Kaplan USMLE Step 2 prep: 6 stumpers on middle-aged patients

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Over the years, the AMA has run dozens of example questions from Kaplan Medical. If you’re preparing for the United States Medical Licensing Examination® (USMLE®) Step 2 exam, you might want to know which questions are most often missed by test-prep takers. We’ve compiled six cases from Kaplan Medical involving middle-aged adult patients—those between 36 and 55 years old. Each question comes with an expert explanation of the answer. You can check out all posts in this series.

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Think you can answer these questions involving middle-aged adult patients? Find out now.

**Dyspnea, wheezing and cough**

A 40-year-old woman with a nine-year history of scleroderma comes to the physician because of shortness of breath and a dry cough for four months. She has had weakness, dyspnea with minimal exertion, arthralgias, and difficulty with swallowing. Her temperature is 36.8 °C (98.2 °F), blood pressure is 135/75 mm Hg, pulse is 112 beats per minute, and respirations are 26 per minute. What is the most appropriate next step in diagnosis?

**Unusual mole on upper back**
A 50-year-old man comes to the physician because of an unusual appearing mole on his upper back. He says that his wife has noted a recent change in its color and shape. The lesion measures 0.7 cm and has ill-defined margins and irregular pigmentation. The patient is otherwise healthy and takes no medication. Which of the following is the most appropriate next step in management?

**Man has severe perianal pain for five days**

A 59-year-old man comes to the physician because of severe perianal pain for the past five days. He has always been healthy and exercises three times a week. His regular diet consists mainly of fruits, vegetables, and fish. His temperature is 37 °C (98.6 °F). Physical examination shows a very tender, purple, thrombosed, external hemorrhoid. He has been trying sitz baths at home but gets only temporary relief. He needs to go on a business trip five days from now and wants to make sure that he is comfortable by then. What is the best course of action at this time?

**Woman has abdominal pain and gross ascites**

Over a two-month period, a 50-year-old woman with a history of polycythemia vera develops abdominal pain and gross ascites. Physical examination demonstrates smooth hepatomegaly and mild jaundice. Pressure applied over the liver fails to distend the jugular veins. The abdomen is grossly edematous, and the abdominal wall shows a tortuous venous pattern. Edema of the legs is prominent. What is the most likely diagnosis?

**Treating burning sensation in legs**

A 56-year-old woman comes to the physician because of a two-year history of a burning sensation in her legs. She has occasional sharp, lancinating pains that shoot up her legs, for which hydrocodone and acetaminophen provide some relief. She has had no
weakness, headaches, confusion or memory loss. She has a 22-year history of hypertension, chronic kidney disease and type 2 diabetes mellitus with retinopathy and diabetic gastroparesis. Current medications include insulin, metformin, lisinopril and hydrochlorothiazide. She had a myocardial infarction four years ago. Serum creatinine is 2.8 mg/dL and hemoglobin A1c level is 11.6%. What’s the most appropriate pharmacotherapy for this patient's leg pain?

**Barium enema reveals multiple polyps**

A 58-year-old woman comes to the physician for a follow-up examination two weeks after undergoing a barium enema. She denies fever, weight loss, rectal bleeding, or fatigue. She has a four-year history of hypertension controlled with hydrochlorothiazide. Examination shows no abnormalities. The barium enema shows four to five polyps scattered throughout her colon, ranging in size from 4 mm to 1.1 cm. Which of the following is the most appropriate next step in management?

For more prep questions on USMLE Steps 1, 2 and 3, view other posts in this series.