

AMERICAN BOARD OF INTERNAL MEDICINE (ABIM) CERTIFICATION PRACTICE EXAM (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://abim.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	16

SAMPLE

Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

SAMPLE

- 1. What is the recommended screening method for lung cancer in individuals aged 55-80 with a specific smoking history?**
 - A. Annual low dose CT scan
 - B. Mammography
 - C. X-ray
 - D. MRI
- 2. What does a maximum inspiratory pressure of less than -30 cm H2O indicate in respiratory evaluation?**
 - A. Normal respiratory function
 - B. Possible need for ventilator support
 - C. Obstructive lung disease
 - D. Restrictive lung disease
- 3. What is the typical duration for antibiotic treatment for a dog bite to prevent infection?**
 - A. 1-3 days
 - B. 3-5 days
 - C. 5-7 days
 - D. 7-10 days
- 4. What is the primary condition resulting in pain and tenderness near the medial plantar heel surface?**
 - A. Achilles tendonitis
 - B. Plantar fasciitis
 - C. Heel spur syndrome
 - D. Foot fracture
- 5. What is the condition called when grief lasts for longer than 1 year?**
 - A. Adjustment disorder
 - B. Persistent complex bereavement disorder
 - C. Major depressive disorder
 - D. Prolonged grief disorder

- 6. What condition is treated by the use of carbonic anhydrase inhibitors?**
- A. Multiple sclerosis
 - B. Chronic migraines
 - C. Idiopathic intracranial hypertension
 - D. Pneumonia
- 7. Which of the following medications is used for immunosuppression in liver transplant recipients?**
- A. Azathioprine
 - B. Prednisone
 - C. Tacrolimus
 - D. Methotrexate
- 8. What is the recommended screening schedule for HPV testing in women aged 30 and older?**
- A. Every year
 - B. Every 2 years
 - C. Every 3 years
 - D. Every 5 years
- 9. Which of the following is an alternative first-line therapy for urate lowering in patients with a history of hypersensitivity to allopurinol?**
- A. Febuxostat
 - B. Probenecid
 - C. Rasburicase
 - D. Indomethacin
- 10. What medication should be initiated in patients with osteoarthritis if first-line therapy with acetaminophen does not provide adequate relief?**
- A. Aspirin
 - B. Opioids
 - C. An NSAID
 - D. Corticosteroids

Answers

SAMPLE

1. A
2. B
3. B
4. B
5. B
6. C
7. C
8. D
9. A
10. C

SAMPLE

Explanations

SAMPLE

1. What is the recommended screening method for lung cancer in individuals aged 55-80 with a specific smoking history?

A. Annual low dose CT scan

B. Mammography

C. X-ray

D. MRI

The recommended screening method for lung cancer in individuals aged 55-80 with a specific smoking history is an annual low-dose CT scan. This recommendation is based on evidence from large clinical trials that demonstrated the effectiveness of low-dose computed tomography in reducing lung cancer mortality among high-risk populations, particularly those with a significant history of cigarette smoking. Low-dose CT scans are particularly advantageous because they can detect lung nodules at an earlier stage than conventional imaging techniques, which can lead to timely interventions and potentially increase survival rates. The criteria for screening typically include individuals who have a smoking history equivalent to a minimum of 30 pack-years and who currently smoke or have quit within the last 15 years. Given these factors, the annual low-dose CT scan is considered the most effective method for early detection of lung cancer in this high-risk population. Other imaging methods listed, such as mammography, X-ray, and MRI, are not appropriate for lung cancer screening in this context. Mammography is specifically used for breast cancer screening, while standard chest X-rays have been shown to be less effective in detecting lung cancer compared to low-dose CT scans. MRI is not routinely used for lung cancer screening due to its higher cost and limited availability compared to CT scans. Thus, the annual

2. What does a maximum inspiratory pressure of less than -30 cm H₂O indicate in respiratory evaluation?

A. Normal respiratory function

B. Possible need for ventilator support

C. Obstructive lung disease

D. Restrictive lung disease

A maximum inspiratory pressure of less than -30 cm H₂O is indicative of respiratory muscle weakness or reduced inspiratory capacity. This measurement reflects the strength of the respiratory muscles and their ability to create negative pressure to draw air into the lungs. When this threshold is crossed, it often signals a significant impairment in the patient's ability to initiate and sustain adequate ventilation. In this context, a pressure reading lower than -30 cm H₂O suggests that the individual may not be able to breathe effectively on their own, potentially leading to respiratory failure if support is not provided. While it may suggest underlying conditions like neuromuscular disorders or significant restrictive lung disease, the primary implication of this finding is the need for mechanical assistance. Therefore, ventilator support may be necessary to facilitate adequate gas exchange and prevent respiratory complications. Normal respiratory function would typically show higher inspiratory pressure values, while obstructive lung disease would more commonly present with other findings related to airflow limitation rather than maximum inspiratory pressure. Restrictive lung disease may contribute to decreased inspiratory capacity but would need to be assessed alongside other parameters to define the overall respiratory function accurately.

3. What is the typical duration for antibiotic treatment for a dog bite to prevent infection?

- A. 1-3 days
- B. 3-5 days**
- C. 5-7 days
- D. 7-10 days

The recommended duration for antibiotic treatment following a dog bite to prevent infection typically ranges from 3 to 5 days. This timeline is generally sufficient, as most infections that could arise from a dog bite can be effectively controlled within this period, provided that the patient is appropriately evaluated, and the wound is managed properly. Shorter durations, such as 1-3 days, may not provide enough time for antibiotics to adequately prevent an infection. On the other hand, extending the treatment beyond 5 days to durations such as 7-10 days may be unnecessary in typical cases unless there are specific indications for a longer course, such as signs of an existing infection or immunocompromised status of the patient. In summary, 3 to 5 days balances the need for infection prevention and the management of antibiotic exposure.

4. What is the primary condition resulting in pain and tenderness near the medial plantar heel surface?

- A. Achilles tendonitis
- B. Plantar fasciitis**
- C. Heel spur syndrome
- D. Foot fracture

Plantar fasciitis is characterized by inflammation and irritation of the plantar fascia, which is a thick band of tissue that runs across the bottom of the foot. The primary symptom is pain and tenderness localized near the medial plantar heel surface, particularly noticeable with the first steps taken in the morning or after prolonged periods of sitting. This condition is often caused by repetitive strain, excessive stretching, or improper footwear, leading to micro-tears in the fascia. The pain typically worsens after activity and can be associated with changes in gait or foot mechanics. Understanding the nature of plantar fasciitis helps healthcare providers recommend effective treatment options, including stretching exercises, physical therapy, orthotics, and anti-inflammatory medications. While conditions like Achilles tendonitis and heel spur syndrome could also involve heel pain, they present with different symptoms and locations of tenderness. Foot fractures generally present with more acute, sharp pain and often feature swelling or bruising, which helps differentiate them from the more gradual onset associated with plantar fasciitis.

5. What is the condition called when grief lasts for longer than 1 year?

- A. Adjustment disorder
- B. Persistent complex bereavement disorder**
- C. Major depressive disorder
- D. Prolonged grief disorder

Persistent complex bereavement disorder is characterized by a significant and prolonged grief response that exceeds the typical timeframe for bereavement. In this condition, individuals experience intense yearning, emotional pain, or preoccupation with the deceased that persists for more than one year. This disorder is clinically important as it can lead to functional impairment and emotional distress that is distinct from the normal grief process. The diagnostic criteria emphasize symptoms that include difficulty accepting the death, persistent emotions of sadness or numbness, and the feeling of life being meaningless without the deceased. This framework highlights the impact of grief on daily living, making it a recognized mental health condition. Understanding persistent complex bereavement disorder is crucial for identifying those who may need therapeutic intervention to process their grief healthily.

6. What condition is treated by the use of carbonic anhydrase inhibitors?

- A. Multiple sclerosis
- B. Chronic migraines
- C. Idiopathic intracranial hypertension**
- D. Pneumonia

Carbonic anhydrase inhibitors are primarily used in the treatment of idiopathic intracranial hypertension (IIH), a condition characterized by increased pressure within the skull without an identifiable cause. These medications, such as acetazolamide, work by reducing the production of cerebrospinal fluid (CSF), thereby decreasing intracranial pressure. In IIH, the elevated pressure can lead to various neurological symptoms, including headaches and vision issues. By inhibiting the enzyme carbonic anhydrase, these drugs decrease the bicarbonate and fluid secretion in the choroid plexus, ultimately helping to relieve symptoms and prevent complications, such as vision loss. While the other conditions listed have specific treatments and management strategies, they are not typically treated with carbonic anhydrase inhibitors. For example, multiple sclerosis is managed with disease-modifying therapies; chronic migraines often require preventive medications, such as beta-blockers or antidepressants; and pneumonia is generally treated with antibiotics. Thus, the application of carbonic anhydrase inhibitors is specifically relevant and beneficial in the context of idiopathic intracranial hypertension.

7. Which of the following medications is used for immunosuppression in liver transplant recipients?

- A. Azathioprine
- B. Prednisone
- C. Tacrolimus**
- D. Methotrexate

Tacrolimus is a medication that is widely used for immunosuppression in liver transplant recipients. As a calcineurin inhibitor, it works by suppressing the immune response to prevent the body from rejecting the newly transplanted liver. After liver transplantation, it is crucial to maintain an effective level of immunosuppression to reduce the risk of acute rejection while allowing enough immune function to fight infections. Tacrolimus is often preferred due to its potent immunosuppressive effects and better side effect profile compared to other drugs. It predominantly inhibits T-cell activation and proliferation, which plays a central role in the body's rejection response. In clinical practice, tacrolimus is frequently used in combination with other immunosuppressants such as steroids to enhance the overall effectiveness of the immunosuppressive regimen. While azathioprine and prednisone are also used in managing transplant patients, azathioprine is not commonly a first-line agent anymore due to its side effects and the emergence of more effective therapies. Prednisone is typically used as a part of an induction or maintenance regimen but is not the primary immunosuppressive agent on its own. Methotrexate is generally used for certain autoimmune conditions and specific malignancies rather than as a standard immun

8. What is the recommended screening schedule for HPV testing in women aged 30 and older?

- A. Every year
- B. Every 2 years
- C. Every 3 years
- D. Every 5 years**

The recommended screening schedule for HPV testing in women aged 30 and older is every 5 years. This recommendation is based on guidelines from major health organizations that advocate for cervical cancer screening strategies that prioritize both effectiveness and patient comfort. In this age group, it is effective to screen for HPV alone, which is a strong indicator of cervical cancer risk. When combined with Pap testing, co-testing can be done every 5 years, allowing for less frequent testing while still effectively monitoring for potential cervical changes that could lead to cancer. The interval of 5 years correlates with a balance of maintaining adequate screening to catch potential issues early while reducing the frequency of tests, aligning with the understanding that the risk of cervical cancer is lower in this demographic compared to younger women. This approach helps to enhance patient adherence to screening recommendations since it reduces the burden of annual or biennial visits that might deter women from regular health check-ups.

9. Which of the following is an alternative first-line therapy for urate lowering in patients with a history of hypersensitivity to allopurinol?

A. Febuxostat

B. Probenecid

C. Rasburicase

D. Indomethacin

Febuxostat is indeed an alternative first-line therapy for urate lowering in patients who have a history of hypersensitivity to allopurinol. Allopurinol works by inhibiting the enzyme xanthine oxidase, which plays a crucial role in the production of uric acid. When a patient has a hypersensitivity reaction to allopurinol, it is essential to find a safe alternative that can also effectively reduce uric acid levels. Febuxostat is another xanthine oxidase inhibitor but has a different chemical structure than allopurinol. This difference makes it less likely for patients with a history of allopurinol hypersensitivity to react adversely to febuxostat. Additionally, studies have shown that febuxostat is effective for managing hyperuricemia and can be used in the long term. While probenecid, rasburicase, and indomethacin are options that can also be utilized in the management of gout or hyperuricemia, they are generally not considered first-line alternatives specifically for those with allopurinol hypersensitivity. Probenecid works by increasing uric acid excretion in the kidneys, which may not be suitable for all patients, particularly those with renal impairment.

10. What medication should be initiated in patients with osteoarthritis if first-line therapy with acetaminophen does not provide adequate relief?

A. Aspirin

B. Opioids

C. An NSAID

D. Corticosteroids

In the management of osteoarthritis, if acetaminophen does not provide sufficient pain relief, the next step typically involves initiating a nonsteroidal anti-inflammatory drug (NSAID). NSAIDs are specifically effective in treating osteoarthritis-related pain and inflammation due to their ability to inhibit cyclooxygenase (COX) enzymes, which play a crucial role in the inflammatory process. Their usage aligns with clinical guidelines, as they have a well-established efficacy profile for osteoarthritis pain management. Options like opioids can also be used in cases of inadequate relief, but they come with a higher risk of side effects and dependency, making them less favorable as a first choice when NSAIDs are available and effective. Corticosteroids may be considered for severe inflammation or acute exacerbations but are not typically first-line treatments for chronic pain management associated with osteoarthritis. Thus, initiating an NSAID after acetaminophen provides insufficient relief is supported by the clinical evidence and guidelines focusing on optimizing patient management while minimizing risks associated with more potent medications.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://abim.examzify.com>

We wish you the very best on your exam journey. You've got this!

SAMPLE