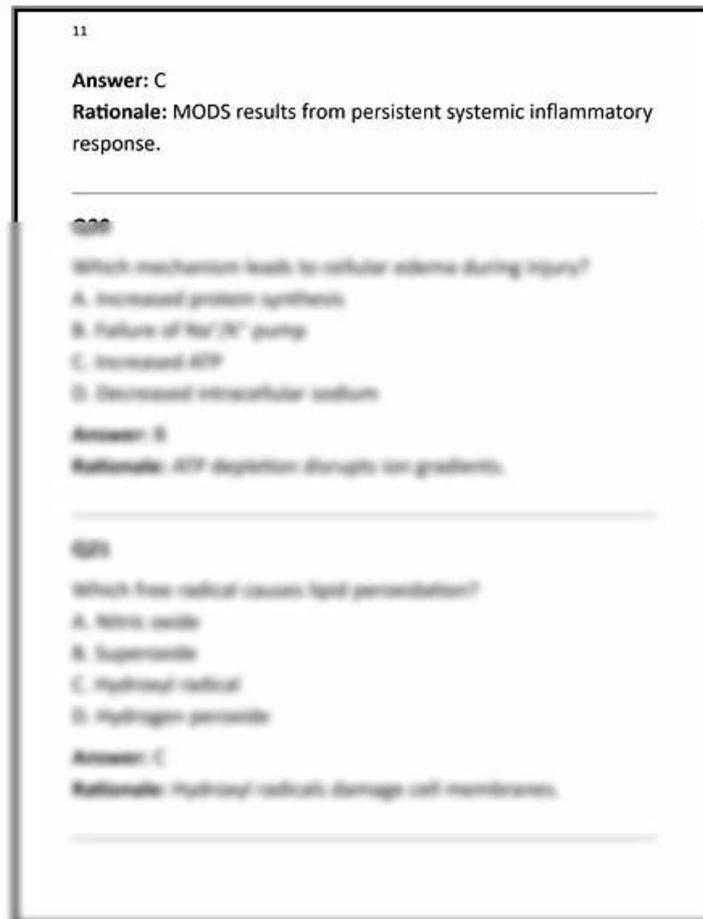


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Nursing AANP Family Nurse Practitioner (AANP-FNP) Sample Questions (Q10-Q15):

NEW QUESTION # 10

You are conducting a health assessment with a patient. She tells you that she does not understand what will happen during the tests she will undergo the next day. Which of the following is an appropriate nursing diagnosis for this patient?

- A. Knowledge deficit.
- B. Low health literacy.
- C. Patient does not understand care plan.
- D. Patient needs further education.

Answer: A

Explanation:

The appropriate nursing diagnosis for a patient who expresses confusion or lack of understanding about upcoming tests or procedures is "Knowledge Deficit." This diagnosis is used when a patient demonstrates a lack of cognitive information or comprehension related to a specific topic, which in this case is the medical tests they are scheduled to undergo.

In the context of nursing care, a knowledge deficit can adversely affect a patient's ability to consent to or prepare for procedures and may hinder compliance with medical advice. Recognizing this deficit is crucial as it prompts the necessary intervention - patient education. Education here aims to fill the gaps in the patient's understanding, ensuring they are fully informed about the nature, purpose, benefits, and potential risks associated with the tests.

Educating the patient serves multiple purposes: it helps in alleviating anxiety, increases the likelihood of compliance, and empowers the patient by giving them control over their health decisions. This educational intervention can be tailored to the patient's specific needs, considering factors like their educational background, preferred communication styles, and cultural perspectives.

It is essential for healthcare providers, including nurses, to approach this education with patience and clarity, using layman's terms and avoiding medical jargon that could further confuse the patient. Utilizing visual aids, simplified handouts, and interactive dialogues can enhance understanding and retention of the information provided.

Ultimately, addressing a knowledge deficit through targeted education not only improves patient outcomes but also enhances the overall quality of healthcare by fostering a collaborative and informed patient-provider relationship.

NEW QUESTION # 11

If you are doing a well-baby check on a 24-month-old child, which of the following observations would concern you?

- A. jumps with both feet
- B. speaks in two-word sentence
- C. uses pronouns
- D. cannot seat herself in a chair

Answer: D

Explanation:

When assessing the development of a 24-month-old child during a well-baby check, healthcare providers use various developmental milestones as benchmarks to evaluate the child's growth and development. These milestones cover various domains, including motor skills, language and communication, cognitive abilities, and social skills.

Among the observations listed: 1. ****Speaks in two-word sentences**** - This is a typical developmental milestone for a 24-month-old. By this age, children are expected to start combining words to form simple sentences. This ability reflects appropriate development in language and communication skills. 2. ****Cannot seat herself in a chair**** - This observation is concerning. By the age of 24 months, children are generally expected to have developed sufficient gross motor skills and coordination to seat themselves in a chair without assistance. The ability to do so typically develops between 15 and 20 months. If a child cannot perform this task by 24 months, it may indicate a delay in motor development or other developmental issues. 3. ****Jumps with both feet**** - This is another milestone that aligns well with what is expected at this age. Being able to jump with both feet shows that the child has good motor coordination and strength. 4. ****Uses pronouns**** - The use of pronouns (like "me," "you," "it") by a 24-month-old child is a positive sign of language development. It indicates that the child is beginning to understand and use language to express relationships between themselves and others or objects.

Based on these observations, the one that would be of concern during a well-baby check for a 24-month-old child is the inability to seat herself in a chair. This could potentially signal a delay in gross motor skills, which might require further evaluation or intervention. Such interventions might include physical therapy to enhance motor skills or a more detailed assessment to understand the underlying causes of the delayed motor development. Early identification of such issues is crucial to provide timely support and interventions, which can significantly improve outcomes for the child.

NEW QUESTION # 12

Your 34-year-old female patient has been vomiting blood and her stools appear black and tarry. She complains of abdominal cramping. Which of the following is most likely to cause these signs and symptoms?

- A. gastrointestinal bleeding
- B. hepatitis
- C. hemorrhoids
- D. diverticulosis

Answer: A

Explanation:

Hemorrhoids are a common condition where veins in the rectal area become swollen and inflamed. Typically, hemorrhoids cause symptoms such as itching, discomfort, and bleeding during bowel movements. The bleeding seen with hemorrhoids is usually bright red and noticed on the toilet paper or in the toilet bowl. Hemorrhoids are less likely to cause severe bleeding or black, tarry stools, which are indicative of bleeding higher up in the gastrointestinal tract.

Gastrointestinal bleeding refers to any bleeding that occurs within the gastrointestinal tract, which extends from the mouth to the anus. This type of bleeding can manifest in various ways depending on the location and severity of the bleed. Vomiting blood (hematemesis) and having black, tarry stools (melena) are symptoms often associated with significant GI bleeding, possibly from the stomach or upper intestines. Such bleeding can be caused by a variety of conditions including peptic ulcers, gastritis, or esophageal varices, and warrants immediate medical attention.

Diverticulosis involves the formation of small pouches (diverticula) in the wall of the colon. While these pouches themselves may not cause discomfort, if they become inflamed or bleed, it can result in diverticulitis or diverticular bleeding. However, bleeding from diverticulosis is generally painless and would not typically be accompanied by abdominal cramping, although it can cause red blood or dark stools if the bleeding is substantial.

Hepatitis, an inflammation of the liver, usually does not directly cause GI bleeding. Symptoms of hepatitis include jaundice (yellowing of the skin and eyes), fatigue, and abdominal pain, but not typically vomiting of blood or black, tarry stools unless there is an associated severe liver disease such as cirrhosis leading to complications like esophageal varices, which can bleed.

Given the symptoms described - vomiting blood and black, tarry stools accompanied by abdominal cramping - the most likely cause among the options provided is gastrointestinal bleeding. This condition is serious and can be life-threatening, requiring urgent medical evaluation to identify the source of the bleed and initiate appropriate treatment.

NEW QUESTION # 13

Of the following, which vaginal condition would be considered the only one that would have an alkaline pH on the exam?

- A. Bacterial vaginosis
- B. Trichomoniasis
- C. Viral vaginosis
- D. Chlamydia vaginitis

Answer: A

Explanation:

Among the listed vaginal conditions, bacterial vaginosis is the condition associated with an alkaline pH during examination. Normally, the vaginal environment maintains a slightly acidic pH, typically around 4.0. This acidity is primarily due to the presence of lactic acid produced by lactobacilli, the predominant healthy bacteria in the vagina. The acidic environment helps to prevent the growth of pathogenic bacteria and maintains vaginal health.

However, in the case of bacterial vaginosis, there is a disruption in the normal bacterial flora of the vagina. This disruption leads to a decrease in lactobacilli and an overgrowth of other types of bacteria such as *Gardnerella vaginalis* and other anaerobes. This shift in the bacterial composition reduces the lactic acid production, thereby increasing the pH to more alkaline levels, often noted as above 4.5.

It is important to distinguish bacterial vaginosis from other conditions such as trichomoniasis, viral vaginosis, and chlamydia vaginitis. Trichomoniasis, caused by the protozoan *Trichomonas vaginalis*, can also lead to an elevated vaginal pH but is typically associated with other distinct symptoms like frothy yellow-green discharge and is sexually transmitted. Viral infections in the vagina, such as those caused by herpes simplex virus, do not typically alter the pH significantly. Chlamydia vaginitis, caused by the bacterium *Chlamydia trachomatis*, primarily results in an inflammatory response and typically does not affect the vaginal pH to become alkaline. Therefore, when considering a vaginal condition characterized by an alkaline pH observed during an examination, bacterial vaginosis is the most likely diagnosis among the options provided. It's crucial for healthcare providers to recognize this condition not only by pH but also by other symptoms and diagnostic tests to ensure appropriate treatment and management. Bacterial vaginosis is not

considered a sexually transmitted disease (STD), but rather a dysbiosis (imbalance) of the normal vaginal flora. This distinction categorizes it as vaginosis rather than vaginitis, which typically implies an inflammatory condition of the vagina.

NEW QUESTION # 14

The mnemonic "SAD CUB" is used to help remember the anticholinergic side effects. Which of the following would the "D" stand for?

- A. Dyspnea
- B. Disorientation
- C. Dry mouth
- D. Diarrhea

Answer: C

Explanation:

The mnemonic "SAD CUB" is used to help remember the common side effects of anticholinergic drugs. Each letter in the mnemonic represents a different side effect. The "D" in "SAD CUB" specifically stands for "Dry mouth." This side effect is one of the most typical symptoms experienced by individuals taking medications with anticholinergic properties, which work by blocking the action of the neurotransmitter acetylcholine in the brain and body.

To further break down the mnemonic: - "S" stands for Sedation, which reflects the drowsiness or sleepiness that can occur with anticholinergic use. - "A" represents Anorexia, indicating a possible decrease in appetite. - "D" for Dry mouth, highlighting reduced saliva production, which can make the mouth feel unusually dry. - "C" stands for Confusion and Constipation, where confusion denotes cognitive impairment, and constipation is a common digestive issue related to reduced gastrointestinal motility. - "U" signifies Urinary retention, a condition where the bladder fails to empty completely. - "B" indicates BPH (Benign Prostatic Hyperplasia) exacerbation, where symptoms of enlarged prostate can worsen.

Each of these side effects is essential to monitor in patients receiving anticholinergic therapy, as they can impact quality of life and may require adjustments in medication or additional treatment to manage the symptoms. Knowing this mnemonic helps healthcare providers quickly recall the spectrum of anticholinergic side effects to better assist and monitor their patients.

NEW QUESTION # 15

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