2024 First Aid for the USMLE Step 1 Corrections and Clarifications July 31, 2024

Despite our best efforts, errors do occur during the revision process. This list primarily addresses direct content errors that may create confusion. We also have listed selected clarifications. Please be aware, however, that this list does not represent the entire scope of additions, improvements, and clarifications expected in the 2024 edition.

Red signifies specific text to be deleted. **Green** signifies specific text to be added.

We check every potential errata submission against your reference(s), authoritative references, and expert faculty to maximize clarity and accuracy. Please note that our goal is to provide a high-yield framework for optimal exam preparation and not a comprehensive textbook. If you were the first individual to submit a referenced correction or clarification to us at <u>www.firstaidteam.com</u> that appears in the errata or in the next edition of the book, you will receive a gift certificate in appreciation. Good luck with your studies!

– The First Aid Team

CATEGORIES OF UPDATES

Major Corrections	Factual errors that could interfere with comprehension
Minor Corrections	Less significant errors that may cause confusion
Clarifications	The text is accurate but could be written more clearly, or minor formatting issues (misalignments, indents, etc) that may confuse

MAJOR CORRECTIONS

Page	Fact Name	Revision
135	Enterococci	Change Enterococci (<i>E faecalis</i> and <i>E faecium</i>) are normal colonic microbiota that are penicillin G resistant and cause to Enterococci (<i>E faecalis</i> and <i>E faecium</i>) are normal colonic microbiota that are intrinsically resistant to penicillin G and cause"

MINOR CORRECTIONS

Page	Fact Name	Revision
98	Major histocompatibility complex I and II	In the MHC II illustration, change the labels Long chain and Short chain to Chain. (MHC II has two chains of equal length.)
142	Salmonella vs Shigella	In the <i>Salmonella</i> spp. except <i>S typhi</i> column, Spread row, add Hematogenous spread is rare
288	Heart anatomy	In Coronary blood supply row, change PDA supplies posterior 1/3 of interventricular septum, posterior 2/3 walls of ventricles, and posteromedial papillary muscle. RCA supplies AV node and SA node. to PDA supplies posterior 1/3 of interventricular septum, posterior 2/3 walls of ventricles, and posteromedial papillary muscle (which has only a single blood supply). AV nodal artery (a branch of RCA in 90% of people) supplies the AV node. SA nodal artery (a branch of the RCA in about 70% of people) supplies the SA node.
310	Heart failure	Add Diastolic dysfunctionnormal/ \uparrow/\downarrow EDV
372	Portosystemic anastomoses	In the illustration, 1) Add a label for the superior mesenteric vein (SMV) on the portion of the vein visible below the pyloric region of the stomach. 2) Connect the splenic vein to the SMV approximately at and behind the level of the duodenum.
524	Cranial nerves and arteries	In the spinal cord, the gray matter should be rotated 180 degrees so that the posterior horns are facing the posterior, not the anterior.

534	Dementia	In the Alzheimer disease illustration, change shading from the amygdala to the hippocampus.
572	Normal infant and child development	In the 0–12 mo row, Motor column, add passes toys hand to hand (by 6–9 mo)
664	Cervical pathology	In the Dysplasia and carcinoma in situ row, change CIN 3 (severe, irreversible dysplasia or carcinoma in situ) to CIN 3 (severe dysplasia or carcinoma in situ which is less likely to return to normal)
713	Rapid Review	In Superior gluteal nerve injury entry, change Trendelenburg sign: lesion contralateral to side of hip that drops due to adductor weakness to Trendelenburg sign: lesion contralateral to side of hip that drops due to abductor weakness
720	Rapid Review	In Vitamin K deficiency entry, add Hemorrhagic disease of newborn with \uparrow aPTT, normal bleeding time

CLARIFICATIONS

Page	Fact Name	Revision
318	Syncope	Replace Orthostatic hypotension is defined as a drop in systolic BP > 20 mm Hg and/or diastolic BP > 10 mm Hg upon standing. with Orthostatic hypotension is defined as a drop in systolic BP \ge 20 mm Hg and/or diastolic BP \ge 10 mm Hg within 3 minutes of standing.
429	Extrinsic hemolytic anemias	For warm and cold AIHA, add Warm AIHA—primarily IgG causes extravascular >>> intravascular hemolysis. Cold AIHA—primarily IgM + complement cause RBC agglutination and extravascular >>> intravascular hemolysis upon exposure to cold
476	Systemic lupus erythematosus	Remove Common causes of death in SLE: renal disease (most common), infections, cardiovascular disease (accelerated CAD).