

Nursing AANP-FNP Premium Exam - AANP-FNP Valid Test Voucher

AANP FNP certification Exam with 100% Correct answers 2024/2025 VERIFIED

All diastolic murmurs are pathological. Murmurs Grades I-barely II-audible III- clearly audible. IV- first time thrill V-Steth edge VI-entire steth. EXAM - Correct Answer-III first time audible, IV first time thrill

Fundal height 12 weeks - Correct Answer-Fundal Height 12 weeks above symphysis pubis. EXAM

Fundus 16 weeks between symphysis pubis and umbilicus.
Fundus at 20 weeks is at umbilicus.
2 cm more or less from # of wk gestation is normal if more or less order US

3 month old infant with down syndrome, due to milk intolerance, mom started on goats milk; now has pale conjunctiva but otherwise healthy. Low HCT. What additional test would you order? - Correct Answer-Iron, TIBC

3 months of synthroid, TSH increased, T4 normal, what do you do? - Correct Answer-Increase Medication

3 ways to assess cognitive function in patient with signs/symptoms of memory loss - Correct Answer-Mini mental exam

4 month old with strabismus, mom is worried.... - Correct Answer-tell her it is normal.

4 month old wont keep anything down, what is the main thing you look at? - Correct Answer-Growth chart

6 month old closed anterior fontanel. - Correct Answer-XRAY

Abnormal cells on PAP, what do you do next? - Correct Answer-Refer for Colposcopy

CAGE ACRONYM - Correct Answer-Cut down
Annoyed by criticism
Guilty about drinking
Eye opener drink

Causes of tachycardia - Correct Answer-Fever
Anemia
Hypotension

Cranial nerves responsible for extraocular eye movements - Correct Answer-CN 3,4,6

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Nursing AANP Family Nurse Practitioner (AANP-FNP) Sample Questions

(Q25-Q30):

NEW QUESTION # 25

You are providing care to a patient whose medication order indicates that his oral medication should be given p.c. How would you administer this patient's medication?

- A. With a full glass of water.
- **B. After meals.**
- C. First thing in the morning, on an empty stomach.
- D. Before meals.

Answer: B

Explanation:

When you encounter a medication order for a patient that specifies the medication should be given "p.c.," it indicates that the medicine should be administered after meals. The abbreviation "p.c." stands for "post cibum," which is Latin for "after meals." This is a common directive in medical prescriptions that is intended to optimize the absorption of the medication or minimize potential adverse effects that could occur if taken on an empty stomach.

It is important to note that the specific timing mentioned in the order (e.g., immediately after eating, or an hour post-meal) should be followed closely to ensure the effectiveness of the medication. Some medications might require absorption without interference from food, while others might need the presence of food to prevent stomach upset or enhance absorption.

As a healthcare provider, when administering medication that is ordered to be taken "p.c.," ensure that the patient has indeed consumed a meal before giving the medication. This helps in achieving the desired therapeutic effect and minimizing any side effects. If the patient is unable to eat or has dietary restrictions, you may need to consult with the prescribing physician for further instructions or possible adjustments to the medication regimen.

Additionally, when educating the patient and their caregivers about the medication, emphasize the importance of following the "p.c." instruction. Explain the reasons why the medication should be taken after meals and discuss any potential consequences of deviating from this protocol. This education not only helps in managing the patient's condition effectively but also empowers the patient and caregivers by making them active participants in the care process.

Lastly, always verify the patient's understanding of when and how to take their medication, and encourage them to ask questions if anything is unclear. This ensures that the patient feels supported and is more likely to adhere to their treatment plan, leading to better health outcomes.

NEW QUESTION # 26

All but which of the following would be considered an ACE inhibitor that is used for hypertension?

- A. Lisinopril
- **B. Torsemide**
- C. Enalapril
- D. Trandolapril

Answer: B

Explanation:

ACE inhibitors, or angiotensin-converting enzyme inhibitors, are a class of medications used primarily for managing hypertension (high blood pressure) and heart failure. These drugs function by inhibiting the enzyme that converts angiotensin I to angiotensin II, a potent vasoconstrictor. By reducing the production of angiotensin II, ACE inhibitors lead to dilation of blood vessels, which in turn lowers blood pressure and reduces the workload on the heart.

The question provided lists several medications and asks which one is not an ACE inhibitor. The medications listed include Enalapril, Torsemide, Trandolapril, Lisinopril, and again Torsemide. Among these, Enalapril, Trandolapril, and Lisinopril are well-known ACE inhibitors. They are commonly prescribed for treating hypertension and are known for their effectiveness in reducing blood pressure and managing heart-related conditions.

On the other hand, Torsemide is not an ACE inhibitor. It belongs to a different class of drugs known as loop diuretics. Torsemide (marketed under the brand name Demadex) is primarily used for the treatment of edema associated with heart failure, renal disease, or hepatic disease. It works by affecting the sodium, potassium, and chloride reabsorption in the kidneys, leading to an increase in urine production and a decrease in fluid in the body, which can help lower blood pressure but through a mechanism different from that of ACE inhibitors.

Therefore, in response to the question, Torsemide is the correct answer as it is not an ACE inhibitor. It is important to distinguish between these medications as they are used for similar conditions but operate through different mechanisms and have different implications for patient care.

NEW QUESTION # 27

You are educating a group of student nurses about depression. Which of the following statements would you NOT make in this talk?

- A. When adults live in long-term care facilities they are more likely to suffer from depression.
- **B. A significant relationship has been found between race and mood disorders.**
- C. Depression is more common in young women
- D. Once a person has experienced a depressive episode, the incidence of depression increases.

Answer: B

Explanation:

When educating a group of student nurses about depression, it's crucial to convey accurate and evidence-based information. Here's an expanded explanation of why certain statements should or should not be made during this educational session:

"When adults live in long-term care facilities, they are more likely to suffer from depression." This statement is generally accurate and should be included in the talk. Research shows that older adults living in long-term care facilities have a higher prevalence of depression compared to those living in the community. Factors such as isolation, loss of independence, and chronic health conditions can contribute to this increased risk.

"A significant relationship has been found between race and mood disorders." This statement should NOT be made because it is misleading and not supported by consistent scientific evidence. While disparities in the prevalence and treatment of mood disorders among different racial and ethnic groups do exist, they are often due to a complex interplay of socioeconomic factors, access to health care, and social determinants of health rather than race itself. It's crucial to clarify that the relationship between race and depression is influenced more by these external factors than by race inherently.

"Once a person has experienced a depressive episode, the incidence of depression increases." This statement is accurate and should be included. It is well-documented in psychiatric literature that having one depressive episode significantly increases the risk of experiencing subsequent episodes. This is important information for student nurses as it underscores the need for effective management of initial depressive episodes and ongoing support for those at risk.

"Depression is more common in young women." This statement is generally accurate and relevant. Epidemiological studies have shown that depression is more prevalent among women, particularly during their reproductive years. Factors such as hormonal changes, psychosocial stressors, and societal expectations can contribute to this increased risk. This information is important for student nurses to understand as it impacts how they might approach care and treatment in different populations.

In summary, when educating student nurses about depression, it is essential to emphasize evidence-based information and avoid perpetuating misconceptions or unsupported claims, especially regarding sensitive topics like race and mental health. This approach ensures that future healthcare providers are well-equipped with the knowledge necessary to treat all patients with understanding, competence, and respect.

NEW QUESTION # 28

One way of learning what different medications a patient takes is to have the patient bring all medications and supplements she takes to an appointment. This is known as which of the following?

- **A. Brown bag review.**
- B. Review of systems.
- C. Medicine cabinet review.
- D. Medication assessment.

Answer: A

Explanation:

The term "Brown bag review" refers to a method used by healthcare providers to gain a comprehensive understanding of all the medications a patient is currently taking. This method involves the patient collecting all their medications, including prescription drugs, over-the-counter (OTC) medications, vitamins, and herbal supplements, and bringing them to their medical appointment in a literal or figurative brown bag.

The primary goal of a Brown bag review is to ensure the patient's safety by enabling the healthcare provider to verify the medications being used, check for any potential drug interactions, ensure proper dosing, and confirm that the patient is following the prescribed medication regimen correctly. This review also provides an opportunity to educate patients about their medications, discuss any concerns they might have, and make adjustments to their prescriptions if necessary.

This practice is distinct from a "Review of systems" which is a systematic approach used during a medical interview to collect information about the different organ systems of the body. The Review of systems is designed to uncover symptoms and signs of diseases but does not specifically focus on medication review.

Furthermore, a "Medicine cabinet review" might sound similar, but it is not a commonly recognized term in clinical practice for a

medication review strategy. The Brown bag review remains the standard terminology and practice for this type of comprehensive medication assessment during a healthcare visit.

In summary, the Brown bag review is a valuable practice in healthcare that helps in optimizing patient treatment plans and improving overall medication management. By bringing all their medications to the review, patients actively participate in their healthcare process, leading to better health outcomes.

NEW QUESTION # 29

Your 19-year-old male patient has extreme mood swings and has been diagnosed with bipolar II disorder. He has been taking medication prescribed by his mental health specialist and is participating in psychotherapy. He comes to you for evaluation, telling you that he feels much better and wants to end his treatment. You would tell him which of the following?

- A. that he must be weaned off the treatment slowly
- B. that you will do some bloodwork to check his condition and then see what must be done
- C. that he has a lifelong condition that must be addressed with lifelong treatment
- D. that he can stop his medication slowly but must go to therapy for a while longer

Answer: C

Explanation:

The most appropriate response to your 19-year-old patient who wants to end his treatment for bipolar II disorder would be to explain that bipolar disorder is a lifelong condition that requires ongoing management. This includes the potential need for lifelong treatment. It is crucial to communicate that feeling better is a positive sign but does not signify that the disorder has been cured. Bipolar disorder is characterized by alternating periods of highs (hypomania) and lows (depression), and treatment is typically aimed at managing symptoms and preventing the recurrence of mood episodes. Medications and psychotherapy play a critical role in this ongoing process. It is important to clarify that while medications help stabilize mood, psychotherapy provides tools and strategies to cope with life challenges and mood changes.

Additionally, you can explain the risks associated with abruptly stopping medication. For many patients, discontinuing medication without proper guidance can lead to a relapse or worsening of symptoms. A gradual tapering off, under the supervision of a healthcare provider, might be considered if it aligns with a long-term treatment strategy developed by the patient's mental health specialist.

It would also be beneficial to conduct some follow-up assessments, such as blood work or psychological evaluation, to gain a better understanding of his current health status and to ensure that the treatment plan remains effective and safe.

Lastly, emphasizing the importance of continued engagement in psychotherapy even if medications are adjusted is essential. Ongoing therapy can provide support, education, and coping strategies that are vital for long-term management of bipolar disorder.

Encouraging participation in support groups or psychoeducational sessions can also be helpful for both the patient and his family to better understand the nature of the disorder and how to support his journey toward stability.

Overall, it's crucial to support your patient in recognizing the chronic nature of bipolar disorder and the importance of a sustained, comprehensive treatment approach to maintain his health and quality of life.

NEW QUESTION # 30

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