

DUNPHY ENDOCRINE AND METABOLIC PROBLEMS PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE**

<https://dunphyendocrinemetabolicprob.examzify.com>



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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. In the event of an Addisonian crisis, which treatment is essential?**
 - A. Immediate thyroid replacement
 - B. Intravenous fluids and glucocorticoids
 - C. Insulin therapy
 - D. High-calorie dietary intervention

- 2. Which statement best describes the relationship between physical activity and insulin sensitivity?**
 - A. Higher physical activity lowers insulin sensitivity
 - B. Physical activity has no impact on insulin sensitivity
 - C. Regular physical activity enhances insulin sensitivity
 - D. Physical activity only aids weight loss, not insulin sensitivity

- 3. Which condition is a common pathological cause of hirsutism?**
 - A. Polycystic ovary syndrome
 - B. Addison disease
 - C. Hyperthyroidism
 - D. Alopecia

- 4. What is the recommended initial medication for an acute gout attack?**
 - A. Glucocorticoid
 - B. Colchicine
 - C. Ibuprofen
 - D. Allopurinol

- 5. What adjustment should be made for a patient experiencing nighttime hypoglycemia when using Novolin 70/30?**
 - A. Decreasing the am dose of 70/30
 - B. Decreasing the pm dose of 70/30
 - C. Eating a snack before going to bed
 - D. Changing the time of the nighttime insulin injection

- 6. What is the primary purpose of low-dose aspirin therapy for individuals with diabetes and a family history of coronary heart disease?**
- A. To prevent infection
 - B. To act as a pain reliever
 - C. To reduce risk of coronary artery disease
 - D. To enhance blood glucose control
- 7. What common condition would you expect Lynne to have with Cushing syndrome?**
- A. Onychomycosis
 - B. Generalized increased pigmentation of the skin
 - C. Hair loss
 - D. Excitability and nervousness
- 8. When monitoring a patient on methimazole (Tapazole), which tests are crucial?**
- A. Glycated hemoglobin (HbA1c)
 - B. Complete blood count (CBC) and liver transaminases
 - C. Uric acid level
 - D. Total thyroxine (T4)
- 9. What potential consequence is related to decreased insulin sensitivity due to increased body weight?**
- A. Improved metabolic health
 - B. Decreased metabolic disorders
 - C. Possible metabolic disorders
 - D. Heightened energy levels
- 10. What should a patient with type 1 diabetes do if their morning glucose levels remain high despite insulin adjustments?**
- A. Increase evening NPH insulin dosage
 - B. Check glucose levels between 2 am and 4 am
 - C. Increase morning regular insulin dosage
 - D. Order a fasting blood sugar test

Answers

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

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Explanations

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1. In the event of an Addisonian crisis, which treatment is essential?

- A. Immediate thyroid replacement
- B. Intravenous fluids and glucocorticoids**
- C. Insulin therapy
- D. High-calorie dietary intervention

In the context of an Addisonian crisis, which is a life-threatening situation stemming from adrenal insufficiency, the essential treatment involves administering intravenous fluids and glucocorticoids. An Addisonian crisis often results from a significant drop in cortisol levels, which can occur due to various factors such as stress, illness, or sudden discontinuation of glucocorticoid treatment in individuals with existing adrenal insufficiency. The use of intravenous fluids is crucial to help restore normal blood volume, combat dehydration, and stabilize blood pressure, which may be severely affected during a crisis. Glucocorticoids such as hydrocortisone are vital because they replace the missing cortisol, providing the necessary hormones to correct the metabolic and physiological disturbances caused by adrenal insufficiency. The rapid administration of these treatments can stabilize the patient, preventing further complications and potentially saving their life. Other treatments listed, such as thyroid replacement, insulin therapy, and dietary interventions, do not directly address the acute adrenal insufficiency and are not priorities in the acute management of an Addisonian crisis. Thus, the combination of intravenous fluids and glucocorticoids is the cornerstone of treatment in this emergency situation.

2. Which statement best describes the relationship between physical activity and insulin sensitivity?

- A. Higher physical activity lowers insulin sensitivity
- B. Physical activity has no impact on insulin sensitivity
- C. Regular physical activity enhances insulin sensitivity**
- D. Physical activity only aids weight loss, not insulin sensitivity

Regular physical activity enhances insulin sensitivity, making this the best statement to describe the relationship between physical activity and insulin sensitivity. Engaging in consistent exercise helps the body's cells become more responsive to insulin, which is crucial for maintaining normal blood glucose levels. This improved sensitivity means that the body requires less insulin to manage glucose effectively, which is beneficial for preventing conditions like type 2 diabetes. Additionally, physical activity stimulates glucose uptake by muscles during exercise, contributing to better overall metabolism and allowing the body to utilize insulin more effectively. This can also have long-term effects on metabolic health, improving how the body manages energy sources. In contrast to the selected answer, higher physical activity does not lower insulin sensitivity, nor is there any reasonable evidence to suggest that physical activity has no impact. The option stating that exercise only aids in weight loss overlooks the broader metabolic benefits it provides, including the enhancement of insulin efficacy.

3. Which condition is a common pathological cause of hirsutism?

A. Polycystic ovary syndrome

B. Addison disease

C. Hyperthyroidism

D. Alopecia

Polycystic ovary syndrome (PCOS) is a common pathological cause of hirsutism due to its association with elevated androgen levels, which are male hormones that can lead to increased hair growth in women. In PCOS, the ovaries may produce excessive androgens, which can result in symptoms such as irregular menstrual cycles, infertility, and hirsutism. The presence of these elevated androgen levels manifests as unwanted hair growth, particularly in areas where men typically develop hair, such as the face, chest, and back. In contrast, conditions like Addison disease and hyperthyroidism may have hormonal imbalances but are not directly linked to the specific increase in androgens that triggers hirsutism. Addison disease involves adrenal insufficiency, leading to a deficiency in cortisol and aldosterone, while hyperthyroidism typically results in excess thyroid hormone, which affects metabolism but does not typically cause hirsutism. Alopecia refers to hair loss and does not contribute to the increased hair growth characteristic of hirsutism. Thus, PCOS stands out as the primary condition associated with hirsutism due to the direct influence of elevated androgens.

4. What is the recommended initial medication for an acute gout attack?

A. Glucocorticoid

B. Colchicine

C. Ibuprofen

D. Allopurinol

The recommended initial medication for an acute gout attack is colchicine. Colchicine is specifically used for treating acute inflammation in gout due to its mechanism of action, which helps to reduce the pain and swelling associated with gout attacks. It works by disrupting the inflammatory process that occurs during a gout flare, effectively alleviating symptoms. While nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen can also be used to relieve pain in gout attacks, they are not as specifically targeted as colchicine. Similarly, glucocorticoids may be employed in cases where other treatments are contraindicated or not sufficiently effective, but they are typically not the first-line treatment for an acute episode. Allopurinol is used for long-term management of gout to lower uric acid levels but is not appropriate for treating an acute attack since it does not provide immediate relief of symptoms. Thus, for an acute gout attack, colchicine stands out as the initial medication of choice.

5. What adjustment should be made for a patient experiencing nighttime hypoglycemia when using Novolin 70/30?

- A. Decreasing the am dose of 70/30
- B. Decreasing the pm dose of 70/30
- C. Eating a snack before going to bed

D. Changing the time of the nighttime insulin injection

For a patient experiencing nighttime hypoglycemia while using Novolin 70/30, the appropriate adjustment involves changing the timing of the nighttime insulin injection. Novolin 70/30 contains both rapid-acting and intermediate-acting insulin, which can lead to an overlap in insulin action during the nighttime hours. If the insulin is administered too close to bedtime, the peak effect of the insulin can result in lower blood sugar levels during the night, causing hypoglycemia. By adjusting the time of the nighttime insulin injection, there is an opportunity to minimize the risk of hypoglycemia. For example, administering the insulin earlier in the evening may allow the patient to avoid the peak action phase of the medication when they are asleep. This can lead to better control of blood glucose levels during the night and decrease the likelihood of experiencing hypoglycemia. Other options, such as decreasing the morning or evening dosage of 70/30 or having a bedtime snack, could be strategies to prevent hypoglycemia but they do not specifically address the causal relationship between insulin timing and nocturnal hypoglycemia. Adjusting the administration schedule directly impacts when the insulin's effects are felt, providing a more tailored response to the problem at hand.

6. What is the primary purpose of low-dose aspirin therapy for individuals with diabetes and a family history of coronary heart disease?

- A. To prevent infection
- B. To act as a pain reliever

C. To reduce risk of coronary artery disease

- D. To enhance blood glucose control

The primary purpose of low-dose aspirin therapy in individuals with diabetes and a family history of coronary heart disease is to reduce the risk of coronary artery disease. Aspirin works by inhibiting platelet aggregation, which helps prevent the formation of blood clots that can block blood vessels and lead to serious cardiovascular events, such as heart attacks. This is particularly important for those with diabetes, who are at an increased risk for developing cardiovascular diseases. Using low-dose aspirin as a preventive measure can help individuals with specific risk factors—like diabetes and a family history of heart disease—manage their cardiovascular health more effectively. The anti-inflammatory properties of aspirin also contribute to its effectiveness in protecting vascular health. Thus, in this context, low-dose aspirin therapy is a critical intervention aimed at mitigating the risk of coronary artery disease.

7. What common condition would you expect Lynne to have with Cushing syndrome?

- A. Onychomycosis**
- B. Generalized increased pigmentation of the skin
- C. Hair loss
- D. Excitability and nervousness

When considering conditions commonly associated with Cushing syndrome, generalized increased pigmentation of the skin is a notable feature. Cushing syndrome occurs due to excessive cortisol levels in the body, which can lead to various skin changes. One of these changes is the development of broad areas of hyperpigmentation, especially in areas subject to friction such as elbows, knees, and the neck. This occurs as a response to increased adrenocorticotropic hormone (ACTH) levels that can stimulate melanocyte activity, thereby resulting in darkened skin pigmentation. In contrast, while onychomycosis refers to a fungal infection of the nails, it is not directly associated with Cushing syndrome and does not represent a hallmark of this condition. Hair loss can occur in Cushing syndrome, but it's less characteristic than the skin pigmentation changes. Similarly, excitability and nervousness may be observed in some patients but are not definitive markers of Cushing syndrome. The most pronounced and commonly linked skin manifestation is the generalized increase in pigmentation, which signifies the endocrine disruption caused by the elevated cortisol.

8. When monitoring a patient on methimazole (Tapazole), which tests are crucial?

- A. Glycated hemoglobin (HbA1c)
- B. Complete blood count (CBC) and liver transaminases**
- C. Uric acid level
- D. Total thyroxine (T4)

The correct choice is based on the importance of monitoring specific laboratory values for a patient who is being treated with methimazole. Methimazole is an antithyroid medication commonly used to manage hyperthyroidism by inhibiting the synthesis of thyroid hormones. Given its mechanism of action and potential side effects, monitoring a complete blood count (CBC) and liver transaminases is crucial. A CBC is essential because methimazole can cause hematological side effects, particularly agranulocytosis, which is a potentially serious condition characterized by a dangerously low white blood cell count. Regular monitoring can help identify this side effect early, allowing for timely intervention. Additionally, liver transaminases are monitored to assess for any liver function abnormalities, as liver toxicity can occur with methimazole use. While monitoring total thyroxine (T4) levels is important in assessing the effectiveness of hyperthyroidism treatment, it is not specific to the adverse effects of methimazole itself. The other options, such as glycated hemoglobin, primarily assess diabetes management, and uric acid levels are not directly relevant to methimazole therapy. Therefore, the combination of CBC and liver transaminases provides a comprehensive safety profile for patients on this medication.

9. What potential consequence is related to decreased insulin sensitivity due to increased body weight?

- A. Improved metabolic health
- B. Decreased metabolic disorders
- C. Possible metabolic disorders**
- D. Heightened energy levels

Decreased insulin sensitivity related to increased body weight can lead to a range of metabolic disorders. When insulin sensitivity is impaired, the body requires higher levels of insulin to manage glucose levels in the blood effectively. Over time, this condition can contribute to the development of type 2 diabetes, impaired glucose tolerance, and obesity-related complications. As body weight increases, particularly in the form of excess fat, especially around the abdomen, the body's cells may respond less effectively to insulin. This situation results in higher circulating glucose levels, which can cause additional complications, including cardiovascular diseases, fatty liver disease, and other insulin-resistant conditions. In contrast, improved metabolic health, decreased metabolic disorders, and heightened energy levels do not occur as a consequence of decreased insulin sensitivity. Thus, recognizing the potential for metabolic disorders as a direct result of increased body weight and the consequent decrease in insulin sensitivity is essential for understanding the health implications of obesity.

10. What should a patient with type 1 diabetes do if their morning glucose levels remain high despite insulin adjustments?

- A. Increase evening NPH insulin dosage
- B. Check glucose levels between 2 am and 4 am**
- C. Increase morning regular insulin dosage
- D. Order a fasting blood sugar test

When a patient with type 1 diabetes experiences persistently high morning glucose levels, checking glucose levels between 2 am and 4 am is essential. This time frame is crucial because it can provide insight into nighttime glucose trends and the potential for nocturnal hypoglycemia or insufficient insulin action while the patient is asleep. If the blood glucose levels are found to be high during this period, it may indicate inadequate basal insulin coverage during the night, leading to elevated morning readings. Conversely, if levels are low or dropping during these hours, it suggests that the evening insulin dosage may be too high, causing hypoglycemia followed by a rebound effect resulting in higher glucose levels in the morning. Understanding nocturnal patterns is key to managing fasting hyperglycemia effectively. It allows for small, targeted adjustments to the basal insulin, whether that involves increasing the evening dosage or altering the timing, rather than making premature changes to the morning insulin regimen or relying solely on fasting blood tests. Thus, monitoring glucose in the early morning hours provides critical data that can directly inform further treatment decisions to achieve better overall glucose control.

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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