

ОШСКИЙ ГОСУДАРСТВЕННЫЙ УНИВЕРСИТЕТ
МЕЖДУНАРОДНЫЙ МЕДИЦИНСКИЙ ФАКУЛЬТЕТ

Кафедра клинических дисциплин 2

РАССМОТРЕНО

на заседании кафедры протокол № 4
от «24» 11. 2022 года

Зав. кафедрой _____ / Бугубаева М. М.

УТВЕРЖДАЮ _____

Председатель УМС ММФ,
Р. С. Салиева
« 24 » 11 2022г.

ФОНД ТЕСТОВЫХ ЗАДАНИЙ

для итогового контроля по дисциплине

« Prepedentics of childhood diseases 1 »

на 2022 -2023 учебный год

Направление: 560001 – лечебное дело (GM)

курс – 3, семестр – V

Наименование дисциплины	Всего	Кредит	Аудиторные занятия (ч)		СРС
			Лекции	Практические	
Предмет		5	30	45	45
Кол-во тестовых вопросов			350		

Составители:

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г. Ош. 2022г.

The matrix of the formed LR and professional competencies in the context of the thematic plan for the organization of the current exam in the discipline "Propedeutics of childhood diseases" in the specialty General Medicine (for foreign students) for the 2022-2023 academic year.

Semester V

*Total hours - 5 credits / 150 hours
(lecture - 30 hours, practical - 45 hours, SW- 75 hours)*

№	Topics	Hour % L+P+S W	Share of questions %	Cognitive levels			Formed LR and competencies	
				Memorization 20%	Understanding 30%	Applying 50%	LO	PK
1	<i>Introduction to the subject «Child diseases 1 (propaedeutics)». Pediatrics as a science. History of maternal health and child development in India and Kyrgyz Republic. Childhood periods in pediatrics.</i>	10/6,6	6,6/23,3	4	7	11	5,7.	2, 3, 12.
2	<i>General examination of healthy and sick child. The physical development of the child. Technique anthropometric measurement.</i>	10/6,6	6,6/23,3	4	7	11	5,7.	2, 3, 12.
3	<i>Variability of physical development.</i>	10/6,6	6,6/23,3	4	7	11	5,7.	2, 3, 12.
4	<i>Anatomical and physiological features (APF) of the nervous system (brain and spinal cord) in children. Unconditioned reflexes and the formation of conditioned-reflex activity of the child.</i>	10/6,6	6,6/23,3	4	7	11	5,7.	2, 3, 12.
5	<i>Anatomical and physiological features (APF) of the nervous system (brain and spinal cord) in children. Unconditioned reflexes and the formation of conditioned-reflex activity of the child.</i>	10/6,6	6,6/23,3	4	7	11	5,7.	2, 3, 12.
6	<i>Methodology for assessing the neuropsychic development of children. Sleep. Speech.</i>	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.

7	The main syndromes of the nervous system in children	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
8	APF of the skin, subcutaneous fatlayer in children. The methodology for studying the skin. Semiotics of skin and subcutaneous tissues lesions.	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
9	APF of the muscular and skeletal system in children. Methods of study of the muscular and skeletal system in children. Semiotics lesions of the muscular and skeletal systems in children.	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
10	APF of the respiratory system in children. Methods of research of respiratory organs in children. (palpation, percussion, auscultation). Additional (instrumental) research methods of the respiratory system in children.	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
11	The main syndromes of the respiratory system in children. The criteria and degree of respiratory failure in children. Emergency care for respiratory arrest in children.	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
12	APF of the heart and blood vessels in children. Circulation of the fetus and newborn.	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
13	Measurement technique and assessment of blood pressure in children .Instrumental examination of the CVS in children (functional tests, ECG, phonocardiogram, echocardiography, dopplercardiography, etc..).	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
14	The main syndromes of defeat of the cardiovascular system in children. The criteria and the degree of heart failure in children	10/6,6	6,6/23,3	5	7	12	5,7.	2, 3, 12.
15	Acquired heart disease in children.	10/7	6,6/24	5	7	12	5,7.	2, 3, 12.
Total		150/100	100/350	70	105	175		

MCQs for the subject «Child diseases 2 (Propaedeutics)» for students of 3rd year of International Medical Faculty of Osh State University specialty «General Medicine» in the 2022-2023 academic year.

- The infant can sit without support, roll over and crawl, but cannot stand on his own. He responds to his own name. Give the most likely age for this baby
 - 3 months
 - 6 months
 - 9 months
 - 15 months
 - 4 months
- Indicate the age of the child when he begins to crawl.
 - 3 months
 - 9 months
 - 8 months
 - 7 months
 - 6 months
- The child can walk well holding on to furniture, but wobbles slightly when walking alone. She uses a gentle claw grip to pick up the marble, and can release the cube into the cup after being shown to do so. The chief tries to build a two-dice tower with mixed success. Give the most likely age for this baby.
 - 2 months
 - 4 months
 - 6 months
 - 9 months
 - 12 months
- Inspiratory dyspnea is usually caused by
 - Foreign body in the respiratory tract
 - Bronchial asthma
 - Inflammation process in small bronchi
 - Mixed shortness of breath
 - Bronchospasm
- Find out the newborn period in children (age in life weeks).
 - 2
 - 3
 - 4
 - 6
 - 5
- For severe delay of growth, the terms are used.
 - Hypostatura, malnutrition
 - Malnutrition
 - Short stature, malnutrition
 - Nanism, malnutrition
 - Nanism, short stature
- Define the term when proportional delay of growth and mass in a child of early age
 - Hypotrophy
 - Hypostatura
 - Nanism
 - Malnutrition
 - Short stature
- Delay of growth of a child is most associated with: a) hereditary syndromes and chromosomal diseases b) acute diseases c) chronic diseases d) overnutrition (overfeeding) e) fasting f) diseases of the endocrine system
 - a, c
 - a, c, e, f
 - c, e, f
 - a, b, c, f
 - d, e, f
- Choose correct option: Mongolian spots can be disappear at age of
 - at 3 years
 - at 2 years
 - 4-5 years
 - 7-9 years
 - 1-2 years
- Normal full-term newborn at the age of 10 days have
 - Muscle hypertension in the extensor group
 - Muscular dystony
 - Hypotension in the arms and hypertension in the legs
 - Muscle hypertension of flexors
 - Hypertension in the arms and hypotension in the legs
- Define the ideal average body length of a new-born
 - 50 to 52 cm
 - 46 to 56 cm
 - 34 to 36 cm
 - 32 to 34 cm
 - 33 to 35 cm
- Identify the main criteria of the neonates classification
 - Birth height
 - Head circumference
 - Birth weight
 - Chest circumference
 - Index of Einsman
- Define the diseases which usually appear in the neonatal period
 - Embriopathy
 - Chronic somatic diseases
 - Acute children infections
 - Food poisoning
 - All answers are correct
- Identify the earliest sign of rickets
 - Craniotabes
 - Rickety rosary
 - Bow legs
 - Harrison's groove
 - Square head
- Typical physical data at pneumonia are
 - Diffuse dry wheezes
 - Local small moist wheezes
 - Diffuse small moist wheezes
 - Diminished breath sounds
- Local big moist wheezes
 - Fungi
 - Viruses
 - Bacteria
 - Parasites
 - b and c
- Bronchitis is caused most often by:
 - Fungi
 - Viruses
 - Bacteria
 - Parasites
 - b and c
- Find the relative sizes of the brain in newborn compared to adults: a) frontal lobes are smaller b) the frontal lobes are larger c) the occipital lobes are smaller d) the occipital lobes are larger e) the cerebellum is smaller f) the cerebellum is larger g) the cerebellum is smaller h) the cerebellum is larger
 - a, b, c
 - a, d, e
 - a, c, e
 - c, e, f
 - a, d, f
- Specify the number of nerve cells of the brain by the birth of a child related to an adults.
 - 100%
 - 75%
 - 50%
 - 25%
 - 10%
- Laying the nervous system occur on (gestation per week).
 - 1-2
 - 3-4
 - 5-6
 - 7-8
 - 9-10
- Cerebral spinal fluid in children in the first months of life (after 2 weeks) has the following indicators: a) slightly cloudy brown b) protein 0.2-0.5 g/l c) cytosin is represented by lymphocytes d) cytosin is represented by neutrophils e) cytosin in 1 µl 3/3-25/3
 - a, b, c
 - a, d, e
 - b, c, d
 - b, c, e
 - a, d, e
- Find signs of speech understanding in a 1 year child: a) pronunciation of individual words b) understanding the meaning of individual words spoken by adults c) search visual reaction to the question "where?" d) linking words into a sentence e) linking a word to a specific subject
 - a, b, c
 - a, d, e
 - a, d, e
 - b, c, d
 - b, c, d
- Specify the characteristic features of tetralogy of Fallot: a) lag in physical development b) cyanosis c) right ventricular hypertrophy d) dextraposition of the aorta e) left ventricular hypertrophy
 - c, d
 - a, d
 - a, e
 - b, c, d
 - b, c, d
- Rate the baby by the Apgar scale - A newborn baby 1 minute after birth is noted irregular breathing, heart rate less than 100 per minute, acrocyanosis. To the irritation of the soles responds with a grimace
 - 1 point
 - 3 points
 - 5 points
 - 7 points
 - 9 points
- Specify what are the typical physical data for pneumonia
 - diffuse dry rales
 - local small moist rales
 - diffuse small moist rales
 - weakening of breath sounds
 - local dry rales
- Select what is the radiological sign of acute pneumonia
 - strengthening of the pulmonary picture (pulmonary pattern)
 - infiltrative shadows
 - emphysema
 - expansion of the roots of the lungs
 - pneumosclerosis
- Determine what does not affect the clinical picture of acute pneumonia in infants
 - age
 - sex
 - premorbid state
 - nationality
 - weight
- Indicate the signs that determine tachypnea in children aged 2-12 months
 - >50 breaths/min
 - >80
 - >60
 - >40
 - >35
- Specify the signs that determine tachypnea in children aged 1-5 years
 - >50 breaths/min
 - >80
 - >60
 - >40
 - >35
- Indicate what is predominant in the acute phase of obstructive bronchitis
 - Intoxication
 - Cough
 - shortness of breath
 - Wheezing
 - Tonsillitis
- Choose what kind of percussion data is in the acute period of obstructive bronchitis

- A. Clear lung sound
B. Sound box
C. Dullness of lung sound
31. Choose what is the auscultatory data in the acute phase of obstructive bronchitis
A. Continued inspiration
B. Weakening of breathing
C. Dry rales and moist diffuse rales
32. Indicate what signs are present in the acute period of obstructive bronchitis on the radiograph.
A. Perivascular and peribronchial infiltration, increased pulmonary pattern and expansion of the roots of the lungs
B. Very clear lung field
C. Hyperinflation
D. Randomly scattered patches of consolidation
E. Local infiltration of lung tissue
33. The chest falls on inspiration and rises on expiration. What type of respiration is it?
A. Kussmaul's respiration
B. Paradoxical respiration
C. Normal respiration
D. Biot's respiration
E. Cheyne-Stokes respiration
34. Choose what type of respiratory movements in children over 7 years of age?
A. Thoracic region
B. Abdominal
C. Costal
D. Strictly
E. Diaphragmatic
35. Define what is tachypnea?
A. Increased respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Respiratory arrest
E. Increasing the depth of breathing
36. What is the average respiratory rate for a one-year-old child?
A. 20
B. 30
C. 18
D. 50
E. 60
37. Define what is sleep apnea?
A. Increased respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Respiratory arrest
E. Increasing the depth of breathing
38. Define what is bradypnea?
A. Increased respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Respiratory arrest
E. Reducing the depth of breathing
39. What is the average respiratory rate in children after 12 years of age?
A. 22
B. 32
C. 45
D. 18
E. 25
40. What is the normal ratio of breaths to heartbeats?
A. 1:1
B. 1:2
C. 1:3
D. 1:4
E. 1
41. What is the average respiratory rate of a newborn?
A. 22
B. 30
C. 18
D. 45
E. 64
42. What are the main clinical signs useful in the diagnosis of bronchiolitis?
A. Paroxysmal cough
B. Wheezing
C. Tachypnea
D. Shortness of breath
E. Tension and expansion of the nostrils
43. Specify what are the main radiological signs useful in the diagnosis of acute bronchitis?
A. Perivascular and peribronchial infiltration
B. Extra clear lung field
C. Hyperinflation
D. Random scattered patches of consolidation
E. Local infiltration of lung tissue
44. What examination is most important for bronchitis?
A. Complete blood count
B. Sputum culture
C. Alveolar fluid culture
D. Biochemical analysis of blood
E. Chest x-ray
45. Choose what most often causes Bronchitis:
A. Mushrooms
B. Viruses
C. bacteria
D. Parasites
E. Mixed flora
46. Choose what sound is typical for obstructive bronchitis?
A. Clear lung sound
B. Sound box
C. Localized dyspnoea lung sound
D. Total dyspnoea lung sound
E. Mosaic sound
47. Indicate the auscultation data that cannot be determined in obstructive bronchitis
A. Local decrease in vesicular respiration
B. Strengthen vesicular breathing
C. Rough breathing
D. Puerile breath
E. Bronchial breathing
48. What is the main symptom of bronchiolitis?
A. Puerile breath
B. Dry Wheezing
C. Blistering rales in the lower parts of the lungs
D. Spilled small rales
E. Decreased vesicular respiration
49. Select which criterion is not acute obstructive bronchitis:
A. Severe intoxication
B. A large number of dry rales
C. Unproductive cough
D. Box sound on percussion
E. Perivascular infiltration of lung tissue
50. Choose what is not radiological criteria for acute bronchitis:
A. Atelectasis
B. Increased lung pattern
C. Perivascular infiltration
D. Peribronchial infiltration
E. Root infiltration
51. Specify which symptom is the main one in acute bronchitis:
A. Wheezing
B. Sore throat
C. Cough
D. Shortness of breath
E. Hyperthermia
52. Choose what is not the first sign of acute bronchitis:
A. Hyperthermia
B. Wheezing
C. Vomiting
D. Pharyngitis
E. Cough
53. Indicate which wheezing is not characteristic of bronchitis:
A. Diffuse
B. Symmetrical
C. Local
D. Reduction or disappearance of wheezing after coughing
E. Dry rales
54. Specify which auscultatory findings are not typical for bronchitis:
A. Rough breathing
B. Reduce breathing
C. Dry rales
D. Wet diffuse rales
E. Reduction or disappearance of wheezing after coughing
55. Choose what auscultatory data for bronchitis:
A. Puerile breath
B. Reduce breathing
C. Rough breathing
D. Moist local rales
E. Crepitus rales
56. Choose what is not radiographic criteria for acute bronchitis:
A. Symmetrical increase in lung pattern
B. Symmetric reduction of lung pattern
C. Lung tissue infiltration
D. Infiltration of the lung tissue near the roots
E. Symmetric reduction of lung pattern and infiltration of lung tissue
57. Describe how broncho-obstructive syndrome is characterized:
A. Noisy breathing
B. Paroxysmal breathing
C. Stridor breathing
D. Quiet breathing
E. Weakened breathing
58. Choose which main clinical signs are useful for diagnosing bronchial asthma?
A. Chest pain
B. Dispnoe

- C. Tachycardia
D. Vomiting
59. Specify what should be used to control the effect of bronchial asthma treatment:
A. Spirography
B. ECG
C. Allergy testing
60. Choose which non-acquired heart defects in children?
A. Mitral insufficiency
B. Coarctation of the aorta
C. Tricuspid insufficiency
61. Describe the pathogenesis of mitral insufficiency
A. Constant retrograde blood flow in the left atrium during left ventricular systole
B. Expansion and hypertrophy of the left ventricle
C. Congestion in the pulmonary veins
D. Decomposition of right ventricular congestion
E. All mentioned
62. Choose from these clinics of mitral insufficiency:
A. Weakness
B. Poor appetite
C. Pale skin
D. Shortness of breath
E. None of the above
63. Choose which of these mitral insufficiency clinics includes:
A. Weakness
B. Palpitations
C. Pasty legs and feet
D. All that is mentioned
E. None of the above
64. Name the most common rheumatic heart disease.
A. Mitral insufficiency
B. Coarctation of the aorta
C. Tricuspid insufficiency
D. Mitral stenosis
E. Aortic stenosis
65. Name the data of auscultation in mitral stenosis
A. The first heart sound is unusually loud
B. Second heart sound unusually loud
C. First heart sound unusually muffled
D. Second heart sound unusually muffled
E. Normal heart sounds
66. Name the data of auscultation in mitral stenosis
A. Mid-diastolic murmur
B. Midsystolic murmur
C. Midsystole-diastolic murmur
D. Blowing systolic murmur
E. Blowing diastolic murmur
67. Choose what the clinic includes for mitral stenosis
A. Butterfly rash
B. Arthralgia
C. Swelling of the ankle sacrum
D. ascites
E. All transferred
68. Name the changes in blood pressure in aortic insufficiency.
A. The maximum blood pressure decreases sharply with a high minimum
B. The minimum blood pressure drops sharply with a high maximum
C. High blood pressure in the arms and low in the legs
D. Arterial hypertension
E. Various options are possible
69. Specify what is the most typical sign of tricuspid insufficiency
A. Systolic murmur
B. Diastolic murmur
C. Loud heart sounds
D. Pulsation of the neck veins and liver
E. Peripheral edema
70. Choose cardiac catheterization in case of tricuspid insufficiency allows to identify what.
A. Defect size
B. Diagnosis
C. Presence of hypertrophy
D. High pressure in the right atrium and portal vein
E. All that is mentioned
71. Show what is the main clinical feature of early congenital cardiis?
A. Progressive left heart failure, refraction to therapy
B. Physical and psychomotor retardation
C. Tachycardia
D. Occurs under the influence of harmful factors
E. ECG high R
72. Specify one of the symptoms of acute left ventricular failure
A. Swollen neck veins
B. Skin cyanosis
C. Foamy discharge from the mouth
D. Hepatomegaly
E. Edema of the extremities
73. Specify one of the symptoms of acute left ventricular failure.
A. Oliguria
B. Expansion of the right border of the heart
C. Decreased blood pressure
D. Forced sitting position of the body
E. Edema of the extremities
74. Name one of the symptoms of acute left ventricular failure.
A. Edema of the extremities
B. Accent II tone on the pulmonary artery
C. Swelling of the jugular veins
D. Hepatomegaly
E. Weak or uncertain pulse
75. Choose the correct option. The position of the patient during fainting should be.
A. Horizontal with a low position of the legs
B. High-legged horizontal position
C. Half-sitting with head tilted to the right
D. Half-sitting with head tilted to the left
E. Raised with legs low
76. Choose what indicator for Paroxysmal tachycardia - an attack of sudden tachycardia.
A. More than 90-100 per minute
B. More than 110-130 per minute
C. More than 130-140 per minute
D. More than 150-180 per minute
E. More than 200 per minute
77. Select if ventricular tachycardia is indeed the most dangerous of cardiac arrhythmias with what real risk
A. Heart attack
B. Sudden cardiac death
C. Myocardiosclerosis
D. Heart failure
E. All transferred
78. Choose the correct option which type of tachycardia does not go away?
A. Supraventricular tachycardia
B. Ectopic atrial tachycardia
C. Restrictive tachycardia
D. Ventricular tachycardia
E. Everyone goes out
79. What percussion data are typical for congenital lobar emphysema?
A. Local dullness
B. Tympanic sound
C. Diffuse dullness
D. Bantbox sound
E. Tympanic sound
80. Select which symptoms are the main symptoms of acute bronchitis
A. sore throat
B. runny nose
C. shortness of breath
D. fever
E. cough
81. Specify what Typical auscultatory sign of acute bronchitis is:
A. weakened vesicular breathing
B. childish breath
C. local rales
D. local wheezing
E. harsh breathing
82. Choose what Bronchoscopy during remission of recurrent bronchitis reveals
A. hyperemia of the bronchial mucosa
B. atrophy of the bronchial mucosa
C. normal bronchial mucosa
D. is correct
E. granulation on the bronchial mucosa
83. Choose what is the main symptom of chronic bronchitis
A. runny nose
B. fever
C. shortness of breath
D. is correct
E. persistent cough
84. What are the criteria for chronic bronchitis
A. persistent localized rales in the lungs
B. wet cough
C. recurrent exacerbations
D. is correct
E. diffuse intermittent rales in the lungs
85. Specify what is the characteristic radiological sign in necrotizing (destructive) pneumonia during abscess formation?
A. the appearance of rounded air formations based on pulmonary infiltration
B. Parietal and sinus infiltration near pulmonary infiltration
C. homogeneous total infiltration
D. displacement of the mediastinal organs in the opposite direction
E. Appearance of high grade round infiltration with fluid level based on pulmonary infiltration
86. Choose what type of shortness of breath is characteristic of bronchial asthma?
A. inspirational
B. mixed
C. Schick
D. Kussmaul
E. expiratory
87. Indicate what changes in peripheral blood are characteristic of bronchial asthma?

- A. anemia
B. leukocytosis
C. lymphocytosis
88. Indicate what is detected by percussion during an attack of bronchial asthma?
A. expansion of the boundaries of the heart
B. clear lung sound
C. local shortening of lung sound
D. monocytois
E. eosinophilia
89. Choose the correct option. On the ECG in acute carditis:
A. PQ extension
B. PQ shortening
C. overvoltage
D. is not right
E. undervoltage
90. Choose the correct option. On the ECG in acute carditis:
A. PQ extension
B. PQ shortening
C. overvoltage
D. is correct
E. ventricular extrasystole
91. Specify how Left ventricular heart failure is characterized:
A. hepatomegaly
B. swelling of the jugular veins
C. swelling of the veins of the hands
D. swelling in the legs
E. moist rales in the lungs
92. Specify how right ventricular heart failure is characterized:
A. wet cough
B. moist rales in the lungs
C. shock 2nd tone LA
D. hemoptysis
E. swelling of the jugular veins
93. Specify how Left ventricular heart failure is characterized:
A. hepatomegaly
B. swelling of the jugular veins
C. swelling of the veins of the hands
D. Accentuated 2nd tone on the aorta
E. shock 2nd tone LA
94. Specify how the Defect of the interventricular septum is characterized:
A. Accentuated 2nd tone on the aorta
B. weakening of the 2nd aortic sound
C. soft systolic murmur over the apex
D. rough systolic murmur over the pulmonary artery
E. rough systolic murmur over the apex
95. Specify how an atrial septal defect is characterized:
A. weakening of the 2nd pulmonary artery tone
B. Accentuated 2nd tone on the aorta
C. weakening of the 2nd tone on the aorta
D. is not right
E. accentuated 2nd tone lay down
96. Specify how an atrial septal defect is characterized:
A. rough systolic murmur over the apex
B. Accentuated 2nd tone on the aorta
C. weakening of the 2nd tone on the aorta
D. rough systolic murmur over the pulmonary artery
E. soft systolic murmur over the apex
97. Specify how the patent ductus arteriosus is characterized:
A. rough systolic murmur over the apex
B. weakening of the 2nd aortic sound
C. soft systolic murmur over the apex
D. rough systolic murmur over the pulmonary artery
E. systolic-diastolic murmur on the pulmonary artery
98. Select the group of ventricular septal defects from congenital heart defects:
A. shunt on the left
B. obstruction of blood flow
C. mixing of blood in the atria
D. mixing of blood in the aorta
E. shunt right
99. Select the group of Fallot's disease with congenital heart defects:
A. right shunt
B. obstruction of blood flow
C. mixing of blood in the atria
D. mixing of blood in the pulmonary artery
E. shunt on the left
100. Specify how Fallot's disease is characterized:
A. pale skin
B. acrocyanosis
C. paratrophy
D. anemia
E. Dyspnea-hypercyanotic seizures
101. Specify how Fallot's disease is characterized:
A. pale skin
B. acrocyanosis
C. thrombocytopenia
D. anemia
E. polycythemia
102. Choose What does X-ray show in Fallot's disease?
A. Strengthening of the lung pattern
B. rosary ribs
C. reduction in the size of the heart
D. "Uzura" on the ribs
E. weakening of the lung pattern
103. What is the X-ray pattern in aortic coarctation?
A. weakening of the lung pattern
B. strengthening of the lung pattern
C. rosary ribs
D. reduction in the size of the heart
E. "Uzura" on the ribs
104. Choose the correct option. What is a radiological sign of a ventricular septal defect?
A. weakening of the lung pattern
B. rosary ribs
C. reduction in the size of the heart
D. "Uzura" on the ribs
E. increased lung pattern
105. Specify how aortic coarctation is characterized:
A. arterial hypotension
B. paresthesia in fingers
C. muscular hypotension of the upper extremities
D. is not right
E. arterial hypertension
106. Specify how aortic coarctation is characterized:
A. arterial hypotension
B. paresthesia in fingers
C. muscular hypotension of the upper extremities
D. is not right
E. paresthesias in the lower extremities
107. Choose the correct option. Which feature can cause conjunctivitis in upper respiratory infections in young children more often?
A. strengthening of the local immune response
B. Nasal duct short
C. High infection rate
D. Eye rubbing
E. Wrong bwing numbers
108. Choose the correct option. When will the development of the sinuses in children end?
A. Before birth
B. up to 1 year
C. up to 3 years
D. up to 5 years
E. up to 12 years
109. What medical term is synonymous with the word "laryngitis"?
A. Krup
B. Epiglottitis
C. Vocalite
D. Tonsillitis
E. Chondrite
110. Choose Which organs are connected by the Eustachian tube?
A. middle ear and throat
B. middle ear and larynx
C. inner ear and throat
D. inner ear and middle ear
E. outer ear and middle ear
111. Choose What is characteristic of the right main bronchus?
A. Resembles a direct continuation of the trachea
B. Seems to separate from the trachea
C. Has a specific structure
D. longer than left
E. Thinner than left
112. Specify What is characteristic of the left main bronchus?
A. Is a direct continuation of the trachea
B. Looks like it's detaching from the trachea
C. Has a specific structure
D. shorter than right
E. wider than right
113. Choose What is the typical orientation of an infant's ribs?
A. Horizontal
B. Down
C. up
D. No type orientation
E. Childish
114. What is the typical orientation of the ribs in 10 year old children?
A. Horizontal
B. Down
C. up
D. No type orientation
E. Childish
115. Indicate what is the normal ratio of Respiration HR from birth to 1 month of life:
A. 1:3
B. 1:4
C. 1:5
D. 1:2
E. 1:6
116. Specify what is the normal ratio of Respiration HR from 8 to 14 years of age:
A. 1:3
B. 1:4
C. 1:5
D. 1:2
E. 1:6

117. Choose What is the average resting respiratory rate of a newborn?
 A. 25 per minute
 B. 40-60 per minute
 C. 16-20 per minute
 D. More than 60 per minute
 E. Less than 25 per minute
118. Specify What is the average resting respiratory rate in a 5-year-old child?
 A. 25 per minute
 B. 40-60 per minute
 C. 16-20 per minute
 D. More than 60 per minute
 E. Less than 25 per minute
119. Select, description of "Hyperpnea"
 A. Increasing the depth of breathing
 B. Increasing the frequency and depth of breathing
 C. Increased respiratory rate
 D. Breathing distress
 E. Respiratory arrest
120. Specify how Kussmaul breathing is characterized by:
 A. Slow deep breathing, hyperventilation, shortness of breath and labored breathing
 B. Completely irregular breathing without a pattern
 C. Cyclical increase and decrease in the depth of breathing
 D. Chest descends on inhalation and rises on exhalation
 E. Decreased depth and irregular breathing rhyt
121. What sounds can be identified over hard areas during lung percussion?
 A. Resonant
 B. Hyperresonance
 C. Tympanic
 D. Flat
 E. The sound of a broken pot
122. Choose a description of swinging (paradoxical) breathing
 A. cyclic increase and decrease in the depth of breathing
 B. slow deep breathing, hyperventilation, shortness of breath and difficulty breathing
 C. The chest descends on inhalation and rises on exhalation
 D. completely irregular breathing without a pattern
 E. increase in the frequency and depth of breathing
123. When is a hyperresonant (ban-box) sound detected during lung percussion?
 A. Asthma
 B. Pneumonia
 C. Pleural effusions
 D. Hemothorax
 E. Hydrothorax
124. What sounds are soft, blowing, lower during auscultation of the lungs?
 A. Vesicular
 B. Bronchial
 C. Trachea
 D. Pueril
 E. Wheezing
125. What sounds are loud and high in pitch with a short pause between inhalation and exhalation during socket auscultation?
 A. Vesikar
 B. Brhial
 C. Trachea
 D. Pueril
 E. Wheezing
126. Indicate the correct variant. Auscultation of the lungs is characterized by a louder fractional inhalation and a dull phase of exhalation, blowing character
 A. Vesilar breathing
 B. Bronchial breathing
 C. Tracheal breathing
 D. Baby breath
 E. Wheezing
127. Select a group of sounds that can be identified over normal lung tissue
 A. Tracheal, bronchial, broncho-vesicular and vesicular murmurs
 B. Wheezing, bronchial, broncho-vesicular and vesicular murmurs
 C. Tracheal, bronchial, broncho-vesicular murmurs, wheezing
 D. Tracheal, bronchial, broncho-vesicular murmurs, wheezing
 E. Tracheal, bronchial, wheezing, vesicular murmurs
128. Choose the correct option. Pueril breathing during lung auscultation is typical for
 A. Pneumonia
 B. Atelectasis
 C. Healthy children under three years of age
 D. Healthy children over 3 years of age
 E. Asthma
129. Choose the correct option, Bronchial breathing during auscultation of the lung is abnormal in which places:
 A. Above the major airways
 B. Above the handle of the sternum
 C. Peripheral parts of the lung
 D. In the anterior chest wall
 E. In the posterior right interscapular space
130. What types of breath sounds are classified as "random" breath sounds?
 A. Wheezing, wheezing, pleural rub, stridor
 B. Rattling, wheezing, puerile sounds, stridor
 C. Wheezing, ban-box, pleural friction rub, stridor
 D. Rattling, wheezing, pleural friction rub, vesicular murmurs
 E. Wheezing, wheezing, pleural friction rub, tracheal murmurs
131. Indicate what it can testify to?
 A. Pneumonia
 B. Severe airway obstruction
 C. Bronchial asthma
 D. Purulent bronchitis
 E. Satisfactory condition
132. Choose the correct option. Wheezing is often associated with inflammation or infection
 A. Small bronchi, bronchioles and alveoli
 B. Large bronchi
 C. Pleural surfaces
 D. Trachea
 E. Larynx
133. Choose the correct option, What is wheezing?
 A. Intermittent, non-musical, short sounds, more often heard on inspiration
 B. Low, grinding or creaking sounds
 C. High-pitched sound heard during inhalation
 D. Continuous, high-pitched, hissing, hissing or whistling sounds
 E. Soft, blowing, lower and softer than bronchial breathing
134. Indicate what Cracks are often associated with
 A. Pneumonia
 B. Bronchitis
 C. trachetis
 D. laryngitis
 E. Pleurisy
135. Choose the correct option. Wheezing is often associated with
 A. Pneumonia
 B. Bronchitis
 C. trachetis
 D. larvngitis
 E. Pleurisy
136. Shortness of breath with a long wheezing expiration, pallor of the skin with a cyanotic tint, tension
 A. Convulsive
 B. Asthmatic
 C. Laryngospasm
 D. Hyperthermic
 E. Comatose
137. Irregular development of the upper and lower parts of the body, hypotension of the muscles of the feet, absence of pulsation in the femoral arteries, systolic murmur in the interscapular region were revealed. What pathology can be suspected in the patient?
 A. Kawasaki disease
 B. Takayasu's disease
 C. Aortic aneurysm
 D. None of this
 E. Coarctation of the aorta
138. A patient with acquired heart failure has a diastolic pressure of 0 mm Hg. What kind of heart failure does the child have?
 A. Rheumatic heart disease
 B. Aortic stenosis
 C. Mitral regurgitation
 D. Mitral stenosis
 E. Aortic insufficiency
139. Choose the correct option, Resonant percussion sound is typical for
 A. Healthy children
 B. Newborns
 C. 6 month old babies
 D. 5 years old children
 E. Only adults
140. Choose at what age Pueril breathing is auscultated in children
 A. Only up to 6 months
 B. Only up to a year
 C. 1 month to 5 years
 D. Up to 3 years
 E. After 5 years
141. Indicate At what age are diaphragmatic respiratory movements?
 A. Under 15
 B. At 1-2 years
 C. up to 6-7
 D. Up to 12-13 years old
 E. Up to 1st month
142. Choose the co... option, The right lung is divided into

- A. Upper and lower (upper and lower)
B. Front and back (front and back)
C. Upper, middle and lower (upper, middle and lower)
143. Specify rights. Indicate the correct option. What is shortness of breath?
A. Increased respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Upper (upper) and middle
E. Front, middle and back (front, middle and back)
144. Choose the correct option. What is hyperpnea?
A. Increased respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Respiratory arrest
E. Increasing the depth of breathing
145. Answer. What type of respiratory movements does a girl 7 years older have?
A. Thoracic region
B. Abdominal
C. Costal
D. Strictly
E. Diaphragmatic
146. Choose the correct option. The left lung is divided into
A. Front and back (front and back)
B. Upper, middle and lower (upper, middle and lower)
C. Upper and lower (upper and lower)
D. Upper (upper) and middle
E. Front, middle and back (front, middle and back)
147. Choose the correct option. What is tachypnea?
A. Increase in respiratory rate
B. Breathing distress
C. Decreased respiratory rate
D. Respiratory arrest
E. Increasing the depth of breathing
148. Specify the average respiratory rate in children aged 12
A. 20 per minute
B. 30 per minute
C. 16-20 per minute
D. 35-40 per minute
E. 30-35 per minute
149. Choose the correct option. What is bradypnea?
A. Increased respiratory rate
B. Breathing distress
C. Decrease in respiratory rate
D. Respiratory arrest
E. Reducing the depth of breathing
150. What is the usual ratio of breaths and heartbeats?
A. 1:1
B. 1:2
C. 1:3
D. 1:4
E. 1
151. Choose the correct option. What is hypoventilation?
A. Decreased respiratory rate and irregular rhythm
B. Breathing distress
C. Increasing depth of breathing irregular rhythm
D. Respiratory arrest
E. Decreased depth of breathing and irregular rhythm
152. Choose the average respiratory rate of a newborn
A. 20 per minute
B. 30 per minute
C. 16-20 per minute
D. 35-40 per minute
E. 30-35 per minute
153. Choose the correct option. What is hyperventilation?
A. Rapid breathing and irregular rhythm
B. Breathing distress
C. Increase in the frequency and depth of breathing
D. Respiratory arrest
E. Decreased depth of breathing and irregular rhythm
154. Select when Tympanic resonance over the lungs is determined
A. Pulmonary edema
B. Tumors
C. Bifurcation lymphadenitis
D. Obstruction of a large bronchus
E. Obesity
155. Select when Pathological dullness is heard on percussion of the lungs:
A. Asthmatic bronchitis
B. Lung abscess
C. Large infiltrate in pneumonia
D. Pneumothorax
E. Emphysema
156. Choose the correct option. The average respiratory rate in children 5 years old
A. 20 per minute
B. 30 per minute
C. 16-20 per minute
D. 35-40 per minute
E. 25 per minute
157. Choose the correct option. What is the rhythm of breathing in newborns?
A. Arrhythmic breathing
B. Breathing distress
C. Reduced BR by 10% or more
D. Respiratory arrest
E. Reducing the depth of breathing
158. Select when expiratory dyspnea occurs
A. Respiratory failure grade 3
B. Diabetic coma
C. Viral croup syndrome
D. Foreign body aspiration
E. Bronchial asthma
159. Indicate the correct option. Barking cough is typical for
A. Dry pleurisy
B. Pleurisy with effusion
C. Laryngitis
D. Pneumothorax
E. Tuberculosis
160. Choose the correct option. The nature of the cough cannot be
A. Dry
B. Wet
C. Pituitary gland
D. Bitonal
E. Spastic
161. Choose the correct variant. Crepitus is characterized by
A. Appears when pressing on the chest with a phonendoscope
B. Determined by percussion
C. Does not change when the body is bent
D. Determined by palpation
E. Depends on the density of attachment to the chest during phonendoscopy
162. Indicate when a crack is heard
A. During inhalation and exhalation
B. In the 1st phase of inspiration
C. In the 1st phase of exhalation
D. In the last phase of inspiration
E. In the last phase of exhalation
163. Choose the correct option. Crepitus is a symptom
A. Major pneumonia
B. Acute bronchitis
C. Dry pleurisy
D. Chronic bronchitis
E. Emphysema
164. Choose what color can be observed when examining a patient with severe respiratory failure?
A. Pale skin
B. Hyperemia
C. Diffuse cyanosis
D. Yellow color
E. Spider angiomas
165. Specify what typical skin changes in a patient with respiratory failure
A. Pink skin
B. Hyperemia
C. Cyanosis
D. Jaundice
E. Gray color
166. Choose the correct option. Harsh breathing indicates
A. Bronchitis
B. Dry pleurisy
C. Pleurisy with effusion
D. Emphysema
E. Pneumonia
167. Indicate where Pulmonary root is not included
A. Large bronchi
B. Vessels
C. Tracheobronchial lymph nodes
D. Broncho-pulmonary lymph nodes
E. Thymus gland
168. Choose the correct option. In what disease is crepitus diffuse?
A. Acute bronchiolitis
B. Pneumonia
C. Bronchiectasis
D. Local fibrosis of lung tissue
E. Chronic bronchiolitis with obliteration
169. Choose the disease in which crepitus is local?
A. pneumonia
B. Bronchitis
C. Bronchial asthma
D. Alveolitis
E. Acute bronchiolitis
170. Choose what is leading in the diagnosis of a foreign body in the respiratory tract?
A. Airway Endoscopy
B. Overview
C. Percussion and auscultation
D. Chest x-ray
E. Strip tomography
171. Choose the correct option. First aid for nosebleeds

- A. Ask the child to blow his nose,
B. Insert a swab with 3% hydrogen peroxide into the nose and ice on the bridge of the nose.
C. Oxygen therapy.
172. Choose Which tests do we use for bronchitis?
A. Complete blood count
B. Sputum culture.
C. Culture of alveolar fluid.
D. Biochemical blood test (hyponatremia, hypokalemia)
E. X-ray of the chest.
173. Indicate what childhood infectious disease is characterized by attacks of spasmodic cough accompanied by reprints?
A. Whooping cough
B. measles
C. diphtheria
D. scarlet fever
E. Red rash
174. Choose the correct option. The most informative method for diagnosing pneumonia is:
A. Radiography
B. Tomography
C. Bronchography
D. Bronchoscopy
E. Fluorography
175. Select what refers to the clinical manifestations of acute stenotic laryngitis.
A. Rough "barking" cough
B. Dullness of percussion sound
C. Having difficulty exhaling
D. Moist rales in the lungs
E. Emphysema
176. Specify. Dry barking cough is typical for:
A. Laryngitis
B. Bronchitis
C. Influenza
D. Pneumonia
E. Bronchiectasis pneumosiderosis.
177. Choose the correct option. Clear percussion sound is typical for:
A. Healthy children
B. Newborns
C. 6 month old babies
D. 5 years old children
E. Adults.
178. Choose the correct option. How many stages of respiratory stenosis?
A. 1
B. 2
C. 4
D. 3
E. 5
179. A 9-month-old child with cough, shortness of breath, subfebrile body temperature was examined by a local pediatrician. Focal bronchopneumonia was suspected. What auscultation picture is typical for this case?
A. Diffuse dry rales
B. Rough breathing
C. Diffuse moist rales
D. Reduce breathing
E. Local rales
180. The child is 7 years old. He's had the flu for 5 days now. The child's condition deteriorated sharply. Body temperature rose again, appeared wet cough with mucopurulent sputum, shortness of breath. Respiration - 30 per 1 min, cyanosis of the perioral triangle, in the lower parts of the lungs, more on the right, dullness of the lung sound, moist fine rales. Pulse - 120 per 1 minute, heart sounds are weakened. What complication of flu is possible?
A. Croup syndrome
B. Pneumonia
C. meningitis
D. Myocarditis
E. Obstructive bronchitis
181. A 7-year-old child has been sick with measles for 10 days. Complains of an increase in body temperature up to 39°C, general weakness, periodic wet cough with mucous sputum. Objectively, the general condition is moderate, the skin is pale, with pigmented rashes. Auscultatory - muffled sound, small rales in the lower parts of the lungs. What complication of measles arose in the child?
A. Tracheobronchitis
B. Bronchitis
C. bronchiolitis
D. Pneumonia
E. Pharyngitis
182. A 2-year-old child has a dry cough, shortness of breath, body temperature 37.5°C. Percussion: clear pulmonary sound without dullness. Auscultatory: dry whistling and various moist rales. In peripheral blood leukocytosis, eosinophilia, increased ESR. What disease is possible?
A. Acute simple bronchitis
B. Obstructive bronchitis
C. whooping cough
D. Acute pneumonia
E. Bronchial asthma
183. A 2-year-old child has a dry cough, shortness of breath, body temperature 37.5°C. Percutere: tympanic sounds. Auscultatory: breathing is rough, dry, wheezing, wet rales of various sizes. In peripheral blood leukocytosis, eosinophilia, increased ESR. What disease is possible?
A. Acute simple bronchitis
B. Obstructive bronchitis
C. whooping cough
D. Acute pneumonia
E. Bronchial asthma
184. A 2-year-old child was called to the pediatrician due to subfebrile fever, rhinitis and dry cough. The child is sick for the 3rd day. Percussion: clear pulmonary sound. Auscultatory: breathing is rough. According to the results of the examination: leukopenia, lymphocytosis, accelerated ESR. What disease is possible in the first place?
A. Acute obstructive bronchitis
B. Acute tracheitis
C. Acute bronchopneumonia
D. Recurrent bronchitis
E. Acute bronchitis
185. A 10-month-old child was admitted to the clinic in severe. A 10-month-old child was admitted to the clinic in a serious condition with expiratory dyspnea, dry cough, and a temperature of 38°C. On percussion over the lungs, there is a tympanic sound. Auscultation reveals an elongated expiration, many dry rales and rare wet rales on both sides. What is your diagnosis?
A. Bronchial asthma
B. Pneumonia
C. Acute obstructive bronchitis
D. whooping cough
E. Acute bronchitis
186. A 10-month-old girl was admitted to the clinic on the next day of illness with complaints of fever up to 39°C, dry, barking cough. After a clinical examination, the diagnosis of acute laryngitis was established. What respiratory disorder is typical for this situation?
A. Mixed shortness of breath
B. Expiratory dyspnea
C. Hoarse breathing
D. Inspiratory dyspnea
E. Stridor breathing
187. A 5-year-old child was hospitalized with complaints of a wet cough. Ill for 3 years, before that he suffered left-sided lower lobe pneumonia three times. On examination: pale skin, perioral and periorbital cyanosis. On percussion: local dullness below the lower angle of the left shoulder blade. On auscultation: many small moist rales under the left shoulder blade. X-ray of the chest: deformation of the bronchial pattern on the left. Which of the following would confirm the diagnosis?
A. Biplanar (two-dimensional) chest x-ray
B. Ultrasound of the chest organs
C. Chest CT
D. Bronchoscopy or bronchography
E. Spirography
188. A district pediatrician examined a 9-year-old child who was troubled by a wet cough and shortness of breath during physical exertion. The child has been sick for 6 years, frequent respiratory diseases, 1-2 times a year - pneumonia. After analyzing the anamnesis and clinical examination, a chronic lung disease was diagnosed. What is the most characteristic symptom of this disease?
A. Shortness of breath
B. Perioral cyanosis
C. Pale skin
D. Persistent cough
E. Subfebrile temperature
189. A 10-year-old child often suffers from bronchitis. Physical development is delayed. Persistent cough with mucopurulent sputum. The doctor suspected bronchiectasis. Choose the main method for diagnosing bronchiectasis.
A. Bronchography
B. Bronchoscopy
C. Chest CT
D. Chest x-ray
E. Scintigraphy
190. A 12-year-old boy, suffering from mitral stenosis, after playing basketball has quickened breathing, lack of air, seizures and shortness of breath, blisters on the lips. In the lungs (posterior basal sections) small bubbling wet rales. The most likely cause of the deterioration of the child's condition is associated with:
A. Acute vascular insufficiency
B. Heart failure
C. Heart failure of the left type
D. Acute respiratory failure
E. Acute right ventricular failure
191. A 1-month-old girl was admitted to the intensive care unit with severe cyanosis, congestive heart failure, a normal first tone, a single second tone, and a slight systolic ejection murmur once or twice. The electrocardiogram shows right axis deviation and right ventricular hypertrophy. A chest x-ray shows cardiomegaly with a narrow base and full-blooded lung fields. What is the most likely diagnosis?
A. Congenital heart disease, shunting of blood from right to left
B. Congenital heart disease, shunting of blood from left to right
C. Pneumonia
D. Congenital malformation of the lungs
E. Bronchiolitis
192. The girl is 3 years old. She was admitted to the hospital with complaints from her parents about poor walking. There is an excessive development of the shoulder muscles, poorly developed lower limbs, muscle hypotension. The boundaries of relative cardiac dullness are extended to the left by 2 cm. Systolic murmur

in the II intercostal space to the right of the sternum. Blood pressure on the arms - 100/70, on the legs - 40/20

What diagnosis can be suspected?

- A. Coarctation of the aorta
- B. Ventricular septal defect
- C. Atrial septal defect
- D. Tetralogy of Fallot
- E. myocarditis

193. A child is 3 months old. He is hospitalized to determine the cause of the heart murmur. Complaints of parents: low weight gain, bouts of shortness of breath and cyanosis, which are aggravated by physical exertion. Systolic murmur in the 3rd intercostal space on the left, systolic murmur under the 2nd intercostal space to the right of the sternum, right ventricular hypertrophy. What diagnosis should be suspected?

- A. Tetralogy of Fallot
- B. infective endocarditis
- C. Ventricular septal defect
- D. hypertrophic cardiomyopathy
- E. atrial septal defect

194. The boy is 3 years old. Complaints: shortness of breath, fatigue, frequent episodes of respiratory diseases in history. The boundaries of relative dullness of the heart are expanded to the left, increased heart sound II in the II intercostal space on the left, hard systole-diastolic murmur in the II intercostal space on the left and above the clavicle ("machine noise"), which is carried out along the interscapular space. What is the most likely diagnosis?

- A. patent ductus arteriosus
- B. aortic stenosis
- C. Atrial septal defect
- D. ventricular septal defect
- E. Isolated pulmonary stenosis

195. Choose the appropriate time of fetal period

- a) till 28th week of intrauterine development
- b) till 75th day of intrauterine development
- c) till 10th day of the intrauterine development
- d) till 20th week of pre-natal development
- e) b and c

196. Indicate the size chest of newborn baby

- a) 40-45
- b) 32-34
- c) 28-30
- d) 20-25
- e) 22-25

197. Select the average head circumference (cm) of newborn baby.

- a) 40-45
- b) 28-30
- c) 34-36
- d) 20-25
- e) 45-55

198. Determine the age when the physiological muscular hypertonus must disappear in extremities.

- a) 1 month
- b) 2-2.5 months
- c) in 3-4 months
- d) in 5 months
- e) 5-6 months

199. Indicate the main excretory organ of fetus in intrauterine period

- a) skin
- b) mucous membranes of respiratory tract
- c) placenta
- d) kidney
- e) b and c

200. Choose the newborn heart rate averages

- a) 80-180beats/min
- b) 90-280beats/min
- c) 60-180beats/min
- d) 120-160beats/min
- e) 100-200 beats/min

201. Choose correct option. What is the pre-ductal SpO₂ target at 1 minute

- a) 30-50%
- b) 60-65%
- c) 70-85%
- d) 95-100%
- e) 10-20%

202. Choose correct option. Mongolian spots can be disappear at age of

- a) at 3 years
- b) at 2 years
- c) 4-5 years
- d) 7-9 years
- e) 1-2 years

203. Specify the time of disappearance Babkin's reflex.

- a) 1 month
- b) 3 month
- c) 2 years
- d) 12 months
- e) 3 month

204. Find out the following reflexes is a spinal automatism

- a) Sucking
- b) Babkin's reflex

c) Moro's reflex

b) Upper Landau's

a) Extrusion

205. Define the age should an infant localize sound by turning the head in a curving arch.

- a) 3 months
- b) 1 month
- c) 7 months
- d) 2 months
- e) 5 months

206. Cheyne-Stokes respiration is:

- a) Superficial respiration
- b) Respiration with apnea episodes
- c) Gradual increase in depth and frequency of respiration, then a decrease until apnoe, then the same cycle
- d) Deep, rare, loud respiration
- e) loud respiration

207. Kussmaul respiration is:

- A. Deep, frequent, and loud
- B. Deep, rare, irregular
- C. Deep, rare, loud respiration
- D. Deep, frequent, irregular
- E. loud respiration

208. Define the platypnea.

- A. Rare and deep respiration through an open mouth
- B. Similar to Cheyne-Stokes but with longer pauses
- C. Dyspnea that is relieved when lying down, and worsens when sitting or standing up
- D. Dyspnea that is relieved when lying on the painful side
- E. Deep respiration through an open mouth

209. Digital (finger) clubbing is seen case of

- A. Bronchial asthma attack
- B. Bronchiectatic disease
- C. Lobar pneumonia
- D. Acute bronchitis
- E. Dry pleurisy

210. Unilateral chest deflation suggests

- A. Lung infiltrate
- B. Bronchial asthma
- C. Lung emphysema
- D. Chronic bronchitis
- E. Complete atelectasis

211. Percussion dullness usually is heard over

- A. Lung emphysema
- B. Lung cavity
- C. Closed pneumothorax
- D. Compression atelectasis
- E. Acute bronchitis

212. "Band-box tympanitis" is heard in case of

- A. Lung cavity
- B. Pleural effusion
- C. Valvular pneumothorax
- D. Lung emphysema
- E. Complete obturation atelectasis

213. The sound over the airless area is

- A. Low-pitched, soft, short
- B. Low-pitched, loud, prolonged
- C. High-pitched, soft, short
- D. High-pitched, loud, short
- E. High-pitched, soft, prolonged

214. Define the sound is heard in case of pneumothorax.

- A. Lung sound
- B. Dullness
- C. Dulness with tympanic accent
- D. Tympanic sound
- E. «Bandbox» sound

215. Bronchophony is decreased in case of

- A. Lung infiltrate
- B. Hydropneumothorax
- C. Lung cavity
- D. Incomplete atelectasis
- E. B and C

216. Eosinophils are revealed in sputum by

- A. Microscopy of a native smear

- B. Microscopy of a smear stained with fuchsin and methylene blue
 C. Microscopy of a smear stained by Romanovsky or Leishman
 D. Microscopy of a smear stained by Gram
 E. Microscopy of a smear stained by Ziehl-Neelsen
217. Eosinophiles in sputum are found in case of
 A. Chronic bronchitis
 B. Acute bronchitis
 C. Bronchial asthma
 D. Pneumonia
 E. Lung TBC
218. In peripheral cyanosis does not apply a) to be conditional stagnation hypoxia, b) does not affect the carotides, c) there is an increase in loss of oxygen at slow capillary flow, d) the amount of reduced hb does not exceed 50 g/l of blood, e) occurs in a cardiopathy
 A. a + b + c
 B. b + d
 C. applies to all the possibilities offered
 D. a + c + e
 E. b + d + e
219. According to the rules adopted by WHO, every product of conception born with a body weight of more than _____ is considered a child
 A) 500g
 B) 1000g
 C) 1500g
 D) 2000g
 E) 300
220. Postconceptional age includes
 A) only gestational age
 B) only chronological (calendar) age
 C) differences in chronological age and gestational age
 D) the sum of gestational and chronological (calendar) ages
 E) biological age
221. Early childhood period lasts from
 A) the 1 year to the 5 years
 B) the 1 year to the 3 years
 C) the 2 years to the 5 years
 D) the day of birth to the 3 years
 E) the day of birth to the 5 years
222. Preschool period lasts from
 A) the 3 years to the 12 years
 B) the 2 years to the 5 years
 C) the day of birth to the 5 years
 D) the 3 years to the 6 years
 E) the day of birth to the 7 years
223. Primary school age period lasts from
 A) the 5 years to the 12 years
 B) the 5 years to the 15 years
 C) the day of birth to the 11 years
 D) the day of birth to the 12 years
 E) the 7 years to the 11 years
224. High school period lasts from
 A) the 12 years to the 18 years
 B) the 10 years to the 18 years
 C) the 7 years to the 15 years
 D) the 7 years to the 11 years
 E) the 7 years to the 18 years
225. A full-term birth is at the _____ week of gestation
 A) 38-41st
 B) 35-41st
 C) 38-45st
 D) 28-38st
 E) 28-41st
226. A premature birth is a birth occurring before
 A) 38th week of gestation
 B) 37th week of gestation
 C) 40th week of gestation
 D) 41th week of gestation
 E) 42th week of gestation
227. Factors influence the physical development of a child are
 A) food, ecology, education
 B) climatic factors, heredity, genetic factors, education
 C) food, ecology, sleep and wake mode
 D) food, genetic factors, education
 E) heredity, genetic factors, education
228. The total increase in body length for the first year is
 A) 35 cm
 B) 30 cm
 C) 25 cm
 D) 15 cm
 E) 10 cm
229. The average monthly weight gain during the first half of the year is
 A) 1000 g
 B) 600 g
 C) 800 g
 D) 300 g
 E) 200 g
230. The body weight of a full-term newborn on average ranges
 A) from 2000 to 3200 g
 B) from 3000 to 5000 g
 C) from 2600 to 4200 g
 D) from 2400 to 4400 g
 E) from 2300 to 3300 g
231. The most informative indicator of the biological age is
 A) body mass
 B) BMI
 C) chronological age
 D) the degree of skeleton ossification
 E) body length
232. Average physical development is recorded with a Z-score
 A) from -2 to +2
 B) from -1 to +2
 C) from -2 to +1
 D) from -1 to +1
 E) only 0
233. Low physical development is registered with a Z-score
 A) from -2 to -3
 B) from 0 to -2
 C) from -1 to -3
 D) only 0
 E) from -1 to -2
234. High physical development is registered with a Z-score
 A) from +2 to +3
 B) from -1 to +1
 C) from -1 to +3
 D) from 0 to +3
 E) only 0
235. Body mass index (BMI) formula is
 A) $BMI = \frac{\text{weight (kg)}}{\text{height}^2 (\text{cm}^2)}$
 B) $BMI = \frac{\text{weight (kg)}}{\text{height}^2 (\text{m}^2)}$
 C) $BMI = \frac{\text{weight (kg)}}{\text{height (m)}}$
 D) $BMI = \frac{\text{height}^2 (\text{m}^2)}{\text{weight (kg)}}$
 E) $BMI = \frac{\text{height}^2 (\text{cm}^2)}{\text{weight (g)}}$
236. A uniform deviation of body weight and height from age norms is
 A) Hypotrophy
 B) Paratropy
 C) Obesity
 D) Normal physical development
 E) Hypostatura
237. The neural tube is formed at the _____ week of embryonic development
 A) 5th
 B) 7th
 C) 1rd
 D) 3rd
 E) 8th
238. Abnormalities of the neural tube development include
 A) Dolichocephaly
 B) Brachycephaly
 C) Plagiocephaly
 D) Anencephaly
 E) Craniospina
239. Abnormalities of the neural tube development include
 A) Dolichocephaly
 B) Hydrocephalus
 C) Brachycephaly
 D) Plagiocephaly
 E) Craniospina
240. Myelination of nerves is completed by
 A) 5-10 years
 B) 1-2 years
 C) 3-5 years
 D) 1-5 years
 E) 6-12 months
241. By the time of the child's birth, _____ is most developed
 A) the midbrain
 B) the hypothalamus
 C) the cerebellum
 D) the diencephalon
 E) the cortex
242. By the time of the child's birth, _____ is most developed
 A) the midbrain
 B) the medulla oblongata
 C) the cerebellum
 D) the diencephalon
 E) the cortex
243. By the time of the child's birth, _____ is most developed
 A) the midbrain
 B) the spinal cord
 C) the cerebellum
 D) the diencephalon
 E) the cortex
244. The spinal cord in 6 years child ends at the level of
 A) L1
 B) LIII

- C) LV
D) ThXII
245. The spinal cord in a newborn ends at the level of
A) LIII
B) LI
C) LV
D) ThXII
E) LIV
246. Superficial reflexes from the skin and mucous membranes are
A) corneal reflex and tendon reflex
B) Babinsky reflex and tendon reflex
C) corneal reflex and conjunctival reflex
D) conjunctival reflex and Babinsky reflex
E) corneal reflex and Babinsky reflex
247. Superficial reflexes from the skin and mucous membranes are
A) corneal reflex and tendon reflex
B) Babinsky reflex and tendon reflex
C) swallowing reflex and conjunctival reflex
D) conjunctival reflex and Babinsky reflex
E) corneal reflex and Babinsky reflex
248. Primitive reflexes of newborns are
A) sucking reflex and rooting reflex
B) Babinsky reflex and tendon reflex
C) Palm-oral reflex and corneal reflex
D) Moro reflex and conjunctival reflex
E) sucking reflex and conjunctival reflex
249. The palm-oral reflex (Babkin) persists until the age of
A) 12 months
B) 1 month
C) 6 months
D) 3 months
E) 8 months
250. The grasping reflex persists until the age of
A) 12 months
B) 1 month
C) 6 months
D) 8 months
E) 4 months
251. The Bauer's crawling reflex persists until the age of
A) 12 months
B) 1 month
C) 6 months
D) 4 months
E) 8 months
252. The automatic gait reflex persists until the age of
A) 4 months
B) 12 months
C) 6 months
D) 1 month
E) 8 months
253. The child begins to hold his head at the age of
A) 4 months
B) 1 month
C) 2 months
D) 6 months
E) 8 months
254. The child can sit independently at the age of
A) 12 months
B) 6 months
C) 4 months
D) 2 months
E) 8 months
255. The child can stand at the support at the age of
A) 8 months
B) 12 months
C) 6 months
D) 4 months
E) 10 months
256. The child can walk independently at the age of
A) 12 months
B) 8 months
C) 6 months
D) 4 months
E) 10 months
257. A child can speak 2-4 simple words at the age of
A) 12 months
B) 8 months
C) 6 months
D) 4 months
E) 10 months
258. The duration of a child's sleep at the age of 1 month is
A) 18-16 hours
B) 10-12 hours
C) 8-10 hours
D) 23-24 hours
E) 22-23 hours
259. The duration of a child's sleep at the age of 1-3 years is
A) 8-10 hours
B) 16-18 hours
C) 20-22 hours
D) 10-16 hours
E) 18-20 hours
260. Complaints in the pathology of the nervous system are
A) cough with copious sputum, headaches, runny nose
B) headaches, sore throat, changes in muscle tone
C) headaches, runny nose, cough with copious sputum
D) headaches, impaired consciousness, changes in muscle tone
E) cough with copious sputum, changes in muscle tone, runny nose
261. The relatively long and narrow shape of the human head is called
A) Hydrocephalus
B) Dolichocephaly
C) Brachycephaly
D) Plagiocephaly
E) Anencephalus
262. The relatively short and wide shape of a person's head, approaching a rounded one, is called
A) Dolichocephaly
B) Brachycephaly
C) Hydrocephalus
D) Plagiocephaly
E) Anencephalus
263. The asymmetry of the human skull is called
A) Brachycephaly
B) Dolichocephaly
C) Hydrocephalus
D) Plagiocephaly
E) Anencephalus
264. The small volume of the human skull is called
A) Brachycephaly
B) Microcephaly
C) Dolichocephaly
D) Hydrocephalus
E) Plagiocephaly
265. A large volume of the human skull is called
A) Brachycephaly
B) Dolichocephaly
C) Hydrocephalus
D) Plagiocephaly
E) Macrocephaly
266. The size of a large fontanel in a newborn baby is
A) 16-18mm
B) 5-8mm
C) 40-50mm
D) 10-15mm
E) 26-28mm
267. The size of a large fontanel of a child of 5-6 months of age is
A) 26-28mm
B) 16-18mm
C) 5-8mm
D) 40-50mm
E) 10-15mm
268. The size of the large fontanel of an 11-month-old child is
A) 26-28mm
B) 5-8mm
C) 16-18mm
D) 40-50mm
E) 10-15mm
269. The child's large fontanel closes by the age of
A) 10-12 months
B) 6-7 months
C) 2-3 years
D) 12-18 months
E) 8-10 months
270. The increased distance between the inner corners of the eyes and the pupils is called
A) hypotelorism
B) coloboma
C) hypertelorism
D) macrotia
E) microtia
271. The reduced distance between the inner corners of the eyes and the pupils is called
A) hypertelorism
B) coloboma
C) macrotia
D) hypotelorism
E) microtia
272. The coloboma is a hole in the iris
A) a reduced distance between the inner corners of the eyes and the pupils
B) a hole in the iris
C) an increased distance between the inner corners of the eyes and the pupils
D) a large volume of the human skull
E) absence of the iris
273. The fusion of cranial nerves is called

- A) olfactory nerve
B) optic nerve
C) oculomotor nerve
- 274 The second pair of cranial nerves is called
A) olfactory nerve
B) oculomotor nerve
C) facial nerve
- 275 The seventh pair of cranial nerves is called
A) optic nerve
B) olfactory nerve
C) oculomotor nerve
- 276 The 12th pair of cranial nerves is called
A) hyoid nerve
B) optic nerve
C) olfactory nerve
- 277 The absence of one or more reflexes is called
A) areflexia
B) hyporeflexia
C) hyperreflexia
- 278 The reduction of one or more reflexes is called
A) areflexia
B) hyperreflexia
C) hyporeflexia
- 279 Raising one or more reflexes is called
A) areflexia
B) hyporeflexia
C) hyperreflexia
- 280 The asymmetry of reflexes from different sides is called
A) areflexia
B) hyporeflexia
C) hyperreflexia
- 281 Reduced sensitivity to stimuli is called
A) hyperesthesia
B) anesthesia
C) hypoesthesia
- 282 The lack of sensitivity to stimuli is called
A) hypoesthesia
B) hyperesthesia
C) paresthesia
- 283 The appearance of unpleasant sensations in the absence of an irritant is called
A) anesthesia
B) hypoesthesia
C) paresthesia
- 284 The rhythmic stereotypic movements of different parts of the body are called
A) tics
B) tremor
C) athetosis
- 285 Fast clonic irregular stereotypical movements are called
A) tremor
B) athetosis
C) hyperkinesis
- 286 The meningeal symptom is
A) symptom of "drumsticks"
B) upper Brudzinsky symptom
C) Claw Symptom
D) obstructive symptom
E) symptom of hydrocephalus
- 287 The methods of studying the nervous system do not include
A) electroencephalography
B) rheoencephalography
C) polysomnography
D) neurosonography
E) pulse oximetry
- D) facial nerve
E) accessory nerve
- D) accessory nerve
E) optic nerve
- D) accessory nerve
E) facial nerve
- D) oculomotor nerve
E) accessory nerve
- D) anisoreflexia
E) normoreflexia
- D) anisoreflexia
E) normoreflexia
- D) anisoreflexia
E) normoreflexia
- D) anisoreflexia
E) normoreflexia
- D) anisoreflexia
E) normoreflexia
- D) paresthesia
E) normesthesia
- D) anesthesia
E) normesthesia
- D) hyperkinesis
E) hyporeflexia
- D) tics
E) hyperreflexia
- D) hyperesthesia
E) normesthesia
- 288 Neurosonography (NSG) is
A) a study of cerebral hemodynamics
B) an ultrasonic research method, carried out in the presence of an unclosed fontanelle on the cranial vault in newborns and infants
C) registration of the bioelectrical activity of the brain
D) a X-ray method
E) a MRI method
- 289 Electroencephalography (EEG) is
A) a registration of the bioelectrical activity of the brain
B) an ultrasonic research method, carried out in the presence of an unclosed fontanelle on the cranial vault in newborns and infants
C) a study of cerebral hemodynamics
D) a X-ray method
E) a MRI method
- 290 Rheoencephalography is
A) a registration of the bioelectrical activity of the brain
B) a study of cerebral hemodynamics
C) an ultrasonic research method, carried out in the presence of an unclosed fontanelle on the cranial vault in newborns and infants
D) a recording of various physiological parameters during sleep
E) a MRI method
- 291 Polysomnography is
A) a study of cerebral hemodynamics
B) a registration of the bioelectrical activity of the brain
C) an ultrasonic research method, carried out in the presence of an unclosed fontanelle on the cranial vault in newborns and infants
D) a MRI method
E) a recording of various physiological parameters during sleep
- 292 The syndromes of damage to the nervous system do not include
A) croup syndrome
B) meningeal syndrome
C) hydrocephalus syndrome
D) convulsive syndrome
E) microcephaly syndrome
- 293 The cerebral symptoms of Meningeal syndrome include
A) fever, changes in the cerebrospinal fluid
B) the upper Brudzinsky symptom, Kernig's symptom
C) Kernig's symptom, headache
D) fever, headache, vomiting
E) the upper Brudzinsky symptom, changes in the cerebrospinal fluid
- 294 The meningeal signs of Meningeal syndrome include
A) the upper Brudzinsky symptom, Kernig's symptom
B) fever, headache, vomiting
C) fever, changes in the cerebrospinal fluid
D) Kernig's symptom, headache
E) the upper Brudzinsky symptom, changes in the cerebrospinal fluid
- 295 Clonic seizures are
A) prolonged muscle contractions
B) the appearance of unpleasant sensations in the absence of an irritant
C) muscle contractions that change rapidly at short, irregular intervals
D) the rhythmic stereotypic movements of different parts of the body
E) the rhythmic non-stereotypic movements of different parts of the body
- 296 Tonic seizures are
A) prolonged muscle contractions
B) muscle contractions that change rapidly at short, irregular intervals
C) the appearance of unpleasant sensations in the absence of an irritant
D) the rhythmic stereotypic movements of different parts of the body
E) the rhythmic non-stereotypic movements of different parts of the body
- 297 Febrile seizures are
A) prolonged muscle contractions
B) generalized or local tonic-clonic convulsions at a body temperature of more than 38°C
C) muscle contractions that change rapidly at short, irregular intervals
D) the rhythmic stereotypic movements of different parts of the body

- E) the rhythmic stereotypic movements of different parts of the body
- 298 Hypertension-hydrocephalic syndrome include
 A) hyperexcitability, irritability, a piercing cry, body temperature of more than 38 °C
 B) horizontal nystagmus, exophthalmos, fever, headache
 C) the upper Brudzinsky symptom, Kernig's symptom
 D) hyperexcitability, horizontal nystagmus, a symptom of Graefe ("setting sun"), exophthalmos
 E) a symptom of Graefe ("setting sun"), the upper Brudzinsky symptom, Kernig's symptom
- 299 Hypertension-hydrocephalic syndrome include
 A) hyperexcitability, irritability, a piercing cry, body temperature of more than 38 °C
 B) horizontal nystagmus, exophthalmos, fever, headache
 C) a piercing cry, a symptom of Graefe ("setting sun"), converging strabismus, horizontal nystagmus, exophthalmos
 D) the upper Brudzinsky symptom, Kernig's symptom
 E) a symptom of Graefe ("setting sun"), the upper Brudzinsky symptom, Kernig's symptom
- 300 The skin consists of
 A) Dermis, Stratum lucidum, Stratum granulosum
 B) Subcutaneous tissue, Stratum basale, Stratum granulosum
 C) Epidermis, Stratum corneum, Stratum lucidum
 D) Epidermis, Dermis, Subcutaneous tissue
 E) Subcutaneous tissue, Stratum lucidum, Stratum granulosum
- 301 Feature of the skin in children is
 A) the epidermis is 3-4 times thicker than in an adult
 B) the epidermis is 3-4 times thinner than in an adult
 C) good basement membrane development
 D) low water content and poor blood supply
 E) good water content and poor blood supply
- 302 Feature of the skin in children is
 A) the epidermis is 3-4 times thicker than in an adult
 B) low water content and poor blood supply
 C) collagen fibers are thick
 D) poor basement membrane development
 E) good water content and poor blood supply
- 303 Feature of the skin in children is
 A) good basement membrane development
 B) low water content and poor blood supply
 C) elastic fibers are poorly developed
 D) collagen fibers are thick
 E) good water content and poor blood supply
- 304 Feature of the skin in children is
 A) good basement membrane development
 B) elastic fibers are better developed
 C) collagen fibers are thick
 D) good water content and poor blood supply
 E) high water content and abundant blood supply
- 305 A whitish-yellow benign superficial horny cyst on the forehead, eyelids and face of an infant is called
 A) lanugo
 B) papule
 C) vesicula
 D) milia
 E) macula
- 306 The main function of brown adipose tissue is
 A) excretory
 B) non-contractile thermogenesis
 C) resorption
 D) bactericidal
 E) respiratory
- 307 Function of subcutaneous fat is
 A) excretory
 B) resorption
 C) bactericidal
 D) mechanical protection
 E) respiratory
- 308 Function of subcutaneous fat is
 A) hormonal
 B) excretory
 C) resorption
 D) bactericidal
 E) respiratory
- 309 Function of the skin is
 A) thermogenesis
 B) depot
 C) protective
 D) hormonal
 E) non-contractile thermogenesis
- 310 Function of the skin is
 A) thermogenesis
 B) depot
 C) hormonal
 D) non-contractile thermogenesis
 E) bactericidal
- 311 Examination of the skin is carried out in the following order
 A) anus, limbs, palms, skin of the scalp, neck, then the trunk, natural folds and soles
 B) skin of the scalp, neck, then the trunk, natural folds, limbs, palms, soles and anus
 C) skin of the scalp, anus, limbs, palms, neck, natural folds and soles, then the trunk
 D) limbs, skin of the scalp, then the trunk, palms, neck, natural folds, anus and soles
 E) skin of the scalp, limbs, palms, neck, then the trunk, anus, natural folds and soles
- 312 Skin elasticity is examined on
 A) the back surface of the chest
 B) the palm surface of the hand
 C) the back surface of the hand
 D) the head
 E) any part of the body
- 313 The normal thickness of the subcutaneous fat layer is
 A) 2-3 cm
 B) 1-2 cm
 C) 0.5-3 cm
 D) 0.5-1 cm
 E) 4-5 cm
- 314 The thickness of the subcutaneous fat layer is measured with a
 A) tonometer
 B) audiometer
 C) fatmeter
 D) caliper
 E) phonendoscope
- 315 The presence of edema is checked on the
 A) abdomen
 B) neck
 C) area of the humerus of the arm
 D) head
 E) area of the tibia bones of the legs
- 316 Physiological catarrh is characteristic of
 A) newborns
 B) children under the age of 1 year
 C) children under the age of 3 years
 D) adolescents
 E) children under the age of 5 years
- 317 "Lupus butterfly" on the face is characteristic of
 A) dermatomyositis
 B) inflamed joints
 C) systemic lupus erythematosus
 D) fever
 E) myocarditis
- 318 Cyanosis of the skin can be a symptom of pathology of the
 A) skeletal system
 B) gastrointestinal tract
 C) urinary system
 D) reproductive system
 E) respiratory system
- 319 Cyanosis of the skin can be a symptom of pathology of the
 A) skeletal system
 B) gastrointestinal tract
 C) urinary system
 D) cardiovascular system
 E) reproductive system
- 320 General cyanosis is observed with
 A) systemic lupus erythematosus
 B) dermatomyositis
 C) newborn asphyxia
 D) hemolytic anemia
 E) fever
- 321 Diffuse yellow coloration of the entire skin is observed with
 A) newborn asphyxia
 B) jaundice of newborns
 C) systemic lupus erythematosus
 D) dermatomyositis
 E) fever
- 322 Diffuse yellow coloration of the entire skin is observed with
 A) hemolytic anemia
 B) newborn asphyxia
 C) systemic lupus erythematosus
 D) dermatomyositis
 E) fever
- 323 Bronze skin coloration occurs in
 A) hemolytic anemia
 B) newborn asphyxia
 C) hepatitis
 D) fever
 E) chronic adrenal insufficiency
- 324 Dry skin can be with

- A) hypoglycemia
B) collaptoid state
C) ichthyosis
- 325 Dry skin can be with
A) hypoglycemia
B) collaptoid state
C) increased thyroid function
- 326 Increased skin moisture and increased sweating are noted in patients with
A) exicosis
B) rickets
C) ichthyosis
- 327 The "jellyfish head" symptom is described in
A) exicosis
B) intoxication
C) cirrhosis of the liver
- 328 The primary elements of the skin include
A) Crusta, Hyperpigmentation, Depigmentation
B) Lichenfication, Scale, Urtica
C) Macula, Hyperpigmentation, Depigmentation
D) Papule, Vesicula, Bulla
E) Papule, Scale, Urtica
- 329 The secondary elements of the skin include
A) Papule, Vesicula, Bulla
B) Lichenfication, Scale, Urtica
C) Macula, Hyperpigmentation, Depigmentation
D) Papule, Scale, Urtica
E) Crusta, Hyperpigmentation, Depigmentation
- 330 The secondary elements of the skin are
A) appear on unchanged skin, directly caused by a specific disease
B) disease-related changes develop later as a result of the evolution of primary elements
C) signs of pathology of the respiratory system
D) physiological phenomenon in newborns of the first days of life and in premature infants
E) signs of pathology of the cardiovascular system
- 331 Papule is
A) small, sharply demarcated, dense, slightly rising above the surface of the surrounding skin, cavity-free formation
B) superficial, within the epidermis, slightly protruding above the surrounding skin cavity formation containing serous fluid
C) cavity element, similar to a bubble, but of a larger size
D) change in skin color in a limited area, in density does not differ from healthy areas and does not rise above the surrounding tissues
E) big, sharply demarcated, dense, slightly rising above the surface of the surrounding skin, cavity formation
- 332 Vesicula is
A) small, sharply demarcated, dense, slightly rising above the surface of the surrounding skin, cavity-free formation
B) cavity element, similar to a bubble, but of a larger size
C) superficial, within the epidermis, slightly protruding above the surrounding skin cavity formation containing serous fluid
D) change in skin color in a limited area, in density does not differ from healthy areas and does not rise above the surrounding tissues
E) deep, in the epidermis, slightly protruding above the surrounding skin cavity formation containing pus
- 333 Macula is
A) change in skin color in a limited area, in density does not differ from healthy areas and does not rise above the surrounding tissues
B) superficial, within the epidermis, slightly protruding above the surrounding skin cavity formation containing serous fluid
C) small, sharply demarcated, dense, slightly rising above the surface of the surrounding skin, cavity-free formation
D) cavity element, similar to a bubble, but of a larger size
E) deep, in the epidermis, slightly protruding above the surrounding skin cavity formation containing pus
- D) increased thyroid function
E) newborn asphyxia
- D) exicosis
E) newborn asphyxia
- D) intoxication
E) chronic adrenal insufficiency
- D) hypertensive syndrome
E) chronic adrenal insufficiency

- 334 Lichenfication is
A) thickening and change in elasticity, color, appearance of roughness with increased skin pattern
B) change in skin color in a limited area, in density does not differ from healthy areas and does not rise above the surrounding tissues
C) superficial, within the epidermis, slightly protruding above the surrounding skin cavity formation containing serous fluid
D) temporary or permanent persistent discoloration of the skin after the disappearance of nodules, tubercles, nodes and other elements
E) deep, in the epidermis, slightly protruding above the surrounding skin cavity formation containing pus
- 335 Small, sharply demarcated, dense, slightly rising above the surface of the surrounding skin, cavity-free formation is called
A) Papule
B) Vesicula
C) Bulla
D) Crusta
E) Lichenfication
- 336 Superficial, within the epidermis, slightly protruding above the surrounding skin cavity formation containing serous fluid is called
A) Vesicula
B) Urtica
C) Bulla
D) Crusta
E) Lichenfication
- 337 Change in skin color in a limited area, in density does not differ from healthy areas and does not rise above the surrounding tissues is called
A) Urtica
B) Bulla
C) Papule
D) Macula
E) Lichenfication
- 338 Thickening and change in elasticity, color, appearance of roughness with increased skin pattern is called
A) Urtica
B) Bulla
C) Papule
D) Lichenfication
E) Macula
- 339 Petechiae is
A) multiple hemorrhages of rounded shape ranging in size from 2 to 5 mm
B) irregularly shaped hemorrhages larger than 5 mm
C) tothe outpouring into soft tissues, which has a larger size
D) point hemorrhages
E) regularly shaped hemorrhages larger than 10 mm
- 340 Purpura is
A) point hemorrhages
B) irregularly shaped hemorrhages larger than 5 mm
C) tothe outpouring into soft tissues, which has a larger size
D) regularly shaped hemorrhages larger than 10 mm
E) multiple hemorrhages of rounded shape ranging in size from 2 to 5 mm
- 341 Ekchymosis is
A) multiple hemorrhages of rounded shape ranging in size from 2 to 5 mm
B) point hemorrhages
C) tothe outpouring into soft tissues, which has a larger size
D) regularly shaped hemorrhages less than 10 mm
E) irregularly shaped hemorrhages larger than 5 mm
- 342 Gematoma is
A) irregularly shaped hemorrhages larger than 5 mm
B) tothe outpouring into soft tissues, which has a larger size
C) multiple hemorrhages of rounded shape ranging in size from 2 to 5 mm
D) point hemorrhages
E) regularly shaped hemorrhages less than 10 mm
- 343 Point hemorrhages is called
A) Gematoma
B) Petechiae
C) Ekchymosis
D) Purpura
E) Bleeding
- 344 Multiple hemorrhages of rounded shape ranging in size from 2 to 5 mm is called
A) Petechiae
B) Purpura
C) Gematoma
D) Ekchymosis
E) Bleeding

345. Irregularly shaped hemorrhages larger than 5 mm is called
- A) Purpura
 - B) Petechiae
 - C) Ekchymosis
 - D) Gematoma
 - E) Bleeding
346. To the outpouring into soft tissues, which has a larger size is called
- A) Petechiae
 - B) Ekchymosis
 - C) Gematoma
 - D) Purpura
 - E) Bleeding
347. A decrease in the thickness of the subcutaneous fat layer can be observed with
- A) hyperthyroidism
 - B) conjunctivitis
 - C) stomatitis
 - D) obesity
 - E) paratrophy
348. A decrease in the thickness of the subcutaneous fat layer can be observed with
- A) hypothyroidism
 - B) stomatitis
 - C) chronic diseases (somatic and oncological)
 - D) obesity
 - E) paratrophy
349. Feature of the muscular system in children is
- A) poor flexor muscle tone
 - B) severe hypotension of the flexor muscles
 - C) good extensor muscle tone
 - D) severe hypertension of the flexor muscles
 - E) no different from adults
350. The function of bones is
- A) excretory
 - B) resorption
 - C) bactericidal
 - D) respiratory