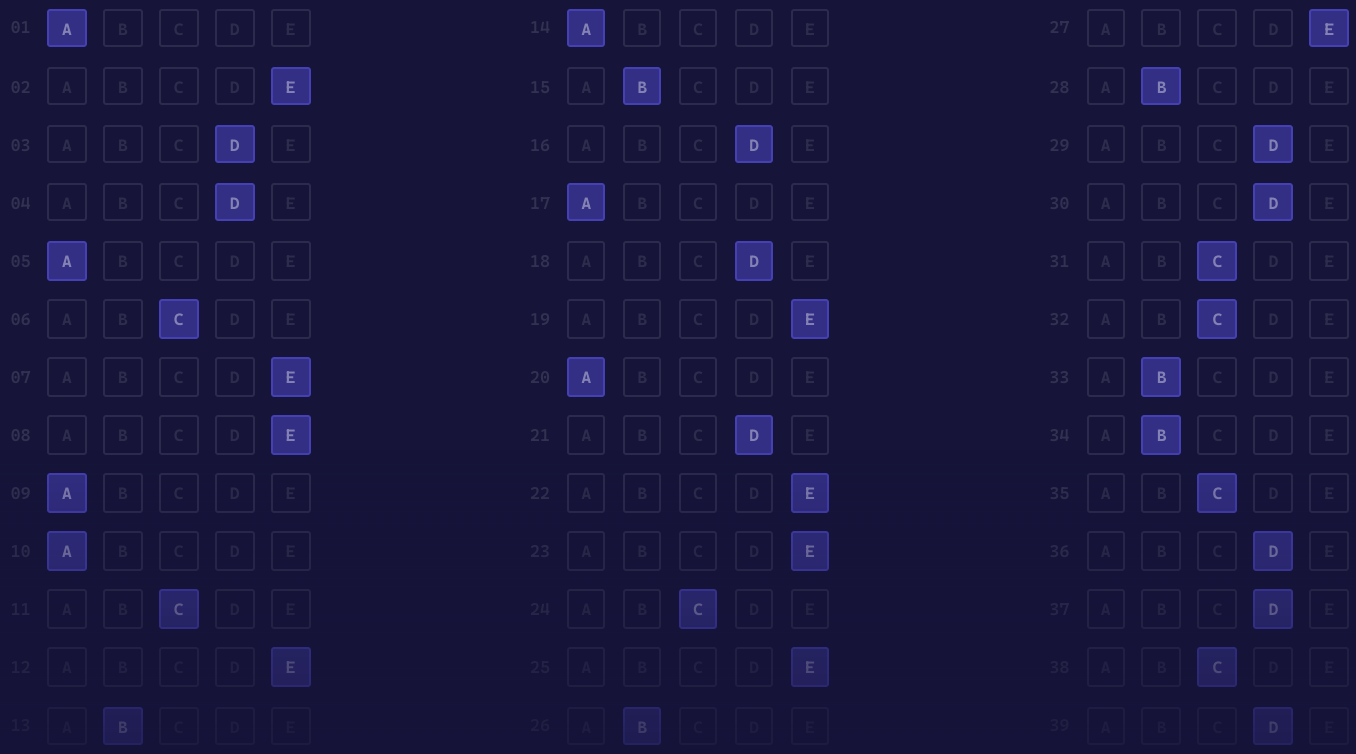
MOMETRIX
SMARTER PREP. BETTER RESULTS.



PRACTICE QUESTIONS

American College of Veterinary Internal Medicine (ACVIM)

GENLA

LAIM General Exam

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

WEB www.mometrix.net

SUPPORT support@mometrix.net

Before you begin

What this is

9 practice questions for American College of Veterinary Internal Medicine (ACVIM) `GENLA`, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, `GENLA`
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

mometrix.net

QUESTION 1 SINGLE CHOICE

A 12-year-old Quarter Horse gelding presents with signs of acute colic. On rectal examination, a tightly distended, tubular structure is palpable in the left dorsal abdomen coursing from the left caudal abdomen toward the diaphragm. Which segment of the gastrointestinal tract is most likely involved?

A **Pelvic flexure of the large colon**

B Small colon

C Descending duodenum

D Cecum (base)

ANSWER **A**

WHY A tightly distended, tubular structure palpable in the left dorsal abdomen, oriented from the left caudal abdomen toward the diaphragm, is the classic description of a large colon impaction at the pelvic flexure. The small colon is more commonly felt as a tubular structure containing fecal balls, the descending duodenum lies more to the right, and the cecal base is palpable in the right dorsal abdomen.

QUESTION 2 SINGLE CHOICE

Which of the following findings is most consistent with a diagnosis of strangulating small intestinal obstruction (e.g., volvulus) in a horse?

A **Reflux of >2 L of yellow-tinged fluid on nasogastric intubation and severe, continuous pain unresponsive to analgesia**

B Large volume of soft, watery feces and mild, intermittent abdominal pain

C Gas distention of the cecum palpable per rectum and a prolonged capillary refill time

D Mild signs of abdominal discomfort that resolve within 30 minutes of walking

ANSWER **A**

WHY Small intestinal strangulating obstruction is characterized by sequestration of fluid into the small intestine lumen, leading to gastric reflux on nasogastric intubation, severe continuous pain unresponsive to flunixin or xylazine, and rapid cardiovascular deterioration. The other options describe findings more consistent with non-strangulating large intestinal disease (large colon impaction/tympany) or transient spasmodic colic.

QUESTION 3 SINGLE CHOICE

Which statement best describes the pathophysiology of equine laminitis?

A **Disruption of the dermal-epidermal lamellae of the distal phalanx with failure of the suspensory apparatus of the distal phalanx**

B Primary inflammation of the digital flexor tendon sheath with effusion

C Degeneration of articular cartilage in the distal interphalangeal joint with osteophyte formation

D Necrosis of the deep digital flexor tendon at its insertion on the distal phalanx

ANSWER **A**

WHY Laminitis is defined pathologically as disruption of the lamellar epithelial cells and basement membrane of the distal phalanx, leading to mechanical failure of the suspensory apparatus and rotation or sinking of the distal phalanx within the hoof capsule. The other choices describe unrelated conditions (tenosynovitis, distal interphalangeal osteoarthritis, and deep digital flexor tendon insertional injury).

QUESTION 4 SINGLE CHOICE

An 8-year-old stabled horse presents with a chronic cough, increased expiratory effort, and a 'heave line' along the costal arch. Bronchoalveolar lavage shows >25% non-degenerate neutrophils with no bacteria seen on cytology. Which is the most likely diagnosis?

A **Recurrent airway obstruction (RAO, heaves)**

B Inflammatory airway disease (IAD) with mastocytosis

C Bacterial pneumonia

D Pulmonary fibrosis

ANSWER **A**

WHY RAO (heaves) is characterized by neutrophilic lower airway inflammation (>25% non-degenerate neutrophils on BAL) in an adult horse with environmental exposure to hay/dust, leading to bronchoconstriction and a heave line from chronic abdominal effort on expiration. IAD typically affects younger horses and is defined by lower cell counts or mastocytosis. Bacterial pneumonia would have intracellular bacteria and clinical signs of systemic illness.

QUESTION 5 SINGLE CHOICE

On auscultation of a 5-year-old Standardbred, a grade 4/6 holosystolic murmur is heard loudest at the left heart base. Which valve is most commonly associated with a holosystolic murmur at the left heart base in horses?

A **Mitral valve**

B Aortic valve

C Tricuspid valve

D Pulmonic valve

ANSWER **A**

WHY Holosystolic murmurs at the left heart base/apex in horses are most commonly associated with mitral valve regurgitation. Aortic valve disease typically produces a diastolic murmur. Tricuspid regurgitation is loudest on the right side, and pulmonic valve disease is uncommon and produces a systolic murmur at the left heart base but is not the most common cause. Note: in horses, the mitral valve area is at the left 5th intercostal space, often described as left apex/left heart base region, and is the classic location for a holosystolic MR murmur.

QUESTION 6 SINGLE CHOICE

Which diagnostic test is considered the most sensitive single test to identify carrier state in a horse with Streptococcus equi subsp. equi infection?

A **Three sequential nasopharyngeal guttural pouch lavages with PCR**

B Single serum streptococcal M-protein ELISA

C Blood culture for S. equi

D Culture of a single nasal swab

ANSWER **A**

WHY Carrier horses with S. equi subsp. equi harbor the organism in chondroids within the guttural pouches. Three sequential guttural pouch lavages submitted for PCR significantly increase sensitivity for detection of carriers compared with a single nasal swab or single lavage. Serum ELISA detects prior exposure but cannot reliably identify active carriers, and S. equi is rarely recovered from blood.

QUESTION 7 SINGLE CHOICE

Which antimicrobial agent is appropriate empirical first-line treatment for a horse with suspected penicillin-sensitive Streptococcus zooepidemicus pneumonia?

A **Potassium penicillin G administered intravenously**

B Gentamicin administered intramuscularly

C Enrofloxacin administered orally

D Metronidazole administered orally

ANSWER **A**

WHY Streptococcus zooepidemicus is highly susceptible to penicillin, making IV potassium penicillin G (or procaine penicillin IM) the empirical drug of choice. Aminoglycosides have poor activity against streptococci, fluoroquinolones are restricted for serious gram-negative infections in horses due to cartilage concerns, and metronidazole is effective only against anaerobes.

QUESTION 8 SINGLE CHOICE

A horse with large colon impaction and mild dehydration is being treated with enteral fluid therapy. Which enteral electrolyte solution best promotes intestinal hydration and motility in horses?

A **Isotonic balanced polyionic electrolyte solution administered via nasogastric tube**

B Hypertonic saline given orally

C Plain water administered via nasogastric tube

D Hypertonic glucose solution administered orally

ANSWER **A**

WHY Isotonic balanced polyionic electrolyte solutions administered via nasogastric tube are absorbed throughout the small and large intestine, promoting hydration of ingesta and softening of impactions. Plain water lacks electrolytes and is less effective. Hypertonic saline or glucose solutions can draw water into the intestinal lumen via osmosis but risk electrolyte derangements and are not the standard for resolving large colon impactions.

mometrix.net

QUESTION 9 SINGLE CHOICE

A 10-year-old horse kept on round-bale hay develops cough, increased expiratory effort, and a heave line. Lung auscultation reveals crackles and wheezes bilaterally. Which intervention is most likely to result in the greatest clinical improvement?

A Administration of a tapering course of oral prednisolone

B Replacement of round-bale hay with soaked hay or haylage and improved stall ventilation

C Nebulization with saline alone

D Long-term administration of an oral antibiotic

ANSWER B

WHY Recurrent airway obstruction (RAO, 'heaves') in adult horses is most strongly associated with exposure to organic dusts and mold antigens from poorly cured, round-baled hay. Environmental management—removing the antigenic hay source and improving ventilation—is the single most effective intervention and is the foundation of therapy. Bronchodilators and anti-inflammatories (e.g., corticosteroids) are useful adjuncts, but without environmental change the disease will not adequately resolve. Antibiotics and saline nebulization alone do not address the underlying allergic/irritant pathogenesis.

mometrix.net