QUESTIONS FOR THE EXAMINATION TESTS

Asepsis and antisepsis

1. Contamination of a wound is:
2. Implantation infection is:
3. What is the method of the implantation infection prophylaxis?
4. What isn’t the air infection prophylaxis?
5. Name way of endogenous infection distribution:
6. Name way of exogenous infection invasion:
7. What room is the sterile zone in operational block?
8. Name the type of cleaning of operating room during which medical personnel washes a ceiling in it:
9. Which of the following isn’t the type of cleaning of operating room
10. Which of the following isn’t “cold” sterilization method:
11. Sterilization of instruments in an autoclave under the pressure of two atmospheres takes:
12. Which of the following methods is used for sterilization of cystoscopes, laparoscopes and thoracoscopes?
13. The following regimen of sterilization in drying cabinet is observed:
14. Which method is that mechanical antisepsis?
15. Oxidizing antiseptic is as follows:
16. The method of physical antisepsis is as follows:
17. Agent that works as biological antiseptic isn’t as follows:
18. Chemical antiseptic isn’t as follows:
19. Name the substance that prevents the growth or reproduction of bacteria, destroy microorganisms internally (within the body):
20. Which suture material is artificial?

Desmurgy

1. Which kind of bandage has two variants – diverging and converging?
2. Which kind of bandage is used at ligamentous laxity of ankle joint?
3. Which kind of bandage is used for fixation of lower jaw?
4. Which kind of bandage is comfortable at frostbite of hand?
5. Which kind of bandage is used at fracture of clavicle?
6. Soft bandage is –
7. Which kind of bandage is used at open pneumothorax?
8. Which kind of bandage is used on perineum?
9. Immobilisation bandage is –
10. Which kind of bandage is used at extensive injury of thorax?
11. Which kind of bandage is used at injury of elbow joint?
12. Which kind of bandage is used at injury of humeral joint?
13. Which kind of bandage is used at injuries of fingers of a hand?
14. Which kind of bandage is better to use after opening carbuncle of a neck?
15. Which kind of bandage is better to use after closed reduction of dislocation in a shoulder joint?
16. Which type of bandage is better to use for control of bleeding?
17. Which kind of bandage is used at injury of an eye?
18. Which kind of bandage is when each round completely covers the previous one?
19. Which complication isn't typical after plaster of Paris application?
20. Figure-of-eight bandage is applied on this part of the body:

Surgical operation

1. Which of the following conditions require urgent surgery?
2. Which of the operations should be first on the schedule?
3. Which of the following solutions is to be transfused to patients with hypoproteinemia during the preoperative period?
4. A cold weight to press on the wound after the operation is applied to:
5. The prophylaxis of postoperative thromboembolism doesn’t include the following measure:
6. The following measures are all applicable in GI paresis, except:
7. On day 3 postoperatively, a male patient operated on for perforation of gastric ulcer complains of a sudden worsening of abdominal pain. He denies having nausea or vomiting. On examination: pale skin, dry tongue, pulse 120/min, BP 120/80 mm Hg, abdominal distension, total rebound tenderness on abdominal palpation. Blumberg’s sign is positive. Bowel peristaltic sounds are inaudible, acid (according to pH measuring) serous and purulent secretion through the abdominal wall is evident. Identify the complication:
8. The early local postoperative complication isn’t as follows:
9. Which type of enema always is used to prepare the patient for surgery?
10. A surgical operation doesn’t include the following stage:
11. The male patient is admitted to the surgical department with GI bleeding. The most significant problem that requires correction preoperatively is the follows:
12. The aim of the preoperative period doesn’t include of the following:
13. The preoperative period begins:
14. The major factor of duration of the preoperative period is which of the following:
15. The aim of the preoperative workup doesn’t include which of the following:
16. What immediately (before 30 – 40 minutes) precedes the surgery?
17. In the preoperative period, the prevention of infection doesn’t consist of which of the following:
18. Which of the instrumental methods is a more accurate diagnosis in a patient with cancer of large intestine?
19. To prevent postoperative pneumonia, the following should be used except:
20. The early postoperative period ends after:

Anesthesia

1. The concentration of Novocain used for infiltration anaesthesia should be as follows:
2. What isn’t contraindication for local anaesthesia?
3. Which type of anaesthesia isn’t regional?
4. For terminal anaesthesia, which of the following isn’t used:
5. The complication of spinal anaesthesia isn’t as follows:
6. The aim of premedication isn’t as follows:
7. Which type of anaesthesia is preferable in operation for subcutaneous felon?
8. The cause of oxygen kindling and explosion of gas bags with oxygen is which of the following:
9. Using an electrical knife should be avoided in which of the following types of general anaesthesia:
10. What is the main cause of death in profuse haemorrhage within the first one hour after its occurrence?
11. Algover’s shock index is which of the following?
12. Sudden cardiac arrest causes irreversible cortical lesions after which of the following periods:
13. Which drug is used for spinal anaesthesia?
14. Which anaesthetic is used for intravenous narcosis?
15. Which anaesthetic is used for intratracheal narcosis?
16. In what country the narcosis for the first time has been applied?
17. How the device which is applied at intubation of trachea is called?
18. Which of the following conditions is indication for closed chest massage?
19. The advantage of endotracheal general anaesthesia include the following:
20. The sign of cardiac arrest include the following:

Haemorrhage

1. Blood loss up to … is compensated by peripheral vasoconstriction in an average healthy adult.
2. How will you classify haemorrhage on ethiology?
3. Which of the following is anatomical classification of haemorrhage?
4. What is the main cause of secondary haemorrhage?
5. “Haemmatomesis” is:
6. What isn’t the sign of internal haemorrhage?
7. Which of the following isn’t temporary control of haemorrhage?
8. Which of the following is definitive control of haemorrhage?
9. Haemorrhage from the wound of the neck is:
10. Which of the following is biological method of control of haemorrhage?
11. Temporary control of arterial haemorrhage from the wound lower one-third of the hip is:
12. Which of the following is complication after application of tourniquet?
13. Which of the following play an important role in control bleeding?
14. The definitive control of haemorrhage in case of injury of common carotic artery is:
15. Haemorrhage is effusion of blood:
16. Hematoma is:
17. Ligation of vessel in the wound is indicated only:
18. Treatment of aortic bleeding due to mechanical injury is:
19. “Melena” is a classical feature of … bleeding
20. Treatment of choice of deep rupture of spleen is:

Blood components transfusion

1. Name relative contraindications to erythrocytic mass transfusion:
2. What features of transfusion anamnysis of the recipient is matter for safety of erythrocytic mass transfusion?
3. Indication to erythrocytic mass transfusion is:
4. All are the first clinical signs of posttransfusion shock except:
5. What isn’t indication for transfusion to the patient with acute loss of blood?
6. What from the following isn’t allowed to use the blood for reinfusion?
7. Which isoserological test isn’t necessary to perform at erythrocytic mass transfusion?
8. Which of the following will not be observed at transfusion of incompatible erythrocytic mass?
9. The cadaveric blood cannot be allowed to use if the man died of the following reason:
10. The blood isn’t transfused intraosseously in:
11. What is used as the stabilizer to conservation of a blood?
12. Erythrocytic mass expediently to transfuse to the patient with the chronic anemia:
13. What isn’t the source of blood for transfusion?
14. All are the features of posttransfusion shock except:
15. … the most expedient to transfuse with hemostatic purpose:
16. ….. is indication for erythrocytic mass transfusion:
17. Test on individual compatibility of blood is carried out between:
18. Indication to exchange blood transfusion is:
19. DIC - syndrome (disseminated intravascular clotting) is seen in all of following conditions except:

20. What is necessary to take for the test on rhesus factor – compatibility?

21. Indication for medical plasmapheresis is:

22. The red blood corpuscles (RBC) would burst if are immersed in:

The doctrine about injuries

1. The clinical feature of soft tissue contusion isn’t as follows:

2. The clinical signs of acute renal failure in case of crush syndrome usually develop:

3. The major causative factor of crush syndrome isn’t as follows:

4. The major period of clinical course of crush syndrome isn’t as follows:

5. Clinically, brain concussion isn’t characterised by:

6. As to the major sites of cerebral haematoma, the following type isn’t identified:

7. The common complication of the closed lung trauma isn’t as follows:

8. The common complication of a parenchymatous organ rupture due to closed abdominal trauma is as follows:

9. The most effective instrumental method used to recognize closed abdominal traumas is as follows:

10. Second degree burns are:

11. The early sign (i.e. found within the first hours of the injury) indicative of deep burns isn't as follows):

12. Severe burns aren’t:

13. Acute burn toxaemia lasts for:

14. The burn area of total lower limb is:

15. Which kind of shock is absent as following:

16. What cannot be the reason of collapse as following:

17. The local sign typical of electric burns isn’t as follows:

18. What is mistake in the treatment of frostbite?

19. The characteristic feature of alkali burns is formation of:

20. The safest place for drainage of pleural cavity in case of haemothorax is:

Fractures and dislocations

1. The local sign of fractures isn’t as follows:

2. The following type of bone fragment displacement isn’t identified:

3. As to localization, the following types of the fractures isn't identified:

4. The methods of stable bone fragment fixation isn’t as follows:

5. The callus consists of the following layers except:

6. The major principle of fracture treatment isn’t as follows:
7. Points of carrying out the extension wire to provide skeletal traction isn’t as follows:
8. The indication for surgical treatment of fractures isn’t which of the following:
9. Which of the following types of the bone fragment fixation is non-surgical:
10. The local causes of delayed fracture union isn’t as follows:
11. The late complication of fractures isn’t as follows:
12. The main quantity of dislocations are in the:
13. Absolute sign of fractures is:
14. Dieterichs splint is used at:
15. A sling bandage is used at:
16. Which type of plaster bandage is used at open fractures?
17. The early complication of fractures isn’t as follows:
18. What isn’t indication for the use of transport immobilization?
19. What is fresh dislocation?
20. Is it necessary to perform immobilization after reduction of dislocation?

Wounds

1. Classification of the wounds depending on the case:
2. Classification of the wounds according to the character:
3. Classification of the wounds depending on the presence of microorganisms in the wound:
4. Classification of the wounds in relation to the bodily cavities:
5. The main clinical signs and symptoms of the wounds are as follows:
6. The three areas from a gunshot wound of damage are identified:
7. Primary wound debridement is divided into:
8. Early primary surgical debridement is done:
9. Delayed primary surgical debridement is done:
10. Late primary surgical debridement is done:
11. Primary suturing is done:
12. Primary - delayed suturing is done:
13. Early secondary suturing is done:
14. Late secondary suturing is done:
15. Right order of healing process stages:
16. Main process in lag phase of healing process are follows:
17. Main process in fibroplasias of healing process are follows:
18. Main process in contraction phase of healing process are follows:
19. Wounds heal by first intention:
20. Wounds heal by second intention:
Anaerobic infection

1. Anaerobic (gas) gangrene are caused by spore forming-anaerobic microorganisms such as:
2. Classification of gas gangrene by localisation:
3. Classification of gas gangrene by clinical course:
4. Factors that predispose to gas gangrene are as follows:
5. Early signs of anaerobic infections are as follows except:
6. Nonspecific prevention of anaerobic infection includes:
7. Specific prevention of anaerobic infection includes:
8. The incubation period of tetanus ranges:
9. The classical triad of signs can be observed in the late stages of the tetanus.
10. The early general signs of tetanus are as follows except:
11. Treatment of the tetanus include following measures except:
12. Specific treatment of tetanus includes following preparations except:
13. Specific treatment of gas gangrene includes:
14. Specific prophylaxis of gas gangrene includes:
15. Specific scheduled tetanus prophylaxis includes:
16. Emergent prophylaxis of tetanus in immunized patient include:
17. Emergent prophylaxis of tetanus in non-immunized patient include:

Gangrene and necrosis

1. The complications of lower limb thrombophlebitis are commonly due to:
2. The typical signs of obliterating endarteritis are as follows:
3. The characteristic signs of lower limb arterial thromboembolism are as follows:
4. The causes of lymphatic circulatory disturbance are as follows:
5. Treatment of post thrombophlebitis involves the following methods:
6. To assess the potency of venous valves, the following methods are used:
7. The causes of pulmonary embolism are as follows:
8. The agents for pathogenic treatment of obliterating endarteritis are as follows:
9. The risk groups of obliterating endarteritis are as follows:
10. The causes of acute vein insufficiency are as follows:
11. Preventive measures in post surgery deep vein thrombophlebitis include the following:
12. The signs characteristic of acute deep vein thrombosis are as follows:
13. The causes of gangrene are as follows:
14. Common causes and risk factors of moist gangrene are as follows:
15. Dry gangrene is characterized by:
16. The clinical signs of limb moist gangrene are as follows:
17. The appropriate treatment of limb moist gangrene with severe intoxication and fever may be as follows:
18. The appropriate surgery for varicose ulcers may be as follows:
19. The causes of varicose ulcers are as follows:

**Osteomyelitis**

1. The most complete definition of osteomyelitis is:
2. Classification of osteomyelitis according to their etiological factors:
3. Classification of osteomyelitis according to the mode of infection:
4. Classification of osteomyelitis according to the clinical manifestation:
5. Clinical forms of acute haematogenic osteomyelitis are as follows:
6. Acute haematogenic osteomyelitis mostly affects:
7. Plausible X-ray signs of acute osteomyelitis appear not earlier than:
8. X-ray signs of acute osteomyelitis are as follows:
9. The optimal surgical treatment of the acute haematogenic osteomyelitis is:
10. Conservative treatment of the acute haematogenic osteomyelitis include:
11. Types of primary chronic osteomyelitis are as follows:
12. The following main triad of signs characterizes chronic osteomyelitis:
13. Brodie's abscess is:
14. Ollier's osteomyelitis is:
15. Garre's disease is:
16. The main components in the complex treatment of chronic osteomyelitis are:

**Suppurative-inflammatory diseases**

1. The local symptoms of inflammation are as follows with the exception of:
2. The general symptoms of suppurative-inflammatory diseases are as follows with the exception of:
3. Changes in the blood pictures in surgical infections are as follows:
4. Localized accumulation of pus in different tissues is:
5. Acute diffuse suppurative inflammation of the subcutaneous fatty tissue is:
6. Acute suppurative necrotic inflammation of the hair follicle of the sebaceous gland and the surrounding subcutaneous fatty layer is:
7. Acute diffuse suppurative-necrotic inflammation of several hair follicles and sebaceous glands accompanied by the development of a common infiltration and necrosis of the skin and the surrounding subcutaneous fatty tissue is:
8. Capillary lymphangitis caused by diverse Streptococcus spp. is:
9. The clinical forms of panaritium are as follows:
10. The clinical forms of mastitis are as follows:
11. Inflammation of the lymphatic vessels that accompanies different inflammatory diseases is:
12. Inflammation of the lymph nodes resulting from a complication of different inflammatory diseases is:
13. Accumulation of inflammatory exudate beneath the epidermis and separation it by forming blisters is:
14. Inflammation of the areas around the nail fold, associated with tender swellings of the nail fold and hyperemia of the surrounding tissue is:
15. Accumulation of pus beneath the nail plate, dividing the latter from the nail bed either along its entire length or at some particular areas is:
16. Pandactilitis is:
17. The clinical forms of hand phlegmon are as follows:
18. Sources of infection during suppurative inflammatory diseases are as follows:
19. Medical treatment of the abscess is:
20. Furuncles are mostly found at the:
21. The presence of two or more furuncles is:
22. Small pustule near the hair with surrounding skin hyperemia is:
23. Serous-infiltrative stage of the furuncle is treated:
24. Necrotic suppurative stage of the furuncle is treated:
25. The most dangerous complications of the carbuncle on the face are as follows:
26. The clinical forms of erysipelas are as follows:
27. The major local signs of erythaematous erysipelas are:
28. The major local signs of bullous erysipelas are:
29. The major local signs of necrotic erysipelas are:

Tuberculosis

1. Anatomically tuberculosis of bones and joints falls into three major forms with the exception of:
2. Tuberculosis affects the bones and joints with the incidence as low as about:
3. According to Kornev, the pathogenesis of tuberculosis of the bones and joints involves the three stages:
4. The characteristics of tuberculous spondylitis are as follows except:
5. The characteristics of tuberculous spondylitis are as follows except:
6. The characteristics of tuberculous spondylitis are as follows except:
7. The typical signs of prespondylolytic phase of tuberculous spondylitis are as follows except:
8. The typical signs of spondylolytic phase of tuberculous spondylitis are as follows except:
9. The typical feature of tuberculous coxitis:
10. Treatment of tuberculosis of bones and joints includes following measures except:
11. Radical operations in complex management of bone and joint:
12. Ancillary operations in complex management of bone and joint:
13. Reconstructive operations in complex management of bone and joint:
14. X-ray symptoms of bone and joint tuberculosis are as follows except:

Tumours

1. The absolute indications for removal of benign tumours are as follows:
2. Malignant tumour is characterized by:
3. GI endoscopy helps:
4. During surgery, the gastric tumour with regional metastases was found to have penetrated all the layers of the stomach. The tumour was mobile. Stage the tumour:
5. The examples of palliative surgeries for malignant tumours involve the following:
5. The patient who has had the malignant tumour removed is considered cured:
6. Usually, superficial benign tumour:
7. The main characteristics of a tumour are as follows except:
8. The main characteristic of a benign tumour:
9. The main characteristic of a malignant tumour:
10. There are the following theories of an origin of tumours except:
11. There are the following groups of cancerogens except:
12. Physical cancerogen is:
13. Physical cancerogen is:
14. Physical cancerogen is:
15. Chemical cancerogen is:
16. Chemical cancerogen is:
17. Chemical cancerogens are:
18. Chemical cancerogen are:
19. Biological cancerogen is:
20. Biological cancerogen are: