) atropine intoxication

PED-4.337.
Conditions which may be associated with respiratory arrest include all of the following, EXCEPT:
A) an acute airway obstruction
B) an asthmatic crisis
C) bilateral valve pneumothorax
D) severe hypercapnia
E) impaction of the medulla oblongata (tonsillar herniation)
PED-4.338.
What is the correct sequence of the steps of resuscitation?
A) providing open airways; cardiac massage; administration of drugs
B) mouth to mouth breathing; cardiac massage; administration of drugs and infusions; ECG control
C) providing open airways; mouth to mouth breathing; cardiac massage; administration of drugs and infusions; ECG control
D) cardiac massage; mouth to mouth breathing, drug administration

PED-4.339.
Which is the most straight-forward method to ensure ventilation of the lung in a state of clinical death?
A) the administration of oxygen via a nasal-pharyngeal tube
B) thoracic compression
C) following aspiration of the airways, the simultaneous application of mouth to mouth breathing and cardiac massage
D) the administration of drugs which stimulate respiration and cardiac function
E) artificial maintenance of the circulation

PED-4.340.
Possible complications of positive pressure artificial respiration include all of the following, EXCEPT:
A) hypoventilation
B) hyperventilation
C) gastric distension
D) cardiac failure
E) peripheral circulatory failure
F) pneumothorax; pneumomediastinum
G) iatrogenic infection

PED-4.341.
Therapeutic interventions applied in pulmonary edema include all of the following, EXCEPT:
A) treatment of the underlying disease
B) administration of 100% oxygen via a laryngeal tube or mask
C) CPAP mode respiration
D) respiration with positive airway pressure
E) vigorous diuretic treatment
F) the administration of digitalis and aminophylline

PED-4.342.
Which of the following are possible symptoms of septic shock?
A) isosthenuric polyuria
B) respiratory alkalosis; a loss of consciousness; a blood pressure drop; acrocyanosis; azotemia; disseminated intravascular coagulation
C) urticaria; laryngeal edema; asthmatic crisis
D) none of the above

PED-4.343.
Symptoms of the late phase of septic shock include all of the following, EXCEPT:
A) a blood pressure drop and tachycardia
B) pallor
C) lethargy
D) azotemia
E) disseminated intravascular coagulation
F) expiratory dyspnea

PED-4.344.
The therapy of septic shock includes all of the following, EXCEPT:
A) immediate fluid replacement
B) the administration of a combination of dopamine and dobutamine (Dobutrex) via infusion
C) the administration of a high dose of hydrocortisone
D) the administration of aminophylline
E) the administration of oxygen
F) a correction of the acidosis

PED-4.345.
Possible causes of anaphylactic shock include all of the following, EXCEPT:
A) penicillin therapy
B) heterologous sera
C) a wasp bite
D) the intracutaneous administration of Tuberculin
E) the intravenous administration of contrast media during an x-ray examination

PED-4.346.
The therapy of anaphylactic shock includes all of the following steps, EXCEPT:
A) epinephrine (Tonogen), sc. or iv.
B) corticosteroid iv.
C) Rheomacrodex infusion
D) aminophylline
E) beta-blockers
F) norepinephrine
G) oxygen

PED-4.347.
Possible causes of the development of a coma include all of the following, EXCEPT:
A) diabetic ketoacidosis
B) uremia
C) phenobarbital (Sevenal) intoxication
D) encephalitis
E) chorea minor
F) intracranial hemorrhage
G) cerebral edema

PED-4.348.
All of the following laboratory results are characteristic for a hepatic coma, EXCEPT:
A) abnormalities of hemostasis, unresponsive to vitamin K administration
B) direct and indirect hyperbilirubinemia
C) elevated AST and ALT activity in the serum
D) hyperglycemia
E) hyperlipidemia
F) hypoalbuminemia

PED-4.349.
All of the following statements about the therapy of an epileptic crisis are correct, EXCEPT:
A) sufficient respiration and circulation should be ensured; oxygen administration may be indicated
B) the pulse, blood pressure and body temperature should regularly be checked
C) the introduction of a venous catheter
D) the administration of diuretics is necessary
E) anticonvulsive therapy is needed; the initial drug of choice is diazepam (Seduxen)
F) a possible side-effect of phenytoin (Epanutin) therapy is hypertension

PED-4.350.
All of the following laboratory results are characteristic of disseminated intravascular coagulation (DIC) EXCEPT:
A) fragmented red blood cells are observed on the peripheral blood smear
B) the thrombocyte count is decreased
C) fibrinolytic activity is decreased
D) the partial thromboplastine time (PTT) is prolonged
E) fibrin degradation products (FDP) are detectable

PED-4.351
At what age should a child with a severe loss of hearing receive a hearing aid?
A) at the time of the diagnosis, preferably during infancy
B) at the age of 3, to support the development of speech
C) before school age because a loss of hearing creates learning disabilities
D) application of a hearing aid during childhood is contraindicated because it maintains the progression of the condition
E) a hearing aid should never be used, this condition indicates an operation
F) if the child is teased at school

PED-4.352.
What should be done with a 2 to 3-year-old, lisping child?
A) the speech of the child should be corrected carefully and patiently from the beginning to prevent fixation of the abnormality
B) the child should be spoken to with clear pronunciation; if the abnormality is still present at the age of 3½-4, the child should be referred to a logopedist
C) a laryngological and neurological examination is needed to determine the cause of the abnormality.
D) nothing; lisping is physiologic at this age, the child will grow out of it
E) as the cause of the abnormality is a deformity of the tongue, it should be surgically corrected

PED-4.353.
All of the following statements about sinusitis in childhood are correct, EXCEPT:
A) frontal sinusitis usually occurs during infancy
B) its symptoms are fever, headache, and nasal discharge
C) the teeth may be tender during maxillary sinusitis
D) an operation is rarely indicated

PED-4.355.
All of the following statements concerning ethmoiditis are correct, EXCEPT:
A) its most frequent cause is a Staphylococcus aureus infection
B) the disease is relatively mild
C) it is associated with palpebral edema, flushing of the face and fever
D) it might involve the orbit
E) in the initial phase, it might be misdiagnosed as conjunctivitis

PED-4.356.
A tonsillectomy is indicated in all of the following conditions, EXCEPT:
A) for peritonsillar abscesses, following the period of the acute symptoms
B) for fungal infections, unresponsive to any other treatment
C) if Streptococcus pyogenes is cultivated from the tonsils repeatedly, despite antibiotic treatment
D) the occurrence of five or more bacterial tonsillitis per year, for two years or more
E) enlarged tonsils which are altering respiration, and swallowing or speech disorders
F) pallor and a loss of appetite
G) if secondary diseases (carditis, nephritis, certain skin disorders) are associated with acute tonsillitis

PED-4.357.
In a child with a cleft lip, what is the recommended time of a cheiloplasty?
A) as soon as possible, after birth, to ensure normal feeding and to prevent aspiration
B) 2-3 weeks after birth
C) 3-4 months after birth
D) after 6 months of age, because of the high mortality of the operation before this age
E) as late as possible; the older the patient is, the better the cosmetic results

PED-4.358.
Which of the following symptoms is characteristic for pseudocroup?
A) bronchial respiratory sounds are heard over the lungs
B) hoarseness, inspiratory stridor, and a barking cough
C) these infants lose their voice and develop expiratory stridor
D) a spastic respiratory murmur

PED-4.359.
What should be done to a coughing child with a suspected foreign body in the airways?
A) the child should be held upside down by the feet until any existing foreign body drops out
B) cough suppressants and antibiotics should be administered, if the cough is relieved, then the foreign body has been excluded
C) cough relief, sedation, observation; if the cough persists, a chest x-ray is necessary
D) a chest x-ray, as soon as possible, to visualize the foreign body
E) following the emergency physical examination, the child must be sent
to a specialized department where the proper diagnosis and appropriate care can be undertaken.

PED-4.360.
What is the therapy of an acute purulent otitis media associated with fever in infancy?
A) myringotomy, administration of antibiotics, and nasal drops
B) a poultice should be applied to relieve the pain
C) antibiotic ear drops
D) infrared exposure of the ear, nasal drops, and the relief of fever
E) to prevent complications, hospital admission is advisable in each case,
F) otitis media is a secondary disease, only the underlying disease has to be treated

PED-4.361.
Is an operation of the ear usually indicated for a long history of otorrhea?
A) if the otorrhea persists for more than 4 weeks despite appropriate therapy (antibiotics, adenotomy and the exclusion or treatment of sinusitis)
B) if it is unresponsive to antibiotic treatment for 2 months
C) an operation is indicated only if complications (e.g. meningitis) develop
D) an operation is not indicated until adulthood; local treatment is usually sufficient

PED-4.362.
Which of the following statements concerning angiectasis/angioma is correct?
A) capillary hemangiomas usually occur in the midline of the skull or on the palpebrae of the newborn and usually disappear after a few months
B) capillary hemangiomas are sharply delineated, rose-like growths
C) capillary hemangiomas may malignantly transform, so they have to be removed
D) unilateral angiectasis on the face or on the extremities causes retardation of the development of that affected part of the body
E) the Sturge-Weber syndrome is characterized by leptomeningeal angiomatosis and hemangioma in the area of the trigeminal nerve
F) in the Sturge-Weber syndrome, steroid administration causes regression of the angioma

PED-4.363.
Case Study:
A 3-day-old newborn develops bullae on the head, over the elbow, on the hand and on the legs. Nikolsky's sign is positive. The general state of the newborn is good. No drugs have been administered so far. What is the most likely diagnosis?
A) exfoliative dermatitis (Ritter)
B) toxic epidermal necrolysis
C) impetigo bullosa
D) epidermolysis bullosa junctionalis
E) congenital syphilis
F) pemphigus vulgaris
PED-4.364.
All of the following statements concerning superficial fungal infections are correct, EXCEPT:
A) microsporiasis and trichophytiasis are superficial fungal infections
B) Microsporium and Trichophyton cause red, scaly and round lesions
C) if the hair or nails are involved, griseofulvin is the treatment of choice
D) tinea pedis occurs most often in prepuberal children

PED-4.365.
All of the following statements about scabies are correct, EXCEPT:
A) the primary lesion is a few millimeters long, scratch-like duct with a vesicle at the end, from which the mite can be removed with a needle
B) the site of predilection is the interdigital area but it might affect other areas as well
C) it is usually associated with severe pruritus
D) the whole family should be examined and treated
E) the primary lesion is usually not superinfected
F) lindane and permethrin are used in the treatment of scabies

PED-4.366.
At what age should strabismus therapy be started?
A) at the age of 1 year
B) at the age of 3-4 years
C) before the child starts primary school
D) immediately after the diagnosis

PED-4.367.
Which of the following conditions is not characterized by macroglossia?
A) cretinism (hypothyroidism)
B) glycogen storage disease
C) lymphangioma
D) macrocytic anemia
E) Beckwit-Wiedemann syndrome

PED-4.368.
In order to prevent caries formation, all of the following rules should be followed, EXCEPT:
A) pregnant mothers of children under the age of 8 months should not receive tetracycline therapy
B) candies and syrups should be excluded from the diet of the infant and the child
C) vitamin D administration is continued into childhood if caries develop
D) fluoride is administered after the infant's body weight has reached 7 kg, the administered dose depends on the fluoride content of the drinking water
E) meals which require appropriate chewing are preferred
F) regular brushing and flossing are recommended

PED-4.369.
Which of the following statements about recurrent abdominal pain
in childhood is FALSE?
A) the peak of incidence is at the age of 9-10 years
B) the most common localization is the periumbilical area
C) the pain is colicky, sometimes torturing
D) it is usually associated with muscular defense or pronounced abdominal tenderness

PED-4.370:
The therapy of childhood vulvovaginitis includes all of the following, EXCEPT:
A) if the cause is a fungal infection, nystatin (Nystatin), natamycin (Pimarucid) or clotrimazole (Canesten) should be applied locally
B) if the cause is a trichomona infection, metronidazole (Klion) should be used
C) in case of bacterial infection, specific antibiotic treatment is indicated
D) irrigation with potassium permanganate solution is useful in all cases

PED-4.371.
Possible causes of a diffuse enlargement of the abdomen include all of the following, EXCEPT:
A) enteral infections
B) malabsorption syndrome
C) pyloric stenosis
D) Hirschsprung's disease
E) intestinal perforation
F) hypokalemia
G) Wilms' tumor

PED-4.372.
Case Study:
A 3-year-old boy is brought to your office by his mother. The mother says that the child developed a sore throat and fever every 3rd-4th week ever since he has attended nursery school. The physical examination revealed modestly enlarged tonsils. What should be done?
A) cultivation of the pharyngeal discharge; if it is negative, the mother should be reassured that such symptoms commonly develop during the first few months of attending a nursery school
B) order a complete laboratory check-up
C) a gamma globulin injection should be given regularly, (once a month)
D) penicillin tablets should be given for 10 days as a prophylaxis
E) a tonsillectomy is indicated
F) an extensive immunological examination is indicated

PED-4.373.
Case Study:
A 3-month-old infant girl is brought to your office with the symptoms of a long-standing rhinitis and difficulties in feeding. Her birth weight was 4,000 g and her physiologic jaundice ceased on the 28th day. The infant also has constipation and she cannot elevate or hold her head. The mother says that she has never seen her smile. On examination: the rectal temperature is 36°C, her skin is dry, her mouth is open and an umbilical hernia is detected. Tracheal rales are audible. Auscultation of the lungs and the heart is unrevealing. The size of the liver and the spleen is normal.
The movements of the infant are sluggish and her mood is indifferent. What is the most likely cause of her symptoms?
A) bilirubin encephalopathy
B) hypothyroidism
C) Hurler's syndrome (gargoylism)
D) congenital cytomegalovirus infection
E) Crigler-Najjar syndrome

PED-4.374.
Case Study:
During the chest x-ray examination of a 6-year-old child, a distinct shadow in the upper part of the anterior mediastinum is detected. The presence of which of the following is the most likely cause?
A) goiter
B) the thymus gland
C) neuroblastoma
D) pericardial cyst

PED-4.375.
Which of the following is characteristic for the majority of neonatal herpesvirus infections?
A) it is usually localized on the skin
B) no general symptoms are associated
C) it is caused by the type I virus
D) it might cause hepatitis
E) it is usually benign

PED-4.376.
Herpetic gingivostomatitis is not associated with:
A) fever
B) swelling of the gingiva
C) lymphadenopathy
D) ulceration of the oral mucosa
E) the development of papulous eruptions

PED-4.377.
The most common complication of varicella in childhood is:
A) pneumonia
B) encephalitis
C) cystitis
D) angioneurotic edema
E) a secondary bacterial infection of the skin

PED-4.378.
Which of the following is not characteristic for rubella?
A) eruptions occurring on the trunk
B) enlargement of the occipital and retroauricular lymph nodes
C) moderate fever
D) arthralgia
E) complicating pneumonia

PED-4.379.
Which of the following is characteristic for exanthema subitum?
A) the coxsackie virus has a role in the etiology
B) the disease lasts for 3-4 days, initially there is a high fever, but the temperature normalizes following the occurrence of
the eruptions  
C) just before the development of the eruptions the face looks bruised  
D) it is regarded as a non-infectious disease  
E) when the eruptions disappear, hypopigmented areas may be transiently observed

PED-4.380.  
Characteristics of pyloric stenosis include all of the following, EXCEPT:  
A) it is more frequent in boys  
B) it is associated with projectile vomiting at the age of 4-8 weeks  
C) it causes metabolic alkalosis  
D) the diagnosis is confirmed by a barium meal (contrast media filling)  
E) it must be differentiated from achalasia and hial hernia

PED-4.381.  
All of the following statements concerning orthostatic albuminuria are correct, EXCEPT:  
A) most children exhibiting orthostatic albuminuria are healthy; there is no underlying disease  
B) albuminuria is detected when the patient is in a lying position and it decreases after the patient stands up  
C) renal functional tests are normal  
D) the condition is usually diagnosed between the ages of 10-20 years  
E) it is not associated with an increased risk of the development of hypertension

PED-4.382.  
All of the following diseases may cause hematuria in children, EXCEPT:  
A) Wilms' tumor  
B) minimal change disease (nephrosis syndrome)  
C) polycystic kidney  
D) subacute bacterial endocarditis  
E) thrombosis of the renal artery

PED-4.383.  
The most common cause of acquired hypothyroidism is:  
A) cyanosis  
B) thyroid carcinoma  
C) lymphocytic thyroiditis  
D) pituitary hypofunction  
E) excision of the thyroglossal duct

PED-4.384.  
All of the following statements about the sudden infant death syndrome (SIDS) are correct, EXCEPT:  
A) it is most frequently manifested between the ages of 2-5 months  
B) the birth weight of the majority of the patients is low  
C) its frequency is 4-7 times greater than the average infant mortality rate  
D) the number of cases has increased  
E) the majority of the affected infants are boys

PED-4.385.  
Which of the following is not characteristic for the fetal alcohol syndrome?  
A) the increase of the height and weight are retarded, while head
circumference growth is not affected
B) a small palpebral fissure, epicanthus, and micrognathia
C) septal defects
D) anomalies of the joints and the extremities
E) mental retardation

PED-4.386.
Decreased osmotic resistance of the red blood cells is observed:
A) in 8% of the population
B) exclusively in sickle cell anemia
C) in thalassemia and sickle cell anemia
D) in congenital spherocytosis

PED-4.387.
The blood volume at birth is approximately:
A) 65 ml/kg
B) 85 ml/kg
C) 110 ml/kg
D) 125 ml/kg
E) 150 ml/kg

PED-4.388.
All of the following statements concerning the transport of bilirubin in the serum are correct, EXCEPT:
A) it is transported primarily in the albumin-bound form
B) sulphonamides compete for its binding sites
C) it is primarily the albumin bound form which is toxic to the nerve cells
D) albumin binding is a means of the prevention of its toxicity to the nervous system
E) exposure to light has no effect on its binding to albumin

PED-4.389.
Polyhydramnios is frequently associated with:
A) renal agenesis
B) anencephaly
C) pulmonary hypoplasia
D) urethral atresia
E) amnion nodosum

PED-4.390.
Characteristics of the Mongolian spot include all of the following, EXCEPT:
A) it is permanent
B) it usually has a greyish blue pigmentation
C) it is usually observed above the buttocks
D) the pigmented area is sharply delineated
E) trisomy syndromes are not associated

PED-4.391.
Characteristics of caput succedaneum include all of the following, EXCEPT:
A) a diffuse, edematous swelling of the hairy skin of the head
B) it may be wider along the midline
C) it may be wider along the sutures
D) the swelling is resorbed within 2-3 months
E) the hairy skin of the affected area may hide small contusions

PED-4.392.
**Case Study:**
The physical examination of a newborn reveals respiratory insufficiency, repleted cervical veins, low blood pressure, tympanic resonance on one side of the chest, weak respiratory sounds and subcutaneous emphysema on the same side. The most likely diagnosis is:
A) hyaline membrane disease
B) staphylococcal pneumonia
C) pneumothorax and pneumomediastinum
D) primary atelectasis
E) diaphragmatic hernia

PED-4.393.
A meconium plug is characteristic for which of the following diseases?
A) cretinism
B) cystic fibrosis
C) soor
D) hyaline membrane disease
E) trisomy 21

PED-4.394.
Conditions which may be associated with prolonged jaundice during the first month of life include all of the following, EXCEPT:
A) cytomegalovirus infection
B) congenital biliary atresia
C) galactosemia
D) Rh-incompatibility
E) penicillin therapy

PED-4.395.
Characteristics of cretinism include all of the following, EXCEPT:
A) macroglossia
B) prolonged jaundice
C) lethargy
D) susceptibility to tetany
E) hypotension

PED-4.396.
In case of autosomal dominant inheritance, the inherited feature would be manifested in one of the parents and in:
A) 50% of daughters and 75% of sons
B) 25% of sons and 75% of daughters
C) 50% of sons and 50% of daughters
D) the daughters only
E) none of the children

PED-4.397.
46 XY, 18q means, that:
A) the long arm of the 18th chromosome is missing in a boy
B) there is a translocation from the 18th chromosome to the Y chromosome
C) the boy suffers from Klinefelter's syndrome
D) the boy suffers from Edwards' syndrome
E) this is the normal karyotype
Characteristics of Turner's syndrome (45 XO) include all of the following, EXCEPT:
A) mental retardation
B) short stature
C) ovarian dysgenesis
D) primary amenorrhea
E) pectus excavatum

Edwards' syndrome is associated with all of the following, EXCEPT:
A) mental retardation
B) intrauterine atrophy
C) macrognathia
D) auricular deformities
E) congenital valvular heart disease

Case Study:
A 1-year-old girl cannot sit down without assistance. She is able to take hold of objects with one hand but is unable to put them into the other hand. She cannot climb or stand up. She can pronounce a few words, but shows no interest for pictures. She does not respond very well to external stimuli.
What is your opinion about the somato-mental maturity of the child?
A) severe mental retardation
B) her maturity corresponds to the age of 11 months
C) her somatic maturity corresponds to the age of 6-8 months; a moderate mental retardation is detected
D) her maturity corresponds to her age-group; no abnormality is detected

Gastric lavage is contraindicated in case of intoxication with:
A) aspirin
B) alkali causing coagulation
C) diazepam (Seduxen)
D) castor oil
E) vitamins

Case Study:
A 4-year-old child experiences salicylate intoxication. The first symptom is usually:
A) the development of petechiae and gingival hemorrhage
B) diplopia and peripheral blindness
C) hyperventilation
D) diarrhea and vomiting
E) the development of convulsions

An adolescent is transported to your office in a comatose state. The pupils are narrow; the respiration is abnormal. Auscultation reveals rales over the lung fields. The most likely diagnosis is:
A) bilateral bronchopneumonia
B) acute heroin intoxication
C) acute amphetamine intoxication
D) atropine intoxication
E) alcohol intoxication

PED-4.404.
Which of the following is an absolute contraindication of breastfeeding?
A) erythroblastosis fetalis
B) crater nipple
C) mastitis
D) smoking
E) phenylketonuria

PED-4.405.
Characteristics of the metabolism of vitamin D include all of the following, EXCEPT:
A) absorption of vitamin D from the intestine is facilitated by an active transport mechanism
B) bile is needed for the normal absorption of vitamin D
C) the kidney plays an active role in the metabolism of vitamin D
D) in the plasma, it is present as 25OH-cholecalciferol
E) the liver has no role in the metabolism of this hormone

PED-4.406.
The effects of parathyroid hormone (PTH) include all of the following, EXCEPT:
A) hypophosphatemia
B) hyperphosphaturia
C) it increases calcium mobilization from the bone
D) it decreases the renal clearance of calcium
E) it inhibits the intestinal absorption of calcium

PED-4.407.
Which of the following statements concerning the effects of calcitonin is FALSE?
A) the hormone is secreted by the kidney
B) it inhibits bone resorption
C) it decreases elevated serum calcium concentration
D) if the serum phosphate level is elevated, calcitonin activity is stimulated
E) thyroidectomy causes diminished calcitonin secretion

PED-4.408.
The clinical symptoms of rickets include all of the following, EXCEPT:
A) craniotabes
B) "rachitic rosary"
C) swelling of the wrists and ankles
D) slow development of the motor system
E) conjunctivitis

PED-4.409.
The daily vitamin D requirement of a developing infant is:
A) 100 IU
B) 400 IU
C) 600 IU
D) 1,000 IU
PED-4.410.
Symptoms of hypervitaminosis-D include all of the following, EXCEPT:
A) hypotension
B) polydypsia and polyuria
C) excitability
D) hypocalcemia
E) the calcification of tissues (kidney, vessel walls)

PED-4.411.
All of the following statements concerning the characteristics of asthma in childhood are correct, EXCEPT:
A) the intrinsic form is more common than the extrinsic
B) type I asthma is characterized by an early hypersensitivity reaction
C) the IgE level is elevated
D) it is associated with the release of the slow reacting substance of anaphylaxis (SRS-A)
E) the patient may be asymptomatic between the attacks

MULTIPLE CHOICE QUESTIONS WITH KEY ANSWERS / TYPE II
Every question or incomplete statement has only one answer in the following combinations:
A) if the answers 1, 2, and 3 are true
B) if the answers 1 and 3 are true
C) if the answers 2 and 4 are true
D) if only the answer 4 is true
E) if all the four answers are true
Select one of these key combinations!!!

PED-4.412.
Characteristic alterations of circulatory volume and the circulatory redistribution following birth are:
1) the blood volume relative to the body weight increases rapidly during the first three months of life
2) the blood perfusion of the lung suddenly drops
3) the right ventricular stroke volume promptly increases
4) the pressure of the pulmonary artery rapidly decreases

PED-4.413.
Which of the following conditions are associated with a left to right shunt?
1) patent ductus arteriosus (PDA)
2) atrial septal defect (ASD)
3) ventricular septal defect (VSD)
4) aortic-pulmonary fistula

PED-4.415.
Causative agents of a disease presenting with eruptions and symptoms of serous meningitis are:
1) the rubella virus
2) the Hepatitis A virus
3) the Coxsackie A9 virus
4) the Echovirus 9
Possible causes of placental insufficiency include:
1) a very small placenta
2) early disruption of the placenta
3) large hemangiomas in the placenta
4) extensive infarction of the placenta

Possible causes of fetal anoxia include:
1) maternal carbon monoxide intoxication
2) maternal hypotension
3) placental insufficiency
4) tetany of the uterus

Possible causes of hypertension during childhood include:
1) glomerulonephritis
2) coarctation of the aorta
3) neuroblastoma
4) essential hypertension

It is important to realize that the technique of resuscitation is different in children and adult patients. Which of the following considerations concerning the anatomy of the infant or child may be important during endotracheal intubation?
1) the epiglottis is shorter in the infant, and it has a U shape, whereas in the adult it is longer and flat
2) the larynx is situated more anteriorly and cranially in infants and children than in the adult
3) the angle of the epiglottis and the vocal cords is more sharp in infants and children
4) the position of the heart is considerably higher in infants (it is usually behind the mid-sternum), whereas in the adult it is found behind the lower third of the sternum

Which of the following statements about the indications of operation in congenital heart diseases are correct?
1) in the Tetralogy of Fallot an operation is indicated in each case
2) the most suitable time for the surgical correction of tricuspid atresia is after the age of 10 years
3) the optimal time for the correction of coarctation of the aorta is 2-5 years of age, except for cases with "critically severe coarctation of the aorta"
4) the optimal time for the surgery of a large ventricular septal defect is at the age of 8-10 years

Five main aspects of the treatment of a child with diabetic ketoacidosis are the management of hyperglycemia, dehydration, acidosis, loss of electrolytes and the precipitating cause. What are the steps in the therapy of diabetic ketoacidosis?
1) the subcutaneous administration of crystalline insulin in a 5-10 U/kg initial dose, then the hourly administration of insulin until the blood glucose level reaches a normal range
2) glucose-free saline is infused, initially at a rate of 20-25 ml/kg during the first 1-2 hours
3) if the arterial pH is between 7.3-7.4 and the serum bicarbonate is 15-20 meq/vl, then sodium bicarbonate administration is indicated
4) if the child voids urine, then potassium replacement should be initiated within 2 hours: 3 meq/kg is administered during the first 24 hours: the administration of a cumulative dose not exceeding 40 meq is safe

PED-4.425.
Which of the following diseases may be caused by a Coxsackie A virus infection?
1) upper respiratory tract infection
2) pneumonia
3) pharyngotonsillitis
4) bronchitis

PED-4.426
Which of the following statements are correct concerning growth during the first year of life?
1) by the end of the 6th month, the body weight is twice as large, by the end of the first year the body weight is three times that of the birth weight
2) the body height increases by approximately 25 cm
3) the head circumference increases by 12 cm
4) most mature infants regain their birth weight by the 2nd week

PED-4.427.
Hypernatremic dehydration is associated with which of the following conditions?
1) hyperglycemia
2) convulsions
3) subdural hematoma
4) hypercalcemia

PED-4.428.
Which of the following drugs can be administered to the mother during lactation, without any risk?
1) digitalis
2) antithyroid drugs
3) insulin
4) most of the drugs used for the treatment of malignancies

PED-4.429.
Which of the following abnormalities are commonly associated with Down's syndrome?
1) endocardial cushion defect
2) intestinal atresia
3) anal atresia
4) strabismus

PED-4.430.
Which of the following conditions are regarded as physiologic following birth?
1) phimosis
2) swollen nipples in boys
3) a palpable liver, spleen and kidneys
4) an enlarged clitoris

PED-4.431.
Which of the following statements are correct concerning the jaundice caused by mother’s milk?
1) kernicterus does not develop, although the serum total bilirubin concentration may reach 20 mg%
2) the bilirubin level is highest during the 2nd-3rd weeks
3) the presumable cause is a hormone present in the milk which inhibits the activity of the hepatic enzymes in the newborn
4) the temporary discontinuation of breastfeeding decreases the bilirubin level, which increases again upon continuation of breastfeeding

PED-4.432.
Which of the following metabolic abnormalities of infancy can be managed with dietary restrictions?
1) galactosemia
2) maple syrup urine disease
3) homocystinuria
4) Lesch-Nyhan syndrome (hyperuricosis)

PED-4.433.
Which of the following conditions are associated with congenital toxoplasmosis?
1) chorioretinitis
2) hydrocephalus
3) intracerebral calcification
4) microcephaly

PED-4.436.
Possible causes of the development of stridor in the newborn include:
1) congenital goiter or a vascular anomaly compressing the trachea
2) birth trauma
3) laryngomalacia
4) Pierre-Robin syndrome

PED-4.437.
Characteristics of the "functional" or "harmless" cardiac murmur of children include:
1) it is audible in approximately 30% of children
2) the ECG and the chest x-ray of these children are unrevealing
3) a transient systolic murmur, along the left border of the sternum during the first 48 hours of life is detected in more than 50% of newborns
4) altering the position of the head does not accentuate nor diminish the venous hum

PED-4.438.
Which of the following statements are correct concerning the Tetralogy of Fallot?
1) cyanosis is always present at birth
2) clubbing of the fingers becomes detectable by the age of two years
3) cardiac failure commonly develops during the first six months of life
4) the development of dyspnea upon physical exercise is common

PED-4.439.
Which of the following statements relate to acute poststreptococcal
glomerulonephritis?
1) unexpectedly urine becomes dark, a mild edema and a decreased urine volume is detected
2) proper management of the streptococcal pharyngitis decreases the frequency of nephritis by half
3) a strong hematuria usually relieves during the first week, but microscopic hematuria may persist for two months
4) complete healing is predictable if the child survives the first period

PED-4.440.
Characteristics of Klinefelter's syndrome include:
1) delayed puberty
2) gynecomastia
3) mental retardation and psychic abnormalities
4) aortic stenosis

PED-4.441.
Which of the following symptoms are indicative of Turner's syndrome in infancy?
1) edematous hands and feet
2) a low birth weight
3) pterygium colli
4) a short stature

PED-4.442.
Amniocentesis helps the prenatal diagnosis of which of the following conditions?
1) Down's syndrome
2) meningomyelocele
3) erythroblastosis
4) chondrodysplasia

PED-4.443.
Malformations associated with polyhydramnios include:
1) duodenal atresia
2) renal atresia
3) esophageal atresia
4) pulmonary hypoplasia

PED-4.444.
An ultrasound examination during pregnancy is suitable for:
1) the determination of the length of the fetus (crown-rump length)
2) the determination of the sex of the fetus
3) the determination of the biparietal diameter of the skull
4) the exact determination of the weight of the fetus

CASE STUDIES
Answer the multiple task questions (simple choice and multiple choice with/without key answers; relation analysis etc.) as they are related to each case study!!!

PED-4.445.
Case Study
A 12-year-old girl's mother has repeatedly complained about her daughter's
"recurrent infections". The attending family doctor reassures her that despite the various laboratory analyses, physical examinations etc. he has performed, he has found no evidence of any type of infections. He subsequently plans to perform allergological studies.

4.445/1. Histamine:
1) is a blocking antibody, it is formed upon desensitization
2) contributes to the development of anaphylaxis
3) contributes to the development of urticaria
4) causes angioedema
5) is the initial immune response to an infection

A) (1), (4), and (5) are correct
B) (2) and (3) are correct
C) (1) and (5) are correct
D) only (1) is correct
E) (2) and (4) are correct
F) (1) and (3) are correct
G) all of the above
H) none of the above

4.445/2.
1) is a blocking antibody, it is formed upon desensitization
2) contributes to the development of anaphylaxis
3) contributes to the development of urticaria
4) causes angioedema
5) is the initial immune response to an infection

A) (1), (4), and (5) are correct
B) (2) and (3) are correct
C) (1) and (5) are correct
D) only (1) is correct
E) (2) and (4) are correct
F) (1) and (3) are correct
G) all of the above
H) none of the above

4.445/3.
1) is a blocking antibody, it is formed upon desensitization
2) contributes to the development of anaphylaxis
3) contributes to the development of urticaria
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5) is the initial immune response to an infection

A) (1), (4), and (5) are correct
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C) (1) and (5) are correct
D) only (1) is correct
E) (2) and (4) are correct
F) (1) and (3) are correct
G) all of the above
H) none of the above

4.445/4. Bradykinin:
1) is a blocking antibody, it is formed upon desensitization
2) contributes to the development of anaphylaxis
3) contributes to the development of urticaria
4) causes angioedema
5) is the initial immune response to an infection

A) (1), (4), and (5) are correct
B) (2) and (3) are correct
C) (1) and (5) are correct
D) only (1) is correct
E) (2) and (4) are correct
F) (1) and (3) are correct
G) all of the above
H) none of the above

PED-4.466
Case Study
4-year-old boy suddenly develops shaking chills and a high fever. He has a headache, he vomits repeatedly, and occipital stiffness is detected. Dermographism of the skin is increased and small pinhead size petechiae are observed on the entire body surface. A loss of consciousness and circulatory failure develops within hours.

4.466/1. The presumable diagnosis is:
A) mushroom poisoning
B) organic solvent intoxication
C) Waterhouse-Friderichsen syndrome (meningococcal meningitis and septicemia)
D) encephalitis
E) hemophilia

4.466/2. The most important test for the exact diagnosis is:
A) examination of the gastric lavage fluid
B) a skull x-ray
C) a hemostasis evaluation
D) examination of the cerebrospinal fluid

4.466/3. The appropriate therapy during the acute phase is:
A) the administration of atropine
B) a gastric lavage
C) transportation to a hospital urgently; the administration of antibiotics based on the results of the cerebrospinal fluid tests
D) the administration of fresh frozen plasma
E) the relief of fever and observation in a hospital

PED-4.467
Case Study
A 4-year-old girl complained of abdominal pain the day before the examination. She vomited once during the night. Her face is pale and perioral cyanosis is seen. She has dyspnea and cough. Physical examination: the stool is normal and the abdomen is bloated. The liver exceeds the costal arch by 2 fingers. The spleen is not palpable. Respiratory
rate: 4l/min; heart rate: 115/min; blood pressure: 100/60
mmHg; body temperature: 38.6°C. The pharyngeal mucosa is moderately
hyperemic. 1-2 "pea-sized" lymph nodes under the chin, and one
"bean-sized" lymph node in the left inguinal region are palpable. Heart
sounds are clear and normal. Percussion reveals dullness over an area
of 10 cm in diameter below the right scapula. Loud, bronchial respiratory
sounds are audible over this area. Diaphragmatic movements are
normal. No meningeal symptoms are present. The child is weak and
fatigued. The skin shows no alterations.

4.447/1.  
The diagnosis based on the physical examination is:  
A) right-sided pleuropneumonia  
B) influenza  
C) right-sided lobar pneumonia, with peritonitis as a complication  
D) acute lymphoblastic leukemia (ALL)  
E) acute appendicitis

4.447/2.  
All of the following supplementary tests are indicated, EXCEPT:  
A) the red blood cell sedimentation rate  
B) complete differential and blood cell counts  
C) examination of the vulvar smear  
D) a chest x-ray  
E) hepatic functional tests

4.447/3.  
The most likely causative microorganism of this affliction is:  
A) Staphylococcus aureus  
B) Streptococcus pneumoniae  
C) adenovirus  
D) cytomegalovirus  
E) Epstein-Barr virus

4.447/4.  
Which therapy would you choose first?  
A) thoracocentesis  
B) chloramphenicol (Chlorocid)  
C) amidazophen  
D) ampicillin  
E) penicillin (Maripen)

PED-4.449  
Case Study  
An 8-year-old boy, two weeks after developing pharyngitis, develops
palpebral edema. He also complains of headaches and vertigo.

4.449/1.  
Which of the following questions should be asked from the parents
of the patient?  
1) Did the child suffer from enuresis?  
2) Did the child complain of tingling micturition?  
3) Did they note any smoke-colored urine?  
4) Did the urine volume increase?  
5) Did the urine volume decrease?
A) (1), (2), and (3) are correct
B) (1) and (3) are correct
C) (2) and (4) are correct
D) only (4) is correct
E) all of the above

4.449/2.
What tests would you order?
1) measurement of the blood pressure; qualitative tests and sediment examination of fresh urine
2) bacteriology of the urine collected with a catheter
3) antistreptolysine titer, bacteriology of the pharyngeal discharge
4) daily, precise body weight, and urine volume determination
5) intravenous urography

A) (1), (2), and (3) are correct
B) (1) and (3) are correct
C) (2) and (4) are correct
D) only (4) is correct
E) all of the above

4.449/3.
The examination reveals hematuria (10-100 RBC/HPF), proteinuria (1 g/m²/day) and an elevated serum creatinine concentration. What is your diagnosis?
A) idiopathic nephrotic syndrome
B) nephrolithiasis
C) acute glomerulonephritis
D) acute pyelonephritis
E) isolated hematuria

4.449/4.
Which of the following findings is not coherent with a diagnosis of the nephrotic syndrome?
A) proteinuria
B) hematuria
C) edema
D) an increase in body weight
E) a transiently decreased urine volume

4.449/5.
Based on the diagnosis you presumed in question (3), what is therapy required?
1) azathioprine
2) prednisone (2mg/kg/day)
3) penicillin
4) cyclophosphamide (5mg/kg/day)
5) a low salt and protein content diet

A) only (1) is correct
B) only (2) is correct
C) (2) and (4) are correct
D) (3) and (5) are correct
E) all of the above

PED-4.450.
Case Study
A 4-week-old boy is brought to your office. His body temperature is normal, and he weighs 3,500 g. The infant has vomited after each meal for the last 5-6 days. No somatic growth has been seen during the last week.

4.450/1. Which of the following questions have to be asked to complete the history?
A) Is the quantity of the vomit large?
B) Does the infant vomit during feeding?
C) Did the parents note projectile vomiting or bilious vomit?
D) Does the infant accept mother's milk

4.450/2. What is the most likely result of the examination?
A) it is unrevealing
B) cyanotic skin
C) resistance may possibly be detected on the right side of the navel, peristaltic waves in the epigastrium
D) muscular hypotonia

4.450/3. Which of the following laboratory results is most likely to be positive in the condition?
A) metabolic alkalosis
B) negative urinalysis
C) a normal serum sodium concentration
D) negative renal functional tests
E) normal blood cell and differential counts

4.450/4. Which of the following tests is useful to confirm the diagnosis?
A) pneumoencephalography
B) barium-swallow x-ray
C) native abdominal x-ray
D) basal and stimulated acid secretion of the stomach
E) intravenous urography

4.450/5. Based on the above findings, the presumable diagnosis is:
A) salt-losing adrenogenital syndrome
B) aerophagia
C) hypertrophied pyloric stenosis
D) lack of belching after breastfeeding
E) inflammation of the central nervous system (meningitis, encephalitis)

4.450/6. The therapy indicated in this condition is:
A) the administration of deoxycorticosterone acetate (DOCA)
B) a gastric lavage
C) frequent feeding with small quantities
D) the administration of spasmolytics
E) operation

PED-4.452. Case Study
A 6-year-old girl is brought to your office. She voids turbid, dark red colored urine and complains of dull lumbar pain. Her blood pressure is 155/95 mmHg. Currently, the pharyngeal structures are normal. She had pharyngitis associated with fever 3 weeks ago.

4.452/1. A particularly important aspect of the physical examination is:
A) the neurologic status
B) auscultation of the lungs
C) a palpable resistance, which might possibly be present in the abdomen
D) the detection of palpebral edema

4.452/2. The most likely diagnosis is:
A) rheumatoid arthritis
B) nephrolithiasis
C) glomerulonephritis
D) renal tumor

4.452/3. The most important additional test is:
A) a measurement of serum creatinine level
B) a urinalysis
C) a chest x-ray
D) a native abdominal x-ray
E) an ECG

4.452/4. Which of the following is the most important therapeutic intervention following admission to hospital?
A) the administration of spasmolytics
B) the administration of antibiotics
C) a salt- and protein-restricted diet
D) the administration of large quantities of fluid

PED-4.453. Case Study
An 8-year-old girl develops eruptions following two days of subfebrility, headaches and a loss of appetite. Maculo-papulo-vesicular lesions occur on the trunk, on the hairy skin of the head, then on the whole body surface of the body. Her body temperature is moderately elevated.

4.453/1. The most likely diagnosis is:
A) erythema multiforme
B) generalized ekzema
C) herpes zoster
D) urticaria bullosa
E) varicella (chickenpox)

4.453/2. The infecting microorganism is demonstrable in:
A) blood
B) stool
C) urine
D) vesicular content
E) sputum

4.453/3.
The incubation period of this disease is:
A) 2-3 days
B) 6 days
C) 2-3 weeks
D) 2 months
E) several months

4.453/4.
If no superinfection is present, the indicated therapy is:
A) tetracycline
B) erythromycin
C) prednisone
D) penicillin
E) none of the above

PED-4.455.

Case Study
A 6-year-old boy has been complaining of a sore throat and swelling of his knees and ankles for a few days. He is admitted to a hospital because of severe epigastric pain and blood in the stool. At admission: the ankles and feet are moderately swollen and painful. Purpura is observed around the ankles and the extensor surface of the legs. These are hemontic papules, surrounded by normal skin. The abdominal examination reveals abnormalities. A moderate anemia and leukocytosis are detected. Urinalysis: microscopic hematuria. The blood pressure is normal. Antistreptolysin titer 800 U.

4.455/1.
The most likely diagnosis is:
A) rheumatoid arthritis
B) ulcerative colitis
C) Schonlein-Henoch purpura
D) rheumatic fever
E) acute glomerulonephritis

4.455/2.
The thromocyte count found to be normal is of diagnostic value in the following conditions:
1) rheumatic fever
2) rheumatoid arthritis
3) acute glomerulonephritis
4) Schonlein-Henoch purpura

A) (1), (2), and (3) are correct
B) (1) and (3) are correct
C) (2) and (4) are correct
D) only (4) is correct
E) all of the above

4.455/3.
The diagnosis, confirmed by the data, indicates penicillin administration, because the disease is caused by staphylococcus.
A) both the statement and the explanation are true and a causal
relationship exists between them
B) both the statement and the explanation are true but there is no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

4.455/4.
Hematuria rarely occurs during the early phase of the disease because renal lesions do not develop either in the early or in the late phase of the disease.
A) both the statement and the explanation are true and a causal relationship exists between them
B) both the statement and the explanation are true but there is no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

4.455/5.
The disease sometimes heals leaving residual symptoms because streptococcus may have a role in the development of the disease.
A) both the statement and the explanation are true, and a causal relationship exists between them
B) both the statement and the explanation are true, but there is no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

PED-4.456.
Case Study
A 3-month-old infant living on a farm has been subfebrile for one week. He subsequently receives antibiotic therapy for an upper respiratory tract infection. The physician also detects cyanosis during his examination and immediately sends the baby to a hospital. On admission: the baby's general status is satisfactory, the diffuse cyanosis is more marked on the extremities. The infant is agitated and has tachypnea and tachycardia but no neurologic or internal organ abnormality is detected during the physical examination. The body temperature is normal. No abnormalities are seen on the chest x-ray.

4.456/1.
Which of the following conditions are associated with cyanosis in the infancy?
1) congenital cardiac malformation with a right to left shunt
2) bronchopneumonia
3) methemoglobinemia
4) cerebral arteriovenous fistula
A) (1), (2), and (3) are correct
B) (1) and (3) are correct
C) (2) and (4) are correct
D) only (4) is correct
E) all of the above
4.456/2.
The most likely diagnosis is:
A) bronchopneumonia
B) congenital methemoglobinemia
C) acquired methemoglobinemia
D) cerebral arteriovenous fistula
E) congenital cardiac malformation with a right to left shunt

4.456/3.
Bronchopneumonia is excluded because bronchopneumonia in the
infancy can always be screened by the physical examination.
A) both the statement and the explanation are true and a causal
relationship exists between them
B) both the statement and the explanation are true but there is
no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

Congenital cardiac malformations are not always associated with
cyanosis because cyanosis is a sign of the accumulation of reduced
hemoglobin.
A) both the statement and the explanation are true and a causal
relationship exists between them
B) both the statement and the explanation are true but there is
no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

4.456/5.
Acquired methemoglobinemia is a rare condition, because numerous
exogenous factors are capable of causing methemoglobinemia.
A) both the statement and the explanation are true and a causal
relationship exists between them
B) both the statement and the explanation are true but there is
no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

PED-4.458.
Case Study
A 6-month-old infant is referred to the hospital by the physician. The
infant has been ill for 5 weeks. The disease started with the symptoms of
bronchitis and cough, for which penicillin therapy had been initiated.
After a transient improvement, the cough became more severe, and
subfebrility, then febrility developed. Following this, tetracycline
(Tetraolean) and penicillin had been administered in injection form.
These did not relieve the cough. The physical symptoms were characteristic for
bronchitis. Current symptoms: are loss of appetite, stagnation of somatic
growth, the stool is bulky, loose and fetid. Family history: the
parents mention that they lost their first child: she had an operation on
the 2nd day of her life and 3 days later she died. They remarked that:
"There was something wrong with her intestine".
4.458/1.
The most likely diagnosis is:
A) aspiration pneumonia
B) gastroesophageal reflux
C) cystic fibrosis
D) ascariasis
E) interstitial plasmocytic pneumonia

4.458/2.
Which of the following diagnostic tests is the most important?
A) bronchography
B) chest x-ray
C) rectal digital examination
D) native abdominal x-ray
E) testing of the gastrointestinal passage

4.458/3.
Which of the following, additional tests would you order to confirm your diagnosis?
A) the demonstration of worm eggs in the stool
B) liver biopsy
C) laryngoscopy
D) determination of the chloride concentration in the sweat
E) barium enema

4.458/4.
Which of the following additional tests is also useful?
A) an oral glucose tolerance test
B) determination of the enzyme activities in the duodenal fluid
C) an explorative laparotomy
D) a lung biopsy
E) abdominal ultrasound

4.458/5.
Based on the anamnestic data, which of the following drugs would you order?
A) broad spectrum antibiotic
B) penicillin
C) trimethoprim-sulfamethoxazole (Sumetrolim)
D) metronidazole (Klion)
E) a strict diet; mucolytics; enzyme substitution

PED-4.459.
Case Study
A 6-year-old boy is brought to your office. Since 4-5 days ago, small eruptions occurring on the entire body surface and blueish spots of 2-10 cm in diameter in the lower extremities have been observed. The boy's mother has not detected any alteration in the general state of the child, his appetite and activity have been normal, although two weeks ago the child had been febrile for a few days.
Physical examination: is unrevealing except for the skin lesions. Liver and spleen are not palpable, lymph nodes are of normal size. On the trunk and especially on the legs, (primarily on the areas exposed to traumas) numerous ecchymoses, and pinhead sized petechiae on the entire body are observed. Laboratory analysis:
Hemoglobin: 6.9 mmol/l; hematocrit: 33%; WBC: 8,500/mm3; thrombocyte count: 10,000/mm3; reticulocyte: 0.2%; lymphocyte: 43%. Urinalysis: negative. Serum electrolytes, blood urea nitrogen and creatinine are within the reference range.

4.459/1.
Which of the following questions is the most relevant to this case?
1) What drugs was the child taking before the onset of the symptoms?
2) Has the child recently been abroad?
3) Does the child consume too much milk?
4) Do any of the family members have hemorrhagic diathesis?

A) (1) and (4) are correct
B) (2), (3), and (4) are correct
C) (1), (3), and (4) are correct
D) all of the above
E) none of the above

4.459/2.
Which of the following examinations do you consider necessary?
1) the detection of antinuclear factor
2) a bone marrow aspiration
3) a determination of the bleeding time
4) a determination of the prothrombin time (PT) and the partial thromboplastin time (PTT)
5) a determination of the salicylic acid concentration in the blood

A) (2), (3), (4), and (5) are correct
B) (1), (3), and (5) are correct
C) (1), (2), and (4) are correct
D) all of the above
E) none of the above

4.459/3.
Further laboratory results are: ANF (antinuclear factor) negative, PT: 12.3 s (control: 12 s), PTT: 32.7 s (norm.: 40 s). Bone marrow aspiration: normal structure and cellularity. The number of megakaryocytes is normal. What is the most likely diagnosis?
A) Schonlein-Henoch purpura
B) acute lymphoblastic leukemia (ALL)
C) idiopathic thrombocytopenic purpura (ITP)
D) hemolytic uremic syndrome (HUS)
E) von Willebrand's disease
F) spanked child syndrome

Which are the possible complications of the condition?
1) intracranial hemorrhage
2) epistaxis
3) hematuria
4) gastrointestinal bleeding
5) aplastic anemia

A) (1), (3), (4), and (5) are correct
B) (1), (2), (3), and (4) are correct
C) (3) and (5) are correct
What would you tell to the child's parents concerning the prognosis of this condition?
A) all patients suffering from this disease would recover within 2 weeks
B) chronic thrombocytopenia is expectable in each case
C) some patients recover spontaneously
D) in 40-50% of cases acute lymphoblastic leukemia develops within one year following the thrombocytopenic phase

PED-4.460

Case Study
An 18-month-old child is brought to your office by ambulance. The parents report that the child, while playing in the garden unattended, suddenly started to cough gaspingly, and the skin of the child turned blue. This cough lasted for 3 minutes and then the cyanosis ceased. Momentarily the child is symptomless.

Following are the parents' responses to your questions. Which of these is the most important for you?
A) the child often drinks from a dug well
B) the parents' previous child died because of valvular heart disease
C) 2 weeks ago the child had pneumonia
D) the child ate walnuts before the attack
E) the elder brother of the child has measles

Which of the following diagnostic tests do you order?
A) ECG
B) chest x-ray film
C) chest x-ray transillumination
D) observation only, because the child is symptomless
E) send for the elder brother having the measles

Which of the following tests do you additionally order?
A) bronchoscopy
B) bronchography
C) ECG monitoring
D) swallowing test
E) repeated measurements of pCO₂ and P0₂

Which of the following therapeutic interventions do you choose?
A) the administration of methylene blue and vitamin C
B) the administration of digitalis
C) the administration of diuretics
D) observation only
E) the administration of antibiotics
Two weeks ago, an 8-year-old child developed polyuria, polydipsia, and polyphagia with occasional nocturnal enuresis.

4.462/1.
What are your questions to the parents concerning the anamnestic data?
1) Did the child note tingling micturition?
2) Did the child have fever?
3) How much is the daily urine volume?
4) Did the child lose weight recently?
   A) (1) and (3) are correct
   B) (1), (2), and (4) are correct
   C) (3) and (4) are correct
   D) (1), (2), and (3) are correct
   E) all of the above

4.462/2.
Which of the following tests would you order to clarify the diagnosis?
A) an oral glucose tolerance test
B) a determination of the blood glucose, urinary glucose, and acetone concentration
C) urography
D) a complete urinalysis and concentration test
E) an ADH test

4.462/3.
Which of the following urinary findings is not characteristic for diabetes insipidus?
1) a high specific gravity urine
2) dark colored urine
3) a low specific gravity urine
4) light colored urine
5) turbid urine
6) the urine volume decreases and specific gravity markedly increases upon fluid restriction
   A) (1), (2), (5), and (6) are correct
   B) (1), (2), and (3) are correct
   C) (2), (4), (5), and (6) are correct
   D) (3), (5), and (6) are correct
   E) (2), (3), (4), and (5) are correct

4.462/4.
Which of the following therapeutic possibilities would you choose?
A) the restriction of fluid intake
B) antidiuretic hormone substitution
C) insulin administration
D) oral antidiabetic administration
E) insulin administration and a controlled diet
F) a controlled diet

4.462/5.
Which therapeutic intervention would you choose in case of a diabetic ketoacidosis (pH: 7.1; blood glucose: 30.2 mmol/1)?
A) infusion of 5% glucose in physiologic saline
B) infusion of physiologic saline
C) infusion of fructose
D) infusion of 10% glucose in physiologic saline
Which of the following therapeutic protocols would you choose for the patient?
A) the subcutaneous administration of a combination of short-acting and long-acting insulin
B) the frequent intravenous administration of short-acting insulin only
C) the frequent subcutaneous administration of short-acting insulin only

When ketonuria is not present, a single dose of insulin (by subcutaneous injection) is:
A) 0.5 U/kg/24 h.
B) 0.25 U/kg/24 h.
C) 1.0 U/kg/2 h.

Which of the following considerations concerning the insulin therapy of a newly discovered diabetes in a patient with a clinically sufficient general state are correct?
1) insulin is only administered intravenously
2) the administration of long-acting insulin, once daily, is indicated; the number of units of insulin administered equals the age of the child in years
3) the daily cumulative dose is 1 U/kg/24 h.
4) the daily cumulative dose is 0.1 U/kg/24 h.
5) short-acting insulin is administered subcutaneously, four times daily
   A) (1), (2), and (3) are correct
   B) (2) and (4) are correct
   C) (1), (3), and (4) are correct
   D) (3) and (5) are correct
   E) (1) and (4) are correct

Case Study
A 4-week-old infant is brought to the physician by the mother. The mother reports that the physiologic jaundice has never ceased completely. The stool is greyish-white and the baby's urine stains the diaper brown. The severity of the baby's jaundice soon increases.

What is the most likely diagnosis?
A) sepsis
B) hepatitis
C) biliary tract atresia

The most informative laboratory test is:
A) a hemoculture
B) the RBC sedimentation rate; blood cell counts and the differential count
C) a hepatic functional test
D) a renal functional test
E) a native abdominal x-ray
What is your diagnosis if the non-conjugated bilirubin fraction is exclusively elevated?
A) sepsis
B) biliary tract atresia
C) hemolytic anemia
D) viral infection

What is your diagnosis if both the conjugated and non-conjugated bilirubin fractions are elevated?
A) Crigler-Najjar syndrome
B) hemolysis
C) biliary tract atresia

4.464/5.
Which of the following tests are needed for the differential diagnosis of biliary tract atresia and hepatitis?
1) liver biopsy
2) intraoperative cholangiography
3) further observation for 4 weeks
4) administration of prednisone
   A) (1) and (2) are correct
   B) (2) and (3) are correct
   C) (1) and (4) are correct
   D) (2) and (4) are correct
   E) (3) and (4) are correct

PED-4.465

Case Study
10-year-old boy has been complaining of fatigue, a sore throat and difficulty in swallowing for a week. He is receiving antibiotic therapy. The physician notes hepatomegaly and fine maculous eruptions on the trunk and refers him to the hospital. On admission: eruptions are detected, both the liver and spleen are enlarged. The child does not have jaundice. The lymph nodes of the neck and axillary region are enlarged. Laboratory results: moderate anemia, WBC count: 14x10^9/1, atypical lymphocytes in the peripheral blood smear, differential count: band 0.01, segmented 0.35, eosinophil 0.12. The serum aspartate aminotransferase activity is elevated.

4.465/1.
What is the most likely diagnosis:
A) acute lymphoblastic leukemia
B) hepatitis A
C) agranulocytosis
D) infectious mononucleosis
E) measles

4.465/2.
The most important diagnostic procedure is:
A) a liver biopsy
B) the measurement of granulocyte alkaline phosphatase activity
C) the introduction of prednisone therapy
D) the administration of antibiotics
E) a rapid monocyte test or heterophil antigen determination
4.465/3. Which of the following diseases are associated with eosinophilia?
1) Hodgkin's disease
2) chronic granulocytic leukemia
3) scarlet fever
4) eosinophil granuloma
   A) (1), (2), and (3) are correct
   B) (1) and (3) are correct
   C) (2) and (4) are correct
   D) only (4) is correct
   E) all of the above

4.465/4. Which of the following conditions are characterized by more than 20% of atypical lymphocytes:
1) "post-transfusion syndrome"
2) cytomegalovirus infection
3) infectious mononucleosis
4) hepatitis A
   A) (1), "(2), and (3) are correct
   B) (1) and (3) are correct
   C) (2) and (4) are correct
   D) only (4) is correct
   E) all of the above

4.465/5. The disease the child has frequently leads to a chronic hepatic disorder, because hepatic involvement is common in this disease.
A) both the statement and the explanation are true, and a causal relationship exists between them
B) both the statement and the explanation are true, but there is no causal relationship between them
C) the statement is true, but the explanation is false
D) the statement is false, but the explanation itself is true
E) both the statement and the explanation are false

PED-4.467. Case Study
You are called to a 14-month-old child. The child, following a period of mild airway infection for a few days, developed fever, tachypnea, inspiratory and occasionally expiratory dyspnea. Nostral flaring, synchronous with the respiration, is pronounced. The child is moderately cyanotic. Tympanic resonance is detected diffusely over the lungs, both coarse and fine rates are audible. The white blood cell count is normal.

4.467/1. What is the most likely diagnosis?
A) acute bronchopneumonia
B) acute bronchiolitis
C) bronchial asthma
D) essential pulmonary hemosiderosis
E) sepsis

4.467/2. All of the following should be done to the child, EXCEPT:
A) the child has to be admitted to a hospital
B) oxygen therapy, monitoring the arterial pO\textsubscript{2}
C) infusion, (the volume adjusted to the actual requirements)
D) digitalis therapy in case of severe tachycardia
E) immediate mechanical respiration
F) the vigorous relief of fever

PED-4.468.

Case Study
A four-year-old child is brought to your office. A few hours ago, the parents found the child playing with the medicines kept at home. The child complains of dizziness and drowsiness. Tremor of the hands and extrapyramidal type abnormal movements are detected. The heart rate is 150/min., the child's mouth is dry.

4.468/1.
Which of the following drugs are possible causes of the intoxication?
A) methophenazate (Frenolon)
B) atropine
C) diazepam (Seduxen)
D) thiethylperazine (Torecan)
E) diphenhydraminate (Daedalon)
F) barbiturates

4.468/2.
Which of the following antidotes / interventions would you choose?
A) gastric lavage
B) promethazine (Pipolphen)
C) dimethyl-glutarimide (Redimyl)
D) nalorphine
E) an antiparalunsonian drug
F) EDTA

MULTIPLE CHOICE QUESTIONS / TYPE I
Select the correct answers to the following questions!!!
...each question may have more than one correct answer.

PED-4.469.
Which of the following statements about breastfeeding are correct?
A) the infant consumes 75-90\% of the milk during the first 5-10 minutes of breastfeeding
B) the mother's milk production becomes sufficient within 24 hours following birth
C) milk production is caused by the secretion of prolactin
D) the newborn should be nourished with food preparations until the mother's milk production becomes sufficient
E) if the baby suckles sufficient amounts of milk, only pure water should be given supplementarily

PED-4.470.
Which of the following statements concerning difficulties in breastfeeding are FALSE?
A) real hypogalactia is a frequent cause
B) the mother should not squeeze her breasts during the first few days following feeding
C) in case of a maternal puerperal psychosis ablactation is indicated
D) before breastfeeding, a flat nipple should be elevated with a
E) an infant with a cleft palate should be nourished with squeezed milk from the mother

PED-4.471.
Characteristics of the Tetralogy of Fallot include:
A) a right deviation on the ECG
B) a wet lung
C) a loud second pulmonary sound
D) palliative surgical therapy includes an anastomosis between the left subclavian and pulmonary arteries
E) a loud systolic murmur caused by the ventricular septal defect

PED-4.472.
Characteristic symptoms of acute poststreptococcal glomerulonephritis include:
A) dehydration
B) a poor prognosis
C) facial edema
D) a low serum complement level
E) it usually occurs in children under the age of 4

PED-4.473.
Symptoms or signs, characteristic for hypertrophic pyloric stenosis include:
A) bilious vomit
B) a lack of nervous plexuses in the pyloric wall
C) conjugated hyperbilirubinemia
D) a more frequent manifestation in boys than in girls
E) a palpable resistance in the abdomen

PED-4.476.
Characteristics of a mature 9-month-old infant are:
A) the infant grabs objects with the index and the thumb
B) the infant is able to drink from a glass without assistance
C) the infant is able to stand up with assistance
D) the infant follows simple commands
E) the infant can pronounce 6-10 words

PED-4.477.
A newborn exhibits spasmophilia. Relevant data of the history are:
A) the father suffers from glomerulonephritis
B) the mother received penicillin therapy during the first trimester of her pregnancy
C) the newborn is nourished with cow's milk
D) fetal retardation

PED-4.478.
Non-articular manifestations of Still's disease (JRA) are:
A) bronchitis
B) eruptions
C) leukocytosis
D) splenomegaly
E) rheumatic nodules
Characteristics of phenylketonuria include:
A) a physical examination at birth reveals nothing abnormal
B) eczema
C) tendency for venous thrombus formation
D) cataracts
E) thin blond hair

PED-4.481.
Possible causes of the development of hepatic cirrhosis in childhood are:
A) alphas-antitrypsin deficiency
B) celiac disease
C) phenylketonuria
D) cow's milk intolerance
E) Wilson's disease

PED-4.482.
Typical manifestations of cystic fibrosis include:
A) an abnormality of the passage of meconium following birth
B) prolapse of the anus
C) bronchial asthma
D) diabetic ketoacidosis
E) iron deficiency anemia

PED-4.483.
Symptoms of a 4-year-old boy with congenital adrenal hyperplasia include:
A) testicular enlargement
B) a low plasma ACTH level
C) a supernormal body height
D) the advisable therapy is an adrenalectomy
E) the most common cause is the congenital abnormality of the 21-hydroxylase enzyme

PED-4.484.
Muscular hypotonia, without muscular weakness is characteristic for:
A) cerebral trauma
B) rickets
C) Down's syndrome
D) Werdnig-Hoffmann syndrome
E) Guillain-Barré syndrome

PED-4.485.
Characteristic symptoms of an overmature newborn include:
A) a decreased amount of vernix caseosa
B) epidermal desquamation
C) less hair
D) meconium-stained nails
E) a higher perinatal mortality rate in comparison with those born at term

PED-4.486.
If the major fontanelle of an 18-month-old child is still open, it may be a symptom of:
A) rickets
B) phenylketonuria
C) hydrocephalus
D) hypothyroidism
E) Down's syndrome

PED-4.487. Possible causes of jaundice in a neonate include:
A) hepatitis
B) ABO-incompatibility
C) congenital spherocytosis
D) gallstone disease

PED-4.488. The most common causes of meningitis in a neonate are:
A) Staphylococcus aureus
B) Haemophilus influenzae
C) meningococcus
D) Streptococcus pneumoniae

PED-4.489. Which of the following congenital cardiac malformations are associated with cyanosis?
A) ventricular septal defect
B) atrial septal defect
C) Tetralogy of Fallot
D) transposition of the great arteries

PED-4.490. A 2-year-old child is able to:
A) ride the bicycle
B) climb onto furniture
C) walk upstairs
D) recognize the parents

PED-4.491. Which of the following have to be supplemented in a breastfed baby?
A) vitamin D
B) fluoride
C) iron
D) vitamin K

PED-4.492. Which of the following infectious diseases do not need to be officially reported?
A) scarlet fever
B) gastrointestinal salmonellosis
C) Hemophilus influenzae-meningitis
D) pertussis
E) herpes zoster
F) chicken pox

PED-4.493. Which of the following non-infectious diseases have to be officially reported?
A) developmental abnormalities
B) severe mental retardation
C) asthma
D) movement disabilities
E) chronic renal disease
F) leukemia and other malignancies
G) iron deficiency anemia

PED-4.494.
Typical symptoms of Down's syndrome include all of the following, EXCEPT:
A) epicanthus, mongoloid palpebral aperture
B) brachycephaly
C) muscular hypotonia
D) 4 digital grooves on the palm
E) macroGLOSSia
F) hypothyroidism
G) an increased excretion of mucopolysaccharides

PED-4.495.
Informative merphogenetic variants (minor anomalies) include all of the following, EXCEPT:
A) caput succedaneum
B) hypertelorism
C) strabismus
D) uvula bifida
E) café au lait spots on the trunk

PED-4.496.
Which of the following statements concerning the differences between the composition of human milk and cow's milk are correct?
A) the lactose concentration of human milk is higher
B) the lactose concentration of human milk is lower
C) the total protein concentration of human milk is higher
D) the total protein concentration of human milk is lower
E) the concentration of the secretory IgA is higher in human milk
F) the calcium concentration of human milk is lower

PED-4.497.
Which of the following dietary recommendations are FALSE?
A) breastfeeding should be started as soon as possible after delivery
B) if milk production decreases during the first days following release from the obstetric department, a supplementary diet must be introduced to avoid starving the newborn
C) if a 10-day-old infant sucks low volumes of milk, a supplementary diet must be immediately introduced
D) if a 2-week-old infant wakes up crying during the night, nighttime breastfeeding is temporarily allowed
E) the periods between meals and the amounts of consumed milk do not have to be equal

PED-4.498.
Breast-feeding is contraindicated in which of the following maternal diseases?
A) sepsis
B) pneumonia
C) mastitis without suppuration
D) follicular tonsillitis
E) anemia
F) active tuberculosis
PED-4.499.
Which of the following rules of ablationation are FALSE?
A) if milk production is sufficient, the ablationation is started during the 2nd-3rd months
B) if milk production is sufficient, the ablationation is started during the 6th month
C) the ablationation is started with supplementation of a food preparation
D) the first sucking is replaced gradually over a period of 2-3 weeks, all the while adding increasing amounts of prepared foods
E) the ablationation is started with a supplementation of potato and carrot mash

PED-4.500.
An 8-month-old infant develops a mild iron deficiency. Which foods do you recommend?
A) spinach
B) meat purée
C) liver
D) dairy products

PED-4.501.
All of the following are symptoms and complications of hypervitaminosis-D, EXCEPT:
A) constipation
B) vomiting
C) loss of appetite
D) muscular hypertonia
E) hypercalcemia
F) hypokalemia
G) polydipsia and polyuria
H) renal failure

PED-4.502.
All of the following statements about vitamin C are correct, EXCEPT:
A) it plays a role in a number of enzymatic reactions
B) fresh fruits, especially lemons, oranges and grapefruit contain considerable amounts of vitamin C
C) the requirements are increased in febrile diseases
D) a deficiency of vitamin C might cause pseudoparalysis
E) a deficiency of vitamin C might cause thrombocytopenic purpura
F) the advisable supplementation of vitamin C for a child on an average diet is 200 mg a day

PED-4.503.
All of the following statements about vitamin K are correct, EXCEPT:
A) it is a lipid soluble vitamin but a water soluble form also exists
B) it plays an essential role in the synthesis of coagulation factors II, VII, IX and X
C) a lack of the intestinal flora may cause a vitamin K deficiency
D) hepatic disease may cause a vitamin K deficiency
E) if vitamin K is deficient, the first phase of coagulation is prolonged
F) in case of a hemorrhagic diathesis in a newborn, 10 mg of vitamin K must be administered
PED-4.504.
Which of the following statements about kwashiorkor are correct?
A) kwashiorkor develops as a result of a protein-deficient and carbohydrate-rich diet
B) in babies suffering from kwashiorkor, the Babinski reflex is positive
C) hypoproteinemia is a characteristic finding
D) with time, symptoms of a deficiency of lipid soluble vitamins develop

PED-4.505.
All of the following are possible causes of a loss of appetite, EXCEPT:
A) excess pampering
B) a lack of affection from the parents
C) a chronic disease
D) anemia
E) hyperthyroidism
F) a vitamin deficiency
G) gastric hyperacidity

PED-4.506.
Which of the following considerations are important in the treatment of exogenous obesity?
A) the child has to be separated from the family for a long period
B) the physician needs the assistance of the parents as well
C) the caloric intake should not exceed 3,700-4,200 kJ
D) refined sugar should be strongly restricted
E) anorexigenic drugs are advisable from the age of 4
F) additional psychotherapy is needed

PED-4.508.
All of the following statements concerning potassium replacement are correct, EXCEPT:
A) the value of the serum potassium concentration and the volumes of body fluid compartments are not enough for a proper estimate of the magnitude of the potassium depletion
B) intracellular potassium depletion may roughly be estimated by ECG abnormalities
C) in hypokalemia, the QT interval is shorter on the ECG
D) potassium depletion is severe in hyponatremic dehydration and diabetic ketoacidosis
E) a parenteral potassium replacement in a form of an infusion must be controlled by the detection of the serum potassium concentration and an ECG
F) 1 ml of 10% KCl solution contains 1 mmol of potassium

PED-4.509.
Which of the following statements about fructose intolerance are correct?
A) symptoms develop following the first suckling
B) tea sweetened with glucose elicits vomiting
C) tea sweetened with saccharose elicits vomiting
D) symptoms are caused by hyperglycemia
E) fructose is detectable in the urine following the consumption of tea sweetened with saccharose

PED-4.511.
Which of the following interventions are suitable for the treatment of a hypoglycemic eclampsia?
A) the administration of glucose
B) the administration of insulin and glucose
C) the administration of glucose and glucagon
D) the administration of glucagon
E) an injection of diazepam (Seduxen)

PED-4.512.
Possible consequences of an improper respiratory and alkaline-salt-glucose infusion in a newborn are:
A) the bicarbonate therapy elevates the serum sodium concentration
B) the bicarbonate therapy might worsen the respiratory acidosis
C) the bicarbonate therapy might cause metabolic alkalosis
D) the glucose infusion might cause hyperglycemia
E) the newborn becomes desiccated if the infused volume is 80 ml/kg/day
F) respiration therapy providing a high oxygen concentration may cause hypocapnia

PED-4.513.
All of the following rules must be followed during neonatal nursing of the newborn with asphyxia, EXCEPT:
A) suction of the mucus only from the oral cavity and the throat;
   if the baby is still asphyxic after a minute, then suction of the trachea with a laryngoscope is necessary
B) in case of aspiration, suction of the airways with a laryngoscope is necessary
C) suction of the airways must be followed by suction of the stomach, it is advisable to leave the tube in the stomach
D) if, following suction of the airways, spontaneous breathing starts,
   or can be started by the application of a respirator balloon and oxygen,
   plus the heart rate, tone and reflexes can be normalized, then administration of 40% oxygen and observation is indicated
E) if suction and oxygen-respirator balloon aid are successful,
   intubation is needed to prevent further aspiration
F) the newborn must be heated during suction and artificial respiration

PED-4.514.
Which of the following considerations concerning the alkali therapy of a newborn with asphyxia are FALSE?
A) following tracheal aspiration, balloon aided respiration and oxygen therapy of asphyxia; a slow bicarbonate infusion is administered in each case
B) in severe asphyxia, besides oxygen therapy, 1.25 mmol/kg bicarbonate is infused in a 5-10% glucose solution
C) if the newborn does not become conscious and respiration is still insufficient following the first dose of bicarbonate, the total base deficit is corrected after the determination of the parameters of the acid-base status
D) 25% of the calculated base deficit is infused rapidly, the rest controlled by determinations of the parameters of the acidbase status
E) the administration of bicarbonate makes respiratory acidosis more severe, therefore sufficient respiratory volume has to be provided

PED-4.515.
Vomiting, detected 5 days after birth is a possible symptom of:
A) pyloric stenosis
B) salt-losing adrenogenital syndrome
C) cystic fibrosis
D) hypothyroidism
E) achalasia

PED-4.516.
Characteristic features of a premature newborn include all of the following, EXCEPT:
A) the circumference of the head and the thorax are equal
B) lanugo hair is observed on the face and the forehead
C) the respiration is usually irregular
D) the neonatal jaundice is more pronounced and lasts longer
E) the muscle tone is increased
F) the swallowing reflex is frequently absent

PED-4.517.
All of the following considerations concerning the care of premature newborns are correct, EXCEPT:
A) the mother should be transported for a premature delivery to a department which is suitable for the care of the premature newborn
B) proper care includes protection against cooling, hypoglycemia and oxygen deficiency
C) a bicarbonate and glucose-containing solution is injected via the umbilical vein to the newborn with a very low birth weight
D) premature newborns, during the first few days of life are nourished parenterally
E) antibiotic prophylaxis is indicated for a few days in each premature newborn
F) premature infants under 2,000 g birth weight must be provided an environmental temperature of 33°C and at least 65% relative humidity

PED-4.518.
All of the following microorganisms may infect the fetus transplacentally, EXCEPT:
A) measles virus
B) chlamydia
C) toxoplasma
D) Treponema pallidum
E) herpesvirus
F) cytomegalovirus

PED-4.519.
Case Study:
When working in a perinatal intensive care unit, what are your tasks in case of the admission of a premature newborn with suspected gastrointestinal infection? Specify the false statements!
A) as soon as possible, obtain information about the infection of the mother or the environment
B) a premature newborn from a bacteriologically positive environment must be directed to the neonatal division of an infectious department
C) a premature newborn with a suspected infection is placed into an incubator
D) before receiving the bacteriology results the symptomless premature newborn may receive presumptive antibiotic therapy,
based on the anamnestic data

PED-4.520.
What has to be done to the newborn of a mother with a suspected enteral infection in the hospital ward?
A) the newborn has to be separated safely from the other newborns
B) immediate stool, umbilical, nasal and pharyngeal discharge; bacteriology is indicated
C) if newborn is symptomless but is bacteriologically positive, he is preferentially placed in the infectious ward, and by no means in the neonatal ward
D) a symptomless newborn with klebsiella in the stool must receive an antibiotic treatment
E) the newborn in point (D) should only be discharged after the bacteriology test of the stool becomes negative

PED-4.521.
Case Study:
A 5-day-old newborn exhibits a loss of appetite and vomits once daily. The jaundice, first thought to be physiologic, becomes more severe. Suffusions are observed on the skin. The fontanelle is at the level of the skull. No fever is detected. Which of the following examinations are the most important and the most urgent for the diagnosis?
A) CSF content testing
B) serum prothrombin level
C) platelet count
D) native abdominal x-ray
E) hemoculture
F) repeated urine bacteriology tests
G) determination of serum total bilirubin
H) determination of the activity of the AST and the ALT in the serum

PED-4.522.
Which of the following statements concerning achalasia (gastroesophageal reflux) are correct?
A) a decreased tone of the cardia and an unusual position of the gastric fundus are possible causes
B) it is usually associated with projectile vomiting
C) it causes retardation of somatic maturation
D) esophagitis may develop
E) it may cause anemia
F) the therapy is: keeping the patient in a half-sitting position and feeding with more consistent food; in severe cases an operation is indicated

PED-4.523.
Important characteristics of cystic fibrosis include:
A) severe, recurrent respiratory tract infections
B) fermentational diarrhea
C) palpable cysts in the epigastrium
D) partially digested and fetid stool
E) decreased sweating

PED-4.524.
All of the following statements concerning cystic fibrosis are correct, EXCEPT:
A) an abnormality of intestinal passage may occur during the neonatal period and later
B) the character of the cough is similar to that in pertussis
C) the excessive sweating causes water loss and desiccation
D) a chronic pulmonary abnormality favors the colonization of E. coli
E) the administration of pancreatic extract is indicated because of the digestive abnormality

PED-4.525.
Which of the following statements about pneumococcal peritonitis are correct?
A) it is more frequent in boys than in girls
B) the rapid development of shock is characteristic
C) air is present in the peritoneal cavity
D) in all cases an immediate operation is indicated
E) the administration of antibiotics which are effective against pneumococcus is beneficial
F) nephrosis predisposes to the disease

PED-4.526.
Symptoms of hepatic cirrhosis include all of the following, EXCEPT:
A) cirrhotic nodules are rarely palpable
B) bleeding from esophageal varices
C) the blood urea nitrogen level is elevated
D) ascites develops in the advanced stage
E) the serum albumin concentration is higher

PED-4.527.
Signs indicative for cardiac malformations in the neonatal period include all of the following, EXCEPT:
A) if there is no other reasonable cause to explain the cyanosis
B) the liver is enlarged, it exceeds the costal arch by 2 cm, and no other abnormal physical symptom is present
C) if the heart is enlarged and pulmonary tracings are more marked on the x-ray picture
D) paroxysmal tachycardia
E) a right axis deviation is observed on the ECG

PED-4.528.
In which of the following conditions is the "Rashkind's balloon atrial septotomy" indicated?
A) transposition of the great arteries
B) patent ductus arteriosus
C) secundum type atrial septal defect
D) pulmonary atresia
E) ventricular septal defect

PED-4.529.
Which of the following statements concerning the Tetralogy of Fallot are FALSE?
A) a cerebral abscess is a possible complication
B) digitalis is administered in Fallot's crisis
C) the preferable operation is a primary and complete correction
D) an increased pulmonary vascularisation is observed
E) a sufficient fluid intake is very important
PED-4.530.
Symptoms and features of a patent ductus arteriosus during infancy include all of the following, EXCEPT:
A) an increased right ventricular afterload is detected
B) the diastolic pressure is normal
C) a systolic murmur is audible in the left 2nd intercostal space
D) a prolonged bronchitis may cause obstruction
E) the ECG reveals signs of left ventricular hypertrophy

PED-4.531.
Which of the following statements concerning a patent ductus arteriosus are correct?
A) a systolic-diastolic murmur is detected
B) most cases discovered during the neonatal period require surgery
C) a fluctuating pulse
D) in all cases of combined anomalies, the patent ductus must be closed by drugs or by surgical correction

PED-4.532.
Which of the following congenital heart diseases are associated with a left to right shunt?
A) Tetralogy of Fallot
B) pulmonary atresia
C) patent ductus arteriosus
D) endocardial cushion defect
E) tricuspid atresia
F) coarctation of the aorta
G) large ventricular septal defects
H) transposition of the great arteries
I) abnormal origin of the coronary arteries

PED-4.533.
What are the clinical symptoms of a severe ventricular septal defect in a 2-year-old child?
A) a loud holosystolic murmur audible in the left 3rd-4th intercostal space
B) an isolated left ventricular hypertrophy
C) the oxygen saturation of the blood in the two ventricles is identical
D) recurrent respiratory tract infections; pneumonias
E) protrusion of the cardiac region

PED-4.534.
Determine five specific manifestations of rheumatic fever from the list below!
A) fever
B) carditis
C) arthralgia
D) polyarthritis
E) chorea minor
F) an increased red blood cell sedimentation rate
G) the development of subcutaneous nodules
H) erythema annulare
I) erythema multiforme

PED-4.535.
All of the following symptoms are observed in a patient with chorea minor, EXCEPT:
A) paradoxical breathing
B) paradoxical pulse
C) Gordon-type knee reflex
D) irregularities of the patient's handwriting show the progression of the disease
E) the red blood cell sedimentation rate is markedly increased

PED-4.536.
All of the following statements concerning penicillin therapy of rheumatic fever are correct, EXCEPT:
A) 10 million units of crystalline penicillin is administered daily in the beginning of the acute phase
B) 3x 1-2 tabl. penicillin (500,000 U/tablet) is administered daily in the beginning of the acute phase
C) prophylaxis is needed for 3 months following the acute phase of the disease
D) prophylaxis is needed following the acute phase of the disease (until the end of puberty or, at least for 5 years)
E) the prophylactic dose is 1-2 tablets of penicillin daily (500,000 U/tablet)
F) erythromycin may be administered instead of penicillin

PED-4.537.
All of the following are guidelines for the therapy of circulatory failure in a child, EXCEPT:
A) bed-rest, half-sitting position
B) the relief of fever; the administration of oxygen
C) discontinuation of oral feeding; infusion of a minimal volume
D) a low salt diet; restricted potassium intake
E) the elimination of the negative inotropic factors (acidosis, hypoglycemia etc.)
F) the administration of diuretics
G) the administration of digitalis in all cases

PED-4.538.
The administration of digitalis is dangerous in which of the following conditions?
A) hyperkalemia
B) hypokalemia
C) atrial paroxysmal tachycardia
D) ventricular paroxysmal tachycardia
E) bradycardia

PED-4.539.
Which of the following are the dominant symptoms of the prolonged presence of a foreign body in the nose?
A) pain
B) bleeding from the nose
C) serous nasal discharge
D) purulent nasal discharge
E) lacrimation on the same side
F) obstruction

PED-4.540.
Which of the following conditions can cause the sudden development of stridor?
A) congenital stridor
B) diphtheria
C) a foreign body
D) pneumonia
E) laryngitis subglottica (pseudocroup)

PED-4.541.
All of the following are interventions which are used for the therapy of pseudocroup (laryngitis subglottica), EXCEPT:
A) the careful inhalation of hot steam
B) the inhalation of cold steam
C) ephedrine vapour inhalation or the intramuscular injection of ephedrine
D) antihistamine vapour inhalation
E) epinephrine vapour (Micronephrin, Tonogen) inhalation
F) corticosteroids are administered in severe cases

PED-4.542.
Which of the following are the most frequent symptoms of pneumonia in an infant?
A) dullness to percussion
B) bronchial respiratory sounds
C) groaning respiration
D) dyspnea
E) fever

PED-4.543.
Which of the following statements concerning staphylococcal pneumonia are FALSE?
A) it is much more frequent during the school-age than during infancy
B) it progresses rapidly
C) suppuration, empyema and broncho-pleural fistula formation are common complications
D) the repeated puncture of the pleural exudate is a sufficient therapy
E) the appropriate therapy is administration of P-lactamase resistant penicillin or cephalosporin

PED-4.544.
A positive tuberculin cutaneous test of a child having received BCG immunization, reliably excludes the following immunodeficiency syndromes:
A) Bruton's type agammaglobulinemia
B) DiGeorge's syndrome (thymus aplasia)
C) severe, combined immunodeficiency (SCID)
D) an isolated IgA deficiency

PED-4.545.
Which of the following statements concerning Bruton's type agammaglobulinemia are correct?
A) the inheritance is autosomal recessive
B) plasma cells are absent in the lymph nodes
C) because of the lack of B-cells and plasma cells, only IgG is deficient
D) from the time of birth, the disease is manifested by severe infections
E) the defense against viral infections is usually deficient
F) proper therapy aims to elevate the serum IgG level above 2 g/l

PED-4.546. Which of the following rules of the application of gamma globulin are correct?
A) these preparations may be administered intravenously
B) gamma globulin prophylaxis of a 2 to 3-year-old child suffering from frequent upper respiratory tract infections is useful during the winter
C) in case of an IgA deficiency, the administration of a commercially available gamma globulin preparation is useful
D) immunization against measles with an attenuated virus preparation is ineffective within 6 weeks following the administration of gamma globulin
E) it immunizes passively against measles if administered before the 5th day of the incubation period

PED-4.547. Which of the following diseases or conditions cause a secondary immunodeficiency?
A) measles
B) chicken pox
C) scarlet fever
D) malnutrition
E) irradiation therapy
F) acute glomerulonephritis

PED-4.548. Which of the following statements about AIDS are FALSE?
A) HIV destroys the T4 (helper) cell lineage
B) HIV infection of the mother, transfusions of infected blood preparations, non-sterile syringes and needles are possible causes of the development of AIDS during infancy and childhood
C) HIV infection is not transmitted by mother's milk
D) the infection is transmitted by the saliva, tears or sperm of the infected individual
E) the physical examination of a patient with AIDS is dangerous for the physician

PED-4.549. Which of the following statements concerning immunohemolytic anemias are correct?
A) viral infections, lymphoproliferative diseases and certain drugs are possible causes of these anemias
B) these anemias are associated with hematuria
C) the Coombs' test is positive in these anemias
D) hemoglobinuria may be present in these anemias

PED-4.550. Which of the following statements concerning allergic reactions caused by toxic immune complexes are correct?
A) in case of antigen excess, antigen-antibody complexes damage the tissues by complement activation
B) in the Arthus reaction, the deposition of immune complexes induces glomerulonephritis, erythema nodosum and precipitates several infectious diseases.
C) bronchial asthma is caused by immune complex deposition.
D) immune complexes can be demonstrated by the BAST method.

PED-4.551.
Which of the following statements about an anaphylactic type hypersensitivity reaction are correct?
A) parenterally administered animal-borne protein, bee and wasp bites and penicillin administration are all possible causes.
B) the allergen, bound to IgE, acts directly on the wall of the vessels and the bronchi.
C) its mediators are histamine, serotonin, bradykinin and eosinophil chemotactic factor.
D) the most effective drug in anaphylactic shock is thenalidine (Sandosten) administered intravenously.

PED-4.552.
Which of the following statements about the symptoms and laboratory alterations of anemias are correct?
A) a severe anemia causes dyspnea and tachycardia.
B) cyanosis develops in a severe anemia.
C) a cardiac murmur may become audible in anemia.
D) reticulocytosis ensures a hemorrhagic origin of the anemia.
E) the reticulocyte count is normal in folate and vitamin B_{12} deficiency anemias.
F) the serum iron level is decreased in congenital hypoplastic anemia.

PED-4.553.
Which of the following statements about the anemia of neonates and young infants are FALSE?
A) the lowest tolerable level of hemoglobin concentration of a 1-week-old infant is 6.5 mmol/l (10 g%).
B) physiologic anemia is most marked at the age of three months.
C) the development of the early anemia of premature newborns is due to the shorter life span of the fetal red blood cells, deficient erythropoietin production, and the rapidly increasing circulatory volume.
D) folate and vitamin B_{12} are administered to prevent this early anemia.

PED-4.554.
**Case Study:**
An infant develops an iron deficiency anemia characterized by a low total iron level and an elevated total iron binding capacity of the serum. Prolonged oral iron administration fails to improve the condition. Other possible causes of this anemia that should be clarified with further tests are:
A) gastrointestinal bleeding.
B) thalassemia.
C) sickle cell anemia.
D) a urinary tract infection.
E) a parasitic infection.
F) an absorption abnormality.
PED-4.555.
In which of the following conditions is iron replacement not indicated?
A) hemolytic anemia
B) hemorrhagic anemia
C) thalassemia beta minor
D) infections
E) hemosiderosis

PED-4.556.
**Case Study:**
Your patient exhibits pallor and strong dyspnea. The results of the available biochemical tests are: hemoglobin 2.5 mmol/l, hematocrit 14%, reticulocyte count 200/\mu l. Which of the following possibilities would you consider to further investigate?
A) leukemia
B) pancytopenia
C) hemolytic anemia
D) severe iron deficiency
E) hemorrhagic anemia

PED-4.557.
Which of the following conditions are possible causes of a hypoplastic anemia?
A) premature delivery
B) uremia
C) hypothyroidism
D) infections
E) iron deficiency

PED-4.558.
**Case Study:**
Splenectomy is a possible therapeutic intervention for a 3-year-old child suffering from congenital spherocytosis. Which of the following considerations about the proposed operation are correct?
A) the patient should undergo the operation as soon as possible; as this would considerably decrease hemolysis
B) it is advisable to wait for one more year until the operation
C) a splenectomy predisposes for fulminant bacterial infections
D) Streptococcus pyogenes is the most common microorganism causing infections after the operation
E) prophylactic penicillin administration is indicated for one year following a splenectomy

PED-4.559.
Which are the possible factors predisposing to the development of methemoglobinemia caused by a high nitrate concentration in the drinking water?
A) the young age of the infant
B) premature delivery
C) trauma at birth
D) dyspepsia
E) oliguria

PED-4.560.
Which of the following statements about Schönlein-Henoch purpura
are FALSE?
A) it is associated with maculo-papulous and later, purpura-like eruptions
B) swelling of the joints lasts for 1-2 months
C) it may be associated with abdominal pain caused by the edema or hemmorhage of the intestinal wall
D) the occurrence of a microscopic hematuria suggests renal involvement
E) the disease lasts for years even in uncomplicated cases

PED-4.561.
Which of the following guidelines for the therapy of acute lymphoblastic leukemia are FALSE?
A) the initial step is intensive drug therapy of 4-5 weeks duration
B) the intensive phase is followed by active chemotherapy
C) meningeal prophylaxis is carried out with irradiation of the central nervous system because it is unresponsive to cytostatics
D) in some cases, the intensive therapy is repeated 2 months later
E) maintenance therapy is discontinued every 1-2 months by reinductions of 1 week duration
F) the chemotherapy lasts for 5 years in each case

PED-4.562.
Which of the following interventions are suitable for the prevention of leukemic meningiosis?
A) regular intravenous cytostatic therapy
B) frequent blood transfusions
C) immunostimulants
D) craniospinal irradiation
E) methotrexate (intrathecally)

PED-4.563.
Which of the following statements about the healing of acute lymphoblastic leukemia are correct?
A) symptomless long term survival is expectable in 70-80% of the cases with a good prognosis and in 50% of the cases with a poor prognosis
B) only 1-2% of long term survivors develop late relapse
C) approximately half of the patients with late relapse can be healed by repeating the therapy
D) the development of a second malignancy is more frequent among those who recovered from leukemia than in the general population
E) the occurrence of malignancies among the offspring of leukemic patients is more frequent than in the general population
F) bone marrow transplantation is a possible therapeutic intervention in case of a late relapse

PED-4.564.
Which of the following malignancies are the most frequent during the childhood?
A) Ewings sarcoma
B) cerebral tumor
C) lung cancer
D) primary hepatocellular carcinoma
E) leukemia
F) carcinoma of the gastrointestinal tract

PED-4.565.
Which of the following characteristics of disseminated intravascular coagulation (DIC) are correct?
A) possible causes are sepsis, shock and tissue breakdown
B) hypoxia and acidosis increases the tendency for its development
C) hemophilia is a possible cause
D) primary hypofibrinogenemia is an important pathogenic factor
E) the first important step of the pathogenesis is the activation of fibrin which leads to the consumption of the clotting factors; this condition is associated with a fibrinolytic hyperactivity

PED-4.566.
Which of the following laboratory findings are not characteristic for disseminated intravascular coagulation (DIC)?
A) a-low fibrinogen level
B) the occurrence of fibrin degradation products (FDP) in the serum
C) a prolonged prothrombin time (PT)
D) a normal partial thromboplastin time (PTT)
E) a low platelet count
F) the examination of the peripheral blood smear reveals nothing abnormal

PED-4.567.
All of the following statements concerning the deficiency of growth hormone are correct, EXCEPT:
A) the length of the body at birth is under the 3rd percentile
B) the deficiency may be congenital or acquired
C) the diagnosis is confirmed with stimulation test
D) TSH, ACTH and gonadotropin release also have to be tested
E) besides hGH, ACTH is also administered during therapy

PED-4.568.
Case Study:
A 4-year-old girl is being evaluated for short stature. Her height is 89 cm. Specify the first three steps of the examination:
A) examination of the chromosomes
B) determination of the T3, T4 and TSH levels
C) obtaining data about her previous development
D) determination of her bone age
E) an analysis of her blood gases

PED-4.569.
Which of the following statements about cryptorchism are FALSE?
A) in each case, following recognition of the retention of the testis, an operation is indicated at the age of 2 years
B) if the testis descends in warm temperature and ascends to the inguinal canal in a cold environmental temperature, an operation is indicated
C) a determination of gonadotropic hormone and testosterone levels is indicated
D) the administration of choriogonadotropic hormone for 5 weeks results in cryptorchism

PED-4.570.
Which of the following statements concerning hypothyroidism are correct?
A) the TSH level is elevated
B) the TSH level is normal but markedly elevates following TRH administration
C) the somatic growth relative to the age is delayed because of weight loss
D) the performance at school is usually low
E) drug therapy is introduced first

PED-4.571.
Up-to-date therapeutic methods in the drug therapy, of thyroid disorders include all of the following, EXCEPT:
A) thiamazole (Metothyrin) is administered in hyperthyroidism for at least one year
B) propranolol and Lugol's solution are administered in thyrotoxic crisis
C) large, euthyroid goiter is treated with potassium iodide
D) thyroid hormones are administered in hypothyroidism
E) iodine is administered in autoimmune thyroiditis

PED-4.572.
Which of the following statements concerning the development of acute adrenal insufficiency are correct?
A) meningococcal sepsis is a possible cause
B) Addisonian crisis is a possible cause
C) congenital adrenal hyperplasia is a possible cause
D) Conn's syndrome is a possible cause
E) a central element of the developing syndrome is cardiac failure
F) the central venous pressure is high
G) hypokalemia is one of the causes of the development of muscular weakness

PED-4.573
An endocrinological check-up is indicated in which of the following cases of suspected congenital adrenal hyperplasia?
A) a newborn boy with hypospadiasis and cryptorchism
B) a premature newborn girl with enlarged clitoris but without labial fusion
C) a boy infant at the age of 3 weeks with vomiting and loss of weight unexplained by any other cause
D) a girl infant with normal external genitals, developing hyponatremia, hyperkalemia and somatic retardation during the 2nd month of life

PED-4.574.
Which of the following statements concerning Cushing's syndrome are correct?
A) the patient is taller relative to the age
B) the most reliable diagnostic test is the determination of the 17-ketosteroid excretion over 24 hours
C) the most reliable diagnostic test is the determination of the cortisol excretion over 24 hours relative to creatinine excretion
D) the determination of the ACTH level and performing a dexamethasone test permit a more precise diagnosis
PED-4.575.
The presence of which of the following symptoms is necessary for the diagnosis of diabetes mellitus?
A) glycosuria
B) hyperglycemia, (other possible causes excluded)
C) ketonemia
D) ketonuria
E) metabolic acidosis

PED-4.576.
Case Study:
A) 7-year-old, moderately desiccated child is brought to your office with symptoms of acidotic respiration, polyuria and glycosuria. The blood glucose is 17 mmol/l, pH: 7.22. The condition requires all of the following interventions, EXCEPT:
A) the immediate infusion of half-physiologic saline containing 5% glucose
B) the immediate infusion of physiologic saline
C) crystalline insulin, initially 0.1-0.2 U/kg iv., then smaller doses in infusion, later subcutaneously, as needed
D) fluid intake during the first day should be 3-4 l/m² body surface
E) bicarbonate is administered until the pH is completely normalized

PED-4.577.
Which of the following statements about hypoglycemia in a diabetic patient are correct?
A) symptoms develop slowly
B) thirst and flush on the face are characteristic
C) convulsions may develop
D) sugar-free drinks should be administered
E) a heavy physical excercise may precipitate hypoglycemia

PED-4.578.
Along with the precise therapy of diabetes mellitus, which of the following aims are also reasonable?
A) to prevent the development of polyuria, polydipsia and polyphagia
B) to maintain a normal lifestyle and development
C) to maintain a continuous normoglycemia
D) to maintain a low HbA₁c level
E) to prevent the development of microangiopathy lifelong

PED-4.579.
Which of the following diseases are characterized by polyuria?
A) untreated diabetes mellitus
B) renal glucosuria
C) nephrogenic diabetes insipidus
D) hyperkalemia
E) renal tubular acidosis, distal type

PED-4.580.
Which of the following diseases can be diagnosed with the help of intravenous urography?
A) morphological, situational and cavital abnormalities of the kidneys and the urinary tract
B) purulent, infectious renal diseases  
C) nephrosis and nephritis  
D) certain diseases associated with hematuria

PED-4.581.
In which of the following conditions is a renal biopsy indicated?
A) hypertension of unknown origin  
B) recurrent hematuria, 3 times or more within a year  
C) steroid-resistant nephrotic syndrome  
D) if, in the initial phase of the nephrotic syndrome, protein excretion exceeds 2 g/day  
E) an acute renal disease of unknown origin

PED-4.582.
Which of the following conditions are associated with edema formation?
A) acute enterocolitis  
B) nephrotic syndrome  
C) hyperthyroidism  
D) protein deficient nutrition  
E) anaphylaxis  
F) mumps  
G) vitamin K deficiency  
H) vitamin E deficiency in a newborn

PED-4.583.
Which of the following statements concerning the treatment of acute poststreptococcal glomerulonephritis are correct?
A) penicillin is administered for 10 days  
B) in the oliguric phase, fluid intake should be equal to the volume of urine on the previous day  
C) the administration of steroids is beneficial  
D) focal infections have to be treated during the acute phase  
E) salt intake is strongly restricted, even if diuresis is sufficient  
F) the serum electrolytes, creatinine and blood urea nitrogen are regularly controlled during the oliguric phase

PED-4.584.
Which of the following statements concerning renal vein thrombosis are FALSE?
A) in the majority of cases the disease develops during the neonatal period  
B) sepsis, dehydration, and hyperviscosity are all possible causes  
C) it responds well to vitamin K administration  
D) an early operation improves the prognosis considerably  
E) the affected kidney is enlarged; oliguria and hematuria are presenting signs  
F) heparin, streptokinase and dialysis may be used for the therapy

PED-4.585.
Which of the following statements about the urethral valve are correct?
A) the presence of a posterior urethral valve in the fetal period causes oligohydramnios  
B) in all cases, an operation is indicated in the presence of a posterior urethral valve  
C) the most suitable age for the operation is 6 months  
D) the presence of the valve is recognized by a weak urine stream
or dropping micturition despite the enlarged and stretched bladder

PED-4.586.
Which of the following symptoms or conditions suggest a possible renal or urinary tract malformation?
A) anorectal malformation
B) hydramnios
C) metabolic acidosis
D) supernumerary nipples
E) a palpable abdominal resistance
F) hypotension
G) unilateral inguinal retention of the testis

PED-4.587.
Which of the following statements concerning kidney and ureter duplex are correct?
A) it is a rare condition
B) in case of pyelonephritis associated with the presence of ureter duplex, a nephrectomy is indicated
C) it is frequently associated with a double ureteral orifice
D) scintigraphy, in case of duplex kidney, gives reliable information about the parenchymal function
E) ultrasound, in case of duplex kidney, gives reliable information about the parenchymal function

PED-4.588.
Which of the following statements concerning the diagnosis of nephrolithiasis are correct?
A) the symptoms in an older child are characteristic: a spastic lumbar pain radiating to the inguinal region and hematuria
B) the dominating symptom in an infant may be abdominal pain localized to the umbilical region
C) all stones of the pyelon and ureter can be demonstrated with a native abdominal x-ray
D) an ultrasound examination is indicated
E) if both red blood cells and white blood cells are seen in the urinary sediment, pyelonephritis is unlikely

PED-4.589.
Which of the following statements concerning chronic pyelonephritis are correct?
A) it is important to discover the possible renal malformations
B) the concentrating capacity of the kidney is decreased
C) it is never associated with hematuria
D) pyuria is continuously detected
E) most cases of pyelonephritis in adulthood start during childhood

PED-4.590.
Symptoms of chronic renal failure include all of the following, EXCEPT:
A) a markedly decreased serum creatinine concentration
B) metabolic alkalosis
C) isosthenuria
D) polydipsia
E) azotemia
Which of the following statements concerning abnormalities of closing of the neural tube are FALSE?
A) it is an isolated malformation, affecting the development of one organ only in the majority of cases
B) in all cases of myelomeningocele, the neural tissue in the affected area is damaged
C) spina bifida aperta requires a careful neurological examination within 24 hours after birth
D) anomalies of the closing of the neural tube are diagnosed in the late phase of pregnancy when it is too late for induced abortion, so there are no screening tests suitable for the early detection of the condition

Which of the following do NOT belong to the neonatal primitive reflexes?
A) tonic symmetrical and asymmetrical reflexes
B) Moro's reflex
C) Gordon's reflex
D) Landau reflex
E) grasping reflex
F) patellar reflex

Which of the following diseases are associated with alterations of the cerebrospinal fluid?
A) Guillain-Barré syndrome
B) diabetic coma
C) herpesvirus-meningoencephalitis
D) epilepsy
E) encephalopathy caused by diphtheria-pertussis-tetanus (DPT) immunization

All of the following drugs are suitable for the treatment of cerebral edema, EXCEPT:
A) 2% glycerine and 10% NaCl solution intravenously
B) phenobarbital
C) mannitol
D) furosemide (Furosemid)
E) 20% glucose solution

Which of the following statements about absence epilepsy in childhood are FALSE?
A) it is accompanied by a loss of consciousness for a few seconds
B) spike discharges with 3/s frequency in the EEG are typical
C) it responds well to drug therapy
D) it usually affects mental development
E) with time, 5-6% of these cases develop grand mal seizures
F) valproate is an effective therapeutic agent

The most frequent symptoms of a cerebral tumor in infancy include all of the following, EXCEPT:
A) headache
B) vomiting
C) papillary edema
D) spasms
E) disruption of the sutures

PED-4.597.
All of the following are symptoms of the chronic organic psychosyndrome in childhood, EXCEPT:
A) indiscriminate behavior
B) indifferent affection, insensitivity
C) a loss of concentration
D) hypermotility
E) good manual skills
F) variable performance

PED-4.598.
The most severe environmental damage that a child can experience is the separation from the mother and family. Which of the following statements concerning this are correct?
A) the severity of the damage depends on the mother's replacement's capacity
B) the consequences of the damage, if the separation happened during infancy, can still be eliminated totally by the age of 4-5 years
C) symptoms of institutilization are: stereotypic movements, genital manipulations, mental and emotional abnormalities
D) the development of the motor system during confinement is undisturbed
E) the emotional injury does not affect the somatic development

PED-4.599.
Which of the following conditions are possible causes of oligophrenia?
A) hypoxic damage
B) metabolic disorder
C) genetic factors
D) hypothyroidism
E) encephalitis
F) lupus erythematosus
G) mumps meningitis

PED-4.600.
Which of the following statements concerning congenital dislocation of the hip or hip joint dysplasia are correct?
A) the inheritance pattern is autosomal dominant
B) an x-ray screening test is advisable at the age of 3 weeks and it is compulsory at the age of 4 months
C) in case of real luxation, the articular head is repositioned with abduction of the extremity
D) the femoral head can be luxated in case of an unstable hip joint

PED-4.601.
In which of the following conditions are the nervous system symptoms caused by the penetration of the microorganism into the CNS?
A) diphtheria
B) tetanus
C) poliomyelitis
D) epidemic meningitis
E). botulism

PED-4.603.
An individual may have scarlet fever several times during his lifetime.
Which of the following statements explain this phenomenon?
A) the different erythotoxins produced by Streptococcus pyogenes have different antigen properties, therefore the antitoxic immunity induced by a given toxin would not protect against another
B) the toxin produced by Streptococcus pyogenes is not an antigen, therefore immunization against it is impossible
C) the early penicillin therapy of the infection diminishes erythotoxin production so it is insufficient to elicit an antitoxin production
D) scarlet fever is caused by a variety of viruses, between which no cross-immunity exists

PED-4.604.
Case Study:
In Hungary, which of the following interventions is required for the therapy of scarlet fever in a 3-year-old child?
A) 2x1 tablet Vegacillin for 10 days (1 tablet contains 200,000 IU V-penicillin)
B) 3x1 tablet Maripen for 6 days (1 tablet contains 500,000 IU G-penicillin)
C) if oral therapy is not feasible (vomiting, unreliable parents), Retardillin irr once daily for 6 days (500,000 IU G-penicillin+procaine)
D) 3x2 tbl. Maripen for 8 days
E) 100,000 IU/kg/day crystalline penicillin, divided into 4 doses a day, for 10 days

PED-4.605.
In which of the following cases of salmonella infection would you order antibiotics?
A) salmonella-gastroenteritis in a 5-year-old, otherwise healthy child
B) salmonella-gastroenteritis in a 5-day-old, otherwise healthy newborn
C) Salmonella typhi infection, causing symptoms, at any age
D) salmonella sepsis of a granulocytopenic child
E) a purulent meningitis caused by salmonella

PED-4.606.
Which of the following statements concerning measles are correct?
A) the incubation period is 2 weeks
B) the incubation period is shorter in case of partial immunity
C) eruptions develop 4 days after the onset of symptoms
D) the disease is infectious until the end of the furfuraceous desquamation
E) measles virus infection has a transient immunosuppressive effect

PED-4.607.
Which of the following statements about the eruptions observed in measles are correct?
A) the eruptions first develop on the extremities, then on the trunk
B) the face is never affected
C) the characteristic eruptions first occur behind the ear and on the face, then spread to the trunk and to the extremities
D) the eruptions develop at the same time, on the entire body
E) in the healing period, mild pigmentation and furfuraceous
desquamation are observed in the area of the eruption

PED-4.608.

Case Study:
You are examining a child with subfebrility and eruptions. Numerous pink papules of pinhead or lens size are observed on the face and on the trunk. The retroauricular and occipital lymph nodes are enlarged. The mother is in the 10th week of her pregnancy. What would you do?
A) your diagnosis is rubella and you recommend an induced abortion
B) your diagnosis is rubella and you order a determination of rubella antibody of the mother
C) your diagnosis is rubella and you order determination of rubella antibody of the child and the mother
D) if, according to the serology results, the child has IgM class specific antibody but the mother does not have IgM class specific antibody, you order a repeated determination 10-14 days later
E) if serology ensures a fresh rubella infection of the mother, you recommend the interruption of the pregnancy
F) if the serology ensures a fresh rubella infection in the mother, you inform her about the likelihood of the developmental abnormality of the fetus; the decision concerning the interruption of the pregnancy is then left to the mother

PED-4.609.

Which of the following statements about phlegmon associated with varicella are FALSE?
A) the phlegmon is caused by the varicella-zoster virus
B) the phlegmon is a result of a bacterial superinfection
C) the most frequent cause is a Staphylococcus aureus or Streptococcus pyogenes infection
D) phlegmon associated with varicella heals by itself - simultaneously with the varicella
E) a vigorous antibiotic therapy, effective against both streptococcus and staphylococcus is indicated in each case
F) surgical exposure is indicated in each case

PED-4.611.

Which of the following microorganisms are rare causes of meningitis of the newborn?
A) E. coli
B) Klebsiella
C) Salmonella
D) Group A streptococcus
E) Group B streptococcus
F) Neisseria meningitidis

PED-4.612.

Which of the following microorganisms are the most common causes of purulent meningitis during the neonatal period in Hungary?
A) Staphylococcus aureus
B) E. coli
C) Streptococcus pyogenes
D) Group B streptococcus
E) Serratia marcescens
F) Klebsiella

PED-4.613. Which of the following statements concerning purulent meningitis in an infant younger than 3 months are correct?
A) the most frequent cause is E. coli
B) the disease is always associated with high fever
C) stiff fontanelles associated with the refusal of food and repeated vomiting might call the physician's attention to the disease
D) papilledema is pathognomonic for the condition
E) microscopic examination of the cerebrospinal fluid sediment clarifies the etiology in each case

PED-4.614. Which of the following microorganisms are the most frequent causes of purulent meningitis during childhood in Hungary?
A) Neisseria meningitidis
B) Streptococcus pneumoniae
C) Haemophilus influenzae
D) Group B streptococcus
E) Streptococcus pyogenes
F) E. coli
G) Staphylococcus aureus

PED-4.615. Before having the bacteriology results, which of the following drugs or drug combinations are suitable for the presumptive therapy of a purulent meningitis in a young child?
A) penicillin
B) ampicillin and gentamicin
C) ampicillin and chloramphenicol
D) tetracycline and sulphonamide
E) ceftriaxone (Rocephin)

PED-4.616. Which of the following statements about tetanus are correct?
A) the toxin exerts its effect in the synapses
B) the incubation period is 1-2 days
C) mental confusion develops usually
D) a lumbar puncture relieves the spasm
E) since the causative microorganism is anaerobic, metronidazole or clindamycin are the drugs of choice
F) human tetanus immunoglobulin is administered for the neutralization of the circulating toxin

PED-4.617. Which of the following conditions may be associated with Lyme's disease?
A) megalerythema infectiosum
B) chronic rheumatoid arthritis
C) carditis
D) prolonged diarrhea
E) chronic erythema migrans
F) tick-borne meningoencephalitis
G) isolated facial nerve paralysis (Bell's type)
H) persistent fever of unknown origin
PED-4.618.
In which of the following conditions is neonatal BCG vaccination CONTRAINDICATED?
A) diabetes mellitus of the mother
B) perinatal cerebral injury
C) pyoderma
D) congenital immune deficiency of the sibling
E) a birth weight of under 2,500 g

PED-4.619.
Which of the following statements concerning vaccinations are FALSE?
A) hemophilic patients receive all of the compulsory vaccinations; parenteral vaccinations have to be supplemented with the administration of clotting factors
B) a child suffering from von Willebrand's disease should not be vaccinated against measles
C) a thrombocytopenic child should be vaccinated against measles only after receiving prophylactic platelet concentrate treatment
D) vaccination with live, attenuated virus to children receiving cytostatic therapy is usually contraindicated
E) leukemic patient in the remission phase can be vaccinated with tetanus toxoid

PED-4.620.
Which of the following intoxications are associated with myosis?
A) antihistamines
B) morphine derivatives
C) organic phosphate esters
D) diphenoxylate (Reasec)
E) cocaine
F) neostigmine (Prostigmin)

PED-4.621.
Which of the following intoxications are associated with jaundice?
A) lead
B) Amanita phalloides
C) carbon tetrachloride
D) organic phosphate esters
E) nitrobenzole

PED-4.622.
Which of the following intoxications may cause convulsions?
A) aminophenazone (Amidazophen)
B) antihistamines
C) theophylline
D) organic phosphate esters
E) Amanita phalloides
F) codeine

PED-4.623.
In which of the following intoxications is gastric lavage CONTRAINDICATED?
A) narcotics
B) hydrocarbons (gasoline, petroleum)
C) Amanita phalloides
D) acid; alkali
E) salicylates

PED-4.624.
What has to be done to a patient with suspected barbiturate intoxication in a hospital department?
A) gastric lavage
B) intestinal irrigation
C) the subcutaneous administration of epinephrine
D) forced diuresis
E) the intravenous administration of nalorphine
F) artificial respiration
G) dimethyl-glutarimide (Redimyl)

PED-4.625.
Which of the following statements concerning toxicomania are correct?
A) the sense of the term narcomania is broader than that of toxicomania
B) toxicomania is an intoxication with a narcotic or some substance which elicits a stimulative or hallucinogenic effect
C) irresistible addiction is a characteristic feature
D) the patient needs the same doses continuously
E) the patient develops total dependence to the drug

PED-4.626.
Case Study:
You are examining a 4-year-old, child having 39°C fever. The general state of the child is sufficient. The physical examination is unrevealing except for a mildly hyperemic pharyngeal mucosa.
Which of the following therapeutic possibilities would you choose?
A) 1/2 tabl. aspirin (1 tablet contains 0.45 g acetylsalicylic acid) every four hours or 0.15 g aminophenazone
B) if the relief of fever is insufficient the above dose is doubled
C) if the relief of fever after the first dose is insufficient, a Priessnitz compress is needed one time only
D) if the relief of fever after the first dose given in point (A) is insufficient, a Priessnitz compress is needed, once every 10 minutes, until the temperature decreases to under 38°C
E) antibiotic therapy is started

PED-4.627.
Which of the following conditions, associated with airway obstruction, are life-threatening?
A) laryngitis subglottica (pseudocroup)
B) acute epiglottitis
C) acute, dry laryngo-tracheobronchitis
D) acute rhinopharyngitis
E) none of the above

PED-4.628.
The rapid relief of hypertension is possible with all of the following drugs, EXCEPT:
A) diazoxide
B) nitroprusside
C) hydralazine
D) vinpocetine (Cavinton)
PED-4.629.
Symptoms of hypovolemic shock include all of the following, EXCEPT:
A) pallor and cold extremities
B) agitation, followed by drowsiness
C) tachycardia
D) a low central venous pressure
E) cardiac enlargement
F) acidosis
G) a decreased arterio-venous oxygen difference

PED-4.630.
Which of the following steps of the first aid of a burn injury are INCORRECT?
A) immediate cooling with cold water, even with the clothes on
B) clothes covering the burned area have to be removed after cooking
C) cooking oil is spread over the wounds and it is covered with a sterile bandage
D) the wound has to be powdered with vulnerary powder and covered with a sterile bandage
E) the wound is covered loosely with sterile gaze
F) pain relievers and sedatives are administered
G) the patient is immediately referred to a burn centre

PED-4.631.
Which of the following statements concerning the estimation of the severity of a burn injury are correct?
A) only the epithelial layer is damaged in first degree burns
B) the total dermis and the appendages are damaged in second degree burns
C) in case of third degree burns, the skin of the affected area is damaged in its total thickness, regeneration is only possible from the intact, surrounding skin; in case of extensive burn the only possibility for healing without deformities is a skin transplantation

PED-4.632.
Which of the following statements concerning auditory disturbances are correct?
A) in the case of conductional auditory disturbances, abnormalities are observed in the external, middle and internal ear
B) in case of sensory neural auditory disturbances, abnormalities occur in the acoustic nerve, auditory path and in the sensory cortical area
C) objective audiometry can also be performed in infancy
D) bradyacusia in infancy does not need to be corrected with a hearing aid
E) auditory tests are advisable from the neonatal period until the age of 17 years

PED-4.633.
Which of the following statements characterizing atopic dermatitis are correct?
A) it affects approximately 3% of the child population
B) it may become chronic following the acute period
C) the alterations first develop on the extensor surface of the knee and the elbow
D) the skin thickens, becomes dry and itches during the chronic phase
E) the skin lesions are always asymmetrical

PED-4.634. Which of the following interventions are applicable for the treatment of atopic dermatitis?
A) the application of a moisturizing ointment
B) the oral administration of steroids
C) antibiotics applied locally to prevent superinfection
D) restriction of the possible alimentary allergens in the diet
E) antihistamines in case of pruritus

PED-4.635. Which of the following statements about erysipelas are correct?
A) the causative microorganism is usually Staphylococcus aureus
B) it is associated with subfebrility
C) at the site of a skin erosion, a sharply delineated, livid, edematous lesion is observed, which subsequently enlarges
D) the therapeutic drugs of first choice are penicillin or erythromycin

PED-4.636. Which of the following statements about contagious impetigo are correct?
A) the causative microorganisms are Staphylococcus aureus and Streptococcus pyogenes
B) it is always associated with fever
C) yellowish-white vesicles, on an erythematous base, develop on the skin
D) oozing, yellowish crusts occupy the area of the disrupted vesicles
E) acute diffuse glomerulonephritis is a possible complication
F) besides local therapy, systemic administration of antibiotics is needed in each case

PED-4.637. Which of the following statements about mucosa-skin-lymph node disease (Kawasaki's syndrome) are correct?
A) it is caused by a streptococcal infection
B) it is caused by a staphylococcal infection
C) the symptoms of the disease include prolonged fever, conjunctivitis, cheilitis, raspberry tongue and enlargement of the cervical lymph nodes
D) the palms of the hands and the feet are erythematous, and an exfoliation is observed in the last phase of the disease
E) aneurysm of the coronaries, thrombarteritis and myocardial infarction are possible complications
F) corticosteroid therapy is effective
G) low dose aspirin therapy, due to its anticoagulant effect, is an important part of the treatment

PED-4.638. Possible causes of stomatitis include all of the following, EXCEPT:
A) stomatitis apthosa is caused by a primary herpesvirus infection
B) stomatitis ulcerosa in the weakened organism is caused by a staphylococcal infection
C) stomatitis gangraenosa in the immunodeficient patient may be caused by several microorganisms
D) recurrent gingivo-stomatitis is a recurrent exacerbation of a herpesvirus infection

PED-4.639.
Case Study:
You are examining a 9-year-old boy complaining of recurrent abdominal pain, primarily in the umbilical region, which has lasted for 3 months. The anamnestic data, physical examination and laboratory tests are not indicative for any organic abnormality. Which of the following tests and interventions would you order?
A) bacteriology of the urine
B) urography
C) gastrointestinal x-ray
D) check for blood in the feces
E) check for parasites in the feces
F) a psychologic examination

PED-4.640.
The eradication of which of the following diseases has been made possible primarily by the introduction of a vaccination?
A) tuberculosis
B) abdominal typhus
C) smallpox
D) hepatitis A
E) influenza
F) measles

PED-4.641.
Which of the following statements about the sudden infant death syndrome (SIDS) are FALSE?
A) severe, fulminant infections are possible causes
B) the incidence is highest at the age of 2-4 months
C) it occurs more frequently in families with poor social conditions
D) intrauterine retardation is a risk factor
E) no histological abnormality has ever been found in the brains of the dead infants
F) following the tragedy, the parents are usually told that they ought to have attended the infant more carefully

PED-4.642.
Which of the following drugs are not nephrotoxic?
A) ampicillin
B) methicillin
C) tobramycin
D) neomycin
E) polymyxin B
F) metronidazole

PED-4.643.
Which of the following drugs are not toxic to the liver?
A) anabolic steroids
B) isoniazid  
C) neomycin  
D) cyclophosphamide  
E) ferrous sulphate  
F) phenobarbital

ASSOCIATION QUESTIONS

Associate the following terms/statements marked by the letters A, B, C... with the corresponding statements/terms marked by and in the order given by the figures 1, 2, 3...

...for example: 1-C, 2-B, 3-A, 4-D. Put the answer as C, B, A, D!

(Note: Different statements can be associated with the same terms!!)

PED-6.644.

Associate the following term(s) with their corresponding statement(s)!

A) Cyanides  
B) Narcotics  
C) Both of the above  
D) None of the above

1) methylene blue is an antagonist or chelator of these poisons  
2) atropine sulphate is an antagonist or chelator of these poisons  
3) naloxone (Narcan) is an antagonist or chelator of these poisons  
4) amyl nitrite, sodium nitrite and sodium thiosulphate are antagonists or chelators of these poisons  
5) the antidote to these poisons may have to be given repeatedly to elicit the effect

PED-6.645.

Associate the following term(s) with their corresponding statement(s)!

A) Immunization against measles  
B) Immunization against German measles  
C) Both of the above  
D) None of the above

1) as a routine immunization, it is not advisable to administer before the age of 15 months  
2) administration is contraindicated during pregnancy  
3) it might cause arthritis or peripheral neuritis within 70 days following the immunization  
4) fever and eruptions may develop 6-10 days after the immunization  
5) it should not be given in combination with other virus vaccines due to virus interference problems

PED-6.646.

Associate the following term(s) with their corresponding statement(s)!

A) Trichophyton tonsurans  
B) Microsporum cant  
C) Both of the above  
D) None of the above

1) it causes a mycosis of the hairy skin of the head  
2) it causes a fungal vaginitis following puberty  
3) it is usually fluorescent under Wood's lamp  
4) it causes vaginal itching and a watery discharge  
5) short, fragmented hair is strongly suggestive of the infection
PED-6.648.
Associate the following term(s) with their corresponding statement(s)!
A) Vitamin A deficiency
B) Vitamin B₁ deficiency
C) Vitamin B₆ deficiency
D) Vitamin C deficiency
E) Vitamin D deficiency
F) Vitamin K deficiency

1) spasms may occur
2) gingival hemorrhage
3) sluggish tendon reflexes
4) dry and hyperkeratotic skin

PED-6.649.
Associate the following statement(s) with their corresponding term(s)!
... in terms of dietary treatment for the disorder
A) a diet containing medium chain fatty acids
B) oral supplementation of zinc sulphate
C) a gluten-free diet
D) a flour and starch-free diet
E) a galactose (lactose-) free diet
F) a lactose (sucrose-) free diet

1) Celiac disease
2) Congenital sucrose-isomaltase defect
3) Intestinal lymphangiectasis
4) Galactosemia
5) Postenteritic malabsorption
6) Acrodermatitis enteropathica

PED-6.650.
Associate the following term(s) with their corresponding statement(s)!
A) Inspiratory dyspnea
B) Expiratory dyspnea
C) Both of the above
D) None of the above

1) epiglottitis
2) bronchial asthma
3) laryngitis subglottica
4) pertussis, during a crisis

PED-6.651.
Associate the following term(s) with their corresponding statement(s)!
A) IgA
B) IgD
C) IgE
D) IgG
E) IgM

1) the primary immune response
2) the passive immunity of neonates
3) the secretory defense of the mucosal surfaces
4) it releases biologically active substances from the mastocytes

PED-6.653.
Associate the following statement(s) with their corresponding term(s)!
A) the glucose concentration of the CSF is 0.6 mmol/1(10 mg/dl)
B) the glucose concentration of the CSF is 4.0 mmol/1(70 mg/dl)

1) Purulent meningitis
2) Eclampsia
3) Basilar meningitis
4) Mumps meningitis

PED-6.654.
Associate the following statement(s) with their corresponding term(s)!
A) vesicular-pustular eruptions
B) dense, tiny macules
C) lens-sized, confluent maculous eruptions
D) a butterfly shaped facial flush and garland-like eruptions on the extremities
E) usually isolated, lens-sized, maculous eruptions

1) Scarlet fever
2) Chickenpox
3) Measles
4) Herpes zoster
5) German measles
6) Erythema infectiosum

PED-6.655.
Associate the following statement(s) with their corresponding term(s)!
A) EDTA
B) vitamin C
C) calcium gluconate
D) atropine
E) desferrioxamine (Desferal)
1) Iron
2) Copper
3) Nitrate
4) Digitalis
5) Oxalate
6) Mercury

PED-6.656.
Associate the following term(s) with their corresponding statement(s)!
A) Turner's syndrome
B) Klinefelter's syndrome
C) Both of the above
D) None of the above

1) it is characterized by more or less than one X chromosome
2) it causes sexual infantilism in adulthood
3) it is manifested in both sexes
4) it is characterized by severe mental retardation
5) karyotype determination is unnecessary for the diagnosis

PED-6.657.
Associate the following term(s) with their corresponding statement(s)!
A) Hemophilia
B) Sickle cell anemia
C) Both of the above
D) None of the above

1) the inheritance is autosomal dominant
2) all of the sons of the diseased father are ill
3) if one of the parents is ill, the likelihood that the child also becomes ill is 50%
4) all of the daughters of the diseased father are carriers
5) the manifestation of the disease in a family may skip generations

PED-6.658.

Associate the following term(s) with their corresponding statement(s)!
A) 4-month-old infant
B) 9-month-old infant
C) 18-month-old child
D) 3-year-old child
E) 12-month-old child

1) all the milk teeth are present at this age
2) a faltering speech is not considered abnormal until this age
3) the child knows his/her age and sex at this age
4) the baby stands up at this age
5) the Babinski reflex can still be elicited at this age

PED-6.659.

Associate the following term(s) with their corresponding statement(s)!
A) Vitamin A deficiency
B) Vitamin B deficiency
C) Vitamin C deficiency
D) Vitamin D deficiency
E) Vitamin E deficiency

1) the deficiency syndrome characterized by peripheral neuropathy
2) the deficiency syndrome characterized by hemorrhagic diathesis
3) the deficiency syndrome characterized by abnormalities of bone formation
4) the deficiency syndrome characterized by Bitot's spots
5) the deficiency syndrome is more frequent in newborns with a low birth weight

PED-6.660.

Associate the following term(s) with their corresponding statement(s)!
A) Chronic progressive granulomatosis
B) Ataxia telangiectasia
C) Wiskott-Aldrich syndrome
D) DiGeorge's syndrome
E) Nezelof's syndrome

1) a sex-linked recessive inheritance pattern
2) an abnormality of granulocyte function
3) it is associated with hypocalcemia in the neonate
4) its characteristics are: a deficient cellular immunity, normal serum immunoglobulin levels and a deficient production of the specific antibody
5) this is an autosomal recessive inherited disease with an IgA deficiency

PED-6.661. Associate the following term(s) with their corresponding statement(s)!
A) T-cell deficiency
B) B-cell deficiency
C) Both of the above
D) None of the above

1) congenital hypogammaglobulinemia
2) DiGeorge's syndrome
3) Sturge-Weber syndrome
4) ataxia telangiectasia
5) Swiss-type agammaglobulinemia

PED-6.662. Associate the following term(s) with their corresponding statement(s)!
A) Tuberous sclerosis
B) Neurofibromatosis
C) Sturge-Weber syndrome
D) Waardenburg's syndrome
E) None of the above

1) hypopigmentation
2) adenoma sebaceum
3) white, leaf-shaped macula
4) Shagreen's spot
5) café au lait spots
6) naevus flammeus

PED-6.663. Associate the following term(s) with their corresponding statement(s)!
A) Hepatitis A virus
B) Hepatitis B virus
C) Hepatitis C virus
D) Hepatitis D virus
E) Hepatitis E virus

1) it is usually acquired parenterally
2) it is actually a parasitic RNA virus
3) it has caused a high mortality rate in pregnant women
4) antibody of this virus appears within 1–4 weeks of clinical symptoms
5) transmission is by the fecal-oral route
6) antibodies to this newly isolated virus may not appear for up to six months
7) this DNA virus is referred to as the Dane particle

PED-6.664. Associate the following term(s) with their corresponding statement(s)!
... in terms of a latent iron deficiency
A) Normal value
B) Decreased value
C) Elevated value

1) hemoglobin
2) serum iron
3) total iron binding capacity (TIBC)
4) iron saturation of transferrin
5) hematocrit
6) serum ferritin
7) iron absorption (no malabsorption is present)
8) number of sideroblasts in the bone marrow

Answer Key
(PED-4)

|------|-------|-------|-------|-------|--------|--------|------|
OBSTETRICS & GYNECOLOGY (OBG-5)
SINGLE CHOICE QUESTIONS
Select the single best response to each of the following questions!!!

OBG-5.1
The most prevalent cause of maternal mortality is:
A) toxemia
B) infection
C) cardiac disease
D) hemorrhage
E) diabetes

OBG-5.2.
In the case of term delivery, the gestational age of the fetus can be described as:
A) 250 days
B) 38 weeks
C) 380 days
D) 42 weeks
E) 40 weeks

OBG-5.3.
The involution of which of the following fetal blood vessels is normal after birth?
A) the ductus arteriosus
B) the ductus venosus
C) the umbilical artery
D) all of the above
E) none of the above

OBG-5.4.
In a normal pregnancy, carbohydrate metabolism changes as follows:
A) glucose tolerance is reduced
B) there is a tendency for the development of glycosuria
C) the glomerular filtration rate of glucose is increased
D) all of the above
E) none of the above

OBG-5.5.
An abnormal hemorrhage complicating a delivery occurs most frequently:
A) in the third stage of labor
B) during the development of a hematoma which causes the placenta to separate
C) in the first stage of labor
D) at the time of complete cervical dilation
E) in the first hour following the delivery of the placenta
OBG-5.6. Perinatal care of the neonate should include:
A) the removal of the vernix
B) intubation
C) oxygen administration
D) removal of the mucus from the mouth and pharynx of the neonate.
E) all of the above

OBG-5.7. The first step in the care of a patient with eclampsia is:
A) phlebotomy
B) termination of the pregnancy
C) the transfusion of blood
D) correction of the hemoconcentration (volume depletion)
E) the intravenous administration of diazepam

OBG-5.8. Prior to the surgical extraction of the placenta:
A) any shock must be completely corrected
B) blood for any required transfusion should be made available
C) any performed blood transfusions must have been completed before the extraction
D) all of the above
E) none of the above

OBG-5.9. Currently, the most effective contraceptive method is the:
A) oral (hormonal) contraceptive
B) condom
C) cervical diaphragm
D) calendar rhythm method (periodic abstinence)
E) intrauterine device

OBG-5.10. Which of the following results from the “Tests of Thyroid Function” are elevated in a normal pregnancy?
A) the basal metabolic rate
B) the butanol-extractable iodine
C) the PBI (protein-bound iodine)
D) all of the above
E) none of the above

OBG-5.12. In Rh-isoimmunization the most sensitive prognostic test is:
A) the previous history
B) fetal movements
C) maternal toxemia
D) the antibody titer
E) spectrophotometry of the amniotic fluid

OBG-5.13. The correct gynecologic history should contain the following data:
A) menstrual history
B) previous deliveries
C) family history
D) previous diseases
E) all of the above

OBG-5.16.  
**Case Study:**
A 39-year-old nulliparous woman presents with a one-week delay of her last expected menstrual period. The patient has never taken any contraceptives and was married 6 months ago. She has always had a regular menstrual cycle. On examination, the cervix is soft and of a bluish-purple color and the adnexal structures are not palpable. Which of the following methods is suitable for the earliest possible recognition of pregnancy?
A) β-hCG radioimmunoassay
B) ultrasonography
C) a measurement of the basal body temperature
D) "palm leaf' arborization (ferning) of the cervical mucus
E) progesterone withdrawal

OBG-5.17.  
**Case Study:**
A 19-year-old nulliparous woman in her 35th week of pregnancy presents with nausea, blurred vision and a weight gain of 4.5 kg per week. Her blood pressure is 160/110 mmHg. Which of the following tests is the most suitable for the assessment of fetal status?
A) amniocentesis for the measurement of the lecithin/sphingomyelin (L/S) ratio
B) amniocentesis for the measurement of the creatinine level of the amniotic fluid
C) sonographic cephalometry
D) a non-stress test (NST)
E) an oxytocin challenge test (OCT)

OBG-5.18.  
**Case Study:**
You are attending to a 36 year-old gravida in the 8th week of gestation (the patient had 6 pregnancies and 5 deliveries previously). The patient is concerned about delivering a baby with congenital abnormalities. In which week of the pregnancy should amniocentesis be performed?
A) immediately (in the 8th week)
B) in the 10th week
C) in the 12th week
D) in the 15th week
E) in the 24th week

OBG-5.19.  
**Case Study:**
A 41-year-old multiparous (7 pregnancies, 7 deliveries) woman is undergoing a vaginal hysterectomy and reconstructive surgery for uterovaginal prolapse. She has been taking oral contraceptives for the last 10 years. Which of the following potential complications is the most likely associated with contraceptive use?
A) pneumonia
B) pulmonary embolism
C) retinal detachment
D) periorbital cellulitis
E) ileus
OBG-5.20.
Intrauterine exposure to which of the following substances is associated with the development of clear cell vaginal carcinoma?
A) estrogen
B) testosterone
C) diethylstilbestrol
D) phenytoin
E) medroxyprogesterone

OBG-5.21.
**Case Study:**
A 29-year-old multiparous woman (4 pregnancies, 4 deliveries) undergoes laparoscopic fulguration of the oviducts. Thirty-six hours after the operation, the patient begins to complain about abdominal pain and nausea. Her body temperature is 38.3 °C and slight abdominal distention is palpated. The most likely diagnosis is:
A) pelvic inflammation
B) hemorrhage from the uterine tube
C) thermal injury to the gut
D) a perforating injury to the gut resulting from a stab wound
E) tubal abortion

OBG-5.22.
**Case Study:**
You are attending to an 18-year-old unmarried girl admitted to the intensive care unit with shaking chills, 39.4 °C fever, 80/40 mmHg blood pressure, moderate vaginal bleeding, abdominal tenderness and a history of having lost her consciousness twice. The pelvic examination denotes a slightly enlarged and softened uterus. Which of the following procedures is not indicated?
A) a complete blood count
B) a blood culture and peripheral blood smear
C) a chest x-ray and plain abdominal x-ray in the standing position
D) dilation and curettage
E) laparoscopy

OBG-5.23.
**Case Study:**
In a 26-year-old pregnant woman, uterine growth stops abruptly in the 4th month of gestation. The uterus begins to involute but 6 weeks later a spontaneous abortion has still not occurred. Which of the following parameters should be primarily monitored?
A) the hematocrit and hemoglobin levels
B) the fibrinogen level
C) the blood urea nitrogen (BUN) level
D) the serum creatinine level
E) the bilirubin level

OBG-5.24.
Which of the following conditions is characterized by the classic syndrome of amenorrhea with or without abnormal vaginal bleeding, pelvic-abdominal pain and an adnexal mass?
A) a tubo-ovarian abscess
B) intermenstrual pain (Mittelschmerz)
C) an ectopic pregnancy
D) a twisted ovarian cyst
E) diverticulitis

OBG-5.25.
Which of the following is the most effective method for the diagnosis of trophoblastic disease?
A) dilation and curettage
B) measurement of the hCG (human chorionic gonadotropin) levels in the cerebrospinal fluid
C) the injection of contrast material
D) ultrasonography
E) a radiological examination of the pelvis in order to detect the fetal skeleton

OBG-5.26.
In which of the following conditions does an elevated a-fetoprotein level in the amniotic fluid have a diagnostic value?
A) hydrocephalus
B) Down's syndrome
C) neural tube defects
D) Rh-isoimmunization
E) respiratory distress syndrome

OBG-5.27.
Which of the following pathogens is associated with toxic shock syndrome?
A) Leptospira
B) Streptococcus pyogenes
C) rubella virus
D) Rickettsia prowazeki
E) Staphylococcus aureus

OBG-5.28.
Which of the following statements concerning toxic shock syndrome is FALSE?
A) fever and shaking chills are present in the medical history
B) a diffuse myalgia is common
C) a skin rash is uncommon
D) leukocytosis and a significant increase in the number of immature white blood cell forms are characteristic signs
E) bilateral conjunctivitis develops

OBG-5.29.
Which of the following non-physical factors has a major role in the development of impotence?
A) masturbation
B) oral sex
C) fear of failure
D) gonorrhea
E) prostatitis

OBG-5.30.
Which of the following statements regarding infertility is FALSE?
A) sterility and infertility are synonymous
B) is the sole consequence of abnormal cervical mucus
C) it can result from congenital uterine malformation
D) in 20-40% of cases, it is caused by tubal obstruction
E) 15% of infertile women are afflicted by ovulatory defects

OBG-5.31.
All of the following conditions may be associated with abnormally low maternal serum a-fetoprotein levels, EXCEPT:
A) the duration of the pregnancy determined by ultrasonography is shorter than that estimated by calculation
B) the duration of the pregnancy determined by ultrasonography is longer than that estimated by calculation
C) Down's syndrome
D) trisomy 18 (Edward's syndrome)
E) a normal karyotype

OBG-5.32.
The most important indication for the surgical correction of bicornate uterus is:
A) habitual abortion
B) dysmenorrhea
C) menorrhagia and menorrhagia
D) dyspareunia
E) premature birth

OBG-5.33.
The most common cause of ambiguous genital development is:
A) chromosomal non-disjunction
B) abnormal gonadal development
C) adrenal hyperplasia
D) mosaicism
E) testicular feminization

OBG-5.34.
The most common defect in the adrenogenital syndrome (congenital adrenal hyperplasia) is:
A) none, as it is an idiopathic disorder
B) an 11-hydroxylase deficiency
C) a 17-hydroxylase deficiency
D) a 21-hydroxylase deficiency
E) 3-β-ol-dehydrogenase deficiency

OBG-5.35
Which of the following cells produces follicle-stimulating hormone (FSH)?
A) the chromophobic cells of the anterior pituitary
B) the basophilic cells of the anterior pituitary
C) the acidophilic cells of the anterior pituitary
D) the internal thecal cells
E) none of the above

OBG-5.36.
What percentage of precocious puberty occurring in girls is of a constitutional (non-organic) origin?
A) 10%
B) 25%
C) 30%
D) 50%
E) 90%
OOG-5.37
Oocytes in the ovaries of a neonate are in the following developmental stage:
A) in the prophase of the first meiotic division
B) at the appearance of oogonia (primordial germ cells)
C) in the stage of maturation
D) in the anaphase of the second meiotic division
E) none of the above

OOG-5.38.
The development of the primitive fetal circulation is assumed to be complete by which of the following period?
A) 7 days after the maturation of the follicle
B) 10 days after the maturation of the follicle
C) 21 days after the maturation of the follicle
D) 60 days after the maturation of the follicle
E) 90 days after the maturation of the follicle

OOG-5.39.
Which of the following methods is appropriate for the detection of pregnancy at the earliest time possible?
A) a pelvic examination
B) a progesterone level determination
C) the erythrocyte sedimentation rate
D) the erythrocyte agglutination-inhibition test
E) a measurement of the hCG β-subunit serum levels

OOG-5.40.
Following exposure to excessive heat, the previously normal sperm count will begin to reduce within:
A) a day
B) 7 days
C) 10 days
D) 75 days
E) 300 days

OOG-5.41
The average volume of menstrual blood loss is:
A) 5 to 10 ml
B) 10 to 15 ml
C) 25 to 50 ml
D) 150 to 200 ml
E) 250 to 300 ml

OOG-5.42.
Which of the following sequences specify the order of contraceptive methods in decreasing efficacy?
A) oral contraceptives, diaphragm, intrauterine devices, spermicidal agents, calendar rhythm method
B) intrauterine devices, oral contraceptives, diaphragm, spermicidal agents, calendar rhythm method
C) calendar rhythm method, oral contraceptives, intrauterine devices, diaphragm, spermicidal agents
D) oral contraceptives, intrauterine devices, spermicidal agents, diaphragm, calendar rhythm method
E) oral contraceptives, intrauterine devices, diaphragm,
OBG-5.43.
Which of the following changes occur in maternal calcium metabolism during pregnancy?
A) maternal PTH levels decrease
B) the ionized calcium concentration increases
C) the total serum calcium level decreases
D) intestinal calcium absorption is reduced
E) none of the above

OBG-5.44.
The iron requirements of females are increased during pregnancy in order to meet the demand generated by the fetus, the placenta and the elevated hemoglobin levels of the maternal organism. The total iron requirement before delivery is approximately:
A) 250 mg
B) 80 mg
C) 1350 mg
D) 1900 mg
E) none of the above

OBG-5.45.
The increase in the glomerular filtration rate (GFR) during pregnancy can be as high as:
A) 10%
B) 15%
C) 50%
D) 80%
E) 100%

OBG-5.46.
Which of the following statements is the most characteristic of maternal urinary estrogen?
A) urinary estrogen levels decrease during pregnancy
B) at the time of delivery, 80-85% of urinary estrogen is comprised of estriol
C) at the time of delivery 15% of urinary estrogen is comprised of estrone
D) in patients with placental sulphatase deficiency the urinary excretion of estrogen is normal at the time of delivery
E) the urinary excretion of estrogen is not related to fetal adrenal or liver function

OBG-5.47
All the following are contraindications to nursing, EXCEPT:
A) a maternal hepatitis B infection
B) a surgical reduction of the breast with autotransplantation of the nipple
C) breast engorgement
D) lithium carbonate therapy of the mother
E) tetracycline therapy of the mother

OBG-5.48
All of the following statements are valid regarding puerperal mastitis, EXCEPT:
A) it is treated by antibiotic therapy  
B) the source of the infection is usually the nose and pharynx of the infant  
C) abscesses may develop and require surgical drainage  
D) Escherichia coli is the most common pathogen  
E) its symptoms include shaking chills, fever and tachycardia

OBG-5.49. The amniotic fluid volume reaches its maximum value in which period of pregnancy?  
A) between the 16th and 20th weeks  
B) between the 20th and 24th weeks  
C) between the 36th and 38th weeks  
D) between the 38th and 40th weeks  
E) between the 40th and 42th weeks

OBG-5.50. Which of the following hematologic changes can be observed in association with the progression of pregnancy?  
A) the expansion of plasma volume proportionally exceeds that of the red blood-cell volume  
B) the expansion of red blood-cell volume proportionally exceeds that of the plasma volume  
C) the plasma volume expands while the red blood-cell volume remains constant  
D) the red blood-cell volume decreases

OBG-5.51. Maternal mortality reflects the number of maternal deaths during the reproductive process per:  
A) 1000 deliveries  
B) 10,000 deliveries  
C) 100,000 deliveries  
D) 10,000 live births  
E) 100,000 live births

OBG-5.52. Case Study: A 23-year-old woman (2 pregnancies, 2 deliveries) presents with bloody vaginal discharge persisting for 7 days after delivery. The patient should be reassured that bloody puerperal discharge normally lasts for:  
A) 2 days  
B) 5 days  
C) 8 days  
D) 11 days  
E) 14 days

OBG-5.53. All the following statements are valid regarding hysterosalpingography (a test for verifying the patency of the Fallopian tubes), EXCEPT:  
A) both oily and water-soluble contrast materials can be used  
B) nodular isthmic salpingitis is usually detectable by this method  
C) this procedure also denotes any intrauterine abnormalities  
D) the volume of the contrast material should not exceed 3 ml in order to avoid spillage from the Fallopian tube into the peritoneal cavity  
E) this procedure may have a therapeutic effect in infertility
OBG-5.54.
All of the following procedures are valuable in the diagnosis of an ectopic pregnancy, EXCEPT:
A) a pregnancy test
B) a diagnostic puncture of the Douglas' cul-de-sac (culdocentesis)
C) the erythrocyte sedimentation rate
D) ultrasonography
E) a pelvic (vaginal) examination

OBG-5.55.
**Case Study:**
An adnexal mass is detected by routine screening in a 40-year-old female patient. Which of the following methods is the **least** helpful for the assessment of the lesion?
A) pelvic ultrasonography
B) measurement of the serum bilirubin levels
C) pelvic CT-scan
D) laparoscopy
E) MRI

OBG-5.56.
In females sensitized to Rh antigens, amniocentesis is performed in order to:
A) measure antibody titers
B) determine the lecithin / sphingomyelin (L/S) ratio
C) perform the Kleihauer-Betke test
D) perform spectrophotometry
E) obtain a Gram stain

OBG-5.57.
According to the experience of Masters and Johnson as well as other sexual-therapists, the success-rate of therapy is the **lowest** in:
A) premature ejaculation
B) vaginismus
C) primary impotence
D) secondary impotence
E) inhibited orgasm

OBG-5.58.
The most important risk factor of developing breast cancer is:
A) the presence of sclerosing adenosis
B) nulliparity
C) atypical lobular hyperplasia
D) the use of intrauterine devices
E) menarche occurring before the age of twelve

OBG-5.59.
The most prevalent cause of precocious puberty in girls is:
A) idiopathic causes
B) gonadal neoplasms
C) Albright's syndrome
D) hypothyroidism

OBG-5.60
**Case Study:**
A 46-year-old woman experiences the following symptoms: depression, hot flushes, nocturnal sweating and recurrent headaches. The clinical evaluation denotes anovulation. The most likely diagnosis is:
A) psychosomatic disorder
B) depression and mania
C) uremia
D) tuberculosis
E) menopause (climacteric)

OBG-5.61.
Which of the following describes the chronologic sequence of pubertal events correctly?
A) accelerated growth, breast budding, pubarche, menarche
B) accelerated growth, pubarche, breast budding, menarche
C) breast budding, pubarche, menarche, accelerated growth
D) pubarche, breast budding, accelerated growth, menarche

OBG-5.62.
During oral contraceptive use, unexpected pregnancy most often develops due to:
A) midcycle breakthrough ovulation
B) frequent sexual intercourse
C) the inappropriate use of oral contraceptives
D) reduced gastrointestinal absorption of the contraceptives
E) the development of antibodies

OBG-5.63.
All of the following are appropriate for terminating a pregnancy in the second trimester, EXCEPT:
A) dilation and curettage
B) the administration of prostaglandin-E 2 vaginal suppositories
C) the intra-amniotic administration of oxytocin
D) dilation and oxytocin infusion
E) the intra-amniotic administration of 30% urea

OBG-5.64.
Which of the following neoplasms is associated with the use of oral contraceptives?
A) breast cancer
B) ovarian cancer
C) endometrial cancer
D) liver cancer
E) none of the above

OBG-5.65.
Vacuum-curettage has all the following advantages over conventional dilatation and curettage, EXCEPT:
A) it is less time-consuming
B) it can be performed on outpatients
C) it carries a lower risk of injury to the uterus
D) it is also applicable in the termination of pregnancies approaching the end of the second trimester

OBG-5.66.
The risk of congenital heart defects due to exposure to teratogenic substances is the highest:
A) if the exposure occurs 1-2 weeks after menstruation
B) if the exposure occurs 2-3 weeks after menstruation
C) if the exposure occurs 6-8 weeks after menstruation
D) if the exposure occurs 9-12 weeks after menstruation
E) all of the above
F) none of the above

OBG-5.69.
All of the following statements are valid regarding polyhydramnios, EXCEPT:
A) acute polyhydramnios is a frequent cause of premature delivery occurring before the 28th week of pregnancy
B) polyhydramnios is associated with congenital abnormalities in 20% of cases
C) edema is common, particularly of the lower extremities and of the vulva
D) polyhydramnios is associated with ureteral obstruction in almost 50% of cases
E) it can be complicated by the premature separation of the placenta, uterine dysfunction and postpartum hemorrhage

OBG-5.70.
All of the following statements are valid regarding progesterone production during pregnancy, EXCEPT:
A) during the first 10 weeks of pregnancy, the corpus luteum is the primary source of progesterone
B) following the 12th week of gestation, the placenta is the primary source of progesterone
C) maternal cholesterol is a major precursor of the progesterone synthetized by the placenta
D) progesterone levels rise abruptly after death of the fetus
E) progesterone is an essential substrate of maternal cholesterol synthesis

OBG-5.71.
Which of the following statements is true regarding neural tube defects?
A) in Hungary, the overall incidence of these defects is 15-20%
B) maternal serum a-fetoprotein levels are invariable during pregnancy
C) a-fetoprotein cannot be detected in the amniotic fluid
D) 95-99% of all neural tube defects can be detected by amniocentesis and meticulous ultrasonography
E) none of the above

OBG-5.73.
The pH value of amniotic fluid is in the range of:
A) 2.5-3.0
B) 3.0-3.5
C) 4.5-5.5
D) 5.5-6.0
E) 7.0-7.5

OBG-5.74.
Which of the following statements regarding suppurative mastitis is valid?
A) the symptoms usually present in the 10th postpartum week
B) herpesvirus is the most common causitive pathogen
C) the most common cause of mastitis is poor personal hygiene
of the mother
D) the pathogen can never be cultured from breast milk
E) the source of infection is almost invariably the nose and throat
of the nursing infant

OBG-5.75.
The anteroposterior diameter of the pelvic rim is the shortest along the:
A) interspinous diameter
B) anatomical conjugate
C) diagonal conjugate
D) obstetric conjugate
E) none of the above

OBG-5.79.
Case Study:
A 19-year-old woman is referred to the emergency room for a sudden loss of consciousness at her job. The examination reveals slight vaginal bleeding; the abdomen is distended and diffusely tender. The patient complains of shoulder- and abdominal pain. Body temperature: 36.4 °C; heart-rate: 120/min; blood-pressure: 96/50 mmHg. Which of the following diagnostic procedures should be performed to verify the tentative diagnosis established by evaluating the available clinical data?
A) a pregnancy test
B) posterior colpotomy
C) dilation and curettage
D) diagnostic puncture of the cul-de-sac
E) hysteroscopy

OBG-5.80.
Case Study:
A 24-year-old pregnant woman is in the 8th week of gestation. Her medical history includes a pulmonary embolism that occurred 7 years ago during her previous pregnancy. She was given intravenous heparin at that time followed by oral warfarin (coumarin) therapy for several months. The patient has not experienced any signs of thromboembolism for the last 6 years. Which of the following statements is correct regarding the current condition of the patient?
A) considering the 5-year-long disease-free period, the risk of a recurrent thromboembolism is not higher than in normal cases
B) in pregnancy, impedance plethysmography is unsuitable for the evaluation of deep-vein thrombosis
C) in pregnancy, Doppler -ultrasonography is unsuitable for the evaluation of deep-vein thrombosis
D) low-dose heparin therapy should be started and continued throughout the pregnancy and puerperium
E) the risk of a recurrent thromboembolism is the highest in the second trimester of pregnancy

OBG-5.81.
All of the following statements are valid regarding appendicitis developing during pregnancy, EXCEPT:
A) this condition is difficult to diagnose
B) the maternal mortality rate increases with the progression of the pregnancy
C) surgery should be postponed until the establishment of a conclusive diagnosis
D) the incidence of appendicitis is unchanged in pregnancy
E) the fetal mortality rate is about 15%

OBG-5.82.
All of the following statements are valid regarding immune thrombocytopenic purpura (ITP) developing during pregnancy, EXCEPT:
A) platelet production is normal or increased in the bone marrow
B) the bleeding time can be normal as young, hyperactive platelets are present in the circulation
C) the platelet count may be abnormally low in the peripheral blood due to the destruction of circulating thrombocytes covered by antibodies
D) a cesarean section does not always prevent fetal hemorrhage
E) the fetus is safe if the platelet count is at least 100,000/mm³ at the time of delivery

OBG-5.83.
The first immunologic reaction to a primary rubella infection is:
A) IgM production
B) IgG production
C) IgA production
D) IgD production
E) the production of complement binding antibodies

OBG-5.84.
Which of the following statements is valid regarding the premature separation of the placenta?
A) coagulopathy results from the consumption of coagulation factors in a retroplacental hematoma
B) hypofibrinogenemia (< 150 mg/dl) develops in more than 50% of such patients
C) hypofibrinogenemia (< 150 mg/dl) develops in less than 10% of such patients
D) aggressive fluid and electrolyte replacement as well as transfusions usually prevent the development of severe renal failure
E) despite aggressive fluid and electrolyte replacement as well as transfusions, dialysis becomes necessary in many cases

OBG-5.85.
Which of the following statements regarding placenta previa is valid?
A) the incidence of this condition decreases with advancing maternal age
B) the incidence of this condition is not influenced by previous deliveries or abortions
C) the initial bleeding is painless and seldom causes death
D) vaginal surgery is the therapy of choice
E) immediate vaginal examination is mandatory when placenta previa is suspected

OBG-5.86.
Viremia as well as the presence of rubella virus in the pharynx of an infected individual is related to the appearance of the characteristic skin rash by:
A) their occurrence 5-7 days before the development of the rash
B) their occurrence 1-2 days before the development of the rash
C) their simultaneous occurrence with the rash
D) their occurrence 1-2 days after the development of the rash
E) there is no correlation between their occurrence and the development of the rash

OBG-5.87.
Which of the following is a potential, associated risk in patients developing eclampsia during their first pregnancy?
A) diabetes mellitus
B) chronic hypertension
C) habitual abortion
D) chronic liver disease
E) delivery of a dead fetus in the third trimester of pregnancy

OBG-5.88.
The incidence of rheumatic fever is continuously decreasing, however, it still develops occasionally. In pregnant women with rheumatic fever, deteriorating cardiac function is most likely associated with:
A) aortic regurgitation
B) aortic stenosis
C) mitral regurgitation
D) mitral stenosis
E) tricuspid regurgitation

OBG-5.89.
All of the following statements are valid regarding the drugs used in the therapy of tuberculosis, EXCEPT:
A) rifampin may cause a flu-like syndrome
B) peripheral neuropathy may develop in patients on INH therapy
C) optic neuritis may develop in patients on INH therapy
D) ototoxicity is an adverse effect of streptomycin
E) antinuclear antibody (ANA) tests are useful

OBG-5.90.
All of the following statements regarding polyhydramnios are valid, EXCEPT:
A) therapeutic amniocentesis is indicated solely for the alleviation of maternal distress
B) in polyhydramnios, the incidence of major congenital abnormalities is 20%
C) occasionally, it can be treated safely and effectively with diuretics as well as restricting the intake of water and dietary salt
D) polyhydramnios is associated with an increased incidence of premature separation of the placenta, uterine dysfunction and post-partum bleeding
E) the rapid removal of amniotic fluid is contraindicated

OBG-5.91.
What is the margin of error (in days) when estimating the age of the pregnancy by (B-mode) ultrasonography during the first 10 weeks?
A) ±1
B) ±4
C) ±14
D) ±20

OBG-5.92.
What is the earliest time when a multiple pregnancy can be detected by ultrasonography?
A) between the 4th and 6th week of gestation  
B) between the 8th and 10th week of gestation  
C) between the 14th and 15th week of gestation  
D) between the 15th and 16th week of gestation  
E) between the 15th and 16th week of gestation

OBG-5.94.
The ultrasonographic features of abruptio placentae include:
A) a diffuse echo pattern all over the uterine cavity  
B) the membrane has separated from the uterine wall revealing echo points beneath it  
C) a portion of the placenta has separated from the uterine wall  
D) the capacity of the uterine cavity is reduced  
E) a lack of fetal heart contractions

OBG-5.95.
The ultrasonographic picture of hydatidiform mole (trophoblastic disease) includes:
A) a diffuse echo pattern ("snowfall") all over the uterine cavity; fetal elements are missing  
B) an unstructured, diffuse echo pattern without fetal elements  
C) echo points around an irregularly shaped amniotic sac  
D) the absence of fetal elements  

OBG-5.96.
In the second trimester of pregnancy, ultrasonography is suitable for:
A) the measurement of fetal dimensions  
B) intrauterine detection of congenital abnormalities  
C) the assessment of fetal position and presentation  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.97.
Which of the following fetal abnormalities are detectable by ultrasonography?
A) anencephaly  
B) hydrocephalus  
C) large abdominal neoplasms  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.98.
Which of the following conditions should be suspected if the abdominal circumference is greater than normal?
A) multiple pregnancy  
B) polyhydramnios  
C) large fetus  
D) all of the above  
E) ptotic abdomen

OBG-5.99.
The ultrasonographic features of fetal and placental hydrops include:
A) a thickening of the placenta  
B) a double contoured fetal skull  
C) ascites detected in the fetal abdominal cavity
D) all of the above
E) only answers (A) and (B) are true

**OBG-5.100.**
From which week of pregnancy does the fetal skull show with full certainty, on ultrasonography?
A) 6 weeks
B) 7-8 weeks
C) 12-14 weeks
D) 16-18 weeks
E) 18-20 weeks

**OBG-5.101.**
What is the lowest biparietal diameter indicating the possible normal weight-development of the fetus?
A) 6 cm
B) 7 cm
C) 9 cm
D) 11 cm
E) 12 cm

**OBG-5.102.**
On ultrasonography, the diameter of which of the following fetal organs yields valuable information on the growth-rate of the fetus?
A) the biparietal diameter of the skull (BPD)
B) the diameter of the thorax
C) the diameter of the abdomen
D) all the above if assessed simultaneously
E) only answers (A) and (B) are true

**OBG-5.103.**
In which of the following conditions is the measurement of the placental thickness important?
A) diabetes
B) Rh-incompatibility
C) polyhydramnios
D) all of the above
E) only answers (A) and (B) are true

**OBG-5.104.**
Which is associated with higher radiation exposure, radiography or fluoroscopy?
A) radiography
B) fluoroscopy
C) radiation exposure is the same in both examinations

**OBG-5.105.**
Which of the following radiologic procedures is contraindicated during pregnancy?
A) chest x-ray
B) chest fluoroscopy
C) therapeutic irradiation
D) radiography of the pelvis
E) fluoroscopy of the pelvis

**OBG-5.106.**
From which week of pregnancy is the radiolucency of fetal bones detectable on radiography?
A) 8 weeks  
B) 16 weeks  
C) 20 weeks  
D) 24 weeks  
E) 28 weeks

OBG-5.107.
Which of the following congenital abnormalities is detectable by radiograph?
A) anencephaly  
B) hydrocephalus  
C) gross abnormalities of the extremities  
D) syphilitic osteochondritis  
E) all of the above

OBG-5.108.
Radiological features of hydrocephalus include:
A) a large skull  
B) extremely wide fontanelles  
C) the thickness and density of the bones of the calvaria are reduced  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.109.
Radiological features of hydrops fetalis include:
A) sprawled arms  
B) radiolucency of the skull  
C) the cranial bones override each other along the sutures  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.110.
Radiological features of intrauterine fetal death include:
A) the skull is collapsed and the cranial bones override each other  
B) an angulated spine  
C) exaggerated lordosis; steeply inclined ribs  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.111:
Spalding's (radiological) sign consists of:
A) the skull is collapsed and the cranial bones override each other  
B) extremely angulated spine  
C) exaggerated lordosis of the spine  
D) steeply inclined ribs in intrauterine fetal death  
E) radiolucency of the skull

OBG-5.112.
What is hysterosalpingography used for?
A) for the diagnosis of ectopic pregnancy  
B) to assess the patency of the Fallopian tubes and detect the morphologic abnormalities of the uterine cavity  
C) for the diagnosis of ovarian neoplasms  
D) to assess the motility of the Fallopian tubes
E) to measure the size of the ovaries

OBG-5.113. Which of the following describes Nagele's method for estimating the duration of a pregnancy?
A) 9 months + 3 days starting from the last day of the last regular menses
B) 9 months + 7 days starting from the first day of the last regular menses
C) 9 months starting from the first day of the last regular menses
D) 9 months + 7 days starting from the time of conception
E) 5 months starting from the time when fetal motion is detected

OBG-5.114. Nagele's method for estimating the duration of a pregnancy takes the following under consideration:
A) the date of ovulation
B) the date of conception
C) the first day of the last menses
D) the last day of the last regular menses
E) the date when fetal motion is first detected

OBG-5.115. The duration of a normal pregnancy from the first day of the last regular menses is:
A) 266 days
B) 280 days
C) 300 days
D) 310 days
E) 320 days

OBG-5.116. The average duration of a normal pregnancy from the day of conception is:
A) 200 days
B) 266 days
C) 300 days
D) 310 days
E) 320 days

OBG-5.117. Which of the following is taken into consideration when the term of delivery is calculated?
A) Nagele's method for estimating the duration of the pregnancy
B) the date when fetal motion is first detected
C) the ascension rate of the uterine fundus
D) the date when the uterine fundus descends
E) all of the above

OBG-5.118. Which of the following tests should be performed at each follow-up visit during pregnancy?
A) urinalysis
B) blood pressure measurement
C) measurement of body weight
D) all of the above
E) only answers (A) and (B) are true
OBG-5.119.
Which of the following tests is unnecessary during the first trimester of pregnancy?
A) a urinalysis
B) blood pressure measurements
C) measurements of the body weight
D) measurements of the abdominal circumference
E) vaginal examinations

OBG-5.120.
Which of the following is not a routine test at follow-up visits during pregnancy?
A) serologic tests for syphilis (STS)
B) hematocrit measurements
C) measurements of the hemoglobin level
D) urinalysis
E) liver function tests

OBG-5.121
Which of the following urinary parameters is/are mandatory when being tested at follow-up visits during pregnancy?
A) the presence of any pus
B) the glucose level
C) the concentration of protein
D) all of the above
E) only answers (A) and (C) are true

OBG-5.122
The optimal monthly gain of body weight during pregnancy is:
A) 0.5-0.6 kg
B) 1.0-1.5 kg
C) 1.5-2.0 kg
D) 2.0-2.5 kg
E) 2.5-3.0 kg

OBG-5.123.
The daily protein requirement of pregnant women is as high as:
A) 60-180 g/day
B) 100-150 g/day
C) 150-200 g/day
D) 200-300 g/day
E) 300-350 g/day

OBG-5.124.
The daily carbohydrate requirement of pregnant women is as high as:
A) 60-80 g/day
B) 100-150 g/day
C) 150-200 g/day
D) 200-300 g/day
E) 300-350 g/day

OBG-5.125.
The daily fat requirement of pregnant women is as high as:
A) 60-80 g/day
B) 100-150 g/day  
C) 150-200 g/day  
D) 200-300 g/day  
E) 300-350 g/day  

OBG-5.126.  
The proper method for preparing the nipples for breastfeeding is:  
A) washing the nipples with soap every morning and evening  
B) massage of the nipple and the areola  
C) only answers (A) and (B) are true  
D) no preparation is necessary

OBG-5.127.  
Administered in high doses, which of the following drugs does not 
cause fetal damage?  
A) barbiturates  
B) ganglionic blockers  
C) vitamin K  
D) morphine and its derivatives  
E) penicillins

OBG-5.128.  
Which of the following drugs is contraindicated during pregnancy?  
A) coumarins  
B) oral antidiabetic agents  
C) actinomycin D  
D) cytotoxic agents  
E) all of the above

OBG-5.129  
Which of the following drugs is contraindicated during pregnancy?  
A) thalidomide  
B) methimazole  
C) vitamin K in high doses  
D) all of the above  
E) only answers (A) and (B) are true

OBG-130.  
Which of the following drugs is contraindicated during pregnancy?  
A) quinine  
B) cytotoxic agents  
C) streptomycin (permanent therapy)  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.131.  
Which of the following drugs should not be administered during pregnancy?  
A) streptomycin  
B) sulfonamides  
C) carbutamide  
D) all of the above  
E) only answers (A) and (C) are true

OBG-5.132.  
In which weeks of pregnancy is ultrasonography recommended for
monitoring the condition and development of the fetus?
A) on weeks 8 and 32
B) on weeks 24 and 32
C) on weeks 8, 24 and 38
D) on weeks 8, 24 and 32
E) on weeks 8, 18, 28 and 32

OBG-5.133.
What is the influence of pregnancy on epilepsy?
A) seizure threshold is lower
B) seizure threshold is higher
C) there is no relation between pregnancy and seizure threshold

OBG-5.134.
What is the percentage of rheumatic heart disease occurring among cardiac complications developing in pregnancy?
A) 10-20%
B) 20-25%
C) 25-30%
D) 30-40%
E) 70-80%

OBG-5.135.
What is the percentage of conditions resulting from congenital heart defects complicating pregnancy?
A) 1-2%
B) 20-30%
C) 40-50%
D) 50-60%
E) 60-70%

OBG-5.136.
Based on the former practice of functional staging, which pregnant cardiac patients belong to group I?
A) asymptomatic patients with clinical signs of heart disease
B) patients with symptoms precipitated by slight exercise
C) patients with symptoms precipitated by heavy exercise
D) patients with signs of congestive heart failure detectable at rest
E) patients manifesting heart disease since childhood

OBG-5.137.
Based on the former practice of functional staging, which pregnant cardiac patients belong to group II?
A) asymptomatic patients with clinical signs of heart disease
B) patients with symptoms precipitated by slight exercise
C) patients with symptoms precipitated by heavy exercise
D) patients with signs of congestive heart failure detectable at rest
E) patients manifesting heart disease since childhood

OBG-5.138.
Based on the former practice of functional staging, which pregnant cardiac patients belong to group III?
A) asymptomatic patients with clinical signs of heart disease
B) patients with symptoms precipitated by slight exercise
C) patients with symptoms precipitated by heavy exercise
D) patients with signs of congestive heart failure detectable at rest
E) patients manifestin heart disease since childhood

OBG-5.139.
Based on the former practice of functional staging, which pregnant cardiac patients belong to group IV?
A) asymptomatic patients with clinical signs of heart disease
B) patients with symptoms precipitated by slight exercise
C) patients with symptoms precipitated by heavy exercise
D) patients with signs of congestive heart failure detectable at rest
E) patients with manifested heart disease since childhood

OBG-5.140.
In patients with group I heart disease, (based on the former practice of functional staging), how should labor be managed:
A) by cesarean section with sterilization in all cases
B) heart disease is only an additional indication for cesarean section
C) cesarean section is performed only on obstetrical indications
D) the 2nd stage of labor should be shortened by performing vacuum-extraction
E) the duration of labor should be reduced by administering an infusion of oxytocin

OBG-5.141.
In patients with group II heart disease, (based on the former practice of functional staging), how should labor be managed:
A) by cesarean section with sterilization in all cases
B) heart disease is only an additional indication for cesarean section
C) cesarean section is performed only on obstetrical indications
D) the 2nd stage of labor should be shortened by performing vacuum-extraction
E) the duration of labor should be reduced by administering an infusion of oxytocin

OBG-5.142.
In patients with group III heart disease, (based on the former practice of functional staging), how should labor be managed:
A) by cesarean section with sterilization in all cases
B) heart disease is only an additional indication for cesarean section
C) cesarean section is performed only on obstetrical indications
D) the 2nd stage of labor should be shortened by performing vacuum-extraction
E) the duration of labor should be reduced by administering an infusion of oxytocin

OBG-5.143.
In patients with group IV heart disease, (based on the former practice of functional staging), how should labor be managed:
A) by cesarean section with sterilization in all cases
B) heart disease is only an additional indication for cesarean section
C) cesarean section is performed only on obstetrical indication
D) the 2nd stage of labor should be shortened by performing vacuum-extraction
E) the duration of labor should be reduced by administering an infusion of oxytocin

OGB-5.144. Which stage of labor is the most demanding on cardiac patients?
A) the 1st stage (from the onset of labor until the full dilation of the cervix)
B) the 2nd stage (from complete effacement of the cervix until the delivery of the fetus)
C) the 3rd stage (the delivery of the placenta)
D) only answers (A) and (B) are true
E) all of the above

OGB-5.145. Which of the following is an indication for the termination of a pregnancy in patients with underlying heart disease?
A) circulatory insufficiency developing during the first trimester
B) acute endocarditis
C) atrial fibrillation
D) recurrent episodes of cardiac decompensation occurring before pregnancy
E) all of the above

OGB-5.146. In which week of gestation is the workload of the heart the highest?
A) between the 8th and 16th week
B) between the 16th and 24th week
C) between the 28th and 34th week
D) between the 34th and 38th week
E) between the 38th and 40th week

OGB-5.147. In which of the following periods is the risk of congestive heart failure the highest in patients pregnant with an underlying heart disease?
A) the first trimester
B) between the 28th and 34th week of gestation
C) during the puerperium.
D) during all of the above periods
E) during labor only

OGB-5.148. Which of the following maternal conditions can disturb the metabolism and respiration of the fetus?
A) uterine hypoplasia
B) lung and heart disease
C) anemia
D) all of the above
E) only answers (A) and (B) are true

OGB-5.149. Why is it contraindicated to let pregnancy develop to full term in patients with heart valve implants?
A) because the risk of congestive heart failure is high
B) because the rejection of the implant is common during pregnancy
C) because the associated permanent anticoagulant therapy carries the risk of abortion, intrauterine fetal death and bleeding
D) because thrombus formation is common despite ongoing anticoagulant therapy

OBG-5.150. How does pregnancy and the puerperium influence active tuberculosis?
A) pregnancy or puerperium have no effect on the course of tuberculosis
B) pregnancy and the puerperium have beneficial effects on the course of tuberculosis
C) pregnancy and the puerperium have deleterious effects on the course of tuberculosis

OBG-5.152. Should a mother with active tuberculosis nurse her baby?
A) no
B) yes
C) only if she has been receiving antituberculotic chemotherapy during her pregnancy

OBG-5.153. What is the effect of pregnancy on bronchial asthma?
A) it has no influence
B) the condition of the patient improves
C) the condition of the patient deteriorates
D) its effects are inconsequential

OBG-5.155. In which weeks of gestation is appendicitis the most prevalent?
A) before the 12th week
B) between weeks 12 and 24
C) between weeks 24 and 28
D) between weeks 28 and 38
E) there is no difference as to when it occurs

OBG-5.156. How does the position of the appendix change during pregnancy?
A) the uterus displaces the appendix towards the pelvis
B) the appendix is dislocated upwards and laterally
C) it remains in its original position
D) it is dislocated upwards and medially

OBG-5.158. A In which of the following cases is the termination of pregnancy indicated in ulcerative colitis?
A) in ulcerative colitis developing at the beginning of pregnancy and showing progression despite drug therapy
B) acute exacerbation of the long-standing chronic disease during pregnancy
C) if any indication for corticosteroid therapy occurs
D) all of the above
E) only answers (A) and (B) are true

OBG-5.161. The cause of constipation developing frequently in pregnancy is:
A) reduced intestinal muscle tone
B) pressure exerted by the gravid uterus
C) altered diet
D) all of the above
E) only answers (A) and (B) are true

**OBG-5.162.**
Which of the following drugs will you not prescribe for constipation associated with pregnancy?
A) sennoside A+B (Tisasen A + B)
B) phenolphthalein
C) bisacodyl (Videx)
D) drastic cathartics
E) osmotic laxatives

**OBG-5.163.**
Which of the following factors facilitate the development of choletithaiasssis during pregnancy?
A) high serum cholesterol level
B) reduced muscle tone of the gall bladder
C) constipation and reduced excursions of the diaphragm
D) all of the above
E) only answers (B) and (C) are true

**OBG-5.164.**
What should be done if significant, recurrent asymptomatic Bacteriuria develops during pregnancy?
A) identification of the pathogen by cultures
B) antibiotic susceptibility testing
C) antibiotic therapy
D) all of above
E) no intervention is necessary

**OBG-5.165.**
What is the possible route for pathogens in renal infections developing during pregnancy?
A) an ascending infection originating from the urinary bladder
B) the hematogenous spread from distant foci of infection
C) the lymphogenetic spread from the intestines
D) all of the above
E) only answers (A) and C) are true

**OBG-5.166.**
Which of the following conditions predisposes to pyelonephritis becoming apparent during pregnancy?
A) diabetes
B) toxemia
C) acute pyelonephritis in the past medical history
D) infectious diseases
E) all of the above

**OBG-5.167.**
In mild anemia during pregnancy, the serum hemoglobin is in the range of
A) 150-430 g/l
B) 110-130 g/l
C) 90-110 g/l
D) 80-90 g/l

**OBG-5.168.**
In moderately severe anemia during pregnancy, the serum hemoglobin is in the range of:
A) 130-150 g/l
B) 110-130 g/l
C) 90-110 g/l
D) 80-90 g/l

OBG-5.171.
In moderately severe anemia during pregnancy, the serum hemoglobin is in the range of:
A) 8.0-9.27 mmo/l
B) 6.8-8.0 mmo/l
C) 5.6-6.8 mmo/l
D) 0.6 mmo/l

OBG-5.172.
In severe anemia during pregnancy, the serum hemoglobin is in the range of:
A) 8.0-9.27 mmo/l
B) 6.8-8.0 mmo/l
C) 5.6-6.8 mmo/l
D) 0.6 mmo/l

OBG-5.173.
The therapy of hypochromic anemia during pregnancy includes the administration of:
A) iron-containing preparations
B) folic acid
C) vitamin B₁₂
D) cyanocobalamine
E) only answers (C) and (D) are true

OBG-5.174.
The therapy of hypochromic anemia during pregnancy includes the administration of:
A) iron-containing preparations
B) vitamin-rich diet
C) folic acid
D) vitamin B₁₂
E) only answers (C) and (D) are true

OBG-5.175.
How does pregnancy influence the prognosis of hemorrhagic diatheses?
A) there is no such influence
B) negatively
C) beneficially

OBG-5.176.
What is the likelihood of delivering a baby with congenital malformations after a rubella infection occurring in the first 8 weeks of pregnancy?
A) 1-2%
B) 2-5%
C) 40-60%
D) 80-90%
E) 90-100%

OBG-5.177. What is the likelihood of delivering a baby with congenital malformations after a rubella infection occurring in the first 8-12 weeks of pregnancy?
A) 5-10%
B) 40-50%
C) 60-70%
D) 80-90%
E) 90-100%

OBG-5.178. Which of the following titers of hemagglutinating antibodies suggests an acute rubella infection?
A) > 1:32
B) 1:16+
C) 1:8+
D) an antibody titer of at least two grades higher than the initial low titer
E) the decrease of high antibody titers is followed by an increase of these titers

OBG-5.179. How does pregnancy influence maternal hepatitis?
A) pregnancy aggravates maternal hepatitis
B) pregnancy alleviates maternal hepatitis
C) pregnancy has no effect on maternal hepatitis

OBG-5.180. The unequivocal diagnosis of toxoplasmosis can be established by the:
A) complement fixation reaction
B) Sabin-Feldman dye test
C) intracutaneous testing with toxoplasma antigen
D) all of the above

OBG-5.181. The complications of toxoplasmosis developing during pregnancy include:
A) abortion
B) premature delivery
C) intrauterine fetal death
D) all of the above
E) none of the above

OBG-5.182. Which of the following conditions suggests congenital toxoplasmosis of the neonate?
A) hydrocephalus with focal cerebral calcification
B) retinitis, uveitis and pigment deposits on the ocular fundus
C) hepatosplenomegaly, protracted jaundice
D) all of the above
E) only answers (A) and (B) are true

OBG-5.183. In listeriosis, the pathogen can be cultured from the:
A) blood
B) cerebrospinal fluid
C) feces
D) urine
E) all of the above

OBG-5.184.
Suspected neonatal listeriosis is best verified by culturing a specimen of
A) vernix
B) blood
C) meconium
D) amniotic fluid
E) all of the above

OBG-5.185.
What is a primary or primordial follicle?
A) an immature follicle surviving into the postmenopausal period
B) a dormant follicle devoid of maturation changes
C) a mature follicle developed under the effect of gonadotropic hormone
D) the first mature follicle in puberty
E) a follicle undergoing degeneration in the child-bearing age

OBG-5.186.
Which of the following agglutinating antibody titers suggests listeriosis requiring treatment?
A) 1:8
B) 1:16
C) 1:32
D) 1:128
E) 1:526

OBG-5.187.
Which of the following drugs is appropriate for the treatment of listeriosis?
A) penicillin and sulfonamides
B) tetracycline
C) quinacrine (Daraprim) and sulfonamides
D) chloramphenicol

OBG-5.188.
Fetal affects of syphilis include:
A) intrauterine fetal death
B) abortion
C) premature birth
D) all of the above
E) none of the above

OBG-5.189.
In pregnancy, Treponema pallidum can penetrate the placenta in week:
A) 6
B) 12
C) 20
D) 28
E) 36

OBG-5.190.
In which of the following cases is the performance of serologic tests for syphilis justified?
A) if the mother is not married  
B) if the symptoms of the father suggest syphilis  
C) if the family history contains any offspring born with anomalies suggesting congenital syphilis  
D) in case of intrauterine fetal death of unknown etiology  
E) in all cases without exception

OBG-5.192.  
In pregnancy, gonococcal infection becomes established in:  
A) the urethra  
B) Skene's glands  
C) the cervical canal  
D) an obstruction of the ducts of Bartholini's glands  
E) all of the above

OBG-5.193.  
The therapy of gonorrhea during pregnancy includes the administration of  
A) sulfonamides  
B) penicillins  
C) tetracyclines

OBG-5.194.  
Which of the following demonstrate the diabetogenic effect of pregnancy?  
A) estrogen, prolactin and cortisol are insulin-antagonists  
B) the blood glucose level is elevated by growth hormone, prolactin and TSH  
C) the placenta metabolizes a portion of circulating insulin  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.196.  
Characteristic features of latent (gestational) diabetes include?  
A) the presence of symptoms; high blood-glucose levels  
B) the absence of clinical symptoms; normal blood-glucose levels, impaired glucose tolerance  
C) the absence of clinical symptoms; normal blood-glucose levels and glucose tolerance, however, the enhanced glucose tolerance test yields abnormal results  
D) clinical symptoms are absent; blood-glucose levels and the results of both the glucose tolerance test and the enhanced glucose tolerance tests are normal

OBG-5.197.  
Which of the following may suggest potential diabetes?  
A) the delivery of a neonate of over 4,000 g body weight  
B) either parent or both of them are diabetics  
C) obesity, sudden weight-gain  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.198  
Which of the following jeopardize women with gestational diabetes?  
A) the derangement of carbohydrate metabolism  
B) the derangement of water- and electrolyte balance  
C) toxemia, urinary tract infection and vaginitis develop frequently
D) all of the above complications
E) only answers (A) and (B) are true

OBG-5.199.
Which of the following is more prevalent in pregnant diabetics?
A) toxemia
B) polyhydramnios
C) abortion
D) intrauterine fetal death
E) all of the above

OBG-5.200.
Which of the following is suggested by the delivery of a neonate of over 4,000 g of body weight?
A) an improper diet during pregnancy
B) a latent diabetes
C) Rh isoimmunization
D) toxemia

OBG-5.201.
During the first 24 hours following delivery, the blood glucose level of a neonate born to a diabetic mother is:
A) normal
B) hyperglycemia is common
C) hypoglycemia is common
D) no characteristic changes occur

Which of the following fetal consequences should be considered in pregnant diabetics?
A) congenital malformations and polyhydramnios are common
B) premature birth is more prevalent in these patients
C) macrosomia
D) all of the above
E) only answers (A) and (C) are true

OBG-5.203.
The therapy of hyperthyroidism during pregnancy includes:
A) mild sedation, bed rest
B) the administration of antithyroid agents in low doses
C) combination therapy with antithyroid agents and T3 or T4
D) only answers (A) and (C) are true
E) the administration of T3 or T4

OBG-5.204.
Which of the following is characteristic of parathyroid function during pregnancy?
A) hypofunction
B) hyperfunction
C) normal function
D) hyperfunction is characteristic in the first weeks of pregnancy only
E) hyperfunction is characteristic only during the weeks preceding the delivery

OBG-5.205.
Which of the following is an (extremely rare) complication of the
retroflexion of the pregnant uterus?
A) abortion
B) overstretching of the anterior wall of the uterus
C) uterine incarceration
D) all of the above
E) this condition is not associated with complications

OBG-5.206.
Which of the following is a possible complication of an uterine myoma during pregnancy?
A) abortion, premature delivery
B) impairment of placental separation
C) myomatous foci may obstruct delivery
D) all of the above
E) only answers (A) and (C) are true

OBG-5.207.
Which of the following justifies surgery for uterine myomas during pregnancy?
A) sudden enlargement of the lesion
B) pain
C) necrosis and infection
D) all of the above
E) myomas are removed during cesarean section

OBG-5.208.
Which of the following justifies surgery for ovarian neoplasms during pregnancy?
A) only if malignancy is suspected
B) surgery is indicated in all cases, preferably in the first 1-2 months of pregnancy
C) surgery is indicated in all cases, preferably during weeks 10-14 of pregnancy
D) in cases where the lesion may hinder delivery
E) the myoma is removed during cesarean section performed at full term

OBG-5.209.
The term "hypersalivatio gravidarum" means:
A) permanent salivation that impairs normal feeding
B) ordinary morning sickness with nausea, vomiting and salivation
C) increased gastric secretion following meals
D) frequent vomiting unrelated to meals and the fullness of the stomach
E) nausea precipitated by strange odors

The term "vomitus matutinus" means:
A) permanent salivation that impairs normal feeding
B) ordinary morning sickness with nausea, vomiting and salivation
C) vomiting occurring following meals
D) frequent vomiting unrelated to meals and the fullness of the stomach
E) vomiting precipitated by strange odors or flavors

OBG-5.211.
The term "emesis gravidarum" means:
A) permanent salivation that impairs normal feeding
B) ordinary morning sickness with nausea, vomiting
C) vomiting occurring 2-3 times a day, following meals
D) starvation and consequent toxicosis resulting from a malignant vomiting syndrome unrelated to meals
E) vomiting precipitated by strange odors or flavors

OBG-5.212.
The term "hyperemesis gravidarum" means:
A) permanent salivation that impairs and precludes normal feeding
B) ordinary morning sickness with nausea, vomiting
C) vomiting occurring 2-3 times a day, following meals
D) starvation and consequent toxicosis resulting from a malignant vomiting syndrome unrelated to meals
E) vomiting precipitated by strange odors or flavors

OBG-5.214.
Which of the following belong to the pathomechanism of hyperemesis in pregnancy?
A) hormonal factors
B) neural factors
C) metabolic factors
D) hormonal and neural factors
E) hormonal, neural and metabolic factors

OBG-5.215.
Which of the following hormonal changes is responsible for the development of hyperemesis in pregnancy?
A) excessive progesterone production
B) high hCG levels
C) high hCG and progesterone levels
D) excessive production of adrenal corticosteroids
E) prolactin, produced only during pregnancy

OBG-5.216.
A diagnosis of early toxemia can be established if the symptoms develop in the following period:
A) before week 20
B) between weeks 20 and 28
C) between weeks 28-36
D) between weeks 36-40

OBG-5.217.
The principal sign of hyperemesis of pregnancy is:
A) considerable weight-loss
B) significant exsiccosis (fluid depletion)
C) acetone positivity and increased urobilinogen levels in the urine as well as the appearance of casts and leucine- or tyrosine crystals
D) weight-loss, alkalosis
E) only answers (A), (B) and (C) are true

OBG-5.218.
Characteristic features of extremely severe hyperemesis of pregnancy include:
A) coma
B) jaundice
C) polyneuritis, retinal hemorrhages
D) all of the above
E) only answers (A) and (B) are true

OBG-5.219.
Which of the following laboratory tests should be performed in hyperemesis of pregnancy?
A) urine volume; specific gravity; protein, acetone and urobilinogen content
B) urinary sediment examination
C) measurement of the hematocrit and hemoglobin levels
D) measurement of the serum bilirubin level
E) all of the above

OBG-5.220.
In hyperemesis gravidarum, hematocrit and hemoglobin values are:
A) elevated
B) reduced
C) unchanged

OBG-5.221.
The therapy of hyperemesis gravidarum includes:
A) bed rest
B) parenteral fluid therapy, and nutrition
C) administration of antiemetics
D) administration of sedatives
E) all of the above

OBG-5.222.
In Hungary, the incidence of toxemia developing late in pregnancy is:
A) 1-2%
B) 5-10%
C) 25-40%
D) 40-50%
E) 50-60%

OBG-5.223.
What is the ranking of toxemia of pregnancy among the causes of maternal mortality?
A) first
B) second
C) third
D) fourth
E) fifth

OBG-5.225.
The cause of generalized vasoconstriction developing in late occurring toxemia of pregnancy is:
A) vasopressor substances produced in the placenta
B) increased sensitivity of small arterioles to pressor agents
C) only answers (A) and (B) are true
D) adrenal hyperfunction
E) altered sensitivity of the blood-pressure regulating centre

OBG-5.226.
Which of the following conditions predisposes to toxemia of pregnancy?
A) hypertension
B) diabetes mellitus
C) chronic glomerulonephritis
B) all of the above
E) only answers (A) and (C) are true

OBG-5.228.
Pathophysiologic features of late occurring toxemia of pregnancy include:
A) generalized vasoconstriction
B) increased capillary permeability
C) increased retention of water and sodium in the tissues
D) all of the above
E) only answers (A) and (B) are true

OBG-5.229.
Which of the following is the cause of edema developing during pregnancy?
A) toxemia
B) cardiac decompensation
C) renal disease
D) all of the above
E) only answers (A) and (B) are true

OBG-5.230.
Which of the following factors contribute to the development of edema in toxemia of pregnancy?
A) increased capillary permeability
B) vasoconstriction of arterioles
C) tissue hypoxia
D) increased effusion of plasma proteins into the interstitial space
E) all of the above

OBG-5.231.
What are the consequences of generalized vasoconstriction in toxemia occurring late in pregnancy?
A) hypertension
B) tissue ischemia
C) hypoxia
D) all of the above
E) only answers (A) and (C) are true

OBG-5.232.
Morphological changes of the placenta in toxemia of pregnancy include:
A) infarcts
B) syncitial degeneration and hypertrophy of Langhans' cells
C) a thickening of the basal membrane
D) all of the above
E) only answers (A) and (B) are true

OBG-5.233.
Morphological changes of the brain in late occurring toxemia of pregnancy include:
A) edema
B) vasospasm
C) increased irritability
D) only answers (A) and (B) are true
E) only answers (A), (B) and (C) are true

OBG-5.234.
Morphological changes of the glomeruli in a toxemic patient include:
A) glomerulocapillary endotheliosis
B) the deposition of amorphous material along the basal membrane and between the endothelial cells
C) hypertrophy of the intercapillary cellular matrix
D) all of the above
E) only answers (A) and (B) are true

OBG-5.235.
Symptoms of late toxemia of pregnancy include:
A) hypertension
B) proteinuria
C) edema
D) all of the above
E) only answers (B) and (C) are true

OBG-5.236.
Which of the following auxiliary symptoms may accompany the essential manifestations of toxemia of pregnancy?
A) headache, dizziness, restlessness
B) visual disturbances, flashes of "sparks", diplopia and blurred vision
C) pruritus
D) only answers (A) and (B) are true

OBG-5.237.
Which of the following is an appropriate method for detecting latent edema in pregnancy?
A) monitoring the balance of fluid intake and loss
B) monitoring the changes in body weight
C) pressing the skin over the tibia
D) determination of fluid compartment volumes by radionuclide studies
E) only answers (A) and (B) are true

OBG-5.238.
Which blood pressure reading is more important in the assessment of the severity of late occurring toxemia of pregnancy?
A) systolic blood pressure
B) diastolic blood pressure
C) the changes of both pressure values should be evaluated simultaneously

OBG-5.239.
Which of the following conditions should eclamptic seizures be differentiated from?
A) epilepsy
B) hysteric attack
C) uremic seizures
D) all of the above
E) only answers (A) and (B) are true

OBG-5.240.
The stages of eclamptic seizures are as follows:
A) tonic-clonic seizures  
B) prodromal stage, tonic-clonic seizures, coma  
C) tonic-clonic seizures, coma  
D) clonic seizure, coma  
E) prodromal stage, clonic seizure, coma  

OBG-5.241  
Eclamptic seizures may develop:  
A) in pregnancy  
B) at delivery  
C) during the puerperium  
D) all of the above  
E) during pregnancy and at birth only  

OBG-5.242  
The term "primary (genuine) toxemia of pregnancy" means:  
A) condition with cumulative occurrence within the family  
B) that no organic disease can be detected  
C) toxemic symptoms associated with hypertension as well as renal and vascular disease  
D) symptoms developing in the first half of pregnancy  
E) symptoms associated with multiple pregnancy  

OBG-5.243.  
" The term "superimposed toxemia" means:  
A) condition with cumulative occurrence within the family  
B) that no organic disease can be detected  
C) toxemic symptoms associated with hypertension as well as renal and vascular disease  
D) symptoms precipitated by improper diet or life-style  
E) symptoms associated with multiple pregnancy  

OBG-5.245.  
Which of the following methods is appropriate for evaluating the severity of late occurring toxemia of pregnancy?  
A) the measurement of blood pressure  
B) the measurement of urinary protein concentration  
C) assessing the severity of edema as well as the patient's subjective symptoms  
D) all of the above  
E) only answers (B) and (C) are true  

OBG-5.247.  
In which of the following cases should polysymptomatic toxemia be considered severe?  
A) if the blood pressure is higher than 180/130 mmHg and retinopathy is present  
B) if the grade of proteinuria exceeds 5 %  
C) if generalized edema is present  
D) in all of the above cases  
E) only answers (A) and (B) are true  

OBG-5.248  
Which of the following methods is appropriate for the diagnosis of late occurring toxemia of pregnancy?  
A) the measurement of blood pressure
B) urinalysis
C) body weight monitoring
D) all of the above
E) only answers (A) and (B) are true

OBG-5.249
Late consequences of eclamptic seizures include:
A) neurovegetative disturbances, psychosis
B) epilepsy and memory disturbances
C) permanent renal and vascular damage
D) all of the above
E) only answers (B) and (C) are true

OBG-5.250.
Which of the following indicates the severity and prognosis of eclampsia correctly?
A) the time of the onset of toxemia
B) the number and frequency of seizure-attacks as well as the depth of ensuing coma
C) the rate of diuresis
D) all of the above
E) only answers (B) and (C) are true

OBG-5.251.
The maternal risks of late occurring toxemia of pregnancy include:
A) death
B) afibrinogenia, premature separation of the placenta
C) permanent renal and vascular damage
D) all of the above
E) only answers (B) and (C) are true

OBG-5.252.
Fetal risks of late occurring toxemia of pregnancy include:
A) premature birth
B) dysmaturity
C) intrauterine fetal death
D) only answers (A) and (B) are true
E) all of the above

OBG-5.253.
Which of the following determines the severity of fetal damage due to toxemia of pregnancy?
A) the severity of toxemia
B) the duration of toxemia
C) the character of toxemia, i.e. whether it is primary or superimposed
D) all of the above
E) only answers (A) and (B) are true

OBG-5.255.
Essential principles of therapy of late occurring toxemia of pregnancy include:
A) the provision of appropriate rest
B) the prescription of a protein-rich diet and abstinence from spicy food
C) the alleviation of edema
D) the administration of antihypertensives and sedatives
E) the combination of all the above

OBG-5.256.
The therapeutic objective in severe toxemia and eclampsia is:
A) the alleviation of vasoconstriction, the reduction of blood pressure
and the enhancement of organ perfusion
B) to increase seizure threshold
C) the alleviation of water and sodium retention
D) all of the above
E) only answers (A) and (B) are true

OBG-5.257.
The emergency medical therapy of eclampsia includes:
A) the administration of 1-2 ampules of diazepam to increase the
seizure threshold
B) the insertion of an appropriate object between the teeth to prevent
biting of the tongue and lips
C) the maintenance of patent airways
D) referral to hospital
E) all of the above

OBG-5.258.
Which of the following drugs is inappropriate for the alleviation of
eclamptic seizures?
A) hypnotics
B) magnesium sulphate
C) diazepam
D) dextran (Rheomacrodex)
E) lytic cocktail

OBG-5.259.
In severe, late occurring toxemia of pregnancy as well as in eclampsia,
the pregnancy should be terminated if the following occur despite therapy:
A) if blood pressure is permanently high or rises abruptly
B) if significant or increasing proteinuria is present
C) if oligo-anuria or signs of renal parenchymal damage occur
D) if the severe objective signs are accompanied by subjective
complaints
E) if all of the above conditions occur alone or in combination

OBG-5.260
The term "spontaneous abortion" means:
A) one or more subsequent pregnancies terminating spontaneously
B) the spontaneous termination of a pregnancy
C) that an intact pregnancy is terminated by artificial instrumentation
D) that an intact pregnancy is terminated by an illegal, prohibited
procedure
E) that fetal death is not followed by an abortion

OBG-5.261
The term "habitual abortion" means:
A) one or more subsequent pregnancies terminating spontaneously
B) three or more subsequent pregnancies terminating spontaneously
C) an intact pregnancy is terminated by artificial instrumentation
D) an intact pregnancy is terminated by an illegal, prohibited
procedure
E) fetal death is not followed by an abortion

OBG-5.262. The term "artificial abortion" means:
A) one or more subsequent pregnancies terminating spontaneously
B) the pregnancy terminates without any intervention
C) an intact pregnancy is terminated by artificial instrumentation
D) an intact pregnancy is terminated by an illegal, prohibited procedure
E) fetal death is not followed by an abortion

OBG-5.263. The term "criminal abortion" means:
A) one or more subsequent pregnancies terminating spontaneously
B) an intact pregnancy is terminated by a legal procedure
C) an intact pregnancy is terminated by an illegal, prohibited procedure
D) fetal death is not followed by an abortion

OBG-5.264. The term "missed abortion" means:
A) one or more subsequent pregnancies terminating spontaneously
B) an intact pregnancy is terminated by a legal procedure
C) an intact pregnancy is terminated by an illegal, prohibited procedure
D) fetal death is not followed by an abortion

OBG-5.265. Which of the following may cause spontaneous abortion?
A) maternal diseases
B) anomalies of the ovum
C) diseases of the father
D) all of the above
E) only answers (A) and (B) are true

OBG-5.266. How many days must elapse following the complete destruction of the ovum before the pregnancy tests yield negative results again?
A) <7 days
B) 7-10 days
C) 20-30 days
D) 40-50 days

OBG-5.267. What is the percentage of pregnancies intended to reach full term but instead are terminated by a (clinically verified) spontaneous abortion in Hungary?
A) 1-2%
B) 3-5%
C) 15-20%
D) 30-40%
E) 50-60%

OBG-5.268. Which of the following forms of abortion represents the most advanced stage of this condition?
A) imminent abortion
B) incomplete abortion
C) complete abortion
D) incipient abortion

OBG-5.269.
Which type of abortion is characterized by cramping lower abdominal pain, vaginal bleeding and a closed cervix?
A) incipient abortion
B) imminent abortion
C) incomplete abortion
D) missed abortion
E) post-abortion residue

OBG-5.270.
Which type of abortion is characterized by cramping lower abdominal pain, vaginal bleeding, an open cervix but no passage of the products of conception?
A) incipient abortion
B) imminent abortion
C) incomplete abortion
D) missed abortion
E) post-abortion residue

OBG-5.271.
Which type of abortion is characterized by cramping lower abdominal pain, vaginal bleeding, an open cervix and the passage of the products of conception?
A) incipient abortion
B) imminent abortion
C) incomplete abortion
D) missed abortion
E) habitual abortion

OBG-5.272.
Which of the following is the most important feature for distinguishing between imminent and incipient abortion?
A) the volume of blood loss
B) cramps
C) the bore of the dilated cervix
D) the results of the biological pregnancy test
E) serum progesterone level

OBG-5.273.
Which of the following is the most important feature for distinguishing between incipient and incomplete abortion?
A) the volume of blood loss
B) the bore of the dilated cervix
C) the passage of the products of conception
D) the results of the biological pregnancy test
E) serum progesterone level

OBG-5.274.
In which of the following conditions can the administration of progestogenic agents be considered reasonable for the therapy of imminent abortion?
A) if the history contains spontaneous abortion
B) if lower abdominal cramps are present
C) if bleeding is present
D) if the serum progesterone level is low
E) in all patients with lower abdominal pain

OBG-5.275.
The risks of terminating spontaneous abortions by curettage include:
A) infection
B) bleeding resulting from intrauterine residue
C) uterine perforation and surgical injury
D) all of the above
E) only answers (A) and (B) are true

OBG-5.276.
Which of the following is the time-limit for terminating the pregnancy of women under 18 on non-medical indication?
A) week 12 of gestation
B) week 14 of gestation
C) week 16 of gestation
D) week 18 of gestation
E) week 20 of gestation

OBG-5.277.
Which of the following is the time-limit for terminating the pregnancy on medical indication?
A) week 12 of gestation
B) week 16 of gestation
C) week 20 of gestation
D) week 24 of gestation
E) there is no upper limit

OBG-5.278.
Which is the maternal age that justifies the termination of pregnancy on non-medical indication?
A) over 30 years
B) over 35 years
C) over 40 years
D) over 45 years
E) maternal age should not be considered as an indication for pregnancy termination

OBG-5.279.
Medical indications for pregnancy termination include:
A) cases where continuation of the pregnancy would interfere with the therapy of the underlying disease
B) cases where pregnancy aggravates the underlying disease
C) cases where the maternal disease jeopardizes the well-being of the fetus
D) all of the above
E) only answers (B) and (C) are true

OBG-5.280.
What is the time limit for terminating the pregnancy on social indication?
A) week 8 of gestation
B) week 12 of gestation
C) week 16 of gestation
In obstetrical terms, premature delivery means the termination of pregnancy:
A) between weeks 12-16 of gestation
B) between weeks 16-28 of gestation
C) between weeks 28-37 of gestation
D) between weeks 38-40 of gestation
E) when the weight of the fetus is 2499 grams or less

Which of the following factors maintain the integrity of pregnancy?
A) progesterone and oxytocinase
B) β-receptor stimulation
C) anatomical and functional integrity of the cervical sphincter and connective tissue fibers
D) all of the above
E) only answers (A) and (B) are true

Is active immunization against mumps and varicella permitted during pregnancy?
A) yes
B) no
C) it is permitted under certain conditions

Is passive immunization against mumps and varicella permitted during pregnancy?
A) yes
B) no
C) it is permitted under certain conditions

Is passive immunization against rubella permitted during pregnancy?
A) yes
B) no
C) it is permitted under certain conditions

When does labour start?
A) at the time of full dilation and effacement of the cervix
B) at the time when the maximum circumference of the fetal head has descended below the pelvic rim
C) at the time when rhythmic, expulsive uterine contractions resulting in the dilation of the cervix begin
D) at the time of complete cervical dilation when the patient begins to feel the urge to bear down

When does the 1st stage of labor start and end?
A) from the time of full cervical effacement to the delivery of the fetus
B) from the delivery of the fetus to the expulsion of the placenta
C) from the start of uterine contractions to the effacement of the cervix
When does the 2nd stage of labor start and end?
A) from the time of full cervical effacement to the delivery of the fetus
B) from the delivery of the fetus to the expulsion of the placenta
C) from the start of uterine contractions to the effacement of the cervix
D) this period corresponds to the first 2 hours following the delivery of the placenta
E) from the start of uterine contractions to the delivery of the fetus

When does the 3rd (placental) stage of labor start and end?
A) from the time of full cervical effacement to the delivery of the fetus
B) from the delivery of the fetus to the expulsion of the placenta
C) from the delivery of the fetus to the end of a 2-hour period following the expulsion of the placenta
D) this period corresponds to the first 2 hours following the delivery of the placenta
E) from the start of uterine contractions to the delivery of the fetus

When does the postplacental stage of labor start and end?
A) from the time of full cervical effacement to the delivery of the fetus
B) from the delivery of the fetus to the expulsion of the placenta
C) from the delivery of the fetus to the end of a 2-hour period following the expulsion of the placenta
D) this period corresponds to the first 2 hours following the delivery of the placenta
E) from the start of uterine contractions to the delivery of the fetus

"Predictory contractions":
A) propel the fetus along the osseous and soft tissue passage after the complete effacement of the cervix
B) are uterine contractions resulting in the effacement of the cervix
C) induce the separation and delivery of the placenta
D) are contractions occurring during the first days of the puerperium
E) brief uterine contractions occurring at irregular intervals during the last weeks of pregnancy

Which of the following factors are involved in the induction of labor?
A) the reduction of the effects of hormones produced by the corpus luteum
B) labor-stimulating hormones
C) neural changes
D) the hyperextension of uterine musculature and the pressure exerted by the presenting part on cervical ganglia
OBG-5.293. Which of the following inhibits the activity of the uterine musculature during pregnancy?
A) progesterone
B) β-adrenergic dominance
C) oxytoldnase
D) all of the above
E) only answers (A) and (B) are true

OBG-5.294. Which of the following stimulate the activity of the uterine musculature?
A) oxytocin
B) α-adrenergic dominance
C) estrogen
D) prostaglandins
E) all of the above
F) oxytocin and prostaglandins only

OBG-5.295. The mechanism of action of oxytocin is:
A) it reduces the resting membrane potential of the myocytes
B) it prevents the transmission of the impulses from one myocyte to the other
C) it increases the resting membrane potential of the myocytes
D) it stimulates the synthesis of actomyosin in the muscle
E) it stimulates the synthesis of ATP and ADP

OBG-5.296. Where is oxytocin produced during pregnancy?
A) in the posterior lobe of the pituitary
B) in the anterior lobe of the pituitary
C) in the paraventricular and supraoptic nuclei
D) in the fetus
E) in the hypothalamus of both the mother and the fetus

OBG-5.297. Progesterone reduces the intensity of uterine contractions by:
A) reducing the resting membrane potential of the myocytes
B) hyperpolarizing the membrane of the myocyte
C) stimulating the synthesis of actomyosin in the muscle
D) increasing the conversion of ATP to ADP

OBG-5.298. Estrogens enhance uterine contractions by:
A) reducing the resting membrane potential of the myocytes
B) preventing the transmission of the impulses from one myocyte to the other
C) increasing the resting membrane potential of the myocytes
D) stimulating the synthesis of actomyosin in the muscle
E) increasing the sensitivity of the myometrium against the effect of oxytocin

OBG-5.299. The action of progesterone on the pregnant uterus is that:
A) it depolarizes the membranes of myocytes
B) it hyperpolarizes the membranes of myocytes
C) it mobilizes intracellular calcium
D) it facilitates potassium efflux from the intracellular compartment
E) it facilitates sodium influx into the intracellular compartment

OBG-5.300.
Where is the dominant pacemaker of the uterus located during labor?
A) in the whole area of the fundus
B) in the right half of the fundus
C) in the isthmic region
D) in the cervix
E) in the middle third of the ventral uterine wall

OBG-5.301.
The effects of α-adrenergic stimulation on the myometrium include:
A) enhancement of muscular contraction
B) reduction of muscular contraction
C) it has no effect on the myometrium
D) enhances the excitation of the sensory fibers of the Frankenhauser-ganglion
E) stimulates the activity of the dominant pacemaker

OBG-5.302.
The effects of R-adrenergic stimulation on the myometrium include:
A) enhancement of muscular contraction
B) reduction of muscular contraction
C) it has no effect on the myometrium
D) enhances the excitation of the sensory fibers of the Frankenhauser-ganglion
E) stimulates the activity of the dominant pacemaker

OBG-5.303.
The term "uterine tone" during labor means:
A) the rise of intrauterine pressure during contractions
B) the lowest intrauterine pressure measured between contractions
C) the frequency of contractions
D) the product of multiplying the intensity and the frequency of contractions
E) the rise of pressure generated by bearing down

OBG-5.304.
The term "intensity of uterine contraction" means:
A) the rise of intrauterine pressure during contractions
B) the lowest intrauterine pressure measured between contractions
C) the frequency of contractions
D) the product of multiplying the intensity and the frequency of contractions
E) the rise of pressure generated by bearing down

OBG-5.305.
The term "frequency of uterine contractions" means:
A) the rise of intrauterine pressure during contractions
B) the lowest intrauterine pressure measured between contractions
C) the frequency of contractions
D) the product of multiplying the intensity and the frequency of contractions
E) the rise of pressure generated by bearing down

**OBG-5.306.**
The term "uterine activity during labor" means:
A) the rise of intrauterine pressure during contractions
B) the lowest intrauterine pressure measured between contractions
C) the frequency of contractions
D) the product of multiplying the intensity and the frequency of contractions

**OBG-5.307.**
The optimal frequency of uterine contractions during the 1st stage of labor is:
A) 0-1 contraction/ 10 minutes
B) 3-4 contractions/ 10 minutes
C) 6-8 contractions/ 10 minutes
D) 10-12 contractions/ 10 minutes
E) 15-20 contractions/ 10 minutes

**OBG-5.308.**
The average intensity of uterine contractions during the 1st stage of labor is:
A) 10-12 mmHg
B) 14-16 mmHg
C) 50-55 mmHg
D) 70-80 mmHg
E) 81-90 mmHg

**OBG-5.309.**
The average tone of the uterus during the 1st stage of labor is:
A) 10-12 mmHg
B) 30-40 mmHg
C) 40-50 mmHg
D) 50-60 mmHg
E) 70-90 mmHg

**OBG-5.310.**
The average intensity of uterine contractions during the 2nd stage of labor is:
A) 0.13-0.53 kPa
B) 0.54-1.33 kPa
C) 6.67-7.33 kPa
D) 13.30-53.00 kPa

**OBG-5.311.**
The average intensity of uterine activity at the end of the 1st stage of labor is:
A) 10-20 M.U.
B) 30-50 M.U.
C) 200-300 M.U.
D) 600-800 M.U.

**OBG-5.312.**
The average intensity of uterine contractions during the 2nd stage of
labor is:
A) 1-2 mmHg
B) 5-10 mmHg
C) 55-100 mmHg
D) 200-500 mmHg

OBG-5.313.
The rise of intrauterine pressure generated by bearing down during the 2nd stage of labor is as high as:
A) 1-2 mmHg
B) 3-5 mmHg
C) 10 mmHg
D) 50 mmHg
E) 100 mmHg

OBG-5.314.
The average intensity of uterine activity during the 2nd stage of labor is:
A) 1-2 M.U.
B) 5-10 M.U.
C) 50-100 M.U.
D) 280-300 M.U.
E) 400-500 M.U.

OBG-5.315.
The average intensity of uterine contractions during the 3rd (placental) stage of labor is:
A) 1-2 mmHg
B) 3-5 mmHg
C) 6-10 mmHg
D) 30-40 mmHg
E) 70-80 mmHg

OBG-5.316.
Factors contributing to the development of caput succedaneum include:
A) the effect of negative pressure exerted by the cervix on the fetal head
B) the strangulation caused by the contact ring
C) fetal hypoxia
D) all of the above
E) only answers (A) and (B) are true

OBG-5.317.
Caput succedaneum may develop in:
A) a live fetus
B) a dead fetus only
C) both in the live and dead fetuses
D) in premature neonates only

OBG-5.318.
Preparatory contractions:
A) propel the fetus along the osseous and soft tissue passage after the complete effacement of the cervix
B) are uterine contractions resulting in the effacement of the cervix
C) induce the separation and delivery of the placenta
D) are contractions occurring during the first days; of the puerperium
E) brief uterine contractions occurring at irregular intervals during
the last weeks of pregnancy

OBG-5.319.
Propulsive contractions:
A) propel the fetus along the osseous and soft tissue passage after
the complete effacement of the cervix
B) are uterine contractions resulting in the effacement of the
cervix
C) induce the separation and delivery of the placenta
D) are contractions occurring during the first days of the puerperium
E) brief uterine contractions occurring at irregular intervals during
the last weeks of pregnancy

OBG-5.320.
Placental contractions:
A) propel the fetus along the osseous and soft tissue passage after
the complete effacement of the cervix
B) are uterine contractions resulting in the effacement of the
cervix
C) induce the separation and delivery of the placenta
D) are contractions occurring during the first days of the puerperium
E) brief uterine contractions occurring at irregular intervals during
the last weeks of pregnancy

OBG-5.321.
The term "premature rupture of membranes" means:
A) that membranes rupture after the effacement of the cervix
B) that membranes rupture before the beginning of uterine contractions
C) that membranes rupture after the start of uterine contractions
but before the effacement of the cervix
D) that membranes rupture before the fetal head has engaged the
pelvic brim

OBG-5.322.
The term "early rupture of membranes" means:
A) that membranes rupture after the effacement of the cervix
B) that membranes rupture before the beginning of uterine contractions
C) that membranes rupture after the start of uterine contractions
but before the effacement of the cervix
D) that membranes rupture before the fetal head has engaged the
pelvic brim

OBG-5.323.
The term "late rupture of the membranes" means:
A) that membranes rupture after the effacement of the cervix
B) that membranes rupture before the beginning of uterine contractions
C) that membranes rupture after the start of uterine contractions
but before the effacement of the cervix
D) that membranes rupture before the fetal head is engaged the
pelvic rim

OBG-5.324.
During a normal, head-first delivery the governing point is the:
A) the anterior fontanelle
B) the posterior fontanelle
C) the bridge of the nose
D) the glabella
E) the margin of the scalp

**OBG-5.325.**
What is the average duration of the 1st stage of labor in nulliparous women?
A) 1-2 hours
B) 3-4 hours
C) 6-8 hours
D) 16-20 hours
E) 20-24 hours

**OBG-5.326.**
What is the average duration of the 1st stage of labor in multiparous women?
A) 1-2 hours
B) 4-6 hours
C) 6-8 hours
d) 8-10 hours
E) 10-12 hours

**OBG-5.327.**
The 2nd stage of labor starts at the time:
A) of rupture of fetal membranes
B) of full effacement of the cervix
C) when the largest segment of the fetal head passes through the pelvic brim
D) when A), (B) and (C) all have occurred
E) when the fetal head presents at the vaginal introitus

**OBG-5.328.**
How can it be decided that the largest segment of the fetal head has passed through the pelvic rim and is located in the pelvis?
A) when no segment of the fetal skull is palpated by Leopold’s 4th manoeuvre
B) when the fetal head has fitted into the concavity of the sacrum
C) when the governing path passes through one of the oblique diameters of the pelvis
D) when all the above criteria are met

**OBG-5.329.**
The average duration of the 2nd stage of labor in nulliparous women is:
A) 5-10 minutes
B) 30-50 minutes
C) 90-120 minutes
D) 120-300 minutes

**OBG-5.330.**
The average duration of the 2nd stage of labor in multiparous women is:
A) 20-30 minutes
B) 60-120 minutes
C) 120-180 minutes
D) 180-240 minutes
OBG-5.331.
In the case of head presentation and cephalic position delivery, which of the following describes the rotations of the fetal head correctly?
A) rotation, deflexion, flexion, external rotation
B) flexion, rotation, deflexion, external rotation
C) deflexion, rotation, flexion, external rotation
D) rotation, deflexion, flexion, external rotation
E) flexion, deflexion, rotation, external rotation

OBG-5.332.
In which section of the birth canal does the fetal skull perform its second rotation during cephalic position delivery?
A) at the pelvic brim
B) in the cavity of the pelvis
C) at the pelvic outlet
D) outside the vulva

OBG-5.333.
In which section of the birth canal does the fetal skull perform its third rotation during cephalic position delivery?
A) at the pelvic brim
B) in the cavity of the pelvis
C) at the pelvic outlet
D) outside the vulva

OBG-5.334.
In which section of the birth canal does the fetal skull perform its fourth rotation during cephalic position delivery?
A) at the pelvic brim
B) in the cavity of the pelvis
C) at the pelvic outlet
D) outside the vulva

OBG-5.335.
Which part of the fetal skull leans against the nether region of the symphysis?
A) the margin of the scalp
B) the occiput
C) the maxilla
D) the submental region
E) the glabella

OBG-5.336.
The signs of complete placental separation include:
A) ridging of the uterus
B) the umbilical cord is not retracted by pressure applied to the lower abdomen above the symphysis
C) the umbilical cord is not retracted after bearing down
D) all of the above suggest separation of the placenta
E) only answers (A) and (B) are true

OBG-5.337.
The Tsukhaloff-Kiistner's sign
A) is elicited by pressing the lower abdomen while observing the retraction of the umbilical cord
B) means that the uterus loses its globoid shape and becomes flattened and flaccid
C) means that the umbilical cord is not retracted after bearing down
D) means that the separated placenta is expressed from the uterine cavity like a seed of a plum by applying pressure to the uterine fundus
E) means rubbing the fundus in order to elicit uterine contraction

OBG-5.338.
Klein's sign
A) means that the umbilical cord is not retracted when pressure is applied to the lower abdomen above the symphysis
B) means that the uterus loses its globoid shape and becomes flattened and flaccid
C) means that the umbilical cord is not retracted after bearing down if the separation of the placenta is complete
D) means that the separated placenta is expressed from the uterine cavity like a seed of a plum by applying pressure to the uterine fundus

OBG-5.339.
Where can the upper pole of the uterine fundus be found after delivery of the placenta?
A) at the umbilical level
B) about 3 centimetres above the symphysis
C) about 6 centimetres above the symphysis
D) at the level of the symphysis
E) in the pelvic cavity

OBG-5.340.
Where can the upper pole of the uterine fundus be found on the first day of the puerpuerium?
A) about 3 centimetres above the umbilicus
B) at the umbilical level
C) about 6 centimetres above the symphysis
D) at the level of the symphysis
E) in the pelvic cavity

OBG-5.341.
Which of the following should be determined on admission to the delivery room?
A) the presenting part should be identified and its relative location to the pelvic brim should be determined
B) the integrity of the fetal membranes and the color of the amniotic fluid
C) fetal cardiac function and the dilation of the cervix should be assessed
D) uterine contractions should be evaluated
E) all of the above

OBG-5.342.
Which of the following features of expulsive contractions can be assessed by palpation?
A) frequency
B) duration
C) intensity
D) basal tone
E) all of the above

OBG-5.343.
Which of the following cannot be determined by vaginal examination performed during labor?
A) the degree of dilation and effacement of the cervix
B) the integrity of fetal membranes
C) neither the presenting part nor its position in the birth canal can be determined
D) the risk of fetal hypoxia
E) the location of the governing point and path

OBG-5.344.
In which of the following cases is vaginal examination indicated during labor?
A) if the progress of the presenting part is inadequate despite normal uterine activity
B) it is mandatory before obstetrical surgery
C) if abnormal engagement, presentation or position is suggested by the findings of rectal digital examination
D) all of the above

OBG-5.345.
The essentials of active management of the 3rd stage of labor include:
A) after the delivery of the fetus, the uterine fundus is rubbed in order to aid in the firm contraction of the uterus
B) after the delivery of the fetus, the placenta is removed by Crede's maneuver
C) an oxytocic drug is given immediately after the delivery of the fetus
D) after the delivery of the fetus, the separation and expulsion of the placenta is aided by exerting traction on the umbilical cord
E) the separation of the placenta should be patiently waited for, without rubbing or massaging the uterus

OBG-5.346.
The essentials of conservative management of the 3rd stage of labor include:
A) after the delivery of the fetus, the uterine fundus is rubbed to aid the firm contraction of the uterus
B) after the delivery of the fetus, the placenta is removed by Crede's maneuver
C) an oxytocic drug is given immediately after the delivery of the fetus
D) after the delivery of the fetus, the separation and expulsion of the placenta is aided by exerting traction on the umbilical cord
E) the separation of the placenta should be patiently waited for, without rubbing or massaging the uterus

OBG-5.347.
In which of the following cases should the delivered placenta be examined?
A) if the separation of the placenta was difficult
B) if the 3rd stage of labor was abnormal during a previous pregnancy
C) if the delivered placenta is fragmented
D) if there are multiple abortions in the past medical history
E) meticulous examination is mandatory in all cases

OBG-5.348.
Credé's maneuver:
A) means that the umbilical cord is not retracted when pressure
   is applied to the lower abdomen above the symphysis
B) means that the uterus loses its globoid shape and becomes
   flattened and flaccid
C) means that the umbilical cord is not retracted after bearing
   down if the separation of the placenta is complete
D) means that the separated placenta is expressed from the
   uterine cavity like a seed of a plum by applying pressure to the
   uterine fundus
E) means that rubbing the fundus in order to elicit uterine contraction

OBG-5.349.
Pain associated with labor is caused by:
A) the dilation of the cervix
B) traction of the uterine ligaments and the peritoneum
C) compression of blood vessels and associated ischemia of
   uterine tissues
D) all of the above
E) only answers and (B) are true

OBG-5.350.
The term "primary contraction failure" means:
A) that contractions are initially adequate but weaken as labor
   progresses
B) contractions are weak and ineffective from the beginning of labor
C) low basal tone of the uterine musculature
D) high basal tone of the uterine musculature

OBG-5.351.
The term "secondary contraction failure" means:
A) that contractions are adequate initially but weaken as labor
   progresses
B) contractions are weak and ineffective from the start of labor
C) low basal tone of the uterine musculature
D) high basal tone of the uterine musculature

OBG-5.352.
What are the types of contraction failure based on the basal tone of
the uterine musculature?
A) hypotonic
B) normotonic
C) hypertonic
D) all of the above
E) only answers (A) and (C) are true

OBG-5.353.
The term "normotonic contraction failure" means:
A) that the intensity of contractions gradually decreases during
   the progress of labor
B) that contractions are ineffective from the start of labor
C) that contractions occur infrequently, their amplitude is low
   just as the basal tone of the uterine musculature
D) that contractions occur infrequently, their amplitude is low
   but the basal tone of the uterine musculature is normal

OBG-5.354.
The term "hypotonic contraction failure" means:
A) that the intensity of contractions gradually decreases during
   the progress of labor
B) that contractions are ineffective from the start of labor
C) that contractions occur infrequently, their amplitude is low
   just as the basal tone of the uterine musculature
D) that contractions occur infrequently, their amplitude is low
   but the basal tone of the uterine musculature is normal

OBG-5.355.
The term "hypertonic contraction failure" means:
A) that the intensity of contractions gradually decreases during
   the progress of labor
B) that contractions are ineffective from the start of labor
C) that contractions occur infrequently, their amplitude is low
   just as the basal tone of the uterine musculature
D) that contractions occur infrequently, their amplitude is low
   but the basal tone of the uterine musculature is normal

OBG-5.356.
Therapy of hypotonic contraction failure includes the administration
of:
A) oxytocin infusion
B) corticosteroids
C) spasmolytics and ergotamine
D) gestogens

OBG-5.357.
Therapy of normotonic contraction failure includes the administration
of:
A) oxytocin infusion
B) corticosteroids
C) spasmolytics and ergotamine
D) gestogens

OBG-5.358.
The consequences of hypertonic contraction disorders include:
A) rupture of the uterus
B) fetal death
C) abnormal engagement of the presenting part
D) all of the above
E) only answers (A) and (B) are true

OBG-5.359.
Therapy of hyperkinetic contraction failure includes the administration of
A) spasmolytics
B) diazepam
C) b-mimetics
D) all of the above
E) only answers (A) and (B) are true

OBG-5.360.
The term "uterine tetany" means:
A) that the basal tone of the uterine musculature is high, contractions
   occur infrequently and their amplitude is low
B) the uterine musculature is in permanent, intense contraction;
   individual contractions cannot be distinguished
C) partial spastic contraction of the uterine musculature
D) spastic contraction of the cervix

OBG-5.361.
The term "uterine stricture" means:
A) that the basal tone of the uterine musculature is high, contractions
   occur infrequently and their amplitude is low
B) the uterine musculature is in permanent, intense contraction;
   individual contractions cannot be distinguished
C) partial spastic contraction of the uterine musculature
D) spastic contraction of the cervix

OBG-5.362.
The term "uterine trismus" means:
A) infrequent, high-amplitude contractions
B) permanent uterine contraction; individual contractions cannot
   be distinguished
C) partial spastic contraction of the uterine musculature
D) spastic contraction of the cervix

OBG-5.363.
Causes of fetopelvic disproportion include:
A) narrow pelvis
B) excessive fetal size
C) space-occupying lesion of the pelvic inlet or cavity
D) all of the above
E) only answers (A) and (C) are true

OBG-5.364.
Measured along the conjugata vera obstetrica, the narrowing of the
   diameter of the pelvic inlet in the first degree is:
A) 11-12 centimeters
B) 9-11 centimeters
C) 7-9 centimeters
D) less than 7 centimeters

OBG-5.365.
Measured along the conjugata vera obstetrica, the narrowing of the
   diameter of the pelvic inlet in the second degree is:
A) 11-12 centimeters
B) 9-11 centimeters
C) 7-9 centimeters
D) less than 7 centimeters

OBG-5.366.
Measured along the conjugata vera obstetrica, the narrowing of the
   diameter of the pelvic inlet in the third degree is:
A) 11-12 centimeters
B) 9-11 centimeters  
C) 7-9 centimeters  
D) less than 7 centimeters

OBG-5.367.  
The consequences of prolonged labor include:  
A) ascending uterine infection  
B) intrauterine asphyxia  
C) bleeding resulting from uterine atony  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.368.  
The prevalence of breech presentation in premature labor is:  
A) 1-2%  
B) 3-4%  
C) 10-12%  
D) 30-40%

OBG-5.369.  
The prevalence of breech presentation in all deliveries is:  
A) 1-2%  
B) 4-5%  
C) 15-20%  
D) 30-40%

OBG-5.370.  
The prevalence of breech presentation in multiple pregnancies is:  
A) 1-2%  
B) 3-5%  
C) 6-10%  
D) 20-25%

OBG-5.371.  
The prevalence of breech presentation before week 28 of gestation is:  
A) 1-2%  
B) 3-5%  
C) 30-40%  
D) 80-90%

OBG-5.372.  
The prevalence of breech presentation before week 32 of gestation is:  
A) 10%  
B) 30-40%  
C) 50-60%  
D) 70-80%

OBG-5.373.  
Which of the following is the presenting part in single feet presentation?  
A) the buttocks and one of the feet  
B) both knees  
C) one of the knees  
D) one of the legs  
E) both legs

OBG-5.374.
Which of the following is the presenting part in double feet presentation?
A) the buttocks and one of the feet
B) both knees
C) one of the knees
D) both legs
E) one of the legs

OBG-5.375.
Which of the following is the presenting part in simple breech presentation?
A) the buttocks
B) the buttocks and both feet
C) the buttocks and one of the feet
D) both knees
E) one of the knees

OBG-5.376.
Which of the following is the presenting part in complete breech-feet presentation?
A) the buttocks
B) the buttocks and both feet
C) the buttocks and one of the feet
D) both knees
E) one of the knees

OBG-5.377.
Which of the following is the presenting part in incomplete breech-feet presentation?
A) the buttocks
B) the buttocks and both feet
C) the buttocks and one of the feet
D) both knees
E) one of the knees

OBG-5.378.
Which of the following is the presenting part in double knee presentation?
A) the buttocks and both knees
B) both knees
C) one of the knees only
D) one of the knees and the contralateral foot

OBG-5.379.
Which of the following is the presenting part in single knee presentation?
A) the buttocks and both knees
B) both knees
C) one of the knees only
D) one of the knees and the contralateral foot

OBG-5.380.
Which of the following methods is appropriate for the detection of breech presentation?
A) vaginal examination
B) ultrasonography
C) radiography
D) fetal ECG
E) all of the above
OBG-5.381.
Compared to cephalic presentation delivery, which of the following represent an increased disadvantage during breech delivery?
A) the fetal head compresses the umbilical cord
B) the fetal head has no chance to mold to fit pelvic size
C) upward displacement of the fetal arms may cause fracture
D) all of the above
E) breech presentation carries no additional disadvantage over cephalic presentation delivery

OBG-5.382.
Where does venous and arterious blood mix in the fetal circulation?
A) the umbilical vein supplies the liver and coalesces to form the branches of the hepatic vein then joins the inferior vena cava
B) considered an extension of the umbilical vein the ductus venosus of Arandi joins the inferior vena cava
C) both the inferior and the superior vena cava empty into the right atrium and their blood is mixed there
D) the ductus arteriosus (Botallo's duct), a branch of the pulmonary artery, empties into the aorta

OBG-5.383.
By which postnatal week is the closure of the foramen ovale complete?
A) week 1-2
B) week 2-3
C) week 4-8
D) week 16-20
E) week 20-24

OBG-5.384.
How many days does the postnatal obliteration of the ductus venosus take?
A) it is obliterated immediately after birth, during the first breath
B) 1-2 days
C) 2-3 days
D) 5-10 days
E) 20-30 days

OBG-5.385.
What is the cause of the increased heat loss off neonates and their susceptibility to hypothermia?
A) the ratio of body surface area to body mass is significantly higher in neonates than in adults
B) the subcutaneous fat layer is relatively thin
C) the activity of the thermoregulation centre is unstable
D) all of the above have a role in the development of hypothermia
E) only answers (A) and (B) are true

OBG-5.386.
What is the percentage of fetal urine in the volume of amniotic fluid?
A) 1-2%
B) 2-4%
C) 20-40%
D) 60-70%
OBG-5.387.
What is the percentage of loss from birth weight in neonates?
A) 1-2%
B) 2-3%
C) 5-10%
D) 15-18%
E) 18-20%

OBG-5.388.
Which of the following characterizes neonatal thyroid function?
A) euthyrodism
B) hypothyroidism
C) hyperthyroidism

OBG-5.389.
What is the prevalence of congenital malformations detectable in neonatal age?
A) 0.1%
B) 0.5%
C) 1.0%
D) 3.0%
E) 10.0%

OBG-5.390.
The term "genopathy" means:
A) fetal damage sustained between week 13 of gestation and the time of birth
B) fetal damage sustained between weeks 2 and 13 of gestation
C) fetal damage sustained between the time of conception and day 14 of gestation
D) damage to the ovum before fertilization resulting in the development of various congenital malformations
E) fetal disease resulting from chromosomal or genetic abnormality

OBG-5.391.
The term "gametopathy" means:
A) fetal damage sustained between week 13 of gestation and the time of birth
B) fetal damage sustained between weeks.2 and 13 of gestation
C) fetal damage sustained between the time of conception and day 14 of gestation
D) damage to the ovum before fertilization resulting in the development of various congenital malformations
E) fetal disease resulting from chromosomal or genetic abnormality

OBG-5.392.
The term "blastopathy" means:
A) fetal damage sustained between week 13 of gestation and the time of birth
B) fetal damage sustained between weeks 2 and 13 of gestation
C) fetal damage sustained between the time of conception and day 14 of gestation
D) damage to the ovum before fertilization resulting in the development of various congenital malformations
E) fetal disease resulting from chromosomal or genetic abnormality
OBG-5.393.
The term "embryopathy" means:
A) fetal damage sustained between week 13 of gestation and the time of birth
B) fetal damage sustained between weeks 2 and 13 of gestation
C) fetal damage sustained between the time of conception and day 14 of gestation
D) damage to the ovum before fertilization resulting in the development of various congenital malformations

OBG-5.394.
The term "fetopathy" means:
A) fetal damage sustained between week 13 of gestation and the time of birth
B) fetal damage sustained between weeks 2 and 13 of gestation
C) fetal damage sustained between the time of conception and day 14 of gestation
D) damage to the ovum before fertilization resulting in the development of various congenital malformations

OBG-5.395.
In occult spina bifida:
A) defective closure of the vertebral column can be detected by palpation or radiography only
B) the contents of the vertebral canal protrude as a cystic tumor
C) the protruding sac is covered by the meninges and contains cerebrospinal fluid only
D) the protruding sac is covered by the meninges and contains both a portion of the spinal cord and cerebrospinal fluid

OBG-5.396.
In complete spina bifida (rachischisis):
A) defective closure of the vertebral column can be detected by palpation or radiography only
B) the contents of the vertebral canal protrude as a cystic tumor
C) the protruding sac is covered by the meninges and contains both a portion of the spinal cord and cerebrospinal fluid

OBG-5.397.
In meningocele:
A) defective closure of the vertebral column can be detected by radiography only
B) the contents of the vertebral canal protrude as a cystic tumor
C) the protruding sac is covered by the meninges and contains both a portion of the spinal cord and cerebrospinal fluid

OBG-5.398.
In myelomeningocele:
A) defective closure of the vertebral column can be detected by radiography only
B) the contents of the vertebral canal protrude as a cystic tumor
C) the protruding sac is covered by the meninges and contains both a portion of the spinal cord and cerebrospinal fluid

OBG-5.399.
Which of the following test results suggest the presence of neural
tube defects?
A) high α-fetoprotein level
B) ultrasonography
C) macrophages detected in the amniotic fluid
D) all of the above
E) only answers (A) and (B) are true

OBG-5.400.
What is the risk of the recurrence of the congenital malformations of the central nervous system?
A) 1:1
B) 1:2-10
C) 1:20
D) 1:30-60
E) 1:200

OBG-5.401.
What is the risk of the recurrence of the congenital malformations of the musculoskeletal system?
A) 1:5
B) 1:10-20
C) 1:50
D) 1:100
E) 1:200

OBG-5.402.
What is the risk of the recurrence of the congenital malformations of the cardiovascular system?
A) 1:1
B) 1:5
C) 1:50
D) 1:200
E) 1:500

OBG-5.403.
What is the risk of the recurrence of the congenital malformations of the gastrointestinal system?
A) 1:10
B) 1:20
C) 1:50
D) 1:100
E) 1:200

OBG-5.404.
Which of the following conditions should be considered if meconium ileus develops?
A) duodenal atresia
B) intestinal atresia  
C) cystic fibrosis  
D) phenylketonuria  
E) biliary atresia

OBG-5.406.
Congenital dysplasia of the hip is more prevalent in:  
A) boys  
B) girls  
C) there is no gender-specific difference

OBG-5.407.
The chromosomal abnormality characteristic of Down's syndrome includes:  
A) trisomy G21  
B) D/G translocation  
C) G/G translocation  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.408.
The chromosomal abnormality characteristic of Patau's syndrome includes:  
A) trisomy G21  
B) trisomy D  
C) D/G translocation  
D) G/G translocation  
E) 45,X0 caryotype

OBG-5.409.
What is the prevalence of congenital malformations after rubella infections occurring in the first trimester of pregnancy?  
A) 1%  
B) 5%  
C) 15-20%  
D) 50-60%  
E) 60-100%

OBG-5.410.
What kind of congenital malformation should be expected after rubella infections occurring on week 5 of gestation?  
A) cardiac malformations  
B) malformations of the inner ear  
C) cataract, microphthalmus  
D) intracerebral calcification  
E) dysplasia of long bones

OBG-5.411.
What kind of congenital malformation should be expected after rubella infections occurring on week 6 of gestation?  
A) cardiac malformations  
B) malformations of the inner ear  
C) cataract, microphthalmus  
D) intracerebral calcification  
E) dysplasia of long bones
OBG-5.412.
What kind of congenital malformation should be expected after rubella infections occurring between weeks 8 and 10 of gestation?
A) cardiac malformations
B) malformations -of the inner ear
C) cataract, microphthalmus'
D) intracerebral calcification
E) dysplasia of long bones

OBG-5.413.
Radiographic signs of congenital syphilis include:
A) epiphyseal closure
B) the long bones are shorter than normal
C) the epiphyseal plates are irregular due to chondroepiphysitis
D) angulated spine
E) gaping fontanelles

OBG-5.414.
What is the mortality rate of fetal listeriosis?
A) 0.1-1.0%
B) 1.0-5.0%
C) 20-30%
D) 60-80%
E) 100

OBG-5.415.
What is the prevalence of congenital malformations in neonates born to diabetic mothers?
A) 1%
B) 2%
C) 10%
D) 30%
E) 60%

OBG-5.416.
In Rh-isoimmunization, exhange transfusion is indicated if the serum bilirubin level is higher in the first 24 hours than:
A) 10 mmol/1
B) 20 mmol/1
C) 50 mmol/1
D) 137 mmol/1
E) 250 mmol/1

OBG-5.417.
What blood type is needed to perform exchange transfusion for Rhincompatibility?
A) "0" Rh-negative
B) group matched blood
C) ABO group matched, Rh negative-blood
D) ABO group matched, Rh positive-blood
E) "0" Rh-positive

OBG-5.418.
What is the time limit for effective anti-D IgG administration to Rhnegative women after delivery?
A) 1 day
B) 2 days
C) 3 days
D) 4 days
E) 5 days

OBG-5.419. In which of the following seasons is the incidence of neonatal hemorrhagic diatheses increased?
A) in summer
B) in autumn
C) in winter
D) in spring
E) there are no seasonal fluctuations in the incidence of neonatal hemorrhagic diatheses

OBG-5.420. Which of the following factors induces the differentiation of the gonads?
A) testosterone
B) estrogens
C) androgens produced by the adrenal cortex
D) sex chromosomes
E) pituitary hormones

OBG-5.421. Which of the following factors induces the development of the genital tract and external genitalia in male fetuses?
A) testosterone
B) the combined effect of estrogen and testosterone
C) sex chromosomes
D) pituitary hormones
E) neither hormonal nor chromosomal effects are needed as male sexual differentiation is always the default

OBG-5.422. Which of the following factors induces the development of the genital tract and external genitalia in female fetuses?
A) testosterone
B) the combined effect of estrogen and testosterone
C) sex chromosomes
D) pituitary hormones
E) neither hormonal nor chromosomal effects are needed as female sexual differentiation is always the default

OBG-5.423. Which of the following features of gender develop during intrauterine life in humans?
A) chromosomal and gonadal gender
B) gonadal and genital gender
C) chromosomal, gonadal and genital gender
D) chromosomal, gonadal, genital and somatic gender
E) gonadal, genital and somatic gender

OBG-5.424. Which of the following features of gender develop during extrauterine life in humans?
A) genital and somatic gender
B) gonadal, genital and somatic gender
C) genital, somatic and psychosexual gender
D) somatic and psychosexual gender

OBG-5.425.
Which of the following describe types of intersexuality?
A) ovarian and testicular
B) ovarian, testicular and ovotesticular
C) ovarian and conditions with gonadal dysgenesis
D) ovarian, testicular and conditions with gonadal dysgenesis
E) ovarian, testicular, ovotesticular and and conditions with gonadal dysgenesis

OBG-5.426.
Which of the following gonads can be found in a patient with true hermaphroditism?
A) the testes
B) the ovaries
C) both the ovaries and the testes
D) "streak" gonads
E) the testes and "streak" gonads

OBG-5.427.
The karyotype characteristic of true hermaphroditism is:
A) 46, XX
B) 46, XY
C) differet types of mosaicism
D) all of the above
E) trisomy 21

OBG-5.428.
Which of the following are characteristic of the hormonal status of patients with true hermaphroditism?
A) high gonadotropin levels; low estrogen and testosterone levels
B) low gonadotropin and estrogen levels
C) low gonadotropin and testosterone levels
D) low estrogen, testosterone and gonadotropin levels
E) the hormonal status is uncharacteristic

OBG-5.429.
Which of the following diagnostic methods is the most appropriate for the diagnosis of true hermaphroditism?
A) cytogenetic screening
B) inspection of the external genitalia
C) hormonal studies
D) laparoscopic examination of the internal genitalia
E) gonadal histology

OBG-5.430.
The karyotype characteristic of Klinefelter's syndrome is:
A) 46, XX
B) 46, XY
C) 45, XO
D) 47, XXY
E) 47, XYY

OBG-5.431. Which of the following gonads can be found in a patient with Klinefelter's syndrome?
A) the ovaries
B) the testes
C) ovotestis
D) a testis on one side and an ovary on the other ("streak" gonad)

OBG-5.432. The karyotype characteristic of testicular feminisation is:
A) 46, XX
B) 46, XY
C) 45, XO
D) 47, XXY
E) 47, XYY

OBG-5.433. Which of the following gonads can be found in a patient with Klinefelter's syndrome?
A) the ovaries
B) the testes
C) ovotestis
D) a testis on one side and an ovary on the other ("streak" gonad)

OBG-5.434. Which of the following disorders is likely if the female phenotype of the patient is associated with a male (46, XY) genotype?
A) gonadal dysgenesis
B) Klinefelter's syndrome
C) testicular feminization
D) adrenogenital syndrome
E) male pseudohermaphroditism

OBG-5.435. What is the phenotype of a patient with testicular feminization?
A) male
B) female
C) mixed

OBG-5.436. The karyotype characteristic of adrenogenital syndrome is:
A) 46, XX
B) 46, XY
C) 45, XO
D) 47, XXY
E) 47, XYY

OBG-5.437. Which of the following conditions is characterized by a karyotype of 46, XX?
A) Turner's syndrome
B) testicular feminization
C) adrenogenital syndrome
D) female pseudohermaphroditism
E) Klinefelter's syndrome

OBG-5.438.
Which of the following conditions is characterized by a karyotype of 46, XY?
A) Turner's syndrome
B) Klinefelter's syndrome
C) adrenogenital syndrome
D) testicular feminization
E) female pseudohermaphroditism

OBG-5.439.
Which of the following are characteristic of the hormonal status of patients with adrenogenital syndrome?
A) high 17-ketosteroid levels
B) high 17-ketosteroid and pregnantriol levels
C) high ACTH, 17-ketosteroid and pregnantriol levels
D) low estrogen and gonadotropin levels
E) high ACTH, 17-ketosteroid and pregnantriol levels, low estrogen and gonadotropin levels

OBG-5.440.
Which of the following gonads can be found in a patient with adrenogenital syndrome?
A) the ovaries
B) the testes
C) ovotestis
D) a testis on one side and an ovary on the other ("streak" gonad)

OBG-5.441.
Which of the following drugs would choose for the therapy of a patient with adrenogenital syndrome?
A) estrogens
B) gonadotropins
C) corticosteroids
D) ACTH
E) clomiphene citrate

OBG-5.442.
Which of the following preparations has a role in the etiology of the so-called iatrogenic female pseudohermaphroditism?
A) stilbenes
B) androgen hormones
C) norsteroids
D) all of the above
E) only answers (B) and (C) are true

OBG-5.443.
Which of the following methods is appropriate for the prenatal detection of adrenogenital syndrome?
A) the measurement of testosterone levels in maternal blood
B) the determination of maternal urinary 17-ketosteroid excretion
C) the measurement of testosterone 17-ketosteroid levels in the
amniotic fluid
D) the measurement of pregnandiol levels in the amniotic fluid
E) ultrasonography (reveals an enlarged clitoris and adrenal hyperplasia)

OBG-5.444.
The karyotype characteristic of Turners syndrome is:
A) 46, XX
B) 46, XY
C) 45, XO
D) 47, XXY
E) 47, XYY

OGB-5.445.
Which of the following gonads can be found in a patient with Turner's syndrome?
A) the ovaries
B) the testes
C) ovotestis
D) "streak" gonad

OGB-5.446.
Which of the following tests has the greatest importance in the diagnosis of Turner's syndrome?
A) the assessment of the appearance of the patient (phenotype)
B) karyotyping
C) measurement of estrogen and gonadotropin levels
D) macro- and microscopic examination of the gonads
E) measurement of corticosteroid levels

OGB-5.447.
The karyotype characteristic of pure gonadal dysgenesis is:
A) 46, XX
B) 46, XY
C) 45, XO
D) 47, XXY
E) 47, XYY

OGB-5.448.
Which of the following statements characterize the function of the hypothalamo-pituitary-ovarian system correctly in true precocious puberty?
A) menstruation is regular but ovulation is absent
B) regular ovulatory cycles similar to those in reproductive age
C) menstruation is usually absent, the appearance of sexual changes depends on hormonal effects
D) menstruation is irregular with prolonged episodes

OGB-5.449. Which of the following characterizes hypotahalamo-pituitary-ovarian function in precocious puberty?
A) regular function just as in women of reproductive age
B) amenorrhea is present in most cases, sexual maturation is the result of steroid hormones
C) high gonadotropin and low estrogen levels
D) high estrogen and low gonadotropin levels
E) hypotahalamus-pituitary-ovary axis is nonfunctional; the symptoms result from the effects of hormones produced by the tumor

OBG-5.450.
The most frequent cause of precocious puberty is:
A) hormone producing ovarian neoplasm
B) adrenal neoplasm
C) brain tumor
D) dysfunction of the adrenal cortex
E) hypothyroidism

OBG-5.451.
In delayed puberty, no signs of sexual maturation manifest themselves until the age of:
A) 12
B) 13
C) 14
D) 15
E) 16

OBG-5.452.
The development of the ossification center in the sesamoid bone of the pollex precedes the onset of the menarche by:
A) 0.5 year
B) 2 years
C) 5 years
D) 6 years
E) 8 years

OBG-5.453.
At what age does the ossification center of the sesamoid bone of the pollex appear?
A) at 2-3 years
B) at 11-12 years
C) at 15-16 years
D) at 16-18 years
E) at 18-20 years

OBG-5.454.
In puberty, secondary amenorrhoea is defined as the absence of menstruation for:
A) 1 month
B) 2 months
C) 3 months
D) 6 months
E) 12 months

OBG-5.455.
The diagnosis of juvenile metropathia means:
A) uterine bleeding in the first few days following birth, caused by maternal hormones
B) prolonged, copious pubertal bleeding occurring at irregular intervals
C) an absence of menstruation longer than 6 months in puberty
D) menstruation occurring in puberty, in association with lower
Which of the following therapeutic methods should be applied for controlling bleeding in juvenile metropathia?
A) curettage
B) hysteroscopy
C) hormonal (chemical) abrasion
D) suction curettage
E) no therapy is necessary, as this condition is transitory and self-limiting

Which of the following drugs is inappropriate for (chemical) hormonal abrasion?
A) ethinylestradiol (Mikrofollin)
B) norethisteron (Norcolut)
C) lynestrenol (Orgametril)
D) methylestrenolon (Orgasteron)
E) progesterone (Glanducorpin)

Pubertal dysmenorrhea is caused by:
A) the vigorous contractions of the uterine musculature and blood vessels
B) uterine hypoplasia and a narrow cervical canal
C) emotional factors, increased sensitivity to pain
D) all of the above
E) only answers (A) and (B) are true

Which of the following may cause vaginal discharge of non-infectious origin in puberty?
A) estrogen deficiency
B) psychogenic factors
C) sideropenia
D) all of the above
E) only answers (A) and (B) are true

Why does adnexitis develop only rarely in gonorrheal vulvovaginitis contracted in puberty?
A) the alkaline pH of the vagina (a consequence of low estrogen effect on the vaginal epithelium) does not facilitate bacterial growth
B) immature endocervical glands are unsuitable for bacterial colonization
C) symbiosis with Dbderlein's bacteria is a prerequisite to the growth of gonococci and due to the absence of estrogen effect, these bacteria are missing from the vaginal flora at this age
D) the course of the infection is the same in all age groups

Why does Trichomonas vulvovaginitis develop only rarely before pubes?
A) there is no occasion for infection to occur
B) the vaginal environment influenced by the effects estrogen is unfavourable for bacterial growth
C) the vaginal environment influenced by the lack of estrogen effects
is unfavourable for bacterial growth
D) symbiosis with Döderlein's bacteria is a prerequisite to the
growth of Trichomonas and these bacteria are missing from
the vaginal flora at this age

OBG-5.462.
In which of the following cases is amenorrhea considered normal?
A) in pregnancy and during lactation
B) in postmenopausal women
C) before the onset of menarche
D) in all of the above cases
E) only answers (A) and (B) are true

OBG-5.463.
How can the types of amenorrhea be classified according to
gonadotropin levels?
A) hypergonadotropic and hypergonadotropic
B) hypergonadotropic and normogonadotropic
C) hypergonadotropic, hypergonadotropic and normogonadotropic
D) normogonadotropic and hypogonadotropic

OBG-5.464.
How can the types of amenorrhea be classified according to prolactin
levels?
A) normoprolactinemic, hypoprolactinemic
B) normoprolactinemic, hyperprolactinemic
C) normoprolactinemic, hyperprolactinemic and
   hypoprolactinemic

OBG-5.465.
Which of the following is characteristic of the hormonal status in amenorrhea of ovarian origin?
A) low gonadotropin and estrogen levels
B) high gonadotropin and estrogen levels
C) high gonadotropin and low estrogen levels
D) low gonadotropin and high estrogen levels

OBG-5.466.
Which of the following is characteristic of the hormonal status in amenorrhea associated with hypopituitarism?
A) low gonadotropin and estrogen levels
B) high gonadotropin and estrogen levels
C) high gonadotropin and low estrogen levels
D) low gonadotropin and high estrogen levels

OBG-5.467.
What is the percentage of conditions of gonadal origin in primary
amenorrhea?
A) 0.1-1%
B) 2-3%
C) 30-40%
D) 80-90%
OBG-5.468.
The term "cryptomenorrhea" means:
A) an absence of menstruation for a period longer than 6 months
B) an absence of menstruation for a period longer than 3 months
C) the absence of menarche in a woman over 18 years of age
D) that blood and cellular debris can not be discharged due to obstruction caused by the atretic hymen
E) despite the presence of all relevant symptoms, menstruation is absent due to the destruction of the endometrium

OBG-5.469.
High gonadotropin levels suggest the dysfunction of the:
A) hypothalamus
B) pituitary gland
C) ovary
D) endometrium
E) high gonadotropin levels should be considered normal

OBG-5.470.
Permanently low gonadotropin levels suggest the dysfunction of the:
A) hypothalamus
B) pituitary gland
C) hypothalamic-pituitary system
D) ovary
E) uterus

OBG-5.471.
Low gonadotropin levels and normal hormone secretion by the ovaries on administration of gonadotropins suggest the dysfunction of the:
A) hypothalamus
B) pituitary gland
C) hypothalamic-pituitary system
D) ovary
E) uterus

OBG-5.472.
Which of the following drugs should be administered for hypothalamic-pituitary insufficiency?
A) clomiphene citrate
B) serum and chorionoc gonadotropin
C) human menopausal gonadotropin
D) all of the above
E) none of the above

OBG-5.473.
What is the likely cause of vaginal bleeding if the estrogen and estrogen-progesteron challenge tests as well as gonadotropin levels are normal and the absence of pregnancy is certain?
A) hypothalamic dysfunction
B) pituitary dysfunction
C) ovarian dysfunction
D) uterine dysfunction
E) dysregulatory dysfunction

OBG-5.474. The most common cause of secondary amenorrhea is:
A) hypothalamic dysfunction
B) ovarian dysfunction
C) uterine dysfunction
D) vaginal dysfunction
E) adrenal dysfunction

OBG-5.475.
An eosinophilic adenoma of the pituitary causes:
A) gigantism and acromegalia
B) Cushing's disease
C) hyperprolactinemia
D) Sheehan's syndrome
E) Cushing's syndrome

OBG-5.476.
A basophilic adenoma of the pituitary causes:
A) gigantism and acromegalia
B) Cushing's disease
C) hyperprolactinemia
D) Sheehan's syndrome
E) Cushing's syndrome

OBG-5.477.
A hyperprolactinoma of the pituitary causes:
A) gigantism and acromegalia
B) Cushing's disease
C) hyperprolactinemia
D) Sheehan's syndrome
E) Cushing's syndrome

OBG-5.478.
The Chiari-Frommel syndrome is a type of amenorrhea-galactorrhea syndrome that:
A) develops after delivery
B) is a consequence of neoplastic disease
C) is independent from pregnancy
D) is caused by extragenital factors
E) is caused by hyperthyroidism

OBG-5.479.
The Argonz-del Castillo syndrome is a type of amenorrhea-galactorrhea syndrome that:
A) develops after delivery
B) is a consequence of neoplastic disease
C) is independent from pregnancy
D) is caused by extragenital factors
E) is caused by hyperthyroidism

OBG-5.480.
The Forbes-Abright syndrome is a type of amenorrhea-galactorrhea syndrome that:
A) develops after delivery
B) is a consequence of neoplastic disease
C) is independent from pregnancy
D) is caused by extragenital factors
E) is caused by hyperthyroidism

OBG-5.481.
Which of the following drugs can not cause galactorrhea?
A) antithyroid agents
B) phenothiazides
C) oral contraceptives
D) bromocriptine
E) estrogens

OBG-5.482.
Which of the following conditions is not associated with galactorrhea?
A) hyperthyroidism
B) primary ovarian failure
C) renal disease
D) liver disease
E) unilateral ablation of the breast

OBG-5.483.
Case Study:
A patient with amenorrhea has normal gonadotropin and estrogen levels, the estrogen-progesterone challenge test is negative. The most likely cause of this condition is the dysfunction of the
A) hypothalamus
B) pituitary gland
C) ovary
D) uterus (endometrium)
E) vagina

OBG-5.484.
Which of the following is the most appropriate ovarian function testing in patients with low gonadotropin and estrogen levels?
A) estrogen challenge test
B) progesteron challenge test
C) gonadotropin challenge test
D) LH-RH challenge test
E) clomiphene challenge test

OBG-5.485.
Which of the following is characteristic for the hormonal status in the Stein-Leventhal syndrome?
A) high gonadotropin and low estrogen levels
B) normal gonadotropin and high estrogen levels
C) low gonadotropin and estrogen levels
D) normal gonadotropin and estrogen levels associated with high testosterone levels
E) there is no characteristic hormonal abnormality

OBG-5.486.
Which of the following drugs is appropriate for the treatment of the Stein-Leventhal syndrome?
A) clomiphene citrate
B) corticosteroids
C) bromocriptine  
D) all of the above  
E) only answers (A) and (B) are true

OBG-5.487.
Which of the following gynecologic endocrinopathies is treated by the wedge resection of the ovaries?  
A) anovulatory cycles  
B) Stein-Leventhal syndrome  
C) gonadotropin resistant ovary  
D) ovarian hypoplasia  
E) ovarian endometriosis

OBG-5.488.
Case Study:  
A woman with oligomenorrhea has regular menses, defers contraception, does not want to be pregnant and has a prolonged follicular phase with biphasic cycles. Which of the following is the appropriate therapy for this condition?  
A) ovulation induction  
B) menstruation precipitation by the administration of estrogen and progesterone  
C) ovulation induction by estrogen administration  
D) postponement of ovulation by estrogen administration  
E) no therapy is necessary

OBG-5.489.
Case Study:  
A woman with oligomenorrhea has regular menses, defers contraception, does not want to be pregnant and has a prolonged luteal phase. Which of the following is the appropriate therapy for this condition?  
A) ovulation induction  
B) menstruation precipitation by the administration of estrogen and progesterone  
C) ovulation induction by estrogen administration  
D) postponement of ovulation by estrogen administration  
E) no therapy is necessary

OBG-5.490.
Case Study:  
A woman with oligomenorrhea has regular menses with anovulatory cycles and fails to conceive? Which of the following is the appropriate therapy for this condition?  
A) ovulation induction  
B) menstruation precipitation by the administration of estrogen and progesterone  
C) ovulation induction by estrogen administration  
D) postponement of ovulation by estrogen administration  
E) no therapy is necessary

OBG-5.491.
Case Study:  
In a patient, polymenorrhea results in frequent bleeding and the development of anemia. The patient does not want to be pregnant. Which of the following is the appropriate therapy for this condition?  
A) ovulation induction
B) menstruation precipitation by the administration of estrogen and progesterone
C) postponement of ovulation by estrogen administration
D) cyclic administration of estrogen and progesterone
E) both (B) and D)

OBG-5.492.
Case Study:
A patient with polymenorrhea has regular, low-volume menses, she is not anemic, would like a child but fails to conceive. Which of the following is the appropriate therapy for this condition?
A) ovulation induction
B) menstruation precipitation by the administration of estrogen and progesterone
C) postponement of ovulation by estrogen administration
D) cyclic administration of estrogen and progesterone for 2-3 months
E) no therapy is necessary, this is a self-limiting condition

OBG-5.493.
In dysmenorrhea:
A) abdominal cramping is the leading symptom, seldom associated with nausea and vomiting, etc.
B) nausea and vomiting, etc. are the primary symptoms, not abdominal cramps
C) the symptoms develop after the first delivery
D) symptoms are present from the time of the menarche
E) initially, menstruation is normal becomes associated with cramps subsequently

OBG-5.494.
In secondary dysmenorrhea:
A) abdominal cramping is the leading symptom, seldom associated with nausea and vomiting, etc.
B) nausea and malaise are the primary symptoms, not abdominal cramps
C) the symptoms develop after the first delivery
D) cramps and other symptoms are present from the time of the menarche
E) initially, menstruation is normal becomes associated with cramps and other symptoms subsequently

OBG-5.495.
Which of the following describes the characteristic features of hirsutism correctly?
A) body hair is more prominent but in the areas normally hairy in females
B) masculine growth of body hair is observed all over the body
C) excessive growth of body hair is characteristic in areas normally covered by lanuginose hair only
D) excessive, masculine growth of body hair is associated with deepening of the voice and defeminization
E) excessive growth of body hair due to neoplastic disease and associated with the enlargement of the clitoris

OBG-5.496.
Which of the following describes the characteristic features of
hypertrichosis correctly?
A) body hair is more prominent but in the areas normally hairy in females
B) masculine growth of body hair is observed all over the body
C) excessive growth of body hair is characteristic in areas normally covered by lanuginose hair only
D) excessive, masculine growth of body hair is associated with deepening of the voice and defeminization
E) excessive growth of body hair due to neoplastic disease and associated with the enlargement of the clitoris

OBG-5.497.
Which of the following describes the characteristic features of virilism (masculinization) correctly?
A) body hair is more prominent but in the areas normally hairy in females
B) masculine growth of body hair is observed all over the body
C) excessive growth of body hair is characteristic in areas normally covered by lanuginose hair only
D) excessive, masculine growth of body hair is associated with deepening of the voice and defeminization
E) excessive growth of body hair due to neoplastic disease and associated with the enlargement of the clitoris

OBG-5.498.
Which of the following describes the characteristic features of sterility correctly?
A) the failure to conceive after 2 years of unprotected intercourse
B) pregnancy develops but terminates before normal delivery
C) intercourse is not associated with sexual pleasure and does not elicit orgasm
D) intercourse is impossible due to anatomical abnormalities of the vagina
E) the failure to conceive after a year of unprotected intercourse

OBG-5.499.
Which of the following describes the characteristic features of infertility correctly?
A) the failure to conceive after 2 years of unprotected intercourse
B) pregnancy develops but terminates before normal delivery
C) intercourse is not associated with sexual pleasure and does not elicit orgasm
D) intercourse is impossible due to anatomical abnormalities of the vagina
E) the failure to conceive after a year of unprotected intercourse

OBG-5.500.
The incidence of sterility is:
A) 1-2%
B) 3-4%
C) 8-10%
D) 20-25%
E) 25-30%

OBG-5.501.
The incidence of infertility is:
A) 1-2%
B) 3-4%
C) 5-6%
D) 20-25%
E) 30-40%

OBG-5.502.
What is the percentage of infertile marriages due to female factors?
A) 3-5%
B) 5-10%
C) 15-20%
D) 40-50%
E) 80-90%

OBG-5.503.
What is the percentage of infertile marriages due to male factors?
A) 3-5%
B) 5-10%
C) 10-15%
D) 35-40%
E) 80-90%

OBG-5.504.
What is the percentage of infertile marriages where no reproductive abnormality can be detected?
A) 1-2%
B) 10-20%
C) 40-50%
D) 50-60%
E) 60-80%

OBG-5.505.
Which of the following conditions causes permanent infertility?
A) testicular feminization
B) Turner's syndrome
C) uterine aplasia
D) chronic aspecific perisalpingoophoritis
E) pure gonad dysgenesis

OBG-5.506.
What is the percentage of female sterility due to tubal obliteration?
A) 1-2%
B) 2-5%
C) 30-40%
D) 70-80%
E) 80-90%

OBG-5.507.
In which phase of the menstrual cycle should hysterosalpingography be performed?
A) in the early follicular phase
B) at the time of ovulation
C) in the early secretory phase
D) in the late secretory phase

OBG-5.508.
Which of the following methods is appropriate for the detection of uterine malformations?
A) hysterosalpingography
B) hysteroscopy
C) laparotomy (laparoscopy)
D) all of the above
E) only answers (A) and (B) are true

OBG-5.509.
Which of the following hormones is responsible for the rise in basal body temperature by acting on the thermoregulatory centre?
A) estriol
B) progesterone
C) pregnandiol
D) gonadotropins
E) estradiol

OBG-5.510.
Which of the following diagnostic methods is appropriate for the detection of ovulation?
A) cytology for the assessment of hormonal effects
B) basal body temperature measurement
C) histology of the endometrium
D) measurement of pregnandiol levels
E) all of the above

OBG-5.511.
A specimen is taken from the endometrium during the premenstrual period, on day 26 of the cycle for histology. Which of the following changes suggests the occurrence of ovulation?
A) proliferation
B) secretory phase
C) atypical proliferation
D) cystic and adenomatous endometrial hyperplasia
E) atrophy

OBG-5.512.
When should curettage and endometrial histology be performed in order to verify the occurrence of ovulation?
A) at the time of menstruation
B) on the week following menstruation
C) at midcycle
D) on the week preceding menstruation
E) this method is not applicable in the diagnostics of the menstrual cycle

OBG-5.513.
The postcoital test reveals absence of sperm in the cervical mucus and the presence of numerous, motile sperm in the vaginal fluid. Which of the following is the correct interpretation of this finding?
A) the husband is fertile, the receptivity of the cervical mucus is good
B) the husband is infertile
C) the receptivity of the cervical mucus for sperm is poor
D) the woman has colpitis and the resulting intravaginal pH change has altered the motility of the sperm
E) the woman has cervicitis

OBG-5.514.
The postcoital test reveals the absence of motile sperm both in the fornix and in the cervical mucus. Which of the following is the correct interpretation of this finding?
A) the husband is fertile, the receptivity of the cervical mucus is extremely good
B) the husband is probably infertile
C) the receptivity of the cervical mucus for sperm is poor
D) the woman has colpitis and the resulting intravaginal pH change has altered the motility of the sperm
E) the woman has cervicitis

OBG-5.515.
The postcoital test reveals the absence of sperm in the vaginal fluid, however there are numerous, motile sperm in the cervical mucus. Which of the following is the correct interpretation of this finding?
A) the husband is fertile, the receptivity of the cervical mucus is good
B) the husband is infertile
C) the receptivity of the cervical mucus for sperm is poor
D) the woman has colpitis and the resulting intravaginal pH change has altered the motility of the sperm
E) the woman has cervicitis

OBG-5.516.
Which of the following drugs is not effective for ovulation induction?
A) human menopausal gonadotropin
B) clomiphene citrate
C) LH-releasing hormone
D) synthetic oxytocin
E) human pituitary gonadotropin

OBG-5.517.
The adverse effects of therapy with clomiphene citrate include:
A) the formation of ovarian cysts
B) Meigs syndrome
C) multiple pregnancies
D) all of the above
E) only answers (A) and (C) are true

OBG-5.518.
Which of the following methods is appropriate for the detection of the anatomical abnormalities of the uterus and Fallopian tubes?
A) hysterosalpingography
B) ultrasonography
C) laparotomy (laparoscopy)
D) all of the above
E) only answers (A) and (C) are true

OBG-5.519.
The term "birth rate" means:
A) the number of live births per 100 inhabitants
B) the number of live births per 1,000 inhabitants
C) the number of live births per 10,000 inhabitants
D) the percentage of pregnancies ending with delivery
E) the percentage of pregnancies where live, healthy neonates are delivered

OBG-5.520.
The optimal birth rate is:
A) 2% /100
B) 5% /100
C) 16% /100
D) 25% /100
E) 30% /100

OBG-5.521.
How much is the Pearl-index of combined contraceptive preparations?
A) 0.2-1.5
B) 2.0-8.0
C) 0.8-8.0
D) 6.0-28.0
E) 6.0-32.0

OBG-5.522.
How much is the Pearl-index of the minipill?
A) 0.2-1.5
B) 2.0-8.0
C) 0.8-18.0
D) 2.4-28.0
E) 15.0-50.0

OBG-5.523.
How much is the Pearl-index of intrauterine devices?
A) 0.2-1.5
B) 2.0-8.0
C) 0.8-18.0
D) 2.4-28.0
E) 15.0-50.0

OBG-5.524.
How much is the Pearl-index of the condom?
A) 0.2-1.5
B) 2.0-8.0
C) 0.8-8.0
D) 6.0-28.0
E) 15.0-50.0

OBG-5.525.
How much is the Pearl-index of vaginal diaphragms (pessaries)?
A) 0.2-1.5
B) 2.0-8.0
C) 0.8-8.0
D) 6.0-28.0
E) 6.0-32.0

OBG-5.526.
Which of the following is the correct interpretation of the Pearl-index?
A) this index yields the percentage efficacy of contraceptive methods
B) represents the percentage prevalence of conception over a year among women using contraceptive methods
C) the frequency of conception in women using permanent contraception
D) the difference between the fertility rates of women using and of those not using contraception
E) the ratio of abortions and deliveries in a particular individual

OBG-5.527.
According to the Pearl-index, which of the following is the most effective contraceptive method?
A) intrauterine device
B) hormonal contraceptives
C) the condom
D) vaginal tablets and capsules
E) the calendar rhythm method (Ogino-Knaus method)

OBG-5.528.
The effects of combined contraceptives include:
A) ovulation inhibition
B) alteration of tubal motility
C) dissociation between the stroma and glands of the endometrium
D) reduction of sperm penetration
E) all of the above

OBG-5.529.
What are the components of combined oral contraceptive preparations?
A) estrogen only
B) progesterone only
C) all tablets contain both estrogen and progesterone
D) the first 14 pills contain estrogen, the next 7 pills contain estrogen and progesterone

OBG-5.530.
What are the components of sequential oral contraceptive preparations?
A) estrogen only
B) progesterone only
C) all tablets contain both estrogen and progesterone
D) the first 14 pills contain estrogen, the next 7 pills contain estrogen and progesterone

OBG-5.531.
What are the components of the "minipill"?
A) estrogen only
B) progesterone only
C) all tablets contain both estrogen and progesterone in small doses
D) the first 14 pills contain estrogen, the next 7 pills contain estrogen and progesterone

OBG-5.532.
Which of the following Hungarian preparations is a combined contraceptive?
A) Rigeuidon
B) Tri-Regol
C) Ovidon
D) all of the above
OBG-5.533.
Which of the following is a minipill contraceptive containing progesterone only?
A) Tri-Regol  
B) Marvelon  
C) Ovidon  
D) Rigevidon  
E) Continum

OBG-5.534.
How does the menses change under the effect of combined oral contraceptives?
A) it becomes more copious  
B) it becomes reduced in volume  
C) it remains unchanged  
D) it becomes reduced in volume, and the intensity of cramping is also reduced  
E) the discharge of menstrual secretions becomes prolonged

OBG-5.535.
What should be done if breakthrough bleeding occurs during the use of oral contraceptives?
A) nothing, as this condition resolves spontaneously  
B) the patient should suspend the use of contraceptives for 7 days then restart taking the tablets  
C) the number of tablets taken should be increased; perhaps the actual regimen should be supplemented by an estrogen preparation  
D) switch to another contraceptive preparation  
E) oral contraceptives should be stopped and an IUD should be inserted

OBG-5.536.
The most appropriate protocol for oral contraceptive use is:
A) to always start from the first day of menstruation and continue taking the tablets for the next 21 days  
B) 21 days on tablets followed by a 7-day pause  
C) the tablets should be taken continuously, without interruption  
D) depending on the length of the menstrual cycle, 18-35 days on the pill followed by a 7-day pause  
E) the tablets should be taken according to the calendar, from the first day of the month to the 21st day

OBG-5.537.
The most appropriate protocol for the minipill is:
A) to start always from the first day of menstruation and continue taking the tablets for the next 21 days  
B) 21 days on tablets followed by a 7-day pause  
C) the tablets should be taken continuously, without interruption  
D) the tablets should be taken according to the calendar, from the first day of the month to the 21st day

OBG-5.538.
The contraindications to oral contraceptive use include:
A) thromboembolism  
B) liver disease  
C) endocrine disorders
D) all of the above
E) only answers (A) and (B) are true

**OBG-5.539.**
The **contraindications** to oral contraceptive use include:
A) malignant neoplasms of the breast or the genitals
B) diabetes
C) hypertension and advanced renal disease
D) pregnancy
E) all of the above

**OBG-5.540.**
Which of the following contraceptives are appropriate for nursing mothers?
A) ethinyl estradiol / norgestrel
B) ethinyl estradiol/ desogestrel
C) ethynodiol diacetate
D) none of the above

**OBG-5.541.**
Intrauterine devices:
A) reduce the motility of the uterine tubes
B) prevent the implantation of the ovum
C) enhance uterine contractions and promote the rejection of the implanted ovum
D) reduce the penetration of the cervical mucus by sperm

**OBG-5.542.**
Should the IUD be considered an abortive agent considering its mechanism of action?
A) yes because it precludes the implantation of the ovum
B) no because pregnancy is considered to start at the time of implantation
C) no because it exerts its action by precluding conception

**OBG-5.543.**
The efficacy of intrauterine devices can be enhanced by:
A) covering the device with a copper layer
B) covering the device with a zinc layer
C) perparing the device with progestogenic hormones
D) all of the above
E) only answers (A) and (B) are true

**OBG-5.544.**
The adverse effects of intrauterine devices include:
A) bleeding
B) pain
C) pelvic inflammatory disease
D) all of the above
E) only answers (A) and (C) are true

**OBG-5.545.**
What type of contraception is appropriate for nulliparous women?
A) oral contraceptives
B) intrauterine device
C) conventional methods
D) only answers (A) and (C) are true
E) there is no effective method

OBG-5.546.
Are IUDs appropriate for girls under 18 years of age?
A) yes, because oral contraceptives are contraindicated at this age
B) yes, if oral contraceptives are contraindicated
C) yes, with parental consent
D) no
E) yes, if the cervical canal is wide enough to permit insertion

OBG-5.547.
Which of the following belongs to the requirements for inserting IUDs?
A) all licensed family practitioners are allowed to insert IUDs
B) all specialists are allowed to insert IUDs at a polyclinic
C) IUDs should be inserted only at the hospital
D) IUDs should be inserted by the professionals at university clinic gynecologic care and consulting services
E) family and gynecologic care services with an institutional background are allowed to insert IUDs

OBG-5.548.
In women of reproductive age, the optimal period for inserting an IUD is:
A) the first day of menstruation
B) between days 4 and 6 of the menses
C) 2-3 days before the expected time of menstruation
D) the IUD can be inserted at any time

OBG-5.549.
When should the IUD be inserted during lactation?
A) only if regular menstruation has already returned
B) if at least one menstruation has occurred since delivery
C) 6-8 weeks after the delivery, if the possibility of pregnancy can be excluded
D) only 5 months after the delivery
E) the use of IUDs is contraindicated in the period of lactation

OBG-5.550.
Contraindications to IUD insertion include:
A) pelvic inflammatory disease
B) genital malignancies
C) pregnancy
D) all of the above
E) only answers (A) and (C) are true

OBG-5.551.
Which of the following cases represents a possible medical indication for the interruption of the pregnancy? Pregnancies conceived under the effect of:
A) ethinyl estradiol / norgestrel (Ovidon)
B) ethinyl estradiol / norgestrel (Marvelon)
C) IUD
D) experimental preparations
E) only answers (C) and (D) are true
Less traumatic methods for cervical dilation include:
A) the insertion of Laminaria into the cervical canal
B) the injection of Rivanol solution into the uterine cavity
C) the intracervical administration of prostaglandins
D) all of the above
E) only answers (B) and (C) are true

The onset of menopause is usually expected between:
A) 42-45 years-old
B) 44-46 years-old
C) 46-48 years-old
D) 48-52 years-old
E) 52-55 years-old

The onset of menopause is premature before the age of:
A) 40 years-old
B) 43 years-old
C) 50 years-old
D) 52 years-old
E) 55 years-old

The menopause is delayed if uterine bleeding due to the cyclic changes of ovarian hormones occurs before the age of:
A) 45 years-old
B) 48 years-old
C) 50 years-old
D) 52 years-old
E) 55 years-old

Characteristic phenomena in premenopausal women include:
A) metrorrhagia
B) anovulatory cycles
C) reduction and cessation of fertility
D) all of the above
E) atrophy of the genitals

Characteristic phenomena in postmenopausal women include:
A) neurovegetative symptoms referred to as the climacteric syndrome
B) atrophic changes of the genitals
C) psychic disorders
D) all of the above
E) anovulatory cycles

Case Study:
A 45-year-old female presents with metrorrhagia. The proper therapy of this condition includes:
A) no intervention is necessary as failing ovarian function normally results in metrorrhagia at this age
B) oxytocic agents should be administered to control bleeding
C) chemical curettage by hormone therapy, followed by cyclic administration of estrogen and progesterone
D) fractional curettage should be performed to exclude malignancy
E) hysterectomy is indicated as the incidence of uterine malignancies is extremely high at this age

OBG-5.559.
Which of the following hormones has the greatest importance in the atrophization of the genitals in climacteric women?
A) estrogens
B) progesterone
C) androgens
D) follicle stimulating hormone
E) luteinizing hormone

OBG-5.560.
Characteristic histologic features of endometrial tissue removed because of metrorrhagia in the premenopausal period include:
A) secretory changes
B) proliferation
C) cystic adenomatous hyperplasia
D) atrophic changes
E) inactivity

OBG-5.561.
Characteristic histologic features of endometrial tissue removed because of metrorrhagia in the premenopausal period include:
A) proliferation
B) cystic adenomatous hyperplasia
C) inactivity or atrophic changes
D) endometrial carcinoma
E) secretory changes

OBG-5.562.
Which of the following drugs is the most appropriate for the treatment of climacteric symptoms (e.g. hot flushes, perspiration, palpitation, etc.)?
A) conjugated estrogens
B) gestogens
C) synthetic estrogens
D) androgens
E) the combination of androgens and estrogens

OBG-5.563.
Which of the following estrogens is not suitable for the treatment of climacteric symptoms (e.g. hot flushes, perspiration, palpitation, etc.)?
A) natural estrogens
B) stilbene (tolulyene) derivatives
C) conjugated estrogens
D) ethinyl estradiol
E) mestranol

OBG-5.564.
Which of the following estrogen preparations acts on the vaginal epithelium primarily?
A) ethinyl estradiol (Mikrofollin)
B) estradiol (Akrofollin)
C) estriol (Ovestin)
D) dienestrol (Dienoestrol)

OBG-5.565.
**Case Study:**
A 25-year-old woman with premature menopause would like to have a child. Which of the following would you recommend?
A) pregnancy would be feasible by in vitro fertilization
B) therapy with clomiphene citrate as this is successful in most cases
C) Pergonal (FSH+LH) therapy is the only chance
D) there is no remedy for this condition as it represents irreversible infertility
E) laparotomy and wedge resection of the ovaries

OBG-5.566.
Which of the following extragenital disorders should be considered in recurrent vulvitis?
A) intestinal helminthiasis
B) diabetes mellitus
C) pernicious anemia
D) Hodgkin's disease
E) all of the above
F) only answers (A) and (B) are true

OBG-5.567.
Which of the following tests should be performed to identify the etiology of vulvitis?
A) a search for eggs
B) the staining and microscopic study of vulvar discharge
C) a measurement of blood glucose level and a peripheral blood count
D) all of the above
E) only answers (A) and (B) are true

OBG-5.568.
Which of the following diseases may cause vulvar pruritic vulvitis?
A) pernicious anemia
B) leukemia
C) Hodgkin's disease
D) all of the above
E) pancreatitis

OBG-5.569.
In which period of the day does intestinal helminthiasis cause pruritus?
A) in the morning
B) in the afternoon
C) in the evening
D) at night

OBG-5.570.
Which of the following extragenital diseases should be considered in stubborn vulvar folliculitis?
A) inflammatory renal disease
B) chronic cystitis
C) diabetes mellitus
D) urethritis
E) intestinal helminthiasis

OBG-5.571. Which of the following infections is associated with vaginal discharge and itching?
A) gonococcal infection
B) Trichomonas vaginalis infection
C) fungal infections
D) bacterial infections
E) viral infections

OBG-5.572. Which of the following is the pathogen of condylomata acuminata (moist warts)?
A) bacteria
B) viruses
C) fungi
D) Trichomonas vaginalis
E) Treponema pallidum

OBG-5.573. Which of the following is the appropriate treatment for condylomata acuminata?
A) electrocautery
B) surgical extirpation
C) topical application of 20% podophyllin
D) topical application of (Vagomaly) polymethylen meta-cresolsulphonic acid
E) all of the above

OBG-5.574. Discharge due to hormonal effects occurs most frequently in/during:
A) neonatal age
B) puberty, the postmenopausal period and in elderly women
C) the puerperium
D) puberty
E) the use of oral contraceptives

OBG-5.575. Characteristic macroscopic features of vaginal discharge in Trichomonas vaginalis infection include:
A) thin and milky discharge
B) frothy, greenish and purulent discharge
C) the vaginal wall is covered by easily removable, whitefish-grey material
D) thin, whitefish-grey discharge from the cervix
E) there are no characteristic macroscopic features

OBG-5.576. Characteristic macroscopic features of vaginal discharge in fungal infections include:
A) thin and milky discharge
B) frothy, greenish and purulent discharge
C) the vaginal wall is covered by easily removable, whitefish-grey material
D) thin, whitefish-grey discharge from the cervix
E) there are no characteristic macroscopic features
OBG-5.577.
Which of the following drugs is used for the treatment of vaginal trichomoniasis?
A) metronidazol (Klion) tablets and vaginal suppositories
B) natamycine (Pimafucin) vaginal tablets
C) clotrimazole (Canesten) tablets
D) all of the above
E) only answers (A) and (B) are true

OBG-5.578.
Which of the following lesions is considered a precancerous stage of chorionic carcinoma?
A) cystic adenomatous hyperplasia of the endometrium
B) leukoplakia of the portio vaginalis of the cervix
C) hydatidiform mole
D) chronic cervicitis
E) placenta residues

OBG-5.579.
Which of the following hormones is secreted by chorionic carcinomas?
A) estrogen
B) progesterone
C) androgens
D) human chorionic gonadotropin
E) follicle stimulating hormone

OBG-5.580.
Which of the following gynecological malignancies are associated with the positivity of pregnancy tests?
A) endometrial carcinoma
B) cervical carcinoma
C) chorionic carcinoma
D) hormonally active ovarian tumors
E) ovarian cystadenocarcinomas

OBG-5.581.
Which of the following obstetrical events are associated with the subsequent development of chorionic carcinoma most frequently?
A) delivery
B) abortion
C) hydatidiform mole
D) ectopic pregnancy
E) missed abortion

OBG-5.582.
Which of the following cyst types can develop in chorionic carcinoma?
A) follicular cysts
B) hemorrhagic corpus luteum cysts
C) lutein cysts
D) endometriotic (chocolate) cysts
E) polycystic degeneration

OBG-5.583.
Which of the following tests is the most reliable for diagnosing chorionic carcinoma at the earliest possible time?
A) Rana reaction  
B) Gravimun test  
C) Menotest  
D) detection of hCG b-subunits by RIA  
E) Ascheim-Zondek reaction

OBG-5.584. Which of the following organs is involved in the metastatic spread of choriocarcinoma most frequently?
A) the vagina  
B) the lung and brain  
C) the liver and the kidneys  
D) all of the above  
E) the vagina, lung and brain only

OBG-5.585. Suspected liver metastases of choriocarcinoma are best detected by:
A) taking anteroposterior radiographs  
B) tomography  
C) scintigraphy  
D) ultrasonography  
E) the measurement of the hCG level

OBG-5.586. Tumor regression induced by the cytotoxic chemotherapy of choriocarcinoma is best evaluated by:  
A) the measurement of serum LH levels  
B) the measurement of serum FSH levels  
C) the measurement of serum hCG levels  
D) all of the above  
E) only answers (B) and (C) are true

OBG-5.587. Cytotoxic chemotherapy gives the best results in the therapy of:
A) ovarian cystadenocarcinoma  
B) endometrial adenocarcinoma  
C) mesonephroid tumors  
D) choriocarcinoma  
E) sarcoma

OBG-5.588. Which of the following conditions is not associated with the development of luteinized unruptured ovarian follicles ("trapped oocytes")?
A) hydatidiform mole  
B) choriocarcinoma  
C) FSH+LH therapy  
D) therapy with clomiphene citrate  
E) bromocriptine therapy

OBG-5.589. Which of the following is a complication of benign ovarian tumors?
A) torsion of the pedicle of the cyst  
B) infection, abscess formation  
C) malignant transformation  
D) all of the above  
E) benign ovarian tumors cause no complications
OBG-5.590.
Pseudomyxoma peritonei is caused by the spillage of the contents of a ruptured:
A) benign ovarian fibroepithelioma
B) mucinous glandular cyst
C) common serous cyst
D) papillary serous cyst
E) corpus luteum cyst

OBG-5.591.
Characteristic signs of Meigs' syndrome include:
A) pleural effusion
B) ascites
C) ovarian fibromyoma
D) all of the above
E) bilateral, smooth and firm mobile ovarian tumors

OBG-5.592.
Which of the following ovarian tumors cause Meigs' syndrome?
A) fibromyoma
B) dysgerminoma
C) cystic adenocarcinoma
D) granulosa cell tumor
E) sarcoma

OBG-5.593.
What is the percentage of primary tumors of all ovarian carcinomas?
A) 1-2%
B) 3-5%
C) 10-20%
D) 20-30%
E) 50-60%

OBG-5.594.
What is the percentage of secondary tumors of all ovarian carcinomas?
A) 1-2%
B) 3-5%
C) 30-40%
D) 60-70%
E) 80-90%

OBG-5.595.
What is the percentage of metastatic tumors of all ovarian carcinomas?
A) 10-20%
B) 30-40%
C) 40-50%
D) 60-70%
E) 70-90%

OBG-5.596.
Stage I ovarian carcinoma neoplastic disease involves:
A) one of the ovaries and fallopian tubes only
B) one or both ovaries
C) one or both ovaries and the pelvis
D) one or both ovaries and various intraabdominal organs
E) one or both ovaries and gives metastases to distant sites

OBG-5.597.
Stage II ovarian carcinoma neoplastic disease involves:
A) one of the ovaries and fallopian tubes only
B) one or both ovaries
C) one or both ovaries and the pelvis
D) one or both ovaries and various intraabdominal organs
E) one or both ovaries and gives metastases to distant sites

OBG-5.598.
Stage III ovarian carcinoma neoplastic disease involves:
A) one of the ovaries and fallopian tubes only
B) one or both ovaries
C) one or both ovaries and the pelvis
D) one or both ovaries and various intraabdominal organs
E) one or both ovaries and gives metastases to distant sites

OBG-5.599.
Stage IV ovarian carcinoma neoplastic disease involves:
A) one of the ovaries and fallopian tubes only
B) one or both ovaries
C) one or both ovaries and the pelvis
D) one or both ovaries and various intraabdominal organs
E) one or both ovaries and gives metastases to distant sites

OBG-5.600.
Carcinoma of the ovary is most frequently treated by:
A) cytotoxic chemotherapy
B) surgery only
C) surgery followed by irradiation
D) surgery followed by cytotoxic chemotherapy
E) irradiation only

OBG-5.601.
In metastatic tumors of the ovary, the primary neoplasm is found most frequently in the:
A) breast
B) pancreas
C) gastrointestinal tract
D) lung
E) trachea

OBG-5.602.
Dysgerminoma of the ovary develops from:
A) cells of the ovarian stroma
B) hilar Leydig-cells of the ovary
C) undifferentiated cells of the germinal epithelium
D) granulosa cells of atretic follicles
E) undifferentiated chorionic cells

OBG-5.603.
Ovarian calcification is visible on anteroposterior radiographs of the pelvis in:
A) endometriosis of the ovary
B) parovarian cyst
C) cystic ovarian adenocarcinoma  
D) dermoid tumors of the ovary  
E) sarcoma

OBG-5.604. Granulosa cell tumors secrete:  
A) estrogen  
B) progesterone  
C) testosterone  
D) hCG  
E) thyroid hormones

OBG-5.605. In metrorrhagia due to cystic adenomatous hyperplasia of the endometrium in postmenopausal women, the associated ovarian neoplasm is most likely a:  
A) luteinized unruptured follicle  
B) dermoid tumor  
C) granulosa cell tumor  
D) chorionic carcinoma of the ovary  
E) androblastoma

OBG-5.606. Androblastoma develops from:  
A) cells of the ovarian stroma  
B) hilar Leydig-cells of the ovary  
C) undifferentiated cells of the germinal epithelium  
D) undifferentiated chorionic cells  
E) granulosa cells of atretic follicles

OBG-5.607. Which of the following screening methods is appropriate for the detection of ovarian neoplasms?  
A) a gynecologic examination every 6-12 months  
B) ultrasonography every 6-12 months  
C) lavage and aspiration cytology of the cul-de-sac every 12 months  
D) methods (A) and (B) are used primarily  
E) there is no reliable method for the detection of ovarian neoplasms

OBG-5.608. The diagnosis of endometriosis refers to:  
A) fibrosis resulting from chronic endometritis  
B) the presence of extrauterine endometrium implants  
C) the precancerous stage of endometrial carcinoma  
D) viral endometritis  
E) endometrial lesions caused by IUDs

OBG-5.609. The diagnosis of endometriosis refers to:  
A) fibrosis resulting from chronic endometritis  
B) the presence of extrauterine endometrium implants  
C) the precancerous stage of endometrial carcinoma  
D) viral endometritis  
E) endometrial lesions caused by IUDs

OBG-5.610.
The diagnosis of ectopic endometriosis refers to:
A) fibrosis due to chronic endometritis
B) the presence of endometrium implants of the uterine wall
C) the presence of extrauterine endometrium implants
D) adenocarcinoma of the ovary
E) an ovarian metastasis

OBG-5.611.
In which of the following periods of life is endometriosis of significance?
A) in the neonatal age
B) in infancy
C) in the reproductive age
D) in the postmenopausal age
E) in advanced age

OBG-5.612.
The characteristic signs of intrauterine endometriosis include:
A) dysmenorrhea
B) hypermenorrhea
C) sterility
D) a firm, uniformly enlarged uterus
E) all of the above
F) only answers (A) and (C) are true

OBG-5.613.
The most important mechanism in the etiology of intrauterine endometriosis is:
A) retrograde menstruation
B) embolization via blood and lymphatic vessels
C) implantation of endometrium to the uterine wound during surgery
D) the penetration of the endometrium into the musculature of the uterine wall
E) cellular metaplasia of the uterine wall

OBG-5.614.
The contents of the ovarian cyst resembles chocolate or tar in:
A) fibromyoma
B) adenocarcinoma
C) endometriosis
D) necrotized dysgerminoma
E) hemorrhagic corpus luteum cyst

OBG-5.615.
Which of the following drugs is inapprorpiate for the therapy of endometriosis?
A) danazol (DTIC-DOME) (a synthetic androgen)
B) lynestrenol (Orgametril)
C) norethisteron (Norcolut)
D) ethinylestradiol (Mikrofollin forte)
E) hydroxyprogesterone acetate

OBG-5.616.
Which of the following drugs is recommended for the therapy of endometriosis?
A) stilbene derivatives
B) natural estrogens
C) progestogenic norsteroid compounds (19-nortestosterorone derivatives)
D) natural progesterone derivatives
E) natural androgens

OBG-5.617.
Signs of excessive anteflexion of the uterus include:
A) dysmenorrhea
B) copious or minimal bleeding
C) sterility
D) habitual abortion
E) all of the above
F) only answers (A) and (B) are true

OBG-5.618.
In excessive anteflexion of the uterus, dysmenorrhea is caused by
the:
A) excessive contraction of the undeveloped uterine musculature
B) tight internal cervical orifice
C) compromise of uterine blood circulation
D) all of the above
E) only answers (A) and (B) are true

OBG-5.619.
The ratio between the length of the uterine corpus and the cervix is normally:
A) 1:1
B) 2:1
C) 3:1
D) 1:2
E) 1:3

OBG-5.620.
In uterine hypoplasia, the ratio between the length of the uterine corpus and the cervix is normally:
A) 1:1
B) 2:1
C) 3:1
D) 1:2
E) 1:3

OBG-5.621.
The ratio between the length of the uterine corpus and the cervix in the infantile uterus is:
A) 1:1
B) 2:1
C) 3:1
D) 1:2
E) 1:3

OBG-5.622.
Excessive anteflexion of the uterus:
A) is expressed by the blunt angle of the uterine corpus and the cervix
B) means that the angle of the uterine corpus and the cervix is
less than normal  
C) means that the uterus is located ventrally to the longitudinal  
axis of the pelvis  
D) means that the uterus is located dorsally to the longitudinal  
axis of the pelvis

OBG-5.623.  
Retroflexion of the uterus:  
A) is expressed by the blunt angle of the uterine corpus and the  
cervix  
B) means that the angle of the uterine corpus and the cervix is  
less than normal  
C) means that the uterus is located ventrally to the longitudinal  
axis of the pelvis  
D) means that the uterus is located dorsally to the longitudinal  
axis of the pelvis

OBG-5.624.  
Descensus and prolapse of the uterus is due to:  
A) congenital weakness of the pelvic floor  
B) damage to the levator ani muscle  
C) insufficiency of the uterosacral ligaments  
D) laxity of the abdominal wall or obesity  
E) all of the above

OBG-5.625.  
In descensus of the uterus:  
A) the uterus descends beneath the level of the hymenal ring and  
the portio vaginalis of the cervix appears in the vaginal  
introitus  
B) despite the descensus of the uterus, the portio vaginalis of the  
cervix does not sink beneath the level of the hymenal ring  
C) the uterus is found before the introitus, in the prolapsed vaginal  
sac  
D) the position of the uterine corpus is normal but the cervix is  
significantly elongated

OBG-5.626.  
In partial uterine prolapse:  
A) the uterus descends beneath the level of the hymenal ring and  
the portio vaginalis of the cervix appears in the vaginal  
introitus  
B) despite the descensus of the uterus, the portio vaginalis of the  
cervix does not sink beneath the level of the hymenal ring  
C) the uterus is found before the introitus, in the prolapsed vaginal  
sac  
D) the position of the uterine corpus is normal but the cervix is  
significantly elongated

OBG-5.627.  
In total uterine prolapse:  
A) the uterus descends beneath the level of the hymenal ring and  
the portio vaginalis of the cervix appears in the vaginal  
introitus  
B) despite the descensus of the uterus, the portio vaginalis of the  
cervix does not sink beneath the level of the hymenal ring
C) the uterus is found before the introitus, in the prolapsed vaginal sac
D) the position of the uterine corpus is normal but the cervix is significantly elongated

OBG-5.628.
Congenital malformations of the genitals are frequently associated with congenital abnormalities of the:
A) urinary tract
B) kidneys
C) rectum
D) all of the above
E) only answers (A) and (B) are true

OBG-5.629.
Urinary congestion in the upper urinary tract may result from:
A) chronic parametritis
B) progression of a cervical carcinoma to the parametrium
C) a cyst of the uterosacral ligaments
D) a myoma involving the uterosacral ligaments
E) all of the above
F) only answers (A) and (B) are true

OBG-5.630.
Which of the following conditions may have a role in the etiology of chronic cystitis?
A) cystocele
B) descensus of the uterus
C) uterine prolapse
D) all of the above
E) gynecologic conditions do not have a role in the etiology of chronic cystitis

OBG-5.631.
Urinary incontinence may result from:
A) trauma sustained at delivery; damage to the levator ani muscle
B) disorders of the innervation of the urinary bladder and the urethra
C) decreased estrogen levels
D) psychogenic factors
E) all of the above
F) only answers (A) and (B) are true

OBG-5.632.
In grade I urinary incontinence:
A) urine is lost involuntarily also in the supine position
B) urine is lost during walking or changing of body position only
C) urine is lost during maneuvers that suddenly increase the intra-abdominal pressure, e.g. coughing only
D) urine overflows only when the urinary bladder becomes overdistended
E) the dripping of urine is frequently associated with mild cystitis and occurs without bladder distension

OBG-5.633.
In grade II urinary incontinence:
A) urine is lost involuntarily and in the supine position
B) urine is lost during walking or changing of body position only
C) urine is lost during maneuvers that suddenly increase the intra-abdominal pressure, e.g. coughing only
D) urine overflows only when the urinary bladder becomes overdistended
E) the dripping of urine is frequently associated with mild cystitis

OBG-5.634.
In grade III urinary incontinence:
A) urine is lost involuntarily and in the supine position
B) urine is lost during walking or changing of body position only
C) urine is lost during maneuvers that suddenly increase the intra-abdominal pressure, e.g. coughing only
D) urine overflows only when the urinary bladder becomes overdistended
E) the dripping of urine is frequently associated with mild cystitis and occurs without bladder distension

OBG-5.635.
The most prevalent gynecologic malignancy of women between 36 and 65 years of age is:
A) cervical carcinoma
B) ovarian carcinoma
C) endometrial carcinoma
D) breast carcinoma
E) vulvar carcinoma

OBG-5.636.
Which of the following diagnostic methods is not used for the radiographic examination of the breast?
A) mammography
B) pneumocystography
C) pneumopectivigraphy
D) galactography
E) xeroradiography

OBG-5.637.
All of the following are characteristic features of testicular feminization, EXCEPT:
A) aplasia of the breast
B) female phenotype
C) the absence of the Wolfian duct
D) short vagina
E) the absence of the Muellerian duct

OBG-5.638.
All of the following statements are valid regarding anorexia nervosa, EXCEPT:
A) it develops in puberty and is associated with severe malnutrition without accompanying lethargy
B) its prevalence is the highest in patients between 11 and 21 years of age
C) 90% of the patients are females
D) the disturbed sense of body image causes morbid fear of obesity
and is associated with weight loss due to the denial of hunger
E) FSH levels are pathognomonic

OBG-5.639.
The most frequently occurring chromosomal abnormality that can be reliably detected by amniocentesis is:
A) trisomy 18
B) translocation 13-15/21
C) trisomy 13
D) translocation 21/22
E) trisomy 21

OBG-5.640.
In puerperal mastitis, the pathogen most often cultured from the excretions of the mammary glands is:
A) Escherichia cola
B) Staphylococcus aureus
C) Streptococcus fecalis
D) Staphylococcus epidermidis
E) Bacteriodes species

OBG-5.641.
All of the following are neonatal consequences of maternal rubella infection contracted during pregnancy, EXCEPT:
A) cataract, glaucoma and/or microphthalmia
B) severe congenital defects of the long bones with impossibility of epiphyseal closure
C) congenital heart disease with patent ductus arteriosus and pulmonary stenosis
D) meningoencephalitis
E) hepatosplenomegaly, jaundice, thrombopenia and anemia

OBG-5.642.
In iron deficiency anemia during pregnancy:
A) regular iron replacement is necessary due to continuously increasing iron requirements
B) manifest anemia can be treated by administering ferrous gluconate 100 mg daily
C) in pregnancy, the supplementation of 30 mg elemental iron covers the total daily allowance
D) iron deficiency anemia with depleted iron stores can be treated by administering 60 mg elemental iron daily
E) the iron binding capacity of the serum is reduced

OBG-5.643.
All of the following statements are valid regarding acute pyelonephritis complicating the puerperium, EXCEPT:
A) this condition develops in about 20% of pregnant women
B) infection of the right kidney is more common
C) anorexia, nausea and vomiting are frequent symptoms
D) it is caused by Escherichia coli in most cases
E) immunocompromization can always be verified

OBG-5.644.
Preeclampsia is defined as:
A) hypertension developing before the 20th week of pregnancy
B) proteinuria associated with edema during pregnancy  
C) hypertension with proteinuria or edema or both during pregnancy  
D) papilledema developing during pregnancy  
E) the occurrence of seizures of non-neurologic origin during pregnancy

OBG-5.645.  
All of the following statements are valid regarding the amniotic fluid, EXCEPT:  
A) fetal maturity can be assessed by evaluating the properties of the amniotic fluid  
B) the volume of amniotic fluid is increasing constantly during pregnancy  
C) oligohydramnios is associated with the risk of Potter’s syndrome  
D) congenital malformations are likely to develop in about 50% of polyhydramnios cases  
E) the amniotic fluid has antibacterial properties

OBG-5.646.  
Alpha-fetoprotein levels in the amniotic fluid and/or maternal serum can be increased in all of the following cases, EXCEPT:  
A) in congenital nephrosis or fetal obstruction of the urinary bladder neck  
B) in neural tube defects  
C) in hydrocephalus  
D) in Turner’s syndrome (45,XO)  
E) in esophageal and duodenal atresia

OBG-5.647.  
**Case Study:**  
A 24-year-old primigravida is in the 35th week of gestation according to the follow-up record. In the first half of the pregnancy the patient presented for maternity counseling monthly. From week 20, follow-up visits were performed every fortnight. From week 26 the increase of body weight of the patient started to accelerate (1 kg per week). Her actual body weight is 78 kg, that is 17 kg more than before pregnancy. Edema developed in the face, extremities and abdominal wall but was alleviated by diet and diuretic therapy. Her highest blood pressure reading was 15/90 mmHg, proteinuria never occurred. Antihypertensives and diuretics reserpine + hydrochlorothiazide and furosemide were prescribed regularly. The patient is transferred to the clinic unconscious, by an ambulance. Relatives disclose that half an hour earlier she has complained about dizziness and flashes of “sparks” so an ambulance was called for. The patient has lost her consciousness during transportation and generalized tonic-clonic seizures were witnessed by the emergency crew.  
**Admission status:** Unconscious patient with generalized edema and gross proteinuria. Heart rate: 100/min; blood pressure 190/120 mmHg, respiratory rate: 22/min (rapid). The upper pole of the uterine fundus is palpable 8-10 cm below the umbilicus. Fetal heart rate: 100/min, the cervix and the portio vaginalis are closed. Ophthalmoscopy: narrow arteries, numerous arterio-venous crossing changes, papilledema. **Neurological examination:** is resolving, positive Babinski’s sign, no other organic neurological abnormality is detected.  
What is the most likely diagnosis?  
A) epileptic seizure
B) thrombosis of the sagittal sinus
C) established eclampsia (status eclampticus)
D) cerebral apoplexy
E) cerebellar tumor

Case Study:
The history of a 28-year-old patient contains frequently recurring adnexitis. Her last regular menses occurred 37 days before admission. Complaints: slight, brownish vaginal discharge occurred 10 days before, at the time of the last menses. On the morning of her admission the patient "felt ill" and lost her consciousness for a few minutes. The pregnancy test performed several days earlier had been positive. On admission: her face is pale, sweating, her extremities are cold and she is complaining about dizziness, weakness, severe pain in the left-lower abdomen associated with a slight urge to defecate. Heart rate: 120/min, blood pressure 90/60 mmHg, body temperature 36.8 °C; WBC: 7,300/µl, Hb: 5.9 mmol/l, Hct: 28%. Gynecologic examination: local bulging of the abdomen, moderate tenderness up to the umbilical level; small-volume brownish vaginal discharge, the portio vaginalis of the cervix is cyanotic, tender to motion, the uterus is in ante-flexion anteversion, it is slightly enlarged and softened. The right adnexum is not palpable; a vague, moderately tender adnexal mass of a size of a plum is palpable on the right side. The cul-de-sac is bulging and yields a large volume of clotted blood on diagnostic puncture.

What is the most likely diagnosis?
A) perforation of the gall-bladder
B) acute appendicitis
C) nephrolithiasis
D) ectopic pregnancy
E) acute adnexitis

Case Study:
The history of a 48-year-old female patient contains 2 vaginal deliveries and an uncomplicated arteficial abortion. Her last menstruation has occurred 3 years ago. She has observed slight, speckling vaginal bleeding occurring after intercourse and defecation. Her body weight is stable; constipation is a frequent symptom. Physical examination: Breasts show no particular finding. The abdomen is soft and palpable. External genitals are normal. Hemorrhoids are visible in the anal orifice. Capacious vagina; scar of a previous episiotomy. The surface of the portio vaginalis of the cervix is irregular; with an exophytic, coated neoplasm that bleeds easily on touch. The anteflexed uterus is of regular size; its vicinity and the cul-de-sac are normal. Colposcopy: swollen, irregular portio vaginalis with an exophytic, coated neoplasm that bleeds easily. Malodorous vaginal discharge, slight bleeding after the examination.

What is the likely diagnosis?
A) malignant neoplasm of the portio vaginalis of the cervix
B) inoperable carcinoma of the uterine corpus  
C) cervicitis  
D) primary affection on the surface of the portio vaginalis  
E) grade I stress incontinence + vaginitis with acute cervicitis

MULTIPLE CHOICE QUESTIONS WITH KEY ANSWERS / TYPE II  
Every question or incomplete statement has only one answer in the following combinations:  
A) if the answers 1, 2, and 3 are true  
B) if the answers 1 and 3 are true  
C) if the answers 2 and 4 are true  
D) if only the answer 4 is true  
E) if all the four answers are true  
Select one of these key combinations!!!

OBG-5.650.  
Certain signs of pregnancy include:  
1) the detection of active fetal motions by the examiner  
2) Hegar's sign  
3) detection of the fetus by ultrasonography  
4) a blowing murmur from the uterus

OBG-5.651.  
Valid statements regarding congenital rubella syndrome include:  
1) cataract is the most common finding  
2) abortion is more prevalent among mothers contracting rubella  
   in the first trimester  
3) hepatitis seldom occurs  
4) the gamma-globuline therapy of infected mothers prevents the development of fetal defects

OBG-5.652.  
Sexually transmitted diseases include:  
1) type II Herpesvirus infection  
2) Trichomonas infection  
3) non-gonococcal urethritis  
4) condylomata acuminata

OBG-5.653.  
Correct statements regarding the anatomical conditions of the female pelvis include:  
1) the anthropoid pelvis is the most common type  
2) the intertuberous distance is the most important midpelvic dimension  
3) the narrowing of the pelvic outlet is the most important factor as far as normal vaginal delivery is concerned  
4) the external dimensions of the pelvis are of small importance

OBG-5.654.  
Premature delivery starting without cervical dilation or early rupture of the fetal membranes can probably be stopped by the administration of:  
1) morphine sulphate
2) intravenous alcohol  
3) barbiturates  
4) ritodrine  

OBG-5.655.  
The prenatal treatment of congenital defects has been attempted in:  
1) urinary bladder outlet obstruction  
2) cardiac arrhythmias  
3) adrenogenital syndrome  
4) diaphragmatic hernia  

OBG-5.656.  
In patients with vulvar carcinoma, lymphatic drainage from regions other than the clitoris is accumulated by the:  
1) external iliac lymph nodes  
2) superficial inguinal lymph nodes  
3) deep femoral inguinal lymph nodes  
4) paraaortic lymph nodes  

OBG-5.657.  
In Potter's syndrome, a type of congenital malformations is comprised of renal agenesis (and other renal abnormalities) and pulmonary hypoplasia. Other associated anomalies include:  
1) hydrocephalus  
2) nodular amnion  
3) cleft palate  
4) of oligohydramnios  

OBG-5.658.  
Methods appropriate for the study of fetal chromosomes include:  
1) amniocentesis  
2) cordocentesis  
3) chorionic villous sampling  
4) echo-Doppler duplex flowmetry  

OBG-5.659.  
Which of the following substances have a demonstrated teratogenic effect?  
1) alcohol  
2) isotretinoin (Accutane)  
3) tetracyclines  
4) progestogens  

OBG-5.660.  
**Case Study:**  
A 24-year-old female victim of a car accident is admitted to the hospital. A chest x-ray and lower spinal radiography is performed to assess the extent of her injuries. Subsequently, it becomes known that the patient is in the 10th week of pregnancy. The following information should be given:  
1) the fetus has received an irradiation of 50 rad  
2) chorionic villous sampling or amniocentesis is indicated to rule out fetal chromosomal abnormalities  
3) in week 10 of the gestation, the fetus is extremely susceptible to agents inducing the development of central nervous system malformations
4) the radiation dose received by the fetus is below the presumed threshold of radiation injury

OBG-5.664.
Characteristics of individuals with a 45, XO karyotype include:
1) webbing of the neck, broad chest, gothic palate, low-positioned ears
2) lymphedema of the extremities at birth
3) an increased prevalence of diabetes
4) the mother is older than 35 years

OBG-5.665.
Which of the following statements are correct regarding ambiguous external genitalia?
1) the karyotype of the individual should be determined
2) an accurate physical status must be recorded
3) occasionally, the patient has an older sibling born with congenital adrenal hyperplasia
4) the true gender of the patient can usually be decided by a thorough physical examination

OBG-5.667.
Which of the following conditions can be diagnosed by the DNA analysis of chorionic villous cells or amniotic cells?
1) sickle-cell disease
2) Duchenne dystrophy
3) hemophilia A
4) Tay-Sachs disease

OBG-5.668.
Valid statements regarding pregnant women with phenylketonuria (PKU) include:
1) there is a 25% probability of fetal disease if the father is a gene carrier
2) if the father is a gene carrier, the birth of an offspring with PKU can be prevented by performing amniocentesis or chorionic villous sampling followed by selective artificial abortion
3) patients with PKU seldom live long enough to enter reproductive age
4) the genetically normal children of mothers with PKU are often mentally retarded

OBG-5.669.
Characteristics of uterus bicornis unicollis include:
1) absence of the complete unification of the Müllerian ducts
2) it is associated with an increased incidence in obstetrical complications
3) it is associated with an increased incidence in genitourinary malformations
4) congenital anomalies of the cervix and vagina

OBG-5.670.
Valid statements regarding vaginism include:
1) it is a spastic, involuntary contraction of the vaginal introitus
2) it can be detected by vaginal examination
3) it is associated with the secondary impotence of the male partner
4) it is treated with vaginal dilators
OBG-5.671.
Which of the following factors maintains normal development in female puberty:
1) the sensitivity of the hypothalamus-pituitary axis to circulating estrogen levels reduces
2) the development of a sleep-induced pulsatile GnRH pattern
3) the elevation of circulating estrogen levels
4) the serum levels of adrenocortical androgens decreases

OBG-5.672.
In the "Sertoli cell only" syndrome:
1) Leydig cell function is significantly reduced
2) no clinical symptoms are detected on examination
3) testosterone therapy effectively increases sperm concentration
4) FSH levels are elevated

OBG-5.673.
Which of the following belong to the effects of prostaglandins on the reproductive system:
1) ovulation inhibition
2) luteolysis
3) the alleviation of dysmenorrhea
4) prostaglandins induce contractions of both the pregnant and the non-pregnant uterus

OBG-5.674.
Estrogen dependent physiologic processes of the female organism include:
1) menstruation
2) the cornification of the vaginal epithelium
3) the appearance of axillary hair
4) the production of cervical mucus

OBG-5.675.
Which of the following may cause delayed puberty?
1) anorexia nervosa
2) androgen excess syndromes
3) gonadal dysgenesis
4) chronic disease

OBG-5.676.
Which of the following statements are valid regarding the peripheral transformation of androgens to estrogens in menopause?
1) the turnover of this process is determined by the fat content of the body
2) this is responsible for the reduced prevalence of osteoporosis in obese postmenopausal women
3) it may cause uterine bleeding, endometrial hyperplasia or adenocarcinoma
4) its incidence correlates with age

OBG-5.677.
Which problems of postmenopausal women deserve special attention?
1) vaginitis
2) depression
3) osteoporosis
4) sexual dysfunction

OBG-5.678. Significant factors of vaginal lubrication include:
1) the secretions of Skene's glands
2) mucus produced by endocervical glands
3) the viscous secretions of Bartholin's glands
4) a transudate-like fluid secreted by the vaginal wall

OBG-5.679. Valid statements regarding menopause include:
1) it usually starts between the age of 40 to 50 years
2) is characterized by the absence of menstruation for 12 months in women older than 45 years
3) menopause is always preceded by hot flushes
4) FSH and LH levels are elevated

OBG-5.681. The pharmacological effects of oral contraceptives containing the combination of estrogen and progesterone include:
1) the inhibition of the maturation of the oocyte
2) the prevention of the penetration of sperm into the cervical mucus
3) the inhibition of implantation by the induction of atrophic changes of the endometrium
4) the induction of uterotubal hypermotility inhibits sperm motility

OBG-5.684. Functional changes of the respiratory system during pregnancy include:
1) an increased respiratory volume
2) reduced residual volume
3) increased minute ventilation
4) an increased respiratory rate

OBG-5.685. Valid statements regarding the changes of cardiac output during pregnancy include:
1) during pregnancy, cardiac output is 30-50% higher than in non-pregnant females
2) cardiac output is maximal in the second half of the pregnancy (from week 20-24 to delivery)
3) initial increases of cardiac output are due to an increase of ejection volume
4) in pregnancy, the changes of cardiac output are influenced also by body posture

OBG-5.686. Which of the following changes related to thyroxine may occur during pregnancy?
1) the total serum thyroxine level increases
2) the free thyroxine level increase
3) the thyroxine binding globulin level
4) TSH levels decrease

OBG-5.687. Which of the following laboratory parameters is expected to yield elevated values during pregnancy?
1) the serum albumin
2) the plasma fibrinogen
3) the blood urea nitrogen
4) the erythrocyte sedimentation rate

OBG-5.688.
During pregnancy, insulin secretion is stimulated by:
1) progesterone
2) estrogen
3) growth hormone
4) human chorionic somatomammotropin (hCS)

OBG-5.689.
Which of the following factors may induce ureteral dilation during pregnancy?
1) compression exerted by the pregnant uterus
2) external compression due to the dilated right ovarian vein
3) the effect of progesterone
4) increased glomerular filtration rate

OBG-5.691.
Maternal reactions induced by nursing include:
1) oxytocin release
2) reduced production of prolactin inhibiting factor
3) reduction of hypothalamic dopamine levels
4) increased production of luteinizing hormone-releasing factor

OBG-5.700.
Which of the following may elicit female orgasm:
1) stimulation of the clitoris
2) dreams
3) vaginal stimulation
4) extragenital stimulation

OBG-5.701.
Valid statements regarding rape committed by a known (or unknown) assailant include:
1) permanent sexual problems are more likely to develop if the rape was committed by an unknown assailant
2) rape events committed by unknown assailants are reported much more frequently than attacks by known assailants
3) restoration of sexual life is easier if the rape was committed by an individual known to the victim
4) woman with sexual dysfunction are often victimized by "silent rape"

OBG-5.702.
Valid statements regarding premenstrual syndrome (PMS) include:
1) PMS may present with both ovulatory and anovulatory cycles
2) the patient herself regards her behavioral changes (irritability, emotional lability) excessive reactions
3) the changes of hormonal levels, prostaglandins and endorphins may all have a role in the etiology of PMS
4) in many cases, abstinence from coffee and caffeine alleviates the symptoms of PMS
OBG-5.703.
Which of the following is appropriate for the therapy of abnormal uterine bleeding?
1) progesterone therapy
2) combined oral contraceptives
3) estrogen therapy
4) antiprostaglandin therapy

OBG-5.704.
Permanent estrogen replacement may be dangerous or explicitly contraindicated in women with:
1) liver dysfunction
2) thromboembolic disorders
3) estrogen dependent neoplasms
4) have a mother or siblings with osteoporosis

OBG-5.705.
Valid statements regarding the psychic symptoms of climacterium include:
1) insomnia, irritability, frustration and indisposition
2) the symptoms are often associated with estrogen therapy
3) the symptoms are influenced by hormonal, environmental and intrapsychic factors
4) the symptoms are determined primarily by the educational level of the patient

OBG-5.706.
Absolute contraindications to the use of oral contraceptives include:
1) thromboembolic disorders
2) congenital hyperlipidemia
3) obesity and smoking for 35 years
4) ectopic pregnancy in the patient's history

OBG-5.707.
Contraindications to the insertion of an IUD include:
1) pelvic inflammatory disease in the patient's history
2) previous conception despite IUD use
3) abnormal genital bleeding
4) previous wedge resection of the cervix

OBG-5.708.
Artificial abortion performed in the second trimester by the injection of hypertonic saline into the amniotic cavity:
1) is regulated by state legislation
2) may induce Rh-senitization
3) may be followed by disseminated intravascular coagulation (DIC)
4) may induce permanent hypertension

OBG-5.709.
The effects of the progestogenic component of oral contraceptives include:
1) the inhibition of LH secretion
2) the induction of decidual transformation of the endometrium
3) the induction of the production of a more viscous cervical mucus
4) the prevention of metrorrhagia
The effects of the estrogen component of oral contraceptives include:
1) the effect of the estrogen component always surpasses that of
   the progestosterone component unless the dose of the latter is
   increased significantly
2) the occurrence of thromboembolic events is directly related to
   the dose of the estrogen component
3) the estrogen component suppresses LH secretion
4) the estrogen component suppresses FSH secretion

Case Study:
A 36-year-old patient has 4 children. She visits her doctor for a
prescription for an oral contraceptive. She claims that she has been using contraceptives
without any problems for the last 15 years. The height of the
patient is 157 cm, body weight: 74 kg, blood pressure, 130/80 mmHg;
she smokes a pack of cigarettes a day. Which methods of the following
are the recommended contraceptive methods in this case?
1) continue the use of oral contraceptives
2) tubal ligation
3) the administration of medroxyprogesterone acetate (Depo-
   Provera)
4) the insertion of an intrauterine device

Valid statements regarding identical twins include:
1) identical twins often result after the use of intrauterine devices
2) identical twins often result after ovulation induction with
   clomiphene citrate
3) the development of identical twins is more common than that
   of fraternal twins
4) the incidence of this condition is 1:250 pregnancies

Normally, which of the following has a serum concentration higher
in maternal blood than in fetal or cord blood?
1) immunoglobulin G (IgG)
2) immunoglobulin M (IgM)
3) hemoglobin y-chains
4) fibrinogen

Ultrasonography performed in the third trimester detects:
1) anencephaly and major neural tube defects
2) fetal death
3) polyhydramnios
4) the accurate age of pregnancy

Anticonvulsants with potential adverse effects resulting in the development
of congenital malformations include:
1) diphenylhydantoin
2) valproic acid
3) trimethadione
4) carbamazepine
OBG-5.716. Risks associated with smoking during pregnancy and the puerperium include:
1) the delivery of a low birth-weight neonate
2) spontaneous abortion
3) premature delivery
4) sudden infant death syndrome

OBG-5.717. Severe fetal or neonatal disease may result from maternal infection by which of the following viruses?
1) Coxsackie B virus
2) Rubellavirus
3) Smallpox virus
4) type 2 Herpesvirus hominis

OBG-5.718. The fetal or neonatal consequences of maternal diabetes include:
1) macrosomia
2) delayed pulmonary maturation
3) hypoglycemia
4) hypocalcemia

OBG-5.719. Valid statements regarding toxoplasmosis developing in pregnancy include:
1) the infection is contracted by the consumption of raw meat
2) the infection is contracted by contact with feline feces
3) infection occurring in the early stage of pregnancy may result in abortion
4) the incidence of this condition is 1:2,000-2,500 pregnancies

OBG-5.720. Hormones produced by the human placenta include:
1) gonadotropin
2) somatomammotropin (hCS)
3) progesterone
4) hydrocortisone

OBG-5.721. The risk of fetal morbidity and mortality is maternal diabetes is increased by:
1) maternal ketoacidosis
2) maternal ketonuria occurring without diabetic ketoacidosis
3) maternal hyperglycemia
4) maternal hypoglycemia

OBG-5.722. An increased risk of postpartum bleeding should be expected after/in:
1) prolonged delivery
2) rapid delivery
3) the stimulation of uterine contractions with oxytocin
4) multiple pregnancy
OBG-5.723.
Which of the following drugs are appropriate for the therapy of postpartum bleeding?
1) ergometrine
2) oxytocin injection
3) ergotamine
4) prostaglandins

OBG-5.724.
Antibiotics contraindicated during pregnancy include:
1) tetracyclines
2) penicillin
3) chloramphenicol
4) ampicillin

OBG-5.725.
Valid statements regarding ectopic pregnancy include:
1) the Arias-Stella reaction is of diagnostic significance in ectopic pregnancy
2) ectopic pregnancies developing in the interstitium usually rupture later, bleed heavier and are more difficult to diagnose than isthmic or ampullary pregnancies
3) most ectopic pregnancies can be detected by ultrasonography because this imaging method delineates the gestational sac outside the uterine cavity
4) ectopic pregnancies develop most often in the tubal isthmus

OBG-5.726.
The indications for monocomponent chemotherapy following the evacuation of a hydatidiform mole include:
1) elevated hCG titers
2) hCG titers fail to decrease in 3 consecutive weeks
3) hCG titers are not normalized by week 8 after evacuation
4) hCG titers decrease rapidly

OBG-5.729.
Experience with the use of actinomycin D and methotrexate in the therapy of trophoblastic disease shows that:
1) resistance developing to one of these preparations results in cross-resistance to the other
2) actinomycin D is safer than methotrexate in patients with liver impairment
3) the effects of these substances are not additive in combination
4) applied initially, actinomycin D is as effective as methotrexate

OBG-5.740.
The imperforate hymen may result in the development of:
1) hematocolpos
2) dysuria
3) hematometra
4) periodic lower abdominal pain

OBG-5.741.
Acute urinary retention may result from:
1) retroflexion of the pregnant uterus
2) uterine obstruction caused by a myoma
3) hematocolpos
4) pelvic hematocèle

OBG-5.742.
Laparoscopy is CONTRAINDIATED:
1) during menstruation
2) in patients with descensus of the pelvic floor
3) in pelvic tuberculosis
4) in intestinal obstruction

OBG-5.743.
Multiple pregnancy carries an increased risk of:
1) toxemia occurring in the late phase of the pregnancy
2) higher perinatal fetal loss
3) premature delivery
4) acute excess of amniotic fluid

OBG-5.744.
In iron deficiency anemia associated with 9-11 g% hemoglobin levels:
1) stainable iron is missing from the bone marrow
2) serum iron levels are reduced
3) serum iron-binding capacity is elevated
4) microcytosis is present

OBG-5.745.
The fetal heart rate is influenced by:
1) the age of the pregnancy
2) vagal tone
3) uterine bleeding
4) magnesium sulphate

OBG-5.746.
In addition to the serum bilirubin concentration, drugs facilitating the development of kernicterus include:
1) salicylates
2) sulfonamides
3) furosemide
4) gentamicin

OBG-5.747.
Glucose-6-phosphate deficiency:
1) is a congenital error of metabolism with an X-linked inheritance pattern
2) is associated with an increased incidence of urinary tract infection during pregnancy
3) may cause fetal hydrops
   cause ;audice in neonates

OBG-5.748.
Amniocentesis is indicated for the diagnosis of the following autosomal disorders:
1) Hurler's syndrome
2) Tay-Sachs disease
3) Pompe disease
4) Lesch-Nyhan syndrome
Factors predisposing a neonate to kernicterus include:
1) a low body temperature
2) infection
3) hypoglycemia
4) perinatal asphyxia

Hormonal replacement is recommended in climacteric women:
1) for the prevention of atherosclerotic heart disease
2) for the alleviation of vasomotor symptoms
3) to reverse osteoporosis
4) for the treatment of the atrophy of the vaginal mucosa

Characteristic features of Turner syndrome (45, XO) include:
1) a low stature
2) a female gender with bilateral inguinal hernia
3) hypergonadotropic amenorrhea with low estrogen levels
4) elevated gonadotropin levels, the presence of ovarian follicles and amenorrhea

Valid statements regarding the maturation of oocytes include:
1) available information suggests that the elevation of estradiol levels in the late follicular phase induce the fluctuation of gonadotropin levels
2) exogenous estrogen replacement does not influence the release of gonadotrophic hormones
3) abnormal androgen levels may suppress the pulse generator and GnRH release
4) follicles mature independently of pituitary prolactin secretion

Asymptomatic bacteriuria in women:
1) has a prevalence of 15-17% among all females
2) has been defined arbitrarily as the presence of 100,000 bacteria per millilitre of urine
3) is caused by Streptococcus fecalis predominantly
4) causes pyelonephritis in 30% of cases

Placental abruption may be associated with:
1) renal insufficiency
2) dyspnea
3) disseminated intravascular coagulation
4) heart failure

Hemodynamic changes associated with the shifting from fetal to neonatal circulation result in:
1) the constriction of umbilical vessels and the gradual obliteration of the foramen ovale as well as the ductus venosus
2) the fall of systemic blood pressure
3) expansion of the fetal lung
4) reversal of the direction of blood flow in the ductus arteriosus
OBG-5.765.
In humans, the ovary can produce:
1) dehydrosoandrosterone
2) androstendione
3) testosterone
4) dehydroepiandrostendione

OBG-5.766.
Case Study:
A patient displays mild uterine irritability in the 35th week of her pregnancy despite avoiding exertion as much as possible and her blood pressure is also significantly elevated. Although prompt hospitalization reversed these symptoms, intensive monitoring was instituted.
Which of the following symptoms is/are of concern in week 36?
1) urinary estriol levels are below the tenth of the normal value of the hospital's laboratory
2) according to the results of serial ultrasonographies, the growth-rate of the fetus is below 10%
3) amniocentesis yielded clear amniotic fluid (with an L/S ratio of 2.2 and a 2.0 mg% creatinine level)
4) the maternal serum prolactin level decreased below 4 mg/ml

ASSOCIATION QUESTIONS
Associate the following terms/statements marked by the letters A, B, C... with the corresponding statements/terms marked by and in the order given by the figures 1, 2, 3...
...for example: 1-C, 2-B, 3-A, 4-D. Put the answer as C, B, A, D!
(Note: Different statements can be associated with the same terms!!)

OBG-5.767.
Associate the following term(s) with their corresponding statement(s)!
A) Genital tubercle
B) Genital bud
C) Urogenital sinus
D) Urethral folds
E) Müllerian ducts
1) labia minora
2) labia majora
3) clitoris
4) lower third of the vagina
5) oviducts

OBG-5.768.
Associate the following term(s) with their corresponding statement(s)!
A) Uterine vein
B) Right ovarian vein
C) Left ovarian vein
D) Uterine artery
E) Ovarian artery
1) hypogastric artery (emerges from the internal iliac artery)
2) joins the internal iliac veins
3) joins the inferior vena cava
4) emerges from the abdominal aorta
5) joins the left renal vein
OBG-5.769.
Associate the following term(s) with their corresponding statement(s)!
A) Spontaneous abortion
B) Threatened abortion
C) Habitual abortion
D) Therapeutic abortion
E) Elective abortion
1) termination of the pregnancy on maternal indication before the fetus attains viability
2) termination of the pregnancy before the fetus attains viability on indication other than the protection of maternal health or from causes other than fetal disease
3) spontaneous termination of gravidity occurring in about 10% of all pregnancies
4) spontaneous termination of gravidity associated with chromosomal abnormalities in 50-60% of cases
5) spontaneous termination of gravidity that is unfeasible in the case of the first pregnancy.

OBG-5.770.
Associate the following statement(s) with their corresponding term(s)!
A) oral contraceptive use should be suspended for 7 days then reinstated
B) oral contraceptives should be continued as usual
C) oral contraceptives should be continued and a supplemental contraceptive method should be applied in addition
D) an extra tablet should be taken
E) oral contraceptive use should be abandoned and a diagnostic workup is necessary
1) Nausea occurring in the first cycle during oral contraceptive use
2) Menstruation is absent during the 7 days following the 21-day long period of proper oral contraceptive use
3) The patient has forgotten to take one tablet
4) The patient has forgotten to take oral contraceptives for 10 consecutive days
5) Slight bleeding at midcycle during the first month of oral contraceptive use
6) Hemoptysis

OBG-5.771.
Associate the following term(s) with their corresponding statement(s)!
A) Ectopic pregnancy
B) Cortisol excess
C) 21-Hydroxylase deficiency
D) 19-Nortestosterone-progestins
E) Toxic inflammatory endometritis
1) centripetal obesity, moon-face, purple striae
2) 10% incidence of ectopic tubal pregnancy
3) congenital adrenal hyperplasia
4) supresses luteinizing hormone-releasing factor secretion
5) Arias-Stella phenomenon

OBG-5.772.
Associate the following statement(s) with their corresponding term(s)!
A) 47 XXY
B) 45 XO
C) trisomy 21
D) Tay-Sachs disease
E) testicular feminization
1) Down's syndrome
2) Klinefelter syndrome
3) Turner's syndrome
4) The most prevalent XY female-syndrome
5) Amniocentesis

OBG-5.774.
Associate the following term(s) with their corresponding statement(s)!
A) Methylene blue
B) Gram-stain
C) Ziehl-Nielsen stain
D) Papanicolau stain
E) Hematoxylin-eosin stain
1) Gonococcus
2) Mycobacterium tuberculosis
3) mixed bacterial flora
4) oncocytology smear
5) hormonal cytology smear

OBG-5.775.
Associate the following term(s) with their corresponding statement(s)!
A) Bacillus crassus
B) Trichomonas vaginalis
C) Treponema pallidum
D) Rickettsiae
E) Haemophylus ducreyi
F) Chlamydia lymphogranulomatis
1) chancroid
2) lymphogranuloma inguinale
3) chlamydiasis
4) syphilis
5) acute vulvar ulcer

CASE STUDIES
Answer the multiple task questions (simple choice and multiple choice with/without key answers; relation analysis etc.) as they are related to each case study!!!

OBG-5.776.
Case Study
A 24-year-old primigravida presents in the 28th week of her pregnancy with spider nevi, palmar erythema and diffuse pruritus.

Liver function test results: alkaline phosphatase: 190 IU/l (normal value: 29-91 IU/l); SGOT: 38 IU/l (normal value: 6-18 IU/l); total bilirubin: 1.8 mg% (normal value: 0.3-1.0 mg%); direct bilirubin: 1.0 mg% (normal value 0.1-0.3 mg%).

5.776/ 1.
The most likely diagnosis is:
A) liver cirrhosis
B) infectious hepatitis
C) cholestasis
D) acute pancreatitis
E) cholecystitis

5.776/2.
After delivery, the doctor should recommend to the patient:
A) not to have any more babies
B) to abstain from food with a high fat content and not to take oral contraceptives
C) to avoid exertion
D) to undergo a cholecystectomy
E) none of the above

OBG-5.777.

Case Study
A 20-year-old female presents at the clinic with lower abdominal pain. Her menstruation cycle is regular and she has not been pregnant yet. At present, she is taking an oral contraceptive.

Colposcopy: ectopic tissue on the portio vaginalis of the cervix.
Pelvic examination: average vaginal capacity, smooth, firm portio vaginalis, regular, large uterine corpus in avf. The uterus is mobile, palpation is normal on the right side. On the left side, ventrally, a semisolid, clearly delineate mobile mass is palpated.

5.777/1.
The most likely diagnosis is:
A) ovarian endometriosis
B) malignant ovarian neoplasm
C) uterine myoma
D) dermoid cystoma
E) paraovarian cyst

5.777/2.
What can be seen on an anteroposterior radiograph of the pelvis?
A) calcification
B) phleboliths
C) psammoma bodies
D) a soft-tissue shadow
E) calcification within a soft-tissue shadow

5.777/3.
What is the percentage of neoplasms occurring in both ovaries simultaneously?
A) 1%
B) 15%
C) 25%
D) 40%
E) 60%

5.777/4.
Which of the following is a possible complication of this neoplasm?
A) torsion of the pedicle of the cyst
B) suppuration and peritonitis
C) malignant transformation
D) all of the above
E) only answers (A) and (C) are true
5.777/5.
What is the prognosis of this tumor?
A) good, as malignant transformation seldom occurs
B) extremely good, as malignant transformation does not occur
C) malignant transformation is common, thus it cannot be detected at an early stage
D) poor, because it is a malignant lesion

5.777/6.
The appropriate therapy is:
A) puncture and aspiration of the contents via the vaginal route
B) laparoscopic aspiration of the contents
C) laparotomy to remove the tumor selectively with the preservation of functional ovarian remnants
D) laparotomy with oophorectomy in all cases
E) laparotomy with bilateral oophorectomy as bilateral occurrence is common

OBG-5.789.
Case Study
A 55-year-old nulliparous, postmenopausal woman presents with bloody vaginal discharge present for the last 7 days.
Status: The portio vaginalis of the cervix and the vaginal wall is covered by atrophic epithelium that bleeds easily. The uterus is hypoplastic, smaller than normal, no adjacent abnormality is palpated.

5.789/1.
The most likely cause of the bleeding is:
A) cervical polyp
B) senile vaginitis
C) cervical carcinoma
D) endometrial carcinoma
E) hormone secreting ovarian neoplasm

5.789/2.
What should be done next?
A) the bleeding should be controlled by estrogen administration
B) fractional curettage should be performed
C) oncocytology testing is recommended
D) chemical curettage is necessary
E) nothing should be done

5.789/3.
Curettage yields copious medullary tissue from the uterine cavity. The most likely diagnosis is:
A) senile endometritis
B) submucous myoma
C) endometrial carcinoma
D) cervical

5.789/4.
Which of the following conditions are associated with an increased risk of endometrial carcinoma?
A) obesity
B) hypertension
5.789/5.
Which of the following methods should be applied as the first choice therapy of endometrial carcinoma?
A) irradiation
B) surgery (hysterectomy)
C) norsteroid therapy
D) cytotoxic chemotherapy
E) the combination of (A), (B) and (C)
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