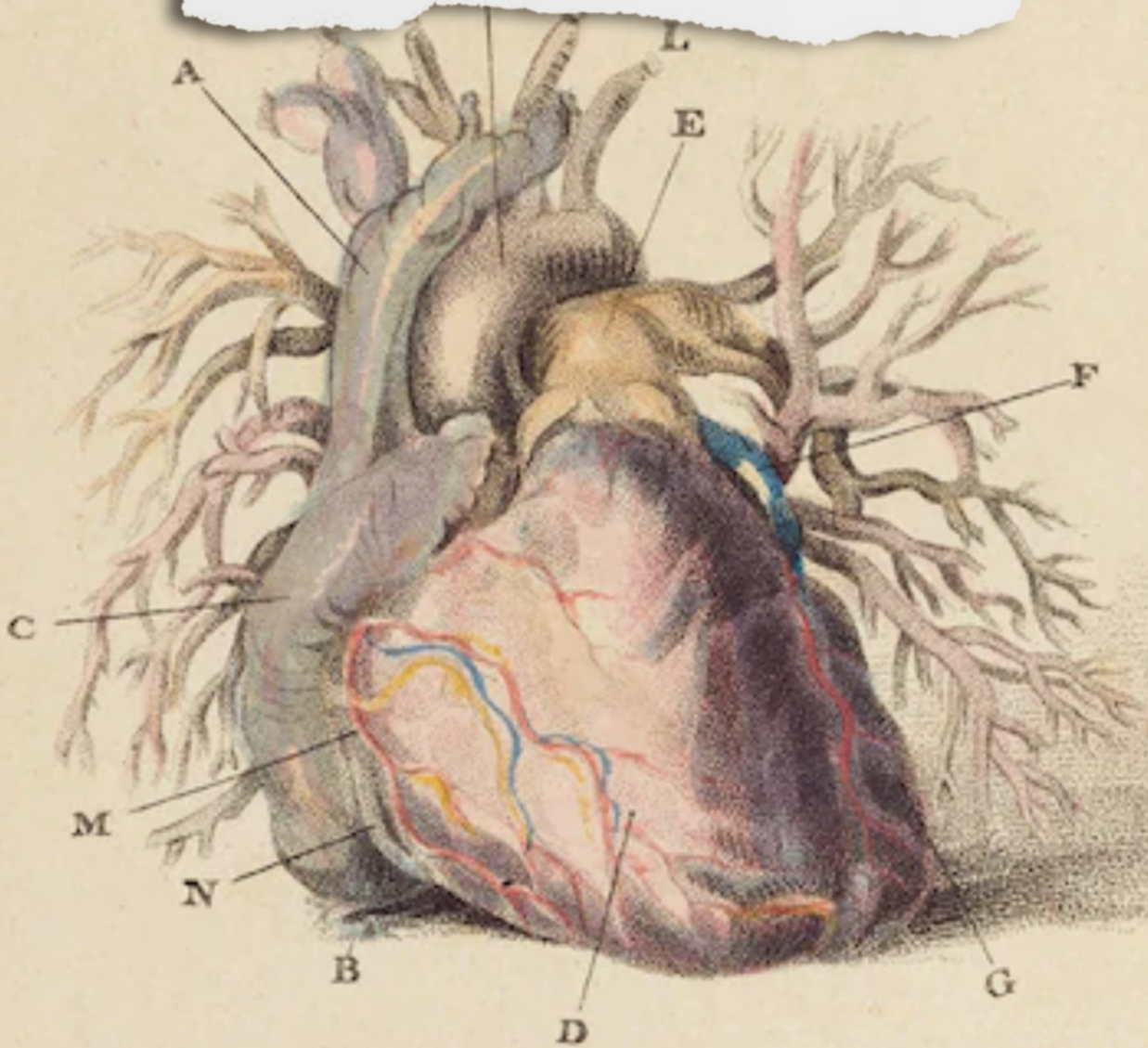


Plate 1 **PATHOLOGY TEST BANK-
CVS FINAL**



**DONE BY : ZEENAH AL-
SMADY**



Lecture 1

1-diminished oxygen-carrying capacity of the blood represents the most frequent mechanism

of cardiac ischemia

a. True

b. False

Ans: B

2-angina pectoris is defined as ischemia that causes pain but is insufficient to lead to death of

myocardium

a. True

b. False

Ans: A

3-Stable angina pectoris is also known as crescendo angina

a. True

b. False

Ans: B

4-the following statements conform with angina pectoris except:

a. Prinzmetal is usually associated with elevated ST segment of ECG

b. Stable angina is relieved by rest

c. Unstable angina is considered a pre-infarction

d. Typical angina is produced mainly on rest

e. Variant angina is due to vasospasm

Ans: D

5-stable angina has the following characters except:

- a. Appears with increased demand for blood
- b. Associated with depressed ST segment of ECG
- c. Basically there is fixed coronary narrowing by atherosclerosis
- d. Usually of a short period
- e. Being the least common

Ans: E

6-angina pectoris that occurs more frequently and of progressively longer period than other is:

- a. Crescendo
- b. Stable
- c. Variant
- d. Prinzmetal
- e. Effort angina

Ans: A

7-a man who suffer from chest pain and breathlessness after climbing the stairs to the 3rd floor, he has:

- a. Stable angina
- b. Prinzmetal angina
- c. Unstable angina
- d. Myocardial infarction

Ans: A

8-all of the following regarding ischemic heart disease are correct EXCEPT:

- a. Associated with a severe substernal pain that can radiate to the left arm
- b. Variant angina is associated with coronary artery vasospasm
- c. Stable angina is also known as pre-infarction angina
- d. Chronic IHD is usually associated with arrhythmias
- e. Typical angina can be relieved by rest and nitroglycerin

Ans: C

9-all of the following would mostly lead to unstable angina EXCEPT:

- a. Partially occlusive thrombus
- b. Complete coronary obstruction
- c. Stenosis with superimposed spasm
- d. Distal embolus formation
- e. Atheromatous plaque rupture

Ans: B

10-Thrombosis of atheromatous plaque, the most common complication:

- A. Stable angina
- B. Effort angina
- C. Unstable angina
- D. Prinzmetal angina
- E. Variant angina

Ans: C

*Which of the following mostly to proceed to MI?

Unstable angina

*Not one of the clinical forms of IHD:

Endarteritis obliterans

*Wrong pair:

Atherosclerotic plaque rupture/ Prinzmetal angina

Lecture 2

1-36 hours following acute myocardial infarction, the infarct site reveals a dense neutrophil

infiltrate

a. True

b. False

Ans: A

2-overall, non-atherosclerotic causes of sudden cardiac death are more frequent than

atherosclerotic causes:

a. True

b. False

Ans: B

3-regarding myocardial infarction, all are correct EXCEPT:

- a. Most cases of pre-hospital deaths are due to lethal arrhythmias
- b. Troponin I and T are the best indicators for MI
- c. 40-50% of cases are due to occlusion of the circumflex artery
- d. Coagulative necrosis and wavy fibers are seen within 24 hours of injury
- e. Most cases of in-hospital deaths are due cardiogenic shock

Ans: C

4-a 67 years old man with a history of hypertension was sent home 4 days after an MI. he returned to his normal activities, but died suddenly the next day. We expect to see:

- a. Arrhythmia
- b. Myocardial rupture
- c. Ventricular aneurysm

Ans: B

5-all of these factors modify the location and extent of MI, except:

- a. Patient's cardiovascular status
- b. Sex of the patient
- c. Vasospasm
- d. Duration of occlusion
- e. Collaterals

Ans: B

6-in the right coronary dominant patients, the most frequent coronary artery occlusion causing MI is:

- a. Left main stem
- b. Right main stem
- c. Left circumflex
- d. Left anterior descending
- e. Right posterior descending

Ans: D

7-serum creatine kinase determination in cardiac infarction conforms with the following, except:

- a. Appears in 2-4 hours
- b. Does not elevate with angina pectoris
- c. Peaks in 24 hours
- d. Considered highly specific
- e. Disappears in 3 days

Ans: D

8-the heart specific enzyme/ protein serum elevation indicative of myocardial infarction is:

- a. Lactic dehydrogenase
- b. Creative kinase index
- c. Troponin I
- d. Troponin T

** Ans: C (according to our lecture c&d)

9-all of the following are complications of myocardial infarction EXCEPT:

- a. Papillary muscle rupture causing acute mitral regurgitation
- b. Free wall rupture
- c. Early pericarditis
- d. Cardiogenic shock
- e. Acute aortic regurgitation

Ans: E

10-at the site of a myocardial infarction, phagocytic macrophages are most abundant in which

of the following time zones from infarct onset:

- a. After 6 weeks
- b. Within the first 2 days
- c. After 3 weeks
- d. Within first 24 hours
- e. By the end of first week

Ans: E

11-one of the following is considered a late complication that may occur months after acute myocardial infarction:

- a. Infarct expansion
- b. Papillary muscle rupture
- c. Fibrinous pericarditis
- d. Ventricular aneurysm
- e. Cardiogenic shock

Ans: D

12-papillary muscle rupture can lead to:

- a. Aortic regurgitation
- b. Mitral stenosis
- c. Mitral regurgitation
- d. Aortic stenosis

Ans: C

*Late complications of MI:

Ventricular aneurysm

*Masked MI in:

Peripheral neuropathy

*Up to 50% of all MI are due to occlusion of:

Left anterior descending artery

*Wrong complication of MI:

Papillary muscle rupture/ severe aortic regurgitation

*Wrong combination:

Post-MI pericarditis/ staph aureus infection

*Which of the following is a major risk factor of MI:

Smoking

Lecture 3

1- Rheumatic fever is an infection of the heart caused by bacteria, especially Streptococci

a- True

b- False

Ans:B

2- Fever and painful tender joints are common signs and symptoms of Rheumatic fever

a- True

b- False

Ans:A

3-The second most common valve to be affected by rheumatic after mitral is :

a. Aortic

b. Pulmonary

c. Tricuspid

d. Pulmonary and tricuspid

Ans:A

4-The microorganism responsible for rheumatic carditis is:

- a. Alpha streptococcus hemolytic group A
- b. Human papilloma virus
- c. Staphylococcus aureus
- d. All of the above
- e. None of the above

Ans :E

5-The valve most commonly affected by rheumatic carditis is the :

- a. Pulmonic
- b. Tricuspid
- c. Mitral
- d. Foramen ovale
- e. Aortic

Ans:C

6-All of the following regarding rheumatic heart fever are correct EXCEPT :

- a. Aschoff bodies can be seen in acute rheumatic heart disease
- b. Chronic form of rheumatic heart fever is associated with stenosis
- c. Can affect the pericardium, myocardium or endocardium (including valves)
- d. The most important cause of acquired post-inflammatory valves scarring
- e. It's an infection due to group A – β hemolytic streptococci

Ans:E

7-The following conform with rheumatic carditis except:

- a. Incidence peaks during childhood
- b. Death in acute rheumatic carditis is most commonly due to mitral stenosis
- c. Considered of immunologic etiology
- d. Antibiotic prevention is possible
- e. All cardiac tissues can be involved

Ans:B

8- Which of the following is not one of JONES criteria?

- a. Arthritis
- b. Elevated ESR
- c. Erythema marginatum
- d. Synderham chorea
- e. carditis

Ans:B

9- Which of the following is true regarding aortic bicuspid valve ?

- a. Forms stenosis later on
- b. 50% of humans are diagnosed with it
- c. It is acquired

Ans:A

10-Major cause of death in (acute) Rheumatic Carditis :

- a. Acute Myocarditis

11-An 11 years old girl suffered from acute pharyngitis and died shortly after. Her condition became worse before she died. What will we expect to see in a postmortem sample?

a. Aschoff bodies (bcz its acute)

12-The most common congenital valve disease :

a. Bicuspid aortic valve

13-Not part of major Jones criteria :

a. Fever

14-Wrong combination :

a. Aschoff bodies & acute phase of infective endocarditis

Lecture 4

1-Influenza viruses represent the most important pathogens in infective endocarditis

a- True

b- False

Ans:B

2- Prosthetic heart valves are considered risk factors for infective endocarditis

a- True

b- False

Ans:A

3- IV drug usage is a unique risk factor for infective endocarditis of the pulmonary valve

a- True

b- False

Ans :B

4-Which of the following regarding infective endocarditis is TRUE:

a. No fever can be seen during infection

b. Is an auto-immune mediated disease

c. Acute endocarditis is due to infection with a low virulent microorganism

d. Can result in the formation of a septic infarct

e. Recovery is very difficult and most cases end in death

Ans:D

5-Subacute endocarditis is often developed by presence of:

a. Abnormal valves

b. Congenital deformities

c. Rheumatic lesions

d. A&B is correct

e. All are correct

Ans:E

6-The cardiac vegetations which fragment and embolize most are due to :

a. Infective endocarditis

b. Rheumatic carditis

c. Systemic lupus erythematosus

d. Non-bacterial thrombotic endocarditis

e. Marantic endocarditis

Ans:A

7-The cardiac valve vegetations most frequently embolizing are those of :

- a. Limban sacks
- b. Rheumatic carditis
- c. Marantic
- d. Infective endocarditis
- e. Associated with cancer

Ans:D

8- What could be found as a result of infective endocarditis?s

- a. Aschoff bodies
- b. Bacteria on vegetation

Ans:B

الحمد لله رب العالمين

اللهم ارزق إخواننا في فلسطين الصمود
والقوة في وجه الطغيان وانصرهم