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>> AANP-FNP Prüfungsmaterialien <<

AANP-FNP Deutsch - AANP-FNP Exam Fragen

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bestehen, und bietet Ihnen einen einjährigen kostenlosen Update-Service. Dann wählen Sie doch Fast2test, um Ihren Traum zu verwirklichen. Um Erfolg zu erringen, ist Ihnen weise, Fast2test zu wählen. Wählen Sie Fast2test, Sie werden der nächste IT-Elite sein.

Nursing AANP Family Nurse Practitioner (AANP-FNP) AANP-FNP Prüfungsfragen mit Lösungen (Q42-Q47):

42. Frage

A mother brings her 4-year-old son into the clinic for a routine checkup. The mother complains that the child misbehaves and will not listen to her no matter what she does. The FNP suggests a "time out" for the child when he misbehaves. Which statement in regard to a "time out" for children is most accurate?

- A. The child should be allowed to do something constructive during the "time out."
- B. "Time outs" should not be used until a child is at the age of reason.
- C. The child should sit still in the "time out" for as many minutes as his age in years.
- D. The "time out" should last for at least 10 minutes.

Antwort: C

Begründung:

The concept of "time out" as a disciplinary method for children is one based on the principle of removing a child from an environment where inappropriate behavior has occurred, thereby giving them time to calm down and reflect on their actions. The effectiveness of this method lies in its simplicity and direct association with behavioral correction. When considering how long a "time out" should last, the general guideline suggests that the duration should correspond to the child's age - one minute per year of age. This recommendation is based on developmental appropriateness, ensuring that the punishment is neither too lenient nor overly harsh for the child's emotional and cognitive abilities.

For a 4-year-old child, as in the scenario provided, a "time out" should therefore last for four minutes. This time frame is sufficient to serve as a reminder of the consequences of misbehavior without causing undue distress or anxiety. During this time, it is crucial that the child is seated quietly without engaging in any activities such as reading or drawing. This lack of stimulation serves as a part of the corrective experience, emphasizing the pause from regular activities and creating a distinct contrast to normal play or interaction times.

The purpose of having the child sit still without distractions is to help them internalize the reason for the "time out" and to recognize the significance of their previous actions that led to this consequence. This method helps in fostering self-regulation and understanding of the impact of one's actions on others. Activities or distractions could undermine the effectiveness of the "time out," reducing its impact as a disciplinary measure.

It is essential, however, for parents or caregivers to explain to the child both the reason for the "time out" and what behavior is expected going forward. This explanation should be done calmly and clearly before and after the "time out" period to reinforce learning and correction. Understanding the reasons for consequences is crucial for the child's developmental learning and emotional growth.

Overall, the use of "time out" focused on the age-appropriate timing and conditions promotes an understanding of boundaries and acceptable behavior in a manner that respects the child's developmental stage. This approach not only helps in managing behavior at the moment but also aids in the broader aspect of character formation and social adaptation as the child grows.

43. Frage

A mother brings a 21-month-old Asian-American female child into the office. The chief complaint is abdominal pain with flatulence and diarrhea after eating. Up until 3 months ago, she was being breast-fed twice a day. The nurse practitioner suspects:

- A. food allergy
- B. irritable bowel syndrome
- C. lactose intolerance
- D. Hirschsprung's disease

Antwort: C

Begründung:

Lactose intolerance is a common digestive problem where the body is unable to digest lactose, a type of sugar mainly found in milk and dairy products. In the case of the 21-month-old Asian-American child presented, the symptoms of abdominal pain, flatulence, and diarrhea after eating are highly suggestive of this condition. It is important to note that lactose intolerance can develop after a person significantly decreases their consumption of dairy, such as after weaning off breast milk, which aligns with the child's history. Statistically, lactose intolerance has a higher prevalence among people of Asian descent. This is due to a higher likelihood of lactase

deficiency, the enzyme needed to properly digest lactose, in this population. The primary symptoms that were reported - bloating, flatulence, abdominal cramps, and diarrhea - occur as undigested lactose passes through the intestines and is fermented by bacteria, producing gas and drawing extra water into the bowel.

In contrast, other conditions such as food allergies, irritable bowel syndrome (IBS), and Hirschsprung's disease present differently. Food allergies in young children are indeed common but typically manifest with symptoms like angioedema, flushing, hives, and throat itching. None of these have been reported in this child. Additionally, while IBS does affect bowel habits, it usually presents later in life and features a mix of constipation and diarrhea. Hirschsprung's disease, a congenital condition more prevalent in males, involves missing nerve cells in parts of the colon leading to severe constipation, which is not consistent with the symptoms described. Given the child's background, recent dietary history, and symptomatology, lactose intolerance is the most likely diagnosis. To confirm this, a lactose tolerance test or a hydrogen breath test may be conducted. Management typically involves dietary modifications to limit or eliminate lactose-containing foods, which often leads to symptom resolution. In some cases, lactase enzyme supplements may be recommended to aid in the digestion of lactose when consuming dairy products.

44. Frage

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

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

Antwort: D

Begründung:

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.

45. Frage

An 80-year-old patient presents with a history of infection. He is obese and his chief complaint is fatigue and thirst. What test should be run?

- A. Blood glucose.
- B. Serum albumin.
- C. Hemoglobin.
- D. Serum cholesterol.

Antwort: A

Begründung:

The correct test to run for an 80-year-old patient who presents with fatigue, thirst, obesity, and a history of infection is a blood glucose test. This recommendation is based on several factors that align with the common symptoms and risk factors associated with diabetes mellitus, particularly type 2 diabetes.

First, the age of the patient is a significant factor. Glucose intolerance increases with age, making older patients more susceptible to

diabetes. As individuals age, their insulin sensitivity typically decreases, and pancreatic function may deteriorate, both of which can contribute to elevated blood glucose levels.

Second, the patient's obesity further compounds the risk. Obesity is a well-known risk factor for the development of type 2 diabetes. Excess body fat, especially in the abdominal area, is linked to decreased insulin sensitivity, meaning that the body needs more insulin to help glucose enter cells. This state of insulin resistance is a precursor to diabetes.

Third, the symptoms of fatigue and thirst are classic signs of diabetes. Fatigue in diabetes can result from the body's inability to properly use glucose for energy due to insulin resistance or lack of insulin production. Thirst is a result of high blood sugar levels, which cause dehydration by pulling excess water into the urine as the body attempts to remove the surplus glucose.

Lastly, the history of infection could also be relevant. In people with undiagnosed or poorly controlled diabetes, high blood sugar levels can impair the immune system, making infections more frequent or severe.

Therefore, measuring the blood glucose levels will provide critical information about whether the patient's symptoms might be related to diabetes. Monitoring and managing blood glucose is essential for diagnosing diabetes and preventing its complications. Other tests like serum cholesterol, serum albumin, and hemoglobin might be useful for a complete metabolic profile and assessment, but given the specific presentation and risk factors described, the blood glucose test is the most immediately relevant and informative in this scenario.

46. Frage

If movement is going toward the body it would be considered _____?

- A. Abduction
- **B. Adduction**
- C. Distal
- D. Proximal

Antwort: B

Begründung:

The question refers to a specific type of movement relative to the midline of the body. In anatomical terms, movements that bring a limb or other part closer to the sagittal plane (the plane that divides the body into left and right halves) are classified as adduction. Therefore, if the movement is going toward the body, it is considered **adduction**.

Adduction is often confused with **abduction**, which is essentially the opposite. Abduction is the movement that takes a limb or other part away from the midline of the body. For example, raising your arms sideways away from your body is an abduction movement.

To further clarify, these terms are also relative to other anatomical directional terms such as **distal** and **proximal**.

Distal refers to a body part that is further away from the center of the body (or from the point of attachment of a limb to the body), whereas **proximal** refers to a body part that is closer to the center of the body (or to the point of attachment).

Therefore, in the context of your original question, if movement is going toward the body, it is definitively termed as **adduction**. This terminology helps in understanding movement patterns, especially in fields like anatomy, physical therapy, and sports science.

47. Frage

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AANP-FNP Übungsmaterialien & AANP-FNP Lernführung: AANP Family Nurse Practitioner (AANP-FNP) & AANP-FNP Lernguide

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