- 1. Routine examination of a child with a history of bronchial asthma reveals AP of 140/90 mm Hg. The most likely cause of the hypertension is:
- **A.** Renal disease
- **B.** Theophylline overdose
- **C.** Chronic lung disease
- **D.** Coarctation of the aorta
- E. Obesity
- 2. Head of a department and a tradeunion group have appealed to the head of a hospital about dismissal of the senior nurse who has 17 year record of service. The facts of charge were confirmed and recognized by the nurse herself. This nurse lives with a daughter (who is divorced and unemployed) and a 9-monthold grandson. Make an administrative decision:
- **A.** To continue the worker in office with a warning of dismissal in case of repeated violation of labor discipline
- **B.** To discharge the worker, i.e. to satisfy demands of the collective
- **C.** To issue the sick list
- **D.** To shift the solution of this problem on other officials or public organizations **E.** -
- **3.** Purulent mediastinitis is diagnosed at a 63-year-old patient. What diseases from the stated below **CANNOT** cause the purulent mediastinitis?
- A. Cervical lymphadenitis
- **B.** Deep neck phlegmon
- **C.** Perforation of the cervical part of the easophagus
- **D.** Perforation of the thoracic part of the easophagus
- **E.** Iatrogenic injury of the trachea
- **4.** For the persons who live in a hot area after an accident at a nuclear object, the greatest risk within the first decade is represented by cancer of:
- **A.** Thyroid gland
- B. Skin
- **C.** Reproduction system organs
- **D.** Breast
- E. Lungs
- **5.** During dynamic investigation of a patient the increase of central venous pressure is combined with the decrease of arterial pressure. What process is proved by such combination?

- **A.** Developing of cardiac insufficiency
- **B.** Depositing of blood in venous channel **C.** Shunting
- **D.** Presence of hypervolemia
- **E.** Increase of bleeding speed
- **6.** A neonate was born from the 1st gestation on term. The jaundice was revealed on the 2nd day of life, then it became more acute. The adynamia, vomiting and hepatomegaly were observed. Indirect bilirubin level was 275μ mol/L, direct bilirubin level 5μ mol/L, Hb- 150 g/l. Mother's blood group 0(I), Rh⁺, child's blood group A(II), Rh⁺. What is the most probable diagnosis?
- **A.** Hemolytic disease of the neonate (AB0 incompatibility), icteric type
- **B.** Jaundice due to conjugation disorder
- C. Hepatitis
- **D.** Physiological jaundice
- **E.** Hemolytic disease of the neonate (Rh incompatibility)
- **7.** An infant was born with body mass 3 kg and body length 50 cm. Now he is 3 years old. His brother is 7 years old, suffers from rheumatic fever. Mother asked the doctor for a cardiac check up of the 3-year-old son. Where is the left relative heart border located?
- **A.** 1 cm left from the left medioclavicular line
- **B.** 1 cm right from the left medioclavicular line
- **C.** Along the left medioclavicular line
- **D.** 1 cm left from he left parasternal line
- **E.** 1 cm right from the left parasternal line
- **8.** A neonate is 5 days old. What vaccination dose of BCG vaccine (in mg) is necessary for vaccination of this child?
- **A.** 0.05 mg
- **B.** 0,025 mg
- **C.** 0,075 mg
- **D.** 0,1 mg
- **E.** 0,2 mg
- **9.** A 60-year-old woman, mother of 6 children, developed a sudden onset of upper abdominal pain radiating to the back, accompanied by nausea, vomiting, fever and chills. Subsequently, she noticed yellow discoloration of her sclera and skin. On physical examination the patient was found to be febrile with temp of $38,9^{\circ}C$, along with right upper quadrant tenderness. The most likely diagnosis is:

- A. Choledocholithiasis
- **B.** Benign biliary stricture
- **C.** Malignant biliary stricture
- **D.** Carcinoma of the head of the pancreas
- E. Choledochal cyst
- 10. 4 days ago a 32-year-old patient caught a cold: he presented with sore throat, fatigue. The next morning he felt worse, developed dry cough, body temperature rose up to $38, 2^{\circ}C$, there appeared muco-purulent expectoration. Percussion revealed vesicular resonance over lungs, vesicular breathing weakened below the angle of the right scapula, fine sonorous and sibilant wheezes. What is the most likely diagnosis?
- A. Focal right-sided pneumonia
- **B.** Bronchial asthma
- C. Acute bronchitis
- **D.** Pulmonary carcinoma
- E. Pulmonary gangrene
- 11. A 45-year-old woman, mother of four children, comes to the emergency room complaining of a sudden onset of the epigastric and right upper quadrant pain, radiating to the back, accompanied by vomiting. On examination, tenderness is elicited in the right upper quadrant, bowel sounds are decreased, and laboratory data shows leukocytosis, normal serum levels of amylase, lipase, and bilirubin. The most likely diagnosis is:
- **A.** Acute cholecystitis
- **B.** Perforated peptic ulcer disease
- **C.** Myocardial infarction
- **D.** Sigmoid diverticulitis
- **E.** Acute pancreatitis
- **12.** During an operation for presumed appendicitis the appendix was found to be normal; however, the terminal ileum is evidently thickened and feels rubbery, its serosa is covered with grayish-white exudate, and several loops of apparently normal small intestine are adherent to it. The most likely diagnosis is:
- **A.** Crohn's disease of the terminal ileum
- **B.** Perforated Meckel's diverticulum
- C. Ulcerative colitis
- **D.** Ileocecal tuberculosis
- E. Acute ileitis
- **13.** A girl is 12-year-old. Yesterday she was overcooled. Now she is complaining on pain in suprapubic area, frequent painful urination by small portions, temperature is 37,8°C. Pasternatsky symptom is negative. Urine analysis: protein 0,033

- g/L, WBC- 20-25 in f/vis, RBC- 1-2 in f/vis. What diagnosis is the most probable?
- **A.** Acute cystitis
- **B.** Dysmetabolic nephropathy
- **C.** Acute glomerulonephritis
- **D.** Acute pyelonephritis
- E. Urolithiasis
- **14.** A woman, primagravida, consults a gynecologist on 05.03.2012. A week ago she felt the fetus movements for the first time. Last menstruation was on 10.01.2012. When should she be given maternity leave?
- A. 8 August
- **B.** 25 July
- C. 22 August
- **D.** 11 July
- **E.** 5 September
- 15. A 40-year-old female patient has been hospitalized for attacks of asphyxia, cough with phlegm. She has a 4-year history of the disease. The first attack of asphyxia occurred during her stay in the countryside. Further attacks occurred while cleaning the room. After 3 days of inpatient treatment the patient's condition has significantly improved. What is the most likely etiological factor?
- **A.** Household allergens
- B. Pollen
- C. Infectious
- **D.** Chemicals
- **E.** Psychogenic
- **16.** A 3-year-old child has been admitted to a hospital because of ostealgia and body temperature rise up to $39^{\circ}C$. Objectively: the patient is in grave condition, unable to stand for ostealgia, there is apparent intoxication, lymph nodesare enlarged up to 1,5 cm. Liver can be palpated 3 cm below the costal margin, spleen - 2 cm below the costal margin. In blood: RBCs - $3, 0.10^{12}$ /l, Hb- 87 g/l, colour index - 0,9, thrombocytes - $190 \cdot 10^9/l$, WBCs - $3, 2 \cdot 10^9$ /l, eosinophils - 1, stab neutrophils - 1, segmented neutrophils -0, lymphocytes - 87, monocytes - 2, ESR - 36 mm/h. What examination should be conducted in order to specify the diagnosis?
- **A.** Sternal puncture
- **B.** Ultrasound
- **C.** Lymph node puncture
- **D.** Lymph node biopsy
- **E.** Computer tomography

- 17. A 22-year-old girl has been complaining of having itching rash on her face for 2 days. She associates this disease with application of cosmetic face cream. Objectively: apparent reddening and edema of skin in the region of cheeks, chin and forehead; fine papulovesicular rash. What is the most likely diagnosis?
- **A.** Allergic dermatitis
- **B.** Dermatitis simplex
- C. Eczema
- **D.** Erysipelas
- E. Neurodermatitis
- **18.** 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
- 19. 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
- **20.** An emergency team has delivered to a hospital an unconscious patient found lying in the street in winter. Objectively: the patient is pale, with superficial respiration; bradycardia with heartrate 54/min, t^o 35, 0^oC . AP- 100/60 mm Hg. Palpation of chest and abdomen revealed no peritoneal symptoms. There is a smell of alcohol from the patient's mouth. What is the most likely diagnosis?

- **A.** Hypothermia
- **B.** Acute cardiovascular insufficiency
- **C.** Apparent death
- **D.** Frostbite of trunk and extremities
- E. -
- 21. A 28-year-old parturient complains about headache, vision impairment, psychic inhibition. Objectively: AP-200/110 mm Hg, evident edemata of legs and anterior abdominal wall. Fetus head is in the area of small pelvis. Fetal heartbeats is clear, rhythmic, 190/min. Internal examination revealed complete cervical dilatation, fetus head was in the area of small pelvis. What tactics of labor management should be chosen?
- **A.** Forceps operation
- **B.** Cesarean
- **C.** Embryotomy
- **D.** Conservative labor management with episiotomy
- **E.** Stimulation of labor activity
- **22.** A 35-year-old patient complains about pain and morning stiffness of hand joints and temporomandibular joints that lasts over 30 minutes. She has had these symptoms for 2 years. Objectively: edema of proximal interphalangeal digital joints and limited motions of joints. What examination should be administered?
- **A.** Roentgenography of hands
- **B.** Complete blood count
- **C.** Rose-Waaler reaction
- **D.** Immunogram
- **E.** Proteinogram
- **23.** A patient, aged 16, complains of headache, mainly in the frontal and temporal areas, superciliary arch, appearing of vomiting at the peak of headache, pain during the eyeballs movement, joint's pain. On examination: excited, t^o 39^oC , Ps- 110/min. Tonic and clonus cramps. Uncertain meningeal signs. What is the most likely diagnosis?
- **A.** Influenza with cerebral edema manifestations
- **B.** Influenza, typical disease duration
- C. Respiratory syncytial virus
- **D.** Parainfluenza
- **E.** Adenovirus infection
- **24.** A 29-year-old female patient complains of dyspnea, heaviness and chest pain on the right, body temperature rise up to $37, 2^{\circ}C$. The disease is associated with a chest trauma received 4 days ago. Objectively: skin is pale and moist. Ps- 90 bpm,

regular. Palpation reveals a dull sound on the right, auscultation reveals significantly weakened vesicular breathing. In blood: RBCs - $2.8 \cdot 10^{12}$ /l, colour index - 0.9, Hb-100 g/l, WBCs - $8.0 \cdot 10^{9}$ /l, ESR - 17 mm/h. What results of diagnostic puncture of the pleural cavity can be expected?

- A. Haemorrhagic punctate
- **B.** Chylous liquid
- C. Exudate
- **D.** Transudate
- **E.** Purulent punctate
- 25. A 54-year-old drowned man was rescued from the water and delivered to the shore. Objectively: the man is unconscious, pale, breathing cannot be auscultated, pulse is thready. Resuscitation measures allowed to save the patient. What complications may develop in the near future?
- A. Pulmonary edema
- **B.** Respiratory arrest
- C. Encephalopathy
- **D.** Cardiac arrest
- E. Bronchospasm
- **26.** A 46-year-old patient once took part in elimination of breakdown at an atomic power plant. Currently he is being treated at an in-patient hospital. He was diagnosed with progressing vegetative insufficiency. This disease relates to the following group of ionizing radiation effects:
- A. Somato-stochastic
- B. Somatic
- C. Genetic
- **D.** Hormesis
- **E.** Heterosis
- 27. A military unit stopped for 3-day's rest in an inhabited locality after a long march. The sanitary-epidemiological reconnaissance found several water sources. It is necessary to choose the source complying with the hygienic standards for drinking water in the field conditions:
- **A.** Artesian well water
- B. Spring water
- C. River water
- **D.** Rain water
- **E.** Melt snow water
- **28.** Deputy of chief medical officer carried out a study of morbidity rate for population which had been served at the polyclinics within the last 5 years. What statistical values can help in calculation of morbidity

rates?

- **A.** Relative values
- **B.** Standard values
- **C.** Average values
- **D.** Absolute values
- **E.** Dynamic series
- **29.** A female patient has been suffering from pain in the right subcostal area, bitter taste in the mouth, periodical bile vomiting for a month. The patient put off 12 kg. Body temperature in the evening is 37,6°C. Sonography revealed that bile bladder was 5,5x2,7 cm large, its wall -0,4 cm, choledochus 0,8 cm in diameter. Anterior liver segment contains a roundish hypoechoic formation up to 5 cm in diameter and another two up to 1,5 cm each, walls of these formations are up to 0,3 cm thick. What is the most likely diagnosis?
- **A.** Alveolar echinococcus of liver
- **B.** Liver cancer
- C. Liver abscess
- **D.** Cystous liver cancer
- **E.** Paravesical liver abscesses
- **30.** A 55-year-old male had been treated at the surgical department for acute lower-extremity thrombophlebitis. On the 7th day of treatment he suddenly developed pain in the left part of chest, dyspnea and cough. Body temperature was $36, 1^{\circ}C$, respiratory rate $36/\min$. The patient was also found to have diminished breath sounds without wheezing. Ps- $140/\min$, thready. AP- 70/50 mm Hg. The ECG shows $Q_{\rm I}II$ - $S_{\rm I}$ syndrome. What is the most likely diagnosis?
- **A.** Pulmonary embolism
- **B.** Myocardial infarction
- **C.** Cardiac asthma
- **D.** Bronchial asthma
- E. Pneumothorax
- **31.** A 16-year-old adolescent was vaccinated with DTP. In eight days there was stiffness and pain in the joints, subfebrile temperature, urticarial skin eruption, enlargement of inguinal, cervical lymph nodes and spleen. What kind of allergic reaction is observed?
- **A.** Immunocomplex
- **B.** Hypersensitivity of immediate type
- **C.** Cytoxic
- **D.** Hypersensitivity of delayed type
- E. -
- 32. 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
- 33. 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
- **34.** 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
- **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.** $\dot{\beta}$ -blocker
- C. Calcium channel antagonist
- **D.** Thiazide diuretic
- **E.** α -blocker
- **37.** At the radiological unit of a hospital gamma-devices of radiotherapy of "Agat" type and other closed sources of ionizing radiation are used for treatment of malignant neoplasms. What measures are to be taken to protect personnel during working with radioactive sources of such type?
- **A.** Reduction of working time and screening of the source
- **B.** Capsulation of devices and organization of room ventilation
- **C.** Screening of the source and the use of means of individual protection of respiration organs
- **D.** The increase of distance to the source and individual hygiene compliance
- **E.** Systematical cleansing of surfaces from the radioactive contamination and shortening of working time
- **38.** A 20-year-old adolescent lives in the nidus of tuberculous infection. The tuberculine Mantoux test with 2 TU was determined as hyperergic. What signs determine the hyperergic test of this adolescent?
- **A.** 6 mm papula, necrosis
- **B.** 20 mm papula
- C. 24 mm hyperemia
- **D.** 4 mm papula
- **E.** 12 mm hyperemia
- **39.** A survey radiograph of a miner (24 years of service record, the dust concentration in the workplace is at the rate of 260-280 mg/ m^3 with 15% of free

silica) shows lung changes that are typical for pneumoconiosis. What type of pneumoconiosis is it?

- A. Anthracosilicosis
- **B.** Carboconiosis
- C. Silicatosis
- **D.** Anthracosilicatosis
- E. Silicosis
- **40.** A 5-year-old child had an attack of palpitation with nausea, dizziness, generalized fatigue. On ECG: tachycardia with heartbeat rate of 220/min. Ventricle complexes are deformed and widened. *P* wave is absent. What medication is to be prescribed to provide first aid?
- A. Lydocain
- **B.** Isoptin
- C. Seduxen
- **D.** Novocainamides
- **E.** Strophantin
- 41. A 57-year-old man complains of shortness of breath, swelling on shanks, irregularity in cardiac work, pain in the left chest half with irradiation to the left scapula. Treatment is uineffective. On physical exam: heart's sounds are diminished, soft systolic murmur on the apex. Ps 100/min, arrhythmical, BP 115/75 mm Hg. The liver is +2 cm, painful. Roentgenoscopy: enlargement of heart shadow to all sides, pulsation is weak. Electrocardiogram (ECG): leftventricled extrasystolia, decreased voltage. What method of investigation is necessary to do to determine the diagnosis?
- A. Echocardiography
- **B.** Veloergometria
- **C.** X-ray kymography
- **D.** ECG in the dynamics
- **E.** Coronarography
- **42.** A 27-year-old woman presents at the maternity welfare centre because of infertility. She has had sexual life in marriage for 4 years, doesn't use contraceptives. She hasn't get pregnant. On examination: genital development is without pathology, uterine tubes are passable, basal (rectal) temperature is one-phase during last 3 menstrual cycles. What is the infertility cause?
- A. Anovular menstrual cycle
- **B.** Chronic adnexitis
- **C.** Abnormalities in genital development
- **D.** Immunologic infertility
- E. Genital endometriosis

- **43.** To study physical development of children and adolescents, anthropometric studies are widely used. Choose a physiometric method of study from the below given.
- **A.** Determination of vital capacity of lungs
- **B.** Measurement of growth
- **C.** Determination of thorax form
- **D.** Determination of vertebra form
- **E.** Determination of body weight
- **44.** An electro-gas welding operator working at a machine workshop performs welding and cutting of metal, which is accompanied by intense UV-radiation. His welding station is equipped with effective mechanical ventilation. What occupational disease is most likely to develop in an electro-gas welding operator?
- **A.** Photoelectric ophthalmia
- **B.** Heatstroke
- C. Vegetative-vascular dystonia
- **D.** Chronic overheating
- **E.** Pneumoconiosis
- **45.** A 60-year-old female patient had been admitted to a hospital for acute 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°C. What drug should be given in the first place?
- **A.** Promedol
- **B.** Aminophylline
- **C.** Dopamine
- **D.** Heparin
- E. Digoxin
- **46.** A 65-year-old patient complains of gradual worsening of the left eye vision during 10 months. On physical examination: acuty of vision of the left eye is 0,01, not correctable. The eye is quiet, pupil of the eye is grayish, reflex from the eyeground is absent. Intraocular pressure is 18 mm/Hg. What is the most probable preliminary diagnosis?

- A. Senile cataract
- **B.** Open-angle glaucoma
- **C.** Disorder of blood circulation in retina vessels
- D. Leukoma of the cornea
- E. Exfoliation of the retina
- **47.** 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
- **48.** A child from the first non-complicated pregnancy but complicated labor had cephalhematoma. On the second day there developed jaundice. On the 3th day appeared changes of neurologic status: nystagmus, Graefe's sign. Urea is yellow, feces- golden-yellow. Mother's blood group is $A(II)Rh^-$, child- $A(II)Rh^+$. On the third day child's Hb- 200 g/L, RBC- $6, 1 \cdot 10^{12}$ /L, bilirubin in blood 58 mk mol/L due to unconjugated bilirubin, Ht- 0,57. What is the child's jaundice explanation?
- A. Brain delivery trauma
- **B.** Physiologic jaundice
- **C.** Hemolytic disease of newborn
- **D.** Bile ducts atresia
- E. Fetal hepatitis
- 49. On the 4th day after recovering from a cold a patient was hospitalized with complaints of solitary spittings of mucoid sputum. On the 2nd day there was a single discharge of about 250 ml of purulent blood-streaked sputum. Objectively: the patient's condition is moderately severe. Respiratory rate 28-30/min, Ps- 96 bpm, AP-110/70 mm Hg. Respiration above the left lung is vesicular, weak above the right lung. There are moist rales of different types above the lower lobe and amphoric breath near the angle of scapula. What is the most likely diagnosis?

- A. Acute pulmonary abscess
- **B.** Exudative pleuritis
- **C.** Acute focal pneumonia
- **D.** Pleural empyema
- **E.** Pyopneumothorax
- **50.** A 25-year-old woman complains of profuse foamy vaginal discharges, foul, burning and itching in genitalia region. She has been ill for a week. Extramarital sexual life. On examination: hyperemia of vaginal mucous, bleeding on touching, foamy leucorrhea in the urethral area. What is the most probable diagnosis?
- A. Trichomonas colpitic
- **B.** Gonorrhea
- C. Chlamydiosis
- **D.** Vagina candidomicosis
- **E.** Bacterial vaginosis
- 51. A 50-year-old locksmith has a long-term record of work under the effect of mercury vapors with concentration exceeding MPC by 5-10 times. Clinical examination revealed the lability of vasomotors of skin, pulse and arterial pressure; total hyperhydrosis; asymmetric innervation of facial and lingual muscles, positive subcortical reflexes, intention tremor. Against the background of increased emotional excitability the patient presents with lack of self-confidence, shyness. A dentist found him to have parodontosis, chronic stomatitis. What disease can be suspected?
- **A.** Chronic mercury intoxication
- **B.** Residual effects of neuroinfection
- C. Parkinson's syndrome
- **D.** Acute mercury intoxication
- **E.** Vascular encephalopathy
- **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 54-year-old patient complains of weakness, weight loss despite the

unchanged appetite, frequent urination, skin itch for six months. Some time ago the patient underwent treatment for furunculosis. She hasn't been examined recently. Objectively: malnutrition, dry skin with signs of scratching. Small lymph nodes can be palpated in the axillary regions. Changes in the internal organs are absenr. What testing must be administered in the first place?

- **A.** Blood sugar test on an empty stomach
- **B.** Complete blood count
- C. Endoscopy of stomach
- **D.** Lymph node biopsy
- **E.** Blood sterility testing
- **54.** 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
- 55. Several hours before, a 28-yearold patient suddenly developed acute headache and repeated vomiting, then lost consciousness. Objectively: focal neurological symptoms were not found. Pronounced meningeal symptoms were revealed. AP - 120/80 mm Hg. According to clinical and liquorological findings the patient was diagnosed with subarachnoid haemorrhage. After administration of dehydrants the patient's condition somewhat improved. What is the main component of further emergency care?
- **A.** Coagulants
- **B.** Anticoagulants
- **C.** Antiaggregants
- **D.** Fibrinolytics
- E. Corticosteroids
- **56.** A 24-year-old man on the 5th day of acute respiratory disease with high grade temperature started having strong headaches, systemic dizziness, sensation of double vision, paresis of mimic muscles to the right, tickling by swallowing. Diagnosis: Acute viral encephalitis. Determine the basic direction of the

emergent therapy.

- **A.** Zovirax
- **B.** Glucocorticoids
- **C.** Cephtriaxon
- **D.** Lasix
- E. Hemodesis
- 57. A 30-year-old patient was delivered to the admission ward of the infectious disease department. The disease had started acutely on the background of normal temperature with the appearance of frequent, liquid, profuse stool without pathological impurities. Diarrhea was not accompanied by abdominal pain. 12 hours later there appeared recurrent profuse vomiting. The patient rapidly developed dehydration. What is the most likely diagnosis?
- A. Cholera
- **B.** Shigellosis
- **C.** Staphylococcal food toxicoinfection
- **D.** Salmonellosis
- E. Campylobacteriosis
- **58.** A 67-year-old male complains of dyspnea on exertion, attacks of retrosternal pain, dizziness. He has no history of rheumatism. Objectively: pale skin, acrocyanosis. There are rales in the lower parts of lungs. There is systolic thrill in the II intercostal space on the right, coarse systolic murmur conducted to the vessels of neck. AP- 130/90 mm Hg, heart rate 90/min, regular rhythm. The liver extends 5 cm under the edge of costal arch, shin edemata are present. Specify the assumed valvular defect:
- **A.** Aortic stenosis
- **B.** Pulmonary artery stenosis
- C. Mitral insufficiency
- **D.** Ventricular septal defect
- **E.** Tricuspid regurgitation
- 59. A 24-year-old female teacher complains of dizziness and heart pain irradiating to the left nipple. Pain is not associated with physical activity and cannot be relieved by nitroglycerin, it abates after taking Valocordin and lasts an hour or more. The patient has a nearly 2-year history of this disease. Objectively: Ps- 76 bpm. AP- 110/70 mm Hg. Heart borders are norma, heart sounds are clear. The ECG shows respiratory arrhythmia. Radiograph of the cervicothoracic spine shows no pathology. Lungs, abdomen are unremarkable. What changes in blood formula can be expected?

- **A.** No changes
- **B.** Leukocytosis
- **C.** Thrombocytopenia
- **D.** Leukemic hiatus
- E. Increased ESR
- **60.** A 51-year-old female patient complains of frequent defecation and liquid blood-streaked stools with mucus admixtures, diffuse pain in the inferolateral abdomen, 6 kg weight loss over the previous month. Objectively: body temperature $37,4^{\circ}C$, malnutrition, skin is pale and dry. Abdomen is soft, sigmoid is painful and spasmodic, makes a rumbling sound. Liver is dense, painful, extends 3 cm below the costal margin. What is the most likely diagnosis?
- **A.** Non-specific ulcerative colitis
- **B.** Bacillary dysentery
- C. Sprue
- **D.** Intestinal enzymopathy
- E. Helminthic invasion
- **61.** A 32-year-old female complains of dizziness, headache, palpitation, tremor. For the last several months she has been under outpatient monitoring for the increased arterial pressure. Since recently such attacks have become more frequent and severe. Objectively: skin is covered with clammy sweat, tremor of the extremities is present. HR- $110/\min$, AP- $220/140 \min$ Hg. Heart sounds are weakened. In blood: WBCs 9, $8 \cdot 10^9/l$, ESR $22 \min/h$. Blood glucose 9,8 millimole/l. What disease is the most likely cause of this crisis?
- **A.** Pheochromocytoma
- **B.** Essential hypertension
- C. Preeclampsia
- **D.** Primary hyperaldosteronism
- **E.** Diabetic glomerulosclerosis
- **62.** A 19-year-old woman complains of pain in the abdomen and joints, asks for more analgetics and somnifacient injections. The patient was examined. Gynecological and urological pathologies are absent. There are signs of previous punctures along superficial veins of the extremities. The patient does not explain the origin of punctures. Tendon reflexes of upper and lower extremities are the same, quick. Photoreaction of the pupil of the eye is weak. The tongue is grey coated. During communication the patient in affectively not even-tempered. There is diarrhea without pathologic inclusions. What tactics is necessary to improve the condition of this patient?

- **A.** Consultation of an expert in narcology
- **B.** Prescription of medications the patient asks for
- **C.** Additional consultation of surgeon
- **D.** Treatment with antibiotics
- **E.** Consultation of infectious diseases doctor
- **63.** A 1,5-year-old child fell ill acutely with high temperature $38^{\circ}C$, headache, fatigue. The temperature declined on the fifth day, muscular pain in the right leg occured in the morning, there were no movements and tendon reflexes, sensitivity was reserved. What is the initial diagnosis?
- **A.** Polyomyelitis
- **B.** Viral encephilitis
- C. Polyartropathy
- **D.** Osteomyelitis
- **E.** Hip joint arthritis
- **64.** 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
- **65.** 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
- **66.** 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
- 67. A 50-year-old patient complains about having pain attacks in the right subcostal area for about a year. He pain arises mainly after taking fattening food. Over the last week the attacks occurred daily and became more painful. On the 3rd day of hospitalization the patient presented with icteritiousness of skin and scleras, light-colored feces and dark urine. In blood: neutrophilic leukocytosis 13,1 · 10⁹/l, ESR- 28 mm/h. What is the most likely diagnosis?
- A. Chronic calculous cholecystitis
- **B.** Chronic recurrent pancreatitis
- **C.** Fatty degeneration of liver
- **D.** Chronic cholangitis, exacerbation stage
- **E.** Hypertensive dyskinesia of gallbladder
- **68.** In morgue there are dead bodies with the following causes of death: electrotrauma; rupture of the spleen with acute anemia. There is one unknown person; one ethyl alcohol poisoned person and one drowned man. What dead body should the blood group be determined for?
- **A.** All dead bodies of the unknown persons
- **B.** Body of poisoned person
- **C.** Body of drowned man
- **D.** Body of person with internal hemorrhage
- **E.** Body of person with a sudden death
- **69.** 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
- **70.** A 5-grade pupil complains about extensive skin rash accompanied by intensive itch, especially at night. Objecti-

vely: there are small red papules set mostly in pairs in the region of interdigital folds on both hands, on the flexor surface of radicarpal articulations, abdomen and buttock skin as well as internal surface of thighs. In the centre of some papules vesicles or serohaemorrhagic crusts can be seen. There are multiple excoriations. What is the most likely diagnosis?

- A. Scabies
- **B.** Dermatitis
- C. Ringworm of body
- D. Toxicoderma
- E. Eczema
- 71. A 43-year-old female patiet complains of eruption on her right leg skin, pain, weakness, body temperature rise up to $38^{\circ}C$. 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
- 72. 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
- 73. 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
- **74.** A patient has chronic heart failure of the II stage. He takes furosemide regularly three times a week. He had developed bronchopneumonia and had been administered combined pharmacotherapy. On the fifth day of therapy the patient complained of hearing impairment. What drug coadministered with furosemide might have caused the hearing loss?
- A. Gentamicin
- B. Linex
- **C.** Nystatin
- **D.** Tavegil
- E. Mucaltin
- 75. A 54-year-old female patient has been admitted to a hospital 12 days after the beginning of acute pancreatitis. Objectively: the patient is in grave condition. The body temperature is hectic. Ps 112 bpm. The abdomen is swollen. Epigastrium palpation reveals a very painful infiltration falling in the localization of pancreas. Abdominal cavity contains fluid. There is an edema of the left lumbar region. In blood: WBCs 18·10⁹/l. What is the required tactics of the patient's treatment?
- **A.** Surgical treatment
- **B.** Further conservative treatment
- **C.** Peritoneal dialysis
- **D.** Increase in antienzymes
- **E.** Massive antibacterial therapy
- **76.** To replace the blood loss replacement 1000 ml of the same group of Rhesuscompatible donated blood was transfused to the patient. The blood was conserved by sodium citrate. At the end of hemotransfusion there appeared excitement, pale skin, tachycardia, muscles cramps in the patient. What complication should be suspected?
- **A.** Citrate intoxication
- **B.** Citrate shock
- **C.** Allergic reaction
- **D.** Anaphylactic shock
- **E.** Pyrogenous reaction
- 77. A 24-year-old emotionally-labile woman presents with irritation, depressed mood, palpitation, shooting pain in the heart area, generalized fatigue followi-

- ng the divorce. On examination: palm hyperhydrosis, pulse rate- 72-78 bpm, labile, heart without changes. ECG is normal. What is the most probable pathology in this case?
- **A.** Neurasthenia
- **B.** Ipochondric neurosis
- **C.** Compulsive neurosis
- **D.** Schizophrenia
- **E.** Depressive neurosis
- **78.** A 30-year-old woman with a long history of chronic pyelonephritis complains about considerable weakness, sleepiness, decrease in diuresis down to 100 ml per day. AP- 200/120 mm Hg. In blood: creatinine 0,62 millimole/l, hypoproteinemia, albumines 32 g/l, potassium 6,8 millimole/l, hypochromic anemia, increased ESR. What is the first step in the patient treatment tactics?
- **A.** Haemodialysis
- **B.** Antibacterial therapy
- **C.** Enterosorption
- **D.** Haemosorption
- E. Blood transfusion
- **79.** A 10-year-old girl consulted a doctor about thirst, frequent urination, weight loss. She has been observing these symptoms for about a month. Objectively: no pathology of internal organs was revealed. What laboratory analysis should be carried out in the first place?
- **A.** Blood glucose analysis on an empty stomach
- **B.** Glucose in urine test on the base of daily diuresis
- **C.** Acetone in urine test
- **D.** Glucose tolerance test
- **E.** Glucosuric profile
- **80.** A 36-year-old female patient complains of bruises on the body, gingival haemorrhage, general weakness. A month ago she had a severe domestic poisoning with some pesticide (the patient can not remember the name). She has a 7-year record of working in contact with petroleum products, particularly benzene. In blood: RBCs 3, $2 \cdot 10^{12}$ /l, WBCs 2, $7 \cdot 10^9$ /l, thrombocytes $70 \cdot 10^9$ /l. What is the most likely pathology?

- **A.** Benzene intoxication
- **B.** Organophosphorus pesticide intoxication
- **C.** Organochlorine pesticide Intoxication
- **D.** Mercury-containing pesticide intoxication
- **E.** Chronic fatigue Syndrome
- **81.** A 6-year-old child complains of frequent liquid stool and vomiting. On the 2nd day of desease the child presented with inertness, temperature rise up to 38, 2°C, Ps- 150 bpm, scaphoid abdomen, palpatory painful sigmoid colon, defecation 10 times a day with liquid, scarce stool with mucus and streaks of green. What is a provisional diagnosis?
- **A.** Shigellosis
- **B.** Salmonellosis
- C. Escherichiosis
- **D.** Intestinal amebiasis
- **E.** Yersiniosis
- **82.** A 68-year-old patient consulted a doctor about a tumour in her left mammary gland. Objectively: in the upper internal quadrant of the left mammary gland 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
- 83. 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 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
- **84.** 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
- 85. A patient complains of impaired far vision. Previously his eyes often turned red and hurt. Objectively: the eyes are not irritated, the cornea is transparent, anterior chambers are median deep, their moisture is transparent. The iris of the right eye has not changed in colour, its pattern is unchanged. The pupil is of irregular shape, scalloped. Biomicroscopy of the crystalline lens reveals the areas of opacity and vacuoles. Make a diagnosis:
- **A.** Complicated cataract of the right eye
- **B.** Senile cataract of the right eye
- **C.** Diabetic cataract of the right eye
- **D.** Tetanic cataract of the right eye
- **E.** Radiation cataract of the right eye
- **86.** A 26-year-old patient complains of experiencing pain in the right hand for 4 days. The pain arose at the site of corns on the palmar surface at the base of the II and III fingers. Some time later the dorsum of hand became edematic. I and III fingers are half-bent in the interphalangeal joints, the hand looks like "rake". What is the most likely diagnosis?
- **A.** Phlegmon of the second interdigital space of the right hand
- **B.** Adenophlegmon of the right hand
- **C.** Corn abscess of the right hand
- **D.** U-shaped phlegmon of the right hand
- E. Tendovaginitis
- 87. 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
- **88.** An 18-year-old patient presents no problems. Percussion reveals that heart borders are displaced to the right and left by 1 cm, there is a coarse systolic murmur with its epicenter within the 4th intercostal space on the left. What is the most informative examination to confirm the clinical diagnosis?
- A. Ventriculography
- B. ECG
- C. PCG
- D. Echocardiography
- **E.** Polycardiography
- **89.** A 56-year-old patient complains of having persistent chest pain on the right for the last 2 months. The pain is not associated with respiration. He also complains of cough with blood-streaked sputum, weakness, decreased performance, fatigue. Chest radiograph shows a globular shade of 4x6 cm connected to the root of the lung in the lower part of the right lung. What is the most likely diagnosis?
- **A.** Peripheral lung cancer
- **B.** Metastasis
- C. Lung abscess
- **D.** Pneumonia
- E. Tuberculoma
- **90.** A 30-year-old patient had deep burn covering 30% of body 30 days ago. Now he presents with continued fever, loss of appetite, night sweats. Burned surface weakly granulates. What is the stage of burn disease?
- A. Septicotoxemia
- **B.** Primary burn shock
- **C.** Secondary burn shock
- **D.** Acute burn toxemia
- E. Convalescence
- **91.** 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}
- **92.** A woman while working in vegetable garden developed severe pain in the loin. Lasague's and Nery tension signs are obviously marked on the right. Lumbar lordosis is smoothed, movements are harshly restrained in lumbar part of the spine. Right ankle (Achilles) reflex is absent. What kind of disease can it be?
- A. Lumbar-sacral radiculitis
- **B.** Lumbalgia
- C. Hepatic colic
- **D.** Renal colic
- **E.** Neuritis of femoral nerve
- **93.** 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
- **94.** An unconscious 35-year-old patient has been delivered by an ambulance to the intensive care unit. Objectively: the patient is in semicoma. Moderate mydriasis is present. The reaction of pupils to light is reduced. The reaction to verbal instructions is missing. AP is150/100 mm Hg, there is tachycardia. Blood contains methanol. What antidote should be administered?
- A. Ethanol
- **B.** Unithiol
- C. Thiamine chloride
- **D.** Tavegil
- E. Naloxone
- **95.** A 36-year-old man was delivered to the surgical department an hour after a road accident. His condition is getting worse: respiratory insufficiency is progressing, there are cardiac abnormalities. Clinical and roentgenological investigations revealed mediastinal displacement. What process has caused this complication?

- **A.** Valvular pneumothorax
- **B.** Open pneumothorax
- **C.** Closed pneumothorax
- **D.** Subcutaneous emphysema
- E. Mediastinitis
- **96.** A 26-year-old male patient complains of piercing pain during breathing, cough, dyspnea. Objectively: t^o $37, 3^oC$, respiration rate $19/\min$, heart rate = Ps- $92/\min$; AP- 120/80 mm Hg. Vesicular respiration. In the inferolateral parts of chest auscultation in both inspiration and expiration phase revealed noise that was getting stronger at phonendoscope pressing and can be still heard after cough. ECG showed no pathological changes. What is the most likely giagnosis?
- **A.** Acute pleuritis
- **B.** Intercostal neuralgia
- C. Subcutaneous emphysema
- **D.** Spontaneous pneumothorax
- E. Pericarditis sicca
- **97.** 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
- **98.** A 25-year-old patient complains of general weakness, dry cough, sweating, subfebrile temperature. Objectively: lung auscultation reveals vesicular resiration with no wheezing. Fluorogram shows focal shadows of high intensity in the 1-2 segments of the right lung. Mantoux test gave a reaction of 16 mm of induration. What clinical form of tuberculosis is most likely?
- **A.** Focal
- **B.** Infiltrative
- C. Disseminated
- D. Tuberculoma
- **E.** Miliary
- 99. 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 · 10⁹/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
- 100. 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.** β -adrenoreceptor blocking agents
- C. Cholinolytics
- **D.** Calcium antagonists
- E. Cardiac glycosides
- 101. 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
- 102. A 42-year-old patient with acute haemorrhage and class III blood loss underwent blood transfusion and got 1,8 l of preserved blood and erythromass of the same group and Rh. After the transfusion the patient complained of unpleasant retrosternal sensations, his arterial pressure dropped to 100/60 mm Hg, there appeared convulsions. Blood serum calcium was at the rate of 1,7 milli-

mole/liter. What is the mechanism of this complication development?

- **A.** Citrate binds calcium ions, hypocalcemia impairs myocardial function
- B. Citrate is cardiotoxic and nephrotoxicC. Citrate causes the development of metabolic acidosis
- **D.** The increased citrate rate causes convulsions
- **E.** Citrate binds potassium causing severe hypokalemia
- 103. A 27-year-old patient with a knife stomach wound has been delivered to a hospital 4 hours after injury. Objectively: the patient is in grave condition. Ps- 120 bpm, weak. AP- 70/40 mm Hg. Laparotomy revealed a lot of liquid blood in the abdominal cavity. The patient has been found to have bleeding from the mesenteric vessels of the small intestine. Damage to hollow organs has not been revealed. What is the best way to restore the blood loss?
- A. Autoblood reinfusiont
- **B.** Erythromass transfusion
- **C.** Transfusion of washed erythrocytes
- **D.** Transfusion of fresh frozen plasma
- **E.** Rheopolyglucinum transfusion
- **104.** 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
- **105.** The results of 5 year monitoring allowed to estimate the level of environmental influence upon health indices of popultaion. What statistic method should be chosen?
- **A.** Calculation of correlation coefficient
- **B.** Calculation of conformity coefficient
- **C.** Calculation of coefficient of difference validity
- **D.** Calculation of regression coefficient
- **E.** Calculation of dynamic indices
- 106. On the tenth day after discharge

from the maternity house a 2-year-old patient consulted a doctor about body temperature rise up to $39^{\circ}C$, pain in the right breast. Objectively: the mammary gland is enlarged, there is a hyperemized area in the upper external quadrant, in the same place there is an ill-defined induration, lactostasis, fluctuation is absent. Lymph nodes of the right axillary region are enlarged and painful. What is the most likely diagnosis?

- A. Lactational mastitis
- **B.** Abscess
- C. Erysipelas
- D. Dermatitis
- E. Tumour
- 107. During the dynamic observation over a parturient woman in the second stage of labor it was registered that the fetal heart rate fell down to 90-100/min and didn't come to normal after contractions. Vaginal examination revealed the complete cervical dilatation, the fetal head filling the entire posterior surface of the pubic symphysis and sacral hollow; the sagital suture lied in the anteroposterior diameter of the pelvic outlet, the posterior fontanelle was in front under the pubic arch. What plan for further labour management should be recommended?
- **A.** Application of forceps minor
- **B.** Caesarean section
- C. Episiotomy
- **D.** Application of cavity forceps
- **E.** Stimulation of labour activity by intravenous injection of oxytocin
- **108.** A female patient consulted a dermatologist about the rash on the trunk and extremities. Objectively: interdigital folds, flexor surfaces of wrists and navel region are affected with pairs of nodulocystic eruptions and crusts. The rash is accompanied by skin itch that is getting stronger at night. What external treatment should be administered?
- **A.** 20% benzyl benzoate emulsion
- **B.** 5% sulfuric ointment
- C. 2% sulfuric paste
- **D.** 5% naphthalan ointment
- **E.** 5% tetracycline ointment
- 109. An ambulance had been called to a 48-year-old man. According to his relatives, the patient had had three attacks of unconsciousness accompanied by convulsions within 24 hours. On examination the doctor witnessed the following attack: the patient lost consciousness

and fell to the floor, developed tonic, then clonic convulsions of trunk and extremities. The attack lasted 1 minute and ended with involuntary urination. Specify the kind of attack:

- **A.** Epileptic seizure
- **B.** Syncope
- **C.** Vegetative crisis
- **D.** Coma
- **E.** Attack of hysteria
- **110.** A patient is 60-year-old, retired, worked as deputy director of a research institute. Behavioural changes appeared 2 years ago after the death of her husband: she stopped looking after herself and leaving the house; then she stopped to clean the apartment and cook. Mental status: temporal disorientation. The patient does not understand many of the questions, is confused; does not know how to cook soup or fasten a button. Her speech is characterized by stumbling and logoclonia. She does not recognize doctors, fellow patients. She cries a lot but can not explain the reason for tears. What is the mechanism of this pathology?
- **A.** Atrophy of the cerebral cortex
- **B.** Atherosclerotic changes in cerebral vessels
- **C.** Serotonin deficiency
- **D.** Impaired conversion of dopamine to noradrenaline
- **E.** Disorder of melatonin metabolism
- 111. A 26-year-old patient has abused alcohol since the age of 16, needs a morning-after drink to cure hangover. He takes alcohol nearly every day, "a little at a time". Twice a week he gets severely drunk. The patient works as a motor mechanic, over the last 2 years work conflicts have become more frequent. What medical and tactical actions should be taken in this case?
- **A.** Voluntary consultation and treatment at an addiction clinic
- **B.** Compulsory treatment
- **C.** Referral to treatment at an activity therapy centre
- **D.** Referral to medical-social expert commission for assessment of his working ability
- **E.** Consultation with a psychologist
- 112. An 8-year-old girl periodically has sudden short-term heart pain, sensation of chest compression, epigastric pain, dizziness, vomiting. Objectively: the patient is pale, respiratory rate 40/min, jugular

pulse is present. Ps- 185 bpm, of poor volume. AP- 75/40 mm Hg. ECG taken during an attack shows ectopic P waves, QRS wave is not deformed. At the end of an attack a compensatory pause is observed. The most likely cause of the attack is:

- A. Paroxysmal atrial tachycardia
- **B.** Sinus tachycardia
- C. Paroxysmal ventricular tachycardia
- **D.** Complete AV-block
- E. Atrial fibrillation
- 113. A 1-month-old child became restless and presented with an increase in head sweating. It's known from the history that the child has been fed with cow's milk since birth (September 5). Examination revealed craniotabes. A doctor administered a course of UV radiation. Decide, if the child needs ergocalciferol:
- **A.** 2-2,5 months after the UVR withdrowal
- B. Does not need
- C. In combination with UVR
- **D.** Immediately after the UVR withdrowal
- **E.** A month after the UVR withdrowal
- **114.** Two hours ago a 38-year-old patient got pain in his right shin. He was diagnosed with popliteal artery embolism, acute arterial insufficiency of grade I. What is the most appropriate therapeutic tactics?
- **A.** Embolectomy
- **B.** Destruction of the embolus by the catheter
- **C.** Resection of the popliteal artery
- **D.** Bypass grafting
- **E.** Amputation at the middle of shin
- 115. A child is 2 days old. He was born with a weight of 2900 kg, body length of 50 cm. On examination the skin is intensely red, elastic, with preserved turgor. Puerile respiration is present. Respiration rate 40/min, cardiac sounds are rhythmic, sonorous. HR- 138/min. The abdomen is soft. The liver extends 2 cm below the costal margin. Diuresis is sufficient. Stool is in form of meconium. What is the most likely diagnosis?
- **A.** Physiological erythema of the newborn
- **B.** Toxic erythema of the newborn
- C. Neonatal phlegmon
- **D.** Erysipelas
- **E.** Exfoliative Ritter's dermatitis
- **116.** A 47-year-old female patient complains of leg heaviness, fatigue when

standing and walking. This feeling disappears when she takes a horizontal position. Objectively: dilatation of the superficial veins of the left shin and thigh with pigmentation and trophic skin disorders. What functional test should the examination be started with?

- **A.** Trendelenburg's test
- **B.** Pratt test 2
- C. Pratt test 1
- **D.** Sheinis test
- E. Perthes' test
- 117. A 28-year-old patient complains of discomfort, acute pain in the lower third of the left labia majora. The disease began suddenly after menstruation. Objectively: body temperature is 38°C. The left labia majora has a formation to 3 cm diameter, with hyperemic surface, extremely painful to the touch, with symptoms of fluctuation. What is the most likely diagnosis?
- A. Acute bartholinitis
- B. Vulvar cancer
- C. Vulvar fibroid
- **D.** Bartholin gland cyst
- **E.** Hypertrophy of the labia
- 118. A 40 week pregnant secundipara is 28 years old. Contractions are very active. Retraction ring is at the level of navel, the uterus is hypertonic, in form of hourglass. On auscultation the fetal heart sounds are dull, heart rate is 100/min. AP of the parturient woman is 130/80 mm Hg. What is the most likely diagnosis?
- **A.** RIisk of hysterorrhexis
- **B.** Mazolysis
- **C.** Disturbed labour
- **D.** Complete hysterorrhexis
- **E.** Attack of eclampsia
- 119. A neonatologist examining a full-term mature baby revealed the shortening and external rotation of the newborn's lower extremity. Clinical examination revealed positive Ortolani sign, symptom of non-vanishing pulse, additional skin folds on the internal surface of thigh. What is the most likely diagnosis?
- **A.** Congenital hip dislocation
- **B.** Dysplasia of the hip joint
- **C.** Varus deformity of the femoral neck
- **D.** Femoral neck fracture
- **E.** Fracture of the femoral shaft
- **120.** A child is being discharged from the surgical department after conservative treatment of invagination. What

recommendations should doctor give to mother to prevent this disease recurrence?

- **A.** Strict following of feeding regimen
- **B.** Common cold prophilaxis
- **C.** Feces observation
- **D.** Gastro-intestinal disease prevention
- **E.** Hardening of the child
- 121. 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
- **122.** An emergency situation at a chemical plant caused acute occupational intoxication. A doctor who revealed the case of "acute occupational disease (intoxication)" must notify the following authority:
- **A.** Sanitary and epidemiological station
- **B.** Plant administration
- C. Trade union committee of the plant
- **D.** Medical unit of the plant
- **E.** Ministry of Health of Ukraine
- **123.** A 42-year-old builder consulted a doctor about a foot injury with a nail that he got in the morning of the same day. The wound was washed with water. Three years ago he was vaccinated against tetanus. Examination established satisfactory condition of the patient. The left foot was slightly edematic, there was a stab wound on the sole. In order to prevent tetanus it is primarily required to:
- **A.** Give an intravenous injection of 0,5 ml of tetanus anatoxin
- **B.** Give an intravenous injection of 1 ml of tetanus anatoxin, 3000 IU of antitetanus serum
- **C.** Give an intravenous injection of 3000 IU of antitetanus serum
- **D.** Treat the wound with suds
- **E.** Administer a course of antibiotic therapy
- 124. A 6-year-old child has duodenal ulcer.

What antibacterial drug should be coadministered together with metronidazole and De-Nol in order to eradicate Helicobacter pylori infection?

- A. Amoxicillin
- **B.** Tetracycline
- C. Oleandomycin
- **D.** Biseptol
- **E.** Sulfadimethoxinum
- **125.** Against the background of angina a patient has developed pain in tubular bones. Examination revealed generalized enlargement of lymph nodes, hepatolienal syndrome, sternalgia. In blood: RBCs $3, 6 \cdot 10^{12}$ /l, Hb- 87 g/l, thrombocytes $45 \cdot 10^{9}$ /l, WBCs $13 \cdot 10^{9}$ /l, blasts 87%, stab neutrophils 1%, segmented neutrophils 7%, lymphocytes 5%, ESR 55 mm/h. What is the most likely diagnosis?
- A. Acute leukemia
- B. Erythremia
- C. Chronic lymphocytic leukemia
- **D.** Chronic myeloid leukemia
- E. Multiple myeloma
- 126. A 51-year-old patient complains of having intensive bloody discharges from vagina for 15 days after delay of menstruation for 2,5 months. In anamnesis: disorders of menstrual function during a year, at the same time she felt extreme irritability and had sleep disorders. US examination results: uterus corresponds with age norms, appendages have no pecularities, endometrium is 14 mm thick. What is the doctor's tactics?
- **A.** Diagnostic curettage of uterine cavity
- **B.** Conservative treatment of bleeding
- **C.** Hysterectomy
- **D.** Šupravaginal amputation of uterus without appendages
- E. TORCH-infection test
- 127. 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
- **128.** Hygienic expertise of a sample taken from the batch of grain revealed 2% of grains infected with microscopic Fusarium fungi. On the ground of laboratory analyses this batch of grain should be:
- **A.** Sold without restrictions
- **B.** Tested for toxicity
- **C.** Used for forage production
- **D.** Used for ethanol production
- **E.** Destroyed
- **129.** Among the inhabitants of a workmen's settlement located near an industrial plant the cases of nervous and endocrine system diseases as well as renal diseases became more frequent. Blood analyses revealed a decrease in sulfhydryl groups. These pathologies might have been caused by the following substance released into the environment:
- **A.** Mercury
- **B.** Cadmium
- **C.** Boron
- **D.** Chromium
- E. Lead
- **130.** 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
- **131.** During the medical examination at school the schoolchildren had to undergo plantography. After the analysis of footprints platypodia was found in 30% of pupils. What is the percentage of the flatfoot isthmus?
- **A.** 65%
- **B.** 30%
- **C.** 50%
- **D.** 55%
- **E.** 45%
- **132.** A factory's sectorial doctor selects a group of persons who often fall ill for thorough monitoring. At the same time he takes into consideration the number of

etiologically related cases with temporary disability in each of the employees over the last year. An employee falls into this group if the number of sickness cases is:

- A. 4 or more
- **B.** 1 or more
- C. 2 or more
- **D.** 3 or more
- E. 6 or more
- 133. Half an hour ago a 67-year-old patient with a hernia picked up a heavy object, which caused acute pain in the region of hernia protrusion, the hernia couldn't be reduced. Objectively: the hernia in the right inguinal region is roundish, tight, moderately painful; during palpation it was reduced back to the cavity, the pain was gone. Specify the further medical tactics:
- **A.** Inpatient surveillance
- **B.** Immediate hernioplasty
- **C.** Immediate laparotomy
- **D.** Planned hernioplasty a month later
- **E.** Planned hernioplasty a year later
- **134.** Production areas of a greenhouse complex have the following microclimate parameters: air temperature $42^{\circ}C$, humidity 98%, air velocity 0,05 mps, temperature of enclosing surfaces $15^{\circ}C$. Characterize the microclimate of production areas:
- **A.** Overheated
- **B.** Comfortable
- **C.** Cooling
- **D.** Uncomfortable
- **E.** Satisfactory
- 135. 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. USÍ
- **D.** Cytosmear
- **E.** Symptomatic therapy
- **136.** Sanitary-veterinary examination of a cow carcass revealed measle contamination (2-3 measles per 10 cm²). What tactics should be chosen in respect of this meat consumption?

- **A.** The whole carcass should be technically disposed
- **B.** Meat can be sold without any restrictions
- **C.** The carcass should be used for the production of canned meat
- **D.** Meat should be disinfected by boiling
- **E.** Meat should be disinfected by freezing
- 137. A 28-year-old female patient complains of having haemorrhage from the genital tracts for 1 month. 6 months ago she had natural delivery and gave birth to a girl weighing 3100 g. Objectively: the uterus is enlarged to 9-10 weeks, mobile, painless, of heterogenous consistency. Examination reveals vaginal cyanosis, anaemia and body temperature rise up to 37,8°C. There is a significant increase in hCG concentration in the urine. What is your provisional diagnosis?
- **A.** Uterine chorionepithelioma
- **B.** Pregnancy
- **C.** Hydatidiform mole
- **D.** Endometritis
- E. Uterine fibromyoma
- **138.** The correlation between the service record and eosinophil concentration in blood was studied in workers at 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
- 139. A 43-year-old male patient undergoing treatment for peptic ulcer complains of weakness, dizziness, coffee-ground vomiting, melena. After administration of haemostatics the patient's condition has not improved, fresh blood has shown up in the vomit, skin bruises of different sizes have appeared. In blood: thrombocytes $50 \cdot 10^9$ /l, Lee-White clotting time 35 minutes, APTT 80 seconds. In this case it is most rational to administer the following preparation:
- **A.** Fresh frozen plasma
- **B.** Heparin
- **C.** Fibrinogen
- **D.** Rheopolyglucinum
- **E.** Vikasol
- **140.** A girl of 3 months presents with rhinitis, dyspnea, dry cough. These manifestations has been observed for

two days. Objectively: the child has pale skin, acrocyanosis, shallow respiration at the rate of 80/min. Percussion reveals handbox resonance over the whole surface of lungs, there are a lot of fine rales. What is the most likely diagnosis?

- A. Acute bronchiolitis
- **B.** Pneumonia
- C. Mucoviscidosis
- **D.** Foreign body of the airway
- **E.** Acute bronchitis
- **141.** A 30-year-old patient has been admitted to the intensive care unit for multiple bee stings. The skin is covered with cold sweat. The pulse is felt just on the carotid arteries, 110 bpm, respiration is 24/min, rhythmic, weakened. Which drug should be given in the first place?
- **A.** Adrenalin hydrochloride intravenously
- **B.** Prednisolone intravenously
- **C.** Adrenalin hydrochloride intramuscularly
- **D.** Dopamine intravenously
- **E.** Tavegil intravenously
- 142. 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, γ -globulines 25%. What is the most likely diagnosis?
- **A.** Systemic scleroderma
- **B.** Dermatomyositis
- C. Rheumatoid arthritis
- **D.** Systemic lupus erythematosus
- E. Raynaud's disease
- 143. A 45-year-old man has been exhibiting high activity for the last 2 weeks, he became talkative, euphoric, had little sleep, claimed being able "to save the humanity" and solve the problem of cancer and AIDS, gave money the starangers. What is the most likely diagnosis?
- A. Maniacal onset
- **B.** Panic disorder
- **C.** Agitated depression
- **D.** Schizo-affective disorder
- **E.** Catatonic excitation
- 144. After the pneumatic dilatation of

oesophageal stricture a patient developed acute retrosternal pain getting worse when throwing the head back and swallowing. Objectively: dilatation of the neck veins, dropped beat pulse, signs of purulent intoxication, oliguria, emphysema of the upper portion of chest. What disease can be suspected?

- **A.** Suppurative mediastinitis
- **B.** Thrombosis of the superior vena cava
- **C.** Pleural empyema
- **D.** Acute myocardial infarction
- **E.** Spontaneous pneumothorax
- **145.** 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
- **146.** The objective of a statistical study was to find out the extent of seeking medical care by the population. For this purpose 300 residents of the area were interviewed. Information was collected by means of a special questionnaire. What method of collecting information was used by researchers?
- **A.** Anamnestic
- **B.** Immediate registration
- **C.** Immediate examination
- **D.** Doing extracts
- E. -
- 147. An 8-month-old baby has had problems with nasal breathing and mucopurulent 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
- **148.** A city's population is 400000 inhabi-

tants in 2005 there were registered 5600 deaths, including 3300 cases caused by cardiovascular diseases, 730 - by tumours. Which of the following indicators allows to characterize the share of the circulatory system diseases as the cause of death in the city?

- **A.** Extensive index
- **B.** Intensive index
- **C.** Index of relative intensity
- **D.** Demonstrativeness index
- E. Ratio
- **149.** It is planned to organize a rural outpatient clinic. The patients will be able to visit the doctors of the following specialities:
- **A.** Therapeutist, dentist, pediatrician, obstetrician-gynecologist
- **B.** Therapeutist, pediatrician, neurologist
- **C.** Pediatrician, obstetrician-gynaecologist, ophthalmologist
- **D.** Pediatrician, therapeutist, ophthalmologist
- **E.** Obstetrician-gynaecologist, therapeutist
- **150.** A 10-year-old girl was admitted to a hospital with carditis presentations. It is known from the anamnesis that two weeks ago she had exacerbation of chronic tonsillitis. What is the most likely etiological factor in this case?
- A. Streptococcus
- **B.** Staphylococcus
- C. Pneumococcus
- D. Klebsiella
- E. Proteus
- **151.** In a rural health district a child died in the first month of life. In order to analyze this situation it was necessary to complete expert evaluation of medical records. Which medical document was analyzed in the first place?
- A. Child developmental history record
- **B.** Neonatal record
- **C.** Record of vaccinations
- **D.** Medical record of an outpatient
- E. Child's medical record
- **152.** The head of prenatal care department intends to complete expert evaluation of compliance with medical and technological standards of pregnancy follow-up. What documents must be verified for this purpose?

- **A.** Individual records of pregnant and postpartum women
- **B.** Prenatal records
- **C.** Medical records of outpatients
- **D.** Labour and delivery record
- E. Neonatal record
- **153.** Examination of placenta revealed a defect. An obstetrician performed manual investigation of uterine cavity, uterine massage. Prophylaxis of endometritis in the postpartum period should involve following actions:
- **A.** Antibacterial therapy
- **B.** Instrumental revision of uterine cavity
- **C.** Haemostatic therapy
- **D.** Contracting agents
- E. Intrauterine instillation of dioxine
- **154.** A 35-year-old patient complains of heartburn, sour eructation, burning, compressing retrosternal pain and pain along the esophagus rising during forward bending of body. The patient hasn't been examined, takes Almagel on his own initiative, claims to feel better after its taking. Make a provisional diagnosis:
- A. Gastroesophageal reflux disease
- **B.** Functional dyspepsia
- C. Cardiospasm
- **D.** Gastric ulcer
- E. Duodenal ulcer
- **155.** All the joints on the left elbow of a newborn are extended, the whole arm hangs vertically along the trunk with the forearm pronated. Active movements in the elbow joint are absent but present in the shoulder joint. The hand is flattened, atrophied, cold to the touch, hangs passively. Grasp reflex and hand-mouth reflex on the affected side are missing. Haemogram values are normal. What is the most likely diagnosis?
- **A.** Inferior distal obstetrical paralysis
- **B.** Osteomyelitis
- C. Proximal obstetrical paralysis
- **D.** Complete obstetrical paralysis
- **E.** Hypoxic-ischemic encephalopathy
- **156.** 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
- **157.** A 35-year-old victim of a road accident has got an injury of the right side of his chest. Objectively: respiration rate 28-30/min, respiration is shallow, restricted respiratory excursion and acrocyanosis are present. Ps-110 bpm, AP- 90/60 mm Hg. Respiratory sounds over the right lung cannot be auscultated. Chest radiograph shows fractures of the VI-VII ribs on the right, the right pleural cavity contains both air and fluid, with the fluid at about the level of the V rib, the shadow of the mediastinum is displaced to the left. What first aid should be provided to the victim?
- **A.** Puncture of the pleural cavity
- **B.** Antibiotic administration
- C. Vagosympathetic blockade
- **D.** Artificial ventilation of lungs
- **E.** Urgent thoracotomy
- **158.** A 20-year-old patient complains of pain in the left lumbar region, arterial pressure rise up to 160/110 mm Hg. USI revealed that the structure and size of the right kidney were within age norms, there were signs of 3 degree hydronephrotic transformation of the left kidney. Doppler examination revealed an additional artery running to the lower pole of the kidney. Excretory urogram shows a narrowing in the region of ureteropelvic junction. Specify the therapeutic tactics:
- **A.** Surgical intervention
- **B.** Administration of spasmolytics
- **C.** Administration of ACE inhibitors
- **D.** Kidney catheterization
- **E.** Administration of β -blockers
- 159. 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.** To perform the Heimlich manoever
- **B.** To perform conicotomy immediately
- **C.** To send for an anesthesiologist and wait for him
- **D.** To use an inhalation of β_2 -adrenoceptor agonist
- **E.** To make a subcutaneous injection of dexamethasone
- **160.** A patient undergoing treatment for the left-sided destructive pneumonia presents with deterioration of his general condition, progressing dyspnea, cyanosis. Objectively: the left side of chest is not involved in respiration, breathing sounds cannot be auscultated. Radiograph shows a shadow reaching the 5 rib with a horizontal fluid level and a radiolucency above it, the mediastinum is displaced to the right. What is the medical tactics?
- A. Thoracostomy
- **B.** Open thoracotomy
- C. Endotracheal intubation
- **D.** Infusion and antibacterial therapy
- **E.** Emergency bronchoscopy
- 161. A 10 week pregnant woman was admitted to a hospital for recurrent pain in the lower abdomen, bloody discharges from the genital tracts. The problems turned up after ARVI. The woman was registered for antenatal care. Speculum examination revealed cyanosis of vaginal mucosa, clean cervix, open cervical canal discharging blood and blood clots; the lower pole of the gestational sac was visible. What tactics should be chosen?
- **A.** Curettage of the uterus
- **B.** Pregnancy maintenance therapy
- **C.** Expectant management, surveillance
- **D.** Hysterectomy
- E. Antiviral therapy
- **162.** A 29-year-old patient complains of absent menstruation for a year, milk discharge from the nipples when pressed, loss of lateral visual fields. X-ray shows an expansion of the sella turcica. What is the most likely cause of this condition?
- **A.** Pituitary tumour
- **B.** Mammary tumour
- **C.** Functional disorder of the hypothalamic-pituitary-ovarian system
- **D.** Ovarian tumor
- **E.** Pregnancy
- **163.** On the second day after preventive vaccination a 2-year-old boy presented with abdominal pain without clear localization, body temperature rose up to 38°C.

On the third day the child got red papular haemorrhagic eruption on the extensor surfaces of limbs and around the joints. Knee joints were edematic and slightly painful. Examination of other organs and systems revealed no pathological changes. What is the most likely diagnosis?

- A. Haemorrhagic vasculitis
- **B.** Thrombocytopenic purpura
- C. Meningococcemia
- **D.** Urticaria
- **E.** DIC syndrome
- 164. A patient with uterine fibromyoma sized up to 8-9 weeks of pregnancy consulted a gynaecologist about acute pain in the lower abdomen. Examination revealed pronounced positive symptoms of peritoneal irritation, high leukocytosis. Vaginal examination revealed that the uterus was enlarged up to 9 weeks of pregnancy due to the fibromatous nodes, one of which was mobile and extremely painful. Appendages were not palpable. Discharges were mucous, coming in moderate amounts. What is the treatment tactics?
- **A.** Urgent surgery (laparotomy)
- **B.** Surveillance and spasmolytic therapy
- C. Fractional diagnostic curettage of the uterine cavity
- **D.** Surgical laparoscopy
- **E.** Surveillance and antibacterial therapy
- **165.** 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
- **166.** A 3-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
- **167.** A 40-year-old female patient complains of having a bulge on the anterior surface of neck for 5 years. Objectively: Ps- 72 bpm, arterial pressure 110/70 mm Hg, in the right lobe of thyroid gland palpation reveals a mobile 4x2 cm node, the left lobe is not palpable, the basal metabolic rate is 6%. What is the most likely diagnosis?
- **A.** Nodular euthyroid goiter
- **B.** Nodular hyperthyroid goiter
- C. Riedel's thyroiditis
- **D.** Mixed euthyroid goiter
- **E.** The median cervical cyst
- **168.** A 14-year-old patient with signs of internal haemorrhage has been taken to a hospital after a fight. He has had haemophilia A since childhood. He has been diagnosed with retroperitoneal hematoma. What should be administered in the first place?
- **A.** Cryoprecipitate
- **B.** Aminocapronic acid
- **C.** Dried plasma
- **D.** Platelet concentrate
- **E.** Fresh blood
- **169.** A patient is 14 years old. Cytochemical study of punctate revealed 40% of blasts, there was negative reaction to peroxidase and with Sudan black, positive reaction to glycogen. Specify the form of acute leukemia:
- **A.** Lymphoblastic
- **B.** Myeloblastic
- **C.** Monoblastic
- **D.** Promyelocytic
- **E.** Undifferentiated
- 170. 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
- **171.** A 59-year-old male patient with essential hypertension of stage II is registered with the dispensary department of a polyclinic. The patient regularly takes ACE inhibitors and calcium antagonists. How often should a therapeutist examine this patient (except for exacerbation periods)?
- A. Every 3 months
- **B.** Every 6 months
- **C.** Every 4 months
- **D.** Once a year
- **E.** Every 9 months
- 172. A 37-year-old patient complains of pain in the lumbar spine that is getting stronger during walking; restricted mobility, edema of the right side of abdomen. He has a history of focal tuberculosis. X-ray picture shows the destruction of the adjacent surfaces of the 1-2 vertebral bodies of the lumbar spine, vertebral body height is decreased, intervertebral foramen is undetectable. Abdominal ultrasound reveals a 15x20 cm formation in the retroperitoneal space, there are echo signals of fluid presence. What is the most likely diagnosis?
- **A.** Tuberculous spondylitis of the lumbar spine
- **B.** Fracture of the 1-2 vertebral bodies of the lumbar spine
- **C.** Spinal metastases
- **D.** Spondylolisthesis of the lumbar spine
- **E.** Osteochondrosis
- 173. The condition of a 3-year-old child with acute non-rheumatic myocarditis has suddenly deteriorated: he presents with anxiety, acrocyanosis, peripheral edemata, dyspnea. Auscultation of lungs reveals fine moist rales on both sides mainly in the lower parts. AP- 65/40 mm Hg. HR- 150/min, heart sounds are muffled, arrhythmic (extrasystole). Liver is +4 cm. Oliguria is present. The child has been diagnosed with acute heart failure. Which method of examination is most informative for assessing the child's status dynamics?

- A. Echocardiography
- B. ECC
- **C.** Diuresis monitoring
- **D.** Monitoring of K^+ , Na^+ concentration in blood
- **E.** 24-hour monitoring of heart rhythm
- **174.** 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
- 175. A 60-year-old patient complains of nearly permanent sensation of heaviness and fullness in the epigastrium, that increases after eating, foul-smelling eructation, occasional vomiting with food consumed 1-2 days ago, weight loss. 12 years ago he was found to have an ulcer of pyloric channel. The patient has taken ranitidine for periodic hunger pain. The patient's condition has been deteriorating over the last 3 months. Objectively: splashing sound in the epigastrium is present. What kind of complication is it?
- **A.** Pyloric stenosis
- **B.** Penetration of gastric ulcer
- **C.** Functional pyloric spasm
- **D.** Foreign body in the stomach (bezoar)
- E. Malignization of gastric ulcer
- 176. A hospital admitted an 11-yearold boy diagnosed with medium-severe asthma, exacerbation period. In order to arrest the attacks the boy was administered broncholytic nebulizer therapy. During the day the child's condition stabilized. What is the most appropriate method for further monitoring of respiratory function in this patient?
- **A.** Peak flowmetry
- **B.** Spirometry
- **C.** Pneumotachometry
- **D.** Bronchodilatation tests
- **E.** Veloergometry
- 177. A full-term newborn was born with body weight of 4000 g, body length of 57 cm. Reaction to the postnatal check was absent. There was diffuse cyanosis, heart rate of 80/min. What resuscitation measures should be taken?

- **A.** Start ALV with a mask
- **B.** Give 100% oxygen
- **C.** Intubate the child and start ALV
- **D.** Start tactile stimulation
- **E.** Give an injection of naloxone
- 178. A 52-year-old patient works as a secretary and has 30 year record of service. She complains of spasms in her right hand during working and inability to type and write. Up to 80% of her work involves hand load. The patient has been presenting with these symptoms for 2 years. Objectively: the right hand is tense, there is an increase in muscle tone, attempts to write cause spasms. Examination revealed no pathological changes of CNS. What is the most likely diagnosis?
- **A.** Spastic form of coordination neurosis
- **B.** Neuralgic form of coordination neurosis
- **C.** Paretic form of coordination neurosis
- **D.** Hysteric neurosis
- **E.** Chronic manganese intoxication
- 179. A multigravida with Rhisosensitization was found to have a decrease in anti-Rh titer from 1:32 to 1:8 at 33-34 weeks of gestation. Ultrasound revealed double contour of head, ebnlargement of fetal liver, placental thickness of 50 mm. The patient has indication for:
- **A.** Premature delivery
- **B.** Course of desensitizing therapy
- **C.** Plasmapheresis
- **D.** Repeated (after 2 weeks) USI
- **E.** Administration of anti-Rh gamma globulin
- **180.** 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
- **181.** A patient complains of retrosternal pain, difficult swallowing, over 10 kg weight loss within three months, general weakness. In blood: hypochromic anaemia, neutrophilic leukocytosis. In feces: weakly positive Gregersen's reaction. On esophagram a filling defect with ill-defined serrated edges shows up along

- a large portion of the esophagus. What is the most likely diagnosis?
- A. Esophageal carcinoma
- **B.** Benign tumour
- C. Esophageal achalasia
- **D.** Peptic ulcer
- E. Sideropenic dysphagia
- **182.** A 27-year-old patient complains of irritability, tearfulness, depression, and sometimes aggressiveness, headache, nausea, vomiting, swelling of the mammary glands. The mentioned problems arise 5-6 days before menstruation and gradually progress until menstruation, 3 days after it the problems disappear. What is the most likely diagnosis?
- **A.** Premenstrual syndrome
- **B.** Premature pathological climacterium
- C. Secondary psychogenic amenorrhea
- **D.** Preclimacterium syndrome
- **E.** Algomenorrhea
- **183.** A 2-year-old child in a satisfactory condition periodically presents with moderate proteinuria, microhematuria. USI results: the left kidney is undetectable, the right one is enlarged, there are signs of double pyelocaliceal system. What study is required to specify the diagnosis?
- **A.** Excretory urography
- **B.** Micturating cystography
- **C.** Retrograde urography
- **D.** Doppler study of renal vessels
- **E.** Radioisotope renal scan
- **184.** An emergency doctor has diagnosed a 32-year-old woman with generalized convulsive status epilepticus. The deterioration in the patient's condition is caused by a sudden gap in the epilepsy treatment. Specify the doctor's further tactics:
- **A.** Hospitalization in the intensive care unit
- **B.** Hospitalization in the department of neurology
- C. Hospitalization in the department of neurosurgery
- **D.** Outpatient monitoring by a neuropathologist
- **E.** Outpatient monitoring by a neurosurgeon
- **185.** A 75-year-old male patient complains of slight pain in the right iliac region. The abdominal pain arose 6 days ago and was accompanied by nausea. Surgical exami-

nation revealed moist tongue, Ps- 76 bpm. AP- 130/80 mm Hg. Abdomen was soft, slightly painful in the right iliac region on deep palpation, the symptoms of the peritoneum irritation were doubtful. In blood: RBCs - $4,0 \cdot 10^{12}$ /l, Hb- 135 g/l, WBCs - $9,5 \cdot 10^9$ /l, stab neutrophils - 5%, segmentonuclear - 52%, lymphocytes - 38%, monocytes - 5%, ESR - 20 mm/h. Specify the doctor's further tactics:

A. Emergency operation for acute appendicitis

B. Hospitalization, dynamic surveillance

C. Send the patient home

D. Refer the patient to a district therapist **E.** Administration of additional examination: abdominal ultrasound, x-ray contrast study of the gastrointestinal tract

186. A 56-year-old patient was undergoing a surgery for suture repair of perforated ulcer. During the operation the cardiomonitor registered ventricular fibrillation. The first-priority measure should be:

A. Electrical defibrillation

B. Injection of adrenalin

C. Injection of lidocaine

D. Injection of atropine

E. Injection of calcium chloride

187. On the 10th day postpartum a puerperant woman complains of pain and heaviness in the left mammary gland. Body temperature is 38,8°C, Ps- 94 bpm. The left mammary gland is edematic, the supero-external quadrant of skin is hyperemic. Fluctuation symptom is absent. The nipples discharge drops of milk when pressed. What is a doctor's further tactics?

A. Antibiotic therapy, immobilization and expression of breast milk

B. Compress to both mammary glands

C. Inhibition of lactation

D. Physiotherapy

E. Opening of the abscess and drainage of the mammary gland

188. A 30-year-old female patient complains of milk discharge from the mammary glands, 5-month absence of menstruation. She had one physiological labour four years ago. Objectively: mammary glands are normally developed. Bimanual examination reveals that the uterus is decreased in size, the ovaries are of normal size. MRI-scan shows no cerebral pathologies. Concentration of thyroid-stimulating hormone is normal.

The serum prolactin level is increased. What is the most likely diagnosis?

A. Hyperprolactinemia

B. Hypothyroidism

C. Polycystic ovary syndrome

D. Pituitary adenoma

E. Sheehan syndrome

189. During self-examination a 22-year-old patient revealed a mammary tumour. Palpation revealed a firm, painless, freely mobile formation up to 2 cm, peripheral lymph nodes were not changed. USI results: in the superior external quadrant of the right mammary gland there was a big formation of increased echogenicity, sized 18x17 mm. The patient was provisionally diagnosed with fibroadenoma. What is a doctor's further tactics?

A. Surgical removal of the tumour prior to pregnancy

B. Dynamic follow-up

C. Surgical treatment after pregnancy

D. Radical mastectomy

E. Nonsteroid anti-inflammatory drugs, oral contraceptives

190. A 42-year-old female lives in the basement, is unemployed, undernourished. She complains of having general weakness, hair loss, brittle nails for six months, likes to eat chalk. Objectively: the patient is emaciated, pale, has dry skin. Peripheral lymph nodes are not enlarged. Liver is +1,5 cm. In blood: RBCs - $1.8 \cdot 10^{12}$ /l, Hb- 62 g/l, colour index - 0.78, reticulocytes - $0.5^{\circ}/_{oo}$, ESR- 18 mm/h. Leukogram exhibits no pathology. What is a provisional diagnosis?

A. Nutritional iron deficiency anaemia

B. Chronic hepatitis

C. B_{12} -deficiency anaemia

D. Acquired haemolytic anaemia

E. Congenital haemolytic anaemia

191. A 78-year-old patient complains of severe pain in the lower abdomen, perineum and rectum; intense urge to urinate and inability to urinate without assistance. Abdomen palpation reveals a moderately painful globular formation above the pubis, there is percussion dullness over the formation. What is the most likely diagnosis?

- A. Acute urinary retention
- **B.** Chronic urinary retention
- **C.** Chronic incomplete urinary retention
- **D.** Paradoxical ischuria
- E. Cystitis
- 192. A 3-year-old child with ARVI had been administered biseptol, paracetamol, nazoferon. On the third day of treatment the baby's condition deteriorated: he developed sore throat, stomatitis, conjunctivitis, hypersalivation, painful dark red spots on the neck, face, chest and legs, then the spots were replaced with vesicles. Examination revealed lesions of mucous membranes around the mouth and anus. What is your provisional diagnosis?
- A. Stevens-Johnson syndrome
- **B.** Atopic dermatitis
- **C.** Chickenpox
- **D.** Serum sickness
- E. Bullous dermatitis
- 193. Preventive examination of a 50-yearold woman revealed a dense tumour of the right mammary gland up to 5 cm in diameter without distinct outlines. The skin over the tumour looked like lemon peel. Palpation revealed a lymph node in the axillary region. What is the most likely diagnosis?
- A. Breast cancer
- **B.** Lactocele
- **C.** Diffuse mastopathy
- **D.** Mastitis
- **E.** Breast lipoma
- **194.** A 20-year-old patient complains of breath shortness, continuous dull heart pain, irritability. Objectively: general condition is satisfactory, the pulse is labile, AP- 130/60 mm Hg. ECG shows repolarization disorder. The patient has been diagnosed with cardiac-type neurocirculatory dystonia. The patient should receive treatment under the following conditions:
- **A.** Outpatient treatment
- **B.** Inpatient treatment at the therapeutic department
- C. Inpatient treatment at the cardiology department
- **D.** Inpatient treatment at the cardiac surgery department
- **E.** Inpatient treatment at the psychiatric department
- **195.** A 38-year-old male works within the range of ionizing radiation. At a routi-

- ne medical examination he presents no problems. In blood: RBCs $4,5\cdot10^{12}$ /l, Hb-80 g/l, WBCs $2,8\cdot10^{9}$ /l, thrombocytes $30\cdot10^{9}$ /l. Decide if this person can work with sources of ionizing radiation:
- **A.** Working with radioactive substances and other sources of ionizing radiation is contraindicated
- **B.** The patient is allowed to work with radioactive substances
- **C.** The patient can only work with radioactive substances of low activity
- **D.** The patient can be allowed to work after an extended medical examination
- **E.** The patient is allowed to work with radioactive substances for the limited period of time
- **196.** A patient who undergoes treatment at a tuberculosis clinic has complained of having progressing headache for the last 3 weeks. Neurological examination reveals rigidity of occipital muscles, no focal symptoms. What is your provisional diagnosis?
- **A.** Tuberculous meningitis
- **B.** Chorea minor
- C. Brain tumour
- **D.** Myelitis
- **E.** Convexital arachnoiditis
- **197.** A patient with chronic suppurative otitis has developed severe headache, vomiting, body temperature rise. The meningeal symptoms are present. There are no focal neurological symptoms. The further tactics of a doctor should be:
- **A.** Urgent hospitalization and diagnostic lumbar puncture
- **B.** Skull radiography
- C. Regular medical check-up
- **D.** Administration of anti-inflammatory drugs
- **E.** Referral for a consultation with otolaryngologist
- **198.** A 12-year-old child had three attacks of acute rheumatic fever accompanied by carditis. Examination revealed the symptoms of chronic tonsillitis, mitral insufficiency, carious teeth. What is the optimal method of secondary prophylaxis?

- **A.** Year-round bicillin prophylaxis till the age of 25
- **B.** Course of cardiotrophic drugs twice a vear
- **C.** Year-round bicillin prophylaxis for 3 years
- **D.** Tonsillectomy
- **E.** Oral cavity sanitation
- 199. Routine examination of a 16-year-old boy revealed the presence of three heart sounds on auscultation. The third sound is low and occurs in early diastole, there is no additional murmur. In history: pneumonia six months ago. The patient presents no problems. Examination revealed hyposthenia, underdevelopment of muscles. Laboratory and instrumental studies revealed no peculiarities. What is the origin of the additional heart sound?

- A. Physiological III sound
- **B.** The sound of the mitral valve opening
- C. Protodiastolic gallop rhythm
- **D.** Pericardial diastolic sound
- **E.** The sound of the tricuspid valve opening
- **200.** A patient's condition is getting worse towards evening: she becomes excited, complains of "internal anxiety", "a weight on her heart", foreboding of evil-"something evil will happen to me or my family". The patient is sad, melancholic, has poor appetite and sleep disorders. Specify the kind of mental disorder:
- **A.** Anxious depression
- **B.** Somatized depression
- **C.** Endogenous depression
- **D.** Hypochondriac depression
- E. Agitated depression