

NURSING CARE FOR DISORDERS OF THE ENDOCRINE AND EXOCRINE SYSTEMS (NDEE) PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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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. Which hormone is crucial for stress response and metabolism?**
 - A. Cortisol
 - B. Thyroxine
 - C. Insulin
 - D. Melatonin

- 2. Which condition should the nurse be aware of that is associated with the syndrome of inappropriate secretion of ADH (SIADH)?**
 - A. Hypertension
 - B. Hyponatremia
 - C. Fluid retention
 - D. Diabetes Mellitus

- 3. Which gland is responsible for the production of insulin?**
 - A. Thyroid gland
 - B. Adrenal gland
 - C. Pancreas
 - D. Pituitary gland

- 4. What is the primary cause of type 1 diabetes mellitus?**
 - A. Poor dietary choices
 - B. Autoimmune destruction of pancreatic beta cells
 - C. Insulin resistance
 - D. Obesity

- 5. What hormonal imbalance is commonly associated with polycystic ovary syndrome (PCOS)?**
 - A. Elevated cortisol levels
 - B. Imbalanced thyroid hormones
 - C. Elevated androgens
 - D. Decreased insulin sensitivity

- 6. Which sign indicates potential respiratory obstruction in a client with upper body burns?**
- A. Deep breathing.
 - B. Hoarse quality of voice.
 - C. Pink-tinged frothy sputum.
 - D. Rapid abdominal breathing.
- 7. What medication class is commonly used to treat hypothyroidism?**
- A. Corticosteroids
 - B. Thyroid hormone replacement therapy
 - C. Beta-blockers
 - D. Insulin therapy
- 8. What is erythropoietin and its role in the body?**
- A. A hormone that inhibits red blood cell production
 - B. A hormone that activates white blood cell production
 - C. A hormone produced by the kidneys that stimulates red blood cell production
 - D. A hormone that regulates blood pressure
- 9. What is the primary cause of diabetes insipidus?**
- A. Excess production of insulin
 - B. Deficiency of antidiuretic hormone (ADH)
 - C. An overactive thyroid gland
 - D. Insulin resistance
- 10. What is the primary function of insulin in the body?**
- A. Regulates blood pressure
 - B. Facilitates the uptake of glucose into cells
 - C. Stimulates the production of red blood cells
 - D. Enhances nutrient absorption in the intestines

Answers

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

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Explanations

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1. Which hormone is crucial for stress response and metabolism?

- A. Cortisol**
- B. Thyroxine
- C. Insulin
- D. Melatonin

Cortisol is a key hormone produced by the adrenal glands in response to stress. It plays a vital role in the body's stress response mechanism, often referred to as the "fight or flight" response. When an individual experiences stress, cortisol helps to mobilize energy reserves by increasing glucose availability in the bloodstream and ensuring that vital functions can continue. In addition to its role in stress management, cortisol is essential for regulating metabolism. It helps control the use of fats, proteins, and carbohydrates for energy, ensuring that the body can adapt to fluctuating energy demands. Elevated cortisol levels can lead to increased metabolism of proteins and fats, making it critical in maintaining energy balance during stressful situations. Other hormones listed have distinct functions but do not primarily focus on the stress response or the overall metabolic control in the same comprehensive manner as cortisol. Thyroxine mainly regulates metabolism in a more steady-state condition rather than in acute stress, insulin primarily governs blood sugar levels rather than stress responses, and melatonin is primarily involved in regulating sleep cycles. Thus, cortisol stands out as the most crucial hormone for managing the body's immediate response to stress and its metabolic processes.

2. Which condition should the nurse be aware of that is associated with the syndrome of inappropriate secretion of ADH (SIADH)?

- A. Hypertension
- B. Hypernatremia
- C. Fluid retention**
- D. Diabetes Mellitus

The correct choice is fluid retention, which is a key characteristic of the syndrome of inappropriate secretion of ADH (SIADH). In SIADH, the body produces excessive amounts of antidiuretic hormone (ADH), which leads to an abnormal retention of water in the body. This results in dilutional hyponatremia, where sodium levels in the blood become low due to the excess fluid. The retained fluid causes an increase in total body water, which can manifest as edema and can affect various organ systems. Fluid retention in SIADH can lead to symptoms such as weight gain, decreased urine output, and potential swelling due to increased intravascular and interstitial fluid. Recognizing fluid retention is critical for nurses because it can help in monitoring the patient's status and guiding treatment interventions, such as fluid restriction and potential medication adjustments. While hypertension may be a complicating factor in some scenarios, it does not directly describe a core effect of SIADH. Hypernatremia, on the other hand, would indicate a lack of water retention and is not associated with SIADH. Diabetes Mellitus is a separate endocrine disorder and is not directly linked to the mechanisms underlying SIADH. Understanding these distinctions is crucial for proper nursing

3. Which gland is responsible for the production of insulin?

- A. Thyroid gland
- B. Adrenal gland
- C. Pancreas**
- D. Pituitary gland

The pancreas is the gland responsible for the production of insulin, which is a crucial hormone that regulates blood sugar levels in the body. Insulin is produced by the beta cells in the islets of Langerhans within the pancreas. When food is consumed, especially carbohydrates, the pancreas detects an increase in blood glucose levels and responds by releasing insulin. Insulin facilitates the uptake of glucose by body cells, allowing them to use it for energy or store it for future use. This process is essential for maintaining normal blood sugar levels and overall metabolic homeostasis. The other glands listed have distinct functions: the thyroid gland primarily regulates metabolism and growth through hormones like thyroxine; the adrenal gland produces hormones like cortisol and adrenaline, which are involved in stress response; and the pituitary gland, often referred to as the "master gland," regulates various endocrine functions but does not produce insulin. Understanding the specific roles of each gland helps clarify their importance in the endocrine system and highlights the unique role of the pancreas in glucose metabolism.

4. What is the primary cause of type 1 diabetes mellitus?

- A. Poor dietary choices
- B. Autoimmune destruction of pancreatic beta cells**
- C. Insulin resistance
- D. Obesity

The primary cause of type 1 diabetes mellitus is the autoimmune destruction of pancreatic beta cells. In type 1 diabetes, the immune system mistakenly attacks and destroys these insulin-producing cells in the pancreas. As a result, the body is unable to produce sufficient insulin, leading to elevated blood glucose levels. This condition typically arises in childhood or adolescence, although it can occur at any age. This autoimmune response can be triggered by various factors, including genetic predispositions and possible environmental factors, although the exact cause of the immune system's attack is not fully understood. In contrast, options related to dietary choices, insulin resistance, and obesity are more closely related to type 2 diabetes mellitus, where insulin resistance plays a crucial role. Understanding the distinction between type 1 and type 2 diabetes is essential for appropriate diagnosis and management.

5. What hormonal imbalance is commonly associated with polycystic ovary syndrome (PCOS)?

- A. Elevated cortisol levels
- B. Imbalanced thyroid hormones
- C. Elevated androgens**
- D. Decreased insulin sensitivity

Polycystic ovary syndrome (PCOS) is characterized by a hormonal disorder that significantly affects women of reproductive age. One of the hallmark features of PCOS is the presence of elevated androgens, which are male hormones that are produced in higher amounts by women with this condition. Elevated levels of androgens can lead to various symptoms, including irregular menstrual cycles, hirsutism (excess hair growth), acne, and weight gain. The hormonal imbalance in PCOS primarily indicates that the ovaries produce excessive amounts of androgens, contributing to the development of ovarian cysts and impacting ovulation. Recognizing elevated androgens is crucial for diagnosis and management, as addressing these hormone levels can alleviate many symptoms associated with PCOS. Although conditions like elevated cortisol levels, imbalanced thyroid hormones, and decreased insulin sensitivity may also impact hormonal health, they are not central to the defining symptoms of PCOS. Instead, the elevated androgens are pivotal in understanding the pathophysiology of the syndrome and guiding treatment approaches.

6. Which sign indicates potential respiratory obstruction in a client with upper body burns?

- A. Deep breathing.
- B. Hoarse quality of voice.**
- C. Pink-tinged frothy sputum.
- D. Rapid abdominal breathing.

In clients with upper body burns, a hoarse quality of voice is a significant sign that may indicate potential respiratory obstruction. This occurs because burns can lead to swelling and damage to the airway structures, which includes the larynx and vocal cords. A hoarse voice can result from inflammation or injury in this area, suggesting that the airway may be compromised or at risk of obstruction. The presence of a hoarse voice should raise immediate concern for airway management, as it often signals that the airway may be narrowing or that there could be impending obstruction, thus requiring prompt assessment and intervention. This is critical in burn patients, especially if facial or neck areas are involved, as the consequent edema can lead to life-threatening complications. Other signs, such as deep breathing and rapid abdominal breathing, may occur for various reasons unrelated to airway obstruction and do not specifically indicate impending airway issues. Pink-tinged frothy sputum generally relates more to pulmonary edema or bleeding rather than direct obstruction, making the hoarse voice a more direct indicator of potential respiratory complications.

7. What medication class is commonly used to treat hypothyroidism?

- A. Corticosteroids
- B. Thyroid hormone replacement therapy**
- C. Beta-blockers
- D. Insulin therapy

Thyroid hormone replacement therapy is the standard treatment for hypothyroidism. This condition occurs when the thyroid gland does not produce enough thyroid hormones, which are crucial for regulating metabolism, energy generation, and overall hormonal balance in the body. The goal of treatment is to restore normal hormone levels, and this is typically achieved through medications such as levothyroxine, which is a synthetic form of thyroxine (T4), one of the hormones normally produced by the thyroid gland. By administering thyroid hormone replacement therapy, patients can alleviate symptoms associated with hypothyroidism, such as fatigue, weight gain, and depression, and improve their quality of life. The therapy is monitored regularly through blood tests to ensure that hormone levels remain within a target range, thus maintaining proper bodily functions.

8. What is erythropoietin and its role in the body?

- A. A hormone that inhibits red blood cell production
- B. A hormone that activates white blood cell production
- C. A hormone produced by the kidneys that stimulates red blood cell production**
- D. A hormone that regulates blood pressure

Erythropoietin is a hormone produced primarily by the kidneys that plays a crucial role in the regulation of red blood cell production, a process known as erythropoiesis. When oxygen levels in the blood are low, the kidneys release erythropoietin into the bloodstream. This hormone acts on the bone marrow, stimulating it to increase the production of red blood cells, which are essential for transporting oxygen throughout the body. By enhancing the production of red blood cells, erythropoietin helps to improve oxygen delivery to tissues and organs, which is vital for maintaining overall body function, especially in conditions that may result in anemia or decreased oxygen availability. This process helps to ensure that the body's tissues receive adequate oxygen, thus supporting metabolic activities and overall health. Other choices, such as those suggesting erythropoietin inhibits red blood cell production or that it activates white blood cell production or regulates blood pressure, misrepresent its primary function. Erythropoietin specifically targets red blood cell formation, making choice C the accurate reflection of its role in the body.

9. What is the primary cause of diabetes insipidus?

- A. Excess production of insulin
- B. Deficiency of antidiuretic hormone (ADH)**
- C. An overactive thyroid gland
- D. Insulin resistance

The primary cause of diabetes insipidus is a deficiency of antidiuretic hormone (ADH), also known as vasopressin. ADH is a hormone produced by the hypothalamus and stored in the posterior pituitary gland. Its main role is to regulate water balance in the body by promoting water reabsorption in the kidneys. When there is a deficiency of ADH, the kidneys cannot reabsorb enough water, leading to the excretion of large volumes of dilute urine. This condition can result in increased thirst (polydipsia) as the body attempts to compensate for the fluid loss. Other options such as excess insulin production, an overactive thyroid, and insulin resistance pertain to different endocrine disorders and do not relate to the mechanisms or causes of diabetes insipidus. Understanding the role of ADH is key in recognizing how its deficiency leads to the symptoms associated with this condition.

10. What is the primary function of insulin in the body?

- A. Regulates blood pressure
- B. Facilitates the uptake of glucose into cells**
- C. Stimulates the production of red blood cells
- D. Enhances nutrient absorption in the intestines

The primary function of insulin in the body is to facilitate the uptake of glucose into cells. Insulin is a hormone produced by the pancreas that plays a crucial role in glucose metabolism. When you consume food, especially carbohydrates, your blood glucose levels rise. In response, the pancreas releases insulin, which allows glucose to enter the body's cells, where it can be used for energy or stored for later use. This process is essential for maintaining normal blood sugar levels and overall energy balance in the body. The other options, while relating to important physiological processes, do not accurately describe the specific function of insulin. For example, regulating blood pressure involves different hormones and mechanisms and is not a direct role of insulin. Similarly, stimulating the production of red blood cells is primarily the function of erythropoietin, not insulin, and nutrient absorption in the intestines is influenced by various digestive hormones and enzymes, but is not directly linked to insulin's primary role. Thus, the correct answer reflects insulin's fundamental impact on glucose metabolism and overall energy regulation in the body.

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://ndeeendocrineexocrine.examzify.com>

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

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