

MCCQE測試引擎，MCCQE考古題更新



BONUS!!! 免費下載KaoGuTi MCCQE考試題庫的完整版: https://drive.google.com/open?id=1tSwE7gJ3li_sy2Dfiu8HyMj-pt9edoO

KaoGuTi是一個可以成就很多IT人士的夢想的網站。KaoGuTi能為參加IT相關認證考試的考生提供他們想要的資料來助幫助他們通過考試。你還在為通過Medical Council of Canada MCCQE認證考試苦惱嗎？你有想過購買Medical Council of Canada MCCQE認證考試相關的課程來輔助你嗎？KaoGuTi可以為你提供這個便利，KaoGuTi提供的培訓資料可以有效地幫你通過認證考試。KaoGuTi提供的練習題幾乎真題是一樣的。有了KaoGuTi為你提供的精確的Medical Council of Canada MCCQE認證考試的練習題和答案，你可以以高分通過Medical Council of Canada MCCQE認證考試。

由于IT行業的競爭力近年來有所增加，如果您需要提升自己的職業發展道路，Medical Council of Canada MCCQE認證就成為基本的選擇條件之一。而通過MCCQE考試被視為獲得此認證最關鍵的方法，該認證不斷可以增加您的就業機會，還為您提供了無數新的可能。所有考生都知道我們的Medical Council of Canada MCCQE考古題產品可以幫助您快速掌握考試知識點，無需參加其它的培訓課程，就可以保證您高分通過MCCQE考試。

>> MCCQE測試引擎 <<

精心準備的Medical Council of Canada MCCQE測試引擎是行業領先材料 & 準確的MCCQE: MCCQE Part 1 Exam

有了Medical Council of Canada MCCQE認證考試的證書就相當於人生有了個新的里程碑，工作將會有很大的提升，相信作為IT行業人士的每個人都很想擁有吧。很多人都在討論說這麼好的一個證書是很難通過的，實際上確實通

過率是相當的低。沒有做過任何的 effort 當然是不容易通過的，畢竟通過 Medical Council of Canada MCCQE 認證考試需要相當過硬的專業知識。我們 KaoGuTi 是可以為你提供通過 Medical Council of Canada MCCQE 認證考試捷徑的網站。我們 KaoGuTi 有針對 Medical Council of Canada MCCQE 認證考試的培訓工具，可以有效的確保你通過 Medical Council of Canada MCCQE 認證考試，獲得 Medical Council of Canada MCCQE 認證考試證書。而且我們還可以幫你節約很多時間，這樣一個可以花更少時間更少金錢就可以獲得如此有價值的證書的方案對你是非常划算的。

最新的 MCCQE Part 1 MCCQE 免費考試真題 (Q54-Q59):

問題 #54

A 37-year-old man comes to the office for follow-up of his opioid use disorder. He receives opioid agonist treatment, including some take-home doses. At this follow-up visit, he reports some nonprescription opioid use since his last visit. Which one of the following is the best next step?

- A. Increase the frequency of follow-up visits
- B. Prescribe a cannabinoid
- C. Discontinue take-home doses
- D. Slowly taper and discontinue the opioid agonist
- E. Taper the dosage of the opioid agonist

答案: A

解題說明:

Nonprescription opioid use during opioid agonist therapy is not uncommon. The response should be supportive and not punitive. Increasing the frequency of follow-up enhances monitoring, supports adherence, and prevents relapse.

Toronto Notes 2023 - Psychiatry, "Substance Use Disorders":

"Patients who relapse during opioid agonist treatment benefit from closer monitoring and increased support, including more frequent follow-up and psychosocial interventions." MCCQE1 Objectives (Psychiatry > 71-5: Substance Use and Addiction):

"Candidates must manage relapses in opioid use by optimizing follow-up and support, not by discontinuing or reducing therapy prematurely." Tapering or discontinuing therapy (A, E) risks destabilizing treatment. Removing take-home doses (B) may be warranted later but not first. Cannabinoids (D) are not first-line adjuncts.

問題 #55

A 39-year-old man presents to a psychiatrist. He says, "It often seems to me that I am not part of this world. My voice sounds strange to me, and other people seem like figures in a dream." He has had these feelings intermittently for about 2 years. There is no history of hallucinations, and there are no current indications of disorganized thinking. Which one of the following is the most likely diagnosis?

- A. Schizophrenia.
- B. Conversion disorder.
- C. Delusional disorder.
- D. Depersonalization/derealization disorder.
- E. Persistent depressive disorder.

答案: D

解題說明:

The patient describes classic symptoms of depersonalization ("my voice sounds strange to me") and derealization ("others seem like figures in a dream"), which define depersonalization/derealization disorder.

There is preserved reality testing and no psychosis.

Toronto Notes 2023 - Psychiatry, "Dissociative Disorders" Section:

"Depersonalization/derealization disorder involves persistent or recurrent experiences of detachment from oneself (depersonalization) or surroundings (derealization), with intact reality testing and no delusions or hallucinations." MCCQE1 Objectives (Psychiatry > 79-4: Dissociative Disorders):

"Candidates must identify depersonalization/derealization disorder as a dissociative disorder distinct from psychosis or mood disorders." Schizophrenia (A) would include hallucinations or disorganized thinking. Conversion disorder (B) presents with neurological symptoms inconsistent with known diseases. Persistent depressive disorder (D) involves chronic low mood. Delusional disorder (E) would involve fixed false beliefs, which are not present here.

問題 #56

On screening for dyslipidemia, a 45-year-old man is found to have a low high-density lipoprotein (HDL) cholesterol level. Which one of the following recommendations is the most appropriate?

- A. Vigorous exercise program.
- B. Alcohol cessation.
- C. Low-salt diet.
- D. Garlic supplementation.
- E. Elimination of caffeine.

答案： A

解題說明：

Low HDL is best managed with lifestyle changes such as increased aerobic physical activity, smoking cessation, and weight loss.

Vigorous exercise has the strongest evidence for raising HDL levels.

Toronto Notes 2023 - Cardiology, Dyslipidemia:

"Increasing physical activity is among the most effective ways to raise HDL cholesterol. There is no consistent benefit to supplements such as garlic, nor does reducing salt or caffeine meaningfully raise HDL." MCCQE1 Objectives - Population Health >

Cardiovascular Risk Management:

"Candidates should recommend evidence-based lifestyle interventions such as exercise to improve lipid profiles, particularly to increase HDL." Alcohol cessation (C) is generally beneficial for overall health but may actually lower HDL slightly. Garlic (D) and caffeine (E) are not evidence-based interventions for dyslipidemia.

問題 #57

A 15-year-old boy is brought to the office by his father because he is having headaches. When alone, the boy appears withdrawn and admits to suicidal ideation. He shares that he is gay but does not want to tell his parents. He says that he faked the headaches so that one of his parents would make an appointment for him.

Which one of the following is the best next step?

- A. Start an antidepressant medication.
- B. Encourage the patient to disclose his sexual orientation to his parents.
- C. Refer the patient for an immediate mental health assessment.
- D. Suggest that the patient join a group at school for peer support.

答案： C

解題說明：

The presence of suicidal ideation in a minor mandates urgent assessment to ensure safety and access mental health care. Disclosure of sexual orientation should be handled delicately and is not urgent compared to suicidal risk.

Toronto Notes 2023 - Psychiatry, "Child and Adolescent Psychiatry" Section:

"Any adolescent disclosing suicidal ideation should be referred for urgent mental health evaluation.

Concurrent issues such as sexual orientation may contribute to distress and should be addressed with appropriate support over time." MCCQE1 Objectives (Psychiatry > 79-2: Suicide Risk Assessment):

"Candidates must immediately refer for psychiatric assessment when a minor reports suicidal ideation, regardless of other social or developmental concerns." Antidepressants (A) may be appropriate but must follow specialist evaluation. Encouraging disclosure (B) or peer groups (C) is premature without ensuring safety.

問題 #58

A couple is diagnosed with primary infertility secondary to azoospermia. They are not interested in in vitro fertilization techniques, so you recommend insemination with a sperm donor. The male partner is hesitant. He thinks he might have difficulty accepting raising a child who is not biologically his. Which one of the following is the best next step?

- A. Arranging a consultation with a psychologist
- B. Recommend that the donor be a person who is known and significant to the couple
- C. Suggest transfer of care to another physician
- D. Tell the couple adoption is a better option
- E. Propose a trial of ovulation induction with gonadotropins

答案： A

When couples face infertility-related decisions-particularly involving donor insemination-psychosocial counseling is essential. A mental health consultation helps explore emotional concerns, expectations, and readiness for non-biological parenting.

Toronto Notes 2023 - Gynecology, "Infertility and ART":

"Candidates must understand the ethical and psychosocial considerations of assisted reproductive techniques and provide appropriate referrals." Suggesting adoption or switching care dismisses valid concerns (B, C). Ovulation induction (D) does not address azoospermia.

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我們最新的 Medical Council of Canada MCCQE 考試指南是經過眾多考生檢驗過的資料，可以保證有很高的成功率。

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