

# USMLE STEP 2 CK HIGH-YIELD PRACTICE TEST (SAMPLE)

## STUDY GUIDE



## SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

<https://usmlestep2ckhighyield.examzify.com>



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# 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

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- 1. What therapy may be used to alleviate symptoms during SVT if vagal maneuvers are unsuccessful?**
  - A. Adenosine
  - B. Calcium channel blockers
  - C. Digoxin
  - D. Beta-blockers
- 2. What are some common side effects associated with corticosteroids?**
  - A. Hypoglycemia and insomnia
  - B. Acute mania and osteoporosis
  - C. Respiratory depression and bradycardia
  - D. Nausea and vomiting
- 3. How is prevalence defined in epidemiological studies?**
  - A. The percentage of new cases of disease
  - B. The total number of cases over time
  - C. The percentage of cases in a population at a specific time
  - D. The mortality rate of a disease
- 4. What does the presence of Auer rods on a blood smear indicate?**
  - A. Acute lymphoblastic leukemia
  - B. Acute myelogenous leukemia
  - C. Chronic myelogenous leukemia
  - D. Chronic lymphocytic leukemia
- 5. What is the most common form of glomerulonephritis?**
  - A. Igp nephropathy
  - B. Minimal change disease
  - C. Post-infectious glomerulonephritis
  - D. IgA nephropathy
- 6. During an epidemic, which would you expect to rapidly increase?**
  - A. Prevalence
  - B. Incidence
  - C. Mortality rate
  - D. Recovery rate

- 7. Which type of acute renal failure is indicated by a fractional excretion of sodium (FENa) less than 1%?**
- A. Postrenal
  - B. Intrarenal
  - C. Prerenal
  - D. Functional
- 8. Which head trauma finding typically involves immediate loss of consciousness followed by a lucid interval?**
- A. Subdural hematoma
  - B. Epidural hematoma
  - C. Contusion
  - D. Cerebral concussion
- 9. Which parasite is known to cause cysts in raw pork and skeletal muscle?**
- A. Taenia solium
  - B. Trichinella spiralis
  - C. Fasciola hepatica
  - D. Giardia lamblia
- 10. What error can lead to misdiagnosis in patients with signs of urethral injury?**
- A. Ruling out an injury without imaging
  - B. Ignoring blood in the urethral meatus
  - C. Failure to perform a cystourethrogram
  - D. All of the above

## **Answers**

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

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## **Explanations**

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**1. What therapy may be used to alleviate symptoms during SVT if vagal maneuvers are unsuccessful?**

- A. Adenosine**
- B. Calcium channel blockers
- C. Digoxin
- D. Beta-blockers

Adenosine is an effective first-line therapy for the acute management of supraventricular tachycardia (SVT) when vagal maneuvers have failed. It works by temporarily blocking atrioventricular (AV) node conduction, which can interrupt the reentrant circuit commonly responsible for SVT. This blockade can restore normal sinus rhythm almost immediately. Administered via rapid IV push, adenosine is particularly useful in cases of paroxysmal SVT, and is preferred due to its rapid onset and short duration of action, allowing for quick assessment of its efficacy without prolonged effects. This property is advantageous in emergency settings where immediate rhythm control is required. Other therapies, such as calcium channel blockers, digoxin, and beta-blockers, may also play a role in the management of SVT, particularly in chronic settings or for rate control. However, they are typically not used as the first-line treatment in acute situations where immediate rhythm stabilization is necessary.

**2. What are some common side effects associated with corticosteroids?**

- A. Hypoglycemia and insomnia
- B. Acute mania and osteoporosis**
- C. Respiratory depression and bradycardia
- D. Nausea and vomiting

Corticosteroids are widely used for their anti-inflammatory and immunosuppressive properties, but they come with a range of potential side effects due to their effects on various physiological systems. The correct answer highlights acute mania and osteoporosis as common side effects, both of which are well-documented in the literature. Acute mania can occur in susceptible individuals, particularly those with a history of mood disorders, following corticosteroid treatment. This is thought to be related to corticosteroids' influence on mood-regulating neurotransmitters in the brain. Osteoporosis is another significant concern when using corticosteroids, especially with long-term treatment. Corticosteroids lead to decreased bone formation and increased bone resorption, ultimately reducing bone density and increasing the risk of fractures. Patients on chronic corticosteroid therapy are often monitored for bone health and may require treatments like bisphosphonates to mitigate these risks. In contrast, the first option mentions hypoglycemia, which is generally not associated with corticosteroid usage; instead, corticosteroids tend to raise blood glucose levels. Insomnia is a potential side effect, but it does not carry the same level of risk or significance as the other mentioned conditions. The third option, respiratory depression and bradycardia, are generally not

### 3. How is prevalence defined in epidemiological studies?

- A. The percentage of new cases of disease
- B. The total number of cases over time
- C. The percentage of cases in a population at a specific time**
- D. The mortality rate of a disease

*Prevalence is defined as the proportion of individuals in a population who have a particular disease at a specific point in time. This measure includes all existing cases, both new and pre-existing, and provides insight into how widespread a disease is within a population at a certain moment. Understanding prevalence is crucial for public health as it can help in resource allocation, planning, and assessing the burden of disease in the community. It provides a snapshot of the health status of a population, allowing for effective health management strategies and interventions. In contrast, definitions of new cases (incidence), total cases over time, or mortality rates focus on different aspects of disease dynamics and do not accurately describe what prevalence measures.*

### 4. What does the presence of Auer rods on a blood smear indicate?

- A. Acute lymphoblastic leukemia
- B. Acute myelogenous leukemia**
- C. Chronic myelogenous leukemia
- D. Chronic lymphocytic leukemia

*The presence of Auer rods on a blood smear is a significant finding that provides important diagnostic information. Auer rods are needle-shaped cytoplasmic inclusions seen in myeloid cells, and their presence is specifically associated with acute myelogenous leukemia (AML). In the context of AML, Auer rods indicate the myeloid differentiation of the leukemic cells, which is a hallmark feature of this type of leukemia. Their identification can assist in distinguishing AML from other types of leukemia, especially acute lymphoblastic leukemia (ALL), where Auer rods are not seen. In contrast, chronic myelogenous leukemia (CML) and chronic lymphocytic leukemia (CLL) are characterized by different cell types and do not exhibit Auer rods. Recognizing Auer rods is particularly relevant in clinical practice, as their presence can impact treatment decisions and prognosis for patients diagnosed with acute myeloid leukemia. Thus, the association of Auer rods with AML makes this finding crucial for accurate diagnosis and management.*

### 5. What is the most common form of glomerulonephritis?

- A. Igp nephropathy
- B. Minimal change disease
- C. Post-infectious glomerulonephritis
- D. IgA nephropathy**

*The most common form of glomerulonephritis is IgA nephropathy, also known as Berger's disease. This condition is characterized by the deposition of IgA antibodies in the mesangial regions of the glomeruli, leading to inflammation and damage. It predominantly affects young males and often presents with hematuria, proteinuria, and sometimes hypertension. It is frequently associated with upper respiratory tract infections, which can trigger or exacerbate symptoms. IgA nephropathy is significant due to its prevalence; it is one of the leading causes of glomerulonephritis worldwide and can progress to chronic kidney disease in some patients, making awareness and management important in clinical practice. This condition is differentiated from others by its specific pathophysiology and clinical presentation. Understanding the typical patient demographics and symptomatology can help in recognizing IgA nephropathy early in the clinical setting.*

**6. During an epidemic, which would you expect to rapidly increase?**

- A. Prevalence
- B. Incidence**
- C. Mortality rate
- D. Recovery rate

*During an epidemic, the incidence of a disease refers to the number of new cases occurring in a specific population over a defined period of time. When an epidemic is underway, there is typically a sudden increase in the transmission of the infectious agent, which leads to a swift rise in the number of individuals who become newly infected. Therefore, the incidence rate will rapidly increase as a direct consequence of the heightened spread of the disease. In contrast, prevalence, which measures the total number of cases (both new and existing) within a population at a given time, may not increase as rapidly since it includes both new infections and those already existing in the population. While mortality rate and recovery rate can also change during an epidemic, their changes are usually reflective of the effects of the epidemic rather than indicators of the epidemic's rapid escalation. Understanding this distinction is crucial because it allows public health officials to determine how widespread a disease is becoming and to implement appropriate control measures in response to the epidemic.*

**7. Which type of acute renal failure is indicated by a fractional excretion of sodium (FENa) less than 1%?**

- A. Postrenal
- B. Intrarenal
- C. Prerenal**
- D. Functional

*A fractional excretion of sodium (FENa) less than 1% is indicative of prerenal acute kidney injury (AKI). This condition typically occurs when there is insufficient blood flow to the kidneys, leading to a decreased glomerular filtration rate. In response to low perfusion, the kidneys conserve sodium to maintain circulatory volume, resulting in a low FENa. In prerenal AKI, the kidneys are functioning properly, but they are not receiving adequate blood flow due to various reasons such as dehydration, heart failure, or septic shock. The body's regulatory mechanisms continue to function, focusing on sodium retention to increase intravascular volume and improve renal perfusion. FENa values above 2% would suggest intrarenal causes, as injured renal tubules are unable to appropriately reabsorb sodium. Postrenal causes involve obstruction of urine flow, which may not be directly reflected in FENa until significant renal impairment has occurred. Functional AKI generally refers to conditions like acute tubular necrosis due to medications but isn't specifically represented by a low FENa in this context.*

**8. Which head trauma finding typically involves immediate loss of consciousness followed by a lucid interval?**

- A. Subdural hematoma
- B. Epidural hematoma**
- C. Contusion
- D. Cerebral concussion

*The finding that typically involves immediate loss of consciousness followed by a lucid interval is characteristic of an epidural hematoma. In this condition, a collection of blood occurs between the dura mater and the skull, often due to a fracture of the temporal bone that tears the middle meningeal artery. Initially, after the trauma, the person may lose consciousness due to the rapid rise in intracranial pressure from the accumulating blood. This period of unconsciousness is often followed by a lucid interval, where the patient may appear fine and regain consciousness for a short time. However, as the hematoma expands, the intracranial pressure increases again, leading to a rapid deterioration in the patient's condition. Recognizing the classic presentation of an epidural hematoma is crucial, as these patients require prompt medical intervention, such as surgical evacuation of the hematoma, to prevent severe complications or death.*

**9. Which parasite is known to cause cysts in raw pork and skeletal muscle?**

- A. Taenia solium
- B. Trichinella spiralis**
- C. Fasciola hepatica
- D. Giardia lamblia

*The parasite responsible for causing cysts in raw pork and the skeletal muscle is Trichinella spiralis. This nematode is the causative agent of trichinosis, a disease that occurs when humans consume undercooked or raw meat containing encysted larvae, particularly from pigs. Once ingested, the larvae are released in the intestines, mature, and reproduce. The newborn larvae then invade the host's skeletal muscle, where they form cysts. The formation of these cysts is significant as they can lead to various symptoms, including gastrointestinal issues, muscle pain, and other systemic manifestations. The lifecycle of Trichinella spiralis highlights the importance of proper cooking of pork to prevent infection. While other parasites may affect animal muscle or be found in various hosts, Trichinella's specific association with cyst formation in skeletal muscle after consumption of raw or undercooked pork is a hallmark of this infection.*

**10. What error can lead to misdiagnosis in patients with signs of urethral injury?**

- A. Ruling out an injury without imaging
- B. Ignoring blood in the urethral meatus
- C. Failure to perform a cystourethrogram
- D. All of the above**

*Misdiagnosis in patients with signs of urethral injury can occur due to several critical oversights in management. Ruling out an injury without imaging can lead to a significant risk of missing an actual injury. Imaging techniques such as a retrograde urethrogram (RUG) are essential in detecting the presence of injuries, especially when clinical signs suggest that there may be damage to the urethra. Ignoring blood in the urethral meatus is another mistake that can directly contribute to misdiagnosis. The presence of blood in this region is a classic sign of potential urethral injury, and failing to assess this can lead to an underestimation of the injury's seriousness, missing the need for appropriate imaging or intervention. Failure to perform a cystourethrogram further exacerbates the risk of misdiagnosis. This imaging study is instrumental in evaluating trauma to the urethra. Without it, clinicians may miss serious injuries, which can lead to complications such as extravasation of urine, stricture formation, or even complete disruption of the urethra. These factors highlight the importance of a thorough evaluation, including appropriate imaging studies, in patients suspected of having a urethral injury. Therefore, the comprehensive nature of these errors*

## 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](mailto:hello@examzify.com).

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

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

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