1. A 10-year-old boy complains of weakness, sore throat, difficult nasal breathing, and a fever of 39°C. According to the patient's medical history, it is day 4 after the onset of the disease. Objectively, the following is observed: skin pallor, edema of the face and eyelids, significantly enlarged posterior cervical lymph nodes and, to a lesser extent, submandibular, axillary, and inguinal lymph nodes. The oropharyngeal mucosa is hyperemic. The tonsils are hypertrophied and covered with a continuous plaque that can be easily removed with a spatula. Hepatosplenomegaly is observed. What is the most likely diagnosis in this case?

A. Viral hepatitis A

B. Infectious mononucleosis

C. Scarlet fever

D. Lymphogranulomatosis

E. Diphtheria

2. A 9-year-old boy is in a severe condition. His body temperature is 38-39^{0}C, he has nosebleeds and complains of pain in his bones. Objectively, the boy presents with acute pallor, hemorrhagic rash, and ulcerative necrotizing stomatitis. All the groups of lymph nodes are enlarged. The liver is +5 cm. The spleen is +4 cm. What test will be decisive for diagnosis-making in this case?

A. X-ray of the mediastinum

B. Myelogram

C. Immune complex testing

D. Abdominal ultrasound

E. Complete blood count

3. A 45-year-old man came to the hematologist with complaints of general weakness, elevated body temperature, excessive sweating, enlarged cervical lymph nodes. Objectively, his body temperature is 37.5^{0}C, the skin is pale and dry, the posterior cervical lymph nodes are dense and elastic, up to 2 cm in diameter, mobile. Hepatosplenomegaly was detected. What examination is necessary to determine the scope of the pathologic process?

A. Ultrasound of the cervical lymph nodes

B. Complete blood count

C. Abdominal X-ray

D. Computed tomography

E. Bone scintigraphy

4. An 18-year-old young man was hospitalized on the 7th day of illness with complaints of headache, general weakness, fever, and sore throat. Objectively, all the groups of lymph nodes are enlarged to 1-3 cm in diameter. Palpation shows dense, elastic, and slightly painless lymph nodes that are not matted together. Enlarged tonsils are covered with purulent plaque. The liver is +3 cm. In the blood: leukocytosis, relative lymphomonocytosis, virocytes - 15%. Make the diagnosis:

A. Adenovirus infection

B. Acute lymphocytic leukemia

C. Tonsillitis

D. Diphtheria

E. Infectious mononucleosis

5. A 12-year-old girl complains of weakness, dizziness, headache, and a fever of 38^0C. Objectively, her body temperature is 37.8^0C, her mucosa and skin are pale, her pharynx is without changes. Palpation detects submandibular and cervical lymph nodes that are enlarged to 2 cm, dense and painless. No pathological changes of internal organs were detected. Complete blood count: erythrocytes - 2.8×10^{12}/L, hemoglobin - 85 g/L, color index - 0.9, leukocytes - 10×10^9/L, eosinophils - 0%, band neutrophils - 1%, segmented neutrophils - 8%, lymphocytes - 47%, reticulocytes - 0.5%, platelets - 60×10^9/L, blast cells - 44%. What is the most likely diagnosis in this case?

A. Acute leukemia

B. Chronic lymphocytic leukemia

C. Acute erythromyelosis

D. Infectious mononucleosis

E. Lymphogranulomatosis

6. A woman addressed a doctor with complaints of increased body temperature up to $37,8^0$C and moderately sore throat for the last 3 days. Objectively: mandibular lymph nodes are enlarged up to 3 cm. Palatine tonsils are hypertrophied, covered with grey coating that spreads to the uvula and anterior pillars of the fauces. What diagnosis is most likely?

A. Agranulocytosis

B. Infectious mononucleosis

C. Oropharyngeal diphtheria

D. Oropharyngeal candidiasis

E. Pseudomembranous (Vincent's) tonsillitis

7. A 27-year-old woman came to a doctor with complaints of enlarged lymph nodes on the right side of her neck and in the axillary region, night sweats, and a fever over 38^oC. Morphological study of the biopsy material obtained from a lymph node detected Reed-Sternberg cells. What is the most likely diagnosis in this case?

A. Chronic lymphocytic leukemia

B. Malignant lymphoma

C. Lymphogranulomatosis

D. Tumor metastases in the lymphatic nodes

E. Lymph node tuberculosis

8. A 58-year-old man, a heavy drinker and smoker, came to a hospital with complaints of constant coughing and shortness of breath. Lately, he has been losing weight. Objectively, his cervical lymph nodes are enlarged and dense, the tissues above them exhibit no tension. Chest X-ray shows fibrosis of an upper pulmonary lobe and left-sided pleurisy. The pleural fluid is straw-colored, with protein levels of 52 g/L and a high lymphocyte count. Malignant cells were not detected. Inoculation of the pleural fluid produced no microbial growth one week later. Make the diagnosis:

A. Systemic lupus erythematosus

B. Bronchiectasis

C. Pulmonary tuberculosis

D. Atypical pneumonia

E. Sarcoidosis

9. A 26-year-old man complains of chills, rhinitis, dry cough, and fever up to 38^0C) Examination shows him to be in a moderately severe condition; there are small pale pink non-merging spots on the skin of his back, abdomen, and extremities. Palpation reveals enlarged occipital and axillary lymph nodes. No information about vaccination history could be obtained. What is the likely etiology of this disease?

A. Mumps virus

B. Epstein-Barr virus

C. Streptococcus

D. Rubella virus

E. Meningococcus

10. A 58-year-old man complains of weakness and tumor-like formations that appeared on the anterior surface of his neck and in the inguinal region. Palpation detects soft painless mobile cervical and inguinal lymph nodes up to 2 cm in diameter. The liver protrudes by 2 cm from the edge of the costal margin, the lower splenic pole is at the umbilical level. In blood: erythrocytes - 3.5×10^{12}/L, Hb- 88 g/L, leukocytes - 86×10^{9}/L, band neutrophils - 1%, segmented neutrophils - 10%, lymphocytes - 85%, eosinophils - 2%, basocytes - 0%, monocytes - 2%, erythrocyte sedimentation rate - 15 mm/hour, Gumprecht shadows. What is the most likely diagnosis?

A. Acute leukemia

B. Chronic lymphatic leukemia

C. Lymphogranulomatosis

D. Lymphocytic leukemoid reaction

E. Chronic myeloleukemia