

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



# CASES

Pearsonvue exam (KSA)



الأسئلة خاصه لأسئلة بيرسون فيو لتخصص الصيدله للحصول على  
ترخيص مزاوله المهنة من قبل هيئة السعوديه للتخصصات الصحيه  
يتكون الاختبار من 100 سؤال اختياري يتكون من 3 اجزاء 1- أسئلة  
فارماكولوجى 2- مسائل رياضية 3- Cases

المذكره مجانيه وليست للبيع المقابل الوحيد هو الدعاء لمن تعب و ساهم فى تجميع هذه  
المذكره و رجاء مراجعة الجروب صاحب فكرة انشاء هذه المذكره كل فتره لمتابعة كل ما  
هو جديد نظراً للتحديث الذى يتم كل فتره على الأسئلة من قبل شركة بيرسون فيو و رابط  
الجروب :

<https://www.facebook.com/groups/pearsonvue.questions>

1- 85 year-old woman is taking ferrous sulfate to treat an iron deficiency anemia. Changes in which one of the following **pharmacokinetic** properties associated with aging can most affect this agent?

**A. Absorption.**

- B. Distribution.
- C. Metabolism.
- D. Renal elimination

\*\*

2- All the following patients are seeing their pediatrician today and are due for immunizations on the basis of the routine schedule. For which one of the following patients would it be best to recommend **deferring** immunizations until later?

**A. 12-month-old boy who recently completed a cycle of chemotherapy for acute lymphocytic leukemia.**

- B-6-month-old girl receiving amoxicillin for otitis media.
- C -12-month-old HIV-positive boy who's most recent CD4 count was greater than 1000.
- D-12-year-old girl completing a prednisone "burst" (1 mg/kg/day for 5 days) for asthma exacerbation

\*\*

3-18 month-old baby with a history of **premature birth** and **chronic lung disease** is admitted to the pediatric intensive care unit with respiratory distress requiring **intubation**; **fever**; and a 3-day history of cold-like symptoms. A nasal swab is **positive for RSV**. Which one of the following is the best intervention?

- A. Palivizumab.
- B. Corticosteroids.
- C. Cefuroxime.

**D. Intravenous fluids and supportive care**

\*\*

4- A **young girl** has **seizures** and **tremors**, the physician prescribed **oxycarbamazepin** after 2 weeks of administration, redness and pruritic rash

- A-shift to carbamazepine
- B-shift to ethsuoamide**
- C-shift to clozapine

D-keep using oxy

N.B: **Ethsuoxmide** is the drug of choice for **petit mal epilepsy** which usually associated with children

\*\*

5- A woman is taking **oxycarbamzipine**, after 2 weeks of administration, redness and flushing appear... What is the best choice for her?

A/ shift to phenytoin

B/ shift to carbamazepine

C/ take clozapine

**D/ keep using oxycarbamazipine**

N.B: It is **normal** side effect but in other question (**young girl**) answer is shift to **ethosuximide**

\*\*

6-FDA Fast Track what this means:

a-For drug that shows promising results for life-threatening disease with other drugs available can treat it

**b- A drug that shows promising results for life-threatening disease with NO others available can do that**

c-A drug that shows cost effectiveness

d-A drug with side effects

\*\*

7- A 9-year-old boy has a new diagnosis of **ADHD**. At school, he is disruptive, talks when the teacher is talking, and runs around the classroom. His parents report extreme difficulty in getting him to do his homework after school. Which one of the following is best for his initial drug therapy?

**a. Methylphenidate extended release given once daily.**

b. Methylphenidate immediate release given 2 times/day with doses administered 4 hours apart.

c. Guanfacine given at bedtime.

d- Methylphenidate given 2 times/day with doses administered 4 hours apart

N.B: ADHD = Attention Deficit Hyperactivity Disorder

\*\*

8- F.A. is a 55-year-old woman with **rheumatoid arthritis**. On diagnosis 1 year ago, F.A. had an RF titer of 1:64 signs and symptoms of inflammation in the joints of both hands, and about 45 minutes of morning stiffness. She began therapy with **methotrexate**, and she is presently receiving 15 mg every week, **folic acid** 2 mg/day, ibuprofen 800 mg 3 times/day, and omeprazole 20 mg/day. At today's clinic visit, F.A. reports a **recurrence** of her symptoms. Radiographic evaluation of her hand joints shows **progression of joint space narrowing and bone erosion**. Which one of the following is the best next step in therapy for F.A.?

**A. Administer etanercept. (Trade name Enbrel)**

- B. Switch to hydroxychloroquine.
- C. Add prednisone bridge therapy.
- D. Change to leflunomide.

N.B:

- **Osteoporosis .... Alendronate Na**
- **Osteoporosis + Methotrexate .... Leflunomide**
- **Osteoarthritis ..... Etanercept**
- **Osteoarthritis + Methotrexate .... Etanercept is the first choice**, if not exist choose leflunomide

\*\*

9- 75-year-old woman reports **urinary urgency**, frequency, and loss of urine when she cannot make it to the bathroom in time. She also wears a pad at night that she changes 2 or 3 times because of incontinence. Her medical history is significant for Alzheimer disease (MMSE 23), osteoarthritis, and hypothyroidism. A urinalysis is negative, her examination is normal, and postvoid residual (PVR) is normal (less than 100 mL).

Which one of the following interventions would be best at this time?

- A. Bethanechol.
- B. Pelvic floor exercises plus estrogen vaginal cream.
- C. Darifenacin.**
- D. Oxybutynin.

\*\*

10- A **hypertensive** and **diabetic** woman , after continuing medication of **pioglitazone** , it's blood glucose level return to normal and in lab reading, the **protein** appears , she will take which drug to treat hypertension :

**a) lisinopril**

b) amiloride

N.B: Due to presence of proteinuria we will choose ACEI drugs such as lisinopril as ACEIs reduce proteinuria

\*\*

11- A **pregnant** woman in her third week she takes **levothyroxine 100 mcg**, you advise her:

a) Stop the medication immediately

**b) Increase the dose of levothyroxine**

c) Ask the prescriber to change the medication

d) Continue using the medication as prescribed

**N.B:**

- **Levothyroxine is considered the treatment of choice for the control of hypothyroidism during pregnancy.**

- **Due to alterations of endogenous maternal thyroid hormones, the levothyroxine dose may need to be increased during pregnancy and the dose usually needs to be decreased after delivery.**

\*\*

12- A 2 years old child came to clinic for taking **hepatitis A vaccine**, we know that he took **pneumonia** vaccine from month ago, so we should:

**a) Give him the vaccine immediately**

b) Wait for 3 months

c) Wait for 6 months

d) Wait for 1 year

\*\*

13- A patient come to you taking **alendronate**, you advise him:

a) Take alendronate 1/2 hour before breakfast and stand upright for 1/2 hour

b) Take alendronate 1/2 hour before breakfast and rest

**c) Take alendronate 1/2 hour before breakfast with water and stand upright for 1/2 hour**

\*\*

14-A nurse was giving the medication to a **hepatitis B patient** when she got infected with his blood, when she made analysis the result was **HBSAG negative and HBSAB negative**, so she should be treated with:

- a) Give her hepatitis B vaccine immediately
- b) She needs no treatment
- c) Give her immunoglobulin only
- d) Give her immunoglobulin + hepatitis B vaccine**

\*\*

15-A pregnant woman has **hepatitis B** when she delivers we must give her baby:

- A- Hepatitis B vaccine only
- B- Hepatitis B vaccine with interferon
- C- Hepatitis B vaccine with immunoglobulin hepatitis.**
- D- Hepatitis B immunoglobulin with lamivudine.

\*\*

16-A Case about Patient with **Erectile dysfunction** (ED) caused by long-lasting HTN & Diabetes... so use:

**a-Sildenafil**

- B- Testosterone patch
- C- yohimbine

\*\*

17-A **Kidney failure** patient with **hyperkalemia** which of the following should be used

- A- insulin
- B- thiazide diuretic
- C- calcium gluconate ((or CA carbonate))**
- D- spironolactone

N.B:

- Due to the drug of choice in case of **renal failure** is **loop diuretic not thiazides**

- **Calcium** is used as prophylaxis of arrhythmia due to **hyperkalemia**  
"**Calcium gluconate or Calcium carbonate**" both are right

\*\*

18- A 2 years old child has taken **Hepatitis A** vaccine and came to take **MMR** vaccine:

- a) Should take MMR vaccine immediately**  
b) MMR vaccine should be delayed 3 months  
c) MMR vaccine should be delayed 6 months  
d) MMR vaccine should be delayed 12 months

\*\*

19- **A non-smoker patient** suffers from **wheezing and chest tightness**, what medication he should use?

- A- B2 agonist  
**b- corticosteroids**  
C-omalizumab

**N.B:1- Acute asthma .... B2 agonist "e.g.: Salbutamol"**

(Short acting selective  $\beta_2$  agonist: as Salbutamol, terbutaline, albuterol, pirbuterol)

**2-Chronic asthma .... Corticosteroids (anti-inflammatory)**

(Beclomethasone, prednisone, hydrocortisone)

Inhibit Ag-Ab reaction, inhibit release of inflammatory mediator

**3-moderate to severe asthma .... Omalizumab**

\*\*

20- A woman suffers from **acute asthma attack**, what is the best choice for her attack

- a) salbutamol**  
b) salmeterol  
c) corticosteroids

N.B:

**Bronchodilators** are :

I- **Mixed agonist** (( $\alpha_1$  "blood vessels constriction",  $\beta_1$  "stimulation of cardiac muscle" &  $\beta_2$  "dilatation of lung smooth muscles" )) : e.g. **adrenaline**  
**"epinephrine"**

II-  $\beta_2$  Agonist:

1- **Non selective  $\beta$  agonist** ( $\beta_1, \beta_2$ ) as: **isoprenaline**

2- **Short acting selective  $\beta_2$  agonist**: as Salbutamol, terbutaline, albuterol, pirbuterol

3- **Long acting selective  $\beta_2$  agonist**: as Salmeterol, formoterol

III- **cholinergic antagonists**: e.g. ipratropium, tiotropium

IV- **xanthenes**: e.g. theophylline.

21- Pregnant woman in her **43th** week and began her labor, the contractions were going good for 12 hours but in the last hour it decreased... So what medication you give her?

A-Ritodrine

b-ergonovine

**c-oxytocin**

d-saline infusion

N.B:

- **Oxytocin** is a uterine stimulant used to **induce labor** in women with problems
- **Ritodrine** is used to **stop premature** labor
- **ergonovine** used for **prevention** and treatment of postpartum and **post abortion** hemorrhage

\*\*

22- 2 years old girl has otitis media, which medication is the best for her?

A- A high dose of ampicillin

**b-azithromycin**

c-erythromycin

d-co-trimazole

N.B:

A high dose of **AMOXICILLIN** is the antibiotic of **choice** in this case not ampicillin

if amoxicillin is not an option ... choose **azithromycin**

\*\*



23-A Man came to ER with vomiting and dizziness after he ingested **toxic** dose of certain drug, what is the most important step ?

A-decrease amount of drug absorbed

B-Increase elimination of drug

**C-Watch the vital signs and Make them normal**

D-Compensate the neurological symptoms of the toxicity

\*\*

24-A Woman came to the ER with **pointed pupil, vomiting** and **dizziness**... Which drug is responsible for that?

**A-Heroin**

B-Cocain

N.B:

- **Heroin** because it is **opioid agonist** and cause **miosis (pin point pupil)**... As **morphine**

- **Cocaine** is **indirectly sympathomimetic** and cause mydriasis

\*\*

25- Which of the following vaccine should be taken although you don't need it:

**a-Influenza vaccine**

b-Mmr vaccine

c-Dap vaccine

\*\*

26- The summary of a long case that there is a patient on clopidogrel (Plavix) treatment who make an accident. He is admitted to ICU and has a **catheter**. He was taking omeprazole, what is the best intervention for him to reduce gastric secretion:

a- Reduce omeprazole dose

b- Stop omeprazole

c- Do not change omeprazole

**d- Move to Pantoprazole IV**

\*\*

27- A patient came with multiple fractures of his bones and ribs from an accident. He has a brain trauma and he is on **NGT** (Nasogastric Tube) in ICU.

Which of the following is best used for the prophylaxis of **stress induced ulcer** that can be happened to him:

a-Sucralfate

b-Misoprostol

**c-IV pantoprazole**

d-Does not need like this treatment

\*\*

28- A patient suffers from **polyurination** and dizziness so he does lab tests and his results are as following:

- **glycosuria** +ve

-capillary blood glucose = 15                      normal up to 6

-lbw = 28

what is the best medication for this patient ?

a- glargine

b- Glipizide

**c-metformin**

d-diet & exercise

N.B:1- **polyurination**: The production of an abnormally large amount of urine; one symptom of diabetes

2- **glucosuria** is the excretion of **glucose** into the urine

\*\*

29-A **pregnant** woman in her **9th** month, she has **hyperproteinemia** and **hypertension**... What is the recommended medication for her?

- **Magnesium sulphate "Mgso4"**

N.B:

- this case called "Eclampsia" characterized by HTN + hyperproteinemia

- Eclampsia is the development of seizures in a woman which is life-threatening

- **Mgso4** used to treat these **seizures** not for HTN

- to treat HTN in this case we use by order

1.methyl dopa

2.labetalol

3.hydralazine (for emergency or urgency HTN)

\*\*

30- **Diabetic** patient uses **insulin** daily, he forgot to take his insulin dose someday... he did lab tests and his results was normal **except, high glucose, high potassium (hyperkalemia)**  
what do you recommend for this case ?

**a-restart his daily insulin dose**

b-use 0.9% NaCl "normal saline"

c-use 3% - 5% NaCl "hypertonic solution"

d-use 0.33% NaCl "hypotonic solution"

N.B:

-**hyperkalemia** most commonly occurs in uncontrolled hyperglycemia (**diabetic ketoacidosis**)

due to lack of insulin

- The **acidosis** and **high glucose** levels in the blood work together to cause fluid and **potassium** to move out of the cells into the blood circulation

\*\*

31- The summary of a long case that pregnant woman in the hospital with deep vein thrombosis "DVT" takes...?

**a)heparin ( Enoxaparin or Clexane )**

b)warfarin

N.B: - **Warfarin** is category **X**

- **Enoxaparin** ((Clexane)) is a **low molecular weight heparin**

\*\*

32-**A post menopause** old woman is suffering from facial flushing and vaginal drying. She has done **hysterectomy** procedure... Which drug of the following should she use?

**A-estrogen**

B- Progesterone

N.B:1- Women who have both the **uterus** and **ovaries removed** usually just get **estrogen** replacement therapy (ERT) alone.

2-But women who have only the ovaries removed need both estrogen and progestin. That's because estrogen alone can increase the risk of cancer in the uterus. Adding progestin removes this risk.

\*\*

33-A **39 years** old what is oral birth control pills appropriate for her

A. Levonorgestrel

**B. Ethinyl estradiol/Inestrenol** (combined oral contraceptive)

C-lynestrenol/norethisterone (a **progestogen** hormone)

D-medroxyprogesterone (**progestogen** depot contraceptive)

**N.B:** This ques. may be incomplete ... if there is any of the following contraindications of COCP the answer will be Levonorgestrel

Take the minipills of progestin if

- Older than age 35 + smoke
- Older than age 35 + migraine headache
- Older than age 35 + obese
- Older than age 50
- Breast feeding
- Diabetes mellitus with vascular disease
- Risk of DVT or history of thromboembolism "blood clots"
- History of uncontrolled HTN or heart problems
- Breast or endometrial cancer

34-A woman had **DVT** and was treated a year ago... She wants to use **oral contraceptive** pills. Which is more suitable for her?

**a- Levonorgestrel**

b-Ethinyl estradiol/Inestrenol

c-lynestrenol/norethisterone (**Lynestrenol norethisterone**) are a progestogen hormone

D-medroxyprogesterone (parental depot contraceptive Synthetic Progestin)

\*\*

35-**A pregnant** woman taking **valporic acid** went to the physician with **tonic-colonic seizures**... Which of the following is true?

a- stop valporic and use another drug

b- use valporic with iron supplementation

**c- use valporic with folic acid**

d- use valporic with multivitamins

\*\*

36- A **Pregnant** woman with **G6PD deficiency** has. **G-ve. M.o and UTI**... which is the drug of choice to treat her UTI?

- A. vancomycine
- B. nitrofurantoin
- C- Cefuroxime**
- D. sulphamethoxazole

N.B:

1- **Sulfa** compounds will cause **hemolysis** to this patient... **Vancomycin is the last choice** & Nitrofurantoin used in pregnancy with caution "not used in G6PD" so the answer is **Cefuroxime**

2- N.B: G -ve M.O = Gram negative micro organism

\*\*

37- **A Pregnant** woman has. **G-ve. M.o. and UTI, which.** Is the drug of choice to treat her UTI?

- A- ciprofloxacin
- B- tetracycline
- C- Sulphamethoxazole
- D- nitrofurantoin**

\*\*

38- **A hyperglycemic** patient his blood glucose level given by moles and his **HBA1C** was high ((more than 10%) ...What is the best medication for him?

- a- metformin
- b- insulin 70/30**
- c- glargin

**N.B:** (HBA1C or HGBA1C): is a form of hemoglobin that is measured primarily to identify the average plasma glucose concentration over prolonged periods of time... type 2 diabetes start with metformin

If HBA1C is getting higher even if **1% we increase metformin**

If HbA1c increased for **more than 10%** we give **insulin**

Hba1c is the same as a1c

normal HbA1c less than **6.5 – 7**

\*\*

39- **A Diabetic patient** takes metformin twice a day, he did blood glucose analysis and there was 4 results all were normal except one result was high and HbA1c was 7.. What he should do?

A-increase dose of metformin  
**b.increase dose of metformin**  
c-don't do any thing

\*\*

40- A patient takes **4 drugs...** He did kidney function test and the result was **high serum cr** and high **BUN** (blood urea nitrogen) so which drug should be stopped

**A-metformin**

B- Tigcyciln  
C- Insulin  
D-metoprolol

N.B: **Metformin is contraindicated with renal failure**

\*\*

41-A 22 years woman wants to become pregnant, she is taking metformin and pioglitazone. She has a history of hypoglycemia and she prefers oral therapy... What will be the best approach in her case?

**a - stop pioglitazone and titrate metformin**

b - stop both of them and start insulin therapy  
c- stop metformin and titrate pioglitazone  
D.do nothing

\*\*

42-An elderly man around 60 years old, complain from polyuria, dry mouth...There is no family history of diabetes... He has done a lab tests and the results were positive for diabetes...Initial treatment should be:

A-insulin  
**b-metformin**  
c-tigcyciln

\*\*

43- A **83 years** old man suffers from fatigue, weakness and dizziness, there is no family history of diabetes... he went to the doctor and had done a lab tests and

the results were positive for diabetes and **BMI = 28** ..  
Initial treatment should be?

- A-metformin
- B-diet and exercise
- C Gliclazide**
- D-insulin

N.B:

- An adult who has :  
BMI = 25 to 29.9 is considered overweight  
BMI = 30 or higher is considered obese
- For elderly patients...
  - If younger than 80 years old ... metformin
  - if older than 80 years old ...glyclizide "as usually elderly patients have kidney dysfunction which contraindicated with metformin"

\*\*

44- A patient with high blood glucose and his weight is 103 kg and ha1c is 9, he will take...

- a.metformin**
- b-insulin
- c-glyclizide

N.B: Answer is Metformin ... as overweight is an indication for type 2 diabetes

\*\*

45-**A diabetic** woman is taking 850 mg metformin... her results are 7.5... 5.5... 6 ... 5 and her HbA1c is 7.5 ... what's your advice?

- A-stop metformin and use another medication
- B-increase metformin dose**
- C-do nothing
- D-ask her doctor

\*\*

46. –A Diabetic patient with Glycated hemoglobin hb 9... What is recommended to give him as a treatment?

**A-Metformin**

B-Glipizide

C-insulin

\*\*

47-A 54 years woman with polyuria for 3 months before analysis...

**A. Give Metformin 3 times a daily**

B. Glyburide 10mg 2 times daily

C. Glargine

\*\*

48. A diabetic patient takes **metformin with glipizide and pioglitazone** was added...Which test should be done regularly?

A-Bun and Serum Creatinine

**B. liver function.**

\*\*

49-A 48 woman suffers from fatigue, weakness and polyurination and lab tests proved that she is **diabetic**... A Doctor prescribed her 850 mg metformin twice a day and so blood sugar become normal... but after sometime she did another lab tests and the result was **hemoglubinated sugar increased by 1%** than the last result ... what will you advise her?

**a-increase metformin dose**

b- decrease metformin dose

c- do nothing

d- shifting to another type insulin

\*\*

50-A 12 years **child** has diabetes type1 which drug can take?

**A-metformin**

B-glipzide

C-pioglitazone

D- Glibenclamide

N.B:

Insulin is the drug of choice for Type 1 diabetes



If insulin is not an option... Choose metformin

\*\*

51. An Obese patient what the effect of obesity on absorption of lipid soluble drug?

A- Decrease

B-increase

**C.NO effect increase then decrease**

**N.B: no effect on absorption but increase volume of distribution**

\*\*

52- A woman with septic shock... Came to emergency who take ABC

**HR = 122**

**BP = 90/70 mmHg**

**Serum creatinine = 6**

Na & Cl... **Very high** than normal range  
and high pulse

what should she take?

**A-albumine 5% bolus**

B-NaCl saline

C-furosemide "Lasix"

D-dopamine

N.B: ABC = Airway, Breathing & Circulation

\*\*

53-A Patient has septic shock and his **BP 70/40 mmHg**, a slight increase in K level and Na within normal range... which drug should be recommended for him ???

a- dopamine

b- Lasix

**c-saline**

d- albumin

N.B:

- severe septic shock, we recommend intravenous fluids firstly ... then

1. Norepinephrine

2.dopamin (is the DOC in case of septic shock + kidney injury)

3.Epinephrine (adrenaline)  
respectively

- **Cardiac shock treated by Dopamine**
- **Anaphylactic shock treated by Epinephrine (adrenaline)**

\*\*

54-Losartan is better than captopril because...

A- Not teratogenic

**b-more effect on angiotensin 2 receptors**

N.B:

less side effects ((don't cause dry cough as captopril)) ... is better answer if found

\*\*

55. Appropriate counselling and follow-up for PQ with initiation of levothyroxine includes all of the following, EXCEPT:

A-Separate the levothyroxine dose from calcium tablets by several hours.

**B- Take levothyroxine on a full stomach for greater absorption.**

C- Improved control of thyroid levels may also improve her glycemic control.

D- A Physician follow-up is needed every 6-8 weeks to have her thyroid function tests repeated.

E-closer monitoring of her angina should be done during dosage titration of levothyroxine.

N.B: Levothyroxine is taken on an empty stomach approximately half an hour to an hour before meals

\*\*

56- A First-Pass Effect

**A-Blood perfusing virtually all the gastrointestinal tissues passes through the liver by means of the hepatic portal vein.**

B- Fifty percent of the rectal blood supply bypasses the liver (middle and inferior hemorrhoidal veins).

c- Drugs absorbed in the buccal cavity bypass the liver.

d-Drugs affected most by the first-pass effect are those with a high hepatic extraction ratio.

\*\*

57-PQ is a **75 year** old patient who has just been diagnosed with **hypothyroidism**. Her past medical history is significant for congestive heart failure, type 2 diabetes mellitus, osteoporosis and chronic stable angina, all of which are well-controlled. Her medications include:

Metoprolol 25 mg bid  
Calcium carbonate 1250 mg bid  
Vitamin D 1000 IU daily  
Glyburide 2.5 mg bid  
Enalapril 10 mg bid  
Furosemide 40 mg daily  
Nitroglycerin SL spray prn

PQ should be started on a **low dose** of levothyroxine because of her:

- a-**Age.**
- b- Gender.
- c- Diabetes.
- d- Metoprolol use.
- e- Nitroglycerin use

\*\*

58. Which of the following parameters is the most appropriate for PQ's self-evaluation of the effectiveness of levothyroxine therapy?

- a. **Increased energy**
- b- Weight loss
- c- Improved vision
- d- less frequent angina
- e- less frequent urination

\*\*

59-Metabolism in intestine

- a.**Hydrolysis**
- b-Reduction

\*\*

60. African American women take lisinopril and another hypertensive drug suffer from nose swelling and other symptoms what make her more suspected to this reaction

A-age

b - Gender

C-drug combination

**d- ethnicity**

N.B: - if no ethnicity in choices... Choose **Drug combination**

- Black patients have low renin than normal

- ACEI (lisinopril) causes angioedema more in African Americans

\*\*

61-A 35 years old patient with megaloblastic anemia which of the following is appropriate for treatment

A-Ferrous gluconate

B-Vit. C

C-folic acid

**d-Folic acid & Vit. b12**

N.B:

Iron deficiency anemia ... lack of iron

Megaloblastic anemia ... lack of vit b12 & folic acid

Pernicious anemia ... lack of vit b12

Anemia due to **CRF** ... lack of RBCs and treated by **Epoetin**

Aplastic anemia .. the body's bone marrow doesn't make enough new blood cells

Haemolytic anemia ... red blood cells are destroyed and removed from the bloodstream before their normal lifespan is up

\*\*

62. **A pregnant** women is sensitive to amoxicillin which is the Drug of Choice for her disease ... what will be the suitable alternative anti-biotic for her?

**A- Erythromycin**

B- Sulfacetamide

C- Cefixime

**N.B: antibiotics which are allowed during pregnancy:**

1-pencillins family

2-Macrolides

3- Cephalosporin

63-The summary of a case that woman suffers from pain in menses and during intercourse... which is finally found that she had something like a tumor or a solid mass ...What is the best medication to fast relief her pain ??

**a-Oral contraceptives**

b-Surgical

c-Danazol

d-Estrogen

N.B:

- hormone therapy "e.g. ... Oral contraceptive pills" are used to treat endometriosis-associated pain and they are effective.
- Danazol can be used but it isn't the first choice because it can cause serious side effects and can be harmful to the baby if the patient become pregnant while taking this medication.
- Progestin have a more favorable side effect profile than danazol.
- Surgery is the last resort and is recommended if the patient planning for pregnancy

\*\*

64-theSummary of a case that patient has taken unknown amount of **paracetamol** (acetaminophen) since 8 hours ago... and you have shown some lab results of his tests  
what is the suitable choice for this case?

A-Charcoal

**b- N-Acetyl cysteine**

N.B:

- Activated charcoal can be used within 4 hours of ingestion
- N acetyl cysteine is the antidote of acetaminophen

\*\*

65. Anemic patient refuses to take injection so DOC +is:

A-Iron sucrose

**b-ferrous gluconate**

c-Vit. b12

N.B:

-Ferrous gluconate taken orally

-Iron sucrose... Injection

\*\*

66-the summary of a case that shows lab results which were all normal or about to be except LDL was very high... the answer is

**increase the risk of atherosclerosis**

N.B:

LDL: Low-density lipoprotein

it's the bad cholesterol that collects in the walls of blood vessels, causing the blockages of atherosclerosis

\*\*

67-A patient has **low Cr. clearance** which drug **contraindicated** in this case is?

**A-Spironolactone**

b-Fusomide

c-Propanol

d-Insulin

N.B:

- kidney damage=low Creatinine clearance (Crcl) = high serum creatinine

- aminoglycoside may exist instead of spironolactone

i.e.: aminoglycosides and any potassium sparing diuretics (spironolactone, triamterene and amiloride) are **C.I** with any kidney diseases

\*\*

68- A **pregnant** woman in **35** weeks and before 7 days from her labor she suffers from severe headache... What is the **DOC** for her?

a-Ergotamine

**b-Acetaminophen**

N.B:

- Acetaminophen is the drug of choice
- Ergotamine is contraindicated in pregnancy category X

\*\*

69-A **12 years** old girl suffers from **rashes** after treating with **Oxcarbazepine**

**A-shift to ethoxsumide**

B-shift to topiramate

\*\*

70-A **14 years-obese girl** comes to the clinic with severe rash. She was initiated on oxcarbazepine about 3 weeks ago for management of partial seizures. Her medical history is significant only for **seizures**. She has recently become **sexually active and admits to inconsistent contraceptive use**.

Which one of the following interventions is best for her?

A. Change to carbamazepine.

**B. Change to topiramate.**

C. Change to valproic acid.

D. No change in therapy is necessary

\*\*

71-A **Child** is on Oxacarbamazepine for **epilepsy** and suffers from **rash**:  
**Change to ethosuximide**

\*\*

72-Which of the following prevents **neural tube defect (NTDs) in fetus**

A-Vit D

B-thiamin

C-Vit C

**D-Folic acid**

\*\*

73-A summary of a case that a **diabetic girl** her lab results were mostly normal except

glucose ....27, potassium is higher than normal by 1

what do you recommend for her?

A-calcium gluconate

B-change to iv resin every 15 min.

**C-insulin infusion 10 unit**

D-bicarbonate

\*\*

74-Analysis For man **65 year renal Failure**

Result.

Sodium. 110 normal range ((135 – 145 mEq/L))

Potassium 9 normal range ((3.5 to 5.5 mEq/L))

Urea. 54 normal range ((35 – 40))

Serum creatinine\_ 10. Up to 3.5

which of the following?

A. 0.22% Nacl saline 500ml/hour

**B. 0.9% Nacl saline 500ml/ hour**

C. Magnesium sulfate

\*\*

75-A summary of a case that a pregnant woman suffers from a disease which related to **genital infections**... she does not have a job and she need **a cheap** and fast medication... What is the best for her?

**a.Acyclovir 400 bid for 7 days**

b.Valcyclovir

\*\*

76-A Young female take lisinopril and will be conceiving

A-Still on lisiopril

B-Take lisinopril w propranolol

C-Change to losartan

**D-Stop lisinopril w take methyldopa**

N.B:

Only Methyldopa used in ttt of hypertension in pregnancy



\*\*

77-A girl with DM type 1 taking insulin... she didn't take insulin yesterday as she didn't eat... She becomes fatigue and has dizziness and nausea her BP 80/50 with NO lactic acidosis ... What should be done for her?

A-take insulin

**b.half litre 0.9% NaCl every 12 h.**

C-take sodium bicarbonate (for lactic acidosis)

\*\*

78-A patient takes multivitamin and his lab results show high BUN and se.cr ..  
What is the cause of these results?

**A-Renal insufficiency**

B-his medication

C-Age

\*\*

79-A woman found her child drinking iron syrup bottle...she took him to the hospital and did some rays...His body temperature was normal...What should he take?

**Desferroxamin**

\*\*

80-**A pregnant** women with **pyelonephritis** went to hospital given **ceftriaxone**  
IV what is antibiotic to go with

A-Ciprofloxacin

B-doxycycline

**C-amoxicillin with clavulanic acid**

d- Trimethoprim sulfamethoxazole

N.B:

if "Ampicillin+sulbactam" is an option choose it

\*\*

81-A summary of a case that an elderly patient lab results all normal except high K

**high serum creatinine**

high BUN

what is the cause responsible for these results?

- a. diabetes
- b. hypertension
- c. effect of take more medication

**d. renal insufficient**

\*\*

82-Which the following hormone **suppress** due to take **oral contraception**:

A) FSH

B) LH

**C) GnRH**

\*\*

83-A **menopause** woman takes **estrogen and progesterone** derivative replacement therapy... Which effect may be done due to this therapy?

A-decrease myocardial infarction risk

**B-increase thrombosis risk**

C-increase fracture risk

\*\*

84-A summary of a case that a patient suffers from headache, nausea, vomiting and blurred vision... He went to a hospital with **alcohol toxicity** ((methanol toxicity)) and did kidney and liver analysis... His results and the normal range of the tests have shown to you... All results about to be **normal**  
the question is ... What is your recommendation for methanol toxicity?

A-vomiting and nausea

B-vertigo and vomiting

C-blurred vision

**D-lab results**

N.B:

- if the ques. asks for **recommendation** or what should be done the answer is ...

**Lab results**

- if the ques. asks for what you **observe** on this patient the answer is ... **Blurred vision**

\*\*

85-A **diabetic** woman takes **metformin and glibenclamide**... she went to the doctor and he increased the dose of **glibenclamide**... Which analysis should be done regularly?

A-BUN & serum creatinine

**B-liver function**

C-Potassium and phosphate in blood

\*\*

86-65 years old man **BMI (28.1)** type 1 DM on treatment of Glyburide, metformin, aspirin and hydrochlorothiazide come to hospital for routine check

BP: 117/110

HR: normal

HbA1c: 7

and urine analysis for protein: +ve **proteinuria** (normal negative)  
for medical intervention in this case:

**A: add lisinopril**

B: add Ca blocker

C: same medication no change

D: substitute glyburide and metformin with insulin

\*\*

87-A Child is born to **hepatitis B positive** mother:

A-first dose of the hepatitis B vaccine

B-One dose of the Hepatitis B Immune Globulin (HBIG).

**C-Both of them**

N.B: If a pregnant woman tests positive for hepatitis B, her newborn child must be given two shots in the delivery room:

1-The first dose of hepatitis B vaccine and one dose of hepatitis B immune globulin (HBIG).

2-The infant will need additional doses of hepatitis B vaccine at one and six months of age to provide complete protection

\*\*

88-A patient's **cr clearance is 70%** what should we do with the drug dose which eliminated by kidney?

a-decrease the dose by 70%

**b-decrease the dose by 30%**

c-decrease the dose to 30%

d-do nothing

N.B: to 30% = by 70%

\*\*

89-A girl 16 year has **DM type 1** and she takes insulin in specific medical schedule

She take **pioglitazone with insulin** according to instructions of her doctor from 2 months ago ... She complain nausea and vomiting from two days as she escaped from the schedule... she made Lab tests and you have shown her results in details

some of her results:

**Heart rate 110**

**Blood pressure 80/50**

Initially you give her.. ??

A. Began a new schedule

B. Following her schedule without changes

**C.0.9 normal saline in 500 ml solution**

D.225 normal saline in 500 ml solution

\*\*

90-Sodium bicarbonate antacid makes an out elimination of

**a. pka=1.2, weak acid**

- b.pka=5.1, weak acid
- c.pka=7.8, weak base
- d.pka= 9, weak base

\*\*

91. Why B blockers are used to treat angina?
- a- increase parasympathetic cardiac stimulation
  - b- increase sympathetic cardiac stimulation
  - c-decrease sympathetic cardiac stimulation**

\*\*

92. Drug make complex with antacids?

**Tetracycline and fluoroquinolones**

N.B: **Aluminum, magnesium** in **anti-acids** and **calcium** in dairy products, all of these cations make a **complex** with fluoroquinolones and tetracycline antibiotics

\*\*

- 93-A Drug acts on non-receptor mechanism?

**A-Deferoxamine**

B-Desloratadine

\*\*

- 94-A Drug that may cause arrhythmia

**Digoxin**

\*\*

- 95-Mechanism of action: albuterol inhaler?

**Bronchodilator Short acting selective  $\beta_2$  agonist**

\*\*

- 96-Mechanism of action of **dantrolene**?

**Dantrolene depresses excitation-contraction coupling in skeletal muscle by binding to the ryanodine receptor, and decreasing free intracellular calcium concentration.**

– If the question is **dantrolene** has direct or in direct action .. the answer is :

**Dantrolene is a direct-acting skeletal muscle relaxant. It is currently the only specific and effective treatment for malignant hyperthermia**

\*\*

97-Solution differ from solid in??

**Easy to administration.**

\*\*

98- Know about antiarrhythmic drug classes:

**Verapamil ... class 4**

**Propranolol ... class 2**

99-Category X :

Studies in **animals or humans** have demonstrated **fetal abnormalities** and/or there is **positive evidence of human fetal risk** based on adverse reaction data from investigational or marketing experience, and the risks involved in use of the drug in **pregnant women** clearly outweighs any possible benefit. The drug is **contraindicated** in women who are or may become **pregnant**.

100- A **pregnant** woman has **sulfa allergy**, she suffers from **vaginal itching**... her analysis shows positive **E.coli**  
what is the antibiotic of choice for her infection?

A-Ciprofloxacin

B- Septazole

**C-Nitrofurantoin**

D-Tetracycline

\*\*

101- When should woman change her pregnant pills?

A-if she forget to use pills

B-if she forget use pills for 24 hrs.

C-if she forget for 48

**D-It is needed to be changed even she doesn't forget to use pills**

\*\*

102- A.W. is an **85-year-old** man who presents to his physician with LUTS. A digital rectal examination confirms the diagnosis of **BPH**, and the physician schedules a further workup including a prostate ultrasound, which **indicates his prostate volume is 31 g**. A.W.'s score on the AUASI is 15. His **BP is 118/70 sitting, 102/62 standing**. Which one of the following therapies is best at this time?

A. Terazosin.

B. Finasteride.

**C. Tamsulosin.**

D. Finasteride plus tamsulosin.

N.B:1-**Tamsulosin is an  $\alpha$ -adrenergic blocker** with more specific activity for the **genitourinary system**.

2-A.W. already has **orthostatic**, tamsulosin would be preferred over terazosin for this patient.

Orthostatic hypotension can still occur with all  $\alpha$ -adrenergic blockers, so patients should be monitored when therapy is initiated.

3- **Finasteride**, an  $\alpha$ -reductase inhibitor, and combination therapy with these agents are recommended when there is evidence of large prostate size (**greater than 40gm**).

\*\*

103-A patient with peptic ulcer due to **H.pylori** and he has allergy to B-lactam... what's is the best medication for him?

**PPI+clarithromycin+metronidazole**

104. A dyslipidemia patient has ischemic heart disease... Which of the following is **contraindicated with this case?**

**A-Celecoxib**

B-Simvastatin

N.B:

- dyslipidemia = elevated levels of LDL or low levels of HDL
- Celecoxib is **contraindicated with heart disease**

\*\*

105- W.F. is an 85-year-old man who presents to his physician with pain from hip **OA** (osteoarthritis) He also has **hypertension, coronary artery disease, and BPH**. For his OA, W.F. has been taking acetaminophen 650 mg 3 times/day. W.F. reports that acetaminophen helps, but he still experiences pain that limits his ability to walk. Which one of the following is the best next step in analgesic therapy for W.F.?

A. Change the analgesic to celecoxib.

B. **Add hydrocodone.**

C. Change the analgesic to ibuprofen.

D. Add glucosamine.

N.B:

1-The AGS recommends treatment with **opioids** for **OA** when **older patients** do not respond to initial therapy with acetaminophen.

2-The NSAIDs and COX-2 inhibitors are seldom considered when a thorough assessment of the patient shows that the risk of treatment (gastrointestinal bleeding and renal disease) does not outweigh the potential benefit

3-Glucosamine can be added to this patient's medication regimen; however, if effective, it will not provide immediate relief of pain.

\*\*



106-. **A diabetic** woman has **hypertension** and she is sensitive to sulpha compounds...Which of the following is **contraindicated** with this case?

**A-Glipizide** –

B-metformin

C-Amidrone

D-Enalapril

N.B: Glipizide is a sulphonylurea derivative

\*\*

***Don't Forget to Study the other Files (pharma Questions & Calculations)***

Good luck 😊