

# MCQS<sup>Q&As</sup>

Multiple-choice questions for general practitioner (GP) Doctor

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**QUESTION 1**

A 45-year-old man on lithium for a bipolar disorder developed congestive heart failure 2 weeks ago. He now presents with drowsiness, nausea, vomiting, blurred vision and coarse tremors.

Which of the following concurrent medications, if taken in combination with lithium, would be most likely to cause these symptoms?

- A. Acetazolamide
- B. Furosemide
- C. Hydrochlorothiazide
- D. Spironolactone

Correct Answer: C

Hydrochlorothiazide Approximately 95% of a single dose of lithium is eliminated in the urine. The drug is handled by the kidneys in the same manner as sodium, ie most of the filtered lithium is reabsorbed in the proximal tubule. Hence loading with sodium will increase lithium excretion, while sodium depletion will promote the retention of lithium. All diuretics decrease renal lithium clearance. However, thiazide diuretics cause the greatest retention of lithium amongst all diuretics.

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**QUESTION 2**

Patient came with pitting edema grade 1, where fluid is will accumulate.

- A. Veniole
- B. Arteriole
- C. Interstitial
- D. Capillary

Correct Answer: C

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**QUESTION 3**

A person with suspicion of neisseria gonorrhoeae infection. Which test is necessary?

- A. blood culture
- B. urine culture
- C. throat swab culture on Thayer-Martin agar

Correct Answer: C

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**QUESTION 4**

A 6-weeks postpartum presents with palpitations, tremors, insomnia. Diagnosis?

- A. Hashimoto Thyroiditis
- B. Dysmorphogenesis
- C. Postpartum Thyroiditis

Correct Answer: C

During postpartum thyroiditis, you might experience two phases. The release of thyroid hormone might first cause mild signs and symptoms similar to those of an (hyperthyroidism), including: Anxiety Irritability Rapid heartbeat or palpitations Unexplained weight loss Increased sensitivity to heat Fatigue Tremor Insomnia These signs and symptoms typically occur one to four months after delivery and last one to the Later, as thyroid cells become impaired, mild signs and symptoms of underactive thyroid (hypot develop, including: Lack of energy Increased sensitivity to cold Constipation Dry skin Difficulty concentrating Aches and pains These signs and symptoms typically occur four to eight months after delivery and can last from months. Keep in mind, however, that some women who have postpartum thyroiditis develop symptoms of or only hypothyroidism, but not both.

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**QUESTION 5**

A 14-year-old girl presents with primary amenorrhea and a short stature.

What is the most likely diagnosis?

- A. Down's syndrome
- B. Fragile X syndrome
- C. Turner's syndrome
- D. Klinefelter's syndrome
- E. Normal finding

Correct Answer: C

Down's syndrome and Fragile x syndrome don't have primary amenorrhea. Klinefelter's patients are tall males. So the likely diagnosis is Turner's syndrome.

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**QUESTION 6**

A 47-year old man comes to the emergency department with fever, headache, photophobia, and a stiff neck.

What is the next best step in the management of this patient?

- A. Head Ct scan
- B. Lumbar puncture
- C. Ceftriaxone and vancomycin

Correct Answer: B

When you suspect bacterial meningitis, administer antibiotics quickly. Further, do blood cultures stat simultaneously with a lumbar puncture (LP), or immediately prior. Penicillin can never be used as empiric therapy for meningitis; it is not sufficiently broad in coverage to be effective empiric therapy. In this case, perform the LP.

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**QUESTION 7**

A 54-year-old patient wakes up with right sided weakness. His current medication is bendroflumethiazide for

BP=160/90mmHg. CT shows left cerebral infarct.

What is the most appropriate treatment?

- A. Alteplase
- B. Aspirin
- C. Simvastatin
- D. Dipyridamole
- E. Clopidogrel

Correct Answer: A

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**QUESTION 8**

A 27-year-old, generally healthy woman comes to the office with burning on urination. There are 50 white cells on the urinalysis.

What is the next best step in management?

- A. Treat with TMP/SMX for 3 days
- B. Perform a renal ultrasound
- C. Treat with ciprofloxacin for 7 days
- D. Wait for results of urine culture

Correct Answer: A

When there are clear symptoms of cystitis and white cells in the urine, it is not necessary to obtain a urine culture or to wait for results of either the culture or a sonogram. For uncomplicated cystitis, go straight to treatment for 3 days. Ultrasound is important in male patients, as it is unusual for a male patient to have a urinary tract infection in the absence of an anatomic abnormality.

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**QUESTION 9**

A study was done amongst 2 hospitals for the equal number of cancer patients. It was noted that hospital A higher of mortality than hospital B for treated cancer patients.

What is the study done here classified as?

- A. Cohort
- B. Observational
- C. Retrospective
- D. Case study

Correct Answer: A

A cohort is a group of people who share a common characteristic or experience within (e.g., are born, are exposed to a drug or vaccine or pollutant, or undergo a certain medical procedure].

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#### QUESTION 10

Which vitamin has a protective effect against colon cancer?

- A. Vitamin C
- B. Vitamin D
- C. Folic acid
- D. Vitamin K

Correct Answer: B

Calcium and vitamin D Calcium may protect against bowel cancer, according to the World Cancer Research Fund. A 2004 meta analysis showed that people with the highest levels of calcium intake (from food and supplements) reduced their risk of bowel cancer by 22% compared to people with the lowest calcium intake. However, 2 meta analyses in 2010 found that calcium supplements had no effect on bowel cancer risk in the general population. But they did find a link between calcium intake and a reduced risk of polyps coming back in the bowel after previous treatment. Polyps are growths in the bowel that may develop into cancer over a long period of time, if left untreated. To reduce bowel cancer risk, it may be better to take vitamin D and calcium together. We need vitamin D to be able to absorb calcium. A large randomized controlled trial in 2006 showed that only the people with high intakes of both calcium and vitamin D had a reduced risk of bowel cancer. Other studies have shown that people with the highest intakes of vitamin D have a lower risk of bowel cancer and bowel polyps. Dairy There is some evidence that drinking milk reduces the risk of bowel cancer. A review in 2011 showed that the benefit of dairy in reducing bowel cancer risk was only seen at levels over 100 grams (g) a day. Having 500 to 800g milk a day reduced bowel cancer risk by 20 to 30%. One pint, or 0.5 liters, of semi skimmed milk weighs about 550g. The effect of milk on lowering bowel cancer risk may be partly due to the calcium. But milk contains many other substances which may also play a role. There is limited evidence that eating cheese may increase the risk of bowel cancer. It is not clear how cheese may increase the risk, but it may have something to do with the saturated fatty acids.

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#### QUESTION 11

Chronic pancreatitis, investigation of choice?

- A. ERCP
- B. MRCP
- C. MRI
- D. CECT

Correct Answer: A

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#### QUESTION 12

A 20-year-old boy is hit by a car while riding his bicycle. He presents to the ED with severe groin pain after falling on the central bar of the bike. Physical examination reveals blood at the urethral meatus and a high-riding prostate.

What is the most appropriate next step in the management of this patient?

- A. Get a retrograde urethrogram
- B. Discharge the patient with reassurance
- C. CBC and electrolytes
- D. Empiric antibiotics

Correct Answer: A

The patient has a urethral disruption that needs to be evaluated. A kidney, ureters, and bladder (KUB) x-ray followed by a retrograde urethrogram must be conducted prior to any other tests. Placing a Foley catheter without such an imaging modality can lead to further urethral damage. The step after urethrogram is a Foley catheter placement to aid in urination. There is no role for antibiotics for trauma without evidence of infection.

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#### QUESTION 13

A 30 years old woman presents with acute headache. She complains of seeing halos especially at night.

What is likely defect?

- A. Mono-ocular field loss
- B. Central scotoma
- C. Paracentral scotoma
- D. Cortical blindness
- E. Tunnel vision

Correct Answer: E

The diagnosis is glaucoma (headache and haloes especially at night). In glaucoma the vision.

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**QUESTION 14**

Ophthalmoplegic migraine is best characterised as?

- A. Headache associated with irreversible palsy of 3rd nerve
- B. Headache with optic neuritis
- C. Recurrent headache with transient palsy of 3, 4 and / or 6th cranial nerves

Correct Answer: C

Recurrent headache with transient palsy of 3, 4 and / or 6th cranial nerves OPTHALMOPLAGIC MIGRAINE It is a rare condition which was previously considered as a type of migraine. Recent studies suggest that it is likely to be an inflammatory cranial neuropathy. The International Headache Classification has reclassified ophthalmoplegic migraine as a type of neur earlier classification as a type of migraine. It is characterised by transient migraine like headache associated with paresis of oculomotor, trochlear and/or abducens nerves. To arrive at a diagnosis of ophthalmoplegic m causes should be ruled out by appropriate investigations (like digital subtraction angiography / magne angiography of the brain).

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**QUESTION 15**

A 50-year-old patient presents with muscle weakness of the girdle with an increased CPK and aldolase. Her anti-Jo-1 antibody is positive.

Which of the following is most likely to happen to her?

- A. Stroke
- B. Interstitial lung disease
- C. DVT
- D. Septic arthritis
- E. Myocardial infarction

Correct Answer: B

PM/DM presents with weakness and increased markers of muscle inflammation. The presence of anti-Jo-1 indicates a markedly increased risk of interstitial lung disease.