KAPLAN PHARMACOLOGY INTEGRATED PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://kaplanpharmacologyintegr.examzify.com

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright 1

Table of Contents 2

Introduction 3

How to Use This Guide 4

Questions 5

Answers 8

Explanations 10

Next Steps 16

SAMPLE

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.

SAMPLE

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!

SAMPLE

Questions

SAMPLE

1. Which finding indicates a complication of long-term prednisone therapy?

A. Fatigue and insomnia

B. Weight gain and fluid retention

C. Black, tarry stools

D. Skin rashes and acne

2. A client with systemic lupus erythematosus (SLE) has been on corticosteroid therapy for several years. What clinical manifestations is the client at high risk for developing?

A. Weight loss and fever

B. Truncal obesity and purple striations on the skin

C. Joint pain and muscle weakness

D. Dry skin and hair loss

3. If a client weighs 50 kg, how many micrograms will they receive in one hour at a rate of 4 mcg/kg/min?

A. 6000 mcg

B. 12000 mcg

C. 24000 mcg

D. 18000 mcg

4. What is a major contraindication for using NSAIDs?

A. Dehydration

B. Active gastrointestinal bleeding

C. Hypertension

D. Heart failure

5. Which drug is known as a protease inhibitor used in HIV treatment?

A. Lopinavir

B. Ritonavir

C. Enfuvirtide

D. Abacavir

SAMPLE

6. Which of the following is a common side effect of bupropion?

A. Increased appetite

B. Dry mouth

C. Fatigue

D. Weight gain

7. What is the primary function of warfarin in the body?

A. It increases blood cell production

B. It blocks the formation of clotting factors in your blood

C. It promotes the absorption of calcium

D. It acts as a blood pressure stabilizer

8. Which symptom is least likely to be associated with the use of diphenhydramine?

A. Sedation

B. Dry mouth

C. Constipation

D. Increased heart rate

9. Which of the following medications is classified as a rapid-acting insulin?

A. Lantus

B. Humalog

C. Glargine

D. Levemir

10. How many drops per minute should the nurse set the IV to administer 1000 mL of 5% dextrose in 0.9% saline over 4 hours?

A. 25 drops per minute

B. 50 drops per minute

C. 63 drops per minute

D. 75 drops per minute

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Which finding indicates a complication of long-term prednisone therapy?

A. Fatigue and insomnia

B. Weight gain and fluid retention

C. Black, tarry stools

D. Skin rashes and acne

The correct answer, which indicates a complication of long-term prednisone therapy, is the presence of black, tarry stools. This finding suggests gastrointestinal (GI) bleeding, which is a serious side effect associated with corticosteroid use. Prednisone can increase the risk of peptic ulcers and gastrointestinal hemorrhage, especially when taken over an extended period. The anti-inflammatory properties of prednisone can mask symptoms of ulcers, making it crucial for patients on long-term therapy to be vigilant for signs of bleeding. In contrast, while fatigue, insomnia, weight gain, fluid retention, and skin rashes or acne are known side effects of prednisone, they do not indicate the same level of urgency or potential harm as the possibility of GI bleeding. Therefore, the presence of black, tarry stools is a more direct indication of a severe complication linked to prolonged prednisone use.

2. A client with systemic lupus erythematosus (SLE) has been on corticosteroid therapy for several years. What clinical manifestations is the client at high risk for developing?

A. Weight loss and fever

B. Truncal obesity and purple striations on the skin

C. Joint pain and muscle weakness

D. Dry skin and hair loss

The clinical manifestations associated with long-term corticosteroid therapy in a client with systemic lupus erythematosus (SLE) include truncal obesity and purple striations on the skin, also known as striae. Corticosteroids can lead to metabolic changes in the body, promoting weight gain, particularly in the trunk and abdomen, which contributes to the characteristic truncal obesity. The medication also affects skin integrity, leading to conditions such as skin atrophy and the formation of purple striae, which are indicative of rapid changes in body composition and skin stretching due to the effects of steroids. This knowledge stems from the broader understanding of how corticosteroids interact with metabolic processes, including fat distribution, skin health, and the overall stress response in the body. In individuals taking corticosteroids, these changes can manifest significantly, thereby placing them at high risk for the specific symptoms mentioned.

3. If a client weighs 50 kg, how many micrograms will they receive in one hour at a rate of 4 mcg/kg/min?

A. 6000 mcg

B. 12000 mcg

C. 24000 mcg

D. 18000 mcg

To determine the correct amount of medication the client will receive, you first need to calculate the total dosage based on the client's weight and the rate of administration. The rate of administration given is 4 micrograms (mcg) per kilogram (kg) per minute. For a client weighing 50 kg, the dosage per minute can be calculated by multiplying the weight by the rate: 4 mcg/kg/min × 50 kg = 200 mcg/min Next, to find out how much medication is administered in one hour (which is 60 minutes), you multiply the dosage per minute by the number of minutes in an hour: 200 mcg/min × 60 min = 12000 mcg Thus, the client will receive a total of 12000 micrograms in one hour at the specified rate, which confirms that option B is indeed the correct amount to be administered.

SAMPLE

4. What is a major contraindication for using NSAIDs?

A. Dehydration

B. Active gastrointestinal bleeding

C. Hypertension

D. Heart failure

A major contraindication for using NSAIDs is active gastrointestinal bleeding due to their mechanism of action. Nonsteroidal anti-inflammatory drugs inhibit the enzyme cyclooxygenase (COX), which is responsible for the production of prostaglandins. Prostaglandins play a vital role in maintaining the protective mucosal lining of the gastrointestinal tract. When NSAIDs reduce prostaglandin levels, this can lead to increased gastric acid secretion, decreased mucus production, and a higher risk of gastrointestinal mucosal injury, which may exacerbate an existing gastrointestinal bleeding condition. Therefore, administering NSAIDs in a patient with active gastrointestinal bleeding poses a significant risk of worsening the bleeding or delaying healing. In contrast, while dehydration, hypertension, and heart failure are significant considerations when prescribing medications, they are not absolute contraindications for NSAIDs. In particular, dehydration may increase the risk of side effects associated with NSAID use, but it does not preclude their use entirely. Hypertension and heart failure may necessitate careful monitoring and dose adjustments rather than a complete contraindication, as NSAIDs can contribute to fluid retention and hypertension, but they are not immediate disqualifiers for use like active gastrointestinal bleeding.

5. Which drug is known as a protease inhibitor used in HIV treatment?

A. Lopinavir

B. Ritonavir

C. Enfuvirtide

D. Abacavir

Lopinavir is indeed a protease inhibitor used in the treatment of HIV, often in combination with ritonavir to enhance its effectiveness. Ritonavir, as the answer hints, is also a protease inhibitor that plays a critical role in HIV therapy. In fact, ritonavir was one of the first protease inhibitors approved for the treatment of HIV and is used primarily for its ability to boost the plasma concentrations of other protease inhibitors when taken together. Enfuvirtide is not a protease inhibitor; it is a fusion inhibitor that works differently by preventing the HIV virus from entering human cells. Abacavir, on the other hand, is a nucleoside reverse transcriptase inhibitor (NRTI) and functions by inhibiting reverse transcriptase, an enzyme crucial for viral replication. Thus, ritonavir stands out as a cornerstone in antiretroviral therapy due to its ability to inhibit the HIV protease enzyme, thereby preventing the maturation of viral particles and lowering viral load in patients.

SAMPLE

6. Which of the following is a common side effect of bupropion?

A. Increased appetite

B. Dry mouth

C. Fatigue

D. Weight gain

Bupropion is known for its stimulating properties and is often prescribed as an antidepressant and for smoking cessation. A common side effect associated with the use of bupropion is dry mouth, or xerostomia. This occurs due to bupropion's effect on neurotransmitters in the brain, particularly its influence on dopamine and norepinephrine, which can subsequently impact salivary gland function and result in decreased saliva production. Patients may experience dryness in their mouth, making it uncomfortable and affecting their ability to eat or speak properly. The other options, while they may be side effects of other medications or conditions, are not typically associated with bupropion. For instance, increased appetite and weight gain are more commonly linked to other antidepressants, particularly those that influence serotonin levels, while fatigue can also be a side effect of various medications but is not a hallmark of bupropion use. Thus, dry mouth stands out as a prevalent and characteristic side effect of bupropion.

7. What is the primary function of warfarin in the body?

A. It increases blood cell production

B. It blocks the formation of clotting factors in your blood

C. It promotes the absorption of calcium

D. It acts as a blood pressure stabilizer

Warfarin's primary function in the body is to inhibit the synthesis of vitamin K-dependent clotting factors, such as factors II, VII, IX, and X. This action effectively blocks the formation of clots, making it an essential anticoagulant medication used to prevent and treat thromboembolic disorders. This mechanism is crucial for individuals at risk of blood clots, as it reduces the potential for events such as deep vein thrombosis (DVT) and pulmonary embolism. By interfering with the production of these clotting factors, warfarin helps maintain appropriate blood flow and prevents the complications that can arise from excessive clot formation. The other options do not accurately represent the primary function of warfarin in the body. Increasing blood cell production pertains to hematopoiesis and is regulated by other factors. The absorption of calcium is typically influenced by vitamin D and is not a role associated with warfarin. Lastly, warfarin does not stabilizing blood pressure; it is specifically an anticoagulant rather than a antihypertensive agent.

SAMPLE

8. Which symptom is least likely to be associated with the use of diphenhydramine?

A. Sedation

B. Dry mouth

C. Constipation

D. Increased heart rate

Diphenhydramine is an antihistamine commonly used for its sedative effects, particularly in the treatment of allergies and as a sleep aid. Its anticholinergic properties contribute to various side effects. The sedative effect is one of the most well-known and expected outcomes when using diphenhydramine, making sedation a common symptom. Dry mouth is another frequent side effect associated with diphenhydramine and other medications with anticholinergic activity due to their impact on saliva production. Constipation can also occur, as anticholinergics can reduce gastrointestinal motility, leading to less frequent bowel movements. While diphenhydramine can cause various side effects, an increased heart rate is less likely to be associated with it. Antihistamines like diphenhydramine generally do not typically stimulate the heart; rather, they may lead to changes in heart rhythm in some cases but are more often associated with a calming or sedating effect. Therefore, an increased heart rate, while it may occur due to other factors or in sensitive individuals, is least likely to be a common symptom of diphenhydramine use when compared to sedation, dry mouth, and constipation.

9. Which of the following medications is classified as a rapid-acting insulin?

A. Lantus

B. Humalog

C. Glargine

D. Levemir

Humalog, also known as insulin lispro, is classified as a rapid-acting insulin. This type of insulin is designed to be absorbed quickly into the bloodstream, making it effective for controlling postprandial blood glucose levels. Rapid-acting insulins typically start working within 15 minutes after injection, peak in about 1 to 2 hours, and can last for a few hours, providing flexibility for patients who need to manage their blood sugar around mealtimes. In contrast, Lantus (insulin glargine) and Levemir (insulin detemir) are both long-acting insulins that provide a steady level of insulin over a 24-hour period, which is useful for maintaining baseline insulin levels throughout the day and night. Choosing a rapid-acting insulin like Humalog allows for better control of immediate blood sugar spikes that occur after eating, making it crucial for mealtime use. The differences in action and duration between rapid-acting and long-acting insulins highlight the specific use and planning involved in insulin therapy for diabetes management.

SAMPLE

10. How many drops per minute should the nurse set the IV to administer 1000 mL of 5% dextrose in 0.9% saline over 4 hours?

A. 25 drops per minute

B. 50 drops per minute

C. 63 drops per minute

D. 75 drops per minute

*To determine the correct number of drops per minute for the intravenous (IV) administration of 1000 mL of 5% dextrose in 0.9% saline over a period of 4 hours, you can follow these steps: 1. **Calculate the total volume to be infused**: This is given as 1000 mL. 2. **Determine the total time in minutes**: Since the infusion is to be administered over 4 hours, convert this to minutes: 4 hours × 60 minutes/hour = 240 minutes. 3. **Calculate the rate in mL per minute**: Divide the total volume by the total time: 1000 mL ÷ 240 minutes = approximately 4.17 mL/min. 4. **Convert mL per minute to drops per minute**: The IV drop factor (also known as the drip factor) is essential here. For this calculation, you need to know the drop factor (e.g., 15 drops/mL, 20 drops/mL, etc.). However, since the exact drop factor isn't specified in the question, a commonly used drop factor for IV fluids is 20 drops/mL. 5. **Use the*

SAMPLE

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://kaplanpharmacologyintegr.examzify.com

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

SAMPLE