MANAGEMENT OF PATIENTS WITH MAIN SYMPTOMS AND SYNDROMES IN THE HEMATOLOGICAL CLINIC

Topic 24 Management of a patient with anemia

Topic 25 Management of a patient with lymphadenopathy

Topic 26 Management of a patient with

Topic 26 Management of a patient with leukocytosis and leukopenia

At the patient S., 68 years old, during examination atrophy of papillae of tongue, yellowness of the eyes, splenomegaly, and symmetrical paresthesia were found, at FGDS - atrophical gastritis, at Ph-metry – achlorhydria. In blood test: anemia, makrocytosis. What researches can confirm the diagnosis:

## **Test 1.2**

At the patient S., 68 years old, during examination atrophy of papillae of tongue, yellowness of the eyes, splenomegaly, and symmetrical paresthesia were found out, at FGDS - atrophic gastritis, at Ph-metry – achlorhydria. In blood test: anemia, macrocytosis. What researches can confirm the diagnosis:

- A. Sternal puncture
- B. US investigation of abdominal cavity
- C. Consultation of neurologist
- D. Determination of iron of blood serum
- E. Spleen puncture

## **Test 1.3**

# A. Sternal puncture

- B. US investigation of abdominal cavity
- C. Consultation of neurologist
- D. Determination of iron of blood serum
- E. Spleen puncture

## Test 2.1

At the patient K., 18 years old, abundant bleeding began after extraction of tooth. In the anamnesis: haemophilia A. What first aid the patient needs:

### Test 2.2

At the patient K., 18 years old, abundant bleeding began after extraction of tooth. In the anamnesis: haemophilia A. What first aid the patient needs:

- A. Ascorutin
- B. Aminocaproic acid
- C. Calcii chloridi
- D. Vikasol
- E. Cryoprecipitate

### Test 2.3

- A. Ascorutin
- B. Aminocaproic acid
- C. Calcii chloridi
- D. Vikasol
- E. Cryoprecipitate

## **Test 3.1**

At the patient M., 42 years old, who was taking mercazolile for a long time, concerning thyrotoxicosis, agranulocytosis developed. What changes are possible to expect in leukoformula:

## **Test 3.2**

At the patient M., 42 years old, who was taking mercazolile for a long time, concerning thyrotoxicosis, agranulocytosis developed. What changes are possible to expect in leukoformula:

- A. Leukocytosis with lymphocytosis
- B. Leukocytosis with neutrophilia
- C. Leukocytosis with lymphopenia
- D. Leukopenia with neutrophilia
- E. Leukopenia with neutropenia

### Test 3.3

- A. Leukocytosis with lymphocytosis
- B. Leukocytosis with neutrophilia
- C. Leukocytosis with lymphopenia
- D. Leukopenia with neutrophilia
- E. Leukopenia with neutropenia

## **Test 4.1**

The patient L., 23 years old, complains on increase of temperature of body to 38C, appearance of hypodermic hemorrhages. Doctor diagnosed aplastic anemia. What symptom from the below will be observed at the patient:

## **Test 4.2**

The patient L., 23 years old, complains on increase of body temperature to 38C, appearance of hemorrhages. Doctor diagnosed aplastic anemia. What symptom from the below will be observed at the patient:

- A. Splenomegaly
- B. Lymphadenopathy
- C. Leukopenia
- D. Hepatomegaly
- E. Hyper Thrombocytosis

## **Test 4.3**

- A. Splenomegaly
- B. Lymphadenopathy
- C. Leukopenia
- D. Hepatomegaly
- E. Hyper Thrombocytosis

## **Test 5.1**

The patient Z., 68 years old, complains on pain in bones, subfebrile temperature of body, weight loss. At inspection moderate normochromic anemia is determined, ESR-55 mm/h, proteinuria-0,99 g/l. What of research methods is less informing for clarification of diagnosis:

### **Test 5.2**

The patient Z., 68 years old, complains on pain in bones, subfebrile temperature of body, weight loss. At inspection moderate normochromic anemia is determined, ESR-55 mm/h, proteinuria-0,99 g/l. What of research methods is less informing for clarification of diagnosis:

- A. Determination of general protein
- B. Determination of albumin fractions
- C. Roentgenography of bones
- D. Determination of iron level in blood serum
- E. Sternal puncture

## **Test 5.3**

- A. Determination of general protein
- B. Determination of albumin fractions
- C. Roentgenography of bones
- D. Determination of iron level in blood serum
- E. Sternal puncture

## **Test 6.1**

At a patient S., 68 years old, during examination yellowness of the eyes, hepatosplenomegaly, symmetrical paresthesia, at additional research - atrophic gastritis with achlorhydria were discovered. What sign contradicts the clinic of the described condition:

### **Test 6.2**

At a patient S., 68 years old, during examination yellowness of the eyes, hepatosplenomegaly, symmetrical paresthesia, at additional research - atrophic gastritis with achlorhydria were discovered. What sign contradicts the clinic of the described condition:

- A. Macrocytosis
- B. Gunthers glossitis
- C. Thrombocytopenia
- D. Microcytosis
- E. Hypersegmentation of neutrophils nuclei

### **Test 6.3**

- A. Macrocytosis
- B. Gunthers glossitis
- C. Thrombocytopenia
- D. Microcytosis
- E. Hypersegmentation of neutrophils nuclei

#### **Test 7.1**

Which from diseases transferred below such hematological indexes are characteristic for: expressed anemia, leukopenia, neutropenia, presence of 15% of plasma cells in bone marrow:

### **Test 7.2**

Which from diseases transferred below such hematological indexes are characteristic for: expressed anemia, leukopenia, neutropenia, presence of 15% of plasma cells in bone marrow:

- A. Acute leukemia
- B. Chronic myeloleukemia
- C. Multiple myeloma
- D. Chronic lympholeukemia
- E. Lymphogranulomatosis

## **Test 7.3**

- A. Acute leukemia
- B. Chronic myeloleukemia
- C. Multiple myeloma
- D. Chronic lympholeukemia
- E. Lymphogranulomatosis

## **Test 8.1**

At the 23 years old man, who suffers on acute myeloblastic leukemia, massive hypodermic hemorrhages, nose bleeding appeared. There are expressed anemia, thrombocytopenia, and 30% of blasts in blood test. What first aid the patient needs:

### Test 8.2

At the 23 years old man, who suffers on acute myeloblastic leukemia, massive hypodermic hemorrhages, nose bleeding appeared. There are expressed anemia, thrombocytopenia, and 30% of blasts in blood test. What first aid the patient needs:

- A. Extending of polychemotherapy
- B. Transfusion of packet red cells
- C. Transfusion of thromboconcentrate
- D. Introduction of iron preparations
- E. Introduction of vikasol

#### Test 8.3

- A. Extending of polychemotherapy
- B. Transfusion of packet red cells
- C. Transfusion of thromboconcentrate
- D. Introduction of iron preparations
- E. Introduction of vikasol

## **Test 9.1**

The patient S., 68 years old, immediately hospitalized concerning hard anemia (Hb- 50 g/l, macrocytosis) with complaints on dyspnea in rest, disturbance of step. At examination: yellowness of the eyes, tachycardia, hepatosplenomegaly. What help the patient needs:

### **Test 9.2**

The patient S., 68 years old, immediately hospitalized concerning hard anemia (Hb- 50 g/l, macrocytosis) with complaints on dyspnea in rest, disturbance of step. At examination: yellowness of the eyes, tachycardia, hepatosplenomegaly. What help the patient needs:

- A. Preparations of iron intravenous
- B. Vitamin B12, red cells
- C. Prednizolon
- D. Anabolic steroids
- E. Red cells

## **Test 9.3**

- A. Preparations of iron intravenous
  - B. Vitamin B12, red cells
  - C. Prednizolon
  - D. Anabolic steroids
  - E. Red cells

## Test 10.1

The patient T., 60 years old, complains on dyspnea. During many years he is suffering on chronic obstructive pulmonary disease. Hepatosplenomegaly. Blood test: E-6,8x1012/I, Hb-190 g/I, L-12x109/I, T-520x109/I, blood sedimentation-2 mm/h. Define the reliable diagnosis:

### Test 10.2

The patient T., 60 years old, complains on dyspnea. During many years he is suffering on chronic obstructive pulmonary disease. Hepatosplenomegaly. Blood test: E-6,8x1012/I, Hb-190 g/I, L-12x109/I, T-520x109/I, blood sedimentation-2 mm/h. Define the reliable diagnosis:

A. Chronic obstructive pulmonary disease. Symptomatic erythrotcytosis

B. Pikvik's syndrome. Symptomatic erythrotcytosis

C. Hypertonic illness. Symptomatic erythrotcytosis

D. Erythremia. Chronic obstructive pulmonary disease

E.Chronic myeloleukemia. Chronic obstructive pulmonary disease

## Test 10.3

- A. Chronic obstructive pulmonary disease. Symptomatic erythrotcytosis
  - B. Pikvik's syndrome. Symptomatic erythrotcytosis
- C. Hypertonic illness. Symptomatic erythrotcytosis
- D. Erythremia. Chronic obstructive pulmonary disease
- E. Chronic myeloleukemia. Chronic obstructive pulmonary disease

#### **Test 11.1**

At examination of the 70 years old patient with fever and dyspnea, pallor of skin, moist rales in the lower lungs, tachycardia, diastolic noise in the V point, BP-140/40, increase of spleen are found. In blood: E-2,7x1012/I, Hb-75 g/I, L-4,2x109/I, blood sedimentation-45 mm/h; in urine - moderate proteinuria, microhematuria. Define the reliable diagnosis:

#### Test 11.2

At examination of the 70 years old patient with fever and dyspnea, pallor of skin, moist rales in the lower lungs, tachycardia, diastolic noise in the V point, BP-140/40, increase of spleen are found. In blood: E-2,7x1012/I, Hb-75 g/I, L-4,2x109/I, ESR-45 mm/h; in urine - moderate proteinuria, microhematuria. Define the reliable diagnosis:

- A. Chronic myeloleukemia
- B. Infectious endocarditis
- C. Rheumatic heart disease
- D. Pneumonia

## Test 11.3

- A. Chronic myeloleukemia
- B. Infectious endocarditis
- C. Rheumatic heart disease
- D. Pneumonia

## **Test 12.1**

Patient K., 58 years old, marks increased lymphatic nodes of neck. At examination: size of lymphatic nodes 3x4 sm, painless, soft, mobile, skin above them is not changed. General analysis of blood: E-3,2x1012/I, Hb-102 g/I, CI-1,0; L 235x109/I, e-2%, r/n-4%, s-12%, I-76%, m-6%, Gumprechts` bodies. Define the reliable diagnosis:

#### Test 12.2

Patient K., 58 years old, marks increased lymphatic nodes of neck. At examination: size of lymphatic nodes 3x4 sm, painless, soft, mobile, skin above them is not changed. General analysis of blood: E-3,2x1012/I, Hb-102 g/I, CI-1,0; L 55x109/I, e-2%, r/n-4%, s-12%, I-76%, m-6%, Gumprechts` bodies. Define the reliable diagnosis:

- A. Chronic lympholeukemia
- B. Reactive lymphadenitis
- C. Lymphogranulomatosis
- D. Malignant lymphoma
- E. Metastasis of cancer in lymphatic knots

# A. Chronic lympholeukemia

- B. Reactive lymphadenitis
- C. Lymphogranulomatosis
- D. Malignant lymphoma
- E. Metastasis of cancer in lymphatic knots

The 63 years old participant of liquidation of failure on CHAES, complains on causeless weakness, feeling of holding apart in the left subcostum. The patient feels itself sick for a year. Objectively: skin is pale, liver + 3 sm, spleen +10 sm. In blood: E- 3,1x1012/I, Hb-100 g/I, L-200x109/I, e-6%, b-3%, blast-2%, promiel-10%, miel- 18%, r/n-27%, s-10%, I-12%, m-2%, blood sedimentation-40 mm/h. What diagnosis is the most credible:

The 63 years old participant of liquidation of failure on CHAES, complains on causeless weakness, feeling of holding apart in the left subcostum. The patient feels itself sick for a year. Objectively: skin is pale, liver + 3 sm, spleen +10 sm. In blood: E- 3,1x1012/I, Hb-100 g/I, L-200x109/I, e-6%, b-3%, blast-2%, promiel-10%, miel-18%, r/n-27%, s-10%, I-12%, m-2%, blood sedimentation-40 mm/h. What diagnosis is the most credible:

- A. Hemolytic anemia
- B. Cirrhosis of liver
- C. Acute leukemia
- D. Chronic myeloleukemia
- E. Chronic lympholeukemia

- A. Hemolytic anemia
  - B. Cirrhosis of liver
  - C. Acute leukemia
  - D. Chronic myeloleukemia
  - E. Chronic lympholeukemia

#### Test 13.1

The patient L., 30 years old, complains on general weakness, fragility of nails, hair fall, considerable and prolonged menstruations. Objectively: pallor of skin, heart rate— 90, AP-100/70. Blood test: E-3,5x1012/I, Hb-90 g/I, CI-0,7; MCV 67, blood sedimentation- 20 mm/h. Define the previous diagnosis:

#### Test 13.2

The patient L., 30 years old, complains on general weakness, fragility of nails, hair fall, considerable and prolonged menstruations. Objectively: pallor of skin, heart rate— 90, AP-100/70. Blood test: E-3,5x1012/I, Hb-90 g/I, CI-0,7; MCV 67, blood sedimentation- 20 mm/h. Define the previous diagnosis:

- A. Iron deficiency anemia
- B. B12 deficiency anemia
- C. Aplastic anemia
- D. Acute leukemia
- E. Follic deficiency anemia

#### Test 13.3

## A. Iron deficiency anemia

- B. B12 deficiency anemia
- C. Aplastic anemia
- D. Acute leukemia
- E. Follic deficiency anemia

#### **Test 14.1**

The sick F., 50 years old, complains on itching of skin after aquatic procedures. Objectively: skin has red color, liver + 2 sm, spleen + 4 sm. Blood test: E-6,4x1012/I, Hb- 185 g/I, L-10,0x109/I, e-5%, r/n-8%, s/n-56%, I-26%, m-5%, T-525x109/I, blood sedimentation-1mm/h, hematocrit-72%. What research must be done for clarification of diagnosis:

#### Test 14.2

The sick F., 50 years old, complains on itching of skin after aquatic procedures. Objectively: skin has red color, liver + 2 sm, spleen + 4 sm. Blood test: E-6,4x1012/I, Hb- 185 g/I, L-10,0x109/I, e-5%, r/n-8%, s/n-56%, I-26%, m-5%, T-525x109/I, blood sedimentation-1mm/h, hematocrit-72%. What research must be done for clarification of diagnosis:

- A. Definition of B12 in blood
- B. Sternal puncture
- C. Definition of alkaline phosphatase of blood
- D. Iron of blood serum
- E. US investigation of abdominal cavity

#### Test 14.3

- A. Definition of B12 in blood
- B. Sternal puncture
- C. Definition of alkaline phosphatase of blood
- D. Iron of blood serum
- E. US investigation of abdominal cavity

#### Test 15.1

The sick T., 36 years old, appealed to internist with complaints on pain in throat, increase of body temperature to 39C. Objectively: skin is pale, single bruises, necrotic changes on tonsils, spleen +3 sm. Blood test: E-1,9x1012/I, Hb-57 g/I, L- 20,0x109/I, blast -26%, s-25%, I-42%, m-7%, T-32,0x109/I, blood sedimentation60 mm/h. What research needs be done for clarification of diagnosis:

#### Test 15.2

The sick T., 36 years old, appealed to internist with complaints on pain in throat, increase of body temperature to 39C. Objectively: skin is pale, single bruises, necrotic changes on tonsils, spleen +3 sm. Blood test: E-1,9x1012/I, Hb-57 g/I, L-20,0x109/I, blast -26%, s-25%, I-42%, m-7%, T-32,0x109/I, blood sedimentation 60 mm/h. What research needs be done for clarification of diagnosis:

- A. Sternal puncture
- B. Smear from fauces
- C. US investigation of abdominal cavity
- D. Spleen puncture
- E. Computed tomography of abdominal cavity

#### Test 15.3

### A. Sternal puncture

- B. Smear from fauces
- C. US investigation of abdominal cavity
- D. Spleen puncture
- E. Computed tomography of abdominal cavity

#### Test 16.1

The patient L., 68 years old, complains on enlarged lymphatic nodes, perspiration. Objectively: skin and mucous are pale, enlarged inguinal and subaxillar lymphatic nodes, palpated by diameter of 2-3 sm, soft, unpainful, mobile. Sizes of liver by Curlov are 18x14x13 sm. Blood test: E-3,5x1012/l, Hb-100 g/l, CI-0,8, L-380x109/l, e-3%, I 95%, m-2%, T-190x109/l. Define the previous diagnosis:

#### Test 16.2

The patient L., 68 years old, complains on enlarged lymphatic nodes, perspiration. Objectively: skin and mucous are pale, enlarged inguinal and subaxillar lymphatic nodes, palpated by diameter of 2-3 sm, soft, unpainful, mobile. Sizes of liver by Curlov are 18x14x13 sm. Blood test: E-3,5x1012/I, Hb-100 g/I, CI-0,8, L-380x109/I, e-3%, <u>I 95%</u>, m-2%, T-190x109/I. Define the previous diagnosis:

- A. Chronic lympholeukemia
- B. Acute leukemia
- C. Chronic myeloleukemia
- D. Leukemoid reaction of lymphoid type
- E. Cirrhosis of liver

#### Test 16.3

# A. Chronic lympholeukemia

- B. Acute leukemia
- C. Chronic myeloleukemia
- D. Leukemoid reaction of lymphoid type
- E. Cirrhosis of liver

#### Test 17.1

The patient A., 56 years old, appealed to doctor with complaints on perspiration, weight loss, heavy feeling in the left half of stomach. Skin and mucous are pale. Large spleen is palpated and liver is moderately increased. Blood test: E-3x1012/I, Hb-90 g/I, L-240x109/I, eoz-9%, baz-6%, myeloblast-4%, promyel-3%, myel-23%, metamyel-16%, r/n-15%, s/n-12%, l-7%, m-5%, blood sedimentation-40 mm/h. Define the previous diagnosis:

#### Test 17.2

The patien A., 56 years old, appealed to doctor with complaints on perspiration, weight loss, heavy feeling in the left half of stomach. Skin and mucous are pale. Large spleen is palpated and liver is moderately increased. Blood test: E-3x1012/I, Hb-90 g/I, L-240x109/I, eoz-9%, baz-6%, myeloblast-4%, promyel-3%, myel-23%, metamyel-16%, r/n-15%, s/n-12%, I-7%, m-5%, blood sedimentation-40 mm/h. Define the previous diagnosis:

- A. Chronic lympholeukemia
- B. Acute leukemia
- C. Chronic myeloleukemia
- D. Leukemoid reaction of myeloid type
- E. Cirrhosis of liver

#### Test 17.3

- A. Chronic lympholeukemia
  - B. Acute leukemia
  - C. Chronic myeloleukemia
  - D. Leukemoid reaction of myeloid type
  - E. Cirrhosis of liver

#### Test 18.1

The patient O., 50 years old, complains on general weakness. Objectively: skin is pale, liver + 2 sm. Blood test: E-2,3x1012/I, Hb-95 g/I, CI-1,3, L-2,4x109/I, r/n-2%, s/n-53%, I-40%, m-5%, blood sedimentation-34 mm/h, macrocytosis. What research needs to be conducted for definition of diagnosis:

#### Test 18.2

The patient O., 50 years old, complains on general weakness. Objectively: skin is pale, liver + 2 sm. Blood test: E-2,3x1012/I, Hb-95 g/I, CI-1,3, L-2,4x109/I, r/n-2%, s/n-53%, I-40%, m-5%, blood sedimentation-34 mm/h, macrocytosis. What research needs to be conducted for definition of diagnosis:

- A.US investigation of abdominal cavity
- B. Sternal puncture
- C. Definition of B12 in blood
- D. Iron of blood serum
- E. Liver puncture

#### Test 18.3

- A.US investigation of abdominal cavity
- B. Sternal puncture
- C. Definition of B12 in blood
- D. Iron of blood serum
- E. Liver puncture

#### Test 19.1

The patient G., 58 years old, complains on headache, dizziness. Objectively: skin is pletoric, heart rate-82, AP-180/90, liver and spleen are moderately increased. Blood test: E-8,0x1012/I, Hb-220 g/I, CI-1,0; L-11,5x109/I, T-560x109/I. What research must be conducted for diagnostics of the disease:

#### Test 19.2

The patient G., 58 years old, complains on headache, dizziness. Objectively: skin is pletoric, heart rate-82, AP-180/90, liver and spleen are moderately increased. Blood test: E-8,0x1012/I, Hb-220 g/I, CI-1,0; L-11,5x109/I, T-560x109/I. What research must be conducted for diagnostics of the disease:

- A. Echocardioscopy
- B. Sternal puncture
- C. US investigation of abdominal cavity
- D. Iron of blood serum
- E.Determination of hematocrit

#### Test 19.3

- A. Echocardioscopy
- B. Sternal puncture
- C. US investigation of abdominal cavity
- D. Iron of blood serum
- E.Determination of hematocrit

#### Test 20.1

The patient T., 45 years old, complains on general weakness, dyspnea, pain in the right subcostal area. During 10 years the patient was misusing of alcohol. Objectively: reduced feed, skin is pale, icteric, liver + 6 sm, spleen +2 sm. In blood: E1,8x1012/I, Hb-75 g/I, CI–1,3; L-3,5x109/I, e-3%, r/n-4%, s/n-65%, I-21%, m-7%; T110x109/I, blood sedimentation-50 mm/h. What diagnosis is most credible:

#### Test 20.2

The patient T., 45 years old, complains on general weakness, dyspnea, pain in the right subcostal area. During 10 years the patient was misusing of alcohol. Objectively: reduced feed, skin is pale, icteric, liver + 6 sm, spleen +2 sm. In blood: E1,8x1012/I, Hb-75 g/I, CI-1.3; L-3,5x109/I, e-3%, r/n-4%, s/n-65%, I-21%, m-7%; T110x109/I, blood sedimentation-50 mm/h. What diagnosis is most credible:

- A. B12 deficiency anemia
- B. Follic deficiency anemia
- C. Hypoplastic anemia
- D. Cirrhosis of liver
- E. Autoimmune thrombocytopenia

#### Test 20.3

- A. B12 deficiency anemia
- B. Follic deficiency anemia
- C. Hypoplastic anemia
- D. Cirrhosis of liver
- E. Autoimmune thrombocytopenia

#### **Test 21.1**

The 35 years old woman, who during two years treated by gynaecologist because menorrhagia, complains on muscular weakness, decline of memory, subfebrile temperature. General analysis of blood: E3,5x1012/l, Hb- 100 g/l, CI-0,7, anisocytosis, L-3,8x109/l, e-2%, r/n–4%, s/n-60%, I–26%, m-8%, blood sedimentation-12 mm/h, iron of blood serum-7,8 mkm/l. What treatment needs to be appointed:

#### Test 21.2

The 35 years old woman, who during two years treated by gynaecologist because menorrhagia, complains on muscular weakness, decline of memory, subfebrile temperature. General analysis of blood: E3,5x1012/I, Hb- 100 g/I, CI-0,7, anisocytosis, L-3,8x109/I, e-2%, r/n-4%, s/n-60%, I-26%, m-8%, blood sedimentation-12 mm/h, iron of blood serum-7,8 mkm/I. What treatment needs to be appointed:

- A. Preparations of iron per os
- B. Follic acid
- C. Preparations of iron intravenous
- D. Vitamins of group B
- E. Transfusion of packet red cells

#### Test 21.3

- A. Preparations of iron per os
- B. Follic acid
- C. Preparations of iron intravenous
- D. Vitamins of group B
- E. Transfusion of packet red cells

#### Test 22.1

The patient G., 58 years old, complains on headache, dizziness. Objectively: skin is pletoric, tones of heart are rhythmic, heart rate-82, accent of the second tone above aorta, AP-180/90, spleen is moderately increased. Blood test: E-8,2x1012/I, Hb-210 g/I, CI-1,2, L-10,5x109/I, T-560x109/I. What diagnosis is most credible:

#### Test 22.2

The patient G., 58 years old, complains on headache, dizziness. Objectively: skin is pletoric, tones of heart are rhythmic, heart rate-82, accent of the second tone above aorta, AP-180/90, spleen is moderately increased. Blood test: E-8,2x1012/I, Hb-210 g/I, Cl-1,2, L-10,5x109/I, T-560x109/I. What diagnosis is most credible:

- A. Erythremia
- B. Chronic myeloleukemia
- C. Cerebral insult
- D. Tumor of brain
- E. Cirrhosis of liver

#### Test 22.3

### A. Erythremia

- B. Chronic myeloleukemia
- C. Cerebral insult
- D. Tumor of brain
- E. Cirrhosis of liver

### **Test 23.1**

At the formula of blood: E-1,3x1012/I, Hb-58 g/I, CI-1,3, megaloblast-2 on 100, reticulotcyt-0,2%, macrocytosis, L-2,8x109/I, e-3%, r/n-5%, s/n-49%, I-37%, m-6%,T-100,0x109/I, blood sedimentation-30 mm/h, formulate the previous diagnosis:

#### Test 23.2

At the formula of blood: E-1,3x1012/I, Hb-58 g/I, CI-1,3, megaloblast-2 on 100, reticulotcyt-0,2%, macrocytosis, L-2,8x109/I, e-3%, r/n-5%, s/n-49%, I-37%, m-6%,T- 100,0x109/I, blood sedimentation-30 mm/h, formulate the previous diagnosis:

- A. Iron deficiency anemia
- B. B12 deficiency anemia
- C. Aplastic anemia
- D. Acute leukemia
- E. Agranulocytosis

# Test 23.3

- A. Iron deficiency anemia
- B. B12 deficiency anemia
- C. Aplastic anemia
- D. Acute leukemia
- E. Agranulocytosis

# **Test 24.1**

At the formula of blood: E-3,5x1012/I, Hb-110 g/I, L-330x109/I, baz-5%, eozin9%, promyel-2%, myel-22%, metamyel-21%, r/n-15%, s/n-12%, I-8%, m-6%; thromb-200,0x109/I, blood sedimentation-45 mm/h. Formulate the previous diagnosis:

#### Test 24.2

At the formula of blood: E-3,5x1012/I, Hb-110 g/I, L-330x109/I, baz-5%, eozin9%, promyel-2%, myel-22%, metamyel-21%, r/n-15%, s/n-12%, l-8%, m-6%; thromb- 200,0x109/I, blood sedimentation-45 mm/h. Formulate the previous diagnosis:

- A. Acute leukemia
- B. Chronic lympholeukemia
- C. Chronic myeloleukemia
- D. Erythremia
- E. Multiple myeloma

# Test 24.3

- A. Acute leukemia
  - B. Chronic lympholeukemia
  - C. Chronic myeloleukemia
  - D. Erythremia
  - E. Multiple myeloma

# Test 25.1

At the formula of blood: E-2,5x1012/I, Hb-68 g/I, CI-1,5, megaloblast-5 on 100, reticulotcyt-0,2%, L-2,8x109/I, e-3%, r/n-4%, s/n-45%, I-33%, m-5%, thromb 105x109/I, blood sedimentation-30 mm/h. Appoint additional research, which must be done for confirmation of diagnosis:

#### Test 25.2

At the formula of blood: E-2,5x1012/I, Hb-68 g/I, CI-1,5, megaloblast-5 on 100, reticulotcyt-0,2%, L-2,8x109/I, e-3%, r/n-4%, s/n-45%, I-33%, m-5%, thromb 105x109/I, blood sedimentation-30 mm/h. Appoint additional research, which must be done for confirmation of diagnosis:

- A. Sternal puncture
- B. US Investigation of liver and spleen
- C. Roentgenography of lungs
- D. Definition of maintenance of B12 in blood
- E. Definition of iron of blood serum

# Test 25.3

# A. Sternal puncture

- B. US Investigation of liver and spleen
- C. Roentgenography of lungs
- D. Definition of maintenance of B12 in blood
- E. Definition of iron of blood serum

# Test 26.1

At the indicated formula of blood: E-2,8x1012/I, Hb-80 g/I, microspherocytosis, CI- 0,8, reticul-20%, L-7,5x109/I, e-2%, r/n-4%, s/n-54%, I-37%, m-3%, T-200x109/I, blood sedimentation-35 mm/h. Define the previous diagnosis:

#### Test 26.2

At the indicated formula of blood: E-2,8x1012/I, Hb-80 g/I, microspherocytosis, CI- 0,8, reticul-20%, L-7,5x109/I, e-2%, r/n-4%, s/n-54%, I-37%, m-3%, T-200x109/I, blood sedimentation-35 mm/h. Define the previous diagnosis:

- A. B12 deficiency anemia
- B. Follic deficiency anemia
- C. Hemolytic anemia
- D. Iron deficiency anemia
- E. Acute leukemia

# Test 26.3

- A. B12 deficiency anemia
- B. Follic deficiency anemia
- C. Hemolytic anemia
- D. Iron deficiency anemia
- E. Acute leukemia

#### Test 27.1

A patient came to a doctor with complaints of enlarged cervical and axillary lymph nodes and heaviness in the left hypochondrium. During palpation, the lymph nodes are soft, painless, not fused together. Splenomegaly is observed. Complete blood count: leukocytes — 70 · 109/L, lymphocytes — 80%, Gumprecht shadows. What is the most likely diagnosis in this case?

#### Test 27.2

A patient came to a doctor with complaints of enlarged cervical and axillary lymph nodes and heaviness in the left hypochondrium. During palpation, the lymph nodes are soft, painless, not fused together. Splenomegaly is observed. Complete blood count: leukocytes — 70 · 109/L, lymphocytes — 80%, Gumprecht shadows. What is the most likely diagnosis in this case?

- A. Non-Hodgkin lymphoma
- B. Lymphogranulomatosis
- C. Chronic lymphocytic leukemia
- D. Acute leukemia
- E. Burkitt lymphoma

# Test 27.3

- A. Non-Hodgkin lymphoma
- B. Lymphogranulomatosis
- C. Chronic lymphocytic leukemia
- D. Acute leukemia
- E. Burkitt lymphoma

#### Test 28.1

A 56-year-old patient complains of decreased appetite, weakness, palpitations, pain and a burning sensation in the tongue, heaviness in the epigastric region, and numbness in the limbs. Objectively, the following is observed: pale skin with a lemon-colored tint, Hunter's glossitis, enlarged liver and spleen. Complete blood count: erythrocytes — 2.8 · 1012/L, hemoglobin — 100 g/L, color index — 1.2. Erythrocytes are large, often oval, with Jolly bodies and Cabot rings. What is the most likely diagnosis in this case?

#### Test 28.2

A 56-year-old patient complains of decreased appetite, weakness, palpitations, pain and a burning sensation in the tongue, heaviness in the epigastric region, and numbness in the limbs. Objectively, the following is observed: pale skin with a lemon-colored tint, Hunter's glossitis, enlarged liver and spleen. Complete blood count: erythrocytes — 2.8 · 1012/L, hemoglobin — 100 g/L, color index — 1.2. Erythrocytes are large, often oval, with Jolly bodies and Cabot rings. What is the most likely diagnosis in this case?

- A. B12 and folate deficiency anemia
- B. Iron deficiency anemia
- C. Hemolytic anemia
- D. Aplastic anemia
- E. Chronic hepatitis

#### Test 28.3

- A. B12 and folate deficiency anemia
- B. Iron deficiency anemia
- C. Hemolytic anemia
- D. Aplastic anemia
- E. Chronic hepatitis

#### Test 29.1

A 27-year-old woman came to a doctor with complaints of enlarged lymph nodes on the right side of her neck and in the axillary region, night sweats, and a fever over 38o. Morphological study of the biopsy material obtained from a lymph node detected Reed-Sternberg cells. What is the most likely diagnosis in this case?

#### Test 29.2

A 27-year-old woman came to a doctor with complaints of enlarged lymph nodes on the right side of her neck and in the axillary region, night sweats, and a fever over 38o. Morphological study of the biopsy material obtained from a lymph node detected Reed-Sternberg cells. What is the most likely diagnosis in this case?

- A. Tumor metastases in the lymphatic node
- B. Chronic lymphocytic leukemia
- C. Malignant lymphoma
- D. Lymph node tuberculosis
- E. Lymphogranulomatosis

#### Test 29.3

- A. Tumor metastases in the lymphatic node
- B. Chronic lymphocytic leukemia
- C. Malignant lymphoma
- D. Lymph node tuberculosis
- E. Lymphogranulomatosis

#### Test 30.1

A 47-year-old patient complains of pain in the lumbar region. The patient was provisionally diagnosed with radiculitis and a course of physiotherapy was carried out. However, the patient's condition did not improve. X-ray of the spine and pelvis revealed osteoporosis and significant bone defects. Complete blood count revealed normochromic anemia and total protein of 107 g/L. General urinalysis revealed proteinuria of 4.0 g/L. What study is necessary to establish the final diagnosis in this case

# Test 30.2

A 47-year-old patient complains of pain in the lumbar region. The patient was provisionally diagnosed with radiculitis and a course of physiotherapy was carried out. However, the patient's condition did not improve. X-ray of the spine and pelvis revealed osteoporosis and significant bone defects. Complete blood count revealed normochromic anemia and total protein of 107 g/L. General urinalysis revealed proteinuria of 4.0 g/L. What study is necessary to establish the final diagnosis in this case

- A. Sternal puncture
- B. Comprehensive blood testing
- C. Abdominal ultrasound
- D. Cytochemistry of blood cells
- E. Radioisotope study of the kidneys

# Test 30.3

#### A. Sternal puncture

- B. Comprehensive blood testing
- C. Abdominal ultrasound
- D. Cytochemistry of blood cells
- E. Radioisotope study of the kidneys

#### **Test 31.1**

A 30-year-old woman complains of abdominal discomfort on the left, pain in the joints, fever, and periodic hemorrhages. Objectively, hepatolienal syndrome is observed. Complete blood count revealed the following: leukocytes — 200 · 109/L, numerous granulocytes at various degrees of maturity, myeloblasts — < 5% in the bone marrow, the Rh Chromosome is positive. What is the most likely diagnosis in this case?

#### Test 31.2

A 30-year-old woman complains of abdominal discomfort on the left, pain in the joints, fever, and periodic hemorrhages. Objectively, hepatolienal syndrome is observed. Complete blood count revealed the following: leukocytes —  $200 \cdot 109/L$ , numerous granulocytes at various degrees of maturity, myeloblasts — < 5% in the bone marrow, the Rh Chromosome is positive. What is the most likely diagnosis in this case?

- A. Malignant tumor
- B. Chronic myeloid leukemia
- C. Leukemoid reaction
- D. Myelofibrosis
- E. Acute leukemia

# Test 31.3

- A. Malignant tumor
- B. Chronic myeloid leukemia
- C. Leukemoid reaction
- D. Myelofibrosis
- E. Acute leukemia

# **Test 32.1**

A 50-year-old patient complains of headache, itchy skin, and pain in the toes and muscles, especially during walking. Objectively, the skin of the face has a red-cyanotic tint. Lymph nodes are not palpable. Pulse — 76/min. Blood pressure — 180/100 mm Hg. The lungs have no abnormalities. The borders of the heart are displaced to the left by 2 cm. The liver is +2 cm. The spleen is near the edge of the costal arch, dense and painless. Complete blood count: erythrocytes — 6.3 · 1012/L, hemoglobin — 201 g/L, color index — 0.8, leukocytes — 10.5 · 109/L, eosinophils — 4%, band neutrophils — 7%, segmented neutrophils — 62%, lymphocytes — 22%, monocytes — 5%, platelets — 500 · 109/L, ESR — 1 mm/hour, hematocrit — 55%. What is the most likely diagnosis in this case?

#### Test 32.2

A 50-year-old patient complains of headache, itchy skin, and pain in the toes and muscles, especially during walking. Objectively, the skin of the face has a red-cyanotic tint. Lymph nodes are not palpable. Pulse — 76/min. Blood pressure — 180/100 mm Hg. The lungs have no abnormalities. The borders of the heart are displaced to the left by 2 cm. The liver is +2 cm. The spleen is near the edge of the costal arch, dense and painless. Complete blood count: erythrocytes — 6.3 · 1012/L, hemoglobin — 201 g/L, color index — 0.8, leukocytes — 10.5 · 109/L, eosinophils — 4%, band neutrophils — 7%, segmented neutrophils — 62%, lymphocytes — 22%, monocytes — 5%, platelets — 500 · 109/L, ESR — 1 mm/hour, hematocrit — 55%. What is the most likely diagnosis in this case?

- A. Obliterating endarteritis
- B. Cushing disease
- C. Essential hypertension
- D. Polycythemia vera
- E. Secondary erythrocytosis

#### Test 32.3

- A. Obliterating endarteritis
- B. Cushing disease
- C. Essential hypertension
- D. Polycythemia vera
- E. Secondary erythrocytosis

#### **Test 33.1**

A 12-year-old girl complains of weakness, dizziness, headache, and a fever of 38o. Objectively, her body temperature is 37.8o, her mucosa and skin are pale, her pharynx is without changes. Palpation detects submandibular and cervical lymph nodes that are enlarged to 2 cm, dense and painless. No pathological changes of internal organs were detected. Complete blood count: erythrocytes —  $2.8 \cdot 1012/L$ , hemoglobin — 85 g/L, color index — 80, leukocytes — 80, lymphocytes — 80, band neutrophils — 80, segmented neutrophils — 80, lymphocytes — 80, reticulocytes — 80, platelets — 80, blast cells — 80, What is the most likely diagnosis in this case?

# Test 33.2

A 12-year-old girl complains of weakness, dizziness, headache, and a fever of 38o. Objectively, her body temperature is 37.8o, her mucosa and skin are pale, her pharynx is without changes. Palpation detects submandibular and cervical lymph nodes that are enlarged to 2 cm, dense and painless. No pathological changes of internal organs were detected. Complete blood count: erythrocytes — 2.8 · 1012/L, hemoglobin — 85 g/L, color index — 0.9, leukocytes — 10 · 109/L, eosinophils — 0%, band neutrophils — 1%, segmented neutrophils — 8%, lymphocytes — 47%, reticulocytes — 0.5%, platelets — 60 · 109/L, blast cells — 44%. What is the most likely diagnosis in this case?

- A. Acute leukemia
- B. Acute erythromyelosis
- C. Chronic lymphocytic leukemia
- D. Infectious mononucleosis
- E. Lymphogranulomatosis

# Test 33.3

- A. Acute leukemia
- B. Acute erythromyelosis
- C. Chronic lymphocytic leukemia
- D. Infectious mononucleosis
- E. Lymphogranulomatosis

#### Test 34.1

A 50-year-old patient complains of pain in his bones and especially ribs. Complete blood count: erythrocytes — 3.3· 1012/L, hemoglobin — 100 g/L, leukocytes — 6.5 · 109/L, segmented neutrophils — 50%, lymphocytes — 32%, monocytes — 18%, ESR — 62 mm/hour. Skull Xray shows multiple small regular-shaped defects. Plasma cells make up 30% of sternal punctate. What is the most likely diagnosis in this case?

#### Test 34.2

A 50-year-old patient complains of pain in his bones and especially ribs. Complete blood count: erythrocytes — 3.3· 1012/L, hemoglobin — 100 g/L, leukocytes — 6.5 · 109/L, segmented neutrophils — 50%, lymphocytes — 32%, monocytes — 18%, ESR — 62 mm/hour. Skull Xray shows multiple small regular-shaped defects. Plasma cells make up 30% of sternal punctate. What is the most likely diagnosis in this case?

- A. Multiple myeloma
- B. Ankylosing spondylitis
- C. Systemic lupus erythematosus
- D. Von Willebrand disease
- E. Acute lymphoblastic leukemia

# Test 34.3

- A. Multiple myeloma
- B. Ankylosing spondylitis
- C. Systemic lupus erythematosus
- D. Von Willebrand disease
- E. Acute lymphoblastic leukemia

# Test 35.1

A 37-year-old woman complains of enlarged cervical and mediastinal lymph nodes. Blood test detects the ESR of 35 mm/hour. Lymph node biopsy detects a granuloma that consists of epithelial giant cells without caseous necrosis. What is the most likely diagnosis in this case?

#### Test 35.2

A 37-year-old woman complains of enlarged cervical and mediastinal lymph nodes. Blood test detects the ESR of 35 mm/hour. Lymph node biopsy detects a granuloma that consists of epithelial giant cells without caseous necrosis. What is the most likely diagnosis in this case?

- A. Infectious mononucleosis
- B. Lymph nodes tuberculosis
- C. Sarcoidosis
- D. Lymphogranulomatosis
- E. Erythroleukemia

# Test 35.3

- A. Infectious mononucleosis
- B. Lymph nodes tuberculosis
- C. Sarcoidosis
- D. Lymphogranulomatosis
- E. Erythroleukemia

## Test 36.1

A 70-year-old patient complains of general weakness, loss of appetite, pain in the tongue, and paresthesia. According to the patient's medical history, the disease onset was 6 months ago. Objectively, the skin and mucosa are pale and moderately icteric, the tongue is bright red and smooth, hepatomegaly and distal hyperesthesia are observed. Auscultation detects a systolic murmur in all auscultation points. Pulse — 110/min., blood pressure — 90/60 mm Hg. Blood test results: erythrocytes — 1.2 · 1012/L, hemoglobin — 56 gŁ, color index — 1.4, leukocytes — 2.8 · 109Ł, platelets — 120 · 109/L, ESR — 26 mm/hour, reticulocytes — 0.1%, macrocytosis, total bilirubin — 34 mmol/L, indirect bilirubin — 29 mmol/L. What is the most likely diagnosis in this case?

## Test 36.2

A 70-year-old patient complains of general weakness, loss of appetite, pain in the tongue, and paresthesia. According to the patient's medical history, the disease onset was 6 months ago. Objectively, the skin and mucosa are pale and moderately icteric, the tongue is bright red and smooth, hepatomegaly and distal hyperesthesia are observed. Auscultation detects a systolic murmur in all auscultation points. Pulse — 110/min., blood pressure — 90/60 mm Hg. Blood test results: erythrocytes — 1.2 · 1012/L, hemoglobin — 56 gŁ, color index — 1.4, leukocytes — 2.8 · 109Ł, platelets — 120 · 109/L, ESR — 26 mm/hour, reticulocytes — 0.1%, macrocytosis, total bilirubin — 34 mmol/L, indirect bilirubin — 29 mmol/L. What is the most likely diagnosis in this case?

- A. Vitamin B12 deficiency anemia
- B. Acute lymphoblastic leukemia
- C. Iron deficiency anemia
- D. Infectious mononucleosis
- E. Viral hepatitis

## Test 36.3

- A. Vitamin B12 deficiency anemia
- B. Acute lymphoblastic leukemia
- C. Iron deficiency anemia
- D. Infectious mononucleosis
- E. Viral hepatitis

### Test 37.1

A 30-year-old man complains of petechial hemorrhages that suddenly appeared on the skin of his legs two days ago. Objectively, multiple hemorrhages in the form of asymmetrically located ecchymoses are observed on the skin of his thighs and lower legs. No changes were detected in the internal organs. Complete blood count: hemoglobin — 126 g/L, erythrocytes — 3.9 · 1012/L, leukocytes — 5.2 · 109/L, platelets — 15 · 109/L. What is the most likely diagnosis in this case?

#### Test 37.2

A 30-year-old man complains of petechial hemorrhages that suddenly appeared on the skin of his legs two days ago. Objectively, multiple hemorrhages in the form of asymmetrically located ecchymoses are observed on the skin of his thighs and lower legs. No changes were detected in the internal organs. Complete blood count: hemoglobin — 126 g/L, erythrocytes — 3.9 · 1012/L, leukocytes — 5.2 · 109/L, platelets — 15 · 109/L. What is the most likely diagnosis in this case?

- A. Hemorrhagic vasculitis
- B. Hemophilia A
- C. Idiopathic thrombocytopenic purpura
- D. DIC syndrome
- E. Meningococcemia

## Test 37.3

- A. Hemorrhagic vasculitis
- B. Hemophilia A
- C. Idiopathic thrombocytopenic purpura
- D. DIC syndrome
- E. Meningococcemia

## Test 38.1

A 38-year-old man complains of weakness, a fever of 37.8oC, enlarged lymph nodes, nosebleeds, and pain in the bones. Objectively, the skin and mucosa are pale, enlarged and painless lymph nodes can be palpated, sternalgia and hepatosplenomegaly are observed. Complete blood count: erythrocytes — 2.7 · 1012/L, hemoglobin — 84 g/L, leukocytes — 58 · 109/L, eosinophils — 1%, band neutrophils — 2%, segmented neutrophils — 12%, lymphocytes — 83%, lymphoblasts — 2%, Botkin-Gumprecht cells, ESR — 57 mm/hour. What is the most likely diagnosis in this case?

### Test 38.2

A 38-year-old man complains of weakness, a fever of 37.8oC, enlarged lymph nodes, nosebleeds, and pain in the bones. Objectively, the skin and mucosa are pale, enlarged and painless lymph nodes can be palpated, sternalgia and hepatosplenomegaly are observed. Complete blood count: erythrocytes — 2.7 · 1012/L, hemoglobin — 84 g/L, leukocytes — 58 · 109/L, eosinophils — 1%, band neutrophils — 2%, segmented neutrophils — 12%, lymphocytes — 83%, lymphoblasts — 2%, Botkin-Gumprecht cells, ESR — 57 mm/hour. What is the most likely diagnosis in this case? A. Chronic myeloid leukemia

- B. Chronic lymphocytic leukemia
- C. Acute lymphoblastic leukemia
- D. Acute myeloid leukemia
- E. Lymphogranulomatosis

## Test 38.3

- A. Chronic myeloid leukemia
- B. Chronic lymphocytic leukemia
- C. Acute lymphoblastic leukemia
- D. Acute myeloid leukemia
- E. Lymphogranulomatosis

## Test 39.1

A 35-year-old woman complains of general weakness, weight loss, a feeling of discomfort in the area of her left hypochondrium, a fever of 380, and excessive sweating. Objectively, she has pale skin and mucosa, hepatosplenomegaly is observed. Complete blood count: erythrocytes — 3.96 · 1012/L, hemoglobin — 100 g/L, leukocytes — 130 · 109/L, basophils — 4%, eosinophils — 7%, myeloblasts — 2%, promyelocytes — 8%, myelocytes — 14%, juvenile – 6%, band neutrophils — 12%, segmented neutrophils — 23%, lymphocytes — 24%, platelets — 640 · 109/L, ESR — 36 mm/hour. What is the most likely diagnosis in this case?

### Test 39.2

A 35-year-old woman complains of general weakness, weight loss, a feeling of discomfort in the area of her left hypochondrium, a fever of 38o, and excessive sweating. Objectively, she has pale skin and mucosa, hepatosplenomegaly is observed. Complete blood count: erythrocytes — 3.96 · 1012/L, hemoglobin — 100 g/L, leukocytes — 130 · 109/L, basophils — 4%, eosinophils — 7%, myeloblasts — 2%, promyelocytes — 8%, myelocytes — 14%, juvenile – 6%, band neutrophils — 12%, segmented neutrophils — 23%, lymphocytes — 24%, platelets — 640 · 109/L, ESR — 36 mm/hour. What is the most likely diagnosis in this case?

- A. Erythroleukemia
- B. Acute myeloid leukemia
- C. Chronic lymphocytic leukemia
- D. Chronic myeloid leukemia
- E. Agranulocytos

## Test 39.3

- A. Erythroleukemia
- B. Acute myeloid leukemia
- C. Chronic lymphocytic leukemia
- D. Chronic myeloid leukemia
- E. Agranulocytos

## Test 40.1

A 20-year-old woman complains of weakness, fever, enlarged supraclavicular lymph nodes, itchy skin, profuse night sweats, and the weight loss of 10 kg over the past 3 months. What examination would be most informative in making the diagnosis in this case?

### Test 40.2

A 20-year-old woman complains of weakness, fever, enlarged supraclavicular lymph nodes, itchy skin, profuse night sweats, and the weight loss of 10 kg over the past 3 months. What examination would be most informative in making the diagnosis in this case?

- A. Lymph node biopsy
- B. Lymph node puncture
- C. Lymph node ultrasound
- D. Computed tomography of the neck
- E. Roentgenoscopy of the stomach

### Test 40.3

- A. Lymph node biopsy
- B. Lymph node puncture
- C. Lymph node ultrasound
- D. Computed tomography of the neck
- E. Roentgenoscopy of the stomach

### **Test 41.1**

A 22-year-old woman complains of a rash on the legs and torso and a subfebrile body temperature. According to the patient's medical history, one month ago she had a severe nosebleed. Objectively, her skin is pale, a maculopetechial hemorrhagic rash is observed on her chest and legs. Tourniquet test is positive. Complete blood count: hemoglobin — 80 g/L, erythrocytes — 3.2 · 1012/L, platelets — 28 · 109/L, ESR — 12 mm/hour. There are numerous megakaryocytes in the bone marrow. What is the most likely diagnosis in this case?

#### Test 41.2

A 22-year-old woman complains of a rash on the legs and torso and a subfebrile body temperature. According to the patient's medical history, one month ago she had a severe nosebleed. Objectively, her skin is pale, a maculopetechial hemorrhagic rash is observed on her chest and legs. Tourniquet test is positive. Complete blood count: hemoglobin — 80 g/L, erythrocytes — 3.2 · 1012/L, platelets — 28 · 109/L, ESR — 12 mm/hour. There are numerous megakaryocytes in the bone marrow. What is the most likely diagnosis in this case?

- A. Disseminated intravascular coagulation syndrome
- B. Typhoid fever
- C. Idiopathic thrombocytopenic purpura
- D. Iron deficiency anemia
- E. Hemorrhagic vasculitis

## Test 41.3

- A. Disseminated intravascular coagulation syndrome
- B. Typhoid fever
- C. Idiopathic thrombocytopenic purpura
- D. Iron deficiency anemia
- E. Hemorrhagic vasculitis

## Test 42.1

A 53-year-old patient complains of weakness, lack of appetite, weight loss, and an increased body temperature. Objectively, hepatomegaly and lymphadenopathy with doughy lymph nodes are observed. Complete blood count: erythrocytes — 4.0· 1012/L, hemoglobin — 110 g/L, leukocytes — 100·109 /L, basophils — 1%, eosinophils —1%, band neutrophils — 1%, segmented neutrophils — 22%, monocytes — 2%, lymphocytes — 73%, Gumprecht shadows. What is the most likely diagnosis in this case?

### Test 42.2

A 53-year-old patient complains of weakness, lack of appetite, weight loss, and an increased body temperature. Objectively, hepatomegaly and lymphadenopathy with doughy lymph nodes are observed. Complete blood count: erythrocytes — 4.0· 1012/L, hemoglobin — 110 g/L, leukocytes — 100·109 /L, basophils — 1%, eosinophils —1%, band neutrophils — 1%, segmented neutrophils — 22%, monocytes — 2%, lymphocytes — 73%, Gumprecht shadows. What is the most likely diagnosis in this case?

- A. Chronic lymphocytic leukemia
- B. Acute lymphoblastic leukemia
- C. Chronic myeloid leukemia
- D. Lymphogranulomatosis
- E. Multiple myelom

### Test 42.3

- A. Chronic lymphocytic leukemia
- B. Acute lymphoblastic leukemia
- C. Chronic myeloid leukemia
- D. Lymphogranulomatosis
- E. Multiple myelom

### Test 43.1

A 50-year-old patient complains of headache, itchy skin, and pain in the toes and muscles, especially during walking. Objectively, the skin of the face has a red-cyanotic tint. The lymph nodes are not palpable. Pulse — 76/min. Blood pressure — 180/100 mm Hg. The lungs have no abnormalities. The borders of the heart are displaced to the left by 2 cm. Hepatomegaly is observed. The spleen is near the edge of the costal arch, dense and painless. Complete blood count: erythrocytes — 6.3 · 1012/L, hemoglobin — 201 g/L, color index — 0.8, leukocytes — 10.5 · 109/L, eosinophils — 4%, band neutrophils — 7%, segmented neutrophils — 62%, lymphocytes — 22%, monocytes — 5%, platelets — 500 · 109/L, ESR — 1 mm/hour, hematocrit — 55%. What is the most likely diagnosis in this case?

## Test 43.2

A 50-year-old patient complains of headache, itchy skin, and pain in the toes and muscles, especially during walking. Objectively, the skin of the face has a red-cyanotic tint. The lymph nodes are not palpable. Pulse — 76/min. Blood pressure — 180/100 mm Hg. The lungs have no abnormalities. The borders of the heart are displaced to the left by 2 cm. Hepatomegaly is observed. The spleen is near the edge of the costal arch, dense and painless. Complete blood count: erythrocytes — 6.3 · 1012/L, hemoglobin — 201 g/L, color index — 0.8, leukocytes — 10.5 · 109/L, eosinophils — 4%, band neutrophils — 7%, segmented neutrophils — 62%, lymphocytes — 22%, monocytes — 5%, platelets — 500 · 109/L, ESR — 1 mm/hour, hematocrit — 55%. What is the most likely diagnosis in this case?

- A. Cushing disease
- B. Polycythemia vera
- C. Essential hypertension
- D. Obliterating endarteritis
- E. Erythroleukemia

# Test 43.3

- A. Cushing disease
- B. Polycythemia vera
- C. Essential hypertension
- D. Obliterating endarteritis
- E. Erythroleukemia

## Test 44.1

A 59-year-old woman complains of general weakness, rapid fatigability, paresthesias in the fingers and toes, and a fever of 37.5o. Objectively, her sclerae are subicteric, the liver protrudes 1 cm from under the costal arch. Blood test results: erythrocytes — 2.5 · 1012/L, hemoglobin — 90 g/L, color index — 1.1, leukocytes — 2.5 · 109/L, platelets — 152 · 109/L, reticulocytes — 0.6%. Bilirubin — 38 mcmol/L, with the predominance of indirect bilirubin. The patient's myelogram shows megaloblastic type of hematopoiesis. What is the most likely diagnosis in this case?

### Test 44.2

A 59-year-old woman complains of general weakness, rapid fatigability, paresthesias in the fingers and toes, and a fever of 37.5o. Objectively, her sclerae are subicteric, the liver protrudes 1 cm from under the costal arch. Blood test results: erythrocytes — 2.5 · 1012/L, hemoglobin — 90 g/L, color index — 1.1, leukocytes — 2.5 · 109/L, platelets — 152 · 109/L, reticulocytes — 0.6%. Bilirubin — 38 mcmol/L, with the predominance of indirect bilirubin. The patient's myelogram shows megaloblastic type of hematopoiesis. What is the most likely diagnosis in this case?

- A. B12 deficient anemia
- B. Viral hepatitis A
- C. Leptospirosis
- D. Acquired hemolytic anemia
- E. Iron deficiency anemia

## Test 44.3

- A. B12 deficient anemia
- B. Viral hepatitis A
- C. Leptospirosis
- D. Acquired hemolytic anemia
- E. Iron deficiency anemia

## Test 45.1

A 35-year-old woman complains of rapid fatigability, palpitations, brittle nails, and hair loss. Complete blood count: erythrocytes — 2.3 · 1012/L, hemoglobin — 65 g/L, color index — 0.7, reticulocytes — 0.5%, platelets — 200 · 109/L, leukocytes — 6.6 · 109/L, band neutrophils — 2%, segmented neutrophils — 56%, eosinophils — 2%, basophils — 1%, lymphocytes — 29%, monocytes — 10%, anisocytosis, poikilocytosis, ESR — 5 mm/hour. What is the most likely diagnosis in this case?

### Test 45.2

A 35-year-old woman complains of rapid fatigability, palpitations, brittle nails, and hair loss. Complete blood count: erythrocytes — 2.3 · 1012/L, hemoglobin — 65 g/L, color index — 0.7, reticulocytes — 0.5%, platelets — 200 · 109/L, leukocytes — 6.6 · 109/L, band neutrophils — 2%, segmented neutrophils — 56%, eosinophils — 2%, basophils — 1%, lymphocytes — 29%, monocytes — 10%, anisocytosis, poikilocytosis, ESR — 5 mm/hour. What is the most likely diagnosis in this case?

- A. Agranulocytosis
- B. Hemolytic anemia
- C. Vitamin B12 deficient anemia
- D. Iron deficiency anemia
- E. Acute lymphoblastic leukemia

## Test 45.3

- A. Agranulocytosis
- B. Hemolytic anemia
- C. Vitamin B12 deficient anemia
- D. Iron deficiency anemia
- E. Acute lymphoblastic leukemia

## Test 46.1

A 63-year-old man came to a doctor with complaints of marked general weakness, poor appetite, weight loss, joint pain, and heaviness in the right subcostal area. Complete blood count shows the following: erythrocytes — 3.4 · 1012/L, Hb — 102 g/L, color index — 0.9, platelets — 640 · 109 /L, leukocytes — 138 · 109/L, blasts —1 %, promyelocytes — 2 %, myelocytes — 13 %, juvenile — 12 %, band neutrophils — 16 %, segmented neutrophils — 31 %, basophils — 3 %, eosinophils — 8 %, lymphocytes — 9 %, monocytes — 5 %, ESR — 30 mm/hour. What is the provisional diagnosis?

### Test 46.2

A 63-year-old man came to a doctor with complaints of marked general weakness, poor appetite, weight loss, joint pain, and heaviness in the right subcostal area. Complete blood count shows the following: erythrocytes — 3.4 · 1012/L, Hb — 102 g/L, color index — 0.9, platelets — 640·109 /L, leukocytes — 138 · 109/L, blasts —1 %, promyelocytes — 2 %, myelocytes — 13 %, juvenile — 12 %, band neutrophils — 16 %, segmented neutrophils — 31 %, basophils — 3 %, eosinophils — 8 %, lymphocytes — 9 %, monocytes — 5 %, ESR — 30 mm/hour. What is the provisional diagnosis?

- A. Erythremia (polycythemia vera)
- B. Acute leukemia
- C. Leukemoid reaction
- D. Chronic myeloid leukemia
- E. Chronic lymphocytic leukemia

## Test 46.3

- A. Erythremia (polycythemia vera)
- B. Acute leukemia
- C. Leukemoid reaction
- D. Chronic myeloid leukemia
- E. Chronic lymphocytic leukemia

## Test 47.1

A 42-year-old man complains of weakness, palpitations, nosebleeds, and skin hemorrhages. His condition progressively deteriorates throughout the last month. Objectively, his condition is severe, he has petechial and spotted hemorrhages on the skin of his limbs and torso, lymph nodes and spleen are not palpable, the pulse is 116/min., the liver is +2 cm. Complete blood count reveals pancytopenia. What disease can be primarily suspected in this case?

### Test 47.2

A 42-year-old man complains of weakness, palpitations, nosebleeds, and skin hemorrhages. His condition progressively deteriorates throughout the last month. Objectively, his condition is severe, he has petechial and spotted hemorrhages on the skin of his limbs and torso, lymph nodes and spleen are not palpable, the pulse is 116/min., the liver is +2 cm. Complete blood count reveals pancytopenia. What disease can be primarily suspected in this case?

- A. Hypoplastic anemia
- B. Acute leukemia
- C. Werlhof disease
- D. Hemorrhagic vasculitis
- E. Acute agranulocytosis

### Test 47.3

- A. Hypoplastic anemia
- B. Acute leukemia
- C. Werlhof disease
- D. Hemorrhagic vasculitis
- E. Acute agranulocytosis

## Test 48.1

A 15-year-old patient presents with delayed physical development and periodically develops icteric skin. Objectively, the spleen is 16x12x10 cm, cholecystolithiasis is observed in the patient, there is a skin ulcer on the left calf in its lower third. In the blood: erythrocytes – 3.0 · 1012/L, Hb – 90 g/L, color index – 1.0, microspherocytosis, reticulocytosis. Total serum bilirubin – 56 mcmol/L, indirect bilirubin – 38 mcmol/L. What treatment method would be optimal in this case?

## Test 48.2

A 15-year-old patient presents with delayed physical development and periodically develops icteric skin. Objectively, the spleen is 16x12x10 cm, cholecystolithiasis is observed in the patient, there is a skin ulcer on the left calf in its lower third. In the blood: erythrocytes – 3.0 · 1012/L, Hb – 90 g/L, color index – 1.0, microspherocytosis, reticulocytosis. Total serum bilirubin – 56 mcmol/L, indirect bilirubin – 38 mcmol/L. What treatment method would be optimal in this case?

- A. Omentohepatopexy
- B. Spleen transplant
- C. Portocaval anastomosis
- D. Omentosplenopexy
- E. Splenectomy

## Test 48.3

- A. Omentohepatopexy
- B. Spleen transplant
- C. Portocaval anastomosis
- D. Omentosplenopexy
- E. Splenectomy

# Test 49.1

An 18-year-old young man was hospitalized on the 7th day of illness with complaints of headache, general weakness, fever, and sore throat. Objectively, all the groups of lymph nodes are enlarged to 1–3 cm in diameter. Palpation shows dense, elastic, and slightly painless lymph nodes that are not matted together. Enlarged tonsils are covered with purulent plaque. The liver is +3 cm. In the blood: leukocytosis, relative lymphomonocytosis, virocytes – 15%. Make the diagnosis:

## Test 49.2

An 18-year-old young man was hospitalized on the 7th day of illness with complaints of headache, general weakness, fever, and sore throat. Objectively, all the groups of lymph nodes are enlarged to 1–3 cm in diameter. Palpation shows dense, elastic, and slightly painless lymph nodes that are not matted together. Enlarged tonsils are covered with purulent plaque. The liver is +3 cm. In the blood: leukocytosis, relative lymphomonocytosis, virocytes – 15%. Make the diagnosis:

- A. Infectious mononucleosis
- B. Adenovirus infection
- C. Tonsillitis
- D. Diphtheria
- E. Acute lymphocytic leukemia

## Test 49.3

- A. Infectious mononucleosis
- B. Adenovirus infection
- C. Tonsillitis
- D. Diphtheria
- E. Acute lymphocytic leukemia

## Test 50.1

A 33-year-old man was hospitalized with a recurrent ulcer bleeding that was stopped. During examination he is exhausted and pale. Blood test shows Hb of 77 g/L and Ht that equals 0.25. Due to anemia, there were two attempts to transfuse him with the blood of his group – A(II) Rh(+). Both transfusions had to be stopped because of anaphylactic reaction development. What transfusion medium is indicated in this case?

### Test 50.2

A 33-year-old man was hospitalized with a recurrent ulcer bleeding that was stopped. During examination he is exhausted and pale. Blood test shows Hb of 77 g/L and Ht that equals 0.25. Due to anemia, there were two attempts to transfuse him with the blood of his group – A(II) Rh(+). Both transfusions had to be stopped because of anaphylactic reaction development. What transfusion medium is indicated in this case?

- A. Fresh citrated blood
- B. Washed erythrocytes
- C. Packed erythrocytes (native)
- D. Erythrocyte mixture
- E. Leukoreduced and platelet-depleted packed erythrocytes

# Test 50.3

- A. Fresh citrated blood
- B. Washed erythrocytes
- C. Packed erythrocytes (native)
- D. Erythrocyte mixture
- E. Leukoreduced and platelet-depleted packed erythrocytes

### Test 51.1

An 18-year-old young man was brought into to the hematology department with complaints of headache, general weakness, loss of appetite, fever of 39oC, and a swelling on his neck. Objectively, to – 38oC, the skin and mucosa are markedly pale, the cervical lymph nodes on both sides are up to 1 cm in size and painless. The liver is +1 cm and painless, the spleen is +0.5 cm. In the blood: Hb -98 g/L, erythrocytes – 2.9 · 1012/L, leukocytes – 32 · 109/L, neutrophils – 0%, segmented neutrophils – 28%, monocytes – 2%, lymphocytes – 39%, blasts – 31%, reticulocytes – 31%, platelets – 120 · 109/L, ESR – 36 mm/hour. Specify the form of the patient's leukemia:

### Test 51.2

An 18-year-old young man was brought into to the hematology department with complaints of headache, general weakness, loss of appetite, fever of 39oC, and a swelling on his neck. Objectively, to – 38oC, the skin and mucosa are markedly pale, the cervical lymph nodes on both sides are up to 1 cm in size and painless. The liver is +1 cm and painless, the spleen is +0.5 cm. In the blood: Hb – 98 g/L, erythrocytes – 2.9 · 1012/L, leukocytes – 32 · 109/L, neutrophils – 0%, segmented neutrophils – 28%, monocytes – 2%, lymphocytes – 39%, blasts – 31%, reticulocytes – 31%, platelets – 120 · 109/L, ESR – 36 mm/hour. Specify the form of the patient's leukemia:

- A. Acute lymphoblastic leukemia
- B. Acute myeloblastic leukemia
- C. Chronic lymphocytic leukemia
- D. Chronic myelogenous leukemia
- E. Undifferentiated leukemia

### Test 51.3

- A. Acute lymphoblastic leukemia
- B. Acute myeloblastic leukemia
- C. Chronic lymphocytic leukemia
- D. Chronic myelogenous leukemia
- E. Undifferentiated leukemia

## Test 52.1

A 16-year-old teenager complains of weakness, dizziness, and heaviness in the left subcostal region. Objectively, the skin and visible mucosa are icteric. The tower skull syndrome is observed. The liver is +2 cm. The lower edge of the spleen is at the level of the navel. In the blood: erythrocytes – 2.7 · 1012/L, Hb – 88 g/L, leukocytes – 5.6 · 109/L, ESR – 15 mm/hour. What is the most likely change in the bilirubin levels in this patient?

### Test 52.2

A 16-year-old teenager complains of weakness, dizziness, and heaviness in the left subcostal region. Objectively, the skin and visible mucosa are icteric. The tower skull syndrome is observed. The liver is +2 cm. The lower edge of the spleen is at the level of the navel. In the blood: erythrocytes – 2.7 · 1012/L, Hb – 88 g/L, leukocytes – 5.6 · 109/L, ESR – 15 mm/hour. What is the most likely change in the bilirubin levels in this patient?

- A. Decrease in conjugated bilirubin levels
- B. Increase in conjugated bilirubin levels
- C. Increase in unconjugated and conjugated bilirubin levels
- D. Increase in unconjugated bilirubin levels
- E. Decrease in unconjugated bilirubin levels

## Test 52.3

- A. Decrease in conjugated bilirubin levels
- B. Increase in conjugated bilirubin levels
- C. Increase in unconjugated and conjugated bilirubin levels
- D. Increase in unconjugated bilirubin levels
- E. Decrease in unconjugated bilirubin levels

## Test 53.1

For the past 6 years a 37-year-old woman has been experiencing frequent nosebleeds, severe metrorrhagias, and periodic bruising on her skin. 10 days ago, after a severe nosebleed, her weakness intensified, she developed dizziness and palpitations. Objectively, her skin is pale, there are multiple petechiae and isolated ecchymoses on the anterior surface of her torso, legs, and arms. In the blood: Hb -80 g/L, erythrocytes  $-4.0 \cdot 1012/\text{L}$ , color index -0.7; leukocytes  $-5.3 \cdot 109/\text{L}$ ; band neutrophils -2%, segmented neutrophils -65%, eosinophils -2%, lymphocytes – 24%, monocytes – 5%, platelets – 10·109/L, ESR – 15 mm/hour. Make the diagnosis:

### Test 53.2

For the past 6 years a 37-year-old woman has been experiencing frequent nosebleeds, severe metrorrhagias, and periodic bruising on her skin. 10 days ago, after a severe nosebleed, her weakness intensified, she developed dizziness and palpitations. Objectively, her skin is pale, there are multiple petechiae and isolated ecchymoses on the anterior surface of her torso, legs, and arms. In the blood: Hb – 80 g/L, erythrocytes – 4.0 · 1012/L, color index – 0.7; leukocytes – 5.3 · 109/L; band neutrophils – 2%, segmented neutrophils – 65%, eosinophils – 2%, lymphocytes – 24%, monocytes – 5%, platelets – 10·109/L, ESR – 15 mm/hour. Make the diagnosis:

- A. Hemophilia
- B. Idiopathic thrombocytopenic purpura
- C. Hemorrhagic vasculitis
- D. Iron deficiency anemia
- E. Aplastic anemia

## Test 53.3

- A. Hemophilia
- B. Idiopathic thrombocytopenic purpura
- C. Hemorrhagic vasculitis
- D. Iron deficiency anemia
- E. Aplastic anemia

## Test 54.1

Throughout the last year a 27-yearold man notes fatigue, excessive sweating, and heaviness in his left subcostal region, especially after eating. Objectively, his spleen and liver are enlarged. Blood test: erythrocytes  $-3.2 \cdot 1012/L$ , Hb -100 g/L, color index -0.87, leukocytes  $-100 \cdot 109/L$ , basophils -7%, eosinophils -5%, monocytes -15%, juvenile -16%, band neutrophils -10%, segmented neutrophils -45%, lymphocytes -2%, monocytes -0%, reticulocytes -0.3%, platelets  $-400 \cdot 109/L$ , ESR -25 mm/hour. Make the diagnosis:

### Test 54.2

Throughout the last year a 27-years old man notes fatigue, excessive sweating, and heaviness in his left subcostal region, especially after eating. Objectively, his spleen and liver are enlarged. Blood test: erythrocytes – 3.2 · 1012/L, Hb – 100 g/L, color index – 0.87, leukocytes – 100 · 109/L, basophils – 7%, eosinophils – 5%, monocytes – 15%, juvenile – 16%, band neutrophils – 10%, segmented neutrophils – 45%, lymphocytes – 2%, monocytes – 0%, reticulocytes – 0.3%, platelets – 400 · 109/L, ESR – 25 mm/hour. Make the diagnosis:

- A. Acute leukemia
- B. Chronic lymphocytic leukemia
- C. Chronic myelogenous leukemia
- D. Erythremia (polycythemia vera)
- E. Hepatic cirrhosis

## Test 54.3

- A. Acute leukemia
- B. Chronic lymphocytic leukemia
- C. Chronic myelogenous leukemia
- D. Erythremia (polycythemia vera)
- E. Hepatic cirrhosis

## Test 55.1

A 38-year-old patient has been delivered by an ambulance to a surgical department with complaints of general weakness, indisposition, black stool. On examination the patient is pale, there are dotted hemorrhages on the skin of his torso and extremities. On digital investigation there are black feces on the glove. Blood test: Hb-108 g/L, thrombocytopenia. Anamnesis states that similar condition was observed 1 year ago. Make the diagnosis:

### Test 55.2

A 38-year-old patient has been delivered by an ambulance to a surgical department with complaints of general weakness, indisposition, black stool. On examination the patient is pale, there are dotted hemorrhages on the skin of his torso and extremities. On digital investigation there are black feces on the glove. Blood test: Hb-108 g/L, thrombocytopenia. Anamnesis states that similar condition was observed 1 year ago. Make the diagnosis:

- A. Ulcerative bleeding
- B. Hemophilia
- C. Thrombocytopenic purpura
- D. Rectal tumor
- E. Nonspecific ulcerative colitis

## Test 55.3

- A. Ulcerative bleeding
- B. Hemophilia
- C. Thrombocytopenic purpura
- D. Rectal tumor
- E. Nonspecific ulcerative colitis

## Test 56.1

A 65-year-old man was diagnosed with B12-deficient anemia and the treatment was prescribed. A week later control blood test was performed. What would be the early indicator of the therapy effectiveness?

## Test 56.2

A 65-year-old man was diagnosed with B12-deficient anemia and the treatment was prescribed. A week later control blood test was performed. What would be the early indicator of the therapy effectiveness?

- A. Increased number of reticulocytes
- B. Increased hemoglobin level
- C. Megaloblastic hematopoiesis
- D. Normoblastic hematopoiesis
- E. Increased erythrocyte number

#### Test 56.3

- A. Increased number of reticulocytes
- B. Increased hemoglobin level
- C. Megaloblastic hematopoiesis
- D. Normoblastic hematopoiesis
- E. Increased erythrocyte number

### Test 57.1

A 28-year-old woman complains of skin hemorrhages after minor traumas and spontaneous appearance of hemorrhages on the front of her torso and extremities. On examination: the skin is variegated (old and new hemorrhages), bleeding gums. Blood platelets - 20x109/L; in the bone marrow there is increased number of megakaryocytes and no platelet production. Treatment with steroid hormones was effective. What is the likely diagnosis?

### Test 57.2

A 28-year-old woman complains of skin hemorrhages after minor traumas and spontaneous appearance of hemorrhages on the front of her torso and extremities. On examination: the skin is variegated (old and new hemorrhages), bleeding gums. Blood platelets - 20x109/L; in the bone marrow there is increased number of megakaryocytes and no platelet production. Treatment with steroid hormones was effective. What is the likely diagnosis?

- A. Disseminated intravascular coagulation
- B. Hemophilia
- C. Rendu-Osler-Weber disease (Hereditary hemorrhagic telangiectasia)
- D. Idiopathic thrombocytopenic purpura
- E. Acute vascular purpura

### Test 57.3

- A. Disseminated intravascular coagulation
- B. Hemophilia
- C. Rendu-Osler-Weber disease (Hereditary hemorrhagic telangiectasia)
  - D. Idiopathic thrombocytopenic purpura
  - E. Acute vascular purpura

### Test 58.1

A 23-year-old man complains of severe pain in his left knee joint. Objectively the left knee joint is enlarged, with hyperemic skin, painful on palpation. Complete blood count: erythrocytes - 3.8 1012/L, Hb- 122 g/L, leukocytes - 7.4 109/L, platelets - 183 109/L. Erythrocyte sedimentation rate - 10 mm/hour. Bleeding time (Duke method) - 4 min., Lee-White coagulation time - 24 min. Partial thromboplastin time (activated) - 89 seconds. Rheumatoid factor - negative. What is the most likely diagnosis?

## Test 58.2

A 23-year-old man complains of severe pain in his left knee joint. Objectively the left knee joint is enlarged, with hyperemic skin, painful on palpation. Complete blood count: erythrocytes - 3.8 1012/L, Hb- 122 g/L, leukocytes - 7.4 109/L, platelets - 183 109/L. Erythrocyte sedimentation rate - 10 mm/hour. Bleeding time (Duke method) - 4 min., Lee-White coagulation time - 24 min. Partial thromboplastin time (activated) - 89 seconds. Rheumatoid factor - negative. What is the most likely diagnosis?

- A. Thrombocytopathy
- B. Werlhof disease (immune thrombocytopenia)
- C. Rheumatoid arthritis
- D. Hemophilia, hemarthrosis
- E. Hemorrhagic vasculitis (Henoch-Schonlein purpura), articular form

### Test 58.3

- A. Thrombocytopathy
- B. Werlhof disease (immune thrombocytopenia)
- C. Rheumatoid arthritis
- D. Hemophilia, hemarthrosis
- E. Hemorrhagic vasculitis (Henoch-Schonlein purpura), articular form

#### Test 59.1

A 35-year-old man complains of rapidly increasing fatigue, palpitations, "visual snow", and dizziness. He has a history of peptic ulcer of the stomach. Objectively the skin is pale. Vesicular respiration is observed in the lungs. Systolic murmur is detected over the cardiac apex, heart rate is 100/min., BP is 100/70 mm Hg. The epigastrium is slightly tender on palpation. Blood test: erythrocytes - 3.2 1012/L, Hb- 100 g/L, color index - 0.95. What type of anemia is the most likely present in this case?

### Test 59.2

A 35-year-old man complains of rapidly increasing fatigue, palpitations, "visual snow", and dizziness. He has a history of peptic ulcer of the stomach. Objectively the skin is pale. Vesicular respiration is observed in the lungs. Systolic murmur is detected over the cardiac apex, heart rate is 100/min., BP is 100/70 mm Hg. The epigastrium is slightly tender on palpation. Blood test: erythrocytes - 3.2 1012/L, Hb- 100 g/L, color index - 0.95. What type of anemia is the most likely present in this case?

- A. Hemolytic anemia
- B. Sideroblastic anemia
- C. Chronic iron-deficiency anemia
- D. Posthemorrhagic anemia
- E. Hypoplastic anemia

## Test 59.3

- A. Hemolytic anemia
- B. Sideroblastic anemia
- C. Chronic iron-deficiency anemia
- D. Posthemorrhagic anemia
- E. Hypoplastic anemia

### Test 60.1

A 22-year-old woman on a reduced diet, attended a hospital with complaints of distorted smell and taste perception and lesions in the angles of her mouth. Objectively: sclera is distinctly blue. Diagnosis: iron-deficiency anemia. What clinical syndrome is expressed primarily?

### Test 60.2

A 22-year-old woman on a reduced diet, attended a hospital with complaints of distorted smell and taste perception and lesions in the angles of her mouth. Objectively: sclera is distinctly blue. Diagnosis: iron-deficiency anemia. What clinical syndrome is expressed primarily?

- A. Anemic
- B. Hemorrhagic
- C. Hemolytic
- D. Sideropenic
- E. Myelodysplastic

## Test 60.3

- A. Anemic
- B. Hemorrhagic
- C. Hemolytic
- D. Sideropenic
- E. Myelodysplastic