

1. Which complication is most frequent in patients with silicosis?
  - A. Tromboembolia of pulmonary artery.
  - B. Bronchial asthma.
  - C. Pneumonia.
  - D. Cancer of lungs.
  - E. Tuberculosis.
2. Silicatoses are:
  - A. Asbestosis
  - B. Siderosis
  - C. Aluminosis
  - D. Bisinosis
  - E. All of the above
3. Which of the following is included in silicosis?
  - A. SiO<sub>2</sub>
  - B. Talcosis
  - C. Aluminosis
  - D. Siderosis
  - E. Anthracosis
4. Complications of pneumoconioses?
  - A. Pulmonary tuberculosis
  - B. Multiple bronchiectasis
  - C. Spontaneous pneumothorax
  - D. Cancer of lungs
  - E. All the above
5. Characteristic complaints of silicosis?
  - A. Dyspnoea, chest pain, cough
  - B. Chest pain
  - C. Cough
  - D. Abdominal pain
  - E. Vomiting
6. Complications of silicosis include?
  - A. Emphysema of lung, cardiopulmonary decompensation
  - B. Cardiopulmonary decompensation
  - C. Hemothorax
  - D. Mediastinal cancer
  - E. Lung abscess
7. Treatment of quickly progressive silicosis?
  - A. Hormonal therapy
  - B. Antituberculosis preparation
  - C. Antibiotics
  - D. Enzyme therapy
  - E. All the above
8. Cardiopulmonary decompensation signs occur during what stage of silicosis?
  - A. I stage
  - B. II stage
  - C. III stage
  - D. All the above
  - E. None of the above
9. Silicosis appears at breathing of which dust?
  - A. Oxide silicon
  - B. Cement
  - C. Paints

- D. Soaps, polishes
  - E. Non of above
10. Clinical picture of silicatosis includes:
- A. Cough, fatigue, headache and general weakness
  - B. Fever
  - C. Abdominal pain
  - D. Vomiting
  - E. All of the above
11. Complications of asbestosis are all following except?
- A. Acute pneumonia with severe clinical course
  - B. Acute pneumonia with mild clinical course
  - C. Multiple bronchitis
  - D. Cancer of lungs
  - E. None of the above
12. Talcosis treatment does not include:
- A. Antihistamine
  - B. Bronchodilators
  - C. Antibiotics
  - D. Vitamin C
  - E. Nicotine acid
13. What doesn't cause the silicatosis development?
- A. Asbestos
  - B. Talc
  - C. Coal
  - D. Cement
  - E. Non of above
14. The most severe complication of silicosis is?
- A. Emphysema of lungs.
  - B. Silicotuberculosis
  - C. Spontaneous pneumothorax
  - D. Cancer of lungs
  - E. Bronchial asthma
15. Nodular silicosis of I stage is characterized by presence of small rounded nodular of size
- A. 3-6 mm
  - B. 2-4 mm
  - C. 1-2 mm
  - D. more than 6mm
  - E. 2-3 mm
16. What triad of complaints is characteristic for silicosis:
- A. Cough, edema, dyspnoea.
  - B. Dyspnoea, headache, cough.
  - C. General weakness, breathlessness, chest pain.
  - D. Dyspnoea, chest pain, cough.
  - E. Decrease of earning capacity, night sweating, and breathlessness.
17. What of following disease the pneumoconioses should be differentiated with?
- A. Brown lung disease
  - B. Yellow lung disease
  - C. Black lung disease
  - D. Cancer of lungs
  - E. None
18. Snow-storm sign is present during:
- A. Pneumothorax

- B. Pneumoconioses
  - C. Both Pneumothorax and Pneumoconioses
  - D. Pleural effusion
  - E. Non of above
19. Bisinosis appears after inhalation of:
- A. Vegetable fibrous dust
  - B. Fruit fibrous dust
  - C. Metallic ferruginous dust
  - D. Dust and fumes
  - E. Non of above
20. Aluminosis is caused by inhalation of:
- A. Metallic ferruginous dust
  - B. Vegetable fibrous dust
  - C. Dust and fumes of aluminium
  - D. Fruit fibrous dust
  - E. Non of above
21. What type of pneumoconioses is the most common:
- A. Asbestosis
  - B. Siderosis
  - C. Silicosis
  - D. Carboconosis
  - E. Siderosis and carboconosis
22. Typical sign of chest x-ray of silicosis:
- A. Same as in tuberculosis.
  - B. Sign of abscess
  - C. Sign of emphysema
  - D. Resembling pulmonary edema
  - E. node shades as a “snowstorm”
23. Inorganic dust includes mineral one, except:
- A. Silicate
  - B. Diamond
  - C. Cotton
  - D. Asbestos
  - E. Cobalt
24. How does the dust penetrate into the organism of man?
- A. Through skin
  - B. Through respiratory tract
  - C. Through gastrointestinal tract
  - D. Through mucosa
  - E. All of the above
25. What is silicosis?
- A. Pneumoconioses, conditioned by inhalation of dust that contains free silica.
  - B. Pneumoconioses, which appears from inhalation of mineral’s dust that contains silica in the linked state with different elements: magnesium, aluminum, iron, calcium.
  - C. Pneumoconioses from the influence of metals’ dust: aluminum, iron, barium, manganese.
  - D. Pneumoconioses from the influence of carbonaceous dust: anthracite coal, coke, graphite, soot.
  - E. Pneumoconioses from an organic dust.
26. What is silicatosis?
- A. Pneumoconioses, conditioned by inhalation of dust that contains free silica.

- B. Pneumoconioses, which appears from inhalation of mineral's dust that contains silica in the linked state with different elements: magnesium, aluminum, iron, calcium.
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  - D. Pneumoconioses from the influence of carbonaceous dust: anthracite coal, coke, graphite, soot.
  - E. Pneumoconioses from an organic dust.
27. What does it mean metaloconiosis?
- A. Pneumoconioses, conditioned by inhalation of dust that contains free silica.
  - B. Pneumoconioses, which appears from inhalation of mineral's dust that contains silica in the linked state with different elements: magnesium, aluminum, iron, calcium.
  - C. Pneumoconioses from the influence of metals' dust: aluminum, iron, barium, manganese.
  - D. Pneumoconioses from the influence of carbonaceous dust: anthracite coal, coke, graphite, soot.
  - E. Pneumoconioses from an organic dust.
28. What does it mean carboconiosis?
- A. Pneumoconioses, conditioned by inhalation of dust that contains free silica.
  - B. Pneumoconioses, which appears from inhalation of mineral's dust that contains silica in the linked state with different elements: magnesium, aluminum, iron, calcium.
  - C. Pneumoconioses from the influence of metals' dust: aluminum, iron, barium, manganese.
  - D. Pneumoconioses from the influence of carbon dust: anthracite coal, coke, graphite, soot.
  - E. Pneumoconioses from an organic dust.
29. What does it mean bissinosis?
- A. Pneumoconioses, conditioned by inhalation of dust that contains free silica.
  - B. Pneumoconioses, which appears from inhalation of mineral's dust that contains silica in the linked state with different elements: magnesium, aluminum, iron, calcium.
  - C. Pneumoconioses from the influence of metals' dust: aluminum, iron, barium, manganese.
  - D. Pneumoconioses from the influence of carbonaceous dust: anthracite coal, coke, graphite, soot.
  - E. Pneumoconioses from an organic dust (cotton, flax, rarer hemp).
30. Complications of pneumoconioses are everything, except:
- A. Pulmonary tuberculosis
  - B. Pneumonia
  - C. Bronchial asthma
  - D. COPD
  - E. Cancer of lungs
31. What of silicosis complication is the most frequent and most severe?
- A. Emphysema of lungs.
  - B. Spontaneous pneumothorax
  - C. Silicotuberculosis
  - D. Cancer of lungs
  - E. Bronchial asthma
32. What we don't use for treatment of aluminosis?
- A. Antihistaminic drugs

- B. Bronchodilators
  - C. Antibiotics
  - D. Anti-inflammatory drugs
  - E. Vitamins P, C, nicotine acid
33. The dust of what substance can't cause the development of carboconiosis?
- A. Coal
  - B. Graphite
  - C. Soot
  - D. Tin
  - E. Coke
34. What sub-group of pneumoconioses is consists to carboconiosis?
- A. Talcosis
  - B. Anthracosis
  - C. Siderosis
  - D. Bisinosis
  - E. Asbestosis
35. What sub-group of pneumoconioses is consists to metaloconiosis?
- A. Baritosis
  - B. Anthracosis
  - C. Talcosis
  - D. Bisinosis
  - E. Asbestosis
36. What sub-group of pneumoconioses is consists to silicatosis?
- A. Aluminosis
  - B. Anthracosis
  - C. Siderosis
  - D. Bisinosis
  - E. Asbestosis
37. For what time must be contact with coal in miners for development of the anthracosis?
- A. 1-5 years
  - B. 5-10 years
  - C. 10-15 years
  - D. 15-20 years
  - E. 1-3 years
38. After what period of contact with coal in miners can be development of the anthracosis?
- A. 1-3 years
  - B. 1-5 years
  - C. 5-10 years
  - D. 10-15 years
  - E. 15-20 years
39. After what period bisinosis can development in the workers?
- A. 1-3 years
  - B. 3-6 years
  - C. 5-10 years
  - D. 10-15 years
  - E. 15-20 years
40. Bisinosis can development in workers after:
- A. 6 months
  - B. 1-3 years
  - C. 3-6 years
  - D. 5-10 years
  - E. 10-15 years

41. "Farmer's lung" is the disease that can be in the:
- A. Agricultural workers
  - B. Workers of the mining industry
  - C. Workers of the machine-building industry
  - D. All of the above
  - E. None of the above
42. How often the prophylactic medical examination of working of the factory, where is the contact with occupational dust, must be make?
- A. Once a month
  - B. Once a year
  - C. Twice a year
  - D. Once a two years
  - E. Once a three years
43. What is necessary to make during periodic medical examination to all workers, who contact with occupational dust?
- A. Common blood analyses
  - B. Biochemical analyses
  - C. ECG
  - D. Ultrasound examination
  - E. Roentgenography of chest organs
44. Silicosis is:
- A. Talcosis
  - B. Siderosis
  - C. Aluminosis
  - D. Bisinosis
  - E. All of the above
45. Contraindication for working on the factories where is contact with occupational dust are all, except:
- A. Tuberculosis
  - B. Diseases of upper airways and bronchial tree
  - C. Pneumosclerosis
  - D. Ulcer disease
  - E. Emphysema of lungs
46. What disease is not contra indication for work in the factories where contact with occupational dust is?
- A. Organic diseases of cardio-vascular system
  - B. Diseases of gastrointestinal tract
  - C. Diseases of upper airways and bronchial tree
  - D. Emphysema of lungs
  - E. Tuberculosis
47. Silicosis is caused by inhalation of
- A. Crystalline silicon dioxide particles
  - B. Cement
  - C. Paints
  - D. Soaps polishes
  - E. None of the above
48. Lesions in case of silicosis are
- A. Nodular lesion
  - B. Fibrotic lesion
  - C. Cavities
  - D. Sclerotic lesion
  - E. None of the above

49. Silicosis clinical manifestation is
- A. Dyspnea, fever, cough
  - B. Moist cough, anorexia, chest pain, weight loss
  - C. Dry cough, heart pain, fever
  - D. Dry cough, fever, weight loss
  - E. Dyspnea, chest pain
50. Additional therapy in case of silicosis
- A. O<sub>2</sub>, diuretics, bronchodilators
  - B. Corticosteroids
  - C. Antibiotics
  - D. Antihistamines
  - E. None of the above
51. Which dust belongs to Metalloconiosis
- A. Siderosis
  - B. Asbestosis
  - C. Anthracosilicosis
  - D. Bisinosis
  - E. None of the them
52. What is the complication of Pneumoconioses?
- A. Pulmonary tuberculosis
  - B. Bronchitis
  - C. Liver Insufficiency
  - D. Kidney Insufficiency
  - E. Respiratory Insufficiency
53. Which particle size can penetrate to lung?
- A. Not more than 10 mcm
  - B. More than 11 mcm
  - C. 10.5 mcm
  - D. 12 mcm
  - E. 11,5 mcm
54. Diagnosis of silicosis is made by
- A. X-ray examination of thorax
  - B. Spirometry
  - C. Blood analysis
  - D. Arterial blood gas examination
  - E. All of the above
55. Classification of silicosis according to clinical course, except
- A. Fast progressive
  - B. Slow progressive
  - C. Progressive
  - D. Late silicosis
  - E. All of the above
56. Pneumoconioses is:
- A. Neoplastic alteration of lung
  - B. Non-neoplastic alteration in lung
  - C. Granulation of tissues
  - D. None of above
  - E. All of the above
57. Asbestosis is caused by
- A. Asbestos water
  - B. Asbestos dust

- C. Chlorine
  - D. mercury
  - E. All of the above
58. Who must judge cases of chronic professional diseases?
- A. Administration of the factory.
  - B. Head of the sanitary department.
  - C. Doctor of sanitary-epidemiology station.
  - D. The department of security technique of the factory.
  - E. Doctor of sanitary-epidemiology station and the department of security technique of the factory
59. Who can put diagnosis of the chronic professional disease (or intoxication) at first?
- A. Internist of the factory.
  - B. Internist.
  - C. Profpathologist.
  - D. Special medical-preventive establishments.
  - E. None of the above.
60. Choose, what from these diseases is Silicatosis.
- A. Siderosis
  - B. Aluminosis
  - C. Asbestosis
  - D. Bisinosis
  - E. All of the above
61. Classification of silicosis according to clinical course, except
- A. Fast progressive
  - B. Slow progressive
  - C. Progressive
  - D. Late silicosis
  - E. All of the above
62. General medical contraindications to admittance on the work related to the dangerous harmful substances and harmful industrial factors, are the following, except:
- A. Malignant neoplasm.
  - B. All diseases of the system of blood and hematosi.
  - C. Arterial hypertension of the III stage.
  - D. Heart diseases with heart insufficiency.
  - E. Essential hypertension of the I-st stage
63. All of these are physical factors of professional harmfulness, except:
- A. Industrial noise.
  - B. Micro- and macro organisms.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
64. General medical contraindications to admittance on the work related to the dangerous harmful substances and harmful industrial factors, are the following, except:
- A. Chronic diseases of lungs with the evident pulmonary-cardiac insufficiency.
  - B. Essential hypertension of II st stage
  - C. Bronchial asthma of severe form with the evident disturbance of breathing and circulation of blood.
  - D. Active forms of tuberculosis of any localization.
  - E. Stomach and duodenal ulcer with chronic recurrent course and susceptibility to complications.
65. What biological industrial factors that are professional harmfulness do you know?
- A. Industrial noise.



- B. Micro- and macro organisms.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
66. These are physical factors of professional harmfulness, except:
- A. Industrial noise.
  - B. Micro- and macro organisms.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
67. These are physical factors of professional harmfulness, except:
- A. Industrial noise.
  - B. Fungi.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
68. These are physical factors of professional harmfulness, except:
- A. Industrial noise.
  - B. Laser and ionizing radiation.
  - C. Antibiotics.
  - D. Vibration.
  - E. Electromagnetic.
69. These are biological factors of professional harmfulness, except:
- A. Fungi.
  - B. Micro organisms.
  - C. Antibiotics.
  - D. Vibration.
  - E. Macro organisms.
70. All of these are biological factors of professional harmfulness, except:
- A. Fungi.
  - B. Micro organisms.
  - C. Industrial noise.
  - D. Antibiotics.
  - E. Macro organisms.
71. These are biological factors of professional harmfulness, except:
- A. Fungi.
  - B. Laser and ionizing radiation.
  - C. Antibiotics.
  - D. Micro organisms.
  - E. Macro organisms.
72. These are biological factors of professional harmfulness, except:
- A. Electromagnetic.
  - B. Fungi.
  - C. Antibiotics.
  - D. Micro organisms.
  - E. Macro organisms.
73. These are biological factors of professional harmfulness, except:
- A. Fungi.
  - B. Micro organisms.
  - C. Excessive or reduces atmospheric pressure.
  - D. Antibiotics.
  - E. Macro organisms.

74. These are biological factors of professional harmfulness, except:
- A. Fungi.
  - B. High and low temperature of external environment.
  - C. Antibiotics.
  - D. Micro organisms.
  - E. Macro organisms.
75. What of these physical factors are professional harmfulness:
- A. Antibiotics, fungi, micro- and macro organisms.
  - B. Industrial noise, ultrasound, vibration, electromagnetic, excessive or reduces atmospheric pressure, high and low temperature of external environment etc.
  - C. Physical, static and dynamic overload of locomotor system, muscles, nervous system, organs of eyesight, hearing, hypodynamia and others.
  - D. Industrial dust.
  - E. Chemical toxic substances.
76. What of these biological factors are professional harmfulness:
- A. Antibiotics, fungi, micro- and macro organisms.
  - B. Industrial noise, ultrasound, vibration, electromagnetic, excessive or reduces atmospheric pressure, high and low temperature of external environment etc..
  - C. Physical, static and dynamic overload of locomotor system, muscles, nervous system, organs of eyesight, hearing, hypodynamia and others.
  - D. Industrial dust.
  - E. Chemical toxic substances.
77. Choose the etiological factors of pneumoconioses.
- A. Antibiotics, fungi, micro- and macro organisms.
  - B. Industrial noise, ultrasound, vibration, electromagnetic, excessive or reduces atmospheric pressure, high and low temperature of external environment etc..
  - C. Physical, static and dynamic overload of locomotor system, muscles, nervous system, organs of eyesight, hearing, hypodynamia and others.
  - D. Industrial dust.
  - E. Chemical toxic substances.
78. Choose, which doctor can put diagnosis of the chronic professional disease (or intoxication) at first?
- A. Internist of the factory.
  - B. Internist.
  - C. Special medical-preventive establishments.
  - D. Profpathologist.
  - E. None of the above.
79. Who can put diagnosis of the chronic professional intoxication at first?
- A. Internist of the factory.
  - B. Special medical-preventive establishments.
  - C. Internist.
  - D. Profpathologist.
  - E. Pulmonologist
80. Which from these drugs are from the group of reactivates of acetylcholinesterase?
- A. Dipiroxim
  - B. None of the above
  - C. Fosfacol
  - D. Platifilin
  - E. Aloksim
81. All of these diseases are contraindicated for working on the factories where is contact with occupational dust is, except:
- A. Diseases of upper airways and bronchial tree

- B. Organic diseases of cardio-vascular system
  - C. Diseases of gastrointestinal tract
  - D. Emphysema of lungs
  - E. Tuberculosis
82. How often the prophylactic medical examination of working of the factory must be make, where is the contact with occupational dust?
- A. Once a month
  - B. Once a year
  - C. Twice a year
  - D. Once a two years
  - E. Once a three years
83. The known work of Agricola in 1556 was devoted to disease:
- A. of miners.
  - B. of doctors.
  - C. of teachers.
  - D. of farmers.
  - E. all of these.
84. Who can put diagnosis of the chronic professional disease at first only:
- A. Internist of the factory.
  - B. Internist.
  - C. Special medical-preventive establishments.
  - D. Profpathologist.
  - E. None of the above.
85. The first works about professional diseases were printed in:
- A. XVI
  - B. V-VI
  - C. VI-IV century B.C.
  - D. XIX
  - E. II-III century B.C.
86. Hippocrates that lived approximately in 577-450 B.C. has described the disease of:
- A. Described disease of worker with influence of vibration.
  - B. Described disease of workers of agriculture.
  - C. Described disease of workers of farms.
  - D. Described disease of miners that run with the severe breathlessness.
  - E. Described disease of workers of culture.
87. In what year was known the work of Agricola, devoted to disease of miners?
- A. 1257
  - B. 1657.
  - C. 1987.
  - D. 1556.
  - E. 2000.
88. In what year there was issued the work "About mountain consumption and other mountain diseases" by Pretzels?
- A. 1530.
  - B. 1209.
  - C. 2000.
  - D. 2009.
  - E. 1945.
89. Biological industrial factors are:
- A. Industrial noise.
  - B. Fungi.
  - C. High and low temperature of external environment.

- D. Vibration.
  - E. Electromagnetic.
90. The physical factors of professional harmfulness are all of these, except:
- A. Industrial noise.
  - B. Micro- and macro organisms.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
91. The physical factors of professional harmfulness are all of these, except:
- A. Industrial noise.
  - B. Fungi.
  - C. High and low temperature of external environment.
  - D. Vibration.
  - E. Electromagnetic.
92. What doctor can put diagnosis of the chronic professional intoxication at first?
- A. Internist of the factory.
  - B. Special medical-preventive establishments.
  - C. Internist.
  - D. Profpathologist.
  - E. Pulmonologist
93. Acute professional disease (intoxications) can be diagnosed by the doctor of any medical-preventive establishment after consultation with the:
- A. Internist of the factory.
  - B. Internist.
  - C. Specialist of profpathology.
  - D. Gastroenterologist
  - E. Pulmonologists
94. Connection of acute infectious diseases with professional activity of wrecked is diagnosed after consultation with:
- A. Internist of the factory.
  - B. Infectionist-doctor of region polyclinics.
  - C. Internist.
  - D. Doctor of occupational hygiene of the territorial sanitary-epidemiology station and epidemiologist of sanitary-epidemiology station.
  - E. Epidemiologist of sanitary-epidemiology station.
95. What additional methods of investigation help to evaluate main syndromes of the vibrational disease?
- A. Capillaroscopy, cooling test, electrothermometry
  - B. Pallesthesiometry
  - C. Electrocardiography
  - D. Ultrasound
  - E. Algesiometry
96. What methods of investigation can help to diagnosed the vibration disease?
- A. Capillaroscopy, cooling test, electrothermometry
  - B. Roentgenography
  - C. Electrocardiography
  - D. Ultrasound
  - E. Esophagogastroduodenoscopy
97. What additional methods of investigation we should do to the patients with vibration disease?
- A. Capillaroscopy, cooling test, electrothermometry, pallesthesiometry
  - B. Echocardiography

- C. Electrocardiography
  - D. Ultrasound
  - E. Common blood analysis
98. For diagnostics of what disease is used computer capillaroscopy?
- A. Vibration disease
  - B. Reino syndrome
  - C. Intoxication by mercury
  - D. Intoxication by manganese
  - E. Polyneuropathy
99. What vibration is dangerous for the development of vibrational disease?
- A. Vibration of low-frequency (8-15 Hz).
  - B. Vibration of medium-frequency (16-6 Hz).
  - C. Vibration of high-frequency (more than 64 Hz).
  - D. Vibration of 1 medium and high-frequency.
  - E. All of the above.
100. What disease has described Hippocrates that lived approximately in 577-450 B.C.?
- A. Described disease of worker with influence of vibration.
  - B. Described disease of workers of agriculture.
  - C. Described disease of workers of farms.
  - D. Described disease of miners that run with the severe breathlessness.
  - E. Described disease of workers of culture.
101. Which diseases are characterised by such syndromes: angiodystonic, angiospastic, vestibular, diencephalic, syndrome of vegetative polyneuritis?
- A. Chronic intoxication by mercury.
  - B. Vibrational disease.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by manganese.
  - E. Chronic intoxication by benzol.
102. A vegetative-vestibular syndrome most frequent meets at patients with vibrational disease from action of:
- A. General vibration
  - B. Local vibration
  - C. Combined vibration of local and general action
  - D. All of these
  - E. Non of these
103. Choose most characteristic syndromes for general form of vibrational disease of first stage:
- A. Raynaud's syndrome
  - B. Vegetative-sensory polyneuropathy of the hands
  - C. Neuritis of hearing nerves
  - D. Peripheral angiodystonic syndrome
  - E. Vegetative-sensory polyneuropathy of the hands and Peripheral angiodystonic syndrome
104. Choose the most informative methods of diagnostics of vibrational disease:
- A. Ultrasound
  - B. Anamnesis data
  - C. Roentgenography of extremities
  - D. Distal thermometry
  - E. Electrocardiography
105. Choose the most characteristic syndromes of local form of vibration disease of the first stage:

- A. Hypothalamic syndrome, vestibular syndrome
  - B. Vegetative-vessels dystonia and peripheral angiodystonic syndrome
  - C. Vegetative-vessels dystonia
  - D. Peripheral angiodystonic syndrome
  - E. Syndrome of vegetative-sensory polyneuropathy
106. Choose the most characteristic syndromes for the local form of vibrational disease of the III stage:
- A. Syndrome of myopathy
  - B. Syndrome of encephalopolyneuropathy
  - C. Syndrome of sensory-motor polyneuropathy
  - D. Generalized angiodystonic syndrome
  - E. Syndrome of myelitis
107. Choose the most characteristic syndromes of the local form of vibration disease of the II stage:
- A. Peripheral angiodystonic syndrome with frequent angiospasm
  - B. Syndrome of encephalopathy
  - C. Cardiomyopathy syndrome
  - D. Vegetative-sensory polyneuropathy with the dystrophic changes
  - E. Vestibular syndrome
108. Choose the most characteristic syndromes for the general form of vibration disease of III stage:
- A. Generalized angiodystonic syndrome
  - B. Syndrome of myelitis, cardiomyopathy syndrome
  - C. Generalized angiodystonic syndrome, discirculative encephalopathy, vegetative-sensory polyneuropathy
  - D. Discirculative encephalopathy
  - E. Vegetative-sensory polyneuropathy
109. Following symptoms are present in vibrational disease except?
- A. Symptoms of white spot
  - B. Piles symptom
  - C. Vibration
  - D. Seizures
  - E. Non of the above
110. Angiodystonic syndrome is characterized by one of the following except:
- A. Hyperesthesia on separate phalanges
  - B. Chilling
  - C. Nystagmus
  - D. Cyanosis of hands
  - E. None of the above.
111. Clinical symptoms of vibrational disease from local vibration are:
- A. Dull aching of arms which disturbs patients at night and in rest
  - B. Fever 39C, severe vomiting 3-4 times a day
  - C. General weakness, headache, dizziness, bad sleep, irritability
  - D. Dull aching of arms which disturbs patients at night and in rest and general weakness, headache, dizziness, bad sleep, irritability
  - E. All the above.
112. Vascular disorders are characterized by:
- A. Fasciculitis and myositis
  - B. Positive Pile's symptom, phenomenon of white spot
  - C. Dizziness, nystagmus
  - D. Expressed pains in hands

- E. None of the them.
113. Syndrome of vegetative myofascitis is characterized by combination of:
- Neuritis and plexitis
  - Vegetative-sensory polyneuritis + dystrophic changes in the muscles of shoulder girdle and tendinous apparatus
  - Paraesthesias in lower extremities and hyperhidrosis
  - Chilling and cyanosis of hands
  - None of the above.
114. Trophic disorders show up:
- Hyperkeratosis on the palms
  - Hyperkeratosis on the lateral surface of fingers
  - Erasing of picture on the skin, especially on distal phalanxes
  - Thickened, turbid and deformed nails
  - All the above
115. Vibrational disease from the influence of general vibration is characterized by:
- Negative Pile's symptom
  - Headache in the frontal area
  - Chilling of extremities
  - Headache in the frontal area and chilling of extremities
  - None of the above.
116. Medical treatment of vibration disease includes:
- Improvement of microcirculation
  - Improvement of protein metabolism
  - To correct angiospasm
  - For removal of pain syndrome
  - All the above.
117. What are the main patient's complaints with the sensible form of polyneuritis?
- Absent of pain during palpation on motion of nerves
  - Oedema of the hands and feet
  - Severe pain
  - Feeling of weakness, numbness of hands and feet, loss of their sensitiveness, pain during palpation on motion of nerves
  - All of the above
118. What are the clinical features of encephalopathy at vibrational disease?
- Nausea
  - Headache, especially in the back of head
  - Oedema of the leg
  - Seizures
  - All of the above
119. With what diseases the differential diagnosis of vibration disease should be carried out?
- Raynaud's disease, syringomyelia, vegetative polyneuritis, myositis.
  - Neurocirculative dystonia
  - Brachium plexitis
  - Chronic intoxication by lead.
  - Chronic intoxication by manganese.
120. What methods of investigation help to reveal sensory disorders in the patients with vibration disease?
- Algesimetry, electrothermometry, pallesthesiometry
  - Distal thermometry
  - Electrocardiography
  - Capillaroscopy

- E. Ultrasound
121. What laboratory methods of investigation are necessary for proving the diagnosis of vibrational disease?
- Capillaroscopy, thermometry, algometry, pallesthesiometry, cooling test
  - Distal thermometry
  - Electrocardiography
  - Capillaroscopy
  - Ultrasound
122. What additional methods of investigation help to evaluate main syndromes of the vibrational disease?
- Capillaroscopy, cooling test, electrothermometry
  - Pallesthesiometry
  - Electrocardiography
  - Ultrasound
  - Algometry
123. What methods of investigation can help to diagnosed the vibrational disease?
- Capillaroscopy, cooling test, electrothermometry
  - Roentgenography
  - Electrocardiography
  - Ultrasound
  - Esophagogastroduodenoscopy
124. What additional methods of investigation we should do to the patients with vibrational disease?
- Capillaroscopy, cooling test, electrothermometry, pallesthesiometry
  - Echocardiography
  - Electrocardiography
  - Ultrasound
  - Common blood analysis
125. For what disease is characteristic sensory decrement by the peripheral type?
- Vibration disease
  - Anthraxis
  - Intoxication by lead
  - Intoxication by manganese
  - Intoxication by benzol
126. What complexons do you know?
- Tiosulfat sodium, Unithiol
  - Cuprenil (D-penicilamin), Pentacin, Tetacin-calcium
  - Tetacin-calcium, Tiosulfat sodium
  - Pentacin, Unithiol
  - All of the above
127. What is the main etiological factor of vibration disease?
- Industrial dust.
  - Industrial vibration.
  - Radiation
  - Chemical poisonings
  - All of the above
128. Choose the concomitant occupational factors of risk of the development of vibrational disease:
- Noise.
  - Super cooling.
  - Significant muscle tension of shoulder.
  - Forced position of body.



- E. All of the above.
129. Choose in what workers development of vibrational disease may be:
- A. Workers of machine building.
  - B. Workers of metallurgical industry.
  - C. Workers of shipbuilding industry.
  - D. Workers of transport and agriculture.
  - E. All of the above.
130. What vibration is dangerous for the development of vibrational disease?
- A. Vibration of low-frequency (8-15 Hz).
  - B. Vibration of medium-frequency (16-6 Hz).
  - C. Vibration of high-frequency (more than 64 Hz).
  - D. Vibration of medium and high-frequency.
  - E. All of the above.
131. For what diseases is characteristic positive Bogolepov symptom?
- A. Vibrational disease.
  - B. Chronic intoxication by lead.
  - C. Chronic intoxication by manganese.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
132. For what diseases is characteristic positive Pile's symptom?
- A. Chronic intoxication by manganese.
  - B. Vibration disease.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
133. For what diseases positive test on reactive hyperthermia is characteristic?
- A. Chronic intoxication by manganese.
  - B. Chronic intoxication by lead.
  - C. Chronic intoxication by benzol.
  - D. Chronic intoxication by mercury.
  - E. Vibrational disease.
134. For what diseases positive test of Boholyepov is characteristic?
- A. Chronic intoxication by manganese.
  - B. Chronic intoxication by lead.
  - C. Vibrational disease.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
135. For what diseases positive cold test is characteristic?
- A. Vibrational disease.
  - B. Chronic intoxication by manganese.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
136. For what diseases angiodystonic syndrome is characteristic?
- A. Vibrational disease.
  - B. Chronic intoxication by manganese.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
137. For what diseases angiospastic syndrome is characteristic?
- A. Chronic intoxication by manganese.
  - B. Chronic intoxication by lead.

- C. Vibration disease.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
138. For what diseases vegetative-sensory polyneuritis syndrome is characteristic?
- A. Chronic intoxication by manganese.
  - B. Chronic intoxication by lead.
  - C. Chronic intoxication by benzol.
  - D. Chronic intoxication by mercury.
  - E. Vibration disease.
139. For what diseases vegetative-myofascitis syndrome is characteristic?
- A. Vibration disease.
  - B. Chronic intoxication by manganese.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
140. For what diseases vestibular syndrome is characteristic?
- A. Vibration disease.
  - B. Chronic intoxication by manganese.
  - C. Chronic intoxication by lead.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
141. Which symptoms characterize the vestibular syndrome during vibrational disease:
- A. Dizziness.
  - B. Nystagmus.
  - C. Ataxy.
  - D. Vestibular crises.
  - E. All of the above.
142. For what diseases syndrome of somatic nerves' is characteristic?
- A. Chronic intoxication by manganese.
  - B. Chronic intoxication by lead.
  - C. Vibrational disease.
  - D. Chronic intoxication by benzol.
  - E. Chronic intoxication by mercury.
143. Which symptoms characterized the vestibular syndrome during vibrational disease:
- A. Neuritis.
  - B. Plexitis.
  - C. Radiculitis.
  - D. None of the above.
  - E. All of the above.