

DR AUDI
— INTERNATIONAL —

INTERNAL MEDICINE REVISION QUESTIONS



**OVER 500 MULTIPLE
CHOICE QUESTIONS,
CASE STUDIES WITH
SHORT AND LONG
ESSAYS**

DR AUDI

MUTHEU MUTUA

Internal Medicine

Second Edition

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ISBN: 978-9914-702-91-0

PUBLISHING:

Published by Dr Audi International
Designed by Dr Audi International
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PREFACE

TEST YOUR INTERNAL MEDICINE is primarily meant for undergraduate students in medical school.

The main objective of this book is to help students review their knowledge of Internal Medicine acquired through standard textbooks. Internal Medicine is one of the essential subjects in the clinical areas and a sound knowledge of it is important for anyone in medical school. This book comprises of questions compiled from various universities and colleges and is designed to help students in their revisions and provide them with a feedback on their progress and an opportunity to improve.

This book has 10 test papers and each test paper consists of three sections: Section A has 30 True/False Questions and Section B consists of essay questions worth 50 Marks.

Students of Internal Medicine will find this book useful. A quick perusal of the questions will provide evidence that the book intends to stimulate reasoning. Suggestions and criticism about the book are welcomed.

SULEIMAN NDORO JNR (DR AUDI)
DR AUDI INTERNATIONAL

TEST PAPER 1

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Acute renal failure

- A. Can be caused by hypovolemic
- B. Presents with bleeding tendencies
- C. Polyuria can be a presenting feature
- D. Causes anemia
- E. Edema is due to increased capillary permeability

2. Pericarditis can be caused by:

- A. Hypertension
- B. Uremia
- C. Bronchial asthma
- D. *Mycobacterium tuberculosis*
- E. Rheumatoid arthritis

3. Complications of hypertension include the following:

- A. Diabetes mellitus
- B. Acute renal failure
- C. Cerebral hemorrhage
- D. Pulmonary edema
- E. Chronic renal failure

4. The following factors interfere with the host's resistance to malaria

- A. Splenectomy
- B. Sickle cell disease
- C. Glucose 6 phosphate deficiency
- D. Sickle cell trait
- E. Splenomegaly

5. Epileptic seizures are associated with the following conditions:

- A. Meningitis
- B. Brain abscess
- C. Hypocalcaemia
- D. Hepatitis

E. Brain tumors

6. The following conditions can predispose to ischemic heart disease:

- A. Atheroma
- B. Anemia
- C. Thyrotoxicosis
- D. Thrombosis
- E. Hypotension

7. In the current management of bronchial asthma:

- A. Aminophylline injection is a 1st line treatment drug
- B. Beta agonist play a major role
- C. Beta blockers can be given
- D. Nebulization means intravenous plus inhaler
- E. Intravenous adrenaline is very important

8. The following are signs of increased intra-cranial pressure:

- A. Projectile vomiting
- B. Vomiting preceded by nausea
- C. Constricted pupils
- D. Blurring of vision
- E. Diarrhea

9. Precipitating factors to thyroid storm include:

- A. Septicemia
- B. Subtotal thyroidectomy
- C. Aspiration pneumonia
- D. Urinary tract infection
- E. Irradiation

10. The following are feature of bronchiectasis:

- A. Finger clubbing is a feature
- B. Halitosis can be a feature
- C. Large quantities of sputum
- D. Postural drainage is part the management
- E. The trachea deviates towards the affected side

11. Features of hepatic encephalopathy include:

- A. Fetor hepaticas
- B. Flapping tremor
- C. Decreased mental function
- D. Hypotonia
- E. Hypo-reflexes

12. Causes of Upper GIT bleeding include:

- A. Renal polyps
- B. Peptic ulcer
- C. Hemorrhoids
- D. Esophagitis
- E. NSAIDS

13. Differential diagnosis of ulcerative colitis and Crohn's disease include:

- A. Diverticulitis
- B. NSAIDS
- C. Ischemic colitis
- D. Diverticulitis
- E. Salmonellosis

14. Type I diabetes mellitus (insulin dependent):

- A. Common in childhood
- B. Always need insulin
- C. Identical twin have up to 50% chances of developing type 1
- D. Maybe associated with auto-immune diseases
- E. Common in lean people

15. The following urinary conditions may present with dysuria:

- A. Urinary calculi
- B. Urethritis
- C. Nephrotic syndrome
- D. Acute cystitis
- E. Acute glomerulonephritis

16. Drugs useful in hepatic failure include:

- A. Vasopressin
- B. Vitamin K
- C. Lactulose
- D. Neomycin
- E. Furosemide

17. In management of upper GIT bleeding:

- A. Antibiotics have a major role
- B. Prothrombin time index is important
- C. Urea and electrolytes is an important undertaking
- D. All patients must be transfused
- E. Endoscopic examination should be done as a first aid measure

18. Factors precipitating seizures include:

- A. Alcohol withdrawal
- B. Deep sleep
- C. Mental alertness
- D. Uncommonly loud noises e.g. music
- E. Flickering lights e.g. TV and computer screens

19. A 42 years old woman presented with interphalangeal joints pains with stiffness more marked in the early morning on and off for the last 6 months

- A. Patient may later present with pleural effusion
- B. Rheumatoid arthritis is a possible diagnosis
- C. Bed rest is mandatory
- D. Uric acid levels in blood is very high
- E. This is most likely gout arthritis

20. The following are differential diagnosis of hematuria:

- A. Cystitis
- B. Pelvic trauma
- C. Urethral calculi
- D. Acute glomerulonephritis
- E. Schistosoma japonicum

21. Complications of blood transfusion include:

- A. Urticaria
- B. Circulatory failure
- C. Iron overload
- D. Thrombophlebitis
- E. Air embolism

22. Concerning hepatitis:

- A. Recent outbreak of jaundice in the community suggests hepatitis A virus
- B. Hepatitis B can lead to liver cirrhosis
- C. Hepatitis A is maximally infectious before onset of jaundice
- D. There are carrier state
- E. Hepatitis B can lead

23. Clinical features of organophosphate poisoning include:

- A. Dilated pupils
- B. Increased salivation
- C. Sweating
- D. Jaundice
- E. Muscle weakness

24. The following are secondary causes of hypertension:

- A. Renal disease
- B. Renal artery stenosis
- C. Pheochromocytoma
- D. Steroid therapy
- E. Hypernatraemia

25. The following are known causes of acute pancreatitis:

- A. Idiopathic
- B. Alcohol
- C. Gallstones
- D. Mumps
- E. Steroids

26. The following are cardinal symptoms of kidney and urinary tract infection

- A. Dysuria
- B. Frequency
- C. Loin pain
- D. Urinary retention
- E. Difficulty in breathing

27. Features of iron deficiency anemia include:

- A. Brittle nails
- B. Angular stomatitis
- C. Koilonychias
- D. Bleeding tendencies
- E. Megaloblastic

28. Ascaris lumbricoides infestation is associated with:

- A. Ground itch
- B. Peri-anal itch
- C. Bloody mucoid diarrhea
- D. Presence of worms in vomitus
- E. Can be prevented by proper disposal of human waste

29. Candidiasis:

- A. Common in diabetic patients
- B. Demonstrated by scrapings from infected lesion
- C. Fluconazole is effective in treatment
- D. Is due to protozoal infection
- E. Can be sexually transmitted

30. On bronchial asthma: -

- A. It may result from mucosal swelling
- B. The difficulty in breathing is usually more on inspiration
- C. It runs in families
- D. Spongy pillows may aggravate
- E. It is prone to people with allergy

SECTION B

1. In the central nervous system the clinical feature due to a snake bite is:

- A. Clotting & bleeding abnormalities
- B. Ptosis
- C. Myosis
- D. Stiff tender muscles

2. The following factors affect resistance of malaria except:

- A. Living permanently in endemic area
- B. Sickle cell anaemia
- C. Frequent malaria treatment
- D. Antimalarial prophylaxis

3. Which of the following is the antidote in organophosphate poisoning?

- A. Atropine
- B. Pralidoxime
- C. Pabrinex
- D. Pyridoxine

4. The following are clinical features of late congenital syphilis except:

- A. Periostitis
- B. Choroiditis
- C. Neurosyphilis
- D. Interstitial keratitis

5. Which drug is the standard regimen in chlamydia infection?

- A. Erythromycin 500mg 6-hourly for 7 days
- B. Azithromycin 1g orally daily for 3 daily
- C. Doxycycline 100mg 12-hourly orally for 5 days
- D. Azithomycin 1g orally as a single dose

6. The following are genetic causes of DVT except:

- A. Protein C deficiency
- B. Protein S deficiency
- C. Factor V
- D. Factor VII

7. Which of the following is the drug used in the first step in the management of asthma?

- A. Inhaled short acting α_2 - adrenoreceptor agonist bronchodilator
- B. Inhaled long acting β_2 - adrenoreceptor agonist bronchodilator
- C. Inhaled short acting β_2 - adrenoreceptor antagonist bronchodilator
- D. Inhaled short acting β_2 - adrenoreceptor agonist bronchodilator

8. The following are features of severe asthma EXCEPT:

- A. PEF 33-50%
- B. SPO₂ <92%
- C. Respiratory rate ≥ 25 /min
- D. Heart ≥ 110 /min

9. Which one of the following is the leading cancer among men?

- A. Colorectal carcinoma
- B. Oesophagus carcinoma
- C. Stomach carcinoma
- D. Prostate cancer

10. Which of the following cancer is not considered to be endocrine?

- A. Ovarian cancer
- B. Breast cancer
- C. Prostate cancer
- D. Thyroid medullary cancer

11. A 60 year old man presents with progressive symmetrical lower extremity edema. Which of the following findings would be inconsistent with the diagnosis?

- A. The Kussmaul sign
- B. Prolonged prothrombin

- C. Pulsus paradoxus
- D. Elevated bilirubin

12. Which of the following statements regarding the clinical course CHF and the prognosis of patients with this condition is true?

- A. Arrhythmias cause the majority of the deaths in patients with CHF
- B. Signs of chronic right-sided heart failure portend a poorer prognosis
- C. A persistent fourth heart sound portend a poorer prognosis
- D. Once heart failure has developed, sex has no prognostic significance

13. Infective endocarditis:

- A. May follow a tooth extraction
- B. IV drug users are not at risk
- C. A ten day oral treatment is adequate
- D. Haematuria is not a presentation

14. Peripheral neuropathy may be a complication of the following drugs:

- A. Pyridoxine
- B. Isoniazide
- C. Dapsone
- D. Ethambutol

15. In visceral leishmaniasis a typical feature is:

- A. Generalized lymphadenopathy
- B. Obesity
- C. Hypertension
- D. Jaundice

16. The causative organism of granuloma inguinale is:

- A. *Mycoplasma hominis*
- B. *Haemophilus ducreyi*
- C. *Mobiluncus prevotella*
- D. *Calymatobacterium granulomatis*

17. Concerning rabies:

- A. Is a bacterial disease
- B. Case fatality is 50%
- C. Hydrophobia is a feature
- D. All dogs have rabies

18. The following are true about Herpes simplex virus type II except:

- A. Causes genital ulcers
- B. It is a sexually transmitted disease
- C. It is caused by varicella zoster virus
- D. Does not affect the rectum

19. The following affect resistance of malaria except:

- A. Living permanently in endemic area
- B. Sickle cell anaemia
- C. Frequent malaria treatment
- D. Antimalaria prophylaxis

20. Haemoptysis is a feature in:

- A. Broncho asthma
- B. Bronchitis
- C. Emphysema
- D. Lung abscess

SECTION C

1. Concerning bacterial meningitis

- a) List five (5) bacterial causes (5 marks)
- b) Outline the CSF findings (3 marks)
- c) List four complication (2 marks)

2. 2. A 28-year old female presents with history of dysuria, frequency and urgency of micturition

- a) What is the most likely diagnosis? (2 marks)
- b) List two likely causative organisms (2 marks)

c) Manage the above patient (6 marks)

3. Discuss peptic ulcer disease under following headings

a) Aetiology (3 marks)

b) Drug therapy (3 marks)

c) Health education (4 marks)

4. a) Outline the predisposing factors to deep venous thrombosis (7 marks)

b) Outline the relevant investigations in a patient with deep venous thrombosis entire (3 marks)

5. Classify antiretroviral drugs and give an example in each case (10 marks)

TEST PAPER 2

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Features of meningeal irritation include:

- A. Neck stiffness
- B. Negative kerning's sign
- C. A positive brudzinki's sign
- D. Papilloedema may be a finding
- E. Tonic seizures

2. According to WHO clinical staging HIV infection a patient in stage IV is likely to have the following:

- A. Pneumocystis jirovecii pneumonia
- B. Pulmonary tuberculosis
- C. Herpes zoster
- D. Extra pulmonary
- E. Kaposi's sarcoma

3. Complications of Cushing's disease include:

- A. Goitre
- B. Myocardial infarction
- C. Deep venous thrombosis
- D. Thyrotoxicosis
- E. Hypertension

4. Acute glomerulonephritis:

- A. Is associated with skin rash
- B. Plasmodium malariae infection is a predisposing factor
- C. Increased protein diet is recommended
- D. Can complicated to pleural effusion
- E. There should be no dietary restrictions in management

5. Metronidazole is effective in treatment of:

- A. Giardiasis
- B. Amoebiasis
- C. Malaria
- D. Ascariasis

E. Hookworm

6. The following hormones are diabetogenic:

- A. Glucagon
- B. Insulin
- C. Cortisol
- D. Thyroxine
- E. Adrenaline

7. The main goals of anti-retroviral therapy include:

- A. Eliminate the viral load
- B. Restore the immunity
- C. Eradicate HIV related illness
- D. Improve quality of sex
- E. Do away with risks of transmissions

8. Cardiomegaly is demonstrated by:

- A. Taking chest x-ray
- B. Palpating for the position of the apex beat
- C. Percussing for the cardiac dullness
- D. Auscultating for heart sounds
- E. Testing for chest expansion

9. In acute asthma:

- A. Eosinophilia is present
- B. Cromogluccate therapy often present as an alternate to inhaled salbutamol in adults
- C. Presents with crepitations
- D. Other allergic reactions are usually present
- E. Exposure to aspirin and certain chemicals may induce attacks

10. Tetanus:

- A. Can complicate intravenous drug misuse
- B. Lockjaw is a feature
- C. Trismus sardonius is a feature
- D. Wounds cleaning and debridement is part of treatment

E. A silent dark room is necessary during treatment

11. The following can cause lung collapse:

- A. Lobar pneumonia
- B. Partial impaction by foreign bodies in bronchus
- C. Intrathoracic space occupying lesion
- D. Bronchial carcinoma
- E. Pulmonary tuberculosis

12. The differentials diagnoses of acute rheumatic fever include:

- A. Deep venous thrombosis
- B. Salmonellosis
- C. Infective endocarditis
- D. Rheumatoid arthritis
- E. Septic arthritis

13. Signs of left sided heart failure include:

- A. Massive ascites
- B. Frothy sputum
- C. Rhonchi
- D. Gross peripheral oedema
- E. Paroxysmal nocturnal dyspnea

14. The following can precipitate angina pectoris:

- A. Active digestion
- B. Emotional disturbances
- C. Bed rest
- D. Cold weather
- E. Exercise

15. The following are the major manifestation of rheumatic fever as per Duke Jones Criteria of diagnosis:

- A. Leucocytosis
- B. Athralgia
- C. Erythema maginatum
- D. Chorea

E. Carditis

16. Complications of insulin therapy:

- A. Injection site abscesses are uncommon
- B. Weight gain with increased inappropriate insulin
- C. Fatty lumps i.e.lipohypertrophy occurs as a result of site overuse
- D. Insulin resistance is enhanced by insulin
- E. Generalized allergic reaction are very common

17. Concerning Shock: -

- A. Hypovolaemic shock is due to myocardial infarction
- B. Haemorrhage may bring about the condition
- C. Anaphylactic shock is another classification of shock
- D. Hypertension Is a sign of shock
- E. Raised JVP is a sign

18.The clubbing of fingers is found in the following conditions: -

- A. Pericarditis
- B. Bronchial carcinoma
- C. Malabsorption syndrome
- D. Emphysema
- E. Bronchiectasis

19. Risk factors in hypertension: -

- A. Family history
- B. Aortic stenosis
- C. Consumption of fatty foods
- D. Chronic respiratory disease
- E. Proteinuria

20. Acute Rheumatic Fever: -

- A. Blood culture will identify the causative organism
- B. The organisms usually respond to penicillin therapy
- C. Emboli may cause strokes
- D. Hepato-splenomegally is the finding
- E. Erythromycin is the best alternative in case of the patient being

allergic to penicillin

21. A patient with acute pancreatitis: -

- A. Is normally an alcoholic
- B. The condition is caused by streptococci
- C. Serum amylase level is increased greatly
- D. Spasm of the sphincter of oddi may also increase the serum amylase levels
- E. Intra-muscular pethidine is indicated

22. The following presents with a solitary radiographic pulmonary lesion: -

- A. Bronchial carcinoma
- B. PTB
- C. Bronchopneumonia
- D. Lung abscess
- E. Wegener's granuloma

23. Causes of pleural effusion includes: -

- A. Pneumonia
- B. Tuberculosis
- C. Malignancy
- D. Nephritic Syndrome
- E. Chronic liver failure

24. The following may predispose to asthma: -

- A. Childhood infections
- B. Allergen exposure
- C. Indoor pollution
- D. Previous history of PTB
- E. Exposure to pets in early life

25. The following are causes of pneumonia: -

- A. Streptococcus
- B. Chlamydia
- C. Mycoplasma

- D. *Staphylococcus aureus*
- E. *Haemophilus influenza*

26. The following are complications of pneumonia: -

- A. Para-pneumonic effusion
- B. Empyema
- C. Pneumothorax
- D. All of the above
- E. None of the above

27. TB is caused by infection with: -

- A. *Mycobacterium tuberculosis*
- B. *Mycobacterium africanum*
- C. *Mycobacterium bovis*
- D. *Haemophilus influenzae*
- E. *Leshmania donovani*

28. Clinical features of thyrotoxicosis include: -

- A. Weight loss
- B. Diarrhoea
- C. Palpitations
- D. Anxiety
- E. Infertility

29. In DKA (Diabetic Keto-Acidosis):

- A. Characterized by ketonuria
- B. Patient presents with blood sugar levels above 30 mmols/ltrs
- C. IV fluids are essential in management
- D. Most patients are likely to have metabolic acidosis
- E. Insulin therapy is indicated

30. The following are causes of hypoglycaemia: -

- A. Alcohol intoxication
- B. Insulin therapy
- C. Oral hypoglycaemic agents
- D. None of the above

E. All of the above

SECTION B

1. Concerning *Acne vulgaris* the following is true:

- A. It is a bacterial infection
- B. It responds well to clotrimazole cream
- C. It causes psychological effects to the patient
- D. The prognosis is always poor

2. A feature of complicated malaria is:

- A. Vomiting
- B. Headache
- C. Fever
- D. Hypoglycemia

3. The following are features of of hyperosmolar hyperglycemic state except:

- A. Hyperglycemia
- B. Dehydration
- C. Uraemia
- D. Acidosis

4. Which one of the following is not a bacterial condition that can mimic ulcerative colitis?

- A. *Salmonella typhi*
- B. Shigellosis
- C. Amoebiasis
- D. *Chlamydia proctitis*

5. In the management of inflammatory bowel disease; which group of drugs is not used?

- A. Diuretics
- B. Aminosalicates
- C. Corticosteroids
- D. Antibiotics

6. Which one of the following is not an hyperdynamic state the can cause heart failure?

- A. Anaemia
- B. Congenital heart disease
- C. Hyperthyroidism
- D. Beriberi

7. Blood stained sputum is likely to be a associated with the following except:

- A. Pulmonary oedma
- B. Lung cancer
- C. Bronchiectasis
- D. Tuberculosis

8. Which of the following is the sputum frothy pink?

- A. Bronchiectasis
- B. Tuberculosis
- C. Pulmonary oedema
- D. Lung cancer

9. Which one of the following is a post-renal cause of kidney failure?

- A. Anaemia
- B. Hemorrhage
- C. Toxins
- D. Urethral strictures

10. Concerning renal stones ,the main chemical component is:

- A. Magnesium
- B. Calcium
- C. Uric acid
- D. Cysteine

11. The main causative agent of UTI is:

- A. *Escherichia coli*
- B. *Staphylococcus aureus*
- C. *Stapylococcus epidermidis*

D. *Chlamydia trachomatis*

12. Which one of the following does not cause an increase in the anion gap?

- A. Lactic acidosis
- B. Ketoacidosis
- C. Use of acetazolamine
- D. Chronic kidney disease

13. Which one of the following is not used in alcohol withdrawal?

- A. Diazepam
- B. Pabrinex
- C. Tegretol
- D. Pralidoxime

14. Which one is not a feature of systemic inflammatory response?

- A. Leukocytosis
- B. Bradycardia
- C. Tachycardia
- D. Pyrexia

15. Exudative pleural effusion can be caused by:

- A. Congestive cardiac failure
- B. Liver cirrhosis
- C. Pulmonary embolism
- D. Nephrotic syndrome

16. On auscultation which murmur is the most likely to be heard in a patient with infective endocarditis:

- A. Regurgitant murmur
- B. Mid systolic murmur
- C. Both A&B
- D. None of the above

17. Which one of the following is not in relation with sodium and water volume?

- A. Ascites
- B. Metabolic acidosis
- C. Oedema
- D. Hypertesion

18. Concerning the Framingham criteria of heart failure ,which one is not a major presentation?

- A. Cardiomegaly
- B. Dyspnea
- C. Pleural effusion
- D. Weight loss >4.5kg

19. Which one of the following is a protease inbitor?

- A. Lopinavir
- B. Nevirapine
- C. Lamivudine
- D. Tenofovir

20. In the x-rays features of pulmonary oedema ,grade III is ?

- A. Interstitial oedema
- B. Alveolar oedema
- C. Dilated prominent upper lobe veins
- D. None of the above

SECTION C

1. Classify chemotherapeutic drugs and give an example in each group
10 marks

2. a) List five (5) predisposing factors to leukemias **5 marks**
 b) List five (5) differential diagnosis of hodgkin's lymphomas
5 marks

3. a) Define nephrotic syndrome **2 marks**
b) List it's etiology **3 marks**
c) Outline its management **5 marks**
4. a) What are the etiological factors of anemia? **4 marks**
b) How can you manage a female patient aged 24years with an Hb of 3g/dl with acute edema and difficulty in breathing? **6 marks**
5. a) Outline the clinical features of pulmonary tuberculosis **5 marks**
b) Outline 3 types of anti-tuberculosis drug regimen **3 marks**
c) List 4 common complications of pulmonary tuberculosis **2 marks**

TEST PAPER 3

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Concerning Hepatoma: -

- A. It is a highly malignant tumour of the liver
- B. Aflatoxin is implicated
- C. 90% of patients test HIV positive
- D. Alcohol consumption is associated with it
- E. Prognosis is good

2. Kussmaul's breathing: -

- A. Occurs in meningitis
- B. Due to stimulation of respiratory centre
- C. Due to increased levels of carbon dioxide in the blood
- D. Seen in injury to the brain tissue
- E. Narcotics may be the cause

3. Concerning emphysema: -

- A. Emphysematous bullae are opaque on chest x-ray
- B. It results from a condition like chronic asthma
- C. Shortness of breath on exertion is a finding
- D. Cough with expectoration is a complaint
- E. Liver dullness is usually diminished

4. A case of bronchiectasis: -

- A. The cause is the enlargement of the distal air spaces
- B. Childhood primary tuberculosis may lead to it
- C. There is a history of an attack of measles
- D. The fingers are often clubbed
- E. The sputum is mucoid

5. On bronchial asthma: -

- A. It may result from mucosal swelling
- B. The difficulty in breathing is usually more on inspiration
- C. It runs in families
- D. Spongy pillows may aggravate
- E. It is prone to people with allergy

6. A 20 year old student present with thick urethral discharge and dysuria: -

- A. Om stain will probably show gram negative intracellular diplococci
- B. Metronidazole is indicated
- C. It is most likely lymphogranuloma venereum
- D. Diagnostic counseling and testing is advisable
- E. Chlamydia may be the cause

7. A 24 year old man presents to your clinic with marked dyspnea and haemoptysis: -

- A. Pulmonary TB is definitely the diagnosis
- B. A murmur of mitral stenosis may be present on auscultation
- C. Bronchiectasis could be the cause
- D. Intravenous aminophyllin may be useful
- E. Frax and haematinics would be sufficient treatment

8. Respond to the following findings of a patient suspected to have a lung disease: -

- A. Om stain will probably show gram positive bacteria
- B. Azithromycin is indicated
- C. It is most likely streptococci pneumoniae
- D. Chest x-ray is a must
- E. Alcohol is a precipitating factor

7. A 24 year old man presents to your clinic with marked dyspnea and haemoptysis: -

- A. Pulmonary TB is definitely the diagnosis
- B. A murmur of mitral stenosis may be present on auscultation
- C. Bronchiectasis could be the cause
- D. Intravenous aminophyllin may be useful
- E. Frax and haematinics would be sufficient treatment

8. Respond to the following findings elicited on examination of a patient suspected to have a lung disease: -

- A. The trachea is shifted away to the affected side in tension pneumothorax
- B. Vocal fremitus is increased on the right side in right sided pleural

effusion

- C. Finger clubbing commonly occurs in severe cases of acute lobar pneumonia
- D. High lymphocyte count and raised proteins in pleural effusion due to tuberculosis
- E. Mantoux test is usually strongly positive in millitary TB

9. True or False?

- A. A patient with heart disease usually complains of tachycardia and fatigue
- B. A patient with thyrotoxicosis may present with a symptom similar to one of the heart disease
- C. A cardiac pain is usually aggravated by exertion
- D. A true cardiac pain is usually situated at precordium area
- E. Syncope is usually due to inadequate blood circulation to the brain

10. In cardiac failure: -

- A. Non tender hepatomegally is an important finding
- B. Crepitations are usually heard at lung bases
- C. The pulse rate is normal but feeble
- D. Pitting ankle oedema is always present
- E. Peripheral cyanosis may be noted

11. On carcinoma of the bronchus: -

- A. It is more common in women than men
- B. It is slightly higher in rural areas than in urban
- C. Haemoptysis is a characteristic feature
- D. Metastases to other organs may occur
- E. Horner's syndrome may be a sign in some patients

12. Causes of anaemia include: -

- A. Severe malaria
- B. Sicke cell anaemia
- C. Leukemia
- D. Leshmaniasis
- E. Gastroenteritis

13. A 20 year old gentleman from Turkana presents with HB of 7.6 g/dl, massive splenomegally and eosinophilia. The following is likely to be a diagnosis: -

- A. Sickle cell anaemia
- B. Chronic myeloid leukemia
- C. Leishmaniasis
- D. Gaucher's disease
- E. Severe malaria

14. Diseases of the joints include: -

- A. Felty's syndrome
- B. Rheumatic fever
- C. Osteoarthritis
- D. Psoriasis
- E. Infective endocarditis

15. Causes of hypertension are: -

- A. Renal disease
- B. Cushing's syndrome
- C. Thyrotoxicosis
- D. Family history of hypertension
- E. Pheochromocytoma

16. Metabolic functions of insulin includes: -

- A. Glycolysis
- B. Glucose transport
- C. Lipid metabolism
- D. Protein synthesis
- E. Ketogenesis

17. Side effects of insulin therapy are: -

- A. Hypoglycaemia
- B. Weight gain
- C. Peripheral edema
- D. Local allergic reactions
- E. Lipodystrophy on injections site

18. Complications of Diabetes Mellitus include: -

- A. Diabetic foot
- B. Infections
- C. DKA (Diabetic Ketoacidosis)
- D. Diabetic nephropathy
- E. Diabetic retinopathy

19. A patient presenting with dyspepsia is likely to have:-

- A. Peptic ulcer disease
- B. Acute gastritis
- C. Pancreatic disease
- D. Renal failure
- E. Alcohol intoxication

20. Causes of lower gastro-intestinal bleeding are: -

- A. Perforated duodenal ulcer
- B. Chronic disease
- C. Diverticular disease
- D. Radiation enteritis
- E. Esophageal varices

21. Acute gastroenteritis can be caused by: -

- A. Chronic pancreatitis
- B. Lymphoma
- C. Bacterial infection
- D. Shigellosis
- E. Hookworm infestation

22. Features of Stage 4 HIV include: -

- A. Kaposi's sarcoma
- B. Oral candidiasis
- C. Pulmonary tuberculosis
- D. Herpes zooster
- E. Cytomegalovirus retinitis

23. The following are used in management of HIV/AIDS: -

- A. Quinine
- B. Septrin
- C. ARVs
- D. Fluconazole
- E. None of the above

24. HIV/AIDS is transmitted through: -

- A. Sexual contact
- B. Innoculatuion with infected blood and products
- C. Use of contaminated needles
- D. Vertical transmission from mother to child
- E. Fecal - Oral

25. Before initiating therapy in any individual tested positive for HIV/ AIDS, the following basic evaluation should be performed: -

- A. Complete history and physical examination
- B. Total blood count
- C. Urea, creatinine and electrocytes
- D. Liver function tests
- E. CD4 Count and viral load

26. The following statement are TRUE as regards Highly Active Antiretroviral Therapy (HAART): -

- A. It is a combination of 3 or more antiretroviral drugs in the treatment of HIV Infection
- B. The antiretrovirals fall in different classes
- C. The antiretrovirals work at different sites on the HIV virus
- D. Most of the drugs are metabolized in the liver, the antiretrovirals are highly toxic hence the need for evaluation
- E. HAART is the gold standard of anti-retroviral therapy

27. The following are side effects of starvudine: -

- A. Pancreatitis
- B. Peripheral neuropathy
- C. Lactic acidosis

- D. Bone marrow suppression
- E. Hypersensitivity reaction

28. Causes of dyspnoea include: -

- A. Acute pulmonary oedema
- B. Acute severe asthma
- C. Metabolic acidosis
- D. Organophosphate poisoning
- E. Pneumonia

29. A 70 year old presents with history of productive cough, often with haemoptysis, dry initially then productive later. Cough is mostly at enight. The following would be possible diagnosis: -

- A. PTB
- B. Pneumonia
- C. Bronchiectasis
- D. Pulmonary edema
- E. Bronchitis

30. The following are principles of management of asthma: -

- A. Occasional use of inhaled short acting B2 adrenoceptor agonists
- B. Low dose inhaled corticosteroids
- C. Leukotriene receptor antagonist
- D. All the above
- E. None of the above

SECTION B

1. Which of the following is an autonomic symptom of hypoglycemia?

- A. Confusion
- B. Speech difficulty
- C. Incoordination
- D. Tremor

2. The following are features of pulmonary tuberculosis on x-ray except?

- A. Hilar lymphadenopathy
- B. Pleural effusion
- C. Consolidation
- D. Interstitial focal diffuse

3. In the admission criteria of pneumonia which one is not considered as a feature?

- A. Respiratory rate >20 cycles per minute
- B. COPD
- C. Diabetes
- D. Chronic alcohol use

4. Which of the following is a opportunistic infection in stage III of HIV?

- A. Pneumocystis carinii pneumonia
- B. Tuberculosis
- C. Cryptococcal meningitis
- D. Aspergilosis

5. The following are features of acute pancreatitis according to the Glasgow Imrie Criteria except:

- A. Calcium >2mmol
- B. Blood urea >16mmol
- C. Albumin <32g/l
- D. Calcium <2mmol

6. Which of the following is a transudative cause of ascites?

- A. Pericarditis
- B. Liver cirrhosis
- C. Sarcoidosis
- D. Tuberculosis

7. Concerning the Wells criteria which one is not a feature

- A. Cuff swelling

7. Concerning the Wells criteria which one is not a feature

- A. Cuff swelling
- B. Varicose vein
- C. Parasthesia
- D. Non-localized limb tenderness

8. Which of the following is a non-modifiable risk factor of stroke?

- A. Hypertension
- B. Ethnicity
- C. Smoking
- D. Hypercoagulable state

9. Which of the following is not a cause of community acquired pneumonia?

- A. Streptococcus pneumoniae
- B. Neisseriae meningitidis
- C. Listeria monocytogens
- D. Staphylococcus aureus

10. The indications in of CT scan before a lumbar pucture

- A. Altered mental status
- B. Severe liver failure
- C. Headache
- D. Thrombocytopenia

11. In the management of atrioventricular nodal re-entrant tachycardia:

- A. Verapamil
- B. Digoxin
- C. β -blockers
- D. adenosine

12. The cushing's triad consist of the following except:

- A. Hypertension
- B. Bradycardia
- C. Hypotension

D. Respiratory depression

13. The following is a common of infectious mononucleosis:

A. Severe pharyngeal oedema

B. Ruptured spleen

C. Arthritis

D. Ruptured spleen

14. Which of the following is not a musculoskeletal manifestation of brucellosis?

A. Osteomyelitis

B. Spinal spondylitis

C. Suppurative arthritis

D. Myelopathy

15. Which one of the following is not a clinical of typhoid fever in the first week?

A. Fever

B. Diarrhea

C. Headache

D. Relative bradychardia

16. Which one of the following drugs is the right combination of drugs used in the management of leprosy?

A. Rifampicin 400mg and Dapsone 100mg for 6 months

B. Rifampicin 600mg and Dapsone 100mg for 6 months

C. Clofazimine 200mg and Dapsone 100mg for 6 months

D. Rifampicin 400mg and Dapsone 100mg for 5 months

17. The following are broad spectrum anti-seizure except?

A. Sodium valproate

B. Topiramate

C. Phenytoin

D. Rufinamide

18. The following are major manifestations of Acute Rheumatic Fever except:

- A. Carditis
- B. Polyarthritis
- C. Erythema palmar
- D. Subcutaneous nodules

19. Which one of the following is not sign of hypertrophic cardiomyopathy?

- A. Jerky pulse
- B. Palpable left ventricular hypertrophy
- C. Pansystolic murmur at the base
- D. Angina on effort

20. Of diseases of the heart muscle ,which one is not a viral cause?

- A. Coxsackie
- B. Influenza
- C. Diphtheria
- D. HIV

SECTION C

1. Discuss the pathophysiology, clinical presentation and treatment of a patient with organophosphate poisoning **10 marks**

2. Discuss the clinical presentation of and management of acute streptococcal pneumonia in a 40 year old male patient **10 marks**

3. A patient is admitted in a medical ward with stiff neck, a temperature of 38 degrees centigrade and rapidly goes into a coma. Outline the management of this patient **10marks**

4. a) Outline the management of a 42-year old male brought to you in a coma **5 marks**
 b) List 10 differentials of coma **5 marks**

5. Outline the management of a 22-year old patient who presents with Diabetic Ketoacidosis **10 marks**

TEST PAPER 4

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Pulsus paradoxus is associated with: -

- A. Aortic stenosis
- B. Pericardial effusion
- C. Constrictive pericarditis
- D. Severe asthma
- E. Pneumatic heart disease

2. Cardiac tamponade: -

- A. Is a medical emergency
- B. Interferes with diastolic filling of the heart
- C. May be caused by hypothyroidism
- D. Is characterized by hypotension, raised JVP and muffled heart sounds
- E. Can cause pulsus paradoxus

3. Extrapulmonary TB may cause the following: -

- A. Brain abscess
- B. Constrictive pericarditis
- C. Lymphadenitis
- D. Ascites
- E. Valvular lesions

4. Concerning pleurisy: -

- A. Pleural rub is a sign
- B. The chest pain is usually retrosternal
- C. Ronchi are usually heard
- D. Chest X-ray confirms the condition.
- E. Tuberculosis is a complication

5. On Influenza: -

- A. It may mimic malaria but the only difference is the reddish conjunctiva
- B. It occurs in epidemics
- C. It is preventable
- D. Antibiotics can cure it
- E. Complications include bronchopneumonia

6. In the investigation of an hypertensive patient: -

- A. Urinalysis for blood is to confirm essential hypertension
- B. Presence of proteins in urine indicates the hypertension is due to glomerulonephritis
- C. Chest radiography may detect cardiomegaly
- D. Blood glucose test may give a clue
- E. Stool examination for urea can be done.

7. Concerning valvular disease: -

- A. The valve which is most commonly affected is the tricuspid
- B. The aortic valve is most affected in syphilis
- C. Two-thirds of men with rheumatic fever have valvular lesions
- D. Pulmonary valve is the least affected
- E. Mitral incompetence is usually due to myocardial infarction.

8. The following statements are true about hypertension: -

- A. A single BP reading of 180/100 mmHg is conclusive of mild hypertension
- B. Patient's education is essential for good drug compliance
- C. Young patients should be investigated for secondary hypertension
- D. Exercise is bad for patients as it may precipitate a stroke
- E. Smoking is irrelevant to good control

9. Respond to the following findings elicited on examination of a patient suspected to have a lung disease: -

- A. The trachea is shifted away from the affected side in tension pneumothorax.
- B. Vocal fremitus is increased on the right side in a right sided pleural effusion
- C. Finger clubbing commonly occurs in severe cases of acute lobar pneumonia
- D. High lymphocyte count and raised proteins in pleural fluid is suggestive of tuberculous effusion
- E. Mantoux test is usually strongly positive in miliary TB

10. Respond to the following concerning a patient who presents with purulent sputum: -

- A. It is a clinical feature of bronchial asthma
- B. It is a symptom of chronic bronchitis
- C. It is a finding of early stages of pulmonary tuberculosis.
- D. The responsible organism may be spirochaetes.
- E. Culture and sensitivity of the sputum confirms the organisms.

11. Concerning jiggers:

- A. It is caused by tunga penetrans
- B. The flea can burrow between the toes
- C. Manual removal of the flea is helpful
- D. It is transmitted through body contact
- E. It is a familial disease.

12. In miliary tuberculosis:

- A. Is severe infection that patient should be treated with streptomycin for 60 days
- B. Is an extra pulmonary tuberculosis
- C. Is a feature in stage 3 of the WHO HIV classification
- D. It affects mainly the lymphnodes
- E. Auscultation of the chest is frequently normal

13. In acute pyelonephritis:

- A. Patient is often a febrile
- B. Small abscesses are often in the renal parenchyma
- C. Present with a sudden onset of pain in the loins
- D. Urine microscopy shows no organisms
- E. Patient present with always with anaemia

14. Causes of haematuria are:

- A. Menstrual cycle
- B. Renal tumours
- C. Renal calculi
- D. Head injury
- E. Hydatid cyst

15. Immediate complications to diabetic mellitus are:

- A. Retinopathy
- B. DKA
- C. Renal failure
- D. Stroke
- E. Diabetic foot

16. Concerning chancroid: -

- A. The causative organism is gram-positive haemophyllusdueryi
- B. The inguinaelymnp glands are enlarged
- C. It may be confused with granuloma inguinale
- D. Incision of lymph glands is advisable
- E. Culture of specimen from the lesions using special media confirms the diagnosis

17. Treatment of herpes simpex: -

- A. Zovirax is useful
- B. Pregnant women should be delivered by caesarean section
- C. Paracetamol may be given
- D. Wash with soap
- E. Capsules Amoxycillin are of value

18. Complications of gonorrhoea: -

- A. Infection of the prostate
- B. Urethral strictures
- C. Man become sterile
- D. Blindness of both males and females
- E. Infection of the fallopian tubes

19. Concerning the skin: -

- A. Vesicle is a small circumscribed collection of fluid which may be blood or serum
- B. Vitiligo means depigmentaion of the skin
- C. Hyperkeratosis means reduced thickness of stratum corneum of the epidermis
- D. Oral blue-black patches are characteristics of fixed drug eruptions

E. Grouped vesicles with segmental distributions are characteristics of herpes zoster.

20. Management of viral hepatitis: -

- A. Multivitamins are useful
- B. Anti-retroviral drugs such as interferon can be used.
- C. Vaccines are available for all types of the causative viruses.
- D. High calorie diet is advisable.
- E. Cloxacillin is also given.

21. Concerning ascites: -

- A. Hepatic malignancy is the cause.
- B. There is symmetrical abdominal distension
- C. Tympanic note is found on percussing the flanks.
- D. Paracentesis abdominis confirms that cause
- E. Increased bowel sounds are noted.

22. A patient with acute hepatic failure: -

- A. Presents with cerebral disturbance
- B. Paracetamol may be blamed as a cause
- C. Hepatic tremor of extended hands is characteristics
- D. Mild jaundice is a feature
- E. Reduced prothrombin time is prognostic

23. Pernicious anaemia

- A. Is typically a normocytic anaemia
- B. Occurs as a result of auto-immune damage to the parietal cells in the gastric mucosa
- C. Results in weight loss
- D. Can cause subacute combined degeneration of the cord
- E. Is treated by administration of oral intrinsic factor

24. Recognised causes of microcytosis (in anaemia) include:

- A. Chronic disease
- B. Folate deficiency
- C. Sideroblastic anaemia

- D. Sickle cell disease
- E. Thalassaemia

25. Regarding iron metabolism in adults:

- A. The total body iron is approximately 500g
- B. 70% of the iron is found within haemoglobin
- C. Daily dietary requirements are higher in women than men
- D. An average western diet provides about 20 mg iron per day of which 5-10% is absorbed
- E. Iron is transferred to the bone marrow bound to haemosiderin

26. Regarding iron deficiency anaemia:

- A. The haemoglobin concentration is increased
- B. The mean red cell volume (MCV) is reduced
- C. Serum ferritin is reduced
- D. Serum iron binding capacity is increased
- E. A blood film will show hypochromic macrocytic red cells

27. Multiple myeloma:

- A. Results from a polyclonal proliferation of plasma cells
- B. Often produces a serum paraproteinaemia
- C. May present with bone pain
- D. Can cause amyloidosis
- E. Increases susceptibility to infection

28. Sickle Cell Disease:

- A. Typically causes whole body hypoxia
- B. Crises often result in microvascular haemorrhage
- C. Hypersplenism is common in patients over 20 years of age
- D. Priapism is a recognised complication
- E. Is due to the substitution of glutamine for valine in position 6 of the alpha globin chain

29. Blood grouping and compatibility

- A. Blood cells carry one or more of the three antigens A, B & O
- B. Antibodies to the ABO group antigens occur after initial exposure

and sensitisation to blood from an incompatible group

- C. Group AB rhesus negative blood can be given to the majority of patients in emergencies
- D. Platelets are group specific
- E. Fresh Frozen Plasma (FFP) is group specific

30. The following statements are true of packed red cells used for blood transfusion:

- A. Each unit of packed cells has a volume of approximately 450ml
- B. Each unit should raise the patient's haemoglobin level by approximately 1g /dl
- C. Cross matched whole blood is superior to packed cells for trauma patients who require transfusion.
- D. If a patient is not actively bleeding and not in distress, packed cells should be transfused over 5 to 6 hour
- E. Packed cells have a shelf life of 50 days

SECTION B

1. One the following is not a microvascular complication of diabetes mellitus:

- A. Retinopathy
- B. Peripheral artery disease
- C. Macular edema
- D. Neuropathy

2. The causative agent of Hepatitis C is?

- A. Piconavirus
- B. Flavivirus
- C. Rotavirus
- D. HIV

3. The drug of choice (2nd line) in a patient with absent seizures is?

- A. Sodium valproate
- B. Ethoseximide
- C. Clonazepam

D. Lamotrigen

4. Which one of the following anti-seizure is known to cause renal toxicity?

- A. Sodium valproate
- B. Topiramate
- C. Phenobarbital
- D. Carbamazepine

5. Which of following conditions cause pulsus paradoxus?

- A. Left ventricular failure
- B. Asthma
- C. Constrictive pericarditis
- D. Pericardial tamponade

6. Which of the following is a nucleoside reverse transcriptase inhibitor?

- A. Efavirenz
- B. Tenofovir
- C. Ritonavir
- D. Nevirapine

7. Regarding hyperthyroidism; which statement is false?

- A. Multinodular toxic goitre is the most common cause
- B. Serum TSH is the initial test of choice
- C. Radioactive T3 uptake gives information regarding status of Thyroid Binding Globulin (TBG)
- D. Consider pregnancy when there is high TBG

8. Which statement is incorrect concerning multinodular toxic goitre?

- A. It is more common in pregnant mothers
- B. It is characterised by hyperfunctioning areas that produce high T4 and T3 levels
- C. Thyroid atrophy occurs due to decreased TSH
- D. Patchy uptake appears on the thyroid scan

9. Which of the following is not specific to Graves' disease?

- A. Exophthalmos
- B. Pretibial myxedema
- C. Thyroid bruit
- D. Lid lag

10. Regarding Graves' disease; which statement is false?

- A. Radioiodine 131 is the most common therapy in the USA for Graves' hyperthyroidism
- B. Proptosis is always present
- C. It is commonly associated with other autoimmune disorders
- D. Pretibial myxedema is due to dermal accumulation of mucopolysaccharides

11. Regarding heart failure, which statement is false?

- A. Right heart failure is commonly a consequence of left heart failure
- B. Acute heart failure results from myocardial infarction
- C. Pulmonary edema is the most severe form of ventricular failure
- D. The principal symptom of heart failure is shortness of breath

12. Which of the following is a radiographic finding of heart failure?

- A. Patchy shadowing
- B. Bat's wing appearance
- C. Consolidation
- D. Cavitations

13. Which of the following is not a minor Framingham's criterion for diagnosing heart failure?

- A. Pleural effusion
- B. Dyspnea on ordinary exertion
- C. Tachycardia (>120 bpm)
- D. Rales

14. Which one of the following is not a major criterion for diagnosis of heart failure?

- A. Weight loss >6.5 kgs in 3 days in response to treatment

- B. Paroxysmal nocturnal dyspnea
- C. Neck vein distension
- D. S3 gallop

15. The following are causes of high output heart failure, except:

- A. Polythermia
- B. Beriberi
- C. Pulmonary hypertension
- D. Pregnancy

16. The inability to identify an object using one or more of the senses is

- A. Apraxia
- B. Amnesia
- C. Agnosia
- D. Aphasia

17. Which of the following is not a clinical feature of autonomic neuropathies?

- A. Obstinate constipation
- B. Orthostatic hypotension
- C. Gastroparesis
- D. None of the above

18. Regarding pure autonomic failure, which statement is incorrect?

- A. It is also known as Bradbury-Eggleston syndrome
- B. It lacks central and preganglionic involvement
- C. Urinary retention and fecal incontinence are the main symptoms
- D. Some cases are due to autoimmune autonomic neuropathy

19. Regarding amnesias, which statement is false?

- A. Anterograde amnesia refers to inability to store new memories after an insult
- B. Procedural memory loss is more common than declarative memory loss
- C. Can be caused by metabolic disorders

D. Transient global amnesia is caused by transient ischemia

20. About treatment of hyperthyroidism; which statement is false?

A. Propylthiouracil (PTU) is preferred for pregnant patients with Graves' disease

B. Sodium ipodate is used for acute management of some palpitations, tremors, anxiety etc.

C. Agranulocytosis is a serious side effect of thionamides

D. PTU inhibits conversion of T4 to T3

SECTION C

1. Classify anaemias. (10 Marks)

2. Differentiate between nephrotic syndrome and nephritic syndrome (10 Marks)

3. Give differential diagnosis of ascites. (10 Marks)

4. Manage congestive cardiac failure (10 Marks)

5. Discuss cholera under the following headings

a) Etiology (1 mark)

b) Clinical presentation (4 marks)

c) Management (5 marks)

TEST PAPER 5

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. Complications of blood transfusion:

- A. ABO reactions are type I hypersensitivity reactions
- B. ABO reactions may present with delayed haemolysis with symptoms peaking at 5 to 10 days
- C. A temperature of 38 degrees associated with facial flushing occurring 10 minutes after starting a transfusion suggests ABO incompatibility and the transfusion should be stopped instantly
- D. Approximately a 1 in 1000 patients suffer from anaphylaxis during blood transfusion
- E. Blood transfusion should be stopped instantly if the patient develops urticaria

2. The following statements are true: -

- A. Cystitis presents with fever more commonly compared to pyelonephritis.
- B. E. Coli is the most common causative organism of urinary tract infection
- C. Gentamicin is the highly recommended in renal disease.
- D. Abdominal pelvic ultrasound may be used to detect renal calculi.
- E. The kidneys usually appear enlarged on ultrasound in chronic renal disease

3. The following are associated with nephritic syndrome: -

- A. Polyuria
- B. Haematuria
- C. Proteinuria
- D. Oedema
- E. Hypertension

4. Features associated with acute renal failure include: -

- A. Hypocalcaemia
- B. Anasarca
- C. Pulmonary oedema
- D. Elevated blood urea

E. Very low creatinine levels

5. Causes of meningitis include: -

A. HSV

B. HIV

C. *Escherichia coli*

D. *Salmonella typhi*

E. *Haemophilus influenza*

6. Adrenal failure:

A. Is most commonly due to autoimmune damage of the adrenal gland.

B. Patients usually present early in the course of the disease

C. Biochemical investigation will typically reveal hyponatraemia and hyperkalaemia

D. The long and short synacthen tests are useful diagnostic tools

E. Management is usually by lifelong hydrocortisone administered orally at night

7. In relation to patients with diabetes:

A. Patients with type II diabetes do not develop ketoacidosis

B. Type II diabetes does not occur in patients with normal body weights

C. Type II diabetes is inherited as an autosomal recessive disease

D. Diabetes is more common in patients with Down's syndrome than in the normal population

E. Over 99% of diabetes cases occurring before the age of 20 are autoimmune in aetiology

8. The following features are associated with acromegaly:

A. Heart failure

B. Visual field defects

C. Increased risk of carcinoma of the colon

D. Suppression of growth hormone levels after oral glucose

E. Medical treatment is the recommended long term treatment for most patients with acromegaly

9. The clinical features of Cushing's syndrome include

- A. Centripetal fat deposition
- B. Skin thickening
- C. Distal muscle wasting
- D. Hyperkalemia
- E. Hypotension

10. Concerning Diabetic Ketoacidosis (DKA)

- A. The patient almost always presents with coma.
- B. Ketotic breath is indicative of severe DKA
- C. Presence of high blood sugar & ketonuria are diagnostic of DKA
- D. Patients with DKA need more insulin than those with hyperosmolar non ketotic state (HONKS).
- E. Total potassium deficit is approximately 360 mmol

11. Hyperthyroidism

- A. Is usually due to an active thyroid adenoma secreting thyroxine
- B. Causes a proximal myopathy
- C. Lid lag only occurs in patients with Grave's disease
- D. Causes hyper-reflexia
- E. Radioactive iodine is the first line intervention of choice in controlling the symptoms of thyrotoxicosis

12. Hypoparathyroidism:

- A. Is characterised by hypocalcaemia and low serum levels of parathyroid hormone
- B. Causes hyperphosphatemia (raised serum phosphate levels)
- C. Is associated with a positive Trousseau sign
- D. If chronic it causes a characteristic 'pepper pot' appearance on plain skull radiographs
- E. Definitive, long-term management revolves around daily administration of IM parathyroid hormone

13. Hyperparathyroidism:

- A. Affects less than 1 in a 100,000 individuals
- B. Is associated with MEN 1 (MEN = multiple endocrine neoplasia)

- C. May occur secondary to chronic renal failure
- D. If primary hyperparathyroidism, it is usually due to parathyroid malignancy
- E. If chronic it may lead to osteomalacia

14. Iron deficiency anaemia:

- A. Is a cause of koilonychia
- B. Is a cause of glossitis
- C. Is characteristically a macrocytic anaemia
- D. Is a cause of pokilocytosis (abnormally shaped red cells)
- E. Typically causes an increase in total iron binding capacity

15. Blood transfusion:

- A. Is associated with less than a 1 in a million risk of transmission of HIV
- B. Is associated with more than a 1 in 500,000 risk of transmission of Hepatitis B
- C. Is associated with a risk of cytomegalovirus (CMV) transmission
- D. Is associated with a 0.1% risk of transfusing a unit contaminated with *Pseudomonas* spp.
- E. Is associated with a risk of transmission of malarial parasites

16. The CSF laboratory findings of a sample taken from patient with bacterial meningitis has the following features: -

- A. Elevated CSF sugar
- B. Elevated protein levels in the CSF
- C. Clear CSF is always observed
- D. Reduced levels of CSF sugar
- E. Pleocytosis

17. The following statements are true:-

- A. Amphotericin B is indicated in the management of cryptococcal meningitis
- B. Projectile vomiting is associated with increased intracranial pressure
- C. Gentamicin has good penetration of the blood brain barrier and is recommended for management of meningitis

- D. Patient with increased intracranial pressure should have lumbar puncture done as soon as they present to hospital
- E. Patients who have cryptococcal meningitis get therapeutic tapping of CSF

18. The following statements are true concerning cerebral vascular accidents:

- A. Majority of patients (80%) presenting with stroke have haemorrhagic stroke
- B. Patients may present with severe headache and vomiting
- C. Infective endocarditis causes stroke
- D. Aspirin is contraindicated in cerebral infarction
- E. Transient ischaemic attacks present with hemiparesis

19. Conditions in which rheumatoid factor is found in the serum: -

- A. Rheumatoid arthritis
- B. Viral hepatitis
- C. Tuberculosis
- D. Infective endocarditis
- E. Systemic lupus erythematosus

20. In the comprehensive management of patients with sickle-cell anaemia: -

- A. Hydroxy urea reduces the level of haemoglobin F
- B. Proguanil is indicated in prophylaxis against malaria
- C. Acute chest syndrome is rarely associated with infection
- D. Patients who have splenectomy done require life long prophylaxis with penicillin
- E. Lifelong supplementation of iron is recommended

21. In liver cirrhosis

- A. It always presents with hepatomegaly
- B. The liver is hard irregular and painful
- C. Telangectasia and gynaecomastia are most common in alcoholic
- D. Palmer erythema is of great diagnostic value
- E. Liver damage is reversible

22. The following drugs are used in the treatment of epilepsy:

- A. Rifampicine
- B. Pyrazinamide
- C. Dapsone
- D. Clofazimine
- E. Isoniazide

23. Factors that govern the absorption of a drug are:

- A. Lipid solubility
- B. Cost of the drug
- C. Presence or absence of food in the stomach
- D. Regional blood flow
- E. Physical appearance of the drug

24. In taenia capitis:

- A. Common in adults
- B. Is caused by taeniasaginata
- C. Is a contagious disease
- D. Treatment of choice is clotrimazole cream
- E. Always causes alopecia

25. Features of life threatening attacks in severe asthma includes:

- A. Cyanosis
- B. Tachycardia
- C. Confusion
- D. Hypertension
- E. Silent chest

26. In congestive cardiac failure:

- A. Anaemia may be a cause
- B. Propranolol is indicated
- C. Patients should be encouraged to do vigorous exercises
- D. Mean dose of aspirin are necessary
- E. Obesity is not a predisposing factor

27. The following are clinical feature of acute pancreatitis: -

- A. The pain is more to the right upper quadrant
- B. The pain can radiate to the back
- C. Signs of shock may be seen
- D. Serum amylase level is usually decreased from the normal range
- E. There is vomiting

28. The following are the differential diagnosis of dysentery: -

- A. Typhoid fever
- B. Amoebiasis
- C. Cholera
- D. Ulcerative colitis
- E. Crohn's disease

29. Stomatitis results from impaired absorption of the following: -

- A. Iron
- B. Calcium
- C. Potassium
- D. Nicotinic acid
- E. Riboflavin

30. Concerning hiatus hernia: -

- A. Most frequent in the elderly people
- B. Iron deficiency may be associated
- C. Endoscopy confirms the disease
- D. Surgery is not indicated
- E. Antacids will relieve the symptoms

SECTION B

1. A known epileptic patient presents to your outpatient with epileptic seizures

- a. Outline your first aid measures **3 marks**
- b. Outline your immediate medical management **4 marks**
- c. Which health education message would you give your patient **3marks**

2. A 16 year old form one student is diagnosed to have severe malaria
- a) What are the possible presentations that could have been identified to make the diagnosis ? **5marks**
 - b) Outline treatment of the above patient **5 marks**
3. Discuss the complications of diabetes mellitus **10 marks**
4. a) List the causes of haematemesis **5 marks**
b) What investigations would you carry out? **5 marks**
- 5.
- a) Give a brief definition of autoimmune deficiency syndrome **1 mark**
 - b) How is AIDS transmitted? **1 mark**
 - c) Briefly discuss the pathological changes brought about HIV infection **4 marks**
 - d) List the common opportunistic infections/ diseases in HIV infection **4 marks**

TEST PAPER 6

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. Changes in skin pigmentation may be due to:-

- A. Race
- B. Exposure to the sun
- C. Albinism
- D. Vitiligo
- E. Leprosy

2. Regarding the cell cycle; which of the following statements is false?

- A. DNA replication occurs in the M phase
- B. G1 phase precedes the S phase
- C. The cell cycle is regulated by cyclins and cyclin dependant kinases
- D. Differentiated functions are carried out in the G0 phase
- E. Oncogenes affect cell growth positively

3. Which of the following drugs is a pyrimidines antagonist?

- A. 6-Mercaptopurine
- B. Fludarabine
- C. Cladribine
- D. Gemcitabine
- E. Vincristine

4. Blood transfusion with packed red cells predisposes to:

- A. Clotting abnormalities
- B. Hypokalaemia
- C. Hypocalcaemia
- D. Acidosis
- E. Ventricular arrhythmias

5. Each of the following clinical features are associated with the named haematological condition:

- A. Splenomegaly and idiopathic thrombocytopenia purpura
- B. Alcohol induced pain in non-hodgkin's lymphoma
- C. Optic atrophy in folate deficiency

- D. Progression to acute myeloid leukaemia in myelodysplasia
- E. Hypercalcaemia and multiple myeloma

6. Which, if any, of the following statements matching nail signs to systemic conditions are correct?

- A. Nail pitting may indicate iron deficiency anaemia
- B. Leuconychia may indicate chronic liver disease
- C. Beau's lines may indicate chronic illness
- D. Splinter haemorrhages may indicate systemic lupus erythematosus
- E. Onycholysis may indicate psoriasis

7. Clubbing of the fingernails is associated with the following conditions:

- A. Atrial septal defect
- B. Irritable bowel disease
- C. Acute infective endocarditis
- D. Gastric carcinoma
- E. Cryptogenic fibrosingalveolitis

8. Recognised causes of macrocytosis in the peripheral blood with normoblastic erythropoiesis in the bone marrow include:

- A. Hypothyroidism
- B. Chronic alcohol abuse
- C. Cryptogenic cirrhosis
- D. The administration of phenytoin
- E. Atrophic gastritis

9. Sickle cell anaemia:

- A. The underlying genetic defect is a point mutation of the beta globin gene
- B. Causes a prolonged red cell life span
- C. Increases susceptibility to infection
- D. Is treated by life long folic acid
- E. Opioids are contraindicated during sickle cell crises

10. Regarding general neurological examination:

- A. Spastic paralysis is suggestive of a lower motor neurone lesion
- B. Two to three beats of clonus elicited in the calf muscles is considered to be a normal response
- C. Reflexes are typically increased following an upper motor neurone lesion
- D. Upper motor neurone lesions are associated with a positive babinski sign
- E. The action of frontalis is typically spared in a lower motor neurone lesion affecting the innervation to the muscles of the face

11. The following are features of raised intracranial pressure

- A. A falling blood pressure
- B. Tachycardia
- C. Constant headache, worse on recumbency and disturbing sleep
- D. Mydriasis (pupillary dilatation)
- E. Absence of retinal vein pulsation

12. Signs of upper motor neurone lesions include:

- A. Flaccid paralysis
- B. Flexor plantar response (down-going plantars)
- C. Increased tone
- D. A single affected muscle
- E. Brisk reflexes

13. The following anti-hypertensive drugs are correctly matched: -

- A. Hydrochlorothiazide - beta blocker
- B. Atenolol - angiotensin receptor blocker
- C. Captopril - Diuretic
- D. Nifedipine - Calcium channel blocker
- E. Lorsatan -Angiotensin converting enzyme inhibitor

14. The following are true of candidiasis: -

- A. It is caused by thrash.
- B. It may cause dysphagia.

- C. It is common in patients receiving prolonged oral antibiotic drugs
- D. White patches on buccal mucosa are usually seen
- E. Cyanocobalamin is one of the drugs used for treatment

15. The cause of a tender hepatomegaly is likely to be: -

- A. Hepatoma
- B. Congestive cardiac failure
- C. Amoebic hepatitis
- D. Alcoholic hepatitis
- E. Hydatid cyst

16. True or false of pneumothorax?

- A. The presence of air is in the thorax
- B. Iatrogenic causes are the commonest of pneumothorax
- C. The females are commonly affected
- D. There is always an underlying lung disease in the elderly patients
- E. The pleuritic chest pain is of sudden onset

17. The following are true of infective endocarditis: -

- A. It is the inflammation of the outer covering of the heart
- B. The valves are rarely affected
- C. Bleeding into the skin can be a sign
- D. There can be proteins in urine
- E. Erythrocyte sedimentation rate is decreased

18. Bradycardia is found in the following conditions: -

- A. Myocardial infarction.
- B. Thyrotoxicosis
- C. Obstructive jaundice
- D. Pregnancy
- E. Brain tumour

19. The following conditions/diseases of the skin are due to bacterial infection: -

- A. Impetigo
- B. Boils

- C. Ptyriasis
- D. Candyformata acuminata
- E. Scabies

20. The following are true of hepatoma: -

- A. It is highly malignant tumour of the liver.
- B. Aflatoxin is implicated
- C. 90% of patients with hepatoma test HIV positive
- D. Alcohol consumption is associated with it
- E. Prognosis is poor

21. Blood transfusion transmitted infections includes:

- A. Malaria
- B. Cholera
- C. HIV
- D. Amoebiasis
- E. Typhoid fever

22. Indications of barium meal:

- A. Anaemia
- B. Cancer of oesophagus
- C. Dyspepsia
- D. Peptic ulcer
- E. Achalasia of cardia

23. About sickle cell crisis:

- A. Dehydration is a precipitating factor
- B. Infections rarely precipitate the crisis
- C. Prognosis is usually good
- D. Presents with massive non tender splenomegaly
- E. Sickle chest syndrome is the most common cause of death in adults.

24. Causes of dementia are:

- A. Liver failure
- B. Vitamin B12 deficiency
- C. Uraemia

- D. Advanced age
- E. Alcohol intoxication

25. Concerning leukaemias: -

- A. Acute leukaemias present more in the elderly than in the young.
- B. May present with bleeding tendencies
- C. Bone marrow transplant has been proven to be curative
- D. Irradiation is the cause
- E. Are associated with chromosomal abnormalities

26. Lymphomas may present with the following features: -

- A. Weight loss
- B. Night sweats
- C. Splenomegaly
- D. Lymphadenopathy
- E. Chest pain

27. The following are true concerning hypothyroidism: -

- A. May present with history of weight gain and low moods
- B. Carbimazole is indicated in the management of hypothyroidism
- C. Levotyroxine is indicated in the management of hypothyroidism
- D. Graves disease is a cause
- E. May present with hypertension

28. The following are used as Disease Modifying Anti-Rheumatoid Drugs (DMARDs):-

- A. Methotrexate
- B. Sulfasalazine
- C. Vincristine
- D. Beta blockers
- E. Cyclosporine

29. The following are associated with the use of steroids: -

- A. Boosted immunity
- B. The skin becomes thin and easily damages
- C. Osteoporosis

- D. Diabetes mellitus
- E. Cataract formation

30. Risk factors for osteoporosis: -

- A. Hypothyroidism
- B. Chronic renal disease
- C. Heparin
- D. Chronic liver disease
- E. All the above

SECTION B

1. Discuss the symptoms, signs and management of hepatic failure in a sixty year old man **10 marks**

2. a) What is malignant hypertension? **2 marks**

b) How do you manage a patient with malignant hypertension **8 marks**

3. Discuss differential diagnosis of a patient who presents with dysphagia **10 marks**

4. a. What are the cardinal signs of congestive cardiac failure? **4 marks**

b. Manage a patient who is in congestive cardiac failure. **6 marks**

5. Classify jaundice into: -

(a) Three types according to the causes and for each give at least two causes. **6 marks**

(b) List four complications of cirrhosis of the liver **4 marks**

TEST PAPER 7

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. Drugs used in the management of SLE include: -

- A. Warfarin
- B. Prednisolone
- C. Aspirin
- D. Hydroxychloroquine
- E. Cyclophosphamide

2. Signs and symptoms of leishmaniasis: -

- A. Hepatosplenomegaly
- B. Jaundice
- C. Fever
- D. Lymphadenopathy
- E. Palour

3. The following are true about diabetes mellitus: -

- A. Type II is associated with Insulin resistance
- B. Oral hypoglycaemic agents are ideal in the management type I diabetes
- C. Haemoglobin A1C reflects blood sugar levels over a period of 6 weeks
- D. Use of ACE inhibitors is contraindicated in patients who are diabetic
- E. The blood pressure of diabetic patients should ideally be not more than 125/75 mmHg

4. Concerning HIV:-

- A. Cause aseptic meningitis
- B. HIV encephalopathy is found in WHO stage II
- C. HIV increase the risk of developing non-Hodgkin's lymphoma
- D. Efavirenz causes hallucinations
- E. Nevirapine is associated with hepatotoxicity

5. About epilepsy: -

- A. Use of phenobarbitone is contraindicated in pregnancy
- B. Sodium valproate is the drug of choice in the management

of absence seizures

- C. A normal EEG rules out epilepsy
- D. Complex partial seizures are the most common in epileptic adults
- E. Lack of sleep is a trigger factor for seizures.

6. Concerning typhoid fever: -

- A. Bradycardia occurs in patients with typhoid fever
- B. Typhoid fever is most commonly caused by salmonella paratyphi
- C. No drug resistance has been noted with the use of chloramphenicol in the management of typhoid fever
- D. Presents with koplik spots
- E. Complications include intestinal perforation

7. The following are some of the causes of diabetes mellitus (Type II)

- A. Thiazide diuretics
- B. Cushing's syndrome
- C. Pancreastectomy
- D. Glucagonoma
- E. Protease inhibitors

8. The following are casues of neutropenia: -

- A. Thyphoid fever
- B. Pancytopenia due to drug induced bone marrow aplasia
- C. Bronchia asthma
- D. Pure white cell aplasia
- E. Eczema

9. The following are differential diagnosis in a patient who presents with seizures/disturbed consciousness and falling: -

- A. Epilepsy
- B. Hypoglycaemia
- C. Cardiac dysrnythmias
- D. Transient ischaemic attacks
- E. All the above

10. In the management of diabetes mellitus: -

- A. Sulphonylureas stimulate insulin secretion
- B. Metformin stimulates insulin secretion
- C. Metformin can be combined with sulphonylureas
- D. Acarbose is a sulphonylurea
- E. Tolbutamide is considered unsafe in elderly patients

11. Regarding Schistosomiasis: -

- A. Man is an intermediate host in the life cycle of *Schistosoma mansoni*
- B. Eosinophilia is common in the acute invasive stage of the disease
- C. Maturing males and females *S. mansoni*, pairs are usually found in venules of the bladder
- D. Tissue granulomatous response is triggered by schistosome eggs rather than adults
- E. Portal hypertension is a common complication of *S. haematobium*

12. In Malaria management: -

- A. Therapy with quinine is indicated
- B. Dextrose give IV is important in preventing quinine side effects
- C. Quinine causes hypersensitivity reactions
- D. Cerebral malaria is treated with antipsychotic agents
- E. Oral Antimalarial agents are used in management of severe malaria

13. Regarding frusemide: -

- A. It is a potassium sparing diuretic
- B. Decrease renal calcium re-absorption
- C. Reduces the passive re-absorption of water from distal tubule and collecting ducts
- D. Decreases free water clearance in nephron
- E. Increases sodium excretion by sodium pump in the loop on Henle

14. The following are true of bronchial asthma: -

- A. It results from congestion of lungs tissues
- B. The condition has a family history of an allergic disorder
- C. Pulmonary function test is of help in the investigation
- D. The inspiratory phase of respiration is prolonged

E. Chronic asthmatics may complicate the euphysema

15. Concerning Pott's disease: -

- A. It is a complication of pulmonary tuberculosis
- B. The infection starts from discitis
- C. It causes kyphosis
- D. Most frequently it involves the hip joint
- E. It usually has an acute onset

16. Nephrotic syndrome is characterised by

- A. Proteinuria
- B. Peripheral oedema
- C. Hyperalbuminaemia
- D. A reduced risk of infection
- E. A prothrombotic state

17. The following statements regarding renal function are true

- A. Urea concentration is a less accurate indicator than creatinine for the diagnosis of renal failure
- B. Creatinine is primarily influenced by glomerular filtration rather than urine flow
- C. The serum creatinine is always elevated beyond the normal reference range in renal failure
- D. Renal artery stenosis is invariably caused by atherosclerosis
- E. Renal cell carcinoma causes hypertension in over 75% of cases

18. Purulent sputum:-

- A. Is a clinical feature of coryzoa
- B. Is a symptom of chronic bronchitis
- C. Is a finding in early stages of pulmonary tuberculosis
- D. The responsible organisms are spirochetes
- E. The causative organisms are streptococci

19. Concerning Kussmaul's breathing:-

- A. Is seen in meningitis.
- B. It is due to stimulation of the respiratory centre

- C. Can be caused by increased levels of carbon dioxide in the blood
- D. It is a finding in brain injury
- E. It may be caused by the use of narcotics

20. About bronchopneumonia:-

- A. The lesions are usually confined to one lobe or segment
- B. It affects young adults more than the aged groups
- C. The commonest responsible organism is *Streptococcus pneumoniae*
- D. Dull percussion note is detected on the affected side
- E. It may complicate to lobar pneumonia

21. A patient with cardiac failure:-

- A. Non tender hepatomegaly is an important finding
- B. Crepitations are usually heard at lung bases
- C. The pulse rate is normal but feeble
- D. Pitting ankle oedema is always present
- E. Peripheral cyanosis may be noted

22. True or False?

- A. Haemoptysis in cardiac disease is usually due to valvular lesion
- B. Central cyanosis is best seen under the nails
- C. In central cyanosis the skin of the extremities is warm
- D. Cyanosis may be due to reduced blood volume
- E. Cyanosis may be seen in severe congestive cardiac failure

23. Concerning HIV associated nephropathy: -

- A. Hypertension is unusual
- B. HAART stabilize renal function
- C. Progression to renal failure is rapid
- D. The proteinuria is usually in the nephritic range
- E. Loop diuretics are indicated in the management of fluid overload

24. In the management of nephritic syndrome: -

- A. Restrict sodium in the diet
- B. Albumin infusion is not recommended in diuretic resistant patients
- C. Pneumococcal vaccine should be given

- D. Hypergagulability is not a concern
- E. Statins are indicated

25. The following are clinical features of SLE:

- A. Depression
- B. Arthritis
- C. Glomerulonephritis
- D. Pericarditis
- E. Polyneuropathy

26. Treatment of patients with hyperthyroidism may include: -

- A. Carbimazole
- B. Propylthiouracil
- C. Beta blockers
- D. Levothyroxine
- E. All the above

27. Concerning DVT (Deep Venous Thrombosis)

- A. Hypercoagulable states lower the risk of DVT
- B. Deficiency of protein S is a risk factor
- C. Nephritic syndrome predisposes to DVT
- D. Heparin prevents extension of the thrombus
- E. Warfarin dose is adjusted to maintain INR between 2-3

28. The following are confirmatory of brain death

- A. Fixed pupils and unreactive to light
- B. Absent corneal reflexes
- C. Vestibulo-ocular reflexes are absent
- D. No motor response with adequate stimulation
- E. No cardio-respiratory activity

29. Concerning duodenal ulcer

- A. Presents with hunger pain
- B. There is weight loss
- C. Presets with early morning awakening pain
- D. *Helicobacter pylori* is a rare cause

E. Presents with upper GIT bleeding

30. The following are prophylactic measures in recurrent UTI

- A. The fluid intake should be atleast 2 litres per day
- B. Regular complete emptying of bladder
- C. Good personal hygiene
- D. Emptying of bladder before going to bed and after sexual intercourse
- E. Double micturition if reflex is present

SECTION B

1. A fifty year old patient presents to your clinic with an history of awareness of his heart beat, tired especially when does little work, cough and difficulty in breathing especially when lying down on his bed. He also tells you that of late, he noticed that his feet are swollen especially in the evenings: -

- (a) What is the diagnosis?
- (b) On examination, what signs are you likely to find?
- (c) Outline the management of this patient.

2. Describe community acquired pneumonia under the following headings:

- (a) Aetiology
- (b) Clinical features
- (c) Management

3. Discuss pneumonia under the following headings: -

- (a) Types and the cause for each.
- (b) Clinical features of one type
- (c) Investigations of the same
- (d) Management of the same

4. 14 year old child was seen at an OPD Clinic with complaints of puffiness on the face. He reports that a week ago he had a sore throat which disappeared.

- (a) List other clinical features you expect to find on this patient.

(b) What is the management of this case?

5. Discuss infective endocarditis under the following headings: -

- (a) Pathogenesis
- (b) Clinical features
- (c) Complications
- (d) Management

TEST PAPER 8

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. Concerning essential hypertension:-

- A. The cause is usually known
- B. Blood pressure of 150/90 mmHg at 45 years old is normal
- C. Stress has been found to be the cause
- D. It is most likely for an elderly person to die of another disease than it
- E. Heavy consumption of alcohol can influence the increase

2. In haemolytic jaundice, there is:-

- A. Pale stool
- B. Pale conjunctiva
- C. Dark urine
- D. Normal liver function test
- E. Raised direct bilirubin

3. In ascites:-

- A. Hepatic malignancy is the cause
- B. There is symmetrical abdominal distension
- C. Tympanic note is found on the flanks
- D. Paracentesis abdominis confirms the cause
- E. Increased bowel sounds are noted

4. A patient with cholecystitis:-

- A. Presents with pain on the left upper quadrant
- B. Murphy's sign is an important finding
- C. Fever is present but rigors unusual
- D. Plasma amylase should be measured
- E. Morphine may be needed to relieve the pain

5. Causes of haematemesis include:-

- A. Mallory Weiss Syndrome
- B. Peptic ulcer disease
- C. Cancer of the stomach
- D. Cancer of the oesophagus
- E. Ulcerative colitis

6. Extrapulmonary tuberculosis may cause the following:-

- A. Brain abscess
- B. Constrictive pericarditis
- C. Lymphadenitis
- D. Ascites
- E. Valvular lesions

7. First-line management of tuberculosis:-

- A. Use the combination of four drugs namely Rifampicin, Ethambutal, Isoniazid and Streptomycin
- B. The initial treatment will continue for two months first, then followed by six months
- C. For new cases in resource poor setting, the drugs will be Isoniazid, Rifampicin, Pyrazinamide and Streptomycin for the first two months.
- D. Directly observed therapy is recommended
- E. Liver function test is important before administering the TB drugs

8. Concerning pleural effusion:-

- A. Usually follows pleurisy
- B. Serous fluid is usually in the pleural cavity
- C. The term transudate applies only when protein content in the fluid is more than 2.0gm/100ml
- D. Turbid colour of the fluid indicates that the cause is tuberculosis
- E. In Uraemia the fluid is usually a transudate

9. In pneumothorax:-

- A. The absence of breath sounds and the resonant percussion note is diagnostic
- B. In tension pneumothorax, the percussion note is dull
- C. The chest x-ray shows haemogenous opacity on the affected side
- D. The underwater seal drain is usually removed even when bubbling has not stopped
- E. Intercostal tube drainage is usually in the 5th or 6th intercostal space

10. True or False?

- A. A patient with heart disease usually complains of tachycardia and

fatigue

- B. A patient with thyrotoxicosis may present with a symptom similar to one of heart disease
- C. A true cardiac pain is usually situated at the precordium area
- D. A cardiac pain is usually aggravated by exertion
- E. Syncope is usually due to inadequate blood circulation to the brain

11. The following is true of a case of ascites: -

- A. Hepatic malignancy may be the cause
- B. There is symmetrical abdominal distension
- C. Tympanic note is found on the flanks
- D. Paracentesis abdominis confirms the cause
- E. Increased bowel sounds are noted

12. The cause of haematemesis include: -

- A. Esophageal candidiasis
- B. Peptic ulcer
- C. Infective endocarditis
- D. Heart failure
- E. Traumatic pneumothorax

13. The following statements are true of cardiovascular system: -

- A. A patient with heart disease usually complains of tachycardia and fatigue
- B. A patient with thyrotoxicosis may present with a symptom similar to one of heart disease
- C. A true cardiac pain is usually situated at the pericardium area
- D. A cardiac pain is usually aggravated by exertion
- E. Syncope is usually due to inadequate blood supply to the brain

14. The following vitamins are matched correctly with the conditions seen when deficient: -

- A. Vitamin A - Night blindness
- B. Vitamin B12 - Rickets
- C. Vitamin C - Beriberi
- D. Niacin - Pellagra

E. Vitamin K - Haemolytic anaemia

15. The following are true or false: -

- A. Genital ulcers may be due to scabies
- B. Hepatitis B is sexually transmitted disease
- C. Aortic aneurysm is a manifestation of syphilis
- D. VDRL blood test is confirmatory in syphilis
- E. Romberg's sign is positive in the quaternary state of syphilis

16. The following are complications of gonorrhoea: -

- A. Infection of the prostate
- B. Urethral stricture
- C. Men become sterile
- D. Blindness of both males and females
- E. Infection of the fallopian tubes

17. Leukemia presents with:

- A. Anaemia
- B. Bleeding
- C. Recurrent infection
- D. Lymphadenopathy
- E. High blood pressure

18. The following drugs are useful in the management of status epilepticus

- A. Paraldehyde
- B. Phenytoin sodium
- C. Diazepam
- D. Phenobarbitone
- E. Carbamazepine

19. Characteristic CSF findings in pyogenic meningitis include:

- A. Clear colour
- B. Lymphocytosis
- C. Elevated sugar
- D. Reduced protein

E. Positive indian ink staining

20. Epileptic seizures maybe associated with the following clinical conditions:

- A. Cerebral infarcts
- B. Brain abscess
- C. Hypocalcaemia
- D. Vascular malformation in the brain
- E. Hypoglycemia

21. Oedema in renal disease

- A. Lasix has a role in its treatment
- B. Non-pitting edema may reflect protein deposition
- C. Is worse during the day and improves overnight
- D. It is mostly unilateral
- E. Filariasis is a cause

22. True or False?

- A. Genital ulcer can be due to scabies
- B. Hepatitis B is a sexually transmitted disease
- C. Aortic aneurysm is a manifestation of syphilis
- D. VDRL blood test is confirmatory in syphilis
- E. Romberg's sign is positive in the quaternary state of syphilis

23. True or False?

- A. Psoriasis is a condition where lesions may occur after skin injury
- B. Tarbes dorsalis is a complication of non-gonococcal infection
- C. The lymph nodes may become matted in LGV
- D. Venereal warts affect also circumcised men
- E. Candida vaginitis seen in pregnancy is not sexually transmitted

24. Complications of gonorrhoea:-

- A. Infection of the prostate
- B. Urethral strictures
- C. Men become sterile
- D. Blindness of both males and females

E. Infection of the fallopian tubes

25. Trichomoniasis:-

- A. Is a disease affecting females only
- B. The PV discharge is usually greenish in colour
- C. Itchiness of the vagina may be complained of
- D. Pregnant women can be given tinidazole orally
- E. Application of gentian violet topically is advisable.

26. In Cerebrovascular Accident (CVA)

- A. Patient maybe hypertensive
- B. Patient may have aphasia
- C. Hemiplegia is a feature
- D. Speech therapy has no role in management
- E. Ophthalmic review is part of management

27. Stage II WHO staging of HIV/AIDS includes the following

- A. Unexplained persistent fever
- B. Herpes zoster
- C. Oral candidiasis
- D. Recurrent upper respiratory tract infections
- E. Pneumocystis Jiroveci Pneumonia

28. Endocrine causes of hypertension include

- A. Pheochromocytoma
- B. Cushing's syndrome
- C. Primary aldosteronism
- D. Hyperthyroidism
- E. Diabetes mellitus

29. The following are essential for erythropoiesis

- A. Erythropoietin
- B. Iron
- C. Pyridoxine
- D. Copper
- E. Androgens

30. Precipitating factors of sickle cell crisis are:

- A. Acidosis
- B. Infections
- C. Dehydration
- D. Hypoxia
- E. Severe diarrhea

SECTION B

1. A 20 year old female presents to you with history of headaches, dizziness and easy fatigability over the last 2 months. On examination you find that she is very pale.

- (i) List the investigations you would do to this patient (5 marks)
- (ii) What are the predisposing factors to this condition? (5 marks)
- (iii) How do you manage the above patient? (5 marks)

2. a) What is multiple drug resistant tuberculosis? (3marks)
b) Outline the treatment of multiple drug resistant tuberculosis (7 marks)

3. A patient presents to you with history of severe headache, vomiting and epistaxis for one day .On examination, he is found to have a BP of 175/125 mmHg

- a) Outline the pharmacological and supportive management of this patient (7 marks)
- b) List 5 complications that are anticipated in the above condition (3 marks)

4. a) What is pleural effusion? (1 mark)
b) Outline 4 common causes of exudative pleural effusion (2 marks)
c) What are the expected respiratory findings on examination of a patient with pleural effusion (4 marks)

d) State the common investigations done to a patient with pleural effusion (3 marks)

5. Briefly discuss acute pyogenic meningitis under the following

a) Clinical features (5 marks)

b) Pharmacological and supportive treatment (5 marks)

TEST PAPER 9

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. About scabies:-

- A. Can be spread during sexual intercourse
- B. Intense itching is worse at night
- C. The lesions are found mostly on the extensor surfaces of the skin
- D. Secondary infection causes urticarial papules and pustules
- E. 25% of Benzyl Benzoate emulsion is the drug of choice

2. Regarding furosemide:-

- A. Is a potassium sparing diuretic
- B. Decreases renal calcium re-absorption
- C. Reduces the passive re-absorption of water from distal tubule and collecting duct
- D. Decreases free water clearance in nephron
- E. Increases sodium excretion by sodium pump in the loop of Henle

3. A comatose patient is admitted to your ward. No history is available as he was found in the house alone:

- A. A positive slide for malaria parasites rules out other diseases
- B. Diabetes could be a cause
- C. Lumbar puncture if required is done at the level of anterior superior iliac spine
- D. Blood sugar of 6.0mmol/litre signifies hypoglycaemia.
- E. Alcohol could be the cause

4. A patient with haematuria and urine shows schistosomiasis:-

- A. The schistosome is most likely mansoni
- B. Most likely complication is portal hypertension
- C. Metrifonate may be useful
- D. Hydronephrosis may occur
- E. Transmission is by eating contaminated food

5. Causes of chronic diarrhea:-

- A. Strongyloidosis
- B. Shigellosis

- C. Tropical malabsorption
- D. Salmonellosis
- E. HIV enteropathy

6. In ankylostomiasis:-

- A. The parasite is transmitted through oral route
- B. Haemoptysis may be a symptom
- C. Iron deficiency anaemia may develop
- D. Test of stool for occult will be positive
- E. Single dose of albendazole 400mg is the best choice

7. True of typhoid fever:-

- A. The parasite is transmitted through only through dirty water
- B. Ascending fever is a clinical feature
- C. The cause is *Salmonella paratyphi*
- D. Test of stool for occult will be positive
- E. Ceftriaxone is the first line of treatment

8. In Cholera, the following are noted:-

- A. Occurs in epidemics
- B. Dehydration
- C. Anaemia
- D. Hyperpyrexia
- E. Headache

9. True symptoms of organic psychosis:-

- A. Delirium
- B. Severe depression
- C. Mania
- D. Schizophrenia
- E. Dementia

10. A 46 year old obese woman is admitted with two days history of a lower limb swelling. The limb is warm and tender:

- A. She may be having cellulitis

- B. Filariasis is the most likely diagnosis
- C. Deep venous thrombosis is likely
- D. Elevation of the limb is important in treatment
- E. Recent surgical removal of abdominal malignancy is the contributing factor

11. A 24 year old man presents to your clinic with marked dyspnoea and haemoptysis: -

- A. Pulmonary TB is definitely the diagnosis
- B. A murmur of mitral stenosis may be present on circulation
- C. Bronchiectasis could be the cause
- D. Intravenous aminophylline may be useful
- E. Iron and other haematenics should be sufficient treatment

12. The following are complications that arise from amoebic infection:

- A. Amoebic abscess
- B. Colon ulcer
- C. Amoeboma
- D. Lymphoma
- E. Intestinal obstruction

13. In relation to hookworm:

- A. *Ankylostoma duodenale* suckes more blood than *Necator americanus*
- B. Check for eggs in stool
- C. It is a common cause of upper GIT bleeding
- D. Anaemia is microlytic/ normchromic
- E. "Ground itch" is seen when the worms come out of the soil

14. Regarding stroke (Cerebro-vascular accident) CVA:

- A. In hypertensive patients cerebral heamorrhage is more common than infarction type
- B. Transient is ischemic attack (T.I.A) usually lasts about 7-8 hours
- C. Thrombolytics with tissue plasminogen activator is indicated especially in large strokes
- D. Asprin and warfarin are indicated in hemorrhage stroke while

contraindicated

E. Patients with hemorrhagic stroke are likely to die early compared with ischemic stroke

15. Concerning HIV/AIDS:

A. Adverse effects of protease inhibitors include hyperlipidemia

B. Stavudine is non-nucleoside reverse transcriptase inhibitor (NNRTI)

C. Indication of initiating high active anti-retroviral therapy (HAART) includes CD4 percent 30% in 3 years old child

D. Zidovudine may cause normocytic anaemia

E. Nevirapine, rifampicin and efavirenz will cause severe jaundice and encephalopathy

16. About meningitis:

A. The drug of choice for sterile meningitis is the amphotericin B

B. Indian ink has a major role in diagnosis of cryptococcal

C. Pneumococcal meningitis is common immunocompromised patients with CD4 count of 300

D. In TB meningitis there is an increase in both proteins and sugars in C.S.F analysis

E. In CSF analysis mononuclear cells $<50 \text{ mm}^3$ means Aseptic meningitis

17. Symptoms of hyperglycemia associated with diabetes are:

A. Thirst and dry

B. Nocturia

C. Pruritis vulvae

D. Hyperphagia

E. Total blindness

18. In treatment of acute anaphylactic shock, the following are required:

A. SC Adrenaline

B. IV Chlorpheniramine

C. IV hydrocortisone

D. IV fluids

E. IV sodium bicarbonate

20. Nucleoside reverse transcriptase inhibitors include:

- A. Amprenavir
- B. Abacavir
- C. Tenofoir
- D. Efarvirenz
- E. Stavudine

21. Parasites causing infections in AIDS include:

- A. *Cryptococcus neoformans*
- B. *Histoplasma capsulalum*
- C. *Pneumocystic carinii*
- D. Cryprosporidia
- E. *Strongloides stercoralis*

22. Aplastic crisis in sickle cell disease presents with:

- A. Low platelet count
- B. Low white blood cell count
- C. Low red blood cell count
- D. Low Hb levels
- E. Painful bones

23. Eosinophilia manifests in the following:

- A. Parasitic infections
- B. Alleregic rhinitis
- C. Urticaria
- D. Sulphonamide
- E. Polyarthritits nordosa

24. A man is bitten by stray dog. The following are indicated:

- A. Given anti-rabies vaccine
- B. Give tetanus toxoid
- C. Clean the wound immediately with soap and water
- D. Stitch the wound
- E. Maybe anti-rabies immunoglobulin

25. Recognised complications of chicken pox are:

- A. Pneumonia
- B. Proliferative glomerulonephritis
- C. Acute pancreatitis
- D. Encephalitis
- E. Myocarditis

26. Hyperthyroidism presents with:

- A. Fine tremors
- B. Heat
- C. Exophthalmos
- D. Increased body weight
- E. Menorrhagia

27. The following are precipitating factors hepatic encephalopathy:

- A. High protein diet
- B. Paracentesis abdominis
- C. G.I.T bleeding
- D. Infections
- E. Acidosis

28. Causes of obstructive jaundice are:

- A. Round worms
- B. Hepatoma
- C. Viral hepatitis
- D. Drugs e.g. glargactil
- E. Bile duct stricture

29. Right heart present with :

- A. Raised JVP
- B. Pulmonary congestion
- C. Bilateral pedal oedema
- D. Tender hepatomegaly
- E. Rhonchi

30. Which of the following thyroid fever tests are diagnostic?

- A. Widal test
- B. Blood culture
- C. Urine culture
- D. Stool culture
- E. Stool for ova cyst

SECTION B

1. Outline the comprehensive management of infective endocarditis (10 marks)

2. Discuss cardiomyopathy (10 marks)

3. a) List common skin conditions (4 marks)
b) Outline the management of acne vulgaris (6 marks)

4. a) Define alcohol withdrawal syndrome and list me symptoms a patient would present with (5 marks)
b) Briefly enumerate how you would manage a patient with alcohol withdrawal (5 marks)

5. Briefly discuss the complications of alcohol dependence /addiction (10 marks)

TEST PAPER 10

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions

Section B consists of essay questions worth 50 marks.

SECTION A

1. True about iron deficiency anaemia:

- A. Is the most type of anaemia in Kenya
- B. Hookworm infestation is a cause
- C. Is normocytic normochromic type
- D. Folic acid is useful in treatment
- E. Menorrhagia is a cause

2. Biochemical cardinal features of diabetic ketoacidosis include:

- A. Hyperglycemia
- B. Metabolic acidosis
- C. Hyperketonaemia
- D. Hyperproteinaemia
- E. Hypocalcaemia

3. About diabetic foot ulcers:

- A. Antibiotics are useful
- B. Ensure good glycemic control
- C. Remove callous skin
- D. Amputation is always the treatment of choice
- E. Are prone to become cancerous

4. In acute renal failure

- A. Refers to the sudden and usually reversible loss of renal function
- B. There is an increase in urine volume
- C. Under perfusion of the kidney is a cause
- D. Shock may be a cause
- E. Refers to irreversible loss of renal function

5. In nephrotic syndrome

- A. Patients are put on high carbohydrate diet
- B. There is usually loss of protein of about 3.5g daily or more
- C. It's characterized by hyperlipidaemia
- D. Thiazide diuretics have no role
- E. Sodium restriction is important

6. Treatment schedule for syphilis include:

- A. IM Benzathinepenicillin 2.4MU for primary stages
- B. Erythromycin 500mg TID for 15 days in tertiary stages
- C. Clotrimazole pessaries
- D. Use of 25% podophyllis paints
- E. Acyclovir cream applied 5 times a days ulcer

7. Chlamydial infection in women:

- A. Presents with thick mucopurulent vaginal discharge
- B. The infection may be asymptomatic
- C. Infertility may be a complication
- D. Perinatal transmission may lead ophthalmia neonatorum
- E. Chronic pelvic pain is a complication

8. The following may cause vaginal discharge in women:

- A. Candidiasis
- B. Bacterial vaginosis
- C. Trichomoniasis
- D. Lymphogranuloma venerum
- E. Syphilis

9. Causes of lung collapse

- A. Inhalation of foreign bodies
- B. Retained secretion
- C. Bronchial cast
- D. Enlarged tracheo-bronchial lymph nodes
- E. Tuberculosis

10. Complications of pneumonia:

- A. Parapneumonic effusion
- B. Empyema
- C. Lung collapse
- D. Pneumothorax
- E. Finger clubbing

11. Concerning gastritis:

- A. May follow ingestion of corrosive substance
- B. Patients may benefit the H2 antagonist
- C. NSAIDs have no role in treatment
- D. H.pylori is significant
- E. Anti-acids have no role in treatment

12. Hematological findings suggestive of pulmonary tuberculosis are:

- A. Leukocytosis
- B. Neutropenia
- C. Lymphocytosis
- D. ESR 16mm/hr
- E. Reticulocytes

13. Concerning disseminated tuberculosis:

- A. It is rare in adults
- B. It is radiologically diagnosed by millet mottling opacities
- C. It is treated using under 18 month regime
- D. It is always a feature of HIV
- E. BCG is always positive

14. The following are possible causes of vomiting:

- A. Hypocalcaemia
- B. Diabetes ketoacidosis
- C. Urinary tract infection
- D. Raised intracranial pressure
- E. Alcohol excess

15. The following are risk factors to cancer that can cause meningitis:

- A. Tobacco smoking
- B. High alcohol intake
- C. Achalasia of cardia
- D. Obesity
- E. Breast cancer treated with radiotherapy

16. Atrial fibrillation can be caused by:

- A. Hypertension
- B. Congestive cardiac failure
- C. Thyrotoxicosis
- D. Cardiomyopathies
- E. Alcohol abuse

17. Concerning goiter:

- A. It's a malignant tumour
- B. Incision and drainage s indicated
- C. Dyspnea is a sign
- D. Cosmetic appearance is an indication for surgery
- E. Is always diffuse

18. Common skin conditions in HIV/AIDS:

- A. Herpes zoster
- B. Scabies
- C. Kaposi sarcoma
- D. Syphilitic chancre
- E. Measle rashes

19. Indications of haemolysis includes:

- A. Elevated levels of conjugated bilirubin
- B. Reduced hemoglobin
- C. Excessive urinary urobilinogen
- D. Koilonychias
- E. Angular stomatitis

20. The following are causes of dementia:

- A. Hyperthyroidism
- B. Alcohol
- C. Pellagra
- D. Subdural haematoma
- E. Liver failure

21. Infective endocarditis:

- A. is commonly seen in patient with valvular heart disease
- B. Presents with splinter haemorrhages
- C. One specimen of blood for culture is sufficient investigation
- D. IV Gentamycin and crystalline penicilline are drugs of choice
- E. Tooth extraction is a predisposing factor

22. The following can cause congestive cardiac failure:

- A. Anaemia
- B. Hypothyroidism
- C. Septicaemia
- D. Meningitis
- E. Hypoxia

23. Metabolic associations of chronic renal failure include:

- A. Hypocalcaemia
- B. Neuropathy
- C. Hyperkalaemia
- D. Macrocytic anaemia
- E. Hyperparathyroidism

24. Macrovascular complications of diabetes include:

- A. Diabetic retinopathy
- B. Cerebrovascular accident
- C. Diabetic nephropathy
- D. Diabetic neuropathy
- E. Acute myocardial infarction

25. Differential diagnosis of microcytic anaemia includes:

- A. Iron deficiency
- B. Anaemia of chronic disease
- C. Sideroblastic anaemia
- D. Vitamin B12
- E. Hypothyroidism

26. The following constitute of viral haemorrhagic fever disease:

- A. Yellow fever
- B. Rift valley fever
- C. Marburg fever
- D. Ebola fever
- E. Thyroid fever

27. The management of amoebic liver abscess includes:

- A. Oral metronidazole
- B. Hepatic aspiration
- C. Oral tetracycline
- D. Chest x-ray
- E. IV ceftriaxone

28. The following are differential diagnosis of a patient presenting with movements of limbs and faces for 9 months . On examination, he has grimacing of the face and involuntary irregular movement of the arms and legs:

- A. Huntington's disease
- B. Parkinson's disease
- C. Rheumatic heart disease
- D. Myasthenia gravis
- E. Multiple sclerosis

29. During a neurological examination feature of laterization signs involves:

- A. Unequal pupils
- B. Facial asymmetry
- C. Bilateral extensor plantar response
- D. Papilloedema
- E. Hypokinesia

30. The following are features /signs of primary headaches:

- A. Thunder clap headaches
- B. Sturge weber sign
- C. Pot wine sign
- D. Mac waeni sign

E. Cluster headache

SECTION B

1. Define

- a) Hypertensive urgency **2 marks**
- b) Labile hypertensive **2 marks**
- c) Hypertensive retinopathy grade III **2 marks**
- d) Hypertensive emergency **2 marks**
- e) Cardiac asthma **2 marks**

2. a) List 5 cardinal signs and symptoms of shock **5 marks**
` b) List 5 types of shock **5 marks**

3. Define

- a) Tension pneumothorax **2 marks**
- b) How do you management tension pneumothorax **8 marks**

4. Manage status asthmaticus **10 marks**

5. Discuss the pathophysiology and management of cholera in a 20 year old male student. **10 marks**

THE PUBLISHER

DR AUDI

When you ask him what he yearns for, he'll tell you that he yearns to be a source of inspiration to humankind through his books, speeches, businesses and investments. In his writing career, in which he has published 30 books, he has been able to influence people, directly and indirectly, through his books.

Dr Audi, a graduate of BSc Clinical Medicine and Community Health from Jomo Kenyatta University of Agriculture and Technology, as many know him, is a 25 year old Kenyan with the dreams to make the world a better place starting with his continent Africa. He calls himself the capital of Africa and that's why he is Founder and CEO of Africapitol Group. The group consists of various companies which encompass media, publishing and business consultancy.

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