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United States Medical Licensing Step 1

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QUESTION 1

A member of a college fraternity, who had consumed a large amount of alcohol on a dare, is brought to the emergency room with vomiting and severe abdominal pain. Blood tests reveal that he has elevated serum levels of amylase and lipase. A tentative diagnosis of acute hemorrhagic pancreatitis is formulated. Which cells of the pancreas are directly involved in this condition?

- A. alpha cells
- B. beta cells
- C. centroacinar cells
- D. delta cells
- E. F cells

Correct Answer: C

Section: Anatomy Centroacinar cells are components of the exocrine pancreas and they contain zymogen granules, which are released under the action of cholecystokinin from the duodenum. The zymogen granules contain inactive proenzymes that normally become activated within the duodenum. Premature activation of the pancreatic enzymes, such as trypsin, leads to autodigestion of the centroacinar cells of the pancreatic acini, which secrete these enzymes. This results in acute hemorrhagic pancreatitis which can be caused by excessive alcohol ingestion. All the other choices are cells of the endocrine pancreas, which secrete hormones. Alpha cells (choice A) secrete glucagon whereas beta cells (choice B) produce insulin. Delta cells (choice C) synthesize gastrin and somatostatin. F cells produce pancreatic polypeptide.

QUESTION 2

A 47-year-old woman has a 3-month history of fatigue and pruritus. A percutaneous liver biopsy reveals a nonsuppurative, granulomatous distention of medium-sized intrahepatic bile ducts. What is the most common etiology of this disorder?

- A. acquired vascular abnormality
- B. alcohol abuse
- C. autoimmune disease
- D. parasitic infection
- E. viral infection

Correct Answer: C

Section: Pathology and Path physiology Primary biliary cirrhosis is an autoimmune disorder. Autoantibodies against mitochondria are usually present. Hyperbilirubinemia, steatorrhea, portal hypertension, and osteomalacia may be seen in the later stages of the disease. Vascular abnormalities (choice A), alcohol abuse (choice B), parasitic infections (choice D), and viral infections (choice E) all may mimic the clinical picture of primary biliary cirrhosis. They are not, however, the usual etiologic agents.



QUESTION 3

The parents bring a 5-month-old baby to the emergency room. It is their first child and they are insecure. The boy vomits frequently, seems to be constantly constipated, and has difficulties in defecation. A barium enema study reveals a region in the bowel that is collapsed and an enlarged colon above this area. A biopsy from the part of the bowel 1 in above the anus is sent to the laboratory and histological analysis reveals the absence of ganglia in this tissue. What is the most likely diagnosis?

- A. cholecystitis
- B. gastroesophageal reflux disease
- C. hirschsprung disease
- D. polymyositis
- E. temporary problem with no treatment required

Correct Answer: C

Section: Physiology Hirschsprung disease is a genetic disorder caused by the absence of enteric nerve cells in the wall of the sigmoid colon and/or rectum. The portion of the bowel wall without nerve ganglia (aganglionic) cannot relax in response to bowel content so that the stool builds up behind the obstruction. In some children the problems begin shortly after birth, other infants are not acutely ill, but develop chronic symptoms such as constipation or anemia. Cholecystitis (choice A), caused by inflammation of the gallbladder, gastroesophageal reflux disease GERD (choice B), and polymyositis (choice D), a disorder affecting esophageal skeletal muscle, do not affect the neuronal regulation of the large intestine. Hirschsprung disease is almost always treated by surgical removal of the affected bowel segment and then joining the healthy bowel segments (choice E). A GI motility disorder might improve on its own due to the ability of the enteric nervous system in healthy GI tract portions to learn new motility patterns. However, it takes a very long time and the success is not certain.

QUESTION 4

A 28-year-old woman has an ultrasound examination during the second trimester of her third pregnancy. She is found to have greatly decreased amniotic fluid but the fetus appears to be the appropriate size for the gestational age. Her two previous pregnancies produced normal-term infants. The family history is otherwise unremarkable. Which of the following conditions most likely explains these findings?

- A. bilateral cystic renal dysplasia
- B. bronchopulmonary dysplasia
- C. hypoplasia of the lungs
- D. Klinefelter syndrome
- E. placenta previa

Correct Answer: A

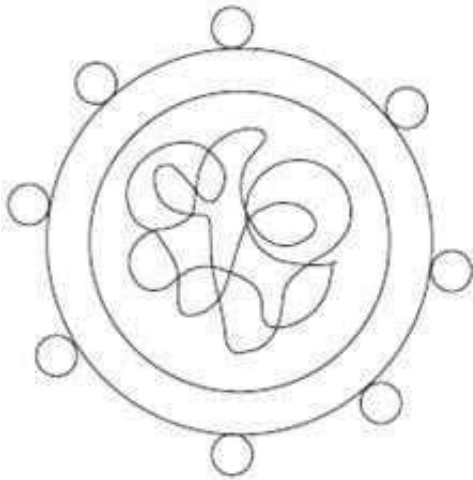
Section: Pathology and Path physiology Most of the amniotic fluid is derived from the urine of the fetus. In a fetus with bilateral cystic renal dysplasia, little or no urine is being produced, which leads to the oligohydramnios seen in this case. Bronchopulmonary dysplasia (choice B) may be seen in babies who have respiratory distress syndrome and are given oxygen therapy. Hypoplasia of the lungs (choice C) is a consequence of oligohydramnios because inhalation of amniotic fluid by the fetus is necessary for normal lung development. Klinefelter syndrome (choice D) occurs in males with XXY



karyotype and does not explain the findings in this case. Placenta previa (choice E) occurs when there is abnormally low implantation of the fertilized ovum in the uterus such that it overlies the internal os.

QUESTION 5

An outbreak of severe, atypical pneumonia occurred in a Southeast Asian community. Symptoms included high fever, chills, headache, and a cough or breathing difficulty. A virus with the structure shown in below figure was implicated as the cause of the infections. Which of the viruses listed below caused this outbreak?



- A. arenavirus
- B. filovirus
- C. poxvirus
- D. rabies virus
- E. SARS virus

Correct Answer: E

Section: Microbiology/Immunology It has recently been shown that severe acute respiratory syndrome or SARS is caused by a corona-associated virus. This virus is a positive, single-stranded RNA, enveloped virion which has petal-like projections called corona, and is shown in below figure. The structure of rabies virus is bullet-shaped (choice D). Poxvirus is a very large, brick-shaped, very complex virus (choice C). Filovirus, such as the Ebola, or Marburg virus is very long and filamentous (choice B). Arenaviruses, like the lymphocytic choriomeningitis, or Lassa fever virus are circular, and have granules (arena) of nonfunctional ribosomes on their surfaces (choice A).

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