

Adult Nurse Practitioner Review and Resource Manual, 3rd Edition
Continuing Education Pretest Questions

1. Recommended dietary supplements for all healthy adults include
 - a. FeSO₄ 325 mg/day for all women of childbearing age
 - b. Folic acid 0.4 mg/day for all adolescents and adults
 - c. A multivitamin
 - d. Supplemental calcium of 1000 to 1500 mg/day

2. The nurse practitioner is evaluating a patient who complains of acute onset of a “bump” on her eyelid. The patient describes awakening with a red, tender bump at the eyelash line. The nurse practitioner knows that the diagnosis is
 - a. Blepharitis
 - b. Chalazion
 - c. Dacrocystitis
 - d. Hordeolum

3. When treating a patient for an ocular chemical burn, the nurse practitioner knows that irrigation can be discontinued when
 - a. The eye is no longer red
 - b. One full liter of NSS has been used
 - c. The patient no longer has pain
 - d. The pH is between 6 and 8

4. The nurse practitioner is managing hypertension in a patient with comorbid coronary artery disease (CAD). She knows that the drug of choice would be a
 - a. Angiotensin-converting enzyme (ACE) inhibitor
 - b. Angiotensin II receptor antagonist
 - c. Beta adrenergic antagonist
 - d. Calcium channel antagonist

5. A variety of pharmacologic and non-pharmacologic strategies are used to raise high-density lipoproteins (HDL). Which of the following is not recognized as useful in improving HDL?
 - a. Exercise
 - b. Fibric acid derivatives
 - c. HMG-CoA reductase inhibitors
 - d. Niacin

6. Management of superficial venous thrombosis typically includes
 - a. Compression stockings
 - b. Coumadin for 8 to 12 weeks
 - c. Subcutaneous heparin administration
 - d. Topical application of heat

7. A patient presents for evaluation and treatment for asthma. The patient has a history of coughing following exercise, and upon assessment is diagnosed with stage 2 asthma. The nurse practitioner knows that this patient should begin a daily regimen of
 - a. Antimediators
 - b. Leukotriene antagonists
 - c. Low-dose, inhaled corticosteroids
 - d. Short-acting beta adrenergic agonists

8. The nurse practitioner is evaluating a patient for acute onset of gastroenteritis. His history is significant only for a river rafting trip approximately 2 weeks ago. His symptoms are most likely caused by
 - a. *E. coli*
 - b. Giardia
 - c. Salmonella
 - d. Staphylococcus

9. Hepatitis serology reveals anti-HAV IgG, HbsAg, and anti-HbeAg. The patient is diagnosed with
 - a. Acute hepatitis A
 - b. Acute hepatitis B
 - c. Chronic hepatitis B
 - d. Chronic hepatitis A & B

10. Classic radiographic findings in a patient with osteoarthritis do not include
 - a. Bony cysts
 - b. Osteophytes
 - c. Soft tissue swelling
 - d. Unequal joint space narrowing

11. Shober's test of lumbar motion is used to assess for
 - a. Ankylosing spondylitis
 - b. Lumbago
 - c. Metastatic disease
 - d. Osteoarthritis

12. A 27-year-old female patient presence complains of vaginal irritation and a foul odor. She has a thin, white discharge; a vaginal pH of 5.5; and abundant clue cells are apparent on wet mount. The diagnosis is most likely
 - a. Bacterial vaginosis
 - b. Chlamydia
 - c. Trichomoniasis
 - d. Urinary tract infection

13. A patient is being treated for acne rosacea with metronidazole. In addition to pharmacologic therapy, avoidance of triggers is very important. Common triggers of rosacea include

- a. Alcohol and wind
 - b. Bacterial infection
 - c. Exercise
 - d. Stress
14. For a 55 kg patient newly diagnosed with hypothyroidism, it is anticipated that replacement thyroid hormone will need to be titrated to approximately
- a. 50 mcg daily
 - b. 80 mcg daily
 - c. 100 mcg daily
 - d. 125 mcg daily
15. A 44-year-old male is in treatment for depression. He has failed treatment with two different selective serotonin reuptake inhibitors (SSRIs). The next drug choice for him would be
- a. Elavil
 - b. Parnate
 - c. Venlafaxine
 - d. Wellbutrin