

NURS 6630 Final Exam / NURS6630 Final Exam (3 New Versions, 2020) : Walden University (75 Correct Q & A in Each Version)

written by

ACEMYWORK

- **Question 1**

1 out of 1 points

What will the PMHNP most likely prescribe to a patient with psychotic aggression who needs to manage the top-down cortical control and the excessive drive from striatal hyperactivity?

Selected Answer: C.

Antipsychotics

- **Question 2**

1 out of 1 points

The PMHNP is selecting a medication treatment option for a patient who is exhibiting psychotic behaviors with poor impulse control and aggression. Of the available treatments, which can help temper some of the adverse effects or symptoms that are normally caused by D2 antagonism?

Selected Answer: D.

Second-generation, atypical antipsychotics

- **Question 3**

1 out of 1 points

The PMHNP is discussing dopamine D2 receptor occupancy and its association with aggressive behaviors in patients with the student. Why does the PMHNP prescribe a standard dose of atypical antipsychotics?

Selected Answer: C.

The doses are based on achieving 60% D2 receptor occupancy.

- **Question 4**

1 out of 1 points

Why does the PMHNP avoid prescribing clozapine (Clozaril) as a first-line treatment to the patient with psychosis and aggression?

Selected Answer: A.

There is too high a risk of serious adverse side effects.

- **Question 5**

1 out of 1 points

The PMHNP is caring for a patient on risperidone (Risperdal). Which action made by the PMHNP exhibits proper care for this patient? </p>

Selected C.

Answer: Titrating the dose by increasing it every 5–7 days

- **Question 6**

1 out of 1 points

The PMHNP wants to prescribe Mr. Barber a mood stabilizer that will target aggressive and impulsive symptoms by decreasing dopaminergic neurotransmission. Which mood stabilizer will the PMHNP select?

Selected A.

Answer: Lithium (Lithane)

- **Question 7**

1 out of 1 points

The parents of a 7-year-old patient with ADHD are concerned about the effects of stimulants on their child. The parents prefer to start pharmacological treatment with a non-stimulant. Which medication will the PMHNP will most likely prescribe?

Selected A.

Answer: Strattera

- **Question 8**

1 out of 1 points

The PMHNP understands that slow-dose extended release stimulants are most appropriate for which patient with ADHD?

Selected Answer: A.

8-year-old patient

- **Question 9**

1 out of 1 points

A patient is prescribed D-methylphenidate, 10-mg extended-release capsules. What should the PMHNP include when discussing the side effects with the patient?

Selected Answer: C.

The medication can affect your blood pressure.

- **Question 10**

1 out of 1 points

The PMHNP is teaching parents about their child's new prescription for Ritalin. What will the PMHNP include in the teaching?

Selected Answer: A.

The second dose should be taken at lunch.

- **Question 11**

1 out of 1 points

A young patient is prescribed Vyvanse. During the follow-up appointment, which comment made by the patient makes the PMHNP think that the dosing is being done incorrectly?

Selected Answer: B.

"I am unable to fall asleep at night."

- **Question 12**

1 out of 1 points

A 14-year-old patient is prescribed Strattera and asks when the medicine should be taken. What does the PMHNP understand regarding the drug's dosing profile?

Selected Answer: B.

The patient will have one or two doses a day.

- **Question 13**

0 out of 1 points

The PMHNP is meeting with the parents of an 8-year-old patient who is receiving an initial prescription for D-amphetamine. The PMHNP demonstrates appropriate prescribing practices when she prescribes the following dose:

Selected Answer: B.

The child will be prescribed a 10-mg tablet.

- **Question 14**

1 out of 1 points

A patient is being prescribed bupropion and is concerned about the side effects. What will the PMHNP tell the patient regarding bupropion?

Selected C.

Answer: It can cause cardiac arrhythmias.

- **Question 15**

1 out of 1 points

Which patient will receive a lower dose of guanfacine?

Selected D.

Answer: Patient with kidney disease

- **Question 16**

1 out of 1 points

An 18-year-old female with a history of frequent headaches and a mood disorder is prescribed topiramate (Topamax), 25 mg by mouth daily. The PMHNP understands that this medication is effective in treating which condition(s) in this patient?

Selected Answer: A.

Migraines

- **Question 17**

1 out of 1 points

The PMHNP is treating a patient for fibromyalgia and is considering prescribing milnacipran (Savella). When prescribing this medication, which action is the PMHNP likely to choose?

Selected Answer: C.

Split the daily dose into two doses after the first day.

- **Question 18**

1 out of 1 points

The PMHNP is assessing a patient she has been treating with the diagnosis of chronic pain. During the assessment, the patient states that he has recently been having trouble getting to sleep and staying asleep. Based on this information, what action is the PMHNP most likely to take?

Selected A.

Answer: Order hydroxyzine (Vistaril), 50 mg PRN or as needed

- **Question 19**

1 out of 1 points

The PMHNP is assessing a female patient who has been taking lamotrigine (Lamictal) for migraine prophylaxis. After discovering that the patient has reached the maximum dose of this medication, the PMHNP decides to change the patient's medication to zonisamide (Zonegran). In addition to evaluating this patient's day-to-day activities, what should the PMHNP ensure that this patient understands?

Selected D.

Answer: This medication has unwanted side effects such as sedation, lack of coordination, and drowsiness.

- **Question 20**

1 out of 1 points

A patient recovering from shingles presents with tenderness and sensitivity to the upper back. He states it is bothersome to put a shirt on most days. This patient has end stage renal disease (ESRD) and is scheduled to have hemodialysis tomorrow but states that he does not know how he can lie in a recliner for 3 hours feeling this uncomfortable. What will be the PMHNP's priority?

Selected C.

Answer: Prescribe lidocaine 5%

- **Question 21**

1 out of 1 points

The PMHNP prescribed a patient lamotrigine (Lamictal), 25 mg by mouth daily, for nerve pain 6 months ago. The patient suddenly presents to the office with the complaint that the medication is no longer working and complains of increased pain. What action will the PMHNP most likely take?

Selected Answer: A.

 Increase the dose of lamotrigine (Lamictal) to 25 mg twice daily.

- **Question 22**

0 out of 1 points

An elderly woman with a history of Alzheimer's disease, coronary artery disease, and myocardial infarction had a fall at home 3 months ago that resulted in her receiving an open reduction internal fixation. While assessing this patient, the PMHNP is made aware that the patient continues to experience mild to moderate pain. What is the PMHNP most likely to do?

Selected Answer: A.

Order an X-ray because it is possible that she dislocated her hip.

- **Question 23**

1 out of 1 points

The PMHNP is assessing a 49-year-old male with a history of depression, post-traumatic stress disorder (PTSD), alcoholism with malnutrition, diabetes mellitus type 2, and hypertension. His physical assessment is unremarkable with the exception of peripheral edema bilaterally to his lower extremities and a chief complaint of pain with numbness and tingling to each leg 5/10. The PMHNP starts this patient on a low dose of doxepin (Sinequan). What is the next action that must be taken by the PMHNP?

Selected A.

Answer: Orders liver function tests.

- **Question 24**

1 out of 1 points

The PMHNP is evaluating a 30-year-old female patient who states that she notices pain and a drastic change in mood before the start of her menstrual cycle. The patient states that she has tried diet and lifestyle changes but nothing has worked. What will the PMHNP most likely do?

Selected Answer: C.

Prescribe desvenlafaxine (Pristiq), 50 mg daily

- **Question 25**

1 out of 1 points

A patient with chronic back pain has been prescribed a serotonin-norepinephrine reuptake inhibitor (SNRI). How does the PMHNP describe the action of SNRIs on the inhibition of pain to the patient?

Selected A.

Answer: "The SNRI can increase noradrenergic neurotransmission in the descending spinal pathway to the dorsal horn."

- **Question 26**

1 out of 1 points

A patient with fibromyalgia and major depression needs to be treated for symptoms of pain. Which is the PMHNP most likely to prescribe for this patient?

Selected Answer: Duloxetine (Cymbalta)

- **Question 27**

1 out of 1 points

The PMHNP prescribes gabapentin (Neurontin) for a patient's chronic pain. How does the PMHNP anticipate the drug to work?

Selected A.

Answer: It will bind to the alpha-2-delta ligand subunit of voltage-sensitive calcium channels.

- **Question 28**

1 out of 1 points

Mrs. Rosen is a 49-year-old patient who is experiencing fibro-fog. What does the PMHNP prescribe for Mrs. Rosen to improve this condition?

Selected D.

Answer: All of the above

- **Question 29**

1 out of 1 points

The PMHNP is caring for a patient with fibromyalgia. Which second-line treatment does the PMHNP select that may be effective for managing this patient's pain?

Selected C.

Answer: Imipramine (Tofranil)

- **Question 30**

1 out of 1 points

The PMHNP is attempting to treat a patient's chronic pain by having the agent bind the open channel conformation of VSCCs to block those channels with a "use-dependent" form of inhibition. Which agent will the PMHNP most likely select?

Selected A.

Answer: Pregabalin (Lyrica)

- **Question 31**

1 out of 1 points

A patient with irritable bowel syndrome reports chronic stomach pain. The PMHNP wants to prescribe the patient an agent that will cause irrelevant nociceptive inputs from the pain to be ignored and no longer perceived as painful. Which drug will the PMHNP prescribe?

Selected Answer: C.

Duloxetine (Cymbalta)

- **Question 32**

1 out of 1 points

The PMHNP wants to use a symptom-based approach to treating a patient with fibromyalgia. How does the PMHNP go about treating this patient?

Selected Answer: C.

Matching the patient's symptoms with the malfunctioning brain circuits and neurotransmitters that might mediate those symptoms

- **Question 33**

1 out of 1 points

The PMHNP is working with the student to care for a patient with diabetic peripheral neuropathic pain. The student asks the PMHNP why SSRIs are not consistently useful in treating this particular patient's pain. What is the best response by the PMHNP?

Selected Answer: B.

"SSRIs only increase serotonin levels."

- **Question 34**

1 out of 1 points

A patient with gambling disorder and no other psychiatric comorbidities is being treated with pharmacological agents. Which drug is the PMHNP most likely to prescribe?

Selected Answer: D.

Naltrexone

- **Question 35**

1 out of 1 points

Kevin is an adolescent who has been diagnosed with kleptomania. His parents are interested in seeking pharmacological treatment. What does the PMHNP tell the parents regarding his treatment options?

Selected Answer: A.

"Naltrexone may be an appropriate option to discuss."

- **Question 36**

1 out of 1 points

Which statement best describes a pharmacological approach to treating patients for impulsive aggression?

Selected Answer: D.

Opioid antagonists can be used to reduce drive.

- **Question 37**

1 out of 1 points

A patient with hypersexual disorder is being assessed for possible pharmacologic treatment. Why does the PMHNP prescribe an antiandrogen for this patient?

Selected Answer: C.

It will block testosterone.

- **Question 38**

1 out of 1 points

Mrs. Kenner is concerned that her teenage daughter spends too much time on the Internet. She inquires about possible treatments for her daughter's addiction. Which response by the PMHNP demonstrates understanding of pharmacologic approaches for compulsive disorders?

Selected Answer: D.

"There are no evidence-based treatments for Internet addiction, but there are behavioral therapies your daughter can try."

- **Question 39**

1 out of 1 points

Mr. Peterson is meeting with the PMHNP to discuss healthier dietary habits. With a BMI of 33, Mr. Peterson is obese and needs to modify his food intake. "Sometimes I think I'm addicted to food the way some people are addicted to drugs," he says. Which statement best describes the neurobiological parallels between food and drug addiction?

Selected Answer: A.

There is decreased activation of the prefrontal cortex.

- **Question 40**

1 out of 1 points