- 1. A 28-year-old patient complains of infertility. The patient has been married for 4 years, has regular sexual life and does not use contraceptives but has never got pregnant. Examination revealed normal state of the genitals, tubal patency. Basal body temperature recorded over the course of 3 consecutive menstrual cycles appeared to have a single phase. What is the most likely cause of infertility?
- **A.** Anovulatory menstrual cycle
- **B.** Immunological infertility
- **C.** Genital endometriosis
- **D.** Chronic salpingoophoritis
- E. Ovulatory menstrual cycle
- 2. A 40-year-old female patient has been hospitalized for attacks of asphyxia, cough with phlegm. She has a 4-year history of the disease. The first attack of asphyxia occurred during her stay in the countryside. Further attacks occurred while cleaning the room. After 3 days of inpatient treatment the patient's condition has significantly improved. What is the most likely etiological factor?
- A. Household allergens
- B. Pollen
- C. Infectious
- **D.** Chemicals
- E. Psychogenic
- **3.** A 13-year-old girl complains of periodic prickly pain in the heart region. Percussion revealed no changes of cardiac borders. Auscultation revealed arrhythmic enhanced heart sounds, extrasystole at the 20-25 cardiac impulse. ECG showed the sinus rhythm, impaired repolarization, single supraventricular extrasystoles at rest. What is the most likely diagnosis?
- **A.** Vegetative-vascular dysfunction
- **B.** Rheumatism
- **C.** Nonrheumatic carditis
- **D.** Myocardial degeneration
- **E.** Intoxication syndrome
- 4. A 28-year-old patient has been taken to a hospital for acute pain in the lower abdomen. There was a brief syncope. The delay ofmenstruation is 2 months. Objectively: the patient has pale skin, AP- 90/50 mm Hg, Ps- 110/min. Lower abdomen is extremely painful. Vaginal examination reveals uterus enlargement. There is positive Promtov's sign. Right appendages are enlarged and very painful. Posterior vault hangs over. What is the most likely diagnosis?

- **A.** Right-sided tubal pregnancy
- **B.** Right ovary apoplexy
- C. Acute right-sided salpingoophoritis
- **D.** Pelvioperitonitis
- **E.** Incipient abortion
- **5.** 5 weeks after hypothermia a 22-year-old patient developed fever, weakness, muscle pain, inability to move independently. Objectively: tenderness, induration of shoulder and shin muscles, restricted active movements, erythema on the anterior surface of chest. There is a periorbital edema with heliotropic erythema. Gottron's sign is present. What study is required to verify the diagnosis?
- A. Muscle biopsy
- **B.** Aminotransferase activity
- **C.** Pneumoarthrography
- D. ASO titre
- E. Rheumatoid factor
- **6.** A 24-year-old patient consulted a doctor about enlarged submandibular lymph nodes. Objectively: submandibular, axillary and inguinal lymph nodes are enlarged. Chest radiograph shows enlarged mediastinal lymph nodes. In blood: RBCs 3, 4 · 10¹²/l, Hb- 100 g/l, colour index 0,88, thrombocytes 190 · 10⁹/l, WBCs 7,5 · 10⁹/l, eosinophils 8%, stab neutrophiles 2%, segmented neutrophiles 67%, lymphocytes 23%, ESR 22 mm/h. What study is required to verify the cause of lymphadenopathy?
- **A.** Open biopsy of lymph nodes
- **B.** Ultrasound examination of the abdomen
- **C.** Mediastinal tomography
- **D.** Puncture biopsy of lymph nodes
- **E.** Sternal puncture
- **7.** A patient operated for acute paraproctitis undergoes antibacterial and detoxification therapy, the local course of the disease has the positive dynamics. Since the operation the patient has had chills, pyrexia, tachycardia, euphoria for five days. The doctor suspected sepsis. What study will confirm the diagnosis?
- **A.** Blood culture for a pathogen
- **B.** X-ray of lungs
- C. Liver ultrasound
- **D.** Determining the rate of microbial contamination of wound
- **E.** Determining the rate of average-weight molecules
- 8. A painter working at a motorcar

plant has been diagnosed with moderately severe intoxication with amide compounds of benzene. The in-patient treatment resulted in a considerable health improvement. What expert decision should be made in this case?

A. The patient should be issued a sick list for out-patient treatment

B. The patient may get back to work providing he will keep to hygiene and sanitary regulations

C. The patient should be referred to the medio-social expert commission for evaluation of percentage of work capicty loss

D. The patient should be referred to the medio-social expert commission for attributing the disability group because of an occupational disease

E. -

- 9. A 58-year-old female patient came to the antenatal clinic complaining of bloody light-red discharges from the genital tracts. Menopause is 12 years. Gynaecological examination revealed age involution of externalia and vagina; uterine cervix was unchanged, there were scant bloody discharges from uterine cervix, uterus was of normal size; uterine appendages were not palpable; parametria were free. What is the most likely diagnosis?
- **A.** Uterine carcinoma

B. Atrophic colpitis

C. Abnormalities of menstrual cycle of climacteric nature

D. Cervical carcinoma

E. Granulosa cell tumor of ovary

10. A 7-year-old boy had complained of headache, nausea, fatigue for 3 weeks. His condition gradually deteriorated, headache and general weakness progressed. The boy had bronchitis at the age of 3. His father has a history of pulmonary tuberculosis. Objectively: body temperature 37,5°C, conscious, lies supine, with the hip and knee flexed to 90 degrees, nuchal rigidity +6 cm, partial ptosis of the right eyelid, the dilated right pupil. General hyperalgesia is present. Liquor: transparent, pressure - 400 mm of water column, protein -1,5%, cytosis - 610/3 with predominant lymphocytes, sugar - 1,22 mmol/l, chlorides - 500 mmol/l. What is the most likely diagnosis?

A. Tuberculous meningitis

B. Secondary purulent meningitis

C. Epidemic cerebrospinal meningitis

D. Serous meningitis

E. Pneumococcal meningitis

- **11.** A 13-year-old girl has a 5-year histrory of pain in the right hypochondrium irradiating to the right shoulder blade. The pain attacks are usually associated with diet violations, they are short and can be easily relieved by antispasmodic drugs. During a pain attack, palpation of the abdomen is painful, the pain is most intensive in the projection of the gallbladder. What is the most likely diagnosis?
- **A.** Biliary dyskinesia
- **B.** Chronic cholecystitis
- **C.** Chronic gastroduodenitis
- **D.** Chronic pancreatitis
- E. Duodenal ulcer
- **12.** A 24-year-old patient got a puncture injury below the Poupart's ligament accompanied by intense arterial bleeding. The best method to temporarily stop the bleeding in the patient would be:
- A. Compression band
- **B.** Esmarch's tourniquet

C. Maximum limb bending

D. Compressing a blood vessel with a clamp

E. Wound suturing

- 13. A 64-year-old patient complains of severe pain in the right side of chest, dyspnea, dry cough which appeared suddenly on exertion. Objectively: the right side of the chest lags behind in the act of breathing. Percussion reveals tympanic sound. Auscultation reveals pronouncedly diminished breath sounds on the right. Ps-100/min, weak, arrhythmic. AP- 100/50 mm Hg. Cardiac sounds are decreased. What disease can be suspected in this patient?
- A. Right-sided pneumothorax

B. Right-sided hydrothorax

C. Right-sided dry pleurisy

D. Right-sided pleuropneumonia

E. PATE

14. An 18-year-old patient since childhood suffers from bleeding disorder after minor injuries. His younger brother also has bleeding disorders with occasional haemarthrosis. Which laboratory test will be informative for diagnosis verification?

- **A.** Clotting time
- **B.** Fibrinogen rate
- **C.** Blood clot retraction
- **D.** Thrombocyte count
- **E.** Determination of prothrombin time
- **15.** A patient complains of fatigue, lack of appetite, pain and burning sensation in the tongue, numbness of the distal limbs, diarrhea. Objectively: pale skin with lemon-yellow tint, face puffiness, brown pigmentation in the form of a "butterfly", bright red areas on the tongue. The liver is 3 cm below the costal margin, soft. Blood count: RBCs - $1, 5 \cdot 10^{12}$ /l, colour index - 1,2, WBCs - $3.8 \cdot 10^9 / l$, thrombocytes - 180 · 10⁹/l, eosinophils -0%, stab neutrophils - 1%, segmented neutrophils - 58%, lymphocytes - 38% monocytes - 3%, RBC macrocytosis. ESR - 28 mm/h. What diagnosis are these presentation typical for?
- **A.** B_{12} -deficiency anemia
- **B.** Iron deficiency anemia
- **C.** Aplastic anemia
- **D.** Acute erythromyelosis
- E. Chronic adrenal failure
- **16.** Medical examination of a 19-year-old worker revealed generalized lymphadenopathy mainly affecting the posterior cervical, axillary and ulnar lymph nodes. There are multiple injection marks on the elbow bend skin. The man denies taking drugs, the presence of injection marks ascribes to influenza treatment. Blood count: RBCs- 3, 2 · 10¹²/l, Hb- 100 g/l, WBCs- 3, 1 · 10⁹/l, moderate lymphopenia. What study is required in the first place?
- A. ELISA for HIV
- **B.** Immunogram
- **C.** Sternal puncture
- **D.** X-ray of lungs
- **E.** Lymph node biopsy
- 17. A patient got flame burns of both hands. On the dorsal and palmar surface of hands the blisters are filled with serous fluid. The wrist joint region is hyperemic. The forearms were not injured. What is the provisional diagnosis?

- **A.** II degree flame burn of hands with an area of 4/
- **B.** II degree flame burn of hands with an area of 2/
- **C.** IIIa degree flame burn of hands with an area of 4/
- **D.** III degree flame burn of hands with an area of 4/
- **E.** IIb degree flame burn of hands with an area of 2/
- 18. During the periodic medical examination an assembly fitter (works on soldering details) didn't report any health problems. Closer examination revealed signs of asthenic-vegetative syndrome. Blood included red blood cells with basophilic aggregations and a somewhat higher number of reticulocytes, urine had a high concentration of delta-aminolevulinic acid. The complex of symptoms indicates the initial stage of chronic intoxication with:
- A. Lead
- **B.** Manganese
- C. Mercury
- **D.** Tin
- E. Ethanol
- 19. A patient complains about sudden onsets of paroxysmal pain in the right lumbar region. 2 hours after the onset the patient had hematuria. Plain radiograph of the lumbar region shows no pathological shadows. USI reveals pyelocaliectasis on the right, the left kidney is normal. What is the most likely diagnosis?
- A. Renal colic
- **B.** Acute appendicitis
- **C.** Bowel volvulus
- **D.** Torsion of the right ovary cyst
- **E.** Right renal pelvis tumour
- **20.** Examination of a group of persons living on the same territory revealed the following common symptoms: darkyellow pigmentation of the tooth enamel, diffuse osteoporosis of bone apparatus, ossification of ligaments and joints, functional disorders of the central nervous system. This condition may be caused by the excessive concentration of the following microelement in food or drinking water:
- **A.** Fluorine
- **B.** Copper
- C. Nickel
- D. Iodine
- E. Cesium

- 21. A 50-year-old patient complains of bursting pain in the left lower limb that is getting worse on exertion, swelling in the region of shin and foot. Objectively: left shin and foot are doughy, skin of the lower shin is indurated and has a bronze tint, subcutaneous veins are dilated, there is an ulcer with necrotic masses. What is the most likely diagnosis?
- A. Postthrombophlebitic syndrome
- **B.** Chronic arterial insufficiency
- **C.** Acute arterial thrombosis
- **D.** Deep vein thrombosis of the lower limbs
- E. Gangrene of the lower extremity
- **22.** A 12-year-old boy has a 6-year history of insulin-dependent diabetes. The disease is labile. Since recently there have been periodical rises in blood pressure. Microalbuminuria test gave positive results. The patient's condition corresponds with the following stage of diabetic nephropathy:
- **A.** Stage III early-stage nephropathy
- **B.** Stage I renal hypertrophy and hyperfunction
- **C.** Stage II histological changes in the kidneys
- **D.** Štage IV advanced clinical nephropathy
- **E.** V stage chronic renal failure
- 23. A 48-year-old patient was found to have diffuse enlargement of the thyroid gland, exophthalmia, weight loss of 4 kg in 2 months, sweating. Objectively: HR-105/min, AP- 140/70 mm Hg. Defecation act is normal. What kind of therapy is recommended in this case?
- A. Mercazolil
- **B.** Radioiodine
- **C.** Propranolol
- **D.** Lugol's solution
- E. Thyroxine
- **24.** A 48-year-old male patient complains of constant pain in the upper abdomen, mostly on the left, that is getting worse after taking meals; diarrhea, weight loss. The patient is an alcohol abuser. 2 years ago he had acute pancreatitis. Blood amylase is 4 g/h·l. Coprogram shows steatorrhea, creatorrhea. Blood glucose is 6,0 mmol/l. What treatment is indicated for this patient?

- A. Panzinorm forte
- **B.** Insulin
- **C.** Gastrozepin
- **D.** Contrycal
- E. No-spa
- **25.** A patient is on the sick leave for 4 months continuously from the date of injury. The treatment is going to last for 1-2 months more. Who has the right to extend the duration of medical certificate for this patient?
- **A.** Medical advisory commission after medico-social expert commission examination
- **B.** Medical superintendent
- **C.** Medical advisory commission after inpatient treatment
- **D.** District doctor by agreement with a department chief
- **E.** Medico-social expert commission
- **26.** Full-term pregnancy. Body weight of the pregnant woman is 62 kg. The fetus has the longitudinal position, the fetal head is pressed against the pelvic inlet. Abdominal circumference is 100 cm. Fundal height is 35 cm. What is the approximate weight of the fetus?
- **A.** 3 kg 500 g
- **B.** 4 kg
- **C.** 2 kg 500 g
- **D.** 3 kg
- **E.** 4 kg 500 g
- 27. A rural hospital serves 6200 people. Preventive examinations were planned for 560 farm workers with different risk factors. 400 workers underwent preventive examination. 120 individuals were found to have cardiovascular problems, 90 of them were registered with a dispensary department for health care maintenance. Which indicator should be used to assess the organization of health care maintenance at the hospital?
- **A.** Share of workers who actually underwent preventive examinations
- **B.** Share of newly diagnosed patients
- **C.** Share of persons subject to preventive examinations
- **D.** Share of diseased persons
- **E.** Incidence of cardiovascular diseases
- **28.** A 20-year-old patient complains of severe headache, double vision, weakness, fever, irritability. Objectively: body temperature is at the rate of $38, 1^{\circ}C$, the patient is reluctant to contact, sensitive to stimuli. There is ptosis of the

left eyelid, exotropia, anisocoria S>D, pronounced meningeal syndrome. On lumbar puncture the cerebrospinal fluid flowed out under a pressure of 300 mm Hg, the fluid is clear, slightly opalescent. 24 hours later there appeared the fibrinous film. Protein - 1,4 g/l, lymphocytes -600/3 per mm³, sugar - 0,3 mmol/l. What is the provisional diagnosis?

- A. Tuberculous meningitis
- **B.** Meningococcal meningitis
- C. Lymphocytic Armstrong's meningitis
- **D.** Syphilitic meningitis
- **E.** Mumps meningitis
- **29.** A 32-year-old patient has developed an acute condition after hypothermia: temperature $40^{\circ}C$, cough with 200 ml of sputum per day. The sputum is purulent, foul-smelling. To the right of the lower lobe the mixed moist rales can be auscultated. Blood tst results: WBCs $18, 0 \cdot 10^9$ /l, ESR 45 mm/h. Radiographically: in the lower lobe of the right lung there is a thick-walled cavity up to 6 cm in diameter with a high horizontal level. What is the most likely diagnosis?
- A. Lung abscess
- **B.** Fibro-cavernous pulmonary tuberculosis
- **C.** Lung cyst
- **D.** Decomposing lung carcinoma
- **E.** Infiltrative pulmonary tuberculosis
- **30.** A family consists of 5 persons. The husband is a stope miner. His spouse is a housewife. Their 20-year-old daughter works as a kindergarten teacher. Their 18-year-old son is a student. The grandmother is a pensioner, she has diabetes. Which member of this family can be primarily classed among the group of persons with a high risk of tuberculosis in the planning of preventive examinations for tuberculosis?
- A. Grandmother
- **B.** Husband
- C. Daughter
- **D.** Son
- **E.** Wife
- **31.** A newborn's head is of dolichocephalic shape, that is front-to-back elongated. Examination of the occipital region revealed a labour tumour located in the middle between the prefontanel and posterior fontanel. Specify the type of fetal presentation:

- A. Posterior vertex presentation
- **B.** Anterior vertex presentation
- **C.** Presentation of the bregma
- **D.** Brow presentation
- **E.** Face presentation
- **32.** During medical monitoring of labor and professional training of 6th grade schoolchildren the school doctor found that lessons in carpentry workshop are held on Friday as the fourth and fifth lesson of a total of 90 minutes, the motor density at the first lesson is 69%, and 65% at the second. Does the lesson organization meet the hygienic requirements?
- **A.** Meets the requirements
- **B.** Does not meet the requirements in terms of training duration
- **C.** Does not meet the requirements in terms of motor density at the 1st lesson
- **D.** Does not meet the requirements in terms of motor density at the 2nd lesson
- **E.** Does not meet the requirements as there are two consecutive lessons
- **33.** During coal extraction in a mine the concentration of coal dust in the working area is 450 mg/m³ (MPC is 10 mg/m³). What occupational respiratory disease may develop in miners?
- A. Anthracosis
- **B.** Allergic nasopharyngitis
- **C.** Byssinosis
- **D.** Siderosis
- E. Talcosis
- **34.** A patient with suspected pheochromocytoma has normal blood pressure in the periods between the atacks and a tendency to tachycardia. Urine test revealed no pathology. It was decided to use a provocative test with histamine. What medication should be prepared to provide emergency care in case of a positive test result?
- A. Phentolamine
- **B.** Pipolphen
- **C.** Nifedipine
- **D.** Mesatonum
- **E.** Prednisolone
- **35.** A 54-year-old patient complains of frequent painful urination, chills, fever up to $38^{\circ}C$. Urine test results: protein -0,33 g/L, WBCs up to 50-60 in the field of vision, RBCs 5-8 in the field of vision, gram-negative bacilli. Which of the listed antibiotics should be preferred in this case?

- A. Ciprofloxacin
- **B.** Oxacillin
- **C.** Erythromycin
- D. Tetracycline
- E. Tseporin
- **36.** The share of circulatory diseases was 15% in the total of registered diseases among city population. What statistic indicator is it?
- A. Extensive
- **B.** Intensive
- C. Demonstrative
- D. Ratio
- **E.** Average
- **37.** During a regular medical examination at a metallurgical plant 20% of workers were found overweight (body weight was 5-14% higher than normal), and had early signs of obesity (grade I-II) with Quetelet index from 26 to 30. What products share must be reduced in the diet of this group of people in the first place in order to normalize their body weight?
- **A.** Bakery products
- **B.** Vegetables
- C. Fruit
- D. Milk and dairy products
- **E.** Meat and fish products
- 38. Several hours before, a 28-year-old patient suddenly developed acute headache and repeated vomiting, then lost consciousness. Objectively: focal neurological symptoms were not found. Pronounced meningeal symptoms were revealed. AP 120/80 mm Hg. According to clinical and liquorological findings the patient was diagnosed with subarachnoid haemorrhage. After administration of dehydrants the patient's condition somewhat improved. What is the main component of further emergency care?
- **A.** Coagulants
- **B.** Anticoagulants
- **C.** Antiaggregants
- **D.** Fibrinolytics
- **E.** Corticosteroids
- **39.** Gastric juice analysis of a 42-year-old male patient revealed absence of free hydrochloric acid at all stages. Endoscopy revealed pallor, thinning of gastric mucosa, smoothed folds. Microscopically the atrophy of glands with intestinal metaplasia was found. What disease is this situation typical for?

- **A.** Chronic type A gastritis
- **B.** Chronic type B gastritis
- **C.** Chronic type C gastritis
- **D.** Menetrier disease
- E. Stomach cancer
- **40.** A 45-year-old female patient complains of frequent liquid stools with a lot of mucus, pus and blood; pain across the abdomen, loss of 7 kg within 6 months. She has a 1-year history of non-specific ulcerative colitis. What group of drugs should be preferred for this patient?
- A. Corticosteroids
- B. Antibacterial
- **C.** Sulfonamides
- **D.** Nitrofurans
- E. Polyenzymes
- 41. A 24-year-old female teacher complains of dizziness and heart pain irradiating to the left nipple. Pain is not associated with physical activity and cannot be relieved by nitroglycerin, it abates after taking Valocordin and lasts an hour or more. The patient has a nearly 2-year history of this disease. Objectively: Ps- 76 bpm. AP- 110/70 mm Hg. Heart borders are normal, heart sounds are clear. The ECG shows respiratory arrhythmia. Radiograph of the cervicothoracic spine shows no pathology. Lungs, abdomen are unremarkable. What changes in blood formula can be expected?
- **A.** No changes
- **B.** Leukocytosis
- **C.** Thrombocytopenia
- **D.** Leukemic hiatus
- E. Increased ESR
- **42.** A 60-year-old male patient, who works as a construction worker, complains of pain in the right hip and knee joints, that is getting worse on exertion. These presentations have been observed for the last 5 years. Objectively: the patient is overnourished. Right knee joint is moderately deformed. Examination of other organs and systems revealed no pathology. Blood tet results: WBCs $8, 2 \cdot 10^9$ /l, ESR 15 mm/h. Uric acid 0,35 mmol/l. What is the most likely diagnosis?
- **A.** Deforming osteoarthritis
- **B.** Reactive arthritis
- C. Gout
- **D.** Rheumatoid arthritis
- E. Reiter's disease
- **43.** Chief physician of a polyclinic encharged a district doctor with a task to

determine the pathological prevalence of disease N in his district. What document allows to estimate the disease prevalence in the population of a medical district?

- A. Prophylactic examinations register
- **B.** Statistic coupons (+)
- **C.** Statistic coupons (-)
- **D.** Statistic coupons (+) and (-)
- E. Vouchers for medical appointments
- **44.** A 32-year-old female complains of dizziness, headache, palpitation, tremor. For the last several months she has been under outpatient observation for the increased arterial pressure. Since recently such attacks have become more frequent and severe. Objectively: skin is covered with clammy sweat, tremor of the extremities is present. HR- 110/min, AP- 220/140 mm Hg. Heart sounds are muffled. Blood test results: WBCs 9, 8 · 10⁹/l, ESR 22 mm/h. Blood glucose 9,8 millimole/l. What disease is the most likely cause of this crisis?
- A. Pheochromocytoma
- **B.** Essential hypertension
- C. Preeclampsia
- **D.** Primary hyperaldosteronism
- E. Diabetic glomerulosclerosis
- **45.** A 55-year-old male has a 1,5-year history of viral cirrhosis with symptoms of portal hypertension. Over the last month the weakness has progrssed, there appeared coffee ground vomit. Fibrogastroduodenoscopy revealed variceal esophageal haemorrhage. What drug should be used to reduce the pressure in the portal vein?
- **A.** Vasopressin
- **B.** Reserpine
- **C.** Calcium gluconate
- **D.** Dicynone
- **E.** Furosemide
- **46.** In an urban settlement situated on the riverbank an outbreak of hepatitis A was registered. The disease might have water origin. This assumption can be confirmed by growth of the following indicators of water quality:
- **A.** Number of coli-phages
- **B.** Escherichia coli index
- **C.** Oxidability
- **D.** Presence of benign leptospirosis pathogen
- **E.** Index of fecal coli-forms
- **47.** A 9-month-old child presents with fever, cough, dyspnea. The symptoms

appeared 5 days ago after a contact with a person having ARVI. Objectively: the child is in grave condition. Temperature of $38^{o}C$, cyanosis of nasolabial triangle is present. RR- 54/min, nasal flaring while breathing. There was percussion dullness on the right below the scapula angle, and tympanic sound over the rest of lungs. Auscultation revealed bilateral fine moist rales predominating on the right. What is the most likely diagnosis?

- A. Acute pneumonia
- B. ARVI
- C. Acute laryngotracheitis
- **D.** Acute bronchitis
- E. Acute bronchiolitis
- **48.** A 40-year-old patient complains of fever up to $39^{\circ}C$, cough with sputum and blood admixtures, dyspnea, weakness, herpetic rash on the lips. Objectively: respiration rate 32/min. Under the shoulder blade on the right the increased vocal fremitus and dullness of percussion sound were revealed. Auscultation revealed bronchial respiration. Blood count: WBCs $14 \cdot 10^{9}/\text{l}$, ESR 35 mm/h. What is the provisional diagnosis?
- A. Right-sided croupous pneumonia
- **B.** Focal right-sided pneumonia
- **C.** Cavernous tuberculosis of the right lung
- D. Lung cancer
- **E.** Exudative pleuritis
- **49.** A patient underwent stomach resection. During the operation, the left upper limb of the patient was abducted and fixed to the operating table for anesthetic management. Postoperatively, the patient developed dysfunction of the upper extremity in form of "drop hand." This symptom results from the damage of the following nerve:
- **A.** Radial nerve
- **B.** Axillary nerve
- C. Ulnar nerve
- **D.** Median nerve
- **E.** Musculocutaneous nerve
- **50.** In the morning a patient had nausea, abdominal discomfort, single vomiting, dry mouth. In the evening, the patient presented with the increasing general weakness, double vision, difficult swallowing of solid food. Objectively: ptosis, mydriasis, anisocoria, absence of gag and pharyngeal reflex, dry mucous membranes. The previous evening the patient had dinner with canned food

and alcohol. What is the presumptive diagnosis?

- **A.** Botulism
- **B.** Food toxicoinfection
- **C.** Intoxication with unknown poison
- **D.** Acute ischemic stroke
- E. Poliomyelitis
- **51.** An 8-year-old child complains of fever up to 38, 8°C, throat pain when swallowing, skin rash. Objectively: lacunar tonsillitis, circumscribed hyperaemia and enanthema of soft palate, pinoint-sized skin rash, mostly in the folds and on the flexor surfaces of the extremities, pale nasolabial triangle. Which antibiotic should be administered in the first place?
- A. Penicillin
- B. Gentamicin
- C. Ampicillin
- **D.** Lincomycin
- E. Tetracycline
- **52.** A 28-year-old female patient with a six-year history of Raynaud's syndrome has recently developed pain in the small joints of hands, difficult movement of food down the esophagus. What kind of disease can you think of in this case?
- **A.** Systemic scleroderma
- **B.** Periarteritis nodosa
- C. Rheumatoid arthritis
- **D.** Systemic lupus erythematosus
- E. Pseudotrichiniasis
- **53.** A 16-year-old girl had had polyuria, polydipsia for 2 months. She had lost 8 kg with a good appetite. The patient was urgently hospitalized for abdominal pain and nausea. Examination revealed glycemia at the rate of 18 mmol/l, glycosuria at the rate of 24 g/l. Insulin and infusion of isotonic solutions of sodium chloride and glucose eliminated these problems, including thirst. What is the most likely diagnosis?
- **A.** Diabetes mellitus type 1
- **B.** Diabetes mellitus type 2
- **C.** Renal glycosuria
- **D.** Diabetes insipidus
- **E.** Secondary (symptomatic) diabetes
- **54.** A boy was born at 32 weeks gestation. 2 hours after birth he developed respiratory distress. The RD severity assessed by Silverman score was 5. The respiratory disorders progressed, respiratory failure couldn't be eliminated by Martin-Bouyer CPAP (continuous posi-

tive airway pressure). Ro-gram of lungs shows reticular and nodular pattern, air bronhogram. What is the most likely cause of respiratory distress syndrome?

- **A.** Hyaline membrane disease
- **B.** Segmental atelectasis
- C. Bronchopulmonary dysplasia
- **D.** Congenital pulmonary emphysema
- **E.** Edematous hemorrhagic syndrome
- **55.** An 8-year-old child with a 3-year history of diabetes was hospitalized in hyperglycemic coma. Specify the initial dose of insulin to be administered:
- **A.** 0,1-0,2 U/kg of body weight per hour
- **B.** 0,05 U/kg of body weight per hour
- C. 0,2-0,3 U/kg of body weight per hour
- **D.** 0,3-0,4U/kg of body weight per hour
- **E.** 0,4-0,5 U/kg of body weight per hour
- **56.** A 12-year-old girl undergoes regular gastroenterological check-ups for duodenal ulcer, biliary dyskinesia. What is the recommended frequency of anti-relapse treatment?
- A. Twice a year
- **B.** Every 2 months
- **C.** Every 3 months
- **D.** Once a year
- **E.** Three times a year
- 57. A 47-year-old patient came to see a doctor on the 7th day of disease. The disease developed very fast: after the chill body temperature rose up to $40^{\circ}C$ and lasted up to 7 hours, then it dropped abruptly, which caused profuse sweat. There were three such attacks occuring once in two days. Two days ago the patient arrived from Africa. Objectively: pale skin, subicteric sclera, significantly enlarged liver and spleen. What is the cause of fever attacks in this disease?
- **A.** Erythrocytic schizogony
- **B.** Tissue schizogony
- **C.** Exotoxin of a causative agent
- **D.** Endotoxin of a causative agent
- **E.** Gametocytes
- **58.** On the 2nd day of illness a 27-year-old patient complains of unbearable headache, repeated vomiting. Objectively: the patient is in a grave condition. He is conscious but adynamic. Lies in a forced position with his head thrown back. There is no skin rash. Nuchal muscles are evidently rigid, there are Kernig's and Brudzinski's signs. t^o 39, 5^oC , Ps- 120/min, AP- 130/80 mm Hg. The leading syndrome

of this disease is caused by:

- A. Liquor hypertension
- **B.** Liquor hypotension
- **C.** Affection of the cranial nerve nuclei
- **D.** Haemorrhages into the adrenal glands
- **E.** Hyperthermy
- **59.** A 42-year-old female patient suffers from micronodular cryptogenic cirrhosis. Over the last week her condition has deteriorated: she developed convulsions, mental confusion, progressing jaundice. What study may give reasons for such aggravation?
- **A.** Determination of serum ammonia
- **B.** Determination of cholesterol ethers
- C. Determination of alpha-phetoprotein
- **D.** Determination of ALAT and ASAT
- **E.** Determination of alkaline phosphatase
- **60.** A 60-year-old patient complains of recurrent pain in the proximal interphalangeal and wrist joints, their periodic swelling and reddening that have been observed for 4 years. X-ray picture represents changes in form of osteoporosis, joint space narrowing and single usuras. What is the most likely diagnosis?
- A. Rheumatoid arthritis
- **B.** Osteoarthritis
- C. Gout
- **D.** Pseudogout
- E. Multiple myeloma
- **61.** A 28-year-old patient has been hospitalized for the pain in the epigastric region. He has a 10-year history of duodenal ulcer (DU). Recently, the pain character has changed: it became permanent, persistent, irradiating to the back. There are general weakness, dizziness, fatigue. The patient has put off weight. Objectively: HR- 68/min, AP- 120/80 mm Hg. What is most likely cause of deterioration?
- **A.** Penetration
- **B.** Haemorrhage
- **C.** Perforation of duodenal wall
- **D.** Exacerbation of duodenal ulcer
- **E.** Stenosis development
- 62. A 57-year-old male patient complains of dyspnea on exertion, heaviness in the right hypochondrium and shin edemata towards evening. Objectively: temperature 38,1°C, HR- 20/min, HR=Ps=92/min, AP- 140/90 mm Hg. There is apparent kyphoscoliosis. In the lungs single dry rales can be auscultated.

Heart sounds are muffled, rhythmic. ECG: Rv1+Sv5=15 mm. X-ray picture shows the bulging of pulmonary artery cone, right ventricle enlargement. What is the most likely cause of this condition?

- **A.** Pulmonary heart
- **B.** Atherosclerotic cardiosclerosis
- **C.** Dilatation cardiomyopathy
- **D.** Mitral stenosis
- **E.** Primary pulmonary hypertension
- **63.** A 40-year-old woman with a history of combined mitral valve disease with predominant stenosis complains of dyspnea, asthma attacks at night, heart problems. At present, she is unable to do easy housework. What is the optimal tactics of the patient treatment?
- **A.** Mitral commissurotomy
- **B.** Implantation of an artificial valve
- **C.** Antiarrhythmia therapy
- **D.** Treatment of heart failure
- **E.** Antirheumatic therapy
- **64.** A 25-year-old patient complains of having dull heart pain for the last 10 days, dyspnea on mild exertion, palpitations. The diasease developed 2 weeks ago after a respiratory infection. Objectively: acrocyanosis, AP- 90/75 mm Hg, Ps-96/min. Cardiac borders appear to be shifted to the left and right. Heart sounds are weak and have triple rhythm, there is systolic murmur at the apex. ECG showed sinus rhythm, complete left bundle branch block. What is the most likely diagnosis?
- **A.** Infectious-allergic myocarditis
- **B.** Exudative pericarditis
- **C.** Infective endocarditis
- **D.** Myocarditic cardiosclerosis
- **E.** Vegetative-vascular dystonia
- undergoes in-patient **65.** Α child treatment for staphylococcal acute destruction of the right lung. Unexpectedly he develped acute chest pain on the right, dyspnea, cyanosis. The right side of chest lags behind in the respiratory act. Percussion reveals dullness in the lower parts on the right, bandbox resonance in the upper parts. Borders of the relative cardiac dullness are shifted to the left. What complication has most likely developed?

- **A.** Right-sided pyopneumothorax
- **B.** Pleural empyema
- C. Spontaneous pneumothorax
- **D.** Exudative pleuritis
- E. Right lung abscess
- **66.** Examination of a 13-year-old girl revealed acute glomerulonephritis, nephritic syndrome at the initial stage without renal dysfunction. What is the main drug of choice for the basic therapy of this patient?
- A. Antibiotic
- B. Prednisolone
- C. Curantyl
- **D.** Heparin
- E. Saluretic
- 67. A 28-year-old patient consulted a surgeon about pain, edema and hyperemia of the left side of his face, weakness, fever up to 39°C. These manifestations has been present for three days. Objectively: there is an inflammatory infiltrate of the left nasolabial fold 4x4 cm large with a necrotic core in the center, the pronounced edema of the left side of face, moderate nuchal rigidity. What treatment is needed?
- **A.** Hospitalization, antibiotics, anticoagulants, rest
- **B.** Antibiotics, surgery under general anesthesia
- **C.** Wet-to-dry dressings with antiseptics, aspirin
- **D.** Physiotherapy, immunomodulators
- E. Antibiotics, angioprotectors, daily dressings
- **68.** A 6-year-old child complains of frequent liquid stool and vomiting. On the 2nd day of desease the child presented with inertness, temperature rise up to $38, 2^{\circ}C$, Ps- 150 bpm, scaphoid abdomen, palpatory painful sigmoid colon, defecation 10 times a day with liquid, scarce stool with mucus and streaks of green. What is a provisional diagnosis?
- **A.** Shigellosis
- **B.** Salmonellosis
- C. Escherichiosis
- **D.** Intestinal amebiasis
- **E.** Yersiniosis
- 69. A 48-year-old patient complains of having dull pain in the right lumbar region for over three years. USI shows that kidneys are of normal size, at the upper pole of the right kidney there is a fluid-containing formation up to 12 cm in di-

ameter. Excretory urograms show normal condition on the left, and the deformation of the superior renal calyces with satisfactory function on the right. What kind of disease can you think of?

- **A.** Simple cyst of the right kidney
- **B.** Multicystic kidney disease
- **C.** Multiple cysts of the right kidney
- **D.** Tumour of the right kidney
- **E.** Right hydronephrosis
- **70.** While staying in a stuffy room a 19-year-old emotionally labile girl developed severe weakness, dizziness, blackout, nausea and loss of consciousness without convulsions. Objectively: the patient is unconscious, the skin is pale, extremities are cold. AP- 90/60 mm Hg, Ps- 96/min, deficient, breathing is shallow. Pupillary and tendon reflexes are present. There are no pathological signs. What is the most likely diagnosis?
- A. Syncope
- B. Vegetovascular paroxysm
- C. Epileptic attack
- **D.** Hysterical neurosis
- **E.** Transient ischemic attack
- **71.** A 13-year-old boy complains of pain in the upper third of his left thigh, body temperature rise up to $39^{\circ}C$. There is a swelling in the upper third of thigh and inguinal fold smoothness. The extremity is in a half-bent position. Active and passive movements are not possible because of the sharp pain. What is the most likely diagnosis?
- **A.** Acute hematogenous osteomyelitis
- **B.** Acute coxitis
- C. Intermuscular phlegmon
- **D.** Osteosarcoma
- E. Brodie's disease
- **72.** A 12-year-old cild has been hit on the stomach. The patient is in moderately grave condition, has a forced position in bed. The skin is pale, Ps- 122/min. The stress on the left costal arch causes a slight pain. There are positive Weinert, Kulenkampff symptoms. Macroscopically the urine is unchanged. What is the most likely diagnosis?
- A. Spleen rupture, abdominal bleeding
- **B.** Left kidney rupture, retroperitoneal hematoma
- **C.** Rupture of the pancreas
- D. Liver rupture, abdominal bleeding
- **E.** Rupture of a hollow organ, peritonitis

- 73. A 30-year-old multigravida has been in labour for 18 hours. 2 hours ago the pushing stage began. Fetal heart rate is clear, rhythmic, 136/min. Vaginal examination reveals the completecervical dilatation, the fetal head in the pelvic outlet plane. Sagittal suture in line with obstetric conjugate, the occipital fontanel is near the pubis. The patient has been diagnosed with primary uterine inertia. What is the further tactics of labour management?
- A. Outlet forceps
- **B.** Labour stimulation
- **C.** Cesarean section
- **D.** Skin-head Ivanov's forceps
- **E.** Vacuum extraction of the fetus
- **74.** A patient complains of frequent, bulky, frothy stools with greenish mucus, cramping pain in the umbilical region, abdominal murmur, body temperature at the rate of 39°C. The patient associates the disease with consumption of soft-boiled eggs. What is the most likely pathogen?
- A. Salmonella
- B. Yersinia
- C. Shigella
- **D.** Enteropathogenic E.Coli
- E. Vibrio cholerae El Tor
- 75. X-ray picture of chest shows a density and an abrupt decrease in the upper lobe of the right lung. The middle and lower lobe of the right lung exhibit significant pneumatization. The right pulmonary hilum comes up to the dense lobe. In the upper and middle parts of the left pulmonary field there are multiple focal shadows. In the basal region of the left pulmonary field there are clear outlines of two annular shadows with quite thick and irregular walls. What disease is this X-ray pattern typical for?
- **A.** Fibro-cavernous pulmonary tuberculosis
- **B.** Atelectasis of the right upper lobe
- **C.** Abscessing pneumonia
- **D.** Peripheral cancer
- E. Pancoast tumour
- **76.** A patient complains of impaired far vision. Previously his eyes often turned red and hurt. Objectively: the eyes are not irritated, the cornea is transparent, anterior chambers are median deep, their liquid is transparent. The iris of the right eye has not changed in colour, its pattern is unchanged. The pupil is of irregular shape, scalloped. Biomicroscopy of the crystalline lens reveals the areas of opacity and

vacuoles. Make a diagnosis:

- **A.** Complicated cataract of the right eye
- **B.** Senile cataract of the right eye
- **C.** Diabetic cataract of the right eye
- **D.** Tetanic cataract of the right eye
- **E.** Radiation cataract of the right eye
- 77. During her first visit to the prenatal clinic a pregnant woman was referred to other doctors for mandatory consultation. The patient was referred to:
- **A.** Internist, dentist
- **B.** Internist, surgeon
- **C.** Dentist, surgeon
- **D.** Surgeon, oculist
- E. Therapist, oculist
- **78.** A 59-year-old male complains of heart pain, cough, fever up to $38^{\circ}C$. Three weeks ago he suffered a heart attack. Objectively: Ps- 86/min, rhythmic, blood pressure 110/70 mm Hg. Auscultation reveals pericardial rub, rales beneath the shoulder blade. Radiography reveals no pathology. Blood count: WBCs $10 \cdot 10^{9}$ /l, ESR 35 mm/h. ECG shows no dynamics. It would be most reasonable to administer the drugs of the following pharmaceutical group:
- **A.** Glucocorticoids
- **B.** Antibiotics
- C. Direct anticoagulants
- **D.** Nitrates and nitrites
- **E.** Fibrinolytics
- **79.** A 40-year-old female patient complains of headache, dizziness, muscle weakness, occasional cramps in the extremities. She has been taking antihypertensive medications for 10 years. AP- 180/100 mm Hg. Blood potassium 1,8 millimole/l, sodium 4,8 millimole/l. In urine: alkaline reaction, the relative density 1012, protein and sugar are not found, WBCs 3-4 in the field of vision, RBCs 1-2 in the field of vision. Conn's syndrome is suspected. Which drug should be chosen for the treatment of arterial hypertension?
- **A.** Spironolactone
- **B.** Propanolol
- **C.** Enalapril
- **D.** Hydrochlorothiazide
- E. Clonidine
- **80.** A 27-year-old patient complains of nasal haemorrhages, multiple bruises on the anterior surface of the trunk and extremities, sudden weakness. In blood:

Hb- 74 g/l, reticulocytes - 16%, RBCs - $2, 5 \cdot 10^{12}$ /l, platelets - $30 \cdot 10^{9}$ /l, ESR- 25 mm/h. What is the most effective measure for the treatment of thrombocytopenia?

A. Splenectomy

B. Iron preparations

C. Hemotransfusion

D. Cytostatics

E. Vitamin B_{12}

81. After lifting a load a patient felt undurable pain in the loin. He was diagnosed with acute lumbosacral radiculitis. Which of the following is contraindicated for this patient?

A. Warming procedures

B. Dehydrating drugs

C. Analgetics

D. Vitamins of B group

E. Intravenous injection of aminophylline

82. The institutions which take part in medical examinations can be prevention and treatment facilities, medical board of Ministry of Defense, medical board of Ministry of Home Affairs, medico-social expert commissions, forensic medical boards etc. What institutions are responsible for temporary disability examination?

A. Prevention and treatment facilities

B. Sanitary-and-prophylactic institutions

C. Medico-social expert commissions

D. Medical boards of Ministry of Defense

E. Medical boards of Ministry of Home Affairs

83. While lifting a heavy load a 39-year-old patient suddenly felt a severe headache, pain in the interscapular region, and started vomiting. Objectively: the pulse is rhythmic, 60/min, AP- 180/100 mm Hg. The patient is agitated. He presents with photophobia, hyperacusis. There are positive Kernig's and Brudzinski's signs on both sides. In blood: WBCs - 10 · 10⁹/l. CSF is bloody, cytosis is 240/3. What is the most likely diagnosis?

A. Subarachnoid haemorrhage

B. Sympathoadrenal crisis

C. Acute hypertonic encephalopathy

D. Meningococcal meningitis

E. Ischemic stroke

84. A 45-year-old patient, a sailor, was hospitalized on the 2nd day of the disease. A week ago he returned from India. Complains of body temperature of $41^{\circ}C$, severe headache, dyspnea, cough with frothy rusty sputum. Objectively:

the patient is pale, mucous membranes are cyanotic, breathing rate is 24/min, tachycardia is present. In lungs: diminished breath sounds, moist rales over both lungs, crepitation. What is the most likely diagnosis?

A. Pneumonic plaque

B. Miliary tuberculosis

C. Influenza

D. Ornithosis

E. Sepsis

85. An 8-month-old baby has decreased appetite, pale skin, enlarged right side of abdomen. Palpation the right side of abdomen reveals a dense elastic tumour-like formation 10x7 cm large. There is a positive ballotement sign. What is the most likely diagnosis?

A. Nephroblastoma (Wilms' tumour)

B. Liver tumour

C. Congenital hydronephrosis

D. Colon pathology

E. Intestinal tumour

86. An infant is 3 weeks old. Since birth there has been observed periodical vomiting within a few minutes after feeding. The amount of vomitive masses does not exceed that of previous feeding. The infant has age-appropriate body weight. What is the most likely cause of this symptom?

A. Pylorospasm

B. Esophageal chalasia

C. Adrenogenital syndrome

D. Pyloristenosis

E. Esophageal achalasia

87. A city somatic hospital with 300 beds consists of the main building which houses the therapeutic and surgical departments. Several separate buildings house the maternity, pediatric and radiologic departments that are connected to the main building by underground walkways and above-ground covered skybridges. Specify the building system of the hospital:

A. Central-unit

B. Centralized

C. Decentralized

D. Free

E. Combined

88. A 13-year-old girl complains of fever up to $37,4^{\circ}C$ during the last 2 months after recovering from ARVI. Objectively: malnutrition, diffuse grade II enlargement

of the thyroid gland feeling dense on palpation, exophthalmos, tachycardia. What kind of pathological syndrome is it?

- **A.** Thyrotoxicosis
- **B.** Hypothyroidism
- C. Hypoparathyroidism
- **D.** Hyperparathyroidism
- E. Thymomegaly
- 89. A 53-year-old female patient complains of cardiac pain and rhythm intermissions. She has experienced these presentations since childhood. The patient's father had a history of cardiac arrhythmias. Objectively: the patient is in grave condition, Ps- 220 bpm, AP- 80/60 mm Hg. ECG results: heart rate $215/\min$, extension and deformation of QRS complex accompanied by atrioventricular dissociation; positive P wave. Some time later heart rate reduced down to $45/\min$, there was a complete dissociation of P wave and QRST complex. Which of the following will be the most effective treatment?
- **A.** Implantation of the artificial pacemaker
- **B.** β -adrenoreceptor blocking agents
- C. Cholinolytics
- **D.** Calcium antagonists
- E. Cardiac glycosides
- **90.** On the 2nd day of life a full-term boy developed mild jaundice of skin and mucous membranes, the general condition of the child is normal. Blood test results: indirect hyperbilirubinemia 120 mmol/l. The child's blood group is A(II) Rh(+), his mother's blood group B(III) Rh(+). What is the doctor's tactics of choice?
- **A.** No drug therapy
- **B.** Treatment with enterosorbents
- **C.** Treatment with prednisolone
- **D.** Treatment with cholekinetics
- E. Blood transfusion
- 91. A 49-year-old patient complains of dyspnea, cough. There are no sputum discharges. He has repeatedly used salbutamol and intal but with no effect. Objectively: he is only able to sit while leaning on the table. Cyanosis of face, acrocyanosis are present. Breathing is shallow, laboured, in some parts it cannot be auscultated; there are diffuse rales, expiration is significantly prolonged. Heart sounds are muffled, tachycardia is present. Ps 112/min, AP- 110/70 mm Hg. Liver is located near the costal arch. There are no peripheral edemata. What is your

provisional diagnosis?

- A. Status asthmaticus
- **B.** Chronic obstructive bronchitis
- C. Bronchiale asthma, moderate gravity
- **D.** Foreign object aspiration
- **E.** Cardiac asthma
- **92.** Blood typing resulted in positive isohemagglutination reaction with standard sera of A(II) and B(III) groups and negative reaction with sera of O(I) and AB(IV) groups. What is this result indicative of?
- **A.** Faulty standard sera
- **B.** The first blood group
- **C.** The second blood group
- **D.** The third blood group
- **E.** The fourth blood group
- **93.** A patient complains of jerking, throbbing pain in the III finger on the right hand. The patient associates these pain onsets with an injury by a nail. The finger skin is hyperemic and tense, palpation with a bulbous-end probe reveals the most painful area. What is the provisional diagnosis?
- **A.** Subcutaneous felon
- **B.** Pandactylitis
- C. Bone felon
- **D.** Paronvchia
- E. Articular felon
- **94.** Sanitary examination of the burns unit for adults revealed that 4-bed wards had an area of 28 m². What is the minimally required ward area for this department?
- **A.** 40 m^2
- **B.** 24 m^2
- $C. 28 \text{ m}^2$
- **D.** 30 m^2
- **E.** 52 m^2
- **95.** A patient presented to a hospital with a carbuncle of the upper lip. The body temperature is 39°C. There is a pronounced edema of the upper lip and eyelids. What is the surgeon's tactics of choice?
- **A.** Hospitalize in the surgical unit
- **B.** Administer out-patient course of antibiotics
- **C.** Disclose the carbuncle and administer out-patient treatment
- **D.** Administer physiotherapy
- **E.** Disclose the carbuncle and administer antibiotics

- **96.** From urine of a 14-year-old boy with the exacerbation of secondary obstructive pyelonephritis Pseudomonas aeruginosa was isolated with a titer of 1000000 microbes per 1 ml. Which antibiotic is most advisable to be administered in this case?
- **A.** Ciprofloxacin
- **B.** Ampicillin
- **C.** Cefazolinum
- **D.** Azithromycin
- E. Chloramphenicol
- 97. A 62-year-old male patient complains of intense pain in the left leg that suddenly arose three hours before, leg numbness and coldness. During the year there has been pain in the leg while walking, hypersensitivity to cooling. Objectively: the left foot and shin have marbled skin, subcutaneous veins are collapsed. The foot is cold, active movements of the foot and toes are preserved. Pulse is present only on the femoral artery. There is rough systolic murmur above the artery. Make a provisional diagnosis:
- **A.** Acute occlusion of the left femoral artery
- **B.** Occlusive disease
- **C.** Stenosis of the left popliteal artery
- **D.** Acute thrombophlebitis
- **E.** Acute arterial thrombosis ileofemoralny
- 98. A 28-year-old patient complains of profuse, painful and prolonged menstruation. Before and after the menstrual period there is spotting lasting for 4-6 days. Vaginal examination reveals that the uterus is enlarged corresponding to 5-6 weeks of pregnancy, has limited mobility, is painful. Appendages are not palpable. On the 15th day of the menstrual cycle, the uterus was of normal size, painless. On account of stated problems and objective examination the patient has been diagnosed with internal endometriosis. Which drug should be used for the efective treatment of this patient?
- **A.** Duphaston
- **B.** Synoestrolum
- C. Parlodel
- D. Ovidon
- E. -
- **99.** A 24-year-old female patient complains of pain in the right hypochondrium that is getting worse after taking meals; nausea, fever up to $37,7^{\circ}C$, icteric skin, pain in the large joints. These presentations have been observed for 8 months. Objectively: hepatosplenomegaly. Blood

test results: ESR- 47 mm/h, total bilirubin - 86,1 mmol/l, direct bilirubin - 42,3 mmol/l. Total protein - 62 g/l, albumins - 40%, globulins - 60%, gamma globulins - 38%. Viral hepatitis markers were not detected. The antibodies to smooth muscle cells are present. On ultrasound the portal vein diameter was of 1 cm. What is the most likely diagnosis?

- **A.** Autoimmune hepatitis
- **B.** Primary biliary cirrhosis
- **C.** Gilbert's syndrome
- **D.** Cholangiogenic hepatitis
- E. Hemachromatosis
- **100.** A patient is 60 years old, retired, worked as deputy director of a research institute. Behavioural changes appeared 2 years ago after the death of her husband: she stopped looking after herself and leaving the house; then she refused to clean the apartment and cook. Mental status: temporal disorientation. The patient does not understand many of the questions, is confused; does not know how to cook soup or fasten a button. Her speech is characterized by stumbling and logoclonia. She does not recognize doctors, fellow patients. She cries a lot but can not explain the reason for tears. What is the mechanism of this pathology?
- **A.** Atrophy of the cerebral cortex
- **B.** Atherosclerotic changes in cerebral vessels
- **C.** Serotonin deficiency
- **D.** Impaired conversion of dopamine to noradrenaline
- E. Disorder of melatonin metabolism
- **101.** A 70-year-old patient with a strangulated inguinal hernia called a therapist in. The strangulation took place 10 hours ago. There are signs of intestinal obstruction. The skin over the herniation is hyperemic. What is the tactics of choice?
- **A.** Emergency hospitalization to a surgical hospital
- **B.** Referral to a surgeon
- **C.** Cold to the hernia, analgesics, antibiotics
- **D.** Reduction of hernia after a narcotic injection
- **E.** Reduction of hernia
- **102.** An employee was on a business trip to another city, where he fell ill and was hospitalized. The sick leave certificate can be issued:

A. With the permission of the head doctor of the city hospital

B. With the permission of the deputy head doctor after the disability examination

C. With the permission of the deputy chief doctor in charge of medical work

D. By doctor in charge and chief of department

E. By doctor in charge

- 103. A 14-year-old boy with a history of chronic tonsillitis and sinusitis has developed a feeling of heart irregularities and additional pulse. HR- 83/min. ECG results: regular impulses with no visible P wave that occur every two sinus contractions, QRS complex is dramatically deformed and prolonged to over 0,11 s, T wave is discordant followed by a complete compensatory pause. Specify the arrhythmia type:
- A. Trigeminal extrasystole
- **B.** Bigeminal extrasystole
- C. Partial AV-blockade
- **D.** Complete AV-block
- **E.** Left bundle branch block
- 104. An 8-year-old girl periodically has sudden short-term heart pain, sensation of chest compression, epigastric pain, dizziness, vomiting. Objectively: the patient is pale, respiratory rate 40/min, jugular pulse is present. Ps- 185 bpm, of poor volume. AP- 75/40 mm Hg. ECG taken during an attack shows ectopic P waves, QRS wave is not deformed. At the end of an attack a compensatory pause is observed. The most likely cause of the attack is:
- A. Paroxysmal atrial tachycardia
- **B.** Sinus tachycardia
- **C.** Paroxysmal ventricular tachycardia
- **D.** Complete AV-block
- **E.** Atrial fibrillation
- **105.** A 45-year-old patient with acute abscess of the left lung has suddenly developed acute chest pain and dyspnea while coughing, tachycardia has increased. The control Ro-gram shows collapsed left lung, the air in the left pleural cavity and a horizontal fluid level. What is the mechanism of this complication?
- **A.** Abscess burst into the pleural cavity
- **B.** Bullae rupture of the left lung
- C. Inflammation spread to the visceral pleura
- **D.** Atelectasis of the left lung
- **E.** Acute cardiovascular insufficiency

- 106. Examination of a 38-year-old patient who had been hit with a blunt object on the left side of chest revealed a fracture of the X rib with fragments displacement, parietal pneumothorax. The patient complains of pain in the left subcostal area. Objectively: the patient is pale, AP- 80/40 mm Hg, Ps- 138/min, of poor volume. USI reveals fluid in the left abdomen. Splenic rupture is present. What treatment tactics should be chosen?
- **A.** Drainage of the left pleural cavity followed by laparotomy
- **B.** Immediate upper median laparotomy followed by drainage of the left pleural cavity
- **C.** Immediate laparotomy and alcoholnovocaine block of the X rib
- **D.** Anti-schock actions followed by laparotomy after the arterial pressure rise **E.** Left-sided thoracotomy immediately followed by laparotomy
- **107.** A baby is 3 months old. The mother consulted a pediatrician about lack of breast milk. After several test weighings it was found that the child had to receive supplementary feeding. What is the optimal milk formula for this child?
- A. Malysh
- **B.** Milk formula № 2
- **C.** Milk formula № 3
- **D.** Whole cow's milk
- E. Malutka
- **108.** Examination of a newborn revealed skin redness that appeared immediately after birth and reached the maximum intensity on the second day of life. What is your provisional diagnosis?
- **A.** Simple erythema
- **B.** Toxic erythema
- **C.** Transient erythema
- **D.** Erythema nodosum
- E. Annular erythema
- **109.** A 27-year-old sexually active female complains of numerous vesicles on the right sex lip, itch and burning. Eruptions regularly turn up before menstruation and disappear 8-10 days later. What is the most likely diagnosis?
- A. Herpes simplex virus
- **B.** Bartholinitis
- **C.** Primary syphilis
- **D.** Cytomegalovirus infection
- **E.** Genital condylomata
- 110. A 38-year-old patient has suddenly

developed pain in the left side of his chest, suffocation. Objectively: moderately grave condition, Ps- 100/min, AP- 90/60 mm Hg, breath sounds on the left cannot be auscultated. Chest radiography shows the collapse of the left lung up to 1/2. What kind of treatment should be administered?

- **A.** Passive thoracostomy
- **B.** Rest, resolution therapy
- C. Pleural puncture
- **D.** Operative therapy
- **E.** Active thoracostomy
- 111. A 40 week pregnant secundipara is 28 years old. Contractions are very active. Retraction ring is at the level of navel, the uterus is hypertonic, in form of hourglass. On auscultation the fetal heart sounds are dull, heart rate is 100/min. AP of the parturient woman is 130/80 mm Hg. What is the most likely diagnosis?
- A. RIisk of hysterorrhexis
- **B.** Mazolysis
- C. Disturbed labour
- **D.** Complete hysterorrhexis
- **E.** Attack of eclampsia
- **112.** A 10-year-old patient has a history of mild bronchial asthma. During a regular check-up the patient should be recommended:
- **A.** To avoid allergenic food
- **B.** To avoid body tempering procedures
- **C.** Not to go in for sports
- **D.** To avoid spa treatment
- **E.** Not to go to the seaside
- 113. A 26-year-old patient with left lower lobe pneumonia experiences an acute chest pain on the left during coughing. Objectively: diffuse cyanosis, extension of the left side of chest. Percussion reveals high tympanitis. Auscultation reveals no respiratory murmurs above the left side of chest. There is a deviation of the right cardiac border towards the midclavicular line. What examination will be the most informative?
- A. X-Ray
- **B.** Bronchoscopy
- **C.** Bronchography
- **D.** Pneumotachometry
- E. Spirography
- **114.** A baby was born by a young smoker. The labour was complicated by uterine inertia, difficult delivery of the baby's head and shoulders. The baby's Apgar

score was 4. Which of the following is a risk factor for a spinal cord injury?

- **A.** Difficult delivery of the head and shoulders
- **B.** Young age of the mother
- C. Pernicious habits
- **D.** Uterine inertia
- E. Chronic hypoxia
- 115. A 10-year-old child has been admitted to a hospital with a closed craniocerebral injury with suspected cerebral edema. The patient is in grave condition, unconscious. The dyspnea, tachycardia, hypertension are present. Muscle tone is increased, there is nystagmus, pupillary and oculomotor reactions are disturbed. The mandatory component of intensive care is dehydration. What diuretic is adequate in this case?
- A. Furosemide
- **B.** Mannitol
- C. Hydrochlorthiazide
- **D.** Spironolactone
- E. Moduretic
- **116.** A 57-year-old patient taken to the surgical department by ambulance has been provisionally diagnosed with acute intestinal obstruction. Acute pancreatitis is suspected. What is the most informative method of study to verify the diagnosis?
- A. Plan radiography of stomach
- **B.** Biochemical blood analysis
- **C.** Complete blood count and clinical urinalysis
- **D.** Fibrogastroduodenoscopy
- E. Ultrasound
- 117. After myocardial infarction, a 50-year-old patient had an attack of asthma. Objectively: bubbling breathing with frequency of 32/min, cough with a lot of pink frothy sputum, acrocyanosis, swelling of the neck veins. Ps- 108/min, AP- 150/100 mm Hg. Heart sounds are muffled. Mixed moist rales can be auscultated above the entire lung surface. What drug would be most effective in this situation?
- **A.** Nitroglycerin intravenously
- **B.** Pentamin intravenously
- **C.** Strophanthin intravenously
- **D.** Dopamine intravenously
- **E.** Aminophylline intravenously
- **118.** A baby born after fast labour has palsy of hand muscles. Grasp reflex is absent, as well as hand-to-mouth reflex.

Hand sensitivity is absent. What is the most likely diagnosis?

- A. Dejerine-Klumpke palsy
- **B.** Duchenne-Erb's palsy
- **C.** Total lesion of the brachial plexus
- **D.** Muscle paresis
- **E.** Bernard-Horner syndrome
- **119.** Against the background of angina a patient has developed pain in tubular bones. Examination revealed generalized enlargement of lymph nodes, hepatolienal syndrome, sternalgia. In blood: RBCs $3, 6 \cdot 10^{12}$ /l, Hb- 87 g/l, thrombocytes $45 \cdot 10^{9}$ /l, WBCs $13 \cdot 10^{9}$ /l, blasts 87%, stab neutrophils 1%, segmented neutrophils 7%, lymphocytes 5%, ESR 55 mm/h. What is the most likely diagnosis?
- A. Acute leukemia
- B. Erythremia
- C. Chronic lymphocytic leukemia
- **D.** Chronic myeloid leukemia
- E. Multiple myeloma
- **120.** In order to reduce weed growth on agricultural land, some herbicides have been used for a long time. In terms of environmental stability these herbicides are rated as stable. Specify the most likely route of their entry into the human body:
- **A.** Soil-plants-humans
- **B.** Soil-microorganisms-humans
- **C.** Soil-animals-humans
- **D.** Soil-protozoa-humans
- E. Soil-insects-humans
- **121.** A selective population research study was aimed at exploring the effect of air emissions from a metallurgical plant on the obstructive bronchitis morbidity in a city. The calculated correlation coefficient was +0,79. Evaluate the strength and direction of the relationship:
- **A.** Direct, strong
- **B.** Inverse, strong
- **C.** Direct, average
- **D.** Inverse, average
- E. -
- **122.** A general practitioner visited a 2-year-old child and diagnosed him with measles. The child attends a nursery, has a 5-year-old sister. What document must be filled in for the effective antiepidemic measures in the given health locality?

- **A.** Emergency notification on infectious disease (form Nolemode 058/o)
- **B.** Sick child care certificate
- **C.** Infant's record (report form № 112/o)
- **D.** House call record (form № 031/o)
- E. Child care sick leave
- **123.** Hygienic expertise of a sample taken from the batch of grain revealed that 2% of grains were infected with microscopic Fusarium fungi. On the ground of laboratory analyses this batch of grain should be:
- **A.** Sold without restrictions
- **B.** Tested for toxicity
- **C.** Used for forage production
- **D.** Used for ethanol production
- E. Destroyed
- **124.** Examination of a 43-year-old man objectively revealed pallor of skin and mucous membranes, loss of tongue papillae, transverse striation of fingernails, cracks in the mouth corners, tachycardia. Blood test results: Hb- 90 g/l, anisocytosis, poikilocytosis. The most likely causative agent of this state is inadequate intake of:
- **A.** Iron
- **B.** Copper
- C. Zinc
- **D.** Magnesium
- E. Selene
- **125.** Factory's sectorial doctor chooses a group of chronically ill people. He takes into account the duration of etiologically related cases with a temporary disability over the last year in each of the workers. The employees will fall into this group if the duration is:
- **A.** 40 days or more
- **B.** 60 days or more
- C. 20 days or more
- **D.** 30 days or more
- E. 10 days or more
- **126.** 6 people live in a modern flat with the total area of 60 m². There are TV-video equipment, radios, microwave ovens, computer. The residents of the flat complain of bad health, occasional headaches, arrhythmia, conjunctivitis. What is the most likely cause of this condition?

- A. Electromagnetic fields
- **B.** Anthropotoxins
- **C.** Carbon dioxide
- **D.** Tetrachlor plumbum
- **E.** Formaldehyde
- **127.** A man abused alcohol, drank away the property and wages thus getting himself, his wife and two underage children into deep financial problems. He was registered in a local drug abuse clinic. His wife asked a family doctor, what kind of petition she could file in court:
- **A.** On restriction of her husband's civil capacity
- **B.** On recognition of her husband's incapacity
- **C.** On recognition of her husband's partial incapacity
- **D.** On recognition of her husband's incompetence
- **E.** On recognition of her husband's disability
- **128.** A child is 12 years old. He complains of a dull aching pain in the epigastrium and right hypochondrium, that is getting worse after taking fatty or fried food, headache, weakness, nausea, lowgrade fever. Abdominal palpation reveals a marked resistance of muscles in the right hypochondrium, positive Kerr's, Ortner's, Murphy's symptoms. What is the most likely diagnosis?
- A. Chronic cholecystitis
- **B.** Acute appendicitis
- **C.** Viral hepatitis
- **D.** Acute gastritis
- **E.** Acute pancreatitis
- **129.** A 3-month-old girl presents with rhinitis, dyspnea, dry cough. These manifestations has been observed for two days. Objectively: the child has pale skin, acrocyanosis, shallow respiration at the rate of 80/min. Percussion reveals handbox resonance over the whole surface of lungs, massive fine rales. What is the most likely diagnosis?
- **A.** Acute bronchiolitis
- B. Pneumonia
- C. Mucoviscidosis
- **D.** Foreign body of the airway
- **E.** Acute bronchitis
- **130.** A patient had 4 generalized convulsive seizures within a day. Between the seizures the patient did not maintain clear consciousness (was in a coma or stupor). Specify his state:

- **A.** Status epilepticus
- **B.** Frequent generalized seizures
- **C.** Frequent jacksonian seizures
- **D.** Hysterical attacks
- **E.** Frequent complex partial seizures
- 131. A 45-year-old patient complains of fever up to $40^{o}C$, general weakness, headache and spasmodic contraction of muscles in the region of a shinwound. The patient got injured five days ago when tilling soil and didn't seek medical attention. What kind of wound infection can be suspected?
- **A.** Tetanus
- **B.** Anthrax
- C. Erysipelas
- **D.** Gram-positive
- **E.** Gram-negative
- 132. A 60 year-old female has been suffering weakness, dizziness, fatigue over the last year. Recently she has also developed dyspnea, paresthesia. Objectively: skin and mucous membranes are pale and slightly icteric. The tongue is smooth due to the loss of lingual papillae. Liver and spleen are located at the costal margin. Blood count: Hb- 70 g/l, RBCs 1, 7·10¹²/l, colour index 1,2, macrocytes. Administer the patient a pathogenetically justified drug:
- **A.** Vitamin B_{12}
- **B.** Vitamin B_6
- **C.** Ascorbic acid
- **D.** Iron preparations
- **E.** Vitamin B_1
- 133. Analysis of organization of medical care in a regional centre has shown that every year about 12% of patients receive inpatient care for diseases that don't require round-the-clock monitoring and intensive care. What are the most appropriate organizational changes required to address this problem?
- **A.** Development of medical care forms replacing the in-patient care
- **B.** Changes to the statute of outpatient clinics
- C. Development of primary care
- **D.** Restructuring of specialized care
- **E.** Upgrading of hospital facilities
- **134.** A newborn (mother's I pregnancy) weighing 3500 g presents with jaundice, lethargy, reduced reflexes. Objectively: second grade jaundice of skin with saffron tint, liver +2cm, spleen +1 cm. Urine

and feces are yellow. Blood count: Hb- 100 g/l, RBCs - 3, $2 \cdot 10^{12}$ /l, WBCs - 18, $7 \cdot 10^{9}$ /l, mother's blood type - 0(I) Rh(+), baby's blood type - A(II) Rh(-), bilirubin - 170 mmol/l, indirect fraction. ALT, AST rates are normal. What disease is the child most likely to have?

- **A.** Hemolytic disease of newborn, AB0-conflict
- **B.** Perinatal hepatitis
- C. Hemolytic disease of newborn, Rh-conflict
- **D.** Biliary atresia
- E. Physiologic jaundice
- a statistical research of the disease outcomes in two groups of patients (those registered with dispensary departments and unregistered ones), depending on age and level of hygiene. What type of statistical tables would be most suitable for profound analysis of the interrelation between the above-mentioned variables?
- **A.** Cross tabulation
- B. Analytical
- C. Group
- **D.** Simple
- **E.** Developing
- 136. A 57-year-old female complains of having a sensation of esophageal compresion, palpitation, difficult breathing during eating solid food, occasional vomiting with a full mouth, "wet pillow"sign at night for the last 6 months. Objectively: body tempearture 39°C, height 168 cm, weight 72 kg, Ps- 76/min, AP- 120/80 mm Hg. X-ray revealed a considerable dilation of esophagus and its constriction in the cardial part. What pathology is most likely to have caused dysphagia in this patient?
- **A.** Achalasia cardiae
- **B.** Primary esophagism
- C. Hiatal hernia
- **D.** Esophageal carcinoma
- **E.** Reflux esophagitis
- **137.** A 37-year-old patient complains of acute pain in the region of genitals, swelling of the labia, pain when walking. Objectively: body temperature is 38,7°C, Ps- 98/min. In the interior of the right labia there is a dense, painful tumour-like formation 5,0x4,5 cm large, the skin and mucous membrane of genitals is hyperemic, there are profuse foul-smelling discharges. What is the most li-

kely diagnosis?

- **A.** Acute bartholinitis
- **B.** Labial furuncle
- **C.** Acute vulvovaginitis
- **D.** Bartholin gland cyst
- **E.** Carcinoma of vulva
- 138. A 28-year-old female patient has been admitted to a hospital. She states to be ill for 12 years. On examination she has been diagnosed with bronchiectasis with affection of the left lower lobe of lung. What is the optimal treatment tactics for this patient?
- **A.** Left lower lobectomy
- **B.** Left-sided pneumoectomy
- **C.** Antibiotic therpy
- **D.** Active drainage of the left pleural cavity
- **E.** Bronchopulmonary lavage
- 139. 4 weeks after myocardial infarction a 56-year-old patient developed acute heart pain, pronounced dyspnea. Objectively: the patient's condition is extremely grave, there is marked cyanosis of face, swelling and throbbing of neck veins, peripheral pulse is absent, the carotid artery pulse is rhythmic, 130 bpm, AP is 60/20 mm Hg. Auscultation of heart reveals extremely muffled sounds, percussion reveals heart border extension in both directions. What is the optimal treatment tactis for this patient?
- **A.** Pericardiocentesis and immediate thoracotomy
- **B.** Oxygen inhalation
- **C.** Puncture of the pleural cavity on the left **D.** Conservative treatment, infusion of adrenomimetics
- **E.** Pleural cavity drainage
- **140.** A 15-year-old boy feels pain in the region of the left knee joint. Objectively: the soft tissues in the affected region are infiltrated, the joint function is limited. Radiography reveals a focus of bone destruction in the distal metaepiphysial segment of the left femur. The destruction is accompanied by periosteal detachment and a defect formed within cortex of Codman triangle bone. X-ray of chest shows multiple microfocal metastases. What is the most likely pathology?
- A. Osteogenic sarcoma
- **B.** Fibrosarcoma
- **C.** Chondrosarcoma
- **D.** Ewing's sarcoma
- **E.** Juxtacortical sarcoma

- **141.** On the first day after a surgery for diffuse toxic goiter a patient developed difficulty breathing, cold sweats, weakness. Objectively: pale skin, body temperature 38, 5°C, RR 25/min, Ps- 110/min, AP-90/60 mm Hg. What early postoperative complication occurred in the patient?
- **A.** Thyrotoxic crisis
- **B.** Hypothyroid crisis
- **C.** Postoperative tetany
- **D.** Acute thyroiditis
- E. Compression of the trachea by the hematoma
- **142.** A 49-year-old patient consulted a doctor about difficult swallowing, voice hoarseness, weight loss. These symptoms have been gradually progressing for the last 3 months. Objectively: the patient is exhausted, there are enlarged supraclavicular lymph nodes. Esophagoscopy revealed no oesophageal pathology. Which of the following studies is most appropriate in this case?
- **A.** Computed tomography of chest, mediastinum
- **B.** X-ray of lungs
- C. Multiplanar imaging of esophagus
- **D.** Radioisotope investigation of chest
- E. Ultrasound investigation of mediastinum
- 143. A 45-year-old female patient complaining of general weakness, nausea and vomiting hass been delivered to a hospital by the ambulance. Recently there has been a lack of appetite, weight loss. Objectively: hyperpigmentation of skin, blood pressure at the rate of 70/45 mm Hg, bradycardia. Additional studies revealed the reduced concentration of aldosterone and cortisol in blood, decreased excretion of 17-ketosteroids and 17-oxyketosteroids in the urine, hyponatremia, chloropenia, hypokalemia. What therapeutic measures are required?
- **A.** To administer glucocorticoids, mineralocorticoids, and a diet with a high content of cooking salt
- **B.** To prescribe a diet with a high content of cooking salt
- **C.** To administer prednisolone
- **D.** To administer aldosterone
- **E.** To administer insulin
- **144.** A 23-year-old female patient has a mental disease since the age of 18, the course of disease has no remission periods. At a hospital the patient mostly presents with non-purposeful foolish exci-

tation: she makes stereotypic grimaces, exposed, masturbating in front of a loud laugh, repeating the stereotypical abusive shouts. The patient should be assigned:

- **A.** Neuroleptics
- **B.** Antidepressants
- C. Tranquilizers
- **D.** Nootropics
- **E.** Mood stabilizers
- **145.** A young woman with seborrhea adiposa has numerous non-itchy light brown and white spots with clear outlines and defurfuration on the torso and shoulder skin. What is the provisional diagnosis?
- **A.** Pityriasis versicolor (scaly skin disease)
- **B.** Tinea corporis
- C. Seborrheic dermatitis
- **D.** Pityriasis rosea
- E. Vitiligo
- **146.** 10 days after birth a newborn developed a sudden fever up to $38, 1^{\circ}C$. Objectively: the skin in the region of navel, abdomen and chest is erythematous; there are multiple peasized blisters with no infiltration at the base; single bright red moist erosions with epidermal fragments on the periphery. What is your provisional diagnosis?
- **A.** Epidemic pemphigus of newborn
- **B.** Syphilitic pemphigus
- C. Streptococcal impetigo
- **D.** Vulgar impetigo
- **E.** Atopic dermatitis
- **147.** An emergency physician arrived to provide medical care for a hangman taken out of the loop by his relatives. The doctor revealed no pulse in the carotid arteries, absence of consciousness, spontaneous breathing and corneal reflexes; cadaver spots on the back and posterior parts of extremities. A person can be declared dead if the following sign is present:
- **A.** Cadaver spots
- **B.** Absence of spontaneous breathing
- **C.** Absence of corneal reflexes
- **D.** Pulselessness
- E. Unconsciousness
- 148. A 40-year-old patient is registered in a narcological dispensary. Somatically: skin is dramatically hyperemic, sclera are injected, hyperhidrosis is present. AP-140/100 mm Hg, heart rate 100/min. Mental state: autopsychic orientation is intact, allopsychic orientation is distorted. The patient presents with motor anxiety.

There is a look of fear on his face. He refuses to talk about his problems and asks to release him immediately, because he "may be killed." This state developed a day after a regular drinking bout. What is your provisional diagnosis?

A. Delirium tremens

B. Organic delirium

C. Paranoia

D. Alcoholic hallucinosis

E. Alcoholic paranoid

149. A 35-year-old female patient has gained 20 kg weight within a year with the normal diet. She complains of chill, sleepiness, shortness of breath. The patient's mother and sister are corpulent. Objectively: height - 160 cm, weight - 92 kg, BMI - 35,9. Obesity is uniform, there are no striae. The face is amimic. The skin is dry. The tongue is thickened. Heart sounds are muffled. HR- 56/min, AP-140/100 mm Hg. The patient has constipations, amenorrhea for 5 months. TSH-28 mkME/l (normal rate - 0,32-5). Craniogram shows no pathology. What is the etiology of obesity?

A. Hypothyroid

B. Hypo-ovarian

C. Hypothalamic-pituitary

D. Alimentary and constitutive

E. Hypercorticoid

150. A 26-year-old patient consulted a doctor abut sore throat, fever up to $38, 2^{\circ}C$. A week ago, the patient had angina, didn't follow medical recommendations. On examination, the patient had forced position of his head, trismus of chewing muscles. Left peritonsillar region is markedly hyperemic, swollen. What is the provisional diagnosis?

A. Left-sided peritonsillar abscess

B. Meningitis

C. Phlegmonous angina

D. Diphtheria of the pharynx

E. Tonsil tumour

151. A 77-year-old patient complains of inability to urinate, bursting pain above the pubis. The patient developed acute condition 12 hours ago. Objectively: full urinary bladder is palpable above the pubis. Rectal prostate is enlarged, dense and elastic, well-defined, with no nodes. Interlobular sulcus is distinct. Ultrasonography results: prostate volume is 120 cm³, it projects into the bladder cavity, has homogeneous parenchyma.

Prostate-specific antigen rate is of 5 ng/ml. What is the most likely disease that caused acute urinary retention?

A. Prostatic hyperplasia

B. Prostate carcinoma

C. Sclerosis of the prostate

D. Tuberculosis of the prostate

E. Acute prostatitis

152. A 10 week pregnant woman was admitted to a hospital for recurrent pain in the lower abdomen, bloody discharges from the genital tracts. The problems turned up after ARVI. The woman was registered for antenatal care. Speculum examination revealed cyanosis of vaginal mucosa, clean cervix, open cervical canal discharging blood and blood clots; the lower pole of the gestational sac was visible. What tactics should be chosen?

A. Curettage of the uterus

B. Pregnancy maintenance therapy

C. Expectant management, surveillance

D. Hysterectomy

E. Antiviral therapy

153. A patient with fibromyoma of uterus sized up to 8-9 weeks of pregnancy consulted a gynaecologist about acute pain in the lower abdomen. Examination revealed pronounced positive symptoms of peritoneal irritation, high leukocytosis. Vaginal examination revealed that the uterus was enlarged corresponding to 9 weeks of pregnancy due to the fibromatous nodes, one of which was mobile and extremely painful. Appendages were not palpable. There were moderate mucous discharges. What is the optimal treatment tactics?

A. Urgent surgery (laparotomy)

B. Surveillance and spasmolytic therapy

C. Fractional diagnostic curettage of the uterine cavity

D. Surgical laparoscopy

E. Surveillance and antibacterial therapy

154. A 40-year-old female patient complains of having a bulge on the anterior surface of neck for 5 years. Objectively: Ps- 72 bpm, arterial pressure - 110/70 mm Hg, in the right lobe of thyroid gland palpation reveals a mobile 4x2 cm node, the left lobe is not palpable, the basal metabolic rate is 6%. What is the most likely diagnosis?

- A. Nodular euthyroid goiter
- **B.** Nodular hyperthyroid goiter
- C. Riedel's thyroiditis
- **D.** Mixed euthyroid goiter
- **E.** The median cervical cyst
- 155. A multigravida at 39 weeks of gestation has been delivered to a hospital having a regular labour activity for 8 hours, the waters burst an hour ago. She complains of headache, seeing spots. AP is of 180/100 mm Hg. Urine test results: protein 3,3 g/l, hyaline cylinders. Fetal heart rate is 140/min, rhythmical. Vaginal examination reveals complete crevical dilatation, the fetal head is on the pelvic floor, sagittal suture is in line with obstetric conjugate, the occipital fontanel is under the pubis. What is the optimal tactics of labour management?
- A. Outlet forceps
- **B.** Cavity forceps
- C. Cesarean section
- **D.** Vacuum extraction of the fetus
- E. Conservative labour management
- **156.** After a contact with chemicals a plant worker has suddenly developed stridor, voice hoarseness, barking cough, progressing dyspnea. Objective examination reveals acrocyanosis. What is your provisional diagnosis?
- **A.** Laryngeal edema
- **B.** Laryngeal carcinoma
- C. PATE
- **D.** Pulmonary atelectasis
- **E.** Pneumothorax
- 157. A 58-year-old patient complains of general weakness, loss of 10 kg of weight within 1,5 months, progressive pain in the lumbar region, increased blood pressure up to 220/160 mm Hg, subfebrile temperature. Objectively: in the right hypochondrium palpation reveals a formation with uneven surface and low mobility; veins of the spermatic cord and scrotum are dilated. Blood test results: Hb- 86 g/l, ESR- 44 mm/h. Urine test results: specific gravity 1020, protein -0,99 g/l, RBCs cover the whole field of vision, WBCs 4-6 in the field of vision. What is the provisional diagnosis?
- **A.** Renal tumour
- **B.** Urolithiasis
- C. Acute pyelonephritis
- **D.** Acute glomerulonephritis
- **E.** Nephroptosis
- 158. A 58-year-old patient complains of a

headache in the occipital region, nausea, choking, opplotentes. The presentations appeared after a physical exertion. Objectively: the patient is excited. Face is hyperemic. Skin is pale. Heart sounds are regular, the 2nd aortic sound is accentuated. AP- 240/120 mm Hg, HR-92/min. Auscultation reveals some fine moist rales in the lower parts of the lungs. Liver is not enlarged. ECG shows signs of hypertrophy and left ventricular overload. What is the most likely diagnosis?

- **A.** Complicated hypertensic crisis, pulmonary edema
- **B.** Acute myocardial infarction, pulmonary edema
- C. Bronchial asthma exacerbation
- **D.** Uncomplicated hypertensic crisis
- E. Community-acquired pneumonia
- 159. A patient complains of being unable to get pregnant for 5 years. A complete clinical examination gave the following results: hormonal function is not impaired, urogenital infection hasn't been found, on hysterosalpingography both tubes were filled with the contrast medium up to the isthmic segment, abdominal contrast was not visualized. The patient's husband is healthy. What tactics will be most effective?
- **A.** In-vitro fertilization
- **B.** Insemination with husband's sperm
- **C.** ICSI within in-vitro fertilization program
- **D.** Hydrotubation
- **E.** Laparoscopic tubal plasty
- **160.** Six months ago, a 5-year-old child was operated for CHD. For the last 3 weeks he has complained of fever, heart pain, aching muscles and bones. Examination results: "white-coffee"skin colour, auscultation revealed systolic murmur in the region of heart along with a noise in the III-IV intercostal space. Examination of fingertips revealed Janeway lesions. What is your provisional diagnosis?
- **A.** Infectious endocarditis
- **B.** Sepsis
- C. Nonrheumatic carditis
- **D.** Acute rheumatic fever
- E. Typhoid fever
- **161.** A 45-year-old female patient has worked as a painter for 14 years. Contacts with synthetic paint result in face skin redness, swelling, intense itching, oozing lesions. The symptoms disappear after the exposure to chemical agents, but recur

even at the smell of paint. The symptom intensity progresses with relapses. Make a provisional diagnosis:

- A. Occupational eczema
- **B.** Simple contact dermatitis
- **C.** Contact-type allergy
- **D.** Urticaria
- E. Toksikodermiya
- **162.** In a cold weather, the emergency room admitted a patient pulled out of the open water. There was no respiratory contact with the water. The patient is excited, pale, complains of pain, numbness of hands and feet, cold shiver. Breathing rate is 22/min, AP- 120/90 mm Hg, Ps- 110/min, rectal temperature is 34,5°C. What kind of warming is indicated for this patient?
- **A.** Passive warming
- **B.** Infusion of $37^{\circ}\tilde{C}$ solutions
- **C.** Hot compresses
- **D.** Warm bath
- **E.** Hemodialysis with blood warming
- **163.** Survey radiograph of a 52-year-old worker of an agglomeration plant (28 years of experience, the concentration of metal dust is 22-37 mg/m³) shows mildly pronounced interstitial fibrosis with diffused contrast well-defined small nodular shadows. The patient has no complaints. Pulmonary function is not compromised. What is the provisional diagnosis?
- A. Siderosis
- **B.** Silicosis
- **C.** Anthraco-silicatosis
- **D.** Silicatosis
- **E.** Anthracosis
- 164. A week ago a 65-year-old patient suffered an acute myocardial infarction, his general condition deteriorated: he complains of dyspnea at rest, pronounced weakness. Objectively: edema of the lower extremities, ascites is present. Heart borders are extended, paradoxical pulse is 2 cm displaced from the apex beat to the left. What is the most likely diagnosis?
- **A.** Acute cardiac aneurysm
- **B.** Recurrent myocardial infarction
- **C.** Acute pericarditis
- **D.** Cardiosclerotic aneurysm
- **E.** Pulmonary embolism
- **165.** A 64-year-old patient has been referred to planned hospitalization for general weakness, poor appetite, progressive jaundice which appeared over 3 weeks ago and wasn't accompanied

by pain syndrome. Objectively: body temperature is at the rate of 36,8°C, Ps-78/min, abdomen is soft and painless, the symptoms of peritoneal irritation are present, palpation reveals a dramatically enlarged, tense gallbladder. What disease are these symptoms typical for?

- **A.** Cancer of the pancreatic head
- **B.** Duodenal ulcer
- C. Acute cholecystitis
- **D.** Chronic cholecystitis
- E. Lamblia-induced cholecystitis
- **166.** A 22-year-old vegetarian patient with signs of malnutrition consulted a doctor about smell and taste distortion, angular stomatitis. Objectively: expressively blue sclerae. The patient was diagnosed with iron deficiency anemia. What is the dominating clinical syndrome?
- A. Sideropenic
- **B.** Anaemic
- **C.** Haemologic
- **D.** Haemolytic
- **E.** Myelodysplastic
- 167. A 13-year-old girl was admitted to the gynecological department with heavy bleeding, which appeared after a long delay of menstruation. Shortly before, the girl suffered a serious psychotrauma. Her menarche occurred at the age of 11, she has a 30-day cycle with 5 to 6 days of moderate, painless bleeding. The patient is somatically healthy, of normosthenic constitution with height of 160 cm, weight of 42 kg. The patient is pale. Rectoabdominal examination revealed that the uterus was of normal size and consistency, anteflexio-versio, the appendages were not changed. What is the most likely diagnosis?
- **A.** Juvenile bleeding
- **B.** Ovarian cyst
- **C.** Hysteromyoma
- **D.** Girl is healthy
- **E.** Amenorrhea
- **168.** It is planned to build a multi-disciplinary hospital with 500 beds in a town. Specify the location of a polyclinic within the medical centre:

A. At the main entrance

B. In the garden and park area

C. In the centre of the territory near medical buildings

D. It is not allowed to place the polyclinic within the centre territory

E. In the service zone

169. A 48-year-old patient complains of weakness, subfebrile temperature, aching pain in the kidney region. These presentations turned up three months ago after hypothermia. Objectively: kidneys are painful on palpation, there is bilaterally positive Pasternatsky's symptom. Urine test res: acid reaction, pronounced leukocyturia, microhematuria, minor proteinuria - 0,165-0,33 g/l. After the urine sample had been inoculated on conventional media, bacteriuria were not found. What research is most required in this case?

A. Urine test for Mycobacterium tuberculosis

B. Daily proteinuria

C. Nechiporenko urine test

D. Zimnitsky urine test

E. Isotope renography

170. A 22-year-old patient complains of amenorrhea for 8 months. Menarche occured at the age of 12,5. Since the age of 18 the patient has a history of irregular menstruation. The patient is nulligravida. The mammary glands are developed properly, nipples discharge drops of milk when pressed. Gynecological study results: prolactin level is 2 times higher than normal. CT reveals a bulky formation with a diameter of 4 mm in the region of sella. What is the most likely diagnosis?

A. Pituitary tumour

B. Lactational amenorrhea

C. Stein-Leventhal syndrome

D. Sheehan's syndrome

E. Pituitary basophilia

171. A 38-year-old female patient complains about hot flashes and feeling of intense heat arising up to 5 times a day, headaches in the occipital region along with high blood pressure, palpitations, dizziness, fatigue, irritability, memory impairment. 6 months ago the patient underwent extirpation of the uterus with its appendages. What is the most likely diagnosis?

A. Post-castration syndrome

B. Premenstrual syndrome

C. Early pathological menopause

D. Secondary psychogenic amenorrhea

E. Physiological premenopause

172. A 2-year-old child in a satisfactory condition periodically presents with moderate proteinuria, microhematuria. USI results: the left kidney is undetectable, the right one is enlarged, there are signs of double pyelocaliceal system. What study is required to specify the diagnosis?

A. Excretory urography

B. Micturating cystography

C. Retrograde urography

D. Doppler study of renal vessels

E. Radioisotope renal scan

173. Explosion of a tank with benzene at a chemical plant has killed and wounded a large number of people. There are over 50 victims with burns, mechanical traumas and intoxication. Specify the main elements of medical care and evacuation of population in this situation:

A. Sorting, medical assistance, evacuation

B. Sorting, evacuation, treatment

C. Medical assistance, evacuation, isolation

D. Isolation, rescue activity, recovery

E. Sorting, recovery, rescue activity

174. A 26-year-old patient with affective bipolar disorder has developed a condition manifested by mood improvement, behavioural and sexual hyperactivity, verbosity, active body language, reduced need for sleep. Which of the following drugs are most effective in this case?

A. Neuroleptics with a sedative effect

B. Antidepressants with an activating effect

C. Neuroleptics with an activating effect

D. Tranquilizers

E. Antidepressants with a sedative effect

175. An emergency doctor has diagnosed a 32-year-old woman with generalized convulsive status epilepticus. The deterioration in the patient's condition is caused by a sudden gap in the epilepsy treatment. Specify the doctor's further tactics:

- **A.** Hospitalization in the intensive care unit
- **B.** Hospitalization in the department of neurology
- **C.** Hospitalization in the department of neurosurgery
- **D.** Outpatient monitoring by a neuropathologist
- **E.** Outpatient monitoring by a neurosurgeon
- 176. A 19-year-old patient complains of dyspnea on exertion. He often has bronchitis and pneumonia. Since childhood, the patient presents with cardiac murmur. Auscultation revealed splitting of the II sound above the pulmonary artery, systolic murmur in 3 intercostal space at the left sternal border. ECG showed right bundle branch block. What is the provisional diagnosis?
- **A.** Atrial septal defect
- **B.** Open ductus arteriosus
- **C.** Aortarctia
- **D.** Aortic stenosis
- **E.** Mitral insufficiency
- 177. 20 minutes after a normal delivery at 39 weeks a puerpera had a single temperature rise up to $38^{\circ}C$. Objectively: the uterus is dense, located between the navel and the pubis, painless. Lochia are bloody, of small amount. Breasts are moderately soft and painless. What is the optimal tactics?
- **A.** Further follow-up
- **B.** Antibiotic therapy
- **C.** Appointment antipyretic
- **D.** Manual examination of the uterine cavity
- **E.** Expression of breast
- **178.** A 30-year-old patient got in a car accident. He is unconscious, pale, has thready pulse. In the middle third of the right thigh there is an extensive laceration with ongoing profuse external arterial bleeding. What urgent actions must be taken to save the life of the patient?
- **A.** Tourniquet above the wound of the right thigh
- **B.** Tourniquet below the wound of the right thigh
- **C.** Artificial lung ventilation
- **D.** Precordial thump
- E. Plaster bar
- **179.** A 75-year-old male patient complains of slight pain in the right iliac region. The abdominal pain arose 6 days ago and was

- accompanied by nausea. Surgical examination revealed moist tongue, Ps- 76 bpm. AP- 130/80 mm Hg. Abdomen was soft, slightly painful in the right iliac region on deep palpation, the symptoms of the peritoneum irritation were doubtful. In blood: RBCs $4,0 \cdot 10^{12}$ /l, Hb- 135 g/l, WBCs $9,5 \cdot 10^{9}$ /l, stab neutrophils 5%, segmentonuclear 52%, lymphocytes 38%, monocytes 5%, ESR 20 mm/h. Specify the doctor's further tactics:
- **A.** Emergency operation for acute appendicitis
- **B.** Hospitalization, dynamic surveillance
- **C.** Send the patient home
- **D.** Refer the patient to a district therapist
- **E.** Administration of additional examination: abdominal ultrasound, x-ray contrast study of the gastrointestinal tract
- **180.** A 55-year-old patient whose menstruation stopped 5 years ago complains of vaginal dryness, frequent and painful urination. Gynecologist revealed signs of atrophic colpitis. Urine analysis revealed no peculiarities. Which locally acting product will provide the proper therapeutic effect?
- A. Vaginal suppositories "Ovestin"
- **B.** Vaginal tablets "Tergynan"
- C. Vaginal cream "Meratin Combi"
- **D.** Vaginal gel "Metronidazole"
- E. Vaginal cream "Dalacin"
- **181.** A 63-year-old patient with persistent atrial fibrillation complains of moderate dyspnea. Objectively: peripheral edemata are absent, vesicular respiration is present, heart rate 72/min, AP- 140/90 mm Hg. What combination of drugs will be most useful in the secondary prevention of heart failure?
- A. Beta-blockers, ACE inhibitors
- **B.** Beta-blockers, cardiac glycosides
- **C.** Cardiac glycosides, diuretics
- **D.** Cardiac glycosides, ACE inhibitors
- **E.** Diuretics, beta-blockers
- **182.** A 57-year-old patient had an attack of retrosternal pain that lasted more than 1,5 hours. Objectively: the patient is inert, adynamic, has pale skin, cold extremities, poor volume pulse, heart rate 120/min, AP- 70/40 mm Hg. ECG shows ST elevation in leads II, III, aVF. What condition are these changes typical for?

- A. Cardiogenic shock
- **B.** Arrhythmogenic shock
- **C.** Perforated gastric ulcer
- **D.** Acute pericarditis
- **E.** Acute pancreatitis
- **183.** An 8-year-old boy has a 2-year history of blotchy itchy rash appearing after eating citrus fruit. The first eruption occurred at the age of 6 months after the introduction of juices to the baby's diet. Father has a history of bronchial asthma, mother that of allergic rhinitis. What is the most likely diagnosis?
- **A.** Atopic dermatitis
- **B.** Psoriasis
- C. Pityriasis Rosea
- **D.** Urticaria
- E. Quincke's edema
- **184.** On the 10th day postpartum a puerperant woman complains of pain and heaviness in the left mammary gland. Body temperature is 38,8°C, Ps- 94 bpm. The left mammary gland is edematic, the supero-external quadrant of skin is hyperemic. Fluctuation symptom is absent. The nipples discharge drops of milk when pressed. What is a doctor's further tactics?
- **A.** Antibiotic therapy, immobilization and expression of breast milk
- **B.** Compress to both mammary glands
- **C.** Inhibition of lactation
- **D.** Physiotherapy
- **E.** Opening of the abscess and drainage of the mammary gland
- 185. A 25-year-old patient has been admitted to the hospital with the following problems: weakness, sweating, itching, weight loss, enlarged submandibular, cervical, axillary, inguinal lymph nodes. Objectively: hepatomegaly. Lymph node biopsy revealed giant Berezovsky-Reed-Sternberg- cells, polymorphocellular granuloma made by lymphocytes, reticular cells, neutrophils, eosinophils, fibrous tissue, plasma cells. What is the most likely diagnosis?
- **A.** Lymphogranulomatosis
- **B.** Lymph node tuberculosis
- **C.** Lymphoreticulosarcoma
- **D.** Cancer metastases to lymph nodes
- E. Macofollicular reticulosis
- **186.** During self-examination a 22-yearold patient revealed a mammary tumour. Palpation revealed a firm, painless, mobile formation up to 2 cm, peripheral lymph

nodes were not changed. USI results: in the superior external quadrant of the right mammary gland there was a big formation of increased echogenicity, sized 18x17 mm. The patient was provisionally diagnosed with fibroadenoma. What is a doctor's further tactics?

- **A.** Surgical removal of the tumour prior to pregnancy
- **B.** Dynamic follow-up
- C. Surgical treatment after pregnancy
- **D.** Radical mastectomy
- E. Nonsteroid anti-inflammatory drugs, oral contraceptives
- **187.** A patient is 31 years old. Double-contrast barium swallow revealed a filling defect on the posterior wall in the middle segment of esophagus. The defect looked like a well-defined oval 1,8x1,3 cm large. Mucosal folds adjacent to the defect were intact, peristalsis and elasticity of the walls remained unchanged. Digestive tract problems were absent. What is the provisional diagnosis?
- A. Esophageal tumour
- **B.** Achalasia cardia
- C. Esophageal burn
- **D.** Diverticulum
- E. Barrett's esophagus
- **188.** A 50-year-old patient has worked at a chemical plant for 15 years. His work involved using xylene solvent. The patient was hospitalized with suspected chronic intoxication. He was found to have anemic syndrome. What is the first-priority measure of secondary anemia prevention?
- **A.** Job change
- **B.** Administration of glucocorticosteroids
- **C.** Administration of iron supplements
- **D.** Including seafood into the diet
- **E.** Including meat into the diet
- 189. A 49-year-old patient complains of itching, burning in the external genitals, frequent urination. The symptoms has been present for the last 7 months. The patient has irregular menstruation, once every 3-4 months. Over the last 2 years she presents with hot flashes, sweating, sleep disturbance. Examination revealed no pathological changes of the internal reproductive organs. Complete blood count and urinalysis showed no pathological changes. Vaginal smear contained 20-25 leukocytes in the field of vision, mixed flora. What is the most likely diagnosis?

- A. Menopausal syndrome
- **B.** Cystitis
- C. Trichomonas colpitis
- **D.** Vulvitis
- E. Bacterial vaginosis
- **190.** A 56-year-old female patient complains of recurrent attacks of intensive pain irradiating along the ureters. Urine test results: protein 0,37 g/l, RBCs-20-25 in the field of vision, WBCs 12-14 in the field of vision. What method of instrumental diagnostics is the most informative for the diagnosis?
- **A.** Intravenous urography
- **B.** USI of kidneys
- **C.** Computer tomography
- **D.** Radioisotope renography
- E. Cystoscopy
- 191. 2 weeks after labour a parturient woman developed breast pain being observed for 3 days. Examination revealed body temperature at the rate of $39^{\circ}C$, chills, weakness, hyperaemia, enlargement, pain and deformity of the mammary gland. On palpation the infiltrate was found to have an area of softening and fluctuation. What is the most likely diagnosis?
- A. Infiltrative-purulent mastitis
- **B.** Phlegmonous mastitis
- C. Lactostasis
- **D.** Serous mastitis
- **E.** Mastopathy
- **192.** A 22-day-old infant had developed red subcutaneous nodules from 1,0 to 1,5 cm large on the scalp. Later the nodules suppurated, body temperature rose up to 37,7°C, there appeared symptoms of intoxication, the regional lymph nodes grew bigger. Blood test results: anemia, leukocytosis, neutrophilia, accelerated ESR. What is the most likely diagnosis?
- **A.** Pseudofurunculosis
- **B.** Pemphigus
- **C.** Vesiculopustulosis
- **D.** Scalp phlegmon
- E. -
- 193. A 70-year-old patient consulted a doctor about arrhythmic cardiac activity, dyspnea. Objectively: AP- 150/90 mm Hg, extrasystole arrhythmia (10-12 beats per minute), left ventricular systolic dysfunction (ejection fraction at the rate of 42%). Which of antiarrhythmic drugs should be administered as initial therapy in this case?

- A. Amiodarone
- B. Flecainide
- C. Encainide
- **D.** Moracizine
- **E.** Digoxin
- **194.** A 38-year-old male works within the range of ionizing radiation. At a routine medical examination he presents no problems. In blood: RBCs $4, 5 \cdot 10^{12}$ /l, Hb-80 g/l, WBCs $2, 8 \cdot 10^9$ /l, thrombocytes $30 \cdot 10^9$ /l. Decide if this person can work with sources of ionizing radiation:
- **A.** Working with radioactive substances and other sources of ionizing radiation is contraindicated
- **B.** The patient is allowed to work with radioactive substances
- **C.** The patient can only work with radioactive substances of low activity
- **D.** The patient can be allowed to work after an extended medical examination
- **E.** The patient is allowed to work with radioactive substances for the limited period of time
- **195.** A puerpera breastfeeding for 1,5 weeks consulted a doctor about uniform breast engorgement. Breasts are painful. The body temperature is of 36,6°C. Milk expressing is difficult. What is the most likely diagnosis?
- **A.** Lactostasis
- **B.** Infiltrative mastitis
- **C.** Purulent mastitis
- **D.** Fibrocystic mastopathy
- **E.** Gangrenous mastitis
- 196. A 28-year-old male patient complains of regurgitation, cough and heartburn that occurs every day after a meal, when bending forward or lying down. These problems have been observed for 4 years. Objective status and laboratory values are normal. FEGDS revealed endoesophagitis. What is the leading factor in the development of this disease?
- **A.** Failure of the inferior esophageal sphincter
- **B.** Hypersecretion of hydrochloric acid
- **C.** Duodeno-gastric reflux
- **D.** Hypergastrinemia
- **E.** Helicobacter pylori infection
- **197.** A 24-year-old patient had been delivered to the thoracic department with a chest injury, a fracture of the IV, V, VI ribs on the right. Plan radiography shows the fluid level in the pleural cavity

reaching the III rib on the right. Puncture blood contained clots. What is the optimal treatment tactics?

- **A.** Emergency thoracotomy
- **B.** Pleural puncture
- **C.** Thoracentesis and thoracostomy
- **D.** Hemostatic therapy
- **E.** Medical thoracoscopy
- **198.** A 10-year-old patient complains of skin itch that occurs at night. Objectively: multiple paired papules, burrow tracks in the interdigital skin folds, on the anterolateral surfaces of abdomen and buttocks. Specify the period of regular medical check-up for pupils of the class where the patient learns:
- **A.** 2 months
- **B.** 2 weeks
- C. 5 days
- **D.** 6 months
- E. 1 year
- **199.** Examination of a Rh-negative pregnant woman at 32 weeks of gestation revealed a four-time rise of Rh-antibody titer within 2 weeks, the titer was 1:64. In the first two pregnancies the patient

had experienced antenatal fetal death due to hemolytic disease. What is the optimal tactics of pregnancy management?

- **A.** Early delivery
- **B.** Delivery at 37 weeks of gestation
- **C.** Screening for Rh-antibodies 2 weeks later and early delivery in case of further titer rise
- **D.** Introduction of anti-Rh (D) immunoglobulin
- **E.** Ultrasound for signs of hemolytic disease of the fetus
- **200.** A 7-year-old female child has developed an acute condition. She complains of a headache, two onsets of vomiting. Objectively: deferred reactions, body temperature 39, 3°C, pronounced hyperesthesia, nuchal rigidity, positive superior and inferior Brudzinski's signs, symmetric Kernig's sign. What is the provisional diagnosis?
- **A.** Meningitis
- **B.** Food toxicoinfection
- C. Craniocerebral trauma
- **D.** Toxic encephalopathy
- **E.** Encephalitis