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1. Outcome of hydropic dystrophy of organ parenchyma cells:
-coagulative necrosis
-granular dystrophy
-hyaline drop dystrophy
+colliquative necrosis
-reverse development
2. In the epithelium of the convoluted tubules of the kidneys with
hyperproteinemia with proteinuria develops:
-carbohydrate dystrophy
-horny dystrophy
+hyaline drop dystrophy
-glycogen dystrophy
-granular dystrophy
3. The liver is enlarged, of a densely elastic consistency, with a
smooth surface, a rounded edge, on a section of a clay-yellow color.
These changes correspond to:
+alcoholic liver damage
-chronic venous plethora
-hydropic dystrophy of the liver
-viral hepatitis B
4. The outcome of fibrinoid necrosis of collagen fibers and the main
substance of the connective tissue:
+hyalinosis
-apoptosis
-mucoid swelling
-plasma impregnation
-amyloidosis
5. Hyalinosis of small arteries and arterioles of the kidneys,
retina, brain are the signs of:
-Horton's temporal arteritis
-atherosclerosis
-gout
+diabetes
-nodular periarteritis
6. Excessive apoptos is occurs when:
-hyperplastic processes
+HIV infection
-autoimmune diseases
-tumor growth
7. Croupous inflammation of the mucous and serous
membranes, asarule, endswith:
+restitution of damage dtissues
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-theformation of ulcers
-scarformation
-substitution of damaged tissues
8. Cachexia occurs due to:
+hyperthyroidism
-basophilic pituitary adenoma
-adrenal corticosteroma
-eunuchoidism
-hypothyroidism
9. The necrosis of a group of tissue cells and entire organs in
response to damage by exogenous and endogenous factors in a living
organism is called:
-apoptosis
-sclerosis
+necrosis
-amyloidosis
-mutilation
10.A heart attack will lead to the sudden death of the patient:
-thyroid gland
-liver
-spleen
+the brain
-kidneys
11. Apoptosis is a type of cell death in:
+hydronephrosis
-wet gangrene
-lung infarction
-osteomyelitis
-the development of an abscess
12. Ascites is called:
+accumulation of edematous fluid in the abdominal cavity
-hemorrhage in the abdominal cavity
-accumulation of inflammatory exudate in the abdominal cavity
-swelling of the tissue of the body
-accumulation of edematous fluid in the chest cavity
13. The accumulation of edematous fluid in the chest cavity is
called:
-ascites
-hydropericardium
+hydrothorax
-anasarca
-hydrocele
14. Morphological manifestation of acute left ventricular heart
failure is:
-brown induration of the lungs
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-nutmeg liver
-cyanotic induration of the spleen, kidneys
-swelling of the lower extremities
+pulmonary edema
15.Bleeding is called:
+the release of blood from the cavity of the heart, vessel into the
environment
-the exit of blood from the cavity of the heart, a vessel with its
accumulation in the tissue
-destruction of tissue elements under the action of blood cells
-decrease in the amount of blood in the body
-decrease in the number of erythrocytes in the blood
16. Hemorrhage is called:
-the release of blood from the cavity of the heart, vessel into the
environment
+the exit of blood from the cavity of the heart, a vessel with its
accumulation in the tissue
-destruction of tissue elements under the action of blood cells
-decrease in the amount of blood
-stopping the blood flow
17. Shortness of breath and cough with brown sputum with stenosis of
the opening of the mitral valve of the heart are due to:
-pneumosclerosis
-lung infarction
-pulmonary edema
-hemochromatosis of the lungs
+brown induration of the lungs
18. Thrombosis is called:
-increased blood clotting
-increased activity of the anticoagulant system
+intravital blood coagulation in the lumen of the vessel or the
cavities of the heart
-post-mortem blood coagulation in the lumen of the vessel or the
cavities of the heart
-circulation in the blood of particles that are not found under
normal conditions
19. Embolism is:
+blockage of blood vessels by particles circulating in the blood or
lymph that are not normally found
-intravital blood coagulation in the lumen of the vessel or the
cavities of the heart
-increased activity of the coagulation system
-increased activity of the anticoagulant system
-circulatory disorders
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20.Local factor contributing to the formation of a thrombus:

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-increased blood clotting
+damage to the vascular wall
-anemia
-changes in blood composition
-thrombocytosis
21. Inflammation is called:
+a complex local vascular-mesenchymal reaction to damage, aimed at
recognizing, destroying and removing the damaging agent from the body
-a pathological process, which is based on a violation of tissue
(cellular) metabolism, leading to structural changes
-genetically programmed cell death in a living organism
-replacement of necrotic masses with connective tissue
-a pathological process characterized by unrestrained, uncontrolled
growth
22. The central cell of productive inflammation is:
-leukocyte
-monocyte
+macrophage
-B-lymphocyte
-fibroblast
23. Exposure to viruses causes the following changes in the organs of
immunogenesis:
-sinus histiocytosis, hyperplasia of the centers of reproduction of
the follicles of the lymph nodes, plasmacytic transformation of
lymphocytes, myeloid metaplasia
+sinus-histiocytosis, hyperplasia of the paracortical zones of the
lymph nodes, hyperplasia of the periarterial zones of the pulp of the
spleen
-reduction of lymphoid follicles in the spleen and lymph nodes, the
absence of reproduction centers
-reduction of lymphoid follicles in the spleen and lymph nodes,
hyperplasia of paracortical zones in the lymph nodes.
24. The circulation of immune complexes in the blood, the
participation of complement, the development of exudative
inflammation and the slow development of reparative processes are
characteristic of:
-effects on tissues of effector cells (killer effect of lymphocytes)
+type 3 hypersensitivity reaction
-antibody-dependent cytotoxicity reaction
-anaphylaxis reaction
-delayed-type hypersensitivity reaction
25. Cause of general atrophy (cachexia):
-bulimia
-adrenal corticosteroma
-taking prednisolone
+tuberculosis
-type 2 diabetes
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26. The transition from one type of tissue to another within the same
histotype is called:
-hypoplasia
-aplasia
-desmoplasia
+metaplasia
-dysplasia
27. The first metastases in cancer appear:
-in the liver
+in the lymph nodes
-in the lungs
-in the brain
-in the bones
28. Type of chronic leukemia:
-monoblastic
+lymphocytic
-undifferentiated
-myeloid
-lymphoblastic
29. Atherosclerotic plaques form:
-in the endothelium
+in the inner layer
-in the medial layer
-in the adventitial sheath
-in all layers
30. An increase in the lipid core, tearing of the tire, hemorrhage,
inflammatory infiltration correspond to:
-atheromatous plaque
+unstable plaque
-atheromatous ulcer
-fibrous plaque
-liposclerosis
31. The most common complication of the cerebral form of
atherosclerosis:
+ischemic stroke
-meningitis
-encephalitis
-hydrocephalus
-encephalomyelitis
32. Focal expansion (protrusion) of the vessel wall:
+aneurysm
-arteriosclerosis
-coarctation
-vasculitis
-angiomatosis
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33. The most common cause of death in patients with myocardial
infarction in the first hours of the disease:
+arrhythmias
-rupture of the left ventricle
-cardiogenic shock
-heart failure
-pulmonary edema
34. Morphological features characteristic of systemic progressive
sclerosis:
+sclerosis, skin hyalinosis, basal pneumofibrosis
-acquired defects of the mitral valve
-rheumatic nodules, myocarditis
-chorea, polyserositis
-polyarthritis, joint deformity.
35.Mitral stenosis develops:
-left ventricular myocardial hypertrophy
+right ventricular myocardial hypertrophy
-dilatation of the left ventricle
-narrowing of the cavity of the left atrium
-a sharp expansion of the borders of the heart to the left
36. The most correct definition of the disease "bronchial asthma":
-an infectious disease in which attacks of expiratory dyspnea are
observed, with impaired bronchial patency
+chronic recurrent inflammatory disease of the lungs, characterized
by increased excitability of the bronchial tree in response to
various stimuli and leading to paroxysmal constriction of the airways
-a pathological process characterized by cough and sputum for at
least 3 months for 2 years
-increased airiness of the lung tissue
-persistent expansion of the bronchi
37. Peripheral cancer is most often complicated by:
-hyalinosis and petrification of the pleura
-fibrinouspleuropneumonia
+hemorrhagic pleurisy
-emphysema
-pneumosclerosis
38. Histological signs of reflux esophagitis in endoscopic biopsies:
-koilocytosis of squamous epithelium cells (signs of HPV infection),
formation of papillomas
+erosions and ulcers of the mucous membrane, cylindricmetaplasia of
the squamous epithelium
-plethora, basal cell hyperplasia
-mucosal candidiasis, acute erosions
-adhesion of Helicobacter pylori to epitheliocytes, catarrh
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39. Adenocarcinoma of the esophagus most often occurs with columnar
cell metaplasia of the squamous epithelium of the esophageal mucosa:
-gastric (cardia- type
-intestinal type
+gastrointestinal type
-fund type
-pancreatic type
40. The most common pathogenetic form of chronic gastritis:
-autoimmune gastritis type A
+infectious gastritis type B
-antral gastritis
-total gastritis
-fundic gastritis
41. Histological signs of Helicobacter pylori gastritis:
+predominant localization in the antrum, leukocyte infiltration of
the mucous membrane with the formation of erosions
-predominant localization in the fundus, hyperplasia and hypertrophy
of parietal cells
-pronounced atrophy of the parietal and chief cells of the fundus
-the presence of bile on the surface of the mucous membrane of the
pyloric part of the stomach, atrophy of the mucous membrane
42.A peptic ulcer is caused by:
+aggressive action of gastric juice
-hypoxia due to circulatory disorders
-toxins
-druas
-microbes
43. Damage to the esophagus, stomach and intestines, deep slit-like
ulcers, epithelioid cell granulomas with Pirogov-Langhans giant cells
without necrosis are characteristic of:
-nonspecific ulcerative colitis
+Crohn's disease
- amoebiasis
-chronic dysentery
-salmonella
44. The most common localization of cancer in the colon:
+rectum
-sigmoid
-blind
-transverse colon
-appendix
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45. Signs of nephrotic syndrome:
-proteinuria less than 3 g/day, hematuria, uremia, arterial
hypertension
-hematuria (unaltered erythrocytes), proteinuria more than 3 q/day,
azotemia
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+proteinuria more than 3.5 g/day, hypoproteinemia, edema,
hyperlipidemia
-proteinuria less than 3 g/day, leukocyturia, arterial hypertension
-arterial hypertension, lipiduria, leukocyturia
46.Pyelonephritis, hydronephrosis - complications:
-glomerulonephritis
+nephrolithiasis
-renal amyloidosis
-Goodpasture's syndrome
-arterioloscleroticnephrosclerosis
47. Acromegaly, gigantism - manifestations:
-thyrotropic pituitary adenoma
-corticotropic pituitary adenoma
-gonadotropic pituitary adenoma
-pituitary prolactinomas
+somatotropic pituitary adenoma
48.Clinical and morphological form of sepsis:
-typhoid
-odontogenic
-collibacillary
+subacute infective endocarditis
-surgical sepsis
49. The main cells of the inflammatory infiltrate in the valve in
acute infectious polyposis-ulcerative endocarditis:
-lymphocytes
+neutrophilic leukocytes
-plasma cells
-macrophages
-erythrocytes
50. The septic spleenis characterized by:
+soft, enlarged, thepulpscrapes
-size reduction
-dense, red
-dense, brown
-soft, reduced in size
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