MULTIPLE CHOICE

AB THYROID AND PARATHYROID - PRACTICE SET - ANSWER KEY

PROPOSED FOR REVIEW - questions are the author's verbatim Q&A; distractors are auto-selected from other answers in the same bank and must be checked by a subject-matter reviewer (a distractor could coincidentally be correct). Not authoritative assessment content.

1. Which term describes an underactive thyroid gland?

A. Hyperthyroidism
B. Hypothyroidism
C. Euthyroidism
D. Hypoparathyroidism

2. What is the sonographic appearance of primary thyroid lymphoma?

A. A hyperechoic mass with abundant internal vascularity.
B. A markedly hypoechoic, lobulated, and characteristically hypovascular mass.
C. An anechoic mass with posterior enhancement and thin walls.
D. A small isoechoic nodule with a thin peripheral halo.

3. Which statement best describes primary hyperparathyroidism?

A. Oversecretion of parathyroid hormone, usually from a single parathyroid adenoma
B. Decreased PTH secretion from autoimmune destruction of the glands
C. A pituitary disorder that overproduces PTH
D. Parathyroid hyperplasia caused by chronic renal failure

4. Which condition can be caused by low dietary iodine, an inability of the thyroid to produce adequate hormone, or a pituitary problem?

A. Hyperparathyroidism
B. Hypothyroidism
C. Thyrotoxicosis
D. Hyperthyroidism

5. Which wedge-shaped muscle is located posterior to the thyroid lobes along the anterior surface of the cervical vertebrae?

A. Longus colli muscle
B. Omohyoid muscle
C. Scalenus anterior muscle
D. Sternocleidomastoid muscle

6. True or False? The risk of malignancy in any given thyroid nodule decreases as the number of nodules in the gland increases.

A. False. Malignancy risk is greater when many nodules are present than when there is a single nodule.
B. True. The risk of malignancy in a given nodule is lower in a multinodular gland than in a solitary nodule.

7. What is the typical clinical presentation of a thyroid cyst?

A. Painful tender mass with overlying skin erythema.
B. A palpable solitary or multiple nodules in the neck, often asymptomatic.
C. Hard, fixed mass with vocal cord paralysis.
D. Diffuse painless enlargement in a young woman with hypothyroidism.

8. Are thyroid adenomas typically slow-growing or fast-growing?

A. Fast-growing.
B. Slow-growing.

9. What are the sonographic findings of a toxic multinodular goiter?

A. Solitary hypoechoic mass with a thick irregular halo.
B. Small atrophic gland with fibrous replacement.
C. Enlarged, inhomogeneous gland with focal scarring, areas of ischemia, and necrosis or cyst formation as the disease progresses.
D. Diffusely homogeneous gland with normal vascularity.

10. How many primary arteries supply blood to the thyroid gland?

A. Two (one superior and one inferior thyroid artery)
B. Four (two superior thyroid arteries and two inferior thyroid arteries)
C. Three (one superior thyroid artery and two inferior thyroid arteries)
D. Six (three superior and three inferior thyroid arteries)

11. What is a goiter?

A. Focal or diffuse enlargement of the thyroid gland, with or without multiple nodules
B. A congenital midline cyst anterior to the trachea
C. A benign encapsulated tumor of a single thyroid lobe
D. Inflammation of the thyroid caused by viral infection

12. True or False? A solitary thyroid nodule with ipsilateral cervical lymphadenopathy is suggestive of a benign process.

A. False. A solitary thyroid nodule with ipsilateral cervical lymphadenopathy is highly suggestive of malignancy.
B. True. A solitary thyroid nodule with ipsilateral cervical lymphadenopathy is suggestive of a benign process.

13. Relative to the thyroid gland, the strap muscles lie in which position?

A. Medial to the thyroid, between it and the trachea
B. Lateral to the thyroid, between it and the carotid sheath
C. Posterior to the thyroid
D. Anterior to the thyroid

14. What is another name for a thyroid storm?

A. Acute suppurative thyroiditis.
B. Thyrotoxic crisis.
C. Myxedema coma.
D. Thyroid inferno.

15. What is the classic clinical presentation of Hashimoto thyroiditis?

A. Painless, diffusely enlarged thyroid gland in a young to middle-aged woman.
B. Painful tender gland in a young woman with recent viral illness.
C. Solitary hot nodule with hyperthyroidism in an older woman.
D. Hard, fixed neck mass with hoarseness in an elderly man.

16. Which pituitary hormone stimulates the thyroid gland to secrete thyroxine (T4) and triiodothyronine (T3)?

A. Calcitonin
B. Parathyroid hormone (PTH)
C. Thyrotropin releasing hormone (TRH)
D. Thyroid stimulating hormone (TSH)

17. Which of the following best describes the clinical signs of hyperthyroidism?

A. Increased appetite, weight loss, nervousness, excessive sweating, tremor, palpitations, exophthalmos, and heat intolerance.
B. Hypocalcemia, tetany, and Chvostek sign.
C. Painless neck mass with cervical lymphadenopathy.
D. Weight gain, cold intolerance, lethargy, and bradycardia.

18. Which structure produces thyrotropin releasing hormone (TRH)?

A. Pineal gland
B. Hypothalamus
C. Anterior pituitary
D. Thyroid gland

19. How many parathyroid glands do most individuals possess?

A. Six
B. Two

C. Four
D. Eight

20. Which autoimmune disorder produces diffuse toxic goiter, hyperthyroidism, and exophthalmos?

A. Hashimoto thyroiditis
B. Graves disease
C. de Quervain thyroiditis
D. Toxic multinodular goiter

21. What is the most common cause of thyroid disorders worldwide?

A. Lithium use.
B. Iodine deficiency.
C. Radiation exposure.
D. Autoimmune thyroiditis.

22. When does primary hyperparathyroidism occur?

A. When the parathyroid glands fail to produce sufficient PTH due to autoimmune destruction.
B. When chronic renal failure leads to compensatory PTH elevation.
C. When pituitary failure decreases TSH secretion.
D. When excessive parathyroid hormone is produced by a parathyroid adenoma, primary hyperplasia, or, rarely, parathyroid carcinoma.

23. Which rare, highly aggressive, undifferentiated thyroid carcinoma typically occurs in patients older than 60 years and has a 5-year mortality of 90% to 95%?

A. Anaplastic carcinoma
B. Papillary carcinoma
C. Follicular carcinoma
D. Medullary carcinoma

24. Which group of muscles is collectively known as the 'strap muscles' of the anterior neck?

A. Sternohyoid, sternothyroid, and omohyoid
B. Mylohyoid, geniohyoid, and stylohyoid
C. Sternocleidomastoid, platysma, and digastric
D. Longus colli, longus capitis, and scalene

25. What is the medical term for inflammation of the thyroid gland?

A. Thyromegaly
B. Thyroidectomy
C. Thyrotoxicosis
D. Thyroiditis