

**2005 Internal Medicine**

**In-Training Examination<sup>®</sup>**

**Educational Objectives**

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## 2005 Internal Medicine In-Training Examination™

Content Area	Number of Items	Percentage of Total Items
Cardiology	45	13.5
Endocrinology	22	6.5
Gastroenterology	32	9.5
General Internal Medicine*	51	15
Geriatrics	22	6
Hematology/Oncology	40	11.5
Infectious Diseases	31	9
Nephrology	21	6
Neurology	16	4
Pulmonology/Critical Care Medicine	32	10
Rheumatology	28	9
<b>TOTAL</b>	<b>340</b>	<b>100</b>

*\*This content area includes, but is not limited to, adolescent medicine, allergy and immunology, complementary and alternative medicine, dermatology, ethics, genetics, literature interpretation, nutrition, ophthalmology, preventive care, psychiatry, sports medicine, statistics, and women's health.*

The following pages list examination item numbers and the corresponding educational objectives. The item numbers are grouped by content area. One educational objective is provided for each item.

Use this list with the Examinee Performance Report to identify the content area of each item.

## 2005 Internal Medicine In-Training Examination®

### Educational Objectives

#### Cardiology

<u>Item</u>	<u>Educational Objective</u>
A3	Recall the management of a patient with pulseless ventricular tachycardia.
A13	Recognize the clinical presentation of a patient with acquired prolonged QT syndrome, and recall the most appropriate treatment.
A21	Recall the management of an adolescent with an innocent cardiac murmur.
A27	Recognize the electrocardiographic findings associated with an acute myocardial infarction that warrant thrombolytic therapy.
A34	Recall the most effective therapy for a patient with cardiogenic shock.
A37	Recall the most appropriate management of atrioventricular nodal block in a patient with an acute inferior myocardial infarction.
A46	Recognize the electrocardiographic findings and clinical presentation of a patient with hypertensive crisis, and recall the most appropriate treatment.
A51	Recognize the clinical presentation of a patient with a ventricular septal defect.
A60	Recall the most appropriate treatment for a patient with an acute myocardial infarction and hypotension.
A71	Recognize the clinical presentation of a patient with a murmur of mitral stenosis.
A77	Recognize the clinical presentation of a patient with an acute myocardial infarction and ST-segment elevation, and recall the most appropriate treatment.

- A87 Recognize the clinical presentation and electrocardiographic findings of a patient with an atrial septal defect, and recall the hemodynamic consequences of the defect on cardiac anatomy.
- A101 Recall the relationship between the clinical presentation of ischemic disease and coronary anatomy.
- A109 Recall the most appropriate treatment for a patient with atrial fibrillation and symptoms of 1 week's duration.
- A117 Understand and apply the principles of estimating pretest and post-test probability in a patient undergoing exercise treadmill testing.
- A120 Recognize the clinical presentation of an adult with coarctation of the aorta, and recall the most appropriate management.
- A125 Recognize the electrocardiographic findings of multifocal atrial tachycardia in an acutely ill patient with chronic obstructive pulmonary disease, and recall the most appropriate treatment.
- A131 Recall the most appropriate management for a patient with syncope and a cardiac murmur.
- A139 Recall the most appropriate management of secondary causes of hypertriglyceridemia.
- A145 Recall the prognosis associated with various types of heart disease during pregnancy.
- A147 Interpret an electrocardiogram showing electrical alternans, and recognize the clinical features of cardiac tamponade.
- A157 Recognize the clinical presentation of a patient with variant angina pectoris (Prinzmetal's angina).
- A170 Recall the indications for direct-current cardioversion in a patient with atrial fibrillation.
- B2 Recall the normal cardiac physical examination findings in a pregnant patient.

- B12 Recognize the clinical presentation and diagnostic workup for a patient with neurocardiogenic syncope.
- B20 Recall the management strategy for stroke prevention in an elderly patient with atrial fibrillation.
- B28 Interpret an electrocardiogram showing wide QRS tachycardia, and recall which drugs are contraindicated in the treatment of this disorder.
- B40 Recognize the clinical presentation of a patient with post-myocardial infarction (Dressler's) syndrome, and recall the most appropriate treatment.
- B47 Recall the pathophysiologic findings associated with an acute myocardial infarction.
- B58 Recall the optimal initial pharmacotherapy for a patient with asymptomatic left ventricular systolic dysfunction.
- B61 Recognize the electrocardiographic findings in a patient with inflammatory pericarditis.
- B71 Recognize the clinical presentation of a patient with hyperlipidemia due to secondary causes, and recall the most appropriate therapy.
- B81 Recognize the clinical presentation of a patient with a ventricular septal rupture as a complication of myocardial infarction.
- B85 Recall the side effects associated with use of niacin.
- B95 Recall the optimal monotherapy for uncomplicated hypertension in an older black patient.
- B101 Recognize the electrocardiographic findings associated with hypokalemia.
- B106 Recall the auscultatory findings in a patient with mitral valve prolapse.
- B115 Recognize the clinical presentation of a patient with aortic dissection, and recall the most appropriate management.
- B119 Recognize the most common complications associated with an acute inferior myocardial infarction, and recall the most appropriate treatment.

- B127 Recognize the clinical presentation of a patient with left ventricular systolic dysfunction, and recall the most appropriate pharmacotherapy.
- B128 Recognize the clinical presentation and complications associated with bacterial endocarditis of the aortic valve.
- B134 Recognize the physical examination findings associated with severe systolic heart failure.
- B141 Recognize the clinical presentation of a patient with a right ventricular infarction, and recall the most appropriate initial treatment.
- B144 Recognize the clinical presentation of a patient with cholesterol emboli after angiography.
- B147 Recall the optimal treatment of a patient with symptomatic paroxysmal atrial fibrillation, cardiac disease, and left ventricular dysfunction.

### **Endocrinology**

- | <u>Item</u> | <u>Educational Objective</u>  |
|-------------|---|
| A15         | Recall the cause of a menstrual disorder in a long-distance runner.   |
| A23         | Recognize the clinical presentation of a patient with Paget's disease of bone.  |
| A62         | Recognize the presence of acute thyroiditis as a cause of transient subacute hyperthyroidism, and recall the most appropriate diagnostic studies. |
| A72         | Recall the most appropriate management for a patient with an incidental adrenal tumor.  |
| A73         | Recognize the clinical presentation of a patient with thyrotoxicosis factitia, and recall the most appropriate diagnostic studies.                |
| A84         | Recognize the clinical presentation and laboratory findings of a patient with euthyroid sick syndrome.  |
| A94         | Recall the most appropriate treatment for a patient with type 2 diabetes mellitus who is not responding to oral hypoglycemic agents.              |

- A115 Recall the sequence of diagnostic testing in a patient with Cushing's syndrome.
- A137 Recall the most appropriate management for a patient with erectile dysfunction and hyperprolactinemia.
- A140 Recognize the clinical presentation of a patient with polycystic ovary syndrome.
- A161 Recognize the clinical presentation of a patient with pheochromocytoma, and recall the most appropriate diagnostic studies.
- B1 Recall the most appropriate treatment for bone disease in a patient who requires chronic corticosteroid therapy.
- B10 Recognize the clinical presentation of a patient with hypoparathyroidism following thyroid surgery, and recall the most appropriate management.
- B21 Recognize the endocrine abnormalities that occur during early pregnancy.
- B30 Recognize Klinefelter's syndrome as a cause of gynecomastia and hypogonadism.
- B38 Recall that hyperprolactinemia is a major cause of secondary amenorrhea.
- B57 Recall the principles for use of oral hypoglycemic agents in a diabetic patient with difficult-to-control glucose values.
- B64 Determine the appropriate evaluation for a patient with previously unsuspected hypercalcemia.
- B76 Recall the role of fine-needle aspiration in the diagnosis of a solitary thyroid nodule.
- B96 Recognize the clinical presentation of a patient with hemorrhage into a thyroid adenoma.
- B130 Recall the most appropriate laboratory studies for the diagnosis of diabetes mellitus.
- B149 Recall the clinical presentation and screening tests for a patient with acromegaly.



## **Gastroenterology**

<u>Item</u>	<u>Educational Objective</u>
A5	Recognize the clinical presentation of a patient with biliary tract cancer (cholangiocarcinoma) involving the proximal bile duct.
A12	Recall the need to screen for Barrett's esophagus in a patient with gastroesophageal reflux disease.
A28	Recognize the radiographic appearance of chronic pancreatitis, and recall the complications of this disorder.
A38	Recall that a patient with an occult malignancy can have weight loss despite a good appetite.
A59	Recall that primary sclerosing cholangitis (PSC) is a complication of ulcerative colitis, and understand how to diagnose PSC.
A61	Interpret results of viral hepatitis serologic studies, and recall that alkaline phosphatase values may be elevated during normal pregnancy.
A68	Recall that gallstones are a risk factor for gallbladder cancer, and recognize the indications for cholecystectomy in a patient with asymptomatic cholelithiasis.
A69	Recognize the significance of a high serum albumin–ascites gradient and the associated clinical manifestations.
A78	Recall the most appropriate management for a patient with biliary pancreatitis.
A85	Recall the most appropriate management for a patient with major upper gastrointestinal bleeding.
A92	Recall that <i>Clostridium difficile</i> infection can be associated with bloody diarrhea.
A104	Recognize the clinical presentation and most appropriate diagnostic studies for a patient with carcinoid syndrome.

- A116 Recognize the clinical presentation of a patient with constipation-predominant irritable bowel syndrome, and recall the most appropriate pharmacotherapy.
- A130 Recall that colorectal cancer may occur in a young adult who does not have a positive fecal occult blood test or a family history of cancer.
- A148 Recognize the clinical presentation of a patient with ulcerative proctitis, and recall the most appropriate treatment.
- A162 Recognize the clinical presentation of a patient with a pill-induced esophageal ulcer.
- B7 Understand that being overweight is associated with fatty liver disease, and recall the pattern of elevated serum aminotransferase values in a patient with this disease.
- B13 Recognize that microscopic colitis can cause chronic watery diarrhea, and recall how to diagnose this condition.
- B22 Recognize the dermatologic manifestations and recall the diagnostic workup for a patient with celiac sprue.
- B32 Recall the most appropriate treatment for a patient with severe chronic ulcerative colitis and high-grade dysplasia.
- B43 Understand that genetic testing has replaced liver biopsy for diagnosing hemochromatosis in selected patients.
- B52 Recognize the skin findings of Osler-Weber-Rendu disease (hereditary hemorrhagic telangiectasia), and recall the relationship of these findings to gastrointestinal bleeding.
- B59 Recall the appropriate diagnostic studies for an asymptomatic person with the hepatitis B surface antigen carrier state.
- B65 Recall that the small bowel is often the site of occult gastrointestinal bleeding, and recognize the role of capsule endoscopy in diagnosing this disorder.

- B72 Recall that gastrointestinal stromal tumors have *c-kit* mutations and are susceptible to tyrosine kinase inhibitors.
- B82 Recognize the malignant potential of gastric ulcers and the need to confirm ulcer healing following treatment.
- B88 Recognize the clinical presentation and characteristic appearance of a patient with perianal Crohn's disease.
- B99 Recognize the clinical presentation of a patient with acute hepatitis, and recall the appropriate diagnostic studies.
- B102 Recall the recommendations for colon cancer screening in a patient with a hyperplastic colonic polyp.
- B109 Recognize the clinical presentation of hepatocellular carcinoma in a patient with cirrhosis, and recall the most appropriate therapy.
- B113 Recall the recommended screening for a patient with a family history of familial nonpolyposis colon cancer syndrome.
- B150 Recognize the clinical presentation of a rectovaginal fistula in a patient with Crohn's disease, and recall the most appropriate treatment.

**General Internal Medicine**

<u>Item</u>	<u>Educational Objective</u>
A1	Recognize the clinical presentation for a patient with Ménière's disease.
A4	Recall the criteria for the diagnosis of chronic fatigue syndrome.
A10	Recognize the clinical presentation and recall the diagnostic workup for a patient with carbon monoxide poisoning.
A14	Identify glaucoma as a cause of headache and loss of vision.
A16	Recall the most appropriate treatment of a patient with hyperthermia.
A22	Understand ethics and professionalism when dealing with utilization review.
A29	Recall that the single most important determinant of the size of a confidence interval is sample size (power).

- A33 Recognize the clinical presentation of a patient with myoclonus associated with vasovagal syncope, and recall the most appropriate management.
- A36 Recognize a normal physiologic vaginal discharge.
- A43 Recognize the clinical presentation of a patient with chronic venous insufficiency.
- A44 Recognize the need for hospitalization for a patient who requires posterior nasal packs for epistaxis.
- A50 Recognize the clinical presentation of a patient with schizophrenia.
- A54 Recognize the clinical presentation of a patient with Achilles tendinitis induced by fluoroquinolone antibiotics.
- A65 Recall the criteria for the diagnosis of brain death.
- A82 Recognize the clinical presentation of a patient with methanol ingestion, and recall the most appropriate treatment.
- A91 Recall the diagnostic workup for a patient with an abnormal Pap smear.
- A95 Recall the most appropriate diagnostic study for a patient with an isolated serum alkaline phosphatase elevation.
- A98 Recognize blood pressure elevation related to administration of nonsteroidal anti-inflammatory drugs.
- A103 Recognize the clinical presentation of a patient with an anaphylaxis/anaphylactoid reaction, and recall the most appropriate treatment.
- A113 Recall the least risky, most appropriate screening test for a patient with painless jaundice.
- A122 Recognize the serotonin syndrome, and recall the drug–drug interactions that can precipitate this syndrome.
- A127 Recall the most appropriate treatment for caustic agent injury to the eye.
- A133 Understand the patient's autonomy in decision making.

- A143 Understand the potential pulmonary complications of gastroesophageal reflux disease.
- A158 Recall the appropriate preventive measures for a young adult without recent health care.
- B29 Recognize shin splints as a common musculoskeletal complaint.
- B31 Understand the basics of clinical genetic disease transmission.
- B37 Recognize the clinical presentation and identify the characteristic skin lesions in a patient with pityriasis rosea.
- B118 Recognize how to interpret evidence-based terms (number needed to treat).
- B120 Recognize the clinical presentation of a patient with hypophosphatemia.
- B122 Recognize the clinical presentation of depression in an adolescent, and recall the most appropriate treatment.
- B123 Identify the characteristic skin lesions in a patient with erythema multiforme.
- B124 Recognize that the most appropriate medical care should be recommended, regardless of the patient's insurance coverage or ability to pay.
- B125 Recognize the clinical presentation of a patient with vitamin C deficiency (scurvy).
- B129 Recognize the clinical presentation and identify the characteristic skin lesions in a patient with *Sarcoptes scabiei* infection.
- B131 Recognize that surreptitious vomiting can present as chest pain in an adolescent athlete.
- B137 Recognize the dermatologic appearance of acanthosis nigricans in a patient with insulin resistance.
- B140 Recall the use of patient-controlled analgesia for severe pain as a palliative care measure.
- B143 Recognize the clinical presentation and recall the diagnostic workup for a patient with hereditary angioedema.
- B145 Recognize subconjunctival hemorrhage as a cause of "red eye."

- B146 Recall the most appropriate management of a male adolescent with gynecomastia.
- B154 Identify the characteristic skin lesions of a patient with *Candida albicans* infection.
- B155 Understand when hospice referral is indicated for a patient with end-stage lung disease.
- B158 Recall that a patient with multiple somatic complaints may be a victim of domestic abuse.
- B159 Recall the most appropriate treatment of a patient with atrophic vaginitis related to menopause.
- B161 Recognize pneumothorax as a complication of the hypermobility syndrome.
- B163 Recall the most appropriate treatment of a patient with an uncomplicated urinary tract infection who is taking other medications that may cause serious drug–drug interactions.
- B164 Recognize the clinical presentation of a patient with tension headache, and recall the most appropriate treatment.
- B165 Recognize the clinical presentation of a patient with compression of the lateral femoral cutaneous nerve.
- B167 Recognize the clinical presentation of a patient with acute herpes genitalis infection, and recall the most appropriate treatment.
- B168 Recognize the clinical presentation of a patient with moderate hypothermia, and recall the most appropriate management.

### **Geriatrics**

- | <u>Item</u> | <u>Educational Objective</u>   |
|-------------|--|
| A49         | Recognize the features of suspected mistreatment of an elderly patient, and recall the most appropriate intervention strategies. |
| A52         | Recognize the clinical presentation of a patient with urge urinary incontinence, and recall the most appropriate management.     |

- A75 Recognize the physical examination findings related to normal aging.
- A81 Recall the most appropriate management of a hip fracture in an elderly patient with cardiac disease.
- A90 Recall that *Ginkgo biloba* may be used as an alternative treatment for dementia.
- A102 Recall that presbycusis is the most common pattern of hearing loss in an elderly patient.
- A107 Recall the most appropriate management of a patient with an infected stage 3 necrotic pressure ulcer.
- A135 Recognize cervical spondylosis as a cause of gait instability.
- A149 Recall the prognosis for an elderly patient with chronic lymphocytic leukemia and its implications regarding therapy for an unrelated disorder.
- A155 Recall the most appropriate therapy for rotator cuff tear in an elderly patient.
- A168 Recognize the clinical presentation of an elderly patient with essential tremor, and recall the most appropriate treatment.
- B5 Recognize the clinical presentation and identify the characteristic skin lesions in a patient with seborrheic keratosis.
- B8 Recognize the contribution of poor sleep habits to sleep problems in an elderly patient.
- B27 Recognize the association of psychotropic medications, especially benzodiazepines, with the risk of falls in an elderly patient.
- B39 Recall that weight-bearing aerobic exercise is a useful modality to preserve bone density.
- B50 Recall the most appropriate management of constipation with fecal impaction in an elderly patient.
- B56 Recognize the clinical presentation of isolated systolic hypertension in an elderly patient, and recall the most appropriate treatment.

- B68 Recall the risks and benefits of feeding tube placement in an elderly patient with progressive dementia.
- B80 Recognize the clinical presentation and recall the diagnostic studies for an elderly patient with mesenteric ischemia.
- B93 Understand the responsibilities of a physician in counseling an older patient about driving.
- B107 Recall that cervical spine disease may be a cause of vertebrobasilar ischemic symptoms in an elderly patient.
- B139 Recognize the clinical presentation of a patient with Parkinson's disease, and recall the indications for beginning pharmacotherapy.

### **Hematology/Oncology**

<u>Item</u>	<u>Educational Objective</u>
A2	Recognize the clinical presentation of a patient with von Willebrand's disease.
A8	Recall that a patient treated for Hodgkin's disease is at risk for development of a second neoplasm.
A17	Recognize the clinical presentation of a patient with Waldenström's macroglobulinemia.
A24	Recognize the syndrome of inappropriate antidiuretic hormone secretion as a complication of metastatic cancer.
A32	Recall the most appropriate treatment for a patient with monoclonal gammopathy of unknown significance.
A41	Recognize serologic markers for germ cell neoplasms.
A48	Recall the guidelines for breast cancer screening.
A53	Recognize the clinical presentation and erythrocyte morphology in a patient with autoimmune hemolytic anemia.



- A58 Recognize the development of a factor VIII inhibitor in a patient with hemophilia A.
- A70 Recall the most appropriate treatment for thromboembolic disease in a patient with hyperhomocysteinemia.
- A83 Recognize the clinical presentation of a patient with disseminated intravascular coagulation.
- A88 Recall how to treat a warfarin overdose.
- A96 Recall the indications for placement of an inferior vena cava filter.
- A105 Recall that the presence of factor V Leiden is the most common cause of inherited thrombophilia.
- A112 Recall the importance of iron supplementation when instituting erythropoietin therapy.
- A124 Recognize the clinical presentation of drug-induced leukopenia in a patient taking propylthiouracil for treatment of hyperthyroidism.
- A144 Recognize the clinical presentation of a patient with thalassemia, and recall the usefulness of hemoglobin electrophoresis in diagnosing this disorder.
- A153 Recognize the clinical presentation of a patient with the hemolytic-uremic syndrome.
- A164 Recognize the clinical presentation and recall the diagnostic workup for a patient with glucose-6-phosphate dehydrogenase deficiency.
- A165 Recognize the clinical presentation of a patient with chronic myelogenous leukemia.
- B4 Recognize the presence of antiphospholipid antibodies as a cause of a hypercoagulable state.
- B11 Recognize disseminated intravascular coagulation as a consequence of acute promyelocytic leukemia.
- B19 Recognize pernicious anemia as a cause of pancytopenia.

- B35 Recognize the clinical presentation and recall diagnostic workup for a patient with suspected lymphoma.
- B46 Recognize the clinical presentation and blood smear findings in a patient with acute myelocytic leukemia.
- B55 Recall the most appropriate staging tests for lung cancer.
- B60 Identify the blood smear findings of microangiopathic anemia in a patient with a dysfunctional mechanical aortic valve.
- B69 Recall the most appropriate management of a patient with pseudothrombocytopenia.
- B75 Recall the most appropriate diagnostic test for a patient with suspected pancreatic cancer.
- B86 Recall the pathophysiology of anemia of chronic disease.
- B91 Recall the guidelines for detection of prostate cancer.
- B104 Recognize the clinical presentation and blood smear findings in a patient with thrombotic thrombocytopenic purpura, and recall the most appropriate initial treatment.
- B111 Recall the usefulness of serum ferritin measurement in diagnosing iron deficiency anemia.
- B132 Recognize lymphoma as a complication of HIV infection.
- B135 Recognize the clinical presentation and blood smear findings in a patient with hairy cell leukemia.
- B142 Recall that amyloidosis may be a cause of the nephrotic syndrome.
- B148 Recognize the clinical presentation of a patient with polycythemia vera, and recall the most appropriate diagnostic studies.
- B157 Recognize the clinical presentation of a patient with autoimmune (idiopathic) thrombocytopenic purpura, and recall the pathogenesis of this disorder.

B160 Recognize iron deficiency due to chronic gastrointestinal bleeding as a cause of secondary thrombocytosis.

B162 Recognize aplastic anemia as a cause of pancytopenia.

**Infectious Diseases**

Item

Educational Objective

- A9 Recall the most appropriate management of drug-induced pancreatitis in a patient with AIDS.
- A18 Recall that asymptomatic bacteriuria in a patient with an indwelling bladder catheter does not require treatment.
- A25 Recognize the clinical presentation of a patient with secondary syphilis.
- A40 Recognize the clinical presentation of a patient with herpes simplex virus meningoencephalitis, and recall the most appropriate treatment.
- A67 Recognize the clinical presentation of a patient with gas gangrene, and recall the most appropriate treatment.
- A74 Recognize the clinical presentation of a patient with staphylococcal toxic shock syndrome.
- A89 Recall that the treatment of a patient with botulism requires an antitoxin.
- A106 Recall the most appropriate management of a patient with a "booster effect" following tuberculin skin testing.
- A108 Recall the most appropriate treatment of a patient with pyelonephritis caused by enterococci.
- A134 Recognize the clinical presentation of malignant otitis externa in a patient with diabetes mellitus.
- A136 Recognize the clinical presentation and recall the diagnostic studies for a patient with disseminated gonococcal infection.
- A138 Recognize the clinical presentation of a patient with coccidioidomycosis.
- A150 Recognize the clinical presentation of an adult patient with pertussis.
- A160 Recall the prophylaxis for a patient with AIDS.

- A166 Recognize the risk for drug-resistant *Streptococcus pneumoniae* infection, and recall the most appropriate treatment.
- B9 Recognize the clinical presentation of a patient with neurosyphilis, and recall the most appropriate treatment.
- B18 Recall that pneumococcal sepsis is the most likely life-threatening bacterial infection in an asplenic patient.
- B25 Recall the most appropriate therapy for a patient with a central venous catheter who develops sepsis associated with a fungal infection.
- B36 Recall the reasons why influenza vaccine is given each year.
- B48 Recognize the clinical presentation of a patient with leptospirosis.
- B53 Recall the appropriate indications for home intravenous antibiotic therapy.
- B70 Recall the most common cause of bacterial sinusitis.
- B79 Recognize the clinical presentation and identify the characteristic skin lesions of a patient with meningococemia.
- B92 Recognize the clinical presentation of a patient with iatrogenic Creutzfeldt-Jakob disease.
- B97 Recognize the clinical presentation of leishmaniasis (Baghdad boil) in a soldier returning from Iraq.
- B103 Recall that activated protein C is indicated and beneficial for a patient with meningococemia that presents as severe sepsis.
- B112 Recognize the clinical presentation of a patient with acute epiglottitis, and recall the most appropriate management.
- B116 Recognize the clinical presentation and recall the diagnostic workup for a patient with common variable immunodeficiency.
- B121 Recall the indications for initiating therapy and/or prophylaxis in an HIV-positive patient.

B136 Recall the distribution of the nasociliary branch of cranial nerve V, and recognize that involvement of this nerve with varicella-zoster virus may predict eye involvement.

B153 Recognize the clinical presentation of a patient with rhinocerebral mucormycosis.

## **Nephrology**

<u>Item</u>	<u>Educational Objective</u>
A11	Recognize the clinical presentation of a patient with psychogenic polydipsia.
A30	Recall how to use the delta anion gap and delta serum bicarbonate to evaluate a patient with mixed metabolic acidosis.
A63	Recognize the clinical presentation of distal renal tubular acidosis in an adult patient with Sjögren's syndrome.
A80	Recognize the clinical presentation of a patient with renal cell carcinoma.
A86	Recall the most appropriate management for a patient with difficult-to-control hypertension.
A93	Recognize the clinical presentation and renal biopsy findings in a patient with membranous glomerulonephritis.
A111	Recognize the distinguishing characteristics of essential mixed cryoglobulinemia as a cause of the nephrotic syndrome.
A128	Determine the cause of metabolic alkalosis in a patient with hypokalemia.
A132	Recall the indications for parathyroidectomy in a patient with asymptomatic hypercalcemia.
A142	Recognize the clinical presentation and urinalysis results in a patient with rhabdomyolysis.
A154	Recognize hypomagnesemia as a cause of refractory hypocalcemia.
B15	Recognize the clinical presentation and urine sediment findings in a patient with post-infectious glomerulonephritis.
B34	Recognize the clinical presentation of a patient with IgA nephropathy.

- B44 Recognize the clinical presentation of a patient with Henoch-Schönlein purpura.
- B54 Recall how to calculate the anion gap in a patient with hypoalbuminemia.
- B66 Recognize the clinical presentation of a patient with possible atherosclerotic renal artery stenosis.
- B83 Recall the criteria for establishing the diagnosis of autosomal dominant polycystic kidney disease.
- B90 Recall the most appropriate diagnostic studies for hypertension in a young man.
- B110 Recognize the clinical presentation of cytomegalovirus infection in a renal transplant recipient, and recall the most appropriate treatment.
- B138 Recall the composition of renal calculi in a patient with chronic urinary tract infection.
- B169 Recognize the clinical presentation of a patient with indinavir-induced nephropathy.

## **Neurology**

- | <u>Item</u> | <u>Educational Objective</u>   |
|-------------|--|
| A26         | Recognize the clinical presentation of a patient with restless legs syndrome, and recall the most appropriate treatment.   |
| A39         | Recognize the clinical presentation of a patient with diabetic amyotrophy.   |
| A47         | Recognize the clinical presentation of a patient with a basilar artery stroke.   |
| A55         | Recall that valproic acid therapy can cause hyperammonemic encephalopathy resembling liver failure.  |
| A118        | Recognize the clinical presentation of a patient with multiple sclerosis, and recall which pharmacologic agent is most effective for reducing the frequency and severity of relapse. |
| A146        | Recognize the clinical presentation of a patient with giant cell (temporal) arteritis, and recall the most appropriate treatment.  |

- A152 Recognize the clinical presentation of a patient with spinal cord compression due to epidural metastases, and recall the most appropriate treatment.
- A167 Recognize the clinical presentation of a patient with trigeminal neuralgia, and recall the most appropriate management.
- B14 Recognize the clinical presentation of a patient with a frontal lobe meningioma.
- B24 Recall that Wilson's disease can cause a neurologic disturbance in a patient with abnormal liver tests.
- B49 Recognize the clinical presentation of a patient with motor neuron disease (amyotrophic lateral sclerosis).
- B63 Recognize the clinical presentation of a patient with migraine, and recall the most appropriate prophylactic pharmacotherapy.
- B77 Recall that Lyme disease is a common cause of Bell's palsy.
- B89 Recognize the clinical presentation of a patient with a cerebellar infarction, and distinguish this cause of vertigo from less serious causes.
- B114 Identify lumbar spinal stenosis as a cause of pseudoclaudication.
- B152 Recognize mononeuritis of cranial nerve III as a complication of type 2 diabetes mellitus.

**Pulmonology/Critical Care Medicine**

<u>Item</u>	<u>Educational Objective</u>
A6	Recall the most appropriate care of a patient with a central venous catheter.
A20	Recognize the clinical presentation of mesothelioma in a patient with asbestos exposure.
A31	Recall the most appropriate therapy for a patient with moderate persistent asthma.
A42	Recognize the clinical presentation and radiographic findings of a patient with a pleural effusion.

- A56 Recall how to treat latent tuberculosis infection in a health care worker.
- A64 Recall the effects of pulmonary rehabilitation for a patient with chronic obstructive pulmonary disease.
- A76 Recall the complications associated with ethambutol therapy.
- A79 Recall the most appropriate treatment for a patient with acute respiratory distress syndrome.
- A97 Recall which medications are most helpful in preventing recurrence of an asthmatic attack during pregnancy.
- A99 Recall the most appropriate sequencing of therapy for a patient with newly diagnosed tuberculosis and HIV infection.
- A110 Recall the importance of reviewing old chest radiographs in the assessment of a patient with a peripheral pulmonary nodule.
- A121 Recognize the clinical presentation of a patient with primary pulmonary hypertension.
- A123 Recall the physical examination findings in a patient with pulmonary consolidation.
- A126 Recognize the role of an increased intrapulmonary shunt as a cause of hypoxemia in a patient with pneumococcal pneumonia.
- A156 Recall the most appropriate diagnostic studies for a patient with suspected bronchiectasis.
- A163 Recall the radiographic features and histopathologic findings in a patient with usual interstitial pneumonitis (idiopathic pulmonary fibrosis).
- B3 Recall the most appropriate therapy for a patient with HIV infection and a positive tuberculin skin test.
- B17 Recall the most appropriate treatment of hypoxemia secondary to acute respiratory distress syndrome in a patient on mechanical ventilation.
- B23 Recognize the physiologic findings in a patient with interstitial lung disease.



- B33 Recognize the clinical findings in a patient with acquired methemoglobinemia.
- B41 Recall the most appropriate therapy for a patient with deep venous thrombosis.
- B51 Recognize the right of a patient to express his or her desire to forgo medical treatment by completing an advance directive.
- B62 Recognize the clinical presentation and recall the diagnostic workup for a patient with obstructive sleep apnea.
- B67 Recall the most appropriate management for a patient with exercise-induced arterial oxygen desaturation.
- B73 Recall the dietary recommendations for a patient with pulmonary cachexia syndrome.
- B84 Recognize the clinical presentation and radiographic findings in a patient with sarcoidosis.
- B87 Recall the most appropriate therapy for a patient with community-acquired pneumonia.
- B100 Recall the most appropriate treatment of a patient with poorly differentiated large-cell carcinoma of the lung.
- B105 Recognize the most common pathogen causing acute infectious bronchitis in a patient with chronic obstructive pulmonary disease.
- B108 Recognize the clinical presentation of a patient with the Eaton-Lambert syndrome and the association of this syndrome with small-cell lung cancer.
- B126 Recognize acute chest syndrome as a complication of sickle cell anemia.
- B151 Recognize the clinical presentation of a patient with Wegener's granulomatosis.

## **Rheumatology**

Item                      Educational Objective

- A7 Recall the autoantibodies associated with the CREST syndrome (limited scleroderma).
- A19 Recognize the characteristic features of a patient with scleroderma renal crisis, and recall the most appropriate management.
- A35 Recall the most appropriate diagnostic study for monitoring rheumatoid arthritis disease activity.
- A45 Recognize the clinical presentation of a patient with advanced osteoarthritis, and recall the indications for total joint replacement.
- A57 Recognize the clinical features of the shoulder–hand syndrome presenting as reflex sympathetic dystrophy.
- A66 Recognize the clinical presentation of a patient with drug-induced systemic lupus erythematosus.
- A100 Recall that a severe flare in a single joint of a patient with rheumatoid arthritis may indicate that the joint is septic.
- A114 Recognize the clinical presentation of a patient with symptomatic antiphospholipid antibody syndrome, and recall the most appropriate treatment.
- A119 Recognize the clinical presentation of a patient with dermatomyositis.
- A129 Recognize the clinical presentation of a patient with polymyalgia rheumatica, and recall the most appropriate treatment.
- A141 Recall the most appropriate monitoring for a patient taking hydroxychloroquine for treatment of a collagen vascular disease.
- A151 Recognize the clinical presentation of a patient with acute sarcoidosis, and recall the type of skin lesion that is most likely to develop.
- A159 Recognize the clinical presentation of a patient with acute gout.
- A169 Recognize the clinical presentation of a patient with anserine bursitis.
- B6 Recognize the association between anti-Ro/SS-A antibodies and neonatal lupus.

- B16 Recall that therapy for a septic joint requires repeated aspirations.
- B26 Recognize the clinical presentation of a patient with relapsing polychondritis, and identify the characteristic ear findings in this disorder.
- B42 Recall the most appropriate treatment of pseudogout in a patient with renal insufficiency.
- B45 Recognize mononeuritis multiplex as a complication of rheumatoid vasculitis.
- B74 Recognize findings of a pleural effusion in a patient with rheumatoid arthritis.
- B78 Recall that peripheral arthritis associated with inflammatory bowel disease responds to remission induction of the bowel process.
- B94 Recognize the clinical presentation of a patient with pulmonary hypertrophic osteoarthropathy.
- B98 Recognize the clinical presentation of a patient with reactive arthritis, and recall the association of this syndrome with sacroiliitis.
- B117 Recognize the clinical presentation and appearance of a patient with chronic ankylosing spondylitis.
- B133 Recognize the clinical presentation of a patient with osteoarthritis.
- B156 Recall how to differentiate iatrogenic corticosteroid-induced myopathy from polymyositis and which therapy is most appropriate.
- B166 Recognize the clinical presentation and appearance of a patient with progressive systemic sclerosis (scleroderma), and recall the associated autoantibody.
- B170 Recognize the clinical presentation of a patient with early rheumatoid arthritis, and recall that the rheumatoid factor assay is often negative at this stage.