Tanta University Faculty of Medicine

Chest Department

Total: 270Marks

لائحة 2nd part exam. (Paper II) 2013

Time Allowed: 3Hours

Tuesday 8/6/2021

	All Questions should be answered	Marks
1	Discuss malignant mesothelioma, causes and management?	
2	Mention the impact of pregnancy in asthmatic patients?	
3	Discuss update management of idiopathic pulmonary fibrosis?	
4	Compare invasive ventilation to non invasive ventilation as regard indications , contraindications, benefit and complications?	
5	Write short account on :A. Carcinoid tumor?B. Strain of coronavirus?C. BAL?	15 15 15
6	MCQ (30 MCQ questions in 6 papers) تسلم ورق أسئلة هذا السؤال مع ورقة الأجابه Good luck	60

لجنة الأمتحان

ا.د محمد جمال الخولی ا.د هدی بحر ا.د ابراهیم صلاح

Choose one answer for each of the following question:

1- Which of the following features makes ARDS unlikely?

A Bilateral infiltrate on chest X-ray

B Hypotension

C Increased pulmonary capillary wedge pressure

D Metabolic acidosis

E Reduced urine output

2- Which of the following Diffuse Parenchymal Lung Diseases, have the best prognosis without treatment?

A Alveolar proteinosis

B Hypersensitivity pneumonitis

C Idiopathic pulmonary fibrosis

D Non-specific interstitial pneumonia

E Sarcoidosis

3- Which of the following is a feature of life-threatening asthma?

A PaCO2 <4 kPa

B PEF >75% predicted

C Polyphonic wheeze

D Silent chest

E Tachycardia

4- Which of the following statements about Allergic Bronchopulmonary Aspergillosis is true?

A Chest physiotherapy is not required

B Corticosteroids are not indicated

C CXR will show cavitation with a fungal ball

D IgE level in blood will be very high

E Treatment is with standard antibiotics as used for CAP

5- A 70-year-old woman is found to have a nodule on a chest X-ray which was performed routinely prior to a left hip replacement. She has smoked 10 cigarettes / day for 20 years but had stopped 30 years previously. Apart from osteoarthritis of her left hip and a BMI of 40, she appeared well with no other symptoms. The orthopaedic consultant organised a chest CT which shows a 6 mm smooth with no calcification nodule in the left upper lobe of the lung with no lymphadenopathy. How would you manage this patient?

A Reassure and discharge the patient

B Organise a CT guided biopsy

C Organise a bronchoscopy for bronchoalveolar lavage

D Organise a CT-PET scan

E Arrange for an interval CT scan of thorax in 6 months

6- Non-caseating granulomas are associated with inhalation of which substance?

A Beryllium

B Cadmium

C Iron

D Nickel

E Silica

7- A bilateral pleural effusion is most likely to be due to what cause?

A Congestive cardiac failure

B Meig's syndrome

C Mesothelioma

D Pulmonary embolus

E Rheumatoid arthritis

8- Which of the following statements about germ cell tumours is true?

A Teratomas are the commonest germ cell tumour in adults

B Germ cell tumours account for 50% of anterior mediastinal masses

C Seminomas occur in elderly men

D Teratomas metastasise to the lungs and the heart

E The five-year survival with seminoma is less than 10%

9- What is the best treatment for moderately severe OSAHS?
A BiPAP
B CPAP
C Intra-oral device
D Modafanil
E UPPP

10- Which of the following investigations will NOT be helpful in identifying the aetiology of ARDS?

A Blood cultures B Bronchoalveolar lavage C Echocardiogram

D lung biopsy

E Serial ABG measurement

11- Which of the following is NOT associated with an increased risk of lung cancer?

A Asbestosis

B Massive pulmonary fibrosis

C Passive smoking

D Siderosis E Silicosis

12- Which statement is true of bronchogenic cysts acquired secondary to infection?

A They can contain blood and mucus

B They are much commoner in women

than in men

C They are lined with lung parenchymal cells

D They enhance with contrast CT scan

E They are associated with Neurofibromatosis

13-Which of the following has NOT been shown to be strongly associated with Cannabis inhalation?

A Chest infection

B Cough

C Euphoria

D Lung cancer

14- Which one of the following investigations confirms the diagnosis of primary ciliary dyskinesia?

A High-resolution computed tomography.

B Nitric oxide breath test

C Nasal mucociliary clearance test

D Microscopy of ciliary structure and function

E Sweat test

15- Which of the following statements about metabolic acidosis is true?

A It can never occur together with respiratory acidosis

B The bicarbonate in the ABG is usually low

C The PaCO2 in ABG is usually high though the compensatory mechanism

D It can be successfully managed with NIV.

E It can improve slightly with respiratory stimulants

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17- What is central sleep apnoea characterized by?

A Increase in thoracic movements

B Increase in abdominal movements

C Reduction in ventilatory drive

D Significant snoring

E Sleep fragmentation

18- In a patient presenting with a unilateral pleural effusion, which of the following is most important?

A A bronchoscopy is always indicated.

B The differential cell count can be diagnostic

C Several samples of fluid should be sent for cytology

D The fluid protein and LDH to serum protein and LDH ratio should be measured

E Pleural fluid amylase level can be diagnostic

19- Which of the following statements about the diagnosis of PE is true?

A A positive D-dimer level is helpful in making a diagnosis of PE

B A normal troponin level means that a PE can be ruled out

C A modified Wells score, used together with imaging and D-dimer level, increases the sensitivity of the test

D VQ scan is the imaging modality of choice in most patients E Patients with a high Wells score and negative

20- Which of the following conditions is not a cause of ARDS?

A Blood transfusion B Bowel obstruction C COPD D Near-drowning

E Sickle cell crisis

21- What is the commonest cause of a middle mediastinal mass in an adult?

A Bronchogenic cyst

B Retrosternal thyroid

C Lymphadenopathy

D Pericardial cyst

E Diaphragmatic hernia

22- Which of the following statements about acute PE is true?

A All patients presenting with an acute PE should be hospitalised

B Patients with an acute PE should be started on warfarin as the first anticoagulant

C LMWH is the initial treatment of choice for most haemodynamically stable patients with PE

D Patients who are hypotensive should be commenced on LMWH

E Rivaroxaban is the treatment of choice for patients with severe PE

23-Which of the following is consistent with a diagnosis of pulmonary hypertension? A Mean PAP > 15 mmHg at right heart catheter

B Increased pulmonary vasculature on CXR

C ECG showing ST elevation in the anterior leads

D Pan-systolic murmur throughout the praecordium

E Enlarged right ventricle on transthoracic echocardiogram

24- Which of the following is NOT a clinical feature of bronchiectasis?

A Clubbing

B Coarse crackles

C Chronic productive cough

D Haemoptysis

E Steatorrhoea

25- Upper Airway Resistance is NOT characterized by which of these conditions?

A Snoring

B Sleep fragmentation

C Hypertension

D Oxygen desaturation

E Exacerbation with alcohol

26- Which of the following statements about CAP is true?

A Antibiotic treatment should be delayed until positive cultures and sensitivities are available

B CAP should always be managed in hospital

C CAP should be suspected in a patient who becomes unwell after several days in hospital D CURB-65 score is of prognostic value and should be always calculated

E Diagnosis of a CAP is made from the presenting symptoms

27-Which feature of a solitary pulmonary nodule suggests that it might be malignant?

A Calcification

B Less than 1 cm in diameter

C Low FDG uptake on PET scan

D Smooth margins

E Thick-walled cavity

28- Which of the following statements regarding pneumocystis jiroveci (PCP) is true?

A Pneumocystis jiroveci is a parasite

B Pneumocystis jiroveci may be asymptomatic

in the immunocompromised patient

C Diagnosis is made after culture of the organism for eight weeks

D Treatment is with macrolide antibiotics for six months

E CXR will show bilateral pleural effusions

29- What is the commonest histological type of lung cancer?

A Adenocarcinoma

B Bronchoalveolar cell carcinoma

C Large cell carcinoma

D Small cell carcinoma

E Squamous cell carcinoma

30-Which of the following statements about lymphangioleiomyomatosis (LAM) is true?

A LAM occurs most commonly in young men

B LAM is strongly associated with cigarette smoking

C LAM is characterised by the deposition of thick, lipoproteinaceous material in the alveoli

D LAM predisposes to spontaneous pneumothorax

E Lung function demonstrates a restrictive process with reduced TLC

تسلم ورق أسئلة هذا السؤال مع ورقة الأجابه

Good luck

Tanta University

Faculty of Medicine Chest Department

MS 2nd part exam. (Paper I) 2013 لائحة Total: 270 Marks

Time Allowed: 3Hours

Tuesday 1/6/2021



	All Questions should be answered:		(Marks)	
1	Discuss multidrug resistance tuberculosis?		45	
2	Discuss Pulmonary rehabilitations program and its components?		35	
3	Discuss pulmonary renal syndromes?		40	
4	Mention diagnosis, complications, differentia	I diagnosis and treatment	45	
	of emphysematous bulla?			
5	Write short account on			
	A. New oral anticoagulants?		20	
	B. Polysomnography?		15	
÷	C. FEV1?		15 15	
	D. Respiratory acidosis?			
6	A 68-year-old male is admitted to the emergency room complaining about shortness of breath, fever, chills and cough with purulent sputum production for the last 2 days. He is a nonsmoker without any previous medical history. The patient looks tired but other than that he is in good condition without any confusion. Vital signs are blood pressure 105/70 mmHg, heart rate 110 beats per min, breathing rate 32 breaths per min, and temperature 38.9 °C. Bronchial breath sounds are heard on auscultation of the right chest. Blood tests reveal a white blood cell count of 9000 × 109 per L with a left shift, haematocrit 46%, urea 22 mmol·L–1, creatinine 160 µmol·L–1, sodium 142 mmol·L–1 and SAO2 on (room air) 92%. A CXR demonstrates moderate cardiomegaly and a right lower lobe infiltrate with air bronchograms. • What is your diagnosis and drescibe clinical assessment of the patient?		40	
l	لجنة الأمتحان ١.د محمد جمال الخولى ١.د هدى بحر ١.د ابراهيم صلاح			
	Good Luck			