

NR-511 Differential Diagnosis & Primary Care Practicum

NR511 Final Exam Q & A

Quizbit, a factory line worker, has osteoarthritis (OA) of the right hand. According to the American College of Rheumatology (ACR), the guidelines for pharmacologic treatment include:

- **Topical capsaicin, topical nonsteroidal anti-inflammatory drugs (NSAIDs), and oral NSAIDs.**

For an adult patient with a knee injury, the nurse practitioner orders a nonsteroidal anti-inflammatory drug (NSAID) to be taken on a routine basis for the next 2 weeks. Patient teaching should include which of the following?

- **"If you have additional pain, an occasional acetaminophen (Tylenol) is permitted in between the usual doses of the NSAID."**

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A 13-year-old obese (body mass index [BMI] above the 95th percentile) boy reports low-grade left knee pain for the past 2 months. He denies antecedent trauma but admits to frequent "horseplay" with his friends. The pain has progressively worsened, and he is now unable to bear weight at all on his left leg. His current complaints include left groin, thigh, and medial knee pain and tenderness. His examination demonstrates negative drawer, Lachman, and McMurray tests; left hip with decreased internal rotation and abduction; and external hip rotation with knee flexion. Based on the above scenario, the nurse practitioner should suspect:

- **A slipped capital femoral epiphysis (SCFE).**

During assessment of a client's foot, the nurse practitioner notes that the foot is in alignment with the long axis of the lower leg and that weight-bearing falls on the middle of the foot from the heel, along the midfoot, to between the second and third toes. These findings best describe:

- **A normal foot.**

Sam, age 50, presents with Paget disease that has been stable for several years. Recently, his serum alkaline phosphatase level has been steadily rising. The nurse practitioner determines that it is time to start him on pharmacologic management. Which of the following should she initially prescribe?

- **Bisphosphonates.**

You are caring for a patient who has a history of psoriasis and is now showing signs of joint involvement. Seropositivity provides a definitive diagnosis of psoriatic arthritis (PsA). The initial treatment choice for management of the patient is:

- **Nonsteroidal anti-inflammatory drugs (NSAIDs).**

A 55-year-old patient presents with complaints of paresthesias in the lower lateral arm, thumb, and middle finger. The nerve roots most commonly related to these symptoms are C6 and C7. The most likely diagnosis would be:

- **Cervical radiculopathy**

Sandra, a computer programmer, has just been given a new diagnosis of carpal tunnel syndrome. The nurse practitioner's next step is to:

- **Try neutral position wrist splinting and order an oral nonsteroidal anti-inflammatory drug (NSAID).**

Janine, age 69, has class III rheumatoid arthritis. According to the American Rheumatism Association, which of the following describes her ability to function?

- **Adequate to perform only a few or none of the duties of usual occupation or self-care.**

James, age 17, has been complaining of a painful knob below his right knee that has prevented him from actively participating in sports. He has recently been given a diagnosis of Osgood-Schlatter disease and asks you about his treatment options. The nurse practitioner should tell him that the initial treatment is:

- **Relative rest; he could benefit from hamstring, heel cord, and quadriceps stretching exercises.**

Daniel, age 45, is of Northern European ancestry and has a dysfunctional and disfiguring condition affecting the palmar tissue under the skin of the distal palm and fourth and fifth fingers. What do you suspect?

- **Dupuytren contracture.**

age 49, comes in with low back pain. An x-ray of the lumbosacral spine is within normal limits. Which of the following diagnoses do you explore further?

- **Herniated nucleus pulposus.**

Jill, age 49, has recently begun a rigorous weightlifting regimen. She presents to the primary care office with a shoulder dislocation. Which of the following clinical manifestations leads the nurse practitioner to suspect an anterior shoulder dislocation over a posterior dislocation?

- **Inability to shrug the shoulder.**

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:

- **Temporomandibular joint syndrome.**

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Karen, who is postmenopausal, is taking 1200 mg of calcium daily but does not understand why she also needs to take vitamin D. You tell her that:

- **Vitamin D increases intestinal absorption of dietary calcium and mobilizes calcium from the bone.**

Sandy, age 49, presents with loss of anal sphincter tone, impaired micturition, incontinence, and progressive loss of strength in the legs. You suspect cauda equina syndrome. What is your next action?

- **Referring to a neurosurgeon.**

Lois, age 52, who has just been given a diagnosis of sarcoidosis, has joint symptoms, including arthralgias and arthritis. Your next plan of action would be to:

- **Begin a course of glucocorticoids.**

A 55-year-old patient is able to complete range of motion (ROM) against gravity with some resistance. The nurse practitioner would assign which of the following numerical grades to this manual muscle testing description?

- **4**

Marsha, age 24, is preparing for radioactive iodine therapy for her Graves' disease. Which test must she undergo first?

- **Beta-human chorionic gonadotropin.**

Eunice, age 32, has type 2 diabetes. She said she heard she should take an aspirin a day after she reaches menopause for its cardioprotective action. She does not have coronary artery disease, but her father does. How do you respond?

- **"The American Diabetes Association recommends that you start on low-dose aspirin therapy now."**

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Mr. Reynolds is on the antithyroid drug (ATD) methimazole (Tapazole), so you make it a point to check his:

- **Complete blood count (CBC) and liver transaminases.**

Jeffrey, age 17, has gynecomastia. You should also assess him for:

- **testicular cancer**

Jenny, age 46, has hypertension that has been controlled with hydrochlorothiazide 50 mg every day for the past 3 years. She is 5 ft 8 in tall and weighs 220 lb. Her fasting blood sugar (FBS) is 300 mg/dL, serum cholesterol level is 250 mg/dL, serum potassium level is 3.4 mEq, and she has 4+ glucosuria. Your next course of action would be to:

- **Repeat her FBS and do a glycated hemoglobin (HbA1c).**