RENAL DISEASES

CHOOSE THE NUMBERS OF CORRECT ANSWERS:

1) **Nephroptosis may be complicated by**
   1. arterial hypertension; *
   2. kidneys amyloidosis;
   3. pyelonephritis; *
   4. bleeding from kidneys fornix.

CHOOSE THE NUMBER OF CORRECT ANSWER:

2) **Nephrolithiasis is complicated by pyelonephritis in**
   1. 10% cases;
   2. 20% cases;
   3. 50% cases; *
   4. 80% cases;
   5. 100% cases.

CHOOSE THE NUMBERS OF CORRECT ANSWERS:

3) **Nechiporenko urinalysis has clinical value in**
   1. active chronic calculous pyelonephritis; *
   2. primary shrunken kidney;
   3. urethritis; *
   4. all mentioned above cases;
   5. non of mentioned above cases.

4) **Urine culture has clinical value in**
   1. acute purulent pyelonephritis; *
   2. active chronic pyelonephritis; *
   3. exacerbations of chronic glomerulonephritis;
   4. all mentioned above cases;
   5. non of mentioned above cases.

CHOOSE THE NUMBER OF CORRECT ANSWER:

5) **Urodynamic disturbances in pregnancy begin at**
   1. 2-4 weeks of pregnancy;
   2. 5-6 weeks;
   3. 7-10 weeks; *
   4. 15-20 weeks;
   5. 30 week.

6) **Leukocyturia – presence of leukocytes in urine in a number more than**
   1. 10 in a field, or 4000 in 1 ml; *
   2. 3-4 in a field, or 2000 in 1 ml;
   3. 15-20 in a field, or 6000 in 1 ml.

7) **Leukocyturia is present in**
   1. pyelonephritis; *
   2. glomerulonephritis
   3. kidneys amyloidosis
   4. in all mentioned above cases
8) In urinalysis bacteriuria, leukocyturia and lowered relative density was found. Your next step would be
   1. microbes susceptibility to antibiotics assessment in daily urine sample;
   2. antibiotics prescription without microbes susceptibility to antibiotics assessment;
   3. microbes susceptibility to antibiotics assessment in nocturnal urine culture;*
   4. culture of the urine taken via catheter.

CHOOSE THE NUMBERS OF CORRECT ANSWERS:
9) Urography in pyelonephritis is useful in
   1. kidneys dimensions estimation; *
   2. kidneys position location; *
   3. urine tract infection detection;
   4. calculi detection;*
   5. Urine flow through ureter assessment.

CHOOSE THE NUMBER OF CORRECT ANSWER:
10) In 45 y.o. pt. with pyelonephritis fast to Ampicillin and Gentamycine colibacilli were found in urine.
    Chose the right medication for treatment
    1. Kefzol;
    2. Abactal; *
    3. Erithromycine;
    4. Oksacilline.

11) Which medication can be given for pyelonephritis in the first trimester of pregnancy
    1. semi synthetic penicillin’s; *
    2. tetracycline;
    3. biseptol;
    4. karbenicilline.

12) Which drug can be prescribed for urinary stone disease and secondary pyelonephritis in remission
    1. fangotherapy;
    2. darsonval;
    3. inductothermia;
    4. mineral water intake. *

ADD:
13) The most common pyelonephritis cause agent is ______________.

CHOOSE THE NUMBER OF CORRECT ANSWER:
14) Chose the right statement
    1. Bacteriuria is always the sign of chronic pyelonephritis exacerbation.
    2. Bacteriuria can be asymptomatic and can be not associated with chronic pyelonephritis exacerbation.*
15) **Which morphological changes are characteristic for chronic pyelonephritis?**
   1. kidney size insidious decreasing. *
   2. morphological changes are usually symmetrical;
   3. deformity of the renal pelvis and calyces; *
   4. parenchimatus changes are localized to cortical layer; 
   5. parenchimatus changes are localized to medullar layer;*

MAKE THE RIGHT SEQUENCE (3-1-2)

16) **Stages of renal parenchyma damage in chronic pyelonephritis:**
   1. development of initial elements of sclerosis with glomeruli and vessels incorporation in the process;
   2. terminal sclerosis appearing, leading to renal failure;
   3. interstitial infarcts and canaliculi atrophy with intact glomeruli.

CHOOSE THE NUMBERS OF CORRECT ANSWERS:

17) **Which signs are typical for chronic pyelonephritis exacerbation:**
   1. pain on urination;
   2. fever; *
   3. chill; *
   4. intensive pain in lumbar area;
   5. nicturia; *
   6. macrohematuria.

18) **What can be find on physical examination of pts. with pyelonephritis:**
   1. legs and feet puffiness, more prominent in evenings;
   2. facial puffiness, more prominent in the mornings; *
   3. pale skin and acrocyanosis;
   4. grayish skin or normal color skin; *
   5. lumbar area tapotement is painful (in one or both sides); *
   6. rigid and poorly controllable arterial hypertension.
   7. mild and readily controllable arterial hypertension in 50-70% of pts. *

19) **The main chronic pyelonephritis syndromes:**
   1. urinary syndrome *
   2. disuria *
   3. intocsication *
   4. nephrotic syndrome
   5. nephritic syndrome

20) **First line drugs for non-hospital chronic pyelonephritis exacerbation treatment:**
   1. amycacin *
   2. imipenem
   3. levoflocasacin *
   4. ciproflocasacin *
   5. cefepim

21) **What criteria indicate recovery from exacerbation chronic pyelonephritis:**
   1. X-rays picture became normal;
   2. elimination of causative agent (according to multiple urine cultures); *
   3. elimination of clinical signs (fever, dysuria); *
   4. renal ultra sound picture normalization;
   5. arterial blood pressure normalization;
   6. elimination of Leukocyturia, proteinuria in urinalysis.*
22) **Which factors are capable of chronic pyelonephritis course and prognosis deterioration:**
   1. prostate adenoma; *
   2. high BP;
   3. diabetes mellitus; *
   4. chronic obstructive lung disease;
   5. urine stones disease. *

23) **For diagnosis of chronic pyelonephritis the following tests can be used:**
   1. general urine analysis; *
   2. Reberg test;
   3. Zimnizky test; *
   4. Nechiporenko test; *
   5. Renal ultrasound. *

24) **Urine syndrome in pyelonephritis includes:**
   1. leukocyturia *
   2. erythrocyturia;
   3. proteinuria; *
   4. bacteriuria; *
   5. oliguria.

25) **CHOOSE THE NUMBERS OF CORRECT ANSWERS:**
   In actual bacteriuria the number of microorganisms per 1 ml of urine for *E. coli*:
   1. > 100;
   2. > 1000;
   3. > 10⁴;
   4. > 10⁵; *
   5. > 10⁶.

26) **ADD (isostenuria)**
   Urine specific gravity absence of variation - __________________ .

27) **CHOOSE THE NUMBERS OF CORRECT ANSWERS:***
   **Concentration function of the kidneys can be assessed by the following tests:**
   1. Addisa-Kakovskogo test;
   2. Amburge test;
   3. Zimnizky test; *
   4. Nechiporenko test;
   5. Folgard (with no water intake) *

28) **Diagnostic tests, capable of renal function assessment:**
   1. renal CT;
   2. urine culture;
   3. Zimnizky test; *
   4. Reberg test; *
   5. renal radioassay; *
   6. Renal ultrasound.

29) **Factors, contributing to chronic pyelonephritis development:**
   1. congenital renal pelvis and calyces system anomaly; *
   2. *E. coli*; *
   3. renal parenchyma tumor;
   4. urine stone disease; *
5. nephroptosis; *
6. renalis stenosis.

30) **For diagnosis of chronic pyelonephritis the following tests should be done:**
   1. renal biopsy;
   2. intravenous urography; *
   3. general urine analysis; *
   4. urine culture; *
   5. Zimnizky test; *
   6. Renal ultrasound.*

31) **For treatment of chronic pyelonephritis the following drugs can be used:**
   1. Nitroksoline; *
   2. Paline; *
   3. Prednisolone;
   4. Furadonine; *
   5. Ciclophosphane.

**CHOOSE THE NUMBER OF CORRECT ANSWER::**

32) **In development and progression of chronic glomerulonephritis the following factors have a particular impact:**
   1. immune; *
   2. haemodynamic;
   3. metabolic;
   4. obstructive.

**ADD:**

33) **Classification of glomerulonephritis by the course of the disease:**
   1. acute;
   2. chronic;
   3. __________________________ (subacute)

**CHOOSE THE NUMBERS OF CORRECT ANSWERS::**

34) **Glomerulonephritis can be classified by the clinical entire into the following groups:**
   1. secondary glomerulonephritis; *
   2. relapsing glomerulonephritis;
   3. idiopathic glomerulonephritis; *
   4. progressive glomerulonephritis

35) **Which forms refer to proliferative glomerulonephritis:**
   1. diffuse proliferative endocapillary (acute infectious) *
   2. extracapillary (diffuse with crescents, rapidly progressive); *
   3. membranous-proliferative; *
   4. with minimal changes;
   5. mesangio-proliferative (Ig nephropathy, Berge disease); *
   6. membranous.

**CHOOSE THE NUMBER OF CORRECT ANSWER:**

36) **For exacerbation of chronic glomerulonephritis the following is characteristic:**
   1. increment of proteinuria and hematuria and edema; *
   2. increment of proteinuria, development of chronic renal failure, hypotension, pyuria;
   3. development of hypertensive syndrome, acute renal failure, hypocholesterolemia, microhematuria.
37) Clinical picture of chronic glomerulonephritis is characterized by the combination of the main syndromes:
1. urine syndrome; *
2. nephritic syndrome; *
3. pain;
4. hypertension.

38) Nephrotic syndrome is consist of:
1. massive proteinuria; *
2. hypoalbuminuria; *
3. edema; *
4. hyperalbuminemia;
5. hyperlipidemia; *
6. microhematuria.

39) Urine syndrome in glomerulonephritis is characterized by:
1. hematuris; *
2. bacteriuria;
3. cristalluria;
4. leukocyturia;
5. proteinuria. *

MATCH THE SEQUENCE:
40) Nephrotic edema pathogenesis: (2-1-6-4-5-3)
1. hypoalbuminemia;
2. massive proteinuria;
3. rennin angiotensin aldosterone system activation;
4. fluid transition into interstitial cavity;
5. decrease of total circulating blood volume;
6. decrease of intracapillary oncotic pressure.

41) MATCH THE SEQUENCE
Type of glomerulonephritis course: 
1. continually relapsing 
2. mild frequency of relapse 
3. rarely relapsing 
4. frequently relapsing
Frequency of exacerbations: 
1a) 1 per 1-3 years 
2b) no more than 1 per 8 years 
3c) every 4-7 years 
4d) not full elimination of the disease signs after 1-2 years of treatment or permanent signs presence during all time of the disease

CHOOSE THE NUMBERS OF CORRECT ANSWERS:
42) Criteria of exacerbation for patients with solated urine syndrome are the following:
1. increasing of proteinuria in 8-10 times in sporadic urine analyses; *
2. increasing of erythrocyturia in 2-3 times in urine analyses;
3. increasing of erythrocyturia in 8-10 times in urine analyses;*
4. diurnal loss of protein with urine increment for more than 1 g;
5. diurnal loss of protein with urine increasing in 8-10 times *

43) Signs of recover from glomerulonephritis exacerbation are the following:
1. normalization or decreasing to normal levels of BP;
2. hypoglycemia;
3. absence of proteinuria and erythrocyturia; *
4. elimination of nephritic syndrome. *

44) **Complication of the glomerulonephritis are the following:**
1. encephalopathy (eclampsia); *
2. chronic renal failure; *
3. arterial hypertension;
4. acute renal failure. *

45) **Pathogenesis therapy for glomerulonephritis consists of:**
1. diuretics;
2. citostatics; *
3. hemodialysis;
4. glucocorticoids. *

46) MATCH THE SEQUENCE : (1-А, D, E; 2-В, С)

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. symptomatic therapy</td>
<td>A. hypotensives</td>
</tr>
<tr>
<td>2. substitutional therapy</td>
<td>B. peritoneal dialysis</td>
</tr>
<tr>
<td></td>
<td>C. renal transplantation</td>
</tr>
<tr>
<td></td>
<td>D. diuretics</td>
</tr>
<tr>
<td></td>
<td>E. ACE inhibitors</td>
</tr>
</tbody>
</table>

CHOOSE THE NUMBER OF CORRECT ANSWER:
47) **Primary prevention of acute glomerulonephritis consists of:**
1. hospitalisation in timely manner;
2. in time streptococcal infection treatment; *
3. in time complications treatment.

48) **Test, capable of identifying the morphological type of chronic glomerulonephritis:**
1. renal CT;
2. Reberg test;
3. Zimnizky test;
4. Renal ultrasound;
5. Renal biopsy; *
6. Renography.

49) **The diet of patient with glomerulonephritis should be aimed at:**
1. decrease of fluids and protein intake;
2. decrease of animal fats, salt, carbohydrates intake;
3. decrease of protein, salt, fluids intake. *

CHOOSE THE NUMBERS OF CORRECT ANSWERS:
50) **Typical signs of membranous glomerulonephritis are the following:**
1. insidious beginning; *
2. first sign - edema; *
3. frequently hematuria;
4. possibility of spontaneous remission;
5. periodical proteinuria.

51) **Typical signs of the mesangio-proliferative glomerulonephritis are the following:**
1. early malignant arterial hypertension;
2. frequently - hematuria; *
3. relatively benign course of the disease; *
4. frequent exacerbations;
5. early development of nephritic syndrome.

52) For glomerulonephritis diagnosis the following instrumental tests are frequently used:
1. intravenous urography;
2. renal radioassay;
3. renal biopsy;*
4. Reberg test. *

ADD: (ERYTHROCYTURIA)

53) Urine syndrome in chronic glomerulonephritis includes proteinuria, cilinduria, __________.

54) Nephrotic syndrome signs are the following: hypoproteinemia, hypercholesterinemia, edema, ________________, (albuminemia)

<table>
<thead>
<tr>
<th>ANSWERS RENAL DISEASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>11</td>
</tr>
<tr>
<td>12</td>
</tr>
<tr>
<td>13</td>
</tr>
<tr>
<td>14</td>
</tr>
<tr>
<td>15</td>
</tr>
<tr>
<td>16</td>
</tr>
<tr>
<td>17</td>
</tr>
<tr>
<td>18</td>
</tr>
<tr>
<td>19</td>
</tr>
<tr>
<td>20</td>
</tr>
<tr>
<td>21</td>
</tr>
<tr>
<td>22</td>
</tr>
<tr>
<td>23</td>
</tr>
<tr>
<td>24</td>
</tr>
<tr>
<td>25</td>
</tr>
<tr>
<td>26</td>
</tr>
<tr>
<td>27</td>
</tr>
</tbody>
</table>