

ANCC Adult-Gerontology Acute Care Nurse Practitioner Certification (AGACNP) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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. What is the definitive method to confirm lung cancer?**
 - A. CT scan**
 - B. Biopsy**
 - C. Bronchoscopy**
 - D. Chest X-ray**

- 2. What condition is characterized by elevated levels of cortisol?**
 - A. Addison's Disease**
 - B. Cushing's Syndrome**
 - C. Hyperthyroidism**
 - D. Graves' Disease**

- 3. Which condition would require an urgent referral to a vascular surgeon?**
 - A. Minor infection**
 - B. Gangrene**
 - C. Localized edema**
 - D. Dry skin**

- 4. When should a CT scan be considered for a patient with acute pancreatitis?**
 - A. Immediately upon diagnosis**
 - B. Only if the clinical situation worsens a few days later**
 - C. After 2 weeks of hospitalization**
 - D. Only in patients with a history of pancreatitis**

- 5. What is a common sign of narcotic overdose?**
 - A. Hypothermia**
 - B. Urinary retention**
 - C. Elevated blood pressure**
 - D. Pupil dilation**

- 6. Which nerve is involved in regulating heart rate and digestive functions?**
- A. Trochlear**
 - B. Spinal Accessory**
 - C. Vagus**
 - D. Hypoglossal**
- 7. Who was the first Nurse Practitioner in the United States?**
- A. Mary Breckinridge**
 - B. Loretta Ford**
 - C. Virginia Henderson**
 - D. Clara Barton**
- 8. What is the most common cause of intrinsic renal failure?**
- A. Dehydration**
 - B. Ischemic injury**
 - C. Diabetes mellitus**
 - D. Hypertension**
- 9. What is a common post-infectious complication associated with reactive arthritis?**
- A. Urethritis**
 - B. Arthritis of the spine**
 - C. Psoriatic lesions**
 - D. Osteoarthritis**
- 10. What is the main treatment for mycoplasma pneumonia?**
- A. Oral corticosteroids**
 - B. Z-pack (azithromycin)**
 - C. Intravenous antibiotics**
 - D. Pneumococcal vaccine**

Answers

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

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Explanations

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1. What is the definitive method to confirm lung cancer?

- A. CT scan
- B. Biopsy**
- C. Bronchoscopy
- D. Chest X-ray

The definitive method to confirm lung cancer is through a biopsy. A biopsy involves the removal of tissue samples from the lung for examination under a microscope. This procedure allows pathologists to not only confirm the presence of cancer cells but also determine the specific type of lung cancer. In essence, the definitive diagnosis hinges on histological evaluation, which is only possible by obtaining direct tissue samples. Other imaging techniques, such as CT scans and chest X-rays, can suggest the presence of lung cancer by identifying suspicious masses or lesions; however, these methods cannot provide a definitive diagnosis. They are valuable tools for screening and further evaluation but are not conclusive on their own. Bronchoscopy, while it can directly visualize the airways and obtain samples, is still a method that often facilitates biopsy collection, making the biopsy itself the gold standard for definitive diagnosis.

2. What condition is characterized by elevated levels of cortisol?

- A. Addison's Disease
- B. Cushing's Syndrome**
- C. Hyperthyroidism
- D. Graves' Disease

Cushing's Syndrome is characterized by elevated levels of cortisol, which can result from various factors such as adrenal tumors, pituitary tumors producing excess adrenocorticotropic hormone (ACTH), or prolonged use of corticosteroid medications. In this condition, the excessive cortisol leads to a range of manifestations including weight gain, moon facies, thinning of the skin, hypertension, and glucose intolerance. Addison's Disease, on the other hand, is associated with insufficient cortisol production due to adrenal insufficiency. Hyperthyroidism and Graves' Disease primarily involve the thyroid gland and relate to elevated levels of thyroid hormones rather than cortisol levels. Thus, the unique hallmark of Cushing's Syndrome is the excess of cortisol, which clearly distinguishes it from the other listed conditions.

3. Which condition would require an urgent referral to a vascular surgeon?

- A. Minor infection**
- B. Gangrene**
- C. Localized edema**
- D. Dry skin**

A condition that requires an urgent referral to a vascular surgeon is gangrene. Gangrene refers to the death of body tissue due to a lack of blood flow (ischemia) or a serious bacterial infection. This condition can lead to severe complications, including systemic infection, sepsis, and the need for limb amputation if not addressed promptly. The urgent nature of gangrene arises from the potential for rapid deterioration of the affected tissue and the significant risk posed to the patient's overall health. In contrast, minor infections, localized edema, and dry skin typically do not present the same level of urgency. While they may require medical attention, they generally do not indicate immediate vascular compromise or life-threatening conditions, making them less critical for prompt surgical intervention.

4. When should a CT scan be considered for a patient with acute pancreatitis?

- A. Immediately upon diagnosis**
- B. Only if the clinical situation worsens a few days later**
- C. After 2 weeks of hospitalization**
- D. Only in patients with a history of pancreatitis**

The correct approach for considering a CT scan in a patient with acute pancreatitis is to perform it only if the clinical situation worsens after initial management. In cases of acute pancreatitis, a CT scan is not typically performed immediately upon diagnosis because most patients will improve with supportive care, and the early use of imaging does not impact management in the majority of cases. CT scans are more useful when there is a concern for complications, such as the development of necrotizing pancreatitis, abscess, or other local complications that may emerge as the condition evolves. Therefore, monitoring the patient's clinical status is critical, and if deterioration occurs or there are signs of complications after a few days of treatment, a CT scan can help evaluate further action. Timing the imaging in this way helps to avoid unnecessary radiation exposure and costs associated with scans when they are not likely to add value in the initial management of uncomplicated acute pancreatitis. It is also not appropriate to delay imaging for a fixed period, such as 2 weeks, if clinical deterioration occurs earlier. Similarly, basing the decision solely on a history of pancreatitis is not sufficient; the current clinical presentation and symptoms guide the decision for imaging.

5. What is a common sign of narcotic overdose?

- A. Hypothermia**
- B. Urinary retention**
- C. Elevated blood pressure**
- D. Pupil dilation**

A common sign of narcotic overdose is hypothermia. Narcotics, or opioids, can depress the central nervous system, leading to reduced thermoregulation and potentially resulting in a drop in body temperature. This can occur because opioids affect the hypothalamus, which plays a critical role in temperature regulation. While urinary retention can occur due to the anticholinergic effect of certain opioids, it is not as definitive or immediate a sign of overdose as hypothermia. Elevated blood pressure is more often associated with withdrawal symptoms or other conditions rather than an overdose scenario, where blood pressure is typically lowered. Pupil dilation is often associated with stimulants or could be a sign of withdrawal from narcotics, while opioid overdose usually presents with miosis (constricted pupils). Thus, hypothermia stands out as a key indicator of narcotic overdose.

6. Which nerve is involved in regulating heart rate and digestive functions?

- A. Trochlear**
- B. Spinal Accessory**
- C. Vagus**
- D. Hypoglossal**

The vagus nerve plays a crucial role in regulating heart rate and digestive functions as it is a major component of the parasympathetic nervous system. This nerve extends from the brainstem down to the abdomen, influencing various organs along its path. In terms of heart rate, the vagus nerve helps to slow the heart rate by releasing neurotransmitters that activate muscarinic receptors in the heart, leading to decreased heart rate and reduced myocardial contractility. This action is often described as the 'rest and digest' response, counteracting the 'fight or flight' reactions of the sympathetic nervous system. Regarding digestive functions, the vagus nerve stimulates the production of digestive enzymes and the secretion of gastric acid, enhancing the digestive process. It also promotes peristalsis, which is the wave-like muscle contractions that move food through the gastrointestinal tract. The other nerves listed do not have these specific functions. The trochlear nerve is primarily involved in eye movement, the spinal accessory nerve mainly controls shoulder and neck muscles, and the hypoglossal nerve is responsible for tongue movements. Hence, the vagus nerve is uniquely positioned as the nerve that regulates heart rate and digestive processes.

7. Who was the first Nurse Practitioner in the United States?

- A. Mary Breckinridge
- B. Loretta Ford**
- C. Virginia Henderson
- D. Clara Barton

Loretta Ford is recognized as the first Nurse Practitioner in the United States, having developed the Nurse Practitioner role in the late 1960s. She co-founded the first Nurse Practitioner program at the University of Colorado in 1965, which emphasized advanced clinical training for nurses and expanded their scope of practice to include care for patients in the primary care setting. This was a pivotal moment in nursing history, as it established a bridge between nursing and medicine, allowing for a collaborative approach to healthcare. The other individuals mentioned, while notable in their own rights, are recognized for different contributions in nursing. Mary Breckinridge is known for founding the Frontier Nursing Service and introducing nurse-midwifery in the United States; Virginia Henderson is celebrated for her work in nursing theory and defining the role of the nurse; and Clara Barton is famous for founding the American Red Cross and her humanitarian efforts during the Civil War. None of these roles align with the establishment of the Nurse Practitioner model as Ford did.

8. What is the most common cause of intrinsic renal failure?

- A. Dehydration
- B. Ischemic injury**
- C. Diabetes mellitus
- D. Hypertension

The most common cause of intrinsic renal failure is ischemic injury. This type of acute kidney injury occurs when there is a problem within the kidneys themselves, often due to a reduction in blood flow or oxygen to the renal tissues, leading to cell damage and impaired kidney function. Ischemic injury can result from several conditions, including severe hypotension, shock, or other situations that compromise renal perfusion. This is particularly relevant in acute settings where conditions leading to reduced blood flow, like sepsis or severe dehydration, can quickly escalate the risk of intrinsic renal failure. Although other factors such as dehydration can lead to pre-renal causes of kidney injury, they are not classified as intrinsic renal failure since the kidney structure is not damaged directly. Diabetes mellitus and hypertension can lead to chronic kidney disease or glomerular injury over time but are not the most common acute causes of intrinsic renal failure. Understanding the etiologies of intrinsic renal failure is crucial in acute care settings to aid in early diagnosis and management.

9. What is a common post-infectious complication associated with reactive arthritis?

- A. Urethritis**
- B. Arthritis of the spine**
- C. Psoriatic lesions**
- D. Osteoarthritis**

Reactive arthritis is an inflammatory joint condition that typically arises following an infection in another part of the body, often involving the genitourinary or gastrointestinal systems. One of the most recognized post-infectious complications associated with reactive arthritis is urethritis. This is particularly relevant in cases where the underlying infection is related to sexually transmitted infections, such as Chlamydia or Gonorrhea, both of which can cause urethritis. The inflammation of the joints in reactive arthritis usually occurs after the infection has resolved, and it can be accompanied by urethritis, which manifests as pain or discomfort during urination and may involve a discharge. The connection between the infection and the inflammatory response in the joints creates a scenario where the inflammation of the urethra and joints co-occurs. In contrast, arthritis of the spine is more characteristic of spondyloarthritis rather than reactive arthritis specifically. Psoriatic lesions are associated with psoriatic arthritis, which is a different inflammatory disorder. Osteoarthritis is a degenerative joint disease, not directly linked to infectious processes or post-infectious complications. Thus, recognizing urethritis as a common post-infectious complication of reactive arthritis helps in identifying and managing the overall impact of the condition on the patient's

10. What is the main treatment for mycoplasma pneumonia?

- A. Oral corticosteroids**
- B. Z-pack (azithromycin)**
- C. Intravenous antibiotics**
- D. Pneumococcal vaccine**

Mycoplasma pneumonia is primarily caused by the bacterium Mycoplasma pneumoniae, which is a common cause of pneumonia, particularly in younger populations. The main treatment for this condition includes the use of antibiotics that are effective against atypical pathogens, and azithromycin, commonly known as a Z-pack, is one of the preferred first-line treatments. Azithromycin belongs to the macrolide class of antibiotics and is effective against various atypical bacteria, including Mycoplasma pneumoniae. Oral corticosteroids, while useful in managing inflammation in certain respiratory conditions, are not standard treatment for mycoplasma pneumonia as they do not directly treat the infection. Intravenous antibiotics are typically reserved for more severe cases or when there are complications, and are not first-line therapy for uncomplicated mycoplasma pneumonia. The pneumococcal vaccine is a preventive measure against specific bacterial pneumonia (Streptococcus pneumoniae) and does not provide treatment for mycoplasma pneumonia. Therefore, the use of azithromycin as a treatment directly addresses the infection, making it the mainstay therapy for mycoplasma pneumonia.

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:

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

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