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## Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q109-Q114):

### NEW QUESTION # 109

A 34-year-old woman, gravida 2, para 1, aborta 0, presents to the labor and delivery ward at 32 weeks' gestation with a 24-hour history of worsening frontal headache, photophobia, and neck stiffness. Vitals:

\* BP: 121/78 mm Hg

\* HR: 90 bpm

\* Temp: 38°C

Neuro exam reveals a 2-beat ankle clonus. Tone and power are otherwise normal. No localizing signs or papilledema. Abdomen is soft, fetus is cephalic.

Which one of the following is the best next investigation?

- A. Computed tomography of the head
- B. Lumbar puncture
- C. Amniocentesis with culture
- D. Urine protein to creatinine ratio
- E. Fetal ultrasonography

**Answer: D**

Explanation:

Comprehensive and Detailed Explanation:

This patient is pregnant and febrile with a new headache, photophobia, and clonus - all features concerning for preeclampsia with neurologic involvement. Clonus is a key finding suggestive of central nervous system irritability. Urine protein/creatinine ratio helps confirm the diagnosis of preeclampsia.

Toronto Notes 2023 - Obstetrics, Hypertensive Disorders in Pregnancy:

"Headache, clonus, and visual disturbances are concerning for severe preeclampsia. A urine protein/creatinine ratio or 24-hour urine collection confirms diagnosis." MCCQE1 Objectives - Obstetrics > Hypertension in Pregnancy:

"Candidates must recognize signs of preeclampsia and assess with appropriate biochemical testing." CT (A) or LP (B) are not indicated unless focal neurologic signs or seizures are present. Fetal imaging and amniocentesis (C, D) do not address maternal symptoms.

### NEW QUESTION # 110

You are counselling a couple that is concerned about the risk that their second child could be affected by the same X-linked recessive disorder (hemophilia A) as their last child, a boy. Neither parent has this disorder.

What is the probability that their second child will be affected?

- A. 50% if the child is a girl
- B. 50% if the child is a boy
- C. 100% whether the child is a boy or a girl
- D. 25% if the child is a girl
- E. 25% if the child is a boy

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation:

In X-linked recessive disorders such as hemophilia A, carrier mothers (usually asymptomatic) have a 50% chance of passing the affected X chromosome to each son, who would then express the disease. Each daughter has a 50% chance of being a carrier but is generally not affected.

Toronto Notes 2023 - Genetics:

"X-linked recessive inheritance: Carrier mother has a 50% chance of having an affected son and a 50% chance of having a carrier daughter." MCCQE1 Objectives (Genetics > 61-1: Inheritance Patterns):

"Candidates must apply principles of X-linked inheritance to assess risk in offspring." If the mother is a known carrier (as inferred from having an affected son), the chance of a second affected boy is 50%.

### NEW QUESTION # 111

A 56-year-old woman presents to your office with a 9-month history of intolerable sweating, palpitations, and periodic anxiety. Her last period was 12 months ago. She continues to have regular Papanicolaou testing with no worrisome pathology. She is otherwise healthy. Which one of the following is the most effective treatment for these symptoms?

- A. Regular exercise, weight loss and smoking cessation
- B. Antidepressant agent
- C. Evening primrose oil
- D. Low-dose clonidine
- E. Estrogen in combination with progesterone

**Answer: E**

Explanation:

In postmenopausal women with severe vasomotor symptoms, hormone therapy (estrogen with progesterone in women with an intact uterus) is the most effective treatment. It improves hot flashes, sleep, and mood symptoms.

Toronto Notes 2023 - Gynecology, Menopause Management:

"Combination hormone therapy is first-line for moderate to severe menopausal symptoms. Non-hormonal agents may be considered if contraindications exist." MCCQE1 Objectives - Gynecology > Menopause:

"Candidates must recognize the indication and benefits of hormone therapy for vasomotor symptoms in appropriate patients."

Lifestyle changes (A) are supportive but insufficient. Primrose oil (C) lacks robust evidence. SSRIs (D) and clonidine (E) are second-line.

**NEW QUESTION # 112**

A 38-year-old woman presents with diffuse nodularity in the outer upper quadrant of her right breast. There is no obvious dominant mass, nipple discharge, or skin dimpling. There are no palpable lymph nodes. Which one of the following is the most likely diagnosis?

- A. Mastitis
- B. Fibrocystic change
- C. Intraductal carcinoma
- D. Paget disease
- E. Benign phyllodes tumour

**Answer: B**

Explanation:

Fibrocystic change is the most common benign breast condition in women of reproductive age. It typically presents with diffuse nodularity or "lumpy" areas, especially in the upper outer quadrant, and varies with the menstrual cycle. No dominant mass or systemic signs are expected.

Toronto Notes 2023 - Gynecology, "Benign Breast Conditions":

"Fibrocystic changes often present with bilateral or unilateral nodularity, most commonly in the upper outer quadrants, without discrete masses." MCCQE1 Objectives (Gynecology > 81-1: Breast Conditions):

"Candidates must differentiate benign breast conditions from malignant ones based on presentation and physical exam findings."

Paget disease (B) presents with nipple changes. Intraductal carcinoma (C) typically shows a discrete mass or suspicious features. Phyllodes tumours are usually well-circumscribed. Mastitis (E) is inflammatory and associated with erythema, fever, and tenderness.

**NEW QUESTION # 113**

An 18-year-old man presents to your clinic with a history of intermittent, dull, achy pain on the left side of his scrotum, and he has now noted left scrotal enlargement. On examination, you note a swelling in the left scrotum when he is standing that disappears when he is supine. Which one of the following is the most likely diagnosis?

- A. Varicocele.
- B. Intermittent testicular torsion.
- C. Spermatocyte.
- D. Cryptorchidism.
- E. Hydrocele.

**Answer: A**

Explanation:

A varicocele is a dilatation of the pampiniform plexus that presents with a "bag of worms" appearance, worsens with standing, and improves when lying down. It is most common on the left side due to anatomical drainage differences.

Toronto Notes 2023 - Urology, Scrotal Disorders:

"Varicoceles often present with a dull, aching pain and scrotal swelling that worsens when upright and disappears when supine." MCCQE1 Objectives - Internal Medicine > Urology:

"Candidates must recognize and diagnose varicocele by physical exam findings and typical symptom history." Cryptorchidism (A) refers to undescended testes. Torsion (B) presents acutely with severe pain. Hydrocele (C) transilluminates and is not posture-dependent. "Spermatocyte" (D) is not a clinical diagnosis.

## NEW QUESTION # 114

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