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CNSC Exam Prep | 66 questions and answers | updated

D5W (5% dextrose) - Dextrose - 50
Sodium - 0
Chloride - 0
Tonicity - Hypotonic
Free water - 1000
0.45% NaCl (1/2 NS) - Dextrose - 0
Sodium - 77
Chloride - 77
Tonicity - Hypotonic
Free water - 500
0.9% NaCl (normal saline) - Dextrose - 0
Sodium - 154
Chloride - 154
Tonicity - Isotonic
Free water - 0
3% NaCl (hypertonic solution) - Dextrose - 0
Sodium - 513
Chloride - 513
Tonicity - Hypertonic
Free water - -2331
Lactated Ringers - Dextrose - 0
Sodium - 130
Chloride - 109
Also contains lactate, K, and Ca²⁺
Tonicity - Isotonic
Free water - 0
Total body water divided into intracellular (IC) and extracellular (EC) space
- About _____% of TBF is IC and _____% is EC and they are separated by a cell membrane

EC compartment is divided into interstitial (IS) and the intravascular space
- _____% of EC fluid is in the IS space
- _____% of the EC fluid is in the intravascular space - 66% is IC
33% is EC
-- 25% intravascular, 75% in IS
Distribution of intravenous fluids

1000mL or 1 L of either of these:
0.9% NaCl - Normal Saline

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NUTRITION NBNSC Certified Nutrition Support Clinician (CCN) Sample Questions (Q58-Q63):

NEW QUESTION # 58

The primary functions of laboratory tests are:

- A. to supplement or enhance other studies, such as dietary or community assessment among specific population groups
- B. to confirm a known clinical diagnosis
- **C. A and B**
- D. to detect marginal nutritional deficiencies in individuals particularly when dietary histories are questionable or unavailable

Answer: C

Explanation:

The primary functions of laboratory tests in a clinical and nutritional context are multifaceted and critical for effective healthcare management. These tests are essential tools used by healthcare professionals to assess and monitor the health status of individuals, guide clinical decisions, and implement preventive measures. Let's explore the primary functions mentioned in the question:

First,

laboratory tests are crucial for detecting marginal nutritional deficiencies in individuals, particularly when dietary histories are questionable or unavailable. Nutritional deficiencies can be subtle and not immediately apparent through physical symptoms, especially in their early stages. Laboratory tests can measure levels of specific nutrients or markers of nutritional status in the body, providing concrete data that can help identify deficiencies that may not be evident from dietary intake alone. This is particularly important in cases where individuals may not be able to provide accurate dietary histories due to recall bias, lack of knowledge, or other factors. Early detection through lab tests allows healthcare providers to intervene appropriately, possibly preventing the progression of deficiency-related health issues.

Additionally, a significant function of laboratory tests is their utility before the appearance of clinical signs of disease. This proactive approach in medicine enables the early detection of potential health issues, allowing for the initiation of remedial steps before the condition manifests clinically. For example, screening tests can detect early signs of conditions like diabetes or high cholesterol, leading to earlier management and better outcomes. This preemptive testing is in contrast to reactive testing, where tests are conducted after clinical signs have appeared, which may limit the effectiveness of interventions.

However, it is worth noting that the utility of laboratory investigations goes beyond just preemptive measures. While it's stated that laboratory tests are of little use if they merely confirm a known clinical diagnosis, this isn't entirely accurate. Confirming a clinical diagnosis through laboratory tests is also a critical function. These tests provide necessary confirmation and can help differentiate between diseases with similar symptoms, ensuring that the treatment plan is appropriate for the specific condition diagnosed.

Furthermore, laboratory tests can be used to monitor the progression of a disease and the effectiveness of treatment, adjusting strategies as needed based on quantitative data from follow-up tests.

Beyond individual diagnosis and management, laboratory tests also play a vital role in supplementing or enhancing other studies, such as dietary assessments or community health assessments among specific population groups. They provide essential data that can help identify public health trends, track the success of public health interventions, and guide policy decisions aimed at improving the health of the population. In summary, the primary functions of laboratory tests are diverse and integral to both individual and public health. They enable the detection of nutritional deficiencies, early identification of potential health issues, confirmation and differentiation of clinical diagnoses, and enhance broader health assessments to guide both clinical and policy-level decisions.

NEW QUESTION # 59

The ability of a method to detect small quantities of an analyte is which of the following?

- A. specificity
- B. analytic specificity
- C. sensitivity
- **D. analytic sensitivity**

Answer: D

Explanation:

The correct answer to the question regarding the ability of a method to detect small quantities of an analyte is "analytic sensitivity." Analytic sensitivity refers to the capability of a diagnostic test or analytical method to measure the smallest amount of an analyte accurately in a sample. This sensitivity is crucial, especially in clinical settings, where detecting low levels of substances, such as hormones, viruses, or bacteria, can be vital for early diagnosis and treatment of diseases.

In contrast, analytic specificity is another important characteristic of a diagnostic method, but it pertains to the ability of the method to specifically identify and measure the intended analyte without interference from other components in the sample. For example, a test with high analytic specificity for a particular virus will not mistakenly detect other viruses or substances, thus avoiding false-positive results.

Understanding both analytic sensitivity and specificity is essential for evaluating the usefulness and reliability of diagnostic tests. High analytic sensitivity is particularly important in tests where missing even small amounts of the target analyte could lead to significant consequences, such as failing to detect early stages of an infection or a disease marker. Therefore, when a method is described as having high analytic sensitivity, it means that it can detect very low concentrations of the analyte, ensuring that even minimal amounts can be identified and quantified effectively.

NEW QUESTION # 60

The innermost lining of the heart is which of the following?

- A. apex
- B. pericardium
- C. myocardium
- **D. endocardium**

Answer: D

Explanation:

The correct answer to the question about the innermost lining of the heart is the **endocardium**. The endocardium is a thin layer of endothelial tissue that lines the interior of the heart chambers and heart valves. Its main function is to provide a smooth and protective lining of the cardiac chambers and valves, ensuring that blood flows smoothly within the heart without clotting.

In contrast, the other options mentioned refer to different parts of the heart's structure. The **myocardium** is the middle layer of the heart wall and consists of cardiac muscle tissue. It is responsible for the pumping action of the heart as it contracts and relaxes to circulate blood throughout the body. The **pericardium** is the fibrous sac that surrounds the heart and helps to protect it, maintaining its position in the thorax and providing a lubricated surface for the heart to move against. Lastly, the **apex** refers to the tip of the heart, which points downward and to the left, and is not directly related to the structural layers of the heart. Thus, when considering the innermost lining of the heart, the endocardium is the accurate answer, distinguishing it from the myocardium, pericardium, and the apex, which have different roles in the anatomy and function of the heart.

NEW QUESTION # 61

Which of the following statements regarding oxidative stress is accurate?

- A. The human immune response makes extensive use of oxidative molecules.
- **B. all of the above**
- C. Radicals of different kinds are potentially involved in both initiation and promotion in multistage cancer development.
- D. Some medications can cause oxidative stress.

Answer: B

Explanation:

The correct answer to the question regarding oxidative stress is "all of the above." This is because each of the statements presented in the question accurately describes aspects of oxidative stress and its implications on health. Here, we will expand on these statements to provide a clearer understanding of each point.

Firstly, the statement that "some medications can cause oxidative stress" is indeed accurate. Certain pharmaceuticals can induce oxidative stress by generating free radicals or by impairing the body's antioxidant defenses. This can occur through various mechanisms depending on the type of medication. For example, chemotherapy drugs are known to produce reactive oxygen species (ROS) as a byproduct of their action against cancer cells, which can lead to oxidative stress. Similarly, other drugs like statins and certain antibiotics can disrupt cellular oxidative balance by affecting mitochondrial function.

The statement that "oxidative stress can occur in many diseases such as cancer, cataracts and eye injuries, reperfusion injury, arthritis and rheumatic disorders, ALS, and viral autoimmune diseases" further broadens our understanding of the impact of oxidative stress on health. In these conditions, the imbalance between antioxidants and reactive oxygen species plays a crucial role. For instance, in cancer, oxidative stress promotes mutations and fosters an environment conducive to cancer cell proliferation and survival. In

diseases like arthritis, oxidative stress contributes to inflammation and joint damage.

Moreover, the role of oxidative stress in the human immune response is significant. The immune system utilizes reactive oxygen species to kill pathogens. This oxidative burst, primarily from cells like neutrophils and macrophages, is essential for the effective destruction of invading microorganisms. However, when not regulated properly, this can also lead to tissue damage and contribute to inflammatory conditions.

Lastly, radicals of different kinds are indeed involved in both the initiation and promotion of multistage cancer development. Free radicals can cause damage to DNA, proteins, and cell membranes, initiating the process of carcinogenesis. Subsequently, the oxidative environment can promote the progression of mutated cells into malignant tumors.

In summary, understanding the various facets of oxidative stress is crucial due to its dual roles-both as a necessary part of physiological processes and a potential contributor to various pathological conditions. This broad impact underscores why the answer "all of the above" is correct, reflecting the comprehensive nature of oxidative stress in affecting human health.

NEW QUESTION # 62

The body requires energy to process food through digestion, absorption, transportation, metabolism and storage. This requirement represents _____% of daily energy (calorie) intake.

- A. 0
- B. 1
- C. 2
- D. 3

Answer: A

Explanation:

The body expends a portion of its daily energy intake on the process of digesting, absorbing, transporting, metabolizing, and storing the food we consume. This energy expenditure is known as the Thermic Effect of Food (TEF), also sometimes referred to as dietary-induced thermogenesis.

TEF represents the increase in metabolic rate after ingestion of a meal, and it varies depending on the composition of the meal; for instance, proteins usually have a higher thermic effect compared to carbohydrates and fats. On average, the TEF accounts for approximately 10% of the total daily energy expenditure. This means that if an individual consumes 2000 calories in a day, about 200 of those calories will be utilized simply for processing the food eaten.

To calculate the total daily energy needs, one must consider not only the basal metabolic rate (BMR), which is the energy expended at rest to maintain vital body functions, but also the energy used in physical activity and the TEF. The formula to adjust BMR for TEF involves multiplying the BMR by 0.10 - reflecting the 10% average TEF - and then adding this value back to the BMR before incorporating activity levels. This adjusted figure provides a more accurate estimation of total daily energy needs, ensuring that dietary recommendations meet the individual's true energy requirements.

Understanding this component of energy expenditure is crucial for devising precise dietary plans, particularly for weight management strategies. By accounting for the energy used in food processing, individuals can better gauge their net caloric intake and make informed decisions about their eating habits and activity levels.

NEW QUESTION # 63

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