

قائمة الاسئلة 62:50 19-2025-2025

علم الادوية التطبيقية 2-الثالث-التخدير - كلية الطب والعلوم الصحية-درجة الامتحان (70)

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- 1) Which ion is essential for the release of acetylcholine (ACh) from the presynaptic terminal?
 - 1) Sodium (Na⁺)
 - 2) Potassium (K⁺)
 - 3) + Calcium (Ca²⁺)
 - 4) Chloride (Cl⁻)
- 2) Why is succinylcholine contraindicated in burn patients?
 - 1) Risk of malignant hyperthermia
 - 2) + Hyperkalemia due to upregulation of extrajunctional ACh receptors
 - 3) Increased risk of bradycardia
 - 4) Reduced efficacy
- 3) What is the effect of botulinum toxin at the neuromuscular junction?
 - 1) Inhibits AChE
 - 2) + Blocks ACh release
 - 3) Blocks ACh receptors
 - 4) Causes sustained depolarization
- 4) Which receptor type is found at the motor endplate?
 - 1) Muscarinic M2
 - 2) + Nicotinic N2
 - 3) Nicotinic N1
 - 4) Adrenergic β2
- 5) What is the primary mechanism of action of neostigmine?
 - 1) Blocks ACh receptors
 - 2) Inhibits ACh release
 - 3) + Inhibits acetylcholinesterase
 - 4) Activates nicotinic receptors
- 6) The primary elimination pathway for rocuronium is through:
 - 1) + Hepatic metabolism
 - 2) Renal excretion
 - 3) Pseudocholinesterase
 - 4) Hofmann elimination
- 7) Which of the following is a significant risk when using succinylcholine?
 - 1) Hypokalemia
 - 2) + Hyperkalemia
 - 3) Bradycardia
 - 4) Histamine release
- 8) Which of the following neuromuscular blocking agents cause fasciculations?
 - 1) + Succinylcholine
 - 2) Rocuronium
 - 3) Vecuronium
 - 4) Both B and C
- 9) Succinylcholine should be avoided in patients with which of the following conditions?
 - 1) Hypokalemia
 - 2) Tachycardia
 - 3) Asthma
 - 4) + Burns



- 10) Which of the following is a characteristic side effect of rocuronium?
 - 1) Histamine release
 - 2) Bradycardia
 - 3) Increased intracranial pressure
 - 4) + Tachycardia
- Which of the following non-depolarizing neuromuscular blockers undergoes Hoffman elimination and ester hydrolysis?
 - 1) + Atracurium
 - 2) Rocuronium
 - 3) Vecuronium
 - 4) Pancuronium
- 12) What is the recommended treatment for bradycardia induced by succinylcholine?
 - 1) Sodium bicarbonate
 - 2) + Atropine
 - 3) Magnesium sulfate
 - 4) Insulin and glucose
- Succinylcholine causes fasciculations before muscle paralysis. What is the underlying cause of these fasciculations?
 - 1) Hypercalcemia
 - 2) + Depolarization of the neuromuscular junction
 - 3) Inhibition of acetylcholinesterase
 - 4) Hyperkalemia
- What is the most appropriate intervention for a patient experiencing malignant hyperthermia after receiving succinylcholine?
 - 1) Administration of sodium bicarbonate
 - 2) + Rapid cooling and administration of dantrolene
 - 3) Intravenous fluids and vasopressors
 - 4) Increased oxygen administration and deep sedation
- 15) What effect does succinylcholine have on heart rate?
 - 1) It causes a sustained increase in heart rate
 - 2) + It causes bradycardia
 - 3) It has no effect on heart rate
 - 4) It causes a variable heart rate response
- 16) Which of the following factors may prolong the effects of atracurium?
 - 1) Hyperkalemia
 - 2) Alkalosis
 - 3) + Hypothermia
 - 4) Hyperthyroidism
- 17) Which of the following side effects is most commonly associated with atracurium administration?
 - 1) Tachycardia
 - 2) + Bronchospasm
 - 3) Hypertension
 - 4) Hypoglycemia
- 18) Which of the following conditions may reduce the metabolism of atracurium?
 - 1) Hypercapnia
 - 2) Renal failure
 - 3) Hypotension
 - 4) + Liver failure
- 19) Which of the following is a major metabolite of atracurium?



- 1) Suxamethonium
- 2) + Laudanosine
- 3) Norepinephrine
- 4) Acetylcholine
- 20) What is the mechanism of reversal for atracurium-induced neuromuscular blockade?
 - 1) + The effects reverse spontaneously once the drug is eliminated
 - 2) The drug can be reversed with a specific antidote
 - 3) Reversal requires the use of neostigmine alone
 - 4) Reversal requires the combination of atropine and neostigmine
- 21) Which of the following can enhance the effects of atracurium?
 - 1) + Calcium channel blockers
 - 2) Acetylcholinesterase inhibitors
 - 3) Proton pump inhibitors
 - 4) Alpha-adrenergic blockers
- 22) Which part of a local anesthetic molecule determines its classification as an ester or an amide?
 - 1) Lipophilic group
 - 2) Hydrophilic group
 - 3) + Intermediate chain
 - 4) Protein binding site
- What is the main factor influencing the onset of action of local anesthetics?
 - 1) Lipid solubility
 - 2) + pKa of the drug
 - 3) Protein binding
 - 4) Dose administered
- 24) What is the primary mechanism of action of local anesthetics?
 - 1) Blockade of potassium channels
 - 2) Inhibition of calcium influx
 - 3) + Blockade of sodium channels
 - 4) Enhancement of GABA receptors
- 25) What is the advantage of adding epinephrine to a local anesthetic?
 - 1) Increases lipid solubility
 - 2) + Reduces systemic absorption
 - 3) Shortens onset time
 - 4) Prevents allergic reactions
- 26) What is the primary disadvantage of bupivacaine over ropivacaine?
 - 1) Duration of action
 - 2) + Cardiotoxicity
 - 3) Faster onset
 - 4) Increased potency
- 27) What is the treatment for bupivacaine-induced cardiotoxicity?
 - 1) Diazepam
 - 2) Sodium bicarbonate
 - 3) + Intravenous lipid emulsion
 - 4) Atropine
- 28) What is a serious potential side effect of metoclopramide with prolonged use?
 - 1) Hepatotoxicity.
 - 2) + Tardive dyskinesia.
 - 3) Severe diarrhea.
 - 4) Bradycardia.



- 29) Why are PPIs superior to H2 antagonists for the treatment of GERD?
 - 1) They are less expensive.
 - 2) They provide immediate symptom relief.
 - 3) + They suppress acid production more effectively and for a longer duration.
 - 4) They increase gastric motility.
- 30) Which of the following is a common side effect of chronic PPI use?
 - 1) Hypercalcemia.
 - 2) + Osteoporosis.
 - 3) Hepatic failure.
 - 4) Hyperkalemia.
- Which combination of drugs is most effective in preventing aspiration pneumonitis during anesthesia induction?
 - 1) Famotidine and diphenhydramine.
 - 2) Omeprazole and sodium bicarbonate.
 - 3) + Ranitidine and metoclopramide.
 - 4) Antacids and H1 antagonists.
- What is the most common side effect of ondansetron?
 - 1) Diarrhea
 - 2) + QT interval prolongation
 - 3) Hepatotoxicity
 - 4) Nephrotoxicity
- 33) What is a common side effect of perioperative dexamethasone?
 - 1) Hypoglycemia
 - 2) + Hyperglycemia
 - 3) QT prolongation
 - 4) Renal toxicity
- Which of the following drugs would most likely be used to treat postoperative sedation following the administration of benzodiazepines?
 - 1) Naltrexone
 - 2) + Flumazenil
 - 3) Naloxone
 - 4) Doxapram
- Which of the following agents is most likely to cause respiratory depression when used in high doses?
 - 1) Doxapram
 - 2) Naloxone
 - 3) + Ketorolac
 - 4) Clonidine