

16 Feb 2023

Diagnostic features of systemic sclerosis include all the following EXCEPT:

- a) Sclerodactyly ✓
- b) Digital pitting ✓
- c) Bibasal pulmonary fibrosis ✓
- d) Proximal scleroderma ✓
- e) Symmetrical polyarthritis ✓

Calediosis cutis

Mondkopf facies

R.A & PsA

2. A 62 year old male presents with a one year history of cough and progressive shortness of breath. Examination of the chest reveals that the anteroposterior diameter of the chest is roughly the same as the lateral diameter. The likely underlying condition is:-

- a) Pulmonary fibrosis ✓
- b) Pneumothorax
- c) Emphysema ✓
- d) Bilateral pleural effusion X
- e) Pulmonary tuberculosis

Barrel chest

→ lung Compliance : air pack
→ ↑ Intrathoracic P

3. All the following present with erythematosus lesions EXCEPT:-

- a) Purpura ✓
- b) Petechiae ✓
- c) Acne vulgaris ✓
- d) Haemangioma ✓
- e) Ecchymosis ✓

4. A 15 year old patient presents with history of recurrent itchy patches on the neck, antecubital and popliteal fossae since childhood. He has Lesional excoriation marks and marked thickness with poorly defined margins. The most likely diagnosis is:-

- a) Contact dermatitis
- b) Atopic dermatitis/Eczema
- c) Stasis dermatitis → de Nervos Trigeminalis C
- d) Seborrhoeic dermatitis
- e) Discoid dermatus

5. Clinical signs of acute eczema include all the following EXCEPT:-

- a) Papulovesicles
- b) Erythema
- c) Exudation
- d) Lichenification → Chronic Eczema
- e) Pruritus ✓

6. Clinical history of skin lesions should include all the following EXCEPT:-

- a) Duration
- b) Evolution
- c) Aggravating factors ✓
- d) Constitutional skin colour
- e) Spreading

7. Approach to diagnosis in a patient with skin lesions is based on all the following EXCEPT:-

- a) Lesional morphology ✓
- b) Lesional color✓
- c) Lesional configuration✓
- d) Lesional arrangement✓
- e) Gender

8. All the following skin Lesional types have high predictive value for diagnosis EXCEPT:-

- a) Macule
- b) Papule
- c) Plaque
- d) Wheal
- e) Scar

A 13 year old boy presents with fever, joint pain and swelling that started in the left ankle joint, then to the right knee and to the left elbow joint for a week. He now has palpitations and shortness of breath on exertion. His most likely diagnosis is:-

- a) Rheumatoid arthritis
- b) Malaria
- c) Rheumatic fever ✓
- d) Osteoarthritis
- e) Systemic lupus erythematosus

— Carditis

— Sydenham's chorea

— Migratory polyarthritis

— Scrofuloderma

— Erythema marginatum

9. A thirty year old alcoholic male presents with three month history of progressive exertional dyspnoea and leg swelling. Physical examination reveals mild respiratory distress, resting tachycardia, bibasilar fine crepitations. His 1st and 2nd heart sounds are normal and he has a third heart sound. No murmurs. The most likely diagnosis is:-

- a) Hypertrophic cardiomyopathy
- b) Restrictive cardiac myopathy
- c) Pericardial effusion
- d) Dilated cardiomyopathy
- e) Cor pulmonale

An Electrocardiogram (ECG) is diagnostic in which one of the following conditions

- a) Congestive cardiac failure
- b) Hypertension
- c) Myocardial infarction ✓
- d) Pulmonary embolism — Wells Criteria
- e) Pericardial effusion

10. Risk factors for essential hypertension include all the following EXCEPT -

- a) Obesity ✓
- b) Salt intake ✓
- c) Physical exercise
- d) Age ✓
- e) Family history of hypertension ✓

13. The following are risk factors for infective endocarditis EXCEPT:

- a) Ventricular septal defect (VSD) ✓
- b) HIV infection X
- c) Root canal treatment ✓
- d) Indwelling vascular catheters ✓
- e) Cardiomyopathy ✓

14. Regarding cholera infection, risk factors include all the following EXCEPT:

- a) Children especially below 5 years ✓
- b) Blood group type O ✓
- c) Patients on proton pump inhibitors ✓
- d) Use of antibiotics for Ten days X
- e) Eating raw shell fish ✓

AB

?

gastric acids

CF gene

protected

15. A 13 year old harder from Northern Kenya present with fever, abdominal distension and weight loss for 3 months. All the following are possible diagnosis EXCEPT:-

- a) Kalaazar ✓
- b) Hyper immune malaria splenomegally ✓
- c) Chronic myeloid leukaemia
- d) Aplastic anaemia
- e) Lymphoma ✓

16. A 18 year old school girl presents with fatigue and right upper quadrant pain for 2 years. There is a palpable nodular liver. All the following historical information are relevant EXCEPT:-

- a) History of Transthoracic Echocardiogram
- b) Petto artwork on her body ✓
- c) Previous intravenous drug abuse
- d) History of Road traffic accident 4 years ago ✓
- e) History of multiple sexual partners ✓

17. A 35 year old man presents with a 5-day history of vomiting and diarrhoea. The abdomen is distended and bowel sounds are absent what is the most likely cause of the distension:-

- a) Intestinal obstruction secondary to adhesion ✓
- b) Hypokalaemia
- c) Hypostomiasis
- d) Dehydration
- e) Pyoric vomiting

18. A 35 year old farmer from Makueni presents with haematemesis and flank fullness. Serum albumin and prothrombin time index is normal. The most likely causes of his illness is:-

- a) Schistosomiasis
- b) Chronic Hepatitis B virus (HBV)
- c) Alcohol
- d) Chronic Hepatitis C virus (HCV)
- e) Haemodialysis

and occasional loose motions. She is febrile (temperature 40 °C), respiratory rate 18/min, pulse 120/min. Blood pressure 120/80 mmHg. There is soft upper palpable spleen. All the following are priority investigations in establishing her diagnosis EXCEPT:

- a) Blood culture ✓
- b) Bone marrow culture ✓
- c) Stool culture ✓
- d) Cerebrospinal fluid for culture ~~✓~~
- e) Abdominal ultrasound ✓

20. A 15 year old presents with two week history of epigastric pain, vomiting and black stool. There was tenderness at the epigastrium. Which of the following organisms need to be checked for:

- a) Campylobacter jejuni ✓
- b) Shigella dysenteriae ~~✓~~
- c) Helicobacter pylori
- d) Hookworm
- e) Entamoeba histolytica

21. All the following are signs and symptoms of liver failure EXCEPT:

- a) Coma ✓
- b) Altered sleep pattern ✓
- c) Mental confusion ✓
- d) Coagulopathy ✓
- e) Esophageal varices ~~✓~~

22. A 40 year old alcoholic presents with abdominal distension, leg oedema and yellow eyes. He has a liver span of 5 cm. All the following are expected findings EXCEPT:

- a) Gynaecomastia ✓
- b) Testicular atrophy ✓
- c) Caput medusae ✓
- d) Dupuytren's contracture ✓
- e) Total Alopecia ~~✓~~

23. A 30 year old presents with vomiting of blood and fainting episode. Which of the following signs best fits the case:

- a) Blood pressure of 70/50 with cold periphery ✓
- b) Pulse rate of 20 beats/minute ~~✓~~
- c) Warm periphery with wide pulse pressure
- d) Blood pressure of 180/90 with excessive moist skin ~~✓~~
- e) Collapsing pulse ~~✓~~

HTN

tachycardia

24. A 30 year old presents with a one month history of epigastric pain and malaena stool. Which test would be most appropriate?

- a) Blood screening for hepatitis B
- b) Stool for ova and parasite
- c) Abdominal ultrasound
- d) Gastroscopy
- e) Upper GI endoscopy ~~✓~~

During a gastro endoscopy
Oesophagitis/Esophagitis
Barrett's oesophagus
Pre-malignant

Sept 5 2018

25. A 50 year old patient presents with ascites without peripheral oedema. Which of the following is a likely differential diagnosis:-

- a) Alcohol cirrhosis X
- b) Tuberculous peritonitis
- c) Nephrotic syndrome X
- d) Allergic reaction X
- e) Fluid overload X

26. A patient is suspected to have tuberculous peritonitis. Which of the following Ascitic fluid analysis is not finding in tuberculous peritonitis:-

- a) Ascitic fluid lymphocytosis ✓
- b) Serum ascitic albumin gradient of $< 1.1 \text{ g/dl}$ ✓ $\Rightarrow 1.1 \text{ g/dl}$
- c) Serum albumin $< 3 \text{ g/dl} \propto > 8 \text{ g/dl}$
- d) High lactic dehydrogenase (LDH) ✓
- e) Adenosine deaminase testing is useful ✓

27. An elderly patient with history of heavy smoking, presents with 3 week history of productive cough, chest pain, fever and weight loss. He was noted to have finger clubbing. All of the following are possible differential diagnosis EXCEPT:-

- a) Lung abscess ✓
- b) Bronchiectasis ✓
- c) Tuberculosis ✓
- d) Lobar pneumonia ✓
- e) Bronchogenic carcinoma ✓

28. A group of foreign visitors went fishing in a river in Kenya in a small boat. Thereafter two of them presented with itchiness all over the body, and fever. All the following are relevant EXCEPT:-

- a) His symptoms are related to exposure to water ✓
- b) Eosinophilia is expected ✓
- c) Lymphadenopathy occurs in the condition ✓
- d) This is most likely Katayama syndrome ✓
- e) Stool examination is diagnostic ✓

Stool & Urine exp. part.

29. Visceral Leishmaniasis can be acquired in all the following regions EXCEPT:-

- a) Nairobi ✓
- b) Kisumu ✓
- c) Marabut ✓
- d) Mandera ✓
- e) Malindi ✓

✓ Na Cheloxinate Rx

30. The current treatment of uncomplicated malaria in Kenya is:-

- a) Combination of artesunate and mefloquine ✓
- b) Artemether - lumefantrine combined therapy
- c) Armodiguanine/artesunate
- d) Quinine plus artesunate
- e) Quinine plus macrocycline

31. Which one of the following statements is false concerning Kalaazar (visceral leishmaniasis):
- Characterized by fever, anaemia and massive splenomegaly ✓
 - Is diagnosed by doing a splenic aspirate → BM is (correct)
 - A combination of sodium stibogluconate and paromomycin is the treatment of choice
 - Leukopenia is known to occur ✓ *Pancytopenia*
Characteristic Leishmania donovani bodies are easily demonstrated in the peripheral blood. (amastigotes)

32. Which one of the following statements is correct:

- Hydatid disease is transmitted by eating partially cooked mutton X *embryonated egg*
Taenia saginata is transmitted by eating partially-cooked beef ✓ *taenia saginata*, *Nicollina*
- Hookworm is commonly transmitted by swallowing embryonated eggs X *Catarrh* for *T. colubriformis*
- Leishmania is transmitted by *Simulium damnosum* bite X *Phlebotomus Sand fly* *Catarrh*
- Schistosoma mansoni is transmitted by drinking contaminated water X *Enterobius* *Skin*

33. A 22 year old medical student presents with fever, vomiting loose stool and Jaundice of 2 weeks duration. He is also noted to be Jaundiced. Alanine Transaminase (ALT) is 3 000 U/L. Which of the following is likely cause:-

- HCV
- HBV ✓
- HAV
- HDV
- CMV

34. A 22 year old man is started on treatment for pulmonary tuberculosis. He comes to the medical outpatient after one week of treatment with complaints of passing orange-red coloured urine and stool. Which of the following drugs is most likely causing the colour change:-

- Streptomycin
- Rifampicin
- Ethambutol
- Pyrazinamide
- Thiavulavzone

RST 10-40
RUT 7-56

35. A 25 year old male patient presents to the medical outpatient clinic with complaints of cough and low grade fever of 3 months duration. Sputum taken was positive for acid-fast bacilli. Which of the following combination of drugs is most likely to be administered at the start:-

- ✓ Streptomycin, Isoniazid, Pifampicin, Pyrazinamide
- Rifampicin, Isoniazid, Pyrazinamide, Ethambutol
- Pyrazinamide, ethambutol, Isoniazid, Thiacetazone
- Streptomycin, Rifampicin, Erythromycin, Ticarcillin
- Streptomycin alone

R.H.ZE

W. Inflammation

36. Which of the following statements is correct regarding aetiology of community acquired pneumonia:-
- Legionella frequently affects younger people
 - ~~Streptococcus pneumoniae is the most common cause~~
 - Staphylococcus aureus pneumonia can occur as a complication of influenza
 - Atypical pathogens are mainly extracellular
 - Haemophilus influenzae is most common with COPD
37. Which one of the following is the drug of choice for treatment of *Strongyloides stercoralis*: -
- Metronidazole
 - Albendazole
 - Ivermectin → drug of choice, 2nd → Thiabendazole
 - Mebendazole
 - Scendazole
38. A 38 year old food handler has a stool exam while in the hospital for a routine evaluation. The stool is found to have cysts of *Entamoeba histolytica*. Which one of the following drugs should be used:
- Diloxanide furoate
 - Albendazole
 - Mebendazole
 - ~~Metronidazole~~ → *Trichuriasis*
 - Ivermectin
39. A 40 year old female who has been admitted in the ward for the last 2 weeks for management of deep venous thrombosis develops a cough associated with fever and production of yellowish sputum. Which one of the following organisms is a likely cause:-
- ~~Moraxella catarrhalis~~
 - ~~Staphylococcus aureus~~
 - ~~Adenovirus~~
 - ~~Chlamydophila pneumoniae~~
 - ~~Rhinovirus~~
40. Sudden onset of breathlessness is most likely due to:-
- Pneumonia
 - Asthma
 - Interstitial lung disease
 - Anæmia
 - Pulmonary Embolism
41. The sensory nerve supply to the diaphragm comes from:-
- C₃ and C₄
 - C₃ and C₅
 - C₃ and C₇
 - T₃ and T₄
 - T₃ and T₅

42. An increase in cell cause a transudative pleural effusion EXCEPT

- a) Nephrotic syndrome
- b) Heart failure
- c) Liver cirrhosis
- d) Protein losing enteropathy

Rheumatoid arthritis

Radical Colostomy

Occasionally >500 ml

VCF, Cancer peritoneal, SVC obstruction, hyperthyroidism, fractures, Peritoneal dialysis

43. The correct sequence for Ziehl Neelsen staining for acid fast bacillus includes:-

- a) Carbol fuchsin → acid alcohol → methylene blue
- b) Methylene Blue → formalin → acid alcohol → carbol fuchsin
- c) Formalin → carbol fuchsin → Methylene blue → acid alcohol
- d) Acid alcohol → formalin → carbol fuchsin → methylene blue → water
- e) Formalin → Methylene blue → carbol fuchsin → acid alcohol → water

44. In Kenya patients with drug sensitive pulmonary tuberculosis are treated for:-

- a) 8 months → Intensive phase, HRE
- b) 6 months
- c) 9 months → CT phase, extrapolation
- d) 4 months → CT phase, PBB
- e) 2 months → Intensive phase, PIBS

45. A 36 year old HIV positive male patient presents with a three day history of acute onset cough, chest pain, and fever. His CD4 cell count is 400/ml. The most likely cause of this presentation is:-

- a) Pneumocystis jirovecii ✓ <200 CD4+ Chills, cough, tingling, diarrhea, pain, fever
- b) Tuberculosis ✗ <300
- c) Mycoplasma pneumonia
- d) Streptococcus pneumonia
- e) Haemophilus influenza

46. Immunologic criteria for the classification of systemic lupus erythematosus include the following EXCEPT:-

- a) Hemolytic anemia ✓ Herpetiform rash
- b) Anti nuclear antibody ✓ (ANA)
- c) Anti smooth muscle antibodies ✓ Anti-HBc antigen
- d) Anti DNA antibodies ✓
- e) Low complement C3 ✓

Sensitivity

Only ANA

Antinuclear

Smooth muscle

Blood disorders, thrombopenia

Kidney involvement

47. The following are muscle enzymes EXCEPT

- a) Creatinine phosphokinase (CPK) ✓ Liver enzymes
- b) Aldolase ✓
- c) Transaminases ✓ AST, ALT
- d) Lactic Dehydrogenase (LDH) ✓
- e) Alkaline phosphatase

ANAS

Increase in Coe DNA in

Neruopathies

Muscle pain

General rash

Need to understand Neuromuscular disorders

144.

- For question 48, which of the following is NOT a red flag for serious back pain include the following EXCEPT:
- Weight loss ✓
 - Nocturnal pain ✓
 - Age over 50 years with new onset pain ✓
 - Fever ✓

Normal neurological findings

49. The following are true concerning rheumatoid arthritis EXCEPT:-

- Earlier onset in women ✓
- Leads to premature death ✓
- Commoner in men ✓
- Primarily targets Synovial tissues ✓
- Symmetrical polyarthritis ✓

50. Which one of the following is not classified as a connective tissue disease:-

- Systemic lupus erythematosus (SLE) ✓
- Dermatomyositis ✓
- Osteoarthritis ✓
- Sjogren's Syndrome ✓ Dry eyes, dry mouth ✓
- Systemic sclerosis ✓

51. All of the following drugs are used in the treatment of gout EXCEPT:-

- Colchicine ✓
- Non steroidal anti-inflammatory drugs (NSAIDS) ✓
- Intra-articular steroids ✗
- Oral steroids ✓
- Methotrexates ✓

52. Which one of the following is not a clinical feature of systemic lupus erythematosus:-

- Photosensitive rash ✓
- Hæmolytic anaemia ✓
- Chronic kidney disease ✓
- Arthritis with joint destruction ✗
- Oral ulcerations ✓

53. A 60 year old male patient presents with a 6 months history of epigastric pain radiating to the back and weight loss. Which one of the following is the most likely cause:-

- Anterior wall duodenal ulcer
- Gastric cancer ✓
- Pancreatic cancer ✗
- Hepatocellular cancer ✗
- Aspirin induced gastropathy

54. A 25 year old male patient presents with a liver mass with alpha-feto-proteins level of 1,000 ng/ml. Which one of the following is not compatible:-

a) Anorexia ✓

b) Weight loss ✓

c) Right upper quadrant pain ✓

d) Bruit over mass ✓

e) Smooth surface of the mass ✓ *(Nodules)*

(P-HCC)

55. A 20 year old female patient presents with leg swelling, abdominal distension and a liver span of 3 cm. She has been unwell for 6 months. All of the following are possible causes EXCEPT:-

a) Alcohol ✓

b) Aflatoxin ✓

c) Iron overload ✓

d) Copper overload ✓

e) Paracetamol overdose ✓

56. Which of the following diseases needs proper handwashing in order to prevent transmission:-

a) Hepatitis C virus ✓

b) Hepatitis B virus ✓

c) Herpes Simplex virus ✓

d) Cytomegalovirus ✓

e) Hepatitis E virus ✓

57. A 50 year old male presents with bulky stools of 15 grams/24 hours and weight loss. Which one of the following is UNLIKELY to cause the clinical state:-

a) Chronic pancreatitis ✓

b) Lymphoma of the small intestine ✓

c) Pancreatic surgery ✓

d) Gastric cancer ✓

e) Celiac disease ✓

58. A 20 year old presents with hypotension and profuse watery diarrhoea of 2 days duration. The stool had no blood or pus cells and sigmoidoscopy was normal. Which ONE of the following is BEST associated with clinical picture:-

a) Salmonella typhi

b) Shigellosis

c) Amoebiasis

~~d) Vibrio cholera~~

e) Irritable bowel syndrome

Cause of bulky stools

Colon st.

Colon st.

Obstructive bowel

Colitis

Infective colitis

Inflammatory st.

Structural st.

JVP

Ceph

Desferrioxamine

Iron chelation

No B & P present

clams exp

UV & VIT deficiency

clams exp

WBC polymorph neut

in the abdomen

Pigmenturia

59.

A 35 year old male presents with leuconychia, palmar erythema, parotid enlargement, gynaecomastia and ascites. All of the following are likely underlying causes for his presentation EXCEPT:

- a) Chronic alcohol use ✓
- b) Schistosoma mansoni infection ✓
- c) Chronic hepatitis B infection ✓
- d) Chronic Asbestos consumption ✓
- e) Non-alcoholic fatty liver ✓

60.

All of the following are classical features of peripheral neuropathy EXCEPT:

- a) Fasciculations ✓
- b) Wasting of the skeletal muscles ✓
- c) Hypotonia ✓
- d) Burning and tingling sensation in the fingertips ✓
- e) Ankle clonus

61.

Which one of the following is NOT a characteristic of the carotid pulse at the neck?

- a) It has a definite upper limit ✓
- b) It is better felt than seen ✓
- c) It cannot be obliterated ✓
- d) It does not vary with posture ✓
- e) Pressing on the abdomen does not affect it ✓

JVP

superficial, lateral

- Better seen

2 peaks, 2 troughs

per cycle

Carotid

deeper, medial

- Better felt for deep

single upstroke

62.

Which one of the following conditions is NOT considered as an AIDS-defining illness:-

- a) Cryptococcal meningitis ✓
- b) Recurrent severe bacterial infection ✓
- c) Pneumocystic pneumonia ✓
- d) Cryptosporidium diarrhoea ✓
- e) Extrapulmonary tuberculosis ✓

AIDS-defining illness

- CMV

- HHV

- 10 cerebral lymphomas

- CMV

63.

A patient is found to have a JVP of 10 cm of water. All the following are likely causes EXCEPT:

- a) Dilated cardiomyopathy ✓
- b) Constrictive pericarditis ✓
- c) Pleural effusion ✓
- d) Pulmonary embolism ✓
- e) Pericardial effusion ✓

JVP causes

- CCF

- Cor pulmonale

- VPF

- RV infarct

- Tricuspid valve stenosis

- Atrial fibrillation

- Constrictive pericarditis

- Hypertrophic cardiomyopathy

- Ischaemic heart disease

- Infective endocarditis

- Viral hepatitis B and C

- ESRD

64.

All of the following are causes of finger clubbing EXCEPT:

- a) Lung abscess ✓
- b) Infective endocarditis ✓
- c) Bronchiectasis ✓
- d) Uncontrolled asthma ✓
- e) Ulcerative colitis ✓

..... deficiency is found in patients with terminal ileum disease:-

- a) Calcium
- b) Iron
- c) Folic acid → Megaloblastic anaemia
- d) Tryptophan
- e) Cobalamin →巨幼红

66. A 35 year old alcoholic goes to bed and wakes up in the morning with wrist drop. The most likely nerve injury is:-

- (a) Radial nerve → Claw hand
- b) Ulnar nerve → Claw hand
- c) Musculocutaneous nerve
- d) Median nerve → Pinch's index
- e) Axillary nerve

67. Which one of the following is NOT one of the major criteria for diagnosis of acute rheumatic fever?

- a) Carditis ✓
- b) Chorea ✓
- c) Erythema marginatum ✓
- (d) Fever ✓
- e) Polyarthritis

68. Which one of the following is NOT a symptom/sign of early anaphylactic reaction to snake antivenom?

- a) Angioedema ✓
- b) Bronchospasm ✓
- (c) Hypertension → High potassium
- d) Urticaria ✓
- e) Vomiting

Complicated reaction
Anaphylaxis
Type I (IgE mediated)
Type II (Antibody dependent cell mediated)
Type III (Immune complex mediated)
Type IV (Delayed hypersensitivity)

69. A patient is found to have a collapsing pulse on physical examination. All of the following are likely causes EXCEPT:

- a) Thyrotoxicosis ✓
- b) Patent ductus arteriosus ✓
- c) Pagets disease of the bone
- (d) Aortic stenosis
- e) Anemia ✓

70. Which one of the following is NOT an indication for the administration of snake antivenom?

- (a) Non-toxicity ✓
- (b) Non-clotting black blood
- c) Spontaneous systemic bleeding ✓
- d) Recagulable blood after 20 minutes whole blood clotting test
- e) Rapidly progressive local swelling following bites on digits

local
local inflammation
Numbness, Paralysis, loss of

71. A 30 year old male with history of 10 years of heavy alcohol intake presents with 3 hours history of vomiting frank blood. On examination jaundice he has lower limb edema. The LEAST LIKELY cause for the Hacinateosis is:

- a) Gastric cancer
- b) Mallory Weiss tear
- c) Duodenal ulcer
- d) Gastric ulcer
- e) Esophageal varices

72. A 35 year old woman presents with anterior neck swelling for the last three months. She's been losing weight, has protruding eyes and cries easily. All of the following examination finding of her hands are consistent with her diagnosis EXCEPT:-

- a) Fine tremors
- b) Onycholysis
- c) Coarse palms
- d) Sweaty palms
- e) Smooth velvety skin on the dorsum of the hand

73. A 52 year old woman was treated for thyrotoxicosis with radioactive iodine 3 year ago. Which one of the following features is least suggestive of hypothyroidism?

- a) Poor memory
- b) Somnolence
- c) New onset vaginal bleeding
- d) Deteriorating vision
- e) Dysarthria

74. A patient presenting with polyuria may have any of the following endocrine causes EXCEPT:-

- a) Diabetes mellitus
- b) Diabetes insipidus
- c) Syndrome of inappropriate ADH secretion
- d) Hyperthyroidism
- e) Hyperparathyroidism

75. A 42 year old man has severe obesity with a BMI of 45 kg/m². All of the following are relevant in the history EXCEPT:-

- a) Exercise intolerance
- b) Polyuria
- c) Poor sleep at night
- d) Pain of the knee joints
- e) Jaundice

76. Cigarette smoking is associated with all of the following EXCEPT:-

- a) Ischaemic heart disease
- b) Chronic bronchitis
- c) Peptic ulcer disease
- d) Stroke
- e) Good dentition

77. All of the following are associated with macrocytosis EXCEPT:
- a) Kostechytosis ✓
 - b) Alcoholism ✓
 - c) Liver disease ✓
 - d) Lead poisoning. ✓
 - e) Myelodysplasia ✓
78. All the following laboratory findings are compatible with iron deficiency anaemia EXCEPT:
- a) Reduced iron stores on bone marrow examination ✓
 - b) Reduced serum ferritin ✓
 - c) Reduced mean corpuscular haemoglobin concentration ✓
 - d) Microcytosis ✓
 - e) Reduced total iron binding capacity. ↑ TIBC
79. The following clinical features are found in patient with Cobalamin deficiency except:
- a) Skin hyperpigmentation ✓
 - b) Koilonychia ✗
 - c) Glossitis ✓
 - d) Peripheral neuropathy ✓
 - e) Mental changes ✓
80. The following conditions will result in increased coagulation and clot formation EXCEPT:
- a) Disseminated intravascular coagulation (DIC) ✓
 - b) Anti-thrombin III deficiency ✓
 - c) Factor V Leiden mutation ✓
 - d) Factor X deficiency ✓
 - e) Protein C deficiency ✓
81. The most common clinical physical finding in patients with chronic myeloid leukaemia is:
- a) Generalised lymphadenopathy
 - b) Hepatomegaly
 - c) Splenomegaly ✓
 - d) Fever greater than 38 °C
 - e) Ecchymosis and petechiae
82. A 45 year old patient from Homa Bay presents with massive splenomegaly and anaemia. Which ONE of the following is FALSE.
- a) Blood slide for malaria parasite should be performed ✓
 - b) Stool examination for ova of *Schistosoma mansoni* should be performed ✓
 - c) Ultrasonography for the portal system should be performed ✓
 - d) Bone aspirate for *Leishmania donovani* bodies is contra-indicated ✓
 - e) Gynaecoscopy for varicose bleeding is an appropriate investigation

83. A 19 year old patient presents with a 3 week history of haematuria. Physical examination reveal petechiae and no palpable spleen the haemoglobin is 8 g/dl, platelets 18×10^9 /litre, and total white cell count is 6.3×10^9 /litre. Bone marrow is normal. Which is the most likely diagnosis?
- Aplastic anaemia
 - Vitamin B₁₂ deficiency
 - Immune thrombocytopenic purpura
 - Anaemia of chronic illness
 - Immune haemolytic anaemia
84. Which one of the following findings is NOT expected in a 75 year old patient with anaemia and multiple skeletal fractures if the serum prostate specific antigen (PSA) level is 1.3 ng/ml.
- Finger clubbing
 - Osteoporosis
 - Elevated erythrocyte sedimentation rate
 - Lytic bone lesions on x-rays
 - Elevated serum creatinine
85. Which one of the following is Not useful in the management of sickle cell anaemia?
- Folic acid
 - Ferrous sulphate
 - Hydroxy carbamide / Hydralazine
 - Paracetamol
 - Tramadol
86. Regarding cardiac auscultation techniques, which one of the following is true?
- The bell chest piece is best suited for high pitched sounds
 - The diaphragm is placed firmly on the precordium
 - Positioning the patient in the left lateral position is ideal for aortic auscultation
 - Left sided murmur are accentuated on inspiration
 - Right sided murmur are accentuated on inspiration
87. Regarding muscle disease, which one of the following is TRUE:-
- Polymyositis is a form of muscular dystrophy
 - Alcohol ingestion results in a toxic myopathy
 - Hypothyroidism often presents with myopathy
 - HIV infection often presents with muscular dystrophy
 - Hypokalaemia often presents with a myopathy
88. The commonest bacterial organism causing infective endocarditis in Kenya is?
- Methicillin negative staphylococcus
 - MRSA organisms
 - Streptococcus viridans
 - Enterococcus species
 - Staphylococcus aureus

A 25 year old man presents with sudden onset weakness of the right side of the body with normal speech. The MOST likely site of the lesion is?

- A. Internal capsule
- B. Middle cerebral artery territory
- C. Brain stem
- D. Pons
- E. Cerebellar peduncle

2. Which one of the following statements is TRUE regarding characteristics of X-linked recessive disorders?

- A. In the male, X-linked recessive genes only manifest when the genes are homozygous
- B. The condition usually affects females
- C. They are transmitted by healthy male carriers
- D. Male off springs of a male with the disorder inherit the disease
- E. All female off springs of an affected male will be carriers.

3. Which one of the following drugs used in the treatment of tuberculosis is correctly matched with its expected adverse reaction?

- A. Streptomycin - optic neuritis
- B. Isoniazid - hypothyroidism
- C. Rifampicin - peripheral neuropathy
- D. Pyrazinamide - hepatotoxicity
- E. Ethambutol - renal failure

4. All of the following diseases are classified as spondyloarthropathies EXCEPT:

- A. Ankylosing spondylitis
- B. Psoriatic arthritis
- C. Reactive arthritis
- D. Polymyalgia rheumatica (V.C., C.sch. dx)
- E. Enteropathic arthritis

5. A 25 year old man presents with a 4 month history of swellings on the left lower neck and generalized pruritis. Examination reveals mobile non-tender rubbery lymph nodes. Lymph node biopsy shows features of nodular sclerosis Hodgkin's disease. Bone marrow confirms marrow infiltration. Computerized tomography (CT) scan of the chest, abdomen and pelvis are normal. What is the stage of the disease?

- A. IIA
- B. IIIB
- C. IIIC
- D. IV Extended involvement
- E. AIDS

Ankylosing spondylitis - Sacroiliac test

Psoriatic arthritis

Reactive arthritis

In a patient with mild, 24 hour albuminuria (<300 mg/24 h) and normal glomerular filtration (GFR), the following complications are expected

- A. Hypercoagulability ✓
- B. Metastatic calcification? *Low Co. of vA* D
- C. Atherosclerosis ✓
- D. Susceptibility to infections ✓
- E. Hyponatraemia t

7. A 60 year old man presents to his doctor for a medical check. He is found to have a random blood sugar (RBS) of 7 mmol/L. An oral glucose tolerance test (OGTT) done showed fasting blood glucose of 6.2 mmol/L, 2 hour post glucose load of 14.4 mmol/L. Which of the following statements is TRUE regarding this patient?

- A. He has diabetes mellitus
- B. He has impaired glucose tolerance
- C. He has metabolic syndrome
- D. He should have fasting lipid assay to determine the diagnosis
- E. Another OGTT should be done in 6 months to determine his diagnostic status

8. A 22 year old man presents to the emergency department with a 3-day history of fever, cough and pleuritic chest pain. His temperature is 39°C, pulse rate is 110 beats/min and respiratory rate is 26 beats/min. Chest radiograph reveals an opacity in the right lower lung zone. Which of the following is the MOST common cause of the condition?

- A. *Candida albicans*
- B. *Pseudomonas aeruginosa*
- C. *Mycoplasma pneumoniae*
- D. *Staphylococcus aureus*
- E. *Streptococcus pneumoniae*

9. A 12 year old boy develops migratory joint pain involving large joints 2 weeks after a sore throat. He has a tachycardia of 110 beats/min, and a systolic murmur at the apex. Which of the following statements is TRUE concerning his clinical presentation?

- A. The micro-organism causing the sore throat is likely to be *Staphylococcus aureus*
- B. Blood cultures usually yield the offending organism ✓
- C. The heart involvement is usually pancarditis ✓
- D. Erythema nodosum is expected
- E. Shortened PR interval is found on the electrocardiogram (ECG)

10. A 20 year old man presents with 3 months history of bloody mucoid diarrhoea. Colonoscopy shows diffuse erythema and ulcerations in the cecum colon and patchy areas on the terminal ileum. The MOST likely diagnosis is

- A. Crohn's disease - *ulcerative*
- B. Crohn's disease - *ulcerative*
- C. Amoebic colitis
- D. Shigellosis
- E. Tyberimbia enteritis

11. A patient presents with oral lesions for 1 month. He has flaccid vesicles and bullae on the mouth and limbs. Nikolski sign is positive. The MOST likely diagnosis is:
- A. Erythema multiforme major
 - B. Mucous membrane pemphigoid
 - C. Bullous pemphigoid
 - D. Pemphigus foliaceus
 - E. Pemphigus vulgaris
12. A 25 year old man with history of HIV disease presents with a history of chronic headache. Neurological examination is normal. CT scan reveals a contrast enhancing ring lesion on the left parietal lobe. The MOST appropriate approach would be:
- A. Biopsy the lesion
 - B. Start patient on steroids
 - C. Start patient on empirical antibiotics
 - D. Start patient on empirical anti-toxoplasmosis treatment
 - E. Start patient on intravenous acyclovir
13. The following are the results of cerebrospinal fluid (CSF) obtained from a 40 year old man with meningitis.
- Protein 100g/l
 - Glucose 1mmol/l
 - White cell count 2000 cells/ μ l, predominantly lymphocytes
 - Gram stain negative
- These findings are compatible with:
- A. Pyogenic meningitis
 - B. Viral meningitis
 - C. Tuberculous meningitis
 - D. Sarcoidosis
 - E. Cryptococcal meningitis
14. Which one of the following is the MOST important attribute necessary for a screening test?
- A. Sensitivity
 - B. Specificity
 - C. Positive predictive value (PPV)
 - D. Negative predictive value (NPV)
 - E. Receiver-operator curve (ROC)
15. All of the following statements regarding *Plasmodium falciparum* are true EXCEPT:
- A. It causes most severe disease in pregnancy
 - B. It is associated with frequent relapses after effective initial treatment
 - C. It is the only malarial parasite causing greater than 20% parasitemia
 - D. Infection is associated with the agglutinogen antigen
 - E. It is only cause of malarial aplasias

16. All of the following are diagnostic criteria for polymyositis EXCEPT

- A. Elevated creatine kinase
- B. Proximal muscle weakness
- C. Myopathic electromyogram (EMG)
- D. Typical changes on muscle biopsy
- E. Heliotrope rash

17. A 13 year old boy presents with long-standing mild jaundice, moderate pallor and moderate splenomegaly. The MOST likely diagnosis is

- A. Sickling cell anaemia
- B. Non-Hodgkin's lymphoma
- C. β -thalassaemia
- D. Chronic myeloid leukaemia
- E. Myelofibrosis

18. A 56 year old man presents with severe low back pain, lumbar spine tenderness and general ill health. He has pallor and mild ankle oedema. Investigations show haemoglobin 6g/dl, MCV 80fl, ESR 110mm/L serum albumin 30g/l, total protein 130g/l. Xrays show compression fracture L3 to L5 and osteolytic lesions in the pelvic bones. Common causes of renal failure in this condition include all the following EXCEPT - ~~MMI do not~~

- A. Neurogenic bladder
- B. Hypercalcaemia
- C. Hyperuricemia
- D. Proteinuria
- E. Hyperparathyroidism

19. A 28 year old woman is followed up for thyrotoxicosis. She is on antithyroid medication. Which one of the following clinical parameters will closely reflect her thyroid hormone status?

- A. Emotional variability (moods)
- B. Menstrual patterns
- C. Palpitations
- D. Sleep patterns
- E. Weight

20. All of the following interventions are beneficial in the management of patient's with chronic obstructive airway disease (COPD) EXCEPT

- A. Pneumococcal vaccination
- B. Cessation of smoking
- C. Short acting bronchodilators
- D. Inhaled anti cholinergics
- E. High dose in oxygen therapy

21. All of the following auscultatory findings are expected in mitral stenosis:-
- A. Mid-diastolic murmur
 - B. Soft first heart sound - Loud S₁
 - C. Presystolic murmur accentuation
 - D. Opening snap
 - E. Loud second heart sound
22. A patient presents with massive haematemesis for 1 day. Endoscopy reveals acutely bleeding oesophageal varices. All of the following treatments would be recommended EXCEPT:-
- A. Sclerotherapy
 - B. Propranolol infusion
 - C. Octreotide infusion
 - D. Nasogastric tube insertion
 - E. Band ligation
23. A 25 year old woman presents with erosion, weeping and crusted lesions on 30% body surface area. The plan of management should include all of the following EXCEPT:-
- A. Septic screen
 - B. Saline soaks
 - C. Infection control
 - D. Keep warm
 - E. Emollients
24. A 55 year old man with HIV develops a vesicular eruption along the left side of the ribcage. The eruption is preceded by days of tingling and burning sensation. Which one of the statements is TRUE regarding the condition?
- A. Corticosteroids should be started immediately
 - B. Early acyclovir reduces the duration of symptoms
 - C. Previous *Herpes simplex* virus infection is associated with this presentation
 - D. Disappearance of the rash is associated with disappearance of symptoms in all the patient's
 - E. Amitriptylline has no role in the management of this condition
25. A 50 year old man presents with history of wasting of the small muscles of the hand associated with dysarthria and dysphagia. Examination reveals spastic immobile tongue, wasted muscles of the hands with increased deep tendon reflexes. All of the following statements are true regarding the condition EXCEPT:-
- A. Autosomal dominant inheritance
 - B. Cause of death is usually respiratory
 - C. Associated with myelopathy
 - D. Responds to steroids
 - E. Autonomic involvement is a late complication

26. You notice in the locker room one of your colleagues injecting himself with pethidine. What would be your MOST appropriate actions?
- A. Report to the supervisor
 - B. Counsel your colleague yourself
 - C. Pretend you did not see him
 - D. Ask your senior colleague to talk to him
 - E. Report him to the director of the hospital
27. A 28 year old man presents with painful micturition and a purulent urethral discharge for 2 days. Which one of the following is NOT an appropriate drug for his treatment?
- A. Ciprofloxacin ✓
 - B. Ceftriaxone ✓
 - C. Amoxycillin ✓
 - D. Azithromycin ✓
 - E. Doxycycline ✓
28. Which one of the following is NOT a feature of fibromyalgia?
- A. Anxiety
 - B. Fatigue
 - C. Irritable bowel syndrome (IBS)
 - D. Scleritis
 - E. Sleep disturbance
29. A 30 year old man presents with general body weakness. Physical examination reveals pallor and koilonychia. Which one of the following is the MOST likely positive laboratory finding?
- A. Presence of *Ascaris lumbricoides* ova in his stool
 - B. Presence of *Taenia saginata* ova in his stool
 - C. Increased faecal stercobilinogen
 - D. Mean corpuscular volume (MCV) of 55fl
 - E. Reduced total iron binding capacity (TIBC)
30. Which one of the following renal disease is well matched to renal imaging findings?
- A. Chronic glomerulonephritis - bilateral contracted echogenic kidneys
 - B. Obstructive uropathy - echogenic kidneys
 - C. Chronic pyelonephritis - enlarged globular kidney
 - D. HIV nephropathy - bilateral small scarred kidneys
 - E. Acute tubular necrosis - dilated calyces.
31. The metabolic syndrome is defined by the presence of all the following characteristics EXCEPT:
- A. Abdominal obesity
 - B. Hypertension
 - C. High high-density lipoprotein(HDL) - cholesterol ↓
 - D. Hypertriglyceridemia
 - E. Impaired glucose tolerance

32. All of the following findings are compatible with a diagnosis of *Cryptocystis pneumoniae* (X-CTCP).
A. Elevated white blood cell count
B. Low CD4 count
C. Elevated lactate dehydrogenase (LDH) in blood
D. Marked hypoxia on arterial blood gas analysis
E. Butterfly appearance on chest radiograph
33. A 65 year old man complains of palpitations. ECG shows irregular QRS complexes with absent P-waves. The diagnosis is:
A. Atrial flutter
~~B.~~ Atrial ectopics
~~C.~~ Atrial fibrillation
D. Heart block
E. Ventricular fibrillation
34. A 25 year old man is diagnosed with chronic hepatitis B infection. He has high hepatitis B virus (HBV) DNA at 100 million IU/ml. All of the following investigations would be required before initiation of treatment EXCEPT:
~~A.~~ Liver function tests (LFT)
B. Hepatitis B e antigen (HBeAg) test
C. Hepatitis B core antigen (HBcAg) test
D. Hepatitis C virus screen
E. Thyroid function tests (FTTs)
35. A 30 year old man presents with scaly papules and plaques. The differential diagnoses include all the following EXCEPT:
A. Lichen planus
B. Psoriasis vulgaris
C. Discoid dermatitis
D. Pityriasis rosea
E. Morphoea
36. A HIV positive woman has generalized cervical lymphadenopathy. Fine needle aspiration (FNA) cytology shows: non-caseating tuberculous adenitis. Her CD4 count is 60 cells/ μ l. She is started on anti-tuberculous treatment and HAART simultaneously. Two weeks later she develops fever and increasing enlargement of the lymph nodes. Which one of the following would be the CORRECT approach to her?
A. Stop the anti-tuberculous therapy
B. Stop the anti-retroviral therapy
C. Start on prednisone immediately
D. Add a broad spectrum antibiotic
E. Refer to radiologist and confirm biopsy