

رَوح

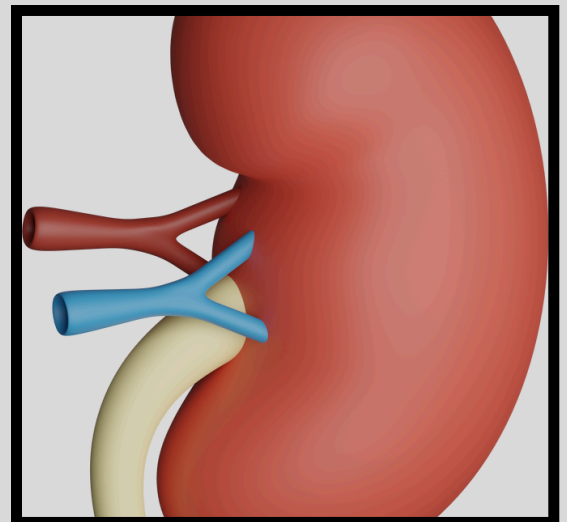
Urogenital system Final

Done By:

Hiba Makkawi

Designed By :

Fatima Attawi



Embryology LECTURE 1-

1)obstruction of the ureter.?

- A)postcoval ureter**
- B)Unilateral double kidneys with one ureter.**
- C)Bifid ureter with one kidney**
- D)Unilateral double kidneys double ureters**
- E) Double ureters with Single kidney**

Ans:E

2) Aberrant renal artery?

- A)a persistent artery during its ascent enter through medial border**
- B)a persistent artery during its ascent enter through hilum**
- C)a persistent artery during its ascent enter through lower pole**
- D)a persistent artery during its ascent enter through upper pole**
- E) a persistent artery during its ascent enter through lateral border**

Ans: B

-LECTURE 2-

Dangerous subtype of hypospadiasis ?

- A)complete**
- B)scrotal**
- C)penile**
- D)penopubic**

Ans: D

-LECTURE 3-

Primitive sex cell from ?

- A)mesoderm**
- B)genital ridge**
- C)yolk sac endoderm**

Ans:C

LECTURE 4-

uterus didelphys?

- A) failure of fusion of paramesonephric ducts**
- B) one paramesonephric duct failed to develop**

Ans: A

Mayer-Rokitansky-Kuster-Hauser Syndrome:

- A) Absent uterus/vagina**
- B) double uterus/ one vagina**

Ans: A

All true except :

- A) Milk release can be blocked by hypothalamic activity .**
- B) milk formation is under effect of progesteron and estrogen .**
- C) lactation is maintained sucking**
- D) Lactation is ceased by damage of anterior pituitary.**
- E) Milk ejection is ceased by damage in hypothalamus.**

Ans: B

****1)One is true about Papillary Renal Cell Carcinomas:**

- A)accounts 60%**
- B)abnormality on chromosome 3**
- C)mutation in FLCN gene**
- D)abnormal growth in the proximal tubular epithelial cell precursors of papillary carcinomas.**

:Ans

2)Diagnostic features for Rapid progressive GN ?

- A)Crescentric**
- B)pyuria**
- C)necrosis**

Ans:C

****3) Lamination and splitting of BM in GBM seen in?**

- A) dense deposit**
- B) Alport syndrome**
- C) IgA nephropathy**

:Ans

4) 4 year child with a sore throat infection followed by hematuria for 2 days then disappear, mother has told the doctor that he had a sore throat infection previously with the same symptoms, what your diagnosis?

- A) post infectious GN**
- B) IgA nephropathy**
- C) membranoproliferative**
- D) Alport syndrome**

Ans: A

****5) Ampicillin with eosinophilia seen in?**

- A) tubular necrosis**
- B) tubular ischemia**
- C) interstitial nephritis**
- D) post infectious GN**

Ans: C

6) one is false about prostate cancer?

- A) The prognosis after radical prostatectomy is based on the clinical stage**
- B) Gleason grade (grading system on the basis of glandular patterns of differentiation)**
- C) serum level of PSA most commonly wide screening test**
- D) it's bone producing mets**
- E) Cancer of the prostate doesn't develop in males castrated before puberty.**

Ans: A

****7) testicular burden tumor ?**

- A) AFB**
- B) B-hcG**
- C) LDH**

Ans: A

****8) false about seminoma**

- A) benign before puberty**
- B) glycogen-rich cytoplasm, round nuclei, and conspicuous nucleoli.**
- C) MET germinomas in CNS**
- D) release Bhcg**

:Ans

9) female with lower abdominal pain for 3 years, bimanual test for her condition (no discharge - Pap smear normal) laparoscopy obtain for her, report brownish nodular mass 0.5-2 cm in serosal surface of endometrium, fallopian tube and appendix, what the type of cell in this lesion ?

- A) endometrial gland and stroma**
- B) mesothelial cell**
- C) endometrial polyps**

Ans: A

10) Not risk factor for developing breast cancer ?

- A) First Degree relative**
- B) non hispanic white ethnicity**
- C) Age at Menarche younger than 11**
- D) First Live birth younger than 20**

Ans: D

****11)One is wrong about extrammary paget disease in breast ?**

- A)Rare manifestation of breast cancer**
- B)presents as a unilateral**
- C)preMalignant cells, referred to as Paget cells and are found scattered ion the epidermis**
- D) Palpable mass is present in 50 to 60% of women with Paget disease indicating an underlying invasive carcino**

:Ans

1)about mammary gland,one is false ?

- A)milk formation affect by hypothalamic activity**
- B)progesterone and estrogen affect milk formation**
- C)milk formation caseas by ant pituitary destruction**
- D)milk formation caseas by post pituitary destruction**
- E)suckling reflux induce milk formation**

Ans:D

2)about fertilisation, one is false :

- A)occur at outer third of fallopian tube**
- B)after ovulation 2-5 day**
- C)before implantion 5-7 days occurs**
- D) HCG release within two week**

Ans:B

3)Testosterone do all of above , except ?

- A)body hair growth**
- B)scalp hair growth**
- C)increase muscle mass**
- D)male sex characters**

Ans: B

4)About urea clearance , one is true ?

- A)about 140ml/min**
- B)reabsorbed partially by renal tubules**
- C)nether reabsorbed or secreted**
- D)amount excreted in urine more than filtrate**

Ans:B

All of the following comes with PCOS except:

- A) obesity**
- B) hirsutism**
- C) cease menses for >3 months**

Ans: C

1) One of the following is incorrect :

- a) filtration coefficient (Kf)= GFR/mmHg of NFP**
- b) NFP = 20 mmHg**
- c) GFR is directly proportional to NFP**
- d) NFP is driving force for glomerular filtration**
- e) hydrostatic Glomerular capillary p. = about 60 mmHg**

Ans:B

Which is CORRECT treatment for PID in Gonorrheal infection

- A) Single dose of ceftriaxone 250 mg IM.+ Doxycycline 100 mg orally twice daily for 10 days**
- B) Single dose of ceftriaxone 1 g IM. +Azithromycin 1 g PO with saline irrigation+Topical antibiotic solution**
- C) Single dose of ceftriaxone 2 g IM+Doxycycline 100 mg orally twice daily for 14 days+With or without Metronidazole 500 mg PO twice daily for 14 days**
- D) Ceftriaxone 1 g IM/IV every 24 hours+Single dose of azithromycin 1 g PO**
- E) Ceftriaxone or cefotaxime (IM) PLUS Azithromycin 1g orally in a single dose**

Ans:C

2) One of the following is true about Glomerular Filtration :

- a) last step in urine formation
- b) its membrane has positive electrical charges
- c) molecules with a diameter less than 4 nm are freely filtered
- d) Filtration fraction = portion of the cardiac output that passes through the kidneys

Ans: C

1) all of the following decreases GFR , except:

- a) VC of afferent arteriole
- b) VD of efferent arteriole
- c) increased glomerular capillary pressure
- d) decreased glomerular capillary permeability

Ans:C

1)The function of Müllerian inhibiting factor that releases from sertoli cells :

- a) convert Müllerian duct into wolffian duct
- b) gets rid of Müllerian duct by apoptosis

Ans:B

-LECTURE 4-

1) one is true about urea clearance :

- a) freely filtered in glomeruli and is neither reabsorbed nor secreted
- b) Freely filtered and partially reabsorbed and not secreted
- c) Urea CL. is normally about 140 ml/minute
- d) amount excreted in urine > the amount filtered

Ans: B

-LECTURE 5-

1) One of the following is correct about vasa recta :

- a) very high renal blood flow
- b) blood osmotic concentration higher to 1200 mOsmole/L at the tips of vasa recta
- c) water reabsorbed into the MI while solutes are removed from it
- d) The vasa recta function as a countercurrent multiplier
- e) responsible for producing graded hyperosmolality in MI

Ans:B

Artery doesn't enter pelvic:

- A) Testicular Artery**
- B) median sacral**
- C) internal iliac**
- D) superior rectal**

ans: A

All of the following true about seminoma except:

- A) pre-pubertal benign course**
- B) glycogen rich**
- C) third decade of life**

ans: A

Pharma LECTURE1-

1) Dose adjustment according to therapeutic index , one is false ?

- A) wide therapeutic index—>have only modest impact**
- B) narrow therapeutic index—>estimate renal function**
- C) moderate therapeutic index —>estimate renal function**
- D) narrow therapeutic index —>dosed using robust biomarker**

Ans: C

2) all therapeutic and preventive strategies when using methotrexate in AKI, one is false ?

- A) IV fluid with methotrexate to prevent crystalluria**
- B) thiosulfate with methotrexate to prevent crystaluria**
- C) alkalize urine**
- D) Glucarbidade with methotrexate**

Ans: B

-LECTURE2

loop diuretics not interact with?

- A) ACEI**
- B) cardiac glycosides**
- C) sulfonurya**
- D) NSAID**

Ans: C

-LECTURE 3-

1)Not of uses of androgen therapy ?

- A)treatment osteoporosis in male**
- B)hereditary anginuritic edema**
- C)male infertility**
- D)anemia**

Ans:C

-LECTURE4-

"1)all uses of estrogen except?

- A)Primary ovarian failure**
- B)Secondary ovarian failure**
- C)contraception**
- D)prostate cancer**
- E)breast cancer**

Ans:E

2) Mifepristone?

- A)anti-progestin**
- B)anti-estrogen**
- C)anti-progestin and estrogen**

Ans: A

3)adverse effect of contraceptives pill,except ?

- A)edema**
- B)weight gain**
- C)thromboembolism**
- D)nausea,vomiting**
- E)endometriosis**

Ans:E

-LECTURE 5-

1)pregnant women (at 39 week),what drug orally used for repning and softening the cervix?

- A)dinoprostone**
- B)misoprostol**
- C)gemoprost**
- D)dinoprost**

Ans :B

2)pregnant women(at 37 week),she has uterine contraction , the doctor advices her to use warm towels to relax.. she comes after complaining that her uterus still contracts, what the best drug for her condition?

- A)Atosiban**
- B)Ritodrine**
- C)pitocin**

Ans: B

LECTURE 6-

Treatment for pelvic inflammatory disease due to genoerhea ?

- A) Single dose of ceftriaxone 2 g IM+Doxycycline 100 mg orally twice**
- B) daily for 14 days+With or without Metronidazole 500 mg PO**
- twice daily for 14 days**

Ans: B

Microbiology

-LECTURE 1-

Schisitomoa heamatobium , causes all except?

- A)Anemia**
- B)belpharitis**
- C)bladder cancer**

Ans: B

-LECTURE 2-

1) treatment of scabies ?

- A) prezquntal**
- B) metrandazole**
- C) yellow mercury**
- D) 5% sulfur ointment**

Ans: D

2) about candida all true except?

- A) gram positive**
- B) ferment all sugar and produce gas and acid**
- C) treated by flucanzole**
- D) produce whitish, malodorous thick vaginal discharge.**
- E) Itching, swelling, and redness of the glans penis**

Ans: B

-LECTURE 3-

1) Asymptomatic bacteriuria (ASB)?

- A) > 100,000 CFU/mL in at least two voided urine**
- B) > 100,000 CFU/mL in at least one voided urine**
- C) > 10,000 CFU/mL in at least two voided urine**
- D) > 100,000 CFU/mL in at least one voided urine**
- E) none of the Above**

Ans: C

2) all cause UTI except ?

- A) e.coli**
- B) staph aureus**
- C) klabssile pneumonia**
- D) mirbalis**
- E) S. saprophyticus**

Ans: B

-LECTURE4-

Preferred test for diagnosis chlamydia ?

- A) Nucleic Acid Amplification Test, vaginal swab**
- B) direct aminoflourcane , cervial swab**

Ans: A

One is false about Gardenlla ?

- A) gram variable rods**
- B) produced by decrease in lactobacilis**
- C) commonly produce symptoms**
- D) it's from vaginal flora**
- E) the most common pathogen for Bacterial vaginosis**

Ans: C

-LECTURE 5-

Male gonorrhoea initially acute infections?

- A) 95**
- B) 70**
- C) 25**

Ans: A

-LECTURE 6-

Only phase can be detected from serology and asymptomatic in syphilis?

- A) primary**
- B) secondary**
- C) early latent**
- D) late latent**
- E) tertiary**

Ans: D

LECTURE 7-

HIV affinity to ?

- A) CD8
- B) CD4
- C) Toll like receptor

Ans: B

-LECTURE 8-

Most common pathogen induce genital herpes ?

- A) HSV1
- B) HSV2
- C) HIV
- D) HPV

Ans: B

Acid urine // Ca oxalate

-wrong about Filtration coefficient?

Measure COP?

Lecsh -nyhan syndrome // HGPRT

Lat Latent / A symptomatic + having serologic.

Scabies / sulfa ointment

obstruction of ureter // post caval

wrong about ureter // fibrous tube

renal vein // gonadal

renal vein drain to // IVC

mesosalpinx // uterine tube

inf reveal Artery cross ischiocavernosus muscle