



SubMedicine

Final 021



جنگ

021 SUBMEDICINE FINAL EXAM
By LEJAN ALDOFAAT



Forensics

1- true about hanging

A- oblique incomplete marks above thyroid cartilage

B- complete circle

C- always break C2

D- diffuse bleeding

2- about paracetamol poisoning

A- we use nomogram to guide antidote administration

3- immediate sign of death

A- loss of skin elasticity

B- primary flaccidity

C- rigor mortis

D- irreversible cessation of brain activity

4- surest sign of antimortem burning

A- soot and charcoal in lower airways

B- bilateral subdural hemorrhage

5- tissue bridging

A- lacerated wound

6- stellate

A- bullet to the skull

7- manual strangulation almost always

A- homicidal

B- suicidal

C- accidental

D- can't be determined

8- true match

A- Atropine - miadrrasis

B- carpamate - pupil widening

9- kerosene

A- desolves surfactants

10- amphetamines poisoning

A- alkalisation of urine decreases excretion

B - causes deadly physiological dependence

11- most common mode of death in electricution

A- Vfib

B- Afib

12- wound tail

A- determines direction of injury

13- not accurate regarding cyanide poisoning

A- induces mitochondrial something

14- which suggests child abuse

A- delaying seeking treatment for major injury

B- patient looks well dressed

C- patient is brought immediately after injury

D- story is consistent when told by different caregivers

15- Contraindicated in management of organophosphate poisoning

A- diazepam

B- physostigmine

Derma

1- Premalignant

A- actinic keratosis

B-

2- hutchinson sign

A- BCC

B- SCC

C- subungual melanoma

3- most dangerous HPVs

A- 16-18-31-33

4- diffuse psoriasis after steroid withdrawal >90%

A- erythrodermic psoriasis

5- diffuse rash with eosinophilia and fever 4 weeks after starting allopurinol

A- DRESS

B- SJS

C- TEN

D- serum sickness

6- question mark hair

A- alopecia areata

7- true about pemphigus vulgaris

A- hemidesmosomes

8 bullous pemphigoid over pemphigus vulgaris

A- subepidermal blisters

9- psoriasis vulgaris

A- IL17

B- IL11

10 hereditary angioedema

A- C1 esterase def

11- widespread target signs

A- erythema multiforme

12- Wickham striae

A- lichen planus

13 chronic over acute eczema

A- lichenification

B- erythema

14- most common cause of dermatophyte in kids

A- trichophyton tonsurans

B- trichophyton rubrum

15- in dermatitis herpetiformis

A- granular IgA deposition in dermal papillae

B- linear IgG deposition in basal

16- scaly skin

A- thickened with smt

17- not part of CREST

A- RA

18- Sjogren syndrome

A- parotid enlargement, keratoconjunctivitis sicca

Radio

1- ALARA

A- as low as reasonably achievable

2- IVC filter

A- below renal veins

3- true lucency

A- lung collapse

4- Not used in cardiac imaging

A- FDG

5- does not cause V/Q mismatch

A- mucus plug

6- true about smth method

A- you remove the guidewire after you put the cath over it

7- in normal MRI CSF is

A- hyperintense in T2 hypointense in T1

8- the three principles of radiation protection

A- shielding, distance, time

9- salter harris classification through epiphysis

A- 3

10- wrong about crohns

A- mural hyperintensity

B- symmetrical mucosal thickening

C-

11- birads 3

A- oval

12- calcifications in DCIS

A- fine pleomorphs

13- child abdominal pain jelly stools

A- intusseption

14- sign in plural effusion

A- maniscus sign

15- false about osteosarcoma (probably wrong question)

A- codmanns triangle

B- periosteal reaction

C- soft tissue component

D- osteoid matrix

E- another sign of malignancy

16- best modality for acute ischemia

A- DWI/ADC

17- a child hand pain which suggests not accidental injury

A- posterior rib fracture

B- clavicular fracture

ER

1- organophosphate poisoning first thing

A- air way management

2- during CPR you check the pulse no longer than
A- 10 S

3- D in ABCDE
A- brief neurological assessment

5- E in ABCDE
A- exposing the patient to assess hidden injuries with watching for hypothermia

6- primary survey order
A- preperation triage quick assessment primary secondary

7- female Vfib
A- compression, defibrillate, airway

8- levine sign
A- MI

9- most common cause for chest pain
A- GI

10- MI pain
A- relieved by nitrates

11- Contraindicated for comatose pt if u don't know exact cause

A- flumazenil

B- O2

C- thiamine

D- glucose

E- naloxone

12- What do we get from asking the patient a simple question like "what is his name"

A- patent airway, breath capacity , level of consciousness

13- Avoid vigorous pelvic movement in trauma patient bc:

A- pain and bleeding

B- Displace tube and airway patency

C- Affect c. Collar

14-Goal of Airway management

A- patent airway with cervical stabilization

15- a patient arrived to your center you can't perform PCI you plan for transferring door to needle time should be

A- 120 mins

B- 90 mins

16- wrong about aortic dissection

A- fixed pain without migration

B- hypotension

C- hypertension

17- contraindication for fibrinolytic therapy

A- Suspected aortic dissection

Family

1- not MI description

A- tearing

B- crushing

C- stabbing

D- heaviness

E- shocking

2- hammer toe, 2nd metatarsal tenderness

A- morten neuroma

B- jones fracture

C- gout

3- excluding elderly with dementia in a study affects which side

A- external validity

B- internal validity

C- randomization

4- strength of meta analysis

A- increase statistical power

B- removes all bias

C- decreases patients number

D- applied on all patients

E- substeuete physician judgement

5- best model to study 10 years mortality after stroke

A- cohort

B- cross sectional

C- case study

D- case series

6- A 12 years old comes after seizure with her aunt, forgot her anti seizure medication and asks you not to call her mom because she's afraid she'll get mad, what should you do

A- call her mom and ask for permission before any intervention

7- patient demands you do tests and threatens you

A- using threats to control the doctor

8- patient keeps calling and asking for reassurance

A- enforce boundaries and limit access

9- screening, 51 smoker 21 packs, pb 128/81, didn't visit a doctor for 10 years, most appropriate :

A- Pap smear, mammogram, Aortic US

B- low dose CT, DEXA, HepC

10- when to give weight loss drugs

A- BMI > 20

B- BMI > 25

C- BMI > 30 not sure

D- 20% weight gain in 1 year

E- 35% fat

11- anemia, abdominal pain, weight loss

A- upper endoscopy

12- a man brings his mother who started loosing ability to do advanced ADLs, she seems slower what tests

A- lawton, katz, minicog not sure

B- mini mintal, stand and walk, katz

C- lawton, geriatric depression, neutrotional

13- a patient comes to you with chest pain referral from another doctor and he told you it's psychological, you suspect something else but continue to explore only psychological aspects, what kind of bias is this

A- anchoring bias relying too heavily on the initial piece of information or first diagnosis and failing to adjust when new evidence appears.

B- Framing bias is a cognitive bias where a person's decision or judgment is influenced by how information is presented

C- Confirmation bias is the tendency to favor, search for, interpret, and remember information that confirms your pre-existing belief or hypothesis

14- a young man trains for marathon, unilateral tibia pain worst at night with edema

A- stress fracture not sure

B- shin splints

C- Iliotibial band syndrome

D- gastrocnemius tear

15- long case of uti in elderly with cognitive dysfunction, Regarding hypotheticodeductive method

A- dilirim due to the uti

16- Elderly pt presented with epigastric pain increased after meal not relieved by antiacid Have nausea decreased appetiteand unintentional wieght loss 3kg She is controlled diabetic and hypertenstion, take metaformin and antihypertensive, Labs normal, Lipas and amylase normal, Liver normal ,Hb:11.6 slightly decreased ,In order ddx Regarding hypotheticodeductive method

A- Functional dyspepsia , mediacion gastritis , GERD

B- gastric cancer, pancreatic cancer and gastritis

17- treatment of H.pylori

A- bismuth, omibrazole, tetracycline, metro

18- Preventive Drug for osteoperosis :

A- Hydrochlorothiazide

B- Varapamil

C- ARB

D- ACEI

E- Labetolol

19- not a risk factor for MI

A- hyper thyroidism not sure

B- Alcohol

20- a teenager brought by his father for bad school grades, he tells you everything is fine and he's good and he just goes out with friends after school, using the HEADASSS model you should ask about :

A- do you feel Safe at home ?

B- What activity you are doing when hang out with friends ? not sure

C- Drug, alcohol ?

D- have you been sexually active ?

E- Do you think about suicide ?

21- young patient you ask about mental health he says he's fine but body language shows he's not, you should:

A- reflect his feelings or something like that

22- Patient with complex medical condition , you understand her illness..etc, what is the best description of your approach?

A) empathy

B) sympathy

C) patient centeredness

A or. C

23- An elderly woman on hypertension medications wanting to cut them off she says "they're not working for me" how should you manage this

A- ask what her ideas are and why she thinks this way

24- a man brings his daughter with lateral neck lump, she is well physical examination is normal she cries when someone touches the lump, her cousin have leukemia, the father's cousin son have lymphoma, she is diagnosed with some infections and was prescribed amoxicillin, the father got mad and demands she sees a consultant, what should you do

A- ask him why does he think his daughter needs to see a consultant

B- say 'tell me your biggest fear'

C- refer him

25- Patient wants urgent appointments , your management??

A- Set boundaries and scheduled follow up

26- D dimer for PE should have high :

- A- sensitivity
- B- specificity
- C- positive predictive value
- D- negative predictive value

27- Pt HR 46 , all her initial labs are normal, and she assure that its from stress, but you suspect something serious, you should:

- A- Look for serious diseases like arrhythmias
- B - look for the most common like anemia

28 a patient بيضل يضيعك while questioning him, what should you do

- A- summarize the important points and control the conversation
- B- ask close ended questions early

29- patient with leg pain, he tried physical therapy for short time and simple analgesics, he asks for something stronger and says PT doesn't work

- A- something regarding ICE

30- diabetic A1c 7.5, cholesterol 220, LDL 120 or smth like that, HDL 45, you should :

- A- calculate ASCVD to decide statin not sure
- B- immediately start statin

31- a 70 years old man, back pain after he tried to pick up something, he lost 4 kg recently otherwise normal, Regarding hypotheticodeductive method you suspect in order :

- A- metastasis, lumbar fracture, canal stenosis
- B- lumbar fracture,

32- A 67 female with mild dizziness, no tinnitus, no hearing loss, takes antihypertensives, dix hallpike shows mild dizziness with no nystagmus, Regarding hypotheticodeductive method you suspect in order :

- A- BPPV, meniere's disease,
- C- posterior TIA,

33- simple UTI in 26 years old woman, first line :

- A- nitroferutonin for 5 days
- B- TMP-SMX for 7 days

Special thanks for everyone in the question gathering post comments you guys are the best.