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Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q101-Q106):

NEW QUESTION # 101

A 76-year-old man is brought by his family to your clinic with new-onset urinary incontinence. They state that the patient is experiencing a slowly progressing cognitive decline marked by memory disturbance, apathy, and attentional problems. Examination reveals that the patient has a stooped, forward-leaning posture and a wide-based gait. Which one of the following is the most likely diagnosis?

- A. Normal pressure hydrocephalus
- B. Frontotemporal dementia
- C. Parkinson disease
- D. Lewy body dementia
- E. Alzheimer disease

Answer: A

Explanation:

Comprehensive and Detailed Explanation:

This patient presents with the classic triad of normal pressure hydrocephalus (NPH): gait disturbance (often wide-based and magnetic), cognitive decline, and urinary incontinence. The combination, especially with the gait being most prominent, is highly suggestive.

Toronto Notes 2023 - Geriatrics / Neurology:

"NPH presents with gait disturbance, dementia, and urinary incontinence. Gait is typically broad-based and magnetic. Imaging shows ventriculomegaly without elevated pressure." MCCQE1 Objectives (Geriatrics > 41-1: Cognitive Disorders):

"Candidates must identify NPH and distinguish it from other dementias based on clinical triad and gait features." Alzheimer's (B) primarily presents with memory loss. Parkinson's (A) has bradykinesia and rigidity. Lewy body dementia (C) includes visual hallucinations and fluctuating cognition. FTD (E) has personality and behavioral changes.

NEW QUESTION # 102

You are the emergency physician on duty in a rural hospital when heavy rains in the community cause a large landslide. There are multiple casualties expected to arrive in the emergency department. Your colleague has heard about the incident and arrives to help. Which one of the following is the best next step?

- A. Ask your colleague to handle media inquiries
- B. Send your colleague to the affected area to evaluate the health risks involved
- C. Send your colleague to set up an emergency type O blood bank collecting unit
- D. **Ask your colleague to help triage incoming patients in the emergency department**

Answer: D

Explanation:

Comprehensive and Detailed Explanation:

During mass casualty incidents, effective triage is essential to optimize care delivery. A trained physician is best used in triage or direct care. Triage is the foundation of disaster management.

Toronto Notes 2023 - Public Health / Disaster Medicine:

"In disaster response, trained healthcare providers should be deployed to triage and stabilize patients in emergency departments."

MCCQE1 Objectives (Public Health > 65-1: Disaster Response):

"Candidates must understand principles of mass casualty management and assign appropriate roles during triage and care delivery." Media (D) and logistics (A, C) are secondary roles. Triage and direct care take priority.

NEW QUESTION # 103

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

Answer: B

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 # 104

A 37-year-old man presents with chronic back, neck, and shoulder pain following a workplace injury 4 years ago. He has a history of alcohol misuse and PTSD related to the incident. Current medications (acetaminophen, naproxen, amitriptyline, gabapentin) provide inadequate pain relief. He requests oxycodone after self-trialing it with temporary benefit. After history and physical assessment, which one of the following is the best next step?

- A. Prescribing cannabis.
- B. Prescribing a low-dose, long-acting opioid and reassessing in 1 week for effectiveness.
- C. Ordering repeat imaging of the spine and shoulder to confirm the diagnosis.
- D. Prescribing a short course of a short-acting opioid to be used only as needed.
- E. Referring the patient to substance use and mental health support services.

Answer: E

Explanation:

The patient has chronic non-cancer pain with comorbid PTSD and alcohol misuse - high-risk factors for opioid use disorder. Before any opioid prescribing, a comprehensive interdisciplinary approach including mental health and substance use support is essential. Toronto Notes 2023 - Pain Management and Addiction Medicine:

"In chronic pain patients with substance use or mental health comorbidities, refer to addiction/mental health services before considering opioid therapy." MCCQE1 Objectives (ELOM > 99-4: Safe Prescribing):

"Candidates must assess for substance use risk factors and manage chronic pain using a multidisciplinary approach." Imaging (A) is unlikely to alter management. Opioids (B, C) should not be first-line in this context. Cannabis (E) is not first-line and lacks robust evidence in complex chronic pain.

NEW QUESTION # 105

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

Answer: E

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 # 106

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