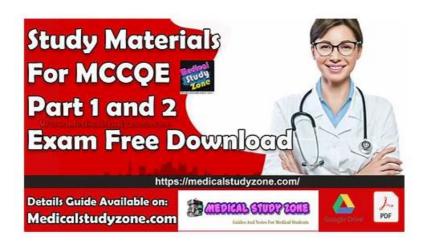
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Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q139-Q144):

NEW QUESTION # 139

A 70-year-old hypertensive woman with a history of congestive heart failure (CHF) secondary to left ventricular dysfunction presents to your office with a persistent dry hacking cough. She claims it began when she was started on ramipril. Which one of the following medications would be most appropriate to replace ramipril, to ensure that the risk of morbidity associated with CHF remains low?

- A. Alpha-blocker
- B. Angiotensin II receptor blocker
- C. Nitrates
- D. Calcium channel blocker
- E. Cox-2 inhibitor

Answer: B

Explanation:

ACE inhibitors such as ramipril are first-line for CHF with reduced ejection fraction, but a common adverse effect is a dry cough due to bradykinin accumulation. Angiotensin II receptor blockers (ARBs) offer the same hemodynamic and survival benefits without causing cough.

Toronto Notes 2023 - Cardiology, "Heart Failure" Section:

"In patients intolerant to ACE inhibitors due to cough, an ARB (e.g., losartan, valsartan) is the recommended substitute. ARBs also reduce mortality and hospitalizations in heart failure with reduced ejection fraction." MCCQE1 Objectives (Internal Medicine > 76-3: Congestive Heart Failure):

"Candidates should recognize ARBs as an alternative to ACE inhibitors in patients who develop adverse effects such as cough, while maintaining the mortality benefit." Other options (B-E) do not offer mortality benefits in CHF and may worsen the condition (e.g., CCBs, alpha- blockers, NSAIDs like COX-2 inhibitors).

NEW QUESTION # 140

A 17-year-old boy is brought by his 2 roommates to the emergency department (ED) after a party where he had been drinking and smoking cannabis. He reportedly was having a good time when he suddenly wanted to jump out of a window. His roommates describe him as "normal prior to a breakup with his girlfriend a week ago." He has since become anxious and unable to sleep. On examination, he is somnolent and appears intoxicated. Which one of the following is the most appropriate initial management?

- A. Observe the patient in the ED for several hours.
- B. Prescribe chlordiazepoxide and start an intravenous line.
- C. Arrange for an involuntary admission to psychiatry.
- D. Call the patient's parents to take him home.

Answer: C

Explanation:

This adolescent exhibited acute suicidal behavior (attempted to jump out of a window), which is a psychiatric emergency. Regardless of intoxication or cause, such behavior mandates a safety-first approach: involuntary psychiatric assessment and protection from self-harm.

Toronto Notes 2023 - Psychiatry, "Suicide and Crisis Intervention" Section:

"Involuntary psychiatric admission is indicated when a patient poses a danger to themselves or others.

Suicidal ideation or attempts require immediate evaluation and monitoring." MCCQE1 Objectives (Psychiatry > 79-2: Suicide and Risk Management):

"Candidates must identify suicidal behavior and initiate appropriate action, including involuntary admission if necessary for safety." Observation (B) may miss the window for action. Parents (A) should be contacted but are not a substitute for admission. Chlordiazepoxide (C) is not first-line in this scenario.

NEW QUESTION # 141

A 69-year-old man presents with a 4-day history of a painful right knee. On history, he denies any trauma or similar previous episodes. Examination reveals effusion of the right knee that is warm to the touch. Which one of the following is the best next step?

- A. Serum uric acid level
- B. Intravenous antibiotics
- C. Joint aspiration
- D. Nonsteroidal anti-inflammatory drugs
- E. Right knee radiography

Answer: C

Explanation:

The first step in evaluating a new, hot, swollen joint is arthrocentesis to rule out septic arthritis and crystal arthropathy. Joint aspiration provides fluid for microscopy, culture, and crystal analysis, which guides definitive diagnosis and treatment. Toronto Notes 2023 - Rheumatology, Monoarthritis:

"Joint aspiration is the most important first step in evaluating monoarthritis. Septic arthritis must be ruled out before initiating any therapy." MCCQE1 Objectives - Internal Medicine > Rheumatology:

"Candidates should perform joint aspiration in the presence of acute monoarthritis to differentiate between septic arthritis, gout, and other causes." Radiography (A) and serum uric acid (B) do not establish cause acutely. Empiric antibiotics (D) and NSAIDs (E) should only be started after ruling out septic arthritis.

NEW QUESTION # 142

A 72-year-old man presents to your clinic accompanied by his 70-year-old husband. The patient reports that, over the last several months, his libido has been very low. Which one of the following would be the best next step?

- A. Prescribe testosterone
- B. Order serum testosterone levels
- C. Refer for couple's counselling
- D. Assess for depression
- E. Interview the couple together

Answer: D

Explanation:

Comprehensive and Detailed Explanation:

Decreased libido in elderly patients can be multifactorial, but depression is a common and important cause that must be ruled out before hormone therapy or other steps. A proper mental health screen should precede further interventions.

Toronto Notes 2023 - Psychiatry / Geriatrics:

"In elderly men, reduced libido may be linked to depression, medical illness, or medications. Depression screening is essential." MCCQE1 Objectives (Psychiatry > 71-1: Mood Disorders / Sexual Health):

"Candidates must consider depression as a common cause of decreased libido and assess accordingly before initiating hormone therapy." Testosterone testing (D) may follow. Prescribing (C) is premature. Couples counselling (B) may help if interpersonal issues are identified. Interviewing together (A) may inhibit disclosure.

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NEW QUESTION #143

A 28-year-old woman presents because of spotting mid-menstrual cycle. Speculum examination reveals an ulcerated endocervical polyp. Which one of the following is the most appropriate management?

- A. Colposcopy.
- B. Serial cytology.
- C. Polypectomy.
- D. Punch biopsy.
- E. Cryotherapy.

Answer: C

Explanation:

Endocervical polyps are common and often benign. An ulcerated polyp may bleed but is not itself suspicious unless it shows atypical features. The appropriate management is to remove the polyp (polypectomy) and send it for histopathology to exclude malignancy. Toronto Notes 2023 - Gynecology, Cervical Pathology:

"Endocervical polyps are removed by polypectomy and sent for histological analysis. Most are benign.

Atypical or ulcerated appearance may raise concern, but biopsy is unnecessary if the entire lesion is excised." MCCQE1 Objectives - Gynecology > Abnormal Bleeding and Cervical Lesions:

"Candidates should recognize that cervical polyps causing intermenstrual bleeding should be removed and assessed histologically." Colposcopy (B) is reserved for abnormal cytology or high-risk lesions. Cryotherapy (A) is for cervical dysplasia. Punch biopsy (E) is used for lesions that are not amenable to polypectomy.

NEW QUESTION # 144

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