

NBME Type Practice Questions

1. An 8 month old male child is brought by her parents for problems with "throwing a fit". They report "he used to never have problems around people but now cries and screams whenever we try to leave him with a babysitter, or even the grandparents." They report their house was burglarized two weeks ago and that they have been more afraid for his safety and "maybe he's just feeding off us." The most appropriate diagnosis is

Correct	Choice	Feedback
X	Normal Development	Correct. This is the frequently tested "stranger anxiety". It usually starts around 7-9 months, peaks around 12-15 months and then declines.
	Post Traumatic Stress Disorder	Incorrect
	Acute Stress Disorder	Incorrect
	Parental Modeling of Fear	Incorrect. You can't blame this one on the parents.
	Adjustment Disorder	Incorrect

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2. A parent brings in her 15yo son and reports "something's wrong with him, he's probably on drugs." She reports he is sleeping late many mornings and difficult to arouse, spends "hours" on the phone talking to friends, has started listening to loud music, and recently said "whatever" when she asked him to clean up his room. The most appropriate step is

Correct	Choice	Feedback
	Prescribe methylphenidate	Incorrect.
	Begin family therapy	Incorrect.
	Contact DSS for a family home of valuation	Incorrect.
	Refer her to the police	Incorrect.
X	Reassurance that this is normal behavior	Correct! This is normal teenage behavior. There are usually 2-4 questions on every psychiatry NBME exam that the answers are "normal", and for some reason they often appear in the first 15 questions. They often include sexuality and/or children or adolescents. When in doubt, pick "normal", especially if it is an early question and about sexuality, children or adolescents.

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4. A 37 year old male with no psychiatric history presents to the E.R. on transfer from jail. Patient complains of auditory, visual, tactile, and olfactory hallucinations and stumbles around the exam room muttering incoherently to himself and not responding to questions. 10 minutes

later, a nurse reports that he has stolen a mobile phone and was overheard speaking normally. What is the most likely diagnosis? (A 37 year old male with no psychiatric history presents to the E.R. on transfer from jail. Patient complains of auditory, visual, tactile, and olfactory hallucinations and stumbles around the exam room muttering incoherently to himself and not responding to questions. 10 minutes later, a nurse reports that he had stolen a mobile phone and was overheard speaking normally. what is the most likely diagnosis?)

Correct	Choice	Feedback
	Factitious disorder	Incorrect. In factitious disorder, the patient's motivation is only to assume the sick role.
	Psychotic disorder NOS	Incorrect. It is unlikely that a patient will present with ALL of the psychotic symptoms listed.
X	Malingering	Correct. Presenting on transfer from jail (ie would rather be in the E.R. than in jail) with such a complete list of psychotic symptoms, then stealing a phone and speaking normally. This is consistent with malingering. In malingering the patient's motivation is not to assume the sick role but to gain money, abusable medications, reprieve from jail/responsibilities etc.
	Somatoform disorder	Incorrect. In somatoform disorder symptoms are not intentionally fabricated
	Hypochondriasis	Incorrect. In hypochondriasis, symptoms are not intentionally fabricated.

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6. A 67 year old woman reports that she has been depressed of late and relates "I think I'm losing my mind. Yesterday I walked into the house and mistook my hat rack for a man. It scared me half to death." What has this woman experienced?

Correct	Choice	Feedback
	A delusion	Incorrect. A delusion is a fixed false belief
	A hallucination	Incorrect. In a hallucination there is no stimulus. (the hat rack)
X	An illusion	Correct. In illusions, there is a stimulus (the hat rack) that is mistaken for something else.
	A hypnogogic hallucination	Incorrect. HypnoGOGic hallucinations occur when one is GOing to sleep
	A hypnopompic hallucination	Incorrect. Remember "POp up" ...hypnopompic occur upon waking up.

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7. What is the most common electrolyte imbalance seen in eating disorders?

Correct	Choice	Feedback
X	Hypokalemia	Correct. The typical metabolic abnormality in eating disorders with frequent purging is hypochloremic, hypokalemic metabolic alkalosis with elevated serum bicarbonate. In patients with a suspected eating disorder, always order a basic metabolic panel. In an anorexic patient with electrolyte imbalances, always admit them on the test.
	Hyponatremia	Incorrect
	Hypocalcemia	Incorrect
	Hypomagnesemia	Incorrect
	Hypernatremia	Incorrect

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37. A 72 year old female presents to clinic three weeks after her husband died. Which of the following symptoms would be consistent with a Major Depression rather than Bereavement (aka "normal grief")?

Correct	Choice	Feedback
	Hearing the voice and sometimes feeling the presence of her husband	Incorrect. Hallucinatory experiences of the dead person are considered normal grief (but not other psychotic-like symptoms). There are often several questions on Major Depression vs. Adjustment Disorder vs. Bereavement, so review the diagnosis of each of these.
	Feeling she would be better off dead or	Incorrect. This is considered normal in

	should have died with him	bereavement/ grief.
	Poor sleep and reduced appetite	Incorrect. This is considered normal in bereavement/grief
	Depressed mood and anhedonia	Incorrect. This is considered normal in bereavement/grief.
X	Morbid feelings of worthlessness and marked psychomotor retardation	Correct! These are both considered signs of a major depression rather than bereavement. The line between major depression, adjustment disorder, and bereavement is a frequent NBME questions so review the diagnostic criteria of these (you can use the online textbook or other materials).

41. From which area of the brain does the dysfunction arise from in disorders such as Tourette's syndrome, Huntington's disease and Obsessive-compulsive disorder?

Correct	Choice
	Subthalamic nucleus
	Pons
	Cerebellum
X	Caudate
	Amygdala

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42. In which of the following psychiatric diagnoses does there seem to be the greatest genetic component?

Correct	Choice
	Depression
	Borderline Personality Disorder
X	Tourette's Syndrome
	Bipolar I Disorder
	Autistic Disorder

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55. You are in lecture and as your friend beside you starts to fall asleep. He is startled awake and thinks that he heard his name called by the lecturer when in fact this wasn't the case. This experience is an example of: (You are in lecture and your friend beside you starts to fall asleep. After a few minutes, he is startled awake and thinks that he heard his name called by the lecturer when in fact this wasn't the case. This experience is an example of)

Correct	Choice
X	Hypnagogic hallucination
	Hypnopompic hallucination
	Reaction formation
	Projection
	Dementia

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56. A 45 year old man is admitted after emergent abdominal surgery to your service. He had no complications during the surgery and his vital signs have been stable until post-op day three, when he gets confused, tachycardic and hypertensive. What is the most likely cause of delirium in this patient?

Correct	Choice	Feedback
	Pain	Incorrect
	Infection	Incorrect
X	Delirium tremens	Correct. Delirium is a common presenting symptom of alcohol withdrawal. Most patients with chronic alcohol abuse begin having delirium tremens on day 3 and most always within a week on cessation of alcohol. Be thinking alcohol withdrawal on this exam.
	Dementia	Incorrect
	Stroke	Incorrect

57. Delirium

Correct	Choice	Feedback
	Usually develops over months	Incorrect. Delirium is acute.
	Is never seen in Alzheimers disease	Incorrect. Dementia is a significant risk factor for delirium.
	Always is caused by an CNS infection	Incorrect. There are multiple causes of delirium, including infection anywhere in the body, and CNS infections are relatively rare.

X	Usually causes diffuse slowing of brain activity on EEG	Correct, EEG activity is usually diffusely slow and delirium, except in cases of alcohol, benzodiazepine or barbiturate withdrawal.
	Is usually treated with cholinesterase inhibitors	Incorrect. Alzheimer's Dementia is often treated with cholinesterase inhibitors, but delirium is usually managed by fixing the cause and treating agitation with antipsychotics.

59. Which of the following would be best to give a patient with delirium and significant agitation?

Correct	Choice	Feedback
X	Haloperidol	Correct, antipsychotics are the first-line treatment of agitation in delirium in all cases except those caused by alcohol, benzodiazepine or barbiturate withdrawal. In those cases, benzodiazepines are preferred.
	Valproic acid	Incorrect
	Chlorpromazine	Incorrect
	Fluoxetine	Incorrect
	Lithium	Incorrect

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61. Pellagra is associated with which of the following?

Correct	Choice
X	Niacin deficiency
	Vitamin C deficiency
	Vitamin E deficiency
	Iron deficiency

62. Beriberi is associated with which of the following? (Similar to Wernicke's encephalopathy!)

Correct	Choice
X	Thiamine deficiency

Niacin deficiency
Iron deficiency
Riboflavin deficiency

66. "Mad Hatter Syndrome" is associated with what heavy metal poisoning?

Correct	Choice
	Gold
X	Mercury
	Chromium
	Lead
	Iron

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74. Your patient comes to your office, sits down and puts on darkly tinted glasses. You inquire about this and the patient proceeds to tell you that if he wears the glasses, you will be unable to control his mind. What is occurring in your patient?

Correct	Choice
X	Delusional thinking
	Narcissism
	Hallucination
	Fragmentation of thinking
	Magical thinking

84. In schizophreniform disorder:

Correct	Choice
	The symptoms must last less than one month

X	The symptoms must last at least one month but less than six months
	The symptoms must last at least one year but less than a decade
	Has no specifications for duration of symptoms needed for diagnosis

88. A 45-year-old gentleman is sent to see a physician by his employer after he is reprimanded for persistently turning his assignments in late. He states that he feels that he cannot turn in anything unless "it is without any mistakes, absolutely perfect...unlike the rest of the people that I work with". He does not have many friends because they get tired of his rigid rules regarding "absolute punctuality" and because he is very hard to warm up to. Which of the following is the most probable diagnosis? (A 45-year-old gentleman is sent to see a physician by his employer after he is reprimanded for turning his work assignments late. He states that he feels that he cannot turn in anything unless "it is without any mistakes, absolutely perfect, unlike the rest of the people that I work with". He does not have many friends because they get tired of his rigid rules on "absolute punctuality" and because he is very hard to warm up to.)

Correct	Choice	Feedback
X	Obsessive-compulsive personality disorder	Correct. People with this disorder may miss deadlines because they are so caught up in the details and attempt to attain "perfection." They also have difficulties with personal, social and occupational life because of the rigidity.
	Avoidant personality disorder	Incorrect.
	Generalized anxiety disorder	Incorrect
	Passive-aggressive personality disorder	Incorrect. This isn't even a DSM-IV disorder.
	Obsessive-compulsive disorder	Incorrect

89. A 73-year-old man with hypertension, hyperlipidemia and coronary artery disease is brought by his wife to see his physician. She explains to the the doctor that her husband has had a "step-wise drop-offs" in his thinking. She reports that 18 months ago, her husband was "as sharp as a tack", but since then, he started forgetting little things like where he placed his belongings and simple driving directions. The patient says that he feels "pretty good", but that he thinks he might be a little depressed as it makes him sad to think that he might be losing his memory. He states he sleeps well and has a hearty appetite. Which of the following is the most likely diagnosis?

Correct	Choice	Feedback
	Mood disorder secondary to a general medical condition	Incorrect
X	Multi-infarct dementia	Correct. The key word here is "STEPWISE DECLINE". This is a progressive dementia that is caused by multiple cerebral infarcts. These infarcts lead to focal neurological signs and often to other symptoms such as depression, mood changes, and delusions.
	Anxiety disorder	Incorrect
	Bipolar disorder	Incorrect
	Major Depression	Incorrect

90. A woman comes to see her psychiatrist for an outpatient visit. During the session, the patient begins to treat the psychiatrist as if he had been unreliable and neglectful, which was not the case. The patient's father had used alcohol and drugs heavily and often forgot to pick her up from school and would sometimes slap her for no apparent reason. The psychiatrist begins to feel like he needs to give her extra protection and speak gently to her, as he views this patient to be similar to his own younger sister. What is the psychiatrist exhibiting?

Correct	Choice	Feedback
X	Countertransference	Correct. Countertransference describes the therapist's response to the patient and is based on the therapists own past experiences and internal feelings.
	Transference	Incorrect. Transference is very similar but it is the patient's response to the therapist.
	Delusion	Incorrect
	Projection	Incorrect
	Reaction formation	Incorrect

91. A 25 -year-old woman with a past history of schizophrenia presents to the ER screaming "They are after me! They'll kill me." She refuses to lie on the gurney and insists on sitting on the floor in the corner of the room facing the door. She is very aggressive and non-compliant in the exam room but suddenly is still and begins staring at the door. Although there is nobody present, she states, "No, I won't do that, get away from me!" Which of the following best describes what this patient is experiencing?

Correct	Choice	Feedback
X	Hallucinations	Correct. A hallucination is the perception of a stimulus when there is no actual sensory stimulus present. Hallucinations can be auditory, visual, tactile, gustatory, olfactory or kinesthetic. Auditory hallucinations are

	most commonly seen with psychotic disorders, whereas the others (especially in the absence of auditory hallucinations) may suggest a neurologic disorder.
Idea of reference	Incorrect. An idea of reference is when a patient believes that a certain source, most commonly the television or radio, is sending them special messages.
Delirium	Incorrect
Circumstantial thought process	Incorrect
Clanging	Incorrect

92. A 22-year-old woman presents to the ER with chief complaint of depressed mood for the past 2-1/2 weeks. She says that ever since her therapist left for vacation, she has been having thoughts of suicide and feelings of hopelessness with frequent crying spells. She has left messages on the therapists voicemail telling him that she is going to kill herself and that it will be his fault because he left her. On physical exam, she has several scars on her forearms and what appear to be healed cigarette burns all over her body. Which of the following is the most likely diagnosis? (A 22-year-old woman presents to the ER with chief complaint of depressed mood for the past 2-1/2 weeks. She says that ever since her therapist left for vacation, she has been having thoughts of suicide and feelings of hopelessness and has frequent crying spells. She has left messages on the therapists voicemail telling him that she is going to kill herself and that it is will be his fault because he left. On physical exam, she has several scars on her forearms and what appear to be healed cigarette burns all over her body. Which of the following answers best describes this patients' diagnosis?)

Correct	Choice	Feedback
	Histrionic personality disorder	Incorrect
	Schizoid personality disorder	Incorrect
X	Borderline personality disorder	Correct. Individuals with borderline personlaity disorder form unstable relationships and view others as either all good or all bad. Their perception of others is so unreliable that it may change from one day to the next. They are also often self-destructive, eg. "cutters", see Glen Closel in "Fatal Attraction".
	Avoidant personality disorder	Incorrect
	Narcissistic personality disorder	Incorrect

97. A 38-year-old woman states that she spends 2 hours every morning making sure that all the faucets in the house are turned off. She says that if she doesn't do this, she can not leave for work. Which is the best description of her behavior?

Correct	Choice	Feedback
	Folie a' deux	Incorrect, this describes a delusional belief that is shared by two individuals
X	Compulsions	Correct. In OCD, obsessions are the anxiety provoking thoughts, and compulsions are the behaviors people do to reduce anxiety associated with the thoughts.
	Circumstantial thinking	Incorrect
	Delusions	Incorrect
	Obsessions	Incorrect. Obsessions are thoughts, and this question is about behaviors.

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99. A 27-year-old man with a history of schizophrenia is brought to the ER by ambulance after his parents found him in his bed and were unable to arouse him. On exam, he is severely confused. He has muscle rigidity, a temperature of 103 F and his blood pressure is elevated. Labs show only leukocytosis. Which of the following drugs would be the best one to give first to this patient? (A 27-year-old man with a history of schizophrenia is brought to the ER by ambulance after his parents found him in his bed and were unable to arouse him. On exam, he is severely confused. He has muscle rigidity, a temperature of 103 F and his blood pressure is elevated. His blood is drawn and he has leukocytosis. Which of the following drugs would be the best one to give first to this patient?)

Correct	Choice	Feedback
X	Bromocriptine	Correct, this is Neuroleptic Malignant Syndrome. The treatment for this is stopping antipsychotic medications, admitting to a hospital, giving IV fluids, and possibly using medications like bromocriptine (a dopamine agonist) or dantrolene.
	Haloperidol	Incorrect
	Chlorpromazine	Incorrect
	Promethazine	Incorrect
	Quetiapine	Incorrect

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104. For the past 8 years the memory of a 88 year old woman has progressively declined. Lately she leaves doors and windows wide open and gets lost on the way to the grocery store. Of particular note, she becomes disoriented and confused around bedtime. Her muscle strength, motor and sensation are intact. Which of the following is the best diagnosis?

Correct	Choice	Feedback
X	Alzheimer's Dementia	Correct. This is classic for Alzheimer's. Alzheimer's is the most common dementing disorder in America. Progressive memory loss and aphasia/anomia/apraxia/agnosia are often seen.
	Multi-infarct Dementia	Incorrect. This is likely the second best answer, but they will give you some history of atherosclerotic disease and indicate a "stepwise progression" of the disease.
	Huntington's disease	Incorrect. Huntingtons is usually in the 30's-50's and choreiform movements and some sort of family history will at least be alluded to
	Delirium	Incorrect. Delirium is acute in onset and has a waxing/waning progression and there will be clouding of sensorium.
	Unspecified prion disorder	Incorrect. This is baloney.

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105. A 78 year old gentleman with dementia dies in a helicopter crash. Over the last 10 years he had been noted to have significant personality changes to the point that he "just wasn't the same person." Autopsy shows fronto-temporal atrophy, gliosis of the frontal lobes and intracellular inclusions and edema without neurofibrillary tangles or amyloid plaques. Which is the correct diagnosis?

Correct	Choice	Feedback
X	Pick's Disease	Correct. Pick's shows socially inappropriate behavior and the autopsy findings are classic
	Alzheimer's disease	Incorrect. Would see the tangles and plaques on autopsy
	HIV dementia	Incorrect
	Alcoholic degeneration	Incorrect
	B-12 deficiency	Incorrect

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106. A 23 year old healthy woman with multiple tattoos is brought to the er after she began screaming at mall patrons, "You are all trying to get me, but I won't let you!" On exam she is

agitated, appears very suspicious, and is uncooperative. She does not give much history except that she has felt this way for about 8 hours and that this has never happened before. What is the most likely diagnosis?

Correct	Choice	Feedback
X	Cocaine intoxication	Correct. This is a classic presentation for cocaine intoxication. Amphetamine intoxication or PCP intoxication would be reasonable as well.
	Delirium	Incorrect. No medical history and a previously healthy patient rule this out at least for testing purposes. For delirium questions they will likely be in the hospital and s/p surgery or in EtOH withdrawal.
	Dissociative disorder	Incorrect
	Opiate intoxication	Incorrect. Patients with opiate intoxication typically are not anxious, agitated, or suspicious
	Schizophrenia	Incorrect. Not with a 8 hour history. ASst best this would be a brief psychotic episode and cocaine intoxication in a young girl is much more likely.

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107. A thin and lethargic 14 year old female presents to the ER with hypotension and bradycardia. Labs show a potassium of 2.8. The girl's friend reports that she has lost 40 pounds over the last few months and yet still believes herself to be fat, exercising up to 7 hours per day. What else might be seen in this patient?

Correct	Choice	Feedback
X	Purging	Correct. Anorexia will show a refusal to maintain weight, intense fear of gaining weight, amenorrhea, and distorted body image. Patients typically will drastically decrease their calorie intake and exercise vigorously but can also use purging and abuse of laxatives/emetics. Hypokalemia along with lesions on the back of fingers are classic for purging as is erosion of dental enamel. Keep in mind that anorexics can have bulimic behavior.
	Wearing spandex	Incorrect. Anorexic patients will typically wear quite baggy clothes as they believe they are quite fat
	Starting fires	Incorrect. This is seen in conduct disorder.
	Alcohol abuse	Incorrect.
	Trichotillomania	Incorrect. This is the impulsive pulling out

of one's own hair...which may show up elsewhere on the exam

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108. A 60 year old woman falls in the shower and hits her head. Over the next 14 days, she develops a persistent headache and has become somewhat forgetful and somewhat paranoid at night time. Which of the following is the most likely cause of her symptoms?

Correct	Choice	Feedback
X	Subdural hematoma	Correct. Chronic subdurals cause a reversible form of dementia. Tearing of the subdural veins are the "go words" here. Symptoms seen are Headache, confusion and forgetfulness.
	Meningioma	Incorrect. Time course and history are wrong.
	Epidural Hematoma	Incorrect. This is typically the middle meningeal artery or vein. The go words here would be "a brief period of lucidity followed by a loss of consciousness."
	Alzheimer's dementia	Incorrect
	Delirium	Incorrect

109. A 27-year-old male smells burnt rubber, then turns his head and torso to the side, makes strange movements with his face and tugs at his shirt repetitively. Throughout this episode, which last about a minute, he seems confused. What is the most probable diagnosis in this young man?

Correct	Choice	Feedback
X	Partial complex seizure	Correct, these symptoms are classic for partial complex seizure. The hallucinations are most commonly olfactory and patients likely will experience a post-ictal state of headaches and sleepiness.
	Absence seizure	Incorrect, with absence seizures, there is usually no motor activity outside of staring or blinking and the seizures usually are of a shorter duration.
	Occipital lobe brain tumor	Incorrect
	Malingering	Incorrect
	Tourette's disorder	Incorrect

110. A 47-year-old man recurrently perceives the smell of "rotten eggs." This kind of hallucination is seen most commonly with what disorder?

Correct	Choice	Feedback
X	Partial complex seizures	Correct. Hallucinations like this are rare and are most commonly associated with partial complex seizures, but can also be associated with psychosis, hypochondriasis and olfactory tumors.
	Huntington's chorea	Incorrect
	Wilson's disease	Incorrect
	Narcolepsy	Incorrect

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114. During the course of an initial interview with a patient you learn that he has been caring for his 84 year old grandmother. He reports Insomnia, feelings of hopelessness and infrequent suicidal ideation. He relates, "Doc, it just gets so frustrating caring for her that sometimes I end up yelling at her and a few weeks ago, I'm embarrassed to say that I intentionally scalded her with hot water." Patient reports this behavior has stopped and will never happen again. Which of the following is the next best course of action?

Correct	Choice	Feedback
X	Notify the police immediately of what the patient has done.	Correct. We do not have a duty to report past crimes and in most states we are not required to report abuse. However, there are two exceptions: Abuse of children and the elderly (also the mentally retarded.)
	Notify the patient that should this occur again, you will be forced to notify the police	Incorrect. Must report abuse of kids and the elderly
	Take no action. Your duty is only to the patient. Do not prescribe an antidepressant.	Incorrect. Must report abuse of kids and the elderly.
	Attempt to contact the Grandmother to notify her that she may be in danger	Incorrect. Must report abuse of the elderly to the police
	Take no action. Prescribe an antidepressant medication for clear-cut major depression	Incorrect. Must report abuse of the elderly to police

115. A 34 year old woman diagnosed with bipolar disorder and maintained with lithium presents for follow up and reports a ten pound weight gain along with lethargy. Lithium level is .89 in clinic today. Which of the following is the next best test?

Correct	Choice	Feedback
X	TSH	Correct. Weight gain and lethargy point to hypothyroidism. You will be tested, in one fashion or another, on the association between lithium and hypothyroidism
	LFT's	Incorrect
	Creatinine	Incorrect. It is important to follow creatinine as lithium is cleared by the kidney, but the question here is leading you down the hypothyroidism path.
	HgbA1c	Incorrect
	Urine drug screen	Incorrect

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116. a 36 year old man reports to the er with recurrent epistaxis. History reveals he is treated at the local mental health center for an unspecified mood disorder. Which medication is he likely taking?

Correct	Choice	Feedback
X	Valproate	Correct. This is the same drug as depakote and valproic acid. Worrisome side effects include thrombocytopenia (causing nose-bleed here) and liver failure among others.
	Lithium	Incorrect
	Stelazine	Incorrect
	Fluoxetine	Incorrect
	Risperidone	Incorrect

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117. A 19 year old homeless male presents to the er with abrupt onset of rigid contraction of his back and neck muscles. What is the most likely cause?

Correct	Choice	Feedback
X	Haloperidol	Correct. This is an acute dystonic reaction, which is commonly seen with Haldol.
	Clozapine	Incorrect. Good guess since clozapine is an antipsychotic, but Clozaril is not the best answer as Haldol is much more likely to cause EPS
	Valproic acid	Incorrect. There is no reason to believe that Valproic acid, a mood stabilizer, would cause an acute dystonic reaction.
	Diazepam	Incorrect. There is no reason to believe that Diazepam, an anxiolytic, would cause an acute dystonic reaction.
	Sertraline	Incorrect. There is no reason to believe that

Sertraline, an SSRI, would cause an acute dystonic reaction.

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118. A 28 year old man is started on Haldol and develops acute shortness of breath secondary to laryngospasm. Which of the following is the best treatment? (A 28 year old man is started on Haldol and develops acute shortness of breath secondary to laryngospasm. Which of the following is the best treatment?)

Correct	Choice	Feedback
X	Benztropine	Correct. Laryngospasm is the most feared dystonia associated with antipsychotics. The treatment is benztropine, also called Cogentin, intramuscularly. This will almost certainly be tested.
	Sertraline	Incorrect
	Risperidone	Incorrect
	Clonazepam	Incorrect
	Propranolol	Incorrect

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119. A 24 year old man is started on Aripiprazole and develops uncomfortable restlessness that drives him to move his feet constantly. Which of the following is the best treatment?

Correct	Choice	Feedback
X	Propranolol	Correct. This is a classic description of akathisia, a side effect of antipsychotics. First line treatment is a beta blocker. Propranolol is also the treatment of choice for another drug side effect: lithium induced tremor
	Paroxetine	Incorrect
	Clonazepam	Incorrect
	Risperidone	Incorrect
	Amitryptiline	Incorrect

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120. A 43 year old man presents with symptoms consistent with major depressive disorder. He has a history of hypertension. Which of the following antidepressants might worsen his blood pressure?

Correct	Choice	Feedback
X	Venlafaxine	Correct. Venlafaxine, or Effexor, can cause diastolic hypertension and would therefore not be the best choice in this scenario. It

	can also cause increased sweating, mydriasis and withdrawal symptoms.
Nortryptiline	Incorrect.
Paroxetine	Incorrect
Fluoxetine	Incorrect
Wellbutrin	Incorrect

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121. A 34 year old woman who was being treated for depression abruptly discontinued her antidepressant medication because she was concerned that she might be pregnant. Patient's pregnancy test in your office was negative but she does not want to restart her medication. Three days later she calls to report nausea, headaches, fatigue and lethargy and would like to be re-tested. Which of the following was patient most likely taking? (A 34 year old woman who was being treated for depression abruptly discontinued her antidepressant medication because she was concerned that she might be pregnant. Patient's pregnancy test in your office was negative but 3 days later she calls to report nausea, dizziness, headaches, fatigue and lethargy and would like to be re-tested. Which of the following was patient most likely taking?)

Correct	Choice	Feedback
X	Paroxetine	Correct. Paroxetine and venlafaxine can cause significant withdrawal side effects. These medications should be tapered slowly over the course of several weeks.
	Fluoxetine	Incorrect
	Sertraline	Incorrect
	Bupropion	Incorrect
	Mirtazapine	Incorrect

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124. An 18 year old male is brought to his primary care with complaints of increased anxiety, irritability and aggression over the past 2-3 months. He is noted to have gynecomastia, acne, and hypogonadism. Which of the following substances is he likely abusing?

Correct	Choice
	Methamphetamines
X	Testosterone
	Heroin
	Thyroxine
	Cocaine

125. A 55 year old woman is brought to the er with shallow respirations and constricted pupils. Which of the following has he likely ingested?

Correct	Choice	Feedback
	Cocaine	Incorrect
	LSD	Incorrect
X	Meperidine	Correct. Pinpoint pupils, and shallow breathing along with stupor are classic for opiate intoxication
	PCP	Incorrect
	MDMA	Incorrect

126. Which of the following is indicated for opiate overdoses?

Correct	Choice	Feedback
	PO Naltrexone	Incorrect. Naloxone is the fast acting version of this and is preferred. Naltrexone would take too long to work; plus, you'd have a hard time getting a comatose patient to swallow it.
X	IV Naloxone	Correct
	IV Phenobarbital	Incorrect
	IM Cogentin	Incorrect
	IV Haldol	Incorrect

127. A 38 year old woman walks into the er with a pulse of 110 and an elevated blood pressure. She appears anxious, is tremulous and diaphoretic and is unable to give much of a history other than "I see spiders everywhere...get them away!" The RN calls the patient's parents and they are positive that she has had no alcohol or drugs over the past 3 days, but they don't know about before that because she has only been with them for the last few days. Which of the following is the most likely diagnosis? (A 38 year old woman walks into the er with a pulse of 110 and an elevated blood pressure. She appears anxious, is tremulous and diaphoretic and is unable to give much of a history other than "I see spiders everywhere...get them away!" The RN calls the patient's parents and they are positive that she has had no alcohol or drugs over the past 3 days. Which of the following is the most likely diagnosis?)

Correct	Choice	Feedback
X	Alcohol withdrawal	Correct. No booze in 3 days is the perfect set-up for ETOH withdrawal and the symptoms listed above are pathognomonic.

Schizophrenia	Incorrect
Bipolar disorder	Incorrect
Alcohol intoxication	Incorrect
PCP intoxication	Incorrect

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128. A 56yo male with end-stage liver disease from hepatitis C, ascites and jaundice requires treatment for alcohol withdrawal and insomnia. Which of the following should be avoided? (Which of the following would not be a good choice for treating alcohol withdrawal in a patient with liver impairment?)

Correct	Choice	Feedback
	Oxazepam	Incorrect
	Lorazepam	Incorrect
	Temazepam	Incorrect
X	Chlordiazepoxide	Correct. Remember the mnemonic Outside The Liver (OTL). These are the benzodiazepines that are not primarily metabolized by the liver, and therefore first line treatment in those with liver impairment. Usually lorazepam is used in this scenario, but you must know that these three benzos are "Outside The Liver"

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129. A 45 year old man is admitted for a cholecystectomy. One day post-op he complains of a "horrible headache." Which one of the following would best explain his headache?

Correct	Choice	Feedback
	He smokes marijuana every other day	Incorrect
	He drinks 2-3 beers weekly	Incorrect
X	He drinks 7-8 sodas daily	Correct. Post-op headache is common after surgery. Do not discount caffeine intoxication (tachycardia, tremor, anxiety) or withdrawal (as above)
	He swims 10 laps daily	Incorrect
	Excessive MSG intake	Incorrect

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130. A man is brought in to the er by hospital security. He is combative and extremely agitated. He is placed in restraints after he punches a nurse and on exam he is noted to have nystagmus, HTN, tachycardia, and increased DTR's. Which of the following did he likely ingest?

Correct	Choice	Feedback
X	Phencyclidine	Correct. If you see "nystagmus," you

	should probably answer PCP.
Amphetamine	Incorrect
Cocaine	Incorrect
LSD	Incorrect
Mescaline	Incorrect

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131. A 42 year old man with schizophrenia is admitted to an inpatient psychiatric ward and is stabilized over the course of a week. He reports that in the past he has done well on multiple antipsychotics "But when I get out of the hospital, I'll drink a beer or two and think its a good idea to quit taking my medications." Which of the following would be the best antipsychotic for this patient?

Correct	Choice	Feedback
x	Haloperidol decanoate	Correct. This decanoate preparation requires only monthly injections and is invaluable when medication adherence is an issue. Other antipsychotic decanoate injections include risperidone ("risperidone microspheres") and fluphenazine so keep an eye out for a similar question with one of those as the answer.
	Risperidone	Incorrect. Would have been correct had it been the long-acting injectable.
	Clozapine	Incorrect
	Haloperidol	Incorrect. But note that "haldol" and "haloperidol" are the same thing.
	Fluphenazine	Incorrect. Might have been a good choice had it been the decanoate preparation.

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132. A 34 year old woman presents to an inpatient psychiatric unit with pressured speech, racing thoughts, a tangential and circumstantial thought processes. She states "I just cornered the market on crystal balls! I am the richest person alive." In Speaking with her mother, you learn that she has been "hearing voices" for years. Which of the following is the best diagnosis?

Correct	Choice	Feedback
	Schizophreniform	Incorrect. This is schizophrenia but just not for 6 months or longer. Watch it, examiners have no problem selling you a case with clear-cut schizophrenia....only over the course of 170 days.
	Schizophrenia	Incorrect. Patient is clearly manic. Folks that have schizophrenia on the exam will likely display more of a flat affect (and will not be manic).

X	Schizoaffective disorder	Correct. Think of Schizoaffective disorder as symptoms of schizophrenia along with symptoms of bipolar disorder. Patient is clearly manic in the presentation and has had longstanding auditory hallucinations. the "-affective" part of the word is what is referring to the mood component (mania here) of the diagnosis. To diagnose schizoaffective disorder, there must be at least 2 weeks of psychosis without an affective component (affective refers to mania or depression)
	Schizoid personality disorder	Incorrect. These people are hermits. Don't have friends and don't want any.
	Schizotypal personality disorder	Incorrect. These people are just kinda weird. ESP, mindreading, power of crystals, dreamcatchers on the rearview mirror. key phrase to watch for is "magical thinking"

133. A 42 year old woman is recovering from an exploratory laparotomy (Her 7th over the course of 10 years) secondary to abdominal pain of unknown etiology. Her laparotomy was negative and when a nurse walked in to check on her this morning she was found rubbing feces into her surgical wound. Which of the following is the best diagnosis? (A 42 year old woman is recovering from an exploratory laparotomy (her 7th over the course of 10 years) secondary to abdominal pain of unknown etiology. Her laparotomy was negative and when a nurse walked in to check on her this morning she was found rubbing feces into her surgical wound. Which of the following is the best diagnosis?)

Correct	Choice	Feedback
X	Factitious disorder	Correct. Here are the two important things here: 1) Symptoms are INTENTIONALLY FABRICATED and 2) What they are trying to gain is only TO ASSUME THE SICK ROLE. They're not fabricating symptoms for money or drugs or to avoid work...this would be malingering.
	Malingering	Incorrect. In malingering, symptoms are intentionally fabricated but they want something more than to just assume the sick role and stay in the hospital...such as workman's compensation. A good example of malingering is calling in sick when you're not.
	Hypochondriasis	Incorrect. In hypochondriasis, symptoms are NOT intentionally fabricated. These

	people are typically convinced they have a SPECIFIC disease such as liver cancer and will seek diagnosis and treatment even if presented with pretty good evidence that they do not have it.
Somatization disorder	Incorrect. In somatization disorder, symptoms are NOT intentionally fabricated. They typically have multiple complaints in multiple organ systems (GI, Neuro, Sexual)

134. A 37 year old male presents with complaints of anxiety. He reports that he would like medication so that he can attend his 20 year high school reunion. Pt reports that he would like to go, but traditionally he has anxiety, palpitations and sweating in groups of people and therefore avoids them. Which is the best diagnosis?

Correct	Choice	Feedback
X	Social Phobia (social anxiety disorder)	Correct. This kind of behavior, limited to social situations is best classified as social phobia
	Schizoid personality disorder	Incorrect. Schizoids are hermits and have no interest in their high school reunion.
	Generalized anxiety	Incorrect. Generalized anxiety is GENERALIZED and not really situation specific
	Panic disorder	Incorrect. Some sx of panic are listed but social phobia is a better diagnosis
	PTSD	Incorrect. Avoidance of groups and the sx of anxiety are seen in PTSD but there is no evidence of previous trauma given and several hallmarks of this dx are missing

135. A 17 year old male with no past psychiatric contact presents to the emergency department with several of his friends who report that his behavior has been bizarre over the last 6 hours. He is confused, hypervigilant, disoriented and has elevated blood pressure. At one point he appears catatonic but this quickly reverses and he assaults you requiring him to be restrained. Which of the following is the best diagnosis?

Correct	Choice	Feedback
X	PCP intoxication	Correct. Violence, the fact that he was brought in with his pals and the other sx point to PCP intoxication. On the exam, if you see "nystagmus," think PCP intoxication
	Marijuana intoxication	Incorrect

Schizophrenia	Incorrect...and make sure you know the time requirements for various diagnoses. Schizophrenia is 6 months or greater
Bipolar disorder – Manic	Incorrect
Alcohol intoxication	Incorrect

136. A 48 year old male presents to the er with complaints of shortness of breath, numbness, and tingling over the past few hours. His exam, EKG and labs so far are negative for a myocardial infarction. Which of the following would be the best medication to prescribe?

Correct	Choice	Feedback
	Oxygen	Incorrect
	Haldol	Incorrect
X	Lorazepam	Correct. This is a typical presentation for a panic attack on the shelf. SSRIs are the preferred treatment for panic disorder, but if you see an emergency room case that needs acute treatment, you would need to give a benzodiazepine. SSRIs take a couple of weeks to work.
	Verapamil	Incorrect
	Sumatriptan	Incorrect

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137. A 29 year old woman presents with a two year history of consistent depression characterized by feelings of worthlessness, anergia, anorexia, insomnia, concentration problems and anhedonia. Which of the following is the best diagnosis.

Correct	Choice	Feedback
X	Major Depressive disorder	Correct. Dysthymic disorder is a MILD form of chronic depression. Count the # of SIGECAPS symptoms and if it is 4 or 5, go with Major Depression, even if it has gone on for more than two years.
	Bereavement	Incorrect. There's nothing about a death or other cause for bereavement here.
	Dysthymic disorder	Incorrect. Dysthymic disorder is characterized by sx of mild depression that does not meet criteria for MDD. The time course sounds right, but if it meets criteria for major depression you call it that.
	Bipolar disorder	Incorrect.
	Malingering	Incorrect. Careful with malingering on the exam. The presentation will be clear-cut

("jail", "disability payments", etc).

138. A 24 year old woman 5 weeks postpartum presents to the emergency room with severe depression and suicidal ideation. She reports that her plan would be to "Take my medications and just go to sleep." When asked what she would do if she were discharged she replies "I can't be sure but I can't stay because there's nobody to take care of my child." What is the next best step?

Correct	Choice	Feedback
X	Admit to the hospital against the patient's wishes	Correct. Pt cannot contract for safety outside of the hospital and is severely depressed with plan and unclear intent. Best to err on the side of safety.
	Discharge patient but with close follow-up after ensuring the safety of her child and have her sign a witnessed no-harm contract	Incorrect. Patient safety is first. No harm contracts are totally worthless. Folks that want to die....not so concerned about their contractual obligations.
	Prescribe an antidepressant that is not excreted in the breast milk.	Incorrect. This will take weeks to work and patient is suicidal now.
	Administer ECT, as no antidepressant is excluded from breast milk	Incorrect. Patient safety comes first. Hospitalize with suicidal ideation if it's "iffy" even if its against someone's will.

139. An 88 year old woman presents to clinic with her family who report that she has become increasingly and markedly forgetful over the last year without other sx. You obtain an MRI which is negative and a B12, folate, and TSH along with complete metabolic panel which are all negative. Which of the following is the best treatment?

Correct	Choice	Feedback
	Risperidone	Incorrect
X	Donepezil	Correct. This is a cholinesterase inhibitor and is first-line treatment for dementia. Familiarize yourself with the others, galantamine and rivastigmine (might also see memantine, which works via glutamate mechanism but is also a dementia medication). Test might be looking for you to rule out pseudodementia (dementia caused by depression) as well as "reversible" causes of dementia such as hypothyroidism, low B12 etc, so watch it.
	Escitalopram	Incorrect. There is no mention of pseudodementia or depression to indicate SSRI rx
	Haldol	Incorrect

Lorazepam	Incorrect and can worsen sx
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140. A 44 year old woman presents with 3 months of recurrent vivid nightmares of being chased and assaulted. Pt reports that she does know that it is a dream and is able to go back to sleep. Which of the following is the best diagnosis?

Correct	Choice
X	Nightmare disorder
	Night terrors
	Sleep paralysis
	Sleep attack

, Try again

141. A 36 year old man presents with his wife and she reports he has had "Odd jerking and dancing movements" over the past 6 weeks. She has also noted some memory loss of late adding "I'm very concerned because his mom had some of this and she died young." Which of the following areas is most associated with the choreiform movements described above?

Correct	Choice
X	Caudate nucleus
	Amygdala
	Hippocampus
	Thalamus

, Try again

142. A 31 year old man who was taking Fluoxetine for Obsessive Compulsive Disorder discontinued the medication stating "Medications make me nervous." He continues to report symptoms consistent with OCD. What is the most appropriate form of psychotherapy

Correct	Choice	Feedback
X	Cognitive Behavioral Therapy	Correct. CBT is reasonable for depression and anxiety. For OCD only, you might also see "Exposure-Response Prevention", which is a specific type of CBT for OCD.
	Insight-oriented Therapy	Incorrect. This is never a correct answer.
	Interpersonal Therapy	Incorrect. This works for depression, but doesn't work for OCD.
	Psychodynamic psychotherapy	Incorrect. This is never a correct answer.

Family therapy	Incorrect. Sounds good, but doesn't work for OCD.
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143. A 35 year old male with multiple medical medical problems stemming from leukemia presents for treatment. Over the past few months his consultations have included GI, Neurology, Infectious disease, and now Psychiatry. He reports that his future "Aint lookin' great." You ask whether he has been depressed of late and he responds "Do we have to do this? I'm just too tired to deal with all of this." Which of the following is the next best step?

Correct	Choice	Feedback
	Prescribe Nortryptiline	Incorrect.
	Prescribe Fluoxetine	Incorrect. The Prozac won't be worth much if he walks out of the office and throws himself in front of a bus.
	Review pertinent labs	Incorrect. Importantbut not the best choice.
X	Ask patient about suicide.	Correct. No brainer, right? Make sure you read all the choices on these exams and get your priorities straight. Suicide and patient safety is job # 1
	Order a brain MRI	Incorrect

144. A 55 year old woman presents to clinic and meets criteria for major depressive disorder. She reports that she has neuropathic pain from long standing diabetes as well as mild arthritic pain. Which of the following would be the best medication for her?

Correct	Choice	Feedback
X	Nortryptiline	Correct. This tricyclic antidepressant has an indication for both chronic pain (especially neuropathic pain) as well as depression. Another combination they might ask about would be in a depressed patient who is looking to quit smoking (use Bupropion, as the other names for this medication are Wellbutrin and Zyban and it has a dual indication for smoking cessation and as an antidepressant)
	Bupropion	Incorrect. This is not the best answer.
	Sertraline	Incorrect. An SSRI is not the best choice. Make sure you know which drugs are in which classes as it will help you answer many questions
	Tranylcipromine	Incorrect. An MAOI is not the best choice. Make sure you know which drugs are in

	which classes as it will help you answer many questions
Buspirone	Incorrect. This is not the best answer.

145. A 24 year old woman presents to the er with seizures. ER staff has called you to evaluate the patient because her EEG and prolactin levels were normal, she was not post-ictal and she has no neurological signs. She reports that she has not had seizures in some time and that her family is "Probably going to freak out" because she is starting her first "Real job" and moving to another city in two days. Which of the following is the most likely diagnosis? (A 24 year old woman presents to the er with seizures. ER staff has called you to evaluate the patient because her EEG was completely normal and she has no neurological signs. She reports that she has not had seizures in some time and that her family is "probably going to freak out" because she is starting her first "real job" and moving to another city in two days. Which of the following is the most likely diagnosis?)

Correct	Choice	Feedback
X	Conversion disorder	Correct. This is pseudoseizures which is a common form of conversion disorder. Keep in mind that symptoms are not intentionally fabricated and that there is usually an identifiable stressor with conversion disorder.
	Seizures	Incorrect. With everything normal, this would be less likely.
	Hypochondriasis	Incorrect. You can score a lot of points if you know the key differences between malingering, factitious disorder, somatization disorder, conversion disorder, and hypochondriasis.
	Somatization disorder	Incorrect. You can score a lot of points if you know the key differences between malingering, factitious disorder, somatization disorder, conversion disorder, and hypochondriasis.
	Cocaine withdrawal	Incorrect

146. A 21 year old female is brought to the ER by her parents after she "Locked herself in the bathroom for 4 days." Mom reports that, over the past week, she has been despondent over a recent break-up with her boyfriend which was mildly concerning. However, over the last 4 days she has "Become a shut-in and has been ranting and raving that her father and everyone else are trying to kill her" You ask the patient if this is true and she pulls a knife out of her coat and says "Nobody is going to kill me by stabbing me in the kidney, you hear me?" Which of the following is the best diagnosis?

Correct	Choice	Feedback
	Schizophreniform disorder	Incorrect. Not long enough with the psychotic symptoms. This is one month to 6 months.
X	Brief psychotic episode	Correct. Has to be 6 months for schizophrenia and she was not psychotic long enough for schizophreniform disorder. Her sentence at the end of the presentation is a food example of "clanging"
	Schizophrenia	Incorrect. Need six months of symptoms for a diagnosis
	Acute intermittent porphyria	Incorrect. There is no mention of abdominal symptoms, paroxysmal episodes, or "red tinged" urine as would be present in AIP.
	Major depressive disorder with psychotic features	Incorrect. Need two weeks for diagnosis and they would have given you more SIGECAPS.

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147. An 81 year old gentleman presents to clinic with his wife of 60 years. She reports that lately he has been somewhat forgetful and, of particular concern, left the stove on. Patient reports he is "feeling depressed and helpless" with some difficulty recalling past events which he seems apathetic about, as well as significant psychomotor retardation. He has had a decreased appetite along with recent weight loss and has poor performance on memory testing. Patient's wife requests Sertraline, which reportedly helped some years ago. Which of the following is the best diagnosis?

Correct	Choice	Feedback
X	Major depressive disorder	Correct. Old people can have crummy memory without a diagnosis of dementia. If pseudodementia was an available answer, it would be a solid answer as well. Previous episode along with prominent depressive symptoms and little mention of a dementia progression should make you think depression.
	Alzheimer's dementia	Incorrect. No gradual loss of function was mentioned. Not at all a classic description of dementia.
	Frontotemporal dementia	Incorrect
	Vascular dementia	Incorrect.
	Dysthymic disorder	Incorrect. in dysthymic disorder, there will always be at least passing mention that sx have gone on for at least 2 years or "all my life" etc.

148. A 47 year old chemist is noted to be experiencing auditory hallucinations of "The devil speaking to me and messing with my front yard." He has marked writhing of the upper extremities and repetitive oral movements on exam. Which of the following is the best diagnosis?

Correct	Choice	Feedback
	Phenylketonuria	Incorrect.
X	Huntington's disease	Correct. Writhing or dance-like movements/jerking (that patients will sometimes try to play off as volitional) along with psychosis should have you thinking Huntington's. Another big clue would have been if a parent had a similar presentation in the years prior and met an early demise.
	Malingering	Incorrect.
	New onset Schizophrenia	Incorrect. Once could make an argument for Schizophrenia with subsequent tardive dyskinesia, but it says "new onset" so tardive is less likely. Patient is also in the Huntington's age range (40-50) and had excellent pre-morbid function (chemist)
	Schizoaffective disorder	Incorrect. There is no mention of an affective component and how would you explain the movement disorder?

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149. A 14 year old boy is seen in clinic "So we can get him started on those ADHD pills." Family reports that he is Hyper and distractible and has done quite poorly in school. Testing in the past has shown an IQ of 72. On exam he has a large head with large protruding ears, and macroorchidism. Which of the following is the best diagnosis? (A 14 year old boy is seen in clinic "So's we can get him started on those ADHD pills." Family reports that he is Hyper and distractible and has done quite poorly in school. Testing in the past has shown an IQ of 72. On exam he has large head with large protruding ears, and macroorchidism. Which of the following is the best diagnosis?)

Correct	Choice	Feedback
X	Fragile X	Correct. This is the most common INHERITED form of mental retardation and is due to an increased number of triplet CGG repeats on the X chromosome...Its on the test.
	Phenylketonuria	Incorrect. You need to be familiar with PKU (foreign-born, green color urine after adding ferric chloride)

Rett's disorder	Incorrect. Look for hand-wringing in a young female with this one.
Velocardiofacial syndrome	Incorrect.
ADHD	Incorrect. Fragile X is a better explanation of patient's ADHD like symptoms

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150. A 21 year old caucasian male is brought to the er by campus security after he is found confused and mildly paranoid in the parking lot. His vital signs are: HR 88, BP 110/75, RR 18, T 99.0. Pt's eyes are bloodshot and he is currently requesting a "big sandwich." Which of the following is most likely?

Correct	Choice	Feedback
X	Marijuana intoxication	Correct. Its so common, that it's commonly tested. Increased appetite, injected eyes, along with mild confusion and paranoia are the typical presentation in the er crowd.
	PCP intoxication	Incorrect. You'll typically see violence and nystagmus here.
	Cocaine intoxication	Incorrect. They will typically not give you normal vital signs with cocaine intoxication. They also don't ask for a sandwich.
	Alcohol intoxication	Incorrect. Not a horrible answer but with bloodshot eyes and active sandwich-seeking, its a slam-dunk for MJ.
	Amphetamine Intoxication	Incorrect. Presentation will be similar to that of cocaine.

151. An 8 year old boy is brought to clinic by his mother. She reports that he is "hasn't been talking at school." He recently started at a new school and is still talking fine at home. There are no signs of deafness or other behavior problems. Which of the following is the best diagnosis?

Correct	Choice	Feedback
X	Selective mutism	Correct. If they are talking in one social setting but not in others, it is selective mutism.
	Social phobia	Incorrect. Talking at school, talking on the phone....not talking to mom.
	Performance anxiety	Incorrect.
	Psychotic disorder NOS	Incorrect.
	Major depressive disorder	Incorrect.

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153. An 18 year old homeless male who is followed by a local mental health clinic presents to the ER with a "bad neck spasm." On exam he has clear cut acute dystonia. What is the mechanism behind this reaction? (An 18 year old homeless male who is followed by a local mental health clinic presents to the er with "Bad neck spasm." On exam he has clear cut acute dystonia. What is the mechanism behind this reaction?)

Correct	Choice	Feedback
X	Blockade of dopamine (D2 receptors)	Correct. Psychosis is thought to be related to an excess of dopamine in certain areas of the brain. Antipsychotic medications block D2 receptors, but blockade in the basal ganglia can cause an acute dystonic reaction such as that above.
	Blockade of acetylcholine	Incorrect.
	Blockade of Serotonin	Incorrect.
	Blockade of glutamate	Incorrect.
	Blockade of norepinephrine	Incorrect.

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154. A 44 year old woman is started on Aripiprazole for new-onset paranoia and auditory hallucinations. 6 hours after her first dose, she reports her tongue has become "Heavy" and her "Neck has gone stiff." Which of the following is the best treatment? (A 44 year old woman is started on Aripiprazole for new-onset paranoia and auditory hallucinations. 6 hours after her first dose, she reports her tongue has become "heavy" and her "Neck has gone stiff." Which of the following is the best treatment?)

Correct	Choice	Feedback
X	Benztropine	Correct. This is an acute dystonic reaction. Standard treatment is Cogentin AKA Benztropine. Diphenhydramine or benadryl would also be helpful but Benztropine is considered first line treatment.
	Valium	Incorrect
	Haldol	Incorrect
	Clonazepam	Incorrect
	Thorazine	Incorrect

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156. A worried mom presents to clinic with her three year old child reporting "This kid will not stop pooping his pants. Its an embarrassment at daycare and the dog is better trained." What is the next best step? (A worried mom presents to clinic with her three year old child reporting

"This kid will not stop pooping his pants. Its an embarrassment at daycare and the dog is better trained." What is the next best step)

X	Reassurance	Correct. This exam is fascinated with making sure that you know exactly when it is no longer "normal" for little Johnny to load his drawers. The cut-off is 4 (F-O-U-R) years of age. Don't even begin to start worrying until they are at least 4
	Abdominal CT	Incorrect
	Serial enemas	Incorrect
	Abdominal X-ray	Incorrect
	Refer to a gastroenterologist.	Incorrect

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157. A school nurse calls you for consultation on one of her students. She reports that he is wetting his naptime cot at school on the order of 1-2 times per week. "The other kids are starting to notice. I wouldn't be worried but he is already 4 years old." Which of the following would be the next most appropriate step (A school nurse calls you for consultation on one of her students. She reports that he is wetting his naptime cot at school on the order of 4-5 times per week. "The other kids are starting to notice. I wouldn't be worried but he is already 4 years old." Which of the following would be the next most appropriate step)

	Refer to a Urologist	Incorrect
	Remove child from pre-school to save him unnecessary embarrassment	Incorrect
	Have nurse keep a log detailing precisely how much urine is ending up in the bed	Incorrect
	Instruct the mother to go back to diapers	Incorrect
X	Reassurance	Correct. Don't even think about getting excited until they are 5 years old. 4 for poop, 5 for pee.

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158. A 16 year old boy is brought to clinic by his father who relates "This kid....you gotta do something. He is lazy as can bed. He goes to sleep at 11pm or so, but it would take an act of god to get him out of bed by 11am." His grades at school are good. What is the next best step? (A 16 year old boy is brought to clinic by his father who relates "This kid....you gotta do something. He is lazy as a turd. He goes to sleep at 11 or so, but it would take an act of god to get him out of bed by 10am. What is the next best step?)

X	Reassurance only	Correct. Sleeping late during adolescence is normal. Keep a look out for answers that
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	contain "reassurance" or "normal development " and lean heavily in that direction, especially if you don't know the answer.
Initiate Dextroamphetamine	Incorrect
Initiate Methylphenidate	Incorrect
Refer for a sleep study	Incorrect
Initiate Fluoxetine	Incorrect

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159. A 29 year old woman who has done well on Lithium for several years now reports problems with tremors. What is the most appropriate treatment for the tremors?

X	Propranolol	Correct. This is the first line treatment for Lithium-induced tremor, which is what we're dealing with in this scenario
	Lorazepam	Incorrect.
	Benztropine	Incorrect
	Divalproex	Incorrect.
	Diphenhydramine	Incorrect.

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160. An 11 year old child presents to clinic with his mother. She reports "He has this goofy thing where he has to count every darn thing and he does it out loud. Each step he takes....you name it, he can't stop counting." Which of the following is the best next step?

	Prescribe Fluoxetine	Incorrect. This is an excellent treatment for Obsessive-compulsive disorder but the combination of CBT and Fluoxetine is the best answer.
X	Prescribe Fluoxetine and initiate cognitive behavioral therapy.	Correct. The point is not just that CBT and an SSRI such as Fluoxetine is the best treatment....on the exam, if you have a choice between medication and therapy...go with medication AND therapy.
	Prescribe Methylphenidate	Incorrect
	Prescribe Bupropion	Incorrect.
	Initiate Cognitive behavioral therapy	Incorrect. This is an excellent treatment for Obsessive-compulsive disorder but the combination of CBT and Fluoxetine is the best answer.

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161. A 56 year old gentleman presents for his first clinic visit and appears moderately anxious. After much prompting he states "I need help. I get these thoughts and they won't go away until I go to church and pray...Doc, these thoughts...they're about having sex with young boys." Pt reports he has never acted on these thoughts and that his anxiety is only relieved with prayer. Which of the following is the next best step?

	Call the police	Incorrect. We aren't the thought police.
X	Prescribe Clomipramine	Correct. This is OCD. Obsession = the intrusive thoughts, Compulsion = prayer. Clomipramine along with SSRI's such as Fluoxetine are reasonable treatments for OCD.
	Prescribe Haldol	Incorrect.
	Admit the patient to the hospital	Incorrect. We aren't the thought police.
	Enroll patient in the sex offender registry	Incorrect. We aren't the thought police.

162. A 47 year old woman presents to your clinic and reports that over the last week she has had "Horrific nightmares," along with difficulty sleeping. She relates that she was raped approximately 17 days ago and since that time she has been "Avoiding anyone that looks anything like him. I just feel numb." Which of the following is the best diagnosis? (A 47 year old woman presents to your clinic and reports that over the last week she has had "Horrific nightmares," along with difficulty sleeping. She relates that she was raped by an Australian man approximately 17 days ago and since that time she has been "avoiding anyone that looks anything like him. I just feel numb." Which of the following is the best diagnosis?)

	Brief psychotic disorder	Incorrect. You should be able to narrow it down to acute stress disorder or PTSD. If not, you have some studying to do.
X	Acute stress disorder	Correct. You have to know these time cut-offs or your goose is cooked. In acute stress disorder, symptoms must last for at least 2 days and a maximum of 4 weeks. The disturbance must occur within one month of the trauma.
	Post traumatic stress disorder (PTSD)	Incorrect. In PTSD, the symptoms must be present for at least one month.
	Generalized anxiety	Incorrect. You should be able to narrow it down to acute stress disorder or PTSD. If not, you have some studying to do.
	Major depression	Incorrect. You should be able to narrow it down to acute stress disorder or PTSD. If not, you have some studying to do.

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163. A 55 year old gentleman with depressive symptoms including lethargy meets criteria for major depressive disorder. He states "I want that depression medicine that will help me stop smoking." Which medication is he asking for?

X	Bupropion	Correct. Bupropion is also called Wellbutrin and Zyban...same thing. Wellbutrin is indicated for depression and Zyban is indicated for smoking cessation. Two birds: One stone.
	Sertraline	Incorrect
	Desipramine	Incorrect
	Paroxetine	Incorrect
	Buspirone	Incorrect. This is NOT the same thing as Bupropion. Be careful

Multiple Choice, 1 points, 6 attempt(s) permitted.

164. A 40 year old man presents to clinic and reports "Doc, I've been having these 'episodes' while I'm driving...I'm scared that there will be more." He reports that with no warning he will feel like he's "Going crazy" along with tachycardia, shortness of breath and diaphoresis. Which of the following is the best treatment?

	Paroxetine	Incorrect.
	Cognitive behavioral therapy	Incorrect.
	Psychodynamic psychotherapy	Incorrect.
	Haldol	Incorrect.
	Haldol and psychodynamic psychotherapy	Incorrect.
X	Paroxetine and cognitive behavioral therapy	Correct. Combination therapy is always the best. The treatment for Panic disorder (which is what we're looking at here) is an SSRI along with CBT.

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165. A 32 year old woman reports feeling "anxious" over the past year. She relates that she feels "all keyed up, fatigued, and tense" more days than not, with significant muscle tension and irritability. Which of the following is the best treatment?

	Clomipramine	Incorrect. Clomipramine is not going to be the answer unless the diagnosis is Obsessive-compulsive disorder.
X	Paroxetine	Correct. SSRIs are first line treatment for generalized anxiety disorder. (buspirone or a benzo would also be correct)

Ziprasidone	Incorrect. This is an antipsychotic.
Quetiapine	Incorrect. This is an antipsychotic.
Nortriptyline	Incorrect. Tricyclic antidepressants are not first line treatment for generalized anxiety disorder, though they aren't bad.

166. A 44 year old man is admitted to the hospital with a presumptive diagnosis of "Psychosis NOS." He reports quite anxiously "The bugs! There are bugs all over me!" Which substance did this patient likely consume?

X	Cocaine	Correct. This is the infamous "cocaine bugs." Can also see this (formication) in methamphetamine intoxication and alcohol withdrawal.
	Marijuana	Incorrect
	PCP	Incorrect
	Heroin	Incorrect
	MDMA	Incorrect

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167. A 12 year old boy is brought to clinic by his parents who are concerned that he has a "Nervous problem." Apparently over the last month, he has been coughing incessantly. At first they thought it was a simple cold but they noticed that each time, after he coughs, he "Shrugs his shoulders and looks up at the sky." Which of the following is the best diagnosis?

X	Tourette's disorder	Correct. Tourette's typically isn't the profanity thing (which is called coprolalia). it usually manifests as vocal (coughing/grunting) or motor (jerking/shrugging) movements. The treatment is low dose antipsychotics, such as haldol or risperidone.
	Psychosis NOS	Incorrect
	Huntington's chorea	Incorrect. There is a movement component in HUntington's, but this presents between 30-50 years old and there really isn't any coughing.
	Parkinson's disease	Incorrect
	Alcohol intoxication	Incorrect.

168. A 34 year old woman is brought to clinic by her husband who reports "We're not getting any sleep. She gets up 40-50 times per night to make sure the doors are all locked." You diagnose the woman with Obsessive-compulsive disorder, which of the following is the best treatment option?

X	Exposure response and prevention	Correct. Checking the locks relieves this patient's anxiety and becomes quite reinforcing for her behavior. Exposure response and prevention is an effective treatment for this. This therapy along with "dialectical Behaviorioral therapy" (which is for borderline personality disorder) are VERY COMMONLY TESTED
	Dialectical behavioral therapy	Incorrect. As far as this test is concerned, if you see dialectical behavioral therapy, its for borderline PD
	Interpersonal psychotherapy	Incorrect
	Quetiapine	Incorrect
	Bupropion	Incorrect

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169. A 12 year old female is brought to clinic by her mother who is concerned and relates "She hasn't started her period yet. I was 10 when I started, so I'm thinking something might be wrong." On exam there is minimal, course pigmented hair mainly on the labia and breast buds are palpable. Her height is appropriate for her age and you correctly designate her as Tanner stage 2. Given the presentation and her age, which is the best next step?

X	Do nothing. Development is normal.	Correct. The Tanner stages, for some odd reason, along with all child development is VERY COMMONLY TESTED on the NBME. If you have no idea, just mark "normal." However, this patient is clearly Tanner stage 2 and menarche occurs at a mean of 12.7 years (10.8-14.5) years and can be delayed if there is low body fat such as in an athlete.
	Refer to a developmental specialist	Incorrect
	Draw FSH LH	Incorrect
	Refer to OB-GYN	Incorrect
	Refer to a geneticist	Incorrect

Multiple Choice, 1 points, 1 attempt(s) permitted.

170. A 19 year old female is brought to the ER unconscious. Her friends report that she likely had an unintentional overdose. "She always takes diphenhydramine and lays out by the pool...she just likes to sleep in the sun." Which of the following would help reverse her symptoms?

	N-Acetylcystiene	Incorrect. This is for Tylenol overdose (also heavily tested)
X	Physostigmine	Correct. This is a parasympathomimetic drug capable of reversing both the peripheral and central manifestations of the anticholinergic syndrome (Benadryl is heavily anticholinergic)
	Penicillamine	Incorrect
	Ascorbic acid	Incorrect
	Promethazine	Incorrect

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171. A 44 year old woman who has been stable on paroxetine for over 2 years presents to clinic complaining of a throbbing headache, nausea, and malaise several days after stopping the antidepressant. Which of the following is the next best step?

X	Restart the paroxetine. Taper slowly if she wants to stop taking it.	Correct. This is probably withdrawal (can occur with paroxetine or venlafaxine).
	Refer to primary care for likely prodromal flu	Incorrect
	Scold her for stopping a medication without asking you first	Incorrect
	Reassurance	Incorrect. Not correct this time.
	Give Ativan 2mg	Incorrect.

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174. Which of the following could be expected with dopamine blockade?

	Increase in hallucinations	Incorrect. Would expect the opposite
	An increase in vocal or motor tics	Incorrect. Haldol is often the treatment of choice for tics
	Euphoria	Incorrect.
X	Acute dystonia	Correct. You can count on several questions covering dopamine antagonism.
	None of the Above	Incorrect.

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175. A 38 year old patient takes Fluoxetine for generalized anxiety and, at his last visit, was prescribed amitriptyline for insomnia which he reports has been of significant help. However, he reports that since starting Amitriptyline, he has had significant constipation. What likely caused this patient's constipation?

X	Interaction between Fluoxetine and Amitriptyline	Correct. Keep always in the back of your mind that Tricyclic antidepressants interact with the newer antidepressants such as SSRIs often causing an INCREASE in the TCAs blood level and a subsequent increase in TCA side effects such as sedation, constipation etc. (you need to know these)
	Amitriptyline	Incorrect
	An unrelated occurrence	Incorrect
	His anxiety	Incorrect
	The resolution of his sleep disorder	Incorrect

176. A 24 year old pianist presents to clinic and reports that she has had significant difficulty performing "I've always played the piano, but I guess as I get better and better, more people are wanting to hear me play. I don't like large crowds, so I get really anxious." The patient is open to long term treatment but is requesting something for her concert tomorrow night. Which of the following would be the best treatment?

X	Propranolol	Correct. If someone is going to have to perform: play the piano, give a lecture etc, then you want to go with propranolol. If its a fear of flying thing, THEN you want to lean more towards a benzodiazepine such as Ativan. Otherwise they might be too sedated to perform.
	Ativan	Incorrect
	Paroxetine	Incorrect. Good treatment for anxiety disorders, but its going to take up to 6 weeks to work. She needs something for tomorrow.
	Buspirone	Incorrect. This is a treatment for anxiety disorders, but its going to take weeks to work. She needs something for tomorrow.
	Alprazolam	Incorrect. Likely to only appear on the exam if it is talking about a benzo with a short half life or concerns over addiction.

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178. A 33 year old man presents to clinic requesting "Something to knock me out on the plane tomorrow." He reports that he has a "Horrible" fear of flying and becomes extremely anxious, and diaphoretic with tachycardia "Even going close to the airport." He must fly tomorrow as there has been a death in the family. There is no history of substance abuse and he presents with his wife who confirms his history. Which of the following is the best treatment?

X	Lorazepam	Correct. As long as there is no history of drug/alcohol abuse, there is no reason that this man cannot have Ativan to help with his fear of flying. Moreover, he does not have to perform once he arrives at his destination (Speech, play the oboe etc).
	Propranolol	Incorrect.
	Fluoxetine	Incorrect. This will take weeks to work.
	Paroxetine	Incorrect. This will take weeks to work.
	Benztrapine	Incorrect.

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179. A 29 year old man presents to the er and appears sedated. On exam he has constricted pupils and slurred speech. His vitals are: P 72, BP 110/70, RR 12, T 97.3. He has significant problems with inattention and is drifting in and out of sleep. What has this patient likely taken?

	Alcohol	Incorrect. Not with pinpoint pupils
X	Heroin	Correct. Pinpoint pupils along with the slurred speech and sedation is classic for opiate intoxication.
	Amphetamine	Incorrect.
	Cocaine	Incorrect.
	MDMA	Incorrect.

Matching Drop-down, 1 points, 9 attempt(s) permitted.

180. Match the description to the personality disorder.

32yo male who has few friends outside his family and avoids almost all social situations because "I'm useless and ugly, what's the point?"	Avoidant
58yo male who works as a night watchman for a local plant. He has no close friends, says "who needs them anyway " and seems to only care about his dog.	Schizoid
42yo male television newscaster who is known for	Histrionic

his theatrical and sexually provocative statements in social situations. Seems to feel everyone is "my best friend."	
32yo male with multiple past legal problems who reports he recently infected someone with HIV through unprotected sex. He stated "it's not my problem they didn't tell me to wear it."	Antisocial
42yo male who performs poorly at work because he is unable to make decisions on his own. Almost never disagrees with anyone at work, and will frequently volunteer to do work for others.	Dependent
46yo female who lives alone and has numerous birds for pets. She feels she can communicate with the birds and can predict the future.	Schizotypal
64yo lawyer who, upon admission to the CCU for a rule-out myocardial infarction, demands to see the "Chief of Staff" because "you morons don't know what you're doing. I could buy this crappy hospital if I wanted to and fire everyone of you."	Narcissistic
42yo male who was referred by his supervisor for evaluation of "he's crazy; he thinks everyone is trying to screw him." The patient is irritable and distrustful, but eventually discloses that he believes numerous people in his office are trying to get him fired.	Paranoid
28yo female admitted for an overdose on prescription medications, her 8th attempt in 8 years, after breaking up with her boyfriend of two weeks. She states "I just can't live without him. He was my life. Without him I am so empty."	Borderline
26yo male medical student who is known for his copious notes, and lack of social life. Has difficulty working in groups because "I either have to let them screwed up, or do it all myself."	Obsessive-Compulsive

, Try again

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181. A 62yo male presents to the ER with confusion, disorientation, truncal ataxia and lateral gaze paralysis. Which of the following is true

IV glucose should be given immediately	Incorrect. Actually that will likely worsen the problem. Call your lawyer!
If left untreated, 80% of cases lead to psychosis	Incorrect. If left untreated, 80% of cases develop Korsakoff's syndrome and have profound memory deficits.

	The symptoms usually resolve with a lorazepam taper	Incorrect
X	The site of the CNS damage is the mamillary bodies	Correct! This is Wernicke's encephalopathy. The classical triad is confusion, ophthalmoplegia (usually lateral gaze palsy, but often nystagmus as well) and ataxia. Treatment is IV thiamine, and MgSO4 (a cofactor for thiamine transketolase). Up to 80% of patients who live develop Korsakoff's syndrome.
	Is always caused by alcohol	Incorrect. This can be seen in patients with prolonged parenteral nutrition and ICU stays (anything that leads to thiamine deficiency).