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DEPARTMENT OF DERMATOVENEROLOGY

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**MODULE TEST №2
ON VENEROLOGY
FOR STUDENTS OF INSTITUTES OF HIGHER MEDICAL
EDUCATION ON SPECIALTY THERAPEUTIC FACULTY
DEPARTMENT OF DERMATOVENEROLOGY**

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The manual is a part of teaching-methods on Dermatovenerology. It contains tests on Venerology on the topics of practical sessions requiring single or multiple choice answer. The manual can be used to develop skills of students during practical sessions. It also can be used in the electronic version at testing for knowledge.

The manual is compiled according to FSES on specialty “therapeutic faculty”, working programs on dermatovenerology.

The manual is intended for foreign students of 3-4 courses on specialty “therapeutic faculty” and physicians for professional retraining.

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Theme 1. Sexually transmitted infections I

Syphilis primary, secondary

Single choice answer

- 1** **Select the statement that is true for primary syphilis:**
The incubation period of 6 months
Hard chancre on the place of invasion of T. pallidum
Common skin rashes and mucous
After 9-10 weeks after infection poliscleradenitis develops
All standard serological tests are positive in 100% of patients

- 2** **List the symptoms of "syphilitic triad":**
Chancre, regional lymphadenitis, specific lymphangitis
Chancre, roseolous common rashes, specific lymphangitis
Chancre, poliscleradenitis, widespread rash roseolous
Chancre, roseolous common rashes, roseolous angina
Chancre, poliscleradenitis, roseolous angina

- 3** **List the "atypical" forms of chancre:**
Chancre - felon
Cortical chancre
Erosive chancre
Balanitis of Follmann
Scorch chancre (combustio)

- 4** **What refers to the typical signs of chancre - amigdalitis:**
Fever
Leucocytosis
Persistent pain
Asymmetry of defeats
Symmetrical hyperemia throat

- 5** **Atypical forms of chancre include everything, except:**
Indurative swelling
Chancre felon
Herpetiformis chancre
Esthiomene
Chancre-amygdalitis

- 6 **Complications chancre include everything, *except*:**
 Balanitis
 Posthitis
 Paraphymosis
 Indurative edema
 Gangrenisation
- 7 **Regional lymphadenitis in the primary period of syphilis develops after the appearance of the chancre later:**
 3-5 days
 5-8 days
 8-10 days
 10-12 days
 12-14 days
- 8 **Length of Treponema pallidum is (average):**
 1-2 microns
 8-14 mm
 20-25 microns
 30-33 microns
 38-40 microns
- 9 **Give a description of Treponema pallidum:**
 Diplococcus
 It has a spiral shape
 Pear-shaped
 Gram positive
 It has the ability to phagocytosis
- 10 **In the primary period of syphilis patients may experience all the symptoms, *except*:**
 Wide warts
 Chancre
 Lymphangitis
 Regional scleradenitis
 Seropositive
- 11 **What disease is necessary to differentiate primary syphilis (chancre):**
 Chancriform pyoderma
 Crusted ringworm (favus)
 Pink zoster Gibert
 Vulgar sycosis
 Erythrasma

- 12** **What disease is caused by Treponema pallidum?**
Syphilis
Gonorrhea
Scabies
Trichomoniasis
Microsporia
- 13** **Select the causative agent of syphilis:**
Sarcoptes scabiei hominis
Treponema pallidum
Pityrosporum orbiculare
Candida albicans
Chlamidia trachomatis
- 14** **Select a complication of chancre:**
The appearance of tubercles
The appearance of leucoderma
Paraphimosis
The emergence of broad warts
Appearance gummas
- 15** **Paraphimosis - this is a complication of:**
Syphilis
Psoriasis
Microsporia
Tinea versicolor
Rubromikosis
- 16** **Chancre is accompanied by:**
Regional lymphadenitis
Defeat of hair
Defeat of nail plates
The advent of bumps on the skin of the trunk
Itching
- 17** **Diagnosis of primary syphilis:**
Detection of eosinophils in the content of bubbles
Detection of Treponema pallidum
Positive Balzer iodine sample
Positive symptoms Nikolsky
Glow under the fluorescent lamp of Wood

- 18 Specify feature Treponema pallidum:**
Poor dyed with aniline dyes
It is a Gram-negative
It is a Gram-positive
Defined under the glow of a lamp Wood
It grows well on nutrient media
- 19 Specify the method for the laboratory diagnosis of primary syphilis:**
Aminotest
IFA (immunoenzyme analysis)
The culture diagnosis
Detection of eosinophils in the content of bubbles
Detection of Neisseria gonorrhoeae from the surface of the chancre
- 20 What drugs are used to treat syphilis?**
Antimalarial
Sulfonic
Acaricide
Antihistamines
Antibiotics
- 21 At what disease appears chancroid-felon?**
Primary syphilis
Scabies
Trihothytia
Chromophytosis
Onychomycosis
- 22 Which causative agent has a spiral shape?**
Gonococcus
Treponema pallidum
Staphylococcus
Microsporum Canis
Trichophyton Rubrum
- 23 The causative agent of what disease has a spiral shape?**
Gonorrhea
Syphilis
Trichomoniasis
Urogenital chlamydiosis
Chancroid
- 24 What kind of alopecia is not syphilitic?**

Small areas
Macrofocal
Total
Diffuse
Mixed

- 25 The varieties of syphilitic roseola *do not* include:**
Psoriasis-form
Elevating
Grainy
Drain
Haemorrhagic
- 26 Specify a sign that is *not* typical for secondary recurrent syphilis**
Sick voice
Protuberance
Alopecia
Extensive warts
Leucoderma
- 27 In the treatment of genital warts (syphilitic) are widely used:**
Antiviral ointment
Corticosteroids
Antibiotics
antihistamines
Vitamins
- 28 Syphilitic roseola should be differentiated from:**
Hydradenitis
Crusted ringworm (favus)
Pink lichen Gibert
Vulgar sycosis
Ostiofolliculitis
- 29 In what period of syphilis appears leucoderma:**
Secondary recurrent
Primary seronegative
Primary seropositive
Incubation
Tertiary
- 30 What disease is characterized by the emergence of broad warts:**
Scabies

Tinea versicolor
Psoriasis
Syphilis
Rubrophytia

Multiple choice answer

- 1** **Select the clinical signs of primary syphilis**
Chancre
Regional lymphadenitis
Tubercle
Gumma
Alopecia

- 2** **Varieties atypical chancre:**
Chancroid-felon
Gummous chancre
Indurative edema
The chancre-amygdalitis
Erosive

- 3** **What disease is necessary to differentiate with primary syphilis (chancre):**
Chancriform pyoderma
Genital herpes
Pink zoster Gibert
Onychomycosis
Chromophytosis

- 4** **Complications of chancre:**
Balanitis
Balanoposthitis
Paraphimosis
Indurative edema
Gangrenisation (necrosis)

- 5** **Specify methods for the laboratory diagnosis of primary syphilis:**
Bacteriological method
IFA (immunoenzyme analysis)
Microscopic observation in the dark field of view
Detection of eosinophils in the content of bubbles
Detection of Neisseria gonorrhoeae from the surface of the chancre

- 6 Specify the features of Treponema pallidum:**
Poor dyed with aniline dyes
Gram-negative
Gram-positive
Defined under the glow of a lamp Wood
Spiral shape
- 7 Chancre is accompanied by:**
Regional lymphadenitis
Defeat of hair
Defeat of nail plates
The advent of tubercles on the skin of the trunk
Limfangitis
- 8 Choose a variety of syphilitic leukoderma:**
Drain
Spotted
Mesh
Marble
Lace
- 9 Clinical manifestations of the secondary period of syphilis:**
Papules
The pustules
Extensive warts
Tubercles
Gummas
- 10 Methods of laboratory diagnosis of syphilis of second period**
IFA (immunoenzyme analysis)
The reaction of passive hemagglutination
Immunofluorescence
Detection of eosinophils from surface of elements
Detection of gonococcal form surface of elements
- 11 Syphilitic pustules must be differentiated from:**
Acne vulgaris
Chickenpox
Vulgar impetigo
Chromophytosis
Onychomycosis

- 12 Varieties of syphilitic pustules:**
 Smallpox-like
 Psoriasis-form
 Shelled
 Acne-formed
 Impetigo
- 13 Clinical manifestations of fresh secondary syphilis:**
 Chancre remains
 Roseolus rash
 Seropositive
 Gummas
 Tubercles
- 14 Clinical manifestations of recurrent secondary syphilis:**
 Roseolus rash
 The pustules
 Extensive warts
 The primary affect
 Tubercles
- 15 Roseola of syphilis has to be differentiated from:**
 Furuncle
 Pink deprive Gibert
 Acantholytic pemphigus
 Dermatitis herpetiformis Duhring
 Chromophytosis
- 16 Primary period of syphilis is divided into:**
 The primary seronegative syphilis
 Primary syphilis seropositive
 Incubatory
 Prodromal
 Latent
- 17 The secondary period of syphilis is divided into:**
 Secondary syphilis fresh
 The secondary latent syphilis
 Second recurrent syphilis
 Secondary resistance
 Secondary gummous
- 18 Varieties of syphilitic alopecia:**

Small focal
Diffuse
Mixed
Scar

- 19 Syphilitic alopecia should be differentiated with:**
Cicatrical alopecia
Microsporia
Tinea versicolor
Androgenic alopecia

- 20 The varieties of pustular syphilides include:**
Acne-form
Impetigous
Eczematous
Smallpox-like

Theme 2. Sexually transmitted infections II

Tertiary syphilis. Congenital syphilis

Single choice answer

- 1 Choose the correct statements that describe tertiary syphilis:**
Doesn't affect internal organs
Highly contagious rash, rash polymorphism and various symptoms
Tubers, nodes, tend to scarring and decomposing
Hard (indurated, true) chancre, lymphadenitis
Diffuse papular infiltration on palms and soles, around the mouth, buttocks
- 2 Choose syphiloderm types for tertiary syphilis:**
Tubers, papulas, gumma infiltration
Tubers, tertiary roseola, gumma infiltration
Gumma, roseola
Roseola, gumma infiltration, gumma
Buboes, gumma, tubers
- 3 Choose types of tuber syphiloderm:**
Herpetiform
Psoriasiform

Grouped
Smallpox-like
Akne

- 4** **Tertiary roseola is described as:**
Rash, affects all skin.
Atrophy after resolution
Bright, juicy color
Various outlines
Large, pale
- 5** **Name types of gumma syphiloderm:**
Fibrous
Grouped
Dissolved
Pigmented
«Platform»
- 6** **Gumma should be differentiated with these, *except*:**
Scrofuloderma
Trophic ulcer
Chronic ulcerative pyoderma
Leishmaniasis
Parapsoriasis
- 7** **Side effect when treating syphilis with penicillin is:**
Anaphylactic shock
Toxicoderma
Urticaria
Alopecia
Candidiasis
- 8** **Tertiary syphilis scars are described as:**
Indrawn
Flat
Star-shaped
Superficial
Have fibrils and interconnections
- 9** **Possible gumma syphiloderm outcomes, *except*:**
Without a trace
Ulerythema
Decomposition

Fibrosis
Ulceration

- 10 Clinical manifestations of tertiary syphilis:**
Grouped papilla
Papulosquamous syphilid
Typhoid maculopapular rash
Extensive perineum condylomas
Alopecia areata
- 11 For tertiary syphilis is *not* typical**
Flat condyloma
Hard palate gumma
Mesaortitis
Tubercles on skin
Star-shaped shin scarrings
- 12 For tertiary syphilis is typical**
Papulosquamous syphilid
Maculopapular rash
Grouped papilla
Extensive perineum condylomas
Alopecia areata
- 13 When is fetus infected in a pregnant patient with syphilis?**
4-5 month
1-2month
3 month
6-7 month
8-9 month
- 14 Pathognomic symptom of early congenital syphilis is:**
Diffuse syphilitic infiltration
Papular elements
Spotty elements
Alopecia areata
Specific paronychia
- 15 Skin lesions, specific for congenital syphilis are, *except*:**
Hyperkeratosis follicularis
Diffuse syphilitic infiltration
Papular rash

Specific rhinitis
Pemphigus

- 16** **Possible signs if late congenital syphilis are:**
Axiphoidia
Interstitial keratitis
Labyrinthine deafness
Hypertrichosis
Saber shins
- 17** **For Syphilitic placenta is typical:**
Swelling and proliferation of cells
Hypoplasia of connective tissue
Decrease of afterbirth mass and size
Unaltered fetal portion of placenta
Altered mothers portion of placenta
- 18** **Which of the characteristics of Hutchinson teeth is obligatory?**
Narrowing of cutting edge at least for 2 mm relative to a neck of a tooth
Smaller size
All teeth missing
Pike's tooth
Diastema
- 19** **Choose specific characteristic for congenital infancy syphilis (0 to 1 years old)**
Radiar scars of Robinson-Fournier
Geisinger cutaneous diffuse infiltration
Saber shins
Interstitial keratitis
Labyrinthine deafness
- 20** **Specific characteristic for congenital infancy syphilis (0 to 1 years old), except:**
Bullous syphilid
Geisinger cutaneous diffuse infiltration
Syphilitic arthritis, 3 stages
Saber shins
Syphilitic rhinitis
- 21** **True signs of late congenital syphilis**
Labyrinthine deafness
Saddle nose

Radiar scars of Robinson-Fournier
Parrot's disease
Syphilitic rhinitis

22 Specific characteristic for late congenital syphilis, except:

Specific retinopathy
Saber shins
Saddle nose
Radiar scars of Robinson-Fournier
Bullous syphilid

23 Saddle nose is typical for

Primary syphilis
Secondary fresh syphilis
Late congenital syphilis
Secondary recurrent syphilis
Tertiary syphilis

24 Saber shins are typical for:

Primary syphilis
Secondary fresh syphilis
Late congenital syphilis
Secondary recurrent syphilis
Tertiary syphilis

25 Hutchinson's triad is typical for

Primary syphilis
Secondary fresh syphilis
Late congenital syphilis
Secondary recurrent syphilis
Tertiary syphilis

26 For late latent syphilis is typical:

Sexual partner has manifestation of syphilis
No data about sexual partner syphilis status
Sexual partner has early latent syphilis
Sexual partner has interstitial syphilis

27 Specific characteristic for early congenital syphilis:

Conjunctivitis
Chorioretinitis
Iritis
Keratitis

- 28 In with period of syphilis gummas appear:**
 Primary
 Secondary
 Tertiary
 Incubation period
- 29 In with period of syphilis tubers appear**
 Primary
 Secondary
 Tertiary
 Incubation period
- 30 Radiar scars of Robinson-Fournier are typical for the period of syphilis:**
 Primary
 Secondary
 Tertiary
 Incubation period
- 31 In what period of syphilis bullous syphilid appear:**
 Primary
 Secondary
 Congenital syphilis
 Tertiary

Multiply choice answer

- 1 For syphilis of placenta is typical that:**
 Hyperplasia of the connective tissue cells
 Overgrowth of granulation tissue
 Increase in weight and size of the placenta
 Abscess formation in the blood vessels of the villi
- 2 Specify the symptoms that are *not* typical for syphilis of placenta:**
 Hyperplasia of the connective tissue cells
 Overgrowth of granulation tissue
 Increase in weight and size of the placenta
 Abscess formation in the blood vessels of the villi
- 3 Dystrophy in late congenital syphilis includes:**
 Hutchinson's teeth

Saber shin
The absence of xiphoid
Infantile little finger of Dubois-Hissar

4 Probable signs of late congenital syphilis include:

Saber shin
Syphilitic rhinitis
Saddle nose
Flank-shaped teeth

5 Syphilitic pemphigus of newborns is characterized by:

Appearance of rashes all over the skin surface
Positive sign of Nikolsky
Symmetrical arrangement on the palms and soles
The presence of eosinophils in the content of bubbles

6 Clinical manifestations of tertiary syphilis:

Gumma
Papules
Tubercles
Roseola Fournier

7 Choose unconditional signs of late congenital syphilis:

Thickening of the sternoclavicular joint
Labyrinthine deafness
Parenchymal keratitis
Lack xiphisternum

8 Specify the possible outcomes gummy syphilides:

Healing without trace
Decay
Fibrosis
Pitting

9 Select syphilides types encountered in the tertiary syphilis:

The bumps
Gum
Tertiary roseola
Scarring

10 Tubercle lesions of tertiary syphilis lesions on the skin should be differentiated from lesions at:

Lupus tuberculosis

Lepre
Leishmaniasis
Parapsoriasis

11 Gummas of tertiary syphilis on the skin should be differentiated from lesions at:

Furuncle
Tumor formation
Chromophytosis
Athlete's foot (epidermophytiasis)

12 Select types of syphilides encountered in the tertiary syphilis:

Tubercles
Gumm infiltration
Nodes (Gumma)
Tertiary roseola

13 Variety of gummy syphilides:

Solitary (single) and multiple
Gumm infiltration
Mutilating
Fibroids

14 Possible signs of congenital syphilis:

Olympic forehead
Saddle nose
Gothic palate
Saber shin

15 Differential diagnosis of gumma is held with:

Lipoma
Trichilemmal cyst
Chancre
Deep mycoses

16 The differential diagnosis of gumma is carried out:

Cutaneous leishmaniasis
Skrofuloderma
Cancerous ulcer
Extensive warts

17 Symptoms of congenital syphilis among infants are:

Syphilitic pemphigus

Diffuse-papular infiltration Goghzinger
Osteochondritis of Wegner
Chancre

18 For late congenital syphilis is characterized by:

Tubercles
Gum
Mottled rash roseolous
Chancre

19 Which of the following may be signs of late congenital syphilis:

Parenchymal keratitis
Labyrinthine deafness
Hetchinson teeth
Extensive warts

Theme 3. Gonorrhoea

Single choice answer

1 Specify, which is *not* typical of gonorrhoea of the eye:

Exophthalmos
Edema of the eyelids
Photophobia, suppuration
Hyperemia of the conjunctiva
Disintegrating ulcers in the cornea

2 What is *not* typical for acute anterior gonorrhoeal urethritis:

In the two-glass test urine in both glasses is cloudy
Yellowish-green pus from the uretra
Cutting pain at the beginning of urination
Hyperaemia and swelling of the lips of the external urethral opening
In the two-glass test urine in the first glass will be cloudy

3 Choose the odd clinical forms of extraurogenital gonorrhoeal localization:

Proctitis
Pharyngitis
Tonsillitis
Vulvovaginitis
All answers are correct

- 4** **Gonorrhoea is caused by:**
Haemophilic corynebacteria
Gram-positive diplococcus
Herpes simplex virus
Gram-negative diplococcus
Gram-negative bacilliae
- 5** **What is not typical for chronic gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
Mild subjective disorders
May be interrupted by periods of exacerbation induced by alcohol
A longer than two-month duration of the gonorrhoeal disease
Sometimes strictures of the urethra are found
- 6** **The causative agent of Gonorrhoea:**
Gram-negative diplococcus
Pear-shaped forms
Spiral thread shaped like a corkscrew
Ovoid, egg-shaped organism
- 7** **Incubation period of Gonorrhoea lasts:**
3 – 5 days
10 – 12 months
3 – 4 weeks
5 – 6 weeks
1 – 2 months
- 8** **What are complications of gonorrhoea in females:**
Proctitis
Endocervicitis
Vaginitis
Vulvovaginitis
Epididymitis
- 9** **Choose the causative agent of Gonorrhoea:**
Treponema pallidum
Trichomonas vaginalis
Neisseria gonorrhoeae
Candida albicans
Chlamydia trachomatis
- 10** **What things are characteristic of total of gonorrhoeal urethritis:**
In the two-glass test urine in the first glass is cloudy

In the two-glass test urine in both glasses is cloudy
In the two-glass test urine in the first glasses is not cloudy
In the two-glass test urine in second glasses is not cloudy
In the two-glass test urine in both glasses is not cloudy

- 11 Choose the complications of gonorrhoeal urethritis:**
Prostatitis
Appear the psoriatic papule on the skin
Hypertrichosis
Saber shin
Onychogryphosis
- 12 Gonorrhoeal's disease diagnostics:**
The microscopic examination by Gram-method
Positive Nikolsky's sign
Appearance of papules with silver-white scales
Wood's lamp examination (green fluorescence)
Eosinophiles cells detection in the blisters
- 13 Choose the products for the treatment of gonorrhoeal urethritis:**
Antimalarial
Antibiotic
Acaricide
Hyposensitization therapy
- 14 Choose criteria of efficiency of treatment of a gonorrhoeal urethritis:**
Absence of a complain
Full permission of the existing rashes
Absence of an pain
All answers are correct
- 15 Systemic dissemination - complications of gonorrhea:**
Septic arthritis
Meningitis
Endocarditis
All answers are correct
- 16 What are the signs and symptoms of gonorrhoea of males:**
Inflammation of the urethra
Painful urination (burning sensation)
Painful testicles
All answers are correct

- 17 Acute gonococcal proctitis:**
Painful defaecation
Positive Nikolsky's sign
Appear the psoriatic papule on the skin
Green fluorescence Wood's lamp examination
- 18 The criteria for the effectiveness of the treatment of fresh acute gonorrhoeal urethritis:**
Improving the quality of life of the patient
Duration of remission
No new complain
All answers are correct
- 19 Result from untreated gonorrhoea of the men:**
Inflammation of the epididymis
Inflammation of the urethra
All answers are correct
Inflammation of the prostate gland
- 20 What are the signs and symptoms of gonorrhoea of females:**
No symptoms until the infection has progressed to a more advanced stage
Papules on the surface marked with silvery-white scales
Papula with a crateriform depression in the centre
The presence of skin lesion white color with a purple ring
- 21 Patients testing positive for gonorrhoea should be tested for:**
Chlamydia
Syphilis
Human immunodeficiency virus
All answers are correct
- 22 What is disseminated gonococcal infection:**
Joint or tendon pain with decreased mobility
Skin rash
Occur on the trunk, limbs, palms and soles
All answers are correct
- 23 What the forms of gonorrhoea of the urogenital organs in males:**
Fresh
Chronic
Latent
All answers are correct

- 24 Which is typical for acute gonorrhoeal urethritis:**
The lips of the external urethral opening are considerably swollen
Appear glassy and slightly everted
Yellowish-green pus
All answers are correct
- 25 What the complain of acute gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
Appear papules on the surface marked with silvery-white scales
Appear on the face erythema, resembling a "butterfly"
Formation of wheals in place of scratching
- 26 Which is typical for posterior gonorrhoeal urethritis:**
Frequent imperative urges to urinate at the end of which sharp pain is felt
Appear papules on the surface marked with silvery-white scales
Appear on the face erythema, resembling a "butterfly"
Formation of wheals in place of scratching
- 27 Which is typical for fresh torpid anterior gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
No subjective disorders
Appear papules on the surface marked with silvery-white scales
Appear on the face erythema, resembling a "butterfly"
- 28 The diagnosis of posterior urethritis:**
Purulent threads and flakes are found in the second glass of urine in the two-glass test
Appear papules on the surface marked with silvery-white scales
Appear on the face erythema, resembling a "butterfly"
Formation of wheals in place of scratching
- 29 Which is typical for fresh subacute gonorrhoeal urethritis:**
Urethral discharge is scanty
Mucopurulent
Noticeable in the morning when the patient had not urinated at night
All answers are correct
- 30 The criteria for the effectiveness of the treatment of chronic gonorrhoeal urethritis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct

- 31 Which is typical for chronic gonorrhoeal urethritis:**
Scanty discharge
Cutting pain at the beginning of urination
Yellowish-green pus
The lips of the external urethral opening are considerably swollen
- 32 Clinical picture of chronic gonorrhoeal urethritis appears a longer than:**
Two-month duration of the disease
One-month duration of the disease
6-month duration of the disease
12-month duration of the disease
- 33 Choose complaints in patients with chronic gonorrhoeal urethritis:**
Symptom "morning drop"
Cutting pain at the beginning of urination
Yellowish-green pus
Formation of wheals in place of scratching
- 34 How is the diagnosis of gonorrhoea made:**
Gram-staining and culture
Skin biopsy
Positive psoriatic triad
Green fluorescence Wood's lamp examination
- 35 What are the complications of untreated gonorrhoea:**
Ascending infection in the urogenital tract in men
Painful inflammation of epididymis and prostate
Urethral scarring in men
All answers are correct
- 36 Gram-negative diplococcus is causative agent of:**
Gonorrhoea
Scabies
Syphilis
Herpes simplex
- 37 For the identification of gonococci of males the pathological material is collected from:**
Uretra
Prostate
Seminal vesicles

All answers are correct

38 For the identification of gonococci of women the pathological material is collected from:

Uretra

Cervical canal

Rectum

All answers are correct

39 Choose method of provocation of gonorrhoea in men:

Biological

Chemical

Mechanical

All answers are correct

40 Which is typical for provocation of gonorrhoea:

Artificial exacerbation of the inflammatory process

It is positive Jadassohn patch test

Appearance of papules with silver-white scales on the skin

Presence of acantolytic cells

41 Which is typical for gonococcus form:

Two elongated cocci with a septum between them

Pear-shaped forms

Spiral thread shaped like a corkscrew

Ovoid, egg-shaped organism

42 For the pathogen of the disease is characterized by a form “two elongated cocci with a septum between them”:

Gonorrhoea

Syphilis

Herpes simplex

Pediculosis

43 Routes of gonorrhoea transmission:

Sexual

Contaminated animal

Caused by animal parasites

Develops under the influence of the irritant which arrived at introduction of medicines to a vein

44 In the two-glass test urine in both glasses is cloudy is typical for:

Total of gonorrhoeal urethritis

Anterior gonorrhoeal urethritis
Posterior gonorrhoeal urethritis
Vesiculitis

- 45** **Gonococcal infections result from contact:**
Penile-vaginal
Penile-rectal
Penile-pharyngeal
All answers are correct
- 46** **Dissemination gonorrhea contribute:**
Intercurrent disease
Antibiotic therapy
Multivitamin
Use of antiseptics
- 47** **Choose tactics with no effect on the treatment of gonorrhoea:**
Exception reinfection
Appointment of antibacterial drugs of other pharmacological groups according to the results of susceptibility testing of isolates
N. Gonorrhoeae susceptibility to antibiotics
All answers are correct
- 48** **What is characteristic of gonorrhea eye:**
Swelling of the eyelids
Photophobia, suppuration
Conjunctival hyperemia
All answers are correct
- 49** **The criteria for the effectiveness of the treatment of fresh subacute gonorrhoeal urethritis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 50** **The clinical material for research on gonorrhea:**
Urethral
Cervical canal
The lower portion of the rectum
All answers are correct
- 51** **Which is typical for gonorrhoeal epididymitis:**

Usually develops sharply
Pain in the affected epididymis
Hyperaemia of the corresponding half of the scrotum
All answers are correct

52 What the forms of gonorrhoea of the urogenital organs in females:

Fresh
Chronic
Latent
All answers are correct

53 Which is typical for gonococcal pharyngitis:

Extraurogenital localization
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

54 Laboratory studies of gonorrhoea:

Microscopic examination *Tr. Pallidum*
Coagulogram
Microscopic examination gonococci
Microscopic examination to *Sarcoptes Scabieis* (Itch Mites)

55 Which is typical for gonococcal proctitis:

Extraurogenital localization
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

56 Which is typical for gonococcal vulvovaginitis:

Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
Bright-red hyperaemia and swelling of the large pudendal lips

57 Which is typical for gonococcal vesiculitis:

Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

58 Which is typical for gonococcal deferentitis:

Complication of gonorrhoea

Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

59 Which is typical for gonococcal abscess of the preputial gland:

Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

60 Which is typical for gonococcal cowperitis:

Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

61 Which is typical for gonococcal chronic prostatitis:

Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

62 Which is typical for disseminated gonococcal infection (DGI):

Results from bacteremic spread of *N. Gonorrhoeae*
Results from bacteremic spread of *Tr. Pallidum*
Results from spread of *Sarcoptes Scabieis*
Results from spread of *Microsporum canis*

63 Which is typical for gonococcal infection in infants born:

Sight -threatening conjunctivitis to infected mothers
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

64 Which joints most commonly affected by disseminated gonorrhea:

Wrists
Ankles
Of the hands and feet
All answers are correct

65 The criteria for the effectiveness of the treatment of Gonorrhea infections in women:

Improving the quality of life of the patient

Duration of remission
The lack of new complains
All answers are correct

- 66 Diagnostic Minimal criteria pelvic inflammatory disease in women:**
Cervical motion tenderness
Positive microscopic examination to Sarcoptes Scabieis (Itch Mites)
A positive phenomenon psoriatic triad
Pustules around hair follicles
- 67 Diagnostic Additional criteria pelvic inflammatory disease in women:**
Abnormal cervical or vaginal mucopurulent discharge
Positive microscopic examination to Sarcoptes Scabieis (Itch Mites)
A positive phenomenon psoriatic triad
Pustules around hair follicles
- 68 Diagnostic Specific criteria pelvic inflammatory disease in women:**
Evidence of endometritis on endometrial biopsy
Positive microscopic examination to Sarcoptes Scabieis (Itch Mites)
A positive phenomenon psoriatic triad
Pustules around hair follicles
- 69 Subjective symptoms of gonorrhoea in women:**
Purulent or muco-purulent discharge from the genital tract
Itching of the skin at night
Appearance of bullae on healthy skin and mucosa membrans
Appearance papules on the skin, covered with silvery-white scales
- 70 The objective symptoms of gonorrhoea in women:**
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign
Redness and swelling of the mucous membrane of the vulva, vagina
- 71 Subjective symptoms of gonorrhoea in males:**
Discharge of an inflammatory exudates from uretra and painful
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign
- 72 The objective symptoms of gonorrhoea in males:**
The lips of the external urethral opening are considerably swollen and hyperaemic

A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign

- 73** **Diagnosis of gonorrhoea may be established:**
Causative agent has been identified in the smears or cultures
A positive phenomenon psoriatic triad
Positive the Baltser's iodine test
Positive microscopic examination to Sarcoptes Scabieis

- 74** **Differential diagnosis of gonorrhoea:**
Herpes simplex virus
Syphilis
Ch. Trachomatis
All answers are correct

- 75** **Which is typical for gonococcal Bartholinitis:**
Perilabial pain
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign

- 76** **Diagnostic approach patients with extragenital localization:**
Symptoms
Microbiological diagnosis
A culture method
All answers are correct

- 77** **Which is typical for gonorrhoeal cervicitis:**
Vaginal pruritus
Mucopurulent discharge
All answers are correct
Intermenstrual bleeding or menorrhagia

- 78** **Suspicion for upper genital tract disease:**
Abdominal pain
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive the Baltser's iodine test

- 79** **Gonorrhoeal pharyngeal infections:**
After orogenital exposure
Symptoms are mild or absent

The pharynx may be erythematous or have exudates
All answers are correct

- 80 The criteria for the effectiveness of the treatment of chronic gonorrhoeal pharyngeal infections:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 81 Which is typical for cervical gonococcal infection:**
Asymptomatic
Abdominal pain
Positive the Baltser's iodine test
Itching of the skin at night
- 82 The criteria for the effectiveness of the treatment of cervical gonococcal infection:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 83 The criteria for the effectiveness of the treatment of gonococcal cowperitis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 84 The criteria for the effectiveness of the treatment of chronic prostatitis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 85 Gonococcal infection complications of pregnancy:**
Preterm birth
Spontaneous abortions in pregnant women
Premature rupture of membranes
All answers are correct

- 86 Which is typical for Infants born to infected mothers gonococcal infection:**
May have lower mean birth weight
Neonatal conjunctivitis
Pharyngitis
All answers are correct
- 87 Rare complications of gonococcal urethritis in men:**
Penile lymphangitis
Penile edema ("bull-headed clap")
Periurethral abscesses
All answers are correct
- 88 Which is typical for gonococcal proctitis in women:**
Anorectal pain
Constipation
Rectal fullness
All answers are correct
- 89 Which is typical for gonococcal pharyngitis in women:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates
All answers are correct
- 90 Which is typical for gonococcal pharyngitis in men:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates
All answers are correct
- 91 Rare manifestations of disseminated gonococcal infection in men:**
Endocarditis
Meningitis
Osteomyelitis
All answers are correct
- 92 Clinical syndromes of disseminated gonococcal infection in men:**
Purulent arthritis
Tenosynovitis
Polyarthralgias
All answers are correct

- 93 Rare manifestations of disseminated gonococcal infection in women:**
Endocarditis
Meningitis
Osteomyelitis
All answers are correct
- 94 Clinical syndromes of disseminated gonococcal infection in women:**
Purulent arthritis
Tenosynovitis
Polyarthralgias
All answers are correct
- 95 For any disease appears symptom "morning drop":**
Syphilis
Chronic gonorrhoeal urethritis
Toksiko-allergic dermatitis
Psoriasis
- 96 Choose method of provocation of gonorrhoea in women:**
Biological
Chemical
Physiology
All answers are correct
- 97 The criteria for the effectiveness of the treatment of gonococcal conjunctivitis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 98 The criteria for the effectiveness of the treatment of disseminated gonococcal infection:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 99 Laboratory studies of gonococcal conjunctivitis:**
Microscopic examination Tr.Pallidum
Coagulogram
Microscopic examination gonococci
Microscopic examination to Sarcoptes Scabieis (Itch Mites)

100 Laboratory studies of disseminated gonococcal infection:

Microscopic examination Tr.Pallidum

Coagulogram

Microscopic examination gonococci

Microscopic examination to Sarcoptes Scabieis (Itch Mites)

Multiply choice answer

1 The classical triad of disseminated gonococcal infection (DGI) features consists of:

Dermatitis

Tenosynovitis

Migratory polyarthritis

Pustules around hair follicles

2 Which is typical for gonococcal pharyngeal infections:

Occur after orogenital exposure

Symptoms are mild or absent

The pharynx may be erythematous

Results from bacteremic spread of Tr.Pallidum

3 Choose the odd clinical forms of extraurogenital gonorrhoeal localization:

Gonorrhoeal proctitis

Gonorrhoeal pharyngitis

Gonorrhoeal tonsillitis

Gonorrhoeal urethritis

4 What are the signs and symptoms of gonorrhoea of males:

Inflammation of the urethra

Painful urination (burning sensation)

Painful testicles

Itching of the skin at night

5 Differential diagnosis of gonorrhoea:

Herpes simplex virus

Syphilis

Pediculosis

Scabies

- 6 Gonorrhoeae pharyngeal infections:**
 After orogenital exposure
 Symptoms are mild or absent
 The pharynx may be erythematous or have exudates
 Abdominal pain
- 7 The criteria for the effectiveness of the treatment of chronic gonorrhoeal pharyngeal infections:**
 Improving the quality of life of the patient
 Duration of remission
 The lack of new complaints
 Appears new complaints
- 8 The criteria for the effectiveness of the treatment of Gonorrhoea infections in women:**
 Improving the quality of life of the patient
 Duration of remission
 The lack of new complaints
 Appears new complaints
- 9 Which joints most commonly affected by disseminated gonorrhoea:**
 Wrists
 Ankles
 Of the hands and feet
 Joints not affected
- 10 The clinical material for research on gonorrhoea:**
 Urethral
 Cervical canal
 The lower portion of the rectum
 Biopsia of the skin
- 11 The causative agent of Gonorrhoea:**
 Gram-negative
 Pear-shaped forms
 Spiral thread shaped like a corkscrew
 Diplococcus
- 12 What is not complications of gonorrhoea in females:**
 Vesiculitis
 Vaginitis
 Vulvovaginitis
 Epididymitis

- 13 What is complications of gonorrhoea in females:**
 Vesiculitis
 Vaginitis
 Vulvovaginitis
 Epididymitis
- 14 Gonorrhoeal's disease diagnostics:**
 The microscopic examination by Gram-method
 A culture method
 Appearance of papules with silver-white scales
 Wood's lamp examination (green fluorescence)
- 15 Choose criteria of efficiency of treatment of a gonorrhoeal urethritis:**
 Absence of a complain
 Full permission of the existing rashes
 Absence of an pain
 Appearance new complain
- 16 Complications of gonorrhea:**
 Septic arthritis
 Meningitis
 Endocarditis
 A positive phenomenon psoriatic triad
- 17 The criteria for the effectiveness of the treatment of fresh acute gonorrhoeal urethritis:**
 Improving the quality of life of the patient
 Duration of remission
 No new complains
 Appearance new complains
- 18 Result from untreated gonorrhea of the men:**
 Inflammation of the epididymis
 Inflammation of the urethra
 Improving the quality of life of the patient
 Inflammation of the prostate gland
- 19 Which is typical for fresh subacute gonorrhoeal urethritis:**
 Urethral discharge is scanty
 Mucopurulent
 Noticeable in the morning when the patient had not urinated at night
 Swelling of the eyelids

- 20 The criteria for the effectiveness of the treatment for gonococcal bartholinitis:**
Improving the quality of life of the patient
Duration of remission
No new complain
Appearance new complain
- 21 Clinical picture of gonococcal bartholinitis:**
Perilabial pain
Discharge
Swelling of the eyelids
Edema of the labia
- 22 Which is typical for Infants born to infected mothers gonococcal infection:**
May have lower mean birth weight
Neonatal conjunctivitis
Pharyngitis
No typical signs
- 23 Rare complications of gonococcal urethritis in men:**
Penile lymphangitis
Penile edema ("bull-headed clap")
Periurethral abscesses
Swelling of the eyelids
- 24 Which is typical for gonococcal proctitis in women:**
Anorectal pain
Constipation
Rectal fullness
Swelling of the eyelids
- 25 Which is typical for gonococcal pharyngitis in women:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates
Swelling of the eyelids
- 26 Which is typical for gonococcal pharyngitis in men:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates

Swelling of the eyelids

- 27 Which is typical for gonococcal proctitis in men:**
Anorectal pain
Constipation
Rectal fullness
Swelling of the eyelids
- 28 Rare manifestations of disseminated gonococcal infection in women:**
Endocarditis
Meningitis
Osteomyelitis
Appeare on the face erythema, resembling a "butterfly"
- 29 Clinical syndromes of disseminated gonococcal infection in women:**
Purulent arthritis
Tenosynovitis
Polyarthralgias
Appeare on the face erythema, resembling a "butterfly"
- 30 Rare complications of gonococcal urethritis in women:**
Penile lymphangitis
Penile edema ("bull-headed clap")
Periurethral abscesses
Swelling of the eyelids
- 31 Clinical syndromes of disseminated gonococcal infection in men:**
Purulent arthritis
Tenosynovitis
Polyarthralgias
Appeare on the face erythema, resembling a "butterfly"
- 32 People testing positive for gonorrhoea should be tested for:**
Chlamydia
Syphilis
Human immunodeficiency virus
Hidradenitis
- 33 What is disseminated gonococcal infection:**
Joint or tendon pain with decreased mobility
Skin rash
Occur on the trunk, limbs, palms and soles
Appeare on the face erythema, resembling a "butterfly"

- 34 What the forms of gonorrhoea of the urogenital organs in males:**
Fresh
Chronic
Latent
Stationary stages
- 35 Which is typical for acute gonorrhoeal urethritis:**
The lips of the external urethral opening are considerably swollen
Appear glassy and slightly everted
Yellowish-green pus
The positive isomorphic reaction, or Koebners phenomenon
- 36 The criteria for the effectiveness of the treatment of chronic gonorrhoeal urethritis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
The positive isomorphic reaction, or Koebners phenomenon
- 37 What are the complications of untreated gonorrhoea:**
Ascending infection in the urogenital tract in men
Painful inflammation of epididymis and prostate
Urethral scarring in men
Appearance of papules with silver-white scales
- 38 For the identification of gonococci of males the pathological material is collected from:**
Uretra
Prostate
Seminal vesicles
Hard chancre
- 39 For the identification of gonococci of women the pathological material is collected from:**
Uretra
Cervical canal
Rectum
Hard chancre
- 40 Choose method of provocation of gonorrhoea in men:**
Biological
Chemical

Mechanical
Physiology

- 41 What is not typical for chronic gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
Mild subjective disorders
May be interrupted by periods of exacerbation induced by alcohol
A less than two-month duration of the gonorrheal disease
- 42 What is typical for chronic gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
Mild subjective disorders
May be interrupted by periods of exacerbation induced by alcohol
A less than two-month duration of the gonorrheal disease
- 43 Choose the complications of gonorrhoeal urethritis:**
Prostatitis
Hypertrichosis
Vaginit
Onychogryphosis
- 44 Which is no typical for posterior gonorrhoeal urethritis:**
Frequent imperative urges to urinate at the end of which sharp pain is felt
Appeare papules on the surface marked with silvery-white scales
Appeare on the face erythema, resembling a "butterfly"
Formation of wheals in place of scratching
- 45 Which is no typical for fresh torpid anterior gonorrhoeal urethritis:**
Cutting pain at the beginning of urination
No subjective disorders
Appeare papules on the surface marked with silvery-white scales
Appeare on the face erythema, resembling a "butterfly"
- 46 Which is no typical for acute gonorrhoeal urethritis:**
The lips of the external uretral opening are considerably swollen
A less than two-month duration of the gonorrheal disease
Yellowish-green pus
The positive isomorphic reaction, or Koebners phenomenon
- 47 Which is *no* typical for gonococcus form:**
Two elongated cocci with a septum between them
Pear-shaped forms

Spiral thread shaped like a corkscrew
Ovoid, egg-shaped organism

- 48 Which is typical for gonococcus form:**
Two elongated cocci with a septum between them
Pear-shaped forms
Spiral thread shaped like a corkscrew
Gram-negative diplococcus
- 49 What are not typical the signs and symptoms of gonorrhoea of females:**
No symptoms until the infection has progressed to a more advanced stage
Papules on the surface marked with silvery-white scales
Papula with a crateriform depression in the centre
The presence of skin lesion white color with a purple ring
- 50 Which is *no* typical for provocation of gonorrhoea:**
Artificial exacerbation of the inflammatory process
It is positive Jadassohn patch test
Appearance of papules with silver-white scales on the skin
Presence of acantolytic cells
- 51 Gonococcal infections result from contact:**
Penile-vaginal
Penile-rectal
Penile-pharyngeal
Mosquito bites
- 52 Choose tactics with *no* effect on the treatment of gonorrhea:**
Exception reinfection
Appointment of antibacterial drugs of other pharmacological groups according to the results of susceptibility testing of isolates
N. Gonorrhoeae susceptibility to antibiotics
Appoint vitamins
- 53 What is characteristic of gonorrhoea eye:**
Swelling of the eyelids
Photophobia, suppuration
Conjunctival hyperemia
Anorectal pain
- 54 The criteria for the effectiveness of the treatment of fresh subacute gonorrhoeal urethritis:**

Improving the quality of life of the patient
Duration of remission
The lack of new complains
Appears new complains

55 Which is typical for gonorrhoeal epididymitis:

Usually develops sharply
Pain in the affected epididymis
Hyperaemia of the corresponding half of the scrotum
Swelling of the eyelids

56 What the forms of gonorrhoea of the urogenital organs in females:

Fresh
Chronic
Latent
Stationary stages

57 Which is *no* typical for routes of gonorrhoea transmission:

Sexual
Contaminated animal
Caused by animal parasites
Develops under the influence of the irritant which arrived at introduction of medicines to a vein

58 Which is *no* typical for gonococcal vulvovaginitis:

Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
Bright-red hyperaemia and swelling of the large pudendal lips

59 Which is *no* typical for gonococcal vesiculitis:

Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

60 Which is *no* typical for gonococcal proctitis in females:

Extraurogenital localization
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

61 Which is *no* typical for gonococcal proctitis in males:

Extragenital localization
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

- 62 Which is *no* typical for gonococcal deferentitis:**
Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
- 63 Which is *no* typical for gonococcal abscess of the preputial gland:**
Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
- 64 Which is *no* typical for gonococcal cowperitis:**
Complication of gonorrhoea
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
- 65 Which is *no* typical for disseminated gonococcal infection (DGI):**
Results from bacteremic spread of *N. Gonorrhoeae*
Results from bacteremic spread of *Tr. Pallidum*
Results from spread of *Sarcoptes Scabiei*
Results from spread of *Microsporum canis*
- 66 Which is *no* typical for gonococcal infection in infants born:**
Sight -threatening conjunctivitis to infected mothers
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
- 67 Which is *no* typical diagnostic minimal criteria pelvic inflammatory disease in women:**
Cervical motion tenderness
Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
A positive phenomenon psoriatic triad
Pustules around hair follicles

- 68 Which is *no* typical diagnostic additional criteria pelvic inflammatory disease in women:**
 Abnormal cervical or vaginal mucopurulent discharge
 Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
 A positive phenomenon psoriatic triad
 Pustules around hair follicles
- 69 Which is *no* typical diagnostic specific criteria pelvic inflammatory disease in women:**
 Evidence of endometritis on endometrial biopsy
 Positive microscopic examination to *Sarcoptes Scabiei* (Itch Mites)
 A positive phenomenon psoriatic triad
 Pustules around hair follicles
- 70 Which is *no* typical subjective symptoms of gonorrhoea in women:**
 Purulent or muco-purulent discharge from the genital tract
 Itching of the skin at night
 Appearance of bullae on healthy skin and mucosa membranes
 Appearance papules on the skin, covered with silvery-white scales
- 71 Which is *no* typical the objective symptoms of gonorrhoea in women:**
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 72 Which is *no* typical subjective symptoms of gonorrhoea in males:**
 Discharge of an inflammatory exudates from uretra and painful
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
- 73 Which is *no* typical the objective symptoms of gonorrhoea in males:**
 The lips of the external urethral opening are considerably swollen and hyperaemic
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
- 74 Which is typical for cervical gonococcal infection:**
 Asymptomatic
 Vaginal pruritus
 Positive the Baltser's iodine test

Itching of the skin at night

- 75 **Clinical picture of gonorrhoeal cervicitis:**
Vaginal pruritus
Mucopurulent discharge
Papules on the skin, covered with silvery-white scales
Intermenstrual bleeding or menorrhagia
- 76 **Which is *no* typical for upper genital tract disease:**
Abdominal pain
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive the Baltser's iodine test
- 77 **The criteria for the effectiveness of the treatment of cervical gonococcal infection:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
Appeare new complains
- 78 **The criteria for the effectiveness of the treatment of gonococcal cowperitis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
Appeare new complains
- 79 **The criteria for the effectiveness of the treatment of gonococcal conjunctivitis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
Appeare new complains
- 80 **The criteria for the effectiveness of the treatment of disseminated gonococcal infection:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
Appeare new complains
- 81 **Gonococcal infection complications of pregnancy:**

Preterm birth
Spontaneous abortions in pregnant women
Premature rupture of membranes
Appeare new complains

- 82 Genital infection, asassociated with *N. Gonorrhoea*:**
Can ascend to involve the reproductive organs
Causing pelvic inflammatory disease
Complications of pregnancy
A positive phenomenon psoriatic triad
- 83 Which is typical for bartholinitis, asassociated with *N. Gonorrhoea*:**
Symptomatic involvement of bartholin's glands
Located behind the labia
The positive Baltser' iodine test
The positive Nicolsky test
- 84 Which is *no* typical for bartholinitis, asassociated with *N. Gonorrhoea*:**
Symptomatic involvement of bartholin's glands
Located behind the labia
The positive Baltser' iodine test
The positive Nicolsky test
- 85 Clinical picture of epididymitis, asassociated with *N. Gonorrhoea*:**
Unilateral testicular pain and
Swelling
The positive Baltser' iodine test
The positive Nicolsky test
- 86 Which is typical for examination of the secretions of patients with chronic gonorrhoea prostatitis:**
The leucocyte count in them is above 10-15 in the field of vision
The leucocyte are gathered in clusters
The number of lipid granules is reduced
Number of the leucocyte is normal
- 87 Gonorrhoea prostaticorrhoea develops:**
A few drops of cloudy
Fluid glandular secretion are freely discharged after urination
The positive Baltser' iodine test
The positive Nicolsky test

- 88 Gonorrhoea in girls:**
Are infected by the non-venereal route
Direct contact with sick adults
By body louse
By mosquito bites
- 89 What the forms of gonorrhoea of girls:**
Fresh
Chronic
Latent
Stationary stages
- 90 Gonococci in older girls cause inflammation of the:**
Vulva
Vagina
Urethra
Scalp
- 91 Acute gonorrhoeal vulvovaginitis in girls characterized by:**
Bright-red hyperamia
Swelling of the large pudendal lips
Swelling mucous membrane of the vestibule of the vagina
No symptoms
- 92 Which the complain of acute gonorrhoeal vulvovaginitis in girls:**
Burning in the region of the genitals
Itching in the region of the genitals
Painful urination
No complains
- 93 Diagnostic methods in acute fresh gonorrhoea:**
Detected by microscopy of smears stained by the gram-method
Parallel methylene blue
The light fluorescence using the Wood's lamp
Positive the Nicolsky test
- 94 Diagnostic methods in torpid gonorrhoea:**
Detected by microscopy of smears stained by the gram-method
Parallel methylene blue
The light fluorescence using the Wood's lamp
Provocation
- 95 Diagnostic methods in chronic form gonorrhoea:**

Detected by microscopy of smears stained by the gram-method
Parallel methylene blue
The light fluorescence using the Wood's lamp
Provocation

96 **The pathological material of girls for the identification of gonococci:**
Vagina
Uretra
Rectum
Hair from scalp

97 **Which pathogenic micro-organisms are found together with gonococci in smears of the secretions:**
Urogenital trichomonads
Candida fungi
Pediculus humanus capitis
Sarcoptes scabiei hominis

98 **The goals of treatment gonorrhoea:**
Eradication of N. Gonorrhoeae
Disappearance of clinical symptoms of the disease
Prevention of complications
The appearance of new complaints

99 **Gonococcal infection of the lower genital tract without abscess formation paraurethral glands:**
Purulent arthritis
Tenosynovitis
Polyarthralgias
A positive phenomenon psoriatic triad

100 **Criteria of cure of gonorrhoea:**
Disappearance of the external signs
On the basis of the culture method of investigation in 14 days after treatment
A positive phenomenon psoriatic triad
The appearance of new complaints

Theme 4. Sexually transmitted infections III

Chlamydia infection. Trichomoniasis

Single choice answer

- 1 Choose the correct medicine of chlamydiasis:**
Antibiotics
Acaricides
Photosensitisers
The alcoholic solution of iodine
The steroid ointment

- 2 Choose the remedy which is used in treatment of Trichomoniasis:**
Antibiotics - makrolidis
Antimalarial drugs
Hormones
Metronidazol
Penicillin

- 3 Choose the form the causative agent of Trichomoniasis:**
Gram-negative diplococcus
Pear-shaped forms
Spiral thread shapped like a corkscrew
Ovoid, egg-shaped organism
Dermatozoonoses

- 4 Choose the correct diagnostic method of Trichomoniasis, except:**
The positive Baltser' iodine test
The microscopic examination by Gram-method
Microscopic examination by methylene blue
The bacteriological diagnostic method.
Combining microscopic and cultures examinations

- 5 Choose the remedy which is *not* used in treatment of mixed infection (gonorrhoeal-chlamydiasis-candidosis):**
Antiprotozoonoses
Antibiotics - makrolidis
Antifungal
Antibiotics-ftorchinolonis
Immunomodulator

- 6 Choose the odd causative agent of Reiter's syndrome:**
Neisseria gonorrhoeae
Treponema pallidum

Chlamydia trachomatis
Candida albicans
Trichomonas vaginalis

7 Choose the correct diagnostic method which is used in Urogenital chlamydiasis:

Positive the Baltser' iodine test
The polymerase chain reaction (PCR)
Jadassohn patch test
Koebner phenomenon
Presence of acantolytic cells

8 Choose the correct agent of Trichomoniasis:

Treponema pallidum
Neisseria gonorrhoeae
Chlamydia trachomatis
Trichomonas vaginalis
Microsporum Canis

9 Choose the correct diagnostic method of Trichomoniasis:

Positive the Baltser' iodine test
The microscopic examination
Positive Jadassohn patch test
The dark-brownreddish-yellow fluorescence using the Wood's lamp
Positive Nikolsky's sign

10 The clinical manifestation of Trichomoniasis are:

Foamy secretion of the vagina and cervix
The hair is broken off very short on the scalp
Erythema on the face resembles a "butterfly"
Appearance of papules with silver-white scales on the skin

11 Choose sexually transmitted infection:

Trichomoniasis
Psoriasis
Lupus erythematosus
Scleroderma
Eczema

12 The most common site of trichomoniasis is:

Urethra, vagina
Hair
Nail

Teeth

- 13 Select harmful effect for trichomonas vaginalis:**
Dessication
Heating to a temperature above 45⁰ C
Exposure to direct solar rays
All answers are correct
- 14 Urogenital trichomonads cannot be detected:**
In the external environment
In open reservoirs
In the sewages of public baths
All answers are correct
- 15 Routes of trichomoniasis infection spread:**
Sexually
Way of the respiratory tract
Alimentary canal
Introduced into the vein
- 16 Rare non-sexually routes of trichomoniasis infection:**
Through objects contaminated with the secretions of sick individuals
Way of the respiratory tract
Alimentary canal
Introduced into the vein
- 17 Trichomonas vaginalis remains viable for several hours:**
In the clots of pus
In the clots of mucus
Through objects contaminated with the secretions of sick individuals
All answers are correct
- 18 The most common site of trichomoniasis in females:**
Vestibular glands
Vagina
Cervical canal
All answers are correct
- 19 The most common site of trichomoniasis in males:**
Paraurethral ducts
Uretra
Epididymis
All answers are correct

- 20 Trichomonas vaginalis cannot parasitize in the:**
Rectum
Uretra
Vagina
Cervical canal
- 21 Incubation period of trichomoniasis lasts:**
7 – 10 days
12 months
3 – 4 years
5 – 6 weeks
10 – 20 years
- 22 What the forms of trichomoniasis of the urogenital organs in males:**
Fresh
Chronic
Latent
All answers are correct
- 23 What the forms of trichomoniasis of the urogenital organs in females:**
Fresh
Chronic
Latent
All answers are correct
- 24 What the forms of fresh trichomoniasis in males:**
Acute
Subacute
Torpid
All answers are correct
- 25 What the forms of fresh trichomoniasis in females:**
Acute
Subacute
Torpid
All answers are correct
- 26 Clinical picture of chronic trichomoniasis appears a longer than:**
Two-month duration of the disease
One-month duration of the disease
6 -month duration of the disease
12-month duration of the disease

- 27 Which is typical for Trichomonas vaginalis:**
Penetrate the intercellular spaces
Pear-shaped forms
All answers are correct
Produce pseudopodia
- 28 Which is not typical for Trichomonas vaginalis:**
Penetrate the intercellular spaces
Pear-shaped forms
Gram-negative diplococcus
Produce pseudopodia
- 29 Trichomoniasis disease diagnostics:**
The microscopic examination by pear-shaped forms
Positive Nikolsky's sign
The microscopic examination by Gram-negative diplococcus
Wood's lamp examination (green fluorescence)
- 30 Choose criteria of efficiency of treatment of a Trichomoniasis in males:**
Absence of a complain
Full permission of the existing rashes
Absence of an pain
All answers are correct
- 31 Choose criteria of efficiency of treatment of a Trichomoniasis in females:**
Absence of a complain
Full permission of the existing rashes
Absence of an pain
All answers are correct
- 32 What are the signs and symptoms of Trichomoniasis of males:**
Inflammation of the urethra
Painful urination (burning sensation)
Painful testicles
All answers are correct
- 33 The criteria for the effectiveness of the treatment of fresh acute Trichomoniasis:**
Improving the quality of life of the patient
Duration of remission

No new complain
All answers are correct

- 34 Result from untreated Trichomoniasis of the men:**
Inflammation of the epididymis
Inflammation of the urethra
All answers are correct
Inflammation of the prostate gland
- 35 What are the signs and symptoms of Trichomoniasis of females:**
No symptoms until the infection has progressed to a more advanced stage
Papules on the surface marked with silvery-white scales
Papula with a crateriform depression in the centre
The presence of skin lesion white color with a purple ring
- 36 Patients testing positive for Trichomoniasis should be tested for:**
Chlamydia
Syphilis
Gonorrhoea
All answers are correct
- 37 The criteria for the effectiveness of the treatment of chronic Trichomoniasis urethritis:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 38 How is the diagnosis of Trichomoniasis made:**
Gram-staining and culture
Skin biopsy
Positive psoriatic triad
Green fluorescence Wood's lamp examination
- 39 Unicellular micro-organism pear-shaped forms is causative agent of:**
Gonorrhoea
Scabies
Syphilis
Trichomoniasis
- 40 For the identification of trichomoniasis of males the pathological material is collected from:**
Uretra

Prostate
Seminal vesicles
All answers are correct

41 For the identification of trichomoniasis of women the pathological material is collected from:

Hair
Cervical canal
Nail
Teeth

42 Choose tactics with no effect on the treatment of trichomoniasis:

Exception reinfection
Appointment of antibacterial drugs of other pharmacological groups according to the results of susceptibility testing of isolates
Trichomonas vaginalis susceptibility to antitrichomonal agents
All answers are correct

43 Signs of trichomoniasis vaginitis:

Hyperaemia mucous membrane of the vagina
Positive microscopic examination to Sarcoptes Scabiei (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

44 The criteria for the effectiveness of the treatment of fresh subacute trichomoniasis urethritis:

Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct

45 What the complain of acute trichomoniasis vaginitis:

Itching of the skin of the external genitals
Appeare papules on the surface marked with silvery-white scales
Appeare on the face erythema, resembling a "butterfly"
Formation of wheals in place of scratching

46 What the complain of torpid forms of trichomoniasis vaginitis:

No subjective disorders
Itching of the skin of the external genitals
Appeare papules on the surface marked with silvery-white scales
Appeare on the face erythema, resembling a "butterfly"

- 47 What the complain of chronic forms of trichomoniasis vaginitis:**
 No subjective disorders
 Itching of the skin of the external genitals
 Appear papules on the surface marked with silvery-white scales
 Appear on the face erythema, resembling a "butterfly"
- 48 Subjective symptoms of trichomoniasis in women:**
 Purulent or muco-purulent discharge from the genital tract
 Itching of the skin at night
 Appearance of bullae on healthy skin and mucosa membrans
 Appearance papules on the skin, covered with silvery-white scales
- 49 The objective symptoms of trichomoniasis in women:**
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 50 Subjective symptoms of trichomoniasis in males:**
 Discharge of an inflammatory exudates from uretra and painful
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
- 51 The objective symptoms of trichomoniasis in males:**
 The lips of the external urethral opening are considerably swollen and hyperaemic
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
- 52 Diagnosis of trichomoniasis may be established:**
 Causative agent has been identified in the smears or cultures
 A positive phenomenon psoriatic triad
 Positive the Baltser's iodine test
 Positive microscopic examination to Sarcoptes Scabieis
- 53 Differential diagnosis of trichomoniasis: other sexually transmitted pathogens, including:**
 Gonorrhea
 Syphilis
 Chl. Trachomatis
 All answers are correct

- 54 Which is typical for trichomoniasis of girls:**
 Discharge from the genital tract of gray-yellow in color, often - frothy, with an unpleasant odor
 Itching, burning, sensation in the vulva
 Itching, burning, pain during urination (dysuria)
 All answers are correct
- 55 The objective symptoms of trichomoniasis in girls:**
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 56 The clinical material for research on trichomoniasis in girls:**
 Deep part of the vagina
 Hair
 Nail
 Teeth
- 57 Choose the incorrect diagnostic method which is not used in trichomoniasis in males:**
 Positive Nikolsky sign
 Causative agent has been identified in the smears
 Cultures
 Rapid antigen detection and nucleic acid amplification tests
- 58 Choose the incorrect diagnostic method which is not used in trichomoniasis in females:**
 Positive Nikolsky sign
 Causative agent has been identified in the smears the microscopic examination
 Cultures
 Rapid antigen detection and nucleic acid amplification tests
- 59 What disease is not sexually transmitted *diseases*:**
 Psoriasis
 Trichomoniasis
 Gonorrhea
 Syphilis
- 60 Choose the correct diagnostic method of chlamydia infection, except:**
 The positive Baltser' iodine test

Polymerase chain reaction (PCR) result
The bacteriological diagnostic method
Combining microscopic and cultures examinations

- 61 Which is not typical for *Chlamydia trachomatis*:**
Micro-organism which take an intermediate place between rickettsia and viruses
Pear-shaped forms
Spiral thread shaped like a corkscrew
Ovoid, egg-shaped organism
- 62 What disease is sexually transmitted diseases:**
Psoriasis
Chlamydia
Atopic dermatitis
Dermatitis herpetiformis
- 63 The criteria for the effectiveness of the treatment of chlamydia infection:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 64 The criteria for the effectiveness of the treatment of chlamydia conjunctivitis in women:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 65 What is characteristic of chlamydia infection of eyes:**
Swelling of the eyelids
Photophobia, suppuration
Conjunctival hyperemia
All answers are correct
- 66 Signs of chlamydial pharyngeal infections:**
After orogenital exposure
Symptoms are mild or absent
The pharynx may be erythematous or have exudates
All answers are correct

- 67 **Chlamydial pharyngitis:**
Extraurogenital localization
Positive microscopic examination to Sarcoptes Scabieis (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
- 68 **Which is typical for chlamydial pharyngitis in women:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates
All answers are correct
- 69 **Which is typical for chlamydial pharyngitis in men:**
Acquired by oral sexual exposure
Sore throat
Pharyngeal exudates
All answers are correct
- 70 **The criteria for the effectiveness of the treatment of chlamydial conjunctivitis in men:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 71 **Chlamidias were found in Reiter's syndrome:**
The uretra
The synovial fluid of affected joint
In the skin lesions
All answers are correct
- 72 **Which is typical for Chlamydia trachomatis in lower genital tract in male:**
Mucopurulent or mucous discharge from the urethra
Itching, burning, pain during urination (dysuria)
Discomfort, itching, burning sensation in the urethra
All answers are correct
- 73 **The objective symptoms of chlamydial infection in lower genital tract in female:**
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign

Redness and swelling of the mucous membrane of the vulva, vagina

- 74 **The criteria for the effectiveness of the treatment of chlamydia lower genital tract infection in female:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 75 **Subjective symptoms of chlamydia lower genital tract infection in males:**
Discharge of an inflammatory exudates from uretra and painful
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign
- 76 **The objective symptoms of chlamydia lower genital tract infection in males:**
The lips of the external urethral opening are considerably swollen and hyperaemic
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Positive Nikolsky sign
- 77 **Subjective symptoms of chlamydia lower genital tract infection in female:**
Purulent or muco-purulent discharge from the genital tract
Itching of the skin at night
Appearance of bullae on healthy skin and mucosa membrans
Appearance papules on the skin, covered with silvery-white scales
- 78 **Which is typical for chlamydial infection:**
Positive microscopic examination to Sarcoptes Scabieis (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid
Bright-red hyperaemia and swelling of the large pudental lips
- 79 **Which is typical for chlamydial elementary bodies:**
Small, round or occasionally pear shaped
Electron-dense structures approximately 0.3 microns in diameter
Are the only infectious stage of the chlamydial developmental cycle and function
All answers are correct

- 80 Which is typical for chlamydial reticulate bodies:**
Whose purpose is to permit chlamydial survival and
Replication in the non-supportive environment outside the host cell
Are bounded by an inner and outer-membrane
All answers are correct
- 81 Which is subjective symptoms of chlamydial endometritis:**
Pain in the lower abdomen
A positive phenomenon psoriatic triad
Appearance of bullae on healthy skin and mucosa membrans
Appearance papules on the skin, covered with silvery-white scales
- 82 Which is subjective symptoms of chlamydial infection of vestibular glands:**
Muco-purulent discharge
Itching skin at night
Appearance of bullae on healthy skin and mucosa membrans
Appearance papules on the skin, covered with silvery-white scales
- 83 Which is objective symptoms of chlamydial infection of vestibular glands:**
Hyperemia of the external openings ducts of vestibular glands
Appearance papules on the skin, covered with silvery-white scales
Light fluorescence using the Wood's lamp
Positive Nikolsky sign
- 84 The criteria for the effectiveness of the treatment of chlamydial infection of vestibular glands:**
Improving the quality of life of the patient
Duration of remission
The lack of new complains
All answers are correct
- 85 Which is objective symptoms of chlamydial endometritis:**
Painful enlarged uterus
Light fluorescence using the Wood's lamp
Positive Nikolsky sign
Appearance papules on the skin, covered with silvery-white scales
- 86 The criteria for the effectiveness of the treatment of chlamydial endometritis:**
Improving the quality of life of the patient

Duration of remission
The lack of new complains
All answers are correct

87 Subjective symptoms of chlamydial epididymitis:

Dysuria
Pain in the affected epididymis
Hyperaemia of the corresponding half of the scrotum
All answers are correct

88 Which is typical for chlamydial proctitis:

Extraurogenital localization
Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
A positive phenomenon psoriatic triad
Appear after contact of skin with acid

89 Which is typical for disseminated chlamydial infection:

Pneumonia
Perihepatitis
Peritonitis
All answers are correct

90 Which is no typical for disseminated chlamydial infection:

Pneumonia
Perihepatitis
Peritonitis
Pain during urination

91 Differential diagnosis of chlamydia urethritis:

N. Gonorrhoeae
Psoriasis
Atopic dermatitis
Scabies

92 Choose tactics with no effect on the treatment of chlamydial epididymitis:

Exception reinfection
Appointment of antibacterial drugs of other pharmacological groups according to the results of susceptibility testing of isolates
Chlamydia trachomatis no susceptibility to antibiotics
All answers are correct

- 93 Choose tactics with no effect on the treatment of chlamydial endometritis:**
 Exception reinfection
 Appointment of antibacterial drugs of other pharmacological groups according to the results of susceptibility testing of isolates
Chlamydia trachomatis no susceptibility to antibiotics
 All answers are correct
- 94 Which is typical for chlamydial infection in infants born:**
 Sight -threatening conjunctivitis to infected mothers
 Positive microscopic examination to *Sarcoptes Scabieis* (Itch Mites)
 A positive phenomenon psoriatic triad
 Appear after contact of skin with acid
- 95 Suspicion for chlamydial upper genital tract infection in female:**
 Abdominal pain
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive the Baltser's iodine test
- 96 Which is *no* typical chlamydia lower genital tract infection:**
 Cervicitis
 Cystitis
 Urethritis
 Arthritis
- 97 Which is typical chlamydia lower genital tract infection:**
 Cervicitis
 Diffuse pyonecrotic inflammation of hypoderma
 Purulent inflammation of the apocrine sweat glands
- 98 Chlamydia cervical infections don't may cause:**
 Pelvic inflammatory disease
 Tubal pathology
 Increases the risk of ectopic pregnancy
 Inflammation of the hair follicle and surrounding connective tissue
- 99 Choose the remedy which is used in treatment of chlamydial infection:**
 Antibiotics - makrolidis
 Antimalarial drugs
 Hormones
 Penicillin

- 100 Subjective symptoms of trichomoniasis in female:**
Itching of the skin at night
Inflammation of the hair follicle and surrounding connective tissue
Appearance papules on the skin, covered with silvery-white scales
Discharge from the genital tract of gray-yellow in color, often - foam

Multiply choice answer

- 1 The most common site of trichomoniasis is:**
Urethra
Vagina
Nail
Teeth
- 2 Select harmful effect for trichomonas vaginalis:**
Dessication
Heating to a temperature above 45⁰ C
Exposure to direct solar rays
Heating to a temperature below 20⁰ C
- 3 Urogenital trichomonads cannot be detected:**
In the external environment
In open reservoirs
In the sewages of public baths
Urethra, vagina
- 4 Trichomonas vaginalis remains viable for several hours:**
In the clots of pus
In the clots of mucus
Through objects contaminated with the secretions of sick individuals
On the hair
- 5 The most common site of trichomoniasis in females:**
Vestibular glands
Vagina
Cervical canal
On the hair
- 6 The most common site of trichomoniasis in males:**
Paraurethral ducts

Uretra
Epididymis
On the hair

- 7 **Trichomonas vaginalis cannot parasitize in the:**
Rectum
Uretra
Hands
Vagina
- 8 **What the forms of trichomoniasis of the urogenital organs in males:**
Fresh
Chronic
Latent
Stationary stages
- 9 **What the forms of trichomoniasis of the urogenital organs in females:**
Fresh
Chronic
Latent
Stationary stages
- 10 **Which is no typical for Trichomonas vaginalis form:**
Two elongated cocci with a septum between them
Pear-shaped forms
Spiral thread shapped like a corkscrew
Ovoid, egg-shaped organism
- 11 **Which is typical for Trichomonas vaginalis:**
Two elongated cocci with a septum between them
Pear-shaped forms
Spiral thread shapped like a corkscrew
Produce pseudopodia
- 12 **Which is sings of trichomonal vaginitis:**
Hyperaemia of the mucous membance of vagina
Hyperaemia of the mucous membance of cervix uteri
Foamy secretions
No typical sings
- 13 **Choose criteria of efficiency of treatment of trichomonal infection in female:**
Absence of a complain

Full permission of the existing rashes
Absence of an pain
Appearance new complain

- 14 Which is typical of acute trichomonal vaginitis:**
Copious secretions
Burning
Itching of the skin of the external genitals
No typical sings
- 15 What disease is not sexually transmitted *diseases*:**
Psoriasis
Trichomoniasis
Gonorrhea
Scleroderma
- 16 Choose the incorrect diagnostic method which is not used in trichomonal vaginitis:**
Light fluorescence using the Wood's lamp
Positive Nikolsky sign
Causative agent has been identified in the smears the microscopic examination
Cultures
- 17 Choose the correct medicine of trichomoniasis:**
Metronidazole
Tinidazolium
Antivirus drug
Antimalarial drugs
- 18 Complications trichomoniasis in men include:**
Prostate
Epididymis
Foreskin
Appeare hard chancre
- 19 Complications trichomoniasis in men are characterized by all, except:**
Prostate
Epididymis
Appear chancre-panaritium
Appear hard chancre
- 20 Women who have symptoms chlamydial infection might have:**

Abnormal vaginal discharge
A burning sensation when urinating
On the face erythema, resembling a "butterfly"
Abundant rose-colored blisters with intense itch on the skin

- 21 Men who have symptoms chlamydial infection might have:**
Discharge from their penis
A burning sensation when urinating
Itching around the opening of the penis
On the face erythema, resembling a "butterfly"
- 22 Which is typical for men who have symptoms chlamydial might have is characterized by all, except:**
Discharge from their penis
Abundant rose-colored blisters with intense itch on the skin
Itching around the opening of the penis
On the face erythema, resembling a "butterfly"
- 23 Which is typical for women who have symptoms chlamydial might have is characterized by all, except:**
Abnormal vaginal discharge
A burning sensation when urinating
On the face erythema, resembling a "butterfly"
Abundant rose-colored blisters with intense itch on the skin
- 24 Which is typical for Chlamydia trachomatis:**
Obligate intracellular Gram-negative bacterium
Infects the epithelial cells of the lower genital tract
Pear-shaped forms
Spiral thread shapped like a corkscrew
- 25 Which is no typical for Chlamydia trachomatis:**
Obligate intracellular Gram-negative bacterium
Infects the epithelial cells of the lower genital tract
Pear-shaped forms
Spiral thread shapped like a corkscrew
- 26 Which is no typical for Chlamydia trachomatis in neonates and infants:**
Conjunctivitis
Pneumonia
On the face erythema, resembling a "butterfly"
Abundant rose-colored blisters with intense itch on the skin

- 27 Chlamydia trachomatis were found in Reiters syndrome:**
 The uretra
 The synovial fluid of affected joint
 In the skin lesions
 On the nail
- 28 Chlamydia trachomatis don't found in Reiters syndrome:**
 The uretra
 The synovial fluid of affected joint
 On the scalp
 On the nail
- 29 Which is typical for chlamydial infection in lower genital tract in male:**
 Mucopurulent or mucous discharge from the urethra
 Itching, burning, pain during urination (dysuria)
 Discomfort, itching, burning sensation in the urethra
 On the face erythema, resembling a "butterfly"
- 30 Criteria of cure of chlamydial infection:**
 Disappearance of the external signs
 On the basis of the urine polymerase chain reaction (PCR) result in 1 month after treatment
 A positive phenomenon psoriatic triad
 The appearance of new complaints
- 31 Which is typical for disseminated chlamydial infection:**
 Pneumonia
 Perihepatitis
 Peritonitis
 On the scalp
- 32 What are the complications C.trachomatis infections:**
 Ectopic pregnancy
 Tubal infertility
 On the face erythema, resembling a "butterfly"
 Abundant rose-colored blisters with intense itch on the skin
- 33 Chl. trachomatis infections can ascend to the upper genital tract resulting:**
 Pelvic inflammatory disease
 Ectopic pregnancy

Tubal infertility
A positive phenomenon psoriatic triad

- 34 Which is typical for Chl. Trachomatis epididymitis:**
Unilateral scrotal pain
Scrotum swelling
Fever
On the face erythema, resembling a "butterfly"
- 35 Reiter's syndrome consists of:**
Arthritis
Conjunctivitis
Urethritis
Alopecia
- 36 Which is no typical the objective symptoms trichomoniasis in males:**
The lips of the external urethral opening are considerably swollen and hyperaemic
A positive phenomenon psoriatic triad
Papules on the skin, covered with silvery-white scales
Purulent or muco-purulent discharge from the genital tract
- 37 The goals of treatment Chl. Trachomatis:**
Eradication of Chl. Trachomatis
Disappearance of clinical symptoms of the disease
Prevention of complications
The apperance of new complaints
- 38 Which pathogenic micro-organisms are found together with Chl. Trachomatis in smears of the secretions:**
Urogenital trichomonads
Candida fungi
Pediculus humanus capitis
Sarcoptes scabiei hominis
- 39 The goals of treatment chlamydia lower genital tract infection:**
Eradication of Chl. Trachomatis
Disappearance of clinical symptoms of the disease
Prevention of complications
The apperance of new complaints
- 40 Genital infection, asassociated with Chl. Trachomatis:**
Can ascend to involve the reproductive organs

Causing pelvic inflammatory disease
Complications of pregnancy
A positive phenomenon psoriatic triad

- 41 Chlamydia lower genital tract infection:**
Cervicitis
Cystitis
Urethritis
Arthritis
- 42 The goals of treatment chlamydial epididymitis:**
Eradication of Chl. Trachomatis
Disappearance of clinical symptoms of the disease
Prevention of complications
The appearance of new complaints
- 43 The pathological material of girls for the identification of chlamydia:**
Vagina
Uretra
Nail
Hair from scalp
- 44 Choose the odd clinical forms of extraurogenital chlamydia localization:**
Proctitis
Pharyngitis
Tonsillitis
Urethritis
- 45 The goals of treatment Reiter's syndrome:**
Eradication of Chl. Trachomatis
Disappearance of clinical symptoms of the disease
Prevention of complications
The appearance of new complaints
- 46 Chl trachomatis in older girls cause inflammation of the:**
Vulva
Vagina
Nail
Scalp
- 47 Adverse pregnancy outcomes which have been associated with uncomplicated chlamydia cervicitis:**

Sporadic and recurrent miscarriage
Preterm labour
Low birthweight
High birth weight

48 In newborns by vertical transmission Chlamydia cervicitis may cause:

Conjunctivitis
Inflammation of the hair follicle
Nasopharyngitis
Pneumonia

49 Chlamydia cervical infections may cause:

Pelvic inflammatory disease
Tubal pathology
Increases the risk of ectopic pregnancy
Inflammation of the hair follicle and surrounding connective tissue

50 Chlamydia cervical infections don't may cause:

Pelvic inflammatory disease
Purulent inflammation of the apocrine sweat glands
Increases the risk of ectopic pregnancy
Inflammation of the hair follicle and surrounding connective tissue

51 The aim of chlamydia screening is:

To decrease the overall prevalence
Subsequently reduce transmission in the population
Treatment of uncomplicated lower genital tract infections
Treatment inflammation of the hair follicle

52 What is *not* complications of chlamydia in females:

Vesiculitis
Vaginitis
Vulvovaginitis
Epididymitis

53 Which is typical for infants born to infected mothers chlamydia infection:

May have lower mean birth weight
Neonatal conjunctivitis
Pharyngitis
No typical signs

- 54 Rare complications of chlamydia urethritis in men:**
 Penile lymphangitis
 Penile edema ("bull-headed clap")
 Periurethral abscesses
 Swelling of the eyelids
- 55 The objective symptoms trichomoniasis in males:**
 The lips of the external urethral opening are considerably swollen and hyperaemic
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Purulent or muco-purulent discharge from the genital tract
- 56 Subjective symptoms of trichomoniasis in female:**
 Mucopurulent discharge gray-yellow in color, often - foam
 Itching of the skin at night
 Abnormal cervical or vaginal mucopurulent discharge
 Appearance papules on the skin, covered with silvery-white scales
- 57 The subjective symptoms trichomoniasis in males:**
 Purulent or muco-purulent discharge from the genital tract
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Disuria
- 58 Which is no typical subjective symptoms of trichomoniasis a in males:**
 Discharge of an inflammatory exudates from uretra and painful
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
- 59 Which is typical for cervical trichomoniasis infection:**
 Asymptomatic
 Vaginal pruritus
 Positive the Baltser's iodine test
 Itching of the skin at night
- 60 Which is no typical subjective symptoms of trichomoniasis in females:**
 Mucopurulent discharge gray-yellow in color, often - foam
 Itching of the skin at night
 Abnormal cervical or vaginal mucopurulent discharge
 Appearance papules on the skin, covered with silvery-white scales

- 61 Which is no typical the objective symptoms of trichomoniasis in females:**
 A positive phenomenon psoriatic triad
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 62 Which is typical the objective symptoms of trichomoniasis in females:**
 Mucopurulent discharge gray-yellow in color, often - foam
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 63 Chl. Trachomatis cannot parasitize in the:**
 Hair
 Uretra
 Hands
 Vagina
- 64 Criteria of cure of trichomoniasis infection in male:**
 Disappearance of the external signs
 On the basis of the culture method of investigation in 14 days after treatment
 A positive phenomenon psoriatic triad
 The appearance of new complaints
- 65 Which is typical the objective symptoms of trichomoniasis in older girls:**
 Mucopurulent discharge gray-yellow in color, often - foam
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Disuria
- 66 Which is *no* typical the objective symptoms of trichomoniasis in older girls:**
 Dysuria
 Papules on the skin, covered with silvery-white scales
 Positive Nikolsky sign
 Redness and swelling of the mucous membrane of the vulva, vagina
- 67 Which is no typical subjective symptoms of trichomoniasis in older girls:**

Mucopurulent discharge gray-yellow in color, often - foam
Itching of the skin at night
Abnormal cervical or vaginal mucopurulent discharge
Appearance papules on the skin, covered with silvery-white scales

68 Which is typical subjective symptoms of trichomoniasis in older girls:

Dysuria
Itching of the skin at night
Mucopurulent discharge gray-yellow in color, often - foam
Appearance papules on the skin, covered with silvery-white scales

69 The goals of treatment trichomoniasis:

Eradication of *Trichomonas vaginalis*
Disappearance of clinical symptoms of the disease
Prevention of complications
The appearance of new complaints

70 Which pathogenic micro-organisms are found together with *Trichomonas vaginalis* in smears of the secretions:

Urogenital trichomonads
Gonococci
Pediculus humanus capitis
Sarcoptes scabiei hominis

71 How is trichomoniasis diagnosed:

Detected by microscopy of smears stained by the gram-method
Parallel methylene blue
The light fluorescence using the Wood's lamp
Culture results

72 How is trichomoniasis diagnosed in older girls:

Detected by microscopy of smears stained by the gram-method
Parallel methylene blue
The light fluorescence using the Wood's lamp
Culture results

73 How is trichomoniasis prevented:

Safe sex practices
Limiting the number of sexual partners
Using condoms
Oral vitaminum

74 What is trichomoniasis:

Is an extremely common
Sexually transmitted infection
Caused by trichomonas vaginalis
Caused by Neisseria gonorrhoeae

- 75 Physical signs of trichomoniasis in females include:**
Erythema (redness) of the vulva and vagina with discharge and offensive odour
Elevated vaginal pH (above 4.5)
Colpitis macularis (strawberry cervix)
Itching of the skin at night
- 76 Trichomoniasis in males:**
T. Vaginalis is present in 30-70% of the male partners of infected females
Most infected males (>90%) will have no symptoms
Itching of the skin at night
A positive phenomenon psoriatic triad
- 77 What complications can trichomoniasis cause in pregnancy:**
Has been associated with low birth weight
Premature rupture of membranes
Preterm delivery
A positive phenomenon psoriatic triad
- 78 What complications can trichomoniasis cause during the neonatal period:**
Can be transmitted from mother to baby during delivery
Cause fever
Urinary tract infection
A positive phenomenon psoriatic triad
- 79 Potential complications of trichomoniasis in females include:**
Tubal infertility
Cervical cancer
A positive phenomenon psoriatic triad
Appearance of papules on the skin with silver-white scales
- 80 Potential complications of trichomoniasis in men include:**
Infection of the prostate
Epididymis
Decreased sperm motility
Appearance of papules on the skin with silver-white scales

- 81 Trichomonal vaginitis may combined with:**
Urethrititis
Endocervicitis
Cervical erosions
Pustules around hair follicles
- 82 Causative agent has been identified in the smears:**
Gonorrhoea
Trichomoniasis
Chlamidial infection
Atopic dermatitis
- 83 Causative agent is examined with microscope in females:**
Gonorrhoea
Trichomoniasis
Syphilis
Atopic dermatitis
- 84 Causative agent is examined with microscope in males:**
Gonorrhoea
Trichomoniasis
Syphilis
Atopic dermatitis
- 85 Causative agent is examined in culture in males:**
Gonorrhoea
Trichomoniasis
Syphilis
Atopic dermatitis
- 86 Causative agent is examined in culture in females:**
Gonorrhoea
Trichomoniasis
Syphilis
Atopic dermatitis
- 87 What things are uncharacteristically of trichomoniasis in males:**
Pustules around hair follicles
Tubal infertility
Most infected males (>90%) will have no symptoms
Irritation inside the penis
- 88 What things are uncharacteristically of trichomoniasis in females:**

Irritation inside the penis
Tubal infertility
Slight burning after ejaculation
Erythema (redness) of the vulva

- 89 Which causative agent transmitted to newborns via exposure to an infected mother's genital flora during vaginal birth:**
Trich. vaginitis
Chl. trachomatis
Head louse
Body louse
- 90 Which causative agent don't transmitted to newborns via exposure to an infected mother's genital flora during vaginal birth:**
Trich. vaginitis
Chl. trachomatis
Head louse
Body louse
- 91 What routes are characteristically for Chl. trachomatis infection:**
Canalicular
Involving sperm
Lymphogenous
By head louse
- 92 The pathological material of males for the identification of trichomoniasis:**
Prostatic secretions
Uretra
Nail
Hair from scalp
- 93 The pathological material of females for the identification of trichomoniasis:**
Cervical canal
Uretra
Nail
Hair from scalp
- 94 Which the treatment gonorrhoeal-trichomonal infection:**
Antigonorrhoeal
Antitrichomonal
Antimalarian

Acaricid

- 95 Chl. Trachomatis may be treated with:**
Antibiotics-macrolides
Tetracyclines
Antimalarian
Acaricid
- 96 C. Trachomatis don't may be treated with:**
Antibiotics-macrolides
Tetracyclines
Antimalarian
Acaricid
- 97 Chlamydia conjunctivitis can be spread from eye to eye by:**
Fingers
Shared towels
Cloths
By head louse
- 98 Risk factors for sexually active women Chlamydia include:**
History of chlamydial or other sexually transmitted infection
New or multiple sexual partners
History of scabies
History of psoriasis
- 99 The clinical material for research on chlamydia conjunctivitis:**
Conjunctiva of the upper
Conjunctiva of the lower eyelid
Of the nail
Biopcia of the skin
- 100 Differential diagnosis chlamydia conjunctivitis:**
Bacterial conjunctivitis
Epidemic keratoconjunctivitis
Gonorrheal conjunctivitis (newborns)
Localization on the scalp

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