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QUESTION 1

When making recommendations to a state general assembly against routine premarital screening, the State Health Commissioner used the following data to arrive at his conclusions. The state had a young adult population of 100,000. Their actual prevalence of human immunodeficiency virus (HIV) infection was 1 per 1000. The best screening test available had a sensitivity of 98% and a specificity of 95%. How many people would have screened as false negative?

- A. 4995
- B. 98
- C. 2
- D. 100
- E. 5000

Correct Answer: C

The following table was constructed using the data in the question. There would be 4995 FPs, 98 TPs, and 2 FNs.

	Disease		Totals
	Present	Absent	
Test Positive	98	4995	5093
Test Negative	2	94,905	94,905
Totals	100	99,900	100,000

QUESTION 2

A 27-year-old female complains of dysuria and urinary frequency. Urinalysis reveals 1020 WBCs per high-power field and numerous gram-negative bacteria. She denies fevers, chills, and has no flank pain or tenderness.

Which of the following bacteria is most likely responsible for this patient's urinary tract infection?

- A. Klebsiella
- B. Chlamydia
- C. Escherichia coli
- D. Pseudomonas
- E. Candida

Correct Answer: C

Urinary tract infections are extremely common in young women. For simple infections uncomplicated by fever, chills, or flank pain, a single dose of an antibiotic may be curative. In the presence of symptoms suggesting renal parenchymal infection (i.e., pyelonephritis), treatment should continue for as long as 2 weeks, and parenteral antibiotics may be



required (e.g., fluoroquinolone). Bacteriuria in pregnant women should be treated regardless of symptoms; whereas, bacteriuria in patients with indwelling catheters should probably be treated only in the presence of symptoms. Chronic suppressive antibiotic therapy in the latter group has not been shown to be useful. Radiologic investigation for underlying anatomic abnormalities should be undertaken in girls up to age 6, in all males after their first infection, and in women of any age with recurrent urinary tract infections. The most common pathogen is *E. coli*, accounting for greater than 80% of infections. Other organisms frequently encountered include *Klebsiella*, *Proteus*, and *Enterobacter* species.

QUESTION 3

A 75-year-old woman is brought to the emergency department from the nursing home for jaundice and mental confusion. The nursing home notes state that she has become less responsive and has developed jaundice over the last 2 weeks. Past history is pertinent for hypertension, diabetes, and prior colon resection for cancer at age 55. Examination reveals mild jaundice with vital signs of temperature 101.5°F, pulse rate 110/min, and BP 100/60 mmHg. She does not respond to verbal commands, but withdraws to pain. Abdominal examination reveals tenderness in the epigastrium and right upper quadrant. For above patient with jaundice, select the one most likely diagnosis.

- A. hepatitis A
- B. hemolysis
- C. choledocholithiasis
- D. biliary stricture
- E. choledochal cyst
- F. pancreatic carcinoma
- G. liver metastases
- H. cirrhosis
- I. pancreatitis

Correct Answer: C

Common duct stones (choledocholithiasis) may be the cause of acute bile duct obstruction without warning, resulting in jaundice, pain, and sepsis. The sepsis may manifest as fever, hypotension, and altered mental status.

QUESTION 4

Select the ONE best lettered option that is the most likely diagnosis of vaginal bleeding in pregnancy. Each lettered option may be selected once, more than once, or not at all. A 31-year-old woman has an uncomplicated labor and vaginal delivery of a healthy 3400-g male infant. However, her placenta has not yet delivered 2 hours after the delivery of her child. Under appropriate anesthesia manual extraction of the placenta is attempted, but the placenta is removed in fragments. She continues to have excessive vaginal bleeding after manual removal of her placenta. Her first child was delivered by a low transverse cesarean section because of fetal distress.

- A. threatened abortion
- B. gestational trophoblastic disease
- C. cervicitis



- D. placenta previa
- E. placental abruption
- F. uterine rupture
- G. placenta accreta
- H. uterine inversion
- I. uterine atony
- J. vaginal laceration
- K. tubal pregnancy

Correct Answer: G

Placenta accreta is suggested by the difficulty with manual removal of the placenta in a woman with a prior cesarean section. Placenta accrete is also more common over any previous uterine incision, such as a myomectomy. Placenta accrete is also more common in women with placenta previa and there is greater than an eightfold increase in women with an AFP higher than 2.5 MOM. The safest and most appropriate treatment is a hysterectomy.

QUESTION 5

Both a SSRI and serotonin type 2 (5-HT₂) receptor blockade. Match the antidepressants below with the effect described.

- A. amitriptyline
- B. nefazodone
- C. citalopram
- D. phenelzine
- E. duloxetine

Correct Answer: B

The drugs listed in this question are examples of the various classes of antidepressants. These classes include the tricyclics, the SSRIs, the MAOIs, the triazolopyridines, and the serotonin-norepinephrine reuptake inhibitors. Understanding the site of action, neurotransmitter(s) involved, and side effects characteristic of these classes is helpful in selecting an antidepressant for a particular patient. SSRIs that are comparable in their antidepressant effects to the older tricyclics but significantly safer when taken in larger doses, as in suicidal overdose, are frequently used as the first choice in the treatment of depression. An example here is citalopram. Drugs that both inhibit serotonin reuptake and block 5-HT₂ receptors are characteristic of the triazolopyridines. The overall effect of these actions is believed to decrease both depression and anxiety in patients. There are two drugs in this class: trazodone and nefazodone. Strong sedation caused by histaminergic and anticholinergic activity is seen in the older antidepressants--the tricyclics. These also have both serotonin and norepinephrine effects that are important in decreasing depression. Amitriptyline is the drug example listed here.

Drugs demonstrating little sedation and significant serotonin, norepinephrine, and dopamine effects are more characteristic of the serotonin-norepinephrine reuptake inhibitors. They are effective in managing depression because there is no antihistaminergic activity and little sedation is seen. Duloxetine and Venlafaxine are examples. MAOIs



increase the concentrations of serotonin, norepinephrine, and dopamine by inhibiting their degradation. The MAOIs, although effective as antidepressants, are used relatively infrequently because of the potential development of a hypertensive crisis induced by consuming tyramine- containing foods while on the MAOI. An example here is phenelzine.

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