Name : Abdullah

I.d : 14724

Submitted to : Adnan Ahmad

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**Section A**

1. Two students of MLT are talking about the use of cholesterol in food one says its good to have cholesterols in food the other said use of more cholesterol is not good for our health, they both asked from his class teacher and he replied “having high triglyceride levels in your blood can make you more likely to have \_\_\_\_\_**C**\_\_\_\_
2. Arthritis
3. Feet infections
4. Heart disease
5. Beri Beri
6. Focal segmental glomerulosclerosis is a disease that scars the\_\_**B**\_\_\_
7. Bowman’s capsule
8. Glomeruli
9. Pancreases
10. Liver
11. Minimal change disease **“MCD”** is the most common cause of nephrotic syndrome in\_\_**C**\_\_\_
12. Women
13. Men
14. Children
15. Aged
16. The main signs or symptoms make up nephrotic syndrome is/are\_\_\_\_**D**\_\_\_\_\_\_
17. Proteinuria
18. Hyperlipidemia
19. Hypoalbuminemia
20. All of the above
21. To diagnose a patient nephrotic syndrome, you should go for? **\_\_\_D\_\_**
22. Urine Test
23. Blood Test
24. Biopsy
25. All of the above
26. Your class teacher gives you a history of patient such that a patient having yellow skin and body fluid that is the by-product of RBCs breakdown, Red blood cells typically survive for about 120 days before the body breaks them down, an increased breakdown of RBCs made the skin and body fluids colour yellow, this is due to\_\_\_\_\_\_**A**\_\_\_\_
27. Bilirubin
28. Cytokines
29. Alpha blockers
30. Side effects of NSAIDs
31. New-borns with jaundice are carefully monitored and generally improve within \_\_\_**B**\_\_\_\_hours.
32. 04 to 07
33. 10 to 12
34. 12 to 24
35. 48 to 72
36. All are true regarding Bilirubin Test Except?\_\_\_\_**B\_\_\_**
37. Is used to detect an increased level in the blood
38. Determine the cause of jaundice
39. Cannot diagnose blockage of the bile ducts.
40. Help diagnose conditions
41. A patient of malabsorption syndrome is admitted in LRH ward and you have to test the condition, of all the possible diagnostics test the most reliable test of malabsorption is\_\_\_\_\_\_\_**A**\_\_\_\_\_
42. Stool test
43. Blood test
44. Berth test
45. Imaging
46. The Urine Albumin to Creatinine Ratio (UACR) is a test that estimates how much albumin is excreted in a \_\_**B**\_\_\_\_period without requiring patients to collect urine for a whole day.
47. 12-hour
48. 24-hour
49. 48-hour
50. 72-hour
51. Which option are not **true** about kidney functions?**\_\_B\_\_\_\_**
52. Filter waste materials and toxin from the blood
53. Production of vitamin E
54. Red Blood Cells (Erythropoietin) formation
55. Synthesize hormones that regulate blood pressure
56. Structural and Functional unit of the kidney is?\_\_\_**C**\_\_\_\_\_
57. Renal corpuscle
58. Renal tubule
59. Nephron
60. All of the above
61. Normally: The pH of **urine\_\_C\_\_\_**
62. acidic
63. alkaline
64. varies from acidic to alkaline
65. varies from alkaline to acidic
66. Uric acid is the end product of …**C**……. catabolism.
67. Thymine
68. Pyramidin
69. Purine
70. Urea
71. …**A**….is known as the good cholesterol.
72. HDL
73. LDL
74. VLLDL
75. triglycerides

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Section - B\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Ans No 1 – Proteinuria :**

It is the presence of abnormal quantity of protein in

 the urine, which may indicate damage to the kidneys.

**Types of Proteinuria :**

* Glomerular proteinuria
* Tubular proteinuria
* Overload proteinuria
* Post renal proteinuria

**Sign and symptoms of proteinuria:**

* Vomiting
* Nausea
* Foamy urine
* Shortness of breath
* Less concentration level

**Clinical Risk factors for proteinuria:**

* Diabetes
* Hypertension
* Metabolic syndrome
* Autoimmune disease
* Urinary tract infection
* Urinary stones
* Lower urinary tract obstruction

**Sociodemographic risk factors for proteinuria :**

* Old age
* Exposure to chemical or environmental hazards
* Low income or education

**Lab diagnosis for proteinuria :**

**P**roteinuria is diagnosed through a urine test . The patient provide a urine sample, which is examined in a lab . They use a “Dipstick” a thin plastic stick with chemicals on the tip to test part of the urine sample right away.

If too much of any substance is in the urine, the chemical tip changes colour.

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**Ans No 2 - Ketonuria :**

When the concentration of ketone bodies significantly increased in plasma, they

Appear in urine. The condition is called ketonuria.

 **Cause :**

Excessive ketone bodies are produced mainly in two condition:

a ) Starvation

b ) uncontrolled diabetes mellitus

c ) Digestive disturbance

d ) Dietary imbalance

 **Symptoms:**

* Thirst
* Regular urination
* Nausea
* Dehydration
* Heavy breathing
* Dilated pupils
* Breath may also smell of fruit

**Phenylketonuria :**

Phenylketonuria is a genetic disorder where the body’s enzyme, phenylalanine hydroxylase (PAH) is missing or malfunctioning so that it cannot properly break down the amino acid, phenylalanine ( Phe).

 **Symptoms of phenylketonuria :**

* Learning disabilities
* Mental retardation
* Termers or jerky movement of limbs
* Skin rash epeczema
* Epilepsy
* Hyperactivity
* Behavioral issues

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**Ans No 3 – Possible causes of Cushing’s syndrome :**

 **Endogenous cause : Exogenous cause:**

Overproduction of cortisol (glucocorticoid) caused by either:. Taking medicines

 **|** **|**  **|** containing

**Pituitary tumor Adrenal tumor, Other or unknown causes,** glucocorticoids,

(Cushing’s disease), 15% of Endogenous 15% of Endogenous. Such as

70% of Endogenous cases. Cases Hydrocortisone

 Cases

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