



Test Bank



Subject:

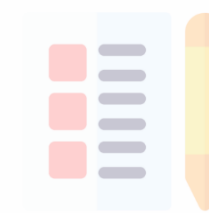
Sub Medicine Final-

Family Medicine

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Introduction to family medicine

➤ Wrong about family medicine? *

- More personal
- Uses sophisticated tools
- More consultation time
- Wide knowledge about medicine
- More comprehensive

Answer: **B**

➤ Patient primarily finishes his complaint in? *

- 23 seconds
- 45 seconds
- 2 minutes
- 3 minutes
- 4 minutes

Answer: **A**

➤ Wrong statement?

- Acute major cases about 15%
- M.I and ruptured aneurysm are life threatening
- Minor self-limiting 40%
- Chronic problems 25%

Answer: **C**

➤ Aims of family medicine...wrong?

Turn community-based medicine into hospital-based medicine

➤ Not a function of primary care according to AAFP?

Direct to the point care

➤ A female whose husband has been trying to convince her to see her doctor at the clinic might refuse due to all of the followings except?

- She is busy
- Financial reasons
- The clinic is far away
- The receptionist in the office is rude
- She only gets reassurance and advice with no medications

Answer: **E**

➤ True about family medicine?

Uncertainty and problem solving in narrow time frame is not an essential in family medicine

➤ Who will seek doctor consultation more?

Child with chronic cough that annoy him in classroom

➤ Cause of seeking medical help?

- a. Sore throat interfering with social life
- b. Gradual onset of symptoms
- c. Invisible signs
- d. Single lonely male
- e. Doctor is insensitive and does not listen

answer: **A**

Communication skills

- Communication wrong?

To be in untidy dressing ..

- True about good communication?
 - a. Increase need of investigation
 - b. Decrease time of consult
 - c. Decrease litigation
 - d. Consult time remains constant
 - e. Decrease need for investigation

Answer: **C**

- False about active listening? *******

- a. Negotiating priorities
- b. Asking open questions
- c. Summarizing
- d. Asking to repeat appropriately to make things clear
- e. Attending to verbal and non-verbal cues

Answer: **A**

- Patient with cancer, he asked you not to tell his wife, what should you do?

- a. Don't tell her and try to convince him to do so
- b. Tell her that it is benign
- c. Tell her anyway
- d. Meet them at your office and tell her

Answer: **A**

- Patient with cancer and her family don't want to tell him what is the management plan?

- a. According to patient knowledge
- b. Doctor with the patient in the best way

Answer: **READ THIS “WITHHOLDING INFORMATION”**

- The patient wants all of those from his physician except?

- a. Being judgmental
- b. Highly skilled
- c. Rule out serious diseases

Answer: **A**

- Tasks could be made at every consultation except?

- a. Management of continuing problem

- b. Presenting problem
- c. Help seeing behavior modifications
- d. Lab results interpretation

Answer: **D**

Special communication skills with women and children + adolescent and elderly

- About using toys in clinic, wrong?

Can accurately diagnose autism

- About using toys in clinic, wrong?

Need to have toys of above and below 3 years

- In communicating with adolescents, all of the following points are essential parts of the consultation

EXCEPT? *

- Treat the young person as responsible and capable of contributing to decision making
- Confidentiality is a major issue when seeing adolescents, and should not be infringed
- Use metaphor and humor (where appropriate) to build rapport
- ~~HEADSSS~~ **HEADSSS** acronym is a guide that is helpful when conducting a psychosocial assessment of adolescent
- Take a curious, non-intrusive and respectful stance

Answer: **B**

- Not true about adolescence?

- Extra care, as long as possible communication
- No approach

Answer: **B**

- Wrong in difficult patient management?

- You should ask adolescent about their activities
- HEADSSS acronym is used for elderly

Answer: **B**

- In communicating with elderly patients, one is less accurate?

- You should talk loudly and at slow speed to elderly patients with presbycusis
- One of the best ways to generate a good relationship with elderly patients is through home visits
- Always keep in mind the possibility of elder abuse
- A clinically significant feature in some elderly patients is the raising of the pain threshold which affects disease presentation
- They usually have several things “wrong with them” and use a different priority list from their doctor’s

Answer: **E**

- One of the following is NOT part of the chaperone roles?

- Offer emotional support at an embarrassing or uncomfortable time
- Protect the patient’s dignity and confidentiality at all times
- Reassure the patient if they experience distress
- Facilitate communication, especially if there is a language barrier

e. Record everything happens during the examination

Answer: **E**

➤ Strong evidence for physical activity?

Adult and adolescent

➤ What situation needs a chaperone with a female doctor?

~~No need for a chaperone for same gender patients~~

a chaperone is needed whether the person examining is male or female

Counselling

- Counselling is best described as?
 - a. Giving advice
 - b. Help patient explore his own situation
 - c. Giving directions to the patient

Answer: **B**

- Not benefit of going to GP?

Excellent at working alone

- Wrong in counselling?

Apologizing to patient about not being able to diagnose quickly is evidence of liability

- Not in counselling?

Negotiation to change patient values

- All the followings are aims of the interview except?

Ask open ended questions

Diagnostic process + pt centered medicine

➤ Pt centered medicine except?

- Social
- Concerns
- Environment
- Expectations

Answer: **C**

➤ Which of the following statements is FALSE regarding patient centered medicine?*

- Patient centered medicine accentuates doctor patient relationship
- Care of the family life cycle
- It includes the patient's beliefs, ideas, concerns and expectations
- Patient centered medicine activates patient's involvement in treatment which does not have a negative impact on the treatment outcome
- Patient centered medicine does not affect the compliance of the patients

Answer: **E**

➤ Patient-centered clinicians use the following behavior(s)?

- Calm listening with an absence of distracting movements such as fidgeting
- Frequent interruptions of the patient to seek clarification indicate concern and commitment to clarity
- Lean back in the chair with arms and legs crossed to indicate that the clinician has all the time in the world
- Avoid repeatedly asking the patient to provide feedback
- Avoid eye contact because it threatens the patient

Answer: **A**

➤ Not error during dx?

Medical students including all diff based on probability and seriousness

➤ 30-year-old male patient, a businessman, usually comes to the family medicine department for checkup (the past 3 years). you have seen him only once 6 months ago during a regular checkup and he was perfectly fine. he is a nonsmoker. He comes to your clinic terrified wanting to see you ASAP because in the morning while he was driving he had a chest pain that was referred to his neck and arm, then he started feeling numbness in his hand up until now. your diagnosis:

- MI – Anxiety – Musclo
- Anxiety – MI - Musclo
- MSS – Anxiety – MI
- Cardiovascular

Answer: **B (most probable--most dangerous--treatable--rarity)**

➤ Principles of diagnosis, except? *

- a. Probability
- b. Certainty
- c. Treatability
- d. Rarity

Answer: **B**

➤ None is right except?

Diagnosis is a state of probability rather than certainty

➤ Wrong about medicine in the past?

- a. Patients could express feelings and expectations
- b. Doctor had authority
- c. Paternalistic
- d. Domineering
- e. treating somatic/physical signs only

Answer: **A**

➤ New medicine compared to past, false?

- a. Doctor only puts management plan
- b. turn hospital-based medicine to community-based
- c. Decrease follow up
- d. Diagnosis is a state of probability rather than certainty

Answer: **A**

➤ Regarding hypothetic**deductive** method of problem solving one of these statements is TRUE?

- a. A comprehensive history including systemic enquiry has to be taken from every patient irrespective of his complaint
- b. Rule-in syndrome is usually a consequence of poorly focused history taking
- c. A diagnosis is usually a statement of certainty rather than probability
- d. Errors in diagnosis result from lack of factual knowledge rather than errors in the diagnostic process
- e. Using time as diagnostic tool does not always avoid unnecessary painful and costly investigations

Answer: **E**

➤ Wrong about hyp**deductive** method? **

Take comprehensive history from every patient

➤ Pt-dr communication wrong?

- a. Always keep eye contact with pt
- b. You should always put pt at ease and comfort

Answer: **B** {not sure 😞}

- A 65-year-old male patient complaining of neck pain for several weeks, he denies injury or illness. The pain is aggravated by movement, worse after activities and there is a dull ache in the interscapular region. His examination reveals limited range of motion, tenderness, radiation to his arm, no neurological signs, which one of the following is true?*
- The patient will benefit from prednisolone treatment
 - The patient most likely has cervical intervertebral disc, mechanical pain, tension headache, metastasis
 - The patient most likely has mechanical pain, osteoarthritis, whiplash, and metastasis
 - Applying pressure on the head will result in peripheral numbness
 - During the exam you expect to see erythematous change on skin

Answer: **B**

- about differential diagnosis one wrong statement?
- 40-year-old male with 3 weeks cough (chronic bronchitis, bronchiolitis, whooping, pneumonia)
 - 20-year-old girl of 3 days cough (URTI, asthma, ...)
 - Use the 3 phase diagnosis

Answer: **A**

- Man recently divorced exercises, came worried and having neck pain, your ddx?
- 1-anxiety 2- MS pain 3-angina
 - 1- MS pain 2- anxiety 3- MI
 - 1- MI 2- pericarditis

Answer: **A**

- Patient has seven children presents with symptoms of tension headache, false? **
- Your list (tension, migraine, cervical spondylosis, >>>, tumor)
 - Since you expect tension headache you shouldn't ask about symptoms of migraine
 - You can tell her about relaxation techniques for tension headache

Answer: **B**

- A 50 year old female patient complaining of 1 year duration of headache after she has been widowed a year ago left with 7 children...wrong? **
- you think of migraine...tension.. spondylosis...
 - if you are sure it is tension you give her antidepressants and advise her to try simple relaxation techniques
 - if you think of tension you inquire about the prodromal phase of migraine
 - ask about symptoms of menopause

Answer: **B**

➤ 30-year-old, nurse, newly married, ill father, complaining of tiredness for the past month which is wrong?

- a. May not be due to exhaustion
- b. May be due to anemia
- c. Sometimes you may need to ask about lifestyle
- d. Ask about symptoms of hyperthyroid
- e. Maybe hypertensive or diabetic

Answer: **D**

➤ A 32-year-old teacher, a mother of five children presented complaining of tiredness for the last 4 months.

All of these statements are correct except one?

- a. during history taking, we have to know more about the financial difficulties and if her children had behavioral problems
- b. in female patients in her age group we have to ask more questions about pregnancy and menstruation
- c. we have to depend on (whole person medicine) while ranking the diagnostic probabilities
- d. if she gave a history of weight loss, the diagnostic probabilities are as follow; pulmonary TB, anemia, thyrotoxicosis and malignancy
- e. we have to ask about exhaustion following any form of exertion and lasting for a long period

Answer: **D**

➤ 40-year-old female, lost her husband 6 months ago came with fatigue, headache, ... correct?

depression\anxiety -> anemia -> thyrotoxicosis -> malignancy -> TB

➤ 12 y/o boy with history of headache for 3 days, his father died 1 month ago, your ddx is?

- a. Sore throat, meningitis, brain tumor
- b. URTI, teeth pain, eye problem, but meningitis and brain tumor are far
- c. Psychological
- d. Tooth pain

Answer: **B**

➤ Red flag in headache?

- a. New onset after age 45
- b. Immunocompromised patient
- c. Neck pain
- d. Worst at the end of the day
- e. Eye itching

Answer: **B**

➤ Least likely of the following back pain cases to be benign?

- a. 15 yo with moderate back pain

b. 40 yo male who had surgery 9 months ago

c. Mild pain in 50 yo female

Answer: **B**

➤ Woman with back pain, wrong question?

You think your pain increases by movement?

➤ Woman with knee pain since a month, increased with movement, no tenderness?

Most likely differential is osteoarthritis, patella femoral syndrome..

➤ 70 year old with diarrhea of 3 months, no bleeding or mucus, some vomiting, wrong about the prediagnostic interpretation?

malignancy is the most common cause

Problem oriented medical records (POMR)

- True about POMR and SOMR?

POMR need updating the problem list constantly

- When to dispose a medical record?

34-year-old patient that her last visit was 16 years ago when she was pregnant

- About electronic medical records compared to paper?

EMRs need encryption

- Wrong in good communication?

Audio tape equals video tape in self-auditing

- Which is false? *

Tape recording is as effective as video recording in reviewing your skills only cheaper and easier

consultation

➤ According to Stott and Davis, the consultation includes all of the following tasks EXCEPT?

- To identify the presenting problem
- To promote health
- To manage continuing problems
- To identify the hidden patient's agenda
- To modify help-seeking behavior

Answer: **D**

➤ Mother that was too exhausted, question indicates open information gathering?

How's your sleep?

➤ Doctor doesn't use which type of questions?

- Open-ended
- Open to closed
- Checking

d. Problem survey

Answer: ~~X~~

➤ Which of the following is false?

- Use open-ended questions to let the patient feel free and tell all he wants
- At the beginning of consultation don't allow the patient to tell his list of interests, start by asking about symptoms instead

Answer: **B**

➤ Open-ended question?

how can I help u?

➤ Family doctor should be able to do all of the following except?

- Urgent intervention to minimize risk
- Use time when it's safe
- Limit the use of investigations
- Management should be according to the last updates

Answer: **B {not sure 😞}**

➤ While interviewing/history taking the following must be considered by the physician except? *

- Uses the instruments commonly used in family practice in a competent and sensitive manner
- Uses silence appropriately
- Recognizes patients' verbal and non-verbal cues
- Exhibits well-organized approach to information gathering

e. Seeks clarification of words used by patients as appropriate

Answer: **A**

- All cause failure interview except?

Systemic approach

- True about communication?

Pacing is a way to establish rapport

- Wrong about establishing rapport?

(not: talking about a book they have/pacing language/copying body language, forgot the other options)

- True in interview?

You should watch not only patient gestures, but yourself and reactions

- Not essential in interview?

Therapeutic procedures

- Regarding questioning during the consultation, one of the following statements is false?

- Summarizing the patient's message in your own words is called: facilitation
- Closed-ended questions control the communication and limit verbal communication
- "When did you first start to experience these symptoms?" is a recall question
- "You said you were feeling miserable, could you tell me more?" is a leading question
- Starting with open questions and ending with closed questions is an example of funneling

Answer: **A**

- Wrong question combination?

Leading question – do you complain of something besides your pain?

Breaking bad news

- Before letting your patient leave after breaking bad news one of the following is mandatory?
- You should not provide contact information so that the patient can contact you whenever he wants
 - You should make your best to explain the next step to the patient
 - Try to arrange for follow-up whenever the patient needs
 - You should not emphasize if the patient understands the diagnosis well this time
 - You should explain all the details related to the diagnosis
- Answer: **E**
- You receive the results of a breast mass biopsy which show adenocarcinoma. The 35-year-old patient returns to your office today to see the results. What is the next step in the process of informing her that she has cancer?
- Explain that she needs imaging of the liver and bone to get more information
 - Ask her what she knows and understands up to this point
 - At this stage, no need to tell her about the results and the diagnosis
 - Tell her the diagnosis straightforward
 - Ask her what she wants to know about the surgery
- Answer: **B**
- Patient turned out to have adenocarcinoma of colon, what to do next? *
- Ask patient what she wants to know
 - Ask patient what she knows so far and understands
- Answer: **B**
- A male patient referred to you due to inability to conceive after 2 years of marriage, you done him a semen analysis test which came to be azoospermia... which of the following you do?
- Call the patient and tell him that you need to talk to him about the result, and he may bring anybody with him
 - Tell him at the phone to grieve at home
 - Tell him to bring his wife as she should know
 - Tell him to come alone
- Answer: **A**
- During a breaking bad news session your patient becomes angry. The best way to deal with him is?
- Call the security
 - Stop the consultation
 - Talk in a loud voice louder than his
 - Keep calm and do not treat anger with anger

e. Ignore him and leave the room

Answer: **D**

➤ A mother had abortion, best way to show empathy?

a. Silence

b. "I understand how you feel like"

c. "Sorry, this actually happens but doesn't mean that it will happen in further pregnancies"

d. "It must be a horrible thing to go through"

e. All of the above

Answer: **B**

➤ Pt crying to you because she was divorced the best to do?

a. Silence

b. "Sadly, that it's common to happen ..etc."

c. "I can feel exactly like you"

d. Tell her that she can be sad as this occurred = "she has the right to be sad as this occurred"

e. All are true

Answer: ~~C~~

YOU MUST NOT SAY ANYTHING SIMILAR TO "I KNOW EXACTLY HOW YOU FEEL"!!!!

➤ The one who loss his mother and come complain and talk in details.. questions?

a. Interrupt, refocus

b. Ask how it affected him..

Answer: **B**

➤ True in breaking bad news?

a. ABCDE is the standard of care protocol

b. SPIKES protocol has shown to be superior to all others

c. 95% pts wish frank precise diagnosis

Answer: **C**

➤ Deliver bad new to favorite patient?

Assess patient feeling **(SPIKES)**

➤ Wrong about the preparation for breaking bad news?

Choose the appointment during your busy working hours

➤ Not a coping mechanism in breaking bad news?

Disengagement

➤ Wrong about breaking bad news?

Be aware that the patient may not understand essential ideas, use diagrams and repetition

➤ Wrong about summarizing in breaking bad news?

Ask them to read about their disease on the internet

➤ Wrong in ABCDE approach to breaking bad news?

B stands for Being the patient's support

Evidence based medicine "EBM"

- Regarding five steps model of evidence-based medicine ALL ARE TRUE EXCEPT?
 - a. Track down with maximum efficiency the best evidence with which to answer them
 - b. Critically appraise that evidence for its accountability
 - c. Evaluate your performance
 - d. Convert information needs into answerable questions
 - e. Apply the result of this appraisal in your practiceAnswer: **B**

- In an Alzheimer's disease drug study, the exclusion criteria include previous stroke, a history of vascular dementia, and renal disease. From this we can conclude?
 - a. The patients in this study are so finely selected that the results cannot be applied to the general Alzheimer's disease population and this is an example of "selection bias"
 - b. The patients in this study are so finely selected that the results cannot be applied to the general Alzheimer's disease population and the results should be generalizable if the medication works so well in this study
 - c. This is an example of "selection bias"
 - d. The results should be generalizable if the medication works so well in this study
 - e. The patients in this study are so finely selected that the results cannot be applied to the general Alzheimer's disease populationAnswer: **A**

- In a diabetes drug study, the exclusion criteria include renal disease, a history of heart failure, coronary artery disease, and peripheral vascular disease. From this we can conclude?
 - a. The results should be generalizable to our general clinic population given the fact that the medication worked so well in this study and this is an example of "selection bias"
 - b. This is an example of "selection bias"
 - c. The patients in this study are so finely selected that the results cannot be applied to our general clinic population
 - d. The results should be generalizable to our general clinic population given the fact that the medication worked so well in this study
 - e. The patients in this study are so finely selected that the results cannot be applied to our general clinic population and this is an example of "selection bias"Answer: **E**

- Advantage of case control over cohort?

{No answers provided} => READ THIS "TYPES OF STUDIES"

➤ You plan to study two groups of patients (A and B) to see if variable XYZ makes any difference in death or recurrent stroke. There is no randomization and there are no interventions. You are just reviewing records to see how each group did. Subjects in group A had a stroke and then had another stroke or died a year later. Subjects in group B had a stroke but were alive with no recurrent stroke at the time of the study. You assess the presence of XYZ in each group. This type of study is called a? *

- a. Prospective study
- b. Meta-analysis study
- c. Case-control study
- d. Cohort study
- e. Randomized control study

Answer: ~~D~~

➤ A MEDLINE database search was conducted using keywords melanoma, sunblock, skin..etc. and yielded 8 articles describing effects of sun on melanoma, all figures were merged in one big statistical study showed results, what is the type of the study?

- a. Cohort
- b. Randomized controlled
- c. Meta-analysis
- d. Case-control

Answer: C

➤ 2 volleyball teams were studied, one given sunblock SPF35 and the other not given anything, then following up and comparing effect on skin, what is the study type?

- a. Cohort
- b. Randomized controlled
- c. Meta-analysis
- d. Case-control

Answer: B

➤ The p value that indicates the lowest probability the results were from chance?

P<0.01

➤ Not an observational study?

Systemic review

➤ Which of the following regarding the USPSTF recommendations is mismatched?

- a. Means that: the USPSTF recommends the service for all patients and for all age groups. There is high certainty that the net benefit is substantial

- b. Means that: the USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined
- c. Means that: the USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits
- d. Means that: the USPSTF recommends the service. There is high certainty that the net benefits is moderate or there is moderate certainty that the net benefit is moderate to substantial
- e. Means that: the USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small.

Answer: **A**

approach to geriatric patients

- Wrong about theories of aging?

Dysfunction of the immune system is not related to life expectancy

- A finding that needs further investigation in a geriatric patient?

S3 on heart auscultation

- Polypharmacy number of drugs?

- 3
- 5
- 7
- 10

Answer: **B**

- True about people with multiple diseases?

Multimorbidity is increased risk factor to polypharmacy

- 70-year-old with decreased interest, husband died three years ago, lives alone, management?

Do Geriatric Depression Scale Assessment or PHQ 9

- Wrong about functional assessment in geriatrics?

Executive function and judgement are needed to perform ADL

- An 80-year-old with insomnia, wrong?

Severe heart failure and stroke are common geriatrics syndrome

- Dementia?

Impaired memory

- About 87 years old male and driving, had episodes of confusion, not to do?

- CBC
- Referral to neurologist for dementia

Answer: **B**

- Not a physiological change in geriatrics?

Homeostenosis is equivalent to hemostasis in adults

Management plan PBL

- Regarding the principles of patient management ALL ARE TRUE except? **
 - a. The doctor must fully understand the patient and how their problem affects them
 - b. Give the patient the responsibility for the problem
 - c. Reaching a shared understanding of the problem with the patient
 - d. Investigation to monitor a patient's progress only
 - e. Negotiate the management plan

Answer: **D**

- Wrong- management plan?

Made by the doctor alone because he knows more about condition of his pt

- All the followings influence the outcome of the management plan except?

The patient's attitude towards the doctor

- The most imp factor to make the pt more compliant with drugs?

Knowing about the disease

- The most important for patient to take drugs correctly?

Patient understanding of the illness

- Kid with type 1 DM not adherent?

Tell him about his illness...

- 25-year-old, hyperlipidemic, overweight, started her on statin, came back with increased weight, she stopped the statin, what to do?

Understand her ideas, concerns and expectations and share in understanding the management

- Referral. which is wrong?

- a. Doesn't include referral to books
- b. Doctors have to be proficient
- c. Could be to another colleague
- d. When you know that you can't solve the problem
- e. Could be to senior doctor

Answer: **A**

anticipatory care "preventive medicine and health promotion"

➤ Primary prevention?

- Decrease prevalence
- Decrease incidence
- Increase prevalence
- Increase incidence

Answer: **B**

➤ Tertiary prevention, What of the following conditions?

- Acute hospital setting
- Rehab after stroke
- Giving vaccines
- Screening

Answer: **B**

➤ Regarding screening interval for high blood pressure, one is true?

- Every 2 years for patient aged 18 and more
- No need to repeat blood pressure measure if the initial reading is less than 120/80
- Annually for patients aged 40 and more
- Every 7 years for patient aged 35 and more
- Every other year for patient aged 50 and more

Answer: **C**

➤ Regarding screening interval for high blood pressure, one is true?

- Every 3 years for patient aged 18 and more
- No need to repeat blood pressure measure if the initial reading is less than 110/70
- Yearly for a 40-year-old man aged
- Every 5 years for patient aged 35 and more
- Every other year for patient aged 55 and more

Answer: **C**

➤ Which of the following screening tests is NOT indicated?

- Mammography for 75-year-old women
- Pap smear for any woman 40-year-old and older
- Blood pressure measurement for 30-year-old man
- Screen a young woman for postpartum depression in her postnatal visit
- CT scan for 55-year-old male with a 40-year pack smoking history

Answer: **A**

- You are seeing a 72-year-old woman because of constipation that started last year and has worsened ever since. She has a history of well controlled diabetes and cognitive impairment. While managing this patient, you take into account all of the following EXCEPT?
- Colonoscopy should not be done if her life expectancy was less than 5 years
 - If she has a score of 3/6 in Katz index, then she will likely benefit from colonoscopy
 - If the patient's cognitive impairment was advanced then she shouldn't undergo
 - Colonoscopy benefit to risk ratio always should always be considered in similar scenarios
 - Colonoscopy is only indicated if she is fit and independent

Answer: **E**

- Which of the following is true concerning to USPSTF guidelines?
- Screening for breast ca by mammography every 1-2 years after age 40
 - Screening for diabetes in all obese age 30-70
 - Screening for GDM after 28 wk gestation

Answer: **A**

- Haya is a 60 yo female diabetic, all of the following screening are indicated according to USPSTF except?
- Mammography every 1-2 year
 - Colonoscopy
 - Bone densitometry

Answer: **C**

- 31 y/o married lady with 3 children, her Pap smear result was negative, next pap smear done after?
- 3 years
 - 5 years

Answer: **A**

- Pneumococcal vaccine is considered?
- Primary prevention
 - Secondary prevention
 - Tertiary prevention

Answer: **A**

- Not part of anticipatory care for a 45-year-old smoker?
- Talking about stopping smoking
 - Do routine chest X-ray yearly for lung cancer
 - Pap smear
 - Measure blood pressure
 - Mammogram

Answer: **B**

➤ All are part of screening for 63 y/o lady except?

- a. Occult blood
- b. Tumor marker
- c. Mammogram
- d. Pap smear

Answer: **B**

➤ 46, did PAP 6 years ago (free) and took HPV vaccine 6 years ago. Correct screening according to USPTSF?

Do pap smear and HPV test every 5 years

➤ Question about mammogram done 18 years ago next step?

Mammogram in 6 months (continue routine screening)

➤ Screening for AAA?

67 years smoker hypertensive

➤ 60, smoker for 30 years, quit three ago, did colonoscopy 6 years ago (free). Correct screening according to USPTFS?

do yearly low dose CT scan

➤ Patient health questioner-9 (PHQ-9) assess symptoms from?

2 weeks

➤ According to we give aspirin to prevent ischemic strokes to?

- a. Male 45-75 yo
- b. Male 55-80 yo
- c. Female 45-75 yo
- d. Female 55-75
- e. None regardless of sex and age

Answer: **A**

➤ We give aspirin to prevent CAD to?

- a. Men 45-79
- b. Women 55-79

Answer: **A**

➤ PHQ-9 is?

- a. A screening tool for depression
- b. Used in treatment of depression
- c. Score above 20 means severe depression
- d. Maximum score is 27

Answer: **{all the above is correct 😊}**

➤ Screening question for depression, patient is diabetic and hypertensive?

- a. 2 weeks ago, he wanted to hurt himself
- b. 2 weeks duration of change in appetite
- c. 1 month of feeling down
- d. 1 month of disturbed sleep

Answer: {not sure 😞}

➤ percentage of people who have positive test for the disease in question?

- a. Sensitivity
- b. Specificity
- c. Positive predictive value
- d. Negative predictive value

Answer: ~~B~~

➤ Which must be in a screening tool?

- a. High sensitivity
- b. High specificity
- c. High positive predictive value
- d. High negative predictive value
- e. All of the above

Answer: **E**

DR-PT relationship "DPR" and difficult patients

- An adult patient in a medical ward started to insist to be examined by one particular doctor and that the same doctor comes to his bed first and wants to spend longer time in the company of the same doctor. The doctor, on account of his physical appearance, mannerism, or personality qualities, reminds the patient of his or her father. This is can be explained by the phenomenon of?
- Informed consent
 - Counter transference
 - Transference
 - Confidentiality
 - Resistance

Answer: **C**

- One of the following is NOT part of management of difficult patient?
- Structure a program for them, for example visit every 2 weeks for 15 min
 - During the consultation, demonstrate your genuine interest in the person's life, garden, work and so on; show less interest, even boredom, for the litany of complaints
 - Accept their symptoms as expressions of their neurosis
 - Stop seeing them and advise them no to come to the clinic
 - Give up trying to cure them

Answer: **D**

- For patients who present with multiple complains, ONE STATEMENT IS WRONG? **
- Are not annoying
 - Mostly they are hypochondriacs
 - Are not demanding
 - Should not be considered to need more attention
 - Are mostly depressed

Answer: **D**

- After you listen to her worries your approach will be:
- You will give her another drug without discussion because you are worry about her health and your priority is to protect her from the complications, so this is not the proper time to listen to your patient
 - Ask more about her worries, feeling, ideas and concerns then share with her the options of the management
 - Ask more about her worries, feeling, ideas and concerns but you will not do anything for her because she has the right to refuse any medication and you respect her choice

- d. Ask more about her worries, feeling, ideas and concerns then give her the plan of the management without sharing her in the decision
- e. You should not ask about her worries, feelings, ideas and concerns anymore to not waste your time in the discussion

Answer: **B**

- Dependence?

Is a consequence of dr/pt long-term relationship

- Good doctor pt relation what's not benefit for the dr?

More follow up visits

- Wrong about dr-pt relationship?

Patients have the same attitude

- Dr pt relationship should be:

- a. Human relationship
- b. Show empathy
- c. Warm nonverbal communication
- d. All of the above

Answer: **D**

- What the patient needs from patient-dr relationship?

- a. Listening
- b. Competence
- c. Sympathy vs empathy
- d. Telling truth

Answer: **{all the above is correct 😊}**

- What is true about somatising patient?

- a. Hallucinations and delusions
- b. Drug seeking
- c. Multiple vague unrelated symptoms

Answer: **C**

- True about dealing with a patient angry of your colleague?

Ask about what's causing them this concern

Smoking cessation

- True about nicotine replacement therapy?

Need extra caution in cardiovascular disease

- Most effective way of smoking cessation?

Varenicline (Chantix)

Miscellaneous

- Which is false about low back pain? **
- If bilateral indicate for imaging
 - If presented with cauda equina need urgent surgical referral
 - Must be less than 6 weeks to be acute
 - We use short period opioid as third line treatment
 - We can use acetaminophen up to 2g instead of NSAIDs

Answer: **E**

- 24-year-old male with acute low back pain what to do?
- Resume exercise as tolerated
 - Back muscles strengthening

Answer: **B**

- Wrong about doing a pap smear to a patient?

Tell her that she can stop you when she feels pain only

- Osteoporosis associated with?
- Prolactinoma
 - Hypogonadism
 - Prostate cancer

Answer: **B**

- Child decrease appetite, father died?

Psychologist

- Woman with crampy abdominal pain, increase with stress and relieved with defecation?
- Therapeutic doctor patient relationship
 - Intensive psychotherapy

Answer: **A**

- After carpal tunnel surgery?

NSAIDs

- Who to give herpes zoster vaccine?
- HIV
 - Sickle cell anemia
 - Post GI surgery
 - Patient had VZV as a child
 - Patient had shingles + above 60

Answer: **E**

➤ We give pneumovax in a healthy nonsmoker 50-year-old male?

- a. yearly
- b. each 5 year
- c. once
- d. each 20 years
- e. to immunocompromised patient

Answer: **E**

➤ Pneumococcal vaccines?

13 stronger antibody reaction and 23 cover more pathogens

➤ All of the following need flu vaccine except?

- a. Food controlled diabetic
- b. Chronic disease patient
- c. Immunocompromised
- d. Ill patient and his cancer

Answer: **A**

➤ All true about acute bronchiolitis except?

- a. Mostly caused by virus
- b. Diagnosed by chest x ray
- c. Clear within 2-3 weeks

Answer: **B**

➤ Woman 54 with microcytic anemia?

- a. Refer to hematologist
- b. Observe 3 months
- c. Give ferrous sulphate
- d. Upper and lower endoscopy

Answer: **D**

➤ Wrong about calcium pyrophosphate deposition disease?

- a. Affects the knee most commonly
- b. Deposition of crystals in synovium and adjacent tissue
- c. Classically affects 4th and 5th MCP joints

Answer: **C**

➤ 52 yo male with one out of three positive hemocult blood stool, he has had hemorrhoids but now stable, you order another hemocult and it is negative, what is the most appropriate next step?

- a. flexible sigmoidoscopy
- b. CBC

c. Admission for further investigation

Answer: **A**

➤ Metabolic syndrome, which is right?

a. Increased abdominal girth, men >88 cm

b. Women > 88

c. Triglyceride \leq 170

d. bp >139/89

e. glucose >125

Answer: **B**

➤ A hypothyroid patient has all of the following except?

a. Pretibial myxedema

b. Brittle hair

c. Bradycardia

d. Goiter

Answer: **A**

➤ Patient with recent HTN, ttt of choice?

a. B-blocker

b. ACEI

c. Thiazide

d. Ca channel blocker

e. Combination

Answer: **B**

➤ Idiosyncrasy?

a. Type of hyperreactivity reaction

b. Acquired

c. Genetic

d. Dose independent

Answer: **C+D**

➤ H ... diagram

a. What has happened to me

b. Why me?

c. Why now?

d. All of above

Answer: **D**

➤ patient with HBsAg -ve, HBsAb +ve, what does he have?

- a. Chronic carrier
- b. Acute infection
- c. He is immune

Answer: **C**

➤ Patient with pneumonia, you would admit him if?

- a. WBCs above 7000×10^6
- b. Urea = 18
- c. Diabetic with random blood sugar above 80
- d. He has good family support

Answer: **A**

➤ Which of the following is most likely to be misunderstood by the patient?

- a. “Now we have to think of withdrawal of care”
- b. “We’d like to offer you all help to control your symptoms”
- c. “If you became terminally ill would you like to be put on artificial ventilator”

Answer: **A**

➤ Girl with abdominal pain and constipation since a week, concerned since her father had colon cancer, management?

Reassure and advice lifestyle modification

➤ Lady with waist circumference 103cm, bp 135/90, FBS 120, HDL 25, cholesterol 170, what is the most appropriate management?

- a. Serious lifestyle changes
- b. Start on antihypertensive drugs
- c. Give thyroxine

Answer: **A**

➤ Which is wrong about female patient, 60y/o presented with vertigo?

- a. It’s present in 10% of population
- b. Most common cause is transit ischemia
- c. BPPV occurs for seconds and neuritis for several hours
- d. Nystagmus indicates labyrinthitis

Answer: **B**

➤ Wrong about vertigo?

- a. BPV lasts from minutes to hours
- b. You should ask about family history of vertigo and deafness when you suspect Meniere

Answer: **A**

➤ Wrong about vertigo?

- a. Meniere's disease is the most common
- b. Presence of nystagmus suggest labyrinthine cause which responds to
- c. Labyrinthitis usually lasts hours, while BPV is seconds

Answer: **A**

➤ Wrong?

Anxiety increases pain tolerance

➤ A drug that doesn't cause bleeding?

- a. NSAIDs
- b. Warfarin
- c. ASA
- d. OCP

Answer: **D**

BEST OF LUCK <3