

Test according to topic 4: Management of a patient with impaired cardiac conduction

1. A 16-year-old boy developed dizziness. His heart rate is 35/min., blood pressure is 85/45 mm Hg. Heart borders are not enlarged. Heart sounds are loud and clear. ECG shows P waves disconnected from QRS complexes, dissociation and different rhythm of atria and ventricles is accompanied by varying location of P wave in relation to QRST complex. This presentation is the most characteristic of the following disease:
 - a. Atrioventricular dissociation
 - b. Sinus bradycardia
 - c. Atrioventricular block (II degree)
 - d. Extrasystole
 - e. Complete atrioventricular block (III degree)*
2. An 8-year-old girl was diagnosed with signs of Morgagni-Adams-Stokes disease that developed against the background of the III degree atrioventricular heart block. What drug should be introduced intravenously for emergency aid?
 - a. Prednisolone
 - b. Dobutamine
 - c. Atropine*
 - d. Potassium chloride
 - e. Digoxin
3. A 70-year-old man complains of weakness, dizziness, brief episodes of unconsciousness, and pain in the cardiac region. Objectively, his heart rate is 40/min., heart sounds are rhythmic, the first heart sound is muffled and significantly intensifies from time to time. Blood pressure is 180/90 mm Hg. What is the most likely cause of these hemodynamic disorders?
 - a. First-degree AV block
 - b. Sinus bradycardia
 - c. Complete block of the His left bundle branch
 - d. Bradysystolic form of ciliary arrhythmia
 - e. Third-degree AV block*
4. A patient 1 year ago had a Q wave myocardial infarction of the posterior wall of the left ventricle. For the last 2 weeks he has been suffering from daily attacks of atrial fibrillation and bradycardia episodes, accompanied by bouts of vertigo. What tactics is the most advisable in this case?
 - a. Prescription of procainamide
 - b. Prescription of amiodarone
 - c. Prescription of digoxin
 - d. Prescription of bisoprolol
 - e. Pacemaker implantation*