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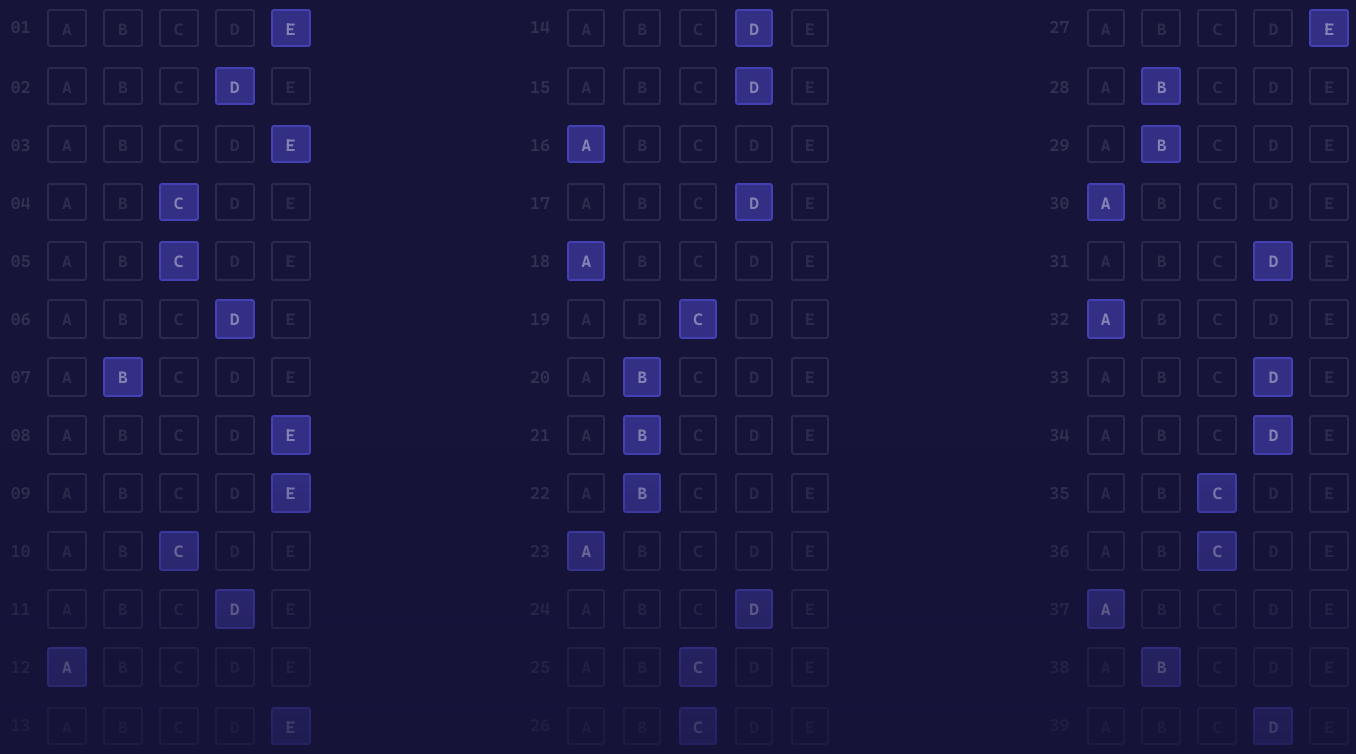

PRACTICE QUESTIONS

SAIM Specialty Examination American College of Veterinary Internal Medicine (ACVIM)

SAIMS

SAIM Specialty Exam

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

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Before you begin

What this is

9 practice questions for SAIM Specialty Examination American College of Veterinary Internal Medicine (ACVIM) `SAIMS`, 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, `SAIMS`
- the question number
- the email address on your order

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QUESTION 1 SINGLE CHOICE

A 9-year-old Cavalier King Charles Spaniel is presented for evaluation of a recently noted heart murmur. Echocardiography reveals mitral valve thickening with mitral valve prolapse and severe mitral regurgitation. The left atrium is markedly enlarged, and the left ventricular internal diameter in diastole is within normal limits. Which of the following most accurately describes the stage of myxomatous mitral valve disease (MMVD) according to the ACVIM consensus classification?

A Stage B1

B Stage B2

C Stage C with no current clinical signs

D Stage D

ANSWER B

WHY According to the ACVIM consensus statement on MMVD, Stage B describes asymptomatic dogs with a mitral murmur and echocardiographic evidence of MR but no clinical signs of CHF. Stage B1 includes dogs with no radiographic or echocardiographic evidence of cardiac remodeling, while Stage B2 includes dogs with evidence of left atrial and left ventricular enlargement. Because this dog has marked left atrial enlargement but normal diastolic left ventricular dimensions and no clinical signs of CHF, the patient is best classified as Stage B2.

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QUESTION 2 SINGLE CHOICE

An 8-year-old neutered male dog is evaluated for polyuria, polydipsia, and a pot-bellied appearance. Physical examination reveals alopecia, skin thinning, and bilaterally symmetrical muscle wasting. Serum biochemistry shows a mild increase in alkaline phosphatase activity, and the urine specific gravity is 1.012. Which diagnostic test is most appropriate to confirm a diagnosis of spontaneous hyperadrenocorticism?

A **Low-dose dexamethasone suppression test**

B ACTH stimulation test

C Endogenous ACTH concentration

D Abdominal ultrasonography alone

ANSWER **A**

WHY Both the low-dose dexamethasone suppression (LDDS) test and the ACTH stimulation test are used to confirm hyperadrenocorticism, but the LDDS test is considered the screening test of choice because of its higher sensitivity for spontaneous (pituitary-dependent and adrenal-dependent) hyperadrenocorticism. The ACTH stimulation test has lower sensitivity and is preferred for monitoring patients on trilostane or mitotane, and for diagnosing iatrogenic hypoadrenocorticism. Endogenous ACTH is used to differentiate pituitary-dependent from adrenal-dependent disease once Cushing's has been confirmed, not to make the initial diagnosis. Ultrasonography alone cannot confirm the diagnosis.

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QUESTION 3 SINGLE CHOICE

A 7-year-old dog is evaluated for lethargy, anorexia, and episodes of ptyalism and hepatic encephalopathy. Serum biochemistry reveals markedly increased pre- and postprandial bile acids, low BUN, low albumin, and low glucose. Liver histopathology shows bridging fibrosis and regenerative nodules. Which of the following is the most likely diagnosis?

A Acute hepatic necrosis

B Hepatoportal microvascular dysplasia

C Cirrhosis

D Hepatocellular carcinoma

ANSWER C

WHY Cirrhosis is characterized by bridging fibrosis and regenerative nodules, with concurrent loss of hepatic function evidenced by hypoalbuminemia, hypoglycemia, low BUN, and elevated bile acids. Clinical signs of hepatic encephalopathy and ptyalism further support advanced hepatic dysfunction. Acute hepatic necrosis would show coagulative necrosis without the architectural distortion of bridging fibrosis and regenerative nodules. Hepatoportal microvascular dysplasia is more common in small breed dogs and typically produces only mildly to moderately increased bile acids without the marked histologic remodeling. Hepatocellular carcinoma is a focal mass lesion rather than a diffuse nodular/fibrotic pattern.

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QUESTION 4 SINGLE CHOICE

A 6-year-old female spayed cat is evaluated 48 hours after a routine dental procedure. The cat is lethargic, anorexic, and has vomited twice. Serum creatinine is 6.2 mg/dL (baseline one month ago was 1.4 mg/dL) and BUN is 96 mg/dL. Urine specific gravity is 1.018. The cat is euhydrated on physical examination. Which of the following best characterizes the renal injury?

A Chronic kidney disease stage 3

B Prerenal azotemia

C Acute kidney injury (intrinsic renal azotemia)

D Post-renal azotemia due to urethral obstruction

ANSWER C

WHY The history of a recent anesthetic event, the rapid rise in azotemia from a previously normal baseline, and the inadequate urine concentrating ability (USG 1.018) in an euhydrated patient are characteristic of intrinsic acute kidney injury. Prerenal azotemia would be expected to resolve with fluid therapy and would have a higher USG in the absence of underlying renal disease. Post-renal obstruction would typically be associated with an empty, easily expressed bladder or a turgid bladder with stranguria. The previously normal baseline creatinine excludes pre-existing chronic kidney disease as the sole explanation.

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QUESTION 5 SINGLE CHOICE

A 4-year-old female Cocker Spaniel is evaluated for acute lethargy, pallor, and icterus. Hematology shows a hematocrit of 18%, spherocytes are noted on blood smear, and there is agglutination that persists after saline washing. Which of the following is the most appropriate initial immunosuppressive therapy?

A Cyclosporine monotherapy

B Prednisone (or prednisolone) at an immunosuppressive dose

C Azathioprine monotherapy

D Mycophenolate mofetil monotherapy

ANSWER B

WHY This dog has immune-mediated hemolytic anemia (IMHA) evidenced by anemia, spherocytes, icterus, and persistent agglutination after saline washing (consistent with immune-mediated destruction rather than rouleaux). A corticosteroid (prednisone/prednisolone) at immunosuppressive doses is the cornerstone of initial therapy. Additional immunosuppressive agents such as azathioprine, cyclosporine, or mycophenolate are typically added as second-line agents when there is inadequate response or to allow tapering of the steroid, but they are not appropriate as the sole initial therapy. Cyclosporine and azathioprine have a delayed onset of action and should not be used as monotherapy for acute hemolytic crisis.

QUESTION 6 SINGLE CHOICE

A 12-year-old cat is evaluated for a chronic, intermittent, harsh, non-productive cough. Thoracic radiographs reveal a generalized bronchointerstitial pattern with occasional mineralized bronchi. The cat is otherwise eupneic and not in respiratory distress. Which of the following is the most likely diagnosis?

A **Feline asthma (chronic bronchitis with reversible bronchoconstriction)**

B Pulmonary fibrosis

C Fungal pneumonia

D Congestive heart failure

ANSWER **A**

WHY Chronic non-productive cough in a middle-aged to older cat with a bronchointerstitial pattern and mineralized bronchi on thoracic radiographs is most consistent with feline chronic bronchitis/asthma. Pulmonary fibrosis would more typically present with restrictive breathing pattern, exercise intolerance, and increased inspiratory effort with crackles rather than cough, and is often associated with a more severe interstitial pattern. Fungal pneumonia is uncommon and would usually present with more overt respiratory signs and nodular/structured infiltrates. Congestive heart failure in cats typically presents with tachypnea/dyspnea and pulmonary edema rather than chronic cough with this radiographic pattern.

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QUESTION 7 SINGLE CHOICE

A 6-year-old Miniature Schnauzer is evaluated for an acute onset of left-sided head tilt, circling to the left, and decreased conscious proprioception in the right thoracic and pelvic limbs. The patient is mentally appropriate and the cranial nerve examination is normal. Which neuroanatomic localization is most consistent with these findings?

A Left forebrain (left prosencephalon)

B Right forebrain (right prosencephalon)

C Left central vestibular disease

D Right central vestibular disease

ANSWER D

WHY Contralateral postural reaction deficits (decreased CP in the right limbs) combined with ipsilateral head tilt and circling to the left localize to the right side of the central nervous system. The presence of head tilt and circling with hemiparesis indicates involvement of the right side of the brainstem at the level of the vestibular nuclei or the right cerebellum/brainstem region (central vestibular). A forebrain lesion can cause circling and hemiparesis but does not typically cause head tilt. Left central vestibular disease would produce a left head tilt, circling to the left, but ipsilateral (left) postural deficits, not contralateral (right).

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QUESTION 8 SINGLE CHOICE

An 8-year-old Labrador Retriever from the southeastern United States is evaluated for lethargy, weight loss, and a non-regenerative anemia. Serum biochemistry shows hyperglobulinemia and mild hypoalbuminemia. A whole blood PCR is positive for Ehrlichia canis. Which of the following statements regarding treatment and prognosis is most accurate?

A Ehrlichiosis in dogs is uniformly fatal without treatment

B Doxycycline is the treatment of choice and is typically administered for 28 days

C Ehrlichiosis is not considered zoonotic under any circumstances

D Affected dogs require lifelong doxycycline therapy after initial induction

ANSWER B

WHY Doxycycline at 10 mg/kg/day (or divided twice daily), PO, for 28 days is the recommended treatment for canine ehrlichiosis. Most dogs respond well to appropriate therapy, although severe chronic ehrlichiosis (pancytopenia, hyperviscosity, or marked bleeding) carries a more guarded prognosis. The disease is not uniformly fatal, and lifelong therapy is not required after a standard 28-day course; persistent or recurrent disease warrants re-evaluation. Ehrlichia canis is not considered a classic zoonotic pathogen transmitted directly from dogs, but it is a tick-borne zoonosis of public health relevance.

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QUESTION 9 MULTIPLE CHOICE

Which of the following are recognized paraneoplastic syndromes in dogs with lymphoma? (Choose two.)

A **Hypercalcemia of malignancy, most often associated with mediastinal T-cell lymphoma**

B Monoclonal gammopathy and hyperviscosity syndrome

C Eosinophilia secondary to bacterial endocarditis

D **Immune-mediated thrombocytopenia or hemolytic anemia**

ANSWER **A · D**

WHY Hypercalcemia of malignancy is one of the most common paraneoplastic syndromes in canine lymphoma, classically associated with mediastinal T-cell lymphoma and produced via tumor secretion of parathyroid hormone-related peptide (PTHrP). Immune-mediated destruction of platelets and/or red blood cells (secondary immune-mediated thrombocytopenia or IMHA) is also a well-recognized paraneoplastic phenomenon in dogs with lymphoma. Monoclonal gammopathy and hyperviscosity are more characteristic of plasma cell tumors such as multiple myeloma, not lymphoma. Eosinophilia with bacterial endocarditis is not a paraneoplastic syndrome of lymphoma.

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