

10/4/2016
Diploma of Internal Medicine
Time : 3 hours

Tanta University
Faculty of Medicine
Histology Department

HISTOLOGY

Illustrate your answer with diagrams

Give an account of:

- 3- Smooth endoplasmic reticulum (6 marks).
- 2- Reticulocyte (6 marks).
- 3- Paneth cell (6 marks).
- 4- Pars nervosa (7 marks).

Good luck

The oral exam will be on April 16 at 11 O` clock

Head of Histology Department

Prof.Dr. Ihsan Salah

2/4/2016
Diploma of Internal Medicine
Time : 3 hours

Tanta University
Faculty of Medicine
Histology Department

HISTOLOGY

Illustrate your answer with diagrams

Give an account of:

- 1- Endosome (10 marks).
- 2- Pineal body (15 marks).
- 3- Basophil leucocyte (10 marks).
- 4- Circumvallate papilla (10 marks).

Good luck

The oral exam will be on April 9 at 11 O` clock

Head of Histology Department

Prof.Dr. Ihsan Salah

Tanta University
Faculty of Medicine
Anatomy Department
10/4/2016

Diploma of Internal Medicine
Number of Questions: 5
Time Allowed: 3 Hours
Total: 75 Marks



INTERNAL MEDICINE

All questions to be answered

Illustrate your answer with diagram whenever possible:

- 1- **Discuss** the external features of the heart (borders, surfaces and sulci).
Identify its surface anatomy on the anterior chest wall. **(13.5 marks)**
- 2- **Describe** the anatomy of the stomach and **explain** the relations of its posterior surface then **enumerate** its arterial supply. **(22 marks)**
- 3- **Identify** the surface anatomy of the parotid gland and its duct and **give a short account** about its applied anatomy. **(13.5 marks)**
- 4- **Discuss** the arterial supply of the spinal cord. **(15 marks)**
- 5- **Enumerate** the derivatives of the primitive gut tube. **(11 marks)**

END OF THE EXAM

Oral Examination:

On Sunday 24/ 4/ 2016 at 10 o'clock in the Anatomy Department (Second floor)

WITH MY BEST WISHES

Chairman of Department: Prof. Dr. Mona Zoair

General Medicine (Diploma)

Tanta University

Pharmacology Written Examination

Faculty of Medicine

Number of Questions: 3

Pharmacology Department

Time Allowed: 1 hour

Date: 10/4/2016

Total: 25



Answer the following questions:

1. Give an account on (12 Marks):

- a) Metformin (mode of action and side effects)
- b) Meloxicam (mode of action , uses and side effects)
- c) Rifampicin (mode of action, uses and side effects)

2. Give short note on treatment of the following (9Marks):

- a) Hepatic encephalopathy
- b) Acute myocardial infarction
- c) Hemolytic anemia

3. Give reason for each of the following (4Marks):

- a) Intravenous infusion is preferred over intramuscular injection in parenteral iron preparation
- b) Co-administration of loop diuretics and aminoglycosides should be avoided
- c) Beta blockers are contraindicated for treatment of variant angina
- d) Digitalis should be given before quinidine in treatment of atrial fibrillation

سيتم عقد الإمتحان الشفوي يوم الأربعاء الموافق ٢٠١٦/٤/٢٠ في تمام الساعة التاسعة والنصف صباحا

Tanta University

Faculty of Medicine

Human Anatomy & Embryology Dep.

2/4/2016 - Time Allowed: 3 Hours

Diploma of Science in Internal Medicine

Anatomy Exam.

Number of Questions: 4

Total: 45 Marks



INTERNAL MEDICINE

All questions to be answered

Illustrate your answer with diagram whenever possible:

1. Describe the anatomy of the left lung (**discuss** its lobes, fissures, surfaces, hilum and bronchopulmonary segments). (9 marks)
2. Define the relations of different parts of the duodenum. (15 marks)
3. A. Enumerate derivatives of the 1st and 2nd branchial arches. (6 marks)
B. Describe the blood supply of thyroid gland. (6 marks)
4. Discuss the ventricular system of the brain and CSF circulation. (9 marks)

END OF THE EXAM

Oral Examination:

On Sunday 10/ 4/ 2016 at 9.5 o'clock in the Anatomy Department
(Second floor)

WITH MY BEST WISHES

Chairman of Department: Prof. Dr. Mona Zoair

TANTA UNIVERSITY----- Internal medicine paper I
FACULTY OF MEDICINE -----Diplomat degree of internal medicine
INTERNAL MEDICINE DEPARTMENT-----NO. OF QUESTIONS: 6
10/4/ 2016 -----TIME ALLOWED: 3 h



All questions to be answered: (10 marks for each question, total marks 60)

1. Upper gastrointestinal motility disorders.
2. Hereditary recurrent fever.
3. Aplastic anemia.
4. Pulmonary function tests.
5. Secondary hypertension.
6. Monoarthritis.

Good luck

Tanta University

Faculty of Medicine

Date:14-4-2016

Department of Medical Biochemistry

1st Part Medical Biochemistry for Diploma of internal medicine Exam.

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Write short notes on the following:

1. Metabolic changes in type 2 diabetes.
2. Biochemical difference in regional fat depots.
3. Gene therapy.

Good luck

Examination for Diploma Degree in: First part Internal medicine
Course Title: TMED02-A01PATH
Date:19-4-2016
Term: April 2016
Time Allowed: one hours
Total Assessment Marks:50



Tanta University
Faculty of Medicine
Department of:
Pathology

Questions numbers	Marks
I-Give an account on:	<u>20</u>
1- Types of emboli	5
2- Secondary amyloidosis	5
3- Classification and types of granuloma	10
II- Mention the complications of peptic ulcer	<u>10</u>
III- Discuss:	<u>20</u>
1- Post hepatitis cirrhosis (causes, gross and microscopic picture and complications)	15
2- Types of renal lesions in diabetes mellitus	5

يعقد امتحان الشفوي بإذن الله يوم الاربعاء ٢٠١٦/٤/٢٠ الساعة العاشرة صباحا

Examination for Diploma Degree in: Internal Medicine

Course Title: Microbiology & Immunology

Date: 19/4/2016

Term 1st part

Time Allowed: 3 hours (with pathology & clinical pathology)

Total Assessment Marks: 25



Tanta University

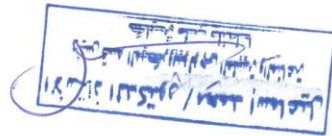
Faculty of Medicine

Department of Microbiology
and Immunology

All questions to be answered

Questions Number	Marks
<p>Q1. Outline the mechanism (s) for:</p> <p>a. Antimicrobial drug resistance.</p> <p>b. Autoimmune diseases.</p> <p>c. Type III hypersensitivity.</p> <p>d. Dry heat as a method of sterilization.</p>	10 marks 2.5 each
<p>Q2. Over a period of 4 weeks, a total of seven newborns in the hospital nursery developed infection. All isolates had the same morphology of Gram-positive cocci in clusters.</p> <p>a. What are the further steps for diagnosis?</p> <p>b. As all isolates revealed the same organism, how can you find the source of infection?</p> <p>c. How can you treat this case?</p>	5 marks
<p>Q3. Enumerate clinical classification of gastrointestinal infection then discuss Laboratory diagnosis of typhoid fever in 2nd week.</p>	5 marks
<p>Q4. Explain:</p> <p>a. Diagnosis of HBV infection.</p> <p>b. Treatment of HIV infection</p>	5 marks 2.5 each

سيتم عقد امتحان الشفوي يوم-الاربعاء الموافق ٢٠١٦/٤/٢٧ بقسم الميكروبيولوجي الساعة العاشرة صباحا



Chairman of Department

Prof Dr. MOHAMMED ISMAFI

2 Diploma

Examination for Master Degree in: internal medicine
Course Title :MED 8003
Date 5 /4/ 2016
Time Allowed: 1.5 hours
Total Assessment Marks: 45

QUESTIONS NUMBER	Marks
Give an account on	
• Q1- Renal lesions in systemic lupus erythematosus.	15
• Q2- Pathogenesis of atherosclerosis.	10
• Q3 -Causes and effects of chronic venous congestion .	10
• Q4-Hypertension (classification and complications).	10

يعقد امتحان الشفوى يوم ٤-١١ ٢٠١٦ الساعة الحادية عشر صباحا بالقسم

Head of the department:

PROF. DR. AFAF ELSHAFIE

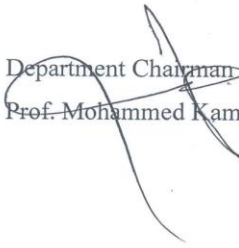
Tanta University
Faculty of Medicine
Clinical Pathology Department



Dipolma Exam internal med
5/4/2016 (time:1h)
Course title: Clinical Pathology

Answer the following questions.

- Q1: Mention causes of absolute lymphocytosis. 3 marks
- Q2: Give an account on anemia of chronic disorders. 3 marks
- Q3: Give a short account on microalbuminuria. 3 marks
- Q4: Discuss classification of acute myeloid leukemia. 3 marks
- Q5: Enumerate causes of chronic hepatitis and its specific diagnostic lab tests 3 marks


Department Chairman
Prof. Mohammed Kamal Zahra

 Prof Dr Fatma Mahmoud Geith
 Prof Dr Nahla Noseir


Tanta University
Faculty of Medicine
Clinical Pathology Department




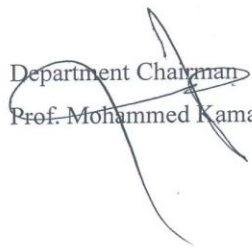
Dipolma Exam internal med
5/4/2016 (time:1h)
Course title: Clinical Pathology

Answer the following questions.

- Q1: Mention causes of absolute lymphocytosis. 3 marks
Q2: Give an account on anemia of chronic disorders. 3 marks
Q3: Give a short account on microalbuminuria. 3 marks
Q4: Discuss classification of acute myeloid leukemia. 3 marks
Q5: Enumerate causes of chronic hepatitis and its specific diagnostic lab tests 3 marks

 Prof Dr Fatma Mahmoud Geith

 Prof Dr Nahla Noseir


Department Chairman
Prof. Mohammed Kamal Zahra

Tanta University
Faculty of Medicine
Department of Medical Biochemistry
1st Part Medical Biochemistry for Internal Medicine diploma Exam.

Date: 3-4-2016

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Write short notes on the following:

1. Biochemical aspects of obesity.
2. Biochemical aspects of Type I diabetes mellitus.
3. Gene therapy.

Good Luck

سيعد الامتحان الشفوي بمشيئة الله يوم الارباء الموافق 2016/4/20



Tanta University
Faculty of Medicine
Department of Physiology
Examination for (Diploma Internal Medicine)
Course Title: Physiology
Total Assessment Marks:45

Course Code:
MED 7002
Time Allowed:
Physio. + Bio.
Three Hours

Date:3/4/2016

Term : Final

All the questions are to be answered:-

Q1- Explain: Factors maintaining the arterial blood pressure. Mention types and physiological basis of hypertension. (10 marks)

Q2- Explain briefly:

- a) Aldosterone hormone, functions, control of secretion. (10 marks)
- b) Control of bile secretion and cholagogous. (5 marks)

Case study: An 18-year-old female decides to get a tattoo for her birthday. Two months later she presents with a fever, right upper quadrant pain, nausea, vomiting, and jaundice. Which of the following lab values would most likely be found in a patient with infectious hepatitis?

- a. An increase in plasma alkaline phosphatase.
- b. An increase in plasma bile acids.
- c. An increase in both direct and indirect plasma bilirubin.
- d. An increase in direct bilirubin, and a decrease in indirect bilirubin in the plasma.
- e. A decrease in both direct and indirect plasma bilirubin.

Explain your answer (5 marks)

Answer the following MCQ by the most probable one choice: In answer sheet (15 marks)

Q.1. When activated β adrenergic receptors, the G protein:

- a. Activates phospholipase C.
- b. Activates adenyle cyclase.
- c. Activates protein kinase C.
- d. Converts guanosine diphosphate to guanosine triphosphate.

Q.2. Thrombin inhibits:

- a. Factor X.
- b. Tissue plasminogen activator.
- c. Platelets.
- d. None of the above.

Q.3. Erythropoietin:

- a. Red cell maturation 24 – 72 hours.
- b. Inactivated by Kupffer cells.

- c. Metabolized in liver.
- d. Half-life is 5 minutes.

Q.4. Hemoglobin breakdown:

- a. Fe is excreted by the kidney.
- b. Haem is broken down to biliverdin.
- c. Haem is converted to bilirubin and is transported to liver bound to albumin.
- d. b and c are correct.

Q.5. Problems of massive transfusion most commonly include:

- a. Metabolic alkalosis.
- b. Hyperkalemia.
- c. Coagulopathy due to hypocalcemia.
- d. Hypokalemia.

Q.6. Antithrombin III inactivates which coagulation factor:

- a. XII a.
- b. X a.
- c. II a.

LOOK IN THE BACK OF THIS PAGE

d. All of the above.

Q.7. A decrease in cortisol secretion would lead to:

- a. Increased storage of glycogen in the liver.
- b. Decreased ACTH secretion.
- c. Increased plasma glucose concentration.
- d. Decreased adrenomedullary synthesis of epinephrine.

Q.8. The most biologically active iodothyronine secreted by the thyroid follicles is:

- a. Triiodothyronine.
- b. Tetraiodothyronine.
- c. Thyroglobulin.
- d. Triiodothyroacetic acid.

Q.9. Mixed venous blood has:

- a. Higher hematocrit than arterial blood.
- b. Higher pH than arterial blood.
- c. P_{O_2} lower than coronary sinus blood.
- d. None of the above.

Q.10. Physiological dead space

- a. Decreases with age.
- b. Increases with anesthesia.
- c. Increases with supine position.
- d. Decreases with increased anatomical dead space.

Q.11. All of the following are components of the homeostatic control mechanism EXCEPT:

- a. The control center.
- b. The receptor.
- c. The effectors.
- d. The cytosole.

Q.12. The effector of homeostatic control

mechanism:

- a. Is a sensor that sends information to the control center.
- b. Analyzes the information it receives.
- c. Receives the information from the control center.
- d. None of the above.

Q.13. Hypoglycemic coma differs from hyperglycemic coma in that there is more likelihood of:

- a. Weak pulse.
- b. Rapid loss of consciousness.
- c. High acetone level in urine.
- d. Shift of pH towards acidic side.

Q.14. The major stimulus for the release of secretin is:

- a. Protein digestion products.
- b. Histamine.
- c. Somatostatin.
- d. Hydrochloric acid.

Q.15. An increase in systemic blood pressure leads to which of one of the following effects?

- a. An increase in the velocity at which blood is ejected from the left ventricle.
- b. An increase in cardiac output.
- c. An increase in the residual volume of blood in the left ventricle.
- d. A decrease in the time it takes for the left ventricular wall to develop peak tension.

Oral exam will be on Sunday 10 April 2016 at 9 am in physiology department.

Tanta University – Faculty of Medicine

Internal Medicine Department

Diplomate paper II: 14 april 2016

Time allowed 3 hours

Total 6 questions

Total 60 marks- All questions must be answered questions in paper 1-3



1- A 50-year-old man presents to the emergency department with left lower abdominal pain. He has not had fever or a change in bowel habit. He is eating without difficulty. He has never had similar symptoms in the past. He has not undergone colon cancer screening. He has no comorbid conditions. On examination, he has mild tenderness in the left lower abdomen without peritoneal signs. The white blood cell count is $12.5 \times 10^9/L$.

- 1- What is the most probable diagnosis?
- 2- What are the investigations needed?
- 3- How can you treat?

2-33-year-old Asian woman receives a diagnosis of non-Hodgkin lymphoma, and chemotherapy is advised. She has a history of hepatitis B without complications. Her mother also had hepatitis B. On examination, the patient has cervical adenopathy consistent with lymphoma. Laboratory test results are as follows: platelet count $348 \times 10^9/L$, alanine aminotransferase 17 U/L, total bilirubin 0.6 mg/dL, hepatitis B surface antigen positive, hepatitis B e antigen (HBeAg) negative, antibody to HBeAg positive, IgG antibody to hepatitis B core antigen positive, and hepatitis B virus (HBV) DNA undetectable.

1. What Other investigations must be done?
2. How can you manage the patient?

3-A 74-year-old woman presents with progressive dyspnea on exertion. She denies having chest pain. She has a long-standing history of hypertension and chronic atrial fibrillation. Her medications include warfarin 3 mg daily, enalapril 5 mg daily, and digoxin 0.125 mg daily. On physical examination, her blood pressure is 140/70 mm Hg and her heart rate is 82 beats per minute and irregular. Jugular venous distention is present. A soft 2/6 pansystolic murmur

was heard at the left sternal border. Her lungs were clear. Her extremities had pitting edema (2+). The electrocardiogram showed atrial fibrillation with left ventricular hypertrophy. Chest radiography showed cardiomegaly with mild pulmonary venous hypertension. Echocardiography showed severe biatrial enlargement and left ventricular hypertrophy with normal left ventricular cavity dimensions and an ejection fraction of 65%.

- 1- What is the diagnosis?
- 2- How can you treat?

4-A 19-year-old woman comes to your office with her infant because she is concerned about her recurrent sinusitis. Although she has never been hospitalized, her younger brother was hospitalized for recurrent pancreatitis. She describes a chronic productive cough with dyspnea. Examination reveals wheezing and digital clubbing

1. What is the possible diagnosis?
2. What are the investigations needed?
3. How can you treat?

5- A 55-year-old woman is seen in your office accompanied by her husband for follow-up after dismissal from her local emergency department (ED) for further evaluation of reactive hypoglycemia. For years, she has had intermittent symptoms of diaphoresis and excessive hunger that resolve after eating. She remembers having a glucose tolerance test, during which her blood glucose level decreased to about 60 mg/dL. She was advised to see a dietitian, eat regularly, and always have hard candy available to abort her symptoms. She has been experiencing more frequent symptoms and has gained weight over the past year. She is healthy otherwise. She has no history of diabetes. She is currently taking no medications. The day of her evaluation in the ED, she was involved in her usual activities at home when she experienced her usual symptoms related to hypoglycemia, diaphoresis, and hunger. She recalled missing breakfast but does not recall any additional events until she was in the ED. Her husband recognized that she was not well and was worried that she was having a stroke, so he called the paramedics. She was sweaty and would not

respond to his questions. At the ED, several laboratory tests were performed. She was told that her blood glucose was low.

- 1- What is the most probable diagnosis?
- 2- What are the investigations needed?
- 3- How can you treat?

6- An 80-year-old man is admitted to the hospital after falling on an icy sidewalk and fracturing his hip. He undergoes open reduction and internal fixation of the fracture. At surgery, there does not appear to be any bone disease at the fracture site. The patient was previously asymptomatic. Physical examination findings are otherwise unremarkable. Serum protein electrophoresis and immunofixation show an IgM κ monoclonal protein (0.3 g/dL). The complete blood cell count and serum creatinine levels are normal. Skeletal survey shows no additional bone defects.

- 1- What is the most probable diagnosis?
- 2- What are the investigations needed?
- 3- How can you treat?

"Good luck"

تمت الاسئلة

Examination for Diploma Degree in: Internal Medicine
Course Title: Microbiology & Immunology
Date: 5/4/2016
Term 1st part
Time Allowed: 3 hours (with pathology & clinical pathology)
Total Assessment Marks: 45



Tanta University
Faculty of Medicine
Department of Microbiology
and Immunology

All questions to be answered

Questions Number	Marks
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Q1: Compare between:

- | | |
|---|----------|
| a. Mechanism of action of Vancomycin and tetracyclines. | 16 marks |
| b. Classic and super antigens. | 4 each |
| c. Natural killer and T-cytotoxic cells. | |
| d. Low and high level disinfectant. | |

Q2: A 22 years old male patient presented to the hospital with acute abdominal pain, bloody diarrhea and fever started a day ago after eating chicken meal in a restaurant 3 days earlier. A stool sample showed gram-negative S shaped rods.

- | | |
|---|---------|
| a) What is the most possible pathogenic organism? | |
| b) In what atmospheric environment does this organism grow? | |
| c) The selective media are and? | 8 marks |
| d) This organism is | |
| 1. Catalase positive, oxidase negative and reduce nitrates. | |
| 2. Catalase negative, reduce nitrate and does not ferment carbohydrates. | |
| 3. Catalase positive, oxides positive and does not ferment carbohydrates. | |



(1) →

Chairman of Department
Prof Dr. MOHAMMED ISMAFI

Examination for Diploma Degree in: Internal Medicine
Course Title: Microbiology & Immunology
Date: 5/4/2016
Term 1st part
Time Allowed: 3 hours (with pathology & clinical pathology)
Total Assessment Marks: 45



Tanta University
Faculty of Medicine
Department of Microbiology
and Immunology

All questions to be answered

Q3: Outline etiology of milk born diseases and discuss a pathogen that excreted in milk and causes intermittent fever. 6 marks

Q4: Discuss:

- a. Treatment of *Aspergillus* infections. 15 marks
- b. Mode of transmission of HIV virus. 3 each
- c. Diagnosis of Well's disease.
- d. Control of influenza infections.
- e. Confirmation of HCV infection.

سيتم عقد امتحان الشفوي يوم الاربعاء ٢٠١٦/٤/١٣ بقسم الميكروبيولوجي الساعة العاشرة صباحا

الأستاذة الدكتورة / محمد إسماعيل
رئيس قسم الميكروبيولوجي المناعية
م.ح. طب. ٢٠١٦/٤/١٣

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Chairman of Department
Prof Dr. MOHAMMED ISMAFI

Examination for Diploma Degree in: Internal Medicine

Course Title: Microbiology & Immunology

Date: 5/4/2016

Term 1st part

Time Allowed: 3 hours (with pathology & clinical pathology)

Total Assessment Marks: 45

بالتوفيق
بالتوفيق



Tanta University
Faculty of Medicine
Department of Microbiology
and Immunology

All questions to be answered

Questions Number	Marks
Q1: Compare between:	
a. Mechanism of action of Vancomycin and tetracyclines.	16 marks
b. Classic and super antigens.	4 each
c. Natural killer and T-cytotoxic cells.	
d. Low and high level disinfectant.	
Q2: A 22 years old male patient presented to the hospital with acute abdominal pain, bloody diarrhea and fever started a day ago after eating chicken meal in a restaurant 3 days earlier. A stool sample showed gram-negative S shaped rods.	
a) What is the most possible pathogenic organism?	
b) In what atmospheric environment does this organism grow?	
c) The selective media are and?	8 marks
d) This organism is	
1. Catalase positive, oxidase negative and reduce nitrates.	
2. Catalase negative, reduce nitrate and does not ferment carbohydrates.	
3. Catalase positive, oxides positive and does not ferment carbohydrates.	

مجلس إسماعيل
رئيس قسم الميكروبيولوجيا
كلية الطب
جامعة طنطا

Chairman of Department
Prof Dr. MOHAMMED ISMAFI

Examination for Diploma Degree in: Internal Medicine

Course Title: Microbiology & Immunology

Date: 5/4/2016

Term 1st part

Time Allowed: 3 hours (with pathology & clinical pathology)

Total Assessment Marks: 45



Tanta University

Faculty of Medicine

Department of Microbiology
and Immunology

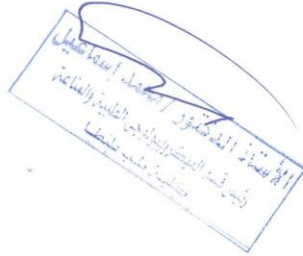
All questions to be answered

Q3: Outline etiology of milk born diseases and discuss a pathogen that excreted in milk and causes intermittent fever. 6 marks

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- Treatment of *Aspergillus* infections. 15 marks
- Mode of transmission of HIV virus. 3 each
- Diagnosis of Well's disease.
- Control of influenza infections.
- Confirmation of HCV infection.

سيتم عقد امتحان الشفوي يوم الاربعاء ٢٠١٦/٤/١٣ بقسم الميكروبيولوجي الساعة العاشرة صباحا



(٢)

Chairman of Department

Prof Dr. MOHAMMED ISMAFI

Diploma

Examination for Master Degree in: internal medicine
Course Title :MED 8003
Date 5 /4/ 2016
Time Allowed: 1.5 hours
Total Assessment Marks: 45

QUESTIONS NUMBER

Marks

Give an account on

- Q1- Renal lesions in systemic lupus erythematosus. 15
- Q2- Pathogenesis of atherosclerosis. 10
- Q3- Causes and effects of chronic venous congestion . 10
- Q4- Hypertension (classification and complications). 10

يعقد امتحان الشفوى يوم ١١-٤-٢٠١٦ الساعة الحادية عشر صباحا بالقسم

Head of the department:

PROF. DR. AFAF ELSHAFIE



Tanta University
Faculty of Medicine
Department of Physiology.
Examination for (Diploma Internal Medicine)
Course Title: Physiology
Total Assessment Marks:75

Course Code:
TMED.02:A01
Time Allowed:
Physio. + Bio.
Three Hours

Date:14/4/2016

Term : Final

All the questions are to be answered:-

Q1- Discuss: Erythropoiesis and anemia. (20 marks)

Q2- Explain briefly:

- a) Cushing's syndrome with special reference to suprarenal functions tests. (20 marks)
b) Factors affecting pulmonary blood pressure. (15 marks)

Case study: A 32-year-old male is diagnosed with primary hypertension. His physician recommends a new drug for hypertension that acts by decreasing vascular smooth muscle contractile activity without affecting ventricular contractility. Which of the following is the most likely site of action for the new drug?

- a. β -adrenergic receptors.
b. Calmodulin.
c. Troponin.
d. Tropomyosin.
e. Protein kinase A

Explain your answer (5marks)

Answer the following MCQ by the most probable one choice & write the statement in your answer paper: (15 marks)

Q.1. Anemia due acute hemorrhage is:

- a. Aplastic.
b. Pernicious.
c. Normocytic normochromic.
d. Microcytic hypochromic.

Q.2. Edema in cases of congestive heart failure is mainly due to:

- a. Increased venous pressure.
b. Hypoalbuminemia.
c. Increased capillary permeability.
d. Increased arteriolar pressure.

Q.3. Increased heart rate during deep inspiration is caused by:

- a. Stimulation of arterial baroreceptors.
b. Stimulation of pulmonary chemoreceptors.
c. Increased venous return.
d. Increased cardiac output.

Q.4. The anticoagulant dicumarol acts by:

- a. Forming an insoluble salt with calcium.
b. Competitive inhibition of vitamin K.
c. Inhibition of thrombin action.
d. Inhibition of phospholipids action.

Q.5. Blood for transfusion should be collected in bottles containing:

- a. Potassium oxalate.
b. Calcium.
c. Dicumarol.
d. Sodium citrate.

Q.6. Which of the following will inhibit stomach contractions?

- a. Acetylcholine .
b. Motilin.
c. Gastrin.
d. Secretin.

Q.7. Fats are transported from the intestinal cells to blood plasma primarily in the form of:

LOOK IN THE BACK OF THIS PAGE

- a. Micelles.
- b. Chylomicrones.
- c. Triglycerides.
- d. Fatty acids.

Q.8. Hypercapnia affects respiration primarily by stimulating:

- a. Carotid and aortic bodies.
- b. Central chemoreceptors.
- c. Arterial baroreceptors.
- d. Hypoglossal nerve.

Q.9. In secondary hyperthyroidism:

- a. There is a low pulse pressure.
- b. There is hypotonia.
- c. There is elevated serum TSH.
- d. There is hypoglycaemia

Q.10. Which of the following can occur without brain stem coordination?

- a. Chewing.
- b. Swallowing.
- c. Primary esophageal peristalsis.
- d. Gastric emptying.

Q.11. In hypercorticism (Cushing syndrome):

- a. Patients are prone to develop hyperglycaemia.
- b. The tendon jerk is inhibited.
- c. Patients may become hypotensive.
- d. The skin may become dry and scaly.

Q.12. Calcitonin is known to cause the following:

- a. Decreased calcium reabsorption by proximal tubules.
- b. Increased phosphate reabsorption by proximal tubules.
- c. Decreased absorption of Ca in the gut.
- d. Increased osteoblastic activity.

Q.13. An increase in systemic blood pressure leads to which one of the following effects?

- a. An increase in the velocity at which blood is ejected from the left ventricle
- b. An increase in cardiac output
- c. An increase in the residual volume of blood in the left ventricle
- d. A decrease in the maximal wall tension developed in the left ventricular muscle

Q.14. Venous return is enhanced during exercise by all of the following factors EXCEPT:

- a. Increased depth of respiration
- b. Pumping action of skeletal muscles
- c. Venoconstriction
- d. An erect posture

Q.15. V/Q ratio of a normal lung equals

- a. 0.5
- b. 0.8
- c. 1.0
- d. 2.0

Oral exam will be on Sunday 24/4/2016 at 9 am in physiology department