

# **GIT EMERGENCIES**

1. The most common cause(s) of oropharyngeal (transfer) dysphagia is/are:
  - (a) Obstructive lesions
  - (b) Spasm
  - (c) Neuromuscular disorders and inflammatory lesions
  - (d) Carcinoma
2. The most common area for an esophageal foreign body to lodge in an adult is the:
  - (a) Aortic arch (T4)
  - (b) Cricopharyngeal muscle (C6)
  - (c) Lower esophageal sphincter/diaphragmatic hiatus (T10)
  - (d) Tracheal bifurcation (T6)
3. Which of the following is the most appropriate therapy for a button battery lodged in the esophagus?
  - (a) Observation
  - (b) Removal with a Foley catheter
  - (c) IV glucagon
  - (d) Removal via endoscopy
4. What is the most likely diagnosis in patients with abdominal pain that awakens them at night and is relieved by food intake and ingestion of antacids?
  - (a) Duodenal ulcer
  - (b) Myocardial ischemia
  - (c) Gastric ulcer
  - (d) Perforated peptic ulcer
5. The most common cause of small bowel obstruction is:
  - (a) Neoplasms
  - (b) Hernias
  - (c) Adhesions
  - (d) Gallstones
6. Unlike small bowel obstruction due to other causes, an important therapeutic modality in the treatment of small bowel obstruction due to Crohn's disease is:
  - (a) Administration of antibiotics
  - (b) NG suction
  - (c) Administration of steroids
  - (d) IV hydration and correction of electrolyte imbalance
7. A patient presents with the complaint of slight hematochezia and intense rectal pain with bowel movements that lingers for several hours and then resolves. The most likely diagnosis is:
  - (a) Internal hemorrhoids
  - (b) Anal fissure
  - (c) Thrombosed external hemorrhoid
  - (d) Perirectal abscess

8. An adolescent presents with fever, crampy abdominal pain and watery diarrhea. Physical exam reveals exquisite RLQ tenderness and a wet mount of the stool reveals WBCs. The most likely organism responsible for this presentation is:

- (a) *Yersinia enterocolitica*
- (b) *Shigella*
- (c) *Clostridium perfringens*
- (d) *Vibrio parahaemolyticus*

9. A 50-year-old male with a history of chronic alcoholism presents with hema-  
temesis. The bleeding followed an episode of violent and repeated vomiting. It was moderate in quantity and associated with pain on swallowing, but has resolved on its own. The diagnostic study of choice for evaluating this patient is:

- (a) A CXR
- (b) A barium esophagogram
- (c) A CT of the chest
- (d) Endoscopy

10. An 8-year-old patient presents with a foreign body sensation in his throat and relates that he "accidentally swallowed" a quarter a couple of hours prior to presentation. The P A view of the chest reveals the flat surface of the coin. Where is the coin located?

- (a) In the esophagus
- (b) In the trachea
- (c) Unable to tell from the information given

11. All of the following types of viral hepatitis may be associated with the development of a chronic infectious state except:

- (a) Hepatitis B
- (b) Hepatitis C
- (c) Hepatitis delta
- (d) Hepatitis E

12. The most accurate study for confirming diagnosis of acute cholecystitis is:

- (a) A CT scan of the abdomen
- (b) Biliary nuclear scan (HIDA, DISIDA)
- (c) Abdominal ultrasonography
- (d) Plain films of the abdomen

13. The majority of all acute episodes of diarrhea are caused by:

- (a) Viruses
- (b) Enterotoxin-producing bacteria
- (c) Invasive bacteria
- (d) Parasites

14. The finding of which of the following on plain abdominal films is strongly suggestive of mesenteric infarction.

- (a) Ileus
- (b) Pneumatosis intestinalis
- (c) Gasless abdomen

(d) Sentinel loop

15. Work-up of an elderly patient who presents with severe abdominal pain reveals a diagnosis of nonocclusive mesenteric ischemia. In the absence of peritonitis/necrotic bowel, definitive therapy for this patient consists of:

- (a) Systemic heparinization
- (b) Urokinase infusion
- (c) Intra-arterial papaverine infusion
- (d) Exploratory laparotomy

16. In a patient with acute pancreatitis, which of the following lab reports is most likely to be associated with the highest mortality rate according to Ranson's criteria?

- (a) Amylase 800, SGOT(AST) 300, WBCs 3000
- (b) Lipase 1100, SGOT(AST) 350, WBCs 17,000
- (c) LDH 300, SGPT 200, glucose 50
- (d) LDH 400, glucose 400, WBCs 18,000

17. Which of the following lab findings is not consistent with a diagnosis of alcoholic hepatitis?

- (a)  $AST > ALT$
- (b) AST and ALT levels in the thousands
- (c) Prolongation of the PT
- (d) Elevation of bilirubin and alkaline phosphatase