

AANP Lightning Round Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. First-line management of essential hypertension typically includes which of the following?**
 - A. Lifestyle and Dietary Changes**
 - B. Pharmacotherapy With a Diuretic**
 - C. Immediate ACE Inhibitor Therapy**
 - D. Surgical Intervention**

- 2. Measles is most commonly transmitted by which route?**
 - A. Droplets**
 - B. Fecal-oral**
 - C. Bloodborne**
 - D. Direct skin contact**

- 3. Which of the following is not listed as a risk factor for atrial fibrillation?**
 - A. Hypertension**
 - B. Caffeine**
 - C. Asthma**
 - D. Alcohol**

- 4. What is the typical recovery time for measles with supportive care?**
 - A. 1-2 days**
 - B. 2-3 weeks**
 - C. 6-8 weeks**
 - D. Several months**

- 5. An anti-HCV test remains positive in a 60-year-old woman. Which test is most appropriate for follow-up to determine current or past infection?**
 - A. Anti-HCV titer**
 - B. HCV RNA**
 - C. HCV Genotype**
 - D. ALT level**

- 6. St. John's Wort is commonly used to treat which condition?**
- A. Depression**
 - B. Anxiety**
 - C. Insomnia**
 - D. Menopause symptoms**
- 7. A 68-year-old woman is suspected of having Alzheimer's disease. What is the best initial method for assessing the condition?**
- A. Mini-Mental State Examination (MMSE)**
 - B. MRI brain scan**
 - C. Lumbar puncture**
 - D. Electroencephalography (EEG)**
- 8. Which antibiotic is used for Lyme disease as an alternative to doxycycline?**
- A. Azithromycin**
 - B. Amoxicillin**
 - C. Cefdinir**
 - D. Ciprofloxacin**
- 9. A 65-year-old man on atorvastatin 60 mg with fatigue, dark urine, scleral icterus after starting high-dose B-complex vitamin. What is the next step?**
- A. Discontinue Lipitor and order LFTs**
 - B. Increase Lipitor dose**
 - C. Start acetaminophen**
 - D. Ignore symptoms and monitor**
- 10. Bamboo spine is pathognomonic for which condition?**
- A. Rheumatoid arthritis**
 - B. Gout**
 - C. Psoriatic arthritis**
 - D. Ankylosing spondylitis**

Answers

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1. A
2. A
3. C
4. B
5. B
6. A
7. A
8. B
9. A
10. D

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Explanations

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1. First-line management of essential hypertension typically includes which of the following?

- A. Lifestyle and Dietary Changes**
- B. Pharmacotherapy With a Diuretic**
- C. Immediate ACE Inhibitor Therapy**
- D. Surgical Intervention**

Starting with nonpharmacologic approaches is the best first step because essential hypertension often improves with changes that address modifiable factors, lowering blood pressure without medications. Focus on weight management, regular aerobic exercise, and a DASH-style diet rich in fruits and vegetables. Reducing sodium intake, limiting alcohol, and stopping smoking further help reduce vascular resistance and cardiovascular risk. These lifestyle measures can significantly lower blood pressure and set the stage for whether medications are needed later. Medications such as a diuretic are typically added if blood pressure remains above goal after these changes or if the patient has higher overall cardiovascular risk. Immediate ACE inhibitor therapy isn't universally started for all patients with essential hypertension, as its use depends on comorbid conditions or failure to reach targets with lifestyle changes. Surgical intervention has no role in first-line management of essential hypertension.

2. Measles is most commonly transmitted by which route?

- A. Droplets**
- B. Fecal-oral**
- C. Bloodborne**
- D. Direct skin contact**

Measles spreads mainly through respiratory secretions. When an infected person coughs, sneezes, or talks, droplets containing the virus are released and can be inhaled by people nearby, making droplets (and the surrounding airborne particles in enclosed spaces) the primary route of transmission. This contrasts with other routes like fecal-oral, bloodborne, or direct skin contact, which are not how measles is mainly transmitted. Understanding this highlights why respiratory precautions are essential to prevent spread.

3. Which of the following is not listed as a risk factor for atrial fibrillation?

- A. Hypertension**
- B. Caffeine**
- C. Asthma**
- D. Alcohol**

Asthma does not have a direct link to the mechanisms that raise atrial fibrillation risk. Atrial fibrillation is more commonly associated with factors that promote atrial remodeling and increased atrial pressure, such as hypertension, obesity, sleep apnea, diabetes, and structural heart disease. Alcohol is a known trigger for AF episodes (sometimes called "holiday heart" syndrome) and chronic use increases risk. Caffeine's role is less clear and not consistently listed as a major risk factor, though it can provoke palpitations in sensitive individuals. Since asthma isn't part of the usual risk-factor profile for AF, it is the best choice.

4. What is the typical recovery time for measles with supportive care?

- A. 1-2 days
- B. 2-3 weeks**
- C. 6-8 weeks
- D. Several months

Measles typically runs its course over about 2 to 3 weeks from onset to full recovery when there are no complications. The illness begins with a prodrome and fever, followed by the characteristic rash; the fever and systemic symptoms usually improve gradually after the rash appears, and most people are back to baseline within a couple of weeks. Supportive care—adequate fluids, rest, fever control as needed, and vitamin A in appropriate settings—helps prevent complications and supports recovery, but it doesn't shorten the course to just a few days. Short durations like one to two days aren't realistic for uncomplicated measles, while extending recovery to six to eight weeks or months would suggest significant complications or unusual immune issues.

5. An anti-HCV test remains positive in a 60-year-old woman. Which test is most appropriate for follow-up to determine current or past infection?

- A. Anti-HCV titer
- B. HCV RNA**
- C. HCV Genotype
- D. ALT level

Antibody tests against HCV show past exposure, not whether the virus is currently present, because antibodies can remain after the infection has cleared. To determine if infection is active, look for the virus itself: HCV RNA. Detectable HCV RNA means there is ongoing viral replication and current infection (acute or chronic). If HCV RNA is not detected, there isn't an active infection, though antibodies may still be positive from a prior infection. Other options don't address current viral presence as directly: genotype helps tailor therapy once infection is confirmed, ALT reflects liver injury rather than infection status, and an anti-HCV titer isn't routinely used to distinguish active from past infection.

6. St. John's Wort is commonly used to treat which condition?

- A. Depression**
- B. Anxiety
- C. Insomnia
- D. Menopause symptoms

St. John's Wort is most commonly used for depressive symptoms, especially mild to moderate depression. It's thought to help by altering brain chemicals involved in mood, such as serotonin, norepinephrine, and dopamine, though the exact mechanism isn't fully understood. While some people may try it for anxiety, sleep, or menopausal symptoms, the strongest evidence supports use for depression, and other conditions are generally managed with different treatments. It's also important to note that it can interact with many medications, so it should be used with caution and under supervision.

7. A 68-year-old woman is suspected of having Alzheimer's disease. What is the best initial method for assessing the condition?

- A. Mini-Mental State Examination (MMSE)
- B. MRI brain scan
- C. Lumbar puncture
- D. Electroencephalography (EEG)

The first step when Alzheimer's disease is suspected is to quantify cognitive function quickly with a simple, standardized screening tool. The Mini-Mental State Examination fits this role well because it can be completed in a short visit, yields a numerical score that reflects the level of cognitive impairment, and provides a baseline to monitor over time. This helps determine whether there is meaningful cognitive decline beyond normal aging and guides the next steps in evaluation. Imaging like an MRI is valuable for ruling out other causes of cognitive decline or assessing structural changes, but it's not used as the initial screen for suspected Alzheimer's. Invasive testing such as a lumbar puncture for CSF biomarkers or specialized tests like EEG are more invasive or less sensitive for catching early or typical Alzheimer's and are not first-line screening tools. Keep in mind that the MMSE has limitations—scores can be influenced by education, language, and cultural background—so results should be interpreted within the broader clinical context and followed by a comprehensive assessment if impairment is indicated.

8. Which antibiotic is used for Lyme disease as an alternative to doxycycline?

- A. Azithromycin
- B. Amoxicillin
- C. Cefdinir
- D. Ciprofloxacin

Amoxicillin is used as the alternative to doxycycline for Lyme disease when doxycycline can't be used, such as in pregnant patients or young children, because it effectively covers *Borrelia burgdorferi* and has a safety profile that suits those groups. For early Lyme disease, the course typically runs about 14 to 21 days. While azithromycin has been used in the past, it is associated with higher failure and relapse rates and isn't considered a reliable substitute. Cefdinir isn't a standard first-line option due to limited efficacy data, and ciprofloxacin isn't preferred because it has poorer activity against *Borrelia* and more potential adverse effects.

9. A 65-year-old man on atorvastatin 60 mg with fatigue, dark urine, scleral icterus after starting high-dose B-complex vitamin. What is the next step?

A. Discontinue Lipitor and order LFTs

B. Increase Lipitor dose

C. Start acetaminophen

D. Ignore symptoms and monitor

Recognize that the symptoms (fatigue, dark urine, scleral icterus) after starting a new medication point to acute drug-induced liver injury. The safest immediate step is to stop the suspected hepatotoxic medication and check liver enzymes to assess injury and guide further care. Discontinuing the atorvastatin is warranted because statins, especially at high doses, can cause hepatotoxicity. Ordering liver function tests helps confirm injury, gauge severity, and decide on the need for ongoing monitoring or hospitalization. While a high-dose B-complex vitamin could also contribute (niacin-containing supplements can affect the liver), the priority remains to remove a potential hepatotoxin and evaluate with labs. Increasing the statin dose would worsen potential injury. Starting acetaminophen is not appropriate in the context of possible liver injury, and ignoring symptoms is unsafe.

10. Bamboo spine is pathognomonic for which condition?

A. Rheumatoid arthritis

B. Gout

C. Psoriatic arthritis

D. Ankylosing spondylitis

Bamboo spine reflects fusion and calcification along the spine from chronic inflammatory changes in ankylosing spondylitis. In this condition, repeated inflammation at the spine's entheses leads to new bone formation that bridges the vertebrae with vertical syndesmophytes, eventually fusing the spine and giving it a bamboo-like appearance on radiographs. This radiographic pattern is highly characteristic of ankylosing spondylitis, making it the most specific clue among the options. Other conditions listed can affect the spine but do not produce this classic full-spine fusion pattern; rheumatoid arthritis tends to involve peripheral and cervical joints with erosions, gout presents with tophi and joint inflammation, and psoriatic arthritis can involve the spine without the distinctive bamboo-like fusion.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://aanplightningground.examzify.com>

We wish you the very best on your exam journey. You've got this!

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