

**1.** The physician must undertake measures for primary prophylaxis of iron deficiency anemia. Which of the following categories of patient are subject to such primary prophylactic measures?

- A.** Pregnant women
- B.** Patients after 60
- C.** All children
- D.** Patients after operation
- E.** Workers of industrial enterprises

**2.** A patient with unstable angina pectoris was given the following complex treatment: anticoagulants, nitrates,  $\alpha$ -adrenoblockers. However on the third day of treatment the pain still remains. Which investigation should be carried out to establish diagnosis?

- A.** Coronarography
- B.** Stress-echocardiogram
- C.** Test with dosed physical exercises
- D.** Esophageal electrocardiac stimulator
- E.** Myocardial scintigraphy

**3.** The 28 y.o. woman applied to doctor because of limited loss of the hair. In the anamnesis - she had frequent headache indisposition, arthromyalgia, fever, irregular casual sexual life, drug user. RW is negative. What examination must be done first?

- A.** Examination for HIV
- B.** Examination for neuropathology
- C.** Examination for gonorrhea
- D.** Examination for fungi
- E.** Examination for trichomoniasis

**4.** What methods of the collecting of the information is preferable for study of housing conditions of students of medical HIGH SCHOOL for a training period?

- A.** Questioning
- B.** Interviewing
- C.** Selecting of materials
- D.** A method of the directed selection
- E.** Statistical

**5.** Choose a method of a graphic representation of monthly information about number of the registered cases of acute intestinal infection and their comparisons to the average monthly values, obtained for 5 previous years:

- A.** The linear diagram
- B.** The radial diagram
- C.** The sector diagram
- D.** The figured diagram
- E.** The curvilinear diagram

**6.** Define the basic registration document at the profound study of a case rate with temporary lost labor ability at the industrial enterprise:

- A.** A card of the personal account of a case rate
- B.** "The Report on reasons of a temporary lost labor ability"
- C.** The sick-leave certificate
- D.** A ambulatory medical card
- E.** The inpatient medical record

**7.** A patient, aged 25, complains of pain in the I finger on the right hand. On examination: the finger is homogeneously hydropic, in bent position. On attempt to unbend the finger the pain gets worse. Acute pain appears on touching with the probe in ligament projection. What disease is the most likely?

- A.** Thecal whitlow (ligament panaritium)
- B.** Subcutaneous panaritium
- C.** Articular (joint) panaritium
- D.** Bone panaritium
- E.** Paronychia

**8.** A sample of milk was taken for testing from a 5 ton milk batch. Lab analysis showed the following: fat content 2%, specific density-  $1,04 \text{ g/cm}^3$ , acidity  $21^\circ\text{C}$ , reductase probe – weak positive. What way the product is to be used in? What would you advise?

- A.** Sell but inform customers about milk quality
- B.** Write the product off for animal feeding
- C.** Utilize technically
- D.** Sell without limitations
- E.** Annihilate the product

**9.** Patient with thyrotoxicosis is in the 2-beds hospital ward of therapeutic department. The area of the ward is  $18 \text{ m}^2$ , height 3 m, ventilation rate 2,5/hr. Air temperature -  $20^\circ\text{C}$ , relative humidity 45%, air movement velocity 0,3 m/s, light coefficient 1/5, noise level 30 dB. Make hygienic evaluation of the conditions.

- A.** Discomfortable microclimate
- B.** Non-effective ventilation
- C.** Poor lighting
- D.** High level of noise
- E.** All conditions are OK

**10.** 33 y.o. woman works as the secretary. Her diet contains 150 g of protein (including 100 g of animal protein), 200 g of fat, 600 g of carbohydrates. What pathology

can develop from this diet?

- A. Obesity
- B. Schizophrenia
- C. Parodontosis
- D. Common cold
- E. Uterine fibromyoma

11. A 9 y.o. girl has an average height and harmonic growth development. She was ill with acute respiratory infection for five times. Define the group of her health.

- A. 2nd group
- B. 1st group
- C. 3rd group
- D. 4th group
- E. 5th group

12. The child is 11 m.o. He suffers from nervous-arthritic diathesis. The increased synthesis of what acid is pathogenic at nervous-arthritic diathesis?

- A. Uric acid
- B. Acetic acid
- C. Phosphoric acid
- D. Hydrochloric acid
- E. Sulfuric acid

13. A 35 y.o. woman was admitted to thoracic surgery department with fever up to  $40^{\circ}\text{C}$ , onset of pain in the side caused by deep breathing, cough with considerable quantity of purulent sputum and blood with bad smell. What is the most likely diagnosis?

- A. Abscess of the lung
- B. Complication of liver echinococcosis
- C. Bronchiectatic disease
- D. Actinomycosis of lungs
- E. Pulmonary tuberculosis

14. A 52 y.o. man has recurrent transient ischemic attacks. Auscultation of the carotid arteries detects murmur. What diagnostic method is necessary to apply first?

- A. Ultrasound dopplerography
- B. CT of the brain
- C. MRI of the brain
- D. Cerebral angiography
- E. Electroencephalography

15. A 67 y.o. patient complains of palpitation, dizziness, noise in ears, feeling of shortage of air. Objectively: pale, damp skin. Vesicular respiration, respiratory rate- 22 per min, pulse- 200 bpm, AP- 100/70 mm Hg. On ECG: heart rate- 200 bpm, ventricular complexes are wi-

dened, deformed, location of segments ST and of wave T is discordant. The wave P is not changed, superimposes QRST, natural conformity between P and QRS is not present. What kind of arrhythmia is present?

- A. Paroxysmal ventricular tachycardia
- B. Sinus tachycardia
- C. Atrial flutter
- D. Ventricular extrasystole
- E. Atrial tachycardia

16. Ambulance was called to a 48 y.o. man. From the words of relatives he has had three episodes of lost consciousness and attacks during the day. On examination: the following fit is observed: patient is unconscious, fell on the floor, tonic and then clonic convulsions of trunk and extremities happened. The attack lasted for 4 minute, ended by involuntary urination. What type of attack was observed?

- A. Major epileptic seizure
- B. Vegetative crisis
- C. Absence
- D. Episode of hysteria
- E. Fainting

17. A 2 y.o. girl has been ill for 3 days. Today she has low-grade fever, severe catarrhal symptoms, non-abundant maculopapular rash on her buttocks and enlarged occipital glands. What is your diagnosis?

- A. Rubella
- B. Scarlet fever
- C. Measles
- D. Adenoviral infection
- E. Pseudotuberculosis

18. Male 30 y.o., noted growing fingers and facial skull, changed face. Complains of poor eyesight, weakness, skin darkening, loss of body weight. X-ray shows broadening of sella turcica, thinning of tuberculin sphenoidale, signs of increased intracranial pressure. What diagnosis can you make?

- A. Adenoma of hypophysis
- B. Encephalitis of truncus
- C. Optico - hiasmatic arachnoiditis
- D. Adrenal gland tumor
- E. Tumor of pondo-cerebellar corner

19. A patient complains of a tormental (agonizing) cough with expectoration of up to 600 ml/daily purulent chocolatecolor sputum with a decay smell. Onset of illness was abrupt,  $t^0 - 39^{\circ}\text{C}$ , fever

of irregular type. There is the area of darkening with a cavity in a center on X-ray film, with irregular contours and level of liquid. What disease is the question?

- A.** Gangrene of lung
- B.** Tuberculosis
- C.** Bronchiectatic illness
- D.** Pneumonia complicated by an abscess
- E.** Lobar pneumonia

**20.** A 24 y.o. patient complains of nausea, vomiting, headache, shortness of breath. He had an acute nephritis being 10 y.o. Proteinuria was found out in urine. Objectively: a skin is grey-pale, the edema is not present. Accent of II tone above aorta. BP 140/100-180/100 mm Hg. Blood level of residual  $N_2$ - 6,6 mmol/L, creatinine- 406 mmol/L. Day's diuresis- 2300 ml, nocturia. Specific density of urine is 1009, albumin- 0,9 g/L, WBC- 0-2 in f/vis. RBC.- single in f/vis., hyaline casts single in specimen. Your diagnosis?

- A.** Chronic nephritis with violation of kidney function
- B.** Feochromocytoma
- C.** Hypertensive illness of the II degree
- D.** Nephrotic syndrome
- E.** Stenosis of kidney artery

**21.** A 33 y.o. male patient was admitted to a hospital. A patient is pale, at an attempt to stand up he complains of strong dizziness. There was vomiting like coffee-grounds approximately hour ago. BP- 90/60 mm Hg., pulse- 120 b/min. In anamnesis, a patient has suffered from ulcer of the stomach, painless form during 4 years. An ulcer was exposed at gastrofiberoscopy. Your diagnosis:

- A.** Ulcer of stomach, complicated with bleeding
- B.** Ulcer of duodenum, complicated with bleeding
- C.** Erosive gastritis
- D.** Acute pleurisy
- E.** Acute myocardial infarction, abdominal form

**22.** A 40 y.o. patient of rheumatic heart disease complains of anorexia, weakness and loss of weight, breathless and swelling of feet. On examination:  $t^0$ -  $39^0C$ , pulse is 100/min. As ucultation: diastolic murmur in the mitral area. Petechical lesion a round clavicle; spleen was palpable, tooth extraction one month ago.

- A.** Subacute bacteria endocarditis
- B.** Recurrence of rheumatic fever
- C.** Thrombocytopenia purpure
- D.** Mitral stenosis
- E.** Aortic stenosis

**23.** A patient with nosocomial pneumonia has signs of collapse. Which of the following pneumonia complication is the most likely to be accompanied with collapse?

- A.** Septic shock
- B.** Exudative pleuritis
- C.** Bronchial obstruction
- D.** Toxic hepatitis
- E.** Emphysema

**24.** A 27 y.o. man complains of pain in epigastrium which is relieved by food intake. EGDFS shows antral erosive gastritis, biopsy of antral mucous presents *Helicobacter Pylori*. What can be diagnosed in this case?

- A.** Gastritis of type B
- B.** Gastritis of A type
- C.** Reflux - gastritis
- D.** Menetrier's disease
- E.** Rigid antral gastritis

**25.** A 62 y.o. patient with DM-2. Diabetes is being compensated by diet and Maninilum. Patient has to undergo an operation for inguinal hernia. What the tactics of hypoglycemic therapy should be used?

- A.** Prescribe fast-acting insulin
- B.** Give Glurenorm in place of Maninilum
- C.** Continue with the current therapy
- D.** Prescribe long-acting insulin
- E.** Prescribe guanil guanidines

**26.** A 32 y.o. patient complains of severe weakness, tremor of extremities. On physical examination, there is loss of body weight, wet and warm skin. The thyroid gland is enlarged up to the 3rd degree, painless, elastic. Ps- 108 bpm. BP- 160/55 mm Hg. The rest is in norm. What can be diagnosed?

- A.** Diffuse toxic goitre of the 3rd degree, thyrotoxicosis of the average degree
- B.** Diffuse euthyroid goitre of the 3rd degree
- C.** Chronic autoimmune thyroiditis, hypertrophic type
- D.** Chronic fibrous thyroiditis
- E.** Toxiferous adenoma of the thyroid gland

**27.** A 30 y.o. female with rheumatoid arthritis of five years duration complains

of pain in the first three fingers of her right hand over past 6 weeks. The pain seems especially severe at night often awakening her from sleep. The most likely cause is?

- A. Carpal tunnel syndrome
- B. Atlanto-axial subluxation of cervical spine
- C. Sensory peripheral neuropathy
- D. Rheumatoid vasculitis
- E. Rheumatoid arthritis without complication

28. A 38 y.o. patient was urgently admitted to the hospital with complaints of sudden weakness, dizziness, loss of consciousness, body weight loss, nausea, vomiting, severe pain in epigastric area, diarrhea, skin hyperpigmentation. What is the most probable diagnosis?

- A. Addisonic crisis
- B. Acute gastroenteritis
- C. Meningoencephalitis
- D. Scleroderma
- E. Pellagra

29. An unconscious patient presents with moist skin, shallow breathing. There are signs of previous injection on the shoulders and hips. BP- 110/70 mm Hg. Tonus of skeletal muscles and reflexes are increased. Cramps of muscles of the extremities are seen. What is the most likely disorder?

- A. Hypoglycemic coma
- B. Hyperglycemic coma
- C. Hyperosmolar coma
- D. Hyperlactacidotic coma
- E. Stroke

30. 7 y.o. boy with chronic sinusitis and recurrent pulmonary infections has chest X-ray demonstrating a right-sided cardiac silhouette. What is the most likely diagnosis?

- A. Kartagener syndrome
- B. Cystic fibrosis (mucoviscidosis)
- C. Bronchiolitis obliterans
- D. Laryngotracheomalacia
- E.  $\alpha$ -antitrypsin deficiency

31. A patient was admitted to the hospital on the 7th day of the disease with complaints of high temperature, headache, pain in the muscles, especially in calf muscles. Dermal integuments and scleras are icteric. There is hemorrhagic rash on the skin. Urine is bloody. The patient was fishing two weeks ago. What is the most likely diagnosis?

- A. Leptospirosis
- B. Yersiniosis
- C. Salmonellosis
- D. Brucellosis
- E. Trichinellosis

32. A 2,9-kg term male infant is born to a mother who developed polyhydramnios at 34 weeks' gestation. At birth, the Apgar scores were 9 and 9. The infant develops choking and cyanosis with the first feed. In addition, is unable to place a nasogastric tube. What is the most likely diagnosis?

- A. Esophageal atresia
- B. Choanal atresia
- C. Laryngomalacia
- D. Tracheal atresia
- E. Respiratory distress syndrome

33. Full term newborn has developed jaundice at 10 hours of age. Hemolytic disease of newborn due to Rh-incompatibility was diagnosed. 2 hours later the infant has indirect serum bilirubin level increasing up to 14 mmol/L. What is most appropriate for treatment of hyperbilirubinemia in this infant?

- A. Exchange blood transfusion
- B. Phototherapy
- C. Phenobarbital
- D. Intestinal sorbents
- E. Infusion therapy

34. At term of a gestation of 40 weeks height of standing of a uterine fundus is less than assumed for the given term. The woman has given birth to the child in weight of 2500 g, a length of a body 53 cm, with an assessment on a scale of Apgar of 4-6 points. Labor was fast. The cause of such state of the child were:

- A. Chronic fetoplacental insufficiency
- B. Delay of an intra-uterine fetation
- C. Placental detachment
- D. Infection of a fetus
- E. Prematurity

35. A 42 y.o. man died in a road accident after the haemorrhage on the site, due to acute hemorrhagic anaemia. What minimum percentage volume of the total blood loss would result in death at acute haemorrhage?

- A. 25-30%
- B. 6-9%
- C. 10-14%
- D. 15-20%
- E. 35-50%

**36.** What preparations are used for prevention of fungal infection?

- A.** Fluconozol, Orungol, Nisoral
- B.** Rubomycin, Bleomycin, Mytomylin C
- C.** Cytosar, Cormyctin, Lomycitin
- D.** Captopril, Enalapril
- E.** Isoniazid, Ftibazid, Pyrazinamid

**37.** What develops most often after accidental intake of Hydrochloric acid?

- A.** Cardiac insufficiency
- B.** Cushing's syndrome
- C.** Kutling's syndrome
- D.** Deylads's syndrome
- E.** Acute pancreatitis

**38.** A woman, aged 40, primigravida, with infertility in the medical history, on the 42-43 week of pregnancy. Labour activity is weak. Longitudinal presentation of the fetus, I position, anterior position. The head of the fetus is engaged to pelvic inlet. Fetus heart rate is 140 bpm, rhythmic, muffled. Cervix dilation is 4 cm. On amnioscopy: greenish colour of amniotic fluid and fetal membranes. Cranial bones are dense, cranial sutures and small fontanel are

- A.** Caesarean section
- B.** Amniotomy, labour stimulation, fetal hypoxia treatment
- C.** Fetal hypoxia treatment, in the II period - forceps delivery
- D.** Fetal hypoxia treatment, conservative delivery
- E.** Medication sleep, amniotomy, labour stimulation

**39.** 30 y.o. woman, had mild trauma of 5th finger of the left hand 15 days ago. She has treated her self at home. She presents to the hospital due to deterioration of the condition and temperature rise. Objectively: hyperemia and swelling on the ventral surface of finger. Restricted movements of the finger. X-ray of the left hand: an early stage of osteomyolitis of the fifth finger could not be excluded. The diagnosis: panaris of 5th finger of the left hand. What form of panaris has occurred in the patient?

- A.** Bony
- B.** Hypodermic
- C.** Paronychia
- D.** Tendon type
- E.** Joints type

**40.** A 36 y.o. patient is diagnosed with right sided pneumothorax. What method of

treatment is indicated to the patient?

- A.** Surgical drainage of the pleural cavity
- B.** Antiinflammation therapy
- C.** Symptomatic therapy
- D.** Pleural puncture
- E.** Thoracotomy

**41.** A youth, aged 15, from childhood suffers from atopic dermatitis and allergy to the shellfish. In the last 3 months after acquiring aquarium fish, rhinitis, conjunctivitis, itching in the nose developed. What level of immunologic index should be defined in this case?

- A.** IgE
- B.** IgJ
- C.** IgM
- D.** IgA
- E.** Circulating immunocomplexes

**42.** The patient has developed pain in the axillary area, rise of temperature developed 10 hours ago. On examination: shaky gait is marked, the tongue is coated by white coating. The pulse is frequent. The painful lymphatic nodules are determined in the axillary area. The skin is erythematous and glistening over the lymphatic nodules. What is the most probable diagnosis?

- A.** Bubonic plague
- B.** Acute purulent lymphadenitis
- C.** Lymphogranulomatosis
- D.** Anthrax
- E.** Tularemia

**43.** A 17 y.o. patient complains of acute pain in the knee joint and  $t^0 - 38^0C$ . He was ill with angina 3 weeks ago. Objectively: deformation and swelling of the knee joints with skin hyperemia. Small movement causes an acute pain in the joints. Which diagnose is the most correct?

- A.** Rheumatism, polyarthrititis
- B.** Systemic lupus eritematodes
- C.** Reactive polyarthrititis
- D.** Infectious-allergic polyarthrititis
- E.** Rheumarthrititis

**44.** A 38 y.o. woman was hospitalized to the surgical unit with vomiting and acute abdominal pain irradiating to the spine. On laparocentesis hemmorrhagic fluid is obtained. What disease should be suspected?

- A.** Acute pancreatitis
- B.** Renal colic
- C.** Acute enterocolitis
- D.** Perforated gastric ulcer
- E.** Acute appendicitis

**45.** The girl is 12 y.o. Yesterday she was overcooled. Now she complains on pain in suprapubic area, frequent painful urination by small portions, temperature is  $37,8^{\circ}\text{C}$ . Pasternatsky symptom is negative. Urinalysis: protein- 0,033 g/L, WBC- 20-25 in f/vis, RBC- 1-2 in f/vis. What diagnosis is most probable?

- A.** Acute cystitis
- B.** Dysmetabolic nephropathy
- C.** Acute glomerulonephritis
- D.** Acute pyelonephritis
- E.** Urolithiasis

**46.** The girl of 11 y.o. She is ill for 1 month. She has "butterflytype rash on face (spots and papules), pain and swelling of small joints on arms and legs, signs of stomatitis (small-sized ulcers in mouth). CBC: Hb- 80 g/L, RBC-  $2,9 \times 10^{12}/\text{L}$ , WBC-  $15 \times 10^9/\text{L}$ , ESR- 40 mm/hour. Urinalysis: protein- 0,33 g/L. What is the most probable diagnosis?

- A.** Systemic lupus erythematosus
- B.** Juvenile rheumatoid arthritis, systemic type
- C.** Periarteriitis nodosa
- D.** Acute rheumatic fever
- E.** Dermatomyositis

**47.** The 56 y.o. patient has worked at the aluminium plant more than 20 years. Within 3 last years he has developed loosening of teeth, bone and joint pains, piercing pains in heart area, vomiting. The preliminary diagnosis is:

- A.** Fluorine intoxication
- B.** Mercury intoxication
- C.** Lead intoxication
- D.** Phosphorus intoxication
- E.** Manganese intoxication

**48.** A 38 y.o. woman complains of a purulent discharge from the left nostril. The body temperature is  $37,5^{\circ}\text{C}$ . The patient is ill during a week and associates her illness with common cold. Pain on palpation of her left cheek reveals tenderness. The mucous membrane in the left nasal cavity is red and turgescient. The purulent exudates is seen in the middle meatus in maxillary. What is the most probable diagnosis?

- A.** Acute purulent maxillary sinusitis
- B.** Acute purulent frontitis
- C.** Acute purulent ethmoiditis
- D.** Acute purulent sphenoiditis
- E.** -

**49.** A woman, primagravida, consults a gynecologist on 05.03.2002. A week ago she felt the fetus movements for the first time. Last menstruation was on 10.01.2002. When should she be given maternity leave?

- A.** 8 August
- B.** 25 July
- C.** 22 August
- D.** 11 July
- E.** 5 September

**50.** An infant aged 1 year on the third day of common cold at night developed inspiratory stridor, hoarse voice and barking cough. Physical examination revealed suprasternal and intercostal chest retractions. There is a bluish skin discoloration moistly seen over the upper lip. The respiratory rate is 52 per min and pulse- 122 bpm. The body temperature is  $37,5^{\circ}\text{C}$ . What disease does the infant have?

- A.** Acute infectious croup due to viral laryngotracheitis
- B.** Acute laryngitis
- C.** Bronchopneumonia without complications
- D.** Acute bronchiolitis with respiratory distress
- E.** Acute epiglottitis

**51.** A newborn aged 3 days with hyperbilirubinemia ( $428 \text{ mkmol/L}$ ) developed following disorders. From beginning there were severe jaundice with poor suckling, hypotonia and hypodynamia. Little bit later periodical excitation, neonatal convulsions and neonatal primitive reflexes loss are noted. Now physical examination reveals convergent squint, rotatory nystagmus and setting sun eye sign. How to explain this condition?

- A.** Encephalopathy due to hyperbilirubinemia
- B.** Skull injury
- C.** Brain tumour
- D.** Hydrocephalus
- E.** Spastic cerebral palsy

**52.** A 52 y.o. hard smoker patient complains of persistent cough with purulent sputum discharge especially in mornings, dyspnea provoked even by slight physi-

cal exertion, wheezing chest, tachypnoe, general weakness. He considers himself to be ill during 12 years. The over-written conditions appear 3-4 times per year usually after common cold and have tendency to progress. What disease do you think about first of all?

- A.** Chronic obstructive lung disease
- B.** Bronchial asthma
- C.** Mucoviscidosis (cystic fibrosis)
- D.** Bronchoectatic disease
- E.** Aspergillosis

**53.** 3 weeks ago the patient was ill with tonsillitis. Clinical examination reveals edema, arterial hypertension, hematuria, proteinuria (1,8 g/per day), granular and erythrocytic casts. What is the preliminary diagnosis?

- A.** Glomerulonephritis
- B.** Cystitis
- C.** Pyelonephritis
- D.** Intestinal nephritis
- E.** Renal amyloidosis

**54.** 47 y.o. patient complains of intensive skin itching, jaundice, bone pain. The skin is hyperpigmented. There is multiple xanthelasma palpebrae. The liver is +6 cm enlarged, hard with acute edge. The blood analysis revealed total bilirubin 160  $\mu\text{mol/L}$ , direct – 110  $\mu\text{mol/L}$ , AST (aspartate aminotransferase)- 2,1  $\text{mmol/L}$  per hour, ALT- 1,8  $\text{mmol/L}$ , alkaline phosphatase- 4,6  $\text{mmol/L}$  per hour, cholesterol- 9,2  $\text{mmol/L}$ , antimitochondrial antibodies M2 in a high titer. What is the probable diagnosis?

- A.** Primary biliary liver cirrhosis
- B.** Primary liver cancer
- C.** Chronic viral hepatitis B
- D.** Acute viral hepatitis B
- E.** Alcoholic liver cirrhosis

**55.** The complications of acute cholecystitis which require surgical intervention are as follows EXCEPT:

- A.** Jaundice
- B.** Empyema of the gall-bladder
- C.** Emphysematous gall-bladder
- D.** Gall-bladder perforation
- E.** Cholangitis conditioned by the presence of stones in the bile tract

**56.** The 67 y.o. patient had 5 recurrent fractures of the lower extremities without considerable cause within 5 years. O-shaped deformity of the legs in the knee joints has appeared. The skull, pelvis and

lower extremities X-Ray shows the thickening of flat bones. In the long bones there is a hyperostosis along the bone axis. The blood test has not revealed any inflammation activity. Serum calcium is normal. What disease do you consider in this case?

- A.** Paget's disease
- B.** Hyperparathyroid dystrophy
- C.** Chronic osteomyelitis
- D.** Myeloma
- E.** Mottled disease (marble disease)

**57.** The woman who has delivered twins has early postnatal hypotonic uterine bleeding reached 1,5% of her bodyweight. The bleeding is going on. Conservative methods to arrest the bleeding have been found ineffective. The conditions of patient are pale skin, acrocyanosis, oliguria. The woman is confused. The pulse is 130 bpm, BP- 75/50 mm Hg. What is the further treatment?

- A.** Uterine extirpation
- B.** Supravaginal uterine amputation
- C.** Uterine vessels ligation
- D.** Inner glomeral artery ligation
- E.** Putting clamps on the uterine cervix

**58.** A 26 y.o. woman complains of a mild bloody discharge from the vagina and pain in the lower abdomen. She has had the last menstruation 3,5 months ago. The pulse is 80 bpm. The blood pressure (BP) is 110/60 mm Hg and body temperature is 36,6°C. The abdomen is tender in the lower parts. The uterus is enlarged up to 12 weeks of gestation. What is your diagnosis?

- A.** Inevitable abortion
- B.** Incipient abortion
- C.** Incomplete abortion
- D.** Complete abortion
- E.** Disfunctional bleeding

**59.** 18 y.o. woman complains of pain in the lower abdomen. Some minutes before she has suddenly appeared unconscious at home. The patient had no menses within last 3 months. On examination: pale skin, the pulse- 110 bpm, BP- 80/60 mm Hg. The Schyotkin's sign is positive. Hb- 76 g/L. The vaginal examination: the uterus is a little bit enlarged, its displacement is painful. There is also any lateral swelling of indistinct size. The posterior fornix of the vagina is tendern and overhangs inside. What is the most probable diagnosis?

- A.** Impaired extrauterine pregnancy
- B.** Ovarian apoplexy
- C.** Twist of cystoma of right uterine adnexa
- D.** Acute salpingoophoritis
- E.** Acute appendicitis

**60.** A 20 y.o. pregnant woman with 36 weeks of gestation was admitted to the obstetrical hospital with complains of pain in the lower abdomen and bloody vaginal discharge. The general condition of the patient is good. Her blood pressure is 120/80 mm Hg. The heart rate of the fetus is 140 bpm, rhythmic. Vaginal examination: the cervix of the uterus is formed and closed. The discharge from vagina is bloody up to 200 ml per day. The head of the fetus is located high above the minor pelvis entry. A soft formation was defined through the anterior fornix of the vagina. What is the probable diagnosis?

- A.** Placental presentation
- B.** Premature placental separation
- C.** Uterine rupture
- D.** Threatened premature labor
- E.** Incipient abortion

**61.** In the gynecologic office a 28 y.o. woman complains of sterility within three years. The menstrual function is not impaired. There were one artificial abortion and chronic salpingo-oophoritis in her case history. Oral contraceptives were not used. Her husband's analysis of semen is without pathology. From what diagnostic method will you start the workup in this case of sterility?

- A.** Hysterosalpingography
- B.** Hormone investigation
- C.** Ultra sound investigation
- D.** Diagnostic scraping out of the uterine cavity
- E.** Hysteroscopia

**62.** A 33 y.o. patient was admitted to the reception room of the Central District Hospital. He complains of a severely painful swelling localized on posterior neck, fever up to 38,4°C and general weakness. In anamnesis: diabetes mellitus within 5 years. On physical examination on the posterior neck surface there is an infiltrate elevated above surrounding skin. The tissues affected by swelling are tense and blue reddish discoloration in central area. There are also several purulent necrotic pustules which are connected with each other and form a large skin necrosis. A thinned necrotic skin of this swelling has holes looking like sieve, pus discharges

through out. What disease should a doctor consider first of all?

- A.** Carbuncle
- B.** Furuncle
- C.** Acute skin cellulitis
- D.** Carbuncle associated with anthrax
- E.** Skin abscess

**63.** A 19 y.o. man was admitted to the reception department in 20 minutes after being wounded with the knife to the left chest. The patient is confused. The heart rate is 96 bpm and BP- 80/60 mm Hg. There are the dilated neck veins, sharply diminished apical beat and evident heart enlargement. What kind of penetrative chest wound complications has developed in patient?

- A.** Pericardium tamponade
- B.** Massive hemothorax
- C.** Open pneumothorax
- D.** Closed pneumothorax
- E.** Valve-like pneumothorax

**64.** A 35 y.o. patient complains of a difficult swallowing, pain behind the breastbone. He can eat only liquid food. While swallowing sometimes he has attacks of cough and dyspnea. Above mentioned complaints are progressing. It is known that the patient has had a chemical burn of esophagus one month ago. What complication does the patient have?

- A.** Corrosive esophagitis and stricture
- B.** Esophagitis
- C.** Esophageal diverticula
- D.** Cardiac achalasia
- E.** Cardiac insufficiency

**65.** An employee of a private company was ill with acute respiratory viral infection. Consulted a district doctor, who determined the fact of temporary loss of working ability, but refused to issue a sick-list, arguing that the patient worked in the private and not state-owned company. Should the sick-list be issued to the employees of private companies?

- A.** Issued regardless of company's ownership
- B.** Issued only to employees of state-owned companies
- C.** Issued only on condition of payment guarantee by the company's proprietor
- D.** Issued a medical certificate of a set form
- E.** Issued a medical certificate of a free form

**66.** A worker was temporarily off work



because of illness during 16 days, was under out-patient treatment. The doctor in charge issued a sick-list first for 5 days, then prolonged it for 10 days. Who can further prolong the sick-list to this patient?

- A.** The doctor in charge of the case together with the head of department
- B.** Deputy head physician on the working ability expertise
- C.** The doctor in charge of the case with the permission of the head of department
- D.** Working ability expertise committee
- E.** The head of department

**67.** A 13 y.o. patient was treated in dermatological hospital for atopic dermatitis exacerbation. He was discharged in the condition of clinical remission. What recommendations should the doctor give to prevent exacerbations?

- A.** Use of neutral creams to protect skin
- B.** Frequent skin washing with detergents
- C.** Systematic use of local corticosteroids
- D.** Systematic skin disinfection
- E.** Avoidance of skin insolation

**68.** A full-term new-born suffered ante- and intranatal hypoxia, was born in asphyxia (Apgar score 2-5 points). After birth baby's excitation is progressing, occurs vomiting, nystagmus, spasms, squint, spontaneous Babinski and Moro's reflexes. What is the most probable location of the intracranial haemorrhage in this case?

- A.** Subarachnoid hemorrhages
- B.** Small hemorrhages in brain tissue
- C.** Subdural hemorrhages
- D.** Periventricular hemorrhages
- E.** Haemorrhages in ventricles of brain

**69.** A patient, aged 16, complains of headache, mainly in the frontal and temporal areas, superciliary arch, appearing of vomiting at the peak of headache, pain during the eyeballs movement, joint's pain. On examination: excited,  $t^0$  - 39°C, Ps - 110/min. Tonic and clonus cramps. Uncertain meningeal signs. What is the most likely diagnosis?

- A.** Influenza with cerebral edema manifestations
- B.** Influenza, typical disease duration
- C.** Respiratory syncytial virus
- D.** Parainfluenza
- E.** Adenovirus infection

**70.** A 64 y.o. patient has developed of

squeering substernal pain which had appeared 2 hours ago and irradiated to the left shoulder, marked weakness. On examination: pale skin, cold sweat. Pulse - 108 bpm, AP - 70/50 mm Hg, heart sound are deaf, vesicular breathing, soft abdomen, painless, varicose vein on the left shin, ECG: sinus rhythm, heart rate is 100 bpm, ST-segment is sharply elevated in II, III aVF leads. What is the most likely disorder?

- A.** Cardiogenic shock
- B.** Cardiac asthma
- C.** Pulmonary artery thromboembolism
- D.** Dissecting aortic aneurysm
- E.** Cardiac tamponade

**71.** In treatment and prevention establishments, regardless of their organisational and proprietary form, the rights of the patients should be observed. Which of these rights is the most significant?

- A.** The right to the protection of the patient's interests
- B.** The right to the free choice
- C.** The right to the information
- D.** The right to be heard
- E.** The right to the protection from incompetence

**72.** A military unit stopped for 3-day's rest in inhabited locality after a long march. The sanitary-epidemiological reconnaissance found several water sources. It is necessary to choose the source complying with the hygienic standards for potable water in the field

- A.** Artesian well water
- B.** Spring water
- C.** River water
- D.** Rain water
- E.** Water from melted snow

**73.** The district pediatrician is charged with the analysis of infant mortality. What is taken for the unit of observation in infant mortality investigation?

- A.** A baby dead at the age up to 12 months
- B.** A baby dead at the age up to 1 months
- C.** A baby dead at the age over 28 days
- D.** A baby dead at the age up to 6 days
- E.** A baby dead at birth

**74.** Chief district pediatrician has to carry out analysis of infant mortality rate. What should he take as a unit of the observation?

- A.** Child death case at the age up to 1 year
- B.** Child death case at the age up to the first month
- C.** Child death case after 28 days of life
- D.** Child death case during first 7 days of life
- E.** Child death case on labor

**75.** A 43 y.o. patient complains of mass and, pain in the right breast, elevation of temperature to  $37,2^{\circ}\text{C}$  during 3 last months. Condition worsens before the menstruation. On examination: edema of the right breast, hyperemia, retracted nipple. Unclear painful infiltration is palpated in the lower quadrants. What is the most probable diagnosis?

- A.** Cancer of right mammary gland
- B.** Right side acute mastitis
- C.** Right side chronic mastitis
- D.** Premenstrual syndrome
- E.** Tuberculosis of right mammary gland

**76.** A patient, aged 40, has been ill during approximately 8 years, complains of pain in the lumbar part of the spine on physical exertion, in cervical and thoracic part (especially when coughing), pain in the hip and knee joints on the right. On examination: the body is fixed in the forward inclination with head down, gluteal muscles atrophy. Spine roentgenography: ribs osteoporosis, longitudinal ligament ossification. What is the most likely diagnosis?

- A.** Ankylosing spondylitis
- B.** Tuberculous spondylitis
- C.** Psoriatic spondylarthropathy
- D.** Spondylarthropathy on the background of Reiter's disease
- E.** Spread osteochondrosis of the vertebral column

**77.** A worker, aged 38, working in the slate production during 15 years, complains of expiratory exertional dyspnea, dry cough. On examination: deafening of the percussory sounds in interscapular region, rough breath sounds, dry disseminated rales. On fingers' skin - greyish warts. Factory's sectorial doctor suspects asbestosis. Which method is the most informative for diagnosis verification?

- A.** Thorax roentgenography
- B.** Bronchoscopy
- C.** Spirography
- D.** Bronchoalveolar lavage
- E.** Blood gases examination

**78.** Deputy of chief medical officer carried

out a study of morbidity rate for population which had been served at the polyclinics for the last 5 years. What statistical values can help in calculations of diseases level dissemination?

- A.** Relative values
- B.** Standard values
- C.** Average values
- D.** Absolute values
- E.** Dynamic row

**79.** A 37 y.o. woman is suffering from squeezing substernal pain on physical exertion. On examination: AP- 130/80 mm Hg, heart rate=pulse rate 72 bpm, heart borders are dilated to the left side, aortic systolic murmur. ECG- signs of the left ventricle hypertrophy. What method of examination is the most informative in this case?

- A.** Echocardiography
- B.** Phonocardiography
- C.** Coronarography
- D.** Sphygmography
- E.** X-ray

**80.** A child, aged 4, has been ill for 5 days, suffers from cough, skin rash,  $t^{\circ} - 38,2^{\circ}\text{C}$ , facial edema, photosensitivity, conjunctivitis. On the face, neck, upper part of the chest there is bright maculopapular rash with areas of merging. Hyperemic throat. Seropurulent nasal discharge. In lungs there are dry crackles. What is the most probable preliminary diagnosis?

- A.** Measles
- B.** Adenovirus infection
- C.** Scarlet fever
- D.** Rubella
- E.** Enterovirus exanthema

**81.** There were registered 500 cases of urolithiasis per 10000 inhabitants. What kind of statistical indices is presented?

- A.** Prevalence rate
- B.** Correlation coefficient
- C.** Index of visualization
- D.** Incidence rate
- E.** Index of compliance

**82.** At year-end hospital administration has obtained the following data: annual number of treated patients and average annual number of patient-used beds. What index of hospital work can be calculated based upon this data?

- A. Bed turnover
- B. Bed resources of the hospital
- C. Average annual bed occupancy
- D. Average duration of patients presence in the hospital
- E. Average bed idle time

**83.** A 52 y.o. patient fell from 3 m high on the ground with the right lumbar area. He complains of pain here. There is microhematuria in the urea. On urography kidney's functioning is satisfactory. What is the most probable diagnosis?

- A. Kidney's contusion
- B. Subcapsular kidney's rupture
- C. Multile kidney's ruptures
- D. Paraneprhal hematoma
- E. Kidney's abruption

**84.** A 3 y.o. child with weight deficiency suffers from permanent moist cough. There was a history of some pneumonias with obstruction. On examination: distended chest, dullness on percussion over the lower parts of lungs. On auscultation: a great number of different moist rales. Level of sweat chloride is 80 mol/L. What is the most probable diagnosis?

- A. Mucoviscidosis (cystic fibrosis)
- B. Bronchial asthma
- C. Recurrent bronchitis
- D. Bronchiectasis
- E. Pulmonary hypoplasia

**85.** A 14 y.o. girl complains of profuse bloody genital discharges during 10 days after suppression of menses for 1,5 months. Similar bleedings recur since 12 years on the background of disordered menstrual cycle. On rectal examination: no pathology on the internal genitalia. In blood: Hb- 70 g/L, RBC-  $2,3 \times 10^{12}/L$ , Ht- 20. What is the most probable diagnosis?

- A. Juvenile bleeding, posthemorrhagic anemia
- B. Werlhof's disease
- C. Polycyst ovarian syndrome
- D. Hormonoproduktive ovary tumor
- E. Noncomplete spontaneous abortion

**86.** A 14 y.o. patient suddenly fell ill when high fever, acute pain in the right shin. In two weeks X-ray showed translucent spaces (destructive focuses) with uneven contours in the middle third of tibia diaphysis. Along the bone edge there was a narrow line of shadow (periostitis) 1-2 mm from the surface. What is the most likely diagnosis?

- A. Right shin osteomyelitis
- B. Right shin tuberculosis
- C. Right shin syphilis
- D. Bone cyst of tibia
- E. Right shin trauma

**87.** A 40 y.o. patient was admitted to the gastroenterology with skin itching, jaundice, discomfort in the right subcostal area, generalized weakness. On examination: skin is jaundiced, traces of scratches, liver is +5 cm, spleen is 6x8 cm. In blood: alkaline phosphatase - 2,0 mmol/(hour\*L), general bilirubin - 60  $\mu$ mol/L, cholesterol - 8,0 mmol/L. What is the leading syndrome in the patient?

- A. Cholestatic
- B. Cytolytic
- C. Mesenchymal inflammatory
- D. Asthenic
- E. Liver-cells insufficiency

**88.** A 43 y.o. patient had cholecystectomy 6 years ago due to chronic calculous cholecystitis. Lately he has suffered from pain in the right subcostal area and recurrent jaundice. During last 2 weeks jaundice hasn't gone. Stenotic papillitis 0,5 cm in length has been revealed. What is the best way of treatment?

- A. To perform endoscopic papillosphincterotomy
- B. To treat conservatively: antibiotics, spasmolytics, antiinflammatory drugs
- C. To perform external choledoch drain
- D. To perform choledochoduodenostomy
- E. -

**89.** A 12 y.o. child with acute glomerulonephritis presented with hypertensive syndrome during first days of the disease. What is the role of angiotensin II in the pathogenesis?

- A. Intensifies production and secretion of aldosterone
- B. Increases heart output
- C. Inhibits depressive action of prostaglandins
- D. Increases erythropoietin production
- E. Increases renin level

**90.** On physiologic-sanitary examination of railway department work it was revealed that loaders work is of III degree of difficulty. They unload wagons with sand, manually break coagulated mass by shovel and shift it. What criteria was used to evaluate work of loaders?

- A.** Maximum load weight which is shifted
- B.** Value of static loading for the shift
- C.** Time of active activities, % to the shift duration
- D.** Time of passive observation, % to the shift duration
- E.** Intellectual efforts

**91.** A 51 y.o. woman complains of dull pain in the right subcostal area and epigastric area, nausea, appetite decline during 6 months. There is a history of gastric peptic ulcer. On examination: weight loss, pulse is 70 bpm, AP is 120/70 mm Hg. Diffuse tenderness and resistance of muscles on palpation. There is a hard lymphatic node 1x1 cm in size over the left clavicle. What method of investigation will be the most useful?

- A.** Esophagogastroduodenoscopy with biopsy
- B.** Ultrasound examination of abdomen
- C.** pH-metry
- D.** Ureatic test
- E.** Stomach X-ray

**92.** A man, aged 68, complains of tiredness, sweating, enlargement of cervical, submaxillary and axillary lymph nodes. Blood tests: WBC -  $35 \times 10^9/L$ , lymphocytes - 60%, Botkin and Gumprecht bodies, level of haemoglobin and quantity of thrombocytes is normal. Myelogram showed 40% of lymphocytes. What is the most probable diagnosis?

- A.** Chronic lympholeucosis
- B.** Chronic myeloleucosis
- C.** Lymphogranulomatosis
- D.** Acute leucosis
- E.** Tuberculous lymphadenitis

**93.** Examination of placenta, which has just been born, reveals defect 2x3 cm in size. There is no bleeding. What tactics is the most reasonable?

- A.** Manual uterus cavity revision
- B.** Administration of uterotonic medicines
- C.** External uterus massage
- D.** Parturient supervision
- E.** Instrumental uterus cavity revision

**94.** A 27 y.o. gravida with 17 weeks of gestation was admitted to the hospital. There was a history of 2 spontaneous miscarriages. On bimanual examination: uterus is enlarged to 17 weeks of gestation, uterus cervix is shortened, isthmus allows to pass the finger tip. The diagnosis is isthmico-cervical insufficiency. What is the doctor's tactics?

- A.** To place suture on the uterus cervix
- B.** To administer tocolytic therapy
- C.** To interrupt pregnancy
- D.** To administer hormonal treatment
- E.** To perform amniocentesis

**95.** A district pediatrician has carried out infant mortality rate analysis in his area. What data has been used?

- A.** Mortality of children under 1 y.o. structured by age, sex, causes
- B.** Mortality of children under 1 y.o., natimortality
- C.** Hospital mortality of children, structured by age
- D.** Mortality of district adolescents
- E.** Mortality of district newborn

**96.** A 26 y.o. male patient with postoperative hypothyroidism takes thyroxine 100 mg 2 times a day. He has developed tachycardia, sweating, irritability, sleep disorder. Determine further treatment tactics.

- A.** To decrease thyroxine dosage
- B.** To increase thyroxine dosage
- C.** To administer betablockers
- D.** To add mercasolil to the treatment
- E.** To administer sedatives

**97.** Body temperature of a 12 y.o. girl increased up to  $39-40^{\circ}C$  in 4-5 hours after she had taken 2 pills of aspirin. Complaints of general discomfort, dizziness, sudden appearance of red spots on the skin with blister formation or exfoliation of the epidermis with erosive surface. Lesions on the skin looked like burns of II degree. Nikolsky syndrome is positive. What is the most probable diagnosis?

- A.** Acute epidermal necrolysis
- B.** Pemphigus vulgaris
- C.** Polymorphic exudative erythema
- D.** Bullous dermatitis
- E.** Dühring's disease

**98.** A patient complains of pathological lump, appearing in the right inguinal region on exercise. The lump is round-shaped, 4 cm in diameter, on palpation: soft elastic consistency, positions near the medial part of Poupart's ligament. The lump is situated inwards from the spermatic cord. What is the most probable preliminary diagnosis?

- A. Right-sided direct inguinal hernia
- B. Right-sided oblique inguinal hernia
- C. Right-sided femoral hernia
- D. Varicose veins of the right hip
- E. Lipoma of the right inguinal area

**99.** A 52 y.o. woman complains of weakness, painful itching after washing and bathing, sensation of heaviness in the head. On examination: hyperemia of skin of face, neck, extremities. AP- 180/100 mm Hg. Speeln is 4 cm below the rib arch edge. What is the most probable diagnosis?

- A. Erythremia
- B. Essential hypertension
- C. Dermatomyositis
- D. Allergic dermatitis
- E. Systemic scleroderma

**100.** A 55 y.o. patient complains of distended abdomen and rumbling, increased winds evacuation, liquid foamy feces with sour smell following the dairy products consumption. What is the correct name of this syndrome?

- A. Syndrome of fermentative dyspepsia
- B. Syndrome of decayed dyspepsia
- C. Syndrome of fatty dyspepsia
- D. Dyskinesia syndrome
- E. Malabsorption syndrome

**101.** In an inhabited locality there is an increase of diphtheria during the last 3 years with separate outbursts in families. What measure can effectively influence the epidemic process of diphtheria and reduce the morbidity rate to single cases?

- A. Immunization of the population
- B. Hospitalization of patients
- C. Detection of carriers
- D. Early diagnostics
- E. Disinfection in disease focus

**102.** A 27 y.o. woman turns to the maternity welfare centre because of infertility. She has had sexual life in marriage for 4 years, doesn't use contraceptives. She didn't get pregnant. On examination: genital development is without pathology, uterus tubes are passable, basal (rectal) temperature is one-phase during last 3 menstrual cycles. What is the infertility cause?

- A. Anovular menstrual cycle
- B. Chronic adnexitis
- C. Abnormalities in genital development
- D. Immunologic infertility
- E. Genital endometriosis

**103.** A 43 y.o. woman complains of contact hemorrhages during the last 6 months. Bimanual exam: cervix of the uterus is enlarged, restricted in mobility. Mirrors showed the following: cervix of the uterus is in the form of cauliflower. Chrobak and Schiller tests are positive. What is the most probable diagnosis?

- A. Cancer of cervix of the uterus
- B. Polypus of the cervix of the uterus
- C. Cervical pregnancy
- D. Nascent fibroid
- E. Leukoplakia

**104.** A local doctor has to prepare a report about the health condition of the population of his region. What medical indexes of population health condition should he use?

- A. Morbidity, disabilities, demographic, physical development
- B. Social welfare, satisfaction of life quality
- C. Way of life, genetic, pollution
- D. Average treatment duration, complications
- E. Average longevity

**105.** A boy, aged 9, is examined: height- 127 cm (-0,36), weight - 28,2 kg (+0,96), chest circumference- 64,9 cm (+0,66), lung vital capacity - 1520 ml (-0,16). What is the integrated assessment of the child's physical development?

- A. Harmonious
- B. Disharmonious
- C. Markedly disharmonious
- D. Excessive
- E. Below the average

**106.** A 14 y.o. child suffers from of vegetovascular dystonia of pubertal period. He has developed sympathoadrenal crisis. What medicine should be used for crisis reduction?

- A. Obsidan
- B. No-shpa
- C. Amisyl
- D. Euphyline
- E. Corglicone

**107.** A woman complains of high temperature to 38°C, mild pain in the throat during 3 days. On examinati-

on: angle lymphatic nodes of the jaw are 3 cm enlarged, palatine tonsils are enlarged and coated with grey plaque which spreads to the uvula and frontal palatine arches. What is the most probable diagnosis?

- A. Larynx diphtheria
- B. Infectious mononucleosis
- C. Vincent's angina
- D. Agranulocytosis
- E. Oropharyngeal candidosis

**108.** A 36 y.o. patient was admitted to the hospital with sharp pain in substernal area following occasional swallowing of a fish bone. On esophagoscopy the foreign body wasn't revealed. The pain increased and localized between scapulas. In a day temperature elevated, condition became worse, dysphagia intensified. What complication has developed?

- A. Perforation of esophagus with mediastinitis
- B. Esophageal hemorrhage
- C. Obstruction of esophagus
- D. Pulmonary atelectasis
- E. Aspirative pneumonia

**109.** A child from the first non-complicated pregnancy but complicated labor had cephalhematoma. On the second day there developed jaundice. On the 3th day appeared changes of neurologic status: nystagmus, Graefe's sign. Urea is yellow, feces- golden-yellow. Mother's blood group is A(II)Rh-, child- A(II)Rh+. On the third day child's Hb is 200 g/L, RBC-  $6,1 \times 10^{12}/L$ , bilirubin in blood - 58  $\mu\text{mol/L}$  due to unconjugated bilirubin, Ht- 0,57. What is the child's jaundice explanation?

- A. Brain delivery trauma
- B. Physiologic jaundice
- C. Hemolytic disease of newborn
- D. Bile ducts atresia
- E. Fetal hepatitis

**110.** A gravida with 7 weeks of gestation is referred for the artificial abortion. On operation while dilating cervical canal with Hegar dilator №8 a doctor suspected uterus perforation. What is immediate doctors tactics to confirm the diagnosis?

- A. Probing of uterus cavity
- B. Bimanual examination
- C. Ultrasound examination
- D. Laparoscopy
- E. Metrosalpingography

**111.** A 18 y.o. male patient complains of pain in knee and ankle joints, temperature elevation to  $39,5^{\circ}\text{C}$ . He had a respiratory disease 1,5 week ago. On examination: temperature-  $38,5^{\circ}\text{C}$ , swollen knee and ankle joints, pulse- 106 bpm, rhythmic, AP- 90/60 mm Hg, heart borders without changes, sounds are weakened, soft systolic apical murmur. What indicator is connected with possible etiology of the process?

- A. Antistreptolysine-0
- B. 1-antitrypsine
- C. Creatinkinase
- D. Rheumatic factor
- E. Seromucoid

**112.** A 19 y.o. patient was admitted to the hospital with acute destructive appendicitis. He suffers from hemophilia B-type. What antihemophilic medicine should be included in pre-and post-operative treatment plan?

- A. Fresh frozen plasma
- B. Cryoprecipitate
- C. Fresh frozen blood
- D. Native plasma
- E. Dried plasma

**113.** A 24 y.o. male patient was transferred to the chest surgery department from general surgical department with acute post-traumatic empyema of pleura. On the X-ray: wide level horizontal of fluid on the right. What method of treatment should be prescribed?

- A. Punction and drainage of pleural cavity
- B. Decortication of pleura
- C. Pneumoectomy
- D. Thoracoplasty
- E. Lobectomy

**114.** A 28 y.o. homeless male was admitted to the hospital because of initial diagnosis "influenza". Roseolo-petechiae rash has appeared on the trunk and internal surfaces of the limbs on the fifth day. Temperature is  $41^{\circ}\text{C}$ , euphoria, face and sclera's hyperemia, tongue tremor, tachycardia, splenomegaly, excitement. What is the most probable diagnosis?

- A. Typhus
- B. Alcoholic delirium
- C. Leptospirosis
- D. Measles
- E. Abdominal typhoid

**115.** A patient complains of intense pressing pain in the pharynx, mainly to the

right, impossibility to swallow even liquid food. The illness started 5 days ago. The patient's condition is grave. Body temperature -  $38,9^{\circ}\text{C}$ , speech is difficult, voice is constrained, difficulties in opening the mouth. Submaxillary glands to the right are painful, enlarged. What is the most probable diagnosis?

- A. Peritonsillar abscess
- B. Diphtheria
- C. Pharyngeal tumour
- D. Vincent's disease
- E. Phlegmonous tonsillitis

**116.** In a 65 y.o. female patient a tumor 13x8 cm in size in the umbilical area and above is palpated, mild tenderness on palpation, unmovable, pulsates. On auscultation: systolic murmur. What is the most probable diagnosis?

- A. Abdominal aortic aneurism
- B. Stomach tumor
- C. Arterio-venous aneurism
- D. Tricuspid valve insufficiency
- E. Mitral insufficiency

**117.** A 25 y.o. woman complains of profuse foamy vaginal discharges, foul, burning and itching in genitalia region. She has been ill for a week. Extramarital sexual life. On examination: hyperemia of vaginal mucous, bleeding on touching, foamy leucorrhea in the urethral area. What is the most probable diagnosis?

- A. Trichomonas colpitic
- B. Gonorrhea
- C. Chlamydiosis
- D. Vagina candidomycosis
- E. Bacterial vaginosis

**118.** A 18 y.o. woman consulted a gynecologist with complaints of the pain in the lower part of the abdomen, fever up to  $37,5^{\circ}\text{C}$ , considerable mucopurulent discharges from the genital tract, colic during urinating. After mirror and vagina examination the results are the following: the urethra is infiltrated, cervix of the uterus is hyperemic, erosive. The uterus is painful, ovaries are painful, thickened, free. Bacterioscopy test showed diplococcus. What diagnosis is the most probable?

- A. Recent acute ascending gonorrhea
- B. Trichomoniasis
- C. Candidomycosis
- D. Chronic gonorrhea
- E. Chlamydiosis

**119.** A 30 y.o. male patient complains of itching of the skin which intensifies in the evening. He has been ill for 1,5 months. On examination: there is rash with paired papules covered with bloody crusts on the abdomen, hips, buttocks, folds between the fingers, flexor surfaces of the hand. There are traces of line scratches. What additional investigations are necessary to make diagnosis?

- A. Examination of rash elements scrape
- B. Determination of dermatographism
- C. Serologic blood examination
- D. Blood glucose
- E. Examination for helminths

**120.** A child was delivered severely premature. After the birth the child has RI symptoms, anasarca, fine bubbling moist rales over the lower lobe of the right lung. Multiple skin extravasations, bloody foam from the mouth have occurred after the 2 day. On chest X-ray: atelectasis of the lower lobe of the right lung. In blood: Hb-100 g/L, Ht- 0,45. What is the most probable diagnosis?

- A. Edematous-hemorrhagic syndrome
- B. Disseminated intravascular clotting syndrome
- C. Pulmonary edema
- D. Hyaline membrane disease
- E. Congenital pneumonia

**121.** A 58 y.o. male patient is examined by a physician and suffers from general weakness, fatigue, mild pain in the left subcostal area, sometimes frequent painful urination. Moderate splenomegaly has been revealed. Blood test: neutrophilic leukocytosis with the progress to myelocyte; basophil- 2%; eosinophil- 5%. There is a urate crystals in urine, erythrocyte- 2-3 in the field of vision. What is the preliminary diagnosis?

- A. Chronic myeloleucosis
- B. Leukemoid reaction
- C. Lymphogranulomatosis
- D. Hepar cirrhosis
- E. Urolithiasis

**122.** A 2 m.o. child was delivered at term with weight 3500 g and was on the mixed feeding. Current weight is 4900 g. Evaluate the current weight of child.

- A. Corresponding to the age
- B. 150 g less than necessary
- C. Hypotrophy of I grade
- D. Hypotrophy of II grade
- E. Paratrophy of I grade

**123.** A 2 m.o. breast-fed child suffers from cheek skin hyperemia, sporadic papulous elements on the skin of the chest and back following the apple juice introduction. The child is restless. What is the initial pediatrician's tactics?

- A. Clarify mother's diet and exclude obligate allergens
- B. Refer to prescribe dermatologist
- C. Administer general ultraviolet irradiation
- D. Treat with claritine
- E. Apply ointment with corticosteroids to affected skin areas

**124.** A 43 y.o. woman complains of severe pain in the right abdominal side irradiating in the right supraclavicular area, fever, dryness and bitterness in the mouth. There were multiple vomitings without relief. Patient relates the onset of pain to the taking of fat and fried food. Physical examination: the patient lies on the right side, pale, dry tongue, tachycardia. Right side of abdomen is painful during palpation and somewhat tense in right hypochondrium. What is the most likely diagnosis?

- A. Perforative ulcer
- B. Acute cholecystitis
- C. Acute bowel obstruction
- D. Acute appendicitis
- E. Right-sided renal colic

**125.** On the 5-th day of the respiratory disease a 24 y.o. man has developed progressive headaches systemic dizziness, feeling of seeing double, paresis of mimic muscles on the right, choking while swallowing. Acute viral encephalitis has been diagnosed. What is the main direction of urgent therapy?

- A. Zovirax
- B. Glucocorticoids
- C. Ceftriaxon
- D. Lasix
- E. Hemodesis

**126.** A 65 y.o. woman complains of complicated mouth opening following foot trauma 10 days ago. Next day she ate with difficulties, there were muscles tension of back, the back of the head and abdomen. On the third day there was tension of

all muscle groups, generalized convulsions every 10-15 min. What is the most probable diagnosis?

- A. Tetanus
- B. Tetania
- C. Meningoencephalitis
- D. Hemorrhagic stroke
- E. Epilepsy

**127.** A 18 y.o. female student complains of dyspnea during the intensive exertion. The condition became worse half a year ago. On examination: pulse rate is 88 bpm, accelerated, AP- 180/20 mm Hg, pale skin, heart borders are dilated to the left and up. There is systolic-diastolic murmur in the 2nd intercostal space,  $S_2$  at pulmonary artery is accentuated. ECG has revealed both ventricles hypertrophy. Thoracic X-ray has revealed pulsation and protrusion of the left ventricle, lung trunk. What doctor's tactics should be?

- A. Cardiosurgeon consultation
- B. Dispensary observation
- C. Administration of therapeutic treatment
- D. Continuation of investigation
- E. Exemption from physical exercises

**128.** A 35 y.o. woman is suspected of aplastic anemia. The bone marrow puncture has been administered with the diagnostic purpose. What changes in the marrow punctatum are suggested?

- A. Replacement of marrow elements with adipose tissue
- B. Replacement of marrow elements with fibrous tissue
- C. Prevalence of megaloblasts
- D. Presence of blast cells
- E. Absolute lymphocytosis

**129.** A girl, aged 13, consults the school doctor on account of moderate bloody discharge from the genital tracts, which appeared 2 days ago. Secondary sexual characters are developed. What is the most probable cause of bloody discharge?

- A. Menarche
- B. Juvenile haemorrhage
- C. Haemophilia
- D. Endometrium cancer
- E. Werlhof's disease

**130.** A 55 y.o. male patient complains of weakness during 2 months, pain in the right side of the thorax, cough, blood-streaked sputum. On X-ray: intensive triangle shadow in the area of lower lobe that is connected to mediastinum. What is



the most likely disorder in the lungs?

- A. Central cancer of lungs
- B. Tuberculosis of lungs
- C. Bronchiectasia
- D. Pulmonary infarction
- E. Pleuropneumonia

**131.** In a forest summer camp children have variable procedures to harden their organisms. What procedure has the most hardening power?

- A. Contrast shower
- B. Morning exercises on the fresh air
- C. Hygienic shower
- D. Walking on the fresh air
- E. Bath with hydromassage

**132.** There is a dynamic growth of number of congenital abnormalities such as central paralysis, newborns blindness, idiocy among the population that lives near to pesticides production enterprise. Compounds of which pollutant can cause the development of this pathology?

- A. Mercury
- B. Strontium
- C. Cadmium
- D. Iron
- E. Chrome

**133.** A 7 y.o. child had elevation of temperature to  $40^{\circ}\text{C}$  in anamnesis. For the last 3 months he presents fusiform swelling of fingers, ankle joints and knee joint, pain in the upper part of the sternum and cervical part of the spinal column. What is the most probable diagnosis?

- A. Juvenile rheumatic arthritis
- B. Rheumatism
- C. Toxic synovitis
- D. Septic arthritis
- E. Osteoarthritis

**134.** A 5 y.o. child with stigmas of dysembryogenesis (small chin, thick lips, opened mouth, hyperthelorum) has systolic murmur in the second intercostal to the right of the sternum. The murmur passes to the neck and along the sternum left edge. The pulse on the left brachial artery is weakened. BP on the right arm is 110/60 mm Hg, on the left - 100/60 mm Hg. ECG results: hypertrophy of the right ventricle. What defect is the most probable?

- A. Aortic stenosis
- B. Defect of interventricular septum
- C. Defect of interatrial septum
- D. Coarctation of the aorta
- E. Open aortic duct

**135.** At's planned to construct multifield a new hospital in one of the central city districts. What building type is the most appropriate in this case?

- A. Centralized and blocked
- B. Centralized
- C. Decentralized
- D. Mixed
- E. Blocked

**136.** A 60 y.o. patient experiences acute air insufficiency following of the venectomy due to subcutaneous vein thrombophlebitis 3 days ago. Skin became cyanotic, with grey shade. Marked psychomotor excitement, tachypnea, substernal pain. What postoperative complication has occurred?

- A. Thromboembolia of pulmonary artery
- B. Hemorrhagia
- C. Hypostatic pneumonia
- D. Myocardial infarction
- E. Valvular pneumothorax

**137.** A 1,5 y.o. child fell ill acutely with high temperature  $38^{\circ}\text{C}$ , headache, fatigue. The temperature declined on the fifth day, muscular pain in the right leg occurred in the morning, there were no movements and tendon reflexes, sensitivity was reserved. What is the initial diagnosis?

- A. Polyomyelitis
- B. Viral encephalitis
- C. Polyarthropathy
- D. Osteomyelitis
- E. Hip joint arthritis

**138.** On observation of sanitary conditions of studying at the technical university it was necessary to evaluate the visual regimen of students, who study from 9 a.m to 3 p.m. What index of natural light will be the most informative?

- A. Natural light coefficient
- B. Light coefficient
- C. Depth of study room
- D. Time of the room insolation
- E. Presence of mixed (upper-lateral) light

**139.** A 24 y.o. woman presents with prolonged fever, nocturnal sweating. She's lost weight for 7 kg during the last 3 months. She had irregular intercourse.

On examination: enlargement of all lymphaden groups, hepatolienal syndrom. In blood: WBC-  $2,2 \times 10^9/L$ . What is the most likely diagnosis?

- A. HIV-infection
- B. Lymphogranulomatosis
- C. Tuberculosis
- D. Infectious mononucleosis
- E. Chroniosepsis

**140.** A female rheumatic patient experiences diastolic thoracic wall tremor (diastolic thrill), accentuated  $S_1$  at apex, there is diastolic murmur with presystolic intensification, opening snap,  $S_2$  accent at pulmonary artery. What kind of heart disorder is observed?

- A. Mitral stenosis
- B. Aortic valve insufficiency
- C. Pulmonary artery stenosis
- D. Mitral valve insufficiency
- E. Opened arterial duct

**141.** A 31 y.o. woman has suffered from systemic scleroderma for 14 years. She was treated in hospitals many times. She complains of periodical dull pain in the cardiac area, palpitation, dyspnea, headache, eyelids swelling, weight loss, pain and limbs deformities. Which organ's disorder worsens the prognosis?

- A. Kidneys
- B. Heart
- C. Lungs
- D. Gastro-intestinal tract
- E. Skin and joints

**142.** A 70 y.o. male patient with mild headaches complains of speech disorder, weakness in right limbs. There was a history of myocardial infarction and arrhythmia. On neurological examination there are elements of motor aphasia, central paresis of VII and XII cranial nerves pairs on the right side, central type of hemiparesis and hemihyperesthesia on the same side. What is the most probable diagnosis?

- A. Ischemic stroke
- B. Hemorrhagic stroke
- C. Transitory ischemic attack
- D. Epidural hematoma
- E. Cerebral tumor

**143.** A 52 y.o. male patient suffers from squeezing pain attacks in substernal area which irradiates to the left hand and occurs occasionally and on physical exertion. He has had it for 1 year. On exami-

nation: heart borders are dilated to the left side, sounds are muffled, pulse- 76 bpm, rhythmic, AP- 155/80 mm Hg, ECG: the left type, the rest of signs are normal. What additional examination is necessary to confirm the diagnosis?

- A. Bicycle ergometry
- B. Echocardiography
- C. Blood lipoproteins
- D. General blood count
- E. Transaminases of blood

**144.** A 35 y.o. male patient suffers from chronic glomerulonephritis and has been on hemodialysis for the last 3 years. He has developed irregularities in the heart activity, hypotension, progressive weakness, dyspnea. On ECG: bradycardia, 1st degree atrioventricular block, high sharpened T-waves. Before he had severely disturbed the drinking and diet regimen. What is the most likely cause of these changes?

- A. Hyperkalemia
- B. Hyperhydration
- C. Hypokalemia
- D. Hyponatremia
- E. Hypocalcemia

**145.** A 20 daily y.o. female patient is suffering from chronic bronchitis. Recently there has been production about 0,5 L of purulent sputum with maximum discharge in the morning. Fingers are like "drum sticks", there are "watching glass" nails. What is the most probable diagnosis?

- A. Bronchiectasia
- B. Pneumonia
- C. Chronic bronchitis
- D. Gangrene of lungs
- E. Tuberculosis

**146.** A 18 y.o. woman complains of weakness, dizziness, loss of appetite, menorrhagia. There are petechiae on the skin of the upper extremities. Blood test: Hb- 105 g/L; RBC-  $3,2 \times 10^{12}/L$ ; coloured index- 0,95; thromb.-  $20 \times 10^9/L$ . The sedimentation time according to Lee White is 5'; menorrhagia duration according to Duke is 8', "pinch and tourniquet" test is positive. What is the most probable diagnosis?

- A.** Idiopathic thrombocytopenic purpura
- B.** Hemophilia
- C.** Hemorrhagic diathesis
- D.** Iron deficiency anemia
- E.** Marchiafava-Micheli's disease

**147.** A 30 y.o. primipara has intensive labor pushings with an interval of 1-2 min and of 50 sec duration. There is a appearing of the fetus head. Perineum is of 4 cm height, has turned pale. What should be done in this case?

- A.** Episiotomy
- B.** Perineum protection
- C.** Perineotomy
- D.** Vacuum extraction of the fetus
- E.** Observation

**148.** A 28 y.o. male patient was admitted to the hospital because of high temperature  $39^{\circ}\text{C}$ , headache, generalized fatigue, constipation, sleep disorder for 9 days. There are sporadic roseolas on the abdomen, pulse- 78 bpm, liver is enlarged for 2 cm. What is the most probable diagnosis?

- A.** Abdominal typhoid
- B.** Typhus
- C.** Sepsis
- D.** Brucellosis
- E.** Leptospirosis

**149.** A 40 h.o. child age has hyperosthesia, CNS depression, dyspepsia. Sepsis is suspected. What should the differential diagnosis be made with?

- A.** Hypoglycemia
- B.** Hypocalcemia
- C.** Hyperbilirubinemia
- D.** Hyperkalemia
- E.** Hypomagnesemia

**150.** A 20 y.o. patient with bronchial asthma experiences dyspnea attacks 3-4 times a week. Nocturnal attacks are 1 time a week. FEV1- 50% of necessary figures, during the day it's variations is 25%. What is the severity of bronchial asthma condition?

- A.** Moderate severity condition
- B.** Mild condition
- C.** Serious condition
- D.** Asthmatic status
- E.** Intermittent flow

**151.** A 40 y.o. man complains of headache in occipital area. On physical examination: the skin is pale; face and hand edema, BP- 170/130 mm Hg. On EchoCG:

concentric hypertrophy of the left ventricle. Ultrasound examination of the kidneys reveals thinned cortical layer. Urine analysis shows proteinuria of 3,5 g/day. What is the probable diagnosis?

- A.** Essential arterial hypertension
- B.** Chronic pyelonephritis
- C.** Chronic glomerulonephritis
- D.** Polycystic disease of the kidneys
- E.** Cushing's disease

**152.** A 28 y.o. primagravida, pregnancy is 15-16 weeks of gestation, presents to the maternity clinics with dull pain in the lower part of the abdomen and in lumbar area. On vaginal examination: uterus cervix is 2,5 cm, external isthmus allows to pass the finger tip. Uterus body is enlarged according to the pregnancy term. Genital discharges are mucous, mild. What is the diagnosis?

- A.** Threatened spontaneous abortion
- B.** Spontaneous abortion which has begun
- C.** Stopped pregnancy
- D.** Hydatid molar pregnancy
- E.** Placenta presentation

**153.** A primipara with pelvis size 25-28-31-20 cm has active labor activity. Waters poured out, clear. Fetus weight is 4500 g, the head is engaged to the small pelvis inlet. Vasten's sign as positive. Cervix of uterus is fully dilated. Amniotic sac is absent. The fetus heartbeat is clear, rhythmic, 136 bpm. What is the labor tactics?

- A.** Caesarean section
- B.** Vacuum extraction of the fetus
- C.** Obstetrical forceps
- D.** Conservative tactics of labor
- E.** Stimulation of the labor activity

**154.** A 41 y.o. man complains of acute pain in the right side of the thorax and sudden increase of dyspnea following the lifting of heavy object. The patient's condition is serious: lips and mucous are cyanotic, breathing rate is 28 per min, pulse- 122 bpm., AP- 80/40 mm Hg. There is tympanitis on percussion and weakened breathing on auscultation on the right.  $S_2$  is accentuated over pulmonary artery. What is the urgent measure on the prehospital stage?

- A.** Air aspiration from the pleural cavity
- B.** Epinephrine introduction
- C.** Euphilline introduction
- D.** Call for cardiologic team
- E.** Oxygen inhalation

**155.** A 6 y.o child complains of thirst, polyuria, increased appetite for 2 months with weight loss for 3 kg. There has been nocturnal enuresis during last week. On examination: hyperglycemia 14 mol/L. The diagnosis is diabetes mellitus I type. What is the genesis of this disease?

- A.** Autoimmune
- B.** Viral
- C.** Bacterial
- D.** Neurogenic
- E.** Virus-bacterial

**156.** A 74 y.o. female patient complains of pain, distended abdomen, nausea. She suffers from heart ischemia, post-infarction and diffusive cardiosclerosis. On examination: grave condition, distended abdomen, abdominal wall fails to take active part in breathing. On laparoscopy: some cloudy effusion, one of the bowel loops is dark-blue. What is the most probable diagnosis?

- A.** Mesenterial vessels thrombosis
- B.** Volvulus
- C.** Acute intestinal obstruction
- D.** Ischemic abdominal syndrome
- E.** Erysipelas

**157.** A 56 y.o. man, who has taken alcoholic drinks regularly for 20 years, complains of intensive girdle pain in the abdomen. Profuse nonformed stool 2-3- times a day has appeared for the last 2 years, loss of weight for 8 kg for 2 years. On examination: abdomen is soft, painless. Blood amylase - 12g/L. Feces examination-neutral fat 15 g per day, starch grains. What is the most reasonable treatment at this stage?

- A.** Pancreatine
- B.** Contrykal
- C.** Aminocapron acid
- D.** Levomicytine
- E.** Imodium

**158.** A 30 y.o. woman has second labor which lasts for 14 hours. The fetus heartbeat is muffled, arrhythmic, 100 bpm. On vaginal examination: complete cervix dilatation, fetus head is in the area of small pelvis outlet. Sagittal suture is in the direct size. The small fontanelle is at the symphysis. What is the further tactics of the

labor?

- A.** Application of obstetrical forceps
- B.** Stimulation of the labor activity with oxytocine
- C.** Caesarian section
- D.** Application of cranioclastic forceps by Ivanov's
- E.** Application of obstetrical cavity forceps

**159.** A 31y.o. patient has had mental disorder for a long time. He suffers from insomnia for a long time. He has developed fears, suicidal thoughts, tried to hang himself. His mood is depressed, he refuses from treatment. What measures are the most expedient for the prevention of suicide?

- A.** Admission to the mental hospital
- B.** Admission to the neurological department
- C.** Out-patient treatment
- D.** Psychotherapeutic conversation
- E.** Strict home supervision

**160.** A 43 y.o. woman complains of shooting heart pain, dyspnea, irregularities in the heart activity, progressive fatigue during 3 weeks. She had acute respiratory disease a month ago. On examination: AP- 120/80 mm Hg, heart rate 98 bpm, heart borders +1,5 cm left side, sounds are muffled, soft systolic murmur at apex and Botkin's area; sporadic extrasystoles. Liver isn't palpated, there are no edema. Blood test: WBC-  $6,7 \cdot 10^9/L$ , sedimentation rate- 21 mm/hour. What is the most probable diagnosis?

- A.** Acute myocarditis
- B.** Climacteric myocardiodystrophy
- C.** Ischemic heart disease, angina pectoris
- D.** Rheumatism, mitral insufficiency
- E.** Hypertrophic cardiomyopathy

**161.** A 52 y.o. male patient has become ill gradually. There is pain in the left side of the thorax during 2 weeks, elevation of temperature till  $38 - 39^{\circ}C$ . On examination: left chest side falls behind in breathing movement no voice tremor over the left lung. Dullness that is more intensive in lower parts of this lung. Right heart border is deviated outside. Sharply weakened breathing over the left lung, no rales. Heart sounds are muffled, tachycardia. What is the most probable diagnosis?

- A. Exudative pleuritis
- B. Spontaneous pneumothorax
- C. Atelectasis of lung
- D. Cirrhotic tuberculosis
- E. Infarction-pneumonia

**162.** A mother of a newborn child suffers from chronic pyelonephritis. She had acute respiratory viral disease before the labor. Labor in time, with prolonged period without waters. A child had erythematous eruption on the 2 day, then there were seropurulent vesicles about 1cm. Nikolsky's symptom is positive. Erosions have occurred after vesicle rupture. The child is flabby. The temperature is subfebrile. What is the most probable diagnosis?

- A. Newborn pemphigus
- B. Vesiculopustulosis
- C. Pseudofurunculosis
- D. Sepsis
- E. Ritter's dermatitis

**163.** A child was born at 34 weeks of gestation in bad condition. The cardinal symptoms show respiratory disorders: sound prolonged expiration, additional muscles taking part in breathing, crepitation rales on the background of the rough breath sounds. Assessment according to Silverman's scale was 0, in 3 hours- 6 with presence of clinical data. What diagnostic method can determine pneumopathy's type in the child?

- A. Chest X-ray
- B. Blood test
- C. Blood gases
- D. Proteinogram
- E. Immunologic investigation

**164.** During intramuscular DTP vaccination in clinic, a 3 m.o. child developed signs of laryngospasm, paleness of skin, cyanosis of lips, "cock cry", stop of respiration, tension of the whole body with overturned backward head. Allergological history of the child is not complicated. What is the most probable diagnosis?

- A. Spasmophilia, tonic spasms
- B. Anaphylactic shock, clonic spasms
- C. Meningoencephalitic reaction, clonic and tonic spasms
- D. Cerebral haemorrhage, tonic spasms
- E. Meningism, clonic and tonic spasms

**165.** A 60 y.o. man complains of significant pain in the right eye, photophobia, lacrimation, reduced vision of this eye, headache of the right part of the head.

Pain occurred 2 days ago. On examination: Vis OD- 0,03, congested injection of the eye ball, significant cornea edema, front chamber is deep, pupil is narrow, atrophic iris, there is optic nerve excavation on the eye fundus, intraocular pressure- 38 mm Hg. Vis OS- 0,8 unadjustable. The eye is calm, healthy. Intraocular pressure- 22 mm Hg. What is the most probable diagnosis?

- A. Acute glaucoma attack
- B. Right eye's uveitis
- C. Right eye's keratitis
- D. Eye nerve's neuritis
- E. Maculodystrophy

**166.** A 41 y.o. woman has suffered from nonspecific ulcerative colitis during 5 years. On rectoscopy: marked inflammatory process of lower intestinal parts, pseudopolypoid changes of mucous. In blood: WBC-  $9,8 \times 10^9/L$ , RBC-  $3,0 \times 10^{12}/L$ , sedimentation rate- 52 mm/hour. What medication provides pathogenetic treatment of this patient?

- A. Sulfasalazine
- B. Motilium
- C. Vikasolum
- D. Linex
- E. Kreon

**167.** A 49 y.o. female patient presents with acute attacks of headache associated with pulsation in temples, increasing AP to 280/140 mm Hg. Pheochromocytoma is suspected. What is the mechanism of hypertensive crisis in this patient?

- A. Increasing of catecholamines concentration
- B. Increasing of aldosterone level in blood
- C. Increasing of plasma renin activity
- D. Increasing of vasopressin excretion
- E. Increasing of thyroxine excretion

**168.** To replace the blood loss replacement 1000 ml of the same group of Rhesus-compatible donated blood was transfused to the patient. The blood was conserved by sodium citrate. At the end of hemotransfusion there appeared excitement, pale skin, tachycardia, muscles cramps in the patient. What complication should be suspected?

- A. Citrate intoxication
- B. Citrate shock
- C. Allergic reaction
- D. Anaphylactic shock
- E. Pyrogenous reaction

**169.** A 20 y.o. patient suddely felt ill 12 hours ago. There was pain in epigactic area, nausea, sporadic vomiting. He had taken alcohol before. In few hours the pain localized in the right iliac area. On examination: positive rebound tenderness symptoms. WBC-  $12,2 \times 10^9/L$ . What is the most probable diagnosis?

- A. Acute appendicitis
- B. Acute pancreatitis
- C. Perforated ulcer
- D. Rightside kidney colic
- E. Acute cholecystitis

**170.** A patient, aged 58, was fishing in the winter. On return home after some time felt some pain in the feet. Consulted a doctor. On examination: feet skin was pale, then after rewarming became red, warm to the touch. Edema is not significant, limited to the toes. All types of sensitivity are preserved. No blisters. What degree of frostbite is observed?

- A. I degree
- B. II degree
- C. III degree
- D. IV degree
- E. V degree

**171.** A 24 y.o. emotionally-labile woman presents with irritation, depressed mood, palpitation, shooting pain in the heart area, generalized fatigue following the divorce. On examination: palm hyperhidrosis, pulse rate- 72-78 bpm, labile, heart without changes. ECG is normal. What is the most probable pathology in this case?

- A. Neurasthenia
- B. Ipocondric neurosis
- C. Compulsive neurosis
- D. Schizophrenia
- E. Depressive neurosis

**172.** A 98 y.o. male patient complains of pain in the left lower limb which intensifies on walking, feeling of cold and numbness in both feet. He has been ill for 6 years. On examination: pale dry skin, hyperkeratosis. Hairy covering is poorly developed on the left shin. "Furrow symptom "is positive on the left. Pulse on foot arteries and popliteal artery isn't palpated, on the femoral artery it's weak. On the right limb the artery pulsation is reserved. What is the most probable diagnosis?

- A. Arteriosclerosis obliterans
- B. Obliterating endarteritis
- C. Hemoral arthery thrombosis
- D. Raynauld's disease
- E. Buerger's disease (thromboangiitis obliterans)

**173.** A patient had macrofocal myocardial infarction. He is overweight for 36%, AP is 150/90 mm Hg, blood sugar- 5,9 mmol/L, general cholesterol- 4,9 mmol/L, uric acid- 0,211 mmol/L. Which risk factor should be urgently eradicated during the secondary prevention?

- A. Obesity
- B. Arterial hypertension
- C. Hyperglycemia
- D. Hypercholesterolemia
- E. Hyperuricemia

**174.** A 2 y.o. boy was admitted to the hospital with weight loss, unstable discharges, anorexia, following the semolina's introduction (since 5 months). The child is adymanic, flabby, pale dry skin, subcutaneous layer is emaciated. Distended and tensed abdomen, tympanitis on percussion of the upper part of the abdomen, splashing sounds, feces are foamy, of light color, foul. On coprocytogram: a lot of neutral fat. What is the cause of the disease?

- A. Celiakia (celiac disease)
- B. Mucoviscidosis (cystic fibrosis)
- C. Intestinal dysbacteriosis
- D. Chronic enteritis
- E. Disaccharidase insufficiency

**175.** On medical observation a doctor identified girl (162 cm tall and 59 kg weight) who complained loss of ability to see surrounding objects clearly in the evening. On examination: dry skin, hyperkeratosis. Her daily ration includes the following vitamins: vitame A- 0,5 mg, vit.B<sub>1</sub>- 2,0 mg, vit.B<sub>2</sub>- 2,5 mg, vit.B<sub>6</sub>- 2 mg, vit.C- 70 mg. What is the hypovitaminosis type?

- A. A-hypovitaminosis
- B. B<sub>1</sub>-hypovitaminosis
- C. B<sub>2</sub>-hypovitaminosis
- D. B<sub>6</sub>-hypovitaminosis
- E. C-hypovitaminosis

**176.** A woman in labor, on vaginal inspection: cervix dilation is up to 2 cm, fetal bladder is intact. Sacral cavity is free, sacral promontory is reachable only with a bent finger, the inner surface of the sacrococcygeal joint is accessible for

inspection. The head of the fetus presents. Sagittal suture occupies the transverse diameter of pelvic inlet, the small fontanel to the left, on the side. What labor stage is this?

- A. Cervix dilation stage
- B. Preliminary stage
- C. Prodromal stage
- D. Expulsion of fetus stage
- E. Placental stage

**177.** A 30 y.o. patient had deep burn covering 30% of body 30 days ago. Now he presents with continued fever, loss of appetite, night sweats. Burned surface weakly granulates. What is the stage of burn disease?

- A. Septicotoxemia
- B. Primary burn shock
- C. Secondary burn shock
- D. Acute burn toxemia
- E. Convalescence

**178.** A 45 y.o. woman complains of contact bleedings during 5 months. On speculum examination: hyperemia of uterus cervix, looks like cauliflower, bleeds on probing. On bimanual examination: cervix is of densed consistensy, uterus body isn't enlarged, mobile, nonpalpable adnexa, parametrium is free, deep fornixes. What is the most likely diagnosis?

- A. Cancer of cervix of uterus
- B. Cancer of body of uterus
- C. Fibromatous node which is being born
- D. Cervical pregnancy
- E. Polypose of cervix of uterus

**179.** A female, aged 20, after smoking notices a peculiar inebriation with the feeling of burst of energy, elation, irreality and changing of surroundings: the world gets full of bright colours, the objects change their dimensions, people's faces get cartoon features, loss of time and space judgement. What is the most likely diagnosis?

- A. Cocainism
- B. Morphinism
- C. Barbiturism
- D. Nicotinism
- E. Cannabism

**180.** A 75 y.o patient can not tell the month, date and season of the year. After long deliberations she manages to tell her name. She is in irritable and dissatisfied mood. She always carries a bundle with belongings with her, hides a parcel

with bread, shoes in her underwear in her bosom as well as "invaluable books". What is the most probable diagnosis?

- A. Senile dementia
- B. Atherosclerotic (lacunar) dementia
- C. Presenile melancholia
- D. Behaviour disorder
- E. Dissociated personality (psychopathy)

**181.** A 29 y.o. patient was admitted to the hospital with acute girdle pain in epigastric area, vomiting in 1 hour after the meal. On examination: pale, acrocyanosis. Breathing is frequent, shallow. Abdominal muscles are tensed, positive Schotkin-Blumberg's symptom. What is the maximal term to make a diagnosis?

- A. In 2 hours
- B. In 0,5 hours
- C. In 1 hour
- D. In 3 hours
- E. In 6 hours

**182.** A 33 y.o. patient was admitted to the hospital with stopped recurrent peptic ulcer bleeding. On examination he is exhausted, pale. Hb- 77 g/L, Ht- 0,25. Due to anemia there were two attempts of blood transfusion of identical blood group A(II)Rh+. Both attempts were stopped because of anaphylactic reaction. What blood transfusion environment is desirable in this case?

- A. Washed erythrocytes
- B. Freshcitrated blood
- C. Erythrocyte mass (native)
- D. Erythrocyte emulsion
- E. Erythrocyte mass poor for leucocytes and thrombocytes

**183.** A 19 y.o. boy was admitted to the hospital with closed abdominal trauma. On operation multiple ruptures of spleen and small intestine were revealed. AP is falling, it is necessary to perform hemotransfusion. Who can determine patient's blood group and rhesus compatibility?

- A. A doctor of any speciality
- B. A laboratory physician
- C. A surgeon
- D. A traumatologist
- E. An anaesthesiologist

**184.** A 27 y.o. woman suffers from pyelonephritis of the only kidney. She presents to the maternity welfare centre because of suppression of menses for 2,5 months. On examination pregnancy 11

weeks of gestation was revealed. In urine: albumine 3,3 g/L, leucocytes cover the field of vision. What is doctor's tactics in this case?

- A. Immediate pregnancy interruption
- B. Pregnancy interruption after urine normalization
- C. Maintenance of pregnancy till 36 weeks
- D. Pregnancy interruption at 24-25 weeks
- E. Maintenance of pregnancy till delivery term

**185.** A 35 y.o. female patient was admitted to the surgical department with symptoms of ulcerative gastric hemorrhage. It's been the third hemorrhage for the last 2 years. After conservative treatment vomiting with blood stopped, hemoglobin elevated from 60 till 108 g/L. General condition became better. But profuse vomiting with blood reoccured in 2-3- hours. Hemoglobin decreased to 93,1 g/L then to 58,1 g/L. What is the tactics of treatment?

- A. Urgent surgery
- B. Deferred surgery
- C. Conservative treatment
- D. Conservative treatment with following surgery
- E. Taylor's treatment

**186.** A victim of a road accident, aged 44, is operated on account of intraperitoneal haemorrhage. In which case can the patient's blood from the abdominal cavity be used for autotransfusion?

- A. Stomach rupture
- B. Bladder rupture
- C. Liver rupture
- D. Splenic rupture
- E. Small intestines rupture

**187.** A man, aged 30, complains of intense pain, reddening of skin, edema in the ankle-joint area, fever up to 39°C. Sudden onset of the illness. In the past there were similar attacks lasting 5-6 days without residual changes in the joint. The skin over the joint is hyperemic without definite borders and without infiltrative bank on the periphery. What is the most likely diagnosis?

- A. Gout
- B. Infectious arthritis
- C. Rheumatoid arthritis
- D. Erysipelatous inflammation
- E. Osteoarthritis

**188.** A patient, aged 25, suffering from stomach ulcer. Had a course of treatment

in the gastroenterological unit. 2 weeks later developed constant pain, increasing and resistant to medication. The abdomen is painful in epigastric area, moderate defence in pyloroduodenal area. Which complication development aggravated the patient's state?

- A. Malignisation
- B. Penetration
- C. Perforation
- D. Haemorrhage
- E. Stenosis

**189.** A 54 y.o. male patient suffers from dyspnea during mild physical exertion, cough with sputum which is excreted with difficulty. On examination: diffuse cyanosis. Is Barrel-chest. Weakened vesicular breathing with prolonged expiration and dry whistling rales. AP is 140/80 mm Hg, pulse is 92 bpm, rhythmic. Spirography: vital capacity (VC)/predicted vital capacity- 65%, FEV1/FVC- 50%. Determine the type of respiratory insufficiency (RI).

- A. RI of mixed type with prevailing obstruction
- B. RI of restrictive type
- C. RI of obstructive type
- D. RI of mixed type with prevailing restriction
- E. There is no RI

**190.** A patient aged 18 with a cranial injury was in comatose state during several hours. In post-comatose period gets tired quickly, non-productive in dialog - in the beginning answers 2-3 questions, then gets tired and can not understand the point of the question. Which psychotropic should be given to the patient to prevent psychoorganic syndrome?

- A. Nootropics
- B. Neuroleptics
- C. Stimulators
- D. Tranquillisers
- E. Antidepressants

**191.** A 25 y.o. patient was admitted with chest trauma. Clinical and X-ray examination have revealed tense pneumothorax on the left. What emergency treatment should be undertaken?

- A. Pleural cavity drainage
- B. Intravenous infusions
- C. Oxygenotherapy
- D. Intubation
- E. Analgetics



**192.** A 38 y.o. patient complains of pain in lumbar part of spinal column with irradiation to the back surface of the left leg following the lifting of a heavy object. Pain is increasing on change of the body position and in vertical position. positive stretching symptoms were revealed on examination. What is an initial diagnosis?

- A.** Intervertebral ligaments disorder
- B.** Spinal cord tumor
- C.** Arachnoiditis
- D.** Polyneuritis
- E.** Myelopathy

**193.** A child is being discharged from the surgical department after conservative treatment of invagination. What recommendations should doctor give to mother to prevent this disease recurrence?

- A.** Strict following of feeding regimen
- B.** Common cold prophylaxis
- C.** Feces observation
- D.** Gastro-intestinal disease prevention
- E.** Hardening of the child

**194.** A male patient presents with swollen ankles, face, eyelids, elevated AP- 160/100 mm Hg, pulse- 54 bpm, daily loss of albumine with urine- 4g. What therapy is pathogenetic in this case?

- A.** Corticosteroids
- B.** Diuretics
- C.** NSAID
- D.** Calcium antagonists
- E.** Antibiotics

**195.** During dynamic investigation of a patient the increase of central venous pressure is combined with the decrease of arterial pressure. What process is proved by such combination?

- A.** Increase of bleeding speed
- B.** Developing of cardiac insufficiency
- C.** Shunting
- D.** Depositing of blood in venous channel
- E.** Presence of hypervolemia

**196.** A male patient complains of heartburn which gets stronger while bending the body, substernal pain during swallowing. There is a hiatus hernia on X-ray. What disorder should be expected at gastroscopy?

- A.** Gastroesophageal reflux
- B.** Chronic gastritis
- C.** Gastric peptic ulcer
- D.** Acute erosive gastritis
- E.** Duodenal peptic ulcer

**197.** A 2,5 m.o. child presents with muscle hypotonia, sweating, alopecia of the back of the head. The child is prescribed massage, curative gymnastics and vitamin D. What is the dosage and frequency of vitamin D administration?

- A.** 3000 IU daily
- B.** 500 IU daily
- C.** 1000 IU daily
- D.** 500 IU every other day
- E.** 1000 IU every other day

**198.** A 43 y.o. male complains of stomach pain, which relieves with defecation, and is accompanied by abdominal winds, rumbling, the feeling of incomplete evacuation or urgent need for bowel movement, constipation or diarrhea in alternation. These symptoms have lasted for over 3 months. No changes in laboratory tests. What is the most likely diagnosis?

- A.** Irritable bowel syndrome
- B.** Spastic colitis
- C.** Colitis with hypertonic type dyskinesia
- D.** Chronic enterocolitis, exacerbation phase
- E.** Atonic colitis

**199.** After delivery and revision of placenta there was found the defect of placental lobe. General condition of woman is normal, uterine is firm, there is moderate bloody discharge. Inspection of birth canal with mirrors shows absence of lacerations. What is the following necessary action?

- A.** Manual exploration of the uterine cavity
- B.** External massage of uterus
- C.** Use of uterine contracting agents
- D.** Urine drainage, cold at lower abdomen
- E.** Use of hemostatic medications

**200.** A patient, aged 81, complains of constant urinary excretion in drops, feeling of fullness in the lower abdomen. On examination: above pubis there is a spherical protrusion, over which there is a dullness of percussion sound, positive suprapubic punch. What symptom is observed in this patient?

- A.** Paradoxal ischuria
- B.** Urinary incontinence
- C.** Dysuria
- D.** Enuresis
- E.** Pollakiuria