

ADULT-GERONTOLOGY ACUTE CARE NP (AGACNP) CERTIFICATION PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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. Which of the following symptoms is NOT characteristic of pancreatitis?**
 - A. Severe epigastric pain
 - B. Radiating pain to the chest
 - C. Absent bowel sounds
 - D. Risk of hyperglycemia

- 2. What lab results do you expect to see in thalassemia?**
 - A. Increased MCV, Decreased ferritin
 - B. Decreased MCV, Normal TIBC and ferritin
 - C. Normal MCV, Increased TIBC
 - D. Decreased MCV, Increased ferritin

- 3. Which of the following EKG changes is commonly observed during a myocardial infarction?**
 - A. Peaked T waves
 - B. Flat T waves
 - C. U waves
 - D. Bradycardia

- 4. What is a common drug used to manage herpes zoster aside from acyclovir?**
 - A. Valacyclovir
 - B. Gabapentin
 - C. Metronidazole
 - D. Hydroxyzine

- 5. What is a common type of diabetes insipidus that results from a defect in the renal tubules leading to renal insensitivity to ADH?**
 - A. Nephrogenic DI
 - B. Central DI
 - C. Gestational DI
 - D. Psychogenic DI

- 6. Which medication class is Lansoprazole part of?**
- A. H2 receptor antagonists
 - B. Proton pump inhibitors
 - C. Antacids
 - D. Prostaglandin analogs
- 7. What does quality assurance in healthcare evaluate?**
- A. Patient satisfaction and feedback
 - B. Patient complications and readmission rates
 - C. The care of patients using established standards
 - D. Financial performance of health services
- 8. Which of the following is an example of descriptive research?**
- A. Observational studies
 - B. Randomized controlled trials
 - C. Case studies
 - D. Longitudinal studies
- 9. What physiological change occurs during respiratory acidosis?**
- A. Increased blood pH
 - B. Increased carbon dioxide levels
 - C. Increased oxygen levels
 - D. Decreased bicarbonate levels
- 10. Which of the following is NOT a responsibility of case managers?**
- A. Documenting patient care
 - B. Conducting assessments of patient needs
 - C. Balancing quality and cost of resources used
 - D. Providing direct therapeutic interventions

Answers

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

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Explanations

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1. Which of the following symptoms is NOT characteristic of pancreatitis?

- A. Severe epigastric pain
- B. Radiating pain to the chest**
- C. Absent bowel sounds
- D. Risk of hyperglycemia

The correct answer is that radiating pain to the chest is not characteristic of pancreatitis. In cases of pancreatitis, patients typically present with severe epigastric pain, which may radiate to the back rather than the chest. The pain is often described as a steady and intense discomfort that can worsen after eating or drinking, particularly fatty foods. Absent bowel sounds can occur in pancreatitis, particularly if there is ileus or bowel obstruction as a result of inflammation, which is common in severe cases. Hyperglycemia is a recognized risk in pancreatitis due to pancreatic damage affecting insulin production and secretion, leading to impaired glucose regulation. While patients with pancreatitis may experience referred pain in some cases, it is more accurately associated with back pain rather than chest pain, making it an atypical symptom for this condition. Understanding the typical presentations helps in the accurate diagnosis and management of pancreatitis.

2. What lab results do you expect to see in thalassemia?

- A. Increased MCV, Decreased ferritin
- B. Decreased MCV, Normal TIBC and ferritin**
- C. Normal MCV, Increased TIBC
- D. Decreased MCV, Increased ferritin

In thalassemia, one of the key laboratory findings is the presence of microcytic anemia, which is characterized by a decreased mean corpuscular volume (MCV). This results from the abnormal production of hemoglobin due to mutations in the alpha or beta globin genes, leading to smaller red blood cells. Additionally, in thalassemia, iron studies typically show normal total iron-binding capacity (TIBC) and ferritin levels. Unlike iron deficiency anemia, where ferritin levels are low due to depleted iron stores, patients with thalassemia have normal or even increased ferritin levels as their body is often overloaded with iron due to ineffective erythropoiesis and repeated blood transfusions. Thus, the expectation of decreased MCV coupled with normal TIBC and ferritin aligns with these pathophysiological characteristics of thalassemia, making this answer the most consistent with the expected laboratory findings in this condition.

3. Which of the following EKG changes is commonly observed during a myocardial infarction?

A. Peaked T waves

B. Flat T waves

C. U waves

D. Bradycardia

Peaked T waves are a common EKG change observed during a myocardial infarction, particularly in the acute stage, especially when there is significant myocardial ischemia. These changes indicate a disruption in the repolarization of cardiac myocytes as a result of altered electrical activity and metabolic processes during ischemia. The peaked T waves can indicate hyperacute changes reflecting the early phase of an infarction and are often associated with the onset of chest pain and other ischemic symptoms. In myocardial infarction, the changes in the EKG can progress to include ST elevation, which is a hallmark for diagnosing an ST-Elevation Myocardial Infarction (STEMI). Detecting peaked T waves early can help in timely diagnosis and intervention, making them a significant EKG alteration to recognize. Flat T waves and U waves are less characteristic of myocardial infarction. Flat T waves can indicate electrolyte imbalances or chronic conditions but do not specifically signal acute ischemia. U waves are often associated with conditions like hypokalemia and are not directly related to myocardial infarction. Bradycardia, while it can occur in several cardiac conditions, is not a direct EKG change associated specifically with myocardial infarction compared to steep T wave changes. Therefore, recognizing peaked T

4. What is a common drug used to manage herpes zoster aside from acyclovir?

A. Valacyclovir

B. Gabapentin

C. Metronidazole

D. Hydroxyzine

Valacyclovir is a common antiviral medication used for the management of herpes zoster, also known as shingles. It is a prodrug that gets converted into acyclovir in the body, and it has the advantage of having improved bioavailability compared to acyclovir itself. This means that patients often require less frequent dosing, which can enhance adherence to the treatment regimen. In the context of herpes zoster, the early initiation of antiviral therapy, such as valacyclovir, is crucial for reducing viral replication, alleviating symptoms, and preventing complications, including post-herpetic neuralgia. Valacyclovir is particularly useful for adults and can expedite healing and the resolution of pain associated with the condition. Other options included, such as gabapentin, are utilized for symptom management, particularly for pain control but do not have antiviral properties. Metronidazole is an antibiotic used primarily for bacterial infections, not for viral infections like herpes zoster, and hydroxyzine is an antihistamine that may provide symptomatic relief from itching or anxiety but does not target the herpes virus itself. Therefore, valacyclovir is the most appropriate choice for managing herpes zoster alongside acyclovir.

5. What is a common type of diabetes insipidus that results from a defect in the renal tubules leading to renal insensitivity to ADH?

A. Nephrogenic DI

B. Central DI

C. Gestational DI

D. Psychogenic DI

The correct answer is nephrogenic diabetes insipidus (DI), which occurs due to a defect in the renal tubules that causes the kidneys to become insensitive to antidiuretic hormone (ADH), also known as vasopressin. In nephrogenic DI, although the body produces adequate amounts of ADH, the renal tubules fail to respond to it, resulting in an inability to concentrate urine. This leads to excessive urination (polyuria) and increased thirst (polydipsia) as the body tries to compensate for the loss of free water. In contrast, central diabetes insipidus is caused by an insufficient production of ADH due to damage to the posterior pituitary gland. Gestational diabetes insipidus occurs during pregnancy and is usually related to the effects of pregnancy hormones that may interfere with the action of ADH. Psychogenic diabetes insipidus is induced by psychological factors, leading to excessive fluid intake that surpasses the kidney's ability to concentrate urine. Understanding the mechanisms behind these conditions helps differentiate them and is critical for appropriate diagnosis and management in acute care settings.

6. Which medication class is Lansoprazole part of?

A. H2 receptor antagonists

B. Proton pump inhibitors

C. Antacids

D. Prostaglandin analogs

Lansoprazole is classified as a proton pump inhibitor (PPI), which is a class of medications that work by blocking the proton pump in the stomach lining. This action significantly reduces the production of stomach acid, which is beneficial in treating various conditions related to excess gastric acidity, such as gastroesophageal reflux disease (GERD), peptic ulcers, and Zollinger-Ellison syndrome. PPIs, including lansoprazole, provide longer-lasting acid suppression compared to other classes of acid-reducing medications, making them particularly effective for conditions requiring more sustained reduction of gastric acid. In contrast, H2 receptor antagonists, antacids, and prostaglandin analogs function differently and are suited for specific situations related to gastric acid management. H2 receptor antagonists reduce acid secretion by blocking histamine at the H2 receptors but do not inhibit the proton pump directly. Antacids neutralize existing stomach acid but do not prevent its secretion. Prostaglandin analogs are used to protect the gastric mucosa and often help prevent ulcers by stimulating mucus and bicarbonate production. Thus, understanding the unique mechanism and therapeutic applications of PPIs is vital for optimal patient care in managing acid-related conditions.

7. What does quality assurance in healthcare evaluate?

- A. Patient satisfaction and feedback
- B. Patient complications and readmission rates
- C. The care of patients using established standards**
- D. Financial performance of health services

Quality assurance in healthcare primarily focuses on evaluating the care of patients using established standards. This involves assessing whether healthcare services are meeting predetermined benchmarks for quality, effectiveness, and safety. The goal of quality assurance is to ensure that patients receive high-quality care that adheres to best practices, clinical guidelines, and regulatory requirements. When evaluating the care of patients, quality assurance measures often include reviews of clinical outcomes, adherence to protocols, and overall performance metrics within healthcare settings. By establishing and monitoring these standards, healthcare organizations can identify areas for improvement, enhance patient outcomes, and ensure that services are delivered safely and effectively. While patient satisfaction and feedback, patient complications and readmission rates, and financial performance are important aspects of overall healthcare quality, they are not the primary focus of quality assurance. Instead, these elements can serve as indicators of performance or outcomes that result from the quality of care provided, rather than the direct measurement of care against established clinical standards.

8. Which of the following is an example of descriptive research?

- A. Observational studies**
- B. Randomized controlled trials
- C. Case studies
- D. Longitudinal studies

Descriptive research is primarily aimed at providing a detailed account of a phenomenon rather than manipulating or controlling variables. Observational studies exemplify this approach as they focus on documenting and describing characteristics or behaviors in a natural setting without intervention by the researcher. This type of study helps to generate hypotheses and understand patterns or trends within a population. In contrast, randomized controlled trials involve the manipulation of variables to test the efficacy of an intervention, making them a form of experimental research rather than descriptive. Case studies, while they provide in-depth insights into individual cases or phenomena, are often used to explore specific instances in detail, and although they are descriptive in nature, they do not encompass the broader observational approach. Longitudinal studies track the same subjects over time to observe changes and developments, often involving some level of intervention or hypothesizing, which distinguishes them from purely observational descriptive methods. Thus, observational studies stand out as a clear example of descriptive research.

9. What physiological change occurs during respiratory acidosis?

- A. Increased blood pH
- B. Increased carbon dioxide levels**
- C. Increased oxygen levels
- D. Decreased bicarbonate levels

During respiratory acidosis, the primary physiological change is an increase in carbon dioxide levels. This condition arises when the lungs cannot effectively remove carbon dioxide (CO₂) from the body due to insufficient ventilation or lung function. As CO₂ accumulates in the bloodstream, it combines with water to form carbonic acid, leading to a decrease in pH and resulting in a more acidic environment within the body. As carbon dioxide levels rise, the body's compensatory mechanisms, such as renal compensation, attempt to restore pH balance by increasing bicarbonate (HCO₃⁻) reabsorption in the kidneys over time. However, the immediate physiological effect of respiratory acidosis is marked by elevated carbon dioxide levels. Understanding this mechanism is crucial, as it highlights how respiratory performance influences acid-base balance and the importance of monitoring ventilatory status in acutely ill patients.

10. Which of the following is NOT a responsibility of case managers?

- A. Documenting patient care
- B. Conducting assessments of patient needs
- C. Balancing quality and cost of resources used
- D. Providing direct therapeutic interventions**

Case managers primarily focus on coordinating care and ensuring that patients receive the necessary resources and support throughout their treatment journey. Their responsibilities include conducting assessments of patient needs, which allows them to evaluate the patient's current health status and determine the most appropriate interventions and resources required for effective management. They are also involved in balancing quality care with cost-effective resource usage, making informed decisions that ensure patients receive optimal care without unnecessary expenditures. In addition, case managers diligently document patient care to maintain accurate records, track progress, and communicate with the healthcare team. This documentation is vital for continuity of care and helps in evaluating the effectiveness of interventions over time. Providing direct therapeutic interventions, however, falls outside the typical role of a case manager. This responsibility is generally reserved for healthcare providers such as nurses, physicians, or therapists who have the training and qualifications to deliver direct patient care. Thus, while case managers play a crucial role in orchestrating and facilitating care, they do not engage in direct therapeutic interventions with patients.

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://agacnpcert.examzify.com>

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

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