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ARAMBH SERIES

SUBJECT

PHARMACOTHERAPEUTICS

**TIME-
08:00 P.M**



40 QUESTIONS WITH DETAILED EXPLANATION

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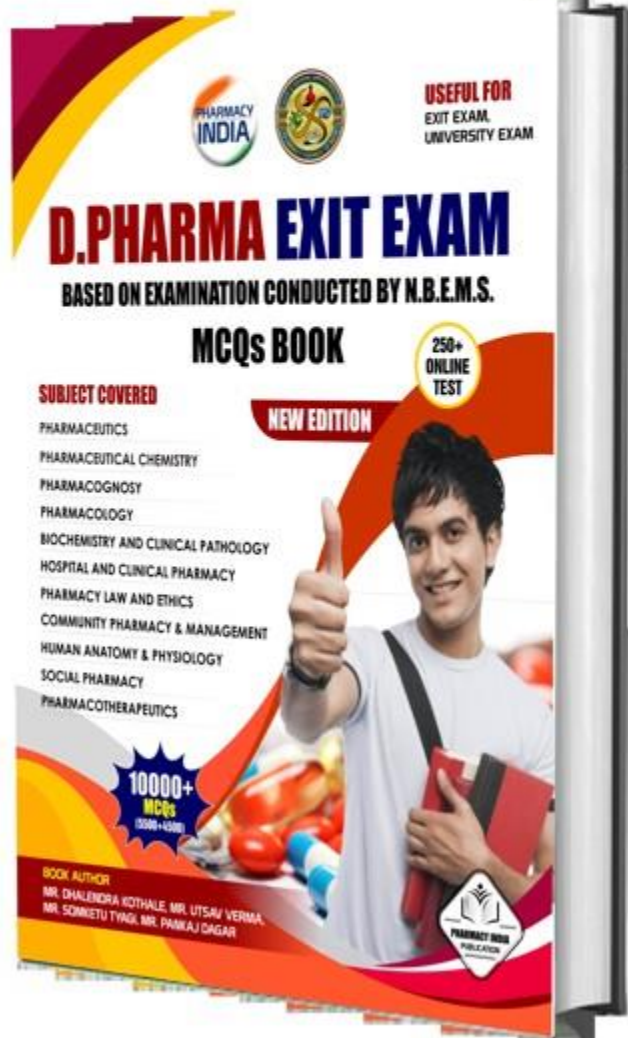
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1. What is the primary cause of antimicrobial resistance (AMR)?

- (a) Genetic microorganisms mutations in
- (b) Overuse and misuse antimicrobial agents
- (c) Lack of awareness among healthcare professionals
- (d) Environmental factors



1. What is the primary cause of antimicrobial resistance (AMR)?

- (a) Genetic microorganisms mutations in
- (b) Overuse and misuse antimicrobial agents**
- (c) Lack of awareness among healthcare professionals
- (d) Environmental factors





The primary cause of antimicrobial resistance (AMR) is the overuse and misuse of antimicrobial agents, including antibiotics. This leads to the development of resistant strains of microorganisms. While genetic mutations and other factors play a role, the misuse of these drugs is the most significant contributing factor.



2. Which of the following is an example of a bacteria resistant to multiple antibiotics

- (a) Streptococcus pneumoniae
- (b) Escherichia coli
- (c) Methicillin-resistant Staphylococcus aureus (MRSA)
- (d) Mycobacterium tuberculosis



2. Which of the following is an example of a bacteria resistant to multiple antibiotics

- (a) Streptococcus pneumoniae
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- (d) Mycobacterium tuberculosis





MRSA is a well-known example of a bacterium that is resistant to multiple antibiotics, particularly methicillin and other beta-lactam antibiotics. While the other bacteria listed can also exhibit resistance, MRSA is specifically recognized for its multi-drug resistance.



3. What role do efflux pumps play in antimicrobial resistance?

- (a) They increase the permeability of bacterial cell membranes
- (b) They reduce the concentration of antimicrobial agents within the microbial cell
- (c) They facilitate the binding of antibiotics to their target sites
- (d) They deactivate enzymes produced by bacteria



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(d) They deactivate enzymes produced by bacteria





Efflux pumps are membrane proteins that bacteria use to expel antimicrobial agents out of their cells. This reduces the intracellular concentration of the drugs, making them less effective and contributing to antimicrobial resistance. They do not increase membrane permeability, facilitate binding, or deactivate enzymes.



4. How can incomplete treatment courses contribute to antimicrobial resistance?

- (a) They increase patient compliance
- (b) They allow for the development of resistant strains
- (c) They have no impact on microbial resistance
- (d) They speed up the recovery process



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Incomplete treatment courses can lead to the survival of some microorganisms that are not fully eradicated. These surviving organisms may have or develop resistance mechanisms, leading to the emergence of resistant strains. This is a significant factor in the spread of antimicrobial resistance.



5. What is a key strategy for antimicrobial stewardship?

- (a) Overprescribing antibiotics
- (b) Underreporting of resistance patterns
- (c) Optimizing the use of antimicrobials
- (d) Promoting self-medication



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- (d) Promoting self-medication





A key strategy for antimicrobial stewardship is to optimize the use of antimicrobials, which includes prescribing the right drug at the right dose and for the appropriate duration. This helps reduce unnecessary use and combat antimicrobial resistance. The other options would counteract the goals of stewardship.



6. What is the term for the transfer of resistance genes between different species of microorganisms?

- (a) Vertical gene transfer
- (b) Diagonal gene transfer
- (c) Horizontal gene transfer
- (d) Cross-species gene transfer



6. What is the term for the transfer of resistance genes between different species of microorganisms?

- (a) Vertical gene transfer
- (b) Diagonal gene transfer
- (c) Horizontal gene transfer**
- (d) Cross-species gene transfer





Horizontal gene transfer refers to the transfer of genetic material, including resistance genes, between different species of microorganisms. This process allows for the rapid spread of antibiotic resistance among bacteria. Vertical gene transfer, in contrast, refers to the transmission of genes from parent to offspring.



7. Why is the One Health approach important in addressing AMR?

- (a) It emphasizes the use of a single antibiotic for all health conditions
- (b) It recognizes the interconnectedness of human health, animal health, and the environment
- (c) It promotes the use of high doses of antimicrobials
- (d) It encourages self-medication practices



7. Why is the One Health approach important in addressing AMR?

(a) It emphasizes the use of a single antibiotic for all health conditions

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(c) It promotes the use of high doses of antimicrobials

(d) It encourages self-medication practices





The One Health approach is important in addressing antimicrobial resistance (AMR) because it acknowledges that human health, animal health, and environmental factors are all interconnected. This holistic perspective is essential for effectively tackling AMR, as resistance can spread across these domains. The other options do not align with the goals of the One Health approach.



8. What is a consequence of antimicrobial resistance on healthcare systems?

- (a) Decreased healthcare costs
- (b) Improved patient outcomes
- (c) Need for more expensive and intensive care
- (d) Reduction in hospitalizations



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- (a) Decreased healthcare costs
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- (d) Reduction in hospitalizations





Antimicrobial resistance (AMR) can lead to treatment failures, requiring the use of more expensive and intensive care options, longer hospital stays, and the need for more complex interventions. This increases the burden on healthcare systems and can lead to higher healthcare costs overall. The other options do not accurately reflect the consequences of AMR.



9. Which factor contributes to the global spread of antimicrobial resistance?

- (a) Strict national boundaries
- (b) Limited international trade
- (c) Lack of international collaboration
- (d) Increased international travel and trade



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- (a) Strict national boundaries
- (b) Limited international trade
- (c) Lack of international collaboration
- (d) Increased international travel and trade**





Increased international travel and trade facilitate the rapid spread of antimicrobial resistance across borders, as resistant microorganisms can easily move between countries and populations. The other options would not contribute to the global spread of AMR.



10. What is a primary focus of antimicrobial resistance prevention in agriculture?

- (a) Increased antibiotics use of prophylactic
- (b) Improving animal welfare standards
- (c) Reducing vaccination programs
- (d) Minimal regulation of antibiotic use



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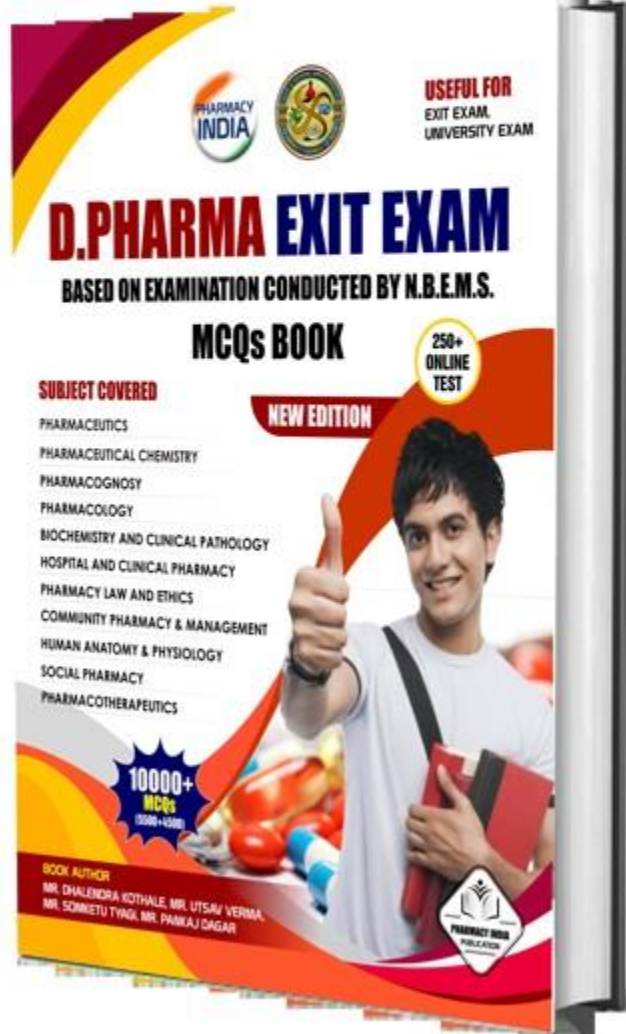


A primary focus of antimicrobial resistance prevention in agriculture is to improve animal welfare standards. This includes reducing the need for antibiotics by ensuring healthier living conditions for animals, which can decrease the incidence of disease and the subsequent use of antimicrobial agents. The other options do not align with the goal of preventing AMR.



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11. What is a common hormonal imbalance associated with PCOS

- (a) Elevated estrogen
- (b) Increased progesterone
- (c) Insulin resistance
- (d) Low testosterone



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- (a) Elevated estrogen
- (b) Increased progesterone
- (c) Insulin resistance**
- (d) Low testosterone





Insulin resistance is a common hormonal imbalance associated with polycystic ovary syndrome (PCOS). Many women with PCOS also have elevated insulin levels, which can contribute to weight gain and other symptoms. While there can be variations in hormone levels, insulin resistance is a key feature of the condition.



12. What is the primary characteristic of dysmenorrhea?

- (a) Absence of menstrual bleeding
- (b) Painful menstruation
- (c) Irregular menstrual cycles
- (d) Excessive menstrual bleeding



12. What is the primary characteristic of dysmenorrhea?

- (a) Absence of menstrual bleeding
- (b) Painful menstruation**
- (c) Irregular menstrual cycles
- (d) Excessive menstrual bleeding





Dysmenorrhea is characterized primarily by painful menstruation. It can involve cramps and discomfort during menstrual periods, distinguishing it from the other options listed.



13. When do symptoms of PMS typically occur in relation to the menstrual cycle?

- (a) During ovulation
- (b) In the luteal phase
- (c) During menstruation
- (d) In the follicular phase



13. When do symptoms of PMS typically occur in relation to the menstrual cycle?

- (a) During ovulation
- (b) In the luteal phase**
- (c) During menstruation
- (d) In the follicular phase





Symptoms of premenstrual syndrome (PMS) typically occur in the luteal phase of the menstrual cycle, which is the time between ovulation and the start of menstruation. Symptoms usually resolve with the onset of menstruation.



14. What is a non-pharmacological method commonly recommended for managing dysmenorrhea?

- (a) High caffeine intake
- (b) Hot water bottle or heating pad application
- (c) Sedentary lifestyle
- (d) Low fluid intake



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Symptoms of premenstrual syndrome (PMS) typically occur in the luteal phase of the menstrual cycle, which is the time between ovulation and the start of menstruation. Symptoms usually resolve with the onset of menstruation.



15. What is a potential complication of PCOS?

- (a) Osteoporosis
- (b) Type 1 diabetes
- (c) Infertility
- (d) Hyperthyroidism



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- (c) Infertility
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A potential complication of PCOS (Polycystic Ovary Syndrome) is Infertility. PCOS can disrupt ovulation, making it more challenging for individuals to conceive. Other complications associated with PCOS include metabolic issues, but infertility is a direct concern.



16. Which of the following is a common emotional symptom of PMS

- (a) Increased energy
- (b) Elevated mood
- (c) Irritability
- (d) Improved concentration



16. Which of the following is a common emotional symptom of PMS

- (a) Increased energy
- (b) Elevated mood
- (c) Irritability**
- (d) Improved concentration





A common emotional symptom of PMS is Irritability. Many people experience mood swings, irritability, or anxiety in the lead-up to their menstrual period.



17. Primary dysmenorrhea is typically caused by

- (a) Structural abnormalities in the reproductive organs
- (b) Infection of the uterus
- (c) Prostaglandin menstruation release
- (d) Hormonal imbalances



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- (a) Structural abnormalities in the reproductive organs
- (b) Infection of the uterus
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- (d) Hormonal imbalances





Primary dysmenorrhea is typically caused by Prostaglandin menstruation release. It involves the release of prostaglandins, which can lead to uterine contractions and associated pain during menstruation.



18. Which of the following is a common symptom of dysmenorrhea

- (a) Hot flashes
- (b) Severe abdominal cramps
- (c) Increased libido
- (d) Irregular menstrual cycles



18. Which of the following is a common symptom of dysmenorrhea

- (a) Hot flashes
- (b) Severe abdominal cramps**
- (c) Increased libido
- (d) Irregular menstrual cycles





A common symptom of dysmenorrhea is Severe abdominal cramps. These cramps are often painful and can occur before or during menstruation.



19. Which of the following is NOT a common symptom of PMS

- (a) Bloating
- (b) Joint pain
- (c) Increased energy levels
- (d) Mood swings



19. Which of the following is NOT a common symptom of PMS

- (a) Bloating
- (b) Joint pain
- (c) Increased energy levels
- (d) Mood swings





Increased energy levels is NOT a common symptom of PMS. Many people experience fatigue or mood swings rather than an increase in energy during this time.



20. Primary dysmenorrhea is usually characterized by

- (a) Pain caused by pelvic inflammatory disease
- (b) Pain associated with an underlying reproductive system disorder
- (c) Menstrual pain not associated with any other medical condition
- (d) Chronic pelvic pain unrelated to the menstrual cycle



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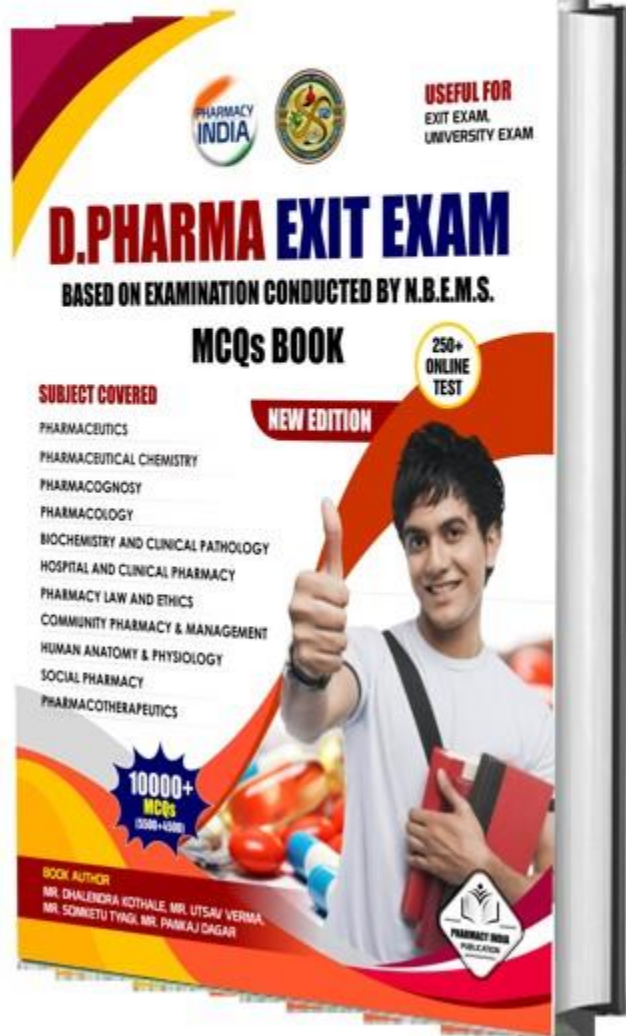


Primary dysmenorrhea is usually characterized by Menstrual pain not associated with any other medical condition. It typically occurs without any underlying reproductive system disorder.



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21. Pharmacotherapeutics refers to the study of:

- (a) Drug development and manufacturing processes
- (b) Drug interactions and adverse effects
- (c) Therapeutic use of drugs in the treatment of diseases
- (d) Pharmaceutical regulations and policies



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Pharmacotherapeutics refers to the study of Therapeutic use of drugs in the treatment of diseases. It focuses on how medications are used to treat various medical conditions.



22. The scope of pharmacotherapeutics includes:

- (a) Diagnosis of diseases
- (b) Prevention of diseases
- (c) Treatment of diseases
- (d) All of the above



22. The scope of pharmacotherapeutics includes:

- (a) Diagnosis of diseases
- (b) Prevention of diseases
- (c) Treatment of diseases
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The scope of pharmacotherapeutics includes All of the above. It encompasses the diagnosis, prevention, and treatment of diseases through the use of medications.



23. The primary objective of pharmacotherapeutics is to:

- (a) Maximize pharmaceutical sales
- (b) Optimize patient outcomes
- (c) Minimize drug costs
- (d) Improve healthcare infrastructure



23. The primary objective of pharmacotherapeutics is to:

- (a) Maximize pharmaceutical sales
- (b) Optimize patient outcomes**
- (c) Minimize drug costs
- (d) Improve healthcare infrastructure





The primary objective of pharmacotherapeutics is to Optimize patient outcomes. The focus is on using medications effectively to improve the health and well-being of patients.



24. Rational use of medicines refers to:

- (a) Using medications in a manner that maximizes therapeutic benefit and minimizes harm
- (b) Using the latest and most expensive medications available
- (c) Following treatment guidelines strictly without any modifications
- (d) Promoting the use of alternative therapies over pharmaceuticals



24. Rational use of medicines refers to:

(a) Using medications in a manner that maximizes therapeutic benefit and minimizes harm

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(c) Following treatment guidelines strictly without any modifications

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Rational use of medicines refers to Using medications in a manner that maximizes therapeutic benefit and minimizes harm. This concept emphasizes the importance of prescribing medications appropriately, ensuring that patients receive the right drug at the right dose and for the right duration, while also considering the potential risks and benefits to achieve the best health outcomes.



25. Evidence-based medicine (EBM) emphasizes the use of:

- (a) Traditional knowledge and anecdotal evidence in healthcare decision-making
- (b) Randomized controlled trials as the sole basis for treatment decisions
- (c) The best available scientific evidence along with clinical expertise and patient preferences
- (d) Expert opinions and industry-sponsored research studies



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(d) Expert opinions and industry-sponsored research studies





Evidence-based medicine (EBM) emphasizes the use of The best available scientific evidence along with clinical expertise and patient preferences. EBM integrates research findings with clinical expertise and individual patient values to guide healthcare decisions.



26. The Essential Medicines List (EML) is a compilation of:

- (a) Patented and expensive medications only
- (b) Over-the-counter medications and supplements
- (c) Medications that have been banned due to safety concerns
- (d) Medications that are considered essential for addressing the healthcare needs of a population



26. The Essential Medicines List (EML) is a compilation of:

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- (c) Medications that have been banned due to safety concerns
- (d) Medications that are considered essential for addressing the healthcare needs of a population





The Essential Medicines List (EML) is a compilation of Medications that are considered essential for addressing the healthcare needs of a population. It includes medications that are effective, safe, and necessary for treating the most important health conditions.





27. Standard Treatment Guidelines (STGs)

provide:

- (a) Step-by-step instructions for pharmaceutical manufacturing
- (b) Recommendations for healthcare professionals on the diagnosis and treatment of common diseases
- (c) Information on the adverse effects of medications
- (d) Guidelines for the storage and distribution of medications



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(c) Information on the adverse effects of medications

(d) Guidelines for the storage and distribution of medications





Standard Treatment Guidelines (STGs) provide Recommendations for healthcare professionals on the diagnosis and treatment of common diseases. These guidelines help ensure that patients receive consistent and effective care based on the best available evidence.



28. The goal of Standard Treatment Guidelines (STGs) is to:

- (a) Standardize the cost of medications across healthcare facilities
- (b) Streamline the prescription and dispensing process for medications
- (c) Improve the quality and effectiveness of healthcare by ensuring evidence-based practices
- (d) Restrict the availability of certain medications for cost-saving purposes



28. The goal of Standard Treatment Guidelines (STGs) is to:

(a) Standardize the cost of medications across healthcare facilities

(b) Streamline the prescription and dispensing process for medications

(c) Improve the quality and effectiveness of healthcare by ensuring evidence-based practices

(d) Restrict the availability of certain medications for cost-saving purposes





The goal of Standard Treatment Guidelines (STGs) is to Improve the quality and effectiveness of healthcare by ensuring evidence-based practices. STGs aim to provide a consistent framework for diagnosing and treating common conditions, ultimately enhancing patient outcomes.



29. Evidence-based medicine emphasizes the importance of:

- (a) Prescribing medications based on marketing promotions by pharmaceutical companies
- (b) Continuously updating clinical knowledge based on the latest research findings
- (c) Personal beliefs and anecdotal experiences in treatment decision-making
- (d) Relying solely on patient preferences for treatment choices



29. Evidence-based medicine emphasizes the importance of:

(a) Prescribing medications based on marketing promotions by pharmaceutical companies

(b) Continuously updating clinical knowledge based on the latest research findings

(c) Personal beliefs and anecdotal experiences in treatment decision-making

(d) Relying solely on patient preferences for treatment choices





Evidence-based medicine emphasizes the importance of continuously updating clinical knowledge based on the latest research findings. This approach ensures that healthcare decisions are informed by the most current and robust scientific evidence, improving patient care.





30. The primary focus of pharmacotherapeutics is on:

- (a) The discovery and development of new medications
- (b) Manufacturing and quality control of pharmaceutical products
- (c) Ensuring the safe and effective use of medications in patient care
- (d) Assessing the economic impact of medications on healthcare systems





30. The primary focus of pharmacotherapeutics is on:

- (a) The discovery and development of new medications
- (b) Manufacturing and quality control of pharmaceutical products
- (c) Ensuring the safe and effective use of medications in patient care**
- (d) Assessing the economic impact of medications on healthcare systems



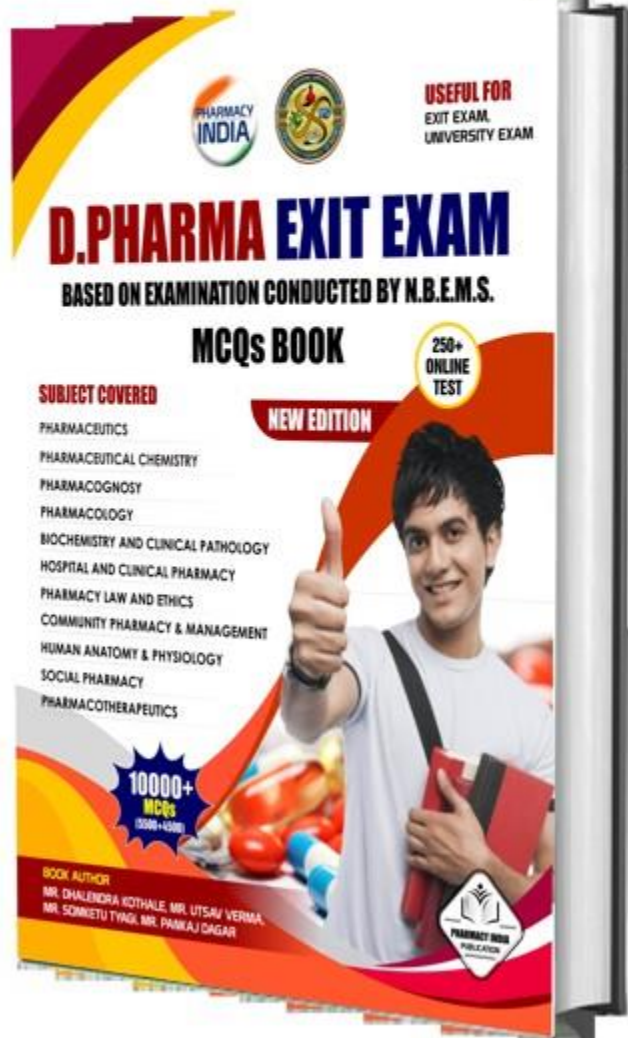


The primary focus of pharmacotherapeutics is on Ensuring the safe and effective use of medications in patient care. It involves applying pharmacological principles to optimize drug therapy and improve patient outcomes.



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31. Hypertension is defined as:

- (a) Abnormally low blood pressure
- (b) Abnormally high blood pressure
- (c) Irregular heart rate
- (d) Elevated cholesterol levels



31. Hypertension is defined as:

- (a) Abnormally low blood pressure
- (b) Abnormally high blood pressure**
- (c) Irregular heart rate
- (d) Elevated cholesterol levels





Hypertension is defined as Abnormally high blood pressure. It is a condition where the force of the blood against the artery walls is consistently too high, which can lead to various health issues.



32. Which of the following is a common risk factor for developing hypertension?

- (a) Obesity
- (b) Regular exercise
- (c) Low sodium intake
- (d) Vegetarian diet



32. Which of the following is a common risk factor for developing hypertension?

- (a) Obesity
- (b) Regular exercise
- (c) Low sodium intake
- (d) Vegetarian diet





A common risk factor for developing hypertension is Obesity. Excess weight can increase the strain on the heart and blood vessels, contributing to higher blood pressure.



33. Which of the following is a common clinical manifestation of hypertension?

- (a) Headache
- (b) Weight gain
- (c) Frequent urination
- (d) Dry cough



33. Which of the following is a common clinical manifestation of hypertension?

- (a) Headache
- (b) Weight gain
- (c) Frequent urination
- (d) Dry cough





A common clinical manifestation of hypertension is Headache. Many individuals with high blood pressure may experience headaches, especially if the hypertension is severe or poorly controlled.



34. Which of the following is a common risk factor for developing angina and myocardial infarction?

- (a) Regular exercise
- (b) Low blood cholesterol levels
- (c) Hypertension
- (d) Vegetarian diet



34. Which of the following is a common risk factor for developing angina and myocardial infarction?

- (a) Regular exercise
- (b) Low blood cholesterol levels
- (c) Hypertension**
- (d) Vegetarian diet





A common risk factor for developing angina and myocardial infarction is Hypertension. High blood pressure can damage blood vessels and increase the risk of heart-related issues, including angina and heart attacks.



35. The etiopathogenesis of angina and myocardial infarction involves:

- (a) Coronary artery blockage or narrowing
- (b) Viral infection of the heart muscle
- (c) Abnormal heart rhythms
- (d) All of the above



35. The etiopathogenesis of angina and myocardial infarction involves:

- (a) Coronary artery blockage or narrowing
- (b) Viral infection of the heart muscle
- (c) Abnormal heart rhythms
- (d) All of the above





The etiopathogenesis of angina and myocardial infarction involves Coronary artery blockage or narrowing. This is the primary cause, typically due to atherosclerosis. While abnormal heart rhythms and viral infections can affect heart health, they are not the main causes of angina and myocardial infarction.



36. A common clinical manifestation of angina and myocardial infarction is:

- (a) Sudden loss of vision
- (b) Jaw pain
- (c) Severe headache
- (d) Chest pain or pressure



36. A common clinical manifestation of angina and myocardial infarction is:

- (a) Sudden loss of vision
- (b) Jaw pain
- (c) Severe headache
- (d) Chest pain or pressure**





A common clinical manifestation of angina and myocardial infarction is Chest pain or pressure. This is often described as a feeling of tightness, squeezing, or heaviness in the chest and can also radiate to other areas like the arms, jaw, or back.



37. Hyperlipidemia refers to:

- (a) Abnormally low levels of lipids in the blood
- (b) Abnormally high levels of lipids in the blood
- (c) Irregular heart rate
- (d) Elevated blood sugar levels



37. Hyperlipidemia refers to:

- (a) Abnormally low levels of lipids in the blood
- (b) Abnormally high levels of lipids in the blood**
- (c) Irregular heart rate
- (d) Elevated blood sugar levels





Hyperlipidemia refers to Abnormally high levels of lipids in the blood. This condition can include elevated levels of cholesterol and triglycerides, which are risk factors for cardiovascular diseases.



38. Which of the following is a common risk factor for developing hyperlipidemia?

- (a) Regular exercise
- (b) Low-fat diet
- (c) Obesity
- (d) Vegetarian diet



38. Which of the following is a common risk factor for developing hyperlipidemia?

- (a) Regular exercise
- (b) Low-fat diet
- (c) Obesity**
- (d) Vegetarian diet





A common risk factor for developing hyperlipidemia is Obesity. Excess body weight is associated with higher levels of lipids in the blood, increasing the risk of hyperlipidemia and related health issues.



39. The etiopathogenesis of hyperlipidemia involves:

- (a) Genetic factors
- (b) Poor dietary choices
- (c) Sedentary lifestyle
- (d) All of the above



39. The etiopathogenesis of hyperlipidemia involves:

- (a) Genetic factors
- (b) Poor dietary choices
- (c) Sedentary lifestyle
- (d) All of the above





The etiopathogenesis of hyperlipidemia involves All of the above. Genetic factors, poor dietary choices, and a sedentary lifestyle can all contribute to elevated lipid levels in the blood.



40. A common clinical manifestation of congestive heart failure is:

- (a) Fatigue and weakness
- (b) Excessive thirst and urination
- (c) Joint pain and stiffness
- (d) Memory loss and confusion



40. A common clinical manifestation of congestive heart failure is:

- (a) Fatigue and weakness
- (b) Excessive thirst and urination
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A common clinical manifestation of congestive heart failure is Fatigue and weakness. Individuals with congestive heart failure often experience reduced exercise tolerance and general fatigue due to the heart's decreased ability to pump effectively.





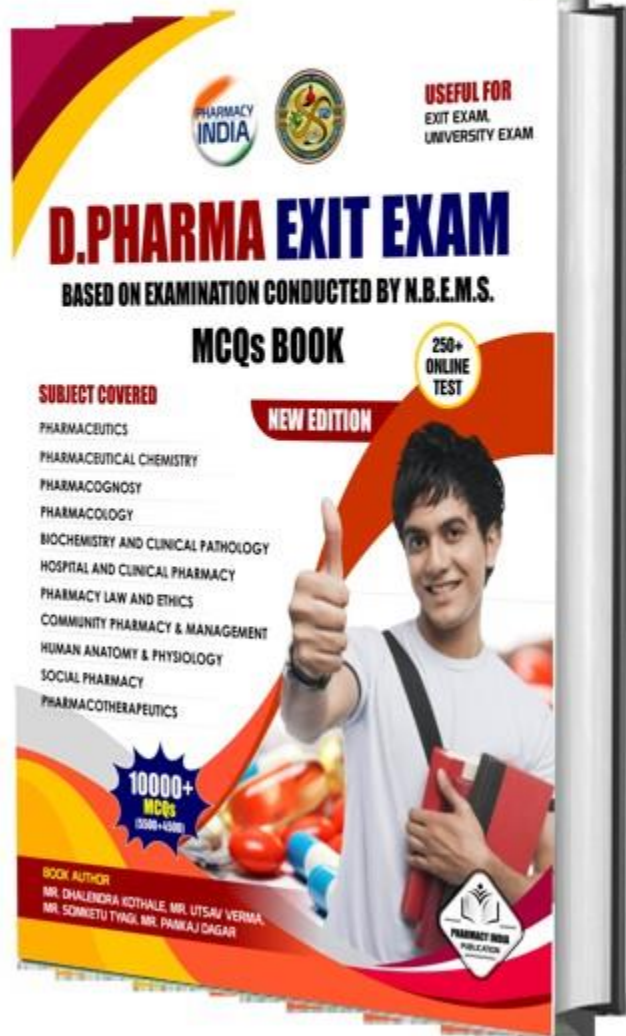
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