

NR 511 CEA EXAM

Your 22 year old male patient states during his review of systems that his scrotum is very enlarged and feels like it is full a powerlifter and works as a trash collector. You suspect the patient likely has which of the following diagnoses?

- A -Varicocele
- B -Meningocele
- C -Rectocele
- D -Hydrocele - CORRECT ANSWER -A -Varicocele

The point of maximum impulse (PMI) is MOST often palpable in healthy adults when positioned in the supine or left lateral decubitus position. Which one of the following locations is most commonly described as the PMI in a healthy adult?

- A -Left 2nd intercostal space, midaxillary line
- B -Left 5th intercostal space, midclavicular line
- C -Right 4th intercostal space, midaxillary line
- D -Right 2nd intercostal space, midclavicular line - CORRECT ANSWER -B -Left 5th intercostal space, midclavicular line

A 40 year old, female, African American patient presents for history and physical. Upon your initial assessment, you notice she has severe exophthalmos as pictured below. Which one of the following diagnoses below would be the highest on your differential diagnose of this physical examination finding?

- A -Bilateral conjunctivitis
- B -Hyperthyroidism
- C -hypothyroidism
- D -Myxedema - CORRECT ANSWER -B -Hyperthyroidism

Your patient with a suspected diagnosis of COPD has been seen by pulmonology and has undergone a pulmonary function test (PFT) with spirometry. As the patient's primary healthcare provider, you have been asked to explain the findings of the PFT to the patient in a follow-up visit at which time the patient asks what the study was evaluating. To describe the PFT to the patient in more useful terms, you state that the large inspiration of air to the furthest extent they could reasonably accomplish followed by a full exhalation is referred to as which of the following measurements during the PFT?

- A -Forced Expiratory Volume over 1 second (FEV1)
- B -Functional Reserve Capacity
- C -Inspiratory Reserve
- D -Forced Vital Capacity - CORRECT ANSWER -D -Forced vital capacity

Your patient has a diagnosis of Addison's disease. Which of the following might you expect to find during examination?

- A -Abdominal striae
- B -Dowager hump
- C -Low body temperature
- D -Moon face - CORRECT ANSWER -B -Dowager hump

The nurse practitioner's evaluation of a patient with Diabetes Mellitus type 2 should include which of the following while evaluating for end organ dysfunction of the disease?

- A -Renal function panel
- B -Urinalysis
- C -Non-dilated eye exam
- D -All of these are appropriate options - CORRECT ANSWER -D -All of these are appropriate options

During your visit with a 19 year old patient for a college health physical, your health history includes a diagnosis of angioedema. What of the following parts of the body are likely involved?

- A -Isolated to the colon

B -Anywhere in the enteral tract

C -Chest

D -Face and Lips - CORRECT ANSWER -D -Face and Lips

Which of the following dermatologic lesions is precancerous and likely due to prolonged exposure to UV-B?

A -Actinic Keratosis

B -Basal cell carcinoma

C -Verucca

D -Seborrheic dermatitis - CORRECT ANSWER -A -Actinic Keratosis

Based on your evaluation of ABCDE for melanoma, which of the following represents a suspicious finding?

A -Irregular borders

B -Symmetrical nature

C -Brown color

D -Diameter of 0.4 cm - CORRECT ANSWER -A -Irregular borders

Your patient is complaining of hypersomnia, lack of motivation, weight gain, and anhedonia. Suspecting a diagnosis of clinical depression, you anticipate the patient will benefit from treating their underlying deficit of which of the following neurotransmitters?

A -GABA

B -Serotonin

C -Dobutamine

D -Glutamate - CORRECT ANSWER -B -Serotonin

As a prudent nurse practitioner, the diabetic, hypertensive patient you are seeing should be evaluated for early evidence of renal damage from both diabetes and hypertension. Which of the following assessment tools should the nurse practitioner order first for the evaluation of early renal dysfunction secondary to diabetes or hypertension?

A -BUN/creatinine ratio

B -Urinalysis with micro/macro albumin

C -Renal biopsy

D -Urine sodium - CORRECT ANSWER -B -Urinalysis with micro/macro albumin

While evaluating a patient in your clinic for a routine health visit, you auscultate crackles in the poster left lower lobe, have the patient cough, with follow-up auscultation revealing clear breath sounds. Which one of the following would you suspect?

A -Congestive heart failure

B -Atelectasis

C -Laryngospasm

D -Bronchiactasis. - CORRECT ANSWER -B -Atelectasis

Your 39 year old patient who has recently been hospitalized for an appendectomy and is being seen in your clinic for post-operative follow-up with primary care. On assessment, the patient complains of some incisional pain and otherwise examination is normal, with the exception of dull percussion sounds noted on the thorax over lung tissue. Which of the following diagnoses would be explained by this finding in post-operative patient?

A -Left-sided heart failure

B -Chronic bronchitis

C -Atelectasis

D -Healthy patient with no coexisting disease - CORRECT ANSWER -C -Atelectasis

You are evaluating a 41 year old female patient in your clinic with symptoms of right upper quadrant pain which worsens with deep breathing. The patient exhibits a positive Murphy sign. These findings are most consistent which one of the following?

A -Appendicitis

B -Cholecystitis

C -Crohn's flare

D -Pancreatitis - CORRECT ANSWER -B -Cholecystitis

In educating your patient about the non-pharmacologic management of gastroesophageal reflux disease, you include teaching to the patient that their heartburn is aggravated by all of the following except which one?

A -Activities including lifting or bending over

B -Alcohol intake

C -Foods, such as citrus, onions and coffee

D -Gastric dumping, or increased emptying into the small intestines - CORRECT ANSWER -D
-Gastric dumping, or increased emptying into the small intestines

The patient is experiencing acute closed angle glaucoma. Which of the following examination findings by the nurse practitioner is most consistent with their diagnosis?

A -Macular degeneration

B -Increase in intraocular pressure

C -AV nicking

D -Loss of aqueous humor volume - CORRECT ANSWER -B -Increase in intraocular pressure

While managing the care of the patient with chronic alcoholism, the nurse practitioner would likely anticipate which findings on the CBC with differential?

A -Low MCV and MCH

B -Normal MCV and MCH

C -Chronic alcoholism will not affect the differential

D -Elevated MCV and MCH - CORRECT ANSWER -D -Elevated MCV and MCH

The nurse practitioner is caring for a patient with an elevated WBC, fever, chills, and malaise. When developing a differential diagnosis for this finding, which of the following is not a potential cause of the elevated WBC?

A -Sepsis

B -Diabetes Mellitus Type 2

C -Leukemia

D -Recent oral corticosteroid therapy - CORRECT ANSWER -B -Diabetes Mellitus Type 2

Your 21 year old sexually active female patient states during a routine health exam that they have some "weird bumps" on their vulva. She is concerned she has a sexually transmitted infection. You notify her that condyloma are caused by exposure to which of the following?

A -Chlamydia

B -Herpes zoster

C -Human papillomavirus type 6 and 1

D -Parvovirus B19 - CORRECT ANSWER -C -Human papillomavirus type 6 and 1

Your patient who has underwent a recent major medical procedure is at a rehabilitation center and is having a hard time being motivated to do therapy. When you interview them as the nurse practitioner on staff for the subacute rehab center, they appear despondent, and are having a hard time being wakeful during therapy sessions. They have stable vital signs, temperature, urine output, and are not ill-appearing. As a prudent nurse practitioner, you understand this may represent which of the following?

A -Cushing syndrome

B -Situation depression

C -Addison's disease

D -Untreated anxiety - CORRECT ANSWER -B -Situation depression

The 18 year old female patient who inappropriately exhibits fear of abandonment, intense interpersonal relationships, affective instability, and recurrent self-harm describes which of the following diagnoses:

A -Borderline personality disorder

B -Seasonal affective disorder

C -Reactive attachment disorder

D -Bipolar disorder - CORRECT ANSWER -A -Borderline personality disorder

You are treating a patient who has stopped taking their diuretic regimen against medical advice while they are on vacation since it made them urinate too frequently for their plans.

Now they are 21 pounds heavier than their baseline weight, have respiratory crackles in bilateral bases, and have severe generalized lower extremity and truncal edema extending to the sacrum and abdomen. On your documentation, this is referred to as which of the following conditions?

A -Nephrotic syndrome

B -Syndrome of inappropriate antidiuretic hormone (SAIDH)

C -Ascites

D -Anasarca - CORRECT ANSWER -D -Anasarca

The 84 year old lethargic patient who lives alone accidentally overdosed their amlodipine (Norvasc) was found by their daughter and taken to your clinic for evaluation. On exam, you found her blood pressure of 80/42 which the daughter says was "about what she found on her home cuff for the last 6 hours before bringing her in to be evaluated". The patient was then transferred to the hospital for evaluation. During her hospitalization she was also

evaluated with CBC, BMP, and a UA. The results reflect normal labs except the UA showed trace WBCs in urine and no leukocyte esterases or nitrites and the BMP showed a creatinine of 1.9 with her normal baseline of 1.2 (normal range 0.5-1.2mg/dL) and BUN of 34, with a baseline of 20 (normal range 10-20 mg/dL). What is likely to cause which of her renal issues?

A -Pyelonephritis

B -Chronic kidney disease

C -Acute tubular necrosis

D -Glomerulonephritis - CORRECT ANSWER -C -Acute tubular necrosis

Your 52 year old male patient Gus has a diagnosis of heart failure with a low ejection fraction (HFrEF) (EF 30%) following a recent myocardial infarction and has been started on optimal medical therapy. Assuming he tolerates all the following medicines without side effects or contraindications, which one of the following agents should be avoided for optimal medical therapy specifically aimed at optimizing his HFrEF?

A -Amlodipine (Norvasc)

B -Entresto (Sacubitril/Valsartan)

C -Furosemide (Lasix)

D -Carvedilol (Coreg) - CORRECT ANSWER -A -Amlodipine (Norvasc)

Your 19 year old otherwise healthy male patient Vivek has been monitoring their peak flow at home after a recent visit at which time his symptoms suggest a new diagnosis of asthma. Which of the following is the most likely drug to be the first prescription?

A -fluticasone/salmeterol (Advair diskus) 250/50 BID PRN for shortness of breath

B -salmeterol (Serevent) 50mcg inhaled daily

C -albuterol (Xopenex) MDI PRN for wheezing

D -montelukast (Singulair) 10mg PO daily - CORRECT ANSWER -C -albuterol (Xopenex) MDI PRN for wheezing

Margo, a 47 year old female patient recently underwent routine surveillance labs during her annual visit. From a routine screening lab of Hgb A1C of 7.2, you have diagnosed her with type 2 diabetes mellitus (T2DM) and anticipate discharging her with medication and referral to diabetic education. Your patient teaching should include notification of which common side effect of the most commonly prescribed first agent for T2DM?

A -diarrhea

B -delayed gastric emptying

C -mycotic infections

D -constipation - CORRECT ANSWER -A -diarrhea

Oliver, a 62 year old otherwise healthy male patient with an active lifestyle presents to your clinic today with a chief complaint of gnawing abdominal pain with a history of orthopedic overuse injuries. In developing a working differential diagnosis for this patient, which of the following questions is most useful in probing this further to rule out more serious conditions?

A -What time of the day are you taking your acetaminophen (Tylenol)?

B -Have you been taking any non-steroidal anti-inflammatory medications lately?

C -When was the last time you took topical corticosteroids for pain?

D -Have you noticed any particular food has made this worse? - CORRECT ANSWER -B - Have you been taking any non-steroidal anti-inflammatory medications lately?

Zeke, a 2 year old male patient presented to your primary care clinic with unilateral leg swelling and tenderness after an "all nighter" playing video games. You suspect he has a

provoked DVT from immobility and an ultrasound has been ordered. While awaiting this exam to be performed, you preemptively discuss anticoagulation with the patient assuming he will most likely be needing this therapy. Which of the following represents adequate understanding from the patient?

A -The goal for my INR on rivaroxaban (Xarelto) should be somewhere over 2.0

B -Regardless of the venous doppler findings, I can start warfarin (Coumadin) alone and it will take around 4-5 days to get the drug to properly anticoagulate me

C -If they find a blood clot, I will need to use enoxaparin (Lovenox) in addition to warfarin (Coumadin) until my INR is over 2.0

D -I will need to take enoxaparin (Lovenox) if I started on rivaroxaban (Xarelto) -
CORRECT ANSWER -C -If they find a blood clot, I will need to use enoxaparin (Lovenox) in addition to warfarin (Coumadin) until my INR is over 2.0

Which of the following are common causes of a provoked deep vein thrombosis (DVT)?

A -Cancer

B -Factor V Leiden

C -Protein C or S deficiency

D -All of these are common causes of provoked DVT - CORRECT ANSWER -D -All of these are common causes of provoked DVT

In discussing a new diagnosis of human immunodeficiency virus (HIV) for your patient, the patient demonstrates good understanding of the possible agents which may be used to include which of the following:

A -All of these may be used to manage my disease

B -Protease inhibitors

C -Nucleoside reverse transcriptase inhibitors

D -Non-nucleotide reverse transcriptase inhibitors - CORRECT ANSWER -A -All of these may be used to manage my disease

Which class of medications are indicated as first line management of both post-traumatic stress disorder (PTSD) and major depressive disorder?

A -Selective serotonin reuptake inhibitors