

Evolve Infectious Diseases Practice Test (Sample)

Study Guide



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SAMPLE

Questions

- 1. When administering doxycycline for Lyme disease, what should the nurse advise the patient?**
 - A. Take the medication with dairy products.**
 - B. Skip a dose if feeling better.**
 - C. Give the medication an hour before milk products are ingested.**
 - D. Take the medication only in the morning.**
- 2. What is the role of public health campaigns in managing zoonotic diseases?**
 - A. To encourage more domestic pet ownership**
 - B. To promote awareness and preventive measures**
 - C. To focus solely on treating affected individuals**
 - D. To ban the consumption of all animal products**
- 3. What infection is typically associated with exposure to freshwater lakes?**
 - A. Giardiasis**
 - B. Naegleria fowleri infection**
 - C. Legionnaires' disease**
 - D. E. coli infection**
- 4. Which diagnostic test is commonly used to confirm AIDS diagnosis?**
 - A. CD4 T-cell count below 200 cells/mm³**
 - B. Blood glucose test**
 - C. Complete blood count**
 - D. Liver function test**
- 5. How can you prevent the transmission of sexually transmitted diseases?**
 - A. Abstinence only**
 - B. Use of condoms and regular testing**
 - C. Vaccination only**
 - D. Only through medication**

- 6. Which fungal infection is often seen in immunocompromised individuals?**
- A. Histoplasmosis**
 - B. Candidiasis**
 - C. Aspergillosis**
 - D. Cryptococcus**
- 7. How often is the flu vaccine recommended?**
- A. Biannually**
 - B. Every five years**
 - C. Annually**
 - D. Every two years**
- 8. How soon after exposure do symptoms usually appear for viral gastroenteritis?**
- A. 1 to 2 days**
 - B. 3 to 6 days**
 - C. 1 week**
 - D. 2 weeks**
- 9. When should peak blood samples for antibiotic levels be obtained from a client receiving IVPB?**
- A. Immediately after administration**
 - B. Between 30 and 60 minutes after the IVPB**
 - C. One hour after the IVPB finishes**
 - D. Two hours after infusion starts**
- 10. When a diagnosis of chickenpox is made, what type of precautions should the client be placed under?**
- A. Contact precautions**
 - B. Droplet precautions**
 - C. Airborne precautions**
 - D. Universal precautions**

Answers

SAMPLE

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

SAMPLE

Explanations

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1. When administering doxycycline for Lyme disease, what should the nurse advise the patient?

A. Take the medication with dairy products.

B. Skip a dose if feeling better.

C. Give the medication an hour before milk products are ingested.

D. Take the medication only in the morning.

When administering doxycycline for Lyme disease, it is essential to advise the patient to take the medication an hour before milk products are ingested. This guidance is crucial because doxycycline belongs to the tetracycline class of antibiotics and can form insoluble complexes with calcium and other divalent or trivalent cations found in dairy products, which can significantly reduce the absorption and efficacy of the medication. By taking the antibiotic an hour before consuming milk or dairy, the patient ensures that the drug is effectively absorbed in the gastrointestinal tract without interference from calcium present in these foods. This recommendation helps achieve optimal therapeutic levels of doxycycline in the body, enhancing its effectiveness in treating Lyme disease. Other instructions, such as taking the medication with dairy products, could lead to treatment failure due to decreased drug absorption. Skipping doses, even if the patient feels better, is not advisable as it could result in incomplete treatment of the infection, potentially leading to complications. Finally, limiting the intake of doxycycline to just the morning without other considerations neglects the importance of adhering to the prescribed dosing schedule, which usually requires more frequent administration to maintain effective drug levels.

2. What is the role of public health campaigns in managing zoonotic diseases?

A. To encourage more domestic pet ownership

B. To promote awareness and preventive measures

C. To focus solely on treating affected individuals

D. To ban the consumption of all animal products

Public health campaigns play a crucial role in managing zoonotic diseases by promoting awareness and preventive measures among the public. Zoonotic diseases, which can be transmitted from animals to humans, require a proactive approach to effectively mitigate their risks. These campaigns not only provide information about how these diseases spread and the symptoms associated with them but also educate the community on practical preventive measures. This includes guidance on safe handling of animals, practicing good hygiene, and the importance of vaccination for both pets and livestock. By raising awareness, public health campaigns empower individuals and communities to take appropriate actions to protect themselves and reduce the risk of disease transmission. Ultimately, informed communities are better equipped to prevent outbreaks and respond effectively when zoonotic diseases do occur. In contrast, while increasing domestic pet ownership, solely treating affected individuals, or banning all animal products may seem like reasonable approaches, they do not address the broader public health needs needed for prevention and community education. These strategies do not foster the awareness and behavioral change required to effectively manage the risks associated with zoonotic diseases.

3. What infection is typically associated with exposure to freshwater lakes?

- A. Giardiasis**
- B. Naegleria fowleri infection**
- C. Legionnaires' disease**
- D. E. coli infection**

Naegleria fowleri infection is closely associated with exposure to freshwater environments, particularly warm freshwater lakes and hot springs. This lethal brain infection occurs when the amoeba enters the body through the nose, typically in water activities such as swimming or diving. Once in the nasal passages, it can travel to the brain, leading to a rare but severe condition called primary amoebic meningoencephalitis (PAM). Understanding this infection is critical because while other options may involve water exposure, they are more commonly linked to other environments or sources. Giardiasis, for instance, is usually contracted through contaminated water or food, but it isn't specifically tied to freshwater lakes. Legionnaires' disease is primarily associated with inhaling aerosolized water droplets from sources like cooling towers or plumbing systems, rather than direct exposure to freshwater lakes. E. coli infections can result from contaminated water, particularly with fecal matter, but again, this does not uniquely focus on freshwater lakes as Naegleria fowleri does. Thus, the unique risk factor for Naegleria fowleri makes it the most appropriate answer in the context of infections associated specifically with freshwater lake exposure.

4. Which diagnostic test is commonly used to confirm AIDS diagnosis?

- A. CD4 T-cell count below 200 cells/mm³**
- B. Blood glucose test**
- C. Complete blood count**
- D. Liver function test**

The confirmation of an AIDS diagnosis primarily relies on the CD4 T-cell count. When the CD4 T-cell count falls below 200 cells/mm³, it is indicative of a severely weakened immune system, which characterizes the progression from HIV infection to AIDS. This specific threshold is a critical marker that helps healthcare providers assess the state of a patient's immune system, guiding treatment and care decisions. In contrast, the other tests listed do not provide direct confirmation of AIDS. A blood glucose test measures glucose levels and is primarily used to manage diabetes rather than diagnose AIDS. A complete blood count provides general information about various blood cells but does not specifically focus on immune function related to HIV infection. Liver function tests assess liver health, which may be impacted by various conditions including some complications of HIV treatment, but they do not directly correspond to the diagnosis of AIDS. Therefore, the CD4 T-cell count is the appropriate test to confirm an AIDS diagnosis due to its direct relationship with the immune status of individuals infected with HIV.

5. How can you prevent the transmission of sexually transmitted diseases?

- A. Abstinence only**
- B. Use of condoms and regular testing**
- C. Vaccination only**
- D. Only through medication**

The prevention of sexually transmitted diseases (STDs) is best achieved through a comprehensive approach, which includes the use of condoms and regular testing. Condoms are highly effective as they create a barrier that can significantly reduce the risk of transmission of STDs during sexual activity. They are a practical means of protection when used consistently and correctly. Regular testing is also critical, as many STDs can be asymptomatic, meaning people might not know they have an infection and can unknowingly spread it to others. By getting tested regularly, individuals can identify and treat infections early, which not only protects their health but also helps prevent the spread to partners. While abstinence is a surefire way to avoid STDs, it is not practical or feasible for everyone, and therefore, it is not the only solution. Vaccination can prevent some STDs, such as HPV and hepatitis B, but it does not provide comprehensive protection for all sexually transmitted infections. Similarly, while medication can effectively treat STDs, it does not prevent their transmission. Thus, the combination of condom use and regular testing emerges as the most effective strategy for the prevention of STDs.

6. Which fungal infection is often seen in immunocompromised individuals?

- A. Histoplasmosis**
- B. Candidiasis**
- C. Aspergillosis**
- D. Cryptococcus**

Candidiasis is a fungal infection that is particularly common in immunocompromised individuals. This infection is caused by *Candida* species, which are yeasts typically found in the human microbiome. In healthy individuals, these organisms usually do not cause disease; however, in those with weakened immune systems—such as patients with HIV/AIDS, those undergoing chemotherapy, or individuals on immunosuppressive medications—*Candida* can overgrow and lead to infections. Candidiasis can present in various forms, including superficial infections like oral thrush and vulvovaginal candidiasis, as well as systemic infections that can affect the bloodstream and internal organs. The predisposition of immunocompromised individuals to *Candida* infections is linked to their diminished ability to control the growth of these yeasts, leading to increased risk and severity of the disease. While other fungal infections like Histoplasmosis, Aspergillosis, and Cryptococcus also target immunocompromised patients, Candidiasis is more prevalent due to the ubiquity of *Candida* species in human environments and the body. Therefore, its occurrence is often more directly associated with conditions that compromise the immune system.

7. How often is the flu vaccine recommended?

- A. Biannually
- B. Every five years
- C. Annually**
- D. Every two years

The flu vaccine is recommended annually because the influenza virus undergoes frequent changes, leading to the emergence of new strains. Each year, public health organizations analyze data on circulating flu viruses to determine the most effective formulations for the upcoming flu season. This annual vaccination is crucial for providing optimal protection against the strains that are most likely to be prevalent. Additionally, immunity from the vaccine diminishes over time, so receiving the vaccine each year helps ensure that individuals maintain sufficient protection as flu season approaches. Regular yearly vaccination is a key component of public health efforts to reduce the incidence and severity of influenza, making it essential for anyone eligible to be vaccinated annually.

8. How soon after exposure do symptoms usually appear for viral gastroenteritis?

- A. 1 to 2 days**
- B. 3 to 6 days
- C. 1 week
- D. 2 weeks

Viral gastroenteritis, often caused by viruses such as norovirus or rotavirus, typically results in symptoms appearing within a short incubation period following exposure. For most viral infections leading to gastroenteritis, symptoms commonly develop within 1 to 2 days. This rapid onset is linked to the nature of the viruses, which can multiply quickly in the gastrointestinal tract after entry. The relatively short incubation period is a crucial aspect of viral gastroenteritis, as it leads to quick spread within communities, particularly in settings like schools or nursing homes where people are in close contact. Understanding this timeframe helps in both anticipating outbreaks and implementing timely public health measures to control transmission. Longer incubation periods, such as those listed in the other options, are not typical for these specific viruses associated with gastroenteritis. Thus, the correct answer reflects the expected timeline of symptom onset following exposure to the causative agents of viral gastroenteritis.

9. When should peak blood samples for antibiotic levels be obtained from a client receiving IVPB?

- A. Immediately after administration**
- B. Between 30 and 60 minutes after the IVPB**
- C. One hour after the IVPB finishes**
- D. Two hours after infusion starts**

The optimal timing for obtaining peak blood samples for antibiotic levels after administering intravenous piggyback (IVPB) medication is crucial for effective monitoring of drug concentrations in the patient's system. The correct time frame is between 30 and 60 minutes after the IVPB is completed. This timing allows for the assessment of the peak concentration of the antibiotic in the bloodstream, which occurs shortly after the infusion is administered. Collecting samples too soon, such as immediately after administration, could yield inaccurate results because the medication may not have fully entered the systemic circulation yet. Waiting until one hour after the IVPB finishes could miss the true peak level, particularly if the drug reaches its maximum concentration quickly. Additionally, waiting two hours after infusion starts can result in levels that have already begun to decline, providing data that reflects a sub-therapeutic condition rather than peak efficacy. Therefore, timing the blood sample collection within the 30 to 60-minute window post-infusion aligns with pharmacokinetic principles, ensuring that peak levels are accurately measured and that the effectiveness of the antibiotic therapy can be appropriately evaluated.

10. When a diagnosis of chickenpox is made, what type of precautions should the client be placed under?

- A. Contact precautions**
- B. Droplet precautions**
- C. Airborne precautions**
- D. Universal precautions**

When a diagnosis of chickenpox is made, the appropriate type of precautions to implement are airborne precautions. Chickenpox, caused by the varicella-zoster virus, is highly contagious and can be transmitted through the air via respiratory droplets. These droplets can remain suspended in the air and can be inhaled by individuals who are in the vicinity of an infected person, even after the person has left the area. Airborne precautions are designed to prevent the spread of infections that are transmitted through the air, requiring the use of a special mask (such as an N95 respirator) for healthcare workers and ensuring that the infected individual is placed in a negative pressure room to minimize air contamination. This is crucial because even a brief exposure to someone with chickenpox can lead to infection in those who are not immune. While contact precautions and droplet precautions may be used for other infections, they do not adequately address the airborne transmission nature of chickenpox. Universal precautions are more general and may not specifically account for the respiratory spread of airborne infections. Therefore, airborne precautions are the appropriate and effective means of preventing further transmission of chickenpox in healthcare settings.