- **1.** A 7-year-old boy suddenly developed pain and edema in his right knee. The day before, at school, he took part in crosscountry skiing. There is no family history of hemophilia or susceptibility to bleeding. Objectively, his body temperature is 37.5°C. The knee is painful on palpation, hot to the touch, and has edema with local tissue tension above it. In complete blood count: Hb - 123 g/L, leukocytes - 5.6 \cdot 10⁹/L, platelets $-354 \cdot 10^9/L$, prothrombin time - 12 seconds (normal range is 10–15 seconds), activated partial thromboplastin time -72 seconds (normal range is 35– 45 seconds). Bleeding time is normal, the factor VIII levels constitute 5% of normal value. Make the diagnosis:
- A. Hemophilia A

B. Hemophilia B

C. Henoch-Schoenlein purpura

D. Vitamin K deficiency

E. Thrombocytopenia

- 2. A 38-year-old man complains of periodical problematic swallowing of both solid and liquid foods that is observed for many months. Sometimes he develops an intense retrosternal pain, especially after hot beverages. Asphyxia attacks are observed at night. He has no weight loss. Objectively, his general condition is satisfactory, the skin is of normal color. Examination detects no changes in the gastrointestinal tract. Chest X-ray shows dilation of the esophagus with air-fluid levels in it. Make the diagnosis:
- A. Esophageal achalasia

B. Myasthenia

C. Esophageal cancer

D. Esophageal candidiasis

E. Gastroesophageal reflux disease

3. Throughout the last year a 27-year-old man notes fatigue, excessive sweating, and heaviness in his left subcostal region, especially after eating. Objectively, his spleen and liver are enlarged. In clinical blood test: erythrocytes $-3.2 \cdot 10^{12}$ /L, Hb -100 g/L, color index -0.87, leukocytes $-100 \cdot 10^9$ /L, basophils -7%, eosinophils -5%, monocytes -15%, juvenile -16%, band neutrophils -10%, segmented neutrophils -45%, lymphocytes -2%, monocytes -0%, reticulocytes -0.3%, platelets $-400 \cdot 10^9$ /L, ESR -25 mm/hour. Make the diagnosis:

A. Chronic myelogenous leukemia

B. Chronic lymphocytic leukemia

C. Acute leukemia

D. Erythremia (polycythemia vera)

E. Hepatic cirrhosis

- **4.** A 30-year-old woman complains of general weakness, difficult swallowing when eating, dry skin and brittle hair. Objectively, her body temperature $36.6^{\circ}C$, respirations – 16/min., Ps 92/min., blood pressure -110/70 mm Hg. The skin and visible mucosae are pale. In the blood: Hb - 65 g/L, erythrocytes - $3.2 \cdot 10^{12}$ /L, color index — 0.6, reticulocytes -3%, leucocytes $-6.7 \cdot 10^9$ /L, eosinophils -2%, stab neutrophils -3%, segmented neutrophils -64%, lymphocytes -26%, monocytes -5%, ESR -17 mm/hour. Serum iron - 7.4 mcmol/L, total protein - 78 g/L. What factor is deficient, causing this condition?
- **A.** Iron

B. Vitamin B_6

C. Protein

D. Folic acid

E. Glucose 6-phosphate dehydrogenase

- **5.** During the study of pulmonary tuberculosis morbidity, the data on socioeconomic living conditions and harmful habits of the patients were obtained. What method allows the assessment of the extent to which these factors influence the tuberculosis morbidity?
- **A.** Calculation of the correlation coefficient
- **B.** Calculation of the agreement coefficient **C.** Calculation of the regression coefficient
- **D.** Calculation of standardized indicators
- **E.** Calculation of the confidence coefficient
- **6.** A 25-year-old woman has been suffering from diabetes mellitus since she was 9 years of old. She was admitted into the nephrology unit with significant edemas of the face, upper and lower extremities. Blood pressure 200/110 mm Hg. In the laboratory analysis of the blood: Hb 90 g/L, blood creatinine 850 mcmol/L, urine proteins 1.0 g/L, leukocytes 10–15 in the vision field. Glomerular filtration rate 10 mL/min. What tactics should the doctor choose?
- **A.** Transfer into the hemodialysis unit
- **B.** Active conservative therapy for diabetic nephropathy

C. Dietotherapy

D. Transfer into the endocrinology clinic

E. Liver transplantation

7. Disease onset was acute. A child

developed general weakness, pain in the joints, and fever. Later these signs became accompanied by itching skin rash manifested as erythematous spots 2–5 mm in size. The rash gradually turned hemorrhagic. Large joints are painful and swollen; pain attacks periodically occur in the paraumbilical area; there are signs of intestinal hemorrhage. What is the most likely diagnosis?

- **A.** Hemorrhagic vasculitis (Henoch-Schonlein purpura)
- **B.** Scarlet fever
- C. Hemorrhagic meningoencephalitis
- **D.** Streptococcal impetigo
- E. Rheumatism
- **8.** A 16-year-old patient has made an appointment with an otolaryngologist. He complains of fever and sore throat. The disease onset was 2 days ago, after the patient ate two portions of ice-cream. Pharyngoscopy shows hyperemic mucosa of the palatine tonsils, with purulent exudate in the lacunae. Make the provisional diagnosis:
- A. Lacunar tonsillitis
- **B.** Follicular tonsillitis
- **C.** Diphtheria
- **D.** Acute pharyngitis
- **E.** Pseudomembranous (Vincent's) tonsillitis
- 9. A 55-year-old man complains of a pain in the sternum, lumbar spine, and ribs. He has a history of bone fracture in his right shin. In the blood: total protein $-100 \, \text{g/L}$, M-gradient is positive. In the urine there is Bence Jones protein. Make the diagnosis:
- **A.** Multiple myeloma
- **B.** Osteochondrosis
- C. Exertional angina pectoris, 2 FC
- **D.** Glomerulonephritis
- **E.** Neuralgia
- 10. A 35-year-old man complains of rapidly incresing fatigue, palpitations, "visual snow", dizziness. He has a history of peptic ulcer of the stomach. Objectively the skin is pale. Vesicular respiration is observed in the lungs. Systolic murmur is detected over the cardiac apex, heart rate is 100/min., BP is 100/70 mm Hg. The epigastrium is slightly tender on palpation. Blood test: erythrocytes $3.2 \cdot 10^{12}/\text{L}$, Hb 100 g/L, color index 0.94. What type of anemia is it?

A. Posthemorrhagic anemia

B. Sideroblastic anemia

C. Chronic iron-deficiency anemia

D. Hemolytic anemia

E. Hypoplastic anemia

- 11. Preventive examination of a 75-year-old woman with a moderately active lifestyle shows total serum cholesterol of 5.1 mmol/L (208 mg/dL) and high-density lipoprotein levels of 70 mg/dL. Her ECG is normal. What advise about her diet should be given to this woman?
- **A.** No changes in the diet
- **B.** Reduce the cholesterol intake
- C. Reduce the intake of saturated fats
- **D.** Reduce the intake of simple carbohydrates
- **E.** Increase the fiber intake
- 12. A 66-year-old man complains of marked weakness. The onset of the disease was acute: he developed fever and pain in the joints and along the muscles of his legs. Objectively, he has a violet-cyanotic erythema around his eyes and over the knee joints. His heart rate is 120/min., heart sounds are weakened. Blood test: leukocytes $-12 \cdot 10^9/\text{L}$, ESR -40 mm/hour. Make the diagnosis.
- A. Dermatomyositis
- **B.** Systemic lupus erythematosus
- **C.** Rheumatoid arthritis
- **D.** Atopic dermatitis
- **E.** Reactive polyarthritis
- **13.** A district doctor has been tasked with preparation of a plan for a complex of treatment and prevention measures among the population in his district. What measures for secondary disease prevention should be included in this plan?
- **A.** Prevention of disease complications
- **B.** Disease prevention
- **C.** Elimination of the causes of diseases
- **D.** Improving the living conditions of the population
- **E.** Rehabilitation measures
- 14. A 7-year-old boy has been receiving treatment for a month. At the time of hospitalization, he had marked edemas, and daily urine protein of 4.2 g. Biochemical blood test shows persistent hypoproteinemia (43.2 g/L) and hypercholesterolemia (9.2 mmol/L). What leading glomerulonephritis syndrome is most likely in this patient?

- A. Nephrotic
- **B.** Nephritic
- **C.** Isolated urinary
- **D.** Hematuric
- E. Mixed
- 15. For a week a 42-year-old patient has been suffering from fever attacks which occur every 48 hours. Body temperature raises up to $40^{\circ}C$ and decreases in 3–4 hours with excessive sweating. The patient presents with loss of appetite and general fatigue. The skin is pale and sallow. The liver and spleen are enlarged and dense on palpation. What method of diagnosis verification would be most efficient?
- **A.** Microscopy of blood smear and thick blood film
- **B.** Complete blood count
- **C.** Bacteriological analysis
- **D.** Enzyme-linked immunosorbent assay
- E. Microscopy of hanging blood drop
- **16.** A 16-year-old teenager complains of weakness, dizziness, and heaviness in the left subcostal region. Objectively, the skin and visible mucosa are icteric. The tower skull syndrome is observed. The liver is +2 cm. The lower edge of the spleen is at the level of the navel. In the complete blood count: erythrocytes $-2.7 \cdot 10^{12}$ /L, Hb -88 g/L, leukocytes $-5.6 \cdot 10^{9}$ /L, ESR -15 mm/hour. What is the most likely change in the bilirubin levels in this patient?
- **A.** Increase in unconjugated bilirubin levels
- **B.** Increase in conjugated bilirubin levels
- **C.** Increase in unconjugated and conjugated bilirubin levels
- **D.** Decrease in conjugated bilirubin levels
- E. Decrease in unconjugated bilirubin levels
- 17. During examination a 4-month-old child with meningococcemia presents with acrocyanosis, cold extremities, tachypnea, and thready pulse, blood pressure of 30/0 mm Hg, anuria, and sopor. What clinical syndrome is it?
- **A.** Toxic shock syndrome
- **B.** Neurotoxicosis
- C. Exicosis
- **D.** Encephalic syndrome
- **E.** Acute renal failure
- **18.** A 31-year-old woman complains of pain and swelling in her radiocarpal and metacarpophalangeal joints and morning stiffness for up to 1.5 hours. Two weeks ago she developed pain, swelling, and redness in her knee joints and fever of 37.5°C. Examination of her internal organs

shows no pathological changes. She was diagnosed with rheumatoid arthritis. What changes will most likely be visible on the X-ray scan of her joints?

- **A.** Narrowing of the joint space, usuras (bone lesions)
- **B.** Narrowing of the joint space, subchondral osteosclerosis
- C. Cysts in the subchondral bone
- **D.** Multiple marginal osteophytes
- **E.** Osteolysis of the epiphyses
- **19.** In the demographic structure of a region, the persons aged from 0 to 14 make up 31% of the population, while the 50+ age group makes up 20% of the population. What population structure characterizes this demographic situation most accurately?
- **A.** Expansive population
- **B.** Constrictive population
- C. Stationary population
- **D.** Migration of the population
- E. Emigration of the population
- **20.** A 31-year-old woman has been suffering from systemic scleroderma for 14 years. She underwent multiple inpatient treatment courses. She complains of intermittent dull pain in the area of her heart, palpitations, shortness of breath, headache, swollen eyelids, weight loss, and painful and deformed joints in her limbs. The prognosis of her condition will be worse if which of the following organs is affected?
- **A.** Kidneys
- **B.** Heart
- C. Lungs
- **D.** Gastrointestinal tract
- **E.** Skin and joints
- **21.** A 60-year-old woman complains of pain in the interphalangeal joints of her hands that exacerbates during work. Objectively, the distal and proximal joints of her fingers II-IV are defigured, painful, have Heberden and Bouchard nodes, and their mobility is limited. X-ray of the joints shows narrowed joint spaces, marginal osteophytes, and subchondral sclerosis. Make the diagnosis:
- **A.** Osteoarthrosis deformans, nodular form
- **B.** Reiter disease (reactive arthritis)
- **C.** Bekhterev disease (ankylosing spondylitis)
- **D.** Rheumatic arthritis
- **E.** Psoriatic arthritis
- **22.** A 28-year-old man was hospitalized on

the 9th day of illness with complaints of fever of 39°C, headache, general weakness, constipation, and disturbed sleep. Objectively, on the skin of his abdomen there are isolated roseolas, his pulse is 78/min., the liver is enlarged by 2 cm. Make the diagnosis:

A. Typhoid fever

B. Epidemic typhus

C. Sepsis

D. Brucellosis

E. Leptospirosis

- 23. A 74-year-old woman complains of painful and distended abdomen and nausea. She suffers from postinfarction and atherosclerotic cardiosclerosis and ischemic heart disease. Objectively, she is in a severe condition, her abdomen is distended, the abdominal wall is barely involved in the act of breathing. Laparoscopy detects a small amount of turbid exudate in the abdominal cavity, one of the small intestine loops is dark blue. Make the diagnosis:
- **A.** Mesenteric thrombosis

B. Volvulus

C. Acute intestinal obstruction

D. Ischemic abdominal syndrome

E. Erysipelas

- **24.** During agricultural work in the field, a tractor driver received an open trauma of the hand. The tractor driver has never completed the full course of planned antitetanus immunization. What should he be given for urgent specific prevention of tetanus in this case?
- **A.** 1.0 mL of tetanus anatoxin, 3000 IU of anti-tetanus serum
- **B.** 0.5 mL of tetanus anatoxin, 3000 IU of anti-tetanus serum
- C. 1.0 mL of tetanus anatoxin, 50000 IU of anti-tetanus serum
- **D.** No prevention is necessary
- **E.** 3000 IU of anti-tetanus serum
- 25. Examination of the corpse of a man, who died by hanging, reveals that the spots of livor mortis disappear when pressed and reappear 50 seconds later. The rigor mortis is moderate and observed only in the masticatory muscles and muscles of neck and fingers. The body temperature is 31.0°C. What is the time of death in this case?

A. 6–7 hours

B. 1–2 hours

C. 16–24 hours

D. 8–10 hours

E. 10–18 hours

- 26. A man works in casting of nonferrous metals and alloys for 12 years. In the air of working area there was registered high content of heavy metals, carbon monoxide, and nitrogen. During periodic health examination the patient presents with asthenovegetative syndrome, sharp abdominal pains, constipations, pain in the hepatic area. In the laboratory analysis of urine: aminolevulinic acid and coproporphyrin are detected. In the laboratory analysis of blood: reticulocytosis, low hemoglobin level. Such intoxication is caused by:
- A. Lead and lead salts

B. Tin

C. Carbon monoxide

D. Nitric oxide

E. Zinc

- 27. A 48-year-old woman complains of disturbed menstrual cycle: her periods last for 7-9 days and are excessively profuse throughout the last half-year. She notes occasional hot flashes in her head, insomnia, irritability, and headaches. Her skin is of normal color. Blood pressure 150/90 mm Hg, pulse 90/min., rhythmic. The abdomen is soft and painless. Bimanual examination shows no uterine enlargement, the appendages cannot be detected. The vaginal fornices are free. What is the most likely diagnosis?
- A. Climacteric syndrome
- **B.** Premenstrual syndrome
- C. Adrenogenital syndrome
- **D.** Stein-Leventhal syndrome (polycystic ovary syndrome)
- **E.** Uterine myoma
- **28.** During the analysis of morbidity in the city, it was determined that the age structure of population is different in each district. What statistical method allows to exclude this factor, so that it would not skew the morbidity data?
- **A.** Standardization
- **B.** Wilcoxon signed-rank test
- **C.** Correlation-regression analysis
- **D.** Dynamic time series analysis
- **E.** Analysis of average values
- **29.** Survey X-ray of the patient's abdominal cavity shows several hemispherical areas of lucency, located above well-

defined horizontal levels. What is the cause of such an X-ray presentation?

- A. Intestinal obstruction
- **B.** Perforated ulcer
- C. Meteorism
- **D.** Cancer of the large intestine
- **E.** —
- **30.** A 23-year-old woman came to the gynecological clinic. She complains of pain, itching, and burning in her vulva, general weakness, indisposition, elevated body temperature up to $37.2^{\circ}C$, and headache. On examination in the vulva there are multiple vesicles up to 2–3 mm in diameter with clear contents against the background of hyperemia and mucosal edema. Make the provisional diagnosis:
- A. Genital herpes infection
- **B.** Primary syphilis
- C. Papillomavirus infection
- **D.** Vulvar cancer
- **E.** Cytomegalovirus infection
- **31.** A child is 8 months old. One week ago the child had a case of acute viral respiratory infection. The child's physical and mental development corresponds with the age. There are complaints of inertness, loss of appetite, unmotivated recurrent vomiting, temperature up to $38^{\circ}C$ within the last 24 hours, pallor, frequent urination with low urine output, tachycardia. Urinalysis: protein 0.099g/L, leukocytes 15–20 in the vision field, bacteriuria +++, mucus +++. What disease can be suspected?
- **A.** Acute pyelonephritis
- **B.** Dysmetabolic nephropathy
- **C.** Acute glomerulonephritis
- **D.** Phosphate diabetes
- E. Deficient care
- **32.** The people living in a radiation-contaminated area are recommended to include pectin in their diet for removal of radionuclides from the body. What products are the main source of pectin?
- A. Vegetables and fruits
- **B.** Bread
- C. Milk
- **D.** Meat
- E. Pasta
- 33. The region at the Carpathian foothills is characterized by constant high atmospheric humidity (over 80%). In the cold season, while the air temperature is moderately low, the population of this region feels extreme cold. What type of heat transfer increases in such conditions?

- A. Convection
- B. Radiation
- **C.** Evaporation
- **D.** Conduction
- E. —
- **34.** A 15-year-old patient presents with delayed physical development and periodically develops icteric skin. Objectively, the spleen is 16x12x10 cm, cholecystolithiasis is observed in the patient, there is a skin ulcer on the left calf in its lower third. In the blood: erythrocytes $3.0\cdot10^{12}$ /L, Hb 90 g/L, color index 1.0, microspherocytosis, reticulocytosis. Total serum bilirubin 56 mcmol/L, indirect bilirubin 38 mcmol/L. What treatment method would be optimal in this case?
- **A.** Splenectomy
- **B.** Spleen transplant
- **C.** Portocaval anastomosis
- **D.** Omentosplenopexy
- **E.** Omentohepatopexy
- **35.** An employee has been sick for 4 months, further treatment is necessary, the patient is unable to work. Who is authorized to provide further disability examination of this patient?
- A. Sociomedical expert committee
- **B.** Medical consultative board
- **C.** Physician in charge and the head of the department
- **D.** Chief physician of a medical facility
- **E.** Deputy chief physician responsible for disability examination
- **36.** A 48-year-old woman was delivered into the surgical unit with wounds in her thigh. On examination the wound surface has a dirty-gray coating with unpleasant sweet smell. The wound content resembles a raspberry jelly. Skin tissues around the wound are glossy and turgid. Palpation reveals moderate crepitation in the tissues. What bacteria is the most likely to cause such inflammation?
- **A.** Anaerobic clostridial
- **B.** Anaerobic non-clostridial
- C. Streptococci
- **D.** Staphylococci
- **E.** Blue pus bacillus
- **37.** A 38-year-old man complains of a spasmodic abdominal pain, frequent liquid stool with mucus and fresh blood admixtures. He has been suffering from this condition for 2 years, during which he has lost 12 kg. Objectively: Ps 92/min., blood pressure 100/70 mm Hg, body

temperature — $37.4^{\circ}C$. The abdomen is soft and painful along the large intestine. The sigmoid colon is spastic. In the blood: erythrocytes — $3.2 \cdot 10^{12}$ /L, Hb — 92 g/L, leukocytes — $10.6 \cdot 10^{9}$ /L, ESR — 32 mm/hour. Irrigoscopy shows narrowing of the large intestine, no haustra, blurred margins, "lead-pipe" sign. What is the most likely diagnosis?

- **A.** Ulcerative colitis
- **B.** Gastric carcinoma
- **C.** Diverticular disease of the intestine
- **D.** Amoebic dysentery
- E. Crohn's disease
- **38.** A 55-year-old woman complains of pain and popping sounds in her left knee joint, which occur when she climbs the stairs. Occasionally during movements her joint becomes "locked". 5 years ago she suffered a trauma of her left knee. Complete blood count and biochemical blood analysis show normal results. X-ray shows marked osteosclerosis and osteophytes. The joint space is narrowed. Make the provisional diagnosis:
- A. Osteoarthritis
- **B.** Rheumatoid arthritis
- C. Gouty arthritis
- **D.** Psoriatic arthritis
- E. Reactive arthritis
- **39.** A 45-year-old man developed constricting retrosternal pain that occurs during walks at the distance of 200 m. Objectively heart rate is 80/min., BP is 160/90 mm Hg. During cardiopulmonary exercise test at 50 W there is a depression of S-T segment by 3 mm below the isoline in V3-V4. What is the provisional diagnosis?
- **A.** Exertional angina pectoris, functional class III
- **B.** Exertional angina pectoris, functional class IV
- C. Exertional angina pectoris, functional class II
- **D.** Somatoform autonomic dysfunction, hypertension type
- E. Alcoholic myocardiodystrophy
- **40.** A multigravida on the 38th week of her pregnancy complains of increased BP up to 140/90 mm Hg, edema of the shins for 2 weeks. In the last month she gained 3.5 kg of weight. Urine analysis: protein -0.33 g/L. What is the most likely diagnosis:

A. Mild preeclampsia

- **B.** Moderate preeclampsia
- **C.** Pregnancy hypertension
- **D.** Severe preeclampsia
- **E.** Pregnancy edema
- **41.** A patient with chronic pancreatitis complains of diarrhea occurring up to 5 times per day (no blood traces), loss of body weight, abdominal distention, dryness of skin, loss of hair, thirst, bleeding gums, convulsions. Complete blood count: leukocytes $5.8 \cdot 10^9$ /L; Hb 86 g/L; ESR 15 mm/g; Blood protein test: protein 48 g/L; albumins 28 g/L. What indicators of coprological analysis would accompany this syndrome?
- **A.** Steatorrhea, creatorrhea
- **B.** Large amount of mucus, amylorrhea
- C. Large amount of starch grains and cellulose
- D. Gas bubbles, acid reaction
- **E.** Large numbers of iodinophilous microbes
- **42.** A 43-year-old woman complains of persistent abdominal pain with recurrent pain attacks, nausea, repeated vomiting with stagnant bowel content, abdominal distension, and flatulence. She has been presenting with these signs for 7 hours. Pulse is 116/min. The tongue is dry and brown. The abdomen is symmetrically distended, soft, painful. Percussion reveals tympanitis. On auscultation there are bowel sounds with a metallic overtone, sounds of splashing and dripping. Make the diagnosis:
- A. Acute intestinal obstruction
- **B.** Acute necrotizing pancreatitis
- **C.** Acute destructive cholecystitis
- **D.** Acute erosive gastritis
- E. Acute nonspecific colitis
- **43.** The left hand of a newborn is extended in all its joints, stretched along the torso, and pronated in the forearm. Active movements of the shoulder joint are retained. The hand is flattened, atrophied, cold to touch, hangs passively. Grasping and palmomental reflexes are absent at the affected side. Hemogram indicators are normal. Make the most likely diagnosis:
- **A.** Inferior distal obstetrical paralysis
- **B.** Osteomyelitis
- C. Proximal obstetrical paralysis
- **D.** Complete obstetrical paralysis
- **E.** Hypoxic-ischemic encephalopathy
- **44.** A 78-year-old man with a prostate adenoma underwent a herniotomy for a

direct inguinal hernia. After the surgery he presents with absent urination. Enlarged urinary bladder is detectable above the patient's pubis. What measures should be taken in this case?

A. Bladder catheterization

B. Apply cold to the urinary bladder area **C.** Prescribe processing of the postoperative wound with UHF field

D. Prescribe proserin (neostigmine) intramuscularly

E. Prescribe antispasmodics subcutaneously

- **45.** A 62-year-old woman was brought into the admission room with complaints of severe burning retrosternal pain and asphyxia. She has a 10-year-long history of essential hypertension. Objectively her condition is moderately severe. She presents with skin pallor, cyanotic lips, and vesicular respiration over her lungs. The II heart sound is accentuated over the aorta. Blood pressure 210/120 mm Hg, heart rate (pulse) 76/min. ECG shows elevation of ST segment in the leads I, aVL, and V5-V6. What is the most likely diagnosis?
- **A.** Hypertensive emergency complicated with acute myocardial infarction

B. Uncomplicated hypertensive urgency

C. Hypertensive emergency complicated with unstable angina pectoris

D. Hypertensive emergency complicated with acute left ventricular failure

E. Pulmonary embolism

- **46.** A 48-year-old man complains of stool 2-3 times a day, with a large amount of foul-smelling feces, which is accompanied by a pain in the umbilical region, hair loss, and paresthesias. Examination shows pale skin, low body mass, and leg edema. Palpation of the umbilical region and intestine is painful. Blood test shows anemia; stool test shows steatorrhea, creatorrhea, amylorrhea. What syndrome can be observed in the patient?
- **A.** Malabsorption syndrome
- **B.** Zollinger-Ellison syndrome
- **C.** Afferent loop syndrome
- **D.** Dumping syndrome
- **E.** Hypercatabolic exudative enteropathy syndrome
- **47.** A 38-year-old patient has been delivered by an ambulance to a surgical department with complaints of general weakness, indisposition, black stool. On examination the patient is pale, there are

dotted hemorrhages on the skin of his torso and extremities. On digital investigation there are black feces on the glove. Complete blood count: $Hb-108\ g/L$, thrombocytopenia. Anamnesis states that similar condition was observed 1 year ago. Make the diagnosis:

A. Thrombocytopenic purpura

B. Hemophilia

C. Ulcerative bleeding

D. Rectal tumor

E. Nonspecific ulcerative colitis

- **48.** A 3-year-old child presents with sharp deterioration of his general condition. He has a history of purulent otitis. His temperature is now 38.5°C. The left leg is pressed to the torso, active movements are absent, the lower third of the thigh and knee joint are thickened, hyperemic, with localized fever. Axial load leads to acute discomfort of the patient. What is the most likely diagnosis?
- **A.** Epiphyseal osteomyelitis on the left

B. Left hip fracture

C. Rheumatoid arthritis

D. Osteogenic sarcoma

E. Hygroma of the knee

- 49. A 19-year-old student was urgently hospitalized due to a marked dyspnea and chest pain on the left. Her body temperature is 38.8°C. She has been presenting with these signs for 3 days. Respiratory rate is 42/min., shallow. Percussion sound is dull to the left from the center of the scapula, no respiration can be auscultated. The left heart border is displaced outwards by 3 cm. Embryocardia and heart rate of 110/min are observed. Palpation of the right subcostal area is painful. What urgent measures should be taken in this case?
- **A.** Urgent thoracocentesis
- **B.** Prescription of penicillin antibiotics
- C. Administration of furosemide
- **D.** Administration of cardiac glycosides
- E. Referral into the thoracic surgery unit
- **50.** A 12-year-old girl after a case of respiratory infection developed dyspnea at rest, paleness of skin. Heart rate is 110/min., BP is 90/55 mm Hg. Heart sounds are muffled. Borders of relative heart dullness: right the parasternal line, upper the III rib, left 1,0 cm outwards from the midclavicular line. Make the provisional diagnosis:

- A. Infectious myocarditis
- **B.** Functional cardiopathy
- C. Somatoform autonomic dysfunction
- **D.** Hypertrophic cardiomyopathy
- E. Exudative pericarditis
- **51.** A 37-year-old woman complains of marked general weakness, edema of the face and hands, rapid fatigability when walking, difficult swallowing, disturbances of the cardiac performance. These signs appeared 11 days after a vacation at the seaside. Objectively, the patient has face erythema, "glasses" sign, edema of the lower leg muscles. Heart sounds are muffled, blood pressure is 100/70 mm Hg. In the blood: ASAT 95U, ALAT 130U, increased activity of aldolase and creatine phosphokinase. What examination will be the most informative in this case?
- **A.** Muscle biopsy
- **B.** Test for circulating immune complexes
- **C.** Electrocardiography
- **D.** Gastroduodenofibroscopy
- E. Electromyography
- **52.** 2 hours after eating unknown mushrooms, a 28-year-old man sensed a decrease in his mobility and deterioration of his ability to focus. This condition was then followed by a state of agitation and agression. On examiantion he is disoriented and his speech is illegible. 4 hours later he developed fetor hepaticus and lost his consciousness. What syndrome can be observed in this patient?
- A. Acute hepatic failure
- **B.** Hepatolienal syndrome
- C. Portal hypertension
- **D.** Cholestatic syndrome
- **E.** Cytolytic syndrome
- **53.** The body of a 24-year-old woman with probable signs of poisoning has been found on the street. Forensic medical examination was requested by an investigator during examination of the site and the body. According to the Criminal Procedure Code currently in force in Ukraine, forensic medical examination is required when it is necessary to determine the:
- **A.** Cause of death
- **B.** Manner of death
- **C.** Time of death
- **D.** Mode of death
- E. Mechanism of death
- **54.** It is the 3rd day after the normal term labor; the infant is rooming-in with the mother and is on breastfeeding.

Objectively: the mother's general condition is satisfactory. Temperature is 36.4°C, heart rate is 80/min., BP is 120/80 mm Hg. Mammary glands are soft and painless; lactation is moderate, unrestricted milk flow. The uterus is dense, the uterine fundus is located by 3 fingers width below the navel. Lochia are sanguino-serous, moderate in volume. Assess the dynamics of uterine involution:

- A. Physiological involution
- **B.** Subinvolution
- C. Lochiometra
- **D.** Pathologic involution
- E. Hematometra
- **55.** During regular examination of a 2-year-old boy, he presents with enlarged left kidney, painless on palpation. The right kidney was undetectable on palpation. Excretory urography shows no contrast on the right. Cytoscopy detected hemiatrophy of the urinary bladder trigone, the right ureteral orifice is not detected. What pathology is it?
- **A.** Agenesis of the right kidney
- **B.** Dystopia of the right kidney
- **C.** Hypoplasia of the right kidney
- **D.** Agenesis of the right ureter
- E. Ectopic right ureteral orifice
- **56.** A 38-year-old woman complains of weakness, sleepiness, pain in the joints, weight gain despite low appetite, and constipations. She presents with dry and thickened skin, puffy and amimic face, narrowed palpebral fissures, thick tongue, and deep hoarse voice. Her heart sounds are weak, pulse is 56/min. Low levels of free T4 are observed. This patient needs to take the following on a regular basis:
- **A.** Thyroxine
- **B.** Mercazolil (Thiamazole)
- **C.** Lithium carbonate
- **D.** Furosemide
- E. Calcium gluconate
- **57.** A surgery unit received a person with an incised stab wound on the upper third of the right thigh. Examination detects an incised stab wound 3.0x0.5x2.0 cm in size on the inner surface of the upper third of the right thigh. Bright-red blood flows from deep within the wound in a pulsing stream. Characterize this type of bleeding:

- A. Arterial
- **B.** Venous
- C. Parenchimatous
- **D.** Capillary
- E. Mixed
- **58.** A 22-day-old infant developed subcutaneous red nodes from 1.0 to 1.5 cm in size on the scalp; later the nodes suppurated. Temperature increased up to $37.7^{\circ}C$, intoxication symptoms appeared, regional lymph nodes enlarged. Complete blood count: anemia, leukocytosis, neutrocytosis, raised ESR. What diagnosis will you make?
- A. Pseudofurunculosis
- **B.** Pemphigus
- **C.** Vesiculopustulosis
- **D.** Scalp phlegmon
- **E.** —
- **59.** A 32-year-old woman complains of general weakness, low-grade fever persisting for 4 months, lumbar pain, and dysuria. Anamnesis includes frequent acute respiratory diseases, overexposure to cold, low-calorie diet, a case of pulmonary tuberculosis in childhood. Clinical urine analysis: pH 4.8, leukocyturia, hematuria. Complete blood count: leukocytosis, lymphocytosis, raised ESR. Urography concludes: dilatation of renal pelvis and calyceal system of both kidneys, foci of calcification in the projection of right kidney parenchyma. What is the most likely diagnosis?
- **A.** Nephrotuberculosis
- **B.** Right renal cyst
- **C.** Right renal carcinoma
- **D.** Acute glomerulonephritis
- **E.** Chronic pyelonephritis
- **60.** A 26-year-old man has an external bleeding from a lacerated wound of the shin. Dark-red blood flows from the wound in a steady stream. The total blood loss is approximately 400 mL. What method should be used to stop the blood loss during the pre-admission stage?
- **A.** Apply a tight bandage to the wound
- **B.** Press the femoral artery with your finger
- C. Apply an arterial tourniquet to the thigh
- **D.** Apply a clamp to the bleeding vessel
- **E.** Apply a tourniquet below the site of the bleeding
- **61.** A 3-year-old child has been brought to a hospital with complaints of pain in the legs, fever, and loss of appetite. Objectively: pale skin and mucosa, hemorrhagic rash. Lymph nodes are enlarged, painless,

dense and elastic, not matted together. Bones, joints, and abdomen are painful. The liver and spleen are enlarged. Hemogram: Hb -88 g/L, color index -1.3, platelets $-80 \cdot 10^9$ /L, leukocytes $-25.8 \cdot 10^9$ /L, lymphoblasts -70%, ESR -52 mm/hour. Make the provisional diagnosis:

- **A.** Acute leukemia
- **B.** Thrombocytopenic purpura
- C. Acute rheumatic fever
- D. Infectious mononucleosis
- **E.** Hemorrhagic vasculitis (Henoch-Schonlein purpura)
- **62.** A 14-year-old girl came to a general practitioner with complaints of weakness, loss of appetite, headache, rapid fatigability. Her last menstruation was profuse and lasted for 14 days after the previous delay of 2 months. Objectively, her skin is pale, heart rate is 90/min., BP is 110/70 mm Hg, Hb is 88 g/L. Rectal examination: the uterus and its appendages are without changes, no discharge from the genital tracts. What complication occurred in the patient?
- A. Posthemorrhagic anemia
- **B.** Somatoform autonomic dysfunction of hypotonic type
- **C.** Migraine
- **D.** Gastritis
- **E.** Dysmenorrhea
- **63.** A 22-year-old postparturient woman on the 12th day after the normal childbirth informs of fever up to 39°C for the last 3 days and pain in her right mammary gland. The right mammary gland is enlarged, hot to touch, tense, hyperemic, and painful. Palpation reveals there a dense infiltration 8x8 cm with a fluctuation in its center. What is the most likely diagnosis?
- **A.** Postpartum period, day 12. Right-sided infiltrative-purulent mastitis
- **B.** Postpartum period, day 12. Right-sided serous mastitis
- **C.** Postpartum period, day 12. Right-sided gangrenous mastitis
- **D.** Postpartum period, day 12. Right-sided phlegmonous mastitis
- **E.** Postpartum period, day 12. Right-sided lactostasis
- **64.** A patient has gradually lost his consciousness. The skin is pale and dry. There is smell of ammonia from the mouth. Respirations are deep and noisy. Heart sounds are muffled, pericardial friction rub is present. Blood pressure is 180/130 mm Hg.

Blood test: Hb -80 g/L, leukocytes $-12 \cdot 10^9$ /L, blood glucose -6.4 mmol/L, urea -50 mmol/L, creatinine -1200 mcmol/L, blood osmolarity -350 mOsmol/kg H₂O. No urinary excretion. Make the diagnosis:

A. Uremic coma

B. Hyperglycemic coma

C. Acute renal failure

D. Acute disturbance of cerebral circulation

E. Hyperosmolar coma

- **65.** A 58-year-old man complains of weakness, edema of the face, legs, and lumbar region, dyspnea, and wet cough. For many years he has been suffering from chronic obstructive pulmonary disease. Within the last 5 years he has been noting increased production of sputum that often is purulent. Objectively, his heart rate is 80/min., blood pressure is 120/80 mm Hg. He has pale and dry skin with poor turgor and diffuse edema. Daily proteinuria is 6.6 g/L. In the blood: hypoalbuminemia, increased levels of α_2 and γ -globulins, ESR is 50 mm/hour. Blood creatinine is 188 mcmol/L. Which is the correct diagnosis?
- **A.** Secondary renal amyloidosis, nephrotic syndrome
- **B**. Secondary renal amyloidosis, proteinuric stage
- C. Secondary renal amyloidosis, azotemic stage

D. Primary amyloidosis

E. Senile amyloidosis

- **66.** A 35-year-old man, who for the last 3 years has been on hemodialysis due to chronic glomerulonephritis, developed disturbances of the cardiac performance, hypotension, progressing weakness, and dyspnea. ECG shows bradycardia, 1st degree atrioventricular block, tall and sharp T-waves. The day before he had a serious break from his solid and liquid diet. What biochemical changes are the most likely cause of the described clinical presentation?
- A. Hyperkalemia
- **B.** Hypokalemia
- **C.** Hyperhydration
- **D.** Hypernatremia
- E. Hypocalcemia
- 67. An 18-year-old patient complains of skin rash. The patient has been suffering from this condition for 5 years. The first instance of this disease occurred after a car accident. Objectively: the patient presents with a papular rash covered in silvery scales, "thimble" sign (small pits on

the nails), affected joints. What is the most likely diagnosis?

A. Psoriasis

B. Panaritium

C. Onychomycosis

D. Lupus erythematosus

E. Rheumatism

- **68.** A 48-year-old woman developed insomnia, depressive mood, anxiety, fears and suicidal thoughts after the death of her husband that occurred one month ago. During her stay in the hospital she speaks in a low voice, is depressed, anxious, avoids sleeping, refuses to eat. What medications should be prescribed in this case?
- **A.** Antidepressants
- **B.** Antipsychotics
- **C.** Group B vitamins
- **D.** Nootropics
- **E.** Anticonvulsants
- **69.** On ultrasound of the thyroid gland, a 47-year-old woman presents with a hypoechoic node 1.6 cm in diameter with blurred margins and intranodular hypervascularization. The doctor suspects thyroid carcinoma. What method should be used to verify the diagnosis?
- **A.** Fine-needle aspiration biopsy

B. Thyroid scintigraphy

C. Case monitoring

D. Determine TSH level in the blood

E. Positron emission tomography (PET)

70. A 19-year-old young man complains of cough with expectoration of purulent sputum in amount of 100 mL per day, hemoptysis, dyspnea, increased body temperature up to $37.8^{\circ}C$, general weakness, weight loss. The patient's condition lasts for 4 years. Exacerbations occur 2–3 times a year. The patient presents with malnutrition, pale skin, cyanosis of the lips, drumstick (clubbed) fingers. Tympanic percussion sound in the lungs, weakened respiration, and various numerous moist crackles in the lower pulmonary segments on the left can be observed in this patient. Complete blood count: erythrocytes $-3.2 \cdot 10^{12}/L$, leukocytes $-8.4 \cdot 10^{9}/L$, ESR - 56 mm/hour. On X-ray: lung fieldsare emphysematous, the left pulmonary root is deformed and dilated. What is the most likely diagnosis?

- A. Multiple bronchiectasis of the left lung
- **B.** Chronic left-sided pneumonia
- **C.** Chronic abscess of the left lung
- **D.** Left-sided pulmonary cystic dysplasia
- **E.** Suppuration of the cyst in the left lung
- 71. A 34-year-old man undergoes treatment in a psychiatry unit for exacerbation of his schizophrenia. Objectively, he stays in bed, his movements are inhibited, no contact. The patient does not respond to the questions. The position remains unchanged, the patient is hypomimic, such signs as puckering of the lips, waxy flexibility, "psychological pillow" are present. The patient has been remaining in this condition for a week. He is being fed parenterally. What psychomotor disorder is it?
- **A.** Catatonic stupor
- **B.** Depressive stupor
- **C.** Psychogenic stupor
- **D.** Anergic stupor
- **E.** Exogenous stupor
- 72. A 28-year-old man, a teacher, after an emotional stress developed painful muscle spasms in his right hand that occur during writing; now he has to hold the pen between the second and third fingers. He has no problems with typing or writing on the blackboard; no other motor disturbances or neurological pathologies are detected. What is the most likely diagnosis?
- **A.** Writer's cramp
- **B.** Cortical agraphia
- **C.** Parkinsonism
- **D.** Neuropathy of the right ulnar nerve
- E. Neuropathy of the right radial nerve
- 73. A 45-year-old man underwent a cardiac surgery one week ago. His general state has been deteriorating since then: dyspnea at rest, retrosternal pain that irradiates to the neck, marked weakness. Objectively his body temperature is hectic. His cardiac borders are expanded, apical beat is weakened. Auscultation detects pericardial friction rub. What is the most likely diagnosis?
- **A.** Acute pericarditis
- **B.** Acute cardiac aneurysm
- C. Myocardial infarction
- **D.** Acute myogenic dilatation of the heart
- **E.** Pulmonary embolism
- **74.** A 73-year-old woman came to the family physician for one of her regular follow-up examinations. Three months ago she was found to have type 2 diabetes mellitus.

She was keeping to her diet and exercise plan and taking phytopreparations. On examination her fasting glucose was within the range of 7.8–8.6 mmol/L, HbA1c – 7.9%. Height – 164 cm, weight – 83 kg. What blood glucose-controlling medicine should she be prescribed first in the course of her pharmacological therapy?

- A. Metformin
- **B.** Glibenclamide
- C. Glimepiride
- **D.** Gliclazide
- E. Insulin
- 75. A 17-year-old girl has height of 172 cm and weight of 40 kg. Nevertheless, she considers herself to be extremely overweight. For the last 2 years she has been keeping to a strict low-calorie diet, while simultaneously working out to exhaustion and tightly binding her waist with a cord. She often self-induces vomiting. The girl complains of unpleasant sensations in her esophagus and amenorrhea. What is the most likely diagnosis?
- **A.** Anorexia
- **B.** Depression
- **C.** Response to stress
- **D.** Personality disorder
- **E.** Bulimia
- **76.** A 27-year-old man complains of pain in his leg joints, purulent discharge from the eyes, and painful burning sensations during urination. The disease onset was acute. He has a history of influenza. The patient smokes and drinks alcohol in excess. In his line of work he is often away on business trips. What is the most likely etiological factor of this disease?
- **A.** Chlamydia
- **B.** Adenovirus
- C. Streptococci
- **D.** Staphylococci
- E. Candida
- 77. A 22-year-old woman with primary infertility complains of irregular menstruations and of colostrum being produced from her mammary glands. Ultrasound of the lesser pelvis shows hypoplastic uterus and ovaries without pecularities. MRI of the sella turcica detects no abnormalities. The patient's prolactin is 3 times higher the normal level. The follicle-stimulating and luteinizing hormones are below the normal levels. The levels of cortisol and testosterone are within the normal range. What medicines should be chosen for the treatment of this pathology?

- A. Dopamine agonists
- **B.** Glucocorticoids
- C. Progestagens
- **D.** Estrogens
- **E.** Combined oral contraceptives
- 78. A 26-year-old woman, pregnancy I, 10 weeks of gestation, has been suffering from rheumatism since her childhood. With pregnancy her condition has deteriorated: her dyspnea increased and she developed edema in her lower extremities. Her pulse is 86/min., the lips are cyanotic, there are systolic and diastolic murmurs over the cardiac apex. The liver protrudes 4 cm from under the costal margin. The woman was diagnosed with III degree heart failure, her left ventricular ejection fraction is less than 40%. What are the tactics of the patient management in this case?
- **A.** Termination of the pregnancy with vacuum aspirator
- **B.** Termination of the pregnancy via minor cesarean section
- **C.** Medication-induced termination of the pregnancy
- **D.** Prolongation of the pregnancy with periodical treatment in the cardiology department
- E. Prolongation of the pregnancy with periodical hospitalization into the obstetrical inpatient department during the critical periods
- **79.** A 29-year-old woman complains of no menstruations within a year. She has a history of two abortions. Objectively, her secondary sexual characters are developed normally, she has adult woman pattern of hair distribution, galactorrhea from the mammary glands is observed. Her prolactin levels are high. What additional examination is necessary for diagnosis verification?
- **A.** Magnetic resonance imaging of the brain
- **B.** Mammography
- **C.** Breast ultrasound
- **D.** Dynamic testing of prolactin levels
- **E.** Genetic testing
- **80.** A 25-year-old man suffers from a disease that manifests with fever and vesicular rash that appears mostly on the trunk and scalp. On the 10th day after the onset of the disease, he developed an intense headache, vomiting, ataxia, sluggishness, discoordination of movements, limb tremor. He was diagnosed with encephalitis. This condition is the complication of the following disease:

- **A.** Chickenpox
- **B.** Measles
- **C.** Scarlet fever
- **D.** Vesicular rickettsiosis
- E. Rubella
- **81.** An ambulance was called to a 45-year-old man. According to his family, the onset of the disease was sudden, after he returned from a ski resort. His body temperature increased up to 38.7°C, he developed headache and vomiting. Objectively, his skin is pale with a cyanotic tint, there is a thick hemorrhagic rash all over the body, sometimes with necrosis in the center. Blood pressure is 45/0 mm Hg, pulse is 126/min., low volume. The patient has marked nuchal rigidity and positive Kernig's sign. Make the provisional diagnosis:
- A. Meningococcal infection
- **B.** Poliomyelitis
- C. Influenza
- **D.** Typhus
- **E.** Vesicular rickettsiosis
- **82.** The overall condition of a 24-year-old man, who was being treated for meningococcemia, took a turn for the worse. Objectively, he has acrocyanosis, anuria, his limbs are cold, his respiration is 30/min., heart rate is 140/min., blood pressure is 40/0 mm Hg. What emergency medical condition did the patient develop?
- **A.** Septic shock
- **B.** Hypovolemic shock
- C. Anaphylactic shock
- **D.** Pulmonary artery thrombosis
- **E.** Hemolytic-uremic syndrome
- **83.** A 26-year-old man complains of chills, rhinitis, dry cough, and fever up to 38°C. Examination shows him to be in a moderately severe condition; there are small pale pink non-merging spots on the skin of his back, abdomen, and extremities. Palpation reveals enlarged occipital and axillary lymph nodes. No information about vaccination history could be obtained. What is the likely etiology of this disease?
- **A.** Rubella virus
- **B.** Epstein-Barr virus
- **C.** Streptococcus
- **D.** Mumps virus
- **E.** Meningococcus
- **84.** A 19-year-old young man was diving and hit his head on the bottom of the pool. He complains of pain in the neck, his head movements are limited and painful.

During examination his head is bowed forward and to the right and the patient supports it with his hands. Palpation detects tense neck muscles and protruding spinous process of the IV cervical vertebra (C4). When pressure is applied to this process and to the head (axial load), the pain intensifies. Make the provisional diagnosis:

- **A.** Uncomplicated cervical spine fracture
- **B.** Cervical spine contusion
- C. Complicated spine cervical fracture
- **D.** Neck muscle injury
- **E.** Spinal root injury
- **85.** A 51-year-old man was hit by a car. He complains of a pain in his pelvis on the left. Examination shows no disturbances of pelvic configuration, there is a swelling in the left inguinal region. Palpation of this region is sharply painful. The Larrey's sign and Gabai's sign are positive, the patient is unable to lift the extended leg, as if the heel was glued down. Make the provisional diagnosis:
- **A.** Fracture of the superior pubic ramus
- **B.** Fracture of the ischium
- **C.** Superior iliac spine fracture
- **D.** Fractures of the base of the cotyloid cavity
- **E.** Pubic symphysis fracture
- **86.** A 46-year-old man, suffering from a constricting pain in the cardiac area, developed circulatory and respiratory arrest. ECG monitor shows a large-wave ventricular fibrillation. What should be done first in this case?
- **A.** Perform defibrillation
- **B.** Implant an electronic pacemaker
- **C.** Give dopamine intravenously
- **D.** Give lidocaine intravenously
- **E.** Give atropine intravenously
- 87. A pregnant woman at 34 weeks of gestation underwent dopplerometry of umbilical circulation, which revealed a reverse diastolic component. Objectively, the height of the uterus is 27 cm above the pubic bone, the head of the fetus is mobile and located above the entrance to the lesser pelvis. Fetal heartbeat is 136/min. Vaginal examination shows that the uterine cervix is closed, its length is 3 cm. What tactics should the obstetrician choose?

A. Urgent cesarean section

B. Repeated dopplerometry next day

C. Fetal biophysical profile

- **D.** Ultrasound photometry of the fetus
- **E.** Labor induction with oxytocin
- **88.** A 65-year-old woman for 5 weeks has been presenting with a progressing painless jaundice, skin itch, weight loss of 10 kg, and acholia. Palpation detects positive Courvoisier's sign. Make the provisional diagnosis:
- **A.** Pancreatic cancer
- **B.** Viral hepatitis
- C. Liver cancer
- **D.** Gallbladder cancer
- E. Malaria
- **89.** During a regular examination, an 8-year-old girl with type I diabetes mellitus presents with a swelling on the anterior surface of her hip. The swelling is 3 cm in diameter, dense, painless on palpation. The skin over this formation has normal color and temperature. Localization of the swelling matches the place where the girl usually receives her insulin injections. What is the most likely cause of this clinical presentation?
- **A.** Development of hypertrophic lipodystrophy
- **B.** Development of atrophic lipodystrophy
- **C.** Formation of a post-injection abscess
- **D.** Formation of a post-injection infiltration **E.** Allergic response
- **90.** A 15-year-old boy complains of periodical headaches and fatigability. On examination, the boy is active, his psychoemotional development corresponds with his age, his skin is pale and clammy. No abnormalities of the internal organs were detected. Blood pressure is 120/80 mm Hg. Noticeable is the excessive subcutaneous fat that is evenly distributed throughout the body. The doctor suspects obesity in the child. What parameter should be measured first to confirm this diagnosis?
- **A.** Body mass index
- **B.** Body mass
- **C.** Body mass to height ratio
- **D.** Thickness of subcutaneous fat
- **E.** Obesity of family members
- **91.** A 47-year-old woman, who 2 days ago returned from Peru, complains of a pain and enlargement of the lymph nodes in her right inguinal region. She was diagnosed with bubonic plague. What medicine should be prescribed to the contact

persons for urgent prevention of this disease?

- A. Doxycycline
- B. Human immunoglobulin
- C. Fluconazole
- D. Chloroquine
- **E.** Heterologous serum
- **92.** A 15-year-old boy complains of pain attacks in his abdomen during defecation, diarrhea up to 6 times in 24 hours with pus and dark blood in the feces. Objectively, his physical and sexual development is delayed. The skin is pale and dry. The abdomen is distended and painful in the umbilical region and in the right iliac region. Crohn's disease is suspected. What examination is necessary to confirm the diagnosis?
- A. Colonoscopy
- **B.** Fibroesophagogastroduodenoscopy
- C. Abdominal ultrasound
- **D.** Rectoromanoscopy
- E. Fecal cytology
- **93.** For 2 weeks a 37-year-old HIV-positive man has been presenting with progressing dyspnea and body temperature up to 37.7°C. He was diagnosed with pneumocystic pneumonia. What etiotropic drug is indicated in this case?
- **A.** Co-trimoxazole
- **B.** Fluconazole
- **C.** Acyclovir
- **D.** Ceftriaxone
- **E.** Metronidazole
- **94.** A pregnant woman at 32 weeks of gestation with the risk of preterm labor undergoes a treatment to prevent fetal respiratory distress syndrome. What medicine was she prescribed?
- **A.** Dexamethasone
- **B.** Gynipral (hexoprenaline)
- **C.** Progesterone
- **D.** Oxytocin
- **E.** Misoprostol
- **95.** A family doctor performed an external obsterical examination of a pregnant woman and determined that her uterine fundus is located at the level of the navel. What is the most likely term of pregnancy in this woman?
- **A.** 24 weeks
- B. 8 weeks
- **C.** 16 weeks
- **D.** 32 weeks
- E. 40 weeks

96. A 28-year-old pregnant woman was hospitalized into the inpatient department. Her diagnosis is as follows: pregnancy III, 7–8 weeks of gestation; rheumatism, inactive phase, III degree mitral stenosis. What is the management plan for this patient?

A. Medically-indicated termination of the

pregnancy

- **B.** Termination of the pregnancy after surgical treatment of the valvular defect (mitral commissurotomy)
- **C.** Prescription of corticosteroids and immunosuppressants
- **D.** Maintenance of the pregnancy, planned hospitalization during the critical periods, conservative therapy
- **E.** Maintenance of the pregnancy, surgical treatment of the valvular defect (mitral commissurotomy)
- 97. Examination detected vesicles with seropurulent content on the neck, back of the head, and buttocks of an infant on the 4th day of life. The patient's condition is satisfactory, the child is active, all newborn reflexes can be fully induced, the umbilical cord is at the stage of mummification, the umbilical area is without any peculiarities. What disease can be suspected?
- **A.** Vesiculopustulosis
- **B.** Neonatal pemphigus
- **C.** Miliaria
- **D.** Phlegmon
- E. Epidermolysis bullosa
- **98.** A 3-year-old child was brought to the hospital by the mother with complaints of leg edema, dyspnea, cough, and abdominal pain. Heart murmurs were detected in the child at the early age, but back then the parents declined further examination. After a case of acute viral respiratory infection one month ago, the mother noticed that the child had become inert and periodically fussy and started developing edema of the shins. The child's condition is severe. Respirations are 40/min. Foot and shin edema is observed. There are wet crackles in the lower posterior segments of the lungs. The left border of the relative cardiac dullness is located along the left anterior axillary line. Heart sounds are muffled and arrhythmic. The child's heart rate is 120/min. The liver is +5 cm. Diuresis is decreased. Name the pathogenesis of the edema in this child:

- A. Reduced cardiac ejection fraction and venous congestion
- **B.** Reduced protein synthesis function of the liver
- **C.** Disturbed renal hemodynamics
- **D.** Increased vascular permeability
- **E.** Protein loss in stool
- 99. The patient complains of inflammatory infiltration in the middle third of the left forearm. It is the first occurrence of this condition in the patient. In the middle third of the left forearm there is an inflammatory infiltration up to 3 cm in diameter that protrudes in a conelike shape above the surface of the skin. The skin over the infiltration is hyperemic, edematous, its palpation is sharply painful. On the infiltration apex there is a small accumulation of pus with a black dot in the center. Body temperature is 37.6°C. What disease is described?
- **A.** Furuncle on the forearm
- **B.** Carbuncle on the forearm
- **C.** Phlegmon of the forearm
- **D.** Inflammatory infiltration of the forearm
- **E.** Erysipelas of the forearm
- **100.** The dispatching department of the Center for Emergency Medical Care and Disaster Medicine received a call from a local citizen, who complained of retrosternal constricting pains irradiating to the left hand. The taking of nitroglycerine brings no relief. Specify the terms within which an emergency medical team should arrive in this case:
- A. 10 minutes after the call was made
- **B.** 20 minutes after the call was made
- **C.** 15 minutes after the call was made
- **D.** 60 minutes after the call was made
- **E.** 30 minutes after the call was made
- **101.** A 55-year-old woman came to a doctor with complaints of a heavy sensation in her left shin and periodical cramps of the gastrocnemius muscles that occur at night. She has been suffering from this condition for 5 years, since the moment when these signs first appeared. Her condition has been remaining untreated all this time. Objectively, on the medial surface of the left shin and thigh there are dense subcutaneous varicose veins that are painless on palpation. Make the diagnosis:

A. Subcutaneous varicose veins in the left

- **B.** Acute thrombosis of the deep veins in the left leg
- **C.** Acute ascending thrombophlebitis of the subcutaneous veins in the left leg
- **D.** Post-thrombotic syndrome in the left leg **E.** Arteriosclerosis obliterans of the vessels in the left leg
- **102.** A 10-year-old child, living in a large industrial city, presents with encephalopathy, polyneuritis, disturbed mental development, and reduced learning ability. In the blood: reticulocytosis, basophilic stippling of the erythrocytes. What poisoning can be suspected?
- A. Lead
- **B.** Mercury
- C. Zinc
- **D.** Iron
- **E.** Copper
- 103. Amortization costs for CT scan are included into its' price and annually amount to 10% of its original cost. When can the CT scan be replaced?
- **A.** In 10 years
- **B.** In 5 years
- C. In 7 years
- **D.** In 15 years
- E. In 20 years
- **104.** On the 3rd day after the artificial abortion the woman was hospitalized into the gynecological department in a severe condition with signs of intoxication, abdominal pain, and purulent discharge from the vagina. Objectively, the patient's condition is severe, her body temperature is 38.8°C, pulse is 100/min., blood pressure is 110/70 mm Hg, the uterus is soft, the uterine fundus is located at the level of the navel, there are positive signs of peritoneal irritation. What is the most likely diagnosis?
- **A.** Pelviperitonitis
- **B.** Acute metroendometritis
- **C.** Uterine perforation
- **D.** Acute suppurative salpingo-oophoritis
- **E.** Ectopic pregnancy
- **105.** A 55-year-old woman complains of a tumor-like formation that can be palpated in the kidney area on the left, moderate dull pain in her left side, periodical discharge of bright-red blood during urination. Objectively, the patient has lost weight, her skin is pale and dry. Palpation of the abdomen detects an elastic formation in the left renal region. The formation

is mobile and painless. Urinalysis detects macrohematuria and atypical cells. Blood Hb is 82 g/L, ESR is 70 mm/hour. What is the most likely pathology, causing this clinical presentation?

A. Tumor of the left kidney

B. Chronic pancreatitis

C. Acute pyelonephritis

D. Tumor of the large intestine

E. Tumor of the left ureter

106. The patient's respirations are 28/min., tachycardia is up to 100/min., there are signs of intoxication. In the area of the right scapula the percussion sound is dull, the respiration is bronchial, with single fine vesicular crackles and crepitation sounds. X-ray shows a massive inflammatory infi-Itration in the middle pulmonary field. Three days later, against the background of treatment, the patient developed a cough attack, during which he expectorated 200 mL of purulent sputum. After that his body temperature dropped to subfebrile values and his overall condition improved. At the level of the scapular angle, against the background of the pulmonary infiltration, there is a round area of radiolucency with the horizontal level of liquid. Make the diagnosis:

A. Pulmonary abscess

B. Right-sided bronchitis

C. Pleural empyema

D. Multiple bronchiectasis

E. Gangrene of the right lung

107. A 10-year-old boy came to the polyclinic with complaints of stuffy nose. It is known that these signs occur in the child periodically (in spring and autumn). He has a history of atopic dermatitis. The father of the child has bronchial asthma. Objectively, the boy's face is pale and slightly swollen. Respirations are 22/min. Auscultation detects vesicular respiration over the lungs. Rhinoscopy shows swollen and pale nasal mucosa. What disease can be suspected?

A. Allergic rhinitis

B. Recurrent respiratory disease

C. Acute rhinitis

D. Acute maxillary sinusitis

E. Acute adenoiditis

108. A premature newborn from the first pregnancy was born at 37 weeks of gestation, with the weight of 2400 g and the length of 51 cm. The infant is anxious, has limb tremor, does not suckle, exhibits respiratory disturbances and

hepatosplenomegaly. At the end of the first day of life the child developed icteric skin and mucosa. On the second day, skin rashes appeared: both separate vesicles and clusters of vesicles located over the ribcage. Make the provisional diagnosis:

A. Congenital herpes infection

B. Neonatal pemphigus

C. Rubella

D. Vesiculopustulosis

E. Toxoplasmosis

109. A 32-year-old woman during an occupational medical examination underwent a colposcopy that revealed a punctuation area in zone 1 of the uterine cervix. Cytologically there was dysplasia of the 3rd degree detected. After additional examination, the patient was diagnosed with *Ca in situ* of the uterine cervix. What treatment method should be chosen in this case?

A. Cervical conization

B. Uterine extirpation without appendages

C. Uterine extirpation with appendages

D. Wertheim operation

E. Radiation therapy

110. A 9-year-old boy fell off a tree and hit the back of his head. A brief loss of consciousness was observed. The child's condition is satisfactory, he has a headache and vertigo. Skull X-ray scans show a depressed fracture of the occipital bone in the area of the external occipital protuberance. What treatment tactics is indicated for this patient?

A. Surgical intervention

B. Anti-inflammatory therapy

C. Hemostatic therapy

D. Lumbar puncture to relieve the pressure

E. Complex conservative treatment

111. A 45-year-old man came to the hematologist with complaints of general weakness, elevated body temperature, excessive sweating, enlarged cervical lymph nodes. Objectively, his body temperature is $37.5^{\circ}C$, the skin is pale and dry, the posterior cervical lymph nodes are dense and elastic, up to 2 cm in diameter, mobile. Hepatosplenomegaly was detected. What examination is necessary to determine the scope of the pathologic process?

- **A.** Computed tomography
- **B.** Abdominal X-ray
- **C.** Ultrasound of the cervical lymph nodes
- **D.** Complete blood count
- **E.** Bone scintigraphy
- **112.** A 5-day-old girl from the first pregnancy was born with the weight of 3100 g and the length of 51 cm. Her Apgar score was 8/9. On the 3rd day she developed icteric skin. On the 4th day of life her condition is satisfactory, she suckles well, her voice is loud. The umbilical wound is clean. In the lungs there is a puerile respiration, heart sounds are sonorous. The abdomen is soft, the liver is +1 cm, the spleen is "-". The feces are yellow. The blood group of the mother is A (II) Rh+. The blood group of the child is 0 (I) Rh+. Bilirubin levels on the 4th day are as follows: indirect -140 mcmol/L, direct - 0, ALT - 25 mmol/L, AST - 18mmol/L. Make the diagnosis:
- A. Physiological jaundice
- **B.** Hemolytic disease of the newborn
- C. Hemolytic anemia
- **D.** Congenital hepatitis
- E. Biliary atresia
- **113.** A 20-year-old woman complains of headaches, vertigo, tearfulness, vomiting, pain in the area of the heart, and tachycardia. The signs appear 6–7 days before menstruation and disappear in the first days of menstruation. Make the diagnosis:
- **A.** Premenstrual syndrome
- **B.** Algomenorrhea
- **C.** Metabolic craniopathy
- **D.** Diencephalic syndrome
- **E.** Stein-Leventhal syndrome
- **114.** On the 5th day after giving birth a postparturient woman complains of a pain in her left mammary gland and body temperature up to $38.1^{\circ}C$. Examination shows that her mammary gland is enlarged and painful on palpation, the nipple is edematous and has fissures, the upper external quadrant of the gland is hyperemic. Name the measures that would have prevented the development of this complication in the patient:
- **A.** Feeding on demand, expression of breast milk, prevention of nipple fissures
- **B.** Feeding on schedule
- **C.** Constant expression of breast milk
- **D.** Feeding no longer that 10 minutes through an overlay
- **E.** Stop breastfeeding when fissures appear

115. A 2.5-year-old child is ill for the second day. The onset of the disease was associated with the temperature up to $37.8^{\circ}C$, a single bout of vomiting, and watery diarrhea up to 5 times per day. During the second day, vomiting occurred twice, body temperature is $38.0^{\circ}C$, the child has low appetite, watery diarrhea continues. The treatment of the child should start with the following:

- **A.** Prescribe oral rehydration
- **B.** Prescribe nifuroxazide
- C. Prescribe ceftriaxone
- **D.** Prescribe polymyxin
- **E.** Prescribe loperamide
- 116. A 17-year-old girl has been suffering from hepatic cirrhosis for 3 years. Lately her periods of excitation have been intermittent with depression, she does not sleep enough. Objectively, her condition is severe, the girl is sluggish, gives one-word responses, has tremor in her extremities, her skin is icteric, with single hemorrhagic rashes. Name the likely complication of her disease:
- **A.** Hepatic encephalopathy
- **B.** Kidney failure
- C. Bipolar affective disorder
- **D.** Sepsis
- E. Reye syndrome
- 117. A 40-year-old patient presents with cough in the morning with production of mucopurulent sputum and elevated body temperature up to $37.6^{\circ}C$. He has been smoking since he was 17 years old. Objectively, auscultation detects coarse respirations and diffuse dry crackles in the lungs. Complete blood count: leukocytes $-12 \cdot 10^{9}$ /L, ESR -19 mm/hour. Bronchoscopy shows purulent catarrhal endobronchitis. Make the diagnosis:
- **A.** Chronic bronchitis
- **B.** Community-acquired pneumonia
- C. Bronchial asthma
- **D.** Pulmonary tuberculosis
- E. Lung cancer
- 118. A 19-year-old girl complains of moderate itching and hair loss on her head. Objectively, on the skin of her occipital region there is a single round erythematous focus 3 cm in diameter with clear margins. Asbestos-like scales can be observed on the surface of the lesion. The hair in the focus of the lesion is broken off at the length of 6–8 mm. What is the most likely diagnosis?

- A. Microsporia
- **B.** Trichophytosis
- C. Psoriasis
- D. Seborrhea
- E. Scabies
- 119. A 43-year-old man complains of facial edema, dyspnea, and difficult swallowing that appeared 3 hours after he was stung by an insect. Objectively, the skin of his eyelids, cheeks, and lips is acutely hyperemic and edematous. What medicines should he be prescribed for emergency aid?
- A. Glucocorticosteroids
- **B.** Antihistamines
- **C.** Muscle relaxants
- **D.** Nonsteroidal anti-inflammatory drugs
- E. Diuretics
- **120.** A 68-year-old woman with congestive heart failure and left ventricular ejection fraction of <40% receives the following pharmacotherapy scheme: ramipril, torasemide, bisoprolol, clopidogrel, and digoxin. During one of her regular examinations, frequent polymorphic ventricular extrasystoles were detected in the patient. What medicine should be removed from her therapy scheme?
- A. Digoxin
- **B.** Torasemide
- **C.** Ramipril
- **D.** Clopidogrel
- E. Bisoprolol
- 121. A 23-year-old woman with type 1 diabetes mellitus during the 2nd week of community-acquired pneumonia developed nausea and vomiting. In the evening she has lost her consciousness and was hospitalized. Objectively, the patient's skin is pale and dry. Her respiration is loud, the tongue is dry, with brown deposit. Her heart rate is 129/min., blood pressure is 85/50 mm Hg. Palpation of the patient's abdomen provokes no response. The liver is +3 cm. Acetone test is markedly positive, blood glucose is 26 mmol/L. Make the provisional diagnosis:
- **A.** Ketoacidotic coma
- B. Hepatic coma
- C. Lactacidemic coma
- **D.** Hyperosmolar coma
- **E.** Infectious toxic shock
- **122.** A 60-year-old man complains of dyspnea, paresthesia, vertigo, and fatigability. He has a history of atrophic gastritis. Objectively, his skin and mucosa are pale and icteric. Lingual papillae are smoothed out. The liver and pancreas are

not enlarged. Complete blood count shows the following: Hb - 77 g/L, erythrocytes - 1,65 \cdot 10⁹/L, color index - 1.4, reticulocytes - 0.2%, leucocytes - 2.8 \cdot 10⁹/L; ESR - 22 mm/hour, macrocyte. What additional test can reveal the cause of anemia?

- **A.** Vitamin B_{12} levels
- **B.** Iron levels
- **C.** Copper levels
- **D.** Vitamin D levels
- **E.** Calcium levels
- **123.** A 17-year-old girl complains of a pain in her knee and ankle joints and body temperature up to 39°C. 2 weeks ago she had a case of acute tonsillitis. Objectively, her joints are swollen, sharply painful, and their mobility is reduced. On the skin of her trunk and limbs there are barely visible circle-shaped pale pink spots. Heart rate is 95/min., blood pressure is 90/60 mm Hg, heart sounds are weakened, there is a soft systolic noise over the apex. Make the provisional diagnosis:
- **A.** Acute rheumatic fever
- **B.** Reactive arthritis
- C. Rheumatoid arthritis
- **D.** Erythema nodosum
- E. Systemic scleroderma
- **124.** A 30-year-old woman complains of itching skin, predominantly in the evening and at night. The condition lasts for 2 weeks already. On the skin of the interdigital folds, mammary glands, abdomen, buttocks, and thighs there are numerous fine papular and papulovesicular rashes located in pairs, excoriations. There is no rash on the face and neck. Similar rash is observed in the husband of the patient. What is the most likely diagnosis?
- A. Scabies
- **B.** Neurodermatitis
- C. Eczema
- **D.** Herpes
- **E.** Epidermophytosis
- **125.** What should be prescribed as secondary prevention drugs for a patient with atrial fibrillation after an ischemic stroke caused by cardiac embolism?
- **A.** Oral anticoagulants
- **B.** β -blockers
- **C.** Aspirin or clopidogrel
- **D.** Calcium antagonists
- **E.** Nootropics
- **126.** After the pregnant woman's waters broke, it was noted that they are signi-

ficantly contaminated with meconium. Upon birth, the baby is not breathing, remains inert, the skin is cyanotic and covered in meconium, heart rate is 98/min. What resuscitation measures should be taken after the baby is born?

- **A.** Direct laryngoscopy, intubation, sanation of the trachea
- **B.** Sanation of the upper respiratory tracts with a rubber balloon
- C. Tactile stimulation of the newborn
- **D.** Give adrenaline intravenously
- **E.** Artificial pulmonary ventilation with a mask and Ambu bag
- 127. A 58-year-old woman has type 2 diabetes mellitus that is compensated with diet and metformin. She prepares for cholecystectomy. Objectively, her height is 164 cm, weight is 90 kg, heart rate is 72/min., blood pressure is 130/80 mm Hg. Her abdomen is soft, painful in the right subcostal region. The liver is not enlarged. Fasting glucose 6.2 mmol/L. Glycated hemoglobin 6.5%. What further tactics of sugar-lowering therapy should be chosen in this case?
- **A.** Prescription of a short-acting insulin
- **B.** Prescription of an insulin mixture
- **C.** Prescription of a long-acting insulin
- **D.** Continue the present scheme of therapy
- **E.** Prescription of glurenorm (gliquidone)
- **128.** A 60-year-old man complains of mild disturbances of memory, coordination, gait. Cerebral atherosclerosis was confirmed. Blood pressure is within the norm. Magnetic resonance imaging shows leukoaraiosis in the periventricular area. What is the most likley diagnosis?
- **A.** Hypoxic-ischemic encephalopathy
- **B.** Binswanger's disease (subcortical arteriosclerotic encephalopathy)
- C. Lacunar cerebral stroke
- **D.** Alzheimer's disease
- E. Transient ischemic attacks
- **129.** During examination of a patient, the doctor detected in him disorders of the eyes (hemeralopia, Bitot's spots), skin and skin appendages, mucosa, and gastrointestinal tract. He was provisionally diagnosed with Prasad's syndrome. What causes the development of this pathology?
- **A.** Zinc deficiency
- **B.** Vanadium deficiency
- **C.** Iron deficiency
- **D.** Manganese deficiency
- **E.** Copper deficiency

130. After playing with "mosaics", a 2-year-old child suddenly developed cough, stridorous respirations, urges to vomit, and cyanosis against the background of relative somatic health. What should the doctor suspect first when examining this child?

- **A.** Foreign body aspiration
- **B.** Acute laryngotracheitis
- C. Pertussis
- **D.** Pneumonia
- **E.** Acute obstructive bronchitis
- **131.** A 45-year-old woman complains of increasing body weight throughout the last year. Examination revealed moon face syndrome, brittle hair, hirsutism, stretch marks on the abdomen, and disproportionally thin limbs. The patient's height is 162 cm, her body weight is 94 kg, her body mass index is 35.8 kg/m². What type of obesity is it?
- **A.** Dysplastic
- **B.** Android
- **C.** Gynoid
- **D.** Alimentary-constitutive
- E. Cerebral
- **132.** A 45-year-old woman was hospitalized with complaints of periodical severe headaches against the background of elevated blood pressure up to 180/90 mm Hg, muscle weakness, and frequent urination (at night as well). Her anamnesis states that despite combining various antihypertensive drugs and adjusting their dosage her arterial hypertension cannot be corrected with drugs. The patient's blood serum potassium levels are 2.0 mmol/L, blood serum sodium levels are 160.0 mmol/L. Ultrasound imaging detects three-dimensional formations approximately 1.0 cm in diameter in the both adrenal glands. Selective endovascular blood sampling from the suprarenal veins was performed, which revealed significant increase of cortisol and aldosterone levels. Make the diagnosis:
- A. Aldosteroma
- **B.** Androsteroma
- **C.** Pheochromocytoma
- **D.** Cushing's disease
- E. Cushing's syndrome
- 133. A 55-year-old woman complains of thyroid gland enlargement that can be observed throughouth the last 2 years and a discomfort during swallowing. Objectively, she has signs of hypothyroidism. The thyroid gland on palpation is dense, nonfused with the surrounding tissues and

mobile on swallowing. The regional lymph nodes are not enlarged. In the serum there are antithyroid antibodies detected. What is the most likely diagnosis?

- **A.** Hashimoto's thyroiditis
- **B.** Thyroid cancer
- C. Acute thyroiditis
- **D.** Endemic goiter
- **E.** Midline cervical cyst
- **134.** A 35-year-old woman had acute onset of the disease that started with fever up to 39.0°C and cough. 3 days later her dyspnea at rest increased up to 35/min. Downward from her right shoulder-blade angle, percussion detects a dull sound. No vocal fremitus, respiratory sounds cannot be auscultated. What is the treatment tactics?
- A. Pleural tap
- **B.** Antibiotic therapy
- C. Artificial lung ventilation
- **D.** Oxygen therapy
- **E.** Physiotherapy
- **135.** Children from a certain township present with brittle teeth, malocclusion, dental enamel erosions, and dental pigmentation that looks like yellow-brown spots. What is the likely cause of this presentation?
- **A.** High levels of fluorine in water
- **B.** Low levels of fluorine in water
- **C.** High levels of sulfates in water
- **D.** Low levels of sulfates in water
- **E.** High levels of nitrates
- **136.** A 30-year-old woman complains of subfebrile body temperature that persists for the last 3 weeks, loss of appetite and working ability, excessive sweating (especially at night), malaise. Objectively, her pulmonary percussion indicates no changes in the lungs, auscultation detects crackles in the projection of the upper lobe of the right lung. X-ray shows a dense focus of moderate intensity, 6 mm in diameter, in segment S2. Make the provisional diagnosis:
- A. Focal pulmonary tuberculosis
- **B.** Community-acquired pneumonia
- **C.** Pulmonary tuberculoma
- **D.** Metastatic lung cancer
- E. Peripheral lung cancer
- **137.** A multigravida, labor II, 36–37 weeks of gestation, has gone into labor. Her waters broke 8 hours ago, the labor activity continues for the last 4 hours, it is regular, with contractions that last 35 seconds and

occur every 3–4 minutes. The child is in the cephalic presentation, with the head pressed to the entrance into the lesser pelvis. The parturient woman complains of a sudden sharp abdominal pain. Her pulse is 100/min., blood pressure is 110/70 — 100/70 mm Hg. The uterus is tense and does not relax between the contractions. Fetal heartbeat is muffled — 100/min. The amniotic fluid is blood-colored and continues to leak. What is the most likely diagnosis?

- **A.** Premature detachment of the normally positioned placenta
- **B.** Uterine rupture
- **C.** Rupture of the umbilical vessels
- **D.** Partial placenta previa
- E. Cervical rupture
- **138.** A woman came to the gynecologist to plan her pregnancy. She was advised to increase her intake of the products rich in folic acid, particularly soy beans, bread made of coarsely ground flour, fruits, leafy green vegetables. Such changes in her diet will work toward the prevention of:
- **A.** Non-closure of the neural tube in the fetus
- B. Rickets
- **C.** Non-closure of the fontanel
- **D.** Iron-deficiency anemia in the pregnant woman
- **E.** Polyhydramnios
- 139. A patient with complaints of disturbed gait and forced laughter was hospitalized into the neurological department. Objectively, he has a mask-like face and muscle hypersthenia. For a long time he has been working at the various industrial objects, where, in violation of the hygienic norms, the high levels of exposure to the chemicals were registered. What harmful factor is the likely cause of this pathology?
- A. Manganese
- **B.** Lead
- **C.** Mercury
- **D.** Cadmium
- E. Benzene
- **140.** Before her discharge from a hospital, a full-term newborn girl on the 3rd day of her life developed a recurrent vomiting with blood and stool resembling a "raspberry jelly". It is known that her mother refused to let her child receive any intramuscular injections. What laboratory test will be the most informative for confirmation of the diagnosis?

- A. Prothrombin time
- **B.** Bleeding time
- C. Platelet count
- **D.** Partial thromboplastin time
- **E.** Thrombin time
- **141.** A patient 1 year ago had a Q wave myocardial infarction of the posterior wall of the left ventricle. For the last 2 weeks he has been suffering from daily attacks of atrial fibrillation and bradycardia episodes, accompanied by bouts of vertigo. What tactics is the most advisable in this case?
- **A.** Pacemaker implantation
- **B.** Prescription of procainamide
- **C.** Prescription of digoxin
- **D.** Prescription of amiodarone
- **E.** Prescription of bisoprolol
- **142.** A 35-year-old woman came to the family doctor with complaints of profuse menstruations that last up to 10 days. Gynecological examination shows that the uterine cervix is without changes, the uterus is in *anterflexio*, has normal size, is mobile and painless. The uterine appendages on the both sides are without peculiarities. The family doctor made the provisional diagnosis of abnormal uterine bleeding. What instrumental method of examination needs to be performed first to diagnose this pathology?
- A. Transvaginal ultrasound
- B. Transabdominal ultrasound
- C. Culdoscopy
- **D.** Laparoscopy
- **E.** Colposcopy
- **143.** A 21-year-old man was hospitalized on the 2nd day of the disease. His general condition is severe, body temperature is $39^{\circ}C$. On his skin there are numerous irregular-shaped hemorrhagic elements. The diagnosis of meningococcemia was made. The next day his body temperature suddenly decreased, blood pressure was 80/40 mm Hg, pulse was 120/min. Acrocyanosis was detected. What complication did the patient develop?
- **A.** Acute adrenal insufficiency
- **B.** Acute heart failure
- C. Acute liver failure
- **D.** Cerebral coma
- **E.** Acute hemorrhage
- **144.** An unconscious patient was delivered to a hospital by an ambulance. Objectively, his body temperature is $39^{\circ}C$, he presents with convulsions and red dry skin. It is known that the patient works as a stoker

in the boiler room. What is the likely diagnosis?

- **A.** Heat stroke
- **B.** Acute food poisoning
- **C.** CO poisoning
- **D.** Acute viral respiratory infection
- **E.** Hypertensive urgency
- **145.** A 34-year-old woman after rapidly changing her position from horizontal to vertical suddenly paled, fell down, her skin became moist, her limbs are cold, her pupils are dilated. The pulse is rapid and blood pressure is 50/25 mm Hg. What condition has likely developed in the patient?
- **A.** Collapse
- B. Coma
- C. Ventricular fibrillation
- **D.** Morgagni-Adams-Stokes syndrome
- E. Shock
- 146. A 23-year-old woman without visible cause developed a conflicting behavior at her workplace. She accused the management of underestimating her, claimed that she can be a deputy director, because she speaks four languages, is very attractive, and can make useful connections for the company. She has been dressing extravagantly, flirting with her colleagues, and singing loudly in her office. In fact, she has only the training of a computer operator and speaks no foreign languages. What is the likely clinical diagnosis?
- **A.** Manic episode
- **B.** Depressive disorder
- C. Schizophrenia
- **D.** Mild mental retardation
- E. Epilepsy
- **147.** In a certain region an increase in cardiovascular morbidity is observed in the population. A family doctor/general practitioner plans to take preventive measures against cardiovascular diseases. What measures can be classified as primary ones:
- **A.** Modification of risk factors
- **B.** Referral for inpatient treatment
- **C.** Referral for sanatorium-and-spa treatment
- **D.** Referral to a specialised clinic
- **E.** Complex examination
- **148.** A 34-year-old multipara was brought to the labor ward with regular labor activity. Her pelvic size is 26-29-32-22 cm. Vaginal examination shows 6 cm cervical dilation, the amniotic sac is unbroken. The fetus is in the breech presentation, with

buttocks pressed to the entrance into the lesser pelvis. The promontory cannot be reached, no exostoses. Fetal heart rate is 140/min., expected fetal weight is 2800 g. What labor tactics should be chosen?

A. Delivery through the natural birth canal

B. External obstetric version of the fetus

C. Classic combined external-internal version of the fetus

D. Urgent cesarean section

E. Fetal extraction from the pelvic end

149. A 31-year-old drug-addicted person complains of a cough with bloody expectorations, dyspnea, persistent fever, and leg edemas. The jugular veins are distended. There is a coarse pansystolic murmur detected above the base of the xiphoid process and in the second intercostal space on the left, close to the edge of the sternum. Heart sounds are clear, arrhythmia is detected, heart rate is 128/min., pulse — 82/min., blood pressure

is 100/70 mm Hg. What is the most likely diagnosis?

A. Infective endocarditis

B. Community-acquired pneumonia

C. Coarctation of the aorta

D. Pulmonary embolism

E. Lutembacher syndrome

150. Forensic autopsy of the body of a 59-year-old man, who died suddenly at home without signs of violent death, shows pink skin and mucosa, liquid bright-red blood, and bright-red plethoric internal organs. Forensic toxicology testing detected $1.44^{\circ}/_{oo}$ of ethanol in the blood and carboxyhemoglobin levels of 55%. What is the cause of death?

A. Carbon monoxide poisoning

B. Alcohol poisoning

C. Potassium cyanide poisoning

D. Aniline poisoning

E. Arsenic poisoning