Tanta University
Faculty of Medicine,
Urology Department.
second paper

Diploma
Second part
Time allowed: 3 hours.
Date: 17/4/2016

All questions to be answered

Give an account on :

1) Non-neurogenic bladder dysfunction — 60 marks

2) Minimal invasive therapy of benign prostatic hyperplaia — 60 marks

3) Azospermia — 60 marks

Good Luck

Tanta University
Faculty of Medicine

General SurgeryExam

ماجستيرودبلوم جراحة المسالك البولية

Exam 6April 2016
All questions to be answered

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1. **Discuss the management of a case of stab wound in the right lumbar region** (10 degrees)

2. **Discuss the pathophysiology, clinical picture and management of septic shock.** (10 degrees)

3. **Discuss post-operative complications and how to manage them** (10 degrees)

4. **What is the differential diagnosis and management of acute painful scrotum** (10 degrees)

5. **What is the etiology and management of a case of deep vein thrombosis**. (10 degrees)

6. **What is the etiology, the complication and management of incisional hernia** (10 degrees)

امتحان الشفوي والعملي لطلاب الدبلوم يوم ٢٠١٥/٤/١٦ ولطلاب الماجستير يوم ٢٠١٥/٤/١٧
بقسم الجراحة العامة بالمستشفي التعليمي الجديد الساعة الثامنة صباحا

Chairman of Department

Prof Dr. Mohamed Ali Attia

Good luck

Tanta University
Faculty of Medicine

General SurgeryExam

دبلوم جراحة المسالك البولية

Exam 19April 2016
All questions to be answered

1. What are the steps of preoperative assessment and how to prepare your patient for surgery (20 degrees)

2. Discuss the pathophysiology, clinical picture and management of hypovolemic shock (20 degrees)

3. What is the differential diagnosis and management of a scrotal mass (15 degrees)

4. What is the etiology and management of a case of deep vein thrombosis (15 degrees)

5. What is the etiology, the complication and management of inguinal hernia (15 degrees)

6. Discuss post-operative pain (15 degrees)

امتحان الشفوي والعملي يوم ٢٠١٥/٤/٢٠ بقسم الجراحة العامة بالمستشفي التعليمي الجديد الساعة الثامنة صباحا

Good luck

Tanta University
Faculty of Medicine,
Urology Department.
First paper

Diploma
Second part
Time allowed: 3 hours.
Date: 12/4/2016

All questions to be answered

Give an account on :

1) Adult onset hypogonadism and metabolic syndrome 60 marks

2) Complications of Percutaneous nephrolithotomy (PCNL) 60 marks

3) Pathogenesis of renal cell carcinoma 60 marks

Good Luck

DATE:05/04/2016
Time Allowed: 3 hours
Total Assessment Marks: 60

Department of: Pathology

Question	Marks (60)
• **Give an account on:**	
1. Grading of prostatic carcinoma	10
2. Amyloidosis	10
3. Bilhariziasis of urinary bladder	10
4. Pathological features of testicular teratoma	10
5. Renal lesions in hypertension	10
6. Types and complications of urinary stones	10

Oral Exam will be held on Sunday, 10th April, 2016 at 10:00 a.m.
In Pathology Department, 4th floor- Faculty building

, Good Luck

Tanta university

Faculty of medicine

Microbiology & Immunology department.

Exam.for Diploma Degree in: Urosurgery ; 1st part

Microbiology and Immunology

DATE 5 /4 / 2016. // TIME:1.5 HOUR //TOTAL ASSESSMENT MARKS: 60

1- **What Is microorganisms causing A Urinary Tract Infection (UTI)?**
2- **What are Symptoms of Bladder & Urinary Tract Infection ?**
3- **what are predisposing causes of Urinary Tract Infection (UTI)?**
4- **how can a resistant strain of bacteria develops ?.**
5- **How is Urinary Tract Infection diagnosed; clinically & bacteriologically?**
6- **A 25 years old female suffering from urgency , frequency , and dysuria, urine sediment contained many pus cells but routine culture yielded no bacteria , what is your suggestion ?and treatment.**

يعقد الامتحان الشفهي يوم الاربعاء 13 / 4 / 2016

GOOD LUCK

كل سؤال ١٠ درجات

Tanta University
Faculty of Medicine
Department of Physiology.

Examination for (Diploma Urology)
Course Title: Physiology
Total Assessment Marks:50

Course Code: TMED.02:A11

Time Allowed: Physio.Bio.+ Pharma Three Hours

Date:12/4/2016

Term : Final

All the questions are to be answered:-

Q1- Discuss: Mechanisms of transcellular and transcapillary exchange. **(10 marks)**

Q2- Explain briefly:

a) Treatment of shock. **(10 marks)**

b) Functions of proximal convoluted tubules. **(10 marks)**

Case study: A patient with uncontrolled hypertension is placed on a new diuretic targeted to the Na+ reabsorption site from the basolateral surface of the renal epithelial cells. Which of the following transport processes is the new drug affecting?

a. Na+/H+ exchange
b. Na+-glucose cotransport
c. Na+-K+ pump
d. Facilitated diffusion
e. Solvent drag

Explain your answer **(5 marks)**

Answer the following MCQ by the most probable one choice& write the statement in your answer paper: **(15 marks)**

Q.1. Mixed venous blood has:

a. Higher hematocrit than arterial blood.
b. Higher pH than arterial blood.
c. pO2 lower than coronary sinus blood.
d. None of the above.

Q.2. Vitamin K neutralizes:

a. Factor V.
b. Heparin.
c. Antithrombin III.
d. None of the above.

Q.3. All of the following can reduce the vital capacity EXCEPT:

a. An increased residual volume.
b. A decreased alveolar surface tension.
c. A weakness of the inspiratory muscles.
d. A weakness of the expiratory muscles.

Q.4. The tensions of O2 in the venous blood is increased

a. In anaemia.
b. In stagnant hypoxia.
c. In hypoxic hypoxia.
d. In cyanide poisoning

Q.5. Maturation failure anaemia

a. Is characterized by elevation of the main cellular volume.
b. Is characterised by large hypochromic RBCs.
c. Causes decrease in bleeding time.
d. Is typically found following chronic blood loss from body.

Q.6. Stimulation of β adrenergic receptors causes:

a. Bronchodilation.

LOOK IN THE BACK OF THIS PAGE

b. Coronary vasoconstriction.
c. Bradycardia.
d. Vasoconstrictor of skin vessels.

Q.7. In chronic haemorrhage:

a. Blood coagulability decreases.
b. Water moves from extravascular to intravascular compartment.
c. Cutaneous vasodilation is a cardinal sign.
d. There is microcytic hypochromic anemia.

Q.8. All of the following would be expected to occur in compensated shock EXCEPT :

a. Sensation of thirst.
b. Cutaneous vasodilatation.
c. Water movement from the extravascular to intravascular compartment.
d. Salt and water retention.

Q.9. Calcitonin is known to cause the following:

a. Decreased calcium reabsorption by proximal tubules.
b. Increased phosphate reabsorption by proximal tubules.
c. Increased absorption of Ca++ in the gut.
d. Increased osteoblastic activity.

Q.10. Cretinism is characterised by :

a. High level of vitamin A in blood.
b. Cold intolerance.
c. Precocious puberty.
d. Enlargement of adrenal cortex.

Q.11. Aldosterone is secreted in response to all of the following EXCEPT:

a. A low plasma Na+ concentration
b. Increased secretion of ACTH
c. Activation of renin-angiotensin system
d. Infusion of fluids having excess Na+ concentrations

Q.12. About referred pain, all of the following are true EXCEPT:

a. It occurs as a result of migration of organs during development.
b. It is explained by the convergence-projection theory.
c. It always accompanies cutaneous pain.
d. It is a major manifestation of visceral pain.

Q.13. Sever diarrhea tends to produce metabolic acidosis because the:

a. Infections causing diarrhea form excessive amounts of acid.
b. Gastric Hcl is no longer neutralized by the duodenal secretions.
c. Lost intestinal secretions contain large amounts of bicarbonates.
d. Kidney tends to retain H+ when the body loses excessive water.

Q.14. The increased circulating fluid volume in chronic congestive heart results from all of the following factors EXCEPT:

a. Increased sympathetic discharge to the kidney.
b. Decreased rate of firing of atrial volume receptors.
c. Decreased renal perfusion.
d. Stimulation of the arterial baroreceptors.

Q.15. Which of the following will inhibit stomach contractions?

a. Acetylcholine.
b. Motilin.
c. Gastrin.
d. Secretin.

Oral exam will be on Sunday 24/4/2016 at 9 am in physiology department