

QUESTION

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 at 130/80 mmHg. Laboratory tests show a hemoglobin level of 10 g/dL, a hematocrit of 30%, and a ferritin level of 100 ng/mL. The patient's diet is generally healthy but he has been eating less recently due to his symptoms. What is the most likely cause of his anemia?

- 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 and laboratory findings are consistent with iron deficiency anemia. The low hemoglobin and hematocrit levels, along with the low ferritin level, indicate a deficiency of iron. The patient's diet and symptoms suggest that he may not be getting enough iron from his food.

QUESTION

A 45-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 at 130/80 mmHg. Laboratory tests show a hemoglobin level of 10 g/dL, a hematocrit of 30%, and a ferritin level of 100 ng/mL. The patient's diet is generally healthy but he has been eating less recently due to his symptoms. What is the most likely cause of his anemia?

- 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 and laboratory findings are consistent with iron deficiency anemia. The low hemoglobin and hematocrit levels, along with the low ferritin level, indicate a deficiency of iron. The patient's diet and symptoms suggest that he may not be getting enough iron from his food.