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| Mock MCQ Paper 2019 (Produced by the New Zealand Training Programmes)   |  |  | | --- | --- | | Candidate’s name: | Date: |   The real MCQ paper is these days done via a computer interface at special testing venues. This Mock Paper cannot replicate those conditions, but is still a useful exercise in managing the size of the task, the timing, and individual question types.  We suggest that candidates replicate actual exam conditions as far as possible, according to the rules in the [Exams section of the 2012 Regulations](https://www.ranzcp.org/Files/PreFellowship/2012-Fellowship-Program/RPP-EXAMINATIONS.aspx) (see: Written Examination policy esp. pages 7-12), and that they use the [MCQ Information](https://www.ranzcp.org/pre-fellowship/assessments-college-administered/mcq-exam), [tutorial MCQ exam](http://www.pearsonvue.com/ranzcp/tutorial.asp), [and tutorial model answers](http://www.ranzcp.org/Files/PreFellowship/2012-Fellowship-Program/Practice-Exam-Answers.aspx) provided by the College to familiarise themselves with the MCQ electronic interface.  This version of the MCQ can be completed electronically, on a computer using Word to fill in the correct answers in each answer box. Remember to hit control-S to save your completed paper intermittently, and at the very end of the exam save the file. If you'll be doing this at a centralised venue, bring a flash-drive to save the completed mock exam and take it home to mark.  The model answers will be here, after 5th July 2019: <http://www.psychtraining.org/Mock-exams.html> (no cheating beforehand!). This exam is only written *once* a year, so if you're not sitting until February, save it to do in the lead-up then, and don't look at the answers earlier.  You are allowed 3 hours and 10 minutes total time to complete the paper. All of that is exam-time – there is no 'reading time'.  *– REMEMBER TO HIT SAVE OR CONTROL-S REGULARLY TO SAVE YOUR ANSWERS ! –* | |
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| MCQ Mock Exam |
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| Extended Matching Questions (EMQs)  You are about to commence the EMQ component of the Mock Exam.   * The Question Instructions are on the left panel of each page. * The Questions and Answer Options are on the right hand panel. * Please read Question Instructions, Questions and options CAREFULLY before answering. * There may be a series of Questions that could share the same list of answer options.   To answer a Question, left-click on the checkbox beside your preferred option, to select it. e.g.    To change your answer, click the checkbox again to de-select it, and click another one.  To 'flag' a question and review it later add an ! to the 'Flag box' at top right. Then search for all the !s when you want to review any questions you were unsure about, by hitting control-F to bring up the navigation field, then type ! in that field.  Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page.  Example of a 'flagged' question |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 1 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.1 A 25 year old Asian man spend his days at home compulsively playing internet games, and risks losing his job.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Asperger’s Syndrome | |  |  | Agoraphobia | |  |  | Depression | |  |  | Generalised Anxiety Disorder | |  |  | Internet Gaming Disorder | |  |  | Paranoid Schizophrenia | |  |  | Panic Disorder | |  |  | Schizoid Personality Disorder | |  |  | Social Anxiety | |  |  | Specific Anxiety | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 2 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.2 The brain region or system where Cannabinoid CB2 receptors are principally found.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Basal ganglia | |  |  | Cerebellum | |  |  | Dorsolateral-prefrontal cortex | |  |  | Gut mucosa | |  |  | Hippocampus | |  |  | Immune system | |  |  | Reticular activating system | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 3 |
| For the following historical figure, please select the MOST ACCURATE answer. |  | Q.3 The concept or treatment with which Philippe Pinel is most closely associated.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Description of catatonia | |  |  | Description of folie a deux | |  |  | Description of shell shock | |  |  | Electroconvulsive therapy | |  |  | Hypnosis | |  |  | Importance of heredity in mental illness | |  |  | Insulin coma therapy | |  |  | Treating patients without restraint | |  |  | Unconscious communication | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 4 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.4 A legal term meaning 'intent to do harm'.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Actus reus | |  |  | Compos mentis | |  |  | Durham rule | |  |  | Habeas corpus | |  |  | M'Naghten rule | |  |  | Mens rea | |  |  | Res judicita | |  |  | Volenti non fit injuria | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 5 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.5 A psychotropic agent commonly causing weight loss.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Aripiprazole | |  |  | Buspirone | |  |  | Carbamazepine | |  |  | Lamotrigine | |  |  | Lithium | |  |  | Moclobemide | |  |  | Topiramate | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 6 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.6 The fourth dimension of temperament in Robert Cloninger’s model of personality, based on his Temperament and Character Inventory (the other three dimensions being: novelty seeking, harm avoidance, persistence).  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cooperativeness | |  |  | Conscientiousness | |  |  | Introversion | |  |  | Neuroticism | |  |  | Openness to experience | |  |  | Reward dependence | |  |  | Self-directedness | |  |  | Self-transcendence | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 7 |
| For the following example, please select the MOST ASSOCIATED concept listed below. |  | Q.7 Immanuel Kant developed the ‘Categorical Imperative’, outlining duties towards others which govern moral actions.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Autonomy | |  |  | Beneficence | |  |  | Consequentialism | |  |  | Deontology | |  |  | Justice | |  |  | Non-maleficence | |  |  | Teleology | |  |  | Universalism | |  |  | Utilitarianism | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 8 |
| For the following question, please select the MOST ACCURATE answer listed below. |  | Q.8 Not an aspect of behavioural epigenetics.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | A father's increasing age causing changes in sperm with increased risk of schizophrenia in his offspring | |  |  | Addictive substances altering gene expression and increasing tendency to addiction | |  |  | DNA methylation | |  |  | DNA sequence alteration | |  |  | Environmental effects | |  |  | Epigenome modifications by childhood trauma | |  |  | Histone acetylation | |  |  | Nurture | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 9 |
| For the following example, please select the MOST ACCURATE psychological defence mechanism listed below. |  | Q.9 Alice is a 54 year old secretary who is unhappy with her boss and wants to leave her job, but feels guilty about this. She becomes very flattering towards her boss, praising her to other staff and giving her a gift "in appreciation".  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Denial | |  |  | Displacement | |  |  | Dissociation | |  |  | Projection | |  |  | Regression | |  |  | Repression | |  |  | Reaction formation | |  |  | Sublimation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 10 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.10 The most common Personality Disorder in community adult populations in Western countries, based on a systematic review and meta-analysis.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Antisocial Personality Disorder | |  |  | Avoidant Personality Disorder | |  |  | Borderline Personality Disorder | |  |  | Dependent Personality Disorder | |  |  | Histrionic Personality Disorder | |  |  | Narcissistic Personality Disorder | |  |  | Obsessive-Compulsive Personality Disorder | |  |  | Paranoid Personality Disorder | |  |  | Schizoid Personality Disorder | |  |  | Schizotypal Personality Disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 11 |
| For the following question, please select the MOST APPROPRIATE disorder from the list below. |  | Q.11 Has borderline hypothyroidism as a risk factor.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Binswanger disease | |  |  | Frontotemporal Dementia | |  |  | Lewy Body Dementia | |  |  | Mixed Anxiety-Depressive Disorder | |  |  | Obsessive Compulsive Disorder | |  |  | Panic Disorder | |  |  | Rapid-Cycling Bipolar Disorder | |  |  | Wernicke’s encephalopathy | |  |  | William’s Syndrome | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 12 |
| For the following patient, please choose the MOST APPROPRIATE explanation from the list below. |  | Q.12 Based on previous traumatic experiences, Belinda has developed a belief that it is futile to do anything to escape aversive consequences.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Learned helplessness | |  |  | Post-Traumatic Stress Disorder | |  |  | Borderline Personality Disorder | |  |  | Aggression turned inward | |  |  | Operant conditioning | |  |  | Classical conditioning | |  |  | Object loss | |  |  | Negative attributional style | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 13 |
| For the following question, please select the MOST ACCURATE answer listed below. |  | Q.13 Not an example of Autism Spectrum Disorder.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Angelo is very attached to his favourite childhood toy, a spaceman action figure, and dislikes change | |  |  | Asperger’s Disorder | |  |  | Autistic disorder | |  |  | Billy, a 5 year old boy, repetitively stacks cans on top of one another and avoids eye contact | |  |  | Li has difficulty interpreting social cues and body language | |  |  | Mara, a software coder, eats lunch alone at her desk and likes to watch a spinning top | |  |  | Pervasive developmental disorder not otherwise specified | |  |  | Ravi is aged 3 but has still not spoken. He often sits and rocks | |  |  | Rett's disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 14 |
| For the following patient, please select the MOST LIKELY syndrome listed below. |  | Q.14 A 38 year old woman frequently visits her general practitioner with multiple somatic complaints. She has done this since her twenties.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Briquet's Syndrome | |  |  | Capgras Syndrome | |  |  | Charles Bonnet Syndrome | |  |  | Cotard's Syndrome | |  |  | De Clerambault’s Syndrome | |  |  | Fregoli Syndrome | |  |  | Ganser Syndrome | |  |  | Korsakoff syndrome | |  |  | Munchhausen Syndrome | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 15 |
| For the following patient, please select the MOST APPROPRIATE next investigation to order. |  | Q.15 A 21 year old woman with no history of mental illness presents with disorganised behaviour, delusions and a seizure after a week of a viral illness. CT head scan is normal.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Copper levels | |  |  | Full blood count | |  |  | HIV serology | |  |  | Lumbar Puncture | |  |  | nMDA-r antibodies and ANA | |  |  | Renal Function tests | |  |  | Syphilis serology | |  |  | Thyroid function tests | |  |  | Urinary drug screen | |  |  | Vitamin studies | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 16 |
| From the following list, please select the MOST APPROPRIATE assessment instrument for the patient described. |  | Q.16 A 60 year old man with a diagnosis of Schizophrenia presents with poor self care, lip smacking and tongue protrusion.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Abnormal Involuntary Movement Scale | |  |  | Beck Depression Inventory | |  |  | Brief Psychiatric Rating Scale | |  |  | Global Assessment of Function Scale | |  |  | Hamilton Scale for Depression | |  |  | Positive and Negative Syndrome Scale | |  |  | Quality of Life Scale | |  |  | Simpson-Agnus Scale | |  |  | Social and Occupation Functional Assessment | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 17 |
| For the following patient, please select the MOST LIKELY risk factor for her condition from the list below. |  | Q.17 A 69 year old woman taking risperidone is admitted acutely with rigidity, temperature of 38 degrees and confusion. On investigation she has an elevated creatinine kinase, leucocytosis and mildly elevated liver enzymes.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Benzodiazepine dependency | |  |  | Cigarette smoking | |  |  | Dehydration | |  |  | Family history of anxiety disorder | |  |  | Family history of depression | |  |  | Female sex | |  |  | Hyperthyroidism | |  |  | Hypothyroidism | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 18 |
| For the following question, please choose the MOST ACCURATE answer. |  | Q.18 Zuclopenthixol acetate should not be used in combination with which of the following antidepressants because of the potential for an interaction through shared hepatic metabolism.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Citalopram | |  |  | Imipramine | |  |  | Mirtazapine | |  |  | Paroxetine | |  |  | Sertraline | |  |  | Tranylcypromine | |  |  | Venlafaxine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 19 |
| For the following question, please select the MOST ACCURATE answer listed below. |  | Q.19 Not an appropriate action in the pre-psychotic phase for a patient presenting for the first time.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Consideration of a psychotic disorder | |  |  | Employment Support | |  |  | Family Education | |  |  | Interpersonal management | |  |  | Management of co-morbid depression | |  |  | Management of problematic substance use | |  |  | Prescription of antipsychotic medication | |  |  | Psychoeducation | |  |  | Regular family contact | |  |  | Regular monitoring of mental state | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 20 |
| For the following patient, please select the MOST APPROPRIATE diagnosis. |  | Q.20 A 79 year old woman living on a farm is brought in by her daughter with a history of confused episodes. She has tremor and festination, and is annoyed by “tiny nuns” who she says sit in the pine trees outside her window.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer’s disease | |  |  | Chronic subdural haematoma | |  |  | Left frontal meningioma | |  |  | Lewy-body dementia | |  |  | Multi-infarct dementia | |  |  | Multiple sclerosis | |  |  | Normal pressure hydrocephalus | |  |  | Pick’s disease | |  |  | Right middle cerebral infarct | |  |  | Subarachnoid haemorrhage | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 21 |
| For the following patient, please select the MOST LIKELY country of origin. |  | Q.21 A 43 year old male immigrant's family tell his doctor that he is suffering from Khyal Cap (wind attacks).  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Botswana | |  |  | Cambodia | |  |  | Cuba | |  |  | Indonesia | |  |  | Nigeria | |  |  | Papua New Guinea | |  |  | Sudan | |  |  | Taiwan | |  |  | Yemen | |  |  | Zimbabwe | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 22 |
| For the following aspect of phenomenology, please select the MOST ACCURATE answer. |  | Q.22 An example of a Schneiderian first rank symptom.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Abulia | |  |  | Affective flattening | |  |  | Auditory Hallucinations experienced as a running commentary | |  |  | Auditory hallucinations experienced as two or more voices talking amongst themselves | |  |  | Delusions of misidentification | |  |  | Delusions of reference | |  |  | Ego boundary blurring | |  |  | Persecutory delusions | |  |  | Secondary delusions | |  |  | Thought diffusion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 23 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.23 The percentage of the population who will meet the diagnostic criteria for schizophrenia over their lifetime.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | 0.01 | |  |  | 0.1 | |  |  | 0.2 | |  |  | 0.5 | |  |  | 1.0 | |  |  | 2 | |  |  | 2.5 | |  |  | 3 | |  |  | 5 | |  |  | 10 | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 24 |
| For the following receptor group, please choose the MOST ACCURATE answer. |  | Q.24 A function regulated by 5HT3 receptors.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anxiety | |  |  | Circadian rhythms | |  |  | Cognition | |  |  | Mood | |  |  | Nausea | |  |  | Stress response | |  |  | Thermoregulation | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 25 |
| For the following clinical situation, please choose the MOST APPROPRIATE intervention from the list below. |  | Q.25 Medication to co-administer when starting someone on clozapine.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Docusate Sodium | |  |  | Docusate sodium and Sennoside B | |  |  | Fleet Enema | |  |  | Lactulose | |  |  | Lax-sachets | |  |  | Magnesium hydroxide | |  |  | Microlax enema | |  |  | Movicol | |  |  | Psyllium husk powder | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 26 |
| For the following vignette, please select the MOST ACCURATE phenomenoloy demonstrated, from the list below. |  | Q.26 Aroha, a 27 year old woman with a history of schizophrenia, says that the pins and needles she experiences are due to 'space rays' being fired at her.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Bizarre Delusion | |  |  | Delusion of Control | |  |  | Delusion of Reference | |  |  | Mood-congruent Delusion | |  |  | Nihilistic Delusion | |  |  | Paranoid Delusion | |  |  | Passivity Delusion | |  |  | Somatic Delusion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 27 |
| For the following fictional clinical scenario, please select the MOST APPROPRIATE description listed below. |  | Q.27 A psychiatrist in a movie has a sexual encounter with the brother of the patient she is treating with psychodynamic psychotherapy, while meeting with him to obtain collateral information.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Boundary violation | |  |  | Displacement | |  |  | Empathic failure | |  |  | Mirroring | |  |  | Objectification | |  |  | Parallel process | |  |  | Positive transference | |  |  | Projective identification | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 28 |
| For the following patient, please select the MOST APPROPRIATE next management step from the list below. |  | Q.28 Vicky, a 20 year old woman, has been in the acute inpatient ward for 3 weeks with first episode psychosis. She is being treated with Risperidone – 1 mg initially, then 2mg for the past 17 days. She remains psychotic.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Add Lithium | |  |  | Add regular benzodiazepine | |  |  | Add a selective serotonin reuptake inhibitor | |  |  | Augment with Aripiprazole | |  |  | Change to Olanzapine | |  |  | Increase dose of Risperidone to 4 mg | |  |  | Increase dose of Risperidone to 6mg | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 29 |
| Please select the MOST APPROPRIATE answer demonstrated by the following scenario. |  | Q.29 Sarah, aged 7, presents with her foster parents of three years. They say their key difficulty with Sarah is demanding behaviour in the supermarket and similar settings. They report that they ignore her pleas for sweets for up to 15 minutes, but eventually they have to give her a chocolate bar to avoid a half hour tantrum at the supermarket checkout.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Behavioural Contingencies | |  |  | Eriksonian Stage – Autonomy vs Shame/Doubt | |  |  | Eriksonian Stage – Identity vs Role Confusion | |  |  | Insecure attachment – avoidant type | |  |  | Insecure attachment – disorganised insecure type | |  |  | Learned helplessness | |  |  | Patterson’s cycle of coercion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 30 |
| For the following clinical example, please select the MOST APPROPRIATE investigation. |  | Q.30 A 63 year old woman has suspected neurotoxicity from lithium treatment, despite her serum lithium levels being in the quoted normal range.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | ECG | |  |  | EEG | |  |  | MoCA | |  |  | MRI scan | |  |  | PET scan | |  |  | SPECT scan | |  |  | Serum potassium | |  |  | Serum TSH | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 31 |
| For the following clinical example, please select the MOST APPROPRIATE diagnosis. |  | Q.31 A 50 year old man presents with concerns that his wife has been unfaithful. He has a two year history of these beliefs but is otherwise functioning well. No collateral evidence supports his concerns.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Brief Psychotic Disorder | |  |  | Delusional Disorder | |  |  | Jealousy | |  |  | Major Depressive Disorder | |  |  | Obsessive Compulsive Disorder | |  |  | Paranoid Personality disorder | |  |  | Relationship Difficulties | |  |  | Schizoaffective Disorder | |  |  | Schizophrenia | |  |  | Schizophreniform Disorder | |  |  | Schizotypal Personality Disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 32 |
| For the following clinical situation, please select the MOST ACCURATE outcome listed below. |  | Q.32 Very preterm birth (less than 32 weeks gestation).  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cerebral palsy in more than 30% of survivors | |  |  | Higher incidence of reactive attachment disorder | |  |  | Inattention, anxiety, and socio-emotional difficulties in childhood | |  |  | Lower rates of eating disorders in adulthood | |  |  | Minimal effect upon thalamocortical and corticostriatial connectivity | |  |  | Significantly increased rates of conduct disorder in late adolescence | |  |  | Similar rates in adulthood of bipolar affective disorder to term controls | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 33 |
| For the following scenario, please select the MOST LIKELY cause listed below. |  | Q.33 A 35 year old office worker goes tramping and on the second day, suffers from moderate headaches and sleepiness.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alcohol Withdrawal | |  |  | Caffeine Withdrawal | |  |  | Cluster Headache | |  |  | Depression | |  |  | Meningitis | |  |  | Migraine | |  |  | Sensory Overload | |  |  | Chronic Fatigue | |  |  | Tension Headache | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 34 |
| For the following example, please select the MOST ACCURATE answer listed below. |  | Q.34 A substrate metabolized by MAO-B but not MAO-A.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acetylcholine | |  |  | Dopamine | |  |  | Histamine | |  |  | Noradrenaline | |  |  | Phenylethylamine | |  |  | Serotonin | |  |  | Tyramine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 35 |
| For the following question, please select the MOST ACCURATE answer listed below. |  | Q.35 Not associated with Ganser syndrome.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Balderdash syndrome | |  |  | Conversion disorder | |  |  | Decreased state of consciousness | |  |  | Dissociative amnesia | |  |  | Dissociative disorder | |  |  | Fugue state | |  |  | Gedankenlautverden | |  |  | Hysterical pseudodementia | |  |  | Prison psychosis | |  |  | Syndrome of approximate answers | |  |  | Visual pseudohallucinations | |  |  | Vorbeireden | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 36 |
| For the following patient, please select the MOST APPROPRIATE next psychometric test. |  | Q.36 David is a 12 year old boy, referred due to behavioural problems and poor learning in the classroom. The team psychologist has completed a WISC which shows a Full Scale IQ of 68.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adaptive Behaviour Assessment Scale (ABAS) | |  |  | Autism Diagnostic Observation Scale (ADOS) | |  |  | Child Behaviour Checklist (CBCL/Rutter) | |  |  | Conners Comprehensive Behaviour Rating Scale  (Conners CBRS) | |  |  | Kiddie Schedule for Affective Disorders and Schizophrenia (K-SADS) | |  |  | Millon Adolescent Personality Inventory (MAPI) | |  |  | Weschler Intelligence Scale (WAIS) | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 37 |
| For the following symptom, please select the MOST ACCURATE description. |  | Q.37 A tic.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | A peculiar and characteristic individual style of movement | |  |  | An involuntary, sudden, rapid, recurrent, non-rhythmic motor movement or vocalisation | |  |  | An urge to move the legs, accompanied by unpleasant sensations, relieved by movement | |  |  | Disordered muscle tone | |  |  | Distortion of voluntary movements with involuntary muscle activity | |  |  | Excessive motor activity associated with a feeling of inner tension | |  |  | Odd and inappropriate facial expressions unrelated to the situation | |  |  | Persistent eating of non-nutritive non-food substances | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 38 |
| For the following topic, please select the MOST ACCURATE statement from the list below. |  | Q.38 Diagnostic and Classificatory systems.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adam Guillaume and his grandson Jean Bertrand were the founders of the ICD system | |  |  | Current classification systems in psychiatry are aetiologically based, rather than descriptive | |  |  | DSM-III was published in 1985 | |  |  | Greater focus on validity rather than reliability tends to create increasing numbers of diagnostic categories | |  |  | ICD-11 will be focussed on clincial utility | |  |  | Operational diagnostic criteria were first introduced to the DSM system with DSM-IV | |  |  | Research Domain Criteria (RDoC), linked to neurobiological correlates, pre-dated the DSM system | |  |  | The ‘Zone of rarity’ is more often present in psychiatric disorders than in the rest of medicine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 39 |
| For the following example, please select the MOST ACCURATE statement listed below. |  | Q.39 The rate of misdiagnosis of conversion disorder due to missing an occult, causative pathology.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Decreased in more recent years due to the widespread availability of advanced neuroimaging such as MRI scans | |  |  | Has been very low (less than 5%) since the 1970s | |  |  | Increased in more recent years due to the diagnosis of conversion disorder being made more often in primary care settings | |  |  | Stayed around 60%, i.e. the diagnosis of conversion disorder is more often wrong than right | |  |  | Stayed the same since DSM-III in 1980 as there have been no changes in the classification of conversion disorders since then | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 40 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.40 The third dimension according to which Emil Kraepelin classified mixed mood states – the other two being mood and motor activity.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anxiety | |  |  | Distractibility | |  |  | Hazardous behaviour | |  |  | Irritability | |  |  | Libido | |  |  | Self esteem | |  |  | Sleep | |  |  | Speed of thought | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 41 |
| For the following patient, please select the MOST APPROPRIATE clinical stage. |  | Q.41 Sam, a young man aged 18, first presented four months ago with paranoid delusions and auditory hallucinations. Despite trials with three antipsychotics, his auditory hallucinations remain.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Stage 0 | |  |  | Stage 1a | |  |  | Stage 1b | |  |  | Stage 2 | |  |  | Stage 3a | |  |  | Stage 3b | |  |  | Stage 3c | |  |  | Stage 4 | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 42 |
| For the following patient, please select the MOST APPROPRIATE treatment option. |  | Q.42 Henry, aged 79, develops muscle twitching while still unconscious after his ECT treatment – reapplication of the EEG shows this to be a tardive seizure.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Carbamazepine orally | |  |  | Diazepam intramuscularly | |  |  | Diazepam intravenously | |  |  | Midazolam intravenously | |  |  | Mirtazapine orally | |  |  | Olanzapine oral wafer | |  |  | Olanzapine short-acting injection | |  |  | Re-treat with ECT immediately | |  |  | Sodium valproate orally | |  |  | Terminate ECT course | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 43 |
| For the following historical development, please select the MOST ACCURATE answer. |  | Q.43 Developed Interpersonal and Social Rhythm Therapy.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adrian Wells | |  |  | Anthony Bateman | |  |  | Ellen Frank | |  |  | Gerald Klerman | |  |  | John Teasdale | |  |  | Marsha Linehan | |  |  | Myrna Weissman | |  |  | Steven Hayes | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 44 |
| For the following example, please select the MOST ACCURATE description listed below. |  | Q.44 The smell of fresh muffins in a bakery makes a man’s mouth water as he waits to be served.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Classical conditioning | |  |  | Counter-conditioning | |  |  | Episodic memory | |  |  | Operant conditioning | |  |  | Semantic memory | |  |  | Sensory memory | |  |  | Shaping | |  |  | Short-term memory | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 45 |
| For the following patient, please select the MOST APPROPRIATE description of her clinical situation. |  | Q.45 Emily is 17 and has been wheelchair-bound and off school since breaking her ankle in a netball game 13 months ago. Her surgeon has said that the bones have healed normally, however she has been experiencing increasingly severe pain in her ankle, and is unable to weight-bear. Her ankle is cooler than the other side, and the skin looks blotchy. She insists she is not depressed.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | She has chronic regional pain syndrome, which has developed due to underlying unrecognised depression and alexithymia | |  |  | She has a factitious disorder, as the fracture has fully healed | |  |  | Her pain is probably due to ongoing primary nociceptive input, despite the normal scans, and her ankle should be immobilised in a splint | |  |  | She has chronic regional pain syndrome, which is untreatable and she should complete her education by correspondence | |  |  | She has chronic regional pain syndrome, and part of her treatment plan should include exploring reasons for why she has been unable to transition back to school | |  |  | The skin appearance changes indicate that there are nutritional deficits that should be corrected | |  |  | She should be started on Venlafaxine as this has evidence for efficacy in chronic pain in adolescents | | | |
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| MCQ Mock Exam | | | | |
| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 46 |
| For the following statement, please select the MOST ACCURATE answer. |  | Q.46 The majority of noradrenergic neurons in the brain arise from this anatomic structure.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Dorsal raphe nucleus | |  |  | Dorsal stratum | |  |  | Hippocampus | |  |  | Locus coeruleus | |  |  | Median raphe nucleus | |  |  | Nucleus basalis of Meynert | |  |  | Ventral tegmental area | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 47 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.47 A feature that does not support the specifier “with good prognostic features” in a patient with Schizophreniform Disorder.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Blunted affect | |  |  | Good premorbid occupational functioning | |  |  | Good premorbid social functioning | |  |  | Normal cognitive functioning | |  |  | Onset of symptoms within four weeks of first change in functioning or behavior | |  |  | Symptoms are accompanied by confusion | |  |  | Symptoms are accompanied by perplexity | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 48 |
| For the following example, please select the LEAST ACCURATE statement listed below. |  | Q.48 Collectivist cultures.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Are known for interconnectedness with others playing a central role in each person's identity | |  |  | Are more complex to consider using Beauchamp and Childress's principles | |  |  | Are more likely to explain something via external causality than self-direction | |  |  | Are less context dependent in their perceptions | |  |  | Emphasize the family above individual needs or desires | |  |  | Tend to accept that different groups have different values | |  |  | Value decisions made by the family or family elders over individual autonomy | |  |  | Value work group or family goals above individual achievements | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 49 |
| Please select the MOST APPROPRIATE answer illustrated by the scenario. |  | Q.49 Ralph is a 15 year old boy who has recently told his parents that he's bisexual. His family have told him he's confused due to his mother being overwhelmed in his early life by the arrival of a baby sister when he was only 11 months old.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Eriksonian Stage – Autonomy vs Shame/Doubt | |  |  | Eriksonian Stage – Ego Integrity vs. Despair | |  |  | Eriksonian Stage – Generativity vs. Stagnation | |  |  | Eriksonian Stage – Identity vs Role Confusion | |  |  | Eriksonian Stage – Industry vs Inferiority | |  |  | Eriksonian Stage – Initiative vs Guilt | |  |  | Eriksonian Stage – Intimacy vs Isolation | |  |  | Eriksonian Stage – Trust vs Mistrust | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 50 |
| For the following clinical situation, please select the MOST APPROPRIATE rating scale. |  | Q.50 Monitoring symptoms in a patient with schizophrenia.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | AIMS | |  |  | BPRS | |  |  | GAF | |  |  | HAMD | |  |  | MADRS | |  |  | PANSS | |  |  | SANS | |  |  | SAPS | |  |  | SCID | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 51 |
| For the following clinical example please select the MOST APPROPRIATE phenomenology from the list below. |  | Q.51 Lack of insight in severe, chronic schizophrenia.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anosognosia | |  |  | Astereognosis | |  |  | Autotopagnosia | |  |  | Cerebral achromatopsia | |  |  | Environmental agnosia | |  |  | Phonagnosia | |  |  | Prosopagnosia | |  |  | Simultagnosia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 52 |
| For the following example, please select the MOST APPROPRIATE ethical concept from the list below. |  | Q.52 Psychoeducation of patients.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | A Kantian categorical imperative | |  |  | Autonomy | |  |  | Beneficence | |  |  | Ethical relativism | |  |  | Justice | |  |  | Non-maleficence | |  |  | Practical wisdom | |  |  | Utilitarianism | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 53 |
| For the following example of speech please select the MOST APPROPRIATE phenomenology from the list below. |  | Q.53 "Then I left Timaru and moved to... where did you get that tie?"  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Clanging | |  |  | Command hallucinations | |  |  | Delusions of control | |  |  | Distractibility | |  |  | Echolalia | |  |  | Knight's move thinking | |  |  | Perseveration | |  |  | Tangentiality | |  |  | Thought Blocking | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 54 |
| For the following question, please select the MOST ACCURATE answer listed below. |  | Q.54 Not part of a routine physical assessment in a patient presenting with first episode psychosis.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anti-NMDAR antibodies | |  |  | Electrocardiogram | |  |  | Electroencephalography | |  |  | Electrolytes | |  |  | Fasting Glucose | |  |  | Full blood count | |  |  | Hepatitis Screen | |  |  | Lipids | |  |  | Neurological Examination | |  |  | Thyroid Function Tests | |  |  | Urinary Drug Screen | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 55 |
| For the following question, please select the MOST APPROPRIATE answer. |  | Q.55 Used to treat obsessive-compulsive disorder.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Brief psychodynamic therapy | |  |  | CBT-oriented group therapy | |  |  | Exposure and response prevention | |  |  | Expressive therapy | |  |  | Family therapy | |  |  | Interpersonal therapy | |  |  | Marital therapy | |  |  | Mindfulness training | |  |  | Motivational interviewing | |  |  | Systematic desensitisation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 56 |
| For the following patient please select the MOST APPROPRIATE diagnosis from the list below. |  | Q.56 Bianca is a 6 year old girl who often has temper tantrums. She once set her doll's house on fire while playing and when taken to task afterwards, blamed her brother for it. She is liked by her peers, but known as a "troublemaker" by her teachers and argues a lot with her parents. She loves her cat and looks after him well.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adjustment disorder with mixed disturbance of emotions and conduct | |  |  | Autistic spectrum disorder | |  |  | Conduct disorder | |  |  | Disruptive mood dysregulation disorder | |  |  | Intermittent explosive disorder | |  |  | Oppositional defiant disorder | |  |  | Psychopathy | |  |  | Social anxiety disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 57 |
| For the following patient, please select the MOST APPROPRIATE diagnosis. |  | Q.57 A 52 year old man presents with a longstanding court battle against a former employee which he says is an "attack on my character". He says the court battle has lost him friends as they didn't side with him and betrayed him. He says this only goes to show that he's always been right to mistrust others.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Brief Psychotic Disorder | |  |  | Delusional Disorder | |  |  | Major Depressive Disorder | |  |  | Narcissistic Personality disorder | |  |  | Obsessive Compulsive Disorder | |  |  | Paranoid Personality disorder | |  |  | Schizoaffective Disorder | |  |  | Schizoid Personality Disorder | |  |  | Paranoid schizophrenia | |  |  | Schizotypal Personality Disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 58 |
| For the following conversation please select the MOST APPROPRIATE phenomenology from the list below. |  | Q.58 "Is your name Margery?"  "Yes."  "Are you in hospital?"  "Yes."  "Are you a table?"  "Yes."  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Clanging | |  |  | Distractability | |  |  | Echolalia | |  |  | Incoherence | |  |  | Knight's move thinking | |  |  | Loss of goal | |  |  | Perseveration | |  |  | Tangentiality | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 59 |
| For the following description, please select the MOST APPROPRIATE neurotransmitter listed below. |  | Q.59 Synthesized from the amino acid tyrosine.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acetylcholine | |  |  | Dopamine | |  |  | Gamma-aminobutyric acid | |  |  | Glutamate | |  |  | Glycine | |  |  | Noradrenaline | |  |  | Serotonin | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 60 |
| For the following rating scale, please select the MOST APPROPRIATE answer listed below. |  | Q.60 Developed an 11-item rating scale for mania.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Barnes | |  |  | Beck | |  |  | Brown | |  |  | Hamilton | |  |  | Hare | |  |  | Montgomery and Asberg | |  |  | Young | |  |  | Zung | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 61 |
| For the following example, please select the MOST RELEVANT legal concept. |  | Q.61 A man with a long history of theft is arrested for stealing cars after police find his fingerprints on a stolen BMW.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Actus reus | |  |  | Disease of the mind | |  |  | Fitness to plead | |  |  | Forseeability | |  |  | Irresistible impulse | |  |  | Mens rea | |  |  | Natural Justice | |  |  | Provocation | |  |  | Sane Automatism | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 62 |
| For the following patient, please select the MOST ACCURATE diagnosis from the list below. |  | Q.62 A 25 year old man lives alone and reports being very lonely. He says he feels inadequate and needs reassurance before attempting any activity or interpersonal interaction, for fear of humiliation.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Antisocial Personality Disorder | |  |  | Avoidant Personality Disorder | |  |  | Borderline Personality Disorder | |  |  | Dependent Personality Disorder | |  |  | Histrionic Personality Disorder | |  |  | Narcissistic Personality Disorder | |  |  | Paranoid Personality Disorder | |  |  | Passive-Aggressive Personality Disorder | |  |  | Schizoid Personality Disorder | |  |  | Schizotypal Personality Disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 63 |
| For the following brain function, please select the MOST ACCURATE answer. |  | Q.63 The brain region synchronizing the synthesis of melatonin to the light/dark cycle.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Dorsomedial nucleus | |  |  | Medial septal nucleus | |  |  | Nucleus accumbens | |  |  | Paraventricular nucleus | |  |  | Posterior nucleus | |  |  | Red nucleus | |  |  | Suprachiasmatic nucleus | |  |  | Ventromedial nucleus | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 64 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.64 A tall young man has a rounded body-type and is teased at school for his gynaecomastia. Investigation reveals an XXY chromosomal pattern.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adrenogenital syndrome | |  |  | Gender identity disorder | |  |  | Klinefelter’s syndrome | |  |  | Polycystic ovarian syndrome | |  |  | Pseudohermaphroditism | |  |  | Transvestic Fetishism | |  |  | Turner’s syndrome | |  |  | Testicular feminisation syndrome | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 65 |
| For the following example of speech please select the MOST APPROPRIATE phenomenology from the list below. |  | Q.65 "Bulldogs are from England. They have good fish and chips there. Fish breathe underwater."  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Bizarre Delusions | |  |  | Circumstantiality | |  |  | Clanging | |  |  | Derailment | |  |  | Distractability | |  |  | Knight's move thinking | |  |  | Paraphasias | |  |  | Perseveration | |  |  | Tangential thinking | |  |  | Thought Insertion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 66 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.66 Gabriella, who is being treated for psychosis, develops a headache, nausea and vomiting. Her urine sodium concentration is greater than 20 mEq/L.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cushings disease | |  |  | Graves disease | |  |  | Phaeochromocytoma | |  |  | Porphyria | |  |  | Psychogenic polydipsia | |  |  | Renal failure | |  |  | SIADH | |  |  | Wilson’s disease | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 67 |
| For the following PATIENT, please give the MOST ACCURATE diagnosis. |  | Q.67 Darius, aged 22, presents with a two year history of functional decline with poor motivation. His family say that for the last month they have had difficulty following what he's saying and that he has been concerned about aliens harming him. They report a similar episode 18 months ago which was short-lived – they didn't take him to see his GP then as he improved.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Schizophrenia, continuous | |  |  | Schizophrenia, first episode, currently in acute episode | |  |  | Schizophrenia, first episode, in partial remission | |  |  | Schizophrenia, first episode, in full remission | |  |  | Schizophrenia, multiple episodes, currently in acute episode | |  |  | Schizophrenia, multiple episodes, currently in partial remission | |  |  | Schizophrenia, multiple episodes, currently in full remission | |  |  | Schizophreniform Disorder, with good prognostic features | |  |  | Schizophreniform Disorder, without good prognostic features | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 68 |
| For the following example, please select the MOST ACCURATE answer. |  | Q.68 The first comprehensive, multi-informant epidemiological study of childhood psychopathology.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | The Achenbach System of Empirically Based Assessment Study | |  |  | The Avon Longitudinal Study of Parents and Children | |  |  | The CATIE study | |  |  | The Christchurch Health and Development Study | |  |  | The Dunedin Multidisciplinary Health and Development Study | |  |  | The Great Smokey Mountain Study | |  |  | The Isle of Wight Study | |  |  | The Ontario Child Health Study | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 69 |
| For the following example, please select the MOST ACCURATE answer from the list below. |  | Q.69 A client-centered, semi-directive method of engaging intrinsic motivation to change behavior by developing discrepancy and exploring and resolving ambivalence within the client.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | 12-step programme | |  |  | Adherence therapy | |  |  | Cognitive behavioural therapy | |  |  | Harm minimisation | |  |  | Motivational interviewing | |  |  | Prochaska & DiClemente’s Wheel of Change | |  |  | Psychoeducation | |  |  | Systematic desensitisation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 70 |
| For the following patient, please select the MOST APPRIORIATE next step in his management. |  | Q.70 Tanvir, a 24 year old Bangladeshi man, has been in hospital for eight weeks with his second psychotic episode. There has been minimal improvement despite treatment with Risperidone. The dose was titrated up since admission and has been 6mg for the past 4 weeks.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Augment with Lorazepam | |  |  | Augment with Ziprasidone | |  |  | Change to Aripiprazole | |  |  | Change to Clozapine | |  |  | Change to Olanzapine | |  |  | Electroconvulsive therapy | |  |  | Increase Risperidone to 8mg | |  |  | Wait a further two weeks | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 71 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.71 Atypical depression is thought to be most closely related to which disorder listed below?  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alcoholism | |  |  | Bipolar disorder | |  |  | Borderline personality disorder | |  |  | Bulimia nervosa | |  |  | Catatonia | |  |  | Panic disorder | |  |  | Schizophrenia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 72 |
| For the following concept, please select the LEAST ACCURATE feature listed below. |  | Q.72 Features of holistic Mäori concepts of health (including Te Whare Tapa Wha, Te Wheke and Nga Pou Mana).  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cultural heritage (Taonga tuku iho) | |  |  | Emotions (Whatumanawa) | |  |  | Environment (Te ao turoa) | |  |  | Family (Whänau) | |  |  | Land base (Turangawaewae) | |  |  | Mental health (Hinengaro) | |  |  | Physical health (Tinana) | |  |  | Self determination (Tino rangatiratanga) | |  |  | Spirituality (Wairua) | |  |  | Uniqueness (Mana ake) | |  |  | Vitality (Mauri) | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 73 |
| For the following symptom, please select the MOST LIKELY causative movement disorder from the list below. |  | Q.73 The bon-bon sign.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acute Dystonia | |  |  | Akathisia | |  |  | Chronic Dystonia | |  |  | Oculogyric Crisis | |  |  | Medication Induced Tremor | |  |  | Neuroleptic Malignant Syndrome | |  |  | Pseudo-parkinsonism | |  |  | Tardive Dyskinesia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 74 |
| For the following clinical example, please select the MOST APPROPRIATE symptom listed below. |  | Q.74 A sales clerk loses his ability to make change and write clearly, and cannot say whether you are holding up your thumb or index finger.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anosognosia | |  |  | Autotopagnosia | |  |  | Dysaesthesia | |  |  | Dyscalculia | |  |  | Dysgeusia | |  |  | Palinopsia | |  |  | Pareidolia | |  |  | Prosopagnosia | |  |  | Simultanagnosia | |  |  | Visual agnosia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 75 |
| For the following example, please select the MOST APPROPRIATE type of psychotherapy listed below. |  | Q.75 Role dispute or Role transition are two of the four areas of focus.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Brief psychodynamic therapy | |  |  | CBT-oriented group therapy | |  |  | Exposure and response prevention | |  |  | Expressive therapy | |  |  | Family therapy | |  |  | Interpersonal therapy | |  |  | Marital therapy | |  |  | Mindfulness training | |  |  | Motivational interviewing | |  |  | Systematic desensitisation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 76 |
| For the following patient, please select the MOST APPROPRIATE diagnosis. |  | Q.76 Negative cognitions about oneself, the world and the future.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | All-or-nothing thinking | |  |  | Automatic thoughts | |  |  | Catastrophising | |  |  | Disqualifying the positive | |  |  | Emotional reasoning | |  |  | 'Fortune teller' cognitive distortions | |  |  | Mislabelling | |  |  | Overgeneralization | |  |  | Personalization | |  |  | The cognitive triad | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 77 |
| For the following condition, please choose the MOST ACCURATE associated answer. |  | Q.77 Linked with velocardiofacial syndrome and schizophrenia.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | CAG trinucleotide repeats | |  |  | Chromosome 21 linkages | |  |  | Chromosome 22q deletions | |  |  | Genetic polymorphism of acetaldehyde dehydrogenase | |  |  | Intermediate P450 2D6 metabolizer phenotypes | |  |  | P450 1A2 polymorphisms | |  |  | P450 3A4 polymorphisms | |  |  | Ultra-rapid P450 2D6 metabolizer phenotypes | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 78 |
| For the following example, please select the MOST APPROPRIATE answer from the list below. |  | Q.78 The most appropriate antipsychotic to use in a patient with a prolonged QTc interval.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Amisulpride | |  |  | Aripiprazole | |  |  | Chlorpromazine | |  |  | Clozapine | |  |  | Haloperidol | |  |  | Olanzapine | |  |  | Quetiapine | |  |  | Ziprasidone | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 79 |
| For the following clinical scenario, please select the MOST APPROPRIATE treatment for the patient. |  | Q.79 Barbara is a 63 year old woman who presents with dysphoric mood, irritability, panic attacks, pressured speech, agitation and suicidal ideation.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Bupropion | |  |  | Carbamazepine | |  |  | Citalopram | |  |  | Lithium | |  |  | Nortriptyline | |  |  | Sodium valproate | |  |  | Topiramate | |  |  | Tranylcypromine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 80 |
| For the following patient, please select the MOST APPROPRIATE treatment choice. |  | **Q.80 Tom is a 25 year old man who was admitted with first episode psychosis. His symptoms have completely resolved on Amisulpride. Tom would like to know how long to continue taking Amisulpride.**  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | **Five years from the resolution of his symptoms** | |  |  | **Six months from the resolution of his symptoms** | |  |  | **Three months from the resolution of his symptoms** | |  |  | **Tom should never stop the Amisulpride** | |  |  | **Tom should only stop the Amisulpride if he's experiencing side effects** | |  |  | **Twelve months from the resolution of his symptoms** | |  |  | **Two years months from the resolution of his symptoms** | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 81 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.81 Brian, aged 68, develops memory deficits and is arrested after urinating in public at a local park.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acting out | |  |  | Alzheimer's dementia | |  |  | Delirium | |  |  | Exhibitionism | |  |  | Frontal tumour | |  |  | Hypomania | |  |  | Late onset schizophrenia | |  |  | Parkinson's disease | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 82 |
| For the following clinical example, please select the MOST APPROPRIATE symptom demonstrated. |  | Q.82 A man in a neurological ward can copy a picture of a clockface but cannot say what the picture represents.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Astereognosis | |  |  | Autotopagnosia | |  |  | Dysgeusia | |  |  | Fausse reconnaissance | |  |  | Jamais vu | |  |  | Prosopagnosia | |  |  | Visual agnosia | |  |  | Visual illusion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 83 |
| For the following clinical scenario, please select the MOST LIKELY diagnosis from the list below. |  | Q.83 Alice, a 45 year old woman in supported accommodation who has chronic schizophrenia, is noted to be drinking water excessively. Her serum sodium concentration is low.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cushings disease | |  |  | Graves disease | |  |  | Hypothyroidism | |  |  | Liver failure | |  |  | Phaeochromocytoma | |  |  | Porphyria | |  |  | Psychogenic polydipsia | |  |  | Renal failure | |  |  | SIADH | |  |  | Wilson’s disease | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 84 |
| For the following patient, please select the MOST APPROPRIATE psychometric tool to use. |  | Q.84 Angela is a 12 year old girl who has been referred due to her teachers' concern about her marked inattention in class – she often gets up before completing her work to stare out the window.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adaptive Behaviour Assessment Scale (ABAS) | |  |  | Autism Diagnostic Observation Scale (ADOS) | |  |  | Child Behaviour Checklist (CBCL/Rutter) | |  |  | Conners Comprehensive Behaviour Rating Scale  (Conners CBRS) | |  |  | Kiddie Schedule for Affective Disorders and Schizophrenia (K-SADS) | |  |  | Millon Adolescent Personality Inventory (MAPI) | |  |  | Weschler Intelligence Scale for Children (WISC) | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 85 |
| For the following clinical scenario, please select the MOST APPROPRIATE intervention. |  | Q.85 A 19 year young old man with psychosis who was started on Risperidone two days ago presents with his eyes rolled back in his head. He is in acute distress and discomfort.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Benztropine 2mg intramuscularly | |  |  | Benzotropine 2mg intravenously across several minutes. | |  |  | Benztropine 2mg orally | |  |  | Diazepam 5mg intramuscularly | |  |  | Lorazepam 2mg intramuscularly | |  |  | Lorazepam 2mg intravenously across several minutes. | |  |  | Lorazepam 2mg orally | |  |  | Propranolol 10mg orally | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 86 |
| For the clinical presentation, please select the MOST APPROPRIATE initial investigation from the list below. |  | Q.86 Molly, aged 50, has a longstanding bipolar disorder treated with lithium carbonate. She develops difficulty swallowing.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | AIMS assessment | |  |  | Barium swallow | |  |  | Chest X-Ray | |  |  | CT head and neck | |  |  | EEG | |  |  | Gastroscopy | |  |  | Lateral neck X-Ray | |  |  | MRI scan | |  |  | Serum calcium | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 87 |
| For the following example, please select the MOST ACCURATE answer. |  | Q.87 Neurotransmitter that stimulates release of prolactin from the pituitary.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acetylcholine | |  |  | Dopamine | |  |  | GABA | |  |  | Glutamate | |  |  | Glycine | |  |  | Histamine | |  |  | Noradrenaline | |  |  | Serotonin | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 88 |
| For the following example of speech, please select the MOST APPROPRIATE phenomenology demonstrated. |  | Q.88 "Grass is green, violets are, um, blue. I was a fish, but then it didn't snow."  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Clanging | |  |  | Derailment | |  |  | Echolalia | |  |  | Palilalia | |  |  | Paraphasia | |  |  | Perseveration | |  |  | Tangentiality | |  |  | Thought blocking | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 89 |
| For the following example, please select the MOST ACCURATE answer. |  | Q.89 A feature that does not suggest an underlying bipolar disorder in a patient presenting with depression.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Late age of onset | |  |  | More than four previous episodes of depression | |  |  | Marked psychomotor slowing | |  |  | Postpartum onset | |  |  | Previous depressive episodes of short duration and rapid onset and offset | |  |  | Repeated loss of efficacy of antidepressants after an initial response | |  |  | Seasonal pattern to symptoms | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 90 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.90 Gina, aged 25, develops chest pain and dizziness five weeks after commencing clozapine.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Agranulocytosis | |  |  | Dehydration | |  |  | Hypernatremia | |  |  | Mitral valve prolapse | |  |  | Myocardial infarction | |  |  | Myocarditis | |  |  | Panic attack | |  |  | Pericardial effusion | |  |  | Somatisation | |  |  | Torsades des pointes | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 91 |
| For the following patient, please select the MOST APPROPRIATE next step in treatment. |  | Q.91 A 22 year old woman with bipolar disordered treated with olanzapine monotherapy presents with minimal verbal response, no response to instructions, and no visible movements. All physical investigations are normal.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Add Lithium | |  |  | Add Sodium Valproate | |  |  | Change antipsychotic | |  |  | Continue Olanzapine and start Lorazepam | |  |  | Continue Olanzapine and start Fluoxetine | |  |  | Continue Olanzapine and start Venlafaxine | |  |  | Electroconvulsive therapy | |  |  | Increase Olanzapine dose | |  |  | Stop Olanzapine and start Lorazepam | |  |  | Stop Olanzapine and start Lithium | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 92 |
| For the following example, please select the MOST ACCURATE answer from the list below. |  | Q.92 Level II evidence as a mood stabiliser when combined with fluoxetine.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Aripiprazole | |  |  | Citalopram | |  |  | Clozapine | |  |  | Fluoxetine | |  |  | Nortriptyline | |  |  | Olanzapine | |  |  | Quetiapine | |  |  | Risperidone | |  |  | Sertraline | |  |  | Venlafaxine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 93 |
| For the following patient, please select the MOST LIKELY dianosis from the list below. |  | Q.93 A 76 year old man develops a progressive condition causing drooling and micrographia.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer's dementia | |  |  | Binswanger's disease | |  |  | Creutzfeldt-Jakob disease | |  |  | Lewy body dementia | |  |  | Parkinson's disease | |  |  | Pick's disease | |  |  | Vascular dementia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 94 |
| For the following clinical situation, please select the MOST APPROPRIATE treatment regime. |  | Q.94 Initial target dose for Risperidone when treating first episode psychosis.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | 0.5mg – 1mg | |  |  | 1mg – 2mg | |  |  | 2mg – 3mg | |  |  | 3mg – 4mg | |  |  | 4mg – 5mg | |  |  | 5mg – 6mg | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 95 |
| For the following example, please select the MOST ACCURATE statement from the list below. |  | Q.95 Issues to consider regarding treatments for bipolar depression.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Antidepressants cause a switch to mania in 18% of cases | |  |  | Antidepressants cause a switch to mania in 38% of cases | |  |  | Antidepressants reduce the risk of rapid cycling | |  |  | ECT can cause a switch to mania | |  |  | Fluoxetine is safe to use as monotherapy | |  |  | Lamotrigine is effective for longer-term prevention, including during manic episodes | |  |  | Longer-term Lithium therapy increases the risk of suicide | |  |  | The risk of a switch to mania is reduced by the use of tricyclics | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 96 |
| For the following example, please select the MOST APPROPRIATE historical author from the list below. |  | Q.96 Argued that male identification is defined by rejection rather than acceptance.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alfred Adler | |  |  | Anna Freud | |  |  | Erich Fromm | |  |  | Ernest Jones | |  |  | Harry Guntrip | |  |  | Heinz Kohut | |  |  | Karen Horney | |  |  | Mary Ainsworth | |  |  | Nancy Chodorow | |  |  | Otto Rank | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 97 |
| For the following example, please select the MOST PRIORITISED ethical principle or right from the list below. |  | Q.97 A psychiatrist over-rides a patient's instruction not to contact her parents, due to concerns about the risk of her suiciding.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Autonomy | |  |  | Beneficence | |  |  | Justice | |  |  | Non-maleficence | |  |  | The right not to be abused | |  |  | The right to be treated without prejudice or bias | |  |  | The right to be informed about one’s treatment | |  |  | The right to be treated with dignity | |  |  | The right to privacy | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 98 |
| For the following example, please select the MOST ACCURATE phenomenology demonstrated. |  | Q.98 "There are messages in car number plates about the conspiracy. It's the androids – I have to stop them taking over."  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Delusion of guilt | |  |  | Delusion of control | |  |  | Grandiose delusion | |  |  | Idea of reference | |  |  | Mood congruent delusion | |  |  | Nihilistic delusion | |  |  | Overvalued idea | |  |  | Preoccupation | |  |  | Referential delusion | |  |  | Somatic delusion | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 99 |
| For the following example, please select the MOST ACCURATE answer from the list below. |  | Q.99 The most rapidly addictive activity.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Casino-based blackjack | |  |  | Casino-based roulette | |  |  | Greyhound racing betting | |  |  | Horse racing betting | |  |  | On-line poker | |  |  | On-line mah jong | |  |  | Pokie machines | |  |  | Visiting internet social sites | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 100 |
| For the following patient, please select the MOST LIKELY diagnosis listed below. |  | Q.100 Moira, a 76-year-old woman, is referred to you with depression. Her husband complains that she is having difficulty finding words and that she no longer cares for herself properly. Moira is dishevelled, with food stains on her blouse of which she seems unaware. Her speech shows poverty of content and paraphasias. She loses several points on cognitive assessment, with good short-term recall but inability to copy diagrams accurately or to write a proper sentence.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer’s dementia | |  |  | Creutzfeld-Jakob disease | |  |  | Frontotemporal (Pick’s) dementia | |  |  | Huntingdon’s disease | |  |  | Korsakoff’s syndrome | |  |  | Lewy body dementia | |  |  | Parkinson’s disease | |  |  | Vascular dementia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 101 |
| For the following patient, please select the MOST APPROPRIATE linked medication. |  | Q.101 Sheila, aged 55, accepts that giving up marmite is worth it to help manage her previously intractable depression.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Aripiprazole | |  |  | Clozapine | |  |  | Gabapentin | |  |  | Lamotrigine | |  |  | Lithium carbonate | |  |  | Olanzapine | |  |  | Phenelzine | |  |  | Quetiapine | |  |  | Risperidone | |  |  | Sodium valproate | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 102 |
| For the following clinical situation, please select the MOST ACCURATE answer. |  | Q.102 Medication which is not considered a first line treatment for those with first episode non-affective psychosis.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Amisulpride | |  |  | Aripiprazole | |  |  | Olanzapine | |  |  | Quetiapine | |  |  | Risperidone | |  |  | Ziprasidone | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 103 |
| For the following example, please select the MOST RELEVANT aspect of memory demonstrated. |  | Q.103 "It's just like riding a bike."  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Episodic Memory | |  |  | Facial Memory | |  |  | Paradigms | |  |  | Procedural Memory | |  |  | Semantic Memory | |  |  | Short-Term Memory | |  |  | Verbal Memory | |  |  | Working Memory | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 104 |
| For the following patient, please select the MOST APPROPRIATE diagnosis from the list below. |  | Q.104 Franz sees himself as the cause of a negative event for which in fact he was not primarily responsible.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | All-or-nothing thinking | |  |  | Automatic thoughts | |  |  | Catastrophising | |  |  | Disqualifying the positive | |  |  | Emotional reasoning | |  |  | Mislabelling | |  |  | Overgeneralization | |  |  | Personalization | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 105 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.105 Billy is aged 8. His teacher has noticed that after getting to his classroom he leaves his bag, walks back to the gate, taps the gate eight times, does a push up and clenches and unclenches his fists three times, then goes back to class to put his bag away.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Autistic Spectrum Disorder | |  |  | Conduct Disorder | |  |  | Disruptive Mood Dysregulation Disorder | |  |  | Obsessive Compulsive Disorder | |  |  | Oppositional Defiant Disorder | |  |  | Schizophrenia | |  |  | Social anxiety disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 106 |
| For the following example, please select the MOST ACCURATE therapy demonstrated. |  | Q.106 Agnes, a 20 year old refugee, repeatedly draws figures who look vaguely like herself, but who have missing limbs or holes in their chests.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acceptance and commitment therapy | |  |  | Behavioural therapy | |  |  | Brief psychodynamic therapy | |  |  | Cognitive behavioural therapy | |  |  | Expressive therapy | |  |  | Interpersonal therapy | |  |  | Play therapy | |  |  | Psychodrama | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 107 |
| For the following question, please select the MOST ACCURATE answer. |  | Q.107 Which statement below is not correct, regarding Aboriginal and Torres Islander peoples and their health.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Aboriginal and Torres Islander peoples have a holistic view of health. | |  |  | Finding out about traditional laws can play a big part in whether an assessment goes well or poorly. | |  |  | Psychiatrists need to recognise the history of physical and psychological genocide and extreme trauma affecting Aboriginal and Torres Strait Islander communities. | |  |  | Psychiatrists who do not themselves have Aboriginal or Torres Islander ancestry should read as much as possible about Aboriginal and Torres Islander cultural beliefs and practices so they can become experts in this field. | |  |  | 'The Dance of Life' is a series of paintings of the many dimensions in a comprehensive approach to understand Aboriginal and Torres Strait Islander mental health. | |  |  | The RANZCP has apologised to Aboriginal and Torres Strait Islander peoples for the failure of the medical profession to intervene in the disastrous "Stolen generation" practices. | |  |  | There are a very large number of Aboriginal tribes, whose languages are diverse. | |  |  | Understanding kinship systems is important when working with Aboriginal and Torres Islander peoples. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 108 |
| For the following example please select the MOST ACCURATE psychological defence from the list below. |  | Q.108 Jodie tells her psychotherapist that she's started seeing a naturopath every week who is “really understanding and helpful. It's such a relief to get practical advice.”    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Countertransference | |  |  | Idealisation and devaluation | |  |  | Intellectualisation | |  |  | Negative transference | |  |  | Positive transference | |  |  | Rationalisation | |  |  | Reaction formation | |  |  | Repression | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 109 |
| For the following patient, please select the MOST ACCURATE brain region or pathway involved. |  | Q.109 A 4 year old child presents to ED with opisthotonus after ingesting her mother’s metoclopramide tablets.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cerebellum | |  |  | Frontal cortex | |  |  | Hypothalamus | |  |  | Nigrostriatal system | |  |  | Right temporal area | |  |  | Spinothalamic pathway | |  |  | Temporal cortex | |  |  | Tuberoinfundibular pathway | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 110 |
| For the following patient, please select the MOST IMPORTANT next investigation to order. |  | Q.110 Regarding people with Intellectual disability (ID), which of the following is not correct  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | 99% of people with Down’s Syndrome develop Alzheimer's Disease by age 40 | |  |  | ID is defined as: IQ <70, functional impairments in at least two areas of life, and onset before age 18 | |  |  | Mild ID is defined as an IQ between 50–70 | |  |  | Moderate ID is defined as an IQ between 35–49 | |  |  | Of people with ID, 30% have additional visual disability | |  |  | Of people with ID, 40% have additional hearing disability | |  |  | People with ID are more vulnerable to mental disorders due to histories of abuse, adverse life events, and lack of protective experiences | |  |  | The incidence of suicide, drug & alcohol problems and personality disorders is higher in people with ID | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 111 |
| For the following patient, please select the MOST APPROPRIATE diagnosis listed below. |  | Q.111 A 32 year old woman discusses her belief in the sixth sense, is circumstantial in her thinking and claims that the interviewer wore a certain ring because they knew she would like it.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Brief Psychotic Disorder | |  |  | Delusional Disorder | |  |  | Narcissistic Personality disorder | |  |  | Major Depressive Disorder | |  |  | Obsessive Compulsive Disorder | |  |  | Paranoid Personality disorder | |  |  | Schizoaffective Disorder | |  |  | Schizophrenia | |  |  | Schizophreniform Disorder | |  |  | Schizotypal Personality Disorder | |  |  | Schizoid Personality Disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 112 |
| For the following clinical scenario, please select the MOST APPROPRIATE explanation listed below. |  | Q.112 Mrs Vodanovic suddenly develops an inability to speak during a bitter family dispute over her father's will. Her family bring her to the GP but she herself does not seem distressed.    Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Catatonia | |  |  | Conversion disorder | |  |  | Elective mutism | |  |  | Fluent Dysphasia | |  |  | Guardedness | |  |  | Non-fluent dysphasia | |  |  | Passive-aggressive witholding | |  |  | Poverty of the content of speech | |  |  | Psychomotor retardation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 113 |
| For the following example, please select the MOST ACCURATE answer from the list below. |  | Q.113 Most effective follow-up therapy after a course of ECT for a patient with a serious major depression with melancholic features.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cognitive behavioural therapy and Fluoxetine | |  |  | Doxepin | |  |  | Doxepin and Sodium Valproate | |  |  | Lamotragine | |  |  | Lithium carbonate | |  |  | Mirtazepine | |  |  | Nortriptyline | |  |  | Nortriptyline and Lithium Carbonate | |  |  | Tranylcypromine | |  |  | Venlafaxine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 114 |
| For the following patient, please select the MOST APPROPRIATE diagnosis listed below. |  | Q.114 William, an 80-year-old man with no psychiatric history, presents with a two-month history of low mood, isolativeness, visual hallucinations and nihilistic ruminations. Over the past month he has become almost mute, and bed-bound. Myoclonic jerks are observed, and an electroencephalogram (EEG) shows sharp wave complexes.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer’s dementia | |  |  | Creutzfeld-Jakob disease | |  |  | Frontotemporal (Pick’s) dementia | |  |  | Huntingdon’s disease | |  |  | Lewy body dementia | |  |  | Neurosyphilis | |  |  | Parkinson’s disease | |  |  | Vascular dementia | |  |  | Wernicke’s encephalopathy | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 115 |
| For the following clinical scenario, please select the MOST APPROPRIATE next investigation. |  | Q.115 A 35 year old man with a history of severe psychotic manic episodes developed neuroleptic malignant syndrome a year ago while on lithium and risperidone, and has been on no treatment for the last six months. He has now developed manic symptoms and has received high-dose oral quetiapine and intramuscular lorazepam for the last three days.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Electrocardiogram | |  |  | Fasting serum glucose | |  |  | Full blood count | |  |  | Liver function tests | |  |  | Serum creatinine | |  |  | Serum creatinine kinase | |  |  | Temperature | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 116 |
| For the following patient, please select the MOST ACCURATE explanation listed below. |  | Q.116 After separating from her husband, Sandra is acutely sensitive to feeling criticized, sleeps more than usual and eats more high calorie junk food than usual.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Anorexia nervosa | |  |  | Atypical depression | |  |  | Binge eating disorder | |  |  | Bipolar disorder type II | |  |  | Bulimia nervosa | |  |  | Comfort eating | |  |  | Dysthymic disorder | |  |  | Eating disorder NOS | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 117 |
| For the following example, please select the MOST ACCURATE answer below. |  | Q.117 Tryptophan hydroxylase is the enzyme involved in the rate-limiting step in the synthesis of this neurotransmitter.  Select ONLY ONE checkbox per page.   |  |  |  |  | | --- | --- | --- | --- | |  |  | 5-hydroxy indole acetic acid (5-HIAA) | | |  |  | Acetylcholine | | |  |  | Dopamine | | |  |  | Gamma-aminobutyric acid (GABA) | | |  |  | Glutamate | | |  |  | Glycine | | |  |  | Noradrenaline | | |  |  | Serotonin | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 118 |
| For the following patient, please select the MOST APPROPRIATE diagnosis listed below. |  | Q.118 Aya is a 60 year old immigrant who was brought here by her extended family a year ago. They regard her as “slow” and she has been kept secluded, at home. She presents after developing delusions of being poisoned, and on assessment is noted to have a puffy face, long latency in replies and cognitive deficits.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cushings disease | |  |  | Graves disease | |  |  | Hyperparathyroidism | |  |  | Hyperthyroidism | |  |  | Hypothyroidism | |  |  | Liver failure | |  |  | Renal failure | |  |  | Wilson’s disease | | | |
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| For the following patient, please select the MOST LIKELY explanation from the list below. |  | Q.119 Mr Barker, aged 83, has such speech latency that he begins to reply only when the interviewer asks the next question. He makes no eye contact and has lost considerable weight.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer's dementia | |  |  | Catatonia | |  |  | Conversion disorder | |  |  | Elective mutism | |  |  | Normal pressure hydrocephalus | |  |  | Parkinson's disease | |  |  | Psychomotor retardation | |  |  | Schizophrenia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 120 |
| For the following patient, please select the MOST APPROPRIATE diagnosis from the list below. |  | Q.120 Joe, aged 32, has a history of recurrent depression and hypomania. He is admitted with an acute psychosis and becomes incoherent. Shortly afterwards he is found mute and immobile, standing upright but leaning at an odd angle.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Catatonic schizophrenia | |  |  | Disorganised schizophrenia | |  |  | Malignant catatonia | |  |  | Manic stupor | |  |  | Melancholic depression | |  |  | Psychotic depression | |  |  | Schizoaffective disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 121 |
| For the following patient, please select the MOST IMPORTANT aspect of monitoring to have in place. |  | Q.121 A 41 year old man with schizophrenia is stable on clozapine, with good symptom control five months after commencing this.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | A fasting blood glucose level 3-monthly | |  |  | A monthly ECG | |  |  | An annual AIMs test | |  |  | Annual girth measurements | |  |  | Annual thyroid function tests | |  |  | Full blood count and differential monthly | |  |  | Full blood count and differential weekly | |  |  | Monthly serum levels of the medication | |  |  | Serum lipids annually | |  |  | Three-monthly HB1AC blood tests | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 122 |
| For the following example, please select the MOST PRIORITISED ethical principle or right from the list below. |  | Q.122 Government funding to mental health services is "ring fenced" to ensure the health service cannot use it to fund other specialties.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Autonomy | |  |  | Beneficence | |  |  | Justice | |  |  | Non-maleficence | |  |  | The right not to be abused | |  |  | The right to be treated without prejudice or bias | |  |  | The right to be informed about one’s treatment | |  |  | The right to be treated with dignity | |  |  | The right to privacy | | | |
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| For the following example, please select the MOST LIKELY diagnosis listed below. |  | Q.123 Maria is ordered to see a budgetary advisor and loses her job as a sales clerk due to theft.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alcohol abuse | |  |  | Alcohol dependence | |  |  | Heroin dependence | |  |  | Inhalant abuse | |  |  | Internet addiction | |  |  | Lorazepam dependence | |  |  | Pathological gambling | |  |  | Stimulant abuse | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 124 |
| For the following patient, please select the MOST LIKELY diagnosis from the list below. |  | Q.124 Richard, a 72-year-old man with a history of past Coronary Artery Bypass Graft surgery and leg pain on walking, is referred as his wife has noticed problems with his short-term memory. Richard says that he copes by making lists. He presents as a pleasant and sociable man and scores 21/30 on a Mini Mental State Examination.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Alzheimer’s dementia | |  |  | Creutzfeld-Jakob disease | |  |  | Frontotemporal (Pick’s) dementia | |  |  | Huntingdon’s disease | |  |  | Lewy body dementia | |  |  | Parkinson’s disease | |  |  | Vascular dementia | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 125 |
| For the following patient, please select the MOST LIKELY diagnosis. |  | Q.125 Ray decides to cease penicillamine and starts naturopathy instead. Six months later he is admitted with a manic psychosis and cognitive deficits.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Cushings disease | |  |  | Graves disease | |  |  | Hypothyroidism | |  |  | Liver failure | |  |  | Phaeochromocytoma | |  |  | Porphyria | |  |  | Renal failure | |  |  | SIADH | |  |  | Wilson’s disease | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 126 |
| For the following patient, please select the MOST LIKELY diagnosis from the list below. |  | Q.126 A young man is repeatedly admitted with relapses after stopping clozapine. The relapses always have the same pattern of symptoms, with muteness, echopraxia and waxy flexibility.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Catatonic schizophrenia | |  |  | Disorganised schizophrenia | |  |  | Malignant catatonia | |  |  | Manic stupor | |  |  | Melancholic depression | |  |  | Neuroleptic malignant syndrome | |  |  | Psychotic depression | |  |  | Schizoaffective disorder | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 127 |
| For the following example, please select the MOST ACCURATE answer from the list below. |  | Q.127 The main morphological findings in human postmortem studies of schizophrenia.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Decreased hippocampal volume | |  |  | Enlargement of ventricles | |  |  | Increased neuronal density in Brodman areas 9 and 46 | |  |  | Increased thalamic volume | |  |  | Reduction in dendritic spaces | |  |  | Slight cortical thinning in prefrontal cortex | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 128 |
| For the following patient, please select the MOST APPROPRIATE medication from the list below. |  | Q.128 Benjy is a 13 year old boy with a long history of ADHD, which is considered well treated on Methylphenidate LA. He has developed a major depression episode with marked loss of appetite and sleep disruption, which his mother ascribes to difficulties with learning and a family history of depression.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Atomoxetine | |  |  | Caffeine | |  |  | Citalopram | |  |  | Concerta (Methylphenidate XR) | |  |  | Dexamphetamine | |  |  | Fluoxetine | |  |  | Melatonin | |  |  | Modafinil | |  |  | Risperidone | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 129 |
| For the following symptoms in neonates, which medication, if used during pregnancy, is the MOST LIKELY cause. |  | Q.129 Jitteriness, poor feeding, hypotonia and tachypnoea.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Benztropine | |  |  | Gabapentine | |  |  | Lithium carbonate | |  |  | Olanzapine | |  |  | Paroxetine | |  |  | Quetiapine | |  |  | Risperidone | |  |  | Tranylcypromine | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 130 |
| For the following example, please select the MOST APPROPRIATE aspect of qualitative research from the list below. |  | **Q.130** **A qualitative study describing and analysing organisational change during the restructuring of a maternal mental health service, across one year.**  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | **Constant Comparative Analysis** | |  |  | **Data collection using documentation** | |  |  | **Data collection using focus groups** | |  |  | **Data collection using semi-structured interviews** | |  |  | **Ethnographic qualitative research** | |  |  | **Extended case study** | |  |  | **Grounded Theory** | |  |  | **Phenomenological qualitative research** | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 131 |
| For the following example, please select the MOST APPROPRIATE type of psychotherapy. |  | Q.131 Requires the client to have clearly defined goals and minimal resistance.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Adherence therapy | |  |  | Brief psychodynamic psychotherapy | |  |  | Cognitive behavioural therapy | |  |  | Dialectical behavioural therapy | |  |  | Exposure and response prevention | |  |  | Interpersonal therapy | |  |  | Motivational interviewing | |  |  | Solution-focussed therapy | |  |  | Supportive therapy | |  |  | Systematic desensitisation | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 132 |
| For the following patient, please select the MOST LIKELY causative medication listed below. |  | Q.132 A woman being treated for persistent depression develops fever, fatigue and mouth ulceration.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Aripiprazole | |  |  | Clozapine | |  |  | Gabapentin | |  |  | Lamotrigine | |  |  | Lithium carbonate | |  |  | Olanzapine | |  |  | Phenelzine | |  |  | Quetiapine | |  |  | Risperidone | |  |  | Sodium valproate | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 133 |
| For the following question, please select the MOST ACCURATE answer from the list below. |  | Q.133 Which of the following is not a diagnostic feature of Borderline Personality Disorder.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Affective instability | |  |  | Chronic feelings of emptiness | |  |  | Difficulty controlling anger | |  |  | Dissociative symptoms | |  |  | Disturbed Identity | |  |  | Efforts to avoid abandonment | |  |  | Impulsivity in areas that are self-damaging | |  |  | Recurrent suicidal (or self-mutilating) behaviour | |  |  | Stress related paranoid ideation | |  |  | Suggestibility | |  |  | Unstable and intense relationships | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 134 |
| For the following example, please select the MOST ACCURATE type of memory demonstrated. |  | Q.134 Miriam can name three female Prime Ministers of New Zealand.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Episodic Memory | |  |  | Facial Memory | |  |  | Imagery | |  |  | Paradigms | |  |  | Procedural Memory | |  |  | Semantic Memory | |  |  | Short-Term Memory | |  |  | Verbal Memory | |  |  | Visual Memory | |  |  | Working Memory | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 135 |
| For the following example, please select the MOST ASSOCIATED historical figure listed below. |  | Q.135 Winner of the Nobel Prize in 1927 for discovery of the therapeutic value of malaria inoculation in the treatment of dementia paralytica.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Carl Jung | |  |  | Emil Kraepelin | |  |  | Eugene Bleuler | |  |  | Franz Gall | |  |  | Hideyo Noguchi | |  |  | Julius Wagner-Jauregg | |  |  | Karl Menninger | |  |  | Ugo Cerletti | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 136 |
| For the following example, please select the MOST ACCURATE legal concept demonstrated. |  | Q.136 A young woman kills her mother, convinced that she is an impostor and a spy.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Actus reus | |  |  | Disease of the mind | |  |  | Duress | |  |  | Fitness to plead | |  |  | Forseeability | |  |  | Irresistible impulse | |  |  | Mens rea | |  |  | Natural Justice | |  |  | Provocation | |  |  | Sane Automatism | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 137 |
| For the following example, please select the MOST ASSOCIATED genetic risk factor. |  | Q.137 Increased risk of late-onset Alzheimer's disease.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | 5HTT gene L genotype | |  |  | 5HTT gene S genotype | |  |  | Apolipoprotein gene (APOE e4 allele) | |  |  | D-amino acid oxidase activator (DAOA) | |  |  | Neuregulin gene (NRG1) | |  |  | Neurogenic locus notch 4 (NOTCH4) | |  |  | Reelin gene (REELIN) | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 138 |
| For the following question, please select the MOST ACCURATE answer from the list below. |  | Q.138 Which of the following is not true, when working with an interpreter.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Family members may not be able to interpret accurately for a number of reasons. | |  |  | Interpreters for the deaf should be seated beside the clinician. | |  |  | Interpreters must adhere to strict confidentiality. | |  |  | Interpreters should not have side conversations with the patient or family. | |  |  | Interpreters should preferentially use the 'triangle' model of interpretation. | |  |  | Interpreters should preferentially use the 'black box' model of interpretation. | |  |  | When working with an interpreter, speak directly to the patient. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 139 |
| For the following clinical problem, please select the MOST LIKELY cause below. |  | Q.139 Keratinocyte apoptosis.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Acute laryngeal dystonia | |  |  | Anticholinergic delirium | |  |  | Fatal carbon monoxide poisoning | |  |  | Fatal paracetamol overdose | |  |  | Heavy cigarette smoking | |  |  | Lithium toxicity | |  |  | Opiate toxicity | |  |  | Stevens-Johnson syndrome | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | EMQ 140 |
| For the following clincial example, please select the MOST APPROPRIATE medication listed below. |  | Q.140 Elias is a 14 year old boy with significant autistic spectrum features and an IQ of 72. He has devoted parents who have worked hard on behavioural routines. Since puberty, they have been struggling with increasing episodes of irritability when his needs are not met immediately and have asked about medication options.  Select ONLY ONE checkbox per page.   |  |  |  | | --- | --- | --- | |  |  | Atomoxetine | |  |  | Caffeine | |  |  | Citalopram | |  |  | Concerta (Methylphenidate XR) | |  |  | Dexamphetamine | |  |  | Fluoxetine | |  |  | Modafinil | |  |  | Olanzapine | |  |  | Risperidone | | | |
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| Critical Analysis Problems (CAP)  You are about to commence the CAP component of the Mock Exam.  Abstract excerpts, tables and figures are in the left hand panel. They are repeated as needed for question pages relating to that segment of information and this replaces the past use of a Stimulus handout. (In the real exam all this information is made available via data, excerpts and pop-ups in the left-hand panel).     * The Questions and Answer Options and instructions are on the right hand panel. * Please read Question Instructions, Questions and options CAREFULLY before answering. * There may be a series of Questions that could share the same list of answer options.   To 'flag' a question and review it later add an ! to the 'Flag box' at top right. Then search for all the !s when you want to review any questions you were unsure about, by hitting control-F to bring up the navigation field, then type ! in that field.  Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page.  Example of a 'flagged' question |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.1 |
| CAP Question 1 (20 marks)  **Comparative efficacy and acceptability of 21 antidepressant drugs for the acute treatment of adults with major depressive disorder: a systematic review and network meta-analysis**  *Andrea Cipriani, Toshi A Furukawa\*, Georgia Salanti\*, Anna Chaimani, Lauren Z Atkinson, Yusuke Ogawa, Stefan Leucht, Henricus G Ruhe, Erick H Turner, Julian P T Higgins, Matthias Egger, Nozomi Takeshima, Yu Hayasaka, Hissei Imai, Kiyomi Shinohara, Aran Tajika, John P A Ioannidis, John R Geddes*  **Summary**  **Background:** Major depressive disorder is one of the most common, burdensome, and costly psychiatric disorders worldwide in adults. Pharmacological and non-pharmacological treatments are available; however, because of inadequate resources, antidepressants are used more frequently than psychological interventions. Prescription of these agents should be informed by the best available evidence. Therefore, we aimed to update and expand our previous work to compare and rank antidepressants for the acute treatment of adults with unipolar major depressive disorder.  **Methods:** We did a systematic review and network meta-analysis. We searched Cochrane Central Register of Controlled Trials, CINAHL, Embase, LILACS database, MEDLINE, MEDLINE In-Process, PsycINFO, the websites of regulatory agencies, and international registers for published and unpublished, double-blind, randomised controlled trials from their inception to Jan 8, 2016. We included placebo-controlled and head-to-head trials of 21 antidepressants used for the acute treatment of adults (≥18 years old and of both sexes) with major depressive disorder diagnosed according to standard operationalised criteria. We excluded quasi-randomised trials and trials that were incomplete or included 20% or more of participants with bipolar disorder, psychotic depression, or treatment-resistant depression; or patients with a serious concomitant medical illness. We extracted data following a predefined hierarchy. In network meta-analysis, we used group-level data. We assessed the studies’ risk of bias in accordance to the Cochrane Handbook for Systematic Reviews of Interventions, and certainty of evidence using the Grading of Recommendations Assessment, Development and Evaluation framework. Primary outcomes were efficacy (response rate) and acceptability (treatment discontinuations due to any cause). We estimated summary odds ratios (ORs) using pairwise and network meta-analysis with random effects. |  | Select ONLY ONE checkbox per page.  Question 1.1 Based on the adjoining abstract and your other knowledge, please answer the following question. Which option best describes this study? (1 mark)   |  |  |  | | --- | --- | --- | |  |  | Aetiological | |  |  | Interventional | |  |  | Meta-analysis | |  |  | Observational | |  |  | Prognositic | |  |  | Qualitative | |  |  | Screening intervention | |  |  | Systematic review |   *(abstract continues on next page)* | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.2 |
| CAP Question 1 contd.  **Findings:** We identified 28,552 citations and of these included 522 trials comprising 116,477 participants. In terms of efficacy, all antidepressants were more effective than placebo, with ORs ranging between 2.13 (95% credible interval [CrI] 1.89–2.41) for amitriptyline and 1.37 (1.16–1.63) for reboxetine. For acceptability, only agomelatine (OR 0.84, 95% CrI 0.72–0.97) and fluoxetine (0.88, 0.80–0.96) were associated with fewer dropouts than placebo, whereas clomipramine was worse than placebo (1.30, 1.01–1.68). When all trials were considered, differences in ORs between antidepressants ranged from 1.15 to 1.55 for efficacy and from 0.64 to 0.83 for acceptability, with wide CrIs on most of the comparative analyses. In head-to-head studies, agomelatine, amitriptyline, escitalopram, mirtazapine, paroxetine, venlafaxine, and vortioxetine were more effective than other antidepressants (range of ORs 1.19–1.96), whereas fluoxetine, fluvoxamine, reboxetine, and trazodone were the least efficacious drugs (0.51–0.84). For acceptability, agomelatine, citalopram, escitalopram, fluoxetine, sertraline, and vortioxetine were more tolerable than other antidepressants (range of ORs 0.43–0.77), whereas amitriptyline, clomipramine, duloxetine, fluvoxamine, reboxetine, trazodone, and venlafaxine had the highest dropout rates (1.30–2.32). 46 (9%) of 522 trials were rated as high risk of bias, 380 (73%) trials as moderate, and 96 (18%) as low; and the certainty of evidence was moderate to very low.  Interpretation: All antidepressants were more efficacious than placebo in adults with major depressive disorder. Smaller differences between active drugs were found when placebo-controlled trials were included in the analysis, whereas there was more variability in efficacy and acceptability in head-to-head trials. These results should serve evidence-based practice and inform patients, physicians, guideline developers, and policy makers on the relative merits of the different antidepressants. |  | Select ONLY ONE checkbox per page.  Question 1.2 Based on the adjoining abstract and your other knowledge, please answer the following question. Which option best describes the main study screening process? (2 marks)   |  |  |  | | --- | --- | --- | |  |  | Contacting individual study authors | |  |  | Manual search | |  |  | Narrative review | |  |  | Regulatory agencies enquiry | |  |  | Scoping review | |  |  | Systematic literature search | |  |  | Trial registry search | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.3 |
| CAP Question 1 contd.  *(see abstract above)* |  | Select ONLY ONE checkbox per page.  Question 1.3 Based on the adjoining abstract and your other knowledge, please answer the following question. Which option best describes the double-blind nature of the included studies? (2 marks)   |  |  |  | | --- | --- | --- | |  |  | A study in which participants and their family are unaware of whether participants are receiving treatment with the active drug or placebo. | |  |  | A study in which treatment providers and researchers are unaware of whether participants are receiving treatment with the active drug or placebo. | |  |  | A study in which participants are unaware of whether they are receiving treatment with the active drug or placebo. | |  |  | A study in which the participants and researchers are unaware whether the participants are receiving treatment with the active drug or placebo. | |  |  | A study in which the researchers and data analysts are unware whether the participants are receiving treatment with the active drug or placebo. | |  |  | A study in which the participants and data analysts are unaware whether the participants are receiving treatment with the active drug or placebo. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.4 |
| CAP Question 1 contd. |  | Select ONLY ONE checkbox per page.  Question 1.4 Based on the adjoining figure and your other knowledge, please answer the following question. Which option below best describes the principal advantage of network meta-analyses?  (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Allows direct comparisons between treatments of interest. | |  |  | Analyses longitudinal cohort data to make inferences about causation. | |  |  | Compares treatments of interest when direct comparisons are not present through the use of a common comparator or linking treatment. | |  |  | Ensures unpublished, often negative studies are included in the analysis. | |  |  | Excludes those who do not adhere to treatment. | |  |  | Increases the statistical power. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.5 |
| CAP Question 1 contd.  In terms of efficacy, all antidepressants were more effective in achieving remission than placebo, with Odds Ratios ranging  between 2.13 for amitriptyline and 1.37 for reboxetine. |  | Select ONLY ONE checkbox per page.  Question 1.5 Based on the adjoining abstract and your other knowledge, please answer the following question. Which option best describes the Odds Ratio calculation? (2 marks)   |  |  |  | | --- | --- | --- | |  |  | A measure of the strength of the association. | |  |  | The inverse of the absolute risk reduction. | |  |  | The odds of achieving remission for antidepressants divided by the odds of achieving remission in placebo. | |  |  | The proportion of patients who have responded over a given time period. | |  |  | The rate of remission for antidepressants minus the rate of remission for placebo. | |  |  | The ratio of achieving remission for antidepressants divided by the ratio of achieving remission in placebo. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.6 |
| CAP Question 1 contd. |  | Select ONLY ONE checkbox per page.  Question 1.6 Based on the adjoining figure A and your other knowledge, please answer the following question. Which statement about efficacy is most accurate? (2 marks)   |  |  |  | | --- | --- | --- | |  |  | Amitriptyline is significantly more efficacious than Mirtazapine. | |  |  | Amitriptyline is the antidepressant of first choice. | |  |  | Clomipramine is significantly less effective than Agomelatine. | |  |  | Clomipramine is the least efficacious antidepressant. | |  |  | Reboxetine is significantly less efficacious than Amitriptyline. | |  |  | Reboxetine is significantly more efficacious than Amitriptyline. | |  |  | Reboxetine is the weakest antidepressant. |   *(if text size in the adjoining figure is too small, click on the zoom control at lower right of the screen to enlarge the view)* | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.7 |
| CAP Question 1 contd. |  | Select ONLY ONE checkbox per page.  Question 1.7 Based on the adjoining figure B and your other knowledge, please answer the following question. Which statement about acceptability is most accurate? (2 marks)   |  |  |  | | --- | --- | --- | |  |  | Agomelatine is significantly more acceptable than Clomipramine | |  |  | Agomelatine is significantly more acceptable than Fluoxetine | |  |  | Agomelatine is the antidepressant of first choice | |  |  | Amitriptyline is significantly more acceptable than Reboxetine | |  |  | Amitriptyline is the most acceptable medication  Clomipramine is significantly more acceptable than | |  |  | Amitriptyline  Clomipramine is significantly more acceptable than placebo |   *(if text size in the adjoining figure is too small, click on the zoom control at lower right of the screen to enlarge the view)* | | |
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| CAP Question 1 contd.    /var/folders/tv/gzgrr73x6yv_0f5kcr3m__z40000gn/T/com.microsoft.Word/WebArchiveCopyPasteTempFiles/image008.gif |  | Select ONLY ONE checkbox per page.  Question 1.8 Based on the adjoining figure and your other knowledge, please answer the following question. Which statement about funnel plots is most accurate? (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Between study heterogeneity is not a cause of funnel plot asymmetry. | |  |  | Chance findings do not cause funnel plot asymmetry. | |  |  | Consistent negative findings between active treatment and placebo causes funnel plot asymmetry. | |  |  | Fraudulent reporting of study results is not a cause of funnel plot asymmetry. | |  |  | Non-publication of smaller negative studies is a cause of funnel plot asymmetry. | |  |  | Reporting bias does not cause funnel plot asymmetry. | |  |  | Reporting studies with large variation in sample sizes causes funnel plot asymmetry. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.9 |
| CAP Question 1 contd.  Overall, 46 (9%) of 522 trials were rated as high risk of bias, 380 (73%) trials as moderate, and 96 (18%) as low. |  | Select ONLY ONE checkbox per page.  Question 1.9 Based on the adjoining abstract excerpt and your other knowledge, please answer the following question. Which statement about risk of bias is most accurate? (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Failure to blind assessors increases risk of bias. | |  |  | Lack of randomisation reduces risk of bias. | |  |  | Similar findings from a series of studies reduces risk of bias. | |  |  | The author/s of the study assess risk of bias based on their qualitative impression. | |  |  | The drop out of non-responders will reduce risk of bias. | |  |  | The lead author of the study is best placed to complete the risk of bias assessment. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.10 |
| CAP Question 1 contd.  The quality of many comparisons was assessed as low or very low for amitriptyline, bupropion, and venlafaxine, whereas it was often rated as moderate for agomelatine, escitalopram, and mirtazapine. |  | Select ONLY ONE checkbox per page.    Question 1.10 Based on the adjoining abstract excerpt and your other knowledge, please answer the following question. Which statement about quality of evidence is most accurate? (1 mark)   |  |  |  | | --- | --- | --- | |  |  | A case series from a dedicated clinician is more informative than a case-control study. | |  |  | A systematic review of RCTs provides high level evidence to inform medical decision making. | |  |  | Expert opinion provides the best quality evidence for medical decision making. | |  |  | Several medium scale RCTs provide more useful information than one large RCT for informing medical decision making. | |  |  | The management of rare conditions is best evaluated with large scale RCTs. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 1.11 |
| CAP Question 1 contd.  We included double-blind, randomised controlled trials (RCTs) comparing antidepressants with placebo or another active antidepressant as oral monotherapy for the acute treatment of adults (≥18 years old and of both sexes) with a primary diagnosis of major depressive disorder according to standard operationalised diagnostic criteria (Feighner criteria, Research Diagnostic Criteria, DSM-III, DSM-III-R, DSM-IV, DSM-5, and ICD-10). We considered only double-blind trials because we included placebo in the network meta-analysis, and because this study design increases methodological rigour by minimising performance and ascertainment biases.  Additionally, we included all second-generation antidepressants approved by the regulatory agencies in the USA, Europe, or Japan: agomelatine, bupropion, citalopram, desvenlafaxine, duloxetine, escitalopram, fluoxetine, fluvoxamine, levomilnacipran, milnacipran, mirtazapine, paroxetine, reboxetine, sertraline, venlafaxine, vilazodone, and vortioxetine. To inform clinical practice globally, we selected the two tricyclics (amitriptyline and clomipramine) included in the *WHO Model List of Essential Medicines*). We also included trazodone and nefazodone, because of their distinct effect and tolerability profiles. Additionally, we included trials that allowed rescue medications so long as they were equally provided among the randomised groups. We included data only for drugs within the therapeutic range (appendix pp 133, 134). Finally, we excluded quasi-randomised trials and trials that were incomplete or included 20% or more of participants with bipolar disorder, psychotic depression, or treatment-resistant depression; or patients with a serious concomitant medical illness. |  | Select ONLY ONE checkbox per page.  Question 1.11 Based on the adjoining abstract excerpt and your other knowledge, please answer the following question. A factor most likely to limit the generalisability of these results to your own clinical work would be? (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Clinicians often combine other agents (such as hypnotics) with antidepressants to provide immediate symptom relief. | |  |  | Patients recruited into studies such as those included tend to be highly selected. | |  |  | Patients with bipolar depression likely contaminated the study results. | |  |  | Relevant antidepressant medications weren’t included in the analysis. | |  |  | Study lacked power to demonstrate meaningful results. | |  |  | The doses of antidepressant medications used would be likely to differ from those in Australasian practice. | |  |  | The grey literature wasn’t taken into consideration. | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.1 |
| CAP Question 2 (20 marks)  Nicotine metabolite ratio predicts smoking topography:  The Pennsylvania Adult Smoking Study  *Allshine Chen, Nicolle M. Krebs, Junjia Zhu, Joshua E. Muscat.*  *Department of Public Health Sciences, Penn State College of Medicine, 500 University Dr., Hershey, PA, 17033, USA*  Abstract  Background: The nicotine metabolite ratio (NMR) as measured by the ratio of 3′hydroxycotinine to cotinine has been examined in relation to tobacco use patterns including cigarettes per day and quit success to determine its role in nicotine dependence. We examined the NMR in relation to smoking topography and tested the hypothesis that normal metabolizers have a greater total daily puff volume than slow metabolizers.  Methods: The Pennsylvania Adult Smoking Study (PASS) is a longitudinal study of 352 adults who smoked, on average, 17 cigarettes per day. Subjects used a portable smoking topography device over a two-day period at home and at work. We measured the ratio of 3′hydroxycotinine to cotinine in the saliva of the subjects.  Results: In multiple linear regression analyses, a higher rate of nicotine metabolism was significantly associated with increased daily puffs and total daily puff volume. In a mediation analysis, a significant, indirect effect of race on the relationship between NMR and puff volume was observed, with 22% of the effect mediated by white race. A higher NMR was also associated with female gender, white race, cigarettes per day and nicotine dependence measures.  Conclusion: The NMR was associated with tobacco use patterns including smoking topography. Faster nicotine metabolism was associated with greater total daily puffs and puff volume.  Note: “Smoking topography is a representation of the physical characteristics of smoking behaviour, such as puff count, puff volume, average flow, puff duration, and inter-puff interval.” |  | Select ONLY ONE checkbox per page.  Question 2.1 Based on the adjoining abstract and your other knowledge, please answer the following question.  Which statement best describes the design of this study? (1 mark)   |  |  |  | | --- | --- | --- | |  |  | Case-control study | |  |  | Cohort study | |  |  | Cross sectional study | |  |  | Prospective study | |  |  | Pseudorandomised control study | |  |  | Randomised controlled trial | |  |  | Systematic review | | | |
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| CAP Question 2 contd. *(abstract repeated: same as in Q.2.1 above)*  Nicotine metabolite ratio predicts smoking topography:  The Pennsylvania Adult Smoking Study  *Allshine Chen, Nicolle M. Krebs, Junjia Zhu, Joshua E. Muscat.*  *Department of Public Health Sciences, Penn State College of Medicine, 500 University Dr., Hershey, PA, 17033, USA*  Abstract  Background: The nicotine metabolite ratio (NMR) as measured by the ratio of 3′hydroxycotinine to cotinine has been examined in relation to tobacco use patterns including cigarettes per day and quit success to determine its role in nicotine dependence. We examined the NMR in relation to smoking topography and tested the hypothesis that normal metabolizers have a greater total daily puff volume than slow metabolizers.  Methods: The Pennsylvania Adult Smoking Study (PASS) is a longitudinal study of 352 adults who smoked, on average, 17 cigarettes per day. Subjects used a portable smoking topography device over a two-day period at home and at work. We measured the ratio of 3′hydroxycotinine to cotinine in the saliva of the subjects.  Results: In multiple linear regression analyses, a higher rate of nicotine metabolism was significantly associated with increased daily puffs and total daily puff volume. In a mediation analysis, a significant, indirect effect of race on the relationship between NMR and puff volume was observed, with 22% of the effect mediated by white race. A higher NMR was also associated with female gender, white race, cigarettes per day and nicotine dependence measures.  Conclusion: The NMR was associated with tobacco use patterns including smoking topography. Faster nicotine metabolism was associated with greater total daily puffs and puff volume.  Note: “Smoking topography is a representation of the physical characteristics of smoking behaviour, such as puff count, puff volume, average flow, puff duration, and inter-puff interval.” |  | Select ONLY ONE checkbox per page.  Question 2.2 Based on the adjoining abstract and your other knowledge, please answer the following question.  This trial was designed to measure the differences in: (1 mark)     |  |  |  | | --- | --- | --- | |  |  | 3′hydroxycotinine in smokers | |  |  | NMR in tobacco users | |  |  | Puff volume between normal and fast metabolisers | |  |  | Quit success in smokers | |  |  | Smoking cessation differences between slow and fast metabolisers | |  |  | Smoking topography between normal and slow metabolisers | |  |  | Tobacco use patterns in smokers | | | |
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| CAP Question 2 contd.  (excerpt from methods)  The Pennsylvania Adult Smoking Study (PASS), a study of smoke exposure and nicotine dependence, was conducted in central Pennsylvania between June 2012 and April 2014. Study participants were recruited through local radio advertisements, through flyers posted in places smokers frequent (i.e., gas stations, convenience stores, and tobacco shops), and through the Internet and social media. Recruitment was also facilitated by word of mouth from past participants. Eligible subjects were aged 18 years or older, had smoked at least 1 cigarette per day for the past year, and were not currently pregnant. A total of 352 participants signed the consent form and enrolled in the study. One participant did not complete the study protocol. |  | Select ONLY ONE checkbox per page.  Question 2.3 Based on the abstract, the adjoining extract and your other knowledge, which of the following statements is true regarding the study setting: (1 mark)     |  |  |  | | --- | --- | --- | |  |  | A clinical setting | |  |  | A mix of clinical and naturalistic settings | |  |  | A naturalistic based setting | |  |  | None of the above | | | |
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| CAP Question 2 contd. *(excerpt repeated: same as in Q.2.3 above)*  (excerpt from methods)  The Pennsylvania Adult Smoking Study (PASS), a study of smoke exposure and nicotine dependence, was conducted in central Pennsylvania between June 2012 and April 2014. Study participants were recruited through local radio advertisements, through flyers posted in places smokers frequent (i.e., gas stations, convenience stores, and tobacco shops), and through the Internet and social media. Recruitment was also facilitated by word of mouth from past participants. Eligible subjects were aged 18 years or older, had smoked at least 1 cigarette per day for the past year, and were not currently pregnant. A total of 352 participants signed the consent form and enrolled in the study. One participant did not complete the study protocol. |  | Select ONLY ONE checkbox per page.  **Question 2.4 Based on the abstract, the adjoining extract and your other knowledge, please answer the following question.**  **Patients were included this study if they: (1 mark)**     |  |  |  | | --- | --- | --- | |  |  | **Lived in the USA and were adults and cigarette smokers** | |  |  | **Smoked at least 7 cigarettes per week and lived in Pennsylvania** | |  |  | **Smoked non-tobacco products and lived in Pennsylvania** | |  |  | **Smoked on a daily basis and lived in Pennsylvania** | |  |  | **Were aged 17 and over and lived in Pennsylvania** | |  |  | **Were being treated for anxiety** | | | |
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| CAP Question 2 contd.  (excerpt from the methods)  The SPA-M is a portable touch-screen enabled pre-calibrated device where a cigarette is placed into a mouthpiece, and flow and pressure changes are recorded using pressure sensors. The SPA-M is batteryoperated and can be recharged by the subject with a power cord. The readings were downloaded onto a desktop computer with software that calculates the puff flow (ml/s), the number of puffs, puff duration (s), the interval between puffs (s), and puff volume (ml) after each subject’s use. A counter that keeps track of each cigarette smoked is reset for the next subject. The devices can be used continuously from subject to subject, pending any mechanical malfunction. The derived variables, total daily puff volume and total daily number of puffs, were the summation of the total cigarette puffs within a 24-hour period. Puff flow parameters that were either beyond the physiological capabilities of the smoker or resulted from movement artifact were excluded, based on previously reported suggestions (Williams et al, 2012). |  | Select ONLY ONE checkbox per page.  Question 2.5 Based on the abstract above and your other knowledge, the SPA-M device does not measure: (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Aberrant flows | |  |  | Cigarettes per day | |  |  | Number of cigarettes smoked | |  |  | Quality of cigarette smoke | |  |  | Smoking topography | | | |
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| CAP Question 2 contd. (excerpts from the statistical analysis)  Participants' saliva samples were analyzed using mass spectrometry for nicotine metabolites (cotinine and 3′hydroxycotinine) as previously described (Chen et al, 2010; Krebs et al, 2016). The NMR (3′hydroxycotinine/cotinine) was derived from these measurements.  The characteristics of the sample were described using descriptive statistics, including means and standard deviations for continuous variables and frequencies and percentages for categorical variables. We determined the median NMR, where the sample was split into normal and slow metabolizers (NMR cut-off=0.359). Two-sample Wilcoxon-Mann-Whitney tests were used to look at the differences between the normal and slow metabolizers in relation to smokers’ characteristics. |  | Select ONLY ONE checkbox per page.  Question 2.6 Based on the adjoining extract and tables, the abstract and your other knowledge, the mean NMR is: (1 mark)     |  |  |  | | --- | --- | --- | |  |  | 0.46 | |  |  | 0.38 | |  |  | Highest in a black male | |  |  | Highest in a white female | |  |  | Highest in females of other race | |  |  | Lowest in a white male | | | |
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| CAP Question 2 contd. (excerpts from the statistical analysis)  *(excerpts and tables same as in Q.2.6)*  Participants' saliva samples were analyzed using mass spectrometry for nicotine metabolites (cotinine and 3′hydroxycotinine) as previously described (Chen et al, 2010; Krebs et al, 2016). The NMR (3′hydroxycotinine/cotinine) was derived from these measurements.  The characteristics of the sample were described using descriptive statistics, including means and standard deviations for continuous variables and frequencies and percentages for categorical variables. We determined the median NMR, where the sample was split into normal and slow metabolizers (NMR cut-off=0.359). Two-sample Wilcoxon-Mann-Whitney tests were used to look at the differences between the normal and slow metabolizers in relation to smokers’ characteristics. |  | Select ONLY ONE checkbox per page.  Question 2.7 Based on the adjoining extract and tables, the abstract and your other knowledge, the total number of participants was:  (1 mark)     |  |  |  | | --- | --- | --- | |  |  | 299 | |  |  | 326 | |  |  | 351 | |  |  | 352 | |  |  | 652 | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.8 |
| CAP Question 2 contd. |  | Select ONLY ONE checkbox per page.  Question 2.8 Based on your other knowledge, which of these is not a continuous variable? (1 mark)     |  |  |  | | --- | --- | --- | |  |  | Age | |  |  | BMI | |  |  | Female sex | |  |  | Nicotine metabolite ratio | |  |  | Number of cigarettes per day | |  |  | Puff duration | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.9 |
| CAP Question 2 contd. |  | Select ONLY ONE checkbox per page.  Question 2.9 Based on your other knowledge, which of the following assumptions must be met in an ANOVA: (2 marks)     |  |  |  | | --- | --- | --- | |  |  | All of these things | |  |  | Random sampling of cases must have taken place | |  |  | The data must be normally distributed | |  |  | The dependent variable must be interval or ratio | |  |  | There must be homogeneity of variance | |  |  | There must be only one dependent variable | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.10 |
| CAP Question 2 contd. |  | Select ONLY ONE checkbox per page.  Question 2.10 Based on your other knowledge, the p value represents: (2 marks)     |  |  |  | | --- | --- | --- | |  |  | The largest significance level at which the null hypothesis can be rejected | |  |  | The largest significance level at which the null hypothesis cannot be rejected | |  |  | The probability that errors have been made in rejecting or not rejecting the null hypothesis | |  |  | The smallest significance level at which the null hypothesis can be rejected | |  |  | The smallest significance level at which the null hypothesis cannot be rejected | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.11 |
| CAP Question 2 contd.  (excerpt from results) |  | Select ONLY ONE checkbox per page.  Question 2.11 Based on the adjoining table, the abstract and your other knowledge, choose the most accurate statement: (2 marks)   |  |  |  | | --- | --- | --- | |  |  | Age and sex have not been adjusted for in this table | |  |  | A p value of 0.0898 is statistically significant | |  |  | FTND and HONC while not displayed are likely to be higher in slow metabolisers | |  |  | Higher levels were found for total daily puffs in normal metabolisers | |  |  | Higher NMR was significantly associated with total daily puffs | |  |  | Lower NMR was significantly associated with total daily puff volume | |  |  | Normal metabolisers had significantly lower mean levels of cigarettes per day | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.12 |
| CAP Question 2 contd.  (excerpt from discussion)  Our findings seem to have internal consistency in that, while we showed an effect on CPD whereas several other studies have not, we also showed in our population an effect on topography and nicotine dependence. |  | Select ONLY ONE checkbox per page.  Question 2.12 Based on the adjoining excerpt and your other knowledge, in this study internal consistency means: (1 mark)     |  |  |  | | --- | --- | --- | |  |  | Highly correlated items can be removed | |  |  | The Cronbach’s alpha is likely to be high | |  |  | The items all measured different things | |  |  | The items all measured the same thing | |  |  | The measures used were valid | |  |  | The study consistently used good measures | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.13 |
| CAP Question 2 contd. |  | Select ONLY ONE checkbox per page.  Question 2.13 Based on the abstract, extracts and tables provided and your other knowledge, which of the following is not a likely limitation of the study: (2 marks)   |  |  |  | | --- | --- | --- | |  |  | Measuring saliva not blood levels of nicotine metabolites | |  |  | Not all information was gathered on factors that would impact on blood nicotine levels – e.g. oral contraceptives | |  |  | Participants may have smoked cigarettes not using the device | |  |  | Smokers would not find a simple topography device easy to use | |  |  | The use of the topography device may alter smoking behaviours | | | |
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| Flag box: (add exclamation mark if you want to review this question later) | | | | CAP 2.14 |
| CAP Question 2 contd. |  | Select ONLY ONE checkbox per page.  Question 2.14 Based on the abstract, extracts and tables provided and your other knowledge, which of the following statements is a conclusion of the study: (2 marks)     |  |  |  | | --- | --- | --- | |  |  | Cigarette puffing in a clinical setting does not differ from a naturalistic enviroment | |  |  | Individual differences in nicotine metabolism are associated with smoke exposure | |  |  | Low metabolisers are more dependent on nicotine | |  |  | NMR is associated with tobacco use behaviours | |  |  | Smokers do not smoke more intensively when under observation | |  |  | The biological dose of tobacco exposure is attributed only to  the frequency of smoking | | | |
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| That's the end of the Mock Exam.  If you have time, you can go back and review questions either by scrolling through the Word document in the usual way, or by using the flagging system as below.  You may have 'flagged' a question for later review by adding an ! to the 'Flag box' at top right.  You can now search for all the !s so as to review any questions you were unsure about, by hitting control-F to bring up the navigation field, then typing ! in that field. Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page. |
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