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МЕТОДИЧНІ РЕКОМЕНДАЦІЇ
для іноземних студентів 5,6 курсів з дитячих інфекційних захворювань

УДК

ББК

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Методичні рекомендації для студентів практичного курсу «Дитячі інфекційні захворювання»

У даній методичній розробці подано тести для самоконтролю засвоєних знань, що розраховані для практичного курсу «Дитячі інфекційні хвороби» для студентів 5-6 курсів медичного факультету з іноземною мовою навчання з навчальної дисципліни «Педіатрія», згідно вимог до ООП за спеціальністю «Медицина «Магістр»» 222 освітнього ступеню.

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Methodical recommendations for students of the practical course "Pediatric infectious diseases"

Methodical development is designed for independent work and for the practical course "Pediatric Infectious Diseases" for students of 5-6 courses of the Medical Faculty №2 with a foreign language of instruction in the discipline "Pediatrics", according to the requirements This methodological development presents tests for self-control of acquired knowledge, designed for the practical course "Pediatric Infectious Diseases" for students of 5-6 courses of the Medical Faculty with a foreign language of instruction in the discipline "Pediatrics", according to the requirements of Educations – professional program of specialty "Medicine" 222 educations degree «Master».

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Розглянуто та рекомендовано до друку методичною комісією медичного факультету ДВНЗ «УжНУ» (протокол № від 2023р.) та Вченою радою медичного факультету ДВНЗ «УжНУ» (протокол № від 2023р.)

Перелік умовних скорочень

ARVI - Acute Respiratory Viral Infections

RS infection – Respiratory syncytial infection

AII - Acute Intestinal Infections

VHA- Viral Hepatitis A

VHB - Viral Hepatitis B

VHC - Viral Hepatitis C

VHE - Viral Hepatitis E

VHD - Viral Hepatitis D

IM – Infectious Mononucleosis

Control Tests

1. To which family does the measles virus belongs?

- A. Poxviridae
- B. Paramyxoviridae
- C. Herpesviridae
- D. Myxoviridae
- E. Reoviridae

2. Which statement is typical of the measles virus?

- A. Transmitted through food
- B. Replicates in the lymphatic tissue
- C. Contains reverse transcriptase
- D. Index of contagiousity is 65 %
- E. Resistant in the environment

3. What is the minimal incubation period in measles?

- A. 3 days
- B. 6 days
- C. 9 days
- D. 11 days
- E. 15 days

4. In which organ can the measles virus persist for a long time and cause chronic and subacute forms of infection?

- A. Brain
- B. Liver
- C. Kidneys
- D. Myocardium
- E. Bone marrow

5. Which sign is typical of the catarrhal period of measles?

- A. Splenomegaly
- B. Filatov-Koplik spots
- C. Lymphadenopathy
- D. Pigmentation
- E. Macular papular exanthema

6. Which skin rash is typical of measles?

- A. Small macular
- B. Hemorrhagic necrotic
- C. Pustular
- D. Macular-papular
- E. Vesicular

7. What is the reason for the development of mitigated measles?

- A. Prophylactic injection of immunoglobulin
- B. Low infectious dose
- C. Measles in past medical history
- D. Previous injection of a live measles vaccine
- E. Inborn cellular immunodeficiency

8. Terms of isolation of patients with measles?

- A. After two negative results of investigation for the measles virus

- B. Till clinical recovery
- C. Till 5 days after the last rash appearance
- D. After a single negative result of investigation for the measles virus
- E. Till 5 days after appearance of rash

9. Terms of quarantine in measles?

- A. From the 3rd till the 15th day
- B. From the 5th till the 21st day
- C. From the 6th till the 19th day
- D. From the 9th till the 17th day
- E. From the 11th till the 21st day

10. Which drugs are reasonable for uncomplicated measles treatment in an early age child?

- A. Symptomatic drugs
- B. Interferon
- C. Anti-measles immunoglobulin
- D. Ribavirin (antiviral drug)
- E. Antibacterial drugs

11. Which family does the rubella virus belong to?

- A. Togavirus
- B. Herpes
- C. Enterovirus
- D. Paramyxovirus
- E. Hepadnavirus

12. Choose the entrance route for rubella virus?

- A. Upper respiratory tract mucosa
- B. Skin
- C. Gastrointestinal tract
- D. Eye mucosa
- E. All the answers are correct

13. Choose the most typical way of rubella transmission?

- A. Fecal-oral
- B. Airborne
- C. Contact
- D. Parenteral
- E. Vertical

14. Name the defect which is not included into the triad of inborn rubella?

- A. Heart defects
- B. Cataract
- C. Deafness
- D. Anemia
- E. Thrombocytopenia

15. The following mechanism does not play a role in inborn rubella pathogenesis:

- A. Presence of rubella virus in maternal respiratory tract
- B. Hematogenic and lymphogenic spread of the virus into fetal tissues
- C. Rubella virus tropism to embryonic tissues
- D. Dependence of fetal damage frequency on terms of pregnancy
- E. All the answers are correct

16. Rash character in rubella?

- A. Small macular
- B. Abundant rash on back, buttocks, extensor surfaces of extremities
- C. Absence of rash on palms and soles
- D. Rash is not predisposed to merging
- E. All the answers are correct

17. Which symptoms are not typical of rubella?

- A. Fever
- B. Small macular rash
- C. Enlargement of posterior cervical and occipital lymph nodes
- D. Rash is mostly large macular and papular
- E. Conjunctivitis

18. Name the methods which are not used for laboratory diagnosis of rubella?

- A. Virusological
- B. Bacteriological
- C. Serological
- D. PCR
- E. Antibody level by paired serum

19. Terms of isolation of patient with rubella?

- A. For 5 days from rash onset
- B. For 10 days from rash onset
- C. For 2 weeks from disease onset
- D. For 3 days from rash onset
- E. All the answers are correct

20. Name the immunity which is formed after episode of rubella?

- A. Long-lived
- B. Short-lived
- C. Type-specific
- D. Sero-specific
- E. Antitoxic

21. A boy aged 16 referred to the infectious diseases hospital. He complained of elevation of the body temperature to 39°C, cough, running nose, lacrimation and photophobia. Objectively: signs of conjunctivitis. The submandible lymph nodes are enlarged. The tonsils are moderately hyperemic. There is pale-red enanthema on the soft palate, whitish spots on the cheeks in the molar area that cannot be removed by the spatula. What is a preliminary diagnosis?

- A. Scarlet fever
- B. Measles
- C. Enteroviral infection
- D. Herpetic infection
- E. Infectious mononucleosis

22. The measles virus is characterized by all enumerated signs and additionally it contains:

- A. RNA, belongs to paramyxoviruses
- B. has hemagglutinin, hemolysis and complement-binding activity
- C. has a cytopathic effect
- D. remains virulent in aerosol for 1 year
- E. stable to the influence of physical and chemical factors

23. Epidemiological characteristic of measles includes all enumerated statements except for:

- A. Anthroponous infection
- B. A source of infection is a sick person
- C. High susceptibility of people to measles and stable life-long immunity
- D. Winter-spring increase of morbidity
- E. Recurrent character of the infection

24. All enumerated clinical symptoms are characteristic of measles except for:

- A. acute onset
- B. marked catarrhal symptoms
- C. intoxication
- D. hepatolien syndrome
- E. exanthemas and enanthemas

25. Pathognomic sign of measles is:

- A. Fever
- B. Rhinitis, conjunctivitis
- C. Tracheitis, bronchitis
- D. Koplik's spots
- E. Enlargement of the cervical lymph nodes

26. Eruption in measles is characterized by all enumerated signs except for:

- A. spotty-papula character of rash
- B. punctate hemorrhagic rash
- C. fused character of rash
- D. stages of eruption
- E. pigmentation and branny desquamation

27. The rash elements characteristic of rubella are:

- A. spots
- B. papulas
- C. vesicles
- D. vomiting
- E. petechias

28. Rash elements characteristic of moderately severe course of measles are:

- A. punctate spots
- B. papulas
- C. vesicles
- D. pustulas
- E. echymoses

29. Rubella is characterized by enlargement of such lymph nodes as:

- A. supraclavicular
- B. subclavicular
- C. occiput
- D. mesentery
- E. inguinal

30. Complications that are not characteristic of rubella in adults are:

- A. phalangeal arthritis
- B. encephalitis
- C. infertility
- D. miscarriage
- E. thrombocytopenia

31. Which family does the influenza virus belong to?

- A. Orthomyxoviruses
- B. Paramyxoviruses
- C. Arboviruses
- D. Picornaviruses
- E. Retroviruses

32. Children of which age are most commonly affected by RS infection?

- A. 0-2 years
- B. 2-5 years
- C. 5-10 years
- D. 10-15 years
- E. Independently of age

33. Which ARVI typically has fecal-oral way of transmission?

- A. Influenza
- B. Parainfluenza
- C. Adenoviral infection
- D. RS infection
- E. All the answers are correct

34. What is most commonly affected in parainfluenza in children?

- A. Nasopharynx
- B. Larynx, trachea
- C. Bronchi, bronchioles
- D. Tonsils
- E. Alveoli

35. Which ARVI typically has hemorrhagic syndrome?

- A. Influenza
- B. Parainfluenza
- C. Adenoviral infection
- D. RS infection
- E. Rhinoviral infection

36. Which ARVI typically presents with rhinopharyngeal conjunctiva fever?

- A. Influenza
- B. Parainfluenza
- C. Adenoviral infection
- D. RS infection
- E. Rhinoviral infection

37. What is most commonly affected in RS Infection in early age children?

- A. Nasopharynx
- B. Larynx, trachea
- C. Bronchi, bronchioles
- D. Tonsils
- E. Alveoli

38. Which ARVI typically has an undulating course?

- A. Influenza
- B. Parainfluenza
- C. Adenoviral infection

- D. RS infection
- E. Rhinoviral infection

39. What drug is neuraminidase inhibitor?

- A. Rimantadine
- B. Tilorone
- C. Oxolin
- D. Acyclovir
- E. Oseltamivir

40. What drug is interferon inducer?

- A. Rimantadine
- B. Tilorone
- C. Oxolin
- D. Acyclovir
- E. Oseltamivir

41. Point out, which family the causative agent of VHA belongs to?

- A. Mixoviruses
- B. Adenoviruses
- C. Picornaviruses
- D. Parvoviruses
- E. Hepadnaviruses

42. Incubation period of VHB is?

- A. 7-15 days
- B. 30-40 das
- C. 2-6 months
- D. 6-12 months
- E. More than 1 year

43. Incubation period of VHE is?

- A. 1-13 days
- B. 14-50 days
- C. 51-70 days
- D. 2.5-3 months
- E. 6 months

44. Name the main part of VHB pathogenesis?

- A. Direct cytolytic action of the virus
- B. Immune cytolysis
- C. Cholestasis
- D. Bilirubin conjugation disturbance
- E. Fatty liver dystrophy

45. Which family the causative agent of VHB belongs to?

- A. Mixoviruses
- B. Adenoviruses
- C. Picornaviruses
- D. Parvoviruses
- E. Hepadnaviruses

46. For VHD it is not typical?

- A. Disease is in the same risk groups as VHB

- B. Frequent cause of post-transfusion hepatitis
- C. Virus contains RNA
- D. Can exacerbate infection in HBV carriers
- E. Hepatitis D antigen is rarely seen in blood due to short period of circulation

47. Clinical forms of viral hepatitis D course?

- A. Acute
- B. Chronic
- C. Asymptomatic
- D. Acute and chronic
- E. Low-grade infection

48. Incubation period of VHC is?

- A. 7-15 days
- B. 30-40 days
- C. 2-6 months
- D. 6-12 months
- E. More than 1 year

49. For epidemiological characteristic of HEV it is not typical?

- A. Children are affected more often at the age 2-5 years
- B. Mainly young adults at the age 20-35 years are affected
- C. Transmitted by water route
- D. Characterized by epidemic spread
- E. Severe forms with high mortality are seen in pregnant women

50. Outcome of acute hepatitis C can be?

- A. Complete recovery
- B. Liver cirrhosis
- C. Chronic persistent hepatitis
- D. Hepatocellular carcinoma
- E. All the answers are correct

51. Clinical forms of viral hepatitis A course?

- A. Acute
- B. Chronic
- C. Asymptomatic
- D. Acute and chronic
- E. Low-grade infection

52. Incubation period of VHA is?

- A. 7-15 days
- B. 15-50 days
- C. 2-6 months
- D. 6-12 months
- E. More than 1 year

53. What methods of specific diagnosis are methods of choice for hepatitis C?

- A. Immunoenzyme analysis, PCR
- B. Reaction of direct hemagglutination, reaction of latex agglutination
- C. Immunoenzyme analysis, reaction of inhibition of hemagglutination
- D. Virus identification on laboratory animals

54. Drugs for specific therapy of VHC?

- A. Alfa-interferon and ribavirin
- B. Azidothymidine and rimantadine
- C. Acyclovir and specific immunoglobulin
- D. Azidothymidine and lamivudine
- E. Alfa-interferon and lamivudine

55. Which symptoms are not typical of VHD?

- A. Splenomegaly
- B. Lymphadenopathy
- C. Migrating arthralgias
- D. Diarrhea
- E. Fever

56. Which symptom of the icteric period of VHA is obligatory?

- A. Fever
- B. Jaundice
- C. Enlargement of posterior cervical and occipital lymph nodes
- D. Rash
- E. Intoxication symptoms

57. What is the main way of VHE transmission for children?

- A. Airborne
- B. Fecal-oral
- C. Parenteral
- D. Vertical
- E. All the answers are correct

58. What symptoms are typical of VHC?

- A. Fever
- B. Hepatomegaly
- C. Splenomegaly
- D. Jaundice
- E. All the answers are correct

59. At which age the child should be given the first vaccination against VHB?

- A. 9 months
- B. 1 months
- C. first day
- D. 18 months
- E. 6 months

60. What is the prophylaxis of VHA?

- A. Vaccination
- B. Gamma globulin
- C. Wash food
- D. Wash hands
- E. All the answers are correct

61. What genus does the causative agent of meningococcal infection belong to?

- A. Listeria
- B. Corynebacteria
- C. Neisseria
- D. Enterobacteria

E. Yersinia

62. Point out the main mechanism of meningococcal infection transmission:

- A. Fecal-oral
- B. Airborne
- C. Transmissible
- D. Inoculation
- E. Vertical

63. Which form of meningococcal infection belongs to rare forms?

- A. Nasopharyngitis
- B. Meningitis
- C. Meningococemia
- D. Meningoencephalitis
- E. Arthritis

64. Name the most typical rash in meningococemia:

- A. Roseolar
- B. Papules
- C. Hemorrhagic
- D. Hemorrhagic necrotic
- E. Pustulous

65. What is the predominating rash localization in meningococemia?

- A. Face
- B. Upper extremities
- C. Buttocks, thighs
- D. Back
- E. Palms

66. What meningeal sign is typical of first year children?

- A. Neck stiffness
- B. Kernig
- C. Brudzinski
- D. Lessage
- E. Babinski

67. What CSF changes are typical of meningococcal meningitis?

- A. Decreased protein
- B. Increased glucose
- C. Increased chlorides
- D. Neutrophilic cytositis
- E. Negative Pandy reaction

68. What method is the diagnosis of meningococcal infection confirmed with?

- A. Blood and CSF bacterioscopy
- B. Bacteriology of nasopharyngeal swab
- C. Bacteriology of blood and CSF
- D. Latex agglutination of blood and CSF
- E. All the answers are correct

69. Which antibiotic should be given to a patient with meningococemia before hospitalization?

- A. Erythromycin
- B. Ampicillin

- C. Amikacin
- D. Cefotaxime
- E. Rifampin

70. What method of meningococcal infection prophylaxis is the most effective?

- A. Quarantine
- B. Mask wearing
- C. Washing hands
- D. Immunoglobulin injection
- E. Vaccination

71. The most common cause of purulent meningitis in children:

- A. Meningococcus
- B. Proteus
- C. Staphylococcus
- D. Pseudomonas aeruginosa
- E. Listeria

72. The most common causes of serous meningitis:

- A. Mycoplasma
- B. Enteroviruses
- C. Fungi
- D. Protozoa
- E. Meningococcus

73. Main route of bacteria penetration into central nervous system:

- A. Hematogenous
- B. Contact
- C. Trans-neural
- D. Alimentary
- E. Sexual

74. Purulent and serous meningitis predominantly affects:

- A. Dura mater and arachnoid membrane
- B. Pia mater
- C. Only arachnoid membrane
- D. Pia mater and dura mater
- E. No correct answer

75. Leading clinical syndromes in purulent meningitis in children are:

- A. Meningeal
- B. CSF changes
- C. Seizures
- D. Total cerebral
- E. All the answers are correct

76. For the clinical presentation of meningococcal meningitis in first year of age children it is not typical:

- A. High fever during the first hours of the disease
- B. Meningeal posture
- C. Absence of meningeal signs
- D. Positive Lessage symptom, large fontanel bulging
- E. Abundant hemorrhagic rash on the skin

77. Early appearance and rapid regression of focal symptoms in purulent meningitis are due to:

- A. Hemorrhage into brain parenchyma
- B. Encephalitis
- C. Transitory blood and CSF circulation disturbances
- D. Brain edema
- E. All the answers are correct

78. For etiology confirmation of purulent meningitis the causative agent should be isolated from:

- A. Blood
- B. Nasopharynx
- C. CSF
- D. Urine
- E. Stool

79. A 3-years-old child develops fever to 39 °C, sleepiness, agitation, vomiting. The child received a 10-day course of ampicillin due to exacerbation of recurrent otitis. On examination: CSF is purulent, Gram-positive diplococcus in the smear. The most adequate therapy is:

- A. Ampicillin
- B. Cefuroxime
- C. Penicillin
- D. Ceftriaxone
- E. Chloramphenicol

80. The main criteria of antibiotic therapy termination in meningococcal meningitis is:

- A. Normal body temperature
- B. Normal CBC
- C. Absence of meningeal signs
- D. CSF clearance
- E. All the answers are correct

81. The causative agent of mumps belongs to?

- A. Arboviruses
- B. Herpetic viruses
- C. Paramyxoviruses
- D. Coronaviruses
- E. Enteroviruses

82. The causative agent of mumps penetrates through?

- A. Respiratory tract mucosa
- B. Skin
- C. Gastrointestinal mucosa
- D. Sexual organs mucosa
- E. Conjunctiva

83. Which way of transmission is most typical of mumps?

- A. Contact
- B. Airborne
- C. Transmissible
- D. Fecal-oral
- E. Transplacental

84. Isolation terms of a patient with mumps?

- A. 5 days after disease onset

- B. 9 days after disease onset
- C. 14 days after disease onset
- D. 21 days after disease onset
- E. 35 days after disease onset

85. Which glands are most commonly involved in mumps?

- A. Parotid
- B. Breasts
- C. Thyroid
- D. Genitals
- E. Lymphatic

86. What are rare forms of mumps?

- A. Orchitis
- B. Dacryoadenitis
- C. Sublinguitis
- D. Thyroiditis
- E. All the answers are correct

87. What pleocytosis is seen in mumps at the height of the disease?

- A. Neutrophilic
- B. Lymphocytic
- C. Mixed
- D. Normocytosis
- E. There is no correct answer

88. What are the methods of specific diagnosis for confirmation of mumps?

- A. X-rays
- B. Immunoenzyme
- C. Urine diastase
- D. CBC
- E. Urinalysis

89. For mumps prophylaxis in a group the following activities are do?

- A. Patient isolation
- B. Final disinfection
- C. Quarantine from 11 to 21 days for children without history of the disease
- D. Urgent vaccination of children without history of the disease
- E. Immunoglobulin injection

90. What is used for specific prophylaxis of mumps?

- A. Killed vaccines
- B. Live vaccine
- C. Anatoxin
- D. Serum
- E. Specific prophylaxis is not performed

91. At which age the child should be given the first vaccination against measles, mumps and rubella?

- A. 9 months
- B. 12 months
- C. 15 months
- D. 18 months
- E. 6 months

92. Causative agent of diphtheria belongs to?

- A. Listeria
- B. Corynebacteria
- C. Neisseria
- D. Protozoa
- E. Viruses

93. Main mechanism of diphtheria transmission is?

- A. Airborne
- B. Fecal-oral
- C. Transplacental
- D. Transmissible
- E. Contact

94. Main pathogenetic mechanism in tonsillar diphtheria?

- A. Bacteremia
- B. Toxinemia
- C. Autoimmune mechanism
- D. Necrotic processes
- E. Hypoxia

95. At the place of diphtheria penetration the following process develops?

- A. Serous inflammation
- B. Purulent inflammation
- C. Ulcerous necrotic process
- D. Fibrinous inflammation
- E. All the answers are correct

96. In localized croup the covers are situated on?

- A. Larynx
- B. Trachea
- C. Bronchi
- D. Nasopharynx
- E. Oropharynx

97. Of severe form of tonsillar diphtheria it is typical?

- A. Spread of inflammatory process within oropharynx
- B. Edema of palatine tonsils and paratonsillar tissues
- C. Edema of neck subcutaneous tissue
- D. Prominent general intoxication
- E. All the answers are correct

98. Of diphtheria laryngotracheitis it is typical?

- A. Gradual onset
- B. Cyclic course
- C. Moderate intoxication
- D. Aphonia
- E. All the answers are correct

99. Methods of laboratory diagnosis of diphtheria?

- A. Direct bacterioscopy of smears
- B. Bactériologie examination
- C. Toxin determination in blood
- D. Reaction of direct hemagglutination

E. All the answers are correct

100. The specific remedy for diphtheria is?

- A. Antibiotic
- B. Diphtherial anatoxin
- C. Anti-diphtherial serum
- D. Bacteriophag
- E. All the answers are correct

101. Diphtheria specific prophylaxis is?

- A. Antibiotic
- B. Diphtherial anatoxin
- C. Anti-diphtherial serum
- D. Bacteriophage
- E. All the answers are correct

102. Vaccinations against which infectious diseases should be performed to children according to age, due to Schedule of Vaccination?

- A. Poliomyelitis, tuberculosis, hepatitis A, diphtheria, measles, varicella, mumps, rubella, tetanus
- B. Poliomyelitis, tuberculosis, hepatitis A, diphtheria, measles, pneumococcal infection, mumps, rubella, tetanus
- C. Poliomyelitis, tuberculosis, hepatitis A, diphtheria, measles, haemophilus infection, mumps, rubella, tetanus, pertussis
- D. Poliomyelitis, tuberculosis, diphtheria, measles, haemophilus infection, mumps, rubella, tetanus, meningococcal infection, pertussis
- E. Poliomyelitis, tuberculosis, hepatitis B, hepatitis A, measles, haemophilus infection, mumps, rubella, tetanus, meningococcal infection, pertussis, influenza

103. The first revaccination of DPT is performed at the age?

- A. 2-3 years
- B. 5 years
- C. 6 years
- D. 1-1.5 years after first vaccination
- E. Not performed

104. Which tipe of herpesvirus does IM belong to?

- A. First
- B. Second
- C. Six
- D. All the answers are correct

105. Methods of laboratory diagnosis of IM?

- A. PSR
- B. Immunoenzyme
- C. Virological
- D. All the answers are correct

106. Factors of IM transmission?

- A. Saliva
- B. Blood
- C. Sperm
- D. Breast milk
- E. All the answers are correct

107. Main mechanism of IM transmission is?

- A. Airborne
- B. Fecal-oral
- C. Transplacental
- D. Transmissible
- E. Contact

108. The causative agent of IM belongs to?

- A. Arboviruses
- B. Paramyxoviruses
- C. Epstein-Barr virus
- D. Enteroviruses
- E. All the answers are correct

109. Incubation period in IM is?

- A. 4-15 days
- B. 7-50 days
- C. 1-9 days
- D. 5-35 days
- E. 5-15 days

110. Which symptom of IM is obligatory?

- A. Hepatosplenomegaly
- B. Fever
- C. Tonsillitis
- D. Lymphadenopathy
- E. All the answers are correct

111. What is the most frequent route of transmission of shigellosis caused by *Sh. sonnei* in children older than 3 years of age?

- A. Water
- B. Parenteral
- C. Food
- D. Transmissible
- E. Contact

112. What laboratory method of investigation should be used in shigellosis during the first day of the disease for correct etiological diagnosis?

- A. Coprologic investigation
- B. Bactériologie investigation of feces
- C. Reaction of direct hemagglutination
- D. Blood culture for sterility
- E. Nasopharyngeal mucus culture

113. What sign is not typical of neurotoxicosis?

- A. Seizures
- B. Loss of consciousness
- C. Oliguria
- D. Focal signs
- E. Neutrophilic cytos in CSF

114. What is the antibiotic of choice in All with hemocolitis?

- A. Ceftriaxone
- B. Penicillin

- C. Erythromycin
- D. Amikacin
- E. Gentamycin

115. What clinical form of salmonellosis is predominantly seen in 1st month of age children?

- A. Gastrointestinal
- B. Typhoid-like
- C. Low-grade
- D. Flu-like
- E. Septic

116. Which escherichias can be accompanied by hemolytic-uremic syndrome?

- A. Enteropathogenic
- B. Enteroinvasive
- C. Enteroaggregative
- D. Enterohemorrhagic
- E. Enterotoxigenic

117. Fever in escherichia caused by EIEC is typically seen during:

- A. 1-2 days
- B. 4-5 days
- C. 1 week
- D. 2 weeks
- E. More than 2 weeks

118. What is a typical form of coronaviral infection?

- A. Prominent seasonality
- B. Affects only children
- C. Affects only adults
- D. Combination of rhinitis and pharyngitis
- E. Development of anemia

119. Which part of gastrointestinal tract is affected in rotaviral infection?

- A. Stomach
- B. Small intestine
- C. Large intestine
- D. Distal part of large intestine
- E. All the answers are correct

120. What distinguishes shigellosis from rotaviral gastroenteritis?

- A. Presence of enteritis
- B. Presence of hepatolienal syndrome
- C. Presence of hemocolitis
- D. Absence of respiratory syndrome
- E. Presence of lymphadenopathy

121. Which antibiotics are used for treatment of intestinal yersiniosis in children?

- A. Tetracyclines
- B. Cephalosporins of III generation
- C. Penicillins
- D. Quinolones
- E. Carbapenems

122. Mean duration of incubation period in intestinal yersiniosis?

- A. 1-3 days
- B. 21 days
- C. 1-3 months
- D. 5-7 days
- E. 3-6 months

123. For joint involvement in intestinal yersiniosis it is typical?

- A. It is seen in older age children
- B. Large joints are affected
- C. Lumbosacral joint, toe joint are affected
- D. Arthralgias prevail
- E. All the answers are correct

124. The source of infection in pseudotuberculosis is not?

- A. Human
- B. Pigs
- C. Domestic birds
- D. Wild pigs
- E. Cattle

125. Main reservoir of infection in pseudotuberculosis is the following

- A. Human
- B. Pigs
- C. Domestic birds
- D. Mouse-like rodents
- E. Cattle

126. What is the main way of group B streptococcus transmission for children?

- A. Airborne
- B. Fecal-oral
- C. Parenteral
- D. Vertical
- E. All the answers are correct

127. Incubation period in scarlet fever is?

- A. 3 days
- B. 5 days
- C. 7 days
- D. 11 days
- E. 21 days

128. At what age the morbidity of group A streptococcal infection is the lowest?

- A. 0-1year
- B. 1-3year
- C. 3-7year
- D. 7-12year
- E. Adults

129. What diseases are more commonly caused by S.Pneumoniae?

- A. Skin infection
- B. Osteomyelitis
- C. Cellulitis
- D. Pneumonia
- E. Arthritis

130. What diseases are most commonly caused by enterococcus?

- A. Skin infectious
- B. Cellulitis
- C. Pneumonia
- D. Neonatal sepsis
- E. Arthritis

131. What diseases are most commonly caused by *S.pyogenes*?

- A. Skin infectious
- B. Cellulitis
- C. Osteomyelitis
- D. Endocarditis
- E. Arthritis

132. What rash is typical of scarlet fever?

- A. Large macular
- B. Small pointed
- C. Vesicular
- D. Macular-papular
- E. Hemorrhagic-necrotic

133. Which symptom of scarlet fever is obligatory?

- A. Rash
- B. Fever
- C. Tonsillitis
- D. Lymphadenitis
- E. Strawberry” tongue

134. Laboratory methods of diagnosis of streptococcal infection?

- A. Bacteriologica
- B. Latex agglutination
- C. Precipitation
- D. PCR
- E. All the answers are correct

135. In which forms of scarlet fever is antibacterial therapy indicated?

- A. Severe
- B. Septic
- C. Moderate and severe
- D. With complications
- E. In all forms

136. Which antibiotics are not used in pseudotuberculosis?

- A. Cephalosporins of 3 generation
- B. Chloramphenicol
- C. Aminoglycosides
- D. Carbapenems
- E. Penicillin

137. In peripheral blood in pseudotuberculosis the following changes are seen?

- A. Neutrophilia with young forms, considerable acceleration of ESR
- B. Leucopenia with lymphopenia
- C. Lymphocytosis, eosinophilia, considerable acceleration of ESR

- D. Lymphocytosis, monocytosis, presence of virocytes
- E. Prominent eosinophilia

138. The causative agent of pseudotuberculosis is a bacteria of Enterobacteriaceae family, genus *Yersinia*?

- A. *Y. Pestis*
- B. *Y. enterocolitica*
- C. *Y. Frederiksenii*
- D. *Y. Kristensenii*
- E. *Y. pseudotuberculosis*

139. Typical forms of pseudotuberculosis are the following?

- A. Exanthemata
- B. Joint
- C. Abdominal
- D. Septic
- E. All the answers are correct

140. Laboratory diagnosis of pseudotuberculosis includes?

- A. Pharyngeal swab for flora
- B. Immunofluorescence reaction
- C. Immune-enzyme analysis
- D. Reaction of complement fixation
- E. Stool and urine culture

141. Causative agent of varicella is the following?

- A. Herpes simplex virus
- B. Paramyxovirus
- C. Varicella-zoster virus
- D. Cytomegalovirus
- E. Epstein-Barr virus

142. Minimal incubation period in varicella is?

- A. 3 days
- B. 5 days
- C. 9 days
- D. 11 days
- E. 21 days

143. Particularities of rash in varicella?

- A. Appears on the 3rd-4th day after disease beginning
- B. "False" polymorphism is typical
- C. Step-wise appearance
- D. It is not accompanied by itching
- E. It is seen in approximately 50 % of patients

144. What pattern of fever is typical of varicella?

- A. Permanent
- B. Remitting
- C. Wave-like
- D. Two-wave
- E. New elements are accompanied by fever episodes

145. Choose the most severe complication of varicella?

- A. Pneumonia
- B. Croup
- C. Otitis
- D. Encephalitis
- E. Phlegmon

146. In newborns and infants with varicella the rash appears?

- A. On the first day
- B. On the 2nd-5th day
- C. On the 6th-7th day
- D. On the 3rd-4th day
- E. Rash can be absent

147. Terms of isolation of patients with varicella are?

- A. After 2 negative evaluations for varicella-zoster virus
- B. Till clinical recovery
- C. Since beginning of the disease till the 5th day after last vesicles appearance
- D. After 1 negative evaluation for varicella-zoster virus
- E. Till 5 days after beginning of rash

148. Which part of brain is most often involved in varicella encephalitis?

- A. Brain hemispheres
- B. Brain stem
- C. Cerebellum
- D. Meninges
- E. Basal ganglia

149. Etiotropic antiviral therapy in varicella is not indicated in?

- A. Severe forms of varicella
- B. CNS complications
- C. Inborn varicella
- D. Patients with HIV infection and AIDS
- E. Bacterial complications

150. Which therapy is appropriate for treatment of typical mild varicella?

- A. Symptomatic therapy
- B. Interferon
- C. Normal human immunoglobulin
- D. Acyclovir
- E. Antibacterial drugs

Tests Answers

Література

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