Week 2 Full Length Practice Exam

- Due Jul 19 at 11:59pm
- Points 150
- Questions 150
- Available Jul 16 at 12am - Jul 19 at 11:59pm
- Time Limit 180 Minutes

Attempt History

	Attempt	Time	Score
LATEST	Attempt 1	129 minutes	150 out of

Score for this quiz: 150 out of 150
Submitted Jul 18 at 8:59pm
This attempt took 129 minutes.
Correct answer

Question 1
1 / 1 pts

Your patient presents with pale, waxy legs, weak peripheral pulses, and states he is having difficulty walkin
pain in his calves. The most appropriate non-invasive test to evaluate his leg vascular flow quality is which o

- Angiogram of the leg with runoff
- Bilateral popliteal blood pressures
- Ankle Brachial Index (ABI)

ABI is the most effective way to evaluate vascular flow in a non-invasive way, and the angiogram of the leg
way. Bilateral popliteal blood pressures would not show discretion between upper and lower body if both eq
tests are not used as a diagnostic tool for claudication or PAD.

- Exercise stress test

Correct answer

Question 2
1 / 1 pts

The inability to fully relax the myocardium during relaxation is a trademark of which of the following diagnos

- Grade 2 systolic dysfunction
- Systolic heart failure
- Grade 3 systolic dysfunction
- Diastolic dysfunction

The inability for the heart to relax is a trademark of the diagnosis of diastolic dysfunction and is common in hypertrophic myocardium.
Correct answer

Question 3
1 / 1 pts

A geriatric patient is being treated for recurrent deep vein thrombosis with warfarin, 5mg PO daily. The Inter (INR) is 1.5. The nurse practitioner should:

- Maintain the dose
- Increase the dose
- Hold the dose
- Decrease the dose

The goal for DVT management is 2.0-3.0 and therefore the dose should be increased. Of note (and not add question), this patient should be bridged if they have an active thrombus as initiating warfarin without first br development of worsening of the thrombotic burden before it gets smaller due to the immediate affect of inh which act as the body's natural anticoagulant. That is beyond the scope of this question, but very important patient with a known thrombotic state. If they have an active clot, thrombus, or embolus, unless there is a v

not, they ALWAYS should be bridged until therapeutic with the INR when initiated on warfarin therapy. How
DOAC (direct oral anticoagulant, bridging is not required).
Correct answer

Question 4
1 / 1 pts

Recommendation for lipid check in adolescent with type 1 DM?

- 10 years
- 5 years
- 2 years
- 1 year

Remember than with pediatric patients with diabetes, the easiest way to remember the evaluation schedule
with annual physicals.

Wrong answer

Question 5
1 / 1 pts

An example of secondary prevention for a diagnosis of coronary artery disease includes which of the followi

- Practicing yoga and meditation to reduce stress
- Coronary artery bypass grafting
- Controlling hypertension

CABG represents the only guaranteed evidence of fixing patients who already have coronary artery disease
prevention strategies.

- LDL decreasing from 120 to 98 with healthy diet

Correct answer

Question 6
1 / 1 pts

An adult patient recently placed on angiotensin-converting enzyme (ACE) inhibitor for hypertension returns cough. On examination, no indication of a respiratory problem is noted. Which of the following is the most a

- Continue the current treatment regimen
- Continue the ACE inhibitor and prescribe a mild antitussive
- Switch to an angiotensin II receptor blocker
- Obtain a chest X-ray with posterior-anterior and lateral views

Correct answer

Question 7
1 / 1 pts

What is the chamber which directly pumps blood into the ascending aorta?

- Right Atrium
- Right Ventricle
- Left Atrium
- Left Ventricle

In the pathway of cardiac blood flow, the aorta is directly after the left ventricular outflow tract.

Correct answer

Question 8
1 / 1 pts

You are the nurse practitioner caring for the patient with a diagnosis of premature atrial contractions. Initial priority intervention?

- Performing a comprehensive physical examination
- Palpating a radial pulse while auscultating heart tones for pulse deficits
- Ordering 2L NC oxygen if symptomatic

Premature atrial contractions are both common and typically not harmful to the patient other than causing m palpitations, and anxiety. This question is asking for an intervention. Although all these are reasonable choi care, none of the options above other than applying oxygen are interventions; rather, they are evaluations.

- Ordering a 12-lead EKG

Correct answer

Question 9
1 / 1 pts

At a follow up from a hospitalization, an adult patient presents with ankle edema. Which of the following me cause of the edema?

- HCTZ
- Metformin
- Norvasc
- Nebivolol

The most common side effects of calcium channel blockers include constipation and lower extremity edema any relationship specifically with edema, in fact, hydrochlorothiazide specifically reduces edema via diuresis

Correct answer

Question 10
1 / 1 pts

Ophthalmic examination of a patient with a 10-year history of poorly controlled hypertension, despite three- reveal:

- Increased vascularization
- Drusen bodies
- Arteriolar narrowing
- Optic atrophy

Correct answer

Question 11
1 / 1 pts

A 60-year-old woman presents for a routine check-up. She has a history of hypertension, type 2 diabetes m
She is currently on lisinopril, metformin, and atorvastatin. She has no new complaints. On examination, her
mmHg, heart rate is 72 beats per minute, and BMI is 32 kg/m². Recent laboratory tests reveal HbA1c of 7.5
mg/dL, and creatinine of 1.1 mg/dL. What is the most appropriate management plan to optimize her care?

- Increase the dose of atorvastatin
- Increase the dose of lisinopril
- Recommend lifestyle modifications including diet and exercise
- Increase the dose of metformin

Although all these are potential options to consider, the loss of weight is most likely to affect all of her issue
the first therapy before adding additional mediations, especially as she is already on 3 agents, yet her BMI

Correct answer

Question 12
1 / 1 pts

A 27-year-old woman presents with frequent headaches, galactorrhea, and amenorrhea. MRI of the brain re
What is the most appropriate initial treatment?

- Radiation therapy
- Corticosteroids

- [x] Dopamine agonists
- [ ] Surgery

Dopamine agonists are commonly used to initially counteract the effects of pituitary adenomas. Surgery or r
eventual destination therapy, however the question specifically asked about the initial management.
Correct answer

Question 13
1 / 1 pts

A 33-year-old woman presents with intermittent palpitations, anxiety, and heat intolerance. Her thyroid funct
high free T4. What is the most likely diagnosis?

- [x] Hyperthyroidism
- [ ] Thyroiditis
- [ ] Graves' disease
- [ ] Hypothyroidism

Clinical findings of hyperthyroidism are described well in this scenario. TSH will be low since there is no nee
since there's already an overage of its presence, and the T3/T4 will be elevated.

Correct answer

Question 14
1 / 1 pts

A starting dose for a elderly adult patient with a BMI of 20 needing levothryoxine

- [x] 25 mcg
- [ ] 75 mcg
- [ ] 100 mcg
- [ ] 125 mcg

The widely considered best practice for treatment of hypothyroidism in the elderly is to "go slow and start lo
appropriate low dose to start with of these options. It is possible that over time the dose will be increased u
obtained, but the risk of over-dosing the patient outweighs the desire to quickly achieve this state.
Correct answer

Question 15
1 / 1 pts

All the following are symptoms of hypocalcemia except:

- Visual field deficits
- Abdominal pain
- Tetany
- Paresthesia in fingers and toes

Visual field deficits is a potential symptom of pituitary adenoma. All other are symptoms related to hypocalc

Correct answer

Question 16
1 / 1 pts

An adult male who has managed type 2 diabetes mellitus well for many years presents for a 6-month follow
from 7% to 9% over the interval. All other laboratory values are normal and his BMI is still 25. His psychiatri
(Zypreza) to the medical regimen. The nurse practitioner will most likely:

- Discontinue the olanzapine until the patient's psychiatrist has been consulted
- Begin to increase the patient's diabetes medications incrementally
- Encourage the patient to start walking for 30 min every other day
- Encourage the patient to cut back on dietary intake

A common side effect of initiation of onanzapine (Zyprexa) is increased appetite and it is evidenced by this
increase from 7 to 9%. The patient should have their diabetic mediation dose increased to help counteract t

long-term strategy may include consult the psychiatrist about decreasing the dose or altering the medicatio
considerable health risk to the patient. As that specifically was not an option, the best option would be to au
medication regimen. Stopping the olanzapine without discussing it with the psychiatrist would potentially ca
discontinuation syndrome.
Correct answer

Question 17
1 / 1 pts

A 60-year-old man presents with recurrent kidney stones, abdominal pain, and bone pain. Laboratory result
and low phosphate levels. What is the most likely diagnosis?

- Hypercalcemia of malignancy
- Hyperparathyroidism
- Hypoparathyroidism
- Osteoporosis

Parathyroid hormone increases serum calcium (reducing bony calcium concentration in the process) and ex
experiencing this clinical mileu.

Correct answer

Question 18
1 / 1 pts

A 48-year-old female presents with a history of hypothyroidism controlled with levothyroxine (Synthroid). Sh
taking excessive amounts of the drug over the past year, to control her weight. This behavior can cause or
conditions?

- Migraine headaches
- Thyroid malignancy
- Bradycardia

Osteoporosis

Overuse of levothyroxine is not associated with thyroid malignancy or migraine headaches, it is more likely than bradycardia. Osteoporosis is associated with overuse of levothyroxine.
Correct answer

Question 19
1 / 1 pts

All the following are factors associated with a development of type II diabetes EXCEPT:

peripheral vascular disease

positive family history

delivering an infant greater than 9 lbs.

weight greater than 20% of ideal body weight

Having peripheral vascular disease does not have correlation to development of DM2, whereas all the othe

Correct answer

Question 20
1 / 1 pts

A patient has a 2 cm pituitary adenoma on MRI. Deficiency of one of the pituitary hormones can cause imm and has a risk of death. Which is the most critical hormone deficiency to rule out?

Prolactin

ACTH

FSH/LH

TSH

Adrenal crisis is a life-threatening emergency and needs to be ruled out. Unrecognized/untreated adrenal ir ACTH is the pituitary hormone responsible for cortisol production.

Correct answer

Question 21
1 / 1 pts

An elderly patient diagnosed with end-stage lung cancer has been refusing meals, opting instead for ice cre concerned about the patient not getting enough nutrition. The NP:

- prescribe methylphenidate for appetite stimulation
- explains loss of appetite is common at the end of life
- screens the patient for depression
- order a U/A and CBC

Death is an uncomfortable topic, and must be handled tactfully. Factual re-orientation to the terminal state c appropriate when unrealistic expectations for their longevity have been voiced. The reasonable choice in thi normalcy of what the patient is experiencing with their loss of appetite and their terminal state. Testing the p no clinical bearing on this particular time nor does prescribing methylphenidate. Ordering a UA and CBC wo urinary tract infection, and that is not a likely scenario to describe the patient's existing condition. Support th helping the man enjoy the ice cream he requested.
Correct answer

Question 22
1 / 1 pts

How should a nurse practitioner evaluate if palliative care is effective?

- The symptoms causing discomfort are lessened.
- Advanced directives have been discussed and signed.
- The illness or disease is in remission.
- An out of hospital "Do not resuscitate" order is in place.

Palliative care consults are performed for patients who have a near terminal condition with a very minimal a
typically 14 days or less it does not mean a sensation of treatment, but it does focus the treatment on their c
Correct answer

Question 23
1 / 1 pts

The management of COPD in the elderly is best guided by:

- radiologic imaging.
- symptomatology.
- arterial blood gases.
- spirometry.

Symptomatology is what guides COPD management since the severity and frequency of symptoms will war
medications as exacerbations present.

Although very useful tool for chronic management and baseline status, spirometry does not typically dictate
disease state itself. Our blood gases may be used for clinically correlate severity during an exacerbation, ar
showcase severity of stable chronic finding such as somatic, lung tissue or bullae.

Correct answer

Question 24
1 / 1 pts

An elderly patient is being admitted to the skilled nursing facility and is being screened for the risk of falling.
information would trigger a complete falls assessment?

- A history of two or more falls in the prior year
- Medication regimen including acetaminophen for pain and a calcium channel blocker
- Osteoarthritis in the hips and knees
- Living alone and having mild dementia

Of these options, the only two that have any clinical bearing on falls are a patient who has a demonstrated i year and a patient who has a altered cognition, such as the patient who is living alone and has mild dement winner is the patient who has already demonstrated to fall in the last year and they should certainly be a val complete fall assessment.

Correct answer

Question 25

1 / 1 pts

A 92-year-old presents with a decline in personal care and increasing forgetfulness. They had a CVA a thre changes then which has slowly progressed. The more likely diagnosis in this case is?

- Alzheimer's dementia
- Lewy-body dementia
- Progressive vascular dementia
- Mini-strokes

Correct answer

Question 26

1 / 1 pts

The best medication for a patient who presents with irritable bowel syndrome with cramping is:

- aluminum/magnesium hydroxide (Maalox).
- bismuth subsalicylate (Pepto-Bismol).
- lactulose (Kristalose).
- dicyclomine (Bentyl).

Of these options, only dicyclomine (Bentyl) is an antispasmotic.

Correct answer

Question 27
1 / 1 pts

A patient states that his girlfriend was recently diagnosed with hepatitis, and he tests positive for hepatitis C diagnosis because his father died after a liver transplantation. Which existing information in the pati significant factor in the progression of liver failure?

- intermittent acetaminophen intake
- chronic alcohol intake
- Lack of fluid intake
- Lack of exercise

Chronic alcohol intake and the damage to the liver is more causative and predictive to liver failure than exer levels (which more affect hydration status, and acetaminophen intake which is noted to be only intermittent.
Correct answer

Question 28
1 / 1 pts

A 36-year-old female presents to your service with RUQ pain, fever, nausea and vomiting, and loss of appe present in the gallbladder, no dilation in the biliary duct, US shows edema and wall thickening. What is the p

- Acute cholecystitis
- Cholangiocarcinoma
- Choledocholithiasis
- Acute pancreatitis

Acute cholecystitis, due to no duct dilation or stones being present in the duct or any abnormal obstruction. patients' symptoms is stones/inflammation of the gallbladder.

Correct answer

Question 29
1 / 1 pts

A 39-year-old female is being seen by your service for diarrhea. Patient reports 3-4 loose stools a day. She
The patients stool culture was negative, her fecal occult and ESR were elevated. Which lab would be impor
suspecting IBD?

- D-Dimer
- CRP
- Fecal calprotectin
- CBC, CMP

Fecal calprotectin which is a biomarker tends to be higher and is associated with active inflammatory bowel
ulcerative colitis.
Correct answer

Question 30
1 / 1 pts

An older adult has a follow-up fasting lipid panel 6 months after making therapeutic lifestyle changes. LDL=2
<100mg/dL), HDL=44mg/dL, and triglycerides=180mg/dL (Normal-<150mg/dL). The patient is placed or
later, the patient presents for follow-up and complains of body aches. In addition to creatine phosphokinase
tests should the nurse practitioner order?

- reatine phosphokinase (CPK) electrophoresis
- Serum calcium levels
- Liver transaminase (AST and ALT)

levels - BUN and creatinine

Due to the potential liver function test elevation found with statin use, LFTs of AST/ALT should be checked
therapy.

Wrong answer

Question 31
1 / 1 pts

Anorexia nervosa occurs most commonly in which of the following?

- In adolescents of higher social-economic status
- Individuals with many friends
- Individuals from large families
- High-level athletes

Anorexia is more common in high performers, who feel a need to be socially accepted. Of these options, hig ones who fit this mold. Adolescence of higher, social economic status are less likely because they don't usu accepted in society, and individuals with many friends likewise are more accepted. Individuals from large fa social engagement due to a larger support system.
Correct answer

Question 32
1 / 1 pts

A 63-year-old male presents with a suspected lower GI bleed. He reports passing frank small amounts of bl denies use of NSAID's or blood thinners. What questions would be important to ask to further differentiate y

- Is there pain associated with passing of stool
- All options are appropriate
- When was his last colonoscopy?
- Changes in bowel habits

All the above, these questions would help determine if this bleed was associated with a potential diverticula painful bowel movement associated with IBD (UC/Crohn's), and changes in bowel habit/colonoscopy risk fo

Correct answer