1. The following are clinical characteristics associated with Crohn’s disease, except:
   a. Conjunctivitis or uveitis can be associated manifestations
   b. Ulcerative rectocolitis is part of the differential diagnosis
   c. Toxic megacolon is frequent and self-limited
   d. Acute ileitis must be differentiated from acute appendicitis

2. The main indication for the use of nuclear magnetic resonance is:
   a. Detection of anal fistulas
   b. Guide the biopsies
   c. Make the differential diagnosis with ulcerative rectocolitis
   d. It is indicated mainly in crises and exacerbations

3. Regarding Crohn’s Disease Activity Index or CDAI, it is a true that:
   a. It is considered in remission when the index is < 150
   b. It is considered severe when the index is > 150
   c. It is considered mild when the index is < 450
   d. It is considered moderate when the index is > 220

4. The following is correct on the treatment of Crohn’s disease:
   a. Ileocecal disease can be treated with mesalazine (oral route) at a dose of 3 to 4 g/day
   b. Colitis must be primarily treated with immunosuppressive agents
   c. Corticosteroids must be associated with salicylates
   d. Metronidazole should never be used before corticosteroids

5. The maintenance treatment of the disease must be carried out:
   a. In all patients
   b. Only in patients with anal fistulas
   c. In patients submitted to corticoid therapy
   d. Only after the first symptom episode

Responses to clinical scenario: borderline donors in liver transplantation

1. Those aged < 30 years. (Alternative A)
2. The possibility of using a living donor with comparable results regarding graft and receptor survival. (Alternative D)
3. The infection by cytomegalovirus is common in the postoperative period of liver transplant. (Alternative A)
4. The use of anti-HBc positive grafts in seropositive recipients does not alter survival in these receptors. (Alternative B)
5. The presence of ascites can increase the margin of safety to use larger grafts. (Alternative B)