

Kaplan USMLE Step 1 Prep: Nausea, vomiting drive these 5 stumpers

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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 1 exam, you might want to know which questions are most often missed by test-prep takers. We've compiled five cases from Kaplan Medical where a major symptom was nausea or vomiting. Each question comes with an expert explanation of the answer. You can check out all posts in this series.

The AMA selected Kaplan as a preferred provider to support you in reaching your goal of passing the USMLE[®] or COMLEX-USA[®]. AMA members can save 30% on access to additional study resources, such as Kaplan's Qbank and High-yield courses. [Learn more.](#)

Think you can answer these questions where nausea or vomiting is a major symptom? Find out now.

Overseas traveler experiences weakness

A 31-year-old man comes to the physician because of a three-day history of generalized weakness and nausea. He returned from a trip to Africa a day ago. During his trip, he took an unknown antimalarial medication that was left over from a friend who had visited Africa the previous year. Weakness and nausea developed after taking these pills. Vital signs are within normal limits, and physical examination shows mild jaundice. Peripheral blood smear shows bite cells. What most likely decreased as a result of this patient's diagnosis?

Identifying cardiovascular status

A previously healthy 64-year-old woman is brought to the emergency department because

of substernal chest pain, nausea, diaphoresis, and fatigue. Her temperature is 37.1° C (98.8° F), pulse is 96 beats per minute, respirations are 18 a minute, and blood pressure is 138/92 mm Hg. A cardiac examination reveals an S₄ gallop but is otherwise unremarkable. Her lungs are clear. Her ECG shows a ST-segment elevation in the inferior chest leads (leads II, III and aVF). What best corresponds to this patient's cardiovascular status?

One week of headaches, nausea, vomiting

A 45-year-old man comes to the physician because of a one-week history of headaches, nausea and vomiting. He has a history of dilated cardiomyopathy and underwent a heart transplant one year ago. His temperature is 37.9° C (100.2° F), pulse is 110 beats per minute, respirations are 14 breaths a minute, and blood pressure is 160/112 mm Hg. He is alert, awake, and oriented and has no signs of meningeal irritation. Examination of the fundus shows bilateral papilledema. An MRI scan of the head is shown. What is most likely deficient in this patient?

Woman complains of abdominal pain, nausea

A 19-year-old woman comes to the clinic because of abdominal pain and nausea. Her last menstrual period began seven days ago. She admits to having unprotected sexual intercourse. Her temperature is 38.6 °C (101.5 °F). Physical examination shows lower abdominal tenderness. Pelvic examination shows a mucopurulent discharge, adnexal tenderness, and tenderness with cervical motion. A pregnancy test is negative and leukocyte count is 14,000 cells/mm³. What is most likely a complication of this disorder?

Which drug to blame for woman's symptoms?

A 33-year-old woman is brought to the physician because of profound nausea, vomiting, headache, sweating, tachycardia, blurred vision and dizziness. Her temperature is 37.8 °C (100 °F), pulse is 120 beats per minute, blood pressure is 104/66 mm Hg, and respirations are 19 per minute. She says that she was out with a couple of friends having a few glasses of wine when she suddenly became ill. A review of her records shows that she was diagnosed with a duodenal ulcer, and triple-therapy treatment was started three days ago. What drug is most likely responsible for this patient's symptoms?

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