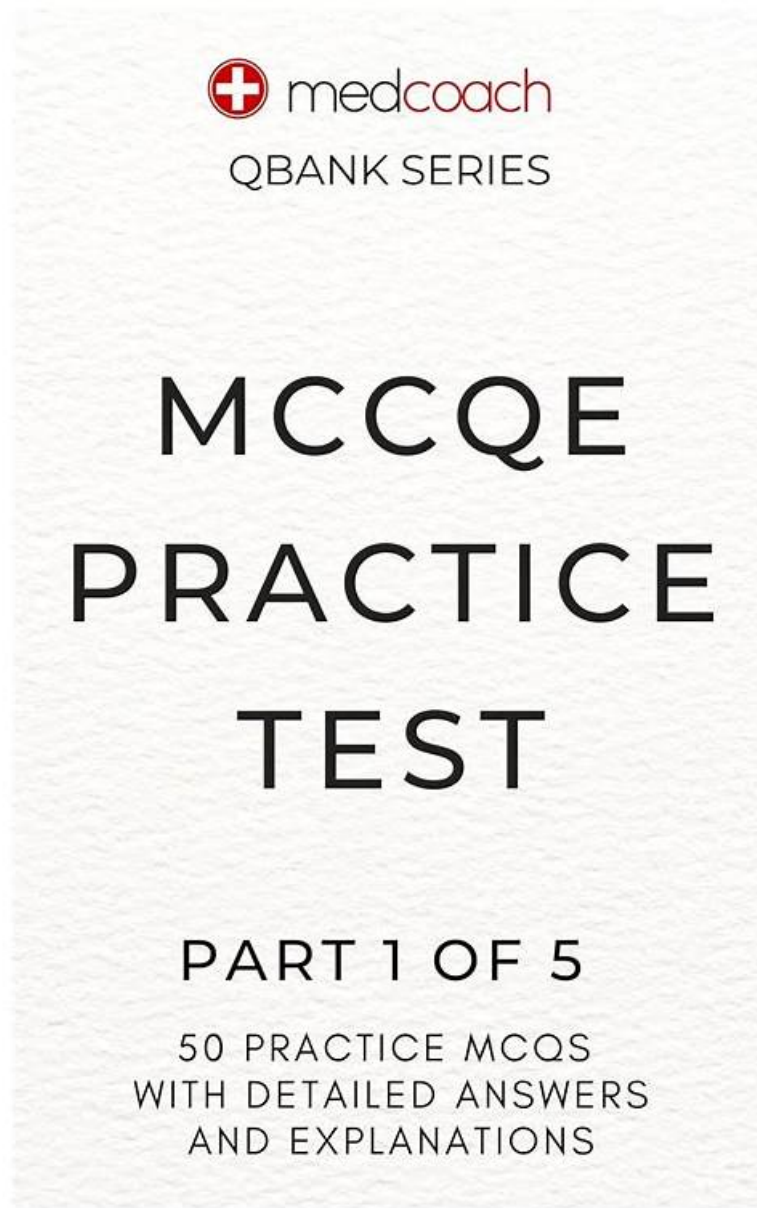


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Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q187-Q192):

NEW QUESTION # 187

During an office visit, your 14-year-old patient requests a prescription for oral contraceptives. The province where you are working does not have a statutory age of consent. Which one of the following is the best next step?

- A. Advise her to return with her parents so that legal consent can be obtained.
- **B. Determine her understanding of the medical issues before prescribing the pills.**
- C. Refuse to prescribe the pills because she is less than 18 years of age.
- D. Notify child protective services because of the possibility of sexual abuse.
- E. Give her the prescription and book a follow-up appointment.

Answer: B

Explanation:

In Canada, a minor may consent to medical care if the physician believes they have the capacity to understand the nature, benefits, and risks. This is known as the "mature minor doctrine." Capacity is based on understanding, not age.

Toronto Notes 2023 - ELOM, "Consent and Capacity" Section:

"A minor may consent to treatment if they demonstrate sufficient maturity and understanding. It is the physician's responsibility to assess capacity prior to prescribing." MCCQE1 Objectives (ELOM > 99-3: Consent and Confidentiality):

"Candidates must assess the patient's ability to understand and make informed decisions, regardless of age." Prescribing without assessment (B) is premature. Reporting to child services (A) is only necessary if there are signs of abuse or coercion. Parental involvement (C) is not mandatory. Refusal based on age (E) contradicts legal and ethical practice.

NEW QUESTION # 188

A 77-year-old woman is brought to the Emergency Department by ambulance because she has severe heel ulcers and dehydration. Her husband reports that she has been sick for the past 6 to 8 weeks with a cough and congestion. He shares that he has tried to bring her to medical attention on several occasions, but she refused.

The paramedics reported that her bed at home was soiled and that they could hardly reach her room due to clutter. On questioning, her answers seem reasonable. Which one of the following is the most critical next step?

- A. Assess the risk of financial abuse by her husband
- B. Determine whether the patient has alcohol or substance use disorder
- C. Find out whether the husband has a criminal record
- D. Obtain pictures to confirm the state of their house
- **E. Assess the patient's decision-making ability**

Answer: E

Explanation:

When elder neglect is suspected-especially in cases of self-neglect or unclear caregiver dynamics-the most important immediate step is to assess the patient's decision-making capacity. If she lacks capacity, protective intervention is warranted.

Toronto Notes 2023 - Geriatrics, "Elder Abuse and Capacity Assessment":

"Decision-making capacity must be assessed when a patient is refusing care despite evidence of harm or risk." MCCQE1 Objectives (ELOM > 90-1: Capacity and Consent):

"Candidates must assess capacity in elderly patients before attributing decisions to autonomy, particularly in complex care situations." Evaluating criminal records (B) or clutter (C) may be relevant later but do not take precedence over capacity assessment. Alcohol/substance use (D) and financial abuse (E) are differential concerns, not the critical first step.

NEW QUESTION # 189

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

Answer: E

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 # 190

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

Answer: B

Explanation:

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.

NEW QUESTION # 191

A 42-year-old man presents with a history of fatigue and weight loss. He looks unwell, has a darker than usual complexion and his liver is enlarged. He is also found to have marked glycosuria. Which one of the following is the most useful diagnostic test?

- A. Serum ferritin
- B. Serum amylase
- C. Serum cortisol
- D. Serum alpha-1 antitrypsin

- E. Hemoglobin A1c

Answer: A

Explanation:

This presentation suggests hereditary hemochromatosis. Common features include hyperpigmentation ("bronze diabetes"), hepatomegaly, diabetes, fatigue, and elevated liver enzymes. Serum ferritin is a screening test for iron overload, and elevated levels support the diagnosis.

Toronto Notes 2023 - Endocrinology / Gastroenterology:

"Hemochromatosis presents with skin hyperpigmentation, hepatomegaly, diabetes, fatigue. Diagnosis begins with serum ferritin and transferrin saturation." MCCQE1 Objectives (Internal Medicine > Metabolic and Endocrine > 37-1):

"Candidates must investigate iron overload syndromes using ferritin and transferrin saturation." Cortisol (B) is for adrenal insufficiency. A1AT (C) is a liver disease cause but not typical here. Amylase (E) is for pancreatitis. A1c (A) would confirm diabetes but not the underlying cause.

NEW QUESTION # 192

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