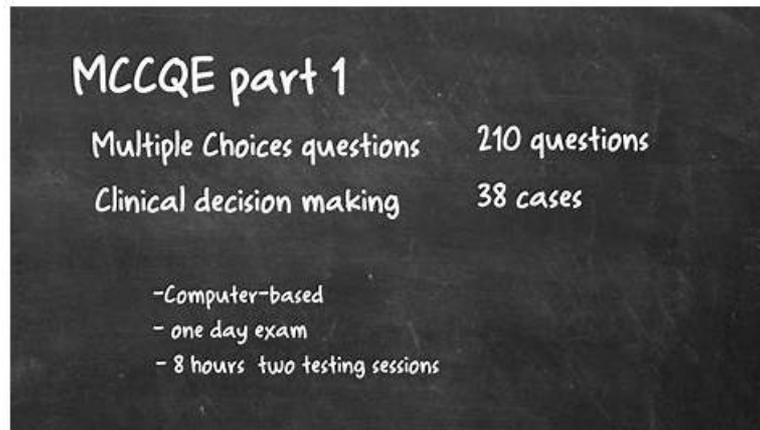


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Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q169-Q174):

NEW QUESTION # 169

A 55-year-old woman presents with a 6-month history of poor memory and impaired concentration. She has bipolar I disorder that has been treated with lithium carbonate for 4 years. She has gained a lot of weight since starting lithium. Physical examination findings are otherwise normal. She is concerned about her memory issues, but there are no other perception, mood, or cognition abnormalities. Which one of the following tests is most likely to have abnormal findings?

- A. Liver function tests
- B. Serum sodium level
- C. Creatinine clearance
- **D. Serum thyrotropin (thyroid-stimulating hormone) level**
- E. Parathyroid hormone

Answer: D

Explanation:

Comprehensive and Detailed Explanation:

Lithium commonly causes hypothyroidism, which can lead to fatigue, cognitive slowing, weight gain, and memory impairment.

Thyroid-stimulating hormone (TSH) levels are often elevated in such cases.

Toronto Notes 2023 - Psychiatry / Endocrinology:

"Lithium is associated with hypothyroidism and renal impairment. Monitor TSH regularly in patients on lithium therapy." MCCQE1

Objectives (Psychiatry > 71-5: Mood Stabilizers):

"Candidates must recognize the endocrine side effects of lithium, including hypothyroidism and the importance of TSH monitoring."

Creatinine clearance (C) may also be affected but is less directly associated with memory issues. Liver function (A), sodium (D), and PTH (E) are not typically the first abnormal values in this presentation.

NEW QUESTION # 170

A 26-year-old man presents with pain, numbness, and weakness in his right upper extremity. He works as a computer programmer, and his BMI is 32. Symptoms have worsened since he started spending more time on the keyboard. He reports that his right hand feels clumsier while he is typing. Physical examination reveals mild weakness in the intrinsic muscles of that hand, with a positive Tinel sign at the ulnar nerve. Which one of the following is the best next step?

- A. Nerve conduction studies to localize the level of the lesion.
- B. Wrist splint to test for carpal tunnel.
- C. Elbow extension brace for use during sleep.
- D. Physiotherapy.
- E. Magnetic resonance imaging of the cervical spine.

Answer: A

Explanation:

This patient presents with symptoms and signs of ulnar neuropathy—most likely at the elbow (cubital tunnel).

Weakness in the intrinsic hand muscles and positive Tinel sign at the ulnar nerve are suggestive. Nerve conduction studies are the gold standard to confirm and localize the lesion.

Toronto Notes 2023 - Neurology, "Peripheral Nerve Disorders":

"In cases of suspected mononeuropathy such as ulnar nerve compression, nerve conduction studies confirm the diagnosis and localize the lesion." MCCQE1 Objectives (Medicine > Neurology > 35-2):

"Candidates should identify and investigate focal mononeuropathies using nerve conduction studies to confirm the diagnosis and location." Splinting (A, C) may help after diagnosis. Physiotherapy (B) is adjunctive. MRI (D) is not the first-line investigation.

NEW QUESTION # 171

A 59-year-old woman comes to the office because her 48-year-old sister was recently diagnosed with cervical cancer. Your patient thinks her mother may have also had cervical cancer. A Papanicolaou (Pap) test performed 16 months ago had normal results, as did all previous Pap tests. Which one of the following is the best next step?

- A. Offer a repeat Pap test 3 years from the previous one.
- B. Offer a repeat Pap test now.
- C. Arrange for human papillomavirus testing.
- D. Arrange for colposcopy.
- E. Offer annual Pap testing for the next 5 years.

Answer: A

Explanation:

For women aged 25-69 years who have had adequate negative screening, the recommendation is to repeat cervical cytology (Pap test) every 3 years, regardless of family history. Cervical cancer is caused primarily by HPV infection, not hereditary genetics. Family history does not alter the screening interval.

Toronto Notes 2023 - Gynecology, Cervical Cancer Screening Section:

"Routine screening with Pap test is recommended every 3 years in women aged 25-69 who have had three consecutive negative tests. Family history of cervical cancer does not modify the screening interval." MCCQE1 Objectives - Obstetrics and Gynecology > Cancer Screening:

"Candidates must apply population-based cervical cancer screening guidelines. Family history is not a risk modifier for screening frequency in cervical cancer." Options A and B are inappropriate as they increase screening frequency without indication. HPV testing (D) or colposcopy (E) are not recommended without abnormal cytology.

NEW QUESTION # 172

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. Suicidal thoughts must be an indication of major depressive disorder
- **B. Symptoms of borderline personality disorder will likely attenuate over time**
- C. Not much can be done with personality disorders
- 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 # 173

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

Answer: E

Explanation:

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.

NEW QUESTION # 174

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