

Administration
Medicines Management

Q1| A 3 year old requires ibuprofen for pain. He weighs 12kg. The dose of ibuprofen he is allowed to take is 30mg/kg daily. The formulation of ibuprofen is an oral suspension of 100mg/5ml. His mother wants to know exactly how much suspension she should be dispensing - What is the **SINGLE CORRECT** option?

- A 10mls TDS B 8mls TDS C 6mls TDS D 5mls TDS E 4mls TDS

Q2| Medicines Management

For each symbol in the BNF select the **MOST APPROPRIATE** option.

1. Yellow Card Scheme 2.  3.  4.  5.  6. 

- A Newly licensed medicines under intensive MHRA monitoring
B For use in serious suspected adverse drug reactions
C Medication which would need to be prescribed privately
D Medication which would only be available on prescription
E A schedule 2 drug
F Medication considered to be less suitable for prescribing

Q3| Schizophrenia: A 30 year old woman with schizophrenia is to commence olanzapine 20mg.

With regards to monitoring, which **ONE** of the following statements is **INCORRECT**?

- A BP and pulse needed during dose titration and at each dose change
B fasting glucose needed before commencing
C HbA1c needed before commencing D lipid levels needed before commencing
E prolactin levels needed before commencing F weight weekly for first 6w
G baseline ECG recommended H waist circumference every 6/12

Q4| Methotrexate: A 29 year old female patient on methotrexate (MTX) for Rheumatoid Arthritis has had her dose increased from 10mg to 12.5mg weekly. She has been diagnosed with a UTI.

Which **THREE** of the following statements are **INCORRECT**?

- A FBC, Renal, LFT : taken every 2w until 6w after last MTX dose increase
B Platelet < 140, Neutrophil <1.6, ALT >100, Albumin < 30 should prompt urgent review with rheumatology team
C Avoid conception for at least 3 months after stopping MTX
D Trimethoprim 1st line as an antibiotic for UTI
E Annual flu and pneumococcal vaccines safe to use
F Folic acid can be used on the same day to minimise MTX toxic effects
G The dose of MTX is best given as 5x2.5mg tablets rather than 10mg+2.5mg tablets

Q5| Antibiotic Stewardship

For each self limiting infection, select the **MOST** appropriate average duration of illness.

Each option can be used **ONCE, MORE THAN ONE OR NOT AT ALL**:

- A 2 days B 3 days C 4 days D 7 days E 10 days F 14 days G 17 days H 21 days

1. Acute sore throat/acute pharyngitis/acute tonsillitis
2. Acute otitis media
3. Acute rhinosinusitis
4. Common cold
5. Acute cough/acute bronchitis

Practice Management| Contracts | Benefits

Q6| NHS Prescription Exemption

Which **ONE** of the following conditions qualifies for prescription exemption?

- | | | | | | |
|----------|----------------------|----------|---------------------|----------|---------------------------------------|
| A | Rheumatoid Arthritis | B | Graves Disease | C | Cushings Disease |
| D | Addisons Disease | E | Hyperparathyroidism | F | Prostate cancer - No active treatment |

Q7| Which of the following items do NOT contribute to the income of a GP practice?

Select **ONE** option only

- A** Directed Enhanced Services
- B** Quality and outcomes framework (QOF)
- C** Home visits to registered patients
- D** Local Enhanced Services
- E** Global sum

Q8 | The practice nurse at your surgery has recently complained to the practice manager that she is not being given an adequate rest break period whilst at work. She works part-time for three days per week, during the hours 09.30–16.30. According to working time regulations, she is entitled to which **ONE** of the following breaks during her working day?

Select **ONE** option only.

- A** 30 minutes
- B** 20 minutes
- C** 45 minutes
- D** 10 minutes
- E** Not legally entitled to a break

Q9 | Parental leave

Which **ONE** of the following statements is **TRUE** regarding entitlement to parental leave for employees?

- A** Foster parents have rights to parental leave
- B** Each parent can take a total of up to 6 weeks' parental leave for each child up to their 5th birthday
- C** The child must be less than 16 years old
- D** To qualify, the parent must have at least two years continuous service where they work
- E** Statutory parental leave is unpaid

Q10| Benefits

- A** DS1500 **B** ESA113 **C** SC1 **D** SC2 **E** Private Certificate **F** Mat B1 **G** Med 3 **H** Med 10
I Attendance Allowance

For each scenario select the **MOST APPROPRIATE** option.

1. 12/40 pregnant lady off work for 3 days due to vomiting. She is employed as a teacher. She is unfit for work on examination but wants to return to work in 2 days.
2. A patient you saw with back pain has been off work for 7 days. 2 days later he requests a cert to cover his absence for the last 2 days.
3. A patient off sick for 13wks. He has asked to attend the 'work capability test'.
4. 70y with disability| illness requiring supervision for personal care
5. A patient on sick leave for 2m with a bad back. He wants to try a graded return back to work.
6. 55 year-old man with metastatic lung cancer and given approximately 6m to live.

Q11 | Which THREE of the following statements are FALSE regarding Carer's allowance?

- A** The carer must live with the ill or disabled person
- B** The carer must spend at least 35 hours per week caring for the ill or disabled person
- C** The carer must be over 18 years old
- D** The carer is entitled to claim if the ill or disabled person is in receipt of either attendance allowance or disability living allowance
- E** Entitlement is affected by the carer's personal savings
- F** Entitlement is affected by the carer's personal earnings

Practice Management | Health | Safety | Access

Q12| Occupational Immunisations : a receptionist is due to start work in your GP practice, which **TWO** of the following immunizations are required to be up to date before commencing work?

- | | | | | | | | |
|----------|-----------|----------|--------------|----------|-------------|----------|-------|
| A | BCG | B | DTP | C | Hepatitis B | D | MMR |
| E | Influenza | F | Meningitis C | G | Varicella | H | Covid |

Q13| Reportable Occupational Diseases

With regards reportable diseases and occupation, which **TWO** of the following are considered to be linked with occupational exposure:

- A** Frozen Shoulder
- B** Trigger Finger
- C** Carpal Tunnel Syndrome
- D** Mechanical Back Pain
- E** De Quervain Tenosynovitis
- F** Psoriasis
- G** Allergic Rhinitis

Q14 | A discharge summary was received in a practice, but the prescriptions on the practice computer were not changed. An out-of-hours doctor had to sort out the problem and the patient complained

Which of the following options is the SINGLE MOST appropriate next step?

- A** No action required
- B** A significant event analysis
- C** A critical incident analysis
- D** A practice meeting
- E** A conventional audit

Q15| Complaints - A patient wishes to make a complaint against your practice.

Which **TWO** of the following statements are **INCORRECT**?

- A** complaint should be made within 12 months of the event
- B** complaint must be made in writing
- C** complaint must be acknowledged in 3 working days
- D** acknowledgment of a complaint can be made verbally
- E** the nationally agreed time frame to investigate & respond to a complaint is 10 working days
- F** in the acknowledgment the practice must offer a discussion with the patient

Q16 | Patient removal

Under which of the following circumstances can a patient be removed from the practice list?

Select **ONE** option only:

- A** The patient is an asylum seeker
- B** The patient has had a disagreement with the practice manager
- C** The patient's current address cannot be confirmed following a PCSE request
- D** The patient moves out of the area for a period of two months
- E** The patient has repeatedly missed appointments at the practice

Q17| Access to Medical Services

A patient works in the office opposite your surgery. She lives in the next town but wants to register with your practice. Your practice is in England. Which of the following is **SINGLE MOST** applicable to her registration?

- A** The patient cannot register with you as your practice is not signed up to the out-of- area directed enhanced service
- B** The patient can register but should be informed at registration about the arrangements in place for her care should she be too ill to attend your surgery
- C** The patient should be told to ask for dual registration with your practice and a practice close to her home
- D** The patient is still entitled to home visits if she registers as an out of area patient
- E** The patient cannot register with you as she lives outside your practice area

Q18 : Access to GP medical services for overseas visitors

With regards access to medical services for overseas visitors, which **THREE** of the following statements are **INCORRECT?**

- A a visitor may register as temporary resident if they will be in the area for more than 24 hours and less than 6/12
- B a visitor is entitled to free of charge treatment by the GP if deemed immediately necessary
- C a practice is required by law to offer free of charge, 14 days of medical cover for any visitor who has been provided with emergency treatment by the GP
- D past or present payment of taxes or NI contributions is taken into account when establishing eligibility for overseas visitors to receive free NHS treatment
- E registration with a GP does not give automatic entitlement to access free NHS hospital treatment if referred to hospital by the GP
- F asylum seekers and refugees are entitled to access both primary and secondary care without charge
- G in applying to register with a practice there is a legal requirement to provide identity or immigration status

Q19: Access to Medical Records

Which **THREE** of the following are **INCORRECT** about medical records and their access in GP?

- A They are legal property of that individual.
- B Practice may charge for copies of both paper and computer records.
- C Patients may view a copy of an insurance medical report up to six months after it's has been written.
- D A practice has up to 40 days to respond to a patient's request to access their medical records.
- E Children are allowed to access their medical records if deemed competent.
- F Access to medical records by patients can be refused.
- G Maternity records are retained 25 years after last live birth
- H Patient records are kept for a maximum of 10 years after a patient dies

Q20: Access to Medical Records

You have been asked to complete an insurance report for a 45 year old patient who has consented to the release of his information. He has PMHx of Chlamydia, diagnosed 10 years ago following a routine STI screen. This was treated successfully and there have been no issues since. He has been tested for HIV and Hepatitis B on 3 occasions over the last 10 years. He is negative for HIV, but 3 years ago tested positive for Hepatitis B.

Which **ONE** of the following statements is **CORRECT?**

- A It is good medical practice when writing the report to reveal the previous medical history of Chlamydia
- B It is routine practice for insurance companies to ask applicants as to whether any previous HIV tests have been negative
- C You should document the negative HIV results in the insurance report
- D The insurance company can request that the applicant undergoes further testing for HIV and Hepatitis B
- E You should not document the positive Hepatitis B result.

Practice Management| End of Life Care

Q21| Advance Directive

A 70 yr old man with congestive cardiac failure wants to draw up an advance refusal of treatment (ADRT).

Which of the **TWO** following statements about ADRT are **INCORRECT?**

- A can only be made while the patient has capacity
- B becomes invalid if the circumstances change and are different from those set out in the ADRT
- C an eccentric or unwise decision implies lack of capacity
- D becomes invalid if a LPA is subsequently appointed to make treatment decisions
- E must always be in writing

Q22 | Advance Directive

A 59-year-old woman had an invasive ductal carcinoma in the left breast which was excised nine months ago. She has written an advance care plan that, in the event of developing liver metastases, she would want a liver transplant. She has clear capacity and the advance care plan was independently witnessed before being registered with her solicitor.

Which is the **SINGLE MOST** appropriate response to this request?

- A Accept her decision as she had full capacity when she made it
- B Advise her that she needs to find a doctor who would also advocate this treatment in advance
- C Ask her to appoint an attorney to help ensure her request is complied with
- D Refer her to a transplant surgeon to discuss this in more detail
- E Explain that doctors would consider her request at the appropriate time

Q23 | Palliative Care:

A 78 year old man with terminal lung cancer is on MST Continus 30mg bd and over the last 2 weeks has required regular breakthrough oxycodone 5mg bd. He has also developed gastric stasis and nausea and is having difficulty swallowing his tablets. He will be commenced on a syringe driver.

Which **ONE** of the following combination of medications would be **MOST** appropriate?

- | | |
|--|--|
| A diamorphine 25mg with haloperidol | B diamorphine 30mg with haloperidol |
| C diamorphine 25mg with metoclopramide | D diamorphine 45mg with metoclopramide |
| E diamorphine 15mg with cyclizine | F diamorphine 45mg with cyclizine |

Q24 | Death Certification

A patient at your practice with terminal cancer dies at home as an expected death. The family would like a cremation. Which of the **THREE** following statements about his M CCD | Crem Form are CORRECT?

- A the attending doctor saw the patient 5 weeks ago can issue the M CCD if the body is not viewed after death
- B in Scotland there has never been a requirement to see the patient alive before signing the M CCD
- C the attending doctor signing M CCD can view the body of the deceased over video for verification
- D the original copy of the M CCD should be given to the next of kin
- E Cremation form 4 will still be required

Q25| You visit the family of a 59-year-old man who has died. He was terminally ill with HIV.

His wife Requests that HIV is not recorded on his death certificate.

What is the **SINGLE MOST** appropriate action here?

- A Weigh up the pros and cons of having HIV written on the death certificate and make a unilateral decision
- B Decline his wife's request and explain that if HIV is contributing to the cause of death it must be written on the death certificate
- C Discuss the request directly with the patient's relatives and accept their decision
- D Decline the request and refer to another GP
- E Accept his wife's request and omit HIV from the death certificate

Practice Management | GMC

Ethical Scenario

Q26| A husband asks you for the results of his wife's mid-luteal progesterone level, done as part of infertility investigations. He tells you that this will save her the inconvenience of taking time off work to come in for the results in person. You explain that you are unable to give him this information without her explicit written consent.

In reaching this decision, which **ONE** of the following is the ethical principle to which you are giving the highest priority?

- A Non-maleficence
- B Beneficence
- C Justice
- D Maleficence
- E Autonomy

Q27 | You are called to visit a 35-year-old man who has a chronic alcohol dependency. He is acutely unwell, drowsy, has ascites and a palpable liver edge. You suspect he has fulminant alcoholic hepatitis and recommend admission. He does not appear to understand nor retain your explanation of the likely diagnosis and seriousness of his condition.

According to GMC advice, in this setting, which would be the SINGLE MOST appropriate management?

- A Arrange emergency admission without his consent, in his best interests
- B Ask the patient if there is anything that would help him remember information or make it easier to make a decision
- C Encourage his relatives to persuade him to accept admission
- D Contact the duty psychiatrist to make an urgent mental health assessment
- E Discuss treatment options in a place and at a time when the patient is best able to understand and retain the information

Q28 | A 61-year-old man has motor neurone disease and has become acutely unwell with a suspected aspiration pneumonia. His level of consciousness is reduced and he does not have capacity. His two daughters are both registered as joint attorneys but are in disagreement about whether admission for intravenous antibiotics is in his best interests.

Who is the SINGLE MOST appropriate decision-maker in this emergency situation?

- A His registered GP
- B The Court of Protection
- C His elder daughter
- D His solicitor
- E The independent mental capacity advocate

Q29| Parental Responsibility

The father of a 3 year old girl rings the GP and dissents to the routine pre-school immunisation of his daughter. He is now divorced from her mother who has consented to the immunisation. Both parents have their name on the child's birth certificate. Which is the **MOST** appropriate action?

- A Administer the vaccination as mother has parental responsibility
- B Abide by the father's request as he has parental responsibility
- C Administer the vaccination as it is in the best interest of the child
- D Immediately seek legal advice
- E Explain to parents that vaccination will not be administered until parents agree or until a court order is issued

Q30: Fitness to Drive

- A refusal or revocation
- B no driving license restrictions
- C 1 week off driving
- D 1 month off driving
- E 6 months off driving
- F 12 months off driving
- G cease driving & no need to notify DVLA
- H permanently barred

Match each of the scenarios with the MOST appropriate action:

1. A 50 year old man has an episode of unstable angina requiring an emergency angioplasty. This has been successful.
2. A 24 year old woman with a solitary of unexplained syncope. Investigations are unremarkable and she is well.
3. A 55 year old taxi driver who has a TIA. He has made a full recovery.
4. A 30 year old who has a witnessed fit following excess alcohol. No PMHx epilepsy.
Seen by specialist- investigation normal.
5. A 57 year old bus driver who has had a prophylactic ICD inserted.
6. A 19 year old patient with colour blindness.
7. A 67 year old with a history of heart failure. He is more SOB recently and had palpitations.
8. A 50 year old diabetic on gliclazide with 1 episode of hypoglycaemia 13 months ago. Under regular GP review.

Q31 : Fitness to Fly - For each of the following situations, please match the single **MOST** appropriate option.

A 1 day B 2 days C 5 days D 7 days E 10 days F 14 days G unfit to fly H fit to fly
Please advise each of the following patients on the minimum time limitation advised before they are deemed fit to fly:

- | | |
|--|---------------------------------|
| 1. CABG | 2. Post MI – no complications |
| 3. An ankle fracture in a cast: long haul flight | 4. Post simple cataract surgery |
| 5. Anaemia : Hb ≥ 8 | 6. Treated pneumothorax |
| 7. Twin pregnancy at 33 weeks | |

Quick Fire Rounds

1. List 5 drugs which are associated with a prolonged Q-T interval
2. List 4 drugs with significant interactions with statins
3. List 5 drugs with significant teratogenic potential
4. Antidepressants in the elderly | Safest ? | SRRI Interactions?
5. Which vaccines | immunizations should be avoided in those primary or acquired immunodeficiency?
6. List 5 situations where confidentiality can be broken without patient consent