NLN PHARMACOLOGY PRACTICE EXAM (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. **A client taking pravastatin (Pravachol) should be advised to monitor for which potential side effect?**

   A. Hypertension

   B. Myalgia

   C. Tremors

   D. Tachycardia

2. **Which of these parameters should a nurse plan to monitor for a client who is receiving spironolactone (Aldactone)?**

   A. Body weight

   B. Heart rate

   C. Urine (acetone) level

   D. Pulse oximetry

3. **Which medication should the nurse question in a client with renal failure?**

   A. Calcitriol (Rocaltrol)

   B. Diphenhydramine hydrochloride (Benadryl)

   C. Ampicillin sodium (Omnipen-N)

   D. Tobramycin sulfate (Nebcin)

4. **Which adverse effect is listed for methylprednisolone in the following options?**

   A. Fatigue

   B. Diarrhea

   C. Sort throat

   D. Weight loss

5. **During PPD testing, which statement describes the correct technique to perform the test?**

   A. Ensure the wheel forms

   B. Point the bevel of the needle downward

   C. Massage the area after the injection

   D. Use a 22 gauge, one-inch needle

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6. Which of the following is a common side effect to monitor when giving cefotaxime (Claforan)?

A. Diarrhea

B. Vertigo

C. Tinnitus

D. Insomnia

7. Which location is proper for administering eye drops?

A. Directly onto the client's eye

B. Into the client's lower conjunctival sac

C. Underneath the client's pupil

D. Onto the inside corner of the client's eye

8. What is the approach to antibiotics in a patient with penicillin allergy?

A. Assess allergy severity; avoid penicillins if severe; choose alternative antibiotics and monitor

B. Always avoid penicillins

C. Desensitize without testing

D. Ignore allergy if mild

9. Prior to administering metoprolol tartrate (Lopressor), a nurse should measure which parameter?

A. Urine output

B. Capillary refill

C. Body weight

D. Heart rate

10. Which statement about clarithromycin (Biaxin) at home is correct?

A. You may experience dizziness when changing positions

B. Avoid citrus juice

C. Finishing taking all of these pills

D. Stop this medication if you develop nausea

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Answers

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

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Explanations

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1. A client taking pravastatin (Pravachol) should be advised to monitor for which potential side effect?

A. Hypertension

B. Myalgia

C. Tremors

D. Tachycardia

The main idea here is that statin therapy can cause muscle-related adverse effects, with myalgia being the most common symptom to watch for. Pravastatin works by inhibiting HMG-CoA reductase to lower cholesterol, but this mechanism can also impact muscle cells in some people, leading to muscle pain or weakness. Patients should report new or worsening muscle aches, tenderness, or weakness, especially if accompanied by dark urine or if strength declines, since these could signal more serious myopathy or even rhabdomyolysis. Monitoring might also include checking a creatine kinase level if symptoms are present or if there are other risk factors or drug interactions that could raise statin levels. Hypertension, tremors, and tachycardia are not typical side effects associated with pravastatin, so they are not the primary concerns to monitor for during statin therapy.

2. Which of these parameters should a nurse plan to monitor for a client who is receiving spironolactone (Aldactone)?

A. Body weight

B. Heart rate

C. Urine (acetone) level

D. Pulse oximetry

Spironolactone is a potassium-sparing diuretic that blocks aldosterone, promoting fluid loss while conserving potassium. The main way a nurse tracks how the drug is affecting the patient's fluid status is by monitoring body weight. Daily weights provide a sensitive, practical measure of changes in extracellular fluid: if weight decreases, it often indicates effective diuresis and edema reduction; if weight rises or fails to decrease, it can signal fluid retention or overdiuresis. Other choices don't directly reflect the drug's effect on fluid balance. Heart rate can vary for many reasons and isn't a primary indicator of spironolactone response. Urine acetone isn't related to this therapy, and pulse oximetry monitors oxygenation, not the diuretic's impact. In practice, you'd also monitor laboratory values, especially potassium and kidney function, because spironolactone can raise potassium levels and affect renal function, but among the given options, daily body weight best captures the patient's response to the diuretic.

3. Which medication should the nurse question in a client with renal failure?

A. Calcitriol (Rocaltrol)

B. Diphenhydramine hydrochloride (Benadryl)

C. Ampicillin sodium (Omnipen-N)

D. Tobramycin sulfate (Nebcin)

In renal failure, drugs cleared by the kidneys can accumulate and cause toxicity, especially those with inherent nephrotoxicity. Tobramycin sulfate is an aminoglycoside that is almost completely eliminated by the kidneys. Its major risks are nephrotoxicity and ototoxicity, so when kidney function is impaired, its clearance drops and drug levels can rise to harmful levels. Because of that, the nurse should question continuing standard dosing or administration of tobramycin in a client with renal failure and coordinate a dose adjustment or an alternative therapy with the prescriber, while monitoring levels if its use is necessary. The other medications are not as critically problematic in this context: calcitriol is used to manage mineral and bone disorders in renal disease and is dosed accordingly; diphenhydramine can be used with caution in renal impairment; ampicillin often requires dose modification but is not inherently nephrotoxic in the same way aminoglycosides are.

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4. Which adverse effect is listed for methylprednisolone in the following options?

A. Fatigue

B. Diarrhea

C. Sort throat

D. Weight loss

Systemic corticosteroids like methylprednisolone suppress the immune system, so they can increase the risk of infections. A sore throat can be an early sign of an infection, which makes it a plausible adverse effect listed for this drug. Fatigue and diarrhea aren't typical direct adverse effects of systemic methylprednisolone, and weight loss is not expected—steroids more often cause weight gain and fluid retention. So sore throat best matches the drug's adverse effect profile.

5. During PPD testing, which statement describes the correct technique to perform the test?

A. Ensure the wheel forms

B. Point the bevel of the needle downward

C. Massage the area after the injection

D. Use a 22 gauge, one-inch needle

The key idea is that tuberculin skin testing must be done intradermally so the antigen sits in the dermis and forms a small bleb, or wheel, at the site. That wheal indicates the injection was placed correctly in the dermal layer. To achieve this, the needle is used with the bevel oriented up so the injection deposits just beneath the skin surface and creates the characteristic wheal. Poking with the bevel downward would tend to place the material deeper and fail to produce the proper wheal. Avoid massaging the area after the injection, since rubbing can spread the antigen and alter the reading. And using a larger gauge and longer needle, like a 22-gauge, one-inch needle, increases the chance of going deeper than the dermis and is not appropriate for intradermal delivery.

6. Which of the following is a common side effect to monitor when giving cefotaxime (Claforan)?

A. Diarrhea

B. Vertigo

C. Tinnitus

D. Insomnia

When giving cefotaxime, the most common adverse effect to watch for is diarrhea. This occurs because antibiotics disrupt the normal balance of gut bacteria, which can lead to loose stools and sometimes more serious intestinal inflammation like pseudomembranous colitis. If diarrhea develops, assess hydration, electrolyte status, and consider evaluating for a Clostridioides difficile infection if it becomes persistent or severe. Vertigo and tinnitus aren't typical side effects of cephalosporins, and insomnia isn't commonly linked to this class of antibiotics. While cefotaxime can cause allergic reactions or rash in some patients, diarrhea remains the most frequently observed to monitor.

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7. Which location is proper for administering eye drops?

A. Directly onto the client's eye

B. Into the client's lower conjunctival sac

C. Underneath the client's pupil

D. Onto the inside corner of the client's eye

Eye drops work best when placed in the lower conjunctival sac, the pocket formed between the lower lid and the eyeball. This space acts as a reservoir, so the drop stays near the surface and spreads evenly across the eye as you blink. It also protects the cornea from direct contact, minimizing irritation or damage, and reduces the chance that the droplet contaminates the applicator. After placing the drop, gently closing the eye and applying light pressure at the inner corner helps keep the medication from draining into the tear duct, which lowers systemic absorption. Dropping directly onto the surface of the eye can cause stinging and may not deliver the medicine effectively. Placing it under the pupil or on the inside corner of the eye isn't a proper delivery site and can lead to poor distribution or rapid drainage away from the eye.

8. What is the approach to antibiotics in a patient with penicillin allergy?

A. Assess allergy severity; avoid penicillins if severe; choose alternative antibiotics and monitor

B. Always avoid penicillins

C. Desensitize without testing

D. Ignore allergy if mild

Assessing penicillin allergy hinges on evaluating how serious the reaction was and weighing that risk against the infection you're treating. Start with a careful history to determine if the reaction was likely IgE-mediated (such as anaphylaxis, wheeze, or swelling) or more mild (like a nonallergic rash or GI upset), and how long ago it occurred. If the reaction was severe or the history is unclear and the risk of anaphylaxis is significant, penicillins should be avoided and an alternative antibiotic chosen with appropriate monitoring. If the history suggests a mild or uncertain reaction, penicillin can sometimes be used after clarification, often guided by allergy testing. Penicillin skin testing can help confirm tolerance; a negative test generally allows for penicillin use with standard monitoring. Desensitization is a valid option only when penicillin is essential and no suitable alternatives exist, and it must be done in a controlled setting. In all cases, don't ignore the allergy label. Confirm or clarify the allergy and tailor antibiotic choices to the patient's risk and the infection, using alternatives when needed and reserving penicillin- or beta-lactam–based therapy for situations where benefits clearly outweigh risks.

9. Prior to administering metoprolol tartrate (Lopressor), a nurse should measure which parameter?

A. Urine output

B. Capillary refill

C. Body weight

D. Heart rate

Metoprolol tartrate is a beta-blocker that slows the heart rate and reduces myocardial contractility. Before giving it, you need a baseline heart rate because a low pulse indicates the drug could push the heart rate into bradycardia and potentially lower cardiac output. If the heart rate is too slow (for example, below about 60 bpm) you would typically hold the dose and reassess or notify the prescriber. Urine output, capillary refill, and body weight don't directly reflect how this medication will affect cardiac rhythm or conduction, so they're not the primary safety check for a beta-blocker at the bedside. The heart rate is the key parameter to monitor to prevent an adverse effect and to guide safe administration.

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10. Which statement about clarithromycin (Biaxin) at home is correct?

A. You may experience dizziness when changing positions

B. Avoid citrus juice

C. Finishing taking all of these pills

D. Stop this medication if you develop nausea

The main idea here is that finishing the full prescribed course of an antibiotic is essential. Clarithromycin, like other antibiotics, is given to eradicate the infection completely. If you stop early, some bacteria may survive and can become resistant to the drug, making the infection harder to treat now and in the future. That's why the best statement is to complete all the pills exactly as prescribed. In home use, if you experience nausea, don't stop the medication on your own—talk with your clinician first; they may suggest taking it with food or adjusting the plan. Dizziness or taking citrus juice aren't universal requirements for this medication, and stopping early due to side effects isn't advised without medical guidance. The key takeaway is to adhere to the full course unless your provider says otherwise.

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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:

https://nlnpharmacology.examzify.com

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

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