## Instructions

This test does not differ in any considerable way from the ones that were carried out during your study at a medical school. The test consists of 200 questions and its result reflects your level of knowledge. We would like to point out that in this test, as was the case with your tests at a medical school, the contrast between different answers is not so sharp and striking as in a black-and-white photograph. The answers may represent various shadows of the truth and you are expected to choose the best option and decline the ones that are partially true or may include some elements of the truth but are not fully appropriate in the context.

Since the conditions and range of the exam are the same for all candidates the exam is objective and comparable. The answer tickets are sealed shut in the presence of the last persons handing in their papers and forwarded to the computing centre.

Before you begin to do the test, you are asked to read the information below and hold on to the following instructions. When in doubt how to handle the test, answer tickets etc., ask the supervisor immediately. Nothing can be done if you complain after the test.

You are given **two answer tickets** for 100 answers each. Both answer tickets have two parts: upper – the small one and lower – the proper one. **Do not put your name anywhere on the answer tickets but make sure that the code number that you have received is placed at the top of them.** Irrespective of this code number, there is also your personal code number put in the first four lines of the answer tickets.

The fifth line of each answer ticket has either number 1 - if the answer ticket is scheduled for questions 1 - 100, or number 2 - if the answer ticket is scheduled for questions 101 - 200. The answer tickets are also marked adequately in the headings: the answer ticket 1 and the answer ticket 2, respectively.

The seventh, last line of the upper part of both answer tickets has either number 1 if you are dealing with version 1 of the test, or number 2 if you are dealing with version 2.

Before you begin to do the test, write at the back of the answer tickets in pen or pencil: The State Examination of Medical Doctor Version One/Two

- a) The exam consists in giving answers to the questions in the question booklet. Each question has 5 corresponding answers, and you have to choose only one the one that is the most appropriate.
- b) The questions are marked in the question booklet as numbers (No 32, No 82 etc.) and answers as letters A, B, C, D, E. You should marked the chosen letter on the answer ticket.

- c) Mark your chosen answers on the answer ticket by shading completely in the appropriate lozenges. Use a soft pencil (B2 or B3, preferably) and check that only one lozenge is shaded on each line. Make sure that your shaded lozenge corresponds to the correct question number. Remember that the accuracy of the electronic reading depends greatly on how well you shade your lozenges. The examples of correct shading are shown below.
- d) We suggest that during the test you should mark the answer with a tiny dot, then after making sure that the answer is right, shade completely in the whole lozenge. If you change your mind, you must rub out your first answer completely since two marks against any question number will automatically be graded wrong.

It is not allowed to destroy, damage (bend, break), scratch or make the tickets in any other way unsuitable for further computer processing.

- e) Choose **only one answer** against each question number. Choosing more than one answer will be marked wrong.
- f) The whole exam takes **4 hours**. If you do not waste your time you can surely make it without rushing.
- g) If you complete your test before the scheduled time, you can hand over all your papers (question booklet including) to the supervisor and leave.
- h) All unacceptable behaviour (talking, cheating etc.) will result in exam failure.

Your question booklet has been marked as VERSION 1. It means that your personal code number should be an odd number. The proper marking is shown below.

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**Nr 1.** A patient with a long standing history of severe COPD is admitted with increased dyspnoea and changes in the character of the cough and the sputum. Arterialized capillary blood gases (ABG) are as follows:  $PaO_2=45mmHg$ ,  $PaCO_2=55mmHg$ ,  $SaO_2=88\%$ . Apart from intravenous drugs the patient was given oxygen via a nasal cannula with the flow rate of 2 litres per minute. Two hours later the patient started complaining of a headache and general malaise. Control ABG showed  $PaO_2=48mmHg$ ,  $PaCO_2=60mmHg$ ,  $SaO_2=90\%$ . In this patient the next step should be:

- A. increasing the oxygen flow rate.
- **B.** decreasing the oxygen flow rate.
- C. leaving the oxygen flow rate at 2l/min.
- **D.** carrying out the blood culture test.
- **E.** replacing the nasal cannula with an oxygen mask to increase oxygen concentration in the gases delivered to the airways.

**Nr 2.** (1) A patient with implanted pacemaker requires routine antibiotic prophylaxis against endocarditis before carrying out a dental plaque removal procedure because (2) dental procedures involving parodontium increase the risk of infective endocarditis development.

- A. sentence (1) is true, sentence (2) is false.
- **B.** both sentences are true with a logical connection.
- C. both sentences are true without a logical connection.
- **D.** sentence (1) is false, sentence (2) is true.
- E. both sentences are false.

**Nr 3.** A common complication of inferior myocardial infarction resulting in acute pulmonary oedema and cardiogenic shock presenting with pansystolic murmur and third heart sound is:

**A.** post-infarct angina. **B.** mitral stenosis.

- **D.** papillary muscle damage. **E.** C and D.
- **C.** acute mitral regurgitation.

Nr 4. Impaired glucose tolerance is characterized by:

- **A.** fasting plasma glucose ≥200 mg/dl.
- **B.** random plasma glucose  $\geq$  200 mg/dl.
- C. plasma glucose 140-199 mg/dl 2hrs after 75g oral glucose load.
- **D.** fasting plasma glucose  $\geq$ 126 mg/dl from two samples.
- **E.** plasma glucose  $\geq$  200 mg/dl 2hrs after 75g oral glucose load.

**Nr 5.** The following values were obtained in a prebronchodilator spirometry:  $FEV_1=2,5I$ , FVC=4I. Such results justify the diagnosis of:

- A. asthma.
- B. COPD.

**D.** airflow obstruction.

E. interstitial lung disease.

**C.** volume restriction.

Nr 6. The following parameters are included in the SCORE risk charts except for: A. waist circumference. B. gender. C. age. D. systolic blood pressure. E. smoking.

**Nr 7.** The four limb electrodes in a standard 12-lead electrocardiographic examination should be placed in the following order (B stands for black, R - red, G - green, Y- yellow):

**A.** B – left lower limb, R – left upper limb, G – right upper limb, Y – right lower limb.

- **B.** B left lower limb, R left upper limb, Y right upper limb, G right lower limb.
- **C.** B right lower limb, R left lower limb, Y right upper limb, G left upper limb.
- **D.** B right lower limb, R right upper limb, G left upper limb, Y left lower limb. **E.** B right lower limb, R right upper limb, Y left upper limb, G left lower limb.

**Nr 8.** The following serology assay results:

HBs Ag (-) anti-HBc IgM (-) anti-HBc IgG (+) anti-HBs IgG (+) indicate:

A. acute hepatitis C, early stage.

**B.** acute hepatitis B, early stage.

- C. post-infection hepatitis B immunization.
- **D.** hepatitis B immunization without infection (vaccination against hepatitis B).

E. acute hepatitis C, late stage.

**Nr 9.** The first choice treatment of acute bacterial bladder infection is:

A. trimethoprim-sulfamethoxazole.

**B.** penicillin.

**D.** macrolide.

alkalosis.

E. vancomycin.

C. gentamicin.

**Nr 10.** Electrolyte and acid-base disorders observed in the 5th stage of chronic kidney disease are:

- **A.** hypophosphatemia and metabolic acidosis. **D.** hyperphosphatemia and metabolic
- **B.** hypophosphatemia and metabolic alkalosis.
- C. hyperphosphatemia and metabolic acidosis. E. all of the above are wrong.

**Nr 11.** Antihypertensive agents used to treat hypertension in pregnancy are:

1) methyldopa;

- 4) hydralazine; 5) nitroprusside sodium.
- 2) ACE inhibitors; 3) angiotensin receptor blockers;

The correct answer is:

**A.** 1,2,3. **B.** 1,3. **C.** 1,4. **D.** all.

**E.** only 1.

**Nr 12.** Immediate electrical cardioversion in patients with WPW syndrome is indicated in the case of:

**A.** very fast heart rate (ventricular rhythm).

**B.** documented several accessory pathways.

**D.** each of the above.

E. none of the above.

**C.** hypokalemia.

**Nr 13.** Which method is recommended for detection of chronic changes in sacroiliac joints and spine in patients with ankylosing spondylitis?

A. CT. B. MRI. C. conventional radiography. D. densitometry. E. A or B.

**Nr 14.** Nitrates are <u>contraindicated</u> in patients with acute coronary syndrome in the case of:

**A.** systolic arterial pressure below 90 mmHg. **B.** right ventricle infarction.

**D.** A and B. **E.** A. B and C.

C. AV block.

**Nr 15.** A 56-year old male complains of strong pain, swelling, warmth and redness around the right toe. All the symptoms occurred early in the morning and made it difficult for him to walk. For a week the patient has had a pain in the left knee, where physical examination showed effusion. The laboratory results: CRP 25 mg/l, uric acid serum concentration: 4,5 mg/dl. Which of the following would be useful for confirmation of gout diagnosis?

- A. urate monosodium crystals presence in the synovial fluid.
- **B.** rapid response to colchicine trial.
- C. no improvement after NSAIDs (nonsteroidal drugs) in maximal doses.
- **D.** because of normal serum uric acid concentration in presented case diagnosis of gout is highly unlikely.
- E. A and B.

**Nr 16.** Which of the following is <u>false</u> with reference to Raynaud's phenomenon description?

- **A.** it consists in color changes: paleness, followed by cyanosis and then redness of the fingers (in hands and/or feet), lips or ears.
- **B.** it is painful.
- C. it occurs in stress or after exposure to cold.
- **D.** it may precede other symptoms of systemic scleroderma.
- E. one of the treatment methods is cryotherapy (local or general).

**Nr 17.** 43-year old female presented with pain in hands and feet, morning stiffness lasting two hours, constant feeling of fatigue and elevated temperature. The physical examination: showed swelling of wrist, metacarpophalangeal and proximal interphalangeal joints on both hands, tenderness in metatarsophalangeal joints in both feet. Laboratory findings: ESR 58 mm/h, Hgb 10,5 g/dl, rheumatoid factor negative, anti-cyclic citrullinated peptide antibodies 250 RU/ml (normal range up to 5 RU/ml). The most likely diagnosis in this case is:

- A. systemic lupus erythematosus (SLE).
- **B.** erosive type of osteoarthritis.
- D. Still's disease.
- **E.** psoriatic arthritis without psoriasis.

C. rheumatoid arthritis.

**Nr 18.** Choose symptoms associated with *pneumothorax*:

	1) mediastinum shifted contralaterally;	4) diminished or absent breath sounds;
	2) hyperresonance;	5) wheezes;
	3) bradycardia;	6) cyanosis.
~^	nrect answer is:	

The correct answer is:

**A.** 1,2,3,5. **B.** 1,2,3,6. **C.** 2,3,4,6. **D.** 1,2,4,5. **E.** 1,2,4,6.

**Nr 19.** 50-year-old patient complains of: nocturia, ankle region edema particularly in the evenings, pain in the right subcostal area, worsening of physical activity tolerance. The most probable reason of his condition is:

- A. viral hepatitis C.
- **B.** hemochromatosis.
- C. right sided heart failure.

**Nr 20.** 46-year-old female patient complains of typical stenocardial chest pain that occurs at rest or after wakening up. It is usually accompanied by dyspnea and heart palpitations. Performed coronarography revealed no changes in the coronary arteries. The most probable reason of this condition is:

- A. stable cardiac angina.
- **B.** unstable cardiac angina.
- C. Prinzmetal's angina.

**D.** acute myocardial infarction.

E. hiatus hernia.

Nr 21. Which statement concerning the measurement of blood pressure is <u>false</u>?

- A. while using a mercury sphygmomanometer one should keep the manometer vertical and take all readings at eye level.
- B. if a patient has an obese arm one should use an appropriate larger cuff.
- C. if an adult patient is very thin (for example a patient with anorexia), a paediatric cuff may be necessary.
- D. if repeated measurements are needed wait at least 10 minutes between readings with the cuff fully deflated.
- E. a patient should be sitting.

Nr 22. A 30-year-old patient complains of chronic cough (lasting for 3 months), hemoptysis, 37°C temperature in random measurements, 5 kg weight loss for the last month, fatigue. Which test will you order as first?

A. lung scintigraphy.

**B.** microbiologic sputum analysis;

C. chest X-ray.

**D.** spirometry.

**E.** tuberculosis skin test.

**D.** hypertension.

E. chronic renal failure.

**Nr 23.** A 35-year-old white woman enters the emergency room complaining of chest pain. The pain is episodic and usually lasts for 5-10 minutes. Sometimes it is related to exercise, but on other occasions, it occurs at rest. The pain does not radiate. The patient is nonsmoker and has no history of hypertension. Two other family members have died of heart disease, one at 50 and the other at 56. Physical examination shows the patient is in no acute distress. Her blood pressure is 120/70 mmHg and her pulse is 70. Examination of the precordium finds that the point of maximal impulse is forceful. There is a II/VI systolic ejection murmur heard along the left sternal border. The murmur increases in intensity when the patient stands up. The ECG shows non specific S-T segment and T-wave abnormalities. Which of the following is the most likely diagnosis?

A. innocent flow murmur.

**D.** mitral stenosis.

E. pulmonic stenosis.

**D.** echocardiography.

E. myocardial biopsy.

- **B.** aortic stenosis.
- C. hypertrophic cardiomiopathy.

**Nr 24.** Which of the following procedures would be best to use when diagnosing the above patient?

- A. chest x-ray.
- **B.** cardiac catheterization.
- C. tallium scanning.

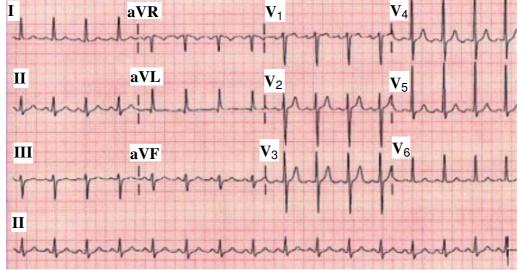
**Nr 25.** Match the following physical or laboratory finding with the appropriate valve lesion:

- a) aortic stenosis; 1) harsh murmur transmitted to the carotids;
- b) aortic regurgitation; 2) loud S1;
- c) mitral stenosis;
- 3) apical holosystolic murmur with radiation to the axilla;4) Marfanoid body habitus.

d) mitral regurgitation; The correct answer is:

**A.** a3,b1,c4,d2. **B.** a3,b2,c1,d4. **C.** a1,b4,c2,d3. **D.** a3,b1,c2,d4. **E.** a2,b4,c1,d3.

Nr 26. ECG curve presents:



A. lateral wall acute infarction.

**B.** anterolateral wall infarction.

C. left ventricular hypertrophy.

**D.** right ventricular hypertrophy.**E.** left bundle branch block.

**Nr 27.** Which of the following characterizes the nephrotic syndrome:

- 1) edema:
- 2) hypoalbuminemia;

- 4) proteinuria (>3.5q/day);
- 5) hyperlipidemia;
- 6) proteinuria (>2.0g/day).

3) hematuria; The correct answer is:

**C.** 2,3,4. **A.** 1.3.4.6. **B.** 1.2.4.5.

**E.** 1.2.6. **D.** 1.2.5.6.

**Nr 28.** /1/Glicocorticosteroids are the most important group of drugs causing gastric and duodenal ulcers, for /2/it has been proven that concomitant treatment using glicocorticosteroids and non-steroid anti-inflammatory drugs at the same time can increase the risk of ulcerative disease by about fifteenth times.

**A.** both sentences are true and logically related. **D.** the first sentence is false,

**B.** both sentences are true but not logically related. the second is true.

**C.** the first sentence is true, the second false. **E.** both sentences are false.

**Nr 29.** The risk of gastric cancer increases in patients with:

- **A.** gastric adenomatous polyps.
- B. gastritis coexisting with Helicobacter pylori infection.
- C. Menetriere's disease.
- **D.** after partial gastric resection.
- **E.** all the above.

Nr 30. In an 18-year-old patient with chronic diarrhea and syderopenic anemia a jejunal biopsy has been performed, which revealed atrophy of villi and lymphocytes infiltration in lamina propria of the mucosa. In this patient we can suspect:

- A. intestinal lipodystrophy.
- B. lactase deficit.

D. Crohn's disease.

**E.** gluten enteropathy.

**C.** after antibiotic therapy diarrhea.

Nr 31. A 30-year-old cachectic patient has been admitted to the hospital with small intestinal occlusion. One year ago he had a partial resection of *ileum terminale*. He suffered from perianal fistulas, anaemia and erythema nodosum. The **most probable** diagnosis in this patient is:

- A. small intestine cancer.
- **B.** Whipple's disease.

**D.** Crohn's disease. E. ulcerative colitis.

C. Giardia lamblia infection.

Nr 32. /1/ Most patients with non-symptomatic cholecystolithiasis will suffer from the disease complications during their life, /2/ therefore, in every patients with cholecystolithiasis cholecystectomy should be considered.

- A. both sentences are true and logically related.
- **B.** both sentences are true but not logically related.
- C. the first sentence is true, the second false.
- **D.** the first sentence is false, the second is true.
- **E.** both sentences are false.

- **Nr 33.** Metastatic tumors in the liver are:
- **A.** less frequent than primary hepatocellular carcinoma.
- B. mostly of colorectal cancer origin.

**C.** supplied with blood from portal system vessels.

**Nr 34.** According to current knowledge population-oriented screening programmes are justified in early detection of:

1) breast cancer;

2) lung cancer;

3) cervical cancer;

The correct answer is:

**A.** 1 and 2. **B.** 1,3 and 5. **C.** 2,3 and 4. **D.** 1,3 and 4. **E.** 1,2,3 and 4.

Nr 35. Among the neoplasms listed below the most frequently observed one in acquired immunodeficiency syndrome (AIDS) is:

- A. Kaposi sarcoma.
- **B.** melanoma.
- C. lung cancer.

Nr 36. Normal findings on conventional chest radiography in a 65-year-old male patient (history - cigarette smoking for 45 years) presenting with general weakness and dyspnea as well as shoulder pain do not exclude lung cancer, because malignant process may be situated in the area of limited access for radiography. The statements presented are:

- **A.** both true with causal association.
- **B.** both true without causal association.
- C. first false, second true.

**Nr 37.** In adult males anterior hypopituarism **does not** cause:

- A. hypothyroidism.
- **B.** infertility.

- **D.** reduced secretion of cortisol.
- **E.** reduced secretion of aldosterone.

**D.** first true, second false.

**C.** reduced secretion of TSH

Nr 38. Mark the least typical symptom of thyrotoxicosis:

- A. sweating.
- **B.** weight loss.

- **D.** constipation.
- E. menstrual irregularity.

C. tachycardia.

**Nr 39.** Which of the following referring to thyroid nodules is correct?

- **A.** they are more frequent in males.
- B. they are less common in iodine-deficient areas.
- **C.** they usually occur in euthyroid patients.
- **D.** the risk of malignancy of the nodule is not related to the size of the nodule.
- **E.** the risk of malignancy of the nodule is not related to the patient's age.

**D.** B and C.

E. A. B and C.

**D.** Ewing sarcoma.

4) colorectal cancer; 5) stomach cancer.

E. plasmocytic myeloma.

E. both false.

LEP

**Nr 40.** A 6-year-old boy presents the following symptoms: fever for the last few days, rhinitis, erythema across the cheeks, "lace-like" rashes on the arms, legs, torso, and back. In laboratory results you observe: leukopenia, lymphocytosis, mild eosinophilia. The symptoms mentioned above are typical for:

**D.** Chicken-pox virus.

E. Rubeola.

A. Parvovirus B 19.

**B.** Epstein- Barr virus.

C. Cytomegalovirus.

**Nr 41.** In the hospital ward you recognize oxyuriasis. Which of the following drugs can you prescribe?

	4) erythromycin; 5) pyrantel.	
<b>C.</b> 3,4,5.	<b>D.</b> 1,4,5.	<b>E.</b> 4,5.
	<b>C.</b> 3,4,5.	5) pyrantel.

Nr 42. Which of the mentioned below is **not a sign** of tetany?

1) Chwostek's; 2) Stellwag's; 3) Trousseau's; 4) Lust's; 5) Oppenheim's. The correct answer is:

**A.** 1.5. **B.** 2.5. **C.** 3.4. **E.** 3,4,5. **D.** 4,5.

**Nr 43.** Malformations connected with Wilms' tumour are:

- 1) kidneys hypoplasia, double kidney, horseshoe kidney, hypospadias;
- 2) Hemihyperplasia, aniridia, bone and joints malformations, circulatory system diseases;
- 3) CNS malformations, spina bifida, hypoplasia of the liver;
- 4) acute lymphoblastic leukemia, cancers, lymphoma;

5) Hepatoblastoma, retinoblastoma, bone tumours, cancers.

The correct answer is:

**A.** 1,2. **B.** 2,4. **C.** 3,5. **D.** 1,4. **E.** 1,5.

**Nr 44.** Choose the right description of Ewing's sarcoma:

1) more common in females, during their pre-school years, more often in black race;

2) more common in males, teenagers, rarely in black race;

3) is an undifferentiated tumour;

4) the invasion of the soft tissues and the spreading of the tumour proceed slowly;

5) the invasion of the soft tissues and the spreading of the tumour proceed fast.

The correct answer is:

**A.** 1,3,4. **B.** 2,3,5. **C.** 2,3,4. **D.** 1,2,4. **E.** 1,5.

Nr 45. The <u>rarest</u> type of leukemia among children is:

A. CML. B. AML. C. ALL. D. MDS. E. CLL
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**Nr 46.** The infant whose breastfeeding mother took Vit. D3 in the last trimester of pregnancy:

**A.** should be given 400 j.m./24h Vit.  $D_3$  per day starting from his birthday.

**B.** should be given 400 j.m./24h Vit. D<sub>3</sub> per day starting from the third week of his life.

**C.** should be given 800 j.m./24h Vit.  $D_3$  per day starting from his birthday.

**D.** does not require supplementation of Vit. D<sub>3</sub>.

**E.** requires supplementation of Vit.  $D_3$  starting from the third month of his life.

Nr 47. Non-pharmacological treatment of hypertension in children includes:

**A.** body mass normalization. **D.** reduction of the consumption of saturated fatty acids.

**B.** salt restricted diet. **E.** all of the above.

**C.** physical activity.

Nr 48. The utter contraindication for living culture vaccination is:

- A. immunosuppressive therapy.
- **D.** Down syndrome. **E.** splenectomy.

- **B.** diabetes.
- **C.** premature birth.

**Nr 49.** An 18-year-old girl reports to the Family doctor, complaining of a few day fever reaching 39 °C and a pain in the neck. Medical examination shows: *pharyngitis* and enlarged neck lymph nodes. Laboratory results: higher CRP activity, *leukocytosis*, atypical lymphocytes. The most probable diagnosis is:

- A. acute lymphoblastic leukemia.
- **D.** infectious mononucleosis.

B. Hodgkin's lymphoma.

E. scarlet fever.

C. diphtheria.

**Nr 50.** The vaccination against *tuberculosis* is done once in newborn period without another revaccination, because next vaccinations do not protect against primary infections such as: lungs tuberculosis, reactivation of the latent infection.

**A.** both sentences are true and there is a cause-and-effect relationship between them.

**C.** both sentences are true and there is no cause-and-effect relationship between them.

- **C.** both sentences are false.
- **D.** the first sentence is true, the second one is false.
- **E.** the first sentence is false, the second one is true.

Nr 51. Which of the following symptoms can suggest adrenocortical insufficiency?

- A. hypoglycaemia, hyponatraemia, hypokalaemia, hyperchloraemia, metabolic alkalosis.
- **B.** hypoglycaemia, hyponatraemia, hyperkalaemia, hyperchloraemia, metabolic acidosis.
- **C.** hypoglycaemia, hypernatraemia, hypokalaemia, hyperchloraemia, metabolic alkalosis.
- **D.** hyperglycaemia, hyponatraemia, hypokalaemia, hyperchloraemia, respiratory alkalosis.
- E. hypoglycaemia, hyponatraemia, hyperkalaemia, hypochloraemia, metabolic acidosis.

Nr 52. A 2-year-old child, so far healthy, swallowed unknown number of Furosemide tablets. The child appears very weak with the limited contact with the surrounding. Which of the mentioned below symptoms are <u>unlikely</u> to be observed in this patient?

 a) excessive sweating;
 bulkety
 bulkety
 cardiac arrhythmia.

3) skin hyperaemia and reddening of the whole body; The correct answer is:

**A.** 1,2,3,5. **B.** 1,2,3. **C.** 2,4,5. **D.** 2,4. **E.** 3,5.

**Nr 53.** Which of the following groups of pharmacotherapeutic agents predispose to secondary hyperlipidemia?

- 1) beta-blockers;
- 2) thiazide diuretics;

4) fibric acid derivatives (fibrates);

5) corticosteroids.

3) oral estrogens; The correct answer is:

**A.** 1,2,4,5. **B.** 1,2,3,5. **C.** 1,3,4,5. **D.** 2,3,4. **E.** all of them.

Nr 54. Which of the following situations is not an indication for karyotype analysis?

- A. mental retardation of unknown cause.
- **B.** mental retardation and dysmorphic features.
- C. a child with clinically apparent features of Down's syndrome.
- **D.** a newborn with isolated cleft of secondary palate.

**E.** a couple with recurrent miscarriages.

**Nr 55.** A six-month-old girl has been suffering from recurrent pulmonary infections for three months, with bronchial obturation with wheezing and persistent cough. In spite of good appetite the child shows weight deficiency. Neonatal history reveals prolonged cholestatic jaundice. Which disease should be considered in preliminary diagnosis?

- **A.** alpha 1 antitrypsine deficiency.
- **B.** congenital bronchiectases.
- **C.** idiopathic pulmonary fibrosis.

**Nr 56.** Parents are coming to the outpatient department with eighteen-month-old child suffering from fever of 39 °C for 5 days. On physical exam the child presents: non purulent conjunctivitis, dry and cracked lips, red pharynx. Submandibular lymph nodes are enlarged above 1,5 cm. This clinical picture is typical of:

A. erythema infectiosum.

B. Kawasaki disease.

C. exanthema subitum.

Nr 57. The diagnostic hallmark of Juvenile Chronic Arthritis of systemic onset is:

**A.** multiple small joints involvement with joints deformations.

- B. bilateral uveitis.
- C. hectic fever of quotidian pattern.
- **D.** all the above.
- E. none of the above.

**D.** cystic fibrosis.

**D.** rubella.

E. mononucleosis.

E. pulmonary hemosiderosis.

**Nr 58.** In severe exacerbation of bronchial asthma the basic treatments are:

- 1) beta<sub>2</sub>-mimetics in inhalation:

- 4) beta<sub>2</sub>-mimetics i.v.:
- 5) aminophyllinum.

2) oxygen; 3) corticosteroids i.v.:

The correct answer is:

**A.** 1,2,3. **B.** 1.2.5. **C.** 2,3,4. **D.** 1,2,3,5. E. all of them.

**Nr 59.** Primary immunodeficiency syndrom must be suspected in the case of:

- 1) 2 or more pneumonia cases a year;
- 2) primary immunodeficiency in the siblings;
- 3) 3 upper respiratory tract infections a year;
- 4) 2 or more acute sinusitis cases a year;
- 5) 1 arthritis a year.

The correct answer is:

**E.** all of them. **A.** 1,2,3. **B.** 1,2,4. **C.** 1,2,5. **D.** only 1.

**Nr 60.** Which of these symptoms can occur in anaphylactic shock:

1) hypotonia; 2) urticaria; 3) dyspnoe; 4) tachycardia; 5) vomiting. The correct answer is:

**A.** 1,2,3. **B.** 1,2,4. **C.** 1,2,5. **D.** 1,2,3,4. **E.** all of them.

**Nr 61.** In the course of cystic fibrosis the following symptoms may occur:

1) diabetes; 2) infertility; 3) osteoporosis; 4) pancreatitis; 5) liver cirrhosis. The correct answer is:

**A.** 1,2,3. **B.** 1,2,4. **C.** 1,2,5. **D.** 1,2,3,4. **E.** all of them.

**Nr 62.** The first choice treatment in croup is:

A. antibiotic.	<b>D.</b> mucolytic.
B. antiviral treatment.	<b>E.</b> inhaled beta <sub>2</sub> -mimetic.

**C.** systemic corticosteroid.

**Nr 63.** A child 4 y.o. arrives to the doctor's office with the following complaints: recurrent respiratory tract infections, snoring and a hearing defect. In a physical examination: pale skin, breathing through the mouth, discharge from the nose and a bite defect. The most probable diagnosis is:

- A. chronic sinusitis.
- **B.** chronic rhinitis.
- C. adenoid hypertrophy.

**Nr 64.** The diagnosis of giant cell osteosarcoma is based on:

- **A.** radiography.
- **B.** histopathology of the tumour bioptate.
- C. CT-scan.

- **D.** tonsils hypertrophy.
- E. chronic otitis media.
- **D.** magnetic resonance imaging (MRI).
- E. physical examination.

**Nr 65.** Which of the following examinations has the highest diagnostic value in *nephroblastoma*?

- **A.** ultrasonography with measuring 3 dimensions of the tumour + alternatively CT-scan.
- **B.** evaluation of urine metoxycatecholamines.
- C. evaluation of neoplastic markers.
- **D.** bone scyntygraphy.
- E. chest X-ray.

Nr 66. The characteristic features of bone malignant neoplasms comprise:

- 1) osteoscarcoma spur (Codman's triangle);
- 2) periosteal lesion (breaking the continuity of periosteum);
- 3) bone ectasia;
- 4) bone destruction lesion;
- 5) periosteal reactions;
- 6) tumour in soft tissues.

The correct answer is:

<b>A.</b> 1,2,3.	<b>B.</b> 1,2.	C. all of them.	<b>D.</b> 4,5.	<b>E.</b> only 6.
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Nr 67. The gold standard in the diagnosis of food allergy is:

- **A.** evaluation of skin tests.
- B. concentration of specific IgE.
- **C.** food elimination and provocation (challenge) testing.
- **D.** evaluation of protein loss in stools.
- E. gastroscopy with biopsies.

**Nr 68.** The treatment of food allergy includes:

- 1) elimination of certain food or the compound responsible for allergy;
- 2) replacing cow's milk with goat's milk;
- 3) using low-grade protein hydrolysates;
- 4) using high-grade casein and whey hydrolysates (hypoallergic);
- 5) total parenteral nutrition.

The correct answer is:

**A.** 1,2,3. **B.** 1,4. **C.** 2,3. **D.** 1,5. **E.** all of them.

**Nr 69.** "Open surgical debridgement" – the operative method, which consists of several scheduled repeated laparotomies connected with necrectomy, debridement and lavage is the golden standard in:

A. mechanical ileus.

B. acute necrotic pancreatitis.

D. pancreatic cancer.

E. acute appendicitis.

C. chronic pancreatitis.

**Nr 70.** An 8 month-old girl has been suffering from sharp attacks of uneasiness and cry for 4 hours. During the attacks she raises her legs upwards. Between the episodes the infant is apathetic, sleepy and pale. She vomited several times and expelled one stool looking like "raspberry jelly". On physical exam flatulence and a mass in right upper quadrant were found. On rectal exam small amounts of blood and mucus were found. Radiograms revealed asymmetric bowel gases and fluid levels. In ultrasound a "sign of a shield" was seen. What's the **most probable** diagnosis?

A. acute appendicitis.

- **D.** acute Meckel's diverticulum inflammation.
- **B.** incarcerated umbilical hernia.
- E. acute mesenterial lymphadenitis.
- **C.** intestinal invagination.

**Nr 71.** In a patient with *cholecystolithiasis* and *choledocholithiasis* the correct combination of treatment is:

- A. only endoscopic removal of the deposits.
- **B.** laparoscopic cholecystectomy and after a few days endoscopic removal of the deposits.
- **C.** endoscopic removal of the deposits and after a few days laparoscopic cholecystectomy.
- **D.** only laparoscopic cholecystectomy.
- E. only open cholecystectomy.

**Nr 72.** In a patient with paroxysmal atrial fibrillation there was a sudden cooling, livedo and weakness of lower limb. There was no previous lower limb ischemia. Taking into consideration the most probable reason the best treatment is:

- A. vasodilatation drugs.
- **B.** intra-arterial heparin administration (to femoral artery).
- C. intra-arterial streptokinase administration (to femoral artery).
- D. intra-arterial tissue plasminogen activator administration (to femoral artery).

E. lower-limb arteries embolectomy.

Nr 73. In the case of surgeon's intraoperative injury the proper behavior is:

- 1) HIV and HCV examination in the surgeon;
- 2) HIV and HCV examination in the patient;
- 3) in every case surgeon's anti-retrovirus treatment.

The correct answer is:

**A.** only 1. **B.** only 2. **C.** 1,2. **D.** 2,3. **E.** 1,2,3.

Nr 74. The drainage of the pleural cavity for fluid evacuation should be made in:

- **A.** 3rd 4th intercostal space in posterior axillary line.
- **B.** 5th 6th intercostal space in posterior axillary line.
- **C.** 3rd 4th intercostal space in anterior axillary line.
- **D.** 5th 6th intercostal space in anterior axillary line.
- **E.** 7th 8th intercostal space in posterior axillary line.

**Nr 75.** In an 80-years old woman prepared to elective surgery for an abdominal aortic aneurysm of 85 mm in diameter without iliac arteries dilatation, you discovered heart insufficiency with ejection fraction 30%. In this case the best method of aneurysm treatment is:

A. open surgery with straight tube implantation.

- **B.** open surgery with bifurcated tube implantation.
- C. endovascular surgery.
- **D.** aneurysm of 85 mm in diameter is not the indication for surgery.

E. 30% ejection fraction is absolute contraindication for any type of surgery.

**Nr 76.** A 71-years old patient was admitted to hospital due to severe hematemesis. For the last week he has used a lot of non-steroid anti-inflammatory drugs. He is also on long-term acetylsalicylic acid treatment. Taking into consideration the most probable reason of bleeding the routine procedure includes:

1) recombinant factor VII;

2) gastroscopy;

3) laparotomy and surgical closure of the bleeding site;

4) thrombocyte concentrate transfusion.

The correct answer is:

A. only	2. <b>B.</b> 1	,2. <b>C.</b> 2	<b>D.</b> 2, <b>D.</b> 2,	4. <b>E.</b> only 4.
- 1		J =	) –	

**Nr 77.** In a patient with abdominal trauma, an examination revealed splenic rupture. The proper treatment is:

- 1) leaving the rupture hematoma surrounding the ruptured spleen will stop the bleeding;
- 2) attempting to stop the bleeding (capsule suture, glue of the spleen);
- 3) splenectomy if the attempt to stop the bleeding is unsuccessful;

4) leaving small pieces of the removed spleen in the greater omentum. The correct answer is:

**A.** only 1. **B.** 1,2. **C.** 2,3. **D.** 3,4. **E.** 2,3,4.

**Nr 78.** The optimal time of creation (point 1-3) and the site of the primary arteriovenous fistula for hemodialysis (point 4-5) is:

- 1) few months before dialysis;
- 2) few days before dialysis;
- 3) after the beginning of the dialysotherapy first dialysis should be made with central catheter;
- 4) on forearm;
- 5) on arm.

The correct answer is:

**A.** 1 and 4. **B.** 1 and 5. **C.** 2 and 4. **D.** 2 and 5. **E.** 3 and 4.

**Nr 79.** In the case of neoplasmatic oesophagostenosis the best method of persistent nutrition could be:

A. intravenous glucose solution.

- **B.** peripheral vein intravenous nutritional mixture.
- C. central vein intravenous nutritional mixture.
- **D.** nutritional mixture through gastrostomy.
- E. anal feeding with nutritional mixture.

**Nr 80.** A patient was admitted to hospital due to chest trauma. In x-ray a rupture of 7-th and 8-th rib was found (on the right side). The correct management is:

- A. surgical anastomosis of broken ribs.
- **B.** relaxation and intubation of the patient.
- **C.** chest bandage.

Nr 81. Portal hypertension may present with the following conditions except for:

- **A.** Horner's syndrome.
- **B.** esophageal varices.
- C. hepatorenal syndrome.

Nr 82. The immediate treatment of cardiac arrest includes the following except for:

A. intubation.

**D.** adrenaline i.v.

**B.** open cardiac massage.

E. ultrasonography.

**D.** jaundice. **E.** ascites.

C. i.v. access.

Nr 83. Which of the statements related to paronychia are true?

- 1) it is inflammation of the tissues surrounding nail;
- 2) ingrown nail is the source of infection;
- 3) infection results in subcutaneous abscess formation at the base of the nail;
- 4) generalized symptoms of infection are always present;
- 5) incision of the abscess is the proper treatment.

The correct answer is:

**A.** 1,2,3,5. **B.** 1,2. **C.** 1,4,5. **D.** 1,2,5. **E.** 1,2,3,4.

Nr 84. Which of the following procedures can be performed laparoscopically?

- 1) cholecystectomy; 4) nephrectomy;
- 2) appendectomy; 5) inguinal hernia repair.
- 3) adrenalectomy;

The correct answer is:

<b>A.</b> 1,2.	<b>B.</b> 1,2,3.	<b>C.</b> 1,2,3,4.	<b>D.</b> 1,2,4.	E. all of them.
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Nr 85. The most characteristic clinical symptoms of cholangitis inducted by *E. coli* are:

- 1) fever; 4) hypotension;
- 2) pruritius; 5) pain in the upper right quadrant of the abdomen.
- 3) jaundice;

The correct answer is:

**A.** all of them. **B.** 1,2,3,4. **C.** 1,3,5. **D.** 1,3,4. **E.** none.

**D.** analgetic drugs.

E. pleural cavity drainage.

**Nr 86.** The most typical symptoms of Crohn's disease include:

1) disease localizes only in the terminal ileum and right colon;

2) inflammatory process involves all layers of the intestinal wall and mesentery;

3) disease is frequently complicated with intraabdominal abscesses;

4) surgical treatment includes resection of the terminal ileum and colon.

The correct answer is:

<b>A.</b> 1,4.	<b>B.</b> 1,2,3.	<b>C.</b> 2,3.	<b>D.</b> 1,3,4.	E. all of them.
1) g 2) d 3) ti	laena is the symp astric carcinoma luodenal ulcer; umor of the small t answer is:	• 3	4) right colon ca 5) left colon ca	
<b>A.</b> only 5.	<b>B.</b> 1,2.	<b>C.</b> 1,2,3.	<b>D.</b> 4,5.	<b>E.</b> all of them.

Nr 88. Indicate the true statement concerning acute pancreatitis:

- 1) the essence of acute pancreatitis is self-digestion;
- 2) the most frequent risk factor is alcoholism;
- 3) the most frequent risk factor is cholelithiasis;
- 4) therapy is limited to conservative treatment.

The correct answer is:

**A.** 1,2,4. **B.** 1,2. **C.** 1,3,4. **D.** 1,3. **E.** 1,4.

Nr 89. Hospital treatment of cold injury includes:

1) rewarming of the frostbiten parts and the body;

- 2) tetanus prophylaxis;
- 3) pain management;
- 4) broad-spectrum antibiotic therapy;
- 5) vasodilatants administration.

The correct answer is:

<b>A.</b> $1,2,3$ . <b>D.</b> $3,4,3$ . <b>C.</b> $1,3,3$ . <b>D.</b> $2,3,3$ . <b>E.</b> all	<b>A.</b> 1,2,3.	E. all of them.	<b>C.</b> 1,3,5. <b>D.</b> 2,3,5.	3. <b>B.</b> 3,4
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Nr 90. After the reduction of a dislocated elbow the immobilization should last:

- **A.** 1 week. **D.** depending of the type of dislocation.
- **B.** 2-3 weeks. **E.** immobilization is not necessary.
- C. 6 weeks.

Nr 91. For the third degree burns typical finding is not:

A. tissue necrosis.

- **B.** a ring of the second and first degree burn around the site of the third degree burn.
- **C.** thromboembolic changes in the vessels of the burn site.
- **D.** absent or insignificant pain.
- E. no damage to the tissues below third degree site.

Nr 92. A medical emergency team should be called when you find:

- 1) a sudden onset of bradycardia (below 40/min) or tachycardia (above 130/min);
- 2) systolic pressure decrease below 90 mm Hg;
- 3) sudden fluctuations in respiratory rate, below 8/min and above 30/min;
- 4) sudden decrease in oxygen saturation level below 90% despite normobaric oxygen therapy;
- 5) sudden consciousness disturbances no motor response to painfull stimuli, no verbal response.

The correct answer is:

<b>A.</b> 1,2,3. <b>B.</b> 2,3,4. <b>C</b>	<b>).</b> 3,4,5. <b>C</b>	<b>D.</b> all of them.	<b>E.</b> 1,3,5.
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Nr 93. The most common localization of the aneurysms of the peripheral arteries is:

**A.** the internal carotid artery.

**B.** the basilar artery.

C. the internal iliac artery.

**D.** the brachial artery.

**E.** the popliteal artery.

Nr 94. The posterior wall (floor) of the inguinal canal is formed by:

- A. the lower border of the internal obliqe abdominis muscle.
- **B.** the lower border of the transversus abdominis muscle.
- C. transversalis fascia.
- **D.** the inguinal ligament.
- E. the aponeurosis of the external oblique abdominis muscle.

**Nr 95.** Ranson's criterion is a clinical prediction rule for the prediction of the severity of:

A. carcinoma of the cervix.

**D.** acute pancreatitis. **E.** stomach carcinoma.

- **B.** Crohn's disease.
- **C.** cirrhosis of the liver.

Nr 96. The risk factors of endometrial carcinoma include:

- A. cigarette smoking, hypertension, obesity.
- **B.** diabetes mellitus, hypertension, obesity.
- C. oral contraception, hypertension, obesity.
- **D.** talc exposure, cigarette smoking, obesity.
- E. mutation in BRC-A1 and BRC-A2 genes, diabetes mellitus, obesity.

**Nr 97.** Choose the HPV types with high oncogenic potential:

**A.** 16,18,39,45. **B.** 16,6,11,34. **C.** 16,18,6,11. **D.** 6,11,34,42. **E.** 16,11,34,44.

Nr 98. Cardiotocography (CTG), the diagnostic method used in obstetrics:

1) concurrently records fetal heart tones and uterine contractions;

2) which assessment criteria include evaluation of accelerations and decelerations;

3) is helpful in diagnosis of fetal distress;

4) is used in challenge tests.

The correct answer is:

**A.** 1,2. **B.** 2,3,4. **C.** 1,4. **D.** 1,2,3. **E.** all of them.

**Nr 99.** Ultrasound examination in the first trimester of a pregnancy includes:

1) evaluation of crown-rump length;

- 2) fetal heart rate and biophysical profile;
- 3) evaluation of gestational age;

4) detection of fetal gender in multiple gestations.

The correct answer is:

**A.** 1,3. **B.** 2,3,4. **C.** 2,4. **D.** 1,4. **E.** all of them.

Nr 100. Doppler examination in pregnancy includes assessment of blood flow in:

1) uterine arteries; 2) spiral arteries; 3) umbilical arteries;4) ductus venosus. The correct answer is:

**A.** 1,3. **B.** 1,3,4. **C.** 2,4. **D.** 1,4. **E.** all of them.

Now, take the other answer ticket on which you will mark the answers to questions 101 - 200.

**Nr 101.** Prenatal screening of chromosomal abnormalities is based also on biochemical tests. The so-called triple test includes evaluation of:

1) AFP; 2) hCG; 3) E3; 4) PAPP-A; 5) Inhibin A. The correct answer is:

**A.** 1,2,3. **B.** 1,3,5. **C.** 1,2,4. **D.** 1,3,4. **E.** all of them.

Nr 102. Corticosteroids used to accelerate fetal lung maturity:

1) should be administered to every pregnant women;

- 2) are administered to pregnant women between 24-34 wks;
- 3) are indicated for use by symptoms of preterm labor;

4) make use of bethametasone due to its ability to cross the placenta;

5) include injections of prednisone or prednisolone b.d. as a preferred method. The correct answer is:

**A.** 1,3,5. **B.** 1,2,4. **C.** all of them. **D.** 2,3,4. **E.** 1,2,3,5.

Nr 103. The positive feedback during menstrual cycle takes place between:

A. the mid-cycle level of testosterone and the secretion of luteinizing hormone (LH).

**B.** the level of estradiol produced by maturing follicle and both FSH and LH secretion.

- C. the level of progesterone in the luteal phase and the secretion of FSH.
- **D**. the level of progesterone in the luteal phase and the secretion of LH.
- E. the level of estradiol in the early follicular phase and FSH secretion.

Nr 104. Which of the following symptoms least suggests endometriosis:

- A. nodularity of the uterosacral ligaments.
- **B.** tenderness of the retroverted uterus during palpation.
- C. tenderness in the cicatrix post cesarean section.
- **D.** bilateral enlargement of the inguinal lymph nodes.
- E. tender, enlarged and fixed left ovary.

**Nr 105.** Which of the following behaviours is not associated with hyperprolactinemia:

A. extensive weight loss.

**D.** stress.

**B.** pregnancy.

E. nipple stimulation.

C. sexual intercourse.

**Nr 106.** In the physiological delivery the proper presentation of fetal head is:

A. neutral (slightly extended). B. face. C. brow. D. occiput. E. asynclitic.

Nr 107. Typical symptoms of vaginal *Candida* infections are:

- 1). vagina pH > 4.5
- 2). white, cheesy discharge
- 3). clue cells
- 4). parts of fungi in microscopic view
- 5). clinical symptoms are pruritus and burning
- The correct answer is:

**A.** 1,3,5. **B.** 2,4,5. **C.** all of them. **D.** 1,2,3. **E.** 2,3,4.

Nr 108. The proper sequence of cardinal movement is:

- A. flexion, extension, internal rotation, external rotation.
- **B.** extension, internal rotation, flexion, external rotation.
- C. flexion, internal rotation, external rotation, extension.
- **D.** flexion, internal rotation, extension, external rotation.

E. internal rotation, flexion, external rotation, extension.

**Nr 109.** The Leopold's maneuvers are used to asses:

- 1) fetal lie; 4) fetal presentation;
- 2) fetal position; 5) engagement of fetal head.

presenting part;

The correct answer is:

<b>A.</b> 1,2,3,4. <b>B.</b> 1,2,4. <b>C.</b> all of them. <b>D.</b> 2,3,4. <b>E</b>	,2,3,4. <b>B.</b> 1,2,4.	<b>C.</b> all of them.	<b>D.</b> 2,3,4.	<b>E.</b> 1,4,5.
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**Nr 110.** The risk factors of ectopic pregnancy include:

- 1) history of previous ectopic pregnancy; 4) tubal surgery;
  - 5) alcohol abuse.

2) infertility treatment;3) PID;

The correct answer is:

**A.** 1,2,3,4.

**B.** all of them.

**C.** 2,3,4. **D.** 1,2,3. **E** 

**E.** 3,4,5.

Nr 111. The management plan for placenta previa is based on:

- 1) degree of hemorrhage and total blood loss; 4
- 2) general condition of a patient;
- 3) gestational age and fetal maturity;

The correct answer is:

**A.** 2,3,4. **B.** 1,2,4,5. **C.** 1,2,3,5. **D.** all of them. **E.** 2,3,4,5.

Nr 112. The proper management of Pap smear grade 3 is:

- A. electroconization of the cervix.
- **B.** surgical conization of the cervix.
- C. treatment of vaginal infection and re-Pap.
- D. cervical biopsy.
- E. cervical biopsy and curettage of the cervical canal.

Nr 113. The term "*sterilitas primaria*" describes:

A. male infertility.

**D.** recurrent pregnancy loss.

- **B.** incomplete *Mullerian fusion* (double uterus). **E.** iatrogenic intrauterine adhesions.
- C. inability to achieve pregnancy.

Nr 114. Choose the main risk factors for cervical cancer:

- A. HPV 16/18 infection, multiple sexual partners, multiparity.
- **B.** HPV 16/18 infection, CMV infection, low socioeconomic status.
- C. history of CIN-2, vaginal infection caused by *chlamydia trachomatis*, low antioxidant diet.
- **D.** cigarette smoking, a history of CIN-1, EBV infection.
- E. oral contraceptive use, HSV-2 infection, early sexual initiation.

**Nr 115.** The screening and/or diagnostic test for gestational diabetes is performed during pregnancy at:

**A.** 10-12 wks. **B.** 14-18 wks. **C.** 18-22 wks. **D.** 24-28 wks. **E.** 32-36 wks.

**Nr 116.** The assessment of early pregnancy (8-10 wks) with vaginal bleeding and closed cervical canal includes:

- A. the thorough vaginal examination every 1-2 days.
- **B.** ultrasound examination of the fetal heart rate (FHR) every 3 days.
- **C.** the cyclical measurement of serum progesterone every 2-3 days.
- **D.** the cyclical measurement of serum  $\beta$ -HCG every 2-3 days.

E. both A and D.

4) the advance of labor;5) fetal welfare.

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**Nr 117.** The proper differential diagnosis of seizures in pregnancy <u>does not</u> require the assessment of:

**A.** blood glucose level. **D.** platelets count. B. blood pressure. **E.** all above are required. **C.** proteinuria. **Nr 118.** An increased level of  $\beta$ -HCG is detected in: 1) persistent trophoblastic disease; 4) gestational diabetes; 2) pregnancy complicated by trisomy 21; 5) yolk sac carcinoma. 3) testicular tumor; The correct answer is: **B.** 1,2,4. **A.** 1,4,5. **C.** 1,2,5. **D.** 1,2,3,5. **E.** 1,2,3. **Nr 119.** The basic therapy in the management of vaginal cancer includes:

**A.** 5-fuorouracil chemotherapy. **D.** surgical therapy. **B.** cisplatin chemotherapy. E. chemoradiotherapy. **C.** radiotherapy.

**Nr 120.** The cervical cancer with stromal invasion in depth <= 3mm and linear extent <7 mm is classified as FIGO:

**A.** stage 0. **B.** stage la1. **C.** stage la2. **D.** stage lb1. **E.** stage lb2.

**Nr 121.** The calculation of EDC with Naegele's rule is based on:

- 4) the date of quickening; 1) the last day of LMP;
- 2) the first day of LMP; 5) the date of the first missed menstrual period.

3) the date of conception;

The correct answer is:

**B.** 1,4. **C.** only 3. **D.** only 2. **E.** 1,3,5. **A.** 1,2,3.

Nr 122. The criteria of a right bundle-branch block include:

A. QRS duration >0.12s.

**D.** QRS duration <0.12s.

**B.** ventrical complex in "M" shape in lead  $V_5, V_6$ . **C.** ventrical complex in "M" shape in lead  $V_1, V_2$ .

E. A and C.

- 1) blood glucose level above 11.1 mmol/L (200 mg/dL) is found twice when taken at any time;
- 2) blood glucose level above 7 mmol/L (126 mg/dL) is found twice when taken without bite and sup;
- 3) blood glucose level above 11.1 mmol/L (200 mg/dL) is found when taken 2 hours after drinking 75 g of glucose;
- 4) blood glucose level above 7.8 mmol/L (140 mg/dL) is found twice when taken at any time;
- 5) blood glucose level above 6.1 mmol/L (110 mg/dL) is found twice when taken without bite and sup.

The correct answer is:

**A.** 1,2,3. **B.** 4,5. **C.** only 3. **D.** 3,4. **E.** 1,5.

Nr 124. A proper surgical management of a wound involves procedures listed below, <u>except for</u>:

- **A.** putting on a pressing binder above the wound.
- **B.** washing edges of the wound.
- C. flushing the wound and smoothing out clots from it.
- **D.** controlling of the bottom of the wound.
- **E.** excision of the necrotic tissues.

**Nr 125.** In wounded patients (even when it is more than 1 year after last recalling vaccine dose against tetanus) there is no need for tetanus prevention, because thanks to all world vaccinations against tetanus *Clostridium tetani* bacteria have been practically eliminated from the environment.

- **A.** both sentences are true and there is a causal relationship between them.
- **B.** both sentences are true but there is no causal relationship between them.
- C. the first sentence is true but the second is false.
- **D.** the first sentence is false and the second is true.
- E. both sentences are false.

Nr 126. When removing ear wax from external auditory duct:

- A. in order to see better the duct one should pull downwards the patient's ear-lap.
- **B.** during irrigation the ear a water stream should be directed to the fronto-inferior wall of the duct.
- **C.** the easiest way to remove a wax plug is by using forceps.
- **D.** irrigation must not be conducted if the patient has a story of an operation of the middle ear.
- **E.** guts containing fat must be avoided before irrigation of the duct.

**Nr 127.** A patient asking for a certificate stating on his ability to be employed came to a young non-specialist physician:

**A.** the physician should refer the patient to a physician authorized for such certification.

**B.** the physician can certify if the job is free of noisome factors.

**C.** the physician can certify if the job is free of burdensome factors.

D. the physician can certify but for a period not longer than 1 year.

E. the physician can fulfill his/her patient's request.

**Nr 128.** In patients with diagnosed gout the hypertension treatment <u>should not</u> include:

**A.** thiazide diuretics.

**D.** angiotensin receptor blockers.

**B.** angiotensin-converting enzyme inhibitors. **E.** alphablockers.

C. calcium channel blockers.

**Nr 129.** Hypotensive medications preferred in patients with diagnosed metabolic syndrome are:

- 1) thiazide diuretics;
- 2) betablockers;

4) angiotensin-converting enzyme inhibitors;

5) angiotensin receptor blockers;

3) calcium channel blockers;

6) loop diuretics.

The correct answer is:

**A.** 1,2. **B.** 2,3,4. **C.** 3,4,5. **D.** 1,2,4,5. **E.** 1,2,5,6.

**Nr 130.** The decision to start pharmacotherapy in patients with hypertension should be based on:

A. systolic and diastolic blood pressure results.	<b>D.</b> A and B.
<b>B.</b> total cardiovascular risk assessment.	<b>E.</b> A, B and C.

**C.** patient preferences.

Nr 131. The most effective screening procedure for colorectal cancer is:

A. colonoscopy. D. rectoscopy.

B. occult blood in the feces test.C. fiber sigmoidoscopy.E. the screening for a colorectal cancer is not performed.

**Nr 132.** To assess the effectiveness of eradiction treatment of *Helicobacter pylori* one should perform:

- **A.** urease test.
- **B.** urea breath test.

**C.** hydrogen test.

**Nr 133.** The sign of heavy dehydration in the case of diarrhoea in a child, prompting to an urgent hospitalization is:

A. avid fluid int	take.
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**B.** child anxiety.

**C.** lack of a divresis.

**D.** sudden scream.

**E.** dry mucosa.

**D.** A or B.

**E.** A, B or C.

Nr 134. The most frequent and clinically significant risk factor of obstructive sleep apnoea is:

- **A.** obesity.
- **B.** alcohol consumption before going to bed.
- C. hypnotic medication use.

Nr 135. A 55-year-old female with T-score-1,5 in DEXA scan should be advised:

- **A.** calcium reach diet and vitamin D<sub>3</sub> supplementation.
- **B.** adequate physical activity.
- **C.** to guit smoking.

**Nr 136.** In the management of venous ulceration the most relevant is:

- **A.** surgical debridement of ulceration.
- **B.** pressure therapy.
- **C.** drying ointments application.

Nr 137. A fresh red optical disc with vague borders, elevated above the surrounding retina is an ophtalmoscopic sign of:

- A. optic nerve dystrophy.
- **B.** central retinal vein thrombosis.
- **C.** intraocular inflammation.

**Nr 138.** It is **not true** that epinephrine causes:

- **A.** decrease in vascular resistance.
- **B.** diastolic pressure increase in aorta.
- C. increased myocardial contraction.
- **D.** improved conduction in a conducting system of heart.
- E. increase in amplitude of a ventricle fibrillation.

**Nr 139.** The integral part of management in *plasmocytic myeloma* is:

- **A.** prevention of renal failure. **D.** A and B. **B.** prevention of osteolysis. E. A. B and C.
- C. treatment of hypocalcaemia.

**Nr 140.** The use of low-leucocyte concentrate of red blood cells is contraindicated in cancer patients with anaemia, because transfusion-related immunity may produce progression of the neoplasm. The statements presented are:

- **A.** both true with causal association.
- **B.** both true without causal association.
- **C.** the first is false, the second is true.

**Nr 141.** In the case of the death of a patient caused by a body injury or poisoning the personal medical records should be stored in the archive of the family physician practice for:

**A.** 10 years. **B.** 20 years. **C.** 30 years. **D.** 40 years. **E.** 50 years.

- **D.** antibiotic therapy.
- E. treatment of crural varicose veins.

**D.** the first is true, the second is false.

E. A, B and C.

- **D.** optic disc oedema.
- E. proliferative retinopathy.

**D.** supine sleeping position habit.

**D.** biophosphonates.

E. tonsils enlargement.

**E.** both are false.

Nr 142. Which of the following does not belong to the disturbances of cognition?

**A.** disturbances of attention.

- **B.** disturbances of memory.
- C. disturbances of perception.

**D.** disturbances of thinking.

**D.** anterograde amnesia.

**E.** hypermnesia.

E. disturbances of impulsivity.

Nr 143. The disturbance of memory which pertains to the loss of the possibility to recall the memories from a certain period of time is called:

- **A.** hypomnesia.
- **B.** amnesia.
- C. retrograde amnesia.

Nr 144. Which of the following is the most severe qualitative disturbance of the consciousness:

E. delirium. A. coma. **B.** somnolence. **C.** sopor. **D.** clouding.

**Nr 145.** The typical clinical picture of mania <u>does not</u> include:

- **A.** grandiose delusions. **D.** increase of psychomotor drive.
- E. disregarding of the somatic symptoms. B. mood elevations.
- **C.** commenting voices.

**Nr 146.** The lack of verbal response to the questions or instructions given to the patent, is called:

**B.** mutism. E. autism. **D.** aphasia. **A.** stupor. **C.** paragnomen.

**Nr 147.** The symptoms called *deja vu* or *deja vecu* belong to:

- **A.** the disturbances of attention.
- **D.** the disturbances of perception.

**B.** delirium.

- **E.** the disturbances of affect.
- **C.** the disturbances of memory.

**Nr 148.** At present, the term "epileptic psychoses" means:

- **A.** characteropathy.
- **B.** disturbance of the consciousness during an epileptic fit.
- **C.** the patients with such diagnosis require the treatment with chlorpromazine.
- **D.** always justifies the diagnosis of the disability.
- E. has only a historical meaning.

**Nr 149.** In the case of pitiutary hypoactivity (the syndrome of Glinski and Simmonds), the mental disorders are most frequently similar to:

A. schizophrenia.

**D.** depression.

B. mania.

- E. obsessive-compulsive syndrome.

C. bulimia.

**Nr 150.** The group of substances which are found naturally in Cannabis indica, are:

- A. metamphetamins.
- B. benzodiazepins.
- C. ephedrins.

**Nr 151.** According to E. Bleuler basic symptoms of schizophrenia (so called "4 As") do not include:

- A. autism.
- **B.** disturbance of attention.
- C. disturbance of affect.

Nr 152. Delusions in schizophrenia usually are not the delusions of:

- **A.** thought insertion.
- **B.** influence.
- C. thought loudness.

Nr 153. Among reactive disorders, so called "situation-caused syndrome" includes:

- A. an acute reaction to stress.
- B. adaptation disorders.
- C. the Ganser's syndrome.

- **D.** grandiose.
- E. unusual thought content.
- **D.** reactive depression.
- E. selective mutism.
- **Nr 154.** Somnambulism belongs to:
- **A.** primary insomnias.
- **B.** parasomnias.
- **C.** disturbances of sleep caused by somatic conditions.
- **D.** disturbances of sleep characteristic for depression.
- **E.** it does not belong to pathology (it is a physiological phenomenon).

**Nr 155.** The probable risk factors for Alzheimer's disease **do not** include:

- A. head trauma.
- **B.** history of depression.

**D.** mother's old age. E. mother's young age.

C. viral infections.

**Nr 156.** The level of consciousness in patient after multiregional trauma who neither opens his eyes to a painful stimulus nor responds verbally, nor reveals motor responses shall be classified according to the Glasgow Coma Scale (GCS) at:

A. 3 points. **B.** 5 points. **C.** 6 points. **D.** 7 points. E. 15 points.

Nr 157. Rinsing the stomach is absolutely <u>contraindicated</u> in the case of:

- A. anticonvulsant drugs poisoning.
- **B.** caustic substance poisoning, especially when a time interval since poisoning is longer than 30 min.
- **C.** β-adrenolitic drug poisoning.
- **D.** antidepresant drugs poisoning.
- E. paracetamol poisoning.

**D**. ambivalence. E. disturbance of association.

**D.** cannabinoles.

**E.** psylocybines.

**Nr 158.** Drugs used for local anaesthesia include:

- 1) lidocaine;
- 2) bupivacaine;
- 3) midazolam;

The correct answer is:

**A.** 1,2,3.

**C.** 5,6. **B.** 2.5.6.

**D.** 1,2,4.

4) ropivacaine:

5) propofol;

6) sufentanyl.

**Nr 159.** Pulse oximetry may be **misleading** in:

- **A.** ethyl alcohol poisoning.
- **B.** carbon monoxide poisoning.

**D.** hyperthermia

**D.** external defibrillation.

**E.** calling an ambulance.

**E.** polycythaemia.

**C.** the sickle cell disease.

**Nr 160.** During resuscitation chest compressions in adults should be performed with frequency:

A. 40/min. B. 60/min. C. 100/min. D. 120/min. E. depending on the age of a patient.

**Nr 161.** Cardiopulmonary resuscitation in children is commenced with:

- **A.** two initial rescue breaths.
- **B.** 30 chest compressions.
- **C.** 15 chest compressions.

Nr 162. In the basic life support (BLS) it is very important to call for help. What does it mean "Fast Call" in BLS and when it is advised?

- **A.** a call for help after you recognize cardiac arrest, before you start BLS in adults.
- **B.** a call for help after you recognize cardiac arrest and do BLS for 1 min in adults.
- **C.** a call for help before you are sure that the patient has cardiac arrest.
- **D.** a call for help in the case of an unconscious patient.

**E.** a call for help after you are sure that the patient is safe.

**Nr 163.** When cervical spine injury is suspected, non instrumental airway management should be achieved by:

- **A.** only a chin lift.
- **B.** only a head lift.
- C. in the case of cervical spine injury only chest compressions are advised.
- **D.** a head tilt and chin lift may be performed avoiding aside movements of the head.
- E. only professionals can open the airway in this case.

**Nr 164.** In the case of bleeding from the mouth of the patient an advised way of performing non-instrumental airway management and ventilation is:

- **A.** the rescuer should use a single-use face mask (face shield) for mouth-to-mouth ventilation.
- **B.** a professional rescuer must be prepared for mouth-to-mouth ventilation in every case.
- **C.** no ventilation is advised because blood may be aspirated to patient's lungs.
- **D.** bleeding must be stopped by compression on the mouth and then mouth-to-mouth ventilation may be performed.
- E. in this case it is advised to do rescue cricothyroidotomy.

**E.** 2,4,6.

Nr 165. During resuscitation of a pregnant woman the proper position is:

- **A.** lying flat on the back in supine position.
- **B.** lying on the right side.
- **C.** lying on the left side.
- **D.** the position does not have any influence on the efficiency of resuscitation.
- **E.** lying with elevated legs.

**Nr 166.** Which of the following actions helps deliver maximum current during defibrillation?

- A. placing alcohol pads between the paddles and skin.
- **B.** reducing the pressure used to push down on the defibrillator paddles.
- **C.** applying conductive paste to the paddles.
- **D.** decreasing shock energy after the 2nd shock.
- E. increasing shock energy after the 1st shock.

**Nr 167.** Endotracheal intubation has just been attempted for a patient in respiratory arrest. During bag-mask ventilation you hear stomach gurgling over the epigastrium but no breath sounds, and oxygen saturation (per pulse oximetry) stays very low. Which of the following is <u>the most likely</u> explanation for these findings?

- **A.** intubation of the esophagus.
- **D.** bilateral tension pneumothorax.
- E. bronchospasm.
- B. intubation of the left main bronchus.C. intubation of the right main bronchus.

**Nr 168.** Which of these statements about i.v. administration of medications during attempted resuscitation is true?

- **A.** give epinephrine via the intracardiac route if i.v. access is not obtained within 3 minutes.
- **B.** follow i.v. medications through peripheral veins with a fluid bolus.
- C. do not follow i.v. medications through central veins with a fluid bolus.
- D. run normal saline mixed with sodium bicarbonate (100 mEq/L) during continuing CPR.
- E. epinephrine can be given only intravenously.

**Nr 169.** Which of the following drug-dose combinations is recommended as the initial medication to give a patient with asystole?

**A.** epinephrine 3 mg i.v.

- **B.** atropine 3 mg i.v.
- **C.** epinephrine 1 mg i.v.

- **D.** atropine 0.5 mg i.v.
- E. atropine 1 mg i.v.

**Nr 170.** A patient with a heart rate of 40 bpm is complaining of chest pain and is confused. After oxygen, what is the first drug you should administer to this patient while a transcutaneous pacer is unavailable?

- A. atropine 0.5 mg.
- **B.** epinephrine 1 mg i.v. push.
- **C.** isoproterenol infusion 2 to 10 mg/min.

**D.** adenosine 6 mg rapid i.v. push.

**E.** sublingual nitroglycerin tablet.

**Nr 171.** Which of the following agents are used frequently in the early management of acute cardiac ischemia?

**A.** lidocaine bolus followed by a continuous infusion of lidocaine.

- **B.** chewable aspirin, sublingual nitroglycerin, and i.v. morphine.
- C. bolus of amiodarone followed by an oral ACE inhibitor.
- **D.** calcium channel blocker plus i.v. furosemide.
- **E.** fibrinolytic + heparin bolus i.v.

**Nr 172.** Which of the following rhythms is a proper indication for transcutaneous cardiac pacing?

- A. sinus bradycardia with no symptoms.
- **B.** normal sinus rhythm with hypotension and shock.
- C. complete heart block with pulmonary edema.
- **D.** asystole that follows 6 or more defibrillation shocks.
- E. PEA.

Nr 173. In paracetamol intoxication you should use:

- A. naloxon.
- **B.** N-acetylocysteine.

- **D.** carbamazepine.
- E. none of them.

**C.** flumazenil.

Nr 174. Which sentence is true concerning acute coronary syndrom?

- A. in ECG ACS is always present as ST-segment elevation.
- **B.** there is no risk of ventricular fibrillation.
- **C.** aspirine is first shot drug.
- **D.** antiplatelet drugs are not used in pre-hospital stage.
- **E.** there is no point in use of nitroglicerine or some opioids.

**Nr 175.** A victim of a car accident who was marked with red label in segregation can present one of the injuries:

- A. femoral neck fracture.
- **B.** arterial bleeding.
- **C.** craniocerebral trauma with unconsciousness.
- D. dysaesthesia in lower limbs.
- E. is dead.

**Nr 176.** The professional secrecy includes:

- **A.** everything that a physician finds during examination and that concerns treatment and prognosis.
- **B.** everything that a physician finds when practicing profession and that concerns patient or his/her environment.
- **C.** everything that has been declared as confidential by the patient.
- D. everything that, when revealed, may harm the patient.
- E. everything that a physician finds when practicing profession and that concerns patient's disease and the physician's activities.

**Nr 177.** A physician additionally employed in a military unit is preparing a dissertation on physiology of physical effort. Therefore he is going to conduct an experiment on recruits. In order to make it possible he has to:

- **A.** obtain the consent of the soldiers.
- B. obtain the consent of the soldiers and the commander of the unit.
- C. obtain the consent of the ethical committee and the commander of the unit.
- **D.** obtain the consent of the ethical committee and the soldiers.
- **E.** this kind of experiment is not allowed.

**Nr 178.** A dentist set up his private practice after moving into the town where he had not been known before. He had ordered leaflets with information about his office and sent them to all inhabitants' post boxes. He promised that the patients visiting him with the leaflets would have 10% discount on dental procedures and all patients would have a free inspection of their oral cavity. Is his behavior proper?

- **A.** his behavior bears the hallmarks of advertising, and this is not allowed with respect to dental practice.
- **B.** giving information about prices was wrong; the other information was useful for patients.
- **C.** a dentist is allowed to use this way of informing patients when starting his/her practice in a new place.
- **D.** this kind of wining over patients is allowed because private dental practice is being run under the principles of free market.
- E. the content of such leaflets must be agreed with the local Regional Chamber of Physicians and Dentists and only then it is possible to use it.

**Nr 179.** A patient had been admitted to a surgical ward where the doctoral staff consists of equally qualified specialists. The patient did not want to be operated by the surgeon appointed by the head of the ward. He wanted to be operated by the head who was not to operate on this day. The patient suggested treating him as a private patient and wanted to pay the head for the operation. Which conduct should be adopted?

- A. the head should stand by his decision who was to operate on the patient.
- **B.** he is allowed to accept additional fee because he had not been expected to operate and the patient wanted just him.
- **C.** knowing about equal qualifications of all concerned he would be acting unfriendly and groundlessly if he agreed to change the operator.
- **D.** allowing for the patient's particular trust and job organisation the head should accept the patient's request and divide the fee between the members of the operating team.
- **E.** allowing for the patient's particular trust and job organisation the head should accept the patient's request but no extra money should be involved.

**Nr 180.** A physician working for a sport club has been asked by a club body-builder to prescribe anabolics which the athlete has been buying so far from street dealers. What should the physician do?

- **A.** he should inform the athlete about threats for his health posed by taking anabolics and refuse the request.
- **B.** he should take the decision after consulting the athlete's coach.
- **C.** he should inform the athlete about threats for his health posed by taking anabolics but if the athlete adheres to his request the physician should fulfill it.
- **D.** he should sent the athlete to the dealers.
- **E.** he should inform the Disciplinary Committee about the fact.

**Nr 181.** Does the Polish Medical Code of Ethics include an article concerning so called presumed consent in transplantology?

A. no, the article concerns relative consent.

**B.** yes.

**C.** no.

**D.** yes, the article concerns family's consent.

**E.** yes, it recommends informed consent.

**Nr 182.** Does the Polish Medical Code of Ethics include any articles concerning biomedical experiments?

**A.** no.

**B.** yes, it refers to the decree of the Minister of Health.

C. ves.

**D.** yes, only concerning experiments on embryos.

E. no, this is not an ethical problem.

Nr 183. Who, according to the Polish Medical Code of Ethics, is allowed to supervise medical experiments on humans?

**A.** a pharmacologist.

**D.** a lawyer.

**B.** a physician.

E. a medical administrator.

**C.** a pharmacist.

**Nr 184.** Does the Polish Medical Code of Ethics allow to renounce resuscitation in terminal states?

**A.** yes, only with the lawyer's consent. **D.** yes, only in neoplastic diseases.

B. yes.

**E.** there is no such regulation in the Code.

**C.** no.

**Nr 185.** In what kind of situations does the Polish Medical Code of Ethics allow medical experiments on humans incapable of giving informed consent?

- 1) if there is no possibility for experiments of comparable effectiveness on humans able to give informed consent;
- 2) only on recruits;
- 3) only in terminal states;
- 4) only on prisoners.

The correct answer is:

**C.** 3,4. **A.** 1,3. **B.** only 2.

**D.** only 4. **E.** only 1.

**Nr 186.** The certifying doctors and medical boards of Agricultural Social Insurance Fund (KRUS) issue statements about the following:

**A.** degree of disability.

**B.** inability to do military service.

**D.** children disability.

E. inability to work.

**C.** complete inability to work on a farm.

Nr 187. Preliminary, routine, control examinations are carried out by:

- A. SIF (ZUS) certifying doctors.
- **B.** ASIF (KRUS) expert doctors.
- C. doctors authorized to carry out prophylactic examinations.
- **D.** SIF (ZUS) medical boards.

E. district teams authorized to issue statements about the degree of disability.

**Nr 188.** In accordance with the Law on cash benefits from social insurance in case of sickness and maternity the doctor's statement concerning temporary incapacity to work due to sickness or a hospital stay contains the information about the circumstances influencing the entitlement to the sickness allowance or its amount marked with letter codes. Incapacity for work caused by tuberculosis is marked with:

A. code A. B. code B. C. code C. D. code D. E. code E.

**Nr 189.** The decision stating an occupational disease after explanatory proceedings have been carried out is issued by:

A. a labour medicine doctor.

- **D.** a National Sanitary Inspection organ. **E.** The Social Insurance Fund.
- **B.** The Labour Medicine Institute.
- **C.** The Central Institute of Labour Protection.

**Nr 190.** In accordance with the Law on old-age and disability pensions from the Social Insurance Fund, an insured person who has lost the capacity to do any work is:

- A. a disabled person of the third category.
- **B.** incapable to do farm work for a prolonged period of time.
- C. partially incapable to work.
- **D.** completely incapable to work.
- E. slightly disabled.

**Nr 191.** In accordance with the Law on the social insurance system, work incapacity pensions are paid out from the following:

A. Disability Pensions Fund.

- D. Sickness Allowances Fund.
- E. the state budget.
- B. the old-age Pensions Fund.C. National Fund for Rehabilitation of the Disabled.

**Nr 192.** In accordance with the Law on cash benefits from social insurance in case of sickness and maternity the medical statement concerning temporary incapacity to work due to sickness contains the statistical number of the disease, established in accordance with the International Classification of Diseases and Health Problems, written in the following:

- **A.** the original statement.
- **B.** the first copy of the statement.
- **C.** the second copy of the statement.
- **D.** answers A,C are correct.
- E. answers A,B are correct.

1) incic	average life expe bidity;		4) infant mortality; 5) fertility rate.		
<b>A.</b> 1,3,4.	<b>B.</b> 1,2,3.	<b>C.</b> 1,3,5.	<b>D.</b> 2,4,5.	<b>E.</b> 1,2,5.	
	first Public Healt <b>B.</b> France.	•	lemented in: <b>D.</b> the USA.	E. Poland.	
<ul> <li>Nr 195. According to Marc Lalonde's Health Field Concept, which of the fields mentioned below is considered the most important health determinant:</li> <li>A. genetic factors.</li> <li>B. physical environment.</li> <li>C. lifestyle.</li> </ul>					
<b>Nr 196.</b> The health care, its structure, organization, availability as well as the quality of medical services affect health within the following range:					
<b>A.</b> up to 5%.	<b>B.</b> 10-15%.	<b>C.</b> 20-30%.	<b>D.</b> 55%.	<b>E.</b> 60%.	
<ul> <li>Nr 197. Health education as an important element of health promotion:</li> <li>1) constitutes a significant element of the health policy of the State;</li> <li>2) concerns exclusively the population of adolescents;</li> </ul>					

- 3) enables people to acquire competence for protection, maintenance and improvement of health;
- 4) exerts an effect on the change in attitudes and behaviours of society;
- 5) addresses mainly health care staff.

The correct answer is:

**A.** 1,3,4. **B.** 1,2. **C.** 3,5. **D.** 1,5. **E.** 1,3,5.

Nr 198. The programme document for health promotion is:

A. the Ottava Charter for Health Promotion.

- **B.** the National Health Programme.
- **C.** the Declaration of the World Health Organization.
- **D.** the Constitution of the Republic of Poland.

E. the act in the Matter of Public Health Units.

**Nr 199.** Public authorities assignments in the field of provision of an equal access to health care services cover the following:

- A. creating conditions for the functioning of the system of health care.
- **B.** analysis and evaluation of health demands.
- **C.** health promotion.
- **D.** prophylaxis.
- E. all of the above.

Nr 200. The first-phase prophylaxis covers the following:

- **A.** actions biased towards the strengthening of health.
- B. actions biased towards an early detection of diseases and their causes.
- **C.** actions with respect to the disease which has already developed.
- **D.** exclusively therapeutic actions.
- E. early rehabilitation.

## Thank you!