Test tasks for the preparation of the section "Digestive system"

1			The cheek (bucca) contains:		
		skin			
		buccinator (m. buccinator)			
		masseter (m. masseter)			
		buccal fat pad (corpus adiposum buccae)			
		mucosa (tunica mucosa)			
2		The inferior wall of the oral cavity (cavitas oris) includes:			
		hyoglossus (m. hyoglossus)			
		sublingual gland (glandula sublingualis)			
		posterior belly of the digastric (venter posterior m. digastrici)			
		geniohyoid (m. geniohyoideus)			
		mylohyoid (m. mylohyoideus)			
3		The walls of the oral cavity proper (cavitas oris propria) are represented by:			
		lips (labia oris)			
		gums (gingivae)			
		cheeks (buccae)			
		teeth (dentes)			
		palate (palatum)			
4		The walls of the oral vestibule (vestibulum oris) include:			
		palate (palatum)			
		teeth (dentes)			
		lips (labia oris)			
		cheeks			
		gums (gingivae)			
5		In the oral vestibule (vestibulum oris) open:			
		oral fissure (rima oris)			

		sublingual duct (ductus sublingualis)		
		submandibular duct (ductus submandibularis)		
		parotid duct (ductus parotideus)		
		fauces (fauces)		
6		In the oral cavity proper (cavitas oris propria) open:		
		palatine glands (glandulae palatinae)		
		sublingual ducts (ductus sublinguales)		
		submandibular ducts (ductus submandibulares)		
		parotid ducts (ductus parotidei)		
		buccal glands (glandulae buccales)		
7		Formula of deciduous teeth (dentes decidui):		
		"1 0 2 2 "		
		"2 1 0 2"		
		"2 0 1 2"		
		"1 1 2 1"		
		"2 0 2 1 "		
8		Formula of permanent teeth (dentes permanentes):		
		"2 1 3 2 "		
		"1 2 2 3"		
		"2 1 2 3"		
		"1 2 3 2 "		
		"2 2 1 3"		
9		Each tooth has:		
		body (corpus)		
		cervix (collum)		
		crown (corona)		
		pulp cavity (cavitas dentis)		
		root (radix dentis)		

10		Hard tooth tissues are:		
		pulp (pulpa dentis)		
		dentine (dentinum)		
		periodontium (periodontium)		
		enamel (enamelum)		
		cement (cementum)		
11		Soft tooth tissues are:		
		periodontium (periodontium)		
		pulp (pulpa dentis)		
		dentine(dentinum)		
		enamel (enamelum)		
		cement (cementum)		
12		Hard palate (palatum durum):		
		represents part of the superior wall of the oral cavity proper		
		includes a mucosa		
		includes an aponeurosis (aponeurosis palatina)		
		its skeleton is represented by the body of maxillae(corpus maxillae)		
		its skeleton is represented by palatine bones and palatine processes of maxillae		
13		Soft palate (palatum molle):		
		contains muscles formed by smooth muscle tissue		
		contains the mucous membrane on one side		
		contains the mucous membrane on both sides		
		contains aponeurotic plate (aponeurosis palatina)		
		contains muscles formed by striated muscle tissue		
14		Muscles of the soft palate (palatum molle):		
		are derivatives of the cephalic myotomes		
		are derivatives of visceral (pharyngeal) arches		

		lower, raise or tense the soft palate		
		contribute to the expansion of the auditory tube (tuba auditiva)		
		control the size of fauces		
15		The muscle of the soft palate participating in expansion of the auditory tube is:		
		levator veli palatini		
		palatopharyngeus		
		tensor veli palatini		
		palatoglossus		
		musculus uvulae		
16		They are distinguished in the tongue (lingua):		
		body (corpus linguae)		
		neck (collum)		
		isthmus (isthmus)		
		root (radix linguae)		
		apex (apex linguae)		
17		Papillae of the tongue (papillae lingualis):		
		are the structures participating in production of saliva		
		contain the taste receptors		
		contain receptors of general sensitivity		
		are located at the dorsum of the tongue (dorsum linguae)		
		are located at the margins of the tongue (margo linguae)		
18		The lingual papillae which are in the least amount are:		
		fungiform papillae (papillae fungiformes)		
		filiform papillae (papillae filiformes)		
		foliate papillae (papillae foliatae)		
		vallate papillae (papillae vallatae)		
		all of them are extremely numerous		

19		The muscles of the tongue are derivatives of:		
		the 1-st visceral (branchial) arch		
		the 2-nd visceral (branchial) arch		
		the 3-rd branchial arch		
		the occipital myotomes		
		the upper cervical myotomes		
20		Genioglossus (m. genioglossus):		
		relates to the skeletal muscles of the tongue		
		relates to the proper muscles of the tongue		
		pulls the tongue back and down		
		pulls the tongue forward and down		
		reduces the transverse dimension of tongue		
21		Hyoglossus muscle (m. hyoglossus):		
		refers to the own muscles of the tongue		
		shortens the tongue		
		refers to the skeletal muscles of the tongue		
		pulls the tongue back and down		
		pulls the tongue forward and down		
22		Styloglossus (m. styloglossus):		
		refers to the skeletal muscles of the tongue		
		refers to the proper muscles of the tongue		
		lengthens the tongue		
		shortens the tongue		
		pulls the tongue up and backward		
23		The root of the tongue (radix linguae):		
		composes the lower wall of fauces		
		presents numerous papillae on its surface (papillae linguales)		
		contains the tonsil inside the muscular mass		

		contains the tonsil inside the mucosa		
		is the least movable part of tongue		
24		Duct of the parotid salivary gland opens:		
		on the sublingual caruncle (caruncula sublingualis)		
		on the sublingual fold (plica sublingualis)		
		on the mucosa of the oral vestibule (vestibulum oris)		
		at the level of the 1-st upper premolar		
		at the level of the 2-nd upper molar		
25		The duct of the submandibular salivary gland opens:		
		into the oral vestibule (vestibulum oris)		
		into the oral cavity proper (cavitas oris propria)		
		on the sublingual fold (plica sublingualis)		
		on the sublingual caruncle (caruncula sublingualis)		
		on the cheek mucosa		
26		In the oral vestibule the following ducts of major salivary glands open:		
		only the sublingual ducts		
		the parotid and submandibular ducts		
		parotid ducts only		
		sublingual and submandibular ducts		
		none of the listed		
27		The term of harelip (labium leporinum) refers to the embryonic defect of:		
		superior lip		
		inferior lip		
		angle of the mouth		
		maxillary alveolar process		

		other		
28		In the walls of fauces are contained:		
		muscles of soft palate		
		lingual tonsil(tonsilla lingualis)		
		palatine tonsils (tonsilla palatina)		
		pharyngeal tonsil (tonsilla pharyngealis)		
		tongue papillae (papillae linguales)		
29		The walls of fauces are represented by:		
		soft palate (palatum molle)		
		the root of tongue (radix linguae)		
		sublingual fold (plica sublingualis)		
		palatopharyngeal arch (arcus palatopharyngeus)		
		palatoglossal arch (arcus palatoglossus)		
30		Palatine tonsil (tonsilla palatina) is:		
		unpaired organ		
		paired organ		
		located behind the palatoglossal arch (arcus palatoglossus)		
		located behind the palatopharyngeal arch (arcus palatopharyngeus)		
		a component of immune system		
31		The muscles of the soft palate (palatum molle) are embryonic derivatives of:		
		the occipital myotomes		
		the 1-st branchial arch		
		the 2-nd branchial arch		
		the 3-rd branchial arch		
		the 4-th branchial arch		
32		The muscles of the soft palate (palatum molle) are:		
		composed of smooth muscular tissue		

		composed of striated muscular tissue		
		arranged in layers		
		arranged as individual muscles		
		inserted mostly into the palatine aponeurosis (aponeurosis palatina)		
33		The nasopharynx (nasal part, pars nasalis pharyngis) communicates directly with:		
		tympanic cavity (cavitas tympani)		
		oral cavity (cavitas oris)		
		oesophagus (oesophagus)		
		larynx		
		nasal cavity (cavitas nasi)		
34		The oropharynx (oral part, pars oralis pharyngis) communicates directly with:		
		tympanic cavity (cavitas tympani)		
		oral cavity (cavitas oris)		
		oesophagus (oesophagus)		
		larynx		
		nasal cavity (cavitas nasi)		
35		The laryngopharynx (laryngeal part, pars laryngea pharyngis) communicates directly with:		
		tympanic cavity (cavitas tympani)		
		oral cavity (cavitas oris)		
		oesophagus (oesophagus)		
		larynx		
		nasal cavity (cavitas nasi)		
36		The pharyngobasilar fascia (fascia pharyngobasilais) of pharyngeal wall:		
		is the outer covering of pharynx		
		occupies the place of a submucosa		
		is thin and discontinuous		
		is thick and continuous		
		is firmly attached to the external surface of cranial base (basis cranii externa)		

37		The pharyngobasilar fascia (fascia pharyngobasilais) of pharyngeal wall:		
		is located between the muscular coat of pharynx and its mucosa		
		is located between the pharyngeal muscles		
		is particularly developed in naso- and oropharynx		
		is particularly developed in every part of pharynx		
		is firmly attached to the bodies of cervical vertebrae		
38		The muscular coat of pharynx (pharynx):		
		is arranged in two complete layers		
		is arranged in individual muscles		
		is composed of striated muscular tissue		
		is composed of smooth muscular tissue		
		is derivative of the 4-th pharyngeal (branchial) arch mostly		
39		The pharyngeal lymphoid ring of Pirogov-Valdeyer (anulus lymphoideus pharyngis) consists of tonsils that:		
		are all paired		
		refer to the lymphoid organs		
		are contained in a mucosa		
		are developed to a greater extent in child		
		are developed to a greater extent in adult		
40		Parts of pharynx are:		
		cephalic part (pars cephalica)		
		cervical part (pars cervicalis)		
		nasal part (pars nasalis)		
		oral part (parsoralis)		
		laryngeal part (pars laryngea)		

41		The pharyngeal lymphoid ring of Pirogov-Valdeyer (anulus lymphoideus pharyngis) includes:		
		pharyngeal tonsil (tonsilla pharyngea)		
		tubal tonsils (tonsilla tubaria)		
		palatine tonsils (tonsilla palatina)		
		lingual tonsil (tonsilla lingualis)		
		deep cervical lymph nodes (nodi lymphoidei cervicales profundi)		
42		Pharynx:		
		is a hollow organ		
		develops from the cephalic gut		
		develops from the middle gut		
		participates in swallowing only		
		participates in swallowing and in breathing		
43		Piriform recess of pharynx (recessus piriformis):		
		is a paired deepening of the nasopharynx cavity		
		is a paired deepening of the oropharynx cavity		
		is a paired deepening of the laryngopharynx cavity		
		contains a tonsil		
		is a developmental defect		
44		The following parts are distinguished in oesophagus:		
		cervical		
		thoracic		
		superior		
		abdominal		
		inferior		
45		The notion of anatomical sphincter is referred to:		
		a mucosal fold		
		local thickening of a mucosa		
		local thickening of a submucosa		

		local thickening of a muscular coat		
		any structure that is able to diminish the diameter of a hollow organ		
46		The structures that are in direct contact with the anterior wall of oesophagus (oesophagus):		
		larynx (larynx)		
		trachea (trachea)		
		left main bronchus (bronchus principalis sinister)		
		right main bronchus (bronchus principalis dexter)		
		pericardium (pericardium)		
47		The anatomical structures that are directly adjacent to the left wall of oesophagus:		
		left main bronchus (bronchus principalis sinister)		
		pericardium (pericardium)		
		mediastinal pleura (pleura mediastinalis)		
		heart(cor)		
		aortic arch (arcus aortae)		
48		Behind the cervical part of oesophagus are located:		
		trachea		
		vertebral column		
		deep muscles of the neck		
		infrahyoid muscles		
		retrovisceral space		
49		Oesophageal mucosa (oesophagus):		
		adjacent to the submucosa		
		adjacent to the muscular layer		
		forms longitudinal folds		
		forms transverse folds		
		forms semilunar folds		
50		Oesophageal mucosa (oesophagus):		

		forms longitudinal folds		
		forms circular folds		
		contains glands		
		does not contain glands		
		is adjacent to the muscular layer		
51		The notion of physiological sphincter is referred to:		
		a sphincter that may be revealed in living person only		
		a sphincter that may be revealed both in living person and in cadaver		
		a sphincter that may be revealed in cadaver only		
		a sphincter that is voluntary in mode of its action		
		a sphincter that is involuntary in mode of its action		
52		Anatomical oesophageal narrowings (oesophagus):		
		pharyngooesophageal		
		aortic		
		bronchial		
		diaphragmatic		
		cardial		
53		Physiological oesophageal narrowings (oesophagus):		
		pharyngooesophageal		
		aortic		
		bronchial		
		diaphragmatic		
		cardial		
54		The narrowings of the oesophagus (oesophagus) are located in sites:		
		where the pharynx passes into the oesophagus		
		where the trachea is adjacent to the oesophagus		

		where the left main bronchus is adjacent to the oesophagus		
		where the right main bronchus is adjacent to the oesophagus		
		where the oesophagus passes through the diaphragm		
55		Parts of stomach (gaster):		
		cardiac part (pars cardiaca)		
		descending part (pars descendens)		
		horizontal part (pars horizontalis)		
		pyloric part (pars pylorica)		
		body (corpus)		
56		The surfaces of a stomach are:		
		superior		
		inferior		
		anterior		
		posterior		
		lateral and medial		
57		The curvatures of a stomach (curvaturae major et minor) are:		
		the curved folds of a gastric mucosa		
		the curved peritoneal folds on a stomach		
		the edges of a stomach		
		the curved muscular bundles of a gastric wall		
		the projections of stomach onto the abdominal wall		
58		The gastric wall is composed of:		
		mucosa (tunica mucosa)		
		submucosa (tela submucosa)		
		muscular layer (tunica muscularis)		
		adventitia (adventitia)		
		serosa (tunica serosa)		

59		The gastric mucosa demonstrates:		
		the apparent longitudinal folds (plicae longitudinales) along the greater curvature		
		the apparent longitudinal folds (plicae longitudinales) along the lesser curvature		
		gastric fields (areae gastricae)		
		circular pyloric fold(valvula pylorica)		
		semilunar folds (plicae semilunares)		
60		In its relation to the peritoneum a stomach is:		
		mesoperitoneal organ		
		intraperitoneal organ		
		extraperitoneal organ		
		totally deprived of any contacts with a peritoneum		
		located in the retroperitoneal space		
61		In its development the stomach is derivative of:		
		the cephalic gut		
		the anterior gut		
		the middle gut		
		the posterior gut		
		the intestinal loop		
62		Features of the gastric mucosa (gaster):		
		villi (villi intestinales)		
		minor duodenal papilla (papilla duodeni minor)		
		gastric fields (areae gastricae)		
		longitudinal folds (plica longitudinalis)		
		circular folds (plicae circulares)		
63		Muscular coat of a stomach (gaster) is:		
		composed of smooth muscular tissue		
		composed of striated muscular tissue		
		composed of both smooth and striated muscular tissues		

		composed of 2 layers like other hollow digestive organs		
		composed of 3 layers		
64		The pyloric part of stomach:		
		is represented by pyloric canal and pyloric ampulla (canalis pyloricus, ampulla pylorica)		
		is represented by pyloric canal and pyloric antrum(canalis pyloricus, antrum pyloricum)		
		is located at the level of T12-L1		
		is located at the level of L2-L3		
		is deprived of mucosal folds		
65		Stomach skeletopy (gaster):		
		cardial opening at the level of T5-T7		
		cardial opening at the level of T10-T11		
		pyloric opening at the level of T10-T11		
		pyloric opening at level of L3		
		pyloric opening at level of T12- L1		
66		The anterior surface of stomach is adjacent to:		
		diaphragmatic surface of the liver		
		anterior abdominal wall		
		visceral surface of the liver		
		spleen (spleen; lien)		
		diaphragm		
67		The posterior surface of stomach is adjacent to:		
		diaphragm		
		duodenum		
		pancreas		
		splen		
		left kidney		
68		The main variants of shape of a stomach in adult are:		

		hook-shaped		
		horn-shaped		
		spindle-shaped		
		stocking shape		
		cone-shaped		
69		Pyloric part of the stomach (pars pylorica):		
		is bordered from the gastric body by angular incision (incisura angularis)		
		its mucosa forms circular folds and one longitudinal		
		its mucosa forms longitudinal folds and one circular		
		is characterized by the presence of an anatomical sphincter		
		intravitally it is bordered from the gastric body by physiological sphincter		
70		The ligaments described in anatomy of stomach:		
		are the structures similar to the ligaments in joints		
		are the dense connective tissue plates		
		are the dense connective tissue cords		
		are the folds of peritoneum		
		contain vessels and nerves		
71		The ligament inserted to the lesser curvature of stomach:		
		is a double layer peritoneal fold		
		is a dense connective tissue plate		
		connects the stomach to the spleen		
		connects the stomach to the liver		
		connects the stomach to transverse colon		
72		The ligament inserted to the left part of the greater curvature of stomach:		

		is a double layer peritoneal fold		
		is a dense connective tissue plate		
		connects the stomach to the spleen		
		connects the stomach to the liver		
		connects the stomach to the transverse colon		
73		Divisions of the small intestine (intestinum tenue):		
		duodenum (duodenum)		
		colon (colon)		
		ileum (ileum)		
		jejunum (jejunum)		
		rectum (rectum)		
74		The correct sequence of duodenal compartments:		
		ascending part, horizontal part, superior part, descending part		
		ascending part, superior part, horizontal part, descending part		
		superior part, horizontal part, ascending part, descending part		
		superior part, descending part, horizontal part, ascending part		
		ascending part, horizontal part, descending part, superior part		
75		The components of the duodenal mucosa (duodenum):		
		circular folds (plicae circulares)		
		semilunar folds (plicae semilunares)		
		numerous longitudinal folds (plicae longitudinales)		
		single longitudinal fold (plica longitudinalis)		
		greater duodenal papilla (papilla duodeni major)		
76		The peritoneal relations of the postnatal duodenum:		
		it is totally intraperitoneal organ		
		it is totally extraperitoneal organ		
		it is intraperitoneal organ excepting its horizontal and ascending parts		

		it is intraperitoneal organ excepting its superior and descending parts		
		it is extraperitoneal organ excepting its superior part		
77		Elements of topography of the duodenum:		
		it is situated mostly to the right of the midline		
		it is situated mostly to the left of the midline		
		its lowest part is situated at the level of L3		
		it surrounds the kidney (ren)		
		it surrounds the pancreatic head (caput pancreatis)		
78		The site of transition of extraperitoneal (extramesenteric) part of small intestine into the intraperitoneal (mesenteric) part:		
		is called the left colic flexure (flexura coli sinistra)		
		is called the ileocaecal angle (angulus ileocaecalis)		
		is located at the level of L1 to the left of the vertebral body		
		is located in the right iliac fossa (fossa iliaca)		
		is called the duodenojejunal flexure (flexura duodenojejunalis)		
79		The jejunum differs from ileum by:		
		the greater diameter		
		presence of intestinal villi (villi intestinales)		
		the greater number and size of circular mucosal folds (plicae circulares)		
		the lesser number and size of circular mucosal folds (plicae circulares)		
		intraperitoneal position		
80		Jejunum:		
		has no intestinal villi (villi intestinales)		
		posesses epiploic appendices (appendices epiploicae)		
		is situated intraperitoneally		
		is situated mesoperitoneally		
		is provided with a mesentery (mesenterium)		
81		Ileum:		

		follows the duodenum		
		follows the jejunum		
		is theshortest part of the small intestine		
		is the only part of the intestine containing the aggregated lymphoid nodules (noduli lymphoidei aggregati)		
		is provided with a mesentery (mesenterium)		
82		The ileum differs from jejunum by:		
		the lesser diameter		
		presence of intestinal villi (villi intestinales)		
		the lesser number and size of circular mucosal folds(plicae circulares)		
		presence of numerous longitudinal mucosal folds (plicae longitudinales)		
		intraperitoneal position		
83		The ileal (Meckel's) diverticulum (diverticulum ilei) is:		
		an ordinary component of ileum		
		located nearer to the duodenojejunal flexure (flexura duodenojejunalis)		
		located nearer to theileocaecal angle (angulus ileocaecalis)		
		an anomaly of development		
		a rudiment of the omphalo-enteric (vitello-intestinal) duct (ductus omphaloentericus; ductus vitellointestinalis)		
84		Large intestine (intestinum crassum) is represented among others by:		
		ileum(ileum)		
		duodenum(duodenum)		
		caecum (caecum)		
		sigmoid colon (colon sigmoideum)		
		rectum (rectum)		
85		The initial component of a large intestine (intestinum crassum) is:		
		sigmoid colon (colon sigmoideum)		
		ascending colon (colon ascendens)		
		caecum (caecum)		

		ileum (ileum)		
		transverse colon (colon transversum)		
86		Strictly speaking the terminal component of a large intestine (intestinum crassum) is:		
		rectum (rectum)		
		sigmoid colon (colon sigmoideum)		
		caecum (caecum)		
		anal canal (canalis analis)		
		ileum (ileum)		
87		The colon is distinguished by presence of:		
		haustra (haustra coli)		
		omental (epiploic) appendices(appendices omentales = epiploicae)		
		taeniae coli (taeniae coli)		
		intestinal villi (villi intestinales)		
		aggregated lymphoid nodules (noduli lymphoidei aggregati)		
88		Taeniae coli are in their nature:		
		the fibrous bundles upon the colic walls		
		the elongated thickenings of the colic peritoneal covering		
		the vascular tracts upon the colic walls		
		the particular mode of arrangement of the longitudinal muscular layer of the intestinal wall		
		the embryonic rudiments		
89		Omental (epiploic) appendices (appendices omentales = epiploicae)are in their nature:		
		the local protrusions of the intestinal walls		
		the local outgrowths of the intestinal peritoneum with the fatty content		
		the local overgrowths of the greater omentum		
		the local overgrowths of the parietal peritoneum		
		the components of the whole gastrointestinal tract		
		the components of the colon		

90		Ileal (ileocaecale) orifice (ostium ileale, ostium ileocaecale):		
		is the site of transition of the small intestine into the large one		
		is the site of transition of the ileum into the caecum		
		is provided with the ileocaecal valve (valva ileocaecalis)		
		is provided with the ileocaecal sphincter (sphincter ileocaecalis)		
		is bounded by two lips		
91		The mucosa of the transverse colon (colon transversum) is characterized by:		
		the presence of intestinal villi (villi intestinales)		
		the presence of circular folds (plicae circulares)		
		the presence of semilunar folds (plicae semilunares coli)		
		the presence of longitudinal folds (plicae longitudinales)		
		the presence of transverse folds (plicae transversae)		
92		The transverse colon (colon transversum) is characterized by:		
		intraperitoneal position		
		mesoperitoneal position		
		extraperitoneal position		
		the presence of the mesentery (mesocolon)		
		the presence of haustra (haustra coli)		
93		Ascending colon (colon ascendens) is characterized by:		
		intraperitoneal position		
		mesoperitoneal position		
		extraperitoneal position		
		the presence of a mesentery (mesocolon)		
		the presence of haustra (haustra coli)		
94		The right colic flexure (flexura colica dextra) is located in nearest proximity to:		
		the stomach (gaster)		
		the liver (hepar)		

		the right kidney (ren)		
		the spleen (spleen; lien)		
		the pancreas (pancreas)		
95		The left colic flexure (flexura colica sinistra) is located in nearest proximity to:		
		the stomach (gaster)		
		the liver (hepar)		
		the left kidney (ren)		
		the spleen (spleen; lien)		
		the pancreas (pancreas)		
96		The rectum is:		
		located in the lesser pelvis		
		rectilineal		
		curved		
		totally extraperitoneal		
		provided with the transverse mucosal folds		
97		The rectum:		
		together with its anal canal represents the terminal compartment of the digestive tract		
		is the embryonic derivative of the cloaca		
		is totally covered with the peritoneum		
		contains a few transverse mucosal folds (plicae transersae)		
		is deprived of tela submucosa		
98		Mucosa of the anal canal (canalis analis) shows:		
		intestinal villi (villi intestinales)		
		circular folds (plicae circulares)		
		aggregated lymphoid nodules (noduli lymphoidei aggregati)		
		anal columns (columnae anales)		
		anal valves (valvulae anales)		

99		The muscular coat of the anal canal (canalis analis):		
		is composed of smooth muscular tissue		
		is composed of circular and longitudinal layers		
		is composed of circular, oblique and longitudinal layers		
		forms the external anal sphincter (m. sphincter ani externus)		
		forms the internal anal sphincter (m. sphincter ani internus)		
100		The external anal sphincter (m. sphincter ani externus) is:		
		composed of smooth muscular tissue		
		composed of striated muscular tissue		
		located inside of the anal canal wall		
		the outer structure in relation to the anal canal wall		
		a component of the perineum		
101		Sphincters of the anal canal (canalis analis):		
		External anal sphincter (m. sphincter ani externus)		
		internal anal sphincter (m. sphincter ani internus)		
		deep anal sphincter (m. sphincter ani profundus)		
		superficial anal sphincter (m. sphincter ani superficialis)		
		middle anal sphincter anus (m. sphincter ani medianus)		
102		As a structural-functional unit of the liver (hepar) is commonly considered to be:		
		hepatic segment (segmentum hepatis)		
		hepatic cell(hepatocyte)		
		hepatic lobule (lobulus hepatis)		
		hepatic lobe (lobus hepatis)		
		hepatic sector (division)		
103		The concept of a "miraculous vascular network" of the liver implies:		
		a particular mode of organization of the bile duct system (ductus biliferi)		
		a particular mode of organization of the microvascular bed of the liver		
		the presence of a capillary network between the venous vessels		

		the presence of capillaries originating from the terminal branches of the hepatic portal vein (v. portae hepatis)		
		the presence of a capillary network between the arterial vessels		
104		The criteria to identify the hepatic segments is:		
		their blood supply via segmental roots of the hepatic veins		
		their separation from each other by connective tissue septa		
		their blood supply via segmental branches of the hepatic portal vein and hepatic artery		
		the visibility of their boundaries at the surface of the liver		
		their peritoneal relations		
105		The inferior border of the liver in an adult is projected at the greater part of its course:		
		along the edge of the right costal arch (arcus costalis)		
		at the middle of the distance between the xiphoid process and the umbilicus		
		4 cm above the costal arch		
		2 cm above the costal arch		
		2 cm below the costal arch		
106		The position of the common bile duct, proper hepatic artery and portal vein in the hepatoduodenal ligament (from right to left):		
		duct, vein, artery		
		vein, artery, duct		
		duct, artery, vein		
		artery, duct, vein		
		vein, duct, artery		
107		The common bile duct (ductus choledochus) forms as a result of fusion of:		
		the left hepatic duct (ductus hepaticus sinister)		
		the common hepatic duct (ductus hepaticus communis)		
		cystic duct (ductus cysticus)		
		right hepatic duct (ductus hepaticus dexter)		

		pancreatic duct (ductus pancreaticus)		
108		The common hepatic duct (ductus hepaticus communis) forms as a result of fusion of:		
		the cystic duct (ductus cysticus)		
		the right hepatic duct (ductus hepaticus dexter)		
		the left hepatic duct (ductus hepaticus sinister)		
		the common bile duct (ductus choledochus)		
		the pancreatic duct (ductus pancreaticus)		
109		The pancreatic duct opens in:		
		the superior part of the duodenum		
		the descending part of the duodenum		
		the ascending part of the duodenum		
		the horizontal part of the duodenum		
		the jejunum		
110		The most upper point of the liver projection is located at the level of:		
		the 6-th left intercostal space		
		the 6-th right intercostal space		
		the 4-th left intercostal space		
		the 4-5-th right intercostal space		
		the 5-th left rib		
111		Peritoneal ligaments of the liver are:		
		falciform ligament (lig. falciforme)		
		venous ligament (lig. venosum)		
		coronary ligament (lig. coronarium)		
		left triangular ligament (lig. triangulare)		
		round ligament of liver (lig. tereshepatis)		
112		The caudate lobe of the liver (lobus caudatus) is bounded by:		

		the groove for vena cava (sulcus venae cavae)		
		the fossa for gallbladder (fossa vesicae biliaris)		
		the porta hepatis (porta hepatis)		
		the fissure for ligamentum venosum (fissura lig. venosi)		
		the fissure for ligamentum teres (fissura ligamenti teretis)		
113		The impressions on the visceral surface of the liver:		
		gastric		
		oesophageal		
		renal		
		colic		
		splenic		
114		The impressions on the visceral surface of the left lobe of the liver:		
		duodenal		
		gastric		
		oesophageal		
		renal		
		splenic		
115		The impressions on the visceral surface of the right lobe of the liver:		
		colic		
		duodenal		
		renal		
		gastric		
		splenic		
116		Round ligament of the liver (lig. teres hepatis):		
		is a fibrous cord		

		is a fold of peritoneum		
		contains the hepatic vessels		
		is a rudiment of an embryonic vessel		
		extends up to the umbilicus		
117		Pancreas:		
		is an endocrine gland		
		is an exocrine gland		
		is a mixed gland in its nature		
		is totally covered with peritoneum		
		is extraperitoneally located		
118		The main parts of pancreas are:		
		body (corpus pancreatis)		
		fornix (fornix)		
		head (caput pancreatis)		
		tail (cauda pancreatis)		
		qaudrate lobe (lobus qaudratus)		
119		The pancreas is located at the level of:		
		XII-th thoracic vertebra		
		XI-th thoracic vertebra		
		I-II-th lumbar vertebra		
		III- IV-th lumbar vertebra		
		X-th thoracic vertebra		
120		Surfaces of pancreas:		
		anterior surface		
		posterior surface		

		inferior surface		
		superior surface		
		lateral surface		
121		The accessory duct of the pancreas (ductus pancreaticus accessorius) opens:		
		at the greater papilla of duodenum (papilla duodeni major)		
		at the lesser papilla of duodenum (papilla duodeni minor)		
		into the hepatopancreatic ampulla(ampulla hepatopancreatica)		
		into the superior part of the duodenum (parssuperiorduodeni)		
		into the pyloric part of stomach (parspylorica)		
122		Peritoneal position of the pancreas:		
		intraperitoneal		
		mesoperitoneal		
		infraperitoneal		
		supraperitoneal		
		extraperitoneal		
123		The main (Virsungov's) excretory duct of the pancreas (ductus pancreaticus) opens:		
		at the greater papilla of duodenum (papilla duodeni major)		
		at the lesser papilla of duodenum (papilla duodeni minor)		
		into the hepatopancreatic ampulla (ampulla hepatopancreatica)		
		into the ascending part of duodenum (pars ascendens duodeni)		
		into the superior part ofduodenum (pars superior duodeni)		
124		Parts of the gallbladder (vesica fellea):		
		fundus (fundus vesicae felleae)		
		neck (collum vesicae felleae)		
		isthmus (isthmus vesicae felleae)		
		body (corpus vesicae felleae)		
		tail(cauda vesicae felleae)		

125		The cervix of the gallbladder continues in:		
		cystic duct (ductus cysticus)		
		common hepatic duct (ductus hepaticus communis)		
		bile duct (ductus choledochus)		
		descending part of duodenum (pars descendens duodeni)		
		pancreatic duct (ductus pancreaticus)		
126		The wall of the gallbladder consists of:		
		mucous membrane		
		serous membrane		
		adventitia		
		muscular layer		
		submucosa		
127		Into the hepatopancreatic ampulla (ampulla hepatopancreatica) open:		
		cystic duct (ductus cysticus)		
		bile duct (ductus choledochus)		
		pancreatic duct (ductus pancreaticus)		
		common hepatic duct (ductus hepaticus communis)		
		accessory pancreatic duct (ductus pancreaticus accessorius)		
128		The intake of bile and pancreatic juice into the duodenum is controlled by:		
		sphincter of bile duct (m.sphincter ductus holedochus)		
		sphincter of the pancreatic duct (m.sphincter ductus pancreatici)		
		sphincter of the hepatopancreatic ampulla (m.sphincter ampullae)		
		pyloric sphincter (m.sphincter pyloricus)		
		sphincter of the common hepatic duct (m.sphincter ductus hepaticus communis)		
129		Peritoneal position of the gallbladder is mostly:		
		intraperitoneal		
		mesoperitoneal		

		infraperitoneal		
		supraperitoneal		
		extraperitoneal		
130		The projection of the gallbladder fundus corresponds to:		
		the site of intersection of the costal arch and middle axillary line		
		the site of intersection of the costal arch and anterior median line		
		the site of intersection of the costal arch and lateral edge of the right rectus abdominis		
		the site of intersection of the costal arch and medial edge of the left rectus abdominis		
		the site of intersection of the 6-th rib and midclavicular line		
131		Compartments of the upper floor of the peritoneal cavity (cavitas peritonealis) are :		
		right mesenteric sinus (sinus mesentericus dexter)		
		left mesenteric sinus (sinus mesentericus sinister)		
		omental bursa (bursa omentalis)		
		pregastric bursa (bursa pregastrica)		
		hepatic bursa (bursa hepatica)		
132		Omental bursa walls (bursa omentalis) are:		
		falciform ligament (lig. falciforme)		
		lesser omentum (omentum minus)		
		peritoneal covering of the posterior stomach wall (gaster)		
		gastrosplenic ligament (lig. gastrosplenicum, gastrolienale)		
		gastrocolic ligament (lig. gastrocolicum)		
133		Mesoperitoneally located are :		
		stomach (gaster)		
		duodenum (duodenum)		
		ileum (ileum)		
		ascending colon (colon ascendens)		
		descending colon (colon descendens)		

134		Intraperitoneall located are:		
		stomach (gaster)		
		duodenum (duodenum)		
		transverse colon (colon transversum)		
		ascending colon (colon ascendens)		
		ileum (ileum)		
135		The organs located retroperitoneally:		
		stomach (gaster)		
		duodenum (duodenum)		
		transverse colon (colon transversum)		
		ascending colon (colon ascendens)		
		pancreas (pancreas)		
136		The right mesenteric sinus (sinus mesentericus dexter) is limited by:		
		stomach (gaster)		
		mesentery of the transverse colon (mesocolon)		
		ascending colon (colon ascendens)		
		descending colon (colon descendens)		
		the root of the mesentery of the small intestine (radix mesenterii)		
137		Upper floor of the peritoneal cavity (cavitas peritonealis) contains:		
		stomach (gaster)		
		pancreas (pancreas)		
		spleen (splen; lien)		
		serous fluid		
		liver (hepar)		
138		Peritoneal cavity (cavitas peritonealis):		
		contains the organs of the digestive system		
		includes retroperitoneal space		

		is limited by parietal and visceral sheets of peritoneum		
		contains serous fluid		
		contains fatty tissue and vessels		
139		The serous membranes (tunicae serosae):		
		are represented by peritoneum, pleura, pericardium and fasciae		
		are represented by peritoneum, pleura and pericardium		
		necessarily involve the mesothelium		
		are richly vascularized and innervated		
		are identical to adventitia		
140		The serous membranes (tunicae serosae):		
		are derivatives of the primary intestine		
		arederivatives of the ventral mesoderm		
		produce serous fluid		
		are active in pathology		
		ensure both the fixity and mobility of related organs		
141		The volume of the peritoneal cavity in average is about:		
		10 ml		
		100 ml		
		500 ml		
		1000 ml		
		3 ml		
142		Serous membranes:		
		are represented by pleura, pericardium and peritoneum		
		are represented by pleura, pericardium, peritoneum and fasciae		
		necessarily include parietal and visceral layers		
		necessarily include the mesothelium		
		are actively involved in inflammatory processes		

143		The walls of the left mesenteric sinus (sinus mesentericus sinister):		
		ascending colon (colon ascendens)		
		hepatogastric ligament (lig. hepatogastricum)		
		mesentery of the small intestine (mesentium)		
		hepatorenal (lig. hepatorenale)		
		descending colon (colon descendens)		
144		In case of perforation of the posterior wall of a stomach the peritonitis (an inflammation of a peritoneum) will develop in:		
		the left mesenteric sinus		
		right mesenteric sinus		
		omental bursa		
		pregastric bursa		
		hepatic bursa		
145		The position of the hepatic bursa (bursa hepatica):		
		surrounds the right lobe of the liver		
		surrounds the left lobe of the liver		
		is limited on the left by the falciform ligament (lig.falciforme hepatis)		
		is limited posteriorly by the coronary ligament of the liver (lig.coronarium hepatis)		
		is limited anteriorly by the lesser omentum (omentum minus)		
146		The position of the pregastric bursa (bursa pregastrica)		
		surrounds the right lobe of the liver		
		surrounds the left lobe of the liver		
		is limited on the right by the falciform ligament (lig.falciforme hepatis)		
		is limited posteriorly by the coronary ligament of the liver (lig.coronarium hepatis)		
		covers the anterior surface of the stomach		
147		Boarders of the omental (epiploic) foramen (foramen omentale, epiploicum)		
		caudate lobe of the liver (lobus caudatus)		
		hepatoduodenal ligament (lig.hepatoduodenale)		

		superior part of duodenum (pars superior duodeni)		
		hepatorenal ligament (lig.hepatorenale)		
		head of pancreas (caput pancreatis)		
148		The compartments of the middle floor of the peritoneal cavity are:		
		right paracolic gutter (sulcus paracolicus dexter)		
		omental bursa (bursa omentalis)		
		left paracolic gutter (sulcus paracolicus sinister)		
		left mesenteric sinus (sinus mesentericus sinister)		
		right mesenteric sinus (sinus mesentericus dexter)		