



# USMLE-STEP-2<sup>Q&As</sup>

United States Medical Licensing Step 2

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### QUESTION 1

Which of the following is the most common cause of nephrotic syndrome?

- A. diabetes mellitus
- B. Hodgkin's lymphoma
- C. heroin abuse
- D. malignant hypertension
- E. renal failure

Correct Answer: A

The nephrotic syndrome is characterized by proteinuria of greater than 3 g/day. Hypoalbuminemia, edema, and hyperlipidemia, lipiduria, and hypercoagulability are other defining features. Six entities account for >90% of cases of nephrotic syndrome in adults: minimal change disease (MCD), focal and segmental glomerulosclerosis (FSGS), membranous glomerulopathy, membranoproliferative glomerulonephritis (MPGN), diabetic nephropathy, and amyloidosis. In North America, the most common cause of nephrotic syndrome is diabetes mellitus. Heroin use has been associated with FSGS and lymphoma has been associated with glomerular disorders. Some of the glomerular disorders above may present with nephritic syndrome and if untreated progress to renal failure

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### QUESTION 2

A 12-month-old patient has allergies to multiple foods. The child's mother has eliminated the foods from the diet and wants to know if these allergies will be lifelong. You tell her that some allergies do get better if the food is eliminated for 12 years. In which of the following is the allergy most likely to resolve, with elimination of the food from the diet?

- A. peanuts
- B. milk
- C. nuts
- D. fish
- E. shellfish

Correct Answer: B

Cow's milk allergy may occur in 23% of infants and toddlers. After elimination from the diet, by age 3, 85% no longer have symptoms on food challenge. Older children and adults may also lose sensitivity to an offending food when it is eliminated from the diet for 12 years. The exceptions are IgE-mediated allergies to peanuts, nuts, fish, or shellfish.

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### QUESTION 3

A pregnant woman has been taking phenytoin (Dilantin) for a seizure disorder. She is concerned that the drug will cause fetal abnormalities. Which of the following defects is the most common anomaly associated with phenytoin?



- A. atrial septal defect
- B. ventricular septal defect
- C. cleft lip/palate
- D. spina bifida
- E. hydrocephalus

Correct Answer: C

As many as 30% of fetuses exposed to phenytoin had minor craniofacial and digital anomalies. Cleft lip/ palate, hypertelorism, broad nasal bridge, and epicanthal folds are the craniofacial anomalies observed. Hypoplasia of the distal phalanges and nails are the digital anomalies. In addition, these infants may have growth and cognitive deficiencies. Trimethadione, another anticonvulsant, causes similar anomalies. Spina bifida occurs in 12% of infants whose mothers took valproic acid during pregnancy.

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#### QUESTION 4

A 45-year-old man presents to the physician's office complaining of dysphagia and retrosternal pressure and pain of 2-year duration. The symptoms have worsened over the last 3 months. He has a 30 packyear smoking history and drinks beer on weekends. Vital signs include a BP of 150/90 mmHg, pulse rate of 90/ min, and respiratory rate of 12/min, with a normal temperature. Examination reveals a thin man with a normal heart, lung, and abdomen examination. An esophagogram reveals a 6-cm, smooth, concave defect in the midesophagus with sharp borders. Esophagoscopy reveals intact overlying mucosa and a mobile tumor. Which of the following is the most appropriate next step?

- A. repeat esophagoscopy with biopsy
- B. thoracotomy with extramucosal resection
- C. thoracotomy with esophageal resection
- D. radiation therapy
- E. chemotherapy

Correct Answer: B

Leiomyomas are the most common benign tumors of the esophagus. They are intramural, occur between 20 and 50 years of age, and may be symptomatic when over 5 cm. Symptoms may include dysphagia and retrosternal pressure and pain. Esophagogram shows characteristic features of a smooth concave defect with sharp borders. Esophagoscopy is indicated to rule out carcinoma. These tumors are mobile, with intact overlying mucosa. Biopsy should not be performed so that subsequent extramural resection can be performed without complication. Excision is recommended for symptomatic leiomyomas or those greater than 5 cm.

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#### QUESTION 5

An athletic 12-year-old boy complains of left knee pain when he runs and plays sports. The pain resolves when he rests. He has otherwise been well. His physical examination is normal, except for swelling and



increased prominence over the left tibial tubercle. Aradiograph of the left knee is normal.

Which of the following is the most likely diagnosis?

- A. Legg-Calv?Perthes disease
- B. Osgood-Schlatter disease
- C. patellar subluxation
- D. popliteal cyst
- E. slipped capital femoral epiphysis

Correct Answer: B

Osgood-Schlatter results from microfractures and inflammation of the tibial tubercle where the patellar tendon inserts. It is most commonly seen in young adolescents who are involved in athletics. Legg- Calv? Perthes disease is idiopathic avascular necrosis of the capital femoral epiphysis and presents between the ages of 2 and 12 with a painless limp. Patellar subluxation is usually due to a congenital deficiency within the patellofemoral joint. On examination, these patients have tenderness over the inferior surface of the patella and terminal subluxation of the patella when the knee is fully extended. Popliteal cysts are usually asymptomatic and present with a fluidfilled mass in the popliteal fossa. The symptoms of slipped capital femoral epiphysis are variable but typically involve hip pain and limp. On examination, patients have limitation of motion in the hip. It is most common in obese adolescents

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