

Internal Medicine

REVISION NOTES

CHEST:-

Pneumonia

- Classification of pneumonia.
- Outline the management of staph pneumonia.
- C/P& diagnosis of Rt. Upper lobe pneumonia.
- What is pneumonia; enumerate the causes & investigation for diagnosis.

Pulmonary T.B.

- C/P of Rt. Upper lobe fibrocavitary T.B.
- TTT of recently discovered fibrocavitary T.B.
- C/P Diagnosis, ttt of Rt. Pulmonary fibrocavitary T.B.
- C/P, Diagnosis, ttt of acute military T.B.
- Management of patient has active fibrocavitary pulmonary T.B.
- C/P diagnosis, D.D; of pulmonary T.B.
- Outline in short ttt of pulmonary T.B.
- Complications of T.B. with anti- T.B. drugs.
- TTT of pulmonary T.B.

Suppurative lung syndrome

*Diagnosis & ttt of bronchiectasis.

- C/P & ttt of bronchiectasis .
- C/P diagnosis of lung abscess .

Interstitial pulmonary fibrosis & hypersensitivity pneumonitis.

- Pulmonary Function test in I.P.F.
- Aetiology, C/P, pulmonary function test of allergic alveolitis.
- Causes & meanin of interstitial lung diseases.

Bronchial asthma

- TTT of acute severe bronchial asthma.
- Diagnosis & D.D of acute severe bronchial asthma.
- Diagnosis, complication & ttt of acute severe bronchial asthma.
- TTT in stepwise approach to long- term management of B.A.
- TTT of Bronchial asthma .
- Management of acute attack of B.A. & its complications .

- Diagnosis & management of bronchial asthma .

C.O.P.D.

- Pulmonary function abnormalities of C.O.P.D.
- What is chronic bronchitis ; discuss causes, investigations&treatment.

Bronchial carcinoma & adenoma

- Types , C/P, diagnosis & treatment of bronchial adenoma.
- Describe the paraneoplastic syndrome.
- C/P, diagnosis & management of carcinoma arising at the left main bronchus.
- Discuss in short investigation for diagnosis of bronchial carcinoma & enumerate the non-metastatic extra pulmonary manifestations .
- Important investigations of lung cancer & lines of treatment.
- C/ P of bronchial carcinoma.

Pleural disorders

- C/P & Treatment of tension pneumothorax.
- How can you reach the etiological diagnosis of RT. Pleural effusion.
- Causes, C/P & treatment of tension pneumothorax .
- Causes, Diagnosis, treatment, of pleurisy with pleural effusion.
- Causes of pleural effusion .
- C/P, & causes of pleural effusion.

Mediastinum

- Definition, C/P, diagnosis of mediastinal syndrome.

Vesicular lung disease

- Outline the different clinical presentation of pulmonary embolism.
- Definition, aetiology & C/P of core pulmonale.
- Complication of pulmonary embolization.

Respiratory failure

- Types of R.F & blood gases pattern in each type.
- Causes & pattern of type I respiratory failure.

Miscellaneous.

- Causes, C/P& diagnosis of fibro cavitory lesion affecting the upper lobe of the R.T.lung.
- Pulmonary manifestations of collagen diseases.
- Enumerate some causes of hypercapnia, hypoxemia. & Haemoptysis.
- Discuss the drug induced lung disease.
- Give common diagnostic for :-

a- T.B

b- bronchial carcinoma.

c- pulmonary embolism.

- Discuss the diagnosis of illness over the RT. Base of the chest .

Diseases of the liver

Liver cirrhosis

- Complications of liver cirrhosis.
- Causes of liver cirrhosis.
- Causes & complications of liver cirrhosis.

Jaundice

- 2 Causes of bleeding tendency in each type of jaundice.
- Causes of jaundice.
- Give causes of intrahepatic cholestasis & its clinical picture.

Chronic hepatitis

- Diagnostic criteria of chronic hepatitis.
- C/P of autoimmune chronic Active hepatitis & diagnostic tests.
- Diagnosis & ttt of chronic viral hepatitis.

Asute viral hepatitis

- Tabulate the differences between oral & parenteral hepatitis.
- Management of acute viral hepatitis.
- Clinical course of acute viral hepatitis type (B).
- Clinical stages of acute hepatitis & lab. Diagnosis for each type.
- Hepatitis markers.

Parasitic diseases of the liver

- Clinical picture & management of amoebic liver abscess.
- C/P, investigation & drug therapy of acute amoebic liver abscess.
- Diagnosis of hepatosplenic schistosomiasis.
- Oral anti- bilharzial drugs.

Liver failure

- C/P & management of hepatic encephalopathy.
- Neurological manifestations of hepatocellular failure.
- Discuss the ttt of hepatic coma.
- Criteria of hepatocellular failure (no details or explanation).

Ascites

- Mention the common causes of ascites & their diagnostic investigations.
- Diagnostic criteria of T.B. ascites.
- Differential points between ascites in liver cirrhosis & malignancy.
- Causes & laboratory diagnosis of ascites.
- Causes, diagnosis & ttt of ascites.
- D.D. of malignant ascites.

Portal hypertension & bleeding varices

- Management of bleeding esophageal varices.

Diseases of gastrointestinal tract

Gastrointestinal symptoms

Causes & complications of vomiting.

Gastrointestinal bleeding

- Mention causes of upper gastrointestinal bleeding & describe ttt of the commonest causes.
- Causes & management of upper G.I.T. bleeding.
- How to deal with a case of haematemesis.

Diarrhea

- Causes & diagnosis of bloody diarrhea.
- Causes of chronic diarrhea.
- 4 causes of bloody diarrhea & their related investigations.
- Small intestinal causes of chronic diarrhea.

Peptic ulcer

- Medical ttt of peptic ulcer.

Enterocolitis

- Give 2 clinical sympt & investing of T.B enteritis.
- Management of amebic colitis.
- Differential points between amoebic & bacillary dysentery.
- Tuberculous enterocolitis & its D.D.
- Amoebic colitis.
- Tabulate the important finding in colitis.

Treatment of Intestinal parasites

*Mention 2 drugs used for ttt of :- S.mansoni, brucellosis, acute amoebic dysentery.

*Drug treatment of bilharzial haematobium, G.lambliia , Anclystoma duodenale .

Disorders of pancreas

Clinical manifestations of acute pancreatitis.

Splenomegaly

Causes of splenomegaly .How can u diagnose huge splenomegaly.

Fevers & infectious diseases

Typhoid fever

- Mention 3 investigations for typhoid fever.
- TTT & complications of typhoid fever.
- Causes , diagnosis & TTT of typhoid fever.

Miscellaneous

- Define pyrexia of unknown origin & give 4 important causes.
 - Causes of fever with jaundice.
 - Causes of fever coma.
 - Causes of P.U.O (Pyrexia of unknown origin).
 - Give causes of fever with skin rash & fever with sweating.
 - What are the B- lactam antibiotics & discuss the penicillin.
 - Macrolides (A.B)
 - Causes of liver with sore throat.
 - Types of penicillin & their therapeutic uses.
 - Value of W.B.C in fevers.
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Neurology

Neurogena bladder

- 2 manifestation of sensory atonic bladder.

Speech

- Define perceptive aphasia.

Hemiplegia

- 3 Important characteristic features of brain stem hemiplegia.
- 4 important characteristic features of cortical hemiplegia.
- Enumerate the commonest 3 causes of hemiplegia.

Stroke

- Three clinical characters of middle cerebral artery occlusion.
- 3 clinical manifestation of subarachnoid hemorrhage.

- Enumerate the important areas in the brain that suffer in cases of middle cerebral artery occlusion & 1 important clinical manifestations of each.
- Mention the 2 most important causes of subarachnoid he.
- Important investigations of acute cerebrovascular stroke.
- Causes & diagnosis of subarachnoid hemorrhage.

Headache

- 3 lines of ttt of migraine (2 for prophylaxis, 1 during attack) .
- Types of headache.
- C/P of different types of migraine.

Epilepsy

- 4 characteristic features of psychomotor epilepsy.
- Mention 3 types partial epilepsy.
- C/P of psychomotor epilepsy & 2 drug used in its ttt.
- Three characteristic features of motor Jacksonian fits.
- Clinical stages of ttt of focal epilepsy.
- Two lines of ttt of focal epilepsy.
- Two types of focal epilepsy.
- Two types of focal epilepsy & the most 2 important investig.
- TTT of generalized epilepsy (Grand mal) .
- Types of partial or focal epilepsies & give the C/P & ttt of Grand mal epilepsy .
- Types of focal epilepsy & C/P of Jacksonian fit.

Ataxia

- Three characteristic features of cerebellar ataxia.
- Five clinical manifestations of cerebellar ataxia.

Cerebral palsy

- Short account on cerebral palsy.

Extra pyramidal syndromes

- TTT of Parkinson's disease.
- Three characteristic features of rheumatic chorea.
- Three important characteristic features of Parkinson's diseases.
- Four of the most important clinical features of Parkinsonism.
- Two lines of ttt Parkinson's disease.
- C/P & ttt of paralysis agitans. (Parkinson's disease).
- Causes & ttt of parkinsonism.

- Aetiology & ttt of chorea.
. Causes & C/P of parkinsonism.
- D.D of the common 3 types of parkinsonism.

Infection

- Diagnosis & TTT of bacterial meningitis.
- Three Characteristic features of viral encephalitis.
- Three cardinal features of encephalitis.
- Four of the most important clinical features of parkinsonism.
- Two lines of ttt Parkinson's disease.
- C/P & ttt of paralysis agitans. (Parkinson's disease).
- C/P & ttt of rheumatic chorea.
- Causes & ttt of parkinsonism.
- Aetiology & ttt of chorea.
. causes & C/P of parkinsonism.
- D.D of the common 3 types of parkinsonism.

Infection

- Diagnosis & TTT of bacterial meningitis.
- Three characteristic features of viral encephalitis.
- Three cardinal features of encephalitis.
- Four of the most important clinical features of encephalitis.
- Laboratory investigation & ttt of acute purulent meningitis.
- Four important items in diagnosis of acute bacterial meningitis.
- Diagnosis of acute bacterial meningitis (clinical criteria, 2 important investigations.)

Paraplegia

- *Three characteristic features of spinal cord compression of dorsal segment number 1.
- Three differences between extramedullary & intramedullary lesion .
- Three clinical features of cauda equina lesion.
- Four important clinical features & four important causes of acute paraplegia.
- Four characteristic features of focal paraplegia at dorsal 10.
- Four clinical features of focal compressive paraplegia at thoracic segment_number 10 .
- Two important investigation of focal paraplegia at thoracic 10 cauda equina syndrome.
- C/P & diagnosis of spinal cord compression at C5.
- Causes of paraplegia.

Peripheral neuropathy

- Two characteristic clinical features of the following polyneuropathy :- Guillian barre, Diabetic, proximal m.atrophy , lead .
- C/P & ttt of post- infective polyneuropathy (Guillan Barre)
- Give four important causes of polyneuropathy.
- Mention four clinical manifestation of peripheral.
- Discuss infective polyneuropathy (Guillian barre synd .)

Demyelinating diseases

- Two important investigations & two important drugs used in management of multiple sclerosis.
- Four clinical presentation_of multiple sclerosis.

Muscle diseases & neuromuscular disorders

- Three characteristic features of Duschene myopathy.
- Two important investigations & two important drugs used for management of duschene myopathy.
- Four important items in ttt of myopathy.
- Two lines of ttt of myasthenia gravis.
- Duechenne muscular dystrophy .
- Enumerate muscle diseases give C/P of myotonia atrophica.

Miscellaneous

- Causes of muscle hypertrophy.
- Four causes iof wasting of small muscles of the hand.
- The most important investigation (only one) for :-
 - Bacterial meningitis . - Myopathy.
 - Intracranial tumor - Cauda equina lesion
- Causes of atrophy of the small muscles of the hand.

Psychiatry

Signs & symptoms

- Enumerate 4 disorders of thinking .
- Define :- hallucinations, O.C.D., panic disorders & delusions.

Anxiety disorders

- Four types of anxiety disorders.
- Two drugs used in anxiety.

- C/P & d.d of anxiety disorders.
- Discuss anxiety disorders.

Classification of psychiatric disorders

- Four differences between psychosis & neurosis.
- Differences between psychosis & neurosis & give examples.

Mood disorders

- Three symptoms of mania
- Four characteristic features of major depression .

Schizophrenia

- Three characteristic features of schizophrenia.
- Four side effects of major tranquilizers.
- Four types of schizophrenia.

Somatiform disorders

- Four characteristic features of conversion disorders.
- Discuss hysterical conversion reaction .

ECT

- Two complications of E.C.T.
- Four indications of E.C.T.

Drug dependence

*Two characteristic sympt. of

- Four diagnostic criteria of drug dependence.

Miscellaneous

- Four diagnostic criteria of mental retardation .
- Four models of doctor patient relationship.
- Three common types of personality disorders & discuss one of them.



September, 1998

Answer the following questions:

I-Mention three causes for each of the following:

- 1- Proteinuria.
- 2- Acquired bleeding tendency.
- 3- Unilateral lower limb oedema.
- 4- Central cyanosis.

II- Write down three diagnosis features for each of the following:

- 1- Pericarditis.
- 2- Hyperplenism.
- 3- Duodenal ulcer .
- 4- Diabetic ketoacidosis.
- 5- Acute Gouty Arthritis.

III- Mention three contraindications for prescribing the following drugs:

- 1- NSAD (nonsteroidal anti-inflammatory drugs).
- 2- Beta-blockers .
- 3- Digitalis.
- 4- Spironolactone.
- 5- Pyrazinamide.

VI- What are the normal values for the following in an adult:

- 1- Systemic blood pressure.
- 2- Heart rate .
- 3- Respiratory rate
- 4- Random blood glucose. 5- White cell count.

V- Mention three lines of treating the following diseases:

- 1- Duodenal ulcer.
- 2- Acute renal failure.
- 3- AF (atrial fibrillation)
- 4- Diabetic ketoacidosis .
- 5 - Rheumatoid arthritis.

VII- Mention three causes for each of the following:

- 1- Hyperkalemia.
- 2- Hypercalcemia.
- 3- Hyperuricemia .
- 4- Hypergammaglobulinemia.
- 5- Hyperthermia.

VIII- Write short notes on:

- 1- Causes and diagnosis of wasting (loss of weight).
 - 2- Treatment of aplastic anemia.
 - 3- Diagnosis of acromegaly.
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February 1999

Answer the following questions:

I- Give an account of the clinical presentations of:

- a) Acute Myocardial infarction.
- b) Chronic Renal failure.

II- Write down a short account on management of:

- a) An old patient with myxoedema.
- b) A pregnant woman (24 weeks) with systemic hypertension.
- c) A ten years old child with polyarthritis.

III- Give causes and diagnosis of:-

- a) Neutropenia.
- b) Megaloblastic anemia.
- c) Pericardial effusion.
- d) Hyperuricemia.

IV- Give an account of complication of the following diseases:

- a) Diabetes Mellitus.
- b) Peptic ulcer.

V- Write down two side effects each the following drugs:

- a) Amino glycosides
- b) Aspirin.
- c) Chloramphenicol.
- d) Beta .blockers.
- e) Tetracyclines.

VI- Give two indications for prescribing each of the following drugs:

- a) Penicillins
 - b) Oxygen therapy.
 - c) Verapamil.
 - d) Corticosteroids.
 - e) Anticoagulants.
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February 1999

Chest

- 1- Discuss diagnosis and treatment of bronchiectasis.
- 2- Discuss causes of pleural effusion.
- 3- Discuss treatment of bronchial asthma.

Tropical Medicine

- 1- Give an account on management of bleeding oesophageal varices.
- 2- Discuss causes and diagnosis of bloody diarrhea.
- 3- **Enumerate causes of :**
 - a) Fever with jaundice
 - b) Liver cirrhosis.

Neurology & psychiatry

- 1- Discuss clinical picture and treatment of paralysis agitans..
 - 2- Give an account on cauda equina syndrome.
 - 3- Discuss causes and diagnosis of subarachnoid hemorrhage.
 - 4- Discuss clinical types and differential diagnosis of anxiety disorders.
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September, 1999

Answer the following questions:

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- 1- **Give an account of diagnosis of the following:**
 - a) Nephrotic syndrome.
 - b) Apical diastolic murrain
 - c) Hypoglycemia.
- 2- **Give an account on the following of:**
 - a) Congestive heart failure.
 - b) Malabsorption syndrome.
 - c) Steroid therapy.
- 3- **How to manage a case of:**
 - a) Iron deficiency anemia.
 - b) Hyperpyrexia
 - c) Hypertensive crisis.
- 4- **Write short notes on causes and diagnosis of a case with:**
 - a) Medical Acute Abdomen.
 - b) Polyarthritis in a young patient.

November.1999

Neurology and psychiatry

Give short account on :

- 1- Important investigations of acute cerebrovascular stroke.
- 2- Clinical picture and investigation of the cauda equina syndrome .
- 3- Duchenne muscular dystrophy .
- 4- Clinical picture of schizophrenia.

Chest Diseases

Give short account on 3 of the following :

- 1- Clinical picture and diagnosis of right upper lobe pneumonia.
- 2- Treatment in stepwise approach to long term management of asthma .
- 3- Clinical presentation diagnosis and differential diagnosis of pulmonary TB.
- 4- Pulmonary manifestation of collagen diseases.

Tropical Medicine

Give short account on :

- 1- The clinical stages acute hepatitis and the laboratory diagnosis for each type.
 - 2- a) Small intestinal causes of chronic diarrhoea.
b) Clinical manifestation of acute pancreatitis .
 - 3- a) Diagnosis of hepato - splenic schistosomiasis.
b) Enumerate causes of fever with jaundice.
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May 2000

Answer the following questions:

- 1- Discuss the causes, diagnosis and treatment of pleurisy with effusion.
- 2- Diagnosis and treatment of acute severe bronchial asthma.
- 3- Management of patient has active fibro - cavitary pulmonary tuberculosis.
- 4- Discuss clinical manifestations and management of amoebic liver abscess.
- 5- Discuss causes and laboratory diagnosis of ascites.
- 6- a) Enumerate the neurological manifestations of hepatocellular failure.
b) Enumerate causes of fever with jaundice.
- 7- a) Enumerate the commonest three causes of hemiplegia.
b) Enumerate three causes of wasting of small muscles of the hand.
c) Enumerate two types of focal epilepsy and the most important

investigations (Two only).

- 8- a) Diagnosis of acute bacterial meningitis (Three clinical criteria and two important investigations).
b) Five clinical manifestations of cerebellar ataxia.
- 9- a) Treatment of Parkinson's disease.
b) Two important investigations of focal paraplegia at thoracic 10.
c) Two important manifestations of sensory atonic bladder.
- 10- a) Enumerate three common types of personality disorders and discuss on of them.
b) Enumerate three disorders of thinking.
c) Mention two common symptoms of conversion hysteria.

May 2000

Answer the following questions :

I- Write short notes on the complication of:

- 1- Systemic Hypertension.
- 2- Diabetes Mellitus.

II- Discuss the Differential diagnosis of the following:

- 1- Polyarthritis.
- 2- Generalized lymphadenopathy .

III - Give an account of diagnosis and treatment of:

- 1- Ulcerative colitis.
- 2- Acute Renal failure.

September, 2000

Multiple Choice questions:-

1- Recognized finding in myxoedema include:

- a) Puffiness of eyelids.
- b) Polycythaemia.
- c) Bradycardia.
- d) Weight gain.

2- Expected findings in cranial diabetes insipidus include:

- a) Polyuria.
- b) A sex - inked recessive mode of inheritance.
- c) Urine with low specific gravity .
- d) Hypotonic urine following the administration of desmopresin .

e) Hirsutism.

3- Recognized features of primary hyperparathyroidism include:

- a) Diarrhoea.
- b) Renal stones .
- c) Osteoporosis.
- d) Cataracts
- e) Peptic ulcer.

4- In diabetic ketoacidosis:

- a) Hypotonic fluid is the fluid replacement most often indicated.
- b) Large volumes of fluid may be needed.
- c) Precipitating episode may be a urinary tract infection.
- d) Abdominal pain may be a prominent symptom.
- e) Women are affected more often than men.

5- In isolated mitral stenosis:

- a) A third heart sound is displaced.
- b) Apex is left ventricular and displaced.
- c) History of rheumatic fever is obtained in 95% of cases.
- d) Infective endocarditis is a common complication.
- e) Women are affected more often than men.

6- Characteristic features of severe aortic stenosis are :

- a) Exertional syncope.
- b) Loud aortic second sound .
- c) Blood pressure 180/120 mmHg.
- d) Left ventricular hypertrophy in ECG.
- e) Short early diastolic murmur.

7- In acute myocardial infarction :

- a) Chest pain is typically epigastric .
- b) May be presented with severe mitral regurgitation.
- c) Creatine phosphokinase enzyme is maximally elevated after 3 hours.
- d) ECG may be normal .
- e) Intravenous morphine is contraindicated .

8- Right ventricular hypertrophy is a recognized finding in the following cardiac disorders:

- a) Tricuspid stenosis.
- b) Constrictive pericarditis.

- c) Cor -pulmonale .
- d) Atrial septal defect.
- e) Mitral stenosis.

9-The following drugs are used in acute gout:

- a) Indomethacin .
- b) Allopurional .
- c) Colchicine.
- d) Probenecid.
- e) Aspirin.

10-Regarding rheumatoid arthritis.

- a) It is common in men .
- b) Morning stiffness always present.
- c) Distal interphalangeal joints are involved.
- d) Symmetrical poly arthritis is present.
- e) Rheumatoid factor usually positive.

11- The following are clinical features of SLE:

- a) Depression
- b) Alopecia.
- c) Pleural effusions.
- d) Subcutaneous nodules.
- e) Butterfly nodules.

12- Iron therapy is not indicated in :

- a) Anaemia in patient with haematemesis.
- b) Anaemia in patient with bone marrow aplasia .
- c) Aneamia in patient with thalassemia.
- d) Perinicious anaemia after strat of specific therapy..
- e) Anaemia in patient with Ankylostomiasis..

13- Bone marrow transplantation used treatment of:

- a) Familial Mediterranean fever.
- b) Thalassemia major .
- c) Primary aplastic anaemia in 50 years old patient.
- d) Chronic myeloid leukaemia in 30 year old patient.
- e) Idiopathic thromboeytopenic purpura.

14- Management of acute leukaemia may include:

- a) A single cytotoxic agent.

- b) Splenectomy .
- c) Platelet concentrates to treat septicaemia.
- d) Radiation.
- e) Bone marrow transplantation.

15- The following can cause hyperkalaemia.

- a) A combination of potassium supplements & ACE inhibitors.
- b) Addison's diseases.
- c) Acute renal failure.
- d) Metabolic alkalosis.
- e) Secondary aldosteronism .

16- Recognized complication of the nephrotic syndrome include:

- a) Pleural effusion .
- b) Muscle wasting
- c) Hypoaldosteronism.
- d) An increased thrombotic tendency.
- e) Pneumococcal peritonitis.

17- Contributory factors to the anaemia of ch.R.F. Include

- a) Marrow suppression.
- b) Chronic blood loss.
- c) Decreased erythropoietin secretion.
- d) B deficiency .
- e) Haemolysis.

18- Regarding portal hypertensin:

- a) There is an increased risk of cerebral infarction.
- b) Ascites may occur.
- c) It is most commonly caused by cirrhosis.
- d) It leads to oesophageal varices.
- e) It is common in pregnancy.

19- The following are features of fulminant hepatic failure:

- a) Metabolic acidosis.
- b) Hyperglycaemia.
- c) It may be preceded by viral hepatitis.
- d) Disseminated intravascular coagulation.
- e) Hyperkalaemia.

20- The following are complication of a chronic duodenal ulcer:

- a) Malignant change.
- b) Hour-glass stomach.
- c) Pyloric stenosis.
- d) Haemorrhage.
- e) Erythema nodosum.

September, 2000

Answer the following questions:

1- Give an account of :

- a) The clinical features and management of acromegaly.
- b) Hypoglycaemia, clinical picture, and treatment.

2- Give a short account on :

- a) Investigations of cases with purpura.
- b) Classification of causes of haemolytic anaemia.

3- Give an account on :

- a) Haematemesis, causes and treatment.
- b) Complication of liver cirrhosis.

4- Mention complication of :

- a) Myocardial infarction.
- b) Systemic hypertension.

5- Give short account on :

- a) Treatment of minimal Change glomerulonephritis.
- b) Causes of polyuria.

6- Give a short account on :

- a) The differential diagnosis of polyarthritis.

September, 2000

- 1- Clinical picture, diagnosis and treatment of acute miliary TB.
- 2- Definition, aetiology, clinical picture of cor pulmonale
- 3- Aetiology, clinical picture and pulmonary function tests of allergic alveolitis
- 4- Discuss the clinical manifestation, investigations and drug therapy of acute amoebic liver abscess.
- 5- a) Treatment of bleeding oesophageal varices.

October 2001

Chest Diseases

Answer the following question: -

- 1- Outline the different clinical presentation of pulmonary embolisms.
- 2- Clinical picture diagnosis and management of carcinoma arising at the left main bronchus.
- 3- A) Outline the pulmonary function abnormalities in COPD.
B) Outline the management of staph. Pneumonia.

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Tropical Medicine and Gastroenterology

Discuss the following:-

- 1- Causes and complication of vomiting.
- 2- Drug therapy of peptic ulcer.
- 3- Causes of chronic diarrhea.
- 4- Causes of fever with jaundice
- 5- Clinical course of acute viral hepatitis types (B).
- 6- Diagnosis criteria of tuberculous ascites.

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Neurology and Psychiatry

Give four important items for each of the following:

- a) Risk factors of stroke.
- b) Clinical presentations of parkinsonim .
- c) Clinical presentation of multiple sclerosis.
- d) Treatment of myasthenia gravis.
- e) Causes of polyneuropathy.
- f) Clinical stages of generalized convulsions (Tonic -clonic type).
- g) Diagnosis of acute bacterial meningitis.
- h) Diagnosis criteria of drug dependence.
- i) Disorder of thinking.

June, 2002

Answer the following question: -

- 1- Diagnosis, Complication and treatment of acute sever bronchial asthma.
- 2- Clinical picture, diagnosis and treatment of right pulmonairy fibro- cavitary tuberculosis.

3- Describe the following:

- a) Paramalignant syndrome.
 - b) Pulmonary function tests in the interstitial pulmonary fibosis.
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- 4- Enumerate causes of chronic diarrhea.
 - 5- Discuss diagnosis and treatment of typhoid fever.
 - 6- Mention complications of liver cirrhosis.
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7- a) Mention four differences between neurosis and psychosis.

- b) Four characteristic features of Major depression.

8 -a) Give short account on laboratory investigation and treatment of acute purulent meningitis.

- b) Three characteristic features of motor jacksonian fits.

9- Four characteristic features of:

- a) Parkinson's disease.
- b) Focal paraplegia at dorsal 10.

10- a) Three characteristic features of cerebellar ataxia. b) Clinical picture and treatment of

- b) post infective polyneuropathy (Guillain Barre)
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October 2002

Answer the following question: -

- 1- **A)** Discuss the diagnosis value of urine analysis.
B) Discuss causes, clinical picture and diagnosis of chronic pyelonephritis .
- 2- **A)** Give short account on differential diagnosis of monoarthritis .
B) Discuss the differential of arthritis with skin lesions.
- 3- Give short account on :
 - a) Diagnosis and treatment of congestive heart failure.
 - b) Causes of atrial fibrillation.
- 4- **a)** Discuss treatment of a diabetic patient aged above forty years.
b) Discuss clinical picture and management of hyperthyroidism.
- 5- **Give short account on :**

a) Ulcerative colitis.

b) Ascites.

6- Give short account on :

a) Diagnosis and treatment of megaloblastic anaemia.

b) Important steps in diagnosis of a case of purpura.

Neurology

1- a) Give two characteristic clinical features of the following polyneuropathy :

- Clinical Barre
- Diabetic
- Peroneal muscle atrophy
- Lead.

b) Give four important clinical features and four important causes of acute paraplegia.

2- A) Give the clinical picture of psychomotor Epilepsy and two important drugs used in its treatment.

B) Give two important investigations and two important Drugs used in management of:

- Multiple Sclerosis.
- Duchenn Myopathy.

3- A) Give the four important areas in the Brain that suffer in case of middle cerebral artery occlusion and one important clinical presentation for each area.

B) Give four of the most important clinical features of:

- Encephalitis
- Parkinsonism

4- Mention four * symptoms of Major depression

-Mention four * Types of schizophrenia

- Mention four *indications of ECT

-Mention four *Models of doctor - patient relationship

October 2002

Answer the following question: -

Chest Diseases

1- Types, clinical picture , diagnosis & treatment of bronchial adenomas

2- Causes, clinical picture & treatment of tension pneumothorax .

3- A) Treatment of recently discovered fibrotic Cavitary tuberculosis.

B) Pulmonary function abnormalities of C.O.P.D

Tropical Medicine and Gastroenterology

- 1- Medical treatment of peptic ulcer.
 - 2- Causes and diagnosis of bloody diarrhea.
 - 3- Drug treatment of :
 - a) Bilharzia haematobjum
 - b) Ancylostoma. Doudenal .
 - c) Giardia Lambia.
 - 4- Diagnosis criteria of hepatitis.
 - 5- Clinical manifestation and management of hepatic encephalopathy.
 - 6- Clinical manifestations, diagnosis and treatment of typhoid fever.
-

November 2002

- 1- The following are causes of acute dyspnea except.**
 - a) Foreign body inhalation.
 - b) Bronchial asthma
 - c) Pneumothorax
 - d) Pulmonary oedema.
 - e) Laryngeal oedema
- 2- The following are used in treatment of pulmonary oedema except**
 - a) Parental digoxin.
 - b) IV morphia.
 - c) Oral spironolacton.
 - d) Bloodless venesection
- 3-The following are contraindication of B- blockers.**
 - a) Heart failure.
 - b) Bradycardia.
 - c) Supraventricular tachycardia
 - d) Bronchial asthma.
 - e) Bundle branch block
- 4- Collapsing pulse is of the following except.**
 - a) Aortic regurgitation.
 - b) Mitral stenosis.
 - c) Constrictive pericarditis
 - d) Hypocalcaemia.
 - e) Hysterical

5- All are causes of polyuria except.

- a) Diabetes mellitus.
- b) Nephrogenic diabetes insipidus
- c) Chronic renal failure
- d) Hypocalcaemia.
- e) Hysterical

6- Characteristic finding of nephrotic syndrome

- a) Hypercalcaemia.
- b) Hypoalbuminaemia
- c) Proteinuria >3.5g/ day
- d) Hypochloestrolaemia.
- e) Generalized oedema.

7- The following are kidney function tests except.

- a) Serum creatinine
- b) Blood urea
- c) Complete urine analysis.
- d) Serum iron estimation
- e) Serum B₁₂

8- Causes of secondary hypertension include.

- a) Acromegaly.
- b) Addison's disease.
- c) Diabetes insipidus.
- d) Primary hyperaldosteronism (Conn's syndrome)
- e) Hyper thyroidism

9- The indication of temporary insulin therapy is

- a) Diabetic ketoacidosis .
- b) Pre and post operative period.
- c) Stress condition.
- d) Hypoglycemic.

10- Hypothyroidism may give rise to.

- a) Periorbital puffiness.
- b) Carpal tunnel syndrome.
- c) Cold intolerance.
- d) Increased sweating
- e) Polycythaemia.

11- The following are complications features in acromegaly.

- a) Hypoglycemia.
- b) Prognathism.
- c) Expansion of sella tursica.
- d) Hypocalcaemia.

12- The following are complications of blood transfusion except.

- a) Fever.
- b) Haemolysis.
- c) Hepatitis.
- d) Liver cell failure.
- e) Iecopenia.

13- The following are present in haemophilia.

- a) Deficiency of factor IX.
- b) Haemarthrosis.
- c) Fever.
- d) Predominat in females.
- e) Dominant hereditary disease.

14- The following are causes of iron deficiency anaemia except.

- a) Ankylostomiasis.
- b) Pregnancy and lactation
- c) Obesity
- d) Piles
- e) Haemolysis.

15- H. Pylori infection is associated with all of the following except.

- a) Oesophageal ulcer.
- b) Gastric ulcer.
- c) Duodenal ulcer.
- d) Gastric adenocarcinoma.
- e) Oesophageal varices.

16- Greater than normal levels of gastric acid secretion are associated with.

- a) GORD.
- b) Oesophageal & gastric varices.
- c) Gastric ulcer.
- d) Pernicious anaemia.
- e) Duodenal ulcer.

17- The following are recognized clinical of liver disease.

- a) Flapping tremors.
- b) Cyanosis.
- c) Gynaecomastia.
- d) Wasting
- e) Increased jugular venous pressure.

18- The following are features of rheumatoid arthritis

- a) Bilateral symmetrical affection of small joints of the hand.
- b) Positive rheumatoid factor.
- c) Subcutaneous nodules.
- d) Erythematous rash in the skin of the face.
- e) Photosensitivity.

19 - Side effects of non - steroidal anti- inflammatory drugs include.

- a) Gastritis.
- b) Nephropathy.
- c) Hepatitis
- d) Lower limb oedema
- e) Peripheral neuritis.

20- The following are features of SLE.

- a) Photosensitivity.
- b) Erythematous skin rash of the face.
- c) Renal affection is common.
- d) Fleeting arthritis.
- e) Positive antinuclear factor.

June 2003

Answer the following question: -

- 1- A) Three differences between extramedullary and intramedullary lesions.
B) Three cardinal features of encephalitis.
C) Mention three types of partial epilepsy.
D) Three clinical manifestations of subarachnoid hemorrhage.
- 2- A) Three clinical manifestations of cauda equina lesion.
B) Three important clinical manifestations of Rheumatic chorea.
C) Three lines for treatment of migraine (two for prophylaxis and one during the attack).

- D) Three cardinal features of Duchenne myopathy .
- 3- A) Two models of doctor - patient relationship.
- B) Four types of Anxiety Disorders.
- C) Three side effects of major tranquilizer.
- D) Three diagnosis criteria of mental retardation disorder.
- E) Three symptoms of mania.
- 4- Discuss: Diagnosis and treatment of angina pectoris.
- 5- Discuss: Pharmacologic and non pharmacologic treatment of heart failure.
- 6- Causes, clinical picture & diagnosis of fibro - cavillary lesion affecting the upper lobe of the right lung.
- 7- Definition, clinical picture and diagnosis of mediastinal syndrome.
- 8- A) Give an account on management of acute viral hepatitis.
- B) Mention common causes of ascites and their diagnosis investigations.
- 9- Give an account on:
 - A) Treatment and complications of typhoid fever.
 - B) Causes of fever with jaundice.

September 2003

Answer the following question: -

I- Cardiology:

- 1- Give short account on acute complication of myocardial infarction.
- 2- Give short account on secondary hypertension.

II- Respiratory:-

- 3-A) Causes and pattern of type I respiratory failure.
- B) Diagnosis and differential diagnosis of acute severe bronchial asthma.
- 4-A) How can you reach the aetiological diagnosis of Rt. Pleural effusion.
- B) Classification of pneumonia.

III- Neurology & psychiatry:

- 5- Give three important characteristic features for each of the following:
 - a) Brain stem hemiplegia .
 - b) Parkinson's diseases
 - c) Duchenne myopathy .
- 6- A) Three characteristic features of spinal cord compression at dorsal segment number
- B) Four characteristic of psychomotor epilepsy.
- C) Three characteristic features of viral encephalitis.

D) Definition of perceptive aphasia .

7- A) Four characteristic features of major depression.

B) Two complications of electroconvulsive therapy .

C) Four characteristic features of conversion hysteria (conversion disorder).

D) Three characteristic features of schizophrenia.

IV- Gastroenterology:

8- Mention causes of upper gastrointestinal bleeding and describe treatment of the commonest causes.

V- Infection:

9- Management of amebic colitis.

September 2003

Answer the following question: -

- 1-Describe the clinical features and treatment of adult myxoedema.
 - 2-Give an account on causes and diagnosis of hypoglycemia.
 - 3-Give an account on causes and clinical manifestations of acute renal failure.
 - 4-Discuss polyuria: causes & differential diagnosis.
 - 5-Give an account on diagnosis and treatment of acute leukaemia.
 - 6-Discuss diagnosis and treatment of haemophilia A
 - 7-Discuss differential diagnosis of polyarthritis.
 - 8-Give an account on treatment of gouty arthritis.
 - 9-Give short account on complications of liver cirrhosis.
 - 10- Discuss side effects of long term corticosteroids therapy.
-

February 2004

Give an account on :

- 1)a- Diagnosis of diabetes mellitus
b- Causes and diagnosis of hypothyroidism.
- 2)a- Causes and laboratory diagnosis of nephrotic syndrome
b- Clinical manifestations and treatment of acute glomerulonephritis.
- 3)a- Articular manifestation of rheumatoid arthritis
b- Management of systemic lupus erythematosus (SLE).
- 4)a-Treatment of disseminated intravascular coagulopathy .
b- Diagnosis and treatment of iron deficiency anemia .
- 5)a- Management of peptic ulcer disease.

- b- Pathogenesis of ascites in liver cirrhosis and its treatment .
- 6) Indications and side effects of corticosteroids.
-

February 2004

Answer the following question: -

- 1- Discuss the pharmacologic therapy of heart failure.
- 2- Discuss causes and diagnosis of secondary hypertension.
- 3- **A-** Clinical picture and treatment of tension pneumothorax.
B- Treatment of acute severe bronchial asthma.
- 4- **A-** Clinical picture of right upper lobe fibrocavitary - tuberculosis.
B- Types of respiratory failure and gases pattern in each types.
- 5- **A-** Give two clinical symptoms and two investigations of tuberculous enteritis.
B- Define pyrexia of unknown origin and give four important causes.
C- Mention three investigations for typhoid fever.
- 6- **A-** Tabulate differences between oral parenteral hepatitis.
B- Mention two drugs used for treatment of the following:
 - 1- Schistosoma mansoni.
 - 2- Brucellosis.
 - 3- Acute amoebic dysentery.
- 7- **A-** Characteristic four clinical stages of psychomotor epilepsy.
B- Causes of muscle hypertrophy.
C- Treatment of Parkinson's diseases.
- 8- **A-** Three clinical characters of middle cerebral artery occlusion.
B- Diagnosis and treatment of bacterial meningitis.
C- Three characteristic features of rheumatic chorea.
- 9- Mention two characteristic symptoms of :-
 - A-** Schizophrenia.
 - B-** Drug dependence.
 - C-** Mania.

September 2004

Give short account on the following:-

- 1- Causes and clinical features of hypokalaemia .
- 2- Complications of peritoneal and haemodialysis.
- 3- Clinical manifestation and treatment of diabetic nephropathy.

- 4- Chronic complication of diabetes mellitus.
- 5- Clinical features of acromegaly .
- 6- Investigations of cushing's disease.
- 7- Treatment of hepatic encephalopathy.
- 8- Causes of haematemesis.
- 9- Clinical manifestations of peptic ulcer disease
- 10- Extra - articular manifestations of rheumatoid arthritis.
- 11- Clinical manifestations of systemic lupus erythematosus..
- 12- Causes of osteoporosis.
- 13- Complications of isolated mitral stenosis .
- 14- Causes of secondary hypertension.
- 15- Clinical picture of a patient present with acute myocardial infarction.
- 16- Causes and treatment of atrial fibrillation.

September, 2004

Hematology and General Medicine

Give short account on the following:-

- 1- How to investigate a patient with bleeding tendency.
- 2- Enumerate causes of haemolytic anaemia.
- 3- Causes of leukemoid reaction.
- 4- Enumerate causes of hypotension.
- 5- Causes of medical acute abdomen.

=====

Tropical Medicine & Gastroenterology

- 1-a) Mention three disease that can be produced by Helicobacter pylori infection and three antibiotics used for its eradication.
 - b) Tabulate the difference between hepatitis B and hepatitis C.
 - c) Mention four common causes of pyrexia of unknown etiology .
- 2- a) Mention three complication of hepatosplenic schistosomiasis. And three investigations used for its diagnosis.
 - b) Give three common clinical features of acute brucellosis and three drugs used for its treatment.
 - c) Give four common clinical features of acute amoebic and two drugs used for its treatment.

Chest

- 1- Causes & blood gases pattern of type I respiratory failure.
- 2- Para malignant syndrome (just enumeration)
- 3- Clinical picture & treatment of miliary T.B.
- 4- Causes of haemoptysis.
- 5- Causes & diagnostic tests of C.O.P.D.
- 6- Clinical picture of staph. Pneumonia.

=====

Neurology & Psychiatry

1- Mention:

- a- characterisitic clinical features of three of partial or focal epilepsy .
- b- Enumerate three types of peripheral polyneuropathy presented. Mainly by motor manifestations, and another three types presented mainly by sensory manifestations.
- c- Three characteristic true localizing signs and symptoms of parietal lobe tumours.

2-Mention:

- a- Pattern of weakness of each of the following.
 - Duchenne Myopathy .
 - Middle cerebral artery occlusion
 - Cauda Equina Lesion.
- b- Characteristic features of involuntary movements for each of the following diseases :
 - * Parkinson's Disease
 - * Rheumatic Chorea
 - * Athetosis
 - * Dystonia
- c- **Two characteristic features for each of the following :**
 - Motor atonic bladder.
 - Cerebellar Ataxia.

3- Mention:

- a- Two side effects of:
 - Major tranquilizers
 - Tricyclic Antidepressants.
- b- Definition of:
 - Schizophrenia.
 - Phobia.
 - Euphoria.
- c- Two differences between suicide and parasuicide .

- d- Two clinical presentation of conversion disorders.
 - e- Two diagnostic feature of Addiction.
-

February 2005

Answer the following questions :

- 1) Give an account on management if hematemesis.
 - 2) Discuss autoimmune hepatitis.
 - 3) Discuss diagnosis and treatment of acute myocardial infarction
 - 4) Give an account on complication and treatment of systemic hypertension .
 - 5) Discuss the value of urine examination in different renal diseases.
 - 6) Causes and treatment of renal anemia.
 - 7) Describe the clinical picture and the management of acromegaly. .
 - 8) Discuss hypoglycemia.
 - 9) Discuss in short extra- articular manifestation of rheumatoid arthritis.
 - 10) Discuss clinical picture, diagnosis and treatment of systemic lupus erythematosus.
-

February 2005

Answer the following:

- 1- Discus investigations of a case with bleeding tendency
- 2- Write an account on clinical and, laboratory features of acute leukemia
- 3- Cardiac causes of syncope
- 4- Give an account on clinical picture of acute lobar pneumonia
- 5- Definition and causes of type II respiratory failure
- 6- a) Mention clinical features of bacilliary dysentery
 - b) Mention 4 common presentation of chronic hepatitis C and three investigations used its diagnosis
 - c) Give four complications of typhoid fever and three drugs used for its treatment
- 7- a) Mention 4 causes of febrile coma
 - b) Mention sequalae of acute type B hepatitis
 - c) Give an account on the clinical features of tetanus
- 8- a) One specific investigatory tool and one specific drug for diagnosis and treatment of each of the following

- Petit mal epilepsy - Multiple sclerosis
 - Myasthenia Gravis
 - b) Clinical picture of canus medullaris lesion
 - c) Clinical picture of frontal lobe tumours
- 9- a) Specific treatment of :
- Migraine - Myositis - Parkinson's disease
 - b) Four causes of wasting of small muscles of the hand
 - c) Four differences between cerebellar ataxia and sensory ataxia
- 10 - a) Three indications of electroconvulsive therapy (ECT) in schizophrenia

 - b) Clinical picture of anxiety disorders
 - c) Mention three different clinical types of attention deficit hyperactivity disorders (ADHD)
-

May 2006

Give short account on :

- (1) 1- Diagnosis and management of peptic ulcer.
 2- Portal hypertension.
 3- Bleeding per rectum.
 4- Types and causes of jaundice.
- (2) 1- Extra - articular manifestation of systemic lupus Erythematosus.
 2- Articular manifestations of Rheumatoid Arthritis.
 3- Differential diagnosis of arthritis.
 4- Management of Gout.
- (3) 1- Complications of mitral stenosis.
 2- Causes and treatment of left - sided heart failure.
 3- Clinical picture and diagnosis of angina.
 4- Diagnosis and treatment of a cardiac patient with infective endocarditis.
- (4) 1- Acute complication of diabetes mellitus.
 2- Management of type II diabetes mellitus.
 3- Clinical features and management of hypothyroidism.
 4- Clinical features of Addison's Disease.
- (5) 1- Types, indications and complications of dialysis.
 2- Polyuria.

May 2006

Give short account on:

- (1) 1- Laboratory diagnosis of acquired bleeding disorder.
 - 2- Causes and diagnosis of microcytic hypochromic anemia.
 - 3- Causes of generalized lymphadenopathy.
 - 4- Indications and side-effects of diuretics.
- (2) 1- Causes and diagnosis of pleural effusion.
 - 2- Diagnosis and management of interstitial pulmonary fibrosis.
 - 3- Main differences between type I and type II respiratory failure.
 - 4- Main differences between obstructive and restrictive pulmonary function tests.
- (3) 1- Sequelae of acute type B viral hepatitis and investigations used for its diagnosis
 - 2- Diagnosis and treatment of acute Brucellosis.
 - 3- Clinical picture of bacillary dysentery.
 - 4- Gastrointestinal manifestation of HIV infection.
 - 5- Four common clinical features of acute amebic colitis and two drugs used for its treatment.
 - 6- Common parasitic infestations of the liver and diagnosis of one of them.
- (4) 1- Clinical picture of early - Alzheimer's disease.
 - 2- Clinical picture of hemiplegia due to brain stem lesion.
 - 3- Management of status epilepticus
- (5) **Enumerate:** 1- causes of proptosis.
 - 2- Causes of bulbar palsy.
 - 3- Signs of in coordination
 - 4- Lines of management of bacterial meningitis.
- (6) **Mention:**
 - 1- 5 risk factors of substance dependence.
 - 2- 5 risk factors of suicide.
 - 3- 5 indications of electroconvulsive therapy (ECT) in psychiatry.
 - 4- 5 good prognostic factors in schizophrenia.

September, 2006

Give short account on the following:-

- 1- Replacement therapy in chronic renal failure (CRF).
- 2- Etiology of secondary glomerulonephritis . Discuss on of them.

- 3- Differences between gastric and duodenal ulcer in clinical presentation, management and complications..
- 4- Clinical manifestations of hepatocellular failure.
- 5- Acute metabolic complications of diabetes mellitus.
- 6- Causes and diagnosis of adrenal insufficiency.
- 7- Polyarthritis with skin rash.
- 8- Investigation and treatment of rheumatoid arthritis.
- 9- Define hypertension outline the recent classification and indications of various antihypertensive drugs according to its severity.
- 10- Definition, pathogenesis, diagnosis and treatment of unstable angina.

September, 2006

Give short account on the following:-

- 1- Three characteristic clinical features and one main line of treatment of :Parkinsonim,Grand Mal epilepsy, migraine with aura and bacterial meningitis.
- 2- Three characteristic clinical features and one main investigation of: Hemitranssection of the spinal cord at C7 , Duchenne myopathy , anterior cerebral artery occlusion and temporal lobe tumors.
- 3- Three diagnosis symptoms and one main line of treatment of : manic attack , substance dependence, panic disorder and neuroleptic malignant syndrome.
- 4- Manifestations of mediastinal syndrome and enumerate posterior mediastinal lesions.
- 5- Respiratory manifestations of occupational hazards.
- 6- Management of tuberculous ascites and its differential diagnosis.
- 7- Discuss Helicobacter pylori infection.
- 8- Causes, diagnosis and treatment of disseminated intravascular coagulation (DIC).
- 9- Clinical feature, diagnosis and treatment of a case of Acute Leukemia.
- 10- Causes and clinical picture of shock

February 2007

Answer the following questions :

- 1- Clinical Manifestations of Systemic Lupus Erythematosus.
- 2- Differential Diagnosis of Polyarthritis .
- 3- Etiology and clinical picture of Acute renal Failure.
- 4- Vaule of urine Examination.
- 5- Causes and differential Diagnosis of Ascites.

- 6- Causes and clinical Assessment of patient with Jaundice.
 - 7- Causes and Investigations of Chronic Diarrhea.
 - 8- Definition of Unstable Angina and Its Management
 - 9- causes of Secondary Hypertension.
 - 10- Causes and Diagnosis of Myocarditis .
 - 11- Diagnosis and Treatment of Acromegaly.
 - 12- Diagnosis and Treatment of Diabetic Ketoacidosis.
 - 13- Diagnosis of a case of Cushing Syndrome.
-

February 2007

Answer the following questions :

- 1- Differential diagnosis of syncope in the elderly.
- 2- Mention the clinical uses of diuretics.
- 3- Manifestations of hemolytic anemia.
- 4- Causes of acquired bleeding tendency.
- 5- Classification and staging of malignant lymphoma.
- 6- Enumerate hazards of blood transfusion.
- 7- Clinical presentations of bronchial carcinoma.
- 8- Outline different therapeutic regimens of pulmonary tuberculosis.
- 9- Causes of unresolved pneumonia.
- 10- Diagnosis of COPD.
- 11- Mention four characteristic clinical features and one main investigation of capsular hemiplegia and focal paraplegia at D 10 level.
- 12- Mention four characteristic clinical features and one main investigation of myasthenia gravis and Jacksonian fits.
- 13- Mention four characteristic clinical features and one main line of treatment of bacterial meningitis and migraine with aurea.
- 14- Mention the etiology , clinical picture, and management of rheumatic chorea .
- 15- Mention four characteristic symptoms and one main line of treatment of major depression and panic disorder.
- 16- Mention four characteristic symptoms and one main line of treatment of schizophrenia and conversion disorder.
- 17- Diagnosis and treatment of typhoid fever.
- 18- Diagnosis and treatment of amoebic liver abscess.
- 19- Diagnosis of bilharzial colitis.

20- Mention causes of fever with coma.

June, 2008

Answer the following question: -

1. Discuss differential diagnosis of arthritis with fever.
2. Extra- articular manifestations of SLE.
3. Treatment of gouty arthritis.
4. Diagnosis of hepatic cell failure.
5. Treatment of haematemesis.
6. Clinical assessment of a patient with jaundice.
7. Aetiology of glomerulonephritis.
8. Diagnosis of pyelonephritis.
9. Treatment of acute renal failure.
10. Discuss clinical features of suprarenal failure.
11. Diagnosis of hyperthyroidism.
12. Treatment of type 2 diabetes mellitus.
13. Give an account on complications of heart failure and how to manage two of them.
14. Discuss prophylactic treatment of a patient with valvular rheumatic heart disease.

June, 2008

Answer the following question: -

1. What are the causes of chest pain in elderly?
2. Give an account on side effects of diuretics.
3. Enumerate causes of generalized lymphadenopathy.
4. Describe diagnosis of iron deficiency anemia.
5. Give an account on clinical picture of acute leukemia.
6. Mention the main differences between orally and parenterally transmitted viral hepatitis.
7. Mention 4 causes of fever with jaundice and their related investigations.
8. Mention clinical diagnosis, investigations and treatment of amoebic liver abscess.
9. Causes and management of pyopneumothorax.
10. Para malignant syndrome in bronchial carcinoma.
11. Diagnosis of pulmonary embolism.

12. Mention 4 characteristic clinical presentation of duchenne myopathy caude equine lesion, anterior cerebral artery occlusion and complex partial seizure.
13. Mention 2 main investigations and 2 main lines of treatment of: rheumatic chorea, subarachnoid hemorrhage, myasthenia gravis and motor jacksonian fits.
14. Mention the biochemical bases and treatment of:
- a) Parkinson's disease.
 - b) Meigraine.
15. Discuss indications of electro- convulsive therapy (E.C.T) and side effects of major tranquilizers.
-

September, 2008

Give an account on the following:-

1. Diagnosis and treatment of adult hypothyroidism.
 2. Causes and clinical features of Cushing's syndrome.
 3. Differential diagnosis of coma in an elderly diabetic.
 4. Four presentations of upper gastro – intestinal bleeding and the recommended investigations for the underlying cause.
 5. Six causes of chronic- non infectious diarrhea and one appropriate investigation for each cause.
 6. Four causes of recurrent jaundice and one appropriate investigation for each cause.
 7. Cardiovascular manifestations of chronic renal failure.
 8. Definition of heavy Proteinuria and its possible causes.
 9. Diagnostic value of microscopic urine examination.
 10. Management of systemic lupus erythematosus.
 11. Articular manifestations of rheumatoid arthritis.
 12. Causes of monoarthritis and treatment of two of them.
 13. Differential diagnosis and diagnosis of a patient presented to the emergency department with acute coronary chest pain.
 14. **Give a short account on:**
 - A) Treatment of infective endocarditis.
 - B) Causes and clinical diagnosis of acute pericarditis.
 - C) Differential diagnosis of precordial continuous murmur.
-

September, 2008

Give an account on the following:-

- 1- Diagnostic investigations for a suspected patient with tuberculosis.
- 2- Drug – induced chest diseases.
- 3- Clinical picture and one diagnostic tool for the following:
Frontal lobe glioma; intramedullary paraplegia; myasthenia gravis and Jacksonian fits.
- 4- In Parkinsonism and rheumatic chorea, describe the following:
the changes occur in the neurotransmitters; four clinical features and three drugs used in the treatment.
- 5- Four criteria of phobic disorder; four side effects of major tranquilizers and four characteristic symptoms of a major depressive episode and two main lines of treatment.
- 6- Three causes and related investigations for the following: cervical Lymphadenopathy in adolescents; acquired bleeding tendency and pancytopenia.
- 7- Causes and diagnosis of megaloblastic anaemia.
- 8- PUO: definition; causes and investigations with their values.
- 9- Causes of vomiting; its complications and related investigations.
- 10- **Write a short account on:**
 - A) Causes and treatment of pulmonary edema.
 - B) Cardiovascular causes syncope in elderly patients.

May, 2009

Give an account on the following:-

- 1) Diagnosis and treatment of Graves disease.
- 2) Enumerate causes and describe clinical features of Addisonian crisis.
- 3) Mention diagnostic criteria of Diabetes mellitus.
- 4) Enumerate causes and differential diagnosis of lower gastro- intestinal bleeding.
- 5) Diagnosis and treatment of peptic ulcer.
- 6) Enumerate causes and diagnosis of liver cirrhosis.
- 7) Enumerate the main causes and diagnostic investigations for nephritic syndrome.
- 8) Describe clinical picture and diagnosis of acute renal failure.
- 9) Enumerate indications and complications of haemodialysis.
- 10) Give clinical picture of systemic lupus erythematosus.
- 11) Discuss extra articular manifestations of rheumatoid arthritis.
- 12) Treatment of gout.

- 13) Clinical picture of infective endocarditis strategy.
 - 14) Complications of acute myocardial infarction.
 - 15) Diagnosis and treatment of small VSD.
-

May, 2009

Give an account on the following:-

- 1) Diagnosis and treatment of chronic lymphatic leukaemia.
- 2) Causes of anemia with splenomegaly.
- 3) Differential diagnosis of syncope.
- 4) Different modalities for diagnosis and treatment of lobar pneumonia.
- 5) Management of acute severe asthma.
- 6) Enumerate four characteristic clinical features of:
 - Duchenne Myopathy.
 - Petit mal epilepsy.
 - Tumours of the frontal lobe.
 - Anterior cerebral artery occlusion.
- 7) Enumerate the most important investigation for.
 - Meningitis.
 - Peripheral neuropathy.
 - Transverse myelitis.
 - Myasthenia Gravis.
- 8) Enumerate four of the following:
 - Psychosocial factors in the aetiology of schizophrenia.
 - Clinical picture of Attention Deficit Hyperactivity disorder (ADHD).
 - Diagnostic criteria of substance dependence.
 - Indications of ECT in mood disorders and schizophrenia.
- 9) a) Mention the clinical manifestations, diagnosis, complications and treatment of amoebic liver abscess.
b) Mention the main differences between type A & B viral hepatitis.
- 10) a) Mention the main differences between bacillary and amoebic dysentery.
b) Mention causes of fever with splenomegaly.

6 August, 2009

Answer the following questions: -

- 1- Mention three common causes of portal hypertension and three Modalities of therapy.
- 2- **Regarding diarrhea, mention the following:**
 - a- Three mechanisms with examples.
 - b- Three causes of diarrhea associated with abdominal pain.
 - c- Three types according to stool appearance.
- 3- Mention the definition and significance of: venous hum – high S-AAG - spider naevi.
- 4- Mention three clinical differentiations between acute glomerulonephritis and nephritic syndrome and the treatment of one of them.
- 5- Mention five clinical presentations of chronic renal failure and their pathogenesis.
- 6- Mention five endocrinal emergencies and the treatment of two of them.
- 7- Mention three endocrinal causes of:
 - a- polyuria.
 - b- Weight loss.
 - c- Hypertension.
- 8- Describe briefly four chronic complications of diabetes mellitus.
- 9- Mention the treatment of any two of the following: Acute gout - lupus cerebrius
- Septic arthritis.
- 10- Mention four causes of arthritis associated with skin lesions and the diagnostic clinical features of two of them.
- 11- Enumerate the expected positive clinical findings and the results of four important investigations of a patient presented to emergency department with acute myocardial infarction and left sided heart failure.
- 12- Enumerate five complications of: Infective endocarditis-Essential hypertension.
- 13- Enumerate five lines of treatment of: Ventricular tachycardia- Myocarditis.
- 14- **Match between columns (A) and (B):**

<p>(A)</p> <ol style="list-style-type: none">a- Rheumatoid arthritisb- CREST syndrome.c- Ankylosing spondylitisd- Systemic lupus.e- Gouty arthritis.	<p>(B)</p> <ol style="list-style-type: none">1- positive urate crystals2- Positive anti-Ds DNA Ab.3- high titre rheumatoid factor.4- Positive ca pyrophosphate ceystals.5- Positive anti- centromere Ab.6- positive HLA-B₂₇
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B-

(A)

- a- Chronic renal failure.
- b- Acute glomerulonephritis.
- c- Acute tubular necrosis.
- d- Membranous nephropathy.
- e- Acute pyelonephritis.

(B)

- 1- Fatty casts.
- 2- Pus cell casts.
- 3- Broad granular casts.
- 4- Red cell casts.
- 5- Eosinophiluria.
- 6- Tubular epithelial cell casts.

C-

(A)

- a- Cushing's syndrome.
- b- Acromegaly.
- c- Diabetes insipidus.
- d- Addison's disease.
- e- Hypopituitarism.

(B)

- 1- TRH stimulation test.
- 2- ACTH stimulation test.
- 3- D-xylose test.
- 4- Dexamethazone suppression test.
- 5- Glucose suppression test.
- 6- Water deprivation test.

D-

(A)

- a- Celiac disease.
- b- Plummer-Vinson's syndrome
- c- Ulcerative colitis.
- d- Crohn's disease.
- e- Barrett's oesophagus.

(B)

- 1- Non-caseating granulomas.
- 2- Intestinal lymphangectasia.
- 3- Columnar epithelium in oesophagus.
- 4- Oesophageal web.
- 5- Edematous friable mucosa.
- 6- Intestinal villous atrophy.

15- Answer the following MSQ.

A- Which of the following statements is true about the diastolic Austin

- 1) It is associated with a loud first sound.
- 2) It is an early sign of aortic regurgitation.
- 3) It can be distinguished from the murmur of mitral stenosis by absence of presystolic accentuation.
- 4) It is due to partial closure of the anterior leaflet of the mitral valve.
- 5) It does not occur in aortic incompetence secondary to an aortitis.

B- Which one of the following is a contraindication to thrombolysis?

- 1) Age over 65 years.
- 2) The presence of atrial fibrillation.
- 3) Asthma.
- 4) Pregnancy.
- 5) Background diabetic retinopathy.

C- Elevation of the jugular venous pressure during inspiration is most likely to be found in which of the following situations?

- 1) A normal physical examination
- 2) pericardial effusion.
- 3) Constrictive pericarditis.
- 4) Dilated cardiomyopathy.
- 5) Myocarditis.

D- A 26-year-old man is noted to have cyanosis of the lower limbs and clubbing of the toes but not the fingers. Which of the following statements is true?

- 1) He has Eisenmenger's syndrome.
- 2) He has coarctation of the aorta.
- 3) He is likely to have a loud continuous "machinery" murmur below the left clavicle.
- 4) He is likely to need urgent surgery.

E- Angina due to an imbalance between O_2 supply and demand without atherosclerosis would most likely be seen in which of the following circumstances?

- 1) Aortic regurgitation.
- 2) Cardiac tamponade.
- 3) Pulmonary regurgitation
- 4) Right heart failure.
- 5) Tricuspid regurgitation.

F- Which of the following is/are true of the "vulnerable" unstable plaque?

- 1) The vulnerable plaque typically has a thick fibrous cap covering a lipid-rich layer.
- 2) These plaques often rupture at the central portion of the fibrous layer, where hydrodynamic forces are increased.
- 3) The vulnerable plaque is typically associated with a severe angiographic stenosis.
- 4) There is evidence suggesting that more than 90% of deaths by myocardial infarctions are associated with plaque rupture or ulceration.

G- What would the target blood pressure level be in a patient with hypertension and renal impairment?

- 1) 140/90 mmHg
- 2) $> 140/90$ mmHg
- 3) $< 130/80$ mmHg
- 4) $> 125/80$ mmHg
- 5) 150/110 mmHg

H- In aortic stenosis exertional angina is

- 1) Cardiac output is no longer increased with exercise.
- 2) Increased oxygen demand of the myocardium.
- 3) Coronary blood flow per gram myocardium is decreased.
- 4) All of the above.
- 5) None of the above.

I- Which of the following concerning mitral valve prolapse is incorrect?

- 1) Mid systolic click.
- 2) Mid to late systolic murmurs.
- 3) Chest pain.
- 4) Recurrent palpitations.
- 5) presystolic click.
- 6) Non of the above.

J- In the diagnosis of rheumatic fever, which of the following may be helpful?

- 1) Generalized maculo-papular rash.
- 2) ASOT of less than 1:200.
- 3) polyarthritis.
- 4) Staphylococcus aureus in throat culture.
- 5) Splinter haemorrhage.

13 August 2009

Answer the following questions.

- 1- Mention four important clinical manifestations of:
Frontal lobe tumors – Duchenne muscular dystrophy – Diabetic peripheral neuropathy
– Capsular hemiplegia.
- 2- Mention the most important investigations for the following:
Tonic clonic convulsions – Multiple sclerosis – Myasthenia gravis – Ischemic stroke.
- 3- Mention three main lines of treatment of:
Trigeminal neuralgia – Bacterial meningitis – Sub acute combined degeneration – Chorea.
- 4- Mention four items for each of the following:
Diagnostic criteria of phobic disorder – Diagnostic criteria of substance dependence –
Differential diagnosis of schizophrenia and disorders – Differential diagnosis of suicide and
Para suicide.
- 5- Mention five causes of acquired bleeding tendency and the recommended investigations.
- 6- Mention three clinical presentations of hemolytic anaemia and their pathogenesis.
- 7- Mention three lines of treatment of: AML- aplastic anaemia – ITP.
- 8- Mention the definition, four causes and four investigations of syncope in elderly.
- 9- Mention three causes for each of the following clinical associations:
 - a) Digital clubbing and weight loss.

b) pallor and generalized edema.

c) Coma and high grade fever.

10- Describe four clinical presentations of brucellosis.

11- A- Enumerate causes of fever with jaundice (with examples.)

B- Mention three important investigations and three main complications of acute typhoid fever.

12- A- Mention four diagnostic investigations for chronic hepatitis C.

B- What is the clinical significance of the following positive serological markers?

1. Anti-HAVIgG.

2. HBsAG + Anti – HBc IgM.

3. Anti – HEV IgM.

4. Anti – HBs.

13- Enumerate:

a) Clinical features of mediastinal syndrome.

b) Risk factors for idiopathic pulmonary fibrosis (IPF).

c) Causes of spontaneous pneumothorax.

d) Stages of COPD and their selective criteria.

14- Mention in short:

a) Clinical manifestations of hypoxaemia.

b) Diagnostic aids for tuberculosis.

c) Contra indications for surgery in bronchial carcinoma.

d) Predisposing risk factors for DVT and pulmonary embolism.

15- Choose the correct answer:

A- All the following are causes of recurrent haemoptysis except:

1) Tuberculosis.

2) Bronchial cancer.

3) Interstitial pulmonary fibrosis.

4) Bronchiectasis.

B- Other causes of sudden dyspnea than asthma are all except:

1) Pulmonary embolism.

2) Spontaneous pneumothorax.

3) Interstitial pulmonary fibrosis.

4) Foreign body inhalation.

C- Which of the following is/are anterior mediastinal lesions:

1) Thymoma.

2) Teratoma.

3) Diaphragmatic hernia of foramen of Morgagni. 4) All of the above.

D- Respiratory acidosis means:

1) $\text{pH} < 7.35$.

2) $\text{Pa CO}_2 > 45 \text{ mmHg}$.

3) $\text{HCO}_3^- > 26 \text{ mEq/L}$.

4) All of the above.

E- The most commonly peripherally situated bronchial carcinoma is:

- 1) Squamous cell carcinoma.
- 2) Small cell carcinoma.
- 3) Adenocarcinoma.
- 4) Large cell carcinoma.

F- All of these signs of consolidation except:

- 1) ↑ TVE.
- 2) Flat dullness.
- 3) Bulging of the affected side.
- 4) Bronchial breathing.

G- Congenital bronchiectasis is usually associated with the following except:

- 1) Sequestered lobe.
- 2) Ciliary dyskinesia.
- 3) Respiratory syncytial virus infection.
- 4) Hypogammaglobulinemia.

H- All these drugs induce bronchospasm except:

- 1) Beta blockers (propranolol).
- 2) Non steroidal anti-inflammatory (NSAID).
- 3) Cytotoxic drugs (cyclophosphamide).
- 4) Drug inducing histamine release (morphine)

18 August 2009

Problem Solving.

Case 1:

A 63-year-old right-handed secretary/typist consulted her family physician when her right hand and fingers "did not want to cooperate". She also explained that her employers had become dissatisfied with her because her work habits and movements had become slow and her handwriting had become scribbly and illegible over the preceding several months. Her intellectual abilities were unimpaired. Neurological examination showed slowness of speech and mild loss of facial expression on both sides. The patient had difficulty initiating movements. Once seated she didn't move about much. Her posture was stooped and she walked with a small stepped shuffling gait, with decreased arm swing. There was no muscle atrophy or weakness. Cogwheel rigidity was present. There was a fine tremor in the fingers of right hand at rest.

1. What is the most likely diagnosis?
2. Where is the lesion?
3. What are the possible causes?
4. Write two lines of treatment?

Case 2:

A 32-year-old female presents with a history of tremors, palpitations, sweating and loss of weight for the last 18 months. She reports difficulty in walking upstairs and in combing her hair for the last 4 months. On examination: the patient is emaciated and her eyes are staring and have fine tremors. Pulse 130/min irregular rhythm Bp 160/70 and the skin are warm.

1. What is the likely diagnosis?
 2. How you can explain the symptoms in the last 4 months?
 3. What are the expected findings on neck, eyes and cardiac examinations?
 4. How would you investigate and treat this patient?
-

Case 3:

A 38- year- old woman presents with chronic joint pains worsening over months. Her joints are more stiff on waking in the mornings. The joints that are most painful are those of hands and feet. Over the last weeks, she suffers from difficulty of breathing and lower limb edema. On examination: swollen, tender proximal IPJs and with effusions.

1. What is the most likely diagnosis?
 2. Explain the possible causes of her complaint over the last weeks.
 3. How would you investigate and treat her?
-

Case 4:

A 38- year – old man presents with a painless mass on the right side of his neck of two months duration. He has been feeling unwell and has lost 5 kg in weight. The patient has also developed night sweats and generalized itching. Examination Temperature is 38 C. There is a smooth firm 3X4 cm palpable mass in the right supraclavicular fossa together with multiple swelling of 2cm in diameter on both axillae and inguinal areas. On abdominal examination, there is palpable mass of 3 cm below the left costal margin.

1. What is the most likely diagnosis?
 2. What are the clinical stages of these diseases?
 3. Give two other possible diagnoses?
 4. How would you investigate and treat him?
-

Case: 5

A man of 45 years consults his general practitioner with 6 months history of reduced appetite, weight loss and swelling of his ankles. Despite his weight loss he has recently noticed his trousers getting tighter. He has no abdominal pain since the age of 18 he has drunk 15 units of alcohol per week. Examination: He has plethoric features. There is pitting edema of the ankles. The abdomen is distended with no palpable masses but there is transmitted fluid thrill.

1. What is the diagnosis?
 2. What are the expected clinical findings on hand examination?
 3. How would you investigate and treat him?
-

Case:6

A 57-year-old man, heavy smoker presented to the chest clinic complaining of productive cough for 10 years. Three years later he developed gradual onset of dyspnea progressive up to dyspnea grade III. Worsen symptoms in the form of increased severity of cough in the color of sputum were observed from 1 week.

1. What is most possible diagnosis?
2. What is the risk factor for this condition in this man?
3. Which three investigations are needed to diagnose this man and what their values in the diagnosis?

=====
Clinical pathology.

I) Write 5 differences between:

- a) Leukaemoid reaction and chronic myeloid leukaemia.
- b) Obstructive jaundice and hepatocellular jaundice.

II) Mention the following:

- a) fine causes of hypocalcaemia.
- b) laboratory findings of iron deficiency anaemia.

III)

a) Mention 3 investigations:

1. Infectious mononucleosis.
2. HIV.

b) Match between columns (A) and (B):

(A)	(B)
a- Enteric fever.	1- Acute glomerulonephritis.
b- Mycobacterium tuberculosis.	2- Inhibit cell wall synthesis of bacteria.
c- Poststreptococcal infection.	3- Escherichia coil.
d- Penicillins.	4- Salmonella infection.
e- Malta test.	5- Staphylococcus aureus.
	6- Ziehl-neelsen stain.
	7- Brucella infection.

18 August 2009

Answer the following questions:

1- Definition of:

a) Melanocyte cell

b) Spongiosis

c) Crusts

d) Patch

2- How can you differentiate between scaly ring worm and black dot ring worm?

3- Mention histopathological features of psoriasis.

4- Mention 4 clinical types of warts.

5- Enumerate serological tests of syphilis and its significance.

6- Mention medical treatment of erectile dysfunction.

7- A male patient presented with a dry hairless and anaesthetic erythematous plaque in the left forearm. Histopathological examination showed epithelioid cell granuloma

a. What is the diagnosis?

b. Mention the diagnostic tools in this case.

c. What is the treatment?

8- A male patient complaining of 1ry infertility. On examination he was found to be tall, thin with disproportionately long limbs length in relation to trunk length, with the presence of gynecomastia. Both testes were small and firm. Semen analysis was azoospermic.

a. What is the most probable diagnosis?

b. How can you confirm the diagnosis?

c. What is the treatment of choice in this case?



Pediatric

March, 2000

Answer the following questions:

- 1- Haemorrhagic disorders of the newborn.
 - 2- The constituents of the breast milk.
 - 3- The clinical types of dehydration.
 - 4- The causes of tetany.
 - 5- The complications of Diphtheria.
 - 6- The treatment of rheumatic carditis.
 - 7- The causes of ascites.
 - 8- Diagnosis and treatment of congenital hypothyroidism.
-

July, 2000

Answer the following questions:

- 1- The diagnosis and treatment of neonatal infection.
 - 2- The motor and mental development in the 1st year of life.
 - 3- The physiology of lactation and factors affecting breast milk secretion.
 - 4- The main complications of acute diarrhea.
 - 5- The diagnosis and treatment of primary pulmonary tuberculosis.
 - 6- The treatment of bronchial asthma.
 - 7- Venous occlusive disease.
 - 8- The causes of mental retardation.
-

March, 2001

Give an account on:

- 1- Physiologic jaundice.
- 2- Advantages of breast feeding.
- 3- Schedule of vaccination in Egypt.
- 4- Differential diagnosis of measles.
- 5- Clinical manifestations and treatment of febrile convulsions.
- 6- Clinical manifestations and severity of dehydration.
- 7- Five differences between renal edema and kwashiorkor.
- 8- Treatment of:
 - a) Rheumatic carditis.
 - b) Iron deficiency anemia.
 - c) Bronchopneumonia.

August, 2001

Give an account on:

- 1- Oral rehydration therapy.
 - 2- a) D.P.T. vaccine
b) Clinical and radiological features of broncho pneumonia.
c) Advantages of colostrum.
 - 3- Treatment of:
 - a) Rheumatic carditis .
 - b) Congenital hypothyroidism
 - c) Pulmonary tuberculosis.
 - 4- Laboratory features of:
 - a) Chronic hemolytic anemia.
 - b) Acute post streptococcal glomerulonephritis .
 - 5- Enumerate causes of:
 - a) Neonatal jaundice according to the age of onset.
 - b) Hypocalcemic tetany.
 - c) Mental retardation (perinatal & postnatal causes).
-

March, 2002

Write an account on:

- 1- Care of the newborn infant in delivery room.
- 2- Schedule of vaccination.
- 3- Nutritional therapy of protein - energy malnutrition.
- 4- Diagnosis and treatment of acute bacterial meningitis.
- 5- Advantages and composition of oral rehydration solution (ORS).
- 6- Clinical manifestations of ventricular septal defect (V.S.D.).
- 7- Complications of chronic hemolytic anemia.
- 8- Treatment of bronchopneumonia.
- 9- Write 5 differences between:
 - a) Acute poststreptococcal glomerulonephritis and idiopathic nephrotic syndrome.
 - b) Down syndrome and cretinism.

July, 2002

Give an account on:

1- Treatment of:

- a) The preterm infant.
- b) Febrile convulsions.

2- Complications of:

- a) Pneumonia (pulmonary only).
- b) Acute diarrhea.
- c) Chronic hemolytic anemia.

3- Clinical manifestations of:

- a) Hypervitaminosis D.
- b) Heart failure in infancy and childhood.
- c) Measles.

4- Laboratory diagnosis of:

- a) Acute bacterial meningitis.
- b) Diabetic keto acidosis.
- c) Nephrotic syndrome.

5-a) Hepatitis B vaccine.

- b) Indicators of breast feeding adequacy.
 - c) Mental and social development during the first year.
-

March, 2003

Give an account on:

1- Advantages of breast feeding.

2- Clinical manifestations of :

- a) Ventricular septal defect (V.S.D.).
- b) Febrile convulsions.

3- Treatment of :

- a) Neonatal sepsis.
- b) Iron deficiency anemia.
- c) Hypocalcemic tetany.

4- Five differences between :

- a) Bronchopneumonia and lobar pneumonia .
- b) Nephrotic syndrome and acute poststreptococcal glomerulonephritis.
- c) Down syndrome and cretinism.

5- Five complications of :

- a) Chickenpox.
 - b) Diarrhea.
-

August, 2008

Give a short account on the main headlines of:

- 1- A schedule for primary vaccination of children.
 - 2- Fluid therapy plans (a, b & c).
 - 3- Apgar score assessment in the newborn infant.
 - 4- Treatment of acute bacterial pneumonia.
 - 5- Assessment of healing of rickets after vitamin D therapy.
 - 6- Rheumatic fever prophylaxis.
 - 7- Treatment of idiopathic thrombocytopenic purpura.
 - 8- Causes of acute convulsions.
-

March, 2004

Discuss very briefly.

- 1- Ordinary care of the newborn in the delivery room.
 - 2- Breast feeding promotion.
 - 3- Detection of congenital hypothyroidism.
 - 4- Treatment of tetany.
 - 5- Treatment of iron deficiency anemia.
 - 6- Treatment of acute diarrhea.
 - 7- Diagnosis of pneumonia.
 - 8- Diagnosis of rheumatic fever.
-

July, 2004

Give a short account on:

- 1- Differences between physiologic and pathologic jaundice of the newborn.
- 2- Indications of antimicrobial therapy in cases of diarrhea.
- 3- Criteria for diagnosis of rheumatic fever.
- 4- Treatment of acute post- streptococcal glomerulonephritis .
- 5- Treatment of iron deficiency anemia.
- 6- Proper breast differential practice.
- 7- A summary of differential diagnosis of generalized edema.

- 8- Detection of congenital hypothyroidism.
 - 9- Treatment of pneumococcal pneumonia.
 - 10- Treatment of tonsillar diphtheria.
-

March, 2005

Answer the following questions:

- 1- Differences between physiological and pathological jaundice.
 - 2- Advantages of breast feeding.
 - 3- Treatment of hypocalcemic tetany.
 - 4- Differences between measles and German measles.
 - 5- Advantages of oral rehydration therapy.
 - 6- Differences between lobar pneumonia and bronchopneumonia.
 - 7- Clinical manifestations of ventricular septal defect (V.S.D.)
 - 8- Laboratory diagnosis and treatment of iron deficiency anemia.
 - 9- Treatment of nephrotic syndrome.
 - 10- Causes of acute convulsions.
-

August, 2005

Give a short account of:

- 1- Features and causes of central and of peripheral respiratory failure in the newborn infant.
- 2- The Egyptian child vaccination schedule: Vaccine type, timing, doses, and route of administration and mention some side effects and complications of BCG and DPT vaccinations
- 3- Headlines of management of protein energy malnutrition.
- 4- Headlines of management of chronic hemolytic anemia.
- 5- Enumeration of criteria for the diagnosis of rheumatic fever, with a very short description of rheumatic carditis.
- 6- How to manage a child with suspected acute pyelonephritis.
- 7- A child 2 years old with acute generalized motor convulsions, mention some possible causes and investigation.
- 8- Management of a diphtheria case.

March, 2006

Give short account on:-

- 1- Side effects and complications of DPT vaccine.
 - 2- Advantages of breast feeding.
 - 3- Clinical manifestations of tetany.
 - 4- Differences between physiological and pathological jaundice in neonates.
 - 5- Complications of mumps.
 - 6- Indications and amounts of IV rehydration therapy.
 - 7- Prevention of rheumatic fever.
 - 8- Treatment of Iron deficiency anemia.
 - 9- Clinical manifestations of febrile convulsions.
 - 10- Clinical and laboratory diagnosis of idiopathic nephrotic syndrome.
-

June, 2006

Write an account on

A. Clinical manifestations of:

- 1- Congenital rubella syndrome.
- 2- Heart failure in a child.
- 3- Idiopathic thrombocytopenic purpura.

B- Investigations of:

- 1- Kwashiorkor.
- 2- Neonatal hyperbilirubinemia .
- 3- Urinary tract infection.

C- Complications of:

- 1- Enteric fever.
- 2- Infant of diabetic mother.
- 3- DPT vaccine.
- 4- Acute bronchiolitis.

D- Diagnosis of:

- 1- Diabetic ketoacidosis.
- 2- Primary pulmonary tuberculosis.

II- Discuss:

- 1- Assessment of dehydration in severe malnutrition.
- 2- Causes of iron deficiency anemia in infants and children.

- 3- Treatment of febrile convulsions.
 - 4- Prophylaxis of infective endocarditis.
 - 5- Differences between bacterial and viral pneumonias.
 - 6- Indicators of breast feeding adequacy.
-

August , 2007

Write an account on:

- 1- Indications of hepatitis B vaccination.
 - 2- Indications of artificial feeding.
 - 3- Differences between physiologic and pathologic jaundice.
 - 4- Non- dietetic causes of Marasmus.
 - 5- Indications for intravenous rehydration.
 - 6- Complications of croup syndromes.
 - 7- Discharge criteria of preterm babies from the neonatal unit.
 - 8- Laboratory diagnosis of enteric fever.
 - 9- Indications and course of corticosteroid therapy in TB.
 - 10- Complications of measles.
 - 11- Causes of gastrointestinal bleeding.
 - 12- Complications of VSD.
 - 13- Prevention of rheumatic fever.
 - 14- Laboratory findings of pneumococcal pneumonia.
 - 15- Clinical manifestations of congenital hypothyroidism in the neonatal period.
 - 16- Clinical manifestations of hydrocephalus before closure of the fontanel.
 - 17- Etiology of acquired pancytopenia .
 - 18- Treatment of hereditary spherocytosis.
 - 19- Laboratory differences between nephrotic syndrome and acute poststreptococcal glomerulonephritis.
-

April, 2008

Write short notes on:

- 1- Side effects and complications of DPT vaccine.
- 2- Complications of protein energy malnutrition.
- 3- Routine delivery room care.
- 4- Treatment of neonatal jaundice.
- 5- Clinical manifestations of neonatal sepsis.

- 6- Diagnosis of acute bacterial meningitis.
- 7- Treatment of pulmonary T.B.
- 8- Differences between measles and German measles.
- 9- Indications of anti- microbial treatment in cases with diarrhea.
- 10- Differences between bacterial and viral pneumonias.
- 11- Prevention of rheumatic fever.
- 12- Indication of steroid therapy in idiopathic thrombocytopenic purpura.
- 13- Clinical manifestations of acute post - streptococcal glomerulonephritis.
- 14- Clinical features of acute hepatitis A And B.
- 15- Prognosis of febrile convulsions.

July, 2008

Answer the following questions:

- 1- Causes of delayed motor development without mental retardation.
- 2- Differences between salk and sabin vaccine.
- 3- Disadvantage of artificial feeding.
- 4- Complications of protein energy malnutrition.
- 5- Causes of neonatal hyperbilirubinemia according to the age of onset.
- 6- Mention aspiration syndrome.
- 7- Clinical manifestations of acute bacterial meningitis.
- 8- Causes of vomiting.
- 9- Feeding during acute diarrhea.
- 10- Differences between hemoptesis and heamatemesis
- 11- Differential diagnosis of bronchiolitis .
- 12- Clinical manifestations of infective endocarditis.
- 13- Crisis in sickle cell anemia.
- 14- Diagnosis of acute post - streptococcal glomerulonephritis.
- 15- Prognosis of febrile convulsions.



وحدة ضمان الجودة

المكان : الدور الخامس – الجناح الأوسط

تليفون : 1875 - 3683

تتقدم الكلية بخطوات ثابتة فى مجال ضمان الجودة والذي يتيح تطوير جميع جوانب العملية التعليمية بالكلية إلى الدرجة التى تضمن الكلية عندها جودة عالية تستطيع من خلالها اكتساب ثقة المجتمع المحلى والعربى والعالمى فى خريجها . ويعتبر الطالب عنصر أساسى فى عملية التحديث والتطوير للبرنامج الدراسى ومقرراته وطرق التدريس والتقييم ، ولهذا تدعو وحدة ضمان الجودة بالكلية جميع الطلاب للتعرف على أنشطة الوحدة والمشاركة الإيجابية معها .

أهداف الوحدة :

- تهدف الوحدة إلى تنفيذ أهداف مركز توكيد الجودة بالجامعة من خلال الأهداف التالية:
- 1- نشر ثقافة الجودة والوعي بأهمية تطبيق سياسات ووسائل ضمان الجودة وتقويم الأداء الجامعي بين كافة العاملين بالكلية.
 - 2- إنشاء نظام متكامل لضمان الجودة بالكلية.
 - 3- توصيف برنامج الكلية الدراسي وجميع المقررات الدراسية الأكاديمية بالكلية ، ومعدلات القياس المتوافقة مع المعايير القومية والدولية.
 - 4- إنشاء قاعدة معلومات وملفات متكاملة لبرنامج الكلية الدراسي وجميع المقررات الدراسية التي تقدمها الكلية تمهيداً لاعتمادها وفقاً للمعايير القومية والعالمية.
 - 5- المحافظة على تحسين مستوي برنامج الكلية الدراسي والعناصر الأخرى التي تؤثر عليه.
 - 6- تصميم وتطبيق ومراجعة أدوات ضمان الجودة من نماذج وإجراءات وتقارير التقويم بالكلية.
 - 7- تصميم وتطبيق قواعد بيانات ووسائل جمع ومعالجة المعلومات التي تخدم تقويم الأداء بالكلية.
 - 8- التعرف على نقاط الضعف والقوة في عملية التعلم وتقديم مقترحات للتطوير والتحسين.
 - 9- اقتراح سياسات وقرارات لتطوير برنامج الكلية الدراسي ومتابعة تنفيذ ما يتم اعتماده منها.
 - 10- إنشاء آلية تضمن مشاركة الطلاب وحديثو التخرج في عملية تطوير وتحسين برنامج الكلية الدراسي.
 - 11- الاتصال الفعال مع مركز توكيد الجودة بالجامعة وكذلك تبادل الخبرات مع وحدات ضمان الجودة بكلليات الجامعة والجامعات المصرية الأخرى.

عميد الكلية

أ.د. ماهر محمد السلام العمال

أستاذ جراحة العظام

مدير الوحدة التنفيذي

أ.د. أحمد محمد مخلوف

أستاذ أمراض النساء والتوليد