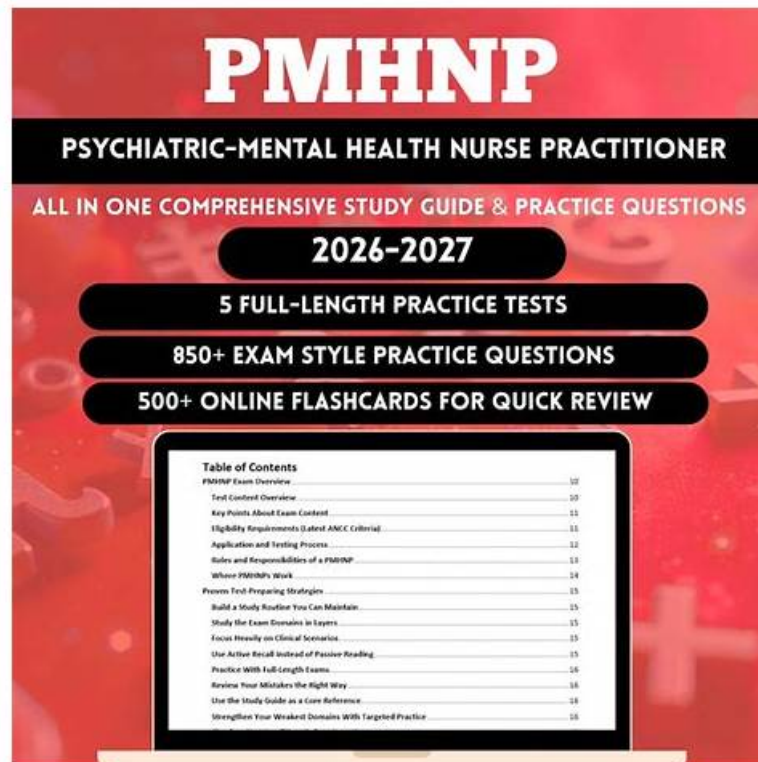


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**College Admission American Nurses Credentialing Center: Adult Psychiatric-Mental Health Nurse Practitioner-Board Certified Sample Questions (Q587-Q592):**

### NEW QUESTION # 587

Which of the following is a non-stimulant that is FDA-approved for the treatment of ADHD in children?

- A. Kapvay (clonidine)
- B. Wellbutrin XL (bupropion)
- C. Dexedrine (dextroamphetamine)
- D. Adderall (amphetamine salts)

**Answer: A**

Explanation:

The FDA has approved both stimulants and non-stimulants for the treatment of ADHD in children.

The following medications are FDA-approved but are not classified as stimulants:

\* Strattera (atomoxetine)

\* Intuniv (guanfacine)

\* Kapvay (clonidine)

The following are stimulants:

\* Adderall (amphetamine salts)

\* Dexedrine (dextroamphetamine)

Wellbutrin XL (bupropion) is an NDRI (norepinephrine and dopamine reuptake inhibitor) but is indicated in the treatment of ADHD in adults.

### NEW QUESTION # 588

Which of the following is NOT considered a sexual dysfunction disorder?

- A. vaginismus
- B. sexual aversion disorder
- C. dyspareunia
- D. dysmenorrhea

**Answer: D**

Explanation:

The question asks which option listed is NOT considered a sexual dysfunction disorder. To answer this correctly, understanding what constitutes a sexual dysfunction disorder is crucial.

Sexual dysfunction disorders are conditions that prevent an individual from experiencing satisfaction from sexual activity. These include problems with sexual desire, arousal, or physical responses. Common examples of such disorders include dyspareunia (painful intercourse), vaginismus (involuntary spasms of the vagina that prevent penetration), and sexual aversion disorder (avoidance of all or almost all genital sexual contact).

Dysmenorrhea, on the other hand, refers to pain during menstruation. It is a gynecological condition rather than a sexual dysfunction disorder. Dysmenorrhea can be debilitating and affect a person's daily activities, but it does not directly relate to the sexual response cycle or sexual performance. It is characterized by severe and frequent menstrual cramps and pain, which is usually linked to underlying medical issues like endometriosis or fibroids.

Therefore, among the options given - dyspareunia, vaginismus, sexual aversion disorder, and dysmenorrhea - dysmenorrhea is the correct answer as it is not a sexual dysfunction disorder. It is essential to distinguish between gynecological conditions and sexual dysfunctions to ensure appropriate diagnosis and treatment.

### NEW QUESTION # 589

Which of the following statements regarding a nurse practitioner's certification, if made by a nurse practitioner student, requires further education?

- A. It verifies the mastery of a particular medical specialty
- B. It determines the nurse practitioner's scope of practice
- C. It is established by the government
- D. It is awarded by a professional organization

**Answer: C**

Explanation:

Certification is a process by which a professional organization certifies that an individual has met certain predetermined standards specified by that specialty practice. The nurse practitioner's certification determines their scope of practice, and it assures the public that they have mastered a body of knowledge in a particular medical specialty. This certification is not established by the government.

#### NEW QUESTION # 590

A patient has been prescribed lithium for the treatment of bipolar disorder. Which adverse effect is most important to consider with this medication?

- A. Anemia
- B. Increased risk of osteoporosis
- C. Nephrogenic diabetes insipidus
- D. Increased risk of seizures

**Answer: C**

Explanation:

Nephrogenic diabetes insipidus is a known adverse effect of lithium therapy. It is a condition characterized by an inability of the kidneys to respond to antidiuretic hormone (ADH), resulting in excessive urine output and dehydration. This effect is caused by lithium's inhibition of the action of ADH on the kidney's collecting ducts. Nephrogenic diabetes insipidus can lead to electrolyte imbalances, dehydration, and kidney damage if left untreated.

The nurse practitioner should closely monitor the patient's fluid and electrolyte levels, and educate the patient about the signs and symptoms of this adverse effect.

#### NEW QUESTION # 591

A 17-year-old male patient with autism and bipolar disorder has been prescribed Depakote for the management of severe aggression toward himself and others. Since he started Depakote, these behaviors have decreased, but the patient now presents with daytime fatigue and lethargy. Blood work reveals therapeutic Depakote levels but high ammonia. Adding the Depakote resulted in a significant decrease in aggression and was thought to be overall helpful.

What action could be taken to mitigate the elevated ammonia and retain the benefits of the Depakote?

- A. Reduce the Depakote dose and monitor
- B. Prescribe a vegetarian diet to reduce dietary sources of ammonia
- C. Monitor ammonia and liver enzymes, as ammonia levels rise with initial dosing and stabilize as the body acclimates
- D. Add the amino acid L-carnitine to reduce ammonia levels

**Answer: D**

Explanation:

Valproic acid can create elevated ammonia levels, which can provoke symptoms ranging from fatigue to coma. When valproic acid levels are therapeutic and thought to be helpful for prescribed symptoms, the addition of L-carnitine can help lower ammonia levels. If this intervention is not effective, the dose may need to be reduced, or the medication may need to be stopped.

#### NEW QUESTION # 592

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