

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

United States Medical Licensing Step 2

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#### **QUESTION 1**

A45-year-old woman, seen by her medical internist, has been experiencing fears that she may have a serious illness. She complains that after eating she experiences "a lot of gas" and abdominal pain, followed by diarrhea on occasion. Her heart at times seems to be beating rapidly, and she feels faint at times, has chest "discomfort," and wonders if she is having a heart attack. Multiple tests have identified only a mild irritable bowel syndrome. The woman\\'s fears are not allayed by this. She makes repeated calls to be seen by her doctors as well as seeking consultation from other specialists. She insists that "there\\'s something there" and believes the doctors are not taking her seriously. Which of the following most appropriately describes this woman\\'s disorder?

- A. more frequently seen in women than in men
- B. 2025% prevalence rate in a general medical practice
- C. course of disorder usually of short duration (23 months)
- D. associated with elevated erythrocyte sedimentation rate (ESR)
- E. absence of secondary gain is a favorable prognostic indicator

Correct Answer: E

Hypochondriasis is a somatoform disorder in which misperceptions or distortions of somatic signs and symptoms lead to preoccupation with fears of having a serious illness. In factitious disorders, one deliberately manufactures signs and symptoms to enter the sick role. The preoccupation with fear of serious illness is not part of factitious disorder. Major depression is characterized by symptoms of depression: sleep disturbance, appetite disturbance, and so forth.

It may be complicated by hypochondriasis. In the case study, no supporting evidence for major depression (for which she would have been evaluated) is provided. This woman\\'s symptoms as described are not of a psychotic level; thus, reactive psychosis would be inappropriate. In pain disorder, pain in a specific body site is the predominant focus, unlike the predominance of fear seen in hypochondriasis. Care of these patients is best managed supportively by developing a therapeutic alliance with them. Anticipating their needs by establishing regular office visits and physical examinations with them will help allay fears as well as reassure them of one\\'s concern for them, and that if an occult condition becomes evident it will be diagnosed early. Certainly, regular consultation with other specialists is in order to manage these patients. Although the course of hypochondriasis tends to be chronic, there are indications that factor in for a good outcome. One of these is the absence of secondary gain. This disorder is seen equally in both men and women. The prevalence in a general medical practice is approximately 46%. There is no relationship between hypochondriasis and increased ESR.

#### **QUESTION 2**

Select the organism associated with the following clinical findings:

A2-year-old child is pulling on her earlobe and has a temperature of 39°C and a bulging eardrum.

- A. aureus
- B. beta-hemolytic Streptococcus
- C. respiratory syncytial virus (RSV)
- D. Mycoplasma pneumoniae



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- E. Haemophilus pertussis
- F. Helicobacter pylori
- G. Escherichia coli
- H. Rickettsia prowazekii
- I. Giardia lamblia
- J. C. perfringens

Correct Answer: C

Giardiasis may cause cramping and a chronic diarrheal syndrome, with malabsorption and weight loss. Its distribution is worldwide, particularly where hygienic standards are not high. It also occurs sporadically in high-risk individuals. Streptococcal pyoderma, including erysipelas and impetigo, has been demonstrated to precede acute glomerulonephritis. Even when appropriate antibiotics are given in adequate dosage and duration for these conditions, renal damage may still result. Prevention thus consists of wound care, including cleaning wounds well and removal of crust. Mycoplasma infections are particularly common in families with younger children. They are frequently imported to the family by school-aged children, leading to a low-grade fever and persisting tracheobronchitis in the parents, or more acutely, an atypical pneumonia. G. lamblia is found in up to 20% of homosexual males, and may cause chronic diarrhea, although in these patients it tends to be asymptomatic. E. coli was first reported as a cause of watery diarrhea in nurseries in the 1940s. Although nursery epidemics with enteropathogenic serotypes had decreased in recent years in the United States, the increase of infant- child day care centers has resulted in their relatively frequent occurrence. Furunculosis is most frequently caused by coagulase-positive staphylococcal infections. The public health significance of this largely relates to the hazards of skin infections in food handlers and subsequent staphylococcal toxin in the food, leading to staphylococcal intoxication food-borne disease. H. pylori has been associated with gastric ulcers, but not with duodenal ulcers. Otitis media, whether acute or with effusion, commonly results from viral infection, such as by RSV. Various other organisms may be responsible including Streptococcu pneumoniae, H. influenzae, and others. C. perfringens, with rare exceptions, is transmitted in a meat dish prepared in bulk. Under propitious circumstances for the organism, especially on cooling of the food, bacterial multiplication can be very rapid. Symptoms begin to occur in the affected population in about 12 hours. Epidemic typhus is a rickettsial illness. Man is the host and long-term reservoir. The vectors are body lice (P. humanus corporis). The rickettsia are not present in human excretions and cannot be transmitted by person-toperson contact.

#### **QUESTION 3**

Catfish caught in a freshwater stream in Florida has been identified as exceeding the action level for polychlorinated biphenyls in fish (PCBs). Which regulatory agency is responsible for defining these action levels?

- A. Food and Drug Administration (FDA)
- B. United States Department of Agriculture (USDA)
- C. Environmental Protection Agency (EPA)
- D. United Nations Food and Agriculture Organization (FAO)
- E. World Health Organization (WHO)

Correct Answer: C

In the United States, the organization of food and water control is complex. Among the federal control agencies, the EPA is the most recent, and in many ways the most active and powerful. This agency has now set up an elaborate

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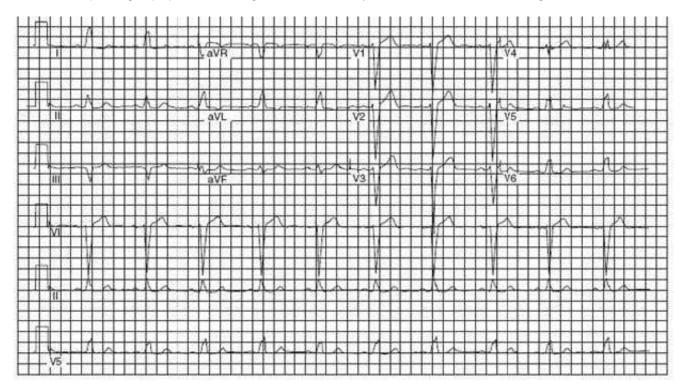
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system of regulation and control of the use of pesticides (which until 1970 was the responsibility of the USDA) and has banned the marketing of chlorphenothane (DDT) for use in the home. The FDA has authority to remove food from the market if it contains pesticides (e.g., PCBs in fish) in excess of the action levels set by the EPA. The FDA also retains the authority to remove from the market any food with inappropriate additives, that contains substances harmful to human health, that is stored in unsanitary conditions, that has decomposed, or that is not fit for consumption.

The USDAenforces wholesomeness standards that it sets for the production and sale of meat. International control is assisted by the WHO. This agency has mounted control programs for the eradication of communicable disease with conspicuous success in the case of smallpox. It also publishes the International Statistical Classification of Disease (ICD-9).

#### **QUESTION 4**

A 58-year-old man is establishing care with you because his insurance changed. His old records have not yet arrived, but he is complaining of palpitations and lightheadedness, so you order the ECG shown in Figure



Which of the following is the most likely problem associated with this pattern?

- A. congenital heart disease
- B. severe aortic valve disease
- C. hypokalemia
- D. atrial septal defect (ASD)
- E. VSD

Correct Answer: B

The prolonged, negative QRS vector anteriorly (V1-V3) and wide notched R waves in V5 and V6 are characteristic for

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LBBB. In RBBB, there is an rSR\\' complex in V1 and QRS pattern in V6. Accelerated junctional rhythm would not have P waves. Partial blocks, such as left anterior fascicular block, generally do not prolong the QRS duration substantially, but are associated with shifts in the frontal plane QRS axis (left axis deviation). With intraventricular conduction delay, the QRS is between 100 and 120 ms. LBBB is a marker of one of four conditions: severe aortic valve disease, ischemic heart disease, long-standing hypertension, and cardiomyopathy. RBBB is seen more commonly than LBBB in patients without structural heart disease, although RBBB also occurs with congenital heart disease and ASD or valvular heart disease. Hyper- but not hypokalemia may cause intraventricular conduction delay. Myocarditis does not usually lead to LBBB.

#### **QUESTION 5**

Many patients you see in your practice live in homes built prior to 1977. In compliance with the Centers for Disease Control and Prevention (CDC) guidelines, at which of the following ages will you start the relevant routine lead screening of the children?

- A. birth
- B. 3 months of age
- C. 12 months of age
- D. entry to preschool
- E. entry to first grade

Correct Answer: C

Lead-based paint was banned from use in residential homes in 1977, and children exposed to environments built before that time should be screened for lead. The age at which children most frequently ingest the largest amounts of lead is during the crawling and walking stage, which is also the oral-anal stage of development that occurs between the ages of 6 months and 2 years. Until children are mobile, they are unlikely to come into contact with objects that might have been coated with lead-based paint. Current guidelines recommend screening beginning at 1 year of age in high-risk populations. Lead levels generally peak at about 2 years of age. After 2 years, children normally have less tendency to put unusual objects and soiled fingers in their mouths.

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