

NURS 6550 Midterm Exam – Question and Answers with Rationals – Walden University

1. **Question:** The AGACNP is caring for a patient who is quite ill and has developed, among other things, a large right sided pleural effusion. Thoracentesis is sent for pleural fluid analysis. While evaluating the fluid analysis, the AGACNP knows that a fluid identified as a(n) _____ is the least worrisome type.

Answer: A, a transudate is essential as it shows

2. **Question:** Mrs. Miller is transported to the emergency department by paramedics. She is having profound, unremitting chest pain, is diaphoretic and pale. She has jugular venous distention and a widened pulse pressure. Suspecting ascending aortic aneurysm, the AGACNP order which test to confirm the diagnosis?

Ans: D is the answer- CT(not radiography or MRI or us)

3. **Question:** Certain subgroups of the elderly population are at an increased risk for rapid deterioration and long-term care placement. Which of the following is nota high risk factor for long term care placement?

ANS: A- men (others are > 80, live alone, bowel and bladder incontinence, hx of fall, dysfunctional coping and intellectual impairment).

4. **Question:** A patient with anterior epistaxis has beenwith 20 minutes of direct pressure to the cartilaginous portion of the nose. Following pressure the patient isto gently blow the nose. Expected findings in the patient who has been successfullyinclude all of the following except a:

Ans: C, bld and clot formation occurs if bleeding stop within 20 min of directed pressure and can be removed by gentle suction and gentle blowing of nose.

5. **Question:** Kevin is a 14-year-old male who presents for evaluation of a fever of 102.5° F and significant right ear pain. He appears quite ill and says he feels nauseous. Ooscopic evaluation reveals pain to palpation, a very erythematous and bulging tympanic membrane with bullous myringitis. The AGACNP knows that antibiotic therapy must be selected to cover:

Ans: D, streptococcus pneumoniae commonly bacteria present in head and neck infection of immunocompetent patients, and primarily treatment target for otitis media, bacterial sinusitis, and bacterial pharyngitis.

6. **Question:** P.M. is a 71-year-old gay male patient who presents as an outpatient for evaluation of increasing shortness of breath. The diagnostic evaluation ultimately supports a diagnosis of community acquired pneumonia. The AGACNP appreciates right middle lobe consolidation on chest radiography. Pending sputum cultures, empiric antibiotic therapy must be initiated to cover which organism?

Ans: D- streptococcus pneumoniae from out patient population and targeted treatment empirically.

7. **Question:** Which of the following is the greatest risk factor for vascular dementia?

Ans- B, vascular disease in target organ damage in DM, hyperlipidemia and HTN

8. **Question:** J.R. is a 55-year-old male who presents for a commercial driver's license physical examination with a blood pressure of 170/102 mm Hg. He has no medical history and is without complaint. Which of the following findings constitutes hypertensive urgency?

Response Feedback: "A" is the correct answer. According to the Joint National Committee (JNC) report, hypertensive urgency is described as hypertension in the setting of progressive target organ damage, such as renal involvement with protein leaking, left ventricular hypertrophy, or retinal changes. "A" is not correct—the headache may or may not be relevant, but because there are many non-hypertension causes, a headache alone does not constitute target organ damage. "C" is not correct—it may indicate carotid plaque, but this is not a consequence of hypertension. "D" is not correct as a 1+ palpable pulse may be a normal finding—it must be taken in the context of the rest of the examination.

9. **Question:** Because of the commonly recognized adverse effects of atypical antipsychotics, annual laboratory assessment for patients taking these medications should include a:

Response Feedback: "C" is the correct answer. The atypical antipsychotics such as olanzapine (Zyprexa), clozapine (Clozaril), and quetiapine (Seroquel) are classically associated with dyslipidemia and annual lipid panels should be performed in patients of all ages who take these medications. "A" is incorrect—this is the appropriate annual screening tool for patients on lithium due to lithium-related iodine suppression of the thyroid gland. There are no specific indications for "B" and "D" unique to patients taking atypical antipsychotics. Those laboratory assessments should only be ordered as indicated by any other significant patient history.

10. **Question:** K.R. presents for an evaluation of eye discomfort. He works in a fabricating shop for a custom automobile restoration company and while working he felt like something flew into his eye. He was wearing eye protection at the time but still has the sensation that something is there. Physical examination is significant for some tearing and he reports a persistent sense of something in his eye. Which of the following is not indicated in the diagnostic evaluation?

Response Feedback: "B" is the correct answer. The patient's history is consistent with a metal injury and so an MRI should be avoided. "A" may or not be indicated as the history progresses, but there is no contraindication to it should the examiner determine the need to rule out an abrasion. "C" and "D" are both mechanisms to visualize behind the cornea which may be necessary if a penetration injury (which may occur with a high-velocity injury) is suspected.

11. **Question:** D.E. is a 41-year-old female who had lumbar surgery two days ago to repair a ruptured nucleus pulposus. She has been doing well postoperatively but today is complaining of resting fatigue and some shortness of breath at rest. In ruling out a pulmonary embolus the AGACNP first orders a:

Response Feedback: "B" is the correct answer. The D-dimer is a highly sensitive serology and is the least invasive mechanism by which a pulmonary embolus may be ruled out; a negative D-dimer virtually eliminates pulmonary embolus from the differential diagnosis. "A" is not correct—while it can be used to make the diagnosis it is more invasive and less specific than other options. "D" is not correct—there is no indication that the patient is on warfarin, and in any event it would not be used to rule in or out pulmonary embolus "C" is not accurate when after surgery, as it will be positive after surgery.

Mr. Nixon is being treated with unfractionated heparin infusion for acute pulmonary embolus. In order to avoid a potentially fatal complication of heparin infusion, the AGACNP monitors:

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