

### QUESTION

1. A 65-year-old male patient with a long history of hypertension and a recent diagnosis of type 2 diabetes mellitus is being treated with lisinopril and metformin. He has been experiencing increasing fatigue and weakness over the past few weeks. His blood pressure is well-controlled, and his blood glucose levels are stable. Physical examination reveals mild anemia and no other significant findings. Laboratory tests show a hemoglobin level of 11 g/dL, a hematocrit of 33%, and a ferritin level of 100 ng/mL. The patient's renal function is normal. What is the most likely cause of his symptoms?

- A. Iron deficiency anemia
- B. Vitamin B12 deficiency
- C. Folate deficiency
- D. Chronic kidney disease
- E. Hemolytic anemia

ANSWER: A

EXPLANATION: The patient's symptoms of fatigue and weakness, along with the laboratory findings of mild anemia and a normal ferritin level, are most consistent with iron deficiency anemia. The patient's blood pressure is well-controlled, and his blood glucose levels are stable, making chronic kidney disease and hemolytic anemia unlikely. The patient's ferritin level is within the normal range, which is not consistent with iron deficiency anemia. The patient's symptoms are not consistent with vitamin B12 or folate deficiency.

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The diagram shows a human hand with the skeletal structure of the fingers. The middle finger is highlighted in red, and the ring finger is highlighted in blue. The proximal interphalangeal (PIP) joint is the joint between the proximal and middle phalanges of the middle finger.

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