



The following topics should be studied very well as most of the questions are about them:

1) Brucellosis.

2) TB.

3) Side effects and uses of levofloxacin, Metronidazole, Ciprofloxacin, vancomycin and ceftriaxone.

4) HIV.

5) Vaccines: which of them are safe in pregnancy, flu and hepatitis vaccines.

6) C. difficile.

7) There are some questions on parasitic and worm infections: tinea, enterobius, ascaris.

8) Memorize SIRS criteria: there are some questions about it from 2012-2014 exams, you also have to memorize it for other systems like GI.

9) PPD test positive criteria, rule of 3, and AIDS-defining illnesses: see the last page.

action? A) give treatment only if her viral load above 50,000 copies /ml B) Give treatment only if she's not pregnant C)Await 2 months and then start treatment D) Start antiretroviral treatment E) Give treatment only if her CD4 count is below 200 cells/mL Answer: D 2) A patient said that he noticed smooth brown worms around 40 cm in length coming out of his anus. This worm is most likely? A) Ascaris lumbricoides B) Trichuris trichuria C) Ankylostoma duodenale D) Necator americanus E) Enterobius vermicularis Answer: A 3) Which of the following is FALSE about brucellosis? A) The most common focal complication is osteoarticular infections B) It is commonly transmitted from human to human C) Brucella abortus is the most virulent brucella species D) It should be treated for several weeks E) B+C Answer: E

1) A 32-year-old woman was just diagnosed with HIV, which of the following is the most appropriate

4) which of the following antibiotics has been particularly associated with hemolytic reactions in patients with G6PD deficiency?

- A) Dapsone
- B) Clindamycin
- C) Cloxacillin
- D) Piperacillin
- E) Vancomycin

5) The highest risk of needle stick injury is related to which of the following viruses?

- A) Hepatitis A
- B) HIV
- C) Hepatitis C
- D) Hepatitis B
- E) Hepatitis E

6) Most common cause of viral meningitis:

- A) Herpesviruses
- **B)** Enteroviruses
- C) Lymphocytic choriomeningitis virus (LCMV)
- D) Mumps
- E) JC virus

7) Negative PPD for latent TB:

- A) 6 mm in a patient on long-term steroids
- B) 12 mm in an immigrant from endemic/high prevalence country in the last 5 years
- C) 7 mm in person with recent contact with active TB patient
- D) 10 mm in a 60-year-old healthy woman
- E) 13 mm in a mycobacteriology laboratory professional

8) Treatment for brucellosis in children:

- A) Doxycycline only for 6 weeks
- B) Rifampin only for 6 weeks
- C) Doxycycline and Rifampin for 6 weeks
- D) rifampin and TMP-SMX for 6 weeks

Answer: D

Answer: D

Answer: B

Answer: D

| 9) Sepsis is not associated with: | |
|---|-----------|
| A) Dysesthesias in gloves-and-stocking distribution | |
| B) Absent or reduced reflexes | |
| C) ARDS | |
| D) Metabolic alkalosis | |
| E) Hypotension | |
| | Answer: D |
| 10) Wrong about IM influenza vaccine | |
| A) Contraindicated in pregnancy | |
| B) Contraindicated in immunocompromised patients | |
| C) Contraindicated in bone marrow transplant patients | |
| D) A +B | |
| E) A + B +C | |
| | Answer: E |
| 11) Drug that causes arthropathy: | |
| A) Clindamycin | |
| B) Levofloxacin | |
| C) Amoxicillin | |
| D) Metronidazole | |
| E) Azithromycin | |
| | Answer: B |
| 12) Severe external ear pain and discharge, most likely organism: | |
| A) klebsiella | |
| B) staphylococcus aureus | |
| C) pseudomonas aeroginosa | |
| D) GAS | |
| E) GBS | |
| | Answer: C |

13) Which of the following is NOT considered anti-pseudomonal antibiotic?

- A) Gentamycin
- B) Cefepime
- C) Ciprofloxacin
- D) Ceftriaxone
- E) Ceftazidime

Answer: D

14) Which of the following vaccines is contraindicated in persons with underlying immunodeficiency?

- A) Influenza vaccine
- B) Conjugated Pneumococcal vaccine
- C) Measles-mumps-rubella (MMR) vaccine
- D) Hepatitis B vaccine
- E) Tetanus vaccine

Answer: C

15) 60-year-old man comes with productive cough, hemoptysis, weight loss, night sweats. His chest X-ray shows a right upper lobe cavity. You suspect that he has tuberculosis. His HIV test is negative. His sputum Acid Fast Bacillus was negative on three occasions. The best next step in his management is:

- A) Repeat sputum AFB after one month
- B) Do blood culture for mycobacteria
- C) Do bronchoscopy
- D) Treat empirically for TB
- E) Do PPD test

Answer: C

16) All the followings are true about Clostridium difficult disease EXCEPT:

- A) It is diagnosed by detection of serum antibodies to toxin A and B
- B) It is caused by Gram-positive bacilli
- C) Recurrence rate can reach 20%
- D) It is the most common cause of hospital-acquired diarrhea
- E) It is treated by metronidazole

| 17) Which of the following pathogens most commonly complicate H1N1 influenza: |
|---|
| A) H. influenza |
| B) Streptococcus pneumonia |
| C) Legionella pneumophila |
| D) Anaerobic bacteria |
| E) Mycoplasma pneumonia |
| Answer: B |
| 18) All of the following are true about influenza vaccine EXCEPT: |
| A) It's given annually |
| B) It is contraindicated in patients with Guillain-Barre syndrome |
| C) It is composed of three strains of influenza virus |
| D) It is contraindicated in immunocompromised patients |
| E) It is safe in pregnancy |
| Answer: D |
| 19) All the following is true about Brucella except: |
| A) Brucella melitensis is more virulent than Brucella abortus |
| B) Treatment is at least for 6 weeks |
| C) Endocarditis is the most common cause of death |
| D) Sacroiliitis is a rare focal complication |
| E) It is a Gram-negative, facultative intracellular bacillus |
| Answer: <mark>D</mark> |
| 19) All the following cutoffs for the PPD in the corresponding population are considered positive except: |
| A) 3 mm in an AIDS patient |
| B) 10 mm in a household contact of active TB case |
| C) 17 mm in healthy person |
| D) 8 mm in a patient with a kidney transplant |
| |

E) 13 mm in an IV drug abuser

| 20) Which of the following isn't a side effect to vancomycin? | |
|---|-----------|
| A) red man syndrome | |
| B) neutropenia | |
| C) phlebitis | |
| D) neuropathy | |
| E) nephrotoxicity | |
| | Answer: D |
| 21) A patient with recurrent abscesses, pneumonia, and high IgE: | |
| A) Defect in phagocytosis | |
| B) Defect in chemotaxis | |
| C) Mixed defect | |
| | Answer: B |
| 22) ESBL (extended spectrum beta lactamase) bacteria defining feature is resistance to: | |
| A) Imipenem | |
| B) Meropenem | |
| C) Ceftriaxone | |
| D) Cefuroxime | |
| | Answer: C |
| 23) which Schistosoma causes bladder cancer? | |
| A) S. haematobium | |
| B) S. mansoni | |
| C) S. japonicum | |
| | Answer: A |
| 24) Which vaccine of the following is safe to give in pregnancy? | |
| A) Injectable influenza | |
| B) MMR | |
| C) Human Papilloma Virus vaccine | |
| | Answer: A |
| 25) Which test of the following is diagnostic to syphilis? | |
| A) RPR | |
| B) VDRL | |
| C) Biopsy | |
| | Answer: C |

| 26) MCC of acute endocarditis: | |
|--|-----------|
| A) S. viridans | |
| B) S. epidermidis | |
| C) E. faecalis | |
| D) S. aureus | |
| | Answer: D |
| 27) HVC antibody was positive: what's the best next step? | |
| A) LFT | |
| B) Viral load by PCR | |
| C) Liver biopsy | |
| | Answer: B |
| 28) Patient complaining of perianal itching mainly during night and then he was diagnosed with enterobius vermicularis infection. Which of the following is wrong? | |
| A) It occurs mostly in children | |
| B) It is a pinworm | |
| C) Eggs are invisible in stool | |
| D) Anemia is commonly associated with this infection | |
| | Answer: D |
| 29) Which of the following is the diagnostic test for active TB? | |
| A) 3 Sputum samples | |
| B) Chest CT scan | |
| C) Tuberculin skin test | |
| | Answer: A |
| 30) Which of the following TB infections is the most infectious? | |
| A) CNS | |
| B) Larynx | |
| C) Spine | |
| D) Calcified lung | |
| E) GIT | |
| | Answer: B |
| | |

| 31) What's the most common cause of death in patients with brucellosis? | |
|--|-----------|
| A) Sacroiliitis | |
| B) Endocarditis | |
| C) Osteomyelitis | |
| D) Liver failure | |
| | Answer: B |
| 32) Wrong about Ascaris lumbricoides: | |
| A) Diagnosed by detection of eggs in stool | |
| B) Most common helminth worldwide | |
| C) May cause Loeffler syndrome | |
| D) May cause periorbital edema | |
| | Answer: D |
| 33) Wrong about C. difficile: | |
| A) High risk antibiotics are clindamycin, cephalosporins, and fluoroquinolones | |
| B) Causes pseudomembranous colitis | |
| C) It's a gram-negative bacillus | |
| D) One of the risk factors to develop infection is taking PPIs | |
| E) It can cause toxic megacolon | |
| | Answer: C |
| 34) Peak age of HIV in Jordan: | |
| A) 5-15 | |
| B) 15-25 | |
| C) 25-35 | |
| D) 35-45 | |
| E) 45-55 | |
| | Answer: C |
| 35) Cannot be acquired from unpasteurized milk: | |
| A) Mycobacterium bovis | |
| B) Listeria monocytogenes | |
| C) Brucella | |
| D) Bacillus anthrax | |
| | Answer: D |

| 36) Most common congenital immunodeficiency disorder: | |
|--|-----------|
| A) Severe combined immunodeficiency | |
| B) Common variable immunodeficiency | |
| C) Bruton agammaglobulinemia | |
| D) IgA immunodeficiency | |
| | Answer: D |
| 37) Which of the following is true about HAV? | |
| A) Viral shed in feces at onset of symptoms | |
| B) It tends to be a chronic infection | |
| C) Its vaccine is safe in pregnancy | |
| D) It causes splenomegaly | |
| | Answer: C |
| 38) Follicular tonsillitis is caused by: | |
| A) GBS | |
| B) GAS | |
| C) Staph aureus | |
| D) S. pneumonia | |
| E) Viridans streptococcus | |
| | Answer: B |
| 39) Which of the following best describes the starting criteria for antiretroviral therapy in patier HIV infection? | nts with |

- A) Treatment is started if CD4 count is less than 300 cells/mL
- B) Treatment is started if patient is losing weight
- C) Treatment is started once patient is diagnosed with HIV
- D) Treatment is started if an opportunistic infection appears
- E) Treatment is started if viral load is more than 50,000

Answer: C

40) Which of the following vaccines contains live attenuated pathogen?

- A) Injectable tetanus vaccine
- B) Injectable MMR vaccine
- C) Injectable influenza vaccine
- D) Injectable hepatitis B vaccine
- E) Injectable polysaccharide pneumococcal vaccine

Answer: B

41) A 42-year-old woman presents to the emergency department with right-sided flank pain. She has a history of CKD stage 4 due to ADPKD. The pain has steadily worsened over the last 2 weeks. Associated symptoms are fever, nausea, and vomiting, but no dysuria or hematuria. Physical examination reveals blood pressure of 108/60 mm Hg, heart rate of 98/min, and temperature of 39 degrees, and right costophrenic angle tenderness. Serum creatinine is 2.8 mg/dL (0.6-1.1), which is unchanged from 3 months ago. Urinalysis is unremarkable. Blood cultures are obtained. A computed tomography scan without intravenous contrast reveals multiple fluid-filled cysts in both kidneys, as well as cysts in her liver. Which one of the following is the MOST appropriate treatment?

- A) Vancomycin
- B) Ciprofloxacin
- C) Linezolid
- D) Gentamicin
- E) Piperacillin

42) true about tinea:

- A) Cysticercosis is caused by tinea saginata
- B) Tinea solium is found in pork
- C) Tinea saginatua is found in pork

43) which of the following is NOT a side effect of Metronidazole?

- A) Red man syndrome
- B) Headache
- C) Disulfiram-like reaction
- D) Metallic taste

Answer: B

Answer: B

| 44) 90% of congenital rubella syndrome occurs if mother get infected in: | |
|--|-----------|
| A) first trimester | |
| B) Second trimester | |
| C) Third trimester | |
| | Answer: A |
| 45) A CSF sample showed: low glucose, high protein, lymphocytes, the least likely etiology is: | |
| A) TB | |
| B) HSV | |
| C) Sarcoidosis | |
| | Answer: B |
| 46) Wrong about chylothorax: | |
| A) TG more than 110 | |
| B) Cholesterol more than 200 | |
| C) Exudative effusion | - |
| 17) Which of the following descent trigger CEDDD hemolycic) | Answer: B |
| 47) Which of the following doesn't trigger G6PDD hemolysis? | |
| A) Dapsone | |
| B) Nitrofurantoin | |
| C) Levofloxacin | |
| D) TMP-SMZ | Answer: C |
| 48) The percentage of transmitting HIV from the mother to the child is: | Answer, e |
| A) 5% | |
| B) 10% | |
| C) 25% | |
| D) 50% | |
| E) 70% | |
| | Answer: C |
| | |
| | |

| 49) Not in the management of common cold: | |
|---|-----------|
| A) Antibacterial drug administration | |
| B) Decongestant administration | |
| C) NSAID | |
| D) Hydration | |
| | Answer: A |
| 50) TRUE regarding brucellosis: | |
| A) B. canis commonly infects gouts and sheep | |
| B) B. suis is associated with suppurative destructive lesions | |
| C) B. suis is the most common one in humans | |
| D) It's more common in females | |
| | Answer: B |
| 51) Which of the following needs only contact isolation? | |
| А) ТВ | |
| B) MRSA | |
| C) Measles | |
| D) Influenza | |
| | Answer: B |
| 52) Which of the following is NOT an AIDS-defining illness? | |
| A) Kaposi sarcoma | |
| B) cryptosporidiosis | |
| C) Oral candidiasis | |
| D) TB | |
| E) CMV retinitis | |
| | Answer: C |
| 53) What's the most common cause of diarrhea in adults? | |
| A) Norovirus | |
| B) Rotavirus | |
| C) E. coli | |
| D) Adenovirus | |
| | Answer: A |

| 54) Which of the following causes erysipelas? | |
|--|------------------------|
| A) Exotoxin of S. aureus | |
| B) GBS | |
| C) GAS | |
| D) P. aeruginosa | |
| | Answer: C |
| 55) 70-year-old patient started complaining of cough, SOB and weakness of 3 days duration. He v suspected to have been infection with H1N1 infleunza A strain. All of the following are applicable EXCEPT? | |
| A) He should be given oseltamivir | |
| B) He should be started on prophylactic antibiotics | |
| C) His household contacts should be started on oseltamivir | |
| D) H1N1 diagnosis can be confirmed with nasopharyngeal swab PCR | |
| (Note: oseltamivir is used only if the exposure was in less than 48 hours) | Answer: <mark>A</mark> |
| 56) Man went to India and now has bloody diarrhea; all of these are possible etiologies EXCEPT: | |
| A) Shigella | |
| B) Salmonella | |
| C) Cholera | |
| D) Campylobacter | |
| | Answer: <mark>C</mark> |
| 57) Which of the following antibiotics causes tendinitis in the rotator cuff muscles? | |
| A) Ciprofloxacin | |
| B) Doxycycline | |
| C) Sulfatrim | |
| D) Ampicillin | |
| | Answer: A |
| 58) Common variable immune deficiency, which is true? | |
| A) Recurrent infections in childhood | |
| B) Low IgA and IgG | |
| C) Decreased B lymphocytes | |
| | Answer: B |

| 59) Most common cause of viral encephalitis: | |
|---|-----------|
| A) HSV | |
| B) CMV | |
| C) VZV | |
| D) EBV | |
| E) West Nile virus | |
| | Answer: A |
| 60) Which of the following is an AIDS-defining disease? | |
| A) CD4 less than 300 | |
| B) Viral load more than 10000 | |
| C) TB | |
| D) VZV | |
| | Answer: C |
| 61) What is the risk of being infected with HIV after needle stick injury? | |
| A) 0.3 % | |
| B) 3% | |
| C) 30% | |
| | Answer: A |
| 62) Not a side effect of vancomycin: | |
| A Red man | |
| B) Phlebitis | |
| C) Renal toxicity | |
| D) Seizures | |
| | Answer: D |
| 63) A case of infective endocarditis, patient 45 y/o, healthy, she did a root extraction at dentist of started to have new murmur, which is the most likely organism: | clinic, |
| A) Staph aureus | |
| B) Alpha hemolytic strep | |
| C) E. coli | |
| D) Bacteroides | |
| E) Staph epidermidis | |

| | Answer: B |
|--|-----------|
| | |
| 64) A patient with VZV shingles, which is wrong? | |
| A) Observe | |
| B) Give ganciclovir | |
| C) Give acyclovir | |
| D) Give levofloxacin | |
| E) Do HIV test if it was bilateral | |
| | Answer: D |
| 65) About amoeba histolytica found in feces, whish of the following is NOT true? | |
| A) Treatment for 7-10 days | |
| B) Elevated alkaline phosphatase means liver abscess | |
| C) Blood comes from colon ulcers | |
| D) Metronidazole is the treatment of choice | |
| | Answer: D |
| 66) All of the following indicate SIRS EXCEPT: | |
| A) RR 23 | |
| B) WBC 10000 | |
| C) Temp 39 | |
| D) Bands 13% | |
| | Answer: B |
| 67) All true about C. difficile EXCEPT: | |
| A) Most antibiotic-induced diarrhea are not caused by CD | |
| B) Most cases of pseudo membranous colitis are caused by CD | |
| C) May be found in healthy people | |
| D) Immune complex mediated | |
| E) Metronidazole is DOC | |
| | Answer: D |
| 68) All true about staph. Aureus food poisoning EXCEPT: | |
| A) Fever | |
| B) Nausea and vomiting | |
| C) Diarrhea in less than 24 Hours | |
| D) Abdominal cramping | |

69) Which of the following may cause lupus?

- A) Isoniazid
- B) Rifampicin
- C) Pyrazinamide
- D) Ethambutol
- E) Streptomycin

70) A patient susceptible to parasitic infections, mostly due to:

- A) B cell deficiency
- B) T cell deficiency

Answer: B

Answer: A

More questions but with no choices:

1) Patient testing for HIV after 7 days from intercourse with HIV infected patient, best tool:

PCR testing for viral load

2) Most sensitive test for typhoid fever:

In the past paper file, it's blood culture but the true answer is bone marrow culture

3) Immediate action after needle stick injury? - wash your hands with water and soap

4) Needle stick injury with Hep B in an individual not previously vaccinated, what to do? – give the vaccine and Hep B immunoglobulins

5) True about sepsis – Tachypnea can be the first presenting sign (not sure)

6) A case of upper respiratory tract infection, prescribed amoxicillin by a physician, what to do? - May be to stop the antibiotic because it's most probably a viral infection (although guidelines say you should complete the course).

7) Most infectious TB? Cavitating pulmonary TB (also the laryngeal TB is very contagious, and it was the answer in another question (there was not cavitating pulmonary TB in the other choices)

8) Epigastric pain 4 hours after eating custard: S. aureus

9) Most common cause of cellulitis – Staphylococcus aureus (Streptococcus pyogenes is more common but it was not a choice)

10) An antibiotic contraindicated in pregnancy – doxycycline

11) Not in the management of common cold – antibacterial drug administration

12) True about C. difficile – diagnosed via stool toxin

13) True about sepsis? Hypothermia is a poor prognostic sign

14) Doesn't cause severe diarrhea? Bacillus cereus

15) A female who went to a restaurant and presented with vomiting after 5 hours, Dx: Staph (remember: S. aureus and B. cereus have pre-formed toxins that cause diarrhea in 30 mons to 6 hours)

16) True about Hepatitis B vaccine > protective against hepatitis D

17) Most serious type of malaria; P. Falciparum.

- 18) Disorder of phagocytosis? chronic granulomatous disease
- 19) PCP pneumonia: CD4 < 200
- 20) Which is false about sepsis: blood culture is positive in 80% of case
- 21) Which on the following is true about SIRS Bands more than 10%
- 22) Enterohemorrhagic E. coli: antibiotics are contraindicated (they increase the risk of HUS)

** To diagnose AIDS, you need either CD4 less than 200 or an AIDS-defining illness (anyone in the table except the first group as they are not considered AIDS-defining)

Note: Dr. Fares considered Kaposi as an AIDS-defining illness.

| PATHOGEN | PRESENTATION | FINDINGS |
|--|---|--|
| CD4+ cell count < 500/ | ′mm³ | |
| Candida albicans | Oral thrush | Scrapable white plaque, pseudohyphae on microscopy |
| EBV | Oral hairy leukoplakia | Unscrapable white plaque on lateral tongue |
| HHV-8 | Kaposi sarcoma | Perivascular spindle cells invading and forming vascular tumors on histology |
| HPV | Squamous cell carcinoma at site(s) of sexual contact (most commonly anus, cervix, oropharynx) | |
| CD4+ cell count < 200/ | ′mm³ | |
| Histoplasma capsulatum | Fever, weight loss, fatigue, cough, dyspnea, nausea, vomiting, diarrhea | Oval yeast cells within macrophages |
| HIV | Dementia | Cerebral atrophy on neuroimaging |
| JC virus (reactivation) | Progressive multifocal leukoencephalopathy | Nonenhancing areas of demyelination on MRI |
| Pneumocystis jirovecii | Pneumocystis pneumonia | "Ground-glass" opacities on chest imaging |
| CD4+ cell count < 100/ | 'mm ³ | |
| Aspergillus fumigatus | Hemoptysis, pleuritic pain | Cavitation or infiltrates on chest imaging |
| Bartonella spp | Bacillary angiomatosis | Multiple red to purple papules or nodules Biopsy with neutrophilic inflammation |
| Candida albicans | Esophagitis | White plaques on endoscopy; yeast and pseudohyphae on biopsy |
| CMV | Colitis, Retinitis, Esophagitis, Encephalitis, Pneumonitis (CREEP) | Linear ulcers on endoscopy, cotton-wool spots on fundoscopy Biopsy reveals cells with intranuclear (owl eye) inclusion bodies |
| Cryptococcus neoformans | Meningitis | Encapsulated yeast on India ink stain or capsular antigen ⊕ |
| Cryptosporidium spp | Chronic, watery diarrhea | Acid-fast oocysts in stool |
| EBV | B-cell lymphoma (eg, non-Hodgkin lymphoma, CNS lymphoma) | CNS lymphoma—ring enhancing, may be solitary (vs Toxoplasma) |
| Mycobacterium avium-intracellulare, Mycobacterium avium complex | Nonspecific systemic symptoms (fever, night sweats, weight loss) or focal lymphadenitis | Most common if CD4+ cell count < 50/mm ³ |
| Toxoplasma gondii | Brain abscesses | Multiple ring-enhancing lesions on MRI |

**Rule of 3: risk of infection after a needle stick injury: HIV: 0.3%, HCV: 3%, HBV: 30%.

**PPD +ve:

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Induration of 5 mm and more is considered positive in:

- Immunosuppressed individuals (For example, long term steroids receiving the equivalent of prednisone ≥15 mg/day for ≥1 month, immunosuppressant drugs, etc.)
- · HIV infected individuals.
- · Recent contact with active TB patients.
- · Prior tuberculosis signs on chest radiograph such as fibrotic changes.
- Organ transplant patients

An induration of 10 mm or more is considered positive in:

- Immigrants from endemic/high prevalence countries in the last 5 years.
- · High-risk area employees and residents. For example, prisons, nursing homes, and homeless shelters.
- · Injection drug abusers.
- Mycobacteriology laboratory professional
- Children less than four years of age.
- Chronic medical conditions that increase the risk of tuberculosis include diabetes, kidney failure, malignancy, etc.
- · Infants/Children/adolescents exposed to high-risk categories.

An induration of 15 mm or more is considered positive in:

- Always considered positive in any person. Healthy individuals without any risk factors for TB.
- Patients who do not meet any of the above criteria[8]

