

Random MCQs 7

1. The positive likelihood ratio of a test can be calculated by:

- a) True positive rate/True negative rate
- b) True positive rate/False positive rate
- c) True positive rate/True negative rate
- d) False positive rate/True positive rate
- e) True negative rate/True positive rate

Tintinalli 6th ed p490

2. Regarding the diagnosis of appendicitis

- a) Accurate pre-operative diagnosis is now readily available
- b) The diagnosis of appendicitis is either false positive or false negative about as often as it is correct
- c) Ultrasound is generally the preferred test in adults and non pregnant women
- d) Ultrasound is a useful screening (rule out) test
- e) CT must be performed with contrast enhancement

Tintinalli 6th ed p491

3. Regarding the Australasian Triage Scale (ATS) and ACEM policy?

- a) The performance indicator for ATS 1 is 90%
 - b) The performance indicator for ATS 3 is 75%
 - c) The performance indicator for ATS 5 is 50%
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4. Early access to defibrillation in out of hospital arrest:

- a) Is not internationally accepted as the single most important step
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- a) Does not require stabilisation of the patient
- b) Ideally requires the initiating doctor to make just 2 phone calls
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Tintinalli 6th ed p170-171 (tab 27-2 & 27-4)

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Tintinalli 6th ed p97 tab 16-2

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Tintinalli 5th ed p 1239 - 1240

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- a) Pethidine and its metabolite are proconvulsant
- b) Naloxone can be used to reverse tramadol seizures
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- a) Can be treated symptomatically if the joint is stable
- b) Are, by definition, stable injuries
- c) Require plaster immobilisation for 8-12 weeks
- d) Are unsuitable for a walking cast
- e) Usually require open reduction and internal fixation (ORIF)

McRae 3rd ed p 330

19. Regarding injury to the pinna of the ear:

- a) An auricular haematoma may be left to resolve spontaneously
- b) Adrenaline may be used with local anaesthetic for infiltration
- c) Skin debridement is advisable with larger wounds
- d) Adequate regional anaesthesia requires block of anterior *and* posterior branches of the great auricular nerve
- e) The anterior wall of the auditory canal is innervated by branches of the vagus nerve

Tintinalli 5th ed p307-308

20. Which is NOT a risk factor for subarachnoid haemorrhage?

- a) Neurofibromatosis

- b) 1st degree relative with SAH
 - c) Polycystic ovaries
 - d) Smoking
 - e) Hypertension
- Cameron p284

21. Regarding Hyperosmolar Non Ketotic coma:

- a) Ketoacidosis is frequently present
 - b) Fluid deficit is usually 3-5 L
 - c) Mortality rate is less than 10%
 - d) Insulin should be commenced at 0.1U /kg / hr
 - e) The degree of hyperglycaemia is not as great as that of diabetic ketoacidosis
- Cameron p377 &380

22. Which is NOT a cause of ptosis with a constricted pupil?

- a) Aneurysmal compression of the third cranial nerve
 - b) Carotid aneurysm
 - c) Brainstem infarction
 - d) Thyroid malignancy
 - e) SCC lung
- Talley & O'Connor 3rd ed p371

23. Regarding the treatment of acute otitis media in children over 2 years of age:

- a) Penicillin is the antibiotic of choice
- b) If not treated there is a high chance of chronic glue ear
- c) Antibiotic treatment is the best treatment for associated otalgia
- d) Antibiotics should only be commenced if the child remains febrile or symptomatic at 48 hrs
- e) None of the above

Abx guidelines version 11, 2000, p133

24. Regarding *pneumocystis* pneumonia in AIDS:

- a) It is acquired when the CD4 count is 200- 500 /_L
- b) Prophylaxis should be given in all pts with CD4 count < 200 / _L
- c) CXR is characteristically normal
- d) It is uncommon in HIV positive patients
- e) Corticosteroids are contraindicated in hypoxic patients

Tintinalli 5th ed p954-956

25. Which organism is most commonly responsible for travellers' diarrhoea?

- a) Enterotoxigenic strain of E coli
- b) Clostridium difficile
- c) Salmonella
- d) Rotavirus
- e) Vibrio cholera

Abx guidelines version 11, 2000, p58

26. A woman in labour has acquired chicken pox. Recommended treatment for the neonate is:

- a) IV acyclovir
- b) Varicella Zoster Immunoglobulin (VZIG) by IM route
- c) VZIG by IV route
- d) Oral valaciclovir
- e) Expectant only

Tint 5th ed p1024

27. Regarding arrhythmias secondary to overdose (OD)

- a) NaHCO₃ is the drug of choice for arrhythmias caused by calcium channel antagonists

- b) In arrhythmias from digoxin OD, cardioversion is recommended
 - c) Tricyclic antidepressants prolong the QT interval
 - d) Phenytoin possesses class 2 antiarrhythmic effects
 - e) Torsades de pointes is induced by hypercalcaemia
- Cameron chap 4.4

28. Regarding the fluid and its content, which is INCORRECT?

- a) Normal Saline – 150mmol Na⁺/L
- b) Hartmann's – 131mmol Na⁺/L
- c) Hartmann's – 131mmolCl⁻/L
- d) 5% Dextrose - 50g glucose/L
- e) Hartmann's - 5 mmol K⁺/L

29. What RBC count constitutes a positive diagnostic peritoneal lavage?

- a) >30 000/cm³
- b) >60 000/cm³
- c) >100 000/cm³
- d) >200 000/cm³
- e) >500 000/cm³

Tint 5th ed p1704

30. Which four major criteria must be present to make the diagnosis of pelvic inflammatory disease?

- a) Temp >38.3, abdo pain, vaginal discharge, adnexal tenderness
- b) Temp > 38.3, abdominal pain, cervical excitation, raised CRP
- c) Abdo pain, adnexal tenderness, raised CRP, vaginal discharge
- d) Adnexal tenderness, vaginal discharge and increased CRP, lower abdominal tenderness
- e) Abdominal pain, cervical excitation and adnexal tenderness, lower abdominal tenderness

Tint 5th ed p721, table 105.1

31. Which is NOT a feature of scarlet fever?

- a) It is caused by group A beta haemolytic strep
- b) The rash appears within 2 hours of the onset of fever, vomiting, headache and abdo pain
- c) Koplik spots
- d) Strawberry tongue
- e) Circumoral pallor

Tint 5th ed p901

32. Which of the following clinical signs is NOT clinically useful enough to raise the indication for surgery in patients with suspected appendicitis?

- a) Pain located in RLQ
- b) Pain migration from the peri umbilical area to the RLQ
- c) Rigidity
- d) Pain before vomiting
- e) Anorexia

Tintinalli 6th ed p491

33. According to the "Sad Persons" Scale used to assess suicide risk, which of the following features scores 2 points?

- a) Loss of rational thinking
- b) Excessive drug use
- c) Single, separated or divorced
- d) Male gender
- e) Severe personality disorder

Cam p512 table 19.4.2

34. Regarding Red back spider envenomation:

- a) Most patients are bitten in the winter months
- b) Only the male spider is capable of envenoming humans
- c) Antivenom is routinely given intravenously
- d) The bite from the spider is typically very painful
- e) Untreated, most cases resolve over hours to days

Cam p653

35. A patient's arterial blood gas results are the following, on room air, at sea level:

pH 7.30

pCO₂ 29

pO₂ 80

HCO₃ 20

- a) Bartter's syndrome is a possible cause
- b) The A-a gradient is 20
- c) If the anion gap is 12, the likeliest cause is lactic acidosis
- d) The corresponding venous pH would be 7.25
- e) The serum [K⁺] would be raised by about 1 mmol/L

Cam 394

36. Regarding external cardiac compression (massage):

- a) The lower sternum should be depressed 2-3 cm in an adult.
- b) It produces about 50% of pre-arrest cardiac output.
- c) Coronary perfusion occurs primarily during the systolic (compression) phase.
- d) Blood is directed mostly to the lower extremities
- e) Blood flow to the myocardium is reduced 20-50% of normal.

T Oh 4th Ed p61

37. An X-ray of a child's elbow reveals ossification of the capitulum and radial head. The child's age is likely to be

- a) 1-2 years
- b) 4-5 years
- c) 6-7 years
- d) 10-11 years
- e) None of the above

McRae 3rd Ed p130

38. Haemodialysis would increase the excretion of:

- a) Tricyclics
- b) Benzodiazepines
- c) Digoxin
- d) Lithium
- e) Calcium channel blockers

Tint 3rd Ed p1062

39. A 38 yo man presents with unusual behaviour. Which of the following features most likely suggests a *non-organic* (psychiatric) aetiology?

- a) Disorientation to time and place
- b) A GCS of 10
- c) Temperature of 39deg C
- d) Slow onset
- e) Disorganised delusions

Cam p501, table19.2.6

40. It is quoted that a D-Dimer assay for thromboembolic disease has a negative predictive value of 98%. This means that

- a) If disease is present, D-Dimer will be positive 98% of the time
- b) If disease is absent, D-Dimer will be negative 98% of the time
- c) 2% of positive tests will be falsely positive
- d) 98% of negative tests will be truly negative
- e) D-Dimer assay is useful only when the result is positive

41. Regarding acute myocardial infarction, which is FALSE:

- a) 'Painless' AMI has an incidence of ~70 % in patients over 85yo
 - b) 20 % of AMIs occur in the age group less than 40 yo
 - c) 25-50 % of patients with an AMI have a normal initial ECG
 - d) Troponin I levels at 24 hr approach 100% sensitivity for AMI
 - e) Variant (Prinzmetal) angina can lead to ventricular dysrhythmia and sudden death
- Cameron Ch 4 pg 140*

42. Acute angle closure glaucoma:

- a) Results from an acute impairment of vitreous from the Canal of Schlemm
 - b) Is characterised by an intraocular pressure of 15 to 20 mmHg
 - c) Is treated with a topical mydriatic agent
 - d) Presents with a unilateral painless complete loss of vision
 - e) Causes corneal epithelial oedema
- Cameron Ch 15 pg 449*

43. An adult presents with a GCS of 13, BP of 80/40 and respiratory rate of 24, following a car accident. His Revised Trauma Score is:

- a) 12
- b) 11
- c) 10
- d) 9
- e) 8

Tintinalli 5th ed Front inside cover: reference tables

44. Regarding the diagnosis of pulmonary embolism (PE), which is FALSE:

- a) The CXR is reportedly abnormal in up to 80% of patients with PE
 - b) A normal perfusion scan excludes PE
 - c) 40 % of patients with diagnosed DVT have asymptomatic PE
 - d) 30 % of patients with a PE will have a clot in the proximal leg veins
 - e) Patients with a low probability VQ scan have a 15-30 % chance of having a PE
- Cameron Ch 4 pg 167 - 168*

45. Regarding myocarditis, which is FALSE:

- a) Myocarditis mostly occurs in the child and young adult
 - b) Viral infection is the commonest cause
 - c) Echocardiography is diagnostic
 - d) The CXR may show cardiomegaly and the changes of congestive cardiac failure
 - e) A normal radio labelled antimyosin Fab nuclear scan makes myocarditis unlikely
- Cameron Ch 4 pg 176*

46. In adult epiglottitis:

- a) The mortality rate is lower for adults compared to children
 - b) Haemophilis influenzae is the commonest causative organism
 - c) Indirect laryngoscopy is contraindicated as it may precipitate airway obstruction
 - d) Stridor is present in most cases
 - e) Penicillin is the first line antibiotic of choice for treatment
- Cameron Ch 5 pg 204*

47. Features of a community acquired pneumonia associated with increased morbidity and

mortality include the following EXCEPT:

- a) Age greater than 65 yo
- b) C Reactive Protein greater than 40
- c) Serum urea greater than 7 mmol / L
- d) Multilobar involvement on CXR
- e) Bacteraemia

Cameron Ch 5 pg 210

48. With respect to the assessment of haemoptysis, which is FALSE:

- a) In approx. 30% of cases no cause is found
- b) 20-30 % have a normal CXR
- c) Bronchoscopy should be performed early in massive haemoptysis
- d) All patients should be admitted for investigation
- e) In massive haemoptysis, the Trendelenburg position aids drainage of blood from the thorax

49. In infective endocarditis, which is FALSE:

- a) Peripheral manifestations occur in 20% of cases
- b) Staph aureus is the most common pathogen in IV drug users
- c) Fever and malaise are the 2 commonest presenting features
- d) Neurological manifestations are present in 30-40 % of patients
- e) Blood cultures are positive in 95-100% of patients not previously treated with antibiotics

Cameron Ch 4.7 pg 178

50. In a patient with an abdominal aortic aneurysm (AAA), which is FALSE:

- a) The aorta is considered to be aneurysmal if it's diameter is greater than 3 cm
- b) A first degree relative with an AAA is considered a risk factor
- c) Retroperitoneal rupture is more common than intraabdominal rupture
- d) The risk of rupture rises if the aortic diameter is greater than 4 cm
- e) The renal arteries are involved 25% of the time

Cameron Ch 4.11 pg 198

51. In a patient presenting with aortic dissection, which is FALSE:

- a) The mortality rate is 1% per hr in the first 48 hr if untreated
- b) A Stanford type B lesion is more likely than a Stanford type A lesion
- c) Up to 15% are pain free and present with neurological impairment or sudden death
- d) Acute aortic incompetence is a common finding in proximal dissection
- e) The combination of neurological deficit and chest pain suggests aortic dissection

Cameron Ch 4.10 pg 194

52. In a patient with suspected isolated cyanide ingestion, which investigation would be the LEAST useful in aiding diagnosis:

- a) Serum cyanide level
- b) Serum lactate level
- c) Methaemoglobin level
- d) Arterial pH
- e) Arterial oxygen

Cameron Ch 27.14 pg 706

53. Currently, there is NO antivenom for envenomation by which creature?

- a) Tiger Snake
- b) Red Back Spider
- c) Box Jellyfish
- d) Stonefish
- e) Blue-ringed Octopus

Cameron Ch 27.1, 27.2 and 27.3

54. Sudden Infant Death Syndrome is associated with, or more prevalent in:

- a) Sleeping in the supine position
- b) An Apparent Life Threatening Event
- c) Warmer climate
- d) Female, compared to male babies
- e) Older mothers

Tintinalli 5th ed p771 - 772

55. The following are features of valid consent EXCEPT:

- a) Consent must be written
- b) Consent must be informed
- c) Consent must be specific
- d) Consent must be freely given
- e) Consent must cover that which is actually done

Cameron Ch 23.3 pg 562

56. Which of the following is an indication for reduction in a supracondylar fracture?

- a) Backward tilting of distal fragment by 20 degrees
- b) 45% of bony contact
- c) Medial tilting of 15 degrees
- d) Lateral tilting of 15 degrees
- e) All of the above

McRae 3rd ed p131

57. Which is FALSE regarding the diagnosis of acute testicular torsion?

- a) It is most common in adolescence (12-18yo)
- b) Severe sudden onset pain is diagnostic
- c) It may occur in a testicle that has been previously fixed
- d) Irritative voiding symptoms rarely occur
- e) An associated mild fever may be present

Cameron Ch 9.2 pg 369

58. Urinary diagnostic indices of acute renal failure (ARF) due to prerenal causes includes:

- a) Blood Urea : Creatinine ratio > 100:1
- b) Specific gravity < 1.013
- c) Urine Na > 10 mmol/L
- d) Urine osmolality < 350
- e) Urine : Plasma osmolar ratio < 1.2

Cameron Ch 9.1 pg 363 table 9.1.5

59. In diagnosing Urinary Tract Infections (UTI), which are TRUE:

- a) Most patients have pyuria of > 10 leucocytes mm³
- b) The presence of nitrites is 85% sensitive
- c) Haematuria is non specific
- d) Proteinuria is common but non specific
- e) A bacteria count > 10⁵ is usually diagnostic

Cameron Ch 8.5 pg 320

60. In septic arthritis, which is NOT a typical synovial fluid finding:

- a) Yellow colour
- b) Predominance of polymorphonuclear leucocytes
- c) 5 – 1000 leucocytes per microlitre
- d) Turbidity
- e) Bacteria on Gram stain

Cameron Ch 8.3 pg 314

Answers:

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- b) Are, by definition, stable injuries
- c) Require plaster immobilisation for 8-12 weeks
- d) Are unsuitable for a walking cast
- e) Usually require open reduction and internal fixation (ORIF)

McRae 3rd ed p 330

19. Regarding injury to the pinna of the ear:

- a) An auricular haematoma may be left to resolve spontaneously
- b) Adrenaline may be used with local anaesthetic for infiltration
- c) Skin debridement is advisable with larger wounds
- d) **Adequate regional anaesthesia requires block of anterior and posterior branches of the great auricular nerve**
- e) The anterior wall of the auditory canal is innervated by branches of the vagus nerve

Tintinalli 5th ed p307-308

20. Which is NOT a risk factor for subarachnoid haemorrhage?

- a) Neurofibromatosis
- b) 1st degree relative with SAH
- c) **Polycystic ovaries**

- d) Smoking
 - e) Hypertension
- Cameron p284

21. Regarding Hyperosmolar Non Ketotic coma:

- a) Ketoacidosis is frequently present
 - b) Fluid deficit is usually 3-5 L
 - c) Mortality rate is less than 10%
 - d) Insulin should be commenced at 0.1U /kg / hr
 - e) The degree of hyperglycaemia is not as great as that of diabetic ketoacidosis
- Cameron p377 &380

22. Which is NOT a cause of ptosis with a constricted pupil?

- a) Aneurysmal compression of the third cranial nerve
- b) Carotid aneurysm
- c) Brainstem infarction
- d) Thyroid malignancy
- e) SCC lung

Talley & O'Connor 3rd ed p371

23. Regarding the treatment of acute otitis media in children over 2 years of age:

- a) Penicillin is the antibiotic of choice
- b) If not treated there is a high chance of chronic glue ear
- c) Antibiotic treatment is the best treatment for associated otalgia
- d) Antibiotics should only be commenced if the child remains febrile or symptomatic at 48 hrs
- e) None of the above

Abx guidelines version 11, 2000, p133

24. Regarding *pneumocystis* pneumonia in AIDS:

- a) It is acquired when the CD4 count is 200- 500 /_L
- b) Prophylaxis should be given in all pts with CD4 count < 200 /_L
- c) CXR is characteristically normal
- d) It is uncommon in HIV positive patients
- e) Corticosteroids are contraindicated in hypoxic patients

Tintinalli 5th ed p954-956

25. Which organism is most commonly responsible for travellers' diarrhoea?

- a) Enterotoxigenic strain of E coli
- b) Clostridium difficile
- c) Salmonella
- d) Rotavirus
- e) Vibrio cholera

Abx guidelines version 11, 2000, p58

26. A woman in labour has acquired chicken pox. Recommended treatment for the neonate is:

- a) IV acyclovir
- b) Varicella Zoster Immunoglobulin (VZIG) by IM route
- c) VZIG by IV route
- d) Oral valaciclovir
- e) Expectant only

Tint 5th ed p1024

27. Regarding arrhythmias secondary to overdose (OD)

- a) NaHCO₃ is the drug of choice for arrhythmias caused by calcium channel antagonists
- b) In arrhythmias from digoxin OD, cardioversion is recommended
- c) Tricyclic antidepressants prolong the QT interval

- d) Phenytoin possesses class 2 antiarrhythmic effects
 - e) Torsades de pointes is induced by hypercalcaemia
- Cameron chap 4.4

28. Regarding the fluid and its content, which is INCORRECT?

- a) Normal Saline – 150mmol Na⁺/L
- b) Hartmann's – 131mmol Na⁺/L
- c) Hartmann's – 131mmolCl⁻/L
- d) 5% Dextrose - 50g glucose/L
- e) Hartmann's - 5 mmol K⁺/L

29. What RBC count constitutes a positive diagnostic peritoneal lavage?

- a) >30 000/cm³
 - b) >60 000/cm³
 - c) >100 000/cm³
 - d) >200 000/cm³
 - e) >500 000/cm³
- Tint 5th ed p1704

30. Which four major criteria must be present to make the diagnosis of pelvic inflammatory disease?

- a) Temp >38.3, abdo pain, vaginal discharge, adnexal tenderness
 - b) Temp > 38.3, abdominal pain, cervical excitation, raised CRP
 - c) Abdo pain, adnexal tenderness, raised CRP, vaginal discharge
 - d) Adnexal tenderness, vaginal discharge and increased CRP, lower abdominal tenderness
 - e) Abdominal pain, cervical excitation and adnexal tenderness, lower abdominal tenderness
- Tint 5th ed p721, table 105.1

31. Which is NOT a feature of scarlet fever?

- a) It is caused by group A beta haemolytic strep
 - b) The rash appears within 2 hours of the onset of fever, vomiting, headache and abdo pain
 - c) Koplik spots
 - d) Strawberry tongue
 - e) Circumoral pallor
- Tint 5th ed p901

32. Which of the following clinical signs is NOT clinically useful enough to raise the indication for surgery in patients with suspected appendicitis?

- a) Pain located in RLQ
 - b) Pain migration from the peri umbilical area to the RLQ
 - c) Rigidity
 - d) Pain before vomiting
 - e) Anorexia
- Tintinalli 6th ed p491

33. According to the "Sad Persons" Scale used to assess suicide risk, which of the following features scores 2 points?

- a) Loss of rational thinking
 - b) Excessive drug use
 - c) Single, separated or divorced
 - d) Male gender
 - e) Severe personality disorder
- Cam p512 table 19.4.2

34. Regarding Red back spider envenomation:

- a) Most patients are bitten in the winter months

- b) Only the male spider is capable of envenoming humans
- c) Antivenom is routinely given intravenously
- d) The bite from the spider is typically very painful
- e) **Untreated, most cases resolve over hours to days**

Cam p653

35. A patient's arterial blood gas results are the following, on room air, at sea level:

pH 7.30

pCO₂ 29

pO₂ 80

HCO₃ 20

- a) Bartter's syndrome is a possible cause
- b) The A-a gradient is 20
- c) If the anion gap is 12, the likeliest cause is lactic acidosis
- d) **The corresponding venous pH would be 7.25**
- e) The serum [K⁺] would be raised by about 1 mmol/L

Cam 394

36. Regarding external cardiac compression (massage):

- a) The lower sternum should be depressed 2-3 cm in an adult.
- b) It produces about 50% of pre-arrest cardiac output.
- c) Coronary perfusion occurs primarily during the systolic (compression) phase.
- d) Blood is directed mostly to the lower extremities
- e) **Blood flow to the myocardium is reduced 20-50% of normal.**

T Oh 4th Ed p61

37. An X-ray of a child's elbow reveals ossification of the capitulum and radial head. The child's age is likely to be

- a) 1-2 years
- b) **4-5 years**
- c) 6-7 years
- d) 10-11 years
- e) None of the above

McRae 3rd Ed p130

38. Haemodialysis would increase the excretion of:

- a) Tricyclics
- b) Benzodiazepines
- c) Digoxin
- d) **Lithium**
- e) Calcium channel blockers

Tint 3rd Ed p1062

39. A 38 yo man presents with unusual behaviour. Which of the following features most likely suggests a *non-organic* (psychiatric) aetiology?

- a) Disorientation to time and place
- b) A GCS of 10
- c) Temperature of 39deg C
- d) **Slow onset**
- e) Disorganised delusions

Cam p501, table19.2.6

40. It is quoted that a D-Dimer assay for thromboembolic disease has a negative predictive value of 98%. This means that

- a) If disease is present, D-Dimer will be positive 98% of the time
- b) If disease is absent, D-Dimer will be negative 98% of the time

- c) 2% of positive tests will be falsely positive
- d) 98% of negative tests will be truly negative
- e) D-Dimer assay is useful only when the result is positive

41. Regarding acute myocardial infarction, which is FALSE:

- a) 'Painless' AMI has an incidence of ~70 % in patients over 85yo
 - b) 20 % of AMIs occur in the age group less than 40 yo
 - c) 25-50 % of patients with an AMI have a normal initial ECG
 - d) Troponin I levels at 24 hr approach 100% sensitivity for AMI
 - e) Variant (Prinzmetal) angina can lead to ventricular dysrhythmia and sudden death
- Cameron Ch 4 pg 140*

42. Acute angle closure glaucoma:

- a) Results from an acute impairment of vitreous from the Canal of Schlemm
 - b) Is characterised by an intraocular pressure of 15 to 20 mmHg
 - c) Is treated with a topical mydriatic agent
 - d) Presents with a unilateral painless complete loss of vision
 - e) Causes corneal epithelial oedema
- Cameron Ch 15 pg 449*

43. An adult presents with a GCS of 13, BP of 80/40 and respiratory rate of 24, following a car accident. His Revised Trauma Score is:

- a) 12
- b) 11
- c) 10
- d) 9
- e) 8

Tintinalli 5th ed Front inside cover: reference tables

44. Regarding the diagnosis of pulmonary embolism (PE), which is FALSE:

- a) The CXR is reportedly abnormal in up to 80% of patients with PE
 - b) A normal perfusion scan excludes PE
 - c) 40 % of patients with diagnosed DVT have asymptomatic PE
 - d) 30 % of patients with a PE will have a clot in the proximal leg veins
 - e) Patients with a low probability VQ scan have a 15-30 % chance of having a PE
- Cameron Ch 4 pg 167 - 168*

45. Regarding myocarditis, which is FALSE:

- a) Myocarditis mostly occurs in the child and young adult
 - b) Viral infection is the commonest cause
 - c) Echocardiography is diagnostic
 - d) The CXR may show cardiomegaly and the changes of congestive cardiac failure
 - e) A normal radio labelled antimyosin Fab nuclear scan makes myocarditis unlikely
- Cameron Ch 4 pg 176*

46. In adult epiglottitis:

- a) The mortality rate is lower for adults compared to children
 - b) Haemophilis influenzae is the commonest causative organism
 - c) Indirect laryngoscopy is contraindicated as it may precipitate airway obstruction
 - d) Stridor is present in most cases
 - e) Penicillin is the first line antibiotic of choice for treatment
- Cameron Ch 5 pg 204*

47. Features of a community acquired pneumonia associated with increased morbidity and mortality include the following EXCEPT:

- a) Age greater than 65 yo

- b) C Reactive Protein greater than 40
 - c) Serum urea greater than 7 mmol / L
 - d) Multilobar involvement on CXR
 - e) Bacteraemia
- Cameron Ch 5 pg 210

48. With respect to the assessment of haemoptysis, which is FALSE:

- a) In approx. 30% of cases no cause is found
- b) 20-30 % have a normal CXR
- c) Bronchoscopy should be performed early in massive haemoptysis
- d) All patients should be admitted for investigation
- e) In massive haemoptysis, the Trendelenburg position aids drainage of blood from the thorax

49. In infective endocarditis, which is FALSE:

- a) Peripheral manifestations occur in 20% of cases
 - b) Staph aureus is the most common pathogen in IV drug users
 - c) Fever and malaise are the 2 commonest presenting features
 - d) Neurological manifestations are present in 30-40 % of patients
 - e) Blood cultures are positive in 95-100% of patients not previously treated with antibiotics
- Cameron Ch 4.7 pg 178

50. In a patient with an abdominal aortic aneurysm (AAA), which is FALSE:

- a) The aorta is considered to be aneurysmal if it's diameter is greater than 3 cm
 - b) A first degree relative with an AAA is considered a risk factor
 - c) Retroperitoneal rupture is more common than intraabdominal rupture
 - d) The risk of rupture rises if the aortic diameter is greater than 4 cm
 - e) The renal arteries are involved 25% of the time
- Cameron Ch 4.11 pg 198

51. In a patient presenting with aortic dissection, which is FALSE:

- a) The mortality rate is 1% per hr in the first 48 hr if untreated
 - b) A Stanford type B lesion is more likely than a Stanford type A lesion
 - c) Up to 15% are pain free and present with neurological impairment or sudden death
 - d) Acute aortic incompetence is a common finding in proximal dissection
 - e) The combination of neurological deficit and chest pain suggests aortic dissection
- Cameron Ch 4.10 pg 194

52. In a patient with suspected isolated cyanide ingestion, which investigation would be the LEAST useful in aiding diagnosis:

- a) Serum cyanide level
 - b) Serum lactate level
 - c) Methaemoglobin level
 - d) Arterial pH
 - e) Arterial oxygen
- Cameron Ch 27.14 pg 706

53. Currently, there is NO antivenom for envenomation by which creature?

- a) Tiger Snake
 - b) Red Back Spider
 - c) Box Jellyfish
 - d) Stonefish
 - e) Blue-ringed Octopus
- Cameron Ch 27.1, 27.2 and 27.3

54. Sudden Infant Death Syndrome is associated with, or more prevalent in:

- a) Sleeping in the supine position
- b) An Apparent Life Threatening Event**
- c) Warmer climate
- d) Female, compared to male babies
- e) Older mothers

Tintinalli 5th ed p771 - 772

55. The following are features of valid consent EXCEPT:

- a) Consent must be written**
- b) Consent must be informed
- c) Consent must be specific
- d) Consent must be freely given
- e) Consent must cover that which is actually done

Cameron Ch 23.3 pg 562

56. Which of the following is an indication for reduction in a supracondylar fracture?

- a) Backward tilting of distal fragment by 20 degrees
- b) 45% of bony contact
- c) Medial tilting of 15 degrees
- d) Lateral tilting of 15 degrees
- e) All of the above**

McRae 3rd ed p131

57. Which is FALSE regarding the diagnosis of acute testicular torsion?

- a) It is most common in adolescence (12-18yo)
- b) Severe sudden onset pain is diagnostic**
- c) It may occur in a testicle that has been previously fixed
- d) Irritative voiding symptoms rarely occur
- e) An associated mild fever may be present

Cameron Ch 9.2 pg 369

58. Urinary diagnostic indices of acute renal failure (ARF) due to prerenal causes includes:

- a) Blood Urea : Creatinine ratio > 100:1**
- b) Specific gravity < 1.013
- c) Urine Na > 10 mmol/L
- d) Urine osmolality < 350
- e) Urine : Plasma osmolar ratio < 1.2

Cameron Ch 9.1 pg 363 table 9.1.5

59. In diagnosing Urinary Tract Infections (UTI), which are TRUE:

- a) Most patients have pyuria of > 10 leucocytes mm³
- b) The presence of nitrites is 85% sensitive**
- c) Haematuria is non specific
- d) Proteinuria is common but non specific
- e) A bacteria count > 10⁵ is usually diagnostic

Cameron Ch 8.5 pg 320

60. In septic arthritis, which is NOT a typical synovial fluid finding:

- a) Yellow colour
- b) Predominance of polymorphonuclear leucocytes
- c) 5 – 1000 leucocytes per microlitre**
- d) Turbidity
- e) Bacteria on Gram stain

Cameron Ch 8.3 pg 314