

606. In acute diaphragmatic pleurisy involving the central part of the diaphragm, the patient is likely to complain of pain in:
- A: neck and shoulder.
 - B: lateral part of the chest between the third and sixth ribs.
 - C: center of the chest between the second and fifth ribs.
 - D: interscapular region.
 - E: right lower quadrant of abdomen.
607. Treatment of hypoxia associated with hypercapnia should be:
- A: cautious administration of oxygen using a venturi device.
 - B: high concentration of oxygen.
 - C: intubation.
 - D: none of the above.
608. In primary atypical (presumably viral) pneumonia the most common of the following blood findings is:
- A: Leucocytosis.
 - B: agglutination of sheep's RBCs by patient's blood serum.
 - C: cold agglutination.
 - D: secondary anemia.
 - E: latex fixation.
609. Causes of interstitial lung disease include:
- A: chemical and physical irritants.
 - B: alveolar proteinosis.
 - C: sarcoidosis.
 - D: A & C.
 - E: all of these.
610. The following is (are) true of alveolar proteinosis:
- A: cleared by pulmonary lavage with heparin.
 - B: diffuse lung changes with mottling and reticulation.
 - C: normal vital capacity.
 - D: A & C.
 - E: all of the above.
611. The proper interpretation of a positive reaction to a tuberculin test is that the person is:
- A: suffering from active tuberculosis.
 - B: immune to invasion by the tubercle bacillus.
 - C: susceptible to invasion by the tubercle bacillus.
 - D: sensitive to tuberculo-protein by virtue of previous or present infection with tubercle bacillus.
 - E: none of these.

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- 612.** Which of the following concerning rheumatoid lung disease is (are) true:
- A:** there is an increased incidence of idiopathic pulmonary fibrosis in patients with rheumatoid arthritis.
 - B:** nodular lesions histologically similar to rheumatoid nodules may be isolated.
 - C:** a progressive pulmonary fibrosis may be seen in coal miners who have a positive rheumatoid factor with rheumatoid arthritis.
 - D:** all of the above.
- 613.** In chronic emphysema the blood may show the following changes:
- A:** high pH.
 - B:** eosinophilia.
 - C:** low pH, low chloride, low CO₂ content.
 - D:** low pH, low chloride, high CO₂ content.
 - E:** high pH, low chloride, high CO₂ content.
- 614.** The best treatment for chronic obstructive emphysema in the advanced stages is:
- A:** continuous 100% O₂.
 - B:** morphine and bronchodilators.
 - C:** a combination of antibiotic, mechanical respiration and bronchodilators.
 - D:** mechanical respiration with high concentration of O₂.
 - E:** combination of antibiotic, bronchodilators and continuous 100% O₂.
- 615.** A bloody pleural effusion may occur in:
- A:** pulmonary infarction.
 - B:** cholesterol effusion.
 - C:** following myocardial.
 - D:** Meig's syndrome.
 - E:** A & C.
- 616.** The increasing incidence of carcinoma of the lung may be due to:
- A:** frequent x-ray.
 - B:** increasing life span.
 - C:** infection.
 - D:** a combination of the above three factors.
 - E:** greater exposure to carcinogenic substances.
- 617.** The primary step in the diagnosis of pulmonary carcinoma is:
- A:** sputum studies for cell morphology.
 - B:** gastric aspirations.
 - C:** bronchoscopy.
 - D:** x-ray of chest.
 - E:** scalene node biopsy.
- 618.** A bloody pleural effusion is consistent with a diagnosis of which of the following:
- A:** pulmonary embolus.
 - B:** acute hemorrhagic pancreatitis.
 - C:** myocardial infarct.
 - D:** A & C.
 - E:** all of these.

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627. All of the following are associated with the Pickwickian syndrome, except:
- | | |
|------------------------|------------------|
| A: obesity. | D: anemia. |
| B: somnolence. | E: Polycythemia. |
| C: excessive appetite. | |

The following statements refer to pulmonary thromboembolism: answer (True OR False):

628. Massive embolism is commonly associated with hypoxemia, hypocapnia and respiratory alkaloses.
629. The difference between alveolar PCO₂ and arterial PCO₂ is widened due to the increase in alveolar dead space.
630. A pulmonary perfusion radiophotoscan provides good anatomic information.
631. The triad of elevated lactic dehydrogenase and bilirubin with a normal serum glutamic oxalacetic transaminase is a strong diagnostic value.

632. All of the following are associated with primary pulmonary hypertension, except:
- | |
|--|
| A: Raynaud's disease. |
| B: sudden death. |
| C: precordial pain. |
| D: prominent "a" wave in jugular venous pulse. |
| E: left ventricular hypertrophy. |

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Match the following:

- | | |
|--------------------------------|------------------|
| 633. Bronchial obstruction. | A: blue bloater. |
| 634. Alveolar hypoventilation. | B: pink puffer. |
| 635. Right heart failure. | C: both. |
| 636. Near-normal blood gases. | D: neither. |

637. Which of the following are air pollutants:

- | | |
|--------------------|---------------------|
| A: sulfur dioxide. | C: carbon monoxide. |
| B: ozone. | D: all of these. |

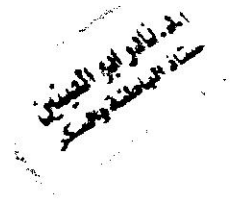
638. Asbestosis is associated with all of the following, except:

- | | |
|---------------------------|----------------------------|
| A: pleural calcification. | D: bronchogenic carcinoma. |
| B: pleural mesothelioma. | E: methemoglobinemia. |

639. Bronchiectasis is associated with all of the following, except:

- | | |
|---------------------------|----------------------|
| A: kartagener's syndrome. | D: tuberculosis. |
| B: cystic fibrosis. | E: bronchial asthma. |
| C: agammaglobulinemia. | F: epilepsy. |

- 640.** The following conditions predispose to abscess formation in the lung:
A: pneumococcus type III pneumonia. **D:** scleroderma.
B: mitral stenosis. **E:** regional enteritis.
C: pulmonary infarction.
- 641.** The following are associated with lung abscess:
A: clubbing. **D:** pyopneumothorax.
B: hypertrophic osteoarthropathy. **E:** brain abscess.
C: bronchogenic carcinoma.
- 642.** Which of the following are necessary in the work up and diagnosis of a lung abscess:
A: bronchography. **D:** bronchoscopy.
B: pulmonary angiography. **E:** pulmonary function studies.
C: photoscans.
- 643.** Differential diagnosis of the primary lung abscess includes:
A: bagossosis. **D:** peripheral carcinoma.
B: tuberculosis. **E:** hamartoma.
C: silicosis.
- 644.** The treatment of lung abscess include:
A: antibiotics. **D:** radiotherapy.
B: postural drainage. **E:** pleurectomy.
C: resection & lobectomy for persistently symptomatic patients.
- 645.** The preferential sites of extrapulmonary metastasis of primary carcinoma of the lung include:
A: prescalene lymph node. **D:** adrenal glands.
B: liver. **E:** bones.
C: brain.
- 646.** Which of the following are associated with carcinoma of the lung:
A: hypercalcemia. **D:** Cushing's syndrome.
B: gynecomastia. **E:** leukemoid reaction.
C: myopathy.
- 647.** Which of the following are often associated with malignancy relating to a solitary pulmonary nodule:
A: dense generalized calcification.
B: core calcification.
C: lamination.
D: umbilication of the nodule's border.
E: calcific fleck.
- 648.** Bronchial adenomas may present with:
A: hemoptysis. **D:** Cushing's syndrome.
B: hypercalcemia. **E:** hyponatremia.
C: wheezing.



649. The great majority of pulmonary metastatic lesions arise from the:
 A: gastrointestinal tract. D: pericardium.
 B: genitourinary tract. E: brain.
 C: glandular tissues.
650. The neurologic manifestations that may be seen with carcinoma of the lung are:
 A: peripheral neuropathy. D: foot drop.
 B: petit mal epilepsy. E: carpal tunnel syndrome.
 C: corticocereberal degeneration.
651. Choose the method which can provide information as to the diagnosis of lung cancer:
 A: bronchoscopy. D: angiography.
 B: scalene node lymph biopsy. E: ultrasound.
 C: cytology smear.
652. Which of the following would one expect to find in pleural fluid associated with lung cancer:
 A: specific gravity less than 1.015.
 B: specific gravity greater than 1.15.
 C: protein less than 3.5 gm per 100 gm.
 D: protein greater than 3.5 gm per 100 ml.
 E: red blood cell count usually less than 100 cells per cu mm.
653. Indication for non-operability in lung cancer are:
 A: markedly decreased pulmonary compliance.
 B: markedly decreased diffusion capacity for carbon monoxide.
 C: grossly abnormal ventilation-perfusion ration.
 D: marked alveolar hypoventilation.
 E: serious pulmonary hypertension.
654. The management of a patient with inoperable pulmonary carcinoma includes:
 A: laser therapy. D: chemotherapy.
 B: radiotherapy. E: none of these.
 C: sonar therapy.

Match the following:

655. hydrothorax A: friction rub.
 656. chylothorax B: congestive heart failure.
 657. pleuritis C: thoracic duct rupture.
 658. empyema D: pseudomonas aeruginosa.
 659. pneumothorax E: emphysematous bleb.

660. Superior mediastinum. A: lymphoma.
661. Anterior mediastinum. B: enteric cyst.
662. Posterior mediastinum. C: thyroid adenoma.
663. Superior vena caval syndrome. A: collateral vessels.
664. Mediastinal emphysema. B: perforation of trachea.
665. Aspiration pneumonia. C: debilitation elderly individuals.
666. Lipid pneumonia. D: mineral oil.
667. Loeffler's pneumonia. E: trichineila spiralis.
668. Bronchiectasis. F: complication of tuberculosis in children.
669. Cystic disease of the lung. G: vanishing lung syndrome.
670. Which of the following might account for the patient's symptoms:
A: septicemia.
B: alkaloses as result of artificial hyperventilation.
C: severe respiratory acidosis.
E: metabolic acidosis.

الحمد لله رب العالمين
سنة الهجرت ١٤٢٥ هـ

BLOOD

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Select the one appropriate answer:

671. Microcytic anemia is not found in:

- | | |
|----------------------------|---------------------------|
| A: hypothyroidism. | D: folic acid deficiency. |
| B: pernicious anemia. | E: chronic infection. |
| C: malabsorption syndrome. | |

672. Thalassemia minor typically demonstrates an increase in:

- | | |
|--------------------------------|------------------|
| A: hemoglobin A. | D: hemoglobin F. |
| B: hemoglobin A ₂ . | E: all of these. |
| C: hemoglobin S. | |

673. One of the following statements concerning Polycythemia Vera is true.

- | | |
|--|-----------------------------|
| A: erythropoietin levels are increased. | D: arterial saturation. |
| B: only the red blood cells are increased. | E: hypoferrmia is uncommon. |
| C: there is usually no splenomegaly. | |

674. A well developed male had on routine examination an RBCs of 8 million, hemoglobin of 18 grams, hematocrit of 61, with normal leucocytes, thrombocytes & O₂ saturation. There was no splenic enlargement. What test might give a clue to the probable diagnosis:

- | | |
|---------------------------|------------------|
| A: splenic aspirate. | D: L.E. test. |
| B: scalene node biopsy. | E: bronchoscopy. |
| C: intravenous pyelogram. | |

675. Thrombocytosis occurs in all the following, except:

- | | |
|---|-----------------------------------|
| A: malignancy. | D: following splenectomy. |
| B: myelofibrosis with myeloid metaplasia. | E: chronic granulomatous disease. |
| C: acute myelocytic leukemia. | |

676. A patient has hypochromic microcytic red blood cells with some target cells. The spleen is somewhat enlarged. The reticulocyte count is 9%. The following procedure is most likely give the definitive diagnosis:

- | | |
|--------------------------------|----------------------------------|
| A: total serum iron. | D: mechanical fragility studies. |
| B: bone marrow examination. | E: serum electrophoresis. |
| C: hemoglobin electrophoresis. | |

677. Bence-Jones protein:

- | |
|---|
| A: related to light chains of immunoglobulin structure. |
| B: occurs in 50-60% of myeloma. |
| C: Precipitated at 55-60 °C. |
| D: can be detected by urine electrophoresis. |
| E: all the above. |

Match the following:

678. Prednisone

679. Vincristine

680. Methotrexate

681. Cytoxan

682. Asparaginase

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 استاذ الباطنة والسكر

A: myelosuppression, hepatitis.

B: defect in protein synthesis, hepatitis, and pancreatitis.

C: peripheral neuropathy, myopathy.

D: cystitis, alopecia.

E: psychosis, peptic ulcer, osteoporosis.

683. Early signs of excessive exposure to X-ray or radium can best be detected by periodic:

A: chest X-ray.

B: urinalysis.

C: liver function test.

D: blood counts.

E: EKG's.

684. Which of the following occurs with chronic lymphocytic leukemia:

A: elevated serum vit. B₁₂.

B: Philadelphia chromosome.

C: skin lesion, positive coombs test and acquired Hypogammaglobulinemia.

D: increased urinary excretion of uric acid.

E: pelger-huet granulocytes.

685. Thalassemia major is characterized by:

A: Mongoloid facies.

B: splenomegaly.

C: hypochromic red blood cells.

D: increased nucleated red cells.

E: all of these.

686. Hereditary spherocytosis is best treated with:

A: iron.

B: liver.

E: Splenectomy.

D: intrinsic factor.

E: none of these.

687. Which of the following is not correct concerning aplastic anemia:

A: can be used by drugs.

B: decreased platelets count.

C: usually associated with splenomegaly.

D: bone marrow may show decreased red cell count.

E: 1/2 of cases are idiopathic.

688. Which of the following is the best test to diagnose pernicious anemia:

A: bone marrow.

B: neurologic exam.

C: schilling test.

D: peripheral smear.

E: R.B.C indices.

689. Eosinophilia is characteristically found in:

A: Hodgkin's disease.

B: Polyarthritis nodosa.

C: parasitic infestation.

D: löffler's syndrome.

E: all of these.

690. Pernicious anemia is associated with all of the following, except:

- A: beefy-red sore tongue.
 B: normal intrinsic factor.
 C: weakness & tingling of the extremities.
 D: vitamin B₁₂ deficiency.
 E: macrocytic anemia.

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691. Which of the following is true of hemophilia:

- A: prolonged prothrombin time.
 B: there is an AHG deficiency.
 C: factor V is lacking.
 D: factor VII is lacking.
 E: none of these.

692. Sternal tenderness is a symptom of:

- A: rheumatoid arthritis.
 B: infectious mononucleosis.
 C: acute leukemia.
 D: subacute bacterial endocarditis.
 E: all of these.

693. In idiopathic thrombocytopenia, the initial treatment should be:

- A: platelet transfusion.
 B: testosterone.
 C: splenectomy.
 D: 6 – mercaptopurine.
 E: glucocorticoids.

694. In sickle cell anemia. The sedimentation rate is characteristically:

- A: unchanged.
 B: accelerated.
 C: diminished.
 D: variable.
 E: none of these.

695. Sickle cell trait:

- A: about 10% of blacks are affected.
 B: hematuria may persist for weeks.
 C: crises occur chiefly in unusual circumstances e.g., congenital heart disease or riding in unpressurized aircraft.
 D: hyposthenuria is common.
 E: all of these.

696. The classic triad of symptoms in pernicious anemia is:

- A: weakness, sore tongue, heartburn.
 B: sore tongue, paresthesias, heartburn.
 C: weakness, dysphagia, paresthesias.
 D: weakness, sore tongue, paresthesias.
 E: dysphagia, sore tongue, paresthesias.

697. Vitamin K deficiency result in:

- A: spoon nails.
 B: bleeding manifestations.
 C: alopecia.
 D: fissured tongue.
 E: jaundice.

698. The diagnosis of lymphsarcoma is established by:

- A: bone marrow aspiration.
 B: bone marrow biopsy.
 C: lymph node biopsy.
 D: pyelography.
 E: all of these.

699. Thrombocytosis is associated with:

A: acute leukemia.

B: bleeding tendency.

C: hemophilia.

D: idiopathic purpura.

E: Purpura simplex.

الهذلول أبو العينين
مستاهة المهندسة مهندي

700. In which of these disease is there not a high incidence of peptic ulcer:

A: cirrhosis of the liver.

B: Cushing's disease.

C: hyperparathyroidism.

D: pernicious anemia.

E: pulmonary emphysema.

701. Cholelithiasis may be due to one of the following:

A: malignancy.

B: high fat diet.

C: cirrhosis of the liver.

D: hemolytic anemia.

E: congestive heart failure.

702. The cell in the body most sensitive to radiation is:

A: the erythrocyte.

B: the basophil.

C: the eosinophil.

D: the lymphocyte.

E: the granulocyte.

703. In man the Ebstein-Barr virus is associated with which of the following disease:

A: Burkitt's lymphoma.

B: cancer of the retropharyngeal space.

C: infectious mononucleosis.

D: A & C.

E: all of these.

704. In sickle cell anemia crisis the prognosis is:

A: complete recovery.

B: recovery with recurrence.

C: recovery after splenectomy.

D: death from intercurrent infection.

E: death from aplastic anemia.

705. The main complication of acute leukemia are:

A: seizures and headache.

B: fractures and bone pain.

C: splenic rupture and peritonitis.

D: infection and bleeding.

E: none of these.

706. Heavy chain (gamma G) disease is:

A: form of Hodgkin's disease.

B: plasma cell dyscrasia.

C: complication of thrombocytopenia.

D: drug hypersensitivity.

E: none of these.

707. Agranulocytosis presents clinically:

A: chills, high fever, prostration.

B: recurrent sore throats.

C: furunculosis.

D: abdominal masses.

E: any of these.

708. Of the following hypersplenism is best described as splenomegaly plus:
- A: Pancytopenia, hypoplastic marrow.
 - B: Pancytopenia, hyperplastic marrow.
 - C: Pancytopenia, fibrotic marrow.
 - D: Pancytopenia, regardless of marrow.
 - E: none of the above.
709. Defective clot retraction and a normal platelets count might be due to:
- A: iron deficiency anemia.
 - B: von willebrand's anemia.
 - C: neoplastic disease.
 - D: osler-weber-rendu syndrome.
 - E: glanzmann's thromboasthenia.
710. Autoimmune hemolytic anemia may show:
- A: positive direct coombs test.
 - B: splenomegaly.
 - C: mild jaundice.
 - D: chills and fever.
 - E: all of these.
711. Initial treatment of autoimmune hemolytic anemia is with:
- A: splenectomy.
 - B: myelosuppressive drugs.
 - C: corticosteroids.
 - D: fresh frozen plasma.
 - E: none of these.
712. Chemical agents capable of inducing hemolysis include:
- A: arsine.
 - B: toluene.
 - C: phenacetin.
 - D: phenyl hydrazine.
 - E: acetylsalicylic acid.
713. In contemporary transfusion practice, the commonest cause of life threatening reaction is:
- A: contaminated blood.
 - B: Rh incompatibility.
 - C: ABO incompatibility.
 - D: allergy.
 - E: reaction to donor WBCs.
714. Characters tics of polycythemia Vera include all but one:
- A: pruritus.
 - B: headaches.
 - C: plethora.
 - D: visual disturbances.
 - E: diastolic hypertension.
715. In chronic lymphocytic leukemia the lymph nodes are characterized by all of the following, except:
- A: early enlargement.
 - B: tender and/or painful enlargement.
 - C: discrete nodes.
 - D: diffuse involvement.
 - E: freely movable.

716. Secondary polycythemia is seen in all of the following, except:
- A: hypernephroma.
 - B: peptic ulcer.
 - C: pulmonary emphysema.
 - D: pulmonary arterial venous aneurysms.
 - E: congenital cyanotic heart disease.
717. In sickle cell anemia there is a greater incidence of gall stones. What other situation might confuse the diagnosis:
- A: icterus.
 - B: sickle cell crisis.
 - C: joint pain.
 - D: coronary infarction.
 - E: perforated viscus.
718. In cases of multiple myeloma the following alterations are frequently present, except:
- A: nitrogen retention.
 - B: hypoproteinemia.
 - C: hypercalcemia.
 - D: protienuria.
 - E: glucosuria.
719. Anemia with persistent reticulocytosis and nucleated red cells in the peripheral blood in the absence of blood loss should make one suspicious of:
- A: folic acid deficiency.
 - B: simple chronic anemia.
 - C: hemolytic anemia.
 - D: anemia of bone marrow failure.
 - E: all of these.
720. The treatment of choice for hereditary spherocytosis is:
- A: transfusion.
 - B: splenectomy.
 - C: thymectomy.
 - D: irradiation.
 - E: none of these.
721. Characteristics of paroxysmal nocturnal hemoglobinuria include all but one of the following:
- A: chronic hemolysis, regardless of the time the patient sleeps.
 - B: the urine passed on arising is usually brown.
 - C: complement is the cause of the lysis.
 - D: the serum iron is usually elevated.
 - E: ham's test is positive.
722. In intravascular clotting or thrombosis the one factor which is not important is:
- A: injury to vessel wall.
 - B: slowing of the blood stream.
 - C: lack of vitamin C.
 - D: increased viscosity of the blood.
 - E: infection.

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723. Which is not true of G-6-PD deficiency:

- A:** most common in blacks, more severe when occurs in non-black.
- B:** drugs which cause hemolysis in G-6-PD deficiency include primaquine, quinine and sulfonamide.
- C:** there is no difference in enzyme activity between older and younger cell populations.
- D:** a simple screening test is available for diagnosis.
- E:** none of the above.

724. Microangiopathic hemolytic anemia refers to hemolysis associated with which of the following:

- A:** thrombotic thrombocytopenia purpura.
- B:** malignant hypertension.
- C:** disseminated carcinoma.
- D:** A & C.
- E:** all of these.

725. All but one of the following concerning iron metabolism are true:

- A:** iron is stored in two forms, i.e., hemosidrin and ferritin.
- B:** iron is transported by the protein transferrin, a beta globulin.
- C:** ferric salts are better absorbed than ferrous.
- D:** with the exception of hemorrhage, iron deficiency anemia in an adult would take years to develop.
- E:** plasma iron shows a diurnal variation, being 30% higher in the morning.

726. Hemolytic anemia is not usually found in:

- A:** G-6-PD.
- B:** thalassemia.
- C:** congenital spherocytic anemia.
- D:** hemoglobin C disease.
- E:** iron deficiency anemia.

727. The treatment of choice in a hemophilic bleeding into a knee joint would be:

- A:** blood transfusion.
- B:** fresh frozen plasma.
- C:** bed rest.
- D:** vitamin K.
- E:** protamine.

728. Hypochromic anemias not caused by iron deficiency include:

- A:** thalassemia.
- B:** hemoglobin C disease.
- C:** chronic lead intoxication.
- D:** A & C.
- E:** all of these.

729. The pigment containing iron is:

- A:** urobilinogen.
- B:** bilirubin.
- C:** hematoidin.
- D:** hemosidrin.
- E:** all of these.

730. Which of the following is true of idiopathic thrombocytopenic purpura:
- A: prolonged bleeding time.
 B: normal prothrombin conversion.
 C: quick clot retraction.
 D: always secondary to viral infections.
 E: normal rumple-leede.

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 مناد الحائفة وشکر

Match the following:

- | | |
|------------------------------|------------------|
| 731. Desquamation | A: measles. |
| 732. Meningoencephalitis | B: rubella |
| 733. Postauricular nodes | C: varciella |
| 734. Streptococcal infection | D: scarlet fever |
| 735. Vesicles in mouth. | E: mumps. |
| 736. Koplik spots | |

737. The crisis of sickle cell anemia may be confused with:

- | | |
|---------------------------|-------------------------|
| A: acute rheumatic fever. | D: acute osteomyelitis. |
| B: acute appendicitis. | E: all of these. |
| C: acute leukemia. | |

738. The one of the following diseases in which examination of the bone marrow is least likely to be helpful in establishment the diagnosis is:

- | | |
|-----------------------|----------------------|
| A: aplastic anemia. | D: hypersplenism. |
| B: leukemia. | E: multiple myeloma. |
| C: Hodgkin's disease. | |

739. A 57 year-old patient presents the following symptoms: for several months he had noticed weakness, sore tongue, acroparesthesias and diarrhea. Examination reveals pallor, absence of position and vibration sensation in the feet, and as atrophic tongue, blood counts shows a microcytic anemia. The one of the following which will cause the best response of reticulocytosis is:

- A: folic acid 20 mgm. Daily.
 B: ferrous sulphate 2 gms daily.
 C: thiamin chloride 100 mgm daily.
 D: transfusion of whole blood 500 cc daily.
 E: none of these.

740. Iron is present in the body in:

- | | |
|----------------|------------------|
| A: ferritin. | D: hemoglobin. |
| B: hemosidrin. | E: all of these. |
| C: myoglobin. | |

741. The usual presenting complaint in Hodgkin's disease is:

- A: fever.
- B: painless enlargement of peripheral lymph nodes.
- C: cough.
- D: abdominal pain.
- E: dyspnea.

742. the treatment of stage 1 Hodgkin's disease is:

- A: intensive irradiation thereby.
- B: surgery on enlarged nodes.
- C: chemotherapy.
- D: none.
- E: transfusion.

Match the following:

- | | |
|---|--|
| 743. Anemia of infection, rheumatoid arthritis. | A: low plasma iron and iron-binding capacity, increased iron stores and decreased marrow sideroblasts. |
| 744. Anemia of renal insufficiency. | B: erythropoietin levels relatively reduced, radioiron marrow transit time reduced. |
| 745. Anemia of myxedema. | C: normocytic or macrocytic anemia |
| 746. Anemia of hepatic disease. | D: blood loss, folate deficiency, alcohol are etiologic factors. |

747. Microcytic anemias may occur in:

- A: hemolytic states.
- B: hypothyroidism.
- C: liver disease.
- D: aplastic anemia.
- E: all of these are correct.

748. Hypochromic microcytic anemia occurs in:

- A: iron deficiency.
- B: folate deficiency.
- C: anemia of infection, cancer and rheumatoid arthritis.
- D: thalassemia.
- E: siderblastic anemia.
- F: all of these.

749. Which of the following statements are false:

- A: the vomiting of blood which is red suggests either massive bleeding or achlorhydria.
- B: blood originating in the intestinal tract beyond the duodenum is usually tarry in appearance.
- C: gastrointestinal bleeding from carcinoma of the stomach is usually massive.
- D: with exception of tuberculosis gross bleeding associated with infection of the urinary tract is unusual.

Match the following:

750. Disorder of coagulation.

A: hemathrosis

751. Disorder of platelets and blood vessels.

B: petechiae.

C: positive family history.

D: traumatic bleeding onset delayed.

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752. The development of reticulocytosis precedes leukocytosis after acute hemorrhage (True OR False).

753. The most common factor in the development of iron deficiency anemia in adult is _____.

754. All of the following are associated with iron deficiency anemia, except:

A: hypochromic microcytic anemia.

E: koilonychias.

B: menstrual disturbances.

F: palpable spleen.

C: esophageal webs causing dysphagia.

G: achlorhydria.

D: dry and inelastic wrinkled skin.

H: elevated reticulocyte count.

755. All of the following are associated with pernicious anemia, except:

A: anisocytosis and poiklocytosis.

B: macrocytosis.

C: hypersegmentation of polyps.

D: the presence of giant metamyelocytes.

E: decreased urinary excretion of methylmalonic acid.

F: anorexia, numbness and tingling of the extremities and sore tongue.

756. The anemia following partial gastrectomy would be expected to be more commonly megaloblastic rather than iron deficiency anemia (True OR False).

Compare thalassemia major with sickle cell anemia by putting "T" for the first disorder and "S" for the latter:

757. _____ anemia is hypochromic and microcytic.

758. _____ red cells are unusually resistant to hemolysis in hypotonic saline solution.

759. _____ hemoglobin F is present at high levels.

760. _____ no splenomegaly in adults.

761. _____ corkscrew like vascular segments seen in the lower bulbar conjunctivae.

762. _____ impaired ability to concentrate urine.

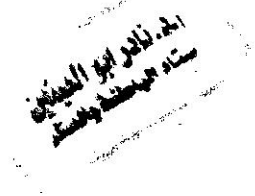
763. _____ an abnormality characterized by a primary defect in the rate of hemoglobin synthesis.

764. all of the following are unusual in aplastic anemia, except:

- A: splenomegaly. D: Hypergammaglobulinemia.
 B: Lymphadenopathy. E: anisocytosis and poiklocytosis.
 C: sternal tenderness. F: ringed sideroblasts not present.

Compare polycythemia vera to erythrocytosis by placing "P" for the first and "E" for the latter:

765. _____ splenic enlargement.
 766. _____ leukocyte alkaline phosphatase is low.
 767. _____ depleted iron stores.
 768. _____ normal leukocyte count and platelets.
 769. _____ renal carcinoma.



770. The treatment of henoch-schönlein purpura includes the use of steroids as the mainstay of treatment (True OR False).

771. A negative family history is strongly against the diagnosis of a hereditary coagulation disorder (True OR False).

772. if a young female develops a circulating anticoagulant directed against factor VIII, which underlying diagnosis is most likely:

- A: lupus erythematosus. C: acute promyelocytic leukemia.
 B: hepatitis. D: none of these.

773. pathologic proteolysis is frequently the initiating cause of the defibrination syndrome:

- A: abrupti placentae.
 B: liver disease.
 C: surgery employing extra-corporeal circulatory devices.
 D: prostatic and pancreatic carcinoma.

Match the following more than one choice may be needed:

- 774. Chronic myelocytic leukemia.**
775. Acute myeloblastic leukemia.
776. Acute lymphoblastic leukemia.
777. Chronic lymphocytic.
- A:** uncommon under the stage of forty
B: primarily a disease of children.
C: ionizing irradiation a predisposing factor.
D: pH.
E: down's syndrome.
F: blast crisis
G: thrombocytopenia unusual except in blast crisis.
H: presentation with bone and joint pain is common.
I: very low remission rate.
J: while spleen is most commonly enlarged and is frequently huge, Lymphadenopathy is not that prominent.
K: meningeal infiltration most common in this variety.
L: parenchymal pulmonary lung infiltrations most uncommon.
M: autoimmune hemolytic anemia.
N: Hypogammaglobulinemia.
O: hyperuricemia not common.
P: busulfan.
Q: steroids and chlorambucil.
R: steroids, vincristine, methotrexate, 6-MP.
S: 6-MP is only proven drug.

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- 778. In order to make a diagnosis of multiple myeloma one must demonstrate an M-component in the serum (True OR False).**
- 779. Multiple myeloma should be considered in patient with all of the following, except:**
A: hypercalcemia and normal alkaline phosphatase. **C:** both.
B: renal failure in the absence of hypertension. **D:** neither.
- 780. The treatment of Hodgkin's disease includes:**
A: irradiation. **D:** steroids.
B: surgical excision. **E:** vinblastine.
C: alkylating agents. **F:** all of these.
- 781. Which of the following statements are false in regard to Hodgkin's disease:**
A: lymphocytosis is common.
B: neutrophilia is common.
C: thrombocytopenia.
D: bone marrow examination is important in diagnosis.
E: eosinophilia is not uncommon.
- 782. All of the following are good prognostic findings in Hodgkin's disease, except:**
A: stage I and IIA. **D:** skin infiltration.
B: lymphocytic predominance. **E:** anemia at the time of diagnosis.
C: nodular sclerosis. **F:** thrombocytopenia.

RHEUMATOLOGY

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Select the one appropriate answer:

- 783.** The most common toxic reactions of gold therapy in the treatment of rheumatoid arthritis are:
- A: nausea & vomiting. D: thrombophlebitis.
 B: agranulocytosis. E: alopecia.
 C: dermatitis & stomatitis.
- 784.** The combination of keratoconjunctivitis sicca, xerostoma & rheumatoid arthritis is found in:
- A: felty's syndrome. D: sjögren's syndrome.
 B: mikulicz' syndrome. E: Reiter's syndrome.
 C: sarcoidosis.
- 785.** Juvenile rheumatoid arthritis may include:
- A: uveitis.
 B: Erythema multiform.
 C: pericarditis or valvular involvement.
 D: enlargement of the LNs, liver & spleen.
 E: all the above.
- 786.** Rheumatoid factor has been identified as:
- A: macroglobulin. D: transport protein.
 B: lipoprotein. E: none of these.
 E: Cellular degradation product.
- 787.** Carpal tunnel syndrome can be caused by:
- A: trauma. D: fibrous sclerosis of tendon sheaths
 B: rheumatoid inflammation. E: all of these.
 C: edema before menses.
- 788.** Rheumatoid spondylitis (ankylosing spondylitis, mariestrumpell disease) is commonly seen most in:
- A: young women.
 B: male patients past 50 years of age.
 C: physically active males between 20 – 30 years of age.
 D: elderly patients of both sexes.
 E: female patients past 50 years of age.
- 789.** Reiter's syndrome is a triad of:
- A: arthritis, gonococcal urethritis, spondylitis.
 B: conjunctivitis, gonococcal urethritis, spondylitis.
 C: conjunctivitis, nongonococcal urethritis, spondylitis.
 D: arthritis, nongonococcal urethritis, spondylitis.
 E: none of the above.