

# DUMPS ARENA

## United States Medical Licensing Examination

Test Prep USMLE

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**QUESTION NO: 1**

Which of the following is caused by a B5 deficiency?

- A. Ectopic pregnancy
- B. Nausea
- C. Dermatitis
- D. Fever

**ANSWER: C****QUESTION NO: 2**

A 54-year-old African-American woman undergoes a routine insurance physical examination. Chest x-ray film reveals bilateral hilar masses. Biopsy of the masses shows granulomata, but acidfast and fungal stains are negative for organisms. Which of the following is the most likely diagnosis?

- A. Caroli disease
- B. Raynaud disease
- C. Sarcoidosis
- D. Scleroderma
- E. Systemic lupus erythematosus

**ANSWER: C****Explanation:**

Sarcoidosis is a multisystem disease characterized by noncaseating granulomata in a variety of organs. The disease may be symptomatic (respiratory and constitutional symptoms) or may be discovered incidentally when chest x-ray or autopsy reveals bilateral hilar adenopathy. Definitive diagnosis is based on biopsy, which reveals noncaseating granulomata that are negative for fungi or acid-fast bacilli. Sarcoidosis is more common in individuals of African-American descent. Caroli disease is a congenital malformation of the bile duct system. Raynaud disease is a vasospasm of vessels that causes temporary ischemia in the hands. Scleroderma, or progressive systemic sclerosis, is characterized by progressive fibrosis of skin and internal organs. Systemic lupus erythematosus is an autoimmune disease characterized by vasculitis (which may produce a variety of symptoms depending on the site of the lesion), rash, renal disease, hemolytic anemia, and neurologic disturbances.

**QUESTION NO: 3**

Which of the following syndromes corresponds to: leads to an increased risk of stroke?

- A. Acute coronary syndrome
- B. ARDS
- C. Budd-Chiari syndrome
- D. DiGeorge's syndrome

**ANSWER: A**

**QUESTION NO: 4**

A 31-year-old woman comes to the physician because of a 2-week history of malaise, nausea, vomiting, and decreased appetite. She is a known user of intravenous heroin. She appears chronically ill. She is 165 cm (5 ft 5 in) tall and weighs 47kg (103 lb); BMI is 17 kg/m<sup>2</sup>. Her temperature is 36.7°C (98.1°F), pulse is 90/min, respirations are 18/min, and blood pressure is 114/68 mmHg. Physical examination shows scleral icterus and a liver span of 16 cm. The spleen is not palpable. Serum studies show:

Total bilirubin	3.2 mg/dL
AST	774 U/L
ALT	820 U/L
HIV antibody	negative
Hepatitis B surface antigen	negative
Hepatitis B surface antibody	positive
Anti-hepatitis B core antibody	positive
Hepatitis B DNA	negative
Anti-hepatitis C virus	positive
Hepatitis C RNA	positive

Which of the following is the most likely outcome of this patient's infection?

- A. Complete resolution of infection
- B. Latent infection with intermittent viremia
- C. Lifelong persistent infection
- D. Patient death from acute infection

**ANSWER: C**

**QUESTION NO: 5**

A 72-year-old woman comes to the physician because of a 2-month history of painless swelling of both ankles. She also reports shortness of breath with exertion and when lying down. She has been awakened from sleep by shortness of breath. She has not had chest pain. Her pulse is 96/min and regular, respirations are 24/min, and blood pressure is 128/76 mm Hg. Jugular venous pressure is 15 cm H<sub>2</sub>O. Pulmonary examination shows crackles at both lung bases. Cardiac examination shows a regular rhythm and a soft S<sub>3</sub>. A grade 3/6 holosystolic murmur is heard best at the apex, radiating to the axilla. There is 2+ pitting edema of the lower legs and ankles. Which of the following is most likely to confirm the diagnosis?

- A. Measurement of serum troponin I concentration
- B. ECG
- C. Exercise stress test
- D. Echocardiography
- E. Pulmonary artery catheterization

**ANSWER: D****QUESTION NO: 6**

Normal values for HCO<sub>3</sub> are considered:

- A. 15-30 mEq/L
- B. 20-35 mEq/L
- C. 22-26 mEq/L
- D. 24-29 mEq/L

**ANSWER: C****QUESTION NO: 7**



A 42-year-old woman is brought to the emergency department because of double vision that began 20 minutes after she fell from her horse and landed on the left side of her face. Examination of the face shows ecchymoses over the left zygomatic arch. A CT scan of the head is shown. Which of the following arteries is at greatest risk for injury in this patient?

- A. Facial
- B. Frontal
- C. Infraorbital
- D. Lacrimal
- E. Ophthalmic

**ANSWER: C**

#### **QUESTION NO: 8**

What cell type secretes surfactant?

- A. Plasma cell
- B. Type I alveolar cell

- C. Type II alveolar cell
- D. Type III alveolar cell

**ANSWER: C**

**QUESTION NO: 9**

Which of the following is not related to a drug toxicity of Prednisone?

- A. Cataracts
- B. Hypotension
- C. Psychosis
- D. Acne

**ANSWER: B**

**QUESTION NO: 10**



A 2-year-old boy is brought to the office by his mother because of a 1-day history of severe pain, swelling, and redness of his left thumb. The mother does not recall any trauma to the area. She says he has been eating poorly during this period, but otherwise he has been behaving normally. He has no history of major medical illness and receives no medications. He appears tearful. He is at the 90th percentile for length and 80th percentile for weight. His temperature is 37.7°C (99.8°F), pulse is 100/min, respirations are 20/min, and blood pressure is 100/50 mmHg. Physical examination shows an oral vesicle, cervical lymphadenopathy, and the findings in the photograph. Which of the following types of infectious agents is the most likely cause of the findings in this patient's finger?

- A. DNA virus

- B. Gram-negative bacterium
- C. Gram-positive bacterium
- D. RNA virus
- E. Yeast

**ANSWER: A**

**QUESTION NO: 11**

A 55-year-old hypertensive man develops sudden onset of excruciating pain beginning in the anterior chest, and then radiating to the back. Over the next 2 hours, the pain moves downward toward the abdomen. Which of the following is the most likely diagnosis?

- A. Aortic dissection
- B. Syphilitic aneurysm
- C. Aortic valve stenosis
- D. Atherosclerotic aneurysm
- E. Myocardial infarction

**ANSWER: A**

**Explanation:**

This patient has an aortic dissection (formerly called dissecting aneurysm), a potentially fatal condition that is too often confused clinically with myocardial infarction. The most important clinical clue is that the pain shifts with time. Noninvasive techniques, such as transesophageal echocardiography, CT, and MRI, are increasingly useful in making this diagnosis. Aortic valve stenosis would not be expected to produce severe chest pain of acute onset. This patient's clinical history does not suggest either an atherosclerotic or a syphilitic aneurysm. Even if he had one of either of these types of aneurysms and it had begun to rupture, the distinctive feature of severe pain moving downward would probably not be present. Myocardial infarction is the major diagnosis most often confused with this patient's condition. The movement of the pain is the major clinical tip-off suggesting that this is not the correct answer.

**QUESTION NO: 12**

Pulmonary edema is most like associated with a failing \_\_\_\_\_.

- A. Right atrium
- B. Left atrium
- C. Right ventricle
- D. Left ventricle

**ANSWER: D**

**QUESTION NO: 13**

Which of the following types of cytokines is responsible for the growth and maturation of B cells?

- A. Interleukin-1
- B. Interleukin-2
- C. Interleukin-4
- D. Interleukin-7

**ANSWER: C**

**QUESTION NO: 14**

A couple comes for preconceptional genetic counseling because they both have a family history of  $\alpha$ -thalassemia. The woman has a minimally decreased hemoglobin concentration. Genetic studies show a single gene deletion. The man has microcytic anemia and a two-gene deletion. If the two-gene deletion is in trans (one deletion on the maternal gene and one deletion on the paternal gene), which of the following percentages of their offspring will have a two-gene deletion?

- A. 0%
- B. 25%
- C. 50%
- D. 75%
- E. 100%

**ANSWER: C**

**QUESTION NO: 15**

Which of the following drugs is a histamine blocker and reduces levels of gastric acid?

- A. Omeprazole (Prilosec)
- B. Metoclopramide (Reglan)
- C. Cimetidine (Tagamet)
- D. Magnesium Hydroxide (Maalox)

**ANSWER: C**

**QUESTION NO: 16**

Which of the following is a regulatory protein in the cytoplasm that helps the processes at the synapse?

- A. Calmodulin
- B. Protein kinase
- C. Ligand
- D. Gap protein

**ANSWER: A**

**QUESTION NO: 17**

Which of the following amino acids can function as a neurotransmitter in the CNS?

- A. Leucine
- B. Glutamic acid
- C. Lysine
- D. Valine

**ANSWER: B**

**QUESTION NO: 18**

Which of the following is the source cell for the secretion Pepsinogen?

- A. Chief cell
- B. Plasma cell
- C. G cell
- D. Parietal cell

**ANSWER: A**

**QUESTION NO: 19**

A 42-year-old man comes to the physician for a follow-up examination 1 week after he passed a renal calculus. X-ray crystallographic analysis of the calculus showed calcium as the primary cation. Physical examination today shows no abnormalities. A 24-hour collection of urine shows increased calcium excretion. Which of the following is the most appropriate pharmacotherapy?

- A. Carbonic anhydrase inhibitor
- B. Na<sup>+</sup> - Cl<sup>-</sup> symport inhibitor
- C. Na<sup>+</sup> - K<sup>+</sup> - 2Cl<sup>-</sup> symport inhibitor
- D. Osmotic diuretic
- E. Renal epithelial sodium channel inhibitor

**ANSWER: B**

**QUESTION NO: 20**

Which of the following is not a characteristic of MS?

- A. Nystagmus
- B. Elevated IgE levels
- C. Optic neuritis
- D. Tremors

**ANSWER: B**