

Questions for credit test in Internal Medicine 3 – SS 2020/21

GASTROENTEROLOGY

1. Dysphagia is defined as:
2. Dyspepsia is defined as:
3. Alarm symptoms in a patient with dyspepsia do not involve:
4. The characteristic symptoms of acute abdomen are:
5. Which clinical condition in gastroenterology does not typically represent an emergency?
6. Oro-pharyngeal dysphagia can be caused by:
7. Differential diagnosis of postprandial upper abdominal pain involves:
8. Which of the following diagnosis does not represent an indication for gastroscopy?
9. Which of the following imaging methods does not represent the first choice diagnostic procedure in a patient with painless jaundice?
10. Differential diagnosis of chronic diarrhea involves:
11. Differential diagnosis of vomiting involves:
12. The symptoms of irritable bowel syndrome do not involve:
13. Which of the following imaging methods is used to determine the cause of chronic diarrhea?
14. Which of the following findings does not confirm the diagnosis of celiac disease?
15. How is the major duodenal papilla commonly referred to?
16. Which esophageal disease has the highest prevalence in western countries?
17. The symptoms of gastro-esophageal reflux disease do not involve:
18. Which of the following symptoms is typical for esophageal tumor?
19. Which of the following statements regarding gastric ulcer is correct:
20. *Helicobacter pylori* represents a risk factor for:
21. First-line *Helicobacter pylori* eradication therapy involves:
22. Which of the following conditions belongs to common complications of the colon diverticulosis?
23. Gastric ulcer:

24. Which of the following conditions does not belong to the differential diagnosis of chronic diarrhea?
25. The definition of diarrhea is as follows:
26. Secretory diarrhea:
27. Which of the following statements regarding osmotic diarrhea is not correct?
28. Chronic diarrhea is defined as lasting at least:
29. In antibiotic-associated diarrhea:
30. Which of the following symptoms does not help to differentiate between irritable bowel syndrome and colorectal carcinoma?
31. What are the typical symptoms of the left-sided colorectal cancer?
32. What are the typical symptoms of the right-sided colorectal cancer?
33. The complications of Crohn's disease do not typically involve:
34. Which of the following conditions does not belong to the extra-intestinal manifestations of Crohn's disease?
35. The haemorrhoids are classified as:
36. Which of the following conditions represents the most common cause of malabsorption in Western countries?
37. The most frightening complication of intestinal tract perforation is:
38. At the emergency you see a 39-year-old male patient with a history of abdominal pain for several weeks. He has melena, blood pressure 80/40 mmHg, tachycardia and normal blood count. What should you do?
39. Which of the following statements regarding ulcerative colitis is not correct?
40. What are the two most frequent causes of acute pancreatitis:
41. For the diagnosis of acute pancreatitis following criteria are used:
42. Typical biliary pain is characterized by:
43. The most common cause of chronic pancreatitis in this region is:
44. Which of the following factors plays role in the etiopathogenesis of acute pancreatitis?
45. Characteristic manifestations and findings in exocrine pancreatic insufficiency are:
46. In chronic pancreatitis:

47. Which of the following statements regarding the mechanical ileus is correct?
48. Which of the following statements regarding paralytic ileus is correct?
49. Acute hepatitis is not caused by:
50. The complications of liver cirrhosis are:
51. What is the most likely diagnosis in a patient with jaundice, erythema palmare, spider nevi and esophageal varices:
52. Typical symptoms of acute hepatitis are:
53. Fatigue, itching, loss of appetite and jaundice can represent symptoms of:
54. To establish the diagnosis of chronic hepatitis, the liver tests abnormalities must persist for at least:
55. Which of the following conditions does not lead to chronic hepatitis:
56. A triad of right upper quadrant abdominal pain, fever with chills and jaundice, the so-called Charcot triad, is found in:
57. Which of the following mode of transmissions does not belong to risk factors of contracting the hepatitis C virus:
58. Which of the following condition is the most common genetic liver disease:
59. Which of the following liver diseases is currently still incurable:
60. Which of the following laboratory tests results are related to the prognosis of a patient with liver cirrhosis:
61. Which of the following laboratory tests results are related to the prognosis of a patient with acute alcoholic hepatitis:
62. Which of the following drugs have demonstrated benefit in the treatment of severe acute alcoholic hepatitis:
63. Which of the following symptoms and signs does not accompany acute alcoholic hepatitis:
64. Abbreviation SVR, i.e. sustained viral response in the treatment of hepatitis C means:
65. Currently, the standard first line treatment of hepatitis C represents a combination of the following drugs:
66. The definition of chronic hepatitis B is:
67. Which of the following statements concerning acute hepatitis B is correct:
68. Chronic hepatitis B in a stage of significant liver fibrosis, with ongoing inflammation and viremia above 2000 UI/mL is currently treatment with the following drugs:

69. 28-year old pregnant patient in a 32nd gestational week reports itching since one week. She has elevated ALT above three-time upper normal value and a normal blood count. The most likely diagnosis of the condition is:
70. What is currently the percentage of patients cured from chronic hepatitis C after the first treatment considering all genotypes and groups of patients together:
71. 45-year old female has a Child-Pugh B liver cirrhosis with persistent jaundice. She does not drink alcohol and has a normal nutritional status. What is currently considered to be the optimal therapy for her?
72. Which tumor is the most commonly complicating the course of viral (HBV or HCV) or alcoholic liver cirrhosis?
73. Zollinger-Ellison syndrome is characterized by:
74. Steatorrhoe is:
75. Glossodynia is:
76. A plain abdominal X-ray:
77. Mallory-Weiss syndrome refers to:
78. Melena:
79. Abdominal X-ray in suspicion of ileus:
80. Hematemesis:
81. Abdominal bruit:
82. Blumberg sign is positive in inflammation of:
83. Caput medusae is common in:
84. Cullen sign:
85. Defence musculaire is:
86. Grey-Turner sign:
87. Deep palpation is usually not limited in:
88. The upper border of the liver in midclavicular line may be assessed:
89. The respiratory movements from xiphoid to both inguinal regions are completely absent in:
90. Which statement about gall bladder is true:
91. Which of the signs is not positive in acute appendicitis:

92. In lateral parts of epigastrium (laterally off both midclavicular lines) are:
 93. Murphy's sign is typically positive:
 94. Normal percussion over the abdomen is:
 95. Palpation of the abdomen is:
 96. Spider naevi (angiomas):
 97. Peristalsis:
 98. During inspiration, the liver:
 99. By Naegeli the second grade of liver stiffness is by:
 100. Respiratory mobility upon palpation is typical for:
 101. In acute appendicitis is positive:
 102. In acute peritonitis one can find out:
 103. Cirrhosis of the liver can cause:
 104. In hemorrhagic-necrotising pancreatitis one may notice:
 105. By manual examination of rectum in women we palpate on anterior side:
 106. In suspicion of acute abdomen:
 107. Dull percussion sound over the abdomen can be present in:
 108. Assembly of dilated veins around the naval in liver cirrhosis is called:
 109. Resistance of malign origin upon palpation is usually:
 110. A tense ascites may be confirmed by:
 111. In healthy individual the abdominal wall is:
 112. Elevated niveau of abdomen above chest can be present in:
 113. Jaundice, septic fever and right upper quadrant pain is a common characteristic of:
 114. Undulation (fluid wave) test is used in the examination of:
 115. Reduced liver dullness may be due to:
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HEMATOLOGY

116. The cells that do not include all the following core THAN
117. Heinz bodies are located in the following diseases:

118. Haematopoietic main body of the fetus is:
119. Extracellular matrix or stromal bone marrow support hematopoiesis and consists of all the following EXCEPT glycoproteins
120. . Interleukin-1 acts as an endogenous pyrogen and mediates secretion of growth factors by activated cells, all of the following EXCEPT
121. Asplenia refers to the presence of peripheral blood smear
122. The spleen performs all of the following functions EXCEPT
123. Hypersplenism arises from all diseases except
124. All of the following are complications associated with pancytopenia resulting from failure of the bone marrow EXCEPT
125. Aplastic crisis in haemolytic anemia associated with viral infection is usually caused by
126. Which of the following tests are quick and inexpensive to distinguish between chronic myeloid leukemia (CML), a reactive increase in the number of white blood cells in the inflammatory processes (leukemoid response)?
127. The first step in the diagnosis of polycythemia is
128. The patient is considered to have essential thrombocythaemia (ET), when the platelet count was consistently greater than 1 million and is associated with
129. Patients with myelodysplastic syndromes (MDSs), the following changes occur:
130. Bone marrow transplantation is indicated for all of the following conditions EXCEPT
131. Patient with multiple myeloma, a period of five years, without chemotherapy, with a stable value of M-protein in bone marrow plasma cells without multiplication, but with the presence of ringed sideroblasts, with neutropenia and transfusion-dependent anemia precedes diagnosis:
132. Which of the following FAB subtypes of myelodysplastic syndromes (MDSs) is associated with a good prognosis and prolonged clinical course?
133. The primary factor that controls the erythropoietic activity are:
134. Which of the following best response to anemia, erythropoietin administration?
135. Iron deficiency may develop in all of the following clinical conditions EXCEPT
136. Normal or increased bone marrow iron stores are located in all types mikrocyte hypochromic anemias EXCEPT
137. Treatment failure mikrocyte anemia to oral iron replacement may result EXCEPT?

- 138. Which of the following diseases can cause anemia of chronic disease (ACD) EXCEPT?**
- 139. The following diseases which Prussian blue staining can demonstrate ringed sideroblasts in the bone marrow sample?**
- 140. All the following statements are true in patients with pernicious anemia (PA) EXCEPT**
- 141. All the following statements are true in patients with pernicious anemia (PA) EXCEPT**
- 142. The following laboratory indicators of low serum vitamin B12 levels, normal or high serum folate and abnormal result in part I and the normal result in part II of Schilling test are:**
- 143. Low levels of vitamin B12, high serum folate and normal result I part of Schilling test are:**
- 144. Normal serum vitamin B12, low serum folate and normal result of I Schillingovho test are:**
- 145. Low serum vitamin B12, serum folate, normal and abnormal, I, II and III Schillingovho test are:**
- 146. Ingestion of fava beans can cause severe hemolytic anemia in patients who have one of the following enzyme deficiency?**
- 147. Patient with intravascular hemolysis may be present in the following clinical and laboratory findings EXCEPT**
- 148. Patient with autoimmune haemolytic anemia with thermal antibody type may be present following symptoms and laboratory findings EXCEPT**
- 149. Patient with a deficiency of the enzyme glucose-6-phosphate dehydrogenase (G6PD) will be instructed to cut out all the following EXCEPT**
- 150. patient with hereditary spherocytosis (HS) shall consider all the following treatment recommendations, EXCEPT**
- 151. Patient with acute hemolysis has all the following findings EXCEPT**
- 152. Hemolytic anemia can all cause infection following EXCEPT**
- 153. Paroxysmal Nocturnal Haemoglobinuria (PNH) is diagnosed:**
- 154. Diagnostic test autoimmune hemolytic anemia with thermal antibody type is:**
- 155. Diagnostic test hereditary spherocytosis (HS) is:**
- 156. Anemia with acantocyte red blood cells causes**
- 157. Paroxysmal nocturnal hemoglobinuria causing:**

158. Hemolytic anemia caused by penicillin administration:
159. Which of the following findings is specific for the diagnosis of α thalassemia patient who has symptomatic anemia?
160. Which of the following blood groups is the most common?
161. Which of the following tests must be done before a blood transfusion?
162. Patient with blood group A Rh negative. except the same blood can receive blood transfusion:
163. Which of the following forms of red blood cell transfusion is best in the operating room?
164. Which of the transfusion reactions is the most difficult and life threatening?
165. Which of the following transfusion reactions are the most difficult and life threatening?
166. Urticarial transfusion reactions are characterized by
167. Which of the following transfusion reactions can be caused by anti-HLA
168. All of the following hemoglobins are present in normal persons EXCEPT
169. Aplastic crisis in sickle cell disease is caused by
170. Gallstones in congenital hemolytic anemia is caused due
171. Severe sickle cell disease (sickle cell disease) is caused by the presence of:
172. What do you test in suspected hemolytic anemia
173. Patient with hemoglobin 10 g / l, mean corpuscular volume 76 fl., increased the total capacity of iron, low ferritin, what procedure you choose?
174. Phagocytosis is a primary function
175. Basophils and mast cells contain basophilic granules that are similar in that they
176. Which of these cytokines is essential for T cell proliferation in immune responses
177. Cells bearing the CD4 surface antigen involved in
178. Sort the proper development of white cell series

- 179. Each of the following laboratory methodologies is useful in distinguishing acute myeloid leukemia (AML) from lymphoblastic leukemia (ALL), EXCEPT**
- 180. Diffuse large cell lymphoma, which is the most likely clinical characteristics?**
- 181. The patient has swelling in the neck caused by enlarged lymph nodes. Histological examination was diagnosed sclerosing form of Hodgkin's disease. CT scan revealed enlarged lymph nodes in the mediastinum. Abdominal lymph nodes and spleen were not affected. Liver biopsy and bone marrow were negative. At what stage of the disease the patient is?**
- 182. Leukemia which is commonly observed also myeloblasts?**
- 183. Where leukemia is present Philadelphia (Ph) chromosome?**
- 184. Which type of pathology associated aggressive non-Hodgkin's lymphoma**
- 185. Which of the following characteristics are associated with unfavorable prognosis of patients with chronic lymphocytic leukemia (CLL)?**
- 186. What does the term leukemoid reaction in blood smear?**
- 187. What phase of the disease is chronic myeloid leukemia?**
- 188. How to know the classification of acute myeloid leukemia?**
- 189. What kind of symptoms the patient comes to the doctor with acute leukemia addition?**
- 190. What does the term "hiatus leucemicus" in blood smear?**
- 191. Multiple myeloma is a disease**
- 192. Multiple myeloma affects the following body organs:**
- 193. Multiple myeloma is classified according to the criteria:**
- 194. Which of the following criteria must be met for the classification of multiple myeloma according to Durie-Salmon?**
- 195. Which of the CRAB criteria applicable to the diagnosis of multiple myeloma?**

