

**IMPORTANT:** 

Read the following instructions.

- 1. Write examination version number in the space of section number on the examination answer sheet.
- -2. Fill in your name and the last four digits of your Temple identification number on your answer sheet and darken the corresponding circles with a #2 pencil.
- 3. There are eighty (80) items (questions) on this examination. There is only one answer to each item. Choose the best correct answer to a question or response to finish the statement of each item.
- 4. Use a #2 pencil to mark your answers on your answer sheet. Mark your answer right after you chose one. There is no extra time at the end of the examination. The examination time is one hour and 40 minutes.
- 5. Keep your eyes on your own examination paper and answer sheet. Place your own examination paper and answer sheet on your table top and prevent them from being exposed to others.

6. Students are not allowed to bring electronic devices including cell phones or other miscellaneous items to the examination.

7. Proctors are not allowed to explain questions during examination.

 $\alpha$ 

#69 -> NOT SUREOF

ANSWER

A 70-year-old man has sudden onset of severe substernal chest pain that radiates to his left arm and jaw. In the emergency room, angiography reveals complete thrombosis of the left circumflex coronary artery. Which of the following complications of this disease is most likely to happen within 1 hour of these events?

K. Cardiac tamponade Huid

B. Rupture of papillary muscles

(C) Ventricular fibrillation

D. Ventricular aneurysm

E. Restrictive cardiomyopathy

- Coronary artery vasospasm is believed to play a large role in:
  - A. stable angina pectoris.
  - B. Prinzmetal's angina.

C. mitral valve prolapse.

D. acute rheumatic pericarditis.

E. subacute bacterial endocarditis.

- 3. Which of the following infectious agents is a common cause of myocarditis in the US?
  - A. Plasmodium falciparum Walaria
  - B. Herpes simplex virus, type I
  - C. Epstein-Barr virus Eb /
  - D. Mycobacterium tuberculosis
  - E Coxsackieviruses A and B
- Cardiac vegetations:
  - A. are aggregates of fibrin clot on the pericardium caused by acute rheumatic fever.
  - B. are small myocardial tumors that protrude into the left atrium.
  - (C) are small fibrin clots on inflamed, damaged surfaces of valves.
  - D. are zones of inflammation in the myocardium induced by viral infections.
  - E. are caused exclusively by Streptococcus viridans.
- A 52-year-old woman has a long history of chronic alcoholism and has begun experiencing heart problems associated with arrythmias and systolic dysfunction. Imaging studies reveal that all chambers of her heart are enlarged. What is the most likely diagnosis for her heart eupa obstrictre disorder condition?

A. Mitral stenosis

B Dilated cardiomyopathy

E: Restrictive cardiomyopathy

D. Pericardial effusion

E. Hypertensive heart disease

6. A 59-year-old man has a history of unstable angina pectoris. On his way to work one morning he collapses and dies on the sidewalk. The underlying cause for his sudden cardiac death is most likely:

A. calcific aortic stenosis.

B. mitral valve stenosis due to rheumatic heart disease.

C. right atrial dilation due to tricuspid valve insufficiency.

D ventricular fibrillation secondary to ischemia of heart tissue.

E. chronic obstructive pulmonary disease. COPD

7. Which of the following typically causes elevated serum levels of cardiac troponins?

A. A myocardial infarct

B. Left atrial arrythmia

C. Dilated cardiomyopathy

D. Mitral valve prolapse

E. Hypertensive heart disease

8. A 63-year-old woman has been diagnosed as having right-sided heart failure. A common manifestation of this type of failure is:



calcific aortic stenosis.

B. a prolapsed mitral valve.

C. a ventricular septal defect.

portal hypertension.

E. an aortic coarctation.

9. A 69-year-old man has a recent history of myocardial infarction and has survived. However, left ventricular output has diminished and has resulted in hypoperfusion of the kidney. The response of the kidney results in:



A salt retention and corresponding increase in fluid volume.

B. diuresis in order to decrease fluid volume.

© production of renin to cause generalized vasodilation in the body.

D. increased production of vitamin D.

E. a rapid increase in the rate of development of atherosclerosis of the aorta.

10	A 57 war ald wamen presents to the det	ntal clinic for routine dental care. During the review
10.	of history and initial examination you no	tice that the patient has swollen ankles and
	ti . 1 1 1 Che also has troub	le breathing and feels she cannot breathe at all II In
	dental chair is reclined more than 45 dep	pul edema O Fail  Swallan & Fail  outle
	most likely has:	and edema ( ) O Fail
	most likely has.	10 × C
	A pure right-sided heart failure.	Shallar & Fact
	B. pure left-sided heart failure.	onlete
/	© biventricular heart failure.	
	D. mitral valve prolapse.	
	E. a ventricular septal defect.	when the opening aniety and the state
	E. a ventricular sepair delection	7 3000 - 2000 - 2000
11	The degree of shunting that occurs in the	tetralogy of Fallot is governed mostly by:
11.	The degree of shanting that seems	R->L
	A. the size of the atrial septal defect	
	B. the degree of obstruction affecting	the pulmonary artery
1)	C. the size of the left atrium.	
7	D. the presence or absence of a pater	t ductus arteriosus.
$\mathcal{Y}$	E. the thickness of the right ventricul	ar muscle.
	D. die dans de la constant de la con	N. V. T. C.
12	With regard to congenital left to right sh	nunts of the heart: (2 )
12.		
	At the patent ductus arteriosus is by	far the most common cause. VSD from the most common cause.
	B. patients are typically born cyanoti	C. RAL
5	e. tetralogy of Fallot is the most con	mon cause. R
	Depatients become cyanotic with tin	ne due to a reversal of the shunt.
4	E. pulmonary blood pressure drops to	o dangerously low levels.
	Will Management of The Managem	AND ADDRESS OF THE PARTY OF THE
13.	A 63-year-old man has episodes of seve	re substernal pain with exercise that have become
	more frequent and more painful over th	e past 9 months. Nitroglycerin relieves the pain.
	Which of the following cardiac lesions	is most likely to be present?
	materia	not MI
	A. Rheumatic mitral stenosis	ernei geihangrerren ban noitastar flat (A.)
/	B. Acute myocardial infarct	If diantsis in order to decrease fluid and
6	C. Viral myocarditis	
X	D. Dilated cardiomyopathy	D. increased production of virginia D
V	(E) Severe atherosclerosis of the coro	nary arteries
		11.1
14.	Foci of inflammation in acute rheumati	c myocarditis are called:
	A. vegetations.	
^	B Aschoff bodies.	
<b>b</b>	C. Anitschow cells.	
V	D. ferruginous bodies.	
	E. abscesses with draining fistulous	tracts.

15. A 67-year-old man developed gradually worsening heart failure over the past 3 years with pitting edema of the legs. He dies of respiratory failure and at autopsy his cardiac findings are limited to the right side of the heart: there is right ventricular and atrial hypertrophy and dilation. Which of the following conditions is most likely to have produced the cardiac changes?

1 P Failure

A. Chronic obstructive pulmonary disease COP

B Saddle pulmonary thromboembolism

Atherosclerosis of the left anterior descending coronary artery

D. Calcific aortic stenosis

E. Cardiac tamponade - fruid accomulation

16. A 31-year-old woman has a history of autoimmunity that includes atrophic gastritis with destruction of parietal cells. Which of the following anemias would she likely also have?

A. Sickle cell anemia-

B. Spherocytosis

C. Thalassemia minor Boha

Myelophthesic anemia Powe

E. Pernicious anemia megaloblastic

17. A 33-year-old male has a history of glucose-6-phosphate dehydrogenase deficiency. Several drugs given recently to combat an infection resulted in acute anemia and hemoglobinemia. The most likely cause of the anemia is:

A. lack of synthesis of red blood cells in the bone marrow.

Bhemolysis due to oxidant injury.

C. a type II hypersensitivity reaction.

D. removal of red blood cells by macrophages in the spleen due to altered shape.

E. a type III hypersensitivity reaction.

## 18. Spherocytosis:

A. is due to an inherited mutation in the hemoglobin alpha chain gene.

B. results in autosplenectomy.

C. typically causes death of the patient before 10 years of age.

Dis cured following splenectomy.

E.) is most often due to a mutation in the ankyrin gene.

19.	Iron deficiency anemia typically results in:
	A. a normochromic, normocytic anemia.  B. a normochromic, microcytic anemia.  C. a hypochromic, microcytic anemia.  D. a hypochromic, macrocytic anemia.  E. a hyperchromic, macrocytic anemia.
20.	Greater than normal numbers of circulating eosinophils are typically observed in:
Anama 21.	A. viral infections.  B. patients with allergic reactions.  C. patients with acute periapical abscesses.  D. tuberculosis.  E. emphysema.  A 13-year-old boy has a history of repeated transfusions in order to overcome a profound anemia. He is developing hemochromatosis. When the disease was first diagnosed in infancy, he demonstrated a "hair-on-end" appearance on lateral skull radiographs. Which of the following is the most likely molecular defect in this patient?  Crew cut
22.	A. An inability to maintain glutathione levels in red blood cells  B. An inability to absorb vitamin B12 from the GI tract  C. A deficiency of von Willebrand factor  DA lack of synthesis of the hemoglobin beta chains that ascertain  E. A lack of synthesis of all 4 of the hemoglobin alpha chains.  Which of the following types of anemia is typically associated with minimal bone marrow hyperplasia?
	A. Iron deficiency anemia  B. Sickle cell anemia  C. Thalassemia major  D. Sévere immune-mediated hemolytic anemia  E. HbH disease
23.	A 25-year-old woman had run across a playground after her small child when she developed multiple points of pain in her legs and chest. A recent imaging study indicated that her spleen was much reduced in size. Which of the following best describes her disease?
	A. She has a t(14:18) translocation. Follows.  There is markedly diminished synthesis of all her hemoglobin alpha chains.  C. There is a specific point mutation at the 6th position of both hemoglobin beta chains.  D. There is a specific point mutation at the 6th position of one hemoglobin beta chain.  E. There is markedly diminished synthesis of glucose-6-phosphate dehydrogenase.
The section for the section of the s	6
The second secon	

A. thalassemia minor.	
Ba deficiency in vitamin B12.  C. anemia of chronic disease.	
c. anoma of chrome disease.	Dandinde myeloms
D. a hypochromic, microcytic anemia. E. polycythemia vera	
A 63-year-old man has been diagnosed with a ch	CML
constant producing large numbers of neutronhile	enginophile and immediate
What chromosomal translocation is characteristic	of this type of leukemia?
At(9;22) CML	
B. t(14;18)	
C. t(5;19)	
D. t(7;9)	H. Cymmogolavirus
E. t(3;21)	rolavab ami maronivi Moznovilos A. 11
Which of the following is an important cause of	lisseminated intravascular coagulation?
A. Polycythemia vera	lyngia nodes revens cloud prolif
B. A deficiency of von Willebrand factor	
C. Thalassemia major	
D. Saddle embolus	
Post-partum obstetric complications	
Which of the following diseases is characterized by	ny normal DT and DTT named alata
numbers and normal bleeding time?	normai T and F 11, normai platelet
A Deficiency of vitamin C	
B. Hemophilia B×	
C. Deficiency of von Willebrand factor	
D. Autoimmune thrombocytopenia	
E. Deficiency of factor VII	C. amyloid deposition.
	SBE
61-year-old woman has been diagnosed with sul	pacute hacterial endocorditie Which and
ollowing statements is most correct regarding her	disease?
A TY-1-	vindian's 6100F
A. Her heart was normal prior to the infection.	disease? viridians Group strep
The infection is due to Staphylococcus aureu	
She had abnormal cardiac valves prior to the	infaction
D. She is most likely an intravenous drug abuse	
E. She is experiencing high fever associated with	h myocardial absoesses

29.	A 56-year-old man has been diagnosed with <u>Bence-Jones protein</u> and has round, punched- out radiolucencies in his calvarium on lateral skull radiographs. Your diagnosis is:	
$\bigcirc$	A. acute myelogenous leukemia. A. A. B. Burkitt lymphoma. C. diffuse large B cell lymphoma. Dimultiple myeloma. E. chronic myelogenous leukemia.	
30.	A 10-year-old boy in Ghana presents with an enlarging maxillary mass. A biopsy reveals a "starry sky" microscopic pattern. What virus is likely associated with this mass?	
B	Human papilloma virus HPV  B. Epstein-Barr virus EBV → B (111) Plasma cell  E. Varicella zoster virus  D. Coxsackievirus A  E. Cytomegalovirus	
S Sarah	A 49-year-old woman has developed several enlarged cervical lymph nodes bilaterally. Imaging studies reveal the disease process is widely spread confined to lymph nodes, and there is bone marrow involvement. A leukemic component is absent. A biopsy of one of the lymph nodes reveals clonal proliferation of B cells forming irregular follicles. Which of the following statements best describes this disease?	:
POLYPE	A. Chemotherapy will result in complete remission.  B. The disease is best treated by removing individual lymph nodes as they enlarge.  C. The cells typically have a translocation causing increased expression of the bcl-2 gence.  B. Gingival enlargement is very characteristic of this disease.  B. Gingival enlargement is very characteristic of this disease.  The diagnostic feature of Hodgkin lymphoma is:	2, _
B	A. Birbeck granules.  B. Reed-Sternberg cells  C. amyloid deposition.  D. night sweats.  E. a translocation involving the MYC gene.	

William Caracana

33. Prothrombin time (PT): A. is prolonged when there is a deficiency in factor IX. (B) is a laboratory measure of the effectiveness of the extrinsic and common pathways of coagulation. C. is prolonged in diseases that cause increased vascular wall fragility. D. is a laboratory measure of the effectiveness of platelets. E. is normal when there is a deficiency in prothrombin. 34. A deficiency in von Willebrand factor can lead to: 8 dotty factor A. decreased numbers of circulating platelets. B. spherocytosis. C. a macrocytic, hyperchromic anemia. D. disseminated intravascular coagulation. DIC E. a prolonged bleeding time. 35. Reticulocytosis: A. is an increase in circulating white blood cells observed in infectious mononucleosis. B. is an inherted defect in the cytoskeleton of red blood cells. C. is an inherited disease of platelets that prevents proper aggregation. Dis an increase in immature red blood cells in the circulation. E. is an increase in macrophages in the spleen caused by altered red blood cell shape. 36. A 50-year-old man has developed dyspnea and a barrel chest with difficulty exhaling. He has been a long-time smoker. Imaging studies reveal large bullous cavities in the lung. Extensive destruction of which component in the lung is responsible for these findings? A Elastin B. Collagen C. Hyaluronic acid D. Surfactant E. Fibronectin

37. A 58-year-old woman has developed <u>cor pulmonale</u>, with attendant pulmonary hypertension. She has hypoxemia. Radiographs reveal multiple small radiopacities in the lung lobes and a biopsy reveals extensive <u>granulomatous inflammation</u>. This woman is most likely suffering from:



A. microatelectasis.

Sarcoidori

B. pneumococcal pneumonia.

C. colon adenocarcinoma metastatic to the lung.

D. panacinar emphysema.

(E) restrictive lung disease

- 38. A 49-year-old woman presented to her dentist for evaluation of an ulcerative mass in the right posterior maxillary vestibule. Her teeth tested vital and there was little evidence of periodontal disease. She was sent to the oral surgeon for biopsy. The biopsy diagnosis was metastatic neoplasm of lung. She is a non-smoker. The primary cancer was relatively small and situated at the periphery of the lung. What type of lung cancer does she most likely have?
  - A. Well-differentiated squamous cell carcinoma of the lung

B. Fibrosarcoma

Thon smoken

C Adenocarcinoma of lung blandular

D. Small cell carcinoma of lunge

E. Undifferentiated, large cell carcinoma of the lung.

39. A 57-year-old man has been a long-time smoker and has recently developed hoarseness and slight cough and discomfort in his neck. Examination of his vocal cords reveals an ulcerated, fungating mass. A biopsy confirms cancer. What type of cancer is most common in this location?



A. Squamous cell carcinoma

B. Adenocarcinoma

C. Small-cell carcinoma — endo Fre

D. Fibrosarcoma

E. Chondrosarcoma

- 40. Which type of bronchogenic carcinoma is best treated with chemotherapy?
  - A. Bronchial carcinoma-in-situ
  - B. Undifferentiated, large-cell carcinoma

C Small-cell carcinoma

D. Adenocarcinoma

E. Squamous cell carcinoma

41. Which of the following cancers has a strong association	n with Epstein-Barr virus?	EB
A Bronchogenic squamous cell	Est Ditte that he was he what sub-	-27
2 B Nasopharyngeal carcinoma C. Laryngeal carcinoma		
C. Laryngeal carcinoma	o cymphone	
D. Adenocarcinoma of the lung	B Prograding	
E. Large-cell carcinoma of the lung		
E. Large-cen caremoma of the lung		
42 A 36-year old yromen bear and the	URTract	
42. A 36-year-old woman has a recent history of bronchopr	neumonia. She began to feel	better
paris maging studies levelated a Hilli confaining space	in the lune and an all	ax. A
biopsy revealed empyema. She is most likely suffering	from:	
A. an atypical form of pneumonia caused by mycopla	distress syndrome. What w	
B. metastatic carcinoma to the lung.	asma.	
C. malignant mesothelioma.		
D. centriacinar emphysema.		
Ly lung abscess.		
pronounced emphysema. An emphysematous space at the causing inspired air to get into the pleural space. Which event to follow?	of the following is the most	ruptured likely
A. Sarcoidosis		
B. Lung abscess		
C. Fibrinous pericarditis		
D. Compression atelectasis collapsed (ung	E Smoking	
E. Mesothelioma		
44. Which of the following lung diseases is <u>irreversible?</u>		
- VANDE		
A. Asthma		
B. Compression atelectasis		
C. Microatelectasis		
D. Contraction atelectasis		
E. Pleuritis		
45. Atypical pneumonia:		
A. is caused by sarcoidosis.		
B is usually caused by viruses or mycoplasma.		
is due to aspirating goodie		
is due to aspirating gastric contents.		
is usually limited to streptococcus pneumoniae infection.		
E. is usually limited to involving one entire lobe of the	lung.	3

	E. chronic bronchitis.	C. Microstelectaris     D. Contraction stelectaring
	C. malignant mesothelioma.  D metastatic bronchogenic carcinoma.	B. Compression at lectures
	B. pneumothorax.	
	A. extrinsic asthma.	Bronchogenic Careino
).	A 69-year-old man develops dyspnea and presents	the second secon
,		C Compression ataloguesis
	D. Radiation therapy	
	C. Diffuse interstitial fibrosis of the lung.	
	A. Berylliosis  B. Sarcoidosis Restrictive	
1	BOULDIN ST BULMOUNT ON VALLET STATES	cycollet of heave
FE	Which of the following is a major cause of chronic	obstructive lung disease?
	E. Chronic inflammation adjacent to alveolar sp	aces and asmow blo-may-20 A. J.
	D. Hyaline membranes	
	C. Fibrosis and scarring	
	B. Panacinar emphysema	
	A. Sarcoidosis	ARDS
	distress syndrome. What would a biopsy of her lun	g likely show 2
	and hypoxemia with signs of respiratory failure. Sh	e is diagnosed with acute respiratory
	treatment of a bad case of pneumococcal pneumoni	a sne suddenly develops acute dyspnea
iq.	A 51-year-old woman has a history of immunologic	cally-based disease. During drug
	SOL OF RESERVED AND SOLD SOLD OF THE SOLD	grant biroidina to wab faults
	E. Bradykinin	42. A 36-year old veomen has a red
	B. Platelet activating factor	
	C Leukotrienes	
	A. Histamine	

50. A 61-year-old man has a long history of smoking. F	or the past few years he has developed a
developed cor pulmonale and that the lining of his b	ring the past year. Studies reveal he has
numbers of mucous glands and goblet cells. Which	of the following diseased
likely have?	of the following diseases does he most
A. Repetitive attacks of acute asthma	
B. Adenocarcinoma of the lung	
Chronic bronchitis	
D. Empyema	
E. Systemic hypertension	
51. Laboratory blood tests of a patient who has typhoid following?	ever most likely show which of the
following?	most fixery show which of the
A Mariante A	
A. Thrombocytosis platelets  B. Eosinphilia Immune response  C. Leukemias in allergy  D. Polycythemia * weeks	
B. Eosinphilia mone response	
e. Leukemias on alleray	56. Patients who are winch of the
The state of the s	10. Fill this wife and which of a
P 2. Ecakopema.	
+ WBC'S	
52. Laboratory tests of a patient who has acute appendicit	tis most likely show which of the
following results?	Theptic ulost
A. Hyperamylasemia	
B. Hypernatremia	
C. Increased serum carcinoembryonic antigen	antacida or eats mone four. The re-
Deukocytosis + ws c ·s	
E increased serum alkaline phosphatase	
53. Gene analysis of a patient who has numerous adenoma	atous polyns of the colon shows
mutation of the APC gene. What is the most likely finding	in the oral region?
A. Multiple neurofibromas in the oral mucosa	
B. Recurrent aphthous ulcers	
C. Multiple osteomas in the mandible	
D. Enlargement of the submandibular gland	a sara, marangaanam danaw ay
E. Xerostomia with movable teeth	
	A Tox genic E coli

	oliferation of epithelial tissue forming strands and tely diagnosis?	Totalico Williams
bales	to united the broad and broadholes for incre	r sant pus stancentad nos podecaras
ham i	(A. Squamous cell carcinoma	
$\searrow$	B. Ulcerative colitis	
-)	e. Crohn disease	
	D. Diverticular disease	
	E. Hemorrhoids	Colombia to satisfact of the satisfact o
55	5. What is the most common cause for esophagea	Lyarices to develop?
		Posticuladia amenaka 2
	A. Pulmonary hypertension	
	Alcoholic cirrhosis!	
	C. Heavy cigarette smoking	
7	D. Voice abuse	
	E. High fiber diet	
56	6. Patients who have which of the following cond	itions most likely reveal pernicious anemia?
		megalorlast
	A. Acute erosive gastritis	DAIA
2	B. Chronic autoimmune gastritis	2 South Provide I C?
	E. Bacillary dysentery	
	E. Dacillal v uvschici v	Proceedings of the control of the co
		Syllogor gniwolicit
ノ 	D. Peptic ulcer E. Stress ulcer	following results?
	D. Peptic ulcer E. Stress ulcer	
シ 57	D. Peptic ulcer E. Stress ulcer 7. A 35-year-old man has had epigastric pain for	over 1 year. The pain is relieved if he takes
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for chacids or eats more food. The result of a urea bread.	over 1 year. The pain is relieved if he takes
an	D. Peptic ulcer E. Stress ulcer 7. A 35-year-old man has had epigastric pain for	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for entacids or eats more food. The result of a urea breathologic condition this man has?	over 1 year. The pain is relieved if he takes
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a tracids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a stacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for chacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a tracids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia B. Acute erosive gastritis  C. Celiac disease D. Viral gastroenteritis	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a tracids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia B. Acute erosive gastritis C. Celiac disease	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a stacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely
an pa	D. Peptic ulcer E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a tracids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia B. Acute erosive gastritis  C. Celiac disease D. Viral gastroenteritis	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely by the pain is relieved if he takes eath test is positive. What is the most likely by the pain is relieved if he takes eath test is positive. What is the most likely by the pain is relieved if he takes eath test is positive. What is the most likely by the pain is relieved if he takes eath test is positive. What is the most likely by the pain is relieved if he takes eath test is positive.
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for entacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  E. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer  8. Which microorganism is the causative factor for a major risk factor for the development of adenotic adenotic stress of the development of adenotic stress.	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely or chronic bacterial gastritis that subsequently
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for entacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer  8. Which microorganism is the causative factor for a major risk factor for the development of adenoted.  A. Toxigenic E. coli	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely or chronic bacterial gastritis that subsequently
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a stacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer  8. Which microorganism is the causative factor for a major risk factor for the development of adenose A. Toxigenic E. coli  B. Adenovirus	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely or chronic bacterial gastritis that subsequently
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for entacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer  8. Which microorganism is the causative factor for a major risk factor for the development of adenoted A. Toxigenic E. coli  B. Adenovirus  C. Staphylococcus aureus	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely or chronic bacterial gastritis that subsequently
an pa	D. Peptic ulcer  E. Stress ulcer  7. A 35-year-old man has had epigastric pain for a stacids or eats more food. The result of a urea breathologic condition this man has?  A. Esophageal achalasia  B. Acute erosive gastritis  C. Celiac disease  D. Viral gastroenteritis  E. Peptic ulcer  8. Which microorganism is the causative factor for a major risk factor for the development of adenose A. Toxigenic E. coli  B. Adenovirus	over 1 year. The pain is relieved if he takes eath test is positive. What is the most likely or chronic bacterial gastritis that subsequently

37	59. A patient who has peptic ulcer is most complications?	t likely to develop which of the following	
	Alloweters is the backless vis	S Unconjugated hyperbilishinguna is most like	
	A Hematemesis vomit bloo	a sal the opposite the sales of	
	B. Fat malabsorption intertine		
	C. Hepatic metastasis		
,	D. Paraneoplastic syndrome		
	E. Vitamin B12 deficiency	himself and the	
1	60. A woman experiences severe diarrhea ikely pathologic condition she has?	whenever she eats bread or muffin. What is the	most
	A. Acute erosive gastritis	Statemer Shared to normality A . X	
~	B. Chronic autoimmune gastritis	· (B) impalies	
/ 1	(C) Celiac disease Gluster	Color S Secretary vers thrombours.	
( ,	D. Ulcerative colitis		
	E. Viral gastroenteritis		
6	1. Chronic active hepatitis is least likely a	associated with:	
	A drug-induced hepatitis.		
	autoimmune hepatitis.		
	2. hepatitis B virus infection.	3. massive gestrointestinal bleeding	
	D' henetitis D views infection.	C. marked reduction in calonic intake.	
	D. hepatitis D virus infection.		
	hepatitis E virus infection.		
62	2. The second most common cause of cirr	hosis in the United States is:	
		William County and Cou	
	A. post-necrotic cirrhosis.		
d	alcoholic cirrhosis. 45+		
( )	C) cryptogenic cirrhosis.		
	D. biliary cirrhosis.		
	E. hemochromatosis.		
63	to 67. Match the following answers with	statements:	
^	A Chronic persistent hepatitis	to beauthbost on vice socie vincustidure i suc	
Med	B. Chronic active hepatitis		
NA	2. Alcoholic hepatitis	A Departure A virus Acrast - Over 1	
(4)	Enlarinant la serie	B. Broadills B virus - Forest	
7	D. Fulminant hepatic necrosis $\leq p$		
	E. Cirrhosis		
Dx 62	Chronic inflormation Control	E. begetitis E varus.	
۲۱ ۵۵.	Chronic inflammation of portal triads w	orth preservation of limiting plate	
D 04.	Extensive confluent hepatocyte necrosis	s with isolated islands of preserved parenchyma	Ü
V			7
			15
		The state of the s	The second

68. Unconjugated hyperbilirubinemia is most like	conjugate
A. gallstones.	- no cajugati
B.) hemolytic anemia. → RBC'S	croyne
Dubin Johnson syndrome.	
D. biliary atresia.	
E. carcinoma of the head of the pancreas.	Ob. A worden experience es ser ere crariera
69. Peliosis hepatis is associated with:	
A. dilatation of hepatic sinusoids.	A Acete eroseve garrings
A / NO	
c. hepatic vein thrombosis.	
hepatitis C infection.  piecemeal necrosis.	
piecemeal necrosis.	
70. Conjugated hyperbilirubinemia is most likely	produced by:
As homolytic anomia	(A) drug-induced hepatitis.
At hemolytic anemia.  B. massive gastrointestinal bleeding.	Li. suroimmune hepsticia
C. marked reduction in caloric intake.	S. hepatitis B virus infection.
D carcinoma of the head of the pancreas.	
E. Crigler Najjar syndrome.	ate doites in wire a attungant E
71. Hepatic failure is associated with:	
A homouphyminomia	
A. hyperalbuminemia	
B hypercoagulable states.	
C. esophageal varices.	
D. splenomegaly.	
E. encephalopathy.	
72. Three weeks after dining at the Greasy Spoor	n Cafe, a 24 year old develops hepatitis. The
cafe is subsequently closed by the Department of	
A hepatitis A virus. Recal-oral	B. Chronic acrive hepatitis
B. hepatitis B virus. → blood	
C. hepatitis C virus> Drug	
D. hepatitis D virus m s	A Circhosia
E. hepatitis E virus.	X 63 Chronic inflaton arion of portal triads of

73. A previously healthy 6 year old boy develops a fever of 100 degrees C, attributed to a viral infection. He is treated with aspirin. After seeming to recover, he begins to vomit, becomes comatose and dies 24 hours later. The significant autopsy finding is most likely:

A. micronodular cirrhosis.

B. perforated gastric ulcer.

C. fatty liver. D. pyloric stenosis.

E. esophageal varices.

74. The likelihood of a patient with hepatitis A developing a chronic hepatitis is:

A) 0.

B. about 10%.

C. about 30%.

D. about 50%.

E. almost 100%.

75. A 35 year old woman with pruritus, elevated anti-mitochondrial antibodies, and increased alkaline phosphatase most likely suffers from:

A. hemochromatosis.

B. alpha-1-antitrypsin deficiency.

© primary biliary cirrhosis.

D. Wilson's disease.

E. primary sclerosing cholangitis.

76 to 80. Match the following answers with statements:

A. Wilson's disease

B. Hemochromatosis > Fe build up

C. Primary biliary cirrhosis

D. Alpha -1-antitrypsin deficiency

E. Budd-Chiari Syndrome

C 76. Anti-mitochondrial antibody. C

A. Disorder of copper metabolism A.

8 78. HLA-A3 marker of susceptibility B

6.79. Hepatic vein thrombosis E

80. Liver disease and emphysema D







Inflammation...
Nasty nasty
Stuff... Seine demonstration of the Breath and