# ADULT–GERONTOLOGY ACUTE CARE NURSE PRACTITIONER CERTIFICATION (AGACNP) FRANCES PRACTICE TEST (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.

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# 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!

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# Questions

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**1. What is a primary symptom of hypercalcemia due to metastatic cancer to the bones?**

A. Confusion

B. Delirium

C. Fever

D. Weight Loss

**2. Why is it important to report cases of gonorrhea to health authorities?**

A. To track medication compliance

B. To prevent outbreaks and ensure public health

C. To assess treatment effectiveness

D. To monitor insurance claims

**3. A patient has a fever, tachycardia, and elevated sodium levels. What does this suggest about their hydration status?**

A. Extracellular dehydration deficit

B. Fluid overload

C. Normal hydration status

D. Complete dehydration

**4. Which cranial nerves are classified as sensory cranial nerves?**

A. I, II, VIII (olfactory, optic, acoustic)

B. III, V, VII (oculomotor, trigeminal, facial)

C. II, IV, VI (optic, trochlear, abducens)

D. I, V, VII (olfactory, trigeminal, facial)

**5. Is the pneumonia vaccine recommended for asthmatics or smokers ages 19-64?**

A. Yes

B. No

C. Only for smokers

D. Only for asthmatics

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**6. Who is at risk for developing toxic megacolon?**

A. Patients with diverticulitis

B. Patients with ulcerative colitis

C. Both Crohn's disease and ulcerative colitis patients

D. Only those with infectious colitis

**7. If a patient believes their Medicare coverage will pay for all medical expenses, what might the nurse practitioner explain?**

A. All medical expenses are fully covered under Medicare

B. Examinations may not be covered due to their current health status

C. Emergency room visits are free regardless of situation

D. Only hospital stays are covered under Medicare

**8. Which statement is true regarding the use of antibiotics in severe colitis?**

A. Antibiotics are routinely prescribed

B. There is no role for antibiotics without systemic signs of toxicity

C. Antibiotics are not effective

D. Patients should never receive antibiotics

**9. What should be done for a patient with an inconclusive cervical spine X-ray after a hanging injury?**

A. Remove the cervical collar

B. Reassess using CT scan

C. Leave the collar on

D. Order an MRI immediately

**10. Which best describes the pathology of multiple sclerosis?**

A. Neuromuscular degeneration

B. A genetic disorder

C. An autoimmune disease attacking myelin

D. Infectious pathogen invasion

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# Answers

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

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# Explanations

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## 1. What is a primary symptom of hypercalcemia due to metastatic cancer to the bones?

A. Confusion

B. Delirium

C. Fever

D. Weight Loss

*In the context of hypercalcemia due to metastatic cancer to the bones, confusion is a primary symptom linked to the elevated calcium levels in the blood. Hypercalcemia can lead to a range of neurological symptoms, and confusion can manifest due to the effects of high calcium on the central nervous system. When calcium levels rise significantly, it can cause an alteration in mental status, including confusion and cognitive dysfunction. Additionally, hypercalcemia can present with other symptoms such as fatigue, weakness, and in more severe cases, may progress to stupor or coma. While delirium is also a manifestation of altered mental status, confusion can be considered a more fundamental symptom that often precedes or accompanies delirium in patients experiencing hypercalcemia. Recognizing confusion as a primary symptom enables healthcare providers to quickly act to address the underlying hypercalcemia and mitigate potential complications.*

## 2. Why is it important to report cases of gonorrhea to health authorities?

A. To track medication compliance

B. To prevent outbreaks and ensure public health

C. To assess treatment effectiveness

D. To monitor insurance claims

*The importance of reporting cases of gonorrhea to health authorities primarily revolves around the need to prevent outbreaks and safeguard public health. By systematically documenting and reporting incidences of gonorrhea, health officials can recognize trends, identify hotspots, and implement necessary public health interventions. This measure helps in mitigating the spread of the infection, providing resources for education and prevention strategies, and ensuring that appropriate treatment options are made available to affected populations. This approach is critical in maintaining surveillance over sexually transmitted infections (STIs) and supports broader public health initiatives aimed at reducing the incidence of diseases, ultimately contributing to the well-being of communities. Tracking gonorrhea cases facilitates timely responses, resource allocation, and potentially effective vaccination or prevention programs, thereby enhancing public health outcomes.*

## 3. A patient has a fever, tachycardia, and elevated sodium levels. What does this suggest about their hydration status?

A. Extracellular dehydration deficit

B. Fluid overload

C. Normal hydration status

D. Complete dehydration

*The indication of fever, tachycardia, and elevated sodium levels strongly suggests extracellular dehydration deficit. When the body experiences a fluid deficit, it often results in an increase in sodium concentration in the bloodstream, as there is less fluid available to dilute the sodium. The presence of tachycardia is an adaptive mechanism to maintain cardiac output as the circulation is compromised due to reduced blood volume. Additionally, fever can further increase fluid losses through perspiration and respiratory evaporation, worsening the dehydration. In this scenario, the elevated sodium coupled with symptoms like fever and increased heart rate points toward a state of dehydration, specifically a deficit in extracellular fluid. This information is crucial in guiding appropriate interventions to address the fluid imbalance, such as administering fluids or electrolytes to restore hydration and normal physiological function.*

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## 4. Which cranial nerves are classified as sensory cranial nerves?

A. I, II, VIII (olfactory, optic, acoustic)

B. III, V, VII (oculomotor, trigeminal, facial)

C. II, IV, VI (optic, trochlear, abducens)

D. I, V, VII (olfactory, trigeminal, facial)

*The classification of cranial nerves into sensory, motor, or both is based on their primary functions. In this case, the correct choice includes the olfactory nerve (I), the optic nerve (II), and the vestibulocochlear nerve (VIII), all of which are classified exclusively as sensory nerves. The olfactory nerve is responsible for the sense of smell, providing sensory input related to odor detection. The optic nerve is responsible for vision, transmitting visual information from the retina to the brain. The vestibulocochlear nerve, also known as the acoustic nerve, is involved in hearing and balance, carrying sensory information from the inner ear. In contrast, the other options either include nerves that have motor functions or include nerves that are mixed, which do not fit the criteria for sensory cranial nerves. For example, option D includes the trigeminal nerve, which has both sensory and motor components, and would not be classified strictly as a sensory nerve. Therefore, option A accurately aligns with the classification of cranial nerves solely by their sensory function.*

## 5. Is the pneumonia vaccine recommended for asthmatics or smokers ages 19-64?

A. Yes

B. No

C. Only for smokers

D. Only for asthmatics

*The recommendation for the pneumonia vaccine for individuals with asthma or those who smoke is based on the increased risk these groups have for developing pneumonia and experiencing complications from respiratory infections. Both asthma and smoking can impair lung function and reduce the immune system's ability to respond effectively to infections. Therefore, it is advisable for individuals aged 19-64 who have asthma or are smokers to receive the pneumonia vaccine. The pneumococcal vaccine helps provide protection against pneumococcal pneumonia, which can lead to severe illness, hospitalization, and is more common in individuals with compromised respiratory health. Vaccination is a critical preventive measure in these populations to reduce the incidence of pneumonia and the associated morbidity and mortality. By ensuring that both asthmatics and smokers are vaccinated, healthcare providers can significantly improve health outcomes within these at-risk groups.*

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## 6. Who is at risk for developing toxic megacolon?

A. Patients with diverticulitis

B. Patients with ulcerative colitis

C. Both Crohn's disease and ulcerative colitis patients

D. Only those with infectious colitis

*Toxic megacolon is a potentially life-threatening condition characterized by extreme dilation of the colon, often occurring as a complication of inflammatory bowel disease. Patients with ulcerative colitis are particularly at risk for developing toxic megacolon due to the nature of the disease, which leads to colonic inflammation and ulceration. In addition, patients with Crohn's disease can also develop toxic megacolon, although it is more commonly associated with ulcerative colitis. The condition arises when inflammation results in severe disruptions of normal motility and increased vulnerability to toxic bacteria, leading to colonic dilation. The inflammatory process in both ulcerative colitis and Crohn's disease can precipitate this severe dilation, making individuals with either of these diagnoses at risk. Thus, identifying that both Crohn's disease and ulcerative colitis patients can develop this condition highlights the importance of closely monitoring these populations. While diverticulitis can lead to complications, including abscesses or perforation, it is less associated with toxic megacolon. Infectious colitis can cause significant colonic inflammation but does not commonly lead to chronic conditions like those seen in ulcerative colitis or Crohn's disease. Hence, the choice that encompasses both Crohn's disease and ulcer*

## 7. If a patient believes their Medicare coverage will pay for all medical expenses, what might the nurse practitioner explain?

A. All medical expenses are fully covered under Medicare

B. Examinations may not be covered due to their current health status

C. Emergency room visits are free regardless of situation

D. Only hospital stays are covered under Medicare

*The nurse practitioner could explain that examinations or specific medical services may not be fully covered by Medicare due to the patient's current health status or the nature of the services rendered. Medicare has various coverage parts, each with its restrictions, and certain preventive or diagnostic examinations may not be included under the coverage terms if they are not deemed medically necessary, depending on the patient's health condition at that time. This nuance is essential for patients to understand so they can manage their expectations regarding their out-of-pocket expenses for healthcare services, as there may be situations where certain tests or consultations could result in costs that they would need to cover themselves. The other options do not accurately reflect the realities of Medicare coverage. For instance, stating that all medical expenses are fully covered is misleading, as Medicare has limitations and does not cover every type of service or procedure. Similarly, emergency room visits typically involve some degree of cost-sharing for patients, and Medicare does not cover only hospital stays; it provides different levels of coverage for inpatient, outpatient, and preventive services.*

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## 8. Which statement is true regarding the use of antibiotics in severe colitis?

A. Antibiotics are routinely prescribed

B. There is no role for antibiotics without systemic signs of toxicity

C. Antibiotics are not effective

D. Patients should never receive antibiotics

*The statement indicating that there is no role for antibiotics without systemic signs of toxicity accurately reflects current clinical guidelines regarding the treatment of severe colitis. In cases of severe colitis, particularly when caused by conditions like Clostridium difficile infection or inflammatory bowel disease, the use of antibiotics is typically guided by the presence of systemic signs of toxicity, such as fever, leukocytosis, and hypotension. In the absence of these signs, antibiotics may not be indicated, as they can contribute to adverse effects without clear benefits. For example, the routine use of antibiotics in colitis could potentially complicate the clinical picture or contribute to the development of antibiotic resistance. The emphasis on monitoring for systemic signs of toxicity aligns with a cautious approach to antibiotic use, ensuring that they are used judiciously and only when truly needed for patient safety and treatment efficacy. The other provided options do not accurately reflect best practices. For instance, while some cases may not require antibiotics, stating that they are never indicated does not consider situations where systemic signs of toxicity are present. Additionally, suggesting antibiotics are not effective overlooks their critical role in specific severe infections, particularly in appropriately indicated cases. Lastly, saying that they are routinely prescribed does not take into account the necessity to tailor antibiotic use to*

## 9. What should be done for a patient with an inconclusive cervical spine X-ray after a hanging injury?

A. Remove the cervical collar

B. Reassess using CT scan

C. Leave the collar on

D. Order an MRI immediately

*In the case of a patient with an inconclusive cervical spine X-ray following a hanging injury, leaving the collar on is important for maintaining spinal immobilization and protecting potential injuries. Inconclusive X-rays indicate that there might still be a risk of cervical spine trauma, even if it is not clearly visible on the imaging. Therefore, maintaining stability is crucial to prevent further damage that could occur if the cervical spine is not adequately supported. While reassessment using a CT scan is a valid approach for clearer imaging in such cases, the immediate priority must be to ensure the patient remains immobilized until definitive imaging is completed. Removing the cervical collar could expose the patient to risks associated with any undetected cervical spine injuries, leading to possible exacerbation of the condition. Ordering an MRI immediately may not be the best choice in this scenario because MRI is often used for soft tissue evaluation and is not typically the first-line imaging in acute cervical spine injury assessments, especially in unstable patients. Moreover, urgent non-invasive methods like CT scans generally provide more timely and relevant information in trauma situations. In summary, leaving the cervical collar on ensures safety and stabilization while further evaluations are planned, making it the most advisable action in this scenario.*

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## 10. Which best describes the pathology of multiple sclerosis?

A. Neuromuscular degeneration

B. A genetic disorder

C. An autoimmune disease attacking myelin

D. Infectious pathogen invasion

*Multiple sclerosis (MS) is primarily characterized as an autoimmune disease in which the immune system mistakenly attacks the central nervous system, specifically targeting the myelin sheath that insulates nerve fibers. This immune-mediated attack leads to inflammation and damage, disrupting communication between the brain and the rest of the body. The destruction of myelin results in the formation of scar tissue, or sclerosis, which is where the disease derives its name. Understanding the underlying pathology of MS is crucial as it highlights the importance of immune system regulation and the neurodegenerative consequences that can arise from autoimmune responses. This explanation helps clarify why diagnosing and managing MS involves strategies aimed at modulating the immune response and protecting the integrity of myelin. In contrast, the other options do not accurately describe the pathology of MS. Neuromuscular degeneration pertains to disorders that primarily affect the connections between nerves and muscles, rather than the central nervous system itself. While genetics may play a role in susceptibility to MS, labeling it a genetic disorder oversimplifies the multifactorial nature of the disease; environmental factors and immune responses are also significant. Lastly, MS is not caused by an infectious pathogen invasion; while infections can trigger exacerbations, they do not define the pathology of the disorder.*

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# 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:

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

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