Random MCQs 5

- **1.** In the setting of typical ischaemic chest pain commencing 2 hours ago, which ONE of the following would be LEAST likely to support a diagnosis of acute myocardial infarction for this episode
- A. Troponin I of 2.7 (ref <0.7ug/ml) taken at presentation
- B. New ST segment depression in V1-3
- C. Perfusion defect on sestamibi scan
- D. Abnormal anterior left ventricular wall motion on echocardiography
- E. CKMB of 11 (< 8ng/ml) taken at 4 hours
- 2. In the treatment of atrial fibrillation (AF), which ONE of the following is TRUE
- A. Anticoagulation is not required for chemical cardioversion
- B. Digoxin will cardiovert approximately 75% of patient with new onset AF
- C. Magnesium has no effect on rate control
- D. Patients with slow ventricular rate are at increased risk of asystole with chemical cardioversion
- E. Flecanide is the agent of choice if the patient has coexisting hypertension
- 3. Which ONE of the following features of syncope would most likely suggest a cardiac cause
- A. Prolonged period of confusion after the syncopal episode
- B. Prodromal symptoms of tachypnoea
- C. Occurred after walking up a steep hill
- D. Prodromal symptoms of vertigo
- E. Cyanosis during the event
- 4. A woman presents with a BP of 200/110, which ONE of the following statements is FALSE
- A. The presence of silver wiring in the retina suggests no immediate treatment is necessary
- B. Red cell casts in the urine suggest glomerulonephritis may be the cause
- C. If pre-eclampsia is suspected, she should be commenced on magnesium sulphate infusion
- D. The most likely cause is noncompliance with medication
- E. If she has confusion and hemiplegia, she should be commenced on nitroprusside infusion
- 5. Which ONE of the following statements is TRUE
- A. The commonest cause of aortic stenosis is rheumatic fever

- B. The murmur of hypertrophic obstructive cardiomyopathy (HOCM) is decreased by squatting
- C. The murmur of ventricular septal defect (VSD) is decreased with inspiration
- D. In mitral valve prolapse (MVP), isometric exercise causes the click to be heard earlier in systole
- E. A left bundle branch block is commonly seen in patients with an atrial septal defect
- **6.** A 2-month-old boy is brought to the emergency department with tachypnoea. Which ONE of the following statements would LEAST support the diagnosis of congestive cardiac failure
- A. Diaphoresis halfway through feeds for the last 3 weeks
- B. Hepatomegaly
- C. Pansystolic murmur at left lower sternal border
- D. Tachycardia
- E. Right bundle branch block
- **7.** A 65-year old man presents with 30-minute history of central chest pain radiating to his right shoulder, which resolved spontaneously. Which ONE of the following is TRUE
- A. Chest wall tenderness on examination makes the pain less likely to be ischaemic
- B. A normal ECG makes the diagnosis of unstable angina unlikely
- C. Dynamic T wave changes places him at high risk
- D. A recent negative stress ECG excludes ischaemic heart disease
- E. He can be discharged for outpatient investigation if the echocardiogram is normal
- 8. Concerning paediatric asthma, which ONE of the following is TRUE
- A. There is no correlation between initial oxygen saturation and the need for hospital admission
- B. There is no role for spirometry in the assessment of asthmatic patients aged under ten years
- C. Pulsus paradoxus greater than 10 mmHg is an indicator of severe asthma in children
- D. The presence of a pneumothorax in the context of an acute asthma attack is an absolute indication for intercostal catheter placement
- E. Less than 10 % of a dose of nebulised bronchodilator actually reaches the lungs
- 9. Which ONE of the following is LEAST likely to be a feature in a patient admitted with bronchiolitis
- A. Normal white blood cell count
- B. Normal chest X-ray

C.	Apnoea				
D.	Patient aged in first year of life				
E.	Response to bronchodilators				
10. Which ONE of the following features would make you suspect an atypical pneumonia					
A.	Sudden onset of symptoms				
B.	Infection acquired in hospital				
C.	Lack of a predominant organism on sputum Gram stain				
D.	Elevated white blood cell count				
E.	Marked respiratory signs and symptoms with relatively minimal findings on chest X-ray				
11.	. Which ONE of the following is TRUE of Bi-level Positive Airway Pressure (BiPAP)				
A.	Some investigators have found Level 1 evidence supporting the use of BiPAP in severe exacerbations of COAD				
B.	BiPAP typically causes a transient initial worsening of V-Q mismatch				
C.	There are no absolute contraindications to the use of BiPAP in COAD				
D.	The administration of BiPAP precludes the use of nebulised bronchodilators				
E.	BiPAP does not affect intrinsic PEEP (auto-PEEP) in patients with COAD				
12.	. Which ONE of the following is the LEAST likely to complicate carcinoma of the lung				
A.	Hyponatraemia				
B.	Increased serum viscosity				
C.	Urinary incontinence				
D.	Facial oedema on waking				
E.	Hypercalcaemia				
13.	. Which ONE of the following statements regarding spontaneous pneumothorax is TRUE				

A. The recurrence rate following a single episode is 10 % over the ensuing five years

- B. Pulmonary infection is the most commonly associated condition in secondary spontaneous pneumothorax
- C. Hamman's sign is a pathognomonic finding
- D. In the absence of any further air leak, a 20 % pneumothorax would be expected to reabsorb over approximately 16 days
- E. Re-expansion pulmonary oedema is usually bilateral
- 14. In bronchiectasis, which ONE of the following is FALSE
- A. Haemoptysis is common
- B. Clubbing may be present
- C. Bronchospasm is uncommon
- D. Chest x-ray is always abnormal
- E. Adenovirus is a common cause
- 15. With respect to gastrointestinal bleeding which ONE of the following statements is TRUE
- A. Complications commonly occur in endoscopic sclerotherapy
- B. The oesophageal balloon should be inflated first in a Minnesota tube
- C. Variceal bleeding ceases spontaneously in 50%
- D. Colonic angiodysplasia is a rare cause of lower GI bleeding in the elderly
- E. Somatostatin has been proven to decrease mortality
- 16. With respect to fulminant acute liver failure which ONE of the following statements is TRUE
- A. INR is a sensitive index of liver function
- B. Most cases of acute liver failure are drug induced
- C. Late administration of glutathione is unwarranted in paracetamol induced hepatic failure
- D. Renal failure rarely occurs in paracetamol induced hepatic encephalopathy
- E. Cerebral oedema is an unusual cause of death
- 17. Regarding inflammatory bowel disease, which ONE of the following statements is TRUE
- A. Perianal fistula/abscess is unusual in Crohns disease

B. Thromboembolic disease is a leading cause of death in Crohns				
C.Toxic megacolon is always treated surgically				
D. Bloody diarrhoea is typical of Crohns				
E. Sulfasalazine is useful in severe attacks of ulcerative colitis				
18. In a 20 kg child with diabetic ketoacidosis who is 5% dehydrated, which ONE of the following statements is TRUE				
A. Infuse insulin at 0.5u/kg/hr				
B. Estimated fluid deficit is 1 litre to be given as 0.45% saline over 8 hours				
C. When glucose reaches 12-15mm/L use 0.45% saline/5% dextrose				
D. Bicarbonate is often required				
E. Correct fluid deficit over 12 hours to prevent cerebral oedema.				
19. In a patient with thyroid storm, which ONE of the following statements is TRUE				
A. Hypoglycaemia is usual				
B. IV steroids should be given				
B. GI symptoms are rare				
D. Laboratory tests give definitive diagnosis				
E. Methimazole is the mainstay of therapy				
20. In the assessment of an infant with feeding difficulties, which one of the following statements is TRUE				
A. Acute reduction of intake is usually due to an infection				
B. Cow's milk intolerance diarrhoea doesn't contain blood or mucous				
C. Regurgitation with oesophagitis is common				
D. Antibiotic associated diarrhoea does not contain blood				
E. Vomiting is usually an isolated symptom				
21. With respect to performing cardiopulmonary resuscitation on a 3-year-old child, which ONE of the following statements is TRUE				

- A. The airway should initially be cleared by a finger sweep
- B. Encircle the child's chest with your hands and use your thumbs to perform external cardiac compressions
- C. The initial energy setting for ventricular fibrillation is 4J/kg
- D. Ventricular fibrillation is the most common rhythm in cardiac arrest
- E. The initial dose of intravenous adrenaline is 0.1ml/kg of 1:10 000 solution

- 22. In prophylaxis following HIV exposure, which ONE of the following is TRUE
- A. Prophylaxis is not recommended following exposure from patients with normal CD4 counts
- B. Triple therapy is recommended in all cases, if prophylaxis is to be used
- C. HIV testing should be continued for 12 months, following exposure
- D. Prophylaxis should commence within 6 hours of exposure for maximum benefit
- E. Muco-cutaneous exposure should not be considered for prophylaxis
- 23. With respect to febrile children, which ONE of the following statements is FALSE
- A. Contamination rates of blood culture specimens with skin flora is 5-10%
- B. A positive bag urine is not diagnostic of a UTI
- C. Unwell, toxic children aged between 3 months and 3 years with a temperature >38 degrees Celsius should be admitted and treated with empiric antibiotics
- D. A white cell count of 10 x 10⁶/L in a neonatal CSF specimen is a positive result that requires antibiotic treatment
- E. Intravenous ceftriaxone can be used as empiric therapy in febrile children with a high suspicion of bacteraemia but no identifiable source
- 24. With respect to upper airway obstruction, which ONE of the following statements is FALSE
- A. In adult epiglottitis stridor is present in 60% of patients
- B. Inability to tolerate the supine position is a sensitive sign of significant upper airway obstruction
- C. Ludwig's angina is the most common neck space infection in adults
- D. In needle aspiration of a peritonsillar abscess, care must be taken to avoid puncturing the carotid vessels

- E. In clearing a foreign body upper airway obstruction in an infant abdominal thrusts should be avoided
- **25.** An 80-year-old female requires manual reduction of her Colle's fracture. Which ONE of the following statements is TRUE
- A. The dose of prilocaine 0.5% for a Bier's block is 4mg/kg
- B. Prilocaine cardiac toxicity most commonly results in a ventricular tachycardia
- C. The cuff for a Bier's block should be inflated to a maximum of 50mmHg above the patient's systolic BP
- D. A complete plaster of paris should be applied with three point moulding to maintain the position of the reduction
- E. An inability to cooperate is a major precaution to performing a Bier's block in children
- 26. Select the ONE TRUE answer. Prognosis in non-traumatic coma
- A. Is extremely poor when renal failure is associated with coma
- B. Is better for structural lesions than hepatic encephalopathy
- C. Is worse in patients with coincident shock
- D. Is just as poor in drug overdose as in other causes
- E. Is such that most patients go on to recover and lead an independent existence
- **27.** A five-year-old boy has a diagnosis of post –meningitis epilepsy for which he is taking phenytoin. He is brought to the ED by his parents who state that he is "walking funny", and that he complains of headache. He is afebrile with normal vital signs for age. Which ONE of the following is NOT an immediate procedure done from the ED for this case
- A. Check Serum phenytoin
- B. Cranial CT
- C. Administer paracetamol
- D. Lumbar Puncture
- E. Check Electrolytes
- 28. Intramuscular ketorolac could be safely used in which ONE of the following circumstances
- A. Haemophilia
- B. Lactation
- C. Anticoagulant therapy
- D. Suspected drug-seeking behaviour

E.	Renal failure			
29. A 35-year-old aboriginal man is brought to the ED one minute after collapsing in the hospital foyer. He is GCS 3 with no output, asystole on monitor, and CPR is in progress. He has a dialysis fistula present at the left wrist. Which ONE of the following medications will be LEAST likely to increase the chance of successful resuscitation				
A.	Calcium			
В.	Bicarbonate			
C.	Amiodarone			
D.	Glucose			
E.	Insulin			

30. A 72-year-old man presents to the ED complaining of fever and lethargy. He suffers from small-cell lung carcinoma, and is two weeks into his latest course of chemotherapy. He is febrile to 40.5 degrees centigrade, and has a peripheral WCC of 2, with Neutrophils of 0.5. Which ONE of the following is NOT usually a drug of choice in this situation

- usually a drug of choice in this situation

 A. Gentamycin
- B. Timentin
- C. Ceftazidime
- D. Penicillin V
- E. Vancomycin
- **31.** A 35-year-old alcoholic man from Darwin presents to the ED complaining of dysuria and fever, and supra-pubic abdominal pain. He is febrile to 39.5 degrees C with normal vital signs. Dipstick urinalysis reveals 3+ Leukocytes, trace haemolysed blood, 2+ Protein. Investigation and treatment should include which ONE of the following
- A. Urinalysis and culture
- B. Prostatic Ultrasound
- C. Gentamycin
- D. Blood Culture
- E. All of the above
- 32. In cases of stings from marine organisms, which ONE of the following is TRUE
- A. There is an anti-venom for irukanji stings
- B. The dose of chironex fleckeri anti-venom is the same for adults and children
- C. Box jelly fish stings cause death by paralysis from neurotoxins

- D. There is no haemolytic component in stonefish venom E. Sea snake venom contains no myotoxins 33. Concerning recreational drug use, which ONE of the following statements is FALSE Α. Death from inhaled volatile hydrocarbons is caused by asphyxia B. Severity of symptoms from amphetamine use is related to drug tolerance C. Phencyclidine is a dissociative anaesthetic agent D. Methamphetamine's effect is almost immediate when used nasally E. Gamma hydroxybutyrate is produced by humans 34. Concerning management of overdose of beta-blockers, which ONE of the following is FALSE A. Isoprenaline may aggravate hypotension by vasodilatory effects B. Glucagon enhances myocardial contractility C. Dobutamine is not appropriate for maintaining blood pressure D. Adrenaline is preferred to noradrenaline E. Atenolol can be dialysed 35. Regarding benzodiazepine overdoses, which ONE of the following is TRUE A. In isolated benzodiazepine overdoses, morbidity and mortality are low B. There is no specific central neuroreceptor for benzodiazepine C. Benzodiazepines are not lipid soluble D. Nystagmus is not seen in benzodiazepine overdose E. Respiratory depression is not common.
- **36.** In psychoses, which ONE of the following is FALSE
- A. Psychoses are axis 1 disorders in the DSM-V classification system
- B. Schizophrenia is characterised by primary delusions and hallucinations
- C. In bipolar disorders, depressive episodes are less frequent than manic ones
- D. Dysthymic disorder is a form of depression
- E. Schizophrenia accounts for 25 % of hospital admissions.

- 37. Concerning the conditions anorexia and bulimia, which ONE of the following is FALSE A. Eating disorders affect up to 10% of adolescent girls B. Bulimia usually begins between 17 and 25 C. Parotid and submandibular gland enlargement is common D. Sexual abuse is not an aetiological factor E. Bulimics have an intense need for approval 38. Which ONE of the following is not an aetiological factor in trauma mortality Α. Fall from height of greater than 2 metres B. Motor bike rider thrown 20 metres C. Age greater than 65 in patients who suffer a fall D. Gunshot wound to the chest E. Positive abdominal seat belt sign
 - 39. Concerning penetrating knife wounds to the abdomen, which ONE of the following is TRUE
- A. A positive wound examination is finding the anterior fascia penetrated
- B. Sinograms are of great value
- C. CT without contrast is of no value
- D. DPL is only positive if the red blood cell count is greater than 100,000 when the diaphragm is involved
- E. Ultrasound is of no value for detecting intraperitoneal fluid

- **40.** In fluid resuscitation, which ONE of the following is TRUE
- A. Minimum volume resuscitation is not useful in ruptured abdominal aortic aneurysms
- B. Crystalloid fluids are superior to colloids for maintaining blood pressure
- C. All crystalloid resuscitation fluids have a high sodium concentration, similar to that of extracellular fluid
- D. Hypothermia is not a risk with intravenous fluids at room temperature

- E. Haemolytic transfusion reactions are fatal for 1in 10,000 transfusions
- 41. In the diagnosis and treatment of acute cholecystitis, which ONE of the following is FALSE
- A. Most clinicians advocate early cholecystectomy (ie within several days after onset of symptoms) on the basis of lower complication rates, reduced costs and shorten recovery period
- B. Biliary colic localises to the mid-epigastrium less often than the right upper quadrant
- C. Courvoiser sign refers to a palpable, non-tender gallbladder in a patient with jaundice
- D. Computed tomography is inferior to ultrasound in the assessment of the acute biliary disease
- E. The prevalence of acute cholecystitis is approximately 5% among patients presenting to the emergency department with abdominal pain
- 42. Which ONE of the following statements about volvulus is FALSE
- A. Sigmoid volvulus is more common in elderly patients with debilitating disease who lead lives of inactivity
- B. Volvulus of the caecum occurs in all ages but is most common in persons 25 to 35 years of age
- C. Fluid and electrolyte sequestration is usually not a problem in sigmoid volvulus, unlike small bowel obstruction
- D. A single massively dilated loop of bowel with both ends down in the pelvis and the bow positioned superiorly ("bent inner tube" appearance) is characteristic of a caecal volvulus on plain-film radiograph of the abdomen
- E. The treatment of choice for a non-strangulated sigmoid volvulus is decompression and de-torsion with a rectal tube via a sigmoidoscope
- 43. In the diagnosis and treatment of acute appendicitis, which ONE of the following is FALSE
- A. In approximately 20% of patients undergoing exploratory laparotomy because of suspected appendicitis, the appendix is normal
- B. A history of anorexia is helpful in differentiating appendicitis from pelvic inflammatory disease
- C. The inflammatory process of acute appendicitis may cause pyuria or haematuria
- D. Although appendicitis may be ruled out if the appearance of the appendix is normal on ultrasonagraphy, a normal appendix is seen in less that 5% of patients
- E. As compared with ultrasonagraphy, CT has greater sensitivity and negative predictive value
- 44. Which ONE of the following statements concerning soft tissue infections or wounds is FALSE
- A. Patients with fasciitis manifest moderate to severe systemic toxicity, often out of proportion to the cutaneous findings, with high fever, tachycardia, anxiety, disorientation and often frank shock.
- B. Early periorbital cellulitis in an adult may be treated with oral antibiotics and followed up on an outpatient basis, whereas orbital cellulitis requires hospitalisation and intravenous antibiotics

- C. The treatment of cutaneous abscess is incision and drainage. Antibiotics are not indicated in patients with normal host defences
- D. Tetanus prophylaxis is indicated for any wound in a patient who has been fully immunised, if the time since last vaccination is greater than five years
- E. All human bites to the hand including equivalent clenched fist injuries require prophylactic treatment with antibiotics
- 45. In the management of acute ischaemia of the lower limb, which ONE of the following is FALSE
- A. Patients with microemboli are anticoagulated for up to 5 days
- B. Urokinase is superior to streptokinase because of lower complication rates
- C. Therapy should commence within 12 hours of onset of ischaemia
- D. Contraindications to thrombolytic therapy are the same as those for myocardial infarction thrombolysis
- E. Embolic ischaemia is best treated by surgical intervention
- 46. Regarding thromboembolic disease, which one of ONE the following is TRUE
- A. D-dimer has negative predictive value only in patients with low pre-test clinical probability
- B. Plesythmography is superior to ultrasound in diagnosis of thrombosis in the lower limb
- C. Pulmonary emboli can arise from organised clot
- D. 50% of all fatal emboli come from thromboses in the calf
- E. CT pulmonary angiography must be performed within 24 hours of embolisation to the lungs.
- 47. Concerning the indications for CT scanning in minor head injuries, which ONE of the following is TRUE
- A. CT scanning is not recommended in children with a GCS of 10 or greater
- B. Post traumatic amnesia is not an indicator for CT findings
- C. Patients with a GCS of 15 don't require CT scanning
- D. Focal neurological deficit is an absolute indicator for CT scanning
- E. CT is indicated in all patients over 70 years of age with dementia.
- **48.** When investigating patients with possible subarachnoid haemorrhage, which ONE of the following is TRUE
- A. Brain CT without contrast is the initial investigation of choice
- B. Xanthochromia can be reliably detected by visual inspection

- C. MRI is a reliable tool for detecting small aneurysms
- D. CT has a sensitivity of only 10% at 7 days post haemorrhage
- E. A positive D-dimer on CSF is not diagnostic

49. In supra-condylar fractures in children, which ONE of the following is FALSE

- A. Supra-condylar fractures are more common in children than in adults
- B. 95% are displaced posteriorly
- C. In some undisplaced fractures the fracture line may not be visible on x-ray
- D. Displaced fractures should be treated initially by closed reduction
- E. Neurovascular compromise is uncommon

50. Concerning painful hips in children, which ONE of the following is TRUE

- A. Acute transient tenosynovitis is the commonest cause of hip pain in children less than 10 years of age
- B. Legg-Clave-Perthes disease is bilateral in 25% of cases
- C. A raised ESR is diagnostic of septic arthritis
- D. Slipped capital femoral epiphysis is more common in females
- E. MRI is less sensitive than bone scan in detecting avascular necrosis

51. Regarding vertebral fractures, which ONE of the following is FALSE

- A. Bilateral interfacetal dislocations occur in flexion
- B. Chance fractures are not commonly associated with abdominal injuries
- C. Clay-shoveler fractures are the least unstable of cervical spinal fractures
- D. Up to 40% of cervical fractures are associated with neurological injury
- E. Wedge fractures of the lumbar spine rarely have associated neurological injury.

52. Concerning back pain, which of ONE the following is TRUE

- A. Sciatica is pain radiating from the back to above the knee
- B. Loss of anal tone is a reliable indicator of cauda equina
- C. Epidural abscesses are common in intravenous drug users
- D. A positive Laseuge's sign indicates nerve root irritation

E. Spondylosis is not congenital 53. Regarding injuries of the lower limb, which ONE of the following is FALSE A. 10% of dislocations of the hip are anterior Dislocations of the knee often reduce spontaneously В. C. Ottawa ankle rules include tenderness along the posterior of the distal tibia Sever's disease is an overuse injury of the Achilles tendon insertion D. Ε. Osteochondral fractures of the talus commonly occur over the medial portion **54.** In regard to renal colic, which of the following statements is TRUE A. Haematuria is absent in 1% of patients with renal colic B. Ultrasound is the preferred investigation for visualisation of uncomplicated midureteral stones C. Recurrent episodes occur in approximately 20% of patients D. Uric acid stones are radio-opaque and represent 10% of all stones E. Stones less than 5mm will pass within one month in 90% of cases 55. With respect to testicular pain in a 14-year-old male, which of the following statements is FALSE A. Torsion of the appendages probably occurs more often than torsion of the testes itself Diagnosis of epididymo-orchitis necessitates evaluation of the urinary tract as part of follow-up C. Salvage rate in torsion operated on within 4 hr is approximately 75% D. Ten percent of testicular tumours present with pain secondary to acute haemorrhage within the tumour Bilateral orchidopexy should be performed in cases of testicular torsion 56. Drugs useful for tocolysis in a 27-week pregnant woman with pre-term labour include all EXCEPT Magnesium B. Indomethacin C. Salbutamol

D. Nifedipine

Betamethasone

- 57. In management of the patient with menorrhagia, which ONE of the following statements is FALSE
- A. Anovulatory DUB is generally not responsive to hormonal therapy
- B. NSAID's are useful in the treatment of menorrhagia, by blocking prostaglandin PGE2
- C. NSAID's have been associated with a 30 50% reduction in bleeding in patients with Menorrhagia
- D. Patients over 35 require endometrial biopsy prior to definitive hormonal therapy for menorrhagia
- E. Coagulopathies such as platelet function disorders may first manifest as severe perimenarcheal bleeding
- 58. With respect to sudden visual loss, which ONE of the following statements is FALSE
- A. Bilateral occipital infarction may present with bilateral blindness but pupil responses would be expected to be intact
- B. Poisoning with quinine or methanol may present with bilateral blindness and fixed, constricted pupils
- C. Acute vitreous haemorrhage presents with variable degrees of visual loss and is painless
- D. Optic neuritis generally presents with a gradual visual decline and relative afferent pupillary defect should be present
- E. Treatment of central retinal artery occlusion is generally futile if the obstruction has been present for more than two hours
- 59. In considering dentoalveolar trauma, which ONE of the following statements is TRUE
- A. An Ellis class I fracture involves the enamel and dentin components of a tooth
- B. A frank drop of blood and exposed pulp implies an Ellis class III fracture and emergency dental review
- C. A percentage point for successful re-implantation is lost each hour that an avulsed tooth is absent from the oral cavity
- D. Avulsed primary anterior teeth should be replaced into their sockets to avoid subsequent facial deformity
- E. Milk should not be used as a storage and transport medium for avulsed teeth due to its high concentration of calcium and magnesium
- 60. In an 8 yr old child with tonsillitis, which ONE of the following statements is FALSE
- A. Tonsillar exudate is rarely seen in viral pharyngitis
- B. Antibiotic treatment has only a minor impact on the duration of symptoms in acute sore throat
- C. Phenoxymethylpencillin 10mg /kg is antibiotic treatment of choice for severe tonsillitis
- D. Objectives of treatment with penicillin include prevention of rheumatic fever and prevention of suppurative complications
- E. Post-streptococcal glomerulonephritis is a non-suppurative complication of strep pharyngitis that is not preventable with antibiotic therapy

Answers are asterixed * MULTIPLE CHOICE QUESTIONS.

PLEASE SELECT THE ONE CORRECT ANSWER.

- **1.** In the setting of typical ischaemic chest pain commencing 2 hours ago, which ONE of the following would be LEAST likely to support a diagnosis of acute myocardial infarction for this episode
 - A. Troponin I of 2.7 (ref <0.7ug/ml) taken at presentation *
 - B. New ST segment depression in V1-3
 - C. Perfusion defect on sestamibi scan
 - D. Abnormal anterior left ventricular wall motion on echocardiography
 - E. CKMB of 11 (< 8ng/ml) taken at 4 hours
- 2. In the treatment of atrial fibrillation (AF), which ONE of the following is TRUE
 - A. Anticoagulation is not required for chemical cardioversion
 - B. Digoxin will cardiovert approximately 75% of patient with new onset AF
 - C. Magnesium has no effect on rate control
 - D. Patients with slow ventricular rate are at increased risk of asystole with chemical cardioversion*
 - E. Flecanide is the agent of choice if the patient has coexisting hypertension
- 3. Which ONE of the following features of syncope would most likely suggest a cardiac cause
 - A. Prolonged period of confusion after the syncopal episode
 - B. Prodromal symptoms of tachypnoea
 - C. Occurred after walking up a steep hill*
 - D. Prodromal symptoms of vertigo
 - E. Cyanosis during the event
- 4. A woman presents with a BP of 200/110, which ONE of the following statements is FALSE
 - A. The presence of silver wiring in the retina suggests no immediate treatment is necessary
 - B. Red cell casts in the urine suggest glomerulonephritis may be the cause
 - C. If pre-eclampsia is suspected, she should be commenced on magnesium sulphate infusion
 - D. The most likely cause is noncompliance with medication
 - E. If she has confusion and hemiplegia, she should be commenced on nitroprusside infusion*

- 5. Which ONE of the following statements is TRUE
 - A. The commonest cause of aortic stenosis is rheumatic fever
 - B. The murmur of hypertrophic obstructive cardiomyopathy (HOCM) is decreased by squatting*
 - C. The murmur of ventricular septal defect (VSD) is decreased with inspiration
 - D. In mitral valve prolapse (MVP), isometric exercise causes the click to be heard earlier in systole
 - E. A left bundle branch block is commonly seen in patients with an atrial septal defect
- **6.** A 2-month-old boy is brought to the emergency department with tachypnoea. Which ONE of the following statements would LEAST support the diagnosis of congestive cardiac failure
 - A. Diaphoresis halfway through feeds for the last 3 weeks
 - B. Hepatomegaly
 - C. Pansystolic murmur at left lower sternal border
 - D. Tachycardia
 - E. Right bundle branch block*
- **7.** A 65-year old man presents with 30-minute history of central chest pain radiating to his right shoulder, which resolved spontaneously. Which ONE of the following is TRUE
 - A. Chest wall tenderness on examination makes the pain less likely to be ischaemic*
 - B. A normal ECG makes the diagnosis of unstable angina unlikely
 - C. Dynamic T wave changes places him at high risk
 - D. A recent negative stress ECG excludes ischaemic heart disease
 - E. He can be discharged for outpatient investigation if the echocardiogram is normal
- 8. Concerning paediatric asthma, which ONE of the following is TRUE
 - A. There is no correlation between initial oxygen saturation and the need for hospital admission
 - B. There is no role for spirometry in the assessment of asthmatic patients aged under ten years
 - C. Pulsus paradoxus greater than 10 mmHg is an indicator of severe asthma in children
 - D. The presence of a pneumothorax in the context of an acute asthma attack is an absolute indication for intercostal catheter placement
 - E. Less than 10 % of a dose of nebulised bronchodilator actually reaches the lungs*
- 9. Which ONE of the following is LEAST likely to be a feature in a patient admitted with bronchiolitis

	D.	Patient aged in first year of life				
	E.	Response to bronchodilators				
4.0						
10. Which ONE of the following features would make you suspect an atypical pneumonia						
	A. Sudden onset of symptoms					
B. Infection acquired in hospital						
	C.	Lack of a predominant organism on sputum Gram stain*				
	Elevated white blood cell count					
	E.	Marked respiratory signs and symptoms with relatively minimal findings on chest X-ray				
11.	. Wh	nich ONE of the following is TRUE of Bi-level Positive Airway Pressure (BiPAP)				
	A. Some investigators have found Level 1 evidence supporting the use of BiPAP in exacerbations of COAD*					
	B.	BiPAP typically causes a transient initial worsening of V-Q mismatch				
	C.	There are no absolute contraindications to the use of BiPAP in COAD				
	D.	The administration of BiPAP precludes the use of nebulised bronchodilators				
	E.	BiPAP does not affect intrinsic PEEP (auto-PEEP) in patients with COAD				
12.	nich ONE of the following is the LEAST likely to complicate carcinoma of the lung					
	A.	Hyponatraemia				
	B.	Increased serum viscosity*				

A. Normal white blood cell count

B. Normal chest X-ray*

C. Urinary incontinence

E. Hypercalcaemia

D. Facial oedema on waking

C. Apnoea

- 13. Which ONE of the following statements regarding spontaneous pneumothorax is TRUE
 - A. The recurrence rate following a single episode is 10 % over the ensuing five years
 - B. Pulmonary infection is the most commonly associated condition in secondary spontaneous pneumothorax
 - C. Hamman's sign is a pathognomonic finding
 - D. In the absence of any further air leak, a 20 % pneumothorax would be expected to reabsorb over approximately 16 days*
 - E. Re-expansion pulmonary oedema is usually bilateral
- 14. In bronchiectasis, which ONE of the following is FALSE
 - A. Haemoptysis is common
- B. Clubbing may be present
 - C. Bronchospasm is uncommon
- D. Chest x-ray is always abnormal*
- E. Adenovirus is a common cause
- 15. With respect to gastrointestinal bleeding which ONE of the following statements is TRUE
 - A. Complications commonly occur in endoscopic sclerotherapy*
- B. The oesophageal balloon should be inflated first in a Minnesota tube
 - C. Variceal bleeding ceases spontaneously in 50%
- D. Colonic angiodysplasia is a rare cause of lower GI bleeding in the elderly
- E. Somatostatin has been proven to decrease mortality
- 16. With respect to fulminant acute liver failure which ONE of the following statements is TRUE
 - A. INR is a sensitive index of liver function*
- B. Most cases of acute liver failure are drug induced
- C. Late administration of glutathione is unwarranted in paracetamol induced hepatic failure
- D. Renal failure rarely occurs in paracetamol induced hepatic encephalopathy
- E. Cerebral oedema is an unusual cause of death

17. Regarding inflammatory bowel disease, which ONE of the following statements is TRUE							
A. Perianal fistula/abscess is unusual in Crohns disease							
B. Thromboembolic disease is a leading cause of death in Crohns*							
B. Toxic megacolon is always treated surgically							
D. Bloody diarrhoea is typical of Crohns							
E. Sulfasalazine is useful in severe attacks of ulcerative colitis							
18. In a 20 kg child with diabetic ketoacidosis who is 5% dehydrated, which ONE of the following statements is TRUE							
A. Infuse insulin at 0.5u/kg/hr							
B. Estimated fluid deficit is 1 litre to be given as 0.45% saline over 8 hours							
C. When glucose reaches 12-15mm/L use 0.45% saline/5% dextrose*							
D. Bicarbonate is often required							
E. Correct fluid deficit over 12 hours to prevent cerebral oedema.							
19. In a patient with thyroid storm, which ONE of the following statements is TRUE							
A. Hypoglycaemia is usual							
B. IV steroids should be given*							
B. GI symptoms are rare							
D. Laboratory tests give definitive diagnosis							
E. Methimazole is the mainstay of therapy							
20. In the assessment of an infant with feeding difficulties, which one of the following statements is TRUE							
A. Acute reduction of intake is usually due to an infection*							
B. Cow's milk intolerance diarrhoea doesn't contain blood or mucous							
C. Regurgitation with oesophagitis is common							
D. Antibiotic associated diarrhoea does not contain blood							
E. Vomiting is usually an isolated symptom							

- **21.** With respect to performing cardiopulmonary resuscitation on a 3-year-old child, which ONE of the following statements is TRUE
 - A. The airway should initially be cleared by a finger sweep
 - B. Encircle the child's chest with your hands and use your thumbs to perform external cardiac compressions
 - C. The initial energy setting for ventricular fibrillation is 4J/kg
 - D. Ventricular fibrillation is the most common rhythm in cardiac arrest
 - E. The initial dose of intravenous adrenaline is 0.1ml/kg of 1:10 000 solution*

- 22. In prophylaxis following HIV exposure, which ONE of the following is TRUE
 - A. Prophylaxis is not recommended following exposure from patients with normal CD4 counts
 - B. Triple therapy is recommended in all cases, if prophylaxis is to be used
 - C. HIV testing should be continued for 12 months, following exposure
 - D. Prophylaxis should commence within 6 hours of exposure for maximum benefit*
 - E. Muco-cutaneous exposure should not be considered for prophylaxis
- 23. With respect to febrile children, which ONE of the following statements is FALSE
 - A. Contamination rates of blood culture specimens with skin flora is 5-10%
 - B. A positive bag urine is not diagnostic of a UTI
 - C. Unwell, toxic children aged between 3 months and 3 years with a temperature >38 degrees Celsius should be admitted and treated with empiric antibiotics
 - D. A white cell count of 10 x 10⁶/L in a neonatal CSF specimen is a positive result that requires antibiotic treatment*
 - E. Intravenous ceftriaxone can be used as empiric therapy in febrile children with a high suspicion of bacteraemia but no identifiable source
- 24. With respect to upper airway obstruction, which ONE of the following statements is FALSE
 - A. In adult epiglottitis stridor is present in 60% of patients*
 - B. Inability to tolerate the supine position is a sensitive sign of significant upper airway obstruction

- C. Ludwig's angina is the most common neck space infection in adults
- D. In needle aspiration of a peritonsillar abscess, care must be taken to avoid puncturing the carotid vessels
- E. In clearing a foreign body upper airway obstruction in an infant abdominal thrusts should be avoided
- **25.** An 80-year-old female requires manual reduction of her Colle's fracture. Which ONE of the following statements is TRUE
 - A. The dose of prilocaine 0.5% for a Bier's block is 4mg/kg
 - B. Prilocaine cardiac toxicity most commonly results in a ventricular tachycardia
 - C. The cuff for a Bier's block should be inflated to a maximum of 50mmHg above the patient's systolic BP
 - D. A complete plaster of paris should be applied with three point moulding to maintain the position of the reduction
 - E. An inability to cooperate is a major precaution to performing a Bier's block in children*
- 26. Select the ONE TRUE answer. Prognosis in non-traumatic coma
 - A. Is extremely poor when renal failure is associated with coma
 - B. Is better for structural lesions than hepatic encephalopathy
 - C. Is worse in patients with coincident shock*
 - D. Is just as poor in drug overdose as in other causes
 - E. Is such that most patients go on to recover and lead an independent existence
- **27.** A five-year-old boy has a diagnosis of post –meningitis epilepsy for which he is taking phenytoin. He is brought to the ED by his parents who state that he is "walking funny", and that he complains of headache. He is afebrile with normal vital signs for age. Which ONE of the following is NOT an immediate procedure done from the ED for this case
 - A. Check Serum phenytoin
 - B. Cranial CT
 - C. Administer paracetamol
 - D. Lumbar Puncture*
 - E. Check Electrolytes
- 28. Intramuscular ketorolac could be safely used in which ONE of the following circumstances
 - A. Haemophilia
 - B. Lactation

C. Ant	icoagulant therapy			
D. Sus	spected drug-seeking behaviour*			
E. Rer	nal failure			
29. A 35-year-old aboriginal man is brought to the ED one minute after collapsing in the hospital foye is GCS 3 with no output, asystole on monitor, and CPR is in progress. He has a dialysis fistula present the left wrist. Which ONE of the following medications will be LEAST likely to increase the chance of successful resuscitation				
A. Cal	cium			
B. Bica	arbonate			
C. Am	iodarone*			
D. Glu	icose			
E. Insi	ulin			
30. A 72-year-old man presents to the ED complaining of fever and lethargy. He suffers from small-clung carcinoma, and is two weeks into his latest course of chemotherapy. He is febrile to 40.5 degree centigrade, and has a peripheral WCC of 2, with Neutrophils of 0.5. Which ONE of the following is No usually a drug of choice in this situation				
A. Gei	ntamycin			
B. Tim	nentin			
C. Cef	ftazidime			
D. Per	nicillin V*			
E. Var	ncomycin			
31. A 35-year-old alcoholic man from Darwin presents to the ED complaining of dysuria and fever, a supra-pubic abdominal pain. He is febrile to 39.5 degrees C with normal vital signs. Dipstick urinally reveals 3+ Leukocytes, trace haemolysed blood, 2+ Protein. Investigation and treatment should included which ONE of the following				
A. Urir	nalysis and culture			
B. Pro	ostatic Ultrasound			
C. Gei	ntamycin			
D. Blo	od Culture			
E. All	of the above*			
32. In case	es of stings from marine organisms, which ONE of the following is TRUE			

- A. There is an anti-venom for irukanji stings
- B. The dose of chironex fleckeri anti-venom is the same for adults and children*
- C. Box jelly fish stings cause death by paralysis from neurotoxins
- D. There is no haemolytic component in stonefish venom
- E. Sea snake venom contains no myotoxins
- 33. Concerning recreational drug use, which ONE of the following statements is FALSE
 - A. Death from inhaled volatile hydrocarbons is caused by asphyxia*
 - B. Severity of symptoms from amphetamine use is related to drug tolerance
 - C. Phencyclidine is a dissociative anaesthetic agent
 - D. Methamphetamine's effect is almost immediate when used nasally
 - E. Gamma hydroxybutyrate is produced by humans
- **34.** Concerning management of overdose of beta-blockers, which ONE of the following is FALSE
 - A. Isoprenaline may aggravate hypotension by vasodilatory effects
 - B. Glucagon enhances myocardial contractility
 - C. Dobutamine is not appropriate for maintaining blood pressure*
 - D. Adrenaline is preferred to noradrenaline
 - E. Atenolol can be dialysed
- **35.** Regarding benzodiazepine overdoses, which ONE of the following is TRUE
 - A. In isolated benzodiazepine overdoses, morbidity and mortality are low*
 - B. There is no specific central neuroreceptor for benzodiazepine
 - C. Benzodiazepines are not lipid soluble
 - D. Nystagmus is not seen in benzodiazepine overdose
 - E. Respiratory depression is not common.
- **36.** In psychoses, which ONE of the following is FALSE
 - A. Psychoses are axis 1 disorders in the DSM-V classification system

	D.	Dysthymic disorder is a form of depression			
	E.	Schizophrenia accounts for 25 % of hospital admissions.			
37. Concerning the conditions anorexia and bulimia, which ONE of the following is FALSE					
	A.	Eating disorders affect up to 10% of adolescent girls			
	B.	Bulimia usually begins between 17 and 25			
	C.	Parotid and submandibular gland enlargement is common			
	D.	Sexual abuse is not an aetiological factor*			
	E.	Bulimics have an intense need for approval			
38. Wh	nich ONI	E of the following is not an aetiological factor in trauma mortality			
	A.	Fall from height of greater than 2 metres			
	B.	Motor bike rider thrown 20 metres			
	C.	Age greater than 65 in patients who suffer a fall			
	D.	Gunshot wound to the chest			
	E.	Positive abdominal seat belt sign*			
39. Co	ncernin	g penetrating knife wounds to the abdomen, which ONE of the following is TRUE			
	A.	A positive wound examination is finding the anterior fascia penetrated*			
	B.	Sinograms are of great value			
	C.	CT without contrast is of no value			
	D. DPL is only positive if the red blood cell count is greater than 100,000 when the diapl involved				
	E.	Ultrasound is of no value for detecting intraperitoneal fluid			

Schizophrenia is characterised by primary delusions and hallucinations

In bipolar disorders, depressive episodes are less frequent than manic ones*

B.

C.

- 40. In fluid resuscitation, which ONE of the following is TRUE
 - A. Minimum volume resuscitation is not useful in ruptured abdominal aortic aneurysms
 - B. Crystalloid fluids are superior to colloids for maintaining blood pressure
 - C. All crystalloid resuscitation fluids have a high sodium concentration, similar to that of extracellular fluid*
 - D. Hypothermia is not a risk with intravenous fluids at room temperature
 - E. Haemolytic transfusion reactions are fatal for 1in 10,000 transfusions
- 41. In the diagnosis and treatment of acute cholecystitis, which ONE of the following is FALSE
 - A. Most clinicians advocate early cholecystectomy (ie within several days after onset of symptoms) on the basis of lower complication rates, reduced costs and shorten recovery period
 - B. Biliary colic localises to the mid-epigastrium less often than the right upper quadrant*
 - C. Courvoiser sign refers to a palpable, non-tender gallbladder in a patient with jaundice
 - D. Computed tomography is inferior to ultrasound in the assessment of the acute biliary disease
 - E. The prevalence of acute cholecystitis is approximately 5% among patients presenting to the emergency department with abdominal pain
- **42.** Which ONE of the following statements about volvulus is FALSE
 - A. Sigmoid volvulus is more common in elderly patients with debilitating disease who lead lives of inactivity
 - B. Volvulus of the caecum occurs in all ages but is most common in persons 25 to 35 years of age
 - C. Fluid and electrolyte sequestration is usually not a problem in sigmoid volvulus, unlike small bowel obstruction
 - D. A single massively dilated loop of bowel with both ends down in the pelvis and the bow positioned superiorly ("bent inner tube" appearance) is characteristic of a caecal volvulus on plain-film radiograph of the abdomen*
 - E. The treatment of choice for a non-strangulated sigmoid volvulus is decompression and de-torsion with a rectal tube via a sigmoidoscope
- 43. In the diagnosis and treatment of acute appendicitis, which ONE of the following is FALSE
 - A. In approximately 20% of patients undergoing exploratory laparotomy because of suspected appendicitis, the appendix is normal

- B. A history of anorexia is helpful in differentiating appendicitis from pelvic inflammatory disease*
- C. The inflammatory process of acute appendicitis may cause pyuria or haematuria
- D. Although appendicitis may be ruled out if the appearance of the appendix is normal on ultrasonagraphy, a normal appendix is seen in less that 5% of patients
- E. As compared with ultrasonagraphy, CT has greater sensitivity and negative predictive value
- 44. Which ONE of the following statements concerning soft tissue infections or wounds is FALSE
 - A. Patients with fasciitis manifest moderate to severe systemic toxicity, often out of proportion to the cutaneous findings, with high fever, tachycardia, anxiety, disorientation and often frank shock.
 - B. Early periorbital cellulitis in an adult may be treated with oral antibiotics and followed up on an outpatient basis, whereas orbital cellulitis requires hospitalisation and intravenous antibiotics
 - C. The treatment of cutaneous abscess is incision and drainage. Antibiotics are not indicated in patients with normal host defences
 - D. Tetanus prophylaxis is indicated for any wound in a patient who has been fully immunised, if the time since last vaccination is greater than five years*
 - E. All human bites to the hand including equivalent clenched fist injuries require prophylactic treatment with antibiotics
 - 45. In the management of acute ischaemia of the lower limb, which ONE of the following is FALSE
 - A. Patients with microemboli are anticoagulated for up to 5 days
 - B. Urokinase is superior to streptokinase because of lower complication rates
 - C. Therapy should commence within 12 hours of onset of ischaemia
 - D. Contraindications to thrombolytic therapy are the same as those for myocardial infarction thrombolysis*
 - E. Embolic ischaemia is best treated by surgical intervention
- **46.** Regarding thromboembolic disease, which one of ONE the following is TRUE
 - A. D-dimer has negative predictive value only in patients with low pre-test clinical probability*
 - B. Plesthmography is superior to ultrasound in diagnosis of thrombosis in the lower limb
 - C. Pulmonary emboli can arise from organised clot
 - D. 50% of all fatal emboli come from thromboses in the calf
 - E. CT pulmonary angiography must be performed within 24 hours of embolisation to the lungs.
- 47. Concerning the indications for CT scanning in minor head injuries, which ONE of the following is TRUE
 - A. CT scanning is not recommended in children with a GCS of 10 or greater

- B. Post traumatic amnesia is not an indicator for CT findings
- C. Patients with a GCS of 15 don't require CT scanning
- D. Focal neurological deficit is an absolute indicator for CT scanning*
- E. CT is indicated in all patients over 70 years of age with dementia.

48. When investigating patients with possible subarachnoid haemorrhage, which ONE of the following is TRUE

- A. Brain CT without contrast is the initial investigation of choice*
- B. Xanthochromia can be reliably detected by visual inspection
- C. MRI is a reliable tool for detecting small aneurysms
- D. CT has a sensitivity of only 10% at 7 days post haemorrhage
- E. A positive D-dimer on CSF is not diagnostic

49. In supra-condylar fractures in children, which ONE of the following is FALSE

- A. Supra-condylar fractures are more common in children than in adults
- B. 95% are displaced posteriorly
- C. In some undisplaced fractures the fracture line may not be visible on x-ray
- D. Displaced fractures should be treated initially by closed reduction
- E. Neurovascular compromise is uncommon*

50. Concerning painful hips in children, which ONE of the following is TRUE

- A. Acute transient tenosynovitis is the commonest cause of hip pain in children less than 10 years of age*
- B. Legg-Clave-Perthes disease is bilateral in 25% of cases
- C. A raised ESR is diagnostic of septic arthritis
- D. Slipped capital femoral epiphysis is more common in females
- E. MRI is less sensitive than bone scan in detecting avascular necrosis

51. Regarding vertebral fractures, which ONE of the following is FALSE

- A. Bilateral interfacetal dislocations occur in flexion
- B. Chance fractures are not commonly associated with abdominal injuries*
- C. Clay-shoveler fractures are the least unstable of cervical spinal fractures

- D. Up to 40% of cervical fractures are associated with neurological injury
- E. Wedge fractures of the lumbar spine rarely have associated neurological injury.

52. Concerning back pain, which of ONE the following is TRUE

- A. Sciatica is pain radiating from the back to above the knee
- B. Loss of anal tone is a reliable indicator of cauda equina
- C. Epidural abscesses are common in intravenous drug users
- D. A positive Laseuge's sign indicates nerve root irritation*
- E. Spondylosis is not congenital

53. Regarding injuries of the lower limb, which ONE of the following is FALSE

- A. 10% of dislocations of the hip are anterior
- B. Dislocations of the knee often reduce spontaneously
- C. Ottawa ankle rules include tenderness along the anterior of the distal tibia*
- D. Sever's disease is an overuse injury of the Achilles tendon insertion
- E. Osteochondral fractures of the talus commonly occur over the medial portion

54. In regard to renal colic, which of the following statements is TRUE

- A. Haematuria is absent in 1% of patients with renal colic
- B. Ultrasound is the preferred investigation for visualisation of uncomplicated midureteral stones
- C. Recurrent episodes occur in approximately 20% of patients
- D. Uric acid stones are radio-opaque and represent 10% of all stones
- E. Stones less than 5mm will pass within one month in 90% of cases*
- 55. With respect to testicular pain in a 14-year-old male, which of the following statements is FALSE
 - A. Torsion of the appendages probably occurs more often than torsion of the testes itself
 - B. Diagnosis of epididymo-orchitis necessitates evaluation of the urinary tract as part of follow-up
 - C. Salvage rate in torsion operated on within 4 hr is approximately 75%*
 - D. Ten percent of testicular tumours present with pain secondary to acute haemorrhage within the tumour
 - E. Bilateral orchidopexy should be performed in cases of testicular torsion
- 56. Drugs useful for tocolysis in a 27-week pregnant woman with pre-term labour include all EXCEPT

- A. Magnesium
- B. Indomethacin
- C. Salbutamol
- D. Nifedipine
- E. Betamethasone*
- 57. In management of the patient with menorrhagia, which ONE of the following statements is FALSE
 - A. Anovulatory DUB is generally not responsive to hormonal therapy*
 - B. NSAID's are useful in the treatment of menorrhagia, by blocking prostaglandin PGE2
 - C. NSAID's have been associated with a 30 50% reduction in bleeding in patients with Menorrhagia
 - D. Patients over 35 require endometrial biopsy prior to definitive hormonal therapy for menorrhagia
- E. Coagulopathies such as platelet function disorders may first manifest as severe perimenarcheal bleeding
- 58. With respect to sudden visual loss, which ONE of the following statements is FALSE
 - A. Bilateral occipital infarction may present with bilateral blindness but pupil responses would be expected to be intact
 - B. Poisoning with quinine or methanol may present with bilateral blindness and fixed, constricted pupils*
 - C. Acute vitreous haemorrhage presents with variable degrees of visual loss and is painless
 - D. Optic neuritis generally presents with a gradual visual decline and relative afferent pupillary defect should be present
 - E. Treatment of central retinal artery occlusion is generally futile if the obstruction has been present for more than two hours
- 59. In considering dentoalveolar trauma, which ONE of the following statements is TRUE
 - A. An Ellis class I fracture involves the enamel and dentin components of a tooth
 - B. A frank drop of blood and exposed pulp implies an Ellis class III fracture and emergency dental review*
 - C. A percentage point for successful re-implantation is lost each hour that an avulsed tooth is absent from the oral cavity
 - D. Avulsed primary anterior teeth should be replaced into their sockets to avoid subsequent facial deformity
 - E. Milk should not be used as a storage and transport medium for avulsed teeth due to its high concentration of calcium and magnesium
- 60. In an 8 yr old child with tonsillitis, which ONE of the following statements is FALSE

- A. Tonsillar exudate is rarely seen in viral pharyngitis*
- B. Antibiotic treatment has only a minor impact on the duration of symptoms in acute sore throat
- C. Phenoxymethylpencillin 10mg /kg is antibiotic treatment of choice for severe tonsillitis
- D. Objectives of treatment with penicillin include prevention of rheumatic fever and prevention of suppurative complications
- E. Post-streptococcal glomerulonephritis is a non-suppurative complication of strep pharyngitis that is not preventable with antibiotic therapy