

	Tanta University - Faculty of Pharmacy Department of Clinical Pharmacy			
	Final Examination for 4th year Students			
	Course Title:	Clinical Pharmacy		Course Code: 5118
16/ 6 /2021	Term :2 nd	Marks:150	Q:75 ; Pages:7	Time:2 hr.

Exam Instructions:

- Select only ONE answer for each question

Nephrology: Dr. Tarek M. Mostafa (Q#1-40= 80 Point)

1. The reduction in kidney function in patients with kidney disease (not progressive renal failure) is the result of:

- A. The reduced functions of all nephrons.
 B. The reduced number of functioning nephrons.
 C. Glomerular hypertrophy
 D. Glomerular hypertension.

2. Regarding urine color, which of the following sentences is correct?

- A. Amber or honey urine indicates good hydration.
 B. Orange urine may indicate excess protein in urine.
 C. Pink to reddish, blue and green urine may indicate urinary tract infection.
 D. None of the above.

3. Musty-apple odor of urine may be due to:

- A. Starvation B. Diabetic ketoacidosis C. Both A & B D. Neither A nor B

4. Uncontrolled diabetes may cause the odor of urine to be as:

- A. Foul-smelling urine B. Sweet-smelling urine C. Offensive odor

5. The following compounds normally absent in the urine EXCEPT

- A. Glucose B. Ketones C. Nitrate D. Nitrite

6. Acute renal failure is characterized by:

- A. Gradual reversible decline in renal function over days or weeks.
 B. Abrupt increase in serum creatinine concentration of 0.5 if baseline creatinine is < 3 mg/dl.
 C. Abrupt increase in serum creatinine concentration of 0.5 if baseline creatinine is > 3 mg/dl.
 D. None of the above

7. Acute intrinsic renal failure is characterized by:

- A. Structural damage of the kidney B. Low fractional excretion of sodium
 C. High specific gravity of urine D. Both A & B

8. Which type of acute renal failure is characterized by variable urinary indices?

- A. Pre-renal azotemia B. Functional acute renal failure.
 C. Acute intrinsic renal failure D. Post-renal obstruction

9. BUN/SCr ratio increased in case of:

- A. Incomplete post-renal obstruction
B. Complete post-renal obstruction.
C. Both A & B
D. Neither A nor B.

10. Why we use N-acetyl cysteine before scheduling radio-contrast agents?

- A. Because it has anti-oxidant effect
B. Because it has vasoconstrictor effect
C. Because it decreases renal blood flow
D. Both A & C

11. is the most commonly used therapy to change the patient's status from oliguric to non-oliguric:

- A. Hydration
B. Diuretics
C. Both A & B
D. Neither A nor B

12. The role of dopamine when combined with diuretics is to:

- A. Increase the urine output in poor responders.
B. Enhance the cardiac output which leads to increase in renal blood flow
C. Both A and B
D. Neither A nor B

13. Which of the following treatments acts by binding potassium ion irreversibly?

- A. Calcium gluconate
B. Sodium bicarbonate.
C. Albuterol.
D. Sodium polystyrene sulfonate and sorbitol

14. The most common cause of death in patients with acute renal failure is:

- A. Hyperkalemia
B. Infection
C. Heart failure
D. Dehydration

15. Alone is not considered as a significant risk factor for chronic renal failure:

- A. Diabetes
B. Hypertension
C. Hyperlipidemia
D. All of the above

16. Which of the following is considered as risk factor and complication for CRF?

- A. Diabetes
B. Hypertension
C. Heart failure
D. Both B & C

17. All the following could be the cause of renal osteodystrophy EXCEPT

- A. Hypophosphatemia
B. Hypocalcemia
C. Hyperparathyroidism
D. None of the above

18. To decrease the rate of decline in GFR in diabetic patients, patient should administer:

- A. Anti-hypertensive agent
B. High protein diet
C. High carbohydrate diet
D. All of the above

19. Which of the following creatinine clearance (Cr Cl) indicates a state of uremia?

- A. Cr Cl = 30 ml/min.
B. Cr Cl = 25 ml/min
C. Cr Cl = 20 ml/min
D. Cr Cl = 10 ml/min

20. Pulmonary edema in patients with uremia is due to

- A. Volume overload secondary to cardiac disorder.
B. Increase in capillary permeability secondary to uremic toxins
C. Both A and B
D. Neither A nor B

21. Metabolic acidosis in CKD mainly results from:

- A. Excess bicarbonate excretion
B. Decrease synthesis of ammonia
C. Low hemoglobin
D. All of the above

22. Which of the following is not a clinical presentation of uremic state?

- A. Pulmonary edema
B. Lymphocytosis
C. Hypocalcemia
D. Myoclonic jerks

23. For management of renal osteodystrophy in end stage renal disease, the patient should administer:

- A. Calcium supplements and vitamin D
B. Phosphate supplements.
C. Folic acid
D. All of the above

24. All are used in the management of hypertension in end stage renal disease EXCEPT

- A. Salt and water restriction
B. Massive doses of loop diuretics
C. ACEI.
D. None of the above.

25. Mechanism involved in diabetic nephropathy concerns:

- A. Formation of glycated end products that reduce nitric oxide concentrations
B. Osmotic cellular stress
C. Activation of RAAS
D. All of the above

26. The most common type of kidney stones is:

- A. Calcium stone
B. Uric acid stone
C. Struvite stone
D. Cystine stone

27. The most common risk factor for calcium stone is:

- A. Idiopathic hypercalciuria
B. Secondary hypercalciuria
C. Hyperoxaluria
D. Alkaline urine

28. Renal damage usually occurs as a result of calcium stones in the following cases:

- A. Patients with primary hyperoxaluria
B. Patients with primary hypercalciuria
C. Patients with superimposed infection
D. All of the above

29. The following regarding the pharmacotherapy of calcium stones are correct EXCEPT

- A. Cholestyramine reduces intestinal calcium absorption
B. Magnesium oxide and potassium citrate increase the inhibitor capacity
C. Ascorbic acid decreases urine pH
D. None of the above.

30. Ileostomy is a risk factor for:

- A. Calcium stone
B. Uric acid stone
C. Struvite stone
D. Cystine stone

31. Pyuria is a clinical characteristic of which of the following stones?

- A. Calcium stone
B. Uric acid stone
C. Struvite stone
D. Cystine stone

32. The main mechanism by which acetohydroxamic acid exerts its action is (are):

- A. Inhibiting bacterial enzyme urease
B. Alkalization of the urine
C. Eradicating the urinary tract infection
D. All of the above

58- Treatment includes:

- A- Topical corticosteroid
B- Topical permethrin shampoo
C- Oral fusidin
D- Topical tar

(Question 59-61): A patient came to the clinic suffer from golden yellow crust near the lip. He told that it was an erythematous lesion which develop pustule that rupture to leave exudating surface which dried to form golden yellow crust

59- The suggestive diagnosis is:

- A- Folliculitis
B- Pediculosis
C- Tinea capitis
D- Impetigo

60- The causative organism

- A- Viral
B- Fungal
C- Streptococcal
D- Staphylococcal
E-None of the above

61-Concerning the crust

- A- removed by cold compressor
B- removed by warm compressor
C- shouldn't removed

62- Candida paronychia is common between

- A- Crowded areas
B- Farmers
C- Servants
D-Families

(Question 63-65): A 12 years old patient came to the clinic suffer from crops of vesicle with clear fluid. The eruption occurs on mucous membrane, and skin in centripetal distribution, with itching.

63- The suggestive diagnosis is:

- A- Tinea pedis
B- Chickenpox
C- Cellulitis
D- Psoriasis

64- Treatment includes:

- A- Gentian violet 1% with oral cephalosporin
B- Topical and oral acyclovir
C- Parental cephalosporin
D- Oral and topical fluconazole

65- The disease transmitted by

- A- Close prolonged contact
B-Droplet
C-Insect bite
D-Cattle

66-Dapsone is used for treatment of

- A- Leprosy
B- Eczema
C- Urticaria
D- Psoriasis

Question (67-70): An athletic male suffers from itchy, scaly fissures with moist white maceration between the toe webs

67-The suggestive diagnosis is:

- A-Herpes zoster
B- Tinea pedis
C- Varicose eczema
D- Candida paronychia

68-The origin of this disease is:

- A- Bacterial
B- Viral
C- Fungal
D- None of the above

69- Treatment includes:

- A-Topical fusidic acid
B- Topical acyclovir
C- Topical terbinafine
D-None of the above

70- Instructions to this patient

- A- Avoid contact with animal
B- Use cottony clothes
C- Use wet clothes to reduce the inflammation
D- None of the above

- 44- Concerning treatment of the previous case:**
 A- Topical Zinc oxide B- Topical corticosteroid C- Topical fusidin
 D- All of the above E- None of the above
-
- 45- Concerning duration of treatment of the previous case:**
 A- One week B- 3 weeks C- 4 weeks D- Up to 3 months
-
- 46- Concerning macules, it appears in:**
 A- Vitiligo B- Tinea versicolor C- Psoriasis
 D- Both A & B E- All of the above
-
- 47- Men with androgenic alopecia have:**
 A- High Sex hormone binding globulin B- Low DHT
 C- High 5-alpha-reductase D- All of the above E- None of the above
-
- Question (48-51): A patient came to the clinic suffering from eruption all over his body as well as on mucous membrane in centripetal distribution. He stated that it appear as sudden crops of vesicles then become umblicated with turbid fluid.**
- 48- The suggestive diagnosis is:**
 A- Bullous impetigo B- Shingles C- Chicken pox D- Atopic eczema
- 49- The disease may be preceded by:**
 A- Tingling B- Fever, malaise C- Pain D- None of the above
- 50- The best treatment includes:**
 A- Gentian violet B- Topical antibacterial C- Topical antiviral D- None of the above
-
- 51- The disease transmitted by:**
 A- Direct contact B- Droplet C- From animal to human D- None of the above
-
- 52- The organism enters the skin through abrasions. This occurs in:**
 A- Cellulitis B- Plane wart C- Herpes simplex D- Both A&B E- Both A&C
-
- 53- In lepromatous leprosy:**
 A- Lepromin test is positive B- Bacilli are present in large numbers
 C- It occurs in high cell mediated immunity D- None of the above
-
- 54- The clinical picture of herpes zoster is:**
 A- Sudden crops of vesicles in centripetal distribution
 B- Raised single or multiple colored papule
 C- Dusty-red plaques covered by silver scales D- None of the above
-
- 55- Wheels are the characteristic features of:**
 A- Urticaria B- Dermatitis C- Vitiligo D- Psoriasis
-
- (Question 56-58): A patient came to the clinic suffer from single well defined patch totally devoid of hair with smooth, soft skin on the scalp.**
- 56- The suggestive diagnosis is:**
 A- Folliculitis B- Pediculosis C- Tinea capitis D- Alopecia areata
- 57- The disease transmitted by**
 A- Close prolonged contact B- sharing caps, combs, or brushes
 C- Cattle D- None of the above

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B- Low DHT

C- High 5-alpha-reductase

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E- None of the above

72- Concerning Urticaria:

A- It's characterized by appearance of wheals which resemble stings of nettles

B- The patient's clothes should be washed away of his family's

C- Treatment mainly involve the use of systemic antibiotic

D- All of the above

E- None of the above

73- The main cause of the infection with cellulitis is:

A- The infection occurs secondary to scabies

B- The infection occurs due to contact with cattle

C- The organism enter the skin through skin abrasion

D- None of the above

74- Kerion celsi provoked by the fungus of cattle ring worm.

A- True

B- False

75- Systemic antifungal is mandatory in treatment of tinea cruris

A- True

B- False

