

Date:19/10/2017

Examination For Diploma Internal Medicine

Term: Final

Course Title: Physiology

Time Allowed: Three Hours

Tanta University

Faculty Of Medicine

Department Of Physiology

Course Code: MED 7002

Total Assessment Marks: 75

All questions are to be answered:

1-Discuss arterial blood pressure and pathophysiological basis of hypertension. (20 marks)

2-Explain briefly:

a-Mechanism of hemostasis and hemorrhagic disorders. (20 marks)

b- Cellular mechanism of action of insulin hormone, and its function. (15 marks)

3-Choose the most probable answer: (20 marks)

1-Anemia due acute hemorrhage is:

a-Aplastic.

b-Pernicious.

c-Normocytic normochromic.

d-Microcytic hypochromic.

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

5-Administration of atropine may produce:

a-Weakness of skeletal muscle by blocking acetylcholine receptors in the endplate.

b-Pupillary constriction (meiosis).

c-An increase in the heart rate at rest.

d-Excessive salivation.

7-Referred pain include the following Except:

a-It is a major manifestation of visceral pain

b-It is explained by convergence- projection theory

c-It always accompanies coetaneous pain

d-It occurs due to migration of organs during development

9-The following factors are essential for erythropoeisis :

a-Iron

B-Vitamin B12

c-Healthy bone marrow

d-All of the above

d-Met-hemoglobinemia

11-The heart rate is regulated by:

a-Impulses from the baroreceptors

b-Changes in the arterial blood pressure

c-O₂ and CO₂ pressure

d-All of the above

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.

4-The active form of vitamin D is:

a-1,25-dihydroxycholecalciferol

b-Is formed in the absence of parathormone

c-Decrease the absorption of calcium from the intestine

d-Can be formed by the liver

6--All of following organs share in vitamin D formation Except:

a-The lung

b-The liver

c-The kidney

d-The skin

8-Blood for transfusion should be collected in bottles containing:

a-Potassium oxalate.

b-Calcium.

c-Dicumarol.

d-Sodium citrate.

10-Hypercapnia affects respiration primarily by stimulating:

a-Carotid and aortic bodies.

b-Central (medullary) chemoreceptors.

c-Arterial baroreceptors.

d-Hypoglossal nerve.

12-Hemoglobin buffer system

1-Is the major buffer in the extracellular fluids

2-Is important for buffering tidal CO₂

3-Can be regulated by lung and kidney

4-All of the above

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13--The maximum resistance in the vascular system is present in:

- a-Aorta
- b-Arteries
- c-Arterioles
- d-Capillaries

15-Cortisone increases the blood glucose level by:

- a- Increasing the gluconeogenesis
- b-Exerts insulin like effect on the skeletal muscles
- c-Decrease glucose absorption form the intestine
- d-Produces osteoporosis

17-The following hormones elevate the arterial blood pressure Except:

- a-Vasopressin(ADH)
- b-Angiotensin II
- c-Aldosterone
- d-Histamine

19-Gastric emptying is delayed by:

- a-Vagal stimulation
- b-Excess fat and hypertonic sugar solutions in the duodenum
- c-Increase of the fluidity of gastric chyme
- d-Small size diet

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

16-Prolonged coagulation time in obstructive jaundice is due to:

- a-Deficiency of bile pigments
- b-Decrease the formation of plasma protein
- c-Vitamin K deficiency
- d-Iron deficiency

18-Pernicious anemia is mainly due to:

- a-Intrinsic factor deficiency
- b-Folic acid deficiency
- c-Vitamin B₁₂ deficiency
- d-Iron deficiency

20-The main stimulus of the peripheral chemoreceptors is:

- a- Increase of hydrogen ion concentration
- b- Oxygen lake
- c-Decrease of CO₂
- d-Decrease of hydrogen ion concentration

Good Luck



All questions must be answered (6 questions) (All questions have equal marks)

1. A) A 42 years-old male presents to the emergency room with one day history of vomiting of fresh blood, he also reported passing black tarry stool for the last 3 days and feeling generally unwell for the last 6 weeks. He noticed increase of the abdominal girth. He was diagnosed as having HCV hepatitis 3 years ago. On examination: he was disoriented with flapping tremors, jaundiced and pale. Pulse 100 beat/m. Bp: 80/60 mmHg. Abdominal examination, revealed palpable liver 2 cm below right costal margin, firm in consistency, moderate splenomegaly and moderate ascites.

1. What is your provisional diagnosis and explain.
2. What is the management of this case.

B) Describe clinical manifestations of peptic ulcer.

C) Enumerate extra-hepatic manifestations of chronic hepatitis.

2. A) A 37 years-old woman presented with renal colic secondary to renal stone. She also complains of fatigue and weakness in all extremities. Serum calcium level was 13 mg/dl, reference range, (8-10.5 mg/dl) and phosphate level was 1.9 mg/dl, reference range (2.3-5 mg/dl). Serum Creatinine 0.9 mg/dl. Parathyroid hormone level is high.

1. What is your provisional diagnosis and explain.
2. Enumerate causes of hypercalcemia.

B) Describe diagnostic criteria of metabolic syndrome.

C) Discuss investigations of Cushing's disease.

3. A) A 40 year old male was known to have long standing hypertension on irregular treatment, presented with history of generalized fatigue over the last 6 months. Over the last 6 months, he complained of nausea and occasional vomiting and has developed itching. On examination BP 180/110, skin is dry and cardiac examination revealed a systolic murmur. Creatinine, 9 mg/dl, urea 80 mg/dl, Ca 7.3 mg/dl (reference range, 8.5-10 mg/dl), Phosphate is 5.5 mg/dl (reference range 3.5-4.5 mg/dl). Hb 8.5 gm/dl, WBCs 4×10^3 , platelets 180×10^3 /dl.

1. What is your provisional diagnosis and explain.
2. How can you manage anemia in this case.

B) Define acute kidney injury and Describe pre-renal causes of it.

C) Describe Clinical manifestations of metabolic acidosis.

4. A) Describe clinical presentations and discuss treatment of left sided heart.

B) Enumerate causes and discuss management of atrial fibrillation.

C) Enumerate 5 causes of secondary hypertension.

5. Describe:

1. Clinical picture of glomerulonephritis.
2. Investigations of GIT bleeding.
3. Complications of infective endocarditis.

6. Enumerate 5 of:

1. Causes of Hyponatremia.
2. Indications of insulin therapy.
3. Complications of hypertension.
4. Causes of lower GIT bleeding.
5. Causes of anemia in chronic kidney disease.

ملحوظة:

يتم مراجعته قسم الباطنة العامة لمعرفة موعد الاختبارات العملية والشفوى

Good Luck

Diploma Internal Medicine Exam.

**Pharmacology department
Faculty of Medicine
Tanta University**

**Date: 15-10-2017
Time allowed: 1 hour
Number of Questions: 4
Total: 45 marks**



Answer all the following questions

1- Give an account on: [8 marks]

- a- Insulin (preparations, routes of administration, uses)
- b- Ciprofloxacin (dynamics & antibacterial activity, uses)

2- Mention the lines of treatment of the following cases: [10 marks]

- a. Hepatic encephalopathy
- b. Pernicious anemia

3- Give reason: [3 marks]

- a. High doses of heparin may be needed with erythropoietin therapy
- b. Aminophylline is used with caution during long term therapy
- c. Avoid prolonged use of sod. nitroprusside

4- M.C.Q. : [24 marks]

1-Which one of the following drugs binds bile acids in the intestine, thus preventing their return to the liver via the enterohepatic circulation?

- a. Niacin.
- b. Fenofibrate.
- c. Cholestyramine.
- d. Fluvastatin.

2-Used in the treatment of malignant hyperthermia:

- a. Dantrolene
- b. Halothane
- c. Antipsychotic
- d. Succinylcholine

3-In pheochromocytoma, a drug that acts by decreasing catecholamine biosynthesis:

- a. Phenoxybenzamine
- b. Propranolol
- c. Metyrosine
- d. Dexamethasone

4-The antagonism between glucagon and insulin on blood glucose is:

- a. Physical antagonism
- b. Chemical antagonism
- c. Physiological antagonism
- d. Competitive antagonism

5-Ephedrine causes:

- a. Miosis
- b. Bronchodilation
- c. Hypotension
- d. Bradycardia.

6-Which of the following is MOST likely to be required by a 5-year-old boy with anemia due to chronic renal insufficiency:

- a. Deferoxamine
- b. Erythropoietin
- c. Filgrastim (G-CSF)
- d. Oprelvekin (IL-11)

7-Adverse effects of furosemide include all of the following EXCEPT:

- a. hypercalcaemia
- b. hyperlipidemia
- c. hypokalaemia
- d. ototoxicity

8-When a drug with no action increase the drug with certain action this is called:

- a. Potentiation
- b. Addition
- c. Synergism
- d. Reversal

9-Digoxin is contraindicated in:

- a. Supraventricular tachycardia
- b. Atrial fibrillation
- c. Congestive heart failure
- d. Hypertrophic obstructive cardiomyopathy

10-An elderly hypertensive has diabetes mellitus and bilateral renal artery stenosis. The best management is:

- a. Enalapril.
- b. Hydralazine
- c. Beta blockers
- d. Thiazides.

11- B- blockers is contraindicated in

- a. Bronchial asthma
- b. Peripheral vascular disease
- c. Diabetic patient
- d. all of the above

12-In acute left ventricular failure (LVF), the drug which can be administered is:

- a. Propanolol
- b. Morphine
- c. Amlodipine
- d. Epinephrine

- a. Aspirin
- b. Cinnarizine
- c. Nicergoline
- d. Heparin

14-This drug is recommended in treatment of atropine toxicity:

- a. neostigmine
- b. acetylcholine
- c. physostigmine
- d. ephedrine

15-The therapeutic efficacy of antihypertensive drugs is blunted by NSAIDs because they:

- a. Cause sodium excretion
- b. Increase the clearance of antihypertensive drugs
- c. Decrease the absorption of antihypertensive drugs
- d. Decrease the synthesis of vascular prostacyclin

16-Which of the following is a side effect of oral iron therapy

- a. Epigastric pain & bowel upset
- b. Bradycardia
- c. Sedation
- d. Salt and water retention

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GOOD LUCK☺

امتحان الشفوى بالقسم الأربعةاء 2017 / 10 / 1 الساعة 9 صباحا

Exam for Diploma in: Internal Medicine
Course Title: Histology
Date: 15/10/2017
Term: October
Total marks: 25 marks
Code : MED 7001

Tanta University
Histology Department
Faculty of Medicine

Answer all of the following questions and illustrate your answers with diagrams:

- | | |
|-----------------------------------|-----------|
| 1- Apoptosis. | (6 marks) |
| 2- Specializations of urothelium. | (7 marks) |
| 3- Thyroid follicle. | (6 marks) |
| 4- Eosinophil leucocyte. | (6 marks) |

GOOD LUCK

الامتحان الشفوي بعد الامتحان التحريري يوم 2017-10-15



Tanta university
Faculty of Medicine
Ophthalmology department
Diploma . Medicine exam.
2/10 2017

Discuss the following :

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- 1) Corneal fungal ulcers & its differential diagnosis. (20)
 - 2) D.D. of optic disc swelling. (20)
 - 3) Papillary Conjunctivitis. (20)
 - 4) Diabetic retinopathy (20)
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