- 1. A 22-year-old college student comes to the physician because of a 2-month history of palpitations. She describes feeling shaky and nervous most of the time. She is a single mother and notes that her boyfriend has not helped with their infant daughter as much as he had promised. She is having difficulty taking care of her daughter and managing her schoolwork. She also has had a 4.5-kg (10-lb) weight loss despite a normal appetite. She is 165 cm (5 ft 5 in) tall and weighs 55 kg (120 lb); BMI is 20 kg/m². Her temperature is 37.4°C (99.4°F), pulse is 120/ min, respirations are 18/min, and blood pressure is 150/70 mm Hg. Examination shows moist palms. The globes of the eyes are prominent with ptosis bilaterally. Neurologic examination shows a fine resting tremor of the hands. Deep tendon reflexes are 3+ with a shortened relaxation phase. Which of the following is the most likely diagnosis?
  - (A) Acute stress disorder
  - (B) Chronic lymphocytic thyroiditis (Hashimoto disease)
  - (C) Generalized anxiety disorder
  - (D) Graves disease
  - (E) Panic disorder
  - (F) Pheochromocytoma
- A 62-year-old man comes to the physician because of pain and swelling of the right foot for 24 hours. There is no history of trauma. One month ago, he was diagnosed with hypertension and started treatment with hydrochlorothiazide. His temperature is 37.3°C (99.1°F), pulse is 86/min, and blood pressure is 150/90 mm Hg. Examination shows tenderness, swelling, erythema, and warmth of the right first metatarsophalangeal joint; range of motion is decreased. There is mild hallux valgus. Pedal pulses and sensation are intact. He walks with an antalgic gait. X-rays of the right foot show mild joint space narrowing and periarticular bony erosions of the metatarsophalangeal joint. Which of the following is the most appropriate next step in diagnosis?
  - (A) Venous Doppler ultrasonography
  - (B) Indium-labeled white blood cell scan
  - (C) MRI of the right foot
  - (D) Technetium 99 m bone scan
  - (E) Joint aspiration
- A 23-year-old man comes to the physician because of a 1-week history of painful urination and a clear urethral discharge. One month ago, he had similar symptoms and completed a course of doxycycline therapy for a chlamydial infection. He has no previous history of sexually transmitted diseases. He has been sexually active with one female partner for 2 years, and she takes an oral contraceptive. Examination shows no abnormalities. A urine polymerase chain reaction test is positive for *Chlamydia trachomatis*. Which of the following is the most likely explanation for this patient's current infection?
  - (A) Concurrent infection with Neisseria gonorrhoeae
  - (B) Doxycycline-resistant strain of C. trachomatis
  - (C) Insufficient duration of therapy
  - (D) Reacquisition of infection from his partner
  - (E) Sequestration of C. trachomatis in the epididymis
- 4. A 60-year-old man has had mild shortness of breath with exertion for 6 months. He has smoked two packs of cigarettes daily for 40 years. Examination shows mildly decreased breath sounds and prolonged expiratory time. Pulmonary function tests show an FEV<sub>1</sub> of 70%. If this patient stops smoking, which of the following best describes the 5-year course of his FEV<sub>1</sub>?
  - (A) The FEV<sub>1</sub> will return to normal within 6 months
  - (B) The FEV<sub>1</sub> will return to normal within 5 years
  - (C) The FEV<sub>1</sub> will remain the same over time
  - (D) The FEV<sub>1</sub> will decrease at the same rate as a nonsmoker
  - (E) The FEV<sub>1</sub> will decrease at the same rate as a smoker

- 5. A 4-year-old girl is brought to the physician for a well-child visit. She feels well. She is at the 75th percentile for height and weight. Her temperature is 37°C (98.6°F), pulse is 100/min, respirations are 18/min, and blood pressure is 90/60 mm Hg. Cardiac examination shows a normal S<sub>1</sub> and S<sub>2</sub>. There is a grade 2/6, systolic, vibratory ejection murmur heard best at the fourth intercostal space in the left midclavicular line. Which of the following is the most appropriate next step in management?
  - (A) Reexamination in 12 months
  - (B) Antistreptolysin O titer
  - (C) Complete blood count
  - (D) Chest x-ray
  - (E) Echocardiography

# **Answer Form for Family Medicine Modular Sample Questions**

# (Questions 1-5)

- 1. \_\_\_\_ 2. \_\_\_ 3. \_\_\_ 4. \_\_\_ 5. \_\_\_

# **Answer Key for Family Medicine Modular Sample Questions**

# (Questions 1-5)

1.	D
2.	E

- 3. D
- 4. D
- 5. A