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MBBS-F17-020

Time =20mins
Select Single best answer. all questions carry equal marks.

UNIT TEST: Kidney II
Date: 17-01-19

ROLL NO: B 11 NAME: Ahmed

INSTRUCTIONS

1-All objective questions are to be attempted on the paper and returned to the invigilator within 20 mins
2-Any cutting and overwriting in objective part will not be accepted

Q1.A 50 years old male with history of chronic obstructive lung disease had the following laboratory tests ;arterial PH=7.25, Pco2=78 mmHg & HCO3 30 mEq /L.The acid base disturbances present in this patient is diagnostic of :

A. Metabolic alkalosis
B. Metabolic acidosis
C. Mixed acidosis & alkalosis
D. Respiratory acidosis
E. Respiratory alkalosis

Q2.In case of persistence diarrhea, there would be decrease in

A. Anion Gap
B. Plasma HCO3 concentration
C. H+ secretion
D. Ammonia production
E. Production of new HCO3 by distal tubules

Q3. The person who has metabolic acidosis & Anion Gap is Normal,the cause of metabolic acidosis will be

A. Methanol poisoning
B. Diabetes mellitus(Ketoacidosis)
C. Renal tubular acidosis
D. Lactic acidosis
E. Aspirin poisoing

Q4. The following data is obtained from an arterial blood sample who had prolonged history of vomiting
PH= 7.5, Pco2=49mm Hg, [HCO3]= 38mEq/L.this patients arterial blood findings are diagnosis of :

A. Compensated respiratory alkalosis
B. CompensatingMetabolic alkalosis
C. Metabolic acidosis
D. Respiratory acidosis
E. Both metabolic & respiratory acidosis

Q5. Conn's Syndrome (increased Aldosterone) is mostly associated with?

A. Hyperkalemia
B. Hypocalcemia
C. Hypokalemia
D. Hyponatremia
E. Decrease in Blood volume

Q6. The only factor by which excretion of Ca^{++} is enhanced is?

A. ↑plasma phosphate
B. ↓Blood pressure
C. Metabolic acidosis
D. ↓PTH
E. ↑PTH

Q7. Which of the following is the cause of chronic renal failure

A. Hemorrhage
B. Diarrhea
C. Burn
D. Myocardial infarction
E. Diabetes mellitus

Q8.Condition that causes decreased colloidal osmotic pressure leading to severe edema is

A. Varicose vein
B. Nephrotic syndrome
C. Congestive heart failure
D. Valvular heart disease
E. Congenital abnormality of the

Q9. Hydrogen ions are secreted into tubuler lumen by intercalated cells of late distal & collecting tubules by:

A. Primary active transport
B. Secondary active transport
C. simple diffusion
D. Facilitated diffusion
E. Secondary active counter transport

Q10.If more H+ ions are filtered&secreted,in your opinion what will be the mechanism by which the kidney will remove excess hydrogen ions from renal tubules

A. Free H+ ions
B. Phosphate buffer mechanism
C. Ammonia buffer mechanism
D. Both B&C
E. Only A

Q11. Increased Na+ intake causes increased blood pressure it would lead to increased excretion of sodium and chloride by:

A. ↑Angiotensin II
B. ↓Angiotensin II
C. ↓aldosterone
D. Both B&C
E. Cortisol

Q12. The passive secretion of urea into thin loop of Henle is facilitated by urea transporter

A. UT-A1
B. UT-A2
C. UT-A3
D. UT-A4
E. UT-A5

Q13. H+ ion secretion in kidney causes:

A. Excretion of potassium
B. Excretion of Na
C. Reabsorption of Ca+
D. Reabsorption of HCO3
E. Excretionof HCO3

Q14. In the renal tubules about 65% of the filtered Na^+ is reabsorbed in:

A. Ascending limb of loop of Henle
B. Collecting tubule
C. Descending limb of loop ofHenle
D. Distal tubule
E. Proximal tubule

Q15. Most efficient renal epithelial cell buffer is

A. Phosphate buffer because its pk is 6.8
B. Phosphate buffer because it is rapidly reabsorbed in tubular cells
C. Ammonia buffer as it governs pH changes.& is produced in acidosis
D. Because its pk is 9.2
E. Both A&B

Q16. Most effective intracellular buffer is?

A. Bicarbonate buffer
B. Phosphate buffer
C. Ammonia buffer
D. Proteins
E. none of above

Q17. Which factor shift the K+ inside the principal cells in late distal &collecting tubule.

A. Insulin deficiency
B. Decreased Aldosterone secretion
C. Increased Aldosterone secretion
D. Acidosis
E. Cell lysis

Q18. In Hypokalemia what is the most probable mechanism of reabsorption of K+ from intercalated cells?

A. Passive diffusion
B. Na-k+ ATPase pump
C. By concentration gradient
D. Hydrogen Potassium ATPase
E. Increased K+ secretion

Q19. Which part of nephron act as Counter Current exchanger whichpreserve Hyperosmolarity of renal medulla.

A. Loop of Henle
B. Collecting duets
C. Vasa recta
D. Distal convulated tubules
E. Proximal convoluted tubules

Q20. Patients with chronic renal failure develop Osteomalacia, the cause of this disease is decreas

A. PTH
B. Phosphrus
C. 25Hydroxy cholecalciferol
D. Cholecalciferol
E. 1,25 dihydrocholecalciferol