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Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q11-Q16):

NEW QUESTION # 11

A 32-year-old woman, gravida 1, para 0, aborta 1, and her partner present to the office for follow-up regarding a spontaneous abortion that occurred 6 weeks ago. On history, the patient smokes tobacco cigarettes occasionally. On examination, she is healthy and has a BMI of 25. Ultrasonography findings reveal an empty uterus with a 2-cm subserosal fibroid. The couple is planning another pregnancy and would like information on how to increase her chances of carrying a pregnancy to full term. Which one of the following is the best advice?

- A. The patient should stop smoking.
- B. The patient should defer conception for 6 months.
- C. The patient should take 5 mg of folic acid daily.
- D. The patient should undergo excision of her fibroid.
- E. The patient and her partner should abstain from sexual intercourse in the first trimester.

Answer: A

Explanation:

This patient had a single spontaneous abortion and is planning another pregnancy. MCCQE objectives emphasize modifiable risk factor reduction and evidence-based preconception counseling. Smoking is a well-established risk factor for miscarriage, placental complications, fetal growth restriction, and preterm birth.

Therefore, smoking cessation is the most effective intervention among the options listed to improve the likelihood of a healthy term pregnancy.

A 2-cm subserosal fibroid does not distort the uterine cavity and is unlikely to contribute to miscarriage; surgical removal is not indicated. There is no evidence that abstaining from intercourse in the first trimester prevents miscarriage. After a single early pregnancy loss, there is no need to delay conception for 6 months; couples may attempt pregnancy once emotionally and physically ready.

While folic acid supplementation is recommended preconceptionally, the standard dose for low-risk women is 0.4-1 mg daily, not 5 mg (which is reserved for high-risk patients). Thus, smoking cessation is the most important advice.

NEW QUESTION # 12

A mother brings her 10-year-old son for his well-child check-up. She mentions that her 38-year-old husband has just had a heart attack due to high cholesterol levels and wants information regarding prevention of cardiovascular disease for her son. Which one of the following is the best approach to managing this problem?

- A. Request a serum homocysteine and hemoglobin A1c
- B. Reassure the mother as children do not have elevated lipid levels
- C. Prescribe a low-fat diet for the son
- **D. Send the son for a lipid profile test**
- E. Prescribe a weight-lifting exercise program for her son

Answer: D

Explanation:

Children with a first-degree relative who has premature coronary artery disease or hypercholesterolemia should undergo fasting lipid screening between ages 2-10. Since the child is 10, screening is indicated.

Toronto Notes 2023 - Pediatrics, "Preventive Care in Children":

"Lipid screening is recommended for children ≥ 2 years old with a family history of early cardiovascular disease or hypercholesterolemia." MCCQE1 Objectives (Pediatrics > 78-1: Preventive Medicine):

"Candidates must screen children at high risk of cardiovascular disease appropriately, including lipid profile for familial hyperlipidemia." Diet and exercise counseling may follow screening, but testing is the first step. Reassurance alone (C) is inappropriate. Homocysteine (E) and HbA1c are not first-line tests in this setting.

NEW QUESTION # 13

A 51-year-old man comes to your clinic for follow-up regarding his type 1 diabetes. His hemoglobin A1c is 12.5% (normal 4-6%). He has never had such high blood sugar results. He drinks 2 beers per night to help with sleep. He is not well rested because he has been sleeping on a friend's couch since losing his job last year. Which one of the following is the best next step?

- A. Prescribe an antidepressant to improve his energy and motivation.
- B. Send him for thyroid function testing.
- C. Ask him to create a food journal and refer him to a dietitian.
- **D. Ensure that he has the finances to adequately monitor his diabetes.**

Answer: D

Explanation:

This patient is experiencing social instability (homelessness, job loss) likely contributing to poorly controlled diabetes. Before investigating or prescribing further, it is essential to address his ability to afford and manage self-monitoring and insulin.

Toronto Notes 2023 - Endocrinology, Diabetes:

"Social determinants such as housing insecurity and financial barriers significantly affect diabetes self-management. Addressing access to glucose monitoring and insulin is critical." MCCQE1 Objectives - Internal Medicine > Chronic Disease Management:

"Candidates must assess barriers to effective disease control, including financial and psychosocial limitations." Antidepressants (B)

may be helpful later if depression is suspected. Thyroid testing (C) is not the priority. A dietitian (D) may help long-term, but immediate access and adherence are more urgent.

NEW QUESTION # 14

A mother brings her previously healthy 4-month-old girl for evaluation due to fussiness for 3 weeks. The infant becomes irritable and cries with occasional body arching 1-2 hours after feeding, frequently spits up after feeds, has developed feeding aversion, and shows slowing weight gain. She has been on cow's milk-based formula since birth. Stools are normal, and physical examination is unremarkable. Which one of the following is the most likely diagnosis?

- A. Peptic ulcer.
- B. Celiac disease.
- C. Hypertrophic pyloric stenosis.
- D. Intermittent intussusception.
- E. Gastroesophageal reflux disease.

Answer: E

NEW QUESTION # 15

A 23-year-old woman with borderline personality disorder is brought to the Emergency Department having ingested non-lethal substances after her boyfriend broke up with her. The staff tells you that she has consulted 8 times under similar circumstances in the past 3 years. Which one of the following pieces of information would be useful to provide to the staff?

- A. Not much can be done with personality disorders
- B. Symptoms of borderline personality disorder will likely attenuate over time
- C. Suicidal thoughts must be an indication of major depressive disorder
- D. She will never commit suicide
- E. She is overusing health care services

Answer: B

Explanation:

Comprehensive and Detailed Explanation:

While borderline personality disorder is challenging, symptoms (particularly impulsivity and suicidal behaviors) often attenuate with age and appropriate therapy (e.g., dialectical behavior therapy). Providing hope and clinical context to staff improves care and reduces stigma.

Toronto Notes 2023 - Psychiatry, "Personality Disorders":

"BPD is associated with emotional dysregulation and impulsivity. Long-term prognosis is better than once believed, with many patients showing symptom remission over time." MCCQE1 Objectives (Psychiatry > 71-4: Personality Disorders):

"Candidates must provide appropriate education to patients and staff regarding prognosis and treatment of BPD." Statements A-D are false, stigmatizing, or dangerous.

NEW QUESTION # 16

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