

MINISTRY OF MEDICAL SERVICES,

CLINICAL OFFICERS COUNCIL,

REGISTRATION EXAMINATION,

SEPTEMBER 2010

PAPER: PAPER II (TRUE/FALSE)

TIME: 3 HOURS

INSTRUCTIONS:

1. Write your COC Registration number on ANSWER SHEET used
2. Marks will be lost for every sheet of paper without COC Registration number
3. Attempt all questions
4. Do not use a pencil
5. Answer all questions on the answer sheet provided by marking ‘X’ against the appropriate response
6. You score one mark for every correct response
7. You will be penalized one mark (minus one) for every wrong answer
8. You do not score or loose a mark for not responding to an option
9. All cancellations must be clearly done
10. A woman from Kakamega presents with an Hb of 7.0 g/dl. On examination, the cells are found to be microcytic hypochromic
11. Menstrual history is important
12. Sickle cell disease is a likely diagnosis
13. Barium meal studies may be useful
14. Immediate transfusion is indicated
15. Tapeworm could cause
16. A 20 year old student presents with thick yellowish urethral discharge and dysuria
17. Gram stain will probably show gram negative intracellular diplococcal
18. Metronidazole is indicated
19. It is most likely Lymphogranuloma veneuram
20. Diagnostic counseling & testing is advisable
21. Chlamydia may be a cause
22. A 46 year-old obese woman is admitted with two days history of a lower limb swelling. The limb is warm and tender
23. She may be having cellulitis
24. Filariaris is the most likely diagnosis
25. Deep venous thrombosis is likely
26. Elevation of the limb is important in treatment
27. Recent surgical removal of an abdominal malignancy is contributing factor
28. A 24 year-old man presents to your clinic with marked dyspnea and hemoptysis
29. Pulmonary TB is definitely the diagnosis
30. A murmur of mitral stenosis may be present on auscultation
31. Bronchiectasis could be the cause
32. Intravenous aminophylline may be useful
33. Franol and heamentics would be sufficient treatment
34. A fisherman from lake Victoria presents with progressive weight loss, skin rash, dysphagia and oral thrush
35. HIV counseling and testing is necessary
36. He has carcinoma of esophagus definitely
37. A chest x-ray is a relevant test
38. Flagyl should treat the oral thrush
39. Dysphagia may respond to fluconazole
40. A 25 year-old female is admitted with an acute onset of generalized erythromatous rash with severe conjunctivitis, stomatitis and vaginitis, during a course of antibiotic therapy
41. Continue the antibiotic therapy
42. Presentation favors Steven-Johnson syndrome
43. The features are those of HIV infection
44. Co-trimoxazole could be the offending agent
45. Steroid therapy is highly recommended
46. The following statement are true about hypertension
47. A single BP reading of 180/100 mmHg is conclusive of mild hypertension
48. Patient education is essential for good drug compliance
49. Young patients should be investigated for secondary hypertension
50. Exercise is bad for patients as it may precipitate a stroke
51. Smoking is irrelevant to good control
52. A prolonged systematic steroid therapy may cause
53. Osteoporosis
54. Skin atrophy and easy bruising
55. Flare-up of quiescent PTB
56. Hypertension
57. Glucose intolerance
58. A young man with sickle cell disease presents with anemia
59. Surgical exploration is indicated to avoid death
60. Anemia is responsive to iron therapy
61. Pains are due to Ischemia
62. Pains are due to bleeding in the bones
63. Osteomyelitis may be a complication
64. Respond to the following findings elicited on examination of a patient suspected to have a lung disease
65. The trachea is shifted away from the affected side in tension pneumothorax
66. Vocal fremitus is increased on the right sided pleural effusion
67. Finger clubbing commonly occurs in severe cases of chronic lobar pneumonia
68. Highly lymphocyte count and raised proteins in pleural fluid is suggestive off tuberculosis effusion
69. Montoux test usually positive in miliary TB

11. Respond to the following statement on arthritis

1. A positive rheumatoid factor is diagnostic of rheumatoid arthritis
2. Large joints are mainly affected in rheumatoid arthritis
3. Migratory joint swellings occur in acute rheumatic fever
4. Normochromic, normocytic anemia occurs in rheumatoid arthritis
5. Peripheral neuropathy is a recognized complication

13. Complicated Amoebiasis presents with

1. Hepatocellular carcinoma
2. Sub phrenic abscess
3. Alcoholic hepatitis
4. Portal hypertension
5. Hepatic hydatid cyst

14. In anthrax:-

1. Penicillin is the drug of choice
2. Pulmonary anthrax has the poorest prognosis
3. Is an occupational disease
4. An animal that dies of anthrax must be disposed
5. Septicemia is a likely complication

15. Rabies

1. Fatality rate is 40%
2. Hydrophobia is a feature
3. Negril bodies are found in the brain of dead infected dogs
4. Has a vaccine for active immunity
5. Facial bites have a short incubation period

16. Nephrotic syndrome

1. May follow diabetic kidney disease
2. Is characterized by hypoalbuminemia and oedema due to proteinuria
3. Should be treated with low protein high carbohydrate diet
4. Furosemide (Lasix) and spironolactone (aldactone) are not useful in the management
5. Pre-orbital oedema on waking up in early morning is a common feature

17. Peripheral neuropathy may be a complication of the following

1. Leprosy
2. HIV infection
3. Alcoholism
4. Diabetes mellitus
5. Hypoglycemia

18. The following are associated with DVT

1. Prolonged coma
2. Fractures of the long bones
3. Pregnancy
4. Oral contraceptives
5. Post-partum

19. The CD4 count of AIDS patients’ drops below 200/u/L and prophylaxis is initiated to prevent pneumocystis pneumonia, the effective drug used is:

1. Atavaquaone
2. Pentamidine
3. Primaquineole
4. Pyrimethamine plus sulfadiazine
5. Trimethoprim plus sulmethoxazine

20. Loefler’s syndrome is found in;

1. Hookworm infestation
2. Ascariasis
3. Strogloides starcoralis infestation
4. Pinworm infestation
5. Taenia saginata infestation

21. Childhood rickets is associated with the following features

1. Rachitic rosary
2. Cranial bossing & craniotabes
3. Classical cupping sign at the epiphysis on x-ray of the wrists
4. Bow legs and knock knees
5. Raised serum alkaline phosphatase levels

22. About primary pulmonary tuberculosis

1. Primary infection leads to hypersensitivity to tuberculin
2. Bronchial compression by enlarged lymph nodes is a known complication
3. Cavitation in the lungs is common
4. Productive cough is a prominent symptom
5. Protein energy malnutrition is a common complication

23. The following statements are true concerning febrile convulsions

1. Should be diagnosed in a seven year old child
2. Tends to run in certain families
3. Presents with tonic-clonic muscle movements
4. Has good prognosis
5. EEG is always abnormal

24. A one week old male baby presents with breast engorgement which when pressed yields whitish fluid. He is otherwise normal. Which of these statements are true?

1. The fluid is likely to be pus
2. The breast should be squeezed daily until dry
3. Baby should be started on antibiotics after a swab
4. Could be witches milk and should be left undisturbed
5. Referral to the pediatric surgeon is essential

25. A ten year old child in an asthmatic attack should best be given

1. IV adrenaline
2. Subcutaneous Aminophylline
3. IV hydrocortisone and oxygen
4. Morphine to alley anxiety
5. Subcutaneous adrenaline and nebulization

26. Examination of the chest region

1. A barrel shaped chest is in keeping with cyanotic congenital heart defect
2. The presence of costo-condrial junction thickening may suggest vitamin C deficiency
3. The tern chest in drawing can be used inter changeably with intercostal recession
4. Crackles are an indication of very severe pneumonia
5. Finding a systolic murmur in the first 24 hours if life always indicates a congenital heart defect
6. A one year old patient sustained hot water burns with blisters covering entire left arm and left lower limb
7. He sustained 20% burns
8. He sustained 36% burns
9. The burns were third degree
10. Prognosis is good
11. The burns are best treated by application of gentian violet
12. After the delivery of a baby its very important to examine and rule out presence of birth injuries
13. Caput succedaneum denotes over riding of the cranial bones
14. A cephalohematoma should be treated by incision and drainage or aspiration
15. Intracranial hemorrhage mat present with convulsions
16. Erbs palsy refers to fracture of the humerus
17. Bell’s palsy resolves on its own
18. The following steps can assist in investigating a child suspected to have a congenital malformation
19. Ask about maternal use of alcohol
20. Ask about the use of drugs during pregnancy
21. Ask about the child’s developmental milestones
22. Find out on the parent’s age
23. Inquire about prenatal history
24. Concerning fluids in the management of dehydration
25. Ringer’s lactate (Hartman’s) solution has more sodium than normal saline
26. Half-strength Darrow’s solution has more potassium than Ringer’s lactate solution
27. To make half strength Darrow’s with 5% glucose you need to add 5g of 50% dextrose to 450mls of the solution
28. Normal saline (0.9%) has low levels of potassium
29. ORS has less sodium levels than resomal
30. Indications of prophylactic treatment in febrile convulsions involve
31. One febrile convulsion –i.e. first episode
32. One complex febrile convulsions
33. One febrile convulsion with a family history of epilepsy
34. One febrile convulsion and a neurological abnormality
35. The prophylaxis should continue till the child reaches 5 years of age with one year seizure free period
36. In the control of diarrheal disease in infancy, one should emphasize on:
37. Use of clean bottles
38. Administration of lomotil
39. Breast feeding
40. Early introduction of cereals
41. Administration of diluted cow’s milk
42. In resuscitation of the newborn;
43. Sodium bicarbonate should be given if the patient is not breathing
44. Intra-thoracic adrenaline should be administered if there is no heart beat
45. Intravenous 50% dextrose should be given if hypoglycemia is suspected
46. It is a futile exercise in an extremely low birth weight baby
47. Wiping baby-dry and ensuring warmth are both extremely valuable upon delivery
48. Otitis media in an infant
49. Is usually caused by E.Coli
50. Should be treated with ear drops
51. Meningitis is a known complication
52. Can be a cause of febrile convulsion
53. Otoscopy is not essential as external auditory meatus is narrow
54. A two year old child with persistent cough and 15mm in duration on Mantoux test and no BCG scar could receive
55. Isoniazid for three months
56. Observations and repeat mantoux after 2 weeks
57. Rifater for two months , then Rifinah for four months
58. Streptomycin for two months
59. Put the patient on a combination of INH and streptomycin for two months
60. A one year old patient presented with a generalized seizure. This was the third episode in the year.
61. This is a severe neonatal seizures
62. IM diazepam should be given immediately to stop the seizure
63. Maintenance phenobarbitorne is essential
64. EEG is not necessary as the diagnosis is obvious
65. Heavy doses of phenobarbitone can cause respiratory depression
66. In regard to IMCI, the following are true:
67. IMCI means infant mortality caused by infections
68. Emphasizes pneumonia, diarrhea, malaria, measles, malnutrition, and AIDS
69. This strategy is in the expansion phase in Kenya
70. Aims at reducing mortality and morbidity of under five years
71. The family and community component is irrelevant in Kenya
72. In relation to prevention of HIV/MTCT, the following are true
73. Intervention measures should start antenatally
74. Includes administration of Zidovudine to baby daily from birth for one week
75. Includes administration of nevirapine to the baby once within 12 hours of life
76. Transmission occurs in 60% of babies of mothers who are HIV positive
77. Mother To Child transmission does not occur via breast milk
78. In urinary tract infection
79. Urinalysis is the best of choice
80. Congenital posterior urethral valves are predisposing factor
81. Entamoeba hystolitica is the commonest cause in infants
82. Frequently occurs in kwashiorkor
83. Does not occur in neonates
84. A 12 year old boy is developing anaphylaxis after injection of penicillin in your clinic, epinephrine intramuscular injection will cause
85. Bronchodilation
86. Hypoglycemia
87. Hyperglycemia
88. Leukocytosis
89. Tachycardia
90. In benign prostatic hyperplasia (BPH)
91. Prostate specific antigen levels in serum are markedly elevated
92. The median groove of the prostate is exaggerated
93. Per rectal examination reveals a nodular mass
94. The Para-urethral transition zone glands undergo nodular hyperplasia
95. The patient usually has difficulties in passing urine
96. Factors contributing to stone formation in the urinary tract include
97. Stasis of urine
98. Chronic urinary infection with urea-splitting bacteria
99. Prolonged immobilization
100. Taking plenty of fluid
101. Foreign bodies in the urinary tract
102. Patients with duodenal ulcer
103. Usually have loss of appetite
104. Vomit after meals
105. Are more prone to perforation than gastric ulcers
106. Are associated with H.pylori
107. Are associated with loss of weight
108. The following are true about paralytic ileus:
109. There is severe abdominal pain
110. Localized gas shadows are seen in small gut only
111. Fluid levels are seen on x-ray
112. Bowel sounds are reduced or absent
113. It comes after operation
114. An intern in a provincial General hospital, you are taking care of a post-operative patient who has had an abdominal surgery. On the 5th post-operative day you notice that there is disruption of the layers of the operative wound with a serosanguinous fluid discharge. Respond to the following concerning your patient’s condition:
115. He has developed an incision hernia
116. This is wound dehiscence
117. His wound was probably inadequately closed
118. The patient may develop evisceration
119. The wound should be managed conservatively by dressing
120. A 70 year old man comes to you with complaints of gradual onset pain in the lower back for some time. He now has numbness in the lower limb to the foot. X-ray of the Lumbo-sacral spine shows increased density of L5 with partial collapse of its body. No trauma is reported
121. The old man may require hormonal therapy
122. This patient has sciatica
123. The patient most likely has carcinoma of the prostrate
124. The problem is most likely due to senile osteoporosis
125. Myelomatosis is the likely diagnosis
126. You have admitted a child with severe acute onset pain and swelling of the hip. He is febrile and aspiration of the hip produces pus. The following line of management is correct
127. Physiotherapy is recommended immediately
128. Immobilize the joint with plaster
129. Skin traction is useful
130. Culture and sensitivity of the aspirated pus is mandatory
131. Arthrotomy is indicated
132. A young male patient complains of severe abdominal pain. The pain initially centered around the umbilicus and colicky. Now the patient has fever. Examination reveals marked rebound tenderness:
133. The patient has appendicitis
134. Do abdominal paracentesis
135. Acute cholecystitis is most likely diagnosis
136. Silent abdomen is an important finding
137. Strong broad spectrum antibodies has a place in managing this patient
138. At the casualty department you examine a patient with severe pain of the shoulder. He fell while playing football and cannot use his arm. You notice a prominence in the infraclavicular fossa. The tip of the acromion is very prominent laterally.
139. This is anterior dislocation of the shoulder
140. This is Sub coracoid dislocation of the shoulder
141. “Light bulb” appearance will be seen on radiographs of the shoulder
142. This problem simply requires arm sling and analgesics
143. His problem can become recurrent
144. Hemorrhoids may be secondary to any of the following
145. portal hypertension
146. colonic carcinoma
147. pregnancy
148. gastric outlet obstruction
149. Cushing syndrome
150. Preterm
151. Is defined as labour occurring after 20 weeks but before 37 weeks gestation
152. There must be demonstrated cervical effacement or dilation to meet a diagnosis of preterm labour
153. Preterm birth complicates 10-15% of all pregnancies
154. Cervical incompetence is a differential diagnosis
155. It is not accompanied by rupture of the membrane
156. Regarding vaginal discharge
157. Curd-like discharge is typical of trichomonial infection
158. A fishy smell after intercourse is due to bacterial vaginosis
159. Cervicitis is best treated with Clotrimazole
160. Most common cause is gonococcus
161. It is always pathological
162. A grand multipara is likely to develop
163. Pregnancy induced hypertension
164. Placenta praevia
165. Uterine rupture
166. Cephalo pelvic disproportion
167. Placenta accrete
168. Josephine Kornen, 26 years old lady. Para 0+0 gravid 1 presents to you while in labour ward with a history labour pains at 380 weeks. Pelvic examination revealed a presenting cord. Management involves
169. Examination under anesthesia
170. Knee-chest position while awaiting theatre
171. Caesarean section once the blood has been grouped and cross matched
172. Caesarean section after the cord has stopped pulsating
173. Complete bed rest under heavy sedation
174. Cephalo-pelvic disproportion
175. History of rickets in childhood is significant
176. Trial of labour can be attempted
177. Can be managed by destructive delivery
178. Past obstetric history is of paramount importance
179. The presenting part is well applied to the cervix
180. A post natal mother who lost her baby 1 week after delivery presents to you at a health center with history of painful swelling of both breasts with established location. This patient can benefit from
181. Oxytocin
182. Ferrous sulphate
183. Clomiphene citrate
184. Bromocriptine
185. Clotrimazole
186. The following are pillars of safe motherhood
187. Maternal child care
188. Targeted postpartum care
189. Focused antenatal care
190. Post abortal care
191. Maternal mortality
192. A patient aged 18 years, came to hospital with history of amenorrhea for 20 weeks, vaginal bleeding and on examination, cervix was dilated. Management options include
193. Manual vacuum aspiration
194. Induction by oxytocin
195. Caesarean section
196. Dilation and curettage
197. Sharp curettage
198. Maternal puerperal pyrexia may be due to
199. Puerperal psychosis
200. Breast abscess
201. Malarial infection
202. Intra uterine growth restriction
203. Deep venous thrombosis
204. The following are important parameters in describing the mechanism of labour
205. Gestation
206. Descent
207. Rotation
208. Extension
209. Internal
210. A patient aged 30 years presented to you with a history of amenorrhea, excessive vomiting and passage of grape like vesioles vaginal discharge for 12/52. On physical examination; P/A fundal height is 24/52
211. Pregnancy test is always negative in these condition
212. Fetal heart sounds will be detected on ultrasound
213. Hydatidiform mole is a likely differential
214. Sonography will show snow storm appearance
215. Laparotomy will be the best option in its management
216. Bartholin’s gland
217. Is located at the mons pubis
218. Is a lubricating gland
219. When infected may form abscess
220. Management of the abscess is by incision and drainage
221. Has no physiological value
222. A young female patient using oral contraceptives is to be treated for pulmonary tuberculosis. She is advised to use an additional contraception since the efficacy of the oral agents is commonly decreased if her regimens include
223. Amikan
224. Ethambutal
225. Isoniazid
226. Pyrazinamide
227. Rifampin
228. A young woman suffering from myoclonic seizures was receiving affective single-drug therapy with valporic acid. Since she was planning a pregnancy, her physician switched her to an alternative medication with less potential for teratogenicity. Which of the following drugs is effective in myoclonic seizures but causes extreme drowsiness at the control dose level?
229. Carbamazepine
230. Clonazepam
231. Ethosuximude
232. Lamotrigine
233. Topiramate
234. After delivery of a healthy baby, a young woman develops severe bleeding because her uterus has failed to contract, which of the following drugs you will administer to this woman
235. Desm opressin
236. Octre otide
237. Oxytocin
238. Prolactin
239. Triamcinolone
240. The following drugs are contraindicated in pregnancy
241. Rubella, measles and smallpox vaccine
242. Iodine
243. Chlorpropamidie
244. Aminophylline
245. Cimetidine
246. Risk factors of Puerperal Psychosis include
247. Previous history of traumatic childhood
248. Family history of psychological illness
249. Fear of labour due to previous experience
250. Strong emotional support during adult life
251. Normal sleep pattern
252. Ultra sound can be used to show the following
253. Fetal viability
254. Fetal presentation
255. Fetal abnormalities
256. Polyhydramnious
257. Fetal distress
258. In ectopic pregnancy
259. Severe anaemia is often present
260. Pregnancy test is always positive
261. Urinary tract infection can be a cause
262. Coombs test is important in the diagnosis
263. Intra-peritoneal bleeding is a differential
264. The following investigations are carried out in a patient with anaemia in pregnancy
265. Stool for ova and cysts
266. Sickling test
267. Blood test for malaria parasite
268. Bone marrow aspirate
269. Full haemogram, peripheral blood film and ESR
270. In calculating the neonatal mortality rate, the following will be useful:
271. The number of all live births
272. The number of births in a year
273. The number of women age 15-49 years
274. The mild-year population is required
275. The number of neonatal deaths
276. Mental illness
277. Schizophrenia is one of them
278. Depression is common
279. Hysteria is uncommon
280. Are rare in Kenya
281. Are common in various communities in Kenya
282. Methods used to elicit morbidity rates include
283. Prevalence rate
284. Incidence rate
285. Case fatality rate
286. Duration of illness
287. Fertility rate
288. On growth and development of a child
289. Depends on the pre-pregnancy status of the mother
290. It depends on the genetic factors of the parents
291. Environmental factors do not play a role
292. Maternal infection can negatively influence growth and development
293. Nutritional status of the mother during pregnancy Is crucial
294. Resistance of the body to micro-organism
295. Can be achieved by passive immunity
296. Vaccines lead to humoral immunity
297. Can be achieved by active immunity
298. Vaccines always lead to cellular immunity
299. Immunoglobulin can be given after exposure to infection e.g. measles or rubella
300. Regarding refuse
301. Is a major problem in the world
302. Can only be handled by health workers
303. Rodents can multiply in well managed refuse collection system
304. Flies are not a problem in a poorly managed refuse collection
305. Can result in traumatic injuries
306. The ways of assessing the health of a whole community include
307. Taking medical history and physical examination
308. Assessing the morbidity
309. Finding about the utilization of medical services
310. Finding immunization coverage
311. Finding out the number of mothers attending the prenatal health care clinic
312. Long term approach to control of diarrheal diseases includes
313. Improvement in nutrition
314. Improvement in water supply
315. Improvement in food hygiene
316. Oral therapy
317. Immunizations

1. The special groups in the society are
2. Under 5s
3. Antenatal and post natal women
4. Workers
5. School children
6. Old age
7. The following are the roles of clinical officer’s council
8. Diagnosis and management of diseases
9. Management of health facilities
10. Medical legal practices
11. Training and research
12. Community involvement
13. Types of decisions which can be made in an organization include
14. Emergency decisions
15. Debatable decisions
16. Managerial decisions
17. Routine decisions
18. Rationale decisions
19. When we talk about human skills in management, the manager should
20. Realize that goals cannot be achieved without people
21. Have the ability to work, motivate and counsel the staff under him/her
22. Be able to work using available equipment
23. Be sympathetic, non-judgmental and understanding
24. Have no assumptions
25. Delegation
26. Ensures more work is done at the same time
27. Ensures delegators have more time to attend to more crucial tasks
28. Ensures delegates have opportunities to demonstrate their unexploited potentials
29. Requires supervision and follow up
30. Gives the organization the confidence of continuity due to diversification of expertise
31. Human resource management
32. Is one of the most vital resources in any organization
33. Is a function within organizations that focuses on retirement and management of personnel
34. Is an organizational function that deals with issues related to personnel such as compensation, performance management and organization development
35. Involves planning and organizing of the organizations’ future
36. Is the mediator between the management and the employees
37. The following are some of the seven rights in logistics management
38. Right product
39. Right place
40. Right cost
41. Right storage
42. Rational use
43. Some of the sources of external recruitment include
44. Employment referrals
45. Advertising
46. Application file
47. Colleges and universities
48. Internet
49. The medico-legal issue include
50. Assault
51. Road traffic accidents
52. Sexual abuse
53. Murder
54. Negligence of client
55. Policies are very important in any organization. How would you interpret policy statement in organization
56. An internal administrative law governing executive actions within the organization
57. A statement of primary objectives of a business undertaking
58. An organization point of view
59. A guide for making administrative decisions
60. A way of diverting cause of action
61. A team has been geared to undertake a certain assignment and you are chosen as the chairperson. You would like to take the following important measures into consideration
62. Setting ground rules for team procedures for maintaining the team and accomplishing its work
63. Clarifying and agreeing to the teams’ objective
64. Deciding on how much time and energy must be committed to achieve goals
65. Share expectations about working together
66. Determine a process for conflict resolution
67. The supervisor wants to go early retirement to set up her own business at 50 years and she expects to be paid her pension benefits immediately. What would you advise her about the eligibility of getting a grant of pension benefits?
68. Age, not less than 50 years
69. On retirement on grounds of ill-health
70. On abolition or re-organization of office
71. On retirement under public interest
72. On attaining compulsory retirement age of 55 years old rule

END!!

GOOD LUCK!!