

“200” pages of MCQs

1. A 43-year-old man is receiving positive pressure ventilation on a respirator following a road traffic crash. His ABG shows a pH 7.54, pCO<sub>2</sub> 28mmHg, pO<sub>2</sub> 87mmHg, Bic 16 mmol/L. This blood gas shows:
  - a) pure respiratory alkalosis
  - b) respiratory alkalosis and hypoxaemia
  - c) respiratory alkalosis and metabolic acidosis
  - d) mixed respiratory and metabolic alkalosis
  - e) metabolic alkalosis with partial respiratory compensation
  
2. The antiarrhythmic with the highest efficacy in terminating stable monomorphic VT is
  - a) Isoprenaline
  - b) Adrenaline
  - c) Procainamide
  - d) Verapamil
  - e) Amiodarone
  
3. Formation of acetone occurs in poisoning with:
  - a) ethanol
  - b) methanol
  - c) ethylene glycol
  - d) isopranolol
  - e) acetaminophen
  
4. In statistics an alpha level of 0.001 means:
  - a) the study is overpowered
  - b) the study is underpowered
  - c) that it is very likely that a type II error has occurred
  - d) the probability of incorrectly accepting the null hypothesis is 1 in 1,000
  - e) the probability of incorrectly rejecting the null hypothesis is 1 in 1,000
  
5. In clinical trials the method of CPR with the best clinical outcome is:
  - a) conventional CPR
  - b) simultaneous compression ventilation CPR
  - c) active compression decompression CPR
  - d) interposed abdominal compression CPR
  - e) none of the above is better than the others

6. Uncuffed endotracheal tubes are routinely used for:
- a) tube sizes less than 6mm
  - b) acute epiglottitis
  - c) blind nasotracheal intubation
  - d) intubation with a MacIntosh blade
  - e) known fractured base of skull
7. Cricoid pressure was first described by:
- a) Hazell
  - b) Danzl
  - c) Sellick
  - d) Tintinalli
  - e) Meller
8. Homozygous pseudocholinesterase deficiency occurs with a frequency of
- a) 1 in 150
  - b) 1 in 500
  - c) 1 in 1,000
  - d) 1 in 3,000
  - e) 1 in 80,000
9. All of the following drugs can be used in rapid sequence induction except:
- a) atropine
  - b) fentanyl
  - c) pancuronium
  - d) atracurium
  - e) ketamine
10. The likely intact survival rate in paediatric cardiac arrest is:
- a) less than 1%
  - b) less than 10%
  - c) less than 25%
  - d) greater than 50%
  - e) worse if there is associated respiratory arrest
11. In paediatric resuscitation:

- a) endotracheal is the preferred route of drug administration
  - b) the dose of adrenaline is up to .1mg/kg
  - c) sodium bicarbonate is used at a dose of 5meq/kg
  - d) the airway will be improved by neck flexion
  - e) defibrillation is at a dose of 0.5 joules/kg
12. The following blood gases pH 7.17, pCO<sub>2</sub> 59, Bic 21, pO<sub>2</sub> 130 are most likely to be consistent with:
- a) diabetic ketoacidosis
  - b) diuretic overdose
  - c) premature twin baby
  - d) camphor ingestion with seizures
  - e) oliguria and renal failure
13. Normal saline contains sodium at:
- a) 162 mEq/L
  - b) 154 mEq/L
  - c) 145 mEq/L
  - d) 130 mEq/L
  - e) 110 mEq/L
14. All of the following are potential reactions to blood transfusion except:
- a) hypercalcaemia
  - b) hyperkalaemia
  - c) increased haemoglobin oxygen affinity
  - d) haemolysis
  - e) hypothermia
15. One of the major differences between morphine and pethidine relates to:
- a) analgesic efficacy
  - b) route of metabolism
  - c) ability to suppress cough
  - d) histamine release effects
  - e) abuse potential
16. Nitrous oxide can be safely used in a patient with:
- a) joint pain after diving
  - b) severe COAD
  - c) paralytic ileus
  - d) penetrating chest trauma

e) traumatic retinal detachment

17. An undistressed resting 1-year-old child would be expected to have a pulse of:

- a) 150
- b) 140
- c) 130
- d) 120
- e) 110

18. For blood pressure determination in a 6 year old child the cuff width should be:

- a) 3cms
- b) 4cms
- c) 5cms
- d) 6cms
- e) 7cms

19. During pregnancy:

- a) CVP gradually decreases
- b) oxygen reserve increase by about 20%
- c) diastolic blood pressure rises in the first trimester
- d) gastrointestinal motility increases
- e) blood volume increases by about 20% by term

20. The strongest wound suture is:

- a) silk
- b) prolene
- c) chromic cat gut
- d) nylon
- e) mersilene

21. Tetanus:

- a) typically has an incubation period of 2-3 days
- b) immunisation status is particularly poor in elderly women
- c) toxoid is more effective by S.C. injection
- d) IgG will provide passive protection for about a week
- e) immunisation is not safe in pregnancy

22. Oesophageal foreign bodies can be treated with all of the following except:

- a) Foley catheter
- b) sodium bicarbonate
- c) papain
- d) glucagon
- e) tartaric acid

23. The Glasgow Coma Scale:

- a) is a poor predictor of survival in head injury
- b) allocates a score of 3 to pain withdrawal response
- c) is the major component of the Revised Trauma Score
- d) is not suitable for use by trained first-aiders
- e) was developed in the New England regional trauma system

24. The commonest site of mandibular fracture is:

- a) coronoid process
- b) symphysis
- c) condyle
- d) ramus
- e) body

25. With regard to spinal injuries:

- a) the Jefferson fracture is a vertical compression injury
- b) the Jefferson fracture is usually stable
- c) the Clay Shovellers fracture is unstable
- d) the Hangman's fracture is an extension tear drop injury
- e) the Chance fracture typically occurs at the cervicothoracic junction

26. In spinal injuries the central cord syndrome:

- a) is a result of forced hyperflexion
- b) occurs typically in those with degenerative arthritis
- c) will be more clinically apparent in the lower limbs
- d) will produce ipsilateral motor paralysis
- e) will have position and vibration sense preserved

27. In attempted self hanging:

- a) cervical fractures are common

- b) death usually occurs from arterial obstruction
- c) steroids will prevent delayed cerebral oedema
- d) pulmonary oedema may be seen in survivors
- e) rarely cause long-term injury in survivors

28. Sternal fractures:

- a) are more likely in the over 65 age group
- b) have a 25% associated mortality
- c) mandate 24 hours of cardiac monitoring
- d) do not develop flail segments
- e) are prevented by seat belt use

29. Pericardial tamponade:

- a) will lower CVP below 5cm of water
- b) is common with severe blunt chest trauma
- c) may produce pulsus paradoxus
- d) usually presents as Beck's triad
- e) produces RBBB on the ECG

30. Major pancreatic injury:

- a) will be excluded by a normal serum amylase
- b) presents with minimal abdominal signs initially
- c) will nearly always be detected by peritoneal lavage
- d) is the second most common organ injury in penetrating trauma
- e) is the third most common organ injury in penetrating trauma

31. Peritoneal lavage:

- a) is absolutely contraindicated in pregnancy
- b) requires a RBC count of  $>100,000$  per  $\text{mm}^3$  to be considered positive
- c) has a complication rate of 5 - 10%
- d) has a high sensitivity for renal injuries
- e) has a false positive rate of 2 - 5%

32. With regard to orthopaedic injuries:

- a) the Salter Harris system classify metaphyseal injuries
- b) the Lis Franc injury is a tarso-metatarsal fracture dislocation
- c) the Chance fracture is usually unstable
- d) the Chauffeurs fracture involves the ulna styloid

e) the Barton fracture involves the distal articular surface of the ulna

33. Colles fracture:

- a) results from forced flexion of the wrist
- b) will often involve the articular surface of the radius
- c) is the reverse of a Smith's fracture
- d) is more common in men
- e) is associated with fractured ulna styloid in 20%

34. A posterior elbow dislocation:

- a) is reduced by traction and extension
- b) will frequently cause neurovascular compromise
- c) is mobilised at 3 - 5 days post injury
- d) rarely reduces spontaneously
- e) is caused by a fall on a supinated hand

35. Paediatric septic arthritis:

- a) is usually due to haemophilus influenzae
- b) is empirically treated with ceftriaxone or cefotaxime alone
- c) will show a joint aspirate cell count of  $>10,000 \text{ mm}^3$
- d) will show a joint aspirate with increased viscosity
- e) can often be diagnosed on plain radiography

36. Toxic shock syndrome:

- a) will often manifest without fever
- b) is a misnomer because BP is often maintained
- c) is caused by pseudomonas species
- d) often produces elevated creatinine kinase
- e) produces a discrete papular rash

37. Positive predictive value is:

- a) true positives divided by true positives plus false positives
- b) true negatives divided by false negatives plus true negatives
- c) false positives divided by false positives plus true negatives
- d) true positives divided by true positives plus false negatives
- e) test positives divided by true positives

38. Erysipelas
- a) responds to erythromycin
  - b) is caused strep pneumoniae
  - c) results from micro-organism exotoxin production
  - d) typically occurs on the neck
  - e) shares a similar aetiology to toxic epidermal necrolysis
39. Appropriate first aid management of brown snake envenomation includes:
- a) arterial tourniquet
  - b) suction drainage of the wound
  - c) wound incision
  - d) aspirin 300mg orally
  - e) splinting of the joint above the injury
40. Box jellyfish envenomation:
- a) can be treated pre-hospital with IV antivenom
  - b) involves tetrodotoxin like blue ringed octopus
  - c) is minimised by washing of nematocysts with fresh water
  - d) can occur as far south as Sydney in mid summer
  - e) causes death by fulminant hepatic failure
41. Using the Parkland formula in burns management:
- a) metabolic acidosis is allowed to persist
  - b) SSD cream is applied at the rate 2gm/% area burnt
  - c) skin grafting can be predicted for burns >10% surface area
  - d) 4ml/kg/% body surface burn is infused per day
  - e) half the total requirement is given in the first 4 hours
42. In hypothermia:
- a) J waves are best seen in leads III and AVF
  - b) atrial fibrillation is the commonest rhythm below 32°C
  - c) insulin at reduced dose is the treatment of choice for hyperglycaemia
  - d) alcohol is to a degree thermoprotective
  - e) rewarming with bypass carries the highest risk of core after drop
43. The most effective method of cooling in heat-stroke is:
- a) IV dantrolene
  - b) cold IV fluids



- c) cooling blankets
- d) ice packs in the groin and axillae
- e) fan and sponge with tepid water

44. The following drugs can be used in the treatment of true heat stroke:

- a) chlorpromazine
- b) Phenobarbitone
- c) mannitol
- d)  $\text{NaHCO}_3$
- e) all of the above

45. In lightning injury:

- a) in a mass casualty situation the apparently dead nearly always die
- b) in an arrested patient cardiac massage is the highest priority
- c) tympanic membrane rupture is common
- d) the classic skin burn resembles an inverted pine tree pattern
- e) myoglobinuric renal failure is a common sequelae

46. Regarding drowning and near drowning:

- a) fresh water immersion is treated with hypertonic saline
- b) altered mental status on ED arrival is a grave prognostic sign
- c) those who die usually aspirate less than 20ml/kg
- d) sudden death on immersion may be due to vocal cord spasm
- e) prophylactic antibiotics (e.g. ceftriaxone) are used routinely

47. In asthma:

- a) the white blood cell count will often be elevated
- b) the ECG may show signs of acute left heart strain
- c) a CXR should be routine in all patients admitted
- d) blood gas results correlate well with pulmonary function testing
- e) theophylline dosing needs to be increased if erythromycin is given

48. In a patient with COAD and cor pulmonale, a rapid irregular tachycardia:

- a) could be empirically treated with digoxin
- b) is well managed with titrated IV beta blocker
- c) will be improved by inducing alkalosis
- d) nifedipine may provide useful rate control
- e) ipratropium is unlikely to increase the heart rate

49. Regarding pleural effusion all of the following are true EXCEPT:
- a) can be tapped to make a diagnosis of pancreatitis
  - b) can be detected radiographically when 10ml of fluid is present
  - c) is most commonly caused by congestive cardiac failure
  - d) can result from rheumatoid arthritis
  - e) will not produce mediastinal shift
50. Sore throat is caused by all of the following EXCEPT:
- a) neisseria gonorrhoea
  - b) Mycoplasma pneumoniae
  - c) bacteroides fragilis
  - d) Cytomegalovirus
  - e) corynebacterium diphtheriae
51. Regarding empirical antibiotic therapy in pneumonia:
- a) ceftazidime is used for atypical pneumonia
  - b) clindamycin is used for aspiration pneumonia
  - c) acyclovir is used for post influenza pneumonia
  - d) erythromycin is used for PCP pneumonia
  - e) amoxicillin alone is used for neonates with pneumonia
52. Use of amiodarone:
- a) causes long term corneal deposits commonly
  - b) causes hypertension when used acutely
  - c) is contraindicated in WPW syndrome
  - d) is likely to decrease digoxin levels
  - e) has efficacy similar to esmolol in PSVT
53. With regards to pulmonary embolism:
- a) pleuritic chest pain is the most common symptom
  - b) cigarette smokers are at increased risk
  - c) fever is infrequent
  - d) thrombolysis is achieved with SK 100,000 units stat
  - e) the commonest ECG change is right axis deviation
54. ST segment elevation on a 12 lead ECG could be due to all of the following EXCEPT:
- a) a pericardiocentesis needle

- b) LBBB when seen in V6
- c) hyperkalaemia
- d) hypothermia
- e) subarachnoid haemorrhage

55. The strongest indication for pacing a patient with AMI is:

- a) new RBBB with 1st degree AV block
- b) new LBBB with 1st degree AV block
- c) pre-existing bifascicular block with 1st degree AV block
- d) new bifascicular block
- e) pre-existing LBBB

56. The clinical trial that showed that patients with acute myocardial infarction manifesting as ST depression on ECG do worse with thrombolysis was:

- a) TIMI - I
- b) ISIS - I
- c) ISIS - II
- d) GISSI
- e) GUSTO

57. In a patient presenting with possible thoracic aortic dissection the investigation with the best sensitivity and specificity is:

- a) transthoracic echocardiography
- b) transoesophageal echocardiography
- c) CT scan
- d) aortography
- e) MRA

58. Henoch - Schönlein purpura:

- a) represents a vasculitis of large arteries
- b) is most common in spring
- c) is usually most obvious on the head and neck
- d) will not involve abdominal organs
- e) typically occurs in adolescents

59. Axillary vein thrombosis:
- a) causes pulmonary embolism in 1 - 2% of patients
  - b) is best diagnosed by colour flow Doppler study
  - c) has no associated genetic predisposition
  - d) does not respond to thrombolytic therapy
  - e) is associated with IV drug abuse

60. The Major Jones criteria for rheumatic fever include:
- a) migratory arthralgia
  - b) erythema marginatum
  - c) raised ESR or CRP
  - d) St Vitus dance
  - e) valvular heart disease

**PART 2 MCQ EXAM ANSWERS:**

1. C
2. B
3. E
4. E
5. E
6. A
7. C
8. D
9. C
10. B
11. B
12. D
13. B
14. A
15. C
16. E
17. D
18. E
19. A
20. B
21. B
22. C
23. C
24. C
25. A
26. B
27. D
28. A
29. C
30. B

**PART 2 MCQ EXAMS ANSWERS**

31. E
32. B
33. C
34. C
35. C
36. D
37. A

- 38. A
- 39. E
- 40. A
- 41. D
- 42. B
- 43. E
- 44. E
- 45. C
- 46. C
- 47. A
- 48. E
- 49. E
- 50. C
- 51. B
- 52. A
- 53. B
- 54. B
- 55. D
- 56. D
- 57. E
- 58. B
- 59. E

**FACEM PART TWO  
PRACTICE MCQ  
60 QUESTIONS  
SELECT THE ONE CORRECT ANSWER  
TIME ALLOWED 90 MINS**

- 1) With horizontal gaze ophthalmologic in a stupor us alcoholic which of the following is the most likely diagnosis
  - a) Multiple sclerosis
  - b) Wernicke's encephalopathy
  - c) Tuberculous meningitis
  - d) Huntington's chorea
  - e) Hepatic encephalopathy
  
- 2) Following a fall from a horse, a jockey arrives in casualty complaining of left lower chest pain. Pulse 110, P 95/60. There is tenderness over the left lower ribs and left hypochondria. Radiographs of the chest show fractures of the 8<sup>th</sup> and 9<sup>th</sup> rib on the left side but the lung fields are normal. You would now advise
  - a) Strapping the chest, analgesics and rest at home
  - b) Admission to hospital for observation
  - c) Early laparotomy
  - d) Exploratory thoracotomy
  - e) Abdominal CT

- 3) Which of the following indicates an especially poor prognosis for a patient with acute hemorrhagic pancreatitis
- Serum amylase level greater than 2000 u/L
  - Arterial pO<sub>2</sub> steady at 60 mmHg
  - Hematocrit of 46%
  - Increased serum bilirubin concentration
  - Raised lactic dehydrogenase in serum
- 4) A patient with a perforated duodenal ulcer is to be operated on six hours after perforation. Pre-operative preparation included administration of antibiotics and 500ml of Hartmann's solution IV. The patient becomes markedly hypotensive upon induction of anaesthesia. Which of the following is the most likely cause of the hypotension
- Plasma volume deficit
  - Bacteraemic shock
  - Adrenal insufficiency
  - Inadequate depth of anaesthesia
  - Bleeding
- 5) A 25 year old farm hand was involved in a motor accident and sustains fractures of the 10-11<sup>th</sup> rib on the left side. He has no other injuries and after three days, he complains of abdominal pain, and on reaching casualty is found to have a BP of 70 systolic, pulse 120. The abdomen is a little distended and diffusely tender with some rebound tenderness. Which of the following is the most likely diagnosis
- Peritonitis from a perforated bowel
  - Delayed rupture of the spleen
  - Secondary haemorrhage from a ruptured kidney
  - Haemothorax
  - Traumatic pancreatitis
- 6) In caring for patients in a geriatric ward, you would be conscious that the commonest cause of diarrhoea in bedridden people is
- Infection
  - Carcinoma of the rectum
  - Faecal impaction
  - Change of diet
  - Diverticulitis
- 7) A 40 year old man is admitted to the hospital after having been treated for severe gas pains in the right lower quadrant. The evening before admission, he had a rigor. Examination discloses an obviously ill man with a temperature of 40 degrees whose skin is cool, dry and pale, pulse is rapid. He is slightly hypertensive and there is a tender right lower quadrant mass on palpation. The greatest immediate concern is
- Impending hypovolaemia
  - Impending paralytic ileus
  - Early gram-negative septicaemia
  - Impending cardiac failure
  - Perforated carcinoma of the cecum

- 8) A 42 year old female had diarrhoea, tremor, heart failure and weight loss. 5HIAA excretion is normal. Which of the following is the most likely diagnosis
- a) Thyrotoxicosis with heart failure
  - b) Carcinoid syndrome with heart failure
  - c) Chron's disease
  - d) Celiac disease
  - e) Alcoholic myocarditis
- 9) A 37 year old housewife presents with a 2 week history of severe pain in the rectum after defecating. She has been constipated since the last pregnancy four months ago when she first developed piles. The most probably cause for her pain is
- a) Fissure in ano
  - b) Thrombosed haemorrhoids
  - c) Perianal haematoma
  - d) Proctalgia fugax
  - e) Rectocele
- 10) In acute liver disease, which of the following implies the worst prognosis
- a) Serum albumin 35 gm/L
  - b) Serum bilirubin 185 umol/L
  - c) ALU 1250 u/L
  - d) Prothrombin time of 39 sec (control 13sec) before and 42 sec 24 hours after 10mg IV vitamin K
  - e) Serum alkaline phosphatase 150 u/L
- 11) An alcoholic patient is admitted with severe abdominal pain, shock and vomiting. His appendix was removed two years earlier, minimal tenderness and guarding is present on examination of his abdomen. Which of the following is the most likely diagnosis
- a) Perforated peptic ulcer
  - b) Acute pancreatitis
  - c) Biliary colic
  - d) Acute exacerbation of a peptic ulcer
  - e) Alcoholic hepatitis
- 12) An Italian boy aged 12 months appears very pale and is noted to have marked hepatosplenomegaly. Hg is 5.0; the blood film shows marked hypochromia and nucleated red blood cells. Which of the following is the most likely diagnosis
- a) Sickle cell anaemia
  - b) Lead poisoning
  - c) Iron deficiency anaemia
  - d) Thalassemia major
  - e) Acute leukaemia



13) A 70 year old male presented with lassitude. The spleen is palpable to the level of the umbilicus. The blood count is: Hg 9.0, PCV .290, and total leukocytes 150,000,000,000/L platelets normal. Differential count blasts 5%, promyelocyte 8%, myelocyte 15%, metamyelocytes 25%, neutrophil 32%, eosinophil 6%, basophils 4%, lymphocytes 5%/ Which of the following is the most likely diagnosis

- a) Acute myeloblastic leukaemia
- b) Myelofibrosis
- c) Chronic myeloid leukaemia
- d) Carcinoma of the prostate with marrow involvement
- e) Hodgkin's disease

14) Mallory Weiss syndrome is characterised by

- a) Tear in the esophagus
- b) Tear in the gastric mucosa
- c) Tear in the mucosa of gastroesophageal junction
- d) Bleeding from gastric polyp
- e) Capillary haemangioma of stomach

15) A 56 year old right handed male presented with sudden onset of severe right sided hemi paresis involving his face, arm and leg, but no sensory loss or dysphasia. Which of the following is the most likely diagnosis?

- a) Embolus to the middle cerebral artery
- b) Carotid occlusion in the neck
- c) Hypertensive vascular disease in the internal capsule vessels
- d) Putaminal haemorrhage
- e) Todd's paralysis

16) You are called to see a middle aged woman whom you have attended for epilepsy for many years, because she had just had a grand mal seizure at home. She has been taking phenytoin sodium 100 mg tds and has NOT had an attack for at least 4 years. You find her conscious and slightly confused. In considering immediate drug therapy which of the following should you administer

- a) Phenobarbitone 100mg IM
- b) Phenytoin sodium 100mg SC
- c) Diazepam 10mg IV
- d) Paraldehyde 10ml deep IM
- e) None of the above

17) A 50 year male presented with a 3 month history of progressive muscle weakness, increased skin and mucosal pigmentation and some peripheral oedema. Plasma K 2.6 mmol/L (normal 3.5 – 5) and bicarbonate 35 mmol/L (normal 24 – 29). CXR suggests a hilar mass. It is most probably that he has

- a) Addison's disease from adrenal metastasis
- b) Very high plasma ACTH
- c) Facial and truncal features of Cushing's syndrome
- d) Squamous cell carcinoma of lung
- e) Vasopressin secreting carcinoma of lung

18) A diabetic develops a third nerve palsy. Which of the following findings would favour diabetes as being the cause

- a) Ptosis
- b) Downward and inner looking eye
- c) Normal pupil
- d) Enophthalmos
- e) Lack of sweating

19) Which of the following is NOT typical of scabies

- a) Severe nocturnal itch
- b) Popular urticaria
- c) Face and back equally affected
- d) Scabies tracts often in web spaces and sides of fingers
- e) Response to Lorexane (gamma benzene hexachloride)

20) The most sensitive index of hypothyroidism is

- a) Raised plasma TSH levels
- b) Presence of goitre
- c) Low plasma thyroxine levels
- d) Hung up ankle jerks
- e) Raised serum cholesterol

21) A 30 year old man previously in good health over three days develops headache, fever and becomes drowsy. Examination shows signs of meningeal irritation and a routine CXR shows a well rounded opacity approximately 2cm in diameter in the right lung. Which of the following is the most likely diagnosis?

- a) Torullosis (cryptococcosis)
- b) Sarcoidosis
- c) Primary pulmonary neoplasm
- d) Disseminated tuberculosis
- e) Multiple secondaries from a melanoma

22) In the life cycle of taenia echinococcus in Australia, man is usually

- a) A primary host
- b) An intermediate host
- c) Only accidental host
- d) Infested by the parasite entering via unbroken skin
- e) Found to excrete ova for 3-6 months after infestation

23) A 5 year old male presents with an acutely painful left leg and temperature of 39.5. Which of the following is the most likely diagnosis?

- a) Scurvy
- b) Rickets
- c) Synovitis of the hip
- d) Osteomyelitis
- e) Perthe's disease

- 24) An 8 year female presents with a fever of 39. Physical examination reveals membranous tonsillar exudates, generalised lymphadenopathy, hepatosplenomegaly, and faint macular rash. Which of the following would most likely be found
- a) Raised antistreptolysin titre
  - b) Atypical lymphocytes in peripheral blood film
  - c) Bone marrow shows lymphatic leukaemia
  - d) Cytomegalic inclusion bodies in cells from the urinary tract
  - e) Positive Schick test

25) Secretory otitis media

- a) Is rare before the age of 5 years
- b) Is most common in summer
- c) May be discounted as a cause of learning problems at school
- d) Is NOT associated with otalgia
- e) Frequently runs a fluctuating course

- 26) An 8 year old male presents with an acute attack of wheezing. He has a past history of recurrent episodes of wheezing since the age of 5 years and has been well in between attacks. On examination he has minimal thoracic movement with hyperinflation. Breath sounds and sibilant rhonchi are barely audible on auscultation. Which of the following is the most likely diagnosis?
- a) Bronchiolitis
  - b) Inhaled foreign body
  - c) Cystic fibrosis
  - d) Asthma
  - e) Bronchiectasis
- 27) Corticosteroids are usually indicated in the management of
- a) Aplastic anaemia
  - b) Severe infantile eczema
  - c) Minimal change nephritic syndrome
  - d) Acute post streptococcal glomerulonephritis
  - e) Exercise induced asthma
- 28) A 3 year old child who has recently been adequately immunised cut his wrist on a clean broken glass. One examination 3 hours later, the child was able to flex the wrist weakly, flex the metacarpophalangeal joints of the index and long fingers, the ring and little fingers completely and extend all digits completely but could NOT flex the interphalangeal joints, the distal phalanx of the thumb or abduct the thumb. The skin of the volar aspect of the thumb, index and long fingers felt drier to touch than the ulnar border of the palm. It was impossible to test sensation. Which is most appropriate?
- a) Remove the dressing and examine the wound in the emergency room to determine the extent of the injury
  - b) Begin antibiotic therapy and suture the skin in the emergency room
  - c) Prepare the child for repair of the injury in the operating room
  - d) Begin antibiotic therapy and have the child brought back in 4 days for delayed primary repair of the injury
  - e) Delay definitive repair for 6 weeks
- 29) A 28 year old male has suffered for 6 years from a recurrent ulcer in the medial aspect of his left lower leg. 8 years ago he suffered a fractured femur. The cause of this ulcer is most likely to be?
- a) Diabetes
  - b) Syphilis
  - c) Perforator vein incompetence
  - d) Arterial injury
  - e) Osteomyelitis
- 30) X-ray of a 45 year old man shows an expanding rarefying bone lesion of the right humerus which is diagnosed as anaplastic carcinoma on biopsy. No other bony lesions are found. The patient has a continuous fever for the past three weeks. The metastatic lesion most likely arises from the.
- a) Kidney
  - b) Liver
  - c) Testis
  - d) Stomach
  - e) Prostate

31) Which of the following statements is true with regard to fibro muscular dysplasia of the renal artery

- a) It is more common in men than in women
- b) It occurs more frequently in multiparous than in nulliparous women
- c) It usually occurs after the age of 60
- d) It is usually associated with aortic disease
- e) It frequently occurs in women who have had early menopause

32) 1% lignocaine with 1/100,000 adrenaline should NOT be injected into the tissues to produce

- a) Digital nerve ring block
- b) Mandibular nerve block
- c) Intercostals nerve block
- d) Supraclavicular brachial plexus block
- e) Axillary brachial plexus block

33) 36 hours after a moderate myocardial infarction, a 60 year old man develops abdominal pain without abdominal tenderness. Over the next 36 hours the abdomen becomes tender, he develops diarrhoea and mild jaundice, fever of 38C and hypotension. Plain x-ray examination of the abdomen reveals distended loops of small intestine with some fluid levels. Which of the following is the most likely diagnosis?

- a) Volvulus of the right colon
- b) Mesenteric arterial embolism
- c) Acute pancreatitis
- d) Heparin induced bleeding
- e) Non-occlusive mesenteric ischemia

- 34) After a surgical procedure a patient breathing room air has an arterial pH of 7.32, pCO<sub>2</sub> of 24 and pO<sub>2</sub> of 85. The most likely cause of these findings is
- a) Uncompensated metabolic acidosis
  - b) Uncompensated respiratory acidosis
  - c) Compensated metabolic acidosis
  - d) Compensated respiratory acidosis
  - e) Hypoxemia
- 35) A 70 year old male presents with pain in the left calf after walking a distance of two blocks. The pain is relieved promptly by rest. The most common cause of this symptom complex is
- a) Thrombosis of the deep veins of the thigh and calf
  - b) Pressure on the posterior lumbar nerve roots
  - c) Segmental occlusion of the aortic bifurcation
  - d) Obstruction of the profunda femoris
  - e) Obstruction of the superficial femoral artery
- 36) A 20 year old man is brought to the accident centre after a motor car accident. His only injury involves his left leg which is seen to be shortened, flexed at the hip and internally rotated. Which of the following is the most likely diagnosis?
- a) Central dislocation of the hip
  - b) Fractured neck of femur
  - c) Fractured pelvis
  - d) Fractured shaft of femur
  - e) Posterior dislocation of the hip
- 37) A 25 year old female presents with a 2 month history of painless mass appearing in the neck. Examination shows a 5cm fluctuant smooth round mass in the upper anterior triangle of the neck partly covered by the upper one third of the sternomastoid. Which of the following is the most likely diagnosis?
- a) Hodgkin's' lymphoma
  - b) Thyroglossal cyst
  - c) Salivary gland tumour
  - d) Branchial cyst (lateral lymphoepithelial cyst)
  - e) Tuberculous lymphadenitis

- 38) 5 days after anterior resection for carcinoma of the rectum, a 55 year old man was found to have copious serosanguinous discharge from his abdominal wound. Which of the following is the most likely diagnosis?
- a) Staphylococcal wound infection
  - b) Streptococcal wound infection
  - c) Wound infection with gram negative organisms
  - d) Wound dehiscence
  - e) Liquefying haematoma in the wound
- 39) A primigravida at 36 weeks gestation presents with a history of NOT having felt foetal movements for 24 hours. Which of the following statements is most appropriate?
- a) She has an intra uterine foetal death
  - b) You should immediately arrange transfer to the labour ward for early induction of labour
  - c) She should have an urgent antenatal cardiotocography
  - d) She should have an ultrasound scan
  - e) Urgent serum estriole assay should be arranged
- 40) A woman 35 weeks pregnant is admitted to hospital having lost a small amount of blood per vagina. The foetal heart rate is normal on admission. Having carried out cross matching of blood what is the next step in management
- a) Inspect the cervix
  - b) Vaginal examination
  - c) Uterine ultrasound
  - d) Estimate serum estriol
  - e) Monitor foetal heart rate
- 41) A 40 year old woman complains of being 14 days overdue with her period. Pregnancy as a cause can be reliably excluded by
- a) Vaginal examination
  - b) Plasma B HCG
  - c) Urinary HCG assay
  - d) Ultrasonography
  - e) Plasma FSH
- 42) A woman with a twin pregnancy at 35 weeks gestation comes into labour unexpectedly and you are required to conduct the delivery. After delivery of the first twin, the next step in management would include
- a) Rupture the membranes
  - b) Check the position of the second twin
  - c) Wait for nature to take its course
  - d) Check the foetal heart rate
  - e) Stimulate contractions

43) Hypertension in pregnancy should NOT be treated with

- a) Methyl dopa
- b) Diazoxide
- c) Hydralazine
- d) Isoprenolol
- e) Thiazide diuretics

44) A patient consults you in early weeks of her pregnancy and is unsure of the duration of amenorrhea. Which of the following would enable you to estimate most accurately the date of her confinement

- a) Onset of foetal movements
- b) Size of the uterus at 10 weeks
- c) Size of the uterus at 16 weeks
- d) Ultrasound at 14 weeks
- e) Ultrasound at 34 weeks

45) A woman 6 weeks post partum presents with persistent and sometimes heavy vaginal bleeding. What is your first step in management

- a) Administration of iron
- b) Inspection of the cervix
- c) Dilation and curettage
- d) Ergometrine tablets
- e) Administration of the contraceptive pill

46) The most common mode of presentation of a patient with uterine fibroids is

- a) Asymptomatic abdominal mass
- b) Menorrhagia
- c) Recurrent abortion
- d) Pressure symptoms
- e) Pelvic pain

47) Which of the following conditions may result in profuse mucus secretion per rectum to the extent of electrolyte disturbances

- a) Ulcerative colitis
- b) Carcinoma of the rectum
- c) Villous adenoma
- d) Diverticular disease
- e) Haemorrhoids

48) Which of the following is least likely to be found in household pets

- a) Toxocara canis
- b) Toxoplasma gondii
- c) Campylobacter jejuni
- d) Shigella sonnei
- e) Salmonella typhimurium



- 49) A 3 year old male presents with fever and unilateral swelling over his temporomandibular joint. After a few days this swelling disappeared but another one appeared on the other side. The most common complication of this condition is
- Meningoencephalitis
  - Orchitis with sterility
  - Myocarditis
  - Blocked parotid ducts
  - Pancreatitis
- 50) Which of the following may be a complication ulcerative colitis
- Cholestatic jaundice
  - Vesico-colic fistula
  - B12 deficiency
  - Peptic ulceration
  - Aphthous stomatitis
- 51) In a patient with carpal tunnel syndrome, you are most likely to find
- A history of preceding irregularity in the menstruation
  - Consistent nocturnal pain
  - Paraesthesia in the exact distribution of the median nerve
  - Weakness of the hand
  - Inability to flex the wrist
- 52) Severity of mitral stenosis is best detected by
- Auscultation
  - ECG
  - X-ray
  - Loud first heart sound
  - Echocardiography
- 53) The first step necessary for the resuscitation of the asphyxiated infant at birth is
- Oxygenation using face mask
  - Infusion of bicarbonate IV
  - Administration of narcotic antagonist
  - Suction of oropharynx
  - Cardiac compression
- 54) X-ray evidence of acute osteomyelitis appears by the
- 2<sup>nd</sup> day
  - 14<sup>th</sup> day
  - 22<sup>nd</sup> day
  - 35<sup>th</sup> day
  - 60<sup>th</sup> day

55) Which of the following is the safest route for the administration of oxytocic drugs for the induction of labour

- a) Oral
- b) Buccal
- c) Nasal
- d) Intramuscular
- e) Intravenous

56) Which of the following is characterised by cyanosis

- a) Eisenmenger syndrome
- b) Arterial septal defect
- c) Patent ductus arteriosus
- d) Ventricular septal defect
- e) All of the above

57) A child presents with bitemporal hemianopia. Which of the following is the most likely site of the lesion

- a) Optic radiation of the visual cortex
- b) Region of the optic chiasm
- c) Optic tract
- d) Optic nerve
- e) Temporal lobe

58) Kohler's disease represents osteochondrosis of which of the following bones

- a) Tuberosity of tibia
- b) Tarsal navicular
- c) Patella
- d) Medial tibial condyle
- e) Metatarsal

59) Aseptic necrosis of the capital femoral epiphysis is also called

- a) Osgood-Schlatter disease
- b) Subluxation of the head of the radius
- c) Legg-Calve-Perthe's disease
- d) Slipped femoral epiphysis
- e) Congenital Subluxation of the hip

60) The most serious early complication of any fracture is

- a) Nerve injury
- b) Soft tissue infection
- c) Arterial injury
- d) Deformity which can NOT be reduced by manipulation on GA
- e) Osteomyelitis of the fracture site

## ANSWERS

1.	<b>b</b>	31.	<b>b</b>
2.	<b>e</b>	32.	<b>a</b>
3.	<b>e</b>	33.	<b>e</b>
4.	<b>a</b>	34.	<b>c</b>
5.	<b>b</b>	35.	<b>e</b>
6.	<b>c</b>	36.	<b>e</b>
7.	<b>c</b>	37.	<b>d</b>
8.	<b>a</b>	38.	<b>d</b>
9.	<b>a</b>	39.	<b>c</b>
10.	<b>d</b>	40.	<b>c</b>
11.	<b>b</b>	41.	<b>b</b>
12.	<b>d</b>	42.	<b>b</b>
13.	<b>c</b>	43.	<b>e</b>
14.	<b>c</b>	44.	<b>d</b>
15.	<b>c</b>	45.	<b>c</b>
16.	<b>e</b>	46.	<b>b</b>
17.	<b>b</b>	47.	<b>c</b>
18.	<b>c</b>	48.	<b>d</b>
19.	<b>c</b>	49.	<b>a</b>
20.	<b>a</b>	50.	<b>a</b>
21.	<b>a</b>	51.	<b>b</b>
22.	<b>c</b>	52.	<b>e</b>
23.	<b>d</b>	53.	<b>d</b>
24.	<b>b</b>	54.	<b>b</b>
25.	<b>e</b>	55.	<b>e</b>
26.	<b>d</b>	56.	<b>a</b>
27.	<b>c</b>	57.	<b>b</b>
28.	<b>c</b>	58.	<b>b</b>
29.	<b>c</b>	59.	<b>c</b>
30.	<b>a</b>	60.	<b>c</b>

61. A 43-year-old man is receiving positive pressure ventilation on a respirator following a road traffic crash. His ABG shows a pH 7.54, pCO<sub>2</sub> 28mmHg, pO<sub>2</sub> 87mmHg, Bic 16 mmol/L. This blood gas shows:
- a) pure respiratory alkalosis
  - b) respiratory alkalosis and hypoxaemia
  - c) respiratory alkalosis and metabolic acidosis
  - d) mixed respiratory and metabolic alkalosis
  - e) metabolic alkalosis with partial respiratory compensation
62. The antiarrhythmic with the highest efficacy in terminating stable monomorphic VT is
- a) Isoprenaline
  - b) Adrenaline
  - c) Procainamide
  - d) Verapamil
  - e) Amiodarone

63. Formation of acetone occurs in poisoning with:
- a) ethanol
  - b) methanol
  - c) ethylene glycol
  - d) isopranolol
  - e) acetaminophen
64. In statistics an alpha level of 0.001 means:
- a) the study is overpowered
  - b) the study is underpowered
  - c) that it is very likely that a type II error has occurred
  - d) the probability of incorrectly accepting the null hypothesis is 1 in 1,000
  - e) the probability of incorrectly rejecting the null hypothesis is 1 in 1,000
65. In clinical trials the method of CPR with the best clinical outcome is:
- a) conventional CPR
  - b) simultaneous compression ventilation CPR
  - c) active compression decompression CPR
  - d) interposed abdominal compression CPR
  - e) none of the above is better than the others
66. Uncuffed endotracheal tubes are routinely used for:
- a) tube sizes less than 6mm
  - b) acute epiglottitis
  - c) blind nasotracheal intubation
  - d) intubation with a MacIntosh blade
  - e) known fractured base of skull
67. Cricoid pressure was first described by:
- a) Hazell
  - b) Danzl
  - c) Sellick
  - d) Tintinalli
  - e) Meller
68. Homozygous pseudocholinesterase deficiency occurs with a frequency of
- 69.
- a) 1 in 150

- b) 1 in 500
- c) 1 in 1,000
- d) 1 in 3,000
- e) 1 in 80,000

70. All of the following drugs can be used in rapid sequence induction except:

- a) atropine
- b) fentanyl
- c) pancuronium
- d) atracurium
- e) ketamine

71. The likely intact survival rate in paediatric cardiac arrest is:

- a) less than 1%
- b) less than 10%
- c) less than 25%
- d) greater than 50%
- e) worse if there is associated respiratory arrest

72. In paediatric resuscitation:

- a) endotracheal is the preferred route of drug administration
- b) the dose of adrenaline is up to .1mg/kg
- c) sodium bicarbonate is used at a dose of 5meq/kg
- d) the airway will be improved by neck flexion
- e) defibrillation is at a dose of 0.5 joules/kg

73. The following blood gases pH 7.17, pCO<sub>2</sub> 59, Bic 21, pO<sub>2</sub> 130 are most likely to be consistent with:

- a) diabetic ketoacidosis
- b) diuretic overdose
- c) premature twin baby
- d) camphor ingestion with seizures
- e) oliguria and renal failure

74. Normal saline contains sodium at:
- a) 162 mEq/L
  - b) 154 mEq/L
  - c) 145 mEq/L
  - d) 130 mEq/L
  - e) 110 mEq/L
75. All of the following are potential reactions to blood transfusion except:
- a) hypercalcaemia
  - b) hyperkalaemia
  - c) increased haemoglobin oxygen affinity
  - d) haemolysis
  - e) hypothermia
76. One of the major differences between morphine and pethidine relates to:
- a) analgesic efficacy
  - b) route of metabolism
  - c) ability to suppress cough
  - d) histamine release effects
  - e) abuse potential
77. Nitrous oxide can be safely used in a patient with:
- a) joint pain after diving
  - b) severe COAD
  - c) paralytic ileus
  - d) penetrating chest trauma
  - e) traumatic retinal detachment

78. An undistressed resting 1-year-old child would be expected to have a pulse of:
- a) 150
  - b) 140
  - c) 130
  - d) 120
  - e) 110
79. For blood pressure determination in a 6 year old child the cuff width should be:
- a) 3cms
  - b) 4cms
  - c) 5cms
  - d) 6cms
  - e) 7cms
80. During pregnancy:
- a) CVP gradually decreases
  - b) oxygen reserve increase by about 20%
  - c) diastolic blood pressure rises in the first trimester
  - d) gastrointestinal motility increases
  - e) blood volume increases by about 20% by term
81. The strongest wound suture is:
- a) silk
  - b) prolene
  - c) chromic cat gut
  - d) nylon
  - e) mersilene
82. Tetanus:
- a) typically has an incubation period of 2-3 days
  - b) immunisation status is particularly poor in elderly women
  - c) toxoid is more effective by S.C. injection
  - d) IgG will provide passive protection for about a week
  - e) immunisation is not safe in pregnancy
83. Oesophageal foreign bodies can be treated with all of the following except:



- a) Foley catheter
- b) sodium bicarbonate
- c) papain
- d) glucagon
- e) tartaric acid

84. The Glasgow Coma Scale:

- a) is a poor predictor of survival in head injury
- b) allocates a score of 3 to pain withdrawal response
- c) is the major component of the Revised Trauma Score
- d) is not suitable for use by trained first-aiders
- e) was developed in the New England regional trauma system

85. The commonest site of mandibular fracture is:

- a) coronoid process
- b) symphysis
- c) condyle
- d) ramus
- e) body

86. With regard to spinal injuries:

- a) the Jefferson fracture is a vertical compression injury
- b) the Jefferson fracture is usually stable
- c) the Clay Shovellers fracture is unstable
- d) the Hangman's fracture is an extension tear drop injury
- e) the Chance fracture typically occurs at the cervicothoracic junction

87. In spinal injuries the central cord syndrome:

- a) is a result of forced hyperflexion
- b) occurs typically in those with degenerative arthritis
- c) will be more clinically apparent in the lower limbs
- d) will produce ipsilateral motor paralysis
- e) will have position and vibration sense preserved

88. In attempted self hanging:

- a) cervical fractures are common

- b) death usually occurs from arterial obstruction
- c) steroids will prevent delayed cerebral oedema
- d) pulmonary oedema may be seen in survivors
- e) rarely cause long-term injury in survivors

89. Sternal fractures:

- a) are more likely in the over 65 age group
- b) have a 25% associated mortality
- c) mandate 24 hours of cardiac monitoring
- d) do not develop flail segments
- e) are prevented by seat belt use

90. Pericardial tamponade:

- a) will lower CVP below 5cm of water
- b) is common with severe blunt chest trauma
- c) may produce pulsus paradoxus
- d) usually presents as Beck's triad
- e) produces RBBB on the ECG

91. Major pancreatic injury:

- a) will be excluded by a normal serum amylase
- b) presents with minimal abdominal signs initially
- c) will nearly always be detected by peritoneal lavage
- d) is the second most common organ injury in penetrating trauma
- e) is the third most common organ injury in penetrating trauma

92. Peritoneal lavage:
- a) is absolutely contraindicated in pregnancy
  - b) requires a RBC count of  $>100,000$  per  $\text{mm}^3$  to be considered positive
  - c) has a complication rate of 5 - 10%
  - d) has a high sensitivity for renal injuries
  - e) has a false positive rate of 2 - 5%
93. With regard to orthopaedic injuries:
- a) the Salter Harris system classify metaphyseal injuries
  - b) the Lis Franc injury is a tarso-metatarsal fracture dislocation
  - c) the Chance fracture is usually unstable
  - d) the Chauffeurs fracture involves the ulna styloid
  - e) the Barton fracture involves the distal articular surface of the ulna
94. Colles fracture:
- a) results from forced flexion of the wrist
  - b) will often involve the articular surface of the radius
  - c) is the reverse of a Smith's fracture
  - d) is more common in men
  - e) is associated with fractured ulna styloid in 20%
95. A posterior elbow dislocation:
- a) is reduced by traction and extension
  - b) will frequently cause neurovascular compromise
  - c) is mobilised at 3 - 5 days post injury
  - d) rarely reduces spontaneously
  - e) is caused by a fall on a supinated hand
96. Paediatric septic arthritis:
- a) is usually due to haemophilus influenzae
  - b) is empirically treated with ceftriaxone or cefotaxime alone
  - c) will show a joint aspirate cell count of  $>10,000$   $\text{mm}^3$
  - d) will show a joint aspirate with increased viscosity
  - e) can often be diagnosed on plain radiography
97. Toxic shock syndrome:

- a) will often manifest without fever
- b) is a misnomer because BP is often maintained
- c) is caused by pseudomonas species
- d) often produces elevated creatinine kinase
- e) produces a discrete papular rash

98. Positive predictive value is:

- a) true positives divided by true positives plus false positives
- b) true negatives divided by false negatives plus true negatives
- c) false positives divided by false positives plus true negatives
- d) true positives divided by true positives plus false negatives
- e) test positives divided by true positives

99. Erysipelas

- a) responds to erythromycin
- b) is caused strep pneumoniae
- c) results from micro-organism exotoxin production
- d) typically occurs on the neck
- e) shares a similar aetiology to toxic epidermal necrolysis

100. Appropriate first aid management of brown snake envenomation includes:
- a) arterial tourniquet
  - b) suction drainage of the wound
  - c) wound incision
  - d) aspirin 300mg orally
  - e) splinting of the joint above the injury
101. Box jellyfish envenomation:
- a) can be treated pre-hospital with IV antivenine
  - b) involves tetrodotoxin like blue ringed octopus
  - c) is minimised by washing of nematocysts with fresh water
  - d) can occur as far south as Sydney in mid summer
  - e) causes death by fulminant hepatic failure
102. Using the Parkland formula in burns management:
- a) metabolic acidosis is allowed to persist
  - b) SSD cream is applied at the rate 2gm/% area burnt
  - c) skin grafting can be predicted for burns >10% surface area
  - d) 4ml/kg/% body surface burn is infused per day
  - e) half the total requirement is given in the first 4 hours
103. In hypothermia:
- a) J waves are best seen in leads III and AVF
  - b) atrial fibrillation is the commonest rhythm below 32°C
  - c) insulin at reduced dose is the treatment of choice for hyperglycaemia
  - d) alcohol is to a degree thermoprotective
  - e) rewarming with bypass carries the highest risk of core after drop
104. The most effective method of cooling in heat-stroke is:
- a) IV dantrolene
  - b) cold IV fluids
  - c) cooling blankets
  - d) ice packs in the groin and axillae
  - e) fan and sponge with tepid water

105. The following drugs can be used in the treatment of true heat stroke:
- a) chlorpromazine
  - b) Phenobarbitone
  - c) mannitol
  - d)  $\text{NaHCO}_3$
  - e) all of the above
106. In lightning injury:
- a) in a mass casualty situation the apparently dead nearly always die
  - b) in an arrested patient cardiac massage is the highest priority
  - c) tympanic membrane rupture is common
  - d) the classic skin burn resembles an inverted pine tree pattern
  - e) myoglobinuric renal failure is a common sequelae
107. Regarding drowning and near drowning:
- a) fresh water immersion is treated with hypertonic saline
  - b) altered mental status on ED arrival is a grave prognostic sign
  - c) those who die usually aspirate less than 20ml/kg
  - d) sudden death on immersion may be due to vocal cord spasm
  - e) prophylactic antibiotics (e.g. ceftriaxone) are used routinely

108. In asthma:
- a) the white blood cell count will often be elevated
  - b) the ECG may show signs of acute left heart strain
  - c) a CXR should be routine in all patients admitted
  - d) blood gas results correlate well with pulmonary function testing
  - e) theophylline dosing needs to be increased if erythromycin is given
109. In a patient with COAD and cor pulmonale, a rapid irregular tachycardia:
- a) could be empirically treated with digoxin
  - b) is well managed with titrated IV beta blocker
  - c) will be improved by inducing alkalosis
  - d) nifedipine may provide useful rate control
  - e) ipratropium is unlikely to increase the heart rate
110. Regarding pleural effusion all of the following are true EXCEPT:
- a) can be tapped to make a diagnosis of pancreatitis
  - b) can be detected radiographically when 10ml of fluid is present
  - c) is most commonly caused by congestive cardiac failure
  - d) can result from rheumatoid arthritis
  - e) will not produce mediastinal shift
111. Sore throat is caused by all of the following EXCEPT:
- a) neisseria gonorrhoea
  - b) Mycoplasma pneumoniae
  - c) bacteroides fragilis
  - d) Cytomegalovirus
  - e) corynebacterium diphtheriae



112. Regarding empirical antibiotic therapy in pneumonia:
- a) ceftazidime is used for atypical pneumonia
  - b) clindamycin is used for aspiration pneumonia
  - c) acyclovir is used for post influenza pneumonia
  - d) erythromycin is used for PCP pneumonia
  - e) amoxycillin alone is used for neonates with pneumonia
113. Use of amiodarone:
- a) causes long term corneal deposits commonly
  - b) causes hypertension when used acutely
  - c) is contraindicated in WPW syndrome
  - d) is likely to decrease digoxin levels
  - e) has efficacy similar to esmolol in PSVT
114. With regards to pulmonary embolism:
- a) pleuritic chest pain is the most common symptom
  - b) cigarette smokers are at increased risk
  - c) fever is infrequent
  - d) thrombolysis is achieved with SK 100,000 units stat
  - e) the commonest ECG change is right axis deviation
115. ST segment elevation on a 12 lead ECG could be due to all of the following EXCEPT:
- a) a pericardiocentesis needle
  - b) LBBB when seen in V6
  - c) hyperkalaemia
  - d) hypothermia
  - e) subarachnoid haemorrhage

116. The strongest indication for pacing a patient with AMI is:
- a) new RBBB with 1st degree AV block
  - b) new LBBB with 1st degree AV block
  - c) pre-existing bifasicular block with 1st degree AV block
  - d) new bifasicular block
  - e) pre-existing LBBB
117. The clinical trial that showed that patients with acute myocardial infarction manifesting as ST depression on ECG do worse with thrombolysis was:
- a) TIMI - I
  - b) ISIS - I
  - c) ISIS - II
  - d) GISSI
  - e) GUSTO
118. In a patient presenting with possible thoracic aortic dissection the investigation with the best sensitivity and specificity is:
- a) transthoracic echocardiography
  - b) transoesophageal echocardiography
  - c) CT scan
  - d) aortography
  - e) MRA
119. Henoch - Schönlein purpura:
- a) represents a vasculitis of large arteries
  - b) is most common in spring
  - c) is usually most obvious on the head and neck
  - d) will not involve abdominal organs
  - e) typically occurs in adolescents

120. Axillary vein thrombosis:

- a) causes pulmonary embolism in 1 - 2% of patients
- b) is best diagnosed by colour flow Doppler study
- c) has no associated genetic predisposition
- d) does not respond to thrombolytic therapy
- e) is associated with IV drug abuse

121. The Major Jones criteria for rheumatic fever include:

- a) migratory arthralgia
- b) erythema marginatum
- c) raised ESR or CRP
- d) St Vitus dance
- e) valvular heart disease

**PART 2 FACEM**

**MCQ EXAM**

**60 Questions / 60 Minutes**

**For each question choose the  
MOST  
Correct answer**

**PART 2 MCQ EXAM ANSWERS:**

- 60. C
- 61. B
- 62. E
- 63. E
- 64. E
- 65. A
- 66. C
- 67. D
- 68. C
- 69. B
- 70. B
- 71. D
- 72. B
- 73. A
- 74. C
- 75. E
- 76. D
- 77. E
- 78. A
- 79. B
- 80. B
- 81. C
- 82. C
- 83. C
- 84. A
- 85. B
- 86. D
- 87. A
- 88. C
- 89. B

**PART 2 MCQ EXAMS ANSWERS**

- 90. E
- 91. B
- 92. C
- 93. C
- 94. C
- 95. D
- 96. A
- 97. A

- 98. E
- 99. A
- 100. D
- 101. B
- 102. E
- 103. E
- 104. C
- 105. C
- 106. A
- 107. E
- 108. E
- 109. C
- 110. B
- 111. A
- 112. B
- 113. B
- 114. D
- 115. D
- 116. E
- 117. B
- 118. E
- 119. B

**PART 2 PRACTICE MCQ's**

**(60 QUESTIONS IN 90 MINUTES)**

1. With regards to normal pregnancy, which is CORRECT
  - a. Respiratory rate decreases
  - b. FRC increases
  - c. Breasts become nodular
  - d. GFR remains unchanged
  - e. ALT and AST increase
  
2. With respect to cardiovascular physiology in pregnancy, which is CORRECT
  - a. SVR increases by 20%
  - b. BP drops to a nadir in the first trimester
  - c. Circulating blood volume increases by 25%
  - d. Resting heart rate increases by 17%
  - e. Systolic decrement in BP is greater than that of diastolic
  
3. Which of the following is TRUE
  - a. Primigravidas note fetal movement between 12 and 16 weeks
  - b. First trimester is conception to 12 weeks
  - c. At 16 weeks the fundus is palpable at the symphysis pubis
  - d. Left lateral position increases venous return by relieving pressure of the uterus on the SVC
  - e. There is a relative hyperinsulinaemia in pregnancy

4. With respect to vaginal bleeding in the first half of pregnancy, which is CORRECT
- Spontaneous abortion is loss of pregnancy before 20 weeks or loss of a foetus weighing less than 300g
  - Low level of activity is proven effective in treatment of threatened abortion
  - Most common cause of fetal wastage is advanced maternal age
  - Missed abortion is fetal death at less than 20 weeks without passage of any fetal tissue for 2 weeks after fetal death
  - Septic abortion is evidence of infection during any stage of abortion
5. With respect to vaginal bleeding in the second half of pregnancy, which of the following is correct
- Placenta previa accounts for 20% of bleeding
  - 25% of foetuses die when vaginal bleeding occurs after 20 weeks
  - Smoking is the most common risk factor for abruption
  - Abruptio placenta accounts for 40% of bleeding
  - Tocolytics are indicated in the management of abruptio placenta in specific situations by the emergency physician
6. Regarding spontaneous pneumothorax
- Subclavian CVL is the most common cause of iatrogenic pneumothorax
  - Ultrasound guided CVL insertion has not been shown to be helpful
  - 20% recurrence rate of spontaneous pneumothorax in the first year
  - Intrapleural air is resorbed as a rate of 1.25% per hour, and even faster with O<sub>2</sub>
  - 10% of those pneumothoraces aspirated will eventually need a tube
7. With regards to asthma, which of the following is TRUE
- Symptoms and signs of asthma correlate well with the severity of airflow obstruction
  - A pCO<sub>2</sub> of 30mmHg indicates severe asthma and heralds the onset of acute respiratory failure
  - With optimal technique using a spacer, only 15% (max) reaches the lung
  - B adrenergic agents predominantly dilate the large airways
  - Combined Theophylline and B adrenergic treatment increases efficacy but also increases toxicity
8. Which of the following is TRUE
- 90% of smokers will go on to develop clinically significant CORD
  - CORD by definition is a chronic inflammation of the lower airway
  - The ratio of FEV1: FVC is the best measure to predict severity of CORD
  - Most patients with CORD will respond to chronic oral steroids
  - The physical signs of LVF in someone with CORD are often underestimated
9. In TB, which of the following is TRUE
- Reactivation of latent TB for the immunocompetent is 5 – 10% per year
  - In most cases of dissemination MTB is unable to proliferate
  - Initial infection usually causes a low grade viral illness
  - Reactivation is commonly asymptomatic
  - The most common extrapulmonary site of infection is the adrenals

10. All of the following are risk factors for pneumonia EXCEPT
- Urinary catheter
  - Alcoholism
  - Valvular heart disease
  - Congestive heart disease
  - Sarcoidosis
11. Concerning Haemoptysis, which of the following is TRUE
- Mild haemoptysis is defined at >5mls every hour
  - Moderate haemoptysis is defined as 5 – 600mls per hour
  - Severe haemoptysis is greater than 50mls in a single episode
  - The most common cause is infection
  - Trauma and congestive heart disease accounts for the majority of non-infectious haemoptysis
12. The major component of hymenoptera venom in terms of dry weight is:
- Heparin
  - Mellitin
  - Histamine
  - Vespidine
  - Formic Acid
13. Regarding scabies infestation:
- Most transmission occurs via infested clothing and linen
  - Itch takes 7 – 14 days to develop during the first infestation
  - To date no scabetic immunity to lindane has developed
  - Both males and females form burrows
  - The penis is frequently involved in adult males
14. Acute mountain sickness:
- Can be precipitated by sleep apnoea at altitudes greater than 3,000 metres
  - Is commoner in women and children
  - Often proceeds to high altitude pulmonary oedema if not treated
  - Susceptibility is relating to sleeping altitude
  - Is commoner in 'unfit' individuals
15. Regarding barotrauma of ascent
- The ears and sinuses are most commonly involved
  - Aerogastralgia is equally common in novice and professional divers
  - Pneumothorax is the most common form of pulmonary barotrauma
  - Recompression is the treatment of choice for most pulmonary barotrauma
  - Alternobaric vertigo may persist for days after a dive



16. Regarding decompression sickness (DCS)

- a. A patent foramen ovale increases the risk of developing DCS
- b. Type I DCS includes the neurologic respiratory and cardiovascular forms
- c. Approximately 70% of reported DCS involve the musculoskeletal cutaneous systems only
- d. The two most useful indicators of severe disease are urinary osmolality and platelet count
- e. CT scanning should be routinely used in the post decompression evaluation of patients with spinal cord injury

17. Regarding blast injuries:

- a. The threshold blast wave pressure for fatal injuries is approximately 200 psi
- b. The negative pressure wave of blast wave never exceeds negative 1 atmosphere
- c. The commonest type of injuries are tertiary blast injuries
- d. Cutaneous burns are primary blast injuries
- e. Most blast deaths result from chemical toxins

18. Complications of lightning injury include all the follow EXCEPT:

- a. Depression
- b. Storm phobia
- c. Rupture of optic globe
- d. Gastric ulcers
- e. Intracranial haemorrhage

19. The most toxic poisonous plant of those below is:

- a. Deadly nightshade
- b. Oleander
- c. Autumn crocus
- d. Pokeweed
- e. Lily of the valley

20. Regarding fingertip injuries, which of the following is TRUE

- a. Amputations that are angled in a volar direction may be repaired by bone trimming and primary closure
- b. Subungual haematomas greater than 50% may be drained by trephining only
- c. Grafts should have daily dressings for the first 7 – 10 days
- d. Antibiotics should be used routinely for finger injuries
- e. Distal tuft fractures are seen in 10% of all nail bed injuries

21. Regarding soft tissue foreign bodies, which of the following is true
- MRI may be useful in detection of embedded gravel in wounds
  - Ultrasound is the most sensitive test for detecting foreign bodies
  - Plain films will detect glass fragments larger than 1mm with >95% sensitivity
  - CT may not detect Wood that has been in tissue for some time
  - Plain films will detect 50-60% of all foreign bodies
22. Regarding irrigation solutions, which of the following is true
- Chlorhexidine may be useful to irrigate eyes
  - Hydrogen peroxide helps wound healing by stimulating angiogenesis
  - Iodine may lead to acidosis when used in large wounds
  - Hydrogen peroxide is particularly useful against aerobic organisms
  - Ethyl alcohol may be used to clean open wounds
23. Regarding wound healing, which of the following is false
- Wound breakdown is most common around days 7 – 10
  - Tensile strength is 50% at 40 days
  - Zinc is required for adequate healing
  - Excess scar tissue confined to the original boundaries of the wound refers to keloid scarring
  - Chronic renal impairment may delay healing
24. All the following statements are TRUE EXCEPT
- Pre-renal failure is the most common cause of ARF in adults
  - In paed 45% of ARF is due to intrinsic RF
  - Post-renal failure accounts for 2 – 5% of all ARF
  - Nephrotoxins account for the majority of cases of ATN
  - ARF is defined as a 50% decline in GFR
25. Concerning ESRD
- ESRD incidence is decreasing
  - Diabetes accounts for >50% of ESRD
  - Hypertension accounts for 24% of ESRD
  - The kidneys produce 60% of erythropoietin
  - Peripheral neuropathy in HD patient responds poorly to renal transplantation
26. Concerning diagnostic imaging in renal colic, all TRUE EXCEPT
- 10% stones >6mm pass spontaneously
  - Visualisation of the entire ureter is suggestive of obstruction
  - Diabetics on Metformin IVP is 1<sup>st</sup> line investigation
  - USS useful detects larger stones and proximal and distal ureter stones
  - Less than 20% hydronephrosis by USS does not represent obstruction
27. Testing haematuria all true EXCEPT

- a. Urethral catheterisation induces haematuria in approximately 15% of patients
- b. False negative dipstick for blood when urine has high ascorbic acid
- c. False negative dipstick for blood when urine has high specific gravity
- d. False negative dipstick for blood when urine has high myoglobins
- e. False positive dipstick for blood when urine has high porphyrins

28. About migraine, all TRUE EXCEPT

- a. Higher oestrogen levels are associated with improved symptoms
- b. Pregnancy improves symptoms in 60-70%
- c. Prevalence in women 17%
- d. Prevalence in men 5%
- e. Migraine without aura accounts for 60% of migraines

29. Which statement is FALSE

- a. Sickle cell anaemia is the most common cause of stroke in children
- b. Aspirin is associated with a stroke risk reduction of 20 – 25% compared to placebo
- c. Hallucination/delusions may be present ~ 40% cases of delirium
- d. Hallucinations in delirium tend to be auditory
- e. Mini mental state examination the score is out of 30

30. About Vertigo

- a. Direction of nystagmus is named by its slow component
- b. Vertical nystagmus usually indicates vestibular injury
- c. Vertigo increases as people age
- d. Slow component of nystagmus is caused by cortex
- e. The vestibulo-ocular reflex causes the fast component

31. In paediatric resuscitation

- a. The standard defibrillation dose is 10J/kg
- b. Pre-oxygenation is relatively less important than in adults in a time urgent setting
- c. Needle cricothyroidotomy may provide adequate ventilation if intubation is unsuccessful
- d. Endotracheal tubes should leak at pressure 30cm H<sub>2</sub>O but not at 10cm H<sub>2</sub>O if correct size tube is used
- e. Laryngeal masks are contraindicated in children due to risk of gastric distension

32. In pregnancy, which is correct

- a. Defibrillation has never been found to have an adverse effect on the foetus and is not contraindicated
- b. Bicarbonate may be given with no theoretical increased risk to the foetus
- c. Perimortem caesarean section carries an excellent prognosis if performed within 20 minutes of instituting CPR
- d. Hyperventilation is recommended
- e. Thrombolytic use carries insignificant increased risk

33. Which of the following will not cause a low anion gap

- a. Penicillin overdose

- b. Hypercalcaemia
  - c. Hypermagnesaemia
  - d. Myeloma
  - e. Lithium overdose
34. Which of the following ECG changes best fit with hypercalcaemia
- a. QT lengthening
  - b. QRS widening  $>0.12S$  without bundle branch block
  - c. T wave peaking
  - d. Second or third degree heart block
  - e. Torsades de points
35. Which of the following are correct regarding cardioversion
- a. It is contraindicated in patients receiving digoxin or quinidine therapy
  - b. 5 – 10% of patients with chronic AF will suffer systemic embolism
  - c. ST segments may undergo transient elevation or depression post procedure
  - d. Troponin is not infrequently elevated post procedure
  - e. Pulmonary oedema never occurs post procedure
36. What is the recommended treatment for extravasation of noradrenaline?
- a. 10mmol Na HCO<sub>3</sub> instillation
  - b. Immediate 1% lidocaine instillation 5 – 10 mls
  - c. Phentolamine infiltration 5-10mg in 15mls
  - d. Adrenaline infiltration 5-10mls 1:10,000
  - e. Ca gluconate 1% instillation 10mls
37. Which of the following statements are correct regarding alternative methods of CPR
- a. Increase in cardiac output is linear to the increase in compression rate
  - b. There is strong evidence to support the use of the active compression/decompression device
  - c. There is strong evidence to support the use of interposed abdominal compression during CPR
  - d. The circumferential test CPR device does not appear to produce any increase in aortic systolic pressure
  - e. The thoracic pump theory has been conclusively disproved
38. Which of the following drugs are not noted for causing hypocalcaemia
- a. Cimetidine
  - b. Heparin
  - c. Glucagon
  - d. Glucocorticoids
  - e. Thiazides

39. Which of the following are the commonest cause for an acute abdomen in the >50 years of age group
- Diverticular disease
  - Appendicitis
  - Bowel obstruction
  - Biliary tract disease
  - Malignancy related
40. With perforated peptic ulceration, what percentage of patients will not have free air visible on initial x-ray series?
- 5%
  - 10%
  - 20%
  - 30%
  - 40%
41. Liver function tests in liver failure, which is correct
- AST: ALT ratio <2 suggests alcoholic
  - ALP: bilirubin of 1000:1 suggests an obstructive picture
  - Elevated  $\text{NH}_3^+$  has little prognostic value
  - Albumin level falls quickly in fulminant failure
  - A direct – reacting fraction of at least 30% is present with conjugated hyperbilirubinaemia
42. Which of the following are correct in acute pancreatitis
- Amylase is more sensitive, but less specific than lipase
  - Patients with 3 – 4 of Ranson's criteria have a mortality approaching 60%
  - 90% of pancreatitis recovers without anything other than supportive care
  - A base deficit of >4mcg/L on admission is one of the admission Ranson criteria
  - CT scanning can rule out pancreatitis
43. Which of the following are correct in spontaneous bacterial peritonitis
- There is a yearly risk of 2% in patients with cirrhotic ascites
  - More than 250 white cells/mm<sup>3</sup> are considered diagnostic
  - Enterobacteriaceae are the commonest organisms
  - There is no change in level of encephalopathy
  - Culture results are usually positive
44. The single most common chief complaint of children presenting to the ED is
- Fever
  - Vomiting and/or diarrhoea
  - Traumatic limb injury
  - Rash
  - Cough and/or SOB

45. The most common cause of stridor in a neonate, often presenting as worsening with crying, is
- Sub-glottic stenosis
  - Croup
  - Tracheoesophageal fistula
  - Laryngomalacia
  - Vascular ring
46. A child, born at term, presenting in congestive cardiac failure aged 2 weeks is most likely to have
- VSD
  - Hypoplastic left ventricle
  - Coarctation of the aorta
  - PDA
  - Cardiomyopathy
47. Regarding anticonvulsants
- Carbamazepine can produce ataxia in overdose but not valproate
  - IV loading of phenytoin can be given without cardiac monitoring during status
  - Diazepam should be given IM if IV access is unavailable during status
  - Propofol is an acceptable third/fourth line drug in children with resistant/refractory status epilepticus
  - Valproate can result in bleeding diathesis due to thrombocytopenia
48. A 3-year-old female presents to the ED with 2 days of vomiting and diarrhoea. She has dry mucous membranes and looks a little unwell. However, she cries during your exam (producing tears) and has a normal capillary refill.
- Her fluid requirements for maintenance fluids is 1100ml/day
  - She will need admission as is likely more than 10% dehydrated
  - Appropriate NG replacement therapy would be 750 to 1500mls of paedialyte over the next 4 hours
  - If she continues to vomit, oral replacement therapy should be abandoned for IV rehydration
  - Wait 12-24 hours before recommencing solids to allow GI tract time to recover, otherwise diarrhoea is likely to be prolonged.
49. Regarding intussusception
- Significant fever excludes the diagnosis
  - More common in females
  - Loop of bowel over the liver on AXR is suggestive
  - Vomiting is an early sign
  - "Red currant jelly" stool is present in only 50% of cases

50. A 6-year-old boy presents to the ED. He has been unwell for the last 3 days and is now concerning his parents because of his rapid breathing, abdominal pain and altered conscious level. The house officer who has seen the patient brings you the following set of electrolytes:

Na<sup>+</sup> 120mmol/l  
K<sup>+</sup> 7.0mmol/l  
Glucose 42mmol/l

HCO<sub>3</sub> 12mmol/l<sup>-1</sup>  
pH 7.15

And states his HR is 170 and has decreased skin turgour and dry mucous membranes.

Which of the following is INCORRECT

- a. Give an IV bolus of 400mls of N/saline
  - b. Following the bolus an appropriate fluid regimen would be 1L N/saline over the next 12 hours
  - c. The corrected sodium is between 134-138mmol/l<sup>-1</sup>
  - d. The ECG may show peaked T waves on the chest leads
  - e. Insulin therapy should commence at a rate of 2 units/hour
51. At 5 minutes a newborn baby has a heart rate of 120, with blue peripheries, weak flexion, weak cry initially, but strong cry when irritated. The APGAR is
- a. 4
  - b. 5
  - c. 6
  - d. 7
  - e. 8
52. CSF findings most consistent with early viral meningitis in a child are
- a. WBC 400, 80% polymorphs, protein 60mg/dL
  - b. WBC 2000, 80% polymorphs, protein 45mg/dL
  - c. Opening pressure 15cm H<sub>2</sub>O, protein 30mg/dL, glucose 4mmol/l<sup>-1</sup>
  - d. Opening pressure 15cm H<sub>2</sub>O, 50% polymorphs, WBC 400
  - e. WBC 800, opening pressure 30cm H<sub>2</sub>O, glucose 2.0 mmol/l<sup>-1</sup>
53. A "herald patch" is a feature of
- a. Rubella
  - b. Roseola infantum
  - c. Hand, foot and mouth disease
  - d. Pityriasis rosea
  - e. Rubeola
54. Hand, foot and mouth is associated with
- a. Echovirus
  - b. Coxsackie virus
  - c. Parvovirus
  - d. Varicella virus
  - e. Mad cow disease
55. Which of the following is NOT COMMONLY associated with Group A Strep
- a. Toxic shock syndrome
  - b. Impetigo contagiosum

- c. Erysipelas
  - d. Scarlet fever
  - e. Impetigo
56. The following are signs of severity of aortic stenosis EXCEPT
- a. Valve area of  $>1.0\text{cm}^2$
  - b. Valve gradient of  $75\text{mmHg}$
  - c. Plateau pulse or thrill
  - d. S4 or reverse split of S2
  - e. LVF or RVF
57. With regard to infective endocarditis
- a. Acute IE usually affects previously abnormal heart valves
  - b. Left-sided IE is most common in IV drug users
  - c. Right-sided IE is nearly always heralded by petechiae, Roth's spots or Osler's nodes
  - d. Initial empirical treatment recommended by the Victorian Drug Guidelines is IV Flucloxacillin + Gentamicin + Benzyl Penicillin
  - e. Murmurs are not commonly heard in patients with subacute disease
58. With regard to considering pericarditis in a differential diagnosis
- a. An ST/T ratio of  $<0.25$  in leads V5, V6 or I, is suggestive
  - b. Causes of constrictive pericarditis are usually diagnosed and include: post – traumatic or surgical, post fungal or TB infection, uraemia
  - c. Right trapezoidal ridge pain is a distinguishing feature in acute pericarditis
  - d. It is a contraindication to thrombolytic therapy
  - e. All are true
59. A lady who is 35 weeks pregnant presents with BP 150/105. She is mildly confused, but says she has a headache and is seeing "2 of you". She has haemorrhages and exudates on fundoscopy and very brisk tendon reflexes. There's no urine result back yet. The following include acceptable treatment options EXCEPT
- a. BP reduction of  $<25\%$  in 60 minutes
  - b. Magnesium sulphate 4g IV over 15 minutes
  - c. Hydrallazine 2.5mg IV then 5mg Q 20 minutes up to  $\sim 40\text{mg}$
  - d. Observation and reassurance
  - e. Captopril 5mg IV over 30 minutes
  - f. Urgent O&G consult for consideration of delivery of the child
60. An AMI is diagnosed. The following are true EXCEPT
- a. PAMI and GUSTO 2b trials demonstrated that percutaneous angioplasty was associated with lower rates of reinfarction and intracranial haemorrhage compared to TPA
  - b. Thrombolysis alone does not achieve early and complete restoration of blood flow in 45% of patients
  - c. Streptokinase has a 5% rate of allergy in first time patients, a 0.2% rate of anaphylaxis and a 15% rate of hypotension
  - d. Alteplase does NOT cause statistically significant increases in stroke, death or survival benefit when compared to streptokinase
  - e. 8L of oxygen per minute via Hudson mask should be standard practice



## ANSWERS

1. C
2. D
3. E
4. E
5. A
6. C
7. C
8. E
9. B
10. E
11. C
12. B
13. E
14. D
15. E
16. A
17. B
18. C
19. B
20. B
21. D
22. C
23. D
24. D
25. C
26. C
27. D
28. E
29. D
30. C

- 31. D
- 32. A
- 33. A
- 34. C
- 35. C
- 36. C
- 37. A
- 38. E
- 39. D
- 40. E
- 41. E
- 42. C
- 43. C
- 44. A
- 45. D
- 46. C
- 47. E
- 48. C
- 49. E
- 50. B
- 51. D
- 52. D
- 53. D
- 54. B
- 55. A
- 56. A
- 57. D
- 58. D
- 59. E
- 60. E

#### **FACEM MCQ**

1. RBC cholinesterase can be low in the following conditions except
  - a) Pernicious anaemia
  - b) Organophosphate poisoning
  - c) Anti malarial Rx
  - d) Succinylcholine
  - e) Oxalate blood tubes
  
2. Which of these drugs is not useful in organophosphate toxicity
  - a) Diazepam for seizure control
  - b) Theophylline for bronchospasm
  - c) Atropine
  - d) Pralidoxime
  - e) Activated charcoal
  
3. Bradycardia secondary to calcium channel blocker toxicity is best managed initially by
  - a) Atropine
  - b) Glucagons
  - c) Intra aortic balloon pump
  - d) Adrenaline
  - e) Amrinone

4. Regarding PE

- a) Mortality risk with pulmonary angiography is 10 – 15%
- b) Pulmonary embolectomy is no longer indicated at all
- c) 12% of axillary vein thrombosis result in PE
- d) tPA is contraindicated in females of reproductive age
- e) A low probability scan reliably excludes PE

5. A small cell carcinoma of the lung is associated with

- a) Hypercalcaemia
- b) Hypoglycaemia
- c) Pancoast's
- d) Clubbing
- e) SIADH

6. Regarding hypothyroidism, which is incorrect

- a) A low T3 is indicative of hypothyroidism
- b) Serum TSH is the most sensitive indicator of hypothyroidism
- c) FT4 may be normal in early hypothyroidism
- d) Chronic lung disease can depress T3 levels
- e) TSH is low in secondary hypothyroidism

7. With respect to cardiac function, which is incorrect

- a) A grade III Killip class has a 40% mortality risk
- b) A grade I Killip class has a 5% mortality risk
- c) A grade III Forester Diamond Swan class has a cardiac index  $<20 \text{ l/min/mm}^2$  and a PCWP  $>18 \text{ mm Hg}$
- d) A grade II Killip class clinically has bibasilar rales and an  $S_3$
- e) A grade IV Forester Diamond Swan class has a mortality risk of 80%

8. Regarding dysfunctional uterine bleeding

- a) Corpus luteum cysts can occur in an anovulatory cycle
- b) Anovulatory cycles are associated with frequent spotting
- c) Uterine myomas cause intermenstrual bleeding
- d) There are 3 phases in the menstrual cycle; follicular, ovulatory, luteal
- e) There is decreased progesterone production in the luteal phase

9. Causes of unilateral facial nerve palsy include all but

- a) Idiopathic – Bell's palsy
- b) Herpes zoster – Ramsey Hunt syndrome
- c) Multiple sclerosis
- d) Basal skull fracture
- e) Sarcoidosis

10. Eosinophilia can be seen in all but

- a) CML
- b) Malaria

- c) Hodgkins lymphoma
- d) ALL
- e) Hypersensitivity reactions

11. Regarding acute MI

- a) Troponin T has 90% sensitivity at 4 hours
- b) The AV node artery arises off the L circumflex 90% of the time
- c) The initial ECG has 70% sensitivity
- d) Ventricular aneurysm can be an acute complication
- e) The posterior descending arises off the RCA 10% of the time

12. Which is incorrect. Myxoedema coma

- a) Is rare woman under 50 year
- b) Occurs in 0.1% of all cases of hypothyroid disease
- c) Can cause SIADH
- d) Is always associated with hypothermia
- e) Hypercholesterolaemia is often associated

13. A patient with known CML presents to the ED with fever, and recent onset of significant weight loss. On examination no obvious cause for the fever is found, however marked splenomegaly is noted with generalised lymphadenopathy. Blood tests reveal Hb of 8g/dl, platelets 98, a raised calcium, and a white cell count  $15 \times 10^{10} /L$ . Differential reveals blasts 5%, promyelocyte 8%, myelocyte 15%, metamyelocyte 25%, neutrophil 32%, eosinophil 6%, basophils 4%, lymphocytes 5%. What is the most likely diagnosis

- a) Blastic crisis
- b) Leukaemic meningitis
- c) Liver cirrhosis
- d) Pancreatitis
- e) Richter's syndrome

14. A characteristic feature found in >95% of CML patients

- a) Red Sternberg cell
- b) Philadelphia chromosome
- c) Tear drop cells
- d) Coombs positive haemolytic anaemia
- e) Hypogammaglobulinaemia

15. Causes of hypercalcaemia include all but

- a) Vitamin A intoxication
- b) Multiple myeloma
- c) Paget's disease
- d) Hyperparathyroidism
- e) Renal tubular acidosis

16. Characteristic findings in thrombotic thrombocytopenic purpura include all but

- a) Microangiopathic haemolytic anaemia

- b) Renal dysfunction
- c) Positive Coombs
- d) Fever
- e) Schistocytes on smear

17. Treatment options for TTP include all but

- a) Steroids
- b) Azathioprine
- c) Platelet transfusions
- d) Plasma exchange
- e) Aspirin

18. A 60 year old alcoholic presents with acute onset of severe central abdo pain of several hours duration. On admission you find that he has a WCC of  $18,000 / \text{mm}^2$ ,  $\text{pO}_2$  of 89, LDH of 500 IU / L, AST of 650 IU/L, amylase of 990 and a glucose of 23. Using Ranson's criteria, what is the estimated mortality risk for this man on admission

- a) 1%
- b) 15%
- c) 100%
- d) 40%
- e) No risk at all

19. Extra intestinal manifestations of inflammatory bowel disease include all but

- a) Optic neuritis
- b) Pyoderma gangrenosum
- c) Erythema nodosum
- d) Ankylosing spondylitis
- e) Episcleritis

20. An ESR  $>100$  can be seen in all except

- a) Renal carcinoma
- b) Rheumatoid arthritis
- c) Polymyalgia rheumatica
- d) Polycythaemia rubra vera
- e) SLE

21. Which of these results would be used to determine his mortality risk at 48 hours

- a) Amylase on admission  $>350$
- b)  $\text{pO}_2$  on admission  $<60$
- c) WCC  $<10$  at 48 hours
- d) Hct falls  $>10\%$  at 48 hours
- e) Urea rise  $>5\text{mg/dl}$  at 48 hours

22. Severe pancreatitis can result in

- a) Hypoglycaemia

- b) Hypercalcaemia
- c) Fat embolism
- d) Hyperlipidaemia
- e) Diabetes insipidus

23. Regarding Diarrhoea

- a) Yersinia typically causes a toxigenic diarrhoea
- b) CMV is one of the two most common organisms responsible for diarrhoea in AIDS
- c) Salmonella seldom has extraintestinal manifestations
- d) Staphylococcal food poisoning typically presents 12 – 24 hours after ingestion of contaminated food
- e) Shigella only causes invasive type diarrhoea

24. Regarding diarrhoea in AIDS patients

- a) Strongyloides is a common responsible pathogen
- b) Most patients have mycobacterium avium complex present as a chronic longstanding gastrointestinal infection over many years
- c) Cryptosporidium is eradicated with trimethoprim / suxemethoxazole
- d) Isospora is a rare cause of diarrhoea in the undeveloped world
- e) Cryptosporidium is one of the most common causes in the developed world

25. The most common cause of massive lower GI bleeding in a 62 year old patient is

- a) Carcinoma of the colon
- b) Diverticulosis
- c) Meckel's diverticulum
- d) Crohn's disease
- e) Arteriovenous malformation

26. Regarding large bowel obstruction (LBO)

- a) Caecal volvulus is more commonly seen in institutionalised individuals
- b) Volvulus accounts for >90% of LBO in pregnancy
- c) Intussusception in children invariably has a pathological lead point
- d) Sigmoid volvulus seldom requires operative intervention
- e) Volvulus is the third most common cause of LBO in an adult

27. Pralidoxime

- a) Can be given with late (>48 – 96 hours) presentation of organophosphate toxicity
- b) Is used to treat hypercalcaemia as well
- c) Is given with atropine to reverse muscarinic action because it only reverses the nicotinic actions
- d) Does is 0.5 – 1g in 200mls D5W slowly as a loading dose
- e) Can be used with succinylcholine overdose

28. Regarding alcohol withdrawal, which is incorrect

- a) The DT's are seldom preceded by a "rum fit"
- b) The "shakes" start within 6 – 8 hours of cessation or reduction
- c) 1/3 of all un Rx'd "rum fits" go on to develop DT's
- d) Alcohol hallucinations accompany up to 25% of the "shakes"

e) Hallucinations can be unpleasant with a clear sensorium

29. A patient presenting with painless PR bleeding is most likely to have

- a) Anal fissure
- b) Internal haemorrhoids
- c) Vibrator in situ
- d) Radiation proctitis
- e) Thrombosed external haemorrhoids

30. Regarding paraquat poisoning, which is incorrect

- a) High incidence in Japanese farmers
- b) Resuscitation includes ABC, IV access, oxygen
- c) >15ml ingested means death in 1 – 5 days usually
- d) Vitamins C and E can be used to Tx
- e) Fuller's earth is given orally

31. A 45 year old man presents to ED c/o abdo pain, nausea and vomiting of acute onset. He gives you a history of chronic alcohol intake spanning 30 years. He appears dehydrated, jaundiced, with spider angiomas and gynaecomastia evident. Blood results reveal a raised bilirubin, moderately raised AST and ALT, slightly prolonged INR and hypoglycaemia. What is the most likely diagnosis

- a) Grade II acute fulminant liver failure
- b) Acute hepatitis B
- c) Alcoholic hepatitis
- d) Acute fatty liver
- e) Post cirrhotic hepatic encephalopathy (Grade III)

32. Regarding upper GI bleeding

- a) Haematemesis is a more common presentation of oesophagitis than melaena
- b) Mallory Weiss tears are uncommonly associated with hiatal hernias
- c) Haematemesis is the most common presentation of bleeding peptic ulcer disease
- d) The majority of Mallory Weiss tears occur in the gastric cardia
- e) Gastric erosions / gastritis account for the majority of haematemesis

33. A patient with Turner's syndrome is most likely to have

- a) Tetralogy of Fallot
- b) PDA
- c) Eisenmenger's syndrome
- d) Coarctation of the aorta
- e) VSD

34. A patient with which one of the following is most likely to be cyanosed

- a) Ebstein's anomaly
- b) PDA
- c) VSD
- d) ASD



e) Endocardial fibroelastosis

35. The major complication of Lis Franc's # dislocation is

- a) Aseptic necrosis of the navicular
- b) Osteoarthritis
- c) Sudek's atrophy
- d) Non union
- e) Ischaemia of forefoot

36. A 5 year old presents to the ED with a respiratory tract infection. The CBC result is as follows; Hb 95, MCV 76, MCHC 28, showing target cells, marked hypochromia, basophilic stippling. The most likely diagnosis is

- a) Thalassemia
- b) Fe deficiency anaemia
- c) Malabsorption
- d) Liver failure
- e) Mercury poisoning

37. Complications of Crohn's disease include all but

- a) Toxic megacolon
- b) Carcinoma
- c) Rectal fistula
- d) Bowel obstruction
- e) Fulminant colitis

38. Causes of hypocalcaemia include all but

- a) Colchicines toxicity
- b) Sarcoidosis
- c) Toxic shock syndrome
- d) Ethylene glycol intoxication
- e) Alkalosis

39. The **most common** cause of osteomyelitis resulting from puncture wounds to the sole of the foot is

- a) Staph aureus
- b) Pseudomonas
- c) Haemophilus Infl B
- d) Strep pneumoniae
- e) E. coli

40. Complications of hip dislocation include

- a) Sciatic nerve involvement with anterior dislocations
- b) Femoral nerve involvement with posterior dislocations
- c) Femoral artery involvement with anterior superior dislocations
- d) Sudek's atrophy
- e) Femoral head necrosis in >50% children with hip dislocation

41. Which of the following is contraindicated in the management of salicylate poisoning

- a) Mannitol
- b) Phenytoin
- c) Acetazolamide
- d) Lignocaine
- e) Diazepam

42. Hydrofluoric acid contamination can cause which of the following

- a) Hypocalcaemia
- b) Hyperkalaemia
- c) Hypermagnesaemia
- d) Superficial burns
- e) Coagulation necrosis by the fluoride ion

43. Platelet transfusion is not indicated in

- a) ITP with platelet count  $< 50,000 / \text{mm}^3$
- b) DIC with platelet count  $< 50,000$
- c) Massive blood transfusion
- d) Non bleeding and platelet count  $< 10,000$
- e) Bleeding and platelet count  $< 50,000$

44. Regarding head injuries

- a) Uncal herniation classically results in ipsilateral fixed and dilated pupil with ipsilateral hemiparesis
- b) 5% of HI's have an associated C/spine #
- c) Epidural haematomas commonly have a severe underlying brain injury
- d) The Cushing reflex is seen in raised ICP with bradycardia and hypotension
- e) Most intracerebral bleeds are evident on initial CT shortly after injury

45. Contraindicated drugs with MAO-I include

- a) Dobutamine
- b) Adrenaline
- c) Dopamine
- d) Metochlopramide
- e) Morphine

46. Indications for use of DDAVP include all but

- a) vWF deficiency with bleeding
- b) Renal failure with coagulopathy
- c) Prolonged INR in alcoholic cirrhosis
- d) Prolonged INR in DIC
- e) Oesophageal variceal haemorrhage

47. GI bleeding is an early feature of

- a) Methanol poisoning
- b) Lead poisoning
- c) Isopropanol poisoning
- d) Lindane ingestion
- e) Digoxin toxicity

48. Which of the following is incorrect

- a) Cyanide = bitter almonds
- b) Organophosphates = garlic
- c) Chloral hydrate = pear like
- d) Disulfiram = rotten eggs
- e) Urinary turpentine = pine needles

49. Regarding organophosphates

- a) Theophylline is indicated for bronchospasm
- b) Characterised by anticholinergic excess
- c) Atropine is only indicated in severe poisoning
- d) Drying of secretions is an endpoint in atropinisation
- e) Succinylcholine is indicated in rapid sequence intubation

50. A high anion gap metabolic acidosis is seen with

- a) Diarrhoea
- b) Bartter's syndrome
- c) Addison's disease
- d) Renal tubular acidosis
- e) Toluene poisoning

51. Complications of narcotic abuse include all but

- a) Transverse myelitis
- b) Horner's syndrome
- c) Angiothrombotic pulm hypertension
- d) Pseudomonas septic arthritis
- e) Polyneuropathy

52. Yellow green haloes seen around objects may be manifestations of

- a) Membership of the Alliance party
- b) Lithium toxicity
- c) Central retinal vein occlusion
- d) Digoxin toxicity
- e) Alcohol induced "shakes"

53. Regarding antidotes

- a) Lead – DMSA
- b) Arsenic – Ca EDTA
- c) Iron – Dimercaprol
- d) Hydrofluoric acid - MgSO<sub>4</sub> infiltration
- e) Cyanide – Ca EDTA

54. An acute ingestion of phenytoin in an otherwise previously healthy person may present with any of the following except

- a) Nystagmus at levels >20ug/ml
- b) Seizures
- c) Coma at levels >50ug/ml
- d) AV conduction disturbance
- e) Loss of nystagmus with levels >50ug/ml

55. Regarding paediatric trauma

- a) Rib #'s are more common than lung contusion
- b) CT is more sensitive than DPL for intra abdominal bleeding
- c) Post traumatic seizures are more significant if occurring within minutes of the injury
- d) Have less reqts for fluid than adults for the same % burn
- e) Teenagers more frequently suffer non displaced #'s of vertebral bodies and posterior elements than adults

56. The most accurate radiographic sign of traumatic rupture of the aorta is

- a) Deviation of the oesophagus >2cm to the right of spinous T4
- b) Blurred aortic knob
- c) # 1<sup>st</sup> / 2<sup>nd</sup> rib
- d) Apical cap
- e) Superior mediastinal widening

57. Regarding pericardiocentesis

- a) Incidence of false negatives is 33%
- b) May be curative in some penetrating heart injuries
- c) Often complicated by perforation of the L main stem coronary artery
- d) Incidence of false positives is 80%
- e) Should be done on all hypotensive patients

## ANSWERS

31.	d	61.	c
32.	b	62.	d
33.	a	63.	d
34.	c mortality 0.6%	64.	a
35.	e	65.	e
36.	a	66.	a
37.	e mortality 51%	67.	e
38.	d	68.	b
39.	e tends to be bilateral	69.	b
40.	d	70.	c
41.	c	71.	c causes incr CSF acidosis
42.	d 80%	72.	a
43.	a	73.	a
44.	b	74.	b
45.	e	75.	c
46.	c	76.	d
47.	c	77.	c
48.	d	78.	e
49.	a	79.	d
50.	d	80.	e mononeuropathy
51.	e	81.	e
52.	d	82.	d
53.	b	83.	a
54.	e	84.	d only with IV
55.	b	85.	e
56.	e	86.	a
57.	d	87.	b
58.	a	88.	
59.	b	89.	
60.	b	90.	

MCQ Paper 7

60 Questions in

1. Which of the following is false regarding pediatric airways anatomy?
  - a) Difference between adults and children becomes relatively insignificant by age 8
  - b) Infants larynx is higher in the neck, located at C3 level
  - c) Larynx is funnel shaped in infants
  - d) Vocal cords are perpendicular to the trachea
  - e) Infants tongue is relatively large
  
2. Regarding pediatric airway equipment which is correct?
  - a) To estimate correct size oral airway should extend from corner of the mouth to the tragus of the ear
  - b) In children <2 yrs curved(Macintosh) blade is superior to straight(Miller) blade
  - c) Formula to determine ETT size is  $14 + \text{age}/4$
  - d) Laryngeal mask(LMA) prevents supraglottic obstruction, gastric insufflations and aspiration
  - e) Complication of nasopharyngeal airway include laryngospasm
  
3. Which of the following is correct regarding rapid sequence intubation?
  - a) Propofol is preferred agent for insertion of LMA
  - b) Side effect of sodium thiopental does not include histamine release
  - c) Ketamine increases heart rate, blood pressure, cardiac output and does not depresses myocardium
  - d) Etomidate causes almost no change in heart rate, blood pressure, cardiac output and cerebral blood flow
  - e) Midazolam is characterized by short recovery time
  
4. Regarding airway management which one is correct?
  - a) Succinylcholine may cause masseter spasm in 10% of cases
  - b) Cricothyroidotomy in children is easier to perform than in adults
  - c) Contraindication for RSI is failed laryngoscopic intubation if the past
  - d) Premedication with atropine, before using succinylcholine is advisable in children under 3 yrs of age or in any child with heart rate < 120/min.
  - e) Rocuronium has been shown to achieve intubating condition in 45-65 seconds
  
5. Which of the following is correct re. RSI and intubation of pregnant patient?
  - a) The incidence of failed intubation is 1 in 200-300 patients
  - b) Patient should be placed in supine position with left hip elevated 10-12 cm (15-30 degrees)
  - c) Blind nasotracheal intubation is relatively contraindicated and NG tube should generally be avoided
  - d) Although pregnant patient develops hypoxia more quickly they are generally more tolerant of apneas episodes
  - e) Enlarged and engorged breasts may interfere with maintaining cricoid pressure but never obstruct placement of laryngoscope in the mouth
  
6. Regarding CPR of pregnant patient:
  - a) Defibrillation may have adverse effects on the fetus
  - b) Cardiac arrest should be treated using current ACLS guidelines
  - c) Pregnancy is considered a absolute contraindication to thrombolysis
  - d) Open chest CPR should be considered if patient fails to achieve ROSC in 5 min
  - e) Literature suggests that few of medications used in CPR may have adverse affects on fetus

7. All of the drugs used in CPR of pregnant patient are category "C" except one which is "B" :
- Adrenaline
  - Atropine
  - Lidocaine
  - Dopamine
  - Sodium bicarbonate
8. Regarding perimortem caesarean section during CPR of pregnant patient which is correct?
- It is contraindicated if >15 min has passed from maternal arrest
  - Decision to perform it should be made by 10 min after arrest, with delivery of the fetus by 15 min postarrest
  - Generally large transverse suprapubic incision is used
  - One of the factors associated with improved fetal survival is gestational age > 24/40
  - After delivery and closure of the uterus oxytocyn can be injected directly into myometrium to enhance contraction
9. Regarding orotracheal intubation which is correct?
- Correct tube placement for adult male is 23 cm from the incisor teeth
  - Correct tube size for adult female is 7-8 cm
  - Correct tube placement is about 2 cm from the carina
  - Correct pressure of the endotracheal tube cuff is 20-30 cm H<sub>2</sub>O
  - Sellick maneuver refers to laryngeal lift
10. Regarding tracheal intubation which is correct?
- The presence of facial trauma appears to be contraindication for nasotracheal intubation
  - All Le Fort fractures are contraindication for nasotracheal intubation
  - The risk of inadvertent intracranial passage of nasotracheal tube in case of facial trauma is extremely low
  - Oral route is better than nasal for fiberoptic guided intubation
  - Retrograde wire guided technique should be considered as one options for apneic patient in ED
11. Hypotonic hyponatraemia can be caused by;
- Hyperglycaemia
  - Diuretic use
  - Mannitol excess
  - Hyperlipidaemia
  - Hyperproteinaemia
12. Hypokalaemia results in
- Hyporeflexia
  - Metabolic acidosis
  - Increased gastrointestinal motility
  - Bradycardias
  - Hypoglycaemia
13. Second degree Mobitz I AV block



- a) Has a constant, prolonged pr interval
- b) Implies structural damage to the AV node
- c) Does not respond to Atropine
- d) Is often transient associated with acute anterior MI
- e) Can be seen in digoxin toxicity.

14. In the treatment of svts

- a) Bilateral carotid sinus massage, if performed for less than 10 seconds is twice as effective as unilateral massage.
- b) The valsalva manoeuvre should be avoided as it increases aortic pressure.
- c) There is no proven benefit for more than 20mg of Adenosine
- d) Verapamil will usually increase the blood pressure if it was normal with the SVT indicating improved cardiac output.
- e) Diltiazem 20mg is 30-50% effective.

15. The correct IV dose for paediatric resuscitation drugs is

- a) Atropine 0.2mg/kg
- b) Dopamine 2-20 ug/kg/hr
- c) Adrenaline 0.1mg/kg
- d) Sodium bicarbonate 1 meq/kg
- e) Adenosine 0.1-0.2mg/kg

16. Digoxin

- a) Onset for oral and IV doses is equal due to its high bioavailability.
- b) Volume of distribution is low
- c) Is inactivated by the liver and excreted unchanged in the urine.
- d) Toxicity is increased with hyperkalaemia
- e) Atropine can be used to reverse the bradyarrhythmia caused by digoxin toxicity.

17. SIRS defining criteria include

- a) Temperature greater 40 or less than 36.
- b) Heart rate greater than 120/min
- c) Resp rate greater than 20 breaths/min
- d) WCC greater than  $20 \times 10^6$
- e) Greater than 20% bands

18. Regarding haemorrhagic shock

- a) Pulse pressure is narrow
- b) Cool and clammy skin appears once the blood loss is >20%
- c) Death is from circulatory arrest which leads to resp arrest.
- d) Long IV lines should be used to facilitate high volumes of fluid resuscitation.
- e) Urine output does not reflect renal perfusion in the acute setting.

19. Reliable end points to fluid resuscitation in shock include

- a) Heart rate
- b) Blood pressure
- c) Capillary refill

- d) Urine output
- e) Serum lactate

20. In the early stages of septic shock

- a) The extremities remain cold due to predominate vasoconstrictor mediators.
- b) There is often an initial respiratory alkalosis
- c) ARDS is not a feature
- d) Hypoglycaemia predominates due to anaerobic metabolism
- e) Hepatic dysfunction with raised transaminases is seen.

21. With iron overdoses

- a) Desferoxamine falsely elevates iron levels
- b) Ferritin levels are the most accurate guide to iron toxicity
- c) Haemodialysis is used in severe toxicity to reduce total iron load
- d) The total elemental iron ingested determines the potential for toxicity
- e) Moderate toxicity is expected when  $>100\text{mg/kg}$  elemental iron is ingested

22. All the following make hydrocarbons more toxic EXCEPT

- a) Heavy metal additives
- b) Being halogenated
- c) High viscosity
- d) Being aromatic
- e) High volatility

23. Anticholinergic toxicity

- a) May be seen with antiparkinsonism drugs
- b) Typically causes bradycardia
- c) Causing agitation should be treated with a phenothiazine
- d) Should never be treated with physostigmine
- e) Is a well recognized side effect of cocaine ingestion

24. With Cyanide toxicity

- a) Signs are typically delayed several hours
- b) Patients have marked central cyanosis
- c) Patients characteristically have a normal anion gap acidosis
- d) 100% oxygen can worsen its effects
- e) Dicobalt edentate binds cyanide but can cause toxicity if cyanide is not present

25. ECG changes in hypothermia include all EXCEPT

- a) Sinus bradycardia
- b) Delta waves
- c) Osborn waves
- d) Prolongation PR and QT
- e) VF

26. All the following are well known to cause Methaemaglobinaemia EXCEPT

- a) Amyl nitrate
- b) Doxycycline
- c) Prilocaine
- d) Cotrimoxazole
- e) Methylene blue

27. Funnel web spider bites

- a) Almost all cause significant systemic toxicity
- b) No deaths have been reported from envenomation
- c) Pressure immobilization reduces absorption
- d) The bite cause localized redness and piloerection but are rarely painful
- e) Systemic effects may be delayed several hours

28. A 56 year old farmer rings for the emergency department saying he has been bitten by a Brown snake on his ankle. He is not in any discomfort. You recommend

- a) Putting on a tourniquet above the level of the bite
- b) He attends the emergency department for monovalent brown snake antivenom
- c) No treatment as he has no pain it is unlikely he's been envenomated
- d) Put on a pressure bandage and present
- e) Wash the area thoroughly and if he develops any erythema see his GP

29. A man is pulled from a house fire. Both legs are blistered, charred and pale. The rest of his body appears unscathed. He is coughing but maintaining his airway.

- a) You estimate his percentage burn to be approximately 36%
- b) CO poisoning is only a concern with industrial fires
- c) Blisters over joints should not be debrided
- d) He should be intubated to prevent the development of ARDS
- e) His airway is not at risk as only his legs have been burnt

30. Hydrofluoric acid burns

- a) Can cause hypokalemia resulting in arrhythmias
- b) Are painful and should be injected with calcium solution
- c) Cause systemic toxicity resulting in hypercalcaemia
- d) The wound should not be irrigated as this may cause further tissue penetration
- e) With weaker solutions (<20%) pain may be delayed

31. Of the following criteria, which is the BEST for thrombolytic therapy?

- a) >1-mm ST-segment depression in a single limb lead
- b) >2-mm ST-segment elevation in two or more contiguous limb leads in a patient with signs of cardiogenic shock
- c) >2-mm ST-segment elevation in two or more contiguous precordial leads
- d) New right bundle branch block
- e) New left bundle branch block with evidence of cardiogenic shock

32. Absolute contraindications to thrombolytic therapy include all of the following EXCEPT

- a) Recent head trauma
- b) Stroke within the past 6 months or any history of hemorrhagic stroke

- c) Suspected aortic dissection
- d) Initial BP > 240/140
- e) Suspected pericarditis

33. By which percentage does aspirin (by itself) reduce cardiovascular mortality when given in the early stages of coronary occlusion?

- a) 5
- b) 10
- c) 20
- d) 30
- e) 40

34. Which artery is MOST likely to be diseased in a patient who suffers a syncopal episode secondary to cerebral ischemia?

- a) Carotid
- b) Vertebrobasilar
- c) Anterior communicating artery
- d) Anterior cerebral artery
- e) Posterior communicating artery

35. A 44-year-old man complains of recurrent syncope associated with the upper extremity exercise. What is the MOST likely cause?

- a) Trigeminal neuralgia
- b) Hypoglycemia
- c) Carotid sinus hypersensitivity
- d) Subclavian steal syndrome
- e) Vasovagal syncope

36. Which of the following conditions is NOT associated with a risk of aortic dissection?

- a) Aortic regurgitation
- b) Aortic stenosis
- c) Bicuspid aortic valve
- d) Marfan's syndrome
- e) Coarctation of the aorta

37. Which of the following statements regarding chest pain is FALSE?

- a) Burning or gnawing pain may be present with AMI
- b) An acid or foul taste in the mouth suggests dyspepsia is more likely than angina
- c) Tenderness to palpation in the epigastric region may be elicited with AMI
- d) Relief of pain with antacids strongly suggests a gastro intestinal etiology
- e) Epigastric or lower chest discomfort may be described with both cardiac and noncardiac causes

38. How quickly and to what level should the blood pressure be lowered in a patient with a hypertensive emergency?

- a) 120/80 as quickly as possible
- b) 180/90 within 12 h
- c) 120/80 within 30 to 60 min

d) A level that is "normal" for that patient within 4 h

39. All of the following statements are TRUE regarding the treatment of valvular emergencies EXCEPT

- a) An intraaortic counterpulsation balloon is contraindicated in AI
- b) Thrombolytic agents may be helpful in acute mitral insufficiency
- c) Emergent surgery is usually indicated in acute aortic and mitral insufficiency
- d) Patients with AS and syncope require urgent surgical intervention
- e) Patients with decompensated MS and atrial fibrillation should be considered for cardioversion

40. All of the following statements are TRUE with regard to treatment of pulmonary edema EXCEPT

- a) Higher doses of nitroglycerin are needed to alleviate the symptoms of APE than to relieve stable angina
- b) An appropriate estimate of intravenous furosemide dose is 1 mg/kg
- c) Dopamine produces a more favourable balance between myocardial oxygen supply and demand than does dobutamine
- d) Nitroprusside may induce ischemia in patients with coronary artery disease
- e) Digoxin has no role in the acute management of CHF

41. In paracetamol overdose

- a) Children are at greater relative risk of toxicity than adults
- b) Rumack-Mstthew nomogram can only be applied to levels obtained after 4 hours but before 24hr post ingestion
- c) Toxic exposure is suspected if  $>100\text{mg/kg}$  are ingested in a single dose
- d) N acetyl cysteine is only useful if given within 24 hours of ingestion
- e) An ALT  $>10$  times normally is a predictor of hepatic failure

42. Theophylline toxicity may occur if a patient also takes

- a) Amoxicillin
- b) Paracetamol
- c) Erythromycin
- d) St. John's Wart
- e) Phenytoin

43. In digoxin overdose

- a) Hypokalemia predisposes to increased toxicity
- b) Gastric lavage is recommended
- c) Electrocardioversion is the treatment of choice if VT occurs
- d) Over a chronic period serum levels are a useful indicator of toxicity
- e) Hypocalcaemia increases the toxicity

44. Urinary alkalinization

- a) Is useful in methanol overdose
- b) Aims to get urinary ph >9.0
- c) Aims to get serum ph >7.55
- d) Is enhanced with hypokalemia
- e) Is useful in theophylline overdose

45. Which is true?

- a) Ethylene glycol is sweet smelling
- b) Vancomycin can cause graying of the skin
- c) Organophosphates have an egg like smell
- d) Methaemoglobin will make the skin look red
- e) Cyanide smells like almonds

46. St. John's Wort

- a) Can increase digoxin levels
- b) Can increase theophylline levels
- c) Can cause a reduction in the INR of people on warfarin
- d) Is a herbal remedy for anxiety
- e) Reduces the serotonin effects of ssris

47. With aspirin overdoses

- a) Acute ingestion of 300mg/kg causes severe toxicity
- b) Multidose charcoal is a routine treatment
- c) A Dome nomogram is useful in paediatric patients
- d) Patients with severe toxicity are usually fluid overloaded
- e) Haemorrhagic complications are frequently seen with single massive overdoses

48. Significant organophosphate exposure

- a) Causes tachycardia
- b) Causes urinary incontinence
- c) Inhibits anticholinesterases in the blood
- d) Has no effect on cardiac rhythm
- e) Classically cause mydriasis

49. All are recognized treatments for B blocker overdoses EXCEPT

- a) Glucagon infusion
- b) Whole bowel irrigation
- c) Intra-aortic balloon pump for refractory shock
- d) Calcium infusion
- e) Amrinone infusion

50. Which is true?

- a) Swallowed mercury from a thermometer is a medical emergency
- b) Lead overdose can cause seizures
- c) Dimercaptosuccinic acid is the chelating agent of choice in iron overdoses
- d) In life threatening iron overdoses charcoal is given
- e) Adults are more susceptible to effects of lead

51. Intestinal colic-which of the following is incorrect?

- a) Unknown causation
- b) May improve with removal of cow's milk
- c) Presents with paroxysmal crying
- d) Normally occurs up to 6 months of age
- e) Incidence of colic is about 13%

52. Sinusitis-which of the following sentences is correct?

- a) Ethmoid and maxillary sinuses are not present at birth
- b) A major pathogen is group A streptococci
- c) Mucosal thickening >2mm on xray indicates disease
- d) Amoxil is the first choice in mild/moderate disease
- e) Diagnosis is usually made radiologically

53. All of the following are admission criteria for children with pneumonia except

- a) Hypoxia(O<sub>2</sub> sat<90)
- b) WBC>15
- c) Dehydration
- d) Hx of apnoeic episodes
- e) Social situation

54. 4 year old presents to the emergency department with URTI and sore ear. What is the most important diagnostic clue confirming Otitis Media?

- a) Loss or decreased mobility of the TM
- b) Hyperaemia of TM
- c) Presence of bulging of TM
- d) Absent light reflex



e) URTI signs with retracted ear drum

55. A 7 month old presents to ED with 2 day hx of stridor. Typically croup is

- a) Associated with high fevers
- b) Cough is worse during the day
- c) Worse on the 3rd day with associated wheeze
- d) Biphasic stridor
- e) Stridor is affected by position

56. Rocky mountain spotted fever presents with a rash that is described as

- a) Sandpaper rash
- b) Target lesions
- c) Sunburn rash
- d) Painful erythroderma
- e) Petechial rash

57. A 2 year old presents to ED with hx of PV bleeding-all of the diagnosis listed below are possible except-

- a) Hydrocolpos
- b) Sarcoma botryoides
- c) Sexual abuse
- d) Urethral prolapse
- e) Lichen sclerosis atrophica

58. Which drug is contraindicated during breast feeding

- a) Metaclopramide
- b) Ergotamine
- c) Digoxin
- d) Phenytoin
- e) Morphine

59. The criteria for bacterial vaginosis are listed below except:

- a) Presence of clue cells
- b) Ph>4.5
- c) White homogenous discharge
- d) Vulvar erythema and oedema
- e) Fishy odour afterkoh addition

60. Syncope typically occurs in all cardiac paediatric patients except:

- a) Truncus arteriosus
- b) Tetralogy of Fallot
- c) Hypertrophic cardiomyopathy
- d) Aortic stenosis
- e) Prolonged QT syndrome

ANSWERS – 5<sup>th</sup> edition

1.	D ( page 65/66 )	
2.	E (page 66/67)	
3.	A ( page 68)	
4.	C (page 70)	
5.	C (page 73)	
6.	B (page 74)	
7.	B (page 75)	
8.	E ( page 77/76)	
9.	C (page 86/87)	
10.	C (page 88/90)	

11.	B - Chapter 23, Table 23.3, page 155, 5th ed	
12.	A - Chapter 23, page 159, 5th ed	
13.	E - Chapter 24, Page 184, 5th ed	
14.	C - Chapter 24, page 177, 5th ed	
15.	D - Chapter 25, Table 25.7, page 213, 5th ed	
16.	??? - Chapter 25, page 206, 5th ed	
17.	C - Chapter 26, Page 216, 5th ed	
18.	A - Chapter 27, Page 224, 5th ed	
19.	E - Chapter 27, page 227, 5th ed	
20.	B - Chapter 28, Page 231-232.	
21.	d chap 179 6 <sup>th</sup> ed	
22.	c chap 180 6 <sup>th</sup> ed	
23.	a chap 183 6 <sup>th</sup> ed	
24.	e chap 190 6 <sup>th</sup> ed	
25.	b chap 192 6 <sup>th</sup> ed table 192-2	
26.	b chap 189 6 <sup>th</sup> ed	
27.	c chap 194 6 <sup>th</sup> ed and also Cameron p654	
28.	d chap 195 and Cameron p650	
29.	a chap 199 6 <sup>th</sup> ed tint	
30.	e chap 200 6 <sup>th</sup> ed tint	

31.	C	
32.	D	
33.	C	
34.	B	
35.	D	
36.	A	
37.	D	
38.	D	
39.	E	
40.	C	

41.	b Ed 6 chap171 children at less risk because more hepatic sulphuration toxic exposure suspected if >140mg/kg or 7.5g/24hr NAC is assoc with lower risk of hepatotox even if given >24hr Rasied PR, pH <7.3, hepatic encephalopathy, and renal	
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	impairment assoc with poor Px	
42.	c chap 173	
43.	a chap 174 not recommended as inc vagal stimulation can cause asystole. Give atropine first if going to lavage electrocard only as last resort as may induce intractable VF levels not useful with chronic exp hyperCa hypoMg and hypoK predispose toxicity	
44.	a chap 156	
45.	e chap 156	
46.	c chap 157	
47.	a chap 170	
48.	b chap 182	
49.	d chap 175	
50.	b chap 184	

51.	D page 758 normally 3/12	
52.	D page 797	
53.	B PAGE 813	
54.	A page 787	
55.	D page 883	
56.	E page 949	
57.	A page938	
58.	B page 706	
59.	D page 715	
60.	A page783	

**Practice Fellowship MCQ Paper 6**

**60 questions in**

61. In brachial neuritis

- a) Excluded by presence of motor signs
- b) Excluded if bilateral
- c) Steroids are of proven benefit
- d) Good prognosis with a full recovery is expected
- e) Is precipitated by chlamydial or salmonella infections

62. Amyotrophic lateral sclerosis

- a) Only affects lower motor neurons
- b) Only affects upper motor neurons
- c) Only affects sensory system
- d) Only affects motor system
- e) Is associated with cognitive defects

63. In myasthenia gravis which is most true

- a) Compensatory increase in the number of acetylcholine receptors
- b) Most common age of onset is lower for males compared to females
- c) Family members are not at any increased risk of the disease
- d) Differentiated from cholinergic crisis by tensilon test
- e) Neostigmine is contraindicated

64. The most common cause of death in severe Parkinson disease is

- a) Venous thromboembolism
- b) Trauma
- c) Respiratory failure
- d) UTI
- e) Suicide

65. Regarding polio

- a) Up to 10% of infections result in abortive polio
- b) Is typically a minor viral illness
- c) Spinal polio is characterized by an asymmetric weakness with associated fasciculations and hyperreflexia
- d) Maximal paralysis develops over weeks to months
- e) Autonomic dysfunction occurs rarely

66. In bacterial meningitis meningitis which is most correct

- a) Dexamethasone is a proven therapy
- b) LP is always abnormal
- c) Opening pressure may be falsely elevated with a patient lying curled on their side
- d) Antibiotic therapy will alter the overall diagnostic yield if given within 2 hours of lumbar puncture
- e) All of the above are true

67. In brain abscess which is true?

- a) Is at least as common as brain tumors
- b) Has a similar mortality rate over the last 100 years despite antibiotic therapy
- c) Organisms from haematogenous spread are most typically polymicrobial
- d) Most commonly presents with headache, fever and focal neurological deficit
- e) The most common symptom is fever

68. Regarding CSF shunts which is true?

- a) Obstruction is most commonly in the valve chamber
- b) Distal obstruction is most commonly encountered in shunts in place longer than 2 years
- c) Slit ventricle syndrome is becoming more common
- d) Chamber refill within 3 seconds after compression excludes a proximal obstruction
- e) Obstruction is excluded if the CT scan and shunt series are normal

69. Regarding CSF shunt infections which is true?

- a) Most commonly due to *Staph aureus*
- b) Mandates a lumbar puncture if shunt series and CT are normal
- c) Decreased risk of infections due to typical organisms of meningitis
- d) Almost 20% of patients have a normal CSF culture despite an initially normal CSF analysis
- e) Meningismus is present in > 86 % of infections

70. Regarding neuroimaging which is true?

- a) CT is almost 100% sensitive for etiologies of seizures that require emergent intervention
- b) Secondary hydrocephalus is a contraindication to LP
- c) Sensitivity for detecting encephalitis is improved with contrast
- d) MRI is not more sensitive than contrast CT for detecting encephalitis
- e) The American College of Emergency Physicians Specialty Panel do not recommend CT scanning for first-time seizures

71. The most common cause of acute abdominal pain is

- a) Non specific abdominal pain
- b) Appendicitis
- c) Renal colic
- d) Gallbladder disease
- e) Diverticular disease

72. The following esophageal foreign bodies warrant early endoscopic consultation except

- a) Airway compromise
- b) Evidence of perforation
- c) Button batteries
- d) Multiple foreign body
- e) Cylindrical battery

73. The most common cause of hernia in men is

- a) Direct inguinal hernia

- b) Indirect inguina hernias
- c) Incisional hernia
- d) Epigastric hernia
- e) Hiatus hernia

74. Which of the following is not painful?

- a) Internal haemorrhoids
- b) Fissure in ano
- c) Perianal abscesses
- d) None of the above
- e) External haemorrhoids

75. The risk factors for developing gallstones include all expect

- a) Female sex
- b) High spinal cord injury
- c) Liver disease
- d) Asthma
- e) Pregnancy

76. Which of the following is true about renal calculi?

- a) More common in females
- b) Renal calculi with a size of 6 mm has a 50% chance of spontaneous passage
- c) Struvite stones are associated with short bowel syndrome
- d) Renal colic is common in infants
- e) Painless hematuria may be the only symptom in 80% of children with renal calculi

77. Hospital acquired ARF is mainly caused by

- a) ATN
- b) Diuretics
- c) Renal calculi
- d) Volume loss
- e) Ace inhibitors

78. Umbilical hernia in children

- a) Incarcerate frequently
- b) Usually close spontaneously
- c) Should be referred to the GP if smaller than 2 cm
- d) Has a genetic predisposition
- e) Is associated with femoral hernia

79. The symptom with the highest sensitivity in diagnosing appendicitis is

- a) Anorexia
- b) Nausea
- c) Vomiting
- d) Pain before vomiting
- e) Fever

80. The sign with the most specificity in appendicitis is

- a) Psoas sign
- b) Guarding
- c) Jump test
- d) Rectal tenderness
- e) Rebound tenderness test

81. The following have been implicated in causing priapism EXPECT

- a) Hydralazine
- b) CA channel blocker
- c) Thioridazine
- d) Chlorpromazine
- e) Pseudo ephedrine

82. Which of the following medications predispose a patient to increase kidney stone formation?

- a) Didanosine
- b) Indinavir Sulfite
- c) Abacavir
- d) Zalcitabine
- e) Zidovudine

83. The urine sample collected on a 56 year old patient is noted to be cloudy by the nurse. The most likely reason is

- a) White cells
- b) Protein and Crystals
- c) Glucose
- d) Stap.Aureus
- e) E.Coli

84. Which of the following study is the modality of choice to detect a perinephric abscess?

- a) Abdominal CT
- b) IVP
- c) US
- d) Plain abdominal X-Ray
- e) MRI

85. The incidence of developing uti following catheterization is

- a) 1 %
- b) 10%
- c) 20%.
- d) 0.1%

86. PD related peritonitis is commonly due to which organism?

- a) Staphylococcus epidermidis
- b) E. Coli
- c) Staphylococcus aureus
- d) Anaerobic bacteria
- e) Streptococcus species

87. What is the most common causative organism found in an uncomplicated UTI?

- a) Chlamydia
- b) Klebsiella
- c) Proteus
- d) E- Coli
- e) Staphylococcus saprophyticus

88. Which of the following is not an appropriate treatment for priapism?

- a) Terbutaline.
- b) Aspiration of corporeal blood
- c) Ice water enema
- d) Exchange Transfusion
- e) Phenyl ephrine

89. Management of pulmonary oedema in ESRF patients include all except

- a) Haemodialysis.
- b) Frusemide
- c) ACEI.
- d) Morphine
- e) Clopidrogel

90. What is the most frequent complication during hemodialysis?

- a) Dialysis disequilibrium
- b) Air embolism
- c) Hypercalcemia
- d) Hypotension
- e) Hemolysis

91. On consumption of household bleach

- a) Deep acidic burns may occur
- b) Charcoal should be administered
- c) A nasogastric tube should be placed
- d) Pulmonary irritation may occur
- e) A course of steroids should be start as soon as possible



92. Phenytoin

- a) Is useful for all types of epilepsy including absences
- b) Blocks Na channels
- c) Can be safely administered iv at rates of 50mg/min
- d) Multiple dose charcoal has no role in overdose
- e) Cardiac toxicity is a common manifestation of oral overdose

93. Typical sympathomimetic toxidrome may show all of the following EXCEPT

- a) Tachycardia
- b) Sweating
- c) Hypertension
- d) Pyrexia
- e) Urinary retention

94. In a TCA overdose

- a) QRS >100ms warrants nahco<sub>3</sub> therapy
- b) ECG abnormalities usually develop after 6 hours
- c) Children are less likely than adults to experience anti-muscarinic side effects
- d) Hypokalemia is rarely seen when nahco<sub>3</sub> has been given
- e) The typical seizure is a focal one with secondary generalization

95. In lithium overdoses

- a) Severity can always be predicted from serum Li levels
- b) Nausea and vomiting are rarely seen
- c) A patient with normal renal function will not need dialysis
- d) Whole bowel irrigation is not useful
- e) The effects of suxamethonium may be prolonged

96. With regards to sedative hypnotics

- a) Arrhythmias are a well recognized side effect of chloral hydrate
- b) Naloxone may reverse some of the sedative effects of gamma hydroxybutyrate
- c) Haemodialysis has no role in the treatment of massive barbiturate overdose
- d) Isolated benzodiazepine overdoses are associated with a high mortality
- e) Lorazepam and midazolam have active metabolites which may accumulate

97. With methanol poisoning

- a) Symptoms will always be present within 4 hours as it is so well absorbed
- b) There is usually a raised osmolar gap
- c) There is a normal anion gap
- d) Acetone is its most toxic metabolite
- e) Giving folate may precipitate Wernickes encephalopathy in a chronic user

98. Ethylene glycol

- a) Is odourless and bitter tasting
- b) In overdose >90% patients will have oxalate crystalluria
- c) In overdose an anion gap acidosis with osmolar gap is seen
- d) When drunk frequently causes hypercalcaemia
- e) Poisoning does not require haemodialysis if fomepizole is administered

99. With opioids

- a) Naloxone will reverse seizures caused by tramadol
- b) 5mg of heroin is equivalent to 25mg morphine
- c) Miosis is always present in overdose
- d) Naloxone can be administered sc, im and intratracheally
- e) Withdrawal from heroin is usually seen within 6 hours

100. With cocaine ingestion

- a) Qtc prolongation can occur causing arrhythmias
- b) Iv metoprolol is useful to control hypertension
- c) By body packers use of whole bowel irrigation is dangerous
- d) Haloperidol is used to provide sedation
- e) Users rarely take other drugs

101. Which of the following zoonotic infections is transmitted by fish

- a) Ehrlichia sp.
- b) Leptospira sp.
- c) Yersinia pestis
- d) Aeromonas sp.
- e) Capnocytophaga

102. A young man presents with bilateral interstitial lung infiltrates. Which of the following is true for PCP?

- a) LDH level is lower in PCP
- b) Initial therapy is Clarithromycin 500mg bd orally
- c) Is the most common opportunistic infection in AIDS patients
- d) Steroid therapy is started if pao<sub>2</sub> is less than 90mmhg
- e) Negative CXR findings are reported in 80% of cases

103. Which of the following infections is spread by droplets

- a) Scabies
- b) Respiratory syncytial virus
- c) Hepatitis A
- d) Clostridium difficile
- e) Parvovirus B19

104. All of the following are reportable communicable diseases except
- Malaria
  - Hansen's disease
  - Rubella
  - Toxoplasmosis
  - Streptococcus Group A
105. A 24 year old presents to ED with fever and hx of 3 weeks ago being in Africa with no antimalarial protection. What specifically diagnoses P falciparum
- Incubation period of 3 weeks
  - Fever and rigors
  - Reticulocytes infected
  - Normochromic and normocytic anaemia
  - Ring forms predominate
106. What clinical feature differentiates rabies and tetanus
- Altered mental state
  - Paralysis
  - Limb pain
  - Fever and chills
  - Nuchal rigidity
107. Clinical tetanus can be divided into four forms. Which of the following is not one of the categories?
- Local
  - Neonatal
  - Generalised
  - Encephalitis
  - Cephalic
108. Prader -Willi syndrome is characterised by all of the following except:
- Mitral valve prolapse
  - Obesity
  - Hypotonia
  - Hypogonadism
  - Mental retardation
109. Children with Downes syndrome are associated with all of the following cardiac defects except
- Mitral valve prolapse
  - ASD
  - Tetralogy of Fallot
  - PDA
  - VSD
110. A 26 week pregnant woman presents with chylamidia which antibiotic would be safe to treat with?
- Doxycycline
  - Ofloxacin

- c) Azithromycin
- d) Erythromycin
- e) metronidazole

111. The correct DSM IV Axis diagnoses are

- a) Axis I -Personality disorders
- b) Axis I -Mental disorders
- c) Axis II -Mental disorders
- d) Axis III – Personality disorders
- e) Axis IV – General Medical conditions

112. In Dementia, as opposed to delirium

- a) Clouding of consciousness is common
- b) Is more acute
- c) Commonly shows extremes of psychomotor activity
- d) Commonly exhibit hallucinations
- e) Includes a disturbance of cognitive functioning.

113. Schizophrenia

- a) Commonly presents in late adolescence or early adulthood
- b) Must include a mood disorder for DSM IV diagnosis
- c) Has no genetic link known
- d) Produces negative symptoms which are easily controlled by anti-psychotics with positive symptoms being difficult to control
- e) Is unlikely in someone with a confused state

114. Appropriate chemical restraint might include

- a) Lorazepam 2mg IM
- b) Haloperidol 10mg IV
- c) Lorazepam 10mg oral
- d) Droperidol 10mg IV
- e) Midazolam 5mg IV

115. Antipsychotic side effects include

- a) Acute dystonia seen with benztropine
- b) B blocker induced akathisia
- c) Cholinergic effects
- d) Alpha-adrenergic blockage
- e) Serotonin syndrome

116. Bulimia may present with

- a) Hyperkaleamia
- b) Metabolic alkalosis
- c) Elevated serum amylase
- d) Parotid gland atrophy
- e) Intermenstrual bleeding

117. In the treatment of panic disorders

- a) Ssrís are useful as there are no sexual side effects
- b) MOAI are ineffective
- c) Benzodiazepines are useful
- d) Tcas are effective when given in twice daily dosing
- e) Drug therapy often takes 10 weeks to have an effect

118. In conversion disorder

- a) Autonomic symptoms are common
- b) More frequents seen in men
- c) Confronting the patient often alleviates the symptom
- d) Psychiatric referral is avoided as this exacerbates the condition.
- e) Lorazepam has been found to be helpful

119. In dealing with death

- a) Using phrases such as "passed on" is useful in breaking the news
- b) Normal grieving lasts 28-24 months
- c) Viewing the body should occur during the initial grief reaction to facilitate the process
- d) For coroners cases, removal of the lines facilitates examination
- e) Organ donation can still occur 4 after death if the body is refrigerated

120. Dependent alcohol use includes

- a) Tolerance has not yet developed therefore continued drinking of small amounts is usual
- b) Drinking tends to be large amounts over short periods
- c) No desire to cut down or give up.
- d) A great deal of time is spent recovering from its effects
- e) Absence of a knowledge of alcohol as a physical problem

61.	1475 d	
62.	1477 e	
63.	1479 d	
64.	1483 c	
65.	1484 b	
66.	1487 a	
67.	1490 c	
68.	1491 b	
69.	1492 d	
70.	1497 a	

**Answers; old Tintinalli**

71.	Ref pg499/T6 <sup>TH</sup>	
72.	Ref 514/T6	
73.	Ref pg 528/T6	
74.	Ref pg 540/T6	
75.	Ref PG 562/T6	
76.	pg620	
77.	pg594	
78.	pg 528	
79.	pg 521	
80.	pg 521	

Answers-Tintinalli 6 th edition.

81.	e	
82.	b	
83.	b	
84.	a	
85.	a	
86.	a	
87.	d	
88.	e	
89.	e	
90.	d	

TINTINALLI 6<sup>TH</sup> EDITION

91.	1.d Chapter 181 p1130
92.	2.b chap 178 not used in absence multidose charcoal useful in first 24hr because poor oral absorpt safe rate iv admin <25mg/min cardiac tox rarely seen with oral Od cardiac toxicity due to propylene glycol that dilutes it for iv admin
93.	3. e toxidrome table 156-3p1018
94.	4.a chap 158 ECG abnormalities usually develop within 6hr Children more likely to have anti musc side effect

	Expect hypoK and Rx Seizures are usually brief and generalized if focal need to look for other cause
95.	5.e chap162 levels don't predict toxicity as don't predict CNS level. Can be toxic with normal levels n&v common whole bowel irrigation useful esp SR tablets may in effects of sux and vec
96.	6a Barbiturate overdose - multidose charcoal, alkalization of urine and haemo all useful section163 neither naloxone nor flumazenil has been effective in reversing coma in GBH od p1060 Isolated BDz overdoses notable for their lack of signif M&M deaths have been reported with short acting BDZs like temazepam triazolam and alprazolam p1055 diazepam and chlordiapoxide & quazepam have active metabolites midaz and lorazepam don't table 164-1
97.	7b Methanol is well absorbed but sx of toxicity may be delayed 12-18hr after ingestion because take times for metabolites to accumulate Methanol toxicity inc anion gap and in osmolar gap (can get normal osmolar gap) metb to formic acid do give folate needed as cofactor in metb of formic acid
98.	8.c p1069 A colourless odourless and sweet tasting Only 50% have crystals hypoCa seen in 1/3 fomepizole admin does not alter indications for dialysis in ethylene glycol or methanol poisoning p1068
99.	9d naloxone ineffective in reversing seizures heroin 5mg : morphine 10mg table 167-1 p1071 miosis not always present may get mydriasis if hypoxic injury or other drugs Withdrawal sx being 12hr with heroin and after 30hr with methadone
100.	10a p1075 Bblockers absolutely contra-indicated Give go-lytely to hasten elimination of potentially lethal packets Use benzos for sedation antipsy can precipitate seizures or arrhythmias p1077 May have concomitant alcohol or other drugs 1077

101.	D pg 993	
102.	C page956-957	

103.	E pg 1018	
104.	Dpg1008	
105.	E page 976	
106.	A page 973	
107.	D page965	
108.	A page 932-933	
109.	A page 933	
110.	C page 944-945	

111.	Page 1907, Ch 280, psychosocial disorders.	
112.	Page 1908, Ch 280, psychosocial disorders	
113.	Page 1909-1910, Ch 280, Psychosocial disorders	
114.	Page 1918, Ch 281, Behavioural disorders,	
115.	Page 1919-1920, Ch 282, Psychotropic medication.	
116.	Page 1925, Ch 283, Bulimia,	
117.	Page 1931-32, Ch 284, Panic Disorder	
118.	Page 1934-35, Ch 285, Conversion Disorder.	
119.	Page 1936, Ch 286, Breaking the bad news.	
120.	Page 1939, ch 287, Patients who abuse alcohol	