

Cardiac failure

Simple complement

1. The major clinical sign in the infant's left chronic cardiac failure is:
 - A) Precordial pain;
 - B) Hepatomegaly;
 - C) Tachypnea;
 - D) Peripheral edemas;
 - E) Headache..
2. The signs of respiratory distress in children's chronic cardiac failure are all, except:
 - A) Nasal flaring;
 - B) chest depression;
 - C) moan;
 - D) hepatomegaly;
 - E) pulmonary rales.
3. The major clinical sign in the children's right chronic cardiac failure is:
 - A) tachypnea;
 - B) hepatomegaly;
 - C) cardialgia
 - D) syncopes;
 - E) cough.
4. The clinical manifestations of decreased cardiac debit are the follows, except:
 - A) pallor, sweating;
 - B) gallop rhythm;
 - C) cardiomegaly;
 - D) tachycardia;
 - E) clear, sonor cardiac sounds.
5. For digitalines therapy monitoring is indicated:
 - A) radiography of the heart;
 - B) heart ultrasonography;
 - C) electrocardiography;
 - D) cardiac catheterism;
 - E) blood pressure monitoring.
6. The fatigue and pallor in cardiac failure is caused by :
 - A) catecholaminic hyperfunction;
 - B) occult hydrosaline retention;
 - C) cardiac debit reducing;
 - D) coronarian circulation disturbance;
 - E) interstitial pulmonary edema.
7. The paroxystic nocturnal dyspnea appears in:
 - A) cardiac asthma;
 - B) bronchial asthma;
 - C) respiratory insufficiency;
 - D) pulmonary hypertension;
 - E) increased vascular permeability.
8. The precocious sign in cardiac failure in suckling babies is:
 - A) tachypnea;
 - B) meningeal signs;
 - C) oliguria;
 - D) cyanosis;
 - E) pallor.
9. The weight increasing in infant with cardiac failure is caused by:
 - A) lymphatico-hypoplastic diathesis;
 - B) dyspnea;
 - C) hepatic insufficiency;
 - D) edemas;
 - E) renal failure.
10. The proffuse sweating in children's cardiac failure is caused by:

- A) dyspnea;
- B) catecholaminic hyperfunction induced by cardiac debit reducing;
- C) edemas;
- D) fatigue;
- E) arterial hypotension

Multiple complement

1. Signs of pulmonary congestion in children's cardiac failure are:
 - A) tachypnea;
 - B) dyspnea at effort;
 - C) cough;
 - D) absence of rales;
 - E) pallor.
2. The signs of systemic venous congestion in children's cardiac failure are:
 - A) absence of edemas;
 - B) liver in normal limits;
 - C) hepatomegaly;
 - D) peripheral edemas;
 - E) pulsation of jugular veins.
3. In the cardiac failure in little age children III NYHA/ROSS functional class the following signs are present:
 - A) marked tachypnea at small effort;
 - B) intense dyspnea at small effort;
 - C) tachypnea in rest;
 - D) staturponderal retardation;
 - E) diaphoresis in rest.
4. Select the incorrect responses in the treatment of child's chronic cardiac failure:
 - A) semisitting position;
 - B) oxygenotherapy;
 - C) reducing of alimentary volume;
 - D) increased liquids intake;
 - E) the diuretics are contraindicated.
5. The positive effects of digitalization in children's cardiac failure are the follows:
 - A) increasing of cardiac rate;
 - B) persistent rales;
 - C) clinical symptoms improvement;
 - D) decreasing of heart dimensions;
 - E) diuresis improvement.
6. The signs of digitalines intoxication, conformable to ECG data, are:
 - A) Shortening of PQ interval;
 - B) Prolonged PQ interval;
 - C) ST segment under isoelectric line;
 - D) Ventricular arrhythmias;
 - E) Supraventricular arrhythmias.
7. The actions of angiotensine conversion enzyme inhibitors in the child's chronic cardiac failure are the follows:
 - A) Reduce the cardiac irritability (sympathetic depressor);
 - B) Decrease the postloading;
 - C) Reduce the preloading;
 - D) Decrease the salt and water retention;
 - E) Positive inotrop effect.
8. Indices of myocardic performance are the follows:
 - A) contractility;
 - B) respiratory rate;
 - C) cardiac rate;
 - D) preloading;
 - E) postloading.
9. The cardinal manifestations of chronic cardiac failure in children are the follows:

- A) cardiomegaly;
- B) cough;
- C) hepatomegaly;
- D) tachypnea;
- E) tachycardia.

10. The obligatory paraclinical investigations in the children's chronic cardiac failure in children are:

- A) Cardiopulmonary radiography;
- B) Spirography;
- C) EchoCG Doppler;
- D) Natriuretic peptides level;
- E) Serum electrolytes level.

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Simple complement

1. C
2. D
3. B
4. E
5. C
6. C
7. A
8. A
9. D
10. B

Multiple complement

1. A, B, C
2. C, D, E
3. A, B, D
4. D, E
5. C, D, E
6. B, C, D, E
7. A, B, C, D
8. A, C, D, E
9. A, C, D, E
10. A, C, D, E