SALMONELLOSIS

Simple choice

- 1. Name the disease in which the antibiotics will be given parenterally:
- A. Shigellosis
- B. Salmonellosis (generalized form)
- C. Staphylococcal enterocolitis
- D. Rotavirus infection
- E. Cholera
- 2. Exclude the contraindicated medicines for young children with salmonellosis:
- A. Rehidron, Ringer solution
- **B.** Eubiotics
- C. Antidiarrheal, antivomitive drugs
- D. Enteral and parenteral antibiotics in generalized forms
- E. Enzymes
- 3. Specify the predominant clinical form of salmonellosis in infants:
- A. Gastritis
- B. Gastroenteritis
- C. Enterocolitis
- D. Abortive form
- E. Septic form
- 4. Identify the most common complication of salmonellosis in young children:
- A. Toxic syndrome
- B. Intestinal dismicrobism
- C. Anemia
- D. Poly lymphadenopathy
- E. Toxic hepatitis
- 5. Mark the correct statement about the hospitals strains of Salmonella
- A. They are sensitive to antibiotics
- B. They are sensitive to disinfectant solutions
- C. weakly virulent strains
- D. Persistent for a long time in a hospital environment
- E. They are conditional pathogenic

6. Mark the investigation, which confirms the diagnosis of salmonellosis, the typhoid form:

- A. Biochemical analysis of blood
- B. Radiography of the chest
- C. Bacteriological examinations
- D. Ultrasound of abdominal organs
- E. General examination of faeces (coprograma)
- 7. Select the incorrect statement regarding conditions that favor hospital outbreak of salmonellosis
- A. Lack of boxed salons (Poor patient isolation)
- B. Unjustified patients transfer from a hospital ward to another
- C. Lack of a bacteriological examination of children on the admission to hospital
- D. Washing lingerie of children with diarrhea, along with that of children without intestinal dysfunction
- E. Strict adherence to the antiepidemic regimen

- 8. Indicate the hematological changes in salmonellosis in children:
- A. Leukocytosis, neutrophilia, accelerated ESR
- B. Leukocytosis, lymphocytosis
- C. ESR unchanged
- D. Anemia
- E. Leukocytosis, eosinophilia
- 9. Select the type of cells that infiltrate the intestinal wall in salmonellosis:
- A. macrophages
- B. lymphocytes
- C. neutrophils
- D. phagocytes
- E. eosinophils

10. Characterize the digestive syndrome, characteristic for salmonellosis in toddlers: A. colitis

- B. enterocolitis
- C. gastroenteritis
- D. enteritis
- E. gastritis

11. Choose the causal agent of invasive diarrhea in infants:

- A. Rotavirus
- B. Salmonella
- C. Proteus vulgaris
- D. Enterobacter
- E. Vibrio cholera El Tor
- 12.Determine Salmonella that causes nosocomial salmonellosis in children at the current stage:
- A. Salm. enteritidis
- B. Salm. typhimurium
- C. Salm. heidelberg
- D. Salm. wirchov
- E. Salm. iawa
- 13.Determine the reason why toddlers most often get salmonellosis by contact rather than by food:
- A. The age peculiarities of the body (small doses cause severe, generalized forms)
- B. Infants are the most active Salmonella eliminators
- C. Infants will eliminate germs over a long period of time
- D. Intensive use, sometimes unjustified of antibiotics
- E. All above are true
- 14.Note incorrect statement on salmonellosis in children over 2 years:
- A. Frequent abortive and unapparent forms
- B. Mild, short-term evolution
- C. Signs of intoxication are absent
- D. Complications are exceptional
- E. Major lethality

15. Name the complications of salmonellosis in young children:

- A. Gastrointestinal bleeding
- B. Perforation of the intestine, peritonitis
- C. Prolaps of the anus
- D. Intestinal dismicrobism
- E. All those listed are true

16.Select the incorrect statement on salmonellosis in children, typhoid form:

- A. Acute onset with fever, signs of intoxication
- B. Hepatosplenomegaly
- C. Moderate or absent intestinal dysfunction
- D. Relative bradycardia
- E. Hypertension

17.Identify the incorrect statement regarding the particularities of salmonellosis in infants:

- A. Predominant gastroenterocolitic form
- B. Generalized forms occur generally in $\approx 60\%$
- C. Late recurrence during convalescence
- D. Chronic forms of Salmonellosis
- E. Complications are frequent

18.Indicate the disease that requires urgent differentiation of salmonellosis in children:

- A. Shigellosis
- B. Staphylococcal infection
- C. Klebsiellosis
- D. Campylobacteriosis
- E. Acute abdomen
- 19. Indicate the incorrect statement regarding the factors that favor the onset of salmonellosis in children:
- A. Particularities of the pathogen
- B. Early childhood
- C. Strength and responsiveness of the child
- D. Intestinal dismicrobism
- E. Nutrition of the mother

Multiple choice

- 1. Choose the necessaryantibiotics for the treatment of salmonellosis in children:
- A. Ampicillin
- B. Amoxicillin
- C. Cephalosporin
- D. Penicillin
- E. Erythromycin

2.Mark the peculiarities of the septic salmonellosis in children:

- A. Increased incidence in young children
- B. Continuous or intermittent fever
- C. Septicopyemia
- D. Benign evolution
- E. A sustainable immunity is installed

3.Select the characteristic clinical signs for salmonellosis, the typhoid form:

- A. Affects young children
- B. Serious dyspeptic phenomena
- C. Moderate intestinal manifestations
- D. Signs of sustained intoxication
- E. Hepatosplenomegaly

4.Specify the categories of children more frequently affected by septic salmonella:

- A. Newborns
- B. Premature
- C. Preschoolers
- D. Artificially fed infants
- E. School-age children

5. Select the criteria to confirm the diagnosis of salmonellosis, the subclinical form:

- A. Epidemiological data
- B. Clinical manifestation
- C. Coprograma
- D. Detection of Salmonella in stool cultures
- E. The increase titers of specific antibody

7.Select the clinical manifestations of salmonellosis in children:

- A. Catarrhal signs
- B. Repeated vomiting
- C. Predominant gastroenterocolitis
- D. Liquid stools, greenish with mucus
- E. Positive meningealsigns

8.Select the diseases for differential diagnosis of salmonellosis in infants:

- A. Escherichiosis with enteroinvasiv Esch. coli
- B. Klebsiellosis
- C. Acute appendicitis
- D. Shigellosis
- E. Intussusception

9.Specify the salmonellosis complications in children:

- A. Pneumonia
- B. Acute pancreatitis
- C. The intestinal dysmicrobism
- D. Otitis
- E. Perforation of the intestine, peritonitis

10. Characterize nosocomial salmonellosis:

- A. Produced by salmonella sensitive to disinfectants
- B. Produced by salmonella sensitive to disinfectants and antibiotics
- C. Severe evolution and generalized forms
- D. Increased lethality
- E. Affect, especially infants and newborns

11.Select the clinical signs of salmonellosis, the gastroenterocollitic form, in young children:

- A. Onset with gastroenteral syndrome, then colitis syndrome
- B. Unique rozeolic rash in 5-9 day of the disease

C. Sigmoid spasm

D. Liquid abundant stools, greenish with mucus, blood and fetid odor

E. Positive Padalca symptom

12. Characterize the stools in typical salmonellosis in children:

- A. Frequent
- B. Poor
- C. Abundant
- D. Liquids, greenish, fetid, with mucus

E. The amount of stools is gradually reduced, drops of blood appear

13. Specify the correct statements about salmonellosis, gastroenterocolithic form, in children:

- A. It is common in young children
- B. Onset with gastroenteritis, in the second and third day appears colitic syndrome
- C. Hepatosplenomegaly pronounced in onset
- D. Abdominal spastic pain, poor greenish stools, with much mucus
- E. Abdominal pain "in the belt" (upper abdominal pain that radiates into the back)
- 14. Choose the biological materials in which salmonella can be found:
- A. Faeces, vomiting mases, gastric lavage
- B. Blood, urine
- C. Contaminated food used by the patient
- D. Maternal milk
- E. Oral-pharyngeal secretions
- 15. Choose the right recommendations for the treatment of salmonellosis, in mild and medium form, in children:
- A. Gastric lavage
- B. Oral or perfusion rehydration (if necessary), continuing nutrition
- C. Symptomatic treatment
- D. Antiemetic
- E. Rectal enemas

16.Specify the right statements about the particularities of salmonellosis in infants:

- A. Predominates enterocolitic form
- B. Diarrhea and fever persist for a long time
- C. Appears meteorism, hepatosplenomegaly, diarrheal stools with mucus and blood streaks
- D. The serological test confirms the diagnosis
- E. Mild evolution without complications

17.Name the bacteria that can cause food poisoning in children:

- A. Staphylococcus
- B. Klebsiella
- C. Pneumococcus
- D. Salmonella
- E. Streptococcus

18. Choose the microorganisms that can cause invasive diarrhea in children:

- A. Shigella
- B. Salmonella
- C. Enteroinvaziv Escherichia coli
- D. Rotavirus
- E. Vibrio cholerae

19.Indicate the diagnostic criteria for the carriage Salmonella status in children:

- A. The presence of salmonellosis in the past
- B. Repeated detection of Salmonella in faeces
- C. Contact with salmonella carriers in the family
- D. Modification of the haemoleucogramma (CBC)
- E. Morphopathological changes of the intestine

20.Specify the correct statements about salmonellosis:

- A. Animals are the main reservoir of infection.
- B. Sources of infection are sick persons and Salmonella carriers.
- C. Incidence is highest in neonates and infants.
- D. Incidence is higher in adults than in children.
- E. Morbidity increases in winter-spring period.
- 21.Select the paraclinical tests useful for the differential diagnosis of salmonellosis with escherichiosis in infants:
- A. Bacteriological test of stools and vomiting masses
- B. Blood culture
- C. Immunofluorescent examination
- D. Hematocrit level
- E. Ionogramma

22.Specify the correct statements about locations of salmonella in children carriers:

- A. Joints
- B. Lungs
- C. Gall bladder
- D. Spleen
- E. Lymph nodes

23.Specify the correct statements about salmonellosis, gastric form, in children:

- A. It is common in infants
- B. Acute onset, moderate intoxication symptoms
- C. Epigastric pain, repeated vomiting, tongue covered with white deposit, low appetite
- D. Hepatosplenomegaly
- E. Moderate dehydration signs

24.Specify the correct statements about salmonellosis, gastroenteritic form in children:

- A. Is more common in older children
- B. Pronounced signs of intoxication and dehydration
- C. Diffuse abdominal pain, flatulence
- D. Liquid abundant stools, greenish, fetid
- E. Muscular defans, positive Scetkin-Bliumberg symptom

25.Specify the correct statements about salmonellosis, the typhoid form, in children:

- A. Acut onset, fever (39-40,0°C), pronounced intoxication
- B. Lightly inflated abdomen, moderate or absent intestinal dysfunction
- C. Hepatomegaly from the first days, splenomegaly from the 4th to the 6th day of the disease
- D. Purulent meningitis
- E. Bilateral pneumoniae

26.Specify correct statements about salmonellosis, septic form, in children:

- A. It meets in newborns, preterms, infants
- B. Intoxication signs are missing
- C. Fever is not characteristic
- D. Purulent-destructive outbreaks in different organs
- E. Gastrointestinal signs are missing or occur during the disease

27.Specify the location of abdominal pain in salmonellosis in children:

- A. Epigastric region
- B. Umbilical region
- C. Ileocecal region
- D. Right hypochondria region
- E. The left hypochondria region

28.Mark the affected organs in salmonellosis in children:

- A. Respiratory system
- B. Central nervous system
- C. The stomach
- D. Ileum
- E. Colon

29. Select the diseases for the differential diagnosis of salmonellosis:

- A. Cholera, escherichiosis
- B. Shigellosis
- C. Abdominal surgical diseases
- D. Acute meningitis
- E. Mumps

30. Indicate the treatment principles of salmonellosis, generalized forms:

- A. Antidiareic drugs
- B. Antiemetic
- C. Antibiotics
- D. Detoxification and rehydration treatment
- E. Immunotherapy (plasma (FFP), immunoglobulins)