**1.** A patient asks a primary care NP whether over-the-counter drugs are safer than prescription drugs. The NP should explain that over-the-counter drugs are: (Points : 2)

generally safe when label information is understood and followed.

 $\bigcup$  safer because over-the-counter doses are lower than prescription doses of the same  $\mathfrak{g}_{\mathfrak{c}}$ 

drug.

(FDA).

less safe because they are not well regulated by the Food and Drug Administration

not extensively tested, so claims made by manufacturers cannot be substantiated.

Question 2.2. A woman who is being treated with radiotherapy for breast cancer asks her primary care nurse practitioner (NP) about using dietary supplements to improve her chance of recovery. The NP should tell her that: (Points : 2)

vitamin E is not harmful but has not been shown to change outcomes.

no supplements have been shown to alter outcomes or response to therapy.

folic acid and other B vitamins may improve ability to tolerate chemotherapy.

vitamin C, taken at least 6 days per week, may lower her risk of cancer recurrence.

Question 3.3. A patient with type 2 diabetes mellitus takes metformin (Glucophage) 1000 mg twice daily and glyburide (Micronase) 12 mg daily. At an annual physical examination, the BMI is 29 and hemoglobin  $A_{1c}$  is 7.3%. The NP should: (Points : 2)

begin insulin therapy.

change to therapy with colesevelam (Welchol).

add a third oral antidiabetic agent to this patient's drug regimen.

enroll the patient in a weight loss program to achieve better glycemic control.

Question 4.4. A patient comes to the clinic to discuss weight loss. The primary care NP notes a BMI of 32 and performs a health risk assessment that reveals no obesity-related risk factors. The NP should recommend: (Points : 2)

orlistat (Xenical).

surgical intervention.

changes in diet and exercise.

changes in diet and exercise along with short-term phentermine.

Question 5.5. Which of the following statements is true about the prescribing practices of physicians? (Points : 2)

Older physicians tend to prescribe more appropriate medications than younger physicians.

Antibiotic medications remain in the top five classifications of medications prescribed.

Most physicians rely on a "therapeutic armamentarium" that consists of less than 100 drug preparations per physician.

The dominant form of drug information used by primary care physicians continues to be that provided by pharmaceutical companies.

Question 6.6. A primary care NP is aware that many patients in the community use herbal remedies to treat various conditions. The NP understands the importance of: (Points : 2)

learning about the actions, uses, doses, and toxicities of these agents.

prescribing these agents when possible to ensure safe dosing.

counseling patients to stop using herbal products to avoid toxic side effects.

teaching patients that these products are unregulated and unsafe to use.

Question 7.7. A patient who is at risk for DVT tells the primary care NP she has just learned she is pregnant. The NP should expect that this patient will use which of the following anticoagulant medications? (Points : 2)

$\bigcirc$	Aspirin
$\bigcirc$	Heparin
$\sum$	Dabigatran
)	Warfarin

Question 8.8. As primary care nurse practitioners (NPs) continue to develop their role as prescribers of medications, it will be important to: (Points : 2)

attain the same level of expertise as physicians who currently prescribe medications.

learn from the experiences of physicians and develop expertise based on evidencebased practice.

waintain collaborative and supervisorial relationships with physicians who will oversee prescribing practices.

develop relationships with pharmaceutical representatives to learn about new medications as they are developed.

Question 9.**9.** A patient with a previous history of myocardial infarction (MI) who takes nitroglycerin for angina develops hypertension. The primary care NP is considering ordering an ACE inhibitor. Preliminary laboratory tests reveal decreased renal function. The NP should: (Points : 2)

begin therapy with a low-dose ACE inhibitor.

choose an ARB instead.

add a low-dose thiazide diuretic to the drug regimen.

order a renal perfusion study before starting treatment.

Question 10.**10.** A 40-year-old woman tells the primary care nurse practitioner (NP) that she does not want more children and would like a contraceptive. She does not smoke and has no personal or family history of cardiovascular disease. She has frequent tension headaches. For

this patient, the NP should prescribe: (Points : 2)

condoms.

tubal ligation.

monophasic combined oral contraceptive pill (COCP).

low-estrogen COCP.

Question 11.**11.** A postmenopausal woman develops NSAID-induced ulcer. The primary care NP should prescribe: (Points : 2)

ranitidine (Zantac).
omeprazole (Prilosec).
esomeprazole (Nexium).
pantoprazole (Protonix).

Question 12.**12.** A 52-year-old woman reports having hot flashes and intense mood swings. After a year of having irregular menstrual periods, she has not had a period for 6 months. The primary care NP should diagnose: (Points : 2)

menopause.

dysmenorrhea.

perimenopause.

postmenopause.

Question 13.13. An important difference between physician assistants (PAs) and NPs is PAs: (Points : 2)

always work under physician supervision.

are not required to follow drug treatment protocols.

may write for all drug categories with physician co-signatures.

have both inpatient and outpatient independent prescriptive authority.

Question 14.14. An 80-year-old patient has begun taking propranolol (Inderal) and reports feeling tired all of the time. The primary care NP should: (Points : 2)

tell the patient to stop taking the medication immediately.

recommend that the patient take the medication at bedtime.

tell the patient that tolerance to this side effect will occur over time.

contact the patient's cardiologist to discuss decreasing the dose of propranolol.

Question 15.**15.** The primary care NP is preparing to prescribe a diuretic for a patient who has heart failure. The patient reports having had an allergic reaction to sulfamethoxazole-trimethoprim (Bactrim) previously. The NP should prescribe: (Points : 2)

ethacrynic acid.

furosemide (Lasix).

acetazolamide (Diamox).

hydrochlorothiazide (HydroDIURIL).

Question 16.**16.** A patient who has diabetes mellitus and congestive heart failure takes insulin and warfarin. The patient will begin taking exogenous testosterone to treat secondary hypogonadism. The primary care NP should recommend: (Points : 2)

increasing the dose of warfarin.

more frequent blood glucose monitoring.

a higher than usual dose of testosterone.

increasing insulin doses to prevent hypoglycemia.

Question 17.**17.** A patient who has insulin-dependent type 2 diabetes reports having difficulty keeping blood glucose within normal limits and has had multiple episodes of both hypoglycemia and hyperglycemia. As adjunct therapy to manage this problem, the primary care NP should prescribe: (Points : 2)

pramlintide (Symlin).

repaglinide (Prandin).

J glyburide (Micronase).

metformin (Glucophage).

Question 18.**18.** A patient who has IBS experiences diarrhea, bloating, and pain but does not want to take medication. The primary care NP should recommend: (Points : 2)

25 g of fiber each day.

avoiding gluten and lactose in the diet.

increasing water intake to eight to ten glasses per day.

beginning aerobic exercise, such as running, every day.

Question 19.**19.** A patient takes an antispasmodic and an occasional antidiarrheal medication to treat IBS. The patient comes to the clinic and reports having dry mouth, difficulty urinating, and more frequent constipation. The primary care NP notes a heart rate of 92 beats per minute. The NP should: (Points : 2)

prescribe a TCA.

discontinue the antidiarrheal medication.

encourage the patient to increase water intake.

lower the dose of the antispasmodic medication.

Question 20.**20.** A patient comes to the clinic with a 4-day history of 10 to 12 liquid stools each day. The patient reports seeing blood and mucus in the stools. The patient has had nausea but no vomiting. The primary care NP notes a temperature of 37.9° C, a heart rate of 96 beats per minute, and a blood pressure of 90/60 mm Hg. A physical examination reveals dry oral mucous membranes and capillary refill of 4 seconds. The NP's priority should be to: (Points : 2)



begin rehydration therapy.

consider prescribing metronidazole.

administer opioid antidiarrheal medications.

Question 21.**21.** A woman who uses a transdermal contraceptive calls the primary care NP to report that while dressing that morning she discovered that the patch had come off and she was unable to find the patch. The NP should tell her to apply a new patch and: (Points : 2)

take one cycle of COCPs.

take a home pregnancy test.

use condoms for the next 7 days.

contact the clinic if she misses a period.

Question 22.**22.** A patient who has migraine headaches has begun taking timolol and 2 months after beginning this therapy reports no change in frequency of migraines. The patient's current dose is 30 mg once daily. The primary care NP should: (Points : 2)

change the medication to propranolol.

increase the dose to 40 mg once daily.

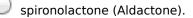
obtain serum drug levels to see if the dose is therapeutic.

tell the patient to continue taking the timolol and return in 1 month.

Question 23.**23.** A patient with congestive heart failure will begin therapy with a diuretic medication. The primary care NP orders laboratory tests, which reveal a glomerular filtration rate (GFR) of 25 mL/minute. The initial drug the NP should prescribe is: (Points : 2)

ļ	metolazone.	?
	metonazonici	•

furosemide (Lasix).



hydrochlorothiazide (HydroDIURIL).

Question 24.**24.** A patient who has a history of angina has sublingual nitroglycerin tablets to use as needed. The primary care nurse practitioner (NP) reviews this medication with the patient at the patient's annual physical examination. Which statement by the patient indicates understanding of the medication? (Points : 2)

"I should call 9-1-1 if chest pain persists 5 minutes after the first dose."

"I should take 3 nitroglycerin tablets 5 minutes apart and then call 9-1-1."