

Structured Board Review 1409 Questions –Adults 22-31; Cardio 11-25; Child. 11-15; MSK 72-80; Special Sensory 12-21; Endo 6-10

Adults

22. Ten days after undergoing a minor gynecologic procedure, a 53-year-old woman reports unilateral leg pain with significant swelling. There are no signs of infection. An ultrasound confirms the diagnosis of deep venous thrombosis. You should:
- A. Treat with unfractionated heparin (UFH) for 10 days and then initiate oral warfarin.
 - B. Initiate low-molecular-weight heparin (LMWH) for a minimum of 5 days simultaneously with oral warfarin.
 - C. Initiate oral warfarin; neither UFH nor LMWH is indicated.
 - D. Treat with LMWH for 12 weeks.
 - E. Simultaneously initiate UFH for a minimum of 5 days in addition to oral warfarin.
23. You diagnose deep venous thrombosis in a 62-year-old man who is cardiovascularly stable. He has no major comorbidities or bleeding problems. You should:
- A. Hospitalize the patient for 3 to 5 days, initiate oral warfarin and low-molecular-weight heparin, discontinue LMWH after 5 days, and discharge the patient when the international normalized ratio is within the therapeutic range.
 - B. Hospitalize the patient for 7 to 10 days, initiate LMWH and oral warfarin; discontinue LMWH at discharge.
 - C. Treat as an outpatient with initiation of LMWH and oral warfarin; administer LMWH for a minimum of 6 weeks.
 - D. Treat as an outpatient with initiation of oral warfarin and LMWH; administer LMWH for a minimum of 5 days.
 - E. Treat as an outpatient with initiation of oral warfarin only for 1 month.
24. A patient who sustains a pulmonary embolism after surgery inquires about the use of fondaparinux compared with enoxaparin. You should counsel the patient that fondaparinux:
- A. Is an oral alternative to warfarin or low-molecular-weight heparin.
 - B. Can be used for the treatment of acute deep venous thrombosis and pulmonary embolism as well as the postoperative prophylaxis of venous thromboembolism.
 - C. Was not approved by the Food and Drug Administration because of concerns of hepatotoxicity.
 - D. Is a direct thrombin inhibitor.
 - E. Is associated with a greater incidence of major bleeding compared with enoxaparin.
25. You are treating a patient with colon cancer for a deep venous thrombosis (DVT). The treatment regimen for this patient should be:

- A. Low-molecular-weight heparin (LMWH) for 5 days followed by warfarin for 3 months.
 - B. LMWH for 5 days followed by warfarin for 6 to 12 months.
 - C. LMWH for 2 months followed by warfarin for 12 months.
 - D. LMWH for 3 to 6 months followed by warfarin until the cancer is resolved.
 - E. LMWH alone until the cancer is resolved.
26. Compared with use of a low-fat diet, an individual who is obese and who adheres to a low-carbohydrate diet for 6 months would be expected to:
- A. Lose significantly less weight.
 - B. Experience a greater decrease in glycohemoglobin level.
 - C. Experience no difference in the serum triglyceride level.
 - D. Demonstrate greater improvement in high-density lipoprotein cholesterol level.
 - E. Experience greater improvement in low-density lipoprotein cholesterol level.
27. A patient who is obese asks you to compare various diet options. After reviewing data regarding the Atkins diet, the Ornish diet, the Zone diet, and Weight Watchers, you counsel him that:
- A. Discontinuation rates for users of the Atkins and Ornish diets are equivalent.
 - B. All four diets result in similar weight loss at 1 year.
 - C. Fewer than 5% of individuals adhering to these diets sustained weight loss of greater than 5% at 1 year.
 - D. At 1 year, 90% of individuals discontinue the diets.
 - E. Most individuals discontinue diets because they are too expensive to adhere to.
28. The greatest amount of weight loss is associated with:
- A. Phentermine.
 - B. Diethylpropion.
 - C. Bupropion.
 - D. Fluoxetine.

29. A 57-year-old patient presents with new-onset dyspepsia. You should:
- A. Obtain routine endoscopy.
 - B. Order *Helicobacter pylori* breath testing.
 - C. Order *H pylori* blood testing.
 - D. Treat empirically with proton-pump inhibitors for 6 weeks.
 - E. Treat empirically with an appropriate antibiotic regimen against *H pylori*.
30. A 43-year-old otherwise healthy individual who uses no medications presents with dyspepsia. You should:
- A. Arrange endoscopy.
 - B. Prescribe a proton-pump inhibitor.
 - C. Order noninvasive testing for *Helicobacter pylori*.
 - D. Treat presumptively for *H pylori*.
31. A patient reports dyspepsia that has not responded to over-the-counter ranitidine. The recommended treatment is:
- A. Omeprazole 20 mg/day.
 - B. Omeprazole 40 mg/day.
 - C. Lansoprazole 30 mg/day.
 - D. Esomeprazole 40 mg/day.
 - E. Pantoprazole 40 mg/day.

Cardio

11. Of the 3 types of pulmonary arterial hypertension (PAH), PAH associated with other conditions is the most common. Which one of the following is the most prevalent associated cause?
- A. Exposure to drugs or toxins.
 - B. Portal hypertension.
 - C. Connective tissue disease.

- D. Congenital heart disease.
- E. HIV infection.
12. A 58-year-old man with portal hypertension and early pulmonary arterial hypertension asks about symptoms that might be evidence of disease progression. Which one of the following symptoms is an indication of possible progression?
- A. Fatigue.
- B. Edema.
- C. Chest pain.
- D. Dyspnea.
- E. Syncope.
13. Your patient with scleroderma presents with dyspnea and increasing fatigue. The chest x-ray results are unremarkable, but you are concerned about possible pulmonary arterial hypertension. Which one of the following is the gold standard for confirming the diagnosis?
- A. Right heart catheterization.
- B. Pulmonary function testing.
- C. Echocardiography.
- D. Electrocardiogram.
- E. Ventilation-perfusion scanning.
14. Questions 14-15 pertain to the following case. Gladys, who has worsening pulmonary arterial hypertension (PAH) and right heart failure, asks about PAH-specific therapy while waiting for an appointment at the regional pulmonary hypertension center. She did not benefit from short-acting vasodilators. Which one of the following would you advise?
- A. She likely will receive a calcium channel blocker.
- B. She likely will receive an oral endothelin receptor antagonist.
- C. She likely will receive a parenteral prostacyclin.
- D. She likely will receive an oral phosphodiesterase type 5 inhibitor.
- E. She is not likely to benefit from pharmacotherapy.
15. Gladys telephones your office after the visit at the pulmonary hypertension (PH) center asking about follow-up. Which one of the following do

you advise?

- A. Follow-up if additional symptoms develop.
- B. Follow-up frequently to monitor functional status, drug adherence, and adverse events.
- C. Follow-up every 6 months to monitor exercise capacity and heart function.
- D. Follow-up with the PH center only for the PH.
- E. Follow-up annually for preventive health care and PH monitoring.

Children 11-15

- 11.** After a parent's new job requires that he be away from the family for several weeks each month, his 5-year-old son starts wetting the bed most nights and experiences sleep disturbances. You should counsel the parents to:
- A. Decrease transitions.
 - B. Conform to a regular schedule.
 - C. Promote involvement in extracurricular activities.
 - D. Seek appropriate subspecialist referral.
- 12.** After her parents' divorce, a 15-year-old girl engages in inappropriate sexual activity. You should counsel the parents that the most appropriate age-related intervention is to:
- A. Develop a stable routine.
 - B. Identify and address sources of stressors.
 - C. Increase supervision and educate.
 - D. Share concerns with her teachers.
 - E. Promote involvement in extracurricular activities.
- 13.** The American Academy of Pediatrics recommends that:
- A. No child of any age watch more than 1 hour/day of television.
 - B. Children younger than 2 years should not be exposed to any television.
 - C. Unlimited hours of quality television or videos for children older than 3 years is acceptable.

- D. Children younger than 2 years be exposed only to age-appropriate programming.
 - E. Only violent television viewing should be discouraged.
14. You conclude that a child's difficulty with toilet training is the result of constipation. You should recommend all of the following except:
- A. Increased intake of fiber.
 - B. Increased intake of fluids.
 - C. Increased intake of dairy products.
 - D. A trial of stool softeners.
15. A mother brings her 8-year-old son to your office reporting a longstanding history of bedwetting. He has never achieved nighttime continence. Which of the following strategies is most likely to be successful?
- A. Medications.
 - B. Dry bedwetting.
 - C. Retention training.
 - D. Reward system.
 - E. Alarm system.

Special Sensory

12. A 2-day-old infant presents with bilateral conjunctival hyperemia, mild swelling, and nonpurulent discharge. You should:
- A. Prescribe topical erythromycin.
 - B. Prescribe oral erythromycin.
 - C. Prescribe topical sulfamethoxazole.
 - D. Prescribe topical ciprofloxacin.
 - E. Advise the use of warm compresses only.
13. Mature visual acuity is achieved by what age?
- A. 3 months.

- B. 6 months.
- C. 1 year.
- D. 3 years.
- E. 5 years.

14. A 32-year-old patient experiences an eye splash injury with car battery acid. Which one of the following is most likely?

- A. Coagulation necrosis.
- B. Saponification of eye tissue fatty acids.
- C. Corneal stroma penetration.
- D. Endophthalmitis.

15. You are evaluating a patient with a penetrating eye injury. Which one of the following statements regarding initial management is true?

- A. Aggressive ocular manipulation should be undertaken to locate and remove the object.
- B. Use of a metal eye shield should be avoided.
- C. A tetanus booster should be administered if the patient has not received one in the past 5 years.
- D. Use of anesthesia should be avoided.

16. Which one of the following screening tests should be used routinely to assess for eye conditions in a 2-month-old child?

- A. Corneal light reflection.
- B. Alternate occlusion.
- C. Monocular visual acuity.
- D. Red reflex.
- E. Fix and follow.

17. A 56-year-old presents with intermittent itchy, burning eyes. He reports that this has lasted several months, his eyes frequently are red, and his eyelids are encrusted in the morning. He has mild rosacea. The treatment of choice is:

- A. Warm compresses.

- B. Topical olopatadine.
- C. Topical naphazoline/pheniramine.
- D. Prednisolone acetate suspension.
- E. Topical ciprofloxacin.

18. A 61-year-old patient presents with eye pain, blurred vision, discharge, and a red eye. In addition to an inflamed conjunctiva, you note the presence of grouped vesicles in the distribution of the first branch of the trigeminal nerve. A dendritic pattern is observable upon fluorescein slit lamp examination. You consult an ophthalmologic subspecialist, but begin treatment with:

- A. Oral steroids.
- B. Oral famciclovir.
- C. Topical steroids.
- D. Oral famciclovir and topical ocular steroids.
- E. Topical trifluridine.

19. A patient presents with a painful eye, sudden onset of blurred vision, rainbow-colored halos around lights, nausea, and vomiting. Which one of the following statements is true?

- A. This condition is more common in men.
- B. Acetazolamide is indicated.
- C. Precipitating factors include exposure to a brightly lit environment.
- D. The corneal light reflection test result usually is normal.
- E. The pupil usually is fully dilated.

20. Open-angle glaucoma initially manifests as:

- A. Eye pain.
- B. Red eye.
- C. Visual field loss.
- D. Conjunctival hemorrhage.

Endo

6. A 49-year-old man with a body mass index of 33 kg/m^2 is ready to begin making lifestyle changes to lose weight. He asks about the relative effectiveness of popular diets. Which one of the following diets is best?
- A. Weight Watchers.
 - B. Atkins diet.
 - C. Zone diet.
 - D. Ornish diet.
 - E. None of the above.
7. Which one of these statements is true regarding management of a 9-year-old child who is overweight?
- A. Behavior modification is more effective when the child, rather than the parent, is given the primary responsibility for the change.
 - B. Decreasing sedentary behaviors is more effective in promoting weight loss than increasing active behaviors.
 - C. Attempts to decrease psychologic distress in addition to providing diet and exercise counseling are no more effective in promoting weight loss than diet and exercise counseling alone.
 - D. It is not important to eat breakfast daily.
8. In the Roux-en-Y procedure, a small stomach pouch is created and connected directly to the:
- A. Stomach.
 - B. Jejunum.
 - C. Ileum.
 - D. Duodenum.
9. A 36-year-old patient underwent successful bariatric surgery, followed dietary recommendations, and lost weight progressively. He developed vomiting with ingestion of solid foods and liquids. You should:
- A. Prescribe promethazine.
 - B. Treat the patient with intravenous hydration for 24 hours then re-evaluate.
 - C. Promptly refer the patient to the surgical care team that performed the procedure.
 - D. Recommend the BRAT (bananas, rice, applesauce, toast) diet.

E. Tell the patient this is a common occurrence and is not worrisome.

10. You are monitoring a patient who underwent Roux-en-Y gastric bypass surgery 2 years ago. You should order which one of the following tests annually?

A. Serum magnesium.

B. Ferritin.

C. Amylase-urine.

D. Thiamine.

E. 25-hydroxy vitamin D.