## **Medical Quiz**

# **Medical Quiz: Images**

Rahim MA<sup>a</sup>, Samad T<sup>b</sup>, Haque WMM<sup>c</sup>

A 52-year-old diabetic man presented with 5-day history of fever, left flank pain and vomiting. He was mildly anemic, febrile with a temperature of  $103^{0}$ F, pulse 104/min and blood pressure of 140/80 mm Hg. He had left renal angle tenderness.

Random blood glucose at admission was 17.3 m.mol/ L. Bed side urine showed glucose ++ and traces of albumin. He had neutrophil leukocytosis (total white cells 23,400/cmm with 85% neutrophils) with mild (BIRDEM Med J 2016; 6(2): 139)

reduction in hemoglobin and normal platelets. Erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP) were raised. Urine routine examination showed plenty of pus cells/HPF and red cells 4-8/HPF. Urine and blood cultures and renal function tests including electrolytes were requested. Here is his noncontrast computed tomography (CT) scan of abdomen. Mention abnormal radiological findings? What is your diagnosis?

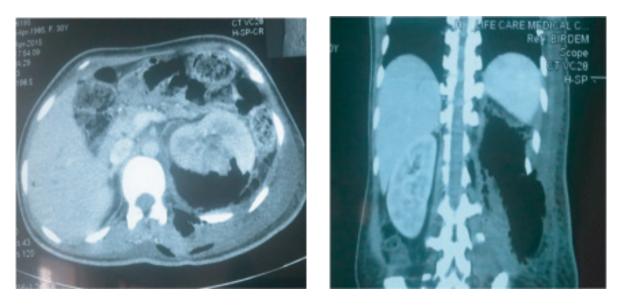


Figure- 1: Non-contrast CT scan of abdomen (axial and coronal sections)

#### **Author Informations**

- a. Muhammad Abdur Rahim, Assistant Professor, Department of Nephrology, BIRDEM General Hospital, Dhaka, Bangladesh.
- b. Tabassum Samad, Junior Consultant, Department of Nephrology, BIRDEM General Hospital, Dhaka, Bangladesh.
- c. Wasim Md. Mohosinul Haque, Associate Professor, Department of Nephrology, BIRDEM General Hospital, Dhaka, Bangladesh.

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Address of correspondence: Dr. Muhammad Abdur Rahim, Assistant Professor, Department of Nephrology, BIRDEM General Hospital, Dhaka, Bangladesh. Email: muradrahim23@yahoo.com

### **Medical Quiz**

# Medical Quiz: Single Best Answer (SBA)

#### **Question No. 01**

A 55-year-old female presents with progressive incoordination. Physical examination is remarkable for nystagmus, mild dysarthria, and past-pointing on fingerto-nose testing. She also has an unsteady gait. MRI reveals atrophy of both lobes of the cerebellum. Serologic evaluation reveals the presence of anti-Yo antibody. Which of the following is the most likely cause of this clinical syndrome?

A. Non-small cell cancer of the lung

- B. Small-cell cancer of the lung
- C. Breast cancer
- D. Non-Hodgkin's lymphoma
- E. Colon cancer

### Question No. 02

A 56-year-old man with a history of hypertension and cigarette smoking is admitted to the intensive careunit after 1 week of fever and nonproductive cough. Imaging shows a new pulmonary infiltrate, and urine antigen test for Legionella is positive. Each of the following is

likely to be an effective antibiotic except

- A. Azithromycin
- B. Aztreonam
- C. Levofloxacin
- D. Tigecycline
- E. Trimethoprim/sulfamethoxazole

#### **Question No. 03**

A 30-year-old female is seen in the clinic before undergoing an esophageal dilation for a stricture. Her pastmedical history is notable for mitral valve prolapse with mild regurgitation. She takes no medications and is allergic to penicillin. Her physician should recommend which of the following? A. Clarithromycin 500 mg PO 1 h before the procedure

- B. Clindamycin 450 mg PO 1 h before the procedure
- C. Vancomycin 1 g intravenously before the procedure

D. The procedure is low-risk, and therefore no prophylaxisis indicated.

E. Her valvular lesion is low-risk, and therefore noprophylaxis is indicated.

#### Question No. 04

A 72-year-old male develops acute renal failure after cardiac catheterization. Physical examination is notable for diminished peripheral pulses, livedo reticularis, epigastric tenderness, and confusion. Laboratory studies include (mg/dL) BUN 131, creatinine 5.2, and phosphate9.5. Urinalysis shows 10 to 15 white blood cells (WBC), 5to 10 red blood cells (RBC), and one hyaline cast perhigh-power field (HPF). The most likely diagnosis is

A. Acute interstitial nephritis caused by drugs

B. Rhabdomyolysis with acute tubular necrosis

C. Acute tubular necrosis secondary to radiocontrast exposure

- D. Cholesterol embolization
- E. Renal arterial dissection with prerenal azotemia

#### **Question No. 05**

Patients taking which of the following drugs should be advised to avoid drinking grape fruit juice?

- A. Amoxicillin
- B. Aspirin
- C. Atorvastatin
- D. Prevacid
- E. Sildenafil

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