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| كلية الطب  جامعة مؤتة | |  | Faculty of Medicine,  Mu’tah University |
| Fifth-year Dermatology Exams | | | |

This folder contains Dermatology MCQ from years 2008/2015-16/2017 & 2019&2020&2021&2022  
and from 3 unknown folders

**قام بجمع وترتيب هذه الأسئلة أحمد ماجد الخطايبة لغاية امتحانات سنة 2017 ..  
 وتم إضافة باقي الامتحانات وتنسيقها عن طريق طارق أبولبدة ..  
 وبإشراف لجنة الطب والجراحة ..**

**وامتحان 2021 عمل ندى الشبيلات وامتحان 2022 عمل نور الهدى الكركي**



Dermatology – Final 2022

إعداد : نورالهدى الكركي

1- Osteolytic lesion , can be seen with ?

Acne Fulminans

2- We can use all of the following with wart management , Except ?

A. Salicylic acid preparation

B. Surgery

C. Cautery

D. Cryotherapy

E. Salicylic acid with lactic acid preparation

3- No treatment is an option for which of the following ?

A. Impetigo

B. Herpes simplex virus

C. plane wart

D. Molluscum contagiosum

E. Herpes zoster

4- 5 years child with brown yellow crusted lesions ?

A- Impetigo

5- we need Woods light exam in all of the following , Except ?

A. Tinea manum

B. Tinea versicolor

C. Pitted keratolysis

D. Tinea capitis

E. Melasma

6-44 years old male patient complained of recurrent angioedema , one of the following statement is not correct regarding his problem ?

A. It is a deeper swelling within the skin or mucous membranes

B. It resolves within 24 hours.

C. It may be itchy or painful but is often asymptomatic

D. angioedema alone in 10% or in 40% with urticaria.

E. It may be serious

7- we use systemic steroid in one of the following ?

A. Symptomatic dermographism

B. cholinergic urticaria

C. Aquagenic urticaria

D. Severe chronic urticaria

E. pressure urticaria

8- We see Onychomadesis with which of the following ?

A. Herpes zoster

B. Molluscum contagiosum

C. Hand foot and mouth disease

D.HPV

E.HSV

9- An abnormal winged like growth of skin (living tissue) on the nail plate , Definition of ?

A. Onycholysis

B. PTERIGIUM

C. Kolionychia

D. Onychorrhexis

E. Onychomycosis

10- Most patients are asymptomatic , No itching ?

A. Hypertrophic LP

B. Annular LP

C. Ulcerative LP

D. Classic LP

11- We use monobenzylether with which of the following ?

A. Extensive vitiligo

12- All the following are post inflammatory hyperpigmented lesions except ?

A. psoriasis

B. eczema

C. Tinea versicolor

D. Lichen planus

E. Fixed drug eruption

13- Over-exposure to BLUE Light , can cause ?

A. MELASMA

14- All of the following are dermatological cause of generalized itching , Except ?

A. Dermatitis Herpetiformis

B. Lichen planus

C. Lichen simplex chronicus( neurodermatitis)

D. Scabies

E. Pediculosis

15- Regarding Syphilis disease , one of the following isn't infectious ?

A. secondary syphilis

B. early latent

C. Tertiary syphilis

D. primary syphilis

E. Extra-genital lesions

16- Calciphylaxes is usually a manifestation of :

A. Renal diseases

17- Acne excoriee is ?

A. More common in men

B. More common in children

C. more common in young female

D. drug induced acne

E. associated with papules and pustules

18- Monomorphic eruption of papules and pustules , associated with ?

A. Drug induced Acne

19- One of the followings is not correct regarding the poor prognostic factors for alopecia aerate :

A. associated with atopy

B. family history of autoimmune disease

C. Sparing occipital area

D. childhood onset

E. presence of autoantibodies

20- Minimal scaling in psoriasis is seen in :

A. Inverse Psoriasis

21- A 7 year old child presenting with a recurrent dry scaly macules on face, the most proper diagnosis is :

A. Early vitiligo

B. Guttate psoriasis

C. Melasma

D. Pityriasis alba

E. Leishmania

22-Which of the following associated with celiac disease ?

A. Dermatitis Herpetiformis

23- Target lesion is a characteristic of ?

A. Erythema multiforme

24- the level of dermatitis herpetiformis lesion is ?

A. Dermal

B. epidermal

C. Lamina Lucida

D. basal cell

E. intercellular cement

25- We need HIGH dose of corticosteroid in the management of ?

A. psoriasis

B. Dermatitis herpetiformis

C. Pemphigus vulgaris

D. Bullous pemphigoid

E. Cicatricial pemphigoid

26- which of the following micro-organisms cause acute paronychia ?

A. Staphylococcus aureus

27- One of the following associated with minimal if any inflammatory process :

A. Tinea capitis

B. Tinea versicolor

C. Tinea cruris

D. Tinea corporis

E. Tinea Pedis

28-All of the following are differential diagnosis of Pityriasis rosea , EXCEPT ?

A. Secondary syphilis

B. Tinea corporis

C. Dermatitis herpetiformis

D. Guttate psoriasis

E. Lichen planus

29- Asymptomatic corneal opacities , associated with ?

A. x- linked recessive ichthyosis

30- Bamboo hair , Associated with ?

A. Netherton syndrome

31- Best prognosis among psoriasis disease ?

A. Psoriasis vulgaris

B. Guttate Psoriasis

C. Nail Psoriasis

D. Scalp Psoriasis

E. Inverse Psoriasis

32- All of the following are true regarding Non-Gonococal urethritis , EXCEPT ?

A. it is the most common STD

B. incubation period 1-2 weeks

C. Heavy pussy ( purulent ) discharge

D. the drug of choice is doxycycline

E. Caused by Chlamidia trochomatis

33-First clinical presentation of early congenital syphilis ?

A. Generalized non-tender lymphadenopathy

B. Maculopapullar skin rash

C. Rhinitis ( Snuffle nose )

D. saber shin

E. saddle nose

34- All the following are true regarding palmoplanter psoriasis , EXCEPT ?

A. Patients may also experience scaling and severe pruritus

B. Smoking is a risk factor for this variant

C. Nail changes are less frequent in this variant

D. is more common in women

E. Differential diagnosis includes : eczema and fungal infection

35-Most common superficial Dermatophytosis in male ?

A. Tinea cruris

36- Most common superficial Dermatophytosis in general ?

A. Tinea Pedis

37-Most common sites of DISCOID eczema are ?

A. Extremities

B. Face

C. Scalp

D. Face and scalp

E . Trunk

38- one of these sentences is wrong about hair cycle ?

A. Anagen is the active growth phase, which typically lasts 1000

B. Catagen is the short growth arrest phase, of approximately 10 days

C. Telogen is the resting phase, lasting approximately 100 days irrespective of location

D. Anagen phase of the body hair lasts 1-2 years

E. The ratio of Anagen to Telogen hairs is 9:1 reflecting the fact that only a few hairs at a time are in Catagen phase

39- Intralesional corticosteroid , with which of the following ?

A. Acne

B. Psoriasis

C. Alopecia Areata

D. Impetigo

E. Tinea

40- Least associated with cancer ?

A. Acquired ichthyosis

B. Paget`s disease of the breast.

C. Acquired Hypertrichosis lanuginosa

D. necrolytic migratory erythema

E. Carcinoid syndrome

Dermatology Final Exam 2021

1. A 9 years old patient with lamellar ichthyosis he should be seen in addition to a dermatologist by :
2. Internist
3. Ophthalmologist
4. Gastroenterologist
5. Physiotherapist
6. Neurologist

2- Which of the following is non-inflammatory lesion in acne :

1. Papule
2. Pustule
3. Cysts
4. Comedone
5. Nodule

3- A patient was referred from internal department to dermatology clinic complaining of intense pruritus ,

the most possible diagnosis is :

1. Secondary syphilis
2. Rubella
3. Pityriasis rosea
4. Dermatitis herpetiformes
5. Molluscum contagiosum

4- A 25 years old male patient with proximal subungual onychomycosis we should ask for which of the

following tests :

1. ASO-Titer
2. HIV
3. HBsAg
4. ANA
5. VDRL

5- Patch test is used in the diagnosis of :

1. Contact urticarial
2. Contact irritant dermatitis
3. Nummular dermatitis
4. Chronic urticarial
5. Contact allergic dermatitis

6- Koebner phenomenon is seen in all except :

1. Lichen planus
2. Psoriasis
3. Vitiligo
4. Icthysois
5. Warts

7- 44 years old male patient complained of recurrent angioedema , one of the following statements is

not correct regarding his problem :

1. It is a deeper swelling within the skin or mucous membranes
2. It resolves within 24 hours
3. It may be itchy or painful but is often asymptomatic
4. It may occur without weals on the skin
5. It may be serious

8- Lichenification is a characteristic skin manifestation of :

1. Lichen planus
2. Chronic eczema
3. Lichen sclerosis et atrophicans
4. Acute contact irritant dermatitis
5. Lymphoma

9- One of the following is true regarding the involved cells in the pathogenesis is psoriasis :

1. Keratinocytes
2. T-lymphocytes
3. B-lymphocytes
4. Keratinocytes and T-lymphocytes
5. Histiocytes

10- All of the following anatomical sites can be affected by Neisseria gonorrhea except :

1. Vagina
2. Cervix
3. Conjunctiva
4. Urethra
5. Rectum

11- Which of the following is not true regarding syphilis :

1. Skin lesions of secondary syphilis are infectious
2. Late latent syphilis is infectious
3. Incubation period for syphilis is 10-90 days
4. Penicillin is the drug of choice for syphilis
5. Hepatomegally is the most common finding in early congenital syphilis

12- 71 year old male patient presented with grouped vesicles on the side of his nose of two days duration ,

further consultation by :

1. ENT doctor
2. Ophthalmology
3. Neurology doctor
4. Internal medicine doctor
5. No need for further consultation

13- A 7 year old child presented with an erythematous scaly patch on his face , the most proper approach for diagnosis his case is :

1. Wood’s light
2. Pottasium hydroxide scrapping
3. Clinical diagnosis
4. Skin biopsy
5. Dermoscopy

14- A female patient was referred to make skin biopsy , and this biopsy was a must for the diagnosis ,

the most possible diagnosis for her is :

1. Mycosis fungoids
2. Lichen plans
3. Psoriasis
4. Vitiligo
5. Alopecia areata

15- All are true regarding pityriasis rosea except :

1. Characterized by herald patch
2. It is a chronic relapsing itchy skin disease
3. Characterized by collarette scale
4. Affected mostly the trunk and proximal extremities
5. It is not infectious

16- Which of the following is a wrong statement :

1. Koilonychia in vit B12 deficiency
2. Onycholysis in psoriasis
3. Mees lines in Arsenic poisoning
4. Pterygium of nails in lichen planus
5. Onycholysis in hyperthyroidism

17- Which of the following is a histopathological feature of psoriasis :

1. Spongiosis
2. Acanthosis
3. Atrophy
4. Acantholysis
5. Vasculitis

18- A 30 years old male farmer presented with non tender scaly erythematous patch on his face with active

scaly slowly enlarging border of 4 weeks duration . The most likely diagnosis is :

1. Impetigo
2. Lichen planus
3. Tinea ( Dermatophyte fungal infection )
4. Rosacea
5. Erysipelas

19- Calciphylaxes is usually a manifestation of :

1. Liver disease
2. Renal disease
3. Connective tissue disease
4. Thyroid disease
5. Malignancy

20- All of the following drugs can exacerbate psoriasis except :

1. Beta- blockers
2. Cyclosporine
3. Anti-malarial drugs
4. Tetracycline
5. Non-steroidal anti-inflammatory drugs ( NSAID )

21- A patient presented to the dermatology clinic for an appointment for skin biopsy complaining of generalized erythematous rash of two months duration , all of the following are may be a cause for his problem except :

1. Psoriasis
2. Mycosis fungoids
3. Eczema
4. Pityriasis rubra pilaris
5. Pityriasis versicolor

22- 55 years old female patient diagnosed with chronic urticaria , one the following statements is not correct

regarding her disease

1. The duration of her disease was less than one month , and often gone within minutes to hours
2. Her disease is characterized with daily or episodic weals
3. Her disease may be spontaneous or inducible
4. It may co-exist with other cognitive tissue disease
5. Angiodema may occur with the urticaria

23- 19 years old female students complained of scaly scalp , she used ketoconazole shampoo with

improved her problem , the most possible diagnosis is :

1. Seborrheic dermatitis
2. Psoriasis
3. Trichotillomania
4. Telogen effiuvium
5. Alopecia areata

24- Which of the following disease is almost always associated with malignancy ( very high percentage ) :

1. Acanthosis nigricans
2. Acquired ichthyosis
3. Dermatomyositis
4. Extramammary paget’s disease
5. Acquired hypertrichosis lanugenosa

25- Which of the following skin , nail and mucous membrane lesions is usually not present in lichen planus

and it’s variant :

1. Papules
2. Plaques
3. Excoriation
4. Oral erosion
5. Onycholysis

26- Tinea cruris is more commonly seen in :

1. Women
2. Men
3. Children
4. Children with atopic eczema
5. Infant

27- A patient presented with thick , velvety and hyperpigmented skin at the sides of his face .

The most possible diagnosis is :

1. Icthyosis vulgaris
2. Lamellar icthyosis
3. Acanthosis nigricans
4. Melasma
5. Neurofibromatosis

28- One of the following is not correct regarding skin transit time :

1. Cell transit time in psoriasis is usually 4 days
2. Migration of basal cell from the basal layer to the cornified layer in humans takes at least 28 days
3. The transit through the cornified layer to the outermost epidermis requires another 14 days
4. The transit time through the normal epidermis is 28 days
5. The transit time in psoriasis may be modified by treatment

29- All of the following are true regarding ichythyosis vulgaris except :

1. Present at birth
2. Associated with atopic dermatitis
3. Spares the groin and flexural areas
4. Improves in summer
5. Autosomal dominant ( AD )

30- The cardinal pathological process in pemphigus vulgaris is :

1. Acanthosis
2. Hyperkeratosis
3. Acantholysis
4. Vasculitis
5. Sub epidermal split

31- One the following is more related to sailors :

1. Pitted keratolysis
2. Erythrasma
3. Tinea crurries
4. Psoriasis
5. Crabs

32- An infant born with hypo pigmented macule on his trunk . One of the following is the least possible

diagnosis :

1. Vitiligo
2. Nevus anaemicus
3. Tuberous sclerosis
4. Nevus depigmentosa
5. Non of the above

33- One of the following is not correct regarding leishmania :

1. There are more than 20 species of leishmania parasites which can infect humans
2. Sandflies are tiny (1.5-3) insects which actively feed on blood
3. The transmission via the bite of phlebotomine sandflies
4. Their bite is itchy
5. Leishmaniasis has several recognized clinical forms , and their manifestation depends upon the species

inoculated

34- Acne excoriee is :

1. More common in young male
2. More common in children
3. Characterized by numerous comedones
4. More common in young women
5. A drug induced acne

35- A male child was diagnosed with a alopecia areata , one of the following is not correct regarding the bad prognostic factor for his disease :

1. Childhood onset of disease
2. Atopy
3. Ophiasis
4. Nail pitting
5. Absence of autoantibodies

36- A male patient presented to the dermatology clinic complaining of patchy hair loss with scarred skin ,

all of the following are possible causes of his complain except :

1. Discoid lupus erythematosus
2. Alopecia areata
3. Lichen planus
4. Lupus vulgaris
5. Pseudopelade

37- Pruritus in Hodgkin’s lymphoma is characterized by the presence of :

1. Papules
2. Papulovesicles
3. Nodules
4. Scratch marks
5. Patches

38- 22 year old male patient presented with scaly patches at both on his axillae areas with wood’s light

finding , one of the following is not true regarding his disease :

1. The bacteria responsible for his disease are gram-negative bacteria
2. His disease my coexist with or be confused with other causes of intertrigo
3. No treatment is needed
4. Mild itching may be present
5. Other site may be involved such as , groin and between the toes

39- A 60 year old man with itchy scaly erythematous lesions on his face involving the nasolabial fold and

retroauricular area with greasy scales on his scalp and eyebrows . The most likely diagnosis is :

1. Photodermatitis
2. Psoriasis
3. Seborrheic dermatitis
4. Lupus erythematosis
5. Atopic eczema

40- 25 year old female patient presented to the clinic complaining of dark tan , easily after sun exposure ,

but with rare history of burn . Her skin type is :

1. Skin type 1
2. Skin type 4
3. Skin type 6
4. Skin type 2
5. Skin type 3

إعداد

**2020 EXAM**

Q1: Ketoconazole is a good treatment in:

Select one:

a. Seborrheic dermatitis

b. Psoriasis

c. Trichotillomania

d. Telogen effluvium

e. Alopecia areata

Q2: One of the followings is not correct regarding the prognostic factors for alopecia aerate:

Select one:

a. childhood onset of disease

b. atopy

c. ophiasis (band of alopecia in occipital region)

d. nail dystrophy

e. Absence of autoantibodies

Q3: Which of the followings is almost always associated with malignancy ?

Select one:

a. Aquired ichthyosis

b. Exfoliative erythroderma

c. Necrobiotic xanthogranuloma

d. Necrolytic migratory erythema

e. Erythema annulare centrifugum

Q4: The most helpful diagnostic test within first two weeks in primary syphilis is:

Select one:

a. VDRL( Venereal Disease Research Laboratory test)

b. RPR ( Rapid Plasma Reagin test)

c. Darkfeild microscopy

d. Culture

e. TPHA ( Treponema pallidum Heamagglutination test)

Q5: All are histopathological features of psoriasis except :

Select one:

a. Parakeratosis

b. Hypergranulosis

c. Acanthosis

d. Hyperkeratosis

e. Dermal lymphocytic infiltrate

Q6: One of the followings is not correct regarding scabies:

Select one:

a. Typically, several scabies mites infest an affected host

b. After mating, the male mite dies

c. The female scabies mite burrows into the outside layers of the skin

d. The female scabies lays up to 3 eggs each day for her lifetime of one to two months

e. The development from egg to adult scabies mite takes 28 days

Q7: All of the followings are causes for erythroderma except:

Select one:

a. Psoriasis

b. Lichen planus

c. Eczema

d. Pityriasis rubra pilaris

e. Pityriasis versicolor

Q8: One of the following pigments produced in the skin:

Select one:

a. Phaeomelanin

b. Bilirubin

c. Tattoo pigment

d. Haemoglobin

e. Haemisiderin

Q9: One of the followings is not correct regarding leishmania:

Select one:

a. There are more than 20 species of Leishmania parasites which can infect humans

b. Sandflies are tiny (1.5–3 mm) insects which actively feed on blood

c. The transmission via the bite of phlebotomine sandflies

d. Their bite is itchy

e. Leishmaniasis has several recognized clinical forms, and their manifestation depends upon the species inoculated

Q10: One of the followings is not correct regarding skin transit time

Select one:

a. Cell transit time in psoriasis is usually 4 days

b. Migration of a basal cell from the basal layer to the cornified layer in humans takes at least 28 days

c. The transit through the cornified layer to the outermost epidermis requires another 14 days

d. The transit time through the normal epidermis is 28 days

e. The transit time in psoriasis may be modified by treatment

Q11: A patient presented with thick, velvety and hyperpigmented skin at the sides of his neck. The most possible diagnosis is :

Select one:

a. Icthyosis vulgaris

b. Lamellar icthyosis

c. Acanthosis nigricans

d. Melasma

e. Neurofibromatosis

Q12: One of the followings is not correct regarding skin type three:

Select one:

a. Always burns, does not tan

b. Tans after initial burn

c. Burns minimally, tans easily

d. Burns easily, tans poorly

e. Rarely burns, tans darkly easily

Q13: Oral systemic antifugal treatment must be used in:

Select one:

a. Tinea cruris

b. Tinea nigra

c. Tinea corporis

d. Tinea incognito

e. Tinea versicolor

Q14: Grouped vesicles on the side of the nose of acute onset needs:

Select one:

a. ENT doctor consultation

b. Ophthalmology consultation

c. Skin biopsy

d. Topical steroids treatment

e. Systemic antibiotic treatment

Q15: Wickhams striae are a characteristic clinical feature usually seen in:

Select one:

a. Mucous membrane lesions of lupus erythematosus

b. Skin lesions of lichen planus

c. Skin lesione of discoid eczema

d. Mucous membrane lesions of secondary suphilis

e. skin lesions of plaque psoriasis

Q16: The most common sixually transmitted disease is :

Select one:

a. Chancroid

b. Gonnorrhea

c. Syphilis

d. Non-Gonococcal urethritis

e. Aquired Immunodeficiency Syndrome ( AIDS )

Q17: An infant born with hypo pigmented macule on his trunk. One of the followings is the least possible diagnosis:

Select one:

a. Vitiligo

b. Nevus anaemicus

c. Tubeus sclerosis

d. Nevus depigmentosa

e. non of the above

Q18: The cardinal pathological process in pemphigus is:

Select one:

a. Acanthosis

b. Hyperkeratosis

c. Acantholysis

d. Vasculitis

e. Subepidermal split

Q19: Minimal scaling in psoriasis is seen in :

Select one:

a. Flexural psoriasis

b. Scalp psoriasis

c. Guttate psoriasis

d. Erythrodermic psoriasis

e. palmoplantar psoriasis

Q20: Lichen simplex chronicus (Neurodermatitis) is usually a:

Select one:

a. A generalized form of pruritus withous skin lesions

b. A localized form of lichen sclerosus et atrophicans

c. A localized form of pruritus

d. Complication of herpes zoster infection

e. Non-itchy disease

Q21: Koebner phenomenon is seen in all except:

Select one:

a. Lichen planus

b. Psoriasis

c. Vitiligo

d. Icthysois

e. warts

Q22: One of the followings is not correct regarding urticaria:

Select one:

a. Acute urticaria (&lt; 6 weeks duration, and often gone within minutes to hours)

b. Chronic urticaria (&gt; 6 weeks duration, with daily or episodic weals)

c. Chronic urticaria may be spontaneous or inducible

d. Both types may co-exist

e. Angiodema may occur with the urticaria

Q23: Lichenification is a characteristic feature of:

Select one:

a. Acute Eczema

b. Erysipilas

c. Guttate psoriasis

d. Lichen sclerosis et atrophicans

e. Chronic eczema

Q24: One of the followings is not true regarding erythrasma:

Select one:

a. The bacteria responsible for erythrasma are gram-negative bacteria

b. Erythrasma may coexist with or be confused with other causes of intertrigo

c. Erythrasma presents as well-defined pink or brown patches with fine scaling

d. Mild itching may be present

e. The common sites for erythrasma are armpits, groin and between the toes

Q25: Squamuos cell carcinoma may be a complication of:

Select one:

a. Eruptive disseminated lichen planus

b. Annular lichen planus

c. Hypertrophic lichen planus

d. Lichen planus pigmentosus

e. lichen nitidus

Q26: One of the followings is not correct regarding pitted keartolyisis:

Select one:

a. Pitted keratolysis is caused by several mycobacterium species

b. The pitting is due to destruction of the horny cells

c. The bad smell is due to sulfur compounds produced

d. Pitted keratolysis is much more common in males than in females

e. Occupations at risk include:Athletes and Sailors

Q27: Herald patch is a characteristic clinical feature of:

Select one:

a. Chickenpox

b. Pityriasis rosea

c. Syphilis

d. Neurofibromatosis

e. Vitiligo

Q28: Skin biopsy is a must for the diagnosis of:

Select one:

a. Lichen planus

b. Bullous pemphigoid

c. Psoriasis

d. Vitiligo

e. Kerion

Q29: Intense pruritus is a characteristic clinical feature of:

Select one:

a. Secondary syphilis

b. Rubella

c. Pityriasis rosea

d. Dermatitis herpetiformes

e. Molluscum contagiosum

Q30: Tinea versicolor by Wood`s light examination shows:

Select one:

a. Coral red flourescence

b. Blue flourescence

c. Green flourescence

d. Golden yellow flourescence

e. White flourescence

Q31: One of the followings is not correct regarding angiodema:

Select one:

a. It is a deeper swelling within the skin or mucous membranes

b. It resolves within 24 hours

c. It may be itchy or painful but is often asymptomatic

d. it may occur without weals on the skin

e. it may be serious

Q32: Skin lesions of diabetic dermopathy are usually present on:

Select one:

a. Palms

b. Forearms

c. Trunk

d. Shins

e. Soles

Q33: Usually patients with rosacea do not have:

Select one:

a. Pustules

b. papules

c. Telangiectasia

d. Comedones

e. Conjunctivitis

Q34: Pruritus is not a feature of:

Select one:

a. Skin rash of dermatitis herpetiformes

b. skin rash of lichen planus

c. Skin rash of secondary sphilis

d. Skin rash of pomphylox

e. Skin rash of seborrheic dermatitis

Q35: Which of the following is a wrong statement:

Select one:

a. Koilonychia in vit B12 deficiency

b. Onycholysis in psoriasis

c. Mees lines in Arsenic poisoning

d. Pterygium of nails in lichen planus

e. Onycholysis in hyperthyrodism

Q36: A 7 year old child presenting with a recurrent dry scaly macules on face, the most proper diagnosis is :

Select one:

a. Leishmania

b. Pityriasis alba

c. Early vitiligo

d. Guttate psoriasis

e. Melasma

Q37: All are true regarding lamellar ichthyosis except:

Select one:

a. Appears at birth

b. Due to Transglutaminase deficiency

c. Autosomal dominant inheritance

d. usually patients have large dark scales

e. Associated with ear deformity

Q38: All are true in atopic dermatitis except:

Select one:

a. The majority of patients are less than 5 years old

b. No laboratory test to diagnose atopic dermatitis

c. Face is spared in infants

d. Filagrin dysfunction is a factor in its pathogenesis

e. It can affect adults

Q39: Monomorphic papules and pustules are characteristic for;

Select one:

a. Acne fulminance

b. Drug induced acne

c. Acne conglobata

d. Acne cosmetica

e. late onset acne

Q40: All of the followings are possible causes of cicatritial alopecia except:

Select one:

a. Discoid lupus erythematosus

b. Alopecia areata

c. Lichen planus

d. Lupus vulgaris

e. Pseudopelade

**2019**

**1-Disease that needs Skin biopsy to dx:**  **pumphigus vulgaris**

**2-most common trigger for Erythema multiforme:**  
 **herpes simplex**

**3- Target lesion is characteristic of:**  
 **erythema multiform**

**4-Nikolsky test positive:**   
**pemphigus vulgaris**

**5-most common dermatophyes at children:**   
**tinea capitis**

**6-inverted chrismas tree is characterstic of :   
ptryiasis rosea chrismas**

**7-prick's test diagnose :**   
**Urticaria**

**8-patch test for dx of:**   
**neckle dermatitis**

**9-multiple plane warts on face Rx :**   
**no treatment**

**10- 7 year old with multiple scaly macules lesions on face :  
ptryiasis alba**

**11- non hairy patch on scalp with erythematous lesion best dx by :**  
 **KOH**

**12- tinea capitis Rx:**  **oral greseofluvin**

**13- hypopigmented lesion at upper chest dx by:**   
**woods light**

**14- furuncle:**  
 **is deep skin infection of one hair follicle single deep**

**15- creamy ‘ satellite ’ pustules at the margins of the affected areas of Intertrigo caused by :**   
**candiasis**

**16- ketoconazole used for :**  
 **seborrhic dermatitis**

**17- normal transition time for skin :**   
**28-57 days**

**18- Wrong regarding flexure psoriasis:**   
**thick scales**

**19- Wrong regarding Lichen simplex chronicus :**  
 **not a type of lichen planus.**

**20- Dapsone is treatment for :**  
 **dermtitis herpeteformis**

**21-erythrasma on wood's light apear :**  
 **red**

**22-hyperpigmented lesions on both axilla ( with another description ) :**  **acanthosis nigricans**

**23- Erapution xanthoma is seen in :**  
 **DM**

**24- Infection that may cause urinary retention :  
Herpes zoster**

**25-Wrong regading secondary syphilis :**  **Rash sparing the palms and soles**

**26- Not a cell of dermis :**  
 **keratinocytes**

**27-Lamina densa is found at :**   
**Basment** **membrane**

**28- most common itchy lesion of scalp at children:**  
 **pediculosis**

**29- Wrong regarding icthyiosis vulgaris :**   
**Present since birth**

**30- not autoimmune an auto immune disease :**   
**ptryiasis rosea**

**31- crab (pthrius pubic) doesn't affect :**  **scalp**

**32- exclamation marks found at :**   
**alopecia arreata**

**33- spaghetti and meat balls found at KOH at :**  
 **tinea versicolor**

**34- Wrond statement :  
koilonychia found at b12 deficiency**

**35- half pale of the nail is pale and half red indicates :  
 renal disease**

**36- Lichenfecation is found at :**  
 **chronic eczema**

**37- scrofuloderma is caused by :**   
**TB**

**38-cardinal feature of pemphigus vulgaris :**   
**acantholysis**

**39- wrong about lichen planus :**  **causes non scarring alopecia**

**40- Disease diagnosed with wood's light :**  **Tinea versicolor**

**2017**

1. **psoriasis after throat infection :**  
   guttate psoriasis\*\*
2. **MC cause for itching of head in children** :   
   tinea capitis   
   lic \*\*
3. **one of the following is due to viral cause :**  
   Condyloma Acuminatum \*\*
4. **tense blister :**  
   bullous pemphigoid \*\*
5. **sever intense itching :**  
   dermatitis heroitiformis \*\*
6. **oil drop sign on nail :**  
   on psoriasis \*\*
7. **dapson :**   
   dermatitis herpitiformis \*\*
8. **lichenification :**  
   chronic eczema \*\*
9. **cutaneous mets :**   
   scalp   
   hand   
   abdomen   
   umbilicus
10. **desmosomes between :**  
    keratinocytes \*\*
11. **chancroid is :**   
    mutliple painful \*\*  
    multiple painless   
    single painful   
    single painless
12. **photo -oncholysis :**  
    doxycycillin
13. **woods light of erythrma** :   
    red \*\*
14. **all appears on woods light except :**  
    pityriasis amiantacea \*\*
15. **incubation period of gonorrhea :**  
    3-5 days \*\*
16. **need biopsy to confirm dx :**  
    pemphigus \*\*
17. **lichen planus:**  
    associated with hepatitis C \*\*
18. **secondary syphilis false :**  
    sparing palm and soles \*\*
19. **icthyosis vilgaris :**  
    mutation in filaggrin \*\*
20. **birbick granules :**  
    langerhans \*\*
21. **a cause of erythema multiforme :**  
    HSV \*\*
22. **target lesion :**  
    erythema multiforne \*\*
23. **Best prognosis:**  
    pityriasis rosea  
    guttate
24. **acute onset of vesicle on side of nose:**  
    Need ophthalmologist \*\*
25. **organ involved in roscea :**eye \*\*
26. **Q about acanthosis nigricans :**  
    hyperpigmented valvety patches on neck \*\*
27. **not used for systemic Rx of psoriasis :**  
    systemic steroid \*\*
28. **ketocanazol :**   
    seborrhic dermatitis \*\*
29. **acne w/ head band :**  
    vulgaris  
    excoriée  
    occlusive
30. **Q about primary lesions:**  
    vesicle in pomphylix \*\*
31. **Meet infection:**  
    orf \*\*
32. **non pruritic :**  
    pytiasis versicolor \*\*
33. **non infectious :**  
    pytrisis versicolor \*\*
34. **number of cafe ault in neurofibromatosis one:**  
    6 \*\*
35. **inverted christmas tree :**  
    pytriasis rosea \*\*
36. **wrong about alopecia areata:**   
    -familial componant   
    -associated with dm   
    -associated with hypothyoid   
    -resolve spontaneously   
    -prognosis is unpredictable \*\*\*
37. **pediculosis capitis:**  
    the lice fly \*\*
38. **systemic anti fungal for:**  
    tinea capitis \*\*
39. **Q about Patch test :**  
    Allergic contact dermatitis \*\*

**2015/2016**

1. **Scabies – except:**
2. sparing head and neck
3. b.can occurs in male genitalia with papules (pathognomonic)
4. **IgG :**

Pimphgus \*\*

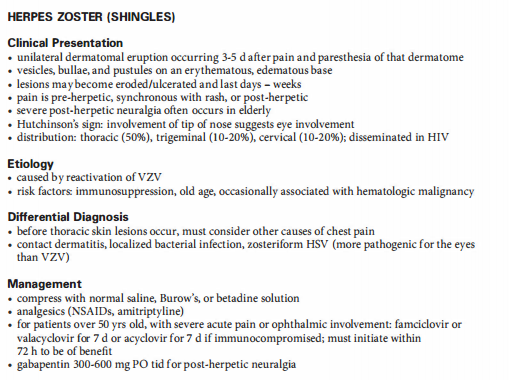
To remember :   
In Pemphigus: Circulating Ab is IgG to intracellular adhesion proteins

Pemphigoid : IgG to BM region

1. **Lice except :**

all the scalp hair \*\*

1. **Ddx of hypopigmentation**
2. **Q about Herpes zoster**



1. **Cicatricial Alopecia :**

lichen planus \*\*

1. **Q about the management of acne :**

acne management except chemical steroid \*\*

1. **All are Physical urticaria except:**
2. **Q about Pityriasis Rosea + steroids**
3. **Dx by woods lamp :**

tenia capitus \*\*

1. **Not in epidermis :**

Fibroblast \*\*

1. **Growth phase / hair –**

To remember

• hair grows in a cyclic pattern that is defined in 3 stages   
1. growth stage = anagen phase  
 2. resting stage = telogen phase  
 3. degenerative stage = catagen phase

1. **lichen planus :**

associated with hepatitis C \*\*

1. **about icthyosis except :**   
   Appear at birth   
   “fish -scale" appearance especially on extremities with sparing of flexural creases, palms and soles
2. **lichen planus:**

wickham's striae \*\*

1. **Not in psoriasis :**

blisters /splitting \*\*

1. **dx of atopic dermatitis :**

Patch test\*\*

1. **Erthysema – all are true except :**

Itchy \*\*

1. **Erthysema – on wood lamp test :**

red \*\*

1. **histology – rietee ridge in:**

lichen planus \*\*

1. **cause of chronic ( leukonychia ? ) :**

candida \*\*

1. **all are given in psoriasis except:**

steroid \*\*

1. **Not a cause of erythema :**

Intertrigo\*\*

1. **monomorphic papule occur in :**

cream use \*\* ?

1. **rhinophyma :**

acne rosea \*\*

1. **we can use antifungal in one of the following :**

seborrhic dermitis \*\*

1. **Oral lesion occur in:**

Pemphigus \*\*?

1. **Arthritis in psoriasis – incidence (%)**
2. **Patient with lateral 1/3 of brow is lost :**

hypothyroidism \*\*

1. **pt DM .. skin manifestation in DM**

**2008**

1. **The protective layer of the epidermis is:**
2. stratum luciden.
3. stratum basalis.
4. stratum corneum\*\* .
5. stratum granulosum.
6. stratum spinosum.
7. **The embryological origin of epidermis:**
8. Mesoderm.
9. Endoderm.
10. Ectoderm.\*\*
11. Neural crest.
12. None of the above.
13. **Which of the following considered non inflammatory skin lesions:**
14. Plaque.
15. Nodules.
16. Pustules.
17. Papules.
18. Comedones.\*\*
19. **Erectorpili muscle is:**
20. Skeletal muscle to erect hair.
21. Smooth muscle surrounding dermal blood vessels.
22. Smooth muscle surrounding dermal lymphatics.
23. Smooth muscle to erect hair.\*\*
24. Skeletal muscle of the scrotum.
25. **The distribution of skin color largely done by:**
26. Melanocyte.
27. B.Keratinocyte.\*\*
28. Stratum lucidum.
29. Odland bodies.
30. Langherhans cells.
31. **Melanin is usually localized in the keratinocyte in:**
32. Nucleus.
33. Periphery of cytoplasm.
34. Peri nuclear space. \*\*
35. Cell-Membrane.
36. A+C correct.
37. **Clear cell of the epidermis is:**
38. Langherhans cell.
39. Keratinocyte.
40. C.Melanocyte.\*\*
41. Granular cell.
42. Corneocyte.
43. **Main site of pathology in acne-vulgaris is:**
44. Hair follicle.
45. Intradermal eccrine duct.
46. Intraepidermal eccrine duct.
47. Pilosebrceous duct. \*\*
48. Apocrine duct.
49. **Drug induced acne caused by all except:**
50. Trimethoprim. \*\*
51. Iodides.
52. Anti convulsants.
53. Steroid.
54. Anti-androgen-hormones.
55. **Psoriatic scale:**
56. Salmon colored.
57. Adherent scale.
58. Yellowish-green in color.
59. Accentuated by scratching \*\*
60. Wet scale
61. **Gonorrhea caused by:**
62. Gram negative bacteria. \*\*
63. Chlamydia species.
64. Spirochetes species.
65. Gram positive bacteria
66. Protozoa
67. **Hyper proliferation of basal cell of skin seen in:**
68. Seborrheic dermatitis.
69. Psoriasis vulgaris. \*\*
70. Atopic dermatitis.
71. Discoid eczema.
72. Hyper trophic lichen planus.
73. **Salicylic acid is:**
74. Humidifier agent.
75. Emollient.
76. Anti-inflammatory.
77. Keratolytic. \*\*
78. A+C.
79. **Fixed drug eruption is best seen in patient taking:**
80. Paracetamol.
81. Sulpha drugs. \*\*
82. Steroid.
83. Retinoids.
84. Methotrexate.
85. **Stratum corneum is thickest on:**
86. Buttock.
87. Sclap.
88. Palms. \*\*
89. Thighs.
90. Scrotum.
91. **All skin appendages couldn't be seen on palms , soles except:**
92. Sebaceous glands.
93. Vellus hair follicle.
94. Apocrine glands.
95. Terminal hair follicle.
96. Eccrine glands.\*\*
97. **The type of keratin covering the hair & nail is the same like that of skin.**

A. True. B. False. \*\*

1. **" Exageration of skin markings" is known as:**
2. Excoriation.
3. Lichenification \*\*.
4. Hyper keratosis.
5. Scratches.
6. Atrophy.
7. **Best description of herpes-zoster is:**
8. Re-infection of varicella herpetic virus.
9. Re-activation of dormant varicella with disseminated vesicles.
10. Re-activation of dormant varicella with dermatomal distribution. \*\*
11. Inoculation of varicella virus directly into skin.
12. Inoculation of human papilloma virus into skin.
13. **Primary irritant dermatitis is based on immune mechanism:**

A. True. B.False \*\*

**Extra 1**

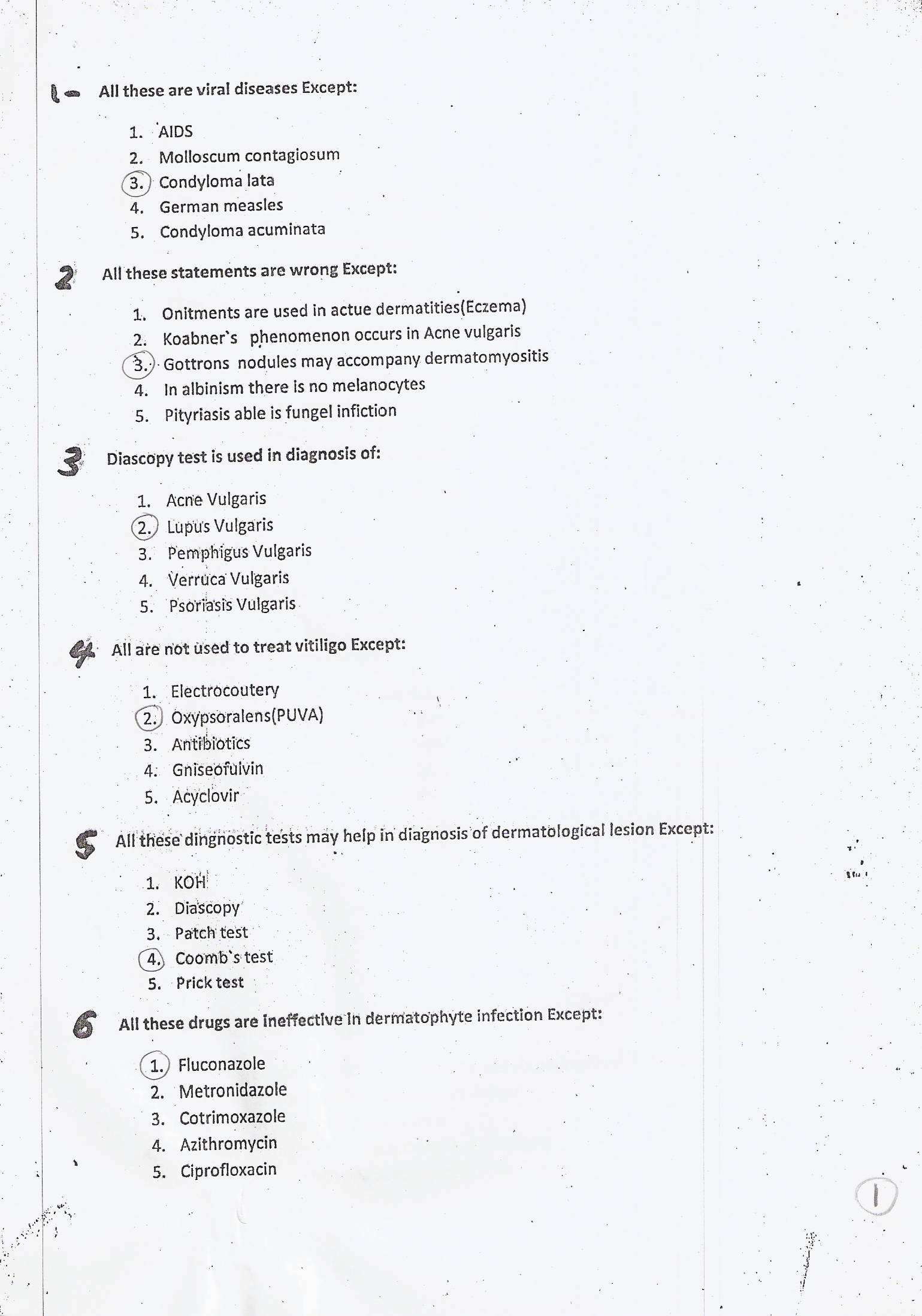
1. **All these statements are true except:**
2. Chancre is usually solitary but may be multiple.
3. The mite demodexfollicularum of hair follicle may cause rosacea .
4. Venous=stasis eczema affects the lower limbs.
5. Shingles=herpes zoster patients may infect their children with chicken pox.
6. Exclamation mark hair is diagnostic of alopecia universalis. \*\*
7. **One of the following is true:**
8. Eczema is a dermatosis.
9. Halo nevus is pigmented nevus surrounded by depigmented area \*\*
10. Kerion and favus are due to bacteria.
11. Leishmaniasis,acsbies and pediculosis are not due to parasites.
12. Herpes zoster never causes disturbances inhearing and vision.
13. **all are incorrect except :**
14. scabies incognito is good treated scabies.
15. White heads are opened comedones
16. Aspirin ascaris, phirus pubis, scabies ,may cause generalized pruritus \*\*
17. Nystatin is ineffective in ttt of candidiasis=moniliasis
18. In ttt of pediculosiscorporis,no need to treat the clothes
19. **Regarding acne and rosacea, all are true except :**
20. In rosacea, no comedones
21. Tetracyclines are effectiivettt for both.
22. in rosacea,erythema,telangiectasia seen.
23. Stress doesnot affect them. \*\*
24. Intradermal injection of corticosteroids is used in ttt of cystic acne.
25. **Regarding dermatological therapy/all are true except :**
26. Benzyl benzoate is effective ttt of acne. \*\*
27. Fluconazole and ketoconazole are effective in ttt of onychomycosis.
28. ketoconazole is not used in ttt of scabies.
29. Antimonials are used in ttt of leishmaniasis.
30. Tetracyclines are effective in ttt of non specific urethritis-chlamydia-.
31. **All are true except :**
32. Ivermectin and ectomethrin are drugs used in ttt of scabies.
33. Diascopy reveals the apple jelly nodules of lupus erythematosus. \*\*
34. Chancre appears after 3 months of infection.
35. Erythemamultiforme 1ry lesion is iris lesion.
36. Patch test helps In diagnosis of contact dermatitis.
37. **All are untrue except :**
38. Lichen planus never affects scalp.
39. Sycosisbarbae accompanies anal pruritus.
40. Behcets disease ulcers is sexually transmitted.
41. Darkground microscopy helps in viewing treponema pallidum in syphilis. \*\*
42. Scutulum is 2ry lesion.favus
43. **Which is true :**
44. Chronic discoid l.e lesions never turns malignant.
45. 2-Chrinicdiscoudl.e. never turns into systemic l.e.
46. Hutchinsons teeth triad and teeth are manifestations ofchancroid.
47. Eczema and psoriasis are infectious diseases.
48. Atopic eczema is inherited allergy common in gaza strip.\*\*
49. **All are correct statements except :**
50. Lichen planus may affect m.m.
51. Scarring alopecia may occur 2ry to discoid l.e. ,favus ,burns radiodermatitis ,bcc and scc.
52. Differential diagnosis of vitiligo includes pityriasis alba, leprosy and others.
53. solar keratosis is benign lesion.\*\*
54. gels are used in hairy areas.
55. **Topicalttt of acne includes :**
56. Benzoyl peroxide 2-5 percent gel .
57. Retinoic acid derivatives.
58. All the above\*\*
59. None of the above
60. **All the following are true except:**
61. Heredity angioedema is best treated with fresh plasma.
62. Erythemanodosum may accompany ulcerative colitis ,leprosy,behcets disease and sarcoidosis.
63. Papularurticaria is never 2ry to insect bite. \*\*
64. Panniculitis is inflammation of subcutis,eg.erythemanodosum.
65. Polymorphism occurs in erythemamultiforme,scabies and chicken pox .
66. **One of the following is true:**
67. Myxedema and angioedema accompany heart failure.
68. Wheal in urticarialvasculitis remain less than 12 hours
69. Ranitidine and famotidine are contraindicated in tt of urticaria
70. Griseofulvin is effective ttt for yeast and cadida infection
71. Koebner phenomena occurs in psoriasis, plane warts , lichen planus \*\*
72. **Regarding allergic skin diseases all are true except :-**
73. Hand dermatitis may occur as an id eruption = dermatophytid , to tineapedis
74. Herpes simplex and mycoplasma pneumonia are the commonest causes of bullous erythema multiforme = stevens Johnson syndrome .
75. Lesions of atopic dermatitis in children appear on anticubital and popliteal skin.
76. Lichen simplex chronicus = neurodermatitis never appear on ankle and scrotal skin\*\*.
77. urticarial wheal is due to derma edema.
78. **All the following drugs may be effective tttforurticaria and angioedema except:**
79. Fresh plasma transfusion.
80. Danazol.
81. Famotidine
82. Codeine and aspirin. \*\*
83. Adrenaline.
84. **Which of the following is wrong:**
85. Scutulum=sulpher cup is not the 1ry lesion of kerion.
86. Carbuncle is multiple fused furuncles seen in diabetics.
87. Erysepelas is superficial infection than cellulitis.
88. Lupus vulgaris may cause lupus nephritis and albuminuria.\*\*
89. When urticaria stays more than one and half month its named chronic urticarial
90. **All the following may be manifestation of syphilis except :**
91. Sabre tibia.
92. Gumma.
93. Hutchinson triad=8th nerve deafness, interstitial keratitis and hutchinsons teeth.
94. Chancroid \*\*
95. Mouth eaten alopecia
96. **Which of the following is not true :**
97. herald paych=1ry lesion of pityriasisrosea.
98. Solar ,arsenical,radiation –keratosis- , cutaneous horn, bowens disease, mm-lichen planus,and chronic ulcers and or sinuses , are premalignant lesions of scc.
99. Darkground microscopy, vdrl and tpi - tests help in syphilis diagnosis.
100. 2ry stage syphilitic rash is always vesicular \*\*
101. acanthosis means hyperplacia of stratum malpighii
102. **Causes of proctitis include all the following except :-**
103. Condylomalata.
104. Condyloma acuminate=warts.
105. Chancre and mucous patches.
106. Candidiasis.
107. Trichotellomania. \*\*
108. **All these statements are incorrect except :-**
109. Patch is large papule.
110. Chanre is never found in extragenital areas.
111. in tineacapitis,tinea lesions may appear on face and neck. \*\*
112. Gonorrhea causes vulvovaginitis in adults and cervicitis in children.
113. tineapedis never causes tineacruris.
114. **Regarding skin disease therapy/All are true except :-**
115. Griseofulvin is ineffective in ttt of pityriasis versicolor and candidiasis.
116. Rifampicin and isoniazid are good ttt for lupus vulgaris.
117. Spectinomycin 2g=togamycin injected once is good ttt for gonorrhea.
118. prednisone is contraindicated in ttt of pustular psoriasis \*\*
119. Intradermal corticosteroids are indicated in ttt of alopecia areata ,cystic acne and discoid l.e.
120. **All these may cause sexually transmitted genital ulcer except :-**
121. 1ry syphilis=chancre
122. Chancroud=soft sore
123. Behcets disease.\*\*
124. Gumma.
125. Phirus=pediculosis pubis.
126. **All the following may be manifestations of aids except :-**
127. Oral hairy leukoplakia.
128. Kaposi sarcoma.
129. Multidermatomal herpes zoster.
130. delusions of parasitosis. \*\*
131. Oropharyngealcandidiasis.
132. **All these statements are true except :-**
133. Herald patch, comedone, iris lesion, wheal and scutulum=sulphur cup ,are 1ry skin lesions.
134. acyclovir is effective ttt for acarophobia.\*\*
135. Therapy of pediculosiscorporis is mainly laundering and ironing the clothes.
136. Herpes zosters complications, include, facial palsy and post herpetic neuralgia
137. Kaposi sarcoma may accompany aids and organ transplant
138. **All the following are precancerous lesions except :-**
139. Actinic keratosis=solar keratosis
140. Radiation keratosis ,leukoplakia,bowens disease
141. Pityriasis versicolor.\*\*
142. Chronic ulcers and sinuses
143. Chronic discoud lupus erythematosus, lupus vulgaris ,lichen planus of mm.
144. **Regarding chronic discoud lupus erythematosus all are true except :-**
145. Its papulosquamous disease.
146. On sun exposed areas and scalp.
147. May turn malignant.
148. 5 percent may progress to systemic l.e.
149. Intralesionalkorticosteroid is contraindicated in ttt. \*\*
150. **All These statements are true except:**
151. Epidermis is 0.1 mm thickness
152. Finger nails grow at a rate of 0.1 mm per day
153. Wheal is the primary lesion of Urticaria
154. comedone , herald patch , scutulum and burrow are secondary skin lesions\*\*
155. paste is cream and powder
156. **All are true regarding the skin except:**
157. It`s weight is about 16% of body weight
158. Apocrine sweat glands are found in pubic and uxillary areas
159. burrow=tunnel is seen in scabies
160. patch test helps in diagnosis of contact dermatitis
161. Erosion heals with scarring \*\*
162. **All the following are wrong except:-**
163. Koebner`s phenomena occurs in psoriasis , plane (flat) warts , vitiligo and lichen planes \*\*
164. plaque means large macule.
165. Herald patch and wheal are not primary lesions
166. Tzank`s smear helps in diagnosis of acne vulgaris
167. Diascopy helps in diagnosis of lupus erythematosis
168. **All these statements are incorrect except :-**
169. Iris lesion is the primary lesion of erythemanodosum
170. Patch is elevated skin lesion with warty surface
171. Stratum basale is the only dividing epidermal layer \*\*
172. Thicknest skin is of the eyelids and scrotum
173. Trichophytin test is used in diagnosis of viral diseases
174. **All the following are correct except :-**
175. Skin colour is determined by melanin carotene , vasculature and haemoglobin
176. Erector pilli and dartus muscles are skin muscles
177. scutulum , tunnel , comedone , herald patch, iris lesion and wael are primery skin lesions
178. Petichea are pinpoint haemorrhage into the skin
179. Skin helps in the synthesis of vitamin c \*\*
180. **All of the following are primary skin lesions except :**
181. Wheal
182. Papule
183. Vesicle
184. Scale and crust \*\*
185. Comedone
186. **All these statements are true except:-**
187. hair grows at a rate of 0.35 mm per day
188. Macule larger than 1cm in diameter is patch
189. Papules larger than 1 cm in diameter are weals \*\*
190. bulla is primary skin lesion
191. Ointment is used for chronic lichenified skin as in chronic eczema
192. **All the following are wrong except:-**
193. Tzank smears helps in diagnosis of tineacapitis
194. Woods light is helpful in diagnosis of herpes zoster(funga)
195. Cream is more greasy than ointment
196. Skin is most thin on soles and back.
197. angioedema affects eyelids,lips and penis.\*\*
198. **All are true except:-**
199. steroid acne is monomorphic, seen on chest.
200. in urticaria mast cell degranulation occurs and histamine liberated.
201. snake bite,nsaids causes direct release of histamine.
202. Tzank smear helps in diagnosis of herpes simplex.
203. ketoconazole is ineffective in ttt of seorrheic dermatitis.نيزورالشامبو \*\*
204. **All these statement are correct except:**
205. histamine causes vasodilatation and increased capillary permiability.
206. trichotillomania is neurotic excoriations. \*\*
207. Skin lesion in vitiligo is macule
208. Patch test helps in diagnosis of contact dermatitis
209. prick test may help in allergy diagnosis of urticaria
210. **All the following are not true except :**
211. Majochigranuloma is viral disease.fung
212. Kaposi varicilliform eruption is 2ry to fungal disease.
213. Gonorrhea is parasitic infestation.
214. Tinea and scabies incognito may occur if tinea or scabies are treated only by topical steroids \*\*
215. Cellulitis and erysipelas are precancerous.
216. **one of the following is not true :**
217. Eczema is a dermatitis.
218. Trychophyti n test and woods light help in diagnosis of ringworm infectins
219. Orf is viral infection common after aladha feast
220. Eczema herpeticum=Kaposi varicelliform eruption occurs after herpes simplex in pt. with atopic dermatitis
221. Congenital varicella syndrome occurs if a pregnant gets chicken pox two weeks before delivery \*\* (early during pregnancy (i.e., up to 20 weeks gestation)
222. **All the following are complications of viral skin diseases except :**
223. Erythemamultiforme and stevens Johnson syndrome =major e.m.
224. Pneumonia and encephalitis
225. Facial palsy
226. Majochigranuloma .\*\*
227. Disturbences in urination and defecation
228. **Some pathological terms :**
229. Lichenification :- thickening hyperpigmentation of skin and exaggeration of the skin markings.
230. Hyperkeratosis:- thickening of the horny cell layer with persistence of nuclei
231. Spongiosis :- extracellular oedema of the brickle cell layer
232. Dyskeratosis:- abnormal keratinisation of the horny cells
233. Acnthosis /hyperplasia of stratum malpighii
234. **All the following are true except:**
235. Ecthyma is crusted,deep seated impetigo, usually on legs
236. Nits diffes r from dandruff ,in, similar in shape ,equal in size,stuck to hair,not fall downon shoulders and shiny white.سيبان
237. Side effects of antihistamines,/xerostomia,blurred vision,sedation,tinnitus, as anticholinergic effects
238. Lupus vulgaris is type of lupus erythematosus.\*\*
239. Tineapedis commonly causes tineacruris.
240. **All are untrue except :**
241. Herpetic whitlow is due to human papilloma virus.
242. Cold dry skin is a sign of thyrotoxicosis.
243. Lupus vulgaris is diagnosed by woods light and never turns malignant.
244. hyperpigmentation is a sign of Addison disease. \*\*
245. ketoconazole,selenium sulfide ,zinc pyrithione , are contraindicated in ttt of pytryasisversicolor and pityriasiscapitis=seborrheic dermatitis.
246. **All these lesions heal with scar except:-**
247. Lupus vulgaris.
248. Ecthyma.
249. Erosion. \*\*
250. ulcer.
251. Chronic discoid lupus erythematosus.
252. **All these diseases are accompanied by fever except :**
253. Chicken pox.
254. Erysipelas.
255. Scarlet fever.
256. Kerion. \*\*
257. Acne fulminans.
258. **Regarding bacillary skin diseases, all are true except:-**
259. Lupus vulgaris may occur at sites of BCG vaccination.
260. Leonine facies may be a sign of lepromatous Leprosy.
261. Lupus vulgaris never heals with scar. \*\*
262. Lupus vulgaris is common on face and buttocks and diascopy test helps in its diagnosis.
263. tuberculosis, is considered a bacillary skin disease.
264. **Regarding an ulcer,all are true except :**
265. T.b. ulcer has undermined edge. True
266. Ecthyma , chancre, lupus vulgaris , bcc, are possible causes.
267. Heals without scar.
268. Tinea cruris heals without ulcer.
269. Scc (squamous cell carcinoma) has raised everted edge. True
270. **Common Cutaneous manifestation that may complicate diabetes mellitus include all the following except :**
271. Necrobiosis lipoidica diabeticorum
272. Vulvovaginal candidiasis.
273. Erythrasma.
274. Leprosy.
275. Carbuncle.
276. **Tick the correct statement :**
277. Post herpetic neuralgia follows chicken pox.\*\*
278. Glomuronephritis never complicates impetigo.
279. Erythema multiforme and stevens Johnson syndrome , Usually follows herpes simplex and mycoplasma infections.
280. Nasal and perineal carriage of staph. Aureus have no relation with recurrent furunculosis.
281. Erythematous lesion in the groin is nevercaused by tineacruris, erythrasma, intertrigo , or seborrheic dermatitis.
282. **All are true except :**
283. Pediculosiscorporis louse lives in clothes,that need to be boiled ironed and treated with pediculoside.
284. Norwegian scabies = crusted scabies, affects those with down syndrome andimmunosupressed, pts.
285. The main side effects of ketoconazole, is hepatitis.
286. Polymorphism is never a manifestation ofscabies or chicken pox.
287. Pretibialmyxedema may accompanythyrotoxicosis
288. **Tick the correct statement :**
289. Erythrasma is fungal infection. false
290. Tuberculin ,trychophytin, leishmanin, and lepromin , tests help dermatologist indiagnosis
291. Angioedema always follows heart and liver failure.
292. Complications of viral infections never include ataxia ,facial palsy ,blind eye ,pneumonia ,cancer cervix , Kaposi sarcoma , and oral hairy leukoplakia.
293. Aspermia means no sperms in ejaculate.\*\*
294. **All these statements are true except :**
295. Lichen planus ,pityriasis rosea ,psoriasis , discoid lupus ,2ry syphilis are papulo squamous diseases
296. Atopics are more liable to cataract ,recurrent herpes simplex and warts
297. Leishmaniasis is treated with antimonials,ketoconazole, metronidazole and i.l. steroids
298. Delusions of parasitosis is type of scabies caused by a parasite, named sarcoptes scabii .
299. Piebaldism pts, have white forelook
300. **All the following are true except :**
301. Albinism is congenital oculo- cutaneous disease,with normal melanocytes number, but no melanin.
302. Pityriasis alba affects mainly the face of prepubertal children ,as hypopigmented ,mild scaly patches.
303. Kaposi varicilliform eruption is eczema herpeticum, occurs in atopics with herpes simplex..
304. Onychophagia , occurs in too hungry people.
305. vulvar pruritus,carbuncle / are skin manifestations of d.m.
306. **All these statements are true except**
307. Puppp=pruritic urticarial papules and plaques of pregnancy
308. Dermatitis artefacta is a factitial dermatitis.
309. Lichen planus, never affects mucous membranes
310. Scutulum is the 1ry lesion of favus.
311. Skin in hyperthyroidism is warm and sweaty.
312. **All these statements are incorrect except :**
313. Herald patch is 1ry lesion of pityriasis rubra pilaris=prp
314. Vitiligo and piebaldism are acute skin diseases.
315. All warts including planter warts are painless.
316. Contact dermatitis is either 1ry irritant or allergic. \*\*
317. The mite demodex follicularum has no relation to rosacea .
318. **All the following are correct except :**
319. Skin colour is determined by melanin carotene , vasculature and haemoglobin
320. Tinea incognito is well treated tinea.
321. Kerion may be confused with abcess.
322. Petichea are pinpoint haemorrhage into the skin
323. Charcoal,cholestyramine,citrizine,chlorphen-eramine/are effectivettt for generalized itching.

**Extra 2**

1. **Epidermis included the follwing layers except :**
2. stratum corneum
3. Stratum lucidum
4. Stratum granulosum
5. Prickle – cell layer
6. Papillary layer \*\*
7. **The herpatic viruses affecting the skin include the following except :**
8. Cytomegalovivus ( CMV)
9. Varicell – zoster virus
10. Epstien – Barr virus
11. Herpes simplex
12. Verruca vulgaris \*\*
13. **Pityriasis versicolor may be caused by the following fungu**
14. Pityrosporum ovale \*\*
15. Candida albicans
16. Tricrophyton rubrum
17. Microsporum canis
18. Epidermophyton floccsum
19. **Herald patch may be found in the following disease :**
20. Pityriasis rosea \*\*
21. Pityriasis rotuna
22. Pityriasis versicolor
23. Pityriasis lichenoides chronica
24. Psoriasis vulgaris
25. **Acneiformic lesion may caused by the following drugs except :**
26. Phenytion
27. Rifampicine
28. Quinine
29. Spironolactone \*\*
30. Isoniazide
31. **Which of the following are second generation non – sedating antihisamines :**
32. Promethazine
33. Hydroxyzine
34. Astemizol
35. Loratidine \*\*
36. Chlorphineramine maleate
37. **Scarring Alopecea may result from the following diseases except :**
38. Discoid Lupus
39. Sarcoidosis
40. Lichen planus
41. Alopecia areata
42. Cyclophosphamide therapy \*\*
43. **Skin diseases associated with diabetes mellitus include the following except :**
44. xanthoma diabeticorum
45. Generalized pruritus \*\*
46. Acute dermatophytosis
47. Hyperhidrosis
48. Recurrent staphylococcal infection
49. **Blistering lesions of the mouth may be a result of the following diseases :**
50. pemphigoid
51. erythema multiforme
52. dermatitis herpetiformis
53. lupus vulgaris \*\*
54. lichen planus
55. **the major criteria for diagnosis for dagnosis of Behcets disease include the following except :**
56. Oral ulceration
57. Cardiopulmonary lesions \*\*
58. Genital ulceration
59. Eye lesions
60. Skin lesion
61. **62- year old man with gastric cancer presents with vel vety brown thickened skin of the body folds, this is called**
62. lichen planus
63. erythema nodosum
64. erythema multiforme
65. acantosis nigricans \*\*
66. erythema chronicum migrans
67. **Rose spots ( small, pale red, blanching macules on chest and abdomen ) are associated with :**
68. Typhoid fever \*\*
69. Hodgkin’s lymphoma
70. Nonhodgkin’s lymphoma
71. Infectious monomucleosis
72. Chicken pox
73. **Primary prevention of melanoma includes which one of the following factors**
74. Limiting exposure to sunlight and using sunscreen \*\*
75. Routinely performing total skin examinations
76. Performing biopsies on suspicious lesions
77. Performing wide local excisions on all proven melanomas
78. Adjuvant treatment with interferon for proven melanomas
79. **Human herpsesviruses that affect the eye include all of the following except :**
80. Human immunodeficiency virus 1
81. Cytomegaloviurs
82. Herpes simplex types 1 and 2
83. Epstein –Barr virus \*\*
84. Varicella-Zoter virus
85. **Candida albicans is not a member of normal flora of the**
86. Month
87. Phyrynx
88. Urinary bladder \*\*
89. Vagine
90. Colon
91. **Mast cells of man contain**
92. Bradikinin
93. Serotonin
94. Histamine \*\*
95. Angiotensin
96. Hyaluronidase
97. **Hair loss many be caused by all of the following drugs except**
98. Heparin
99. Retinoids
100. Contraceptive pills
101. Phyenytoins \*\*
102. Cyclophosphamide
103. **Lesions of scabies are least expected :**
104. Around the wrist
105. On the mid-back \*\*
106. On anterior axillary folds
107. On male genitalia
108. On buttocks
109. **The treatment of penicllinase – Prodcing strains of N. Gonorrhoea is :**
110. Ampicillin 3.5gr. orally + Ig of Probenicd
111. Tetracycline 0.5gr every 6 hours for 5 days
112. Erythromycin 6.5 gr every 6 hours for 5 days
113. Spectinomycin 2g. I.M \*\*
114. Sulfanilamides
115. **The major criteria of Beheet disease are the followings except :**
116. Oral ulcers
117. Thrombophlebitis \*\*
118. Genital ulcers
119. Uveitis
120. Skin maifestatrons
121. **The most appropriate inifial treatment of trigeminal neuralgia is**
122. Phenytoin
123. Carbamazepine ( tegratol) \*\*
124. Percutaneous radiofrequency
125. Surgical exploration and decompression
126. Biofeedback therapy
127. **Which one of the topical antifungal agents listed below is effective against**

**infection with candida albicans**

1. Undecylenic acid ( desenex)
2. Tolnaftate ( tinactin)
3. Griseofulvin (fulvicin)
4. Naftifine ( naftin)
5. Ketoconazole (nizoral) \*\*
6. **For sunscreen agents to be most effective they should:**
7. Have a sun protective factor greater than 10
8. Be applied on exposure to sun
9. Be reapplied after swimming \*\*
10. None of the above



**EXTRA 3**

