



Test Bank



Subject:

Intro Theoretical

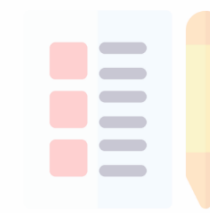
Quizzes-018

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جامعة
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1st Quiz

1-You see a 28-year-old man, with no past medical history, in accident and emergency who developed an acute onset of pleuritic chest pain and shortness of breath while playing football. On examination, oxygen saturations are 93 per cent on room air, respiratory rate 20 and temperature is 37.1°C. There is decreased expansion of the chest on the left side, hyper- resonant to percussion and reduced air entry on the left. The most likely diagnosis is:

- a. Left-sided pleural effusion
- b. Lung fibrosis
- c. Left sided hemothorax
- d. Left-sided pneumonia
- e. Left-sided pneumothorax

2-A 54-year-old woman is seen in clinic with a history of weight loss, loss of appetite and shortness of breath. Her respiratory rate is 19 and oxygen saturations (on room air) range between 93 and 95 per cent. On examination, there is reduced air entry and dullness to percussion on the lower zones of the right lung. Tactile vocal fremitus was diminished on the RT lower zones. There is also reduced chest expansion on the right. From the list below, select the most likely diagnosis:

- a. Right lower lobe pneumonia
- b. Pulmonary embolism
- c. Right-sided pneumothorax
- d. Right-sided pleural effusion
- e. Pulmonary embolism

3-A 58 year old married gentleman , was diagnosed 1 month ago with hypertension ; for which he was started on a medication , however the patient reported side effect of annoying dry cough. Which of the following is the most likely culprit:

- a. Furosemide
- b. Candesartan (ARBS)
- c. Enalapril (ACEI)

- d. Amlodipine (CCB)
- e. Bisoprolol (beta blocker)

4-A 25 years old female patient, presented to ER complaining of shortness of breath that started 2 days prior to presentation; progressive and associated with wheezing. The patient reported that she had few episodes of dry cough at the dawn but did not seek medical care. The patient also reports a medical history of hay fever. What is the most likely diagnosis?

- a. Chronic Obstructive Pulmonary Disease (COPD)
- b. Pulmonary Embolism
- c. Asthma
- d. Bronchiectasis
- e. Pneumonia

5-Which of the following represents a correct chief complaint?

- a. Fits of 1 month duration
- b. Arthritis of 3 months duration
- c. Dysphagia of 1 week duration
- d. Indigestion of 1 hour duration
- e. Heartburn of 2 months duration

6-All of the following are features of alcohol dependence in history EXCEPT:

- a. A withdrawal state when drinking is stopped or reduced
- b. Inability to control starting or stopping drinking and the amount that is drunk
- c. Drinking alcohol at night
- d. Continuing drinking despite of being aware of the harmful consequences
- e. Drinking alcohol in the morning

7-You see a 67-year-old man who has been referred to the chest clinic following a three-month history of weight loss and signs which may suggest a Pancoast's tumour. Which of the following symptoms from the list below is not associated with a Pancoast's tumour?

- a. Exophthalmos
- b. Ptosis

- c. Miosis
- d. Hoarse voice
- e. Anhydrosis

8-Regarding wheezing as a symptom, all of the following characters suggest a diagnosis of asthma as opposed to to COPD, EXCEPT:

- a. Worse on waking in the morning
- b. Wheezing in a patient with a family history of atopy
- c. Wheezing associated with SOB that awakens the patient during night
- d. Wheezing in a patient who doesn't smoke
- e. Wheezing after exercise

9-A 56-year-old man attends your clinic with a three-month history of a productive cough with blood-tinged sputum, following his return from India. Associated symptoms include lethargy, night sweats and decreased appetite. On examination, the patient's chest has good air entry bilaterally with no added sounds and his temperature is 37.3°C. From the list below, which is the most likely diagnosis?

- a. Lung fibrosis
- b. Pulmonary infarction
- c. Pneumonia
- d. Pulmonary embolism
- e. Tuberculosis

10-A 15 years old patient, came to your clinic with her parents , she was short, had a flat occiput, small nose with poorly developed bridge and low set ear, on hand examination you noticed that she had a broad hand with single palmar crease, this is mostly associated with one of the following:

- a. Achondroplasia
- b. Klinefelter syndrome XXY
- c. Down syndrome
- d. Turner syndrome XO
- e. Myotonic dystrophy

11-All of the following are clinical features of iron deficiency anemia , EXCEPT:

- a. Koilonychia

- b. Angular stomatitis
- c. Glossitis
- d. Telangectasias
- e. Blue sclera

12-A 21 year old female patient, student, single, presented to ER complaining of shortness of breath of 1 hour duration, associated with chest tightness, the pt also complains of perioral and digital parasthesia, on physical examination hands are sweaty and cold. Vital signs are stable, O2 sat 98%, chest examination is unremarkable, what is the most probable cause of the breathlessness in this patient?

- a. Pulmonary embolism
- b. Panic attack
- c. Anemia
- d. Pleural effusion
- e. Asthma exacerbation

13-A 69-year-old man has been admitted to the ward with dyspnoea, cyanosis and finger clubbing. His chest exam revealed diminished air entry with bronchial breathing sounds and dull percussion note on both upper zones. TVF note was increased on upper zones compared to lower zones. From the list below, which is the most likely diagnosis?

- a. Pulmonary fibrosis
- b. Bronchogenic carcinoma
- c. pneumonia
- d. Bronchiectasis
- e. COPD

14-When recording a family history using a pedigree chart which one of the following best describes how you should illustrate how a female is affected by a specific condition of interest?

- a. An un-shaded square with details of the condition written at the side
- b. A shaded circle with details of the condition written at the side
- c. A un-shaded circle with details of the condition written at the side
- d. A circle which has been crossed through with details of the condition written at the side
- e. A shaded square with details of the condition written at the side

15-One of the following conditions does NOT cause nails clubbing:

- a. Bronchial asthma
- b. Pulmonary fibrosis
- c. Thyrotoxicosis
- d. Celiac disease
- e. Lung abscess

16-A 73-Year-old male diabetic patient complaining of right-sided chest pain of few days' duration. It was just like a burning sensation. What made him seeking medical attention is appearance of itchy vesicular skin rash at pain site. Which of the following is a correct statement?

- a. His pain is most probably due to an allergic reaction
- b. This is the typical muscular chest pain case scenario
- c. This is a well-known ACE inhibitors side effect
- d. His disease is mostly viral in origin
- e. Insect bite is on top of our differential diagnoses

17-All decrease pain threshold, EXCEPT:

- a. Sleep deprivation
- b. Anxiety
- c. Depression
- d. Past experience
- e. Exercise

18-While examining a patient presented to your clinic with generalized weakness, your impression was that the patient was dehydrated. All of the following are clinical features of dehydration except:

- a. Tachycardia
- b. Elevated JVP
- c. Dry mucus membranes
- d. Delayed capillary refill
- e. Low BP

19-A 55 years old Patient who has been working as a plumber for more than 15 years, started to recently complain of SOB, chronic cough, weight loss, and , X ray showed multiple pleural plaques, which of the following is the most likely culprit:

- a. Fungus spores
- b. Berrilium
- c. Asbestos
- d. Silica
- e. Chromium

20-A 66-year-old woman presents to the emergency room with a 2-day history of shortness of breath. The patient notes becoming progressively short of breath as well as a sharp pain in the right side of the chest which is most painful when taking a deep breath. The patient also complains of mild pain in the right leg. Heart rate is 110 BPM and respiratory rate is 22. The chest exam was normal, the patient denies any weight loss or fever. The most likely diagnosis is:

- a. Pneumothorax
- b. Pulmonary embolism
- c. Muscular strain
- d. Pulmonary edema
- e. Pulmonary hemorrhage

Answers

1	e	6	c	11	d	16	d
2	d	7	a	12	b	17	e
3	c	8	a	13	a	18	b
4	c	9	e	14	b	19	c
5	e	10	c	15	a	20	b

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2nd Quiz

1-All of the following clinical findings are consistent with severe mitral stenosis EXCEPT:

- a. Irregular irregular heart beat
- b. Apical heave.
- c. Bilateral basal inspiratory fine crackles
- d. Opening snap
- e. Tapping apex beat.

2-A 50 year-old lady, previously healthy, presented to out-patient department with 3 months history of progressively increasing abdominal girth, upon exam you found that she has ascites, her serum albumin was 4.0gm/dl , and ascitic albumin was 2.0 gm/dl. The most likely cause of her ascites is.

- a. Nephrotic syndrome.
- b. Ovarian tumor.
- c. Liver cirrhosis.
- d. Celiac disease.
- e. Tuberculosis peritonitis.

3-A 70 years old male patient, has long term history of diabetes, hypertension Presented to the ER complaining of epigastric pain that radiated to the back. The patient has Jaundice , Dark urine, pale stool, and steatorrhea. The physical exam show no tenderness over the Right Upper Quadrant area .What is the most likely diagnosis?

- a. Gallbladder stones.
- b. Pancreatitis.
- c. Pancreatic Cancer.
- d. Gastric Ulcer.
- e. Biliary Colic.

4-You're taking history in the ER department from a patient who presented with chest pain, which of the following characteristics would make you think of acute pericarditis as the likeliest cause ?

- a. Sudden tearing chest pain radiating to the back in a drowsy patient.

- b. Retrosternal chest pain radiated to the jaw of 35 min in duration.
- c. Left sided chest pain of 3 days in duration that's increased by inspiration and was preceded 1 week ago with sore throat and cough.
- d. Episodic retrosternal chest pain of a 5 min per episode that's brought on by climbing 2 flights of stairs.
- e. Sudden retrosternal chest pain associated with heartburn.

5-A 46-year-old lady has recent blood results showing chronic renal failure. Her father died at age 52 from a cerebral aneurysm. She has been seen previously for hypertension and loin pain. What is the most likely diagnosis among the following?

- a. Autosomal recessive polycystic kidney disease.
- b. Dehydration.
- c. Autosomal dominant polycystic kidney disease.
- d. Alport's syndrome.
- e. Renal cell carcinoma.

**6-Which of the following is WRONG about JVP waves:

- a. C wave occurs just after pulmonary valve closure.
- b. V wave presents building up the pressure inside the atrium during systolic phase of ventricle.
- c. Y descent represents the passive filling of the left ventricle.
- d. X descent represents emptying of right ventricle.
- e. A wave represents the atrial contraction.

7-A 70 years old lady, with controlled hypertension and diabetes, who underwent total abdominal hysterectomy 5 years ago, came to the ER complaining of colicky abdominal pain of 1 day duration, associated with constipation of 1 week duration (her baseline was once a day) and no flatus since yesterday, her appetite decreased a lot due to constipation and vomiting, her abdomen is distended on examination with increase bowel sound most appropriate diagnosis is:

- a. Acute pancreatitis.
- b. Perforated peptic ulcer.
- c. Acute mesenteric ischemia.
- d. Pelvic inflammatory disease.

e. Intestinal obstruction.

8-A 67 year old smoker gentleman presented to the ED complaining of severe central abdominal pain of 30 minutes duration that was not relieved by analgesia or changes in position. Pain was reported to be radiating to his flanks & back bilaterally. Patient had had intermittent mild back pain over the last 5 weeks, he denied nausea, vomiting or change in bowel habits. His medical history is remarkable for coronary artery disease & hypertension. Upon physical exam patient was alert but in obvious discomfort, inspection of his abdomen revealed a tender pulsatile mass. His vital signs were as follow: BP 90/55, HR 110, RR 16, Temp 36.6. Patient was resuscitated & taken immediately to the OR. The most likely diagnosis is:

- a. Ruptured abdominal aortic aneurysm.**
- b. Ulcerative colitis flare up.**
- c. Perforated duodenal ulcer.**
- d. Massive pulmonary embolism.**
- e. Acute mesenteric ischemia.**

9-A 33-year-old lady presents to the ER with right upper quadrant pain for the past 7 days. The pain is constant and gradually worsening over the past few days. The pain radiates to the back and is exacerbated by eating, she has nausea and vomited twice today. There was no jaundice on examination, but upon palpating her right costal margin at midclavicular line her breathing was interrupted due to pain. Her abdominal pain is most likely due to?

- a. Acute cholecystitis.**
- b. Gastritis.**
- c. Acute pancreatitis.**
- d. Acute hepatitis.**
- e. Pancreatic cancer.**

10-A 65 years old male patient, has long term history of diabetes and hypertension, presented to the ER complaining of chest pain radiating to his left shoulder, on investigations the patient was diagnosed to have inferior myocardial infarction complicated by papillary muscle rupture. On physical exam, the most likely finding will be?

- a. Apical mid diastolic murmur.
- b. Loud S2 .
- c. Right ventricular heave.
- d. Ejection systolic murmur over the Right 2nd intercostal space.
- e. Pansystolic murmur.

11-A 68-year-old female is being evaluated after she had an episode of syncope. She complains of having progressive exertional dyspnea over the last two months with an occasional dry cough. Cardiac auscultation findings over the apex gave rise to low pitched mid-diastolic murmur, it was best appreciated using the bell of the stethoscope. Which of the following best explains the physical findings in this patient?

- a. Tricuspid stenosis.
- b. Mitral stenosis.
- c. Mitral regurgitation.
- d. Atrial septal defect.
- e. Aortic stenosis.

12-A 55-Year-Old male, patient, heavy smoker, presented to ER shouting of severe diffuse vague abdominal pain of 1-day duration. associated with vomiting twice, and diarrhea twice too. On physical examination you find that his abdomen is soft with moderate diffuse tenderness not proportional to his shouting. According to this scenario, which of the followings is on top of your differential diagnoses:

- a. IVC Obstruction.
- b. Intestinal Obstruction.
- c. Obstructive Renal Stones.
- d. Mesenteric Ischemia.
- e. Malingering.

13-Which of the following indicates arterial claudication rather than venous claudication.

- a. Presence of lower limb cyanosis.
- b. Pain relieved by bending forward.
- c. Presence of lower limb edema.
- d. Pain relieved by leg elevation.

e. Pain relieved on stopping walking.

14-A 6 months old baby presented for check up. She was symptom free, but clinical examination revealed a heart murmur. which of the following is suggestive of a Ventricular septal defect:

- a. A short systolic murmur at the left sternal edge.
- b. An early diastolic murmur.
- c. Fixed splitting of the second heart sound.
- d. A systolic murmur maximal at the apex.
- e. A systolic murmur with thrill at the left sternal edge.

15-A 37 year old married lady, she is smoker, presented to the ED complaining of right iliac fossa pain of 1 day duration associated with vaginal spotting. Her abdomen was tender to palpation in the suprapubic region & there was cervical excitation, patient was hemodynamically unstable. The most likely diagnosis is:

- a. Ruptured ectopic pregnancy.
- b. Inflammatory pelvic disease.
- c. Perforated appendicitis.
- d. Right ovarian torsion.
- e. Cecal diverticulitis.

16-A 60 years old female Patient, has long term history of diabetes and hypertension. The patient had recent history of upper respiratory tract infection that lead to pericarditis. The patient presented to the ER 2 days later complaining of chest pain and shortness of breath. On physical exam the patient is hypotensive with elevated JVP, and diminished heart sounds. What is the most likely diagnosis?

- a. Pleural effusion.
- b. Cardiac Tamponade.
- c. Unstable Angina.
- d. Myocardial infarction.
- e. Pneumothorax.

17-Which of the following signs and related definitions is correctly matched:

- a. Iliopsoas sign: bruising in the loins.

- b. Chilaiditi's sign: Pain and arrest of inspiration upon palpation of gallbladder as the patient takes a deep breath.
- c. Murphy's sign: Jaundice and Palpable GB are likely to be due Extrahepatic Obstruction.
- d. Rovsing's sign: Palpation in the left iliac fossa produces pain in the right iliac fossa.
- e. Rebound tenderness sign: When rapidly removing your hand after deep palpation, the pain will decrease.

18-A 12-year-old girl with a background of Down syndrome presents for review.. Upon examination, she is found to have an ejection systolic murmur, louder during inspiration, with fixed splitting of the second heart sound. Which of the following is the most likely diagnosis?

- a. Tricuspid regurgitation.
- b. Mitral valve prolapse.
- c. VSD.
- d. ASD.
- e. Coarctation of aorta.

19-A 66 year old tall and thin gentleman presented to ER complaining of chest pain associated with dizziness and nausea, he described his chest pain to be tearing in nature and radiating to his back, his father suffered from hypertension and was diagnosed with myocardial infarction at the age of 70. Which of the following is LESS likely to be found upon evaluating this patient?

- a. History of connective tissue disorder.
- b. Left arm BP 185/100 mmhg and right arm BP 195/110 mmhg.
- c. History of smoking.
- d. Wide mediastinum on imaging.
- e. Radio-femoral pulse delay.

20-A 45 year old lady who has been previously diagnosed with hyperthyroidism presented to ER complaining of palpitations, and feeling unwell, after examining her you found a pulse of 165 bpm along with a pulse deficit of 42. What else do you expect to find on physical exam?

- a. Splitting of the second heart sound on auscultation.

- b. Irregularly irregular pulse.
- c. Cannon waves on JVP.
- d. Radio-radial delay.
- e. Slow rising pulse.

Answers

1	b	6	a/c	11	b	16	b
2	c	7	e	12	d	17	d
3	c	8	a	13	e	18	d
4	c	9	a	14	e	19	e
5	c	10	e	15	a	20	b

**Question 6 was omitted.

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3rd Quiz

1-A 35 year old pregnant lady complaining from right hand pain and numbness of 2 months duration without history of trauma, all of the following support your diagnosis of carpal tunnel syndrome, except:

- a. Thenar muscle atrophy
- b. Tinel's sign
- c. Loss of opposition of thumb
- d. Reproduction of symptoms by reverse prayer sign
- e. Forment's sign

2-A 40 years old female patient complains of left wrist and right elbow swelling and pain, started gradually accompanied by rash, scaly in appearance over her elbows and nail pitting, the most likely diagnosis:

- a. Septic arthritis
- b. Systemic lupus erythrematous
- c. rheumatoid arthritis
- d. Psoriatic arthritis

e. Reactive arthritis

3-A 14 years old boy, presented with high- spiking fevers in the evening of 2weeks duration, accompanied by a salmon- coloured skin rash, and arthralgia. The most likely diagnosis of the following is:

- a. Reactive arthritis
- b. Psoriatic arthritis
- c. SLE
- d. Felty Syndrome
- e. Still's disease

4-A 72 year old male patient complaining from dyscalculia, dyslexia, homonymous hemianopia and agnosia. lesion in which lobe can cause these symptoms.

- a. Frontal lobe
- b. Dominant parietal lobe
- c. None dominant parietal lobe
- d. Dominant side temporal lobe
- e. Non dominant side temporal lobe

5-A 30 year old lady, presented to your clinic complaining from bilateral hand joints pain of 2 months duration, that was gradual on onset, not radiating, associated with early morning Morning stiffness that relieved after 1 hour, mild swelling, erythema, relieved partially with ibuprofen, patient also complaining from eyes dryness, general fatigue. Upon examination there was tenderness over PIPS and MCP joints bilaterally with swelling, limited range of motion, ulnar deviation and swan neck deformities. What is the most likely diagnosis of this patient?

- a. Psoriatic arthritis
- b. Rheumatoid arthritis
- c. Mixed connective tissue disease
- d. Reactive arthritis
- e. SLE

6-A 39-year-old woman comes to the physician because of recurrent episodes of severe pain over her neck, back, and shoulders for the past year. The pain worsens with exercise and lack of sleep. Use of over-the-

counter analgesics have not resolved her symptoms. She also has stiffness of the shoulders and knees and tingling in her upper extremities that is worse in the morning. She takes escitalopram for generalized anxiety disorder and has a history of tension headaches several times a month. Her maternal uncle has ankylosing spondylitis. Examination shows marked tenderness over the posterior neck, bilateral mid trapezius, and medial aspect of the left knee. Muscle strength is normal. Laboratory studies, including a complete blood count, erythrocyte sedimentation rate, and thyroid-stimulating hormone are within the reference ranges. X-rays of her cervical and lumbar spine show no abnormalities. Which of the following is the most likely diagnosis?

- a. Polymyalgia rheumatic
- b. Rheumatoid arthritis
- c. ankylosing spondylitis
- d. SLE
- e. Fibromyalgia

7-All of the following signs are seen in cerebellar dysfunction except:

- a. Dysmetria
- b. Dyssynergia
- c. Delayed relaxation of the reflexes
- d. Hypotonia
- e. Intentional tremor

8-20-year-old lady presented to your clinic with heat intolerance of 3 months duration, Associated with weight loss despite normal appetite, diarrhea, amenorrhea, hand tremor, on examination vital signs was HR 105, RR 20, TEMP 37.4, BP 140/70, fine tremors on both hands, hyperreflexia, all of the following suggest the diagnosis of hyperthyroidism, except:

- a. Acropachy
- b. Goiter
- c. Exophthalmos
- d. Dry skin
- e. Pretibial myxedema

9-All of the following are in favor of an epileptic seizure rather than vasovagal syncope, EXCEPT:

- a. Amnesia following event
- b. Tonic - Clonic Convulsions
- c. Rapid recovery
- d. Lateral tongue biting
- e. Flush/cyanosed Complexion

10-A 25 years old female came to the clinic complaint of a headache associated with visual disturbances. While taking history, she reports that she also has galactorrhea and amenorrhea since five months, on lab examinations, she is found to have an elevated prolactin level, upon examination, her visual disturbance is most likely going to be:

- a. Bitemporal Hemianopia
- b. Right Homonymous Hemianopia
- c. Left Homonymous Hemianopia
- d. Left Inferior Quadrantinopia
- e. Right Superior Hemianopia

11-A 50 years old female patient, presented with headache, jaw claudication & scalp tenderness of 20 days duration. The most likely diagnosis of the following is:

- a. Temporal arteritis
- b. SLE
- c. Felty Syndrome
- d. Courvoisier's sign
- e. Still's disease

12-For a patient with hearing loss, what do the following results suggest? (Air conduction = AC, Bone conduction = BC) Rinne result: $BC > AC$ in left ear, $AC > BC$ in right ear; Weber result: Lateralises to left?

- a. Right sensorineural hearing loss
- b. Normal hearing
- c. Left sensorineural hearing loss
- d. Left conductive hearing loss
- e. Right conductive hearing loss

13-Patient comes to the ER complaining of right sided lower limb weakness of one hour duration. Upon examination power in left lower limb is 5/5

while it is 3/5 in his right lower limb. During examination, the patient insults the nurses and screams inappropriate words, he also has incontinence. This patient most probably has a lesion in the distribution of which of the following arteries:

- a. Middle cerebral artery
- b. Posterior cerebral artery
- c. Basilar artery
- d. Anterior cerebral artery
- e. Superior Cerebellar artery

14-A 70 year old male patient complaining from sleep disturbances, low mood, excessive salivation, resting tremor, upon examination he has stooped posture, shuffling, loss of arm swing and postural instability, slow motion, the most likely diagnosis is:

- a. Spinal cord disorder
- b. Cerebellar lesion
- c. Parkinson disease
- d. Hydrocephalus
- e. Functional neurological disorder

15-All of the following are red flags for Lower back pain except:

- a. Age <20
- b. Erectile dysfunction
- c. Saddle Anesthesia
- d. History of Depression
- e. Fever

16-A 58-year-old woman comes to the physician because of a 2-year history of progressively worsening pain in her knees and fingers. The knee pain is worse when she walks for longer than 30 minutes. When she wakes up in the morning, her fingers and knees are stiff for about 15 minutes. She cannot recall any trauma to the joints. She is otherwise healthy and only takes a multivitamin and occasionally acetaminophen for the pain. BMI is 31 kg/m². Her temperature is 36.9°C (98.4°F), pulse is 70/min, and blood pressure is 133/78 mm Hg. Examination of the lower extremities shows mild genu varum. Range of motion of both knees is limited; there is palpable crepitus. Complete flexion and extension elicit pain. Tender

nodules are present on the proximal and distal interphalangeal joints of the index, ring, and little fingers bilaterally. Which of the following is the most likely diagnosis?

- a. Lyme arthritis
- b. Pseudogout
- c. Osteoarthritis
- d. Rheumatoid arthritis
- e. Gout

17-A 45 year old male presented to ER complaining of severe headache. He was found to have photophobia and positive brudzinki test as well as kerning's test. Blood pressure 158/88, temperature 36.9, respiratory rate 18, pulse rate 95. Which of the following is the most likely cause of his signs and symptoms?

- a. Migraine
- b. Temporal Arteritis
- c. Cluster headache
- d. Subarachnoid hemorrhage
- e. Ischemic cerebrovascular accident

18-A 62 year old male patient on metformin and glimepiride for DM and was prescribed enalapril and thiazide recently for hypertension, he had an urinary tract infection recently and was treated with ciprofloxacin for 5 days. He presented to ER with gradual onset of ankle pain, he was diagnosed with Achilles tendon rupture, of the drugs he takes what is the drug that most likely caused his complaint.

- a. Metformin
- b. Glimepiride
- c. Enalapril
- d. Ciprofloxacin
- e. Thiazide

19-A 45 year old gentleman, presented to the ER with inability to close his left eye, on further examination you noticed loss of the left forehead wrinkles, loss of the left nasolabial fold, drooling of saliva, what would you suspect?

- a. Upper facial nerve palsy
- b. Stroke
- c. Upper trigeminal nerve palsy
- d. Lower trigeminal nerve palsy
- e. Lower facial nerve palsy

20-A 17 year old male with a recent history of a treated urinary tract infection 3 weeks ago presented to clinic due to redness and burning sensation in the eyes in addition to pain in his right knee that was swollen, red, tender and hot upon examination. What is the MOST likely cause of his knee symptoms?

- a. Reactive arthritis
- b. Ankylosing spondylitis
- c. Gout arthritis
- d. Septic arthritis
- e. Rheumatic fever

Answers

1	e	6	e	11	a	16	c
2	d	7	c	12	d	17	d
3	e	8	d	13	d	18	d
4	b	9	c	14	c	19	e
5	b	10	a	15	d	20	a

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