

ANCC FNP EXAM QUESTIONS

Which drug is associated with increased lipoprotein levels?

1. furosemide (Lasix)
2. Hydrochlorothiazide (HCTZ)
3. Spironolactone (Aladactone)
4. Triamterene hydrochlorothiazide (HCTZ)

What is the main reason for giving a progestational medication to perimenopausal women who use estrogen?

1. preventing hot flashes
2. preventing osteoporosis
3. promoting growth of uterine lining
4. decrease the risk of endometrial hyperplasia
4. decrease the risk of endometrial hyperplasia

The FNP asks a patient to perform rapid, alternating movements of the hands to evaluate:

1. cerebellar function
2. cognitive function
3. reflex arc function
4. stereognostic function
1. cerebellar function

A 38 yo Vietnamese patient tells the FNP that his parent died in her 40s from liver cancer. That patient is at risk for:

1. hepatitis B
2. malaria
3. tularemia
4. tyrosenemia
1. hepatitis B

A difficult aspect of determining occupational exposure to disease is the:

1. confidentiality of the information in company records
2. inaccuracy of disease reporting
3. long latency period between exposure and disease development
4. reliance on workers' memories
2. long latency period between exposure and disease development

To comply with regulations for third-party payor reimbursement and documentation, a family nurse practitioner correlates:

1. evaluation and management code with history, examination and medical decision making.
2. health outcomes with physical examination findings and plan of care.

The family nurse practitioner examines a patient who has sustained a non-workrelated injury that interferes with the patient's ability to perform his or her job. The patient does not qualify for medical disability and has a reasonable chance of engaging in a suitable occupation with proper therapy. The nurse practitioner recommends that the patient apply for:

2. Family and Medical Leave Act benefits.
3. home health services.
4. Social Security benefits.
- 4.vocational rehabilitation services.
- 4.vocational rehabilitation services.

A 45-year-old patient who is an opera singer reports progressive hoarseness for the last four weeks. The hoarseness began after a three-hour opera performance. The patient does not smoke and reports no weight loss, upper respiratory infection, dysphagia, or shortness of breath. The family nurse practitioner manages this patient by:

1. ordering a computed tomography scan of the head.
2. ordering an immediate lateral neck x-ray.
3. prescribing systemic antibiotics and cool mist inhalations.
4. requesting a referral for evaluation of the larynx.
3. requesting a referral for evaluation of the larynx.

Routine immunization guidelines recommend administering the hepatitis B vaccine at birth and repeating doses at:

1. one month and six months.
2. one month and two months.
3. four months and two years.
4. six months and 12 months.
1. one month and six months.

A patient who sustained a myocardial infarction comes to the clinic for a refill of atorvastatin (Lipitor). The family nurse practitioner explains that the medication is prescribed for:

- 1.cancer prevention.
2. primary prevention.
3. secondary prevention.
4. tertiary prevention.
4. tertiary prevention.

Which health promotion strategy is most appropriate for adolescents who are obese?

1. individual-based behavior modification.
2. Motivational interviewing.
3. Parents should regulate meals.
4. Presenting video case studies.
2. Motivational interviewing.

Treatment of viral conjunctivitis includes the use of:

1. antihistamine/decongestant drops.
2. antihistamine/mast cell stabilizer drops.
3. cold compresses.
4. steroid eyedrops.

3. cold compresses

A 60-year-old patient with diabetes has a blood pressure reading of 150/96 mmHg. After three months of increased exercise and decreased calories, the patient has lost 10 lb (4.54 kg). The patient's follow-up blood pressure is 142/94 mmHg. Which medication does the family nurse practitioner prescribe?

1. Enalapril (Vasotec).
 2. Furosemide (Lasix).
 3. Hydrochlorothiazide (HydroDIURIL).
 4. Propranolol (Inderal).
1. Enalapril (Vasotec).

A family nurse practitioner advises a nursing mother who has postpartum mastitis to take antibiotics as prescribed and:

1. continue to nurse with both breasts.
 2. pump the unaffected breast with a lactation pump.
 3. take cool showers.
 4. temporarily switch to formula.
- continue to nurse with both breasts.

A patient who had a total gastrectomy one year ago complains of a sore mouth, indigestion, and tingling in the lower extremities. Which test is ordered by the family nurse practitioner?

1. Blood urea nitrogen level.
 2. Complete blood count.
 3. Liver function study.
 4. Thyroid function study.
2. Complete blood count.

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A 42-year-old patient with epistaxis, dilated pupils, tachycardia, and mild euphoria shows symptoms associated with the use of:

1. benzodiazepine (Alprazolam).
 2. cocaine.
 3. morphine (MS Contin).
 4. oxycodone (OxyContin).
2. cocaine.

A 40-year-old patient has had a generalized, nonpruritic skin eruption with intermittent exacerbations over the past 10 years. Currently, a well-circumscribed erythematous plaque appears over the patient's left gluteal fold area. The lesion is covered with scales and has some fissuring. The family nurse practitioner makes a diagnosis of:

1. atopic dermatitis.
 2. ichthyosis.
 3. psoriasis.
 4. tinea corporis.
3. psoriasis.

During cardiac auscultation, a soft first heart sound with a holosystolic apical murmur that radiates to the left axilla suggests:

1. aortic stenosis.

2. mitral regurgitation.
 3. mitral stenosis.
 4. mitral valve prolapse.
- mitral regurgitation.

A 68-year-old male patient reports an unintended weight loss of 15 lbs (6.8 kgs) over the last two months. The patient states that he feels well. His problem list includes depression, tobacco use, hyperglycemia, obesity, and dyslipidemia. The patient's medications are sertraline (Zoloft), metformin (Glucophage), simvastatin (Zocor), and famotidine (Pepcid). The family nurse practitioner initiates which three interventions?

- Decreasing the statin medication.
- Increasing the Glucophage dose.
- Evaluating medication side effect profile.
- Ordering a thyroid-stimulating hormone level test.
- Performing a depression screening.
- Ordering a thyroid-stimulating hormone level test.
- Performing a depression screening.
- Evaluating medication side effect profile.

To determine whether sufficient evidence exists to prescribe glucosamine for a patient who has osteoarthritis (OA) of the knee, the family nurse practitioner reviews three article summaries. Place the article summaries in sequential order of strength of evidence from strongest to weakest:

1. Investigators conducted a retrospective review of 1000 charts of patients who were diagnosed with OA and had glucosamine on their medication list. The investigators assessed the pain rating scale at the time the glucosamine was prescribed and compared this score with the pain rating scale three months after the medication had been prescribed. They also reviewed the progress notes and included only patients for whom clinicians stated in the note that the patient took the medication regularly.
2. Investigators randomly assigned a group of 1600 patients with OA of the knee to receive either a placebo or glucosamine for six months. The goal was to determine if glucosamine and/or chondroitin treats pain related to OA of the knee and could help prevent structural damage. The study found no benefit for pain relief for the study group compared with the placebo group.
3. Researchers evaluated the benefit of glucosamine for osteoarthritis of the hip and/or knee by searching MEDLINE and the Cochrane database for studies that investigated this question. The researchers included only studies that were double-blind, placebo-controlled, randomized trials of at least four weeks duration and tested glucosamine's effectiveness in treating OA in the knee or hip. Fifteen studies were included in the analysis and the investigators applied a statistical formula to evaluate these studies, giving the larger studies more weight.

- 1, 2, 3
- 1, 3, 2
- 2, 1, 3
- 2, 3, 1
- 3, 1, 2
- 3, 2, 1
- 3, 2, 1

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1. advises the parent to avoid giving the patient bottles of whole milk.
 2. consults with a physical therapist for muscle strengthening.
 3. observes for signs of diminished reflexes on the physical exam.
 4. orders an increase of iron supplements to 6 mg/kg per day divided in two doses.
- observes for signs of diminished reflexes on the physical exam.

Clinical practice guidelines are designed to:

1. be used in every patient situation.
2. increase variations in clinical care.
3. mandate practice decisions.
4. serve as a handbook to best practice.
4. serve as a handbook to best practice.

Susan, age 59, has no specific complaints when she comes in for her annual examination. She does, however, have type 2 diabetes mellitus (DM), slight hypertension, dyslipidemia, and central obesity. How would you diagnose her?

1. As a healthy adult with several problems.
 2. As having a glycemc event.
 3. As having metabolic syndrome.
 4. As having multiple organ dysfunction.
- (cards 23-43 obtained from DavisEdge)
As having metabolic syndrome

Which class of antihypertensive agents may be problematic for clients with diabetes?

1. Angiotensin-converting enzyme (ACE) inhibitors.
 2. Calcium channel blockers.
 3. Beta blockers.
 4. Alpha blockers.
- Beta blockers (they block tachycardia, which is 1st sign of hypoglycemia)

A low thyroid-stimulating hormone (TSH) can lead to:

1. Osteoporosis.
 2. Weight gain.
 3. Bradycardia.
 4. Brittle hair.
- Osteoporosis (due to increased metabolic state of hyperthyroidism)

Jeff, age 20, presents to the college health clinic with complaints of difficulty passing his urine and a discharge from his penis. Upon further investigation, you note that the discharge is urethral in origin. The most common cause of these symptoms in the young adult male population is:

1. Chronic prostatitis.
2. Prostatic abscess.
3. Acute prostatitis.
4. Prostatic hyperplasia.

You are referring a 73-year-old client for management of his prostate cancer with hormonal therapy. It is understood that goserelin acetate (Zoladex) acts as a method of androgen ablation by:

1. Blocking the release of follicle-stimulating hormone (FSH) and luteinizing hormone (LH).
2. Blocking 5-alpha-reductase, which converts testosterone into dihydrotestosterone.
3. Inhibiting the binding of testosterone to cancer cells.
4. Inhibiting the progression of cancer cells through the cell cycle.

Blocking the release of follicle-stimulating hormone (FSH) and luteinizing hormone (LH) [Goserelin acetate (Zoladex) and leuprolide acetate (Lupron) block the release of FSH and LH; administered IM]

Jan's mother has Alzheimer disease (AD). Jan tells you that her mother's recent memory is poor and that she is easily disoriented, incorrectly identifies people, and is lethargic. Jan asks you, "Is this as bad as it gets?" You tell her that her mother is in which stage of the disease?

1. Stage 1.
2. Stage 2.
3. Stage 3.
4. Stage 4.

Stage 3 (In stage 3, personality change is marked and depression may occur. Directions must be specific and repeated for safety, recent memory is poor, disorientation occurs easily, people are incorrectly identified, and the person may be lethargic)

Which of the following is not recommended for hoarseness?

1. Vocal rest.
2. Tobacco cessation.
3. Decrease in caffeine use.
4. Oral steroids.

Oral steroids (caffeine is dehydrating and should not be used in excess w/hoarseness; PO steroids are not routinely used to Tx hoarseness)

Cataracts are a common occurrence in patients over 60 years of age. You counsel your patient that the best cure for cataracts is:

1. Medications.
2. Dietary supplements.
3. Corrective lens surgery.
4. Optical devices.

Corrective lens surgery (The definitive management for a cataract is a surgical approach, one that removes the defective lens and replaces it with an artificial one)

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In a young child, unilateral purulent rhinitis is most often caused by:

1. A foreign body.
 2. A viral infection.
 3. A bacterial infection.
 4. An allergic reaction
- A foreign body (keyword here is unilateral!)

Which of the following is a benign neoplasm?

1. Leiomyoma.
2. Osteosarcoma.
3. Glioma.
4. Seminoma.

Leiomyoma (A leiomyoma is a benign neoplasm of the smooth muscle)

Barbara, age 27, had her spleen removed after an automobile accident. You are seeing her in the office for the first time since her discharge from the hospital. She asks you how her surgery will affect her in the future. How do you respond?

1. "Your red blood cell production will be slowed."
2. "Your lymphatic system may have difficulty transporting lymph fluid to the blood vessels."
3. "You'll have difficulty storing the nutritional agents needed to make red blood cells."
4. "You may have difficulty salvaging iron from old red blood cells for reuse."

"You may have difficulty salvaging iron from old red blood cells for reuse." (The spleen is not essential for life. When it is removed, the liver and bone marrow assume its functions. Although the bone marrow will produce and store hematopoietic stem cells, from which all cellular components of the blood are derived, it will not remove iron from old red blood cells for reuse)

You are working in an emergency department as an advanced practice registered nurse (APRN). An adolescent boy is brought in, unconscious, with a head injury after being struck by a car. He has no identification, and there is no parent or adult with him. What should you do?

1. Provide the appropriate medical treatment even if it involves surgery.
2. Do everything except order a blood transfusion, even if it is indicated, because you do not know the client's religious preferences.
3. Call the hospital attorney before instituting any care.
4. Contact all local police stations in an attempt to identify the client and find his parents before instituting treatment.

Provide the appropriate medical treatment even if it involves surgery. (The emergency treatment exception allows you to treat minors in emergency or life-threatening situations when a parent or guardian cannot be reached to give consent for treatment. This includes transfusions when necessary. The legal definition of an emergency medical condition is any condition that threatens the loss, impairment, or serious dysfunction of life or limb or causes severe pain)

Which of the following statements about Medicaid is true?

1. Medicaid is a federal plan created to provide care for indigent persons.
2. Medicaid pays for family planning services, dental care, and eyeglasses.
3. Eligibility requirements for Medicaid are mandated by the Health Care Financing Administration.

4. Medicaid is a program for the indigent financed jointly by the federal and state governments

Medicaid is a program for the indigent financed jointly by the federal and state governments (Financed jointly by the federal and state governments, Medicaid is a program created to pay for health care services for the indigent. Minimally, Medicaid must provide inpatient, skilled nursing facility, and home care; physician services; outpatient care; family planning services; and periodic screening, detection, and treatment of children under age 12)

Decreased facial strength indicates a lesion of which cranial nerve?

1. Cranial nerve III
2. Cranial nerve V
3. Cranial nerve VII
4. Cranial nerve VIII

CN VII [Decreased facial strength indicates a lesion of cranial nerve (CN) VII]

Doug, age 6, appears with abdominal distention and pain, an abdominal mass on the right side, fever, and slight hematuria. There is no precipitating event. What do you suspect?

1. A urinary tract infection (UTI).
2. Appendicitis.
3. Wilms tumor.
4. An intestinal obstruction.

Wilms tumor (A child with Wilms tumor commonly has abdominal distention or an abdominal mass. There may also be fever, abdominal pain, or hematuria. This kidney tumor requires surgical removal followed by chemotherapy. Radiation therapy is not necessary)

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The increased presence in a urinalysis of which of the following indicates the presence of bacteria or protein, which is seen in severe renal disease and could also indicate urinary calculi?

1. Crystals.
2. Casts.
3. Nitrites.
4. Ketones.

Casts (The presence in a urinalysis of increased amounts of casts indicates the presence of bacteria or protein, which is seen in severe renal disease and could also indicate urinary calculi)

Jill, age 49, has daily symptoms of asthma. She uses her inhaled short-acting beta-2 agonist daily. Her exacerbations affect her activities, and they occur at least twice weekly and may last for days. She is affected more than once weekly during the night with an exacerbation. Which category of asthma severity is Jill in?

1. Intermittent.
2. Mild persistent.
3. Moderate persistent.
4. Severe persistent.

Moderate persistent (Jill is in the step 3 (moderate persistent) category of asthma severity. This is because she has daily symptoms, with exacerbations affecting her activity, and nocturnal symptoms that occur more than once per week)

You have a patient you are considering starting on bupropion (Wellbutrin) for tobacco cessation and depression. What in the patient's past medical history would prevent you from prescribing this?

1. History of epilepsy.
2. Failure of other antidepressants to treat depression.
3. Obesity.
4. Coronary artery disease.

History of epilepsy (Bupropion lowers a patient's seizure threshold and is contraindicated in patients with a seizure history)

Jill, age 29, has numerous transient lesions that come and go, and she is diagnosed with urticaria. What do you order?

1. Aspirin.
2. Ibuprofen.
3. Opioids.
4. Antihistamines.

antihistamines (Transient urticaria requires antihistamines on a regular basis)

You are examining a patient in the intensive care unit (ICU) after a motor vehicle accident. The patient is intubated but opens his eyes in response to verbal commands. What score would you give him on the eye-opening portion of the Glasgow Coma Scale?

1. 4
 2. 3
 3. 2
 4. 1
- 3

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Martina, age 34, has AIDS and currently suffers from diarrhea. You suspect she has which protozoal infection of the bowel?

1. Giardiasis.
2. Amebiasis.
3. Cryptosporidiosis.
4. Escherichia coli.

Cryptosporidiosis (Cryptosporidiosis, a protozoal infection of the bowel, is common in immunocompromised clients. It causes villous atrophy and mild inflammatory changes and may secrete an enterotoxin)

Which lifestyle change decreases the risk of mortality greatest in regard to coronary heart disease?

1. Quitting smoking.
 2. Weight loss.
 3. Fasting low-density lipoprotein (LDL) cholesterol less than 100.
 4. Moderate exercise—greater than 30 minutes a day 3 times a week.
- Quitting smoking (Smoking decreases one's risk the greatest—12% in comparison to physical activity, which reduces the risk 5%)

A 55-year-old African American man with newly diagnosed hypertension presents to your primary care clinic for medication management. Today his blood pressure reads 145/95. He denies headache, blurred vision, chest pain, and shortness of breath. Which medication would you start him on?

1. Catapres.
2. Hydralazine.
3. Amlodipine.
4. Metoprolol.

Amlodipine (Calcium channel blockers along with thiazide diuretics are first-line treatment for African Americans with hypertension)

Greg, age 68, has just been given a diagnosis of congestive heart failure (CHF). Which of his medications should be discontinued?

1. Nifedipine (Procardia XL) for long-term management of his chronic stable angina.
2. Hydrochlorothiazide (HydroDIURIL) for his hypertension.
3. Enalapril (Vasotec) for his hypertension.
4. Butalbital for his headaches.

Nifedipine (Procardia XL) for long-term management of his chronic stable angina (Nifedipine (Procardia XL), a calcium channel blocker, should be discontinued, along with most antiarrhythmic agents, when a client develops CHF because both of these classes of medications are important causes of worsening heart failure)

Which of the following statements is true of mitral regurgitation?

1. It may be noted as a holosystolic murmur.
2. It is caused by stiff leaflets that limit flow from the left atrium to the left ventricle.
3. It occurs only as a result of congenital malformation of the mitral valve, which inhibits contact and closure of the cusps.
4. It results in a prolonged PR interval on electrocardiogram.

It may be noted as a holosystolic murmur (Because ventricular pressure exceeds atrial pressure at the beginning of systole, regurgitant backflow begins with the first heart sound (S1). The ensuing regurgitant murmur persists up to the second heart sound (S2), provided that the ventricular pressure at the end of systole still exceeds the atrial pressure. The direction of the regurgitant flow may be noted on auscultation. Mitral regurgitation is caused by shrunken, deformed cusps or shortened, fused chordae tendineae, which prevent closure of the leaflets)

When performing a sports physical exam on Kevin, a healthy 16-year-old boy, which question in the history is important to ask Kevin or his guardian?

1. Did anyone in your family ever have sudden cardiac death?
2. Does anyone in your family have elevated cholesterol levels?
3. Did you ever have any injury requiring stitches?
4. Does anyone in your family have a history of asthma?

Did anyone in your family ever have sudden cardiac death (The risk of sudden death during sports activities from hypertrophic cardiomyopathy may be greatly reduced with a thorough cardiac history and examination. If a child has a relative who died of sudden cardiac disease before age 55, that child could possibly have hypertrophic cardiomyopathy)

For which patient would you administer the human papillomavirus (HPV) vaccination?

1. Susie, age 7.
2. Janice, age 17, who had a baby 6 months ago and is breastfeeding.
3. Alice, age 18, who is allergic to yeast.
4. Jill, age 25, who is pregnant.

Janice, age 17, who had a baby 6 months ago and is breastfeeding (Women who are lactating or immunocompromised are eligible to receive the vaccine. It is also recommended for females aged 9 to 25 years, regardless of whether they have had sex yet and even if the women already have a history of genital warts, a positive HPV test, or an abnormal Pap test)

Max, age 35, states that he thinks he has an ear infection because he just flew back from a business trip and feels unusual pressure in his ear. You diagnose barotrauma. What is your next action?

1. Prescribe nasal steroids and oral decongestants.
2. Prescribe antibiotic ear drops.
3. Prescribe systemic antibiotics.
4. Refer Max to an ear, nose, and throat specialist

Prescribe nasal steroids and oral decongestants (Barotrauma of the auditory canal, causing a sensation of abnormal middle ear pressure, may be relieved by the use of nasal steroids and oral decongestants. There is no infection, just swelling of the airways, which causes the sensation of abnormal pressure)

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Which of the following white blood cell types are elevated in parasitic infections, hypersensitivity reactions, and autoimmune disorders?

1. Neutrophils.
2. Eosinophils.
3. Basophils.
4. Monocytes.

Eosinophils (Eosinophils are elevated in parasitic infections, hypersensitivity reactions, and autoimmune disorders; Neutrophils are increased in acute infections, the stress response, myelocytic leukemia, and inflammatory or metabolic disorders; Basophils are increased after a splenectomy and in hypersensitivity responses, chronic myelogenous leukemia, chickenpox, smallpox, and hypothyroidism; Monocytes are increased in chronic inflammatory disorders, tuberculosis, viral infections, leukemia, Hodgkin disease, and multiple myeloma)

Jim, age 22, a stock boy, has an acute episode of low back pain. The nurse practitioner orders a nonsteroidal anti-inflammatory drug (NSAID) and should educate him in which of the following?

1. Maintaining moderate bed rest for 3 to 4 days.
2. Calling the office for narcotic medication if there is no relief with the NSAID after 24 to 48 hours.
3. Beginning lower back strengthening exercises depending on pain tolerance.
4. Wearing a Boston brace at night.

Beginning lower back strengthening exercises depending on pain tolerance (resuming normal activity within the limits imposed by the pain has an effect as

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good as if not better than 2 days of bed rest, letting pain be your guide. Exercise should begin as soon as possible after the acute injury and be directed at building endurance and stamina, with consideration given to one's pain tolerance)

When teaching Alice, age 77, to use a cane because of osteoarthritis of her left knee, an important point to stress is:

1. Carrying the cane in the ipsilateral hand.
2. Advancing the cane with the ipsilateral leg.
3. Making sure the cane length equals the height of the iliac crest.
4. Using the cane to aid in joint protection and safety

Advancing the cane with the ipsilateral leg (The cane should be carried in the contralateral hand, advanced with the ipsilateral (affected) leg, and the length should equal the height of the greater trochanter)

In assessing a patient, you place the tips of your first 2 fingers in front of each ear and ask the patient to open and close his mouth. Then you drop your fingers into the depressed area over the joint and assess for smooth motion of the mandible. With this action, you are checking for:

1. Maxillomandibular integrity.
2. Well-positioned permanent teeth or well-fitting dentures.
3. Temporomandibular joint syndrome.
4. Mastoid inflammation.

Temporomandibular joint syndrome (place the tips of your first 2 fingers in front of each ear and ask him to open and close his mouth. Then drop your fingers into the depressed area over the temporomandibular joint (TMJ) and check for smooth motion of the mandible. With this action, you are assessing for TMJ syndrome. Clicking or popping noises, decreased range of motion, pain, or swelling may indicate TMJ syndrome. However, an audible and palpable snap or click does occur in many normal people as they open their mouths. In rare cases, this may indicate osteoarthritis)

Karen Ann, age 52, has four children and a very stressful job. After you perform her physical, which was normal, she tells you she has insomnia. You make several suggestions for lifestyle changes that might assist in promoting helpful sleep. You know she misunderstands when she states which of the following?

1. "I'll wind down before bedtime by taking a warm bath or by reading for 10 minutes."
2. "I'll try some valerian extract from the health food store."
3. "I'll exercise in the evening to tire myself out before bed."
4. "I won't read or watch television while in bed."

"I'll exercise in the evening to tire myself out before bed." (Exercising before going to bed is stimulating, but evidence suggests that an afternoon workout improves sleep quantity and quality. In a large study, people fell asleep twice as fast and slept an extra hour once they began going for brisk walks in the afternoon)

A 25-year-old female presents to your primary care clinic complaining of difficulty concentrating in graduate school ever since she was in a car accident 18 days ago. She had to be hospitalized for 1 day due to a concussion and broken ribs. Her car was totaled. She is fearful of driving. She also wakes up in the middle of

the night with night terrors that involve getting into a car accident. What is the patient's diagnosis?

1. Post-traumatic stress disorder.
2. Acute stress disorder.
3. Panic disorder.
4. Phobia of driving

Acute stress disorder (The patient is experiencing acute stress disorder as a result of her car accident, as she is having symptoms of post-traumatic stress within 30 days of her accident)

Goodpasture syndrome is:

1. Characterized by glomerulonephritis and pulmonary hemorrhage resulting from immune complex damage to the glomerular and alveolar basement membranes.
 2. Characterized by massive proteinuria, hypoalbuminemia, hyperlipidemia, and edema.
 3. An inflammatory autoimmune disorder affecting the connective tissue of the body, with inflammatory lesions involving the supportive tissues of the glomeruli.
 4. Typically the end stage of other glomerular disorders, such as rapidly progressive glomerulonephritis, lupus nephritis, or diabetic nephropathy.
- Characterized by glomerulonephritis and pulmonary hemorrhage resulting from immune complex damage to the glomerular and alveolar basement membranes

The inspiratory rate equals the expiratory rate with which breath sound?

1. Bronchial.
2. Bronchovesicular.
3. Vesicular.
4. Tracheal.

Bronchovesicular (With bronchovesicular breath sounds, the inspiratory rate equals the expiratory rate; With bronchial breath sounds, the inspiratory rate is shorter than the expiratory rate; With vesicular breath sounds, the inspiratory rate is greater than the expiratory rate; With tracheal breath sounds, the inspiratory rate is shorter than the expiratory rate)

When trying to differentiate pulmonary from cardiac causes of dyspnea on exertion, it is important to remember that which of the following statements is true?

1. When the cause is pulmonary, recovery of normal respiration is slow, and dyspnea eventually abates after cessation of exercise.
2. Clients with dyspnea from cardiac causes remain dyspneic much longer after cessation of exercise.
3. In dyspnea arising from cardiac causes, the heart rate will return to pre-exercise levels within a few minutes after cessation of exercise.
4. Clients with pulmonary dyspnea have minimal dyspnea at rest

Clients with dyspnea from cardiac causes remain dyspneic much longer after cessation of exercise (Clients with severe cardiac dyspnea demonstrate a volume of respiration that is greater than normal at every level of exercise, and they experience dyspnea sooner after beginning the exertion)

When teaching smokers about starting nicotine gum to aid in smoking cessation, tell them to:

1. Chew the gum like regular gum.

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2. Chew until a peppery taste or tingling sensation is felt and then place in buccal mucosa.

3. Drink a cup of coffee before chewing the gum because it assists the nicotine absorption.

4. Chew 1 piece every 4 hours for the first 6 weeks,

Chew until a peppery taste or tingling sensation is felt and then place in buccal mucosa (A piece is chewed only long enough to release the nicotine—which produces a peppery taste—and then it is "parked" between the gums and buccal mucosa to allow for nicotine absorption)

Which human papillomavirus serotypes most commonly cause cancer?

1. Serotypes 16 and 18.

2. Serotypes 6 and 11.

3. Serotypes 3 and 10.

4. Serotypes 27 and 29.

Serotypes 16 and 18

Thomas, age 35, uses a high-potency corticosteroid cream for a dermatosis. He also currently has tinea corporis. You tell him the following regarding the cream:

1. "You must use this for an extended period of time for it to be effective."

2. "It will work better if you occlude the area."

3. "It may exacerbate your concurrent tinea corporis."

4. "Be sure to use it daily."

"It may exacerbate your concurrent tinea corporis." (If a client uses a high-potency corticosteroid cream for a dermatosis, tell the client that it may

exacerbate concurrent conditions such as tinea corporis and acne. Topical corticosteroids should not be used indiscriminately on all cutaneous eruptions)

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