

# **USMLE**Q&As

**United States Medical Licensing Examination** 

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### **QUESTION 1**

A Guatemalan child with a history of meconium ileus is brought to a clinic because of a chronic cough. The mother notes a history of respiratory tract infections and bulky, foul-smelling stools. After assessment of the respiratory tract illness, the practitioner should also look for signs of:

- A. cystinuria
- B. hypoglycemia
- C. iron deficiency anemia
- D. sphingomyelin accumulation
- E. vitamin A deficiency

Correct Answer: E

Explanation:

The child likely has cystic fibrosis. In this disorder, an abnormality of chloride channels causes all exocrine secretions to be more viscous than normal. Pancreatic secretion of digestive enzymes is often severely impaired, with consequent steatorrhea and deficiency of fat-soluble vitamins, including vitamin A. Cystinuria is a relatively common disorder in which a defective transporter for dibasic amino acids (cystine, ornithine, lysine, arginine; COLA) leads to saturation of the urine with cystine, which is not very soluble in urine, and precipitates out to form stones. Hypoglycemia is not a prominent feature of children with cystic fibrosis who are on a normal diet. Hyperglycemia may occur late in the course of the disease. Iron deficiency anemia is not typically found in children with cystic fibrosis. Sphingomyelin accumulation is generally associated with deficiency of sphingomyelinase, as seen in Niemann-Pick disease.

### **QUESTION 2**

A 42-year-old woman comes to the physician for a routine examination. She says that she has felt well except for occasional episodes of constipation, abdominal discomfort, and mild fatigue. She was treated

for a renal calculus 10 years ago and was told she had a "lazy gallbladder." Her pulse is 82/min, and blood

pressure is 150/80 mmHg. Physical examination shows no other abnormalities. Laboratory studies show:

Erythrocyte count	3 million/mm <sup>3</sup>
Serum	
$\mathbf{K}^{+}$	4.5 mEq/L
Cl <sup>-</sup>	107  mEq/L
Ca <sup>2+</sup>	12 mg/dL
Phosphorus	2.2  mg/dL
Alkaline phosphatase	95 U/L

The most likely cause of this patient\\'s condition is a small, well-defined nodule in which of the following locations?

A. Adrenal gland

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B. Anterior pituitary gland
C. Gallbladder
D. Kidney
E. Parathyroid gland
F. Thymus
Correct Answer: E
QUESTION 3
A 27-year-old man is admitted to the hospital 45 minutes after being involved in a motor vehicle collision. Physical examination shows a sluggish response to stimuli. Neurologic examination shows no other abnormalities. A skull x-ray shows a linear, nondepressed basal skull fracture. Two weeks later, the patient develops polyuria and polydipsia. Laboratory studies show a serum glucose concentration within the reference range, increased serum osmolality, and decreased urine osmolality. Following the administration of desmopressin, urine osmolality increases. The beneficial effect of this drug is most likely due to activation of which of the following?
A. Adenylyl cyclase
B. Ca2+ channels
C. Janus kinase
D. Serine kinase
E. Tyrosine kinase
Correct Answer: A

### **QUESTION 4**

A 2-week-old male is brought to the physician by his mother due to labored breathing for the past day. She had a home delivery which she reports as uneventful but say she developed "pink-eye" after the first week. Vitals reveal a respiratory rate of 40/min. Physical examination reveals bilateral inspiratory crackles and faint wheezing in both lungs. Laboratory studies reveal a leukocyte count of 15,000/mm³ with 10%

- A. Ascaris lumbricoides
- B. Chlamydia trachomatis
- C. Haemophilus influenza
- D. Mycoplasma pneumoniae
- E. Neisseria gonorrhea



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Correct Answer: B
Explanation:
This neonate\\'s clinical findings are consistent with neonatal atypical pneumonia secondary to Chlamydia trachomatis types D–K. Transmission occurs from the mother\\'s vaginal canal to the neonate at birth. A classic presentation includes neonatal conjunctivitis 1-2 weeks after birth, clinical signs of pneumonia, eosinophilia and a staccato cough. A chest x-ray may show scattered infiltrates and hyperinflation of the lungs. Neonatal conjunctivitis can occur if prophylactic erythromycin eye drops are not given immediately after delivery. Gonococcal conjunctivitis typically occurs 2-7 days after birth, while chlamydial conjunctivitis has a later onset than gonococcal conjunctivitis with an incubation period of 5-14 days.
QUESTION 5
T-cell activation requires a/an cell.
A. Activation
B. Accessory
C. Plasma
D. Helper
Correct Answer: B