- 1. A patient suddenly felt an acute chest pain irradiating to the left arm. Objectively: the patient is excited, with pale skin. Breathing rate 38/min, AP 180/110 mm Hg. Later the patient lost consciousness and fell down. Pulse on the great vessels was absent, the pupils were equally dilated. What is the most likely diagnosis?
- A. Clinical death
- B. Agonal state
- C. Coma
- D. Heart attack
- E. Disorder of the cerebral circulation
- **2.** A 62-year-old patient complaining of enlargement of cervical, supraclavicular and axillary lymph nodes, subfebrile temperature for the last 3 months has been admitted to a hospital. In blood: WBCs  $64 \cdot 10^9$ /l, lymphocytes 72%. What method of study should be used to specify the diagnosis?
- A. Myelogram
- **B.** Lymphography
- C. Lymphoscintigraphy
- **D.** X-rays
- E. Thermography
- **3.** A child is 2 years old. The child complains of hoarse voice, dyspnea with obstructed inspiration. The disease started 3 days ago from dry cough and nose stuffiness. Objectively: general condition is unbalanced, stridor is present. The child's skin is pale. Body temperature is 37,7°C. The palatine arches are hyperemic. There is no deposit. Heart sounds are rhythmic. Auscultation of lungs reveals rough breathing sounds, crepitation is absent. Parainfluenza virus has been detected in nasopharynx lavage. What is the most likely diagnosis?
- **A.** Acute laryngotracheitis
- **B.** Epiglottitis
- C. Foreign body
- **D.** Diphtheria
- **E.** Laryngospasm
- **4.** A teacher of a secondary school was diagnosed with pulmonary tuberculosis. What is the maximum duration of his medical certificate?
- **A.** Ten months
- **B.** Five months
- **C.** Four months
- **D.** Two months
- E. A month

- **5.** A schizophrenic patient considers himself to be "an outstanding scientist, a brilliant composer and an unrivalled artist". He complains that "family and friends are always jealous of him and want to poison him". Determine the psychopathological syndrome:
- A. Paranoiac
- B. Paranoid
- C. Manic
- **D.** Paratrophic
- **E.** Hebephrenic
- **6.** Examination of a 9-month-old girl revealed skin pallor, cyanosis during excitement. Percussion revealed transverse dilatation of cardiac borders. Auscultation revealed continuous systolic murmur to the left of the breastbone in the 3-4 intercostal space. This murmur is conducted above the whole cardiac region to the back. What congenital cardiac pathology can be suspected?
- A. Defect of interventricular septum
- **B.** Defect of interatrial septum
- **C.** Coarctation of aorta
- **D.** Fallot's tetrad
- E. Pulmonary artery stenosis
- **7.** A 42-year-old patient complains of back pain, darkened urine, general weakness, dizziness that occurred after treating a cold with aspirin and ampicillin. Objectively: the patient is pale, with subicteric sclerae. HR 98 bpm. Liver +2 cm, spleen +3 cm. In blood: RBCs 2,6 ·  $10^{12}$ /l, Hb 60 g/l, CI 0,9, WBCs 9,4 ·  $10^{9}$ /l, basophils 0,5%, eosinophils 3%, stab neutrophils 6% segmented neutrophils 58%, lymphocytes 25%, monocytes 7%, ESR 38 mm/hour, reticulocytes 24%. Total bilirubin 38 millimole/l. What complication occurred in the patient?
- A. Acquired hemolytic anemia
- **B.** Toxic hepatitis
- C. Cholelithiasis
- **D.** Agranulocytosis
- **E.** Paroxysmal nocturnal hemoglobinuria
- **8.** A hospital has admitted a 52-year-old patient with disseminated pulmonary tuberculosis, complaints of acute pain in the right half of chest, that developed after going upstairs to the 3rd floor; cough, dyspnea at rest, marked cyanosis. What kind of complication should suspected first of all?

- **A.** Spontaneous pneumothorax
- **B.** Cardiac failure
- C. Pulmonary failure
- **D.** Pleuritis
- **E.** Acute myocardial infarction
- **9.** A 44-year-old patient has been admitted to a hospital with complaints of dull, aching pain in the left lumbar region, the admixture of pus in the urine. Examination revealed a grade II staghorn calculus on the left. What method of treatment is indicated for this patient?
- **A.** Surgery
- **B.** Contact lithotripsy
- **C.** Distance lithotripsy
- **D.** Conservative therapy
- **E.** Ascending litholysis
- 10. On the 21 day after appearance of vesiculous chickenpox rash a 7-year-old child developed ataxia, nystagmus, intention tremor, muscle hypotonia. Liquor analysis shows a low-grade lymphocytic pleocytosis, slightly increased protein rate. What complication is it?
- A. Encephalitis
- **B.** Purulent meningitis
- **C.** Pneumonitis
- **D.** Acute nephritis
- **E.** Postherpetic neuralgia
- 11. A 38-year-old male patient has been taking alcohol for 3 years. 3 days after a regular drinking period he felt anxiety and fear. It appeared to him that he was surrounded by spiders and worms, pursued by some "condemnatory voices". His behaviour became aggressive. The patient demonstrated correct self-awareness but impairment of temporal and spatial orientation. What is the most likely diagnosis?
- **A.** Delirium alcoholicum
- **B.** Alcoholic paranoia
- **C.** Alcoholic hallucinosis
- **D.** Alcoholic encephalopathy
- **E.** Pathologic intoxication
- **12.** An 8-year-old boy suffering from haemophilia was undergoing transfusion of packed red cells. Suddenly he felt pain behind the breastbone and in the lumbar area, dyspnea, cold sweat. Objectively: pale skin, heart rate 100/min, AP 60/40 mm Hg; oliguria, brown urine. For the treatment of this complication the following drug should be administered:

- A. Prednisolone
- **B.** Lasix
- C. Adrenaline
- **D.** Aminophylline
- **E.** Analgine
- 13. A 16-year-old patient who has a history of intense bleedings from minor cuts and sores needs to have the roots of teeth extracted. Examination reveals an increase in volume of the right knee joint, limitation of its mobility. There are no other changes. Blood analysis shows an inclination to anaemia (Hb- 120 g/l). Before the dental intervention it is required to prevent the bleeding by means of:
- **A.** Cryoprecipitate
- **B.** Epsilon-aminocapronic acid
- **C.** Fibrinogen
- **D.** Dried blood plasma
- **E.** Calcium chloride
- **14.** A 3-year-old child has been diagnosed with type I diabetes mellitus, hyperosmolar coma. The laboratory confirmed the diagnosis. Which laboratory findings are characteristic for such condition?
- **A.** High hyperglycemia without ketonemia
- **B.** Hyperglycemia and ketonemia
- C. Hyperglycemia and glucosuria
- **D.** Hyperglycemia and ketonuria
- **E.** Hyperglycemia and high indicators of acid-base balance
- 15. A 58-year-old female patient came to the antenatal clinic with complaints of bloody light-red discharges from the genital tracts. Menopause is 12 years. Gynaecological examination found externalia and vagina to have age involution; 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 with climacteric character
- D. Cervical carcinoma
- **E.** Granulosa cell tumor of ovary
- **16.** A 3-year-old child was playing in a playpen when he suddenly developed paroxysmal cough and shortness of breath. Objectively: dry cough, mixed dyspnea. Lung auscultation revealed some wheezes. Breathing sounds on the

right are diminished. The child doesn't mix with other children. Immunization is age-appropriate. What pathological condition can be suspected?

- **A.** Foreign body in the respiratory tracts
- **B.** Pneumonia
- C. Acute respiratory viral infection
- **D.** Pertussis
- E. Bronchial asthma
- 17. A 44-year-old patient complains about difficult urination, sensation of incomplete urinary bladder emptying. Sonographic examination of the urinary bladder near the urethra entrance revealed an oval well-defined hyperechogenic formation 2x3 cm large that was changing its position during the examination. What conclusion can be made?
- A. Concrement
- **B.** Malignant tumour of the urinary bladder
- C. Urinary bladder polyp
- **D.** Prostate adenoma
- **E.** Primary ureter tumour
- **18.** A 10-year-old child has been folowed-up for the dilated cardiomyopathy. The child presents with dyspnea, cardialgia. There are dense, nonmobile edemata on the lower extremities and sacrum. Ps- 120/min. The cardiac borders are extended transversely. Heart sounds are muffled, there is blowing systolic murmur at the apex and over the xiphoid process. Liver is 3 cm enlarged, urine output is reduced. The blood total protein 58.6 g/l. In urine: protein 0,025 g/l, WBCs 2-4 in the field of vision, RBCs 2-3 in the field of vision. What is the main mechanism of edema syndrome development:
- **A.** Venous congestion of greater circulation
- **B.** Venous congestion of lesser circulation **C.** Peripheral circulation disorder
- **D.** Secondary nephropathy development
- **E.** Hypoproteinemia
- **19.** A 69-year-old female patient complains of temperature rise up to 38,3°C, haematuria. ESR 55 mm/h. Antibacterial therapy turned out to be ineffective. What diagnosis might be suspected?

- A. Renal cancer
- B. Polycystic renal disease
- **C.** Renal amyloidosis
- **D.** Urolithiasis
- **E.** Chronic glomerulonephritis
- **20.** A 47-year-old patient complains of insomnia, heaviness over his entire body, constantly depressed mood. He considers himself good-for-nothing, inadequate. Believes that he is a burden to his family, wants to die. The patient is depressed, inactive, has a hypomimic face with sorrowful expression. He speaks quietly and monotonely, gives short answers. What is the most likely diagnosis?
- **A.** Major depressive disorder
- **B.** Atherosclerotic depression
- C. Initial stage of Alzheimer's disease
- **D.** Late-onset schizophrenia
- **E.** Neurotic depression
- **21.** Bacterial analysis of air in a living space in winter period by means of Krotov's apparatus revealed that total number of microorganisms in  $1m^3$  of air was 7200. What is the permissible number of microorganisms for the air to be characterized as "pure"?
- **A.** Up to 4500
- **B.** Up to 2500
- **C.** Up to 3500
- **D.** Up to 5500
- **E.** Up to 7500
- **22.** A 48-year-old patient got a job-related injury of a hypodermic varicose vein on his shin that was accompanied by the intensive phleborrhagia. Choose the optimal variant of first aid:
- **A.** Pressure bandage and limb strapping
- **B.** Application of Esmarch's tourniquet above the injury
- **C.** Application of Esmarch's tourniquet beneath the injury
- **D.** Occlusion of femoral artery in a typical place
- **E.** Maximal limb flexion in knee joint
- 23. A patient who had eaten mushrooms in the morning was delivered to the infectious diseases hospital at night. The disease development was rapid. The patient presented with stomach pain, frequent diarrhea, intractable vomiting, burning thirst, headache and dizziness. He died on the third day. What mushrooms are most likely to have caused mycetismus?

- A. Deadly amanita
- **B.** Morels
- C. Fly agarics
- **D.** Sulfur-tufts
- E. Russules
- 24. A 28-year-old patient complains of periodic compressing heart pain. His brother died at the age of 34 from a cardiac disease with similar symptoms. Objectively: the patients skin is pale. Heart borders display no significant deviations. Heart sounds are loud, there is a systolic murmur above all the points with a peak above the aorta. Echocardioscopy reveals thickening of the interventricular septum in the basal parts, reduction of left ventricular cavity. What drug should be administered in order to prevent the disease progression?
- **A.** Metoprolol
- **B.** Digoxin
- C. Nitroglycerin
- **D.** Captopril
- E. Furosemide
- **25.** A 10-year-old boy underwent treatment in cardiological department for rheumatism, I acute attack of rheumatic fever, active phase, II degree. The patient was discharged in satisfactory condition. Which drug should be chosen for prevention of rheumatism recurrence?
- A. Bicillinum-5
- **B.** Bicillinum-1
- **C.** Erythromycin
- **D.** Ampicillin
- E. Oxacillin
- **26.** Examination of a 13-year-old boy reveals that his body length is 147 cm (+2), body weight 38 kg (+1,5), circumference of chest 72 cm (+0,2). Estimate the harmonicity of the child's physical development:
- A. Disharmonious
- **B.** Harmonious
- **C.** Above the average
- **D.** Sharply disharmonious
- E. Supernormal
- 27. A children's health camp received a party of tinned food. External examination of the tins revealed that they had deep dents, could be easily concaved when pressed and wouldn't immediately return to the initial state; rust was absent; the tins were greased with inedible fat. Specify the bloat type:

- A. Physical
- **B.** Chemical
- C. Biological
- **D.** Combined
- **E.** Physicochemical
- **28.** 2 weeks after recovering from angina a 29-year-old patient noticed face edemata, weakness, decreased work performance. There was gradual progress of dyspnea, edemata of the lower extremities, lumbar spine. Objectively: pale skin, weakening of the heart sounds, anasarca. AP- 160/100 mm Hg. In urine: the relative density 1021, protein 5 g/l, erythrocytes 20-30 in the field of vision, hyaline cylinders 4-6 in the field of vision. What is the most likely diagnosis?
- A. Acute glomerulonephritis
- **B.** Essential hypertension
- **C.** Acute pyelonephritis
- **D.** Infectious allergic myocarditis
- E. Myxedema
- **29.** A 56-year-old scientist experiences constricting retrosternal pain several times a day while walking for 100-150 m. The pain lasts for up to 10 minutes and can be relieved by nitroglycerine. Objectively: the patient is overweight, heart borders exhibit no abnormalities, heart sounds are rhythmic, Ps- 78 bpm, AP- 130/80 mm Hg. ECG contains low amplitude of T wave in  $V_{4-5}$ . What disease might be suspected?
- **A.** Stable FC III stenocardia
- **B.** Instable stenocardia
- **C.** Stable FC I stenocardia
- D. Stable FC II stenocardia
- E. Stable FC IV stenocardia
- **30.** In autumn a 25-year-old patient developed stomach ache arising 1,5-2 hours after having meals and at night. He complains of pyrosis and constipation. The pain is getting worse after consuming spicy, salty and sour food, it can be relieved by means of soda and hot-water bag. The patient has been suffering from this disease for a year. Objectively: furred moist tongue. Abdomen palpation reveals epigastrial pain on the right, resistance of abdominal muscles in the same region. What is the most likely diagnosis?
- **A.** Duodenal ulcer
- **B.** Chronic cholecystitis
- **C.** Diaphragmatic hernia
- **D.** Stomach ulcer
- **E.** Chronic pancreatitis
- 31. A full-term infant is 3 days old.

On the different parts of skin there are erythemas, erosive spots, cracks, areas of epidermis peeling. The infant has scalded skin syndrome. Nikolsky's symptom is positive. General condition of the infant is grave. Anxiety, hyperesthesia, febrile temperature are evident. What is the most probable diagnosis?

- **A.** Exfoliative dermatitis
- **B.** Phlegmon of newborn
- **C.** Finger's pseudofurunculosis
- **D.** Impetigo neonatorum
- E. Mycotic erythema
- **32.** A 7-year-old boy has been managed for a month. Immediately after hospitalization there were apparent edemata, proteinuria 7,1 g/l, daily urine protein 4,2 g. Biochemical blood test shows persistent hypoproteinemia (43,2 g/l), hypercholesterolemia (9,2 millimole/l). The patient is most likely have the following type of glomerulonephritis:
- A. Nephrotic
- **B.** Nephritic
- C. Isolated urinary
- **D.** Hematuric
- E. Combined
- **33.** A secundipara has regular birth activity. Three years ago she had cesarean section for the reason of acute intrauterine hypoxia. During parodynia she complains of extended pain in the area of postsurgical scar. Objectively: fetus pulse is rhythmic 140 bpm. Vaginal examination shows 5 cm cervical dilatation. Fetal bladder is intact. What is the tactics of choice?
- **A.** Cesarean section
- **B.** Augmentation of labour
- **C.** Obstetrical forceps
- **D.** Waiting tactics of labor management
- **E.** Vaginal delivery
- **34.** A 54-year-old female patient consulted a doctor about bloody discharges from the genital tracts after 2 years of amenorrhea. USI and bimanual examination revealed no genital pathology. What is the tactics of choice?
- **A.** Fractional biopsy of lining of uterus and uterine mucous membranes
- **B.** Styptic drugs
- **C.** Contracting drugs
- **D.** Estrogenic haemostasia
- **E.** Hysterectomy
- 35. A 32-year-old male patient has been

suffering from pain in the sacrum and coxofemoral joints, painfulness and stiffness in the lumbar spine for a year. ESR - 56 mm/h. Roentgenography revealed symptoms of bilateral sacroileitis. The patient is the carrier of HLA B27 antigen. What is the most likely diagnosis?

- **A.** Ankylosing spondylitis
- **B.** Coxarthrosis
- C. Rheumatoid arthritis
- **D.** Reiter's disease
- **E.** Spondylosis
- **36.** A 58-year-old female patient complains about periodical headache, dizziness and ear noise. She has been suffering from diabetes mellitus for 15 years. Objectively: heart sounds are rhythmic, heart rate is 76/min, there is diastolic shock above aorta, AP is 180/110 mm Hg. In urine: OD- 1,014. Daily loss of protein with urine is 1,5 g. What drug should be chosen for treatment of arterial hypertension?
- **A.** Ihibitor of angiotensin converting enzyme
- **B.**  $\beta$ -blocker
- C. Calcium channel antagonist
- **D.** Thiazide diuretic
- **E.**  $\alpha$ -blocker
- 37. A 62-year-old patient has been delivered to the surgical department with complaints of sudden pain in the umbilical region irradiating to the back and groin, which was accompanied by a syncope. Objectively: the patient is in grave condition, umbilical region is tender on palpation, bowel sounds are diminished. AP drop is present. USI reveals: free fluid in the abdomen, thickening of the wall of the abdominal aorta. The most likely diagnosis is:
- **A.** Rupture of abdominal aortic aneurism
- **B.** Stomach ulcer perforation
- C. Acute pancreatitis
- **D.** Peritonitis
- **E.** Acute appendicitis
- **38.** A therapeutist needs to analyze adult health in the area of service. Which groups of indicators will be included into this analysis?

- A. Demographic, sickness rates, disability
- **B.** Demographic, sickness rates, physical development
- C. Sickness rates, disability, death rates
- **D.** Birth rates, sickness rates, disability
- **E.** Sickness rates, death rates, physical development
- **39.** A 54-year-old patient has an over 20-year history of femoral osteomyelitis. Over the last month she has developed progressing edemata of the lower extremities. Urine test reveals: proteinuria at the rate of 6,6 g/l; in blood: dysproteinemia in form of hypoalbuminemia, increase in  $\alpha_2$ -and  $\gamma$ -globulin rate, ESR 50 mm/h. What is the most likely diagnosis?
- **A.** Secondary renal amyloidosis
- **B.** Acute glomerulonephritis
- **C.** Myelomatosis
- **D.** Chronic glomerulonephritis
- **E.** Systemic lupus erythematosus
- **40.** An emergency team deliverd a 83-year-old patient complaining of inability of her right leg to support the body after falling on her right side. Objectively: the patient lies on a gurney, her right leg is rotated outwards, the outside edge of foot touches the bed. There is positive straight leg raising sign. What is your provisional diagnosis?
- A. Femoral neck fracture
- **B.** Femoral diaphysis fracture
- **C.** Hip dislocation
- **D.** Hip joint contusion
- **E.** Cotyloid cavity fracture
- **41.** 3 days ago a 29-year-old patient presented with pulsating pain in the region of rectum, fever, general weakness. Objectively: local tenderness in the anal region in the 6 o'clock position. Digital investigation of rectum revealed a painful infiltration reaching the pectinate line. What is the most likely diagnosis?
- **A.** Acute periproctitis
- **B.** Acute anal fissure
- **C.** Acute haemorrhoids
- D. Rectum tumour
- E. Acute prostatitis
- **42.** A child is 7 months old. Birth weight was 3450, the child is breastfed. Supplemental feeding was introduced on time. Determine the daily protein requirements for the child:

- **A.** 3.0 g/kg
- **B.** 2,0 g/kg
- C. 2,5 g/kg
- **D.** 3,5 g/kg
- $\mathbf{E.} 4.0 \, \mathbf{g/kg}$
- **43.** A 60-year-old female patient was hospital admitted to for acute a transmural infarction. An hour later the patient's contition got worse. She developed progressing dyspnea, dry cough. Respiratory rate - 30/min, heart rate - 130/min, AP- 90/60 mm Hg. Heart sounds were muffled, there was also diastolic shock on the pulmonary artery. The patient presented with medium moist rales in the lower parts of lungs on the right and on the left. Body temperature - $36,4^{\circ}C$ . What drug should be given in the first place?
- A. Promedol
- **B.** Aminophylline
- **C.** Dopamine
- **D.** Heparin
- E. Digoxin
- **44.** A 62-year-old male has been hospitalized in the intensive care unit with a continuous attack of retrosternal pain that cannot be relieved by nitroglycerin. Objectively: AP- 80/60 mm Hg, heart rate 106/min, breathing rate 22/min. Heart sounds are muffled, a gallop rhythm is present. How would you explain the AP drop?
- **A.** Reduction in cardiac output
- **B.** Reduction in peripheral resistance
- **C.** Blood depositing in the abdominal cavity
- **D.** Adrenergic receptor block
- **E.** Internal haemorrhage
- **45.** 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. 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
- **46.** A child is 9 months old. The patient's body temperature is  $36,7^{\circ}C$ , the skin is

pale, humid, there is pain in leg muscles. There is no extremities mobility, sensitivity is present. The child has been diagnosed with poliomyelitis. The causative agent of this disease relates to the following family:

- **A.** Picornavirus
- B. Paramyxovirus
- C. Tohovirus
- **D.** Adenovirus
- E. Rotavirus
- **47.** Working conditions of a building company worker are characterized by cooling microclimate effect, silicacontaining dust, caustic alkali (quicklime) and noise. What medical expert should be the chief of the commission that periodically examines the workers of the mentioned category?
- **A.** Therapeutist
- B. Ophthalmologist
- C. Neurologist
- **D.** Dermatologist
- **E.** Otolaryngologist
- **48.** A full-term baby (the 1st uncomplicated pregnancy, difficult labour) had a cephalogematoma. On the 2nd day there was jaundice, on the third the following changes in neurological status appeared: nystagmus, Graefe syndrome. Urine was yellow, feces were of goldenyellow colour. Mother's blood group is A (II) Rh<sup>-</sup>, the baby's one A (II) Rh<sup>+</sup>. On the third day the child's Hb was 200g/l, RBCs 6, 1 · 10<sup>12</sup>/l, blood bilirubin 58 micromole/l at the expense of unbound fraction. What caused the jaundice in the child?
- **A.** Craniocerebral birth trauma
- **B.** Physiological jaundice
- **C.** Neonatal anaemia
- **D.** Biliary atresia
- **E.** Fetal hepatitis
- **49.** After birth a child was pale and had arrhythmical breathing. Oxygen therapy didn't have any effect. Pulse was weak and rapid. It was difficult to measure arterial pressure accurately. There were no edemata. What is the most likely reason for these symptoms?
- **A.** Asphyxia
- **B.** Congestive heart failure
- **C.** Intracranial haematoma
- **D.** Intrauterine sepsis
- **E.** Congenital pneumonia
- 50. 350 workers of a metalurgical plant

had to undergo a yearly preventive examination. A territorial polyclinic carried out preventive examination of 325 workers. As a result of it, 1 worker was recognized as temporarily disabled, 15 workers underwent further rehabilitation at an after-work sanatorium, 10 workers were provided with diet meal. What index characterizing the preventive work of the polyclinic should be applied in this case?

- **A.** Coverage of preventive medical examinations
- **B.** Frequency of case detection during examinations
- **C.** Percentage of people who underwent rehabilitation at an after-work sanatorium
- **D.** Percentage of people who were provided with diet meal
- **E.** Percentage of temporarily disabled people
- 51. A 14-year-old girl has been presenting with irritability and tearfulness for about a year. A year ago she was also found to have diffuse enlargement of the thyroid gland (II grade). This condition was regarded as a pubertal manifestation, the girl didn't undergo any treatment. The girl's irritability gradually gave place to a complete apathy. The girl got puffy face, soft tissues pastosity, bradycardia, constipations. Skin pallor and gland density progressed, the skin became of a waxen hue. What disease may be suspected?
- **A.** Autoimmune thyroiditis
- **B.** Diffuse toxic goiter
- **C.** Thyroid carcinoma
- **D.** Subacute thyroiditis
- E. Juvenile basophilism
- **52.** 4 hours after having meals a patient with signs of malnutrition and steatorrhea experiences stomach pain, especially above navel and to the left of it. Diarrheas take turns with constipation lasting up to 3-5 days. Palpation reveals moderate painfulness in the choledochopancreatic region. The amylase rate in blood is stable. X-ray reveals some calcifications located above navel. What is the most likely diagnosis?
- **A.** Chronic pancreatitis
- **B.** Chronic gastroduodenitis
- C. Duodenal ulcer
- **D.** Zollinger-Ellison syndrome
- **E.** Chronic calculous cholecystitis
- **53.** A 56-year-old patient with diffuse toxic goiter has ciliary arrhythmia with

pulse rate of 110 bpm, arterial hypertension, AP- 165/90 mm Hg. What preparation should be administered along with mercazolil?

**A.** Propranolol

**B.** Radioactive iodine

C. Procaine hydrochloride

**D.** Verapamil

E. Corinfar

- **54.** On the 3rd day of life a baby presented with haemorrhagic rash, bloody vomit, black stool. Examination revealed anaemia, extended coagulation time, hypoprothrombinemia, normal thrombocyte rate. What is the optimal therapeutic tactics?
- A. Vitamin K

**B.** Sodium ethamsylate

C. Epsilon-aminocapronic acid

**D.** Fibrinogen

**E.** Calcium gluconate

- **55.** A woman consulted a doctor on the 14th day after labour about sudden pain, hyperemy and induration of the left mammary gland, body temperature rise up to  $39^{\circ}C$ , headache, indisposition. Objectively: fissure of nipple, enlargement of the left mammary gland, pain on palpation. What pathology would you think about in this case?
- **A.** Lactational mastitis

**B.** Lacteal cyst with suppuration

**C.** Fibrous adenoma of the left mammary gland

**D.** Breast cancer

**E.** Phlegmon of mammary gland

- **56.** On the 5th day of a respiratory disease accompanied by fever a 24-year-old man developed progressing headaches, systemic dizziness, double vision, facial muscles paresis on the right, choking from swallowing. He was diagnosed with acute viral encephalitis. Identify the main tendency of the emergency treatment:
- A. Zovirax

**B.** Glucocorticoids

C. Ceftriaxone

**D.** Lasix

E. Haemodezum

57. A 54-year-old male patient complains of aching pain in the lumbar region, that is getting worse after standing in an upright position, physical exercise, supercooling. The patient also reports of experiencing weakness in the

afternoon. Pain in the lumbar region, said about 10 years old. Objectively: pale skin,  $t^o$ -  $37, 2^oC$ , AP- 180/100 mm Hg, minor costovertebral angle tenderness (Pasternatsky symptom). In blood: RBCs -  $3, 5 \cdot 10^{12}$ /l, WBCs -  $6, 5 \cdot 10^9$ /l, ESR - 22 mm/h. In urine: the relative density - 1010, leukocytes - 12-15 in the field of vision, erythrocytes - 2-3 in the field of vision. Urine bacterial count - 100000 in 1 ml. What is the most likely diagnosis?

A. Chronic pyelonephritis

**B.** Nephrolithiasis

**C.** Polycystic renal disease

**D.** Chronic glomerulonephritis

**E.** Amyloidosis

- **58.** A 49-year-old male patient complains of dyspnea of combined nature, cough, shin edemata, abdomen enlargement due to ascites. He has a 20-year history of chronic bronchitis. For the last 3 years he has been disabled (group II) because of cardiac changes. Objectively: mixed cyanosis, edemata. Ps - 92/min, rhythmic, AP - 120/70 mm Hg, respiration rate - 24/min. There is accentuation of the second sound above the pulmonary artery. Auscultation reveals the box resonance above the lungs. There are also dry rales over the entire surface of lungs. What is the mechanism of heart changes development in this patient?
- **A.** Euler-Liljestrand reflex

B. Kitaev's reflex

**C.** Bainbridge reflex

**D.** Cardiovascular reflex

**E.** Respiratory reflex

- **59.** A 43-year-old female patient complains of unstable defecation with frequent constipations, abdominal swelling, headache, sleep disturbance. Body weight is unchanged. What disease are these clinical presentations typical for?
- **A.** Irritable colon syndrome

**B.** Chronic enteritis

**C.** Chronic pancreatitis

**D.** Chronic atrophic gastritis

**E.** Colorectal cancer

**60.** A 43-year-old man who often contacts with ethyl gasoline was admitted to a hospital with complaints of general weakness, dizziness, memory impairment, sleepiness at daytime and insomnia at night, sensation of a hair in the mouth, colicky pains in the right subcostal region. What is the most likely diagnosis?

- **A.** Chronic tetraethyl lead intoxication
- **B.** Alcoholic delirium
- C. Chronic mercury intoxication
- **D.** Chronic manganese intoxication
- **E.** Chronic lead intoxication
- **61.** A 35-year-old patient has been in the intensive care unit for acute renal failure due to crush for 4 days. Objectively: the patient is inadequate. Breathing rate  $32/\min$ . Over the last 3 hours individual moist rales can be auscultated in lungs. ECG shows high T waves, right ventricular extrasystoles. CVP  $159 \, \text{mm}$  Hg. In blood: the residual nitrogen  $62 \, \text{millimole/l}$ ,  $K^+$   $71 \, \text{millimole/l}$ ,  $Cl^ 78 \, \text{millimole/l}$ ,  $Na^+$   $120 \, \text{millimole/l}$ , Ht 0.32, Hb  $100 \, \text{g/l}$ , blood creatinine  $0.9 \, \text{millimole/l}$ . The most appropriate method of treatment would be:
- A. Hemodialysis
- **B.** Plasma sorption
- **C.** Hemosorption
- **D.** Plasma fiÎtration
- E. Ultrafiltration
- **62.** A 47-year-old woman underwent a thyroid gland resection on ccount of nodular euthyroid goiter. What preparations are most likely to prevent the disease recurrence?
- **A.** Thyroid hormones
- **B.** Mercazolil
- **C.** Thyrotropin
- **D.** Antistruminum (potassium iodide)
- E. Radioactive iodine
- **63.** A 30-year-old man was injured in a fire and got thermic burns of III-A and III-B degree that affected 20% of the total skin. AP 110/70 mm Hg, heart rate -120/min. What transfusion means should be used for blind infusion before transportation?
- **A.** Saline solutions
- **B.** Polyglycine
- **C.** 10% glucose solution
- **D.** Fresh frozen plasma
- E. Albumin
- **64.** A patient has an over a year-old history of fast progressive rheumatoid arthritis. X-raying confirms presence of marginal erosions. What basic drug would be the most appropriate in this case?

- A. Methotrexate
- **B.** Chloroquine
- **C.** Prednisolone
- D. Diclofenac sodium
- **E.** Aspirin
- **65.** A 3-year-old child has been delivered to a hospital in soporose state with considerable amyotonia, inhibition of tendon and periosteal reflexes. Miosis and asthenocoria are also present. Corneal reflexes are preserved. Pulse is rapid and weak. AP- 80/50 mm Hg. The parents suspect the child of accidental taking some tablets. Such clinical presentations are typical for intoxication with the following tableted drugs:
- A. Tranquilizers
- **B.** Antropine drugs
- **C.** Antihypertensive drugs
- **D.** Barbiturates
- **E.** Beta-2-adrenoceptor agonists
- **66.** A 23-year-old patient complains of a dull ache, sensation of heaviness and distention in the epigastrium immediately after meals, foul-smelling eructation; dry mouth, empty stomach nausea, diarrhea. Objectively: the skin is pale, the patient is of thin build. Abdomen is soft on palpation, there is epigastric pain. The liver does not extend beyond the costal arch. In blood: Hb 110 g/l, RBCs  $3.4 \cdot 10^{12}$ /l, WBC count is normal. ESR 16 mm/h. What is the most informative study that will allow make a diagnosis?
- **A.** Esophageal gastroduodenoscopy
- **B.** X-ray of digestion organs
- **C.** Study of gastric juice
- **D.** pH-metry
- **E.** Duodenal probing
- 67. A 49-year-old patient complains of deglutition problems, especially with solid food, hiccups, voice hoarseness, nausea, regurgitation, significant weight loss (15 kg within 2,5 months). Objectively: body weight is reduced. Skin is pale and dry. In lungs: vesicular breathing, heart sounds are loud enough, heart activity is rhythmic. The abdomen is soft, painless on palpation. Liver is not enlarged. What study is required to make a diagnosis?
- **A.** Esophageal duodenoscopy along with biopsy
- **B.** Clinical blood test
- **C.** X-ray of digestive tract organs
- **D.** X-ray in Trendelenburg's position
- **E.** Study of gastric secretion

- **68.** A 60-year-old patient has been admitted to a hospital with complaints of dyspnea, tightness in the right subcostal area, abdomen enlargement. These presentations have been progressing for a year. Heart auscultation reveals presystolic gallop rhythm. Objectively: swelling of the neck veins, ascites, palpable liver and spleen. What disease requires differential diagnostics?
- **A.** Constrictive pericarditis
- **B.** Hepatocirrhosis
- **C.** Lung cancer with invasion to the pleura
- **D.** Chronic pulmonary heart
- E. Pulmonary embolism
- **69.** A 40-year-old patient, the forester, complains of severe headache, body temperature rise up to 39, 5°C, trembling limbs. From the patient's history we know that he had seriously cut his hand during the dissection of a killed fox. Objectively: depressed mood. The patient asks not to turn on the light or open the door. Any noise causes apparent motor excitation. When he saw a carafe of water, he developed convulsive throat spasms. What tactics should an emergency doctor choose?
- **A.** Deliver the patient to the infectious disease hospital
- **B.** Deliver the patient to the resuscitation department
- **C.** Deliver the patient to the neurological department
- **D.** Deliver the patient to the psychiatric hospital
- **E.** Let him stay at home and consult a psychiatrist
- **70.** A 5-year-old child developed an acute disease starting from body temperature rise up to  $38,5^{\circ}C$ , running nose, cough and conjunctivitis. On the 4th day the child presented with maculo-papular rash on face. Body temparature rose again up to  $39,2^{\circ}C$ . Over the next few days the rash spread over the whole body and extremities. Mucous membrane of palate was hyperemic, there was whitish deposition on cheek mucous membrane next to molars. What is your provisional diagnosis?
- **A.** Measles
- **B.** Acute viral respiratory infection
- **C.** Yersinia
- **D.** Enterovirus diseases
- E. Rubella
- **71.** A 28-year-old woman has a 12-year hi-

story of chronic glomerulonephritis with latent course. Over the past six months she has developed general weakness, loss of appetite, low work performance, nausea. The patient complains of headache, pain in the joints. On examination: anemia, blood urea - 34,5 millimole/l, blood creatinine - 0,766 millimole/l, hyperkalemia. What complication has developed?

- **A.** Chronic renal insufficiency
- **B.** Acute renal insufficiency
- **C.** Nephrotic syndrome
- **D.** Renal amyloidosis
- **E.** Pyelonephritis
- 72. A child is 1 year old. Ater the recent introduction of complementary feeding the child has presented with loss of appetite, diarrhea with large amounts of feces and occasional vomiting, body temperature is normal. Objectively: body weight is 7 kg, the child is very pale, there are edemata of both legs, abdomen is significantly enlarged. Coprogram shows many fatty acids and soaps. The child has been diagnosed with celiac disease and administered the gluten-free diet. What is to be excluded from the ration?
- A. Cereals wheat and oats
- **B.** Milk and dairy products
- **C.** Fruit
- **D.** Animal protein
- E. High digestible carbohydrates
- 73. Development of chronic venous insufficiency of lower extremities depends on the functional condition of so-called musculovenous pump. This term refers to the following group of muscles:
- **A.** Shin muscles
- **B.** Abdominal wall muscles
- **C.** Buttock region muscles
- D. Thigh muscles
- E. Foot muscles
- 74. After treating a field with pesticides a machine operator presents with great weakness, headache, nausea, vomiting, diarrhea, visual impairment, watery eyes. Objectively: the patient is excited, hypersalivation, hyperhidrosis, muscle fibrillation of tongue and eyelids are oberved. Pupils are narrowed, there is tachycardia, lung auscultation reveals moist small and medium bubbling rales. In blood: changed level of cholinesterase activity. What is the most likely diagnosis?

- **A.** Intoxication with organophosphorous pesticides
- **B.** Intoxication with organochlorine pesticides
- **C.** Intoxication with organomercurial pesticides
- **D.** Intoxication with arsenic-containing pesticides
- **E.** Intoxication with carbamic acid derivatives
- **75.** A 7-year-old child was brought to a doctor for a check. The child has a 4-year history of bronchial asthma, asthma attacks occur mainly in spring and summer. Allergy tests revealed hypersensitivity to poplar seed tufts, field herbs. What recommendation should be given?
- A. Specific hyposensitization
- **B.** Physiotherapy
- C. Treatment at a health resort
- **D.** Phytotherapy
- **E.** Needle reflexotherapy
- **76.** A farmer hurt his right foot during working in a field and came to the emergency station. He doesn't remember when he got last vaccination and he has never served in the army. Examination of his right foot revealed a contaminated wound up to 5-6 cm long with uneven edges. The further treatment tactics will be:
- **A.** To make an injection of tetanus anatoxin and antitetanus serum
- **B.** To make an injection of tetanus anatoxin
- **C.** To make an injection of antitetanus serum
- **D.** Surgical d-bridement only
- E. To administer an antibiotic
- 77. A 35-year-old patient has been admitted to a hospital for pain in the left sternoclavicular and knee joints, lumbar area. The disease has an acute character and is accompanied by fever up to  $38^{\circ}C$ . Objectively: the left sternoclavicular and knee joints are swollen and painful. In blood: WBCs  $9, 5 \cdot 10^{9}$ /l, ESR 40 mm/h, CRP 1,5 millimole/l, fibrinogen 4,8 g/l, uric acid 0,28 millimole/l. Examination of the urethra scrapings reveals chlamydia. What is the most likely diagnosis?

- **A.** Reiter's syndrome
- **B.** Rheumatic arthritis
- C. Gout
- **D.** Bechterew's disease
- **E.** Rheumatoid arthritis
- **78.** Topographic percussion of lungs in a patient who got a serious job-related barotrauma revealed that the lower lungs borders were located one rib below normal, there was a significant increase in both lungs height and Kronig's isthmus. What disease should be suspected in the first place?
- **A.** Pulmonary emphysema
- **B.** Exudative pleuritis
- **C.** Chronic bronchitis
- D. Bronchial asthma
- E. Pneumothorax
- **79.** A 32-year-old patient lives in an area endemic for echinococcosis. In the last 6 months he reports of pain in the right subcostal area, fever. He is suspected to have liver echinococcosis. What study would be the most informative in this case?
- A. USI
- **B.** Survey radiography of abdominal cavity
- **C.** Biochemical laboratory examination
- **D.** Angiography
- E. Liver scanning
- **80.** A 30-year-old gravida consulted a gynecologist about bright red bloody discharges from the vagina in the 32 week of gestation. She was hospitalized with a suspicion of placental presentation. Under what conditions is it rational to conduct the internal examination in order to make a diagnosis?
- **A.** In the operating room prepared for the operation
- **B.** In the examination room of antenatal clinic
- **C.** In the admission ward of maternity hospital
- **D.** În the delivery room keeping to all the aseptics regulations
- **E.** The examination is not to be conducted because of risk of profuse haemorrhage
- **81.** After a serious nervous stress a 35-year-old patient has developed on the dorsal surface of hands redness and swelling that were later replaced by small inflammatory nodules, vesicles and following erosion with a significant serous discharge. The process is accompanied by severe itching. What is the most likely di-

agnosis?

- A. True eczema
- B. Allergic dermatitis
- C. Microbal eczema
- **D.** Simple contact dermatitis
- **E.** Toxicoderma
- **82.** A 36-year-old patient complains of skin rash that appeared a week ago and doesn't cause any subjective problems. Objectively: palm and sole skin is covered with multiple lenticular disseminated papules not raised above the skin level. The papules are reddish, dense on palpation and covered with keratinous squamae. What is the provisional diagnosis?
- A. Secondary syphilis
- **B.** Verrucosis
- **C.** Palmoplanar psoriasis
- **D.** Palmoplanar rubrophytosis
- **E.** Palm and sole callosity
- 83. A 30-year-old patient complains of paroxysmal abdominal pain, frequent liquid stools up to 10 times a day. Throughout the first 3 days he had a fever, since the 2nd day of disease there were scant liquid stools mixed with mucus. On palpation: tenderness of all colon segments. Sigmoid colon was found spastic. What is your provisional diagnosis?
- **A.** Acute dysentery
- **B.** Intestinal amebiasis
- C. Salmonellosis
- D. Cholera
- E. Balantidiasis
- **84.** A 38-year-old woman experiences episodic increases in arterial pressure up to 240/120 mm Hg, which is accompanied by nausea, vomiting, tachycardia, increased sweating, hyperglycemia. The attack is usually followed by the excessive urination. Renal sonography reveals an additional formation adjacent to the upper pole of the right kidney and possibly belonging to the adrenal gland. What laboratory test will allow to clarify the diagnosis?
- **A.** Determination of urinary excretion of catecholamines and vanillylmandelic acid
- **B.** Blood test for insulin and C-peptide
- C. Estimation of glomerular filtration rate by measuring endogenous creatinine clearance
- **D.** Blood test for thyroxine and thyrotrophic hormone
- E. Blood test for renin level

- **85.** A 32-year-old patient has a 3-year history of asthma attacks, that can be hardly stopped with berotec. Over a few last months he has experienced pain in the joints and sensitivity disorder of legs and feet skin. Ps 80/min, AP 210/100 mm Hg. In blood: eosinophilia at the rate of 15%. What disease can be suspected in this case?
- A. Periarteritis nodosa
- **B.** Systemic lupus erythematosus
- C. Systemic scleroderma
- **D.** Ďermatomyositis
- E. Wegener's disease
- **86.** A 46-year-old patient complains of sudden palpitation, which is accompanied by pulsation in the neck and head, fear, nausea. The palpitation lasts for 15-20 minutes and is over after straining when holding her breath. What kind of cardiac disorder may be suspected?
- **A.** An attack of supraventricular paroxysmal tachycardia
- **B.** An attack of ventricular paroxysmal tachycardia
- C. An attack of atrial flutter
- D. An attack of ciliary arrhythmia
- **E.** An attack of extrasystolic arrhythmia
- 87. The patient complains of a painful swelling in the chin region, malaise, headache. Examination reveals an acutely inflamed cone-shaped dense node. The skin over it is tense, red. In the center of the node there is an ulcer with overhanging edges and a necrotic core of a dirty-green colour. Submandibular lymph nodes on the right are enlarged and painful. What is the most likely diagnosis?
- A. Furuncle
- **B.** Tuberculosis
- **C.** Carbuncle
- **D.** Tertiary syphilis (gummatous form)
- E. Parasitic sycosis
- **88.** A welder at work got the first-degree burns of the middle third of his right shin. 5 days later the skin around the burn became edematic and itchy. Objectively: on a background of a well-defined erythema there is polymorphic rash in form of papules, vesicles, pustules, erosions with serous discharge. What is the most likely diagnosis?

- A. Microbal eczema
- **B.** True eczema
- C. Toxicoderma
- **D.** Occupational eczema
- **E.** Streptococcal impetigo
- 89. A 58-year-old patient has a 3-year history diabetes mellitus type II. He has been keeping to a diet and regularly taking glyburide. He has been delivered to a hospital on an emergency basis for acute abdomen. Objectively: the patient is of supernutrition type. The skin is dry. In the lungs vesicular breathing can be auscultated. Heart sounds are regular, 90/min. AP- 130/70 mm Hg. The symptom of "wooden belly"is visible. Blood sugar 9,8 millimole/l. The patients has indication for laparotomy. What is the most appropriate way of further treatment of diabetes?
- **A.** To administer short insulin
- **B.** To continue taking glyburide
- **C.** To administer Semilong to be taken in the morning and insulin in the evening
- **D.** To administer 1 tablet of Glurenorm three times a day
- **E.** To administer 1 tablet of Maninil three times a day
- **90.** An 8-year-old girl has been admitted to the cardiology department. Objectively: there is a skin lesion over the extensor surfaces of joints with atrophic cicatrices, depigmentation, symmetrical affection of skeletal muscles (weakness, edema, hypotrophy). What disease are these changes most typical for?
- **A.** Dermatomyositis
- **B.** Systemic scleroderma
- C. Nodular periarteritis
- **D.** Systemic lupus erythematosus
- E. Reiter's disease
- 91. A 43-year-old female patiet complains of eruption on her right leg skin, pain, weakness, body temperature rise up to 38°C. The disease is acute. Objectively: there is an edema on the right leg skin in the region of foot, a well-defined bright red spot in form of flame tips which feels hot. There are isolated vesicles in focus. What is your provisional diagnosis?
- **A.** Erysipelas
- **B.** Microbial eczema
- **C.** Contact dermatitis
- **D.** Toxicoderma
- E. Haemorrhagic vasculitis
- 92. A 45-year-old patient complains of

some painless nodular elements tending to peripheral growth and fusion. He has a 2-year history of this disease. Aggravation takes place mainly in spring. In anamnesis: the patient's father had similar skin lesions. Objectively: pathological elements looke like guttate and nummular nodules, plaques covered with white scales. What is your provisional diagnosis?

- **A.** Psoriasis
- **B.** Lichen ruber planus
- C. Neurodermitis
- **D.** Pityriasis rosea
- E. Seborrheic eczema
- 93. 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 to  $40^{\circ}C$  and lasted up to 7 hours, then dropped abruptly, which caused profuse sweat. There were three such attacks occuringonce 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
- **94.** On the 2 nd day of illness a 27-year-old patient complains of the 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. Occipital 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. What is the reason for the leading syndrome of this disease?
- **A.** Liquor hypertension
- **B.** Liquor hypotension
- C. Affection of the cranial nerve nuclei
- **D.** Haemorrhages into the adrenal glands
- **E.** Hyperthermy
- 95. On the 1st day of life a full-term girl (2nd labour) weighing 3500g, with Apgar score of 8 points, presented with jaundice. Indirect bilirubin of blood was 80 micromole/l, 6 hours later 160 micromole/l. What is the optimal method of treatment?

- A. Exchange blood transfusion
- **B.** Phototherapy
- **C.** Infusion therapy
- **D.** Phenobarbital treatment
- **E.** Enterosorbents
- **96.** A 42-year-old female patient suffers from micronodular cryptogenic cirrhosis. Over the last week her condition has deteriorated: there appeared convulsions, mental confusion, increased jaundice. What study may explain such aggravation?
- **A.** Determination of serum ammonia
- **B.** Determination of cholesterol ethers
- **C.** Determination of alpha-phetoprotein rate
- **D.** Determination of ALAT and ASAT
- **E.** Determination of alkaline phosphatase rate
- **97.** A 30-year-old patient was hospitalized with a diagnosis: intestinal obstruction. During the surgery it was revealed that the obstruction of the small intestine had been caused by a mass of helminths. What helminths are these?
- A. Ascarids
- **B.** Guinea worms
- **C.** Filarial worms
- **D.** Cysticerci
- E. Pinworms
- **98.** On the 5th day after a surgery for colon injury a patient complains of bursting pain in the postoperative wound, weakness, drowsiness, headache, fever up to  $40^{\circ}C$ . Objectively: the skin around the wound is swollen, there is gas crepitation. The wound discharges are scarce foulsmelling, of dark-gray colorl. What is the most likely diagnosis?
- A. Anaerobic clostridial wound infection
- **B.** Abscess
- **C.** Postoperative wound infection
- **D.** Erysipelas
- E. Phlegmon
- **99.** A child was born at a gestational age of 34 weeks in grave condition. The leading symptoms were respiratory distress symptoms, namely sonorous and prolonged expiration, involving additional muscles into respiratory process. The Silverman score at birth was 0 points, in 3 hours it was 3 points with clinical findings. Which diagnostic study will allow to diagnose the form of pneumopathy?

- A. X-ray of chest
- **B.** Clinical blood test
- **C.** Determination of blood gas composition
- D. Proteinogram
- E. Immunoassay
- **100.** A children's surgical unit admitted a 1-month-old boy who had been prenatally diagnosed with the left-sided pyelectasis. Such studies as drip infusion urography, cystography and USI allowed to reveal initial hydronephrosis. There is no information confirming the secondary pyelonephritis. What tactics of this patient management is most advisable?
- **A.** 6-month surveillance
- **B.** Urgent nephrostomy
- **C.** Anderson-Hynes operation
- **D.** There is no need in further surveillance and treatment
- **E.** Antibacterial therapy
- **101.** A 24-years-old patient has chronic glomerulonephritis. Urine test reveals the following: the relative density is 1010, protein 1,65 g/l, RBCs 5-7 in the field of vision, WBCs 2-3 in the field of vision. Blood creatinine 0,350 millimole/l. Serum sodium 148 millimole/l. What is the main reason for hyperazotemia in this patient?
- **A.** Reduction of glomerular filtration rate
- **B.** Reduction of tubular reabsorption rate
- **C.** Increased proteinuria
- **D.** Reduction of renal blood flow
- **E.** Sodium retention in the organism
- 102. After an accident a patient complains of pain in the hip joint. Objectively: the leg is in the position of flexion, adduction and internal rotation, significantly contracted. There is elastic resistance to passive adduction or abduction of the extremity. Major trochanter is located high above the Roser-Nelaton line. A significant lordosis is present. What is your provisional diagnosis?
- **A.** Iliac dislocation of hip
- **B.** Femoral neck fracture with a displacement
- **C.** Cotyloid cavity fracture with a central dislocation of hip
- **D.** Inferoposterior dislocation of hip
- **E.** Pertrochanteric fracture of hip
- **103.** As a result of prolonged exposure to the sun a 20-year-old patient has developed low-grade fever, pain and swelling in the knee and ankle joints,

erythema on her face and nose bridge, leukopenia and accelerated ESR. She has been provisionally diagnosed with systemic lupus erythematosus. What pathognomonic laboratory data may confirm this diagnosis?

A. Antinuclear factor

**B.** Accelerated ESR

C. C-reactive protein

**D.** Anaemia

E. Lymphocytosis

**104.** Examination of the corpse of a man who died from hanging reveals: death spots disappear when pressed upon and restore after 50 seconds, rigor mortis is moderately expressed only in the masticatory muscles as well as neck and finger muscles, body temperature is of  $31^{\circ}C$ . The time of death:

A. 6-7 hours ago

**B.** 1-2 hours ago

**C.** 16-24 hours ago

**D.** 8-10 hours ago

**E.** 10-18 hours ago

**105.** After contusion of the right eye a patient complains of sudden loss of vision with remaining light perception. Objectively: the eye is not irritated. The cornea is transparent. Pupil reacts to light. The pupil area is black. The fundus reflex is absent. What is the most likely cause of vision loss?

A. Hemophthalmia

**B.** Retinal detachment

**C.** Traumatic cataract

**D.** Acute occlusion of retinal vessels

**E.** Optic nerve avulsion

**106.** A 68-year-old patient consulted a doctor about a tumour in her left breast. Objectively: in the upper internal quadrant of the left breast there is a neoplasm up to 2,5 cm in diameter, dense, uneven, painless on palpation. Regional lymph nodes are not enlarged. What is the most likely diagnosis?

A. Cancer

**B.** Cyst

**C.** Fibroadenoma

**D.** Mastopathy

E. Lipoma

**107.** A 65-year-old patient complains of pain in the lumbar spine, moderate disuria. He has been suffering from these presentations for about half a year. Prostate volume is  $45 \text{ } cm^3$  (there

are hypoechogenic nodes in both lobes, capsule invasion). The rate of prostate-specific antigen is 60 ng/l. Prostate biopsy revealed an adenocarcinoma. Which of the supplemental examination methods will allow to determine the stage of neoplastic process in this patient?

**A.** Computer tomography of pelvis

**B.** Roentgenography of lumbar spine

**C.** Excretory urography

**D.** Bone scintigraphy

**E.** Roentgenography of chest

**108.** 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

**109.** The air of a foundry worker's working zone contains condensation aerosol with dust particles sized 2 nm (90%), 2-5 nm (2%), over 5 nm(6%), below 2 nm (about 2%). Characterize the dust dispersivity:

**A.** Fine-dispersed

**B.** Median-dispersed

**C.** Coarsely dispersed

**D.** Ultrafine-dispersed

E. Mist

110. A 40-year-old female patient complain of headache, dizziness, muscle weakness, sometimes - 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
- 111. A patient is 30 years old, works as a carpenter. Six months ago there appeared some behavioural changes: he got interested in philosophy, began writing a treatise on the purpose of his human existence, quitted his job, stopped caring about his children, went out carelessly dressed, heard "voices in his head"that guided his behaviour. The patient claimed sure that he was an Ambassador of God on Earth and was constantly feeling His influence. He is not critical about his disease. What diagnosis can be assumed?
- A. Schizophrenia
- **B.** Alcocholic psychosis
- C. Reactive psychosis
- **D.** Somatogenic psychosis
- E. Organic psychosis
- **112.** 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  $B_{12}$
- 113. 2 days ago a patient presented with acute pain in the left half of chest, general weakness, fever and headache. Objectively: between the 4 and 5 rib on the left the skin is erythematous, there are multiple groups of vesicles 2-4 mm in diameter filled with transparent liquid. What diease are these symptoms typical for?
- **A.** Herpes zoster
- **B.** Pemphigus
- **C.** Herpes simplex
- **D.** Streptococcal impetigo
- **E.** Herpetiform Duhring's dermatosis
- **114.** 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
- 115. The institutions which take part in carrying out 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
- 116. 10 minutes after delivery a woman discharged placenta with a tissue defect 5x6 cm large. Discharges from the genital tracts were profuse and bloody. Uterus tonus was low, fundus of uterus was located below the navel. Examination of genital tracts revealed that the uterine cervix, vaginal walls, perineum were intact. There was uterine bleeding with following blood coagulation. Your actions to stop the bleeding:
- **A.** To make manual examination of uterine cavity
- **B.** To apply hemostatic forceps upon the uterine cervix
- **C.** To introduce an ether-soaked tampon into the posterior fornix
- **D.** To put an ice pack on the lower abdomen
- **E.** To administer uterotonics
- 117. 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 · 10<sup>9</sup>/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

- 118. A surgeon examined a 42-yearold patient and diagnosed him with right forearm furuncle at the purulonecrotic stage. The furuncle was lanced. At the hydration stage the wound dressing should enclose the following medication:
- **A.** Hypertonic solution
- **B.** Vishnevsky ointment
- C. Ichthyol ointment
- **D.** Chloramine
- E. Dimexide
- 119. After a 10-year-old child had been bitten by a bee, he was delivered to a hospital. There were lip, face and neck edemata. The patient felt hot and short of breath. Objectively: breathing was laboured and noisy. There were foamy discharges from the mouth, cough. The skin was pale and cold. There was bradypnoea. Heart sounds were muffled and arrhythmic. Thready pulse was present. What diagnosis was made by the expert in resuscitation?
- A. Anaphylactic shock
- **B.** Quincke's edema
- C. Bronchial asthma
- **D.** Acute cardiovascular collapse
- E. Cerebral coma
- **120.** Half an hour after a 30-year-old woman had had some custard cake, she experienced lancinating abdominal pain, nausea, vomiting. Objectively: body temperature  $36,0^{\circ}C$ , pale skin, breathing rate  $20/\min$ , Ps-  $100/\min$ . AP- 95/65 mm Hg, loud cardiac sounds. Dry tongue. Abdomen was painful in its epigastrial part, there were no signs of peritoneum irritation. What is the first measure to be taken?
- **A.** Gastric lavage
- **B.** Administration of an enterosorbent
- **C.** Injection of Cerucal
- **D.** Intravenous rehydratation
- **E.** Antibiotic therapy
- 121. 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°C, severe headache, dyspnea, cough with frothy rusty sputum. Objectively: the patient is pale, mucous membranes are cyanotic, breathing rate 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
- **122.** HIV displays the highest tropism towards the following blood cells:
- **A.** T-helpers
- **B.** T-suppressors
- C. T-killers
- **D.** Thrombocytes
- **E.** Erythrocytes
- **123.** Educational rooms are illuminated with various lighting fittings. What type of lighting fittings is the most appropriate in respect of hygienic norms?
- A. Indirect light fittings
- **B.** Direct light fittings
- **C.** Semi-reflected light fittings
- **D.** Ambient light fittings
- **E.** Combined light fittings
- **124.** A 24-year-old female patient complains of acute pain in the lower abdomen that turned up after a physical stress. She presents with nausea, vomiting, dry mouth and body temperature  $36,6^{\circ}C$ . She has a right ovarian cyst in history. Bimanual examination reveals that uterus is dense, painless, of normal size. The left fornix is deep, uterine appendages aren't palpable, the right fornix is contracted. There is a painful formation on the right of uterus. It's round, elastic and mobile. It is 7x8 cm large. In blood: leukocytosis with the left shit. What is the most likely diagnosis?
- **A.** Ovarian cyst with pedicle torsion
- **B.** Right-sided pyosalpinx
- **C.** Subserous fibromyoma of uterus
- **D.** Acute metritis
- **E.** Extrauterine pregnancy
- **125.** A 39-year-old patient complains of a tumour on the anterior surface of her neck. The tumour has been observed for 2 years. It is nonmobile and has enlarged recently. The patient has a changed tone of voice, a sense of pressure. Objectively: in the left lobe of the thyroid gland a 3 cm node is palpable; it is very dense, tuberous, painless. Cervical lymph nodes are enlarged. Functional status of the thyroid gland is unchanged. What is the most likely diagnosis?

- A. Thyroid gland cancer
- **B.** Nodular euthyroid goiter
- **C.** Nodular hyperthyroid goiter
- **D.** Chronic lymphomatous Hashimoto's thyroiditis
- E. Chronic fibrous Riedel's thyroiditis
- **126.** A 22-year-old patient is a clerk. His working day runs in a conditioned room. In summer he was taken by an acute disease with the following symptoms: fever, dyspnea, dry cough, pleural pain, myalgia, arthralgia. Objectively: moist rales on the right, pleural friction rub. X-ray picture showed infiltration of the inferior lobe. In blood: WBC  $11 \cdot 10^9$ /l, stab neutrophils 6%, segmented neutrophils 70%, lymphocytes 8%, ESR 42 mm/h. What is the ethiological factor of pneumonia?
- A. Legionella
- **B.** Mycoplasm
- C. Streptococcus
- **D.** Staphylococcus
- E. Pneumococcus
- 127. A 53-year-old woman complained of cardiac pain and rhythm intermissions. She had experienced these presentations since childhood. The patient's father had a history of cardiac arrhythmias. Objectively: the patient was in grave condition, Ps 220 bpm, AP 80/60 mm Hg. ECG: heart rate 215/min, widening 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.**  $\beta$ -adrenoreceptor blocking agents
- C. Cholinolytics
- **D.** Calcium antagonists
- **E.** Cardiac glycosides
- **128.** A 47-year-old patient complains about cough with purulent sputum, pain in the lower part of the left chest, periodical body temperature rise. She has been suffering from these presentations for about 10 years. Objectively: "drumstick" distal phalanges. What examination would be the most informative for making a diagnosis?

- A. Bronchography
- **B.** Bronchoscopy
- **C.** Survey radiograph of lungs
- **D.** Pleural puncture
- E. Bacteriological analysis of sputum
- 129. 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
- **130.** A 3-year-old girl presents with pertussis-like cough with thick sputum. There have been persistent changes in lungs since the age of 6 months when she was first diagnosed with acute pneumonia. Chloride concentration in the perspiration is 112 mEq/l. The child has been diagnosed with mucoviscidosis. What is the basis for autosomal recessive disease mucoviscidosis?
- **A.** Inadequate transport of sodium and chloride ions
- **B.**  $\alpha_1$ -antitrypsin deficiency
- **C.** Deposition of calcium triphosphates and carbotates in the alveoles
- **D.** Pulmonary cysts
- **E.** Pulmonary artery hypoplasia
- **131.** A parturient woman is 23 years old. Vaginal obstetric examination reveals full cervical dilatation. There is no fetal bladder. Fetal head is in the plane of pelvic outlet. Sagittal suture is in mesatipellic pelvis, anterior fontanel is closer to pubes. The fetal head diameter in such presentation will be:
- **A.** Suboccipito-bregmaticus
- **B.** Fronto-occipitalis recta
- **C.** Biparietal
- **D.** Suboccipitio-frontalis
- **E.** Mento-occipitalis
- **132.** A 42-year-old woman has had

hyperpolymenorrhea and progressing algodismenorrhea for the last 10 years. Gynaecological examination revealed no changes of uterine cervix; discharges are moderate, of chocolate colour, uterus is slightly enlarged and painful, appendages are not palpable, the fornices are deep and painless. What is the most likely diagnosis?

- **A.** Uterine endometriosis
- **B.** Uterine carcinoma
- C. Subserous uterine fibromyoma
- **D.** Endomyometritis
- E. Adnexal endmetriosis
- 133. 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 and laparotomy
- **B.** Immediate upper middle laparotomy and following drainage of the left pleural cavity
- **C.** Immediate laparotomy and alcoholnovocaine block of the X rib
- **D.** Anti-schock actions and laparotomy following the arterial pressure rise
- **E.** Left-sided thoracotomy and immediately following laparotomy
- **134.** 15 minutes after the second vaccination with DTP vaccine a 4-month-old boy exhibited the symptoms of Quincke's edema. What medication should be given for emergency aid?
- A. Prednisolone
- **B.** Heparin
- **C.** Adrenalin
- **D.** Furosemide
- E. Seduxen
- 135. On the 2nd day after a surgery for toxic mixed goiter IV a 35-year-old patient complains of heart pain. ECG shows prolonged QT intervals. Chvostek's and Trousseau symptoms cannot be clearly defined. The patient is provisionally diagnosed with latent tetany. What study will allow to confirm the diagnosis?

- **A.** Determination of blood calcium and phosphor
- **B.** Determination of thyrotropic hormone
- C. Determination of potassim
- **D.** Determination of sodium
- **E.** Determination of thyroid hormones
- 136. A patient with bilateral hydrothorax has repeatedly undergone pleural puncture on both sides. After a regular puncture the patient's condition has become worse: he presents with fever, chest pain. The next day, the attending physician performing pleural puncture revealed some pus on the right. What is the mechanism of acute right-sided empyema development?
- A. Contact-and-aspiration
- **B.** Lymphogenous
- C. Hematogenous
- **D.** Implantation
- E. Aerial
- **137.** A student analyzes noise level of cold-pressing process. What device should be applied for this hygienic study?
- **A.** Noise and vibration analyzer
- **B.** Noise analyzer
- **C.** Sound tester
- **D.** Actinometer
- **E.** Pyranometer
- **138.** Environmental pollution is prevented by mechanical separation of nontoxic solid domestic waste. Specify the method which can be used for mechanical utilization of these wastes:
- **A.** Compressing of wastes into building blocks
- **B.** Hydrolysis
- **C.** Burning as power-plant fuel
- **D.** Burial of wastes
- **E.** Waste neutralization in biothermal boxes
- 139. A 26-year-old woman complains of having bloody discharges from the genitals for the last 14 days, abdominal pain, general fatiguability, weakness, weight loss, fever, chest pain, obstructed respiration. 5 weeks ago she underwent an induced abortion in the 6-7 week of gestation. Objectively: the patient is pale and inert. Bimanual examination revealed that the uterus was enlarged up to 8-9 weeks of gestation. In blood: Hb 72 g/l. Urine test for chorionic gonadotropin gave the apparently positive result. What is the most likely diagnosis?

- A. Chorioepithelioma
- **B.** Metroendometritis
- **C.** Uterus perforation
- **D.** Uterine fibromyoma
- E. Uterine carcinoma
- **140.** A 28-years-old woman complains of nausea and vomiting about 10 times per day. She has been found to have body weight loss and xerodermia. The pulse is 100 bpm. Body temperature is  $37,2^{\circ}C$ . Diuresis is low. USI shows 5-6 weeks of pregnancy. What is the most likely diagnosis?
- **A.** Moderate vomiting of pregnancy
- **B.** Mild vomiting of pregnancy
- **C.** I degree preeclampsia
- **D.** Premature abortion
- **E.** Food poisoning
- **141.** A full-term baby was born with body weight of 3200 g, body length of 50 cm, Apgar score 8-10 points. What is the optimum time for the first breast-feeding?
- **A.** First 30 minutes
- **B.** First 6 hours
- C. First 24 hours
- **D.** First 48 hours
- E. After 48 hours
- 142. A 26-year-old patient with left lower lobe pneumonia experiences an acute chest pain on the left during coughing. Objectively: diffuse cyanosis, widening of the left half of chest. Percussion reveals high tympanitis. Auscultation reveals no respiratory murmurs above the left half 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
- 143. A 3-year-old child has been taken to a pediatrician. He has no recent history of any diseases. Objective examination revealed no pathology of the internal organs. The child needs the routine immunization against the following disease:

- A. Poliomyelitis
- **B.** Diphtheria and tetanus
- C. Measles, rubella, parotitis
- **D.** Pertussis
- **E.** Type B hepatitis
- **144.** A 40-year-old patient underwent an operation for a lumbar phlegmon. Body temparature rose again up to  $38^{\circ}C$ , he got intoxication symptoms, there was an increase of leukocyte number in blood. The wound that was nearly free from necrotic tissues and full of granulations started to discharge pus, the granulations turned pale. What complication dveloped in this patient?
- **A.** Sepsis
- B. Putrid phlegmon
- C. Erysipelas
- **D.** Allergic reaction
- **E.** Erysipeloid
- **145.** After a car accident a 37-year-old patient has an acute pain and bleeding in the middle third of his right thigh. Objectively: there is a wound on the anterior surface of the right thigh with massive bleeding, abnormal mobility at the level of the middle third of the thigh. The first aid is to be started with:
- **A.** Digital occlusion of the femoral artery
- **B.** Injection of pain-killers
- **C.** Tourniquet application
- **D.** Immobilization of the extremity with a transportation splint
- **E.** Venipuncture and intravenous infusion of polyglycine
- **146.** A 9-year-old boy fell from a tree and hit the occipital region, there was a momentary loss of consciousness. Objectively: the child's condition is satisfactory, he complains of the headache and dizziness. The X-ray of skull reveals a comminuted depressed fracture of occipital bone in the region of inion. What treatment is indicated for the patient?
- **A.** Surgical intervention
- **B.** Anti-inflammatory therapy
- **C.** Hemostatic therapy
- **D.** Therapeutic lumbar punctures
- **E.** Complex conservative treatment
- 147. A 40-year-old female patient has a history of rheumatism. She complains about acute pain in her left eye, especially at night, vision impairment, photophobia, lacrimation. The patient cannot suggest any reasons for the disease. Objectively: weak pericorneal injection, flattening of

iris relief, iris discoloration. What is the most likely diagnosis?

A. Iridocyclitis

**B.** Iritis

**C.** Keratitis

**D.** Choroiditis

E. Acute attack of glaucoma

148. 14 days ago a 49-year-old patient was operated on for perforated appendicitis and disseminated fibrinopurulent peritonitis. The postoperative period was uneventful. On the 9th day the patient presented with low-grade fever, abdominal pain, frequent liquid stools. USI of the left mesogastrium reveals a fluid formation 9x10 cm large. In blood: leukocytosis with the left shift. What is your provisional diagnosis?

A. Interloop abscess

**B.** Abdominal cavity tumour

C. Liver abscess

**D.** Left kidney cyst

E. Spleen abscess

**149.** The Carpathian region is characterized by constant high humidity of atmospheric air (over 80%). Inhabitants of this region feel severe cold in corresponding season at a medium low temperature. It's caused by heat emission by:

A. Convection

**B.** Radiation

**C.** Vaporization

**D.** Conduction

E. -

**150.** 22-year-old female patient Α complains of dull pain in her right iliac area that she has been experiencing for a week, morning sickness and gustatory change. She has a histrory of menstruation delay for 3 weeks. Objectively: AP-80/50 mm Hg, pulse is 78 bpm, body temperature is  $37^{\circ}C$ . Bimanual examination reveals that uterus is enlarged, soft, mobile and painless. Uterine appendages are palpable on the right, there is a dense, elastic and moderately painful formation 3x4 cm large. What is the most likely diagnosis?

**A.** Progressing fallopian pregnancy

**B.** Interrupted fallopian pregnancy

C. Right ovarian cyst

**D.** Uterogestation

**E.** Acute appendicitis

**151.** 3 hours ago a 65-year-old female pati-

ent felt sharp abdominal pain irradiating to the right scapula, there was a single vomiting. She has a history of rheumatoid arthritis. Objectively: pale skin, AP-100/60 mm Hg, Ps-60/min. Abdomen is significantly painful and tense in the epigastrium and right subcostal areat, there are positive symptoms of parietal peritoneum irritation over the right costal arch, that is tympanitis. What is the tactics of an emergency doctor?

**A.** To take the patient to the surgical hospital

**B.** To inject pain-killers and watch the

dynamics

**C.** To perform gastric lavage **D.** To inject spasmolytics

E. To take the patient to the rheumatological department

**152.** A 72-year-old patient complains of pain and bleeding during defecation. Digital rectal investigation revealed a tumour of the anal canal. After verification of the diagnosis the patient was diagnosed with squamous cell carcinoma. The secondary (metastatic) tumour will be most probably found in:

A. Lungs

**B.** Liver

C. Pelvic bones

**D.** Mediastinum

E. Brain

**153.** A patient has a stab wound on his right foot. On the fourth day after injury the patient's body temperature rose up to  $38^{\circ}C$ , inguinal lymph nodes became enlarged and painful, skin over them reddened. What complication might be suspected?

A. Lymphadenitis

**B.** Lymphangitis

**C.** Phlegmon

**D.** Tetanus

**E.** Erysipelas

**154.** A 25-year-old female patient complains about having amenorrhea for 3 years. She associates it with difficult labour complicated by massive hemorrhage. She also complains of loss of weight, hair fragility and loss, lack of appetite and depression. Objective examination reveals no pathological changes of uterus and its appendages. What is the desease pathogenesis?

- A. Hypoproduction of gonadotropin
- **B.** Hyperproduction of estrogens
- **C.** Hyperproduction of androgens
- **D.** Hypoproduction of progesterone
- **E.** Hyperproduction of prolactin
- **155.** During a surgery on a 30-year-old patient a dark ileo-ileal conglomerate was discovered, the intussusceptum intestine was considered to be unviable. The intussuscipiens intestine was dilated to 7-8 cm, swollen, full of intestinal contents and gases. What pathology led to the surgery?
- **A.** Invagination (combined) obstruction
- B. Strangulation obstruction
- C. Obturation obstruction
- **D.** Paralytic obstruction
- E. Spastic obstruction
- **156.** In the current year general practitioners of the municipal polyclinic have referred 11 patients with coronary artery disease to the in-patient hospital. In 3 cases the diagnosis wasn't confirmed. What managerial decision should be made in such case?
- **A.** Analysis of each case of diagnostic divergence
- **B.** Analysis of medical check-up quality
- C. Analysis of diagnostic examination quality
- **D.** Analysis of doctors' skill level
- **E.** Analysis of material and technical basis of the polyclinic
- **157.** It is required to analyze the level of daylight illumination in a ward of therapeutics unit. What device should be applied to estimate the level of daylight illumination?
- **A.** Illuminometer
- **B.** Anemometer
- C. Katathermometer
- **D.** Actinometer
- **E.** Psychrometer
- **158.** A 43-year-old patient had been admitted to a hospital with clinical presentations of ischiorectal periproctitis. On the 12th day of treatment the patient's condition deteriorated: there was an increase in the rate of intoxication and hepatic failure, the body temperature became hectic, AP was 100/60 mm Hg. USI of liver revealed a hydrophilic formation. In blood: WBCs  $19.6 \cdot 10^9/l$ , RBCs.- $3.0 \cdot 10^{12}/l$ , Hb- 98 g/l. What complication was developed?

- **A.** Liver abscess
- **B.** Pylephlebitis
- C. Hepatic cyst
- **D.** Liver necrosis
- **E.** Budd-Chiari syndrome
- **159.** A 32-year-old gravida complains of episodes of unconsciousness, spontaneous syncopes that are quickly over after a change of body position. A syncope can be accompanied by quickly elapsing bradycardia. There are no other complications of gestation. What is the most likely reason for such condition?
- **A.** Postcava compresseion by the gravid uterus
- **B.** Pressure rise in the veins of extremities
- **C.** Pressure fall in the veins of extremities
- **D.** Vegetative-vascular dystonia (cardiac type)
- **E.** Psychosomatic disorders
- **160.** A 54-year-old female patient consulted a gynaecologist about bloody discharges from the vagina for 1 month. Last menstruation was 5 years ago. Gynaecological examination revealed no pathological changes. What is the tactics of choice?
- **A.** Diagnostic fractional curettage of uterine cavity
- **B.** Colposcopy
- C. USI
- **D.** Cytosmear
- **E.** Symptomatic therapy
- 161. A factory worker has ARD complicated by acute bronchitis. He receives treatment in the outpatient setting. The attending doctor has issued him a medical certificate for 5 days and then extended its duration by 5 more days. Patient can't get down to work because of his health status. Who should extend the duration of medical certificate for this patient?
- **A.** A department chief
- **B.** Medical superintendent
- **C.** Deputy medical superintendent in charge of temporary disability examination
- **D.** Deputy medical superintendent in charge of medical treatment
- **E.** Medical advisory commission
- **162.** An ambulance delivered a 21-year-old woman to the gynaecological department with complaints of colicky abdominal pain and bloody discharges from the genital tracts. Bimanual examination revealed that uterus was soft,

enlarged to the size of 6 weeks of gestation, a gestational sac was palpated in the cervical canal. Uterine appendages weren't palpable. Fornices are free, deep and painless. Discharges from the genital tracts are bloody and profuse. What is the most likely diagnosis?

- **A.** Abortion in progress
- **B.** Cervical pregnancy
- C. Threat of abortion
- **D.** Incipient abortion
- **E.** Interrupted fallopian pregnancy
- **163.** According to the report of water quality control, drinking city water has the following characteristics: turbidity 1,5 mg/m³, odour 3 points, metallic taste 2 points, pale yellow colour, colour index 20°, temperature 12°. Which of these factors doesn't comply with hygienic requirements?
- A. Odour
- **B.** Turbidity
- **C.** Colour index
- D. Temperature
- E. Taste
- 164. On the fifth day after a casual sexual contact a 25-year-old female patient consulted a doctor about purulent discharges from the genital tracts and itch. Vaginal examination showed that vaginal part of uterine cervix was hyperemic and edematic. There was an erosive area around the external orifice of uterus. There were mucopurulent profuse discharges from the cervical canal, uterine body and appendages exhibited no changes. Bacterioscopic examination revealed bean-shaped diplococci that became red after Gram's staining. What is the most likely diagnosis?
- A. Acute gonorrheal endocervicitis
- **B.** Trichomonal colpitis
- C. Candidal vulvovaginitis
- **D.** Clamydial endocervicitis
- E. Bacterial vaginism
- **165.** The correlation between the service record and eosinophil concentration in blood has been studied in female workers of dyeing shops of textile factories. What index will be the most informative for the analysis of this data?

- A. Correlation factor
- **B.** Student's criterion
- **C.** Standardized index
- **D.** Fitting criterion
- **E.** Sign index
- **166.** A 30-year-old female patient has been delivered to the gynaecological department with complaints of acute pain in the lower abdomen and body temperature 38, 8°C. In history: sexual life out of wedlock and two artificial abortions. Gynaecological examination reveals no changes of uterine. The appendages are enlarged and painful on both sides. Vaginal discharges are purulent and profuse. What study is required to confirm a diagnosis?
- **A.** Bacteriological and bacterioscopic analysis
- **B.** Hysteroscopy
- **C.** Curettage of uterine cavity
- **D.** Colposcopy
- **E.** Laparoscopy
- **167.** A 38-year-old patient complains of inertness, subfebrile temperature, enlargement of lymph nodes, nasal haemorrhages, bone pain. Objectively: the patient's skin and mucous membranes are pale, palpation revealed enlarged painless lymph nodes; sternalgia; liver was enlarged by 2 cm, spleen by 5 cm, painless. In blood: erythrocytes 2, 7 · 10<sup>12</sup>/l, Hb- 84 g/l, leukocytes 58 · 10<sup>9</sup>/l, eosinophils 1%, stab neutrophils 2%, segmented neutrophils 12%, lymphocytes 83%, lymphoblasts 2%, smudge cells; ESR- 57 mm/h. What is the most likely diagnosis?
- **A.** Chronic lymphatic leukemia
- **B.** Chronic myeloleukemia
- **C.** Acute lymphatic leukemia
- **D.** Acute myeloleukemia
- **E.** Lymphogranulomatosis
- **168.** A 25-year-old victim of a road accient complains of chest pain, dyspnea. Objectively: the patient is in a grave condition, Ps- 120/min, AP- 90/70 mm Hg.There is pathological mobility of fragments of III-V ribs on the right. Percussion reveals a box sound over the right lung, breathing sounds cannot be auscultated on the right. What examination should be administered in the first place?

- **A.** X-ray of chest organs
- **B.** Bronchoscopy
- **C.** Pleural puncture
- **D.** USI of chest organs
- **E.** Thoracoscopy
- **169.** A 24-year-old patient complains about putting on weight, limosis. Objectively: the patient's constitution is of hypersthenic type, body weight index is  $33.2 \, kg/m^2$ , waist circumference is  $100 \, \mathrm{cm}$ . Correlation of waist circumference to the thigh circumference is 0,95. What is the most likely diagnosis?
- **A.** Alimentary constitutional obesity of the I stage, abdominal type
- **B.** Hypothalamic Itsenko-Cushing obesity of the II stage, gynoid type
- C. Alimentary constitutional obesity of the III stage, gynoid type
- **D.** Alimentary constitutional obesity of the II stage, abdominal type
- **E.** Hypothalamic Itsenko-Cushing obesity of the I stage, abdominal type
- 170. A 58-year-old patient complains about sensation of numbness, sudden paleness of II-IV fingers, muscle rigidness, intermittent pulse. The patient presents also with polyarthralgia, dysphagia, constipations. The patient's face is masklike, solid edema of hands is present. The heart is enlarged; auscultation revealed dry rales in lungs. In blood: ESR 20 mm/h, crude protein 85/l,  $\gamma$ -globulines 25%. What is the most likely diagnosis?
- **A.** Systemic scleroderma
- **B.** Dermatomyositis
- C. Rheumatoid arthritis
- **D.** Systemic lupus erythematosus
- E. Raynaud's disease
- 171. A 45-year-old man has been exhibiting high activity for the last 2 weeks, he is talkative, euphoric, has little sleep, claims being able "to save the humanity and solve the problem of cancer and AIDS", gives money to starangers. What is the most likely diagnosis?
- A. Maniacal onset
- **B.** Panic disorder
- **C.** Agitated depression
- **D.** Schizo-affective disorder
- E. Catatonic excitation
- **172.** A parturient woman is 25 years old, it is her second day of postpartum period. It was her first full-term uncomplicated labour. The lochia should be:

- **A.** Bloody
- **B.** Sanguino-serous
- C. Mucous
- **D.** Purulent
- E. Serous
- **173.** A 32-year-old patient consulted a doctor about being inable to get pregnant for 5-6 years. 5 ago the primipregnancy ended in artificial abortion. After the vaginal examination and USI the patient was diagnosed with endometrioid cyst of the right ovary. What is the optimal treatment method?
- **A.** Surgical laparoscopy
- **B.** Anti-inflammatory therapy
- **C.** Conservative therapy with estrogengestagenic drugs
- **D.** Hormonal therapy with androgenic hormones
- E. Sanatorium-and-spa treatment
- 174. A 6-year-old girl drank some coloured fizzy drink which gave her a feeling of pressure in the throat. 30 minutes later the child's lips got swollen, then edema gradually spread over the whole face, laryngeal breathing became difficult. The child is excited. Ps- 120/min, breathing rate 28/min, breathing is noisy, indrawing of intercostal spaces is observed. What basic aid is most appropriate for the restoration of laryngeal breathing?
- A. Corticosteroids
- **B.** Sedative drugs
- **C.** Tracheostomy
- **D.** Antibacterial drugs
- **E.** Conicotomy
- 175. A 60-year-old patient had eaten too much fatty food, which resulted in sudden pain in the right subcostal area, nausea, bilious vomiting, strong sensation of bitterness in the mouth. Two days later the patient presented with jaundice, dark urine. Objectively: sclera and skin are icteric, abdomen is swollen, liver is increased by 3 cm, soft, painful on palpation, Ortner's, Kehr's, Murphy's, Zakharyin's, Mayo-Robson's symptoms are positive. Which method should be applied for diagnosis in the first place?

- A. USI of gallbladder and biliary duct
- **B.** Fibrogastroduodenoscopy
- C. X-ray of abdominal organs
- **D.** Radionuclide scanning of liver and gallbladder
- **E.** Diagnostic laparotomy
- 176. A 20 year-old patient complains of nosebleeds, numbness of the lower extremities. Objectively: hyperaemia of face, on the upper extremities AP is160/90 mm Hg, and 80/50 mm Hg on the lower ones. Pulse on the popliteal and pedal arteries is of poor volume, there is systolic murmur over the carotid arteries. What is the most likely diagnosis?
- A. Aorta coarctation
- **B.** Dissecting aortic aneurysm
- C. Aortopulmonary window
- **D.** Ventricular septal defect
- **E.** Atrial septal defect
- 177. An 8-month-old baby has had problems with nasal breathing and muco-purulent discharge from the nose for a week. Examination reveals a rhinedema, muco-purulent discharges from the middle nasal meatus as well as on the back of pharynx. What disease are these symptoms most typical for?
- **A.** Ethmoiditis
- **B.** Sphenoiditis
- **C.** Maxillary sinusitis
- **D.** Frontitis
- E. Hemisinusitis
- **178.** A department chief of an in-patient hospital is going to inspect resident doctors as to observation of medical-technological standards of patient service. What documentation should be checked for this purpose?
- **A.** Health cards of in-patients
- **B.** Statistic cards of discharged patients
- **C.** Treatment sheets
- **D.** Registry of operative interventions
- E. Annual report of a patient care institution
- **179.** While assising the health status of graduates of a secondary school, the doctor found one of them to have grade 3 tonsillar hypertrophy, chronic rhinitis and vegetative-vascular dystonia. The organism functionality is reduced. This student belongs to the following health group:

- A. III
- **B.** II
- **C.** I
- **D.** IV
- E. V
- **180.** A 17-year-old patient complains of pain in the area of the left knee joint. Soft tissues of thigh in the affected region are infiltrated, joint function is limited. X-ray picture of the distal metaepiphysis of the left femur shows a destruction focus with periosteum detachment and Codman's triangle found at the defect border in the bone cortex. X-ray of chest reveals multiple small focal metastases. What treatment is indicated?
- **A.** Palliative chemotherapy
- **B.** Radioiodine therapy
- C. Distance gamma-ray therapy
- **D.** Disarticulation of the lower extremity
- **E.** Amputation of the lower extremity
- **181.** Head circumference of a 1-monthold boy with signs of excitement is 37 cm, prefontanel is 2x2 cm large. After feeding the child regurgitates small portions of milk; stool is normal in respect of its volume and composition. Muscle tonus is within norm. What is the most likely diagnosis?
- **A.** Pylorospasm
- **B.** Meningitis
- **C.** Pylorostenosis
- **D.** Microcephaly
- **E.** Craniostenosis
- 182. As a result of lifting a load a 62-yearold female felt acute pain in the lumbar region, in a buttock, posterolateral surface of her right thigh, external surface of the right shin and dorsal surface of foot. Objectively: weakness of the anterior tibial muscle, long extensor muscle of the right toes, short extensor muscle of the right toes. Low Achilles reflex on the right. Positive Lasegue's sign. What examination method would be the most effective for specification of the diagnosis of discogenic compression of  $L_5$  root?
- **A.** Magnetic resonance scan
- **B.** Spinal column X-ray
- **C.** Electromyography
- **D.** Angiography
- **E.** Lumbar puncture
- **183.** At first appointment with an obstetrician-gynaecologist a pregnant woman is referred to other medical specialists. She must be obligatory examined by the following specialists:

- A. Therapeutist and dentist
- **B.** Therapeutist and endocrinologist
- C. Dentist and phthisiatrician
- **D.** ENT and ophthalmologist
- E. Dentist and cardiologist
- **184.** A hospital admitted a patient with coarse breathing (obstructed inspiration), skin cyanosis, tachycardia and arterial hypertension. He has a histrory of bronchial asthma. An hour ago he was having salbutamol inhalation and forgot to remove a cap that was aspired while taking a deep breath. What measures should the doctor take?
- A. Perform the Heimlich manoever
- **B.** Perform conicotomy immediately
- **C.** Send for an anesthesiologist and wait for him
- **D.** Use an inhalation of  $\beta_2$ -adrenoceptor agonist
- **E.** Make a subcutaneous injection of dexamethasone
- 185. A 19-year-old student has been hospitalized on an emergency basis because of severe dyspnea, pain in the left side of chest. The patient got sick 3 days ago. Objectively: body temperature -38,8°C. BH 42/min., hypopnoe. There is dullness of percussion sound on the right of the scapula middle, breathing sounds cannot be auscultated. The left border of heart is displaced outwards by 3 cm. Embryocardia is preent, HR -110/min. The right hypochondrium is painful on palpation. What are the immediate treatment measures in this situation?
- **A.** Urgent puncture of pleural cavity
- **B.** Administration of antibiotics of penicillin group
- **C.** Injection of lasix
- **D.** Injection of cardiac glycosides
- E. Transfer of the patient to the thoracic surgery department
- **186.** On the 6th day of life a child got multiple vesicles filled with seropurulent fluid in the region of occiput, neck and buttocks. General condition of the child is normal. What disease should be suspected?
- **A.** Vesiculopustulosis
- **B.** Impetigo neonatorum
- **C.** Miliaria
- **D.** Impetigo
- E. Epidermolysis bullosa

- the gynecological unit with complaints of pain in the lower abdomen and insignificant bloody discharges from the genital tracts for 3 hours. Last menstruation was 3 months ago. Vaginal examination showed that body of womb was in the 10th week of gestation, a fingertip could be inserted into the external orifice of uterus, bloody discharges were insignificant. USI showed small vesicles in the uterine cavity. What is the most likely diagnosis?
- **A.** Grape mole
- **B.** Abortion in progress
- **C.** Incipient abortion
- **D.** Threat of spontaneous abortion
- E. Incomplete abortion
- **188.** A 30-year-old male patient consulted a family doctor 2 months after he had been operated for an open fracture of brachial bone. Objectively: the patient's condition is satisfactory, in the region of the operative wound there is a fistula with some purulent discharge, redness, fluctuation. X-ray picture shows brachial bone destruction with sequestra. What complication arose in the postoperative period?
- **A.** Posttraumatic osteomyelitis
- **B.** Hematogenic osteomyelitis
- **C.** Wound abscess
- **D.** Posttraumatic phlegmon
- **E.** Suture sinus
- **189.** A 50-year-old male suburbanite underwent treatment in rural outpatient clinic for pneumonia. The treatment didn't have effect and the disease got complicated by exudative pleuritis. What prevention and treatment facility should the patient be referred to for further aid?
- **A.** Central district hospital
- **B.** Regional hospital
- **C.** Phthisio-pulmonological dispensary
- **D.** Municipal hospital
- **E.** Tuberculosis dispensary
- **190.** A patient is being prepared for the operation on account of varix dilatation of lower extremities veins. Examination of the patient's soles revealed flour-like desquamation along the skin folds. All the toenails are greyish-yellow, thickened and partially decayed. What dermatosis should be suspected?

**187.** A pregnant woman was delivered to

- A. Rubromycosis
- **B.** Pityriasis versicolor
- C. Candidosis
- **D.** Microsporia
- **E.** Microbial eczema
- 191. 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 moisr 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
- **B.** Acute myocardial infarction, pulmonary edema
- C. Bronchial asthma exacerbation
- **D.** Uncomplicated hypertensic crisis
- E. Community-acquired pneumonia
- 192. A 43-year-old female patient was delivered to the hospital in grave condition. She has a history of Addison's disease. The patient had been regularly taking prednisolone but a week before she stopped taking this drug. Objectively: sopor, skin and visible mucous membranes are pigmented, skin and muscle turgor is decreased. Heart sounds are muffled, rapid. AP- 60/40 mm Hg, heart rate 96/min. In blood: Na 120 millimole/l, K 5,8 millimole/l. Development of this complication is primarily caused by the deficit of the following hormone:
- A. Cortisol
- **B.** Corticotropin (ACTH)
- **C.** Adrenaline
- **D.** Noradrenaline
- **E.** Adrostendion
- 193. Forensic medical expertise of corpse of a newborn revealed: body weight 3500 g, body length 50 cm, the umbilical cord was smooth, moist, glossy, without any signs of drying. Hydrostatic tests were positive. The test results are the evidence of:
- **A.** Live birth
- **B.** Stillbirth
- C. Primary atelectasis
- **D.** Secondary atelectasis
- **E.** Hyaline membrane disease
- **194.** A primigravida is 22 years old. She has Rh(-), her husband has Rh(+). Anti-

bodies to Rh weren't found at 32 weeks of pregnancy. Redetermination of antibodies to Rh didn't reveal them at 35 weeks of pregnancy as well. How often should the antibodies be determined hereafter?

- **A.** Once a week
- **B.** Once in two weeks
- **C.** Once in three weeks
- **D.** Montly
- **E.** There is no need in further checks
- 195. A patient is 50 years old, works as a builder with 20 years of service record. He was admitted to the hospital for chest pain, dry cough, minor dyspnea. Objectively: sallow skin, acrocyanosis, asbestos warts on the hands. In lungs rough respiration, diffuse dry rales. The x-ray picture shows intensification of pulmonary pattern, signs of pulmonary emphysema. What is the most likely diagnosis?
- A. Asbestosis
- B. Lung cancer
- C. Pneumonia
- **D.** Chronic obstructive bronchitis
- E. Tuberculosis
- 196. A 14-year-old girl complains of pain in vaginal area and lower abdomen that last for 3-4 days and have been observed for 3 months about the same time. Each time pain is getting worse. Objectively: mammary glands are developed, hairiness corresponds to the age. The virginal membrane is intact, cyanotic and protruded. She has never had menstruation. She has been diagnosed with primary amenorrhea. What is the reason of amenorrhea?
- **A.** Hymen atresia
- **B.** Turner's syndrome
- **C.** Babinski-Frohlich syndrome
- **D.** Pregnancy
- **E.** Sexual development delay
- **197.** A 22-year-old vegetarian patient with signs of malnutrition consulted a doctor about smell and taste distortion, angular stomatitis. Objectively: marked 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
- 198. Condition of a patient with purulent

otitis has abruptly deteriorated: he presents with headache, vomiting, febrile temperature, general hyperesthesia. There are meningeal signs, papilledemas. Focal symptoms are absent. Cerebrospinal fluid is turbid, pressure is high, there is albuminocytologic dissociation with neutrophil predominance. What disease can be suspected?

A. Secondary purulent meningitis

**B.** Meningoencephalitis

**C.** Serous meningitis

**D.** Primary purulent meningitis

E. Subarachnoid haemorrhage

**199.** A municipal hospital reported on the number of operated patients including fatal outcomes following the operations. Which index of hospital work can be calculated on the ground of this data?

**A.** Postoperative lethality

**B.** Total lethality

**C.** Index of late hospitalization since a disease incursion

**D.** Standardized lethality

E. -

**200.** A 10-year-old boy periodically has short states (up to 10-15 seconds) that can be characterized as a "sudden blackout" and are accompanied by gaze fixation in the upright position, absentminded and vacant face expression, lack of movements and following amnesia. Specify this state:

A. Absence

**B.** Obnubilation

C. Trance

**D.** Fugue

E. Thought block