

**APEA Predictor Exam Questions and 100% Correct Answers with
Rationale Pre-Predictor 2023/2024 LATEST VERSION**

- 1) A 15 years old high school student with a mild sore throat and low-grade fever that has persisted for about 3 weeks. She reports general malaise, fatigue, and loss of appetite. The NP suspects mononucleosis. Which of the following is the LEAST appropriate intervention?
- Palpate the lymph nodes and spleen
 - Examine the posterior oropharynx for petechiae
 - Obtain a CBC, throat culture, and heterophil antibody test.
 - Obtain an urinalyses and serum for LFTs and amylase

Explanation: mononucleosis is a symptomatic infection caused by the Epstein-Bar virus. Common is people 15-24 years of age. Common signs and symptoms following incubation period (1-2 months) include fatigue, chills, malaise, anorexia, white tonsillar exudates and lymphadenopathy or posterior cervical region. Splenomegaly can be present. A maculopapular or occasionally a petechial rash occurs in less than 15% of patients. A diagnosis is usually made using the Monospot. In addition, neutropenia and lymphocytosis are usually detected in the CBC.

- 2) A 32 years old male patient complaint of urinary frequency and burning on urination for 3 days. Urinalyses reveals bacteriuria and positive nitrites. He denies any past hx. Of urinary tract infections. The initial treatment should be:
- trimethoprim-sulfamethoxazole (Bactrim, Sulfatrim) for 7-10 day
 - ciprofloxacin (Cipro) for 3-5 days
 - Trimethoprim-Sulfamethoxazole for 3 days
 - 750 mg ciprofloxacin as a one-time dose

Explanation: trimethoprim-sulfamethoxazole (TMPS) is usually n appropriate medication to treat urinary tract infections in most patients. In the case of community resistance to TMPS >20%^, another medication should be substituted. In men, the appropriate length of time is 7-10 days. Women may be treated for 3 days for uncomplicated UTI

- 3) Which agent is most effective for the treatment of nodulocystic *acne*?
- Benzoyl peroxide (Benzac)
 - Retinoic acid (Retin A)
 - Topical tetracycline
 - Isotretinoin)

Explanation: Isotretinoin (Accutane) is a systemic agent indicated for treatment with severe inflammatory acne. Guidelines for its use must be clearly understood by the patient. A woman of childbearing age must use an effective method of contraception because isotretinoin is teratogenic. There are many restrictions in prescribing this medication because of the teratogenic effects is given during pregnancy. Therefore, it is a pregnancy category X.

- 4) An 18 y/o woman is taking a combined hormonal oral contraceptive. She should be instructed to use a backup method for the prevention of pregnancy
- Throughout the week of placebo pills
 - If prescribed topiramate (Topamax) for the treatment of migraines.

- c. If prescribed amoxicillin/clavulanate (Augmentin) for a sinus infection
- d. if she forgets to take a single dose of the contraceptive

Explanation: Anticonvulsant including phenytoin (Dilantin), carbamazepine (Tegretol), primidone (Mysoline), topiramate (Topamax) and oxcarbazepine (Trileptal) reduce the effectiveness of contraceptives. Depo-medroxyprogesterone acetate injections or levonorgestrel-releasing intrauterine devices would be a better method of contraceptive for patients taking anticonvulsants. Most commonly used antibiotics have not been proven to reduce the effectiveness of contraceptives. Rifampin is an exception, and additional ... Be used by women taking this drug and using oral contraceptives, transdermal, or vaginal ring preparations. Additional backup contraception should be used if taking antifungal agents. No additional protection is needed thought the week of placebo pills. Missing one single dose of contraceptive does not require additional protection, missing more than one doses does.

5) A 44 years old female patient has diabetes. Her total cholesterol (TC) is 250 mg/dl (6.5 mmol/L), LDL= 190 mg/dL (4.94 mmol/L), HDL= 25 mg/dL (65 mmol/L), and triglycerides= 344 mg/dL (8.94 mmol/L). What agent have the greatest effect on improving her lipid profile and reducing morbidity and mortality associates with dyslipidemia?

- a. Niacin (Niaspan)
- b. Atorvastatin
- c. Omega 3 fatty acids
- d. Fenofibrates

Explanation: First and foremost, it is essential to educate individuals on a heart-healthy lifestyle. LDL-C is one of the major culprits in the development of atherosclerotic heart disease. The target level of LDL-C is between 50 to 70mg/dl to prevent plaque formation in the blood vessels. Guidelines strongly recommend statin therapy because they primarily lower LDL-C levels, but they also have the secondary effects of lowering triglyceride and increasing HDL-C levels.

6) A 30 years old female comes into a clinic with classic signs and symptoms of appendicitis. The NP fails to refer the patient to a surgeon. The appendix ruptures and the woman die. This is an example of

- a. Failure of diligence
- b. Professional liability
- c. Negligence
- d. Malpractice

Explanation: malpractice, a negligence tort, occurs when a health care professional's actions fall bellow the appropriate standard of care and hurts the patient. In this case the patient came with sings and symptoms indicating appendicitis and the NP failed to refer the patient..

7) A NP has recently been hired to work in a fast track facility. The NP employer asked if she has "a problem prescribing medications for emergency contraception." The NP replies affirmatively. This is:

- a. Grounds for dismissal
- b. An ethical dilemma for the NP

- c. Illegal according to the standards of nursing
- d. Patient abandonment.

Explanation: in this instance, the NP has a difference of opinion with her employer based on her religious or moral belief about providing emergency contraception. This situation is an example of an ethical dilemma. Failure to participate in the provision of care to the patient based on the NP's beliefs is neither against the law nor a violation of the standards of practice

- 8) A patient presents with pruritic lesions on both knees. There are visible silver scales. How Should this condition be managed?
- a. Topical antifungal cream or ointment
 - b. Oral antibiotics
 - c. Topical corticosteroids cream
 - d. Topical anti-fungal/ steroid cream

Explanation: Psoriasis is characterized by erythematous papules, as well as itchy, red, precisely defined plaques with silvery scales. Auspitz sings is another common finding. Topical agents containing tar and salicylic acid may be used. Topical steroids, such as betamethasone, may also be ordered.

- 9) Antidepressant discontinuation syndrome is less likely if the patient
- a. Is male
 - b. Is less than 35 y/o
 - c. Has taken an SSRI with a short half life
 - d. Gradually tapers SSRI use

Explanation: Antidepressant discontinuation syndrome is most often seen in the primary care office in association with SSRI discontinuation, because SSRIs are the most commonly prescribed class of antidepressant medications. Interruption of treatment with an anti-depressant medication is sometimes associated with an antidepressant discontinuation syndrome; in early reports it was referred to as a "withdrawal reaction. Symptoms of antidepressant discontinuation syndrome can include flu-like symptoms, insomnia, nausea, imbalance, sensory disturbances, and hyperarousal. Tapering is recommended by experts.

- 10) Patient with benign prostatic hyperplasia (BPH) should be taught to avoid which one of the following drug classes?
- a. Alpha adrenergic antagonist
 - b. Anti-androgen agents
 - c. Tricyclic antidepressant (TCA)
 - d. Sulfonamides

Explanation: tricyclic antidepressant should not be used by men with benign prostatic hyperplasia because of the increased risk of urinary retention secondary to the anticholinergic effects of TCAs.

- 11) Which of the following is the best response to a woman who has just admitted she is a victim of spousal abuse?
- a. What was if you did to make him angry?

- b. You must seek refuge immediately
- c. I am concerned about your safety
- d. I am going to call a shelter for you

Explanation: The first step is to establish trust in the therapeutic relationship. without trust future collaboration, intervention and client outcome cannot be accomplished to facilitate appropriate and safe behavior. The experience of abuse is a traumatic psychological crisis that must be addressed as such. The healthcare providers must emphasize the fact that the victim has not done anything wrong and they must also emphasize the fact that the victim's life and the lives of their children can be in danger if the abuse is not addressed. It will not disappear with a lack of action. An order of protection against the perpetrator is often recommended.

12) For which patient group does the US Preventive Services Task Force recommend routine screening for asymptomatic bacteriuria

- a. pregnant woman
- b. Children
- c. Patients with diabetes
- d. patients over the age of 70

Explanation: an increased incidence of bacteriuria is found in all the population listed. However, bacteriuria in pregnant women increases the mother.....Also increased is the risk of a pre-term delivery, which then increases perinatal and fetal morbidity and mortality. The recommended it....

13) What diabetic complications result from hyperglycemia?

- 1. Retinopathy
 - 2. Hypertension resistant to treatment
 - 3. Peripheral neuropathy
 - 4. Accelerated atherosclerosis
- a. 1,2,3
 - b. 2,3,4
 - c. 1,3,4
 - d. 1,2,4

explanation: Complications of untreated or uncontrolled hyperglycemia over a prolonged period of time include:

Microvascular complications: Retinopathy, Nephropathy, Neuropathy

Macrovascular complications: Coronary artery disease, Cerebrovascular disease, Peripheral vascular disease

14) A 6 y/o presents w/ complaints of sore throat and fever for 2 days. He has multiple vesiculated ulcerations on his tonsils and uvula. There are no other remarkable findings. What is the most likely diagnosis?

- a. Viral pharyngitis
- b. Herpangina
- c. Epiglottitis
- d. Tonsillitis

Explanation: Herpangina is a viral infection common in toddlers and young children caused by Coxsackie virus. The clinical findings of numerous, small (1-2 mm) ulcerations on the tonsils and uvula are typical of herpangina. The ulcerations can be very painful but usually resolve in 7 to 10 days. Treatment is symptomatic.

15) A patient has Kawasaki syndrome. Which characteristics would be UNUSUAL?

- a. Age > 15 years
- b. Fever > 101 F (38.3 C)
- c. Exudative pharyngitis
- d. Painful rash

Explanation: Kawasaki disease is an acute febrile vasculitis syndrome that evolves inflammation of the blood vessels. This condition often causes cardiac complication in children by damaging the coronary arteries is most prevalent in children of Asian ethnicity. Diagnosis of Kawasaki disease requires presentation of fever and 4 of the following criteria: bilateral bulbar conjunctival injection, oral mucous membrane changes, peripheral extremity changes, polymorphous rash, and cervical lymphadenopathy.

16) According to the JNC 8 guideline hypertension in a 40 y/o can be diagnosed when blood pressure exceeds

- a. 140/90
- b. 130/90
- c. 125/85
- d. 150/100

Explanation: According to JNC 8 guidelines, hypertension is a sustained elevation of systolic BP greater than or equal to 140 mmHg or diastolic BP greater or equal than 90mmHg, taken from 2 or more readings on 2 different occasions after an initial screening.

17) A 48 y/o female complains of pain and stiffness in her right hip and knee that is mild on awakening in the morning, get worse as the day progresses and is relieved with hot baths and ibuprofen. Crepitus is palpated on range of motion of the knee. Signs of inflammation are notably absent. What is the most likely diagnosis?

- a. Rheumatoid arthritis (RA)
- b. Gout
- c. Osteoarthritis (OA)
- d. Osteoporosis

Explanation: Rheumatoid arthritis is characterized by several joint deformities, usually bilaterally symmetrical. RA is characterized by inflammatory processes, while OA is not. RA and OA are chronic conditions. Gout is characterized by acute exacerbations related to a defect in purine metabolism, increased uric acid production, or decreased uric acid excretion.

18) A 7-year old female patient presents with severe injuries that are inconsistent with the explanation given for them. The nurse practitioner questions the mother about abuse. She admits that her husband, the child's father, beat the child. How should the nurse practitioner proceed?

- a. Inform the mother that the abuse must be reported to child protection authorities.
- b. Counsel the mother that if it happens again it will be reported to child protection service.
- c. Ask the child what she did to cause the punishment

d. Refer the family to the National Domestic Violence hotline.

Explanation: An awareness of all the unique presentations of child abuse, subjective or objective, physical, sexual, or neglect, is essential for NPs. Objective findings, such as broken bones, burns, and bruises, may be as a result of an intentional injury from physical abuse or from an unintentional injury as a result of neglect. Both must be considered. Repeated visits to the emergency department, frequent or suspicious injuries, or bilateral or multiple healing fractures are often indicators of physical abuse. Once the diagnosis of child abuse has been made, the primary role of the NP is to ensure the child is safe. If the NP suspect that a child is undergoing abuse, it's critical to report it—and to continue reporting each separate incidence if it continues to recur.

19) A 1-month-old presents with reported recurrent diarrhea, screaming, and drawing up of the legs followed by periods of lethargy. On physical examination, a “sausage-like” mass in the upper right quadrant of the distended abdomen. Which of the following is the most likely diagnosis?

a. Intussusception

b. Volvulus

c. Crohn's disease

d. Foreign body in the GI tract

Explanation: Intussusception is one of the most common causes of abdominal obstruction in children prior 2 years of age; is best described as a portion of the intestine which telescopes into a more distal intestinal segment. The classic triad of intussusception include crampy (intermittent, also known as colicky) abdominal pain, vomiting, and bloody stools. The patient may pull up his knees with crying. The patient may develop vomiting with bilious emesis. Progressive lethargy/altered level of consciousness and pallor is common. The etiology of this lethargic presentation is not known, but it tends to occur in younger infants. As intussusception progresses, a palpable, sausage-shape mass may develop. Some hypothesize that this is due to release of endogenous opioids or endotoxins released from ischemic bowel. Intussusception in a child presenting with lethargy is often difficult to diagnose since other causes of lethargy such as dehydration, hypoglycemia, sepsis, toxic ingestion, post-ictal state, etc., must also be considered. Ultrasound is the preferred diagnostic test. Enemas is considered the first line of treatment prior surgery. Volvulus occurs more frequently in middle-aged and elderly men. Cronos's is most often diagnosed between 13 – 30 years of age.

20) A middle-aged female complains of insomnia, night sweats, feeling intensely hot, emotional lability, extreme nervousness and impatience. The LEAST likely cause of her symptoms is

a. Thyrotoxicosis

b. Menopausal vasomotor instability

c. Alcohol or another drug withdrawal

d. New onset type 2 diabetes mellitus

Explanation: New onset diabetes produces elevated serum glucose levels less than 200 mg/dL (7.0 mmol/L) and usually no clinical signs or symptoms. At higher levels, the patient may report lethargy, fatigue, weakness, weight loss, and polydipsia, polyuria, and/or polyphagia. Complaints of insomnia, night sweats, feeling intensely hot, emotional lability, and extreme nervousness may

be caused by thyroxine excess, menopausal instability, or withdrawal from alcohol or other drugs of addiction.

21) Which of the following indicated need for further evaluation?

- a. A 7 y/o girl with vaginal bleeding
- b. A 7 years old girl with no true pubic hair
- c. A 12 years old boy with sparse, slightly pigmented pubic hair
- d. A 12-year-old girl with breast buds

explanation: In newborn girls, withdrawal bleeding may occur as a normal response to maternal estrogen leaving the infant's uterine lining. Vaginal bleeding after the first few weeks of life and before puberty is considered abnormal. Early vaginal bleeding can indicate trauma, foreign bodies (toilet paper is the most common), vulvovaginitis, hemangiomas, benign polyps, precocious puberty, or sexual abuse.

22) A young couple is being seen by the NP for preconception counseling. They express a wish for pregnancy within the next 3 month and are very eager to know what they can do now to "make the baby as healthy as possible". Which of the following should the NP encourage to decrease the chance of neural tube defect in the fetus?

- a. Maternal alpha-fetoprotein level
- b. Folic acid 0.4 mg daily
- c. Rubella vaccine today
- d. Vitamin E 400 IU daily

Explanation: Supplementation with folic acid decreases the development of neural tube defects, such as spina bifida and anencephaly. Folic acid plays an essential role in neural tube closure. Neural tube development/closure takes place in the first 4 weeks of embryonic life (6 weeks' gestation). U.S. Public Health Service and the CDC recommend that all women of childbearing age consume 0.4 mg of folic acid daily to prevent tube defects.

23) A patient with a past history of documented coronary arterial blockage less than 70% complains of chest pain several time p.... which is relived with nitroglycerin. Which is the most appropriate initial action for the NP?

- a. Refer to a cardiologist as soon as possible
- b. Prescribe long-acting nitroglycerin
- c. Order treadmill stress test
- d. Prescribe an ACE inhibitor and re-evaluate in 24 to 48 hours

Explanation: The patient has at least a 70% occlusion of a major coronary artery. For a patient to be considered for CABG, the coronary arteries to be bypassed must have approximately a 70% occlusion (60% if in the left main coronary artery).

24) A 3 y/o has enlarged, warm, tender cervical lymph nodes, indicating:

- a. Infection proximal to the nodes
- b. A possible cancer diagnosis
- c. Shorty nodes, a common normal variant in children
- d. An infectious process distal to the nodes

explanation: size of lymph nodes is important. Nodes > 1 cm are significant and should be asses carefully. Nodes > 5 cm are almost always neoplastic. Tenderness of a node usually suggest

inflammation. Cancerous nodes frequently are larger, non-tender, and stone-like in consistency. Nodes are pea-sized, non-tender, mobile, discrete and reflect pre-existent infection.

25) The NP examines a 2-month-old with unequal gluteal and thigh skin folds. What should the NP do next?

- a. Send the infant for x-ray of the hips
- b. Send the infant for ultrasound of the hips
- c. Perform Ortolani and Barlow test
- d. Examine the infant for unequal arm length

Explanation: Gluteal and thigh skin fold asymmetry may indicate congenital hip dysplasia. X-ray studies are not useful before 3 months-of-age because the femoral head has not completely ossified.

26) A very active 35 years old male has painful hemorrhoid, but he does not want hemorrhoidal surgery at this time. His diet has been indiscriminate as his job requires frequent travel. The most appropriate recommendation is for him to select food that are:

- a. Low in fiber such as milk and other dairy products
- b. High in simple carbohydrates such as white bread and mashed potatoes
- c. High in fiber such as bran, complex carbohydrates and fresh fruit
- d. High protein such a meat, poultry and fish

Explanation: Hemorrhoid disease is the most common reason patients seek evaluation by a colon and rectal surgeon. The majority of hemorrhoids can be managed nonoperatively with medical management or office-based procedures. Patients should benefit from minimizing straining and avoiding constipation. Bulking of the stool facilitates this and can be accomplished by increasing dietary fiber and fluid intake. Stool softeners may also be used.

27) Correct instructions to give new parent who are transporting their newborn infant is

- a. A rear-facing infant car seat secured in the backseat is required until the infant weight 20 lbs.
- b. The infant car set may be secured in the back or front seat, but must rear-facing
- c. The infant car seat may be front facing when the infant is 1 year old
- d. A rear or front-facing infant car seat must be secured in the back seat until the infant weight 20 lbs.

Explanation: The American Academy of Pediatrics (AAP) recommends that infants and toddlers ride in a rear-facing seat until they are 2 years old or until they have reached the maximum weight and height limits recommended by the manufacturer

28) A 13 y/o pt. complains that he fell while running during football practice. Now his knee hurts and sometimes “lucks”. The NP conducts McMurrays test. Which of the following is TRUE about this test?

- a. An audible or palpated “click” is positive for a torn meniscus
- b. A various stress is applied to the flexed knee
- c. The straight leg is internally rotated with the patient supine and flat
- d. The knee is grasped with the examiner’s fingers placed laterally.

Explanation: Mac Murray’s test is conducted while the patient is in the supine position. The NP places the distal hand on the foot and raises the knee slowly, keeping the foot and knee externally