

## **BRAINWARE UNIVERSITY**

## Term End Examination 2021 - 22 Programme – Bachelor of Science in Physician Assistant Course Name – Cardiology & Cardiac Surgical Disorders Course Code - BPA403 (Semester IV)

Time allotted: 1 Hrs.15 Min. Full Marks: 60

[The figure in the margin indicates full marks.]

## Group-A

(Multiple Choice Type Question)

1 x 60=60

Choose the correct alternative from the following:		
(1) Which event is associated with cardiac cycle?		
a) atrial systole	b) ventricular systole	
c) relaxation period	d) refraction period	
(2) What is the time period for ventricular systole?		
a) 0.3 sec	b) 0.1 sec	
c) 0.4 sec	d) 0.5 sec	
(3) Why the relaxation period is longer than contraction period?		
<ul> <li>a) more time for the cardiac muscles to relax before contraction</li> </ul>	b) no specific reason to it	
c) so that more forceful is next contraction	d) more time for the cardiac muscles to relax before contraction and so that more forceful is next contraction	
(4) What is the most common cause of mitral stenosis?		
a) Chronic rheumatic valve disease	b) Acute rheumatic fever	
c) Congestive heart failure	d) Infective endocarditis	
(5) Which of the following conditions is Marfan's syndrome most commonly associated with?		

a) Endocarditis

b) Restrictive cardiomyopathy

c) Arrhythmia

- d) Aortic dissection
- (6) What is the best description of Eisenmenger's syndrome?
  - a) It occurs when a right to left shunt becomes left to right due to a build-up of pressure on the left side of the heart.
- b) It is due to failure of the aorticopulmonary septu m to spiral.
- It is due to lack or aorticopulmonary septum form ation.
- d) An initial left to right shunt becomes right to left due to increased pulmonary blood flow and event ual right ventricular hypertrophy (RVH).
- (7) What are the classic signs of a cardiac tamponade?
  - a) Hypotension, muffled heart sounds, increased jug ular venous distension (JVD)
- b) Tachycardia, dyspnoea, fever

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c) Bradycardia, weakness in arms, diaphoresis	d) Hypertension, palpitations, chest pain
(8) What gross histological change correlates with white issue during the first week after an MI?	blood cells' (WBCs) invasion into cardiac t
a) Yellow pallor	b) Dark discolouration
c) White scar	d) Red border around yellow pallor
(9) What heart condition is Turner's syndrome associated	d with?
a) Tricuspid atresia	b) Truncus arteriosus
c) Coarctation of the aorta	d) Patent ductus arteriosus
(10) What do you mean by systolic BP?	
a) Force exerted on the walls during ventricular cont raction	b) force exerted on the walls during ventricular relax ation
c) force exerted on the walls during atrial contractio n	d) Force exerted on the walls during atrial relaxation
(11) Which device is used to measure BP?	
a) electrocardiograph	b) sphygmomanometer
c) pulse recorder	d) Manograph
(12) Which of these contribute to high blood pressure?	
a) Getting a lot of Vitamin C	b) Drinking a lot of alcohol
c) Getting a lot of Calcium	d) Drinking a lot of water
(13) High blood pressure is the main cause of which of the	e following?
a) Cancer	b) Stroke
c) Diabetes	d) Congestive heart failure
(14) During ventricular pressure pulses, square root wave	is seen in
a) ASD	b) MVPS
c) Dilated cardiomyopathy	d) Constrictive pericarditis
(15) Beck's triad seen in?	
a) Constrictive pericarditis	b) Cardiac tamponade
c) LVMI	d) HOCM
(16) SI unit for measuring Blood Pressure is:	
a) Torr	b) mmHg
c) kPa	d) Barr
(17) A 12-year-old boy has $BP - 200/140$ femoral pulse no	ot palpable. Most likely diagnosis:
a) Takayasu's aortoarteritis	b) Renal parenchymal disease
c) Renal artery stenosis	d) Co-arctation aorta
(18) Sydenham chorea is?	
a) An abrupt and non-rhythmic involuntary moveme nts	b) Is a muscular weakness
c) Is a rhythmic voluntary movements	d) Is an emotional disturbance
(19) The minor criteria of rheumatic fever includes?	
a) Migratory arthralgia	b) Carditis and valvulitis
c) Erythema marginatum	d) Subcutaneous nodules
(20) Rheumatic fever is caused by which of the following	bacteria?
a) Pseudomonas	b) Staphylococcus
c) Streptococcus	d) Shigella
(21) You are seeing a 60-year-old man for the first time. H Hg and blood pressure has been elevated on at least 3 of target organ dysfunction (heart, neurological, or ey what is the best initial approach?	occasions). There is currently no evidence

a) Initiate treatment with 25 mg of hydrochlorothiazi de.	b) Consider initiating treatment with a 2-agent comb ination pill.
c) Delay pharmacologic intervention and treat with s alt restriction.	d) Nitrates therapy
(22) Mean arterial pressure (MAP) is equal to?	
a) cardiac output* resistance	b) Cardiac output*stroke volume
c) resistance *heart rate	d) Heart rate * pulse rate
(23) What is the main complication of the macrophage pha	se (4 to 7 days) after an MI?
a) Fibrinous pericarditis	b) Arrhythmia
c) Aneurysm / Mural thrombus / Dressler's syndrom e	d) Cardiac tamponade / Shunt through the ventricula r wall / Mitral insufficiency
(24) What is the most frequent etiologic agent of acute infe	ective endocarditis in IV drug abusers?
a) Streptococcus viridans	b) Staphylococcus aureus
c) Staphylococcus epidermidis	d) Streptococcus bovis
(25) What are the characteristics of stable angina?	
a) Chest pain that occurs with exertion and/or emoti onal stress	b) Severe and crushing chest pain (>20 mins)
c) Chest pain that occurs at rest	d) Bradycardia
(26) Which of these can increase your risk of high blood p	ressure?
a) Obesity	b) Environmental factor
c) under weight	d) High body temperature
(27) According to the best available evidence, which one o ducing primary hypertension is not likely to be effecti	•
a) Dietary salt restriction	b) Fish oil supplementation
c) Magnesium supplementation	d) Physical activity
(28) In a study by Chan et al on myocardial infarction patie was noted that 83% of patients younger than 45 years h X were left untreated. What is X?	<b>2</b> 1 ,
a) Diabetes mellitus.	b) Hypertension.
c) Hyper-triglyeridemia.	d) Hyperlipidemia.
(29) Exercise can help to reduce the risk of heart disease by	y:
a) Increasing the levels of HDL.	b) Reducing the levels of HDL.
c) Increasing the levels of LDL	d) Increasing blood pressure.
(30) After a myocardial infarction, the heart muscle may be	e damaged due to:
a) blood trapped in the heart.	b) a lazy valve.
c) nerve damage.	d) reduced blood flow to the heart.
(31) Symptoms of a heart attack include all of the followin	g EXCEPT
a) blurred vision, numbness, and fever.	b) pain in the chest, shoulders, neck, or arms.
c) uncomfortable pressure or sensation of fullness in the chest.	d) dizziness, fainting, sweating, or shortness of breat h.
(32) Smoking increases an individual's chance for heart dis	ease by:
a) decreasing your body's ability to clot blood.	b) increasing the chance of an irregular heartbeat.
c) decreasing the amount of fat deposits around arter ial walls.	d) decreasing heart rate and blood pressure.
(33) Which of the following classes of drugs is most widely	y used in the treatment of cardiomyopathy?
a) Antihypertensive	b) Beta-adrenergic blockers
c) Calcium channel blockers	d) Nitrates
(34) Atherosclerosis impedes coronary blood flow by which	h of the following mechanisms?
a) Plaques obstruct the vein  Page 3	b) Plaques obstruct the artery of 6

c) Blood clots form outside the vessel wall through (35) Which of the following groups of symptoms indicated a ruptured abdominal aneurysm? a) Lower back pain, increased BP, decreased RBC, i b) Severe lower back pain, decreased BP, decreased RBC, increased WBC ncreased WBC c) Severe lower back pain, decreased BP, decreased d) Intermittent lower back pain, decreased BP, decre RBC, decreased WBC ased RBC, increased WBC (36) Septal involvement occurs in which type of cardiomyopathy? a) Congestive b) Dilated c) Hypertrophic d) Restrictive (37) A twelve-lead Holter monitor can instantly diagnose b) supraventricular tachycardia (SVT) a) atrial flutter d) ventricular bradychycardia c) atrial fibrillation (38) To perform the surgery, the patient is usually put on b) cardiopulmonary bypass a) Ventilation d) not listed here c) pace maker (39) Which treatment would be least effective for asystole? b) Intravenous epinephrine, 10 ml. of 1:10,000 a) External pacemaker. c) Intravenous calcium gluconate, 10 ml. of 10% sol d) Intravenous atropine, 0.5 mg. (40) Which maneuver generally is not performed early before chest compression in basic life support outside the hospital? a) Call for help b) Obtain airway. c) Electrical cardioversion. d) Ventilation. (41) Which is not true of cardiopulmonary resuscitation (CPR)? a) Closed chest massage is as effective as open chest b) The success rate for out-of-hospital resuscitation may be as high as 30% to 60%. massage. d) Standard chest massage generally provides less th The most common cause of sudden death is ische an 15% of normal coronary and cerebral blood flo mic heart disease. (42) A 62-year-old woman whose arrhythmia is noninducible at EP study has depressed LV function without aneurysm. The following is/are true: a) If her arrhythmia is ventricular tachycardia, she is b) not a candidate for an Automatic Implantable Car If an AICD is appropriate, it offers a 50% improv diac Defibrillator (AICD) since it only recognizes ement in mortality compared to drug therapy fibrillation c) Poor ventricular function is a contraindication to d) AICD should not be used for patients awaiting car AICD implantation diac transplantation (43) In the workup of a 45-year-old man with suspected coronary artery disease, the following is/are t a) Thyroid tests are included to rule out hyperthyroi b) Typically positive stress ECG would show elevate dism d ST segments c) Dipyridamole is a useful adjunct to thallium scan d) Persisting defects on thallium scan indicate revers ning as it increases coronary perfusion pressure ible myocardial ischemia (44) A 52-year-old man with chest pain and tachycardia has ECG evidence of an acute MI. The follo wing is/are true: a) Of the drugs available, recombinant tPA produces b) Thrombolytic therapy requires catheterization for

d) Hardened vessels dilate to allow the blood to flow

intracoronary administration

d) Thrombolytic therapy should be considered imme

diately since the benefit is greater the earlier it is

better results than SK or APSAC although it is m

c) Addition of heparin and antiplatelet drugs produc

ore expensive

es no incremental benefit

given

(45) Permanent artificial hearts are being developed that are used to transmit the electrical energy across the bound	· 1
a) Infrared sensor.	b) Inductive coupling.
c) High-pressure liquid chromatography (HPLC).	d) Infrared spectroscopy.
(46) Which of the following are the most frequent complication?	eations of intra-aortic balloon counterpulsati
a) Stroke.	b) Limb ischemia.
c) Arrhythmias.	d) Aortic thrombosis.
(47) Pacemaker-mediated tachycardia is caused by:	
a) Sensing of retrograde atrial activation.	b) Inappropriate ventricular sensing.
c) Lead fracture.	d) Pacemaker induction of atrial fibrillation.
(48) In adults the most common cause of acquired complete	te heart block is:
a) Ischemic heart disease.	b) Sclerodegenerative disease.
c) Traumatic injury.	d) Cardiomegaly.
(49) Which of the following is generally associated with m	nitral stenosis without regurgitation?
a) Pulmonary hypertension.	b) Pulmonary edema.
c) Left ventricular dilatation.	d) An opening snap after the second heart sound.
(50) Which of the following are not true?	
<ul> <li>a) Tricuspid regurgitation due to annular dilatation al one generally does not require valve replacement.</li> </ul>	b) Mitral valve replacement with either a bioprosthe sis or a mechanical valve requires warfarin antico agulation.
c) Tricuspid valve replacement is generally an indication for using a tissue valve.	d) Chronic renal failure is a relative indication for tis sue valves.
(51) Adequate flow during cardiopulmonary bypass is best	t indicated by:
a) Systemic blood pressure of 90/50 mm. Hg.	b) Arterial PO2 of 230 mm. Hg.
c) Central venous pressure of 1 mm. Hg.	d) Mixed venous hemoglobin saturation of 78%.
(52) Which of the following does not typically occur durin bypass?	g the first few minutes of cardiopulmonary
a) Interstitial fluid increases.	b) Blood flow becomes nonpulsatile.
c) Platelet count decreases.	d) Complement is activated.
(53) All are neurological complications of hypertension ex	cept:-
a) CVA/Stroke	b) Encephalopathy
c) Subarachnoid Haemorrhage	d) Demyelinating Neuropathy
(54) Erythrocyte Sedimentation Rate is elevated in all exce	ept:-
a) Pregnancy	b) Inflammation
c) CANCER	d) Congestive heart failure
(55) Which of the following is a cyanotic congenital heart	disease?
a) Coarctation of Aorta	b) Patent Ductus Arteriosus
c) Ventricular Septal Defect	d) Tetrology Of Fallot
(56) Which of the following microorganism is implicated in	in etiology of Rheumatic heart disease?
a) Bacillus Anthracis	b) Salmonella Typhii
c) Beta haemolytic streptococcus	d) Staphylococcus
(57) Which of the following is not a manifestation as per J rt disease?	ones criteria for diagnosis of rheumatic hea
a) Carditis	b) Arthritis
c) Chorea	d) Leucocytosis
(58) Which of the following statement is false?	

- a) Stable angina can be initiated by excitement.
  b) Stable angina is relieved by sublingual nitrates
  c) Prinzmetals variant angina is due to coronary arter ial spasm.
  (59) Which of the following does not qualify as acute coronary syndrome?
  a) Prinzmetals angina
  b) Stable angina is relieved by sublingual nitrates
  d) Prinzmetals angina occurs at rest.
  b) STEMI
- c) NSTEMI d) Stable angina
  (60) Which of the following is not a cardiac biomarker?

  a) Troponin b) CPK (MB)
  c) LDH d) GGT