

**First Aid for the USMLE Step 2 CK, 8th edition**  
**Official Updates, Corrections, and Clarifications**  
**Updated 7/14/14**

Despite our best efforts, errors do occur during a revision. If you are the first to bring a verifiable error to our attention, you will receive up to a **\$20 gift certificate**. As always, we check every submission against **primary** references to ensure the most accurate, high-yield study guide available. If you submitted an erratum and it does not appear in the list below, then you were not the first person to submit the erratum, it does not agree with the primary literature in the field, or we consider it a detail beyond the scope of the book.

Please note that our goal is to provide a high-yield framework for studying and not a comprehensive textbook. The list below reflects content errors and typos that may create confusion. Good luck with your studies!

–The First Aid/USMLE-Rx Team

Page #	Entry Title	Correction/Clarification
10	When to Take the Exam	In the last bullet "Considerations for MD/PhD students," replace the first sentence with "The dates of passing the Step 1, Step 2, and Step 3 examinations should occur within a 7-year period."
20	Answer box in left margin	Change "initiate $\beta$ -blockade," to "treat arrhythmias with procainamide,"
20	Cardiac Physical Exam	In the first bullet on this page: Mitral regurgitation only rarely (and weakly) radiates to the carotids – typically carotid radiation is associated with aortic stenosis
21	Cardiac Physical Exam	In the "S4 gallop" subbullet, change "often normal in younger patients and in athletes" to "usually pathologic but often normal in younger patients and in athletes"
25 *	Table 2.1-4 Ventricular Tachyarrhythmias	In the Ventricular fibrillation row, change the Treatment entry to "Immediate electrical defibrillation and ACLS protocol."
31	Coronary Artery Disease (CAD)	In the sentence "Risk factors include...", delete "diabetes mellitus (DM)" (note that diabetes is actually a risk EQUIVALENT).
36	Table 2.1-11, ATP III Guidelines for Risk Stratification of Dyslipidemia	(1) In the first row (CAD or CAD risk equivalents), change the last entry (column LDL to Consider Drug Therapy) to " $\geq 130$ mg/dL." (2) In the second row (2+ risk factors), change the last entry (column LDL to Consider Drug Therapy) to " $\geq 160$ mg/dL."
54 *	Seborrheic Dermatitis	In the first sentence, change " <i>Pityrosporum ovale</i> " to " <i>Malassezia furfur</i> " (the official name has changed).
61 *	Figure 2.2-10 Pemphigus vulgaris	Change the last sentence of the figure legend to "Mucous membrane involvement is common"
68 *	Candidiasis	(1) In the second bullet under History/PE, change "that cannot easily be scraped off" to "that can easily be scraped off" (2) In the last sentence of Diagnosis, change "candidal hyphae and pseudospores" to "candidal spores and pseudohyphae"

72	Figure 2.2-20	The image is missing from the page, please insert the image and legend below:
		 <p><b>FIGURE 2.2-20. Seborrheic keratosis.</b> Multiple brown, warty papules and nodules are seen on the back and are characterized by a “stuck-on” appearance. (Reproduced with permission from Wolff K, Johnson RA. <i>Fitzpatrick's Color Atlas &amp; Synopsis of Clinical Dermatology</i>, 6th ed. New York: McGraw-Hill, 2009, Fig. 9-41.)</p>
75	Figure 2.2-24	The image is missing from the page, please insert the image and legend below:
		 <p><b>FIGURE 2.2-24. Melanoma.</b> Note the asymmetry, border irregularity, color variation, and large diameter of this plaque. (Reproduced with permission from Hurwitz RM. <i>Pathology of the Skin: Atlas of Clinical-Pathological Correlation</i>, 2nd ed. Stamford, CT: Appleton &amp; Lange, 1998: 432.)</p>
75 *	Kaposi's Sarcoma (KS)	In the last sentence of Treatment, the correct spelling is paclitaxel.
78	Type 1 Diabetes Mellitus (Type 1 DM)	In the first bullet under History/PE, change the table reference to "(see Table 2.3-2)".
83 *	Key Fact “↑ TBG...”	Replace with “↑TBG can be found in pregnancy, estrogen administration, and infection. You do not need to treat.”
86	Thyroid Neoplasms	In the fourth bullet under History/PE, change "male sex" to "female sex"
87, 88 *	Osteoporosis	In the first sentence on p. 87 and in the first bullet under Diagnosis on p. 88, change “< 2.5 SDs from normal” to “2.5 SDs less than normal”
90	Hyperparathyroidism	In the third bullet under Treatment, delete "aluminum hydroxide" from the list of oral phosphate binders to use in patients with renal insufficiency.
90	Table 2.3-6 Lab Values in Hyperparathyroidism	In the third row (3 <sup>o</sup> ), change the entry in the Calcium column to “↑”
93	Hyperprolactinemia	In the first bullet under Diagnosis, change "> 200 mg/mL" to "> 200 ng/mL"
100 *	Assessment of Disease Frequency	Change the fourth bullet to "Remember to subtract any pre-existing cases of the disease from the total population at risk because these individuals are no longer at risk."

106	Chance	In the entry describing power, change the equation to: $\text{Power} = 1 - \beta$ .
107	Table 2.4-2 Types of Vaccines	In the second row [Inactivated (killed)], the entry for Targeted Diseases contains 2 mentions of influenza; delete the first one so the entry becomes: Cholera, HAV, polio (Salk), rabies, influenza (injection).
110 *	Table 2.4-4 Health Screening Recommendations for Women by Age	<ol style="list-style-type: none"> <li>(1) In the row for Age 19-39, change "Pap test..." entry in Breast/Reproductive column to: "Pap test every 3 years starting at age 21. May do Pap plus HPV testing every 5 years starting at age 30."</li> <li>(2) In the rows for Age 40-49 and Age 50-64, change "Pap test..." entry in Breast/Reproductive column to: "Pap test every 3 years or Pap plus HPV testing every 5 years."</li> <li>(3) In row 2 (Age 40–49), delete the first sentence in the third column Breast/Reproductive, "Mammogram once every 1–2 years".</li> <li>(4) In row 3 (Age 50–64), replace the first sentence in the third column Breast/Reproductive, "Mammogram once every 1–2 years" with "Mammogram every 2 years"</li> <li>(5) In row 4 (Age ≥ 65), replace the first sentence in the third column Breast/Reproductive, "Mammogram once every 1–2 years" with "Mammogram every 2 years"</li> </ol>
117	Key Fact "Physicians cannot..."	Replace with "Mandatory reporting of intimate-partner violence is controversial and varies by state; regardless of location, physicians should document the encounter, offer support, and have resources available for assistance."
124 *	Gastritis	In second bullet under Diagnosis, change "urease breath test" to "urea breath test"
125 *	Key Fact "Stress is not a risk factor for PUD"	Change to "Psychological stress is not a risk factor for PUD."
125 *	Peptic Ulcer Disease (PUD)	Change the sentence "Other risk factors include..." to "Other risk factors include use of NSAIDs, alcohol, tobacco, and corticosteroids when used concomitantly with NSAIDs."
126 *	Peptic Ulcer Disease (PUD)	Under the bullet for Long-term management, change the parenthetical text in the last subbullet to "(e.g., parietal cell vagotomy)"
127 *	Table 2.6-2 Causes of Infectious Diarrhea	In the <i>Salmonella</i> row, change the second sentence of the Exam entry to "Fecal RBCs and WBCs."
134 *	Table 2.6-5 Screening Recommendations for Colorectal Cancer	For the row "No past medical or family history," change the first bullet of the Recommendations entry to "Annual DRE and home FOBT OR"
145 *	Figure 2.6-19 Portosystemic anastomoses	In the legend, change "3. Paraumbilical—inferior epigastric → caput medusae (navel)" to "3. Paraumbilical—superficial epigastric → caput medusae (navel)"
145 *	Table 2.6-10 Etiologies of Cirrhosis by SAAG	Change title of table to 'Etiologies of Ascities by SAAG'
146 *	Table 2.6-11 Complications of Cirrhosis	In the Hepatic encephalopathy row, delete "Protein restriction," from the Management column as this is no longer recommended.
147	Hemochromatosis	The first sentence should not mention kidneys as they are less commonly affected by hemochromatosis; it should read "A state of iron overload in which hemosiderin accumulates in the liver, pancreas (islet cells), heart, adrenals, testes, and pituitary."
147 *	Hemochromatosis	In the third bullet under Diagnosis, change "may be report" to "may report"

152 *	Figure 2.7-1. Coagulation cascade	Replace the figure with the one shown below:
		<p>* = require Ca<sup>2+</sup>; phospholipid</p> <p>Note: Kallikrein activates bradykinin; ACE inactivates bradykinin.</p> <p>Hemophilia A: deficiency of factor VIII. Hemophilia B: deficiency of factor IX.</p>
153 *	Coagulation Cascade	Change the last sentence to "Heparin-to-warfarin conversion is necessary because proteins C and S have shorter half-lives than the other vitamin K-dependent factors (II, VII, IX, and X), leading to a transient period of paradoxical hypercoagulability before proper anticoagulation"
157	Thrombotic Thrombocytopenic Purpura (TTP)	Replace the first sentence under Treatment with "Plasma replacement and plasmapheresis; steroids to ↓microthrombus formation."
159	Figure 2.7-5 Anemia algorithm	The second bullet under Cytoplasmic defects , the correct spelling is Thalassemia.
163 *	Sickle Cell Disease (SCD)	Under History/PE, change the second sentence of the third bullet to "These complications both present with ↓ hematocrit but are distinguished clinically by a low reticulocyte count in aplastic crisis (due to bone marrow involvement)."
164 *	Thalassemias	Change the second sentence so it starts "α-thalassemia is caused by a deletion of ..."
175	Eosinophilia	In the first sentence, change "> 350/mm" to "> 350/mm <sup>3</sup> "
183	Tuberculosis (TB)	Under Diagnosis, in the first subbullet under "Latent disease...", change "⊕ PPD" to "⊖ PPD"
184 *	Tuberculosis (TB)	Under Treatment, in the second subbullet of "Active disease", change "peripheral neuritis" to "peripheral neuropathy"
199	Chlamydia	In first bullet under History/PE, add "in women" to the end of the sentence.
205 *	Key Fact "SIRS = 2 or more of the following:"	In the first bullet "1. Temperature", change <35° C to <36° C.
213 *	Marginal question "Q2"	In the second sentence, change "metatarsal" to "metacarpal"
220	Compartment syndrome	In the Diagnosis sentence, change the parenthetical text to "(diastolic pressure - compartment pressure; also ⊕ if ≤ 30 mm Hg)."
221 *	Carpal Tunnel Syndrome (CTS)	Change sentence under Diagnosis to "A clinical diagnosis, although nerve conduction studies and EMG can be used to confirm."
222 *	Tendinitis	<p>(1) In the second bullet under History/PE, change "Wrist flexor tendinitis" to "Wrist extensor tendinitis"</p> <p>(2) In the last bullet under Treatment, change the first sentence to "If conservative treatment fails, consider corticosteroid injection."</p>

234 *	Fibromyalgia	In the "Dx" bullet, change the 3 instances of "tender points" to "painful areas"
247 *	Stroke	(1) In the second bullet under "Preventive and long-term treatment measures...", reverse the percentages to "If stenosis is > 60% in symptomatic patients or > 70% in asymptomatic patients" (2) In the third bullet under Preventive and long-term treatment measures, change the second sentence to "In cases involving a prosthetic valve, the target INR is 2.5–3.5..."
251	Epidural hematoma	The end of the second bullet should be changed to "...and ultimately an ipsilateral hemiparesis." (a classic finding of uncal herniation)
264	Amyotrophic Lateral Sclerosis (ALS)	Under Treatment, add riluzole.
269 *	Parkinson's Disease	In the "Bradykinesia" subbullet of History/PE, change "wide leg stance" to "narrow leg stance"
271 *	Table 2.10-11 Common 1° Neoplasms in Adults	In the row for Glioblastoma multiforme (grade IV astrocytoma), change the last word of the Presentation entry to "diagnosis" so it reads "( $<1$ year from the time of diagnosis)."
273 *	Tuberous Sclerosis	Under Diagnosis, in the second subbullet under Imaging, change "ECG" to "Echocardiography"
275 *	Coma	In the fifth bullet "Massive brainstem...", delete "(eg, pontine myelinolysis)". Add a new bullet "Central pontine myelinolysis."
282 *	Diagnosis of Pregnancy	In the last subbullet, change "1000–1500 IU/mL" to "1000--1500 mIU/mL"
284 *	Figure 2.11-2 Cardiopulmonary, hematologic, and GI changes in normal pregnancy	(1) Under Cardiovascular, change the Pattern entry for Blood pressure to "Gradually decreases 10% around 24 weeks, then increases to prepregnancy values" (2) Under Gastrointestinal, change "Gastric emptying time" to "Gastrointestinal transit time" on both the graph and in the text to the left of the graph.
285 *	Table 2.11-2 Factors That Can Cross the Placenta	To eliminate a duplicate listing, in the Organisms column, delete the 4th item "Parvovirus"
290 *	Table 2.11-7 Diagnosis and Treatment of Common Congenital Infections	In the HSV row, change the Diagnosis entry to "Serologic testing; tissue culture; PCR"
299 *	Pregestational Diabetes and Pregnancy	Under Treatment, in the first subbullet under "Mother", delete "neural tube,". Change the first subbullet under "Fetus: 18--20 weeks" to "Ultrasound to determine fetal age, growth, and neural tube development."
300 *	Preeclampsia and Eclampsia	Move the "Risk factors..." subbullet under "HELLP syndrome" to instead appear as a subbullet under "Preeclampsia"
305 *	Polyhydramnios	In the first bullet, change "AFI > 20" to "AFI > 24"
315	Lactation and Breastfeeding	In the last bullet, HBV and HCV should not be listed as contraindications to breastfeeding; patients should use caution, especially if they have bleeding or cracked nipples, as exposure to blood could spread hepatitis. Contraindications to breastfeeding include HIV infection, active TB infection, active alcohol/drug abuse, and use of certain medications (e.g., tetracycline, chloramphenicol).
318	Figure 2.12-1 Normal female development	In the third illustration in the BREAST row, change the caption to "Nipple and areola form separate mound, protruding from breast."
320 *	1° Amenorrhea/Delayed Puberty	Under History/PE, in the first 2 bullets under "Absence of 2° sexual characteristics...", 1° ovarian insufficiency is the most common cause, not Constitutional growth delay.

334	Pelvic Inflammatory Disease (PID)	Under Outpatient regimens, the text of Regimens A and B should be switched, so Regimen A will read "Ceftriaxone IM x 1 dose <b>or</b> cefoxitin <b>plus</b> probenecid plus doxycycline x 14 days +/- metronidazole x 14 days." Per the CDC, as a result of the emergence of quinolone-resistant <i>Neisseria gonorrhoeae</i> , regimens that include a quinolone agent are no longer recommended for the treatment of PID. Therefore, Regimen B ("Ofloxacin <b>or</b> levofloxacin x 14 days +/- metronidazole x 14 days") should be used only in very special cases.
338	Cervical Cancer	In the Screening section, the guidelines have changed: < 21 years of age: no testing. 21 to 29 years of age: every 3 years. 30 to 65 years of age: every 3 years or Pap plus HPV testing every 5 years. > 65 years: can stop screening if negative so far.
339 *	Cervical Cancer	For women age 21–24 with ASC-US/LSIL, repeat cytology at 12 months and then return to routine screening if negative as most lesions spontaneously resolve. If repeat still shows abnormality, proceed with colposcopy.
347	Figure 2.12-11 Workup of precocious puberty	Under Central precocious puberty, insert the phrase "Pituitary CT/MRI" in between the arrows labeled "+" and "-" (indicating that pituitary imaging will differentiate between a tumor and constitutional precocious puberty)
349 *	Breast Cancer	Under Diagnosis, in the second subbullet under Screening, change "(see Figure 2.12-13B)" to "(see Figure 2.12-13C)"
351 *	Breast Cancer	In the second bullet under Prognosis, add a plus sign so it becomes "ER+ and PR+ status is associated with a favorable course."
354	Child Abuse	In the second subbullet under Bruises, only "belt marks" should be mentioned. Stocking-glove burns and cigarette burns describe common burns.
359 *	Key Fact "Transposition is the most common congenital heart condition..."	Delete Key Fact. Transposition is the most common <i>cyanotic</i> congenital heart lesion.
361 *	Table 2.13-2 Developmental Milestones	In the row for 12 months, move "follows 1-step commands" from the Language column into the Social/Cognitive column.
363 *	Table 2.13-4 Genetic Diseases	In the row for Down syndrome, add "Trisomy 21 as a result of" as the first part of the sentence in the Genetic Abnormality column.
373 *	Table 2.13-6 Pediatric Immunodeficiencies (continued)	In the first row of Complement Disorders, change the Disorder entry to "C1 esterase inhibitor deficiency (hereditary angioedema)"
373	Immunodeficiency Disorders	In the second subbullet, change "latter" to "former": "Bruton's and CVID also have similar symptoms, but the former is found..."
373	Table 2.13-6 Pediatric Immunodeficiencies (continued)	In the second row "Job's syndrome," change the 6th line of the entry in the Description column to "Hyper-IgE (eosinophilia)"
374	Kawasaki Disease	In the Diagnosis section, second subbullet under Acute phase..., change "limbic area" to "limbus"
378 *	Meningitis	In the third bullet under History/PE, change "Brudzinski's sign (pain with passive neck flexion)" to "Brudzinski's sign (hips are flexed in response to forced flexion of the neck)"
383	Neonatal Jaundice	In the bullet for "Unconjugated:...", "hemolysis" is listed twice (in lines 1 and 3) – delete one.
389	Anticipatory Guidance	In the third bullet, change the parenthetical text to read "(seats can face forward if the child is > 2 years of age and weighs > 40 lbs)."
390 *	Childhood Vaccinations	In the first subbullet under Contraindications, change the last sentence to "Patients who have life-threatening allergies to eggs may not receive the influenza vaccine."
395 *	Panic Disorder	In the second bullet under History/PE, change "low O <sub>2</sub> saturation" to "low CO <sub>2</sub> levels"
397, 398	Dementia, Delirium	Sundowning is associated with dementia, not delirium. On p. 397, add a bullet under the History/PE for Dementia: "Patients often can become more confused late in the day and at night (sundowning)." On p. 398, in the third bullet for Delirium History/PE, delete ", and ↑ symptoms at night (sundowning)."

398	Table 2.14-3. Delirium vs. Dementia	In the third row, "sundowning" should be listed in the Dementia column, not the Delirium column.
415 *	Narcolepsy	Change the "Tx" bullet to "Treat with a regimen of scheduled daily naps plus modafinil or stimulant drugs such as amphetamines; give SSRIs or sodium oxybate for cataplexy."
421 *	Table 2.15-1 Obstructive vs. Restrictive Lung Disease	In the fifth row, note that FEV <sub>1</sub> is a percentage of the FVC, not the VC.
425 *	Chronic Obstructive Pulmonary Disease (COPD)	Under Treatment, in the second subbullet for "Chronic", change "≤ 89%" to "≤ 88%"
429	Acute Respiratory Distress Syndrome (ARDS)	At the end of the first sentence (line 2 of the entry), change "PaCO <sub>2</sub> /FiO <sub>2</sub> ratio ≤ 200" to "PaO <sub>2</sub> /FiO <sub>2</sub> ratio ≤ 200."
430 *	Table 2.15-6 Criteria for Extubation from Mechanical Ventilation	Under Pulmonary mechanics, in the row for "Resting minute ventilation (TV x rate)", change the Value entry to "<10 L/min"
434 *	Table 2.15-9 Paraneoplastic Syndromes of Lung Cancer	In Neuromuscular row, change the third item listed in the Syndrome column from "Myasthenia (Lambert-Eaton syndrome)" to "Myasthenic syndrome (Lambert-Eaton syndrome)"
441 *	Hyponatremia	The Hypervolemia subbullet should read "Water restriction; consider diuretics." Add a new bullet "Cortisol replacement with adrenal insufficiency; thyroid replacement with hypothyroidism".
444	Mnemonic	In the marginal mnemonic, change the title to read "Specific treatments for anion-gap causes of metabolic acidosis"
447 *	Table 2.16-2 Findings on Microscopic Urine Examination in Acute Kidney Injury	For the row "White cells, white cell casts", change the Classification entry to "Intrinsic."
449	Table 2.16-4 Mechanism of Action and Side Effects of Diuretics	In the third row Loop Agents, change the last 2 lines of the Side Effects entry to read "(except ethacrynic acid), hyperuricemia."
451 *	Table 2.16-6 Causes of Nephrotic	In the Focal segmental glomerulosclerosis row, add a sentence to the Description entry: "The most common cause of nephrotic syndromes in adults overall"
454	Nephrolithiasis	In the second line of the second bullet under Treatment, change mm to cm so the corrected phrase is "0.5 cm to 3 cm in diameter can be treated..."
456	Key Fact "A VCUG..."	Recommendations have changed for children 2-24 months: these children should have an ultrasound first and then only have a VCUG if the U/S shows hydronephrosis, scarring, or other findings suspicious for obstruction or high-grade VUR. Evidence is limited for children under 2 months.
456 *	Vesicoureteral Reflux	Under Diagnosis, add a new last sentence: "VCUG should also be performed if there is recurrence of febrile UTI."
460 *	Prostate Cancer	In the first bullet under Prevention, change the first sentence to "Males should discuss pros and cons of annual DRE and/or PSA testing starting at age 50."
470 *	Blunt and Deceleration Trauma/Head	In the bullet for Epidural hematomas, note that examination may show ipsilateral blown pupil and ipsilateral (not contralateral) hemiparesis.
480 *	Table 2.17-4 Management of Bites and Stings	In the Snakes row, replace the second sentence of the Management entry with "Keep the affected limb below the heart."
480 *	Table 2.17-5 Rabies and Tetanus Precautions	In the Tetanus row, change the beginning of the first sentence of the Prophylaxis entry to "Administer tetanus toxoid if the patient had ≤ 3 lifetime toxoids or the last..."

481 *	Table 2.17-6 Drug Interactions and Reactions	In the first two rows of the table, note that quinidine is an inhibitor, not an inducer, of P-450 enzymes.
484 *	Table 2.17-8 Drug Side Effects (continued)	Change the Side Effects entry for Methanol to "anion-gap metabolic acidosis"
495 *	Rapid Review: Gastrointestinal	In the 10th entry, for hepatic encephalopathy, note that protein restriction is no longer generally recommended.
501 *	Rapid Review: Neurology	In the entry for "What % lesion is an indication for carotid endarterectomy?," change the answer to "Sixty percent if the stenosis is symptomatic."
502	Rapid Review: Neurology	In the third entry, change the column 1 text to read "A 6-year-old girl presents with a port-wine stain in the V <sub>1</sub> distribution...."
508	Rapid Review: Renal/Genitourinary	In the last entry on this page, change the column 1 text to "The most common form of nephrotic syndrome."
509 *	Rapid Review: Renal/Genitourinary	(1) In the 12th entry, delete AFP from the column 1 text so it becomes "Testicular cancer associated with $\beta$ -hCG" (2) In the 16th entry, change the column 1 text to "Salicylate ingestion causes what type of acid-base disorder?"
546	Appendix I: Abbreviations and Symbols	Add an entry for the abbreviation LAP, meaning leukocyte alkaline phosphatase.

*\*corrections and clarifications added since May 13, 2013.*