

FITZGERALD NURSE PRACTITIONER (NP) PRE-TEST PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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. When advising a patient to prevent migraines, which method does the NP recommend?**
 - A. Switching to a non-hormonal contraceptive
 - B. Initiate oral triptan therapy
 - C. Initiate NSAID therapy
 - D. Initiate promethazine therapy
- 2. Which of the following is a characteristic consistent with delirium?**
 - A. Insidious onset
 - B. Can be triggered by infection
 - C. Strong genetic factor
 - D. Cognitive dysfunction is often irreversible
- 3. What should be monitored in patients on statin therapy?**
 - A. Liver function tests and lipid levels
 - B. Kidney function and electrolyte levels
 - C. Cardiac enzymes and blood pressure
 - D. Blood glucose levels and body weight
- 4. Which medication could potentially prevent heart failure in a patient with type 2 diabetes?**
 - A. Beta blocker
 - B. Thiazide diuretic
 - C. Calcium channel blocker
 - D. ACE inhibitor or ARB
- 5. Which vaccination is contraindicated in pregnancy?**
 - A. Live attenuated vaccines, such as the MMR vaccine
 - B. Inactivated vaccines, such as the flu vaccine
 - C. Subunit vaccines, such as the HPV vaccine
 - D. mRNA vaccines, such as the COVID-19 vaccine

- 6. A patient shows symptoms characteristic of diabetes. Which of the following would be considered a significant finding?**
- A. Weight gain with increased appetite
 - B. High fasting blood glucose levels
 - C. Low blood pressure
 - D. Acute weight loss with a normal appetite
- 7. What is a significant warning associated with isotretinoin use?**
- A. Risk of liver damage
 - B. Need for drug interaction monitoring
 - C. Potential for mood disorders
 - D. Risk of gastrointestinal issues
- 8. A 27-year-old woman presents with painful urination and vaginal itching. What is the most likely diagnosis based on her examination findings?**
- A. Candidiasis
 - B. Bacterial vaginosis
 - C. Trichomoniasis
 - D. Primary syphilis
- 9. What is a common symptom of hypothyroidism?**
- A. Excessive sweating
 - B. Tachycardia
 - C. Fatigue
 - D. Weight loss
- 10. What adverse effect should the NP monitor for when a DHP calcium channel blocker is added to a patient's hypertension regimen?**
- A. Flushing
 - B. Peripheral edema
 - C. Hypokalemia
 - D. Hyperglycemia

Answers

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

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Explanations

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1. When advising a patient to prevent migraines, which method does the NP recommend?

- A. Switching to a non-hormonal contraceptive**
- B. Initiate oral triptan therapy
- C. Initiate NSAID therapy
- D. Initiate promethazine therapy

The recommendation to switch to a non-hormonal contraceptive is grounded in the understanding of how hormonal fluctuations can trigger migraines in certain patients. Hormonal contraceptives that contain estrogen can exacerbate migraine symptoms or even lead to the onset of migraines in individuals who might be sensitive to those hormones. By transitioning to a non-hormonal contraceptive method, the patient may reduce the frequency and severity of their migraines, as they eliminate the hormonal fluctuations that can act as triggers. This understanding is critical as it helps practitioners tailor preventive strategies to the individual needs of patients who experience migraines. Patients often report a clearer derivative of their headaches in relation to hormonal changes, thus making this recommendation a sensible and evidence-based approach for migraine prevention.

2. Which of the following is a characteristic consistent with delirium?

- A. Insidious onset
- B. Can be triggered by infection**
- C. Strong genetic factor
- D. Cognitive dysfunction is often irreversible

Delirium is an acute, fluctuating change in mental status that is often triggered by a precipitating factor such as infection, surgery, or drug use. This characteristic is significant because delirium can develop rapidly, sometimes within hours, highlighting the need to identify and address the underlying causes promptly. In contrast, insidious onset is more characteristic of other cognitive disorders, such as dementia, where symptoms develop gradually over time. The presence of strong genetic factors is more relevant in chronic conditions like Alzheimer's disease rather than in acute, reversible states of delirium. Cognitive dysfunction associated with delirium is typically reversible once the underlying cause is addressed, distinguishing it from conditions where cognitive impairment may worsen or become permanent. Recognizing that infection can trigger delirium is crucial for effective management and treatment.

3. What should be monitored in patients on statin therapy?

- A. Liver function tests and lipid levels**
- B. Kidney function and electrolyte levels
- C. Cardiac enzymes and blood pressure
- D. Blood glucose levels and body weight

Monitoring liver function tests and lipid levels in patients on statin therapy is essential for several reasons. Statins are primarily prescribed to manage dyslipidemia, particularly elevated LDL cholesterol levels, and therefore, regular assessment of lipid levels is crucial to evaluate the effectiveness of the treatment. Achieving targeted lipid levels helps in reducing the risk of cardiovascular events. Liver function tests are monitored because statins can potentially cause liver enzyme elevations in some patients. While significant liver damage is rare, it is important to identify any abnormalities early on to ensure patient safety. Routine monitoring can help detect any adverse effects related to liver function, allowing for timely interventions, such as dosage adjustments or discontinuation of the medication if necessary. Overall, the combination of monitoring both liver function tests and lipid levels ensures that the patient is receiving the benefits of statin therapy while minimizing risks.

4. Which medication could potentially prevent heart failure in a patient with type 2 diabetes?

- A. Beta blocker
- B. Thiazide diuretic
- C. Calcium channel blocker
- D. ACE inhibitor or ARB**

In patients with type 2 diabetes, utilizing an ACE inhibitor or an angiotensin receptor blocker (ARB) has shown significant benefits in preventing heart failure. These medications play a crucial role in managing hypertension, reducing proteinuria, and offering cardioprotective effects. In diabetic patients, there is often a concomitant risk for cardiovascular diseases, including heart failure, which is partly due to the adverse effects of hyperglycemia and insulin resistance on heart health. ACE inhibitors and ARBs work by inhibiting the renin-angiotensin-aldosterone system (RAAS), leading to vasodilation and reducing the workload on the heart. This mechanism is particularly beneficial in patients with diabetes, as they often have alterations in blood flow and pressure regulation, increasing their risk for heart failure. The use of these medications not only helps to manage blood pressure but also has a protective effect on the heart muscle itself, which is essential in preventing the progression toward heart failure. The other options, while they have their own therapeutic roles, do not offer the same level of evidence or specific benefits for heart failure prevention in this population. Beta blockers are primarily used for managing hypertension and controlling heart rate but do not have the same strong evidence for heart failure prevention in diabetic

5. Which vaccination is contraindicated in pregnancy?

- A. Live attenuated vaccines, such as the MMR vaccine**
- B. Inactivated vaccines, such as the flu vaccine
- C. Subunit vaccines, such as the HPV vaccine
- D. mRNA vaccines, such as the COVID-19 vaccine

The correct choice pertains to live attenuated vaccines, such as the MMR (measles, mumps, and rubella) vaccine, which are contraindicated in pregnancy. Live attenuated vaccines contain a weakened form of the virus, which can pose risks to the developing fetus. In particular, rubella infection during pregnancy can result in serious congenital malformations known as congenital rubella syndrome. Therefore, it is crucial to avoid administering live attenuated vaccines to pregnant individuals to prevent possible adverse outcomes for the fetus. In contrast, inactivated vaccines, like the flu vaccine, have been shown to be safe during pregnancy because they do not contain live pathogens and therefore cannot cause disease. Subunit vaccines, such as the HPV vaccine, similarly do not contain live components and are considered safe. mRNA vaccines, like those developed for COVID-19, have also been determined to be safe for pregnant individuals after thorough research and data collection on their effects during pregnancy.

6. A patient shows symptoms characteristic of diabetes. Which of the following would be considered a significant finding?

- A. Weight gain with increased appetite
- B. High fasting blood glucose levels**
- C. Low blood pressure
- D. Acute weight loss with a normal appetite

High fasting blood glucose levels is a significant finding in a patient showing symptoms characteristic of diabetes. Elevated fasting blood glucose is a key diagnostic criterion for diabetes mellitus. According to the American Diabetes Association, a fasting blood glucose level of 126 mg/dL or higher is indicative of diabetes. This abnormal increase in blood glucose levels occurs due to inadequate insulin secretion, insulin resistance, or both, which are central issues in diabetes. Identifying high fasting blood glucose levels allows healthcare providers to confirm a diagnosis of diabetes and begin appropriate management strategies. Early detection is vital to prevent complications associated with prolonged elevations in blood sugar, including cardiovascular diseases, neuropathy, nephropathy, and retinopathy. Other findings, such as weight gain with increased appetite or acute weight loss with a normal appetite, may be observed in different contexts or types of diabetes but are not as definitive for diagnosing the condition as high fasting blood glucose levels. Low blood pressure can be seen in various other health conditions and does not specifically relate to diabetes diagnosis or management.

7. What is a significant warning associated with isotretinoin use?

- A. Risk of liver damage
- B. Need for drug interaction monitoring
- C. Potential for mood disorders**
- D. Risk of gastrointestinal issues

Isotretinoin, a medication primarily used to treat severe acne, is known for its significant impact on mood and mental health. The connection between isotretinoin and mood disorders, including depression and suicidal ideation, has been a topic of extensive research and concern. This medication affects serotonin levels in the brain, which can influence mood and emotional well-being. As a result, it's crucial for healthcare providers to monitor patients closely for any changes in mood or behavior while they are on this treatment. Additionally, patients are often advised to report any feelings of depression or anxiety during their course of isotretinoin therapy. This heightened awareness allows for early intervention and appropriate management of any mental health concerns that may arise. While isotretinoin does carry risks of other complications, such as liver damage, gastrointestinal issues, and the need for monitoring drug interactions, the association with mood disorders is particularly significant due to its potential impact on the patient's overall well-being and safety. Therefore, this aspect of isotretinoin use emphasizes the importance of mental health monitoring during treatment.

8. A 27-year-old woman presents with painful urination and vaginal itching. What is the most likely diagnosis based on her examination findings?

- A. Candidiasis
- B. Bacterial vaginosis
- C. Trichomoniasis**
- D. Primary syphilis

The presentation of painful urination and vaginal itching in a 27-year-old woman is most indicative of Trichomoniasis. This sexually transmitted infection, caused by the protozoan Trichomonas vaginalis, commonly leads to symptoms that include vaginal itching, irritation, and discomfort during urination. Patients may also experience a frothy, yellow-green vaginal discharge, which can further support the diagnosis. The selected answer aligns with the clinical symptoms presented, as both painful urination and itching are characteristic of this infection. Quick identification and treatment are essential, as Trichomoniasis can have implications for reproductive health and can increase the risk of acquiring other sexually transmitted infections. In contrast, while candidiasis can cause itching and discomfort, it typically presents with a thick, white discharge and does not usually result in painful urination to the same degree. Bacterial vaginosis, on the other hand, may present with a fishy odor and is not generally associated with intense itching or pain during urination. Primary syphilis is characterized by a painless ulcer and does not typically include these specific urinary symptoms. Thus, the symptoms and presentation strongly support Trichomoniasis as the most likely diagnosis in this scenario.

9. What is a common symptom of hypothyroidism?

- A. Excessive sweating
- B. Tachycardia
- C. Fatigue**
- D. Weight loss

Fatigue is a common symptom of hypothyroidism due to the decrease in metabolic processes caused by insufficient thyroid hormone levels. The thyroid hormones, primarily thyroxine (T4) and triiodothyronine (T3), play a crucial role in regulating metabolism and energy production in the body. When these hormone levels are low, it can lead to a general feeling of tiredness or sluggishness, often described as fatigue. This symptom can affect various aspects of daily life, including physical activity and cognitive function, leading to a significant impact on a patient's quality of life. The other symptoms such as excessive sweating, tachycardia, and weight loss, are typically associated with hyperthyroidism, where an overproduction of thyroid hormones results in increased metabolic activity. Understanding these distinctions is key in diagnosing thyroid-related disorders effectively.

10. What adverse effect should the NP monitor for when a DHP calcium channel blocker is added to a patient's hypertension regimen?

- A. Flushing
- B. Peripheral edema**
- C. Hypokalemia
- D. Hyperglycemia

When a dihydropyridine (DHP) calcium channel blocker is added to a patient's hypertension regimen, one of the significant adverse effects to monitor for is peripheral edema. DHP calcium channel blockers work by causing vasodilation, which can lead to an accumulation of fluid in the extremities, particularly the ankles and feet. This peripheral edema occurs because these medications can disrupt the balance of fluids in the tissues, especially when used at higher doses. While other adverse effects like flushing, hypokalemia, and hyperglycemia can occur with different classes of medications or in specific circumstances, they are not the primary concerns with DHP calcium channel blockers. Flushing is generally associated with non-dihydropyridine calcium channel blockers, and hypokalemia is more common with thiazide diuretics rather than DHPs. Hyperglycemia can be a concern with certain antihypertensives, but again, it is not a direct effect of DHP calcium channel blockers, making peripheral edema the most relevant and common adverse effect to monitor.

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://fitzgeraldnppretest.examzify.com>

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

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