

WACP APRIL 2021 MEQ

1. A middle aged man presenting with polyuria, polydipsia and polyphagia

Which of the following is confirmatory for the suspected diagnosis

- a. HbA1c >6%
- b. FBS \geq 6.0mmol/l
- c. RBG \geq 10.0mmol/l
- d. 2HPP >10mmol/l
- e. HBA1C \geq 7%

2. Concerning drug therapy, which is incorrectly paired

- a. sulphonylureas are insulin secretagogues
 - b. Biguanides inhibit gluconeogenesis
 - c. Thiazolidindiones decrease insulin resistance and inhibit gluconeogenesis
- incomplete recall, all are correct

3. Starting statin therapy for the above patient is

- a. primary prevention
- b. secondary prevention

4. How often should the feet of a diabetic be examined

- a. annually
- b. twice a year
- c. Once in 2 years
- d. Every 6 months

5. How often should a dilated funduscopy be done in the above patient

- a. annually
- b. twice a year
- c. once a year
- d. every 6 months

6. concerning diet therapy

- a. mediterranean diet, a diet high in carbs is recommended
- b. low sodium low potassium diet is recommended
- c. Portion control with reduced carbohydrate is recommended
- d. High protein diet is recommended

7. Concerning his activity level which is incorrectly matched

- a. sedentary 6000 steps a day (5,000 STEPS)
- b. 5000-7499 steps a day low activity
- c. 7500-9999 steps a day somewhat active
- d. >12500 steps a day highly active

A 36 year old woman presenting with a breast mass < 5cm in size, no skin changes, few axillary lymph nodes and micrometastasis.

8. What is her TNM staging

- a. T1N2M0
- b. T0N1M1
- c. T2N2M0
- correct = T2N2M1

9. Concerning the above patient what is the best diagnostic modality at this stage

- a. FNAC
- b. Biopsy
- c. Mammogram
- d. Uss

10. The friend of the patient above calls you that she is unable to use her left hand and has refused to come to the hospital, what do you do

- a. Home visit
- b. send an ambulance to bring her to the hospital
- c. call her on the phone assuring her that she will be fine

11. She eventually comes to the hospital and you notice she has low mood, loss of interest

a. You prescribe antidepressants

b. you encourage her and schedule her for a mastectomy

12 During your consultation with her, Which of the following suggests you are not listening

a. Holding her hands

b. adjusting regularly and appearing to be listening

c. rephrasing what she has said

d. Nodding

13. In preparing her for management which of the following should not be done

a. Tell her family not to make close contact with her

b. Encourage her

c. counsel on prognosis

14. A mother finds her 18 month old child on the grass crying, with a swollen lip, swollen right foot and mild difficulty in breathing and brings the child to the health center where you are

a. you immediately suspect child abuse

b. you suspect anaphylaxis secondary to insect bite

15. You think of referring the child to

a. allergist

b. paed cardiologist

c. pulmonologist

16. Which of the following is the most serious

a. swollen lip

b. swollen foot

c. wheezing

17. You immediately

a. Give salbutamol

b. epinephrine and iv fluids

18. Which of the following should you do

a. Admit overnight for observation

b. Admit for fluid resuscitation

c. Send the child home immediately and reassure the mother

19. A 22-year-old woman presents for her 6 weeks postnatal checkup with complaints of polyuria, polydipsia and excessive thirst.

Urinalysis showed ketones + and glucosuria ++

Her BMI is 28kg/m²

20. What is your likely diagnosis

a. Gestational DM

b. Type 1 DM

c. Type 2 DM

d. Maturity onset diabetes of the young (MODY)

21. What supports your diagnosis

a. Ketonuria

b. Glucosuria

c. Polydipsia

d. Polyphagia

22. Concerning her management

a. Lifestyle only

b. Lifestyle and insulin

c. Oral hypoglycaemic agents

d. Insulin

23. Which is not a longterm complication of this disease

a. pulmonary hypertension

b. nephropathy

c. neuropathy

d. retinopathy

24. Which of the following complications would not be seen in her infant

a. hyperglycaemia

b. heart failure

c. hypoglycaemia

25. You counsel her on dietary and lifestyle modification and she tells you they are big in her family, what stage of change is she?

a. precontemplation

b. contemplation

c. preparation

d. Action

26. A 14 year old boy living in the dormitory was brought to you with fever, neckstiffness and photophobia of 2 weeks duration

27. Which is not in your list of differentials

a. meningitis

b. cerebral abscess

c. subarachnoid haemorrhage

28. You did a lumbar puncture, which investigation would have assisted you with the lumbar puncture

a. lumbosacral xray

b. ultrasound scan

c. ct scan

29. The CSF tap was slightly blood stained, which of the following suggests traumatic tap rather than haemorrhage (poor recall)

- a. RBC < 15 cells/ml
- b. RBC < 5 cells/ml
- c. Xanthochromia

You gave a health talk in the school and encouraged the children to get immunized against the offending pathogen.

30. Which strain caused the most recent outbreak in Nigeria

- a. A
- b. B
- c. C
- d. W-135

31. What vaccine will you advise them to take now

- a. Tetravalent against groups A, C, Y and W-135
- b. Men A vaccine
- c. Men B vaccine
- d. Men Y vaccine

32. The students expressed their concerns about the vaccine because of a feared neurologic complication, What is this complication (poor recall)

- a. Guillain Barre syndrome

33. On examination of the above patient, you notice a positive Brudzinski's sign, which is incorrect

- a. Kernig's sign is positive when the thigh is flexed at the hip and knees with subsequent painful extension
- b. Brudzinski's sign is positive with extension of the neck eliciting hip and knee flexion

34. A 67 year old man presents with severe chestpain that radiates to the back.his bp is 220/120mmhg.

Which of the following is incorrect

- a. immediately reduce systolic bp to <120mmhg
- b. Esmolol and nitroprusside can be used

both options are correct

35.A post menopausal woman whose husband feels her sex drive is reduced is seeing you

Which is correct

a. There is reduced sexual drive in menopause

- b. They are having communication problems
- c. There is increased sex drive in menopause

36.From a previous years recall

A **14 month** old was brought to the clinic with 2 months history of weight loss,failure to thrive and worsening cough, the child weighed 6kg

The most likely condition is

- a. congenital heart disease
- b. Acute pneumonia
- c. HIV infection

d. Tuberculosis

37.One of the following tools is not used for the physical examination of this child

- a. caliper
- b. shakir strip
- c. standiometer
- d. thermometer

e. tonometer

38. In considering the relevant investigations for this child one of the following may not be necessary

- a. spot test of the child's blood for hiv
- b. cxr
- c. stool mcs
- d. fbc
- e. serum albumin

39. While waiting for the results of the investigations, nutritional prescription for high protein and high calorie diet for the child should supply

- a. 20kcal/kg/day
- b. 70kcal/kg/day
- c. 150kcal/kg/day
- d. 500kcal/kg/day

Your investigation shows pcv 35%, ESR 22,

WBC 4.5×10^5

Platelet count 30×10^5

Eosinophils 2%

Cxr showed non homogenous patch opacities in both lung fields

40. Concerning these results one of the following is correct

- a. Isolated thrombocytopenia
- b. ESR is normal
- c. WBC shows acute infection
- d. CXR confirms TB
- e. There is eosinophilia

After 2 weeks of high protein/calorie diet the weight of the child remained the same and symptoms persisted

41. Which one of the following is ill advised

- a. pretest counselling and HIV for mother
- b. commence TB treatment

c. continue nutritional therapy

d. Request for blood film

e. HIV RNA PCR for the child after obtaining consent

You suspect that the child could be having TB and decide to commence DOTS

42. One of the following drugs should not be used with rifampicin

a. stavudine

b. emtricitabine

c. tenofovir

d. nevirapine

e. zidovudine

43. The CD4 count dropped to 100/uL and the PCV dropped to 18%. The following drugs may be used except

a. zidovudine

b. lamivudine

c. emtricitabine

d. abacavir

e. tenofovir

44. A 33-year-old man with a history of UTI, presented with acute urinary retention, and recently purchased amitriptyline from a nearby chemist which he has been taking. What is the likely cause of his condition

a. Acute urinary retention secondary to amitriptyline use

b. Acute urinary retention secondary to UTI

c. Acute urinary retention secondary to BPH

45. What do you do next

a. pass a urethral catheter

46. Urethral catheterization was impossible, what is now your diagnosis

a. urethral stenosis

b. urethral stricture

47. What is your investigation of choice

a. micturating cystourethrogram

48. Following failed urethral catheterization what do you do next?

a. SPC

49. What is the definitive treatment of choice

a. urethroplasty

A 26 year old woman involved in an RTA was brought into the emergency room in resp distress, had distended jugular veins, hyperresonant percussion notes on the left and tracheal deviation to the right

50. What should be done urgently

a. needle decompression

b. chest tube insertion

51. What does permissive hypertension mean

In ischemic stroke (penumbra) maintain perfusion by living BP high

IN trauma, is permissive hypotension thereby reducing the bp

52. What is the definitive treatment of the patient's condition

a. chest tube insertion

53. What is the commonest complication of the procedure?

a. Hemorrhage

b. injury to the intercostal neurovascular bundle

commonest = perforation of the lung and pleura

54. How should accidents be prevented

- a. Reducing alcohol intake
- b. wearing of seatbelts
- c. Good roads

all of the above

55. Inotropes should be used as first treatment in the following except

- a. hypovolemic shock