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## **Quiz 2026 AANP-FNP: AANP Family Nurse Practitioner (AANP-FNP) – Valid New Learning Materials**

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have a professional team to collect the latest information of the exam

## Nursing AANP Family Nurse Practitioner (AANP-FNP) Sample Questions (Q60-Q65):

### NEW QUESTION # 60

Which of the following types of hearing loss results from deterioration of the cochlea?

- A. conductive hearing loss
- B. all of the above
- C. auditory neuropathy spectrum disorder
- **D. sensorineural hearing loss**

**Answer: D**

Explanation:

The correct answer to the question about which type of hearing loss results from the deterioration of the cochlea is sensorineural hearing loss. This type of hearing loss primarily affects the inner ear or the neural pathways to the brain. The cochlea, which is a spiral-shaped organ in the inner ear, plays a critical role in the process of hearing by converting sound waves into electrical signals that the brain can interpret.

Sensorineural hearing loss occurs when there is damage to the hair cells in the cochlea or to the auditory nerve that carries these signals to the brain. The hair cells in the cochlea can be damaged due to various factors, including aging, exposure to loud noise, certain medications that are toxic to auditory cells (ototoxicity), and genetic predispositions. This damage is typically irreversible and results in permanent hearing loss.

The hair cells act as sensory receptors and are located within the organ of Corti, which is situated on the basilar membrane inside the cochlea. These cells are vital for detecting sound vibrations and converting them into neural signals. When these hair cells are damaged or lost, the ability to detect sound is significantly reduced, leading to sensorineural hearing impairment.

Unlike conductive hearing loss, which is caused by obstructions or malfunctions in the outer or middle ear that prevent sounds from being carried to the inner ear, sensorineural hearing loss is rooted in the inner ear or the neural connections to the brain. Conductive hearing issues can often be medically or surgically treated, whereas sensorineural losses usually require management through hearing aids or cochlear implants.

In summary, sensorineural hearing loss is directly linked to the deterioration of the cochlea, particularly the damage to the hair cells or the neural pathways associated with the organ of Corti. It is a common type of hearing loss that can result from a variety of causes including noise trauma, aging, and exposure to ototoxic substances.

### NEW QUESTION # 61

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

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

**Answer: A**

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 # 62

A 16 year old cheerleader comes in with a chronic case of laryngitis. The condition is worsening even though she has been resting her voice and there is no sign of infection. What step do you take?

- A. X-ray.
- B. Prescribe antibiotics.
- C. Refer to a specialist.
- D. CB

**Answer: C**

Explanation:

In the scenario of a 16-year-old cheerleader presenting with chronic laryngitis without signs of infection and no improvement despite voice rest, the appropriate step is to refer her to a specialist. Laryngitis, which is an inflammation of the larynx, typically resolves on its own, particularly if it is caused by a temporary factor such as a viral infection or overuse of the voice. However, chronic laryngitis that persists for an extended period and does not respond to usual care measures warrants further investigation.

Chronic laryngitis can be caused by various factors beyond a simple infection, including vocal cord strain or misuse, allergies, acid reflux, smoking, or more serious conditions such as growths on the vocal cords (such as nodules or polyps). The absence of infection and the worsening condition despite voice rest suggests that there might be an underlying issue that needs specialized evaluation.

Referring the patient to a specialist, such as an otolaryngologist (ENT specialist), is crucial. An ENT specialist can perform a detailed examination of the larynx, possibly using tools like laryngoscopy, which allows for a closer look at the vocal cords and larynx. This can help in diagnosing the exact cause of the laryngitis and ruling out more serious conditions.

The decision against prescribing antibiotics is justified because there is no evidence of bacterial infection, and the use of antibiotics without bacterial infection can contribute to antibiotic resistance and cause unnecessary side effects. Similarly, ordering an X-ray or a complete blood count (CBC) might not be immediately relevant if there is no indication of infection or systemic illness, which seems to be the case here.

In summary, the best course of action in this situation is to refer the patient to a specialist who can conduct a thorough assessment and provide a targeted treatment plan. This approach helps in ensuring accurate diagnosis and appropriate management, thereby preventing potential complications from incorrect or delayed treatment.

### NEW QUESTION # 63

Christopher is a 3-year-old patient with scabies. You prescribe permethrin 5% (Elimite) for him. You tell Christopher's parents all of the following in regards to using this medication EXCEPT:

- A. One ounce of the cream is sufficient for one application.
- B. Precede the treatment with a warm bath.
- C. Apply cream to the entire body while the skin is wet from shower or bath.
- D. Leave the cream on 8 to 12 hours and then remove by showering.

**Answer: C**

Explanation:

When providing instructions for the use of permethrin 5% (Elimite) cream for the treatment of scabies in a 3-year-old child, it's crucial to follow the correct application protocol to ensure the effectiveness of the treatment and minimize discomfort or adverse effects. Here's an expanded explanation of how to use the medication properly:

Permethrin cream is a topical medication used to treat scabies, which is caused by a mite infestation in the skin. The first step in the application of this medication involves preparing the child's skin. It is recommended to give the child a warm bath before applying the cream. This helps to soften the skin and may enhance the absorption of the medication. However, contrary to what might seem intuitive, it is important not to apply the cream while the child's skin is still wet.

After the bath, the child should be thoroughly dried. The skin should also be allowed to cool down to normal temperature. Applying the cream to wet or warm skin can lead to increased absorption of the cream, which might increase the risk of side effects. Once the child's skin is dry and has returned to a normal temperature, you can proceed with the application of the cream.

Permethrin cream should be applied to the entire body from the neck down. Special attention should be given to areas that might be easily overlooked, such as the navel, between the toes and fingers, and under the arms. In infants and young children, it is also important to cover the scalp, temples, and forehead. Care should be taken to apply the cream in all creases and crevices of the body where mites might be hiding.

The amount of cream needed can vary depending on the size of the child, but typically, one ounce is sufficient for one application on a young child. The cream should be left on the skin for 8 to 12 hours, usually applied at bedtime and washed off in the morning. This

duration allows the medication to work effectively against the mites.

After the treatment period, the cream should be washed off by bathing or showering. It is important to wash all linens, towels, and clothing that have been in contact with the infested skin to prevent re-infestation.

Following these detailed steps assures that the treatment is both safe and effective, minimizing the potential for skin irritation or other side effects, and maximizing the likelihood of eliminating the scabies mites completely. Always consult a healthcare provider for any questions or if re-treatment is necessary, as misuse or incorrect application can lead to treatment failure or re-infestation.

#### NEW QUESTION # 64

What is the lifetime risk to the average American man of having latent prostate cancer?

- A. 40%
- B. 67%
- C. 3%
- D. 10%

**Answer: A**

Explanation:

The correct answer is 40%. This means that 40% of American men are estimated to develop latent prostate cancer during their lifetimes. Latent prostate cancer refers to cancer that is present in the prostate gland but has not yet caused any symptoms or signs detectable by current medical exams and technologies. It is often found incidentally during autopsies or other medical procedures that are not specifically aimed at detecting prostate cancer.

Latent prostate cancer, although it exists in the body, might never progress to a more severe or clinically significant stage. Therefore, although 40% of men might have this form of cancer, only a fraction of them will experience health problems or require treatment. Specifically, the lifetime risk of developing clinically significant prostate cancer, which requires intervention due to symptoms or potential for health deterioration, is about 10%. This reflects the disparity between having the disease and the disease causing issues that necessitate medical attention.

Furthermore, the risk of dying from prostate cancer is approximately 3%. This statistic highlights the effectiveness of current diagnostic and treatment strategies which can manage the disease in a way that minimizes mortality. It is also indicative of the nature of many prostate cancers, which can be slow-growing and less aggressive compared to other types of cancer.

These statistics emphasize the importance of regular medical check-ups and screenings, such as prostate-specific antigen (PSA) tests, which can help in early detection and management of prostate cancer. Early detection significantly increases the chances of successful treatment and management of prostate cancer, potentially reducing the progression from latent to more aggressive forms of the disease.

#### NEW QUESTION # 65

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