

امتحانات تخصصات ترم أول الفرقة الثانية لعام 2016/ 2017م

أخصائى

<p>Zagazig University College/ Nursing Department/ Neurology Date/ 11/1/2017 First Semester/Second 2016/2017</p>		<p>Theoretical exam Subject/ Neurology Time/ 1 hour Total Mark/ 30 marks Number of question/ 4 Double-sided paper</p>
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(A) Complete the following sentences with suitable word(s): (12 marks)

- 1- MS usually presents with one of three major clinical syndromes which are:
(1)
(2)
(3)(3 marks)
- 2- Consciousness depends upon the normal functioning of and(2 marks)
- 3- The indications of lumbar puncture include: (1)
(2) (3)(3 marks)
- 4- Using May improve prognosis of Bell's palsy.(1 mark)
- 5- Parkinsonism is a syndrome characterized by (1)
(2) and (3)(3 marks)

(B) Check the following sentences either right (✓) or wrong (x): (4 marks, 1 mark each)

- 1- Eye movement by superior oblique muscle is a function of the trochlear nerve.
- 2- Migrainous attacks are never associated with nausea and vomiting.
- 3- Polyneuropathy means symmetrical bilateral distal affection of peripheral nerves.
- 4- Paralysis of lower motor neuron type usually affects groups rather than individual muscles.

(C) Give reasons (explain) the following: (4 marks, 2 marks each)

- 1- Status epilepticus carries the risk of acute death.
- 2- Urinary bladder disorders can lead to chronic renal failure.

(D) Choose the most appropriate completion from a, b, c, or d: (10 marks, 1 mark each)

- 1- Weakness due to muscle disease is always associated with:
(a) hypotonia (b) fasciculation
(c) sensory changes (d) sphincteric disturbances
- 2- A unilateral UMN facial nerve lesion leads to:
(a) paralysis of the lower face at the same side.
(b) paralysis of the upper face at the same side.
(c) paralysis of the lower face at the opposite side.
(d) paralysis of the upper face at the opposite side.
- 3- The following drugs are commonly used in treatment of status epilepticus except:
(a) Phenobarbital (b) Phenytoin
(c) Aminophylline (d) Diazepam
- 4- The appropriate loading dose of phenytoin in treatment of status epilepticus is:
(a) 15-20 mg/kg body weight (b) 30-50 mg/kg body weight
(c) 5-10 mg/kg body weight (d) 60-80 mg/kg body weight
- 5- Dysdiadochokinesia is an impairment of:
(a) successive finger movement
(b) conjugate eye movement
(c) rapid alternating movement
(d) tremor suppression
- 6- Sydenham's chorea is a reversible chorea that develops as a consequence of:
(a) subacute bacterial endocarditis.
(b) typhoid fever.
(c) brucellosis
(d) rheumatic fever
- 7- The speech centre is found in the human brain in:
(a) the frontal lobe (b) the parietal lobe
(c) the temporal (d) the occipital lobe
- 8- The early group of muscles that is commonly earlier affected in Myasthenia Gravis is:
(a) bulbar muscles (b) facial muscles
(c) ocular muscles (d) muscles of neck
- 9- suggest (s) a serious cause of headache:
(a) a prolonged course (b) frequent attacks
(c) a recent onset (d) non-throbbing character
- 10- The commonest cause of dementia is:
(a) Hypothyroidism (b) Vit. B₁₂ deficiency
(c) Alzheimer's disease (d) Multiple cerebral infarcts

Wishing good luck and success

د. م. م. م.

Zagazig University
Faculty of Nursing
Internal Medicine. 2nd. year
January 2017(18/11/2017)

Theoretical Exam
Time 3 hours
Total Score (60)
3questions in one paper

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Answer all of the following question:

First question: (20 Marks): give short notes on :

- A. Safe transfusion procedures (Pre-transfusion testing). (10 marks).
B. Complications of blood transfusion (10 marks)

Second question: (20 Marks):

A 35-year-old woman presented with poor memory, apathy, cold intolerance, constipation and generalized weakness.

On examination the patient has puffy face, pallor, here BP was 160/105 and radial pulse was 55 beat per min. and she has non-pitting edema of both lower limbs. Urine analysis is normal and the TSH was markedly elevated.

- A. What is your diagnosis? (3marks)
B. What are the causes of this condition? (5marks)
C. Clinical picture and investigations of this condition? (12marks)

Third question: (20 Marks):

A 22-year-old male patient presented with recurrent infection and generalized edema that started at the eye lid (peri orbital edema) more in the morning. Then edema extended to involve both lower limbs.

On examination the patient has is pale and anemic, BP was 150/95, pulse was 110 beat per min and temperature was 38.5C. He has pitting edema of both lower limbs and mild ascites and mild pleural effusion. Urine analysis showed heavy proteinuria > 3.5 gm protein/day.

- A. What is the diagnosis? (3marks)
B. Causes and pathogenesis of this condition? (5 marks)
C. Clinical picture and investigations of this condition? (8 marks)
D. Stages of chronic kidney disease. (4 marks)

Wishing good luck
Dr. Hussein

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Zagazig University

Faculty of Nursing

First semester 2016 – 2017

Date: 11-1 -2016

Theoretical Exam

Chest and Cardiology

Number of questions / 3

One paper

قلب وسير

Answer all of the following questions:

First question:

A-Enumerate sleep disordered breathing symptoms (2 Marks)

B- How to perform ABGs analysis ? (8 Marks)

Second question:

A- Definition of pleural effusion. (2 marks)

B- Causes of pleural effusion and how to differentiate between exudate and transudate? (8 marks)

Third question:

Major criteria of rheumatic fever. (10 marks)

Wishing luck and success

Prof.Dr./ Ashraf Elshora



جهاز هضمي

Zagazig University

Date:11/1/2017

Faculty of Nursing

Time:45 م

Digestive diseases exam.

No. of questions:3

Second year.No. of paper:1

1-Answer this question

A-Define the following:-

Jaundice

Liver cirrhosis

Ascites

Hepatic encephalopathy

B-What are the differences between:-

- 1- 5 major hepatitis viruses
- 2- Transudative & exudative ascites

C-What is the management of oesophageal varices.

2-Answer this question

A-What are types and pathogenesis of gall stones formation.

B-What are the complications of acute pancreatitis.

3-Answer this question:

- A- what are the complications of gastroesophageal reflux disease.
- B- What are the methods of infection in:
-Ascariasis- Giardiasis-Strongyloidiasis
- C- What are the differences between:-
 - 1-Bacillary & amoebic dysentery
 - 2-Ulcerative & Crohn,s disease.

Best wishes