

790. Initial management of rheumatoid arthritis should be:
- A: aspirin. D: Chloroquine.  
 B: prednisone. E: Demerol.  
 C: phenylbutazone.
791. Hematuria can occur in all of the following but:
- A: sickle cell anemia. D: tumor of the bladder.  
 B: renal colic. E: all of these.  
 C: acute glomerulonephritis.
792. The nephrotic syndrome is usually associated with:
- A: nephrosclerosis. D: glomerulonephritis.  
 B: pyelonephritis. E: amoebiasis.  
 C: polycystic disease.
793. Osteoarthritis is properly treated by:
- A: physical therapy and analgesics. D: gold salts.  
 B: vaccines. E: cortisone.  
 C: antibiotics.
794. Hypertrophic osteoarthropathy is common in:
- A: mesothelioma. D: acoustic neuroma.  
 B: dermoid. E: none of these.  
 C: leiomyomata uteri.
795. Hematuria is typically present in:
- A: bichloride of mercury injury to the kidney. D: acute pyelonephritis.  
 B: acute diffuse glomerulonephritis. E: rheumatic fever.  
 C: toxemia of pregnancy.
796. Shift, aching joints, worse in the morning, is most characteristic of:
- A: tuberculous arthritis. D: suppurative arthritis.  
 B: osteoarthritis. E: rheumatoid arthritis.  
 C: gouty arthritis.
797. In felty's syndrome, splenomegaly and leukopenia are associated with:
- A: myelofibrosis. D: portal hypertension.  
 B: urethritis and conjunctivitis. E: none of these.  
 C: rheumatoid arthritis.

**Match the following:**

798. Hyperclacemic nephropathy. A: papillary necrosis.  
 799. Radiation nephritis B: metastatic bone disease.  
 800. Hypokalemia nephropathy. C: malignant hypertension.  
 801. Hereditary nephritis. D: nerve deafness.  
 802. Phenacetin nephritis. E: renal tubular acidosis.  
 803. Heat stroke F: acute renal failure.

الدكتور أبو الصديق  
مستاد طباعة ومطبوع

- 804.** During an exacerbation in chronic glomerulonephritis:  
**A:** serum complement drops.  
**B:** proteinuria increases.  
**C:** hematuria increases abruptly.  
**D:** transient edema & hypertension appear.  
**E:** all of the above.
- 805.** Heberden's nodes are a sign in:  
**A:** rheumatoid arthritis.  
**B:** Marie strumpell arthritis.  
**C:** osteoarthritis.  
**D:** gout.  
**E:** rheumatic fever.
- 806.** Steroids are contraindicated in all of the following, except:  
**A:** osteoporosis.  
**B:** history of psychosis.  
**C:** history of melena.  
**D:** herpes simplex conjunctivitis.  
**E:** Polyarthritis.
- 807.** The joint pathology most characteristic of rheumatoid arthritis is:  
**A:** cartilage degeneration.  
**B:** inflammation of the synovium and joint capsule.  
**C:** eburnation of subchondral bone.  
**D:** none of the above.
- 808.** Raynaud's phenomenon occurs in association with:  
**A:** thrombangitis obliterans.  
**B:** cervical rib.  
**C:** collagen disease.  
**D:** cryoglobulinemia.  
**E:** all of these.
- 809.** A common uricosuric agent in the treatment of gout is:  
**A:** colchicine.  
**B:** phenylbutazone.  
**C:** indomethacin.  
**D:** probenecid.  
**E:** Allopurinol.
- 810.** The anemia of rheumatoid arthritis best treated with:  
**A:** transfusions.  
**B:** folic acid.  
**C:** vitamin B<sub>12</sub>.  
**D:** corticosteroids.  
**E:** all of these.
- 811.** After discontinuance of cortisone for a prolonged period in the management of rheumatoid arthritis, the antirheumatic benefits:  
**A:** always persist indefinitely.  
**B:** promptly disappear in the majority of cases.  
**C:** very slowly disappear in all cases.  
**D:** will not occur with subsequent use.  
**E:** none of the above.

- 812.** Cortisone and corticotropin are beneficial for patients with rheumatoid arthritis because they:
- A: reduce the inflammation.  
 B: cure the rheumatic process.  
 C: rebuild joint cartilage.  
 D: produce diabetes.  
 E: diphtheria.
- 813.** Patients with chronic tophaceous gout:
- A: rarely die as a result of their disease.  
 B: rarely have severe arteriosclerosis.  
 C: seldom have articular destruction.  
 D: frequently have related renal disease.  
 E: none of the above are relevant.
- 814.** Which the following is consistent with a diagnosis of gout:
- A: urinary findings that clear with streptomycin.  
 B: pain relieved by aspirin.  
 C: pain relieved by colchicine.  
 D: pain relieved by promptly by flexin.  
 E: none of the above.
- 815.** Of the following skin disease the one with which rheumatoid arthritis is frequently enough associated to be recognized as clinical syndrome is:
- A: herpes.  
 B: psoriasis.  
 C: seborrhea.  
 D: scabies.  
 E: atopic dermatitis.
- 816.** Of the following, the correct answer is:
- A: rheumatoid arthritis is predominantly a disease of the female sex, the incidence being roughly 3 females to 1 male.  
 B: patients with rheumatoid arthritis are about evenly distributed between male and female. The disease shows no sex predominance.  
 C: Marie strumpell spondylosis (rheumatoid spondylosis) shows a marked difference in sex distribution, the disease affecting females in a ratio to males of about ten to one.  
 D: the disease, gout, does not occur more frequently in males than in females, the sex distribution being about equal.  
 E: none of these.
- 817.** Tuberculosis arthritis is characteristically:
- A: monoarticular in distribution and usually evidences very little inflammation, i.e., heat and redness.  
 B: polyarticular in distribution and usually involves the smaller joints.  
 C: associated with high fever and involvement of the temporomandibular joints.  
 D: associated with involvement of the great toe.  
 E: almost always in spine.

د. ناصر ابو العيني  
 مدير المستشفى العسكري

الد. ناصر أبو العيشة  
 استاذ العيضة والسكر

- 818.** Of the following tests, the one which would be most diagnostic of rheumatoid arthritis is:  
**A:** antistreptolysin O determination.  
**B:** blood calcium & phosphorus determination.  
**C:** erythrocyte sedimentation test.  
**D:** rheumatoid factor.  
**E:** lupus prep.
- 819.** Cortisone may cause:  
**A:** marble bone.  
**B:** bone cysts.  
**C:** milkman's syndrome.  
**D:** osteoporosis.  
**E:** osteomalacia.
- 820.** It is generally agreed that the cause of osteoarthritis is:  
**A:** the series of physiological changes which occur in a joint when it is subjected to prolonged and often repeated injury and wear and tear.  
**B:** intestinal toxicity.  
**C:** a chronic infectious process.  
**D:** a prolonged allergy which involves the joints.  
**E:** pathologic metabolic changes.
- 821.** Lipping and osteophyte formation of the spine by x-ray examination is characteristic and diagnosis of:  
**A:** Marie strumpell spondylosis or rheumatoid arthritis of the spine.  
**B:** gonorrheal arthritis of the spine.  
**C:** metastatic invasion of the spine.  
**D:** osteoarthritis of the spine.  
**E:** Reiter's syndrome.
- 822.** An elderly man presents with chronic rheumatoid arthritis renal failure and hepatosplenomegaly the most likely diagnosis is:  
**A:** scleroderma.  
**B:** lipid nephrosis.  
**C:** thrombosis of portal vein.  
**D:** banti's syndrome.  
**E:** secondary amyloidosis.
- 823.** Which of the following is most accurate concerning chronic tophaceous gout:  
**A:** no sex predilection.  
**B:** sheep cell agglutination positive.  
**C:** frequent remissions and exacerbation.  
**D:** elevated blood uric acid.  
**E:** none of these.
- 824.** Colchicine is the drug of choice in:  
**A:** rheumatic fever.  
**B:** rheumatoid arthritis.  
**C:** gonorrheal arthritis.  
**D:** acute gout.  
**E:** acute leukemia.
- 825.** The one of the following diseases involving the joints of which subcutaneous nodules are characteristic is:  
**A:** gonorrheal arthritis.  
**B:** osteoarthritis.  
**C:** rheumatic fever.  
**D:** tuberculous arthritis.  
**E:** Reiter's syndrome.

## FEVER

مركز الدكتور ابو العيون  
 طباعة الطباعة والنشر

**Select the one appropriate answer:**

**826.** In malaria :

- A: blood leukocyte count is high.
- B: plasmodia are usually demonstrable in blood smears.
- C: spleen is seldom palpable.
- D: man is the host.
- E: less than 10 million cases now occur annually.

**827.** Blood culture in thyroid fever is generally positive during the:

- A: incubation period.
- B: first week of sickness.
- C: second week of sickness.
- D: third week of sickness.
- E: fourth week of sickness.

**828.** The incubation period of the common cold is:

- A: 1 – 4 days.
- B: 5 – 7 days.
- C: 8 – 14 days.
- D: 15 – 21 days.
- E: not known.

**829.** The following are causes of hyperthermia, except:

- A: delirium tremens.
- B: myxedema.
- C: hypoglycemia.
- D: barbiturate intoxication.
- E: long exposure to cold.

**830.** Common symptoms of adenoviral infections include:

- A: giant cell pneumonia.
- B: fever, pharyngitis, cervical adenopathy.
- C: Myocarditis and encephalitis.
- D: none of these.
- E: all of these.

**831.** In the treatment of malaria, primaquine is used:

- A: for the exoerythrocytic phase.
- B: in the treatment of falciparum infections.
- C: in the treatment of tertian and quartan malaria.
- D: A & C.
- E: all of these.

**832.** Blackwater fever (acute hemolysis with subsequent hemoglobinuria) occur when:

- A: p. falciparum is treated with quinine.
- B: primaquine is used in conjunction with G 6 – PD deficiency.
- C: p. vivax is treated with Chloroquine.
- D: p. ovale is treated with Chloroquine.
- E: none of these.

**833.** Of the following infections, the one which black water fever is most likely to occur is:

- A: leishmaniasis.
- B: vivax malaria.
- C: quartan malaria.
- D: falciparum malaria.
- E: none of these.

- 834.** Typhoid carriers are mostly due to persistent infection of the:  
 A: stomach. D: appendix.  
 B: gall bladder. E: urine.  
 C: cecum.
- 835.** The most effective way of eliminating the carrier state of typhoid bacilli is:  
 A: furoxone therapy. D: small bowel resection.  
 B: cholectysectomy. E: sulfadiazine.  
 C: frequent cathartics.
- 836.** The most important lab test in a child with a sore throat and high temperature is:  
 A: blood count. D: throat culture.  
 B: urinalysis. E: EKG.  
 C: heterophile agglutination.
- 837.** Brucellosis is contracted chiefly from:  
 A: rates. D: horses.  
 B: guinea pig. E: unpasteurized milk.  
 C: rabbits.
- 838.** Typhoid has an incubation period of:  
 A: 2 – 5 days. D: 15 – 20 days.  
 B: 5 – 10 days. E: 20 – 25 days.  
 C: 10 – 15 days.
- 839.** The diagnosis of vivax malaria is established by:  
 A: the temperature curve assumes a tertian pattern.  
 B: there is a history of exposure in an endemic area, relapses of fever which respond to quinine, leukopenia and splenomegaly with attacks.  
 C: the spleen and liver become enlarged.  
 D: p.vivax is demonstrated in a single field of a thin blood film.  
 E: if specific skin test are positive.
- 840.** A petechial eruption is most likely to be found in:  
 A: h. influenza meningitis. D: coccidioidomycosis.  
 B: typhoid fever. E: all of these.  
 C: meningococcal meningitis.
- 841.** Streptomycin is most disappointing in the treatment of:  
 A: colon bacillus pyelitis. D: typhoid fever.  
 B: friedländer's pneumonia. E: tuberculosis.  
 C: influenza meningitis.
- 842.** The drug of choice for the termination of an acute attack of vivax malaria:  
 A: quinine. D: plasmochin.  
 B: Chloroquine and primaquine. E: daranide.  
 C: totaquine.

## NEPHROLOGY

الدكتور أبو المينين  
مستاد الطباعة والنشر

**Select the one appropriate answer:**

- 843.** In chronic uremia the calcium & phosphorus changes are:  
**A:** both increased. **D:** high calcium & low phosphorus.  
**B:** both decreased. **E:** high phosphorus & low calcium.  
**C:** variable.
- 844.** Severe hypokalemia may result from:  
**A:** diuretic therapy. **D:** adrenocortical insufficiency.  
**B:** chronic renal acidosis. **E:** all of these.  
**C:** respiratory alkalosis.
- 845.** Pseudohyponatremia is a spurious reduction in sodium concentration occurring with:  
**A:** hyperlipidemia or hypoproteinemia. **D:** psychogenic polydypsia.  
**B:** congestive heart failure. **E:** oliguria or cirrhosis of the liver.  
**C:** Addison's disease.
- 846.** Which of the following is most likely to cause alkalosis:  
**A:** hyperventilation.  
**B:** pulmonary edema.  
**C:** pulmonary fibrosis.  
**D:** suppression of respiratory center by morphine.  
**E:** nephrosis.
- 847.** Oliguria is defined as:  
**A:** no urinary output. **D:** less than 300 ml. daily.  
**B:** less than 100 ml. daily. **E:** less than 400 ml. daily.  
**C:** less than 200 ml. daily.
- 848.** Symptoms of uremia include all but one of the following:  
**A:** paresthesias. **D:** lethargy.  
**B:** pruritus. **E:** diplopia.  
**C:** anorexia and vomiting.
- 849.** The cause of edema in the nephrotic stage of chronic diffuse glomerulonephritis is:  
**A:** increased venous pressure.  
**B:** hypoproteinemia & salt retention.  
**C:** increased capillary permeability.  
**D:** inability of the kidney to excrete sodium.  
**E:** sodium retention.
- 850.** The nephrotic syndrome occurs in all, except:  
**A:** diabetes. **D:** glomerulonephritis.  
**B:** multiple myeloma. **E:** hypothyroidism.  
**C:** syphilis of kidney.

- 851.** The chance of complete cure in a child with acute glomerulonephritis:  
**A:** 95%. **D:** 40%.  
**B:** 80%. **E:** 20%.  
**C:** 60%.
- 852.** lipid nephrosis is characterized by all but one:  
**A:** protienuria. **D:** hypercholesterolemia.  
**B:** edema. **E:** hypoproteinemia.  
**C:** double refractile bodies in urine.
- 853.** lipid nephrosis is characterized by all but one:  
**A:** low serum proteins. **D:** low BMR.  
**B:** albuminuria. **E:** hypercholesterolemia.  
**C:** hypertension.
- 854.** Acute glomerulonephritis may be associated with:  
**A:** encephalopathy. **D:** glycosuria.  
**B:** elevated serum cholesterol. **E:** none of these.  
**C:** increased sweat chlorides.
- 855.** Renal papillary necrosis occurs classically in patients with:  
**A:** diabetes mellitus.  
**B:** pyelonephritis secondary to urinary tract obstruction.  
**C:** excessive phenacetin.  
**D:** A & C.  
**E:** all of the above.
- 856.** Which of the following causes sodium loss in the kidneys (salt losing nephritis):  
**A:** chronic pyelonephritis. **D:** adult polycystic disease.  
**B:** analgesic nephropathy. **E:** all of these.  
**C:** medullary cystic disease.
- 857.** Hypomagnesaemia of significant degree is usually caused by:  
**A:** hemodialysis. **D:** acidosis.  
**B:** diuretic therapy. **E:** tissue trauma.  
**C:** low calcium diet.
- 858.** Acute renal failure is least likely to occur in:  
**A:** shock. **D:** extensive burns.  
**B:** incompatible blood transfusion. **E:** severe febrile disease.  
**C:** pregnancy.
- 859.** Of the following disease, the one most likely to be followed by glomerulonephritis is:  
**A:** mumps. **D:** scarlet fever.  
**B:** diphtheria. **E:** measles.  
**C:** chicken pox.



860. One of the following statements concerning chronic glomerulonephritis is untrue:
- A: it is usually the sequel of post-streptococcal glomerulonephritis.  
 B: proteinuria is invariable.  
 C: histologically the lesion is proliferative glomerulitis leading to fibrosis.  
 D: survival may be prolonged for 30 or more years.  
 E: nephrotic syndrome, hypertension and renal failure are the main symptoms.
861. Which of the following is true of minimal change glomerular disease (lipoid nephrosis):
- A: an early form of glomerulonephritis.  
 B: electron microscopy demonstrates no change in the glomeruli.  
 C: hypertension is usual.  
 D: chief characteristics are proteinuria, hypoalbuminemia and hypercholesterolemia.
862. A 10 year-old has a history of severe sore throat two weeks prior to admission, with findings on admission of hypertension, hematuria and edema. The most likely diagnosis is:
- A: rheumatic fever.  
 B: pyelonephritis.  
 C: hypernephroma.  
 D: glomerulonephritis.  
 E: none of these.
863. Hematuria and costovertebral angle pain are prominent features of:
- A: chronic diffuse glomerulonephritis.  
 B: polycystic disease of the kidney.  
 C: cystitis.  
 D: prostatitis.  
 E: all of these.

**Match the following:**

864. Serum phosphorus  
 865. Serum chloride.  
 866. Serum potassium.  
 867. Serum iodine.
- A: 136 – 145 mg/L.  
 B: 3.5 – 5.0 mEq/L.  
 C: 100 – 106 mEq/L.  
 D: 3.0 – 4.5 mg/L.

**Match the following more than one choice may be needed:**

868. Polyuria  
 869. Nocturia.  
 870. Oliguria.
- A: potassium depletion.  
 B: adrenal insufficiency  
 C: hypercalcemia.  
 D: dehydration.  
 E: cirrhosis of the liver.  
 F: solute loads.

871. The extracellular water represents one-third of total body water or 16 – 20% of body weight (True OR False).

**872.** Hypotonic dehydration is probably more significant in terms of body physiological than any other type of dehydration because:

- A:** early in development of it there is sacrifice of volume in the interests of tonicity, only later leading to volume needs over tonicity requirements.  
**B:** the deficit in volume of extracellular water is much greater than would generally be thought because there is a shift of fluid into cells in the interest of isotonicity.  
**C:** both.  
**D:** neither.

**Match the following more than one choice may be needed:**

**873.** Hypertonic dehydration.

**A:** adrenal cortical insufficiency.

**874.** Hypotonic dehydration.

**B:** chronic renal disease.

**875.** Isotonic dehydration.

**C:** solute diuresis.

**D:** losses from GI tract.

**E:** comatose state.

**F:** diabetes mellitus.

**G:** sweating.

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**876.** All of the following are associated with metabolic alkalosis, except:

**A:** ingestion of sodium bicarbonate.

**D:** steroid therapy.

**B:** loss of gastric secretions.

**E:** diarrhea

**C:** diuretic therapy.

**Match the following:**

**877.** respiratory acidosis

**A:** hypochromic acidosis

**878.** metabolic acidosis

**B:** increased renal excretion of bicarbonate, sodium and potassium, decreased excretion of chloride.

**879.** metabolic alkalosis

**C:** paradoxical aciduria.

**880.** Respiratory alkalosis.

**D:** total reabsorption of bicarbonate and increase in net excretion of acid as titratable acid and ammonia.

**881.** All of the following are renal diseases which may be present without proteinuria, except:

**A:** polycystic disease.

**D:** glomerulonephritis.

**B:** pyelonephritis.

**E:** hypokalemia nephropathy.

**C:** arthritis.

**882.** The complication of acute tubular necrosis include all of the following, which is the most frequent:

**A:** congestive heart failure.

**D:** infection.

**B:** diastolic hypertension.

**E:** anemia.

**C:** potassium intoxication.

**F:** coma & convulsion.

- 883.** All of the following suggest acute tubular necrosis, except:
- A: urine osmolarity not significantly higher than that of the plasma.
  - B: urinary sodium usually less than 30 mEq/L.
  - C: no response to a fluid load or mannitol infusion.
  - D: stepwise increase in BUN.
- 884.** Complete anuria for more than 48 hours is unusual and if found should lead one to a diagnosis of all of the following, except:
- A: obstruction.
  - B: bilateral renal arterial embolization or thrombosis.
  - C: cortical necrosis.
  - D: acute glomerulonephritis.
  - E: nephrotoxic renal failure.

د. خالد أبو العينين  
 استاذ الطب الباطني  
 كلية الطب والعلوم  
 جامعة القاهرة

### **Answer (True OR False):**

- 885.** Peripheral neuropathy is consistent with acute renal failure.
- 886.** Nausea and vomiting are common complication of uremia which usually results in alkalosis from HCl loss from the stomach.
- 887.** In severe renal failure the blood uric acid usually does not rise above 10mg%, and secondary gout is rare.
- 888.** All of the following are associated etiologic factors involved in urinary tract infections, except:
- |                          |                        |
|--------------------------|------------------------|
| A: age and sex.          | E: instrumentation.    |
| B: pregnancy.            | F: hypertension.       |
| C: diabetes mellitus.    | G: neurologic bladder. |
| D: obstructive uropathy. |                        |
- 889.** The nephrotic syndrome probably does not occur in multiple myeloma unless complicated by amyloidosis (**True OR False**).
- 890.** All the following are true of nephrotic syndrome, except:
- A: pyelonephritis and nephrosclerosis are causes of nephrotic syndrome.
  - B: serum calcium is normal.
  - C: plasma fibrinogen and sedimentation rate are elevated.
  - D: there is a low PBI and BMR.
  - E: the plasma volume is decreased or normal.
- 891.** In which of the following types of nephrotic syndrome are steroids indicated:
- |                                  |                           |
|----------------------------------|---------------------------|
| A: idiopathic (light negative).  | D: lupus erythematosus.   |
| B: amyloidosis.                  | E: renal vein thrombosis. |
| C: kimmelstiel –Wilson syndrome. |                           |

Case history (**question 892 – 893**) A 56 year-old male presents with azotemia, nephrotic syndrome, normotension and collateral abdominal veins with upward flow, gross painless hematuria had recurred 6 months previously.

**892.** The diagnosis may be made by \_\_\_\_\_.

**893.** the most likely underlying diagnosis is:

**A:** hypernephroma.

**B:** periarteritis.

**C:** papillary necrosis.

**D:** amyloidosis.

**E:** thrombophlebitis.

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**894.** In 35% of those patients affected by pre-eclampsia hypertension is persistent after delivery (True OR False).

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Case history (**question 895**) A 55 year-old male presents hypertension palpable liver and spleen uremia and a history of recurrent hematuria. A liver spleen radioisotope scan is normal except for cold areas noted in liver. There is a right hemiparesis which occurred a few years in the past. There is no residual urine found.

**895.** The diagnosis is probably \_\_\_\_\_.

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**896.** The earliest sign of a therapeutic response to steroids in nephrotic syndrome is:

**A:** loss of edema.

**B:** rise in serum albumin.

**C:** reduction in proteinuria.

**D:** increase in BUN.

**E:** increase in glomerular infiltration rate.

الدكتور أيوب العبدون  
مستشفى البصرة

## ANSWER KEY

### C.V.S.

- |       |       |                  |               |
|-------|-------|------------------|---------------|
| 1. B. | 43.A. | 86.C.            | 129. G.       |
| 2. D. | 44.D. | 87.B.            | 130. F.       |
| 3. C. | 45.E. | 88.C.            | 131. E.       |
| 4. A. | 46.C. | 89.B.            | 132. D.       |
| 5. D. | 47.E. | 90.C.            | 133. C.       |
| 6. B. | 48.E. | 91.B.            | 134. B.       |
| 7. B. | 49.B. | 92.E.            | 135. A.       |
| 8. B. | 50.D. | 93.D.            | 136. More.    |
| 9. C. | 51.C. | 94.A.            | 137. G.       |
| 10.D. | 52.A. | 95.D.            | 138. B, D, E. |
| 11.A. | 53.D. | 96.D.            | 139. M.       |
| 12.D. | 54.E. | 97.A.            | 140. M.       |
| 13.C. | 55.B. | 98.E.            | 141. M.       |
| 14.B. | 56.B. | 99.A.            | 142. M.       |
| 15.A. | 57.E. | 100. B.          | 143. m.       |
| 16.E. | 58.B. | 101. C.          | 144. m.       |
| 17.C. | 59.E. | 102. A.          | 145. m.       |
| 18.B. | 60.E. | 103. B.          | 146. m.       |
| 19.B. | 61.E. | 104. E.          | 147. m.       |
| 20.B. | 62.B. | 105. D.          | 148. T.       |
| 21.D. | 63.A. | 106. C.          | 149. F.       |
| 22.D. | 64.E. | 107. F.          | 150. T.       |
| 23.C. | 65.D. | 108. T.          | 151. T.       |
| 24.D. | 66.C. | 109. A, B, C, D. | 152. F.       |
| 25.B. | 67.B. | 110. C.          | 153. T.       |
| 26.C. | 68.C. | 111. B.          | 154. T.       |
| 27.E. | 69.C. | 112. A.          | 155. T.       |
| 28.B. | 70.B. | 113. D.          | 156. T.       |
| 29.A. | 71.D. | 114. T.          | 157. T.       |
| 30.C. | 72.E. | 115. E.          | 158. E.       |
| 31.D. | 73.B. | 116. D.          | 159. F.       |
| 32.D. | 74.A. | 117. C.          | 160. T.       |
| 33.D. | 75.A. | 118. B.          | 161. T.       |
| 34.E. | 76.A. | 119. A.          | 162. T.       |
| 35.B. | 77.B. | 120. D.          | 163. T.       |
| 36.A. | 78.D. | 121. D.          | 164. T.       |
| 37.D. | 79.E. | 122. D.          | 165. T.       |
| 38.D. | 80.D. | 123. F.          | 166. T.       |
| 39.A. | 81.E. | 124. E.          | 167. T.       |
| 40.D. | 82.D. | 125. D.          | 168. T.       |
| 41.D. | 83.C. | 126. C.          | 169. E.       |
| 42.B. | 84.A. | 127. B.          | 170. D.       |
|       | 85.C. | 128. A.          | 171. A.       |

- 172. C.
- 173. B.
- 174. T.
- 175. Yes.
- 176. Yes.
- 177. Yes.
- 178. Yes.
- 179. Yes.
- 180. Yes.
- 181. Yes.
- 182. Yes.
- 183. D.
- 184. D.
- 185. T.
- 186. T.
- 187. T.
- 188. F.
- 189. T.
- 190. F.
- 191. E.
- 192. D.
- 193. C.
- 194. A, B.
- 195. A.
- 196. A, B.
- 197. T.
- 198. T.
- 199. T.
- 200. T.
- 201. F.
- 202. A.
- 203. B.
- 204. C.
- 205. E.
- 206. C.
- 207. C.
- 208. T.

**GIT & Liver**

- 209. D.
- 210. B.
- 211. C.
- 212. E.
- 213. E.
- 214. E.

- 215. B.
- 216. C.
- 217. C.
- 218. B.
- 219. B.
- 220. E.
- 221. B.
- 222. E.
- 223. C.
- 224. E.
- 225. C.
- 226. A.
- 227. E.
- 228. B.
- 229. B.
- 230. A.
- 231. C.
- 232. D.
- 233. B.
- 234. A.
- 235. D.
- 236. E.
- 237. B.
- 238. E.
- 239. B.
- 240. E.
- 241. E.
- 242. B.
- 243. E.
- 244. A.
- 245. E.
- 246. A.
- 247. D.
- 248. C.
- 249. E.
- 250. E.
- 251. C.
- 252. C.
- 253. D.
- 254. D.
- 255. E.
- 256. E.
- 257. B.
- 258. D.
- 259. A.

- 260. E.
- 261. D.
- 262. B.
- 263. C.
- 264. C.
- 265. A.
- 266. E.
- 267. C.
- 268. D.
- 269. D.
- 270. D.
- 271. B.
- 272. E.
- 273. A.
- 274. A.
- 275. B.
- 276. D.
- 277. A.
- 278. C.
- 279. C.
- 280. D.
- 281. A.
- 282. B.
- 283. B.
- 284. E.
- 285. A.
- 286. C.
- 287. A.
- 288. A.
- 289. C.
- 290. B.
- 291. C.
- 292. A.
- 293. E.
- 294. D.
- 295. B.
- 296. F.
- 297. F.
- 298. T.
- 299. T.
- 300. F.
- 301. T.
- 302. C.
- 303. B.
- 304. C.

- 305. T.
- 306. T.
- 307. T.
- 308. T.
- 309. T.
- 310. E.
- 311. D.
- 312. C.
- 313. A.
- 314. B.
- 315. B.
- 316. T.
- 317. T.
- 318. G.
- 319. A.
- 320. B.
- 321. C.
- 322. D.
- 323. B.
- 324. C.
- 325. A.
- 326. F.
- 327. T.
- 328. F.
- 329. T.
- 330. C.
- 331. T.
- 332. T.
- 333. T.
- 334. T.
- 335. T.
- 336. E.
- 337. A.
- 338. A.
- 339. Should not.
- 340. E.
- 341. T.
- 342. F.
- 343. T.
- 344. T.
- 345. F.
- 346. B.
- 347. A.
- 348. B.
- 349. A.

- 350. T.
- 351. A, E.
- 352. C, D, E.
- 353. A, B, D, F.
- 354. A, D.
- 355. A, E.
- 356. B.
- 357. A.
- 358. A.
- 359. A, D.
- 360. A, E.
- 361. .
- A: Sarcoidosis.
- B: Miliary TBC.
- C: Brucellosis.
- D: Beryllidosis.
- 362. F.
- 363. C.
- 364. F.
- 365. E.
- 366. C.

**Endocrine**

- 367. E.
- 368. E.
- 369. D.
- 370. B.
- 371. C.
- 372. D.
- 373. E.
- 374. C.
- 375. E.
- 376. E.
- 377. A.
- 378. D.
- 379. C.
- 380. E.
- 381. D.
- 382. A.
- 383. E.
- 384. A.
- 385. D.
- 386. C.
- 387. B.
- 388. A.

- 389. D.
- 390. E.
- 391. E.
- 392. C.
- 393. A.
- 394. B.
- 395. C.
- 396. E.
- 397. B.
- 398. D.
- 399. B.
- 400. C.
- 401. A.
- 402. E.
- 403. B.
- 404. C.
- 405. D.
- 406. D.
- 407. C.
- 408. B.
- 409. A.
- 410. B.
- 411. D.
- 412. A.
- 413. E.
- 414. E.
- 415. E.
- 416. E.
- 417. E.
- 418. E.
- 419. E.
- 420. E.
- 421. C.
- 422. C.
- 423. C.
- 424. D.
- 425. C.
- 426. E.
- 427. B.
- 428. C.
- 429. B.
- 430. D.
- 431. D.
- 432. C.
- 433. C.

- 434. B.
- 435. B.
- 436. A.
- 437. A.
- 438. E.
- 439. D.
- 440. C.
- 441. B.
- 442. D.
- 443. C.
- 444. B.
- 445. A.
- 446. A.
- 447. E.
- 448. A.
- 449. A.
- 450. C.
- 451. B.
- 452. A.
- 453. A.
- 454. C.
- 455. A.
- 456. E.
- 457. D.
- 458. C.
- 459. B.
- 460. D.
- 461. B.
- 462. E.
- 463. A.
- 464. C.
- 465. D.
- 466. C.
- 467. A.
- 468. Myxedema.
- 469. Presence of chromophobe adenoma.
- 470. chromophobe adenoma.
- 471. Temporal.
- 472. Craniopharyngioma.
- 473. C.

- 474. D.
- 475. E.
- 476. Sheehan's syndrome.
- 477. A.
- 478. F.
- 479.
- A: Psychogenic polydipsia.
- B: Chronic nephritis.
- C: Diabetes mellitus.
- D: Hypercalcemia.
- 480. A.
- 481. .
- A: N.
- B: NM.
- C: PA.
- D: PA.
- E: PA.
- F: NM.
- G: N.
- H: PA.
- 482. A, B, F, H, I, J.
- 483. B, C, E, G.
- 484. E.
- 485. Hashimoto's strama.
- 486. T.
- 487. D.
- 488. F.
- 489. A.
- 490. B.
- 491. C.
- 492. A, E.
- 493. D, C.
- 494. B.
- 495. A.
- 496. Insulin.
- 497. F.
- 498. D.
- 499. D.

مركز الامتحانات  
بجامعة القاهرة  
الكلية الطبية  
الطب البشري

- 500. T.
- 501. T.
- 502. F.
- 503. B.
- 504. B.
- 505. Pheochromocytoma.
- 506. Addison's disease.

**Neurology**

- 507. D.
- 508. C.
- 509. D.
- 510. C.
- 511. E.
- 512. B.
- 513. B.
- 514. A.
- 515. D.
- 516. C.
- 517. A.
- 518. B.
- 519. E.
- 520. A.
- 521. C.
- 522. E.
- 523. A.
- 524. D.
- 525. E.
- 526. A.
- 527. C.
- 528. A.
- 529. E.
- 530. B, D, C, E, A.
- 531. A.
- 532. B.
- 533. A.
- 534. F.
- 535. C.
- 536. D.
- 537. E.
- 538. E.
- 539. B.

- 540. E.
- 541. E.
- 542. E.
- 543. B.
- 544. C.
- 545. D.
- 546. A.
- 547. E.
- 548. B.
- 549. C.

**Chest**

- 550. D.
- 551. C.
- 552. E.
- 553. C.
- 554. B.
- 555. E.
- 556. D.
- 557. C.
- 558. A.
- 559. D.
- 560. D.
- 561. D.
- 562. B.
- 563. B.
- 564. E.
- 565. A.
- 566. D.
- 567. E.
- 568. D.
- 569. D.
- 570. E.
- 571. C.
- 572. D.
- 573. D.
- 574. C.
- 575. D.
- 576. D.
- 577. E.
- 578. B.
- 579. C.
- 580. C.
- 581. E.
- 582. A.

- 583. E.
- 584. C.
- 585. E.
- 586. E.
- 587. E.
- 588. E.
- 589. C.
- 590. A.
- 591. D.
- 592. C.
- 593. A.
- 594. B.
- 595. C.
- 596. C.
- 597. E.
- 598. E.
- 599. B.
- 600. A.
- 601. E.
- 602. D.
- 603. D.
- 604. D.
- 605. C.
- 606. A.
- 607. A.
- 608. C.
- 609. D.
- 610. A.
- 611. D.
- 612. D.
- 613. D.
- 614. C.
- 615. E.
- 616. E.
- 617. D.
- 618. E.
- 619. D.
- 620. A.
- 621. A.
- 622. D.
- 623. A.
- 624. A.
- 625. J.
- 626. F.
- 627. D.

- 628. T.
- 629. T.
- 630. F.
- 631. F.
- 632. E.
- 633. A.
- 634. A.
- 635. A.
- 636. B.
- 637. D.
- 638. D.
- 639. F.
- 640. B.
- 641. E.
- 642. D.
- 643. C.
- 644. A.
- 645. E.
- 646. E.
- 647. D.
- 648. B.
- 649. A.
- 650. B.
- 651. A.
- 652. C.
- 653. E.
- 654. C.
- 655. B.
- 656. C.
- 657. A.
- 658. D.
- 659. E.
- 660. C.
- 661. A.
- 662. B.
- 663. A.
- 664. B.
- 665. C.
- 666. D.
- 667. E.
- 668. F.
- 669. G.
- 670. B.



**Blood**

- 671. E.
- 672. B.
- 673. D.
- 674. C.
- 675. C.
- 676. C.
- 677. E.
- 678. E.
- 679. C.
- 680. A.
- 681. D.
- 682. B.
- 683. D.
- 684. C.
- 685. E.
- 686. C.
- 687. C.
- 688. C.
- 689. E.
- 690. B.
- 691. B.
- 692. C.
- 693. E.
- 694. C.
- 695. E.
- 696. D.
- 697. B.
- 698. C.
- 699. B.
- 700. D.
- 701. D.
- 702. D.
- 703. E.
- 704. B.
- 705. D.
- 706. B.
- 707. A.
- 708. B.
- 709. E.
- 710. E.
- 711. C.
- 712. E.
- 713. C.

- 714. E.
- 715. B.
- 716. B.
- 717. B.
- 718. E.
- 719. C.
- 720. B.
- 721. D.
- 722. C.
- 723. C.
- 724. E.
- 725. C.
- 726. E.
- 727. B.
- 728. E.
- 729. D.
- 730. A.
- 731. D.
- 732. E.
- 733. B.
- 734. D.
- 735. C.
- 736. A.
- 737. E.
- 738. C.
- 739. A.
- 740. E.
- 741. B.
- 742. A.
- 743. A.
- 744. B.
- 745. C.
- 746. D.
- 747. E.
- 748. F.
- 749. C.
- 750. A, C, D.
- 751. B.
- 752. F.
- 753. Chronic  
blood loss.
- 754. H.
- 755. E.
- 756. F.
- 757. T.

- 758. T.
- 759. T.
- 760. S.
- 761. S.
- 762. S.
- 763. T.
- 764. E.
- 765. P.
- 766. E.
- 767. P.
- 768. E.
- 769. E.
- 770. F.
- 771. F.
- 772. A.
- 773. A.
- 774. C, D, F, G,  
J, P.
- 775. C, E, I, S.
- 776. B, H, K, R.
- 777. A, L, M, N,  
O, Q.
- 778. F.
- 779. C.
- 780. F.
- 781. E.
- 782. A, C.

**Rheumatology**

- 783. C.
- 784. D.
- 785. E.
- 786. A.
- 787. E.
- 788. C.
- 789. C.
- 790. A.
- 791. E.
- 792. D.
- 793. A.
- 794. A.
- 795. B.
- 796. E.
- 797. C.
- 798. B.

- 799. C.
- 800. E.
- 801. D.
- 802. A.
- 803. F.
- 804. E.
- 805. C.
- 806. E.
- 807. B.
- 808. E.
- 809. D.
- 810. A.
- 811. B.
- 812. A.
- 813. D.
- 814. C.
- 815. B.
- 816. A.
- 817. A.
- 818. D.
- 819. D.
- 820. A.
- 821. D.
- 822. E.
- 823. D.
- 824. D.
- 825. C.

**Fever**

- 826. B.
- 827. B.
- 828. A.
- 829. A.
- 830. B.
- 831. D.
- 832. A.
- 833. D.
- 834. B.
- 835. B.
- 836. D.
- 837. E.
- 838. C.
- 839. D.
- 840. C.
- 841. D.

842. B.

**Nephrology**

843. E.

844. A.

845. A.

846. A.

847. E.

848. E.

849. B.

850. E.

851. A.

852. D.

853. C.

854. A.

855. E.

856. E.

857. B.

858. C.

859. D.

860. A.

861. D.

862. D.

863. B.

864. D.

865. C.

866. B.

867. A.

868. A, C, F.

869. B.

870. D, E.

871. T.

872. C.

873. C, E, F, G.

874. A, B.

875. D.

876. E.

877. A.

878. D.

879. C.

880. B.

881. D.

882. D.

883. B.

884. E.

885. F.

886. F.

887. T.

888. F.

889. T.

890. A, B.

891. A, D.

892. Inferior

vena

cavagram.

893. A.

894. T.

895. Polycystic

disease.

896. B.