



# **SYSTEM: RS** **TEST BANK**

- **SUBJECT** : Pathology
- **BY** : Farah Thaher



## Past Papers

### Lecture 1

which of the following is true about atelectasis:

- A) emphysema is associated with resorption atelectasis
- B) defined as low lung volume due to alveolar destruction
- C) mucus bulge cause compression atelectasis
- D) accumulation of fluid in pleura causes cicatrization

Ans: A

Which of the following is true regarding acute respiratory distress syndrome:

- A) Gradual onset
- B) Graded by arterial oxygenation.
- C) In organized stage, you can find microscopic appearance of fibrin rich edema fluid.

Ans: B

Regarding atelectasis:

- A) In resorption atelectasis, the mediastinum shifts toward the atelectatic lung.
- B) Accumulation of mucus in bronchi is the most common cause of atelectasis in kids.
- C) Air in the parietal cavity causes contraction atelectasis.
- D) All forms of atelectasis are reversible and curable.

Ans: A

Regarding ARDS, which of the following is correct?

- A) It is the milder form of acute lung injury.
- B) The most common cause is pancreatitis.
- C) It is characterized by the presence of hyaline membrane in the organizing stage.
- D) Sepsis is indicative for poor prognosis It is related to cardiac causes

Ans: D

A 58-year-old man with ischemic heart disease undergoes coronary artery bypass graft surgery under general anesthesia. Two days postoperatively, he experiences increasing respiratory difficulty with decreasing arterial oxygen saturation. On physical examination, his heart rate is regular at 78/min, respirations are 25/min, and blood pressure is 135/85 mmg. The hemoglobin concentration has remained unchanged, at 13.7 g/ dL, since surgery. After he coughs up a large amount of mucoid sputum, his condition improves. Which of the following types of atelectasis does he most likely have?

- A) Compression
- B) Contraction
- C) Resorption

Ans: C

A 7-year-old boy accidentally inhales a small peanut, which lodges in one of his bronchi. A chest x-ray reveals the mediastinum to be shifted toward the side of the obstruction. The best description for the lung changes that result from this obstruction is:

- A) Absorptive atelectasis
- B) Compression atelectasis
- C) Contraction atelectasis
- D) Patchy atelectasis
- E) Hyaline membrane disease

Ans: A

Histologic sections of lung tissue from an individual with adult respiratory distress syndrome (ARDS) are most likely to reveal:

- A) Angio invasive infiltrates of pleomorphic lymphoid cells
- B) Deposits of needle-like crystals from the membranes of eosinophils
- C) Infiltrating groups of malignant cells having intercellular bridges
- D) Irregular membranes composed of edema, fibrin, and dead cells lining alveoli
- E) Plexiform lesions within pulmonary arterioles

Ans: D

which of the following is true regarding ARDS?

Ans: Poor prognosis in case of bacteraemia

most common cause of ARDS:

Ans: Sepsis

A 70 year old in ICU complaining shortness of breath, it was shown fibrin-rich membrane:

Ans: ARDS.

wrong about atelectasis:

Ans: air in Pneumothorax (compression atelectasis) is irreversible.

ARDS feature:

Ans: Sepsis is predictor of poor prognosis

which of the following is true about atelectasis?

Ans: Chronic bronchitis cause resorption atelectasis

## Lecture 2

A 35-year-old gentleman he is a non smoker and barrel chested suffers from dyspnea and his lower zone of the lung has something, his brother has similar manifestations what of the following is most likely to be the reason for his disease

- A) increase in proteases
- B) lack of anti elastases
- C) active pulmonary infection

Ans: B

true about chronic bronchitis:

- A) diagnosed by persistent cough for at least 2 months for three consecutive years
- B) associated with metaplasia and dysplasia
- C) need regular clinical, lab and histological findings for diagnosis

Ans: B

A 20-year-old, previously healthy gentleman is jogging one morning when he falls to the ground. He suddenly becomes markedly short of breath. In ER no breath sounds audible over the Rt side of the chest. A CXR shows shift of the mediastinum from right to left. A chest tube is inserted on the right side, and air rushes out. Which of the following underlying diseases is most likely to have produced this complication?

- A) Centriacinar emphysema
- B) Chronic bronchitis
- C) Distal acinar emphysema
- D) Panlobular emphysema

Ans: C

Which one of the following is a correct association concerning the pathogenesis of smoking- induced emphysema?

- A) Destruction of distal acinus - centrilobular emphysema
- B) Destruction of entire acinus - panlobular emphysema
- C) Destruction of proximal acinus - centrilobular emphysema
- D) Destruction of proximal acinus - paraseptal emphysema

Ans: C

wrong about emphysema:

Ans: Inflammation with associated fibrosis.

airway obstruction in chronic bronchitis is due to:

Ans: Bronchiolitis.

true about COPD:

Ans: Inflammation is involved in the pathogenesis of both emphysema and chronic bronchitis.

Not correct about Chronic bronchitis:

Ans: bacterial infection has a role

According to pathogenesis of emphysema occurs because:

Ans: protease - anti protease imbalance