RESPIRATORY SUSAN TUCKER

- 1.Which is the most common organism causing community acquired pneumonia?
 - a) pneumococcus
 - b) hemophilus influenzi
 - c) viral
 - d) gm negatives
 - e) mycoplasma
- 2.which organism causing pneumonia has an increased association with COPD
 - a) pneumococcus
 - b) hemophilus influenzi
 - c) viral
 - d) gm negatives
 - e) mycoplasma
- 3. Which organism causing pneumonia has an increased incidence in IV drug users and those post-influenza?
 - a) pneumococcus
 - b) staph aureus
 - c) viral
 - d) gm negatives
 - e) mycoplasma
- 4. Which drug/s should be used in adult mild-mod. Community acquired pneumonia?
 - a) amoxycillin
 - b) doxycycline
 - c) rulide
 - d) any of the above as a single drug
 - e) amoxycillin and rulide
- 5. Which drug regimen is suggested for severe community acquired pneumonia initially?
 - a) benzyl penicillin and gentamicin and erythromycin
 - b) benzyl penicillin and gentamicin
 - c) ceftriaxone and gentamicin
 - d) gentamicin and erythromycin
 - e) flucloxacillin and gentamicin
- 6. Which bug makes up 50% of hospital acquired pneumonia?
 - a) pneumococcus
 - b) staph aureus
 - c) gm -ve bacilli
 - d) legionella
 - e) chlamydia psittici
- 7. What is the largest size spontaneous primary pneumothorax that can be managaed without aspiration or thoracostomy?
 - a) 10%
 - b) 15%
 - c) 20%
 - d) 30%
 - e) 35%
- 8.In which sort of pneumoathorax is aspiration likely to be most successful?
 - a) traumatic
 - b) secondary

- c) primary
- d) iatrogenic
- e) equally effective in all of the above
- 9. What if the role of aspiration in traumatic pneumothoraces?
 - a) there is no role
 - b) first line management in small pneumathoraces only
 - c) it should be tried in all pneumathoraces as long as there is no respiratory compromise
 - d) it can be repeated twice before thoracostomy tube is considered
 - e) none of the above
- 10. Whatis the recurrence rate of primary spontaneous pneumathoraces?
 - a) 10%
 - b) 20%
 - c) 30%
 - d) 40%
 - e) 50%
- 11. Which is not a biochemical feature of transudative pleural effusions?
 - a) protein<30g/l
 - b) pleural protein:serum protein < 0.5
 - c) pleural LDH: seurm LDH < 0.6
 - d) pleural glucose< serum glucose
 - e) none of the above are biochemical features
- 12. Which of the list below is not the cause of an exudative pleural effusion?
 - a) viral pneumonia
 - b) pancreatitis
 - c) TB
 - d) Malignancy
 - e) Nephrotic syndrome
- 13. Which of the list below is not a cause of a transudative pleural effusion?
 - a) CCF
 - b) PE
 - c) SLE/RA
 - d) Cirrhosis
 - e) Nephritic syndrome
- 14. Which is not a possible cause of haemoptysis?
 - a) PE
 - b) Mitral stenosis
 - c) Pneumonia
 - d) Aortic stenosis
 - e) Neoplasm
- 15. Which statement is false about haemoptysis?
 - a) massive haemoptysis is greater than 600ml in 24 hours
 - b) a CXR is normal in about 25 % of cases
 - c) in any four cases, one is likely to be due to nonteuberculous infection, one due to neoplasia, one due to rarer causes and one idiopathic
 - d) in massive hemoptysis the pt should be nursed bleeding lung up
 - e) if possible a double lumen tube should be reserved for post brochoscopy as a rigid bronchoscope cannot be passed down it

- 16. Which drug/intervention is of no proven benefit in management of acute severe asthma in adults?
 - a) steroids
 - b) magnesium
 - c) steroids
 - d) CPAP
 - e) Aminophylline
- 17.As a generalization, at what PEFR should someone be admitted?
 - a) PEFR<25% pretreatment and <40% posttreatment
 - b) PEFR<10% pretreatment and <20% posttreatment
 - c) PEFR<40% pretreatment and <60% posttreatment
 - d) PEFR<50% pretreatment and <70% posttreatment
 - e) PEFR is of no value in this decision
- 18. Which statement is false?
 - a) Ipratropium is of definite proven benefit in asthma when used with B agonists
 - b) Ketamine is the intubation agent of choise but in ongoing therapy in acute asthma no benefit has yet been proven in the few studies done
 - c) Oral steroids are as effective as parenteral steroids
 - d) Aminophylline may have a role in acute treatment in children but not in adults
 - e) No studies have been done to see whether adrenaine is better than parenteral salbutamol
- 19. Which is FALSE regarding CPAP in acute asthma?
 - a) it decreases the work of breathing
 - b) it causes bronchodilation and decreases airway resistance
 - c) it improves gas exchange if used alone in severe asthma
 - d) it may be an effective alternative to ETT when maximal pharmacotherapy is used
 - e) it reduces the cardiovascular impact of changes in pressures caused by asthma
- 20. Which drug/intervention is rarely used acutely in the acute setting of exacerbation of COAD?
 - a) salbutamol
 - b) CPAP
 - c) Aminophylline
 - d) Steroids
 - e) Ipratropium
- 21. Which statement is incorrect regarding the acute management of exacerbation of COAD?
 - a) support for the widespread use of steroids is limited
 - b) support for the use of salbutamol combined with ipratropium is limited
 - c) B agonists are widely used assuming the possibility of a small reversible component to the airflow obstruction
 - d) Support for the widespread use of CPAP and BiPAP is minimal
 - e) Theophylline is rarely used acutely
- 22. Regarding pulmonary emboli, which statement is correct?
 - a) a normal Aa gradient excludes a PE
 - b) a paO2>80 excludes a PE
 - c) a normal CXR excludes a PE
 - d) anticoagulation reduces mortality from PE from 30% to 10%
 - e) all of the above are correct
- 23. With regards to PE which statement is CORRECT?
 - a) embolectomy has a better outcome than thrombolysis in massive PE
 - b) streptokinase is more effective with lower side effects than tPA in massive PE
 - c) LMWH is probably as effective as unfractionated heparin
 - d) TOE is sensitive for peripheral emboli

e) Spiral CT angiography is better at detecting peripheral clots than central

ANSWERS

1)A 2)B 3)B 4)D 5)A 6)C 7)C 8)C 9)A 10)E 11)D 12)E 14)D 15)D 16)E 17)A 18)A 19)C 20)C 21)D 22)D 23)C 13)C

+Respiratory MCQ's

Di Flood

- 1. Which is true regarding community acquired pneumonia?
 - a. Use of high dose penicillin in penicillin resistant Strep pneumoniae is rarely successful in treating the pneumonia.
 - b. Mycoplasma pneumoniae is more commonly seen in elderly patients.
 - c. Leigonella spp pneumonia is usually moderately severe and can cause pancreatitis, and myocarditis.
 - d. H. influenzae is more commonly seen in young, otherwise well patients.
 - e. Klebsiella pneumoniae is an aerobic gram positive bacillus.
- 2. Which statement regarding pneumonia in INCORRECT?
 - a. In patients with AIDS once the CD4 count reaches 800 they are at high risk of PCP.
 - b. Mild PCP can be treated with oral cotrimoxazole for 21 days.
 - c. Transplant patients are most at risk of opportunistic infections between days 30 and 120 post transplant.
 - d. Gram –ve organism's account for 50% of all hospital acquired pneumonias.
 - e. Only 40% of patients who aspirate will develop pneumonia.
- 3. Which is INCORRECT regarding lung abscess?
 - a. 90% of patients will have evidence of periodontal disease or some predisposition to aspiration.
 - b. Staph aureus is the most common cause.
 - c. Sputum examination is often unhelpful in identifying the organism involved.
 - d. Medical management with antibiotics for up to 2 months is the treatment of choice.
 - e. Non infectious causes of lung abscess include rheumatoid nodules and pulmonary infarction.
- 4. A patient with pneumonia develops a pleural effusion, which you aspirate. Which of the following is supportive of an empyema on examining the fluid?
 - a. Pleural protein <30g/l
 - b. Pleural glucose: plasma glucose > 1.0
 - c. Pleural LDH: serum LDH ratio < 0.6
 - d. pH 7.15
 - e. RBC > 100,000 mm3.

1=C 2=A 3=B 4=D

- 5. Which of the following is **incorrect** regarding pneumothorax?
 - a. 70% of patients with pneumothorax are smokers.
 - b. Catamenial pneumothorax may occur probably secondary to endometrial metastases to lungs.
 - c. Oxygen treatment will increase rate of pleural air resorption 4 times and should be given to all patients with pneumothorax.
 - d. A patient with calculated average interpleural distance of 1cm can be managed conservatively.
 - e. The recurrence rate of pneumothorax is approx 15% with half of those occurring in the first year.
- 6. A 50 year old male presents with haemoptysis of approx 700 mls over 24 hours. Which is true regarding this man?
 - a. The bleeding is most likely secondary to pulmonary vessels.
 - b. The preferred position for this patient is with the affected lung up.
 - c. Placement of an ETT will prevent possible contamination of the good lung with blood.
 - d. Placement of a Robertshaw ETT will protect the good lung and allow passing of a fiberoptic bronchoscope.
 - e. Bronchial artery embolization has an 80% chance of stopping the bleeding.
- 7. Regarding treatment of asthma in adults which is the correct answer.
 - a. Intravenous hydrocortisone will have faster onset of anti-inflammatory action than oral prednisolone.
 - b. Nebulized ipatropium bromide in combination with salbutamol has been shown to have a better clinical outcome than salbutamol used alone.
 - c. It has been shown that IV aminophylline use in severe asthmatics with optimal beta agonist and corticosteroid therapy will confer benefit.
 - d. Magnesium has been shown in severe asthma to reduce admission rates and improve FEV1.
 - e. Long acting beta agonist have been shown to be beneficial in acute exacerbations of asthma.
- 8. Which is true of COAD?
 - a. 100 % of patients with homozygous alpha-1 antitrypsin deficancy patients will exhibit evidence of emphysema eventually.
 - b. "pink puffers have predominantly chronic bronchitis.
 - c. Use of longterm inhaled steroids has been shown to decrease morbidity.
 - d. Use of CPAP in acute exacerbations will improve gas exchange.
 - e. All of above are incorrect.

5=E 6=E 7=D 8=E

- 9. Which is not true of lung transplant patients.
 - a. Early rejection may present as cough, chest tightness and decline in FEV1 by greater than 10%.
 - b. Lung transplant patients do not require prophylaxis for endocarditis.

- c. Post transplant lymphoproliferative disease is usually fatal is occurring greater than one year post transplant.
- d. Obliterative bronchiolitis is the most common cause of death 2 years plus after transplant.
- e. CMV infection will usually cause neutropenia..
- 10. What is the overall probability of PE in a patient with a normal V:Q scan?
 - a. 0%
 - b. 4%
 - c. 8%
 - d. 10%
 - e. none of the above.
- 11. Which is incorrect regarding acute respiratory distress syndrome?
 - a. Reduced compliance of lungs due to increased collagen and fibroblast activity is an early stage of ARDS.
 - b. Severe hypoxaemia despite normal or low PaC02 occurs early.
 - c. ARDS usually develops 12-72 hrs post triggering event.
 - d. Mechanical ventilation can sometimes worsen oxygen delivary to tissues secondary to reduced cardiac output.
 - e. Inhalational nitric oxide has been used in the treatment but is at present experimental due to unknown long term effects and clinical relevance of improvement.
- 12. which is not a recognized sign on lateral neck xray of adult epiglottitis?
 - a. Blunted swollen epiglottis
 - b. Supraglottic haze
 - c. Prevertebral swelling
 - d. Swelling aryepiglottic folds
 - e. All of the above.

9=B 10=B 11=A 12=E

Respiratory MCQs

- 1. Which of the following is most correct about respiratory infections in patients with HIV?
 - a. CMV is a common cause of clinically significant disease
 - b. CAP pneumonias are more common than PCP in patients with HIV
 - c. PCP occurs when the CD4 count is between 800 and 1000
 - d. Mortality from bacterial pneumonia is higher in patients with HIV than in patients who are HIV-negative
 - e. Pulmonary aspergillosis is not a life threatening illness.
- 2. With regard to aspiration pneumonia, which of the following is incorrect?
 - a. The right lower lobe is the commonest area for aspiration in the erect position
 - b. pH less than 2.0 is associated with a higher mortality
 - c. Many of the symptoms of aspiration are due to the body's inflammatory response to the infectious or irritative material.
 - d. Streptococcus species are the commonest infecting organism

- e. All patients who aspirate should be commenced on broad spectrum antibiotics.
- 3. In patients with Tuberculosis, which of the following is incorrect?
 - a. Aerosolised saliva and sputum are the commonest modes of transmission.
 - b. Interferon 8 levels increase in patients who are responding to treatment.
 - c. Pulmonary TB is an AIDS-defining illness.
 - d. Extra-pulmonary manifestations are unlikely in HIV patients.
 - e. Initial therapy is with isoniazid, rifampicin, ethambutol and pyrazinamide for 2 months.
- 4. In spontaneous pneumothorax, which is incorrect?
 - a. 95% will have pleuritic chest pain on the side of the pneumothorax
 - b. Only 5% with be tachypnoeic or tachycardic
 - c. Spontaneous pneumothoraces of 35% deflation can be managed conservatively
 - d. CT scan is the current "gold standard" for measuring deflation
 - e. Spontaneous pneumothorax in HIV patients suggests PCP infection and carries a high mortality