

DUNPHY PRIMARY CARE PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://dunphyprimarycare.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

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	16

SAMPLE

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

SAMPLE

- 1. What is the primary cause of macrocytic normochromic anemias?**
 - A. Acute blood loss
 - B. A nutritional deficiency of iron
 - C. A deficiency of folic acid
 - D. An infection or tumor

- 2. Which complication can arise from untreated long-term asthma?**
 - A. Pulmonary hypertension
 - B. Lung cancer
 - C. Respiratory failure
 - D. Both A and C

- 3. A 56-year-old social worker has fever, facial pain, and purulent nasal discharge for 6 days. What condition should the nurse practitioner suspect?**
 - A. A dental abscess.
 - B. Acute rhinosinusitis.
 - C. Chronic rhinosinusitis.
 - D. A nasal tumor.

- 4. What does terazosin hydrochloride (Hytrin) do for patients with benign prostatic hyperplasia?**
 - A. It's a preventive drug for urinary infections.
 - B. It shrinks the prostate tissue.
 - C. It relaxes the urethra.
 - D. It relaxes smooth muscle in the prostate and bladder neck.

- 5. Mark, age 72, complains of a productive cough and other symptoms for 8 weeks. What would be one of the first tests you order?**
 - A. Mantoux test.
 - B. Chest x-ray.
 - C. Complete blood work.
 - D. Sputum culture.

- 6. In tumor classification, TNM stands for which of the following?**
- A. Tumor, node, metastasis
 - B. Tumor, nodules, metastasis
 - C. Tumor, node, medicine
 - D. Treat, nodules, metastasis
- 7. Which type of incontinence is characterized by decreased bladder capacity and irritation due to various factors?**
- A. Stress urinary incontinence
 - B. Urge urinary incontinence
 - C. Overflow urinary incontinence
 - D. Reflex urinary incontinence
- 8. What indicates a lack of understanding in a client counseling session about asthma management?**
- A. Cover the mattress and pillows in airtight, dustproof covers
 - B. Wash the bedding weekly and dry it on a hot setting for 20 minutes
 - C. Avoid sleeping on natural fibers such as wool or down
 - D. Open the windows and air out the room daily
- 9. Laura, age 36, presents with dyspnea and other concerning symptoms. What do you suspect?**
- A. Asthma.
 - B. Bronchitis.
 - C. Pulmonary embolism.
 - D. Pneumothorax.
- 10. What is the best treatment for a college student with a positive rapid influenza test?**
- A. Rest and hydration
 - B. Oseltamivir
 - C. Inpatient hospitalization for supportive care
 - D. Azithromycin

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is the primary cause of macrocytic normochromic anemias?

- A. Acute blood loss
- B. A nutritional deficiency of iron
- C. A deficiency of folic acid**
- D. An infection or tumor

Macrocytic normochromic anemias are characterized by the presence of larger than normal red blood cells (macrocytes) with a normal concentration of hemoglobin in them (normochromic). The primary cause of this type of anemia is often related to a deficiency in certain nutrients that are essential for the proper formation of red blood cells, specifically folic acid (vitamin B9) and vitamin B12. Folic acid is crucial for DNA synthesis and the division of cells in the bone marrow, where red blood cells are produced. Without adequate folic acid, the production of red blood cells can be impaired, resulting in macrocytic anemia as the cells grow larger but are dysfunctional and cannot divide appropriately. Deficiency in folate can result from inadequate dietary intake, malabsorption, or increased requirements during pregnancy. In contrast, acute blood loss would typically lead to normocytic anemia rather than macrocytic, as the red blood cells do not have time to enlarge. A nutritional deficiency of iron specifically leads to microcytic anemias, where red blood cells are smaller than normal and often pale due to the lack of hemoglobin. Infections or tumors can lead to anemia through different mechanisms, such as anemia of

2. Which complication can arise from untreated long-term asthma?

- A. Pulmonary hypertension
- B. Lung cancer
- C. Respiratory failure
- D. Both A and C**

When long-term asthma remains untreated, several significant complications can develop due to chronic airway inflammation and increased resistance in the lungs. The correct answer encompasses both pulmonary hypertension and respiratory failure, which can arise as a result of the ongoing strain placed on the respiratory system. Pulmonary hypertension can develop because persistent asthma leads to structural changes in the lungs, including vascular remodeling. The chronic hypoxia caused by asthma can elevate the pressure in the pulmonary arteries, leading to pulmonary hypertension, where the blood vessels in the lungs become narrowed, obstructed, or destroyed. Respiratory failure is another potential complication stemming from untreated asthma. When the airways are continuously inflamed and obstructed, it can result in inadequate ventilation and gas exchange. In severe cases, this can lead to respiratory failure, a condition where the body cannot maintain proper oxygenation or remove carbon dioxide effectively. Addressing both pulmonary hypertension and respiratory failure highlights the serious consequences of untreated long-term asthma, underscoring the importance of proper management and intervention to prevent these complications.

3. A 56-year-old social worker has fever, facial pain, and purulent nasal discharge for 6 days. What condition should the nurse practitioner suspect?

- A. A dental abscess.
- B. Acute rhinosinusitis.**
- C. Chronic rhinosinusitis.
- D. A nasal tumor.

The symptoms described—fever, facial pain, and purulent nasal discharge—are characteristic of acute rhinosinusitis. This condition, often resulting from a viral infection following a cold, can lead to inflammation and blockage of the sinuses. The presence of purulent discharge suggests a bacterial infection, which is common in acute cases. Additionally, the fever and facial pain are indicative of the body responding to this infection. For context, a dental abscess typically presents with localized dental pain and swelling, not the systemic symptoms of fever and purulent discharge. Chronic rhinosinusitis, on the other hand, usually involves more prolonged symptoms lasting beyond 12 weeks, often including nasal obstruction and hyposmia rather than acute fever and severe pain. A nasal tumor would more likely cause unilateral symptoms, obstruction, or other chronic signs rather than a clear presentation of an acute infection. Therefore, acute rhinosinusitis is the most fitting diagnosis for this patient's presentation.

4. What does terazosin hydrochloride (Hytrin) do for patients with benign prostatic hyperplasia?

- A. It's a preventive drug for urinary infections.
- B. It shrinks the prostate tissue.
- C. It relaxes the urethra.
- D. It relaxes smooth muscle in the prostate and bladder neck.**

Terazosin hydrochloride (Hytrin) is primarily used to treat symptoms associated with benign prostatic hyperplasia (BPH), a condition characterized by an enlarged prostate that can obstruct urinary flow. The medication works by relaxing smooth muscle in the prostate and bladder neck, which helps to improve urine flow and alleviate associated urinary symptoms such as difficulty starting urination, a weak urine stream, and the need to urinate frequently or urgently. By specifically targeting the smooth muscle in these areas, terazosin effectively reduces the resistance to urinary flow, making it easier for patients to urinate. This action is particularly important for individuals with BPH, as the enlargement of the prostate can compress the urethra, leading to uncomfortable and disruptive urinary issues. In contrast, other options such as preventing urinary infections or directly shrinking prostate tissue do not accurately describe terazosin's mechanism. It does not act as a preventative for infections and its primary function is not to reduce the size of the prostate, but rather to alleviate symptoms by relaxing muscle tissue.

5. Mark, age 72, complains of a productive cough and other symptoms for 8 weeks. What would be one of the first tests you order?

A. Mantoux test.

B. Chest x-ray.

C. Complete blood work.

D. Sputum culture.

In the context of a 72-year-old patient presenting with a productive cough lasting 8 weeks, the most appropriate initial test to order is a chest x-ray. This imaging study helps visualize any potential abnormalities in the lungs, such as infections, tumors, or other pulmonary issues that could explain the symptoms. The chest x-ray can reveal signs of pneumonia, tuberculosis, or even chronic obstructive pulmonary disease (COPD), which are critical to consider in an older adult with a significant cough. The Mantoux test is a screening tool primarily used to detect latent tuberculosis infection. While tuberculosis can cause a persistent cough, it would not be the first step in evaluating someone with these symptoms. Complete blood work could provide helpful information regarding overall health and possible underlying conditions, but it does not directly assess the primary cause of the cough. Sputum culture could be valuable for identifying infections, but it is typically performed after initial imaging suggests that an infectious process is present. Therefore, a chest x-ray serves as a more immediate and non-invasive way to assess the cause of the cough in this patient.

6. In tumor classification, TNM stands for which of the following?

A. Tumor, node, metastasis

B. Tumor, nodules, metastasis

C. Tumor, node, medicine

D. Treat, nodules, metastasis

In tumor classification, TNM stands for Tumor, Node, Metastasis. This system is widely used in oncology to describe the extent of cancer spread in a standardized way. The "Tumor" component assesses the size and extent of the primary tumor, indicating how invasive it is. The "Node" part evaluates whether the cancer has spread to the nearby lymph nodes, and the "Metastasis" aspect addresses whether the cancer has spread to distant sites in the body. This classification helps in staging the cancer, which is crucial for determining the prognosis and appropriate treatment options for the patient. Understanding this classification system is essential for healthcare professionals, as it provides clear communication of the cancer's status, facilitating better treatment planning and patient management. The other choices do not accurately reflect the standard terminology used in the TNM classification system, which emphasizes precise definitions important for clinical applications.

7. Which type of incontinence is characterized by decreased bladder capacity and irritation due to various factors?

- A. Stress urinary incontinence
- B. Urge urinary incontinence**
- C. Overflow urinary incontinence
- D. Reflex urinary incontinence

Urge urinary incontinence is characterized by a strong, sudden need to urinate, often resulting in involuntary loss of urine. This type of incontinence is linked to several factors, including decreased bladder capacity, bladder irritation, or overactivity of the bladder muscles. Various conditions, such as urinary tract infections, neurological disorders, or inflammation, can increase bladder sensitivity and contribute to this urgent need to void. Patients experiencing urge urinary incontinence typically find that they cannot reach the bathroom in time, which can significantly impact their quality of life. Understanding this physiological response is crucial in identifying and managing the condition effectively through lifestyle changes, medications, or bladder training techniques.

8. What indicates a lack of understanding in a client counseling session about asthma management?

- A. Cover the mattress and pillows in airtight, dustproof covers
- B. Wash the bedding weekly and dry it on a hot setting for 20 minutes
- C. Avoid sleeping on natural fibers such as wool or down
- D. Open the windows and air out the room daily**

The indication of a lack of understanding in a client counseling session about asthma management is demonstrated by the suggestion to open the windows and air out the room daily. Asthma is often triggered by environmental allergens such as pollen, dust mites, or mold, which can enter the home when windows are opened. Airing the room can allow outdoor pollutants and allergens to come in, potentially worsening asthma symptoms for those affected. Effective asthma management strategies focus on minimizing exposure to these triggers within the home environment. In contrast, the other options reflect appropriate management techniques aimed at reducing allergen exposure and improving indoor air quality. Covering mattresses and pillows with airtight, dustproof covers helps to prevent dust mites from settling in bedding. Washing bedding weekly in hot water effectively kills dust mites and removes allergens, while avoiding natural fibers known to trap allergens (like wool or down) also promotes better respiratory health for asthma sufferers.

9. Laura, age 36, presents with dyspnea and other concerning symptoms. What do you suspect?

- A. Asthma.
- B. Bronchitis.
- C. Pulmonary embolism.**
- D. Pneumothorax.

In the context of Laura's presentation with dyspnea—a condition characterized by shortness of breath—considering pulmonary embolism is highly relevant due to its potential severity and acute onset. Pulmonary embolism occurs when a blood clot travels to the lungs, causing blockage of the pulmonary arteries. This condition can produce sudden and intense shortness of breath, possibly accompanied by chest pain, rapid heart rate, or cough that may produce blood-tinged sputum. The age of Laura, combined with her symptoms, aligns with risk factors typically associated with pulmonary embolism, such as a history of deep vein thrombosis, long periods of immobility, or recent surgery. It is crucial to differentiate pulmonary embolism from other conditions with similar symptoms, as they may not carry the same level of urgency or require immediate intervention. In this instance, recognizing the acute and potentially life-threatening nature of pulmonary embolism provides the rationale for prioritizing it in the differential diagnosis among other respiratory conditions like asthma, bronchitis, or pneumothorax, which may present with dyspnea but generally have distinct clinical features and management approaches.

10. What is the best treatment for a college student with a positive rapid influenza test?

- A. Rest and hydration**
- B. Oseltamivir
- C. Inpatient hospitalization for supportive care
- D. Azithromycin

The best treatment for a college student with a positive rapid influenza test is rest and hydration. This approach aligns with the general management of influenza, especially in otherwise healthy individuals who are not exhibiting severe symptoms. Influenza is typically a self-limiting viral infection, and supportive measures such as adequate rest, fluids, and over-the-counter medications for symptom relief can significantly contribute to recovery. In many cases, antiviral medications like oseltamivir are prescribed to patients at high risk for complications or those with severe illness. However, for a college student who is likely otherwise healthy and not presenting with alarming symptoms, the focus on rest and hydration is often sufficient for recovery. Hospitalization for supportive care is generally reserved for severe cases or those with significant comorbid conditions, which is usually not applicable for a typical college student presenting with uncomplicated influenza. Similarly, antibiotics like azithromycin are ineffective against viral infections like influenza and are not indicated unless there is a suspicion of a secondary bacterial infection.

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://dunphyprimarycare.examzify.com>

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

SAMPLE