TEST BANK

Doctor 2019

SUBJECT:

UGS MID

(Anatomy,Microbiology,Pathology)

COLLECTED BY :

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ANATOMY

1-Which of the following muscles originate from the ischial spines ONLY ?

a. Coccygeus

b. Puborectalis

c. Sphincter vaginae

d. Iliococygeus

e. Levator prostate

2-During labour, the anteroposterior diameter of the baby's head passes in the anteroposterior diameter of the pelvic:

a. cavity

b. outlet

c. obstetric conjugate

d. brim

e. inlet

3-Regarding the inferior hypogastric plexus. Choose the wrong statement :

a. It receives parasympathetic contribution from superior hypogastric plexus

b. It receives contribution from pelvic splanchnic nerves

c. It lies medial to internal iliac vessels

d. It receives contribution from sacral sympathetic chain

e. It lies lateral to rectum

4-The muscle which is located posterior to the right ureter is supplied by artery;

a. Iliolumbar .

b. Internal pudendal .

c. Obturator .

d. Lateral Sacral Artery.

e. Superior gluteal.

5 -Regarding pelvic nerves, choose the WRONG statement:

a. The sensation from base of the urinary bladder in females is carried by pelvic splanchnic nerve.

b. Pudendal nerve is a branch of sacral plexuses

c. The pudendal nerve block is used to anesthetizes the patient during Episiotomy.

d. The pregnant women could complain of aching pain extending down one of the lower limbs due to compression of anococcygeal nerve.

e. The ganglion impar is formed by union of the two sacral sympathetic trunks.

6-In females, which of the following arteries originates from posterior division of internal artery ?

a. inferior gluteal

b. superior vesical

c. superior gluteal

d. middle rectal

e. uterine

7- Which of the following cells maintain acid-base balance by secreting either H+ or HCO3?

A. Lacis cells .

B. Mesangial cells .

C. Dark intercalated cells of collecting ducts .

D. Juxta-glomerular cells .

E. Podocytes.

8- Choose the WRONG match:

A. Membranous urethra stratified columnar and pseudostratified columnar epithelium.

B. Proximal convoluted tubules. Simple cuboidal epithelium with ..... long microvilli.

C. Thick limbs of loop of henle. Simple cuboidal epithelium with no Microvilli.

D. Distal convoluted tubules. Simple columnar epithelium; short microvilli.

E. Distal part of spongy urethra…stratified squamous epithelium

9) Intraperitoneal fluid collection of urine and blood is caused by:

A. superior wall of the bladder injury

B. pelvic fractures

C. anterior wall of bladder injury

D. Prostatic tumor

10) The sphincter vesicae is supplied by:

A. Prostatic plexus

B. inf. Hypogastric plexus

C. coelic plexus

D. renal plexus

11) Which of the following structures doesn't pass within the spermatic cord:

A. Pampiniform venous plexus

B. Ilioinguinal nerve

C. Vestige of processus vaginalis

D. Testicular Arter y

E. Vas deferens

12) Regarding the Prostate, all are correct except ONE:

A. The prostatic venous plexus is drained by the internal ac veins

B. Apex rests on the perineal membrane

C. The inferolateral surfaces are facing levator ani muscle

D. It is related anteriorly to fascia of Denonviliers

E. The medial lobe is related to trigon of the urinary bladder

13) Choose the WRONG Statement:

A. The posterior ligaments of the urinary bladder contain vesical veins.

B. The lymphatics from spongy part of male urethra are drained by deep and superficial

inguinal lymph nodes.

C. The urethral sphincter that prevents reflux of semen into the urinary bladder during ejaculation is supplied by autonomic fibers from the inferior hypogastric plexus .

D. During insertion a male urinary catheter you feel resistance while it passes through membranous urethra as it is the narrowest part of the urethra.

E. The female urethra is more distensible than male urethra.

14) Adam is 3 months old, his parent notice a swelling in his scrotum. The doctor diagnosed it as a hydrocele.

During fluid aspiration the needle will pass through the following structures EXCEPT:

A. Internal spermatic fascia .

B. Skin and Dartos muscle.

C. Visceral layer of Tunica vaginalis.

D. External spermatic fascia.

E. Cremastric muscle and fascia.

15) A 17-year-old boy suffers a traumatic groin injury during a soccer match. The urologist notices tenderness and swelling of the boy's left testicle that may be produced by thrombosis in which of the following veins:

A. Left internal pudendal vein

B. Left renal vein

C. Inferior vena cava

D. Left inferior epigastric vein

E. Left external pudendal vein

16) An elderly man with a benign enlargement of his prostate experiences difficulty in urination, urinary frequency,and urgency. Which of the following lobes of the prostate gland is commonly involved in benign hypertrophy that obstructs the prostatic urethra:

A. Anterior lobe

B. Median lobe

C. Right lateral lobe

D. Left lateral lobe

E. Posterior lobe

17) A 59-year-old man is diagnosed with prostate cancer following a digital rectal examination. For the resection of prostate cancer, it is important to know that the prostatic ducts open into or on which of the following structures:

A. Membranous part of the urethra

B. Seminal colliculus

C. Spongy urethra

D. Prostatic sinus

E. Prostatic utricle

18) A 37-year-old man is suffering from carcinoma of the skin of the penis. Cancer cells are likely to metastasize directly to which of the following lymph nodes:

A. External iliac nodes

B. Internal iliac nodes

C. Superficial inguinal nodes

D. Aortic (lumbar) nodes

E. Deep inguinal nodes

19) A 39-year-old man is unable to expel the last drops of urine from the urethra at the end of micturition because of paralysis of the external urethral sphincter and bulbospongiosus muscles. This condition may occur as a result of injury to which of the following nervous structures:

A. Pelvic plexus

B. Prostatic plexus

C. Pudendal nerve

D. Pelvic splanchnic nerve

E. Sacral splanchnic nerve

20) A 16-year-old boy presents to the emergency department with rupture of the penile urethra. Extravasated urine from this injury can spread into which of the following structures:

A. Scrotum

B. Ischiorectal fossa

C. Pelvic cavity

D. Testis

E. Thigh

21) A 72-year-old man comes to his physician for an annual checkup. Which of the following structures is most readily palpated during rectal examination:

A. Prostate gland

B. Epididymis

C. Ejaculatory duct

D. Ureter

E. Testis

22) A 21-year-old man is involved in a highspeed motor vehicle accident. As a result, he has extensive damage to his sphincter urethra. Which of the following best describes the injured sphincter urethra?

A. Smooth muscle

B. Innervated by the perineal nerve

C. Lying between the perineal membrane and Colles fascia

D. Enclosed in the pelvic fascia

E. Part of the pelvic diaphragm

23) An elderly man with prostatitis is seen at an internal medicine clinic. The seminal colliculus of his prostate gland is infected, and its fine openings are closed. Which of the following structures is/are most likely to be disturbed:

A. Ducts of the prostate gland

B. Prostatic utricle

C. Ducts of the bulbourethral glands

D. Ejaculatory ducts

E. Duct of the seminal vesicles

24) Which of the following branches of the renal artery passes in the renal column:

A. Segmental

B. Interlobar

C. Interlobular

D. lobar

E. Arcuate

25)Regarding the Prostate, all are correct except ONE:

A. The prostatic venous plexus is drained by the internal ac veins

B. Apex rests on the perineal membrane

C. The inferolateral surfaces are facing levator ani muscle

D. It is related anteriorly to fascia of Denonviliers

E. The medial lobe is related to trigon of the urinary bladder

26) Regarding the ureter, which of the following is INCORRECT;

A. It is crossed by genitofemoral nerve.

B. Its pelvic part is supplied by branches from vesical, middle rectal and uterine arteries

C. The Inferior mesenteric vein is medial to the left ureter

D. Sensory fibers from the ureter enter the spinal cord through last two thoracic and

upper two lumbar segments .

E. One of its narrowest points located medial to ischial spine.

27) Omar, a 38 years old man is complaining of severe renal colic radiating to his flanks. X ray revealed renal stone. After surgical removal of the stone, the doctor advice his family that Omar can eat and drink after his full recovery. Why Omar can eat and drink after this operation?

A. The kidney is not a gastrointestinal organ.

B. Small intestine is supplied by superior mesenteric artery while the kidney by renal

artery.

C. The intestinal blood is drained by portal vein while renal vein is drained by

systematic circulation.

D. The intestinal pain transmitted to TI0 while renal pain to T12 segments of spinal

cord.

E. The kidney is a retroperitoneal structure.

28) Clinically, to assess the pelvis of a pregnant women before labor, we measure the distance between.

A. The two arcuate lines .

D. Sacral promontory and lower border of symphysis pubis and subtract 1.5 cm .

C. Sacro-iliac joint on one side and the iliopubic eminence on opposite

D. Sacral promontory and upper border of symphysis pubis .

E. Ischial spine and pubic Arch

29) A first-year resident in the urology department reviews pelvic anatomy before seeing patients. Which of the following statements is correct?

(A) The dorsal artery of the penis supplies the glans penis.

(B) The seminal vesicles store spermatozoa.

(C) The duct of the bulbourethral gland opens into the membranous urethra.

(D) The duct of the greater vestibular gland opens into the vagina

(E) The anterior lobe of the prostate gland is prone to carcinomatous transformation

30) A male patient has bilateral occlusion of ejaculatory ducts, his ejaculation will contain……. only:

a. Prostatic secretion and alkaline secretion rich in fructose

b. Sperms and prostatic secretion

c. Prostatic secretion

d. Sperms

e. Alkaline secretion rich in fructose

31) Choose the WRONG statement;

a. The Cremastric artery is a branch from inferior epigastric artery

b. Sinus of epididymis extends between lateral side of testis and the epididymis .

c. The Middle spermatic nerves arise from the superior hypogastric plexus .

d. The feeling of kick in the stomach accompanying injury of the testis is a referred pain

through inferior spermatic nerve.

e. The left renal vein is compressed between aorta and superior mesenteric artery

32) A 58-year-old man is diagnosed as having a slowly growing tumor in the deep perineal space. Which of the following structures would most likely be injured?

(A) Bulbourethral glands

(B) Crus of penis

(C) Bulb of vestibule

(D) Spongy urethra

(E) Great vestibular gland

33) A 62-year-old man is incapable of penile erection after rectal surgery with prostatectomy. The patient most likely has a lesion of which of the following nerves?

(A) Dorsal nerve of the penis

(B) Perineal nerve

(C) Hypogastric nerve

(D) Sacral splanchnic nerve

(E) Pelvic splanchnic nerve

34) what is not one of the posterior relations of the rt kidney:

A-rib 12 with diaphragm in between

B- parietal pleura with diaphagm in between

C- subcostal nerve without diaphragm

D- 2 nerves with the same root value

E. TWO arcuate ligaments

35) Ureteric pain at level of t4 will be referred to labia majora through :

Genitofemoral nerve

36) Wrong about the kidney:

peritoneum reflects from inferior surface of liver to cover the kidney from its upper pole to its lower pole.

37) True:

female true pelvice is shorter than males and its inlet and outlet are wider

38)A child with ruptured penile urethra, urine extravasation won't reach:

The thigh

39) Wrong about spermatic cord:

can contain the sac of direct inguinal hernia

1	A	18	C
2	B	19	C
3	A	20	A
4	A	21	A
5	D	22	B
6	C	23	D
7	C	24	B
8	D	25	D
9	A	26	A
10	B	27	E
11	B	28	B
12	D	29	A
13	D	30	C
14	C	31	D
15	B	32	A
16	B	33	A
17	D	34	E

Microbiology

1-Which of the following inhibits bacterial growth in the bladder ?

a. Urine retention

b. Bacterial biofilm formation

c. Lactoferrin in the urine

d. Urine pH of 7.4

e. Absence of secretory antibodies

2-All of the following can inhibit bacterial growth in the urinary tract except:

a. Tamm-Horsfall protein.

b. Lactoferrin.

c. Urine flow .

d. Abundance of Iron.

e. Urea.

3-Which of the following is true regarding complicated and uncomplicated UTIS?

a. Management is the same for both.

b. The most common pathogen is the same for both.

c. Bacteria lacking adhesions usually cause uncomplicated UTIS, while bacteria expressing adhesions cause complicated UTIS.

d. Risk factors are the same for both.

e. Dysuria and frequency are found only in complicated UTIS

4-A 26-year-old female, previously healthy, presents to the clinic with a 3- day history of pain on passing urine associated with frequent bathroom visits. She denies urethral discharge or itch, and reports no sexual activity in the past 6 months. Which of the following laboratory results most likely confirms her diagnosis with a UTI ?

a. Any number of RBCS in urine .

b. Urine culture revealing growth of coagulase negative, gram positive cocci .

c. Dipstick test reveals decreased urine pH.

d. Dipstick test reveals presence of nitrite .

e. Any number of WBCS in urine.

5-Which of the following is true regarding urinary tract infection treatment ?

a. Treatment can be initiated if UTI symptoms are present without need for further lab testing depending on history and physical examination

b. Urine analysis and culture is mandatory before initiation of therapy

c. Antimicrobial therapy is not always required for symptomatic UTI

d. Treatment regimen for cystitis and pyelonephritis are usually the same

e. Treatment regimen includes a combination of antibacterial, antifungal, and antiviral drugs

6-Which of the following best describes emphysematous pyelonephritis?

a. Pyelonephritis associated with vaginal discharge

b. A severe multifocal bacterial pyelonephritis with high mortality

c. Clinically asymptomatic pyelonephritis

d. Pyelonephritis caused by ureteric stone formation

e. Pyelonephritis that resolves spontaneously in 30% of patients

7-Screening for, and treating asymptomatic bacteriuria is recommended in which of the following cases ?

a. A 22-year-old male undergoing urinary tract surgery .

b. A 50-year-old male with a chronic indwelling urinary catheter . c. A73-year-oldmalewithhistoryofdiabetes.

d. A 30-year-old healthy female

e. A 60-year-old male with benign prostatic hypertrophy.

8-Screening for, and treating asymptomatic bacteriuria is recommended in which cases?

a. Patients undergoing abdominal procedures

b. Pregnant women

c. A patient with an indwelling catheter

9-Bacterial vaginosis is best described as :

a. Vaginal discharge caused by a disturbance in the vaginal microbiota .

b. Vaginal discharge caused by gram positive rods .

c. A Common sexually transmitted disease.

d. A Self-limiting disease that should not be treated with antibiotics .

e. A rare cause of vaginal discharge worldwide.

10-A 22-year-old male presents to his physician, complaining of a 2-week history of a sore on his penis. Physical examination shows a firm, raised, red, nontender chancre midway between the base and glans. Which of the following is the most appropriate course of action for the physician?

A. Test a serum sample for antibodies to herpes simplex virus.

B. Swab the chancre and culture on Thayer-Martin agar.

C. Swab the chancre and perform a Gram stain.

D. Perform a dark-field examination on a swab of the active lesion.

E. Swab the chancre and culture on blood agar.

11- A 28-year-old woman presents with fever, dysuria, urinary frequency, and flank tenderness. The urine contained numerous neutrophils and many white cell casts. Urine protein was moderately increased. A quantitative urine culture revealed more than 105 bacteria per milliliter. The most likely causative organism is:

A. Escherichia coli.

B. Haemophilus influenzae.

C. Proteus vulgaris.

D. Pseudomonas aeruginosa.

12-A 26-year-old female, previously healthy, presents to the clinic with a 3-day history of pain on passing urine associated with frequent bathroom visits. She denies urethral discharge or itch, and reports no sexual activity in the past 6 months. Laboratory tests for this patient are most likely to reveal which of the following?

a. Dipstick test reveals decreased urine pH

b. Urine culture reveals Gram positive diplococci

c. Dipstick test reveals increased leukocyte esterase

d. Urine culture reveals spore forming Gram positive rods

e. Dipstick test reveals absent nitrite

13- Which of the following is expected to be an uncomplicated urinary tract infection ?

a. Dysuria and frequency in a 30-year-old female with a ureteral catheter

b. Dysuria and frequency in a 6-year-old female

c. Dysuria and frequency in an AIDS patient

d. Dysuria and suprapubic pain in a 30-year-old male

e. Dysuria and fever in a 65-year-old diabetic male

14-A 35-year-old male presents to the clinic complaining of a genital vesicular rash that appeared a few days before the visit, with some vesicles starting to ulcerate, his history reveals unprotected intercourse with 3 different sexual partners in the last 2 months. The pathogen causing this lesion is most likely ?

a. Aspirochete.

b. Ayeast.

c. Agram-negativediplococci.

d. A double stranded DNA virus .

e. A single stranded RNA virus.

15-The pathogen that causes the common sexually transmitted disease chlamydia :

a. Is similar morphologically to the pathogen causing syphilis .

b. Is diagnosed using culture on tryptic soy agar .

c. Can survive inside epithelial cells.

d. Only affects epithelium of the genital tract .

e. Can only be transmitted through sexual contact.

16-A 20-year-old, sexually-active female presents at her family physician's office with fever, painful arthritis of the right knee, and several small pustules on her extremities. Material from the pustules and joint fluid were collected for culture on modified Thayer-Martin medium. Which of the following results are consistent with a diagnosis of gonococcal infection?

A. Growth of small colonies consisting of gram-negative diplococci. Bacteria grown on plates are catalase and oxidase positive.

B. Growth of small colonies consisting of gram-positive cocci. Bacteria growth on plates are catalase and oxidase positive.

C. Growth of small colonies consisting of gram-negative diplococci. Bacteria growth on plates are catalase and oxidase negative.

D. Growth of large mucoid colonies consisting of gram-negative bacilli. Bacteria growth on plates are catalase and oxidase negative.

E. Growth of gram-negative diplococci within polymorphonuclear leukocytes. Bacteria can utilize glucose and maltose as a carbon sources.

17-A 22-year-old male presents to his physician, complaining of a 2-week history of a sore on his penis. Physical examination shows a firm, raised, red, nontender chancre midway between the base and glans. Which of the following is the most appropriate course of action for the physician?

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D. Perform a dark-field examination on a swab of the active lesion.

E. Swab the chancre and culture on blood agar.

18-Which one of the following is characteristic of chlamydiae?

A. Reticulate bodies are an infectious, extracellular form of the organism.

B. Most genital tract infections are asymptomatic and undiagnosed.

C. They are sensitive to β-lactam antibiotics.

D. They stain gram-positive.

E. Inclusion bodies are formed from division of elementary bodies

19-A feature of chlamydiae that is unique to this group is:

A. the requirement of an obligate intracellular habitat.

B. its replicative cycle is distinguished by two morphologic forms that develop within cytoplasmic vacuoles.

C. the lack of detectable peptidoglycan in its cell envelope.

D. its use of host coenzymes of energy metabolism.

E. all of the above.

20-A 19-year old male presents at an STD clinic with a urethral discharge and dysuria. A swab specimen was collected and examined by Gram stain followed by light microscopy. Polymorphonuclear leukocytes were detected in the exudate along with intracellular and extracellular Gram negative diplococci. How should this patient's infection be treated?

A. No treatment is necessary

B. With a tetracycline-based antibiotic such as doxycycline.

C. With a third-generation cephalosporin antibiotic such as ceftriaxone

D. With a combination of ceftriaxone and doxycycine

E. With penicillin

21-Which of the following antibiotics is most likely to be effective for chlamydial infections?

A. Penicillins

B. Vancomycin

C. Cephalosporins

D. Carbapenems

E. Macrolides

22-Fungal infections are usually more difficult to treat than bacterial infections because:

a. fungal organisms grow fast

b. bacterial infections often occur in tissues that are slowly penetrated by antimicrobial agents

c. fungal infections often occur in tissues that are highly penetrated by antimicrobial agents

d. fungal infections often occur in vascular tissues

e. fungal organisms grow slowly

23-Wrong about T. vaginalis:

Endodyogeny

1	C	12	C
2	D	13	B
3	B	14	D
4	D	15	C
5	A	16	A
6	B	17	D
7	A	18	B
8	B	19	B
9	A	20	D
10	D	21	E
11	A	22	E

Pathology

1- One is true about Minimal change disease:

A. Maybe caused by nephron loss

B. Diffuse glomerular basement membrane thickening

C. Leads to recurrent hematuria

D. Selective albumin loss in urine

E. Azotemia is an important finding in blood tests

2- One is true about membranoproliferative glomerulonephritis :

A. Most common cause of azotemia in children

B. Only one type exists

C. Inflammation is not a contributing factor in pathogenesis m

D. Mesangial IgA deposits are diagnostic

E. Double contour (tram track) GBM is characteristic

3- One is true about primary membranous nephropathy:

A. Azotemia

B. Recurrent episodes of hematuria

C. Hypertension

D. Urine RBC casts

E. Massive proteinuria

4- All of the following are manifestations of nephritic syndrome, except:

A. Massive proteinuria (> 3.5 g/day)

B. RBC casts

C. Hypertension

D. Azotemia

E. Oliguria

5- A 4-year-old boy presents with severe proteinuria, hypoalbuminemia, generalized edema, and hyperlipidemia. The patient improves on an empiric trial of corticosteroids, with complete resolution of proteinuria. Which of the following is the most likely diagnosis?

A. Diabetic nephropathy

B. Focal segmental glomerulosclerosis

C. Lupus nephropathy

D. Membranous glomerulonephritis

E. Minimal change disease

6- One is true about IgA nephropathy :

A. Most common nephrotic syndrome in childhood

B. An x-linked hereditary nephritis

C. Elevated serum anti-ASO titers

D. Recovery is the usual outcome

E. Linked to abnormality in secretory immunoglobulin clearance

7- One of the following is correct about post infectious glomerulonephritis (PSGN):

A. Mostly causes nephrotic syndrome

B. Negative tests by immunofluorescence

C. Elevated anti-streptolysin O titers

D. Caused by streptococcal pyelonephritis

E. More common in adults than children

8- A 3-year-old girl presents with generalized edema shortly after recovery from an upper respiratory infection. Laboratory studies reveal marked albuminuria, as well as hypoalbuminemia and hyperlipidemia. Prior similar episodes responded to adrenal steroid medication. The most likely diagnosis is:

A. focal segmental glomerulosclerosis.

B. membranous glomerulonephritis.

C. minimal change disease.

D. poststreptococcal glomerulonephritis.

E. rapidly progressive glomerulonephritis.

9- ONE is true about focal and segmental glomerulosclerosis (FSGS):

A. A disease of childhood

B. Only some glomeruli are affected

C. Rapidly progressive glomerulonephritis

D. Positive family history in most cases

E. Subepithelial humps

10- In order to know the specific composition of immune deposits inside the glomerulus, we typically use the following test:

A. Transmission electron microscopy

B. Disecting microscopy

C. Light microscopy (Silver stain)

D. Direct Immunofluorescence microscopy

E. Light microscopy (H&E stain)

11- Which of the following factors INCREASE glomerular filtration rate?

A. Mild constriction of efferent arteriole

B. Stone in the renal pelvis (obstruction due to stone)

C. Increase in Bowman's space hydrostatic pressure

D. Severe constriction of the efferent arteriole

E. Mild constriction of the afferent arteriole

12- Which cell type comprises the visceral layer of Bowman capsule?

A. Endothelial cells

B. Juxtaglomerular cells

C. Mesangial cells

D. Podocytes

E. Extraglomerular mesangial (or Lacis) cells

13- Dense deposit disease is also known as :

A. MPGN 1

B. RPGN 1

C. PSGN

D. RPGN 2

E. MPGN 2

14- Dense deposit disease is characterized by glomerular deposits composed of one of the following:

A. IgG.

B. IgA.

C. IgM .

D. C3.

E. C4.

15- Post-infectious glomerulonephritis is most commonly linked to an immune response against the following microorganism :

A. Schistosomiasis

B. Streptococcus Group A

C. Staphylococcus

D. H. influenza

E. Corona viruses

16- A 5-year-old boy presents with hematuria. His mother states that he has had a sore throat for the past 2 days and that he has had hematuria a few times in the past, also concomitantly with a sore throat. She states that his urine usually returns to a normal clear yellow color after a few days. Which of the following is the most likely diagnosis?

A. Alport syndrome

B. Goodpasture syndrome

C. IgA nephropathy

D. Membranoproliferative glomerulonephritis

E. Poststreptococcal glomerulonephritis

17-Pathogenesis of analgesic nephropathy :-

a. T-cell mediated

b. Inhibition of PG synthesis

c. Type I hypersensitivity reaction

d. Non-covalent binding to enzymes

18-All of the following can lead to hydronephrosis, except ONE:

a. Atresia of urethra .

b. PKHDI mutations.

c. Ptosis of renal pelvis.

d. Prostatic hyperplasia .

e. Spinal cord damage.

19-All are correct regarding acute drug-induced tubulointerstitial nephritis, except one :

a. Characterized by fever, skin rash and eosinophilia .

b. Develops within days to weeks following drug exposure.

c. Causes hematuria without significant proteinuria .

d. Increased risk of urothelial carcinoma of the renal pelvis .

e. Hypersensitivity reactions may be implicated.

20- “Struvite” renal stones are composed of :

a. Magnesium ammonium phosphate.

b. Calcium phosphate.

c. Cystine crystals .

d. Uric acid crystals.

e. Calcium oxalate.

21-Which of the following may be seen in all Urinary tumors :-

a. painless hematuria

b. stone formation

c. hematuria and pain during urination

d. Eosinophilia

22-ONE statement is correct regarding tumors of the urinary tract :

a. Schistosomiasis is a risk factor of Chromophobe renal carcinoma.

b. Painful hematuria is a frequent symptom of renal cancers.

c. Wilms tumor is linked to mutations in VHL gene.

d. Clear cell carcinoma is the most common renal tumor in adults.

e. Renal papillary carcinoma reeveals mutations in VHL gene.

23-ONE is true about testicular tumors:

a. Germ cell tumors are generally considered benign tumors

b. Seminoma typically displays schiller- Duvall bodies

c. Sex cord- stromal tumors include embryonal carcinoma and teratoma

d. They are the most common tumors in men > 60 years old

e. Elevated serum AFP is considered a tumor marker for testicular yolk sac tumor

24-ONE is true about prostate gland pathology

a. Frequent symptoms of early prostate cancer include urinary urgency and hesitancy

b. Serum levels of prostate specific antigen (PSA) is used for prostate cancer screening

c. Benign prostatic hyperplasia usually arise in peripheral zones

d. Only epithelial elements are affected by benign prostatic hyperplasia

e. Cryptorchidism is an important risk factor for prostate cancer

25-The most common primary testicular tumor in children younger than 3 years is:

a. Embryonal carcinoma

b. Yolk sac tumor

c. Choriocarcinoma

d. Teratoma

26-ONE is CORRECT regarding germ cell tumors of the testes :

a. Embryonal carcinoma displays uniform small tumor cells

b. Choriocarcinoma typically displays schiller- Duvall bodies

c. Elevated serum HCG is considered a tumor marker for seminoma

d. They are most common after the age of 60

e. Post-pubertal germ cell tumors are considered potentially malignant

27-ONE is correct regarding prostate hyperplasia:

a. Cryptorchidism frequently leads to prostate hyperplasia

b. Serum level of prostate specific antigen (PSA) is markedly high

c. Involves prostate overgrowth of stroma but not glands

d. An Androgen-dependent condition of the prostate

e. Represents the precursor lesion for prostate cancer

28- ONE is true about cystic diseases of the kidney:

A. Hypertension complicates many cases of autosomal dominant polycystic disease.

B. Chronic hemodialysis is a risk factor to have simple renal cysts.

C. Polyuria and polydypsia are symptoms of adult polycystic renal disease.

D. PKD 2 mutation is linked to autosomal recessive polycystic kidney disease.

E. Nephronophthisis uremic complex is associated with numerous cortical cysts.

29- Cystic diseases of the kidney that may develop carcinomas are caused by:

A. Genetic mutation of polycystin genes

B. Inflammation

C. Chronic hemodialysis

30- Most common urinary tract tumor:

transitional cell carcinoma

31. Wrong about intratubular germ cell neoplasia:

seen in prepubertal men

32- Wrong combination :

adult type PKD – fibrocystin 1

33- Wrong about nephronophthisis-medullary cystic disease complex:

associated with hereditary hepatic fibrosis

34- Most common kidney stone in children:

oxalate stone (mostly)

35- Wrong about acute drug-induced TIN:

dose related allergy

1	D	16	C
2	E	17	B
3	E	18	B
4	A	19	D
5	E	20	A
6	E	21	A
7	C	22	D
8	C	23	E
9	B	24	B
10	D	25	B
11	A	26	E
12	D	27	D
13	E	28	A
14	D	29	C
15	B		

{وَأَن لَّيْسَ لِلإِنسَانِ إِلاَّ مَا سَعَى}