1. Purulent mediastinitis is diagnosed at a 63-year-old patient. What diseases from the stated below CANNOT cause the purulent mediastinitis?
   A. Cervical lymphadenitis
   B. Deep neck phlegmon
   C. Perforation of the cervical part of the esophagus
   D. Perforation of the thoracic part of the esophagus
   E. Iatrogenic injury of the trachea

2. For the persons who live in a hot area after an accident at a nuclear object, the greatest risk within the first decade is represented by cancer of:
   A. Thyroid gland
   B. Skin
   C. Reproduction system organs
   D. Breast
   E. Lungs

3. A 60-year-old woman, mother of 6 children, developed a sudden onset of upper abdominal pain radiating to the back, accompanied by nausea, vomiting, fever and chills. Subsequently, she noticed yellow discoloration of her sclera and skin. On physical examination the patient was found to be febrile with temp of 38.9°C, along with right upper quadrant tenderness. The most likely diagnosis is:
   A. Choledocholithiasis
   B. Benign biliary stricture
   C. Malignant biliary stricture
   D. Carcinoma of the head of the pancreas
   E. Choledochal cyst

4. 4 days ago a 32-year-old patient caught a cold: he presented with sore throat, fatigue. The next morning he felt worse, developed dry cough, body temperature rose up to 38.2°C, there appeared mucopurulent expectoration. Percussion revealed vesicular resonance over lungs, vesicular breathing weakened below the angle of the right scapula, fine sonorous and sibilant wheezes. What is the most likely diagnosis?
   A. Focal right-sided pneumonia
   B. Bronchial asthma
   C. Acute bronchitis
   D. Pulmonary carcinoma
   E. Pulmonary gangrene

5. A 45-year-old woman, mother of four children, comes to the emergency room complaining of a sudden onset of the epigastric and right upper quadrant pain, radiating to the back, accompanied by vomiting. On examination, tenderness is elicited in the right upper quadrant, bowel sounds are decreased, and laboratory data shows leukocytosis, normal serum levels of amylase, lipase, and bilirubin. The most likely diagnosis is:
A. Acute cholecystitis  
B. Perforated peptic ulcer disease  
C. Myocardial infarction  
D. Sigmoid diverticulitis  
E. Acute pancreatitis

6. During an operation for presumed appendicitis the appendix was found to be normal; however, the terminal ileum is evidently thickened and feels rubbery, its serosa is covered with grayish-white exudate, and several loops of apparently normal small intestine are adherent to it. The most likely diagnosis is:
A. Crohn’s disease of the terminal ileum  
B. Perforated Meckel’s diverticulum  
C. Ulcerative colitis  
D. Ileocecal tuberculosis  
E. Acute ileitis

7. A 16-year-old patient who has a history of intense bleedings from minor cuts and sores needs to have the roots of teeth extracted. Examination reveals an increase in volume of the right knee joint, limitation of its mobility. There are no other changes. Blood analysis shows an inclination to anaemia (Hb- 120 g/l). Before the dental intervention it is required to prevent the bleeding by means of:
A. Cryoprecipitate  
B. Epsilon-aminocapronic acid  
C. Fibrinogen  
D. Dried blood plasma  
E. Calcium chloride

8. A 44-year-old patient complains about difficult urination, sensation of incomplete urinary bladder emptying. Sonographic examination of the urinary bladder near the urethra entrance revealed an oval well-defined hyperechogenic formation 2x3 cm large that was changing its position during the examination. What conclusion can be made?
A. Concrement  
B. Malignant tumour of the urinary bladder  
C. Urinary bladder polyp  
D. Prostate adenoma  
E. Primary ureter tumour

9. A 29-year-old female patient complains of dyspnea, heaviness and chest pain on the right, body temperature rise up to 37, 2ºC. The disease is associated with a chest trauma received 4 days ago. Objectively: skin is pale and moist. Ps- 90 bpm, regular. Palpation reveals a dull sound on the right, auscultation reveals significantly weakened vesicular breathing. In blood: RBCs - 2, 8 ·10¹²/l, colour index - 0,9, Hb-100 g/l, WBCs - 8,0  ·10⁹/l, ESR - 17 mm/h. What results of diagnostic puncture of the pleural cavity can be expected?
A. Haemorrhagic punctate  
B. Chylous liquid
10. A female patient has been suffering from pain in the right subcostal area, bitter taste in the mouth, periodical bile vomiting for a month. The patient put off 12 kg. Body temperature in the evening is 37.6°C. Sonography revealed that bile bladder was 5.5x2.7 cm large, its wall - 0.4 cm, choledochus - 0.8 cm in diameter. Anterior liver segment contains a roundish hypoechoic formation up to 5 cm in diameter and another two up to 1.5 cm each, walls of these formations are up to 0.3 cm thick. What is the most likely diagnosis?
A. Alveolar echinococcus of liver
B. Liver cancer
C. Liver abscess
D. Cystous liver cancer
E. Paravesical liver abscesses

11. A 55-year-old male had been treated at the surgical department for acute lowerextremity thrombophlebitis. On the 7th day of treatment he suddenly developed pain in the left part of chest, dyspnea and cough. Body temperature was 36.1°C, respiratory rate - 36/min. The patient was also found to have diminished breath sounds without wheezing. Ps- 140/min, thready. AP- 70/50 mm Hg. The ECG shows Q-S1 syndrome. What is the most likely diagnosis?
A. Pulmonary embolism
B. Myocardial infarction
C. Cardiac asthma
D. Bronchial asthma
E. Pneumothorax

12. In autumn a 25-year-old patient developed stomach ache arising 1.5-2 hours after having meals and at night. He complains of pyrosis and constipation. The pain is getting worse after consuming spicy, salty and sour food, it can be relieved by means of soda and hot-water bag. The patient has been suffering from this disease for a year. Objectively: furred moist tongue. Abdomen palpation reveals epigastrial pain on the right, resistance of abdominal muscles in the same region. What is the most likely diagnosis?
A. Duodenal ulcer
B. Chronic cholecystitis
C. Diaphragmatic hernia
D. Stomach ulcer
E. Chronic pancreatitis

13. A 32-year-old male patient has been suffering from pain in the sacrum and coxofemoral joints, painfulness and stiffness in the lumbar spine for a year. ESR-56
mm/h. Roentgenography revealed symptoms of bilateral sacroileitis. The patient is the carrier of HLA B27 antigen. What is the most likely diagnosis?

A. **Ankylosing spondylitis**  
B. Coxarthritis  
C. Rheumatoid arthritis  
D. Reiter’s disease  
E. Spondylisis

14. A 65-year-old patient complains of gradual worsening of the left eye vision during 10 months. On physical examination: acuity of vision of the left eye is 0.01, not correctable. The eye is quiet, pupil of the eye is grayish, reflex from the eyeground is absent. Intraocular pressure is 18 mm/Hg. What is the most probable preliminary diagnosis?

A. **Senile cataract**  
B. Open-angle glaucoma  
C. Disorder of blood circulation in retina vessels  
D. Leukoma of the cornea  
E. Exfoliation of the retina

15. On the 4th day after recovering from a cold a patient was hospitalized with complaints of solitary spittings of mucoid sputum. On the 2nd day there was a single discharge of about 250 ml of purulent blood-streaked sputum. Objectively: the patient’s condition is moderately severe. Respiratory rate - 28-30/min, Ps - 96 bpm, AP - 110/70mmHg. Respiration above the left lung is vesicular, weak above the right lung. There are moist rales of different types above the lower lobe and amphoric breath near the angle of scapula. What is the most likely diagnosis?

A. **Acute pulmonary abscess**  
B. Exudative pleuritis  
C. Acute focal pneumonia  
D. Pleural empyema  
E. Pyopneumothorax

16. 4 hours after having meals a patient with signs of malnutrition and steatorrhea experiences stomach pain, especially above navel and to the left of it. Diarrheas take turns with constipation lasting up to 3-5 days. Palpation reveals moderate painfulness in the choledochopancreatic region. The amylase rate in blood is stable. X-ray reveals some calcifications located above navel. What is the most likely diagnosis?

A. **Chronic pancreatitis**  
B. Chronic gastroduodenitis  
C. Duodenal ulcer  
D. Zollinger-Ellison syndrome  
E. Chronic calculous cholecystitis

17. A 54-year-old patient complains of weakness, weight loss despite the unchanged appetite, frequent urination, skin itch for six months. Some time ago the patient underwent treatment for furunculosis. She hasn’t been examined recently.
Objectively: malnutrition, dry skin with signs of scratching. Small lymph nodes can be palpated in the axillary regions. Changes in the internal organs are absent. What testing must be administered in the first place?

A. **Blood sugar test on an empty stomach**
B. Complete blood count
C. Endoscopy of stomach
D. Lymph node biopsy
E. Blood sterility testing

18. A woman consulted a doctor on the 14th day after labour about sudden pain, hypereremy and induration of the left mammary gland, body temperature rise up to 39°C, headache, indisposition. Objectively: fissure of nipple, enlargement of the left mammary gland, pain on palpation. What pathology would you think about in this case?

A. **Lactational mastitis**
B. Lacteal cyst with suppuration
C. Fibrous adenoma of the left mammary gland
D. Breast cancer
E. Phlegmon of mammary gland

19. A 67-year-old male complains of dyspnea on exertion, attacks of retrosternal pain, dizziness. He has no history of rheumatism. Objectively: pale skin, acrocyanosis. There are rales in the lower parts of lungs. There is systolic thrill in the II intercostal space on the right, coarse systolic murmur conducted to the vessels of neck. AP - 130/90 mm Hg, heart rate - 90/min, regular rhythm. The liver extends 5 cm under the edge of costal arch, shin edemata are present. Specify the assumed valvular defect:

A. **Aortic stenosis**
B. Pulmonary artery stenosis
C. Mitral insufficiency
D. Ventricular septal defect
E. Tricuspid regurgitation

20. A 32-year-old female complains of dizziness, headache, palpitation, tremor. For the last several months she has been under outpatient monitoring for the increased arterial pressure. Since recently such attacks have become more frequent and severe. Objectively: skin is covered with clammy sweat, tremor of the extremities is present. HR - 110/min, AP - 220/140 mm Hg. Heart sounds are weakened. In blood: WBCs - 9, 8 10^9/l, ESR - 22 mm/h. Blood glucose - 9,8 millimole/l. What disease is the most likely cause of this crisis?

A. **Pheochromocytoma**
B. Essential hypertension
C. Preeclampsia
D. Primary hyperaldosteronism
E. Diabetic glomerulosclerosis
21. On the 9th day after childbirth the obstetric patient developed high fever up to 38°C. She complains of pain in the right mammary gland. The examination revealed the following: a sharply painful infiltrate can be palpated in the right mammary gland, the skin over the infiltrate is red, subareolar area and nipple are swollen and painful. What is your diagnosis?
A. **Abscess of the right mammary gland**
B. Mastopathy
C. Cancer of the right mammary gland
D. Serous mastitis
E. Fibrous cystic degeneration of the right mammary gland

22. Development of chronic venous insufficiency of lower extremities depends on the functional condition of so-called musculovenous pump. This term refers to the following group of muscles:
A. **Shin muscles**
B. Abdominal wall muscles
C. Buttock region muscles
D. Thigh muscles
E. Foot muscles

23. A farmer hurt his right foot during working in a field and came to the emergency station. He doesn’t remember when he got last vaccination and he has never served in the army. Examination of his right foot revealed a contaminated wound up to 5-6 cm long with uneven edges. The further treatment tactics will be:
A. To **make an injection of tetanus anatoxin and antitetanus serum**
B. To make an injection of tetanus anatoxin
C. To make an injection of antitetanus serum
D. Surgical debridement only
E. To administer an antibiotic

24. A 50-year-old patient complains about having pain attacks in the right subcostal area for about a year. He pain arises mainly after taking fattening food. Over the last week the attacks occurred daily and became more painful. On the 3rd day of hospitalization the patient presented with icteritiousness of skin and scleras, lightcolored feces and dark urine. In blood: neutrophilic leukocytosis - 13,1 10⁹/l, ESR- 28 mm/h. What is the most likely diagnosis?
A. **Chronic calculous cholecystitis**
B. Chronic recurrent pancreatitis
C. Fatty degeneration of liver
D. Chronic cholangitis, exacerbation stage
E. Hypertensive dyskinesia of gallbladder

25. A 54-year-old female patient has been admitted to a hospital 12 days after the beginning of acute pancreatitis. Objectively: the patient is in grave condition. The body temperature is hectic. Ps - 112 bpm. The abdomen is swollen. Epigastrium
palpation reveals a very painful infiltration falling in the localization of pancreas. Abdominal cavity contains fluid. There is an edema of the left lumbar region. In blood: WBCs - 18·10^9/l. What is the required tactics of the patient’s treatment?

A. **Surgical treatment**  
B. Further conservative treatment  
C. Peritoneal dialysis  
D. Increase in antienzymes  
E. Massive antibacterial therapy

26. To replace the blood loss replacement 1000 ml of the same group of Rhesuscompatible donated blood was transfused to the patient. The blood was conserved by sodium citrate. At the end of hemotransfusion there appeared excitement, pale skin, tachycardia, muscles cramps in the patient. What complication should be suspected?

A. **Citrate intoxication**  
B. Citrate shock  
C. Allergic reaction  
D. Anaphylactic shock  
E. Pyrogenous reaction

27. A 68-year-old patient consulted a doctor about a tumour in her left mammary gland. Objectively: in the upper internal quadrant of the left mammary gland there is a neoplasm up to 2.5 cm in diameter, dense, uneven, painless on palpation. Regional lymph nodes are not enlarged. What is the most likely diagnosis?

A. **Cancer**  
B. Cyst  
C. Fibroadenoma  
D. Mastopathy  
E. Lipoma

28. A 65-year-old patient complains of pain in the lumbar spine, moderate disuria. He has been suffering from these presentations for about half a year. Prostate volume is 45 cm^3 (there are hypoechochogenic nodes in both lobes, capsule invasion). The rate of prostatespecific antigen is 60 ng/l. Prostate biopsy revealed an adenocarcinoma. Which of the supplemental examination methods will allow to determine the stage of neoplastic process in this patient?

A. **Computer tomography of pelvis**  
B. Roentgenography of lumbar spine  
C. Excretory urography  
D. Bone scintigraphy  
E. Roentgenography of chest

29. A patient complains of impaired far vision. Previously his eyes often turned red and hurt. Objectively: the eyes are not irritated, the cornea is transparent, anterior chambers are median deep, their moisture is transparent. The iris of the right eye has not changed in colour, its pattern is unchanged. The pupil is of irregular shape,
scalloped. Biomicroscopy of the crystalline lens reveals the areas of opacity and vacuoles. Make a diagnosis:

A. Complicated cataract of the right eye  
B. Senile cataract of the right eye  
C. Diabetic cataract of the right eye  
D. Tetanic cataract of the right eye  
E. Radiation cataract of the right eye

30. A 26-year-old patient complains of experiencing pain in the right hand for 4 days. The pain arose at the site of corns on the palmar surface at the base of the II and III fingers. Some time later the dorsum of hand became edematous. I and III fingers are half-bent in the interphalangeal joints, the hand looks like "rake". What is the most likely diagnosis?

A. Phlegmon of the second interdigital space of the right hand  
B. Adenophlegmon of the right hand  
C. Corn abscess of the right hand  
D. U-shaped phlegmon of the right hand  
E. Tendovaginitis

31. A 56-year-old patient complains of having persistent chest pain on the right for the last 2 months. The pain is not associated with respiration. He also complains of cough with bloodstreaked sputum, weakness, decreased performance, fatigue. Chest radiograph shows a globular shade of 4x6 cm connected to the root of the lung in the lower part of the right lung. What is the most likely diagnosis?

A. Peripheral lung cancer  
B. Metastasis  
C. Lung abscess  
D. Pneumonia  
E. Tuberculoma

32. A 30-year-old patient had deep burn covering 30% of body 30 days ago. Now he presents with continued fever, loss of appetite, night sweats. Burned surface weakly granulates. What is the stage of burn disease?

A. Septicotoxemia  
B. Primary burn shock  
C. Secondary burn shock  
D. Acute burn toxemia  
E. Convalescence

33. A 36-year-old man was delivered to the surgical department an hour after a road accident. His condition is getting worse: respiratory insufficiency is progressing, there are cardiac abnormalities. Clinical and roentgenological investigations revealed mediastinal displacement. What process has caused this complication?

A. Valvular pneumothorax  
B. Open pneumothorax  
C. Closed pneumothorax  
D. Subcutaneous emphysema
E. Mediastinitis

34. A 26-year-old male patient complains of piercing pain during breathing, cough, dyspnea. Objectively: to- 37.3°C, respiration rate - 19/min, heart rate = Ps- 92/min; AP- 120/80 mm Hg. Vesicular respiration. In the inferolateral parts of chest auscultation in both inspiration and expiration phase revealed noise that was getting stronger at phonendoscope pressing and can be still heard after cough. ECG showed no pathological changes. What is the most likely diagnosis?
A. Acute pleuritis
B. Intercostal neuralgia
C. Subcutaneous emphysema
D. Spontaneous pneumothorax
E. Pericarditis sicca

35. A 27-year-old patient with a knife stomach wound has been delivered to a hospital 4 hours after injury. Objectively: the patient is in grave condition. Ps- 120 bpm, weak. AP- 70/40 mm Hg. Laparotomy revealed a lot of liquid blood in the abdominal cavity. The patient has been found to have bleeding from the mesenteric vessels of the small intestine. Damage to hollow organs has not been revealed. What is the best way to restore the blood loss?
A. Autoblood reinfusion
B. Erythromass transfusion
C. Transfusion of washed erythrocytes
D. Transfusion of fresh frozen plasma
E. Rheopolyglucinum transfusion

36. Two hours ago a 38-year-old patient got pain in his right shin. He was diagnosed with popliteal artery embolism, acute arterial insufficiency of grade I. What is the most appropriate therapeutic tactics?
A. Embolectomy
B. Destruction of the embolus by the catheter
C. Resection of the popliteal artery
D. Bypass grafting
E. Amputation at the middle of shin

37. A 47-year-old female patient complains of leg heaviness, fatigue when standing and walking. This feeling disappears when she takes a horizontal position. Objectively: dilatation of the superficial veins of the left shin and thigh with pigmentation and trophic skin disorders. What functional test should the examination be started with?
A. Trendelenburg’s test
B. Pratt test 2
C. Pratt test 1
D. Sheinis test
E. Perthes’ test
38. A child is being discharged from the surgical department after conservative treatment of invagination. What recommendations should doctor give to mother to prevent this disease recurrence?

A. **Strict following of feeding regimen**
B. Common cold prophilaxis
C. Feces observation
D. Gastro-intestinal disease prevention
E. Hardening of the child

39. A 40-year-old patient underwent an operation for a lumbar phlegmon. Body temperature rose again up to 38°C, he got intoxication symptoms, there was an increase of leukocyte number in blood. The wound that was nearly free from necrotic tissues and full of granulations started to discharge pus, the granulations turned pale. What complication developed in this patient?

A. **Sepsis**
B. Putrid phlegmon
C. Erysipelas
D. Allergic reaction
E. Erysipeloid

40. A 42-year-old builder consulted a doctor about a foot injury with a nail that he got in the morning of the same day. The wound was washed with water. Three years ago he was vaccinated against tetanus. Examination established satisfactory condition of the patient. The left foot was slightly edematic, there was a stab wound on the sole. In order to prevent tetanus it is primarily required to:

A. **Give an intravenous injection of 0,5 ml of tetanus anatoxin**
B. Give an intravenous injection of 1 ml of tetanus anatoxin, 3000 IU of antitetanus serum
C. Give an intravenous injection of 3000 IU of antitetanus serum
D. Treat the wound with suds
E. Administer a course of antibiotic therapy

41. Half an hour ago a 67-year-old patient with a hernia picked up a heavy object, which caused acute pain in the region of hernia protrusion, the hernia couldn’t be reduced. Objectively: the hernia in the right inguinal region is roundish, tight, moderately painful; during palpation it was reduced back to the cavity, the pain was gone. Specify the further medical tactics:

A. **Inpatient surveillance**
B. Immediate hernioplasty
C. Immediate laparotomy
D. Planned hernioplasty a month later
E. Planned hernioplasty a year later

42. A 43-year-old male patient undergoing treatment for peptic ulcer complains of weakness, dizziness, coffee-ground vomiting, melena. After administration of haemostatics the patient’s condition has not improved, fresh blood has shown up in
the vomit, skin bruises of different sizes have appeared. In blood: thrombocytes - 50 \(10^9/l\), Lee-White clotting time - 35 minutes, APTT - 80 seconds. In this case it is most rational to administer the following preparation:

A. **Fresh frozen plasma**
B. Heparin
C. Fibrinogen
D. Rheopolyglucinum
E. Vikasol

43. After the pneumatic dilatation of oesophageal stricture a patient developed acute retrosternal pain getting worse when throwing the head back and swallowing. Objectively: dilatation of the neck veins, dropped beat pulse, signs of purulent intoxication, oliguria, emphysema of the upper portion of chest. What disease can be suspected?

A. **Suppurative mediastinitis**
B. Thrombosis of the superior vena cava
C. Pleural empyema
D. Acute myocardial infarction
E. Spontaneous pneumothorax

44. An 8-month-old baby has had problems with nasal breathing and mucopurulent discharge from the nose for a week. Examination reveals a rhinodema, muco-purulent discharges from the middle nasal meatus as well as on the back of pharynx. What disease are these symptoms most typical for?

A. **Ethmoiditis**
B. Sphenoiditis
C. Maxillary sinusitis
D. Frontitis
E. Hemisinusitis

45. A 35-year-old patient complains of heartburn, sour eructation, burning, compressing retrosternal pain and pain along the esophagus rising during forward bending of body. The patient hasn’t been examined, takes Almagel on his own initiative, claims to feel better after its taking. Make a provisional diagnosis:

A. **Gastroesophageal reflux disease**
B. Functional dyspepsia
C. Cardiospasm
D. Gastric ulcer
E. Duodenal ulcer

46. A 35-year-old victim of a road accident has got an injury of the right side of his chest. Objectively: respiration rate - 28-30/min, respiration is shallow, restricted respiratory excursion and acrocyanosis are present. Ps-110 bpm, AP- 90/60 mm Hg. Respiratory sounds over the right lung cannot be auscultated. Chest radiograph shows fractures of the VI-VII ribs on the right, the right pleural cavity contains both air and fluid, with the fluid at about the level of the V rib, the shadow of the mediastinum is displaced to the left. What first aid should be provided to the victim?
A. Puncture of the pleural cavity
B. Antibiotic administration
C. Vagosympathetic blockade
D. Artificial ventilation of lungs
E. Urgent thoracotomy

47. A 20-year-old patient complains of pain in the left lumbar region, arterial pressure rise up to 160/110 mm Hg. USI revealed that the structure and size of the right kidney were within age norms, there were signs of 3 degree hydronephrotic transformation of the left kidney. Doppler examination revealed an additional artery running to the lower pole of the kidney. Excretory urogram shows a narrowing in the region of ureteropelvic junction. Specify the therapeutic tactics:
   A. Surgical intervention
   B. Administration of spasmolytics
   C. Administration of ACE inhibitors
   D. Kidney catheterization
   E. Administration of β-blockers

48. A patient undergoing treatment for the left-sided destructive pneumonia presents with deterioration of his general condition, progressing dyspnea, cyanosis. Objectively: the left side of chest is not involved in respiration, breathing sounds cannot be auscultated. Radiograph shows a shadow reaching the 5 rib with a horizontal fluid level and a radiolucency above it, the mediastinum is displaced to the right. What is the medical tactics?
   A. Thoracostomy
   B. Open thoracotomy
   C. Endotracheal intubation
   D. Infusion and antibacterial therapy
   E. Emergency bronchoscopy

49. A 29-year-old patient complains of absent menstruation for a year, milk discharge from the nipples when pressed, loss of lateral visual fields. X-ray shows an expansion of the sella turcica. What is the most likely cause of this condition?
   A. Pituitary tumour
   B. Mammary tumour
   C. Functional disorder of the hypothalamic-pituitary-ovarian system
   D. Ovarian tumor
   E. Pregnancy

50. A 3-year-old male patient consulted a family doctor 2 months after he had been operated for an open fracture of brachial bone. Objectively: the patient’s condition is satisfactory, in the region of the operative wound there is a fistula with some purulent discharge, redness, fluctuation. X-ray picture shows brachial bone destruction with sequestra. What complication arose in the postoperative period?
   A. Posttraumatic osteomyelitis
   B. Hematogenic osteomyelitis
   C. Wound abscess
D. Posttraumatic phlegmon
E. Suture sinus

51. A 40-year-old female patient complains of having a bulge on the anterior surface of neck for 5 years. Objectively: Ps- 72 bpm, arterial pressure - 110/70 mm Hg, in the right lobe of thyroid gland palpation reveals a mobile 4x2 cm node, the left lobe is not palpable, the basal metabolic rate is 6%. What is the most likely diagnosis?
A. **Nodular euthyroid goiter**
B. Nodular hyperthyroid goiter
C. Riedel’s thyroiditis
D. Mixed euthyroid goiter
E. The median cervical cyst

52. A 60-year-old patient complains of nearly permanent sensation of heaviness and fullness in the epigastrium, that increases after eating, foul-smelling eructation, occasional vomiting with food consumed 1-2 days ago, weight loss. 12 years ago he was found to have an ulcer of pyloric channel. The patient has taken ranitidine for periodic hunger pain. The patient’s condition has been deteriorating over the last 3 months. Objectively: splashing sound in the epigastrium is present. What kind of complication is it?
A. **Pyloric stenosis**
B. Penetration of gastric ulcer
C. Functional pyloric spasm
D. Foreign body in the stomach (bezoar)
E. Malignization of gastric ulcer

53. A patient complains of retrosternal pain, difficult swallowing, over 10 kg weight loss within three months, general weakness. In blood: hypochromic anaemia, neutrophilic leukocytosis. In feces: weakly positive Gregersen’s reaction. On esophagram a filling defect with ill-defined serrated edges shows up along a large portion of the esophagus. What is the most likely diagnosis?
A. **Esophageal carcinoma**
B. Benign tumour
C. Esophageal achalasia
D. Peptic ulcer
E. Sideropenic dysphagia

54. A 2-year-old child in a satisfactory condition periodically presents with moderate proteinuria, microhematuria. USI results: the left kidney is undetectable, the right one is enlarged, there are signs of double pyelocaliceal system. What study is required to specify the diagnosis?
A. **Excretory urography**
B. Micturating cystography
C. Retrograde urography
D. Doppler study of renal vessels
E. Radioisotope renal scan
55. A 75-year-old male patient complains of slight pain in the right iliac region. The abdominal pain arose 6 days ago and was accompanied by nausea. Surgical examination revealed moist tongue, Ps- 76 bpm. AP- 130/80 mm Hg. Abdomen was soft, slightly painful in the right iliac region on deep palpation, the symptoms of the peritoneum irritation were doubtful. In blood: RBCs - 4, 0 · 10^{12}/l, Hb- 135 g/l, WBCs - 9, 5 · 10^9/l, stab neutrophils - 5%, segmentonuclear - 52%, lymphocytes - 38%, monocytes - 5%, ESR - 20 mm/h. Specify the doctor’s further tactics:
A. **Emergency operation for acute appendicitis**
B. Hospitalization, dynamic surveillance
C. Send the patient home
D. Refer the patient to a district therapist
E. Administration of additional examination: abdominal ultrasound, x-ray contrast study of the gastrointestinal tract

56. On the 10th day postpartum a puerperant woman complains of pain and heaviness in the left mammary gland. Body temperature is 38, 8°C, Ps- 94 bpm. The left mammary gland is edematic, the supero-external quadrant of skin is hyperemic. Fluctuation symptom is absent. The nipples discharge drops of milk when pressed. What is a doctor’s further tactics?
A. **Antibiotic therapy, immobilization and expression of breast milk**
B. Compress to both mammary glands
C. Inhibition of lactation
D. Physiotherapy
E. Opening of the abscess and drainage of the mammary gland

57. During self-examination a 22-year-old patient revealed a mammary tumour. Palpation revealed a firm, painless, freely mobile formation up to 2 cm, peripheral lymph nodes were not changed. USI results: in the superior external quadrant of the right mammary gland there was a big formation of increased echogenicity, sized 18x17 mm. The patient was provisionally diagnosed with fibroadenoma. What is a doctor’s further tactics?
A. **Surgical removal of the tumour prior to pregnancy**
B. Dynamic follow-up
C. Surgical treatment after pregnancy
D. Radical mastectomy
E. Nonsteroid anti-inflammatory drugs, oral contraceptives

58. A 78-year-old patient complains of severe pain in the lower abdomen, perineum and rectum; intense urge to urinate and inability to urinate without assistance. Abdomen palpation reveals a moderately painful globular formation above the pubis, there is percussion dullness over the formation. What is the most likely diagnosis?
A. **Acute urinary retention**
B. Chronic urinary retention
C. Chronic incomplete urinary retention
D. Paradoxical ischuria
E. Cystitis
59. Preventive examination of a 50-year-old woman revealed a dense tumour of the right mammary gland up to 5 cm in diameter without distinct outlines. The skin over the tumour looked like lemon peel. Palpation revealed a lymph node in the axillary region. What is the most likely diagnosis?
   A. **Breast cancer**  
   B. Lactocele  
   C. Diffuse mastopathy  
   D. Mastitis  
   E. Breast lipoma

60. A 38-year-old male patient complains of marked dyspnea that escalates with physical exertion. The problems, namely acute chest pain on the left and cough, arose unexpectedly 2 hours before at work. The pain abated, but there were progressing dyspnea, dizziness, pallor, cold sweat, cyanosis. Auscultation reveals the absence of vesicular breath sounds, radiograph shows a shadow on the left. What pathology can be suspected?
   A. **Left-sided spontaneous pneumothorax**  
   B. Pulmonary infarction  
   C. Pleurisy  
   D. Left-sided pneumonia  
   E. Lung abscess

61. What juice should be included in a complex drug and dietary therapy for patients with gastric ulcer or duodenal ulcer and increased gastric juice acidity in order to accelerate the ulcer healing?
   A. **Potato, potato and carrot**  
   B. Apple, birch and apple  
   C. Pumpkin  
   D. Cabbage, cabbage and carrot  
   E. Celery, parsley

62. A 64-year-old male patient has a 35-year history of chronic pancreatitis. In the last 5 years, he claims to observe the pain abatement, bloating, frequent bowel movements up to 3-4 times a day, grayish, glossy stool with undigested food rests, the progressive loss of body weight. Change of symptoms in the patient is due to overlay of:
   A. **Exocrine pancreatic insufficiency**  
   B. Endocrine pancreatic insufficiency  
   C. Lactase deficiency syndrome  
   D. Irritable bowel syndrome  
   E. Chronic enterocolitis

63. During the doctor’s round, a 56-year-old male patient with decompensated cirrhosis complains of dizziness, palpitations, moving black specks seen before the eyes, general weakness. The patient is pale, Ps- 110/min, AP- 90/50 mm Hg. What complication is most likely to have occurred in the patient?
A. **Bleeding from esophageal varices**  
B. Hepatocellular insufficiency  
C. Hepatic encephalopathy  
D. Acute coronary syndrome  
E. Paroxysmal tachycardia  

64. A 57-year-old female patient complains of intense pain in the right hypochondrium irradiating to the right supraclavicular region. Skin and sclerae are icteric. There is tension and tenderness in the right hypochondrium on palpation. Body temperature is 38,8 °C. Blood test results: WBC - 11,2 · 10⁹ /l, total bilirubin - 112 mmol/l (conjugated - 86 mmol/l, unconjugated - 26 mmol/l). What is the most likely diagnosis?  
A. **Cholangitis**  
B. Acute pancreatitis  
C. Acute appendicitis  
D. Pancreatic tumor  
E. Perforated duodenal ulcer  

65. Examination of a 35-year-old patient with rheumatism revealed that the right heart border was 1 cm displaced outwards from the right parasternal line, the upper border was on the level with inferior margin of the 1st rib, the left border was 1 cm in from the left midclavicular line. Auscultation revealed atrial fibrillation, loud apical first sound, diastolic shock above the pulmonary artery. Echocardiocopy revealed abnormal pattern of the mitral valve motion. What heart disease is characterized by these symptoms?  
A. **Mitral stenosis**  
B. Mitral valve prolapse  
C. Mitral valve insufficiency  
D. Aortic stenosis  
E. Tricuspid valve insufficiency  

66. A 24-year-old male patient got a puncture injury below the Poupart’s ligament, which was accompanied by intense arterial bleeding. The best method to temporarily stop the bleeding in the patient would be:  
A. **Compression band**  
B. Esmarch’s tourniquet  
C. Maximum limb bending  
D. Compressing a blood vessel with a clamp  
E. Wound suturing  

67. A 15-year-old patient consulted a dermatologist about a painful lump in the armpit. Objectively: there is a walnut-sized node, lymphadenitis, infiltration of the surrounding tissues. The patient has been diagnosed with hidradenitis. What is the most likely causative agent of this disease?  
A. **Staphylococci**  
B. Streptococci  
C. Proteus vulgaris
D. Pseudomonas aeruginosa
E. Mixed infection

68. A 49-year-old male patient who had been scheduled for a surgery for gastric cancer underwent preoperative infusion therapy. Up to 3,0 liters of liquid was introduced into the right cubital vein. The following day, he felt a dragging pain in the right shoulder. Objectively: on the inner surface of the shoulder there is a longitudinal hyperemic zone, edema of skin, a tender cord. What complication occurred in the patient?
A. **Acute thrombophlebitis**
B. Venepuncture and edema of paravenous tissue
C. Paravenous tissue necrosis
D. Acute lymphangitis
E. Paravenous tissue phlegmon

69. A 22-year-old female patient has been delivered by an ambulance team to a surgical clinic with symptoms of acute intestinal obstruction. It is known from the past history that 2 years ago she was operated for acute destructive appendicitis. For two years, she has repeatedly complained of bloating and abdominal pain. Which of the following etiological factors has led to the intestinal obstruction in the patient?
A. **Abdominal adhesions**
B. Ileal diverticulum
C. Dolichosigma
D. Diet violation
E. Helminthiasis

70. An hour before an elective surgery, a 56-year-old patient of the surgical department got a dramatic increase in blood pressure, tachycardia, hand tremor. The patient is confused, anxious, depressed, fearful, is pessimistic about the operation outcome, refuses the surgery. What tactics should be chosen by a surgeon?
A. **Start the surgery after correction of blood pressure**
B. Isolate the patient
C. Predict the psychological state of the patient
D. Organize monitoring of the patient by medical personnel and mental health counselor
E. Organize monitoring of the patient by his family members

71. A 33-year-old female complains of escalating spastic pain in the abdomen after the psycho-emotional stress. The patient has intermittent bowel movements, that is 2-3 bowel movements after waking up alternate with constipation lasting for 1-2 days. Objectively: body weight is unchanged, there is moderate pain on palpation of the sigmoid colon. Hb- 130 g/l, WBC- 5,2 · 10^9 /l, ESR- 9 mm/h. Proctosigmoidoscopy causes pain due to spastic bowel condition, intestinal mucosa is not changed. In the lumen there is a lot of mucus. What is the most likely diagnosis?
A. **Irritable bowel syndrome**
B. Crohn’s disease
C. Non-specific ulcerative colitis
D. Acute bowel ischemia
E. Malabsorption syndrome

72. A 63-year-old male patient complains of cough with expectoration of mucous blood- streaked sputum, asthma, low-grade fever, general weakness. These presentations have been observed for 3 months. The patient has been a smoker since childhood. Objectively: t o - 37.4 °C, respiratory rate is 26/min, Ps- 82/min, rhythmic. AP- 130/85 mm Hg. There is limited breathing movement in the right side of chest cavity, as well as percussive dullness and diminished breath sounds. Radiograph shows a homogeneous opacity of the pulmonary field on the right with the mediastinum displacement to the affected side. What is the most likely diagnosis?
   A. Central lung cancer
   B. Pleural effusion
   C. Pleuropneumonia
   D. Pulmonary tuberculosis
   E. Bronchiectasis

73. A 48-year-old male patient complains of pain in the lower extremities, especially when walking, intermittent claudication, numbness in the fingers, cold extremities, inability to walk more than 100 meters. Sleeps with his leg lowered. The patient has been a smoker since he was 16, abuses alcohol, has a history of CHD. The left lower extremity is colder than the right one, the skin of extremities is dry, pedal pulse cannot be palpated, femoral pulse is preserved. What is the most likely diagnosis?
   A. Obliterating endarteritis
   B. Diabetic angiopathy
   C. Leriche syndrome
   D. Raynaud’s disease
   E. Deep thrombophlebitis

74. 2 weeks after having quinsy, a 26-year-old male patient got facial edemata, moderate pain in the sacrum. Objectively: body temperature is 37.5 o C, AP- 100/80 mm Hg. Urinalysis results: RBC- up to 100 fresh cells in per HPF, protein - 2.2 g/l, hyaline cylinders - up to 10 per HPF, relative density - 1002. What is the most likely diagnosis?
   A. Acute glomerulonephritis
   B. Nephroma
   C. Acute pyelonephritis
   D. Urolithiasis
   E. Chronic glomerulonephritis

75. A 39-year-old female patient complains of rapid fatigability, drowsiness, dry skin, hair loss, swelling of the face. A month ago, she underwent a surgery for thyrotoxicosis. The patient has the following gland dysfunction:
   A. Thyroid (hypothyroidism), due to inadequate operative technique
   B. Pituitary, due to a tumor
   C. Adrenal
   D. Parathyroid, due to the gland removal during surgery
76. A 42-year-old female patient complains of a dull pain in her left side, low-grade fever, accelerated painful urination in small portions. These presentations have been observed for three years. For a long time, the patient has had cystitis with frequent exacerbations, there is pulmonary tuberculosis in the past history. Urinalysis results: microscopic hematuria, leukocyturia. What is the most likely provisional diagnosis?

A. Renal tuberculosis  
B. Urolithiasis  
C. Chronic pyelonephritis  
D. Renal tumor  
E. Chronic cystitis

77. A 4-year-old boy had untimely vaccination. He complains of painful swallowing, headache, inertness, fever. Objectively: the child is pale, has enlarged anterior cervical lymph nodes, swollen tonsils with cyanotic hyperemia, tonsils are covered with gray-white pellicles which cannot be easily removed. When the pellicles are forcibly removed, the tonsils bleed. What is the most likely diagnosis?

A. Oropharyngeal diphtheria  
B. Lacunar tonsillitis  
C. Pseudomembranous tonsillitis  
D. Infectious mononucleosis  
E. Follicular tonsillitis

78. A 45-year-old male patient with acute abscess of the left lung has suddenly developed acute chest pain and dyspnea while coughing, tachycardia has increased. The control Ro-gram shows left lung collapse, the air in the left pleural cavity and a horizontal fluid level. What is the mechanism of this complication?

A. Abscess burst into the pleural cavity  
B. Bullae rupture of the left lung  
C. Inflammation spread to the visceral pleura  
D. Atelectasis of the left lung  
E. Acute cardiovascular insufficiency

79. A 24-year-old male patient had been diagnosed with class III diffuse toxic goiter. There is moderate hyperthyroidism. A surgery was suggested, and the patient agreed to it. What preoperative measures should be taken for prevention of thyrotoxic crisis in the postoperative period?

A. Administration of antithyroid drugs  
B. Minimally invasive surgical techniques  
C. Bed rest  
D. Detoxification therapy  
E. Administration of corticosteroids

80. A 66-year-old female patient has been admitted to a hospital for massive gross hematuria with release of shapeless blood clots, frequent painful urination. The patient also reports a moderate weight loss within 3-4 months. Gross hematuria that
was not accompanied by pain and dysuria first occurred three months ago for no apparent reason, and after a few days the bleeding subsided independently. What is the most likely diagnosis?
A. **Bladder tumor**
B. Urolithiasis
C. Renal tumor
D. Chronic cystitis
E. Acute cystitis

81. A 47-year-old female patient has an 8-year history of ulcerative colitis, has been treated with glucocorticoids. She complains of cramping pain in the umbilical region and left iliac region which has significantly increased during the past 2 weeks, diarrhea with mucus and blood 4-6 times a day, elevated body temperature up to 38 – 39 °C, headache and pain in the knee joints. Objectively: the patient is in moderate condition, Ps-108/min, AP-90/60 mm Hg; heart and lungs are unremarkable; the tongue is moist; abdominal muscle tone is significantly decreased; peristaltic noises are absent. What complication developed in the patient?
A. **Toxic dilatation of the colon**
B. Perforation of the colon
C. Enterorrhagia
D. Stricture of the colon
E. Colon carcinoma

82. A 40-year-old male patient has had heaviness in the epigastric region for the last 6 months. He has not undergone any examinations. The night before, he abused vodka. In the morning there was vomiting, and 30 minutes after physical activity the patient experienced dizziness and profuse hematemesis. What pathology should be suspected in the first place?
A. **Mallory-Weis’s syndrome**
B. Menetrier’s disease
C. Gastric ulcer
D. Perforated ulcer
E. Zollinger-Ellison syndrome

83. A 55-year-old patient complains of severe itching, burning and pain in the eyes, skin redness in the outer corners of the palpebral fissure. Objectively: skin around the outer corners of the palpebral fissure is macerated, eczematous, there are single moist cracks. Palpebral conjunctiva is hyperemic, quaggy. There are minor discharges in form of stringing mucus. What is the most likely diagnosis?
A. **Chronic conjunctivitis**
B. Acute conjunctivitis
C. Sty
D. Blepharitis
E. Atopic eyelid dermatitis
84. An 80-year-old patient complains of constantly urinating small amounts, a feeling of pressure in the lower abdomen. Objectively: there is a suprapubic spherical bulging with percussion dullness over it. What syndrome occurred in the patient?
A. **Paradoxical ischuria**
B. Urinary incontinence
C. Dysuria
D. Enuresis
E. Pollakisuria

85. A 56-year-old male patient has been delivered to the emergency department with frostbite on both feet. What aid should be rendered to the victim?
A. **Apply a bandage, give an injection of vasodilators**
B. Administer heart medications
C. Put the feet into hot water
D. Rub the feet with snow
E. Apply an alcohol compress

86. A 21-year-old male patient got a deep cut wound in his right thigh. In the emergency room a surgeon on duty performed primary debridement of the wound and primary wound closure with a suture. After 4 days, there appeared pain, redness, edema, purulent discharge from the wound gap, body temperature rose up to 39 o C . What kind of wound complication can you think of and what actions should be taken?
A. **Wound abscess, remove the sutures and drain the wound**
B. Infiltration, apply a hot compress
C. Erysipelas, prescribe antibiotics
D. Tetanus, active-passive immunization against tetanus
E. Lymphangitis, apply a hot compress

87. It has been suspected that a newborn has congenital diaphragmatic hernia (asphyctic incarceration). What study will allow to confirm the diagnosis?
A. **Plan radiography of the chest cavity**
B. Plan abdominal radiography
C. Irrigography
D. Pneumoirrigoscopy
E. Fibroesophagagastroduodenoscopy

88. A 46-year-old male patient complains of periodic epigastric pain that occurs at night. Objectively: HR- 70/min, AP- 125/75 mm Hg, tenderness in the epigastric region is present. EGD confirms duodenal ulcer of 0.6 cm in diameter. Test for H. Pylori is positive. Which of the given antisecretory drugs will be a compulsory element of the treatment regimen?
A. **Omeprazole**
B. Famotidine
C. Pirenzepine
D. Atropine
E. Maalox
89. A 29-year-old unconscious patient has been delivered to a hospital. Objectively: skin and mucous membranes are pale, cyanotic, breath sounds are dramatically diminished on the right and cannot be auscultated in the lower parts, at the level of the 6 rib along the anterior axillary line there is a wound hole with moderate bleeding and passage of air during inspiration. Radiography reveals a bullet in the pleural cavity. What is the medical tactics of choice?

A. Emergency thoracotomy  
B. Thoracoscopy with removal of bullet  
C. Converting a tension pneumothorax into a simple (open) pneumothorax  
D. Thoracostomy  
E. Tight bandage on a wound

90. As a result of a road accident a 45-year-old male patient got multiple injuries, namely closed fractures of the right humerus and the left antebrachial bones with a displacement of bone fragments, a closed blunt abdominal injury. The patient was delivered to the emergency department 30 minutes after the injury. Objectively: the skin is pale. AP: 90/20 mm Hg, there is pain and deformation at the fracture sites. Abdomen is tense, palpation causes severe pain, there is rebound tenderness (positive Blumberg’s sign). What is the treatment tactics of choice?

A. Urgent diagnostic laparotomy  
B. Infusion therapy to stabilize blood pressure  
C. Fracture immobilization, analgesia  
D. Local anesthetic blockade of fractures  
E. Additional tests to specify the diagnosis

91. A 23-year-old male patient consulted a doctor about pain occurring in the lower third of the thigh with weight bearing activities and unloaded. The patient denies any injuries to the region. Objectively: the skin is of normal color, deep palpation reveals pastosity and tenderness, movements of the knee joint are limited. Radiograph of the distal femoral metaepiphyseal region shows a zone of degradation and spicules. In blood: immature cells are present, there are no signs of inflammation. What is the most likely diagnosis?

A. Osteosarcoma  
B. Hyperparathyroid dystrophy  
C. Chronic osteomyelitis  
D. Multiple myeloma  
E. Marble bone disease

92. 4 weeks after a myocardial infarction, a 56-year-old male patient developed acute heart pain, pronounced dyspnea. Objectively: the patient’s condition is extremely grave, there is marked cyanosis of face, swelling and throbbing of neck veins, peripheral pulse is absent, the carotid artery pulse is rhythmic, 130 bpm, AP: 60/20 mm Hg. Auscultation of heart reveals extremely muffled sounds, percussion reveals heart border extension in both directions. What is the optimal treatment tactics for this patient?

A. Pericardiocentesis and immediate thoracotomy  
B. Oxygen inhalation
C. Puncture of the pleural cavity on the left
D. Conservative treatment, infusion of adrenomimetics
E. Pleural cavity drainage

93. A 47-year-old female patient complains of having pain on swallowing and
difficult passing of solid food for two months. The patient has taken to the liquid and
semi-liquid food. During the last week the liquid food has barely passed through.
General condition is satisfactory, the patient is undernourished, the appetite is
preserved, there is a fear of eating. What is the provisional diagnosis?
A. Esophageal carcinoma
B. Esophageal stricture
C. Esophageal foreign body
D. Esophageal varices
E. Esophageal achalasia

94. A 49-year-old male patient consulted a doctor about difficult swallowing, voice
hoarseness, weight loss. These symptoms have been gradually progressing for the last
3 months. Objectively: the patient is exhausted, supraclavicular lymph nodes are
enlarged. Esophagoscopy revealed no esophageal pathology. Which of the following
studies is most appropriate in this case?
A. Computed tomography of chest and mediastinum
B. X-ray of lungs
C. Multiplanar imaging of esophagus
D. Radioisotope investigation of chest
E. Ultrasound investigation of mediastinum

95. A 36-year-old male patient complains of having headache, obstructed nasal
breathing, purulent nasal discharge for 2 weeks. A month before, he had his right
maxillary premolar filled. Radiography revealed an intense opacity of the right
maxillary sinus. Diagnostic puncture revealed a large amount of thick malodorous
crumbly pus. What is the most likely diagnosis?
A. Chronic suppurative odontogenic sinusitis
B. Acute purulent sinusitis
C. Chronic purulent sinusitis
D. Chronic atrophic sinusitis
E. Tumor of the maxillary sinus

96. A patient with autoimmune thyroiditis accompanied by multinodular goiter
underwent the right lobe ectomy and subtotal resection of the left lobe. What drug
should be administered to prevent postoperative hypothyroidism?
A. L-thyroxine
B. Merkazolil
C. Iodomarin
D. Lithium drugs
E. Insulin
97. A 26-year-old male patient consulted a doctor about sore throat, fever up to 38.2 °C. A week before, the patient had quinsy, didn’t follow medical recommendations. On examination, the patient had forced position of his head, trismus of chewing muscles. Left peritonsillar region is markedly hyperemic, swollen. What is the provisional diagnosis?  
A. **Left-sided peritonsillar abscess**  
B. Meningitis  
C. Phlegmonous tonsillitis  
D. Pharyngeal diphtheria  
E. Tonsil tumour

98. A 21-year-old female patient has been hospitalized on an emergency basis because of severe dyspnea, pain in the left side of chest. Body temperature is 38.8 °C. The condition developed three days ago. Respiratory rate is 42/min, auscultation reveals shallow breathing. There is percussive dullness on the right starting from the middle of the blade, breath sounds cannot be heard. The left border of heart is 3 cm displaced outwards. Embryocardia is present, HR is 110/min. The right hypochondrium is painful on palpation. What urgent therapeutic measures should be taken in this situation?  
A. **Emergency puncture of the pleural cavity**  
B. Administration of penicillin antibiotics  
C. Injection of Lasix  
D. Injection of cardiac glycosides  
E. Transferring the patient to the thoracic surgery department

99. A 77-year-old male patient complains of inability to urinate, bursting pain above the pubis. The patient developed acute condition 12 hours before. Objectively: full urinary bladder is palpable above the pubis. Rectal prostate is enlarged, dense and elastic, well-defined, with no nodes. Interlobular sulcus is distinct. Ultrasonography results: prostate volume is 120 cm³, it projects into the bladder cavity, has homogeneous parenchyma. Prostate-specific antigen rate is of 5 ng/ml. What is the most likely disease that caused acute urinary retention?  
A. **Prostatic hyperplasia**  
B. Prostate carcinoma  
C. Sclerosis of the prostate  
D. Tuberculosis of the prostate  
E. Acute prostatitis

100. After having the flu, a 39-year-old male patient with a history of Addison’s disease developed a condition manifested by weakness, depression, nausea, vomiting, diarrhea, hypoglycemia. AP- 75/50 mm Hg. Blood test results: low corticosterone and cortisol, 13-oxycorticosteroids, 17-oxycorticosteroids levels. What condition developed in the patient?  
A. **Acute adrenal insufficiency**  
B. Acute gastritis  
C. Acute enterocolitis  
D. Collapse
E. Diabetes mellitus

101. In a cold weather, the emergency room admitted a patient pulled out of the open water. There was no respiratory contact with the water. The patient is excited, pale, complains of pain, numbness of hands and feet, cold shiver. Respiratory rate is 22/min, AP- 120/90 mm Hg, Ps- 110/min, rectal temperature is 34,5 °C. What kind of warming is indicated for this patient?

A. Passive warming
B. Infusion of 37 o C solutions
C. Hot compresses
D. Warm bath
E. Hemodialysis with blood warming

102. A week before, a 65-year-old male patient suffered an acute myocardial infarction. His general condition has deteriorated: he complains of dyspnea at rest, pronounced weakness. Objectively: edema of the lower extremities, ascites is present. Heart borders are extended, paradoxical pulse is 2 cm displaced from the apex beat to the left. What is the most likely diagnosis?

A. Acute cardiac aneurysm
B. Recurrent myocardial infarction
C. Acute pericarditis
D. Cardiosclerotic aneurysm
E. Pulmonary embolism

103. A 25-year-old patient works as a tractor driver. Four days ago, he got pain in the left axillary region, general weakness, fever up to 38 o C. He hadn’t sought medical help until a painful solid lump appeared in this region. Objectively: in the left axilla there is a very painful cone-shaped mass sized 3x2,5 cm, with a destruction in the center of the pointed vertex. The surrounding skin is hyperemic, there are purulent discharges. What is the most likely diagnosis?

A. Hydradenitis
B. Carbuncle
C. Furuncle
D. Lymphadenitis
E. Abscess

104. A 29-year-old female patient complains of dyspnea and palpitations on exertion. According to her mother, as a child she had heart murmur, did not undergo any examinations. Objectively: the patient has pale skin, Ps- 94/min, rhythmic. AP-120/60 mm Hg. In the II intercostal space on the left auscultation reveals a continuous rasping systolodiastolic murmur, diastolic shock above the pulmonary artery. Blood and urine are unremarkable. What is the most likely diagnosis?

A. Patent ductus arteriosus
B. Atrial septal defect
C. Ventricular septal defect
D. Aortarctia
E. Tetralogy of Fallot
105. A 62-year-old man addressed a urologist with complaints of frequent urination at night (5-6 times per night), sensation of incomplete voiding of the urinary bladder, pain in the lower abdomen, slow urination. Anamnesis: the II degree essential hypertension (peak BP is 160/100 mm Hg). Current case: the II degree enlargement of the prostate gland, PSA is 2.2 ng/ml. Select the drug suitable for long-term therapy of the patient’s combined pathology:
A. Doxazosin
B. Propranolol
C. Indapamide
D. Amlodipine
E. Captopril

106. A 36-year-old injured has been taken to the emergency station with open tibial fractures. Examination reveals bleeding: pulsating blood spurts out of the wound. What medical manipulations are required at this stage of medical care?
A. Apply a tourniquet on the thigh proximal to the source of bleeding and transport the patient to the operating room
B. Stop the bleeding by a compressive bandage and transport the patient to the operating room
C. Apply a tourniquet on the thigh distal to the source of bleeding and transport the patient to the operating room
D. Immobilize the fracture and transport the patient to the operating room
E. Transport the patient to the operating room

107. A 49-year-old male patient complains of retrosternal pain, heartburn, weight loss of 8 kg over the last year, constipation, weakness. The patient has been a smoker for 20 years, and has a 10-year history of gastroesophageal reflux disease. The patient is asthenic, has dry skin. EGD revealed an ulcer in the lower third of the esophagus and esophageal stricture accompanied by edema, hyperemia and multiple erosions of the mucosa. What study is required for more accurate diagnosis?
A. Biopsy of the esophageal mucosa
B. X-ray examination of the esophagus
C. Respiratory test for Helicobacter pylori
D. pH-metry of the esophagus and the stomach
E. Fecal occult blood test

108. A 57-year-old male patient had an attack of retrosternal pain that lasted more than 1.5 hours. Objectively: the patient is inert, adynamic, has pale skin, cold extremities, poor volume pulse, heart rate - 120/min, AP - 70/40 mm Hg. ECG shows ST elevation in II, III, aVF leads. What condition are these changes typical for?
A. Cardiogenic shock
B. Arrhythmogenic shock
C. Perforated gastric ulcer
D. Acute pericarditis
E. Acute pancreatitis
109. During the breast self-exam a 37-year-old female patient revealed a lump in the lower inner quadrant of her left breast. Palpation confirms presence of a mobile well-defined neoplasm up to 2 cm large. Peripheral lymph nodes are not changed. What is the way of further management?
A. Ultrasound examination of breasts, mammography, fine-needle aspiration biopsy
B. Anti-inflammatory therapy, physiotherapy
C. Radical mastectomy
D. Ultrasound monitoring of genitals during the entire course of antiestrogens therapy, systemic enzyme therapy, phytotherapy
E. Case follow-up

110. A 25-year-old female has a self-detected tumor in the upper outer quadrant of her right breast. On palpation there is a painless, firm, mobile lump up to 2 cm in diameter, peripheral lymph nodes are not changed. In the upper outer quadrant of the right breast ultrasound revealed a massive neoplasm with increased echogenicity sized 21x18 mm. What is the most likely diagnosis?
A. Fibroadenoma
B. Lactocele
C. Diffuse mastopathy
D. Mammary cancer
E. Mastitis

111. A 45-year-old male patient complains of acute pain in his right side irradiating to the right thigh and crotch. The patient claims also to have frequent urination with urine which resembles a meat slops. The patient has no previous history of this condition. There is costovertebral angle tenderness on the right (positive Pasternatsky’s symptom). What is the most likely diagnosis?
A. Urolithiasis
B. Acute appendicitis
C. Acute pyelonephritis
D. Acute cholecystitis. Renal colic
E. Acute pancreatitis

112. After a holiday in the Crimea, a 49-year-old male patient with a history of lung tuberculosis felt increased weakness, periodic dizziness, easing bowel movements with abdominal pain, the need for additional salting his meals. The patient has noted that his condition improves after some sweet tea and validol taken sublingually. Objectively: there is an intense darkening of skin, AP- 70/50 mm Hg, glycemia is 3,0 mmol/l. What is the possible cause of health deterioration?
A. Chronic adrenal insufficiency
B. Diabetes mellitus
C. Coronary artery disease
D. Chronic pancreatitis
E. Pulmonary tuberculosis
113. A 42-year-old male patient has been delivered to a hospital in a grave condition with dyspnea, cough with expectoration of purulent sputum, fever up to 39.5 °C. The first symptoms appeared 3 weeks ago. Two weeks ago, a local therapist diagnosed him with acute right-sided pneumonia. Over the last 3 days, the patient’s condition deteriorated: there was a progress of dyspnea, weakness, lack of appetite. Chest radiography confirms a rounded shadow in the lower lobe of the right lung with a horizontal fluid level, the right sinus is not clearly visualized. What is the most likely diagnosis?
A. **Abscess of the right lung**
B. Acute pleuropneumonia
C. Right pulmonary empyema
D. Atelectasis of the right lung
E. Pleural effusion

114. A 28-year-old male patient complains of sour regurgitation, cough and heartburn that occurs every day after having meals, when bending forward or lying down. These problems have been observed for 4 years. Objective status and laboratory values are normal. FEGDS revealed endoesophagitis. What is the leading factor in the development of this disease?
A. **Failure of the lower esophageal sphincter**
B. Hypersecretion of hydrochloric acid
C. Duodeno-gastric reflux
D. Hypergastrinemia
E. Helicobacter pylori infection

115. A 48-year-old female has been admitted to the gynecology department for pain in the lower right abdomen and low back pain, constipations. Bimanual examination findings: the uterus is immobile, the size of a 10-week pregnancy, has uneven surface. Aspirate from the uterine cavity contains atypical cells. What diagnosis can be made?
A. **Hysterocarcinoma**
B. Cervical cancer
C. Metrofibroma
D. Colon cancer
E. Chorionepithelioma

116. A 27-year-old male patient consulted a doctor about pain in the lower third of the thigh with weight bearing activities and unloaded. Two years ago, the patient underwent treatment in the casualty department for the open fracture of the lower third of femur. The fracture healed slowly, the healing process was accompanied by prulent inflammation. Objectively: edema of the lower third of the thigh, elevated local temperature. Radiograph shows signs of destruction and sequestration. What is the most likely diagnosis?
A. **Chronic post-traumatic osteomyelitis**
B. Osteosarcoma
C. Tuberculosis of femur
D. Hematogenous osteomyelitis
E. Multiple myeloma

117. A patient was delivered to a surgical department after a road accident with a closed trauma of chest and right-sided rib fracture. The patient was diagnosed with right-sided pneumothorax; it is indicated to perform drainage of pleural cavity. Pleural puncture should be made:
A. In the 2nd intercostal space along the middle clavicular line
B. In the 6th intercostal space along the posterior axillary line
C. In the 7th intercostal space along the scapular line
D. In the projection of pleural sinus
E. In the point of the greatest dullness on Percussion

118. A 35-year-old patient undergoing treatment for heart disorder in cardiological department has developed complaints of acute sudden pain in the epigastrium, temperature rise up to 38, 3°C. Blumberg’s and Razdolsky’s (abduction of femur) signs are positive. What necessitates surgical aid in the given case?
A. Progress as a surgical disease
B. Extent of congenital and acquired development disorders
C. Severity of the concomitant pathology
D. Urgent aid is required to save the patient’s life
E. Activity of the heart disorder

119. A patient has been hospitalised. The onset of the disease was gradual: nausea, vomiting, dark urine, acholic stool, yellowness of the skin and scleras. The liver is enlarged by 3 cm. Jaundice developed on the 14th day of the disease. The liver diminished in size. What complication of viral hepatitis caused deterioration of the patient’s condition?
A. Hepatic encephlopathy
B. Meningitis
C. Relapse of viral hepatitis
D. Cholangitis
E. Infectious-toxic shock

120. A 64-year-old woman has been suffering from diabetes mellitus for the last 14 years. Approximately 3 days ago the skin on the distal phalanx of the I toe on the left foot became cold and bluish-black in color. Mild pain is observed in the affected area. Pulse on the pedal arteries cannot be detected, pulse on the popliteal artery is retained. Glycemia is 12,4 mmol/l. US scan: stenosis of the shin arteries, collateral compensated blood flow. Ankle-brachial pressure index is 0,7. Foot Xray: destruction of the distal phalanx of the I toe. Determine the grade of diabetic foot according to Wagner:
A. IV
B. I
C. II
D. III
E. V
121. 4 days after a patient received a gunshot wound of the middle third of the thigh soft tissues his condition suddenly began deteriorating. There are complaints of bursting pain in the wound; pain increases during the last 12 hours. Edema of skin and hypodermic tissue quickly grows. Body temperature is 38.2 °C, heart rate is 102/min. The wound edges gape, are dull in color; the muscles, viable as of day before, now protrude into the wound, look boiled, are dull in colour, have dirty-grey coating and fall apart when being held with forceps. What infection has developed in the wound?
A. Anaerobic
B. Aerobic gram-negative
C. Putrid
D. Aerobic gram-positive
E. Diphtheria of wound

122. A 46-year-old woman complains of pain attacks in the right lumbar area, which irradiate to the lower abdomen, and nausea. This kind of pain attacks has never been detected in the patient before. Survey Xray of the abdominal cavity reveals no pathologic shadows. Ultrasonic scan detects a hyperechogenic growth 1.5 cm in diameter, which reflects sound wave, in the enlarged right renal pelvis. What diagnosis is most likely?
A. Renal calculus
B. Benign renal tumor
C. Renal cyst
D. Renal tuberculosis
E. Malignant renal tumor

123. A 54-year-old man had been drowning at sea, when he was found and evacuated to the shore. Objectively: unconscious, pale face, no breathing can be auscultated, thready pulse. Resuscitation measures allowed to save the man. What complication can develop in him in the nearest future?
A. Pulmonary edema
B. Respiratory arrest
C. Encephalopathy
D. Cardiac arrest
E. Bronchial spasm

124. A 48-year-old patient has the following symptoms: diffuse enlargement of thyroid gland, exophthalmus, weight loss up to 4 kg within 2 months, excessive sweating. Objectively: heart rate 105/min, BP - 180/70 mm Hg. Stool is normal. What therapy is advisable in the given case?
A. Mercazolil (Thiamazole)
B. Potassium iodide
C. Propranolol
D. Iodomarin
E. Thyroxin
125. A 41-year-old patient, a hunter, complains of heaviness in the right subcostal area. No other complaints recorded. Anamnesis states causeless urticaria and skin itching that occurred 1 year ago. Objectively: liver margin is rounded, painless, and can be palpated 3 cm below the costal arch. No other pathology was detected during physical examination of the patient. Body temperature is normal. X-ray reveals a hemispherical protrusion in the right cupula of the diaphragm. What disease can be suspected in the given case?

A. **Hydatid disease of liver**
B. Liver abscess
C. Hepatocellular carcinoma
D. Metastatic tumor
E. Subdiaphragmatic abscess

126. A 33-year-old patient has developed dyspnea during physical exertion, palpitations, disruptions of heart rate, swollen legs. In the childhood the patient had a case of acute rheumatic fever that required in-patient treatment. There were no further requests for medical care. Objectively: heart rate is 92/min., rhythmic; BP is 110/70 mm Hg. At the apex the I heart sound is increased, triple rhythm, diastolic murmur. What heart disease is most likely?

A. **Mitral valve stenosis**
B. Mitral valve failure
C. Aortic outflow stenosis
D. Aortic valve failure
E. Tricuspid valve stenosis

127. A 45-year-old patient complains of pain in the epigastric region, left subcostal area, abdominal distension, diarrhea, loss of weight. He has been suffering from this condition for 5 years. Objectively: tongue is moist with white coating near the root; deep palpation of abdomen reveals slight pain in the epigastric region and Mayo-Robson’s point. Liver is painless and protrudes 1 cm from the costal arch. Spleen cannot be palpated. What disease can be primarily suspected?

A. **Chronic pancreatitis**
B. Atrophic gastritis
C. Peptic stomach ulcer
D. Chronic cholecystitis
E. Chronic enteritis

128. After examination a 46-year-old patient was diagnosed with left breast cancer T2N2M0, clinical group II-a. What will be the treatment plan for this patient?

A. **Radiation therapy + operation + chemotherapy**
B. Operation only
C. Operation + radiation therapy
D. Radiation therapy only
E. Chemotherapy only

129. A 40-year-old woman with a history of combined mitral valve disease with predominant stenosis complains of dyspnea, asthma attacks at night, heart problems.
At present, she is unable to do even easy housework. What is the optimal tactics of the patient treatment?
A. **Mitral commissurotomy**  
B. Implantation of an artificial valve  
C. Antiarrhythmia therapy  
D. Treatment of heart failure  
E. Antirheumatic therapy

130. A 30-year-old woman with a long history of chronic pyelonephritis complains of considerable weakness, sleepiness, decrease in diuresis down to 100 ml per day. BP is 200/120 mm Hg. In blood: creatinine - 0.62 millimole/l, hypoproteinemia, albumines - 32 g/l, potassium - 6.8 millimole/l, hypochromic anemia, increased ESR. What is the first step in the patient treatment tactics?  
A. **Haemodialysis**  
B. Antibacterial therapy  
C. Enterosorption  
D. Haemosorption  
E. Blood transfusion

140. A 43-year-old patient had right-sided deep vein thrombosis of iliofemoral segment 3 years ago. Now he is suffering from the sense of heaviness, edema of the lower right extremity. Objectively: moderate edema of shin, brown induration of skin in the lower third of shin, varix dilatation of superficial shin veins are present. What is the most probable diagnosis?  
A. **Postthrombophlebitic syndrome, varicose form**  
B. Acute thrombosis of right veins  
C. Lymphedema of lower right extremity  
D. Parkes-Weber syndrome  
E. Acute thrombophlebitis of superficial veins

141. A 24-year-old patient had been delivered to a thoracic department with a chest injury, a fracture of the IV, V, VI ribs on the right. Plan radiography shows the fluid level in the pleural cavity reaching the III rib on the right. Puncture blood contained clots. What is the optimal treatment tactics?  
A. **Emergency thoracotomy**  
B. Pleural puncture  
C. Thoracentesis and thoracostomy  
D. Hemostatic therapy  
E. Medical thoracoscopy

142. During a regular check-up of a 50-year-old woman a tumor was detected in her right mammary gland. The tumor is 5 cm in diameter, dense, without clear margins. The skin over the tumor resembles lemon rind, the nipple is inverted. The lymph node can be palpated in the axillary region. What diagnosis is most likely?  
A. **Breast cancer**  
B. Lacteal cyst  
C. Diffuse mastopathy
D. Mastitis
E. Breast lipoma

143. 2 weeks after labour a parturient woman developed breast pain being observed for 3 days. Examination revealed body temperature at the rate of 39°C, chills, weakness, hyperaemia, enlargement, pain and deformity of the mammary gland. On palpation the infiltrate was found to have an area of softening and fluctuation. What is the most likely diagnosis?
A. Infiltrative-purulent mastitis
B. Phlegmonous mastitis
C. Lactostasis
D. Serous mastitis
E. Mastopathy

144. A 32-year-old man complains of pain in the chest on the left, dyspnea, temperature rise up to 38.0°C, slight cough. The disease onset was 2 weeks ago after overexposure to cold. He had suffered from bronchoadenitis in his childhood. The affected side lags during breathing; percussion reveals dull sound with oblique margin in the lower left lung, where breathing is absent. The right heart border is displaced outwards. Mantoux test with 2 TU resulted in a papule 16 mm in size. What diagnosis is most likely?
A. Tuberculous pleurisy
B. Central carcinoma of the left lung
C. Congestion pneumonia
D. Thromboembolism of the pulmonary artery branches
E. Community-acquired pneumonia

145. A patient complains of evaginations in the region of anus that appear during defecation and need resetting. Examination with anoscope revealed 1x1 cm large evaginations of mucosa above the pectineal line. What is the most probable diagnosis?
A. Internal hemorrhoids
B. Acute paraproctitis
C. External hemorrhoids
D. Anal fissure
E. –

146. A 52-year-old patient complains of pain in the right part of her chest, dyspnea, cough with a lot of albuminoid sputum emitting foul smell of "meat slops". Objectively: the patient’s condition is grave, cyanosis is observed, breathing rate is 31/min, percussion sound above the right lung is shortened, auscultation revealed various moist rales (crackles). What is the most probable diagnosis?
A. Lung gangrene
B. Lung abscess
C. Pleura empyema
D. Multiple bronchiectasis
147. A 60-year-old patient complains of nearly permanent sensation of heaviness and fullness in the epigastrium, which increases after eating, foul-smelling eructation, occasional vomiting with food consumed 1-2 days ago, weight loss. 12 years ago he was first found to have an ulcer of pyloric channel. The patient has taken ranitidine for periodic hunger pains. The patient’s condition has been deteriorating over the last 3 months. Objectively: splashing sound in the epigastrium is present. What kind of complication is it?
A. Pyloric stenosis
B. Penetration of gastric ulcer
C. Functional pyloric spasm
D. Foreign body in the stomach (bezoar)
E. Malignization of gastric ulcer

148. A patient with frostbite of both feet was delivered to an admission ward. What actions should be taken?
A. To apply a bandage, to introduce vasodilating medications
B. To administer cardiac medications
C. To put feet into hot water
D. To rub feet with snow
E. To apply an alcohol compress

149. A patient in a clinical death condition is being resuscitated through mouth-to-mouth artificial pulmonary ventilation and external cardiac massage. A doctor noticed that air does not flow into the patient’s airways and his head and torso are positioned at the same level. Why is artificial respiration not effective in the given case?
A. Tongue retraction
B. Low breathing volume
C. External cardiac massage
D. Probe is absent from stomach
E. The patient’s mouth is too small

150. A 45-year-old patient with urolithiasis had an attack of renal colic. What is the mechanism of the attack development?
A. Disturbed urine outflow from the kidney
B. Increase in urine specific gravity
C. Ureteric twists
D. Destruction of renal glomerules
E. Renal artery spasm

151. A 24-year-old patient complains of gaining body mass and increased appetite. Objectively: built of hypersthenic type, body mass index is 33.2 kg/m², waist circumference is 100 cm. Waist to hips circumference ratio is 0.95. What is the provisional diagnosis?
A. Alimentary constitutive obesity, I stage, android type
B. Itsenko-Cushing hypothalamic obesity, II stage, gynoid type  
C. Alimentary constitutive obesity, III stage, gynoid type  
D. Alimentary constitutive obesity, II stage, android type  
E. Itsenko-Cushing hypothalamic obesity, I stage, android type

152. A 40-year-old patient suffers from influenza. On the 5th day of illness there are pain behind sternum, cough with sputum, inertness. Temperature is 39.5 °C. Face is pale. Mucosa of conjunctivas and pharynx is hyperemic. Heart rate is 120/min, breathing rate is 38/min. In the lower lung segments shortening of percussion sound and moist rales (crackles) can be detected. What additional investigation should be performed first of all to specify the diagnosis?  
A. Lung X-ray  
B. ECG  
C. Heart US  
D. Mantoux test  
E. Spirography

153. A 57-year-old woman complains of having a sensation of esophageal compression, palpitation, breathing difficulties when eating solid food, occasional vomiting with a full mouth, "wet pillow" sign at night for the last 6 months. Objectively: body temperature - 39 °C, height - 168 cm, weight - 72 kg, heart rate - 76/min, BP - 120/80 mm Hg. X-ray revealed considerable dilation of esophagus and its constriction in the cardial part. What pathology is most likely to have caused dysphagia in this patient?  
A. Achalasia cardiae  
B. Primary esophagism  
C. Hiatal hernia  
D. Esophageal carcinoma  
E. Reflux esophagitis

154. A 25-year-old man complains of pain in the lower third of his left thigh, which occurs both with and without physical exertion. Possibility of trauma is denied by the patient. Objectively: skin colour is normal; pastosity and pain can be detected with deep palpation; knee joint mobility is reduced. X-ray of distal femoral metaphysis shows an area of destruction and spicule. Blood test: immature cells, no signs of inflammation. The most likely diagnosis is:  
A. Osteogenic sarcoma  
B. Osteitis fibrosa cystica  
C. Chronic osteomyelitis  
D. Multiple myeloma  
E. Marble-bone disease

155. A 35-year-old man complains of intense lumbar pain irradiating to the inguinal area, external genitalia, thigh; frequent urination, chill, nausea, vomiting. Objectively: positive Pasternatsky’s symptom(costovertebral angle tenderness). Urine analysis revealed that RBCs and WBCs covered the total field of microscope; the urine
exhibited high protein concentration. These clinical presentations were most likely caused by the following pathology:

A. **Urolithiasis, renal colic**  
B. Cholelithiasis, biliary colic  
C. Renal infarct  
D. Intestinal obstruction  
E. Osteochondrosis, acute radicular syndrome

156. A 74-year-old man complains of pain in the left foot and dark color of the 1st toe. He has been sick for 6 days. Objectively: heart rate is 84/min. Body temperature is 37.8 °C. The left foot resembles "chicken claw" due to soft tissues decreasing in volume, skin is dark red. The 1st toe is black, small amount of dark substance is being discharged from under the nail. Pulse over the peripheral arteries of extremity is absent. The most likely diagnosis is:

A. **Gangrene**  
B. Phlegmon  
C. Panaritium  
D. Erysipelas  
E. Erysipeloid

157. A 49-year-old patient complains of difficulties when swallowing food, hoarse voice, weight loss. The patient has been suffering from these symptoms for the last 3 months. The symptoms are gradually progressing. Objectively: the patient is emaciated, supraclavicular lymph nodes are enlarged. Esophagoscopy revealed no pathologies of esophagus. What investigation would be the most advisable in the given case?

A. **Computed tomogram of chest and mediastinum**  
B. Lungs X-ray  
C. Multiplanar fluoroscopy of esophagus  
D. Radioisotopic examination of chest and mediastinum  
E. US of mediastinum

158. A 45-year-old man was delivered to a hospital with complaints of vomiting with streaks of blood, loss of weight. On esophagofiberscopy a cauliflower-shaped mucosal growth was detected in the abdominal esophagus. The mucosa there bleeds on contact. What preliminary diagnosis can be made?

A. **Esophageal tumor**  
B. Barrett esophagus  
C. Abdominal esophagitis  
D. Esophageal diverticulum  
E. Esophageal achalasia

159. During a surgical operation necessitated by the patient’s suffering from autoimmune thyroiditis with concomitant multinodular goiter the right lobe was removed and subtotal resection of the left lobe was performed. What should be prescribed to the patient for postoperative hypothyroidism prevention?

A. **L-thyroxin**
B. Mercazolil (Thiamazole)
C. Iodomarin (Potassium iodide)
D. Lithium preparations
E. Insulin

160. A 35-year-old female patient has gained 20 kg weight within a year with the normal diet. She complains of chill, sleepiness, dyspnea. The patient’s mother and sister are corpulent. Objectively: height - 160 cm, weight - 92 kg, BMI - 35.9. Obesity is uniform, there are no striae. The face is dry. The tongue is thickened. Heart sounds are muffled. Heart rate - 56/min, BP - 140/100 mm Hg. The patient has constipations, amenorrhea for 5 months. TSH - 28 mkME/l (normal rate - 0.32-5). Craniogram shows no pathology. What is the etiology of obesity?
A. Hypothyroid
B. Hypo-ovarian
C. Hypothalamic-pituitary
D. Alimentary and constitutive
E. Hypercorticoid

161. A 77-years-old patient complains of inability to urinate and bursting pain above his pubis. Acute onset of his condition occurred 12 hours ago. Objectively: overfilled urinary bladder can be palpated above the pubis. On rectal examination: prostate is enlarged, denseelastic, with clear margins and no nodules. Interlobar sulcus is pronounced. US examination: prostate volume is 120 cm³, it protrudes into urinary bladder cavity, parenchyma is homogeneous. Prostate specific antigen is 5 ng/ml. What disease is the most likely to cause acute urinary retention?
A. Prostatic hyperplasia
B. Prostate cancer
C. Prostate sclerosis
D. Prostate tuberculosis
E. Acute prostatitis

162. A patient with uterine fibromyoma sized up to 8-9 weeks of pregnancy consulted a gynaecologist about acute pain in the lower abdomen. Examination revealed pronounced positive symptoms of peritoneal irritation, high leukocytosis. Vaginal examination revealed that the uterus was enlarged up to 9 weeks of pregnancy due to the fibromatous nodes, one of which was mobile and extremely painful. Appendages were not palpable. Discharges were mucous, coming in moderate amounts. What is the treatment tactics?
A. Urgent surgery (laparotomy)
B. Surveillance and spasmolytic therapy
C. Fractional diagnostic curettage of the uterine cavity
D. Surgical laparoscopy
E. Surveillance and antibacterial therapy

163. A 30-year-old male patient consulted a family doctor 2 months after he had been operated for an open fracture of brachial bone. Objectively: the patient’s condition is
satisfactory; in the area of the operative wound there is a fistula with some purulent discharge, redness, fluctuation. X-ray image shows brachial bone destruction with sequestra. What complication arose in the postoperative period?
A. **Posttraumatic osteomyelitis**
B. Hematogenic osteomyelitis
C. Wound abscess
D. Posttraumatic phlegmon
E. Suture sinus

164. A 58-year-old patient complains of general weakness, loss of 10 kg of weight within 1.5 months, progressive pain in the lumbar region, increased blood pressure up to 220/160 mm Hg, subfebrile temperature. Objectively: in the right hypochondrium palpation reveals a formation with uneven surface and low mobility; veins of the spermatic cord and scrotum are dilated. Blood test results: Hb - 86 g/l, ESR - 44 mm/h. Urine test results: specific gravity - 1.020, protein - 0.99 g/l, RBCs - cover the whole field of vision, WBCs - 4-6 in the field of vision. What is the provisional diagnosis?
A. **Renal tumour**
B. Urolithiasis
C. Acute pyelonephritis
D. Acute glomerulonephritis
E. Nephroptosis

165. A 41-year-old patient with Addison’s disease had influenza. After that he developed adynamia, depression, nausea, vomiting, diarrhea and hypoglycemia. BP is 75/50 mm Hg. Blood test: decreased content of corticosterone, hydrocortisone, 13-oxycorticosteroids, 17-oxycorticosteroids. What condition has developed in the patient?
A. **Acute adrenal gland insufficiency**
B. Acute gastritis
C. Acute enterocolitis
D. Collapse
E. Diabetes mellitus

166. After a contact with chemicals a plant worker has suddenly developed stridor, voice hoarseness, barking cough, progressing dyspnea. Objective examination reveals acrocyanosis. What is your provisional diagnosis?
A. **Laryngeal edema**
B. Laryngeal carcinoma
C. PATE
D. Pulmonary atelectasis
E. Pneumothorax

167. A 58-year-old patient complains of general weakness, weight loss up to 10 kg within the last 1.5 months, progressive pain in the small of the back, raise of blood pressure to 220/160 mm Hg, subfebrile body temperature. Objectively: tuberous slightly movable lump can be palpated in the right subcostal area; veins of spermatic cord and scrotum are dilated. Blood test: Hb - 86 g/l, ESR - 44 mm/h. Urine test:
specific gravity - 1020, proteine - 0.99 g/l, erythrocytes - all field of vision, leukocytes - 4-6 in the field of vision. The provisional diagnosis is:
A. **Kidney tumor**
B. Urolithiasis
C. Acute pyelonephritis
D. Acute glomerulonephritis
E. Nephroptosis

168. A 37-year-old patient complains of pain in the lumbar spine, which increases during walking, limited mobility, edema of the right side of abdomen. Focal tuberculosis is recorded in the anamnesis. X-ray shows destruction of adjacent surfaces of the bodies of the 1-2 lumbar vertebrae, vertebral bodies height is decreased, intervertebral fissure cannot be detected. Abdominal US reveals a growth 15x20 cm in size in the retroperitoneal space and echo signs of liquid. What diagnosis can be suspected?
A. **Lumbar tuberculous spondylitis**
B. Fracture of the 1-2 lumbar vertebrae body
C. Metastatic damage of vertebral column
D. Lumbar spondylolisthesis
E. Osteochondrosis

169. A 42-year-old man was delivered to a surgical in-patient department with complaints of icteric skin, pain in the right subcostal area. Biochemical blood analysis: total bilirubin - 140 mcmol/l, direct bilirubin – 112 mcmol/l. On US: choledoch duct - 1.4 cm, a concrement is detected in the distal area. Gallbladder is 40 cm, no concrements. What treatment tactics should be chosen?
A. **Endoscopic papillosphincterotomy**
B. Laparoscopic cholecystectomy
C. Laparotomy with choledoch duct drain
D. Laparotomy with cholecystectomy
E. Treatment in an infectious diseases hospital

170. A 53-year-old woman complains of weight loss up to 10 kg within the last 2 years, liquid foul-smelling stool two times a day that poorly washes off the toilet, periodic bouts of nausea, girdle pain in the upper abdomen. Objectively: pain in Gubergrits zone (on the right from navel) and Mayo-Robson’s point. Biochemical blood analysis: glucose - 3.2 mmol/l, bilirubin - 16.5 micromole/l, crude protein - 56.4 g/l. Urine diastase - 426 g/h/l. D-xylene test (oral administration of 25 g of d-xylene) after 5 hours reveals 3 g of xylose in urine. The most likely diagnosis is:
A. **Pancreatitis. Malabsorption syndrome**
B. Pseudomembranous colitis
C. Nonspecific ulcerative colitis
D. Irritable bowel syndrome
E. Chronic gastritis

171. For the last 15 years a 48-year-old patient has been working at the factory producing synthetic resins. Lately he has been complaining of significant general
fatigue, headaches, frequent urination (predominantly during the day), red color of urine. What complication of benzene nitrocompounds poisoning can be suspected?

A. Malignant tumor of the urinary bladder
B. Chronic cystitis
C. Chronic prostatitis
D. Acute glomerulonephritis
E. Chronic pyelonephritis

172. A 64-year-old patient has been hospitalised with complaints of progressive jaundice that developed over 3 weeks ago without pain syndrome, general weakness, loss of appetite. Objectively: temperature is 36.8°C, heart rate is 78/min, abdomen is soft and painless, peritoneum irritation symptoms are not detected, palpation reveals sharply enlarged tense gallbladder. What disease can be characterised with these symptoms?

A. Cancer of pancreas head
B. Duodenal ulcer
C. Acute cholecystitis
D. Chronic cholecystitis
E. Cholecystitis caused by lambliasis

173. A patient with otopyosis is in sharply deteriorating condition: he developed headache, vomiting, febrile temperature, general hyperesthesia. Meningeal symptoms and stagnant optic disks are observed. There is no focal symptoms. Liquor is turbid, blood pressure is high, albuminocytological dissociation occurs with neutrophils. What disease can be suspected?

A. Secondary purulent meningitis
B. Meningoencephalitis
C. Serous meningitis
D. Primary purulent meningitis
E. Subarachnoid hemorrhage

174. A 19-year-old patient complains of severe pain in axillary crease. Condition onset was a week ago after her swimming in cold river and epilation. The next day painful "boil" appeared that was becoming larger every day and became a plum-sized tumor. Upon examination nodular conical growths joined together are detected, the skin covering them is bluish-red in colour. Some nodules have fistulous openings producing thick purulent mass. Body temperature is 38.5°C, general malaise. The most likely diagnosis is:

A. Hydradenitis
B. Carbuncle
C. Cutaneous tuberculosis
D. Necrotizing ulcerative trichophytosis
E. Pyoderma chancriformis

175. A patient complains of weight gain, chill, edemas, xeroderma, somnolence, difficulties with focusing. Objectively: height is 165 cm; weight is 90 kg; body proportions are of female type, t o - 35,8 o C , heart rate - 58/min, BP - 105/60 mm
Hg. Heart sounds are weakened, bradycardia is observed. Other internal organs have no changes. Thyroid gland cannot be palpated. Milk secretion from mammary glands is observed. Hormone investigation revealed increased levels of thyroid-stimulating hormone (TSH) and prolactin, and decreased level of thyroxine (T4). Which one is the cause for obesity?

A. **Primary hypothyroidism**  
B. Secondary hypothyroidism  
C. Prolactinoma  
D. Hypopituitarism  
E. Adiposogenital dystrophy

176. A 54-year-old patient complains of weakness, jaundice, itching skin. Disease onset was 1.5 months ago: fever up to 39 °C appeared at first, with progressive jaundice developed 2 weeks later. On hospitalisation jaundice was severely progressed. Liver cannot be palpated. Gallbladder is enlarged and painless. Blood bilirubin is 190 micromole/l (accounting for direct bilirubin). Stool is acholic. What is the most likely jaundice genesis in this patient?

A. **Mechanical jaundice**  
B. Hepatocellular jaundice  
C. Hemolytic jaundice  
D. Caroli syndrome  
E. Gilbert’s syndrome

177. A 30-year-old patient was in a car accident. He is unconscious, pale, has thready pulse. In the middle third of the right thigh there is an extensive laceration with ongoing profuse external arterial bleeding. What urgent actions must be taken to save the life of the patient?

A. **Tourniquet above the wound of the right thigh**  
B. Tourniquet below the wound of the right thigh  
C. Artificial lung ventilation  
D. Precordial thump  
E. Plaster bar

178. A woman addressed a gynecologist on the 20th day of puerperal period with complaints of pain in the left mammary gland, purulent discharge from the nipple. Objectively: Ps – 120/min., body temperature is 39°C. The left mammary gland is painful, larger than the right one, the skin there is hyperemic; in the upper quadrant there is an infiltrate 10x15 cm in size with soft center. Blood test: ESR-50 mm/hour, leukocytes – 15,0 10⁹/l. What would be the treatment tactics?

A. **Transfer to a surgical department for surgical treatment**  
B. Refer to a gynecology department  
C. Refer to a postnatal department  
D. Refer to a surgeon for conservative treatment  
E. Lance the mammary gland abscess in a maternity department

growth 2 cm in diameter is detected in the mammary gland; no changes in the peripheral lymph nodes are observed. On mammary glands US: in the upper external quadrant of the right mammary gland there is a space-occupying lesion of increased echogenicity 21x18 mm in size. The most likely diagnosis is:

A. **Fibrous adenoma**
B. Lacteal cyst
C. Diffuse mastopathy
D. Breast cancer
E. Mastitis

180. A 27-year-old woman has been treated in a surgical department for pleural empyema for 6 months. Multiple paracenteses of the pleural cavity were performed along with antibacterial treatment. The patient’s condition is slowly aggravating; attempts to fully stretch the lung were unsuccessful. Choose the tactics:

A. **Decortication of the lung**
B. Change antibiotics
C. Set constant active suction drain
D. Pulmonectomy
E. Include hyperbaric oxygenation in the treatment

181. A maternity patient breastfeeding for 1,5 weeks has attended a doctor. She considers the onset of her disease to be when proportional breast engorgement occurred. Mammary glands are painful. Body temperature is 36.6 °C. Expression of breast milk is hindered. The most likely diagnosis is:

A. **Lactostasis**
B. Infiltrative mastitis
C. Suppurative mastitis
D. Chronic cystic mastitis
E. Gangrenous mastitis

182. A 45-year-old patient was hospitalized in surgical in-patient unit with intermuscular phlegmon of the right thigh on the 6th day from the onset of disease. Abscess formed under the fascia lata was diagnosed, lanced and widely drained, necrotic tissues were removed. Antibiotic therapy with cephalosporines and the III generation fluoroquinolones was prescribed, as well as immune corrective and detoxification infusion therapy (2.5 liters per day), diuresis stimulation, UV irradiation of blood and plasmapheresis. What is the main component of sepsis prevention?

A. **Surgical invasion**
B. General antibiotic therapy
C. Topical antibiotic therapy
D. Immune correction therapy
E. Detoxification therapy

183. A 74-year-old patient visited a urologist with complaints of pain above the pubis and inability to urinate for 8 hours. At home he had taken antispasmodics and had a warm bath but no improvement occurred. Objectively: abdomen is soft and painful
above the pubis; dullness of percussion sound is observed above the pubis. Murphy’s (Pasternatski’s) punch sign is negative on both sides. What condition does the patient have?

A. Acute urinary retention  
B. Paradoxal ischuria  
C. Chronic urinary retention  
D. Anuria  
E. Oliguria

184. A 24-year-old patient visited a doctor complaining of enlargement of his submaxillary lymph nodes. Objectively: submaxillary, axillary and inguinal lymph nodes are enlarged. Chest X-ray shows: enlarged lymph nodes of mediastinum. Blood test: erythrocytes - 3.4 · 10¹²/l, Hb- 100 g/l, blood colour index - 0.88, platelets - 190 10⁹/l, leucocytes - 7.5·10⁹/l, eosinophiles - 8%, band neutrophiles - 2%, segmented neutrophiles - 67%, lymphocytes - 23%, ESR- 22 mm/hour. What test must be prescribed to verify the cause of lymphadenopathy?

A. Open biopsy of lymph nodes  
B. Ultrasonography of abdominal cavity  
C. Mediastinum tomography  
D. Puncture biopsy of lymph nodes  
E. Sternal puncture

185. A 35-year-old patient’s wound with suppurative focus was surgically cleaned. On the 8th day after the surgery the wound cleared from its purulo-necrotic content and granulations appeared. However, against the background of antibacterial therapy the body temperature keeps at 38.5-39.5°C. There are chills, excessive sweating, euphoria, heart rate is 120/min. What complication of local pyoinflammatory process can it be?

A. Sepsis  
B. Purulent absorption fever  
C. Trombophlebitis  
D. Meningitis  
E. Pneumonia

186. A 24-year-old patient received a puncture injury below the Poupart’s ligament accompanied by intense arterial bleeding. The best method to temporarily stop the bleeding in the patient would be:

A. Compression band  
B. Esmarch’s tourniquet  
C. Maximum limb bending  
D. Compressing a blood vessel with a clamp  
E. Wound suturing

187. A 42-year-old woman has been hospitalized with complaints of intense pain attacks in the lumbar and right iliac areas, which irradiate to the vulvar lips, frequent urination, nausea. The pain onset was acute. Objectively: the abdomen is soft, moderately painful in the right subcostal area, costovertebral angle tenderness on the
right. Common urine analysis: specific gravity - 1016, traces of protein, leukocytes - 6-8 in the vision field, erythrocytes - 12-16 in the vision field, fresh. What diagnosis can be made?

A. **Right-sided renal colic**  
B. Acute right-sided pyelonephritis  
C. Acute right-sided adnexitis  
D. Acute cholecystitis  
E. Acute appendicitis

188. A 29-year-old patient works as a motor mechanic. Anamnesis shows frequent exposure to cold, exacerbation of chronic bronchitis attended by cough with relatively small amount of mucopurulent sputum, subfebrility, sometimes joined by hemoptysis and pain in the right side of chest. Breathing is vesicular. X-ray shows shadows and sharp decrease in size of the lower lobe distinctly visible on the X-ray image as a streak 2-3 cm wide situated at the angle from lung root to the frontal costodiaphragmatic recess. The most likely diagnosis is:

A. **Peripheral lung cancer**  
B. Bronchiectasis  
C. Pneumonia  
D. Middle lobe syndrome  
E. Interlobular pleurisy

189. A 62-year-old patient has been hospitalized with complaints of pain in the thorax on the right during breathing, dyspnea, dry cough. Ten days ago he slipped and fell hitting his right side. On examination: the patient lies on the left side. The right side of the thorax lags during breathing. On the right there are crepitation and pain in the III-IV ribs. Dullness of percussion sound and sharply diminished breath sounds can be observed. On X-ray: signs of exudate, fracture of the III-IV ribs. On pleurocentesis: blood is detected. Choose the further tactics:

A. **Transfer to a thoracic surgery department**  
B. Prescribe conservative therapy  
C. Recurrent pleurocentesis  
D. Fixed bandage of the rib cage  
E. Refer to a traumatologist

190. A patient operated for acute paraproctitis undergoes antibacterial and detoxification therapy, the local course of the disease has the positive dynamics. Since the operation the patient has had chills, pyrexia, tachycardia, euphoria for five days. The doctor suspected sepsis. What study will confirm the diagnosis?

A. **Blood culture for a pathogen**  
B. X-ray of lungs  
C. Liver ultrasound  
D. Determining the rate of microbial contamination of wound  
E. Determining the rate of average-weight molecules

191. Three weeks after a case of acute tonsillitis the patient is still weak, inert, subfebrile, his retromaxillary lymph nodes are enlarged. Tonsils are flabby, stick
together with arches, there are purulent plugs in lacunae. What is the most probable diagnosis?
A. Chronic tonsillitis
B. Chronic pharyngitis
C. Acute lacunar tonsillitis
D. Paratonsillitis
E. Tonsillar tumour

192. A 24-year-old patient got a puncture injury below the Poupart’s ligament accompanied by intense arterial bleeding. The best method to temporarily stop the bleeding in the patient would be:
A. Compression band
B. Esmarch’s tourniquet
C. Maximum limb bending
D. Compressing a blood vessel with a clamp
E. Wound suturing

193. A 64-year-old patient complains of severe pain in the right side of chest, dyspnea, dry cough which appeared suddenly on exertion. Objectively: the right side of the chest lags behind in the act of breathing. Percussion reveals tympanic sound. Auscultation reveals pronouncedly diminished breath sounds on the right. Ps-100/min, weak, arrhythmic. AP-100/50 mm Hg. Cardiac sounds are decreased. What disease can be suspected in this patient?
A. Right-sided pneumothorax
B. Right-sided hydrothorax
C. Right-sided dry pleurisy
D. Right-sided pleuropneumonia
E. PATE

194. A patient got flame burns of both hands. On the dorsal and palmar surface of hands the blisters are filled with serous fluid. The wrist joint region is hyperemic. The forearms were not injured. What is the provisional diagnosis?
A. II degree flame burn of hands with an area of 4/
B. II degree flame burn of hands with an area of 2/
C. IIIa degree flame burn of hands with an area of 4/
D. III degree flame burn of hands with an area of 4/
E. IIb degree flame burn of hands with an area of 2/

195. A patient complains about sudden onsets of paroxysmal pain in the right lumbar region. 2 hours after the onset the patient had hematuria. Plain radiograph of the lumbar region shows no pathological shadows. USI reveals pyelocaliectasis on the right, the left kidney is normal. What is the most likely diagnosis?
A. Renal colic
B. Acute appendicitis
C. Bowel volvulus
D. Torsion of the right ovary cyst
E. Right renal pelvis tumour
196. A 50-year-old patient complains of bursting pain in the left lower limb that is getting worse on exertion, swelling in the region of shin and foot. Objectively: left shin and foot are doughy, skin of the lower shin is indurated and has a bronze tint, subcutaneous veins are dilated, there is an ulcer with necrotic masses. What is the most likely diagnosis?

A. Postthrombophlebitic syndrome  
B. Chronic arterial insufficiency  
C. Acute arterial thrombosis  
D. Deep vein thrombosis of the lower limbs  
E. Gangrene of the lower extremity

197. A 48-year-old patient was found to have diffuse enlargement of the thyroid gland, exophthalmia, weight loss of 4 kg in 2 months, sweating. Objectively: HR-105/min, AP-140/70 mm Hg. Defecation act is normal. What kind of therapy is recommended in this case?

A. Mercazolil  
B. Radioiodine  
C. Propranolol  
D. Lugol’s solution  
E. Thyroxine

198. A 48-year-old male patient complains of constant pain in the upper abdomen, mostly on the left, that is getting worse after taking meals; diarrhea, weight loss. The patient is an alcohol abuser. 2 years ago he had acute pancreatitis. Blood amylase is 4 g/h·l. Coprogram shows steatorrhea, creatorrhea. Blood glucose is 6,0 mmol/l. What treatment is indicated for this patient?

A. Panzinorm forte  
B. Insulin  
C. Gastrozepin  
D. Contrycal  
E. No-spa

199. A 32-year-old patient has developed an acute condition after hypothermia: temperature - 40°C, cough with 200 ml of sputum per day. The sputum is purulent, foul-smelling. To the right of the lower lobe the mixed moist rales can be auscultated. Blood tst results: WBCs - 18,0 x 10⁹/l, ESR - 45 mm/h. Radiographically: in the lower lobe of the right lung there is a thick-walled cavity up to 6 cm in diameter with a high horizontal level. What is the most likely diagnosis?

A. Lung abscess  
B. Fibro-cavernous pulmonary tuberculosis  
C. Lung cyst  
D. Decomposing lung carcinoma  
E. Infiltrative pulmonary tuberculosis

200. A patient with suspected pheochromocytoma has normal blood pressure in the periods between the attacks and a tendency to tachycardia. Urine test revealed no
pathology. It was decided to use a provocative test with histamine. What medication should be prepared to provide emergency care in case of a positive test result?

A. **Phentolamine**
B. Pipolphen
C. Nifedipine
D. Mesatonum
E. Prednisolone

201. A 54-year-old patient complains of frequent painful urination, chills, fever up to 38°C. Urine test results: protein - 0,33 g/L, WBCs - up to 50-60 in the field of vision, RBCs - 5-8 in the field of vision, gram-negative bacilli. Which of the listed antibiotics should be preferred in this case?

A. **Ciprofloxacin**
B. Oxacillin
C. Erythromycin
D. Tetracycline
E. Tseporin

202. A 45-year-old female patient complains of frequent liquid stools with a lot of mucus, pus and blood; pain across the abdomen, loss of 7 kg within 6 months. She has a 1-year history of non-specific ulcerative colitis. What group of drugs should be preferred for this patient?

A. **Corticosteroids**
B. Antibacterial
C. Sulfonamides
D. Nitrofurans
E. Polyenzymes

203. A 60-year-old male patient, who works as a construction worker, complains of pain in the right hip and knee joints, that is getting worse on exertion. These presentations have been observed for the last 5 years. Objectively: the patient is overnourished. Right knee joint is moderately deformed. Examination of other organs and systems revealed no pathology. Blood tet results: WBCs - 8,2 · 10⁹/l, ESR - 15 mm/h. Uric acid - 0,35 mmol/l. What is the most likely diagnosis?

A. **Deforming osteoarthritis**
B. Reactive arthritis
C. Gout
D. Rheumatoid arthritis
E. Reiter’s disease

204. A 55-year-old male has a 1,5-year history of viral cirrhosis with symptoms of portal hypertension. Over the last month the weakness has progressed, there appeared coffee ground vomit. Fibrogastroduodenoscopy revealed variceal esophageal haemorrhage. What drug should be used to reduce the pressure in the portal vein?

A. **Vasopressin**
B. Reserpine
C. Calcium gluconate
205. A 42-year-old female patient suffers from micronodular cryptogenic cirrhosis. Over the last week her condition has deteriorated: she developed convulsions, mental confusion, progressing jaundice. What study may give reasons for such aggravation?

A. **Determination of serum ammonia**
B. Determination of cholesterol ethers
C. Determination of alpha-phetoprotein
D. Determination of ALAT and ASAT
E. Determination of alkaline phosphatase

206. A 28-year-old patient has been hospitalized for the pain in the epigastric region. He has a 10-year history of duodenal ulcer (DU). Recently, the pain character has changed: it became permanent, persistent, irradiating to the back. There are general weakness, dizziness, fatigue. The patient has put off weight. Objectively: HR-68/min, AP –120/80 mm Hg. What is most likely cause of deterioration?

A. **Penetration**
B. Haemorrhage
C. Perforation of duodenal wall
D. Exacerbation of duodenal ulcer
E. Stenosis development

207. A 57-year-old male patient complains of dyspnea on exertion, heaviness in the right hypochondrium and shin edemata towards evening. Objectively: temperature -38, 1°C, HR- 20/min, HR=Ps=92/min, AP- 140/90 mm Hg. There is apparent kyphoscoliosis. In the lungs single dry rales can be auscultated. Heart sounds are muffled, rhythmic. ECG: Rv1+Sv5=15 mm. X-ray picture shows the bulging of pulmonary artery cone, right ventricle enlargement. What is the most likely cause of this condition?

A. **Pulmonary heart**
B. Atherosclerotic cardiocclerosis
C. Dilatation cardiomyopathy
D. Mitral stenosis
E. Primary pulmonary hypertension

208. A 30-year-old patient has been hospitalized with diagnosis of intestinal obstruction. The surgery revealed the obstruction of the small intestine to be caused by a helminth ball. What kind of helminth is it?

A. **Ascaris**
B. Guinea worm
C. Filariidae
D. Cysticercus
E. Pinworm

209. A child undergoes in-patient treatment for acute staphylococcal destruction of the right lung. Unexpectedly he developed acute chest pain on the right, dyspnea,
cyanosis. The right side of chest lags behind in the respiratory act. Percussion reveals dullness in the lower parts on the right, bandbox resonance in the upper parts. Borders of the relative cardiac dullness are shifted to the left. What complication has most likely developed?
A. **Right-sided pyopneumothorax**
B. Pleural empyema
C. Spontaneous pneumothorax
D. Exudative pleuritis
E. Right lung abscess

210. A 48-year-old patient complains of having dull pain in the right lumbar region for over three years. USI shows that kidneys are of normal size, at the upper pole of the right kidney there is a fluid-containing formation up to 12 cm in diameter. Excretory urograms show normal condition on the left, and the deformation of the superior renal calyces with satisfactory function on the right. What kind of disease can you think of?
A. **Simple cyst of the right kidney**
B. Multicystic kidney disease
C. Multiple cysts of the right kidney
D. Tumour of the right kidney
E. Right hydronephrosis

211. A 40-year-old patient was bitten by a stray dog an hour ago. On the left shin there is a bite mark - the wound is 4x2x0,5 cm in size. What surgical aid would be most efficient in this case?
A. **Lavage with soapy water, retension sutures**
B. Aseptic dressing
C. Salve dressing
D. Blind suture
E. Retension sutures

212. A patient complains of constant dull pain in the perineum and suprapubic area, weak flow of urine, frequent difficult painful urination, nocturia. The patient has been suffering from this condition for several months, during which urination was becoming increasingly difficult, and pain in the perineum has developed. On rectal examination: the prostate is enlarged (mainly its right lobe), dense, asymmetrical, central fissure is smoothed out, the right lobe is of stony density, painless, tuberous. What disease is it?
A. **Prostate cancer**
B. Prostate sclerosis
C. Urolithiasis, prostatolith of the right lobe
D. Prostate tuberculosis
E. Chronic congestion prostatitis

213. X-ray picture of chest shows a density and an abrupt decrease in the upper lobe of the right lung. The middle and lower lobe of the right lung exhibit significant pneumatization. The right pulmonary hilum comes up to the dense lobe. In the upper
and middle parts of the left pulmonary field there are multiple focal shadows. In the basal region of the left pulmonary field there are clear outlines of two annular shadows with quite thick and irregular walls. What disease is this X-ray pattern typical for?

A. Fibro-cavernous pulmonary tuberculosis
B. Atelectasis of the right upper lobe
C. Abscessing pneumonia
D. Peripheral cancer
E. Pancoast tumour

214. A patient complains of impaired far vision. Previously his eyes often turned red and hurt. Objectively: the eyes are not irritated, the cornea is transparent, anterior chambers are median deep, their liquid is transparent. The iris of the right eye has not changed in colour, its pattern is unchanged. The pupil is of irregular shape, scalloped. Biomicroscopy of the crystalline lens reveals the areas of opacity and vacuoles. Make a diagnosis:

A. Complicated cataract of the right eye
B. Senile cataract of the right eye
C. Diabetic cataract of the right eye
D. Tetanic cataract of the right eye
E. Radiation cataract of the right eye

215. After lifting a load a patient felt undurable pain in the loin. He was diagnosed with acute lumbosacral radiculitis. Which of the following is contraindicated for this patient?

A. Warming procedures
B. Dehydrating drugs
C. Analgetics
D. Vitamins of B group
E. Intravenous injection of aminophylline

216. A 58-year-old woman undergoing chemotherapy for her oncologic disorder has developed sore throat. Examination revealed necrotic areas on the mucosa of the pharynx and tonsils. Many of her teeth are afflicted with caries. In blood: neutrophilic granulocytes are practically absent against the background of leukopenia. Leukocytes are represented mainly by lymphocytes and monocytes. What disease can be suspected in the given case?

A. Agranulocitar tonsillitis
B. Lacunar tonsillitis
C. Pseudomembranous (Vincent’s) tonsillitis
D. Syphilitic tonsillitis
E. Diphtheria

217. A patient presented to a hospital with a carbuncle of the upper lip. The body temperature is 39°С. There is a pronounced edema of the upper lip and eyelids. What is the surgeon’s tactics of choice?

A. Hospitalize in the surgical unit
B. Administer out-patient course of antibiotics  
C. Disclose the carbuncle and administer out-patient treatment  
D. Administer physiotherapy  
E. Disclose the carbuncle and administer antibiotics  

218. A 49-year-old patient complains of swallowing disorder that intensifies during eating solid food, hiccups, hoarse voice, nausea, regurgitation, significant weight loss (15 kg within 2.5 months). Objectively: body weight is reduced; the skin is pale and dry; vesicular respiration; heart sounds are sufficiently sonorous; heart rate is rhythmic. The abdomen is soft, no pain on palpation. The liver is not enlarged. What investigation is most necessary for making the diagnosis in this case?  
A. Esophagoduodenoscopy with biopsy  
B. Clinical blood analysis  
C. X-ray of the gastrointestinal tract  
D. X-ray in the Trendelenburg position  
E. Investigation of gastric secretion  

219. A 62-year-old male patient complains of intense pain in the left leg that suddenly arose three hours before, leg numbness and coldness. During the year there has been pain in the leg while walking, hypersensitivity to cooling. Objectively: the left foot and shin have marbled skin, subcutaneous veins are collapsed. The foot is cold, active movements of the foot and toes are preserved. Pulse is present only on the femoral artery. There is rough systolic murmur above the artery. Make a provisional diagnosis:  
A. Acute occlusion of the left femoral artery  
B. Occlusive disease  
C. Stenosis of the left popliteal artery  
D. Acute thrombophlebitis  
E. Acute arterial thrombosis ileofemoralny  

220. A 70-year-old patient with a strangulated inguinal hernia called a therapist in. The strangulation took place 10 hours ago. There are signs of intestinal obstruction. The skin over the herniation is hyperemic. What is the tactics of choice?  
A. Emergency hospitalization to a surgical hospital  
B. Referral to a surgeon  
C. Cold to the hernia, analgesics, antibiotics  
D. Reduction of hernia after a narcotic injection  
E. Reduction of hernia  

221. A 45-year-old patient with acute abscess of the left lung has suddenly developed acute chest pain and dyspnea while coughing, tachycardia has increased. The control Ro-gram shows collapsed left lung, the air in the left pleural cavity and a horizontal fluid level. What is the mechanism of this complication?  
A. Abscess burst into the pleural cavity  
B. Bullae rupture of the left lung  
C. Inflammation spread to the visceral pleura  
D. Atelectasis of the left lung
222. Examination of a 38-year-old patient who had been hit with a blunt object on the left side of chest revealed a fracture of the X rib with fragments displacement, parietal pneumothorax. The patient complains of pain in the left subcostal area. Objectively: the patient is pale, AP-80/40 mm Hg, Ps- 138/min, of poor volume. USI reveals fluid in the left abdomen. Splenic rupture is present. What treatment tactics should be chosen?

A. Drainage of the left pleural cavity followed by laparotomy
B. Immediate upper median laparotomy followed by drainage of the left pleural cavity
C. Immediate laparotomy and alcoholnovocaine block of the X rib
D. Anti-schock actions followed by laparotomy after the arterial pressure rise
E. Left-sided thoracotomy immediately followed by laparotomy

223. A 38-year-old patient has suddenly developed pain in the left side of his chest, suffocation. Objectively: moderately grave condition, Ps- 100/min, AP- 90/60 mm Hg, breath sounds on the left cannot be auscultated. Chest radiography shows the collapse of the left lung up to 1/2. What kind of treatment should be administered?

A. Passive thoracostomy
B. Rest, resolution therapy
C. Pleural puncture
D. Operative therapy
E. Active thoracostomy

224. A 26-year-old patient with left lower lobe pneumonia experiences an acute chest pain on the left during coughing. Objectively: diffuse cyanosis, extension of the left side of chest. Percussion reveals high tympanitis. Auscultation reveals no respiratory murmurs above the left side of chest. There is a deviation of the right cardiac border towards the midclavicular line. What examination will be the most informative?

A. X-Ray
B. Bronchoscopy
C. Bronchography
D. Pneumotachometry
E. Spirography

225. A 57-year-old patient taken to the surgical department by ambulance has provisionally diagnosed with acute intestinal obstruction. Acute pancreatitis is suspected. What is the most informative method of study to verify the diagnosis?

A. Plan radiography of stomach
B. Biochemical blood analysis
C. Complete blood count and clinical urinalysis
D. Fibrogastroduodenoscopy
E. Ultrasound

226. A 32-year-old woman complains of dizziness, headache, palpitation, tremor. For the last several months she has been under outpatient observation for increased
arterial pressure. Since recently such attacks have become more frequent and severe. Objectively: the skin is covered with clammy sweat, tremor of the extremities is present. HR-110/min., BP- 220/140 mm Hg. Heart sounds are muffled. Blood test results: WBCs- 9,8 10⁹/l, ESR- 22 mm/hour. Blood glucose - 9,8 millimole/l. What disease is the most likely cause of this crisis?

A. Pheochromocytoma
B. Essential hypertension
C. Preeclampsia
D. Primary hyperaldosteronism
E. Diabetic glomerulosclerosis

227. A 28-year-old female patient has been admitted to a hospital. She states to be ill for 12 years. On examination she has been diagnosed with bronchiectasis with affection of the left lower lobe of lung. What is the optimal treatment tactics for this patient?

A. Left lower lobectomy
B. Left-sided pneumoectomy
C. Antibiotic therapy
D. Active drainage of the left pleural cavity
E. Bronchopulmonary lavage

228. 4 weeks after myocardial infarction a 56-year-old patient developed acute heart pain, pronounced dyspnea. Objectively: the patient’s condition is extremely grave, there is marked cyanosis of face, swelling and throbbing of neck veins, peripheral pulse is absent, the carotid artery pulse is rhythmic, 130 bpm, AP is 60/20 mm Hg. Auscultation of heart reveals extremely muffled sounds, percussion reveals heart border extension in both directions. What is the optimal treatment tactics for this patient?

A. Pericardiocentesis and immediate thoracotomy
B. Oxygen inhalation
C. Puncture of the pleural cavity on the left
D. Conservative treatment, infusion of adrenomimetics
E. Pleural cavity drainage

229. On the first day after a surgery for diffuse toxic goiter a patient developed difficulty breathing, cold sweats, weakness. Objectively: pale skin, body temperature - 38, 5°C, RR - 25/min, Ps- 110/min, AP-90/60 mm Hg. What early postoperative complication occurred in the patient?

A. Thyrotoxic crisis
B. Hypothyroid crisis
C. Postoperative tetany
D. Acute thyroiditis
E. Compression of the trachea by the hematoma

230. A 49-year-old patient consulted a doctor about difficult swallowing, voice hoarseness, weight loss. These symptoms have been gradually progressing for the last 3 months. Objectively: the patient is exhausted, there are enlarged supraclavicular
lymph nodes. Esophagoscopy revealed no oesophageal pathology. Which of the following studies is most appropriate in this case?

A. **Computed tomography of chest, mediastinum**
B. X-ray of lungs
C. Multiplanar imaging of esophagus
D. Radioisotope investigation of chest
E. Ultrasound investigation of mediastinum

231. A 26-year-old patient consulted a doctor about sore throat, fever up to 38, 2°C. A week ago, the patient had angina, didn’t follow medical recommendations. On examination, the patient had forced position of his head, trismus of chewing muscles. Left peritonsillar region is markedly hyperemic, swollen. What is the provisional diagnosis?

A. **Left-sided peritonsillar abscess**
B. Meningitis
C. Phlegmonous angina
D. Diphtheria of the pharynx
E. Tonsil tumour

232. A 77-year-old patient complains of inability to urinate, bursting pain above the pubis. The patient developed acute condition 12 hours ago. Objectively: full urinary bladder is palpable above the pubis. Rectal prostate is enlarged, dense and elastic, well-defined, with no nodes. Interlobular sulcus is distinct. Ultrasonography results: prostate volume is 120 cm³, it projects into the bladder cavity, has homogeneous parenchyma. Prostate-specific antigen rate is of 5 ng/ml. What is the most likely disease that caused acute urinary retention?

A. **Prostatic hyperplasia**
B. Prostate carcinoma
C. Sclerosis of the prostate
D. Tuberculosis of the prostate
E. Acute prostatitis

233. Six months ago, a 5-year-old child was operated for CHD. For the last 3 weeks he has complained of fever, heart pain, aching muscles and bones. Examination results: "white-coffee"skin colour, auscultation revealed systolic murmur in the region of heart along with a noise in the III-IV intercostal space. Examination of fingertips revealed Janeway lesions. What is your provisional diagnosis?

A. **Infectious endocarditis**
B. Sepsis
C. Nonrheumatic carditis
D. Acute rheumatic fever
E. Typhoid fever

234. A 64-year-old patient has been referred to planned hospitalization for general weakness, poor appetite, progressive jaundice which appeared over 3 weeks ago and wasn’t accompanied by pain syndrome. Objectively: body temperature is at the rate of 36, 8°C, Ps-78/min, abdomen is soft and painless, the symptoms of peritoneal
irritation are present, palpation reveals a dramatically enlarged, tense gallbladder. What disease are these symptoms typical for?
A. Cancer of the pancreatic head
B. Duodenal ulcer
C. Acute cholecystitis
D. Chronic cholecystitis
E. Lamblia-induced cholecystitis

235. A 22-year-old patient complains of amenorrhea for 8 months. Menarche occurred at the age of 12.5. Since the age of 18 the patient has a history of irregular menstruation. The patient is nulligravida. The mammary glands are developed properly, nipples discharge drops of milk when pressed. Gynecological study results: prolactin level is 2 times higher than normal. CT reveals a bulky formation with a diameter of 4 mm in the region of sella. What is the most likely diagnosis?
A. Pituitary tumour
B. Lactational amenorrhea
C. Stein-Leventhal syndrome
D. Sheehan’s syndrome
E. Pituitary basophilia

236. Explosion of a tank with benzene at a chemical plant has killed and wounded a large number of people. There are over 50 victims with burns, mechanical traumas and intoxication. Specify the main elements of medical care and evacuation of population in this situation:
A. Sorting, medical assistance, evacuation
B. Sorting, evacuation, treatment
C. Medical assistance, evacuation, isolation
D. Isolation, rescue activity, recovery
E. Sorting, recovery, rescue activity

237. A 19-year-old patient complains of dyspnea on exertion. He often has bronchitis and pneumonia. Since childhood, the patient presents with cardiac murmur. Auscultation revealed splitting of the II sound above the pulmonary artery, systolic murmur in 3 intercostal space at the left sternal border. ECG showed right bundle branch block. What is the provisional diagnosis?
A. Atrial septal defect
B. Open ductus arteriosus
C. Aortarctia
D. Aortic stenosis
E. Mitral insufficiency

238. A 30-year-old patient got in a car accident. He is unconscious, pale, has thready pulse. In the middle third of the right thigh there is an extensive laceration with ongoing profuse external arterial bleeding. What urgent actions must be taken to save the life of the patient?
A. Tourniquet above the wound of the right thigh
B. Tourniquet below the wound of the right thigh
C. Artificial lung ventilation
D. Precordial thump
E. Plaster bar

239. A 56-year-old patient with diffuse toxic goiter has ciliary arrhythmia, heart rate is 110-120/min., arterial hypertension, BP is 165/90 mm Hg. What drug besides Mercazolil (Thiamazole) should be prescribed in this case?
A. Propranolol
B. Radioactive iodine
C. Novocainamide (procainamide)
D. Verapamil
E. Corinfar

240. A patient is 31 years old. Doublecontrast barium swallow revealed a filling defect on the posterior wall in the middle segment of esophagus. The defect looked like a well-defined oval 1,8x1,3 cm large. Mucosal folds adjacent to the defect were intact, peristalsis and elasticity of the walls remained unchanged. Digestive tract problems were absent. What is the provisional diagnosis?
A. Esophageal tumour
B. Achalasia cardia
C. Esophageal burn
D. Diverticulum
E. Barrett’s esophagus

241. A 56-year-old female patient complains of recurrent attacks of intensive pain irradiating along the ureters. Urine test results: protein - 0,37 g/l, RBCs-20-25 in the field of vision, WBCs - 12-14 in the field of vision. What method of instrumental diagnostics is the most informative for the diagnosis?
A. Intravenous urography
B. USI of kidneys
C. Computer tomography
D. Radioisotope renography
E. Cystoscopy

242. A 28-year-old male patient complains of regurgitation, cough and heartburn that occurs every day after a meal, when bending forward or lying down. These problems have been observed for 4 years. Objective status and laboratory values are normal. FEGDS revealed endoesophagitis. What is the leading factor in the development of this disease?
A. Failure of the inferior esophageal sphincter
B. Hypersecretion of hydrochloric acid
C. Duodeno-gastric reflux
D. Hypergastrinemia
E. Helicobacter pylori infection

243. A 24-year-old patient had been delivered to the thoracic department with a chest injury, a fracture of the IV, V, VI ribs on the right. Plan radiography shows the fluid
level in the pleural cavity reaching the III rib on the right. Puncture blood contained clots. What is the optimal treatment tactics?
A. Emergency thoracotomy
B. Pleural puncture
C. Thoracentesis and thoracostomy
D. Hemostatic therapy
E. Medical Thoracoscopy

244. A 67-year-old man complains of dyspnea on exertion, attacks of retrosternal pain, dizziness. He has no history of rheumatism. Objectively: pale skin, acrocyanosis. There are crackles in the lower lungs. There is systolic thrill in the II intercostal space on the right, coarse systolic murmur conducted to the vessels of neck. BP - 130/90 mm Hg, heart rate - 90/min., regular rhythm. The liver extends 5 cm from under the edge of costal arch, shin edemas are present. Specify the suspected valvular defect:
A. Aortic stenosis
B. Pulmonary artery stenosis
C. Mitral insufficiency
D. Ventricular septal defect
E. Tricuspid regurgitation

245. A 51-year-old female patient complains of frequent defecation and liquid blood-streaked stools with mucus admixtures, diffuse pain in the inferolateral abdomen, 6 kg weight loss within the previous month. Objectively: body temperature - 37.4°C, malnutrition, skin is pale and dry. Abdomen is soft, sigmoid is painful and spasmodic, makes a rumbling sound. Liver is dense, painful, extends 3 cm below the costal margin. What is the most likely diagnosis?
A. Non-specific ulcerative colitis
B. Bacillary dysentery
C. Sprue
D. Intestinal enzymopathy
E. Helminthic invasion

246. A woman has developed sudden thoracic pain on the right with expectoration of pink sputum and body temperature rise up to 37, 7°C on the 4th day after the surgery for cystoma of the right ovary. On lung examination: dullness of the lung sound on the lower right is observed. Isolated moist crackles can be auscultated in the same area. What complication is the most likely?
A. Pulmonary infarction
B. Pneumonia
C. Pulmonary abscess
D. Exudative pleurisy
E. Pneumothorax

247. A 48-year-old woman has thermal burns of both hands. The epidermis of the palms and backs of her hands is exfoliating, and blisters filled with serous liquid are forming. The forearms are intact. What diagnosis is most likely?
A. 2-3A degree thermal burn  
B. 4 degree thermal burn  
C. 1 degree thermal burn  
D. 3B degree thermal burn  
E. 1-2 degree thermal burn

248. A worker of a blowing shop complains of headache, irritability, sight impairment – he sees everything as if through a ”net”. Objectively: hyperemic sclera, thickened cornea, decreased opacity of pupils, visual acuity is 0.8 in the left eye, 0.7 in the right eye. The worker uses no means of personal protection. What diagnosis is most likely?  
A. Cataract  
B. Conjunctivitis  
C. Keratitis  
D. Blepharospasm  
E. Progressive myopia

249. A 45-year-old woman is undergoing treatment for active rheumatism, combined mitral valve failure. During her morning procedures she suddenly sensed pain in the left hand, which was followed by numbness. Pain and numbness continued to aggravate. Objectively: the skin of the left hand is pale and comparatively cold. Pulse in the hand arteries is absent along the whole length. What treatment tactics is most efficient?  
A. Urgent embolectomy  
B. Prescription of fibrinolytics and anticoagulants  
C. Prescription of antibiotics and antiinflammatory agents  
D. Cardiac catheterization  
E. Urgent thrombintime sectomy

250. A 40-year-old patient has acute onset of disease caused by overexposure to cold. Temperature has increased up to 39°C. Foul-smelling sputum is expectorated during coughing. Various moist crackles can be auscultated above the 3rd segment on the right. Blood test: leukocytes - 15,0 10⁹/l, stab neutrophils - 12%, ESR - 52 mm/hour. On Xray: in the 3rd segment on the right there is a focus of shadow 3 cm in diameter, low density, with fuzzy smooth margins and a clearing in its center. What disease is most likely in the given case?  
A. Pneumonia complicated by an abscess  
B. Infiltrative tuberculosis  
C. Peripheral pulmonary cancer  
D. Cystic echinococcosis  
E. Pulmonary cyst

251. A patient has been provisionally diagnosed with pheochromocytoma at the stage of intermission. BP is within norm, there is a tendency towards tachycardia. No urine pathologies. The decision has been made to perform a provocative test with histamine. What drug should be kept close at hand for emergency aid in case of positive test result?
A. Phentolamine
B. Pipolphen
C. Nifedipine
D. Mesaton (Phenylephrine)
E. Prednisolone

252. A 32-year-old patient complains of reddening, burning, and sensation of a foreign body in the right eye. The disease is acute. On examination: visual acuity of the both eyes is 1.0. In the right eye there are hyperemy and swelling of the conjunctiva, superficial injection. There is purulent discharge in the conjunctival sac. The cornea is clear. The color and pattern of the iris are uncanged, the pupil is mobile. What diagnosis is most likely?
   A. Acute conjunctivitis
   B. Acute iridocyclitis
   C. Acute attack of glaucoma
   D. Foreign body of the cornea
   E. Acute dacryocystitis