HEMATOLOGY QUESTIONS

1. Isolated prolongation of the PT may be seen in each of the following patients except:

(a) Patients taking warfarin
(b) Patients with liver disease
(c) Patients with vitamin K deficiency
(d) Patients with hemophilia

2. All of the following lab findings are consistent with DIC except:

(a) Elevated fibrinogen level
(b) Decreased platelets
(c) Fragmented RBCs and anemia (d) Increased fibrin split products

3. The laboratory test which distinguishes Hemophilia A and B from von Willebrand's disease is:

(a) PTT
(b) Bleeding time
(c) PT
(d) Platelet count

4. Which of the following is effective in treating Hemophilia A, Hemophilia B and von Willebrand's disease (although not necessarily the therapy of choice)?

(a) Cryoprecipitate
(b) DDAVP
(c) Prothrombin complex
(d) Fresh frozen plasma

5. Central cyanosis may be caused by all of the following conditions except:

(a) High altitude
(b) Methemoglobinemia
(c) CHF
(d) Anatomic shunts

6. A 7-year-old white male is brought in from summer camp for evaluation of a head injury. The counselor accompanying him reports that the boy was accidentally struck in the head with a bat. The injury occurred about thirty minutes ago and according to the counselor, he now seems somewhat more lethargic. The counselor also states that the child is known to have hemophilia A. Exam reveals a frontal hematoma and a resolving hemarthrosis of the left knee. You decide to immediately administer Factor VIII concentrate to this child in whom you suspect CNS bleeding. The most appropriate dose of Factor VIII concentrate is:

(a) 18 units/kg
(b) 26 units/kg
(c) 50 units/kg
(d) Cannot be determined from the information given.

7. A 40-year-old female presents with easy bruising, gingival bleeding when she brushes her teeth and menorrhagia. Exam reveals multiple purpuric lesions that are particularly prevalent on the lower extremities but there is no active bleeding. Lab findings include a platelet count of 25,000, bleeding time of 11 minutes, a hemoglobin of 12.8, a BUN and creatinine of 15/ 0.8 and a normal PT (INR)/PTT. The most appropriate initial therapy for this patient is:

(a) Platelet transfusion
(b) Plasmapheresis
(c) IV IgG
(d) Immediate splenectomy