

# AANP-FNP Braindump Pdf & Online AANP-FNP Tests

## AANP FNP

Basal Cell Carcinoma - Correct Answer--painless, pearly, ulcerated nodule with overlying telangiectasias  
-found on sun areas

Actinic Keratoses - Correct Answer--slightly rough, pink or flesh-colored lesion in sun-exposed area  
-pharmacological treatment: 5-fluorouracil (topical chemotherapy)  
-non-pharmacological treatment: chemical peel, cryotherapy, laser resurfacing

Tuberculosis - Correct Answer-I. Transmission  
A. Mycobacterium tuberculosis carried in airborne droplets  
B. Active Pulmonary or Laryngeal Tuberculosis transmitted  
1. Sneeze, cough, speak, or sing

II. Symptoms  
A. Latent Tuberculosis is asymptomatic  
B. Active Tuberculosis presentation often mimics cancer presentation  
1. Non-specific presentation (most common)  
a. Fatigue  
b. Weight loss  
c. Cachexia  
d. Night Sweats  
C. Pulmonary Tuberculosis symptoms  
1. Productive cough (typically 2-3 weeks)  
2. Hemoptysis (uncommon)  
3. Pleuritic Chest Pain  
4. Dyspnea

III. Signs  
A. Sites of Involvement  
1. Primary infection: lung involvement  
B. Disseminated Disease

IV. Management  
A. Latent Tuberculosis  
1. Positive PPD without signs of Active Tb  
2. Treatment indicated if risk of Tb Progression from latent to active disease  
B. Active Tuberculosis

Gout - Correct Answer-I. Pathophysiology  
A. "Gout occurs when Uric Acid levels exceed solubility limits"  
1. Monosodium urate crystals deposit in joints, Kidney, and soft tissues  
2. Crystal deposition triggers an inflammatory response from cytokines and Neutrophils

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

## (Q49-Q54):

### NEW QUESTION # 49

Mr. Sanchez's family brings him in to see you because he seems to have frequent confused episodes and possible dementia. You would use which of the following questionnaires to determine if Mr. Sanchez could indeed have a form of dementia?

- A. Folstein Mini-Mental State Exam
- B. Generalized Anxiety Disorder 7-Item Scale
- C. Clock-Drawing Test
- D. Beck Depression Inventory

**Answer: A**

Explanation:

\*In the scenario where Mr. Sanchez is experiencing frequent episodes of confusion and potential dementia, the most appropriate tool to assess his cognitive state is the Folstein Mini-Mental State Exam (MMSE). This assessment is specifically designed to evaluate various aspects of cognitive function which are often affected in cases of dementia, including Alzheimer's disease, vascular dementia, and other conditions that impact cognitive abilities. \*

\*The MMSE is a brief 30-point questionnaire that is used extensively in clinical and research settings to measure cognitive impairment. It assesses several cognitive domains: orientation to time and place, immediate recall, short-term memory (through registration and recall of three words), calculation, language, and the ability to understand and follow complex commands. \*

\*Scoring for the MMSE is straightforward: the maximum possible score is 30 points, with higher scores indicating better cognitive function. Generally, a score of 24 or higher (out of 30) suggests normal cognition. Scores between 19 and 23 may indicate mild cognitive impairment, while scores of 18 or below may indicate moderate to severe impairment. However, it's important to note that these cutoffs can vary based on age and education level, and the test should be interpreted within the context of the individual's baseline capabilities. \*

\*In contrast to the MMSE, other tools like the Generalized Anxiety Disorder 7-Item Scale (GAD-7) and the Beck Depression Inventory are primarily used for assessing anxiety and depression, respectively. These conditions can also affect cognitive function but are different from the cognitive decline typically seen in dementia. The Clock Drawing Test is another quick screening tool that can be indicative of cognitive impairment but is less comprehensive than the MMSE. \*

\*Therefore, for a comprehensive assessment of Mr. Sanchez's cognitive status, particularly to evaluate for possible dementia, the Mini-Mental State Exam is the most suitable choice among the options. It allows healthcare providers to objectively measure cognitive impairment and helps in guiding further diagnostic and management strategies.

### NEW QUESTION # 50

A disease characterized by high fever, truncal and perineal area rash, and dry cracked lips with a strawberry tongue is known as:

- A. Scarlet Fever
- B. Fifth disease
- C. Kawasaki disease
- D. Varicella

**Answer: C**

Explanation:

Kawasaki disease, correctly identified in the question, is a multisystem inflammatory condition that predominantly affects children under the age of five. The hallmark features of this disease include a persistent high fever lasting more than five days, a rash in the truncal and perineal areas, and mucosal inflammation, which manifests as dry, cracked lips and a strawberry-colored tongue. These symptoms are critical for the diagnosis of Kawasaki disease, particularly in the absence of other more common childhood illnesses that present with similar symptoms.

Additional clinical signs of Kawasaki disease include erythema of the palms and soles followed by peeling, swollen lymph nodes, typically a single, large, cervical node, and non-purulent conjunctivitis. These symptoms help differentiate Kawasaki disease from other diseases with somewhat similar presentations. The etiology of Kawasaki disease remains unknown, but it is considered an autoimmune disorder triggered by an infectious agent in genetically predisposed individuals.

Scarlet Fever, another disease option mentioned, is caused by *Streptococcus pyogenes*. While it also features fever and a rash, the rash of Scarlet Fever typically starts as small red bumps on the neck and groin before spreading to the body, and is often accompanied by a sore throat and a characteristic "sandpaper" texture of the skin. Strawberry tongue can also occur in Scarlet Fever, but the presence of a sore throat, the nature of the rash, and the absence of conjunctivitis are distinguishing features from Kawasaki disease.

Varicella, commonly known as chickenpox, presents with a vesicular rash that progresses through stages (papule, vesicle, crust) and

is generally more widespread and itchy, which is not characteristic of Kawasaki disease. Finally, Fifth disease, caused by Parvovirus B19, is notable for causing a "slapped cheek" appearance on the face and a lacy rash on the body, which are not features of Kawasaki disease.

Understanding these distinguishing features is crucial in clinical practice to ensure accurate diagnosis and management. Kawasaki disease, in particular, requires prompt treatment with intravenous immunoglobulin and aspirin to reduce the risk of coronary artery aneurysms, a serious complication of the disease. Thus, differentiating it from other childhood rashes and infections using the specific clinical criteria is imperative for effective treatment and prevention of complications.

### NEW QUESTION # 51

Janet is reviewing a patient's test results and determines he has hypothyroidism, which means the thyroid does what?

- A. Swells up in size.
- B. Produces too much thyroid hormone.
- C. Shrinks in size.
- D. Does not produce enough thyroid hormone.

#### Answer: D

Explanation:

Hypothyroidism is a condition where the thyroid gland, which is located in the neck and plays a crucial role in regulating metabolism, fails to produce sufficient amounts of thyroid hormone. This hormone is vital for various bodily functions, including managing metabolism, heart rate, and body temperature. When the thyroid does not produce enough of this hormone, it leads to the condition known as hypothyroidism.

The symptoms of hypothyroidism can vary widely depending on the severity of the hormone deficiency. Common symptoms include fatigue, unexplained weight gain, constipation, dry skin, hair loss, sensitivity to cold, and a slower heart rate. These symptoms occur because thyroid hormones are critical to energy production and consumption in the body, influencing how the body processes energy.

Hypothyroidism can be caused by several factors. One common cause is Hashimoto's thyroiditis, an autoimmune disorder where the body's immune system attacks the thyroid gland, impairing its ability to produce hormones. Other causes may include certain medications, radiation therapy to the neck, surgical removal of part or all of the thyroid gland, and iodine deficiency.

Diagnosis of hypothyroidism typically involves a review of symptoms, a physical examination, and blood tests to measure levels of thyroid-stimulating hormone (TSH) and thyroxine. Elevated TSH levels and low thyroxine levels in the blood are indicative of hypothyroidism. Treatment usually involves hormone replacement therapy, specifically with a synthetic thyroid hormone called levothyroxine, which helps to restore hormone levels and reverse the symptoms of the disorder.

It is important for individuals diagnosed with hypothyroidism to receive regular monitoring and follow-up care to ensure that the prescribed treatment is effectively managing the condition. Adjustments in the dosage of hormone replacement may be necessary over time based on periodic blood tests and symptom assessment. Proper management of hypothyroidism is crucial to maintaining a good quality of life and preventing potential complications such as heart problems and severe depression.

### NEW QUESTION # 52

The procedure used to diagnose atherosclerotic lesions or thrombi in the coronary vessels is which of the following?

- A. coronary angiography
- B. nuclear stress test
- C. MRI
- D. stress test

#### Answer: A

Explanation:

The correct answer to the question regarding the procedure used to diagnose atherosclerotic lesions or thrombi in the coronary vessels is "coronary angiography." This medical test is pivotal in the field of cardiology, particularly for assessing and diagnosing heart-related conditions.

Coronary angiography involves the use of X-ray imaging to see your heart's blood vessels. During the procedure, a type of dye that's visible by an X-ray machine is injected into the blood vessels of your heart. The X-ray machine rapidly takes a series of images (angiograms), offering a detailed look at the inside of your blood vessels. If there are any blockages, irregularities, or changes in the blood vessels, they will be visible on the angiogram.

This procedure is particularly effective for identifying atherosclerosis, a condition where the blood vessels become narrowed due to the build-up of fatty plaques. This can lead to reduced blood flow, which can cause chest pain (angina), heart attacks, or other

serious cardiac conditions. Coronary angiography is also instrumental in identifying blood clots (thrombi) that can obstruct the coronary arteries and disrupt the normal flow of blood to the heart.

Beyond diagnosing blockages and blood clots, coronary angiography is utilized to evaluate other heart conditions. It can be used to assess heart valve function, detect congenital heart defects, and evaluate the performance of the heart's chambers and walls. The detailed visualization aids doctors in planning appropriate treatments, which may include stenting, medications, or surgery.

While other tests like stress tests, MRI, and nuclear stress tests can suggest problems in the heart's function and blood flow, coronary angiography provides a direct and detailed view of the physical state of the coronary arteries. This is why it remains the definitive test for diagnosing structural heart diseases, particularly those involving the coronary vessels.

### NEW QUESTION # 53

You are assisting in the emergency room with a patient who is having a posterior nosebleed. You might recommend each of the following measures to control the posterior epistaxis except for which one?

- A. firm pressure on the area
- B. direct cauterization
- C. posterior nasal packing
- D. embolization

#### Answer: A

Explanation:

In the management of a patient experiencing a posterior nosebleed, various medical interventions can be recommended to control the bleeding. However, the effectiveness of these interventions depends on whether the nosebleed is anterior or posterior.

Understanding the difference between these two types of epistaxis is crucial in choosing the appropriate treatment method.

Posterior nosebleeds, which account for approximately 5-10% of all nosebleeds, originate from the back portions of the nose where the blood vessels are larger and thus potentially more difficult to manage. These types of bleeds are often more severe and may require advanced medical interventions.

The common treatments for posterior epistaxis include: 1. **Direct Cauterization**: This process involves using heat or a chemical agent to burn the bleeding vessel, sealing it to stop the bleeding. This method is effective for accessible bleeding sites and can be performed under local anesthesia. 2. **Posterior Nasal Packing**: This involves placing a special gauze or an inflatable balloon in the nasal cavity to apply pressure directly to the source of the bleeding. This is often used when cauterization is not possible or effective. 3. **Embolization**: This is a more invasive procedure where materials are used to block the bleeding vessel through an endovascular approach. It is typically reserved for severe cases or when other interventions have failed. 4. **Surgery**: In some severe cases, surgical intervention might be necessary to directly ligate (tie off) the bleeding vessels.

On the other hand, firm pressure on the area, generally applied by pinching the soft part of the nose, is a technique usually recommended for anterior nosebleeds. Anterior nosebleeds originate from the front part of the nasal septum and are typically less severe. Applying pressure helps to compress the bleeding vessels, which can control the bleeding effectively in many cases of anterior epistaxis.

Therefore, in the context of treating a posterior nosebleed, recommending firm pressure on the nasal area is generally ineffective. This method does not adequately address the deeper, more posteriorly located sources of bleeding. Instead, the treatments listed under options such as direct cauterization, posterior nasal packing, embolization, or surgery are more appropriate and effective for managing a posterior nosebleed. Hence, the correct answer to the question of which measure might not be recommended for controlling posterior epistaxis is "firm pressure on the area."

### NEW QUESTION # 54

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