

# Relias Hypertension Practice Test (Sample)

## Study Guide



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**SAMPLE**

## Questions

SAMPLE

- 1. How do beta-blockers primarily help manage hypertension?**
  - A. By increasing heart rate**
  - B. By lowering blood volume**
  - C. By reducing heart rate and workload**
  - D. By dilating blood vessels**
  
- 2. Which factor can influence both systolic and diastolic blood pressure?**
  - A. Body temperature**
  - B. Physical activity**
  - C. Height**
  - D. Dietary calcium intake**
  
- 3. What is a contraindication to expectant management of preeclampsia with severe features?**
  - A. Severe headache**
  - B. Gestational diabetes**
  - C. Uncontrollable hypertension**
  - D. Low birth weight**
  
- 4. What effect might the use of a large cuff have during blood pressure readings?**
  - A. Higher blood pressure readings**
  - B. Lower blood pressure readings**
  - C. No effect on readings**
  - D. Irregular heart rate**
  
- 5. What is the likely diagnosis for a patient with chronic hypertension and serum creatinine of 1.3?**
  - A. HELLP syndrome**
  - B. Chronic hypertension with superimposed preeclampsia**
  - C. Worsening severe chronic hypertension**
  - D. Severe gestational hypertension**

- 6. Which dietary change is effective in lowering blood pressure for many patients?**
- A. Increasing sugar intake**
  - B. Reducing sodium intake**
  - C. Eating more processed foods**
  - D. Increasing caffeine consumption**
- 7. What can lead to the development of hypertension besides hereditary factors?**
- A. Consistent exercise**
  - B. Chronic stress and unhealthy habits**
  - C. Regular sleep patterns**
  - D. Low sodium diet**
- 8. What is the significance of the 140/90 mmHg threshold in hypertension?**
- A. It is used to diagnose diabetes**
  - B. It guides treatment decisions in adults**
  - C. It indicates the ideal blood pressure**
  - D. It refers to emergency care parameters**
- 9. If a pregnant woman presents with nausea and normal blood pressure, what should be considered about her condition?**
- A. She is likely experiencing a common illness unrelated to pregnancy**
  - B. Preeclamptic symptoms are still looming**
  - C. Her nausea may indicate severe preeclampsia**
  - D. The situation requires urgent intervention**
- 10. How does chronic stress affect blood pressure?**
- A. It decreases blood pressure**
  - B. It has no effect on blood pressure**
  - C. It may contribute to elevated blood pressure**
  - D. It temporarily lowers blood pressure**

## **Answers**

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

SAMPLE

## **Explanations**

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## 1. How do beta-blockers primarily help manage hypertension?

- A. By increasing heart rate
- B. By lowering blood volume
- C. By reducing heart rate and workload**
- D. By dilating blood vessels

Beta-blockers primarily help manage hypertension by reducing heart rate and workload on the heart. They achieve this by blocking the effects of adrenaline (epinephrine) on beta-adrenergic receptors, which leads to a decrease in heart rate and myocardial contractility. This reduction in heart rate results in lower cardiac output, which is beneficial for controlling high blood pressure. Additionally, by decreasing the workload of the heart, beta-blockers help prevent complications associated with chronic hypertension, such as heart failure and coronary artery disease. While effectiveness in regulating blood volume and blood vessel dilation can influence overall blood pressure, these mechanisms are not the primary actions of beta-blockers. Instead, beta-blockers specifically target the cardiovascular responses to stress hormones, which directly impacts heart rate and workload.

## 2. Which factor can influence both systolic and diastolic blood pressure?

- A. Body temperature
- B. Physical activity**
- C. Height
- D. Dietary calcium intake

Physical activity is a significant factor that can influence both systolic and diastolic blood pressure. When individuals engage in physical exercise, the body requires more oxygen, leading to an increase in heart rate and cardiac output. As a result, systolic blood pressure typically rises during physical activity to accommodate the increased blood flow. On the other hand, regular physical activity has been shown to contribute to lower resting blood pressure levels over time, affecting both systolic and diastolic pressures positively by enhancing vascular health, improving endothelial function, and reducing peripheral resistance. Other options may have varying levels of influence on blood pressure, but physical activity uniquely impacts both readings during exercise and over the long term with consistent engagement in fitness routines. Understanding this relationship is essential for managing hypertension, as promoting regular physical activity is often recommended in treatment plans.

### 3. What is a contraindication to expectant management of preeclampsia with severe features?

- A. Severe headache
- B. Gestational diabetes
- C. Uncontrollable hypertension**
- D. Low birth weight

Expectant management of preeclampsia with severe features involves closely monitoring the mother and fetus while delaying delivery as long as it is safe to do so. However, uncontrollable hypertension is a key contraindication to this approach. When blood pressure remains excessively high despite treatment, it significantly increases the risk of serious complications for both the mother and the fetus, including stroke or placental abruption. Therefore, if hypertension cannot be managed effectively, the risks associated with continuing the pregnancy outweigh the benefits of expectant management, necessitating timely delivery to safeguard the health of both the mother and the baby. The other options, while they may indicate concerns in the management of preeclampsia, do not represent absolute contraindications to expectant management. Severe headache can be a symptom of worsening preeclampsia that requires evaluation but is not solely a contraindication. Gestational diabetes is a separate condition that can complicate pregnancy but is not a direct contraindication to expectant management of preeclampsia. Low birth weight is also not a definitive reason to avoid expectant management, as outcomes can vary, and every effort is often made to prolong gestation if possible while managing the associated risks.

### 4. What effect might the use of a large cuff have during blood pressure readings?

- A. Higher blood pressure readings
- B. Lower blood pressure readings**
- C. No effect on readings
- D. Irregular heart rate

Using a large cuff for blood pressure readings can lead to lower blood pressure readings than the actual blood pressure. This is particularly important because when the cuff is too large relative to the arm's circumference, it can cause the blood pressure measurement to be inaccurate. Specifically, the extra space in the cuff can lead to an insufficient pressure being applied to fully occlude the artery, resulting in readings that underestimate the systolic and diastolic pressures. Accurate blood pressure readings are crucial for proper diagnosis and management of hypertension, and using the correct cuff size is essential to ensure that the measurements reflect the true pressure within the blood vessels. The proper cuff size should ideally cover 40% of the arm's circumference for accurate readings, while a cuff that is too large might misrepresent the actual blood pressure.

**5. What is the likely diagnosis for a patient with chronic hypertension and serum creatinine of 1.3?**

**A. HELLP syndrome**

**B. Chronic hypertension with superimposed preeclampsia**

**C. Worsening severe chronic hypertension**

**D. Severe gestational hypertension**

Chronic hypertension with superimposed preeclampsia is a diagnosis characterized by the presence of pre-existing hypertension that precedes the pregnancy and the development of new symptoms associated with preeclampsia after 20 weeks of gestation. The serum creatinine level of 1.3 indicates some level of kidney impairment, which can be aligned with the onset of preeclampsia, as it is known to affect renal function due to the involvement of vascular endothelium and increased systemic vascular resistance. The diagnosis is particularly important in the context of monitoring the health of both the mother and fetus. In preeclampsia, hypertension usually is accompanied by additional symptoms such as proteinuria or signs of end-organ dysfunction, which would be significant in a patient presenting with chronic hypertension. Therefore, the combination of chronic hypertension and an elevation in serum creatinine suggests that there may be additional complications arising from the hypertension, which is consistent with superimposed preeclampsia. This diagnosis helps guide management to mitigate risks to both the mother and the fetus.

**6. Which dietary change is effective in lowering blood pressure for many patients?**

**A. Increasing sugar intake**

**B. Reducing sodium intake**

**C. Eating more processed foods**

**D. Increasing caffeine consumption**

Reducing sodium intake is widely recognized as an effective dietary change for lowering blood pressure in many patients. High sodium levels can lead to fluid retention, which increases blood volume and subsequently raises blood pressure. Numerous studies and dietary guidelines, including those from the American Heart Association and the Dietary Approaches to Stop Hypertension (DASH) diet, emphasize the importance of minimizing sodium consumption to manage hypertension effectively. By replacing high-sodium foods with fresh fruits, vegetables, whole grains, and lean proteins, individuals can achieve better blood pressure control and overall cardiovascular health. This approach not only helps in lowering blood pressure but may also contribute to broader dietary benefits, including improved heart health and reduced risk of other chronic diseases. Therefore, focusing on reducing sodium intake is a key strategy in both prevention and management of hypertension for many patients.

**7. What can lead to the development of hypertension besides hereditary factors?**

- A. Consistent exercise**
- B. Chronic stress and unhealthy habits**
- C. Regular sleep patterns**
- D. Low sodium diet**

The development of hypertension can indeed be influenced by several factors beyond hereditary considerations. Chronic stress and unhealthy habits are significant contributors to the increase in blood pressure. Stress can provoke the body's "fight or flight" response, prompting the release of hormones like cortisol and adrenaline. This hormonal surge can lead to elevated heart rate and constriction of blood vessels, both of which can raise blood pressure. Unhealthy habits, including poor diet (such as high sodium intake), lack of physical activity, smoking, and excessive alcohol consumption, also play a critical role in increasing the risk for hypertension. These factors can create a chronic state of elevated blood pressure, adversely affecting cardiovascular health over time. In contrast, consistent exercise, regular sleep patterns, and a low sodium diet are generally associated with better cardiovascular health and are advised for individuals seeking to prevent or manage hypertension.

**8. What is the significance of the 140/90 mmHg threshold in hypertension?**

- A. It is used to diagnose diabetes**
- B. It guides treatment decisions in adults**
- C. It indicates the ideal blood pressure**
- D. It refers to emergency care parameters**

The significance of the 140/90 mmHg threshold in hypertension is that it guides treatment decisions in adults. This threshold is established by clinical guidelines as a critical point for diagnosing hypertension and determining when intervention is needed. When blood pressure readings reach or exceed this level, healthcare professionals typically consider various treatment options, including lifestyle changes and potentially medication, to manage blood pressure and reduce the risk of cardiovascular complications. This threshold is vital for establishing criteria for diagnosis and assessing the severity of hypertension. It reflects the level at which the risks associated with high blood pressure, such as heart disease, stroke, and kidney damage, begin to increase significantly. Therefore, managing blood pressure at or above this level is crucial for improving health outcomes in the adult population.

**9. If a pregnant woman presents with nausea and normal blood pressure, what should be considered about her condition?**

- A. She is likely experiencing a common illness unrelated to pregnancy**
- B. Preeclamptic symptoms are still looming**
- C. Her nausea may indicate severe preeclampsia**
- D. The situation requires urgent intervention**

In the context of a pregnant woman presenting with nausea and normal blood pressure, it is important to consider that nausea is a common symptom during pregnancy, often linked to hormonal changes or morning sickness, particularly in the first trimester. This can manifest as nausea and vomiting without any accompanying signs of complications. The correct answer highlights that her symptoms are likely indicative of a common illness that is not necessarily related to any severe condition such as preeclampsia, especially since her blood pressure is within the normal range. Preeclampsia typically presents with elevated blood pressure and additional symptoms such as proteinuria, headaches, or visual disturbances. Since the woman does not exhibit these signs and her blood pressure remains normal, it reduces the likelihood of her experiencing issues related to preeclampsia or similar severe conditions. Moreover, although nausea can sometimes relate to more serious pregnancy complications, given the absence of elevated blood pressure or other indicators, the situation does not generally require urgent intervention. Therefore, considering these aspects of her condition allows for reassurance and appropriate management without unnecessary alarm. This understanding is pivotal for prenatal care and ensures that both the mother and baby remain healthy during pregnancy.

**10. How does chronic stress affect blood pressure?**

- A. It decreases blood pressure**
- B. It has no effect on blood pressure**
- C. It may contribute to elevated blood pressure**
- D. It temporarily lowers blood pressure**

Chronic stress can significantly contribute to elevated blood pressure due to its impact on various physiological and behavioral responses in the body. When a person experiences prolonged stress, the body's stress response activates, leading to the release of hormones such as adrenaline and cortisol. These hormones prepare the body for a "fight or flight" reaction, which includes increasing heart rate and constricting blood vessels, both of which can raise blood pressure. Additionally, chronic stress may lead to unhealthy coping mechanisms, such as poor diet or lack of exercise, which further exacerbate hypertension. Over time, these responses can lead to sustained high blood pressure, making the management of stress an important aspect of overall health and potentially lowering the risk of cardiovascular diseases. Understanding the relationship between chronic stress and blood pressure highlights why managing stress is critical for those at risk of hypertension.