

# 信頼できるAANP-FNP資格難易度とユニークなAANP-FNP問題例

FNP practice exam AANP with questions with Complete Solutions

diabetes can contribute to pregnancy induced HTN - ✓ ...

hold assistive device (like cane) on opposite side - ✓ ...

sickle cell, thalassemia and leukemia can all cause - ✓ hepatosplenomegaly - but IDA will not

VSD sx - ✓ cyanosis and poor feeding - murmur is heard in tricuspid area

Down's syndrome patients can have - ✓ congenital heart defects, seizures, eye issues, hearing loss, obesity - NOT failure to thrive

hyperinflation of lungs can be seen on chest X-ray in patients with asthma - ✓ ...

Kerley's B lines on X-ray indicate - ✓ Pulmonary edema

Depo provera can cause - ✓ menstrual irregularities and amenorrhea

when rx hormones, consider fam hx of what cancers - ✓ uterine and breast

nuva ring does not affect menstrual cycle - ✓ ...

implant can help with cramps - ✓ ...

itraconazole - oral - ✓ ...

まだどうのようNursing AANP-FNP資格認定試験にバースすると煩惱していますか。現時点で我々サイトIt-Passportsを通して、ようやくこの問題を心配することはありませんよ。It-Passportsは数年にわたりNursing AANP-FNP資格認定試験の研究に取り組んで、量豊かな問題庫があるし、豊富な経験を持ってあなたが認定試験に効率的に合格するのを助けます。AANP-FNP資格認定試験に合格できるかどうかには、重要なのは正確の方法で、復習教材の量ではありません。だから、It-PassportsはあなたがNursing AANP-FNP資格認定試験にバースする正確の方法です。

Nursingさまざまな種類の候補者がAANP-FNP認定を取得する方法を見つけるために、多くの研究が行われています。シラバスの変更および理論と実践の最新の進展に応じて、AANP-FNPテストトレントを修正および更新します。AANP-FNP認定トレーニングは、厳密な分析による近年のテストと業界動向に基づいています。したがって、お客様のAANP Family Nurse Practitioner (AANP-FNP)のために、より多くの選択肢が用意されています。試験のためにAANP-FNP試験問題を選択することをお勧めします。

>> AANP-FNP資格難易度 <<

信頼できるNursing AANP-FNP資格難易度 & 合格スムーズAANP-FNP問題例 | 最高のAANP-FNP模擬問題

AANP-FNP試験に向けて勉強しているときは、家族のためなど、仕事に行くのに忙しいかもしれません。誰もが効率的な仕事をするための時間は貴重です。優れたAANP-FNP準備ガイドを取得したい場合、合格するまでの時間を短縮する必要があります。キーポイントと最新情報を選択して、AANP-FNPガイドトレントを完成させています。練習するのに20時間から30時間しかかかりません。効果的な練習の後、AANP-FNP試験トレントから試験ポイントを習得できます。その後、AANP-FNP試験に合格するのに十分な自信があります。

## Nursing AANP Family Nurse Practitioner (AANP-FNP) 認定 AANP-FNP 試験問題 (Q93-Q98):

### 質問 #93

Your 62-year-old female patient was diagnosed with subscapular bursitis. The most likely cause of this is that she works on an assembly line using a repeated back-and-forth motion. You are using several conservative measures to treat this but after 6 weeks, results are minimal. What is your next step for this patient?

- A. intrabursal corticosteroid injection
- B. antimicrobial therapy
- C. appropriate exercise
- D. massage

正解: A

#### 解説:

The recommended next step for a 62-year-old female patient diagnosed with subscapular bursitis, especially after conservative measures such as physiotherapy, rest, and NSAIDs have shown minimal improvement, is an intrabursal corticosteroid injection. Subscapular bursitis involves inflammation of the bursa located beneath the scapula. This condition is commonly seen in individuals who perform repetitive activities, such as working on an assembly line with repeated back-and-forth motions.

Intrabursal corticosteroid injections are commonly used when conservative treatments fail to provide relief. Corticosteroids are potent anti-inflammatory agents that can effectively reduce inflammation and pain within the bursa. The injection is administered directly into the bursa to maximize its effectiveness while minimizing systemic side effects.

It is essential to inform the patient about the potential side effects and complications associated with corticosteroid injections. Commonly, patients may experience soreness and discomfort at the injection site for a few days. Although less common, there are risks of tissue atrophy and severe inflammatory reactions at the injection site. These side effects are rare but should be discussed so that the patient can make an informed decision.

Following the injection, the patient should be monitored for improvement and any adverse reactions. If symptoms persist or worsen, further diagnostic evaluation may be necessary to reassess the condition and consider alternative treatments or interventions.

Additionally, modifying the patient's work environment and activities to reduce repetitive strain on the affected area can help prevent recurrence of the condition.

### 質問 #94

When taking a patient's past medical history you would ask about all of the following EXCEPT:

- A. childhood and adult illnesses
- B. surgeries
- C. TB test
- D. dietary patterns

正解: D

#### 解説:

When taking a patient's past medical history, the healthcare provider generally focuses on gathering information that directly pertains to the patient's medical conditions, treatments, and overall health status. This typically includes inquiries about:

\*\*Childhood and Adult Illnesses:\*\* Understanding a patient's history of illnesses, both in childhood and adulthood, is crucial. This information helps in recognizing patterns of chronic or genetic diseases and provides insights into potential future health risks or ongoing management of existing conditions.

\*\*TB Test:\*\* Information about tuberculosis tests is relevant as TB is a critical infectious disease with potential long-term health implications. Knowing whether a patient has been tested, and the results of those tests, can significantly affect clinical decisions, especially in managing immunocompromised patients or those with symptoms of tuberculosis.

\*\*Surgeries:\*\* Knowledge of any past surgical interventions provides insights into the patient's medical history and can impact future healthcare decisions. Details of surgical history, including the type of surgeries and their outcomes, are essential for a comprehensive understanding of a patient's current health status and potential complications.

\*\*Dietary Patterns:\*\* Although knowing a patient's dietary habits can be helpful, especially in the context of nutritional assessments or chronic diseases management (like diabetes or heart diseases), it is typically not part of the core past medical history. Dietary patterns are usually discussed within the scope of a psychosocial history, which examines lifestyle factors and social determinants of health that can influence a patient's well-being. This includes the patient's eating habits, exercise routines, and other lifestyle choices. In summary, while childhood and adult illnesses, TB tests, and surgeries are integral components of a patient's past medical history, dietary patterns are generally classified under psychosocial history. This distinction is important for organizing the patient interview and ensuring that the most relevant information is gathered efficiently to inform medical decision-making.

#### 質問 #95

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

正解: A

#### 解説:

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.

#### 質問 #96

Which of the following characteristics is not typical of melanoma?

- A. pink-to-red targetlike lesions
- B. uneven texture
- C. irregular borders
- D. mixed colors

正解: A

#### 解説:

The characteristic "pink-to-red targetlike lesions" is not typical of melanoma. Melanoma, a serious form of skin cancer, generally presents with specific features known as the ABCDEs: Asymmetry, Border irregularity, Color variation, Diameter over 6mm, and Evolving nature of the mole.

Typically, melanomas are characterized by dark-colored moles that may appear black, brown, or even multicolored. These moles often have an uneven texture and irregular borders, which may blur into the surrounding skin or appear ragged. The color of a melanoma can include different shades of brown or black, and sometimes red, white, or blue tones can be seen within the lesion. In contrast, pink-to-red targetlike lesions, which are more indicative of conditions like erythema multiforme or Lyme disease, do not align with the typical presentation of melanoma. These lesions generally show a distinct pattern that resembles a target, with multiple rings of varying colors typically centering on a darker spot. Such characteristics differ significantly from the irregular, mixed-color

presentation of melanoma.

Understanding these distinctions is crucial for early detection and proper treatment of melanoma, differentiating it from other skin conditions that might have less severe implications. Therefore, recognizing that pink-to-red targetlike lesions are not typical of melanoma can help in avoiding misdiagnosis and ensuring appropriate medical attention for potentially malignant changes in the skin.

#### 質問 #97

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

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

正解: **D**

解説:

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.

#### 質問 #98

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It-Passportsはあなたが次のNursingのAANP-FNP認定試験に合格するように最も信頼できるトレーニングツールを提供します。It-PassportsのNursingのAANP-FNP勉強資料は問題と解答を含めています。それは実践の検査に合格したソフトですから、全ての関連するIT認証に満たすことができます。

**AANP-FNP問題例:** <https://www.it-passports.com/AANP-FNP.html>

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これから買うところですと東風君が答えるとまだ買わないのか、実に永いなど独AANP-FNP（ひと）り言（ごと）のように云ってまた本を読み出した、誰にも見せたくないのに、外で誰かに見られているかもしれないこの背徳的な感じ、癖にならない？

**これだけで突破【合格ライン】 AANP-FNP 合格読本 レベル攻略**

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購入前にAANP-FNPテスト問題をダウンロードして自由に試すことができます、当社の製品は、実践と記憶に値する専門知識の蓄積です。