

قناة #مقابلة \_ معيد

٧٠- بكتيريا تستخدم في انتاج المضادات الحيويه ؟
 ٣٠- بكتيريا تستخدم في انتاج المضادات الحيويه ؟
 ٣٠- اخر سؤال مقالي ، لو كنتي تملكين منصب بالجامعه ،اكتبي عن اسهاماتك بالجامعه التي تواكب رؤية ٢٠٣٠ ؟ (ليس ضمن التقييم)
 ٣٧- في اي مرحله من الانقسام نستطيع دراسة الكروموسومات ؟
 ٣٧- في اي مرحلة في الخليه يتضاعف الدنا ؟
 ٣٥- الناقل لداء المقوسات ؟

Gram-positive bacteria, responsible for food poisoning, is/are

A. Mycoplasmas
B. Pseudomonas
C. Clostridia√
D. all of these

rWhich of the following gram-negative bacteria is/are not aerobic?

A. PseudomonasB. NeisseriaC. Escherichia√

D. None of these

vGram-negative bacteria, responsible for food poisoning, is/are

## A. Salmonella√

- B. Pseudomonas
- C. Clostridia
- D. None of these

٤Mycoplasmas are different from the other prokaryotes by

A. presence of chitin in cell walls

- B. presence of murrain in cell walls
- C. presence of proteins in cell walls
- D. absence of cell wall itself  $\checkmark$

•Mycoplasmas, rickettsiae, and chlamydiae are

- A. types of fungi
- B. small bacteria√
- C. species of protozoa
- D. forms of viruses

rPrimary differences between cilia and flagella are

- A. arrangement of microtubules
- B. length and location of basal bodies
- C. how the microtubules are fused to each other

D. number, length and direction of force√ v What is Mycology?

A. Study of viruses

B. Study of nucleic acid

C. Study of bacteria

D. Study of fungi  $\checkmark$ 

 $\land .\circ \land$  Which of the following is a characteristic unique to the ciliates?

A. Use of cilia as a sensory function
B. Presence of both a macronucleus and several micronuclei
C. P. d. (2) = 14 e<sup>1</sup>(

C. Both (a) and  $(b\checkmark)$ 

D. Possess a light-detecting eye spot

What are Blue-Green bacteria called?

A. Acquaobacteria

B. Cyanobacteria√

C. Protozoa

D. None of the above

N. Which of the following bacteria lack a cell wall and are therefore resistant to penicillin?

A. Cyanobacteria

B. Mycoplasmas√

C. Bdellovibrios

D. Spirochetes

N A cluster of polar flagella is called

A. lophotrichous

B. amphitrichous

C. monotrichous

D. petritrichous

17 The cooci which mostly occur in single or pairs are

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A. genome and capsid  $\checkmark$ 

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C. envelope and capsid

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\Left Edward Jenner began inoculating humans with material
from \_\_\_\_\_ lesions.

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There are two types of process of transport in the living system:

1. Diffusion: the tendency of molecules to move from an area of higher concentration to an area of

2. Osmosis: movement of water through a membrane from a region of higher to lower concentration

هذي جابوها وتعتبر بيسك بالاحياء

قناة #مقابلة \_ معبد

اسئلة اختبار معيد لتخصص نبات واحياء دقيقة بجامعة الملك سعود • .. ▼ .. عام ١٤٣٨- طالبات

/الفايروس المنتشر حالياً بافريقيا ؟ Ebola

الطحالب الي يستخدمونها في -2 البنايات عشان تعزل الصوت؟ Diatoms

ايش هيا قوه تكبير المجهر-3 للبكتيريا كان فيه خيارين Objective 100x

نکي /4 macc فريقيه differ

d

سرى بيں ،جسريا ، مخمره للاكتوز والغير مخمره (المخمره تعطي لون احمر والغير مخمره

لون شفاف)

الاسم العلمي للمشروم /5 Agaricus

... تقسم الكائنات الدقيقه الي/6 اذا على التغذية ( ذاتية وغير ذاتية) اذا على الحركة ( متحركة او غير متحركة) جدار الخلوي للفطر يحتوي/7 .. على کیتین ... مجموعه من الافراد تسمى/8 ..فقط rna فيروس يحتوي على/9 HIV فيروس الايدز ١٠/الخميره تابعة لاي نوع من .. الفطريات الفطريات الاسكية

١١/الطحالب الحمرا تحتوي على

صبغه

فيكوارثرين ۲/تقسيم الكائنات الدقيقة حسب تغذيته heterotrophs Phototrophs

١٣/تقسيم الفطريات ي نص السؤال ناقص

14/ Sond-proof room —-> Diatoms or chara

15/ Agar-Agar —-> Gelidium

16/ Primative algae--->Blue green algae

17/ Advanced algae--->Rhodophyta

18/ cell wall of fungi is made up of —->chitin

فناه المعابلة \_ معيد

```
19/ gametophyte dominant
in —-
>bryophytes
```

20/ replication of dna in ? metaphase or Interphase الناقصه بهذا الاسم ... ينقصها تكاثر جنسي

.... ۲۲ / تتكاثر الفطريات بطريقة

٢٣/ ماحجم الفيروس

الفيروس يعتبر /٢٤ .. Obligait incllular

۲۵ / الطراز الجيني لورده بيضاء كان السؤال اذا كانت ) rr هو r ورده بيضاء R اللورده الحمراء ف ايش يكون طراز البيضاء شيء ( مثل كذا السؤال

.. ٢٦ /انقسام السيتوبلازم يسمى ...

Cytokinesis

۲۷/ وكمان فيه سؤال عن الفيروس ومن الخيارات كان فيه pentagon /cube

۲۸/ وکمان کان فیه سؤال جدار الخلیه البکتیریه

29/ deurtromycota? lack sexual spores

~·/ Reverse-transcribingRNA viruses--->retroviruses

۲۱/ طیب فیروس الحمی yellow fever virus ؟ !!اش نوعه ssRNA

٣٢ RNA/ اي الفيروسات التاليه ٣٣ DNA/اي الفيروسات التاليه

٣٤/ ايش النياتات اللي الطور وناه <del>11</del>معابلة ــ معيد

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« المشيجي هو السائد فيها
Bryophyte
```

۳٥/ Which of the following is not RNA virus ?!!

٣٦/ جدار الخلية البكتيرية !!المحتوية على حمض التكويك؟ gram positive

*V*/Fungi usually store the reserve food material in the form ofa) Starch

a) Starch

b) Lipid

c)\*glycogen\*

d) protein

٣٨/ جاء سؤال عن جدار Heterocyst الحويصلة المغايرة تكون عديمة اللون وجدارها سميك

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۳۹/ Parasitic on different spices--->heteroceous

٤٠/ motile algae---> green algae(chlorophyta)

البكتريا ع اساس/٤١/ طيب تقسيم البكتريا ع اساس Motile and« الحركه ايش الاجابه non motile

٤٢ / كان فيه سؤالين عن الشئ المشترك في الفايروسات عن المادة الكيميائيه والثاني عن تركيب

یں ال عن / ٢٤ polar flagilla ( cluster of flagella emerging from the same site ) Lophotrichous

اش اقل عدد كروموسوم موجود ف الطحالب؟/ ٤٤ 2n , 4n , 6n ?

ع:الطحالب هي:٤٥ unicellural , cloneal,filamentos , all the abov

٤٦/ Mastigomycota الفطريات السوطية---> ابواغ متحركة zoospores

٤٧/ Basidomycetes-->chlamydospore

48/ bacteria cocus in chainsterptococcus

٤٩/ في سوال جا عن البيئة من الاختبارات المجتمع والجماعه - community ) وعلم البيئة Ecology - popullation)

۰۰/ Amastigomycota — تتصنف حسب sexual ولا sexual ? Sexual

قناه المعابلة \_ معيد

٥١/Virus count by ? plaque assay

٥٢/ viral detetion by? ELISA

۵۳/ virus structure in all virus? Capsid

٥٤/ Virus chemical structure? protien

oo/ Two important
 components found in all
 viruses: ?
 capsid and genome

٥٦/ bacteria lack cell wall?mycoblasma

V/ Rod shape bacteria--->
 bacillus

<del>قناه *اا*مع</del>ابلة \_ معيد

٥٨/ جا سؤال عن الخشب واللحاء » عن الخشب water and nutrition شي زي كذا

٥٩ / كان فيه سوال عن طحلب الفولفكس و الانابينا او الكلاميد اتوقع يعني شيء زي كذا عن عند ... انويه فيها

60/Function of pili of the bacteria:

1- \*Attachment to the host tissue\* 🔆

2- Movement

**3-** Reproduction

(multiplication)

4- Engulf of food

5- All of the above

61/ Hb A2 is consisting of: 3 -1 ά chains and 2 γ chains

```
2 -2 \acute{a} chains and 2 \beta chains
2^* -3 \acute{a} chains and 2 \delta
chains* 💥
2 -4 \acute{a} chains and 3 \delta chains
3-5 \acute{\alpha} chains and 2 \delta chains
[3/20, 4:13 AM] +966 55
877 0855 : Function of pili of
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4-2  $\acute{\alpha}$  chains and 3  $\delta$  chains 5-3  $\acute{\alpha}$  chains and 2  $\delta$  chains

One is motile gram –ve rods: 1- Haemophilus Influenza 2- Bacillus anthracis 3- Pseudomonas aerogenes 4- \*Vibrio cholerae\* 💥 5- Yersinia Pestis [3/20, 4:14 AM] +966 55 877 0855 : Enzyme required to digest milk sugar is ¥ Lactase

The color of Cholera when cultured on TCBS is ¥Yellow

Leishmania is transported

by

💥 Sand fly

[3/20, 4:20 AM] +966 55

877 0855 : What does

steatorrhea mean?

a) \*Increased amount of fat

in feces\* 💥

b) Persistent diarrhea

c) Hyperlipermia

d) Isosthenuria

What is the use of screening test?
a) Follow up disease course
b) Confirm disease
diagnosis
c) \*Detect the disease at
sub-clinical stage\* 💥
d) Discover treatment
ragime complications

Which of the following viruses replicates in the nucleus ?



1) plasma consist of : 🔆 Albumin 🔆 Globulin 🌾 Protein

2) Sodium Citrate , prevent
the clotting action by :
by forming calcium
insoluble salt

3) the granulocytes areformed in :kbone marrow stem cell

4) the non-granulocytes are formed in :

Some marrow stem cell and lymphatic tissue

الي بالعلامم الصفراء هيا الاجابه [3/20, 9:42 PM] +966 55 877 0855 : Which of the following causing enlargement of RBCs



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هذا عرض انسجه مكتوب بالانقلش و مترجم بالعربي



## **Animal Tissues (Histology)**

A tissue is a group of cells with a common structure and function.

- Different types of tissues have different structures that are especially suited to their functions.
  - A tissue may be held by a sticky extra-cellular matrix that coats the cells or weaves them together in a fabric of fibers.

### **Types of tissues:**

- 1- Epithelial tissue بنسيج طلائي,
- 2- Connective tissue نسيج ضام,
- 3- Nervous tissue نسيج عصبي,
- 4- Muscle tissue نسيج عضلى.

## (1) Epithelial Tissues الأسبجة الطلائية

body surfaces and lines تبطن body cavities

### **Function of Epithelium**



include the endocrine الغدد عديدة الخلايا glands . الغدد الصماء

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قناة #مقابلة \_ معبد



(a) Skeletal muscle

العضلات الهيكلية Cardiac muscle, العضلات القلبية Smooth muscle

العضلات الملساء

## Skeletal muscle:

.

- It attaches to bones by tendons الأوتار, skeletal muscle is responsible for voluntary movements الحركات الإرادية.

(c) Smooth muscle

- Also called striated muscle عضلات مخططة.

### **Cardiac muscle:**

forms the contractile wall of the heart.
Cardiac cells are branched.

#### **Smooth muscle:**

No striations,

Is found in the walls of the digestive tract, urinary bladder, arteries, and other internal organs. Its cells are spindle-shaped.

Myofibrils Sarcomere (a) Skeletal muscle (c) Smooth muscle (c) Smooth muscle

(b) Cardiac muscle

Nucleus Muscle fibers

هذا تقسيم الفضلات .. والاشد سمّيه





lame		Pe	eriod Do	nte
	THE	HUMAN BOD	Y SYSTEMS	
System	Function	Diagram	Major Organs	Interactions- Working with Other Systems
Digestive	<ol> <li>take in food (ingestion)</li> <li>digest food into smaller molecules and absorb nutrients</li> <li>remove undigestable food from body (feces)</li> </ol>		Mouth, esophagus, stomach, Sm. Intestine, Lg. intestine, rectum, anus Salivary glands, pancreas, liver, gall bladder	<ol> <li>w/circulatory - absorb &amp; deliver the digested nutrients to the cells</li> <li>w/muscular - control the contractions of many of th digestive organs to pass food along</li> <li>w/nervous - hypothalamu maintains homeostasis by triggering appetite (stomach growling), digest.</li> </ol>
Circulatory	Transport materials to and from cells		Heart Veins Arteries Capillaries Red blood cells	<ol> <li>w/respiratory - deliver O<sub>2</sub> from lungs to cells and drop off CO<sub>2</sub> from cells to lungs</li> <li>w/digestive - absorb and deliver digested nutrients to cell</li> <li>w/excretory - kidneys filter cellular waste out of blood for removal</li> <li>w/lymphatic - both transport things to and from cells</li> <li>w/immune - transports WBCs throughout body to fight disease</li> <li>w/nervous - brain controls heartbeat</li> <li>w/endocrine - trans. hormone</li> </ol>
Nervous	<ol> <li>gathers and interprets information</li> <li>responds to information</li> <li>helps maintain homeostasis</li> </ol>		Brain Spinal cord Nerves Nerve cells = neurons hypothalamus	Controls all other systems Hypothalamus - maintain homeostasis by working with all systems

System	Function	Diagram	Major Organs	Interactions- Working with Other Systems
Excretory	<ol> <li>removes waste products from cellular metabolism (urea, water, CO<sub>2</sub>)</li> <li>filters blood</li> </ol>	N	Kidneys Ureters Bladder Urethra Lungs Skin - sweat glands Liver (produces urea)	1. w/circulatory - filters waste out of blood 2. w/lungs - removes excretory waste 3. w/integumentary - removes excretory waste
Respiratory	Takes in oxygen and removes carbon dioxide and water		Nose Trachea Bronchi Bronchioles Alveoli lungs	<ol> <li>w/circulatory - takes in O<sub>2</sub> for delivery to cells and removes CO<sub>2</sub> brought from cells</li> <li>w/excretory - removes excretory waste</li> <li>w/nervous - controls breathing         <ul> <li>w/muscular - diaphragm controls breathing</li> </ul> </li> </ol>
Skeletal	<ol> <li>protects organs</li> <li>provides shape, support</li> <li>stores materials (fats, minerals)</li> <li>produces blood cells</li> <li>allows movement</li> </ol>		Bones Cartilage ligaments	<ol> <li>w/muscular - allow movement</li> <li>w/circulatory - produce blood cells</li> <li>w/immune - produce white blood cells</li> <li>w/circulatory and respiratory - protects it's organs</li> </ol>

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System	Function	Diagram	Major Organs	Interactions- Working with Other Systems
Integumen- tary	<ol> <li>barrier against Infection (1<sup>st</sup> line of defense)</li> <li>helps regulate body temp.</li> <li>removes excretory waste (urea, water)</li> <li>protects against sun's UV rays</li> <li>produces vitamin D</li> </ol>		SKIN *Epidermis *Dermis - sweat gland - sebaceous gland (oil) - hair follicle - blood vessels - nerves	<ol> <li>w/excretory - removes cellular waste</li> <li>w/nervous - controls body temperature (sweating, goose bumps)</li> <li>w/immune - prevents pathogens from entering</li> </ol>
Lymphatic	<ol> <li>stores and carries WBC's that fight disease</li> <li>collects excess fluid and returns it to blood (2<sup>nd</sup> circulatory system-reaches places other one can't - between cells)</li> </ol>	energy book	Lymph (liquid part of blood – plasma, when it's in lymph vessels) Lymph Vessels Lymph Nodes Contain WBCs	<ol> <li>w/immune - holds lots of WBCs to fight pathogens</li> <li>w/circulatory - to transport materials to and from cells</li> </ol>
Reproduct- ive	Allows organisms to reproduce which prevents their species from becoming extinct.		Ovaries *produce eggs Testes *produce sperm	<ol> <li>w/endocrine - controls production of sex cells</li> <li>w/muscular - uterus contracts to give birth - controlled by hormones</li> </ol>

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System	Function	Diagram	Major Organs	Interactions- Working with Other Systems
Muscular	Allows for movement by contracting		Cardiac muscle Smooth muscle Skeletal muscle tendons	<ol> <li>w/skeletal - allow movement</li> <li>w/digestive - allow organs to contract to push food through</li> <li>w/respiratory - diaphragm controls breathing</li> <li>w/circulatory - controls pumping of blood (heart)</li> <li>w/nervous - controls all muscle contractions</li> </ol>
Endocrine	Regulates body activities using hormones. Slow response, long lasting		Glands *Hypothalamus *Pituitary *Thyroid *Thymus *Adrenal *Pancreas *Ovaries *Testes Glands produce Hormones	<ol> <li>w/circulatory - transports hormones to target organs</li> <li>w/nervous - maintain homeostasis, hormone release</li> <li>w/reproductive - controlled by hormones</li> <li>w/skeletal - controls growth of bones</li> </ol>
Immune	Fights off foreign invaders in the body	Trymus Spicen Lymphatic tissue of the gut T cell Nacrophage Antibodies B cell	White Blood Cells *T cells *B cells -produce antibodies *Macrophages Skin	<ol> <li>w/circulatory - transports WBCs to fight invaders</li> <li>w/lymphatic - has lots of WBCs to fight invaders, spleen filters bacteria/viruses out of blood</li> <li>w/skeletal - WBCs made in bone marrow</li> <li>w/integumentary - prevents invaders from getting in</li> </ol>

اسئلة اختبار معيد لتخصص نبات واحياء دقيقة بجامعة الملك سعود عام ١٤٣٨ – طالبات ..

٢- الطحالب الي يستخدمونها في البنايات عشان تعزل الصوت؟
 Diatoms

٣-ايش هيا قوه تكبير المجهر للبكتيريا كان فيه خيارين Objective 100x

٤/ مانوع بيئة ماكونكي macconkey بيئه تفريقيه (selective and different ) تفرق بين البكتريا المخمره للاكتوز والغير مخمره (المخمره تعطي لون احمر والغير مخمره لون شفاف)

۸/مجموعه من الافراد تسمى ...

۹/فيروس يحتوي على rna فقط.. فيروس الايدز HIV

۱۳/تقسيم الفطريات نص السؤال ناقص 🕵 🍳

Sond-proof room --> Diatoms or chara /\ £

Agar-Agar --> Gelidium / ١ 0

Primative algae--->Blue green algae /\٦

Advanced algae--->Rhodophyta /\v

cell wall of fungi is made up of —->chitin /\A

---- gametophyte dominant in /۱۹ bryophytes<

replication of dna in ? metaphase or Interphase /٢٠ ٢١ / سبب تسميه الفطريات الناقصه بمذا الاسم ... ينقصها تكاثر جنسي

٢٢ / تتكاثر الفطريات بطريقة ....

٢٣/ ماحجم الفيروس

Obligait incllular .. الفيروس يعتبر ٢٤

٢٥ / الطراز الجيني لورده بيضاء هو ٢٢ (كان السؤال اذا كانت اللورده الحمراء R ورده بيضاء r ف ايش يكون طراز البيضاء شيء مثل كذا السؤال )

> ۲۲ /انقسام السيتوبلازم يسمى .. Cytokinesis

٢٧/ وكمان فيه سؤال عن الفيروس ومن الخيارات كان فيه pentagon /cube

٢٨/ وكمان كان فيه سؤال جدار الخليه البكتيريه

deurtromycota? lack sexual spores / ۲۹

<---Reverse-transcribing RNA viruses /r. retroviruses

> ۳۱/ طیب فیروس الحمی yellow fever virus اش نوعه ؟!! ssRNA

> > ٣٢/ اي الفيروسات التاليه RNA ٣٣/اي الفيروسات التاليه DNA

Bryophyte « ايش النياتات اللي الطور المشيجي هو السائد فيها » (٣٤

!!? Which of the following is not RNA virus /ro

gram positive !!? جدار الخلية البكتيرية المحتوية على حمض التكويك؟!! gram positive

Fungi usually store the reserve food material in the /٣٧ form of a) Starch b) Lipid \*c)\*glycogen d) protein

۳۸/ جاء سؤال عن جدار الحويصلة المغايرة Heterocyst تكون عديمة اللون وجدارها سميك

Parasitic on different spices--->heteroceous /٣٩

(motile algae---> green algae(chlorophyta /٤.

۲۱/ طيب تقسيم البكتريا ع اساس الحركه ايش الاجابه » Motile and non motile

٤٢ / كان فيه سؤالين عن الشئ المشترك في الفايروسات عن المادة الكيميائيه والثاني عن تركيب

polar flagilla ( cluster of flagella emerging from سوال عن ٤٣ ( the same site Lophotrichous

> اش اقل عدد كروموسوم موجود ف الطحالب؟/ ٤٤ . n, 4n, 6n۲ ?

ہ ٤ :الطحالب ھي unicellural , cloneal,filamentos , all the abov

ت Mastigomycota / ٤٦ الفطريات السوطية---> ابواغ متحركة Zoospores

Basidomycetes-->chlamydospore / ٤٧

bacteria cocus in chain – sterptococcus / ٤٨

٤٩/ في سوال جا عن البيئة من الاختبارات المجتمع والجماعه وعلم البيئة ( community- Ecology - popullation)

> ۰۰/ Amastigomycota - تتصنف حسب Amastigomycota . exual ولا asexual Sexual Sexual ? Virus count by/۰۱ plaque assay

> > viral detetion by /or? ELISA

virus structure in all virus /or Capsid

Virus chemical structure? protien /o ٤

? :Two important components found in all viruses / o o capsid and genome

bacteria lack cell wall? mycoblasma /o٦

Rod shape bacteria---> bacillus /ov

٥٨/ جا سؤال عن الخشب واللحاء » عن الخشب water and nutrition

٩٥ / كان فيه سوال عن طحلب الفولفكس و الانابينا او الكلاميد اتوقع يعني شيء زي كذا عن عند انويه فيها ...

:Function of pili of the bacteria/٦.

Attachment to the host tissue\* -  $\gamma$ 

Movement -r

(Reproduction (multiplication -r

Engulf of food - £

All of the above -o

:Hb A2 is consisting of  $/\tau n$   $\dot{\alpha}$  chains and 2  $\gamma$  chains  $\tau - n$   $\dot{\alpha}$  chains and 2  $\beta$  chains  $\tau - \tau$   $\dot{\alpha}$  chains and 2  $\delta$  chains  $\tau - \tau$   $\dot{\alpha}$  chains and 3  $\delta$  chains  $\tau - \varepsilon$  $\dot{\alpha}$  chains and 2  $\delta$  chains  $\tau - \varepsilon$ 



	Entamoeba	Lishmania	Trypanosoma sp.		Giardia	Trichomonas vaginalis
Classifcation:	K: Protozoa P: Rhizopoda C: Entamoeba e.g.:Entamoeba histolytica	K:protozoa P: Euglenozoa C: Kinetoplastidea G: Leishmania	K: protozoa P: Sarcomastigophora SP: Mastigophora C: Zoomastigophorea O: Kinetoplastida e.g.: Trypanosoma brucei	K: protozoa P: Sarcomastigophora SP: Mastigophora C: Zoomastigophorea O: Kinetoplastida e.g.: Trypanosoma cruzi	P:Sarcomastigophora SP:Mastigophora C:Zoomastigophorea O: Diplomonadida e.g: Giardia lamblia	P:Sarcomastigophora SP:Mastigophora C:Zoomastigophorea O:Trichomonadida e.g.1: Trichomonas vaginalis e.g.2: Trichomonas buccalis e.g.: Trichomonas intestinalis
Disease:	Amoebiaisis, amoebic dysentery, amoebic colitis, amoebic liver abscess.	<ol> <li>L. donovani         <ul> <li>(Visceral</li> <li>Leishmaniasis "Kala</li> <li>azar").</li> </ul> </li> <li>L. Tropica (Cutaneous</li> <li>Leishmaniasis         <ul> <li>"oriental sore").</li> <li>L. braziliensis (Mucocutaneous</li> <li>Leishmaniasis</li> <li>"Eishmaniasis</li> <li>"Espundia")</li> </ul> </li> </ol>	T. brucei gambiense, T. brucei rodesiense cause : sleeping sickness (African trypanosomes)	causes chaga's disease		trichomonad vaginitis
Geographical Distripution:	Cosmopolitan especially in tropics and subtropics and wherever sanitary conditions are bad.	Most of the affected countries are in the tropics and subtropics.	rural Africa.	<i>T. cruzi</i> is mainly distributed in South America,		
Habitat:	Large intestine, occasionally extra- intestinal (liver, lung, brain,).	Macrophage of human Midgut of sand fly	blood fluids (e.g., lymph, spinal fluid) mid gut and salivary glands of tsetse fly	Midgut and hindgut of bug. Cells of human	Intestine	-endoparasite -residing in the upper part of vagina around the cervix and urethra in <b>women</b> and , the urethra and associated glands of male

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Hosts:	Definitive host: man. Reservoir host: monkey, dog and rat.	Vector of Leishmaniasis: transmitted by certain species of sand fly, including flies in the genus Lutzomyia. Reservoir host: dogs Intermediate host: human	Vector: transmitted by the <b>tsetse fly</b> ( <i>Glossina</i> species),	insect vector of the genus <i>Triatoma</i> (kissing" bug)	Human	both male and female
Morphology:	Three stages [Trophozoite - precyst - cyst]	Tow stages: Promastigotes infective stage — in midgut of sand fly. Amastigotes: in macrophage cells of human.	of the <b>insect vector</b> • The kinetoplast is for adjacent to the nuc	oodstream : 'C' shape terges through a d runs the whole ist is found at the e cell. ASTIGOTE is the ar haped cell with no m. testinal tract (midgut) r. ound anterior and	1- The trophozoite form     - bilaterally     symmetrical, pear     shaped flagellate     -anterior part is broad     and round while the     posterior end is narrow     and tapering.     -has central sucking     discs     -Four pairs of flagella     -aaxostyle     -par of nuclei     -parabasal bodies or     median bodies.     2- The cyst form     Cyst formation occurs     when conditions in the     duodenum are     unfavourable     -a thick resistant wall     -smooth wall and finely     granular cytoplasm.     -Inside the cyst the     nuclei are formed.     -sensitive to desiccation	-trophozoite phase and there is no cystic phase. -Pear shaped -single nucleus -undulating membrane - 3 to 5 anterior free flagella.

Life cycle:	Infective stage: quadrinucleated mature cyst. Diagnostic stage: Cyst & trophozoite Mode of infection: ingestion of cysts: 1- In contaminated food and drinks.	Infective stage: promastigote Diagnostic stage: Amastigote	Infective stage: metacyclic trypomastigote Diagnostic stage: trypomastigote	Infective stage: metacyclic trypomastigote Diagnostic stage: intracellular amastigote	Infective stage: cyct Diagnostic stage: trophozoite and cyct in stool .	Infective stage: trophozoite in vagina or orifice of urine Diagnostic stage: trophozoite in vaginal and prostatic secretions and urine.
Clinical aspect	<ul> <li>*Asymptomatic infection: infected persons are usually helthy.</li> <li>*symptomatic infection:</li> <li>1- Intestinal Amoebiasis: <ul> <li>acute dysentery (diarrhea alternating with constipation, tenesmus with blood &amp; mucucs in stool).</li> <li>chronic non- dysenteric amoebiasis.</li> </ul> </li> <li>2- extra-intestinal amoebiasis: The trophozoites may disseminate via blood to other extra-intestinal sites e.g. in the liver, lung, brain etc.</li> </ul>	The factors determining the form of disease include: – leishmanial species, – geographic location, – immune response of the host.	Symptoms/Pathology fever, headache, joint pain, weakness and itching. infect the central nervous system, the symptoms include headache, abnormal behaviour, lethargy, and finally unconciousness and coma before death.	-begins with a lesion at the site of inoculation called a chagoma . -fever, anorexia, or heart problems . -Symptomatic chronic disease, including pathology of the heart and digestive tract, weight loss and pulmonary infections may then develop and can be fatal.	<ul> <li>Symptoms/Pathology         <ul> <li>Fatty diarrhea.</li> <li>Abdominal pain (heavy infections).</li> </ul> </li> <li>Prophylaxis         <ul> <li>Avoiding contaminated food and water.</li> <li>Avoiding insects.</li> <li>Treatment of patients.</li> </ul> </li> </ul>	

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Diagnosis:	<ul> <li>Intestinal amoebiasis:</li> <li>1-Stool examination by:</li> <li>-Direct smear:</li> <li>Trophozoite appears more in diarrheic stool while cysts are present more in well-formed stool</li> <li>-Concentration techniques</li> <li>2-Stool culture.</li> <li>3-Rectal scraping: to detect trophozoites.</li> <li>4-Sigmoidoscopy or total colonoscopy for:</li> <li>Visualization of the lesions- Biopsy-Aspiration.</li> <li>II- Extra-intestinal amoebiasis:</li> <li>X-rays Ultrasonography.</li> <li>-Computed tomography (CT) and magnetic resonance imaging (MRI).</li> </ul>	Clinically: 1- Fever 2- Enlargement of liver and spleen. 3- Anaemia & leukopenia. 4- By the picture of sore. Laboratory Diagnosis: Giemsa stained slides of the tissue used to detect the parasite (amastigote form).	Diagnosis is made by identifying trypanosomes in fluid from a chancre, lymph node aspirate, blood, bone marrow aspirate, or, during the late stage of infection	<ul> <li>1-By microscopic examination of blood smear</li> <li>Diagnosis of chronic Chagas disease is made by testing with at least two different serologic tests.</li> </ul>	<ul> <li>Diagnosis <ul> <li>Trophozoites and / or cysts in stools.</li> <li>ELISA test is available to detect Giardia antigen.</li> </ul> </li> </ul>	
Prevention and Control:	resonance imaging (MRI). -Immunological tests. -Examination of aspirates for trophozoites by smear or culture. -Leucocytic count: leucocytosis. Anti-vector measures. Proper sewage disposal. Safe water supply.		1 -Avoiding tsetse flies . a - Bed nets b - Fly repellents		Prophylaxis • Avoiding contaminated	
	Not to use excreta as fertilizer or storage before use. Health education:		<ul><li>2 -Control of reservoir host (cattle, horses,etc).</li><li>3- Treatment of patients.</li></ul>		<ul> <li>food and water.</li> <li>Avoiding insects.</li> <li>Treatment of patients.</li> </ul>	

هذي الهرمونات .. اختصرتما قد مقدر

\* Endocrine systems-funcations-1-mantain inter environment in body. 2 - Regulation Processes :- body defenses Ui- 1 des- 32 Hormonesschemical substance are secretaed by endocrine cell into blood. Ento 1 internet D Pituitary Gland. 2 lobes: Danterior Lobs. @ Posterior Lobs "gland wartissue" nervous Tissue" (A) Anterior Lobss- 6 hormones :-DGrowth hormone " GH -Affect growth skeletat muscles and bonde in body-Determent final size bodymintains normal body metabolism. Helping Kelpblood glucose levels within set levels 2 Ando 2) Adreno, Cortico tropic Hormones - ACTH ... stimulates hormonal activity advenal cortex. 3 Thyroid-stimulating Hormone . TSH . stimulates the thyroid gland to Produce the roid hranone (1) Gonado tropic Hormone: (A-B) A-Follicle-stimulationg Hormones:- FSH~ -Female-stimulates follicle growth and Ovarian estrogen Production. . Male :- stimulates sperm development by testes. quair de la viele lie de la ciencie B- Luteinizing Hormones- LH. -female-role in ovulation and growth of Cropus lateum. 6. Proflaction Hormone: PRH. stimulate the milk Produce by breast. ispo @ Melano cyte stimulating Hormones-MSH~ stimulate Melanin Production 200000 1 Thesal

B Pasterior Lobes 8-acts storege area hormones made by the A - Antipliuretic hormone: ADH- shelf contral blood Pressure. B-Oxyto Cin :-Ostimulate Powerful Contraction atevine muscles. 2 Hy Pothalamuse Part the nervous system-lasted & Tabove Pituitary gland. - secrates (ADH - OXYtoCin) which stored in Posterior Pitultary (3) Pineal Glando-small glund located in Brain. - Secretes melatonin hormone regulation sleep. wake cycle. لغرزهرمعنا صلاقون عن الي تنافل الدوم والاستقاط (4) Thy void glands-located front neck : Two lateral Lobes: - 2 hormone () Thyvoid hormone (T4. T3/8-- Essential normal growth of tissue intervisionation -- تحفز ععرل الادف -stimulate metabolice vate. (2) Cla Cito nin 8- Mising Charge and - Contrals Devel, of calcium in blood, released blood ca is high , (5) Parathy roid Glands :- 4 gland. Posterior surface theroid dand Q نظم الان الكالبعا: - secrate Parathyroid Hormone, PTH. وارد متويات الكالمعان ال regulate Calue ium ion homeostasis, increase levels Calcium inblood released blood ca is low prizie un cesisis 6) Advenal Glands &- Cover tol each Kidney. LAdrenal Cortex the outer Part . Produces-3 major groups of harmones which called: - Corticosteroids 2-Adrenal medullas the inner Part 2 3-1-epinephrine "adrenaline 2-nor epine Phrine . nor advendine . The Prepare the body stressful conductions. Egget legg pulling المرموتات 2

F) Thy mus Gland: - ( jein o wall gland located upper thorat 1-Thymosin hormone stimulates development T- 1/m Phocytes له نوعت من الملا ) مملا المزر المخارج - خلا المرز المرافل -(2) Pancreas:-Dendocrine cells-Islet cells Langerhans, jilo, ist A-Alpha Cells-secrate glucagon ~ B-Beta Cells-secrate insulin-Bath hormones: Control blood glar Cose levels .- ) 2 Exo crine colles a culitilitie D secrate digestive en2yme. ingenional instance. (9)Gonads:-DEndocrine Produce Sexhormones. @Exo crine Produce sex Cell. Endocrain organs: - 1-Testes. 2-OWary. A Testes :- Produce testosterone hormones- 3 funcations-1-Responsible growth and maturation reproduction organs. appearance secondary sex characters. 3 - supports final stages sperm production. 2)- OVary- OVaries, 2 hormones: )-Estrogen: -2 funcation:-I-ResPonsible growth and maturation reproduction Organs. 2. ~ affearance secondary sex characters. 2- Progesterone 8- 2 funcations-1-regulation Cyclin Changes in uterine lining 2-Pregnancy, inhibits contractions uterus's muscles. المرمونات 3

ملخص المناعة

#### Immunity:

#### 1. Innate (non-specific) immune system:

- A. External: skin, mucous membrane.. etc
- B. Internal: phagocytes, antimicrobial proteins
- 2. Adaptive (specific) immune system:
  - A. Humoral immunity (antibodies)
  - B. Cellular defense

#### Innate Immune System:

- 1. External: skin, mucous membrane, body secretions.. etc
- 2. Internal:
  - A. Phagocytes (bacteria-eating cells)
    - 1. Neutrophils (most abundant): they self-destruct after they swallow intruders (make pus)
    - Macrophages (biggest): they use cytoplasmic extensions to engulf pathogens. They're derived from monocytes that moved from blood stream to occupy tissues:
      - A. Free macrophages: patrol tissues
      - B. Fixed macrophages: relatively immotile macrophages found in tissues, such as stellate macrophages found in the liver (kupffer cells)
  - B. Natural Killer Cells (NK):

Patrol and kill infected or cancerous cells.

(How?) A healthy cell contains an MHC class I protein on its surface. If it stops making it when infected, it triggers an NK response that leads to apoptosis (programmed cell death)

#### C. Inflammatory response:

> redness, swelling, heat, pain

e.g.: the production of histamine

Histamine and other inflammatory chemicals cause capillaries to release protein-rich fluid to clot blood in case of injuries

P.S. heat fasten healing process P.S. leukocytosis is an increase in WBC count in blood and is usually a sign of an inflammatory response

#### Adaptive (acquired) Immune System:

> is specific, systematic, and has a memory

- A. Humoral immunity (B lymphocytes > produced in bone marrow)
  - Recognize antigen using membrane-bound antibodies
     P.S. epitope is the part of antigen that is recognized by B cells
  - B cell activated (with help of T cell) > divide and multiply into several B cells (plasma cells (fighters), memory B cells)
  - 3. Plasma cells secrete free antibodies into blood stream
  - 4. Free antibodies >
    - Attach to and block intruder's receptors, preventing it from attacking and invading new cells (this process is called **neutralization**)
    - Mark out antigens to prepare for phagocytosis (this process is called opsonization)
    - Bivalent nature of antibody (two binding sites) lead to cross-linking one antigen to another which cause antigens to clump together (this process is called **agglutination**) which help in phagocytosis as large clumps of antigens can be eliminated in one pass
- B. Cell-mediated response (T lymphocytes > mature in thymus)
  - 1. Helper T cells (CD4+ T cells) have receptors that attach to a specific combination of (antigen + MHC class II) on B cell surface
  - 2. Activate both B cell and helper T cell
  - 3. Helper T cell starts multiplying and releasing cytokines which activate other T cells into multiplying to helper, memory, and regulatory T cells
  - 4. Cytokines also send alarm to other immune cells
  - Cytotoxic T cells (CD8+ T cells) roam and kill infected body cells (how do they know which cell is infected?) > infected cells represent invader's proteins on their MHC class I
  - 6. Cytotoxic T cells attach to infected cell's MHC class I and release killer enzymes (granzymes) that induce programmed cell death
  - 7. Regulatory T cells (suppressors) tell immune system to stop fighting once the invader is beaten

P.S. Regulatory T cells help prevent autoimmune diseases P.S. HIV virus targets helper T cells



هذا الجدول بالانقلش .. تصنيف الممالك



الاسفنج = عديم تناظر Asymmetry Insect mouth من ضمن المواضيع المطروحة وكاتبين مع الرسم حبوب المعلى في علمي الماء للمشبي فوق سطح الماء؛ حيث يوجد على ارجلها وسائد مغطا أرجل حشرة صرصور الماء للمشبي فوق سطح الماء في حيث يوجد على ارجلها وسائد مغطا أرجل حشرة صرصور الماء للمشي قوى تسلم الماء في عليه المعلم المعامة المعام المعام المعام المعلمة المعر لا يلتصق به الماء ولا يكسر التوتر السطحي للماء! فسبحان من بَرَأها وصوَّرها! استشعر وأنت تقرأ هذه التكيفات قول الحق عز وجل: ﴿ صُنْعَ اللَّهِ ٱلَّذِي ٓ أَنْقَنَ كُلَّ شَيْءٌ إِنَّهُ خَيِرٌ بِمَا تَفْعَ لُوك ﴿ أجزاء الفم Mouth parts تكيفت أجزاء فم الحشرات للغذاء الذي تأكله. ادرس الجدول اجراء العمر عليه الغراب الفرقي الحشرات ووظائفها. 2-8، وأعط أمثلة على أجزاء الفم في الحشرات ووظائفها. اجتحة الحشرات Wings الحشرات هي اللافقاريات الوحيدة القادرة على الطيران؛ فأجنعة الجنحة المعلوب المحص المحص المعام الجناح من طبقتين غشائيتين رقيقتين من الحشرات ما هي إلا نمو خارج من جدار الجسم . يتكون الجناح من طبقتين غشائيتين رقيقتين من الكايتين، وهي المادة نفسها التي يتكون منها الهيكل الخارجي لها. أجزاء فم الحشرات rodent absorbent الجدول 2-8 Spongy قارض ثاقب / ماص انبوبي إسفنجى أجزاء الفم

الجزء الطري من أجزاء الفم يعمل مثل الإسفنج

ليلعق ويلحس.

شكل الفم

الوظيفة

لحشرات ذات

التكيفات

تنفرد لفات أنبوب التغذي

وتمتد لامتصاص السوائل

وتوصيلها إلى الفم.

قناة #مقابلة \_ معيد

أنبوب دقيق يشبه الإبرة الفك العلوى يمزق أنسجة

يخترق الجلد أو جذر الحيوان أو النبات أو

النبات لامتصاص السوائل ليقطعها، وتقوم أجزاءالفم

هذا ملخص بسيط للانزيمات

Questions/Main Idea:	
	Notes:
What are <b>enzymes</b> ?	<ul> <li>Enzymes are proteins that help molecules react with one another</li> <li>Their monomers are amino acids.</li> <li>Enzymes are used by cells to trigger and control chemical reactions.</li> <li>Without enzymes, several reactions in cells would never occur or happen too slowly to be useful.</li> <li>In digestive enzymes, often end in "-ase"</li> </ul>
What is a <b>chemical</b> <b>reaction</b> ?	<ul> <li>It is the process of changing one set of chemicals (reactants) into another set of chemicals (products) by rearranging the atoms.</li> <li>Reactants' bonds are broken and new ones are formed in the products.</li> </ul>
What is a <b>catalyst</b> ?	<ul> <li>It is a substance that speeds up the rate of a chemical reaction.</li> <li>It lowers the activation energy.</li> <li>It participates in the reaction but doesn't change itself; therefore it can be used over and over.</li> </ul>
What is activation energy?	<ul> <li>It is the amount of energy needed to start a chemical reaction.</li> <li>Catalysts speed up chemical reactions by lowering their activation energy.</li> <li>Enzymes are catalysts because they lower the activation energy by holding molecules together to either help them bind (synthesize) or help them break apart (decompose).</li> </ul>
What is a <b>substrate</b> ?	<ul> <li>Enzymes bind to or break molecules called substrates.</li> <li>These substrates are the reactants that are catalyzed by the enzyme.</li> </ul>
What is the active site?	<ul> <li>Each substrate and enzyme has a specific shape, therefore enzymes bind to substrates based on shape.</li> <li>The site on the enzyme where the substrates bind is called the active site.</li> </ul>
What is the Lock and Key Hypothesis?	<ul> <li>Enzymes bind to the substrates based on their complementary shape.</li> <li>The fit is so exact that the active site and substrates are compared to a lock and key.</li> <li>Most digestive enzymes are named for the foods (molecules) they help react—lactase helps break down lactose (milk sugar)</li> </ul>

قناة #مقابلة \_ معيد

What are other examples of enzymes and what they break down? Sucrase er "wager-copper"	<ul> <li>Lactase breaks down lactose into glucose and galactose</li> <li>Sucrase (the "sugar-clipper"): breaks down sucrose (common table sugar) into glucose and fructose</li> <li>Amalyse breaks down starch in your mouth and stomach</li> <li>Lipase breaks down ats</li> <li>Pepsin breaks down proteins</li> </ul>
How are enzymes affected by the reaction?	Enzymes are <b>NOT</b> changed by the reactions they catalyze, therefore they are reusable!
How can enzymes be affected?	<ul> <li>Enzymes each work best at a specific temperature and pH.</li> <li>Temperatures outside the correct range can cause enzymes to break down or change shape.</li> <li>This break down is called denaturation.</li> </ul>
Why are enzymes considered the body's "workers"?	<ul> <li>Nearly every reaction in your body is helped by an enzyme!</li> <li>Remember—enzymes are proteins!</li> </ul>

# اهم الانزيمات الهاضمة

ملاحظات	نواتع الهضم	الألبة: يحول	الأزيمات والهرمونات والأحماض الهاضمة	PH	العواد المهضومة	العضو
	سكريات ثثلية	بحول التشاو الجليكوجين	اميليز اللعاب (تيلين)	قلوى	كريوهيرات	القر
بفرز من الغلايا الجدارية		يهيء البينة للاتزيمات	HCL (الخر) إ			
بيسينوجين يفرز من الغلايا الرئيسة	يبتدان فصيرة	البروتينات	يسينوجين الى بيسين	حامضي	البرونيتات	المعدد
كازين بروتين صلب يهضعه البيسين	كازين	برونين الطيب	برورينين إلى الرينين	۲=		
	سكريك ثلثية	بحول الكربو فيترات	اميليز البنكريان*	قلوي	كريوفيترات	
*مفرزة ضعن العصارة البنكرياسية	يبتيدات قصيرة	الررينات •	تريسينوجين الى تريسين*		الرويتيك	الأمعاء
			كيموتريسينوجين الى كيموتريسين*			الفيقة
الشؤا وإعباغ وعوض لشؤاء			•		المغل	
وكوليستوولوا لمعون الستعلب					الترزية	
	نيوكليونيك	RNA	راييو نيوكليز RNase*			
	نبو كليونيات	DNA	نيوكسي راييونيوكلييز DNase*			
	أحماض امينية	بيتيدات قصيرة	بيتيديرات Peptidases			
		نركلونيات	نوكليز			
	5+5	ملتون	ملتيز			
	4+5	آهوز	لاهيز			
	3+1	سكروز	سكريز		21	

# Ascaris, other nematoda

	Ascariasis	Hookworms	Tissue (Filarial) Nematodes		
Classifcation:	<ul> <li>Phylum: Aschelminthes</li> <li>Class: Nematoda e.g. Ascaris lumbricoides</li> </ul>	Ancylostoma duodnale: Necator americanus	a. Lymphatic Wuchereria bancrofti	b. Cutaneous Dracunculus medinensis	
Common name:	Roundworm		Filaria worms	Guinea worms	
Disease:	Ascariasis	Hookworm infection	Elephantiasis, Wuchereriasis Bancroftian filariasis, lymphatic filariasis	Dracunculiasis	
Geographical Distripution:	<ul> <li>Worldwide distribution.</li> <li>Highest prevalence in tropical and subtropical regions, and areas with inadequate sanitation.</li> </ul>	Worldwide, in areas with warm, moist climate • Ancylostoma duodnale: Middle East, North Africa • Necator americanus: America	Worldwide in tropical areas.	Pakistan, India, and Iran and infections greatly reduced over much of sub-Saharan Africa.	
Habitat:	<ul> <li>The adult worms live loosely attached to the mucous membrane of the small intestine of man by its lips.</li> </ul>	Small intestine	Lymph nodes, lymphatic glands and vessels in legs, arms and genitalia (testes)	Surface of skin (usually the in legs)	
Hosts:	Definitive host : human		Definitive host : human Intermediate host: Mosquito (Anopheles sp. or Culex sp.)	Final host: humans Intermediate host: tiny crustaceans.	
Morphology:	<ul> <li>Adult worm:</li> <li>The male measures 20 cm, and the female 25 -35 cm in average length.</li> <li>The adult is creamy white in colour</li> <li>It has a club-shaped oesophagus</li> </ul>	Egg: oval, colorless, thin- shelled, segmented		Adult females are threadlike nematode worms that can grow to 1 meter in length.	

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	<ul> <li>The posterior end of the male is curved ventrally; it has one set of genitalia provided with two retractile.</li> <li>The posterior end of the female is straight; it has two sets of genitalia.</li> <li>Egg:</li> <li>There are 3 types of eggs:         <ul> <li>a- Fertilized egg : 60x45µ, oval in shape, yellowish brown in colour with two coverings , outer mamillated and inner thick egg shell and containing immature ovum.</li> <li>b- Unfertilized egg: 90x45µ, long and narrow, less mamillated layer and thin egg shell and containing refractile granules. These eggs are laid by unfertilized</li> </ul> </li> </ul>			
	<ul> <li>or single female.</li> <li>c-Decorticated egg: When the mamillated layer is lost, the fertile or infertile egg is said to be decorticated.</li> </ul>			
Life cycle:	<ul> <li>The infective stage : is the egg containing 2nd stage larva.</li> <li>Diagnostic stage : eggs in faeces</li> <li>Mode of infection : Humans become infected by swallowing Embryonated eggs containing 2<sup>nd</sup> stage Rhabditiform larva</li> </ul>	Infective stage: Filariform larva Mode of infection : Filariform larvae in moist soil penetrate skin through bare feet Site of infection: Small intestine, heart, lung Diagnostic stage: Egg in feces	<ul> <li>The infective stage : L3 larva enter the skin by mosquito.</li> <li>Diagnostic stage : microfilaria in blood and lymph nodes</li> <li>Mode of infection: Motile microfilaria</li> <li>Site of infection: Lymph nodes, lymphatic glands and vessels in legs, arms and genitalia (testes)</li> </ul>	<ul> <li>The infective stage : L3 larva in copepod</li> <li>Diagnostic stage : L1 larva in water .</li> </ul>
Clinical aspect	<ul> <li>Although infections may cause stunted growth.</li> <li>Adult worms usually cause no acute symptoms.</li> <li>High worm burdens may cause abdominal pain and intestinal obstruction.</li> <li>Migrating adult worms may cause symptomatic occlusion of the biliary tract.</li> <li>Also oral expulsion may occur in very high worm burden.</li> </ul>	<ul> <li>Iron deficiency: Anemia due to loss of blood at site attachment in intestine</li> <li>*cardiac problems</li> <li>*local skin manifestations "ground itch"</li> <li>*respiratory symptoms during larval pulmonary attack</li> </ul>	<ul> <li>Inflammation of vessels, rupture of lymphs, fibrosis, leading to obstruction. Thickening, hypertrophy of tissues, enlargement of tissues (especially extremities and genitalia)</li> </ul>	<ul> <li>causing very painful blistering.</li> <li>There is no cure for Guinea worms and the only way to remove one is to slowly over the course of weeks wind the worm out on a stick.</li> </ul>
Disease Transmissior	Man is infected by ingestion of the infective eggs containing 2nd stage larva with water or raw vegetables or contaminated hand.	•	Infected mosquitos	<ul> <li>Humans become infected when they drink water containing the crustaceans.</li> </ul>
Diagnosis:	Microscopic identification of Fertilized and unfertilized Ascaris lumbriocoides eggs in stool of the infected human is diagnostic for Ascariasis.	Microscopic examination of characteristic egg in stool	<ul> <li>Demonstration of microfilaria in blood molecular diagnosis using PCR</li> <li>Surgery in elephantiasis</li> </ul>	
Prevention and Control:	<ul> <li>Avoid contaminated food and water</li> <li>Frequent hand washing is recommended</li> <li>Personal cleanliness</li> <li>Treatment of infected persons</li> <li>Infected persons must not work as a food handlers</li> </ul>			

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# Hymeno, echino, balan, Entero

	Hymenolepiasis nana	Echinococciasis	BALANTIDIASIS	Enterobiasis
Classifcation:	Phylum: Platyhelminthes Class: Cestoda e.g. Hymenolepis nana.	Phylum: Platyhelminthes • Class: Cestoda e.g. Echinococcus granulossus	Phylum III: Ciliophora Class: ciliatea E.g.: Balantidium coli	Phylum: Nemathelminthes • Class: nematoda e.g.: Oxyuris (Enterobius) vermiculari
Common name:	dwarf tapeworms	(Dog tape worm)		Pinworm, threadworm
Disease:	Hymenolepiasis	Hepatic echinococcosis Pulmonary echinococcosis Cerebral echinococcosis	BALANTIDIASIS	Enterobiasis
Geographical Distripution:	cosmopolitan	Widely distributed	Distributed in south and central America & different regions of Asia.	Cosmopolitan. It has the widest geographical distribution
Habitat:	The adult lives in the small intestine of human & rodents	intestine of the definitive host (dog).	large intestine	<ul> <li>The usual habitat of the pinworm is the caecum and the adjacent portions of the large and small intestines.</li> </ul>
Hosts:	Definitive host: human & rodents Intermediate host: human & insects	definitive host: carnivorous animals especially the species from family canidae such as dogs, wolves, foxes, etc Intermediate host(s): 60 (human, cattle, pigs, sheep,etc).	Definitive host: human reservoir hosts: Pigs	Definitive host: human
Morphology:	<ul> <li>Adult is 1-3 cm (dwarf)- flat formed from scolex, immature segments, mature segments &amp; gravid segments.</li> </ul>	<ul> <li>worm has three proglottids (immature, mature &amp; gravid); the scolex with suckers and rostellum</li> </ul>	<ul> <li>Body is large and covered with cilia.</li> <li>Macro and micro nuclei.</li> <li>Macronucleus (vegetative nucleus) involved</li> <li>in production of proteins</li> </ul>	The adult has: • Male: About 5 mm in length with curved tail and a single spicule.
	Egg is ovoid, translucent, with two envelopes, contains hexacanth embryo	<ul> <li>The mature proglottis contains male and female reproductive organs.</li> <li>The hydatid cyst has cuticular &amp; germinal layers in its wall.</li> <li>The germinal layer produces brood capsules that contain</li> <li>protoscoleces.</li> <li>Within the hydatid cyst many</li> </ul>	<ul> <li>Micronucleus involved in reproduction.</li> <li>Two contractile vacuoles.</li> <li>Cytostome (mouth-like).</li> <li>Cytoproct (anus-like).</li> </ul>	<ul> <li>Female: About 10 mm in length with a long pointed tail.</li> <li>Two expansions (alae) at the anterior end and a prominent (double bulbed oesophagus).</li> <li>*The egg:</li> <li>Size: 50 x 20 um</li> <li>Shape: plano-convex in</li> </ul>

		<ul> <li>protoscoleces.</li> <li>Within the hydatid cyst many daughter cysts are formed.</li> </ul>		<ul> <li>Size: 50 x 20 um</li> <li>Shape: plano-convex in shape,</li> <li>Colour: It is colourless</li> <li>Content: mature larva.</li> </ul>
Life cycle:	<ul> <li>Definitive host: human &amp; rodents</li> <li>Intermediate host: human &amp; insects</li> <li>Infective stage: cysticercoid (rodents) &amp; embryonated egg (human)</li> <li>Diagnostic stage: mature eggs pass with feces</li> <li>Mode of infection: ingest cysticercoid-infected arthropods or autoinfection by contaminated food</li> </ul>	<ul> <li>Infective stage: Hydatid cyst.</li> <li>Infection route: Oral.</li> <li>Intermediate host(s): 60 (human, cattle, pigs, sheep,etc).</li> <li>Infection Mode : Eating infected intermediate host.</li> <li>Infection site: Small intestine.</li> </ul>	<ul> <li>Infective stage: cyst in contaminated food.</li> <li>Diagnostic stage: Trophozoite and / or cyst in stool.</li> </ul>	definitive host: human         Infective stage: embryonated eggs         ingested by human         Diagnostic stage: eggs in perianal         folds         Mode of infection:         • External Autoinfection:         (hand to mouth)         from scratching the perianal         areas.         • Ingestion of eggs in food and         drink.         • Inhalation of air-borne eggs         in dust.         • Contaminated toilet seats         with larvae.

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Clinical aspect	<ol> <li>In light infections, usually there are no manifestations.</li> <li>In heavy infections, mucosal ulcerations</li> <li>lead to enteritis manifested clinically by: abdominal discomfort, colic, diarrhea, passage of mucous</li> </ol>	<ul> <li>In dogs the infection is usually asymptomatic, but with very large number of worms, high mucus secretion is found.</li> <li>In humans:         <ul> <li>Hepatic echinococcosis (leads to hepatomegaly)</li> <li>Pulmonary echinococcosis (bloody sputum is found)</li> <li>Cerebral echinococcosis (different neurological signs occur)</li> </ul> </li> <li>The hydatid cyst causes pressure on the surrounding tissues and organs.</li> </ul>	<ul> <li>Dysentery</li> <li>Abdominal pain</li> <li>Wide intestinal ulcers (Secondary infection)</li> </ul>	<ul> <li>The clinical symptoms are due to the perianal irritation caused by the migration of the gravid females.</li> <li>It causes local prurities and discomfort which occur mainly at night that leads to insomnia especially in children.</li> </ul>
Disease Transmission	When another human or the same man (autoinfection: feco-oral) ingest the eggs with food or drink	When the final host eats the intermediate host	Eating contaminated food	
Diagnosis:	1- Stool examination for finding the characteristic eggs	<ul> <li>Serological test (detection of <i>Echinococcus</i> antibodies)</li> <li>Imaging techniques supported by positive serologic tests.</li> <li>Microscopical identification of protoscoleces from surgically removed hydatid cyst</li> </ul>	<ul> <li>Laboratory diagnosis</li> <li>Trophozoite and / or cyst in stool.</li> <li>Biopsy material from large intestine (Ulcer detection).</li> </ul>	<ul> <li>Clinical picture of perineal and vaginal prurities.</li> <li>Adult worms may be found in faeces or in the perianal region.</li> <li>Larvae may be seen in faeces.</li> <li>Eggs are seldom found in Faeces except when the uterus of a gravid female</li> </ul>

Prevention and Control:	<ul> <li>Personal cleanliness</li> <li>Treatment of infected persons (treatment should be prolonged &amp; repeated and include all contact family members to avoid autoinfection and inter- family transmission of infected persons must not work as a food handlers</li> <li>Rodent control</li> </ul>	<ul> <li>Avoid contaminated food and water</li> <li>Food should be sufficiently heated to kill eggs</li> <li>Frequent hand washing is recommended</li> <li>Dogs should not eat raw meat</li> <li>Avoiding stray dogs</li> </ul>	<ul> <li>Avoiding contaminated food and water.</li> <li>Avoiding contact with pigs.</li> <li>Treatment of patients.</li> </ul>	ruptures during its migration to the perianal region. The eggs are best obtained by swabbing the perianal region by: Scotch adhesive tape swab National Institute of Health (N.I.H.) Swab Personal cleanliness The finger nails should be cut short; the hands should be washed after using the toilet and before meals Underwear's and bed sheets should be carefully handled and washed. Food and drink should be protected from dust and from hands of infected individuals. Mass treatment of the whole family
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# Mal, toxo, fas, schis

	Malaria	toxoplasmosis	fascioliasis	schstosomasis
Classifcation:	Phylum: Apicomplexa Class: Haematozoea Genus: Plasmodium 4 species : 1- Plasmodium falciparum: 2-Plasmodium vivax: 3- Plasmodium ovale: 4- plasmodium malariae:	Phylum: Apicomplexa (Sporozoa). Class: Coccidea. Genus: Toxoplasma (T.) e.g. Toxoplasma gondii	<ul> <li>Phylum: Platyhelminthes</li> <li>Class: Termatoda</li> <li>Genus: Fasciola</li> <li>3 species of can infect human:</li> <li>Fasciola hepatica Fasciola gigantica</li> <li>Fasciola buski (live in small intestine)</li> </ul>	Phylum: Platyhelminthes Class: Termatoda Genus: Schistosoma species of can infect human: – S. haematobium – S. mansoni – S. japonicum – S. mekongi – S. intercalatum
Disease:	Malaria disease	toxoplasmosis	liver Rot Halzoun syndrome (Pharyngeal fascioliasis)	
Geographical Distripution:	in tropical and subtropical regions, including parts of the Americas, Asia, and Africa.	in warm climates and at lower altitudes than in cold climates and mountainous regions	• in Europe, the Middle East, and Asia. in areas where sheep and cattle are raised.	Schistosoma mansoni is found in parts of South America and the Caribbean, Africa, and the Middle East. • Schistosoma haematobium in Africa and the Middle East. • Schistosoma japonicum in the Far East
Habitat:	Liver cell – RBCs (human) Midgut - salivary glands (mosquito)	Tachyzoite (acute stage, free or in pseudocyst in brain, liver, lung, spleen, bone marrow, eye, etc.) Bradyzoite (chronic stage, in True cyst in different organs)	<ul> <li>lives in the bile ducts of man and herbivorous animals</li> <li>The ova pass with bile to the intestine to come out with faeces.</li> </ul>	
Hosts:	<ol> <li>human (Intermediate host):</li> <li>female Anopheles (Definitive host):</li> </ol>	Definitive host: Cats. Intermediate hosts: Human. Cattle. Sheep. Camel. Pig. Dogs .Rodents. Chickens	<ul> <li>Definitive host: man.</li> <li>Reservoir host: herbivorous animals.</li> <li>Intermediate host: snail Lymnaea cailliaudi</li> </ul>	

Morphology:	Sporozoites (salivary gland) Schizonts (liver cell) dormant stage [hypnozoites] ring stage Merozoites infect (RBCs) Trophozoites mature into schizont The gametocytes: male (microgametocytes) and female (macrogametocytes)	Stages of the asexual cycle (in intermediate Host) A- Trophozoite B- Pseudocyst C- True Cyst Stages derived from cat (D.H) Sporulated oocyst Unsporulated oocyst	<ul> <li>Morphology of the adult:</li> <li>The adult is leaf-like, about 60 x 15 mm.</li> <li>It has an oral sucker</li> <li>and a larger ventral sucker</li> <li>Male reproductive system begins with two branched testes in the middle of the body</li> <li>The ovary is a branched organ</li> <li>The ovum is: <ul> <li>Size: about 150 x 80 m.</li> <li>Shape: Operculated, oval in shape.</li> <li>Colour: Yellow in colour.</li> <li>Content: Contains immature embryo.</li> </ul> </li> </ul>	Adult Worm • Separate sex( male and female worms) • The male has a gynecophoric canal in which it carries the female during the life cycle. • 10-20 mm long. Egg: • Oval (S. haematobium & S. mansoni) or Round (S. japonicum) • Translucent • Contains mature miracidium • With terminal spine (S. haematobium), lateral spine (S. mansoni), or rudimentary lateral spine (S. japonicum) Miracidium • Pyriform • Ciliated Sporocyst • Sac- like • Contain germinal cells masses Cercaria • Has a body and tail • Has furcocercous ( forked) tail • 400-600µm long
Life cycle:	<ol> <li>Asexual cycle in human (Intermediate host):         <ul> <li>Schizogony Erythrocytic cycle</li> <li>Exo-erythrocytic cycle</li> <li>Gametogong.</li> </ul> </li> <li>Sexual cycle in female Anopheles (Definitive host):         <ul> <li>Sporogony.</li> </ul> </li> </ol>		<ul> <li>Infective stage: encysted metacercaria.</li> <li>Diagnostic stage: eggs in stool.</li> <li>Mode of infection: ingestion of encysted metacercaria in water or plants.</li> </ul>	

 $m_{m} = m_{m} m_{11} + m_{12}$ 

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Clinical aspect	<ul> <li>Characteristic fever: <ul> <li>a) Shivering &amp; cold stage (30-60 minutes).</li> <li>b) Hot stage (1-4 hours, fever with hot dry skin)</li> <li>c) Sweating stage (1-2 hours, profuse sweating &amp; temp. falls.</li> <li>d) The attack is repeated at 3<sup>rd</sup> days (tertian malaria) or at 4<sup>th</sup> day (quartan malaria)</li> </ul> </li> <li>Enlarged spleen.</li> <li>Anemia due to destruction of RBCs <ul> <li>a. Microcytic.</li> <li>b. Hypochromic.</li> </ul> </li> </ul>	Infection with Toxoplasma in immuno- competent persons is generally an asymptomatic infection. acute infection may develop: A flu-like illness. Cervical lymphadenopathy. Atypical pneumonia. Acute encephalitis. Chorioretinitis. Symptoms usually resolve within a few months to a year. In immunodeficient patients or infants (congenital) infection lead to: 1-Toxoplasmic encephalitis (hydrocephalus) 2-Myocarditis. 3-Retinochoroiditis (Ocular Toxoplasma infection)	During the acute phase - abdominal pain, - hepatomegaly, - fever, - vomiting, - diarrhea, - eosinophilia, and can last for months. In the chronic phase - biliary obstruction, - inflammation, liver Rot.	Acute schistosomiasis (Katayama's fever) occur weeks after the initial infection, especially by S. mansoni and S. japonicum. Manifestations include: – fever, –cough, –abdominal pain and diarrhea, – hepatospenomegaly, – eosinophilia. Chronic infection: colonic polyposis with bloody diarrhea (S. mansoni). – portal hypertension with hematemesis and splenomegaly (S. mansoni, S. japonicum); – cystitis and ureteritis with hematuria, which can progress to bladder cancer (S. haematobium). – pulmonary hypertension (S. mansoni, S. japonicum) – glomerulonephritis (S. haematobium). – may central nervous system lesions.
Disease Transmission	By female anophilos mosqitoe	Ingestion of undercooked infected meat containing Toxoplasma cysts (true or pseudo- cyst) Ingestion of the sporulated oocyst from fecally contaminated hands or food. Organ transplantation or blood transfusion. 4- Transplacental (congenital) transmission. 5- Accidental inoculation of tachyzoites	<ul> <li>Humans can become infected by ingesting metacercariae-containing freshwater plants or metacercariae- contaminated water.</li> <li>Pharyngeal fascioliasis occur by eating raw infected liver.</li> </ul>	
Diagnosis:	<ol> <li>Clinical Diagnosis.</li> <li>Parasitological Diagnosis.</li> <li>Serological Diagnosis.</li> </ol>	1-The detection of Toxoplasma-specific antibodies (IgM & IgG) is the primary	<ul> <li>Microscopic identification of eggs is useful in the chronic (adult) stage.</li> </ul>	Microscopic identification of eggs in stool or urine is the
	4 Molecular Diagnosis.	diagnostic method to determine infection with Toxoplasma. 2-Observation of parasites in patient specimens, such as bronchoalveolar lavage or lymph node biopsy. 3-Isolation of parasites from blood or other body fluids, and intraperitoneal inoculation into mice or tissue culture. 4-Detection of parasite genetic material by PCR.	Eggs can be recovered in the stools or in material obtained by duodenal or biliary drainage.	most practical method for diagnosis. Stool examination Urine examination
Prevention and Control:	- Aovid mosqitoe - Using bed net - Using insecticide	Avoid: - eating undercooked meat - Organ transplantation or blood transfusion. - Transplacental (congenital) transmission -Clean hands	<ul> <li>Treatment of infected animals.</li> <li>Snail control.</li> <li>Avoid eating raw vegetables before washing them.</li> <li>Avoid drinking infected water.</li> <li>Avoid eating raw liver to prevent halzoun syndrome</li> </ul>	Avoidance of wading, bathing, swimming in or drinking polluted water. • Wearing protective clothes -drying of exposed skins. • Abstinence from defecation and micturation in water canals. • Mass treatment of all infected cases. • Control of Snail ( intermediat host) through: – Physical methods : changing the suitable environmental conditions like canal coverage – Biological methods :introduction of natural enemies as competitive snails or fish – Chemical methods using molluscicides eg: copper sulphate

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