



# MCQS<sup>Q&As</sup>

Multiple-choice questions for general practitioner (GP) Doctor

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### QUESTION 1

29 year\\s Old female has a breast lump in the upper outer quadrant of the left breast, firm, 2 cm. in size, no Lymphnodes enlargement diagnosed as fibroadenoma.

What is the management for the above patient?

- A. MRI
- B. Percutaneous core biopsy and conservative follow-up
- C. Mammogram

Correct Answer: B

Fibroadenoma of the breast is a common benign lesion affecting women during their reproductive years. Despite their benignity, fibroadenomas can cause physical deformity due to large size and may produce discomfort or emotional distress in affected individuals. The traditional management options available to women diagnosed with a fibroadenoma include observation or surgical excision. Two newer approaches, percutaneous excision and in situ cryoablation, have been developed and are less invasive than surgical excision. The purpose of this consensus statement is to put these four management options into perspective for our members and their patients. In most patients with fibroadenoma(s), the ideal approach is confirmation with percutaneous core biopsy and conservative follow-up. Because the malignant potential of fibroadenomas is extremely low, treatment is not required on an oncologic basis. This conservative approach is the least costly in terms of dollars and morbidity. A significant minority of fibroadenomas will disappear without treatment; with the remaining lesions either increasing in size or remaining unchanged.

Reference: [https://www.breastsurgeons.org/new\\_layout/about/statements/PDF\\_Statements/Fibroadenoma.pdf](https://www.breastsurgeons.org/new_layout/about/statements/PDF_Statements/Fibroadenoma.pdf)

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### QUESTION 2

A 28 year\\s woman has been on treatment for Rheumatoid arthritis for 3yrs. She has gradual loss of vision Her ocular pressure is normal. Red reflex is absent in both eyes.

What is the single most likely diagnosis?

- A. Hypermetropia
- B. Cataract
- C. Macular degeneration
- D. HTN retinopathy
- E. DM retinopathy

Correct Answer: B

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### QUESTION 3

Hypothyroid patient on thyroxin had anorexia, dry cough and dyspneaand left ventricular dysfunction. She had normal TSH and T4 levels, Hyperphosphatemia and hypocalcemia.



The diagnosis is:

- A. Hypopituitarism
- B. Primary Hypopituitarism
- C. Secondary Hypopituitarism
- D. Uncontrolled Hypopituitarism

Correct Answer: B

Primary hypoparathyroidism is defined by a low concentration of PTH with a concomitant low calcium level. In pseudo hypoparathyroidism, the serum PTH concentration is elevated as a result of resistance to PTH caused by mutations in the PTH receptor system. In secondary hypoparathyroidism, the serum PTH concentration is low and the serum calcium concentration is elevated.

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#### QUESTION 4

Healthy parents have 2 children, a child with Cystic fibrosis and a healthy child. They want to have another are the chances of that child being a carrier?

- A. 1:2
- B. 1:4
- C. 1:8
- D. 1:16
- E. 2:3

Correct Answer: A

As the parents have a child with cystic fibrosis and they are healthy both of them are carrier. autosomal recessive disease where if both parents are carrier mode of inheritance is as follows: Chance of being child 1:4, Chance of being diseased 1:4 and chance of being carrier 1:2.

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#### QUESTION 5

A 65-year woman is found on routine CBC to have a hematocrit of 32 percent (normal 37-47) and an MCV of 70 (normal 80-100). Her stool is heme-negative.

What should you do next?

- A. Upper endoscopy
- B. Two more stool tests now
- C. Barium enema
- D. Colonoscopy



Correct Answer: D

Colonoscopy is indicated in all patients > 50 simply as routine screening. Hence, in this case, the patient needs colonoscopy anyway, regardless of what the stool tests show. Another reason to go straight to colonoscopy is the presence of microcytic anemia. Unexplained microcytic anemia in a patient above 50 is most likely caused by colon cancer. Sigmoidoscopy will do nothing to evaluate the right side of the colon and would miss nearly 40 percent of cancers. No matter what a sigmoidoscopy showed, you would need to inspect the right side of the colon. Capsule endoscopy is done to evaluate bleeding when the upper and lower endoscopy are normal and the source of bleeding is likely to be in the small bowel.

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