

1. A 36-year-old female presents with fever, myalgia, and confusion. She recently returned from a camping trip in the Midwest and reports multiple tick bites. Physical exam reveals petechial rash on the wrists and ankles. Laboratory tests show thrombocytopenia and elevated liver enzymes. Which of the following is the most appropriate next step in management?

- A. Start doxycycline empirically
- B. Order serologic testing and wait for results before starting treatment
- C. Initiate corticosteroids for possible autoimmune encephalitis
- D. Refer for lumbar puncture to rule out meningitis

Answer: A

2. A 42-year-old female presents with lower back and pelvic pain for the past week. She reports weakness and numbness in her left foot and she had an unexpected episode of incontinence this morning. Upon examination, the NP observes weakness (3/5) in the left foot with dorsiflexion & plantarflexion and there is a diminished patellar reflex on the left. Which of the following is the MOST appropriate next step in the management of this patient?

- A. Initiate NSAIDs and schedule physical therapy
- B. Order a pelvic ultrasound and refer to gynecology
- C. Monitor symptoms and re-evaluate in 48 hours
- D. Obtain urgent MRI of the lumbosacral spine

Answer: D

3. A patient presents for a routine evaluation. She has no complaints other than occasional tingling in the right lower extremity. Neurologic exam reveals full strength (5/5) in all extremities, intact coordination, and normal reflexes. Bilateral lower sensation is intact to light touch and pin prick. Based on these findings, which of the following is the most appropriate clinical interpretation?

- A. The findings are indicative of cauda equina syndrome and require emergent surgical referral

B. The findings are consistent with a peripheral nerve irritation and warrant further monitoring

C. The findings suggest an upper motor neuron lesion requiring urgent imaging

D. The exam is normal and no further follow-up is needed

Answer: B

4. A 30-year-old patient presents for follow-up after a spontaneous abortion two weeks ago. She reports persistent sadness, low energy, and disrupted sleep. She states, "Some days I don't see the point in getting out of bed." What is the most appropriate next step in her care?

A. Initiate a trial of antidepressants

B. Normalize her emotions as part of the grieving process and schedule follow-up in 1 month

C. Assess for suicidal ideation

D. Recommend rest and journaling to help process her grief

Answer: C

5. A 29-year-old patient presents for follow-up care one week after experiencing a spontaneous miscarriage. She reports feeling emotionally overwhelmed, fatigued, and having little appetite. In addition to gynecologic care, which of the following assessments is the most critical to prioritize at this stage to ensure comprehensive care without complications?

A. Cardiovascular assessment to assess for circulatory abnormalities

B. Gastrointestinal assessment to evaluate recent dietary changes

C. Endocrine evaluation to rule out thyroid dysfunction

D. Mental health to evaluate emotional status

Answer: D

6. A 68-year-old male presents with a worsening headache that has changed in intensity and character over the past week. He reports increased difficulty concentrating, occasional blurred vision, and a few instances of imbalance. What is the MOST appropriate next step in the evaluation of this patient?

- A. Order urgent neuroimaging to evaluate for intracranial pathology
- B. Recommend rest, hydration, and follow-up in 48–72 hours
- C. Initiate migraine treatment and refer to outpatient neurology
- D. Assess for depression and start antidepressant therapy

Answer: A

7. A 35-year-old female presents with pelvic pain that has progressively worsened over the past 5 days. She also reports fever, unintentional weight loss over the last month, and intermittent urinary incontinence. On the physical exam, she has suprapubic tenderness and decreased strength in her left lower extremity. Which of the following is the MOST appropriate clinical action?

- A. Refer to urology
- B. Prescribe antibiotics
- C. Recommend supportive care and follow-up in one week
- D. Order imaging and laboratory work

Answer: D

8. A 38-year-old female presents with acute lower back pain radiating to her left leg. She reports new onset tingling in her foot and difficulty initiating urination. She denies trauma but notes that her periods have been irregular and heavier than usual. Which of the following findings is MOST concerning and warrants immediate evaluation?

- A. Acute back pain with no history of trauma
- B. Difficulty initiating urination and lower extremity paresthesias
- C. Radiation of pain to the leg and history of heavy periods