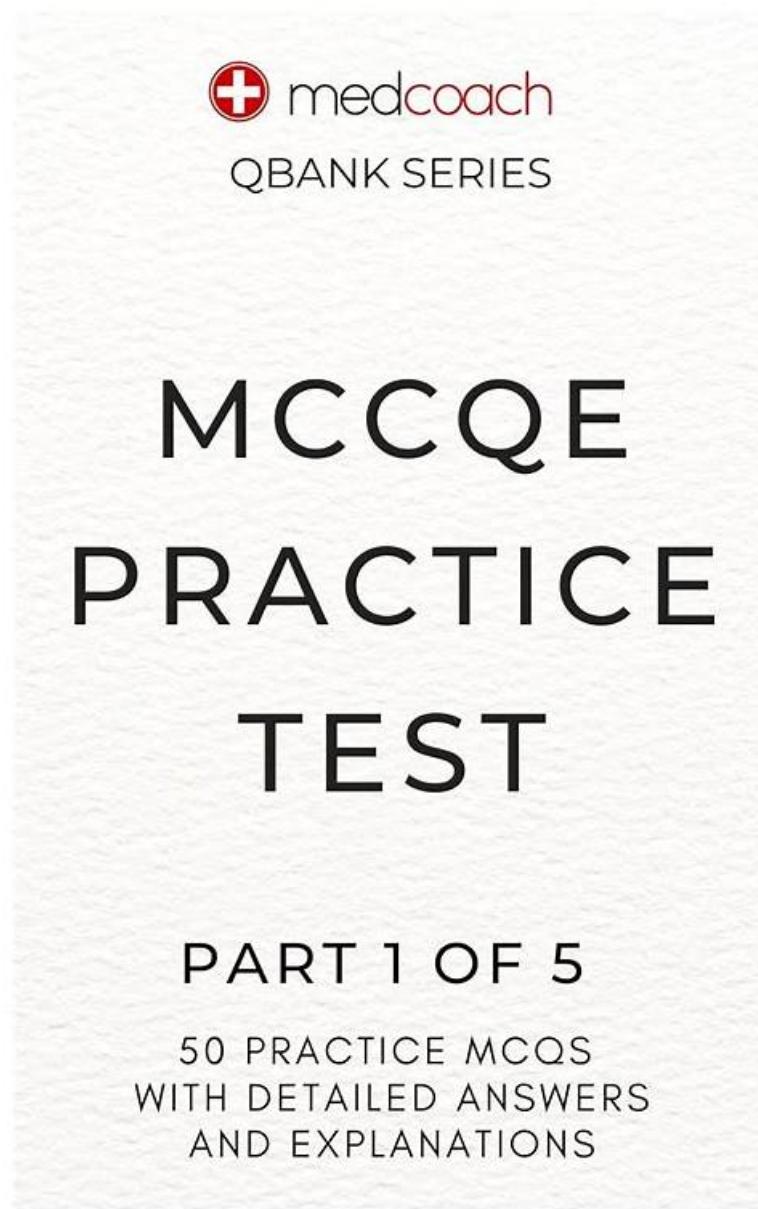


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## Questions

The emerging field of information technology has created a vast space for Medical Council of Canada MCCQE certification exam holders to get promotions and high-paying jobs. Thousands of candidates don't clear the MCCQE Part 1 Exam (MCCQE) exam because they have short time and they don't prepare for the MCCQE exam questions. It results in a loss of time, money, and confidence. RealVCE is here to save you from this unfortunate situation with its Real MCCQE Exam Questions. These Medical Council of Canada MCCQE Exam Questions are enough to ace the MCCQE exam and move forward into Medical Council of Canada sector with full ease and confidence.

### Medical Council of Canada MCCQE Part 1 Exam Sample Questions (Q120-Q125):

#### NEW QUESTION # 120

You are evaluating a 75-year-old man with recently diagnosed prostate cancer and 2 painful metastases of the lumbar spine. Which one of the following therapeutic options is the most appropriate?

- A. Fentanyl patch and breakthrough opioids
- B. Intrathecal steroid injection
- C. Palliative radiotherapy to the lumbar spine
- D. Oral anti-androgen plus gonadotropin-releasing hormone agonist
- E. Surgical castration (orchidectomy)

**Answer: C**

Explanation:

Palliative radiotherapy is the treatment of choice for painful bone metastases, including those from prostate cancer. It provides localized pain relief and functional improvement.

Toronto Notes 2023 - Oncology, "Metastatic Bone Pain":

"External beam radiotherapy is first-line treatment for localized bone pain from metastases. Relief occurs within days to weeks."

MCCQE1 Objectives (Internal Medicine > Oncology > 52-1):

"Candidates must identify treatment options for symptom control in metastatic cancer, including palliative radiotherapy for painful bone lesions." Androgen deprivation therapy (B, C) treats systemic disease but doesn't address acute pain. Opioids (D) may be used, but radiotherapy provides disease-targeted relief. Intrathecal steroids (A) are not standard for prostate metastases.

#### NEW QUESTION # 121

A young man and woman who are in a relationship present to the office for prenatal counselling. During the visit, you observe that the man's lips appear as shown in the referenced photo.



[Image shows grouped vesicular lesions on erythematous base affecting the lips-classic for herpes labialis (HSV-1).] Which one of the following is the best advice?

- A. The woman must have a cesarean delivery
- B. The man needs herpes simplex virus type-specific serology
- C. The man should avoid performing oral sex during her pregnancy
- D. The woman should have viral cultures of her cervix
- E. The woman should take acyclovir throughout her pregnancy

**Answer: C**

Explanation:

The patient shows signs of herpes labialis (HSV-1), which can transmit genital herpes via oral sex. This poses a risk to the fetus if maternal infection occurs during pregnancy, especially near delivery. Preventing new genital HSV infection during pregnancy is critical.

Toronto Notes 2023 - Obstetrics:

"HSV-1 can cause genital herpes via oral-genital transmission. Avoid oral sex during outbreaks in pregnancy to prevent primary maternal infection." MCCQE1 Objectives (Obstetrics > 80-3: Infectious Disease in Pregnancy):

"Candidates must understand the importance of preventing new HSV infection during pregnancy and counsel appropriately." Culture (A) is not useful unless symptomatic. Serology (B) is not needed in this context. Cesarean (D) is not indicated unless active genital lesions at delivery. Acyclovir (C) is for infected mothers or near delivery.

#### NEW QUESTION # 122

An 85-year-old man is transferred from an acute care hospital to your long-term care (LTC) facility. He has a fever, fatigue, myalgia, and malaise. His test result is positive for influenza A virus. Two other residents and 1 LTC staff member have experienced the same symptoms. Which one of the following is the best next step to prevent further infections at the LTC facility?

- A. Ask all visitors to wear a mask.
- **B. Order symptomatic LTC staff to stay home.**
- C. Ensure that all visitors are immunized.
- D. Enforce mandatory influenza vaccination for LTC staff.

**Answer: B**

Explanation:

During an outbreak in a long-term care facility, prompt control measures include keeping symptomatic staff at home to prevent spread. Staff are often vectors of infection, and exclusion is a key public health intervention.

Toronto Notes 2023 - Infectious Diseases, "Infection Control and Prevention":

"During influenza outbreaks in institutional settings, exclusion of symptomatic staff is critical to controlling spread." MCCQE1 Objectives (Population Health > 63-2: Outbreak Management):

"Candidates must understand outbreak control, including staff exclusion, cohorting, and surveillance in congregate settings."

Vaccination (B) is preventive but not immediately effective during an outbreak. Masking and visitor vaccination are supportive but secondary measures.

#### NEW QUESTION # 123

A 30-year-old woman presents to the office with her partner and reports that they are planning for her to conceive soon. They visited Mexico recently and are concerned about exposure to the Zika virus. Which one of the following is the best next step?

- A. Refer the couple to an infectious disease specialist
- B. Prescribe a prophylactic antiviral medication
- **C. Recommend ceasing conception until 3 months after the couple's return to Canada**
- D. Request serologic testing
- E. Explain that condoms are ineffective in preventing sexual transmission of Zika virus

**Answer: C**

Explanation:

Comprehensive and Detailed Explanation:

The Zika virus can be sexually transmitted and poses a serious risk of congenital Zika syndrome if infection occurs during pregnancy. The CDC and WHO recommend that couples delay conception for at least 3 months after potential male exposure due to the virus's persistence in semen.

Toronto Notes 2023 - Infectious Diseases / Travel Medicine:

"Zika virus may persist in semen for weeks. Couples should delay conception for 3 months after male exposure, even if asymptomatic." MCCQE1 Objectives (Public Health > 65-3: Travel Medicine and Reproductive Health):

"Candidates must counsel appropriately regarding risks of Zika in conception and apply current public health recommendations."

Testing (B) is not reliable for asymptomatic individuals. Antivirals (E) are ineffective. Condoms (D) do reduce risk. Specialist referral (A) is not needed in most cases with no complications.

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#### NEW QUESTION # 124

Three months ago, a physician colleague approached you in the hospital corridor for advice regarding one of his patients. You are now being named by this patient in a malpractice action. Which one of the following is the most likely reason why you may be found

liable?

- A. You were given the patient's name
- B. You advised the physician to consult one of your colleagues
- **C. You gave advice on how to treat the patient**
- D. You did not see the patient
- E. You were given confidential patient health information

**Answer: C**

Explanation:

Comprehensive and Detailed Explanation:

Providing clinical advice (particularly treatment advice) without formally seeing or evaluating the patient creates a physician-patient relationship, potentially establishing a duty of care. If the advice leads to harm, you could be found liable, even if you never saw the patient directly.

Toronto Notes 2023 - Legal Medicine:

"Giving specific medical advice about diagnosis or treatment may imply a physician-patient relationship and establish duty of care."

MCCQE1 Objectives (ELOM > 90-2: Legal Risk Management):

"Candidates must understand that liability can arise from informal consultations where medical advice is given." Providing advice (D) is riskier than simply hearing about a case or patient (A, C). Recommending consultation (B) does not establish duty of care. Not seeing the patient (E) does not automatically shield from liability if treatment advice was given.

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## NEW QUESTION # 125

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