

素晴らしいMCCQE日本語解説集 &合格スムーズ MCCQE参考書勉強 |信頼的なMCCQEダウンロード MCCQE Part 1 Exam



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>> MCCQE日本語解説集 <<

MCCQE試験の準備方法 | 正確的なMCCQE日本語解説集試験 | ハイパスレートのMCCQE Part 1 Exam参考書勉強

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Medical Council of Canada MCCQE Part 1 Exam 認定 MCCQE 試験問題 (Q176-Q181):

質問 # 176

There are many expenses which are considered part of providing care to patients. Under Canadian legislation, which one of the

following is an acceptable means of covering these costs?

- A. Offering rapid access to insured services for a fee.
- B. Collecting fees from patients for home visits.
- C. Collecting annual fees from patients to supplement fees disbursed by the public payer for insured services.
- **D. Collecting fees from patients for uninsured services provided.**
- E. Collecting fees from patients who are seen after hours.

正解: D

解説:

Physicians in Canada may charge patients for uninsured services (e.g., completion of forms, cosmetic procedures, some travel-related vaccines), but they may not charge extra for insured services or preferential access. Doing so violates the Canada Health Act, which mandates accessibility and universality of insured services.

Toronto Notes 2023 - ELOM, Health Care System:

"Physicians may charge for uninsured services but may not charge block fees for insured services, nor can they charge for expedited access to insured services." MCCQE1 Objectives - ELOM > Health Policy and System:

"Candidates must recognize practices that violate the principles of publicly funded health care, including charging for insured services or access premiums." Option A is not permitted under law. Options B, D, and E involve insured services (e.g., home visits, after-hours care) and cannot be billed directly to patients.

質問 # 177

A 55-year-old man presents with vague abdominal pain and general weakness. His mother had colon cancer and died at age 60 years. His physical examination findings and complete blood count results are normal. Which one of the following tests should be ordered first?

- A. Air-contrast barium enema
- B. Fecal immunochemical test (FIT)
- C. Computed tomography colonography
- **D. Colonoscopy**
- E. Magnetic resonance imaging of the abdomen

正解: D

解説:

Comprehensive and Detailed Explanation:

Given his age and a first-degree relative with colon cancer diagnosed before age 60, this patient meets criteria for early colon cancer screening. Colonoscopy is the gold standard for both screening and diagnosis in this context.

Toronto Notes 2023 - Gastroenterology, "Colorectal Cancer Screening":

"Patients with a first-degree relative diagnosed with colorectal cancer before age 60 should begin screening at age 40, or 10 years before the relative's diagnosis. Colonoscopy is the preferred method." MCCQE1 Objectives (Population Health > Preventive Screening > 63-1):

"Candidates must apply colorectal cancer screening guidelines and select appropriate tests based on risk level." FIT (A) is for average-risk screening. MRI (B) and CT colonography (E) are secondary. Barium enema (D) is outdated.

質問 # 178

You perform a literature search of journal articles on the effectiveness of a new antihypertensive for first-line treatment of people aged 35 to 50. You find reports of 4 good quality studies. Three of them show that statistically, the new drug is significantly more effective than the standard treatment, and one shows no difference. Before you conclude that the new antihypertensive is more effective in this group of patients, which one of the following concepts must be given consideration?

- **A. Publication bias**
- B. The power of the studies
- C. Random error
- D. Systematic error
- E. Information bias

正解: A

解説:

Comprehensive and Detailed Explanation:

Publication bias refers to the tendency for positive results to be published more often than negative or inconclusive ones. In your review, 3 of 4 studies show positive findings. However, studies showing no effect may not have been published, skewing your impression.

Toronto Notes 2023 - Public Health, Critical Appraisal:

"Publication bias can lead to overestimation of treatment efficacy. Systematic reviews must account for unpublished or negative findings." MCCQE1 Objectives - Preventive Medicine > Critical Appraisal:

"Candidates must recognize and account for biases such as publication bias in interpreting literature." Random error (A) and power (D) affect individual studies. Systematic and information biases (B, E) affect data quality, not publication trends.

質問 # 179

You are taking over a practice from a retiring family physician. The practice has paper records of patients dating back many years, including records of former patients. Which one of the following organizations is the most appropriate to contact regarding medical record retention requirements?

- A. The provincial/territorial regulatory authority.
- B. The College of Family Physicians of Canada.
- C. The Medical Council of Canada.
- D. The Canadian Medical Association.
- E. Health Canada.

正解: A

解説:

Medical record retention is governed by laws and policies established by the provincial or territorial medical regulatory authorities (e.g., College of Physicians and Surgeons of Ontario). These bodies set requirements for how long patient records must be maintained and how to handle former patients' data.

Toronto Notes 2023 - Ethics and Health Systems:

"Retention of medical records is regulated by provincial/territorial colleges, which outline minimum retention periods and storage responsibilities." MCCQE1 Objectives (ELOM > Legal Requirements > Professional Responsibilities):

"The candidate must be able to identify the legal responsibilities of physicians regarding record-keeping, as guided by regulatory authorities." National organizations such as Health Canada, CFPC, CMA, and MCC do not set these rules for individual practice management.

質問 # 180

You are providing medical care to a 78-year-old man and notice a skin lesion which you suspect is malignant melanoma. He has been living in a long-term care facility for 2 years because of incontinence, mobility and vision problems. He is well-liked by facility staff and residents, manages his own affairs and communicates clearly. He has designated his daughter to be his substitute decision-maker and has signed a Do Not Resuscitate (DNR) order. Which one of the following is the best next step in providing care to this patient for his skin lesion?

- A. Ask him whether you can discuss your diagnosis and care with his daughter.
- B. Perform a biopsy to ensure an accurate diagnosis before discussing diagnosis and treatment.
- C. Discuss your tentative diagnosis with him and ask about his preferences regarding investigations.
- D. Respect his DNR wishes, and do nothing about the skin lesion.
- E. Contact the daughter to inform her of your findings and discuss possible investigations.

正解: C

解説:

This patient is competent and capable of making his own health decisions. A DNR order and naming a substitute decision-maker apply only when a patient lacks capacity. The next step is to discuss the suspected diagnosis with the patient and explore his preferences.

Toronto Notes 2023 - ELOM, Consent and Capacity:

"Competent patients retain full decision-making authority. Substitute decision-makers are only engaged when the patient lacks capacity. DNR applies to resuscitation, not other medical decisions." MCCQE1 Objectives - ELOM > Capacity, Consent, Advance Directives:

"Candidates must recognize that capable patients should be directly involved in decisions. Substitute decision-makers are not

質問 # 181

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