

**МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ БЕЛАРУСЬ**  
**УЧРЕЖДЕНИЕ ОБРАЗОВАНИЯ**  
**«ГОМЕЛЬСКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ УНИВЕРСИТЕТ»**

**Кафедра педиатрии**

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# **ТЕСТЫ ПО ПЕДИАТРИИ**

**Учебно-методическое пособие**  
**для студентов 4–6 курсов факультета по подготовке специалистов**  
**для зарубежных стран, обучающихся на английском языке,**  
**медицинских вузов**

# **TESTS IN PEDIATRICS**

**Teaching workbook**  
**for 4<sup>th</sup>–6<sup>th</sup> year students of the Faculty for training specialists**  
**for foreign countries, studying in English,**  
**of higher medical education institutions**

**Гомель**  
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М 19

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*Под общей редакцией И. М. Малолетниковой*

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М 19 Тесты по педиатрии: учеб.-метод. пособие для студентов 4–6 курсов факультета подготовки специалистов для зарубежных стран, обучающихся на английском языке, медицинских вузов = Tests in Pediatrics: Teaching workbook for 4<sup>th</sup> – 6<sup>th</sup> year students of the Faculty for training specialists for foreign countries, studying in English, of higher medical education institutions/ И. М. Малолетникова, Л. В. Кривицкая, И. Н. Киселевич; подобщ. ред. И. М. Малолетниковой. — Гомель: ГомГМУ, 2018. — 56 с.

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## 4<sup>th</sup> YEAR

*Choose one correct answer*

**1. Anatomico-physiological skin peculiarities in children of early age predispose to:**

*Variants of answer:*

- a) getting minor skin injuries;
- b) inflammation;
- c) dermatitis, diaper rash;
- d) edematization;
- e) all listed above.

**2. Skin elasticity is determined by:**

*Variants of answer:*

- a) the dorsal surface of the hand;
- b) the internal surface of the thigh;
- c) the internal surface of the shoulder;
- d) the external surface of the thigh;
- e) the external surface of the shoulder.

**3. The peculiarity of fatty tissue in newborns is:**

*Variants of answer:*

- a) the presence of brown adipose tissue;
- b) the presence of adipose tissue in the thoracic and abdominal cavity;
- c) the ratio of subcutaneous fatty tissues to body weight is less than that in adults;
- d) the presence of adipose tissue in the retroperitoneum;
- e) all listed above.

**4. The thickness of subcutaneous fatty tissue is recommended to determine:**

*Variants of answer:*

- a) at the angle of shoulder-blade;
- b) by the external surface of the thigh;
- c) by the dorsal surface of the hand, foot;
- d) along the edge of the oblique abdominal muscle;
- e) by the internal surface of the thigh.

**5. Soft tissue turgor is determined:**

*Variants of answer:*

- a) by the anterior abdominal wall;
- b) by the internal surface of the thigh;
- c) at the edge of sternum;

- d) by the internal surface of the shoulder;
- e) along the edge of the oblique abdominal muscle.

**6. In a newborn baby, muscle tone is determined:**

*Variants of answer:*

- a) by using a dynamometer;
- b) by the hand traction method;
- c) by the return reaction;
- d) by means of leg muscles palpation;
- e) by means of hand muscles palpation.

**7. Teething in children of the first year of life starts at the age of:**

*Variants of answer:*

- a) 8 months;
- b) 10 months;
- c) 6 months;
- d) 4 months;
- e) 11 months.

**8. A child starts holding a toy from the age of:**

*Variants of answer:*

- a) 4 months;
- b) 5 months;
- c) 6 months;
- d) 7 months;
- e) 2 months.

**9. Physiological spinal curvature is formed:**

*Variants of answer:*

- a) by the time of birth;
- b) by the end of the first year of life;
- c) by the age of 3;
- d) at the age of 6;
- e) by 2 months.

**10. The main organ of lymphoid system in children of the early age is:**

*Variants of answer:*

- a) the spleen;
- b) the thymus gland;
- c) the lymph nodes;
- d) the pharyngeal lymphoid ring;
- e) the liver.

**11. In healthy children of older age you can palpate:**

*Variants of answer:*

- a) more than 3 groups of lymph nodes;
- b) 5 groups of lymph nodes;
- c) no more than 3 groups of lymph nodes;
- d) lymph nodes are not palpated;
- e) more than 5 groups of lymph nodes.

**12. A child starts smiling by the age of:**

*Variants of answer:*

- a) 2 months;
- b) 1 month;
- c) 1,5 months;
- d) 3 months;
- e) 8 months.

**13. A child starts crawling by the age of:**

*Variants of answer:*

- a) 10 months;
- b) 7 months;
- c) 8 months;
- d) 9 months;
- e) 4 months.

**14. The average body weight of a year-old child is:**

*Variants of answer:*

- a) 9 kg;
- b) 10 kg;
- c) 13 kg;
- d) 14 kg;
- e) 8.5 kg.

**15. The average height of a year-old child is:**

- a) 70 cm;
- b) 77 cm;
- c) 83 cm;
- d) 85 cm;
- e) 75 cm.

**16. The average body weight of a 5 year-old child is:**

*Variants of answer:*

- a) 15 kg;
- b) 20 kg;

- c) 25 kg;
- d) 30 kg;
- e) 25.5 kg.

**17. Sexual development of girls is evaluated from the age of:**

*Variants of answer:*

- a) 12 years old;
- b) 10 years old;
- c) 8 years old;
- d) 6 years old;
- e) 9 years old.

**18. Sexual development of boys is evaluated from the age of:**

*Variants of answer:*

- a) 7 years old;
- b) 9 years old;
- c) 8 years old;
- d) 10 years old;
- e) 11 years old.

**19. Respiration rate in 5–6-year-old children is:**

*Variants of answer:*

- a) 35 per minute;
- b) 25 per minute;
- c) 15 per minute;
- d) 40 per minute;
- e) no correct answer.

**20. Respiration rate in newborns is:**

*Variants of answer:*

- a) 15–20 per minute;
- b) 25–35 per minute;
- c) 40–60 per minute;
- d) 60–70 per minute;
- e) 20–25 per minute.

**21. In case of larynx stenosis, dyspnea has:**

*Variants of answer:*

- a) inspiratory character;
- b) expiratory character;
- c) mixed character;
- d) there is no correct answer;
- e) all listed.

**22. Expiratory dyspnea is the sign of:**

*Variants of answer:*

- a) larynx stenosis;
- b) obstructive bronchitis;
- c) tracheitis;
- d) acute bronchitis;
- e) all listed.

**23. Small bubbling rales in the lungs on auscultation are observed in:**

*Variants of answer:*

- a) laryngotracheitis;
- b) bronchiolitis;
- c) bronchitis;
- d) tracheitis;
- e) all listed

**24. «Barking» cough is observed in case of:**

*Variants of answer:*

- a) bronchitis;
- b) laryngotracheitis;
- c) obstructive bronchitis;
- d) pneumonia;
- e) all listed.

**25. The heart rate (beats per minute) in newborns is:**

*Variants of answer:*

- a) 100–110;
- b) 110–120;
- c) 120–140;
- d) 140–150;
- e) 115–120.

**26. After the baby birth, an intense work is performed by:**

*Variants of answer:*

- a) the right ventricle;
- b) the left ventricle;
- c) both ventricles perform the same load;
- d) the right atrium;
- e) all listed.

**27. Anatomically, the heart of a newborn baby is located:**

*Variants of answer:*

- a) lower than in adults;
- b) higher than in children of older age;

- c) in the same position as in children of older age;
- d) higher than in adults;
- e) all listed.

**28. Fast heart rate in newborns is associated with:**

*Variants of answer:*

- a) the influence of vagus nerve;
- b) the influence of sympathetic innervation;
- c) the influence of the vagus nerve and sympathetic innervation;
- d) the decrease in environment temperature;
- e) the increase of neuroreflex excitability.

**29. Arterial pressure in a one-year old child is:**

*Variants of answer:*

- a) 80/55 mm Hg;
- b) 90/60 mm Hg;
- c) 100/65 mm Hg;
- d) 110/70 mm Hg;
- e) 100/90 mm. Art.

**30. Arterial pressure in a 5-year old child is:**

*Variants of answer:*

- a) 120/70 mm Hg;
- b) 110/70 mm Hg;
- c) 100/60 mm Hg;
- d) 80/50 mm Hg;
- e) 115/80 mm Hg.

**31. On auscultation functional murmur is characterized by:**

*Variants of answer:*

- a) instability;
- b) low intensity;
- c) a decrease on physical activity;
- d) systolic character;
- e) all listed.

**32. In children of early age, the liver is involved in:**

*Variants of answer:*

- a) protein, fat, carbohydrate metabolism;
- b) protein, fat, carbohydrate, water metabolism;
- c) protein, fat, carbohydrate, water, vitamin metabolism;
- d) protein and mineral metabolism;
- e) all listed.



**33. Increased salivation in 4-6-month old babies is caused by:**

*Variants of answer:*

- a) increased saliva production;
- b) absence of swallowing ability;
- c) irritation of the trigeminal nerve because of erupting teeth;
- d) the salivary glands start active functioning;
- e) all listed.

**34. In infants, total calcium blood level is considered normal:**

*Variants of answer:*

- a) 2.2–2.8 mmol/l;
- b) 1.29–2.26 mmol/l;
- c) 3.4–4.15 mmol/l;
- d) 2.26–2.5 mmol/l;
- e) 2.87–3.4 mmol/l.

**35. In infants, phosphorus blood level is considered normal:**

- a) 2.5–2.87 mmol/l;
- b) 1.2–1.8 mmol/l;
- c) 0.65–1.62 mmol/l;
- d) 1.29–1.64 mmol/l;
- e) 2.26–2.5 mmol/l.

**36. Microbial-inflammatory process in the kidneys is predisposed by:**

*Variants of answer:*

- a) hypotonic ureters;
- b) high position of the bladder;
- c) large size of the kidneys;
- d) there is no correct answer;
- e) all listed.

**37. In the oral cavity following breaks down:**

*Variants of answer:*

- a) glycogen, amylum;
- b) glycogen, disaccharides;
- c) proteins;
- d) fats;
- e) proteins, fats.

**38. In newborns the number of urination is:**

*Variants of answer:*

- a) 6–8;
- b) 10–12;

- c) 20–25;
- d) 4–5;
- e) 9–11.

**39. In infants, sodium blood level is considered normal:**

*Variants of answer:*

- a) 110–115 mmol/l;
- b) 120–125 mmol/l;
- c) 135–145 mmol/l;
- d) 122–129 mmol/l;
- e) 120–130 mmol/l.

**40. Polyuria is an increase of daily urine amount by:**

*Variants of answer:*

- a) 20%;
- b) 50%;
- c) 75%;
- d) 100%;
- e) 40%.

**41. Oliguria is a decrease of daily urine volume by:**

*Variants of answer:*

- a) 75%;
- b) 50%;
- c) 25%;
- d) 100%;
- e) 30%.

**42. Daily diuresis in one-year old child is:**

*Variants of answer:*

- a) 300 ml;
- b) 600 ml;
- c) 1 liter;
- d) 0.5 liters;
- e) 400 ml.

**43. The first crossing in the leukocyte formula is noted:**

*Variants of answer:*

- a) on the 1st day of life;
- b) on the 5th day of life;
- c) at the age of 5 months;
- d) at the age of five;
- e) on the 10th day of life.

**44. The second crossing in the leukocyte formula is noted:**

*Variants of answer:*

- a) at the age of two;
- b) at the age of three;
- c) at the age of five;
- d) at the age of seven;
- e) at the age of ten.

**45. In children under 6 years old the liver is:**

*Variants of answer:*

- a) not palpated;
- b) palpated 2 cm below the edge of the costal arch;
- c) palpated 3.5 cm below the edge of the costal arch;
- d) palpated 4 cm below the edge of the costal arch;
- e) palpated 3 cm below the edge of the costal arch.

**46. In anemia, children of the first year of life have hemoglobin level:**

*Variants of answer:*

- a) less than 110 g/l;
- b) less than 120 g/l;
- c) less than 100 g/l;
- d) less than 130 g/l;
- e) less than 115 g/l.

**47. Blood color index in children of older age is:**

*Variants of answer:*

- a) 0.80–0.85;
- b) 0.85–1.05;
- c) 0.95–1.05;
- d) 1.05–1.10;
- e) 0.50–0.80.

**48. What hormones are involved in the growth and development of child skeleton system:**

*Variants of answer:*

- a) thyroid hormones;
- b) chondrotropic hormone;
- c) reproductive hormones;
- d) calcitonin;
- e) all listed.

**49. Natural breastfeeding is :**

*Variants of answer:*

- a) feeding by putting a baby to his mother's breast;
- b) feeding by expressed breast milk;

- c) feeding by donor human milk;
- d) foster feeding;
- e) all listed.

**50. Complementary feeding is:**

*Variants of answer:*

- a) meat mash;
- b) vegetable mash;
- c) porridge;
- d) fruit mash;
- e) all listed.

**51. The first complementary feeding of a child should be introduced:**

*Variants of answer:*

- a) at 1–2 months;
- b) at 2–3 months;
- c) at 4–6 months;
- d) at 7–8 months;
- e) at 9–10 months.

**52. Advantages of natural breastfeeding:**

*Variants of answer:*

- a) mother's milk is sterile, always at the optimal temperature;
- b) mother's milk contains enough water;
- c) mother's milk contains biologically active substances, enzymes;
- d) breast milk provides with lactobacteria in the intestinal biocenosis;
- e) all listed.

**53. Mistakes while introducing complementary feeding are:**

*Variants of answer:*

- a) new food product should be introduced in the amount equal to one feeding;
- b) new food product should be introduced gradually by increasing the amount;
- c) complementary feeding should be given before breastfeeding;
- d) complementary feeding must be homogeneous;
- e) complementary feeding should be given with a spoon

**54. daily food volume for a year-old child is:**

*Variants of answer:*

- a) not more than 1 liter;
- b) 1/5 of the required body weight;
- c) 1/6 of the required body weight
- d) 1/7 of the required body weight;
- e) all listed

**55. Compared to the cow milk, mature breast milk contains more:**

*Variants of answer:*

- a) proteins;
- b) carbohydrates;
- c) fats;
- d) calcium;
- e) phosphorus.

**56. The bacteriological system of breast milk is represented by:**

*Variants of answer:*

- a) immunoglobulin A;
- b) lactoferrin;
- c) lysozyme;
- d) complement;
- e) all listed

**57. Carbohydrates of breast milk are mainly represented by:**

*Variants of answer:*

- a)  $\alpha$ -lactose;
- b)  $\beta$ -lactose;
- c) glucose;
- d) oligosaccharide;
- e) galactose.

**58. A healthy child aged 6 months should be fed:**

*Variants of answer:*

- a) 4 times a day every 6 hours;
- b) 5 times a day every 4 hours;
- c) 6 times a day every 3.5 hours;
- d) 7 times a day every 3 hours;
- e) on request.

**59. Breast milk includes:**

*Variants of answer:*

- a) taurine;
- b) carnitine;
- c) Ig A;
- d) lactoferrin;
- e) all listed.

**60. The ratio of the daily amount of breast milk (mixture) given to a 7-months-old baby by its body weight is:**

*Variants of answer:*

- a) 1/8;
- b) 1/4;

- c) 1/10;
- d) 1/5;
- e) 1/7.

**61. The composition of colostrum differs from mature milk by a large content of:**

*Variants of answer:*

- a) proteins;
- b) immunoglobulins;
- c) hormones;
- d) calcium;
- e) all listed.

**62. Probable signs of insufficient lactation aren't the following:**

*Variants of answer:*

- a) the child's anxiety when feeding;
- b) the necessity of frequent applying to the breast;
- c) a sparse rare stool;
- d) the presence of sucking movements in the absence of swallowing ones;
- e) increased appetite.

**63. Rickets is:**

*Variants of answer:*

- a) an infectious disease;
- b) a chromosomal disease;
- c) a metabolism disease;
- d) an autoimmune disease;
- e) all listed.

**64. Rickets is a disease of:**

*Variants of answer:*

- a) newborn period;
- b) early childhood;
- c) pubertal period;
- d) school age;
- e) all listed.

**65. Which of the signs is not typical for rickets:**

*Variants of answer:*

- a) curvature of tubular bones;
- b) shortening of limbs;
- c) hypotension;
- d) enlargement of parenchymal organs (liver and spleen);
- e) all listed.

**66. Regulators of phosphorus-calcium metabolism are:**

*Variants of answer:*

- a) calcitonin;
- b) androgens;
- c) estrogens;
- d) parathyroid hormone;
- e) all listed.

**67. In rickets, the following changes in the bone system are possible:**

*Variants of answer:*

- a) craniotabes;
- b) «Rachitic rosary»;
- c) Rachitic «bracelets»;
- d) O-, X-shaped curvatures of the lower extremities;
- e) all listed.

**68. The following clinical manifestations are typical for rickets I:**

*Variants of answer:*

- a) increased sweating;
- b) presence of diaper rash;
- c) baldness of the occiput;
- d) sleep disturbance;
- e) all listed.

**69. The following clinical manifestations are typical for rickets II:**

*Variants of answer:*

- a) chest deformation;
- b) muscle hypotension;
- c) the frontal and parietal tubers of the skull are visualized;
- d) baldness of the occiput;
- e) all listed.

**70. The typical features of rickets III are:**

*Variants of answer:*

- a) O-, X-shaped curvatures of the lower limbs;
- b) muscle hypotension;
- c) enlargement of the liver and spleen;
- d) iron deficiency anemia;
- e) all listed.

**71. The following laboratory findings are important for rickets diagnostics:**

*Variants of answer:*

- a) a decrease of phosphorus and calcium concentration, an increase of alkaline phosphatase in blood serum;

- b) a decrease of phosphorus and alkaline phosphatase concentration in blood serum;
- c) a decrease of phosphorus concentration and an increase of calcium concentration in blood serum;
- d) a decrease of phosphorus and calcium concentration in blood serum;
- e) all listed.

**72. The prophylactic dose of vitamin D is:**

*Variants of answer:*

- a) 500–1000 iu daily;
- b) 1500–2000 iu daily;
- c) 2000 iu every other day;
- d) 5000 iu once a week;
- e) 3000–3500 IU daily.

**73. The duration of rickets treatment with vitamin D is:**

*Variants of answer:*

- a) 7–10 days;
- b) 30–45 days;
- c) 6 months;
- d) 1 year;
- e) 2 months.

**74. The clinical picture of hypervitaminosis D is characterized by:**

*Variants of answer:*

- a) iron deficiency anemia;
- b) intestinal toxicosis;
- c) respiratory insufficiency;
- d) heart failure;
- e) all listed.

**75. Diagnosis of hypervitaminosis D is characterized by:**

*Variants of answer:*

- a) hypercalcemia, hyperphosphaturia, sulkovich's strong positive test;
- b) sulkovich's negative test;
- c) hypocalcemia;
- d) hypophosphaturia;
- e) hyponatremia.

**76. Spasmophilia is manifested:**

*Variants of answer:*

- a) in the newborn period;
- b) in the first half of infancy;



- c) in the second half of infancy;
- d) at the age of more than 2 years;
- e) all listed.

**77. The clinical manifestations of spasmophilia are:**

*Variants of answer:*

- a) laryngotracheitis;
- b) bronchitis;
- c) excoxicosis with toxicosis;
- d) laryngospasm, eclampsia;
- e) rhinitis, pharyngitis.

**78. Treatment of spasmophilia involves using:**

*Variants of answer:*

- a) vitamin D, calcium drugs;
- b) calcium drugs, vitamin D withdrawal;
- c) iron drugs;
- d) vitamins of group K and U;
- e) all listed.

**79. Vitamin D metabolism occurs in:**

*Variants of answer:*

- a) the liver, kidneys;
- b) the spleen, kidneys;
- c) in the heart;
- d) the intestine;
- e) all listed.

**80. There are the following variants of rickets course:**

*Variants of answer:*

- a) acute, subacute, recurrent;
- b) acute, subacute, recurrent, chronic;
- c) recurrent, chronic;
- d) acute, chronic;
- e) all listed.

**81. Antenatal prevention of rickets is carried out in pregnant women having:**

*Variants of answer:*

- a) 12 weeks of pregnancy;
- b) 20 weeks of pregnancy;
- c) 30 weeks of pregnancy;
- d) 36 weeks of gestation;
- e) 25 weeks of pregnancy.

**82. Antagonists of vitamin D are:**

*Variants of answer:*

- a) ascorbic acid;
- b) retinol;
- c) pyridoxine;
- d) co-trimoxazole;
- e) all listed.

**83. Prevention of rickets consists of:**

*Variants of answer:*

- a) antenatal;
- b) postnatal;
- c) specific;
- d) non-specific;
- e) all listed.

**84. The drug of choice for specific postnatal rickets prevention is:**

*Variants of answer:*

- a) videcholum;
- b) oily solution of ergocalciferol;
- c) aqueous solution of vitamin D;
- d) spirituous solution of ergocalciferol;
- e) all listed.

**85. The initial manifestations of rickets are:**

*Variants of answer:*

- a) excessive sweating;
- b) increased nervous excitability;
- c) slight «compliance» of the edges of the large fontanel;
- d) presence of diaper rash;
- e) all listed.

**86. The signs of dehydration are the following:**

*Variants of answer:*

- a) reduction of body weight;
- b) dry skin and mucous membranes;
- c) decrease of soft tissue turgor;
- d) sunken large fontanel;
- e) all listed.

**87. The typical clinical signs of neuro-arthritic diathesis are:**

*Variants of answer:*

- a) increased nervous excitability;
- b) acetonemic vomiting;

- c) anorexia;
- d) uraturia;
- e) all listed.

**88. Choose the dietary characteristics in children with lymphatic diathesis:**

*Variants of answer:*

- a) restriction of food products rich in purines;
- b) meat restriction;
- c) restriction of easily digestible carbohydrates;
- d) a special diet is not provided;
- e) all listed.

**89. The most characteristic signs of spasmophilia are the following:**

*Variants of answer:*

- a) anxiety;
- b) laryngospasm;
- c) carpopedal spasm;
- d) eclampsia;
- e) all listed.

**90. For children with neuro-arthritic diathesis, the following food products should be excluded:**

*Variants of answer:*

- a) spinach;
- b) thick soup;
- c) parsley;
- d) sorrel;
- e) all listed.

**91. Non-typical clinical signs of increased neuro-reflex excitability in spasmophilia are:**

*Variants of answer:*

- a) anxiety;
- b) increased tendon reflexes;
- c) positive symptoms of Khvostek, Tissaur, Erba, Maslov;
- d) muscle hypotension;
- e) carpo-pedal spasm.

**92. Hypotrophy is characterized by:**

*Variants of answer:*

- a) lagging of body weight from height;
- b) equal lagging of body weight and height;
- c) prevalence of body weight over height;

- d) equally excessive body weight and height;
- e) normal body weight and height.

**93. Exogenous causes of hypotrophy include:**

*Variants of answer:*

- a) alimentary factors;
- b) infectious factors;
- c) toxic factors;
- d) regime disorder, upbringing defects;
- e) all listed.

**94. The signs of intrauterine hypotrophy exclude the following:**

*Variants of answer:*

- a) reduced nutrition;
- b) abundant lanugo on the skin;
- c) skin dystrophic changes;
- d) there is no correct answer;
- e) all listed.

**95. Clinical symptoms of hypotrophy III are:**

*Variants of answer:*

- a) vomiting;
- b) body mass deficiency more than 30%;
- c) anorexia;
- d) «famine» stool;
- e) all listed.

**96. For correcting the nutrition in case of paratrophy, it is recommended:**

*Variants of answer:*

- a) to calculate proteins for actual weight;
- b) to calculate carbohydrates for actual weight;
- c) to calculate fats for actual weight;
- d) there is no correct answer;
- e) all listed.

**97. Hypotrophy II is characterized by:**

*Variants of answer:*

- a) body weight deficiency up to 10%;
- b) body weight deficiency 10–20%;
- c) body weight deficiency 21–30%;
- d) body weight deficiency over 30%;
- e) all listed.

**98. The first stage of diet therapy for hypotrophy is:**

*Variants of answer:*

- a) the stage of minimum nutrition;
- b) fasting stage;
- c) intermediate stage;
- d) the stage of maximum nutrition;
- e) all listed.

**99. The signs of mother hypogalactia are:**

*Variants of answer:*

- a) the child's anxiety between feedings;
- b) poor stool and rare urination;
- c) flattened weight curve;
- d) the need for frequent applying to the breast;
- e) all listed.

**100. What are the signs of exudative-catarrhal diathesis?**

*Variants of answer:*

- a) milk crust;
- b) cradle cap;
- c) dry skin;
- d) strophulus;
- e) all listed.

**101. Common blood analysis in exudative-catarrhal diathesis is characterized by:**

*Variants of answer:*

- a) leukocytosis;
- b) eosinophilia;
- c) lymphocytosis;
- d) increase in ESR;
- e) hemoglobin reduction.

**102. What are the non-typical signs for lymphohypoplastic diathesis?**

*Variants of answer:*

- a) polymorphous skin rashes;
- b) an increase in all groups of lymph nodes;
- c) tonsils hyperplasia;
- d) hepatomegaly;
- e) vomiting.

**103. What are the non-typical signs for neuro-arthritis diathesis:**

*Variants of answer:*

- a) excessive body weight;
- b) increased nervous excitability;

- c) acetonemic vomiting;
- d) anorexia;
- e) all listed.

**104. Common urine analysis in exudative diathesis is characterized by increase in:**

*Variants of answer:*

- a) leukocytes;
- b) red blood cells;
- c) pavement epithelium;
- d) salts;
- e) protein.

**105. In nutrition of children with neuro-arthritic diathesis it is necessary to limit:**

*Variants of answer:*

- a) meat, spinach;
- b) cereals;
- c) vegetable oil;
- d) milk and dairy products;
- e) all listed.

**106. Nasopharynx structure features in children of early age predispose to:**

*Variants of answer:*

- a) frequent sinusitis;
- b) frequent nasal bleeding;
- c) frequent conjunctivitis during rhinitis;
- d) frequent tonsillitis;
- e) frequent bronchitis.

**107. Respiration rate of 5–6-year-old children is:**

*Variants of answer:*

- a) 15 per minute;
- b) 25 per minute;
- c) 35 per minute;
- d) 40 per minute;
- e) 45 per minute.

**108. Respiration rate in newborns is:**

*Variants of answer:*

- a) 15–20 per minute;
- b) 20–25 per minute;
- c) 25–35 per minute;

- d) 40–60 per minute;
- e) 60–70 per minute.

**109. In case of larynx stenosis, dyspnea has:**

*Variants of answer:*

- a) inspirational character;
- b) expiratory character;
- c) mixed character;
- d) respiratory character;
- e) obstructive character.

**110. Expiratory dyspnea is observed in case of:**

*Variants of answer:*

- a) larynx stenosis;
- b) obstructive bronchitis;
- c) tracheitis;
- d) rhinitis;
- e) pleurisy.

**111. Small bubbling rales on auscultation are typical for:**

*Variants of answer:*

- a) laryngotracheitis;
- b) bronchiolitis;
- c) bronchitis;
- d) tracheitis;
- e) pleurisy.

**112. «Barking» cough is observed in case of:**

*Variants of answer:*

- a) bronchitis;
- b) laryngotracheitis;
- c) obstructive bronchitis;
- d) pneumonia;
- e) pharyngitis.

**113. Bacterial pneumonia agent in children of older age is often:**

*Variants of answer:*

- a) streptococcus group A;
- b) Staphylococcus aureus;
- c) pneumococcus;
- d) hemophilic rod;
- e) streptococcus group B.

**114. If dyspnea and sibilant rales are observed, the bronchi are affected:**

*Variants of answer:*

- a) large size;
- b) medium size;
- c) small size;
- d) small and medium size;
- e) all parts of the bronchi.

**115. In bronchial asthma pathogenesis, all the mechanisms are observed except:**

*Variants of answer:*

- a) bronchospasm;
- b) edema;
- c) hypersecretion;
- d) emphysema;
- e) sclerosis of the bronchial tree.

**116. The displacement of the mediastinum towards the lesion can be observed in case of:**

*Variants of answer:*

- a) hemothorax;
- b) pneumothorax;
- c) hydropneumothorax;
- d) lobar emphysema;
- e) atelectasis of the lung.

**117. Which kind of investigation is the most correct for diagnostics of respiratory failure?**

*Variants of answer:*

- a) anamnesis;
- b) physical examination of the patient;
- c) radiographic examination of the chest;
- d) spirographic investigation;
- e) investigation of arterial blood gases (KHS).

**118. For aetiotropic diagnostics of a viral infection, the following method is not used:**

*Variants of answer:*

- a) immunofluorescence;
- b) study of blood serum (DSC, RPGA);
- c) polymerase chain reaction (PCR);
- d) serological;
- e) common blood test.



**119. Which of these pathogens is the often cause for developing acute stenosinglaryngotracheitis (croup)?**

*Variants of answer:*

- a) influenza virus;
- b) parainfluenza virus;
- c) respiratory syncytial virus;
- d) diphtheria agent;
- e) haemophilus influenzae.

**120. The main indication for diagnostic bronchoscopy in children is:**

*Variants of answer:*

- a) bronchial asthma;
- b) acute bronchitis;
- c) suspicion of aspiration of a foreign body;
- d) acute pneumonia, complicated by pleurisy;
- e) obstructive bronchitis.

**121. In acute pneumonia, the early symptom is:**

*Variants of answer:*

- a) presence of dry, widespread rales from both sides;
- b) irregular large bubbling rales on both sides;
- c) skin pallor;
- d) percussion sound shortening;
- e) box-note sound.

**122. There are the following forms of bronchial asthma in children:**

*Variants of answer:*

- a) atopic (allergic);
- b) infectious;
- c) viral-bacterial;
- d) adult type;
- e) child type.

**123. Choose the clinical signs which are typical for bronchial asthma in children:**

*Variants of answer:*

- a) symptoms during neonatal period;
- b) wheezing, resistant to bronchodilator;
- c) wheezing, associated with food intake or vomiting;
- d) sudden onset of cough and asphyxia;
- e) expiratory dyspnea.

**124. Prolonged  $\beta$ -2 agonists include:**

*Variants of answer:*

- a) salbutamol;
- b) salmeterol;
- c) berodual;
- d) atrovent;
- e) seretide.

**125. Choose M-cholinolytic drugs used in the treatment of patients with bronchial asthma:**

*Variants of answer:*

- a) nedocromil-sodium;
- b) histaglobulin;
- c) ipratropium bromide;
- d) salbutamol;
- e) euphylline.

**126. In asthmatic status, the following is not prescribed:**

*Variants of answer:*

- a) intravenous administration of aminophylline;
- b) oxygen therapy;
- c) histamine H1 receptor antagonists;
- d) intravenous glucocorticoids;
- e) oral glucocorticoids.

**127. The first aid drug for asthma attacks in children is:**

*Variants of answer:*

- a) phencarol;
- b) nedocromil-sodium;
- c) salbutamol;
- d) aminophylline;
- e) sodium cromoglycate.

**128. Indications for prescribing inhaled glucocorticoids in bronchial asthma are:**

*Variants of answer:*

- a) mild disease form;
- b) intense recurrence;
- c) moderate or severe course;
- d) paroxysmal night cough;
- e) expiratory dyspnea.

**129. Indications for prescribing systemic glucocorticoids in bronchial asthma are:**

*Variants of answer:*

- a) paroxysmal night cough;
- b) asthmatic status;
- c) absence of effect when using adrenomimetics;
- d) aspirin-sensitive asthma;
- e) combination of asthma with atopic dermatitis.

**130. The most common agent of «home-acquired» pneumonia in children aged 1 year and older is:**

*Variants of answer:*

- a) streptococcus A;
- b) staphylococcus aureus;
- c) pneumococcus;
- d) haemophilus influenzae;
- e) streptococcus B.

**131. The right lung consists of:**

*Variants of answer:*

- a) 8 segments;
- b) 9 segments;
- c) 10 segments;
- d) 1 segment;
- e) 12 segments.

**132. Crackling rale is formed in:**

*Variants of answer:*

- a) the larynx;
- b) the trachea;
- c) the bronchioles;
- d) the pleural cavity;
- e) the alveoli.

**133. The displacement of the mediastinal towards the lesion can be observed in case of:**

*Variants of answer:*

- a) hemothorax;
- b) pneumothorax;
- c) hydropneumothorax;
- d) lobar emphysema;
- e) lung atelectasis.

**134. Cystic fibrosis refers to hereditary diseases with the following type of inheritance:**

*Variants of answer:*

- a) autosomal dominant, y-chromosome linked;
- b) autosomal dominant, x chromosome linked;
- c) autosomal recessive, x chromosome linked;
- d) autosomal recessive;
- e) autosomal dominant.

**135. «Protected» penicillins are:**

*Variants of answer:*

- a) ampicillin;
- b) oxacillin;
- c) amoxicillin;
- d) gentamycin;
- e) amoxiclav.

**136. Gastrointestinal diseases can be dependent on:**

*Variants of answer:*

- a) low enzymatic activity of saliva;
- b) low enzymatic activity of gastric acid;
- c) high permeability of the gastric mucosa;
- d) helminthic infection;
- e) all listed.

**137. Chronic inflammatory diseases of the gastrointestinal tract are more often diagnosed at the age of:**

*Variants of answer:*

- a) 6–8 months;
- b) 1–2 years old;
- c) 7–10 years old;
- d) 11–13 years old;
- e) 14–18 years old.

**138. «Aggression» factors in the development of stomach inflammatory diseases include:**

*Variants of answer:*

- a) mucin, sialic acids;
- b) bile;
- c) prostaglandins;
- d) bicarbonates;
- e) antroduodenal acid brake.

**139. Factors contributing to the stomach and duodenum disease include:**

*Variants of answer:*

- a) misuse of drugs;
- b) endocrine system diseases;
- c) infection chronic nidi;
- d) psycho-emotional stress;
- e) all listed.

**140. Methods of *Helicobacter pylori* diagnosis are:**

*Variants of answer:*

- a) bacterioscopic method;
- b) histological method;
- c) serological method;
- d) respiratory method;
- e) all listed.

**141. The main methods for diagnosing stomach and duodenum diseases include:**

*Variants of answer:*

- a) fiberoastroduodenoscopy with targeted biopsy of the stomach and duodenum mucous membrane;
- b) ultrasound investigation of the abdominal cavity;
- c) glucose tolerance test;
- d) complete blood test;
- e) stool test.

**142. Repair components of the gastrointestinal mucous membrane are:**

*Variants of answer:*

- a) gastropharm;
- b) pentoxyl;
- c) inosine;
- d) solcoseryl;
- e) all listed.

**143. Anti-*Helicobacter* quadrotherapy includes:**

*Variants of answer:*

- a) amoxicillin, alumag, omeprazole, de-nol;
- b) amoxicillin, motilium, omeprazole, de-nol;
- c) amoxicillin, clarithromycin, omeprazole, de-nol;
- d) amoxicillin, alumag, motilium, de-nol;
- e) clarithromycin, alumag, omeprazole, de-nol.

**144. Stomach protecting factors are:**

*Variants of answer:*

- a) mucus barrier;
- b) sufficient blood supply;
- c) active regeneration;
- d) antroduodenal acid brake;
- e) all listed.

**145. The plan of examining a patient with gastric ulcer doesn't include:**

*Variants of answer:*

- a) common blood test;
- b) colonoscopy;
- c) stomach secretion study;
- d) EGDS(esophagogastroduodenoscopy)with a Helicobacter pylori test;
- e) feces occult blood test.

**146. What medications belong to the group of H-2 receptor antagonists:**

*Variants of answer:*

- a) sucralfate;
- b) clemastin;
- c) famotidine;
- d) cetirizine;
- e) gastal.

**147. Carbohydrates breakdown occurs in the following sections of GIT:**

*Variants of answer:*

- a) oral cavity, small bowel;
- b) stomach, large bowel;
- c) small bowel, large bowel;
- d) oral cavity, large bowel;
- e) stomach.

**148. Protein breakdown occurs in the following sections of GIT:**

*Variants of answer:*

- a) oral cavity, stomach;
- b) oral cavity, small bowel;
- c) stomach, large bowel;
- d) stomach, small bowel
- e) small bowel, large bowel.

**149. Protein breakdown is influenced by:**

*Variants of answer:*

- a) chymosin;
- b) pepsin;

- c) trypsin;
- d) gastricsin;
- e) all listed.

**150. Gastric ulcer can't be complicated by:**

*Variants of answer:*

- a) bleeding;
- b) perforation;
- c) duodenum bulb deformation;
- d) penetration;
- e) stenosis.

**151. Size of a large duodenum bulb ulcer is:**

*Variants of answer:*

- a) 1.0–1.5 cm;
- b) up to 1.0 cm;
- c) up to 0.5 cm;
- d) 0.5–1.0 cm;
- e) over 1.5 cm.

**152. Cystic fibrosis is diagnosed by:**

*Variants of answer:*

- a) fiberopticgastroduodenoscopy with biopsy;
- b) pilocarpine test;
- c) glucose tolerance test;
- d) lactose tolerant test;
- e) intestinal microflora test.

**153. Malabsorption after introducing cereals is typical for:**

*Variants of answer:*

- a) celiac disease
- b) cystic fibrosis;
- c) lactase insufficiency;
- d) Gilbert's syndrome;
- e) all listed.

**154. What disease, accompanied by malabsorption syndrome, is characterized by steatorrhea:**

*Variants of answer:*

- a) lactase deficiency;
- b) celiac disease;
- c) cystic fibrosis;
- d) cow's milk protein intolerance;
- e) all listed.

**155. There are the following forms of cystic fibrosis:**

*Variants of answer:*

- a) pulmonary;
- b) intestinal;
- c) mixed;
- d) meconium ileus;
- e) all listed.

**156. The drug of choice in cystic fibrosis is:**

*Variants of answer:*

- a) pancreatin;
- b) mezim-forte;
- c) creon;
- d) 3<sup>rd</sup> generation cephalosporins;
- e) lidase.

**157. On performing a sweat test for diagnosing cystic fibrosis, the following is used:**

*Variants of answer:*

- a) magnesia electrophoresis;
- b) pilocarpine electrophoresis;
- c) adrenal inductothermy;
- d) calcium electrophoresis;
- e) all listed.

**158. In celiac disease the following sections of GIT are damaged:**

*Variants of answer:*

- a) esophagus;
- b) stomach;
- c) duodenum;
- d) small bowel;
- e) large bowel.

**159. The treatment of celiac disease primarily includes:**

*Variants of answer:*

- a) hypoallergic diet;
- b) gluten-free diet;
- c) digestive enzymes;
- d) antibiotics;
- e) dairy-free diet.

**160. In lactase deficiency, the following sections of GIT are damaged:**

*Variants of answer:*

- a) esophagus;
- b) stomach;



- c) small bowel;
- d) duodenum;
- e) large bowel.

**161. The treatment of lactase deficiency primarily includes:**

*Variants of answer:*

- a) hypoallergenic diet;
- b) gluten-free diet;
- c) dairy-free diet;
- d) digestive enzymes;
- e) antibiotics.

**162. Patients with celiac disease are contraindicated to eat:**

*Variants of answer:*

- a) bakery;
- b) millet;
- c) oatmeal cookies;
- d) semolina;
- e) all listed.

**163. Pyelonephritis affects:**

*Variants of answer:*

- a) bladder mucous membrane;
- b) circulatory and lymphatic system of the kidneys;
- c) tubules, calyx-pelvic apparatus and interstitial tissue;
- d) calyx-pelvic apparatus;
- e) glomeruli.

**164. Acute glomerulonephritis affects:**

*Variants of answer:*

- a) interstitial tissue of the kidneys;
- b) glomeruli;
- c) tubules, calyx-pelvic apparatus, interstitial tissue;
- d) cortical and cerebral substance of the kidneys;
- e) bladder mucous membrane.

**165. The most common cause of acute renal failure in children of early age is:**

*Variants of answer:*

- a) pyelonephritis;
- b) glomerulonephritis;
- c) hemolytic-uremic syndrome;
- d) poisoning;
- e) urinary tract infection.

**166. The most relevant causative agent of pyelonephritis in children is:**

*Variants of answer:*

- a) staphylococcus;
- b) klebsiella;
- c) chlamydia;
- d) proteus;
- e) escherichia coli.

**167. The most common way of urinary system infection in girls is:**

*Variants of answer:*

- a) ascending;
- b) hematogenous;
- c) lymphogenous;
- d) sexual;
- e) mixed.

**168. Which stage does not refer to the stages of acute renal failure:**

*Variants of answer:*

- a) initial;
- b) oligoanuretic;
- c) restoration of diuresis with polyuria;
- d) regression;
- e) recovery.

**169. Fast heart rate in newborns is associated with:**

*Variants of answer:*

- a) the influence of the vagus nerve;
- b) the influence of sympathetic innervation;
- c) the influence of the vagus nerve and sympathetic innervation;
- d) the decrease of environment temperature;
- e) the increase of neuroreflex excitability.

**170. ECG of children of early age is characterized by:**

*Variants of answer:*

- a) axis deviation to the right;
- b) axis deviation to the left;
- c) horizontal axis position;
- d) axis deviation upwards;
- e) all listed.

**171. The most common CHD is:**

*Variants of answer:*

- a) atrial septal defect;
- b) aorta coarctation;

- c) great vessels transposition;
- d) left heart hypoplasia;
- e) AV communication.

**172. The signs of atrial septal defect are:**

*Variants of answer:*

- a) ECG dextrogram;
- b) left ventricle overload;
- c) right ventricle overload;
- d) right atrium overload;
- e) all listed.

**173. The most typical index for Fallot's tetralogy is:**

*Variants of answer:*

- a) decrease in the number of erythrocytes, hemoglobin;
- b) heart shadow shape of a «wooden shoe» on the X-ray;
- c) axis deviation to the left;
- d) axis deviation to the right;
- e) sphere-shaped heart on the X-ray.

**174. Fallot's tetralogy is not characterized by the following sign:**

*Variants of answer:*

- a) myocardial hypertrophy of the right ventricle;
- b) ventricular septal defect;
- c) hypoxic-cyanotic attacks;
- d) enrichment of the pulmonary pattern on the X-ray
- e) erythrocythemia.

**175. Heart rate per 1 minute in a healthy a year-old child is :**

*Variants of answer:*

- a) 120–140;
- b) 120;
- c) 100;
- d) 85;
- e) 78.

**176. Heart rate per 1 minute in a healthy 5-year-old child is:**

*Variants of answer:*

- a) 120–140;
- b) 120;
- c) 100;
- d) 85;
- e) 78.

**177. In VSD (ventricular septal defect) murmur is well auscultated in the:**

*Variants of answer:*

- a) the apex of the heart;
- б) secondary aortic area (Erb's point);
- c) second intercostal space to the right of the sternum;
- d) second intercostal space to the left of the sternum;
- e) base of the xiphoid process.

**178. A patient with an open arterial duct doesn't have the following sign:**

*Variants of answer:*

- a) physical development lag;
- b) skin pallor;
- c) systolic blood pressure reduction;
- d) systolic-diastolic murmur;
- e) frequent respiratory diseases.

**179. Fallot's tetralogy doesn't include the following defect:**

*Variants of answer:*

- a) ASD (atrial septal defect);
- b) VSD (ventricular septal defect);
- c) pulmonary artery stenosis;
- d) right ventricle hypotrophy;
- e) aortic dextraposition.

**180. Aortic insufficiency occurs in:**

*Variants of answer:*

- a) rheumatism;
- b) congenital bicuspid aortic valve;
- c) Marfan syndrome;
- d) syphilitic arthritis;
- e) all listed.

**181. Rheumatic arthritis in children is not characterized by:**

*Variants of answer:*

- a) large joints disease;
- b) volatile character of arthritis;
- c) involvement of several joints;
- d) small joints disease;
- e) rapid course on the treatment background.

**182. In subacute course of acute rheumatic fever the duration of the attack is:**

*Variants of answer:*

- a) 2–3 months;
- b) 3–6 months;

- c) 6–12 months;
- d) more than 1 year;
- e) 1 month.

**183. The clinical signs of carditis are all listed, except for:**

*Variants of answer:*

- a) heart border dialation;
- b) systolic murmur;
- c) muffled heart sounds;
- d) tachycardia;
- e) bradycardia.

**184. The secondary prevention of rheumatic fever in a school-aged patient includes:**

*Variants of answer:*

- a) year-round use of non-steroid anti-inflammatory drugs;
- b) year-round use of aminoquinoline drugs;
- c) monthly administration of bicillin-5 for 1.5 million units;
- d) monthly administration of bicillin-5 for 750 000 units, once in 2 weeks;
- e) seasonal administration of bicillin.

**185. On secondary prevention contraindication of administering bicillin to patients with acute rheumatic fever is:**

*Variants of answer:*

- a) lack of activity within a year after the attack;
- b) absence of pathological changes on heart ultrasound examination;
- c) individual intolerance to penicillin drugs;
- d) latent course of rheumatism;
- e) heart failure.

**186. In case of intolerance to penicillin antibiotics the patients with acute rheumatic fever are prescribed:**

*Variants of answer:*

- a) cephalosparins;
- b) macrolides;
- c) lincomycin;
- d) gentamycin;
- e) tetracycline.

**187. While treating acute rheumatic fever the reasons for prescribing hormonal drugs are:**

*Variants of answer:*

- a) recurrent rheumatic carditis;
- b) heart failure;

- c) high disease activity;
- d) heartbeat violation;
- e) all listed.

**188. The clinical signs of aorta coarctation are all listed except for:**

*Variants of answer:*

- a) difference in physical development of the upper and lower half of the body;
- b) presence of pedal pulse
- c) increased blood pressure in upper limbs;
- d) systolic murmur in the interscapular area;
- e) pressure decrease in lower limbs.

**189. The most typical changes in the peripheral blood test for systemic lupus erythematosus are all listed except:**

*Variants of answer:*

- a) leukopenia;
- b) leukocytosis;
- c) increase in ESR;
- d) lymphopenia;
- e) hemolytic anemia.

**190. The most characteristic skin changes in SLE are:**

*Variants of answer:*

- a) «butterfly»-shaped erythema on the face;
- b) auricular erythema;
- c) urticaria rash;
- d) bullous rash;
- e) Papular rash.

**191. The factors provoking the development of JRA are:**

*Variants of answer:*

- a) hyperinsolation;
- b) hypothermia;
- c) viral infections;
- d) all listed;
- e) vaccination.

## 5<sup>th</sup> YEAR

**1. Breathing rate in newborns is:**

*Variants of answer:*

- a) 15–20 per minute;
- b) 25–35 per minute;
- c) 40–60 per minute;
- d) 60–70 per minute;
- e) 20–25 per minute.

**2. In a healthy newborn pulse rate per minute is:**

*Variants of answer:*

- a) 130–140;
- b) 120;
- c) 100;
- d) 85;
- e) 80.

**3. Neonatal jaundice in full-term babies appears:**

*Variants of answer:*

- a) since birth and disappears on the 4<sup>th</sup> – 5<sup>th</sup> day of life;
- b) on the 2<sup>nd</sup> – 3<sup>rd</sup> day and disappears on the 7–10<sup>th</sup> day of life;
- c) on the 5<sup>th</sup> – 6<sup>th</sup> and disappears on the 7–10<sup>th</sup> day of life;
- d) on the 10<sup>th</sup> day of life and disappears by 1 month;
- e) appears on the first day after birth and gradually increases.

**4. Straight after birth hemoglobin content (g/L) is:**

*Variants of answer:*

- a) 80-100;
- b) 100-120;
- c) 120-150;
- d) 150-180;
- e) 180-240.

**5. Crossing in the leukocyte formula is noted at the age of:**

*Variants of answer:*

- a) 4–5 days;
- b) 4–5 months;
- c) 2–3 years;
- d) 1 month;
- e) 1 year.

**6. Transient loss of initial birth weight is:**

*Variants of answer:*

- a) 5–8%;
- b) 8–12%;
- c) more than 12%;
- d) 2–3%;
- e) more than 10%.

**7. In hemolytic disease newborn jaundice appears:**

*Variants of answer:*

- a) on the 1<sup>st</sup>– 2<sup>nd</sup> day of life;
- b) on the 3<sup>rd</sup> – 4<sup>th</sup> day of life;
- c) on the 4<sup>th</sup>– 6<sup>th</sup> day of life;
- d) on the 7<sup>th</sup> day of life;
- e) on the 10<sup>th</sup> day of life.

**8. What is the indication for exchange blood transfusion in HDN in the first day of life is:**

*Variants of answer:*

- a) total bilirubin level in cord blood is more than 70  $\mu\text{mol/l}$ ;
- b) total bilirubin level in peripheral blood is more than 170  $\mu\text{mol/l}$ ;
- c) hourly increase of bilirubin is more than 7  $\mu\text{mol/l}$ ;
- d) hemoglobin level is less than 130 g/l;
- e) all listed.

**9. Intrauterine hypotrophy is not characterized by:**

*Variants of answer:*

- a) decreased nutrition;
- b) abundant lanugo on the skin;
- c) skin dystrophic changes;
- d) multiple stigmas of dysembryogenesis
- e) muscular hypotonia.

**10. If there is contradiction, a woman can start breast-feeding of a healthy newborn:**

*Variants of answer:*

- a) in an hour after baby birth;
- b) in no later than 2 hours after baby birth;
- c) in 6 hours;
- d) in 12 hours;
- e) in a day.



**11. What is the most frequent cause of death in newborns having a delay in intrauterine development in the first days of life:**

*Variants of answer:*

- a) perinatal asphyxia;
- b) meconium aspiration
- c) hyaline membrane disease;
- d) hypoglycemia;
- e) edematous syndrome.

**12. The umbilical cord remainder of a full-term newborn usually goes off:**

*Variants of answer:*

- a) on the 2<sup>nd</sup> – 3<sup>rd</sup> day;
- b) on the 4<sup>th</sup> – 7<sup>th</sup> days;
- c) on the 8<sup>th</sup> – 10<sup>th</sup> days;
- d) on the 11<sup>th</sup>– 15<sup>th</sup> day;
- e) in 2 weeks.

**13. On transition from fetal to neonatal circulation, the following changes are noted:**

*Variants of answer:*

- a) closure of the oval window;
- b) closure of the arterial duct;
- c) increase of pulmonary blood flow;
- d) closure of the venous duct;
- e) all listed.

**14. In hemolytic disease complicated by cholestasis, the following blood indices can be found:**

*Variants of answer:*

- a) only indirect bilirubin;
- b) direct and indirect bilirubin;
- c) only direct bilirubin;
- d) increased level of AST;
- e) increased level of ALT.

**15. What biochemical parameters of blood serum can indicate to cholestasis?**

*Variants of answer:*

- a) total protein;
- b) alkaline phosphatase;
- c) thymol test;
- d) bilirubin;
- e) glucose level.

**16. Bilirubinuria occurs in case of:**

*Variants of answer:*

- a) obstructive jaundice;
- b) hemolytic jaundice;
- c) both obstructive and hemolytic jaundice;
- d) conjugated jaundice;
- e) carotenodermia.

**17. Which drug is the initial one for arresting the convulsive syndrome:**

*Variants of answer:*

- a) calcium gluconate;
- b) relanium;
- c) barbiturates;
- d) droperidol;
- e) aminazine.

**18. Newborn baby, 60 seconds after birth: heart rate - 70 beats / min, weak irregular breathing, weak flexion of lower limbs, grimace reaction to mucus aspiration, acrocyanosis. Indicate Apgar score:**

*Variants of answer:*

- a) 2 points;
- b) 10 points;
- c) 5 points;
- d) 9 points;
- e) 1 point.

**19. In case of convulsive syndrome, first of all it is necessary:**

*Variants of answer:*

- a) to restore airway patency;
- b) to administer seduxen;
- c) to administer Lasix;
- d) to perform craniocerebral hypothermia;
- e) to administer cardiac glycosides.

**20. Which body system is most often damaged during the childbirth:**

*Variants of answer:*

- a) the respiratory system;
- b) the cardiovascular system;
- c) the nervous system;
- d) the genitourinary system;
- e) the locomotor system.

**21. Which of the following is used for treating neonatal apnea:**

*Variants of answer:*

- a) oxygen therapy, maintaining a constant increased exhalation pressure;
- b) glucocorticoid drugs;

- c) beta adrenergic agonists
- d) glucose intravenously;
- e) caffeine.

**22. While treating hemorrhagic disease of newborns, the following measures can be recommended, except for:**

*Variants of answer:*

- a) vitamin K dosed from 1 to 5 mg intravenously;
- b) transfusion of freshly frozen plasma;
- c) transfusion of preserved blood;
- d) in case of local bleeding — applying pressure bandage;
- e) cryoprecipitate.

**23. What is the time of neonatal jaundice disappearing:**

*Variants of answer:*

- a) up to 4 days of life;
- b) up to 10 days of life;
- c) up to 14 days of life;
- d) up to the end of a neonatal period;
- e) up to 21 days of life.

**24. Appearance of jaundice in the first day after baby birth indicates to:**

*Variants of answer:*

- a) biliary tract atresia;
- b) hemolytic newborn disease;
- c) Kriegler-Nayyar syndrome;
- d) erythrocyte membranopathy;
- e) physiologic jaundice.

**25. All of the following are included in the Apgar evaluation, except for:**

*Variants of answer:*

- a) heart rate;
- b) muscle tone;
- c) blood pressure;
- d) vivid reflexes;
- e) skin color.

**26. The most typical feature for physiologic jaundice of full-term newborns is:**

*Variants of answer:*

- a) the appearance of jaundice 12 hours after birth;
- b) duration of jaundice at least 1 week;
- c) increase in both direct and indirect bilirubin in blood serum;

- d) lowering of serum bilirubin level after stopping breast-feeding;
- e) jaundice appearance by the end of the 2<sup>nd</sup> and the beginning of the 3<sup>rd</sup> day.

**27. What are the most probable terms for the onset of hemorrhagic disease in newborns:**

*Variants of answer:*

- a) 1–2 days;
- b) 2–4 days;
- c) 6–10 days;
- d) more than 1 month;
- e) during 2 weeks.

**28. What are the main pathogenetic mechanisms of hemorrhagic disease in newborns:**

*Variants of answer:*

- a) absence of fibrinogen deficiency;
- b) deficiency of vitamin K-dependent blood factors;
- c) neonatal transient thrombostenosis;
- d) micro-ulceration of the gastric mucosa;
- e) all listed.

**29. The Abta test is carried out for:**

*Variants of answer:*

- a) determining the blood admixture in meconium;
- b) determining the amount of blood loss;
- c) differential diagnosis of true and false melena;
- d) determining the surfactant deficiency;
- e) determining bilirubin level.

**30. The laboratory tests for hemorrhagic disease of newborns are:**

*Variants of answer:*

- a) fibrinogen reduction;
- b) decrease of prothrombin index;
- c) thrombocytopenia;
- d) normal amount of platelets;
- e) shortening of partial thromboplastin time.

**31. Indicate the most typical clinical manifestation of hemorrhagic disease of newborns:**

*Variants of answer:*

- a) nose bleed;
- b) pulmonary hemorrhage;
- c) gastrointestinal bleeding;

- d) shortness of breath;
- e) hepatosplenomegaly.

**32. The drugs used for treating hemorrhagic neonatal disease are:**

*Variants of answer:*

- a) pentoxyl;
- b) vicasol, quarantine fresh-frozen plasma, dicinone, sodium etamsylate;
- c) calcium gluconate;
- d) seduxen;
- e) heparin.

**33. At what grade by Apgar scale, asphyxia is considered to be severe after 1 minute of life (according to ICD-10)?**

*Variants of answer:*

- a) 1–4 points;
- b) 2–4 points;
- c) 0–3 points;
- d) 4 points;
- e) 5 points.

**34. At what grade by Apgar scale, asphyxia is considered moderate or mild after 1 minute of life (according to ICD-10)?**

*Variants of answer:*

- a) 3 points;
- b) 4 points;
- c) 5 points;
- d) 6–7 points;
- e) 7–8 points.

**35. Indications for tracheobronchial sanitation in newborns having birth asphyxia are:**

*Variants of answer:*

- a) transient apnea;
- b) aspiration syndrome;
- c) anesthesia depression;
- d) hyaline membrane disease;
- e) all listed.

**36. Hypertension-hydrocephalic syndrome is characterized by:**

*Variants of answer:*

- a) an increase in the ventricular index;
- b) dilation of brain ventricles;
- c) cranial sutures disrupture;

- d) increase of the head circumference
- e) all listed.

**37. What are the main mechanisms of fresh-frozen plasma action?**

*Variants of answer:*

- a) decrease in acidosis;
- b) increase in coagulation potential;
- c) immunomodulatory effect
- d) protein provision for parenteral nutrition;
- e) correction of electrolyte balance .

**38. What are the main mechanisms of albumin solutions action?**

*Variants of answer:*

- a) oncotic effect;
- b) immune correction
- c) protein provision for parenteral nutrition;
- d) increase of coagulation potential;
- e) all listed.

**39. In case of pneumonia the main factor of hypoxia onset is:**

*Variants of answer:*

- a) temperature increase;
- b) hypopnoe;
- c) increased metabolism;
- d) tachycardia;
- e) tachypnea.

**40. Paradoxical respiration is frequently observed in case of:**

*Variants of answer:*

- a) pneumothorax;
- b) lungs emphysema;
- c) laryngospasm;
- d) pneumonia;
- e) pneumopathy.

**41. Which combination of antibiotics is the most balanced?**

*Variants of answer:*

- a) penicillin + cefazolin;
- b) penicillin + ristomycin;
- c) penicillin + erythromycin;
- d) penicillin + lincomycin;
- e) penicillin + amikacin.

**42. Which of the following drugs stimulates the formation of surfactant?**

*Variants of answer:*

- a) mucosolvin;
- b) mucodin;
- c) solutan;
- d) bromhexine;
- e) lazolvan.

**43. The most preferable antibiotic in mycoplasmal pneumonia is:**

*Variants of answer:*

- a) tetracycline;
- b) erythromycin;
- c) levomycetin;
- d) aminoglycosides;
- e) amoxicillin.

**44. Hyaline membrane syndrome is not characterized by:**

*Variants of answer:*

- a) pulmonary hypertension;
- b) left-right shunt;
- c) right-left shunt;
- d) developing mainly in premature infants;
- e) high risk of pneumonia.

**45. What disease is characterized by the emergence of a respiratory distress syndrome in newborns during the first 2–4 hours after birth?**

*Variants of answer:*

- a) atelectasis of the lungs;
- b) congenital heart disease;
- c) intrauterine pneumonia;
- d) hyaline membrane syndrome;
- e) asphyxia of a newborn.

**46. In newborns, prolonged inhalation of high oxygen concentrations may cause the following complications:**

- a) pneumothorax;
- b) apnea;
- c) bronchopulmonary dysplasia;
- d) pneumonia;
- e) intraventricular hemorrhage IVH.

**47. Bronchopulmonary dysplasia:**

*Variants of answer:*

- a) is often observed in preterm infants while treating hyaline membrane disease;
- b) develops during oxygen therapy by a high oxygen content;

- c) develops in case of artificial pulmonary ventilation /APV/ with high inspiratory pressure;
- d) develops in case of prolonged APV;
- e) all listed.

**48. Synthesis and secretion of surfactant is carried out by the following cells:**

*Variants of answer:*

- a) alveolocytes of the first type;
- b) alveolocytes of the second type;
- c) alveolar macrophages;
- d) epithelium of the bronchial tree;
- e) cells of goblet glands.

**49. The complex of treating neonatal pneumonia includes all the listed activities, except for:**

*Variants of answer:*

- a) therapeutic and protective regimen;
- b) oxygen therapy;
- c) antibacterial therapy;
- d) sanatorium treatment;
- e) physiotherapy treatment.

**50. The terms of carrying out BCG vaccination are:**

- a) the 6<sup>th</sup> – 7<sup>th</sup> day of life;
- b) the 3<sup>rd</sup> – 4<sup>th</sup> day of life;
- c) the 1<sup>st</sup> day of life;
- d) the 14<sup>th</sup> day of life;
- e) 1 month.

**51. The criteria for including children in the risk group for CNS pathology are:**

*Variants of answer:*

- a) prolonged pregnancy;
- b) rapid childbirth;
- c) operative maternity aid;
- d) breech presentation;
- e) all listed.

**52. The criteria for including children in the risk group for intrauterine infection are:**

*Variants of answer:*

- a) the presence of miscarriages, stillbirths in the mother's anamnesis;
- b) mother's infections in the postnatal period;
- c) childbirth at home;



- d) duration of the first childbirth is more than 16–18 hours, the repeated childbirths more than 10–12 hours;
- e) all listed.

**53. Criteria for including children in the risk group for anemia:**

*Variants of answer:*

- a) early placental abruption;
- b) cesarean operation;
- c) cephalohematoma;
- d) pregnant women anemia;
- e) all listed.

**54. The first home nursing to a healthy newborn is carried out on:**

*Variants of answer:*

- a) the first day after discharge from the hospital;
- b) the first 2 days after discharge from the hospital;
- c) the first 3 days after discharge from the hospital;
- d) the first 4 days after discharge from the hospital;
- e) the first 7 days after discharge from the hospital.

**55. In newborns, the DIC syndrome often occurs in case of:**

*Variants of answer:*

- a) hemophilia;
- b) sepsis;
- c) congenital angiopathy;
- d) birth injuries;
- e) surgical operations.

**56. In what period after vaccination, antituberculous immunity is formed:**

*Variants of answer:*

- a) in 1 month;
- b) in 2 months;
- c) in 2 weeks;
- d) in 6 months;
- e) during the year.

**57. Absolute contraindications for DTP vaccination are:**

*Variants of answer:*

- a) progressive disease of the nervous system;
- b) diabetes mellitus;
- c) peptic ulcer of the duodenum;
- d) acute rheumatic fever;
- e) compensated heart defects.

**58. Which of the following refers to local reactions to vaccination:**

*Variants of answer:*

- a) allergic infiltration, skin hyperemia, local lymphadenitis;
- b) nettle rash, hyperthermia, generalized lymphadenopathy;
- c) abscess, necrotic tissue damage;
- d) anaphylactic shock;
- e) phlegmon, hyperthermia, hepatosplenomegaly.

**59. Post-vaccinal reaction is:**

*Variants of answer:*

- a) a permanent health damage due to introducing a non-qualitative immunobiological drug;
- b) a reaction associated with immunization and manifested by marked changes in a patient's functional state, not exceeding the limits of the physiological standard;
- c) a clinical manifestation of persistent pathological changes in patient's body related to vaccination, which threatens patient's life regardless of the immunobiological drug type;
- d) all listed;
- e) anaphylactic shock.

**60. Post-vaccinal complication is:**

*Variants of answer:*

- a) a permanent health damage due to introducing a non-qualitative immunobiological drug;
- b) a reaction associated with immunization and manifested by marked changes in a patient's functional state, not exceeding the limits of the physiological standard;
- c) a clinical manifestation of persistent pathological changes in patient's body related to vaccination, which threatens patient's life regardless of the immunobiological drug type;
- d) all listed;
- e) allergic infiltration, skin hyperemia, local lymphadenitis.

**61. Children suffering from bronchial asthma are removed from dispensary records in the absence of clinical and functional changes in the period of:**

*Variants of answer:*

- a) 2–3 years;
- b) 5 years;
- c) 7 years;
- d) 1 year;
- e) are not taken off the records before being referred to a therapist.

**62. Children with peptic ulcer are removed from dispensary records:**

*Variants of answer:*

- a) in 5 years;
- b) they are not removed from dispensary records;
- c) in 3 years;
- d) in 7 years;
- e) in a year.

**63. Children suffering from chronic gastroduodenitis are removed from dispensary records in the absence of clinical and functional changes in the period of:**

*Variants of answer:*

- a) 5 years after recurrence;
- b) 2 years after recurrence;
- c) are not removed;
- d) 3 years after recurrence and restoration of the morphological pattern;
- e) 1 year after recurrence.

**64. The first neonatal nursing is carried out:**

*Variants of answer:*

- a) on the first day after discharge from a maternity hospital;
- b) in the first 2 days after discharge from a maternity hospital;
- c) in the first 3 days after discharge from a maternity hospital;
- d) in the first 3 weeks after discharge from a maternity hospital;
- e) in a month after discharge from a maternity hospital.

**65. Blood reticulocytes increase is characteristic of:**

*Variants of answer:*

- a) chronic blood loss;
- b) aplastic anemia;
- c) hemolytic anemia;
- d) fanconi anemia;
- e) protein deficiency anemia.

**66. Iron deficiency anemia is characterized by:**

*Variants of answer:*

- a) hypochromia, microcytosis, sideroblasts in the sternal punctate;
- b) hypochromia, microcytosis, target red blood cells;
- c) hypochromia, microcytosis, decreased serum iron-binding capacity;
- d) hypochromia, microcytosis, positive desferal test;
- e) hypochromia, microcytosis, increased serum iron-binding capacity.

**67. Iron is absorbed:**

*Variants of answer:*

- a) in the esophagus;
- b) in the stomach;

- c) in the small bowel;
- d) in the large bowel;
- e) in the small and large bowel.

**68. Sideroblasts are:**

*Variants of answer:*

- a) erythrocytes containing a small amount of hemoglobin;
- b) red cell precursors containing nonheme iron;
- c) red cell precursors containing a large amount of hemoglobin;
- d) reticulocytes;
- e) thrombocytes.

**69. Target red blood cells are typical for:**

*Variants of answer:*

- a) iron deficiency anemia;
- b) sideroblastosis anemia;
- c) hereditary spherocytosis;
- d) sickle cell anemia;
- e) thalassemia.

**70. To make a diagnosis of acute leukemia, it is necessary:**

*Variants of answer:*

- a) to reveal leukocytosis in the peripheral blood test;
- b) to reveal anemia;
- c) to reveal thrombocytopenia;
- d) to detect increased number of blasts in the myelogram;
- e) to detect increased ESR.

**71. If a patient suffers from anemia, thrombocytopenia, blastosis in the peripheral blood, then it's a sign of:**

*Variants of answer:*

- a) erythremia;
- b) aplastic anemia;
- c) acute leukemia;
- d) idiopathic thrombocytopenic purpura;
- e) B<sub>12</sub>-deficiency anemia.

**72. Hemorrhagic vasculitis is characterized by:**

*Variants of answer:*

- a) hematoma type bleeding;
- b) vasculitic-purple type bleeding;
- c) thrombocytopenia;

- d) thrombin clotting time extension;
- e) prothrombin index decrease.

**73. Hemorrhagic vasculitis affects:**

*Variants of answer:*

- a) large-sized arteries;
- b) medium-sized arteries;
- c) medium-sized veins;
- d) small-sized veins;
- e) small-sized arteries and capillaries.

**74. If a patient has a petechial skin rash and bleeding gums after taking acetylsalicylic acid, he is likely to suffer from:**

*Variants of answer:*

- a) suppression of megakaryocytic hematopoietic lineage;
- b) thrombocytopathy;
- c) autoimmune thrombocytopenia;
- d) hemorrhagic vasculitis;
- e) hemophiliaC.

# STANDARD OF ANSWERS TO THE TEST TASKS

## 4<sup>th</sup> YEAR

№ question	Correct answers	№ question	Correct answers	№ question	Correct answers	№ question	Correct answers
1	e	49	a	97	c	145	b
2	a	50	e	98	b	146	c
3	a	51	c	99	e	147	a
4	a	52	e	100	e	148	d
5	b	53	a	101	b	149	e
6	b	54	a	102	e	150	c
7	c	55	b	103	a	151	d
8	b	56	e	104	c	152	b
9	b	57	b	105	a	153	a
10	b	58	b	106	c	154	c
11	c	59	e	107	b	155	e
12	b	60	a	108	d	156	c
13	b	61	e	109	a	157	b
14	b	62	e	110	b	158	d
15	b	63	c	111	b	159	b
16	b	64	b	112	b	160	c
17	c	65	b	113	c	161	c
18	b	66	e	114	d	162	e
19	b	67	e	115	d	163	c
20	c	68	e	116	e	164	b
21	a	69	e	117	e	165	c
22	b	70	e	118	e	166	e
23	b	71	a	119	b	167	a
24	b	72	a	120	c	168	d
25	c	73	b	121	d	169	b
26	b	74	b	122	a	170	a
27	b	75	a	123	e	171	a
28	b	76	c	124	b	172	d
29	b	77	d	125	c	173	b
30	c	78	b	126	c	174	d
31	e	79	a	127	c	175	b
32	c	80	a	128	c	176	c
33	e	81	c	129	b	177	b
34	a	82	b	130	c	178	c
35	b	83	e	131	c	179	a
36	a	84	c	132	e	180	e
37	a	85	e	133	e	181	d
38	c	86	e	134	d	182	b
39	c	87	e	135	e	183	b
40	d	88	c	136	e	184	c
41	b	89	e	137	d	185	c
42	b	90	e	138	b	186	b
43	b	91	d	139	e	187	e
44	c	92	a	140	e	188	b
45	b	93	e	141	a	189	b
46	a	94	b	142	e	190	a
47	b	95	e	143	c	191	d
48	e	96	a	144	e		

## 5<sup>th</sup> YEAR

№ question	Correct answers	№ question	Correct answers	№ question	Correct answers	№ question	Correct answers
1	c	20	c	39	b	58	a
2	a	21	a	40	a	59	b
3	b	22	c	41	e	60	c
4	e	23	b	42	e	61	b
5	a	24	b	43	b	62	b
6	a	25	c	44	b	63	d
7	a	26	e	45	d	64	c
8	e	27	b	46	c	65	c
9	b	28	e	47	e	66	e
10	b	29	c	48	b	67	c
11	a	30	b	49	d	68	b
12	b	31	c	50	b	69	e
13	e	32	b	51	e	70	d
14	b	33	c	52	e	71	c
15	b	34	d	53	e	72	b
16	a	35	b	54	c	73	e
17	b	36	e	55	b	74	b
18	c	37	b	56	b		
19	a	38	a	57	a		

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(на английском языке)

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**для студентов 4–6 курсов факультета по подготовке специалистов**  
**для зарубежных стран, обучающихся на английском языке,**  
**медицинских вузов**

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