NPLEX II MINOR SURGERY 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. Before performing any minor office surgery, which is essential to obtain?

A. Informed consent

B. Blood pressure reading

C. Allergy testing

D. Vaccination status

2. Granuloma annulare is most appropriately treated with which therapy?

A. Topical steroids

B. Oral antibiotics

C. Cryotherapy

D. Intralesional triamcinolone

3. Nylon sutures are favored for continuous sutures because they are which?

A. Color-coded and rigid

B. Highly reactive and stiff

C. Low reactivity and slippery

D. Absorbable and fast-dissolving

4. Which description correctly differentiates lichen planus from lichen simplex, focusing on planus?

A. Lichen planus shows Wickham's striae on polygonal flat-topped papules

B. Lichen simplex shows Wickham's striae

C. Lichen planus is contagious

D. Lichen planus presents with diffuse vesicular lesions

5. Which conditions comprise the differential diagnosis for pityriasis alba?

A. Eczema and psoriasis

B. Vitiligo and tinea versicolor

C. Melanoma and basal cell carcinoma

D. Herpes zoster and impetigo

6. Amide local anesthetics are primarily metabolized in which organ?

A. Liver

B. Lungs

C. Kidneys

D. Spleen

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7. Which lesion is a rapidly enlarging, dome-shaped lesion with a keratin-filled crater?

A. Squamous cell carcinoma

B. Keratoacanthoma

C. Basal cell carcinoma

D. Actinic keratosis

8. Tungsten carbide tipped needle holders have which advantage over standard blunt-nosed needle holders?

A. Hold better than smooth, with less damage to sutures than toothed

B. Are less durable than blunt-nosed

C. Are cheaper than standard blunt-nosed needle holders

D. Do not differ in performance

9. Which statement is accurate about the first-phase wound healing processes?

A. The first phase involves vasoconstriction, platelet aggregation, and fibrin formation

B. The first phase is defined by granulation tissue formation

C. The first phase is characterized by epithelialization only

D. The first phase occurs days after injury

10. Which safety requirement is needed before starting isotretinoin therapy?

A. Positive pregnancy test

B. Negative pregnancy test and informed consent

C. No testing needed

D. Only physician consent

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Answers

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

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Explanations

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1. Before performing any minor office surgery, which is essential to obtain?

A. Informed consent

B. Blood pressure reading

C. Allergy testing

D. Vaccination status

Informed consent is essential before any minor office surgery because it protects patient autonomy and sets the ethical and legal framework for care. It means clearly explaining what will be done, the risks and benefits, possible alternatives, and what could happen if the procedure is not performed, so the patient can make a voluntary, well-informed decision. The patient—or their legal representative—must understand this information, have the capacity to decide, and be free from coercion, with their consent documented. Safety screenings like checking blood pressure help assess perioperative risk and ensure the patient is fit for the procedure, but they do not substitute for obtaining consent. Allergy history or testing and vaccination status may be relevant in specific cases, but they are not universally required to proceed with a minor office procedure. In rare emergencies where delaying treatment would cause significant harm, care may proceed without consent, but that exception is limited and depends on the situation.

2. Granuloma annulare is most appropriately treated with which therapy?

A. Topical steroids

B. Oral antibiotics

C. Cryotherapy

D. Intralesional triamcinolone

Granuloma annulare is driven by localized granulomatous inflammation in the dermis, so the most effective approach is delivering anti-inflammatory therapy directly into the lesion. Injected corticosteroids like triamcinolone deliver a high local concentration that suppresses macrophage activity and cytokine production, leading to regression of the granulomatous tissue and flattening of the plaques. Topical steroids often don't penetrate thick granulomatous plaques well enough to be effective, which limits their usefulness here. Oral antibiotics aren't targeted at this non-infectious inflammatory process, so they're not a standard treatment. Cryotherapy can damage surrounding skin and cause pigment changes or scarring, making it a less ideal option for auricular or flexural plaques and generally not first-line for localized GA.

3. Nylon sutures are favored for continuous sutures because they are which?

A. Color-coded and rigid

B. Highly reactive and stiff

C. Low reactivity and slippery

D. Absorbable and fast-dissolving

For a running or continuous suture technique, you want a material that causes minimal tissue irritation and can glide smoothly through tissue. Nylon is relatively inert, so it produces low tissue reactivity, which helps reduce inflammation and scarring along the wound. Its surface is also very smooth and slippery, which minimizes friction as the suture is passed and as knots are tightened. That combination—low inflammatory potential and reduced tissue drag—makes it easier to advance the suture evenly along the wound and maintain consistent tension without tearing or snagging tissue. Nylon is nonabsorbable, so it retains its strength over time, which is another practical advantage for a continuous pattern in many clinical settings.

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4. Which description correctly differentiates lichen planus from lichen simplex, focusing on planus?

A. Lichen planus shows Wickham's striae on polygonal flat-topped papules

B. Lichen simplex shows Wickham's striae

C. Lichen planus is contagious

D. Lichen planus presents with diffuse vesicular lesions

Wickham's striae on polygonal flat-topped papules are the hallmark of lichen planus. Those fine white lines visible on the surface of the lesions help distinguish planus from lichen simplex chronicus, which presents as thickened, leathery plaques from chronic scratching and lacks these characteristic Wickham's striae. Planus is not contagious, and diffuse vesicular lesions are not typical of classic lichen planus, reinforcing that the presence of Wickham's striae on the classic papules is the best description for differentiating planus from its counterpart.

5. Which conditions comprise the differential diagnosis for pityriasis alba?

A. Eczema and psoriasis

B. Vitiligo and tinea versicolor

C. Melanoma and basal cell carcinoma

D. Herpes zoster and impetigo

When you see pale, slightly scaly patches on a child's face, the most relevant differential to consider is other causes of hypopigmented patches, especially vitiligo and tinea versicolor. Vitiligo presents as depigmented, sharply defined patches with no scale, often on the face or hands, reflecting loss of melanocytes. Tinea versicolor causes hypopigmented (or sometimes hyperpigmented) patches with fine scale, commonly on the trunk but may appear on the face in darker-skinned individuals, due to Malassezia infection. Pityriasis alba itself tends to have ill-defined patches with mild scaling and is common in children. Other choices don't fit as well because eczema and psoriasis produce inflammatory plaques with noticeable erythema and scaling rather than smooth, pale patches; melanoma and basal cell carcinoma are neoplasms with distinct pigmented or altered lesions more typical in adults; herpes zoster and impetigo present with vesicles or crusted erosions, not the subtle hypopigmented patches seen with pityriasis alba.

6. Amide local anesthetics are primarily metabolized in which organ?

A. Liver

B. Lungs

C. Kidneys

D. Spleen

Amide local anesthetics are inactivated mainly by the liver. They are metabolized by hepatic enzymes—primarily amidases and parts of the cytochrome P450 system—into inactive metabolites, with the kidneys responsible for excreting those metabolites. The lungs and spleen don't play a significant role in their metabolism, and this is in contrast to ester local anesthetics, which are rapidly hydrolyzed by plasma cholinesterases. Clinically, impaired liver function slows this metabolism, prolonging effects and raising toxicity risk, which reinforces why the liver is the primary organ involved.

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7. Which lesion is a rapidly enlarging, dome-shaped lesion with a keratin-filled crater?

A. Squamous cell carcinoma

B. Keratoacanthoma

C. Basal cell carcinoma

D. Actinic keratosis

Keratoacanthoma is characterized by a brisk growth phase that creates a dome-shaped nodule with a central crater filled with keratin. This rapid enlargement over weeks and the distinctive keratin-filled center are classic clues. It most often appears on sun-exposed skin of older adults and can resemble squamous cell carcinoma, which is why excision or biopsy is commonly performed to confirm the diagnosis and treat it. In contrast, a basal cell carcinoma typically presents as a pearly, translucent nodule with telangiectasias and rolled borders, not a crater with keratin. An actinic keratosis appears as a rough, scaly patch or plaque, usually lacking the dome shape and central keratin plug. A squamous cell carcinoma can look similar in some respects but tends to be a more invasive lesion with irregular borders or ulceration rather than a clean central keratin crater in a rapid-growth dome.

8. Tungsten carbide tipped needle holders have which advantage over standard blunt-nosed needle holders?

A. Hold better than smooth, with less damage to sutures than toothed

B. Are less durable than blunt-nosed

C. Are cheaper than standard blunt-nosed needle holders

D. Do not differ in performance

Tungsten carbide tipped needle holders improve grip and protect sutures because the carbide inserts are extremely hard and resist dulling. This means the bite remains sharp and the instrument maintains a firm, slip-free hold on sutures longer than standard smooth jaws. At the same time, using carbide tips with a smooth or minimally textured jaw reduces trauma to the suture compared with toothed designs—teeth can nick or crush sutures, whereas the carbide bite provides secure control without slicing into the suture. So, these tips offer a better hold than smooth-nosed holders and cause less suture damage than toothed jaws, making them advantageous for precision suturing.

9. Which statement is accurate about the first-phase wound healing processes?

A. The first phase involves vasoconstriction, platelet aggregation, and fibrin formation

B. The first phase is defined by granulation tissue formation

C. The first phase is characterized by epithelialization only

D. The first phase occurs days after injury

The first phase of wound healing is the immediate hemostatic response that sets up the wound for healing. Right after injury, blood vessels constrict to limit bleeding, then platelets are recruited and aggregate to form a plug. The coagulation system activates to form a fibrin clot, which stabilizes the wound and provides a scaffold for inflammatory cells to arrive. This sequence—vasoconstriction, platelet aggregation, and fibrin formation—defines the initial phase. Granulation tissue formation and epithelialization are part of later stages, not the first phase. Epithelialization happens as keratinocytes migrate to restore the epidermis, and granulation tissue forms during the proliferative phase as new connective tissue and blood vessels rebuild the wound bed. The first phase occurs promptly, not days after injury.

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10. Which safety requirement is needed before starting isotretinoin therapy?

A. Positive pregnancy test

B. Negative pregnancy test and informed consent

C. No testing needed

D. Only physician consent

Isotretinoin is highly teratogenic, so safety hinges on confirming the patient is not pregnant and ensuring they understand the risks and required precautions before starting therapy. A negative pregnancy test before initiation confirms there is no current pregnancy, while informed consent documents that the patient understands the birth defects risk, the need for strict contraception, and other monitoring requirements. A positive pregnancy test would prevent starting treatment, and simply having physician consent does not address the critical fetal safety concerns. While ongoing testing and monitoring are also important, the essential prerequisite before beginning isotretinoin is a negative pregnancy test paired with informed consent.

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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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