TESTS OF PEDIATRICS 1998 YEARS

1. Neonatus praetemporarus is the newborn infant with gestation age less than (encircle correct)
   1. 39 weeks
   2. 38 “
   3. 37 “
   4. 36 “
   5. 35 “

2. Physiologic Jaundice in healthy newborn infant appears in the first 12 hours after birth and disappears after 30 days (encircle correct)
   1. yes
   2. no

3. The highest level of indirect bilirubin in physiologic jaundice of the newborn is . 
   .................................. µmol/l

4. Which fetal - maternal blood group incompatibility cause very positive COOMBS test (encircle correct)
   1. AB0
   2. Kell
   3. Duffy
   4. Rh
   5. Kidd

5. Which antibody class is increased in the newborn infant with intrauterine infections (encircle correct)
   1. IgA
   2. IgM
   3. IgE
   4. IgG

6. In the examination of antibody level in intrauterine infections of the newborn infant, TORCH is shortening for
   ........................................................................................................................................
   ....
   ........................................................................................................................................
   ....

7. In the newborn infant during the first two weeks of life the most common cause of neonatal meningitis belongs to:
   1. Gramm positive bacteria
   2. Gramm negative bacteria
   3. Rotta viruses
   4. Adeno viruses
   5. Rickettsia

8. IRDS (Hyaline Membrane Disease) appears in (encircle correct)
   1. Premature infants
   2. Hypertrphic term infants
   3. Postterm infants
9. Lecithin - sphingomyelin ratio higher than 2.0 point to high risk and lower than 1.0 to low risk of IRDS (encircle correct)
   1. yes
   2. no

10. The most common complication during the assisted ventilation in premature infants is (encircle correct)
    1. Pneumonia
    2. Pneumotorax
    3. Diaphragmatic hernia
    4. Unbilical hernia

11. Amniotic fluid sample is very helpful in antenatal diagnostic procedure of (encircle correct)
    1. Multiple anomalia
    2. Thalassemia
    3. Upper parts of digestive tract athresia
    4. Immature lungs

12. Cephalhematoma presents (encircle correct)
    1. Haemorrage in soft tissues of the scalp
    2. Subperiostal haemorrage always limited to the surface of one cranial bone
    3. Haemorrhage in the cerebral tissue

13. Bulging fontanel is present in (encircle correct)
    1. Caput succedaneum
    2. Cephalhematoma
    3. Meningitis
    4. Pyloric stenosis
    5. Over hydration

14. In the prevention of haemorrhagic disease of newborn infant it is necessary to ordinate (encircle correct)
    1. vit. A
    2. vit. D
    3. vit. E
    4. vit K

15. Retinopathy of prematurity appears in the extremely immature newborns (encircle correct)
    1. yes
    2. no

16. Caput succedaneum is (encircle correct)
1. Inborn malformation of head shape
2. Deformation of head shape caused by lying on one side for along time
3. Oedema of soft tissues of the scalp involving the portion presenting during vertex delivery

17. Surfactant is product of (encircle correct)
   1. pneumocyte type I
   2. pneumocyte type II

18. Periventricular and intraventricular haemorrhage is most often in (encircle correct)
   1. praemature infants
   2. postmature infants

19. Brachial palsy in the newborn infant is caused by (encircle correct)
   1. Mother’s infection during pregnancy
   2. Hypoxemia of the newborn
   3. Genetic defect
   4. Trauma

20. All premature infants belong to risk group (encircle correct)
   1. yes
   2. no

21. First stools of the newborn infants are (encircle correct)
   1. meconial
   2. acholic
   3. dyspeptic

22. Cry of the newborn infant with CNS damages is (encircle correct)
   1. Strong, lusty cry
   2. High - pitched cry
   3. Low - pitched cry

23. The most frequent place for bacterial and toxin entrance during the perinatal period is (encircle correct)
   1. Mouth
   2. Anus
   3. Umbilicus
   4. Genital organs

24. Metabolic alkalosis is the sign of (encircle correct)
   1. Pneumonia
   2. Diarrhea
3. Pyloric stenosis

25. The newborn jaundice within the first 24 hours is (encircle correct)
   1. Physiologic condition
   2. Patologic condition

26. In ABO incompatibility, mother's blood group is (encircle correct)
   1. A
   2. B
   3. 0
   4. AB

27. In Rh incompatibility, mother's blood group is (encircle correct)
   1. Rh negative
   2. Rh positive

28. Unconjugated bilirubin transport in blood of the newborn is carried on by
    (encircle correct)
    1. Albumin carrier
    2. Globulin carrier
    3. Cholesterol

29. Phenobarbital in the neonatal hyperbilirubinemia has (encircle correct)
    1. Favourable effect
    2. No effect

30. The exchange transfusion is method of choice for treatment of patologic neonatal
    hyperbilirubinemia in prevention (continue) .....................................................

31. The haemolytic signs in infant with hyperbilirubinemia are (encircle correct)
    1. High hematocrit level, high hemoglobin level, normal reticulocytes
    2. High hematocrit level, high hemoglobin level, large amount of reticulocytes
    3. Low hematocrit level, low hemoglobin level, normal reticulocytes
    4. Low hematocrit level, low hemoglobin level, large amount of reticulocytes

32. In the term infant, duration of prolonged neonatal jaundice is more than
    (encircle correct)
    1. Two weeks
    2. Three weeks

33. In the newborn infant, clinical sign in fracture of the clavicle is (encircle correct)
    1. Crepitation in the fracture area
    2. Permanent cry and agitation
    3. Oedema with or without hematoma

34. In the newborn infant with manifest signs of intracranial haemorrhage, neurologic
    examination show (encircle correct)
    1. Normal neurologic findings for gestational age
    2. Altered neurologic findings for gestational age
    3. Using neurologic examination there is no suspicion for intrapartal trauma
35. Moro reflex has three phases (which?):

36. Position of the newborn infant during neurologic examination for Gallant reflex is (encircle correct)
   1. Pronate position
   2. Supinate position
   3. Ventral suspension

37. High-pitched cry of the infant appears in (encircle correct)
   1. Hunger of the healthy newborn
   2. Disorder of CNS
   3. Acute surgical illness

38. The newborn infant of diabetic mother has (encircle correct)
   1. Enlarged body weight, body length and head circumference
   2. Enlarged body weight, adequate body length and head circumference
   3. Low birth weight, adequate body length and head circumference

39. The sign in the newborn of the diabetic mother is (encircle correct)
   1. hyperglycaemia
   2. hypoglycaemia
   3. hypertension
   4. hypotension

40. Vaginal bleeding of healthy newborn infant during the first days of life is (encircle correct)
   1. Transient, physiologic phenomenon
   2. Reason for examination of hemostase mechanism
   3. Suspect congenital malformation of genital tract

41. The umbilical cord falls off spontaneously after (encircle correct)
   1. Two weeks of life
   2. Four weeks of life
   3. Six weeks of life

42. During the first 24 hours of life anuria is (encircle correct)
   1. Possible physiologic condition
   2. Appears in all newborn infants
   3. Urgent condition

43. The large fontanel is closed at the latest after (encircle correct)
   1. 3 months of life
   2. 9 months of life
   3. 12 months of life
   4. 18 months of life

44. It is necessary to think of hydrocephalus evolution when head circumference is increased per month (encircle correct)
   1. 0.5 cm
INTENSIVE CARE

45. Make a list of at least three and their doses, that are used in children resuscitation.

1.
2.
3.

46. If there is the absence of breathing in the patient, pre procedure is as follows:

1.
2.
3.

47. If the comatose patient is vomiting, there is a danger of suffocation with the digestive tract content. In order to avoid this it is necessary to (thick correct):

1. intubate the trachea
2. administer Adrenaline intravenously
3. place gastric tube
4. administer intravenous infusion

48. The basic vital parameters which are to be checked prior, during and after the resuscitation procedure are (thick correct):

1. body weight
2. urine glucose level
3. blood pressure
4. breathing frequency
5. central venous pressure
6. hearth rate
7. body temperature

49. In the case of meconium stained amniotic fluid prior to term delivery there is the necessity for (thick correct):

1. oxygen administration
2. sodium hydrocarbonate administration
3. hypopharynx aspiration after the head is delivered
4. hearth massage
50. Heat lose during the resuscitation of the newborn babies is avoided by (thick 3 correct answers):

1. oxygen administration
2. toweling the baby (drying the moist on the babies skin)
3. administering Atropine
4. heating the baby under the infrared heather
5. keeping the temperature in the resuscitation room

51. Hearth massage and lung ventilation in the newborn is performed as follows (complete the sentence):
Perform .........................number of sternum pressures on 1 lung insufflation.

52. The best parameter of successful resuscitation is (thick correct):

1. urine appearance (regaining the renal function)
2. pink skin color
3. acidosis disappearance
4. increase of the heartbeat rate
5. increase of the blood glucose level

INTOXICATIONS IN CHILDREN

53. Accidental poisoning is (thick correct):

1. deliberate use of toxins
2. use of toxic materials for suicide purpose
3. accidental intake of toxic substance
4. drug abuse

54. Accidental poisoning in children has the peak frequency in certain age (thick correct):

1. puberty age
2. infant age
3. up to five years of age
4. adolescence

55. If following symptoms occur, poisoning is highly possible (thick 2 correct answers):

1. high temperature
2. seizures
3. disturbances in behavior and consciences
4. vomiting

56. If the toxic substance is taken per mouth and is identified, it can be eliminated by (thick correct):

1. tracheal intubation
2. provocation of vomiting
3. analgetics
4. diuretics
5. gastric lavage
6. dialysis
7. blood exchange transfusion
57. Specific antidote is (thick correct)
1. with specific and nonspecific acting
2. strictly specific acting
3. universal for all poisoning cases
4. a certain drug administered to each poisoning victim

58. The drug or the chemical substance can be identified with following analyses (thick correct):
1. pharyngeal smear
2. bronchial aspirate
3. vomit masses
4. blood analyses
5. urinalyses
6. stool culture
7. gastric lavage analyses

59. It is forbidden to induce vomiting in poisoning victim in 3 following cases:
1. age before 4 years
2. poisoning with corrosive materials
3. anemic child
4. comatose child
5. ten minutes after poison ingestion
6. high temperature
7. carbon monoxide poisoning

60. Organic phosphates poisoning most frequently occurs after the ingestion of (thick correct):
1. drugs
2. detergents
3. pesticides
4. antipyretics

61. When the diagnosis of poisoning is established in GP surgery, pre procedure is as follows (thick correct):
1. first aid
2. transport to the nearest hospital
3. first aid and decision making on either follow up or transport to the hospital

62. Connect with the line poison and antidote:
1. organic phosphates  A. oxygen
2. cyanides  B. physostigmine
3. anticholinergics  C. Calcium EDTA
4. lead and other heavy metals  D. amyl nitrate
5. carbon monoxide  E. Atropine

63. Organic phosphates decrease the level of (thick correct):
1. cholinesterase
2. acetyl choline
3. adrenaline
4. renine

64. The antidote in organic phosphates poisoning is (thick correct):
   1. Adrenaline
   2. Atropine
   3. Coffeine
   4. vitamin C
   5. acetyl salicylic acid

65. Alcohol poisoning in children is (thick correct):
   1. impossible, children do not take alcohol
   2. impossible, the metabolism in children does not allow alcohol
   3. possible

66. In carbon monoxide poisoning there is the increase level of……….. In the blood (fill the missing).

67. In carbon monoxide poisoning the administration of …………….. is urgent (fill the missing).

68. In salycilate poisoning clinical manifestation is characterized by (thick 3 correct answers):
   1. hypo ventilation
   2. hyper ventilation
   3. respiratory alkalosis
   4. respiratory acidosis
   5. metabolic alkalosis
   6. metabolic acidosis

69. In the absence of urine in poisoning victim, the following is highly suspected (thick correct):
   1. urine retention
   2. acute renal failure
   3. dehydration

70. In nitrate poisoning patient’s skin color is changed (thick correct):
   1. light grayish
   2. yellow
   3. intense red
   4. diffuse blue
   5. greenish yellow

71. Nitrate poisoning therapy is in (thick following):
   1. drugs containing digitalis given by mouth
   2. vitamins given intravenously
3. gentian violet given intramuscularly
4. methylenic blue given intravenously
5. 10% potassium chloride intravenously
6. furosemide by mouth

72. In order to decrease poison resorption from the digestive system the following is used (thick correct):
1. force urine passing
2. medical coal (carbo medicinalis)
3. laxatives
4. rectal enema

73. In iron poisoning there is a specific therapy (beside other measures). That therapy is............................
(fill the missing).

74. In anticholinergic poisoning there is (thick 3 correct answers):
1. slow hearth rate
2. fast hearth rate
3. moist skin
4. dry skin
5. miotic pupils
6. mydriatic pupils

75. Clinical manifestation of carbon monoxide poisoning differs in adults and children due to fetal hemoglobin has (thick correct):
1. higher affinity for carbon monoxide than adult hemoglobin
2. lower affinity for carbon monoxide than adult hemoglobin
3. does not have the affinity for carbon monoxide

76. In acute intoxication vomit induce is forbidden in following cases (make a list):
1.
2.
3.
4.

77. If disorientation, unstable walk, hypoglycemia, seizures, ventilatory depression occur, they might be the sign of the poisoning with the following substance (thick correct):
1. DDT
2. lead
3. alcohol
4. salicylates

NUTRITION - GENERAL ISSUES

78. Energetic needs by kg /BM in infants (tick correct answers)
78.1. Similar to adult persons
78.2. 2-3 times higher than in adults
78.33. 5-6 times higher than in adults

79. The required quantity of energy needed for growth is the highest in the following period (tick correct answers)
79. 1. Neonatal
79. 2. Infants
79. 3. Small child

80. Energetic requirements of the infant are (connect correct items)
80. 1. Basal metabolism  a. 80 KU (20 kcal)
80. 2. Activity b. 200-250 KU (50-60 kcal)
80. 3. Growth c. 40 KU (10 kcal)
80. 4. Specific dynamic food effect
80. 5. Excretion loss

81. Recommended daily allowance for proteins in the breast-feeding infants (tick correct answers)
81. 1-1.5 g/kg/24h
81. 2-2.5 g/kg/24h
81. 3-3.5 g/kg/24h

82. Percentual energetic values of fats in human milk (HM) are as follows: (tick correct answers)
82.1. approx. 25% of the total energetic intake through HM
82.2. approx. 50% of the total energetic intake through HM
82.3. approx. 15% of the total energetic intake through HM

83. Daily intake of the carbohydrates in human milk makes (tick correct answers)
83.1. 7-9 g/kg
83.2. 10-12 g/kg
83.3. 13-15g/kg

84. Increased intake of the lactose through maternal milk in some infants produces: (tick correct answers)
84.1. Opstipation
84.2. Frequent, sour stools
84.3. Frequent vomiting
84.4. Improves fetal growth

85. Infants with high intake of carbohydrates are (tick correct answers)
1. Pale
2. Pasty
3. Growing better
4. Inclined to infections
5. Not inclined to intestine disorders

86. Human milk lacks (Choose 2 correct answers)
   1. Iron
   2. Phosphorus
   3. Calcium
   4. Vitamin D

87. Daily needs for the following vitamins are (fill in)
   1. Vitamin B _________
   2. Vitamin C _________

88. The water daily needs during the first 6 months under physiologic conditions are as follows (tick correct answers)
   1. 150 ml/kg/24h
   2. 130 ml/kg/24h
   3. 100 ml/kg/24h

89. 300 ml of the 2/3 cow’s milk is (fill in)
   __________________ ml of milk and __________________ ml of water

90. Allergy to cow’s milk in the newborn is most often manifested through (tick correct answers)
   1. Diarrhea
   2. General urticaria
   3. Quincke’s syndrome

91. The following artificial nutrition with cow’s milk is recommended (tick correct answers)
   1. Fresh cow’s milk
   2. Pasterized cow’s milk
   3. Sterilized cow’s milk
   4. The prepared formula of the adapted milk

92. Gastrointestinal tract infections are most frequent in the infants on (tick correct answers)
1. Natural feeding
2. Mixed feeding
3. Artificial feeding

93. Digestion of the cow’s milk can be increased by the addition of
( write the correct answer ) ________________________________

94. What procedures are used for modification of the cow’s milk
( Fill in ) ________________________________

95. Sweetening of the cow’s milk with honey brins danger of
( tick correct answers )
1. Incomplete digestion
2. Incomplete intake of carbohydrates
3. Diarrhea

96. The stool of the newborn infant who starves, a “starvation stool” is of
( Fill in ) ________________________________ colour.

97. In case of mild diarrhea the loss in fluids is less than ( fill in )
___________________ % of the body mass.

98. In moderately severe dehydration (9-10%), the following phenomena
are present:
( Choose 1 correct answer)
98.1. Tobacco pouch
98.2. Bulging fontanelle
98.3. Wet cloth phenomenon
98.4. Hypovolemic shock

99. The most severe clinical type of dehydration followed by a hypovolemic shock
and impairment of consciousness is called
( Fill in ) ________________________________

100. In moderately severe (6-9%) dehydration due to gastroenteritis, the following
phenomena are recorded
( Choose 2 correct answers)
100.1. Increased standard bicarbonate
100.2. Increased hematocrit
100.3. Increased blood pH
100.4. Decreased blood pH
100.5. Decreased urine osmolarity

101. Hypertone dehydration is a result of (Choose 1 correct answer)
101.1. Extreme loss of potassium
101.2. Extreme loss of liquids and sodium
101.3. Inappropriately higher loss of electrolytes versus liquids
101.4. Inappropriately higher loss of liquids versus elecrtolites
101.5. Equivalent loss of liquids and electrolites

102. In a diarrhea treatment, at realimentation, the first introduced food is _________________________________ (Fill in)

103. The acute diarrhea can be caused also by quantitative disorders of nutrition such as: (Choose 3 correct answers)
   103.1. Natural feeding, for starvation
   103.2. Artificial feeding, for starvation
   103.3. Natural feeding, for alimentation
   103.4. Artificial feeding, for alimentation

104. Diarrhea following almost each / nearly almost each breast feeding is called (Fill in)
   _______________________________ diarrhea

105. Qualitative nutritional disturbances in neonatus with artificial alimentation which
may cause dyspeptic impairments called “damage” are caused by...
(Choose 2 incorrect answers)
   105.1. flour
   105.2. milk
   105.3. cellulose
   105.4. fats

106. Enteral infection by Shigella bacteria gives clinical condition of characteristic stools such as:
   (Fill in) _______________________________ with/without_______________________

107. Consumption of termically untreated jalk can lead to gastrointestinal infection
   caused by
   (Choose 1 correct answer)
   107.1. Salmonella
   107.2. Shigella
   107.3. E. Coli

108. Which fungus most frequently causes infections of gastrointestinal tract in the neonatus and newborn infant?
   (Fill in) _______________________________

109. A newborn infant with diarrhea, with natural nourishment needs to be given the following alimentation
   (Choose 1 correct answer)
   109.1. Rice soup before breast feeding
109.2. Rice soup after breast feeding
109.3. Cancel breast feeding and give skimmed cow milk

110. In case of infantile diarrhea the following food is given
( tick incorrect answers )

110. 1. Apple
110. 2. Plum
110. 3. Peach
110. 4. Carob
110. 5. Cherry

111. During the treatment of acute diarrhea in the newborn infant it is advisable to
( Choose 1 correct answer)
111. 1. Camomile tea
111. 2. Oral rehydration solution
111. 3. Fruit juices
111. 4. Boiled water with much sugar

112. Carrot soup used in the treatment of acute diarrhea syndrome of the newborn
is called ________________________________
(Fill in the name after the author )

113. The weakened skin turgor in severe dehydration is called
______________________________________
(Fill in)

114. In case of severe dehydration in infants with diarrhea the frontal fontanelle is
( fill in ) ________________________________

115. Which is the first symptom of acute dehydration?
______________________________________
(Fill in)

116. The main content of cow milk is /ercicle correct /
116. 1. lactalbumin
116. 2. lactalbumin et lactoglobulin
116. 3. casein
116. 4. casein like protein
116. 5. casein like protein lunket to calcium

117. Technology adapted cow milk is /ercicle correct /
117. 1. taking casein away
117. 2. adding of essential fat acids
117. 3. dilution
117. 4. evaporisation
117. 5. adding of lactose
117. 6. acidification

118. Name a few kinds of formula /cow milk/ which differ in fat content /scribe the answers/
119. Daily intake of formula/cow milk/ for healthy infant should not be over / scribe the answer/ 

.................ml and ...............gr of carbohydrate per 100 ml

120. Daily energetic intake for healthy infant consists of / scribe the answers / 

.........% from carbohazdrate,........% from fats and .........% from proteins

121. The highest energetic value per volume unit has / encircle correct/

121.1 cow milk
121.2 smashed fruit
121.3 porridge
121.4 smashed vegetable
121.5 egg yolk

122. Daily need in vitamin D for healthy infant is / encircle correct/ 

122.1 100 I.J.
122.2 400 I.J.
122.3 800 I.J.
122.4 1200 I.J.

123. Name three main benefits of human milk toward cow milk / scribe the answer /

........................................
..........................................
.......................................

124. Human milk secretion is stimulated and supported by / encircle correct/

124.1 breast feeding
124.2 manual evacuation of milk
124.3 breast feeding combined with manual evacuation of milk

125. Energetic value of human milk is / encircle correct/ 

125.1 about 500 KJ/100 ml
125.2 about 320 KJ/100 ml
125.3 about 250 KJ/100 ml

126. Human milk contains / scribe the answers/ 

................g/l of proteins
................g/l of lipids
................g/l of carbohydrates

127. Human milk has higher cholesterol level than cow milk / encircle correct answer/ 

127.1 yes 127.2 no

128. Daily intake of formula/cow milk/ for healthy infant is / encircle correct/ 

128.1 about 200 ml per kg of body weight
128.2 about 150 ml per kg of body weight
128.3 about 100 ml per kg of body weight

129. Breast feeding should not last more than / encircle correct/ 

129.1 30 minutes
129.2 20 minutes
129.3 5/10 minutes

130. Name some of contraindications for breast feeding due to mother / scribe the answers/
Colostrum is first human milk secreted during / encircle correct / during first 5 days after delivery or first 5 weeks after delivery or first 5 months after delivery.

Colostrum is enriched in / encircle correct / correlating to cow milk. It contains:
- Immunoglobulines
- Carbohydrates
- Fats
- Proteins

So-called transit human milk is obtained / encircle correct / until the end of the first week after delivery, the first month after delivery, or six weeks after delivery.

So-called stabilized human milk is obtained / encircle correct / until the end of the first week after delivery, the first month after delivery, or six weeks after delivery.

Breastfeeding should start /encircle correct/ just after delivery, within 30 minutes, or 24 hours after delivery.

Healthy infant should not be breast fed during night /midnight till morning/ after /encircle correct/ at 6 weeks of age, two months of age, or three months of age.

Healthy breast-fed infant evacuates /encircle correct/:
- Greenish colored stools
- Golden-yellow colored stools
- Brown colored stools

Human milk contains only this type of carbohydrates /encircle correct/:
- Saccarose
- Glucose
- Lactose

Human milk contains mostly /encircle correct/:
- IgA antibodies
- IgM antibodies
- IgG antibodies
- Equal amounts of all kinds of antibodies

If human milk is boiled /encircle correct/:
- Nothing really dramatic happens to its main contents
- It is improved, better digestible
- It loses some immunologic advantages

If hypogalactia is diagnosed, we should advise for infant meals /encircle correct/.
141.1 Human milk given by other mother
141.2 Formula/cow milk/

142. Good breastfeeding is recognized by observation of these breast signs /scribe the answers/

143. If purulent mastitis is diagnosed in breastfeeding woman, we should /encircle correct/
   143.1. Continue breastfeeding of infant
   143.2. Stop breastfeeding and give formula to the infant
   143.3. Stop breastfeeding and give boiled human milk to the infant

SUPPLEMENTARY FEEDING

144. The term “supplementary feeding” means to feed with (finish the sentence):

145. Red fruit juices shall be entered in a baby’s diet when the baby is (fill in the following in letters) -- months old.

146. When the fruit is added to a baby’s diet, it may cause the following (mark the correct answer):
   a) acidosis
   b) allergy
   c) acholic stool

147. Mashed fruit shall be added to a baby’s diet when the baby is (finish the sentence) -- months old.

148. The following three important groups of ingredients are being entered into the baby’s organism through the fruit (write at least two):
   a) 
   b) 
   c) 

149. Hard-boiled yolk shall be entered into a baby’s diet when the baby is (finish the sentence) -- months old.

150. By introducing the yolk into the diet (finish the sentence), the ---------------- is being prevented.

150. When entering each new type of food into a baby’s diet, the following three rules shall be followed (write them down):
   a) ------------------ b) ------------------ c) ------------------

151. 10% starch porridge shall be entered, as a substitute for one milk meal when the baby is (finish the sentence) -- months old.
152. Egg white shall be entered into a baby's diet when the baby is --------------- months old, not earlier.

153. Chicken liver and meat shall be entered when the baby is ---------------- months old.

154. The baby's diet (food) shall be enriched with the vitamins and minerals when the --------------- is being entered in the diet.

155. Mashed banana may cause:
   a) constipation  
   b) diarrhoea

156. The baby's diet shall be enriched with vitamins through the carrot juice ingestion, because it contains the ------------------------- vitamin.

157. A yolk is rich in (mark the correct answer):
   a) K Vitamin  
   b) Fe  
   c) C Vitamin  
   d) Zinc and Selenium

158. The row yolk may contain ------------------------ which is the reason not to add the row yolk to the baby's diet.

159. Read meats shall be entered into a baby's diet when the baby is (fill in the following in letters) ------------------- months old.

160. The first meat to be entered into a baby's diet is the following (mark the correct answer):
   a) chicken  
   b) veal  
   c) pork

161. Folic acid hypovitaminosis shall appear if a baby is exclusively fed with:
   a) cow milk  
   b) goat milk  
   c) sheep milk

162. When the baby is six months old, it may eat the following (mark the correct answer):
   a) 5% starch porridge  
   b) 10% starch porridge  
   c) Shall not have any starch porridge as a separate meal.

Answers:
CHRONIC NUTRITIONAL DEFICIENCIES

166. Protein-energy malnutrition is the result of (finish the sentence):
insufficient ____________ or bad _______________ of food.

167. Marasmus /atrophy/ atrepsia appears when the energy intake is less
than ____________ required, and the protein intake less
than ____________ g/kgTT (fill in).

168. Quest’s Number indicates the percentage of weight loss related to the
greatest weight of that baby ever (mark the correct answer):
   a) 10-19 %
   b) 20-29 %
   c) 30 %, and more

169. Write down the most serious form of protein-energy malnutrition

170. Energy requirements of a malnourished infant are (mark the correct
answer):
   a) up to 50-100 Kcal (420 KJ/kgTT)
   b) 100-150 Kcal (420-600 KJ/kgTT)
   c) above 150 Kcal (600 KJ/kgTT)

171. What is the most serious form of protein malnutrition (write down its
name):

SUPPLEMENTARY FEEDING

172. Formula feeding includes the following (mark the correct answer):
   a) human milk and other mammals’ milk
   b) human milk, and fruit and vegetables
   c) other mammals’ milk and all other food

173. The supplementary feeding shall be applied (mark the correct answer):
   a) if there are insufficient volumes of human milk
   b) if a normal and sound infant is not gaining in weight as it should
c) if a mother is seriously ill
d) as a new feeding principle

174. What is the optimal way to feed the infant (mark the correct answer):
a) to substitute every other breast feeding with the milk formula
b) to give milk formula after each breast feeding

175. When the infant, which is breast fed every two hours, takes the breast and drops it quickly, when it cries a lot and has a “greenish” stool, it is the case of (finish the sentence): ______________________________

176. The human milk deficiency may be determined for each case, and for each breast feeding, even in the worst social conditions by (write down the procedure): __________________________________________

177. Calculate the quantity of formula needed for the supplementary feeding of a two-month infant weighing 5.000 g, and which is fed by 400 ml human milk per day. (write down the answer): ______________ ml

178. When an infant is supplementary fed, the feeding formula is given (mark the correct answer):
a) prior to breast feeding
b) during the breast feeding
c) after the breast feeding

179. Two-week-old infant, whose mother is suffering from hypogalacty, shall be supplementary fed with (mark the correct answer):
a) 2/3 cow milk
b) 2/3 goat milk
c) whole cow milk
d) 1/2 cow milk
e) feeding formula (manufactured)

ENDOCRINOLOGY

180. Chronic diabetic complications are due to (select a correct answer):
180.1. polyuria
180.2. psychotrauma
180.3. anaemia
180.4. protein glykolization
180.5. polydypsia

181. Insulin-dependant diabetes mellitus is the most frequent (select a correct answer):
181.1. during neonatal period
181.2. after twenty years of age
181.3. in infancy
181.4. in puberty
181.5. in toddlers

182. Temporary remission in diabetic children (©honey-moon period©) is characterized by insulin dose less than (add the number) ______ units/kg/day.

183. On classical insulin regimen (shot in the morning+shot in the evening), the morning dose should be around (add the number) _________ of total daily dose.

184. Three major causes of hypoglycaemia in children are (fill in):
185. Syndrome Mauriac (chronically unregulated diabetes) is recognized on examination due to (fill in):

__________________________________________________________________________

186. Intraabdominal testes retention bears risk of (select TWO correct answers):
   186.1. malignancy
   186.2. priapism
   186.3. infertility

187. Raising level of parathormone leads to (select a correct answer):
   187.1. unchanged serum phosphate level
   187.2. declining of serum phosphate level
   187.3. raising of serum phosphate level

188. Alkaline phosphatase is produced by (select a correct answer):
   188.1. osteoblasts
   188.2. osteoclasts
   188.3. parathyroid cells
   188.4. prostate
   188.5. thymus

189. Rickets would potentially more easily develop in children fed on (select a correct answer):
   189.1. cow milk
   189.2. human milk

190. Final activation of vitamin D (prohormone) into 1,25-DHCC takes place in (select a correct answer):
   190.1. brain
   190.2. bones
   190.3. skin
   190.4. pituitary
   190.5. kidneys

192. Impaired glucose tolerance is characterized by the glycaemy at the second hour of oral GTT (select a correct answer):
   192.1. less than 7,8 mmol/l
   192.2. between 7,8 and 11 mmol/l
   192.3. more than 11 mmol/l

193. Oral GTT performed at manifest diabetic children, implies at the second hour (select a correct answer) glycaemy higher than:
   193.1. 2,5 mmol/l
   193.2. 5,5 mmol/l
   193.3. 7,8 mmol/l
   193.4. 11,1 mmol/l

194. MODY (Maturity Onset of Diabetes in Young) has hereditary trait (select a correct answer):
   194.1. autosomal-recessive
194.2. autosomal-dominant
194.3. polygenic
194.4. X-linked recessive
194.5. X-linked dominant

195. Syndrome associated with extreme obesity is (select a correct answer):
   195.1. Turner
   195.2. Prader-Willi-Labhart
   195.3. Klinefelter

196. Undescended testes require therapy with (select a correct answer):
   196.1. antibiotics
   196.2. steroids
   196.3. testosteron
   196.4. estrogens
   196.5. gonadotropins or gonadoliberine

197. The upper limit for total cholesterol concentration in childhood is (select a correct answer):
   197.1. 6,9 mmol/l
   197.2. 5,2 mmol/l
   197.3. 4,2 mmol/l
   197.4. 3,2 mmol/l
   197.5. 1,6 mmol/l

198. Secondary hyperlipoproteinaemia (type IIa) is commonly present with a kidney disease in childhood named (fill in): ________________________________.

199. Newborn babies with congenital hypothyroidism present with (select THREE correct answers):
   199.1. prolonged jaundice
   199.2. cat cry
   199.3. hypotonia
   199.4. larger posterior fontanella

200. Screening for congenital hypothyroidism comprises (select a correct answer):
   200.1. determination of TSH or thyroid hormones serum level
   200.2. thyroid gland scintigraphy
   200.3. measuring neck circumference
   200.4. heart beat rate

201. Congenital adrenal hyperplasia is associated with (select TWO correct answers):
   201.1. high ACTH production
   201.2. high aldosteron production
   201.3. vomiting in neonatal period

202. Early mental retardation is common with (select a correct answer):
   202.1. hyperprolactinaemia
   202.2. Cushing syndrome
   202.3. phenylketonuria
   202.4. congenital adrenal hyperplasia

203. Diabetes mellitus in childhood is (select a correct answer):
   203.1. present in obese children only
   203.2. more frequent than after age of thirty years
   203.3. requires insulin treatment
   203.4. is very rare associated with ketoacidosis
203.5. dissapears in puberty

204. The basic principles for treating diabetic children are (select an UNcorrect answer):
- 204.1. insulin therapy
- 204.2. proper dieting
- 204.3. education
- 204.4. self-control
- 204.5. oral hypoglycaemic agents

205. Clinical signs of hypoglycaemia are (select an UNcorrect answer):
- 205.1. dry skin
- 205.2. tachycardia
- 205.3. pale face
- 205.4. tremor
- 205.5. disturbed behaviour

206. During the first year of life, the child will gain (fill in) _________ cm in length.

207. The obese child has body weight above its ideal body weight for at least (select a correct answer):
- 207.1. 10%
- 207.2. 20%
- 207.3. 30%
- 207.4. 40%

208. Daily therapeutic dose of vitamin D for a child with rickets is (select a correct answer):
- 208.1. 100 u
- 208.2. 800 u
- 208.3. 5000 u
- 208.4. 10000 u
- 208.5. 300000 u

209. Typical laboratory findings associated with rickets are (select a correct answer):
- 209.1. high AP, low Ca, low P
- 209.2. low AP, high Ca, high P
- 209.3. high AP, high Ca, high P
- 209.4. high AP, high Ca, low P
- 209.5. low AP, low Ca, low P

210. Untreated child with congenital adrenal hyperplasia will have (select an UNcorrect answer):
- 210.1. short stature, big penis, large testes
- 210.2. short stature, big penis, small testes
- 210.3. high serum level of 17-OH-progesteron
- 210.4. advanced bone age
- 210.5. hypertrophy of clitoris

211. Precocious puberty in girls is defined as emerging of secondary sexual characteristics before the age of (select a correct answer):
- 211.1. 6 years
- 211.2. 5 years
- 211.3. 8 years
- 211.4. 11 years

212. Precocious puberty in boys is defined as emerging of secondary sexual characteristics before the age of (select a correct answer):
- 212.1. 6 years
- 212.2. 8 years
212.3. 10 years
212.4. 12 years

213. The first clinical sign of puberty in boys is (select a correct answer):
   213.1. beard appearance
   213.2. voice deepening
   213.3. enlargment of testes volume
   213.4. hears
   213.5. agressivity

214. The first clinical sign of puberty in girls is (select a correct answer):
   214.1. menarche
   214.2. breast development
   214.3. redistribution of subcutaneous fat tissue
   214.4. high pitched voice
   214.5. hyperhydrosis

215. Primary dentition is usually at the age of (select a correct answer):
   215.1. 6 months
   215.2. 8 months
   215.3. 10 months
   215.4. 16 months

216. Infant can independently seat at the age of (select a correct answer):
   216.1. 2 months
   216.2. 4 months
   216.3. 6 months
   216.4. 8 months

217. Child can independantly walk since the age of (select a correct answer):
   217.1. 6 months
   217.2. 8 months
   217.3. 10 months
   217.4. 12 months
   217.5. 16 months

218. Select a correct statement:
   218.1. birth weight is doubled at the age of 9 months
   218.2. head circumference is doubled at the age of 1 year
   218.3. birth weight is doubled at the age of 1 year
   218.4. birth weight is doubled at the age od 24 months
   218.5. birth weight is doubled at the age of 5 months

219. Short stature is associated with (select THREE correct answers):
   219.1. Turner syndrome
   219.2. Klinefelter syndrome
   219.3. panhypopituitarism
   219.4. achondroplasia

220. The worst prognosis for life span is within untreated hyperlipoproteinaemia (select a correct answer):
   220.1. I
   220.2. IIa
   220.3. III
   220.4. IV
   220.5. lib
221. Puberty starts with (select a correct answer):
   221.1. continual cortisol secretion
   221.2. pulsatile TRH secretion
   221.3. continual LH-RH secretion
   221.4. raising of prolactine
   221.5. pulsatile LH-RH secretion

222. Therapy is not required with (select a correct answer):
   222.1. inguinal testis
   222.2. ectopic testis
   222.3. retractile testis
   222.4. migratory testis
   222.5. intrabdominal testis

223. Cretenism follows untreated (select a correct answer):
   223.1. Hashimoto thyreoiditis
   223.2. congenital hypothyreoidism
   223.3. hyperthyreoidismus
   223.4. rickets
   223.5. congenital adrenal hyperplasia

224. Constant vomiting in a jet appears at the end of a newborn and the beginning of infantile period as a part of the clinical picture (circle 1 answer):
   1. Hirschprungs disease
   2. Hypertrophic pyloric stenosis
   3. Biliary atresia

225. The following clinical signs are characteristic for the typical clinical picture of the coeliac disease (circle 1 answers):
   1. Mucous stool
   2. Distension of abdomen
   3. Poor growth
   4. Changed behaviour
   5. Constipation

226. The following is true of the idiopathic ulcerative colitis in children (circle 1 answer):
   1. Alternative name for this disease is ileitis terminalis
   2. Diarrhoea is its most common symptom
   3. Radiological research using barium most commonly shows the narrowing of the terminal ileum
   4. Sighting of pseudopolyposis is the indication for an operation
   5. The risk of carcinoma of the colon in older age is greater than in other population

227. For Hirschprungs disease the following is true (circle 4 answers):
   1. Diagnosis is usually set in the child’s first year
   2. In families there are usually more cases of the same disease
   3. The most common complication is the necrotising colitis
   4. The rectal ampula is empty
   5. The most characteristic histological find is absence of gangliong cells

228. Link correctly:
A. Ulcerative colitis           1. changes are continually
2. only shows in mucous membrane

B. Crohn’s disease             3. changes are not continual
4. it spread to all the layers of the intestinal wall
5. operation brings fall recovery
6. there are an adhesions intestinal fistula

229. The following is the most common (link the diagnosis and the correct term):
A. Hypertrophic pyloric stenosis 1. vomitting intensity constant
2. good weight gain
3. normal acid-base balance
4. poor weight gain

B. Gastroesophageal reflux      5. alcalosys

230. Symptoms of the cardial insufficiency which appear immediately after birt, most commonly disappear (1 correct answer):
1. in 1st week of life
2. with 6 weeks
3. with 9 months
4. with 2 years

231. Tenesmus is a signal of (correct 1 answer):
1. Irritabile colon
2. Disease of rectum
3. Theniasis
4. Intestinal lambliaisis

232. Haematochesia is a typical symptom of (correct 1 answer):
1. Meckels diverticulum
2. Bleeding duodenal ulcus
3. Ocsiuriasis
4. Chronic inflammatory colon disease

233. Changed behaviour in an infant normally appear in (correct 1 answer):
1. Amebiasis
2. Coeliac disease
3. Cistic fibrosis
4. Theniasis
5. Switch from 2/3 to full cow milk

234. Coeliac disease (correct 1 answer):
1. communly starts after six months of life
2. is more common in children fed or goat’s milk
3. content of fat in 24 h stool is under 25 g
4. passes spontaneously in older age

235. Important for diagnosis the malabsorption is (correct 1 answer):
1. copper in urine
2. Kayser -Fleischer’s rings in cornea
3. parasytic eggs in anal swab
4. fat in 24 h stool

236. Tracheoesophageal fistula is most often (correct 1 answer):
A. weight 1. good 6. bad
B. glycaemia 2. normal 7. raised
C. feremia 3. normal 8. lowered
D. 1 h D-xylosis test  4. above  9. below  1,31 mmol/L
E. transaminases  5. normal  10. raised

237. Tracheoesophageal fistula is most often (correct 1 answer);
1. asymptomatic
2. goes with sporadic anaemia
3. together with respiratory symptoms
4. always with clear clinical picture
5. gained anomaly

238. Plenty and frequent vomiting which occurs in a newborn soon after the start of feeding should arouse suspicion of (correct 1):
1. Hypertrophic pyloric stenosis
2. Cerebral paralysis
3. High intestinal obstruction
4. Congenital biliary atresia

239. Hypertrophic pyloric stenosis is radiologically characterized by (correct 1):
1. Initial difficulty in emptying bowels
2. Wide duodenum and narrowed pyloric channel
3. Shortened and narrowed pyloric channel
4. Lightened and narrowed pyloric channel
5. Lowered capacity of stomach

240. Newborn with typical Hirschprung’s disease has (correct 1):
1. Everyday mucous stool, like marbles
2. Constipation with lots of mucous and blood
3. Outer haemorrhoids
4. Empty rectal ampulla

241. Infant always vomits in jet when it is clinical picture of (correct 1):
1. Encephalitis
2. Otitis media acuta
3. Celiac disease
4. Hypertrophic pyloric stenosis
5. Bronchopneumonia

242. The most common reason for constipation in preschool and school children is (correct 1):
1. Ultrashort aganglionic segment
2. Psychogenic
3. Anorexia
4. Hypothyreosis
5. Hypo-D vitaminosis

243. Syndrome alive to Hoefflers’s occurs in infestation with:
1. Oxyuris vermicularis
2. Giardia lamblia
3. Ascaris lumbricoides
4. Trichuris trichiura
5. Trichocephalus dispar

244. In children, recidivist abdominal pain is most commonly of ______________ ethiology.
245. Insufficiency of the lower aosophageal sphincter leads to__________________.
246. ?
247. ?
248. Quote at least one method for diagnosing gastroesophageal reflux except for the radiological one.

249. Gastroesophageal reflux can give away symptoms outside of the gastrointestinal tract (correct 2):
1. Anaemia
2. Irritability
3. Recidivist respiratory symptoms
4. Chronic rhinitis

250. Quote conservative methods of treating gastroesophageal reflux in newborn and infants:

251. Quote at least two medications which may be efficient in treating gastroesophageal reflux:

252. The greatest number of children patients with gastroesophageal reflux due to cardiac insufficiency are cared (correct 1):
1. Only after operation
2. Only after conservative treatment
3. Only after conservative treatment and operation
4. Spontaneously

253. Quote anatomic types of hiatus hernia:

254. Achalasia is:

255. The most common type of atresia of the esophagus is (correct 1):
1. Proximal and distal stamps don’t communicate with the trachea
2. Both stamps communicate with the trachea
3. Proximal stamps communicate with the trachea
4. Distal stamps communicate with the trachea

256. Halasia is:

257. Mortality frequency in stress ulcus in infants is: 1. low 2. high

258. Antacids show their therapeutic effect through the following mechanisms:
1. They neutralize
2. They inactivate
3. They absorb

259. In children with peptic ulcers strong abdominal pain is seen in % cases: 1. 50% 2. 100%

260. In the age up to 6 years, the ratio of frequency of gastric and duodenal ulcers is:
1. More duodenal than gastric
2. More gastric than duodenal
3. Equal

261. Haemorrhage is:

262. Factors of risk in creating necrotizing enterocolitis are:
1. Prematureness
2. Circular-vascular intestinal disturbances
3. Family tendency to this disease
4. Hyperosmolar milk food
263. Necrotising enterocolitis initially characterise 3 symptoms: _______________________________.

264. Clear radiology diagnosis in necrotising enterocolitis is: ________________________________.

265. Result in adequate treating of necrotising enterocolitis is: 1. good 2. bad 3. unpredictable.

266. Pseudomembranous enterocolitis occurs during: ________________________________.

267. Which parts of the intestinal tract are included (link):
   A. M. Crohn 1. only small intestine 2. only large intestine
   B. Colitis ulcerosa 3. whole intestinal tract

268. The most serious late complication in patients treated conservatively for more than 10 years for ulcerous colitis is: ________________________________.

269. Basic medication therapy of ulcerous colitis and Crohn’s disease is: ________________________________.

270. The most common localisation of Crohn’s disease is: ________________________________.

271. The most frequent medication therapy in ulcerous colitis and Crohn’s disease is: 1. similar 2. considerably different.

272. Typical radiological look of the relief of mucous membrane of the intestine in Crohn’s disease is described as: ________________________________.

273. In unconjugated hyperbilirubinaemia of Gilbert type, after 24 h hunger test, bilirubin can not be lower than ____________ umol/L.

274. Prognosis of Crohn’s disease quo ad sanationem, in relation to ulcerous colitis is most often:
   1. better 2. worse 3. equal

GENETICS

275. Correct number of the human chromosomes is known since (encircle the correct answer):
   275.1. 1923. year 275.2. 1927. year 275.3. 1956. year 275.4. 1960. year

276. The human genome compose (encircle the correct answer):
   276.1. 44 chromosomes 276.2. 45 chromosomes
276.3.  46 chromosomes  
276.4.  47 chromosomes  

277. Down’s syndrome has (encircle the correct answer):  

277.1. 44 chromosomes  
277.2. 47 chromosomes  
277.3. 46 chromosomes  
277.4. 45 chromosomes  

278. Patau syndrome is (encircle the correct answer):  

278.1. Trisomy 13-15  
278.2. Trisomy 18  
278.3. Trisomy 21  
278.4. Monosomy X  

279. Adult patients affected with Down syndrome have intellectual quotient (encircle the correct answer):  

279.1. Over average  
279.2. Average  
279.3. Lower then average  

280. Genes total effects to characteristics and diseases at one family can be investigated by (encircle the correct answer): 

280.1. blood examination  
280.2. biochemical investigation  
280.3. pedigree investigation  
280.4. physical examination  

281. Bind AD, AR, XR, XD with certain diseases: 

1. AD A. Phenylketonuria  
2. AR B. Syndroma Marphan  
3. XR C. Haemophyllia A  
4. XD D. D-Resistant Rickets  

282. Early amniocentesis is suggested to be done at all pregnant ladies (encircle the correct answer):  

282.1. Between age 18-35  
282.2. Over age 35  

283. At a pregnant lady whose fetus has anencephaly and bifide spine aperta, the alpha feto protein level is (encircle the correct answer):  

283.1. Low  
283.2. High  
283.3. Normal
284. Dominant gene expressis in phenotype (encircle only one correct answer):

284.1. In homozygote state  
284.2. In heterozygote state  
284.3. In homo- and heterozygote state

285. When recessive gene has to be expressed, it needs to be in (encircle the correct answer):

285.1. Homozygote state  
285.2. Heterozygote state  
285.3. Homo- and heterozygote state

286. Haemophyllia A and Muscular dystrophy Duchen have recessive genes located on one of (encircle the correct answer):

286.1. Autosomal chromosomes  
286.2. Sex chromosomes

287. Intelligence inherits (encircle the correct answer):

287.1. Multifactorial  
287.2. Monogenic  
287.3. Autosomal dominant  
287.4. Autosomal recessive

288. Down syndrome has the trias (encircle the correct answer):

288.1. Mental retardation + typical clinical morphology + trisomy 21  
288.2. Obliquely palpebral fissures + flat nasal bases + karyotype 46,XX or 46,XY  
288.3. Mental retardation + unusual morphology + normal karyotype  
288.4. Mental retardation + low stature + normal karyotype

289. Excess X chromosome is found at (encircle the correct answer):

289.1. Turner syndrome  
289.2. YY syndrome  
289.3. Down syndrome  
289.4. Syndrome Klinefelter

290. Transcription in cells is in (encircle the correct answer):

290.1. cytoplasm  
290.2. nucleus  
290.3. mytochondrias

291. There is justified need at us for screening (encircle the correct answer):

291.1. AFP
291.2. TSH and phenylalanin
291.3. Galactosaemia
291.4. AFP, TSH and phenylalanin

292. Early amniocentesis has to be done (encircle the correct answer):

292.1. In 10. gestation week
292.2. In 16. gestation week
292.3. In 20. gestation week
292.4. In 24. gestation week

293. There is most frequent indication for early amniocentesis (encircle the correct answer):

293.1. At pregnant lady age 35 and age over 35
293.2. At parent's balanced translocation
293.3. When prior child was born with multpile malformations
293.4. Oligohydroamnion

294. Cordocentesis has to be done in (encircle the correct answer):

294.1. 12. gestation week
294.2. 16. gestation week
294.3. 20. gestation week
294.4. 32. gestation week

295. Cordocentesis results can be got earliest after (encircle the correct answer):

295.1. 4 days
295.2. 10 days
295.3. 14 days
295.4. 20 days

296. Mother and newborn child have blood group O. Mother's partner has blood group (encircle the correct answer):

296.1. O
296.2. A
296.3. AB
296.4. B

297. To every pregnant lady who has Rh genotype ccddee, with a partner who has genotype CCDDEE, after an abortion or partus it must be given (encircle the correct answer):

297.1. Transfusion
297.2. Rhogam
297.3. Rhogam and transfusion
297.4. nothing
298. Sensorial motoric deprivation improves the child’s state who has fragile X syndrome (encircle the correct answer):

298.1. Yes
298.2. No

299. If one characteristic appears at almost all monozygotic twins, and at dizygotic twins is frequent as at brothers and sisters, then this characteristic is (encircle the correct answer):

299.1. Low inheritable
299.2. High inheritable

300. Draw the principal symbols of pedigre:

300.1. female
300.2. male
300.3. marriage partners

301. Examination of minor malformation score (MMS) has importance, because (encircle only one correct answer):

301.1. teratogenic affection
301.2. minor malformation appearing
301.3. teratogenic affection and minor malformation appearing
301.4. mental retardation

302. Prader-Willi syndrome’s characteristics are:

302.1. mental retardation, 15 chromosome deletion, obesity
302.2. high stature, 16 chromosome deletion, obesity
302.3. high stature, normal karyotype, obesity
302.4. low stature, 18 chromosome deletion, obesity

303. Chorionic villus aspiration biopsy as a method of prenatal diagnostics has be done (encircle the correct answer):

303.1. In 5. gestation week
303.2. In 10. gestation week
303.3. In 14. gestation week
303.4. In 16. gestation week

304. Pancreas cystical fibrosis is inherited (encircle the correct answer):

304.1. Autosomal dominant
304.2. Autosomal recessive
304.3. X recessive
304.4. X dominant

305. For prenatal diagnostics of inherited heart defects it must be done (encircle the correct answer):

305.1. Cordocentesis
305.2. Early amniocentesis
305.3. Fetal echocardiography

HEMATOLOGY – ONCOLOGY

306. Fetal hemoglobin (Hgb F) disappeared from blood:

306.1. during the fourth month of life
306.2. in the second month of life
306.3. in the first month of life

307. Physiologic anemia of infancy results from:

307.1. iron deficiency
307.2. folic acid and vitamin B12 deficiency
307.3. shortened life of fetal red cell and expansion of blood volume

308. During the first days of life in white blood count predominating are:

308.1. lymphocytes
308.2. neutrophils
308.3. eosinophils

309. Iron deficiency anemia in childhood is most common caused by:

309.1. blood loss
309.2. insufficient dietary intake of iron
309.3. infections

310. Specific changes in iron deficiency anemia are:

310.1. decrease in level of serum iron with increased TIBC and UIBC
310.2. decrease in level of serum iron with decreased TIBC and UIBC
310.3. decrease in level of serum iron with increased TIBC and decreased UIBC

311. Hemolytic crises are characteristics of:

311.1. hereditary spherocytosis
311.2. iron deficiency anemia
311.3. Fanconi anemia

312. The hemophiliacs, a most common of the congenital coagulation disorders transmitted:

312.1. autosomal dominant
312.2. X linked recessive
312.3. autosomal recessive

313. Patients with "mild hemophilia" have a levels of F VIII:
313.1. from 5% to 10%
313.2. from 10% to 15%
313.3. less than 1%

314. Mucocutaneous haemorrhages like “leopard skin” are characteristics of

314.1. hemophilia
314.2. thrombocytopenia
314.3. von Willebrand disease
314.4. Henoch/Schonlein purpura

315. Which coagulation factors consumed during intravascular clotting process:

315.1. fibrinogen
315.2. II factor
315.3. V factor
315.4. VII factor
315.5. VIII factor
315.6. IX factor
315.7. XII factor
315.8. X factor

316. During the childhood the most common form of leukemia is:

316.1. acute nonlymphoblastic leukemia
316.2. chronic myelogenous leukemia
316.3. acute lymphoblastic leukemia
316.4. chronic lymphocytic leukemia

317. The most common form of childhood cancer is:

317.1. malignant lymphoma
317.2. leukemia
317.3. CNS tumor
317.4. neuroblastoma

318. The diagnosis of embrional tumor usually made:

318.1. before 5 year of age
318.2. between 5 and 10 years
318.3. in the 2nd decade of life

319. The best prognosis have:

319.1. rhabdomyosarcoma
319.2. Wilms tumor
319.3. neuroblastoma

320. Which characteristics in the case of lymph node enlargement we must describe:

320.1.
321. Usually daily therapeutic dose of elemental iron is:

321.1. 4 mg/kg body weight
321.2. 10 mg/kg body weight
321.3. 2 mg/kg body weight

322. For iron deficiency anemia useful is test:

323. Spherocytosis hereditaria is:

323.1. hemoglobinopathia
323.2. membranopathia
323.3. enzymopathia

324. Classification of the anemias on the basis of mean corpuscular volume (MCV):

______________________________________________________________________

____

325. Annulocytes in peripheral blood smear are characteristics of:

326. In severe hemolytic states free hemoglobin combines irreversibly with specific binding protein called:

326.1. haptoglobin
326.2. transferin
326.3. feritin

327. The term “shift to the left” in the white cell count means:

327.1. lymphocytosis
327.2. neutrophilia
327.3. greater number of immature forms of neutrophils

328. During the childhood very rare is:

328.1. acute nonlymphoblastic leukemia
328.2. chronic myelogenous leukemia
328.3. chronic lymphocytic leukemia

329. Increase levels of vanillylmandelic acid (VMA) in urine is specific diagnostic feature in:

329.1. Wilms tumor
329.2. Rhabdomyosarcoma
329.3. Neuroblastoma

330. Association with congenital anomalies is an important feature of:

330.1. Rhabdomyosarcoma
330.2. Neuroblastoma
330.3. Wilms tumor
330.4. Leukemia

331. Children with leukemia lymphoblastica acuta achieved complete remission in:

331.1. about 90%
331.2. about 50%

332. Infectious mononucleosis is a disease resulting from an infection by:

332.1. Coxsakie B virus
332.2. Adenovirus
332.3. Epstein - Barr virus

333. In the therapy of the hemophiliac patient use formula

334. Von Willebrand disease transmitted:

334.1. autosomal recessive
334.2. autosomal dominant
334.3. recessive X liked

335. Which coagulation factor is decreased in von Willebrand disease:

336. Acute immunothrombocytopenic purpura is form of:

336.1. megakaryocytic thrombocytopenia
336.2. amegakaryocytic thrombocytopenia

337. Physiologic anemia of infancy described as:

338. Prophylactic dose of iron in premature infants is:

339. Anemias results from a deficiency of folic acid or vitamin B12 are:

339.1. sideropenic
339.2. megaloblastic
340. Splenectomy is indicated in:
   340.1. Spherocytosis hereditaria
   340.2. megaloblastic anemia
   340.3. Fanconi anemia

341. Congenital aplastic anemia with physical abnormalities is:

342. Find a connection between hemorrhagic diseases and tests for evaluation of the hemostatic mechanism:

   | Hemorrhagic disease of the Newborn (3) | bleeding time (a) |
   | Thrombocytopenia (2) | PTT (b) |
   | Hemorrhagic disease of the Newborn (3) | Platelets (c) |

343. High dose I.V. immunoglobuline are useful in the treatment of:

   343.1. Hemophilia
   343.2. von Willebrand disease
   343.3. immunothrombocytopenic purpura

344. Disseminated intravascular coagulation is:

   344.1. consumption coagulopathy
   344.2. immunovasculitis
   344.3. congenital coagulopathy

345. In immunothrombocytopenic purpura abnormal are:

   345.1. bleeding time
   345.2. PTT
   345.3. prothrombin time
   345.4. platelet count
   345.5. Rumpel – Leede test

346. Bleeding time in hemophiliac patient is:

   346.1. normal
   346.2. prolonged
   346.3. shortened

347. A pick incidence of acute lymphoblastic leukemia is:

   347.1. at 3-4 year
   347.2. after 10 year

348. Enlargement of the lymph nodes are most frequently due to:
348.1. infections
348.2. malignant diseases
348.3. miscellaneous

CARDIOLOGY

349. First measures to abolish paroxysmal supraventricular tachycardias (PSVT) are (encircle incorrect):
   a) flexion of lower extremities
   b) unilateral massage of carotid sinus, Valsalva manoeuvre, immersion of face into ice water
   c) vasodilatatory therapy

350. The average heart frequency with new born children is (encircle correct):
   a) 100/min
   b) 160/min
   c) 220/min

351. One of the characteristics of accidental murmurs is changing its intensity during the change of body position (encircle correct):
   a) yes
   b) no

352. Digitalis prolongs Q-T interval (encircle correct):
   a) yes
   b) no

353. Drug of choice in abolishing attacks of PSVT in infants is (encircle correct):
   a) digitalis
   b) verapamil
   c) cordarone

354. Central cyanosis is characterised by bluish coloration of tongue and visible mucoses (encircle correct):
   a) yes
   b) no

355. Cardiac failures with left to right shunt are often accompanied with (encircle correct):
   a) respiratory infections
   b) pain in the belly
   c) kidney infections

356. Tetralogy of Fallot shows characteristic RTG picture of (encircle correct):
   a) "sitting duck"
   b) "Dutch (wooden) shoe"
   c) "ball"

357. State all main Jones criteria for rheumatic fever
_________________________________________________________________

358. Rheumatic polyarthritis, as a rule, leaves sequelae on joints (encircle correct):
   a) yes
   b) no

359. Most frequent EKG sign during the acute phase of rheumatic fever is prolonged P-Q interval (encircle correct):
   a) yes
   b) no

360. Trilogy Fallot means (encircle two correct answers):
   a) defect of chamber’s septum
   b) defect of pre-chamber septum
   c) dextropointed aorta
   d) stenosys of pulmonalys artery

361. Miocardytis appears most frequently in rheumatic fever as well as in other diseases (state at least two):
_________________________________________________________________

362. Name at least three minor criteria for rheumatic fever
_________________________________________________________________

363. Penycilin or its substitutes should be applied in cases of rheumatic fever relapses or negative cultured swab (encircle correct):
364. Complication of congenital heart failure, characterised by pulmonary vascular resistention and inversion of shunt into right to left is called (encircle correct):
   a) Adams-Stokes attack
   b) Eisenmenger syndrome
   c) Wolff-Parkinson-White syndrome
   d) Kussmaul respiration

365. Rheumatic fever prophylaxis is carried on with (fill in the gap with the name of the appropriate medicament): __________________ in intervals of ____ weeks

366. According to Jones’ criteria, for rheumatic fever diagnosis is enough to have presence of (encircle two correct answers):
   a) any major with evidence of streptococcus infection
   b) 3 minor criteria
   c) 1 minor + 1 major criteria
   d) 2 major criteria
   e) 1 major + 2 minor criteria

367. Presence of "delta" wave on EKG is characteristic for (encircle correct):
   a) Wackenbach phenomenon
   b) hipokalemia
   c) digitalis intoxication
   d) Wolff-Parkinson-white syndrome

368. Disease from colagenosa group with typical face changes and characteristic presence of antinuclear antibodies and circulating immunocomplexes (encircle correct):
   a) scleroderma
   b) systematical lupus erytematodes
   c) dermatomiositis

369. At which inborn heart failure measuring of heart pressure on all extremities has a great diagnostical importance (fill in the gap)

370. Characteristical tones for pericarditis are (encircle three correct answers):
   a) silent tones
   b) systola sound on the top
   c) rubbing
   d) microvolting EKG's
   e) elevation of segments on EKG

371. The most frequent cause of viral miocarditis is virus from the group of (encircle correct):
   a) herpes
   b) varicella
   c) Arbo
   d) Coxsackie B

372. T-wave in right precordial draining EKG-s is positive at the age (encircle correct):
   a) 1-3 days
   b) 1-12 months
   c) 2-13 years
   d) 14 and older

373. Syncope during exertion and possibility of sudden death are characteristic for (encircle correct):
   a) transposition of great vessels
   b) atroventricular canal
   c) stenosis of pulmonary artery
   d) aortic stenosis

374. According to Jones' major criteria for diagnosis of rheumatic fever the following dermo changes are included (fill in the gaps):
   a) __________________
   b) __________________

375. What is Roger (encircle correct):
a) disturbance of resorption of aminoacids and glucosa on levels of proximal kidney's tubula
b) chromosome anomaly-partial monosomy 5p
c) small VSD on muscular part of septum
d) allergy reaction-type III (immunocomplexes)

376. Which is anatomic difference between tetralogy and pentalogy Fallot (encircle correct):
a) atrial septum defect
b) ventricular septum defect
c) riding aorta
d) stenosis of pulmonary artery
e) persistent ductus arteriosus

377. High R prong in right and deep S in left precordial drainage on EKG-s of a child of two is sign of (encircle correct):
a) hyperthrophy of left chamber
b) hyperthrophy of right chamber
c) biventricular burdening
d) normal EKG for this age

378. Frequency of systematical lupus erytematoses is (encircle correct):
a) bigger with boys
b) bigger with girls
c) is not present

379. In disturbances of heart conveying, atrioventricular block are encounted (write grade):
a) Weckenbach, block of ______ grade
b) prolonged P-Q, block of ______ grade
c) A-V dissociation, block of ______ grade
d) Mobitz II, block of ______ grade

380. Are presence of murmur I/II degree on the top of heart artralgia and accelerated SE sufficient for diagnosis of rheumatic fever (encircle correct):
a) yes, presence of 2 major and 1 minor criteria
b) yes, presence of 1 major and 2 minor criteria
c) no, because of lack of evidence of streptococca infection
d) no, because murmur is not III or higher degree
e) no, because there isn't any major criterion

381. Clinical manifestations of rheumatic chorea are (encircle three correct):
a) muscular hypertonus
b) muscular hypotonus
c) unwilling movements
d) change of handwriting
e) "obstetrician" hand
f) emotional instability

382. The electrocardiogram demonstrates approximate comprehension in levels of the following serum electrolytes (encircle two correct):
a) sodium
b) chlor
c) potassium
d) calcium
e) phosphor

383. The average daily Cedilanid dose for infant is (encircle correct):
a) 30-40 mcg/kg
b) 30-40 mg/kg
c) 30-40 g/kg

384. Therapy of congenital heart block, with ventricular frequency less than 40/min and occurrence of syncope is (write):
____________________________________________________________________

385. Interval between two dashes on EKG at standard speed is (encircle correct):
a) 0.01 sec
b) 0.02 sec
c) 0.04 sec
386. The appearance of T-waves on EKG is reflection of (encircle correct):
   a) chamber depolarisation
   b) chamber repolarisation
   c) ischemistry
   d) potassium level in blood
   e) calcium level in blood

387. Characteristical lesia on endocard of heart valves in rheumatic fever is (fill in the gap) ________ tubercle.

388. Right branch block of Hyss'bundle is shown on EKG as (encircle correct):
   a) lack of P wave with QRS complex normal form
   b) prolonged interval P-R
   c) widened Q-R-S form R-R in V1 and V2
   d) widened Q-R-S form R-R in V5 and V6

389. Hypocaliemia is shown on EKG as (encircle correct):
   a) prolonged Q-T interval
   b) denivelation of S-T segment
   c) flat or inverted T-wave
   d) U wave

390. The main characteristics of arthritis are (fill in the gap)

391. Characteristics of complete heart block e.i. block III degree are, (encircle correct):
   a) prechamber frequence overcomes greatly chamber frequence
   b) prechamber frequence is equal as chamber
   c) prechamber frequence is less than chamber

392. For stenotic systolic murmur is typical (encircle correct):
   a) punctum maximum at the apex
   b) punctum maximum at the base
   c) horizontal propagation
   d) propagation to the neck and to the back

Pulomology

393. Indications for tonsillectomia are (encircle 3 correct answers)
   393.1. recidivising tonsillitis (6 - 8 injections during a year)
   393.2. peritonsiling abscess
   393.3. persisting nasal obstruction
   393.4. primary TBC tonsillary affect
   393.5. primary TBC of throat lymph glands
   393.6. carries of an infectious disease

394. Indications for adenoidectomia are (encircle 2 correct answers)
   394.1. nasal speach
   394.2. recidivising otitis media
   394.3. persisting nasal obstruction
   394.4. facies adenoidea

395. Croup syndrom is an acute inflammatory laryngs obstruction which is manifested by (encircle 3 correct answers)
   395.1. inspiratory stridor
   395.2. tachypnea
   395.3. inspiratory dyspnea
   395.4. laryngeal cough
395.5. aphonia
395.6 perioral cyanosis

396. Characteristic auscultatory findings on lungs at the status asthmaticus is (encircle 2 correct answers)
   396.1 the finding of diffuse early inspiratory and expiratory cracs
   396.2 the finding of late inspiratory cracs
   396.3 symmetrically weakened respiratory murmurs
   396.4 low tone wheezing
   396.5 high tone wheezing

397. The most frequent etiologic factors in asthmatic occurrence are (encircle the correct answer)
   A. in older child
      397.1 nutritive allergens
      397.2 inhalatory allergens
      397.3 physical effort
   B. in infant and toddler
      397.4 psychogenic factors
      397.5 infection
      397.6 gastroesophageal reflux

398. RTG finding in asthmatic persons are characterised by (encircle correct answer)
   398.1 segmental atelectasis
   398.2 strengthened bronchovascular drowing
   398.3 diffuse stained shadings
   398.4 hyperinflation
   398.5 enlarged shadow of the central lung artery

399. Viral pneumonia are usually (answering the question put correct-uncorrect)
   399.1 more frequent in children then the bacterial ones
   399.2 combined with dry and long lasting cough
   399.3 with disproportion of toxic symptoms and RTG changes in an older child
   399.4 combined with the occurrence of pneumocele on RTG finding of lung
   399.5 caused by aspiration

400. Stapylococcus pneumonia (answering the question put yes or no)
   400.1 is more frequent in school children
   400.2 is manifested by creation lung abscesses
   400.3 has a gradual onset
   400.4 occurs frequently as a complication of influence, cystic fibrosis and
        immunodeficient conditions

401. Cystic fibrosis (answering the question put yes or no)
   401.1 is a hereditary disease and it is transmitted mainly autosomally
   401.2 is caused by primary disturbance of ciliar motility
   401.3 a diagnosis can be made antenatally
   401.4 a diagnosis can be made by the chlorine analysis in sweat
   401.5 with newborn infant, as one of the first signs of disease has a meconium ileus
   401.6 has Pseudomonas aeruginosa infection as the most frequent complication

402. The global lung insufficiency is characterised by (answering the question put yes or no)

   CLINICALY        LABORATORY
dyspnea                                          hypocapnia
cyanosis                                          metabolic acidosis
hairy fingers                                     hypoxia
paleness                                          miosis
hypotensia                                        hypotensia
bronchial hypersecretion

403. Streptococcus pyogenes is most frequently caused by the infection of (encircle the correct answer)
   403.1 respiratory tract
   403.2 skin
   403.3 meninges
   403.4 blood
   403.5 soft tissues
   403.6 urine tract

404. Streptococcus infections are more frequent at the age (encircle the correct answer)
   404.1 of infant
   404.2 from 1-3 years
   404.3 from 5-10 years
   404.4 over 10 years

405. The most characteristic clinical signs of streptococcus tonsillopharyngitis are (encircle 4 correct answers)
   405.1 dysphagia
   405.2 increased temperature
   405.3 pain in throat
   405.4 headache
   405.5 abdominal pain
   405.6 anorexia
   405.7 boils and scums on tonsils

406. Therapy scheme in treatment of streptococcus throat infection and tonsillitis
   streptococca is (encircle 3 accepted therapy schemes)
   406.1 depot Extencillin (600.000 for pre school child or 1200.000 for school child)
   406.2 Penicillin for three days (800.000 or 1200.000 depending on age) and after
   that Extencillin (600.000 or 1.200.000)
   406.3 Penicillin for 10 days (800.000 or 1.200.000 depending on age)
   406.4 Penicillin drugs for peroral usage in corresponding doses during 2 weeks
   406.5 Penicillin drugs for peroral usage in corresponding doses during 10 days

407. If a child allergic to Penicillin is concerned, it is necessary to use in the therapy of
   tonsillopharyngitis streptococcica (encircle correct answer)
   407.1 Lincocin 30-60 mg./kg TT/24 h - 5 days
   407.2 Garamycin 5-7 mg/kgTT/24h - 7 days
   407.3 Erithromycin 20-40 mg/kgTT/24h - 10 days
   408.4 Longacef 50-100 mg/kgTT/24h -10 days

408. Characteristic clinical feature in foreign body aspiration is (encircle 3 correct answers)
   408.1 tachypnea
   408.2 inspiratory dyspnea
   408.3 wheezing
408.4 temperature
408.5 cough
408.6 losing one's breath

409. Characteristic auscultatory finding over lungs at the foreign body aspiration is (encircle correct answer)
409.1 early inspiratory and expiratory cracs on the both sides of lung
409.2 asymmetry of breathing
409.3 low tone wheezing
409.4 bronchial breathing

410. The clinical signs of acute foreign body aspiration are: (round of 2 correct answers)
410.1 tachypnea
410.2 inspiratory dispnea
410.3 wheezing
410.4 temperature
410.5 cough

411. During acute exacerbations of asthma the most characteristic finding on the RTG of the chest is: (round of one correct answer)
411.1 segmental atelectasis
411.2 increased lung markings
411.3 infiltrative shadows
411.4 hyperinflation

412. The therapy of mild or moderate attack of bronchoopstriction, in infants or toddlers, is
412.1 disopstraction of airways
412.2 mucolitic drugs
412.3 antihystaminic drugs
412.4 antibiotic
412.5 corticosteroids
412.6 bronchodilatators

413. The therapy of mild or moderate attack of bronchoopstriction, in older child, is: (round of 2 correct answers):
413.1 disopstraction of airways
413.2 bronchodilatator
413.3 corticosteroid
413.4 oxygen
413.5 antibiotic
414. Pneumonia caused by staphylococcus pneumoniae (encircle 2 correct answers)
   414.1 is more frequent in school children
   414.2 is manifested by creation of lung abscessus
   414.3 has a gradual beginning
   414.4 occurs frequently as a complication of cystic fibrosis, influence and immunodeficient conditions
   414.5 in therapy the drug chosen is Penicillin

415. The global respiratory insufficiency is clinically manifested by (encircle 3 correct answers)
   415.1 dyspnea
   415.2 cyanosis
   415.3 hairy fingers
   415.4 paleness
   415.5 myosis
   415.6 hypotension

416. Laboratory findings characteristic for the global respiratory insufficiency are (encircle 2 correct answers)
   416.1 hypocapnia
   416.2 metabolic acydosis
   416.3 hypoxia
   416.4 Hypercapnia

417. The partial respiratory insufficiency is clinically characterised by (encircle 2 correct answers)
   417.1 normocapnia
   417.2 hypercapnia
   417.3 hypoxia
   417.4 metabolic acydosis
   417.5 normal PH of blood

418. Laboratory findings characteristic for the partial respiratory insufficiency are (encircle 3 answers)
   418.1 normocapnia
   418.2 hypercapnia
   418.3 hypoxia
   418.4 metabolic acydosis
   418.5 normal PH blood

419. The infant with respiratory tract infection have signs of: (round of correct answers)
   419.1 infection only respiratory organs
   419.2 infection of respiratory and cardiovascular organs
   419.3 infection of whole organism

420. Viral pneumonia is characterised by (encircle 3 correct answers)
   420.1 biphasal course of disease
   420.2 productive cough
   420.3 higher frequency at older age
420.4 higher incidence of occurrence in relation to the bacterial infection
420.5 poor response to the antibiotic therapy

421. In the therapy of cystic fibrosis there are applied (encircle 4 correct answers)
   421.1 pancreas preparations
   421.2 food poor in salt
   421.3 polyvitamin preparations
   421.4 kinesitherapy
   421.5 antibiotics
   421.6 corticosteroids

422. The most widely criteria used for diagnosis asthma are (round of 5 correct answers)
   422.1 natural history (atopic diseases)
   422.2 familiar history (atopic diseases)
   422.3 symptoms and development of disease
   422.4 radiological picture
   422.5 elementary laboratory data
   422.6 immunological studies
   422.7 determination of specific IgE antibodies to common inhalant allergens, with skin tests

423. The foreign body aspiration is indicated by (encircle 3 correct answers)
   423.1 anamnesis data
   423.2 cough
   423.3 tachydyspnea
   423.4 asymmetric RTG finding
   423.5 asymmetric physical finding on lungs

424. Obstructive respiratory syndrome is associated with: (round of correct answer)
   424.1 bronchitis
   424.2 asthma
   424.3 gastroesophageal reflux
   424.4 tumours of lungs
   424.5 bronchiolitis
   424.6 pneumonia
   424.7 tumours of mediastinum

425. Restrictive type of ventilation disturbance are found by (encircle 4 correct answers)
   425.1 tumors of lungs
   425.2 tumors of mediastinum
   425.3 pneumonia
   425.4 pleural effusion
   425.5 diseases of bone and muscles of thorax
   425.6 hilary lymphadenopathy

426. Inspiratory dyspnea occurs with (encircle 3 correct answers)
426.1 bronchiolitis
426.2 congenital stridor
426.3 pleuropneumonia
426.4 subglottic laryngitis
426.5 foreign body aspiration
426.6 bronchitis obstructive

427. The most suitable way for applications of sympathicomimetic drugs is (round of correct answer)
   427.1 oral
   427.2 inhalatory
   427.3 intravenous

428. Treatment of mild asthma include giving (round of correct answer)
   428.1 one bronchodilator
   428.2 two bronchodilators
   428.3 two bronchodilators and corticosteroids

429. Tretment of moderate severe attack of asthma include giving (round of correct answer)
   429.1 one bronchodilatator
   429.2 two bronchodilatators
   429.3 two bronchodilatators and corticosteroids
   429.4 oxygen

430. In the therapy of status asthmaticus should be applied (encircle 2 correct answers)
   430.1 one bronchodilatator
   430.2 two bronchodilatators
   430.3 two bronchodilatators and corticosteroid
   430.4 secretolitic

431. For the diagnosis of tuberculosis there are important (encircle 3 correct answers)
   431.1 RTG of the lungs
   431.2 anamnesis
   431.3 tuberculin skin test
   431.4 sweat test
   431.5 cultivation of sputum on Agar

432. In a case when tuberculin test is positive (encircle 3 correct answers)
   432.1 switch on immediately ATL therapy
   432.2 search for a possible contact
   432.3 take gastrolavates
   432.4 the patient should be isolated
   432.5 follow tuberculin reactivity
   432.6 perform RTG control

433. A negative tuberculin reaction means (encircle all correct answers)
   433.1 that child is not infected
   433.2 that child is not vaccinated
   433.3 that child is at incubation stage (preallergic stage)
433.4 that child is at a very serious clinical form of disease
433.5 that child is at the stage of immunodeficiency
433.6 that child had measles, varicella or that he got a vaccine (mumps, morbilli)

434. Tuberculin test is read after (encircle correct answer)
   434.1 24 hours
   434.2 48 hours
   434.3 72 hours

435. Tuberculin test in children who have not got vaccine against mycobacterium tbc, is positive when the infiltration is (encircle correct answer)
   435.1 from 1-6mm
   435.2 from 6-9 mm
   435.3 from 9-15mm
   435.4 over 15mm

436. Meningitis tuberculosa at the initial stage of disease is manifested by (encircle 2 correct answers)
   436.1 temperature
   436.2 somnolentia
   436.3 sleep inversion
   436.4 loss of appetite
   436.5 positive meningeal signs
   436.6 neurologic attacks

437. Tuberculin test in the vaccinated children is positive if the infiltrate is (encircle correct answer)
   437.1 from 1-6mm
   437.2 from 6-9 mm
   437.3 from 9-15 mm
   437.4 over 15 mm

438. Optimal therapy for the tuberculosis in the first three months is conducted by the application of (encircle correct answer)
   438.1 one antituberculotic (isoniasid -INH)
   438.2 two antituberculotics (isoniasid and etambutol-EMB)
   439.3 two antituberculotics (isoniasid and streptomycin-STM)
   439.4 two antituberculotics (isoniasid and rifampicin-RFP)
   439.5 three antituberculotics (isoniasid, etambutol, rifampicin)
   439.6 corticosteroid

439. Optimal therapy of tuberculosis after three months is conducted by the application of (encircle correct answer)
   439.1 isoniazid
   439.2 isoniazid and etambutol
   439.3 isoniazid and rifampicin
   439.4 isoniazid and streptomycin
   439.5 corticosteroid
   439.6 isoniazid and etambutol and rifampicin
440. The number of bacteria per one milliter urine in urinary tract infection (encircle a correct answer)

440.1 Between 50,000 and 100,000 per one milliter
440.2 More than 100,000 bacteria per one milliter
440.3 10,000 bacteria per one milliter

441. The number of leukocytes per mm3 urine in girls with urinary tract infection is (encircle a correct answer)

441.1 10 leukocytes
441.2 50 leukocytes
441.3 More than 50 leukocytes

442. Sure sign of urinary tract infection is: (encircle a correct answer)

442.1. Leucocyturia
442.2. Haematuria
442.3. Significant bacteriuria

443. Sure sign of urinary tract infection is present: (encircle a correct answer)

443.1 Erytrocites casts
443.2 Leukocytes casts
443.3 Granulares casts

444. The treatment of acute urinary infection lasts: (encircle a correct answer)

444.1. 10-14 days
444.2. 4 weeks
444.3. 6 weeks

445. In acute pyelonephritis the drug of choice is: (encircle a correct answer)

445.1. Penicillin
445.2 Cephalosporine
445.3 Tetracycline

446. The most frequent cause of urinary tract infection is (encircle a correct answer)

446.1. Gramm-positive bacteria
446.2. Viruses
446.3. Gramm-negative bacteria

447. What is pathological at the urinary tract infection:
   (encircle a correct answer)

   447.1. Increased blood urea nitrogen
   447.2. Increased serum creatinine
   447.3. Decreased urine concentrating ability

448. When investigations of urinary tract malformations should be performed:
   (encircle a correct answer)

   448.1. After the first urinary tract infection
   448.2. After the second urinary tract infection
   448.3. After a few urinary tract infection

449. Which one is the first step considering examination of urinary tract malformations:
   (encircle a correct answer)

   449.1. Intravenous urography
   449.2. Ultrasound
   449.3. Cystourethrography voiding

450. Vesiciureteral reflux is:
   (encircle a correct answer)

   450.1. Pathological phenomenon in infant
   450.2. Pathological phenomenon in any age
   450.3. Result of the urinary tract infection

451. Which one of these malformations is hereditary:
   (encircle a correct answer)

   451.1 Posterior urethal valve
   451.2 Polycystic renal disease
   451.3 Renal agenesis

452. Intensity of proteinuria within nephrotic syndrome is:
   (encircle a correct answer)

   452.1. 300 mg/24 h
   452.2. 1 g/24 h
   452.3. over 3 g/24 h

453. For nephrotic syndrome diagnosis the neccessary finding in urine is:
   (encircle a correct answer)

   453.1. Leukocyturia
   453.2. Haematuria
   453.3. Proteinuria
453.4. Cylindruria

454. Idiopathic nephrotic syndrome is characterized:
   (encircle a correct answer)
   
   454.1. Decreased complement
   454.2. Decreased igg
   454.3. Increased circulating immunocomplexes

455. The characteristic for nephrotic syndrome is:
   (encircle a correct answer)
   
   455.1 Hypervolemia
   455.2 Hypovolemia
   455.3 Hypertension

456. The initial therapy of nephrotic syndrome in child is:
   (encircle a correct answer)
   
   456.1. Cyclophosphamide
   456.2. Cyclosporine a
   456.3. Corticosteroids

457. What is contraindicated for steroid therapy:
   (encircle a correct answer)
   
   457.1 Obesity
   457.2 Psychosis
   457.3 Peptic ulcer

458. The acute glomerulonephritis is frequently associated with:
   (encircle a correct answer)
   
   458.1 Viruses infection
   458.2 Streptococcal infection
   458.3 Hemophylus infection

459. A sure sign of acute postinfectious glomerulonephritis is:
   (encircle a correct answer)
   
   459.1. Haematuria
   459.2. Proteinuria
   459.3. Generalized edema

460. Acute poststreptococcal glomerulonephritis is characterized:
   (encircle a correct answer)
460.1 Decreased urine concentrating ability
460.2 Azotemia
460.3 Normal glomerular filtration

461. The characteristic laboratory finding in glomerulonephritis is: (encircle a correct answer)

461.1 Erythrocytes casts
461.2 Proteinuria higher than 3 grams per day
461.3 Granulares casts

462. For the upper urinary tract infection characteristic is: (encircle a correct answer)

462.1 Dysuria
462.2 Fever and flank pain
462.3 Hematuria

463. Gross hematuria in acute cystitis is present: (encircle a correct answer)

463.1 In the beginig of micturition
463.2 In all course of micturition
463.3 In the end of micturition

464. In acute cystitis erythrocyte sedimentation rate is: (encircle a correct answer)

464.1 Increased
464.2 Not increased

465. The treatment of acute urinary infection lasts: (encircle a correct answer)

465.1 10 days
465.2 2 - 3 weeks
465.3 3 - 4 weeks

466. E.coli for P-fimbriae the most frequent in present: (encircle a correct answer)

466.1 Cystitis
466.2 Pyelonephritis
466.3 Urethritis

467. For the prevention of urinary infection it may be to give: (encircle a correct answer)
Minimal doses of antibiotics
Therapy dosis of uroantiseptics
1/2 - 1/3 of therapy doses

Higher leukocyturia is present in vulvovaginitis with:
(encircle a correct answer)

- Candida (VI group)
- Trichomonas (V group)
- Gramm - negative microorganism (III group)

Surgical therapy of vesicouretral reflux is indicated:
(encircle a correct answer)

- In all cases
- Reflux grade IV & V
- Reflux with reflux nephropathy

Surgical therapy is necessary in:
(encircle a correct answer)

- Vesicoureteral reflux grade III
- Stenosis colli pyeloureterica
- Horseshoe kidney

Which investigation of polycystic renal disease should be performed:
(encircle a correct answer)

- Ultrasound
- Intravenous urography
- Computed tomography

The pathology finding in nephrotic syndrome with minimal change is characteristic:
(encircle a correct answer)

- Mesangial hypercellularity
- Diffuse podocyte fusion
- Present of glomerular immunoglobulin or complement deposition

The immunoglobulin-G in nephrotic syndrome is:
(encircle a correct answer)

- Normal
- Decreased
- Increased

A patient with minimal change nephrotic syndrome has:
474.1 Mild edema and gross hematuria
474.2 Generalized edema and hematuria
474.3 Generalized edema without hematuria

475. The initial steroid therapy in nephrotic syndrome:
(encircle a correct answer)

475.1 Till normal value of proteinuria
475.2 One month
475.3 A few months

476. In the acute phase of nephrotic syndrome is limited intake:
(encircle a correct answer)

476.1 Protein
476.2 Salt
476.3 Water

477. Idiopathic nephrotic syndrome is the most frequent:
(encircle a correct answer)

477.1 At the school age
477.2 Between 2 and 5 years
477.3 In the first year

478. The serum level of C3 in acute poststreptococcal glomerulonephritis is:
(encircle a correct answer)

478.1 Normal
478.2 Decreased
478.3 Increased

479. Is the prophylactic of poststreptococcal glomerulonephritis with extencillin necessity? (encircle a correct answer)

479.1 No
479.2 Yes

480. CHARACTERISTICS OF TYPICAL FEBRILE SEIZURES ARE  (encircle 3 correct)
480.1 Attack lasts longer then 15 minutes
480.2 Appear at the age 6 months to 3.5 year
480.3 Normal neurological findings after attack
480.4 Positive family history for epilepsy
480.5 Normal EEG 10 days after attack
481  TO PREVENT FEBRILE SEIZURES USUALLY WE USE (encircle correct)
   481.1 Sodium valproat per os
   481.2 Diasepam (Valium) per rectum
   481.3 Phenobarbital per os
   481.4 Sodium valproat or Phenobarbital per os

482  ATYPICAL FEBRILE SEIZURES PREVENTION USUALLY LASTS (encircle correct) AFTER FIRST ATTACK
   482.1 12months
   482.2 24months
   482.3 30months
   482.4 36months
   482.5 42months

483  IN MANAGEMENT EPILEPTIC (CONVULSIVE) STATUS, DIASEPAM (VALIUM) IV IS ADMINISTRATED (encircle correct)
   483.1 1-3mg/kg
   483.2 0.25-0.5mg/kg
   483.3 0.1-0.3mg/kg
   483.4 3-5mg/kg

484  ABSANCES BELONG TO PRIMARY GENERALIZED SEIZURES (encircle correct)
   484.1 yes
   484.2 no

485  HYPSARRHYTHNIA IS TYPICAL EEG FINDING IN (encircle correct)
   485.1 Grand mal
   485.2 Petit mal
   485.3 Jacksons epilepsy
   485.4 Infantile spasms
   485.5 Atypical absances

486  ANTIEPILEPTIC THERAPY LASTS MINIMUM (AFETR FIRST ATTACK) (encircle correct)
   486.1 2years
   486.2 3years
   486.3 5years
   486.4 10years

487  CONNECT RIGHT COMBINATION

   EPILEPSY – TYPE          PROGNOSIS
   1. Grand mal             A. Good
   2. Petit mal             B. Poor
   5. Sy West
   6. 4. Lennox Gastaut Sy

488  IN MANAGEMENT EPILEPSY – THERAPY DRIVING OUT USUALLY CONTINUE TO (encircle correct)
488.1 6 months
488.2 1 year
488.3 18 months
488.4 2 years

489 BREATH ARREST DURING CONVULSIVE ATTACK IS DUE TO (encircle correct)
489.1 Cardiac arrest
489.2 Tongue suffocation
489.3 Respiratory muscle spasm

490 DURING CONVULSIVE ATTACK IT IS NECESSARY TO PUT STEADY OBJECT IN THE PATIENTS MOUTH TO PREVENT TONGUE BITE (encircle correct)
490.1 Correct
490.2 Incorrect

491 IN MANAGEMENT OF CONVULSIVE ATTACK OXYGEN IS NECESSARY
491.1 Always
491.2 If the patient is cyanotic
491.3 If attack lasts longer than 5 minutes
491.4 If attacks repeat frequently

492 IN MANAGEMENT OF NEONATAL CONVULSIVE ATTACKS WE USE (Mark order of use)
492.1 Diazepam (Valium) or Phenobarbital
492.2 Piridoxin
492.3 Glucosae
492.4 Magnesium sulphate
492.5 Calcium gluconate

493 INTERMITENT FEBRILE SEIZURES PREVENTION IS INDICATED IN (encircle two correct)
493.1 Atypical febrile seizures
493.2 Typical febrile seizures
493.3 Recidive febrile seizures
493.4 All cases of febrile seizures

494 INTERMITENT FEBRILE SEIZURES PREVENTION BY PHENOBARBITAL PER OS IS (encircle correct)
494.1 Justifiable
494.2 Nonjustifiable

495 IMMUNISATION IS CONTRAINDICATED IN CHILDREN WITH FEBRILE SEIZURES (encircle correct)
495.1 Yes
INFANTILE SPASMS BELONG TO THE GROUP OF (encircle correct)
496.1 Primary generalized seizures
496.2 Partial seizures
496.3 Secondary generalized seizures

AURA BEFORE GRAND MAL ATTACK IS A SIGN OF (encircle correct)
497.1 Vegetative immaturity
497.2 Part of grand mal attack
497.3 Secondary generalisation

GENERAL CHARACTERISTIC OF PRIMARY GENERALIZED SEIZURES IS (encircle correct)
498.1 Aura
498.2 Clonic movement
498.3 Consciousness disorders
498.4 Convulsions one half of the body

PETIT MAL EPILEPSY IS CHARACTERIZED BY (encircle correct)
499.1 Generalized tonic-clonic attacks
499.2 Jackson attack
499.3 Absences
499.4 Akinetic attack

CONNECT INCORRECT COMBINATIONS
EPILEPSY- TYPE PROGNOSIS
1. Grand mal A. Good
2. Petit mal B. Poor
3. Sy West
4. Sy Lennox Gastaut